

Northumbria Healthcare

#### NHS Foundation Trust

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## **5 YEAR STRATEGY –** PUBLICATION

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#### **SECTION 1**

#### 1.0 Executive Summary and Declaration of Sustainability

#### 1.1 Background

Northumbria Healthcare NHS Foundation Trust (NHCFT) is proud to be one of the country's top performing Foundation Trusts and in many ways is unique to the NHS. The Trust offers a range of services across health and social care, in hospital and community based settings as well as in people's own homes. The diverse range of services and environments that are delivered by the Trust are rarely found within one organisation, yet NHCFT have been delivering these services, in local settings for a number of years and continue to do so successfully. This places NHCFT in the unique, but opportunistic position of being well placed to rise to the challenges facing the NHS in the coming years ahead.

The Trust provides services to people that live in urban areas (North Tyneside) and also to those that live in some of the most rural parts of England (Northumberland). Both of these areas have industrial histories ranging from ship building to coal mining, with limited population movement out of area (creating an older age profile) and as such the local population has some of biggest health challenges nationally. Despite this, Northumbria Healthcare is focused: on delivering the best possible care with the best health outcomes to its local population, being responsive to the needs of the local population, developing strong relationships across public, private and the voluntary sector, supporting local communities and supporting staff to achieve their personal goals.

Northumbria Healthcare employs over 9000 people, many of whom live in the local communities served by its hospitals, community and social care services. Their development is at the heart of the Trust's success and, is why we invest heavily in nurturing and empowering staff to set the quality standards within the organisation. All who work in the Trust, whatever their role strive for excellence in all that they do and believe that the focus of the organisation is on providing safe, caring, high quality health care to the local population.

#### 1.2 Ambition

Our ambition is to provide local patients with the highest possible set of sustainable healthcare services by achieving our vision:

#### To be the leader in providing high quality, caring and safe health and care services

#### **Our Strategic goals**

At its heart, our strategy can be summarised simply as six goals:

- To ensure that Quality underpins every decision
- To provide the safest health and care services to patients and service users
- To be recognised as a caring organisation locally, regionally and nationally
- Maintain long term financial strength despite the challenging environment
- Attract, retain, support and train the best staff

• Develop an internationally recognised brand and build strong local and national relationships

However, in order to realise our ambitions of delivering high quality, safe and sustainable services, the Trust will need to meet the significant challenges which it faces. The challenges and our associated action to ensure the Trust remains clinically, operationally and financially sustainable over the coming years ahead are detailed in this strategic plan and summarised in the following section below:

#### Strategic Plan

#### **1.3** The Quality Challenge – Ensuring Clinical Sustainability:

- Whilst the Trust has a track record and reputation for delivering excellent services, the impact of the recent findings of Robert Francis QC (Midstaffs) and Sir Bruce Keogh's subsequent review (of 14 NHS and foundation trusts with higher than expected mortality rates) have not been underestimated by the Trust.
- National policy is shifting and the Trust must be in a position to react. For example, the CQC has brought in its most comprehensive review to date through Sir Mike Richards new style reviews which scrutinise every aspect of a hospital's performance. Additionally, Sir Bruce Keogh is leading the drive to require 24/7 consultant delivered services for the most acute conditions in centralised specialist centres.
- The Trust has been strategically positioning itself to rise to these challenges through the objective of consolidating our local specialist emergency activity in our new Northumbria Specialist Emergency Care hospital (NSECH) which will open in June 2015.
- The opening of the new Northumbria Specialist Emergency Care Hospital is critical to our future success as an organisation as it will enable the Trust to maintain 24/7 speciality consultant rotas across key medical and surgical services by centralising emergency activity on the new hospital site. The new hospital will be supported by a catchment area large enough to allow all key specialities to have sufficient activity to be delivered in a safe and sustainable manner.
- Additionally it leaves the Trust as a structural winner in the region as it will meet the criteria to be designated as a 'major A&E' meaning the site is essentially a fixed point in the local health economy, with Newcastle University Hospital FT acting as the major trauma centre for the region. This will result in a 'no change' situation in terms of trauma work. Previous modelling has highlighted that there will be minimal overall shift

in non-elective activity as a consequence of the new hospital and as such the Trust does not envisage there being any sustainability issues for either Trust. Modelling of this profile was submitted as part of the outline business case to Monitor.

- o The development of the new Northumbria Specialist Emergency Care Hospital will centralise non elective admissions in the new hospital. This will offer the base sites (NTGH, WGH and HGH) an opportunity to reconfigure so that they provide a better environment for patient care. The reconfiguration of wards (locations and reduction in bed numbers) will also allow for estate rationalisation, with some current off site services being accommodated on the base sites. The base sites will become centres of excellence for elective care and continue to provide 'walk in A&E 'services / urgent care services, as well as diagnostics, ambulatory care, elderly care assessment services (direct request from the NSECH public consultation) and outpatient services. The sites will provide the opportunity for closer working between primary and secondary care clinicians with GPs delivering care through the 'walk in A&E' service, delivering a truly integrated service for the patient.
- The Trust has had a strong focus on developing, integrating and improving services and pathways of care, with community services. Since acquiring community health services and the partnership agreement with Northumberland County Council for adult social care in April 2011 the Trust has created a single point of access for core community services and developed an integrated community response team, to facilitate the avoidance of admissions and maintain care in or closer to home. In addition, specific posts supporting discharge have been integrated with these teams supporting front and back of house discharges. These developments compliment local delivery of care via primary care and support the transfer of care from acute to community / home settings.
- Furthermore, the redevelopment of Haltwhistle community hospital and Berwick hospitals has offered the opportunity for the Trust to work closely with Northumberland Council in creating purpose built health and social care facilities, with co-location of primary care and / or supported living accommodation. The Trust has created both a Blyth and Berwick (both community hospitals) board which have public and governor representation. This board provides a forum for the Trust to be responsive to local communities and demonstrates the commitment the Trust has to delivering care locally. The programme of redevelopment for the community hospitals will ensure the Trust's estate continues and keeps pace with the changing requirements of clinical services.
- The Trust has a history of working with Marie Curie in providing palliative care services.
  This relationship has been further extended and additional investment has been made through this partnership to increase clinical capacity and palliative care services to

support more patients to die at home. The Trust is currently examining the opportunities of a formal partnership arrangement with Marie Curie following the success of the formal partnership arrangement with Northumberland County Council.

- The Trust is an engaged organisation with strong community relationships and partnerships with local populations, GPs, local councils and the voluntary sector. Its strength as an organisation has been built through its communities and by delivering care locally where possible and centrally where required.
- To ensure clinical sustainability the Trust needs to ensure that the clinical quality of the services it provides continue to deliver excellent clinical outcomes and be considered amongst the safest in the country. The strategic plan ensures that it the Trust continues to deliver on these core objectives. It demonstrates that the Trust continues to be strong and agile to reflect the changes impacting on the NHS and health economy.

#### **1.4** The Financial Challenge – Ensuring Financial Sustainability:

- The NHS is facing unprecedented financial pressures. In particular as our population ages and grows the NHS's year on year increases in funding fall well short of the 4-6% year on year growth in costs.
- Accordingly it has been estimated by Sir David Nicholson that, unless the NHS changes the way healthcare is delivered, there will be a funding gap of £30 billion a year by 2021 (the "Nicholson Challenge"). In addition, local authorities' social care budgets have been cut by over £2.5bn since 2011 and increasing amounts of NHS funds are being planned to be transferred to councils to support social care (the "Better Care Fund").
- Additionally the increasing competition being introduced into the system means that there are both increasing threats and opportunities to previously "safe" revenue streams.
- The Trust begins this five year planning cycle in a position of strength financially. THe Trust has delivered the following risk rating over the last three years.

	2011-12	2012-13	2013-14
Risk Rating	4†	4†	4

#### † Using previous risk rating system

- As can be seen above the Trust has a history of delivering strong financial performance. This has been underpinned by consistent delivery of efficiency savings targets alongside growth in income derived from the Trust's commercial activities. In 2013/14 the Trust delivered a COSRR of 4.
- Whilst we start from a position of strength with a Monitor CosRR of 4 we have built a robust strategic plan to ensure that our financial strength grows year on year. In particular, the following forecast CosRR over the next 5 financial years is outlined below:

	2014-15	2015-16	2016-17	2017-18	2018-19
Risk Rating	4	4	4	4	4

- The Trust faces a number of financial challenges as summarised above over the five years of the strategy, and more specifically these include:
  - Efficiency factors on tariff
  - Better Care Fund
  - Cost inflation on pay and non-pay
  - The impact of demographic growth in the population the Trust serves
- The Trust is broadly aligned in terms of its core assumptions with both its CCGs in terms of activity growth and demand and is working directly with commissioners with regards to the risks associated with schemes linked with reducing demand in the future. In

addition the areas of quality improvement that the Trust has identified through its strategic planning process link closely with those areas identified by both CCGs.

- The Trust has a well-developed, clinically led business unit structure that ensures strong financial and governance management of respective service lines.
- The Trust has submitted its financial forecast for 14/15, 15/16 in the two year operational plan to Monitor.
- Our financial plans consist of five main elements to address the challenges we face:
  - Protecting our core business and margins: We have developed a detailed programme to maintain strong engagement with GP practices across North Tyneside and Northumberland. We also are taking action by managing our waiting times for diagnostics and outpatient appointments to be in line or better (through advertising and building relationships with GPs) than those provided by competitor providers.
  - Managing demand: As a vertically integrated organisation with direct control over the local community services, we have developed a series of initiatives to work with local GPs and social services (e.g. local integrated networks, avoiding admissions team and schemes identified through the Better Care Fund) to reduce the boundary between the acute hospital and Out of Hospital Care so that care across the local health economy can be delivered in the most appropriate and economic location.
  - A particular focus for the Trust is managing the care of the elderly which is a particular challenge, given the percentage of over 65s in the local population is markedly higher than the national position.
  - Delivering a financial contribution from non core services: NHCT manages one of the largest NHS shared services in England. This generates a positive financial contribution that is reinvested in patient care. Any growth will come from diversification within this non-core business and providing further services across the NHS family.

#### **1.5 The Operational Challenge – Ensuring Operational Sustainability:**

- At the same time as delivering complex clinical and financial strategies, the Trust recognises that the operational challenges it faces require an equally robust response. In particular, transforming the Trust's operations is a critical enabler if the Trust is to achieve the levels of clinical excellence and financial efficiency it aims for. The Trust has always been keen to examine alternative models of care and has adapted itself over time by incorporating care, governance and business models from national and international learning.
- Whilst our benchmarking and track record suggest we start from a position of strength, the Trust has detailed plans to ensure operational sustainability through five key components:
  - Workforce: We recognise the importance of having an appropriate workforce and the national challenges of recruiting to key positions. We have in place a comprehensive recruitment process and engagement plans with local universities to ensure that we will be able to recruit the right skill mix to deliver our ambitions. Supplementing our recruitment drive is a comprehensive package of initiatives to ensure that staff are supported and trained to deliver compassionate care.
  - Estates and equipment: We have in place an ambitious programme of estates improvements and equipment upgrades to ensure that we have the modern facilities and equipment required to deliver consistently high quality care across all of our sites. This involves the opening of our Northumbria Specialist Emergency Care and the redevelopment of Berwick Infirmary.
  - Targets and standards: We start from a position of having delivered strongly against national and Monitor compliance targets, however we recognise that the increasing pressures on our local healthcare system mean that we will need to maintain a rigorous focus on compliance going forward. We therefore have in place a programme of initiatives which focus on each individual target (predicated on a detailed capacity and demand analysis and in month performance) which has been previously set out in our 2 year operational plan to Monitor.

- CQC rating: We fully understand the challenges that the new CQC inspection programme brings to Trusts, having worked closely as a buddy with North Cumbria during their recent inspection review. The Trust has a number of initiatives to ensure that staff have an awareness and understanding of the new process and the 5 new domains that the CQC consider as essential. The Trust aims to be considered 'outstanding' post inspection based on the services it delivers. Due to the diversity of services, the Trust will also be subject to an inspection of community services, albeit that this may be part of a combined acute and community inspection. We are learning from pilot sites and our experience of annual social care inspections.
- Systems and infrastructure: We have in place an investment programme in systems and infrastructure to ensure that our clinicians are supported to deliver the highest quality care whilst minimising the administrative burden on them and the patient.

Additionally, we plan the implementation of an electronic patient record, the electronic A&E floor and the ward information management system which will allow for immediate information to be available to our clinical teams (clinical status, discharge and bed efficiencies). The new system will be procured and implementation will be completed by end of 2015, eliminating the reliance on paper case notes by 2018.

To further support our locality and care closer to home initiatives, we have plans to explore the best model for agile working by better use of technology. Telehealth continues to be a key component of our future models of care, be it for delivery of community hospital based clinics (reducing travel for patients) or 'virtual consults' to nursing homes.

In order to deliver on our ambition to minimise the boundary between the acute services and Out of Hospital care, we are engaging in a significant initiative to align as far as possible the acute systems with those in the community and primary care to minimise the requirement on patients to repeat data multiple times.

#### 1.6 Governance

The Trust recognises that the coming five years represent a critical change management programme for the Trust and we have therefore put in place a robust governance process to ensure that progress on the supporting initiatives are tracked and delivered to plan.

Furthermore the Trust has a very stable and strong Board and senior executive team, with the Chief executive and Chair having been in post for 11yrs and 16 yrs respectively and having led a number of local and national initiatives related to clinical transformation and financial initiatives, whilst at the same time ensuring delivery of core performance measures as identified by the Trust and regulators. All of these factors will ensure, that despite the challenges facing the NHS as a whole, Northumbria Healthcare will continue to provide excellent clinical services to its local population, whilst at the same time continuing to grow and diversify so as to remain sustainable for the future.

Each of the identified strategic priorities will have an executive lead and will report progress to the Board as a minimum on a yearly basis, although in reality, the likelihood is that this will occur more frequently in line with the outline timeframes documented in this plan for delivery.

#### 1.7 Summary

The Trust can declare, that based on the evidence it has to date and the strategies outlined in this plan that it can continue to deliver high quality services and will remain sustainable as a foundation Trust over the coming 5 years on a clinical, financial and operational basis.

- Clinical sustainability is achieved through the opening of the new Northumbria Specialist Emergency Care. This effectively makes the Trust a fixed point within the LHE and allows the Trust to maintain 24/7 consultant rotas across key medical and surgical services supported by a large catchment area.
- 2. Financial sustainability is achieved by the on going delivery of transformational CIPs.
- 3. Operational sustainability is achieved through a robust plan of continuous investment in our already strong business. These planned investments in estates, IT, workforce and infrastructure will ensure we have sufficient operational capacity to meet the future demands on our services.







#### **SECTION 2**

#### 2.0 Strategic Context

#### 2.1 The National and Local Picture

The NHS faces a number of challenges over the next 5 years. The NHS is expected to deliver year on year efficiency savings whilst ensuring that it continues to improve the quality of services and experiences of patients. The increasing demand facing acute providers, with particular regard to emergency attendances and admissions is a challenge facing most acute organisations. This coupled with a national push towards seven day working, integration and moving more care outside of hospitals and, the overall convergence within the provider market of health in England, is pushing hospital Trusts to think differently about traditional means of care delivery.

Northumbria Healthcare has considered this macro environment in the development of its 5 year strategic plan. In addition, it has also ensured that its priorities, both in its 2 year operational plan and 5 year strategic plan, meet those commissioning intentions of its two Clinical Commissioning Groups (CCG), – North Tyneside and Northumberland.

The local CCG plans have a clear vision for health improvement of their respective populations and reflect the national context to reduce emergency admissions, making significant progress in reducing avoidable deaths and increasing the proportion of people having a positive experience of hospital care.

North Tyneside CCG will focus on primary care at scale, older person's services, urgent care services and parity of esteem for mental health services. All objectives need to be delivered with an overall cost saving of £12-15m with £6.5m saving reinvested into services via the Better Care Fund.

Similarly, Northumberland CCG will focus on unplanned care, with particular regard to the Northumbria Specialist Emergency Care Hospital, primary care access and the high risk patient pathway, planned care with a shift of activity to community settings, secondary care thresholds and working together to deliver mental health and disability services through contracting with the specialist mental health Trust.

These priorities for local commissioners are in line and in keeping with the strategic and operational priorities for Northumbria Healthcare NHS Foundation Trust.

The Trust has good working relationships with both CCGs and has a formal partnership agreement with Northumberland County Council relating to the provision of social care in that locality. The CEO and executive directors meet on a quarterly basis with the county council as part of the formal partnership arrangements. In addition the CEO and members of the executive team meet senior members of both CCGs on a monthly basis to cement relationships and ensure that local priorities and quality performance measures are aligned to the needs of the local population, but also to the requirements of respective organisations.

#### 2.2 Northumbria Healthcare NHS Foundation Trust

Northumbria Healthcare NHS Foundation Trust is a successful, high performing Trust providing secondary healthcare to over 550,000 people spread over the largest geographical area of any Trust in England, from Tyneside in the South and East, to the Scottish Border in the North, and to Hexham and Haltwhistle in the West of the County.

It currently delivers services from three acute sites; North Tyneside General hospital (NTGH) serving the North Tyneside population, Wansbeck General Hospital (WGH) and Hexham General Hospital (HGH) both serving Northumberland residents and seven community hospital sites. NTGH and WGH deliver a full range of district general hospital services that include full A&E services, non elective admissions (medical and surgical), critical care services, diagnostics and elective services. HGH is similar except it does not provide emergency surgery and trauma services, nor does it have a critical care unit on site. In instances where such patients attend A&E, patients will be transferred to either NTGH or WGH. In some cases patients will be transferred to Newcastle hospitals if this is deemed to be more appropriate, for example for primary PCI or major trauma.

The Trust gained Foundation Trust status in 2006 and Monitor approved the Northumbria acquisition of community services in North Tyneside and Northumberland and delegated adult social care services in Northumberland from 1<sup>st</sup> April 2011. The Trust's turnover is now over £400m, and it employs approximately 9000 staff. The Trust delivers a large number of clinical services to its local population and also has a commercial arm to its business that delivers services such as payroll and car leasing to other NHS Trusts.

The Trust has a proven track record of delivery of excellent business performance and has been Monitor rated green for governance and FRR of 4 against monitor's compliance framework, and more latterly against the risk assessment framework (CosRR [4]), for the last 7 years. The Trust has:

- Consistently delivered a strong underlying financial, delivered cost improvement plans in line with expected targets
- Consistently improved year on year its staff survey results, with response rates now being the best in the country,
- A workforce profile which allows it to deliver safe and economical services
- Maintained strong satisfaction ratings with its services both within patient experience results and public and stakeholder perception research
- A track record of delivery of core performance measures whilst ensuring continued delivery of safety and quality initiatives and clinical development.

#### 2.3 What the Stakeholders Say

The Trust has an extensive patient experience programme that goes beyond the delivery of the national friends and family test. The Trust has been nationally recognised as being in the top 10 of Trusts for excellent patient experience as surveyed in the national inpatient survey. The trust also

has an internal real time patient experience programme which provides immediate feedback to staff on how patients perceive the care they receive on our inpatient wards. Wards have consistently delivered a key promoter score of over 9.00 (maximum available 10.00) demonstrating the high level of satisfaction as expressed by patients who use the services. Regular engagement with the local population, ensure that the Trust focuses attention on those areas that are deemed important to the local population.

The Trust prides itself in listening to patients, the public and all of its stakeholders on a continuous programme of engagement delivered throughout the year. Where necessary the Trust takes action to respond to the information provided both via the patient experience programme but also via stakeholder perception research, and the 'we listening programme'. The Trust has delivered the highest response rate to the staff survey in England for the third consecutive year. The results put Northumbria Healthcare in the top 20% of NHS organisations in England with staff feeling motivated and likely to recommend their Trust as a place to work or receive treatment.

#### 2.4 How the Trust is Governed

The Trust has a very stable and strong Board and senior executive team, with the Chief Executive and Chair having been in post for 11 years and 16 years respectively and having led a number of local and national initiatives related to clinical transformation and financial initiatives, whilst at the same time ensuring delivery of core performance measures as identified by the Trust and regulators.

The governance framework surrounding the delivery of the 5 year strategic plan is closely aligned to existing board structures and sub committees that will ensure that the key strategies outlined in the plan are delivered within the established timescales. Each of the key themes will be reviewed, as a minimum on a yearly basis and where appropriate more frequently depending on where the objective is in the cycle of development. Each theme will have a lead Executive Director who will report to the appropriate board subcommittee. Overall progress against the strategy and 2 year plan will be formally reported to Board yearly and 6 monthly as appropriate

#### 2.5 The Trust's Local Population

The Trust primarily serves the population of Northumberland and North Tyneside, the former being a more rural environment and the later more urban. The average age of an emergency admission to the Trust is 83 years old and this is representative of the population demographics that the Trust serves and the regional and national shift in population, particularly with increasing age.

The table below outlines the current variation in age profile for North Tyneside and Northumberland combined compared to the national distribution.

	Estimated population by age group								
Year	All ages	65+	%	75+	%	85+	%	90+	%
2014	524705	109623	20.89	49477	9.43	13990	2.67	5078	0.97
2015	527308	112185	21.28	50530	9.58	14527	2.75	5313	1.01
2016	529936	114585	21.62	51205	9.66	15031	2.84	5566	1.05
2017	532554	116748	21.92	52060	9.78	15614	2.93	5822	1.09
2018	535189	119097	22.25	53453	9.99	16185	3.02	6043	1.13
2019	537848	121491	22.59	55288	10.28	16739	3.11	6325	1.18
2020	540521	123680	22.88	57152	10.57	17406	3.22	6680	1.24

#### North Tyneside and Northumberland combined population by age distribution:

#### National population distribution by age:

	Estimated population by age group								
Year	All ages	65+	%	75+	%	85+	%	90+	%
2014	54548568	9536320	17.48	4402299	8.07	1302687	2.39	488300	0.90
2015	55022729	9733426	17.69	4489330	8.16	1349562	2.45	509748	0.93
2016	55486580	9911790	17.86	4553756	8.21	1398889	2.52	532097	0.96
2017	55938178	10079679	18.02	4651323	8.32	1447216	2.59	554219	0.99
2018	56383132	10256529	18.19	4788866	8.49	1491216	2.64	577159	1.02
2019	56822690	10433955	18.36	4950673	8.71	1537534	2.71	603844	1.06
2020	57257938	10603004	18.52	5105026	8.92	1593184	2.78	635487	1.11

All data source: office of national statistics April 2014

It can be noted that for all age bands 65+ onwards, the percentage of the population that falls into each age band is higher in North Tyneside and Northumberland than the national population distribution.

The table below shows the overall population growth within the areas of North Tyneside and Northumberland over the last 3 years and compares this to the overall national population growth. Based on this trend it is expected that the likely demand for activity within the Trust will continue to grow.

Year	North Tyneside and Northumberland pop	National population
2010	515,627	52,642,452
2012	517,562	53,493,729
2014	524,705	54,548,568

The growth in population from the period of 2010 to 2014 has been approximately 1.7% for North Tyneside and Northumberland against a national growth of approximately 3.4%. Despite the overall population growth being small, the change in age profile, with an increase in the elderly being higher than the national average change is likely to impact significantly on the Trust and the services it will need to deliver in the future.

#### 2.6 Market Analysis Context

The development of the market within the health sector in England is considered to be relatively embryonic, and one that is, in the main, influenced by GPs, their knowledge of services on offer and their relationship with local providers of health care.

However, notwithstanding this, NHS providers are being impacted by competitive rivalry (NHS organisations growing outside of their historical boundaries) and new entrants (private sector growth and extension into new areas) from both private and NHS providers of health care – in a way that has not previously been experienced.

There are a number of contributing factors that are influencing the evolution of the health market across England and these are noted below:

- Any Qualified Provider
- Patient propensity to choose and awareness of choice
- Access to treatment and waiting times locally
- Transforming Community Services

As the market evolves and develops over the next ten years, Trusts are likely to see dramatic changes across the market of health, as commissioners strive to use the market to drive better value for money, better access and better quality of care.

In addition, this change and growth in the health market is not only impacting on what was historically considered individual aspects of care, but also across the pathway of care from hospitals, community and at home. These changes will ultimately respond to the growing needs and expectation of patients and the public regarding what types of services to access, when and how. Trusts need to understand how the market changes will impact on the historical boundaries of primary, secondary and specialised care in a way that would not have been anticipated just a number of years ago.

Northumbria's approach is very much focused on the delivery of excellent clinical outcomes (for elective and non elective work) and the further development of Northumbria services.

We are mindful of Public Health commissioning intentions via the local authorities and as a potential provider and beneficiary of those services, the Trust therefore actively works to align future plans with our council colleagues and CCGs.







#### **SECTION 3**

#### 3.0 Strategic Plan for 2014 to 2019

Northumbria Healthcare developed a clinical strategy some years ago (2010-2015) which focussed on providing person centred care across its main district general hospitals and across the community hospitals. This core strategy included the development of a hospital dedicated for emergency care.

The strategy was built on the forethought relating to how the needs of the local populations would change, as a result of the ageing population and the need to provide extensive elective services locally, alongside international evidence which demonstrated, how imperative it is to centralise urgent emergency care to provide critical mass and ultimately better outcomes for patients.

This strategy is now on the cusp of implementation and this future 5 year strategy will demonstrate the expected and desired outcome as a result of the reconfiguration of services.

The Trust already has a number of corporate qualities that it delivers well. These include:

- Clinical leadership
- 7 day service
- Local delivery of services to a high standard
- Development of the experience of patients
- Supporting staff to achieve their potential
- Engagement with the local community
- Partnership working with stakeholders
- International development and support
- Commercial acumen and support other NHS Trusts

However, the Trust is acutely aware of the need to continually improve its performance on all matters of quality, and operational delivery if it is to be viewed nationally and locally as a high performing organisation. The Trust recognises that it needs to demonstrate compliance to standards that are often nationally problematic. These include:

- Consistency of care
- Reducing health inequalities
- Streamlining care further across primary, secondary and social care
- Extending further 7 day working
- Recruitment and retention
- Delivering more and at a high quality with less investment

Our strategy for the future takes account of this and more and is detailed in the next section.

#### The Trust's Vision for the Future

Northumbria Healthcare NHS Foundation Trust is a Trust that is dedicated to providing excellent patient care, both in terms of clinical outcomes and patient experience.

The vision of the Trust is:

#### To be the leader in providing high quality, caring and safe health and care services

To ensure that the Trust can deliver its vision, the Trust has developed an overarching, high level strategy that is then sub divided further into key themes. The overarching strategy statements are:

- To ensure that Quality underpins every decision
- To provide the safest health and care services to patients and service users
- To be recognised as a caring organisation locally, regionally and nationally
- Maintain long term financial strength
- Attract, retain, support and train the best staff
- Develop an internationally recognised brand and build strong local and national relationships

Our 5 year plan can be summarised using the following infographic outlined on the following page and is the form in which our 5 year priorities have been communicated with our staff and local communities.

The vision and objectives identified demonstrate strength from the past and a bold vision for the future. Not only focused on improvements within our core business of delivering hospital, community and social care but also embracing a future in which Northumbria Healthcare extends its area of responsibility geographically into Cumbria and operationally into new markets such as primary care.

Stakeholder opinions have been key in developing these objectives that are focused on responding to their needs and requirements.

The Trust will continue to work in close partnership with primary, tertiary and social care providers to provide seamless pathways of care and deliver this care in the best place for patients. The Trust has a wide range of key stakeholders and will continue to actively engage with them and act on their views. This proactive approach with partners and stakeholders will provide the Trust with better business intelligence to make informed decisions about continually improving care and ensuring that the Trust's priorities remain aligned with those of the community it serves.

To ensure we deliver in accordance with these objectives, the Board of Directors has implemented a robust governance structure and has identified core metrics in which the executive is structured and performance managed against in terms of overall delivery and delivery within timescales for each core objective.

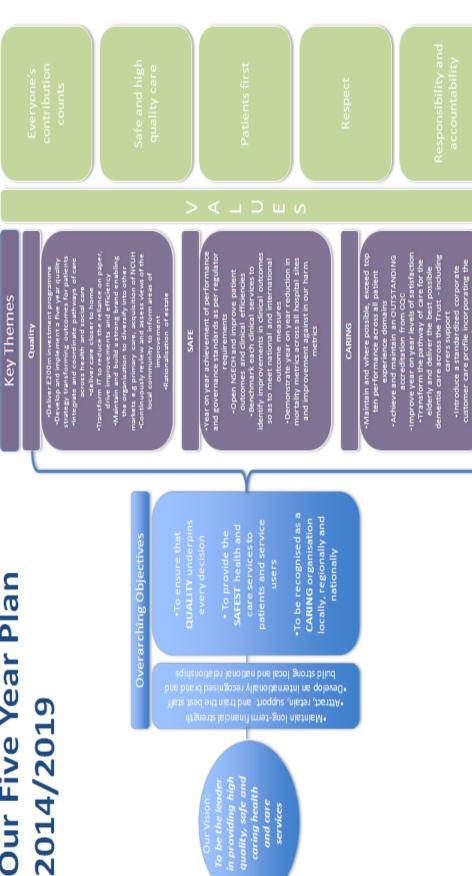
The Trust's culture and strong values has been built on trust, openness and empowerment with clear lines of accountability and responsibility that has helped the organisation to learn and improve.

Everyone, from our stakeholders to porters, cleaners, nursing staff, social workers, allied health professionals and administrative staff have a part to play in ensuring we successfully achieve the Trusts vision and deliver against its objectives.

The Trust will continue to recruit, develop, motivate and communicate with its people and support them all with the appropriate training and competencies to do the right thing, every time. All parts of Northumbria Healthcare will work to bring about innovative improvements in service delivery for the benefit of our patients. To do this, the Trust will re-align resources where appropriate, increasing use of technology and information so as to deliver better decisions, develop and leverage our estate and maximise the long term financial strength of the organisation.

Summary Infographic for 5 Year Plan

# **Our Five Year Plan** 2014/2019



### Northumbria Healthcare NHS



NHS Foundation Trust

# building a caring future HOSPITAL | COMMUNITY | HOME

