

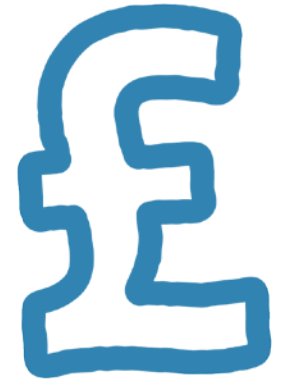
Team briefing for October 2016

hello my name is...

Ann Barnes, Chief Executive

Financial improvement programme update

- **£40.1m** 'financial gap' this year (£273m annual income)
- Making savings/generating income in following areas:
 - **£16.1m** – cost improvement programme (CIP), on track for **£15.8m (£9.7m recurrent)**
 - **£9.6m** – 'bold' actions, currently **£1m**
 - **£8.4m** – funding from NHS Improvement provided we hit finance and performance targets
 - **£6m** – remaining deficit agreement with NHS Improvement (excludes £0.5m donated income)
- Good progress with CIP
- Savings/income from 'bold' actions should start to come in



Cost improvement programme – lots of good work

- Reduced agency costs by 27% through overseas recruitment (*theme 3*)
- 70% increase in staff using salary sacrifice benefit schemes – for parking permits, home electronics, car lease, buying bikes (*theme 3*)
- New operating theatre booking & scheduling dashboard, easier to identify and fill slots – better use of theatres, reducing patient waiting times and generating income (*theme 5*)

Eight themes:

1. Business as usual
2. Environment
3. Focusing on people
4. Generating income
5. Being more efficient
6. Optimising capacity
7. Procurement
8. Medicines management

‘Bold’ actions update

Reminder of four areas announced in July 2016:

- 1: Voluntary redundancies
- 2: Closing beds
- 3: Car parking charge increases
- 4: Selling part of hospital site



Bold actions update: voluntary redundancies

- 350 is total number of posts we need to lose - to have pay bill similar to comparable NHS organisations (was 6% higher)
- Voluntary redundancy is just part of this
- 442 people applied for voluntary redundancy - 45 approved
- Vast majority leaving 27th October - less than 5 people later, to allow managers to make preparations
- Around 100 less posts across organisation (including vacant posts we won't fill) - total estimated workforce savings for this year around £6m



Bold actions update: voluntary redundancies (cont..)

- Panels carefully considered each application against agreed criteria
- Know many people were disappointed, but high number of clinical staff applied - must ensure no negative impact on patient care
- Reviewing process to see how we can improve comms if we offer voluntary redundancy (VR) again
- Further VR offers likely to be more targeted and linked to service redesign, modernisation – eg: electronic patient record
- Staff who have previously applied for VR will be able to resubmit, but criteria will be clearer



Bold actions update: closing beds

- As updated in Sept –
 - permanently closed B3 surgical ward (22 beds)
 - temporarily closed 8 trauma & orthopaedic beds on M4 ward
- All had quality impact assessment
- Expanded short stay surgical unit
- Whole system winter plan being put in place
- won't reduce further beds at this time



Bold actions update: car parking charge increases

- New car parking charges & increased monitoring started in September
- Good news - more parking spaces for patients
- Bad news - increasing complaints from neighbours about staff parking inconsiderately, blocking driveways, walkways and other cars
- Essential that people park legally and courteously



Bold actions update: selling part of hospital site

- As updated in Sept - not currently selling north east section
- When specialists tested the market, the money was going to be significantly lower than value of the area
- Deferring any sale until review estates strategy and value of all land and buildings
- Will still look to clear this section over next 2 years, as buildings in poor condition and costing around £1.5m to maintain



Developing a multi-specialty community provider

- Stockport Together partners developing multi-specialty community provider (**MCP**)
- New type of integrated **place based** provider, serving whole population – defining feature is registered list of participating GP practices
- Combines **delivery** of primary care, community health services, social care services and some services currently based in hospitals
- Based around **‘care hubs’** of integrated neighbourhood teams - typically serving community of around 30-50,000 people



Process to develop a multi-specialty community provider

- Stockport CCG and Council started formal process to procure MCP - four provider organisations (our Trust, Pennine Care, Viaduct Health GP federation, Council) asked to identify preferred option for **organisational form**
- Two stage process:
 - **Options appraisal** by end of November 2016
 - **Full business case** of preferred option (completion date to be agreed)
- Joint commissioners procurement process - and assessment by NHS England and NHS Improvement of approved final business case



Options
APPRAISALS



Options
APPRAISALS

Five options for multi-specialty community provider

1. Contractual alliance

Four providers remain separate legal entities, but bound together by alliance agreement

2. New neighbourhood led Accountable Care Trust

Created using legal framework of our Foundation Trust – new organisation holds MCP contract, as well as all other contracts for health and care services - creating single health and care organisation for Stockport

3. Lead provider (host)

One of the existing provider acts as 'host', holding MCP contract on behalf of four providers

4. Corporate joint venture: community interest company

Four providers partner in corporate joint venture which holds MCP contract - company established as a community interest company

5. Limited liability partnership (LLP)

Group of GPs form LLP to hold MCP contract

5

5

Proposed services for MCP's new organisational form*

Stockport FT Acute

- Emergency department (All)
- Some adult outpatients
- Diagnostics (All)
- Acute medicine/frail elderly services
- Prescribing

Stockport FT Community

- All adult community services
- Specialist services

Stockport Council

- Care management
- Neighbourhood and intermediate tier services
- Learning disability
- Public health delivery

Primary Care

All general practice spend that is **NOT** general medical services, personal medical services, directed enhanced services, or quality & outcomes framework

Includes GP development scheme, influenza incentive, spirometry and 24 hour blood pressure monitoring

plus primary care prescribing

GP out of Hours

Pennine Care FT

- Adult and older people mental health services
- Improving access to psychological therapies

* Either directly provided or through sub-contracting

Criteria for options rating for new multi-specialty community provider

Options for MCP rated by senior leaders in each provider organisation - against agreed set of assessment criteria

- Effective governance and accountability
- Value for money and affordability
- Enables GP influence
- Effective delivery of new model of care
- Impact on wider health and care workforce



Recommended option for new multi-specialty community provider

Part of new neighbourhood led Accountable Care Organisation

- **Single preferred option** of all partners
- Most sustainable option - particularly taking **financial risk** and delivering new service model into account
- Robust vehicle with **track record** of sustainability in face of challenges confronting health and care system
- **Understood** by regulators
- Governance arrangements could be put in place that are **acceptable to all partners** - but will require further discussion and negotiation
- Satisfies requirement - set out by NHS England and joint commissioners in procurement process - to create organisation built from registered GP list and to enable **GP leadership** at governor, board, executive, managerial, hospital and neighbourhood level

Next steps for new multi-specialty community provider options appraisal

	Stockport FT	Stockport Council	Viaduct Health GP federation	Pennine Care FT
Sharing of options appraisal before approval meetings	12 October Leaders Group	12 October Leaders Group	12 October Leaders Group	12 October Leaders Group
	19 October Council of Governors	25 October Health & Wellbeing Scrutiny 31 October Adult Care Scrutiny 1 November Corporate Resources Scrutiny	19 October GP engagement event 20 October Board Meeting	26 October Board of Directors
Approval meeting	24 November Board of Directors (Public)	15 November Council Executive (Public)	17 November Board meeting	30 November Board of Directors (Public)

New £20m medical & surgical centre fully open

- New medical and surgical centre ('D block') opened to patients' w/c 3rd October
- Informal event on 12th Oct to thank key people who helped open building on time and under-budget
- New site map on corridors and website



New £20m medical & surgical centre (cont..)

- Andrew Bingham, High Peak MP, praised centre during visit
- Hoping to have Royal visit next year for 'official' opening
- Wanted to organise staff tours, but impossible because tight timescales
- **Virtual tour video**



Performance for September

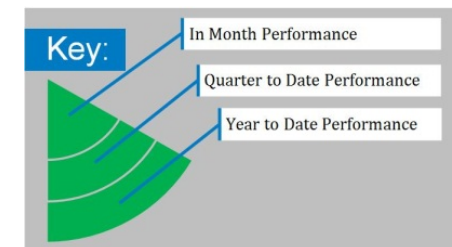
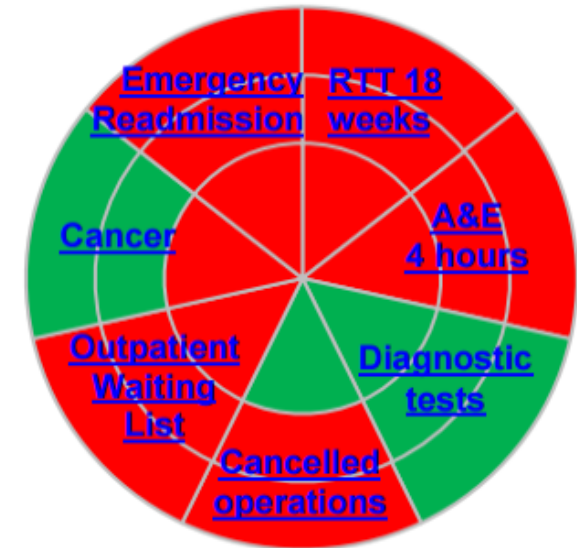
Red areas for September:

A&E FOUR HOUR WAIT (*four hours until admission/referral/discharge, 95% target*):

- 71% (81% last week)
- Attendances 4% above expected levels (267 per day), with high levels of delayed transfers of care

EMERGENCY READMISSION (*emergency readmission within 28 days of discharge - not higher than national average*):

- 8% emergency readmission rate (national average 6.6%)



Performance for September (cont...)

Red areas for September:

REFERRAL TO TREATMENT (*92% patients treated within 18 weeks of GP referral*):

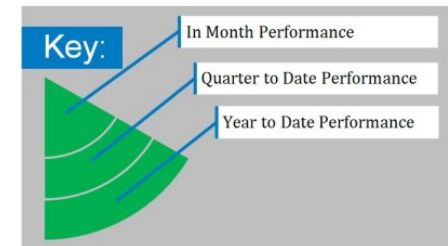
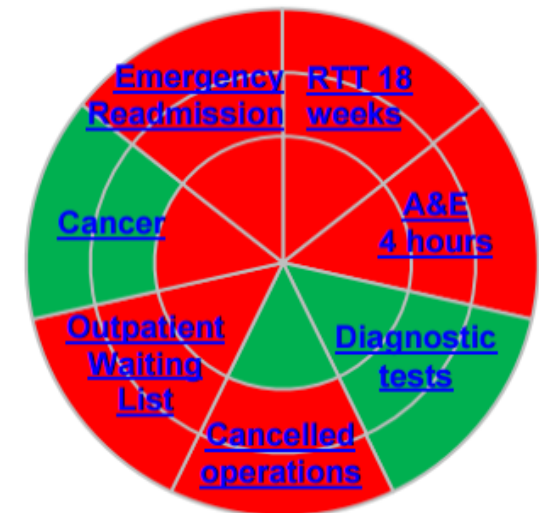
- 91%

OUTPATIENT WAITING LIST (*follow-up appointment*):

- Ophthalmology, gastroenterology, respiratory medicine, cardiology

CANCER (*62 days from urgent GP referral to treatment, 85% target*):

- 84.4% - expect to hit target for Q2 (July to Sept)



A&E four hour wait target

- Daily meetings taking place with directors from our Trust, Stockport CCG and council to improve performance
- Short, medium and long-term plans to address problem in 3 areas:
 - 1) Avoid admission
 - 2) Improve patient flow through hospital
 - 3) Discharge of patients
- Emergency care improvement programme (ECIP) team – helping 40 ‘places’ across country under the most pressure
- Reviewing whole Stockport urgent care system in November, 3 day review of hospital part last week



A&E four hour wait target (*cont...*)

Lot of work taking place, including:

- Non 'emergency' patients coming through emergency dept (ED) being seen on-site by GP
- Expanding ED to 22 cubicles - seven extra
- Proactive management and escalation once patient waiting 2.5 hours
- Using clinical decision unit beds for patients requiring 'watch/wait for results' approach - to free up ED space



Quality for September

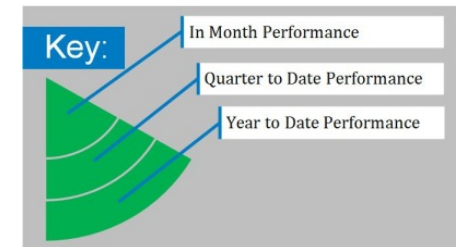
Red areas for September:

PATIENT EXPERIENCE (*Friends & Family test, 40% response rate for inpatient & day cases, 20% for A&E*):

- 90% patients said they were 'extremely likely' or 'likely' to recommend us, but response rates below target

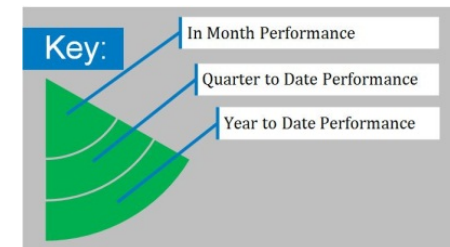
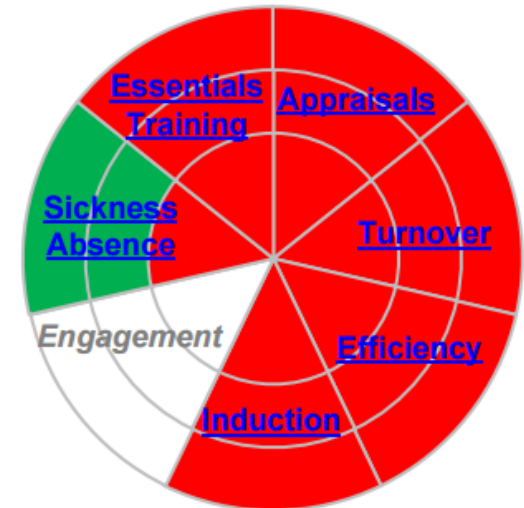
DISCHARGE SUMMARY (*95% published within 48 hrs*)
& CLINIC LETTERS (*95% within 14 days*):

- Discharge summary - 88%
- Clinic (outpatient) letters – 79% (ophthalmology, cardiology the longest)



Workforce for September

- **Appraisals** – 94.5% (95% target) – highest ever!
- **Essentials training** - 87% (95% target)
- **Turnover** – 14% (target of 10% or under, NHS average currently 13.9%)
- **Efficiency bank & agency costs** – 1625 agency staff shifts above agency cap (£1.58m, 9% of our pay costs)
- **Induction in departments** - 58% (target 100%)



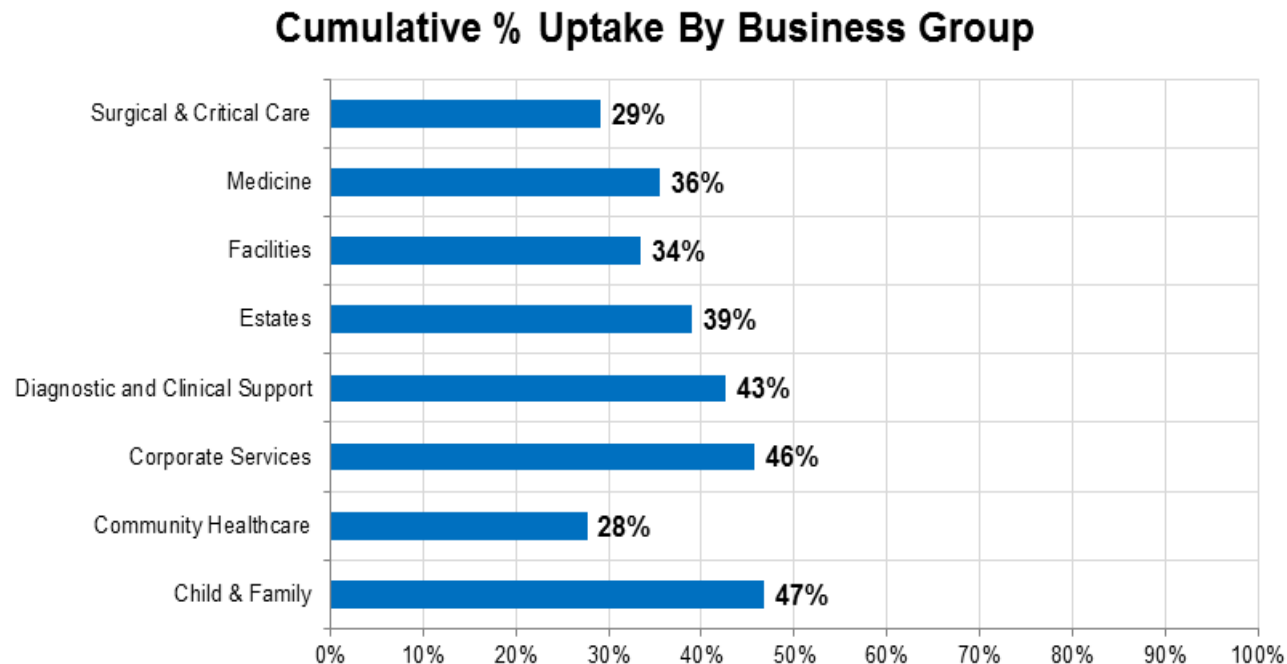
PLACE assessment results published

- Annual patient-led assessment of the care environment (PLACE) in April
- 19 patient assessors inspected 3 locations:- Stepping Hill Hospital, Devonshire Centre for neuro rehabilitation and The Meadows, Bluebell Ward
- Scored higher than previous year on cleanliness, privacy, dignity & wellbeing, condition, appearance and maintenance
- But slightly lower on dementia and food and hydration
- Detailed action plans already in place



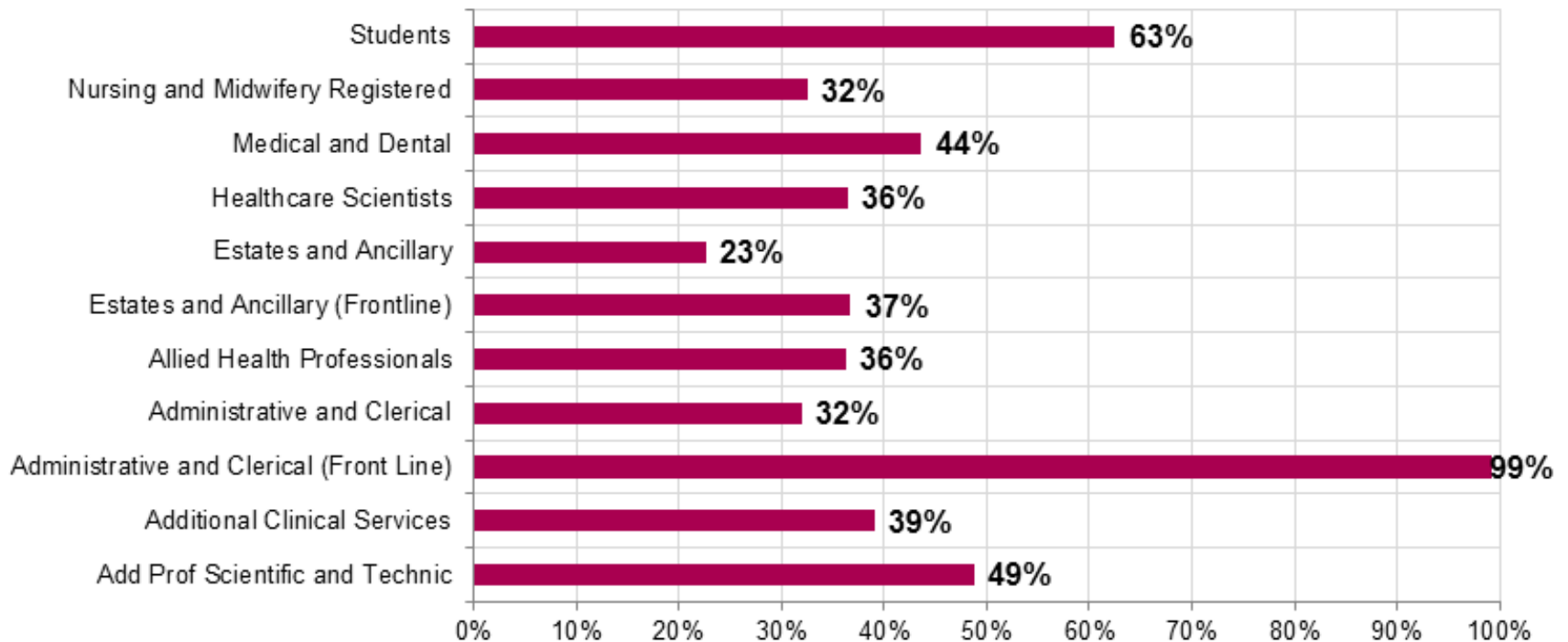
Staff flu vaccination programme

- Started first week in October – currently **37%**
- Essential we protect patients and others
- Details of how to get jab in written team brief



Staff flu vaccination programme (cont...)

Cumulative % Uptake By Staff Group



Gillian Easson retiring as Chairman

- Gillian Easson retiring as Chairman on 31st March 2017
- First joined our Trust as non-exec director in 2007, before being appointed Chairman in 2012
- Plans to appoint her successor starting immediately



New staff governors

- Two new staff governors appointed - **Isabel Daniel** and **Chris Hudsmith**
- Four staff governors in total
- Can raise issues about our organisation's strategy and plans with any staff governor



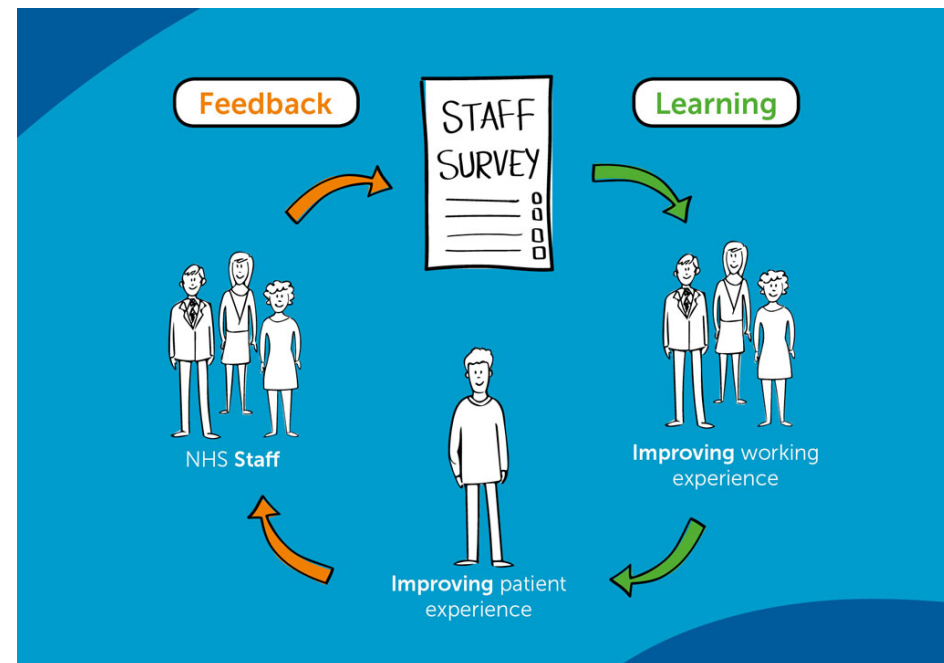
Isabel Daniel
(specialist
safeguarding nurse)



Chris Hudsmith (financial
improvement senior
programme manager)

Please complete annual staff survey

- Reminder to complete survey, as vital we hear your views
- Survey went to ALL staff via email or post - strictly confidential
- Only 17% have currently completed survey - closing date 2nd December
- Chance to win one of a range of donated prizes, including mini i-Pads



Awards & achievements

- Stockport ranked in **top seven** places in country for **cancer care**
- NHS England 'Ofsted style' rating based on how quickly patients are diagnosed, promptness of treatment, one-year survival rates and overall patient experience
- **Sara Bennett** is finalist for 'Research Nurse of the Year' in Greater Manchester Clinical Research Awards - for research work in paediatric dept

THE BEST AND THE WORST

TOP PERFORMING	Early diagnosis*	One year survival	62-day wait**
Harrogate & Rural District	52.4%	72.6%	86%
Leeds North	55.2%	72.2%	91.5%
Solihull	59.7%	71%	86.7%
South Devon & Torbay	55.2%	73.3%	88.5%
Stockport	50.8%	72.3%	88.3%
Vale of York	55.9%	70.8%	86.6%
Wiltshire	56.2%	70.8%	86.9%

The new cancer rankings results received a lot of media coverage



Sara Bennett, research & staff nurse
in our paediatric department

Awards & achievements (cont...)

- **Louise Milligan**, mortuary team leader won 'Mortuary Assistant of the Year' award at national Good Funeral Awards
- **US and Canadian medical students**, currently training at Stepping Hill Hospital, won international university prize for their ultrasound techniques presentation



Louise Milligan



Mohit Ajmeri, Vanessa Hamby and Joshua Hamby from the American University of the Caribbean with their 'presentation' ultrasound machine

And finally...

- BBC Radio Manchester broadcast breakfast and morning shows 'live' from hospital reception, 3rd Oct
- Included interviews with staff and volunteers, talking about new centre, healthy living support for patients, stroke, dementia, maternity services and other areas



Business group updates

- Child and Family
- Community Healthcare
- Diagnostics and Clinical Support
- Medicine
- Surgical and Critical Care
- Estates & Facilities
- Corporate Services

