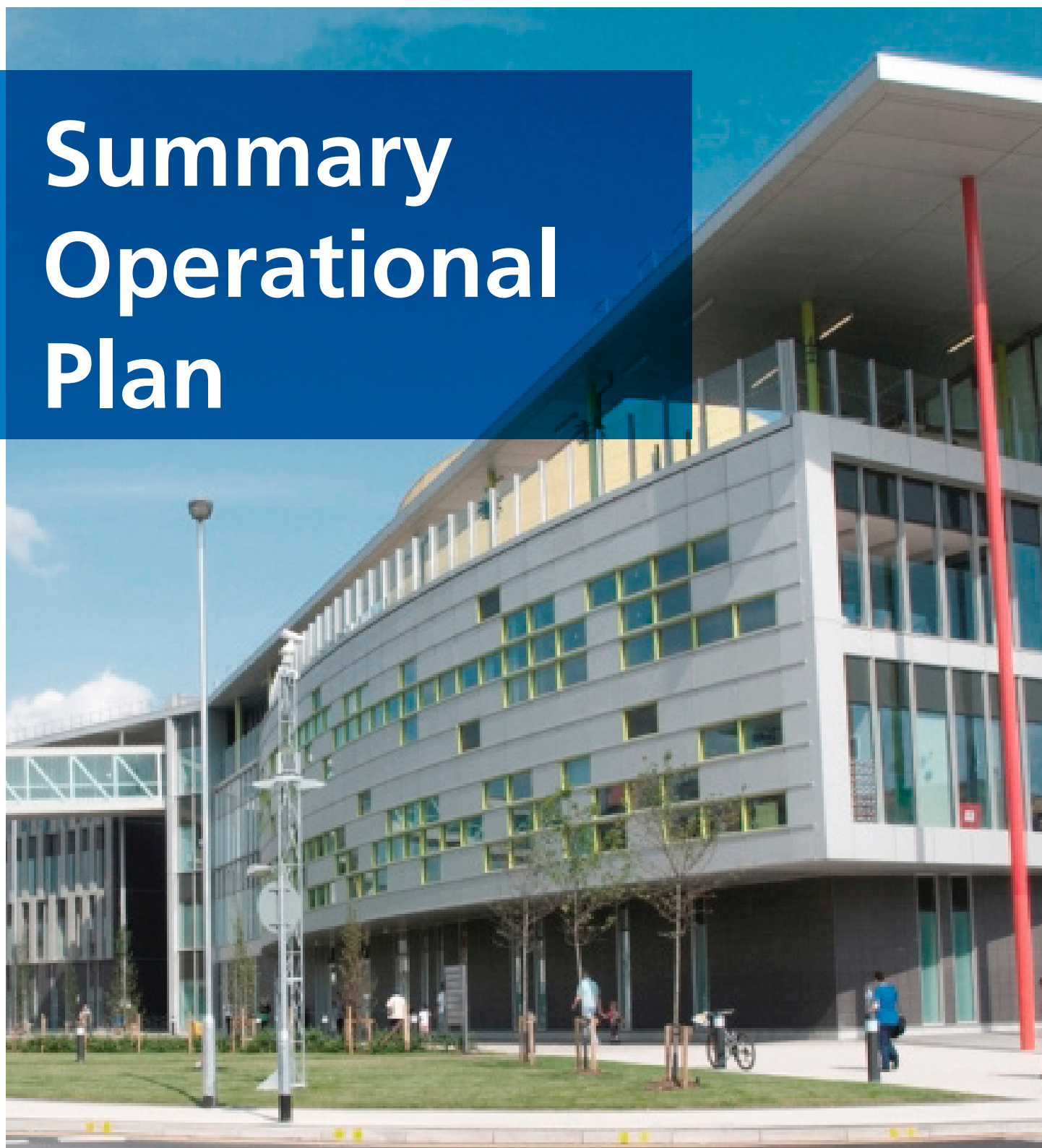




**2017/18 – 2018/19**

# Summary Operational Plan





# Introduction

This is the summary Operational Plan for Central Manchester University Hospitals NHS Foundation Trust (CMFT) for 2017/18 – 2018/19. It sets out how we plan to improve the quality of our services, how we will ensure that we have the right workforce in place to deliver those improvements and how we will manage our finances so that we can ‘balance the books’.





# About Us

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**CMFT is an integrated health, research and teaching hospitals group with a comprehensive range of services, an extensive research portfolio and state-of-the-art facilities.**

We are the leading provider of hospital, community and specialist health services for Manchester and Trafford. We treat more than a million patients every year, and our hospitals are home to an outstanding team of clinicians, nursing and support staff, all committed to providing safe, high quality and compassionate care. We are also proud to be a major teaching hospital, training the health professionals of the future.

We became a Foundation Trust in 2009 and are responsible for running a family of six hospitals across central Manchester and Trafford. We also provide adult and children's community services for central Manchester and city-wide services for children, dentistry and sexual health.

These hospitals are:

- Manchester Royal Infirmary (MRI) – large acute and specialist hospital
- Saint Mary's – specialist women's and genetics hospital
- Manchester Royal Eye Hospital (MREH) – specialist eye hospital
- Royal Manchester Children's Hospital (RMCH) – specialist children's hospital
- The University Dental Hospital
- Trafford Hospitals – local hospitals serving the population of north Trafford.

Our vision is:

*'To be recognised internationally as leading healthcare; excelling in quality, safety, patient experience, research, innovation and teaching; dedicated to improving health and wellbeing for our diverse population.'*



# What's Happening Across Greater Manchester

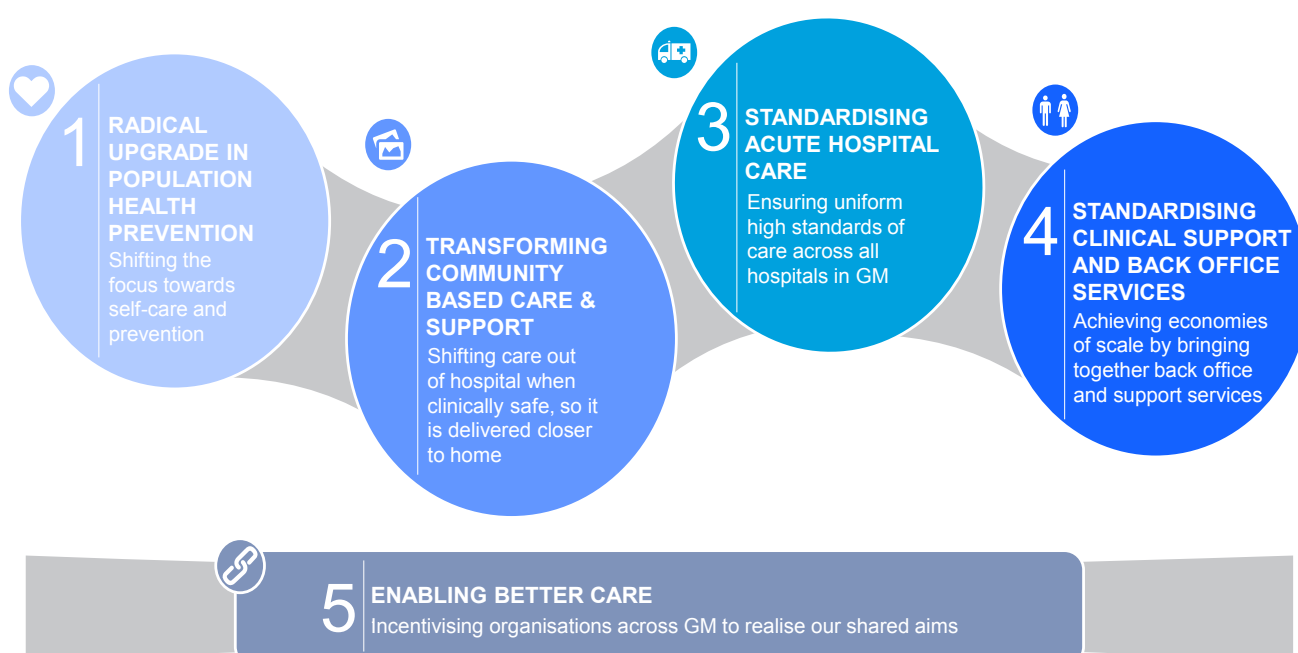
**In February 2015, local councils and NHS organisations from across Greater Manchester agreed that decisions affecting local people should be made here in Greater Manchester.**

This meant that Greater Manchester was the first region in the country to take control of its health and social care budget. Full control of the £6bn budget went 'live' from April 1st, 2016. The body overseeing the work is called the Greater Manchester Health and Social Care Partnership.

Through 2015, major work was undertaken to develop an overarching strategic plan – called Taking Charge – to demonstrate how Greater Manchester would become clinically and financially sustainable within the next five years. This was also informed by the plans – called Locality plans – of each of the ten Greater Manchester areas.

Five themes have been agreed which set the context for planning in each of the localities across Greater Manchester (GM). These are shown in the diagram below:

## A comprehensive framework for transformation underpins GM's Strategic Plan

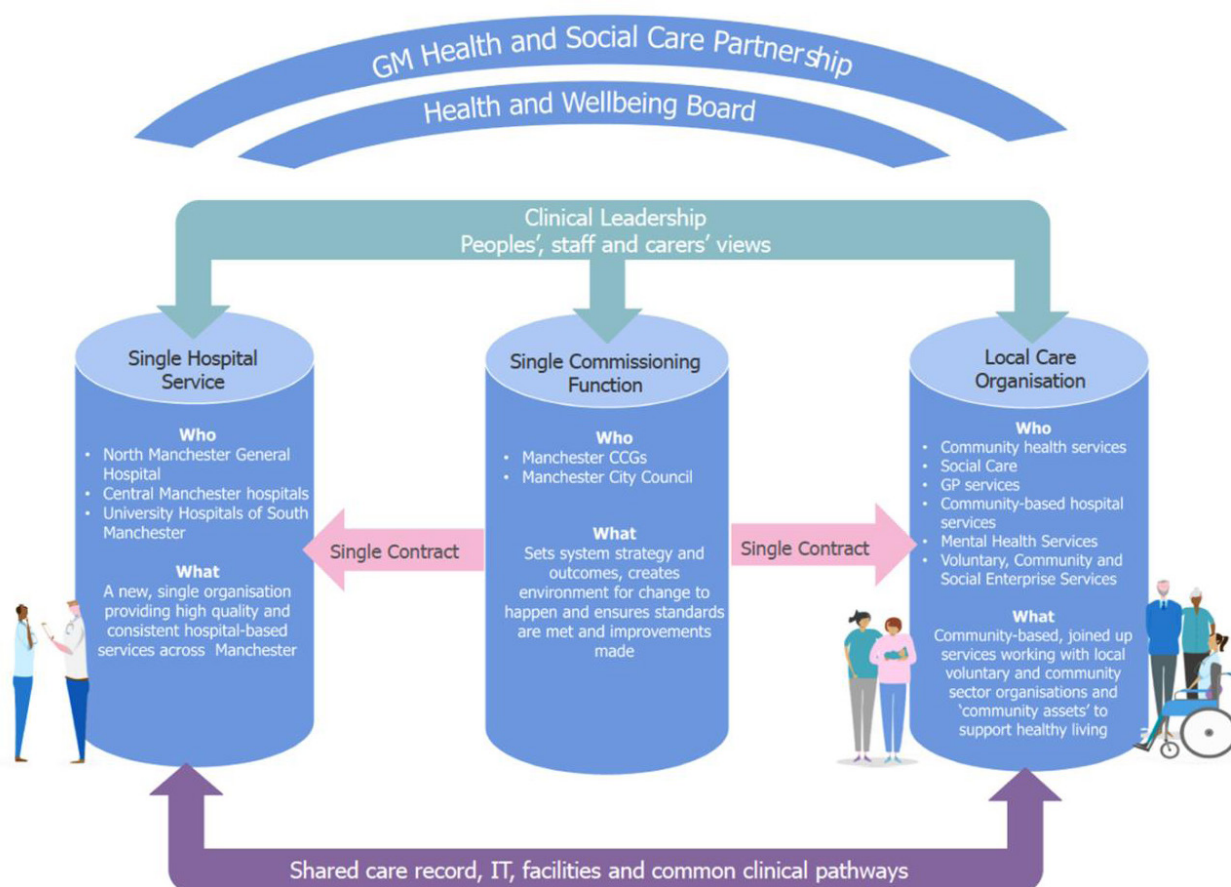


# What's Happening in Our Area?

**'The vision for the future of health and social care in the city over the next five years is set out in Manchester's Locality Plan. It's called A Healthier Manchester.'**

The plan was developed by the organisations which commission health services in Manchester – North, South and Central Manchester Clinical Commissioning Groups (CCGs) and Manchester City Council. It gives details of the city's approach to improving health in Manchester.

Within the locality plan there are three essential parts which together will help deliver the improvements to health and outcomes for patients. These are Single Hospital Service, Single Commissioning Function and Local Care Organisation. The picture below shows how they all fit together.







# What's Happening in Our Area?

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## **A Single Hospital Service:**

The development of a Single Hospital Service (SHS) across Manchester will be the most significant change in the provision of hospital services in the area for decades.

The new Trust will continue to deliver services from the existing hospital sites in Central, North and South Manchester and Trafford, but by bringing the clinical teams together, we will be able to provide better, more consistent hospital care that's fit for the future.

It will also bring opportunities for us to expand our research and education portfolio and attract investment into the region. One of the biggest advantages will be the ability to recruit the best clinicians and researchers from across the country and internationally. Given the wide catchment of many of our services, this will benefit not just people living in Manchester and Trafford, but patients from across Greater Manchester who use our hospitals. The Single Hospital Service is therefore also an important element of the plans being developed through the Greater Manchester Health & Social Care Partnership.

We are creating this new organisation in two stages. Firstly, CMFT and the University Hospital of South Manchester NHS Foundation Trust will join together to create a new Foundation Trust in September 2017. Then North Manchester General Hospital (which is currently part of The Pennine Acute Hospitals NHS Trust) will join the new organisation around 12-18 months later.

## **A Local Care Organisation (LCO)**

The vision for the **Manchester Local Care Organisation** (MLCO) is a partnership between the main statutory health and social care providers in the city and a wide range of non-statutory organisations such as the voluntary, community and social enterprise sector.

Its main aim is to keep people healthy in their own homes and out of hospital as much as possible. It will do this through neighbourhood teams, based in the community and led by GPs to provide joined up care.

The LCO will also concentrate on developing a service that focuses on those people most at need to prevent hospital admissions and reduce any delays in care. It will be the holder of a single contract for the provision of all out of hospital and urgent care services in Manchester.

## **A Single Commissioning Function**

The three CCGs formally became one organisation on 1 April 2017 and are entering into a partnership with Manchester City Council. This new function is called Manchester Health and Care Commissioning. The new arrangement will mean better joined up care for patients bringing together physical, mental and social support.



# What's Happening in Our Area?

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## Other Service Changes

We are also working with the Health and Social Care Partnership to implement:

### Speciality Service Chains

Some services, in particular specialist and tertiary services such as paediatric surgery and ophthalmology, will be standardised across the whole of Greater Manchester. This means that wherever they are provided, they will meet the same standards and use the same pathways and protocols. The Trust, with its specialist knowledge and expertise, will play a key role in establishing and developing a number of these new service chains.

### Healthier Together

Healthier Together is a programme of work to create single services for acute care across UHSM and CMFT. Under this arrangement, clinical teams within A&E, acute medicine and general surgery will come together across both hospitals to form three single teams and each team i.e. A&E, Acute Medicine and General Surgery, will deliver acute care across both MRI and Wythenshawe hospitals working to the same high quality and safety standards. CMFT will be the 'hub site' with 24/7 A&E and a full emergency general surgical team will be on site 24/7 to undertake emergency general surgery. UHSM will be the 'non-hub site', which will have a full A&E department 24/7. The aim is to provide better, joined up care for patients which will lead to better outcomes for patients and reduce variation.



# A Focus on Quality Improvement

**One of our strategic aims is:**  
*Improving patient safety, clinical quality and outcomes.*

**In November 2015, we were inspected by the Care Quality Commission (CQC) and received a rating of 'Good' overall, with our Child and Adolescent Mental Health (CAMHS) services rated as 'Outstanding'. The inspection was a key external assurance mechanism for assessing our quality of care.**

As part of our quality improvement approach, we aim to work with patients, staff and the community to understand and improve quality. The people who use our services and the staff who work here are central to the design and delivery of the Quality Strategy.

- The Strategy provides an overarching framework for a number of work programmes across the Trust and sets out the following broad commitments:
- Ensuring compassionate and effective leaders at every level through a focused leadership strategy
- Delivering the best patient care underpinned by evidence based practice and leading edge research and innovation activity
- Developing effective communication strategies to engage with our staff and users of our services
- Developing a culture of listening and responding, recognising when things go wrong and working quickly to put things right
- Ensuring a culture of being open and honest with staff and people who use our services and holding each other to account for the care we provide
- Ensuring all frontline services delivering care have Board accountability to provide assurance to the public, the Trust to develop a culture which celebrates the achievements of our staff and people who use our services.

The delivery of the Quality Strategy is monitored throughout the year. In order to fully understand the impact of the work delivered, a number of metrics and other information sources such as patient and staff feedback are used and reviewed first by the Trust Quality Committee and then by the Board of Directors.



# A Focus on Quality Improvement

The primary mechanism for feeding back on progress in implementing the Quality Strategy to stakeholders is the annual Quality Report publication.

The delivery of the Quality Strategy is supported by a programme of Quality Reviews and the findings from these have informed our quality plans for 2017/18. Five clinical quality objectives have been set for 2017/18 and, subject to final confirmation, these are:

- Mortality
- Nutrition and Hydration
- The Patient Journey (Capacity and Flow).

In addition to the broad quality commitments, plans will include specific work on the priorities set out in the NHS planning guidance.





# A Focus on Quality Improvement

## Summary of quality improvement plans underway

We are focussing our work in the following areas to improve quality within our Trust and these will continue during 2017/18 to support our five clinical quality objectives for the year ahead:

- Improving the management of, and response to, national clinical audits
- Improving the care experience of patients with a mental health diagnosis
- Reviewing the serious incident review process as part of the CQC action plan and in response to the revised national guidance in 2016
- Strengthening the mortality review process
- Continuing to make progress in reducing the number of nursing and midwifery vacancies, through clear attraction and retention strategies in order to ensure safe staffing is provided in our clinical services
- Continuing our sustained focus on End of Life Care
- Reducing harm continues to be a focus of improvement work across the Trust, with significant process made to reduce the incidence of hospital and community acquired pressure ulcers and hospital acquired infections over the last three years
- Discussing with commissioners about Commissioning for Quality and Innovation (CQUINS) for 2017/18 and 2018/19. We will continue the programme of work undertaken on sepsis during the past two to three years to raise awareness of sepsis, its early detection and treatment with the Accident and Emergency Department (A&E)
- Embedding the new Patient Experience Framework entitled 'What Matters to Me' which focuses on delivering high quality, personalised care
- Implementing a local action plan following the publication of the National Maternity Report in February 2016. We are working closely with one of the seven national pilot sites for maternity choice and personalisation of care
- Work is on-going across the Greater Manchester and Eastern Cheshire Strategic Network to undertake a gap analysis against the recommendations in Better Births and map the configuration of local maternity systems.
- We are an early implementer site for 7 Day Services and work will continue through 2017/18 to deliver the 7 Day Services standards for urgent and emergency care as well as participating in the twice yearly national Self-Assessment Survey administered by NHS England.

# Workforce Planning

**Our future workforce requirements are driven by our vision and strategic aims.**

**We have a People Strategy built around five key principles covering:**

- **Information and policies**
- **Workforce design, planning and succession management**
- **Attraction and recruitment**
- **Motivating, involving and engaging our staff**
- **Talent and performance improvement.**

We use an electronic system for managing shifts across nursing and midwifery services to help deliver safe and efficient care to our patients.

The changes in health services across Greater Manchester, including the Single Hospital Service and Local Care Organisation described earlier, will mean:

- Changes to the size and shape of the workforce
- Different ways of working
- Culture changes
- The need for a more agile leadership model.







# Workforce Planning

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In order to support these changes, we have a detailed Organisational Development (OD) programme which sets out the changes that will be required in culture, roles and leadership skills. The key features of the OD strategy are:

- An inspiring vision focused on quality that builds trust and collaboration
- Clear and aligned goals and objectives
- Engaged staff and dynamic and effective leadership
- Strong patient and customer focus
- Support for innovation, continuous learning and quality improvement
- Effective multidisciplinary team-working, co-operation and integration
- Embedded distributed leadership
- Inclusive leadership
- Articulating and delivering the benefits of a diverse workforce.

We are proud to be a major local employer and have worked with the local community to deliver opportunities for our population. CMFT is one of 11 first wave pilots to deliver the Nurse Associate role which will further strengthen our workforce and support our local employment initiatives. The benefits to us include the opportunity to recruit high quality staff members who have demonstrated they have the required key skills.

A further element of our workforce strategy is the development of an Apprenticeship Strategy. Apprenticeships are undergoing an unprecedented period of reform with the Government setting out stretching targets for growth whilst new funding mechanisms and Apprenticeship Standards are implemented. Our Strategy sets out ambitions, targets and approaches for the development of apprenticeships in CMFT.

In partnership with the University of Bolton, we have developed a non-commissioned nursing programme, in order to increase the supply of newly qualified nurses for CMFT. This will help us address the medium to long term workforce needs. We will also continue to deliver our successful Return to Practice programme to enable nurses to return to the profession.



# Membership & Elections

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**The majority of our Governors are elected from and by our members, with all qualifying members who are aged 16 years or over being able to nominate themselves to stand for election as a Governor during the election process.**

**Elections are held each year for those Governors whose term of office is ending or who have resigned.**

During 2016, 12 Governor seats (Public and Staff) were open for election. With the exception of one Staff Governor (Nursing & Midwifery) seat, all seats open for election were filled.

As part of the ongoing Single Hospital Service programme (subject to approval), during 2017/18 a review will be undertaken to determine appropriate Governor representation in keeping with any resultant changes made to corresponding membership constituencies. Corresponding plans will be developed and progressed to undertake a Governor Election Campaign in order to encourage members to stand for election and fill open/new seats.

Detailed Induction Training for all new Governors is provided each year, which includes the production of a bespoke Governors' Resource Pack and support arrangements for Governors. In addition, Chairman-led Governor Development Sessions are held, which include topical health matters, a review of the Trust's Operational Plan and a detailed review of the Trust's Quality Report, Annual Report & Accounts and External Auditor Reports. The Governor Development Programme is informed via our annual Governor questionnaire and Governor skill mix matrix findings.

Governors are also kept up to date about developments relating to the ongoing change programmes underway across Greater Manchester including the Single Hospital Service, Local Care Organisation and Manchester Locality Plan.

CMFT holds two key membership events each year, the Young People's Open Day and the Annual Members' Meeting. Questionnaires and engagement information packs are given to Governors to help them engage with members who attend these events.



# Membership & Elections

Monthly Chairman's Briefings are issued which provide key information that Governors can then share with members.

Our total public membership is circa 14,400 in addition to a staff membership of circa 13,800. In recent years, and in keeping with our Membership Strategy, we have not pursued a recruitment programme to significantly increase our overall public membership numbers but instead aimed to uphold a majority of public members by addressing any natural attrition and profile short-falls.

Each year, a review of the public membership profile is undertaken and presented to the Governors' Membership Group from which a targeted public member recruitment campaign is held. Past campaigns have seen positive outcomes across targeted profile groups.

As part of the on-going Single Hospital Service programme as mentioned above, during 2017/18 a review will be undertaken to determine appropriate membership representation/constituencies in keeping with any resultant changes. Corresponding plans will be progressed to undertake a public member recruitment campaign to address any public membership natural attrition, constituency and profile short-falls in order to achieve a representative public membership profile of the communities that we serve.





# Our Plans

We have developed a series of strategic aims and key priorities which are our must-dos for the coming year.

## CMFT Plan-on-a-Page 2017/18:

Strategic Aims		Key Priorities for 2017/18
To improve patient safety, clinical quality and outcomes	1	Delivering safe, harm-free care focusing on evidence based pathways, supervision and clinical leadership and embedding CMFT Clinical Standards in day to day practice.
	2	Ensure professionally informed, evidence based nursing and midwifery establishments supported by recruiting and retaining an engaged workforce able to respond to future care delivery needs.
	3	Achieve all key NHS commissioned standards and deliverables, including access and quality outcomes.
	4	Delivery against the Trusts Transformation strategy with the aim to reach the top decile for quality - clinical outcomes, safety, patient and staff engagement & experience and operational efficiency measures.
To improve the experience for patients, carers and their families	5	Deliver well-led compassionate, individualised care in partnership with patients and families in appropriate environments, safeguarding vulnerable people.
To develop single services that build on the best from across all our hospitals	6	Playing our part in transforming the health and social care system through supporting Greater Manchester Devolution, the delivery of Locality Plans (particularly in Manchester and Trafford) and achieving a successful merger with UHSM.
To develop our research portfolio and deliver cutting edge care to patients	7	Strengthen and drive the translation of cutting-edge science into new tests and treatments that benefit patients.
	8	Drive engagement with research through participant recruitment, public and patient involvement (PPI), and communications.



# Our Plans

Strategic Aims	Key Priorities for 2017/18	
To develop our workforce enabling each member of staff to reach their full potential	9	Delivering excellent education and learning with the aim of further developing reputation, innovation and attracting and retaining a highly skilled workforce.
	10	Implement the Organisational Development Strategy, focusing on: developing a high performing, inclusive and values based culture that increases organisational resilience and agility and City of Manchester system leadership and integration (Local Care Organisation).
	11	Implement the people strategy focussing on: workforce information and policies, workforce design and succession planning, attraction and resourcing; staff engagement; talent and performance management.
	12	To deliver the Equality, Diversity and Inclusion Strategy 2016-2019 Action Plan and to develop a strategy for working in partnership with the communities we serve.
To achieve financial sustainability	13	Fully deliver our control total for the year through ensuring short and medium term stabilisation, the full delivery of the identified financial improvement savings target and the on-going management of cash.
	14	To refresh the 'Going Digital' Informatics strategy for 2016-21, following engagement and consultation on this with stakeholders.



# Funding our Plans

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**Our financial plan is at this stage drawn up on the basis of CMFT continuing to operate as an independent organisation, because the financial implications of all the planned changes to health services are not yet clear.**

Based on CMFT's financial performance in the first seven months of 2016/17, and the nationally agreed efficiency target and funding reduction plans, we anticipate that CMFT faces an overall financial delivery challenge of £57 million for 2017/18. Our anticipated gross income for 2017/18 is a little over £1 billion. We need to continue through our 13% cumulative efficiency improvement over the two years 2016-18 to fully restore a stable financial platform for all our services as we move forwards.

This significant delivery challenge will continue to be met from a combination of recovering income from treating the growing numbers and complexity of patients presenting to our hospitals; and from further cost efficiencies as we continue our successes from 2016 with recruiting more substantive doctors, nurses and other clinical professionals and with securing further savings in the costs of the goods and services which we need to use.