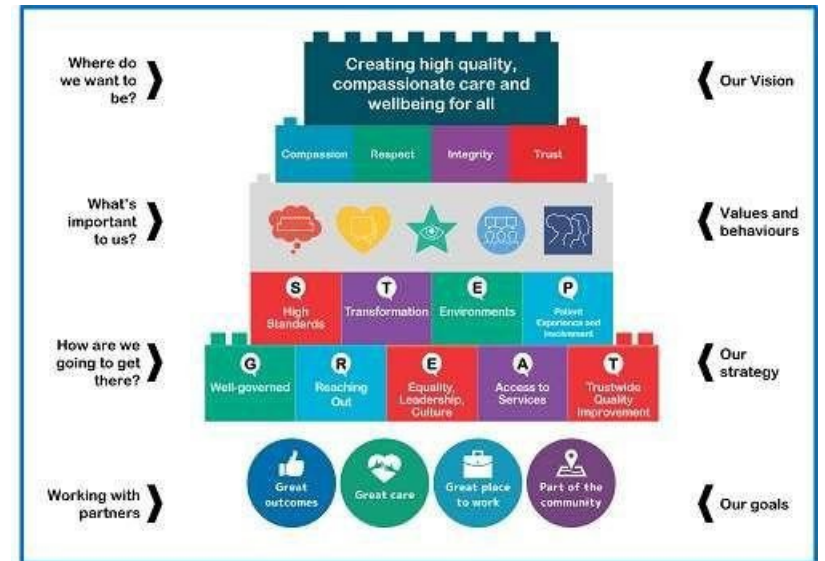


# STEP UP TO GREAT STRATEGY – 2021/24 & LEICESTERSHIRE PARTNERSHIP TRUST STRATEGIC PLAN – 2023/24

## Qtr1 Highlight Report

(Apr, May and Jun 23)

SRO - David Williams, Group Director of Strategy & Partnerships



# OUR VISION

Is to create high quality, compassionate care and wellbeing for all. We will continue working towards this vision, by developing a great organisation, that is able to deliver great outcomes, with great people as part of our local communities.

## Our goals



### **Great health outcomes**

For everyone in every community across Leicester, Leicestershire and Rutland (LLR). Tackling health inequalities, working together to ensure there are safe, healthy places for people to live and work are important elements of the integrated care we can provide with others.



### **Great care**

We want every service user and their family to have great care, we are playing our role in that by improving on the areas we know we need to improve on and seeking feedback and learning from our communities on other changes and improvements we can make.



### **Great place to work**

Our 6,500 staff and volunteers provide services through over 100 in-patient and community settings, as well as in people's homes, across Leicester, Leicestershire and Rutland. We want to continue to develop LPT to be a great place to work and be an employer of choice. Having a great place to work helps us all to keep improving the quality of care we can provide.



### **Part of the community**

With over 76,000 health and care employees in LLR we play an important role in our communities. The actions we take along with other providers, local authorities, universities etc. have a real influence on how we develop our communities. Through our strategy we are committing to think more about the impact on our communities and the decisions we can make to benefit them.

## We will know we are successful when:

- We are consistently receiving positive feedback from the people who use our services and their carers. We will also be receiving assurance and positive feedback from our core regulators such as the Care Quality Commission (CQC) that we are providing a high standard of care.
- People can live at home for longer and better manage their health and well-being with support from health and care providers. People are supported to restore their health, wellbeing and independence after illness or hospital admission
- Patients/service users and staff share positive experiences, demonstrating patient-centred and joined up high quality, safe care which is accessible when and where it is needed.
- Children, young people and their families share decision making with our staff and have easy access to the right support, at home and at school.
- Our Children and Young People (CYP) are accessing care when they need it.
- More support for people with a learning disability to improve their health and wellbeing is available in the community, our service users tell us they are happy with our services, and fewer people with a learning disability need to be admitted to hospital.
- Our service users with Autism have a positive experience of our services and are supported to live well in the community. They will wait less time to receive care when they need it and will be supported to stay out of hospital as much as possible.
- We have the technology and support for staff and our communities to access services digitally that improves care, with support and alternatives for those who cannot.
- We have welcoming, clean and safe buildings that reduce risk of harm to patients and improve their privacy and dignity.
- Patient involvement is at the core of everything we do and outpatient satisfaction, and feedback reflects this.
- We feel clear and confident about how we are governed, and we use these practices consistently across the Trust. When we are an outstanding Well Led organisation, delivering best practice governance across our Group and system, demonstrating agile and effective decision making.
- We are positively contributing to local communities to help reduce inequalities.
- We value inclusive, compassionate behaviours and show pride in our collective leadership and in our Trust.
- We are delivering services that meet people's needs and are accessible to all, evidenced through meeting our local and national targets.
- All our people are empowered to lead and make improvements in their everyday work. When performance and outcomes are measured and monitored in a systematic manner that leads to quality improvements being delivered and sustained.



## Key commitments:

- We will deliver safe care and reduce harm.
- We will reduce variation and create a safety learning culture.
- We will transform our patients' experience of care - making no decision about them, without them.
- We will create the conditions for quality.

## Aims:

- We will demonstrably improve compliance against Health and Social care core standards and CQC registration requirements.
- Development of an implementation plan for the local National Patient Safety Strategy- includes pressure ulcers, deteriorating patient, self-harm, IPC, suicide prevention and least restrictive practice.
- Implementation of the Shared Decision-Making Framework

Organisational Risk Register (Apr 23)	
A lack of capacity within the workforce model and a high vacancy rate is reducing our ability to assess and follow up patients in community mental health services in a timely way, impacting on the safety of care and the mental wellbeing for our patients.	Ref No: 86

Lead Director: Director of Nursing, Dr Anne Scott

We know we are great when we have/are.....	Evidence from this Quarter (Q1 2023/24)	Summary of our focus next quarter
A continuous focus of creating high quality compassionate care for all	Established 3 improvement programmes with NHFT for Pressure Ulcers, Deteriorating patients and mental health patient observations. <i>“Working across the group is enabling learning and sharing to strengthen change ideas and evidence-based interventions which should impact on improved safety and patient outcomes.”</i> <i>Anne Scott, Director of Nursing.</i> <i>Valuing High Standards Accreditation (VHSA) complete in FYPCLDA</i>  <i>Impact: Through the VHSA services are better able to self-identify areas for quality improvement which is helping reduce variation in care and creating the right conditions for quality care.”</i>	CHS and MH will complete their Valuing High Standards Accreditation
Living our values & leadership behaviours	Culture survey outputs being analysed to allow next stage of working with change champions and development of draft patient safety plan.	Draft plan presented to applicable committees and groups for consultation and agreement
Service user and employee engagement	Trust wide planning day held 19/06/2023 with staff and service users to identify priority areas for the Patient Safety Incident Response Plan. All three directorates presented data and key areas of focus to inform the plan. 6 priority areas identified and agreed on.	Draft plan presented to applicable committees and groups for consultation and agreement
Team working. Co-operation and integration	Two successful meetings to agree next steps for the development of provider collaboratives through the NHS E Innovator Scheme  Continued meetings with University of Leicester to further our partnership working  Successful launch of Public Consultation for new Section 75 with Children's Services at Leicester County Council	Agree scope, governance and structure of potential new collaboratives including which partnership arrangements can move into collaboratives.  Agree the final MOU with UoL  Complete consultation and publish feedback & next steps



## Key commitments:

- Progress our Ageing Well accelerator work.
- Address our waiting lists, particularly in relation to continence and Neuro.
- 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
- Increase the focus on Learning Disability.
- Establish Neurodevelopmental Transformation Programme and Leicester, Leicestershire and Rutland (LLR) Autism service (children, young people and adults).
- Respond to the outcome of the public consultation on mental health services and support.
- Lead a clear digital plan that makes sure digital transformation is owned by the Trust.

## Aims (CMS):

- Remain focused on ensuring safe high-quality delivery of care by reviewing our clinical staffing models.
- Develop and implement a Winter plan that is integrated into system delivery
- Progress our Ageing Well accelerator work
- Address our waiting lists, particularly in relation to continence and Neurodevelopmental

Lead: Tim O'Donovan

We know we are great when we have/are.....	Evidence from this Quarter (Q1 2023/24)	Summary of our focus next quarter
<p>Remained focused on ensuring safe high quality delivery of care by reviewing our clinical staffing models</p>	<p>All eight Transformation Programmes have clear defined Programme Leads, structure and governance arrangements set out in the above programme plans.</p> <ol style="list-style-type: none"> <li>1. Better Mental Health for all</li> <li>2. Workforce, recruitment, and agency</li> <li>3. CHS Transformation</li> <li>4. FYPCLDA Transformation</li> <li>5. Estates Transformation</li> <li>6. Digital Transformation</li> <li>7. Patient safety Transformation</li> <li>8. Enhancing value</li> </ol> <p>Programme briefs agreed and associated Quality Improvement embedded. Two workshops have now taken place to explore new ways of working with strategy, planning and transformation.</p> <p><i>Impact: Strong reporting structure with route to track progress and consider solutions to reduce escalation of risks.</i></p> <p><i>Improved LPT services resulting in better outcomes for people using them.</i></p> <p><i>Strengthening internal partnership working with the aim to collaborate and develop longer term plan for the future</i></p>	<ul style="list-style-type: none"> <li>• Delivery of Trust wide transformation priorities in line with defined programme plans and monthly reporting to Transformation and Quality Improvement Delivery Group</li> <li>• Undertake effectiveness review of Transformation and Quality Improvement Delivery Group</li> <li>• PMO dashboard established to monitor delivery</li> <li>• Transformation training need analysis to determine needs across Trust</li> <li>• Full Implementation of the recommendations of programme resource review</li> <li>• Hold monthly review meeting with ICB PMO</li> <li>• Hold monthly review meeting with NHFT PMO &amp; Transformation</li> <li>• Further engagement across Trust &amp; ICB</li> </ul>



## Key Commitments

- Make the Trust a better place to work by ensuring staff are safe and healthy, physically and mentally well and able to work flexibly.
- Take action to ensure our Trust engages staff well.
- Recruiting and retaining our people.

## Aim:

- We value inclusive, compassionate behaviours and show pride in our collective leadership and in our Trust

Lead Director: Director of HR and OD, Sarah Willis

We know we are great when we have/are.....	Evidence from this Quarter (Q1 2023/24)	Summary of our focus next quarter
<p>Continuing to work together with NHFT to focus on Against Racism, leading to improvements in our Workforce Race Equality Standard (WRES)</p> <p>Seen improvement in our Workforce Disability Equality Standards (WDES) as well.</p> <p>Focused on talent management, leadership and organisational development.</p> <p>Improving employment and development opportunities for our Black, Asian and Minority Ethnic people.</p>	<p>Updated WRES &amp; WDES actions following staff survey results and workforce data analysis plan for sign off WRES and WDES action plans at Trust board.</p> <p>LLR Active Bystander programme delivered in May/June with LPT. 16 colleagues trained and helping with the creation of inclusive and just cultures across Directorates.</p> <p>Equality Delivery System (EDS) 2022 implementation underway – grading and development of improvement plans linking to WRES/WDES for domains 2 and 3.</p> <p><i>Impact: By including the views and experience of our staff we aim to create equality for the whole of the workforce and those using our services.</i></p> <p>Progressed Together Against Racism with Group with a specific focus on inclusive talent management and Zero Tolerance campaign/support.</p>	<p>Sign off WRES and WDES action plans at Trust board.</p> <p>LLR Active Bystander programme being delivered in May/June with LPT colleagues trained and helping with the creation of inclusive and just cultures across Directorates.</p> <p>EDS 2022 implementation underway (grading and development of improvement plans linking to WRES/WDES for domains 2 and 3)</p> <p>Progress Together Against Racism with Group with a specific focus on inclusive talent management and Zero Tolerance campaign/support</p>
<p>Improved our culture, leadership and inclusion with the Our Future Our Way programme, and embedding our Leadership Behaviours for All staff.</p>	<p>Series of 12 culture questions co-created with change leaders using language and references in their own words avoiding corporatisation.</p> <p>Our Future Our Way (OFOW) Discovery Phase near completion, data analysis and triangulation of information from roadshows, focus groups and surveys shared with reference group inc. px safety and experience teams to support the px safety plan.</p> <p>Responses/engagement to survey: 496 total (249 online 247 paper); focus groups: 228 total (123 attendance, 105 paper)</p> <p><b>Total engagement 724 staff</b></p>	<p>OFOW - Focus group sessions Board interviews Roadshows</p> <p>HWB Roadshows continue.</p>





## Key Commitments:

- 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 organisation.
- Deliver continuous development of patient/carer participation and involvement.

## Aim:

- We will make it easy and straight forward for people to share their experiences
- We will increase the numbers of people who are positively participating in their care and service improvement
- We will improve the experience of people who use or who are impacted by our services

Lead Director: Director of Nursing, Dr Anne Scott

We know we are great when we have/are.....	Evidence from this Quarter (Q1 2023/24)	Summary of our focus next quarter
Making it easy and straight forward for people to share their experiences	<p>Process finalised. Recruitment to Lived Experience Partner and Patient Safety Partner roles launched. Over 20 expressions received Friends and Family Test (FFT), results demonstrate a steady increase in satisfaction in the overall care and treatment provided by the Trust. Of these responses 88% (Q1 83%) reported a positive experience of care and a 7% (recording negative or poor experience of care).</p> <p>As part of the Trust's Change Leader Programme, patient experience has been a key focus. Leaders have undertaken a deep dive into the experiences of patients and carers and aligned this to the staff experience data. As a result the priorities for the Change Leaders have been identified and work is being planned to better utilise experience data for improvement and transformation.</p>	<p>Interviews and onboarding to commence in Q2. Lived Experience and Patient Safety Partners undertake induction and mandatory training</p> <p>Allocate Lived Experience Partners to: Directorate Level Groups</p>
Increasing the numbers of people who are positively participating in their care and service improvement	<p>Staff Ulearn Training Current LPT staff carers awareness training reviewed draft version published. This module/training has been re-developed with carers and staff in line with Carer and staff priorities following focus groups that were held throughout Jan/Feb 2023, the LLR THINK family resources, videos and other system offers will thread throughout the module making it LLR specific.</p> <p>LA Young Carers Awareness Training - 3 further sessions have been planned for this year for all NHS LLR staff. Completed promotional work across LPT.</p> <p>Recruitment to Lived Experience Partners (carer specific roles) commenced. <i>Impact: Patients are truly embedded in policy creation, patient pathways and processes that will influence services delivery and align with the needs of the local population.</i></p>	<p>Embed carers passport and awareness across Trust.</p> <p>Development of Carers Charter</p> <p>Local Authority Training offer for staff on Young Carers</p> <p>Roll out Carers Awareness training programme for staff.</p> <p>Commence delivery of Triangle of Care Standards roll out.</p> <p>Phased rollout - Delivery of LLR Carers Strategy</p>
Improved the experience of people who use or who are impacted by our services	<p>Each directorate has now agreed terms of reference for their own patient and carer experience group.</p> <p>Initial codesign meeting has taken place within DMH with staff and service users and carers to establish co-production groups. It has been agreed that 9 individual groups will be established, all being co-chaired by a Lived Experience Partner and Service Lead. All groups will report into the directorate-level patient and carer experience group.</p>	<p>Delivery of directorate groups &amp; coproduction groups</p> <p>Quarterly reports to People's Council &amp; Youth Advisory Board</p> <p>Commence Peer review programme for complaints, duty of candour and incidents.</p> <p>Training needs analysis with directorates to inform bespoke training offer for staff.</p>



## Key Commitments:

- Providing leadership for ongoing improvement across our Well Led framework, informed by learning from others
- Contributing to the delivery of joint governance objectives under the Group Model with NHFT.
- Contributing to the development of ICS governance and risk systems.
- We have a clear data quality framework and plan that guides our delivery of great data quality.

## Aims:

- Providing leadership for ongoing improvement across our Well Led framework, informed by learning from others.
- Contributing to the delivery of joint governance objectives under the Group Model with NHFT.
- Contributing to the development of ICS governance and risk systems.

Lead Director: Director of Corporate Governance

We know we are great when we have/are.....	Evidence from this Quarter (Q1 2023/24)	Summary of our focus next quarter
Spending public money in the most efficient & effective way	<p>Terms of reference reviewed and agreed at first Enhancing Value meeting &amp; at SEB Attendees for Enhancing Value meetings confirmed.</p> <p>Introductory meeting held, programme &amp; value in healthcare approach discussed.</p>	Develop 2023/24 work programme including links to clinical & estates strategies and prioritise pathways for review.
Engaging our staff in making sure we have a clear & consistent understanding of what good data quality is	<p>Training and awareness campaign delivered via Communications Team.</p> <p>Regular chasing of staff implemented to support meeting DSPT achieved &gt;95% mandatory training requirement. Data Protection and Toolkit Final submitted June 30<sup>th</sup> 2023.</p>	Draft plan presented to applicable committees and groups for consultation and agreement
A clear & deliverable Data Quality Plan that supports us to deliver the framework	<p>A number of actions from the Data Quality Plan were completed by the deadline</p> <p>Awaiting update from Sharon/Matt/Sarah Work was undertaken to reset the SNOMED project and to redefine and agree the resource commitments needed from stakeholders.</p> <p>Completion of Coding Assurance SOP.</p> <p><i>Impact: Improving data quality will ensure our services are addressing the needs of a local population, improve service delivery and outcomes for patients.</i></p>	<p>Implementation of SNOMED Phase 2</p> <p>Delivery of OPCS 4.11 (Clinical coding)</p>



## Key Commitments:

- Ensure a sustainable local community
- Create a sustainable planet
- Support the reduction of poverty through employment and job creation, anchoring wealth in LLR through our procurement processes
- Positively supporting economic and regeneration policies and practices that will support the most vulnerable within our society.

## Aim:

- Support a sustainable local community in LLR
- Positively support environmental, economic & regeneration improvements, policies and practices in LLR
- Supporting our most vulnerable in society; raising health equity across LLR

Lead Director: Group Director of Strategy & Partnerships, David Williams

We know we are great when we have/are.....	Evidence from this Quarter (Q1 2023/24)	Summary of our focus next quarter
<p>Positively contributing to local communities to help reduce inequalities.</p>	<p>We have been working with Leicester College to deliver the Sector-based Workforce Academy Programme (SWAP) with the aim of upskilling local people wanting to apply to work for the NHS. Weekly LPT vacancies shared with college students with support and guidance given around applying for roles and preparing people for interviews. LPTs presentation includes the promotion of volunteering opportunities allowing people to 'try (roles) before they apply'.</p> <p>LPT has worked with Leicester City Council to develop our social value commitments as part of the section 75 agreement, delivering improved outcomes to children, young people and their families in Leicester City.</p> <p><i>Impact: The S&amp;P team routinely supports volunteering opportunities at the psychiatric inpatient unit, contributing towards our SV commitments. This has a positive impact on staff wellbeing, helps to deliver high quality inpatient services and those directly using our services.</i></p>	<p>As part of our Social Value Charter and Pledges:</p> <p>Our recruitment and development plans focus specifically on how we can support local communities to work for us</p>





## Key Commitments:

- Therapeutic environments that improve outcomes for people using services by supporting safe, joined up, person-centred care.
- A positive and effective working environment for all staff building on the learning from post Covid 'reset and rebuild' work.
- Greener NHS buildings and identifying our route to net zero.

## Aim:

- Therapeutic environments that improve outcomes for people using services by supporting safe, joined up, person-centred care
- A positive and effective working environment for all staff
- Greener NHS buildings and identifying our route to net zero

Lead Director: Group Chief Finance Officer, Paul Sheldon

We know we are great when we have/are.....	Evidence from this Quarter (Q1 2023/24)	Summary of our focus next quarter
Therapeutic environments that improve outcomes for people using services by supporting safe, joined up, person-centred care	<p>New Invida system in place. Drawing database being updated following individual site surveys.</p> <p><i>Impact: This supports the delivery of the Estate Strategy development.</i></p> <p>The programme addressed dormitory style accommodation in DMH. Capital schemes completed: Willows (Cedar/Sycamore), Bosworth, Thornton, Ashby, Aston, Evington (Gwendolen, Wakerley, Coleman), and Welford</p>	<p>Compliance with National standards for Food and Nutrition</p> <p>The current Dormitory Eradication works is continuing with the provision of two new extensions to the existing wards of Langley and Kirby. By reintroducing new ensuite bedrooms here mitigates some of the reduction as a consequence of the dormitory programme.</p> <p>On-site foundations and ground floor works have already completed to these two extensions at Langley and Kirby. Construction of external walls have commenced.</p>
A positive and effective working environment for all staff	<p>Staff engagement really positive with events, regular briefings and new newsletter.</p> <p><i>Impact: Improve staff morale, staff retention rates and retain organisational memory.</i></p>	<p>Maintain high staff engagement.</p> <p>Invest in staff training.</p>
Greener NHS buildings and identifying our route to net zero	<p>Systems and processes in place for the development through Estates workplan.</p>	<p>Publish the Estates Work Plan</p>



## Key commitments:

- Improve access in a prompt responsive and suitable manner.
- Ensure that the Standard Operating Procedures governing access are being adhered to consistently across all areas.
- Improving data quality and performance monitoring in relation to access.

Medical Director, Dr Saqhib Muhammad

We know we are great when we have/are.....	Evidence from this Quarter (Q1 2023/24)	Summary of our focus next quarter
<p>Identifying the barriers to equitable access.</p> <p>Determining the link between local barriers to access and health inequalities.</p> <p>Developing a best practice approach to supporting community organisations to address these barriers.</p> <p>Embracing the role of cultural brokerage in reducing barriers.</p> <p>Improving how people access our services.</p> <p>Reviewing access targets.</p>	<p>Review of the Access Policy initiated, and comments/updates to be incorporated into updated policy. Access Policies of other trusts located and will be used to inform the updated policy.</p> <p>Reporting to Access Delivery Group reviewed and new formats proposed to maximise links to local and wider organisational level reports and so reduce duplication, minimise risk of inconsistent reporting and consider opportunities for improvement.</p> <p><i>Impact – improved management of waiting lists/times with subsequent reduction in waiting times.</i> CCIO and Head of Information are members of Access Delivery Group, these links will be used to support accurate and timely data capture.</p> <p>There has been a delay in re-establishing the Access Delivery Group due to operational pressures. The Project Plan has been revised and new dates for key deliverables agreed.</p> <p><i>Impact – high quality, consistent data to support decision-making and early warning on areas of concern enabling rapid response.</i></p>	<p>Complete review and issue updated policy</p> <p>Updated reporting focus agreed to include delivery against trajectories and service specific plans/outcomes</p> <p>Build updated access reports considering work in Q1 and re-establish regular submission to appropriate committees.</p>



## Key commitments:

- 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.
- We will set clear priorities for Quality Improvement initiatives.
- Widening the opportunities for more people to participate in research to inform future health and social care.

## Aims:

- We will proactively work with NHFT on a single approach for both Trusts, optimising the shared learning approach
- We will set clear priorities for Quality Improvement initiatives
- We will ensure that the infrastructure supporting Quality Improvement is effective and sustainable
- We will ensure that the Quality Improvement is embedded
- We will research

Lead Director: Director of Nursing, Dr Anne Scott

We know we are great when we have/are.....	Evidence from this Quarter (Q1 2023/24)	Summary of our focus next quarter
<p>Setting clear direction and priorities</p> <p>Bringing clarity to quality</p> <p>Measuring and publishing quality</p> <p>Recognising and rewarding quality and learning</p> <p>Maintaining and improving quality</p> <p>Building capability for improvement</p> <p>Staying ahead</p>	<p>The Group blended training model has been implemented with NHFT (and the wider system) invited to access LPT’s QI in a boxes and quarterly QI Café’s. The delivery of the QSIR programme is in development, with the focus on upskilling LPT staff to be able to deliver an in-house QSIR programme for the benefit of the wider system and NHFT. Some delay has been experienced to delivery due to the cancellation of QSIR training planned for April 2023. It is expected that from 2024, 2 programmes per year will be delivered by LPT.</p> <p>An additional 131 people trained have been trained in QI methodology through the QI in a Box programme delivered by the WelmpoveQ team in Quarter 1.</p> <p>QI for Line Managers supporting the trusts leadership behaviors remains in development and to be included in the OD Line Managers Pathway from August 2023.</p> <p>E- learning package, planning for content has commenced, currently sourcing licenses for Adobe Captivate to create the package, for delivery in September 2023.</p> <p>Strengthening the use of data for improvement as part of the new board performance report and trust wide use of statistical process control charts</p> <p>The trust wide approach for QI, PMO and transformation has been implemented and delivered through the Transformation and QI Delivery Group via an agreed model, aligned templates and links via the staff intranet between transformation and QI pages.</p> <p><i>Impact: This ensures that we continue to grow our capability and capacity as an organization to undertake meaningful improvement for the benefit of all. Improved directorate oversight of QI and transformation programmes. Embedding of an integrated approach is enabling the right change methodology to be applied, supporting our learning as an organisation.</i></p>	<ul style="list-style-type: none"> <li>• E-learning package to be developed.</li> <li>• Regular reporting to be established for Community Health Services Directorate.</li> <li>• Performance Update to provide assurance</li> <li>• Continue to explore joint opportunities with NHFT delivery of the QSIR programme is in development, with the focus on upskilling LPT staff to be able to deliver an in-house QSIR programme for the benefit of the wider system and NHFT.</li> </ul>