

**Northumberland, Tyne and Wear NHS Foundation Trust**

**Board of Directors Meeting**

Meeting Date: 25 May 2016

Title and Author of Paper: Update on the development of the Trust's 5 Year Strategy 2016-2021

James Duncan, Deputy Chief Executive/Executive Director of Finance

Executive Lead: James Duncan, Deputy Chief Executive/Executive Director of Finance

Paper for Debate, Decision or Information: Information

**Key Points to Note:**

This paper provides an update on:

- The development of the Trust's 5 Year Strategy 2016-2021 including, for newer members of the Board, a recap on the initial development work;
- The engagement and involvement in the development of the Strategy, to date;
- Engagement and involvement plans going forward;
- The "Big Tickets" ie Tough problems to be addressed over the course of the Strategy timeframe.

Risks Highlighted to Board : Potential cap on capital in the NHS, a risk that is out-with the Trust's control.

Does this affect any Board Assurance Framework/Corporate Risks?

Yes

SO1.1 That we do not develop and correctly implement service model changes-The Trust may be unable to develop and correctly implement some service model changes due to the potential cap on capital in the NHS, a risk that is out-with the Trust's control.

Equal Opportunities, Legal and Other Implications:

The new Strategy will support these.

Outcome Required: The Board to note the progress made on the development of the Trust's 5 Year Strategy 2016-2021

Link to Policies and Strategies:

The 5 Year Forward View for Mental Health (2016)

## Update on the development of the Trust's 5 Year Strategy 2016-2021

### Purpose

To update the Board on progress on the development of the Trust's 5 year Strategy 2016-2021 and proposed work going forward.

### 1. Development of the 5 Year Strategy

#### 1.1 The Initial Development Work

The Board held two strategic development sessions in 2015 to commence the process of developing the strategy for the Trust for the next five years. The Trusts existing strategy runs to the end of 2016/17, and as a board we decided we should take an inclusive and engaging process in developing our strategy. We also recognised the significant challenges facing health and social care and the developing context for creating new models of care envisaged in the Five Year Forward View. Finally in terms of context, the Board recognised the need to take forward these conversations in the context of a devolved management model, enabling a supporting the Groups to develop their strategic plans in the context of an overall Trust strategic framework. It was agreed that these would be developed in tandem. To support this aim, the second of these development sessions, in July 2015, involved a joint development session with the Clinical Groups. At this joint development session the group considered a number of questions:

- What is the NTW Offer ?
- What is the strategic context ?
- What are the strategic priorities?

The Clinical Groups also presented their initial thoughts on their emerging strategic priorities to the Board for discussion.

One outcome of the discussions was a long list of emerging strategic priorities:

- Achieving and demonstrating the highest quality experience and outcomes for those who use our services, supporting people at all times to reach their own goals for recovery.
- Developing, alongside partners in health and social care, integrated models of care, designed around the needs of local populations, where the whole needs of the individuals are all given equal status .
- Involving People in the design and delivery of their own care, supporting people, their families carers and communities to support themselves.
- Being the provider of choice in the delivery of services and expertise for those with complex and specialist needs in the areas of mental health, learning disability, autism and neuro-disability, with a reputation for market leading services, nationally and internationally.
- Being a key partner in meeting the wider health and care needs of the local population, including an offering of direct provision and support

- Being seen as the place to work.
- Being a leader in innovation, research, and education, where our expert skills and knowledge bring benefits to the people we serve, enhance recruitment while also representing a marketable proposition through NTW+.
- Being the market leader for using digital technology for the improvement of care delivery.
- Being sustainable and leading in value for money.
- Being a national player on policy and strategy.

## 1.2 “Framing” the Strategy

In October 2015 a strategic planning session was held involving Executive Directors and Clinical Group Trustees and using a Tool from Monitor’s Strategic Planning Tool Kit the group completed a Horizon Scanning Exercise and using the information from this activity considered the **BIG strategic questions** that should frame the Trust’s Strategy 2016-2021 **and the top 3 enablers**.

Through this process a consensus was reached on **4 BIG strategic questions** that should frame the Trust’s Strategy and these were as follows:

### **(i). What is our focus?**

(What are we going to do and what are we not going to do eg what opportunities do we have for growth, where should we retract and what is our appetite for risk and expansion)

### **(ii). How do we provide the best care and demonstrate outcomes and value?**

Understanding and demonstrating value to service users critical to best use of scarce resources

### **(iii). How do we engage proactively and be a main player-responding to, influencing and leading?**

### **(iv).How do we protect parity of esteem and those that use/need our services.**

(the organisational model is “as is” unless it can be demonstrated that alternatives will result in better outcomes)

Through the process enablers were also identified including recruitment and retention, IMT and the estate but it was decided that the top 3 enablers should be identified later on in the strategic development process as they needed to underpin the emerging strategy.

## 1.3 Simplifying the emerging strategic priorities

The group also reviewed the emerging strategic priorities which had been identified at the Board Development Session in July and agreed that, given the feedback from that session, they could be simplified and grouped as follows:

**Quality Priorities-constantly delivering better, effective care resulting in better outcomes for people;**

**System Priorities-approach to integration, ensuring parity of esteem, profile and reputation;**

**Resource Priorities-delivering sustainability through driving out waste;**

**Growth Priorities-delivering value in new markets to sustain our services;**

**People priorities-delivering an expert, engaged and enthused team-a great place to work.**

It was agreed that these emerging strategic priorities would be reviewed and refined over the course of developing the Trust's strategy.

#### **1.4 The "Bottom Up Approach"**

The Clinical Groups have continued to refine their developing strategies in the context of the four priorities identified above:

- What do they mean at Group level/corporate level?
- What is our current position?
- What are our goals and objectives to meet the priority?
- What are our options to deliver?
- What are the key enablers required?
- What do we need to take forward at a Trust wide level?
- What are the risks, constraints, threats and opportunities, current and potential?
- In the light of these what is our proposed strategy for delivery.

The Clinical Groups completed the above work in November and in December shared their emerging strategies at a strategy workshop with the Executive Directors. At this session it was reiterated that the core focus of our strategic framework should be the delivery of value from the point of view of the patient/service user. It was also recognised that further work was required to properly articulate this and to ensure that this core aim was owned by service users and staff.

The strategy development work at a group level developed an initial shortlist of "Big Tickets" ie the tough problems to be addressed over the period of the Strategy were also identified:

	<b>Initial “Big Tickets”-ie Tough problems to be addressed</b>
1	The Integration Agenda-working with partners to deliver new models of care delivery, which enshrine parity of esteem
2	Delivery of the Transforming Care for People with Learning Disabilities and Autism Programme
3	Developing a sustainable strategy for Forensic services
4	Developing a sustainable strategy for Neurorehabilitation Services
5	Developing a sustainable strategy for CYPS Tier 4
6	Developing a sustainable strategy for CYPS community services
7	Implementation of outcome of “Deciding Together”
8	Completion of Community Transformation Programme
9	Digitally enabled clinicians, digitally empowered patients

## **2. Engagement and involvement in the development of the Strategy**

Following on from this development work and the identified need to deepen our engagement with staff and service users to enable real buy in and ownership of our strategic framework, a further process of wider engagement, and conversations was commenced from December.

### **2.1 Trust Organisational Development Workshop-December 2015**

A Trust-wide Organisational Development Workshop was held on the 16<sup>th</sup> December involving approximately 150 staff. The morning session focused on “Making Strategy Real: Where do we need to go?” Group work in the course of the morning included facilitated discussions on each of the three Clinical Group’s emerging strategies and how IMT and Workforce and OD Strategies could support these.

While there was much support for the themes in the developing strategies, a very significant common theme that emerged was the need to have meaningful outcome measures including capturing some of the “human elements”, qualitative as well as quantitative was one of the recurring themes

There was also a deep theme around being distinct and speaking to the heart of service users carers and staff. Much feedback suggested that our language was too business like and we risked sounding like a commercial corporation rather than an organisation with care at its centre. Staff felt that for them and for service users to connect the language used should reflect the intrinsic value of working with people. This has informed the development of our further engagement and conversations that are described below

## **2.2 Council of Governors-January 2016**

At the Council of Governors Engagement Session in January those present discussed three of the emerging supporting themes, around technology, innovation and growth and being a great place to work. This was followed up by meetings with the Lead Governor to start to articulate the best way to engage people in a more fundamental conversation about our core purpose and determining what is valuable to people. This next set of conversations was started in our Speak Easy conversations in February 2016.

## **2.3 Speak Easy –February 2016**

A series of “set theme” Speak Easy Sessions were held across the Trust in early February focusing on three of the emerging themes with the aim of giving staff the opportunity to shape and influence the Trust’s strategy and plans for the next five years.

Six Speak Easy Sessions were held hosted by Executive Directors and facilitated by seventeen members of staff. Each session focused on three facilitated small group discussions, talking about the following:

### **Group One:Service users, carers and staff have told us we should be a person centred organisation.**

- **What should that look like?**
- **What would it mean to you?**
- **How would you know we were achieving it?**

### **Group Two:If the organisation felt ”great to work for” .....**

- **What might we see that is different and how might this make you feel?**
- **What impact might this have on the way you work?**
- **How would you know we were achieving it?**

### **Group Three:Service users, carers and staff have told us they want “joined up” services**

- **What do you think would be gained from more “joined up” services?**
- **Does anything worry you about this?**

The sessions were attended by 117 people and a broad cross section of staff participated in the discussions. The outputs from these sessions have been documented and themed. Groups took the opportunity to discuss some wider issues regarding the developing strategy and current concerns and issues and these too have been captured.

## **2.3 Board “Time Out” -February 2016**

At the Board Time Out in February an update was provided on the strategic context and its impact on the Board’s strategic thinking. The Board was also updated on some key messages from the engagement and involvement activities outlined above and explored what “quality at the centre” might look like in terms of person centred care, a person centred organisation and what would enable a person centred organisation.

**Person Centred Care**

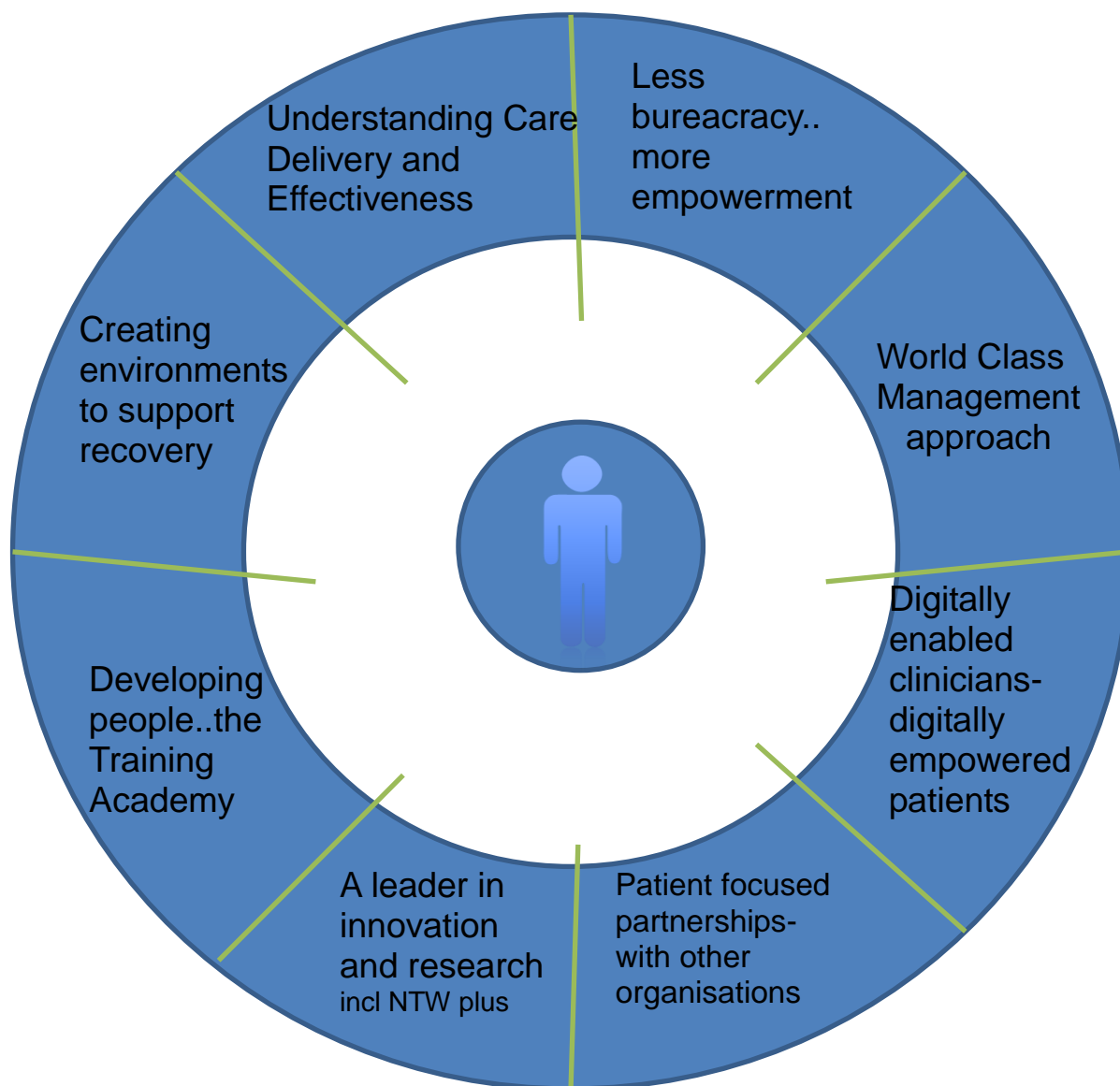


**Person Centred Organisation**





## Enabling the Person Centred Organisation



The Board also discussed outcomes, how they contribute to quality and the national and local picture in terms of their use.

### **2.4 Service User and Carer Reference Group-March 2016**

At the Service User and Carer Reference Group in March the Deputy Chief Executive updated the Group on why the Trust was reviewing its Strategy, the engagement and involvement so far and the common themes that are emerging and some of the key messages. Following on from the Board discussions at their "Time Out" the Service User and Carer Reference Group then reflected upon and shared what "quality at the centre" would look like to them, as service users and carers, in terms of person centred care, a person centred organisation and what would enable a person centred organisation. Subject to some amendments to the language used the Service User and Carer Reference Group widely supported the concept of what person centred care and a person centred organisation would look like and what would enable a person centred organisation. However, it was also reinforced that this work should be taken out across a wider cross section of

service users carers and staff to test, reflect and ensure buy in. The message continued to be that we should we need to simplify and be clear, but if we could articulate well our core strategic aim around doing what is valuable to people, this could be a very powerful force both internally and externally

## 2.5 Shaping our Strategy-Together Workshops-April 2016

We considered how we could best engage with service users, carers and staff to take forward this work. Following discussions on how we could ensure real co-production in the development of the strategic framework, an invitation was issued to service users, carers, staff and Governors to three half day workshops (one in Northumberland, one in Newcastle and one in Sunderland).

On entry to the Workshops a set of slides were displayed on a loop showing words pulled from a variety of Trust strategies and documents as well as key words from the 5 Year Forward View for Mental Health. It was explained that we use many different words, there are some commonalities but the fact that there are so many words may cause confusion and that one of the aims of the workshop was to try and make sense of the words we might use to describe our ambitions and our hopes for the future.

The first activity involved everyone thinking individually and writing down a list of single words that described “what is the Trust about” “what are we here to do”. Everyone shared their words with those on their table and each table then chose 5 top words.

The second activity involved each table drawing a coat of arms using their 5 top words to show their view of the essence of the Trust. Twenty coat of arms were designed over the course of the workshops and two examples are shown below.



Whilst the design of the coats of arms varied there were common themes across many of the posters including person/people centred, recovery, pathway, support, wellbeing, quality, expertise, listening.

The final activity involved each table thinking ahead, to say five years from now and considering if we were to live and work by the words generated in the last exercise, what does good look like? What are our ambitions? giving some practical examples.

A blog on the Trust’s Intranet has been set up to share the outcome from the workshops and encourage others to join in and either attend or facilitate local workshops using the same format.

### 3. Engagement and involvement going forward

#### 3.1 Shaping our Strategy-Together Workshops-May onwards

The format of the Shaping our Strategy –Together workshops was well received by those who attended and volunteers have come forward to facilitate more local workshops using the same format. The local workshops will be provided to any groups of staff, service users, carers, stakeholders or partners who want to be involved. Further sessions are planned with the user and carer network, North and South of Tyne Carer Groups, and with user groups across the patch

#### 3.2 Consolidation and Testing of the Strategy-July

It will be important that everyone involved sees how their feedback has influenced the Trust’s developing strategy and as many of those as possible who participated in the engagement and involvement events are to be invited to a half day workshop on the 21<sup>st</sup> July to collectively review and test out the emerging strategy.

### 4. “The Big Tickets”

Following the initial identification of “The Big Tickets” in November 2015 further discussions regarding the emerging Strategy have led to the refinement of the list as follows:

	<b>“Big Tickets”-ie Tough problems to be addressed</b>
A	The Integration Agenda/New Models of Commissioning and Provision
B	“Deciding Together”-Transforming Services-A new future for specialist mental health services in Newcastle and Gateshead
C	Children and Young People Community Services
D	Children and Young People Tier 4 Services
E	Neurorehabilitation Services
F	Transformation of Learning Disability Services
G	Adult Secure Inpatient Services
H	Completion of Community Transformation Agenda

The former “Big Ticket” Digitally enabled clinicians/ digitally empowered patients is now regarded as part of an enabling Strategy.

The Strategy Working Group were updated, at its meeting in April, on the strategic context and discussed the details, risks and interdependencies regarding each individual “Big Ticket”. These discussions highlighted the potential opportunities, in terms of some services, and interdependencies in terms of the impact on individual site strategies. A number of the “Big Tickets” involve capital developments and the Strategy Working Group discussed the risks associated with any potential cap on capital within the NHS and potential alternatives ways of achieving capital developments.

The Strategy Working Group agreed that the potential opportunities, interdependencies in terms of their impact on individual site strategies and options going forward should be the subject of a wider workshop and this is being planned.

Work has also started on the development of a Financial Model to support the modelling of key strategic options.

## **5. External Context**

As the Board are aware, the Trust is heavily engaged in external discussions with CCG, Local Authority and other partners, in developing the wider strategic view for the development of health and social care over the next five years to be set out in the Sustainability and Transformation Plan for Northumberland Tyne and Wear, which is due to be submitted to NHS England on 30<sup>th</sup> June. What has emerged from this work is a need for an overall NTW wide vision for Mental Health supporting and aligned with the work being progressed across the patch. This is being developed and informed by the work we have been developing internally.

The Board is also aware of the significant financial challenges facing health and social care, which need to be addressed in the Sustainability and Transformation Plan. This required us to increase our focus on delivering what is really of value to the people who need our services and support.

Our developing strategy remains aligned with the integrated strategy development across NTW, and a theme is emerging about focussing on creating value across the whole mental health care pathway, creating stronger links across all partners including primary care provision.

In a wider national context the publication of the Five Year Forward View for Mental Health provides us with some core themes and aims which are consistent with, and will be integrated into our strategic framework.

## **6. Next Steps**

<b>May-July</b>	Continuing engagement through workshops on core purpose and value Refinement of Clinical Group Strategic Plans in light of emerging themes Outline supporting Strategies developed
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<b>June 22<sup>nd</sup></b>	Consideration of NTW whole health economy Sustainability and Transformation Plan by the Board
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<b>June 30<sup>th</sup></b>	Submission of NTW whole health economy Sustainability and Transformation Plan
<b>July 21<sup>st</sup></b>	Workshop on emerging Strategy, bringing together work to date
<b>July 22<sup>nd</sup></b>	Board Development Strategy Workshop
<b>August-Sept</b>	Refinement following feedback from workshops Full Development of supporting Strategies
<b>October</b>	Board Workshop on Strategy Adoption of Strategy by Board

**7. Recommendation**

The Board are asked to:

- Note the progress being made in the development of the Trust's 5 year Strategy 2016-2021 and plans for engagement and involvement going forward.

**James Duncan**  
**Executive Director of Finance/Deputy Chief Executive**  
**17<sup>th</sup> May 2016**