



Trust Board Meeting 12 February 2015

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| Title of the paper: | Transformation delivery programme update | | |
| Agenda item: | 10/24 | | |
| Lead Executive: | Helen Brown, Director of Transformation | | |
| Author: | Helen Brown , Director of Transformation | | |
| Trust objective: | Tick as appropriate: <input checked="" type="checkbox"/> Achieving continuous improvement in the quality of patient care that we provide and the delivery of service performance across all areas; <input checked="" type="checkbox"/> Setting out our future clinical strategy through clinical leadership in partnership and with whole system working; <input checked="" type="checkbox"/> Creating a clear and credible long term financial strategy. | | |
| Purpose: | The aim of this paper is to provide a brief update to Board members on the Trust's Transformation Programme and related activity. | | |
| Previously discussed and date for further review: | | | |
| Committee | | Date | |
| Trust Leadership Executive Committee | | 29 January 2015 | |
| Benefits to patients and patient safety implications | | | |
| The Transformation Programme is designed to drive systematic improvement to the quality, safety, responsiveness and sustainability of the services provided by the Trust. | | | |
| Risk implications for the Trust | | Mitigating actions (controls) | |
| Failure to deliver Transformation Programme Priorities will compromise the trust's ability to improve clinical care and deliver a financially sustainable model of care. | | The Transformation Team is working to put in place clear programme delivery and PMO processes to support SROs to deliver against plan. | |
| Links to Board Assurance Framework, CQC outcomes, statutory requirements | | | |
| Legal implications (if applicable) | | | |
| Financial implications (if applicable) | | | |
| Recommendations (delete as appropriate) | | | |
| For information and assurance. | | | |

Trust Board meeting – 12 February 2015

Transformation Programme Update

Presented by: Helen Brown, Director of Transformation

1. Purpose

- 1.1 This paper provides an update to Board members on progress with the Trust's Transformation Programme including:
- WHHT Clinical Strategy development & the West Hertfordshire Whole System Review.
 - PMO arrangements and key risks and issues with individual programmes
 - Planning for 2015/16

2. WHHT Clinical Strategy and “Your Care, Your Say”

- 2.1 Board members will be aware that the first phase of the strategy work (baseline assessment) is now complete. The current phase of work is the development and modelling of a range of strategic scenarios that will help the Trust to better understand how it can deliver clinically and financially sustainable services in the future.
- 2.2 The Trust continues to work with HVCCG and partner organisations on the development of a whole system ‘case for change’. An interim case for change is due to be published in March 2016 with continued engagement with local residents, service users and stakeholders planned over March, April and May. A number of clinical working groups are being established (building on existing CCG planning forums). These groups have been asked to develop high level models of care over the next three months; these models of care will underpin future planning work on how services in West Hertfordshire need to be reshaped to ensure sustainable health and care services for the future.

3. Transformation Programme Delivery Update

- 3.1 A detailed briefing on Transformation Programme delivery was provided to the Transformation Committee on the 5th February 2015.
- 3.2 All programmes / projects now have PIDs in place and a monthly ‘checkpoint’ reporting cycle has been established to track progress and identify key risks and issues.
- 3.3 The following programmes were RAG rated RED as at January 2015.

| Project | Reason |
|-----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| RTT- Divisional Delivery Plans | The 90% standard of admitted patients seen in 18 weeks in December 2014 was delivered in line with the planned recovery trajectory. Achievement of the admitted standard by January 2015 is challenged due to an increase in the number of patients transferred to the admitted waiting list following a change in the pre operative assessment process (not included in initial modelling) and the impact of emergency care winter pressures. |
| Unscheduled Care | <p>A&E performance has deteriorated during December and January. A continued high level of attendances and admissions is a contributor, as is deterioration in the Trust's length of stay. Details of short term remedial actions are set out in the IPR report.</p> <p>There have been delays to the delivery of three of the projects set out within the unscheduled care programme. These are:</p> <ol style="list-style-type: none"> 1. Consolidation of the surgical assessment unit, delayed because of issues with the business case, currently being worked through with Finance team. 2. The development of a Gynaecology assessment unit, delayed because of Estate pressures. Build date now agreed of 09/02/15. 3. The implementation of Neurology Hot Clinics, delayed because of failure to recruit additional Medical resource (national issue in Neurology) Hot Clinics are running in Cardiology and Rheumatology and discussions are underway with Gastro. Continued efforts are being made to recruit in Neurology or use existing resource differently. <p>A detailed update and longer term action plan will be provided to the March Board.</p> |
| Performance Management Framework | Resource conflicts due to increasing demand for information submission to external partners and capacity within the analytics team has delayed the timetable for making further enhancements to the Trust Updates have been made to the report for the February Board and work will continue during 2015/16 to further strengthen the approach. The timetable for divisional performance reviews has been reviewed and future meetings will be chaired by the Chief Executive. |
| Maternity | Progress has been made on the development of a shared vision and strengthening team working. A detailed project plan has been developed to drive forward improvements to the service. |

- 3.4 As noted at the Transformation Committee a change control process has been put in place. Change requests are noted via the monthly checkpoint reports. A range of changes were approved by the Transformation Steering Group in December 2015 and are due to be discussed by the Transformation Committee at its meeting on the 5th February.
- 3.5 A programme risk register has been developed and fed into the Trust's corporate risk register. The key risks currently identified relate to delivery capacity (both within the Transformation Team and within the Operations Division and corporate directorates) and the relative under development of KPIs and benefits tracking methodologies. These risks will need to be addressed as part of the development of the 2015/16 Transformation Programme delivery arrangements.

4. Planning for 2015/16

- 4.1 The current key focus for the Transformation Director is to support the development of a clear set of transformation and delivery priorities for 2015/16 which will be reflected in the Trust's Operating Plan submission and form the core of the Trust's Transformation delivery plan / business plan for 2015/16.

4.2 Key dates:

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|------------------------------------------------------------------------|----------------------------------------------------|
| Transformation Committee presentation / discussion | 5 th February |
| TLEC Priority setting workshop | 10 th February |
| Second draft operating plan narrative circulated to Board members. | 20 th February |
| Further engagement and development of the plan (internal and external) | 23 rd February – 14 th March |
| Third draft plan developed | 20 th March |
| Transformation Committee review | date TBC |
| Final submission date | 10 th April |

- 4.3 Development of the proposed approach to the Trust's Transformation programme delivery support model for 2015/16 and beyond is also a priority. A recommended approach will be presented to the next Transformation Committee.

5. Recommendation

- 5.1 This update is provided for information and assurance.

Helen Brown

Director of Transformation
31 January 2015.