



Summary of Strategic Plan

2014/15 to 2018/19



Introduction

Mid Cheshire Hospitals NHS Foundation Trust (MCHFT) became registered as a Foundation Trust on 1 April 2008 and provides services to approximately 300,000 living in and around Alsager, Crewe, Congleton, Holmes Chapel, Knutsford, Middlewich, Nantwich, Northwich, Sandbach and Winsford. The Trust is a major employer for the area with over 3,500 staff and has an annual turnover of £190M.

The services provided by the Trust are delivered across three sites:

Leighton Hospital

The main acute hospital site in Crewe providing Maternity & Paediatric services, a range of elective services (Inpatient, Day Case and Outpatient) and emergency services along with supporting diagnostics and therapy facilities.



Victoria Infirmary Northwich

A facility based in Northwich offering Outpatient clinics, Minor Injuries Unit and diagnostic facilities.



Elmhurst

A 30-bedded Intermediate Care Centre situated in Winsford.

The Trust also provides a comprehensive range of general hospital-level emergency and planned services and is the provider of a Bowel Screening service for the whole of Cheshire which is in the 'first wave' of centres nationally to commence Bowel Scope Screening for the local 55-year old population. We are also registered with the Care Quality Commission and its registration is unconditional.

MCHFT has many excellent services and provides a number of these to other neighbouring acute hospitals such as Diabetology, Ophthalmology and Pathology services. Leighton Hospital is also the only District General Hospital in the North West to provide the full suite of non-invasive cardiac diagnostic tests which means our patients do not need to travel to specialist centres to undergo these tests.

Key Drivers for Developing our Direction of Travel

Demand for our services

The demand for our services continues to grow and the most recent Population Census showed that the population in Cheshire East had grown by 5.1% over the last ten years, which is one of the highest growth rates in the North West of England. Looking forward, the local population is also set to see a significant increase with plans to develop the Crewe area and significant housing developments planned in the next five years, approximately 14,000 new homes.



It is not only population increases that are driving the increased demand for health care; it is the health needs of the population, which are becoming more complex and long term. There are wide variations in life expectancy among local population groups, with some being well below the national average and a proportion of the population live in some of the most deprived areas in England and experience poor health, poor educational attainment, deprived income, employment and living environment. Certain localities have a high incidence and high mortality rate for a range of diseases (e.g. Lung Cancer and Stroke Rates in Crewe Town) and there are high numbers of excess deaths for adults with serious mental illness. Our population also has a high number of fuel poverty and winter deaths. In addition, demand for hospital services is impacted on as a result of the lifestyles that we lead, such as above national average alcohol-related Emergency Admissions and increasing levels of obesity in all age groups.

Alignment with Local Health Economy Partners to Change the Way we Care for Patients – Out of Hospital

Health economy leaders have developed a view of how services will look in the future which aligns to the national direction of travel - care out of hospital. Our strategic plan is aligned to the activity assumptions outlined in the Clinical Commissioning Groups' (CCGs) two- and five-year plans and the Health and Wellbeing Board plans, all of which have assumed a 15% reduction in emergency admissions over the next five years.

The health economy focus is on providing better care closer to home through new and enhanced models of care. To support this, the Trust is working alongside all providers in the health economy to redesign existing service provision and develop new services to integrate care for people across Cheshire. These new ways of working will reduce emergency admissions and expedite discharge from hospital. The key delivery vehicle for achieving integrated care and for admission avoidance and expediting discharge will be through integrated teams.

Through an Alliance Contract, a newly-formed Provider Board has access to an 'Innovation Pot' of £1.4M which will provide the financial resource to 'kick start' the integrated teams. A further £1.8M will be released by the hospital as activity reduces and costs are able to be removed. This will continue to be invested in Community- and Primary Care-based activities aimed at reducing in-hospital activity further.

The Better Care Fund

In addition to the financial allocations to our CCGs, the Government announced in its spending review of June 2013 the establishment of an Integrated Transformation Fund of £3.8bn, which was described as "a single pooled budget for health and social care services to work more closely together in local areas, based on a plan agreed between the NHS and local authorities". This fund has subsequently been renamed the Better Care Fund (BCF) and will be established in full in 2015/16, with an expectation that health and social care providers will be closely involved in deciding what this money will be used for.



Maintaining Delivery of Performance Targets and Standards

The Trust consistently performs well in delivering national performance targets and standards, for example, meeting all cancer targets and the four-hourly emergency wait standard, except for Quarter 4 (January to March 2014) over the winter period where excess demand occurred. Overall, the Trust is meeting the 18-week referral to treatment time and is now working hard to deliver this in every clinical speciality. Although nationally the Trust performs very well in relation to healthcare acquired infections, both the MRSA and *C-Difficile* targets were not achieved. For 2014/15, the *C-Difficile* target has been significantly increased as this was considered too low.

NHS Funding and Finance Sustainability

Nationally, it is expected that the next three to five years will see further significant efficiencies needed in the NHS in order to deal with growing demand and rising costs. For our Trust, we anticipate having to find savings in the region of 4% a year over the next five years, which will be a challenge for the Trust. Also, during 2013/14 there was a national review of the amount of money that CCGs get to commission (buy) services. This meant that our CCGs received slightly more money; however, this did not address the historic funding gap, in particular for South Cheshire CCG.

The Trust begins this five-year journey from a position of relative strength; however, this will only be maintained if health economy leaders commit to collectively delivering health economy plans in order to create a more sustainable and affordable health and social care system.

Highlights from our Strategic Direction of Travel

This summary plan sets out a strategic direction of travel for the next five years for the Trust which will ensure both clinical and financial sustainability whilst improving quality and developing services.

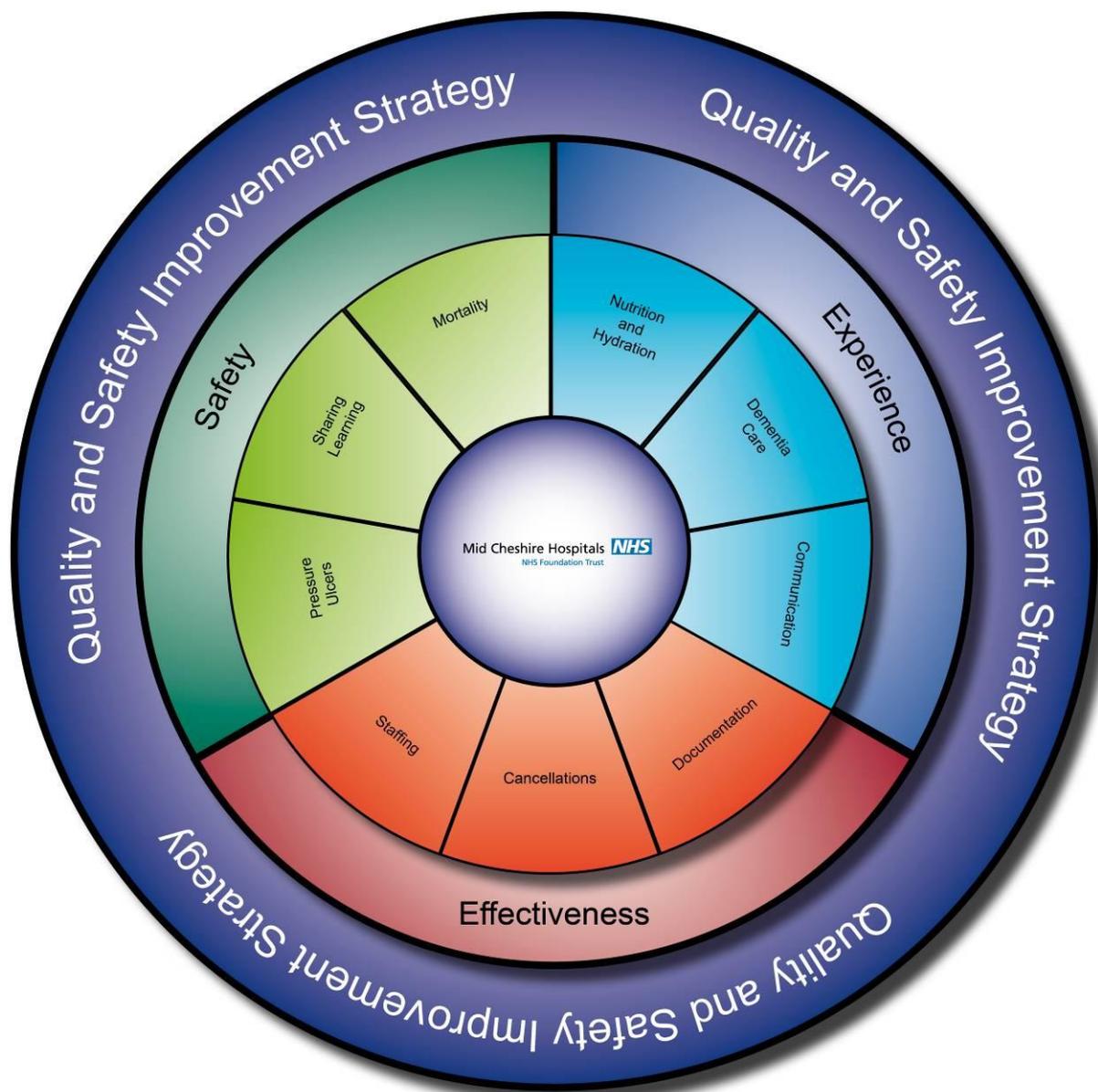
Not dissimilar to other regions, Cheshire is driving system-wide changes to ensure a sustainable and affordable health care system. There are a number of factors that are particularly relevant to MCHFT and at its highest level our strategic response to these can be summarised into seven key areas:

1. Maintaining and Improving the Quality and Safety of our Services
2. Connecting Care and Vertical Integration
3. Partnership working
4. Internal Transformation plans
5. Commercial opportunities
6. Seven-day services delivered flexibly
7. Workforce developments
8. Strategic Capital Developments
9. Increasing the work that we do



1. Maintaining and Improving the Quality and Safety of our Services

Most importantly, this plan is underpinned by the Trust's unwavering commitment to high quality care; where the new Quality and Safety Improvement Strategy is a key driver for targeted service improvements. The Trust recognises this as an ongoing journey and, following consultation with staff, patients and the public, the new Quality and Safety Improvement Strategy was launched on April 1, 2014, and focusses on making improvements in a range of areas as illustrated below:



Building on the improvements delivered through the previous five-year quality strategy, areas of particular priority will be:

- Reducing Mortality - Aiming to reduce our mortality rates each quarter so that they reach and then exceed expected levels;
- Sharing Learning - All clinical staff will work together to respond to feedback from patients and carers and to learn from incidents that occur. We will then ensure that we respond to such learning and embed this into practice;
- Dementia Care - We will support patients who have concerns about their memory and we will work with patients who have dementia and their carers to promote a positive experience whilst in hospital;
- Reducing cancellations - We will reduce the number of hospital-initiated Outpatient clinic cancellations by 20% by 2016.

2. Connecting Care and Vertical Integration

All key stakeholders from the Cheshire-wide health economy working together to develop integrated models of care that will keep people out of hospital where appropriate.

3. Partnership Working

- New partnerships enabling greater choice of services for our local population;
- Developing new models of acute care, which may require changes to current services delivery;
- Review of all existing partnerships to ensure they remain aligned to the Trust's future plans, that they deliver the right patient outcomes and experience and that they are value for money.

4. Internal Transformation

There are three significant internal transformation projects currently underway:

- Outpatient Services – a redesign of services to ensure the most efficient systems and processes and creating additional capacity through out of hospital developments;
- Operating Theatres – the new 'state of the art' theatres are enabling new ways of working through maximising the opportunities created by having modern theatre designs such as 'Barn' and 'Integrated' theatres and the new technologies now available;
- Emergency Admissions – improving patient flow through the hospital so patients are in the right place at the right time and discharged when ready.



5. Commercial Opportunities and new Market Entrants:

The development of new market entrants such as GP Federations provides opportunities for acute hospital providers to work with them for the benefit of patients. This means that more care can be delivered in GP practices and ultimately closer to the patient's home. We already have a number of such working arrangements, for example, Dermatology, Cardiology and ENT.

In respect of private hospital provision, due to reduced demand in the private market, many private providers now offer an alternative for elective NHS activity under the Any Qualified Provider criteria. MCHFT is lucky to have one such private provider on site, BMI South Cheshire, which means the Trust is able to provide a number of key services

and diagnostic support to receive income which can be used for the benefit of NHS patients.

6. Seven-Day Services

Patients should be able to receive the same level of care regardless of the time of day or the day of the week. However, this will only be effective if seven-day services are provided across the local health economy and include primary care and social services. Developments of seven-day services are a key focus for delivery within health economy plans which align to the Trust's ambition to deliver integrated seven-day services.

7 Workforce Development

Recruiting the required multidisciplinary workforce will be key to ensuring seven-day services and the Trust has already responded to some of its recruitment needs by:

- Re-designing services through collaborative, partnership working with Primary Care or local acute providers;
- Making joint appointments with neighbouring acute providers;
- Undertaking international recruitment campaigns;
- Re-designing existing roles;
- Developing new roles.

Although significant progress has been made, recruitment for the delivery of seven-day services will remain a key focus for the Trust and work will continue in a phased approach over the next three years to ensure all of our clinical services achieve an integrated seven-day service.

To meet the complex needs of our patients and the changing workforce requirements, the Trust is actively working to develop new roles and expand the skills of its current workforce which includes all professional groups. Also, to ensure we meet the needs of our patients, every ward conducts a six monthly review of staffing levels and patient dependency using the 'Safe Nursing Care Acuity Tool (AUKUH)'. The data over the last three years has demonstrated a continual increase in the level of patient dependency and an incremental increase in staffing levels over this time. The planned investment in nursing for 2014/15 will ensure all of our base wards have the recommended ratio of one Qualified Nurse to every eight patients.

8. Strategic Capital Developments

The Trust has made significant progress in building an infrastructure fit for the future. The main infrastructure developments ensure Operating Theatres, Critical Care, Maternity and core wards have sufficient capacity to meet demand as well as improving the environment for our patients and staff. Despite significant capital investment in

infrastructure to date, the Trust will continue to invest over the next five years and projects will include:

- A further MRI scanner which is the subject of the Trust's new Charitable Appeal;
- Introducing electronic systems as enablers to an Electronic Patient Record system, such as, e-prescribing, Electronic Document Management Systems and e-handover;
- Remodelling of the Treatment Centre at Leighton Hospital to create a Surgical Admissions Lounge, which will reduce delays in getting patients to theatre;
- Refurbishment of two wards per year.



9. Increasing the work that we do

Although the majority of patients choose to come to our hospital to receive care, a small proportion on the periphery of our geography goes to neighbouring hospitals. It is our intention to bring this work back in house now that we have the increased resource and capacity.

The future range of services delivered by MCHFT will change, although not radically. However, what will change significantly is where and how services are delivered and these will be better integrated with community teams, thus reducing the amount of in-hospital activity.



The Underpinning Foundations of our Strategy

The Trust is committed to delivering excellence in healthcare and all of the Trust's strategies and values and behaviours are mutually supportive in delivering our overarching vision and mission:

Vision

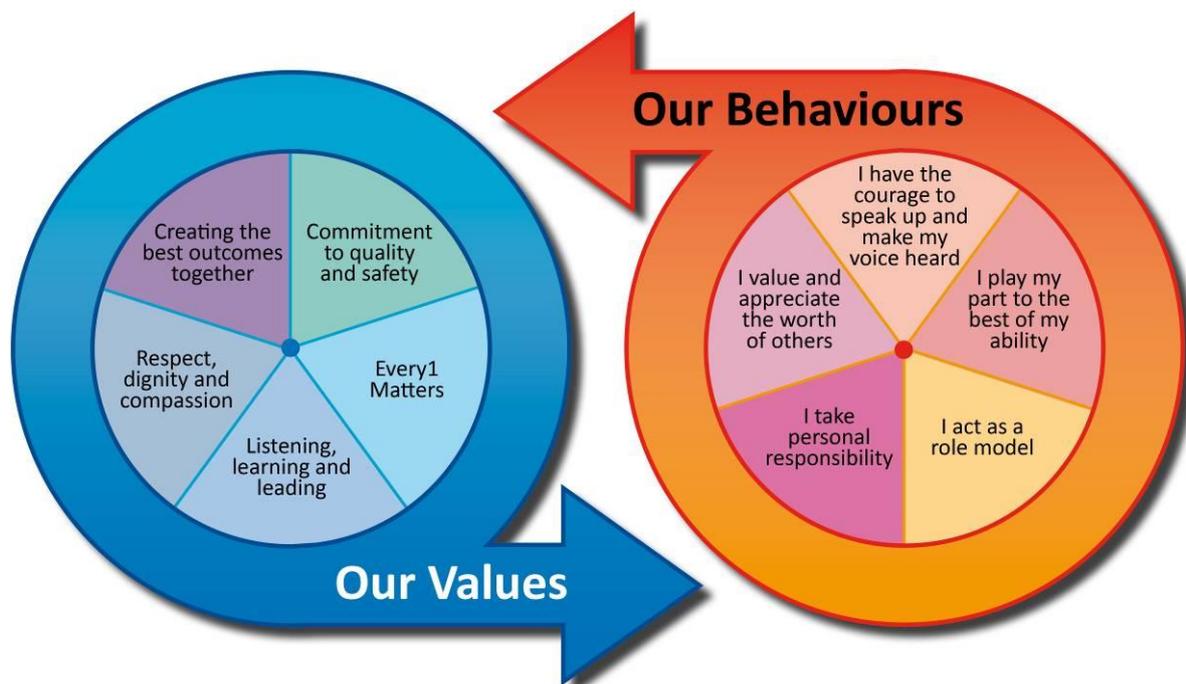
To Deliver Excellence in Healthcare through Innovation and Collaboration.

Mission

To be a provider that:

- Delivers high quality, safe, cost-effective and sustainable healthcare services;
- Provides a working environment that is underpinned by values and behaviours;
- Is committed to patient-centred care;
- Treats staff and patients with dignity and care.

The values and behaviours, developed with staff, underpin the delivery and success of our strategies. The Trust recruits and nurtures its staff so that these values and behaviours are observed at all times from all staff.



There are undoubtedly challenges ahead which the NHS and our Trust must overcome. We will do this through collaboration and partnership with others and these are the commitments which will drive our plans, shape our decisions and influence how we manage the organisation. However, these will not be successful if we do not have a clear and simple direction of travel and the right workforce and behaviours.



What does this mean for the services we aim to provide?

This is not yet clear for every service as we have not completed our review of all clinical service lines and current partnerships and we have not yet concluded our discussions with Commissioners in respect of Mandated Services (those services that could not easily be provided by others). However, what is reflected in our current Trust Strategy is outlined below:

Future Clinical Services	Why?
<p>Maintain and strengthen core services such as Accident & Emergency and Medical & Surgical Emergencies</p>	<p>Patients suffering from major trauma or very acute conditions (e.g. heart attack or stroke) will have a better outcome if they receive initial treatment within 20 minutes or less. Work undertaken as part of the major trauma network indicates the importance of the A&E service in Mid Cheshire, as without this service, the travel time and distance would well exceed 20 minutes. Also, there is no neighbouring hospital with the spare capacity to manage our demand as well as meet demographic growth</p>

Future Clinical Services	Why?
Maternity and Children's Services	<p>An excellent service, having been awarded the highest safety recognition award CNST Level 3, Baby Friendly Initiative Level 2 and the best national patient survey results in 2014. However, to be sustainable the number of births needs to increase and the University Hospital of North Staffordshire has committed to assisting us increase our births by 100 a year. We are also working hard to ensure local women choose their local hospital to give birth and to increase our catchment population.</p> <p>By August 2014, the whole of the Maternity Unit, including Neonatal Intensive Care, will have undergone extensive refurbishment. The Trust's charity successfully raised £2M for the Neonatal Intensive Care Unit appeal ahead of time.</p>
To maintain and further develop a range of diagnostic services	<p>All Pathology departments are CPA / UKASS accredited. A new 2nd CT scanner was installed in 2013 and a 2nd MRI scanner is being planned. Breast and Bowel Screening Services provide excellent results to the Cheshire-wide population. To support the planned and emergency patient pathways, we will continue to provide a whole suite of diagnostic tests for our local population. We are the only District General Hospital (DGH) in the North West to provide the full suite of non-invasive cardiac diagnostics.</p>
To maximise use of our purpose-built day treatment centre	<p>Currently undergoing refurbishment to expand Endoscopy and planned Day Case operations, and to improve patient flow through the unit to maximise productivity. The new facilities will be available in January 2015.</p>
To continue to deliver a full range of planned surgical, non-surgical and Out Patient services	<p>The new Operating Theatres provide additional capacity to allow for future growth and repatriation of market share. A recently-expanded Planned Intervention Unit allows for procedures to be undertaken (e.g. blood transfusions) without admission to hospital. Continued refurbishment of two wards a year will ensure bed base capacity is maintained.</p>

How will we deliver all of this?

To achieve all of the above, effective and stable leadership and management systems are required, along with an engaged workforce. The Trust has therefore prioritised:

- Launching the Organisational Development Strategy, which will support the strengthening of management and leadership skills;
- Maintain and further engage the frontline workforce;
- Further enhancing staff health and wellbeing strategies;
- Ensure clinical and management teams have the appropriate information and resources to enable deliver.

The national annual staff survey highlights year-on-year improvement in the staff engagement score and the recommendation of the Trust as a place to work. The Trust wishes to improve this positive position further to ensure true engagement and involvement in the transformation agenda. Also, it is well recognised that positive staff experience is aligned to a positive patient experience which is being evidenced at the Trust through the year-on-year improvement in the national patient survey.

This strategy builds on the Trust's previous significant successes and is a realistic response to the challenging circumstances that face the NHS at this current time. The Trust has a strong track record of delivery and has the capability, expertise and commitment to quality improvement to ensure it continues to successfully deliver services to the local population going forward.

We would welcome your views

If you would like to share your views on the content of this document, or if you would like to find out more, please contact:

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