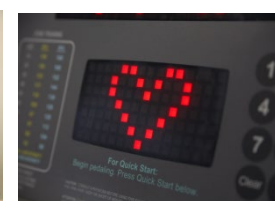
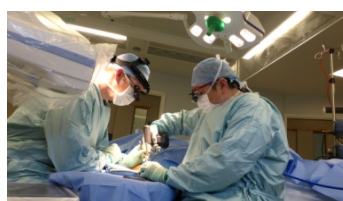


# Corporate Strategy Refresh Non-Executive Director Update

***“Our People, Our Patients,  
Our Place, and Our Partners”***



# We don't exist in isolation ...

- we are increasingly part of a wider health & care system with shared regional and local strategic objectives
- this sets a Bradford-specific framework in which we work at “Place,” subject to a formal agreement (SPA) and ways of working
- we are committed to the development of the Bradford District and Craven Health & Care Partnership and have joint responsibility for service planning, service delivery and for system finance
- the Health & Care Bill will move us ever closer to partnership working and further away from competition, changing our traditional perception of potential threats and opportunities
- we have fixed points that constrain our autonomy as an FT – e.g. on capital spend, or on recovery of planned activity post pandemic - and in effect these fixed points begin to lay out the shape of our strategy

# ...and our shared priorities have been evolving for some time:

- grounded in our Clinical Service Strategy 2017-2022 which had *Collaborative Hospital Care* and *Connected Local Care* as key objectives
- key themes rehearsed in November 2020 in our “Plan for the Year Ahead”
  - People
    - Embed kindness in everything we do
    - Move to outstanding in a safe, effective and sustainable way
    - Develop our Outstanding Maternity Services programme
    - Proactively support BAME colleagues
    - Deliver education and training in digital and virtual ways
    - Embed the NHS People plan and deliver our “Thrive” programme
    - Reduce health inequalities across the district
  - Partners
    - Provide leadership in our ICP to help deliver the 10 big ambitions of our ICS
    - Support delivery of the WYAAT Clinical Service Strategy and work programmes
  - Place
    - Lead the continued delivery of Happy, Healthy at Home through Act as One
    - Use technology to create local and system-wide digital solutions
    - Develop innovative solutions with partners to reset and restart following Covid19
    - Lead the renewal of NHS buildings and facilities for our local population
    - Develop the Trust as an “anchor” organisation for our ICP



# Our local demographic is key ...

Bradford Teaching Hospitals  
NHS Foundation Trust

We know we have a large and growing population, and that there is growth at either end of the age spectrum. We have a population that spends a lot of their life in ill health, and there is a lot of deprivation and health inequality...

- Bradford District is the 5<sup>th</sup> largest Local Authority in England
- Overall population expected to reach 552,000 by 2041
- 8,000 live births a year
- By 2041 our 65+ population is expected to grow by 50%
- Growth at both ends of the age spectrum
- Bradford is 21<sup>st</sup> (out of 317) in the most deprived districts in England
- Deprivation varies greatly across the district – central Bradford and Keighley are in the 10% of the most deprived areas in England with areas in the Wharfe valley being in the 10% of least deprived areas
- 22.5% of all 4-5 year olds and 37.9% of all 10-11 year olds are obese
- Male life expectancy 77.7y (79.4\*) – **only** 60.4y (63.3\*) in good health
- Female expectancy 81.6y (83.1\*) – **only** 59.0y (63.9\*) in good health

\*England average figures

## ...so what does all this tell us?

- we know that traditional models of care won't meet continuing increases in demand, in the context of significant inequalities
- in addition to this, we know we've had a pandemic and need to catch up waiting lists
- as a result we will need to work together – as a system in Bradford and Craven and in wider West Yorkshire
- we will need to work differently and innovatively e.g. utilising virtual
- we know that to do this we will need different tools (e.g. digital and population health management)
- we will need new and different facilities
- we will need more people and that we'll need to train them differently and give them new skills
- we know that if we offer opportunities to local people it will have a positive impact and begin to address issues like social deprivation

# We have already started to address many of these issues...



Bradford Teaching Hospitals  
NHS Foundation Trust

- Thrive – Health & Wellbeing, Staff Development, Embedding Kindness
- Continual improvement; work up new Quality Strategy
- Virtual Royal Infirmary
- Digital by default - Brilliant Basics
- Restart and Recover post-covid
- Tackling Inequalities through core programmes - Act as One
- Population Health Management approaches
- City of Research
- New Hospital Strategic Outline Case; refreshed Estates Strategy
- Green Plan
- Acute collaborations

..which gave us the building blocks  
we discussed as a Board in April...

Clinically-led service transformation: <b>"Virtual Hospital"</b>	<b>"Access"</b> and other Act as One programmes at Place	<b>Digital transformation:</b> "People first, digital first"
Our People Strategy: <b>Wellbeing/Thrive</b>	Refreshed <b>Corporate Strategy: 2021-2026</b>	<b>Restart and recover</b> planned care after <u>Covid 19</u>
Sustainable healthcare: Green Plan; <b>NHS net zero carbon</b>	Population health: tackling <b>health inequalities</b>	Strategic estate: <b>new teaching hospital</b> for Bradford

**...and we've sought assurance that  
our ambitions are the right ones...**

The draft strategy has been developed through

- An interactive Board Development session - 8 April 2021
- Engagement with Care Group Cabinets for Planned and Unplanned Care, Finance, HR, Pharmacy, Senior Nursing Team, Estates and Facilities, Education, Informatics, BIHR
- An interactive discussion with the Bradford System Strategy group
- Engagement and public awareness advice session with Healthwatch Bradford (leading to over 100 responses to an online survey)
- Engagement session with Act as One and Bradford partners
- Board update on emerging ambitions being developed at 22 July Board meeting
- Governors interactive session 26 July 2021 (and 2 x CoG meetings)



# We used Interactive Engagement to test priorities and preferences...

Which of the 8 building blocks do you think is the most important?



In what format should the strategy be published - traditional document, easy-read document, slides, plan on a page, website, talking heads etc.?



# ... and with the help of contributors we populated our four themes...



## Bradford Teaching Hospitals NHS Foundation Trust

Other than our 8 building blocks - what else do we need to include to ensure that we achieve the Trust's vision



What should be the defining theme of the strategy - tackling health inequality, digital, new estate etc.?



What strategic development specific to your CBU or directorate would you like to see? Could be related to the building blocks or could be new



What should the "golden thread" be?



*Together, putting patients first*

# Theme 1. Our People

***We will continue to develop and nurture our people to support them to deliver outstanding care. We will also value diversity and champion inclusion***

- Looking after our people
  - *Covid-19 – risk assessments, vaccinations, health and wellbeing*
  - *Post COVID19 – THRIVE, civility, health and wellbeing continuation, protected annual leave, flexible working , rapid access psychological support etc.*
- Engendering a feeling of belonging in the NHS
  - *EDI strategy and action plan – “We value diversity and champion inclusion”*
  - *Workforce at all levels to be representative of the local community*
  - *Support all staff through staff networks, Root Out Racism, WRES*
- Developing new ways of working and delivering care
  - *CRG clinical leadership model to be adopted to ensure clinician input into decision making*
  - *Support staff to deliver care digitally and virtually*
  - *Pool staff resources with ICP partners to create seamless care pathways for patients*
- Growing for the future through planning, education, training and acting as an anchor organisation for Bradford
  - *Robust workforce modelling and planning (recruitment, retention, training and education)*
  - *Provide career opportunities for local population – the Trust as an “anchor organisation”*

## Theme 2. Our Patients

***We are committed to making a difference to everyone who needs our care. We will do this by developing high quality innovative services and by continuing to embed a culture of kindness***

- We will deliver outstanding nursing and midwifery care
  - *Nursing strategy and 6 key areas of development – Leadership, Education & Development, Patient Experience, Staff Experience, Partnership Working, Quality and Safety*
- We will deliver outstanding patient experience
  - *Embedding kindness*
- We will deliver high quality services
  - *Our commitment to continuous quality improvement*
- We will develop a virtual hospital through clinically led transformation
  - *Become “virtual by default” - delivery of the VRI programme*
- We will use digital technology to transform how we deliver care
  - *Digital and data infrastructure – doing the “brilliant basics”*
  - *Digital and data supporting transformation – supporting the delivery of new models of care*
  - *Digital and data capacity and capability - ensuring access for staff and the public*
- We will restart and recover planned care after Covid19
  - *Use of capacity across the Bradford District and Craven ICP*
  - *Acting as One to transform service delivery and use of digital and virtual*

# Theme 3. Our Place

**We are committed to making a difference for everyone that needs our care, meeting them where they are, wherever possible keeping them healthy, happy at home, and helping them to live longer in good health**

- We will Act as One with our partners across Bradford District and Craven
  - *Act as One*
  - *Strategy, Budgeting, Service Development, tie-in with Local Authority objectives*
- Population Health; tackling health inequalities
  - *Population Health Management Enabling Programme – use of disparate sources of ICP data to direct care and interventions efficiently*
  - *Use of triage pathways to help local communities navigate complex care pathways*
- Research for all; building on our international reputation as a City of Research
  - *Role in Covid19*
  - *Develop the City of Research concept so that every citizen is, or wants to be, part of a research programme and Connected Bradford – using Population Health Management*
  - *Research-led care*
- Strategic Estate; fit for purpose facilities for Bradford
  - *Support for BD&C HCP estate strategy - alignment with SOCs for AGH and Lynfield Mount*
  - *Development and delivery of Trust Estate strategy – new Acute Hospital for Bradford*

## 4. Our Partners

**We will work with partners across West Yorkshire, tackling problems together that cannot be resolved by individual organisations alone**

- Working with the ICP and partners across WY to address health inequalities
  - *Support our ICP in the achievement of the ICS 10 big ambitions as one of the “5 places”*
  - *Using existing Bradford based programmes as examples e.g. Better Start Bradford, Access to Health*
- Continue to develop the Trust as a hub for specialised services in the west of WY
  - *Building on WYVaS we will continue to develop and actively promote the Trust as a hub for a range of specialised services in the west of West Yorkshire*
- Meet our commitment to sustainability and delivery of the NHS Net Zero Carbon target
  - *Delivery of our Green Plan with focus on areas such as procurement, asset management, travel plans etc.*



# We will summarise delivery plans in a logic model...

- we propose to develop a “logic model” to track the ambitions in the Strategy...

Our Ambition	What we will focus on	How we will do it (examples of high-level actions)	Our people, partners and place in 2026...what do we want to see and how will we know we've delivered?		
Place					
We are committed to making a difference for everyone that needs our care, meeting them where they are, wherever possible, and helping them to live longer in good health.	Development of Virtual Hospital: a clinically-led transformation	<p>Launch of the VRI programme – a clinically and operationally led programme of work focussed on 5 main workstreams</p> <ol style="list-style-type: none"><li>1. Creation of one overarching Virtual Ward - the spearhead project</li><li>2. Outpatient Services</li><li>3. Patient readiness for treatment</li><li>4. Management of LTCs</li><li>5. Patient Education</li></ol>			

- this approach mirrors the CBMDC District Development Plan & will allow us to map out how we will move from strategic ambitions to measurable outcomes
- Potential for a Board Development topic (and subseq. progress updates in Board mtgs)

## ...and we now aim to move to next steps...

- draft copy of strategy doc. (long form – prose) for Board consideration on 18 November
- Board will be asked to consider the strategic ambitions set out and consider whether they are appropriate as future priorities for the Trust and whether there is anything to add, change or delete
- we intend to offer the strategy in a variety of formats (long-form, “easy read”, plan on a page) and in a variety of media for example a suite of short “talking head” videos each focused on different component
- aim to publish the strategy in March/April 2022 alongside ICS/Place “launch” and potential “start the year” conference event