



Belfast Health and
Social Care Trust

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Corporate Management Plan 2014– 2015

1. Message from the Chair and Chief Executive:

Delivering, Leading, Improving

In 2013/4 we treated or were involved in the care of:

- 130,405 inpatients
- 810,307 outpatients
- 153,931 Emergency Department attenders
- 110,956 day-case patients
- 669 children looked after by the Trust
- 424 children on the Child Protection register, and
- 5809 domiciliary care packages for older people provided in the community.

We have delivered significant improvements in our services during 2013/4 including the following:

- Re-organisation of **Maternity Services** with the Opening of a Midwifery Unit at the Mater Hospital and the provision of additional consultant input at RJMS;
- Development of **Self-care Haemodialysis** in Knockbreda WTC, the **Linear Accelerator** expansion, the growth of **live-donor transplant work** & introduction of **DCD (Donations after Cardiac Death) transplants**.
- Opening of Helmsworth Court **supported housing for people with dementia**, the development of Maples **supported housing for people with complex disabilities**, the first stage in building the single **Acute Mental Health Inpatient facility** and the planned completion of **resettlement of people** with mental health and learning disability in the community.
- **First Trust Annual Quality Report 2013**, which highlights our progress in Quality and Safety Improvement across Hospital, Community and Home settings.
- The development and implementation of the **Regional Emergency Social Work Service** which provides an out of hours response to all 5 Trusts and all programmes of social care in each Trust. Further information on these and other examples of excellent service delivery and improvement are detailed in the Trust Annual Report and Annual Quality Report.

Looking ahead to 2014/5, the Trust has three key priorities:

- Further improvement in our **Unscheduled Care Services**, addressing Patient Flow, Patient Tracking and Patient Discharge to improve the patient experience in our Emergency Departments, and across all our hospital services;
- Improve the delivery of our **elective (planned) patient and client activity** by balancing the demands of elective and non-elective patient admissions with Trust capacity, led by Service Directorates;
- The further **development of community capacity**, delivering the planned expansion of community -based services to meet people's needs and reduce demand on hospital-based services.

2. Trust Structure and Values

The Trust delivers its services through five Service Directorates:

- **Unscheduled & Acute Care** incorporating Anaesthetics, Critical Care, Theatres & Sterile Services, Emergency Department, Medical, Cardiology, Neurosciences, Imaging, Medical Physics and Allied Health Professions;
- **Surgery and Specialist Services**, incorporating General and Specialist Surgical Services, Cancer & Specialist Medicine Services, Pathology & Laboratory Medicine and Pharmacy & Medicine Management Services;
- **Adult Social and Primary Care Services** incorporating Mental Health, Learning Disability, services for Older People, and Physical/Sensory Disability Services;
- **Specialist Hospitals and Women's Health**, incorporating Maternity Services, Acute and Community Paediatrics, Trauma and Orthopaedics, Gynaecology, Sexual Health & Reproduction, including GUM Services, ENT and Dental Services;
- **Children's Community Services** incorporating Family & Child Care Services, Children's Disability Services, Child Health/Child Care & Social Work Governance.

These directorates, working together with the Corporate Directorates of Human Resources, Medical Director's Group, Nursing & User Experience, Planning Performance & Informatics, Communications and Finance & Estates, are led by the Belfast Trust Board and Executive Team.

The Trust has 5 Values:

1. Treating everyone with **Respect and Dignity**
2. Displaying **Openness and Trust**
3. Being **Leading Edge**
4. Maximising **Learning and Development**

5. Being **Accountable**

Theme 1:A Culture of Safety and Excellence – Objective 2014/15

We will foster an open and learning culture, and put in place robust systems to provide assurance to our users and the public regarding the safety and quality of services.

What we will do in 2014/15	Expected Outcomes by March 2015	Executive Lead
<p>1. We will deliver the Trust’s Quality Improvement Plan, thereby ensuring further improvements are delivered in the quality and safety of services:</p> <ul style="list-style-type: none"> – Part A –Areas for Compliance – Part B – Areas for Improvement – Part C – Improving Patient Experience <p>2. We will ensure a focus on Safeguarding Children in line with the SBNI Belfast Safeguarding Panel Business Plan and the Trust Safeguarding Action Plan.</p> <p>3. We will prioritise mandatory training and review delivery methods.</p> <p>4. We will ensure a safe working environment, and deliver 95% full compliance withBRAAT.</p> <p>5. We will achieve the required compliance with all Controls Assurance.</p> <p>6. We will roll out the plans made for smoke-free Trust sites.</p> <p>7. We will make ‘Being Open ‘a key priority when there are concerns about the quality of care provided.</p> <p>8. We will work towards full compliance with NICE Clinical Guidelines and, where variances occur, do all that is reasonably practicable and highlight issues to our Commissioner.</p>	<p>Deliver improved Compliance on Agreed Standards, Deliver measurable improvements in Quality & Safety, and Ensure an improved Patient/Client Experience in the Belfast Trust.</p> <p>Deliver a Training Plan that addresses the needs of all levels of staff across the Trust in recognising and dealing with child protection, and ensure Trust staff engagement with the relevant aspects of the Child Protection Plan.</p> <p>Improve the delivery of mandatory training to all Trust staff.</p> <p>Ensure 95% compliance with BRAAT.</p> <p>Deliver compliance with all Controls Standards.</p> <p>We will achieve smoke-free Trust sites.</p> <p>Service users and their families will be consistently involved in reviews and investigations. Deaths in hospitals will be reviewed to encourage openness and learning.</p> <p>Develop an Action Plan for all NICE Technology Appraisals.</p>	<p>Medical Director Director of Nursing Director of Social Work</p> <p>Director of Children's Community Services</p> <p>All Directors</p> <p>All Directors</p> <p>All Directors</p> <p>Director of Nursing</p> <p>All Directors</p> <p>Medical Director &All Directors</p>

Theme 2:Continuous Improvement Objectives 2014/15Our commitment: to work in partnership across the community, voluntary, statutory, public and private sections to deliver improvements in service, quality and experience to the people who use our services.

What we will do in 2014/15	Expected Outcomes by March2015	Executive Lead
<p>1. Continuous Improvement Program - We will develop and implement our Directorate plans for Improvement, supported by a Trust-wide Improvement Network.</p> <p>2. Strategic Service Reform - We will develop our plan for New Directions 2, to ensure our integrated services develop in line with Commissioning Direction and the needs of the Trust population.</p> <p>3. We will take forward our transformation agenda, with the continuing development and modernisation of community services and reform of acute services, in line with Transforming Your Care.</p> <p>4. We will deliver the Ministerial targets for 2014/15. Specifically, we will ensure comprehensive engagement across specialty teams and work with HSCB colleagues in relation to challenging areas.</p>	<p>We will:</p> <ul style="list-style-type: none"> - Implement Improvement Plans across Unscheduled Care Services; Implement Elective Activity plans to improve the Patient/Client experience and deliver Ministerial targets; - Deliver the Hospital process reforms, including use of Day of Surgery admission, reduction in LOS, the further development of ambulatory models and revised pathways for patient/client care; - Expand the Trust's Community capacity, in line with Commissioner funding, in the key areas of reablement, older person services and mental health services. <p>New Directions 2, developed with Trust stakeholders.</p> <p>Develop and implement a detailed Program of Change List for the Transformation agenda for 2014/5, including key TYC funded outcomes.</p> <p>Implement a comprehensive local engagement process with clinical teams across the Trust.</p>	<p>All Directors</p> <p>Director Planning, Performance &Information</p> <p>All Directors</p> <p>All Directors</p>

Theme 3–Partnerships – Objectives 2014/15

Service Commitment: -we will work collaboratively with all stakeholders and partners to improve health and wellbeing and tackle inequalities and social exclusion.

What we will do in 2014/15	Expected Outcomes by March 2015	Executive Lead
<ul style="list-style-type: none"> • We will develop a structured work experience program for students considering a career in medicine and further develop our relationships with QUB and the Belfast Schools. • We will continue to participate in, and support, the work of regional and local partnerships to secure the engagement of service users and local communities in the delivery and development of services. • We will produce a new PPI framework and revise delivery arrangements, including ensuring accountability mechanisms in place. • We will work with the Belfast Strategic Partnership and its 5 subgroups to deliver on the agreed priorities (Mental Health and Resilience; Drugs and Alcohol; Life-Long Learning; Health Urban Environment and Regeneration; and Early Intervention for Children and Young People), including: - - Develop effective Early Intervention Services via the Belfast Outcomes Group. • We will implement our responsibilities in relation to our role as Corporate Parents. • We will work as part of the Integrated Care Partnerships, in response to the Commissioning Specifications, to ensure the identification & approval of funding, both recurrent and non-recurrent and to implement the agreed service developments which will contribute to the Clinical Priorities. • We will develop a new Research and Development Strategy in line with the regional strategic direction. 	<p>We will restructure our work experience program to reflect the guidance in the GMC Tomorrows Doctors.</p> <p>Produce an agreed Framework for the management of Partnerships in BHSC and take forward the Action Plan with Trust partners in all sectors.</p> <p>Engaged users, carers, volunteers and communities involved in co-design and co-delivery of services through Service Group PPI Action Plans.</p> <p>We will demonstrate effective partnership working through delivery of the Action Plans for each Group eg within Early Intervention for Children and Young People, delivery of the following: -The roll out of 7 Family Support Hubs across Belfast; -A Tender for new Early Intervention Support Services; -Joined up Community Plans in preparation for their implementation during 2015/16.</p> <p>We will meet our target for employability for young people leaving Care and, through our Edge of Care Project, we will increase the range, choice and availability of foster placements for Looked After Children.</p> <p>We will sign off, as part of the ICPs, delivery of the agreed schemes in all 4 Clinical Priority areas (Frail Elderly, Stroke, Diabetes and Respiratory).</p> <p>Increased involvement of clinicians in research.</p>	<p>Medical Director</p> <p>Medical Director Director Planning Performance & Information</p> <p>All Directors</p> <p>Director of Children's Community Services</p> <p>Director Planning, Performance & Information</p> <p>Medical Director</p>

Theme 4 - Our People Objectives 2014/15

Service Commitment: we will achieve excellence in the services we deliver through the efforts of a skilled, committed and engaged workforce

What we will do in 2014/15	Expected Outcomes by March 2015	Executive Lead
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<ol style="list-style-type: none"> 1. We will commence implementation of the Trust's Action Plan on 'Embedding Trust Values' within the organisation. 2. We will implement the Trust's 'Employee Engagement Frameworks' with a particular focus on enhancing and improving the engaging mechanisms with front-line staff. 3. We will implement Phase II of 'Living Leadership' with a focus on leadership / management behaviours and competencies. 4. We will support the implementation of the Trust's Strategic Reform and Modernisation priorities with a particular focus on Unscheduled Care, Elective Performance and Transforming Your Care. 5. We will continue to transform how Transactional HR services are delivered for our internal customers through the rollout and sustainability of the HRPTS platform and through our functional re-design to interface with new regional shared services for recruitment and payroll. 6. We will review our Industrial & Employment Relations frameworks and infrastructures to ensure that our approach supports a culture of modern Partnership working, engagement and communication alongside the delivery of the Trust Strategic Objectives. 7. We will continue to support the improvement of working lives of our Trust colleagues through the provision of a range of Health and Wellbeing initiatives and by supporting line manager capability to manage and engage their teams and individual employees. 	<p>Increased awareness and demonstrable application by staff of behaviours and Trust values.</p> <p>Evidence of increased Employee Engagement through staff surveys and IIP Assessments.</p> <p>Evidence of achievement of performance objectives and through staff surveys.</p> <p>Strategic Reform and Modernisation implemented with the application of agreed change management arrangements.</p> <ul style="list-style-type: none"> • Managers and employees updating information and managing transactions directly full HRPTS self-service deployment • Implementation of a new interface Recruitment model to complement Recruitment shared services • Project plan established to move employee records to a new shared IT platform • Review and co-build of IR machinery and policy with our TU colleagues and key stakeholders • Improved 2 way communication channels across the organisation: better grass roots listening as well as improved communication from the Leadership teams on the vision and Plans. • IR mechanisms are more efficient and productive in addressing employee and employer issues as well as in generating ideas and solutions for business innovation and continuous improvement • Improved capability of line managers in handling workforce issues <p>Valued and healthier workforce where the line manager is capable and empowered to make the difference to individual and team engagement, well-being and performance</p>	<p>Director of Human Resources/Deputy CEO</p>
<p>What we will do in 2014/15</p>	<p>Expected Outcomes by March 2015</p>	

<p>8. We will ensure that best practice in recruitment and employment practices are maintained and continually reviewed through the HR Workforce Governance framework.</p> <p>9. We will review and develop our Workforce Planning processes and capacity to ensure that resource supply and demands are managed in line with Service requirements.</p> <p>10. We will deliver revalidation for medical staff in line with GMC requirements and as part of our drive for quality improvement.</p>	<ul style="list-style-type: none"> • Trust Values are evident through a safe, fair and equitable environment • Colleagues are appropriately skilled to deliver care and managers fulfilling their requirements against both statutory and HSC regulatory requirements. <p>Progress succession and resource planning by Directorate to identify and plan for future requirements. Recruitment, retention and training strategies to ensure skill mix and vacancies addressed accordingly.</p> <p>All doctors will engage in the process to ensure successful demonstration of appropriate standards as set by the GMC. All doctors will meet their revalidation date.</p>	<p>Medical Directorate</p>
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Theme 5–Resources – Objectives 2014/15

Service Commitment: we will work to optimise the resources available to us to achieve shared goals.

What we will do in 2014/15	Expected Outcomes by March 2015	Executive Lead
1. We will develop, and agree with HSCB, an overarching financial plan for 2014/15 to achieve financial balance & deliver actions in accordance with agreed Plans.	Demonstrate financial stability; through achieving a break-even position.	
2. We will engage with Internal Audit and External Audit in the development of a risk-based comprehensive Internal and External Audit Plan for 2014/15.	Demonstrate value for money in all we do, (evidenced by External Audit Review).	
3. We will manage the delivery of agreed elective and non-elective activity, working closely with the Commissioner.	Deliver agreed contract volumes & manage escalation policy. Ensure resources are secured for new service developments agreed with the Commissioner.	Director of Finance & Estates
4. We will further develop the Trust's performance scorecard monitoring process in 14/15 to supplement the performance management systems in place and review how Accountability Process can be improved to deliver improved outcomes.	Support the organisational needs and deliver an improved performance in the following areas: - Safety and Quality performance indicators - Commissioning Plan performance indicators.	Director of Planning, Performance & Informatics
5. We will implement a strategic focus within the ICT Steering Group/ Prioritisation Group to ensure corporate priorities are agreed and deliver to Project Plans/Benefits Realisation Plan.	Deliver successful implementation of projects on time and budget and delivering the expected benefits -needs to be more specific).	
6. We will work with service directorates and invest in new technology to assist with innovation to ensure that the objectives of improved safety, quality and cost effectiveness are delivered.	We will ensure we have infrastructure that supports the demands of a 21 st century health and social care provider.	Director of Planning, Performance & Informatics
7. We will deliver our agreed Capital Plan to maintain and develop our site infrastructure.	Priorities TBC (Karen Brooks).	
8. We will strive to achieve a reduction in the overall carbon footprint resulting from the consumption of energy by the Trust.	Outcome TBC (Eamon Malone).	Director of Finance & Estates
9. We will improve the range of fuel sources including use of renewables for energy and diversification of utilities consumed by the Trust.	Outcome TBC (Eamon Malone).	
10. We will minimise the production of waste and maximise the segregation /recycling of waste to reduce the volume of waste going to landfill.	Outcome TBC (Eamon Malone).	Director of Finance & Estates