

## Trust Board

Thursday, 5<sup>th</sup> May 2022

<b>Report Title:</b>	Trust Strategic Plan
<b>Executive/NED Lead:</b>	Dr Shane Gordon, Director of Strategy
<b>Report author(s):</b>	James Archard, Strategy Implementation Programme
<b>Previously considered by:</b>	EMC

**Approval**       **Discussion**       **Information**       **Assurance**

### 1.0 Executive summary

This report provides an update on the refresh of the Trust strategic plan and success measures.

Key points to note are:

1. The previous strategic plan included 96 schemes that have now been reviewed. The review considered:
  - a) Whether the scheme is completed and closed and can be removed from plan;
  - b) Whether the scheme is not yet completed, but should be removed from plan due to a change;
  - c) Whether a scheme is yet to be delivered, but to be retained on the plan.
2. Of the previous 96 schemes, 38 of these are now closed. This includes 38 plans delivered and completed, and 2 items that are now closed and removed from plan due to a change in project direction. The 38 completed schemes can be seen in more detail later in this paper, along with details of the rationale for the removal of four schemes from the overall strategic plan.
3. Reviewing schemes that are to be carried-forward, alongside proposed new schemes, the overall first draft strategic plan now includes (excluding closed and completed items) 133 schemes.
4. The first draft proposed 133 schemes of the strategic plan are aligned to the following programmes / categories of the Time Matters Board programme:
  - a) Building for Better Care
  - b) Diagnostics\* (Not currently a programme, but under consideration)
  - c) Digital
  - d) Elective
  - e) Ipswich & East Suffolk Community Services
  - f) North East Essex Integrated Community Services
  - g) Quality Improvement
  - h) Quality Priorities
  - i) Resource Optimisation
  - j) Urgent & Emergency Care
  - k) Workforce
5. The allocation of the proposed revised strategic plan items are aligned to these programmes as follows:

PROGRAMME	Grand Total
BFBC	11
Diagnostics	0
Digital	25
Elective	21
IESCS	4
NEEICS	15
OTHER 1	1
Quality Improvement	10
Quality Priorities	10
ROB	4
Urgent & Emergency Care	15
Workforce	17
<b>Grand Total</b>	<b>133</b>

6. The detailed strategic plan and success measures are included at Appendix A.

## 2.0 Strategic Plan refresh – Closed schemes

The closed schemes include:

### Building for Better Care:

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date	Status Tracking against Planned date
1	BFBC	Ipswich 3rd MRI commissioned.	Jan-21	Complete
2	BFBC	Transfer NHSP Community properties (First three sites)	Mar-23	Complete

### Diagnostics:

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date	Status Tracking against Planned date
1	Diagnostics	PHE TUPE transfer	Oct-21	Complete
2	Diagnostics	Pathology Logistics tender complete	May-21	Complete
3	Diagnostics	NEESPS disaggregation	Oct-20	Complete
4	Diagnostics	Scope the potential to develop a diagnostic network (learning from pri	Nov-20	Complete
5	Diagnostics	Reconfiguration of micro biology services – West Suffolk split and repa	Mar-21	Complete
6	Diagnostics	Transformation phlebotomy services - Roll out of Swift Queue	Mar-21	Complete

### Digital:

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date	Status Tracking against Planned date
1	Digital	Informatics Enabling Strategy approved by Trust Board	Nov-20	Complete
2	Digital	Evolve Roll-out Colchester, Structured Evolve Messaging for Primary Ca	Aug-21	Complete
3	Digital	Ipswich Wide Electronic Requesting and Results Pathology	Sep-21	Complete
4	Digital	Integrated health data available from multiple providers (HIE)	Aug-20	Complete
5	Digital	Vital signs solution fully deployed across ESNEFT	Feb-21	Complete
6	Digital	Unified Community ESNEFT Infrastructure - East Suffolk	Dec-20	Complete
7	Digital	Colchester Wide Electronic Requesting and Results Pathology	Nov-22	Complete
8	Digital	Corporate Transformation: Agile Working - The first formally designate	01-Mar-22	Complete
9	Digital	Corporate Transformation: Rationalisation of Estate for Corporate Big	01-Mar-22	Complete

### Ipswich & East Suffolk Community Services:

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date	Status Tracking against Planned date
1	IESCS	Create capacity for INT managers to be locality leads rather than team supervisors		Complete

### Elective:

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date	Status Tracking against Planned date
2	Elective	Endoscopy Insourcing tender complete	Dec-20	Complete
3	Elective	Digitalised Pre-Op system across both hospitals.	Nov-20	Complete
4	Elective	Identification of Services to move from Acute to Community Locations	Jan-21	Complete
5	Elective	Increase 23 hour day surgery model	Mar-23	Complete
6	Elective	BAAGS (Straight to test, Advice&Guidance, Blue Card, Good News Letter)	Nov-20	Complete
7	Elective	BAAGS (Straight to test, Advice&Guidance, Blue Card, Good News Letter)	Jan-21	Complete
8	Elective	Completion of Telederm pilot in IES	Mar-21	Complete
9	Elective	Identification of Services to move from Acute to Community Locations	Mar-21	Complete

### Workforce:

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date	Status Tracking against Planned date
1	Workforce	Apprenticeship training provider status achieved	Feb-22	Complete
2	Workforce	Our People Strategy 2020-22 approved by Trust Board	Nov-21	Complete
3	Workforce	On/Off Boarding - Implemented new corporate process for all staff who start, leave or move role within the Trust	Mar-22	Complete
4	Workforce	Deliver and embed the Health & Care Academy	Oct-20	Complete
5	Workforce	Delivery plan for the Wellbeing Hub which sets out how this will support staff in improving their mental, physical and financial health	Sep-20	Complete
6	Workforce	'Work from anywhere' policy and framework published so our staff can work from home or any Trust location effectively and supported by their manager	Dec-20	Complete
7	Workforce	e.Job plans for all clinical workforce (NHS long-term plan)	Nov-21	Complete

### North East Essex Integrated Community Services:

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date	Status Tracking against Planned date
1	NEEICS	Frailty: 7 day service in place frailty at Colchester. Both sites to achieve	Sep-20	Complete

### Quality Improvement:

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date	Status Tracking against Planned date
1	Quality Improvement	Deliver the full project plan for the Faculty of Education, so it brings to	Mar-22	Complete
2	Quality Improvement	Improve Interventional safety by embedding a safety culture	Dec-22	Complete

### Quality Priorities:

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date	Status Tracking against Planned date
1	Quality Priorities	Implementation of the Patient Experience Network co-produced with d	Sep-21	Complete

### Urgent & Emergency Care:

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date	Status Tracking against Planned date
1	Urgent & Emergency Care	Ipswich EAU Reconfiguration (Building, Clinical & Operations)	Dec-20	Complete

### The two schemes removed from plan (Elective) include:

TMB Programme Alignment	Strategic Plan item	Planned Completion Date
Elective	Identification of Services to move from Acute to Community Locations	Mar-21
Elective	Increase 23 hour day surgery model	Mar-23

These schemes have been superseded by the new schemes within the elective programme.

## 2.0 Draft new strategic plan – work in progress – via programme

The following tables are a draft of the proposed refreshed strategic plan content, and for the purpose of this report, aligned to the Time Matters Board programmes:

### a) Building for Better Care

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date
3	BFBC	Aseptic Unit Upgrade (Col)	Aug-22
4	BFBC	IH Breast Unit development completed	Dec-22
5	BFBC	IH Childrens Dept upgrade completed	Nov-23
6	BFBC	Interventional Radiology and cardiac angiography (IRCA) unit (Col)	May-22
7	BFBC	Estate Strategy - Urology dept – Relocation to sufficiently sized area	Jan-24
8	BFBC	Estate Strategy - Endoscopy dept - Extension in to Incumbent Urology A	Mar-24
9	BFBC	Agree Capital Pipeline for 2022/2022 projects (as project approved will	Jun-22
10	BFBC	Estate Strategy - rationalisation of IH North-end	Mar-23
11	BFBC	Estate Strategy - IH Staff accommodation upgrade	Dec-23
12	BFBC	Estate Strategy - Use & development of St Clements land	Mar-22
13	BFBC	Estate Strategy - Commencement of Tower Block refurb (7th floor)	

## b) Digital

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date
10	Digital	Digital Histopathology	Mar-23
11	Digital	Implementation of SMARTcare (Track & Traceability)	Mar-23
12	Digital	Corporate TOM: Delivery of strategic plan for shared corporate functions	Mar-23
13	Digital	Critical Care solution cross site (Ipswich and Colchester)	Jun-22
14	Digital	WinPath Enterprise Ipswich Site Go Live	Jul-23
15	Digital	ESNEFT Wide Order Comms - Electronic Requesting and Results Reporting	Dec-22
16	Digital	Unified Evolve Cloud for ESNEFT	May-22
17	Digital	Fully deployed shared order communications across all investigations and referrals	Sep-24
18	Digital	Fully Digitised Clinical and Operational processes for ESNEFT	Sep-24
19	Digital	ESNEFT Domain Project	Mar-23
21	Digital	Longitudinal Health and Care Record Integration Complete	Sep-24
21	Digital	New EPR live across ESNEFT	Sep-24
22	Digital	Unified ESNEFT PACS	Jul-24
23	Digital	Unified Radiology System ESNEFT	Dec-22
24	Digital	Shared Care Record optimisation (HIE)	Aug-22
25	Digital	Order Comms Interop Solution via Evolve	Aug-22
26	Digital	ESNEFT Clinical Photography Solution	May-22
27	Digital	ESNEFT Cardiology	Jun-22
28	Digital	Patient Portal	Jul-22
29	Digital	ESNEFT Self- Check in Kiosk solution	Jan-23
30	Digital	RPA Development Programme	Mar-23
31	Digital	Software Development Strategy and Roadmap	Sep-22
32	Digital	NICS (ICT) Transition	Jun-22
33	Digital	Unified TeleCommunications Strategy	Jul-22
34	Digital	Cyber Security Strategy	Oct-22

### c) Elective

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date
1	Elective	New Constable Day Surgery Unit (Linked to EOC)	Apr-24
10	Elective	Development of a Rapid Diagnostic Service (RDS) to enable early identification	May-22
11	Elective	Clacton CDC Phase 2 operational	Apr-23
12	Elective	Ipswich CDC Operational	Apr-24
13	Elective	Clacton Community Diagnostic Centre phase 1 complete	May-22
14	Elective	Clacton Community Diagnostic Centre phase 2 complete	Jul-23
15	Elective	Dame Clare Marx Building (elective orthopaedic centre) - additional theatre	Aug-22
16	Elective	Additional laparoscopic theatres at Ipswich - funding secured	Aug-22
17	Elective	Dame Clare Marx Building (Elective Orthopaedic Centre including extension)	Oct-23
18	Elective	Upgraded Endoscopy Units on both sites and new UIS at Ipswich Hospital	Sep-24
19	Elective	Completion of Telederm pilot in IES	Mar-23
20	Elective	Test results in 7 days	Mar-23
21	Elective	Elective – PIFU 5% outpatient to PIFU	Mar-23
22	Elective	Elective – Outpatient FU 25% reduction	Jun-23
23	Elective	A&G built into Job planning	Mar-23
24	Elective	Theatre Efficiency Programme	Sep-23
25	Elective	Outpatient Transformation to include: reduction of follow ups by 25%,	Mar-23
26	Elective	Theatre Efficiency Programme	Mar-23
27	Elective	Clinical Pathways relating to GIRFT/HVLC - implement recommendations	Mar-23
28	Elective	Diagnostics - 99% of patients to receive their diagnostics within 6 weeks	Dec-22
29	Elective	Delivery of 28 day Faster Diagnostic standard (Cancer)	Dec-22

#### d) Ipswich & East Suffolk Community Services

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date
2	IESCS	Create support capacity specifically focused on the delivery of locality plans	Mar-23
3	IESCS	Establish single team processes for assessing and planning the delivery of locality plans	Mar-23
4	IESCS	Deliver plans at a connect area level with tangible indicators of success	Mar-23
5	IESCS	Engage INTs in the delivery of specific Alliance-wide plans	Mar-23

#### e) North East Essex Integrated Community Services

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date
2	NEEICS	Reporting of NEECS Community Datasets (same as acute data)	Jun-22
3	NEEICS	Better Access for Local Services - Tackle inequity by targeting care to meet local needs	Mar-25
4	NEEICS	Keeping people healthy and receiving care in local area .Provide resilience	Mar-25
5	NEEICS	Work as part of an integrated care system, joining up care to create efficiencies	Mar-25
6	NEEICS	Ensure delivery of true transformation of all North East Essex Communities	Mar-23
7	NEEICS	Ensure delivery of true transformation of all North East Essex Communities	Mar-23
8	NEEICS	Set out the further development of transformation, leading into true integration	Mar-23
9	NEEICS	Provide assurance to the NICS Collaborative that we have completed the transformation	Mar-23
10	NEEICS	To develop an enhanced frailty service which will support the frail population	Mar-23
11	NEEICS	To implement a Virtual Ward (Onboarding 74 patients by Oct 2022) which will	Oct-22
12	NEEICS	To further integrate our services to provide a robust urgent community service	Mar-23
13	NEEICS	Following the successful pilot of the Live Well Neighbourhood Teams in Ipswich	Mar-23
14	NEEICS	To maximise opportunities for business growth, work will be undertaken	Mar-23
15	NEEICS	Mobilisation and Standardisation of all North East Essex Community Services	Mar-22
16	NEEICS	Surge Planning. To build resilience in community to keep people local to their	Mar-23



## g) Quality Improvement

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date
3	Quality Improvement	Deteriorating patients: Sepsis 6. Delivery of compliance with sepsis 6 care bundle (timeliness of escalations), initially in Emergency assessment areas Dec 2022 and then broader areas by March 2024 (aligned with digital vital signs monitoring)	Dec-22
4	Quality Improvement	Getting it right first time (GIRFT) programme improvements (Various recommendations with different timescales per Speciality) To be measured through top 3 patient benefits - initial specialities MSK/ Colorectal/ vascular/ renal and lung cancer	Mar-23
5	Quality Improvement	Continue to improve our care to those at the end of their life, timely transfer to preferred place of care.	Mar-23
6	Quality Improvement	7 day consultant-led service models incl. specialty assessment units. Deliver national requirements by end of 2022/23 - with initial focus on oncology and colorectal.	Mar-23
7	Quality Improvement	Deteriorating patients: AKI. To ensure that all inpatients with an AKI are quickly identified and treatment initiated in line with the Trust AKI Care Bundle.	Jan-23
8	Quality Improvement	To implement an Inequalities programmes, with first focus on Tobacco: To roll out the Tobacco Treatment service across ESNEFT	Jan-23
9	Quality Improvement	QI Faculty programme continuation, with focus on the 'making every contact count' initiative'	Jan-23
10	Quality Improvement	Mortality (SHMI), SHMI within expected range from end of 2019/20 with a reduction over 3-5 years: Implement ReSPECT tool.	Mar-23
11	Quality Improvement	Medication Management Programme (unwarranted variation)	Mar-24
12	Quality Improvement	Identifying and addressing unwarranted variation across specialties within the SNEE Provider Collaborative (three specialties at a time - rolling programme)	Mar-24

## h) Quality Priorities

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date
2	Quality Priorities	Reduce the number of inpatient falls to be in line with national target	Sep-22
3	Quality Priorities	Improve clinical outcomes for patients with mental health conditions, i	Mar-24
4	Quality Priorities	Nutrition - Effective management and increased awareness on importa	Mar-24
5	Quality Priorities	Trauma Informed Practice - enhancing clinicians' and service's understa	Mar-24
6	Quality Priorities	Patient Experience: To be fully compliant with the Accessible Informat	Mar-23
7	Quality Priorities	Patient Experience: The Trust will have assurance of the role of all Pati	Mar-23
8	Quality Priorities	Patient Safety: The Trust will ensure a strong Patient Safety Culture th	Apr-24
9	Quality Priorities	Workforce: To ensure safe staffing through the use of Safecare (linked	Mar-24
10	Quality Priorities	Maternity Programme: Implementing recommendations from the Ocke	Mar-23
11	Quality Priorities	Frailty - implementing front door frailty assessment (further elements	Mar-23

### i) Resource Optimisation

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date
1	ROB	e.Rostering complete across ESNEFT for all Medical staff	Mar-24
2	ROB	ESNEFT acting as anchor organisation	Mar-23
3	ROB	ICS review of finance function to support delivery of best practice	Sep-22
4	ROB	Population health management - improving health outcomes through analytics	Mar-23

### j) Urgent & Emergency Care

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date
2	Urgent & Emergency Care	Mental Health - New areas adjacent to ED at CH	Apr-22
3	Urgent & Emergency Care	Mental Health - New areas adjacent to ED at IH	Apr-22
4	Urgent & Emergency Care	Ipswich and Emergency Care and Patient flow actions including reducing stranded metrics	Mar-23
5	Urgent & Emergency Care	ECDS v3	Dec-22
6	Urgent & Emergency Care	Colchester Supported Discharge	Dec-22
7	Urgent & Emergency Care	Colchester Urgent & Emergency Care and Patient Flow actions including reducing stranded metrics	Mar-23
8	Urgent & Emergency Care	Priority six. Medical inpatient Model of Care, moving to 7 day cover for services. (IH initially and then CH)	Apr-25
9	Urgent & Emergency Care	Ipswich ED/UTC Reconfiguration (Building, Clinical & Operations)	Jan-24
10	Urgent & Emergency Care	Ipswich SAU Reconfiguration (Building, Clinical & Operations)	Dec-22
11	Urgent & Emergency Care	Priority four. Virtual Wards - two virtual wards on each site by end of Q2	Oct-22
12	Urgent & Emergency Care	Priority one. Ambulance services - Admisson Avoidance Schemes including ambition for 40 % ambulance Conveyancing rates and ambitions for Ambulance Handover rates	Mar-23
13	Urgent & Emergency Care	Priority two. Development of UCRS Service (prevention i.e ReACT)	Mar-23
14	Urgent & Emergency Care	Priority three. Stregthening ED plans - processes and ops centre improvement	Mar-23
15	Urgent & Emergency Care	Priority five. Pathway 1- 3 improvements	Mar-23
16	Urgent & Emergency Care	Priority seven. Develop winter plan by Autumn 2022.	Aug-22

### k) Workforce

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date
8	Workforce	Workforce: Automation and governance programme.	
9	Workforce	Workforce: Employee relations programme	Mar-23
10	Workforce	Workforce: Education & Training programme	Mar-23
11	Workforce	Workforce: Resourcing and workforce planning programme	Mar-23
12	Workforce	Workforce: Retention & careers programme	Mar-23
13	Workforce	Workforce - OD - Leadership Development Programme	Mar-23
14	Workforce	Workforce: OD - Wellbeing programme	Mar-23
15	Workforce	Workforce: OD - EDI programme	Mar-23
16	Workforce	Faculty of Education & Innovation facility - planning permission secured	Mar-23
17	Workforce	Ensure our staff feel valued and supported by enhancing our health and wellbeing offering to enable them to contribute to the development of their role and the services they provide for the benefit of our patients	Mar-23
18	Workforce	Ensure we have the right number of staff in the right place at the right time with the right skills	Mar-23
19	Workforce	Create a learning environment which attracts and retains high calibre staff for our patients	Mar-23
20	Workforce	Ensure our staff feel valued and supported by enhancing our health and wellbeing offering to enable them to contribute to the development of their role and the services they provide for the benefit of our patients	Mar-23
21	Workforce	Effective Partnership Working to Deliver ICS People Plan - improving access to employment and training opportunities for staff from across the ICS	Mar-23
22	Workforce	Enhance the capability and capacity of our Leaders to deliver our strategic objectives	Mar-23
23	Workforce	ESR Optimisation - Improving access to staff records including contract information, mandatory training	Mar-23
24	Workforce	Embed employee helpdesk, expanding across all elements of HR, ESR and pay queries	Mar-23

### l) Other – not aligned to TMB programme

New ID Number	TMB Programme Alignment	Strategic Plan item	Planned Completion Date
1	OTHER 1	The Institute of Excellence in Robotic Surgery in collaboration with ARU and industry	Mar-23

## 3.0 Strategic Plan Measures

This section sets out draft changes to the strategic measures that will continue to be monitored as part of the strategic plan, those that have not been possible to measure and will be removed, and new proposed measures/ metrics to measure success of the plan.

### **a) Previous measures – roll-over**

The following measure will continue to be tracked:

- SM27: Evolve medical records in all specialties at Colchester
- SM28: Integrated PAS across ESNEFT
- SM29: WinPath fully implemented
- SM31: % of transactions captured on the day on system
- SM05: Increase in diverse workforce at Bands 6 and above
- SM06a: 100% of services are inclusive of all the protected characteristics to enable adaptations for access (Staff)
- SM21: 50% of B2-B4 vacancies filled by new employees to undertake apprenticeships to support their training & development in their new role
- SM17: Number of patients recruited into clinical trials
- SM18: Stroke audit (SSNAP) performance vs England
- SM23: 30% of eligible staff (Corporate/ Back office - Finance/ HR/ BI/Procurement etc) regularly work flexibly away from their main hospital base, e.g. from home from 2021
- SM16: Reduction of overall Estate footprint
- SM19: Number of corporate services shared across the ICS
- SM30: Number of clinical services using AI to support care
- SM13: Performance against new ED Standards
- SM20: 100% of apprenticeship levy utilised
- SM25: 80% of B7 and above leadership staff who have completed a competency framework and received 360-degree feedback
- SM24: Reduction of Anxiety /Stress / Depression as the main cause of sickness (ASD as a percentage of total sickness.)
- SM03: Number of staff trained in QI (Silver Level+)
- SM04: % who go on to deliver a QI project

### **b) Previous measures – removed**

The following measure have been removed from the plan, these have not been possible to measure or have been requested to be removed due to changes to programme.

- SM02: % of patients with frailty score of 7 and above who have been offered Advance Care Planning by frailty teams (or documentation that previous ACP has been viewed) or GP asked to carry out advanced care planning in the community
- SM15: All patients assessed in ED within 4 hour standard (MH Pts)
- SM12: % of non-elective patients who receive same day emergency care (AMSDEC)
- SM14: Reduce system cost of long term care as measured by “Fewer people need unplanned care and support (reduction in crisis situations)”
- SM07: Annual Survey - % of patients responding with highest level of empowerment on a standardised measure e.g. patient activation.
- SM10: % reduction in unplanned hospital admissions for people with the two most common conditions, Cardiac/Heart Failure and Respiratory
- SM08: % of follow-ups as non-F2F follow up
- SM09: Average number of outpatient appointments which are patient initiated.
- SM11: % reduction in Frailty care
- SM22: Staff survey for quality of appraisal is in top quartile by 2024 staff survey
- SM26: The staff survey leadership KPIs are all in the top quartile by 2024 staff survey
- SM06b: 100% of services have cultural adaptations for access (Patients/Carers/ Visitors)

### **c) New measures – work in progress**

A set of new measures are in draft. These are included at Appendix A attached. The new proposed measures are highlighted in purple for ease of reference.

Further work is required to ensure that the new measures are aligned to our ambition and strategic objectives, and that they are practical to measure.

## **5.0 Next steps**

The next steps are as follows:

- a. SRO review sessions to be concluded for review of current draft TMB and strategic plan proposals
- b. Confirmed strategic plans via programme at TMB, including prioritisation and ensuring alignment with Trust wide aims
- c. Finalise success measures via TMB
- d. Commence monthly monitoring and reporting of schemes and success measures, including identification and tracking of 3 milestones per scheme/ project

#### 6.0 Action Required of the Board/Committee

##### The Committee are recommended to:

1. Approve the update to the strategic plan.
2. To note the new draft strategic plan schemes, and to provide comment as necessary:
  - a) Any schemes that should not be included.
  - b) Additional schemes that should be considered for inclusion.
3. To note the draft changes to the strategic success measures.

Link to Strategic Objectives (SO)		Please tick
SO1	Keep people in control of their health	X
SO2	Lead the integration of care	X
SO3	Develop our centres of excellence	X
SO4	Support and develop our staff	X
SO4	Drive technology enabled care	X

<b>Risk Implications for the Trust</b> (including any clinical and financial consequences)	Delivery of the Trust strategy and ambition is dependent on the strategic plan. Failure to deliver the strategic plan will impede or prevent successful delivery of the strategy. External events, particularly the direct and long-term effects of the COVID-19 pandemic may affect the timing or extent to which the strategic plan and success measures can be achieved.
<b>Trust Risk Appetite</b>	Reputation: the board is willing to take high to significant risks and is willing to take decisions that are likely to bring scrutiny to the organisation where the benefits outweigh the risks. It sees new ideas as potentially enhancing its reputation

<b>Legal and regulatory implications</b>	An agreed and current strategy is a requirement for the Well Led domain of the CQC assessment framework.
<b>Financial Implications</b>	Investments required to deliver the strategic plan are identified in the Trust's supporting strategies (ICT, People, Estates, Quality) and capital investments are included in the 5-year capital plan. Availability of revenue and capital limits are determined annually and are subject to change which may impact the ability to deliver the strategic plan.
<b>Equality and Diversity</b>	Equality impact assessment will take place at project level. Engagement with stakeholders, unions and Healthwatch (Essex and Suffolk) was undertaken during the development of the Trust strategy. The updated success measures reflect an increase focus on equality and diversity.