


Agenda Item 8

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|  | | THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE | |
| Boston Borough Council | East Lindsey District Council | City of Lincoln Council | Lincolnshire County Council |
| North Kesteven District Council | South Holland District Council | South Kesteven District Council | West Lindsey District Council |

Open Report on behalf of Lincolnshire Partnership NHS Foundation Trust

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| Report to | Health Scrutiny Committee for Lincolnshire |
| Date: | 21 October 2015 |
| Subject: | Lincolnshire Partnership NHS Foundation Trust - Draft Clinical Strategy |

Summary:

Lincolnshire Partnership NHS Foundation Trust (LPFT) is developing its clinical strategy for 2015/17. The Clinical Strategy sets out the organisation's objectives and actions through a series of agreed priorities.

This report includes LPFT's draft priorities for 2016/17 and feedback is sought from the Health Scrutiny Committee for Lincolnshire on these draft priorities, which are set out in Appendix A to this report. The Committee is also requested to consider the establishment of a working group to look at the priorities in greater detail.

Actions Required:

Members of the Health Scrutiny Committee are asked to review draft clinical priorities of Lincolnshire Partnership NHS Foundation Trust (LPFT) and consider the following questions:

1. Are these the right priorities?
2. Are these the right actions?
3. Will these priorities achieve the right outcomes for our patients?
4. Is the language right for patients, staff and the public?

The Committee is also asked to consider establishing a working group, which would meet on one occasion, to refine the draft priorities.

1. Background

Lincolnshire Partnership NHS Foundation Trust's clinical strategy is the document that translates the organisation's Mission into the deliverable objectives and actions through a series of agreed priorities.

It sits central to the organisation's governance framework and informs the development of Divisional plans, dependent sub-strategies and the Trust's overarching Integrated Business Plan.



Lincolnshire Partnership NHS Foundation Trust (LPFT) has a good track record of engaging stakeholders in the development of its clinical strategy. However, we recognise that we could do better and so this year, we have done things differently.

Firstly, we started much earlier in the year so that we could spend more time talking to our stakeholders about how our services could be improved and started with the people that matter the most; our patients.

We held nine separate workshops with patients and cares across the county to talk about what works well, what could be improved and generate ideas for our future priorities.

We have held an online survey for staff and the public to share their views.

We have met with our Provider partners (Lincolnshire Community Health Services NHS Trust and United Lincolnshire Hospitals NHS Trust) to make sure our priorities are aligned. We have also met with our Commissioners to ensure our strategy contributes to the wider health and care agenda.

Our aim is to have a new clinical strategy for 2016/17 and beyond, that not only reflects our ambition to provide the best care possible, but a strategy that has also been co-created with the people we work with and the people we serve.

Our strategy will be fit for the times and push us to new levels of patient safety, clinical effectiveness and patient experience.

2. Conclusion

Our Mission is clear; we are all here to:

“Enable people to live well in their communities”

This requires a clinical strategy that puts the people who use our services at the very centre of decision making and working with them and their communities to shape and deliver care that achieves the best possible outcomes and experience.

The Health Scrutiny Committee can help us in this task. Last year we held a one-off focus group with members of the Committee, which proved to be extremely valuable and directly influenced how our clinical priorities were finally described. We would therefore, encourage a similar approach this year.

Committee members can also provide their feedback during the meeting or by contacting Chris Higgins at Christopher.Higgins@LPFT.nhs.uk

Please see Appendix A, for a detailed breakdown of our current draft priorities.

3. Consultation

Not Applicable

4. Appendices

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| These are listed below and attached at the back of the report | |
| Appendix A | LPFT Draft Clinical Priorities |

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Jane Marshall, Director for Strategy at LPFT, who can be contacted on 01529 222244 or Jane.Marshall@LPFT.nhs.uk

APPENDIX A

LPFT Clinical Strategy – Draft Priorities 2016/17

| Priority | What does this mean for teams? | Intended outcome(s) for patients |
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| <p>Maintain compliance with the Care Quality Commissions (CQC) Fundamental Standards of Care.</p> | <ul style="list-style-type: none"> ❖ Making sure every service user has an up to date and accurate risk assessment and care plan. ❖ Making sure every incident or near miss is reviewed by the team and lessons are learned and any learning is shared. ❖ Being ‘customer’ focussed in everything we do. ❖ Providing clear information and advice about the services we offer and where to access additional support. ❖ Basing all service pathways and clinical delivery on evidence based practice, including NICE guidelines. ❖ Having measureable clinical and patient outcomes in every service. ❖ Role modelling, visible leadership and clear lines of accountability. | <ul style="list-style-type: none"> ❖ Care delivery that is: <ul style="list-style-type: none"> • Safe • Caring • Responsive • Effective • Well Led |
| <p>Ensure long-term sustainability for the Trust.</p> | <ul style="list-style-type: none"> ❖ Constantly review service delivery and explore more efficient ways of working. ❖ Work collaboratively with commissioners to identify opportunities for increased income to the Trust. ❖ Champion the Mental Health agenda to ensure parity with physical health commissioning. ❖ Introduce a standard ‘Lean’ approach for the Trust. ❖ Give focus to ensuring ‘value for money’ service delivery at all team meetings. | <ul style="list-style-type: none"> ❖ Services that make the best use of public money to ensure the long-term sustainability of high quality clinical care. |
| <p>Improve access to our services.</p> | <ul style="list-style-type: none"> ❖ Develop a directory of LPFT services and a pictorial access roadmap. ❖ Publish clear criteria for all LPFT services and offer signposting to alternative services where indicated. ❖ Establish a 24 hour help line for mental health issues. ❖ Ensure the Crisis response is consistent across all sites. ❖ Transform the Trust’s website to bring it up to date and able to provide a range of helpful tools and resources for patients, staff and the public. ❖ Provide specific support/training for Lincolnshire GPs to support mental health and learning disability awareness. | <ul style="list-style-type: none"> ❖ Clear understanding of how to access and navigate the Trust’s services. ❖ Better understanding of mental health and learning disabilities issues in the wider community. ❖ More flexible access that is suitable to people’s different needs. |

| Priority | What does this mean for teams? | Intended outcome(s) for patients |
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| <p>Provide better support for people who are discharged or waiting for services.</p> | <ul style="list-style-type: none"> ❖ Develop a greater range of self-help resources ❖ Provide a greater level of clinical support to the Managed Care Network (MCN) ❖ Develop a collaborative network with a wide range of other providers to create integrated pathways into and out of LPFT services. ❖ Expand the volunteer scheme to provide additional support for those not currently engaged in services. ❖ Create an LPFT Care Navigator and Advocate role to support provider integration and link to the Neighbourhood Teams. | <ul style="list-style-type: none"> ❖ More integrated and joined up care pathways across LPFT services, the Managed Care Network and the wider community. ❖ A more robust community network to support people not formally engaged in LPFT services. |
| <p>Supporting our people to be the best they can be.</p> | <ul style="list-style-type: none"> ❖ Support staff to understand their roles as leaders and act as ambassadors of excellent patient and service user care. ❖ Ensuring staff have a clear line of sight between their role and service user /patient experience. ❖ Ensuring the right structures, resources and systems are in place for staff to deliver high quality care. ❖ Promote the Trust’s values and behaviour framework in supervision and appraisal. ❖ Provide visible leadership and accessible managers to all staff at all levels. | <ul style="list-style-type: none"> ❖ An engaged and confident staff group. ❖ Increased job satisfaction. ❖ Better patient outcomes. |
| <p>Increase service user and carer involvement in all aspects of service design and delivery.</p> | <ul style="list-style-type: none"> ❖ Encouraging co-creating and co-production at all level for service design and delivery. ❖ Service users on 70% of interview panels for all staff appointments. ❖ Establish employed Peer roles in all Community Mental Health teams and Drug and Alcohol Teams. | <ul style="list-style-type: none"> ❖ Much greater involvement of experts by experience and volunteers in service delivery. ❖ Employment opportunities for people with lived experience of mental health problems. |
| <p>Support the Lincolnshire Health And Care (LHAC) programme and promote service integration.</p> | <ul style="list-style-type: none"> ❖ Actively work with other providers to develop the Neighbourhood Team model for Lincolnshire. ❖ Build relationships with colleagues from other organisations to create the conditions to collaboration. ❖ Constantly seek new ways to collaborate with other providers and share resources. | <ul style="list-style-type: none"> ❖ Sustainable Health and Social Care for Lincolnshire. ❖ More joined up Mental Health and Physical Health services for patients. |

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