Manchester University NHS Foundation Trust

Annual Plan 2019/20

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1. Introduction

The purpose of developing an Annual Plan is to set out our plans for the coming year for:

- Delivering services to NHS performance standards - how we are going to deliver the activity required to meet demand and meet the required NHS performance targets, and
- Progressing our strategic aims – what progress we are going to make towards the achievement of our long vision and strategic aims and how we are going to achieve this.

This document describes MFT and the context in which we are developing our plans; the challenges that we are facing and the opportunities open to us in both the coming year and in the longer-term. It sets out key plans for 2019/20 for both the group level teams and for each of the Hospitals and Managed Clinical Services, what they are aiming to achieve ultimately and what specifically will be achieved in 2019/20. It also describes how we manage the risks to delivery of the plan, and how we monitor delivery over the year.

Who we are

Manchester University NHS Foundation Trust (MFT) is one of the largest NHS trusts in England providing community, secondary, tertiary and quaternary services to the populations of Greater Manchester and beyond. We have a workforce of over 20,000 staff and are the main provider of hospital care to approximately 750,000 people in Manchester and Trafford and the single biggest provider of specialised services in the North West of England. We are a university teaching hospital with a strong focus on research and innovation.

The Trust is organized into seven operational units; five of these are described as Managed Clinical Services and two as Hospitals. Managed Clinical Services (MCS) are accountable for the delivery and management for a defined group of services wherever they are delivered across MFT. In addition to this they are also responsible for setting standards and developing strategy for those services. Our Managed Clinical Services are:

- Royal Manchester Children's Hospital (RMCH)/ Children's Services
- Saint Mary's Hospital (SMH) / women's services and genomics
- Manchester Royal Eye Hospital (MREH)/ eye services
- University Dental Hospital of Manchester (UDH) / dental services
- Clinical and Scientific Services (CSS)

The Hospitals are responsible for the services delivered on their sites. They work to MFT group standards and strategies. Our Hospitals are:

- Manchester Royal Infirmary (MRI)
- Wythenshawe, Trafford, Withington and Altrincham (WTWA)

MFT also hosts Manchester Local Care Organisation (MLCO). MLCO provides integrated out-of-hospital care for the city of Manchester. Services provided incorporate community nursing, community therapy services, intermediate care and enablement, and some community-facing general hospital services.

Our vision and values

Our vision is to improve the health and quality of life of our diverse population by building an organisation that:
- Excels in quality, safety, patient experience, research, innovation and teaching,
- Attracts, develops and retains great people, and;
- Is recognised internationally as a leading healthcare provider.

Our work is underpinned by our values statement that Together Care Matters and a values and behaviours framework as shown in the graphic below. These values and associated behaviours will support the creation of a compassionate, inclusive and high quality care culture that enables excellence in quality and safety to flourish.

Our Vision

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Our Values

Together Care Matters

Everyone Matters
Working Together
Dignity and Care
Open and Honest

Everyone Matters √	Working Together √	Dignity and Care √	Open and Honest √
• I listen and respect the views and opinions of others • I recognise that different people need different support and I accommodate their needs • I treat everyone fairly • I encourage everyone to share ideas and suggestions for improvements	• I listen and value others views and opinions • We work together to overcome difficulties • I effectively communicate and share information with the team • I do everything I can to offer my colleagues the support they need	• I treat others the way they would like to be treated – putting myself in their shoes • I show empathy by understanding the emotions, feelings and views of others • I demonstrate a genuine interest in my patients and the care they receive • I am polite, helpful, caring and kind	• I admit when I have made a mistake, and learn from these • I feel I can speak out if standards are not being maintained or patient safety is compromised • I deal with people in a professional and honest manner • I share with colleagues and patients how decisions were made

2. Key Challenges and Opportunities

The following sets out the context in which we are operating, in particular the challenges and opportunities that we face. Many of these are longer-term issues and will not be resolved in one year, but the plans set out in section 3 describe what we will be doing and the progress that we expect to make in 2019/20.

Financial pressures
As for all NHS providers, we face financial challenges; funding growth is forecast to be slower than historic long-term trends and there is limited access to capital for investment and transformation. Spending pressure on Local Authorities also continues, impacting on the provision of social care and public health spending in Manchester and Trafford.

Workforce
Pressure on the NHS workforce generally is increasing, with demand for staff growing faster than the size and skill mix of the available population. Although MFT is able to attract and retain staff in many areas where other Trusts cannot, we do face challenges in specific areas. These include consultant staff (in particular within emergency medicine, paediatric specialties, acute medicine, dermatology and ophthalmology specialties), junior medical staff (in paediatrics, urology and emergency medicine), nurses (in emergency medicine, theatres, and paediatrics) and radiographers.

Growing demand
Across the NHS, patient volumes and overall workload are increasing faster than population growth. This is driven in large part by an ageing population. Our increasing ability to treat disease and extend life is leading to additional demand from the chronically ill, and patients with multiple morbidities.

Deprivation
The population of both Manchester and Greater Manchester are significantly more deprived than the England average. This impacts on the prevalence of long term conditions and ultimately on higher mortality rates. We also see an impact on child health and wellbeing; childhood obesity rates for Greater Manchester are above average and growing.

National policy
The NHS long term plan sets out the direction of travel for the NHS over the next 5 to 10 years. It focusses on prevention and the development of local out-of-hospital services. It sets an ambition to reduce face-to-face hospital-based outpatients by 30% and to change the way in which urgent care is provided.

Local policy
Devolution has placed Greater Manchester in charge of its own health spending and planning and enables the region to think differently about the delivery of care and improvement of health outcomes for its population. Working in closer partnership with all of the health and social care organisations across GM puts a responsibility on us to provide support to fragile services in the surrounding hospitals such as dental and breast services.

Estate and capacity
Some areas of the Trust face challenges in relation to the estate in terms of its quality or capacity. These include the University Dental Hospital, Wythenshawe Hospital, the emergency departments at MRI and RMCH and some of our community facilities.

Data and digital adoption
There is a national agenda to increase the use of electronic systems for recording data across the NHS. At MFT many of our systems and processes remain paper-based which presents challenges in relation to communications between staff and with patients and to our productivity and efficiency.

Opportunities

Personalised medicine
Developments in advanced diagnostic disciplines such as genomics, as well as a more data-driven approach to designing and delivering care, are creating increasing opportunities in the field of precision medicine. We are increasingly able to tailor treatment to the individual and their specific needs, improving the effectiveness and efficiency of the care we provide. As a Genomics Lab Hub we are in a position to be at the forefront in the development of personalised medicine.

Electronic Patient Record
MFT is in the process of procuring an electronic patient record system (EPR). An EPR will enable our patients and system partners, including primary care colleagues, to interact with us in a completely different way and will ultimately facilitate the transformation of our services and a significant improvement in our productivity and efficiency. This is however a 2-3 year programme. Implementation starts July 2020 and the planned go-live date is September 2022.

Single Hospital Service
The creation of the Single Hospital Service has provided the potential to deliver a range of benefits for patients and staff. These benefits were identified through the merger process and we have committed to the delivery of many of these benefits as part of the Benefits Case and the Manchester Agreement.

Capacity and space
The merger presented the Trust with an opportunity to better utilise space across our broadened estate. The potential acquisition of North Manchester General Hospital could offer further opportunities for us to rethink how we most effectively use our estate in future years.

Unwarranted variation
Across the Trust, the type and quality of the service provided to patients can vary depending on the location at which the patient presents which can lead to sub-optimal care for patients and inefficiencies across our services. The merger has presented us with an opportunity to further tackle variation to improve the care we provide across all 9 of the MFT sites.
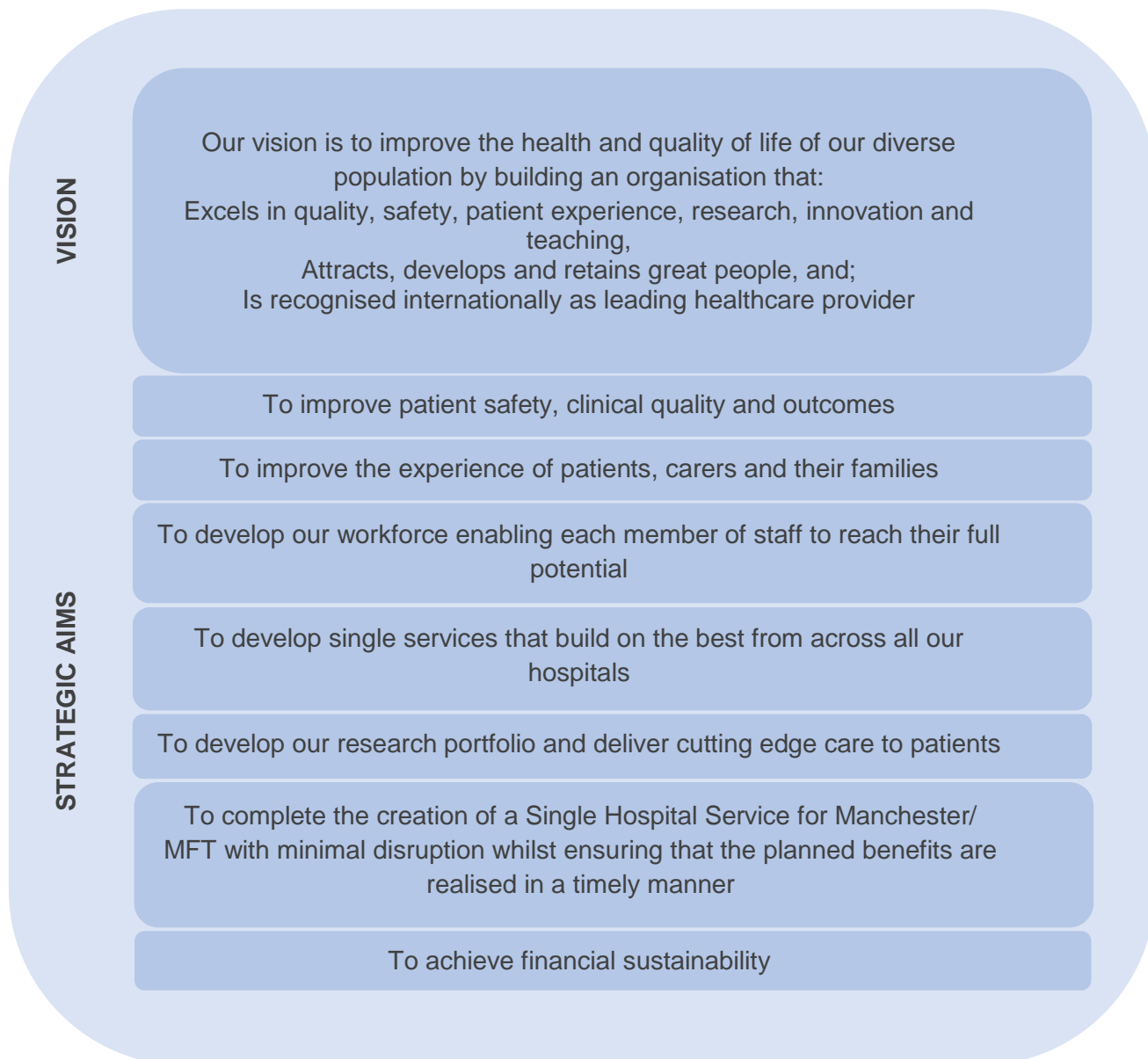
Wythenshawe estate
An ambitious scheme to re-develop the Wythenshawe site improving the quality of the estate and the clinical facilities has been developed. This is an innovative plan that leverages the close proximity of the Wythenshawe campus to the airport, the proposed HS2 development and new Metrolink station. The early phases of this ambitious 15 year programme, as well as enhancing the clinical facilities, will improve access to the site and connectivity to the community to support the HS2 and Metrolink developments.

Capital developments
Although capital funding is significantly limited, there are plans in train to invest in a number of key areas including the emergency departments in both MRI and RMCH.

3. MFT Vision and Strategic Aims

Our vision sets out what sort of organisation we want to become over the coming 5 to 10 years. It is underpinned by seven strategic aims that describe in more detail what we want to achieve over the same timeframe. Our vision and strategic aims are set at the MFT group level and ensure that the whole organisation is working to the same agenda.

VISION

Our vision is to improve the health and quality of life of our diverse population by building an organisation that:
Excels in quality, safety, patient experience, research, innovation and teaching,
Attracts, develops and retains great people, and;
Is recognised internationally as leading healthcare provider

STRATEGIC AIMS

To improve patient safety, clinical quality and outcomes

To improve the experience of patients, carers and their families

To develop our workforce enabling each member of staff to reach their full potential

To develop single services that build on the best from across all our hospitals

To develop our research portfolio and deliver cutting edge care to patients

To complete the creation of a Single Hospital Service for Manchester/ MFT with minimal disruption whilst ensuring that the planned benefits are realised in a timely manner

To achieve financial sustainability

Priorities and Plans for 2019/20

Based on our MFT vision and strategic aims, each Hospital / MCS and corporate team develops their own priorities and plans for the coming year. The following summarises key plans for 2019/20 for both the group level teams and for each of the Hospitals and Managed Clinical Services. The tables set out which corporate department or Hospital /MCS is responsible, what they are aiming to achieve and what specifically will be achieved in 2019/20 and by which quarter. These are in no way exhaustive but give a flavour of the priority areas for 2019/20. In some areas the balance is towards the Hospitals and MCS delivering the majority of the work and in others, such as the Single Hospital Service, it is towards the corporate teams.

To improve patient safety, clinical quality and outcomes

Quality is at the heart of what we do, our aim is to become the best in class; delivering high quality, safe and effective healthcare services that are informed by cutting edge research that enables us to be ambitious for the future health and wellbeing of the people of Manchester and surrounding areas.

We have made a commitment to everyone who uses our services, our staff and stakeholders; that quality and safety will always be our top priority and that we will continue to improve our services in the future. We are implementing a programme of sustained improvement supported by our values and behaviours and a safety culture where quality and safety are everybody's business, to ensure we deliver the best outcomes and experience every time.

Group level	What we are going to do	What will be achieved in 2019/20	By when
Clinical Governance	Revise and relaunch consent process	• New MFT wide policy launched • Standard speciality based risk consent information rolled out	Q1 Q2
Clinical Governance	Implement World Health Organisation (WHO) Safe Surgery Check List	• New MFT wide policy launched • New policy embedded and compliance improved	Q1 Q2
Clinical Governance	Deliver Care Quality Commission (CQC) action plan	All actions closed or transferred to business as usual	Q4
Corporate Nursing	Develop two key patient focused collaboratives for Falls and Wound Care to improve outcomes and align research to patient benefit	• Multi-agency collaboratives established. • Reduction in falls achieved • Reduction in variation in wound care practice achieved	Q4
Transformation	Discharging complex patients - joint programme with Manchester Health & Care Commissioning (MHCC)/MLCO	New ways of delivering care to patients at home (virtual ward) and ambulatory care implemented to improve patient flow	Q1
Transformation	Improve frailty care	Frailty service established at MRI for timely identification, access and management of frail patients	Q4
Estates	Redevelop paediatric Emergency Department so that capacity is broadly doubled	Design and development phase commenced (completed 2022)	Q4
Estates	Redevelop MRI Emergency Department to meet the needs of the Manchester population by 2021	Enabling works commenced on site	Q4
Estates	Provide integrated neurosurgical MRI scanning and theatre facilities within RMCH (iMRI) by 2022	Design and development phase commenced	Q4

Estates	Wythenshawe Site Masterplan Programme	RIBA stage I and further agreed programmes of work completed	Q4
IM&T	Implement electronic observation and monitoring	Patientrack implemented at Wythenshawe	Q4
		ViewPoint foetal monitoring solution at Oxford Road Campus (ORC) upgraded and implemented at Wythenshawe	Q3
IM&T	Implement electronic patient record systems	Electronic Patient Record (EPR) rolled out to Community Services	Q4
		Clinical client record system for use by the Sexual Assault Referral Centre (SARC) implemented	Q2
IM&T	Prepare for Electronic Patient Record (go live date Sept 2022)	• Strategic procurement of Hive EPR and business readiness for implementation achieved. • Implementation of tactical roadmap for business continuity and readying systems for decommissioning achieved	Q4
IM&T	Implement Blood Tracking to give full traceability and achieve compliance with national requirements.	Batch Blood Tracking module implemented at Wythenshawe	Q1

Hospital / MCS	What we are going to do	What will be achieved in 2019/20	By when
RMCH	Improve response to acutely ill and deteriorating child	New escalation policy implemented for acutely ill and deteriorating children	Q4
RMCH	Implement systems to support nurse staffing and longer-term workforce modelling	Safe Care embedded to support daily nurse staffing decisions and longer-term workforce modelling	Q2
SMH	Maintain low infection rates	Benchmarked levels achieved throughout the year.	Q4
SMH	Implement Postgraduate Medical Education action plan	Positive scoring achieved in the General Medical Council training survey	Q4
WTWA	Implement new Trust-wide Safe Surgery Policy	Reduction in never events achieved	Q4
WTWA	Embed safe Infection Prevention and Control (IPC) working practice	Reduction of IPC incidents in line with thresholds	Q1
WTWA	Deliver harm free care	Reduction of Hospital Acquired Pressure Ulcers (HAPU) and Catheter Associated Urinary Tract Infections (CAUTI) in line with agreed profile for 19/20	Q4 Q4
MRI	Institute a systematic hospital response to the CQC report	• Progress monitoring against comprehensive action plan implemented • Programme of culture change work within the hospital implemented • Litmus tests: safe surgery checklist, equipment cleanliness/management	Q4
MRI	Strengthen infection prevention and control	• Hand hygiene practice is universal • Plan achieved for level of infections	Q1-4
MRI	Ensure full compliance with national requirements for major trauma centres	• Successful peer review achieved	Q2
MREH	Increase medical capacity in the form of consultant posts	Eliminate use of agency locum cover to provide baseline contracted activity. Reduced medical agency locum costs	Q2
MREH	Decrease risk of 'lost to follow up'	• Risk Stratification Process developed • Failsafe Policy Implemented • Failsafe Dashboard developed	Q1
UDHM	Be national leader in relation to patient safety	Hosted national Association of Dental Hospitals patient safety event	Q3
UDHM	Continue to develop Mouth Care Matters across MFT	Training materials completed for use	Q4
CSS	Achieve 14 day turnaround for CT scans for patients on suspected cancer pathway at ORC	Additional radiographers appointed	Q3
CSS		Cancer sessions increased	Q4
CSS		RMCH CT scanner utilised in afternoons/evenings	Q4
CSS	Achieve 14 day turnaround for MRI for patients on suspected cancer pathway at ORC	Schemes for one stop clinics piloted	Q2
CSS		• New MRI Scanner operational • Current staff structure reviewed and moved to a 7-day service	Q2 Q4
CSS	Achieve 7 day lab results turnaround for patients on suspected cancer pathway	Lab Key Performance Indicators (KPI) introduced	Q4

To improve the experience of patients, carers and their families

Patient experience, patient safety and clinical effectiveness are the three aspects of quality in health care. A high-quality health service exhibits all three. Our ambition is to provide the highest quality of care and the best patient experience, making Manchester University NHS Foundation Trust the place that people want to work and receive care.

We aim to be in the top decile in the NHS across all quality, safety, patient experience and staff satisfaction metrics and to be nationally and internationally renowned for excellence in providing every patient with a high quality, personalised experience at every contact.

Group level	What we are going to do	What will be achieved in 2019/20	By when
Corporate Nursing	Support consistent implementation of standards for patients with Learning Disabilities across the hospitals/MCS	Compliance with NHS I Learning Disability Improvement Standards for NHS Trusts	Q4
Corporate Nursing	Support hospitals/MCS/MLCO to improve the timeliness and quality of complaint responses	• Reduction in dissatisfied complainants. • Reduction in unresolved complaints exceeding 40 days	Q4
Corporate Nursing	Further develop the What Matters To Me (WMTM) patient experience programme across the Group, including the MLCO	• WMTM embedded in practice and strategy across the Trust • Continuous improvement in Friends and Family Test (FFT) and WMTM patient survey data	Q3
Corporate Nursing	Review and deliver a revised PALS service across MFT	Revised Patient Advice & Liaison Service (PALS) model implemented offering proactive early support to resolve concerns	Q4
Transformation	Implement Outpatient transformation programme	• Virtual models of care increased • Centralised booking/functions implemented in the MRI • Outpatient clinic letter standards developed	Q3
ED&I	Implement Trust wide Equality & Diversity Strategy - key focus on accessibility	Agreement of a new wayfinding strategy for the Oxford Road Site (ORS) site including improved site maps and signposting.	Q4
IM&T	Implement OPD self-service check-in kiosks	Self-Service Check in kiosks installed (phased roll-out)	Q4

Hospital / MCS	What we are going to do	What will be achieved in 2019/20	By when
RMCH	All wards to actively participate in a quality improvement journey Further embed the What Matters to Me WMTM process across RMCH MCS	8 wards rated as Gold as part of the Ward Accreditation Programme achieved	Q4
RMCH	Review of North West Operational Delivery Networks with commissioners, clinical leads, patients and families	New network strategies, governance, leadership and implementation plans in place to improve paediatric care access across the North West	Q4
SMH	Reduce waiting times within the Emergency Gynaecology Unit	Achieve Emergency Gynaecology Unit 4 hour waiting time trajectory each quarter.	Q4
SMH	Reduce inpatient waiting times	No 52 week breaches during the year	Q4
WTWA	Review Out Patient (OP) appointments to ensure care is delivered in the best setting	Improved feedback/reduced complaints	Q4
WTWA	Reduce last minute cancelled appointments	Recruitment programme completed for consultants, nurses and advanced care practitioners to improve the staffing of clinics	Q4
MRI	Improve handling and learning from complaints	• Fewer open complaints • Increase in complaints handled within timescale agreed with complainant • Demonstrate embedded learning from key complaint themes	Q4
MRI	Improve outpatient experience	• Standardised centralised management of outpatient booking • Reduction in patients not attending appointments (DNAs) • Improvement in Friends and Family Test score (FFT) • Overall open waiting list size maintained or reduced	Q4
MRI	Improve inpatient care pathways	• Reduction in patients waiting over the 4 hour target in A&E • Reduced length of stay through the Safer Better Together Patient Flow Programme • Fewer theatre delays and cancellations through the Theatre Improvement Programme	Q4
MREH	Implement Outpatient Improvement Programme to improve utilisation, increase efficiency and improve the patient experience	• Outpatient Improvement Board implemented • Work Programme identified and commenced • Performance Dashboard developed.	Q1
MREH	Develop Theatre Improvement Programme to improve utilisation, increase efficiency and improve the patent experience	• Theatre Improvement Board implemented • Work Programme identified and commenced • Performance Dashboard developed.	Q1
MREH	Promote leadership in the patient safety agenda • Embed Failsafe role • Promote widened participation at Audit & Clinical Effectiveness (ACE days)	• Failsafe Officer post embedded and leading on initiatives to reduce lost to follow up • Regular attendance at ACE Days from the wider Multi-disciplinary Team (MDT) with a range of presentations from all disciplines • Reduction in High Level Investigations • Increased staff awareness of the role	Q4

13	• Participation in patient safety events and campaigns • Embed the Speak Up Safely Champion roles		
UDHM	Improve waiting time position in relation to Orthodontics and Paediatrics	Orthodontics waiting time position improved to compliance and reduction in numbers on Paediatric Dentistry Waiting List	Q3
UDHM	Maintain an 'Outstanding' Accreditation status across the entire hospital	Gold Accreditation maintained across the hospital	Q1
CSS	Resolve complaints within agreed timeframe	New staff training including Standard Operating Procedures implemented	Q1
CSS	Engagement with Patient Advice & Liaison Service (PALS) to actively manage the complaints process	Reduce the number of complaints	Q2

To develop our workforce enabling each member of staff to reach their full potential

With almost 20,000 paid staff and volunteers, our workforce is the driving force behind what we deliver as a Trust for one another, our patients and our community. It is vital that we develop our relationships and support our people in becoming the best at what they do.

When our staff perform at their best we deliver the highest quality of care and patient experience and this makes staff proud to work for our Trust and act as positive advocates for us as a provider of health and social care services and an employer of choice.

People performing at their best requires sustained effort and contribution on their part, together with a working environment that encourages and supports excellence all of the time.

Group level	What we are going to do	What will be achieved in 2019/20	By when
ED&I	Run a 'removing barriers' programme to increase the number of BME (Black & Minority Ethnic group) staff in leadership positions across the Trust	Removing barriers programme launched, implementation and monitoring (through Workforce Race Equality Standard) commenced	Q3
ED&I	Implement the Employee Health & Wellbeing Framework to improve the wellbeing of staff	80% take up of flu vaccination programme achieved	Q3 / Q4
ED&I	Deliver 'widening participation' programme to provide access to work experience for schools, colleges and community partners (runs to 2012)	Over 500 work experience placements in a 12 month period from Q4	Q4
Transformation	Share learning	'Transform together' events for staff to share and showcase change projects	Q4
Transformation / OD&T	Support learning and improvement	• Academy and E-learning module for improvement launched • Single improvement hub established via intranet	Q1
Workforce	Develop single MFT workforce policy suite in collaboration with staff side colleagues	All workforce policies reviewed to develop single MFT policy where appropriate in line with legislation and best practice	Q4
Workforce	Pilot internal transfer initiative to encourage staff development and progression and retain existing workforce	Pilot scheme implemented in nursing	Q3
Workforce	Embed new appraisal process - Values and Behaviours Programme	Improvements in appraisal compliance and quality of appraisal as measured by the pulse checks and staff survey	Q4

Workforce	Embed High Performing Team Framework (Affina Team Development Programme)	Increase in the numbers of accredited team coaches, teams undertaking Affina Programme and improvements in the team working indicators	Q4
Comms	Develop communications which enhance the profile of MFT	Bespoke Hospital/MCS communications plans implemented which will result in positive press coverage, proactive social media content, improved website content and improved staff communications through eg Hospital CE blogs	Q4
Governance	Drive continuous improvement in Leadership & Governance in keeping with the 'Well Led' Framework	• Annual Review of the MFT Organisational governance arrangements completed • Membership Recruitment Campaign completed	Q4
Corporate Nursing	Transform nursing, midwifery and AHP workforce	New roles developed and introduced with appropriate skills to meet patients' needs	Q4
Corporate Nursing	Lead a programme of work to upskill the nursing, midwifery and AHP workforce to meet revised professional regulatory standards	• Increase in extended and advanced roles. • Workforce with appropriate to meet service needs and professional regulatory standards	Q4
Corporate Nursing	Work in partnership with Higher Education Institutes (HEI) to develop a portfolio of training/education programmes to expand the Nursing, Midwifery and Allied Health Professionals (NMAHP) workforce pipeline	Increased number of students and apprentices	Q4

Hospital / MCS	What we are going to do	What will be achieved in 2019/20	By when
RMCH	Develop RMCH workforce strategy that is aligned with MFT Workforce, Leadership and Culture strategy for delivery over the next 5 years	RMCH workforce strategy developed and implementation commenced	Q4
RMCH	Improve team working, workplace experience and retention of staff over the next 5 years	Leadership and Culture plan developed and delivered that builds on staff survey and Pulse Check results	Q4
RMCH	Support continuous professional development across all staff groups over the next 5 years	Plans developed and implementation commenced to ensure compliance with appraisal, medical appraisal, mandatory training and education requirements for newly qualified clinical staff	Q4
SMH	Utilise Affina to facilitate leadership development programmes	Demonstrable evidence that Affina team journey has been undertaken in selected areas of the MCS	Q4
SMH	Present Saint Mary's MCS as an employer of choice	Attraction & Recruitment strategy developed and implemented	Q4
WTWA	Build leadership and management capability	• Leadership programme for senior Divisional Management teams developed and implemented • Affina OD team journey rolled out across Divisions, Directorates and Teams	Q3 Q2
WTWA	Improve recruitment and retention to key staff groups	• Offer for medical workforce in 'hard to recruit' specialities reviewed • WTWA Nursing Workforce Strategy implemented	Q4
MRI	Increase nurse staffing levels with improved retention	• Successful innovative recruitment (international and nursing associates) • Reduction in turnover rate • Reduction in vacancy rate	Q4
MRI	Improve staff engagement within the hospital	• Opportunity for all staff to be engaged in work on the hospital's future direction • Pulse Check engagement score	Q1 Q4
MREH	Increase staff engagement and promote a positive, proactive culture	Increased Staff Engagement Scores	Q1
MREH	Create extended roles able to support clinical activity previously undertaken by medical staff	Optometry and Orthoptic Professionals recruited	Q4
MREH	Develop a workforce strategy aligned to long-term clinical service model aspirations, including increasing non-consultant delivered activity	• Education and Workforce Group established • Education and Workforce Strategy developed and ratified at Hospital Management Board	Q2
UDHM	Maintain staff engagement and promoting a positive culture	Improved staff engagement scores on Staff Survey	Q1
UDHM	Develop a workforce strategy that takes advantage of the apprenticeship levy	Strategy to increase numbers of apprentices developed	Q4
CSS	Launch and champion new appraisal system	Appraisal (Non-medical) targets achieved	Q2
CSS	Continually improve the wellbeing of the CSS staff	Staff engagement plan refreshed including staff Health & Well-being campaign, CSS Stars and 'intention to stay' actions	Q1

To develop single services that build on the best from across all our hospitals

It is important that we keep pace with the changes in health care so that we to continue to provide the highest quality care to our patients. This can be by growing our services, providing new services or changing the way in which we provide existing services. It is of particular importance that, following the merger, we create single services across MFT that bring staff together into larger clinical teams that are required to deliver the SHS benefits.

Group level	What we are going to do	What will be achieved in 2019/20	By when
Transformation	Implement head and neck strategy	• Pathways mapped • Capacity & demand analysis completed • Plans for service change developed	Q4
Transformation	Transform Acute Coronary Syndrome & heart rhythm pathways	Joint coronary rhythm management rota implemented	Q4
Transformation	Transform Stroke and Transient Ischaemic Attack (TIA) service	• Proposal for 5-day TIA service developed • Rehabilitation access for Stroke patients improved	Q1
Strategy	Complete Clinical Service Strategy Programme to deliver 5 year plans for patient services	Strategies developed for all clinical services and implementation of year 1 initiatives commenced	Q2
Strategy	Develop Clinical and Scientific Services strategy	Strategy developed for clinical support services	Q4
Strategy	Support 'Improving Specialist Care' (ISC) across GM – vascular	Proposal for GM-wide vascular service developed in collaboration with GM partners	Q4
Strategy	Support 'Improving Specialist Care' (ISC) across GM	Proposal for GM pathways for chest pain, pacemakers, devices developed in collaboration with GM partners	Q4
		Proposal for GM wide pathways for respiratory services developed in collaboration with GM partners	Q4
		New model of care developed for paediatric medicine	Q4
Strategy	Support GM work on digital pathology	Scope of work and delivery timetable agreed	Q1
Strategy	Establish GM Haematological Cancer Diagnostic service with The Christie	Haematological Cancer Diagnostic service operational across GM	Q4
Strategy	Progress development of National Breast Imaging Academy	Business case developed and funding options explored	Q4
Strategy	Implement GM Gynaecological cancer service with The Christie	Single GM gynaecological cancer service implemented	Q4

Hospital / MCS	What we are going to do	What will be achieved in 2019/20	By when
RMCH	Expand the RMCH A&E department	Full business case approved by the Board of Directors	Q3
RMCH	Implement intra-operative MRI equipment	Full business case approved by the Board of Directors	Q3
RMCH	Develop care models for children across MFT	Optimum service models for children and young people's care developed for each site	Q4
SMH	Deliver service provider consolidation as part of the development of the North West Genomics Laboratory Hub	Transfer of Liverpool Women's Hospital Genomics Laboratory staff completed	Q2
SMH	Achieve Maternity Incentive Scheme standards	Maternity Incentive Scheme standards delivered	Q3
WTWA	Implement GM wide changes including Urology, Breast, Healthier Together, Orthoplastics and Lung Screening	Services implemented/progress achieved in accordance with programme timelines	Q4
WTWA/MRI	Establish revised governance arrangements for service integration between MRI & WTWA	Governance arrangements in place	Q1
WTWA/MRI	High level phasing plan agreed for Healthier Together, PTIP and Clinical Service Strategy moves	Phasing plan agreed	Q2
MRI	Effectively deliver the MRI capital programme	• Bone Marrow Transplant Unit phase 1 completion • A&E enabling works commenced • Diabetes centre in use • Helipad in use	Q3 Q4 Q3 Q3
MREH	Develop 5 year strategy to achieve the MREH vision	• Strategy approved • Strategy shared with all staff groups • Milestones Identified • Q1 Milestones achieved	Q1
MREH	Work in partnership with commissioners and peers in Greater Manchester	Priorities mapped and Local Eye Health Network (LEHN) implementation plan developed with colleagues from the LEHN.	Q2
UDHM	Document key long-term vision for UDHM and University of Manchester Division of Dentistry	UDHM & UoM strategy approved by Board and implementation commenced	Q4
UDHM	Develop business case for a new hospital and school, and interim measures to mitigate estate and equipment risks	RIBA stage 2 Outline Business Case developed	Q4
UDHM	Work in partnership with commissioners and peers in Greater Manchester and develop referral criteria for UDHM	Revised referral criteria and UDHM input into Managed Clinical Network work programmes	Q3
CSS	Introduce chimeric antigen receptor T-cell therapy (CAR-T) and gene therapy technologies	CAR-T service further developed and other gene therapy technologies introduced	Q4
CSS	Continue integration of services	Integration of lab medicine achieved	Q2

To develop our research portfolio and deliver cutting edge care to patients

Research and innovation (R&I) are core parts of what we do; they touch on all aspects of the organisation in some form. Undertaking research and innovation has a substantial impact on our ability to provide high quality clinical services through enabling us to:

- Adopt pioneering clinical practice
- Engage and empower patients by offering access to research programmes and studies
- Attract and retain leading clinicians and wider staff
- Embed our relationship with surrounding universities and the life sciences commercial sector;
- Create a reputation and brand associated with excellence.

Developing our research and innovation therefore goes hand in hand with delivering a high-quality care.

Group level	What we are going to do	What will be achieved in 2019/20	By when
R&I	Develop R&I strategy aligned with the UoM	R&I strategy produced that is aligned with the University of Manchester (UoM)	Q3
R&I	Communicate Biomedical Research Centre (BRC) annual report	Plan for communicating the BRC annual report developed and executed	Q2
R&I	Build grant funded laboratory infrastructure to deliver antimicrobial resistance research	Majority of building and refurbishment of the laboratory space completed as per agreed outputs and timelines for the grant funding	Q4
R&I	Develop data driven healthcare	Staff proposals for data driven projects funded	Q1
R&I	Increase external clinical research fellowships	3 external clinical research fellowship applications supported	Q1
R&I	Increase capacity for recruitment to breast cancer trials	Nightingale Unit reconfigured to provide clinical research clinic space	Q3
R&I	Develop research in pharmacy	Increase in clinical pharmacy staff funded for 2 years to increase clinical trials capacity	Q4
R&I	Develop stem cell research	Increase in stem cell lab staff funded for 2 years to increase capacity to take on research	Q4
R&I	Increase grant writing capacity and capability through grant writing workshops	Increase on last year in successful grant applications	Q4
R&I	Support bid for Next Generation Hospital at Trafford	Successful bid to develop a model 5 G hospital at Trafford	Q3
Corporate Nursing	Lead the implementation of the Nursing, Midwifery and AHP (NMAHP) Strategy (2018-2022)	• Increased number of NMAHP PhD applications • Increased number of clinical academic NMAHP roles • Increased in grants for NMAHP research • Evidence of translation of research findings into practice • Increased number of roles to support capacity building	Q4

Hospital / MCS	What we are going to do	What will be achieved in 2019/20	By when
RMCH	Develop RMCH / MCS Research and Innovation Strategy	Research capabilities across paediatric specialities assessed and support for high priority areas of national significance provided	Q2
RMCH		'Centre of excellence' developed for high performing research areas for Paediatrics	Q3
RMCH		RMCH children's research and innovation strategy produced and implementation commenced	Q4
SMH	Develop MCS Research Oversight Committee	MCS Research Oversight Committee Proposal for MCS approved by HMB MCS Research Oversight in operation	Q1 Q2
SMH	Develop MCS annual research plan	Key 2020/21 research ambitions, development priorities identified for MCS annual research plan	Q4
WTWA	Align with Group strategy and deliver key WTWA research priorities	- One or more major research grants awarded from MRC, Welcome, NIHR or CRUK - As a group, provide at least six 4* papers and twelve 3* papers to the upcoming Research Assessment - Recruitment of at least one young clinical researcher on at least Senior Lecturer level	Q4
WTWA	Implement Nursing, Midwifery and Allied Health Professions' (NMAHPs) Research Strategy	Strategy implemented	Q4
WTWA	Development of Manchester Cardiac MR Imaging Programme in partnership with UoM and British Heart Foundation	Cardiac MR scanner in opertion	Q4
MRI	Create an MRI research identity	Research and innovation embedded in the hospital's vision and plans	Q2
MRI	Establish an integrated approach to Informatics and service transformation within MRI	Service improvement plans reflect and optimise digital development	Q3
MREH	Develop a Research Oversight Committee for MREH	Committee established and key objectives identified	Q2
MREH	Identify wider opportunities for commercial partnerships.	Meetings to have taken place to scope opportunities and if appropriate schemes to be proposed.	Q4
UDH	Bring together oversight and co-ordination of research across the School and the Hospital	Joint Research Committee established	Q2
UDH	Agree a joint research plan, covering academic and commercial research	Plan Developed and approved by the Joint Research Committee	Q2

To complete the creation of a Single Hospital Service for Manchester with minimal disruption whilst ensuring that the planned benefits are realised in a timely manner

The proposal to establish a Single Hospital Service in Manchester forms an integral part of the Manchester Locality Plan and will ultimately enable us to provide much better, safer, more consistent hospital care that's fit for the future. Building on the work of the independent Single Hospital Service Review, led by Sir Jonathan Michael, the SHS Programme has been operational since August 2016. The Programme is being delivered through two linked projects. Project One, the creation of MFT through the merger of Central Manchester University Hospitals NHS Foundation Trust (CMFT) and University Hospital of South Manchester NHS Foundation Trust (UHSM), was completed on 1st October 2017. Project Two is the proposal for North Manchester General Hospital (NMGH) to transfer from Pennine Acute Hospital NHS Trust (PAHT) to MFT.

The proposed acquisition of NMGH is being overseen by a Transaction Board established at the end of November 2017. The Board, of which MFT is a member, is chaired by Jon Rouse, Chief Officer Greater Manchester Health & Social Care Partnership (GMH&SCP).

A Strategic Case for the proposed acquisition of NMGH has been developed, and this was approved by the Board of Directors at its meeting on 13th March 2019, and subsequently submitted to NHS I on 29th March 2019. Following the submission of the Strategic Case, NHS I has commenced its review of the document. Feedback will be provided by NHS I / E in the Summer.

The Trust has continued to progress its planning and exploratory work, including a comprehensive Due Diligence programme, and the outcomes of this work will be considered in full in the Business Case. Initial Due Diligence was undertaken in 18/19 and a financial model was developed that described the outlook for PAHT in the absence of the proposed transactions. These exercises identified significant issues that can only be mitigated through a multiagency approach.

MFT remains committed to fully establishing the Manchester Single Hospital Service by transferring NMGH to MFT at the earliest practicable opportunity. On this basis, MFT will continue to engage with all key stakeholders, in particular NHS Improvement and Greater Manchester Health and Social Care Partnership.

Group level	What we are going to do	What will be achieved in 2019/20	By when
Single Hospital Service	Strategic Case – work collaboratively with NHS I / E Review Team	NHS I / E review process completed, and next steps determined (approval to proceed to Business Case or alternative process). Refresh Programme Plan in light of Strategic Case outcomes	Q1
Single Hospital Service	Undertake Due Diligence on the proposed acquisition of NMGH	All risks associated with the proposed transaction identified and clearly understood.	Q4
Single Hospital Service	Undertake disaggregation planning with NMGH/PAHT teams	Clarity about those services transferring to MFT as part of NMGH, and plans in place for maintaining operational arrangements on Day 1.	Q4
Single Hospital Service	Develop Business Case for acquisition of NMGH	Develop Business Case, achieve Board sign off, and manage through NHS I review process (subject to outcome of Strategic Case process)	Q3
Single Hospital Service	Develop Post Transaction Integration Plan (PTIP) for acquisition of NMGH	Develop first draft of PTIP for NMGH acquisition, including identification of benefits and benefits realisation process (subject to outcome of Strategic Case process).	Q3
Single Hospital Service	Undertake approvals stage activities	Completion of legal processes, Reporting Accountant Reports, NHS I transaction risk rating, Board approval, Transaction Agreement, Statutory Instruments, etc.(subject to outcome of Strategic Case process)	Q1
Strategy	Develop service delivery models	Clinical Models for the delivery of medical, surgical, children's & women's services at NMGH developed	Q4

To achieve financial sustainability

The Trust continues to face a financial challenge in 2019/20, with underlying pressures carried forward from 2018/19 along with in-year inflation and funding challenges. We have accepted a Control Total for 2019/20 of a £13.8m surplus. To achieve this financial position, we need to make in-year efficiencies of £61.7m. This will entail continued reduction in run rate overspends, delivering new activity with minimal extra cost and delivery of new cost savings plans.

At a group level we continue to evolve and develop our approach to strategic procurement and clinical productivity gains together with generating further efficiencies from the merger. The Trust is also participating in GM wide efficiency programmes.

Hospitals and MCSs have developed delivery programmes for the additional productivity and cost savings. This work has been informed by national benchmarking tools; the NHS Getting It Right First Time (GIRFT) programme and the NHS Model Hospital. All savings plans undergo a robust Quality Impact Assessment process to ensure that they do not have any detrimental impact on quality of care.

Financial performance and achievement of these delivery programmes will be monitored on a regular basis at Hospital / MCS level, through the Trust's Accountability & Oversight Framework and at the Board Finance Scrutiny Committee (FSC). The FSC oversees and scrutinise the achievement of the overall Financial Plan and progress with delivery programmes across Hospitals/MCSs.

The Trust plans to spend £79m on capital projects in 2019/20, which includes schemes across Estates, IM&T and equipment. The programme is largely funded from internal resources with £10.2m coming from charity contributions to support projects including Cardiac MR Scanner at the Wythenshawe Hospital site, and the Diabetes Centre and the Helipad at the Oxford Road Campus.

Group level	What we are going to do	What will be achieved in 2019/20	By when
Procurement	Further roll out of managed inventory	Creation of Corporate Scan for Safety Team	Q1
		Completed roll out in SMH Theatres and additional MRI areas	Q4
Procurement	Pilot more autonomous procurement support model	Dedicated MRI Purchasing Team developed to become more autonomous within the Group Procurement structure	Q2
Workforce	Improve relationship with medical staffing agencies through development of tiered agency framework	Improved fill rates achieved	Q1
Medical Directors Team	Support with temporary staffing planning - booking/compliance	Dashboards developed to improve temporary staffing management	Q1
Medical Directors Team	Develop with MFT PGME department a long-term strategy to address medical gaps	- Overseas sponsorship capability explored "Making medicine Brilliant" initiatives implemented - Post CCT trainees in fellowships created - FY3 posts created	Q4
Workforce	Increase attendance through absence management	Absence management system rolled out on ORS	Q4
Workforce	Deliver workforce technology plan to improve efficiency in use of workforce	E-rostering rolled out for medical staff in line with project plan	Q4
Workforce	Deliver attraction strategy to recruit in high risk areas	- Reduction in vacancies - Reduction in spend on temporary staff	Q4

4. Risk and Monitoring Arrangements

Risks to Delivery

Risks to delivering the plan are monitored and managed through the established Trust risk management arrangements. The Group Risk Management Committee oversees the management of all high level risks to the delivery of the organisational strategic aims and key priorities and these are mapped on the Board Assurance Framework.

Risks that present a significant threat to the Trust objectives or that score 15+ are reported bi-monthly to the Group Risk Management Committee. Detailed plans are in place to mitigate against these risks.

Monitoring Delivery

Delivery of the plans will be monitored throughout the year through the following mechanisms:

Board Assurance Report

The Board Assurance Report monitors MFT delivery of our targets and key performance indictors at the Group level. It is presented at each formal meeting of the Board of Directors.

Accountability Oversight Framework (AOF)

The Accountability Oversight Framework is the way in which MFT ensures that each of the constituent Hospitals and Managed Clinical Services are delivering on their plans so that MFT at the Group level is achieving its targets. Key metrics have been distilled from the Hospital/MCS Business Plans and form the basis of the AOF. Progress against each of the indicators is monitored each month and reviewed by executive directors. Where targets are not being met, a support package is developed to improve performance.

Hospital / MCS Review

A more in-depth review of delivery of the Hospitals / MCS plans takes place twice a year across the Executive Director Team and each Hospital / Managed Clinical Service.

Annual Review

A year-end review of the Annual Plan will be undertaken in December. Through this process progress to date will be used to project year end performance and RAG rate achievement. This will be presented to the Council of Governors at the Annual Planning development session.