



Health and Wellbeing Together Meeting

Wednesday, 12 October 2022

Dear All,

HEALTH AND WELLBEING TOGETHER - WEDNESDAY, 12TH OCTOBER, 2022

I am now able to enclose, for consideration at next Wednesday, 12th October, 2022 meeting of the Health and Wellbeing Together, the following reports that were unavailable when the agenda was printed.

Agenda No	Item
------------------	-------------

12	'Our Strategy' - Invitation for Comment (Pages 3 - 14)
----	---

[To receive an overview from Royal Wolverhampton NHS Trust on the new Strategy.]

If you have any queries about this meeting, please contact the Democratic Services team:

Contact Shelley Humphries

Tel 01902 554070

Email democratic.services@wolverhampton.gov.uk

Address Democratic Services, Civic Centre, 1st floor, St Peter's Square,
Wolverhampton WV1 1SH

Encs

This page is intentionally left blank

Our Strategy

Agenda Item No: 12

2022-2027



Working in partnership

The Royal Wolverhampton NHS Trust
Walsall Healthcare NHS Trust

Page 3



Care Colleagues
Collaboration Communities

Contents

Where we are now	3
Where we want to get to	4
How we will get there	8
What we will do	10
How we will know we have succeeded	18

Page 4



Professor Steve Field CBE
Chair of the Board



Professor David Loughton CBE
Chief Executive

Where we are now

This five-year strategy is our first joint strategy for The Royal Wolverhampton NHS Trust (RWT) and Walsall Healthcare NHS Trust (WHT). It reflects the closer working relationship between the two Trusts under the leadership of a joint Chair and Chief Executive. Uniting us is our shared vision to “To deliver exceptional care together to improve the health and wellbeing of our communities.”

The strategy covers an extraordinary time in the history of the NHS as it continues to be heavily influenced by the COVID-19 pandemic. As well as continuing to meet the changing demands that COVID-19 places on us, we are also committed to recovering our services – specifically the waiting lists for planned care. The challenge in doing so cannot be underestimated. The physical and mental health of our colleagues continues to be challenged as a result of their tireless efforts throughout the pandemic, there is a national shortage of nurses and doctors and, unfortunately, we do not have the funding available to meet all of our aspirations.

Regrettably, we know that the communities of Wolverhampton and Walsall that we primarily serve often have poorer health outcomes than the nation as a whole and are characterised by some of the highest levels of deprivation. Life expectancy is generally lower and many risk factors associated with poor health (e.g. physical inactivity) are higher. Our challenge is the differing needs that come from the diversity of these communities and the health inequalities that exist. Understanding and implementing plans to address these inequalities remains a key area of focus for us.

Our response to the pandemic has demonstrated to us all the benefits of working together and these opportunities are reflected heavily within this strategy. The new Health and Care Act (2022) set out key changes to reform the delivery and organisation of health services in England. At its heart is the ambition to not only provide healthcare, but to work together with others to improve the health and wellbeing of our communities. As well as working more closely together, our Trusts are also strengthening relationships with other healthcare providers within the Black Country at a PLACE based level.

We have a lot to be proud of and to be excited by. As integrated providers of acute, community and primary care services we have the opportunity to effect change across the entire patient journey. Our hospitals provide a wide range of varied and specialised services that make us attractive to new staff and we have a history of innovation that ranges from the introduction of a Clinical Fellowship Programme to the construction of a solar farm.

At the same time, we aspire to improve further. The pandemic has resulted in increased waiting times and our capacity to reduce these is constrained. We are also seeing a significant increase in patients who need unplanned treatment which, combined with insufficient social care capacity, is causing pressure on the flow through our hospitals.

The following pages outline our strategy for the next five years and how we will realise our strategic ambitions.



Where we want to get to

Strategic Framework

Our strategic framework encompasses the key components of our strategy and the relationship between these are reflected within the diagram below.



Page 5

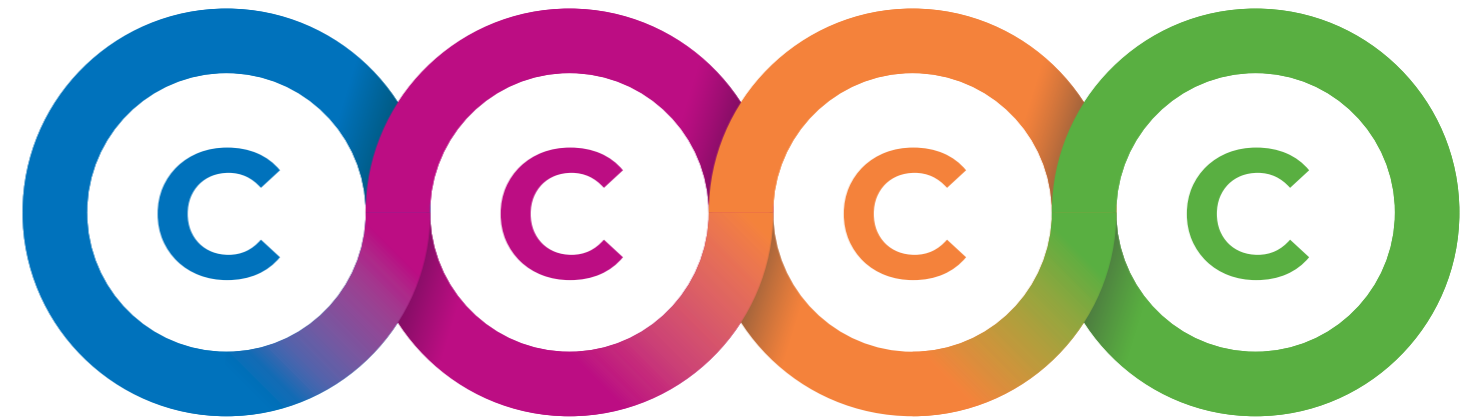
Vision

Our vision is to 'To deliver exceptional care together to improve the health and wellbeing of our communities'. Our vision has been updated to reflect the closer working of our organisations and to focus on our core purpose of improving the health and wellbeing of our communities.

A vision is more than a few words – it reflects our aspirations, helps to guide our planning, support our decision making, prioritise our resources and attract new colleagues.

Strategic Aims and Objectives

Our strategy is based around four strategic aims - referred to as the Four Cs.



Care	Excel in the delivery of Care	
Colleagues	Support our Colleagues	
Collaboration	Effective Collaboration	
Communities	Improve the health and wellbeing of our Communities	

Our strategic aims reflect our four key areas of focus and consider the key influences from the environment within which we operate.

Our aims incorporate feedback from colleagues working for both organisations as well as the public and external stakeholders, e.g. the Integrated Care Board and other providers.

Our strategic aims are underpinned by strategic objectives (detailed later in the document) – these are more specific measures which we use to judge our achievement.

Values

Our values reflect the culture we want to create and inform the behaviours we wish to demonstrate. The two Trusts have their own set of values (shown in the two images below), which were developed and co-produced with our colleagues. Over time we expect to move to a common set of values that covers both Trusts.

WHT Values



RWT Values

Our Values

Safe and Effective
We will work collaboratively to prioritise the safety of all within our care environment.

Kind and Caring
We will act in the best interest of others at all times.

Exceeding Expectation
We will grow a reputation for excellence as our norm.



This is an artist's impression of the new £40m Urgent and Emergency Care Centre at Walsall Manor Hospital, being delivered by Tilbury Douglas Construction Limited. The new building will house an Urgent Treatment Centre, Emergency Department for adults and separate Children's ED, co-located Paediatric Assessment Unit, and an Acute Medical Unit with 45 beds. It also makes provision for Frailty and Community Integrated Assessment services. #BuildingOurFuture

How we will get there

Strategic aims and objectives

Our strategic aims and objectives are the means to achieving our vision. We have refreshed these to ensure they remain relevant and fit for purpose. In doing so, we have moved to a single set of strategic aims and objectives across the two Trusts. They comprise a tiered approach with high level, long-term aims that are underpinned by more specific objectives.

Given the breadth of work, detailed delivery plans are used within the organisations to assess the performance and ensure we are delivering our aims and objectives.

Our strategic aims revolve around four Cs: **Care**, **Colleagues**, **Collaboration** and **Communities**. We see these as being the key areas of focus for us over the next five years in the achievement of our vision. These areas have been prioritised following an analysis of the environment with which we are operating in and after discussion with internal and external stakeholders.

The four Cs are interconnected; we must make improvements in all areas if we are to deliver our vision. The graphic to the right outlines our strategic aims and their supporting objectives.

Excel in the delivery of Care

We will deliver exceptional care by putting patients at the heart of everything we do, embedding a culture of learning and continuous improvement.

- We will embed a culture of learning and continuous improvement at all levels of the organisation
- We will prioritise the treatment of cancer patients, focused on improving the outcomes of those diagnosed with the disease
- We will deliver safe and responsive urgent and emergency care in the community and in hospital
- We will deliver the priorities within the National Elective Care Strategy
- We will deliver financial sustainability by focusing investment on the areas that will have the biggest impact on our communities and populations

Support our Colleagues

We will be inclusive employers of choice in the Black Country that attract, engage and retain the best colleagues reflecting the diversity of our populations.

- Be in the top quartile for vacancy levels across the organisations, recruiting and retaining staff
- Deliver year on year improvements in the percentage of staff who consider the organisation has taken positive action on their health and wellbeing
- Improve overall staff engagement, addressing identified areas for improvement where groups are less well engaged
- Deliver year on year improvement in Workforce Equality Standard performance



Improve the health of our Communities

We will positively contribute to the health and wellbeing of the communities we serve.

- Develop a strategy to understand and deliver action on health inequalities
- Achieve an agreed, Trust-specific, reduction in the carbon footprint of clinical services by 1st April 2025
- Work together with PLACE based partners to deliver improvements to the health of our immediate communities

Effective Collaboration

We will provide sustainable healthcare services that maximise efficiency by effective collaboration with our partners.

- Work as part of the provider collaborative to improve population health outcomes
- Improve clinical service sustainability by implementing new models of care through the provider collaborative
- Implement technological solutions that improve a patient's experience by preventing admission or reducing time in hospital
- Progress joint working across Wolverhampton and Walsall that leads to a demonstrable improvement in service outcomes
- Facilitate research that establishes new knowledge and improves the quality of care of patients



What we will do

Excel in the delivery of Care

The primary purpose of both Trusts is to provide a high-quality service, free at the point of delivery and available to everyone who needs it. The delivery of high-quality care is the foundation of everything that we do and is what defines us. It is also a moving target as we strive to continuously improve. Our Quality and Safety Enabling Strategy provides further detail on our journey towards providing exceptional, safe and clinically effective care. To meet this ambition, we have identified the following specific objectives:

1. We will embed a culture of learning and continuous improvement at all levels of the organisations.

Utilising the Trusts' Quality Improvement teams, we will embed a culture that is focused on learning and striving for continuous improvement, involving patients in this process. We will support our colleagues by equipping them with the tools to systematically learn, measure and monitor quality at all levels of the organisations.

2. We will prioritise the treatment of cancer patients, focused on improving the outcomes of those diagnosed with the disease.

One of the highest clinical priority groups of patients are those on a cancer pathway. We will continue to prioritise the treatment of cancer patients at a time when the number of patients seen following an urgent suspected cancer referral is at a record high. Working together with other providers in the healthcare system, our ambition is to diagnose more people with cancer at an earlier stage given the positive impact this has on a patient's outcome.

3. We will deliver the priorities within the National Elective Care Strategy.

The pandemic has had a significant impact on the delivery of planned (elective) care and, as a result, on the lives of many patients who are waiting for treatment. Over the next three years, we will work to address the backlogs that have grown during the pandemic and are expected to grow further before reducing. This will focus on treating patients in order of clinical priority, increasing activity, and transforming services.

4. We will deliver safe and responsive urgent and emergency care in the community and in our hospitals.

At the same time as treating patients on planned pathways, we will ensure patients receive safe and timely unplanned care. At a time of significant pressures on unplanned care, we will strive to reduce long waiting times and work with our partnering organisations to improve the flow of patients throughout our hospitals.

5. We will deliver financial sustainability by focusing investment on the areas that will have the biggest impact on our communities and populations.

Finally, appropriate financial investment can support the achievement of exceptional care. We must be realistic on the financial resources available to the NHS and the need to be efficient. Ultimately, we need to ensure we are financially sustainable and will achieve this by focusing our investment on the areas that have the biggest impact on our communities and populations.

Page 8

Kerry finds her voice

A healthcare worker who was paralysed and left unable to speak says she owes her recovery to the specialist care she received at New Cross Hospital.

Kerry Williams was admitted in February this year. After an MRI and blood tests, doctors diagnosed Guillain-Barré syndrome which is a rare and serious nerve condition.

Kerry, 52, deteriorated rapidly and was admitted onto the Intensive Care Unit (ICCU). She then required a period of support from a ventilator as well as the placement of a tracheostomy and various other medical interventions.

She spent 76 days in ICCU. When she started to regain strength, she was introduced to the Speech And Language Therapy team, which is based on Critical Care.

Emily Davies-Veric, Advanced Practitioner Speech and Language Therapist - Critical Care and Tracheostomy, said: "When we met Kerry she was unable to use her voice.

"Facial weakness meant that Kerry was unable to mouth words. She was essentially, 'locked in' meaning that movement in her eyes was her communication."

Kerry, an assistant stroke practitioner in the community at The Royal Wolverhampton NHS Trust, said: **"Not being able to talk or communicate was terrifying. I was so grateful to the speech and language team. The staff were first class."**



Treating the whole person

Our Walsall midwives delivered "amazing care" for a mum going through a traumatic birth.

Shauni Sibley, aged 28, had the condition polyhydramnios which is the excessive accumulation of amniotic fluid – the fluid that surrounds the baby in the uterus during pregnancy.

Shauni said maternity services staff were mindful of her mental health - as she suffers from anxiety and depression – as well as her physical health.

She said: "The whole experience was traumatic but the care I received from the doctor and midwife before and after my c-section was amazing. The care I had from the midwives afterwards was brilliant too.

"The level of care I received was extraordinary."



Support our Colleagues

Delivering exceptional care starts with exceptional people. Our People and Organisational Development Enabling Strategy details our plans for supporting our colleagues. We are committed to supporting them to reach their potential and deliver exceptional care. This encompasses our efforts to look after our colleagues, improve the feeling of belonging within the NHS and promote diversity; working differently and growing for the future.

We have outlined our specific objectives to judge our success:

- 1. Be in the top quartile for vacancy levels across the organisations, recruiting and retaining staff.**
The availability of skilled colleagues is arguably the most significant challenge facing the NHS. It is imperative, therefore, that we do all that we can to attract staff to our Trusts and retain them thereafter. We aspire to be in the top quartile of Trusts across the country with the lowest vacancy levels.
- 2. Deliver year on year improvements in the percentage of staff who consider the organisation has taken positive action on their health and wellbeing.**
The focus on colleagues' health and wellbeing is continuing from the height of the pandemic as we recognise the impact this ultimately has on the care we deliver. We will continue to implement actions to improve health and wellbeing from the conversations that take place with our colleagues. As we strive for continuous improvement we expect the NHS Staff Survey to show increasing percentages of staff who consider the organisation has taken positive action.
- 3. Improve overall staff engagement, addressing identified areas for improvement where groups are less well engaged.**
As with health and wellbeing, we recognise the association between the engagement of our colleagues and the care they deliver. We want to create an environment where staff feel empowered and supported to make decisions and deliver change.
- 4. Deliver year on year improvement in Workforce Equality Standard performance.**
It is important that the diversity of the colleagues working within our hospitals reflects the diversity of the communities we serve. The Workforce Equality Standard gives us the ability to review and take action to address inequalities.

Page 9



Boosting our teams with a successful recruitment drive

We have been giving a warm welcome to hundreds of international nurses who have boosted our teams across both Trusts.

More than 1,000 will have been recruited across the Black Country and West Birmingham by the end of this year - the largest ever such recruitment drive in the Midlands.

Organised through The Royal Wolverhampton NHS Trust, the campaign recruited more than 600 nurses from abroad in 2021, to work in locations across the Black Country and West Birmingham Integrated Care System.

The programme was developed to recruit nurses to help fill growing local demands, and it complements intensive efforts being made across the system to train and recruit more nurses locally. The initiative is called the Clinical Fellowship Programme.

Beatrix Feldman, 31, is a Sister at New Cross Hospital in Wolverhampton. She said: *"The first few weeks were a bit of a blur, but the support I had from the management team and other colleagues was amazing and I was made to feel at home straight away."*



Fitting tribute to Leon

A new Clinical Suite for intravenous (IV) interventions has been opened in memory of Team Lead Nurse Leon Talbot, to support patients in Walsall's communities.

Leon was a much-loved and well-respected member of staff at Walsall Healthcare NHS Trust, who died last year following a short illness.

He was instrumental in the drive to establish a treatment room where patients, who would normally have to go into hospital for IV Iron Infusions, could be seen safely and much quicker in the community.

Donna Roberts, Deputy Director of Operations/Community Division for Walsall Healthcare NHS Trust, said: "Leon had been working closely with Dr Shelley Raveendran, Consultant in Acute Medicine, to develop a pathway that would allow this to happen.

"We named this new treatment room 'The Leon Talbot Clinical Suite' in his memory."

The Leon Talbot Clinical Suite is located at Hollybank House.

Rob Elson, Leon's partner, said: *"He would have been so proud for this to happen – he was always talking about ways to keep people out of hospital. It's a lovely, long-lasting legacy."*

The new pathway was developed as part of the work led by the Walsall Together Partnership.



Effective Collaboration

The new Health and Care Act (2022) sets out key changes to the way in which the health and care sector is structured. The key change relates to the way in which organisations work together with a significant emphasis on greater collaboration. It is expected that this collaboration will ultimately lead to an improvement in the care we deliver to our patients by delivering services in a more seamless and impactful fashion.

The new Act dictates three main forms in which Trusts will collaborate:

1. As part of an 'Integrated Care System' (ICS) where a collaboration of hospitals, GPs, social care and others work together to improve local services and make the best use of public money.
2. As part of a 'Provider Collaborative', where providers from across the Black Country will work together to better deliver health services.
3. As part of PLACE teams where town and neighbourhood teams work to improve care within local areas, e.g. Walsall and Wolverhampton.

There are in addition to the closer working that is already taking place between our Trusts.

We have identified five main objectives to measure the success of our collaboration efforts:

1. **Work as part of the provider collaborative to improve population health outcomes.**
Ultimately, our core purpose is to improve the health of our communities. We strive to increase their life expectancy and reduce the inequalities that we know exist. As an integrated healthcare provider, this work involves our primary care practices and community services.
2. **To improve clinical service sustainability by implementing new models of care through the provider collaborative.**
Rising demand, combined with a shortage of skilled colleagues in specific specialities has led to clinical services facing challenges to their sustainability. One of the benefits anticipated from working together is an improvement in service sustainability across the Black Country.
3. **Implement technological solutions that improve patients' experience by preventing admission or reducing time in hospital.**
We know that technology exists that can support a patient to remain in their own home or to make their experience a better one when in hospital. We will focus our efforts on collaborating with providers who are able to support an improvement in our patients' experience and reduce the demand on our hospitals.
4. **Implement further joint working across Wolverhampton and Walsall that leads to a demonstrable improvement in service outcomes.**
Under a shared leadership, we are committed to make the most of the opportunities of working together. We are confident that some of our individual and collective challenges can be better faced together. A programme of work is already in place and is expected to increase further over the life of this strategy.
5. **Facilitate research that establishes new knowledge and improves the quality of care of patients.**
Research and Innovation is a core component of Trusts' activity and is key to making advancements in patient care. Clinical research is an essential requirement to improve knowledge and understanding of which treatments work best.

Teamwork to keep children healthy

With a little help from Wolves mascot Wolfie, Dental Health Specialist Caroline Bestwick is on a mission to get Wolverhampton's children smiling and avoid toddlers having their teeth taken out.

Working alongside the City of Wolverhampton Council and Public Health England, Caroline, from The Royal Wolverhampton NHS Trust, is campaigning for better oral health among children to avoid unnecessary tooth extractions.

She is targeting the 3,700 three-year olds across the city and visiting nurseries to distribute free dental packs, as well as talk to parents, staff and the children to educate them about their teeth.

Wolves Foundation is also involved through its Healthy Goals project, which works with pre-school children and their families to promote healthy growth through education and activity sessions.

"We're keen to support Caroline and the team with this initiative and cascade important messages about oral health to the families we work with in the city," said Jade Sutton, Health Officer from the Wolves Foundation.

Caroline said: "Currently, there are more than 150 children on the Special Care Dental Services waiting list for teeth to be extracted under general anaesthetic because of dental decay, which is preventable.

"So, it's about getting the key messages out to all to further help and educate people to make better, healthier choices from the start, for their oral health."





Improve the health and wellbeing of our Communities

The population we serve extends further than the patients being treated at our hospitals. In fact, the care that healthcare organisations give only accounts for a small element of a population's health outcomes with other factors such as living and working conditions having a greater impact. We will continue to work closely with colleagues from across our local authorities and the voluntary sector in recognition of this. As two of the largest organisations within our communities, we recognise the positive influence we can bring to bear. We can choose to spend our budget and employ locally, which will positively impact our communities and local economy. We also have a responsibility to manage the environmental impact that our organisations have on the living conditions of the area.

The following three objectives will be used to measure our success:

1. Develop a strategy to understand and deliver action on health inequalities.

There are significant health inequalities within our population which have been both illuminated and exacerbated because of the pandemic. Understanding the reasons these inequalities exist is complex, but an area where we have already made progress. We will develop a strategy to fully understand these inequalities as well as identifying tangible actions that address them, alongside our colleagues in local authorities.

2. By 1st April 2025, make a reduction in the carbon footprint of clinical services.

Climate change poses a major threat to our health. Tackling climate change through reducing harmful carbon emissions will improve health and save lives. In response to the health threat posed by climate change, the NHS became the world's first health service to commit to a target of reaching net-zero carbon emissions by 2040. In support of this, both Trusts will make a reduction in their carbon footprint by 2025.

3. Work together with PLACE based partners to deliver improvements to the health of our immediate communities.

By working with our partners within our communities, we will strive to empower people to live a healthy life for as long as possible through joining up health, care and community support for residents and individual communities.



Shaping our services with Community Connectors

Our Walsall Together Partnership has secured £97,000 of funding to develop a team of up to 20 Community Connectors.

They will help reduce health inequalities and improve outcomes for people in Walsall, working with the borough's most vulnerable communities.

This means our health and wellbeing services will be based on what matters most to people and their community.

Michelle McManus, Director of Transformation for Walsall Together, said: "If we really want to reduce inequalities and remove barriers that prevent people from accessing health, care and wellbeing support, then we really need to be working with our most disadvantaged communities to find out how we can do this."

The Community Connectors programme is part of Core20Plus5, a national NHS England approach to support the reduction of health inequalities.

The connectors will be managed by Healthwatch Walsall.



Collaborating for happier communities

Simon Fogell, Chief Executive of Engaging Communities Solutions CIC which delivers Healthwatch Walsall, said: "Recruiting Community Connectors from within communities is a great way of making sure that we are reaching those most in need, often living with long standing health inequalities, linking them to appropriate services, learning more about the challenges they face and how we can work as a partnership to address these."

Proud of our solar farm project



Work began last year on our new solar farm which will help to power the whole of New Cross Hospital.

This means we're the first NHS Trust in England to fully utilise and operate its own facility providing renewable energy.

The site is the size of 22 football pitches and around a ten-minute walk from the main hospital in Wednesfield.

It is estimated our solar farm will power the hospital for three quarters of the year – around 288 days of self-generated renewable energy.

This is in addition to existing green energy sources already in use at the hospital, including harnessing heat from a waste incinerator and a combined heat and power system, with most of the imported electricity coming from the solar farm.

The new solar farm will save the Trust around £15 million-£20 million over the next 20 years – around £1 million a year: money which will be put back into frontline healthcare.

Councillor Steve Evans said: "The start of works on this pioneering solar farm in Wolverhampton demonstrates our commitment to climate change which is critical to protect our planet for generations to come."

"Since declaring our Climate Emergency in July 2019, the council has been supporting its partners towards making Wolverhampton zero carbon. I'm pleased to see the council supporting the local hospital in achieving its ambitions to reduce carbon emissions in the city."

How we will know we have succeeded

Our governance process sets out how we will monitor the delivery of our strategy. Our governance flows from the external mechanisms, such as Care Quality Commission reviews or NHS England's System Oversight Framework, to our internal assurance mechanisms such as our Board, our sub-committees and through to our key programmes.

It will be the role of the sub-committees of our Trust Boards to routinely monitor the achievement of our strategic aims and objectives, reporting into the Trust Boards. On a six-monthly basis, the strategy assurance group will report to the Committee in Common on progress against our strategy.

Strategic Delivery Plans will cover the detail of 'how' strategic objectives are being achieved. These will underpin our strategic aims and objectives and be reported to the sub-committees of the Boards.

The focus of the structure opposite is on the internal governance of the Trusts, reflective of the ownership of 'Our Strategy'. The Trust sits within the Black Country health system which has its own governance structure.



External Assurance

Care Quality Commission (CQC), System Oversight Framework, NHS England

Internal Assurance

Trust Boards

Committees of the Trust Boards

Performance & Finance

Quality & Safety

People & Organisational Development

Research, Digital & Innovation

Committees in Common

Programmes of Work (examples)

Divisional Performance Reviews

PLACE Programme Board

Provider Collaborative Board

Health Inequalities Steering Group

Strategy Assurance Group



This page is intentionally left blank