

## Strategic Plan Document for 2014-19

Cumbria Partnership NHS Foundation Trust

## **Strategic Plan Guidance – Annual Plan Review 2014/15**

The cover sheet and following pages constitute the strategic plan submission which forms part of Monitor's 2014/15 Annual Plan Review.

The strategic plan must cover the five year period for 2014/15 to 2018/19. Guidance and detailed requirements on the completion of this section of the template are outlined in Section 5 of the APR guidance.

Annual plan review 2014/15 guidance is available [here](#).

Timescales for the two-stage APR process are set out below. These timescales are aligned to those of NHS England and the NHS Trust Development Authority which will enable strategic and operational plans to be aligned within each unit of planning before they are submitted.

Monitor expects that a good strategic plan should cover (but not necessary be limited to) the following areas, in separate sections:

- Declaration of sustainability
- Market analysis and context
- Risk to sustainability and strategic options
- Strategic plans
- Appendices (including commercial or other confidential matters)

As a guide, we would expect strategic plans to be a maximum of fifty pages in length.

As a separate submission foundation trusts must submit a publishable summary. While the content is at the foundation trust's discretion this must be consistent with this document and covers as a minimum a summary of the market analysis and context, strategic options, plans and supporting initiatives and an overview of the financial projections.

Please note that this guidance is not prescriptive. Foundation trusts should make their own judgement about the content of each section.

The expected delivery timetable is as follows:

Expected that contracts signed by this date	28 February 2014
Submission of operational plans to Monitor	4 April 2014
Monitor review of operational plans	April- May 2014
Operational plan feedback date	May 2014
Submission of strategic plans (Years one and two of the five year plan will be fixed per the final plan submitted on 4 April 2014)	30 June 2014
Monitor review of strategic plans	July-September 2014
Strategic plan feedback date	October 2014

## **1.1 Strategic Plan for y/e 31 March 2015 to 2019**

This document completed by (and Monitor queries to be directed to):

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<b>Date</b>	30 <sup>th</sup> June 2014

The attached Strategic Plan is intended to reflect the Trust's business plan over the next five years. Information included herein should accurately reflect the strategic and operational plans agreed by the Trust Board.

In signing below, the Trust is confirming that:

The Strategic Plan is an accurate reflection of the current shared vision and strategy of the Trust Board having had regard to the views of the Council of Governors;

The Strategic Plan has been subject to at least the same level of Trust Board scrutiny as any of the Trust's other internal business and strategy plans;

The Strategic Plan is consistent with the Trust's internal operational plans and provides a comprehensive overview of all key factors relevant to the delivery of these plans;

All plans discussed and any numbers quoted in the Strategic Plan directly relate to the Trust's financial template submission; and

The 'declaration of sustainability' is true to the best of its knowledge.

Approved on behalf of the Board of Directors by:

<b>Name</b> <i>(Chair)</i>	Mr Mike Taylor
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Signature



Approved on behalf of the Board of Directors by:

<b>Name</b> <i>(Chief Executive)</i>	Mrs Claire Molloy
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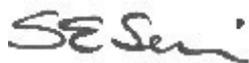
Signature



Approved on behalf of the Board of Directors by:

<b>Name</b> <i>(Finance Director)</i>	Mrs Sarah Senior
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Signature



## **1.2 Declaration of sustainability**

<b><i>The board declares that, on the basis of the plans as set out in this document, the Trust will be financially, operationally and clinically sustainable according to current regulatory standards in one, three and five years time.</i></b>	<b>Confirmed</b>
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## **1.3 Market Analysis And Context**

The Board of Directors has considered a detailed market analysis and strategic context as part of the preparation of the Trust's 2 year and 5 year plans.

The Trust is well placed in the Cumbria market to respond to the commissioning strategy to provide preventative and treatment services in domiciliary and community settings and rely less on acute care settings. The Trust has identified that it needs to improve its quality governance and has substantially moved over the last 12 months to do this. The Trust is launching 4 clinical care groups in July 2014 to lead services into the future and improve quality governance. These care groups are aligned to commissioning intentions, as set out in our strategic plan document.

The Trust is working in the context of a county that faces major health and care challenges. Our approach to this has been to work with our statutory partners across health and local authority services. On this basis, our strategic plans are aligned with those of our partners in so far as the county has developed firm forward plans. The Trust is committed to ongoing joint work to develop and deliver these plans including jointly engaging and involving the public. Given the challenges our health and care system faces we have ensured that our plans include significant transformation of our services through more contemporary ways of working and improved quality. On this basis our plans demonstrate both clinical and financial viability.

## **1.4 Risk To Sustainability And Strategic Options**

Our strategic plan includes an assessment of strategic risks that the Trust will mitigate in order to achieve our goals. These "macro" risks have been considered in detail over a number of Board sessions and with significant consideration and input from the Trust's "micro and meso" clinical delivery layers and support service risk registers. The process has been fully informed by the Trust's improvement plan and quality governance improvements.

In preparing our financial plan the Board has considered a detailed risk financial sustainability assessment and had independent validation of our plan by PwC. This piece of work is in line with all Cumbria NHS organisations who have engaged PwC to independently validate the starting point for our financial plans and forward assumptions. The Trust has utilised this work to feed into our strategic plans. Our strategy is based on work achieved with our partners and commissioners and is fully aligned with the county's broader strategic direction for services.

## 1.5 Strategic Plan

# 5 Year Plan

Cumbria Partnership   
NHS Foundation Trust

June 2014

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## Exec Summary

This 5 year plan sets out our main delivery objectives in the context of the challenges and opportunities that exist in Cumbria.

We have achieved a great deal in the past; however, we recognise we can do better and we face challenges in improving both the quality of our services and our future financial sustainability. Our Trust has not yet achieved its full potential for quality and value for our patients & commissioners. As a mature organisation our strategy is moving from one focussed on growth **to a focus on quality and best value for our patients & commissioners**, in order to **revitalise** our Trust for the future.

We intend to utilise our reserves during the preparation and implementation of more sustainable long term plans. We have started the "health and care system" planning for a transformed future through a strong Alliance of all local health and care organisations. Our 5 year implementation plan is aligned and cohesive with our Alliance partners in Cumbria.

Our strategic goals are clear;

- Consistently delivering the highest possible quality of service we can achieve.
- Realising the full potential of everyone we work with and the talent of all our staff.
- Transforming our services to improve them for the people we serve.

In the forthcoming 5 years we intend to make great progress towards each of these by supporting our clinicians achieve the quality of service to which we all aspire. We will sustain together both the quality of our services and their sustainability.

Our long term service plans are summarised as;

- Providing the most effective "out of hospital" services possible.
- Modernising our services to enable people to be independent and in control of their own health and care.
- Adding value beyond direct health and care interventions.

As a Trust we are committed to putting continuously improving, high quality, compassionate care at the heart of our work. Success will be measured by positive feedback from the people who use the service when they tell us about their individual experiences. We know that in order to

succeed we will need to create the right environment and positive culture in which quality care can flourish. Our quality improvement and organisational development plan will;

- Release the potential of all our staff.
- Free our staff to innovate and find solutions without requiring un-necessary permission.
- Ensure that the “collective effort” of the Trust is more than merely the “sum of the parts”.

Our financial plan is to;

- Transform how services are delivered to make them sustainable for the medium and long term.
- Invest in essential supporting infrastructure to achieve the above and realise benefits from the improved infrastructure (e.g. quality and productivity gains).
- Invest in improving the quality of our services.
- Safely reduce our costs – ensuring that costs are reduced without adverse impact on the quality of our services.
- Achieve the best outcomes from our contracts through CQUIN, local incentive schemes, risk sharing and delivering more services for our commissioners.

We start our plan with a deficit, and over 5 years with the above approach we plan to recover this position to a modest surplus. During this period we have planned for investment in key enabling activities.

We have set out our plans in alignment with our partners and commissioners. In delivering them we will continue to work in partnership and develop new partners. Specifically, we will work more closely with local general practices, acute services and tertiary centres to more fully network and support the effectiveness of our clinical services. Programmed changes to services will be coordinated with our partners through our established Alliance based delivery programmes (one for north Cumbria and one for south Cumbria/north Lancashire). The Trust’s 4 care groups provide the basis for our services to develop and where necessary we will complement this with specific project groups for major infrastructure developments.

Taken overall, this 5 year plan sets out a clear set of intentions for the Trust to deliver that are well aligned with our partners in our health and care system. Our past record is strong and we have commenced revitalising the Trust for the future. Quality and Value are the focus of our strategy and we look forward to reviewing progress annually throughout the next five years.

# Plan on a Page

What we will achieve

**People in our communities living happier, healthier and more hopeful lives**

How

**Delivering quality and best value for our patients**

Our Goals

1. Consistently delivering the highest possible quality of service we can achieve.
2. Realising the full potential of everyone we work with and talent of all our staff.
3. Transforming our services to improve them for the people we serve.

Our Priorities Now

Make real improvements in quality (experience, safety and outcomes) for our patients, carers and our staff.

Achieve the things that our commissioners and regulators expect us to as a valued statutory public service.

Introduce and embed more effective leadership and support for our services.

Positively change the way our organisation is run to place quality as our organising principle and to create a continuous learning culture.

Become more sustainable by designing future services with our partners and local communities that will transform care positively for patients.

How We Will Work Together For Patients

Care Groups

Children's and Family Services  
Community Health Services  
Mental Health Services  
Specialised Services



**Improving Quality  
A Great Place to Work  
Transforming Services**

**Improving Quality & A Great Place to Work**

- ✓ Hearing the voice of the patient
- ✓ Developing a culture that supports quality
- ✓ A clear vision and shared values
- ✓ Aligned goals at every level
- ✓ Engagement for high quality care
- ✓ Learning, innovation and service improvement
- ✓ Teamwork, cooperation and integration
- ✓ Collective values-based leadership

**Transforming Services**

- ✓ Providing the most effective services possible (both in hospital and community settings).
- ✓ Modernising our services to enable people to be independent and in control of their own health and care.
- ✓ Adding value beyond direct health and care interventions.

Our shared values

We act with kindness  
We are ambitious  
We are fair  
We show spirit

Living our values means;

- ➡ We never forget we are here for our patients.
- ➡ We never stop improving.
- ➡ We strive to bring about social equity.
- ➡ We are energetic, resourceful and determined.

## How we Have Formed our Plans

Our plans have been formed through the following planning process;



In forming our plans, we have taken care to ensure that our forward intentions are aligned to the joint work emerging from the two health and care system level programmes that are in place in Cumbria.

As our planning process has taken place during a period of organisational transition (the formation of our care groups) we expect to refine and hone our plans with our care group leadership during 2014/15 so that detailed care group 5 year plans are prepared and implemented.

Ongoing work to engage with the public, our members, our governors and our staff will be achieved utilising the care groups and the established public facing communication programmes that are now in place.

# Trust Strategy Summary

## Our Strategy

Our organisation has followed a recognised path in its development. We have succeeded in our past strategy to grow; the scale of our Trust has increased by 300% from our FT inception in 2007. Future opportunities for growth are dependent upon proven service quality and the value we can deliver. Our Trust has not yet achieved its full potential for quality and best value for our patients & commissioners.

As a mature organisation our strategy is moving from one focussed on growth **to focus on quality and best value for our patients & commissioners**, in order to **revitalise** our Trust for the future.

**Our strategy is to deliver both Quality and Best Value for our patients and commissioners** in the form of;

- Evidently high quality services as experienced by patients.
- Partner of choice based on the value we add for patients and commissioners.

## Vision and Mission

Our vision has been developed so that we are clear on our purpose;

Our Vision **People in our communities living happier, healthier and more hopeful lives.**

Enabling this vision is our enduring cause. Our collective effort to achieve this is what we strive for each day. In this regard our clear mission is;

Our Mission **Delivering quality and best value for our patients.**

Our focus is on being a highly networked health and care organisation, with a vast range of expert services, delivered by skilful and committed professionals who embody the very spirit of Cumbria. We are a membership organisation; locally governed and accountable to our communities and regulators.

## Goals and Priorities

We have set out 3 strategic goals and 5 clear priorities;

1. Consistently delivering the highest possible quality of service we can achieve.	2. Realising the full potential of everyone we work with and talent of all our staff.	3. Transforming our services to improve them for the people we serve.		
Make real improvements in quality (experience, safety and outcomes) for our patients, carers and our staff.	Achieve the things that our commissioners and regulators expect us to as a valued statutory public service.	Introduce and embed more effective leadership and support for our services.	Positively change the way our organisation is run to place quality as our organising principle and to create a continuous learning culture.	Become more sustainable by designing future services with our partners and local communities that will transform care positively for patients.

Our ambition is for health and care services in Cumbria to be better;

- We want services to be safer, with better access and better outcomes.
- We want day to day experience of using services to be even higher and we want to listen and hear more what people are telling us about their experiences.
- We need to sustain our services better within the resources available for health and care in Cumbria, which are reducing.
- Our staff – doctors, nurses, other clinicians, everyone – who works in the health and care system should be supported more to reach the fullest potential for the benefit of patients.

We believe we can change things for the better and we believe we must do it together with all the people who live, work and use services in Cumbria.

## Our Values

We are guided by the values we share. These values are important because we all have an equal right to a hopeful and meaningful life, with support that enables us to be as healthy and independent as we can be.

**We act with kindness**  
**We are ambitious**  
**We are fair**  
**We show spirit**

Living our values means;

- We never forget we are here for our patients.
- We never stop improving.
- We strive to bring about social equity.
- We are energetic, resourceful and determined.

## Our Unique Strengths

We have considered the things that we can utilise to achieve our goals and have identified our key strengths, how these differentiate us from others and what we will use them for in delivering our plans.

### Key Strengths We Have

### How They Differentiates Us

### What We Will Use Them For

#### The sheer breadth of our expert service

We are a very diverse organisation, drawing together an incredibly wide range of expertise, skills and knowledge. Our experts include acknowledged innovators and trailblazers in their respective fields.

Seamless and integrated care for patients.  
Patient centred care – looking after the “whole person”.  
Application of best practice standards and innovative practice.

#### Our amazing people

We are spirited and energetic. We are passionate about the care we provide and the region we live and work in. We are resourceful and dedicated. We do the right thing, not the easy thing and often despite a very challenging backdrop.

Championing the health and care of vulnerable people and groups in our society.  
Delivering outcomes that are equitable across the populations we serve.  
Tenaciously keeping our promises for our patients and staff.

#### Our presence in communities and being rooted in Cumbria

We understand the communities we serve, the impact of rurality, social exclusion and inequality. We initiate more successful co-production than any other organisation working across health and social care in Cumbria. We build effective partnerships and grow overall capacity. We consistently do more, try harder and deliver extra for the individuals, families and communities that we are so proud to serve.

Being a recognised leader in effective rural healthcare.  
Building and utilising the assets within our communities as enablers for health and wellbeing.  
Enabling people to live as independently as they wish in their community.  
Enabling recovery to be effective and our services to be as personalised as possible for every individual.

## Cumbria's Health and Care System Strategy

NHS England, the NHS Trust Development Authority, and Monitor have identified Cumbria as one of eleven challenged health economies across England. This reflects the seriousness of the quality, financial, and sustainability challenges in the local system. We recognise those challenges, and collectively, the leaders of the Cumbria health and care system have stated that:

**The system causes more harm than is acceptable;** A wide range of core standards, including NHS Constitution Commitments, are not reliably delivered in Cumbria.

**Our system currently spends more money than it is allocated;** All NHS providers in Cumbria had significant deficits at the end of 13/14.

**We need to change to meet future demand;** The rise in demand is largely driven by demography. The overall population of Cumbria is forecast to grow modestly by 2019, however the number of people aged over 85 is expected to grow markedly.

**There has been a loss of public confidence;** Communities are worried that valued local services will be lost, and that the NHS system will make bad choices just to balance the books.

**We can't always attract the right staff;** Across Cumbria it continues to be very difficult to attract the right clinical staff, particularly in some specialist areas. In 2013/14 the percentage of the total workforce cost spent on short term staff was significantly higher than national benchmarks

**We don't always provide care in the right environment;** the audit of medical admissions carried out by the Oak Group showed that care could be provided in alternative environments for both acute and community inpatients. This position is typical across England; major change is reliant on out of hospital options

### The Proposed Cumbria Clinical Model

Across both north Cumbria and south Cumbria/north Lancashire the health and care system has worked in partnership to develop future sustainable clinical models for implementation;

In north Cumbria this process has built upon existing momentum and joint work and started to significantly engage both clinicians and the general public. The plans have been developed under the banner;

*together for a healthier future.*

In south Cumbria the process has similarly being built upon existing momentum and joint work has engaged clinicians and the general public more fully under the banner;



As an Alliance we have developed an out of hospital model based which is comprised of 5 elements:

Primary Care Communities	Included in our Long Term Service Plan for Community Health Services
Urgent care co-ordination centre	Included in our Long Term Service Plan for Community Health Services
Integrated rapid response services	Included in our Long Term Service Plans for Community Health Services and Mental Health Services
Community specialist services	Included in our Long Term Service Plan for Specialist Services
Referral support system	Not explicitly responded to in our plans.

We are committed to a positive future for the community hospitals in Cumbria. They provide a vital role in ensuring local access to services and enabling needs to be met in the most appropriate care environment. Our community hospitals will need to continue to adapt, including:

Minor Injury Units and Community Hospitals will be delivered as part of an urgent care network	Included in our Long Term Service Plan for Community Health Services
A change in the role for some Community Hospitals, providing hybrid joint unit for health and social care accommodation and as wellness hubs	Included in our Long Term Service Plan for Community Health Services
All community hospitals to provide a wellness hub, including ambulatory care, outpatients, social care and third sector resources to support wellbeing and independent living	Included in our Long Term Service Plan for Community Health Services

An independent review of the adult mental health services jointly commissioned by the CCG and local authority and delivered by Cumbria Partnership NHS FT working jointly with Cumbria County Council carried out by the Centre for Mental Health has further identified the service areas we need to improve. From the review, and our earlier work, we will;

Address access to services, including CRISIS and Home Treatment	Included in our Long Term Service Plan for Mental Health Services
Improve the functioning of Community Mental Health Teams	Included in our Long Term Service Plan for Mental Health Services
Move to a greater focus on a recovery model, including maximizing opportunities to work with the third sector	Included in our Long Term Service Plan for Mental Health Services
As we improve the effectiveness of our primary care, access and recovery focused mental health services we will also consider the optimal way to configure in-patient services	Included in our Long Term Service Plan for Mental Health Services

## **Better Care Fund**

In Cumbria, the CCG and Local Authority have drafted and consulted other partners on the proposed Better Care Fund. This includes the transfer of current CCG resources to the local authority for services presently provided by the Trust totalling approx. £5.6m annually. The Trust, CCG and Local Authority have agreed ongoing provision of these services commissioned in future through the Better Care Fund arrangements.

Looking forward, some of the investment in building "out of hospital" services that are included in the system clinical models described above will be sourced from the Better Care Fund. The Trust has planned for inward investment in these services in its forward plan and will work with commissioners to ensure this is achieved in line with the Better Care Fund local plan.

## Service Plans

Our long term service strategies and plans are summarised as;

### **Providing the most effective services possible (both in hospital and community settings);**

- Partnering with GPs to provide the most effective and sustainable local services possible.
- Partnering with local Acute services to enable specialists to work effectively in community settings.
- Working with joint-commissioners so that health and care services develop sustainably and coherently.

### **Modernising our services to enable people to be independent and in control of their own health and care;**

- Moving “upstream” so that prevention, early diagnosis, self-care and resilience are our first priority.
- Personalising health and care services so that each experience of our service is as effective as possible for each individual.
- Supporting recovery through contemporary approaches that look beyond health diagnosis to enable people to reach their full potential.

### **Adding value beyond direct health and care interventions;**

- Safeguarding children and adults in the health and care system.
- Training & educating the clinicians of the future.
- Supporting other sectors become more effective in the wider health and care system in which we work – building the systems overall capacity.

The Trust is working within the Cumbria Health and Care Alliance so that as much as possible the above plans are developed coherently with our partners. As the Alliance matures we will develop and refresh our plans accordingly.

In order to deliver our long term service strategies and plans we have established the following care groups;

- Children’s and Families
- Community Health
- Mental Health
- Specialist Services

The care groups have been established from 1<sup>st</sup> July 2014 to support all our services develop their quality governance effectiveness. The care groups are a major enabler of our forward plans and our strategy to **revitalise** our Trust for the future.

Key to the care groups is a major increase in the clinical leadership embedded into our service leadership structures with each having an Associate Medical Director, Associate Director of Nursing and a General Manager in addition to various Clinical Director and other leadership roles as appropriate.

The Board of Directors has established and approved a transition plan to ensure successful transfer of services to our new care group structure.

We will specifically plan for each of our care groups to address the sustainability as follows;

- High quality services delivered in ways that are financially sustainable.
- Creating and adding value for patients/ commissioners more than they would expect and more than other similar providers and focussing on areas of service to reflect where we can deliver this.
- We will seek out opportunities to be an effective partner so that we remain relevant. We will shape the health and care system by transforming health and care services successfully into the future. We will use our expertise to support other sectors (e.g. local community organisations) in the interests of the whole health and care system.

The 5 year plan for each is considered specifically in the following pages;

## Children's and Families

### Children's and Families Care Group - Strategic Narrative

Over five years our services will; use clearly defined pathways of care, be more integrated both internally and with key other agencies and respond more swiftly to urgent needs . Our Trust will involve children and young people effectively, focus our activities on where we add the most value and ensure we achieve more effective safeguarding with our partners.

#### Key Commissioning Priorities;

Improved ways of involving and getting feedback from children and families.

Improved pathways and greater range and use of community based and self managed care.

Strengthened prevention and early help services.

Develop comprehensive emotional wellbeing services.

Design a new model for working collaboratively across organisations.

Improve safeguarding and ensure the learning is embedded in practice.

Improved services for Children Looked After.

#### Children's & Families Care Group Plans

Improvement Plan	Implementing immediate actions to secure underpinning high quality services.
CAMHS Tier 3	Full delivery of the Trust's CAMHS Tier 3 services in line with commissioning intentions.
Transition	Comprehensive management of transition from Children's services into Adult services for children with long term needs.
Safeguarding & Children Looked After	Full implementation of child safeguarding requirements and specific health services for Children looked after.
Electronic Patient Records	Renewing and implementing electronic patient records for all services that enable the right care, in the right place at the right time.
Children's Service Centres	With partners, creating 3 co-located centres for children's and family services to support integrated services and a seamless experience of care.
Patient Focus	Development and implementation of effective involvement of children and families in service learning, development and planning.
Healthy Child Programme	Full implementation of the healthy child programme in line with commissioning intentions.
CAMHS Tier 4	Clearly defining and sustaining CAMHS Tier 4 (or CAMHS Tier 3+) care for Cumbrian children.

#### Biggest Challenges;

Recruitment & "system maturity"

#### Partnerships Required;

Local partners & specialist provider support

## Community Health

### Community Health Care Group - Strategic Narrative

Over five years our services will; become more integrated with general practice in “primary care communities” and be the enabler for a high performing “out of hospital” health and care services. Our Trust will support our small hospitals remain vibrant and present in our local communities and be innovative in sharing system risk and rewards with our partners.

#### Key Commissioning Priorities;

Implement the emerging clinical models for “Out of Hospital” care that are being developed in the North and South of Cumbria;

Develop integrated care in “primary care communities” model of operational partnership working.

Maximise ‘step up & step down’ care in community hospital beds and ensure effective discharge/admission liaison arrangements with acute care.

Increase care in community settings, particularly capacity for community based short term intervention services.

Effectively support patients navigate the urgent care system and ensure more effective use of limited resources overall.

#### Community Health Care Group Plans

Improvement Plan	Implementing immediate actions to secure underpinning high quality services.
Supporting people to stay well	With partners, and making optimum use of assets in local communities, support and encourage the development of strong communities and patient populations to enable reduction in inappropriate utilisation/reliance on health and care services by ensuring that people remain healthy and well for longer.
Urgent & Unplanned Care	Jointly creating and delivering high performing urgent care systems in both North and South Cumbria.
Primary Care Communities	Creating and delivering a joint approach to extended primary care teams (health and social care) throughout Cumbria to underpin the effectiveness of the whole health and care system in the long term.
Small hospitals; community inpatient and ambulatory care	Clearly defining and sustaining bed based care in our small hospitals with partners in acute care, social care and general practice.
Electronic support for patient management	Renewing and implementing electronic patient records and other supporting systems for all services to enable the delivery of the right care, in the right place at the right time.
Support General Practice	Partner and deliver general practice services where invited to do so, working with our Alliance partners to sustain and develop effective primary care services for our communities.

#### Biggest Challenges;

Scale/pace & “system maturity”

#### Partnerships Required;

Local partners & third sector providers

## Mental Health

### Mental Health Care Group - Strategic Narrative

Over five years our services will; enable self care, support people recover and live to their full potential, use hospitals less & increase the health outcomes for patients and carers. In this period the Trust will become more effective in supporting joint commissioning, involve people who use services, focus our activities on where we can add most value and support primary care effectively.

#### Key Commissioning Priorities;

Greater mental health services available in primary care and better access to services overall.

Services more orientated to support recovery and independence.

Reduced deaths by suicide

Earlier identification of and support for people with dementia

Reductions in inappropriate use of acute health services – better liaison services.

Parity in health outcomes for people with mental illness.

More effective involvement of patients in the joint commissioning and provision of services

#### Mental Health Care Group Plans

Improvement Plan	A programme of continuous improvement, identified through a jointly commissioned review of all mental health services, and ongoing staff engagement to ensure the continued delivery of high quality mental health services.
Primary Mental Health Care	Creating and delivering a joint approach to primary mental health care across Cumbria to underpin the effectiveness of the whole mental health and care system for the long term.
Urgent Mental Health Care	Implementing improved services to support people in crisis.
Acute Mental Health Care	Clearly defining and sustaining a revised and improved approach to bed based care and supported community care in a range of appropriate facilities across Cumbria.
Create a recovery focused Mental Health Care system	Systematically implement a recovery focus to all mental health care through developing recovery focused pathways with all providers and community practitioners in Cumbria.
Psychological Therapies	Training the broad workforce to be more able to offer psychological therapies to support the recovery focus.
Suicide Prevention	Fully develop and support the county's preventative strategy to reduce the number of deaths by suicide.
Physical Health	Implement targeted approaches to ensure that the physical health needs of people with mental illness are fully addressed to improve equity of outcomes.
Older adults	Roll out and refresh of the Cumbria wide Dementia Strategy, to ensure the continued delivery of high quality services for older adults, to meet increased demand from an ageing population.
Joint Commissioning	Developing the current S75 arrangement to more fully cover the joint commissioning and provision agenda within Cumbria.
Electronic support for patient management	Renewing and implementing electronic patient records and other supporting systems for all services to enable the delivery of the right care, in the right place at the right time.

#### Biggest Challenges;

Workforce skills, joint commissioning

#### Partnerships Required;

Local partners & specialist provider support

## Specialist Services

### Specialist Services Care Group - Strategic Narrative

Over five years our services will; be stable and effective in providing specialist care in community settings, enabling specialists to develop and thrive in our county. The Trust will work in partnership to enable more specialist services to be provided in our communities across the whole county and make effective partnerships with tertiary centres to support us.

#### Key Commissioning Priorities;

Providing more ambulatory services in community settings (closer to home).

Increasing the effectiveness of long term conditions diagnosis and care.

Greater effectiveness of primary care services with more active education and liaison with specialists.

Sustaining countywide approaches on a population footprint at sufficient scale for sustainable specialist roles.

#### Specialist Services Care Group Plans

Improvement Plan	Implementing immediate actions to secure underpinning high quality services.
Proactive management for people with long term conditions	Introduce system wide change, working with GPs, acute providers and other partners to provide person centred, coordinated care for people with LTCs based on supported self-care, optimal use of telehealth and co-production of services.
Electronic support for patient management	Renewing and implementing electronic patient records and other supporting systems for all services to enable the delivery of the right care, in the right place at the right time.
Specialist Care	Creating and delivering joint approaches to specialist care covering both hospital and community settings.
Palliative Care	Leading the creation of and delivering a countywide specialist palliative care service in partnership with other providers (hospices, acute services etc.)
Neurology	Developing the recently established countywide neurology service to become more effective and sustainable.
Note	The Trust's specialist services include; Countywide Neurology services Countywide Diabetes services Countywide Learning Disabilities services Countywide Physical Health Psychology services Countywide Community Dentistry services Countywide Sexual Health and HIV services Countywide Palliative Care services

#### Biggest Challenges;

Workforce supply , care boundaries

#### Partnerships Required;

Specialist provider support

## Quality Improvement and Organisational Development

Our ambition is to change the culture of our organisation to make quality and safety our core organising principle – the relentless pursuit of the highest quality care for our patients. To do this we must turn the way our organisation works on its head to align our effort and systems to support and enable staff to deliver the highest quality care we can achieve.

We all have a role in improving quality, be that frontline staff who directly deliver care to patients or corporate service and support staff who play a vital role in enabling and supporting our frontline teams. To deliver quality care we need to understand what is important to patients, carers and their families. Our approach is based on hearing the voice of the patient and knowing and applying best practice.

Patients and carers have an important role to play in helping us reshape our processes and redesign our own services. We will focus not just on patient satisfaction, complaints and incidents but also look at the everyday experience our patients in ways that are accessible and sensitive. We will seek full participation of patients and carers wherever we can.

We need the right culture and we allow quality to flourish through:

- Communicating a clear vision and shared values that will guide our decisions actions and behaviours.
- Aligning goals at every level of the organisation so that each staff member understands their contribution to the overall purpose of the Trust and is supported through annual appraisals, supervision, feedback and training.
- Engaging, involving and listening to staff so that they can take charge of developing their own services in partnership with those who use them.
- Promoting learning amongst each other and also outside our Trust so that we can build our capacity to innovate and improve.
- Supporting cooperation and integration in and across teams to enhance communication and help build relationships and a community focus .
- Developing collective values based leadership, making sure we use the wide range of leadership talent we have across the organisation to develop leaders with the right style and in the right place.

To help us know how we are doing we will use the NHS outcomes framework to measure patient outcomes for quality and safety and a range of measures to show how well we have engaged with staff. Achieving our ambition will take time and persistence and will only be achieved by working together.

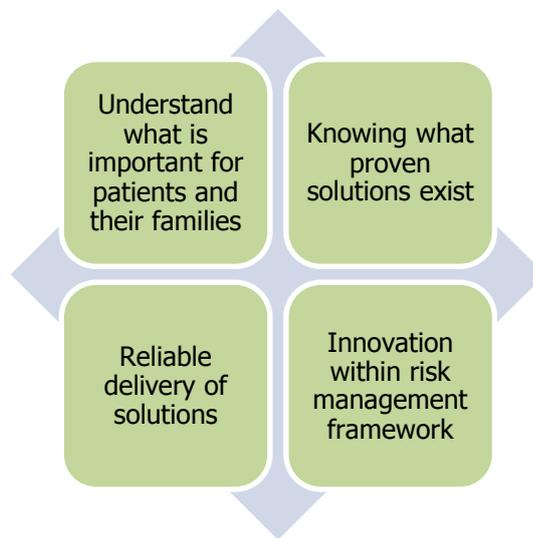
As a trust we are committed to putting continuously improving, high quality, compassionate care at the heart of our work. Success will be measured by positive feedback from the people who use the service when they tell us about their individual experiences. We know that in order to

succeed we will need to create the right environment and positive culture where quality care can flourish.

We believe that improving quality overall involves each and every contact our staff have with those who use our services.

Our model is based upon staff

- Knowing what is important to the patient
- Knowing what works
- Innovating within a risk framework
- Doing it well



The Trust has a wide range of clinical services making a model that supports many different clinical situations highly relevant to each setting equally. For staff to work within this model they need to be supported in putting quality first; they need a professional infrastructure that supports learning by continuous professional development and personal reflection; they need feedback in the context of clear shared expectations and access to a range of other professional supporting multi-disciplinary approaches within team frameworks. This is a model that connects our staff to their best purpose; the purpose that they have told us motivated their choice to work within healthcare.

Key areas that our Quality Improvement and Organisational Development Strategy and Plan addresses are;

- ✓ Hearing the voice of the patient
- ✓ Developing a Culture that Supports Quality
- ✓ A Clear Vision and shared Values
- ✓ Aligned goals at every level
- ✓ Engagement for high quality care
- ✓ Learning, innovation and service improvement
- ✓ Teamwork, cooperation and integration
- ✓ Collective Values-based Leadership

The key outputs and outcomes we are aiming for are;

<p>For Patients: over the next three years you will.....</p> <ul style="list-style-type: none"> <li>• Experience more personalised care and have greater involvement in your care planning</li> <li>• Have opportunity to be part of the Trusts work in designing future and reviewing current services</li> <li>• Have clearer information on services and their effectiveness, particularly on quality and safety</li> </ul>	<p>For Teams: over the next three years you will.....</p> <ul style="list-style-type: none"> <li>• Have access to relevant information on quality and safety</li> <li>• Explicit support to understand the role of your team and the effectiveness of relationships with other teams that you work with</li> <li>• Support to build team relationships and help when things are not working well</li> <li>• Understand the connection between the expectations, priorities and practice of front line teams and the Trust's Quality Strategy</li> <li>• Help to create and deliver consistent standards of care across the county</li> </ul>
<p>For staff &amp; leaders: over the next three years you will .....</p> <ul style="list-style-type: none"> <li>• See less duplication and bureaucracy and have more time to care for patients</li> <li>• Have more clarity on the organisations priorities and your personal objectives</li> <li>• Be supported by better systems of appraisal and supervision</li> <li>• Have more visibility and support from senior managers</li> <li>• Have the opportunity to be involved in delivering improvement and be trained in quality improvement methods</li> <li>• Access to a programme of clinical skills and CPD</li> <li>• Clearer visibility of pathways for career progression</li> <li>• Feel enabled to deliver significant improvements in the safety and quality of direct patient care</li> <li>• Have clear routes for escalating concerns within your care groups and corporate structure</li> <li>• Have training for quality improvement</li> <li>• Be clear about your roles and responsibilities in the new structure</li> <li>• Have clearly defined behaviours</li> <li>• Feedback on your performance through appraisal</li> <li>• Have access to support through coaching, mentoring, action learning</li> <li>• Have access to relevant and timely data and workforce plans to help you manage your service</li> <li>• Feel able to adopt a mentoring and coaching approach in all that you do</li> </ul>	

We will use the NHS outcomes framework to monitor patient outcomes in the following areas;

- Preventing people from dying prematurely
- Enhancing quality of life for people with long term conditions
- Helping people to recover from episodes of ill health or following injury
- Ensuring that people have a positive experience of care
- Treating and caring for people in a safe environment and protecting them from avoidable harm

Monitoring staff outcomes;

In addition to monitoring the outcomes for patients we need to monitor the effect these changes have for staff and so we will;

- Use existing resources such as the staff survey
- We continue to use LiA pulse checks
- We will monitor sickness absence and use of agency staff as part of the team based data

## Financial Plan

Our overall plan is defined by the major strands of;

- Transforming how services are delivered to make them sustainable for the medium and long term – doing this in partnership with other providers and commissioners to utilise our whole resources more sustainably
- Investing in essential supporting infrastructure to achieve the above and realising benefits from the improved infrastructure (e.g. quality and productivity gains).
- Investing in improving the quality of our services.
- Safely reducing our costs – ensuring that costs are reduced without adverse impact on the quality of our services.
- Achieving the highest levels of incentives in our contracts through CQUIN, local incentive schemes, risk sharing and delivering more services for our commissioners.

The key indicators of our financial performance to be delivered by our 5 year plans are set out below;

<b>Base case</b>	<b>2014/15</b>	<b>2015/16</b>	<b>2016/17</b>	<b>2017/18</b>	<b>2018/19</b>
I&E surplus/ (deficit) <b>£m</b>	-6.2	-5.3	-1.1 **	1.9	3.0
Year-end cash <b>£m</b>	17.8	13.6	19.2	22.3	26.6
<b>CSRR</b>					
Capital service cover	1	1	4	4	4
Liquidity	4	4	4	4	4
Overall	<b>3</b>	<b>3</b>	<b>4</b>	<b>4</b>	<b>4</b>

\*\* Note – this figure is normalised and excludes profit on disposals expected in this year

The improvement in financial position from 2016/17 reflects the anticipated impact of transformational change and increased levels of efficiency delivered by our key infrastructure programmes.

In order to achieve the above levels of financial performance the Trust is planning for;

- **Contract income:** - Income deflation offset within Cumbria CCG contract to achieve net “flat cash” outcome through local incentive schemes.
- **Better Care Fund :** - Cumbria CCG planning assumptions anticipate the transfer of £5.6m of Trust income to the BCF from 2015/16. It is assumed that the Trust will continue to receive this income.
- **£3.0m increased staffing cost** to address issues in physical health inpatient services, the Ramsey Unit, unscheduled care, medical staff and to implement the NCCCC (North Cumbria Clinical Coordination Centre).

- Achievement of **cash releasing and recurrent CIPs** of 2% each year.
- **Additional savings from service transformation** of £9.1m recurrently, progressively taking effect from 2015/16. A £1.0m recurrent budget to support transformation has been included in the plan.
- **Cost of IM&T strategy** as per approved business case, the capital elements of which are largely offset by the successful bid against the NHS Technology Fund.
- **Capital expenditure** as follows;

PROGRAMME AREA	2014/15 £m	2015/16 £m	2016/17 £m	2017/18 £m	2018/19 £m
IM&T strategy	6.0	1.1	1.0	1.9	
IM&T lifecycle	0.8	0.8	0.8	0.8	
Estates & equipment	2.9	2.5	3.0	3.0	
<b>Total</b>	<b>9.7</b>	<b>4.4</b>	<b>4.8</b>	<b>5.7</b>	<b>4.8</b>

- **Fixed asset disposals** – Sale of surplus estate with proceeds £11.9m over the 5 years.

The planned cash position is as follows:

<i>£ million</i>	2014/15	2015/16	2016/17	2017/18	2018/19
Opening cash balance	21.5	17.8	13.6	19.2	22.3
Cash from operations	0.5	1.9	6.6	10.1	11.2
Capital expenditure	-9.7	-4.4	-4.8	-5.7	-4.8
Capital disposal receipts	4.7	0.4	6.0	0.8	
Capital grant (IM&T funding)	3.0				
Debt service (PDC dividend and PFI costs)	-2.2	-2.1	-2.2	-2.1	-2.1
<b>Closing cash balance</b>	<b>17.8</b>	<b>13.6</b>	<b>19.2</b>	<b>22.3</b>	<b>26.6</b>

The first tranche (£2.2m) of the IM&T capital grant was received during 2013/14, and it is therefore included within the opening balance.

Key risks in our financial plan have been identified as:

- Ability to realise asset disposals at estimated values and in anticipated timescales.
- Contract income – national tariff adjustments, outcome of contract negotiations and ability to obtain income to offset tariff deflator.
- Impact of further consideration of staffing levels.
- Ability to identify and deliver CIP targets and transformational savings.

## Validation of the Trust's Overall Financial Plan

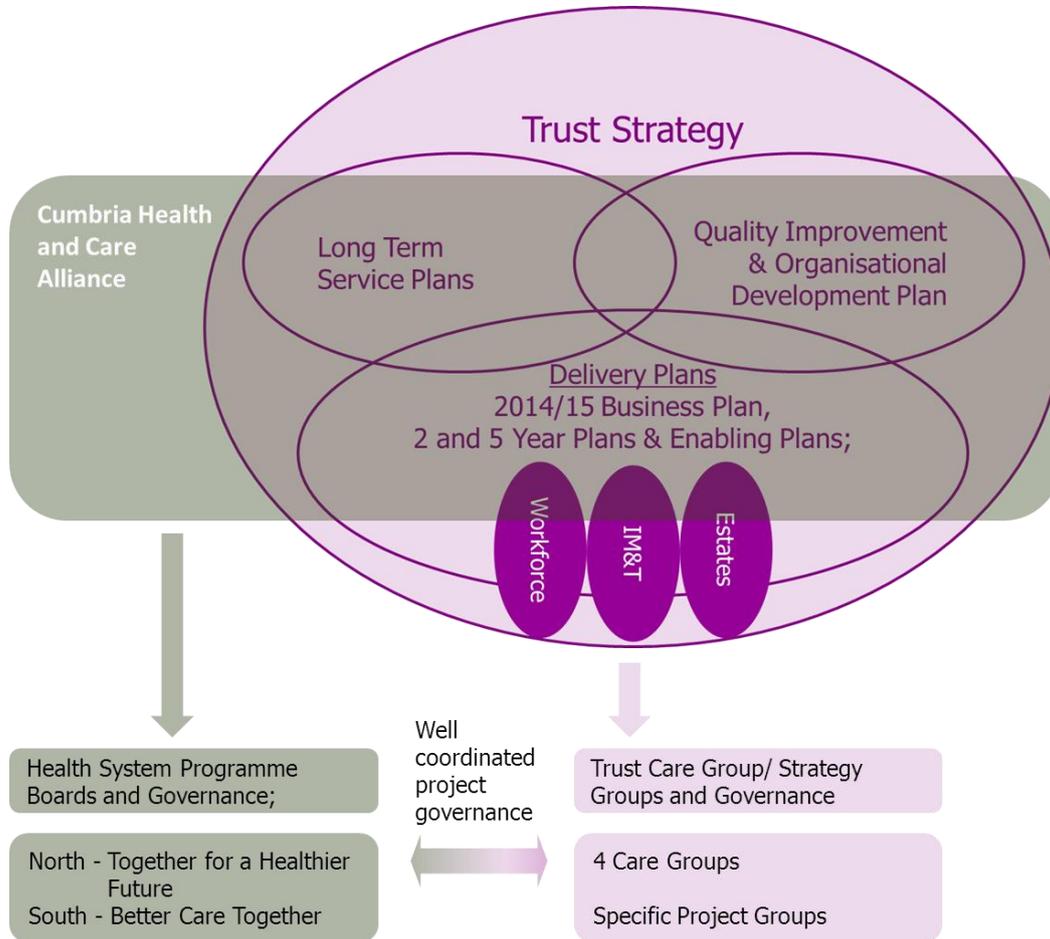
In order to ensure the Trust's financial plan is targeted as successfully as possible the Trust has commissioned an external validation review of our current financial position. The key outcomes from this review are summarised as;

<b>Validation Outcomes</b>	<b>5 Year Plan Response</b>
The Trust's forecast opening deficit positions for year 1 and 2 are based on valid assumptions.	The plan has utilised these assumptions.
Actions to achieve these positions are in place, but there is room for further strengthening of the Trust's cost control to mitigate downside risks that do exist.	The Trust implementing strengthened arrangements for cost control within our four new care groups.
Factors outside the Trust's control do influence some of the drivers of the Trust's finances (such as the configuration of services commissioned), and so these should be considered within our forward service plans to be addressed.	Our forward plans include the addressing of these issues with the full support of our commissioners.
Future income for increased "out of hospital" services is a valid area for the Trust to target and should be considered within our forward service plans.	Our forward plans include the assumptions of income for increases in these services with the full support of our commissioners.
Opportunities to achieve productivity and efficiency gains exist and should be pursued.	Our forward plans include key assumption on productivity and efficiency to be achieved from both more agile working arrangements and the benefits of electronic paper records.

# Plan Delivery

## Delivery Governance

The Trust will deliver its 5 year plans through well organised governance as set out below;

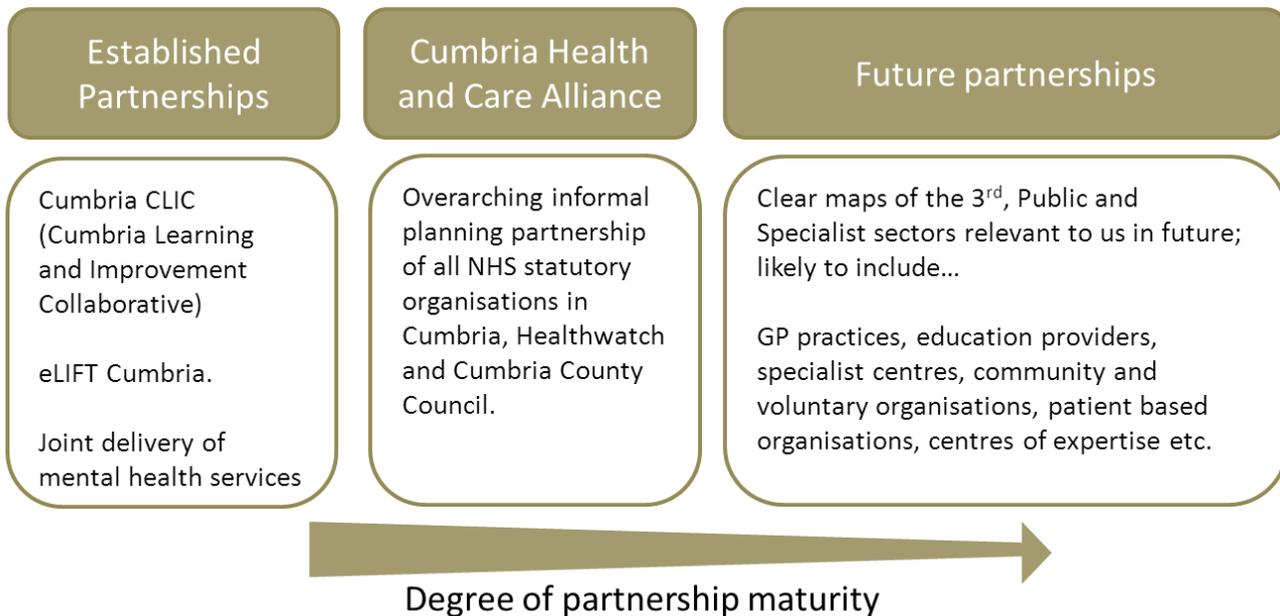


Key to delivery above is the correct balance between system wide project delivery and Trust based internal delivery. The Trust has already initiated a number of internal project groups and is working within the two health and care system level programmes to deliver plans agreed with our partners.

The Alliance has set out plans to establish more full joint planning arrangements and PMO functions. These are not yet in place and will be implemented during 2014/15.

## Partnership Plans

Key to our strategy and five year plans are the partners we will need to have and the partnerships we will need to be active in. A summary of these is given below;



Priorities for partnership development follow the above diagram and include;

- Strengthening of our current established partnerships to support more clear shared risks/rewards.
- Further development of the Cumbria Health and Care Alliance as a forum for strategic alignment and for overarching system delivery.
- A more active mapping of potential future partners across the 3<sup>rd</sup>, Public and Specialist sectors leading to innovative new partnership relevant to us.

Key underpinning partnerships essential to our 5 year plan have already been established and include;

- CLIC (Cumbria Learning and Improvement Collaborative). A partnership between the Trust and Cumbria CCG to support clinical learning and improvement activities countywide.
- eLIFT Cumbria – the local LiFT scheme to provide crucial infrastructure development both for the Trust and primary care across our communities in Cumbria.
- Joint delivery of mental health services – a Section 75 agreement in place to govern the integrated delivery of mental health services between the Trust (as lead provider) and Cumbria County Council as the tier 1 local authority for Cumbria.

## Workforce Plans

The Trust will prepare in year 1 of this 5 year plan a comprehensive and innovative workforce plan for the future. Key issues that our workforce plan will address are;

- The provision of data and information on a range of subjects, including staff numbers, training requirements and demographic, technological and policy developments.
- Analysis of future supply and demand, looking at how many and what type of staff are likely to be required in the future, and how many and what type of staff are likely to be available. Planning must be based on a clear, clinical vision built around patient pathways.
- The creation of plans that set out how future supply and demand will be matched, covering, for example, the number and type of staff to be recruited, the amount and nature of training to be commissioned, and the amount and type of workforce development activity that will take place. This to include the key partners we will need (e.g. universities, academic health science networks etc.)
- Decisions about the level of funding that will be available to support workforce planning and development activities and how it will be distributed.
- The commissioning of education and training, including undergraduate, postgraduate and vocational training across a range of professional and occupational groups.
- A wide range of workforce development activities, including the introduction of new and extended clinical roles, redistribution of staff responsibilities, increasing productivity and efficiency by enabling staff to reach their full potential.
- Expected developments in how we contract with our workforce in future.

## Estate & IT Plans

Key to the Trust's long term success is the essential infrastructure supporting both our services and our organisation. Both our quality plans and service plans are reliant on the estate and IM&T plans being effective. Both these plans underpin the Trust's ability to be financially sustainable. Key imperatives from these plans are;

### ***The 5 year plan imperatives enabled by our Estate and IM&T developments.***

Renewed estate to support our key service plans	<p>Development of the estate to support both;</p> <p>Effective "Out of Hospital Care" in community based facilities. Key initial development priorities being; Barrow, Penrith and Millom as strategically key sites to be developed.</p> <p>More focussed and high quality countywide mental health service inpatient care. Ensuring all inpatient care is in purpose built units that meet key standards in the privacy and dignity of care.</p> <p><i>These estate developments are key foundations for our service development priorities.</i></p>
Agile Working	<p>Reductions in travel and establishment costs from reduced numbers and scale of work-bases, increased homeworking and increased digital communications.</p> <p><i>These estate and IM&amp;T developments are key foundations for our financial sustainability priorities.</i></p>
Estate consolidation	<p>Disposal of surplus estate to ensure the Trust's resources are more effectively available to be directed at our key priorities.</p> <p><i>These estate disposals are key foundations for our financial sustainability priorities.</i></p>
Productivity benefits from EPR investments.	<p>Reduced waste through more productivity across all services. Eliminating duplication in record keeping, increasing effectiveness of clinical decision making, increased safety for patients. By removing non-value adding activities the intention is for better utilisation of clinical skills/time and reduced costs of both patient care and non-patient care activities.</p> <p><i>These IM&amp;T developments are key foundations for our financial sustainability priorities.</i></p>

To achieve the above we will implement in full the Trust's approved IM&T strategy "Enabling Excellence" which has the following key aim; **To ensure our healthcare services are supported by excellent, high quality clinical and business information which is timely, accurate and tailored to requirements.**

IM&T strategic objectives;

1. Develop and implement an integrated electronic patient record for our patients across our Trust and beyond.
2. Provide patient access to their own health information.

3. Deliver reliable business intelligence through new technologies
4. Implement new technologies to support service delivery regardless of location
5. Implement a resilient IM&T infrastructure.

The key benefits we will achieve through delivering these objectives are aligned to the Trust's strategic vision, aims and objectives;

- Safer and more effective care
- More responsive and efficient services
- Equitable and patient centric care
- An information culture supported by a resilient and modern IT infrastructure

During 2014 we will finalise the Trust's long term estate's strategy "Building Excellence". Preparatory work on this strategy has highlighted the following key aim; **To ensure our healthcare services are supported by high quality facilities, that the overall estate is continually developed to meet our needs and that we are effective custodians of public assets that instil pride in our communities.**

Estates and Facilities Strategic Objectives;

1. Enabling clinical care – facilities designed to maximise the effectiveness of clinical care for patients and clinicians.
2. Public space/patient experience – facilities that ensure the patient's experience and the community impact of our estate is high quality.
3. Smart office – designing modern working practices into the estate so that the workforce is supported to work smarter.
4. Greener and leaner – making better use of scarce resources such as energy, maintenance, materials and waste.
5. Corporate landlord – taking a more active role in managing the many sites we use so that standards of site management are raised and achieved.
6. Estate services in the field – delivering an exemplar in-house estates and facilities service to support all sites achieve the above.

The key benefits we will achieve through delivering these objectives are aligned to the Trust's strategic vision, aims and objectives;

- Providing an excellent patient experience
- A more environmentally friendly and fully utilised estate
- Enabling agile (no office) and integrated service delivery
- Enabling flexible and efficient workforce practice
- Building affinity, pride and presence in the health and care of communities.

## Participation Strategy

The Trust is committed to full participation with patients, members, staff and the general public. Key to us achieving this commitment is ensuring that participation builds up to actual “citizen power”. This means citizen control, delegation and partnership being built into all our activities. To support our plans we will develop a full participation strategy in year 1 of our 5 year plan that builds upon the strong and effective Governor’s participation the Trust that is already in place.

Initially we will focus on the following four areas;

### **Patient, Carer and Family participation in services**

The Trust will ensure that all services have in place mechanisms to involve and engage the people using them. This will include, but is not limited to;

- Patient, carer and family feedback.
- Patient, carer and family involvement in care planning.
- Patient, carer and family involvement in learning and improvement activities.

### **Co-production**

The Trust will ensure arrangements are in place to co-produce our forward plans (both service developments and enabling plans). This will mean;

- Providing opportunities for patients, carers and families to participate in working groups.
- Canvassing views and responding to these openly and transparently.
- Working in partnership with representative, advocacy and other third sector providers to ensure broad inclusion and representation in the Trust’s service planning processes.

### **Community Engagement & Consultation**

Working with Alliance partners we will undertake the following to engage local communities in a joined up and “one system” approach that;

- Raises awareness of the issues prompting our service development plans.
- Seeks people’s views on both the direction and specific plans for our services in future.
- Provides opportunities for local people to discuss and debate with us our plans, how they can be improved and how they fit in with an overall health and care approach in Cumbria.
- Formally consults people where this is required and properly accounts for this process within Overview and Scrutiny arrangements.

To achieve the above 4 areas we will utilise the Alliance based programmes already established;

North Cumbria; **together for a healthier future.**

South Cumbria & North Lancs;



These programmes have been running for a number of months as the vehicles to unify the NHS’s conversations with the public and to enable coherent public engagement on the major planning issues.

Key achievements to date have included;

**Public Engagement;** over 1,000 members of the public attended open roadshows delivered in partnership with Healthwatch Cumbria

**Patient Engagement;** around 200 experts by experience took part in specific focus groups facilitated by TNS, and external research organization

### **Membership**

We will continue to promote and offer membership in our Trust. We will build modestly on our high membership numbers each year and focus our effort on engaging members (as set out above) rather than increasing membership numbers per se. We will increase opportunities for our Governors to engage with our members.

## Key Milestones

In preparing our 5 year plan we have established the following key milestones;

### 2013/14

- ⇒ Establishing our framework for improvement and transformation.
- ⇒ Establishing our first major partnership – the Cumbria Health and Care Alliance.
- ⇒ Securing and commencing our major IM&T investment plan.

### Progress Tracker

Complete  
Commenced  
Commenced

### 2014/15

- ⇒ Mobilising our Trust to make positive changes for patients and staff through Listening into Action. Commenced
- ⇒ Approving our Trust's 5 year plan and forward strategy. On Track
- ⇒ Establishing new Quality Governance arrangements for all services. Commenced
- ⇒ Achieving our enforcement undertakings to re-establish our green governance risk rating. On Track
- ⇒ Sharing our collective journey through large scale conversations with the public. Commenced
- ⇒ Implement a clear business plan for the year. Commenced
- ⇒ Implementing the first Primary Care Communities for Cumbria. Commenced

### 2015/16

- ⇒ Forming new partnerships as required for our forward plans; specifically – general practices, local authority and specialist providers.
- ⇒ Developing our specialist and community health services to respond to the system plan for more "out of hospital" based care.
- ⇒ Implement in all services Electronic Patient Records (EPR) as a basis for improved clinical care, clinical governance and innovative ways of working.
- ⇒ Establishing enduring involvement from young people, service users, patients and carers in the development and routine provision of all our services.
- ⇒ Implementing our agile working to support contemporary practice.

### 2016/17

- ⇒ Realising major benefits of service transformation with our partners.
- ⇒ Maturing our new co-provision arrangements and collectively shaping the health and care market to provide services for the population.
- ⇒ Realising major benefits of EPR as an enabler for effective and productive care services.
- ⇒ Further developing our specialist and community health services to respond to the system plan for more "out of hospital" based care.

### 2017/18

- ⇒ Reaching the higher quartile league of organisations based on patient feedback, clinical outcomes and our record of safety.
- ⇒ Further developing our services to respond to the system plan for more "out of hospital" based care.
- ⇒ Taking a lead role within joint commissioning and joint provision arrangements to shape the mental health "system" for the future.

### 2018/19

- ⇒ Setting our forward ambitions to reach even higher.

To achieve our 5 medium term priorities we have identified key immediate objectives as follows;

Theme	Objective	Detail
Improve Quality Governance	Successfully transition from current arrangements to 4 Care Groups as set out in our Quality Governance Improvement Plans	Design, transition and develop our frontline and support services to be fully orientated to 4 care groups. Embed these care groups to be effective governance/leadership structures for patient services as a foundation for service development and transformation.  <b>Chief Operating Officer</b>
Quality Improvement and Organisational Development  (note – these 8 priorities reflect the year 1 priorities in the Trust’s quality and OD plan.)	Reinvigorate our approach to patient experience  Embed vision and values  Aligning basic management processes to the vision  Staff engagement and empowerment for improvement  Learning for the job, learning to improve the job  Measurement for quality  Supporting Improvement at the frontline  Leadership for quality	<b>Director of Quality &amp; Nursing</b>  <b>Director of Strategy &amp; Support Services</b>  <b>Director of Workforce and OD</b>  <b>Director of Quality and Nursing</b>  <b>Director of Service Improvement</b>  <b>Director of Quality and Nursing</b>  <b>Director of Service Improvement</b>  <b>Chief Operating Officer</b>
Effective Clinical Roles	Creating a clear clinical workforce strategy and plan including professional development, job planning and leadership	Creating attractive and sustainable clinical roles. Growing and recruiting the people to undertake these roles. Retaining people with scarce skills in the Trust and ensuring a sustainable future supply for the clinical professionals our services need.  <b>Medical Director</b>
Electronic Patient Records	Equipping clinical services with electronic patient records	Delivering EPR safely for clinical services in line with the overall approved timetable.  <b>Director of Strategy and Support Services</b>
Deliver Better Core HR Services	Effectively managing our human resources	Establishing and sustaining core HR processes (recruitment, ESR, TNA/MT, attendance, temporary staff, job planning etc.)  <b>Director of Workforce and OD</b>
Primary Care Communities	With the CCG and local authority create local integrated teams working with GP practices (Primary Care Communities)	Joint delivery between the Trust and GP’s of Primary Care Community teams as integrated services including defining them, transitioning to them and governing them successfully.  <b>Director of Service Improvement</b>

Financial Improvement	Achieve our agreed financial plan.	Delivering our safe cost improvement plans, achieving our CQUIN scheme and successfully “earning back” the income deflator for 2014/15. Also, recovering overspends where appropriate.  <b>Chief Operating Officer</b>
Adult Mental Health Services	<ol style="list-style-type: none"> <li>1. Stabilise our services to be more safe, effective now.</li> <li>2. Utilise the outcomes of the external review to redesign and transform the services for the future.</li> </ol>	Intensively support our adult mental health services, focussing immediately on the broad community mental health services, to become safer, more effective and better experienced by service users and carers.  <b>Chief Operating Officer</b>
Children’s and Family Services	<ol style="list-style-type: none"> <li>1. Stabilise our services to be more safe, effective now.</li> <li>2. Utilise the outcomes of the external review to redesign and transform the services for the future.</li> </ol>	Intensively support our children’s and family services to become safer, more effective and better experienced by service users and carers.  <b>Chief Operating Officer</b>
“Out of Hospital” Strategy	Creating a clear blueprint for the future of our community hospitals in the context of local acute services, social care, primary care communities ambulatory services and transport services delivered for our communities.	With partners, developing and agreeing a clear plan for the countywide provision of community inpatient care and community hospitals sites.  <b>Director of Service Improvement</b>
Cumbria Health and Care Alliance	Delivering at pace on the issues that are critical for our success. Specifically the plans developed through; <b>Better Care Together</b> , and, <b>Together for a Healthier Future</b> that are relevant to year 1 of our 5 year plan.	Taking a more clear strategic approach to our participation in the Alliance. Being clear on our contribution to and expectations of the Alliance. Ensuring our whole Board is engaged in this in a focussed way and influencing the agenda of the Alliance positively for the public using our Trust’s services.  <b>Director of Strategy and Support Services</b>
High Performing Board	Developing our Board to achieve our strategy.	Undertaking specific development as a Board of Directors to utilise productive relationships as a team, constructively challenge and effectively take strategic decisions. Achieving a coherent approach to both assurance and creative strategy setting activities.  <b>Chief Executive</b>

## Risks and Mitigations

As a Board of Directors, during the preparation of our Trust Strategy and 5 year plans we have considered our key strategic risks and commenced the process of renewing our Board Assurance Framework accordingly. A summary of the strategic risks is given in the table below and where in our forward plans we have focusing our risk mitigating activities.

<b>Strategic Risks</b>	<b>5 Year Plan Key Mitigation</b>
Patients or service users do not receive high quality care because either safety, outcomes or experience are compromised.	Quality Improvement and Organisational Development Strategy & Plan
Unable to realise the cultural change needed to improve the quality of care for all patients and service users.	Quality Improvement and Organisational Development Strategy & Plan
High quality and sustainable care is compromised by inability to implement improvement strategies for hard and soft infrastructure (facilities, estate, applications, IT).	Estates and IM&T Strategies and Plans
Failure to plan and deliver radical transformation to care/service pathways both internally and with our Cumbria partners.	Long Term Service Strategies & Plans
Unable to use our partnerships to deliver sustainable Cumbria Health and Social care system.	Partnership Plans
Unable to deliver leadership, workforce capability and capacity improvements to deliver modernised and transformed services.	Development of our Workforce Plan.
We don't use our differentiating strengths (USPs) to maximum advantage, or to reach our full potential.	Long Term Service Strategies & Plans  Quality Improvement and Organisational Development Strategy & Plan
Inability to balance financial sustainability with maintaining high quality, safe services.	Financial Plan