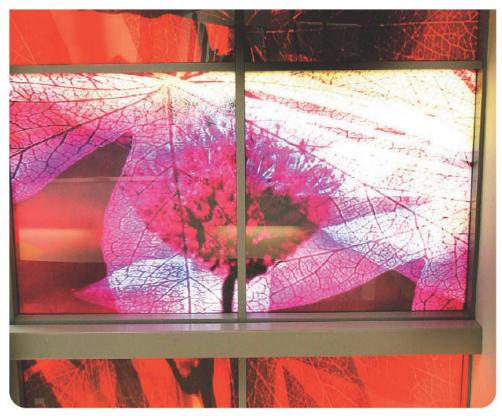




corporate management plan 2008-2009



coloured glass feature, Castlereagh CTCC

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foreword

This plan is the managerial spine of our new integrated organisation which aims to build on the fine legacy of the six Trusts that merged to become Belfast Health and Social Care Trust.

Our plan sets out the key priorities for the Trust in 2008/09 and 2009/10. It takes its direction from the Northern Ireland Assembly's Programme for Government and the Priorities for Action determined by the Minister for Health, Social Services and Public Safety – Michael McGimpsey.

It also sets out the ways in which we aim to modernise and deliver even better services for the citizens of Belfast, Castlereagh – and people from other parts of Northern Ireland who require our specialist clinical skills.

We will be working in a challenging financial climate but quality and efficiency can co-exist when people are resourceful and determined. I have every confidence in the calibre of the managers and staff at all levels in this Trust who are taking on the tasks outlined in the pages that follow.

Not only are we working in a specific timeframe, we are also looking to the future. Our strategic vision – The Belfast Way – sets out the way in which we will sustain and develop excellence.

Every year we will publish our accomplishments, review and refocus our efforts to achieve that vision.

Taking the opportunity provided by the merging of six former Trusts, we have also, through our New Directions document, begun a conversation with the citizens of Belfast and beyond about the best way of delivering

services to meet people's needs – avoiding unnecessary duplication and fragmentation of services and ensuring that high quality support, treatment and care is delivered in the right place by the right person and the right time. In order to do this we have to listen to service users and work in true partnership paying attention to the goals, concerns and interests of all key internal and external stakeholders.

It is a privilege for all of us in Belfast Trust to play a part in helping the people we service enjoy better health and wellbeing. If we listen and plan well, we can achieve great things.

Millian Mike

William McKee
Chief Executive

introduction

Belfast Health and Social Care Trust delivers integrated health and social care to 340,000 citizens in Belfast and part of the Borough of Castlereagh. It also provides specialist services to all of Northern Ireland.

With an annual budget of approximately £1bn (spending £3m a day) and a staff of 22,000, it is one of the largest Trusts in the United Kingdom.

In our hospitals for example, we treat approximately 210,000 inpatient and day patients a year, see 680,000 outpatients and more than 200,000 people at our A&E departments.

In the community we are corporate parent to 600 children in care – the majority in foster care. We are also responsible for between 500 and 550 children on the child protection register – and every year receive 800 referrals for children in need of support – mostly in their own home.

We provide services for older people through nine residential homes and also commission services from the independent and voluntary sector to support older people who wish to remain in their own homes.

A wide range of local and a number of regional services are provided for people with Mental Ilness and Learning Disabilities, including acute inpatient care, Primary Mental Health Care, Recovery services and community treatment and Day support services.

Home and day support, residential and rehabilitation services are provided for people with physical and sensory disabilities with the aim of promoting social inclusion.

The Trust came into existence on 1 April 2007. It was formed under the Belfast Health and Social Services Trust Establishment Order Northern Ireland 2006 – and is responsible for the services formerly delivered by six Trusts which were merged on 31 March 2007. These Trusts were – the Royal Group of Hospitals and Dental Hospital Health and Social Services Trust, the Mater Hospital HSS Trust, North and West Belfast HSS Trust, South and East Belfast HSS Trust, Green Park HSS Trust and Belfast City Hospital HSS Trust.

board of directors

The Board of the Belfast Trust is responsible for the strategic direction and management of the Trust's activities. It is made up of a Chairman, seven non Executive Directors, five Executive Directors and seven other Directors.

ChairmanMr Pat McCartanNon Executive DirectorsMs Joy Allen

Mr Les Drew

Professor Eileen Evason

Dr Val McGarrell

Councillor Tom Hartley Mr Charles Jenkins Mr James O'Kane

Executive Directors

Chief Executive Mr William McKee
Director of Social Services, Family and Child Care Ms Bernie McNally
Medical Director Director Dr Tony Stevens
Director of Finance Mrs Wendy Galbraith
Director of Nursing, Older People Ms Valerie Jackson

Medicine and Surgery

Directors

Chief Operating Officer and Deputy Chief Executive Mr Hugh McCaughey
Director of Mental Health and Learning Disability Mr Brendan Mullen
Director of Clinical Services Mrs Patricia Donnelly
Director of Specialist Services Mrs Jennifer Welsh
Director of Head and Skeletal Services Miss Patricia O'Callaghan

Director of Human Resources Mrs Marie Mallon

Director of Planning and Redevelopment Ms Denise Stockman

board of directors

Chairman

Non Executive Directors





Mr Pat McCartan



Ms Joy Allen



Mr Les Drew



Professor Eileen Evason





Councillor Tom Hartley



Mr Charles Jenkins



Mr James O'Kane

Executive Directors



Mr William McKee



Ms Bernie McNally



Dr Tony Stevens



Mrs Wendy Galbraith



Ms Valerie Jackson

Directors



Mr Hugh McCaughey



Mr Brendan Mullen



Mrs Patricia Donnelly



Mrs Jennifer Welsh



Miss Patricia O'Callaghan



Mrs Marie Mallon



Ms Denise Stockman

our purpose.. business.. values

Our purpose

The purpose of Belfast Health and Social Care Trust is to improve health and wellbeing and reduce health inequalities.

Our business

Our business is to deliver safe, improving, modernised, cost effective health and social care by engaging with staff and in partnership with others.

Our values

Respect and dignity:

Treating all with respect and dignity. This means that we value a person centred approach, where the needs of users and carers are at the core of service planning and delivery. Respect embodies equality and equity; maintaining fairness in policy and practice.

Accountability:

Having a personal and professional accountability for the provision of high quality care by competent staff in a safe environment. Being accountable for achieving clear standards in service delivery, care outcomes and experience and for securing the best use of resources, ensuring services are planned, delivered and evaluated to make the most of financial and other available resources.

Openness and trust:

Having a clear process through two-way communication with users, staff and the public, transparency, openness and trust in decisionmaking and communication and timely and appropriate information to

our key objectives

service users to support choice.

Learning and development:

Building capacity and empowering people through appropriate development and support.

Our key objectives

Quality and safety

Continuous improvement in the quality of our services and a focus on safety is a priority for all our people, from the Board of Directors to the teams providing care and services.

Modernisation

We believe it is timely to modernise the way we deliver our health and social care. We want to reform and renew our services so we deliver care in a faster, more flexible, less bureaucratic and more effective way to citizens.

Partnerships

Working in partnership with individuals and communities leads to more appropriate care and treatment, improved outcomes, better experience by our service users, improved health and wellbeing for communities and greater social inclusion. It helps tackle deep-rooted social problems and health inequalities.

our people.. resources

Our people

Our vision is to be seen as an excellent employer within the health and social services family and beyond. Our people will feel valued, recognised and rewarded for their endeavours. They will be supported in their development – and their worth as individuals will be respected in the application of their skills in delivering on our vision and purpose.

Resources

Our financial strategy will ensure that the income we receive from Government provides services which all value, are affordable and set within the organisation's overall risk and assurance framework. The organisation's duty of care to the public is paramount in all expenditure decisions.

We must ensure that our expenditure and investment decisions are sustainable to secure improved health outcomes both now and in the future and, at its simplest, maximise outcomes, resources and efficiency.

the BHSCT corporate objectives

SETTING A STRATEGIC DIRECTION

PURPOSE

Improve health and wellbeing and reduce health inequalities

BUSINESS

In partnership with others, and by engaging with staff, deliver safe, improving, modernising, cost effective health and social care

5 CORPORATE OBJECTIVES

SAFETY

Provide safe high quality effective care

- Standards
- Outcomes
- HCAI
- Continuous improvement
- Assurance

MODERNISATION

Reform and renew our health and social services

- Access
- "Localise where possible, centralise where necessary"
- Service reviews
- Aligned capital plans

PARTNERSHIPS

Improve health and wellbeing through partnership with users, communities and partners

- Citizen centred
- Joint working
- Civic leadership

PEOPLE

Show leadership and excellence through organisational and workforce development

- Investors in people
- Staff engagement
- Leadership
- Learning + development
- Team effectiveness

<u>RESOURCES</u>

Make best use of resources by improving performance and productivity

- Workforce diagnostics
- Process improvement
- Resource utilisation
- VFM
- Performance management
- MORE

VALUES AND BEHAVIOURS

Respect and dignity Accountabilities Openness and trust Learning and development

our corporate management plan – quality and safety

Corporate theme	Subject	Objectives	Timescale	Responsibility
Quality and Safety	Assuring Good Governance	- Implement Trust Risk Management strategy and ensure systematic implementation of policy, systems and guidelines - Implement action plans against all Controls Assurance standards & the Trust Risk Register - Implement action plans against all internal & external reviews, e.g RQIA - Develop Revised Reporting Framework to facilitate Statutory Functions Reporting - Develop Trust-wide Performance Framework and processes to inform Statutory Functions Assurance Reporting Implement NPSA and other DoH supported Clinical directives, eg pertaining to transfusion practice	March 09	Lead Directors – (Medical Director & Director of Social Services) & All Directors
	Prevention & Control of Infection	- Implement Quality Improvement Plans for CDI, MRSA/MSSA and SSI and integrate existing HAIR Plans - Implement Infection Prevention and Control Plan - Implement recommendations from Regional Dress Code Policy	Sept 08	Lead Director (Medical Director) & All Directors

our corporate management plan – quality and safety

Corporate theme	Subject	Objectives	Timescale	Responsibility
Quality and Safety (continued)	Develop & implement a Quality Service across the Belfast Trust	Establish awareness of the Healthcare Quality System (HQS) Implementation of Quality Actions from Internal & External agencies, e.g RQIA/RQIS/ Internal Audit - Develop ICT Systems to support instant	March 09 Oct 09	Lead Directors (Director of Nursing, Medical Director & Director of Social Services) & All Directors
		reporting on Complaints & Litigation. - Build on Safer Patient Initiative with a Trust-wide Patient Safety Program & develop process & outcome measures & develop specialty-specific Quality Indicators - Implement 'Patient & Client Safety – Interlinking Initiatives' - Implement a program of professional Clinical Audit		
	Effective Management of Complaints & Incidents	 Implement Trust wide Complaints policy & procedures in line with new Regional Guidance Manage Adverse Incidents to identify and address areas of risk 	March 09	Lead Director (Medical Director) & All Directors
	Deliver a high quality Environmental Cleanliness service	Increase the level of standard achieved in the Controls Assurance Standard and Environmental Cleanliness Audits	March 09	Director of Patient Services

our corporate management plan - quality and safety

Corporate theme	Subject	Objectives	Timescale	Responsibility
Quality and Safety (continued)	Emergency Planning & Outbreak Control	- Finalise Major Incident Plan & Pandemic Flu plans - Establish command and control team & undertake exercise for both	Plans by Sept 08 Exercise by March 09	Medical Director
	Management of aggression & violence by patients/clients to staff	Implement Trust-wide policy & procedures	March 09	Medical Director & All Directors
	Implementation of Improving Patient Safety, Building Public Confidence	Development & Implementation of associated policy & procedures	March 09	Medical Director & All Directors
	Harmonisation of policies/standards/guidelines	Complete the harmonisation of Belfast Trust policies	March 09	Head of Office & All Directors
	Deliver on the Controls Assurance Standards across the Trust, for example Fire & Environment	Undertake assessment and improvement of all Controls Assurance Standards.	March 09	All Directors
	Medical Devices	Develop & implement a Trust-wide policy on management of Medical Devices	March 09	Lead Director (Medical Director) & All Directors
	Deliver holistic care to patients and clients of the Belfast Trust	Develop & support the role of Chaplains, Volunteers & Carers	March 09	Director of Nursing
	Research and Development Strategy	Develop a Trust strategy for Research and Development across the Professions	March 09	Lead Director (Medical Director) & All Directors

our corporate management plan – quality and safety

Corporate theme	Subject	Objectives	Timescale	Responsibility
Quality and Safety (continued)	Accountability	Continue to develop the Authorisation Framework throughout all areas of expenditure and accountability to ensure that all decisions are properly authorised	March 09	Director of Finance
	Audit & Compliance	Provide training and support for all managers to enable them to respond proactively to internal audit recommendations and to develop managers' ability to maximise the value of audit	March 09	Director of Finance
	Fraud Awareness	Develop and deliver fraud awareness training to all groups of staff within the Trust to increase the ability of all managers and staff to identify and respond to fraud risk	March 09	Director of Finance

our corporate management plan - modernisation

Corporate theme	Subject	Objectives	Timescale	Responsibility
Modernisation	Completion of RPA reforms	Complete RPA within Trust Contribute to development of Common Services across Region Contribute to consultation on Commissioning Identify potential impacts on Trust	2008/09	Chief Operating Officer Director of HR Director of Finance & All Directors
	Strategic Service Review	Implement Strategic Service Reviews for Health & Social Care Services across the Belfast Trust Undertake staff consultation, link to Capital Plan and develop external consultation process Align Strategic Service direction with the Modernisation & Reform agenda associated with MORE	Sept 08 for costed Capital Plan, March 09 for complete business cases	
	Deliver key ministerial service improvement & modernisation targets as outlined in PfA	Develop & implement Corporate & Service Group plans to deliver key PfA targets, for example: - Access targets across all Services - Services to deliver care & support in the community - Improving Children's services, Mental Health, Leaming and Physical Disability services	Ongoing	Chief Operating Officer & All Directors
	Develop and maintain an effective performance improvement programme to deliver the Trust's key objectives	Develop, review and update a robust resource utilisation/performance improvement programme which meets the organisation's breakeven and CSR financial targets and objectives	2008/09	Director of Finance and Chief Operating Officer

our corporate management plan - modernisation and partnerships

Corporate theme	Subject	Objectives	Timescale	Responsibility
Modernisation (continued)	Prepare for changes in the Financial Regime	 Proactively participate in the establishment of revised commissioning arrangements, e.g the introduction of LCGs (Local Commissioning Groups) Fully participate in the planned piloting of an NI Activity Based Funding model 	2008/09	Director of Finance and Chief Operating Officer
Partnerships	Implement the DHSSPS Personal and Public Involvement Guidelines	- Implement the Community Development and User Engagement Framework - Develop & implement Service Group action plans	March 09	Lead Director (Medical Director) & All Directors
	Determine the quality of the User/Client/Patient experience in the Belfast Trust	 Scope the current scale of User Involvement and Engagement Complete Picker for Service Groups Implement Patient & Client Surveys & patient panels 	March 09	Director of Nursing & All Directors
	Develop seamless services through co-ordination of Service Group teams	Use existing & developing networks to maximise opportunities for service teams to co-ordinate service delivery & reform & modernisation	Ongoing	Director of Operations & All Directors
	Develop an Integrated Health Improvement Plan	- Develop and implement Service Group Health Improvement Plans in line with PfA and IFH commitments	March 09	Lead Director (Medical Director) & All Directors

our corporate management plan – partnerships

Corporate theme	Subject	Objectives	Timescale	Responsibility
Partnerships (continued)	Information Governance	- Integrate Trust Information Governance policies from legacy sites - Develop Data Protection Capacity - Respond to Self Assessment and associated Survey date & implement Action Plan - Address security arrangements - Implement Development Plan	2008/09	Chief Operating Officer & Medical Director
	Education	Implement framework for agreement between Universities and Trust Implement new internal structure for delivery and supervision of medical/nursing training Develop access systems for electronic learning programmes	March 09	Medical Director Director of Nursing
	Employment, Equality and Diversity Plan	To commence implementation of the Employment Equality Plan in partnership with Staff Side	March 09	Director of HR
	Research Partnerships	Develop and maintain partnership arrangements with key internal and external stakeholders	March 09	All Directors

our corporate management plan - people

Corporate theme	Subject	Objectives	Timescale	Responsibility
People	Modernising the Trust Workforce	- Identify and address key competencies required within the organisation to deliver the Trust's performance improvement programme - Identify, facilitate and organise training and development opportunities for the key players in the organisation delivering the resource utilisation/performance improvement strategy and programme	March 09	All Directors
	- including the Medical workforce	- Implement regional guidance on Job Planning & work towards full rota compliance for Junior Doctors	Ongoing	Medical Director
	- including the Nursing & Midwifery workforce	 Reconfigure nursing skill mix to reflect DHSSPS productivity targets Strengthen and enhance the role of the mentor by implementation of NMC standards for learning & assessment 	March 09	Director of Nursing
	- including the Social Care workforce	Consolidate and promote professional leadership role of Social Work/Social Care Needs Group with a focus on Social Work/Social Care contribution to multi-disciplinary and integrated service delivery processes	Ongoing	Director of Social Services
		Establish local Social Work Forum within each Service Area to promote innovative practice, evidence base, research and audit processes at practitioner levels	March 09	Director of Social Services

our corporate management plan - people

Corporate theme	Subject	Objectives	Timescale	Responsibility
People (continued)	Investors in People	To support the achievement of IIP accreditation by June 2009 including Staff Appraisal, KSF & Personal Contribution Framework	June 09	Director of HR & All Directors
	Staff Survey	To analyse staff survey and formalise action plan to address issues identified at Corporate and Service Group levels for action	June 08	Director of HR
	Shared Services	To work with DHSS&PS and other Trust Service and Corporate Groups in the development of an appropriate Shared Service model for the region	March 09	Director of HR Director of Finance & All Directors
	Trust Board Development Programme	Implement the Organisational Capability Development Plan following the McKinsey diagnostic work	March 09	H McCaughey M Mallon & All Directors
	Team Effectiveness Development	To complete the Team Effectiveness initiative developed for BHSCT	Oct 08	Director of HR & All Directors
	Clinical Leadership	To review and develop plan to support Clinical Leaders across the professions	March 09	Medical Director Director of HR Director of Social Services Director of Nursing
	Improving workforce health	Establish a steering group and develop a workforce health improvement strategy	March 09	Medical Director

our corporate management plan - people and resources

Corporate theme	Subject	Objectives	Timescale	Responsibility
People (continued)	Leadership and Management Strategy	To engage the Organisation in the development and production of a BHSCT Leadership and Management Strategy	Oct 08	Director of HR & All Directors
	Workforce Learning and Development Strategy	To launch the Trust Workforce Learning & Development Strategy	June 08	Director of HR & All Directors
	Improving Working Lives Programme	To use findings of staff survey and relevant research and best practice in the development of a Belfast Trust Improving Working Lives Programme	2008/09	Director of HR
	Staff Charter	To develop a Staff Charter in consultation with Service Groups and Staff Side	Dec 08	Director of HR & All Directors
Resources	MORE: implement & deliver on service reform	Identify Operational Impact of Proposals Undertake relevant Consultation Develop appropriate HR initiatives for MORE	March 09	Director of Finance & HR & All Directors
	Deliver SBA volumes	Deliver on agreed SBA volumes for Commissioners	June 08	Chief Operating Officer & All Directors
	Financial Stability	Develop financial plan for inclusion in 2008/09 TDP to include CSR targets, assumptions and financial risks	May 08	Director of Finance

our corporate management plan – resources

Corporate theme	Subject	Objectives	Timescale	Responsibility
Resources (continued)	Procurement	Work with RSS to develop an effective procurement management process that maximises the contribution of RSS to the Trust management and strategic agenda Develop 3-year procurement strategy	March 09	Director of Finance
	Information Technology	Develop an IT Strategy to support the integrated Trust services	March 09	Chief Operating Officer
	Continuity of Service Provision	Ensure preparation and presentation of Statutory Accounts & Annual Report for 2007/08 in line with guidance and timetable	June 08	Director of Finance
	Charitable Funds	Develop a new policy and approach to Charitable Trust Fund expenditure in line with good practice and Charity Commission guidance	March 09	Director of Finance
	Manage the acquisition and disposal of Trust properties – reorganise Trust leased property arrangements	Establish baseline position	Ongoing	Director of Planning & Redevelopment
	Create and manage a built environment that is conducive to the provision of high quality safe and effective patient care	Develop an estates management strategy in conjunction with the corporate service delivery models	March 09	Director of Planning & Redevelopment

our corporate management plan – resources

Corporate theme	Subject	Objectives	Timescale	Responsibility
Resources (continued)	Develop a sustainable organisation that reduces the environmental impact of our business	Proactively promote good environmental practice by promoting awareness and encourage changes to everyday working practice to reduce demand on resources	Ongoing	All Trust Staff

appendix 1 – structure of the Belfast Trust

The new Belfast Trust is structured around Service Delivery Groups supported by a central core of Corporate Functions (HR, Finance, Planning, IT, Information and Performance Management, Redevelopment and Estates, Risk and Governance, Corporate Nursing and Medicine) providing services across 120+ sites throughout the Belfast area.

The Service Delivery Groups are:

Older People, Medicine and Surgery Service Group

OPMS is one of the largest service groups in the Belfast Trust, with over 3,800 staff from a range of disciplines and services working from both hospital and community sites. The older people services includes all relevant acute and community based services as well as intermediate care and mental health of the older person. Medicine and Surgery includes: General Medicine, General Surgery, Gastroenterology, Respiratory, Endocrinology and Diabetes, Hepatology, Infectious Diseases and Genito Urinary Medicine. The service group is also responsible for the adult emergency departments and out-of-hours services.

Head and Skeletal Service Group **

Head and Skeletal Services focus on a number of high volume acute surgical areas and also long term rehabilitative care — Trauma and Orthopaedics, including Osteoporosis and Ophthalmology, ENT, Dental Services, Neurosurgery, Neurology and Neuro-rehabilitation which includes Spinal Cord Injury, Brain injury and Amputee Rehabilitation, Wheelchair Services and Physical and Sensory Services. The Service Group also has responsibility for a number of diagnostic services such as neurophysiology, audiology and optometry.

Whilst T&O are provided across 2 main hospital sites (Musgrave Park Hospital and Royal Hospitals with Fracture Clinics at Belfast City and Mater Hospitals), the Regional Orthopaedic Service continues to run outpatient clinics in a variety of centres throughout Northern Ireland. The remaining diverse Services are undertaken at a range of Belfast Trust facilities, e.g. Ophthalmology is provided across the Royal and Mater sites, Neurosciences across the Royal, Musgrave Park, Forster Green, Mater and Belfast City sites whilst Physical Disability and Sensory Support Services incorporates those services previously provided across the community Trusts.

** During 08/09, the Trust is reviewing its Management Structure and the services under the Head and Skeletal Service Group will be amalgamated with other Service Groups.

Specialist Services Group

Specialist Services Group encompasses a diverse range of mainly regional medical and surgical specialties.

The service group is aligned into two 'divisions', namely

- 1) Cardiovascular and
- 2) Cancer Treatment and Specialist Services

Cardiovascular includes Cardiology, Cardiac Surgery, Thoracic Surgery, Vascular Surgery, Urology and Nephrology (including Renal Transplant).

Cancer Treatment and Specialist Services includes Oncology, Haematology, Rheumatology, Dermatology, Medical Genetics, Breast

structure of the Belfast Trust (continued)

Surgery, Plastic Surgery, Burns Service and Palliative Care.

In addition, the group also carries the lead role in relation to the coordination of the Trust's Cancer Services Provision and also manages the Outpatient Services on the Belfast City Hospital site.

Social Services, Family and Child Care Service Group

The Social Services/Family and Child Care service group within the Belfast Trust has responsibility to provide a range of both health and social services not only to its local childhood population but it has also been commissioned to provide many regional and sub regional services such as specialist acute services, Child and Adolescent Mental Health Services and Adoption Services. The service group also has responsibility for provision of women's services which includes maternity, gynaecology and family planning services.

Child Health Services encompass a wide range of acute and community services. Acute services are delivered in the Royal Belfast Hospital for Sick Children including a dedicated Children's A & E Department and numerous paediatric specialities such as general medicine, surgery, plastics, ENT, neurology and orthopaedics. Community-based child health services are delivered from facilities across the Belfast Trust including Wellbeing and Treatment centres, schools and children's own homes. Within Child Health, there are teams for Community Children's Nursing Services, Health Visiting and the School Health Service. There is also a wide range of Consultant and nurse-led paediatric clinics for child development, communication and behavioural problems.

The service group has also a particular responsibility to provide services to vulnerable children. This group includes children with disabilities, children at risk of harm, children in need, looked after children and children from minority communities. Within Children's Social Services, the service group also provides a range of family centres, residential children's homes, leaving and aftercare services and community placement schemes.

Also in this service group is the **Child and Adolescent Mental Health Service** (CAMHS). This includes a range of multidisciplinary assessment and treatment services. CAMHS services are delivered in both an acute and community setting and are provided in partnership with the voluntary and community sector.

The provision of a full range of women and family services is a key aspect of the service group. With gynaecology both local and regional services are provided including a number of specialist areas such as gynaecology oncology, uro gynaecology, the Regional Fertility Centre as well as Family Planning Services for the EHSSB.

The maternity service is the largest in Northern Ireland providing care for over 6600 both low and high risk women in 2007 and is supported by the Regional Neonatal unit.

Mental Health and Learning Disability Service Group

Mental Health and Learning Disability Services in the Trust incorporate a wide range of service provision across Belfast for the individual, their family and carers.

structure of the Belfast Trust (continued)

The ethos underpinning all Mental Health Services in Belfast is one of Recovery. Services are delivered through three service groups: Primary Mental Health Care services, Recovery services and Acute services.

Services include acute inpatient services, Crisis Response & Home Treatment, Addictions Services, and Psychological therapies, with an emphasis on Mental Health staff working with clients and their carers in their own homes and local communities.

In addition, a range of Regional and Eastern area based services are provided including Psychotherapy, Community Forensics, Eating Disorder Service and the Regional Medium Secure Unit.

The ethos underpinning Learning Disability services in Belfast is one of Social Inclusion and Independence. Services are delivered through three service groups: Supported Living & Day services, Community Treatment and Support services and inpatient and outpatient services through Muckamore Abbey Hospital.

Services include Family Support, Day Support, Supported Employment, Supported Living, Community Treatment, and Community Forensics with an emphasis on Learning Disability staff working with clients and their carers in their own homes and local communities.

In addition, the Trust provides an inpatient assessment and treatment service through Muckamore Abbey Hospital for the Eastern and Northern Trusts.

Clinical Services Service Group

This service group provides a full range of clinical support services and direct patient care services right across the Belfast Trust incorporating Anaesthetics, Critical Care, Theatres, Sterile Services and Imaging. The Belfast Laboratory Services include haematology, biochemistry, microbiology, virology, tissue pathology, tissue typing, immunology and genetics. Pharmacy services in Belfast provide drugs and other products across the Trust. Therapy Services include the Allied Health Professionals of dietetics, occupational therapy, physiotherapy, podiatry and speech and language therapy who deliver services in the acute and community sector. Clinical Services also includes clinical psychology and staff care services, as well as the Area Bereavement Officer. From October 2008 wheelchairs, orthotics and amputee services will also be co-ordinated centrally in the Trust.

The services provided are highly regulated and the challenge for the service group is to reform and modernise the services to better meet the needs of patients, clients and staff.

appendix 2 – current planning process within the Belfast Trust

Months	Description	Content	Developed through	Communicating with	Ownership
Overarching	Trust Vision "The Belfast Way"	Describes the future provision of integrated health & social care services across the Belfast Trust	 Workshops with internal & external stakeholders Consultation internally & across Statutory, Voluntary & Community & Independent Sector Organisations 	All Staff & wide range of External Stakeholders	Trust Board
All year round	Communication with - clients & patients & users - Carers & Service User Groups - Community & Voluntary - Independent Sector groups - Commissioners - DHSS&PS/SDU - Trade Unions - Political Representatives - Special Interest Groups & Clinical & Professional Groups	Review & revise Trust objectives	Communication Strategy being developed within Trust	2-way process of communication between Internal & External Stakeholders	Trust Board

appendix 2 – current planning process within the Belfast Trust

Months	Description	Content	Developed through	Communicating with	Ownership
Jan/Feb/Mar	 Review of Trust Strategy Review of previous year's Corporate Management Plan Development of new Draft Corporate Management Plan 	Development of core Trust & local Service targets	Review of Stakeholder Engagement & internal Workshops	All Staff Groups	Lead Director (Director of Operations) & All Directors
April/May	Complete & approve - Trust Delivery Plan	Response to DHSSPS Priorities for Action	Consultation with Service Group Managers & Directors	TDP Response to DHSSPS shared with Commissioners & Service Group teams	Trust Board
	- Corporate Management Plan	Develops overall Trust objectives including PfA for next 12-18 months	Workshop with key internal & external staff & stakeholders. Consultation with Service Group Managers & Directors	Corporate Management Plan: for all staff & external groups & organisations & Commissioners/DHSSPS	Lead Director (Director of Operations)
May/June	 Communicate Corporate Management Plans widely Complete & communicate Service Groups Management Plans 	Service Group Management Plans combine Corporate & local objectives to create specific plans for all Service Group staff	Workshops with team staff	Service Group Management Plans – internally to all Service Group staff & across other relevant Service Groups	All Directors

appendix 2 – current planning process within the Belfast Trust

Months	Description	Content	Developed through	Communicating with	Ownership
Monthly & Bi- Annually	Trust Performance reviewed against key TDP & Corporate Plan Objectives	Formal Accountability Process	Accountability process with Service Groups	2-way Communication between Trust Executive Team & Service Groups External review with SDU	All Directors/ Service Groups
Monthly & Bi- Monthly	Service Planning Group Meetings with relevant Commissioners for: - Mental Health & Learning Disability - Older Persons & Physical Disability Services - Social Services, Family & Childcare - Acute Services	Formal communications on Services Planning/ Business Cases/HWIP/etc	Consultation within Service & Corporate Teams	Commissioners & across Service/Corporate Groups within the Trust	Lead Director (Director of Operations) & All Directors
Nov/Dec	Annual Trust Presentations on key priorities for next 1-3 years to assist in Health & Wellbeing Plans for next year(s)	Summary of key priorities across Services	Consultation within Service & Corporate Teams Proposals prioritised by Service Groups	Commissioners & across Service Groups within the Trust	Director of Operations & All Directors

notes

notes

BT08-199





2009 — 2010 CORPORATE MANAGEMENT PLAN



Setting the scene

Working for improvement

Working for Belfast Trust means working to improve the lives of the people we serve.

Our overarching purpose is to improve health and wellbeing and reduce health and social inequalities while our everyday business is to deliver safe, improving, modern, cost effective health and social care.

But we won't have a clear idea of how well we are succeeding in our endeavours if we don't define the improvements we are working to achieve.

This Corporate Management Plan sets out the improvements we in Belfast aim to make in health and social care by March 2010.

It is the 'go to' document for every person who works for the Trust - and for every person who wants to see at a glance what we are about.

It uses the headings of the five key corporate objectives we established when we consulted with the community on our strategic vision document – The Belfast Way.

Achieving the targets we list in this document will be a huge challenge but I have confidence in the calibre and commitment of people who work for health and social care in Belfast.

The merging of six former health and social care organisations into one in 2007 gave Belfast Trust an opportunity to work as a single entity for the benefit of everyone who uses our services.

Working as part of the health and social care family in Northern Ireland – and in partnership with a wide range of stakeholders – we aim to use that opportunity to the full.

William McKee, Chief Executive

OUR PURPOSE IS TO IMPROVE HEALTH AND WELLBEING AND REDUCE HEALTH AND SOCIAL INEQUALITIES

Developing our plan

This plan takes its cue from the Minister's Priorities for Action (PfA) document which sets targets for improvement in health and social care across Northern Ireland. Each Trust spells out the part they will play in this through a Trust Delivery Plan which, when joined with the targets that we have also set for ourselves in discussion with our stakeholders, becomes the Corporate Management Plan. We will share this plan with the widest possible range of people.

In the interest of accessibility this document can be made available in a range of alternative formats.

Safety and Quality



WE WILL ENSURE THE SAFETY OF EVERYONE WHO COMES IN CONTACT WITH OUR HEALTH AND SOCIAL CARE SERVICES BY ENSURING SAFER, BETTER QUALITY SERVICES FOR ALL

OBJECTIVE

1.1. To assure good governance in all areas of Trust activities and to provide care and treatment that is evidence based, audited and assessed using a range of measures that reflect positive outcomes

TARGET

- 1.1.1 We will deliver an updated Assurance Framework in line with latest departmental guidance to ensure patient safety in the Trust by March 2010.
- 1.1.2 We will implement NICE (National Institute for Health & Clinical Excellence), NPSA (National Patient Safety Agency), the DHSSPS supported clinical directives and internally derived standards and guidelines on an ongoing basis and monitor progress/outcomes through the Assurance Framework by March 2010.
- 1.1.3. We will ensure effective implementation of the Safeguarding Vulnerable Groups (NI) Order 2007 which will go live on 1 October 2009 and, in partnership with the Safeguarding panel, we will ensure Trust policies and procedures are compliant with regional child protection policies and procedures.
- 1.1.4 We will complete the harmonisation of all legacy Trust policies by March 2010.
- 1.1.5 We will test the robustness of our major incident control team to respond to an emergency and, through an annual exercise, review our readiness for Pandemic Influenza and ensure each Corporate & Service Group has tested continuity plans by March 2010.
- 1.1.6 We will ensure that the Trust achieves financial balance and completes its statutory accounts by March 2010.
- 1.1.7 We will develop an Action Plan to meet our Data Protection responsibilities by March 2010.
- 1.1.8 We will ensure that all recommendations resulting from external reviews and assessments, including RQIA / RQIS and Internal Audit are reflected in risk registers, implemented and reported through the Assurance Framework to Trust Board by March 2010.
- 1.1.9 We will fully implement the Reform Implementation Team policies and guidelines for Children's Services approved during 2009 2010 in line with the specified implementation timescales.

1.2. To fully implement the Trust's Infection Prevention & Patient Safety Delivery Plan

- 1.2.1 We will implement all aspects of our Infection Prevention and Patient Safety Delivery Plan by March
- 1.2.2 We will ensure that rapid-response cleaning teams are operational in all acute sites to assist in the delivery of cleanliness and the infection control objectives by March 2010.

Modernisation



WE WILL REORGANISE AND MODERNISE BOTH THE DELIVERY OF HIGH QUALITY HEALTH AND SOCIAL CARE AND THE EQUIPMENT AND BUILDINGS WE USE

OBJECTIVE

2.1. To modernise the delivery and timeliness of our health and social care facilities

TARGET

- 2.1 We will develop and implement a program of modernisation of all services in the context of the Trust's New Directions Strategy from April 2009.
- 2.2 We will secure the better integration of acute and community services through the extended use of our Wellbeing and Treatment Centres by March 2010.
- 2.3 We will develop business cases to modernise and improve the infrastructure of the Trust, Laundry, Catering and Decontamination Services by March 2010.
- 2.4 We will provide a single point of access for comprehensive client records in the community with the implementation of the PARIS Community Information System once Business Case approval is received.
- 2.5 We will implement the agreed key elements of the ICT Strategy by March 2010.
- 2.6 We will complete the pilot phase for testing a core set of Key Performance Indicators for Nursing & Midwifery and plan measurement methodology by March 2010.
- 2.7 We will implement a Trust working group to facilitate the transfer of services to the regional business services organisation by September 2009.
- 2.8 We will deliver the 50 Ministerial Priorities for Action (PfA) targets in 2009/10 across acute, children's, mental health, physical and learning disability and older person and specialist services by March 2010, including:
- Elective waiting times of 9 weeks (Outpatients and Diagnostics) and 13 weeks (Inpatient, Daycases);
- · 95%, 4 hour wait for treatment and discharge at A&E;
- 95% fracture patients treated within 48 hours;
- Cancer access targets –
 All urgent referrals first seen within 14 days;
 98% of patients with a new cancer receiving first definitive treatment within 31 days referral;
 95% of patients with a new cancer receiving first definitive treatment within 62 days of urgent cancer referral or Consultant upgrade to urgent cancer referral;
- · Delivery of hospital discharge targets of 90% complex patients discharged within 48 hours;
- We will ensure that at least 70% of all care leavers aged 19 are in education, training or employment;
- · Reducing admissions to mental health hospitals by 5%;
- Ensuring children wait no longer than 13 weeks for assessment in relation to autism and a further 13
 weeks for commencement of specialist treatment.

Partnerships



WE WILL WORK COLLABORATIVELY WITH ALL STAKEHOLDERS AND PARTNERS TO IMPROVE HEALTH AND WELLBEING AND TACKLE INEQUALITIES AND SOCIAL EXCLUSION

OBJECTIVE

TARGET

3.1. To work
collaboratively
with external
stakeholders and
partners to
improve health
and wellbeing and
tackle inequalities

- 3.1.1 We will communicate the Trust's strategic vision The Belfast Way to our stakeholders to ensure maximum engagement in the development of services and a shared culture and identity.
- 3.1.2 We will implement an updated Trust action plan for 2009/10 to support the continuing implementation of the Trust's Personal and Public Involvement strategy, 'Involving You' by March 2010.
- 3.1.3 We will continue to participate in regional and local initiatives on a multi-agency and multi-sectoral basis to develop and deliver services to looked after children and those young people in transitions and After Care settings by March 2010.
- 3.1.5 We will complete the audit of volunteering activity across the Trust and consolidate a basis for its future development by March 2010.
- 3.1.6 We will develop a Trust wide action plan to implement the regional palliative care model and meet the Priorities for Action target by September 2009.
- 3.1.7 We will complete a Research & Development Strategy for the Trust to identify research priorities and key areas for future investment by March 2010.
- 3.1.8 We will have completed the Health Employment Partnership and have achieved the objectives in regard to employment, job progression and career development, providing real jobs to the long-term unemployed as part of addressing health and social inequalities by March 2010.
- 3.1.9 We will consolidate our relationships with all newly established regional agencies by October 2009.

3.2. To work
collaboratively
with our internal
partners in a spirit
of mutual trust
and equal
ownership to
achieve shared
goals

- 3.2.1 We will develop and implement health improvement plans at Service Group level to contribute to the achievement of Priorities for Action and Investing for Health targets for improving health by October 2009.
- 3.2.2 We will develop and implement a Corporate Communications Strategy to ensure effective internal and external communications by March 2010.

3.3. To work with staff organisations to promote staff interests and develop a stable industrial relations climate

- 3.3.1 We will complete and implement our Corporate Social Responsibility Strategy by September 2009.
- 3.3.2 We will promote good industrial relations through the continued implementation of Trade Union partnership programmes and staff awareness training.

3.4 Continue to ensure the Trust meets its statutory duties under Section 75 of the Northern Ireland Act 1998

- 3.4.1 We will produce a new Trust Equality Scheme in line with Equality commission guidance and timescales by March 2010.
- 3.4.2 We will report, consult and take forward the quality issues associated with the Trust's Equality Impact Assessment on its Strategic Response to the Comprehensive Spending Review 2008-2011.

People





OBJECTIVE

TARGET

- 4.1. To be seen as an excellent employer within the health and social services family and beyond
- 4.1.1. We will further develop and implement a human resources strategy by September 2009.
- 4.1.2 We will develop Junior Doctor rotas which are compliant with the European Working Time Directive by August 2009.
- 4.1.3 We will modernise through the MORE programme while securing the employment of our staff in line with the targets for 2009/10.
- 4.1.4 We will achieve 80% implementation of appraisal and the knowledge and skills framework (KSF) by March 2010.
- 4.1.5 We will achieve Investors in People accreditation by June 2009.
- 4.2. To develop a culture where our people feel valued, recognised, rewarded and cared for
- 4.2.1 We will undertake a second staff survey in 2009/10. It will be completed as part of a Regional HSC Staff Survey and we will realise progress against staff perception baseline information provided on key people related measures using the benchmarking of the first survey in 2008.
- 4.2.2 We will develop and implement formal arrangements for handling the human resource aspects of organisational change by June 2009.
- 4.2.3 We will complete and implement a Trust-wide strategy for Reward and Recognition by June 2009.
- 4.2.4. We will fully implement the Consultant Contract & Specialty doctor contracts in line with regional and national guidance by March 2010.
- 4.2.5. We will implement the HSENI stress management standards, including a staff survey of stress, health and wellbeing, which will act as a benchmark against which to monitor progress by March 2010.
- 4.2.6 We will ensure that arrangements are developed for the revalidation of all its doctors in line with national and regional guidance by March 2010.
- 4.3. To improve the productivity, utilisation and performance of our people
- 4.3.1 We will work towards achievement of the DHSSPS target of 5.2% for attendance management by 2011.
- 4.3.2 We will complete and audit the team effectiveness initiative by March 2010.
- 4.4. To develop a learning culture where all our people will be supported in their development
- 4.4.1 We will develop and implement a leadership and management strategy for all staff groups by March 2010.
- 4.4.2 We will evaluate the 'productive-ward-releasing time to care' pilot and consider options for roll-out or targeted use in other areas by March 2010.
- 4.4.3 We will develop and implement our Widening Participation Strategy by March 2010.

5

Resources



WE WILL WORK TO OPTIMISE THE RESOURCES AT OUR DISPOSAL TO ACHIEVE SHARED GOALS

OBJECTIVE

TARGET

5.1. To ensure our spending and investment decisions are sustainable to secure health and social wellbeing improvement

- 5.1.1 We will achieve the Trust Delivery Plan for 2009/10 ensuring financial balance both in revenue and capital by March 2010.
- 5.1.2 We will achieve service modernisation and efficiency through the development of the MORE programmes by March 2010.
- 5.1.3 We will ensure timely delivery of the Trust's objectives through the enhancement of the performance management framework by September 2009.
- 5.1.4 We will review and revise the Trust's charitable funds arrangements to ensure compliance with the requirements of the Charity Commissioners by March 2010.
- 5.1.5 We will deliver our contracted levels of Activity for Commissioners and ensure the Trust is funded for agreed additional activity undertaken from April 2009.

5.2. To maximise the use of technology to release our professional staff to focus on adding value to the patient, client and improving outcomes

- 5.2.1 We will deliver an online E-induction package for Junior Doctors and Locums by February 2010.
- 5.2.2 We will reduce delays in results waiting time by 5% and transcribing errors by 10% through the Order Communications System across acute sites by March 2010.
- 5.2.3 We will improve the integration and integrity of our Client and Patient Information Systems through the extension of PARIS across the relevant parts of the Trust by March 2010.

5.3. To ensure the appropriate infrastructure for a leading edge 21st century health and social care provider

- 5.3.1 We will develop and implement a Trust Procurement Strategy to achieve better value for money and better use of resources by March 2010.
- 5.3.2 We will manage demand on the Health and Social Care System and improve the quality of care for patients with chronic disease through implementation of the 'Remote Telemonitoring System' by March 2010.

5.4 Create and manage a built environment that is conducive to the provision of high quality, safe and effective patient care

- 5.4.1 We will use the modernisation program to maximise the functionality of our estate by 2010.
- 5.4.2 We will deliver a Trust maintenance strategy that focuses on patient safety by March 2010.
- 5.4.3 We will deliver environmental awareness training to all new Trust staff by March 2010.

Belfast accountability structure

The Trust has clear accountability to the Department of Health, Social Services & Public Safety for delivery of Ministerial objectives to ensure safe, efficient and effective health and social care services for the population served, as shown in the summary diagram pelow:



The Corporate Management Plan is supported by individual Service Group and Corporate Team Management Plans. These local plans define Team objectives as well as the relevant corporate objectives and all staff will contribute to the achievement, defined through their Personal Contribution Plan, of both the local Plan and the Corporate Management Plan.

Individual Accountability



Belfast Health and Social Care Trust

Trust Vision & Corporate Plan



2013/14 - 2015/16

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1. Foreword

Belfast Trust has a central role in the delivery of health and social care services in Northern Ireland. As the largest provider, with a highly professional and skilled workforce providing local and regional services and with strong links to leading edge academic and research institutions through the Queen's University of Belfast and the University of Ulster, the Trust is uniquely placed to deliver excellence in health and social care.

The Trust's ambition is to build on these strengths by ensuring that innovation and creativity are central to how we take forward service delivery and transformational change, using opportunities presented by technological advances and through our strong working relationships with key partners and stakeholders.

Our objectives can only be achieved with the help and support of the people who use our services, their families and carers, and our community, voluntary and independent sector partners. We are committed to working in partnership with them in a united effort to deliver the best possible outcomes for our population.

We want to harness the skills, ideas, commitment and efforts of our own staff in achieving our vision, as well as contribute to the wider social issues related to health and social inequalities.

In order to invest in tomorrow, we must deliver improved value for money today and we need to continue to build strong leadership across our services to deliver and sustain our vision. Staying true to our values during a period of transformational change will be critical to our success.

Belfast Trust's Vision gives us the opportunity to renew a sense of pride in the Trust, as we work to offer the highest standards of care for all the people to whom we provide services.





2. Introduction

Alongside the Trust Vision, this Corporate Plan outlines the strategic direction for Belfast Health and Social Care Trust for the period 2013/14-2015/16. It sets out how our services will change and develop to ensure they meet the health and social care needs of the population of Belfast, Castlereagh and across Northern Ireland.

The Minister for Health, Social Services and Public Safety has also set out his vision for health and social care across Northern Ireland through the publication of 'Transforming Your Care'. It proposes significant changes for services over the next few years and we have ensured that the priorities identified in our Corporate Plan are closely aligned to the strategic direction within 'Transforming Your Care'.

This Corporate Plan also outlines our Guiding Principles and our Values which underpin how we will develop services over the next three years. We describe our key service priorities and expected outcomes to be delivered over the period of the Plan, recognising the challenging financial environment for health and social care services across Northern Ireland, with significant efficiency savings to be achieved.

We will regularly review and report on our progress against the objectives set out in the Plan to ensure we demonstrate what has been achieved and what remains to be delivered across our services.

¹ Transforming Your Care, 2011, Health and Social Care Board

3. Overview of Belfast Trust

Belfast Trust delivers integrated health and social care to approximately 340,000 people in Belfast and part of the Borough of Castlereagh and provides a range of specialist adult and paediatric services for the population of Northern Ireland. The Trust also has in place a significant number of partnerships with community, voluntary and independent sector providers to ensure a seamless, high quality service is provided for all the people who use our services. The Trust is led by a Trust Board, comprising a Chairman, six Non-Executive Directors, five Executive Directors and five other Directors and is responsible for the strategic direction and management of the Trust's activities. The Trust delivers its services through five Service Directorates:

- Acute Services, incorporating Medicine and Surgery, Cardiovascular and Specialist Surgery, Neurosciences, Ophthalmology and Imaging Services
- Cancer and Specialist Services, incorporating Cancer Services, Nephrology and Transplant Services, Rheumatology, Dermatology and Neurohabilitation Services, Therapy and Therapeutic Services, Pharmacy, Medical Physics and Laboratory Services
- Adult Social and Primary Care Services incorporating Mental Health, Learning Disability, services for Older People, and Physical Disability and Sensory Impairment Services
- Specialist Hospitals and Women's Health, incorporating Maternity Services, Acute and Community Paediatrics, Trauma and Orthopaedics, Gynaecology, Sexual Health & Reproduction, including GUM Services, ENT and Dental Services
- Children's Community Services incorporating, Family & Child Care Services, Community Health and Childrens Disability Services.

These directorates, working together with the Corporate Directorates of Human Resources, Medical Director's Group, Central Nursing, Planning Performance & Informatics, Finance and Estates and Communications, manage a diverse organisation with over 20,000 staff and a budget of £1.2 billion.

Belfast Health and Social Care Board

Acting Chair: Professor Eileen Evason

Non-Executive directors: Mr Les Drew, Mr Tom Hartley, Mr Charlie Jenkins, Mr James O'Kane, Dr Val McGarrell, Ms Joy Allen.

Belfast Health and Social Care Trust: Executive Team Structure



4. The Trust Vision

Our Purpose is to improve health and wellbeing and reduce health and social inequalities.

Our Vision is to continuously improve health and social care delivery and foster innovation in pursuit of this goal. We will seek to achieve the right balance between providing more health and social care in, or closer to, people's homes and supporting the specialist delivery of acute care, thereby delivering positive outcomes for the people who use our services.

Our Guiding Principles are integral to how we will deliver and develop our services:

- We will provide safe, high quality person-centered and compassionate care, ensuring the best possible experience for all the people who use our services
- We will promote wellbeing and early intervention
- We will continuously improve, through integration and partnership working, our delivery of accessible and effective services
- We will innovate to drive improvement in services, translating research into practice and using proven technology to secure positive outcomes for people who use our services
- We will ensure our people have the appropriate knowledge, skills and attributes to deliver a high quality, person centred service in a Trust which is a good place to work, train and learn
- **We will** make a real difference to the impact of health and social inequalities on the lives of local people through our leadership and advocacy, in partnership with local communities;
- We will continue to recognise and value the role and contribution of carers and families to our services;
- We will achieve efficiency, effectiveness and equity across all our resources (our staff, our services and our facilities) and look after our environment for the future.





Our Values are important. They guide our behaviour, our attitudes, the decisions we make and what we expect of one another. Our Staff have told us the Trust's Values are important to them and have a strong impact on how they view our organisation. Our focus will be on embedding and living the Values throughout the Trust.

Our Values	Our commitment is – We will:
Treating everyone with respect and dignity	Respect the rights and choices of people who use our services
	Place the needs of people who use our services and their carers at the core of service planning and delivery, and support person-centred approaches to care
	Be fair in our decisions and our actions, reflecting this in our policies and our practice
	Work in partnership across professions, services, organisations and communities to maximise the potential for health improvement and achieve the best use of resources through joined up approaches
	Recognise the contributions of staff, users, carers, volunteers and the community.
Displaying openness & trust	Ensure processes are in place for two-way communication with users, staff and the public
	Be open and transparent in our decision-making and communication;
	Build a reputation for being trustworthy
	Provide timely, accessible and appropriate information to support choice for people who use our services
	Keep people informed.
Being leading edge	Encourage and support our staff to be innovative and creative in pursuing our purpose
	Create an environment where research and enquiry can flourish
	Translate research and innovative ideas into practical improvements for the people who use our services.
Maximising learning & development	Build the capacity of the organisation and our people through appropriate learning, development and support
	Empower our people by developing and sustaining a learning culture.

MAHI - STM - 088 - 1486

Our Values	Our commitment is – We will:
Being accountable	Demonstrate personal and professional accountability in the provision of high quality care by competent staff in a safe environment
	Set and achieve clear standards in service delivery and care outcomes
	Contribute to and respect the formal accountability processes of the organisation
	Make the most of the financial and other resources we have through effective and efficient service planning, delivery and evaluation.

5. Strategic objectives, actions and outcomes

Our Strategic objectives support the achievement of the Trust's Vision and are well embedded throughout the organisation. In this section we outline our service commitments and the actions which will be taken forward to deliver the outcomes that we expect by the end of year three. Within the Continuous Improvement Section we detail our plans across our key services, from Maternity to Older People services, including our commitments to deliver improvements in Population Health and Wellbeing.

A Culture of Safety and Excellence



We will foster an open and learning culture, and put in place robust systems to provide assurance to our users and the public regarding the safety and quality of services.

Continuous Improvement



We will seek to be a leading edge Trust through innovation at all levels in the organisation.

Partnerships



We will work collaboratively with all stakeholders and partners to improve health, social care and well being and tackle inequalities and social exclusions.

Our People



We will achieve excellence in the services we deliver through the efforts of a skilled, committed and engaged workforce.

Resources



We will work to optimise the resources available to us to achieve shared goals.

A Culture of Safety and Excellence



We will foster an open and learning culture, and put in place robust systems to provide assurance to our users and the public regarding the safety and quality of services.

Our Commitment:

The Trust is committed to:

- Providing the best possible experience for all the people who use our services, taking into account their needs, to improve the quality of their health and social wellbeing;
- Ensuring that the safety and welfare of those who use our services will underpin service change and development;
- Nurturing innovation and creativity among our people to drive significant organisational change;
- Rigorously ensuring compliance with appropriate standards of care, for all the people who use our services.

Actions:

The Trust will achieve the above through the following actions which we will take forward over the next three years:

- We will continuously develop and maintain our assurance framework, including a risk management strategy, to support the Trust in meeting its objectives and to maintain public confidence;
- We will work in partnership with our local communities and other statutory and voluntary agencies and safeguard the welfare of children and vulnerable adults;
- We will ensure that the people who use our services are fully engaged in the design, delivery and review of services;
- We will develop and implement an integrated Safety and Quality Improvement Plan (SQIP) to enhance the experience of the people who use our services;
- We will deliver integrated pathways of care to ensure services are delivered in the best possible setting for those who use our services;
- We will encourage and support our staff to be innovative, creative and to work in partnership with the people who use our services, their carers and local communities to deliver improvements in our services;
- We will foster an open, transparent, learning culture to deliver the best possible services.

Expected Outcomes:

- The delivery of safe, high quality, person-centred and compassionate care, with an improvement in the experience for all the people who use our health and social care services;
- Delivery of the integrated Safety and Quality Improvement Plan (SQIP) to ensure the safety and welfare of those who use our services;

MAHI - STM - 088 - 1489

- A measurable reduction in avoidable harm as demonstrated by outcomes, similar or better than our national peers, as assessed by agreed national outcome measures;
- Integrated pathways of care which will ensure the safety and quality of our services across all settings;
- Improved public and staff confidence in the Trust's open, transparent and learning culture.



Continuous Improvement We will seek to be a leading edge Trust through innovation at all levels in the organisation.

The Trust is committed to meeting the challenges of the next few years, with major transformational plans underway across all our services in line with the strategic direction set out in 'Transforming Your Care'2. We will focus on improving health and social care outcomes, with flexible services delivering a seamless journey for people who use our services and with integrated pathways between hospital and community services.

Our service **commitments** are described in the following section supported by key **actions** and expected **outcomes** over the three year period.

- · Population Health and Wellbeing
- Maternity
- Childrens Community Services
- Acute and Community Paediatrics
- Mental Health
- Learning Disability
- · Physical Disability and Sensory Impairment
- Long Term Conditions
- Acute Care (unscheduled and elective)
- Older People
- · Palliative and End of Life Care

² based on the major areas of care, Transforming Your Care, Health and Social Care Board, 2011

Population Health and Wellbeing

Our Commitment:

The Trust is committed to working in partnership across the community, voluntary, statutory, public and private sectors to:

- Maximise health improvement;
- Ensure that people who use our services are involved in the planning, delivery and evaluation of services;
- Deliver an improvement in the health and wellbeing of people by increasing the number of years they have free from disease, illness and disability, and
- Reduce inequities in health and social wellbeing.

The principles which will underpin how services will be taken forward over the next three years to deliver the above include:

- Recognition of everyone's human right to enjoy the highest attainable standard of health;
- Prevention of avoidable ill health;
- · Equity and social inclusion;
- · Accessible Public Health information;
- Full involvement of individuals and communities in decisions which affect their health.

Actions:

The Trust will achieve the above through the following actions over the next three years:

- **We will** produce an annual Trust Health Improvement Plan with a renewed focus on health improvement and illness prevention;
- We will implement the Trust's Health Inequalities Strategy by focusing each year on selected actions with maximum potential impact;
- We will continue joint working with partner organisations including the Belfast Strategic Partnership, to achieve shared objectives;
- We will support Trust staff in their health promotion and prevention roles and in maximising their own health improvement through training, development and resources;
- We will focus on priority areas including accident prevention, alcohol, breastfeeding, obesity, physical activity, sexual health and teenage pregnancy, smoking cessation, suicide prevention/ mental health promotion and specific programmes for vulnerable groups, such as minority ethnic groups;
- We will continue to engage with our public and people who use our services in the planning and delivery of services and build capacity for participation and community action on health:
- We will further utilise our community facilities, including our Health and Wellbeing centres, to

support the delivery of more locally accessible services;

- We will maximise new technology including internet and social media to deliver health information and develop work on health literacy;
- We will implement the Trust Arts in Health Strategy;
- We will engage all of our clinicians in redesigning services that are cost-effective and offer value for money to the population.

Expected Outcomes:

By delivering the above in partnership with a range of community, voluntary, statutory and public sector agencies, our population can expect to see the following outcomes:

- Improved health outcomes for the population of Belfast, measured through a range of indicators such as:
 - reduction in proportion of adults who smoke
 - reduction in self harm
 - reduction in levels of obesity
 - increase in the proportion of adults meeting recommended guidelines on physical activity;
- Strengthened partnership governance;
- More accessible health information and increased health literacy;
- Extended use of Trust facilities within the community, including our Health and Wellbeing Centres;
- Increased access to Arts for people who use our services, staff, visitors and communities with demonstration of the benefits;
- Greater engagement by clinicians in ensuring that our care pathways offer appropriate alternatives to hospital and a focus on preventing illness and impairment.

Maternity

Service Commitment:

The Trust is committed to working with the women who use the Belfast Maternity Service to improve their outcomes and the well-being of their children, through the provision of high quality maternity and neonatal services and the increasing focus on the normalisation of maternity services and childbirth.

The **principles** that will underpin service change over the next three years are:

- Placing the needs of the mother and family at the centre so that pregnancy and childbirth is a safe and positive experience and women are treated with dignity and respect;
- Promoting healthy lifestyles for pregnant women which have a positive impact on them and their family's health;
- Providing a range of high quality choices of care as close to home as is safe and sustainable to do so, from midwife-led to consultant-led services;
- Ensuring women are supported to make an informed decision about their place of birth by providing a balanced description of the benefits and risks of the different types of maternity settings;
- Providing postnatal care to facilitate the transition to motherhood by making sure ill health is prevented or detected and managed appropriately.

Actions:

The Trust will achieve the above through the following service changes which we will take forward over the next three years.

- We will implement the DHSSPS Maternity Strategy and associated Action Plan with a focus on the normalisation of child birth and care within community settings;
- We will review the current format and provision of antenatal education, working with DHSSPS and Commissioner colleagues;
- We will work with the PHA to implement programmes to assist women to make healthy choices;
- We will implement the regional perinatal care pathway to support pregnant women with mental health difficulties:
- We will develop a new maternity hospital, incorporating the regional neonatal service, on the Royal Hospitals site, combining a consultant-led obstetric service, with an Alongside Midwife Led Unit;
- We will develop a Stand Alone Midwife Led Unit at the Mater Hospital to support women with straight forward pregnancies, as part of the choice available to women in the Belfast Maternity Service:
- We will maintain and develop the Regional Neonatal Service in the Royal-Jubilee Maternity Service and implement the RQIA recommendations for neonatal services, including the development of the Regional Neonatal Network and the extension of the neonatal transport service.

Expected Outcomes:

- A comprehensive range of choice for women who use the Belfast Maternity Service, with a subsequent increase in the number of mothers receiving antenatal care in the community and midwife led care;
- Evidence of an increasing normalisation of births with an expected reduction in caesarean sections and an increase in the percentage of births without medical intervention;
- A reduction in the incidence of mental health complications in childbirth and postnatal depression through partnership working within primary and secondary care.

■ Children's Community Services

Service Commitment:

The Trust is committed to working in partnership to ensure effective safeguarding of children in Belfast and supporting an increase in early intervention and targeted preventative services.

The Trust's key **principles** that will underpin service change over the next three years are:

- Paramouncy of a child's best interests, to be determined in consultation with parents and carers, the child and appropriately trained and experienced professionals;
- Participation of children, their families and carers in the design, delivery and evaluation of services;
- Further development of partnerships between the Belfast Trust, community and voluntary groups as well as other statutory agencies to ensure comprehensive and effective provision;
- Promotion of improved outcomes for children and young people across the six key outcome areas, in line with the 10 Year Strategy for Children and Young People:
 - Healthy
 - Enjoying, learning and achieving
 - Living in safety and stability
 - Experiencing economic and environmental wellbeing
 - Contributing positively to community and society
 - Living in a society that respects their rights.

Actions:

The Trust will achieve the above by working in partnership with key statutory, community and voluntary sector partners to deliver these service changes over the next three years:

- We will work in partnership with Statutory, Community, Voluntary and BME3 sector partners under the auspices of the Belfast Outcomes Group, to deliver integrated commissioning and improved outcomes;
- We will commission a range of services focusing on early intervention and prevention in line with the Belfast Outcomes Group Action Plan;
- **We will** develop a targeted parenting programme for specific families which offers additional health visiting support;
- We will develop a comprehensive Infant Mental Health Service Implementation Plan;
- We will establish a comprehensive service for children and their families experiencing domestic violence;
- We will offer a range of services to support children and young people to remain in their community
 of origin including a review of the Trust's Intensive Support Services;
- We will implement the Family Nurse Partnership programme to provide intensive support to first time teenage mothers in the early years of the child's life;

³ BME Black, Minority or Ethnic Sector partners

- We will establish Family Support Hubs across Belfast in conjunction with the Belfast Outcomes Group;
- We will further improve our assessment processes including a review of the role and function of our family centres while enhancing collaborative working;
- We will review our Looked After Children services, which will include Residential, Foster Care and Adoption in line with the regional review of residential care, and the Regional Policy on Permanence;
- We will further develop employment and training opportunities for our care leavers both within the Trust and externally;
- We will further develop short break services for children with learning disability and complex needs and their families;
- We will review the service delivery for children with learning disability and complex needs, which will include fieldwork, hospital and residential care to enhance collaborative working;
- We will further develop transition arrangements into adult services for children with learning disabilities, sensory needs, complex physical and mental health needs through comprehensive communication with key services.

Expected Outcomes:

- An increase in the numbers of children and families accessing early intervention and targeted
 preventative services with a resultant reduction in the number of families and children requiring high
 level social and health interventions;
- Effective safeguarding of children in Belfast and a reduction in the numbers of children and young people requiring statutory intervention;
- A greater number of families in receipt of preventative and targeted family support services;
- An increase in the number of children supported at home and a reduction in the number of children who are in care;
- More foster carers and a broader range of foster caring skills providing supportive family environments for children and young people;
- Completion of the Family Nurse Partnership programme for targeted families;
- A reduction in referrals for statutory family and child care services;
- A significant improvement in the delivery of seamless transition arrangements for young people into adulthood with an improvement in their mental health and wellbeing, including increased numbers engaged in education, training or employment;
- A targeted, focused children's disability service with evidence of signposting to appropriate services to best meet the identified needs of the child and family.

Acute and Community Paediatrics

Service Commitment:

The Trust is committed to providing a range of acute and community paediatrics, including specialist acute services for unscheduled and elective care, for both the region and the population within the Belfast Trust.

The **principles** which will underpin acute and community paediatrics over the next three years are:

- A child and family focussed service, with experienced, safe and skilled children's practitioners;
- The needs and best interests of the child will be determined in consultation with them, their parents, family and carers together with appropriately trained and experienced professionals;
- The participation of children and their families and carers in the development, delivery and evaluation of services;
- The provision of a dedicated, safe and secure environment for children and young people that will deliver high quality, specialist, evidence based care and treatment;
- A seamless transition from children's to adult services, where there is appropriate resource to meet the needs of the individual child or young person.

Actions:

The Trust will achieve the above through the following service changes which we will take forward over the next three years:

- We will work with DHSSPS and HSCB to develop a new Children's Hospital;
- We will develop ambulatory services and review the delivery and location of paediatric outpatient services, including community paediatrics, to support the provision of children's services closer to their home, where this is appropriate to do so;
- We will implement new and revised patient pathways for elective (planned) patients, extending our
 use of Day Surgery facilities and admission on the day of surgery;
- **We will** implement the recommendations of the Regional Paediatric Review in partnership with the DHSSPS, HSCB and other Trusts;
- We will work with the DHSSPS and HSCB to agree the age range of children and young people across Northern Ireland who will receive their care from paediatric services;
- We will continue to review vulnerable paediatric services in partnership with the HSCB, and DHSSPS to ensure safe and sustainable specialist paediatric services are available for the local and regional population;
- **We will** further develop and maintain networks within the region, nationally and, where appropriate, internationally;
- We will further develop transition arrangements from children's services to adult services for children
 with complex health needs through early intervention and comprehensive communication with key
 services;

- We will continue to review, through the Unscheduled Care Working Group and in partnership with the Local Commissioning Group, the patient pathways for unscheduled care including minor illnesses:
- We will continue to work in partnership with other Trusts, with the support of the HSCB and PHA, to ensure that children with long term complex conditions are cared for in the most appropriate environment as close as possible to their families.

Expected outcomes:

By delivering the above, our population can expect to see the following outcomes, which will include:

- Strengthened networks for the provision of paediatric services for the population of Northern Ireland;
- A regionally agreed age range for children and young people to access children's services;
- An increased use in the range of ambulatory care options;
- Reduced hospital admissions due to childhood infections;
- Reduced use of hospital services and hospital beds;
- A significant improvement in the delivery of seamless child-focused transition arrangements for young people from children's to adult services.

Mental Health Services

Service Commitment:

The Trust is committed to providing a modern, responsive mental health service that promotes recovery and independence with the full participation of the people who use our services and their carers. We want to continue the move away from hospital based services to the further development of early intervention and community treatment and support.

Some people will require acute episodes of care as inpatients. The time spent as an inpatient in an acute facility should be short and focussed on returning people to the community as quickly as possible. A small number of people are likely to require longer periods of treatment and rehabilitation care in dedicated hospital facilities.

The **principles** which will underpin service change are:

- People who use our service should have their rights respected;
- People who use our services should be fully involved in the commissioning, planning, design and delivery of services;
- People using Mental Health Services should have equity of access to all Trust Services;
- People who use our services should be supported to keep or regain control of their lives.
 This support can be provided by a wide range of services, organisations, families, carers and professionals;
- Services should promote evidence based treatments, independence and self-directed treatment and support so that individuals and their carers will be able to have more choice and control over the services they receive;
- Services should be developed in partnership with the community for those at greatest risk of harm and should include opportunities to access peer support.

Actions:

The Trust will achieve the above through the following services changes which we will take forward over the next three years.

- We will increase the opportunity for people who use our services to have self-directed support and
 individual budgets so that people who use our services and their carers will be able to have more
 choice and control about services they receive (including access to peer support);
- We will support all people who use our services to develop a personal recovery plan;
- We will develop and establish a User Recovery College which will promote opportunities for personal recovery, social inclusion and links to other agencies for training and educational opportunities;
- We will further promote advocacy, including peer advocacy, so that there is a strong voice for people who use our services and carers in improving how services are delivered;

- **We will** develop, in partnership with local community services, the provision of co-ordinated Psychological Therapies across Mental Health Services;
- We will work with people who use our services, and carers, to develop a high quality inpatient
 experience for those who require hospital admission, including a new state-of-the-art acute inpatient
 facility on the Belfast City Hospital site;
- We will secure appropriate housing and accommodation options which will enable people who use our services to be supported to live independent lives in the community;
- We will further develop urgent response mental health services, home treatment, day treatment and support services for people of all ages to reduce the need for hospital admission;
- We will further develop evidence based early intervention services, in particular, for young children, adolescents and at the interface between Child and Adolescent and Adult mental health services:
- We will develop the new Old See House facility as a centre of excellence in partnership working between professional and service user peer experts;
- We will further develop partnership working with other public services, communities and mental health service organisations to provide more responsive services for people who use our services and carers.

Expected Outcomes:

- More people who use our services will report a high level of satisfaction with the services we provide;
- More people who use our services, and carers, will take up the opportunity for self directed support;
- More people who use our services will be supported in their own homes by mental health services and hospital admissions will be reduced;
- More people who use our services will be provided with opportunities and support to take up employment, including within mental health services.

Learning Disability

Service Commitment:

The Trust is committed to the further development of services which support people with a learning disability to enjoy and live full lives within their local communities and to promote independence through the provision of a range of family, carer, voluntary and statutory support services.

The Trust's **principles** for services for people with learning disabilities are:

- People who use our services should have their rights respected;
- People who use our services should be fully involved in the commissioning, planning, design and delivery of services;
- People using Learning Disability services should have equity of access to all Trust services;
- People who use our services should be in control of their lives. The Trust recognises that some
 people who use our services may need support to make decisions. This support can be sought from
 a wide range of sources, families, carers and professionals;
- The availability and range of appropriate therapies and treatments should increase in community settings;
- Services should promote independence and self directed support so that individual and their carers have more choice and control over services they receive.

Muckamore Abbey Hospital will continue to provide a range of inpatient assessment and treatment services but, after 2015, it should not be a home for life for people with a learning disability. Providing there is betterment in their care, people should experience community living.

Actions:

The Trust will achieve the above through the following services changes which we will take forward over the next three years.

- We will complete the community integration of individuals who have been resident at Muckamore
 Abbey Hospital and develop, in partnership with other agencies, homes for life in the community that
 will provide high quality accommodation and support services for people with learning disabilities,
 including those with complex and challenging needs;
- We will further develop a range of community treatment and support services to enable people who use our services with a learning disability to live as full citizens in the community, to prevent inappropriate admission to hospital and maximize their independence;
- We will further develop services and support to carers and improve the range of respite options, including home based respite services;
- We will further promote advocacy, including peer advocacy, so that there is a strong voice for people who use our services and carers in improving how services are delivered;
- We will develop new inclusive alternatives to traditional daycare for school leavers and will work with other partners to increase employment opportunities, access to local leisure and social networks and

activities for all adults with learning disabilities;

- We will develop preventative and early intervention strategies to support the improvement of the physical and mental health of adults with a learning disability;
- We will further develop partnership working opportunities with communities and other learning disability providers in order to provide more responsive services for users and carers;
- **We will** develop urgent/unscheduled community treatment and support services to maintain individuals in the community and help prevent hospital admission.

Expected Outcomes:

- More people who use our services will report a high level of satisfaction with the services we provide;
- We will have reduced the number of people with a learning disability being cared for in long term institutional care:
- More people who use our services will be treated and supported in their own homes and community and hospital admissions will be reduced;
- We will increase the number of people accessing community based alternatives to traditional daycare alternatives (including further education, training and employment);
- More people who use our services, and carers, will take up the opportunity for self directed support alternatives.

Physical & Sensory Disability

Service Commitment:

For people with a physical or sensory disability, the Trust will be seeking to work in partnership with individuals to promote independence and enable them to have more control over the type of services that they want to receive.

The **principles** that will underpin service change over the next three years are:

- People who use our services should have their rights respected;
- People who use our services should be fully involved in the commissioning, planning, design and delivery of services;
- People using Physical or Sensory Disability services should have equity of access to all Trust services, facilities and information;
- Services are person centred and offer maximum choice of service and equipment;
- Services enable disabled people to have the fullest possible control over their lives and to maximise their independence and inclusion in their chosen communities;
- A community development approach should be used to maintain people in their own environment and to promote partnership working across organisations and groups;
- Co-ordinate services to maximise continuity and a holistic approach.

The Trust will continue to provide a range of specialist rehabilitation services on the Musgrave Park Hospital site. This will include acquired brain injury rehabilitation, spinal cord injury rehabilitation, amputee rehabilitation and post fracture rehabilitation for older people. Services for patients requiring non urgent but essential admission for expert multi-disciplinary assessment of neurological disorders, deterioration in neurological status and subsequent decline in functional ability will be co located with the specialist rehabilitation services at Musgrave Park Hospital.

Actions:

The Trust will achieve the above through the following service changes which we will take forward over the next three years.

- We will work with our NI Housing Executive and housing associations to continue to develop more appropriate supported living options in the community;
- We will maximise the use of technology to assist people in their day to day lives;
- We will further promote advocacy, including peer advocacy, so that there is a strong voice for people who use our services and carers in improving how services are delivered;
- We will prescribe appropriate aids and appliances, wheelchairs and prosthetics based on the specific needs of the individual;
- We will support the development of a range of choices for those in transition to adulthood, including pathways to employment;

- We will encourage more people to take up the opportunity of self directed support and individual budgets to allow them to have more choice about what services they receive;
- We will continue to modernise day support services and maximise opportunities in the community for people with disabilities;
- We will continue to provide specialist hospital services through the range of specialist rehabilitation services on the Musgrave Park Hospital site. The Community Brain Injury Team will work closely with the Regional Acquired Brain Injury Unit at Musgrave Park Hospital to ensure a seamless service.

Expected Outcomes:

- More people who use our services will report a high level of satisfaction with the services we provide;
- More supported living places available in the community;
- An increase in the number of individuals and carers taking up self-directed support and individual budgets;
- An increase in the number of people accessing community based alternatives to traditional day support services (including further education, training and employment);
- An increase in short breaks and respite services for carers.

Long Term Conditions

Service Commitment:

Long Term Conditions cannot at present be cured, but can be controlled by medications and/or therapy. People with a Long Term Condition are generally cared for at home, but may, on occasion, require admission to hospital to receive urgent care and treatment. The Trust is committed to delivering high quality care and better outcomes for people living with a Long Term Condition, including the provision of an alternative to hospital admission where clinically appropriate.

The **principles** which will underpin how services for people living with a Long Term Condition will be taken forward over the next three years to deliver the above include:

- Focusing on prevention;
- Working with our primary care partners in General Practice to enhance the role of primary and community services in the treatment and management of Long Term Conditions, which offer an alternative to hospital admission:
- Providing an increased focus on self-management of conditions by providing appropriate support for individuals in their own homes or by supporting parents or carers to care for their children at home.

Hospital services will continue to be available for patients when they require it, particularly in the acute phase of an illness and appropriate services outside of hospital will be available to support people with a Long Term Condition through the various stages of the care pathway.

Actions:

The Trust will achieve the above through the following services changes which we will take forward over the next three years.

- We will work with our primary care partners, through our 8 'local' integrated care teams, to
 develop new care pathways and personalised care plans for adults with a Long Term Condition,
 targeting those in particular who are most at risk of acute hospital care. This will help to reduce the
 requirement for hospital admission for individuals with a Long Term Condition;
- For children and young people, we will focus on ensuring that personalised care plans are developed involving the child/young person, parents, carers, paediatricians, community childrens nurses and general practitioners;
- We will support the development of Integrated Care Partnerships which will be a key vehicle for delivering the above (initially in the areas of diabetes, respiratory disease and stroke);
- We will continue to support the Regional Transforming Cancer Follow-Up Project, thereby enhancing the range of services available to patients following a cancer diagnosis in keeping with extended survivorship;
- We will maximise the use of new technology called 'telemonitoring', which will enable suitable
 patients to access technology in their own homes to monitor and test their condition, enabling
 clinicians to receive information about the individual's condition in real-time or regular basis.

Expected Outcomes:

- More patients with a Long Term Condition being able to manage their condition at home, with fewer admissions to hospital;
- · Improved care pathways and personalised care plans;
- More accessible, effective and integrated services between primary and hospital care.

Acute Care (Unscheduled Care)

Service Commitment:

- Delivering safe and sustainable services across acute care including networks for cancer services, major trauma, fracture services, heart conditions and stroke and to communicate effectively with services users on the need for service re-configuration;
- The provision of a seamless service delivered seven days a week and where appropriate, 24 hours a day service, working in partnership with our clinical teams and colleagues in primary care;
- Further developing patient pathways to access appropriate emergency care, including the provision
 of direct assessment and admission, as well as urgent care for patients with a Long Term Condition,
 in partnership with Primary Care and GP out-of-hours services;
- Working with patients to develop new models of care which balance the provision of specialist care, using ambulatory care models, integrated care pathways and technology to support individual patients within the most appropriate environment;
- Continuously improving the efficiency of services by reducing unnecessary duplication and fragmentation of clinical and diagnostic services across the hospital sites, reducing length of patient stay and investing in alternatives to hospital services, leading to a reduction in the need for people to come into hospital.

Actions:

The Trust will achieve the above through the following services changes which we will take forward over the next three years:

- We will implement new and revised patient pathways working with others to focus on the continuous improvement of the care and experience of patients with urgent care needs;
- We will improve pathways for patients with a Long Term Condition, maximising the benefits of technological advances to ensure that more patients are at the centre of the management of their own condition and receive their care in the appropriate environment, including their own homes avoiding the need to attend hospital;
- We will continuously review the way we provide services, through best practice nationally eg. in pharmacy, laboratory and diagnostic services and ensure effective communication with our patients and all our stakeholders;
- We will continue to drive improvement in hospital service delivery, with a focus on clinical outcomes, and the delivery of performance standards to achieve a reduction in the average length of stay and the further development of ambulatory services;
- We will develop a Strategic Plan for the development and delivery of fracture services, working with HSCB and other Trusts;
- We will improve the delivery of care for patients with a Long Term Condition who present to unscheduled care services such as those patients with respiratory disease;

• We will work with the HSCB to secure investment in diagnostics and reconfiguration of support services on an extended day and seven day week basis.

Expected Outcomes:

- An improved patient experience, with a greater focus by all our staff on person centred and compassionate care;
- Achievement of the Ministerial Standards for Unscheduled Care, including waiting times for services;
- Delivery of a seamless patient pathway for emergency patients presenting through the Emergency Department;
- The development of a range of pathways appropriate to patients' specific conditions;
- A reduction in the need for people to come into hospital as a consequence of the development of innovative alternatives to hospital admission.

Acute Care (Elective Care)

Service Commitment:

- Delivering safe and sustainable services across acute care and communicating effectively the need for service change;
- Developing protected elective services and thereby improving patient flows to effectively and efficiently improve access waiting times for patients;
- Continuously improving the efficiency of services by reducing unnecessary duplication and fragmentation of clinical and diagnostic services across the sites, reducing length of stay and investing in alternatives to hospital services, leading to a reduction in the need for hospital beds.

Actions:

The Trust will achieve the above through the following services changes which we will take forward over the next three years:

- We will continue to reconfigure the adult Acute Hospital Network and further develop effective
 networking arrangements with other Trusts locally, regionally and internationally to ensure access to
 safe and sustainable elective care services:
- We will implement new and revised patient pathways for elective (planned) patients, extending our
 use of admission on day of surgery, Day Surgery, 23 hour services and ambulatory care services;
- We will continue to implement improvement methodologies across all our services, such as in theatres and wards, and take forward the implementation of communication technologies within outpatient services to improve the appointment attendance rate;
- We will improve access for patients and improve the efficiency with which resources are used by further developing weekend and extended day working, including access to diagnostics;
- We will deliver Commissioner funded service developments which will bring improved waiting times
 and service quality for patients, for example an increase in the levels of cardiac surgery, screening
 programmes, the extension of macular degeneration and glaucoma services in ophthalmology;
- **We will** develop a Strategic Plan for the development of elective orthopaedic services, working with Commissioners and other Trusts:
- We will continue to develop new, and support our existing, clinical networks to improve the quality of service delivery;
- We will introduce new models for the management of outpatients, working with our primary care partners, to deliver an efficient and effective service in line with Commissioning Strategy;
- We will further develop transition arrangements from children's services to adult services through early intervention and comprehensive communication with key services.

Expected Outcomes:

- An improved patient experience, with a greater focus by all our staff on person centred and compassionate care;
- A reduction in the average length of stay for patients with a reduction in the number of beds required to maximise efficiency, effectiveness and equity across our resources;
- The delivery of sustainable diagnostics and support services;
- Achievement of Ministerial waiting time standards for Elective Care Access, including waiting time for services;
- A reduction in the need for people to come into hospital as a consequence of the development of innovative alternatives to hospital admission.

Older People's Services

Service Commitment:

The Trust is committed to providing services which will enable more older people to live fulfilling lives, independently in their own homes for as long as possible, supported, where required, by a network of health and care services.

The **principles** which will underpin how services will be taken forward over the next three years to deliver the above include:

- People who use our services should have their rights respected;
- Ensuring services are accessible;
- People who use our services should be fully involved in the commissioning, planning, design and delivery of services;
- Further integration of primary, secondary and independent sectors to ensure services are aligned to meet the needs of older people;
- People using Older People's Services should have equity of access to all Trust services;
- Keeping people as independent as possible;
- Working in partnership with commissioners to design and deliver services with a greater role for voluntary and community sectors;
- Giving people increased control over services through greater personalisation;
- · Providing greater support for carers;
- Dignity and respect in every service area.

Hospital services will continue to be available for patients when they require it, however urgent acute care will also be provided safely at home for many conditions. Enhanced community health and social care services will be provided to support older people through the various stages of the care pathway.

Actions:

The Trust will achieve the above through the following services changes which we will take forward over the next three years:

- We will work as part of a collaborative network through Integrated Care Partnerships, improving care pathways for older people to facilitate more urgent and rehabilitative care being provided outside a hospital setting;
- We will work with communities and independent sector care partners to improve prevention strategies including developing falls prevention programmes for older people in our community;
- We will develop services which will provide rapid access to specialist assessment services
 (including improved access to intermediate care) which will reduce the requirement for hospital
 admission and facilitate earlier hospital discharge;

- We will continue to improve stroke services through implementation of regional strategies and the
 rapidly developing evidence base. These will focus on achieving excellence in acute care and fully
 developing early supported discharge services and community support;
- We will increase the opportunity for people to have self-directed support and individual budgets so
 that individuals and their carers will be able to have more choice and control about services they
 receive;
- We will take forward planning for two supported housing schemes over the period of the Plan, in
 partnership with the NI Housing Executive and Housing Associations, providing greater choice of
 independent living options for Older People who need supported in the community;
- We will continue to implement reablement in domiciliary care ensuring that older people access
 opportunities to improve their daily living skills, and their confidence as well as ensuring they receive
 support to remain connected with their local community;
- By increasing the emphasis on promoting independence, reablement and providing more support
 for carers, demand for residential care is likely to reduce and we will therefore take forward a
 consultation on the future of our statutory frail elderly residential homes;
- We will review the role of our EMI residential homes to ensure they meet the needs of our older population.

Expected Outcomes:

By delivering the above, our population can expect to see the following outcomes:

- More older people will be cared for in their own homes when they need support from health and social care services and hospital admissions will be reduced;
- There will be fewer incidents of falls amongst our older people which result in the need for hospital admission;
- Through improved rehabilitation services, there will be fewer older people needing longer term domiciliary care support in the community;
- More people, carers and older people, will take up the opportunity for self directed support;
- We will have additional supported living places available for older people in our community.

Palliative and End of Life Care

Service Commitment:

The Trust will develop services in line with the Palliative and End of Life Care Strategy for Adults in Northern Ireland, 'Living Matters, Dying Matters' and will work with the DHSSPS/PHA to develop a Palliative and End of Life Care Strategy for Children in Northern Ireland.

The principles which will underpin service delivery and change include:

- Ensuring that people die with dignity, in as far as is possible, in a place of their choice;
- Ensuring that services are available that offer an alternative to hospital admission.
- Hospital services will continue to be available for patients as required.

Actions:

The Trust will achieve the above through the following services changes which we will take forward over the next three years.

- We will work with our primary care partners in General Practice through an integrated care partnership to enhance the role and quality of primary and community services in palliative care;
- We will work with the DHSSPS & PHA to develop the Palliative and End of Life Care Strategy for Children;
- We will develop systems across all Trust services that will enable us to deliver palliative and end of life care close to home.

Expected Outcomes:

By delivering the above, our population can expect to see the following outcomes:

- An improved patient experience, with a greater focus by all our staff on person centred and compassionate care;
- More people exercising choice about their end of life care;
- More people requiring palliative care will be able to receive care in the community, rather than having to be admitted to hospital;
- Improved care and support for children requiring palliative care, families and carers.

⁴ Living Matters, Dying Matters



Partnerships

We will work collaboratively with all stakeholders and partners to improve health and wellbeing and tackle inequalities and social exclusion

Our Commitment:

The Trust is committed to:

- Ensuring that people who use our services are fully involved in the commissioning, planning, design and review of service delivery;
- Working collaboratively with external stakeholders and partners to improve health and wellbeing and reduce health and social inequalities, identifying opportunities to address the underlying causes of life inequalities across the Belfast area;
- Working in partnership with Trade Union organisations to promote staff interests and maintain a stable industrial relations climate;
- Continuing to ensure the Trust meets its statutory duties under Section 75 of the NI Act 1998 and under Section 19 and 20 of the Health and Social Care Act to consult with the people who use our services;
- Supporting leading edge research and innovation in health and social care through links with a range of partners, including Northern Irelands academic institutions.

Actions:

Based on these principles, the key actions which we will take forward over the next three years, in partnership with community, voluntary and statutory organisations;

- We will focus on the priority areas of the Belfast Strategic Partnership to address life inequalities (linking these to Transforming Your Care) and supporting the development of Community Planning);
- **We will** develop service partnerships, which will help drive developments in primary and community based care and treatment, to support the implementation of Transforming Your Care;
- We will strengthen our engagement processes, through the involvement of the people who use our services, carers and communities, MLAs, Trades Unions and Professional Associations and with other stakeholders;
- We will listen to local communities and continue to work in partnership with them to develop health and social care services that meet their needs;
- We will further develop our PPI (Patient and Public Involvement) arrangements within the Trust's
 Framework for User Involvement, 'Involving You', and embed accountability arrangements for PPI in
 the Trust;
- We will actively pursue integrated working with primary care colleagues to deliver improved communication and better outcomes for the people who use our services;
- We will develop the role and function of the Trust's Health and Social Inequalities and Partnership Forums;

- We will continue implementation of the Trust's Health Inequalities and Disability Action Plans together with applying the commitments set out within the Trust's Equality Scheme;
- We will continue to work in partnership with a wide range of employment initiatives in support
 of groups and people who are furthest away from employment. These include the long-term
 unemployed in locally deprived areas within Belfast, young people in care and people with a
 disability;
- We will work collaboratively with our partners in taking forward the Trust's Corporate and Social Responsibility Strategy;
- We will implement a Research and Development Strategy and support original research in Northern Ireland, including the translation of research and evidence of best practice into health and social care, through collaboration with NI's academic institutions.

Expected Outcomes:

By delivering the above, our population can expect to see the following outcomes:

- An engaged, empowered and healthier workforce;
- Engaged users, carers, volunteers and communities involved in co-design and co-delivery of services;
- Improved population health and wellbeing and a reduction in inequalities;
- More accessible and effective services, as a consequence of better integrated systems of care and partnership working;
- A thriving social economy delivering health and social care within local communities;
- More effective translation of research evidence into clinical governance, with an increase in the income to support research and quality of publications.



Our People

We will achieve excellence in the services we deliver through the efforts of a skilled, committed and engaged workforce.

Our commitment is to ensure 'Our People':

- Will be supported in their roles and their development as part of a learning Organisation and to achieve and improve organisational performance;
- Will build and have the capacity and capability to enable the delivery of seamless, productive, modern and quality Health and Social care services;
- Will work in an organisation which strives to be seen and recognised as an excellent employer in the health and social care field and beyond;
- Will feel valued, recognised and rewarded for their individual and team endeavours in delivering high quality health and social care;
- Will show and demonstrate leadership, excellence and innovation through organisational and workforce development;
- Will work in an organisation that actively promotes equality of opportunity and good relations in its interactions with service users, staff, other organisations and the local community;
- Will be listened to, engaged and encouraged to participate and be involved in the key decisions within the Trust;
- Will be empowered through modern business systems to have access to more efficient Human Resource and Finance service systems and new ways of working.

Actions:

The Trust will achieve the above through the following actions we will take forward over the next three years:

- We will review and update our workforce strategies to address the needs and requirements
 necessary to enable staff to deliver the transformational change set out within the Corporate Plan
 and Transforming your Care;
- We will continue to work with a wide range of education and learning providers and agencies
 to ensure we offer a vibrant learning and employment environment to support our staff and the
 development of those who may be our future workforce;
- We will, as a minimum, meet our statutory responsibilities for the health, safety and wellbeing of our staff:
- We will support the Trust's Strategic Reform and Quality Improvement Cost Reduction (QICR)
 programmes by leading effective change management, integrated workforce planning, training and
 continued implementation of continuous improvement programmes to review and improve service
 delivery;
- We will be an Investor in People organisation and embed the Trust's approach of 'Investing in Our People' as part of delivering high quality care and improving the performance of the Trust;
- We will review and embed our Trust Values focusing on living and demonstrating the values

throughout the Trust and in delivering the service to our patients, clients and local community;

- We will establish a Leadership and Innovation Academy as a centre of excellence, resourced to stimulate and support innovation, creativity and leadership at all levels in the organisation and to facilitate excellence in service delivery and transformational change;
- We will create and promote an ethos of equality and fair treatment and contribute to equality and good relations through inter-agency work and community involvement;
- We will listen to our people through initiatives such as the staff surveys, questionnaires, focus
 groups which will continue to inform the development of action plans to improve health and wellbeing and the working lives of our staff;
- We will review Employee Engagement and develop and implement a model to improve engagement methods and opportunities for all Trust staff;
- We will review our formal Trade Union infrastructures to ensure appropriate staff representation
 and actively promote partnership working with Trade Unions to both promote staff interests and the
 interests our patients and clients and ensure a stable and productive industrial relations climate fit for
 purpose;
- We will implement the appropriate HSC Shared Service arrangements and the Human Resource
 Payroll and Travel System (HRPTS). These modern business systems and new ways of working for
 Human Resource and Finance functions are to enable and support managers and staff in carrying
 out their tasks more efficiently.

Expected outcomes:

By delivering the above our staff, patients and clients and local communities can expect to see the following outcomes:

- Excellence in service delivery through a committed, skilled workforce which is engaged and developed to deliver a high quality, seamless health and social care;
- Improved internal and external key performance indicator results as they relate to our workforce eg. absence levels, staff survey findings and staff turnover;
- Successful strategic change in service by the application of excellent human resource policies and strategies;
- An established Trust Leadership and Innovation Academy in place which has stimulated and supported research, innovation and creative approaches and solutions which have contributed to improved delivery of care and services;
- Continuity of service by having in place effective people management and industrial relations arrangements;
- A new HRPTS and Shared Services system implemented and new systems of work operating within the timeframe agreed regionally;
- Achieved external accreditation and or recognition for the Trust's People Management arrangements;
- A properly managed work environment where risks to health and safety are controlled as far as reasonably practicable.



Resources

We will work to optimise the resources available to us to achieve shared goals.

Our Commitment:

The Trust is committed to providing services which maximise health and wellbeing outcomes, add value, are affordable, reduce health and social inequalities and are set within the Trust's overall risk and assurance framework.

To achieve this, we need to maximise the capability of our resources, including finance information communication technology, the Trust estate and our environmental management.

Two overarching strategic financial management objectives must be met during the period of the plan:

- A 5% shift in spending from hospital services to be re-invested in primary, community and social care services across Health and Social Care (HSC) by 2014/15;
- A minimum annual improvement in efficiency across the HSC of 4%, delivered through both cash releasing savings and efficiency improvements.

Within identified resources, we will maximise the use and deployment of both current and emerging information communication technology, to support the delivery and sustainability of the Trust's strategy.

Our capital redevelopment strategy will ensure that our infrastructure is maintained where necessary, rationalised where appropriate and developed where required, to meet the demands of service delivery and change.

The Trust will ensure that the environmental impact of its activities consistent with maintaining its responsibilities in proving high quality patient care.

Actions:

The Trust will achieve the above through the following steps which we take forward over the next three years:

- We will work collaboratively with our Health and Care Partners to deliver financial balance in each year of the Plan;
- We will aim to deliver on our Quality Improvement and Cash Releasing (QICR) Plans and, in doing so, benchmark our services in line with the top quartile of UK health and social care organisations;
- We will aim to deliver on our agreed contracted levels of activity for Commissioners and ensure we
 are appropriated funded for services delivered and new service developments established;
- We will have in place robust financial governance and performance management systems which will ensure probity in all we do;
- We will, through our IT Project Prioritisation/Implementation process, work with service teams to deliver the benefits specified in the project Business Cases by the introduction of new IT systems and processes;

- **We will** work to further deliver the Business Services Transformation Programme, including the full implementation of the Finance, Procurement, Logistics, HR, payroll and travel systems;
- We will progress our capital re-development strategy in line with funding agreed with the DHSSPS and HSCB;
- We will work in partnership to mitigate the effects of climate change on our environment, by implementing the Environmental and Sustainability policy and the Not Just Health Strategy to increase our recycling and reduce our carbon footprint and our use of energy and water.

Expected Outcomes:

By delivering the above, our population can expect to see the following outcomes:

- The organisation will achieve efficiency, effectiveness and equity across all our resources and look after our environment for the future;
- We will demonstrate value for money in all we do;
- We will ensure we have infrastructure that supports the demands of a 21st century health and social care provider;
- A reduction in the Trust carbon footprint.

6. Glossary

Commissioner/HSCB The Health and Social Care Board who commissions Belfast Health and

Social Care Trust services

Ambulatory Care A healthcare consultation, treatment or intervention which does not involve

an inpatient stay. Ambulatory services will include minor surgical and medical procedures, dental service and the range of diagnostic services

and might be undertaken within a community or hospital setting

BME Groups Black, Minority and Ethnic Groups

BT13-820

BHSCT Corporate Plan 2021-23





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Accessibility

This document is available in other formats including Easy Read, Large Print, Braille or electronic formats. Please let us know which format would be best for you.

Contact Orla Barron on 028 9504 6567 or orla.barron@belfasttrust.hscni.net or 07825 146432

INTRODUCTION

Belfast Trust is at the heart of our community. Our people – patients, service users, carers and staff – are the centre of Belfast Trust. The dedication, resilience, innovation and flexibility of our staff enabled our services to rise to the enormous challenges to meet the needs of our community throughout the COVID-19 pandemic.

Our priorities over the 2021-23 period are to balance the ongoing needs of people and communities affected during the pandemic and address the impact on all our services, particularly elective waiting times and lists, services for children, older people and those who have mental health needs.

Alongside these local priorities, we will work as part of the wider HSC system to deliver on improvements in urgent and emergency care, to address waiting times for surgery and outpatient appointments and to deliver the Mental Health Action Plan. Excellent progress is being made on our major investment plans which will benefit the region, with completion of our new Women's Hospital in 2022/23 and construction beginning on our new Children's Hospital.

Across our services, the aim of 'delivering safe, effective and compassionate care' has never felt more true. We are absolutely committed to meeting the needs of our population, providing the Right Care, at the Right Time and in the Right Place.

The learning from our experiences during the pandemic will continue to inform the conversation about how we can better deliver services within our community. This learning will be reflected in our next corporate plan, the timing of which will be guided by the Department of Health commitment to align health and social care planning arrangements with Programme for Government (PfG) and the next Assembly mandate.

Cathy Jack Chief Executive

Carty Juda

Peter McNaney Chairman

ABOUT US

- STM - 088 1525

Supported by our values of working together, excellence, openness & honesty and compassion, we will continue working collectively with our staff, Trade Unions, partners across primary care, community and voluntary sectors and the independent sector.

As an integrated Health and Social Care Trust, Belfast Trust provides the majority of regional adult and paediatric specialist services across Northern Ireland as well as local emergency and elective services. We work in partnership with our community to deliver services to our older people, children and families, to those people with a learning disability, physical disability and mental health conditions. We are increasingly seeking to use our influence to improve the health and wellbeing of our community, with an annual budget of £1.8 billion and as an employer of over 20,000 staff.

Everything we do in Belfast Trust is about people and for people and so it is through the building of a compassionate culture, where colleagues are valued, that we will be able to create the conditions for the safest, most effective and most compassionate care. We have a programme of work in place to proactively support and promote healthy productive teams.

In our patient feedback over the last 6 months, a total of 3,316 people responded, 98.46% of whom would be likely or extremely likely to recommend Belfast Trust to their friends and family if they needed similar care or treatment.

THE PURPOSE OF THE BHSCT CORPORATE PLAN

This two year BHSCT Corporate Plan allows us to remain agile in the planning and delivery of our services as we respond to the changing needs of our patients and service users, and whilst we start to engage with you on the development of our next Corporate Plan 2023-2028.

OUR VISION AND VALUES

The vision for Belfast Trust is to be the safest, most effective and compassionate organisation.









HSC Values

The following reflects some examples of our activity in an average week in 2019. Activity subsequently reduced due to the Covid-19 pandemic and it is clear that activity levels will vary dependent on further surges of Covid-19. On average each week we see:



ED Attendances 3,707 (530 daily)



Non-Elective Admissions 1,097



Day Cases 1,232



Red Flag Referrals 407





10.817



Acute Care at Home Direct Activity (Face-to-face/ Virtual) 279



Domiciliary Care Hours provided 41,338



District nursing visits 4,763



Health visiting visits 1,398



Allied Health Professionals activity 10,356



Regional Social Work Out of Hours Referrals 341



Births 97



GP Out of Hours interactions including home, base and telephone calls

2,117 (2019/20 financial year)



Total number of Looked after Children 824 (as of 31 March 2019)

OUR PRIORITIES FOR 2021-23







Urgent and emergency care



Outpatient modernisation





To ensure we provide the Right Care at the Right Time and in the Right Place we will be measuring and reporting on our achievements and progress against a number of key metrics:













PRIORITY:

A new model of care for older people

MAHI - STM - 088 - 1528

We are committed to ensuring the specific needs of older people are considered in everything we do. We are focusing on:

- Supporting older people to live at home for as long as possible. Our District Nursing teams are reviewing how they can best support older people in the community
- Increasing our Hospital at Home team to provide more acute care at home, working closely with GPs to address the specific needs of older people within the comfort of their own environment
- Working with our Care Homes and GP leads to avoid unnecessary hospital admission for residents by reducing falls, addressing infections and swallowing difficulties
- Securing maximum independence for people as they come out of hospital with the right range of bed-based and home-based re-ablement and rehabilitation services.



PRIORITY: Urgent and Emergency Care

MAHI - STM - 088 - 1529

We are committed to providing timely urgent and emergency care for patients. We are focusing on:

- Working closely with our GP partners to offer a range of alternatives to attendance at the Emergency Department including our Urgent Care Centre, Clinical Assessment Unit, Rapid Access Assessment and Treatment Clinics, as well as the GP Out-of-Hours service
- Improving patient flow and discharge pathways across the system to address 4 and 12 hour waits.
 This includes our focus on Home for Lunch and nurse led discharge as well as assessing support needs in the patient's own home
- Delivering timely safe discharge for patients, with discharge-to-assess and by having specific pathways for patients recovering from fracture surgery and patients with dementia or delirium
- Partnership work with the Northern Ireland
 Ambulance Service to continue to improve timely patient handover.



PRIORITY:
Time-critical
Surgery

We recognise the impact of Covid on those who are waiting for surgery. We are focusing on:

- Ensuring those people waiting for urgent cancer and time critical surgery are able to receive their treatment
- Working as part of a wider health and social care system to ensure those most in need receive their surgery first
- Maximising the use of regional facilities to continue to increase the volume of surgery undertaken, using 'green' Covid pathways, to provide an equitable service
- Remaining flexible and agile in preparation for any future surges, protecting staff and infrastructure for the delivery of elective services as far as possible
- Participating fully in regional plans for elective general surgical services
- Progressing work on The Cancer Recovery Plan to ensure that the delivery of cancer services is resilient to potential future surges of COVID-19 and to the projected increase in cases of cancer.



PRIORITY:
Outpatient
Modernisation

We are committed to modernising our outpatient services to enable patients and service users to receive the right care in the right place at the right time. We are focusing on:

- Delivering a good experience for virtual outpatients with telephone or video consultations
- Offering face-to-face appointments safely when they are required
- Taking action to reduce waiting lists/times for first outpatient appointment
- Reducing times for outpatients waiting for a review appointment
- Delivering improvements in specialities with longer waiting lists.



By offering patients more choice in how we deliver service, for example, via virtual consultation or drive-through phlebotomy, this will reduce the need to attend acute hospitals for blood tests and consultations and improve service user experience.

PRIORITY:
Vulnerable
Groups in our
Population

We are committed to improving and promoting the wellbeing of vulnerable people. We are focusing on:

- Addressing the 30% increase in acute mental health inpatient demand with improved discharge arrangements, including additional step-down beds to support people back into the community
- Increasing the size of the Belfast Community Perinatal team to support mums-to-be and their partners and families as part of the Mental Health Strategy implementation
- Establishing a new clinical team to offer more timely access to intervention and support for children and young people awaiting autism assessment
- Working closely with the patients of Muckamore Abbey Hospital and their families and carers to address the significant safety concerns relating to their care and progress plans to secure new homes for our existing patients
- Developing a range of supported housing facilities in the community, offering choice and independence to people with mental health conditions or a learning disability



- Balancing our existing services to vulnerable children and their families whilst addressing emerging needs post-COVID-19 within the community
- Reviewing our short breaks services to best meet the needs of our service users with a learning disability & their families
- Consolidating Adult Safeguarding structures and processes to protect the most vulnerable people in our facilities and in the community.

PRIORITY:

Seeking realtime feedback from staff and patients MAHI - STM - 088 - 1533

We are committed to listening to you and changing the way we work for the better. Some examples of what we are doing are:

- Continuing to gather real-time Patient Feedback from in-patients in the Trust to understand how their experience is in our care. Collecting feedback from service users receiving care in their own home, patients attending an outpatient appointment and patients attending our Emergency Departments
- To date, the feedback received has enabled us to make changes, for example, reducing noise levels at night on wards and helping patients get a better night's sleep, offering alternative menu choices at mealtimes and enabling patients to receive more information about their treatments and medications while in hospital
- Engaging with our staff to ensure that we are doing our best to support Happy, Healthy and Productive Teams
- Recognise where we are doing things well and making the necessary changes to improve where things could be done better. Our priorities are only achievable because of our people and leadership.



PEOPLE AND CULTURE

We are focusing on:

- Building a culture that is safe, effective and compassionate and that facilitates an engaged workforce
- Keeping our staff safe and helping staff realise their best possible state of wellbeing
- Improving our staffing levels
- Continuously communicating and listening to our staff and service users to enable us to make the Belfast Trust the best possible place to work and to receive treatment
- Developing and supporting leaders so that they can lead staff collectively and with compassion
- Improving how we recognise and value our staff
- Working collaboratively with staff, partners at all levels to develop and implement locally owned programmes of work and providing visible sponsorship and leadership.



All our work is supported by a focus on...

OUR COMMITMENT TO YOU



Involvement and Partnership Working:

Everything we do is in partnership with our service users, families and carers. We try to co-produce our plans together, alongside our primary care, voluntary, community and independent partners.



Digital delivery:

We support new ways of delivering services, training our teams virtually and extending our use of business intelligence and data analytics to seek improvement in everything we do.



Communication:

Our commitment is to ensure open, transparent and timely communication.



Resources:

We recognise that major sustained investment is required to address patient waiting times for diagnosis and treatment and ensure capacity in the health & social care system.

1536

LOOKING AHEAD

impacted on all our services and the way in which we worked, we will continue to remain agile and flexible in how we plan and deliver our services, responding to the changing needs of our population and the possibility of further COVID-19 surges.

Our next step is to develop a new Corporate Plan for our services in line with DoH guidance and based on wide engagement with our service users, carers, families and all our partners. We will engage widely and publicly consult on our new Corporate Plan and would like to hear your views.

If you have any queries or comments on this BHSCT Corporate Plan 2021-23 or if you need to access it in an alternative format, please contact planning@belfasttrust.hscni.net or telephone 028 9504 8734.

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