Board of Director Meeting (held in Public)
27 July 2023
Operational Business Plan 2023/24

Item 2.2

Presented for:	Approval
Accountable Director:	Peter Reading, Chief Executive
Presented by:	Peter Reading, Chief Executive
Author:	Ian Holdsworth, Senior Planning and Development Manager, Helen Edwards, Associate Director of Communications and Community Engagement
Previous Committees:	Board Development 28 February 2023; TEG 15 March 2023; Board in Private 25 May 2023.
Legal / Regulatory:	No

Key Priorities/Goals	Be a respected and influential system partner, nationally, regionally and at place Embed an ethos of continuous improvement and innovation, that has the voice of patients, communities and our people at its heart Create a safe and high performing organisation based on openess, ownership and accountability

Strategic Ambition	(✓)	BAF Strategic Risk
1. Patients and communities experience fully joined-up care responsive to their needs	✓	Choose an item
2. Our people feel empowered, valued and engaged to perform at their best	✓	Choose an item
3. We achieve excellence in everything we do	✓	3a Capacity and capability to plan and deliver Trust strategy, transformation and change
4. We use resources wisely to invest in and sustain services	✓	Choose an item.

Key points	
This report provides Trust Board with an update on the operational objectives and business plan for 2023/24, a quarter one assessment against the business plan's operational objectives; and	Approval

outlines proposals for improvements to the business planning process to be implemented.	

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Operational Business Plan 2023/24
Report of the Chief Executive

1. Summary

This report provides Trust Board with an update on the operational objectives and business plan for 2023/24. It provides a draft quarter one assessment against the business plan operational objectives contained within the Trust's Annual Plan for 2023/24 and updates and provides assurance on actions taken to improve performance against business outcomes. The report also outlines proposals for improvements for how the business planning process can be subsequently improved.

2. Background

The Trust has agreed an operational business plan for 2023/24, with eighteen operational objectives identified for delivery.

The eighteen operational objectives support the delivery of requirements set by NHSE and Trust priorities for the year and were agreed in principle by Trust Board on 25 May 2023. These correlate with the strategic priorities and ambitions of the Trust, in order to establish a 'golden thread' of governance and accountability.

The operational objectives are each supported by a plan, which sets out clear deliverable actions/focus work, metrics, and key milestones, in order to support delivery. These plans provide a 'plan on a page' or 'mandate' to support each objective. These were agreed in principle, with some further work to allow consultation, engagement and review of all activity through Board sub-committees and with executive leads.

The eighteen operational objectives are:
1. Develop and approve five-year strategy for the organisation.
2. Deliver improvements in Category 2 response times in line with national guidance.
3. Develop and fully utilise alternative pathways and specialist response to improve access for patients and avoid conveyances to A&E.
4. Develop an integrated clinical assessment service across EOC and IUC to support contact centre integration to ensure patient calls are responded to effectively and efficiently.
5. Implement the national patient safety incident response framework and other patient safety measures.
6. Deliver and embed the year 1 priorities for 'YAS Together' building upon the outcome of the culture change programme, supported by Moorhouse.
7. Deliver and implement an effective organisational operating model.
8. Implement a robust performance management framework.
9. Review, develop and embed our approach to quality improvement and create an academic research unit.
10. Deliver recruitment and retention plans across 999, 111 and PTS.
11. Improve staff health and wellbeing with a focus on inclusion and the provision of flexible and supported employment.

12. Respond to priorities within the staff survey and focus on improved response rates.
13. Develop and implement a new leadership development programme.
14. Understand and utilise data and intelligence to improve patient care and population health.
15. Complete the development of a long-term estates plan and open new facilities for logistics and EOC.
16. Increase the number and diversity of volunteering opportunities and develop supporting infrastructure to improve patient care.
17. Develop and embed our approach to system working.
18. Embed rigorous financial oversight to ensure efficient use of resources.

3. Progress monitoring

Progress against the operational objectives is being monitored by the Planning and Development team. Updates are gathered quarterly, using a monitoring assessment, and measured based on the performance against relevant metrics and milestones that will be set out in the 'plan on a page'.

Monitoring and assurance will be provided against the operational objectives to Board assurance committees, presented by the Executive Lead:
- Trust Board (objective 1 and 17)
- Finance and Performance (objectives 2, 8, 14, 15, and 18)
- Quality (objectives 3, 4, 5, 9)
- People (objectives 6, 7, 10, 11,12,13, 16)

Monthly updates are scheduled for TEG, to ensure they are able to:
- Review progress
- Identify and escalate any issues
- Agree any mitigating actions
- Identify items for escalation at relevant assurance Committees

This includes a performance rating in line with the Trust's RAG rating process and provide summary updates, issues, financial implications, and next steps.

For quarter one, updates were obtained for all the eighteen Operational Objectives. There were no operational objectives rated as red, eight objectives were rated as amber; and ten objectives were rated as green.

Performance Rating	Quarter One (2023/24)
Green: On Track	10
Amber: Minor Issues – Under Control	8
Red: Material Issues	0
Paused / Stopped	0
System Delay	0
Complete	0

The following information presents the progress of the operational objectives.

Operational Objective	RAG	Summary Update	Issues/ Risk	Financial Implications	Next Steps
1.Develop and approve five-year strategy for the organisation.	🟩	There are structures and processes underway to ensure delivery of organisation strategy.	N/A	None	Progress Phase One of Project Plan.
2.Deliver improvements in category 2 response times in line with national guidance.	🟩	Workstreams all progressing well.	No escalations required. Currently establishing a risk register for all the workstreams.	None	Continue to develop workstreams.
3.Develop and fully utilise alternative pathways and specialist response to improve access for patients and avoid conveyances to A&E.	🟩	Progressing well. There has been region wide frontline access to UCRs except for Harrogate, which is imminent.	No escalations required.	None	Continue to develop workstreams.
4.Develop an integrated clinical assessment service across EOC and IUC to support contact centre integration to ensure patient calls are responded to effectively and efficiently.	🟧	Project plans are still in development. However, EOC colleagues are rolling out remote clinical triage in the North and East regions, to be followed by implementation in the South and West.	The biggest challenge rolling out an Adastra based model relates to the availability of suitable trainers to run courses, for staff members. Some capacity has been identified amongst the IUC PD team and there also some places available on the Pathways PACCS courses running in the summer.	None	Further clarity around the roll out of the project and work towards achieving the joint CAS will be provided over the next 2-3 months as plans develop.
5.Implement the national patient safety incident response framework and other patient safety measures.	🟩	Most workstreams are green in this remit. There are mixed strategies that underpin this operational objective.	**Non-medical prescriber strategy:** Concerns by current prescribers that they are not retaining competency. However, the use of medicines reviews and case studies will allow them to utilise their prescribing skills and knowledge, including the identification of patient need and audit.	**Maternity improvement plan**: Funding and abstraction of clinical educators to attend training.	Progress towards next milestones.

Operational Objective	RAG	Summary Update	Issues/ Risk	Financial Implications	Next Steps
6.Deliver and embed the year 1 priorities for 'YAS Together' building upon the outcome of the culture change programme supported by Moorhouse.		The scoping of the 'YAS Way' is complete and underpinned by the large-scale staff engagement exercise and plans for a soft launch of YAS Together have been agreed.	Capacity corporately and in pilot departments to support delivery owing to other conflicting priorities is a risk. There is a need to ensure clear alignment of 'the 'YAS Together' interventions and other elements of the overarching OD/Operating Model programme.	Nothing new to raise.	Capacity issue are being mitigated by enhancing and prioritising resources available in the ODL team and adoption of soft launch and spread of the burden of pilot work across several departments.
7.Deliver and implement an effective organisational operating model.		Phase 2 consultation is completed. A second workshop has been organised for Phase 1 and work on the accountability framework is underway.	Lack of dedicated HR may delay implementation or affect the quality of the implementation support and engagement with affected staff. Lack of job evaluation capacity may impact on sign off from JD in future phases resulting in delays to consultation launch dates. The process continues at present challenges, but a desktop process agreed with trade unions is now in place to support faster resolution of issues.	No new implications have arisen in relation to the project plans in the last quarter. Financial implications of the directorate portfolio developments are being managed via the development, Board sign off and consultation process.	Dedicated support has been recruited but is not yet in place. In the meantime, support is being provided from a number of individuals within the existing team.
8.Implement a robust performance management framework.		This is progressing well, with initial engagement on a performance assurance framework is underway with the proposal coming to TEG in June.	Development work for PM Framework has started, with 4 workstreams. Performance Framework concept presented at TEG, further work to develop each workstream underway. 1 Accountability and Assurance Structures: governance and management arrangements; lines of accountability; information flows. 2 Performance Information: metrics	None	Finalise plan on a page.

Operational Objective	RAG	Summary Update	Issues/ Risk	Financial Implications	Next Steps
			and indicators; balanced scorecard and the Integrated Performance Report; dashboards for organisational tiers and segments: service, team, area, and individuals 3 Performance Assurance Processes: reporting, escalation, intervention. 4 Capacity Building: training, guidance, and support regarding analysis and interpretation of performance data and its application		
9.Review, develop and embed our approach to quality improvement and create an academic research unit.		Update only collected in regard ARU. Plan on a page is in development.	Nothing to raise.	None	Finalise plan on a page.
10.Deliver recruitment and retention plans across 999, 111 and PTS.		A&E and EOC are green. 111 and PTS are amber.	**111:** Current corporate risks around Clinical Advisor and Health Advisor staffing numbers. Mitigation includes the IUC Case for Change and other elements of the improvement plan e.g., phasing up home/hybrid working and International Nurse Recruitment (15 offers made and the first 4 have arrived). **PTS:** If attrition continues to run at the current rate, additional recruitment options will need to be explored. This is conditional of recruitment being able to provide the resource to onboard any FTE in addition to the current plan.	**111:** There are potential finance/performance implications associated with the IUC Case for Change. It is proposed that these will be offset through a plan to increase productivity. These are being worked through with the Finance Team and by utilising ORH support to validate the work and assumptions. **PTS:** If attrition continues at the current rate and additional FTE is not recruited, this demand will need to be addressed using flexible (private resource), which reduces the flexible	For **111** the financial plan will be signed off. **PTS** will closely monitor attrition.

Operational Objective	RAG	Summary Update	Issues/ Risk	Financial Implications	Next Steps
				resource percentage.	
11.Improve staff health and wellbeing with a focus on inclusion and the provision of flexible and supported employment.		The RAG rating reflects the current development work to finalise the actions, metrics and key milestones.	Non-delivery of EDI plan. Team capacity and operational pressures has meant that not all actions have been progressed and are unlikely to be completed by the end of the plan. These can be rolled over to next year if they remain a priority.	None	Agree and finalise the plan on a page.
12.Respond to priorities within the staff survey and focus on improved response rates.		All directorates have received feedback from the NSS 22 and are being supported by a dedicated Leadership and Organisational Development Business Partner.	The NSS 22 34% response rate does not provide a broad enough staff perspective to make effective improvements. However, failure to proactively use the NSS 22 source data to demonstrate listening and acting on the staff feedback, may have a negative impact on future surveys and response rates.	None	Continue plans.
13.Develop and implement a new leadership development programme.		A proposal for a Leadership Development Pathway has been co-created with the Leadership and Organisational Development Team and Moorhouse.	Leadership Development Pathway not fully approved and requires support to develop and implement. The impact of not having this in place is a lack of development opportunities for our leaders, affecting leadership capability and capacity.	None	Continue Leadership development pathway.
14.Understand and utilise data and intelligence to improve patient care and population health.		Plan to agree and develop plan on a page. Digital directorate are working on a number of projects across the Trust.	The delivery status remains at amber, in relation to the Clinical Systems Developments, due to the ongoing test/fix cycles for the YAS data provision to the Yorkshire & Humber Care Record and access to the patient GP record through	None	Agree plan on a page.

Operational Objective	RAG	Summary Update	Issues/ Risk	Financial Implications	Next Steps
			GP Connect. AVP medicines pilot cannot be extended further until the move to the procurement hub takes place and the medicines app have been fully trialled by frontline staff (the packing part of the app is already being used and working as planned).		
15.Complete the development of a long-term estates plan and open new facilities for logistics and EOC.		Draft strategy developed and to be presented to TEG.	Operational pressures may be a risk to gaining stakeholder engagement for the Estate Strategy and its delivery plan. However, the engagement sessions will aim to mitigate this risk. There is a risk that the Logistics Hub will not be completed on time, which would see the Trust without premises, as notice has been given on the current building. The notice period runs to August 2023 and therefore, to mitigate the risk of being without premises, outstanding work has been scheduled from the beginning of June.	The availability of capital funding is a risk to the delivery of the Estate Strategy plan.	Continue plans.
16.Increase the number and variety of volunteering opportunities and develop supporting infrastructure to improve patient care.		The YAS Volunteer framework has been developed.	Without a new volunteer infrastructure, YAS is unable to develop existing and new volunteering activities. There are therefore financial consequences to the business to achieve this operational objective.		Continue plans.
17.Develop and embed our approach to system working.		Structures and governance have been put in place to support initial phase of the integrated partnership working.	N/A	None	Finalise plan on a page.

Operational Objective	RAG	Summary Update	Issues/ Risk	Financial Implications	Next Steps
18.Embed rigorous financial oversight to ensure efficient use of resources.		The operational objective milestones are currently being developed for review. There are further updates on progress required.	N/A	None	Finalise plan on a page.

A final review of the supporting 'mandates' will be required, to reflect final feedback from the Board and proposed changes relating to governance, which will be considered by the Board on 27 July and final versions agreed.

4. Future business planning proposals:

Reflecting on feedback and review of the current approach to business planning, a number of changes to the annual planning framework are being considered. These are to support a more robust, timely and efficient business planning process. The proposed changes include:

a. Develop a submission window (proposed from September to December annually) for the submission, collation, and review of planning priorities and investment proposals (business cases). Executive workshops and Board Strategy sessions to propose and agree organisational priorities from the submissions.

b. Develop a rolling process of planning assumptions through BI dashboard, with draft assumptions provided for end-December (recruitment trajectories, forecast demand), supported by a clearer understanding of place-based priorities (through System Partnership Director model).

c. Reflect National Planning Guidance in an updated plan, following publication early January, and align the proposals to financial planning to ensure affordability of the proposed model.

d. Develop and introduce a new process for development and approval of investment proposals (business cases) consistent with the timetable outlined in (a) and (b) above. Only in exceptional circumstances would investment proposals (business cases) be considered outside this timetable.

Suggested benefits of the proposed Business Planning approach include:
- Improved timescales to develop meaningful plan.
- Inclusive approach to gathering planning priorities from across the Trust (not just from Senior Leadership teams).
- Avoids becoming a box-ticking exercise for annual submissions.
- Improved alignment with financial planning, by providing clear plans early in process to support financial modelling.
- Builds a robust plan, reducing in-year changes or new priorities by taking a more holistic planning approach.
- Reduces the likelihood of overstretched operational plans, by focusing resources on deliverable and achievable objectives.

- Streamlines and decentralises the development of investment proposals (business cases), empowering leaders to develop proposals while ensuring that there is a disciplined and comprehensive approach to their comparative evaluation and approval which is consistent with Trust priorities and resource availability,

In taking this proposed approach, the business planning cycle for 2024/25 will be informed by the Trust's emerging strategy. In developing this new approach to the business planning cycle, a detailed plan will be developed to identify the key milestones and progress to be made to achieve the ambition of organisational priorities identified and agreed by the end of December 2023.

5. Financial Implications

Any financial implications are identified for the relevant operational objective. The key financial implication is relating to the availability of capital funding for the Estates delivery plan.

6. Risk

There are key risks that have been highlighted throughout which need to be addressed as part of the monitoring and review of each objective.

7. Communication and Involvement

The operational objectives are monitored by Board and ~~sub~~ assurance committees and prior to the quarterly monitoring, will be discussed with TEG and senior responsible officers, to ensure completion of the monitoring, via the mandate.

The proposals for the changes to the annual business planning framework will be communicated within the Trust and detailed plan developed to deliver agreed operational objectives in line with the agreed timescale.

8. Equality Analysis

Equality analysis is part of each operational objective and overall Trust business plan.

9. Publication Under Freedom of Information Act

This paper has been made available under the Freedom of Information Act 2000.

10. Next Steps

The plans on a page have been completed in liaison with account officers and teams and formal sign-off has been obtained at Trust Board. Regular updates will be provided to TEG, TMG and Board sub-committees.

The proposed approach to the business planning cycle will be implemented, supported by a plan and engagement across the Trust.

11. Recommendation

It is recommended that Board:
   a) Support the approach to operational objective review and note the changes to the annual business planning framework that are being considered.

12. Supporting Information

Operational Objectives Mandates (1-18)