

REPORT TO:	BOARD OF DIRECTORS
DATE:	9 FEBRUARY 2018
SUBJECT:	TRANSFORMATION BOARD
BOARD SPONSOR:	CHIEF EXECUTIVE OFFICER
PURPOSE:	TO NOTE
APPENDICES:	NONE

BACKGROUND AND EXECUTIVE SUMMARY

The Trust has established a Transformation Board to oversee the Transformation Programme and to drive delivery of the projects that address improved outcomes and better performance standards and once implemented, will help drive improve quality and efficiencies.

Below is a summary of agenda items discussed at the last meeting held on 15 December 2017. The meeting scheduled for January 2018 was cancelled due to operational pressures

Work of the Transformation Implementation Team

Now the Trust's Transformation Lead is in post, the Transformation Implementation Team will be progressing work to develop methodology, shared purpose framework and change tool.

Getting to Good

Getting It Right First Time (GIRFT) orthopaedics report had been received and actions had recommendations had been incorporated into the Getting to Good work stream. These relate to exploring greater efficiency within service provision. Recommendations also link to the Trust's Delivering our Future/Clinical Strategy.

Recommendations from all GIRFT reports will be formulated into action plans for all programme areas, monitored by Divisional Boards. Updates would feed into the 'Getting to Good work stream.

The Transformation Board received an update on the Dementia Village project. The Trust had been successful in securing funding for a Darzi fellow who was now working on this project. Steering Group, Project Team and work streams were now in place. The design phase is targeted for completion by February 2018.

Work is ongoing to progress the actions within the Trust's improvement programme. From September the governance arrangements for monitoring the improvement plan and wider programme have been revised and refreshed. The detailed work regarding the improvement plan will continue to take place within the clinical divisional governance structure (and cascaded to the triumvirates) as well as at a corporate level within 'business as usual' governance structures. There had been a slight delay due to operational pressures but Divisions had discussed a structure for getting this back on track in January 2018.

The Transformation Board requested further refinement of reporting from the Getting to Good work stream, focussing on high level updates reporting key issues actions being taken together with milestones and KPIs.

Healthy Finances

The Transformation Board received the Month 7 finance report (as per the Integrated Performance

Report to Board). The Board of Directors will be discussing the month 9 position at the Board Meeting in February 2018.

Actions discussed at the December Transformation Board include:

- Progress plan for agency reduction by March 2018;
- Clear understanding of whether workforce issues linked to agency usage were driven by demand or whether controls needed to be further strengthened.

Delivering Our Future

The report to Transformation Board included updates from the Clinical Strategy Group.

Discussion at Transformation Board focussed on the future of Accountable Care Partnerships. The Transformation Board would receive a report at its next meeting when the position was clear.

In addition, the Transformation Board requested a specific report at its next meeting on progress with a shared health analytics.

Right Skills, Right Time, Right Place

The programme is being restructured and five programmes had been identified:

- Making best use of our valuable staff (linked to rostering);
- Future Plans (a single programme looking at all elements);
- Temporary Staffing;
- Getting it Right (make sure accurate data and appropriate action);
- Effective Recruitment (focusing on challenging areas and efficiency).

The Transformation Board agreed the terms of reference for a programme board which would monitor the five programmes.

Great Place to Work

The programme is in the process of being reviewed and restructured. The Transformation Board will receive terms of reference at its next meeting for approval.

The Transformation Board noted that there was a need for the Trust to refresh its cultural change programme and for Divisions to refresh their 'great place to work' action plans. Links would be made to the latest staff survey results.

Higher Standards for Patients

2020 Delivery is undertaking focussed work with the Trust in terms of emergency department improvement. This programme of work was due to finish in January 2018.

Since the Transformation Board meeting in December 2018, Carnall Farrar, will provide dedicated programme management (PMO) and they commenced work in January 2018. A revised governance structure has been agreed to include the System Oversight Meetings, A&E Delivery Board and weekly EKHUFT Operational reviews.

Transformation Board received an update on key work streams linked to this project:

- Winter capacity;
- Frailty pathway: focus on reducing admissions/attendances from care homes.
- Home first pathways: monitoring KPIs in community beds and reduce length of stay.
- Electronic bed management: This had been introduced with the aim to go paperless in January 2018; and
- Theatre productivity.

Communications update

The communications work stream is focussed on delivering balanced communications to our staff and external stakeholders.

A review of Trust communications is being undertaken. A proposal for a plan would be brought to a future Transformation Board.

IDENTIFIED RISKS AND MANAGEMENT ACTIONS:	SRR 12 - Insufficient capacity and capability of the leadership team (Executive and Divisional Directors) to develop and deliver key strategies and recovery plans
LINKS TO STRATEGIC OBJECTIVES:	Patients: Help all patients take control of their own health. People: Identify, recruit, educate and develop talented staff. Provision: Provide the services people need and do it well. Partnership: Work with other people and other organisations to give patients the best care.
LINKS TO STRATEGIC OR CORPORATE RISK REGISTER	SRR 12 - Insufficient capacity and capability of the leadership team (Executive and Divisional Directors) to develop and deliver key strategies and recovery plans SRR 16 - Failure to maximise/sustain benefits realised and evidence improvements to services from transformational programmes
RESOURCE IMPLICATIONS:	Will be identified through project plans
COMMITTEES WHO HAVE CONSIDERED THIS REPORT	None – Finance and Performance Committee will receive an update at their April meeting
PRIVACY IMPACT ASSESSMENT: No	EQUALITY IMPACT ASSESSMENT: No

RECOMMENDATIONS AND ACTION REQUIRED:

- (a) **Note the update from the Transformation Board.**