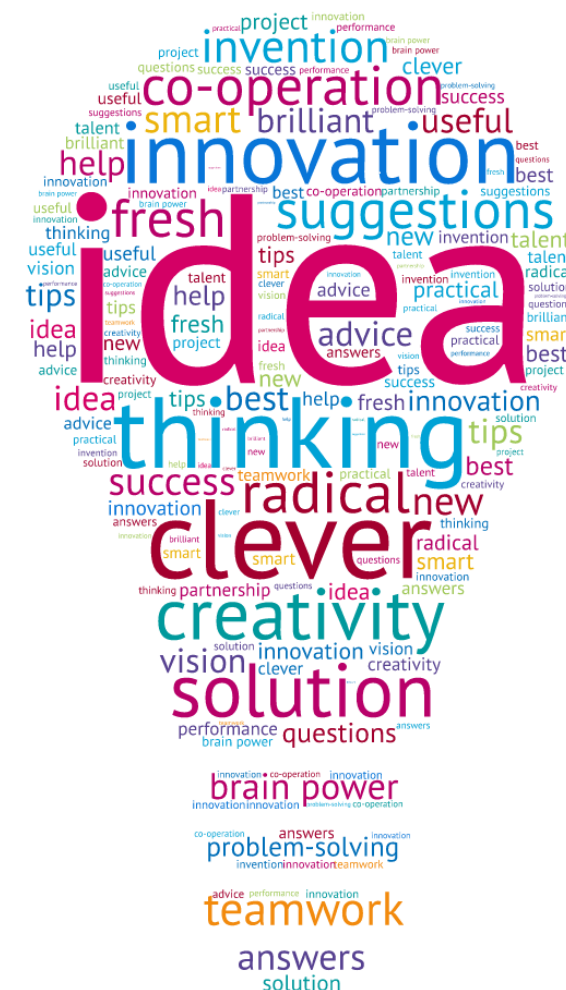


2017/18 Plan and Commitments for next 6 months

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Contents

	Page
Overview	3
The Roadmap	4
Our Priorities & Commitments:	5
Creating the Culture for Change	
Building capability for continuous improvement	
Digitalising outpatients to deliver standardise care	
Maximising elective activity	
Optimising the non elective pathway	
Supporting 7 day working	
Integrated Care	
The next 6 months	13

Overview

The MFT Transformation Strategy was approved by the Board of Directors on 19 September 2017. Our ambition is to lead healthcare in the NHS and therefore we need to be in the top decile for quality in its broadest sense not only on outcomes and safety but patient and staff experience and operational efficiency.

As a result we aspire to be recognised for excellence in patient and staff experience and use of technology, facilities and strong leadership are enablers for staff to change. This is the key driver for our transformation programme and in 3 years' time through a culture of clinically led change we want to achieve:



Operational excellence across all hospitals and community services, alongside being recognised for excellence in quality, patient and staff experience



Fully integrated single hospital services



Effective partnerships with our Local Care Organisation, Devolution Manchester, Shelford Group and other key stakeholders

The aim of our transformation strategy is to ensure we:

- ✓ Continue to build upon and strengthen the transformation work already in place
- ✓ Continue to build the capability of staff to ensure a culture of continuous improvement.
- ✓ Ensure we are making best use of existing resources and corporate teams to support improvement and support the clinical teams and divisions / hospitals in a coherent way.
- ✓ Continue to co-ordinate projects to ensure lessons are shared .

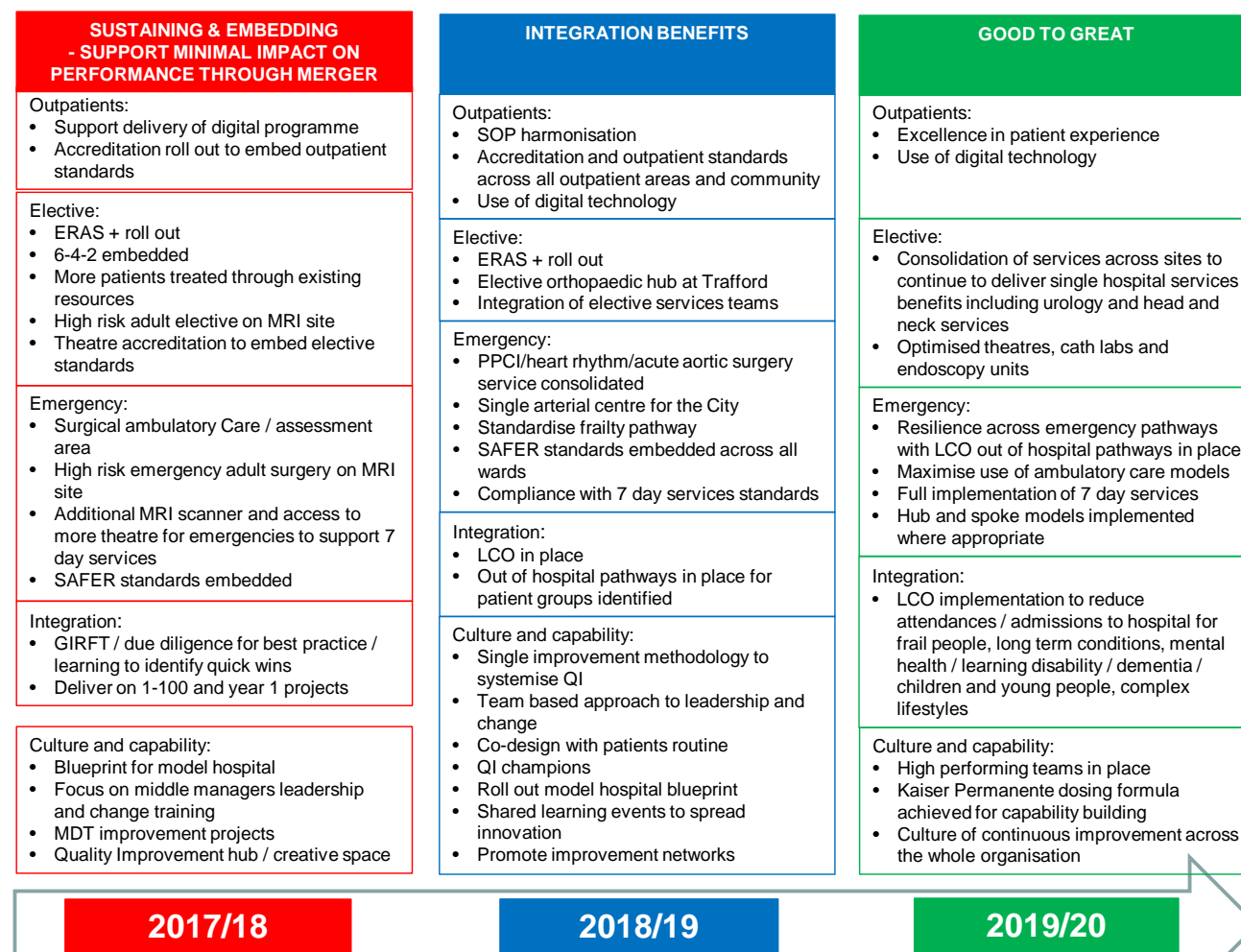
The Transforming Care for the Future Programme objectives for the next 3 years are:

	Culture for change	Continue to create the right culture across each Hospital and Division to deliver change through embedding the values and behaviours and leadership
	Build Capability	Continue to build staff capability in leadership and change using a single methodology to support continuous improvement
	Delivery	Through collaborative working achieve operational excellence and excellence in patient and staff experience which will continue to deliver efficiencies through transformational change, supporting the financial strategy
	Governance	Comply with the governance process / PMO to ensure rigour to the work and expectations to achieve top decile for quality

The Roadmap

The 3 year road map outlines the focus on sustaining and embedded in year 1, delivering integration benefits in year 2 and going from “good” to “great” in year 3.

During October – March the focus will be to deliver the existing programmes of work whilst bringing together a single transformation programme. This report outlines the timescales and commitments to develop the single programme of work and deliver existing commitments.





Creating the Culture for Change

Successful transformation requires a prevailing culture that strives for improvement. A culture that is open about problems, receptive to change and committed to doing what is best for patients is a vital foundation for a successful and sustainable long-term transformation. We will work with the clinical teams to continue to help to generate ideas and translate into practice.

We will continue to look nationally and internationally at new care models that can be adopted within our Trust and will continue to work with colleagues as part of the Shelford Group Network for transformational change to learn from each other.

We will work with the Organisational Development (OD) and the Equality, Diversity and Inclusion teams to embed the values and behaviours of MFT through our transformation programmes of work.

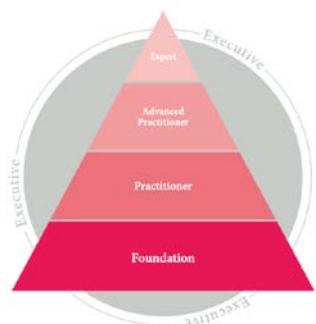
We will continue to run "Transform Together" quarterly events as a means of sharing examples of change projects and for individuals / teams to gain recognition for their work. Each quarter there will be a winning project that will be put forward for the Staff Awards.

We will continue to publicise the "Transform Together Charitable Fund" across the whole of MFT, providing a small amount of funding to projects that will have a big impact for our patients. We will publish case studies to share the work and look at what can be scaled up into different areas.

*Lead Executive Director;-
Group Executive Director for Human and Corporate Resources*

OUR COMMITMENTS FROM OCTOBER – MARCH, WE WILL:

- ✓ Launch the Transformation Strategy across MFT during NHS Change Week (13-17 November)
- ✓ Run a Transform Together learning event during Q4
- ✓ Set up a repository of information and case studies in a single hub to scale up improvements across MFT
- ✓ Support OD with staff engagement, values and behaviours programmes
- ✓ Implement a Single on line Portal for improvement for staff to easily access resources
- ✓ Widely publicise for staff to access charitable funds to support innovation and change projects
- ✓ Continue to align the Transformation, Innovation and Research agendas



Building Capability for Continuous Improvement

We will continue to work with the Organisational Development teams to build and improve our organisation capability, work more efficiently and effectively, through improving our skills and ways of working. We will do this by continuing to run leadership / change programmes and as part of the programme a transformation change project will be required to demonstrate learning into practice. We will ensure these projects link to the “Transform Together” events.

We will evaluate the mentoring scheme for change and continue to support staff carrying out change projects. We will work with OD to continue to implement our transformation leaders programme jointly with AQuA which is open to all staff, making available courses for foundation level, intermediate level and advanced level.

We will work with Hospital leadership teams ensuring that each Division has enough staff trained at each level to ensure the scale of improvement required can be achieved and a culture of continuous improvement. We will evaluate the mentoring scheme for change and continue to support staff carrying out improvement projects.

We will work with partners across the health and care landscape, including those organisations with a lead role in improvement, such as NHS Improvement, AQuA, Haelo, Advisory Board, Academic Health-Science Networks, to make use of their resources to make these changes.

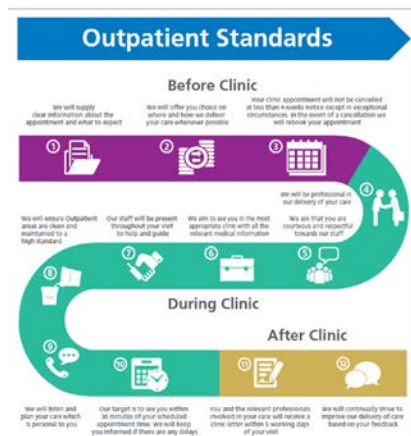
Lead Executive Director:-

Group Executive Director for Human and Corporate Resources

OUR COMMITMENTS FROM OCTOBER – MARCH, WE WILL:

- ✓ Roll out the Newly Appointed Consultant Programme across Wythenshawe
- ✓ Roll out the induction to improvement for doctors in training across the Central Site
- ✓ Develop and deliver a programme of change and project management skills to staff to achieve a culture of continuous improvement
- ✓ Develop and increase multidisciplinary team working through encouraging team based projects
- ✓ Ensure that course offerings meet Hospital’s requirements

Digitalising Outpatients to deliver Standardised Care



Over 1.6 million patients are seen across our outpatient settings and for many this is the only time they will come in contact with our services. This is why we are committed to improving our outpatient services to provide the best patient experience.

Working with Informatics we are working towards digitalising outpatients which will enable the delivery of standard care. Through implementing outpatient standards across Wythenshawe and Withington we can build upon improvements across all our outpatient settings.

We will ensure best practice is shared across our Hospitals and will continue to work with the nursing team to implement an accreditation process for outpatients to ensure the standards become "business as usual".

*Lead Executive Director:-
Group Chief Operating Officer working in close partnership with Medical and Nursing Directors*

OUR COMMITMENTS FROM OCTOBER – MARCH, WE WILL:

- ✓ Develop a single outpatient transformation programme across MFT
- ✓ Continue to work with the nursing directorate team to roll out the outpatient accreditation scheme
- ✓ Roll out the standards across Wythenshawe and Withington and where accreditation has not taken place, outpatient teams self assess against standards to demonstrate continuous improvement
- ✓ Improve patient experience and reduce DNA's and complaints, contributing to the turnaround deliverables
- ✓ Work with informatics to support implementation of digital enablers for outpatients such as e-referrals, paperless results, self check ins.



Maximising Elective Activity

Approximately 125,000 patients are treated electively across MFT and the NHS Constitution promises patients a limit on any wait for tests, outpatient care or planned operations. Timely referrals for treatment leads to better outcomes for patients. In order to improve care for our elective patients we need to ensure that as soon as the decision is made to treat we have the most efficient and effective processes for pre-operative assessment, theatre listing and enhanced recovery.

Our Hospitals will continue to implement their improvement plans to against the Elective best practice standards supporting delivery of access targets.

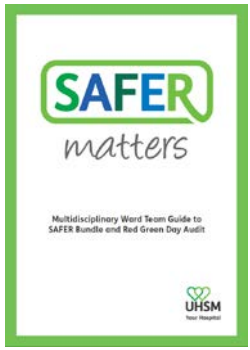
The Transformation Team will work closely with Surgical Teams to implement new models for general surgery as part of Healthier Together and integration benefits for becoming a single hospital. In addition we will support the roll out the theatre accreditation scheme.

Lead Executive Director:-

Group Chief Operating Officer working in close partnership with Medical and Nursing Directors

OUR COMMITMENTS FROM OCTOBER – MARCH, WE WILL:

- ✓ Embed the new surgical pre-op process/model and ERAS+ across Surgery service and ensure timely decisions support discharge
- ✓ Work with General Surgery to implement new general surgery models of care for high risk elective surgery
- ✓ Support the delivering of elective orthopaedic activity and integration plans
- ✓ Work with the nursing team to roll out theatre accreditation for the elective standards to become “business as usual”
- ✓ Reduce cancellations and support delivery of RTT by optimising our theatres/catheter Labs to deliver an additional 5000 electives cases via robust scheduling (6–4–2 process), moving from 3 ½ to 4 hr sessions and reviewing theatre templates at specialty level
- ✓ Embed new elective pathway policy and action cards for staff across surgical services



Optimising the Non Elective Pathway

Over 380,000 people attend our adult and children Emergency Departments every year. Emergency demand continues to rise and therefore there is a requirement to ensure collaborative working with key partners across Manchester to manage patients as far as possible closer to home and ensure our internal processes are efficient for patients to be safely discharged earlier.

We will continue to implement best practice research for patient flow (Safer, Faster, Better: Transforming urgent and emergency care services in England, 2015 and 2017) focusing on streaming medical patients through ambulatory care and standardising our frailty pathways. We will focus on compliance with the SAFER standards for all inpatients ensuring the length of stay blueprint is being followed in order to reduce length of stay. We will embed the “Heading home” discharge bundle and evaluate its effectiveness.

We will work with the Informatics and Performance teams to monitor the Hospital sites capacity plans on a quarterly basis linking to winter planning and develop the Hospital’s 2018/19 capacity plans.

*Lead Executive Director:-
Group Chief Operating Officer working in close partnership with Medical and Nursing Directors*

OUR COMMITMENTS FROM OCTOBER – MARCH, WE WILL:

- ✓ Ensure delivering against 17/18 capacity plans for Hospital sites and ensure alignment with winter plans
- ✓ Bring the MRI and Wythenshawe Urgent Care Teams together to understand the differences in services, share best practice in order to ensure resilience over winter
- ✓ Achieve LoS reduction plans to efficiency savings equivalent to 60 beds in the MRI, 40 beds in RMCH and xx beds in Wythenshawe
- ✓ Evaluate the impact of the new outliers model across the MRI
- ✓ Support Informatics to implement predictive analytics for ED/ward occupancy to support patient flow across the MRI, Trafford and Wythenshawe
- ✓ Implement surgical ambulatory care/assessment area and accommodate high risk emergency general adult surgery on the MRI site. Ensure timely access to emergency theatres
- ✓ Fully embed SAFER standards, Heading Home discharge bundle and provide a focus on reducing delayed transfers of care
- ✓ Optimise endoscopy rooms across MFT to support SAFER standards + 6 week diagnostics delivery



NHS Services, Seven Days a Week



Supporting 7 Day Services

NHS England set the intention that by November 2017 four clinical standards describing the minimum level of service that hospital patients admitted through urgent and emergency routes should expect to receive on every day of the week.

After discussions with the Academy of Medical Royal Colleges NHS England prioritised the following four standards as having the most impact on reducing risk of weekend mortality. These are: time to Consultant review, access to diagnostics, access to Consultant-directed interventions, on-going review.

Led by the Medical Directors Office, extensive clinical engagement followed by regular audits have been undertaken. We will work with the Medical Directors Office to understand priority areas across the Trust and agree where, if any, transformation resource is required to assist in delivery.

Lead Executive Director:- Group Medical Director

OUR COMMITMENTS FROM OCTOBER – MARCH, WE WILL:

- ✓ Work with the Medical Directors Office on providing transformational resource for changes agreed as priority areas
- ✓ Focus on delivering against the best practice guidance which is aligned to existing programmes of work on SAFER and handover



Integrated Care and Pathways

The Operational and Transformation Steering Group has been in place for circa 6 months, chaired by the Chief Operating Officer, focussing on delivery of changes to ensure patient benefits articulated in the Single Hospital Service Business Case are implemented.

The group has focussed on the following phases and over the next 6 months will be ensuring projects are developed with clear and measurable KPIs as a direct result of merger.

- ✓ Phase 1 = Getting ready pre-merger
- ✓ Phase 2 = Day 1-100 - 1 October 2017 – 16 February 2018 (15 areas for integration)
- ✓ Phase 3 = Year 1 – 1 October 2017- 1 October 18 (10 areas for integration)
- ✓ Phase 4 = Year 2 – 1 October 18 – 1 October 19 (2 areas for integration)

Working with corporate teams, the transformation and integration teams will focus on supporting clinical teams deliver agreed key milestones.

Lead Executive Director:- Group Chief Operating Officer

OUR COMMITMENTS FROM OCTOBER – MARCH, WE WILL:

- ✓ Provide leadership to the integration team to support delivery of required changes. Use due diligence outputs to identify quick wins for improvement
- ✓ Work with clinical teams and Hospital Leadership Teams to develop integration plans and new care models that fit within the Clinical Strategy
- ✓ Ensure robust governance through setting up a panel process and using WAVE as a reporting tool
- ✓ Produce opportunity packs for each specialty aggregated to Hospital site to provide clarity on integration opportunity and resultant financial consequence
- ✓ Act as link between Get It Right First Time (GIRFT) national team and clinical teams for specialty site visits. Use outcome data to identify areas for improvement
- ✓ Focus on reducing length of stay for complex patients through working with partners across health and social care as part of the LCO programme of work



The Next 6 Months

	Outpatients	Elective	Non-Elective	Integration	Culture Change & Capability Building
Q3	<ul style="list-style-type: none"> Work with informatics on the digital programme, including e-referrals, self check in and DNA reminders Work with the nursing team on rolling out outpatient accreditation Roll out the outpatient standards across Wythenshawe and Withington and carry out a baseline assessment 	<ul style="list-style-type: none"> Evaluate progress of ERAS + roll out Ensure 6-4-2 embedded across all theatre services Ensure more patients treated through existing resources Support General Surgery on plans to move high risk adult elective onto the MRI site Working with the nursing team on ensuring the theatre accreditation process embeds the elective standards 	<ul style="list-style-type: none"> Evaluate new outliers process in the MRI Review bed configuration in surgery to accommodate High Risk General Surgery cases Support the introduction of a Surgical ambulatory Care / assessment area in the MRI Support capacity and demand modelling of radiology capacity across MFT to ensure the right levels of access over 7 days SAFER standards embedded 	<ul style="list-style-type: none"> GIRFT / due diligence for best practice / learning to identify quick wins Deliver on 1-100 and commence year 1 projects Ensure robust governance through setting up a panel process and using WAVE as a reporting tool Produce opportunity packs for each specialty aggregated to Hospital site to provide clarity on integration opportunity and resultant financial consequence 	<ul style="list-style-type: none"> Implement the blueprint for model hospital/high performance Focus on middle managers leadership and change training Ensure MDT improvement projects Create a single Quality Improvement hub Run NHS Change week across all Hospital sites
Q4	<ul style="list-style-type: none"> Evaluate Accreditation Programme Evaluate progress against work programme and agree 2018/19 plan 	<ul style="list-style-type: none"> Undertake re-assessment of elective standards through the revised theatre accreditation programme. Evaluation of progress against work programme and agree 18/19 plan 	<ul style="list-style-type: none"> Develop 18/19 Capacity Plan Evaluate progress against work programme and agree 18/19 plan 	<ul style="list-style-type: none"> All year 1 projects to have clear KPIs directly as a result of integration / merger Develop 18/19 plans based on the opportunity pack data and accountability oversight framework 	<ul style="list-style-type: none"> Publish 17/18 case studies from across MFT Deliver a Transform Together event Evaluate 12/18 capability programme Quarterly staff pulse check
Throughout 2017/18 we will have:	Reduced DNAs by 2%	Delivered an additional 5000 elective cases	Reduced LoS to deliver efficiency savings equivalent to 60 beds across MRI	Day 1-100 benefits realised All integration projects to have clear non financial and financial measurable	Maintained staff engagement score Demonstrated positive changes on cultural survey Carried out quarterly Transform Together events