

BOD 53/2016

(agenda item:13)

# Report to the Meeting of the

# Oxford Health NHS Foundation Trust

# Board of Directors

**27th April 2016**

**Business Plan 2015/16 Quarter 4 Report**

**For: Information**

This report summarises the progress of the Trust’s Business Plan in FY16 Quarter 4 (January 2016 – March 2016). The content of this report has been approved by the Director of Finance.

The commentary in the report outlines key achievements for Quarter 4 for each project. This report has also been developed as an interactive report available on our intranet pages in which icons can be selected to view each plan and links move between them. Within the interactive report it is also possible to review each quarter to get a picture of achievements against our business plan throughout the year.

The following paper provides the highlights from Quarter 4.

**Driving Quality Improvement**

* **DQ1 Safer Care** CQC compliance review ongoing. Two day training for staff on ‘making families count’ is being provided in May 2016. A summary report for Q4 will be produced and presented to the infection control committee and safeguarding committees in April.
* **DQI2 PEACE** Roll out programme drafted and ready to be presented for agreement to directorates. Plan is to start in June 2016.
* **DQI3 Improving Patient Experience** Patient Opinion is being trialled in 6 teams. Since the commencement of the pilot project in September 2015 there has been 46 stories submitted which have been viewed on Patient Opinion 4,589 times in all.
* **DQI4 Embedding the 5 CQC Quality and Safety Standards** Peer reviews have re-started initially in the adult directorate. It is an objective for 2016/17 in the Quality Account to ensure a peer review programme continues to be established. The Quality Summit was held on 29th Jan 2016. The improvement plans have since been shared with all external stakeholders and the CQC.

**Delivering Operational Excellence**

* **DOE1 Adults Directorate**: (DOE1.2). New Early Intervention Service access and treatment targets are continued to be worked to - recruitment continues (as per Q3). DOE1.6 Team Working and Leadership Development reports are now being completed by the Oxon AMHTs and amendments being made; this will then feed into a pathway report and onto directorate.
* **DOE2 Children and Young People Directorate**: DOE2.2 Autism diagnostic pathways signed-off at project board in January. Two staff trained 'ADOS2' training
* **DOE3 Older People Directorate**: (DOE3.1) Fulbrook Centre: Future Integration - There were insufficient applications received and so recruitment was not successful. Memory clinics (DOE3.3) The service will provide an analysis of memory clinic activity each financial quarter as agreed with Bucks CCGs.(DOE 3.4) Integrated Community Nursing Care - workshops have been held comprising OxFed, OCC and OH to construct a set of objectives, review barriers to integrated working and to agree a set of activities with actions reviewed on a monthly basis.
* **DOE4 Cost Improvement Programme**: Month 12 achieved FY16 CIP target of £5.1m. CIP Delivery Group (CIP DG) meets monthly to scrutinise and drive delivery.

**Delivering Innovation, Learning & Teaching**

* ILT1.2 PQQ submitted in February. Work ongoing for full application with developing the cross cutting themes, governance arrangements and collaborative working across Oxford (ILT1.3 Structures are in-place for CRIS and work is ongoing between IT, IG and clinical leads on CRIS oversight.There are a number of research studies in-place and further developments due over the course of year. (ILT2.2) OAHSN Steering Group and Operational Management Group met to oversee Psychological Perspectives in Education and Primary Care project implementation.

**Developing Business through Partnerships**

* **DBP1 Oxfordshire Mental Health Partnership**: (DBP1.2) Outcome measures are now being monitored each month through the contract meeting. (DBP 1.3) Top 10 courses across the partnership been established to investigate further possibility of integrating and making accessible across the organisations. Also have 1 pilot running so delegates can be involved in viability - coaching/supervision course. (DBP 1.5) There have been discussions between the organisations regarding sharing of information and access to OHFT patient record - proposal has been shared with the partners for consideration and outcome is now pending.
* **DBP2 Oxfordshire Integrated Care**: Integrated Locality Teams(DBP2.1) Year-end peer review of Integrated Locality Teams implementation Peer review continues as we start to embed the Integrated Locality Team SOPs, the end evaluation has been delayed until we confident all actions have been completed. (DBP2.2) Plans are being pulled together around bed- based services in Oxfordshire.
* **DBP3 CAMHS Partnership Model**: Stage 2 plan in place and on track through to March 2016 (with plans extended to September 2016 as appropriate / moving to business as usual). Overseen by project every month at Sue Nicholls, 2nd Wednesday of every month.
* **DBP4 Communications**: DBP4.1 The creation of formal focus groups to provide feedback on the internet site has been redefined and will feature in the work of the web strategy group in FY 16/17. The comms web lead post became vacant at the end of December. A new manager has been appointed as of March 2016 and will lead this work. (DBP 4.3) Improving care 5 questions: supporting CQC regime briefing to staff issued March 2016.

**Developing Leadership, People & Culture**

* **LPC1 Flexible Workforce Management** System Upgrade now completed by supplier. Testing delayed due to Annual leave, completion date mid April. Bank is now live. As anticipated there have been some teething issues. Consolodation of processess and procedures to take place between now and June.
* **LPC2 Recruitment and Retention** Funding secured from TVWLA to further develop the behavioural framework and to embed into recruitment and PDR processes. NHS Jobs site has been updated and refreshed, Working for Us section of website has been updated to include further information on Career Development Opportunties, Implemented an apprenticeship programme with L&D, provided clearer information on staff accommodation.

**Getting the Most out of Technology**

* **GMT1 Next Generation Electronic Health Record**: Separate Q4 IT report issued at month end.

**Using our Estate Efficiently**

* **EE1 Provide a safe environment for service users and carers**: Delivery of FY 2016 operational estates capital programme is reported monthly to Capital Progamme Steering Committee and FIC. Procedures and systems in place, to ensure all statutory testing and required PPM is undertaken and provide regular compliance reports. Polices have been developed to ensure all health and safety procedures are addressed and are to be submitted to the next Safety Committee for approval.
* **EE2 Provide an estate of suitable quality to support service delivery (Condition B):** Hard FM hub managers are reviewing and surveying the properties for which they are responsible for FY16 annual condition survey.
* **EE3 Provide suitably located, functional services accommodation**: South Bucks strategy to support the relocation of services from Halacre has been agreed. Work is ongoing to support the Older Peoples Directorates clinical model for podiatry and MSK Physio. Initial estates plans have been outlined; before further works can proceed the CCG's Community Hospital Consultation needs to be completed
* **EE5 Develop and implement environmental strategy** Changing Minds Scheme delayed due to resource pressure. The Sustainability Lead is currently supporting the compliance manager. Energy Efficiency Schemes are being identified; including solar panel installation at Whiteleaf. Oxon bikes installed at Warneford and Littlemore; Schemes are being developed; including improved shower facilities for cyclists.

**Recommendation:** The Board is asked to note the Quarter 4 report.

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**Lead Executive Director:** Mike McEnaney, Director of Finance

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