Council of Governors - Cover Sheet

Subject:	Development of the Trust strategy			Date: 14 th November 2023	
Prepared By:	Claire Hinchley, Deputy Director of Strategy and Partnerships				
Approved By:	David Ainsworth, Director of Strategy and Partnerships				
Presented By:					
Purpose	David / anotronal		ly and r annoion	50	
To provide Council of Governors with an update on the process of Approval					
				Assurance	Х
(including patient, public and colleague feedback) for consideration Update					
and discussion.				Consider	Х
Strategic Obje	ctives			••••••	
Provide	Improve health	Empower and	То	Sustainable	Work
outstanding	and well-being	support our	continuously	use of	collaboratively
care in the	within our	people to be the	learn and	resources and	with partners in
best place at	communities	best they can be	improve	estate	the community
the right time		·	·		-
Х	X	Х	Х	X	Х
Principal Risk					
		standards of safety	and care		
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PR2 Demand PR3 Critical s	that overwhelms shortage of workfo	capacity rce capacity and ca	pability		
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Executive Summary

Background

The Trust strategy for 2019-2024 comes to an end in March 2024. The new strategy for 2024-2029 has been in development since April 2023. The attached slide deck provides a history of the process undertaken to develop the strategy, and upcoming key dates before it is finalised.

Patient and colleague engagement

Significant patient, public and colleague engagement has been undertaken over the summer months as part of the development process. Our patients and the public told us they want to see:

- Better communication from us that supports *continuity of care* inside and outside of the Trust in a *timely way*. This includes informing both our partners and patients of appointments, decisions and treatment summaries. It also includes improving our verbal communication in a way that is *sensitive and inclusive* to individuals.
- Shorter waiting times. You want us to offer prompt appointments and a diagnosis as quickly as possible. *Continue to provide the best care* and to provide access to consultants and *treatments without delay*.
- Joined up care. We've been asked to *reduce inconvenience* (e.g. duplication, unnecessary appointments or tests) in any form. People tell us they know resources are scarce and need to be

used wisely as well as correctly by delivering care together. We've been asked to **provide as much care as possible locally.**

Personalised care. We need to pay attention to people's individual needs such as wheelchair users, people with dementia, older adults, children and young people and people with sight difficulties for example. Our service delivery and the environment should take into account that we all have individual requirements of healthcare. Equity and equality should drive future service improvements and estate improvements.

Our colleagues told us we need:

- Communication staff members talked about communication in the light of the organisation needing a multifactorial approach to *ensuring information is shared with the correct people*, both internally and externally in a *timely* fashion. Using *varied delivery* methods.
- Patient pathways and transformation team members highlighted many good areas for *improving pathways and transforming services* including strengthening and *developing our partnerships*, reviewing discharge processes, *better use of digital* and new technologies and integration.
- People for colleagues to be supported through *clear career development* and good quality, appropriate and accessible training and development. Including *personalised career chats* and equitable access to development opportunities. For teams to have the *right skill mix* to both lead their services well and be well led at all levels of the organisation. So that people feel that the *trust recognises them* as our most important value they are.
- Back to basics team members highlighted the importance of fundamental principles. For the need for everyone to adhere to the CARE values of the organisation, that our team members feel valued and are given sufficient time to care and for services to be developed involving our communities and team members from the outset.

The themes above have been fed into the draft Trust strategy document (attached) and will continue to be included in the sub-strategies and technical strategies to ensure we deliver upon them.

Draft strategy – further developments

Following TMT and a Board workshop in October, changes have been made to the strategy to reflect further feedback. This includes amending the vision to 'outstanding care delivered by compassionate people, enabling healthier communities' and the strategic objectives have been amended in order to reflect the vision, with strategic objectives 2 and 3 swapping.

The patient story in the current draft Trust strategy has not yet been included. This will be added once we have agreed the final wording of the vision to ensure it reflects that we already do provide outstanding care by compassionate people across some of our services. The strategy then sets out how we do this consistently well across all of our services.

A further amendment will be made ready for the next draft document which will change the template of the strategic objectives section to ensure they are clearer to read and understand.

The next steps for the strategy are for it to be reviewed by the Council of Governors, expanded upon at Board workshops later in November, refined and then shared with our colleagues, partners, patients and the public as a roadshow as it is signed off in March 2024.

The Council of Governors is asked to:

- NOTE the process of development of the Trust strategy
- NOTE patient and colleague feedback
- DISCUSS whether the draft Trust strategy document demonstrates the feedback themes and share what could be strengthened
- AGREE to support the strategy roadshows