# PAPER

BOD 45/2015

(Agenda Item: 16)

# Report to the Meeting of the

# Oxford Health NHS Foundation Trust

# Board of Directors

# 25 March 2015

**Delivering the OHFT Strategy**

**For: Information**

On 25th October the Board of Directors approved a proposal submitted by the Medical Director to facilitate a 2 hour specific agenda item added to the confidential Board of Directors meeting, for detailed and targeted discussion of strategic issues. The first of these meetings took place on 25th February 2015 and then are scheduled to take place on a 3 monthly basis thereafter (May, September, and November). This report provides formal feedback to the Public Board following the meeting.

These meetings allow the Board of Directors to regularly review, in detail and in an integrated way:

* Highlights and recent key developments relating to strategy.
* Progress with the Trust’s Strategic Plan.
* Any emerging difficulties in achieving strategic aims.
* The effects of changing context (e.g. resources, demands, expectations).

The first meeting on 25th February covered progress and delivery of key components of the OHFT strategy (diagram below) and considered our context and current or future challenges. We also discussed the alignment of our strategy with system-wide developments and the Five Year Forward View (5YFV), in particular considering future key relationships for developing new models of care.



There are several linked initiatives underway to develop our approach to **team-working**. It is important that these are evaluated to understand their impact and we focus on the quality of team-working. In particularly, teams will need aligned team objectives and routine feedback and appraisal that are linked throughout the organization and supported by access to good quality information.

Recent re-structures have increased the levels of **clinical leadership**. It is important to note that this is not just medical leadership and all clinicians need to be empowered to lead and able to make decisions to improve patient care. The Trust is developing a strategic approach to leadership development to ensure we create a positive organization culture that delivers high value care.

A care system ensuring that **patients and carers** actively participate throughout their care cycle is fundamental to improving the value of what we do. This will require significant cultural and structural changes and require step changes in information and technology. There are excellent examples across all of our services with regard this work. In particular the Triangle of Care, incorporated in the Adults Mental Health Partnership provides a good framework to do this.

The work on **patient outcomes, patient experiences** and **improving value** were all considered to be closely linked. Some progress has been made and needs further work to embed the principles and understanding throughout the organisation. The rigorous measurement of outcomes will drive improvements in care and the opportunities for this across all services are evident, particularly with moves towards outcomes-based contracts. The recovery star being introduced in the Adult Mental Health Partnership is a good example of a framework to support outcomes measurement across whole pathways of care.

A culture of curiosity is essential and we must all want to know what patients, carers and families think about the services we provide. We need to see this as a valuable source of information to help us do better. We are introducing new ways of engaging with patients through ongoing surveys, monitoring social media and considering how we can implement and roll-out the use of [Patient Opinion](https://www.patientopinion.org.uk/) website to support this work. These kinds of information along with a culture of continuous improvement, measuring the real costs of delivering outcomes for patients along pathways will result in the best value care.

It was widely acknowledged that **innovation and technology** is playing, and will play a fundamental role in changing care. We have a robust programme to implement an Electronic Patient Care Support System that is an enabler for care. It is improving access to meaningful information for patients, carers and their families as well as the clinicians involved in care. It is up to us to realise the benefits of these technologies. We must encourage an innovative culture at all levels of our system and continue to work closely with our academic partners to rapidly adopt evidence-based innovations in care.

The final part of the session was dedicated to considering **partnerships**. Our strategy acknowledges that our success will be judged on how well we are able to collaborate, rather than compete, with organisations involved in care. It is unlikely that there will be a single ‘right’ architecture and the 5YFV encourages local systems to find local solutions. We must recognise that this is our strength as an organisation and is often under-valued. We have the experience of system management. We work in communities and have led dramatic changes in mental health over the years. We have begun to form strong alliances with partners from the acute sector, voluntary sector and our colleagues in local authorities. A clear focus for us in the future is to ensure that we begin now to build strong, effective relationships with general practice and work with them to improve how our system works.

**Recommendation**

The Board of Directors is asked to note the summary of discussions from this session on the 25th February.

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**Lead Executive Director:** Dr. Clive Meux, Medical Director & Director of Strategy

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]*

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