

# PAPER

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# Report to the Meeting of the

# Oxford Health NHS Foundation Trust

# Board of Directors

**30 July 2014**

**Business Plan 2014/15 Quarter 1 Report**

**For: Information**

This report summarises the progress of the Trust’s Business Plan in Quarter 1 2014/15 (April - June 2014). The content of this report has been approved by Executive Leads and approved by the Director of Finance.

**Report**

This report has been developed as an interactive report. Select the icons to view each plan and use the links to move between them. The commentary in the report outlines key achievements for Quarter 1. The milestone maps show plans and progress for each of the projects. Please do not print the slideshow. This report is also available as a printable PDF.

Updates have been received from project leads for Quarter 1 for all of the projects in the Trust business plan. The driver ‘Developing our Business’ has been changed to ‘Developing Partnerships’ in our Strategic Plan. However the old strategic framework was used when generating these plans, and so they have been organized according to this framework for the Q1 report. The strategic framework will be reviewed over the next few months and will be used to shape the development of business plans for FY16.

Key points requiring attention for each of the drivers and enablers are outlined below.

**Driving Quality Improvement**

* DQI 4 (Review of inpatient mental health engagement and activities, therapy and physical interventions) - A review of Prevention and Management of Violence and Aggression (PVMA) training programmes has indicated that a new training programme is needed, which will require resources to fund retraining of staff over two years. This needs to be signed off by the Exec.

**Delivering Operational Excellence**

* DOE 6.3 (Cultural shift within Harm Minimisation to the recovery approach) - Full payment has not yet been achieved for Harm Minimisation services, but this is monitored quarterly and this service is due to be reviewed ahead of the upcoming tender.
* DOE 7 (Older adult mental health service remodeling) - Staffing is in progress, however the clinical restructure has delayed recruitment of Band 7 and 8a posts, delaying the next phase of restructuring. Three Day Hospitals, and Cromwell and Harding wards (older adult mental health inpatient units), in Buckinghamshire are now closed. Amber Ward (20-bed unit at the Whiteleaf, Aylesbury) opened on plan.
* DOE 10 (Interface medicine and EMU Phase 2) - Medical recruitment difficulties meant that the Witney EMU opening hours couldn't be extended when originally planned, and is due in Aug-14.
* DOE 13.1 (Development of Eating Disorders pathway - CAMHS) – There is a risk that the new Eating Disorders pathway for CAMHS will be delayed, as further discussions on staffing and finances are required to inform rollout of the proposed clinical model, with a suggestion to first pilot in Oxfordshire. Stage 2 of the project is therefore yet to be agreed.
* DOE 14.1 (Health visitor/School Health Nursing implementation plan) - A risk was highlighted around the ability to recruit enough Band 6 school health nurses given the requirement for term time only work and an additional qualification. A financial risk is associated with any vacancies remaining in Sept-14. A proposed mitigation action is to discuss whether Band 5 staff can act up and complete on-the-job training with day release.
* DOE 15 (CUBE) - Knowledge transfer from contractors to business as usual (BAU) staff working on the CUBE is delayed due to staff vacancies, but recruitment is in progress. Contract staff for BAU work will reduce but will be required until Mar-15 to migrate to NGEHR (Next Generation Electronic Health Record) data sets.

**Delivering Innovation, Learning & Teaching**

* ILT 11 (Clinical Record Interactive Search - CRIS) tool - Technical testing of the CRIS tool with South London and Maudsley (SLaM) is complete. Clinicians have requested a Public and Patient Involvement (PPI) lead and engagement with local patients and carers. This work has been completed by SLaM but it is felt that local engagement is also required. Clinicians also recommended that clinical time should be released for a CRIS Clinical Lead so that implementation can be a focused piece of work. A separate business case is required for these additional resources. Approval is required before implementation can start and rollout of the CRIS platform is therefore delayed.

**Developing our Business**

* DOB 3 (Improve Bid/Tender Quality) – Work is at risk. Development of planned bespoke masterclass training workshops with NHS Elect is delayed. However, a planning meeting with NHS Elect was held in July. Following the rollout of the training workshops, work will commence to develop bid/tender response material for all corporate services. The restructuring of the clinical divisions has delayed work completed so far on the marketing strategy and business development. It has had to be changed as services move from one directorate to another.

**Developing Leadership, People & Culture**

* LPC 13 (Reducing time away from workplace for patient and personal safety training (PPST) Levels 1 & 2) - Fire awareness was used as a successful pilot for virtual classroom training. There is a financial estimation of £20k p/a reduction in travel costs and staff attendance time savings of two hours per person on average.
* LPC 14 (Continuous Improvement of Appraisal Process) - Work to incorporate values in to the Performance Development Review process is delayed to Q2 as the values are still pending from HR. This reduces the opportunity for testing the new PDR design before the launch.

**Getting the Most out of Technology**

* GMMT 1 (Next Generation Electronic Health Record) - All planned activities to launch and implement the NGEHR are largely on target and the contract is now signed.
* GMMT 2 (Cloud Telephony) - Vodafone have been unable to complete their core infrastructure implementation and therefore implementation at Trust sites is delayed to Aug-14. This delay has impacted the delivery of the predicted cost saving during FY15.
* GMMT 3 (Manage and update data warehouse solution for the Trust) - Work to manage and update the data warehouse solution for the Trust is at risk. A business case was drafted for the replacement of the enterprise data layer, which includes the IRDIS data warehouse. A failure to approve this business case in Q2 could impact on the implementation and delivery of the Information Management & Business Information Development projects, and therefore the go-live dates for NGEHR. Approval of the business case is being expedited.
* GMMT 4 (Lifecycle Management- Windows/ Office Upgrade) – Technical and resourcing difficulties are hampering progress of the upgrade of all existing PCs to Windows 7, and additional contract resources are required.

**Using our Estate Efficiently**

* EE4 (Provide high quality estates and facilities services) – A review of car parking management system bidders is taking place prior to a contract award. The transfer of facilities management staff is due to take place in July.
* EE5 (Develop an effective environmental strategy) - A second draft of the environmental strategy is awaiting approval.

**Recommendation:** The Board is asked to note the Quarter 1 position.

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1. *A risk assessment has been undertaken around the legal issues that this paper presents and there are no issues that need to be referred to the Trust Solicitors.*
2. *This paper (including all appendices) has been assessed against the Freedom of Information Act and the following applies: [delete as appropriate]*

* *THIS PAPER MAY BE PUBLISHED UNDER FOI*