Evolve to thrive
Business plan 2017-19
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Glossary

AIS | Accessible Information Standard
AWP | Avon and Wiltshire Mental Health Partnership NHS Trust
BAME | Black, Asian and minority ethnic
BNSSG | Bristol, North Somerset and South Gloucestershire
BOSCA | Bristol Outstanding Service and Contribution Awards
CCG | Clinical commissioning group
CCHP | Community Children’s Health Partnership
CDCC | Community Discharge Coordination Centre
CQC | Care Quality Commission
CQUIN | Commissioning for Quality and Innovation scheme
DIA | Discharge to assess
EDS2 | Equality Delivery System
HART | Healthcare Assessment and Review Team
MATS | Musculoskeletal Assessment and Treatment Service
MDT | Multidisciplinary team
MECC | Making Every Contact Count
MSK | Musculoskeletal
NBT | North Bristol NHS Trust
NHSE | NHS England
PAM | Patient Activation Measure
SPA | Single point of access
STP | Sustainability and transformation partnership
UHB | University Hospitals Bristol NHS Foundation Trust
WRES | Workforce Race Equality Standard
Our new approach is built on a recognition that our staff, patients and service users should enjoy the same Bristol Community Health experience, which reflects our core values.

During the year, we will ask ourselves:

- How can we better engage with staff, patients, service users, children and families, so that they feel listened to?
- How can we support our staff and the people we work with to be empowered, have a sense of ownership of their work, their health and their lives, and reach their potential?
- How can we ensure that all our staff feel valued and included and that we reach all our communities?
- What common principles should underpin the Bristol Community Health experience for both our staff and those who use our services?

As a staff-owned social enterprise we have the advantage of being able to ask our staff-owners to help define, develop and implement a new approach. It will re-focus on the people inside and outside our organisation so we can become one team with our community, working towards healthier, better lives for everyone.

Julia Clarke
CEO
Introduction

Evolve to thrive

The main focus of this two-year business plan is on rapid evolution of our organisation to address the challenges which have been building up since we launched out of the NHS in October 2011. Every year for the past five years we have treated more patients and supported more people. Every year our patients and service users have increased in complexity. Every year we have improved the quality of our services, and every year we have delivered more for less and absorbed significant cost pressures.

Looking back we have achieved an amazing amount and this has been rewarded with three contract extensions, two successful major tenders, and a rating of ‘Good’ from the Care Quality Commission (CQC). And we’ve done it by incremental improvements year on year. Our staff are working harder and more efficiently than ever before, but we can only do so much without major investment in IT and organisational development, significant transformation of services and tighter management of the criteria for access to services.

We are calling our two-year transformation programme ‘Evolve’ because in the previous five years we have laid some excellent foundations that we want to build on. We know that the best response to the challenges we face is to engage our staff in finding the solutions. These are not traditional savings, where we continue to deliver the same services more efficiently, but new ways of delivering the most essential elements and best care and support we can within limited resources.

Our children’s service and offender health service have faced competitive tendering processes in the last two years and this has helped stimulate new thinking about how services need to be configured and staffed to provide the best service we can within the money available.

In the next two years the focus will be on delivery and development of these plans. For our adult services we have had to come up with transformational plans to meet the new financial challenge and we will have to reshape and resize our enabling functions (corporate services) to deliver central support services in the most cost effective way.

We started the new financial year with Evolve plans in place to secure our future financial sustainability. Delivery of these plans has to be our top priority, while at the same time maintaining the safety and quality of the services we deliver. This is against a changing and uncertain backdrop. We must also seek to maximise the opportunities and minimise the risks we face as a result of significant system change so as to develop and expand our role in the health and care system.

We will be using this business plan to explain and discuss our priorities with staff and stakeholders and seek their support to achieve our objectives which we believe will benefit staff, patients and service users, and our wider communities, as well as contribute to the sustainability of the NHS in our region.

It is not the strongest of the species that survives, nor the most intelligent that survives. It is the one that is most adaptable to change.”

Attributed to Charles Darwin
This business plan covers the two-year period from April 2017 to March 2019. This is a crucial time for Bristol Community Health and for the NHS generally. The financial pressures on the health and social care systems are well known and are greater now than at any time in recent years due to continuing growth in demand, rising expectations, medical and surgical advances, and societal changes, combined with less investment in public services and pressure to contain or reduce public expenditure.

Community health services are seeing increasing demand coming from a range of sources. This includes primary care, struggling hospitals and reduced support from stretched social care services. We are also seeing more patients who need support at home – whether to manage one or more long-term conditions, to manage frailty, to avoid a hospital admission, or to help them to return home after a hospital stay.

It can often feel like our services and staff are squeezed in the middle, but the truth is that many frontline health professionals feel the same – whether they are GPs, ward staff, health visitors, community nurses or emergency room staff.

Nationally, the sustainability and transformation plans were initiated to implement the principles of the ‘Five Year Forward View’ in 44 local health systems. We are part of the Bristol, North Somerset and South Gloucestershire (BNSSG) system serving almost 1 million people. This sustainability and transformation partnership (STP) is focused on closing the significant quality, performance and financial gaps in our local healthcare system.

To do this, the partners envisage a major shift from hospitals to primary and community care; additional resources for mental health, and containment of demand through a greater emphasis on prevention, early intervention, self-care and community support.

The STP will require significant investment in technology and organisational and workforce development to support efficiency, productivity and new skill mixes. There will be a shift of resources out of hospitals and a new relationship with the voluntary and community sector, and with service users, patients and families.

This represents a massive system change and must be delivered within the financial resources available. Our local health system must meet national performance targets. The three clinical commissioning groups (CCGs) within the STP area have announced they will be merging into a single commissioning organisation and have initiated a financial ‘turnaround’ exercise to ensure the local NHS services can be delivered within available financial resources, eliminating current deficits.

The environment in which we are drawing up our own business plan is uncertain and volatile. While there are many opportunities for our organisation there are also very significant risks.

Our approach in this situation is:

• **Making their day**
  To maintain and continue to enhance standards of patient safety, service user experience and clinical quality

• **Managing our money**
  To ensure the financial resilience and sustainability of the organisation

• **Time to care**
  To maximise our efficiency and productivity so we get the most out of our resources

• **Being the best**
  To look after our staff

These four objectives reflect the four strategic themes we have worked with every year since we began as a social enterprise – but the stakes have never been higher. Our future depends on how well we deliver on our plan in the next two years.

**Our achievements: 2016-17**

We’re proud of the achievements we’ve made as an organisation over the past 12 months. In November 2016, we were inspected by the Care Quality Commission (CQC) and awarded an overall rating of ‘Good’, including several areas of outstanding practice. This continued focus on quality can be seen in more detail in our 2017-18 Quality Account, which is available on our website at briscomhealth.org.uk/about-us/our-publications.

Now over a year into our children’s and offender health contracts, we’ve continued to work closely with our partners to develop the services we offer. We’ve also built a new partnership with six local GP practices as part of the innovative national Primary Care Home initiative, as well as piloting other new models to reduce admissions and length of stay in acute hospitals, and developed our long-term conditions and specialist services to manage more patients closer to home.

Internally, we’ve worked hard to create the company we want to work for – leading to a new workforce development strategy and delivering of the first phase of our IT strategy.

We’ve also seen an increased take up of staff benefits and increased the wellbeing support available to our staff.

You can read more about our achievements in 2016-17 on pages 10-11 of this business plan.

**Looking ahead: 2017-19**

Our priorities for the next two years have a particular focus on patient empowerment and engagement. From a clinical perspective, we’ll be helping patients to become more active in their care through tools like the Patient Activation Measure, the national Making Every Contact Count initiative and our local Healthcare Change Makers programme. Meanwhile, the Integrated Community Clinic, our patient choice priority for 2017-19, brings together treatment and social interaction to create lasting change for patients with lower leg wounds.

We are already working hard to meet our Commissioning for Quality and Innovation (CQUIN) scheme targets, which this period include: protecting ourselves and our patients with the flu vaccine; supporting patients to change risky behaviour around alcohol and tobacco; improving the assessment of wounds; offering more personalised care and support planning; and supporting proactive and safe discharge.

We will continue to work with our communities to address health inequalities through the expansion of the Accessible Information Standard. And we will explore new ways to reinvest in our communities, grow our volunteer programme, and diversify the range of services we offer through the launch of the new Community Navigator service.

All of this work will be underpinned by initiatives across each of our business units – adults’, children’s, offender health and corporate services (enabling functions) – to reduce duplication and make sure we’re using all of our resources efficiently to offer the best possible patient care.

We will also continue to invest in our workforce to ensure the correct mix of skills within teams and make sure all staff feel supported and satisfied in their work.
Our achievements
2016-2017

CQC inspection
We said we would make sure that our services meet the standards we expect for patients and service users, and ensure our staff feel well prepared for a CQC inspection.

We have achieved an overall 'Good' rating from our inspection, including several examples of outstanding practice. You can find out more on our website: briscomhealth.org.uk/about-us/our-high-quality-health-care.

What’s next? We have an action plan in place to address the areas that were found to be requiring improvement during the inspection.

InspireBetter Health
We said we would develop the holistic offender health service described in our bid: urgent and planned healthcare teams integrated with mental health and substance misuse.

We have delivered on our contractual service development and improvement plan, and implemented key innovations such as smoke-free prisons, the patient-held health recovery passport, minor ailments service, service user health improvement groups, and peer mentors.

What’s next? We will build on our strategic partnership with Avon and Wiltshire Mental Health Partnership NHS Trust and Hanham Health to further improve the integration between our services and staff to improve efficiency, provide seamless care and ‘inspire change through health’ in our five prisons.

CCHP service and tender
We said we would ensure the continued delivery of good quality children’s services during our interim contract year, whilst developing a compelling and winning bid for the long-term contract.

We have maintained delivery across all of our children’s services, including delivering the transformation of speech and language therapy services and development of an integrated therapy model. At the same time, we formed a successful partnership bid for the long-term contract, setting out our vision for using our combined skills and resources to offer the best opportunities for children and young people to achieve their goals.

What’s next? We will deliver our vision for children’s services through the transformation programme set out in our business plan.

Adult services
We said we would improve the care experience and outcomes for patients with complex needs and multiple conditions through coordinated care, reducing avoidable hospital admissions and length of hospital stay, and supporting GPs and other partners through care coordination, case management and a multidisciplinary team (MDT) approach.

We have developed a Primary Care Home partnership with six GP practices to develop integrated, multidisciplinary team working and person-centred care models. We have also piloted in-reach and discharge to assess (DIA) models to reduce admissions and length of stay in acute hospitals, and developed our long-term conditions and specialist services to manage more patients closer to their home.

What’s next? We intend to continue our Primary Care Home partnership by piloting primary care practitioners and Integrated Community Clinics. We will deliver our role in system-wide projects such as DIA that will support further reductions in hospital admissions and lengths of stay.

We said we would deliver our CQUIN goals determined by commissioners and our own quality priorities, identified by staff and patients.

We have improved patient safety and experience, including reducing avoidable pressure ulcers and medicine-related incidents. We have also enhanced the quality of patient care through schemes such as our identification and treatment of sepsis, anticipatory prescribing at end of life and implementing SAFER training. We have introduced a range of initiatives to support the physical and mental wellbeing of our staff.

What’s next? We will continue to embed and monitor the changes we’ve made to ensure improvements in care are maintained.

Creating the company we want to work for
We said we would make the improvements and changes that staff have identified they want to see.

We have seen an increased take up of flexible benefits and greater wellbeing support available to our staff. We have also agreed our workforce development strategy, which sets out how we will give staff the right opportunities and training, and delivered the first phase of our IT strategy.

What’s next? We’ll continue to offer excellent benefits and support to all our staff, including children’s services. We will also implement the first phase of our workforce development strategy and deliver the remaining elements of our IT strategy, including mobile working and Emis optimisation.

We said we would work with partners who have different skills and expertise to provide integrated, seamless and holistic care for patients.

We have taken a leading role in the development of our local sustainability and transformation plan and governance. We also implemented a patient leadership programme to develop a group of confident, competent, representative and self-sustaining patient, citizen and community leaders.

What’s next? Over the next 2-5 years, we’ll work with our GP, acute, social care, and community colleagues to develop and implement new care models to support the shift of activity and resource from hospital to community care. We will also support our patient leaders to use their confidence, knowledge, skills and experiences to constructively work as partners for positive change in the health and care system.
Our roadmap to 2019

Making their day
- Multi-agency safeguarding hub (MASH)
- Community clinics
- Making every contact count
- Patient Activation Measure
- Wound care
- Safe discharge
- Long-term care
- Flu vaccine

Managing our money
- Evolve
  - Adult services
  - Transform programme
- Children’s
  - Community Children’s Health Partnership
- Prisons
  - Inspire Better Health
  - Contract sustainability
- New opportunities
- Partnering
- Alternative revenues
- Estates

Time to care
- Enablers’ strategy
- Business units
- Informatics
  - Mobile working
  - New IT supplier
  - Smart phones and apps
- Standardisation
  - 1
  - 2
  - 3
- Emis optimisation

Being the best
- Staff ownership
- Staff wellbeing
- Engagement
- Creating the company we want to work for
- Re-focus on people, values and culture
- Supporting staff with disabilities
- Supporting BAME staff
- Workforce development and skills pledge

Adult services
- Integrated working with social and primary care
- Zonal working in community nursing
- Quality priorities and CQUINS
- Extended SPA
- Seven-day services
- NTP primary care service
- Delivering our Evolve plans

Prison services
- Tackling new psychoactive substances
- Reduce hospital attendances and admissions
- Dementia services
- National screening programmes
- Addressing cost pressures through service redesign, skill mixing, reducing escorts and bedwatch, appropriate prioritisation and prescribing
- Staff training passport
- New roles
- Separation of roles to reduce errors

Children’s services
- Integrated Healthy Child Programme
- Integrated children’s therapies
- Care coordination and MDT approach for complex needs
- Deliver children’s efficiency plans
- Develop traded services

- Integrated multidisciplinary teams
- Generic skills for support workers
- Cross-professional training

Engagement
- Community clinics
- Wound care
- Long-term care
- Flu vaccine

Adult services
- Mobile working
- Service reconfiguration
- Standardisation
- Team moves

Prison services
- Integrated working with Inspire Better Health partners
- Skill mixing and service reconfiguration

Children’s services
- Electronic record
- Mobile working
- Team moves
- Service reconfiguration