The Queen Elizabeth Hospital King's Lynn NHS Foundation Trust

REPORT TO THE BOARD OF DIRECTORS

SUBMITTED BY:	REPORT FOR:		IMPACT:		
Louise Proctor Director of Strategy and Transformation	Decision		High	Med	Low
CONSULTATION:	Information	✓	✓		
The Board Council of Governors Clinical Directors Clinicians/Teams across the Trust	REPORT TYPE:		RELATED WORK:		
	Strategic	✓	Values development OD Strategy refresh Monitor AQP and Business Plan 13/14		
	Operational				
	Governance				

BAF ref:	All
Monitor Compliance Framework:	
CQC Essential Standard Reference:	
NHSLA Standard Reference:	
Media / Communications:	N/A

Meeting Date: 25 February 2013
Report Title: QEH Strategy Refresh – Progress and Timetable

Purpose: To formally update the Board on progress with the Clinical Strategy Refresh, building on a presentation and discussion at the Governors Council in November 2012, and Trust Board workshops in December 2012 and January 2013.

Summary: This paper summarises the Strategy Refresh timeline previously reported to the Trust Board, and provides an update on progress to date. It then summarises and proposes the key next steps.

As agreed through the December 2012 Business Planning Board Paper, work is ongoing with the new Clinical Directors who commenced their roles in January 2013, to apply the key principles of the Clinical Strategy to their service lines, and ensure full clinical ownership of the final strategy.

Financial Implications / Efficiency Savings / Quality Improvement: None explicit at this stage, but financial and quality improvements are at the heart of any strategy. A commercial testing of the strategic direction will need to be undertaken in 2013/14.

Risk Assessment (cross-reference with Risk Register where appropriate):

Strategic / External	Operational/ Organisational	Financial	Clinical	Legal/ Regulatory	Reputational / Patient Experience
✓	✓		✓		✓

Recommendations:
To discuss key themes, and approve next steps.

Author Louise Proctor
Date 18 February 2013

QEH Strategy Refresh – Progress and Timetable

1 Overview of Board Strategy work to date

During Q1 and Q2 the Board undertook as series of strategy workshops, setting out a baseline challenge for the future of a relatively small DGH with ambitious. This built on a clinical workshop and Board development discussions in 2011/12. Areas covered include:-

- Medical Future Priorities
- National Health Policy
- Estate Strategy
- Benchmarking
- Competitor overview
- IM&T
- Commissioning
- Patient Experience and Values
- Integrated Care
- Partnerships

During Q2 and Q3 the focus moved internally, with departments and divisions being engaged in the challenge of developing the new clinical strategy for thee QEH, as a key healthcare provider for West Norfolk, North Cambridgeshire and South Lincolnshire.

During November 2012 key clinical themes emerging from the internal challenge on the future strategy of the QEH were discussed with the Governors Council, and key priorities identified have fed through into the new strategic Corporate Objectives and work priorities for 13/14.

During December and January 2013 the Trust Board have engaged in workshops where the development of a new Trust Vision, Values, Corporate Objectives and key Strategic Clinical Themes, have been discussed. These discussions are currently being fed into the drafting of a new Clinical Strategy, and the Director of Planning and Performance and the Director of Strategy and Transformation are working closely to ensure fit between the 13/14 Annual Business Plan, and the emerging Clinical Strategy.

2 The Challenges facing the NHS and the QEH

During all discussions with departments and clinicians, the core challenge discussed by the Trust Board at their various workshops was discussed. This scenario can be summarised as:

- Increasing Patient Choice
- The importance of patient feedback and influence on service design
- Financial reductions in tariff annually, and the link to public sector funding agreements.
- New Clinical Commissioning Groups
- The need to seek new and improved ways of providing quality and efficient healthcare.
- The rise of new competitors, and challenge of AQP
- The options for on and off-site working, in response to the need to be accessible to our service users.
- The need to modernise the hospital estate.

- The challenges of specialisation and new guidance, eg Royal Colleges
- Workforce and recruitment options and challenges
- The particular challenge for smaller acute trusts.

3 Corporate Objectives

Informed by the above workshops and the wider healthcare environment, the Board agreed to new Corporate Objectives at its meeting in December. These are:-

i) Develop new ways to provide access to services which are safe, personalised, timely and cost effective.

ii) Consistently provide and promote to users, an excellent patient experience.

iii) Continually review the Trust's portfolio to ensure it remains relevant to local communities and where appropriate develop complimentary partnerships, new delivery models or service growth.

iv) To develop a culture that supports the individual with professional development, and so secure an expert workforce that can shape services and have passion for great care.

v) To manage resources effectively and improve our financial strength in order to reinvest in service improvements and facilities.

vi) Ensure systems are in place to meet national and local regulatory and compliance standards.

vii) Further develop the Trust's corporate social responsibility for West Norfolk and beyond.

4 Next Steps

The Board will be asked to approve a revised Vision and Values at its March Board meeting, underpinned by the recently agreed Corporate Values.

The refreshed Clinical Strategy is currently being authored, building on the key themes agreed at workshops over the last two months. In particular, key themes include:-

- Improving Accessibility
- The use of technology to improve our service offering
- The critical need for clinical networks to underpin local services in West Norfolk and ensure the breadth of provision

- Diagnostics and the development of Ambulatory Care to provide a new service route for rapid diagnostics and care management arrangements
- Acute Outreach where it builds on core expertise
- Continued focus on day surgery and anaesthesia expertise

As agreed at the December meeting, the new Clinical Directors have been requested to develop a Service Line specific response to the agreed strategic themes during Q4. This work is ongoing.

The final strategy must be approved in line with the Monitor 13/14 APR submission for May 2013, which encompasses three years planning. The overarching strategy will be a longer term document, but will need annual review to ensure relevance going forward.

5 Engagement

Once the APR and New Strategy are approved, a wider internal and external engagement piece will need to be undertaken, particularly with key partners such as commissioners, GPs, and Borough and County Councils.

Louise Proctor
Director of Strategy and Transformation
18 February 2013