















LPT September SUTG Delivery Plan

Theme	Focus	Outcomes	SUTG Q1 22/23	SUTG September 22 - Latest Delivery Update
 <p>High Standards</p>	We will build on the learning from Covid and will deliver safe care and reduce harm.	We will demonstrably improve compliance against Health and Social care core standards and Care Quality Commission (CQC) registration requirements.	<p>We have developed our Foundations 4 High Standards approach working with NHFT to enable us to consistently be ready for inspections or regulations. This programme is underway.</p> <p>We have achieved all our CQC must do actions and should do actions within timescales and have no warning notices in place and have improved inspection ratings for the acute services revisited.</p> <p>We have supported the Urgent and Emergency Care system inspection. a positive report from the CQC for the Mental Health Liaison Team</p>	<p>Always shining communications has commenced. The PSIRF has been published nationally and planning is now underway for roll out across LPT.</p> <p>All CQC actions remain on track for delivery and final must do for closure by the end of September 2022.</p> <p>Planning has commenced for implementation of Schwartz rounds.</p> <p>Patients as partners have been recruited alongside administrative staff to support the 15 steps visits.</p> <p>Planning is in place for the Joint Area Targeted Inspection to commence 20/09/22</p>
 <p>High Standards</p>	We will build on the learning from Covid and will deliver safe care and reduce harm.	Development of an implementation plan for the local National Patient Safety Strategy- includes pressure ulcers, deteriorating patient, self-harm, Infection, Prevention and Control (IPC), suicide prevention and least restrictive practice.	<ul style="list-style-type: none"> •The plan for implementation of the Patient Safety Strategy is being held within the Foundations 4 High Standards Programme with leadership from the Head of Patient Safety. •Patient partners roles are being developed to support the role out of the strategy. •The PSIRF framework publication is delayed nationally but preparation is underway within the patient safety team in readiness for this. 	<p>PSIRF has now been published and plans to implement are in progress.</p> <p>A new Patient Safety Director across the group has been appointed.</p> <p>There is ongoing QI work for pressure ulcers, self-harm, IPC and a new lead has been identified for the deteriorating patient work.</p>
 <p>High Standards</p>	We will transform our patients' experience of care - making no decision about them, without them.	Implementation of the Shared Decision-Making Framework.	The shared decision-making framework has been approved by the executive team and implementation has commenced.	The NICE guidance has been shared across the relevant clinical groups and work is underway to align with the care planning improvement work.
 <p>Transformation</p>	Progress our Ageing Well accelerator work.	Quicker response, earlier clinical intervention and decreasing urgent care attendances by target population.	<ol style="list-style-type: none"> 1. We are now achieving the national 2hr urgent response national target 2. We have worked with the national team to test data reporting methodology to support other Trusts 3. We are part of the urgent community response team which is having positive results in decreasing hospital attendance and admissions 4. We have decreased falls in the community and care homes 5. We have funding and are in the planning phase for frailty virtual wards 	<p>We are achieving in excess of the national 2hr urgent response national target</p> <p>We are part of the urgent community response team which is having positive results in decreasing hospital attendance and admissions</p> <p>We continue to reduce falls in the community and care homes</p>





	<p>Address our waiting lists, particularly in relation to continence and Neuro.</p>	<p>Reduced waiting times.</p>	<ol style="list-style-type: none"> 1. We have transformational programs of improvement in place, we are currently finalizing this year's trajectory for improvement & we are seeing a reduction in our longest waits. Our Finance and Performance Committee are providing additional assurance and oversight of our progress. 2. Actions are in place and within our Neuro Developmental programme we are establishing a new Access Team to triage referrals & re-direct to most appropriate health professionals to avoid delays, new primary care assessment forms that will streamline the referral process (and avoid families repeating their experience). 3. Working with YAB on a referral form that can capture the voice of the CYP at the outset. The LD Service Implemented a new single point of access service in January 2022. 4. Transforming the process of referral to assessment within all disciplines and supporting the wider implementation of the pathway process, which is fully mobilised on SystemOne. <p>Improvement trajectories in place or under development for services to March 2023.</p>	<p>Focus on neurodevelopmental waits: Neurodevelopmental Programme business case will propose options to reducing waiting times in line with NICE guidelines and waiting times targets (due end September).</p> <p>Community Paediatrics workshop in September 2022 reviewed waiting lists and formulated a recovery plan and business case to reduce neurodevelopmental waiting lists.</p> <p>Neurodevelopmental Transformation Programme is streamlining referral process and forms and reduce delays in receiving referrals and ensure that all relevant information is attached with referrals.</p>
	<p>Work in partnership to develop and deliver a strategic plan to ensure the Best Start for Life and the importance of the 1001 first critical days.</p>	<p>Continue to participate in the system-wide coalition of organisations to agree and deliver a strategic plan for the first 1001 days.</p>	<p>We continue to work closely with the LLR CYP partnership on priorities for CYP as we move towards a future CYP collaborative. Healthy Together Project Manager is post to mobilise the HT 0-11 service and 11+ transition.</p>	<p>Family Hubs for Leicester Build Back Better (fund £40k) national funding received. Proposal to implement a "Hub and Spoke" model with a 'Super Hub' likely to be established at former Haymarket Theatre site in city centre. LA still to announce 'Locality Bespoke Hubs' in neighbourhood areas/communities. FYPCLD leads confirmed as members of Family Hub Project Board. Leicester Family Hubs Engagement Event planned for 13 September 2022 for service leads and representatives across statutory, voluntary and charitable sectors and FYPCLD Leads.</p> <p>Family Hubs for Leicestershire Currently on a deliberate "pause" until September 2022 as LLR not included in 75 authorities across England identified for initial national funding. FYPCLD service leads connected with planning meetings.</p> <p>Family Hubs for Rutland Again, no national funding received. Still strategic intent to adopt Family Hub principles as a vehicle of service integration. FYPCLD leads connected with local planning meetings.</p> <p>Healthy Together mobilisation of new contract arrangements for Leicestershire and Rutland. FYPCLD actions progressed, with unresolved risks identified in relation to system safeguarding for children and young people aged 11+ across LLR due to recent changes in cross-border safeguarding practice. Risk issues escalated within LPT and ICB. Ongoing development of SPOA/hub model ongoing through August and September 2022.</p>

	<p>Increase the focus on Learning Disability.</p>	<p>People with a learning disability are better supported to live fulfilling lives in the community and have quicker access to services when they need it.</p>	<p>The LLR LD&A Collaborative is expected to commence in September 2022 with the collaborative's baseline operating model, governance framework, MoU and partnership agreement prepared for the partnership. The Collaborative Maturity Framework 2022/23 will be further developed and is due to commence in September 2022 following sign-off by all ICS partners. First year end report and second year plan submitted to NHSEI (for the 3 year LD roadmap).</p>	<p>The LLR LD&A Collaborative is awaiting approval from the ICB in October 2022. We have an agreed way of working and confirmed our partnership arrangements with the ICB and local authorities. This brings closer working and improved outcomes for our people. The Learning from Lives and Deaths reviews from people in LLR has been shared with local authority and ICB committees and staff across health and care to support improved outcomes.</p>
	<p>Establish Neurodevelopmental Transformation Programme and Leicester, Leicestershire and Rutland (LLR) Autism service (children, young people and adults).</p>	<p>Our service users with Autism will wait less time to receive care when they need it and will be supported to stay out of hospital as much as possible.</p>	<p>The clinical process is drafted and to be confirmed by our task and finish group by the 8th July. New assessment forms will be piloted and then evaluated/signed-off in November 2022. Work continues on the accessible digital platform for families. Business Case development is underway. Training framework and associated competency framework (inter-disciplinary and inter-organisational) is under development. A pilot of Chat Autism to expand the age range for the 0-14 to provide timely support and prevent escalation and admission. Project is on-track for all key milestone for 2022/23.</p>	<p>Business case is currently in development for the Neurodevelopment Service (0-18) across LLR with the aim to go live April 2023. Significant investment is being requested for additional workforce to create a sustainable service and tackle existing backlogs and waiting lists for the service.</p> <p>GP Referral Form and School information Task & Finish Group developed and planning for pilot role out in CAMHS pending Training Framework and competency framework. The Solihull Approach approved for implementation to provide all residents of LLR access to the full suite of parenting courses as well as the development of Neurodevelopment Specific course.</p> <p>IM&T prioritisation group have agreed to support development of a SystemOne unit with resource to be allocated to design the unit in early 2023.</p>
	<p>Respond to the outcome of the public consultation on mental health services and support.</p>	<p>Develop a clear Step Up To Great Mental Health Delivery Plan building on the outcome and learning from the consultation.</p>	<p>Workshops for Mental Health (MH) Practitioners in primary care are happening in July and August with recruitment from September. Targeted MH access work continues in neighbourhoods that have historic low access rates to services. Preparedness for the Mental Health Support Teams in Schools Wave 7 to commence in September 2022. Co-production of digital information on access to services in progress Focus on improving demographic data collection to improve our ability to address inequalities and improve performance.</p>	<p>An FYPCLD focus on improving the transition experience of YP moving between CAMHS and adult MH services.</p> <p>FYPCLD development of an integrated pathway between mental health teams for adults presenting with eating disorders / disordered eating.</p> <p>An update on the detail in the Step Up to Great Mental Health Delivery Plan is a separate item on the board agenda.</p>
	<p>Lead a clear digital plan that makes sure digital transformation is owned by the Trust.</p>	<p>Refresh the Trust Digital Information Management & Technology plan in line with key national initiatives.</p>	<p>We have a digital strategy from 2020-2024. We are working through refreshing and updating this, in line with the new ICS digital strategy.</p>	<p>We have a digital strategy from 2020-2024. We are working through refreshing and updating this, in line with the new ICS digital strategy. We are working with ICS colleagues and chair the LLR Digital Design Group. We are working closely with UHL to develop improved connectivity between hospital and community services to improve outcomes for our population.</p>
	<p>Make the Trust a better place to work by ensuring staff are safe and healthy, physically and mentally well and</p>	<p>Delivery of the objectives for this year of our Trust's People Plan.</p>	<p>This is ongoing and we are now including actions from staff survey and the people promise exemplar programme.</p>	<p>People promise exemplar programmed action plan established Focus on flexible working exit interviews and stay conversations</p>

	able to work flexibly.			
	Take action to ensure our Trust engages staff well.	Improving our culture, leadership and inclusion with the Our Future Our Way programme, and embedding our Leadership Behaviours for All staff.	Continue to meet with change champions and planning to increase change champions numbers through a recruitment drive	Active change leader recruitment campaign underway Change leaders meet to discuss staff survey and feedback into action
	Take action to ensure our Trust engages staff well.	Roll out of our Reset & Rebuild Programme of Big Conversations and resulting actions.	Health & well-being priorities and blended working principle being rolled out	Senior leadership forum Change leaders and champions networks Staff network meeting continue to meet Over summer into autumn HWB roadshows are taking place and well received Golden tickets sent out and well received
	Recruiting and retaining our people.	Improving employment and development opportunities for our Black, Asian and Minority Ethnic people.	We are running interview skills training and career development programmes for our BAME workforce. Active bystander master class delivered at system and group level, Compassionate and inclusive leadership program developed and implement this has been shared at group level. Our model employer target indicator has improved.	We continue to run interview skills training and career development programmed for our BAME workforce. Active bystander master class delivered at system and group level, Compassionate and inclusive leadership program developed and implemented this has been shared at group level. Our model employer target indicator has improved. Inclusive leadership masterclass program running
	Recruiting and retaining our people.	Further develop and support the Trust's staff support networks.	Ongoing support and development of networks additional funding for networks to use approved and supported by charitable funds.	People promise exemplar programmed action plan established Focus on flexible working exit interviews and stay conversations
	To capture and use the learning from patient feedback and engagement to inform and influence how the Trust delivers and designs its services, including Implementation of the new Friends and Family Test system across the organization.	We will make it easy and straight forward for people to share their experiences.	<ol style="list-style-type: none"> 1. Staff offer underway to include FFT analysis, understanding touch points and creating QI, ENVOY, patient stories is being built into staff & patient exp. 2. Work commenced on 15 steps, PLACE cohort of patient reviewers, and A&C staff offer 3. All work on target for the qtr 4. Establishing re starting carers task and finish group will commence in Q2. 5. Work to understand trust activity and position has been undertaken during Q1 including liaising with other trusts/buddy trust. Q2 aim to strengthen progress 	<p>FFT support offer continues</p> <p>15 Steps Challenge Reviewers – admin and clerical staff and patient and carer cohort recruited and trained – awaiting commencement of visits</p> <p>PLACE Assessors – admin and clerical staff and patient and carer assessors recruited and trained – PLACE visits have commenced</p> <p>Message to Matron scheme currently in development to enable anonymous feedback in our inpatient settings – aim to launch in Q3</p> <p>Complaints Peer Review undertaken with 15 staff/patients in attendance. Evaluation of review was positive with improvements identified. Second Review planned for</p>

				October 2022.
	To capture and use the learning from patient feedback and engagement to inform and influence how the Trust delivers and designs its services, including Implementation of the new Friends and Family Test system across the organization.	We will increase the numbers of people who are positively participating in their care and service improvement.	Further work on Friends and family Test and use of QR code roll-outs being completed	<p>Lived Experience Leadership Framework approved.</p> <p>Patient and Carer Partner roles currently being co-created with patient and carers. Recruitment to commence in October 2022.</p> <p>Patient Safety Partner role description signed off and awaiting recruitment</p> <p>Mental Health Recovery services move to Corporate Team finalized and taking place in October – move will ensure lived experience pathway to be developed and development of further lived experience roles and peer support workers in physical health services</p>
	Deliver continuous development of patient/carer participation and involvement.	We will improve the experience of people who use or who are impacted by our services.	<ol style="list-style-type: none"> 1. Involvement network continues to grow with increased collaborative working, and the development of a QI share and learn space for service users and carers, with regular attendance. 2. Involvement cafes currently being reviewed. 3. Review of training and resources for staff offer, identifying gaps and conversations with key staff, staff groups. All Q1 targets met 4. Youth Advisory Board ongoing leadership and support established. Continuous engagement with services to co-produce/engage ongoing. 	<p>QI Patient and Carer Peer Group established – members are currently involved in a number of QI projects and come together for shared learning etc.</p> <p>Foundations for Patient Experience Programme confirmed with Point of Care Foundation – 30 places will be provided via the Culture Leaders Programme and Patient and Carer Partners/YAB/Peoples Council to ensure collaborative learning</p> <p>Customer Service review due to complete at end of September. Co-Designed with staff and patients</p>
	Providing leadership for ongoing improvement across our Well Led framework, informed by learning from others.	Improvement against the well-led Key Lines of Inquiries.	<ol style="list-style-type: none"> 1. Internal Audit annual report and Head Of Internal Audit Opinion Significant Assurance 2. Provider Licence - compliant 3. Draft framework of potential well led system inspection regime in anticipation of CQC next steps 4. CQC reinspection feedback 5. Showcase presentation at NHS Providers Governance Conference with excellent feedback. Video to remain on NHS Providers website as a resource. 	<p>Coordination of Well Led with the Foundations 4 High Standards programme. Continues with management training sessions in each directorate.</p> <p>Well Led session at the Trust Board Development day 23 August 2022</p> <p>Well Led Delivery Plan presented to the Strategic Executive Board 2 September 2022</p> <p>Procurement for external Well Led Assessment is in progress</p>
	Contributing to the development of ICS governance and risk systems.	To have effective governance and risk systems in place with system partners to input into the Integrated Care System (ICS).	<ol style="list-style-type: none"> 1. ICB nomination submitted within timescales. Revised governance structure and assurance flow. 2. Paper received at SEB May 2022 and Trust Board development workshop 21 June 2022. Further paper taken to SEB July 2022. On track for delivery in September 2022 to include revised SEB and Executive Management Board arrangements. 3. Attendance at the company secretary network with workshop by the Good Governance Institute for ICB governance development 	<p>Meeting with ICB governance lead In September to review and agree, governance, national outcomes frameworks, system risks and ICS meetings and the flow on information from LPT to these meetings.</p> <p>New meeting arrangements have commenced.</p>

	<p>Invest in our resources to deliver optimal health outcomes.</p>	<p>Good financial plans and delivery of plans, aligned to investment in key areas will support the Trust's ability to deliver against the vision of improving health and wellbeing.</p>	<p>Financial approval levels process re-worked and approved within both trusts (December 2021)</p>	<p>Break even financial-plan submitted in June. Operational pressures are emerging in Mental Health services. Additional expenditure has been agreed to support quality & safety of services. The financial forecast is being reviewed and updated in the current quarter.</p>
	<p>We have a clear data quality framework and plan that guides our delivery of great data quality.</p>	<p>Review data quality policy, develop data quality improvement plan and submit data privacy and security toolkit.</p>	<p>Review in progress, further update in Q2</p>	<p>Data Privacy & security toolkit (DSPT) submitted with 'standards met' status. An internal audit report on DSPT gave substantial assurance. The phase 2 data quality improvement plan is in development.</p>
	<p>Support a sustainable local community in Leicester, Leicestershire and Rutland.</p>	<p>Review the current work with other NHS partners, local authorities and other stakeholders and identify areas of work where the Trust can work with others to support our sustainable communities.</p>	<p>Individual Directors are attending local authority health and well-being board meetings, support the development of strategic plans across LLR, these are exploring how the public sector can support our communities further.</p>	<p>Individual Directors are attending local authority health and well-being board meetings, support the development of strategic plans across LLR, these are exploring how the public sector can support our communities further.</p> <p>Specific support and discussions happening in the places of Rutland, Leicester City and Leicestershire</p>
	<p>Positively support environmental, economic & regeneration improvements, policies and practices in LLR.</p>	<p>To have an agreed set of principles that set out our commitments to this aim, agreed through our Trust public board meetings.</p>	<p>These will be developed during this financial year and come to board approval later in the year.</p>	
	<p>Supporting our most vulnerable in society; raising health equity across Leicester, Leicestershire and Rutland.</p>	<p>We will be a member of the local authority and NHS group to reduce health inequalities in Leicester, Leicestershire and Rutland and play a full role in agreeing a plan and implementing that plan to improve equity.</p>	<p>We are a member of this group, we are actively supporting system plans to reduce inequalities. In June 2022 LLR system colleagues attended an LPT Board workshop to support our work on tackling inequalities. LPT has shared our work to reduce inequalities for people with a learning disability and or neurodevelopmental needs with other colleagues across the Midlands.</p>	

	<p>Therapeutic environments that improve outcomes for people using services by supporting safe, joined up, person-centered care.</p>	<p>Eradication of dormitory accommodation</p>	<p>1. Phase one work at Bradgate site – Bosworth ward completed July 2021 and Thornton completed October 2021. 2. Phase two commenced in November 2021 at Ashby ward completed February 2022. Aston ward due for completion in July 2022. The new Safehinge doors will be incorporated onto Aston ward as they have been on Ashby ward. 3. This will see all 4 shared sleeping wards identified by CQC in report from October 2021 eradicated. 4. Further work at Evington ward is planned for completion in February 2023. Work on Bennion ward is planned for completion in May 2023.</p>	<p>The 4th and final ward identified as shared sleeping accommodation by the CQC in 2019, Aston, was completed in August 2022 as planned. The new SafeHinge doors were a feature on the ward as they were successfully trialled on Ashby ward.</p> <p>The rest of the programme remains on plan for completion by May 2023.</p>
	<p>A positive and effective working environment for all staff building on the learning from post Covid 'reset and rebuild' work.</p>	<p>Implement facilities management business case to deliver the capacity and capability for high quality estates.</p>	<p>Health & well-being priorities and blended working principle is rolling out across our estate. We have implemented a range of cost of living support Facilities Management services transferring to LPT 1st November 2022 as per the business case</p>	<p>The transfer of Facilities Management services as per the business case has been agreed for 1st November 2022.</p> <p>The 12 workstreams to implement this are at an advanced stage.</p>
	<p>Greener NHS buildings and identifying our route to net zero.</p>	<p>Develop and deliver a green action plan for the Trust.</p>	<p>LPT have produced Green Plan which sets out how the Trust will support the transition to a Net Zero NHS and help achieve the ambitious Net Zero targets. The Trust has recognised the importance of environmental sustainability and the role it must play in reducing the impacts of climate change. Development of data to support the plan is one key aspect as currently limited historic data is available. The Green Plan lays out the Trust's nine areas of focus. Each sub-section details the purpose and proposed actions for the Trust to reduce carbon emissions.</p>	<p>The Trust has recognised the importance of environmental sustainability and the role it must play in reducing the impacts of climate change.</p> <p>LPT have produced Green Plan alongside system partners which sets out how the Trust will transition to a Net Zero NHS and achieve the ambitious Net Zero targets.</p> <p>The Green Plan lays out the Trust's nine areas of focus. Each sub-section details the purpose and proposed actions for the Trust to reduce carbon emissions.</p>
	<p>Improve access in a prompt responsive and suitable manner.</p>	<p>Support the implementation of the policy framework - improving Access policy implementation across all 3 directorates.</p>	<p>We are using a Quality Improvement approach to waiting list management, focused currently on our high priority services we are working in partnership across LLR to achieve this more effectively. This includes clear access/referral criteria for all services, response to referrer standards; Governance via "deep dive" sessions, reported through to monthly meetings and then to LPT Access Committee.</p>	<p>Access Policy in place with implementation plans in place in all Directorates</p> <p>Delivery against trajectories reviewed in Exec Performance meetings</p>

	<p>Ensure that the Standard Operating Procedures governing access are being adhered to consistently across all areas.</p>	<p>Ensure all services have a Standard Operating Process for access.</p>	<p>All service Standard Operating Procedures are either in final drafting or have been updated to reflect the current Access Policy. Preliminary discussions are now taking place about Equity of Access to services.</p>	<p>Standard Operating Procedures in place in all Directorates</p> <p>Work underway to support assessment of equity of access across protected characteristics.</p> <p>Equity data (once available) will drive development of improvement plans to ensure any identified variation is addressed.</p>
	<p>Improving data quality and performance monitoring in relation to access.</p>	<p>Quality Improvement focused approach to waiting list management including implementation of validation and Patient Tracking Lists.</p>	<p>Service PTL processes are established, supported through our Quality Improvement Approach. Improvement trajectories established and reported at deep dive sessions.</p>	<p>PTL processes in place in all services/directorates</p> <p>Agreed trajectories in place for all priority services</p> <p>Performance against improvement trajectories is considered at bi-monthly FPC and in Executive Performance Reviews.</p>
	<p>We will proactively work with Northamptonshire Healthcare Foundation Trust (NHFT) on a single approach for both Trusts, optimising the shared learning approach, building on the learning from post Covid 'reset and rebuild' work.</p>	<p>Develop joint Quality Improvement strategy with NHFT.</p>	<p>Single approach to QI in place within LPT and an opportunity to refresh at a strategic level is being revisited as part of reset and rebuild. The potential to align transformation and trust wide QI is being explored and the implementation of the QI methodology for the trust is being revisited.</p>	<ol style="list-style-type: none"> 1.New group priorities have been agreed with NHFT with opportunities for shared QI projects and learning. 2.NHFT are joining LPTs QI café in September to develop a joint approach 3.LPT staff have completed QSIR training with NHFT.
	<p>We will set clear priorities for Quality Improvement initiatives.</p>	<p>Develop and implement the Trust's priorities for Quality Improvement.</p>	<p>The Trust Head of Quality, clinical governance and QI has reviewed the projects on Life QI and is working to align with the Trust strategic priorities. QI is being realigned with the Trust transformation programme to share resource, capacity and expertise and ensure quality is at the centre of transformation.</p>	<p>The QI team have developed a prioritisation system and aligned LifeQI priorities to this. This will go through the new Transformation and QI delivery group in October for agreement.</p> <p>The QI team have supported the Reduction in reliance and Agency for Quality and Financial games programme as a key trust wide priority.</p>
	<p>Widening the opportunities for more people to participate in research to inform future health and social care.</p>	<p>Strengthening research projects across a wider range of partnerships crossing organisational boundaries.</p>	<p>LPT and NHFT are Category A Partner organisations of the Clinical Research Network, with separate research delivery contracts. The current Senior Research Nurse at NHFT has met with the R&D Lead at LPT, to discuss opportunities where both Trusts can deliver the same Portfolio study and learn from each other. Developing areas of clinical and service priority of joint concern, and therefore develop potential locally-led research projects from this, with suitable leadership and resource.</p>	<p>The R and D team continue to work with NHFT to seek opportunities for joint portfolio studies.</p> <p>Newly appointed R&I Lead at NHFT will meet monthly liaison with R&D Lead at LPT</p> <p>Key principles of draft LPT R&D Plan shared with NHFT Lead</p> <p>Both organisations are working on study pipeline and recruiting to staff positions.</p> <p>Both organisations guaranteed 90% of existing funding for CRN delivery infrastructure for the next three years.</p>

