



Together

NHS

Lancashire Teaching
Hospitals

NHS Foundation Trust



Our Big Plan

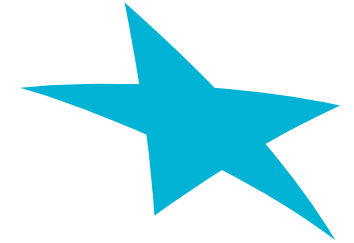
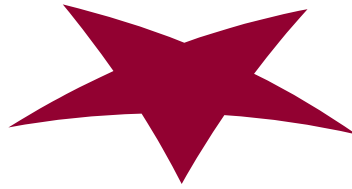
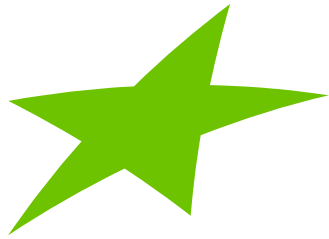


Always
Safety First

Strategy 2021 – 24

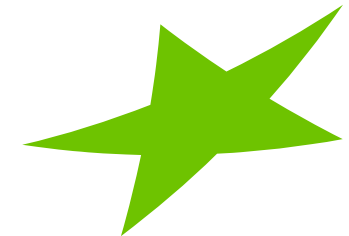
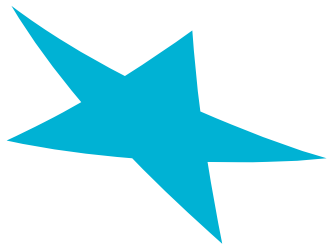
Updated July 2023 - showing final year 3 matrix

 @LancsHospitals



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Foreword

The success of an organisation is founded on having a clear strategy. A strategy outlines your commitments, it is your delivery promise and it identifies the things that you will do and achieve both now and in the future.

We are delighted to present our strategy in the form of the 'Our Big Plan'.

Peter White
Chair

Faith Button
Interim Chief Executive



Our context

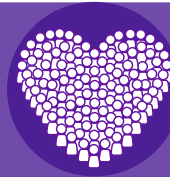
We are one of the largest acute Trusts in the country, providing district general hospital services to 370,000 people in Preston, South Ribble and Chorley and specialist care to 1.5 million people across Lancashire and South Cumbria.

Our mission is to always provide excellent care with compassion which we do from three facilities:

- Chorley and South Ribble Hospital
- Royal Preston Hospital
- The Specialist Mobility and Rehabilitation Centre

We are a values (left) driven organisation. Our values were designed by our staff and patients and are embedded in the way we work on a day to day basis.

We believe that to provide the best care, we need to continually improve the way in which we provide services. If we are to be the best, we need to continually seek improvement and embrace change, empowering our teams to develop ideas and drive them forward. In order to do this, we have adopted a continuous improvement approach and developed a strategy to support this.



Being caring and compassionate

Being caring and compassionate is at the heart of everything we do, we will understand what each person needs and strive to make a positive difference in whatever way we can.



Recognising individuality

We appreciate differences, making staff and patients feel respected and valued.



Seeking to involve

We will actively get involved and encourage others to contribute and share their ideas, information, knowledge and skills in order to provide a joined up service.



Building team spirit

We will work together as one team with shared goals doing what it takes to provide the best possible service.



Taking personal responsibility

We are each accountable for achieving improvements to obtain the highest standards of care in the most professional way, resulting in a service we can all be proud of.

Our strategic objectives are

- To provide outstanding and sustainable healthcare to our local communities
- To offer a range of high quality specialist services to patients in Lancashire and South Cumbria
- To drive health innovation through world class education, training and research

The delivery of excellent services to our local patients through the provision of district general hospital services is at the core of what we do. To achieve this we need to ensure we focus on meeting key quality and performance indicators so our patients can be assured of safe and responsive services.

As well as providing healthcare for our local patients, we are proud to be the regional centre for a range of specialist services. These services include:

- Major Trauma
- Cancer (including radiotherapy, drug therapies and cancer surgery)
- Disablement services such as artificial limbs and wheelchairs
- Neurosciences including neurosurgery and neurology (brain surgery and nervous system diseases)
- Specialist vascular surgery
- Renal (kidney diseases)

Our portfolio of services will continue to develop as the strategy for the provision of services across our region is developed by our commissioners, but the delivery of specialist services will remain at the heart of our purpose and the decisions we take in our day to day activities will be taken in the context of ensuring we remain as the region's specialist hospital. We have recently undertaken a service portfolio review to ensure that we can deliver sustainable services which have key interdependencies to our regional service provision.

When we were established in 2005 we were the first trust in the county to be awarded 'teaching hospitals' status. We believe that developing the workforce of the future is central to delivering high quality healthcare into the future. We know we are a regional leader in respect of our education, training and research and as the only National Institute of Health Research clinical research facility in the region and a leading provider of undergraduate education, we will continue to drive forward the ambitions described in our education and research strategies.

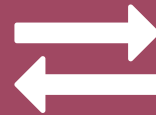
Delivery of the Trust's strategy will be supported by a range of other detailed plans such as our Nursing, Midwifery and AHP strategy, Patient Experience Strategy, Workforce and Organisational Development Strategy, Information Technology Strategy, Continuous Improvement Strategy.



System level

Value stream analysis

Participating in national programmes with system partners e.g. Action on A&E programme



Pathway level

Participated in national (Elective Care 100 day challenge) and network level pathway redesign (Cancer pathways)

Flow Coaching Academy application



Local department and ward level

Structured programme

Local improvement focused on standardisation up to the level of the best

Introduction

The Board has responsibility for setting our strategic direction. This responsibility has been undertaken with due regard to the views of our governors who are vital to ensuring the views of the public, our patients, stakeholders and staff are reflected in our plans. The Board have also listened to the views of our clinical teams in deciding what our priorities must be.

This document sets out strategy in the form of the 'Big Plan' and identifies how the 'Big Plan' is lived within the organisation.

Our strategy is 'Our Big Plan'

It is important that there is a clear link between our objectives, how these are planned to be delivered through the business planning process, how achievement of the objectives will be monitored and most importantly how our staff will understand what The Big Plan means for them in their day to day work.

Our Big Plan is our strategy

Strategy should be simple for everyone to understand, it is not a document that sits on a shelf and gets dusted down every three years but rather something that should be felt every day in how we deliver our services and the thousands of decisions that every individual in our organisation takes each day.

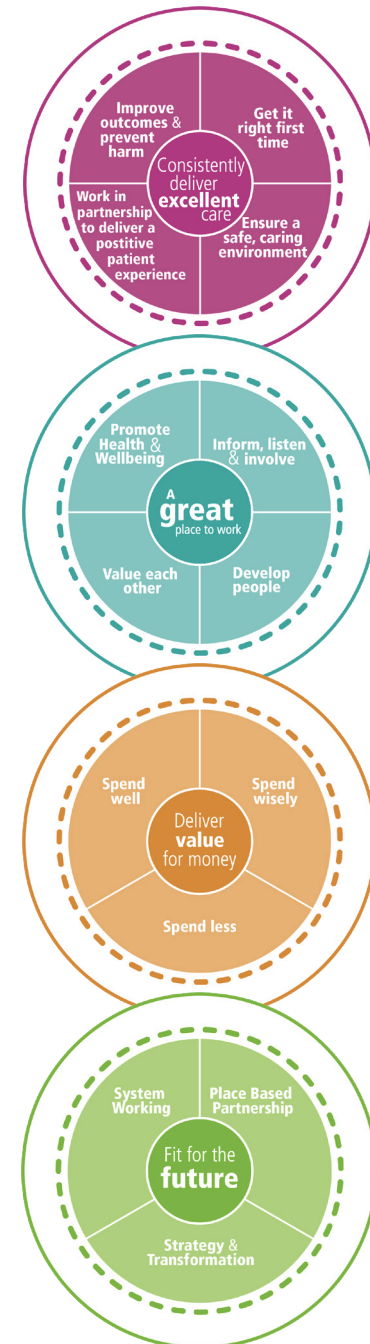
Our Big Plan is founded on four ambitions (seen opposite)

The ability to consistently delivery high quality care, to be a great place to work, to be fit for the future and delivery value for money all depend on having our Big Plan and how we execute it fit seamlessly together.

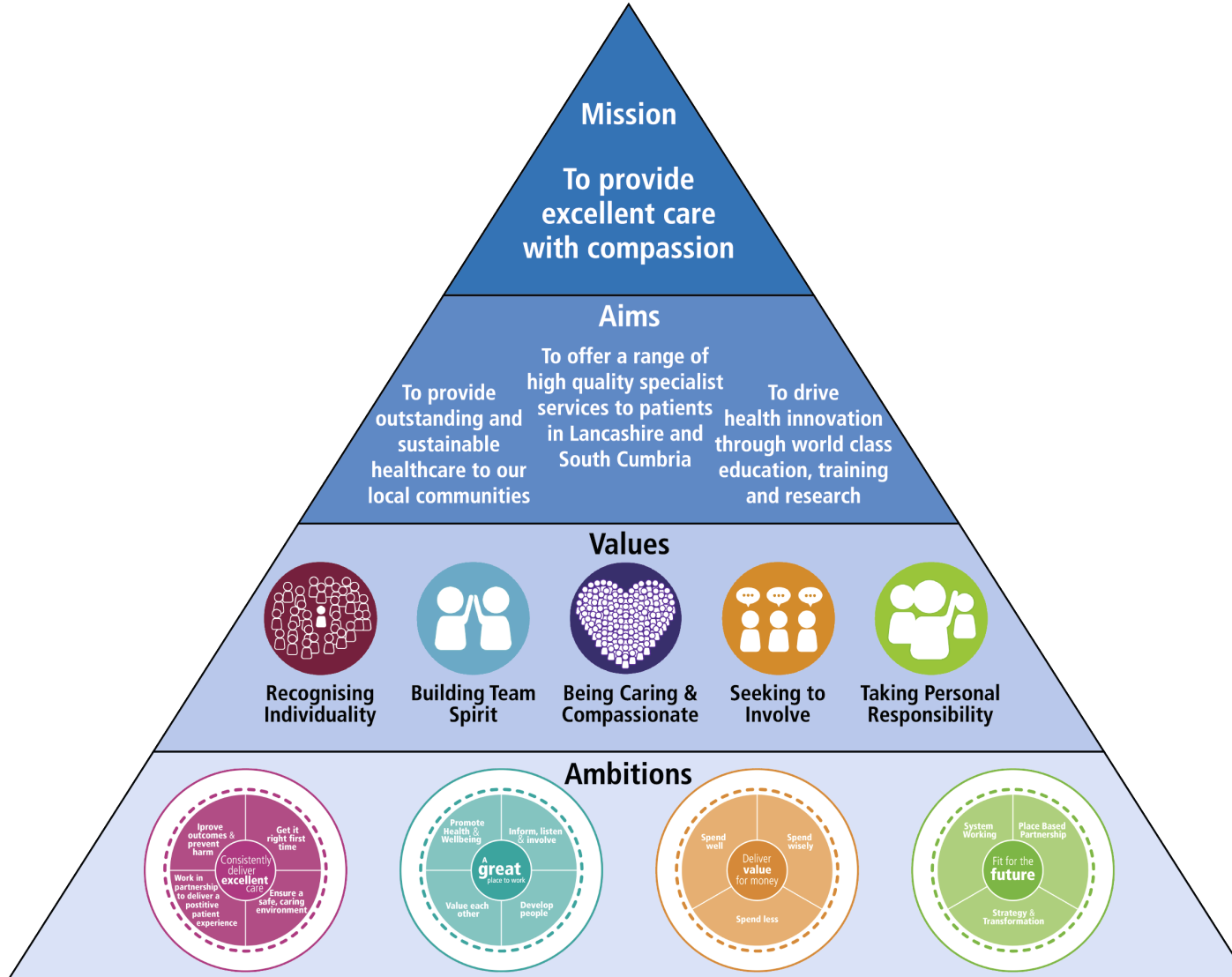
Our Big Plan identifies our Mission, Strategic Aims and Values and outlines against our four ambitions our 'delivery promise' for the next three years.

Our delivery promise is outcome driven, clearly outlining the expected outcomes in years one, two and three of the strategy. Not only does the identification of our desired outcomes enable business plans to be developed annually to support delivery of the Big Plan but it enables ongoing monitoring of delivery through robust and aligned accountability arrangements.

Our Big Plan was set for the three year period 2021 to 24. We are now in the third year of our plan - outlined in the pages that follow are Our Big Plan metrics for 2023–24. From September 2023 we will start the process of engaging our population, patients, partners and staff to develop our next 3 year strategy.



Our Big Plan



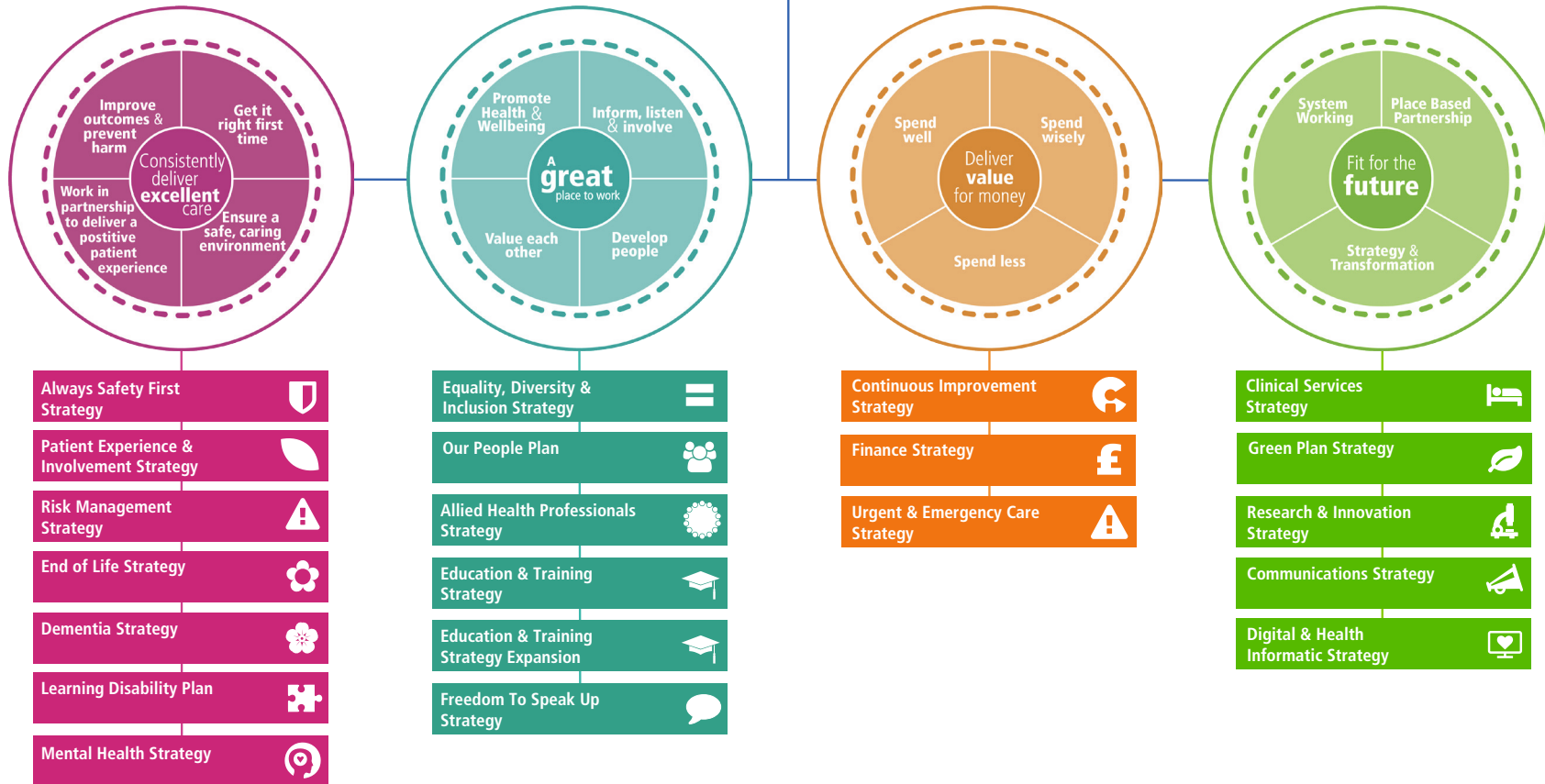
*Our Big Plan encompasses our two service delivery aims. The strategic aim to drive innovation through world class education, training and research is supported by separate Education and Research Strategies.

Our Strategies

To support the delivery of our organisational strategy, we have developed a number of supporting strategies aligned to each of our ambitions as shown in the below diagram (though some do span multiple ambitions and all our strategies are interlinked).

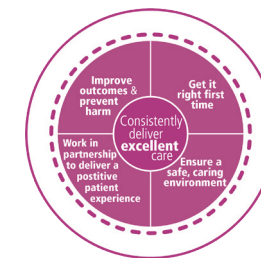


★ Our Big Plan 2021-24 Strategy Document ★



Consistently deliver excellent care 2021–2024 (Year 3 only)

Monitored by: Safety and Quality Committee | Finance and Performance Committee. Priority performance metrics in yellow.



Improve outcomes & prevent harm (year3)

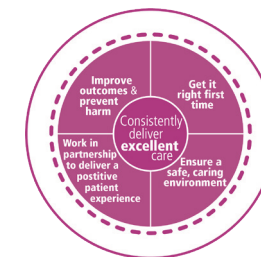
CQC	To achieve a rating of good with one outstanding service.
Pressure Ulcers	Reduce the number of people developing pressure ulcers by 5%
	Reduce the number of device related pressure ulcers by 5%
Maternity safety	Maintain compliance with the 10 safety actions for maternity services
	Deliver year 1 of the national maternity & neonatal improvement plan
Children & Young People safety	Deliver the 10 safety actions for children and young people
Contribute to PLACE Adult and Children CORE20 PLUS 5 strategy	Develop a plan to respond to CORE20 PLUS 5 – Adults and maternity. Deliver year 1 actions
	Develop a plan to respond to CORE20 PLUS 5 – CYP. Deliver year 1 actions
	Increase the number of smoking interventions by 10% above previous years out turn
	Increase the number of alcohol interventions by 10% above previous years out turn

Get it right first time (year3)

Mortality Access Standards	Continue to achieve a mortality HSMR figure of <100
	Improve A&E waiting times so that no less than 76% of patients are seen within 4 hours by March 2024 with further improvement in 2024/25
	Reduction in patients waiting +12 hours in ED
	Reduction in ambulance turnaround times
	Achieve agreed trajectory for reducing 52 week waiters
	Eliminate waits over 65 weeks for elective care by March 2024
	Eliminate waits over 78 week waiters
	Achieve Cancer - 28 day FDS
	Achieve the NHSI 62 day cancer trajectory
	Moving or discharging 5% of outpatient attendances to a PIFU pathway
	Reduce outpatient follow ups by a minimum of 25% against 2019/20 activity levels
	Reduce adult general and acute (G&A) bed occupancy to 92% or below
	Achieve 5% of patients in hospital who no longer meet the criteria to reside.

Consistently deliver excellent care 2021–2024 (Year 3 only)

Monitored by: Safety and Quality Committee | Finance and Performance Committee. Priority performance metrics in yellow.



Get it right first time - continued (year3)

Mortality Access Standards	Reduce length of stay to next best quartile
SDEC	Divert 10 ambulances away from ED (to SDEC or the appropriate service; SAU, MAU AAU, 2hr UEC response)
Pre-procedure elective bed days	To reduce the number of days patients spend in hospital prior to surgery to 0.15 days or below
Pre-procedure non-elective bed days	To reduce the number of days patients spend in hospital prior to planned surgery to 0.5 days or below
Elective Inpatient Average length of stay	To reduce the average length of stay for patients undergoing planned surgery to under 3.3 days
Cancer	Implement pathway changes for lower GI (at least 80% of FDS lower GI referrals are accompanied by a FIT result), skin (teledermatology) and prostate cancer (best practice timed pathway)

Ensure a safe, caring environment (year3)

Falls	Reduce the number of falls by 5%
Infection	Achieve less than the annual tolerance for C.difficile
	Achieve zero MRSA bacteraemia
Safety	Maintain 90% staff trained in basic safety training
	Achieve 30% staff trained in intermediate safety training

Work in partnership to deliver a positive patient experience (year3)

Complaints	Reduce by 10% the number of complaints relating to communication
Patient involvement	Achieve a minimum of 90% of patients reporting their experience of good or very good (including neither good/bad)
Candour	Maintain >90% compliance with duty of candour for all moderate and above harm incidents.
Safe Staffing	Maintain Registered Nurse and Midwife fill rates of > 90%

A great place to work 2021–2024 (Year 3 only)

Monitored by: Workforce Committee | Education, Training and Research Committee. Priority performance metrics in yellow.



Promote Health and Wellbeing (year3)	
Sickness Absence	To reduce overall sickness absence to 5%
	To reduce short term sickness absence to 1.75%
	To reduce long term sickness absence to 3.25%
Health and Wellbeing	To increase staff's perception that the that the organisation takes positive action on health and wellbeing to 40%

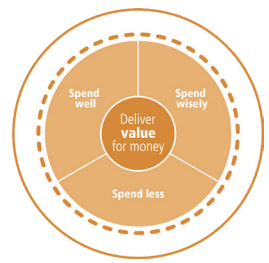
Develop people (year3)	
Vacancies	To reduce the number of vacancies by further 5%
Mandatory training	To maintain 90% compliance against all core skills training requirements
Appraisals	To achieve and maintain 90% compliance rate for appraisals
Medical Devices	To achieve 90% staff compliance with medical device training
Turnover	To maintain staff turnover between 8% and 11%

Inform, Listen & involve (year3)	
Culture	To reduce the gap between the current culture and desired culture as measured by the Annual Culture Survey to below 35% difference
Staff engagement and TED	To increase the number of teams that have completed TED in year by 15%
	To achieve an overall Staff Engagement score of 7 or above
	To ensure 50% of our staff complete the National Staff Survey
	To ensure 60% of colleagues would recommend us as a place to work

Value each other (year3)	
Race equality measure	Reduce the number of staff from an ethnic minority background who have personally experienced discrimination at work to be in line with that of their white colleagues
Disability equality measure	Reduce the number of disabled staff experiencing harassment, bullying and abuse from managers to be in line with that of the experience of non-disabled colleagues

Deliver value for money 2021–2024 (Year 3 only)

Monitored by: Finance and Performance Committee. Priority performance metrics in yellow.



Spend Less (Economy) (year3)

Agree revenue and capital financial plan with ICB	Deliver 100% of the agreed targeted reduction in our underlying financial deficit
Deliver agreed cost improvement delivery target	To deliver 100% of agreed cost improvement target

Spend well (Efficiency) (year3)

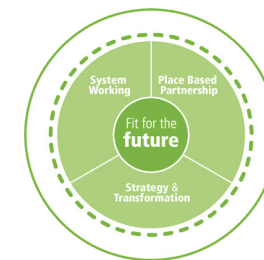
Bed Occupancy Rate (Including Escalations)	Achieve a bed occupancy rate of no higher than 90%
Theatre Efficiency	Theatre capped utilisation rates are no lower than 85%
GIRFT (Model Hospital)	Achieve 85% day case basket using GIRFT
OP Follow Ups	Reduce OP follow ups by 25%
Supplier payments (BPPC)	To ensure all suppliers are paid in line with national guidance

Spend wisely (Effectiveness) (year3)

Agency costs	Achieve a bed occupancy rate of no higher than 90%
Delivery of Activity and Revenue Plan	To ensure 100% delivery of the Trust's activity and revenue programme
Capital	To ensure 100% delivery of the Trust's Capital programme

Fit for the future 2021–2024 (Year 3 only)

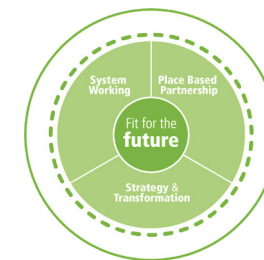
Monitored by: Board of Directors. Priority performance metrics in yellow.



Strategy and Transformation (year3)	
Clinical Services Strategy	<p>To deliver the 23/24 actions in the LTH clinical services strategy, including addressing the challenges and opportunities of multi-site working:</p> <ul style="list-style-type: none"> • To provide outstanding, sustainable healthcare to our local communities and in our tertiary services • To drive health innovation through world class education, teaching and research • System working in a new NHS landscape
Outpatients Transformation	<p>Deliver the 23/24 actions and outcomes from the agreed Transformation Plan including:</p> <ul style="list-style-type: none"> • Deliver Personalised Outpatient Care (Patient Initiated Follow up & Patient Stratified Follow Up) • Referral optimisation and demand management • Deliver our follow up reduction target to drive the outpatient element of our Financial Improvement Plan
Elective Care Transformation	<p>Deliver the 23/24 actions and outcomes from the agreed Transformation Plan</p> <ul style="list-style-type: none"> • Deliver agreed national waiting list improvement targets and productivity benchmarks • Develop our elective strategy to include repatriation of activity from the independent sector and other regions, and the maximisation of our surgical hub capacity • Deliver our planned care financial targets in support of the Financial Improvement Plan
Urgent and Emergency Care Transformation	<p>Deliver the 23/24 actions and outcomes from the agreed Transformation Plan including:</p> <ul style="list-style-type: none"> • Focus on pre hospital pathway/front door to include integrated mental/physical health services and a 40% reduction in ambulance conveyances • Reduce Lengths of stay by 10% reduction in LoS on 10 pilot wards and reduce Not Meeting Criteria to Reside reduced to 5% (system aim) • Deliver agreed financial benefits to support Financial Improvement Plan
Unwarranted Variation	<p>Deliver the 23/24 actions and outcomes from the agreed Transformation Plan including:</p> <ul style="list-style-type: none"> • Fully establish and embed the programme governance • Undertake deep dive reviews into the 9 identified priority specialities, agreeing and deliver the consequent improvement plans • Deliver agreed financial benefits to support Financial Improvement Plan
Financial Improvement Plan	<p>Deliver the 23/24 actions and outcomes from the agreed Improvement Plan</p> <ul style="list-style-type: none"> • Fully embed FIP governance & reporting • Fully embed FIP delivery framework • Develop and agree 3 year FIP

Fit for the future 2021–2024 (Year 3 only)

Monitored by: Board of Directors. Priority performance metrics in yellow.



Place Based Partnership (year3)	
Collaboration and integration at Place	<p>Deliver the 23/24 actions and outcomes from the agreed Place Based work plan including:</p> <ul style="list-style-type: none"> • Fully establish the required governance structure and processes for Place based working • Agree a comprehensive set of priorities & programmes • Deliver the Frailty improvement action Plan & Outcomes
Social Value	<p>Building on our Social Value Framework, work with partners to develop a Social Value Strategy driving a place based focus on equality, wider determinants of health, poverty and social capital</p> <ul style="list-style-type: none"> • Review and refresh Green Plan and deliver agreed actions/metrics • Prepare for Level 2 Social Value Quality Mark accreditation application in 2024/25 • Deliver the Core20PLUS5 action plan and outcomes

System Working (year3)	
ICB Joint Forward Plan	<p>Deliver the 23/24 actions and outcomes from the agreed JFP. Work with ICB to:</p> <ul style="list-style-type: none"> • Finalise the JFP • Align strategies and plans with the JFP priorities • Develop detailed delivery plans
Clinical Collaboration	<p>Deliver the 23/24 actions and outcomes from the agreed Clinical Collaboration work plan including:</p> <ul style="list-style-type: none"> • Develop & deliver implementation plans for new models of care in Vascular, Head & Neck, Urology, Stroke and Elective Hubs • Agree next set of specialties for the implementation of new models of care and develop implementation plans • Undertake challenged services review of fragile and financially challenged services, and deliver agreed action plans
Central Services Collaboration	<p>Deliver the 23/24 actions and outcomes from the agreed Central Services Collaboration work plan including:</p> <ul style="list-style-type: none"> • Target Operating model agreed and mobilised • Phase 1 transactional services (Payroll and General Ledger provision) underway • Bank and Agency Collaborative proposal sign off/implementation
Digital Northern Star/EPR convergence	<p>Deliver the 23/24 actions and outcomes from the agreed Digital/EPR work plan</p> <ul style="list-style-type: none"> • EPR tenders evaluated, and preferred supplier awarded • Digital Convergence programme governance reviewed and revised • Implement Secure
Elective Recovery	<p>Deliver the 23/24 actions and outcomes from the agreed ECRG work plan – maximise system working to deliver:</p> <ul style="list-style-type: none"> • National waiting times targets • National productivity targets • Surgical Hub Strategy
New Hospitals Programme	<ul style="list-style-type: none"> • Milestones and metrics to be finalised following further discussions with national teams



Communicating our plan

The Business Plan is how we will deliver Our Big Plan. The outcomes contained in the Trust's Big Plan will, therefore, inform the identification of the actions to be undertaken within business plans. The business planning process is undertaken at Divisional, Clinical Business Unit and Speciality Business Unit/departmental level.

The ability to successfully deliver Our Big Plan will be dependent upon everyone understanding the part they play in helping us deliver our goals. Ensuring that everyone is clear about how their individual role, responsibility and behaviour supports delivery of the Big Plan is key.

The translation of Our Big Plan into business plans continues with the development of team objectives that align to the business plan. Team objectives are then translated into individual objectives through the individual performance and development review (appraisal) process. In adopting this approach, we create a strategic link between individual, team and organisational objectives so that the effort of both individuals, teams and the organisation are aligned with Our Big Plan.

Organisational visibility of our Big Plan is critical. Providing us with a common purpose, goals and a set of actions to reach those goals ensures that everyone is working for the same outcome and that time and resources are being allocated in the right way and decisions taken in the right context.

To ensure our staff can articulate what is important to us as an organisation and what it means to them, leaders engage with their individual services/departments

in short focus groups to identify 'what our plan means for our service'. The outcomes of these focus groups is the development of posters unique to each area which clearly articulate what the plan means for that service on a day to day basis. These posters are displayed in each ward/department at the start of each financial year and align the annual objectives from the Big Plan through to what the plan means for the each team.

Monitoring Progress

The Board of Directors discharges its duties by providing a framework of good governance, which is a hallmark of high performing organisations. Through this, the Board of Directors can enhance the care and wellbeing of our patients and our staff who look after them, enabling change and delivery of health improvement.

In order to ensure that we are continually monitoring delivering against our Big Plan, the metrics within the Integrated performance report for the Board of Directors are aligned to the Big Plan outcomes and provide details of performance against the agreed KPIs.

Each of the ambitions upon which Our Big Plan is founded is aligned to a board sub committee which will undertake more detailed scrutiny of progress in achieving the identified outcome, understand risk and seek assurance against delivery.