

## Strategic Objectives 2018/19 – Quarter 1 review

Strategic Objective	Executive Lead	Deliverables	Delivered in Quarter 1	Key Milestones for Quarters 2 to 4
<b>[1] Quality and Patient Experience</b>				
Improve safety culture;	Director of Nursing/ Director of Corporate Affairs	<ul style="list-style-type: none"> <li>• Develop vision and strategy for Freedom to Speak Up and implement new guidance including self- review tool</li> <li>• Further embed Safety Seven</li> <li>• Improve incident reporting</li> <li>• Harms monitoring</li> <li>• To review and develop mechanisms in place to develop, promote, learn from and monitor FTSU activity in the wider context of patient safety and staff experience</li> <li>• LIA / improvement work – quarterly pulse check</li> </ul>	Safety seven knowledge is assessed as part of the EECS assessments and all areas are aware of it. Good progress with harms overall. Falls numbers are within target and no avoidable pressure ulcers. LIA/service improvement work progressing well. Three improvement events held and planning for service improvement projects to commence in Q2 is in progress. Launch of LIA in Q2.	Continue to embed the safety seven. Ensure delivery of the LIA/Service improvement project plan. Board to complete self-evaluation of FTSU arrangements and agree action plan.
Embed organisational	Medical Director	<ul style="list-style-type: none"> <li>• Maintain / embed Organisational Learning</li> </ul>	Organisational learning part of divisional governance and	Single repository for all learning. Level of detail in LFD

learning such that there is clear evidence of observable changes in practice		<p>processes</p> <ul style="list-style-type: none"> <li>Quarterly LFD report to BoD</li> <li>Focus on evidence to support LFD in 2018/19 – divisions and OB</li> <li>Triumvirates to review and refine process for review of learning</li> </ul>	operational board. Trust wide sharing and learning fortnightly. Quarterly LFD report to BoD and increasing detail of deaths and learning.	report to be discussed. Monitor quality of OL.
Retain CQC outstanding	Director of Nursing	<ul style="list-style-type: none"> <li>Sharpen process for communicating MRG outcomes</li> <li>On-going programme of mock inspections</li> <li>Continue sharing &amp; learning</li> </ul>	A comprehensive programme of mock inspections has completed and the outcome reported to the Board.	A well led mock inspection is planned for September/October and will be reported to the Board in Q3
Deliver an improvement plan in response to GIRFT Report	Medical Director	<ul style="list-style-type: none"> <li>GIRFT action plan delivered from national and local reports</li> </ul>	GIRFT action plan for CTS established.	Report to BoD November 2018. Meeting with North West Hub Q2. Consider GIRFT champion.
<b>[2] Research and Innovation</b>				
Implement robotics programme	Director of Strategic Partnerships/Chief Operating Officer	<p>To demonstrate delivery against business case objectives relating to:</p> <ul style="list-style-type: none"> <li>Research programme</li> <li>Length of Stay savings</li> <li>Outcomes</li> <li>Plan for development of</li> </ul>	We are currently delivering the predicted length of stay reductions that were included within the business case. Outcomes are currently being monitored on a patient by patient basis and the outcomes information will be shared	Research Plan to be shared together with the plans for the development of the hybrid procedure.

		hybrid procedures	by the appropriate governance channels. The work regarding research and the plan for the development of hybrid procedures are phased for the latter part of the year.	
Deliver transition plan for Congenital Heart Disease	Director of Strategic Partnerships/Chief Operating Officer	Implement safe transfer of services in line with NHS England timescales	NHSE specialist commissioners have outlined the governance process for ensuring the safe transferring of services to the Liverpool Partnership. The Trust are currently pulling together a folder of evidence which will be send to the specialist commissioners by 17 <sup>th</sup> July 2018 and we are expecting an assurance visit on 3 <sup>rd</sup> August 2018.	Outcome of the assurance visit and agreed timescales to start the service transition and implementation.
Deliver informatics review action plan and establish assurance mechanism for data quality;	Chief Finance Officer	Develop digital strategy Deliver milestones in action plan including work in relation to data warehouse, reporting, staffing, governance. Establish Data Quality Assurance Framework	Strategy workshops held with key stakeholders in Trust and draft 3 year strategy and roadmap has been produced. Action plan being progressed and update provided to BoD in July 2018. Established PAS programme to oversee required improvement work.	Continued progression BI with action plan. Delivery of milestones as set out in PAS programme. CIO starting in October 2018
Raise the Trust's academic profile and increase the number of academic appointments	Director of Research and Innovation	No. staff with academic appointment. Includes honorary, or University person working predominantly from our site. Applies to both research and educational appointments.	Eight honorary senior lecturer appointments made with University of Liverpool.  Process for honorary appointments with University of Liverpool for	On boarding of Professor of Cardiovascular Medicine, Reader in Cardiovascular Health and Research Fellow team in Q4. Plan for minimum of two

		Target 5 for 2018/19.	medics in place.	further appointments at senior level Q4.
Deliver Research and innovation Strategy milestones including attraction of research grants	Director of Research and Innovation	Achieve CRN recruitment. Target 900 for 2018/19	88 ahead of plan (313 actual vs. 225 plan)	Maintain position at or above plan.
Develop a strategy for good corporate citizenship	Chief Operating Officer/Director of Workforce	<ul style="list-style-type: none"> <li>Plan to be considered by Board of Directors in Q2 2018/19</li> <li>Implementation in line with agreed plan</li> </ul>	Plan approved by BoD in Q1.	Plan to be implemented in Quarters 2 to 4.
<b>[3] Finance and Value</b>				
Retain Segmentation 1 for under NHS Improvement's Single Oversight Framework	Executive lead in line with Single Oversight Framework (SOF) theme.	<ul style="list-style-type: none"> <li>SOF indicators monitored monthly.</li> </ul>	Segment 1 confirmed in quarter 1 QRM meeting with NHSI.	Continue to monitor monthly. NHS I assessment undertaken quarterly.
Develop business partner model and improve business intelligence	Chief Finance Officer	<ul style="list-style-type: none"> <li>Define role and operating model across finance, digital and HR functions.</li> <li>Identify skills, capability and capacity gaps</li> <li>Develop and deliver</li> </ul>	Finance business partners now all in post. BPs all attended divisional reviews in Q1 BI strategy and reporting improvements being addressed through Informatics action plan.	Develop operating model, skills gap analysis and training plan in partnership with divisions (Q2+3). Review of structure in Informatics to take place when CIO takes up post (Q3).

		<p>training plan.</p> <ul style="list-style-type: none"> <li>• Divisional reviews to ensure evidence of and reinforce BP model.</li> <li>• Deliver BI strategy and divisional dashboards</li> </ul>		Implementation of operating model (Q3&4).
Operate Use of Resources Framework in shadow form	Chief Finance Officer	Shadow in place by Q2 in readiness for implementation Q3 & Q4	Shadow arrangements being developed as part of mock inspection arrangements. Training on model hospital being provided to targeted groups.	Mock UoR assessment in Q3 as part of mock well led assessment. Continue to embed Model Hospital Q3&4
Embed Accountability Framework	Chief Finance Officer	Simplify framework for 2018/19 and link to key deliverables	Framework in development.	Framework finalised for review by Operational board in September 2018 and introduced in Q3 and Q4.
Private patient strategy	Chief Finance Officer	Deliver 2018/19 targets set out in private patient strategy	Business Case approved. Procurement process for build has been completed and project plan in place. PP manager recruited and governance strengthened	Implementation of project in line with project plan Monitor income against budget each month
Develop new international business models	Chief Finance Officer	Develop 10 new international business models for future exploration with at least one contract signed in 2018/19	Explored commercial opportunities with a number of international partners in China, Middle East, India and UK. Developed links with UK partners and government agencies. 3 formal proposals issued, hosted 2 international visits, presented at 2	Development of offer and marketing. Submission of 1 formal proposal per quarter. Follow-up existing proposals and contracts. Development of opportunities in each target market.

			conferences/exhibitions. Signed first contract with Indo UK Institute of Health (£5k design review)	Attendance at ArabHealth (Q4), and other trade missions/exhibitions as appropriate. Develop health tourism within PP development.
<b>[4] Best NHS Employer</b>				
Listen, involve and develop Team LHCH through delivery of an effective staff engagement plan	Director of Workforce	<ul style="list-style-type: none"> <li>• Implementation of LIA</li> <li>• Quarterly updates on delivery of 'Team LHCH' strategy</li> <li>• Improve engagement scores / LIA pulse checks</li> <li>• Measures and report on staff experience</li> <li>• NED &amp; Exec walkabouts</li> </ul>	<p>LIA pulse survey and leadership survey complete (excellent feedback and completion rates) Feedback session to board 2 x Service Improvement priority staff events Senior leadership session Dashboard reported to People Committee (PC) against Team LHCH objectives Annual Review of Team LHCH objectives presented to PC June 18 Staff Survey results to board and COG with staff engagement score Draft retention plan to Ops board and PC Equality data published in line with public duty Appraisal window open Q1 WFP submitted as part of annual plan Team building sessions to address</p>	<p>Team LIA Launch day 30/7/18 Service Improvement – Q3 90 day cycle projects commence September. Staff Survey 2018 launch Oct 18 results Q4 to measure engagement score LIA Crowd fixing sessions Q3 Recruitment and Retention strategy Q3 Ops board (Sept 18) Appraisal window closes in Q2 Implement pay award Q2 H&amp;WB Staff Strategy to Ops board Q3 (Oct 18) Revised Equality and Inclusion Strategy to Ops Board Q3 (Nov18) Review schedule and reporting of walkabouts in Q2</p>

			poor culture areas	
Build capability for outstanding leadership at all levels	Director of Workforce	<ul style="list-style-type: none"> <li>• Learning and development plan to be developed in Q1 2018/19</li> <li>• Succession planning / talent plan</li> </ul>	<p>Continuation of bespoke clinical leadership program completes in Sept 18</p> <p>Leadership Master Class programme in place</p> <p>Clinical skills programme in place</p> <p>ACHD training plan commenced Q1</p> <p>Level 1 Nurse Competency Framework introduced</p> <p>Proof of concept of talent management grids presented to senior nursing team</p> <p>Pilot Talent Grid for Finance and Workforce Teams complete</p> <p>Draft development of Education vision to Senior nursing team &amp; PC</p> <p>Clinical leads restructure with emerging leads identified by Q2</p>	<p>Implement new performance pay linked to appraisal by end of Q4</p> <p>Roll out Talent Grids Q3 and Q4 following pilot</p> <p>Development of leadership plan to Ops board Q2 to include new FTSUG leadership requirements</p> <p>Development of an Education Strategy Q3</p> <p>Level 2 and 3 nurse competency framework by Q2</p>
<b>[5] Partnerships</b>				
Lead and deliver the CVD programme	Director of Strategic Partnerships/Chief Operating Officer	Next steps programme for each of the priority areas.	There are clear plans in place for the next steps for Primary Pacing, ACS and Stroke. We have worked with the SRO's from the places to understand the individual plans in place.	To deliver the pilot projects in Primary Pacing, ACS and Stroke. To better understand and integrate the work of the CVD Programme with the place based plans.
Implement single cardiology pathway	Director of Strategic Partnerships/Chief Operating Officer	Produce proposals and implementation plans for the 6 priority areas	We have further developed the plans for delivery of TLOC, extended cardiac rehab and Heart Failure in line with the proposed savings from	To start to deliver the new or revised pathways of care for patients as per the plan. To start to develop proposals for

			the cardiology prescribing paper. This is now ready to present to the North Mersey DOF's meeting as planned.	the single cardiology service workforce plan to support the implementation of this work.
Improve the visibility and external promotion of surgical work	Director of Strategic Partnerships/Chief Operating Officer	Engagement plan to be developed by June 18	Newsletter has been developed and is in final draft for approval prior to circulation.	Visit to provider Trust's is planned for September 2018 onwards to raise Trust surgical profile.
Maintain active stakeholder engagement across the wider health and care partnership	Director of Strategic Partnerships/Chief Operating Officer	Continue to participate in established networks and meetings	The Trust is actively engaged with the work of the HCP (STP), local place development plans and also has an active plan to increase additional services i.e. LHCH @ model	To agree a plan for Southport, Arrowe Park and Liverpool as part of the workplan agreed following the senior leader's meeting in June.