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REFORM AND MODERNISATION PROGRAMME

Shaping the Future Together

A Strategic Framework to Deliver Transformational Change

Autumn 2015

HSC Northern Health and Social Care Trust

Contents   Page Number

Foreword from Trust Chief Executive

The Northern Health and Social Care Trust serves a population of 465,000 people who live in urban and rural communities across a diverse geographical area of Northern Ireland. Some of these communities are remote. The Trust provides a full range of social and health care services, tailored to meet the needs of these different communities.

We employ nearly 12,000 staff and strive to deliver timely, high quality services to the people we serve. We often work in partnership with other agencies, community and voluntary organisations and independent providers. We want the people who need and use our services to be at the centre of all we do, offering them a say in how their care is delivered and providing this care as close to their own homes as is practical.

We do however face challenges in meeting the needs of an ageing population with more complex health and social care requirements. We must do this at a time of financial constraint, while also responding to the exciting opportunities that advances in medicine and technology can offer. Advances in medicine often require centralisation of specialist services, while new technologies offer solutions that allow other services to be delivered in people's own homes. We must also deal with changes to our workforce caused by increasing sub-specialisation and shortages of trained staff in key areas.

The Trust has an estate with over 300 individual buildings, some of which are no longer suitable for delivering modern health and care services and others are poorly located for the communities they serve. Advances in information and communications technology require continuous investment if we are to provide modern services and benefit from the opportunities such technologies offer, particularly to more isolated areas.

As an organisation we must respond to a range of important regional reviews and strategies, most notably 'Transforming Your Care,' 'Quality 2020' and 'Making Life Better,' while also delivering change based on lessons from our past experience.

We want to be an open, forward looking organisation that is working for and in partnership with our community, an organisation that can respond successfully to the challenges described in this document. To do this we need a clear vision, and a strategic framework to deliver that vision. This framework is set out in our Reform and Modernisation Programme – RAMP.

We also need to enter into a conversation with the public to achieve consensus on the choices that have to be made, if we are to make the most of the resources available to us and respond to the opportunities and challenges ahead.

Dr Anthony Stevens
Chief Executive

1. About The Trust

The Northern Health and Social Care Trust was established on 1 April 2007. In serving a population of approximately 465,000 people, we provide a wide range of hospital services, community care and social services. The diversity of our work is reflected in our responsibilities and activities, which in 2014/15 included:

- Acting as corporate parents for 688 looked-after children
- Providing 2.6 million hours of domiciliary care
- Seeing 117,938 patients in our two level three emergency departments
- Admitting 48,533 patients to our two acute hospitals.
- Delivering 4,069 babies
- Seeing 252,405 patients in our outpatients departments.

Our staff work closely with a range of other agencies including general practitioners, independent providers and community/voluntary groups.
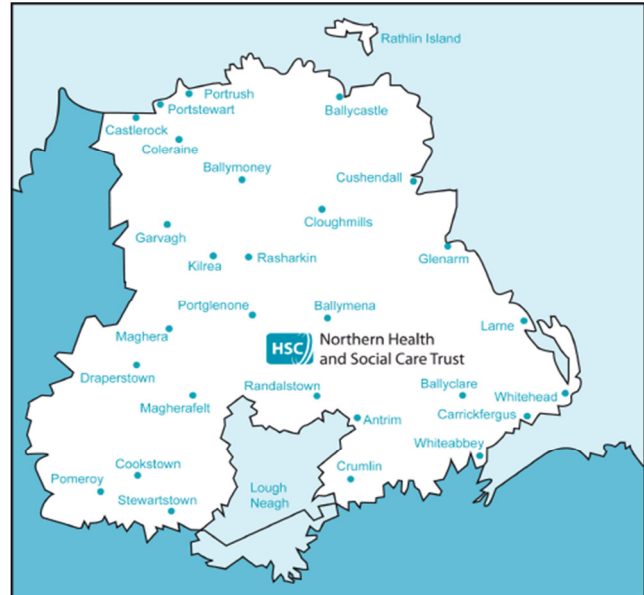
Staff

We currently employ 11,711 staff across a range of disciplines and professions including: nurses, social workers, doctors, allied health professionals, and many other technical and support staff.

Finance

The Trust's annual funding of around £620 million, which is provided almost entirely through funding from the Health and Social Care Board (HSCB), originates from the Department of Health, Social Services and Public Safety (DHSSPS) through the budget set by the Northern Ireland Assembly.

Performance

The Trust is required to meet a wide range of quality standards and performance targets, and is accountable to the Minister of Health, Social Services and Public Safety through the DHSSPS and through the regional Commissioner for Health and Social Care Services.

Facilities

The Trust manages 330 properties, which are either owned or leased, and the annual rates bill is over £4 million.

2. Vision, Values and Strategic Direction

Our Vision

To deliver excellent integrated services in partnership with our community

Our Values

In the delivery, planning and reforming of our services we will adopt our '**CORE**' values:

- We will treat the people who use our services and our colleagues with **compassion.**

- We will display **openness** and honesty with our patients, clients and colleagues, acting with integrity, providing professional, high quality services and support.

- We will **respect** the dignity, diversity and individuality of all our patients, clients and colleagues promoting equality and addressing inequality.

- We will strive for **excellence**, as a community of leaders, through consistent delivery of services and applied learning.

Strategic Direction

In delivering our vision and modernising our services we will use the following principles of 'Transforming Your Care': [1]

- Placing the individual at the centre of the service.

- Using outcomes and quality evidence to shape services.

- Providing the right care in the right place at the right time.

- A focus on prevention and tackling inequalities.

- Integrated care, with organisation and individuals working together.

- Promoting independence and personalised care.

- Safeguarding the most vulnerable.

- Ensuring sustainability of service provision.

- Realising value for money.

- Maximising the use of technology.

- Incentivising innovation at a local level.

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[1] 'Transforming Your Care – A review of Health and Social Care in Northern Ireland' (2011)

3. The Challenges

A Growing Older Population

Advances in screening, medicines and treatments as well as lifestyle and an improved economic environment, mean that people are living longer. For many it means they are living with one or more illnesses and long-term complex conditions such as diabetes and heart disease. Nearly two-thirds of people admitted to our hospitals are over 65 years old. When admitted to hospital, older people tend to stay longer and are more likely to be readmitted. Often they need more support in returning to their home.

Quality and Standards

Advances in our understanding of diseases and in medicine and technology mean standards of care evolve and expectations rise. New standards are adopted by Commissioners and we are required to adapt our service models to ensure consistently achieved quality outcomes. Service models that cannot achieve these increasing standards are not sustainable. Regionally a clear focus and strategy is set out in Quality 2020.[2]

Demand

The demand for services actually exceeds the growth in population. Demand growth, which is estimated at 6% each year, reflects an increased focus on screening, early diagnosis and intervention and the potential to successfully treat more conditions. The availability of new technologies also tends to increase costs and options for treatment.

Workforce

We have a skilled and dedicated workforce and strive to create a culture based on our values, with good staff engagement. We recognise the importance of creating a community of leaders who are empowered to lead change and improvement. However there are challenges in fulfilling all of our recruitment needs, with shortages in some professions, particularly in certain medical specialities, nursing and home care workers. Increasing sub-specialisation, particularly in medicine, and the training requirements of doctors also present challenges in planning and delivering services in our hospitals. In addition, we must recognise the increasing demands in primary care, at a time when recruitment into general practice is problematic.

An Extensive and Ageing Estate

We have 330 buildings to maintain and many are old and not suited to modern service delivery. We must maintain buildings to ensure safe working conditions and a suitable environment for delivering our varied services.

Finance

There is a continuing debate about how and where funding is allocated by our regional and national governments, with competing demands for resources. Northern Ireland currently spends around £4 billion annually on health and social care. It is acknowledged that the Trust's service model needs to change if we are to make best use of, and live within, the financial resources available.

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[2] 'Quality 2020 – A 10-Year Strategy to Protect and Improve Quality in Health and Social Care in Northern Ireland' (DHSSPS, 2011)

4. Enabling Transformation

The Reform and Modernisation Programme (RAMP) is the Trust's five-year strategic plan. It provides a framework to address the challenges we face and is the means by which we will deliver our vision. It will allow us to embed our values in everything we do and ensure the delivery of high quality, safe and effective health and social care services now and into the future.

Encapsulating key regional strategies, including 'Transforming Your Care,' 'Quality 2020' and 'Making Life Better,'[3] RAMP is intended to be forward looking. It also incorporates the lessons learned from the Trust's recent period of turnaround and builds on the report produced by the Turnaround and Support Team.

Strategic change and modernisation will be taken forward in three key areas, each led by a Director within the Trust Executive Team and supported by a programme management approach. The three key strands of work are:

People — Including organisational development through a culture of high employee engagement, great leadership, learning and development for multi-disciplinary teams and a communication strategy that encourages and creates dialogue

Services — Including work streams that cover all key services areas in the Trust from community care to acute care

Resources — Including the use of our existing buildings, plans for securing and using new capital money, and use of ICT and technologies

Led by:
Director of HR, OD & Corp Comms

Communications and Engagement-
Cultural Change through employee engagement and great leadership;
Skills, learning and development requirements;
Workforce planning and utilisation;
Programmed approach to Management of People Change.

Led by:
Director of Finance

Demography allocations
Capital programme
Estate rationalisation
ICT strategy and investment programme

Led by:
Director of Operations

Service Transformation Plan -
'Corporately managed, locally delivered'
Community Care
Elective care
Unscheduled care
Womens & Childrens
Pathways and ICP
Initiatives
Continuous Improvement

Programme Development and Management

Led by:
Div Director Business Services

People · Services · Resources · Strategic Development and Innovation

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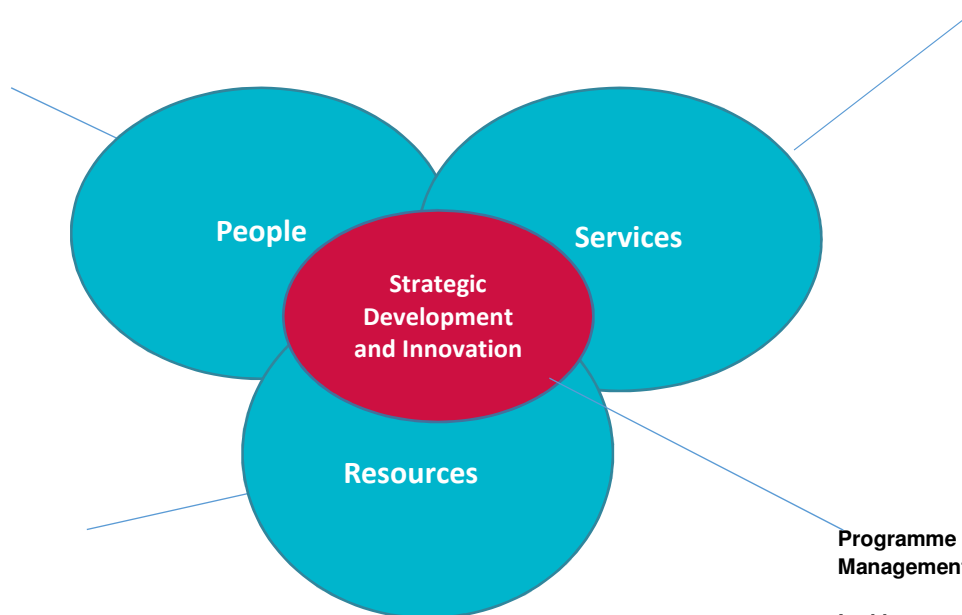
[3] 'Making Life Better – A Whole System Strategic Framework for Public Health 2013-2023' (DHSSPS, 2014)

People and Communication

Through this RAMP work steam we strive to create a culture of high engagement to support our employees to maximise their contribution and create a great place to work. We believe that this will positively and directly impact patient experience. We will do this through an organisational development strategy that will collectively develop leaders and line managers. We will develop the skills and capabilities that our staff need to work in and across multi-disciplinary and integrated teams and will encourage innovation. The focus will be to develop a culture that positively and explicitly values all staff and develops a highly engaged workforce so that collectively we can deliver the best of services.

Challenges and Choices

People

- Bringing about organisational culture change through excellent employee engagement and great leadership at all levels

- Putting clinical and professional staff in senior leadership roles to lead service improvement and reform and achieve high levels of quality and performance

- Developing the capability of our workforce to ensure staff are supported to optimise their potential, to work within and across effective multi-disciplinary, integrated teams and to encourage innovation and improvement

Embedding a new organisational structure, which provides a platform for clinical leadership through a Divisional Service Model, will encourage new ways of working and support people-centred change and performance improvement.

One of the most important aspects of this work steam is communication both inside the Trust among staff and with all our external stakeholders and the communities within which we provide services. We will actively encourage conversations, big and small, to create regular and open dialogue about the challenges we face and decisions we need to make. This workstream will focus on building the reputation of the NHSCT in support of our vision. It will recognise the importance of relationships and will aim to create a workforce of 11,700 employee ambassadors and advocates for the health and social care services that the Trust provides.

Service Transformation

The need to focus on person-centred care, enabled through integrated working, is at the heart of the service reform work stream in RAMP. We need to change the way we deliver services if they are to remain safe and sustainable.

We believe we need to focus on two key elements that will underpin all of our service modernisation:

1. A locality-based, integrated community services model that will put the patient at the heart of shared care. Services will be delivered within the home as the first choice, with access to local in-patient rehabilitation beds and modern community services facilities which collectively, will prevent admission to acute services, support prompt discharge and improve the patient's experience.

   Community-based staff will work in integrated teams delivering community services in four Trust localities – Causeway and the Glens, Mid Ulster, Antrim/Ballymena and East Antrim. Our ambition is to have suitably accessible community services 'hubs' in each locality. These modern facilities will provide access to locality services such as walk-in clinics, planned out-patient appointments, pharmacy, mental health services, patient support and social groups, diagnostics such as blood tests, equipment and advice. Staff will be more mobile, using technology to provide communication across teams and with information systems that allow the safe use of shared electronic care records.

2. An acute hospital service model restructuring our two acute sites, Antrim Hospital and Causeway Hospital, each 'right sized' with the required investment to cope with presenting demands and working collaboratively to provide a safe, sustainable and effective service model to meet the needs of our area and with networks outside the Trust area to secure and extend our local services.

Challenges and Choices

Community Services Hubs

- Deciding where locality-based hubs which accommodate co-located integrated teams should be

Acute Care

- Ensuring that acute services are effectively networked across our two acute sites to ensure safety and sustainability

- Considering the number of locations where we deliver elective surgery and consultant-led outpatient clinics

- Developing and supporting formal networks across Trusts to support acute services and to strengthen our local services

- 'Rightsizing' our two acute sites by shifting services to the community where possible and making capital investment in secondary care services where necessary

- Supporting the development of, and investment in, information and communications technology as a critical tool in enabling professionals to work collaboratively to deliver the best outcomes possible using shared information

- Investing in telehealth, telecare and other assistive technologies as key components in the delivery of a modern health and social care service

To take service transformation forward we have set up 11 individual work streams. In developing plans each stream will embed stakeholder engagement and work closely with partners across the health and social care system.

Underpinning all of these work streams will be a focus on quality and safety, using established Quality Improvement initiatives. Our innovation strategy will also underpin this work.

Resources - Buildings and Technology

In line with planning modernised services and empowering staff, we need to review how we use our buildings. If we can rationalise the use of our buildings we will be able to support teams to work better together, reduce the amount of money we spend on maintaining buildings not fit for purpose, redirect funding into frontline services, and make a compelling case for new investment in the Northern Trust area in modern community 'hubs', our two acute hospitals and technology.

Challenges and Choices

Buildings

- Making capital investment where appropriate to support modern services in the community and to facilitate co-located integrated teams

- Making decisions about the use of some of our buildings and identifying existing opportunities for improved use of buildings and space so that we can invest in staff, technology and direct care

- Using required buildings differently through shared work spaces rather than individual desks or offices, with the new locality-based community hubs providing 'step up' access to more advanced technology or expertise

- Identifying opportunities for increasing the efficiency of our buildings through the development and implementation of energy and waste innovations

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Innovation and technology have the potential to reshape the way we deliver services, get better outcomes for people and make best use of the resources we have. Staff already make substantial use of ICT and mobile communications in delivering services directly to patients and keeping in touch with other professionals involved in care delivery. Assistive technology is also used to support people at home through remote health monitoring and in using alert devices or equipment that support safety and mobility. The Trust is leading on innovative work in many areas of work, including research and trials, and recently launched the Medicines Optimisation and Innovation Centre, leading on finding ways to improve use of medicines, both in terms of people taking their prescribed medicines and maximising the use of the right kind of medicines for specific conditions.

Challenges and Choices

Innovation and Information Technology

- Developing an innovative approach to eHealth and ICT to drive innovation and creativity, support flexible, mobile and integrated working, and information sharing in order to deliver optimum outcomes and improved patient experience

5. Monitoring and Reporting Progress

The objective of RAMP is to ensure that we continue to deliver safe, sustainable and high quality services into the future. It recognises the challenges we face and its measure of success must focus on the three identified key areas – people, services and resources. We will work to find a small and meaningful number of measures that show the progress we make in terms of:

- **Patient Experience**
- **Safety Indicators and Clinical Outcomes**
- **Cost effectiveness**

Effective health and care systems use indicators within these 'triple aim' measures to demonstrate their effectiveness[4]

Many other measures and reports will be helpful in understanding how we are progressing. These will include patient and staff surveys, our success at recruiting and retaining key staff, our spend on locum and agency staff, our ability to sustain meaningful engagement with stakeholders and securing agreement on changes that we need to make.

We will be open and honest in our reporting. We will publish the outcomes and raise them in open conversations and at our Trust Board meetings.

We will invite and encourage participation, feedback and discussion. We will establish locality engagement forums and work with Local Councils in their community planning roles.

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[4] 'Triple Aim' is a framework developed by the Institute of Healthcare Improvement.

6. Engagement

We want to engage with everyone who has an interest and a stake in the delivery of health and social care in the Northern Trust area. We want the conversation to include patients and communities, Trust staff and professional bodies, our partners in health and social care, clinical professionals, the public and politicians and everyone else too. Some of the key things we need to be talking about have been set out in this document. We also want to hear other suggestions and comments.

We want to deliver the best possible services we can by investing in more jobs, technology and modern buildings. Working together we have a stronger voice and if we can get consensus on a way forward, we believe we can present a compelling case for investment in the Northern Trust.

Join one of our Locality Engagement Forums

We are setting up a Locality Engagement Forum in each of our four planned localities to establish ongoing engagement with local people. If you would like more information on how you can join a Forum please visit our website or contact the Equality Unit.

If you have any comments on this document or wish to see it in another language or format, please contact us at:

Email - equality.unit@northerntrust.hscni.net or you can write to us at:

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RAMP Infrastructure and Accountability Reporting