



University Hospitals Bristol  
NHS Foundation Trust



# Embracing change, proud to care

Our 2025 strategy

Respecting everyone  
Embracing change  
Recognising success  
Working together  
**Our hospitals.**



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# Foreword

**A strategy is only as good as the leadership commitment and financial resources that go into making it happen. University Hospitals Bristol NHS Foundation Trust (UH Bristol) has a solid track record over the last decade of setting ambitious strategic plans and delivering them. We have invested over £200million in new or expanded hospital facilities, most noticeably in the Bristol Heart Institute, Bristol Royal Infirmary, Bristol Royal Hospital for Children and the Bristol Haematology and Oncology Centre. We have grown and enhanced our range of specialist services for the people of the South West, South Wales and further afield. We are one of only a few acute hospital Trusts nationwide to have been awarded an Outstanding rating from the Care Quality Commission and we have achieved Global Digital Exemplar status for our work to transform healthcare through better use of information technology.**

So we can point to significant success - but we know we cannot rest on our laurels. Our strategy must adapt to exceptional and unprecedented challenges facing the health service as a whole. Demand for care is increasing as the population grows and ages and patient needs become more chronic in nature and more complex to manage. There are significant national shortages in the health and social care workforce, which call into question our ability to continue providing services in the way we always have.

New roles and new types of services are needed urgently. The pace with which we translate research discoveries into new treatments and embrace the power of digital innovations must increase significantly. Our collaborative work with partners in health and social care to break down barriers and streamline services must accelerate. A key strategic principle is clear: to continue to succeed, we must attend to the needs of the population and the working of the local health system in a way that a large teaching hospital has traditionally not needed to do.

This new statement of our strategy is underpinned by the Trust Board's resolve that our future lies in collaboration with our partners, and not in the competitive model on which most health policy in England has until recently been based. We are playing and will continue to play a leading role in the efforts of local partners to transform Bristol, North Somerset and South Gloucestershire into a system of properly integrated care.

Our mission will remain the same – to deliver exceptional care, teaching and research, every day – but our strategy sets out a new vision and a new set of priorities to guide our work. Between now and 2025 we will continue to grow our regional, specialist services, drive increasing integration of local acute services with our primary care and community partners and our acute colleagues in Weston Area Health NHS Trust and North Bristol NHS Trust, and we will create a true centre of excellence in Bristol for clinical education and research, working with our partner universities.

All of this will be served by our continuing determination to care for everyone employed at UH Bristol in the best possible way, offering a truly supportive, inclusive and developmental working environment for all our staff.

We look forward to working with colleagues both inside and outside the Trust to achieve this new vision for 2025. We are confident that success lies in working together – **embracing change and proud to care.**



A handwritten signature in black ink, appearing to read 'Jeff Farrar'.

**Jeff Farrar**  
Trust chair



A handwritten signature in black ink, appearing to read 'Robert Woolley'.

**Robert Woolley**  
Chief executive

# Introduction – Refreshing our strategy

UH Bristol has made great progress against our 2014-19 clinical strategy and we want to look ahead to ensure that we can continue to deliver great care into the future. We have high ambitions for improving the health and well-being of the people we serve through our dedicated, skilled and compassionate staff and through collaborative working. To achieve these ambitions we recognise that we need to fully integrate and align strategic planning approaches across our core areas of clinical services, education and research as well as with enabling strategies for our people, quality, estates, finances, digital, communications and transformation and improvement approaches.

Over the last 14 months, we have taken the opportunity to look afresh at our changing context and ensure we are well placed to be as successful over the next decade as we have been over the last. We have completed extensive engagement and analysis to understand where we need to maintain and build on what we do really well and where we need to plan to adapt or significantly change where and how we deliver care. This process has built shared understanding and ownership of our priorities, objectives and delivery plans across the organisation and with our partners, and we are ready to move forward to implement this integrated organisational strategy.

Our strategy is set out in five sections:

- **Section one** – Our strategic context describes the environment we operate in, the significant changes taking place in the NHS nationally and locally that we must respond to effectively and what our staff, patients, partners and the public told us they want us to focus on over the next five years.
- **Section two** – Our strategy for 2025 sets out our vision, priorities and objectives. This provides the framework for our individual service strategic delivery plans to ensure ownership and achievement of our overall strategy.
- **Section three** – Implementing our strategy sets out how we are going to achieve each of our priorities and associated objectives, working to deliver specific actions over the next five years through our core areas of focus – our specialist and regional services, local acute and integrated care, our education and workforce and our research and innovation strategies.
- **Section four** – Our enabling strategies provide an overview of how we will integrate and align all of our actions and functions to deliver our vision.
- **Section five** – Governance, assurance and communication provides an overview of how progress and delivery of the strategy will be embedded, monitored, reviewed and communicated.

We plan to communicate widely about our strategic plans, developing a range of materials that will make this strategy accessible for our people, partners, patients and population, ensuring everyone understands what we plan to do, what that means for them and their role in achieving our vision by embracing change and working together. This has started through our strategy on a page overleaf:

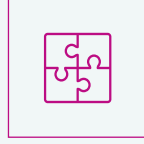
**Our mission as a Trust** is to improve the health of the people we serve by delivering exceptional care, teaching and research, every day.

**Working to our values:** Respecting Everyone, Embracing Change, Recognising Success, Working Together.

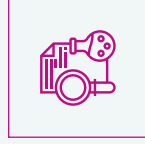
## Our vision for 2025



Anchor our future as a major specialist service centre and a beacon of excellence for education.



Work in partnership within an integrated care system, locally, regionally and beyond.



Excel in world-class clinical research and our culture of innovation.

## Our priorities

**Our patients:** We will excel in consistent delivery of high quality, patient centred care, delivered with compassion.

**Our people:** We will invest in our staff and their wellbeing, supporting them to care with pride and skill, educating and developing the workforce for the future.

**Our portfolio:** We will consolidate and grow our specialist clinical services and improve how we manage demand for our general acute services, focusing on core areas of excellence and pursuing appropriate, effective out of hospital solutions.

**Our partners:** We will lead, collaborate and co-create sustainable integrated models of care with our partners to improve the health of the communities we serve.

**Our potential:** We will be at the leading edge of research and transformation that is translated rapidly into exceptional clinical care and embrace innovation.

**Our performance:** We will deliver financial sustainability for the Trust and contribute to the financial recovery of our health system to safeguard the quality of our services for the future.

## Our plan

### Specialist and regional services

- Consolidate and grow our specialist portfolio through clinical academic centres of excellence
- Develop an integrated regional system for children's health
- Extend acute collaborative partnerships
- Invest in our hospital estate and a healing environment

### Local acute services and integrated care

- Improve how we manage growing acute demand inside and outside our hospitals
- Develop a partnership with our single community services provider
- Collaborate with primary care networks on out-of-hospital care
- Improve the resilience of services at Weston Area Health NHS Trust

### Education and workforce

- Create a culture of inclusion and engagement at UH Bristol
- Invest in our new Education Strategy
- Improve resourcing to recruit, train and retain the people we need
- Integrate our people systems to improve the management and development of our people at UH Bristol

### Research and innovation

- Continue to grow our research portfolio, joint academic appointments and reputation for excellence
- Develop our people and our culture to enable continuous improvement and innovation in our services
- Deliver our Digital Hospital Programme and maximise the use of technology for better patient and staff outcomes and experience

## Our enabling strategies



# Section one - Our strategic context

This section will:

- Set the context in which we have written this strategy by describing:
  - Who we are, our achievements and the challenges we face
  - Changes in our population, in national policy and in local plans and priorities
  - What we learned from listening to our patients, our people and our partners.
- Summarise the issues that we need to address through our 2025 strategy.

## Who we are

University Hospitals Bristol NHS Foundation Trust (UH Bristol) is a Public Benefit Corporation authorised by NHS Improvement, the Independent Regulator of NHS Foundation Trusts, on 1 June 2008. The Trust provides services in the three principal domains of clinical service provision, education, and research and innovation.

We have over 11,450 people who deliver over 100 different clinical services across nine different sites. Our eight hospitals are almost all based at our city centre campus, with local delivery in the community delivered at South Bristol Community Hospital, and include:

- Bristol Dental Hospital
- Bristol Eye Hospital
- Bristol Haematology and Oncology Centre
- Bristol Heart Institute
- Bristol Royal Hospital for Children
- Bristol Royal Infirmary
- Saint Michael's Hospital
- South Bristol Community Hospital.

With services from the neonatal intensive care unit to care of the elderly, we provide care to the people of Bristol and the South West from the very beginning of life to its end. We are one of the country's largest acute NHS trusts with an annual income of over half a billion pounds.

For general provision, services are provided to the population of central and south Bristol and the north of North Somerset, a population of around 350,000 patients. A comprehensive range of services, including diagnostic, medical and surgical specialties are provided through outpatient, day care and inpatient models.

Specialist services are delivered to a wider population throughout the South West and beyond, serving populations typically between one and five million people. The main components of this portfolio are children's services, cardiac services and cancer services as well as a number of smaller, but highly specialised services, some of which are nationally commissioned.



As a university teaching trust, we place great importance on teaching and research. The Trust has strong links with both of the city's universities and teaches students from medicine, nursing and other professions allied to health. Research is a core aspect of our activity and has an increasingly important role in the Trust's business with a significant grant secured in partnership with University of Bristol from NIHR in 2016/17 for the Biomedical Research Centre.

As a foundation trust, we have a membership and 29 governors (23 elected and 6 appointed) who hold us and our Board of Directors to account. Over 18,000 people have joined us as members and their input is vital to our work.

Our clinical services are organised and managed in five clinical divisions – Medicine, Surgery, Specialised, Women's & Children's and Diagnostic & Therapy Services. Our clinical divisions are led by a clinical chair, a head of nursing (head of professions for Diagnostic & Therapy Services) and a divisional director who is the most senior manager in the division.

We have two corporate divisions: Estates & Facilities, which includes the operational management of our estate and our facilities services as well as strategic and operational capital planning and delivery; and Trust Services, which includes human resources and organisational development, finance, IT, quality and patient safety, Trust secretariat, transformation, strategy and business planning, chief nurse, medical director team, performance and operations, and research and innovation.

## Our achievements

As we look forward to 2025, it is important to take stock of everything we have achieved to get us to where we are today – and there is a lot to celebrate.

We have published two prior Trust strategies, "Rising to the Challenge 2010-2015" and "Rising to the Challenge - Our 2020 Vision", which have guided the development of our Trust since 2010. Over the last decade, our focus has been on improving the sustainability of our clinical services; increasing our market share and growing our specialist and regional clinical services; developing our Transformation Programme to drive change and innovation in our services and developing our research and innovation portfolio. We have enabled these ambitions through a strategic investment plan to significantly update our old hospital estate and accelerate the digital transformation of our services. We have been supported to achieve this through the generosity of our many charitable partners, most notably, Above & Beyond our hospitals charity who contributed £6million to our hospitals redevelopment through the Golden Gift Appeal and by The Grand Appeal, who have supported our children's hospital, raising over £50million since 1995.

In 2009 we opened the Bristol Heart Institute (BHI) which was the start of a wave of new hospital buildings over the decade that followed. Overnight the BHI enabled us to offer a regional service to provide primary cardiac intervention for people with heart attacks and significantly increased our capacity for research in cardiology. We went on to invest in expanding the Bristol Royal Infirmary, Bristol Haematology and Oncology Centre and the Bristol Royal Hospital for Children which put us in a position to achieve several more

specialist service designations to provide regional services, including becoming a Paediatric Major Trauma Centre. We were finally able to move clinical services out of our oldest hospital buildings into modern, fit for purpose accommodation, closing the Bristol General Hospital and Bristol Royal Infirmary Old Building and selling those buildings to fund further investment into our services. Completing the BRI redevelopment ended the fourth phase of our capital programme and we have already started the Phase 5 Capital Programme to plan the next phase of building and refurbishment that will support our 2025 strategic ambitions.

Our colleagues at North Bristol NHS Trust opened the new Brunel Building at Southmead Hospital in 2014 which enabled all their services to move to their Southmead site and Frenchay Hospital to be closed. We took the opportunity that this created across the city to centralise several services: specialist paediatrics and head and neck surgery were centralised at UH Bristol and urology and breast surgery were centralised at North Bristol Trust.

All of this investment in our estate and in reorganising and designating our specialist services has allowed us to grow our services considerably. Between 2013/14 and 2017/18 our total income grew by almost 20% from £536million to £658million. Of this, a third of the growth, around £40 million, was in our specialised services. This means more and more patients can receive the treatment they need in Bristol rather than having to face a choice to wait longer or travel to other centres such as London or Birmingham.

We have worked hard to improve our culture, focussing on how we care for, engage and involve our staff, support them to deliver compassionate care and keep improving the quality and safety of all that we do at UH Bristol. In 2009, we spent time on an extensive engagement project to develop our Trust values which have since become a touchstone for who we are and how we work. We launched our Transforming Care programme to provide additional resources to support service improvement in all our hospitals leading more recently, to the launch of our Quality Improvement Academy. Our teams have received national recognition for innovation and service developments at UH Bristol, notably the emergency department checklist that was developed at the Bristol Royal Infirmary. The team behind the checklist went on to win Health Service Journal and British Medical Journal awards for their work which is now considered an example of national best practice and is being rolled out to organisations across the country.

In 2017, we were very proud of the recognition given to all of our staff by the Care Quality Commission assessment of UH Bristol as Outstanding, one of only six hospital trusts in England to achieve this level.

We have been designated as a Global Digital Exemplar (GDE) for our ongoing work on digital transformation. This builds on our leadership and support for the city-wide Connecting Care Programme that joins up digital health and care records across the NHS and social services and is recognised nationally as a leading example of how digital technology can transform healthcare. As a GDE organisation, we can call on additional funding to go further, faster, using technology to transform where and how we deliver safe, effective, joined-up care and support patient and service user self-care and independence.

The last decade has seen a step change in our research capacity and capability in Bristol. We were a founding member of Bristol Health Partners which brought us together with other NHS organisations, Bristol City Council and universities to collaborate on bringing research into practice through Health Integration Teams (HITs). HITs have delivered exciting improvements in services, fostered positive working relationships between all the organisations involved and ensured patient and public involvement in all aspects of HIT working. As a result, we have significantly increased National Institute of Health Research (NIHR) infrastructure grants, successfully bidding to establish the Collaboration for Leadership in Applied Health Research Centre for the West of England, a Genomics Medicines Centre and a Biomedical Research Centre. These awards, and the successful bid to host the West of England Clinical Research Network, have further cemented the role played by UH Bristol as a regional specialist hospital that is recognised for the international standing of its research portfolio and the quality of its teaching and learning.

Over recent years we have begun to move away from competition towards more collaboration across our health and care system. In 2016, the Bristol, North Somerset and South Gloucestershire (BNSSG) Sustainability & Transformation Partnership (STP) was established, now known as Healthier Together. UH Bristol have contributed significantly to leading within the STP and we are committed to ensuring that improving the health and well-being of our population is a core part of our strategic plans.

2008

# Our Strategic Journey

→ 2019

## Market Share

Bristol Heart Institute enables UH Bristol to provide regional service for people with heart attacks

UH Bristol becomes South Bristol Community Hospital Lead Provider

Centralisation of Head & Neck Surgery

Designated as Paediatric Major Trauma Centre

UH Bristol income grows £122m in four years including £40m growth in funding for specialised services

## Service Improvement

Trust Values developed and launched with input from over 1,000 UH Bristol staff

Focus on increasing staff engagement

Bristol North Somerset and South Gloucestershire Sustainability & Transformation Partnership founded

Care Quality Commission rate UH Bristol as Outstanding

Designated as a Global Digital Exemplar

## Clinical Research

Bristol Health Partners founded

Participation in Health Integration Teams through Bristol Health Partners delivers positive service change and attracts more funding for research and service improvement

Collaboration in Applied Health Research Centre for West Of England opens

UH Bristol hosts Genomics Medicines Centre

£10m increase in National Institute for Health Research grants at UH Bristol and 29% increase in published scientific papers over last 3 years

## Strategic Investment

Bristol Heart Institute opens

Bristol Eye Hospital refurbishment

Terrell Street Ward Block and Helideck enable expansion of Bristol Royal Infirmary and Bristol Royal Hospital for Children

Bristol General Hospital and Old Building closed and sold to fund further investment in our services

Phase 5 Capital Programme established to plan next phase of investment

Connecting Care Programme started to join up digital records

Bristol Haematology & Oncology Centre expansion

Bristol Royal Infirmary Welcome Centre and façade completed

King Edward Building refurbished

## Where we are in 2019 – Our case for change

While we are proud of our successes, we are committed to continually improving the care and outcomes we deliver. We know we need to keep responding to our changing environment and to take advantage of emerging opportunities. To set the right strategy for 2025, we need to understand where we are today and be clear on our case for change.

### Our changing population

Our population is growing, almost one million people live in BNSSG and that is estimated to increase by around 35,000 by 2020. While advances in healthcare mean that many people live longer, our population has increasingly complex health needs. We know that cancer, heart disease and stroke, liver and lung disease are some of the main conditions causing early deaths. Around 44,000 people over the age of 17 have diabetes and this figure is growing. Our population could be better at making healthy choices - one in 10 children aged 15 years old smoke regularly and one in 10 mothers are smokers at the time their baby is born. There are around 6,000 alcohol-related hospital admissions per year and about a quarter of the adult population report that they binge drink.

There are serious social factors affecting people's health in our area, for example, councils across BNSSG report a high level of 'homeless households'. We also know that there are significant health inequalities in our system. There is unwarranted variation in population access and provision, indicating that we are not best serving our population. Inequalities can have very real and serious consequences - there is an average life expectancy gap of around six years between people living in the most and least deprived areas, in the worst areas the difference can be as much as 15 years. Working together across public sector organisations is essential if we are to change this unacceptable variation.

### Our hospitals – Strengths, weaknesses, opportunities and threats

To be able to move forward effectively it is important we understand our key challenges and opportunities. We have completed detailed Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis for our clinical services, our research and innovation, and our education portfolios. An overview of the picture this presents for us is reflected in this section.

#### Strengths

- We have been rated an Outstanding organisation by the Care Quality Commission and were rated top for patient experience in the National Inpatient Survey in 2017.
- The NHS staff survey tells us that we have increased our staff engagement score every year for the last five years.
- We have breadth, depth and expertise across a substantial portfolio of specialist services that have continued to grow – including securing designation to be the Paediatric Major Trauma Centre. 51% of our income comes from NHS England Specialised Commissioning.
- We have successfully reduced length of stay for emergency patients. We use the Care Utilisation Review methodology to monitor whether our hospital beds are the best setting for the patients occupying them. In December 2018, 73% of patients reviewed were in the right setting of care with no delays, meaning that 27% of patients reviewed

were experiencing delays or could have had their care provided somewhere else. Length of stay for our emergency patients has been gradually decreasing over the last two years and was just under four days at the end of 2018.

- Our performance in cancer services has improved to meet the constitutional standard that 85% of patients who are referred by a GP should have a diagnosis and begin treatment within 62 days of their referral.
- Our performance against quality standards is strong across many indicators, although we do not achieve against all standards consistently. Our infection rates for Clostridium Difficile are lower than the agreed limits, however infection rates for Methicillin-Resistant Staphylococcus Aureus (MRSA) are higher than they should be. The rate of falls among our inpatients is slightly higher than the national standard but the rate and severity of pressure ulcers at UH Bristol is low and performance is good on medicines management measures. Our mortality measures are within expected limits.
- The number of vacancies we have is within planned limits. We have a target to have fewer than 5% vacancies at UH Bristol and for the last quarter of 2018 vacancies were below 5%.
- We have been improving our staff training. In December 2018 we reached 90% compliance across the Trust with essential training. This is the minimum that we need to achieve and our aim is for this to be consistently above 90%.
- We have a track record of strong, long-term financial management. UH Bristol is one of the largest Trusts in the country with a planned income for 2018/19 of £683million. The Trust has consistently delivered against savings plans each year to maintain financial performance and deliver surpluses for reinvestment into our clinical services. As a result we have modernised much of our hospital estate and closed our oldest buildings.
- Our research portfolio has been growing steadily. Over the last three years there has been a 10.4% increase in the number of open research studies underway at the Trust, a 29.4% increase in NIHR grants awarded at UH Bristol representing an additional £10million and a 29% increase in published scientific papers by UH Bristol staff.
- We have been designated as a GDE site as a result of the success of our Digital Hospital Programme and our involvement in digital transformation across our system, for example the Connecting Care Programme.
- We have strong internal governance processes that inform our decisions.
- Our track record of delivering against our previous five-year strategies is strong, evidenced by our achievements in the previous section.
- We have a reputation for excellent education and teaching through links to the University of Bristol and the University of the West of England.

## Weaknesses

- We do not deliver all of the constitutional access standards that our patients have a right to expect. We are not delivering the constitutional standard that 95% of patients at our emergency departments are seen and discharged from the department within four hours, and our performance for planned care is improving but fails to deliver consistently the 18 week referral-to-treating waiting time standard. We are close to delivering the 99% target that diagnostic tests should be delivered in six weeks, and for all targets we have agreed recovery plans and associated trajectories for improvement with our commissioners.
- There are significant staff shortages in key service areas. We monitor our staffing fill rates which show how many hours were worked by staff compared to how many hours were planned. We have been consistently achieving around 100% overall fill rate for nursing posts but a more detailed analysis shows that we are tending to use fewer registered nurses than planned and more nursing assistants than planned.
- Our staff turnover has been higher than planned, particularly in the Divisions of Surgery, Women's & Children's Services and Trust Services. Staff turnover at the Trust has reduced from over 14% in early 2018 to 13.5% in December 2018, but this is higher than the planned level for the end of 2018/19 of 12.3%.
- The Trust relies on the use of high-cost extra payments and temporary staff. In December 2018, 4.6% of staffing was from our staff bank and 1% was agency staffing.
- Our focus on long-term financial stability can sometimes reduce our short-term financial responsiveness.
- Some of our smaller services may have clinical sustainability issues in the long-term.
- Our focus as a Trust has largely been internal with wider system issues receiving lower priority over the last five years. Although we have engaged strongly with Healthier. Together, we have weak relationships with primary care and some other partners outside our hospitals.
- Although we have made major improvements to our hospital estate, the physical capacity and environment in some of our buildings is still inadequate and there is more work to do.
- Education at UH Bristol has not received the focus and priority that it should as a core service. A review undertaken as part of the development of our new Education Strategy has concluded that learning is frequently not prioritised in the same way as delivery of clinical services. Education is often reactive to short-term requirements rather than leading the development of education to meet the Trust's long-term strategic needs.
- We have not yet exploited the research potential in several clinical areas, for example diabetes and respiratory, and we could do more to involve more clinical professions in research, for example allied health professionals.

## Opportunities

- There remains scope to grow and develop our specialist services. For example we are planning to expand cardiac services at the Bristol Heart Institute where we have seen an average growth in procedures carried out of 6% per annum.
- Our Board has approved a five-year Strategic Capital Investment Programme. This will fund refurbishments and new buildings, medical equipment and our digital programme. We will be able to generate the funds for major improvements as long as we can maintain financial balance each year.
- We know we can make our services more cost-effective. Our Reference Cost Index (RCI) data shows that there is variation in the financial performance of different specialties at UH Bristol and we want to work with all specialties to try to reduce their RCI to below 100. We will focus on areas where we can reduce costs without compromising on service quality or delivery, for example reducing our use of high cost agency staffing.
- Engaging with Healthier Together we can improve the health and wellbeing of the population we serve and join up pathways in our local system. Clinically-led working groups are already working to improve a range of services including stroke, cancer services and eye care.
- Our partnership and planned merger with Weston Area Health NHS Trust presents opportunities to retain appropriate local acute care services and improve clinical and financial sustainability.
- In future there will be a single adult community provider for BNSSG which will support increased partnership working between acute and community teams.
- The NHS Long-Term Plan proposes workforce changes that may benefit UH Bristol. A comprehensive NHS workforce implementation plan is due for publication later in 2019 and we are expecting that there will be funding for an expansion of clinical placements of up to 50% by 2020/21. Other initiatives may include new routes into nursing and other disciplines, post-qualification employment guarantees, the expansion of international recruitment and new incentives for shortage specialties.
- Our new education strategy will raise the profile, status and quality of education at UH Bristol and there is scope to improve our education facilities. The Trust is very fortunate to have a dedicated Education Centre building with modern facilities. However, much of the rest of the education rooms across the Trust are in need of refurbishment or updating and overall teaching room capacity is limited.
- National benchmarking data shows us where we can improve our productivity. The two main sources are Getting It Right First Time (GIRFT) and the Model Hospital programmes. GIRFT has 32 workstreams looking at the productivity and costs of different clinical services. The Model Hospital programme looks at over 5,000 measures of productivity, efficiency and quality of care to provide benchmarking information and had a major update in September 2018. During 2019/20, the Working Smarter Programme at UH Bristol has supported clinical divisions to understand and investigate this information and create action plans to increase productivity, improve our services and save money.
- Developing new clinical roles can bring new skills and capacity to support service delivery.
- We co-chair Healthier Together and are well placed to develop our integrated care system.
- We have an approved Strategic Capital Investment Programme for 2018/19 to 2022/23 to fund our major investments.



- In 2021 we will have the opportunity to bid to host a Biomedical Research Centre and Clinical Research Facility.
- Developments in digital systems, artificial intelligence and assistive technology will offer potential to change the way we deliver services and improve our health and wellbeing.

## Threats

- Growing demand and the volume and complexity of health care needs may compromise our ability to deliver services effectively. Our emergency departments are getting busier. Comparing data for April-December 2017 with the same period in 2018, emergency department attendances increased by 3% for adults at the Bristol Royal Infirmary and increased by 8% for children at the Bristol Royal Hospital for Children.
- There are some significant uncertainties around our future workforce. Applications to medical schools decreased for the third year in a row to 2017/18. At the time of writing this strategy in February 2019, the timing, nature and impact of the UK's exit from the European Union (EU) is unclear but we know that more than 10% of our workforce come from other EU countries.
- We know there will be constraints on research funding in the future. NIHR Research Capability Funding will be reduced by 60% over the next five years.
- New providers, particularly non-NHS, may win work and income that negatively affects our plans and our financial position.
- Lack of capacity and funding in social care may compromise our ability to provide the right care in the right place.
- Despite the increase in funding for the NHS, the overall financial position of health and social care is expected to remain highly constrained which may limit service growth and development.
- Potential changes to legislation relating to foundation trusts may create new limits on our ability to invest in capital development.
- The demand on our people to deliver clinical services makes it difficult to dedicate and protect time for the delivery of education and research.

# Changes in national policy

## The NHS Long Term Plan

The NHS Long Term Plan was published in January 2019 and sets out five major, practical changes to the NHS service model to be delivered over the next five years:

- Boosting 'out-of-hospital' care, and joining up primary and community health services.
- Redesigning and reducing pressure on emergency hospital services.
- Giving people more control over their own health and more personalised care when they need it.
- Digitally-enabled primary and outpatient care mainstreaming across the NHS.
- Local NHS organisations increasingly focusing on population health and local partnerships with local authority-funded services, through new integrated care systems (ICSs).

The Long Term Plan also outlines how care and quality plans for the NHS over the next ten years will focus improvements in:

- Maternity and neonatal services
- Services for children and young people, particularly in relation to mental health and cancer
- Learning disabilities and autism
- Adult mental health services
- Diabetes
- Cardiovascular disease (including stroke)
- Respiratory
- Cancer care and in particular diagnostics.

Research and innovation and ensuring the right people are available in the workforce, are highlighted as being essential to support the improvements sought. UH Bristol is well placed to respond to much of the vision of the Long Term Plan, building on our successes and continuing to work hard to build partnerships and collaborate for change.

## Priorities in our local system

### Healthier Together - Our Local Sustainability and Transformation Partnership

In late 2015, NHS England announced plans to bring NHS healthcare providers and commissioners together with local authorities who provide social services to form what are now known as Sustainability and Transformation Partnerships (STPs). Healthier Together is the STP for BNSSG.

13 local health and care organisations are part of Healthier Together:

- Avon and Wiltshire Mental Health Partnership NHS Trust
- Bristol City Council
- Bristol Community Health
- BNSSG Clinical Commissioning Group (CCG)
- North Bristol NHS Trust

- North Somerset Community Partnership
- North Somerset Council
- One Care
- Sirona Care & Health
- South Gloucestershire Council
- South Western Ambulance Service NHS Foundation Trust
- University Hospitals Bristol NHS Foundation Trust
- Weston Area Health NHS Trust.

The main purpose of Healthier Together is to bring all these organisations together to work towards creating an integrated care system for our population. As part of Healthier Together we have committed to developing an integrated care system by 2021.

The Long Term Plan sets out in some detail how integrated care systems will work although



each system will have some freedom to set things up in a way that will work locally. We can expect to be part of a formal partnership board to lead the integrated care systems for Bristol, North Somerset and South Gloucestershire (BNSSG) and we will lead alongside other hospital Trusts, commissioners and GPs as well as the local authorities, community services and the voluntary sector.

Healthier Together has set ten priorities that we will collaborate on with our partners as our integrated care system develops:

- Acute care collaboration – develop a shared vision, principles and behaviours for working as an acute collaborative in BNSSG, focussing on how we will support and improve the health and wellbeing of our populations through active disease prevention and promoting healthy behaviours. We will work as a local acute network to support primary and community care localities to deliver care closer to home and collaborate for excellence in delivery of specialist acute services.
- Digital transformation – continue with our strong track record of using digital technology to improve how we deliver our services. This will focus on acute system alignment, assistive technology, patient held and shared care records and empowering clinicians and patients to do more through the use of technology.

- General practice resilience – address the issues facing GP practices to make sure we have sustainable primary care services by developing a leadership and organisational development programme; develop a single system approach to risk stratification and population health management; roll out the 111 mobile app to help people manage urgent care needs; engage with national efforts to recruit GPs from overseas; complete and implement a BNSSG primary care strategy.
- Healthy Weston – secure clinical and financial sustainability for services at Weston General Hospital.
- Integrated community localities – develop alliance working to look after the health and care of local communities in BNSSG, supported by a locality transformation scheme.
- Maternity – improve the quality, safety and sustainability of maternity services in our system.
- Mental health – address issues with fragmented and inequitable mental health service provision, improve access and integrate mental health services with physical health and social care services.
- Prevention – work on keeping our population healthy and well with a focus on tobacco, alcohol, obesity, physical activity, vascular disease and mental health.
- Urgent care – develop a single system approach to urgent care with consistent triage and routing of emergency patients, development of locality hubs and consistent out-of-hospital pathways, including roll-out of urgent treatment centres for Bristol.
- Workforce – work together to make sure we have enough people with the right skills working in our system to deliver the services that our population needs. This will include shared planning, training and development across the system, collaboration on temporary staffing, training and support, a specific plan for primary care workforce development and working towards a joined-up workforce across health and social care.

The plans we are making as a system with Healthier Together set out how we will deliver the NHS Long Term Plan for England and our new UH Bristol strategy will ensure we are developing in the right direction for local and national requirements.

## Local Government Plans

Bristol published the first ever One City Plan January 2019 which sets out a vision for the city in 2050:

*“In 2050 Bristol will be a fair, healthy and sustainable city. A city of hope and aspiration, where everyone can share in its success.”*

The One City Plan includes a vision for health and wellbeing, redesigning the city for healthier living, giving people more choice about how they access health and care services, personalised medicine, the eradication of obesity and taking a holistic approach to health and wellbeing which includes health and care services but also schools, businesses, faith groups, charities, clubs and our communities. The plan sets out some specific goals for health services which include reducing variation in access to health services for people, improving early cancer diagnosis, reducing the transmission of sexually transmitted diseases and making sure that no one is discharged from hospital to be homeless on the day of discharge.

Bristol City Council is also part of the West of England Combined Authority (WECA) with Bath and North East Somerset and South Gloucestershire. WECA will have £30million of government funding over the next 30 years to invest in areas including transport infrastructure and adult education. There is a local industrial strategy in development.

As one of the major providers of healthcare in the city, as well as a major employer, we have a responsibility to contribute to developing and delivering the strategic vision for Bristol and the West of England area over the coming years. Our strategy will help achieve the One City goals by increasing the quality, responsiveness and resilience of the services we deliver and by driving us to collaborate and integrate more with services across the city.

## What we have learned from listening

We wanted to hear from as many people as possible to inform the development of this Strategy and have asked people who work at UH Bristol, our patients and their families and carers, and people the we work with outside UH Bristol for their views. We asked for feedback on a range of issues including our strengths and weaknesses, the challenges ahead, how we need to change to support our people, the changes we need to make in how we deliver care, what we are proud of now and what we want to be proud of in the future.

To be as inclusive as possible, we sent out surveys, set up engagement events, attended staff meetings and away days and worked with some specific groups like our governors and local GPs.

## What our people told us

We had 734 responses to our internal staff survey in 2018, 57% of which were from clinical staff, and we met with many more staff at our engagement events and meetings. Our people told us:

- They have a strong sense of pride for working at UH Bristol but it can be difficult to work here sometimes and all teams face challenges in their work.
- We need to keep focussed on staff engagement, improving morale and developing a strong, positive working culture and fit for purpose working environment.
- We need to work hard to retain our people – when people leave and create vacancies this can put a lot of pressure on teams.
- The pressure is increasing on our services and we need to make sure our Trust can manage increasing numbers of patients and increasing complexity of the care required.
- Our people want us to collaborate more with our partners so that we can find ways to look after more people outside of hospital and stop people needing to come to hospital in the first place.
- People who manage our teams and services want more training and development so that they can be more effective and they want to spend less time on reports and paperwork and more time making positive changes happen in clinical services.

We ran a further staff survey in February 2019 to ask for feedback on our draft vision and strategic priorities. This time 149 people responded and 53% of respondents were clinical staff. Responses to the draft vision and priorities were largely positive and we have used the many detailed comments received helped to shape the final version of the strategy.

## **What the public and our governors told us**

We ran four specific events through our Health Matters series and governors forum where members of the public, foundation trust members and our governors were invited. From these events, we heard that:

- We can play a greater role in disease prevention - keeping people well at home to remain with their communities and using community support to assist with this.
- We need to improve communication between hospital trusts.
- We need to work more closely with volunteer organisations and charities to support people more effectively in the community.
- We need to keep modernising our buildings and facilities to make them more accessible.
- People agree that working with primary care GPs and community services to stop people needing to come to hospital is the right thing to do, but new services will need to be in place to make this work.
- People want to receive a consistent standard of service from all our teams and hospitals.
- Communication is really important in determining whether our patients have a good or bad experience of our services.
- We need to make our services as simple for people to access as we can, joining things up inside our own hospitals as well as with GPs, social and community services.
- We need to make more use of digital technology to improve our services and how we communicate - people are surprised that we still use paper records and send so many letters.

## **What our partners told us**

We sent a survey to over one hundred partners and people that we work with across our system, including primary and community care providers, commissioners, universities, other hospitals and voluntary and charitable organisations. We received over 50 responses, indicating that:

- Our partners want to form closer working relationships with us in planning and delivering services. It is really important to our partners that UH Bristol plays a full and leading role in the work of the whole system.
- We need to work more closely with our primary and community care colleagues using our specialist expertise to support them to keep people well and reduce demand for hospital services.
- We have a big opportunity to work with the wider voluntary and charitable sector to support prevention and local care alongside the work we do to support care in our hospitals with Above & Beyond, our hospital's charity, The Grand Appeal who support our children's hospital and our other hospital charitable partners.

## Summary – What we need to focus on for 2025

From all our analysis and engagement, from looking at the successes we have had and understanding the challenges we still face, from everything that everyone has told us, there are clear themes emerging that our strategy for 2025 needs to address.

**Our people are the most important part of all our hospitals.** We need to invest to make sure that everyone who works with us has the skills and development they need to deliver exceptional care every day. We need to make sure we are preparing for a challenging future by training the people we need and adapting for the fact that there will be shortages of important skills by developing new roles and new opportunities for professions to work together. We need to promote equality in service delivery and employment, working to maintain a culture of compassion and inclusion at every level.

**We want to be a beacon of outstanding education that motivates and inspires our staff and brings direct benefit to patient care.** To effectively respond to the future health and social care priorities, our staff will need to be motivated and highly adaptable to changing workplace environments. This will require us to embrace learning as part of who we are, and what we do. If we embrace this, we have every opportunity to become nationally and internationally known as a place where exceptional careers are created.

**We need to continue to develop more capacity for delivering specialist services.** We have put a great deal of work into developing our specialist services and it was the right thing to do – we now treat many more people with specialist health needs, but there is still more to do. Too many people in the South West have to make a choice to travel to London, Birmingham and other specialist centres because sometimes we don't have the capacity to treat them here soon enough. Specialist treatments are developing all the time and we need to keep up to make sure we are always at the leading edge.

**We need to make sure that we stay at the forefront of research and innovation.** We want to make sure that our hospitals maintain their places as specialist regional centres building on our clinical academic foundations. To do this we have to make sure that we are committed to research and innovation. We need the brightest clinicians to deliver the best clinical services today and develop the best clinical services for tomorrow. We need to keep innovating to offer cutting-edge care and treatment and strive to continuously improve all that we do. Even as a trust that is recognised as a Global Digital Exemplar, we still have a long way to go to become a truly digital organisation and we must maintain and increase our commitment to changing the way we work to take advantage of all the benefits that new technology offers for our patients.

**We need to work harder to integrate local hospital services with our local communities.** We know that a growing, aging population in BNSSG will need more support from health and social care as the next decade progresses. We cannot sustain traditional service models where people are referred in for multiple visits for appointments, tests and follow-ups, where GPs feel they have no alternative but to admit people to hospital, where local people feel

they have no option but to take themselves or someone they care about to the emergency department. Clinical teams in our communities can do much more to look after people at home or nearby – but only if we ensure our specialist expertise and support is available when they need it so that people don't have to come to our hospitals.

**We need to keep focused on delivering strong operational performance to deliver the Constitutional Standards that our patients have a right to expect us to meet.** We need to continue work to develop our demand and capacity alignment and work smarter to release capacity to support our strategic ambitions to support more care out of hospital and expand our specialist provision. We need to use GiRFT, RightCare, Model Hospital, Care Utilisation Review and national benchmarking data to support evidence-based change where we have opportunities to reduce waste and add more value.

**We need to play our part in promoting the health and wellbeing of our populations to prevent illness and injury and reduce health inequalities.** We must make every contact we have with people count towards improving their overall health and wellbeing to make an impact on the long-term health of our population. Making our hospitals smoke-free and introducing the PJ Paralysis approach to encourage patients in our hospitals to be more active are steps in the right direction but we can do more.



# Section two - Our strategy for 2025

This section will:

- Confirm the Trust's core mission, values and refreshed vision
- Present the Trust's strategic priorities and objectives
- Set out the strategic choices we have considered and our position on these

## Our mission, vision and values

We have considered our strategic context and drivers for change and have reaffirmed that our strategy for 2025 remains firmly based on our mission and the values that we work by every day. These were developed with our people in 2010 and we have tested these out through this refresh process, with strong agreement they remain as the guiding force in all that we do.

**Our mission** as a Trust is to improve the health of the people we serve by delivering exceptional care, teaching and research, every day.

Working to our **values**:

**Respecting everyone**

Embracing change

**Recognising success**

Working together

**Our hospitals.**

**Our vision** for 2025 is to:

- Anchor our future as a **major specialist service centre and a beacon of excellence for education.**
- Work in partnership within an **integrated care system** locally, regionally and beyond.
- Excel in world-class **clinical research and our culture of innovation.**

# Our strategic priorities

With a clear destination set, we have identified how we will deliver on this vision. This will be through our six **strategic priorities** that set out our key areas of ambition around which we will plan, deliver, and guide the decisions we make between now and 2025.



**Our Patients:** We will excel in consistent delivery of high quality, patient centred care, delivered with compassion.

**Our People:** We will invest in our staff and their wellbeing, supporting them to care with pride and skill, educating and developing the workforce for the future.

**Our Portfolio:** We will consolidate and grow our specialist clinical services and improve how we manage demand for our general acute services, focussing on core areas of excellence and pursuing appropriate, effective out of hospital solutions.

**Our Partners:** We will lead, collaborate and co-create sustainable integrated models of care with our partners to improve the health of the communities we serve.

**Our Potential:** We will be at the leading edge of research and transformation that is translated rapidly into exceptional clinical care and embrace innovation.

**Our Performance:** We will deliver financial sustainability for the Trust and contribute to the financial recovery of our health system to safeguard the quality of our services for the future.

For each of our priorities, we have described a set of **strategic objectives** that tell us what we want to achieve over the next five years and allow us to monitor and measure achievement year on year.

In section 3, we then set out our **strategic initiatives**, demonstrating **how** we are going to achieve our vision through the specific actions we will take in our integrated plans for each of our core areas of delivery focus:

- **Specialist and regional services**
- **Local acute and integrated care**
- **Education and workforce**
- **Research and innovation.**

## Our strategic choices

During the development of this strategy, the Trust Board and senior leadership team considered several important strategic choices that together set a clear direction for us to take. These are the choices that we have made and commit to between now and 2025.

### **We embrace our role to provide leadership for our developing integrated care system.**

The NHS Long Term Plan sets out very clearly that every part of England will develop an integrated care system over the next five years. We accept that our ability to provide exceptional care and health outcomes, meet constitutional performance standards and achieve financial sustainability, is entirely dependent on our people working more closely with our partners in health and social care. Through our sustainability and transformation partnership (STP), Healthier Together, we have signed up to the ambition of becoming an integrated care system. Our chief executive is co-chair of Healthier Together and our executive team, senior managers and clinical leaders have already played an important role in developing our partnership over the last three years. We want our whole health and care system to succeed and we will continue to play our part in providing strong system leadership to make sure that happens.

### **We will substantially increase our collaboration with other hospitals rather than competing with them.**

Many of the changes to the way that NHS hospital services are commissioned and managed over the past 20 years have encouraged competition between hospitals. We are clear our future is not in competition, it is in collaboration. We have made the strategic choice to pursue a merger with Weston Area Health NHS Trust and have already done a lot in Bristol to organise services more effectively between us and North Bristol NHS Trust. We have led and participated in regional and national networks for specialised services and both locally and beyond, we will join up the ways we work, creating teams that can work easily across all hospital partners, sharing resources where we duplicate them at the moment and driving up the standard of care and experience for our patients. We have led the development of the Healthier Together Acute Care Collaboration Strategy and we commit to delivering it in partnership with North Bristol NHS Trust and Weston Area Health NHS Trust.

### **We will focus on delivering acute hospital services.**

While we recognise that we must work in a more integrated way, we have made a clear choice in the last year not to diversify into directly providing adult community services. This opportunity was presented through the re-procurement process to replace our three local community service providers for BNSSG with a single provider for the whole system. All our passion, experience and expertise is in the development and delivery of exceptional care, teaching and research for acute hospital services. That is where our focus for adult care will be from now to 2025. We will continue to review the benefits for potentially extending our delivery of community children's services if we assess that this provides the best opportunity to improve outcomes for local children and young people.

**We will work with our partners and take action where it is appropriate to move care out of our hospitals to other settings.** We do not want to expand our capacity unnecessarily as we know that often our hospitals are not the best place for people with complex social, mental health or learning disability needs to be cared for. Our traditional services where we see people in outpatient clinics and patients have to make multiple trips to hospital for tests and consultations are already struggling and will not be able to cope as demand continues to increase. We want to find ways to deliver as much care as we can outside of hospital. This will require us to change how and where we deliver our services, redesigning clinical pathways, supporting GPs and community teams and using digital technology.

# Our strategic priorities and objectives

We commit to delivering the following objectives by 2025:

## Strategic priority 1: Our patients

We will excel in consistent delivery of high quality, patient centred care, delivered with compassion.

Our **strategic objectives** are to:

- Deliver outstanding care evidenced through our CQC rating.
- Ensure our services are responsive and achieve all constitutional access standards.
- Ensure that patients have access to the right hospital care when they need it and that we create effective interfaces with out-of-hospital services to discharge patients as soon as they are medically fit.
- Deliver the quality objectives outlined in our quality strategy (ensuring timely access to services; improving patient and staff experience; improving outcomes and reducing mortality; delivering safe and reliable care) supported by our Digital Hospital Programme.
- Continue to develop our estate and provide a modern, nurturing environment for staff and patients.
- Place patient, staff and public engagement at the heart of everything we do.

## Strategic priority 2: Our people

We will invest in our staff and their wellbeing, supporting them to care with pride and skill, educating and developing the workforce for the future.

Our **strategic objectives** are to:

- Deliver a strategic workforce plan that enables us to recruit and retain staff as an organisation and as a local healthcare system.
- Ensure we have a highly skilled and productive workforce that is as diverse as the community that we serve.
- Create innovative workforce solutions and a robust plan for the new roles we will need and how we will fund and grow these roles.
- Develop our role as a beacon of excellence for education in the South West of England, developing exceptional people for exceptional careers, working with our academic partners and training the workforce of the future.
- Enhance our leadership and management capability through delivery of a comprehensive programme of training and development based on robust succession planning.
- Support and enable staff to work more closely with teams in partner organisations and across multiple settings.
- Ensure we access, listen to and use staff feedback to inform targeted actions to improve the day-to-day experience of our staff.
- Achieve upper quartile performance against all workforce measures, including equality, diversity and inclusion.

## Strategic priority 3: Our portfolio

We will consolidate and grow our specialist clinical services and improve how we manage demand for our general acute services, focusing on core areas of excellence and pursuing appropriate, effective out of hospital solutions.

Our **strategic objectives** are to:

- Build, support and participate in networks of specialist services in South West England, Wales and beyond, with clinical academic centres of excellence for cancer, children's, cardiovascular and other services
- Critically evaluate the productivity of our services to support continuous improvement
- Mandate our teams to support delivery of appropriate care out of hospital. Our default as a system will become to care for people out of hospital first
- Resolve internal problems that slow down patient flow which impact on the effective delivery of general and specialist care
- Use technology to improve the safety and effectiveness of our services and be able to offer greater accessibility in and out of our hospitals
- Develop our provider to provider relationships with primary and community care, with an expectation that our teams will actively seek new ways of working together for the benefit of patients.

## Strategic priority 4: Our partners

We will lead, collaborate and co-create sustainable integrated models of care with our partners to improve the health of the communities we serve.

Our **strategic objectives** are to:

- Continue to lead and support the BNSSG Healthier Together partnership to progress towards an integrated care system by 2021, with the aim of making BNSSG "Outstanding"
- Use our digital and research excellence and academic expertise to maximise the implementation of evidenced based clinical pathways across hospital, primary and community provision
- Work more closely with patients, families and other healthcare partners to co-design more joined up care that takes account of the whole person not just their immediate health issues
- Commit to the vision and principles of the BNSSG Acute Care Collaboration Strategy, further developing our partnerships with Weston Area Health NHS Trust and North Bristol NHS Trust to support improved outcomes for our populations and our collective clinical and financial sustainability
- Promote healthy lifestyles, helping to prevent ill health and improve mental and physical wellbeing through all of our activities
- Actively pursue opportunities to work more effectively and creatively with our voluntary sector and charitable partners.

## Strategic priority 5: Our potential

We will be at the leading edge of research and transformation that is translated rapidly into exceptional clinical care and embrace innovation.

Our **strategic objectives** are to:

- Build our reputation as a world class leader in population health and biomedical research, maximising the potential of the Biomedical Research Centre to undertake cutting edge studies that will improve care and treatment into the future
- Use technology and our digital capabilities to transform where and how we deliver care, education and research and maximise the opportunity provided by our successful appointment as a Global Digital Exemplar site
- Continue to deliver and develop our Transforming Care programme to support the achievement of our strategic ambitions
- Provide our staff with improvement skills and capabilities through our Quality Improvement (QI) Academy
- Create an environment that makes it easy to innovate through our QI Hub
- Remain agile, using evidence to excel in getting it right first time
- Sustain and improve our performance in initiating and delivering high quality clinical research trials.

## Strategic priority 6: Our performance

We will deliver financial sustainability for the Trust and contribute to the financial recovery of our health system to safeguard the quality of our services for the future.

Our **strategic objectives** are to:

- Work smarter not harder, by eliminating waste and ensuring we add value from every action we take, however small, to maintain our financial health in the context of severe local and national financial pressures
- Achieve upper quartile productivity benchmarks across all measures utilising the benchmarking and productivity information available to us through Getting It Right First Time (GiRFT), the Model Hospital and other programmes
- Evaluate the financial sustainability of all clinical services with the aim of moving Reference Cost Index to below 100 for all
- Secure contracts with commissioners which reflect demand and work with partners to reduce costs across the system through pathway redesign
- Increase our income through innovative commercial approaches.

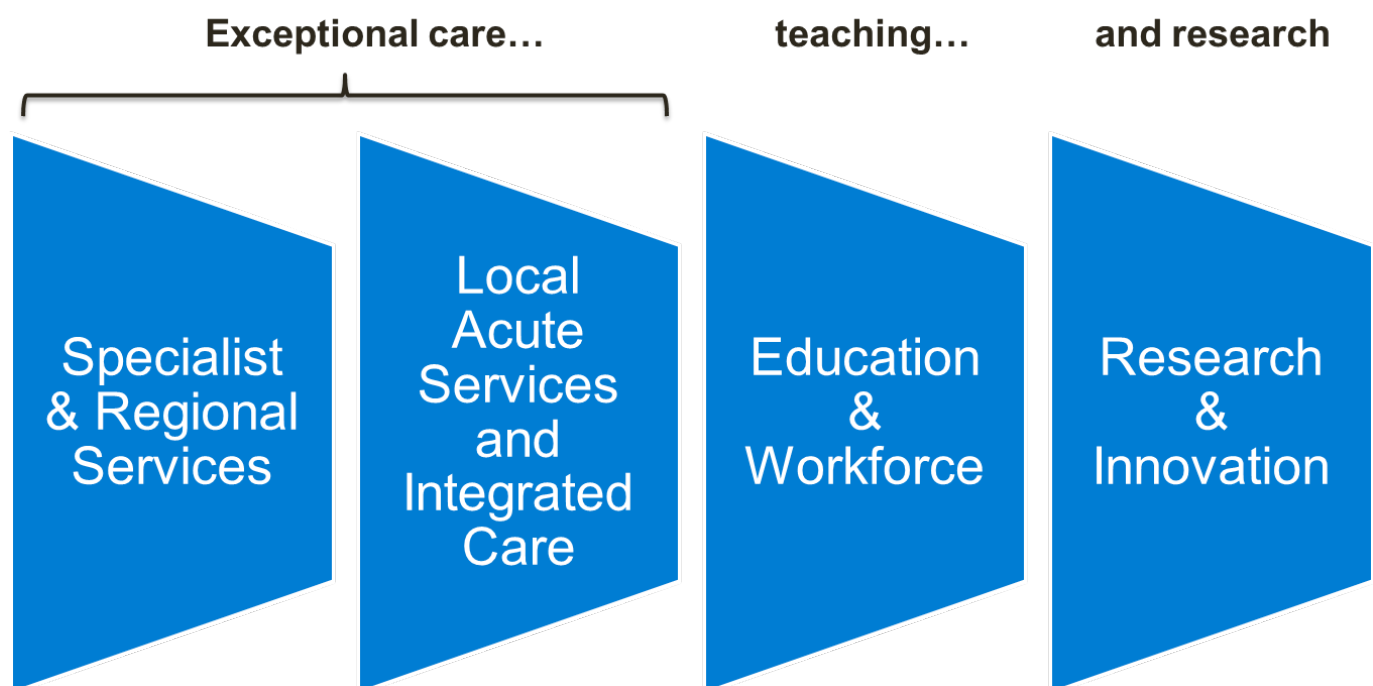
# Section three - Implementing our strategy

This section will:

- Set out how we will achieve our vision, priorities and objectives through specific actions we will take in our integrated plans for each of our core areas of delivery focus.
- Specify milestones for delivery in years 1, 2 and 3-5.

Our plan for 2025 is focused on our mission as a Trust to improve the health of the people we serve by delivering exceptional care, teaching and research, every day.

Our strategic delivery plans are structured around these core functions with our plan for exceptional care divided into two parts: developing and growing our specialist services and integrating our local hospital services with our partners in Healthier Together.



Each of our five clinical Divisions have developed draft strategies in response to our strategic priorities and objectives, within these four core areas of delivery. This has enabled local engagement, ownership and clarity of action and embedded integrated planning. Draft strategies for education, research and a strategic workforce plan have been developed in parallel being both informed by, and informing, the Trust strategy. These aligned strategies and refreshed enabling strategies (described in section four), will be finalised and come forward for Board approval during 2019.



# Specialist and regional services

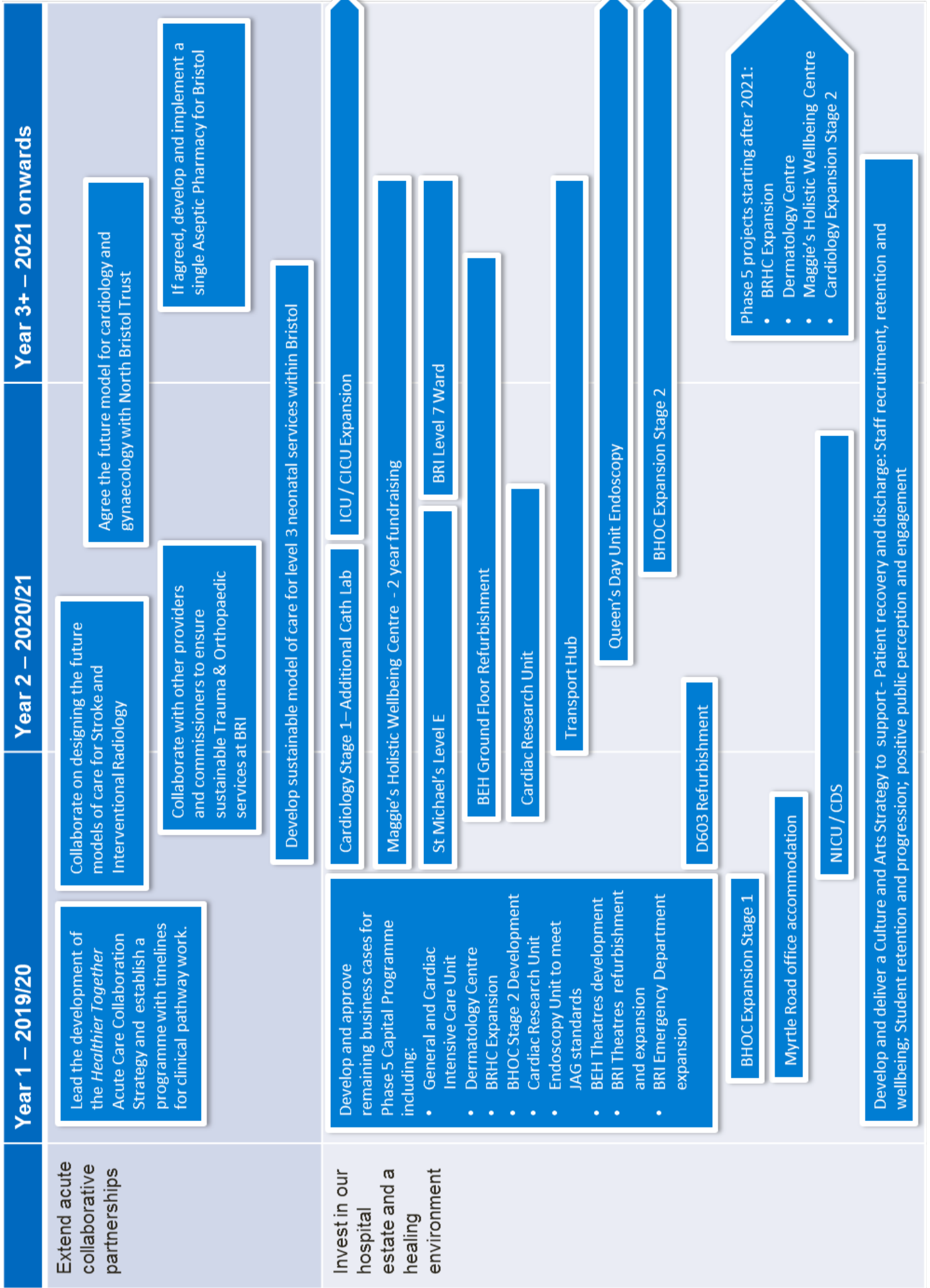
We have made a strategic choice to focus on where our passion, expertise and experience is – in delivering specialist hospital services. We want to build, support and participate in networks of specialist services in south west England, Wales and beyond, **with clinical academic centres of excellence for cancer, children's, cardiovascular and other services.**

The main elements of our plan for specialist and regional services are to:

- 1. Consolidate and grow our specialist portfolio.** We offer specialist services in all our hospitals and we have assessed that our core areas of excellence are where we expect demand to continue to rise, from both demographic growth, our reputation and national service designations. We are planning to target growth primarily in the following services:
  - Haematology and oncology services including the introduction of new immune effector cell treatments and increased clinical research trials through a further development of the Bristol Haematology and Oncology Centre
  - Complex cancer surgery which we will support by expanding our intensive care unit capacity
  - Paediatric services, including our paediatric and neonatal intensive care units. We will also be seeking further specialist children's service designations in obesity, craniofacial and brain tumour surgery
  - Cardiac services including structural cardiology which we will deliver through a number of expansions to the Bristol Heart Institute
  - Radiology, both to provide diagnostic support for all our services and ensure access across Bristol to Interventional Radiology treatment services
  - Dermatology where we are planning to develop a dermatology centre of excellence, expanding our specialist service and research capability
  - Clinical genetics and our Genomics Medicines Centre.
- 2. Develop an integrated regional system for children's health care** with an overarching operational delivery network structure. The Bristol Royal Hospital for Children is a regional centre for children's healthcare and we are in the right position to provide leadership and coordination for an overarching regional healthcare service.
- 3. Extend acute collaborative partnerships,** avoiding duplication and complexity where appropriate and making best use of the collective expertise of our people and our physical resources to secure the best outcomes for patients. Key areas of work will be neonatal care, stroke, musculoskeletal, interventional radiology, pharmacy production, pathology and maternity services and genomics. Where necessary we will publicly consult on any significant changes to service delivery.
- 4. Invest in our hospital estate and a healing environment** creating the physical capacity required to support our specialist and tertiary care demand, upgrade our core infrastructure and provide an environment that improves the health and wellbeing of patients, visitors, students and staff through our arts and culture programme. Because of our consistently strong financial management, we are able to invest into essential capital developments and will take forward our Phase 5 Capital Programme aiming to complete by 2025.

The following pages summarise the key strategic initiatives that we have planned for year 1, year 2 and year 3 onwards.

	Year 1 – 2019/20	Year 2 – 2020/21	Year 3+ – 2021 onwards
Consolidate and grow our specialist portfolio	<p>Continue development of chimeric antigen receptor T-cell (CAR-T) treatment service</p> <p>Agree the future model for dental teaching provision and renew our relationship with University Of Bristol</p> <p>Develop the Genomics Medicines Centre at UH Bristol</p> <p>Increase the provision of chemotherapy at South Bristol Community Hospital</p>	<p>Completion of ward D603 refurbishment enables integration of BHOC acute units</p> <p>Growth of specialist cardiac services at BHI enabled by additional Cath Lab and phased upgrade of existing Cath Labs</p> <p>Integrated General and Cardiac Intensive Care Unit with additional beds enables growth for specialist surgical services</p>	<p>Consider development of robotic surgery service for gastro-intestinal, thoracic, head and neck and gynaecology oncology surgery</p> <p>Growth of specialist services for Children, Cancer and Dermatology enabled by expanded new hospital estate</p>
Develop an integrated regional system for Children's Health Care	<p>Active leadership of formal networks hosted by Women's &amp; Children's Division – Congenital Heart Disease and Neonatal</p> <p>Improved formalisation of other clinical networks based in the Division and more active regional leadership (for example palliative care)</p> <p>Continued engagement in networks that we participate in but do not lead – major trauma, neuromuscular, neurosciences and burns</p>	<p>Develop overarching children's network led by BRHC but based on strong networked partnerships with DGHs, commissioners, patients and families.</p> <p>Use this network to promote care closer to home and strengthen partnership arrangements with district general hospitals across the region.</p>	<p>Utilise overarching children's network to make demonstrable differences to patient outcomes and experience, for example by improving clinical pathways; patient and family experience; communication and information sharing across providers.</p>



# Local acute services and integrated care

We are committed to working more closely with our partners in Healthier Together and will continue to play a leading role in developing our integrated care system. We have reflected the Acute Care Collaboration Strategy that has been developed as part of Healthier Together in our strategic plans, supporting our shared commitment to:

- Collaborate for excellence in delivery of specialist acute services, working together to make best use of the specialist skills of our whole workforce, our physical facilities and equipment
- Develop an integrated model of care where bed-based care is provided only when necessary
- Actively contribute to improving the health and wellbeing of our population.

We know that demand for unplanned and urgent care has continued to rise and that our ambitions to expand our very specialist acute services cannot happen unless we work with our local population and partners to ensure effective, quality alternative services are accessible outside of our hospitals.

**The main elements of our plan for local acute services and integrated care are:**

**1. Improve how we manage growing acute demand inside and outside our hospitals** for general adult and paediatric services to include:

- Integrated models of care for frailty, long-term conditions and peri-operative care for elective surgery.
- Develop our surgical and acute medical same day emergency care services to maintain and increase the number of people we can appropriately treat and support to go home.
- Strengthen our partnerships around the provision of community child health/child and adolescent mental health services.
- Redesign outpatient services to enable access to specialist expertise out of our hospitals using digital options and working with locality teams.
- Explore the development of local diagnostic hubs across BNSSG.

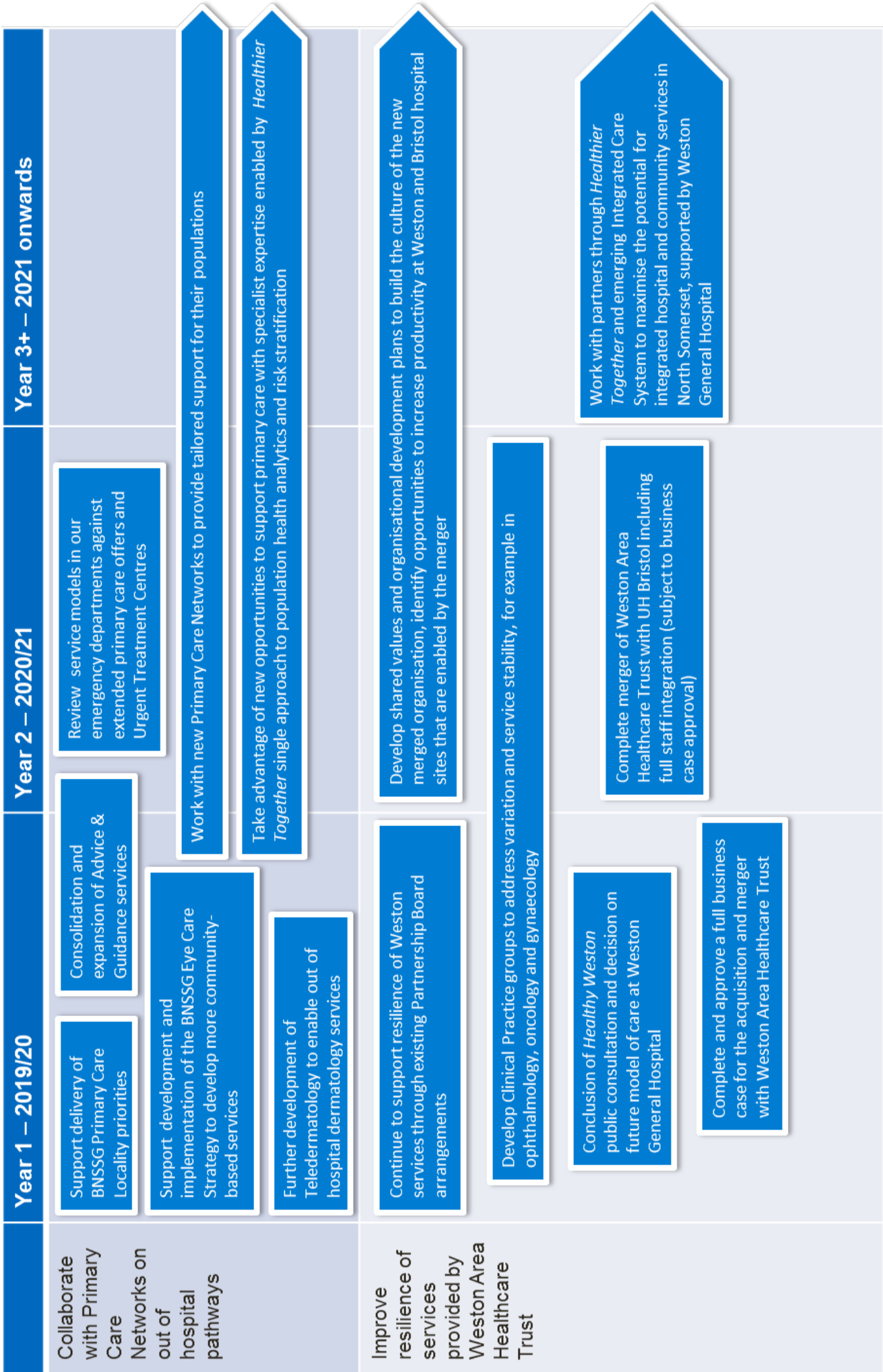
**2. Develop a partnership with the single adult community services provider for BNSSG** to deliver effective admission avoidance and discharge schemes and an integrated therapies model. This will include agreeing and delivering a future model of care for South Bristol Community Hospital as a vibrant local community health and care facility for the people living in the South Bristol locality.

**3. Collaborate with primary care networks on out of hospital pathways** in respiratory, diabetes, endocrine, rheumatology, cardiology, ophthalmology, dermatology services working towards the NHS Long-Term Plan target of a 30% reduction in face-to-face outpatient appointments.

**4. Improve the resilience of services provided by Weston Area Healthcare NHS Trust** through our formal partnership arrangements while we pursue our intention to acquire and merge with the Trust.

The following pages summarise the key **strategic initiatives** that we have planned for year 1, year 2 and year 3 onwards.

	Year 1 – 2019/20	Year 2 – 2020/21	Year 3+ – 2021 onwards
<p>Actively manage growing acute demand</p>	<p>Develop initiatives with system partners to support demand management for paediatric urgent and emergency care</p> <p>Establish same-day adult emergency care models and progress options for Emergency Department physical expansion to optimise internal hospital flow</p> <p>Collaborate with system partners on prevention schemes to maintain health and wellbeing</p>	<p>Work across <i>Healthier Together</i> STP to improve mental health provision across BNSSG</p> <p>Support the introduction of standardised Urgent Care Centres to improve management of urgent care outside of hospital</p> <p>Increase delivery of chemotherapy at South Bristol Community Hospital and Weston General Hospital to improve local access</p> <p>Increase provision of advice and guidance to GPs and enable a shift to non-face-to-face outpatient appointments to support BNSSG plan to move towards a 30% shift in 5 years</p>	<p>Fully implement 7 Day Services for diagnostic and therapy services</p> <p>Collaborate on recommissioning of community enteral tube feeding service</p> <p>Medicine and Surgery to explore Hospital At Home service delivery similar to North Bristol Trust model</p>
<p>Develop a partnership with the single adult community services provider for BNSSG</p>	<p>Support successful procurement and mobilisation of the single community services provider for BNSSG</p> <p>Establish strong working partnership with new BNSSG community provider</p> <p>Collaborate on priority areas including:</p> <ul style="list-style-type: none"> <li>• Home First service</li> <li>• Integrated Frailty Model</li> <li>• SBCH Rehab Service</li> </ul>	<p>Join up hospital clinical pathways with new Community Provider in collaboration with North Bristol Trust and other partners</p> <p>Agree a long-term plan for the service model at South Bristol Community Hospital and begin to implement this</p>	<p>Continue to identify and exploit opportunities to collaborate on admission avoidance and hospital length of stay reduction</p>



# Education and workforce

Our people are the most important part of every service we provide. We are committed to making sure that UH Bristol provides the best possible working environment for our people and that we have enough people with the right skills to build the workforce for the future in our system. We want to be a beacon of outstanding education that motivates and inspires our staff and brings direct benefit to patient care. We need to develop stronger academic partnerships to ensure mutual co-creation of our education priorities leading to joined up solutions for our workforce and staff retention. We will embrace learning as part of who we are, and what we do. We want to become nationally and internationally known as a place where exceptional careers are created.

The main elements of our plan for Education and Workforce will be reflected in our People Strategy:

**1. Culture.** Creating a culture of inclusion and engagement at UH Bristol is absolutely critical to everything that we do. We will focus on: improving and increasing engagement with our people; developing our reward and recognition schemes; making our organisation more diverse and inclusive to tackle issues of inequality; establishing a “zero tolerance” culture around bullying and harassment; improving how our people are managed via appraisals and objectives; investing in staff wellbeing.

**2. Education.** We want to develop exceptional people for exceptional careers at UH Bristol. Our Education Strategy will ensure that we: excel in consistent, high quality education that creates a highly skilled, adaptable and competent workforce; develop a culture of organisational learning; align education to strategic workforce priorities that make a positive difference to patient care and wellbeing; and provide education that nurtures staff motivation and aspirational career development.

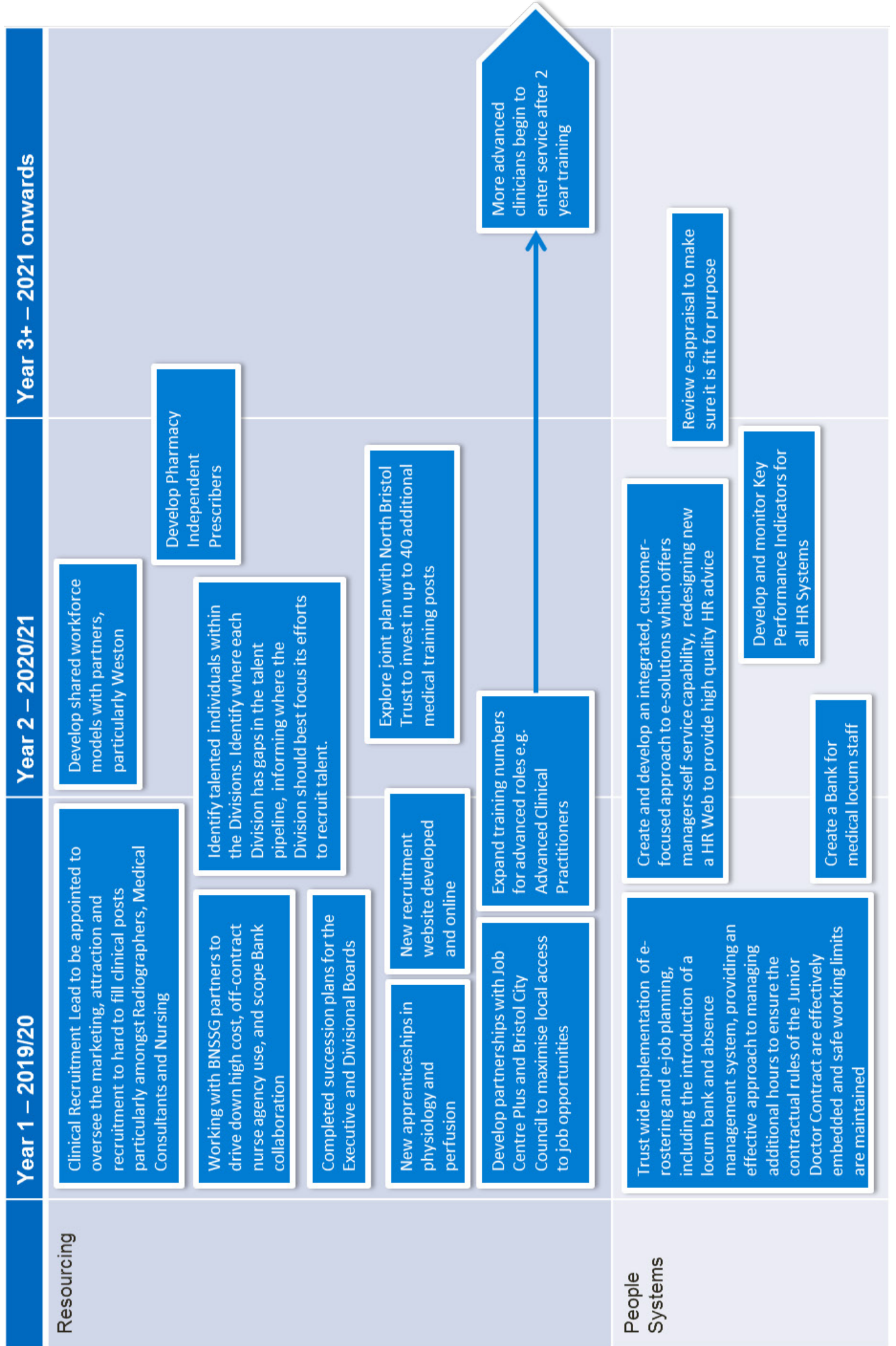
**3. Resourcing.** We will develop and implement a Strategic Workforce Plan to make sure that we respond to the workforce challenges we have and that we plan for and recruit the people that we need for the future. Our plan will include developing new advanced roles like advanced clinical practitioners, a proactive plan to maximise the role for Apprenticeships at UH Bristol, improved recruitment processes and systems and commitment to talent management and succession planning.

**4. People Systems.** We need to maximise the beneficial use of technology to improve how we manage our people. We will develop an integrated set of HR systems that enable our people and our managers to do their jobs well. We will do all of this in partnership with our Digital Hospital Programme team and our information management and technology department.

The following pages summarise the key strategic initiatives that we have planned for year 1, year 2 and year 3 onwards.

	Year 1 – 2019/20	Year 2 – 2020/21	Year 3+ – 2021 onwards	
Culture	<ul style="list-style-type: none"> <li>Develop an integrated strategy for Diversity and Inclusion</li> <li>Implement a renewed Reward &amp; Recognition Framework</li> </ul>	<ul style="list-style-type: none"> <li>Invest in a second cohort for the Executive Leadership Development programme</li> <li>Evaluation effectiveness of staff wellbeing measures put in place in 2019</li> <li>Increase compliance with appraisals and pilot an objective cascade approach</li> </ul>	<ul style="list-style-type: none"> <li>Build on the foundation programme of Dignity at work and the Values to introduce a supportive framework for staff who are being bullied or harassed</li> <li>Support Divisions to continue to increase staff engagement</li> </ul>	<ul style="list-style-type: none"> <li>Be a pilot site for the National High Performing Scheme for future Chief Executives</li> </ul>
Education	<ul style="list-style-type: none"> <li>Implement an education governance process that unites education across the Trust</li> <li>Increase the band 5 nursing supply and skill mix as part of BNSSG</li> <li>Promote the workplace as a location of learning</li> <li>Embed education as part of enabling future focused transformational models of care such as the ACP and Nursing Associate</li> <li>Implement new models of working with local Universities and HEE supported by the BNSSG collaboration</li> </ul>	<ul style="list-style-type: none"> <li>Enhance the role of the library in providing the evidence for clinical decision making and policy development</li> <li>Become an active member of the BNSSG Learning Academy</li> <li>Develop enhanced career frameworks for our band 1-4 workforce</li> <li>Review, grow and innovate digital learning and new technologies</li> <li>Develop a sustainable model for post graduate education</li> <li>Implement a health care support worker academy for enhanced access of education and value of role</li> </ul>	<ul style="list-style-type: none"> <li>Implement a QA process that will lead to external accreditation of internal education with national and international recognition</li> <li>Become an outstanding provider of apprenticeships</li> <li>Support staff in disseminating high quality education outcomes i.e. through publications, conferences &amp; social media</li> <li>Develop education as part of aspirational career progression</li> </ul>	<ul style="list-style-type: none"> <li>Become known as a national and international beacon of excellence</li> <li>Increase external income from education</li> <li>Increase the amount of staff with MSc and doctorate qualifications</li> </ul>





# Research and innovation

Sustaining and implementing our excellence in research and supporting a strong culture of innovation are both key to developing our specialist and regional services. We want to be at the cutting edge of healthcare and we will only achieve that by attracting the brightest minds to provide care for patients, carry out research and transform ideas into new treatments for our patients. We want all of our services to be as effective and productive as possible so that we make the absolute most of all our resources. We will focus our efforts on defining which patients benefit from specific treatments, moving away from a one-size-fits-all approach to truly personalised medicine. In the future, no individual will be offered a treatment that is unlikely to be of benefit merely because they belong to a certain patient cohort. Developing our culture and practice around innovation, with the support and resources necessary to deliver real change in how our services work to make the most of new technology, will deliver real improvements for our patients and our people.

**The main elements of our plan for research and innovation are:**

**1. Continue to grow our research portfolio and reputation for excellence through:**

- Hosting an innovative National Institute for Health Research (NIHR) Applied Research Centre
- Grow our NIHR Biomedical Research Centre over next two years in preparation for renewal in 2021 with a continued focus on cardiovascular, nutrition, mental health, perinatal and reproductive health research and surgical innovation, underpinned by cross cutting themes in translational population science and biostatistics, evidence synthesis and informatics
- Bidding for and secure an NIHR clinical research facility in 2021
- Building on the collaborative value achieved through Bristol Health Partners and integrated regional working to form an academic health science centre, either virtual or actual, depending on the national direction
- Working with the Clinical Research Network to transform the performance of the south west research environment
- Developing a culture whereby participation in research (both for staff and patients) is the default as opposed to the exception – all patients should be offered the opportunity to participate in a clinical trial if appropriate
- Liaising with our academic partners to ensure that our class-leading clinical services and areas of academic excellence grow in tandem.

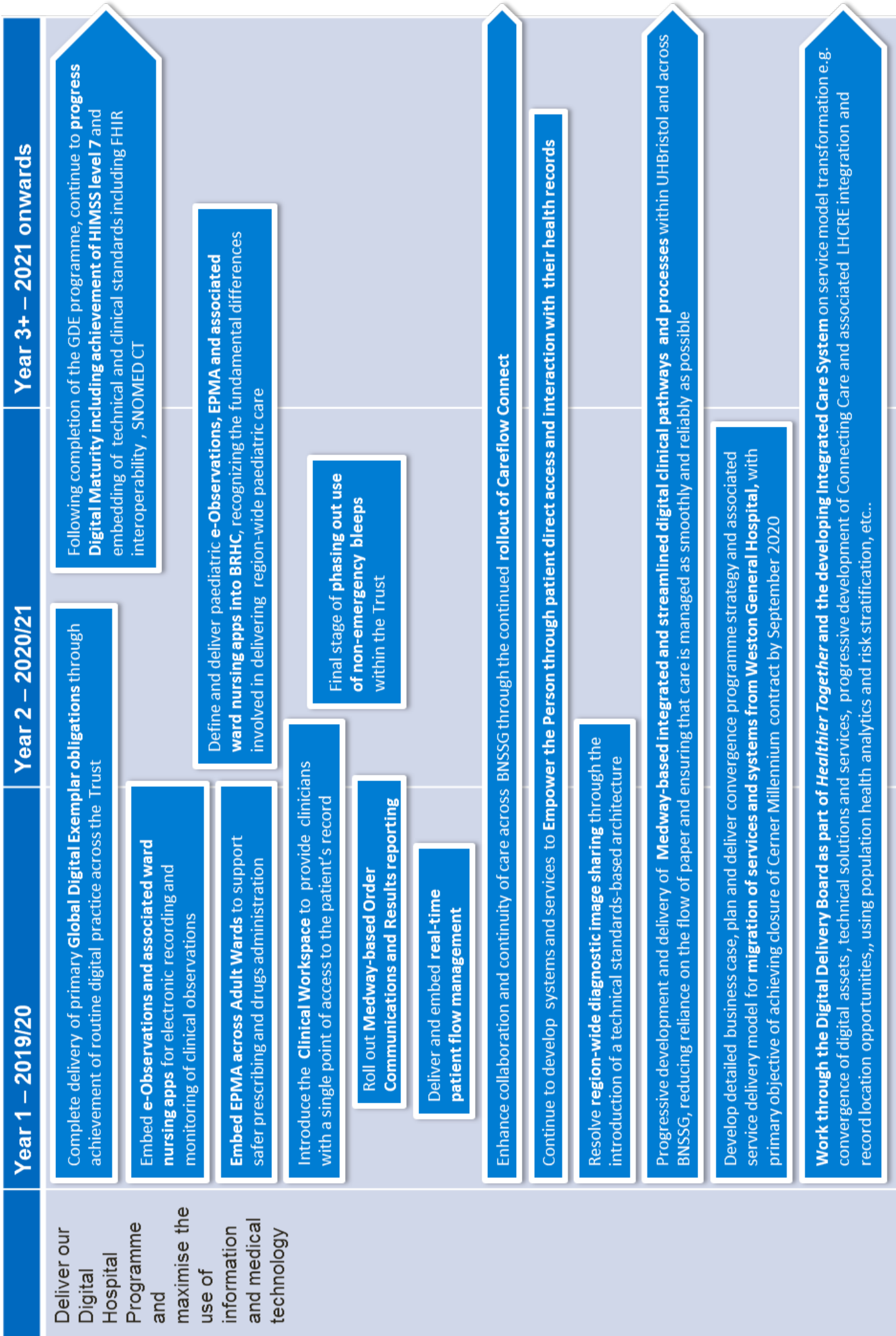
**2. Develop our people and our culture to enable improvement and innovation in our**

**services.** We want to develop our staff to improve and innovate in their services and lead world class research that benefits patients, including increasing joint clinical/research workforce roles. We will seek to increase the proportion of staff that are appointed jointly with the Universities so that a research culture is firmly embedded throughout the organisation. We want to build our Quality Improvement (QI) capacity and capability throughout the organisation through continued development of our QI Academy including development of a 'Gold' programme.

**3. Deliver our Digital Hospital Programme and maximise the use of information and medical technology.** We are one of the first phase of the acute Global Digital Exemplar sites and have a well-developed strategy for the achievement of benefits through digital transformation of our services. We want to maximise the routine use of technology to drive innovation and improvement, including diagnostic and artificial intelligence technologies, patient communication tools, new clinical devices and techniques that will realise the Long Term Plan's digital vision of 'Empowering the Person'.

The following pages summarise the key strategic initiatives that we have planned for year 1, year 2 and year 3 onwards.

	Year 1 – 2019/20	Year 2 – 2020/21	Year 3+ – 2021 onwards
<p>Continue to grow our research portfolio and reputation for excellence</p>	<p>Deliver the continued growth and development of our research portfolio through these ongoing actions:</p> <ul style="list-style-type: none"> <li>Identify and widely publicise the impacts of translational and applied health services research at UH Bristol on patient care</li> <li>Dynamically align our research themes with the priority areas of our regional academic partners</li> <li>Ensure all pump-priming research funds allocated by UH Bristol are in priority research areas</li> <li>Work with regional partners to develop shared research facilities and infrastructure</li> <li>Actively work with our regional partners to foster the embedding, implementation and evaluation of research and research evidence into clinical care across the region.</li> <li>Promote targeted internal funding calls available to all Trust staff, for small grants and dedicated research time using local charities and Research Capability Funding to generate the evidence for new research proposals</li> <li>Make explicit and transparent the allocation of research funding to each Division, based on activity and strategic priorities</li> <li>Ensure commercial partnerships are proactively identified, encouraged and flagged to appropriate research active staff. Market UH Bristol staff and facilities to commercial partners</li> <li>Ensure commercial studies that are undertaken fit the research priorities and strengths within UH Bristol, provide patients with novel cutting-edge treatments and contribute funds to increase capacity for further research</li> <li>Align research with clinical services prioritisation and ensure these activities complement and inform each other and are appropriately evaluated</li> <li>Continue to develop best practice in costing all elements of research, specifically focusing on excess-treatment costs</li> </ul>		
<p>Develop our people and our culture to enable improvement and innovation in our services</p>	<p>Implement changes to legal agreements to support offsite trials (eg WAHT and SBCH).</p>	<p>Develop additional space for research as part of Phase 5 Capital Programme projects e.g. BHI and BHOc expansion</p>	
	<p>Incorporate the importance of research in all new staff induction programmes</p>	<p>Prepare and deliver submission of bids for National Institute for Health Biomedical Research Centre and Research Clinical Research Facility in 2021</p>	
	<ul style="list-style-type: none"> <li>Develop our Quality Improvement Academy and introduce “QI Gold” level</li> <li>Increase the visibility of underrepresented professions such as AHPs and nursing by strengthening their research capacity and capability</li> <li>Increase the numbers of new Trust appointments with dedicated research time working with academic partners to increase joint appointments</li> <li>Continue to facilitate and performance-manage Trust staff who receive funding to ensure timely submission of the highest-quality grant applications</li> <li>Maximise appropriate Divisional reporting structures for research</li> <li>Ensure meetings and workshops are held to showcase Trust research and attract potentially research-active staff and trainees</li> <li>Ensure that recruitment of patients into appropriate NIHR portfolio studies forms part of the core job descriptions for all research active staff</li> <li>Support Divisions to allocate dedicated research time to individuals who are consistently performing research at a high level</li> <li>Where appropriate, continue to develop combined ‘Clinical Research Champion’ roles</li> </ul>		



# Section four - Our enabling strategies

This section will:

- Describe our enabling strategies which will be developed and approved during the course of 2019/20.

## Our integrated strategy framework

Our overall Trust strategy sets priorities, objectives and a strategic plan in four areas outlined above. All of this is supported by strategies across our organisation.

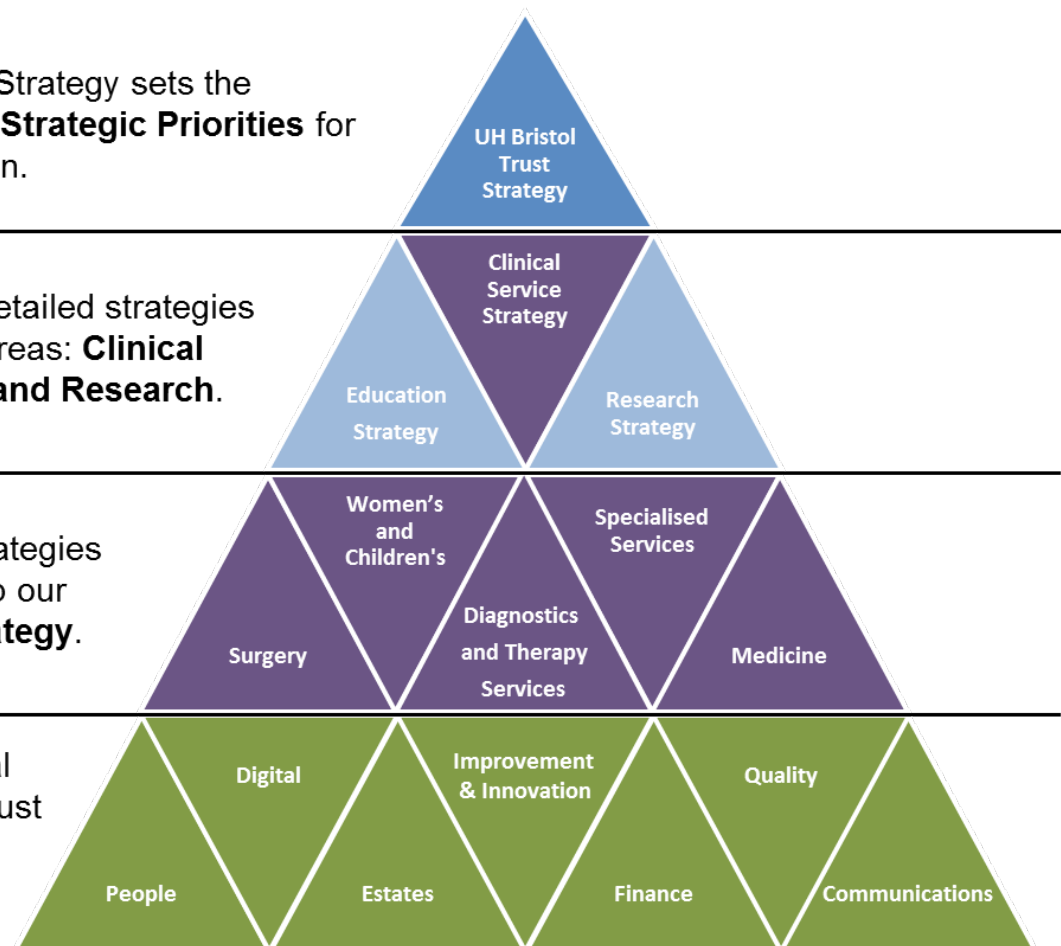
We have an Integrated strategy framework where our Trust strategy sets the overall mission, vision and strategic priorities for an integrated set of supporting strategies.

The UH Bristol Trust Strategy sets the **Mission, Vision** and **Strategic Priorities** for the whole organisation.

Supported by more detailed strategies for our core service areas: **Clinical Service, Education and Research.**

And by Divisional Strategies that together make up our **Clinical Service Strategy.**

Delivery of our clinical Divisions and core Trust plans is supported by **Enabling Strategies**



## Our people strategy

Our people strategy will set the vision for what UH Bristol wants to achieve in three key areas related to our workforce: culture, resourcing and people systems. As part of ensuring that we raise the status and profile of education at the Trust, the education strategy will be written and approved as a stand-alone strategy, separate from but very much connected with the people strategy.

The culture section of the people strategy will focus on creating a culture of inclusion and engagement at UH Bristol. Important elements of this section of the strategy will include: improving and increasing engagement with our people; developing our reward and recognition schemes; making our organisation more diverse and inclusive to tackle issues of inequality; establishing a “zero tolerance” culture around bullying and harassment; improving how our people are managed via appraisals and objectives; investing in staff wellbeing.

The resourcing section of the strategy will focus on the delivery of our workforce plan. This work will include the development of new roles at the Trust, creating and managing new career pathways at UH Bristol like apprenticeships. We will build on marketing and attraction solutions to place the Trust on a platform of employer of choice so that we can recruit people with the right skills, knowledge, experience and values to the organisation. There will be a new focus on talent management and succession planning to ensure that we have a pipeline of talented people to lead our organisation in the future.

Finally the people systems section of the strategy will focus on improving the use of technology and digital systems to improve how we manage our people. This will involve better integration and utilisation of the systems that we already have as well as adding some new digital systems. We will do this in partnership with the Digital Hospital programme and information management and technology department and our aim with this work will be to enable truly high quality people management and personal development.

## **Our quality strategy**

The quality of service that we provide is our overriding priority and the common purpose that brings all of our staff together, no matter what roles they do and where they work, and this is rightly central to both our mission and vision as an organisation. In common with the rest of the NHS, we face a significant challenge: delivering the highest quality of services for our patients whilst ensuring future financial sustainability. This means doing more for less, doing it better and doing it smarter.

The Trust’s current quality strategy runs from 2016 until 2020. The ambitions expressed in that strategy are to:

- Cancel fewer operations
- Reduce patient waiting times
- Improve the safety of patients by reducing avoidable harm
- Strengthen our patient safety culture
- Create new opportunities for patients, families and staff to give us feedback about their experiences
- Develop a customer service mind set across the organisation, including how we handle and respond to complaints
- Take a lead role in the development of a new national system of rapid peer review of unexpected patient deaths, implementing learning about the causes of preventable deaths
- Significantly improve staff satisfaction, making UH Bristol an employer of choice.

A mid-term review of the quality strategy undertaken towards the end of 2018 affirmed the continuing relevance and appropriateness of these ambitions. A quality strategy for 2020-2025 will be developed in late 2019/early 2020.

## Our digital strategy

The digital strategy will ensure that innovation; agility, efficiency, technology, data and patient safety are at the forefront of all our services, transformation and change. The team will drive digital transformation across the Trust in partnership with our chief clinical information officers (CCIOs) and other clinical leads to ensure that the scope, direction and governance of our digital programmes are focussed on improvements to working practices, patient safety and outcomes.

We need to bridge the digital gaps between teams and departments in our Trust, and external partner organisations, by introducing digital pathways to improve the flow of patient information. We want to reduce delays associated with organisational and system boundaries, whilst improving cost effectiveness and patient safety and improving digital maturity across BNSSG to ensure that collaboration is part of everything we do.

The digital strategy will put plans in place to support the complex needs and expectations of patients, as they become more empowered to take control of their health and wellbeing. To enable and support this we will be increasing the number of patients accessing BNSSG-wide care records.

To support all of this, we will continue the required developments and improvements to our corporate support functions, not only through capacity and efficiency but also ensuring we work to industry standards. We need to be assuring that we are able to provide the required levels of service to support our clinical systems, in preparation to become a fully digital hospital. This will included strengthening our out-of-hours support teams and making significant improvements to the availability, accessibility, reliability and continuity of our clinical systems.

## Our improvement and innovation strategy

Our improvement and innovation strategy will help people at UH Bristol to deliver our strategic plans by creating both capacity and capability in the organisation to deliver change. We will ensure improvement and innovation is embedded in our culture and governance, carried through our policies, processes and assurance approaches. Our current Transformation Programme, called Transforming Care, is built around six pillars of innovation:





The annual plan for improvement and innovation projects is set at the start of each financial year, and projects are grouped into three themes: Digital Hospital; Working Smarter; and Quality Improvement.

Through our Quality Improvement Academy we will promote and encourage innovation and improvement, in order that staff with good ideas to improve services can bring them to life, for the benefit of patients and their carers, staff, the Trust and the wider NHS. We will help people at UH Bristol to work smarter by learning about how to reduce waste and focus more on creating value in everything we do. We will support identification and realisation of the project benefits to ensure maximum value from the investment in the change. We will spread learning across the Trust from our quality improvement projects through the Quality Forum. We will also ensure that we learn from other organisations, for example through our links with the West of England Academic Health Science Network, the BNSSG Sustainability and Transformation Partnership, our associate membership of the Shelford Group of NHS hospital trusts, and attendance at the Improvement Directors' Network.

To create ownership and to build capacity to change, we provide staff with education and support to give them the skills to lead improvement themselves. Quality Improvement Academy Fellows from across the organisation deliver and support the following:

- QI Academy Bronze – an introductory programme to innovation and improvement for staff wanting to develop a basic understanding of quality improvement tools and methodologies.
- QI Academy Silver Programme – a programme to develop the knowledge and skills to be able to plan and deliver a small quality improvement project.

Our renewed innovation and improvement strategy, to be delivered in 2019/20 will build on this foundation and we will introduce the QI Academy Gold Programme for larger improvement and transformational projects.

## **Our finance strategy**

UH Bristol's strategic capital investment programme and associated medium term financial plan underpins the delivery of the Trust's long term strategy. In December 2006 the Trust agreed a ten year strategy which invested particularly in new buildings, major medical equipment and digital infrastructure. That financial strategy effectively came to an end with the completion of the Phase 4 Capital Programme in 2017. In 2018 the Board approved a new Strategic Capital Investment Programme of £237million for the five years from 2018/19 to 2022/23. This included a phase 5 programme of investment aligned to the Trust's strategic priorities and objectives, investment in medical equipment, information technology and environment. The medium term financial plan, approved by the Board, delivers financial surpluses and cash balances as well as external financing to support the planned level of investment.

Delivery of the strategic capital investment programme will be reported through the senior leadership team and Finance Committee to the Trust Board. Individual schemes will be managed through the Capital Programme Steering Group and Strategy Steering Group. The Phase 5 Programme Board will manage the investments in major building and refurbishment projects and will report to both groups.

## **Our estates strategy**

The purpose of our estates strategy is to provide enabling support to the delivery of the Trust clinical strategy. It will consider the site planning options for a range of service delivery proposals and ensure the use of the limited available site capacity is used to the best advantage.

Although the Trust strategy considers a five-year planning horizon, the estate strategy will not only consider this planning window, but will have to provide a forward view for the next period to ensure that adequate estate options are available for future clinical or non-clinical developments. Whilst long term service planning represents a challenge in a health landscape renowned for change, the Trust already has a number of strategic priorities that it must address. Our site in the centre of Bristol is approaching full capacity, and the estates strategy will include provision to consider options for near site or off site developments.

Options for how the site might be developed in a range of scenarios are contained within a site development document that will be appended to the estates strategy. This provides a detailed analysis of the site, the opportunities and constraints of the site, identifies the fixed points for future development and considers options for the evolving estate priorities. The emerging culture and arts strategy for the Trust will be incorporated into the estates strategy to ensure that we create a healthy and healing environment through our culture and arts programme and fully embed into future design considerations across the Trust estate.

## **Our communications strategy**

Engaging with our workforce, communicating the Trust's strategy and making it real for all staff so they know what it means to them is pivotal to delivery.

The current communications strategy mission is to communicate candidly with all audiences to build knowledge and understanding of the Trust's work and roles as a provider of high quality care, and as a research, teaching and learning organisation, to give all audiences the information they need to interact with the Trust effectively.

The Trust's communications strategy is due to be reviewed and refreshed during 2019/20. It will outline how the communications team will continue to ensure its work is aligned with the strategic direction of the Trust in all of its communications with its workforce, patients, members of the public, partner organisations and wider stakeholders.

# Section five - Governance, assurance and communication

## This section will:

- Describe our approach to the governance, assurance and communication of our Trust strategy.

Our strategy will set the direction for the organisation between now and 2025. The Board has set the strategy, in consultation with the council of governors and wider stakeholder community, and will need confidence that progress is being made and have opportunities to readjust the strategy to recognise the changing landscape that the organisation is working in.

## Ensuring delivery

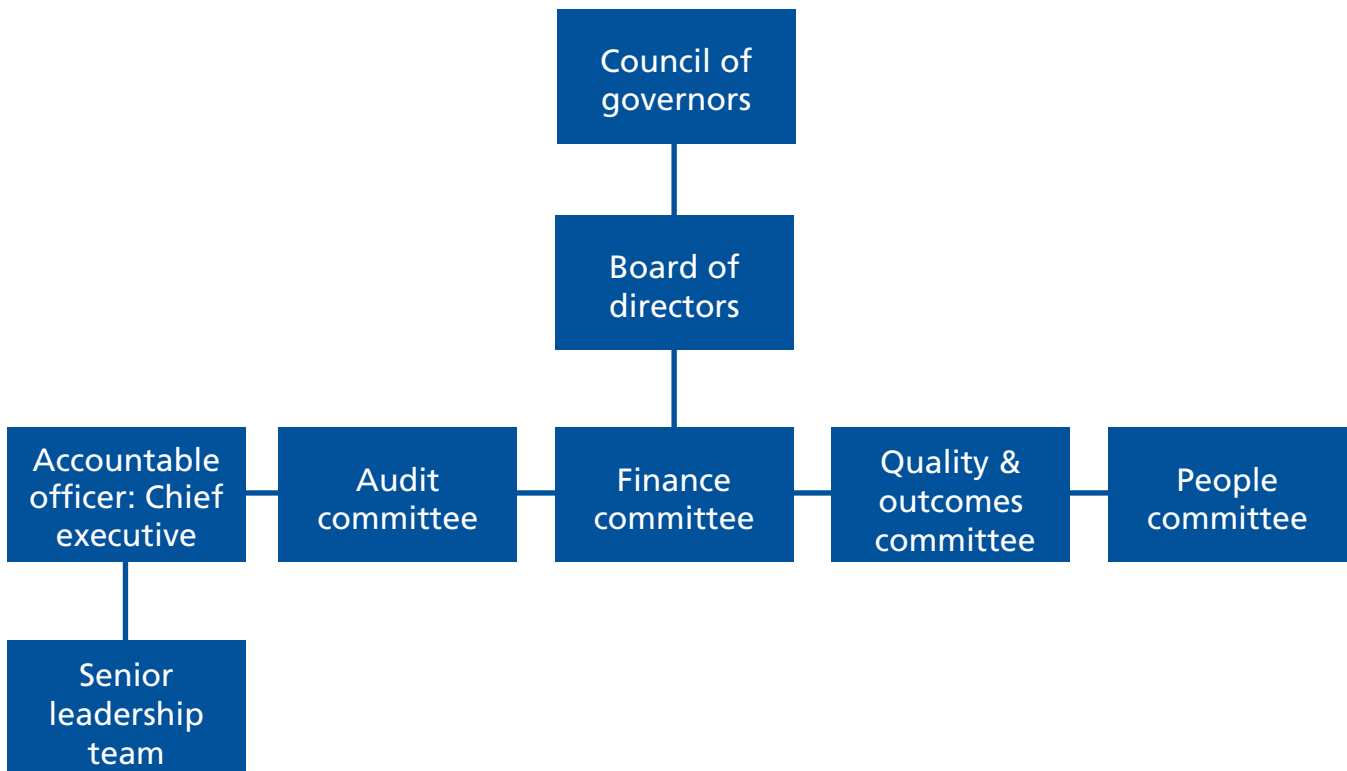
To ensure delivery, the Board will set an annual operating plan which seeks to deliver the annual milestones described within the strategy alongside other everyday requirements. The annual plan will be approved by the Board at the start of the year and will include a set of corporate objectives and in-year milestones. Progress against these objectives will be monitored by the Board quarterly. At the year end, the Board will consider delivery of the plan against the strategy to identify if any adjustments need to be made.

The Board has a formal development programme in place which provides dedicated time to consider key strategic questions and debate approaches to key challenges or risks. The views of the Board from these discussions then inform actions taken through the governance structure as necessary for formal decision.

The Board also considers the strategic risks to the Trust and these are described within the Strategic Risk Register. This is reviewed quarterly alongside progress against the operating plan, so that the Board can consider whether there are additional actions or adjustments that need to be made on a tactical or strategic level.

The Strategic Risk Register is supported by an enterprise risk management approach which ensures that risks at all levels of operation are captured, analysed, evaluated and where possible controlled. These risks are captured in divisional risk registers, with the most significant operational risks reported via the Corporate Risk Register to the Board.

## Delivery and assurance processes



The chief executive, as the accountable officer, is responsible for delivery of the strategic plans and annual operational plan. The chief executive oversees delivery through the senior leadership team, which is comprised of the executive team, divisional leadership and other key corporate leaders. Divisional performance of the six operating divisions (five clinical divisions and Trust Services) is monitored through a rigorous performance management framework which seeks to hold the divisional teams to account for delivery of their service strategies and operating plans.

The Board has constituted four committees (People, Quality and Outcomes, Finance and the Audit Committees) which provide assurance to the Board on the delivery of plans. The work plans of the four committees are aligned with the Strategic Risk Register, so that they prioritise seeking assurance about the controls which will support mitigation of these key strategic risks. They also undertake deep dive reviews, on behalf of the Board, into areas of risk or where performance has deviated from plan. The chief executive and committees will also rely upon the work of the internal auditors, who test key internal control processes, and provide assurance on their effectiveness.

The senior leadership team and the committees will support the development of a suite of enabling strategies which will define in detail how the Trust will deliver the overarching strategy. These are allocated as follows on the next page:

Senior Leadership Team	Finance Committee	People Committee	Quality & Outcomes Committee
Divisional Strategies which comprise Clinical Strategy	Finance Strategy	Education Strategy	Research Strategy
Improvement & Innovation Strategy	Digital Strategy	People Strategy	Quality Strategy
Communications Strategy	Estates Strategy		

## Strategy launch and communication of progress

Our strategy will have a formal launch on 1 May 2019 followed by a series of engagement events across our hospitals to celebrate the launch over the following month. UH Bristol has established internal communication channels – a weekly newsletter to staff, a quarterly staff magazine, intranet news articles and ongoing poster campaigns – and all of these will be integrated with delivery of the strategy to make sure that the messages we send out are coordinated, consistent and engage our people. We will also make sure that we use our communication systems to listen as we move towards 2025. We will use events, surveys and other methods to seek feedback on how we are doing and how progress is perceived among our people.

The Board will report on progress through the quarterly reviews against the operating plan and in the Performance Section of the Trust’s Annual Report. Delivery will also be reported through various monthly reports to the Board and its committees, for example achievement of Constitutional Standards will be reported through the Quality and Performance Report.

# List of Abbreviations

BEH	Bristol Eye Hospital
BHI	Bristol Heart Institute
BHOC	Bristol Haematology and Oncology Centre
BNSSG	Bristol, North Somerset and South Gloucestershire
BRHC	Bristol Royal Hospital for Children
BRI	Bristol Royal Infirmary
CAR-T	Chimeric Antigen Receptor T-cell
CF	Cystic Fibrosis
CICU	Cardiac Intensive Care Unit
CQC	Care Quality Commission
DGH	District General Hospital
EU	European Union
GIRFT	Getting It Right First Time
HITs	Health Integration Teams
ICS	Integrated Care Systems
ICU	Intensive Care Unit
JAG	Joint Advisory Group
MOU	Memorandum of Understanding
MRSA	Methicillin-Resistant Staphylococcus Aureus
NICU	Neonatal Intensive Care Unit
NIHR	National Institute of Health Research
PEWS	Paediatric Early Warning Scores
RCI	Reference Cost Index
STP	Sustainability & Transformation Partnership
SWOT	Strengths, Weaknesses, Opportunities and Threats
UH Bristol	University Hospitals Bristol NHS Foundation Trust
WECA	West of England Combined Authority
WLI	Waiting List Initiative

Respecting everyone  
Embracing change  
Recognising success  
Working together  
**Our hospitals.**