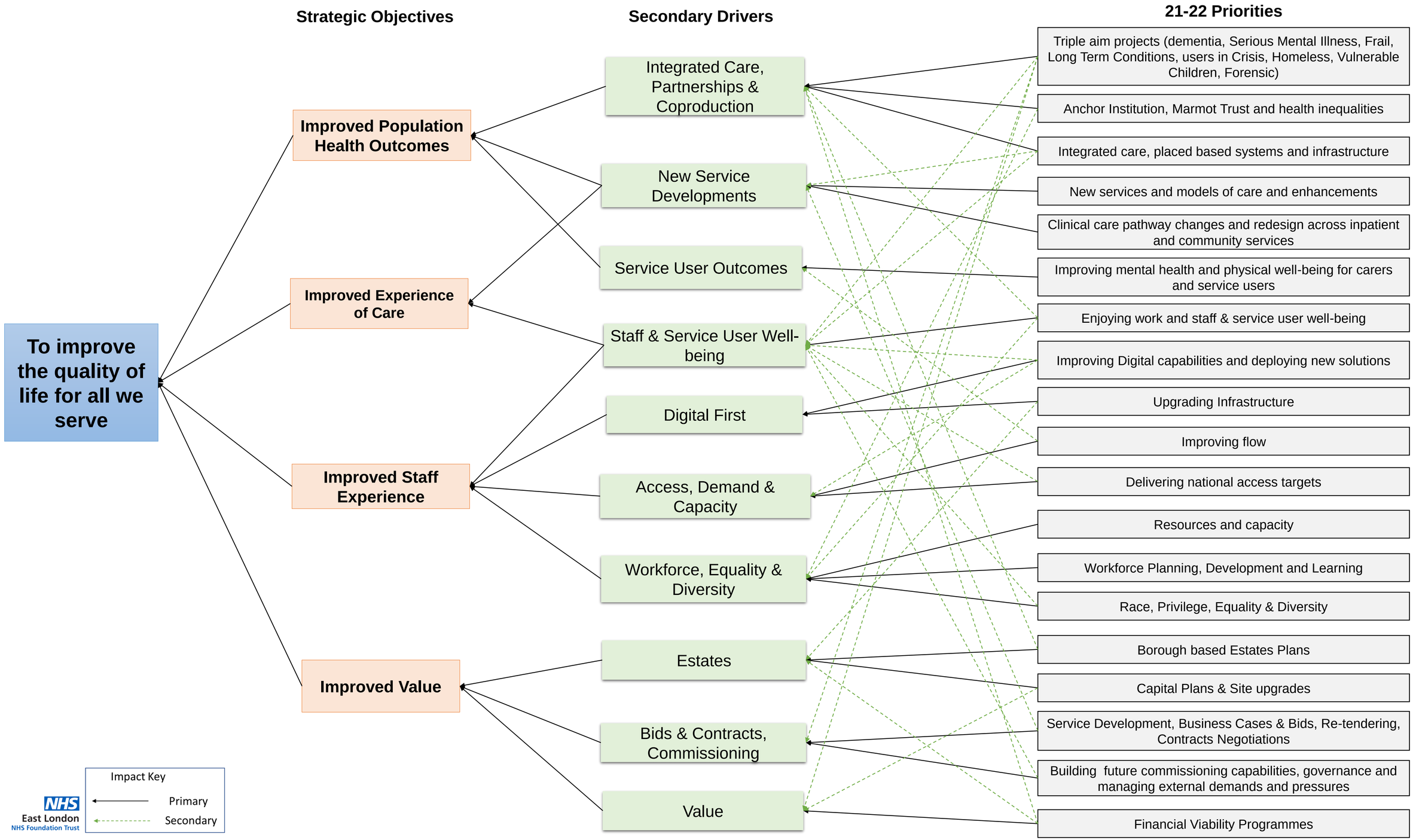
NHS
East London
NHS Foundation Trust

Trust Annual Plan 2021-22


Strategic Objectives
Secondary Drivers
21-22 Priorities
To improve the quality of life for all we serve
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand & Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Triple aim projects (dementia, Serious Mental Illness, Frail, Long Term Conditions, users in Crisis, Homeless, Vulnerable Children, Forensic)
Anchor Institution, Marmot Trust and health inequalities
Integrated care, placed based systems and infrastructure
New services and models of care and enhancements
Clinical care pathway changes and redesign across inpatient and community services
Improving mental health and physical well-being for carers and service users
Enjoying work and staff & service user well-being
Improving Digital capabilities and deploying new solutions
Upgrading Infrastructure
Improving flow
Delivering national access targets
Resources and capacity
Workforce Planning, Development and Learning
Race, Privilege, Equality & Diversity
Borough based Estates Plans
Capital Plans & Site upgrades
Service Development, Business Cases & Bids, Re-tendering, Contracts Negotiations
Building future commissioning capabilities, governance and managing external demands and pressures
Financial Viability Programmes
Impact Key
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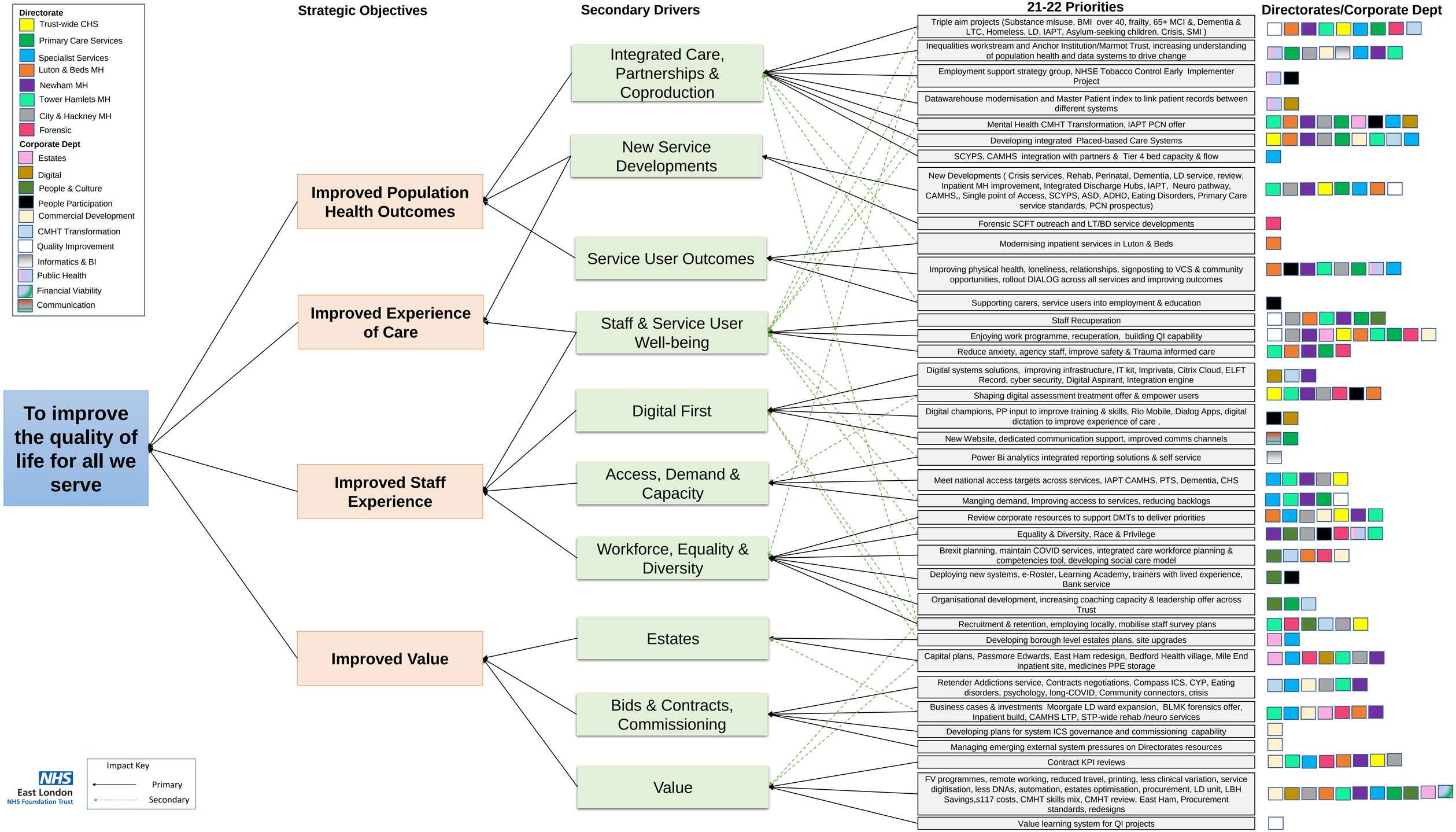
Directorate
Trust-wide CHS
Primary Care Services
Specialist Services
Luton & Beds MH
Newham MH
Tower Hamlets MH
City & Hackney MH
Forensic
Corporate Dept
Estates
Digital
People & Culture
People Participation
Commercial Development
CMHT Transformation
Quality Improvement
Informatics & BI
Public Health
Financial Viability
Communication
Strategic Objectives
Secondary Drivers
21-22 Priorities
Directorates/Corporate Dept
To improve the quality of life for all we serve
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand & Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Triple aim projects (Substance misuse, BMI over 40, frailty, 65+ MCI &, Dementia & LTC, Homeless, LD, IAPT, Asylum-seeking children, Crisis, SMI)
Inequalities workstream and Anchor Institution/Marmot Trust, increasing understanding of population health and data systems to drive change
Employment support strategy group, NHSE Tobacco Control Early Implementer Project
Datawarehouse modernisation and Master Patient index to link patient records between different systems
Mental Health CMHT Transformation, IAPT PCN offer
Developing integrated Placed-based Care Systems
SCYPS, CAMHS integration with partners & Tier 4 bed capacity & flow
New Developments (Crisis services, Rehab, Perinatal, Dementia, LD service, review, Inpatient MH improvement, Integrated Discharge Hubs, IAPT, Neuro pathway, CAMHS,, Single point of Access, SCYPS, ASD, ADHD, Eating Disorders, Primary Care service standards, PCN prospectus)
Forensic SCFT outreach and LT/BD service developments
Modernising inpatient services in Luton & Beds
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services and improving outcomes
Supporting carers, service users into employment & education
Staff Recuperation
Enjoying work programme, recuperation, building QI capability
Reduce anxiety, agency staff, improve safety & Trauma informed care
Digital systems solutions, improving infrastructure, IT kit, Imprivata, Citrix Cloud, ELFT Record, cyber security, Digital Aspirant, Integration engine
Shaping digital assessment treatment offer & empower users
Digital champions, PP input to improve training & skills, Rio Mobile, Dialog Apps, digital dictation to improve experience of care ,
New Website, dedicated communication support, improved comms channels
Power Bi analytics integrated reporting solutions & self service
Meet national access targets across services, IAPT CAMHS, PTS, Dementia, CHS
Manging demand, Improving access to services, reducing backlogs
Review corporate resources to support DMTs to deliver priorities
Equality & Diversity, Race & Privilege
Brexit planning, maintain COVID services, integrated care workforce planning & competencies tool, developing social care model
Deploying new systems, e-Roster, Learning Academy, trainers with lived experience, Bank service
Organisational development, increasing coaching capacity & leadership offer across Trust
Recruitment & retention, employing locally, mobilise staff survey plans
Developing borough level estates plans, site upgrades
Capital plans, Passmore Edwards, East Ham redesign, Bedford Health village, Mile End inpatient site, medicines PPE storage
Retender Addictions service, Contracts negotiations, Compass ICS, CYP, Eating disorders, psychology, long-COVID, Community connectors, crisis
Business cases & investments Moorgate LD ward expansion, BLMK forensics offer, Inpatient build, CAMHS LTP, STP-wide rehab /neuro services
Developing plans for system ICS governance and commissioning capability
Managing emerging external system pressures on Directorates resources
Contract KPI reviews
FV programmes, remote working, reduced travel, printing, less clinical variation, service digitisation, less DNAs, automation, estates optimisation, procurement, LD unit, LBH Savings,s117 costs, CMHT skills mix, CMHT review, East Ham, Procurement standards, redesigns
Value learning system for QI projects
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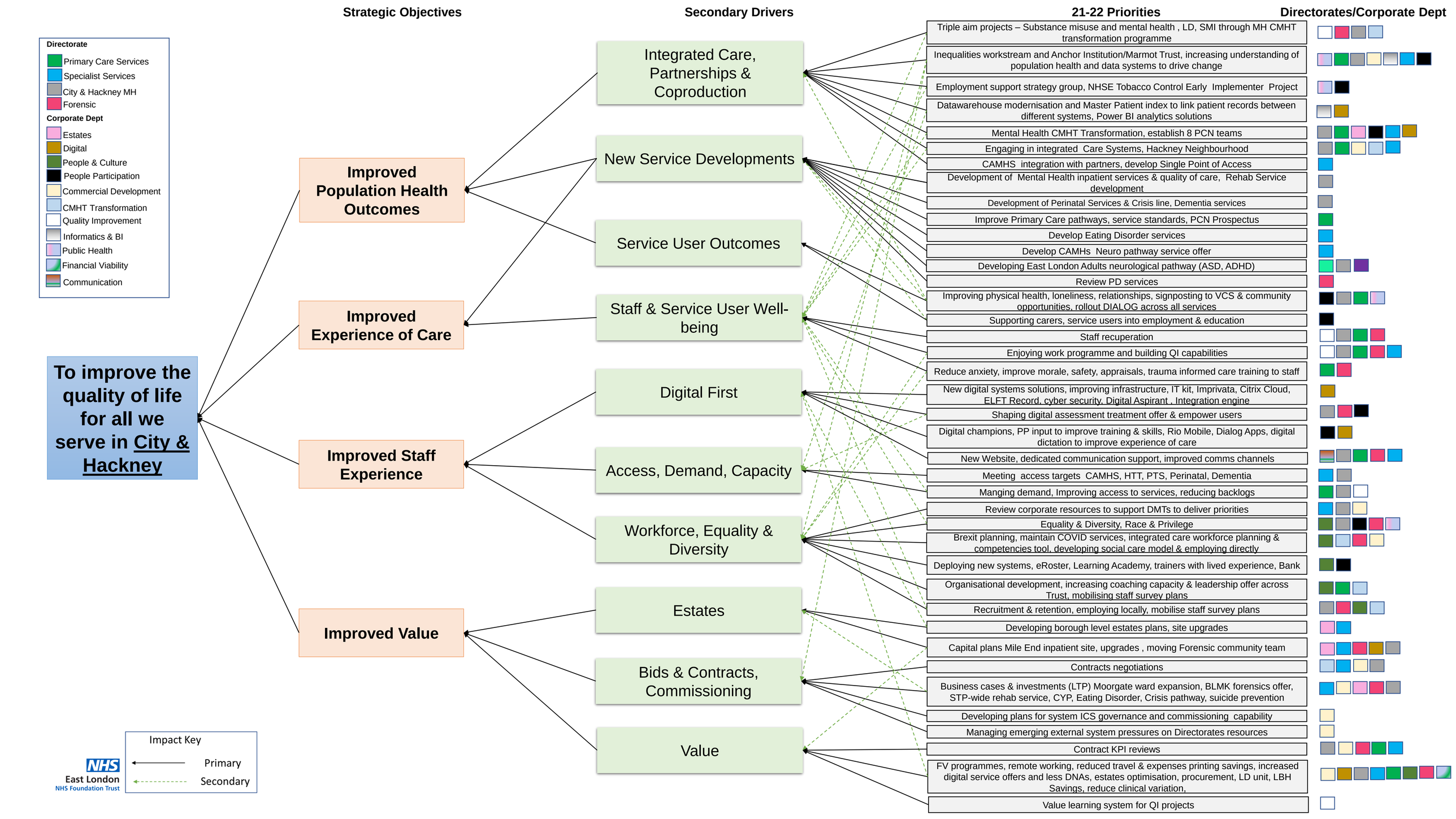
Place Based Plans 2021-22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21-22 Priorities
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Specialist Services
City & Hackney MH
Forensic
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People & Culture
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CMHT Transformation
Quality Improvement
Informatics & BI
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To improve the quality of life for all we serve in City & Hackney
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Triple aim projects – Substance misuse and mental health , LD, SMI through MH CMHT transformation programme
Inequalities workstream and Anchor Institution/Marmot Trust, increasing understanding of population health and data systems to drive change
Employment support strategy group, NHSE Tobacco Control Early Implementer Project
Datawarehouse modernisation and Master Patient index to link patient records between different systems, Power BI analytics solutions
Mental Health CMHT Transformation, establish 8 PCN teams
Engaging in integrated Care Systems, Hackney Neighbourhood
CAMHS integration with partners, develop Single Point of Access
Development of Mental Health inpatient services & quality of care, Rehab Service development
Development of Perinatal Services & Crisis line, Dementia services
Improve Primary Care pathways, service standards, PCN Prospectus
Develop Eating Disorder services
Develop CAMHs Neuro pathway service offer
Developing East London Adults neurological pathway (ASD, ADHD)
Review PD services
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services
Supporting carers, service users into employment & education
Staff recuperation
Enjoying work programme and building QI capabilities
Reduce anxiety, improve morale, safety, appraisals, trauma informed care training to staff
New digital systems solutions, improving infrastructure, IT kit, Imprivata, Citrix Cloud, ELFT Record, cyber security, Digital Aspirant , Integration engine
Shaping digital assessment treatment offer & empower users
Digital champions, PP input to improve training & skills, Rio Mobile, Dialog Apps, digital dictation to improve experience of care
New Website, dedicated communication support, improved comms channels
Meeting access targets CAMHS, HTT, PTS, Perinatal, Dementia
Manging demand, Improving access to services, reducing backlogs
Review corporate resources to support DMTs to deliver priorities
Equality & Diversity, Race & Privilege
Brexit planning, maintain COVID services, integrated care workforce planning & competencies tool, developing social care model & employing directly
Deploying new systems, eRoster, Learning Academy, trainers with lived experience, Bank
Organisational development, increasing coaching capacity & leadership offer across Trust, mobilising staff survey plans
Recruitment & retention, employing locally, mobilise staff survey plans
Developing borough level estates plans, site upgrades
Capital plans Mile End inpatient site, upgrades , moving Forensic community team
Contracts negotiations
Business cases & investments (LTP) Moorgate ward expansion, BLMK forensics offer, STP-wide rehab service, CYP, Eating Disorder, Crisis pathway, suicide prevention
Developing plans for system ICS governance and commissioning capability
Managing emerging external system pressures on Directorates resources
Contract KPI reviews
FV programmes, remote working, reduced travel & expenses printing savings, increased digital service offers and less DNAs, estates optimisation, procurement, LD unit, LBH Savings, reduce clinical variation,
Value learning system for QI projects
Impact Key
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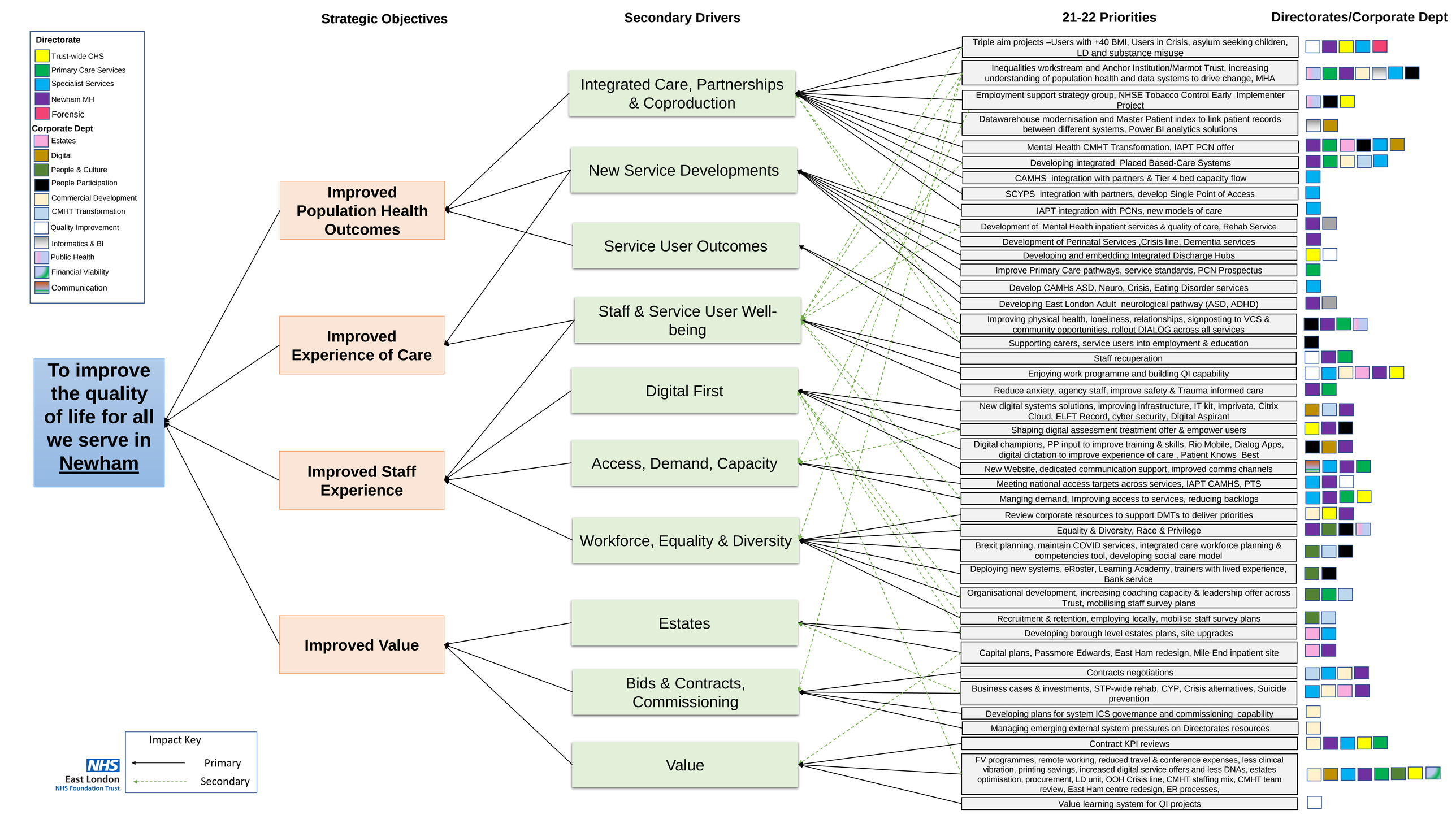
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Secondary Drivers
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Trust-wide CHS
Primary Care Services
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Newham MH
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Commercial Development
CMHT Transformation
Quality Improvement
Informatics & BI
Public Health
Financial Viability
Communication
To improve the quality of life for all we serve in Newham
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Triple aim projects –Users with +40 BMI, Users in Crisis, asylum seeking children, LD and substance misuse
Inequalities workstream and Anchor Institution/Marmot Trust, increasing understanding of population health and data systems to drive change, MHA
Employment support strategy group, NHSE Tobacco Control Early Implementer Project
Datawarehouse modernisation and Master Patient index to link patient records between different systems, Power BI analytics solutions
Mental Health CMHT Transformation, IAPT PCN offer
Developing integrated Placed Based-Care Systems
CAMHS integration with partners & Tier 4 bed capacity flow
SCYPS integration with partners, develop Single Point of Access
IAPT integration with PCNs, new models of care
Development of Mental Health inpatient services & quality of care, Rehab Service
Development of Perinatal Services ,Crisis line, Dementia services
Developing and embedding Integrated Discharge Hubs
Improve Primary Care pathways, service standards, PCN Prospectus
Develop CAMHs ASD, Neuro, Crisis, Eating Disorder services
Developing East London Adult neurological pathway (ASD, ADHD)
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services
Supporting carers, service users into employment & education
Staff recuperation
Enjoying work programme and building QI capability
Reduce anxiety, agency staff, improve safety & Trauma informed care
New digital systems solutions, improving infrastructure, IT kit, Imprivata, Citrix Cloud, ELFT Record, cyber security, Digital Aspirant
Shaping digital assessment treatment offer & empower users
Digital champions, PP input to improve training & skills, Rio Mobile, Dialog Apps, digital dictation to improve experience of care , Patient Knows Best
New Website, dedicated communication support, improved comms channels
Meeting national access targets across services, IAPT CAMHS, PTS
Manging demand, Improving access to services, reducing backlogs
Review corporate resources to support DMTs to deliver priorities
Equality & Diversity, Race & Privilege
Brexit planning, maintain COVID services, integrated care workforce planning & competencies tool, developing social care model
Deploying new systems, eRoster, Learning Academy, trainers with lived experience, Bank service
Organisational development, increasing coaching capacity & leadership offer across Trust, mobilising staff survey plans
Recruitment & retention, employing locally, mobilise staff survey plans
Developing borough level estates plans, site upgrades
Capital plans, Passmore Edwards, East Ham redesign, Mile End inpatient site
Contracts negotiations
Business cases & investments, STP-wide rehab, CYP, Crisis alternatives, Suicide prevention
Developing plans for system ICS governance and commissioning capability
Managing emerging external system pressures on Directorates resources
Contract KPI reviews
FV programmes, remote working, reduced travel & conference expenses, less clinical vibration, printing savings, increased digital service offers and less DNAs, estates optimisation, procurement, LD unit, OOH Crisis line, CMHT staffing mix, CMHT team review, East Ham centre redesign, ER processes,
Value learning system for QI projects
Impact Key
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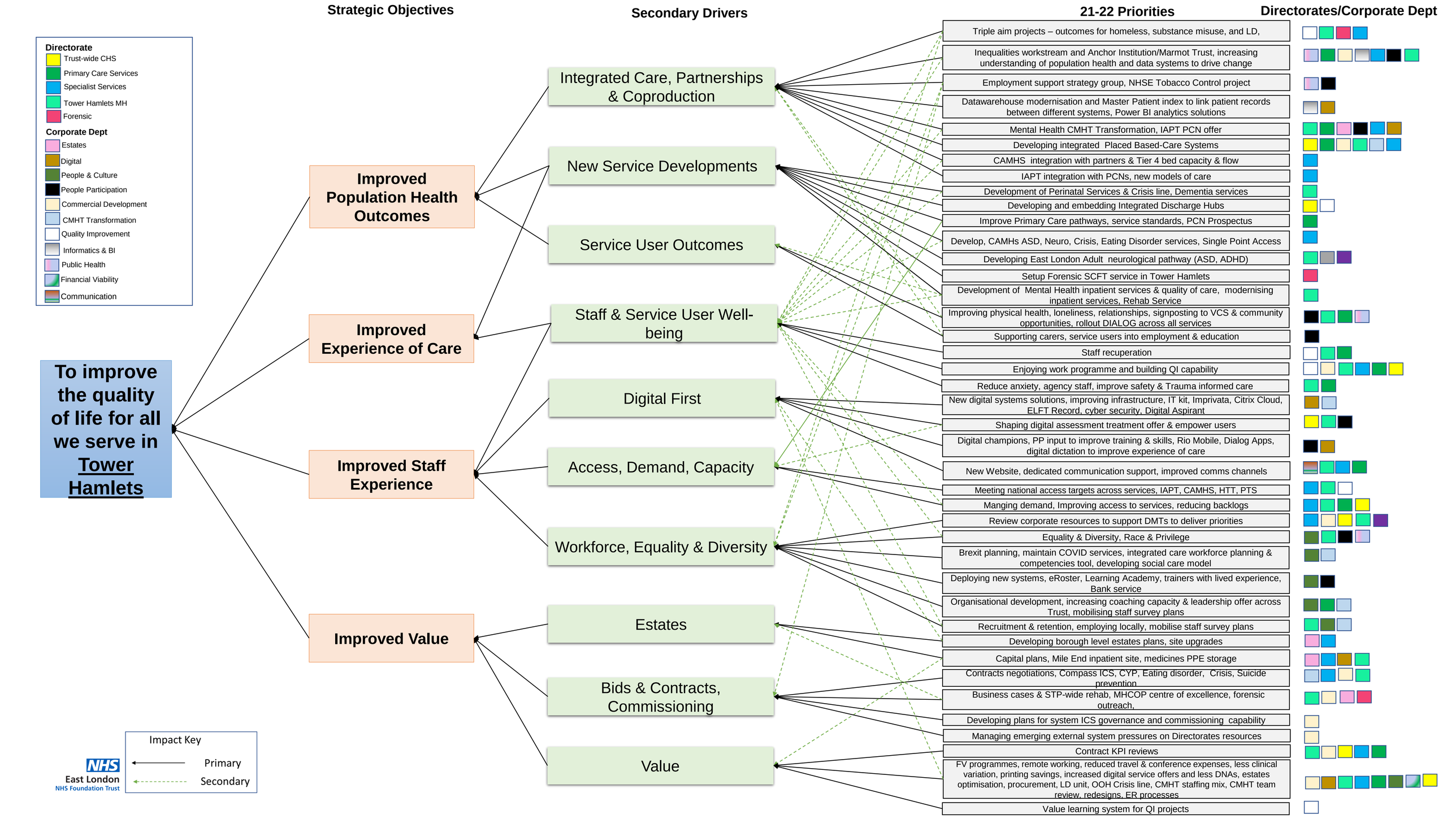
Strategic Objectives
Secondary Drivers
21-22 Priorities
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People Participation
Commercial Development
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Public Health
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To improve the quality of life for all we serve in Tower Hamlets
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Triple aim projects – outcomes for homeless, substance misuse, and LD,
Inequalities workstream and Anchor Institution/Marmot Trust, increasing understanding of population health and data systems to drive change
Employment support strategy group, NHSE Tobacco Control project
Datawarehouse modernisation and Master Patient index to link patient records between different systems, Power BI analytics solutions
Mental Health CMHT Transformation, IAPT PCN offer
Developing integrated Placed Based-Care Systems
CAMHS integration with partners & Tier 4 bed capacity & flow
IAPT integration with PCNs, new models of care
Development of Perinatal Services & Crisis line, Dementia services
Developing and embedding Integrated Discharge Hubs
Improve Primary Care pathways, service standards, PCN Prospectus
Develop, CAMHs ASD, Neuro, Crisis, Eating Disorder services, Single Point Access
Developing East London Adult neurological pathway (ASD, ADHD)
Setup Forensic SCFT service in Tower Hamlets
Development of Mental Health inpatient services & quality of care, modernising inpatient services, Rehab Service
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services
Supporting carers, service users into employment & education
Staff recuperation
Enjoying work programme and building QI capability
Reduce anxiety, agency staff, improve safety & Trauma informed care
New digital systems solutions, improving infrastructure, IT kit, Imprivata, Citrix Cloud, ELFT Record, cyber security, Digital Aspirant
Shaping digital assessment treatment offer & empower users
Digital champions, PP input to improve training & skills, Rio Mobile, Dialog Apps, digital dictation to improve experience of care
New Website, dedicated communication support, improved comms channels
Meeting national access targets across services, IAPT, CAMHS, HTT, PTS
Manging demand, Improving access to services, reducing backlogs
Review corporate resources to support DMTs to deliver priorities
Equality & Diversity, Race & Privilege
Brexit planning, maintain COVID services, integrated care workforce planning & competencies tool, developing social care model
Deploying new systems, eRoster, Learning Academy, trainers with lived experience, Bank service
Organisational development, increasing coaching capacity & leadership offer across Trust, mobilising staff survey plans
Recruitment & retention, employing locally, mobilise staff survey plans
Developing borough level estates plans, site upgrades
Capital plans, Mile End inpatient site, medicines PPE storage
Contracts negotiations, Compass ICS, CYP, Eating disorder, Crisis, Suicide prevention
Business cases & STP-wide rehab, MHCOP centre of excellence, forensic outreach,
Developing plans for system ICS governance and commissioning capability
Managing emerging external system pressures on Directorates resources
Contract KPI reviews
FV programmes, remote working, reduced travel & conference expenses, less clinical variation, printing savings, increased digital service offers and less DNAs, estates optimisation, procurement, LD unit, OOH Crisis line, CMHT staffing mix, CMHT team review, redesigns, ER processes
Value learning system for QI projects
Impact Key
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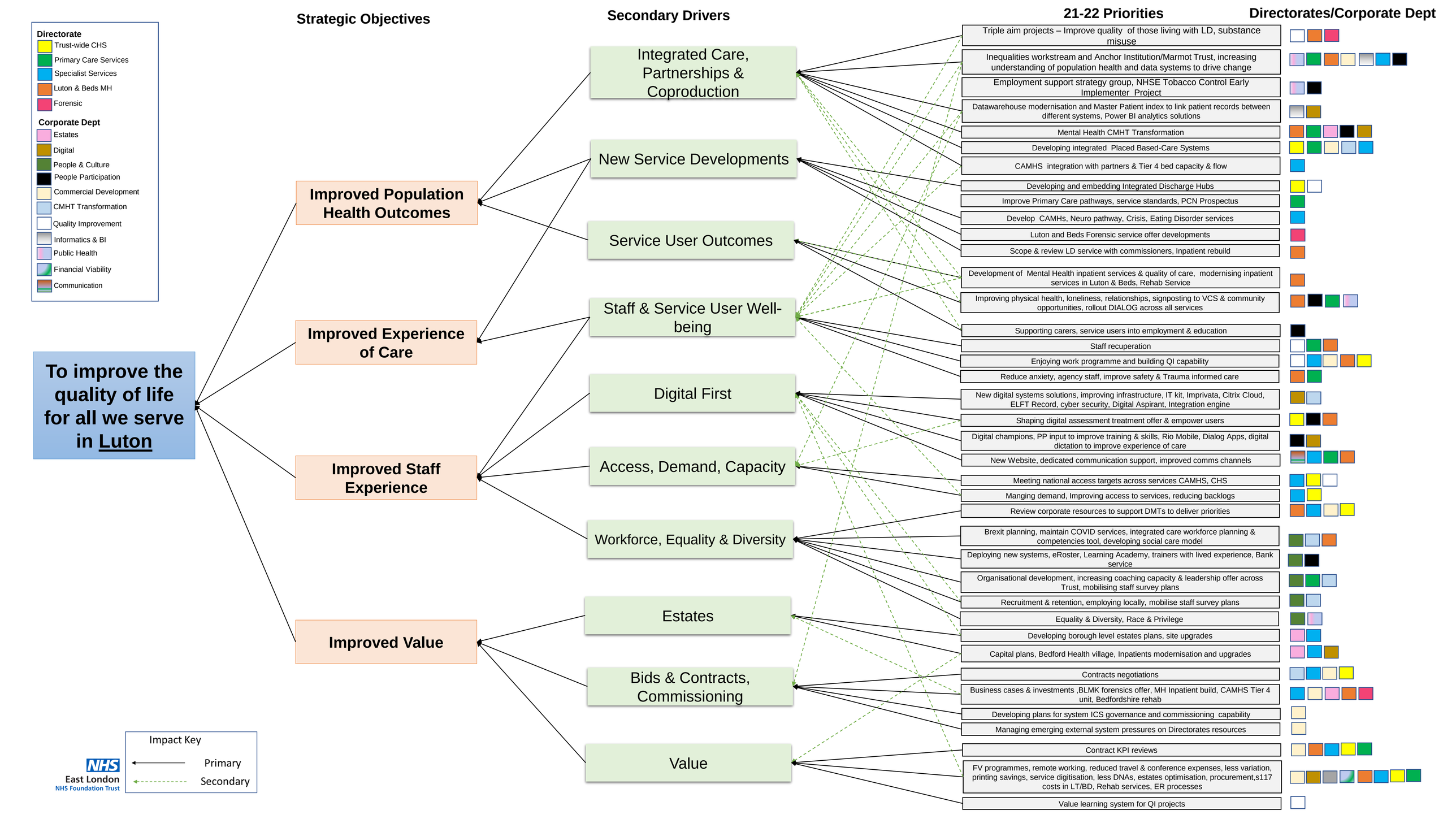
Directorate
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To improve the quality of life for all we serve in Luton
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Improved Experience of Care
Improved Staff Experience
Improved Value
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Bids & Contracts, Commissioning
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Triple aim projects – Improve quality of those living with LD, substance misuse
Inequalities workstream and Anchor Institution/Marmot Trust, increasing understanding of population health and data systems to drive change
Employment support strategy group, NHSE Tobacco Control Early Implementer Project
Datawarehouse modernisation and Master Patient index to link patient records between different systems, Power BI analytics solutions
Mental Health CMHT Transformation
Developing integrated Placed Based-Care Systems
CAMHS integration with partners & Tier 4 bed capacity & flow
Developing and embedding Integrated Discharge Hubs
Improve Primary Care pathways, service standards, PCN Prospectus
Develop CAMHs, Neuro pathway, Crisis, Eating Disorder services
Luton and Beds Forensic service offer developments
Scope & review LD service with commissioners, Inpatient rebuild
Development of Mental Health inpatient services & quality of care, modernising inpatient services in Luton & Beds, Rehab Service
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services
Supporting carers, service users into employment & education
Staff recuperation
Enjoying work programme and building QI capability
Reduce anxiety, agency staff, improve safety & Trauma informed care
New digital systems solutions, improving infrastructure, IT kit, Imprivata, Citrix Cloud, ELFT Record, cyber security, Digital Aspirant, Integration engine
Shaping digital assessment treatment offer & empower users
Digital champions, PP input to improve training & skills, Rio Mobile, Dialog Apps, digital dictation to improve experience of care
New Website, dedicated communication support, improved comms channels
Meeting national access targets across services CAMHS, CHS
Manging demand, Improving access to services, reducing backlogs
Review corporate resources to support DMTs to deliver priorities
Brexit planning, maintain COVID services, integrated care workforce planning & competencies tool, developing social care model
Deploying new systems, eRoster, Learning Academy, trainers with lived experience, Bank service
Organisational development, increasing coaching capacity & leadership offer across Trust, mobilising staff survey plans
Recruitment & retention, employing locally, mobilise staff survey plans
Equality & Diversity, Race & Privilege
Developing borough level estates plans, site upgrades
Capital plans, Bedford Health village, Inpatients modernisation and upgrades
Contracts negotiations
Business cases & investments ,BLMK forensics offer, MH Inpatient build, CAMHS Tier 4 unit, Bedfordshire rehab
Developing plans for system ICS governance and commissioning capability
Managing emerging external system pressures on Directorates resources
Contract KPI reviews
FV programmes, remote working, reduced travel & conference expenses, less variation, printing savings, service digitisation, less DNAs, estates optimisation, procurement,s117 costs in LT/BD, Rehab services, ER processes
Value learning system for QI projects
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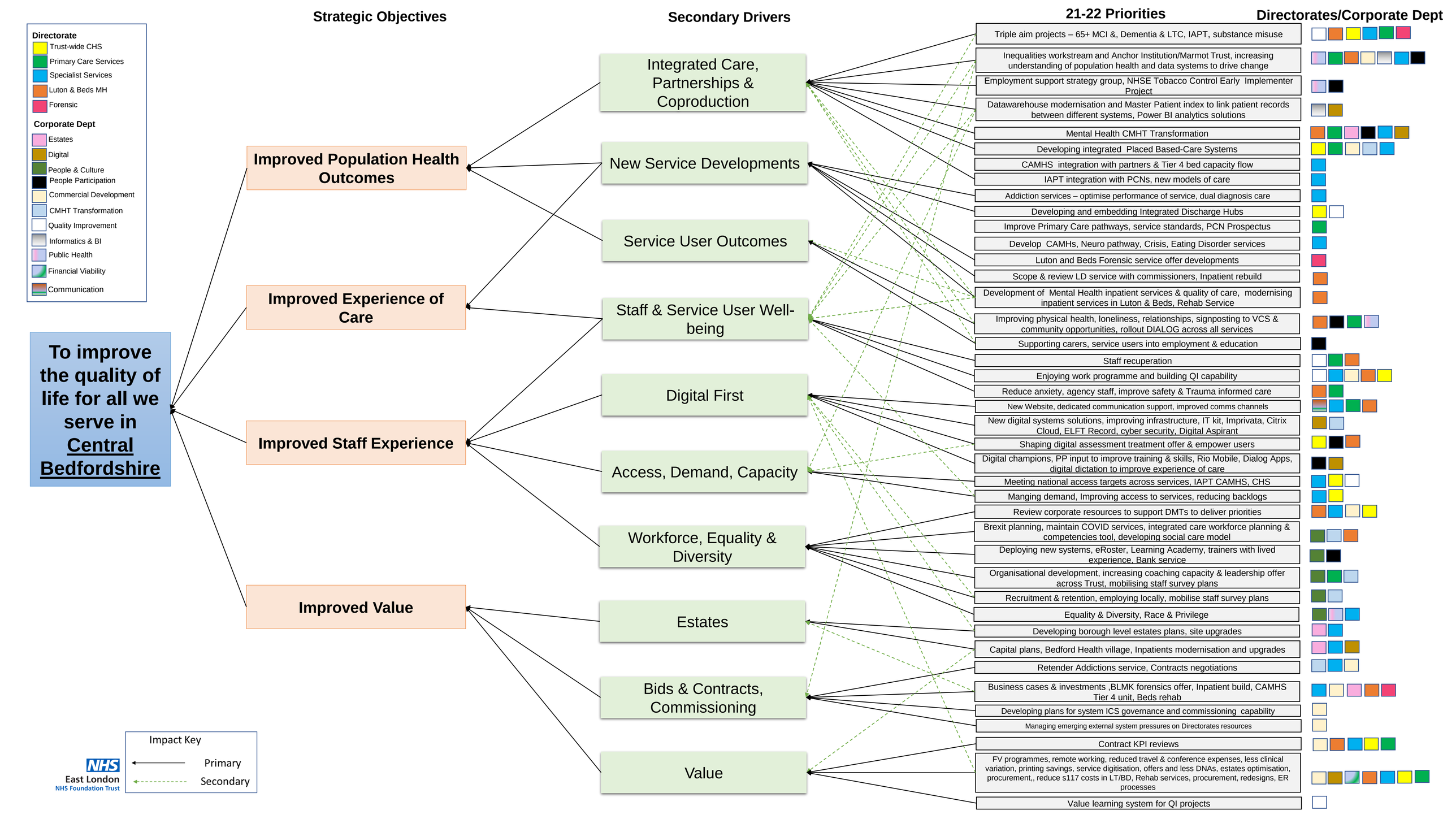
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To improve the quality of life for all we serve in Central Bedfordshire
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Triple aim projects – 65+ MCI &, Dementia & LTC, IAPT, substance misuse
Inequalities workstream and Anchor Institution/Marmot Trust, increasing understanding of population health and data systems to drive change
Employment support strategy group, NHSE Tobacco Control Early Implementer Project
Datawarehouse modernisation and Master Patient index to link patient records between different systems, Power BI analytics solutions
Mental Health CMHT Transformation
Developing integrated Placed Based-Care Systems
CAMHS integration with partners & Tier 4 bed capacity flow
IAPT integration with PCNs, new models of care
Addiction services – optimise performance of service, dual diagnosis care
Developing and embedding Integrated Discharge Hubs
Improve Primary Care pathways, service standards, PCN Prospectus
Develop CAMHs, Neuro pathway, Crisis, Eating Disorder services
Luton and Beds Forensic service offer developments
Scope & review LD service with commissioners, Inpatient rebuild
Development of Mental Health inpatient services & quality of care, modernising inpatient services in Luton & Beds, Rehab Service
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services
Supporting carers, service users into employment & education
Staff recuperation
Enjoying work programme and building QI capability
Reduce anxiety, agency staff, improve safety & Trauma informed care
New Website, dedicated communication support, improved comms channels
New digital systems solutions, improving infrastructure, IT kit, Imprivata, Citrix Cloud, ELFT Record, cyber security, Digital Aspirant
Shaping digital assessment treatment offer & empower users
Digital champions, PP input to improve training & skills, Rio Mobile, Dialog Apps, digital dictation to improve experience of care
Meeting national access targets across services, IAPT CAMHS, CHS
Manging demand, Improving access to services, reducing backlogs
Review corporate resources to support DMTs to deliver priorities
Brexit planning, maintain COVID services, integrated care workforce planning & competencies tool, developing social care model
Deploying new systems, eRoster, Learning Academy, trainers with lived experience, Bank service
Organisational development, increasing coaching capacity & leadership offer across Trust, mobilising staff survey plans
Recruitment & retention, employing locally, mobilise staff survey plans
Equality & Diversity, Race & Privilege
Developing borough level estates plans, site upgrades
Capital plans, Bedford Health village, Inpatients modernisation and upgrades
Retender Addictions service, Contracts negotiations
Business cases & investments ,BLMK forensics offer, Inpatient build, CAMHS Tier 4 unit, Beds rehab
Developing plans for system ICS governance and commissioning capability
Managing emerging external system pressures on Directorates resources
Contract KPI reviews
FV programmes, remote working, reduced travel & conference expenses, less clinical variation, printing savings, service digitisation, offers and less DNAs, estates optimisation, procurement,, reduce s117 costs in LT/BD, Rehab services, procurement, redesigns, ER processes
Value learning system for QI projects
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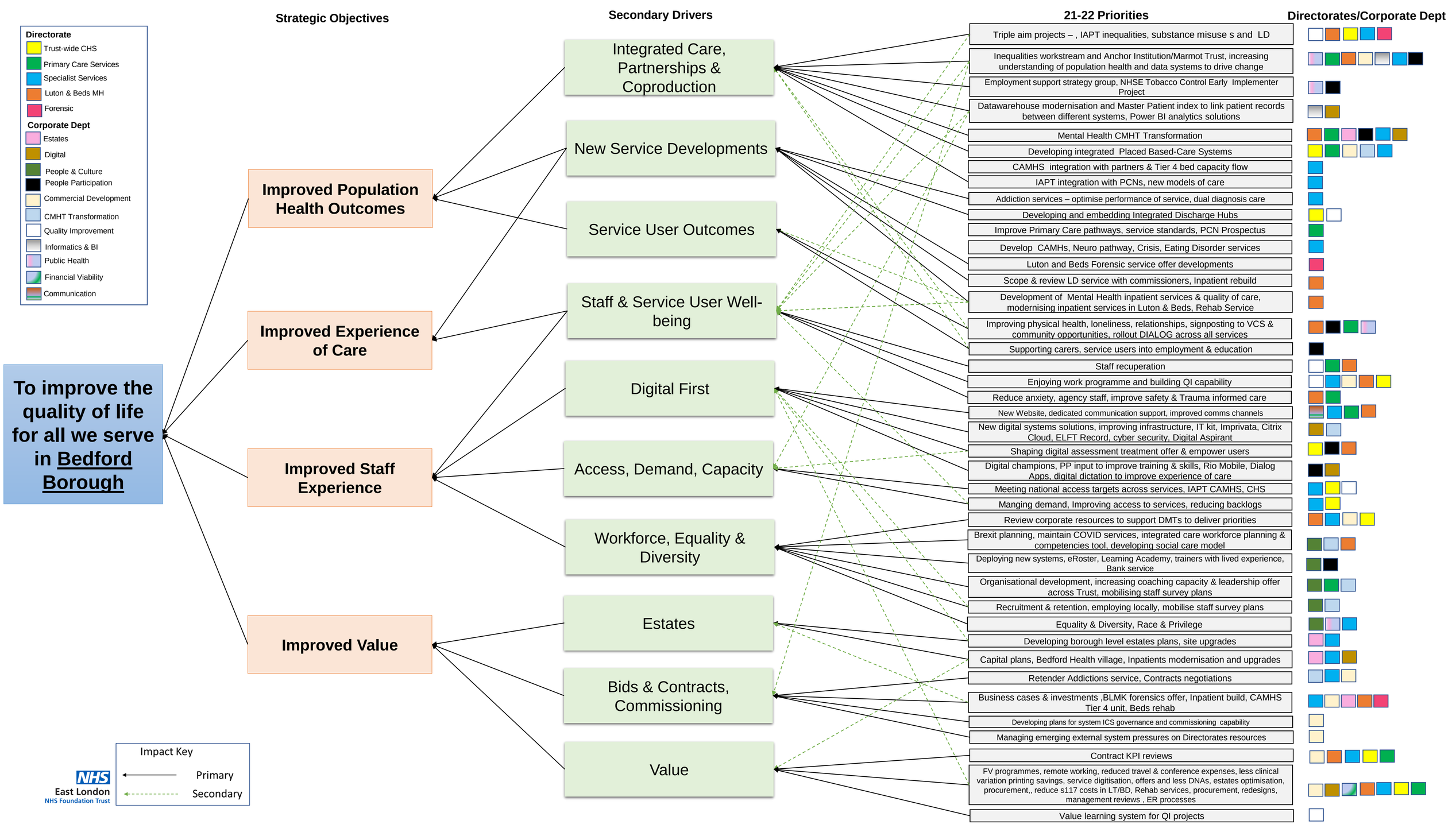
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21-22 Priorities
Directorates/Corporate Dept
To improve the quality of life for all we serve in Bedford Borough
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Triple aim projects – , IAPT inequalities, substance misuse s and LD
Inequalities workstream and Anchor Institution/Marmot Trust, increasing understanding of population health and data systems to drive change
Employment support strategy group, NHSE Tobacco Control Early Implementer Project
Datawarehouse modernisation and Master Patient index to link patient records between different systems, Power BI analytics solutions
Mental Health CMHT Transformation
Developing integrated Placed Based-Care Systems
CAMHS integration with partners & Tier 4 bed capacity flow
IAPT integration with PCNs, new models of care
Addiction services – optimise performance of service, dual diagnosis care
Developing and embedding Integrated Discharge Hubs
Improve Primary Care pathways, service standards, PCN Prospectus
Develop CAMHs, Neuro pathway, Crisis, Eating Disorder services
Luton and Beds Forensic service offer developments
Scope & review LD service with commissioners, Inpatient rebuild
Development of Mental Health inpatient services & quality of care, modernising inpatient services in Luton & Beds, Rehab Service
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services
Supporting carers, service users into employment & education
Staff recuperation
Enjoying work programme and building QI capability
Reduce anxiety, agency staff, improve safety & Trauma informed care
New Website, dedicated communication support, improved comms channels
New digital systems solutions, improving infrastructure, IT kit, Imprivata, Citrix Cloud, ELFT Record, cyber security, Digital Aspirant
Shaping digital assessment treatment offer & empower users
Digital champions, PP input to improve training & skills, Rio Mobile, Dialog Apps, digital dictation to improve experience of care
Meeting national access targets across services, IAPT CAMHS, CHS
Manging demand, Improving access to services, reducing backlogs
Review corporate resources to support DMTs to deliver priorities
Brexit planning, maintain COVID services, integrated care workforce planning & competencies tool, developing social care model
Deploying new systems, eRoster, Learning Academy, trainers with lived experience, Bank service
Organisational development, increasing coaching capacity & leadership offer across Trust, mobilising staff survey plans
Recruitment & retention, employing locally, mobilise staff survey plans
Equality & Diversity, Race & Privilege
Developing borough level estates plans, site upgrades
Capital plans, Bedford Health village, Inpatients modernisation and upgrades
Retender Addictions service, Contracts negotiations
Business cases & investments ,BLMK forensics offer, Inpatient build, CAMHS Tier 4 unit, Beds rehab
Developing plans for system ICS governance and commissioning capability
Managing emerging external system pressures on Directorates resources
Contract KPI reviews
FV programmes, remote working, reduced travel & conference expenses, less clinical variation printing savings, service digitisation, offers and less DNAs, estates optimisation, procurement,, reduce s117 costs in LT/BD, Rehab services, procurement, redesigns, management reviews , ER processes
Value learning system for QI projects
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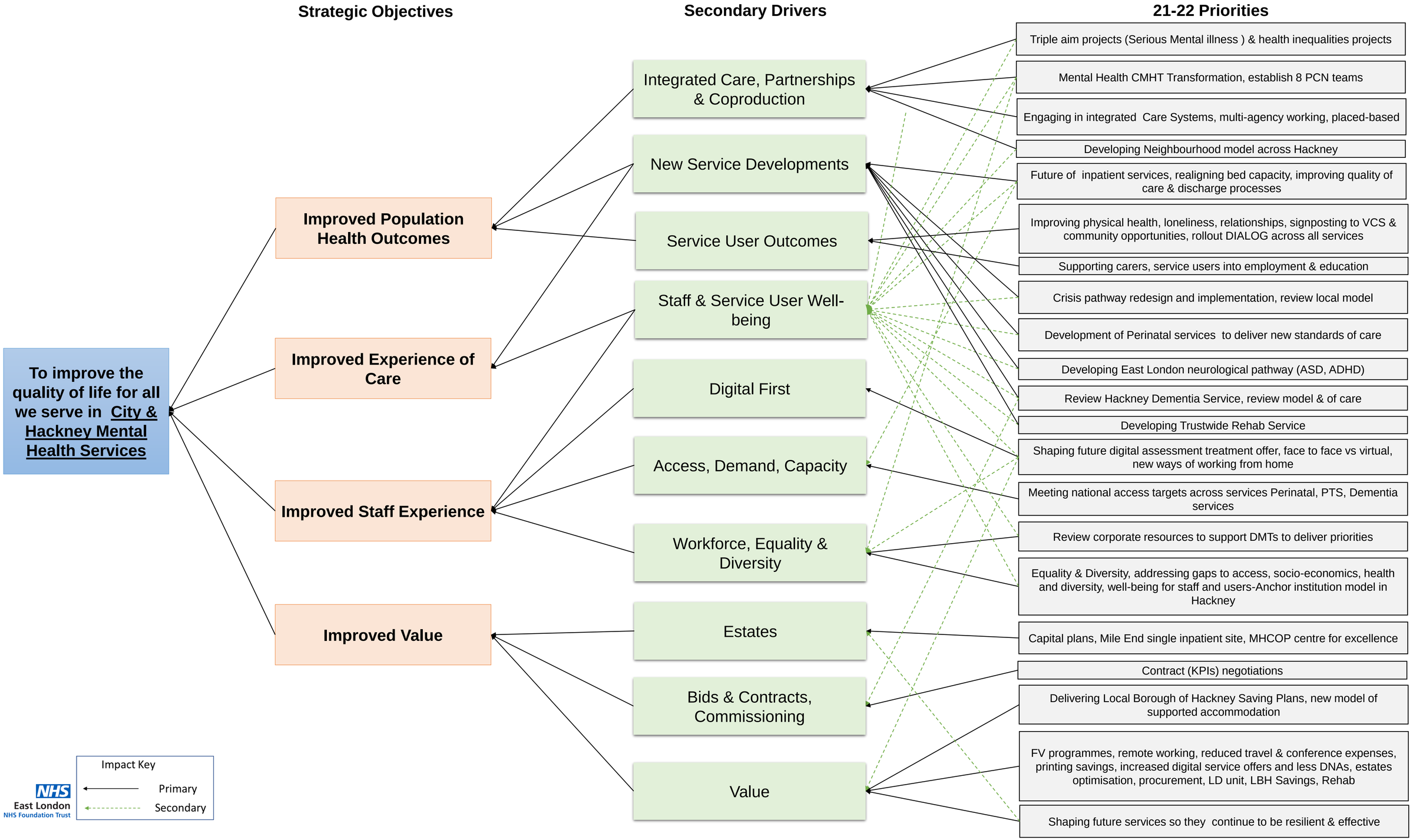
Directorate Plans 2021-22


Strategic Objectives
Secondary Drivers
21-22 Priorities
To improve the quality of life for all we serve in City & Hackney Mental Health Services
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Triple aim projects (Serious Mental illness) & health inequalities projects
Mental Health CMHT Transformation, establish 8 PCN teams
Engaging in integrated Care Systems, multi-agency working, placed-based
Developing Neighbourhood model across Hackney
Future of inpatient services, realigning bed capacity, improving quality of care & discharge processes
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services
Supporting carers, service users into employment & education
Crisis pathway redesign and implementation, review local model
Development of Perinatal services to deliver new standards of care
Developing East London neurological pathway (ASD, ADHD)
Review Hackney Dementia Service, review model & of care
Developing Trustwide Rehab Service
Shaping future digital assessment treatment offer, face to face vs virtual, new ways of working from home
Meeting national access targets across services Perinatal, PTS, Dementia services
Review corporate resources to support DMTs to deliver priorities
Equality & Diversity, addressing gaps to access, socio-economics, health and diversity, well-being for staff and users-Anchor institution model in Hackney
Capital plans, Mile End single inpatient site, MHCOP centre for excellence
Contract (KPIs) negotiations
Delivering Local Borough of Hackney Saving Plans, new model of supported accommodation
FV programmes, remote working, reduced travel & conference expenses, printing savings, increased digital service offers and less DNAs, estates optimisation, procurement, LD unit, LBH Savings, Rehab
Shaping future services so they continue to be resilient & effective
Impact Key
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East London
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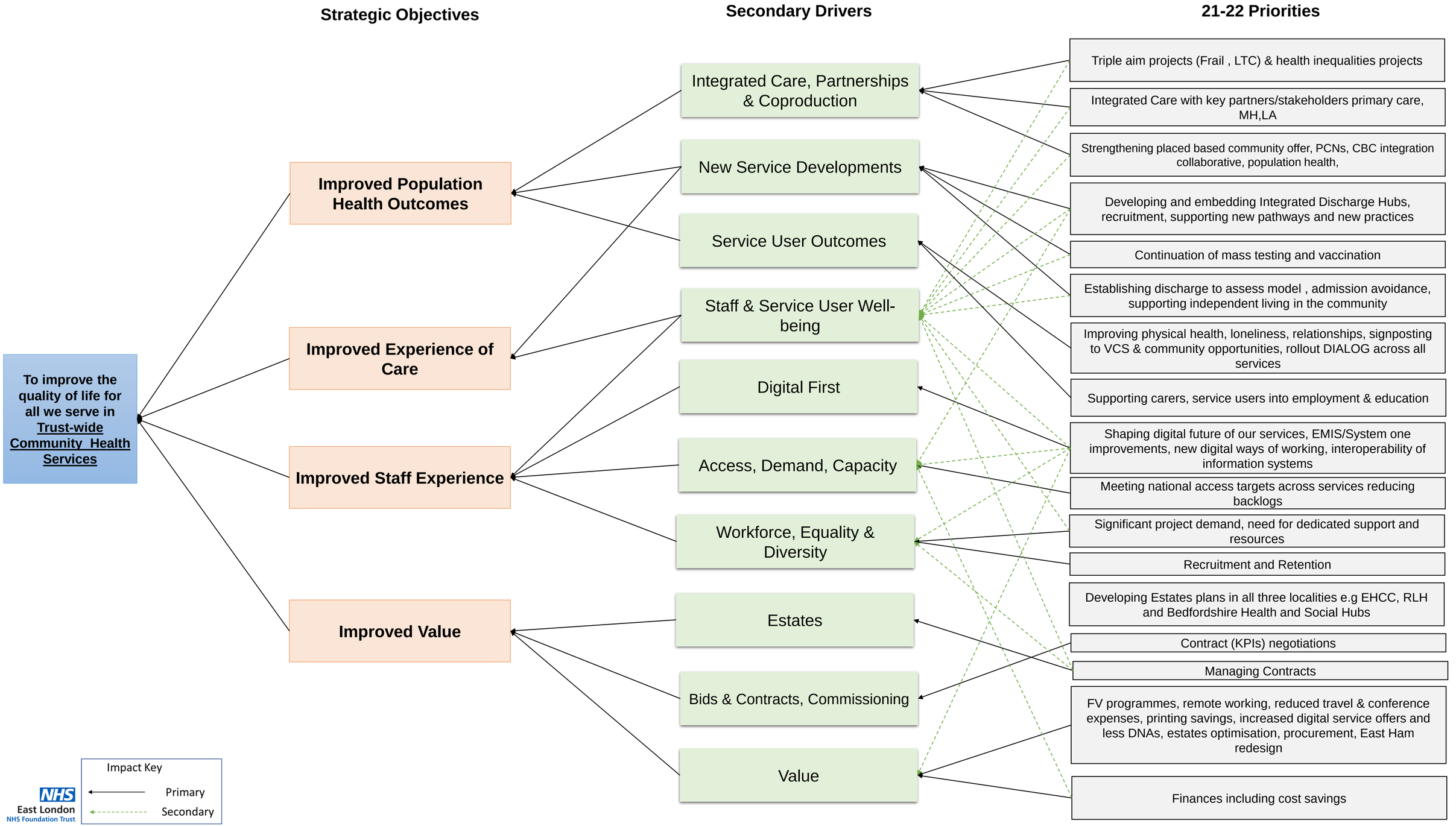
No.	Top Key Priority Areas (City and Hackney)	Milestones	Local Leads	What Cooperate support is required	Expected Delivery Dates
1	Mental Health Community Transformation	Establishing PCN and 8 neighbourhood teams, establishing borough wide complex care teams Delivering improvements in health mental well-being from feedback from service users	Andrew Horobin/Nicola	Programme Support, Informatics & reporting, Digital and clinical systems, P&C, Estates optimisation,	6 month (Looking to complete by July 2021)
2	Crisis Pathway Redesign and Implementation	Reviewing local crisis model and alignment with PCN model, also review crisis pathway redesign with East London (TH, NH)	Andrew Horobin/Peter Macrae/Sharon Evans	Directorate NH and TH, Corporate Performance, Informatic, QI, PPL	6 months
3	Future of Inpatient Services work	Realignment of bed capacity to community transformation, inpatient recovery work to improve quality of care and experience on our wards, improving discharge processes and better utilisation	Rebecca/Victoria	QI, P&C , informatics	12 months
4	Perinatal Mental Health Service Development	Review of services in Hackney and Trustwide to develop a clear perinatal service model strategy, Meeting national targets Delivering on investment standards	Eugene/Justine	Informatics, Corporate Projects, decision from Ops Board to develop clear strategy, Digital, Finance, CDD	12 months
5	East London neurological pathway	Creation of an East London wide neurological service for ADHD ASD	Dean/Sarah Dracass/Leyda	Digital, informatics, QI, Corporate Performance	6 months
6	Delivery of LBH savings plans	Developing a new model of supported accommodation in Hackney	Andrew	Procurement, CDD new contracts	12 months
7	Review of Hackney Dementia Service	Evaluate the current strengths and weaknesses of the new model and make necessary improvements to pathways, balancing service offer with digital and face to face contact, managing backlog waiting list	Cath Mcelroy	Digital, QI , CDD	
8	Shaping future services	Managing on-going challenges from pandemic Developing service models that are able to accommodate digital and face to face New ways of working from home What that means for how we organise services	Sheraz/Peter	P&C, Digital, Informatics, CDD,	12 month
9	Engaging with new integrated care systems	Managing and engaging with new systems and becoming a full partner in the new structures and how we relate to different Trust	Dean/Sheraz	Strategy, Senior Executives ,	6 month
10	Developing place based Integrated care -Neighbourhood model across Hackney	Partnering around neighbourhoods across primary, secondary specialists' services - organising multi agency working around 8 PCNs and developing placed based care	Nicola Gardener	Digital, Informatics, QI, PPL	6 month
11	Equality and Diversity	Addressing gaps around access and outcomes for socio-economic, health and diversity issues for staff and service users – developing our anchor intuition model in hackney	Dean	Digital, Informatics, QI, PPL, Corporate Equalities Workstream, P&C	6 month
12	Corporate Project support	Increasing demand for adhoc project initiations for winter pressures, new bids, existing projects that do not get any support from centre	Corporate	Corporate	6 month
13	Rehab Service (financial viability	Financial Viability proposal exploring the feasibility of a NEL Rehabilitation Pathway - promoting step down and increased independence	Dean/Sheraz	Financial viability, CDD	12months


Strategic Objectives
Secondary Drivers
21-22 Priorities
To improve the quality of life for all we serve in Trust-wide Community Health Services
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Triple aim projects (Frail , LTC) & health inequalities projects
Integrated Care with key partners/stakeholders primary care, MH,LA
Strengthening placed based community offer, PCNs, CBC integration collaborative, population health,
Developing and embedding Integrated Discharge Hubs, recruitment, supporting new pathways and new practices
Continuation of mass testing and vaccination
Establishing discharge to assess model , admission avoidance, supporting independent living in the community
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services
Supporting carers, service users into employment & education
Shaping digital future of our services, EMIS/System one improvements, new digital ways of working, interoperability of information systems
Meeting national access targets across services reducing backlogs
Significant project demand, need for dedicated support and resources
Recruitment and Retention
Developing Estates plans in all three localities e.g EHCC, RLH and Bedfordshire Health and Social Hubs
Contract (KPIs) negotiations
Managing Contracts
FV programmes, remote working, reduced travel & conference expenses, printing savings, increased digital service offers and less DNAs, estates optimisation, procurement, East Ham redesign
Finances including cost savings
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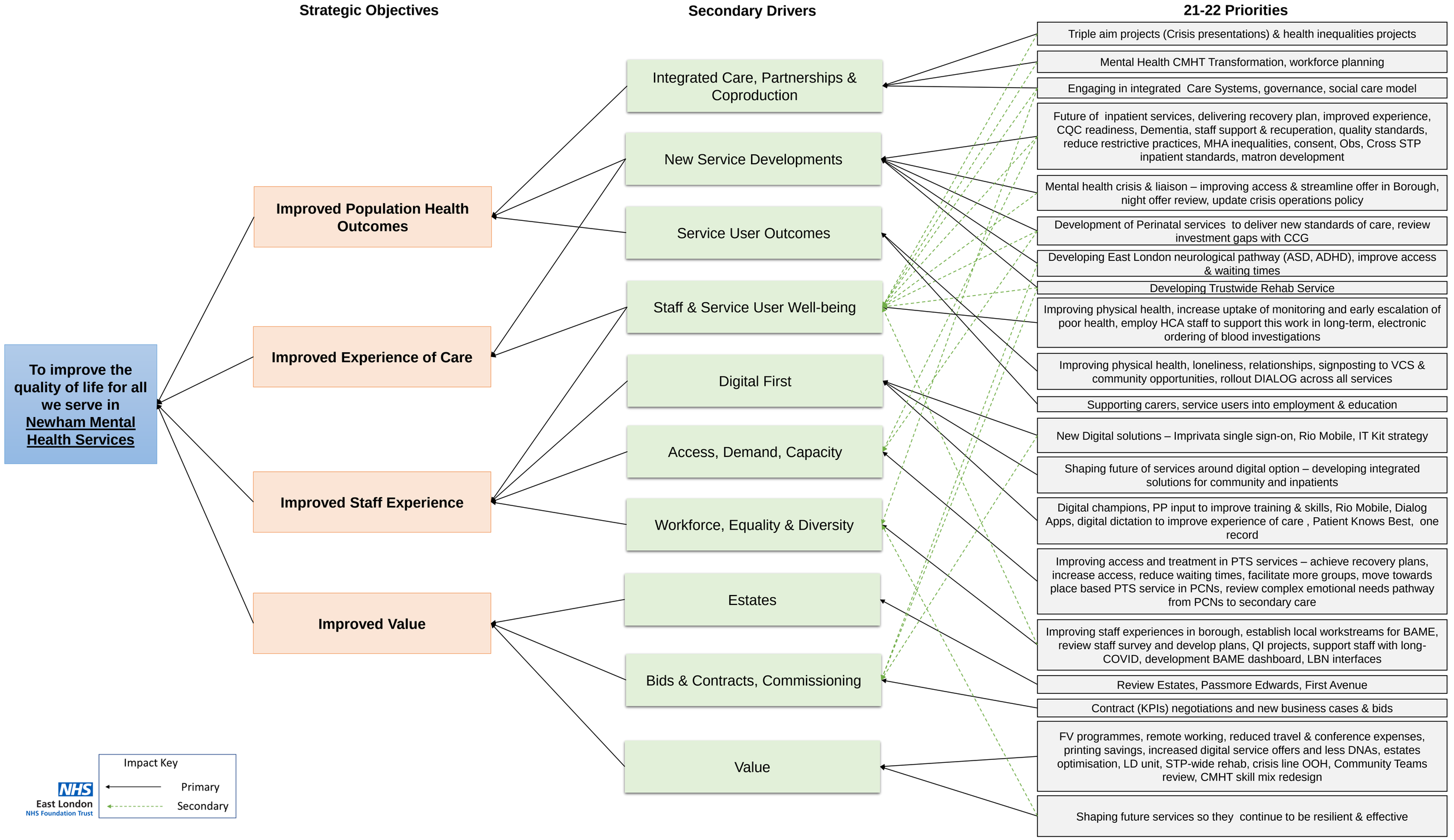
Community Health Service (Trustwide)

NHS East London NHS Foundation Trust

No.	Top Key Priority Areas	Milestones	Local Leads	What Cooperate support is required	Expected Delivery Dates
1	Integrated working with key partners/stakeholders	We will have a strong partnership focus with the acute hospitals, primary care networks and LA, internal clinical directorates Building on the collaborative COVID pandemic working relationships The main placed based locations are CBC, BC, Luton and Bedford hospital and PCNS	Michael, Kate, Ruth Deputy Directors	Estates, Finance, Digital, Project Management Support significant projects demand Executive leads and ICS discussions & updates BLMK ICS – get lines communication in place to support work	6 months
2	Strengthening Placed Based community offer	We effectively view the PCNs as our default for integrated service delivery 'at place' CBC integration collaborative (acute, LA, mental health) - Looking at population health improvement projects Integration project across in Bedfordshire and East London Shaping future workshops	Michael, Kate, Ruth, Michelle Bradley, Day, Bailey Deputy Directors	Estates, Finance, Digital, Project, QI, Management Support significant projects demand	12 months
3	Service Developments: Establishment and mainstreaming of Integrate Discharge Hub	Supporting development of new pathways and investment, recruitment and embedding new practices	Deputy Directors	Estates, Finance, Informatics, Digital, QI, Performance, P&C, informatics	3 months
4	Service Developments: Continuation of testing and likely mass vaccination.	TBC	Deputy Directors	Estates, Finance, Informatics, Digital, QI, Performance, P&C, informatics	3 months
5	Service Development: Establishment of discharge to assess model of care	Admission avoidance and Supporting independent living in community	Deputy Directors	Estates, Finance, Informatics, Digital, QI, Performance, P&C, informatics	3 months
6	Shaping digital future our services	Continue to improve on the EMIS/System One clinical optimisation work to make to improve reporting capability and oversight Digital way of working across teams Clinical Systems design (system one, EMIS) Interoperability of information	Ben Brethwaite, New Post of Bedfordshire	Digital, informatics, P&C, Finance	12 months
7	Significant Project Demand	Dedicated resource to support new initiatives and projects end to end with DMTs, lead projects and deliver local goals . Reviewing P&C support in Directorates.	Corporate	Project support	3 months
8	Waiting times reducing backlog	Services have started review 18 weeks backlog and in the process of devising recovery plans to manage recovery	Helen Green, Allison	Corporate Performance, QI, Informatics	12 months
9	Managing Contracts	The current Contract are evolving and present significant burden on capacity. A review to streamline and improve processes. The management of Sub-contract with CCS, and volume small contracts that need managing to support staff . Managers are taking on more Contract management role	Michael/Ruth/ Kate/ Deputies	CDD, and Informatics, Finance, Corporate Performance	12 months
10	Developing Estates Plans in each Borough	changing our estates profile in all 3 localities eg EHCC, RLH and the Bedfordshire Health and Social Care hubs across CBC, Bedford community services co-location onto one site	Cathy Giles , Allison Jones	Estates,	12 months
11	Recruitment & Retention	Support the recruitment of substantive staff, reduce the use of agency & bank and review skill mix	Ruth Bradley & Professional leads, & Universities	P&C	2 years
13	Finances including cost savings	Reviewing management structures across services , Estates consolidation, strengthening Employer Relations processes	Michael/ Deputies	P&C	12 months


Strategic Objectives
Secondary Drivers
21-22 Priorities
To improve the quality of life for all we serve in Newham Mental Health Services
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Triple aim projects (Crisis presentations) & health inequalities projects
Mental Health CMHT Transformation, workforce planning
Engaging in integrated Care Systems, governance, social care model
Future of inpatient services, delivering recovery plan, improved experience, CQC readiness, Dementia, staff support & recuperation, quality standards, reduce restrictive practices, MHA inequalities, consent, Obs, Cross STP inpatient standards, matron development
Mental health crisis & liaison – improving access & streamline offer in Borough, night offer review, update crisis operations policy
Development of Perinatal services to deliver new standards of care, review investment gaps with CCG
Developing East London neurological pathway (ASD, ADHD), improve access & waiting times
Developing Trustwide Rehab Service
Improving physical health, increase uptake of monitoring and early escalation of poor health, employ HCA staff to support this work in long-term, electronic ordering of blood investigations
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services
Supporting carers, service users into employment & education
New Digital solutions – Imprivata single sign-on, Rio Mobile, IT Kit strategy
Shaping future of services around digital option – developing integrated solutions for community and inpatients
Digital champions, PP input to improve training & skills, Rio Mobile, Dialog Apps, digital dictation to improve experience of care , Patient Knows Best, one record
Improving access and treatment in PTS services – achieve recovery plans, increase access, reduce waiting times, facilitate more groups, move towards place based PTS service in PCNs, review complex emotional needs pathway from PCNs to secondary care
Improving staff experiences in borough, establish local workstreams for BAME, review staff survey and develop plans, QI projects, support staff with long-COVID, development BAME dashboard, LBN interfaces
Review Estates, Passmore Edwards, First Avenue
Contract (KPIs) negotiations and new business cases & bids
FV programmes, remote working, reduced travel & conference expenses, printing savings, increased digital service offers and less DNAs, estates optimisation, LD unit, STP-wide rehab, crisis line OOH, Community Teams review, CMHT skill mix redesign
Shaping future services so they continue to be resilient & effective
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Newham MH (Joint Plan with Tower Hamlets)

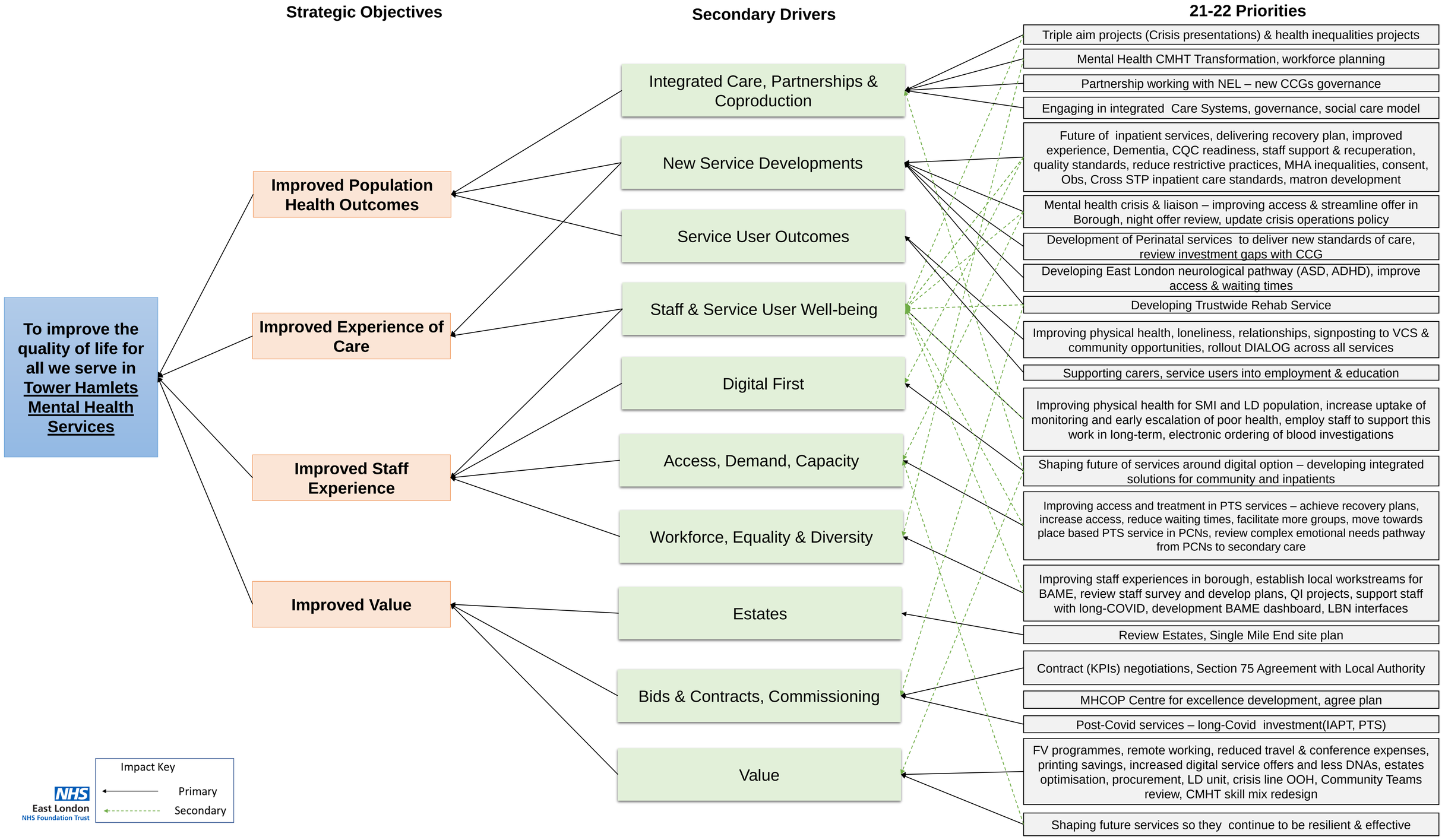
NHS East London NHS Foundation Trust

No.	Top Key Priority Areas	Milestones	Local Leads	What Cooperate support is required	Expected Delivery Dates
1	Specialist Community Perinatal Mental Health- Improving access and offer in the borough (all East London Directorates)	• Fully recruit into posts • Specific offer for perinatal in TH • Advertise the service • Review proportion of investment for Newham and Tower Hamlets	Justine Cawley – programme lead. Laura and Ed Lander (NH), Mags and Parveen (TH)	KPI 's – borough wide – pathways, partnership, Justine Cawley, Informatics, Corporate Performance	2yrs
2	Mental Health Crisis Care and Liaison- Improving access and streamline offer in the Borough	Align all Crisis Pathway services/ offers Update operational policy of all crisis pathway services Consider review of offer at night to London wide (C&H, TH &NH) offer Financial viability	Andrew Horobin, Melanie King (TH), Ed Lander (NH)	Consultations, estates, HR, Digital services, Finance, informatics intelligence reports, KPI, Partners	9 months
3	Therapeutic Acute Mental Health Inpatient Care- improved experience of care - CQC readiness, staff support	• Work to reduce restrictive practices • Improved MHA and consent standards • Co-production to drive improvement • CQC preparedness • Reduce inequalities i.e. MHA • Continue managing beds in the service • Review of welfare observations on the wards • Cross STP standards development for inpatient care • Action plan delivery (NH) • Matron development (NH)	Paul McLaughin (Nh), Evah Marufu (TH)	Executives (Lorraine and Edwin), Estates/Digital, P&C, Informatics	6 months
4	Community Mental Health Transformation – work force planning, governance, partnership working	• Develop KPI's for community transformation services • Increase partnership working and integration of care • Review/ establish Governance arrangements • Increase number of teams imbedded in the transformation project / place based offers • Realignment of roles and responsibilities of staff in the project • Advertise emerging services / learning from the pilot projects • Social care workforce	Justin Phillips & Fenno Outen (NH) Jenny Cooke & Marion Reilly (TH) Gill Williams (Corp)	Consultations , estates , HR , Digital services , Finance , informatics intelligence reports , KPI , Partners ,	2years
5	Post Covid services – long Covid investment (Investment in Psychological services – ongoing support such IAPT, PTS)	• Review needs of post Covid services for local population • Recovery plans for specific groups impacted by COVID-19 i.e., LD service users • Imbed systems improved during Covid • Scan for opportunities to offer borough wide short term long Covid recovery work with services users	Day (TH)	Consultations , estates , HR , Digital services , Finance	12 months
6	Improving access to physical healthcare for SMI and LD population in Tower Hamlets – Dual diagnosis	• Increase uptake of physical health monitoring and early escalation of poor physical health • Employ full time staff to support this work long term • Electronic ordering and reporting of blood investigations • Delivery of fix term proposal around HCA and Physical health monitoring and link to wider transformation work in NH (Newham).	Justine Phillips (NH),	Consultations , estates , HR , Digital services , Finance , informatics intelligence reports , KPI , Partners ,	12months
7	Improve access and treatment through the PTS service – Improve assessment and waiting times for treatment (Newham and Tower Hamlets)	Recovery plan for PTS Improve waiting times Facilitate more group therapies Move towards place-based PTS service – Community transformation around PCN Review and redesign of a full complex emotional needs pathway from PCNs to secondary care (Newham).	Patricia Potter (TH), Erasmo (NH)	Consultations , estates , HR , Digital services , Finance , informatics intelligence reports , KPI , Partners ,	6 months
8	Partnership work with NEL – new CCG	• Establish relationships with new commissioning group (WEL) • Invite partners to local forums for performance and Quality • Increase presence and influence on MH needs on with partners	Day (TH)	CDD, Finance, Corporate Performance	6 months -

Newham MH (Joint Plan with Tower Hamlets)

NHS East London NHS Foundation Trust

No.	Top Key Priority Areas	Milestones	Local Leads	What Cooperate support is required	Expected Delivery Dates
9	Improving staff experiences in the borough	• Establish local work streams for BAME-, Ability, LGBTQ+, women's network • Review staff survey experiences with plans • Support staff with long Covid concerns • Staff support forums across all services to include away day offers • Use Quality improvement methodology in improving staff experience • Development of BAME dashboard, clinical /HR data around access and staff, 136 detentions, to monitor and review progress and trends to plan change ideas (Newham) • Estate review, completion of the First Avenue site. • LBN interface	Day (TH) and Bailey/Fenno (NH)	Consultations , estates , HR , Digital services , Finance , informatics intelligence reports , KPI , Partners ,	9- 12 months
10	MHCOP- Centre of excellence	• Create a centre of excellence service for MHCOP • Agree service line of responsibility for Cazaboun ward • Specialist inpatient clinic Out of Area (NH CHS)	Day (TH), Eugene (Corporate), Helen (NH CHS)	Consultations , estates , HR , Digital services , Finance , informatics intelligence reports , KPI , Partners , project mgt support	6 months
11	Agree Section 75 agreement with LA (Tower Hamlets)	• Sign off the agreement • Operationalise section 75 agreement with LBTH • Minimising reporting burden through identification of interoperable solutions between systems	Day (TH), Gill Williams (Corporate)	Safeguarding, Informatics, P&C, Digital	9 months
12	Improve access and delivery of Neuro pathway development Autism service (ASD), ADHD Services Across the Trust (Newham and Tower Hamlets)	• Recovery plan for both services • Improve waiting times and service access	Dominic (NH), Sarah Barnett (Corporate), Day	CDD, Finance, East London DMTs,	12 months
13	STP wide Rehab Services	• Financial Viability and quality and efficiency of services users experience across the STP	Sheraz (CH), Michael Jones (NH CCG)	Mental health Directorates	12 months
14	Digital: Imprivata /Rio Mobile/IT kit strategy /Patient Knows Best/ EMIS /Single Patient View Imprivata – Single login solution,,single integrated clinical record, EMIS	• Having clear plan for digital enablers across the Directorate including Kit strategy to procure kit based on their needs/roles/ allocated individuals – Financial viability • Integrating different clinical system records and developing a single record for service users , delivering Patient Knows Best system across the Borough and other digital solutions highlighted	Bailey and Fenno (NH)	Digital, Estates, Finance, Digital	6 months
15	Shaping future services around digital options	• To develop integrating solution for community and inpatients services	Day (TH) and Bailey (NH), Phillipa (Corporate)	Digital, Finance, Estates, Governance	12 months
16	Dementia Services: Development of memory services	• Review the development of memory services in relation to national service development expectations, post diagnostic support & MSNAP requirements,. • Agree future models of care, CMHTs provision and resources across the pathway • Delivery of new service standards	Day (TH), & Bailey (NH)	Finance, CCD, People & Culture	12 months+


Strategic Objectives
Secondary Drivers
21-22 Priorities
To improve the quality of life for all we serve in Tower Hamlets Mental Health Services
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Triple aim projects (Crisis presentations) & health inequalities projects
Mental Health CMHT Transformation, workforce planning
Partnership working with NEL – new CCGs governance
Engaging in integrated Care Systems, governance, social care model
Future of inpatient services, delivering recovery plan, improved experience, Dementia, CQC readiness, staff support & recuperation, quality standards, reduce restrictive practices, MHA inequalities, consent, Obs, Cross STP inpatient care standards, matron development
Mental health crisis & liaison – improving access & streamline offer in Borough, night offer review, update crisis operations policy
Development of Perinatal services to deliver new standards of care, review investment gaps with CCG
Developing East London neurological pathway (ASD, ADHD), improve access & waiting times
Developing Trustwide Rehab Service
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services
Supporting carers, service users into employment & education
Improving physical health for SMI and LD population, increase uptake of monitoring and early escalation of poor health, employ staff to support this work in long-term, electronic ordering of blood investigations
Shaping future of services around digital option – developing integrated solutions for community and inpatients
Improving access and treatment in PTS services – achieve recovery plans, increase access, reduce waiting times, facilitate more groups, move towards place based PTS service in PCNs, review complex emotional needs pathway from PCNs to secondary care
Improving staff experiences in borough, establish local workstreams for BAME, review staff survey and develop plans, QI projects, support staff with long-COVID, development BAME dashboard, LBN interfaces
Review Estates, Single Mile End site plan
Contract (KPIs) negotiations, Section 75 Agreement with Local Authority
MHCOP Centre for excellence development, agree plan
Post-Covid services – long-Covid investment(IAPT, PTS)
FV programmes, remote working, reduced travel & conference expenses, printing savings, increased digital service offers and less DNAs, estates optimisation, procurement, LD unit, crisis line OOH, Community Teams review, CMHT skill mix redesign
Shaping future services so they continue to be resilient & effective
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Tower Hamlets MH (Joint Plan with Newham)

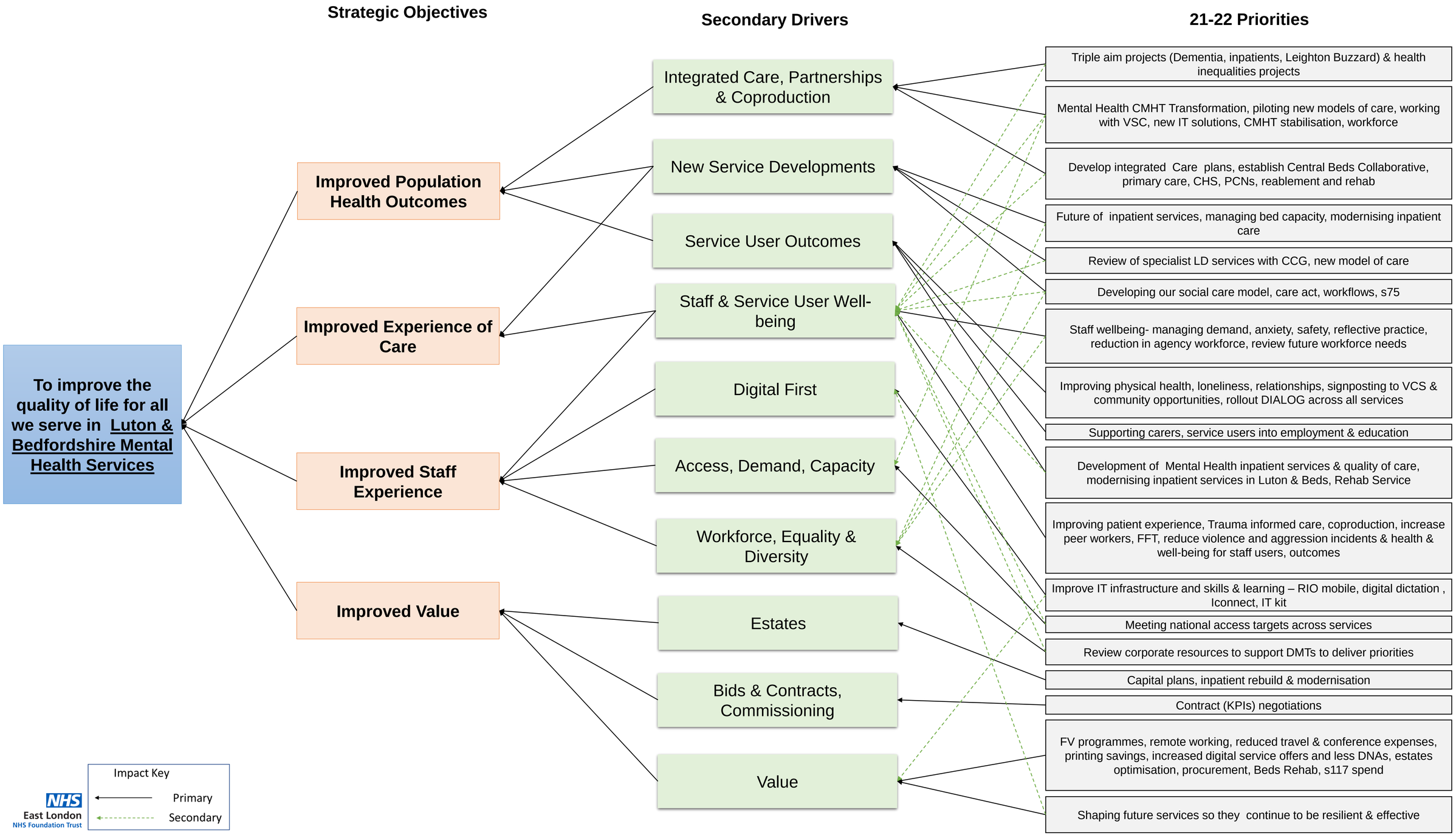
NHS East London NHS Foundation Trust

No.	Top Key Priority Areas	Milestones	Local Leads	What Cooperate support is required	Expected Delivery Dates
1	Specialist Community Perinatal Mental Health- Improving access and offer in the borough (all East London Directorates)	• Fully recruit into posts • Specific offer for perinatal in TH • Advertise the service • Review proportion of investment for Newham and Tower Hamlets	Justine Cawley – programme lead. Laura and Ed Lander (NH), Mags and Parveen (TH)	KPI 's – borough wide – pathways, partnership, Justine Cawley, Informatics, Corporate Performance	2yrs
2	Mental Health Crisis Care and Liaison- Improving access and streamline offer in the Borough	Align all Crisis Pathway services/ offers Update operational policy of all crisis pathway services Consider review of offer at night to London wide (C&H, TH &NH) offer Financial viability	Andrew Horobin, Melanie King (TH), Ed Lander (NH)	Consultations, estates, HR, Digital services, Finance, informatics intelligence reports, KPI, Partners	9 months
3	Therapeutic Acute Mental Health Inpatient Care- improved experience of care - CQC readiness, staff support	• Work to reduce restrictive practices • Improved MHA and consent standards • Co-production to drive improvement • CQC preparedness • Reduce inequalities i.e. MHA • Continue managing beds in the service • Review of welfare observations on the wards • Cross STP standards development for inpatient care • Action plan delivery (NH) • Matron development (NH)	Paul McLaughin (Nh), Evah Marufu (TH)	Executives (Lorraine and Edwin), Estates/Digital, P&C, Informatics	6 months
4	Community Mental Health Transformation – work force planning, governance, partnership working	• Develop KPI's for community transformation services • Increase partnership working and integration of care • Review/ establish Governance arrangements • Increase number of teams imbedded in the transformation project / place based offers • Realignment of roles and responsibilities of staff in the project • Advertise emerging services / learning from the pilot projects • Social care workforce	Justin Phillips & Fenno Outen (NH) Jenny Cooke & Marion Reilly (TH) Gill Williams (Corp)	Consultations , estates , HR , Digital services , Finance , informatics intelligence reports , KPI , Partners ,	2years
5	Post Covid services – long Covid investment (Investment in Psychological services – ongoing support such IAPT, PTS)	• Review needs of post Covid services for local population • Recovery plans for specific groups impacted by COVID-19 i.e., LD service users • Imbed systems improved during Covid • Scan for opportunities to offer borough wide short term long Covid recovery work with services users	Day (TH)	Consultations , estates , HR , Digital services , Finance	12 months
6	Improving access to physical healthcare for SMI and LD population in Tower Hamlets – Dual diagnosis	• Increase uptake of physical health monitoring and early escalation of poor physical health • Employ full time staff to support this work long term • Electronic ordering and reporting of blood investigations • Delivery of fix term proposal around HCA and Physical health monitoring and link to wider transformation work in NH (Newham).	Justine Phillips (NH),	Consultations , estates , HR , Digital services , Finance , informatics intelligence reports , KPI , Partners ,	12months
7	Improve access and treatment through the PTS service – Improve assessment and waiting times for treatment (Newham and Tower Hamlets)	Recovery plan for PTS Improve waiting times Facilitate more group therapies Move towards place-based PTS service – Community transformation around PCN Review and redesign of a full complex emotional needs pathway from PCNs to secondary care (Newham).	Patricia Potter (TH), Erasmo (NH)	Consultations , estates , HR , Digital services , Finance , informatics intelligence reports , KPI , Partners ,	6 months
8	Partnership work with NEL – new CCG	• Establish relationships with new commissioning group (WEL) • Invite partners to local forums for performance and Quality • Increase presence and influence on MH needs on with partners	Day (TH)	CDD, Finance, Corporate Performance	6 months -

Tower Hamlets MH (Joint Plan with Tower Hamlets)

NHS East London NHS Foundation Trust

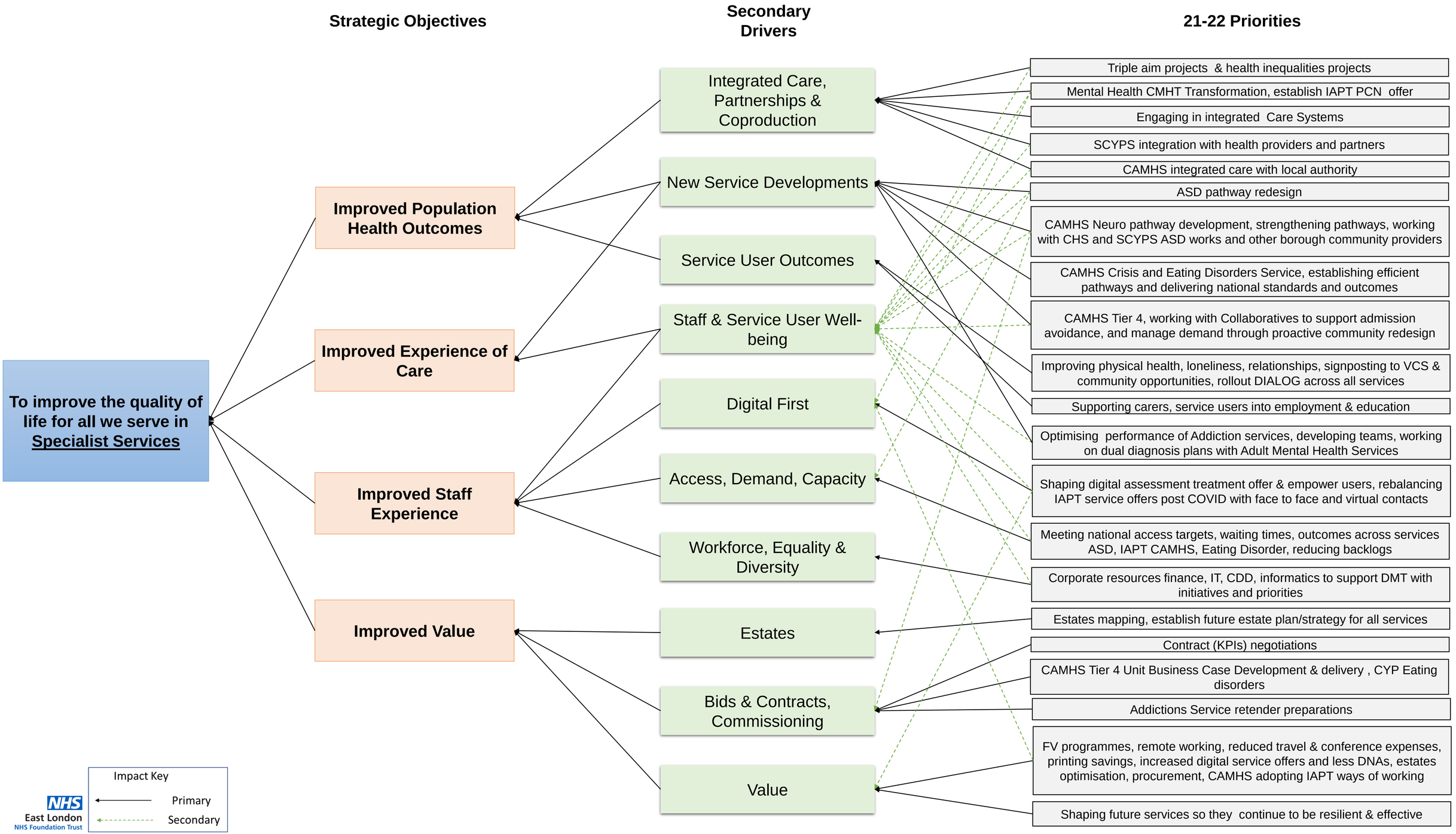
No.	Top Key Priority Areas	Milestones	Local Leads	What Cooperate support is required	Expected Delivery Dates
9	Improving staff experiences in the borough	• Establish local work streams for BAME-, Ability, LGBTQ+, women's network • Review staff survey experiences with plans • Support staff with long Covid concerns • Staff support forums across all services to include away day offers • Use Quality improvement methodology in improving staff experience • Development of BAME dashboard, clinical /HR data around access and staff, 136 detentions, to monitor and review progress and trends to plan change ideas (Newham) • Estate review, completion of the First Avenue site. • LBN interface	Day (TH) and Bailey/Fenno (NH)	Consultations , estates , HR , Digital services , Finance , informatics intelligence reports , KPI , Partners ,	9- 12 months
10	MHCOP- Centre of excellence	• Create a centre of excellence service for MHCOP • Agree service line of responsibility for Cazaboun ward • Specialist inpatient clinic Out of Area (NH CHS)	Day (TH), Eugene (Corporate), Helen (NH CHS)	Consultations , estates , HR , Digital services , Finance , informatics intelligence reports , KPI , Partners , project mgt support	6 months
11	Agree Section 75 agreement with LA (Tower Hamlets)	• Sign off the agreement • Operationalise section 75 agreement with LBTH • Minimising reporting burden through identification of interoperable solutions between systems	Day (TH), Gill Williams (Corporate)	Safeguarding, Informatics, P&C, Digital	9 months
12	Improve access and delivery of Neuro pathway development Autism service (ASD), ADHD Services Across the Trust (Newham and Tower Hamlets)	• Recovery plan for both services • Improve waiting times and service access	Dominic (NH), Sarah Barnett (Corporate), Day	CDD, Finance, East London DMTs,	12 months
13	STP wide Rehab Services	• Financial Viability and quality and efficiency of services users experience across the STP	Sheraz (CH), Michael Jones (NH CCG)	Mental health Directorates	12 months
14	Digital: Imprivata /Rio Mobile/IT kit strategy /Patient Knows Best/ EMIS /Single Patient View Imprivata – Single login solution,,single integrated clinical record, EMIS	• Having clear plan for digital enablers across the Directorate including Kit strategy to procure kit based on their needs/roles/ allocated individuals – Financial viability • Integrating different clinical system records and developing a single record for service users , delivering Patient Knows Best system across the Borough and other digital solutions highlighted	Bailey and Fenno (NH)	Digital, Estates, Finance, Digital	6 months
15	Shaping future services around digital options	• To develop integrating solution for community and inpatients services	Day (TH) and Bailey (NH), Phillipa (Corporate)	Digital, Finance, Estates, Governance	12 months
16	Dementia services: Development of memory services	• Review the development of memory services in relation to national service development expectations, post diagnostic support & MSNAP requirements,. • Agree future models of care, CMHTs provision and resources across the pathway • Delivery of new service standards	Day (TH), & Bailey (NH)	Finance, CCD, People & Culture	12 months+


Strategic Objectives
Secondary Drivers
21-22 Priorities
To improve the quality of life for all we serve in Luton & Bedfordshire Mental Health Services
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Triple aim projects (Dementia, inpatients, Leighton Buzzard) & health inequalities projects
Mental Health CMHT Transformation, piloting new models of care, working with VSC, new IT solutions, CMHT stabilisation, workforce
Develop integrated Care plans, establish Central Beds Collaborative, primary care, CHS, PCNs, reablement and rehab
Future of inpatient services, managing bed capacity, modernising inpatient care
Review of specialist LD services with CCG, new model of care
Developing our social care model, care act, workflows, s75
Staff wellbeing- managing demand, anxiety, safety, reflective practice, reduction in agency workforce, review future workforce needs
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services
Supporting carers, service users into employment & education
Development of Mental Health inpatient services & quality of care, modernising inpatient services in Luton & Beds, Rehab Service
Improving patient experience, Trauma informed care, coproduction, increase peer workers, FFT, reduce violence and aggression incidents & health & well-being for staff users, outcomes
Improve IT infrastructure and skills & learning – RIO mobile, digital dictation , Iconnect, IT kit
Meeting national access targets across services
Review corporate resources to support DMTs to deliver priorities
Capital plans, inpatient rebuild & modernisation
Contract (KPIs) negotiations
FV programmes, remote working, reduced travel & conference expenses, printing savings, increased digital service offers and less DNAs, estates optimisation, procurement, Beds Rehab, s117 spend
Shaping future services so they continue to be resilient & effective
Impact Key
Primary
Secondary
NHS
East London
NHS Foundation Trust

Luton & Bedfordshire

NHS East London NHS Foundation Trust

No.	Top Key Priority Areas	Milestones	Local Leads	What Cooperate support is required	Expected Delivery Dates
1	Population Health	Building on currently work underway with service users with dementia, physical issues, leighton buzzard	Allison Jones/Sharon /Dudley	Public health, QI, Primary care directorate	12 month
2	Integrated Place based plans	• Establishing central beds collaborative, appointment of and integration programme manager to develop plans and new ways of working for older adult services with CMHTs • reablement and rehab teams across ELFT and CBC • Primary care and CHS working practices	Michael/Michelle	Informatics, Digital, QI, Communication, Estates	12 months
3	CMHT Transformation	Piloting new model of care in CMHTs in Q1 with expansion throughout year, this will see increased partnership working with VSC, new IT solutions, developing PCN models of care, testing new blend community teams across different partnerships, new integrated service models based on recovery model , Access to services, stabilisation of CMHT demand work, review of workforce /financial , viability /travel	Dudley/Michelle/Liz Munday	Informatics, Digital, QI, Communication, PPL, Estates, P&C, Finance	12 months
4	Review of specialist LD services	LD commissioner currently being recruited, and the scope of review and service models undertaken across three local authorities, Access	Ruth Cooper /Sanjay Nelson	Informatics, Digital, QI, CDD, PPL	12 months
5	Developing our social care model	Review social care activity, care act, recording, workflows, review demand and capacity and duplication of effort, review of section 75 agreements and threshold between local authorities	Gill/Michelle	Informatics, Digital, QI, Performance, CDD, PPL	12 months
6	Corporate Support /Resources	Address current gaps and identify corporate resources and develop local plan/resource to effectively manage expectations and demands	Corporate	Corporate	3 month
7	Improve patient experience of services	Trauma informed care training, recovery/compassionate care training, improving FTT response rates , coproduction, increase in peer workers/ reducing patient damage on the ward through reduced violence on ward and health & well-being outcomes	Michelle/Ellen/Claire	QA, Training, PPL, Complaints/Sis, P&C OD support,	6 month
8	Improve IT infrastructure and skills & learning (inc Rio mobile, digital dictation)	Phone lines, WIFI, Digital solution training and capacity improved, Iconnect , Laptop and telephone signals review and develop plan for improvement, better access to clinical records systems, Rio mobile	Mike King/ Dudley	Digital, Informatics, P&C	3 month
9	Staff well being	Managing impact of pandemic, increased demand, increased abuse and sense of anxiety, maintaining safe services and managing impact on staff, developing reflective practice and well-being spaces/time/ financial viability reduction in agency workforce/ future workforce review/	Sasha/Isabella/Maxine/Tasha/ Sharon/Ruth/Ellen/Bernadette/ Nina	P&C, Finance, Communication, QI, QA, Estates, JSC, Digital and home working	6 months
10	Inpatient Rebuild	3-year plan to be finalised and communicated to stakeholders, financial viability estates review	Eguene	Projects, Estates, Finance, informatics, Performance,	3 year
11	Inpatient modernisation	Scheme to be clarified with Michelle	Michelle/Guy Thompson		12 months
12	Care co-ordination for people with a learning disability	Further discussions to agree plan	Sanjay/Ruth/Michelle		12 months
13	Crisis and In-patient pathways/support for people with a learning disability.	Further discussions to agree plan	Sanjay/Ruth/Michelle		12 months


Strategic Objectives
Secondary Drivers
21-22 Priorities
To improve the quality of life for all we serve in Specialist Services
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Triple aim projects & health inequalities projects
Mental Health CMHT Transformation, establish IAPT PCN offer
Engaging in integrated Care Systems
SCYPS integration with health providers and partners
CAMHS integrated care with local authority
ASD pathway redesign
CAMHS Neuro pathway development, strengthening pathways, working with CHS and SCYPS ASD works and other borough community providers
CAMHS Crisis and Eating Disorders Service, establishing efficient pathways and delivering national standards and outcomes
CAMHS Tier 4, working with Collaboratives to support admission avoidance, and manage demand through proactive community redesign
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services
Supporting carers, service users into employment & education
Optimising performance of Addiction services, developing teams, working on dual diagnosis plans with Adult Mental Health Services
Shaping digital assessment treatment offer & empower users, rebalancing IAPT service offers post COVID with face to face and virtual contacts
Meeting national access targets, waiting times, outcomes across services ASD, IAPT CAMHS, Eating Disorder, reducing backlogs
Corporate resources finance, IT, CDD, informatics to support DMT with initiatives and priorities
Estates mapping, establish future estate plan/strategy for all services
Contract (KPIs) negotiations
CAMHS Tier 4 Unit Business Case Development & delivery , CYP Eating disorders
Addictions Service retender preparations
FV programmes, remote working, reduced travel & conference expenses, printing savings, increased digital service offers and less DNAs, estates optimisation, procurement, CAMHS adopting IAPT ways of working
Shaping future services so they continue to be resilient & effective
Impact Key
Primary
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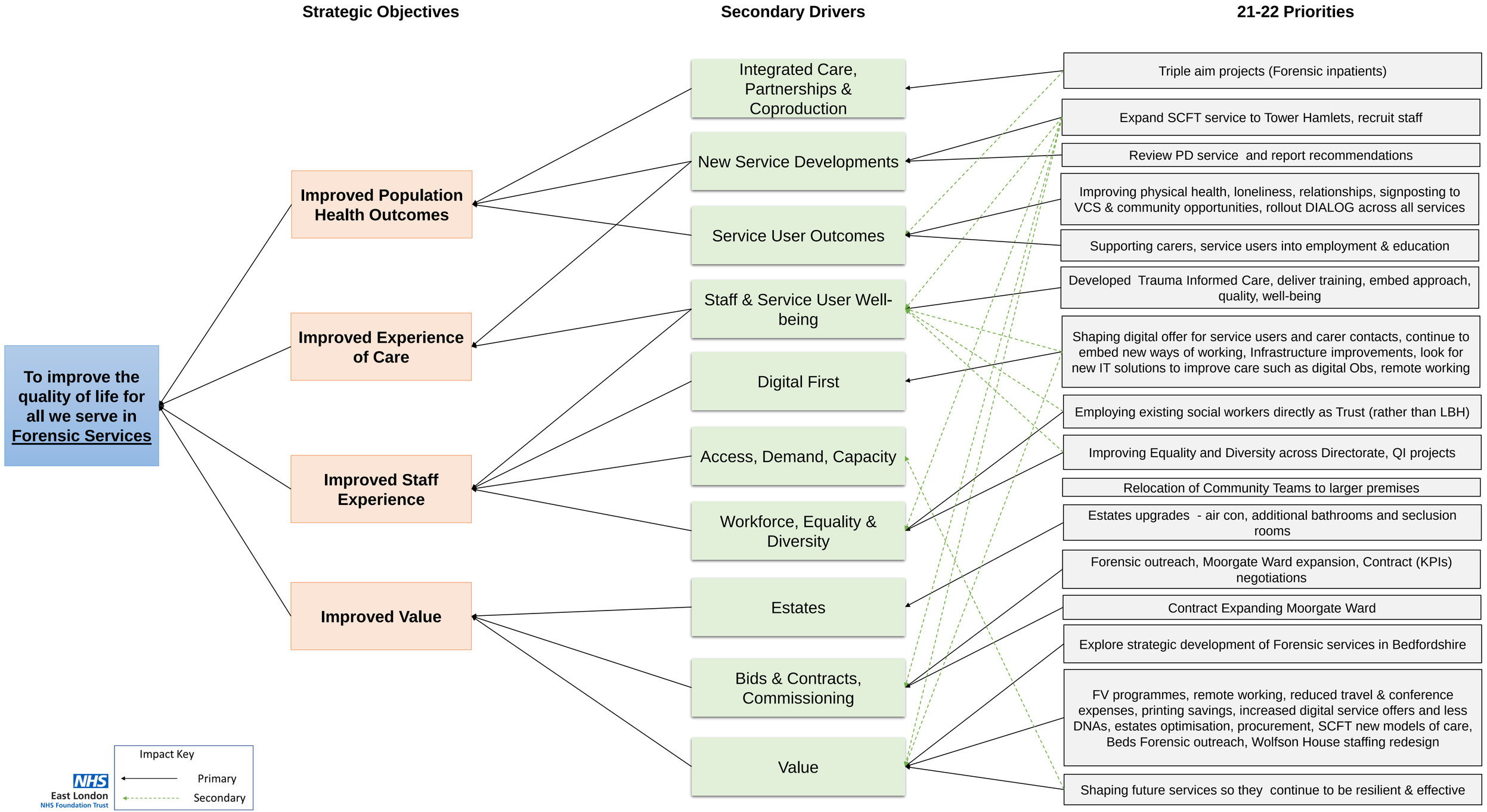
Specialist Services

NHS East London NHS Foundation Trust

No.	Top Key Priority Areas (Specialist Services)	Milestones	Local Leads	What Cooperate support is required	Expected Delivery Dates
1	SCYPS: Integration with health providers and partners	Integrated SALT offer clarified with schools and CCGs ASD waiting times	Sarah Skeels/Julia proctor	QI, Finance and CDD, Estates	6 months
2	SCYPS: Resolving ASD Waiting List	Reduction in backlog Delivering on the SEND agenda	Sarah Skeels/Julia Proctor	Finance, informatic, Corporate Performance, QI	12months
3	ASD Pathway Redesign	Establish a new more efficient pathways	Sarah Skeels/Julia Proctor	QI/QA, Digital,	12 months
4	CAMHS ACCESS, HTT, increased demand	Maintaining national access times and having enough plans in place to meet demand, learning from pandemic and offering more digital access initiatives	Jo / Lindsay Hobson/Sarah	Digital team and informatics, recruitment (medical), Finance, CDD	6 months
5	CAMHS neuro pathway development	Strengthening pathways, working with CHS and links to SCYPS ASD work and other boroughs community provider	Sarah/Cathy	Local partners (LA and community providers, Children Boards)	12 month
6	CAMHS Crisis and Eating Disorder	Meeting waiting times backlog, and establishing efficient crisis pathways as per national commissioning standards in light of increase in demand developing Crisis services in line with LTP objectives and local need And developing an integrated schools offer in each place in conjunction with Education and partner agencies	Jo / Lindsay Hobson/Sarah	On-going, informatics dashboards	6months
7	CAMHS Integrated Care with Local Authority	Strengthening existing partnership working – removing silo working , strengthening single point of access and collaborative working within places	Sarah Wilson/Cathy Lavelle	Executive and Board level to support integrated working with LA's, enabling local work	12 months
8	CAMHS Tier 4- managing bed base and reinvestment in community services	Working with the CAMHs Collaboratives to support admission avoidance, managing surge in demand through proactive community redesign	Jo / Lindsay Hobson/Sarah	CDD, Finance	12 months
9	BLMK CAMHS Tier 4 unit	Successful business case for new unit – currently in progress CDD	Sarah/Cathy	CDD, Finance	12 months
10	Corporate resources finance, IT, CDD, informatics to support DMT with all initiatives	Having local dedicated resources locally	Corporate		6 months
11	Addictions: P2R Bedfordshire, preparing for retender for 2022	Optimising performance, developing teams /staff and working on dual diagnosis plans with adult mental health , improvement projects	Sharon/Darryl	CDD, Finance, P&C and QI, Estates	12 months
12	IAPT: Achieving national access target	Working with people with LTC, access times and recovery target, new ways of working, rebalancing service offer post covid digital blend and face to face contact assessment and treatments	Monton/Ros/Alex	P&C, QI, Digital and informatics, Estates	12 month
13	IAPT ; Integrated working in PCNs and CMHT transformation	Establishing new pathways and service offers, embedding new practices and developing new blended offer	Monton/Ros/Alex	P&C, QI, Digital and informatics, Estates	12 month
14	Estates mapping for the future across all services	Establish future estate plans/ strategies for all key services	John/ Sarah/Cathy	Estates	12 month
15	Challenging Inequalities across services	All services have started work to address inequalities in each Borough and this being initiated across SCYPS and Addictions	Sarah Wilson/ Heads of Sevice		
16	Contracts & Commissioning	Securing funding for services developments including : Crisis pathway, CAMHS Tier 4, Community CAMHS and SCYPS redeveloping services to meet surge in demands	Sarah Wilson	CDD	6 months


Strategic Objectives
Secondary Drivers
21-22 Priorities
To improve the quality of life for all we serve in Forensic Services
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Triple aim projects (Forensic inpatients)
Expand SCFT service to Tower Hamlets, recruit staff
Review PD service and report recommendations
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services
Supporting carers, service users into employment & education
Developed Trauma Informed Care, deliver training, embed approach, quality, well-being
Shaping digital offer for service users and carer contacts, continue to embed new ways of working, Infrastructure improvements, look for new IT solutions to improve care such as digital Obs, remote working
Employing existing social workers directly as Trust (rather than LBH)
Improving Equality and Diversity across Directorate, QI projects
Relocation of Community Teams to larger premises
Estates upgrades - air con, additional bathrooms and seclusion rooms
Forensic outreach, Moorgate Ward expansion, Contract (KPIs) negotiations
Contract Expanding Moorgate Ward
Explore strategic development of Forensic services in Bedfordshire
FV programmes, remote working, reduced travel & conference expenses, printing savings, increased digital service offers and less DNAs, estates optimisation, procurement, SCFT new models of care, Beds Forensic outreach, Wolfson House staffing redesign
Shaping future services so they continue to be resilient & effective
Impact Key
Primary
Secondary
NHS
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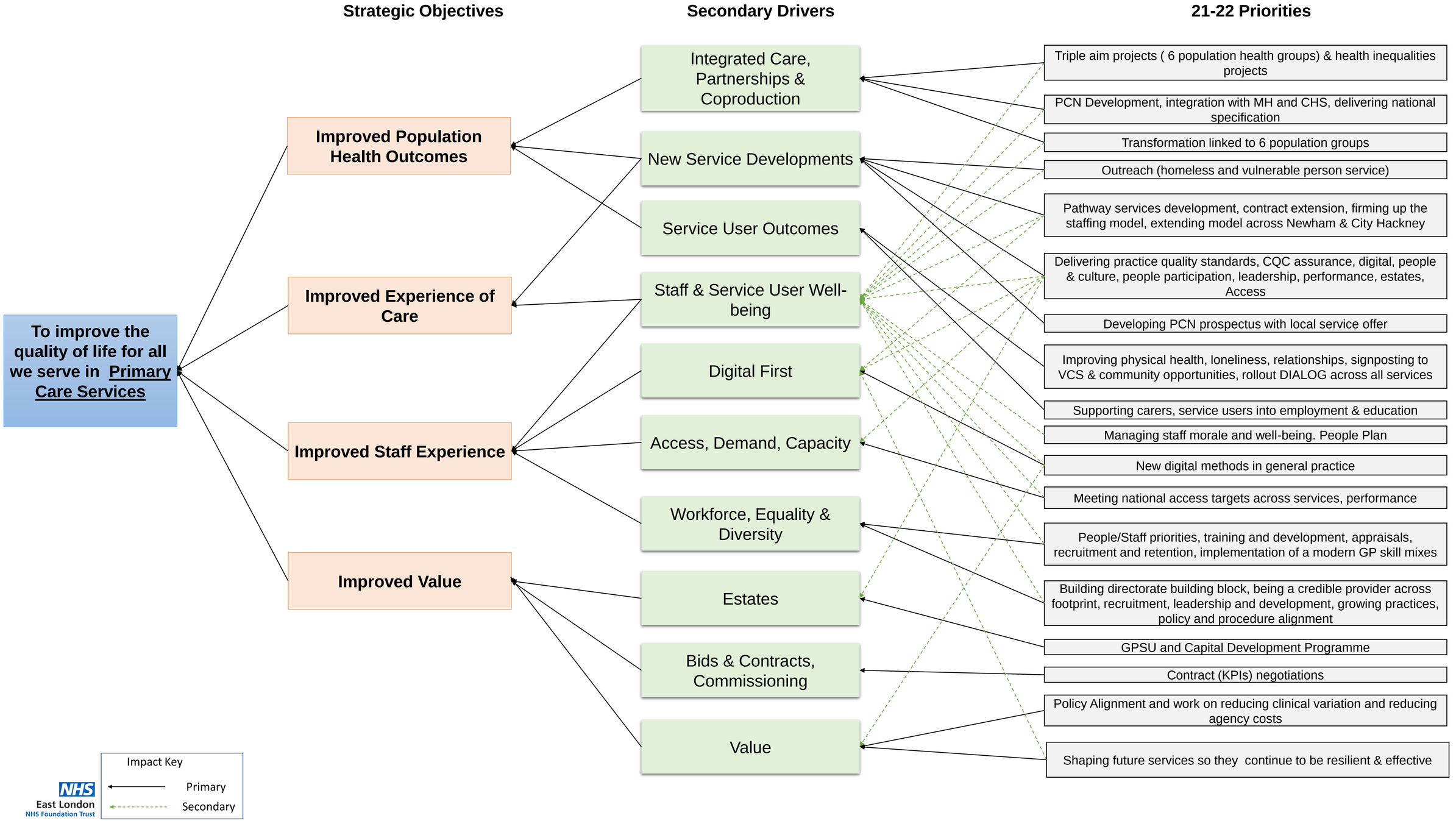
Forensic Services

NHS East London NHS Foundation Trust

No.	Top Key Priority Areas (Forensic Services)	Milestones	Local Leads	What Cooperate support is required	Expected Delivery Dates
1	Expand SCFT service to Tower Hamlets	• Secure funding • Staff in place • Project implemented across TH • FV – saving through implementation of new model of care	Phil Baker, Lawford Clough, Dadai Gwendoline	CDD, Finance, Corporate Financial Viability	3 months
2	Expanding Moorgate Ward	• Developing a business case • Commissioner agreement on new model/service • Capital project sign off • Building work/ estates • Recruiting staff on the new ward • Identifying Service users to move to ward	Phil Baker, Lawford, Tony, Gbenga, LD leads	CDD, Corporate FV, Finance, Estates, Executive Lead Edwin & Steven, Informatics, Digital	12 -18 months
3	Moving Community to better and larger premises (2 x teams)	• Site identified and procured • Estates Work completed on new site • Team successfully moving into new site	Lawford Clough, Marc Lyall, John Hill, leads for each team	Digital, Estates,	6 months
4	Employing existing Social workers directly under the Trust (rather than employed by LBH)	• Consultation process completed • Impact assessment completed • TUPE completed	Denis Thompson, Gill Williams, Tanya Carter, Phil Baker, Richard Fradgley , LBH leads	P&C, Social Care leads, LBH	12 months
5	Improving Equality and Diversity across Directorate	• Developing and implementing a number of projects to support equality and diversity agenda in the directorate	DMT leadership team and other senior leads and all staff, People Participation	P&C, Corporate Equalities Group, Quality improvement	12 months
6	Develop Trauma Informed Care (TIC	• Delivering training TIC to staff- trauma informed training to service users, carers, staff • Train the trainer model implemented across each ward • Embedding TIC across the system	QI, project leads on each ward, Dadai and Matt	QI, Director of Nursing and Psychological therapy services	12 months
7	Shaping digital offer for service users and carer contacts / Infrastructure improvement	• Continue embedding new ways of working • Running Virtual Events • Share learning of what's working and what needs adjustment • Reviewing equipment needs with users/staff/carers • Looking at electronic ways of improving services – digital Obs, remote working	All Leadership teams	Digital, QI , People Participation	6-12 months
8	Estates upgrades (air con, additional bathrooms and seclusion upgrades)	• Complete work outstanding	John Hill, Leadership team	Estates	6-12 months
9	Explore strategic development of forensic services in Luton and Bedfordshire	• Agree strategic direction with Executive Directors • Agree plan to delivery on vision with Luton and Beds stakeholders	Phil Baker, Mohit V, Dudley Manns,	Executive Directors and Medical Director, CDD	6 months
10	Review PD services	• Review and implement findings of external report	Phil Baker	Lorraine S and Paul G Edwin	6months


Strategic Objectives
Secondary Drivers
21-22 Priorities
To improve the quality of life for all we serve in Primary Care Services
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Triple aim projects (6 population health groups) & health inequalities projects
PCN Development, integration with MH and CHS, delivering national specification
Transformation linked to 6 population groups
Outreach (homeless and vulnerable person service)
Pathway services development, contract extension, firming up the staffing model, extending model across Newham & City Hackney
Delivering practice quality standards, CQC assurance, digital, people & culture, people participation, leadership, performance, estates, Access
Developing PCN prospectus with local service offer
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services
Supporting carers, service users into employment & education
Managing staff morale and well-being. People Plan
New digital methods in general practice
Meeting national access targets across services, performance
People/Staff priorities, training and development, appraisals, recruitment and retention, implementation of a modern GP skill mixes
Building directorate building block, being a credible provider across footprint, recruitment, leadership and development, growing practices, policy and procedure alignment
GPSU and Capital Development Programme
Contract (KPIs) negotiations
Policy Alignment and work on reducing clinical variation and reducing agency costs
Shaping future services so they continue to be resilient & effective
Impact Key
Primary
Secondary
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East London
NHS Foundation Trust

Primary Care

NHS East London NHS Foundation Trust

No.	Top Key Priority Areas	Milestones	Local Leads	What Cooperate support is required	Expected Delivery Dates
1	People/Staff priorities (things via appraisals)	• Training and development and upskilling • Settling into ELFT • Learning the system and processes • People- Recruitment and retention, • Staff morale, • implementation of a modern GP Skill mixes as part of the consultation planned	Marina and Liz	People and Culture, Improvement Advisors, Finance	12 months
2	The practices quality standards	• CQC and quality assurance including audit programmes to reduce variation and improve quality • Performance and ops • Improve Access • People and culture • Digital • Estates • People participation (PPGs / National GP survey) PREMS • Developing a clear offer for the 6 population groups • Financial health (particularly CMC / LRS) • Leadership, lead nurse, GP and PM	Quality and Compliance manager, Charan, Duncan Gilbert, PMS, Leads GPs and Lead nurse, Marina ad Liz	People and Culture, Improvement Advisors, Finance, QI, QA, Duncan Gilbert, Informatics and Corporate Performance	12 month
3	The outreach (homeless and vulnerable person service)	• Contract extension and agreement of working model for the service moving forwards • Firming up the staffing model • Delivering performance and clinical system rollout	CDD, Quality and Compliance manager, Charan, Duncan Gilbert, PMS, Leads GPs and Lead nurse, Marina ad Liz	People and Culture, Improvement Advisors, Finance, QI, QA, Informatics and Corporate Performance	3 months
4	Pathways Service (for homeless services)	• Embedding the model across Newham and City and Hackney • Key recruitment linked to this	CDD, Quality and Compliance manager, Charan, Duncan Gilbert, PMS, Leads GPs and Lead nurse, Marina ad Liz	People and Culture, Improvement Advisors, Finance, QI, QA, Informatics and Corporate Performance	6 months
5	The PCN Development	• Delivery of the 8 national specs • Covid vaccine • Additional roles recruitment • Integration with MH and CHS and on what basis – building exemplar sites for placed based plans from primary care outwards • PCN Development programme • Building relationships	Lead GPs and PMs	Other Directorates	2 years
6	Our directorate (the future building blocks are key for onward delivery)	• GP Support unit • Policy and procedure alignment • Transformation – care models (digital etc) – linked to 6 population groups • Leadership across PMs and lead GPs • Taking on more practices – building of a white paper (offer) for practices and systems to be more explicit • Being seen as a credible provider of general practice across the footprints by delivery of a strategy, targets and contracts • CQC – a vision to outstanding • Further recruitment, directorate dev, nursing lead and people participation project lead • Lead nurse and development of a professional nursing network and programme of professional development	CDD, Quality and Compliance manager, Charan, Duncan Gilbert, PMS, Leads GPs and Lead nurse, Marina ad Liz	People and Culture, Improvement Advisors, Finance, QI, QA, Informatics and Corporate Performance	12 months
7	PCN prospectus, an offer to PCNs external facing	• Development and ongoing update of a prospectus of offers to PCNs on how best we can be helpful to them in their development	Marina/Charles	All Directorate and Corporate	6 months

East London
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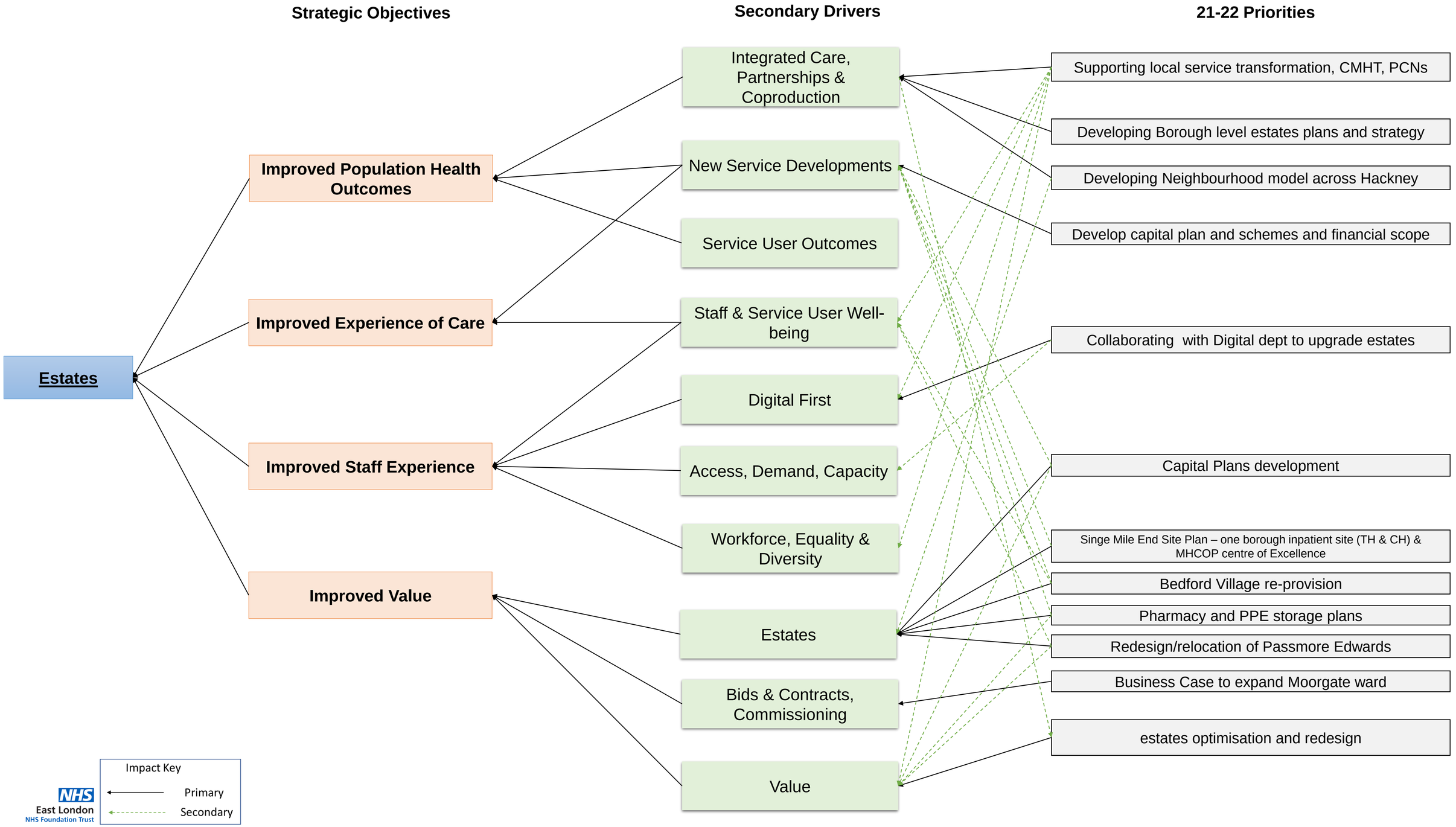
Corporate Plans for 2021-22


Strategic Objectives
Secondary Drivers
21-22 Priorities
Estates
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Supporting local service transformation, CMHT, PCNs
Developing Borough level estates plans and strategy
Developing Neighbourhood model across Hackney
Develop capital plan and schemes and financial scope
Collaborating with Digital dept to upgrade estates
Capital Plans development
Singe Mile End Site Plan – one borough inpatient site (TH & CH) & MHCOP centre of Excellence
Bedford Village re-provision
Pharmacy and PPE storage plans
Redesign/relocation of Passmore Edwards
Business Case to expand Moorgate ward
estates optimisation and redesign
Impact Key
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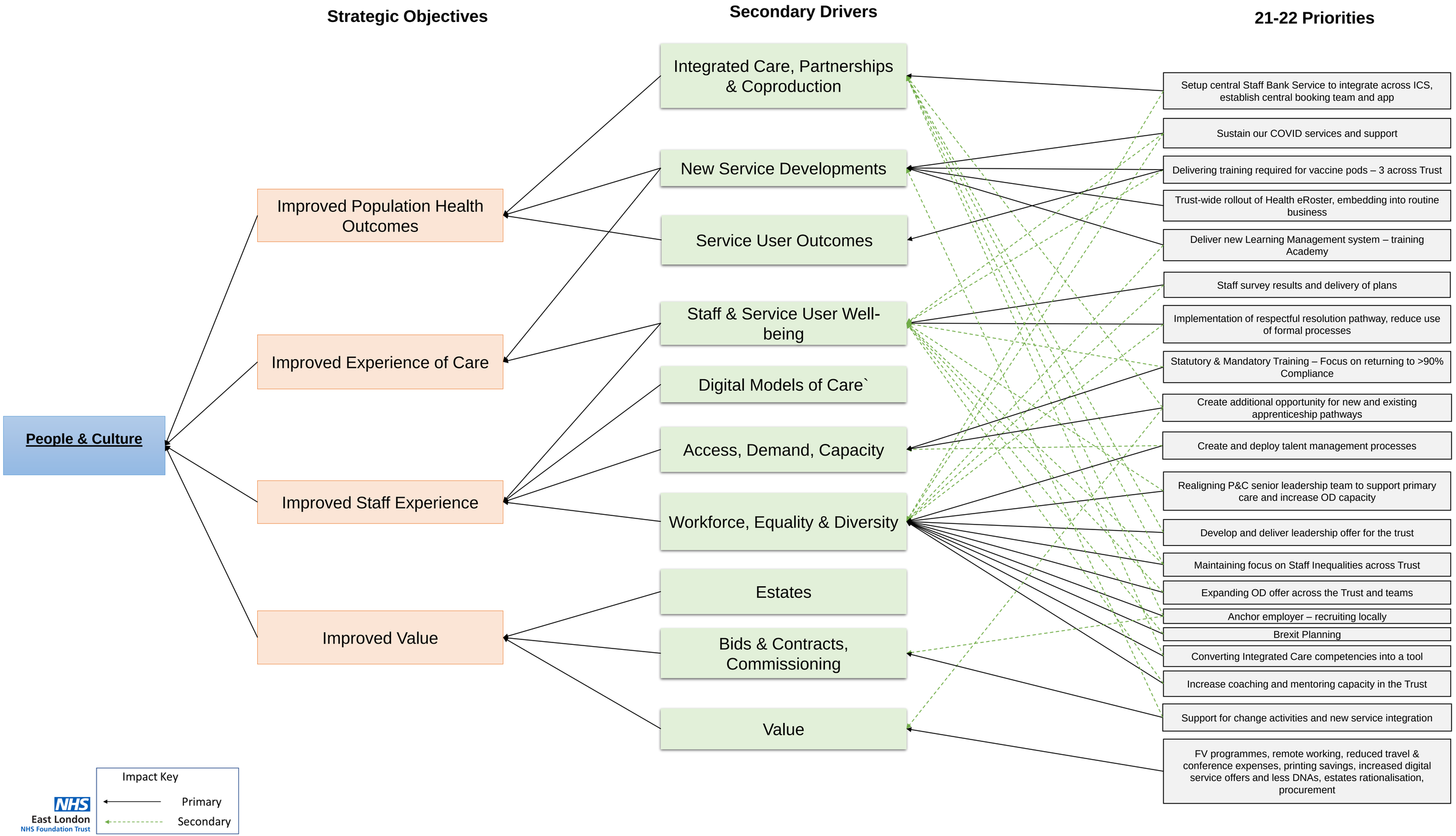
No.	Top Key Priority Areas (Estates)	Milestones	Local Leads	What Cooperate /DMT support is required	Expected Delivery Dates
1	Capital Plans Development	Clarify successful bids and investment envelope for next year - Agree priority projects and schemes - Sign off and build capital plan	Borough Directors	Finance, Executive Decision	12 months
2	Bedford Health Village Re-provision	Scheme currently in progress	Eugene Jones/Richard Fradgely	Finance, Executive Decision	36 months
3	Moving out of Passmore Edwards to First Avenue	Scheme Currently working progress	Bailey Mitchell	Finance, Executive Decision	18 months
4	Single Mile End Site – One Borough inpatient site (Hackney and Tower Hamlet's) MHCOP centre of Excellence	Scheme yet to be confirmed – transformation project leads currently scoping	Richard Fradgely	Finance, Executive Decision	5 years
5	Pharmacy and PPE Storage Space	• Develop clear estate strategy for one storage solution, or multiple sites to manage increased demand • Looking for premises • Commercial Appraisal of options, Financial viability on selling medication to other providers	Jenny Melville /Amy King	Finance, Pharmacy, CDD, Executives Decision, Digital, Corporate Nursing	3- 6 month (decision on approach)
6	Business case to expand single person facility in Moorgate Ward	Increase ward to 4-5 medium secure wards Agree Business Case	Phil Baker / Sarah Barnett	CDD, Finance, Lawford, Tony, Estates	12 months
7	Local Service Transformation Work	Various service level initiatives under way such as Community Transformation, Service redesign	Borough Directors	DMT's	12 months
8	Developing Borough Level Estate Strategies	Reappraisal of Estates utilisation Working with Digital and DMTs to appraise future working practices and estates needs	Borough Directors/ John Hill/ Philippa Graves	Borough Directors, Clinical Directors, Digital, Finance , Estates	12 months


Strategic Objectives
Secondary Drivers
21-22 Priorities
People & Culture
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital Models of Care`
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Setup central Staff Bank Service to integrate across ICS, establish central booking team and app
Sustain our COVID services and support
Delivering training required for vaccine pods – 3 across Trust
Trust-wide rollout of Health eRoster, embedding into routine business
Deliver new Learning Management system – training Academy
Staff survey results and delivery of plans
Implementation of respectful resolution pathway, reduce use of formal processes
Statutory & Mandatory Training – Focus on returning to >90% Compliance
Create additional opportunity for new and existing apprenticeship pathways
Create and deploy talent management processes
Realigning P&C senior leadership team to support primary care and increase OD capacity
Develop and deliver leadership offer for the trust
Maintaining focus on Staff Inequalities across Trust
Expanding OD offer across the Trust and teams
Anchor employer – recruiting locally
Brexit Planning
Converting Integrated Care competencies into a tool
Increase coaching and mentoring capacity in the Trust
Support for change activities and new service integration
FV programmes, remote working, reduced travel & conference expenses, printing savings, increased digital service offers and less DNAs, estates rationalisation, procurement
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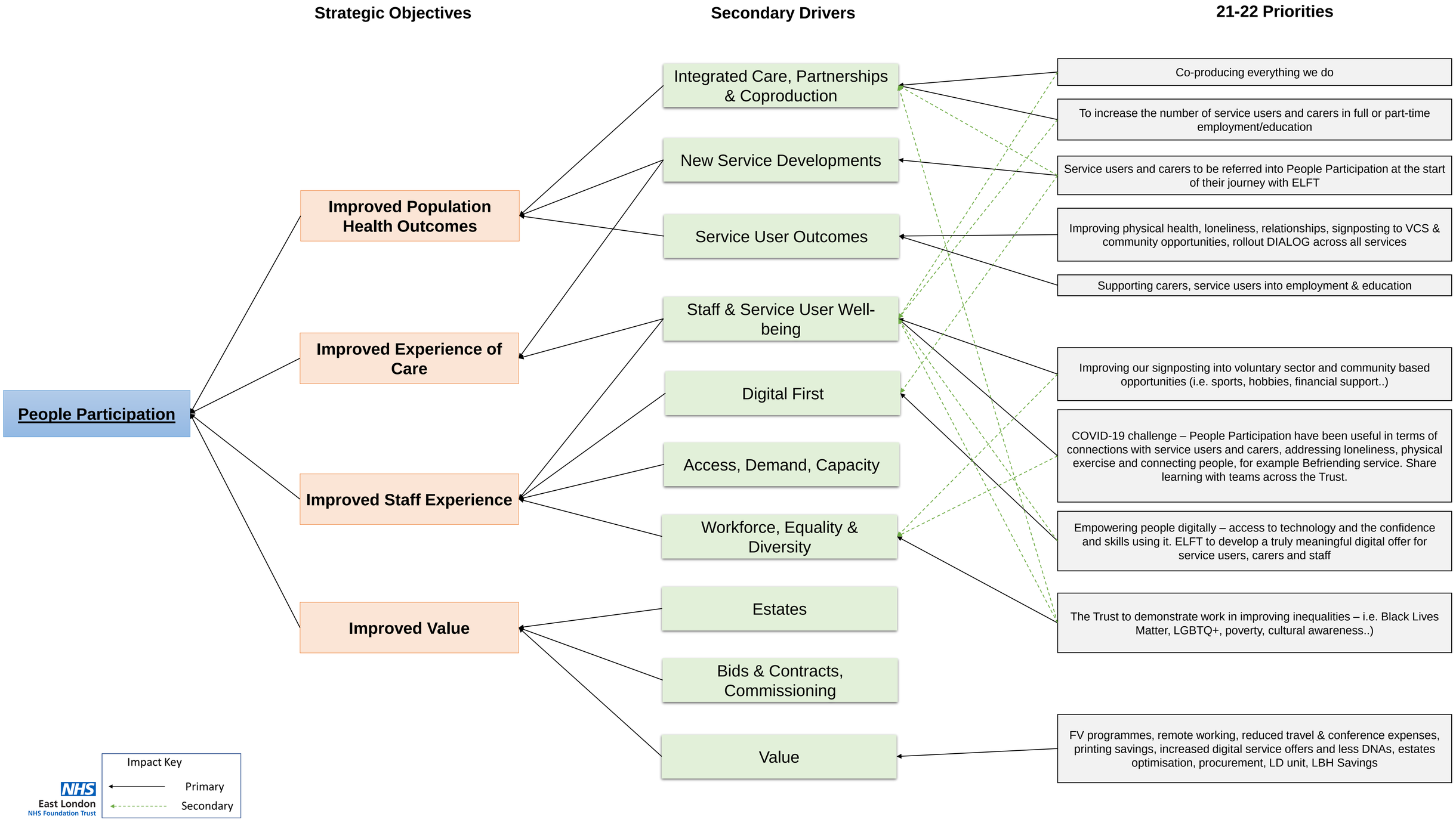
People & Culture

NHS East London NHS Foundation Trust

No.	Top Key Priority Areas (P&C)	Milestones	Local Leads	What Directorate support is required	Expected Delivery Dates
1	Trustwide rollout of Health eRoster	Getting all teams onto eRoster and optimising the platform and embedding into business as usual Training and support offered to DMTs Establish real time reporting for sickness /absence	Archana Saanap	All DMTs to adopt new system Informatics	18 months
2	Setup central Staff Bank Service to integrate across ICS	Establish central booking team, and app to improve service delivery, train staff to use new processes and embed practices	Irfaan Ibne	All DMTs to adopt new system	6 months
3	Deliver training required for vaccine pods - 3 across the Trust	Recruit and train staff , establish pods and advertise for vaccinations Commence delivery vaccinations for the public	Irfaan Ibne	Corporate Nursing	3 months
4	Delivering New Learning Management system – training Academy	Procure new system, develop content and embed across DMTs One stop shop for all training needs established	Steve Palmer	All DMTs to develop content for local needs	12 month
5	Realigning P&C senior leadership team to support primary care and increase OD capacity	Review completed to align to primary care needs	Tanya	Primary Care Directorate	3 month
6	Implementation of respectful resolution pathway	Reduced formal processes for reconciliation Increased informal resolutions Communication of service to DMTs	Corinne Cunningham	All DMTs to adopt new system	6 month
7	Maintain focus on Staff Inequalities across the Trust	Delivery of the people plan, debias recruitment Maintain the focus on Race & Privilege across the Trust Supporting the work of all staff networks	Tanya Carter	All DMT to feedback on progress	12 month
8	Staff Survey Results and plans to be mobilised	Analyse new staff survey results, distribute to teams to develop action plans and monitor progress	Jill Dabbs	All DMTs	6 months
9	Brexit Planning	Ensure are Eu workforce have a settled status, ensure all new recruitment is compliant with immigration rules	Isabella Larkin		6month
10	Anchor employer – recruiting locally	Shifting recruitment strategy to recruit locally and reduce unemployment in London Building local partnerships and talent pool Deploy values-based recruitment policy Work experience opportunities	Jemma Ball	DMTs to adopt new values-based recruitment policy	12 month

No.	Top Key Priority Areas (P&C)	Milestones	Local Leads	What Directorate support is required	Expected Delivery Dates
11	Sustain our COVID services and support	Maintaining staff wellbeing, testing and support across the Trust, learning from what's worked well from pandemic	Bernadette Fitzharris		6 months
12	Develop and Deliver Leadership offer for the Trust	Resource agreement from exec Delivery of short-term offer Scoping/agreement of long-term offer	Donna Willis		12 months
13	Expanding OD Offer to all teams in the Trust	As resources allow, work with localities to support team behaviours and performance	Donna Willis		12 months
14	Converting Integrated Care Competencies into a tool	Subject to funding, test the competencies with a wider population Develop an online platform to enable utility at individual, team, organisation and system level.	Donna Willis		12 months
15	Increase coaching and mentoring capacity in the Trust	To establish further development of coaching skills within the Trust To fully launch the coaching and mentoring platform	Olga Osokina		6 months
16	Statutory & Mandatory Training – Focus on returning to >90% compliance	Create a trust wide and locality specific plan to focus on priorities Deliver programme of training to achieve target	Princess Kabba	All DMTs	8 Months
17	Create additional opportunity for new and existing apprenticeship pathways	Provide support to professional leads and functional teams to increase the accessibility and availability of apprenticeships	Sarah Canning	All DMTs, Professional Leads	12 Months
18	Support for Change Activities and new service integration	Provide support to DMTs and services when making organisational changes and creating new services Work to better define the process for new services to ensure P&C engaged before process finalisation	Tanya Carter / Shefa Begom	All DMTs, BDU	12 Months
19	Create and deploy talent management processes	Create talent definition and mapping processes that highlight and support the development and progression of key talent	Steve Palmer	All DMTs	12 Months


Strategic Objectives
Secondary Drivers
21-22 Priorities
People Participation
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Co-producing everything we do
To increase the number of service users and carers in full or part-time employment/education
Service users and carers to be referred into People Participation at the start of their journey with ELFT
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services
Supporting carers, service users into employment & education
Improving our signposting into voluntary sector and community based opportunities (i.e. sports, hobbies, financial support..)
COVID-19 challenge – People Participation have been useful in terms of connections with service users and carers, addressing loneliness, physical exercise and connecting people, for example Befriending service. Share learning with teams across the Trust.
Empowering people digitally – access to technology and the confidence and skills using it. ELFT to develop a truly meaningful digital offer for service users, carers and staff
The Trust to demonstrate work in improving inequalities – i.e. Black Lives Matter, LGBTQ+, poverty, cultural awareness..)
FV programmes, remote working, reduced travel & conference expenses, printing savings, increased digital service offers and less DNAs, estates optimisation, procurement, LD unit, LBH Savings
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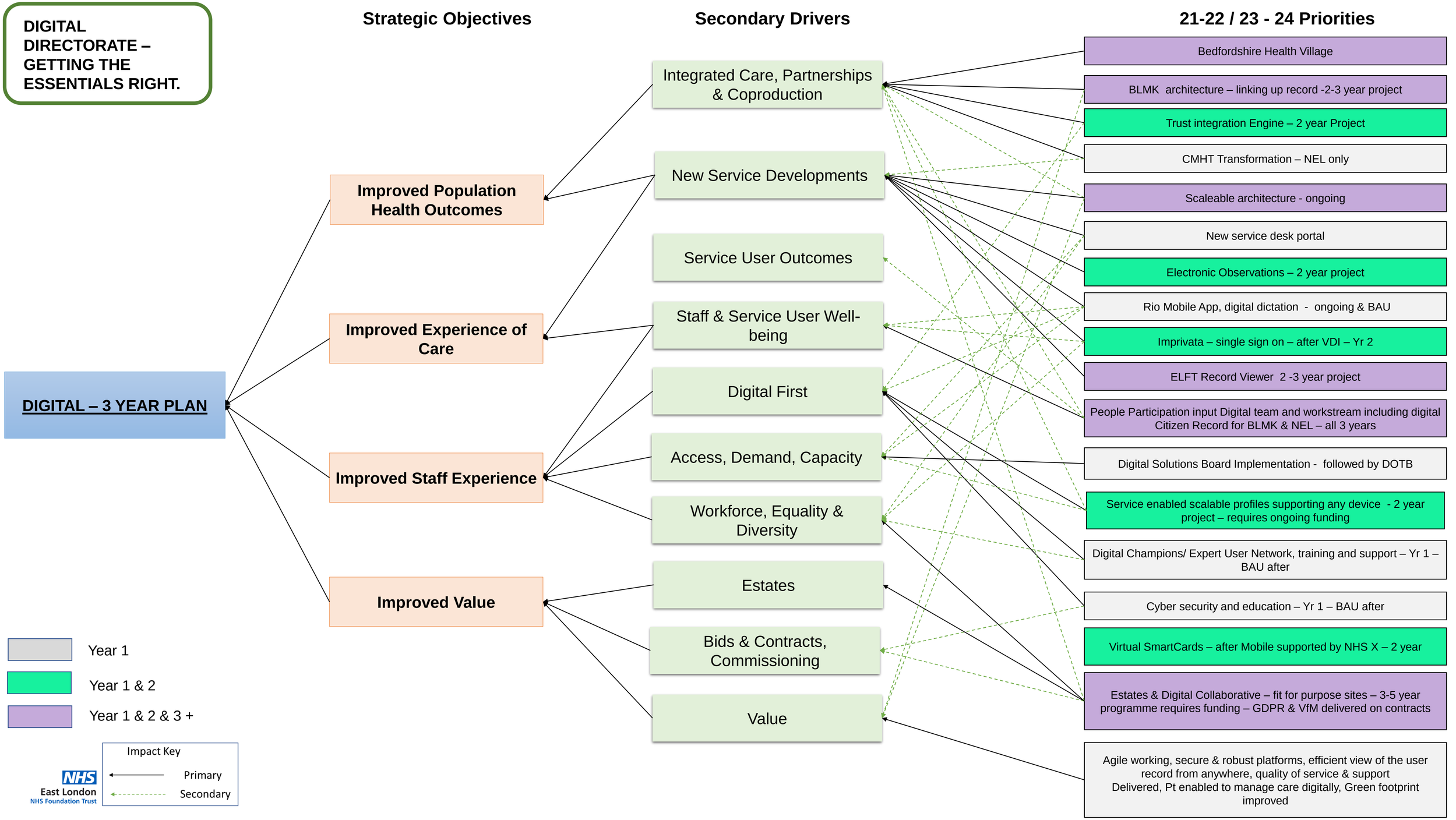
People Participation

No.	Top Key Priority Areas	Milestones	Local Leads	What Directorate support is required	Expected Delivery Dates
1	ELFT to support the expansion and development of education and training led by people with lived experience – education of staff and of service users.				
2	To increase the number of opportunities for service users and carers to be in full and part time employment/education.				
3	Service users and carers to be referred into People Participation at the start of their journey with ELFT				
4	Empowering people digitally – access to technology and the confidence and skills using it. ELFT to develop a truly meaningful digital offer for service users, carers and staff.				
5	Co-production in everything we do.				
6	Improving our signposting into the voluntary sector and community based opportunities (i.e. sports, hobbies, financial support…)				
7	The Trust to demonstrate work in improving inequalities – i.e. Black lives matter, LGBTQ+, poverty, cultural awareness…				
8	Covid-19 challenge – People Participation have been useful in terms of connections with service users and carers, addressing loneliness, physical exercise and connecting people, for example Befriending service. Share learning with teams across the Trust.				

DIGITAL DIRECTORATE – GETTING THE ESSENTIALS RIGHT.



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Digital – 3+ Year Plan

NHS East London NHS Foundation Trust

No.	Top Key Priority Areas (Newham)	Milestones (Definition of Done)	Local Leads	What Cooperate support is required	Expected Delivery Dates	Year 1-2	Year 3-5	Green Agenda/ Efficiency	Funded
1	Scalable Architecture	All aspects of ELFT architecture achieve Kite Mark, are resilient, sized correctly and resilient.	CTO/CDO	Funding – linked to Strategy & some DA funding – IaaS, DaaS, Networks, Data Links	1-2	√	√	√	Part
2	Trust Integration Engine	All key systems integrated so data entered only once.	CTO/CDO	Funding – linked to Strategy – year 1 DA programme	18 months starts in June 21 – Digital Aspirant.	√	**BAU**	√	Year 1 only
3	Citrix Cloud deployable	All devices supported by VDI – no delay in spinning up new users.	CTO	Funding – linked to business case – Pilot funded by DA	1 – 2 years. Dependent on deployment methodology.	√	**Business Case**	√	Only Pilot DA
4	Service enabled scalable profiles supporting any device	Key profile & apps defined by business to support new starter process.	CTO/CDO	As above. Directorate level and transparent costing.	As above.	√	√	√	Only Pilot DA
5	Cyber Security & Education	CTO in place CISO in place NHS X compliant	CDO/CTO/ CISO	Board support & Directorate engagement – outlined in the Strategy	1 year	√	√	√	Year 1 Only – in the Strategy
6	New Service Desk portal	Ability to reset passwords on line	SDM/CPM	New tools to support self-service application	1 – 2 years - DAF	√	√	√	√
7	Imprivata – single sign on – follows VDI and supports virtual smartcards	Enabled login to support virtualised applications. NHS X dependent	SDM/IDM	New user interface – supports virtual smart card	8 months – 2 years – NHS X dependent	√	√	√	Business case needed
8	ELFT Record – requires 2/3/4/5/7/8	One pane of glass to access the key record entries for user ease.	IDM/CTO/CCDO/ CDO	User input for configuration	3 – 5 years for all services.	√	√	√	Funding needed
9	- Dictation -RIO mobile	Ongoing DMT based projects – review of Definition of Done occurring.	CPM/CCIO	User input for configuration	DMT specific – funding expires this year.	√	√	√	Specific project stood up for this.
10	PP Input – getting the most out of Digital Citizen Record	3 year programme – end point is citizens in NEL & BLMK being able to manage their own record.	IDM/SDM/PMO	User & DMT input & Patient Participation - Linked to Patient held record in BLMK & NEL. Must Do. DA starts it only.	2-3 years – but starting in January.	√	√	√	Needs on going funding

Digital : 3+ Year Plan

NHS East London NHS Foundation Trust

No.	Top Key Priority Areas (Newham)	Milestones (Definition of Done)	Local Leads	What Cooperate support is required	Expected Delivery Dates	Year 1-2	Year 3-5	Green Agenda/Efficiency	Funded
11	Virtual Smart Cards – NHS D approved platform – Priority 3 & 7 must be delivered first.	All compatible devices will support virtualised smart cards.	SDM/IDM/CTO	Virtualise smart card function – following 3 & 7.	Up to 3 years + - NHS X dependent.	√ - Yr. 2	√	√	Business case needed
12	Electronic observations rollout across the Trust	All pt obs are collected into the RIO platform for in patient areas.	TB/CCDO/IDM/SDM/CTO/COO/DoN	To improve safety and quality across the Trust	18 months for all services – 6 months plan & 12months roll out.	Start roll out Oct 2021 √	√	√	Eobs only funded by DA- finance needs to be profiled.
13	Establish and support Solutions Board approach to all Digital Projects to ensure fair and equitable decisions, funding, resource, and prioritisation to digital programmes.	Proper oversight and inclusive decision making and prioritising the limited digital resources.	COO/CDO/CTO/Business Leads & CTO	Outline plans and paperwork being incepted to ensure robust approach to Digital projects	1 year to make fully established	√	√	√	No funding required
14	ICS architecture – linking up record	ELFT staff can see record from all providers in NEL or BLMK	CDO/CTO/IDM	Time to build required architecture & funds – a must do – not optional.	Over the next 5 years. NEL & BLMK	√	√	√	Only first part funded – essential for ICS.
15	Estates & Digital Collaborative – Fit fir Purpose	Every ELFT owned site has a Digital Kite mark for quality and a standard for estates that meets needs.	CTO/IDM/AD.Est.	Full site survey & assessment. Funding to address shortfalls. New Ways of working described. Must Do.	5 years – 127 sites to address. Priority 1 sites within 12 months from decision.	√	√	√	Requires full funding
16	Digital Champions / Expert User Networks - Training and support - PP & Exclusion	All DMT's have an identified Champion & standardised usage across Trust.	CCDIO/PP lead	All DMTs have Digital Champions.		√	√	√	Funding will be needed.
17	Community Service Transformation/ Community Mental health Transformation	Project still being defined – will update when known.	SDM/PM/IDM/CCDO	Pilot & rollout of new platforms & forms for Community Transformation	NEL only funded to £424K – BLMK not funded. Separately funded project.	√	√	√	NEL funded – Year one only. BLMK funding needed.
19	Bedfordshire Health Village	New SOTA facility stood up fully digitally enabled.	CTO/IDM/CCDO	Planning & Delivery of a Digital First health care facility for ELFT in BLMK	Will need a PM & resources going forward to delivery the plan & implementation	√	√	√	Funded by Capital but needs business case.

ELFT Digital Strategy – Deployment Plan 2020/21/22/23/24 – Page One

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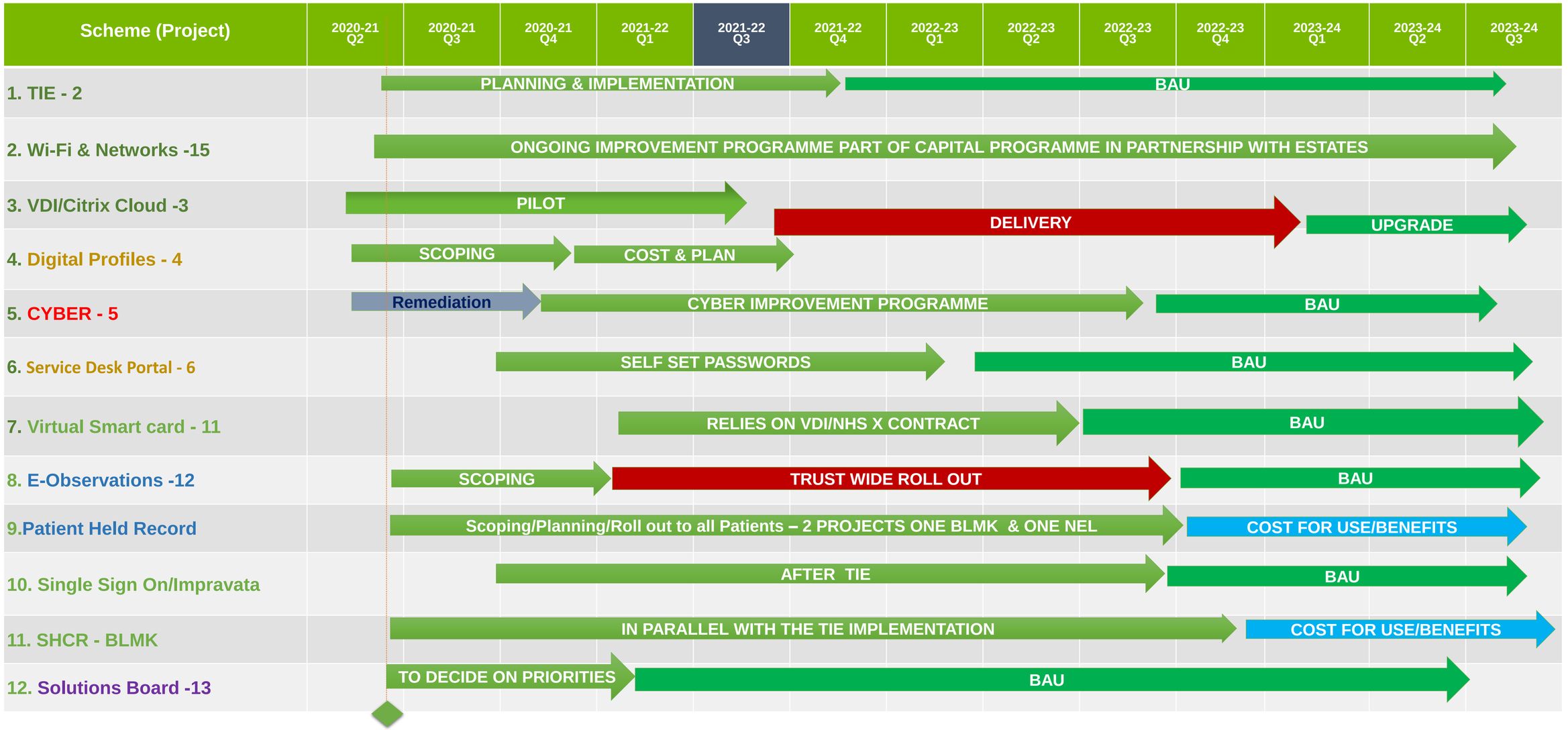

ELFT Digital Strategy –Deployment Plan 2020/21/22/23/24 – Page Two

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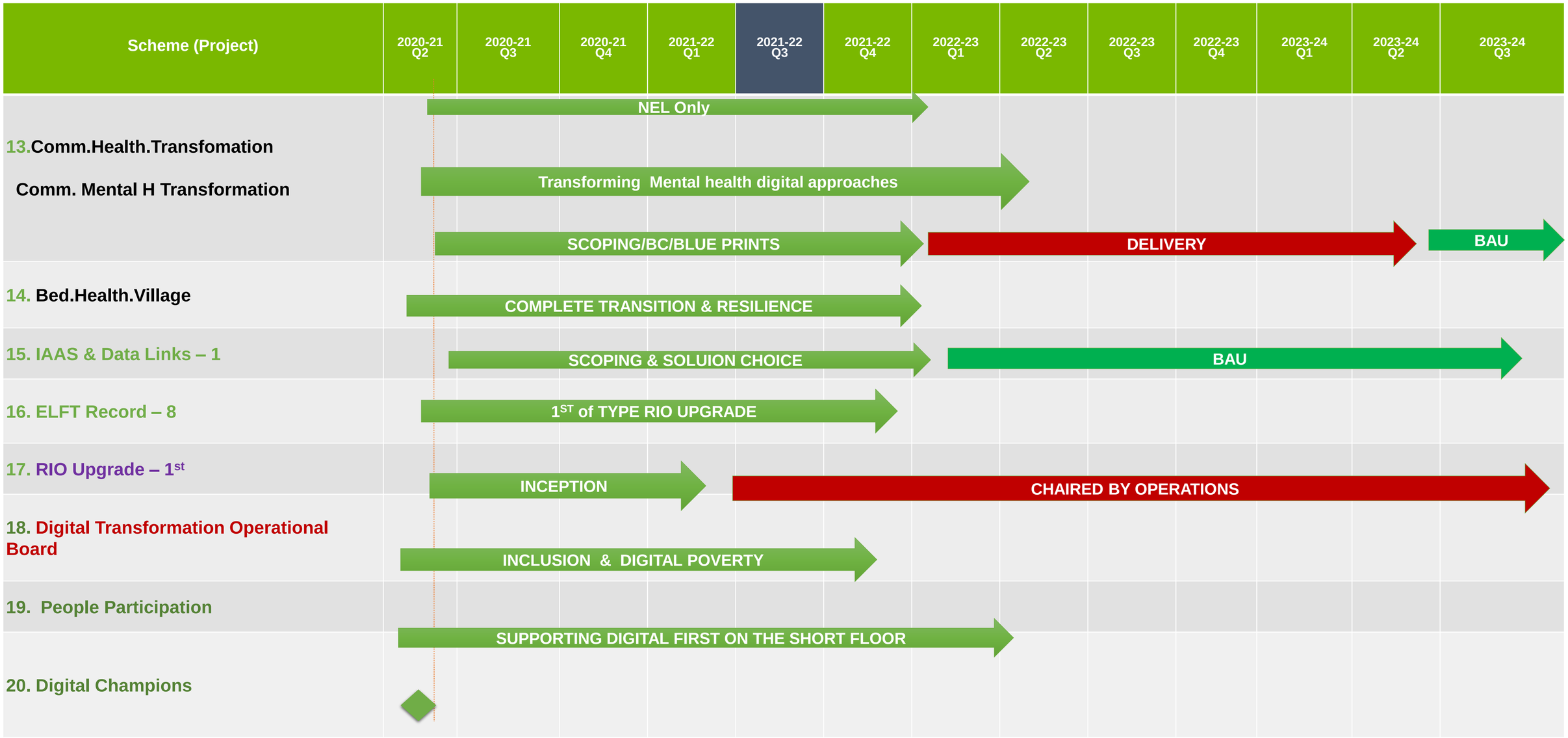

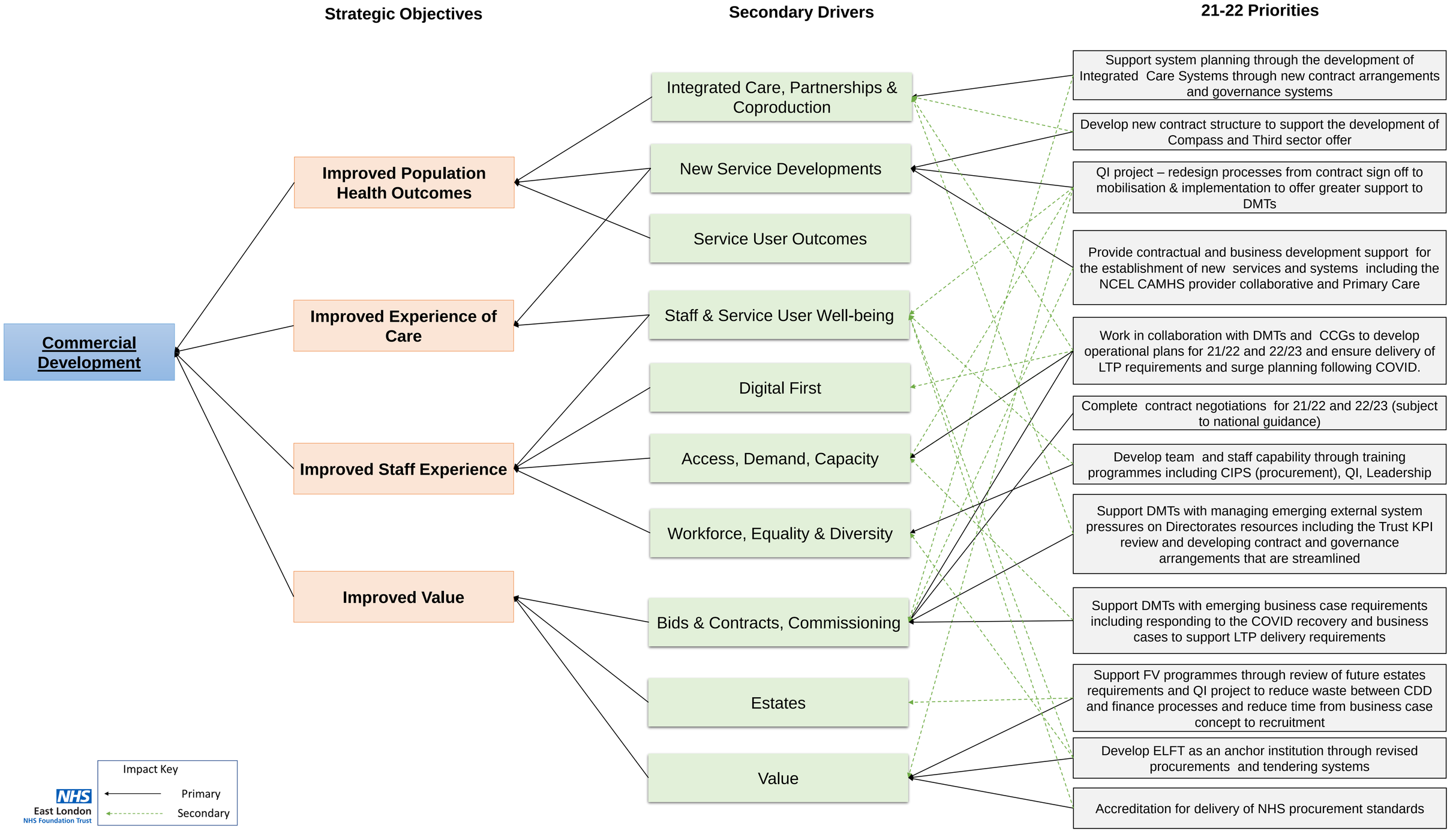
Strategic Objectives
Secondary Drivers
21-22 Priorities
Commercial Development
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Bids & Contracts, Commissioning
Estates
Value
Support system planning through the development of Integrated Care Systems through new contract arrangements and governance systems
Develop new contract structure to support the development of Compass and Third sector offer
QI project – redesign processes from contract sign off to mobilisation & implementation to offer greater support to DMTs
Provide contractual and business development support for the establishment of new services and systems including the NCEL CAMHS provider collaborative and Primary Care
Work in collaboration with DMTs and CCGs to develop operational plans for 21/22 and 22/23 and ensure delivery of LTP requirements and surge planning following COVID.
Complete contract negotiations for 21/22 and 22/23 (subject to national guidance)
Develop team and staff capability through training programmes including CIPS (procurement), QI, Leadership
Support DMTs with managing emerging external system pressures on Directorates resources including the Trust KPI review and developing contract and governance arrangements that are streamlined
Support DMTs with emerging business case requirements including responding to the COVID recovery and business cases to support LTP delivery requirements
Support FV programmes through review of future estates requirements and QI project to reduce waste between CDD and finance processes and reduce time from business case concept to recruitment
Develop ELFT as an anchor institution through revised procurements and tendering systems
Accreditation for delivery of NHS procurement standards
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Commercial Development

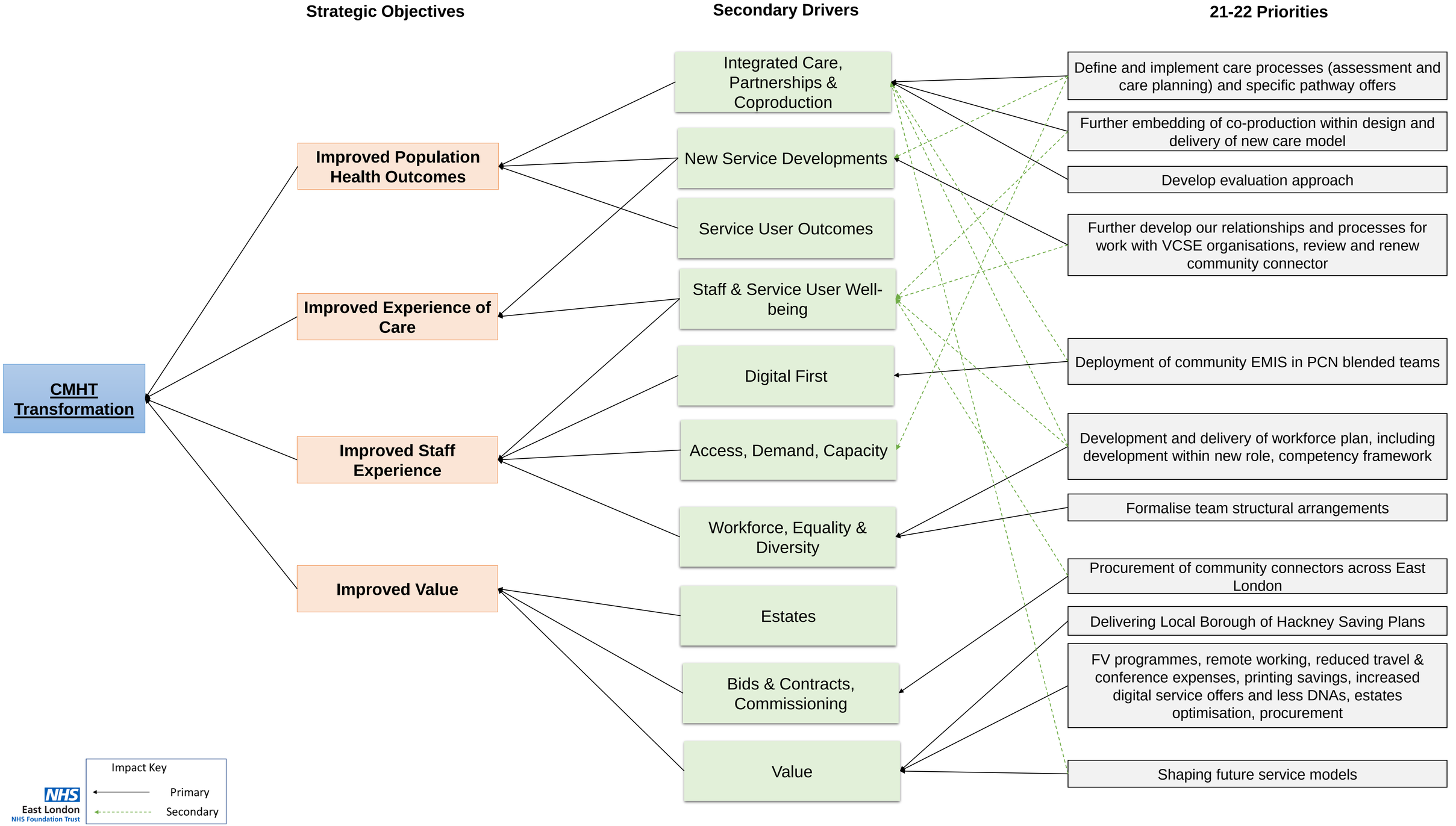
NHS East London

No.	Top Key Priority Areas (CDD)	Milestones	Local Leads	What Cooperate/DMT support is required	Expected Delivery Dates
1	Support system planning through the development of Integrated Care Systems through new contract arrangements and governance systems	Subject to national guidance on the new operating model CDD will be required to support the development of new contractual arrangements and governance systems .	Mohit Venkataram/Richard Fradgley /Robin Campbell	DMTs/Finance/Informatics/Performance/Estates/ Integrated Care Systems stakeholders (joint working)	Ongoing throughout 2021/22
2	Develop new contract structure to support the development of Compass and Third sector offer	Set up new sub contracting process for VCSE activity via Compass (June 2021)	Mohit Venkataram/Robin Campbell	DMTs/Finance/Compass	3 months (Completed by June 2021)
3	QI project – redesign processes from business case concept to contract sign off to mobilisation & implementation to offer greater support to DMTs	Establish Qi Group (April 2021) Agree scope of QI project, complete driver diagram and submit to Qi forum for project initiation (May 2021) Undertake detailed process mapping (June 2021) Begin PDSA cycle for core project deliverables (July 2021) Complete implementation and review (Dec 2021)	Robin Campbell	Finance / CDD team / IMT	9 months (Dec 2021)
4	Provide contractual and business development support for the establishment of new services and systems including the NCEL CAMHS provider collaborative and Primary Care	Provide ongoing support including the establishment of the PCN prospectus (Initial version by April 2021 and future versions throughout 2021 as the ELFT offer develops) Support 21/22 NCEL contracting and support development of Phase 2 collaborative (subject to national guidance)	Mohit Venkataram/Robin Campbell	Primary Care DMT / NCEL CAMHS DMT / Finance/ Estates / Qi / HR / informatics /	Ongoing in 21/22
5	Negotiation of 21/22 and 22/23 contracts (subject to yet to be published NHS operating framework for next year). This includes Mental Health Investment (22/23 investment brought forward to 21/22) standards and out of hospital community services.	Review existing contract indicators (end of Jan 2021). Setup planning meetings with CCGs (April 2021) Agree priority investment and priority areas (April 2021) Agree Contracts subject to national operating framework (June 2021) Process to be repeated December next year for 22/23 planning round	Mohit Venkataram/Richard Fradgley /Robin Campbell	DMTs/Finance/Informatics/Performance/Estates/ Integrated Care Systems stakeholders (joint working)	1 month (Completed by April 2021)
6	Develop team and staff capability through training programmes including CIPS (procurement), QI, Leadership	Ensure staff from each sub team are enrolled on Qi training programme (throughout 21/22) Ensure all procurement staff are CIPS trained or equivalent throughout 21/22) Support staff to access leadership programmes inc NHSE	Robin Campbell / Steve Newton	CDD team	Ongoing throughout 2021/22
7	Support DMTs with managing emerging external system pressures on Directorates resources including the Trust KPI review and developing contract and governance arrangements that are streamlined	Review existing contract indicators and agree with CCGs (end of June 2021) Agree future contract management architecture (subject t o national guidance)	Mohit Venkataram/Richard Fradgley /Robin Campbell	DMTs/Finance/Informatics/Performance/Estates/ Integrated Care Systems stakeholders (joint working)	3 months (Completed by June 2021)
8	DMT Business Cases and bids	Responded to Long Term Plan and COVID recovery / surge business case requirements and specific service developments across Mental Health, Community Health and Primary care services.	Robin Campbell/Mohit Venkataram	DMTs/Finance/Informatics/Performance/Estates/Integrated Care Systems stakeholders (joint working)	12 months

Commercial Development

NHS East London NHS Foundation Trust

No.	Top Key Priority Areas (CDD)	Milestones	Local Leads	What Cooperate/DMT support is required	Expected Delivery Dates
9	Support FV programmes through the procurement programme and the Business cases in MHIS	Procurement programme throughout he year as per plan Delivery of MHIS ad business cases in line with operational planning timescales	Robin Campbell / Steve Newton	CDD team / Financial Viability / Finance / Estates / IMT	Ongoing throughout 2021/22
10	ELFT as an Anchor	**Agree a set of metrics and scoring methodology [across addressable categories]:** Key areas: Employment and Training, Equality and Diversity, and Sustainability. **Appoint a Social value System**: To have interoperability to etendering system with the option to support the evaluation and ongoing contract management. **Develop and test documentation:** Primarily in tenders and mini competitions for individual Trusts and collectively. **Develop a standard set of KPI's:** To thread the metrics into contract management	Steve Newton/Mohit Venkataram/Richard Fradgley	Integrated Care Systems in particular NEL STP stakeholders	3 months (completed for June)
11	NHS Procurement Standards https://www.gov.uk/government/publications/nhs-procurement-standards	**Run diagnostic tool to self test:** Link with Finance for data. **Apply for accreditation**: Assessor to assess ELFT.	Steve Newton/Mohit Venkataram	Integrated Care Systems in particular NEL STP stakeholders	2 months – Accreditation by May 2021


Strategic Objectives
Secondary Drivers
21-22 Priorities
CMHT Transformation
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Define and implement care processes (assessment and care planning) and specific pathway offers
Further embedding of co-production within design and delivery of new care model
Develop evaluation approach
Further develop our relationships and processes for work with VCSE organisations, review and renew community connector
Deployment of community EMIS in PCN blended teams
Development and delivery of workforce plan, including development within new role, competency framework
Formalise team structural arrangements
Procurement of community connectors across East London
Delivering Local Borough of Hackney Saving Plans
FV programmes, remote working, reduced travel & conference expenses, printing savings, increased digital service offers and less DNAs, estates optimisation, procurement
Shaping future service models
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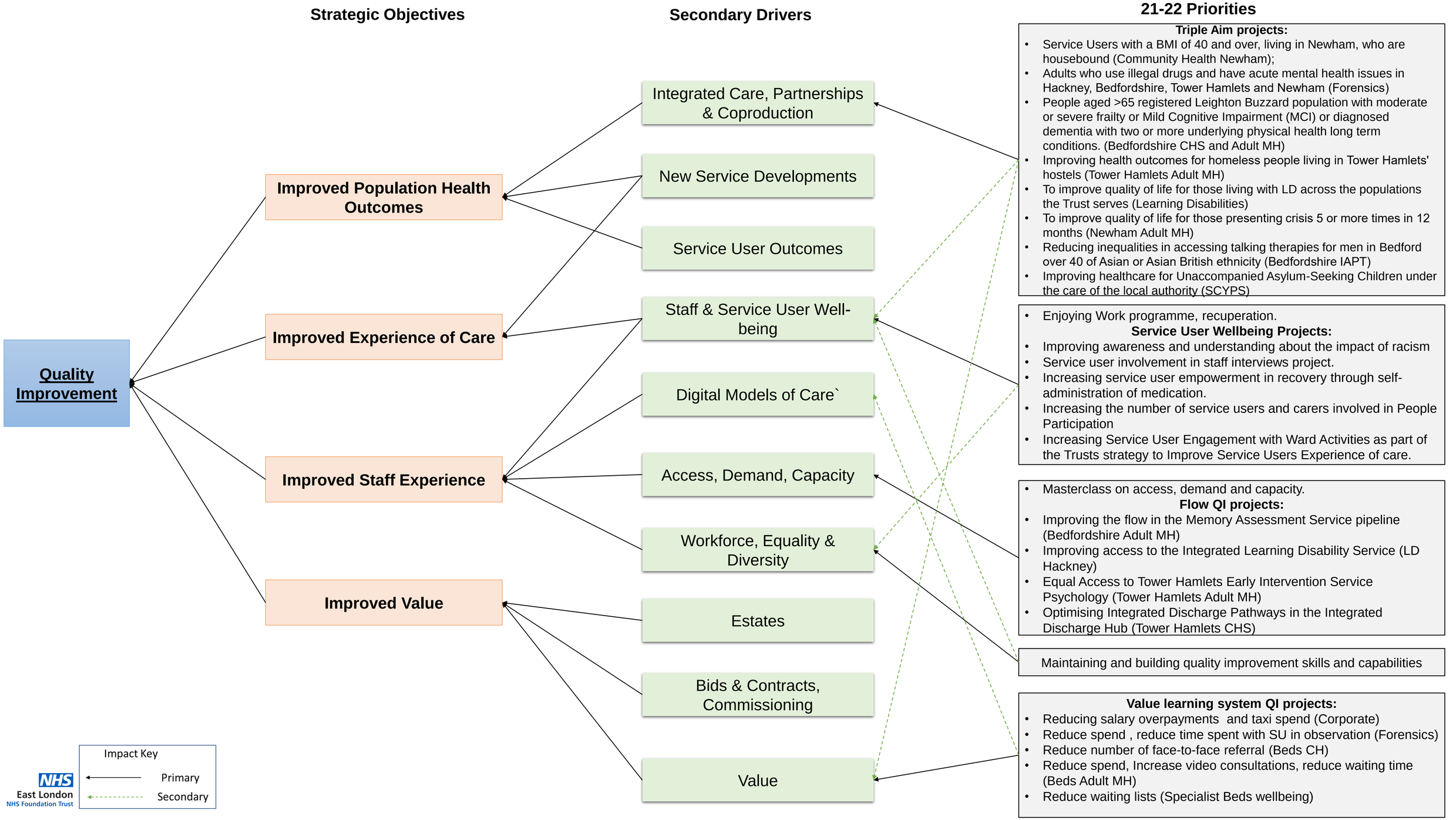
No.	Top Key Priority Areas (MH Transformation)	Milestones	Local Leads	What Corporate support is required	Expected Delivery Dates
1	Deployment of Community EMIS in PCN blended MH teams	Safety testing (?3 months) Deployment for testing in Newham (?3 months) Wider roll-out (?6 months)	Peter Macrae Warren Reynolds *TBC	Infrastructure funded through programme slippage, Digital, informatics	TBC
2	Define and implement care processes (assessment and care planning) and specific pathway offers	Workshops and learning sets (3 months) Pulling together in programme library (3 months)	Various Jamie Stafford	N/A	May 2021
3	Development and delivery of workforce plan, including development within new role	Developing competency framework for CMHT Transformation Workforce	Lucy Ingle	TBC	6 months
4	Further embedding of co-production within design and delivery of new care model	Increased focus on participation (throughout 6 months)	Becky Derham and People Participation Workers	People Participation	Continuous
5	Formalise any structural team changes	Design of formal approach (3 months) Deliver likely to be May 2021	Lucy Ingle and P&C BPs	P&C Business Partners (Lucy to coordinate)	June 2021
6	Develop Evaluation approach	Define parameters of Evaluation across Consortium of EI sites (3 months) Scope and procure partner for external impact evaluation (3 months)	Jennie Parker Jamie Stafford	Procurement support to identify impact evaluation partner	June 2021
7	Further develop our relationships and processes for work with VCSE organisations	Review and extension of Community Connector contracts (3 months) Develop mechanisms to support future work Procurement of Community Connectors across East London	Justin Phillips Compass	BDU support, Procurement	August 2021


Strategic Objectives
Secondary Drivers
21-22 Priorities
Quality Improvement
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital Models of Care`
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Triple Aim projects:
• Service Users with a BMI of 40 and over, living in Newham, who are housebound (Community Health Newham);
• Adults who use illegal drugs and have acute mental health issues in Hackney, Bedfordshire, Tower Hamlets and Newham (Forensics)
• People aged >65 registered Leighton Buzzard population with moderate or severe frailty or Mild Cognitive Impairment (MCI) or diagnosed dementia with two or more underlying physical health long term conditions. (Bedfordshire CHS and Adult MH)
• Improving health outcomes for homeless people living in Tower Hamlets' hostels (Tower Hamlets Adult MH)
• To improve quality of life for those living with LD across the populations the Trust serves (Learning Disabilities)
• To improve quality of life for those presenting crisis 5 or more times in 12 months (Newham Adult MH)
• Reducing inequalities in accessing talking therapies for men in Bedford over 40 of Asian or Asian British ethnicity (Bedfordshire IAPT)
• Improving healthcare for Unaccompanied Asylum-Seeking Children under the care of the local authority (SCYPS)
• Enjoying Work programme, recuperation.
Service User Wellbeing Projects:
• Improving awareness and understanding about the impact of racism
• Service user involvement in staff interviews project.
• Increasing service user empowerment in recovery through self-administration of medication.
• Increasing the number of service users and carers involved in People Participation
• Increasing Service User Engagement with Ward Activities as part of the Trusts strategy to Improve Service Users Experience of care.
• Masterclass on access, demand and capacity.
Flow QI projects:
• Improving the flow in the Memory Assessment Service pipeline (Bedfordshire Adult MH)
• Improving access to the Integrated Learning Disability Service (LD Hackney)
• Equal Access to Tower Hamlets Early Intervention Service Psychology (Tower Hamlets Adult MH)
• Optimising Integrated Discharge Pathways in the Integrated Discharge Hub (Tower Hamlets CHS)
Maintaining and building quality improvement skills and capabilities
Value learning system QI projects:
• Reducing salary overpayments and taxi spend (Corporate)
• Reduce spend , reduce time spent with SU in observation (Forensics)
• Reduce number of face-to-face referral (Beds CH)
• Reduce spend, Increase video consultations, reduce waiting time (Beds Adult MH)
• Reduce waiting lists (Specialist Beds wellbeing)
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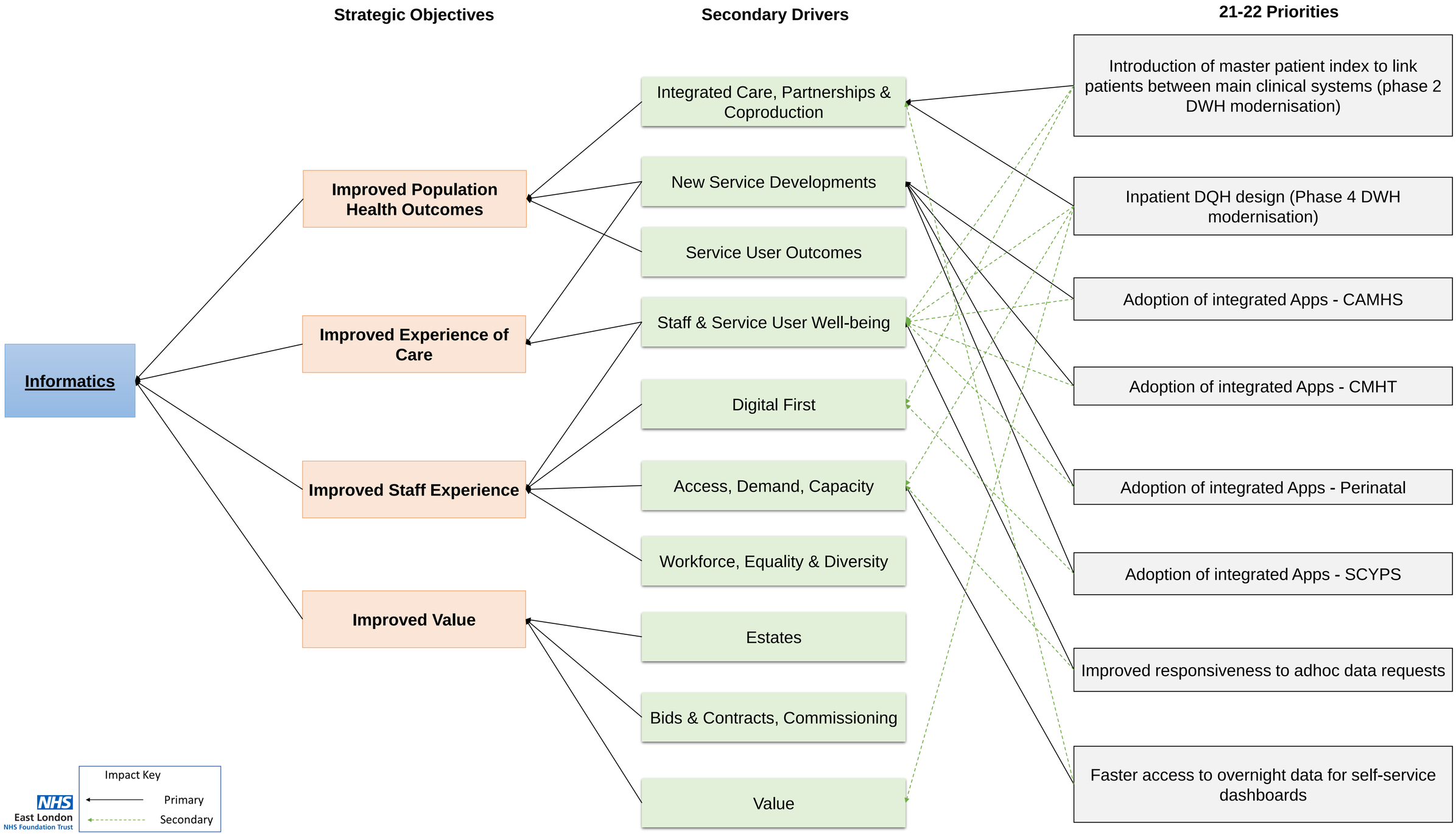
No.	Top Key Priority Areas (QI)	Milestones	Local Leads	What Corporate support is required	Expected Delivery Dates
1	Triple Aim	1) Choosing a population segment 2) Identifying assets and needs 3) Create a governance structure 4) Develop change theory 5) Create a set of Triple Aim measures 6) Testing Changes 7) Implementation 8) Quality Control 9) Scale-up and spread	QI Department Lead – Auzewell Chitewe • Leighton Buzzard (Allison Jones and Julia Mead) • Learning Disabilities (Sanjay Nelson, Ruth Cooper) • Newham MH (Ed Lander/Dominic Dougall) • Forensics (Dr Abu Shafi) • CHN Newham (Anthony Edwards) • Tower Hamlets MH (Che Rosebert) • SCYPS (Sveta Alladi and Jacqueline Simmons) • IAPT Bedfordshire (Sharon Gugerly) • *Additional local projects can start throughout the year	• QI (Learning system and project support) • Informatics (data and EPR) • Public Health (population needs data) • Communications (promotion and recognition) • Commercial Dev. Team (contracts) • Exec Team (Sponsorship) • All (Identifying opportunities for Triple Aim projects) • Finance (value and costing) • Quality & Performance (reports and data)	Multi-year
2	Enjoying work	1) Identifying the quality issue 2) Understanding the problem 3) Developing a strategy and change ideas 4) Testing 5) Implementation and sustaining the gains	QI Department Lead (Auzewell Chitewe) • SCYPS (Natalie Blanchard) • Mental Health Law Team (Jasemine Ali) • Newham CAMHS (Elaine Cheng-Whitehead) • Quality compliance & Performance (Karamjeet Chana) • Forensics Admin (Fiza Wafa) • Bow ward (Elizabeth Hearn and Jo Gbongo) • HealthE1 Homeless Unit (Marina Muirhead) • TH CAMHS (Abdi-Karim Ibrahim) • *Additional local projects can start throughout the year	• QI (Learning system and project support) • OD (OD interventions) • People and culture (HRBP support) • Communications (Promotion and recognition) • Exec Team (Sponsorship) • All (Identifying and encouraging own staff to start a project)	Multi-year Current phase: • Sept 2022
3	Value QI projects	May 2021 – launch Quarterly learning sessions October 2022 – End	Sarah Barnett Katherine Brittin	• Informatics (data) • All (Identifying opportunities for Value projects) • Finance (costing) • Communications (Promotion and recognition) • Commercial Dev team (contracts)	October 2022
4	Capability Building	ICP – Sept 20 – Feb 21 ILP - May - Sept2021 ICP – Oct 21 – Mar 22 ILP – Nov 21 – Mar 22	Katherine Brittin (ICP) Auzewell Chitewe (ILP)	• All (Identifying and encouraging own staff to attend training) • Communications (Promotion and recognition) • Finance (revenue and cost) • Workforce (staff training data)	Multi-year. Current Phase: • ILP - May - sept2021 • ICP – Sept 20 – Feb 21


Strategic Objectives
Secondary Drivers
21-22 Priorities
Informatics
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
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Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Introduction of master patient index to link patients between main clinical systems (phase 2 DWH modernisation)
Inpatient DQH design (Phase 4 DWH modernisation)
Adoption of integrated Apps - CAMHS
Adoption of integrated Apps - CMHT
Adoption of integrated Apps - Perinatal
Adoption of integrated Apps - SCYPS
Improved responsiveness to adhoc data requests
Faster access to overnight data for self-service dashboards
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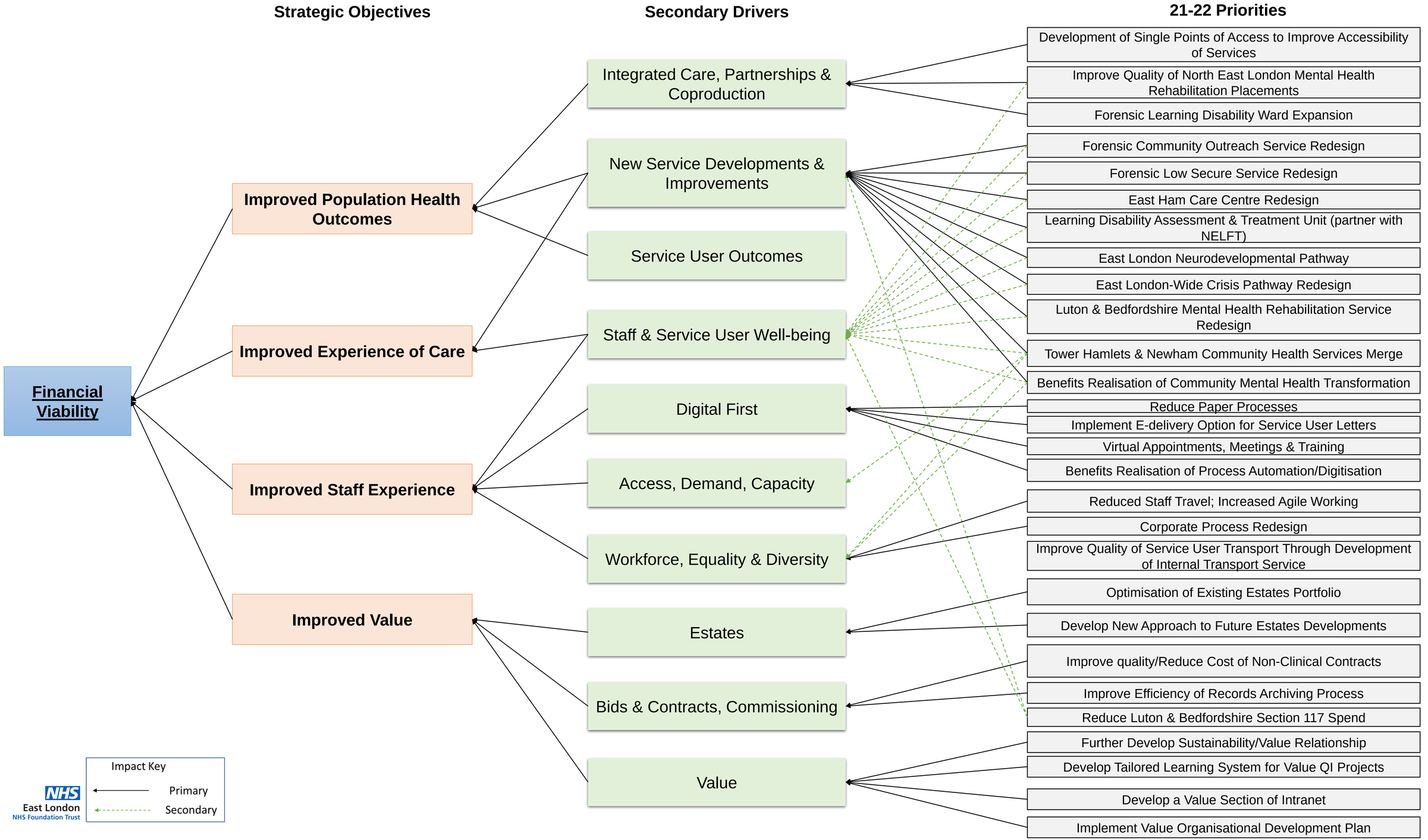
No.	Top Key Priority Areas (Informatics)	Milestones	Local Leads	What Cooperate support is required	Expected Delivery Dates
1	Adoption of Integrated Apps - CAMHS	Development to be complete 31/5/2021 Adoption and training during June 2021	Tom/Adnan/Forid	Support for communication of adoption and training.	June 2021
2	Adoption of Integrated Apps – CMHT	Development to be Complete 30/4/2021 Adoption and training during May 2021	Tom/Adnan /Forid	Support for communication of adoption and training.	May 2021
3	Adoption of Integrated Apps – Peri Natal	Development to be Complete 31/3/2021 Adoption and training during April 2021	Tom/Adnan /Forid	Support for communication of adoption and training.	April 2021
4	Adoption of Integrated Apps - SCYPS	Development to be Complete 31/5/2021 Adoption and training during June 2021	Tom/Adnan /Forid	Support for communication of adoption and training.	June 2021
5	Faster access to overnight data for self-service dashboards	Reduction to 1pm Feb 2021 Noon end of Q2 2021/2 11am by end of Q4 2021/2	Tom/Adnan /Forid		March 2022
6	Improved responsiveness to ad hoc data requests	Average wait time to below 14 days by Q1 2021	Tom/Adnan /Forid		June 2021
7	Introduction of master patient index to link patients between main clinical systems (Phase 2 DWH Modernsiation)	Development begins Feb 2021	Tom/Adnan /Forid		June 2021
8	Inpatient DWH design (Phase 4 DWH Modernisation)	Development begins July 2021	Tom/Forid	Support to sign off data models with stakeholders	Mar 2022
9	Outpatient DWH design (Phase 3 DWH Modernisation)	Development begins December 2021	Tom	Support to sign off data models with stakeholders	Summer 2022


Strategic Objectives
Secondary Drivers
21-22 Priorities
Financial Viability
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments & Improvements
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Development of Single Points of Access to Improve Accessibility of Services
Improve Quality of North East London Mental Health Rehabilitation Placements
Forensic Learning Disability Ward Expansion
Forensic Community Outreach Service Redesign
Forensic Low Secure Service Redesign
East Ham Care Centre Redesign
Learning Disability Assessment & Treatment Unit (partner with NELFT)
East London Neurodevelopmental Pathway
East London-Wide Crisis Pathway Redesign
Luton & Bedfordshire Mental Health Rehabilitation Service Redesign
Tower Hamlets & Newham Community Health Services Merge
Benefits Realisation of Community Mental Health Transformation
Reduce Paper Processes
Implement E-delivery Option for Service User Letters
Virtual Appointments, Meetings & Training
Benefits Realisation of Process Automation/Digitisation
Reduced Staff Travel; Increased Agile Working
Corporate Process Redesign
Improve Quality of Service User Transport Through Development of Internal Transport Service
Optimisation of Existing Estates Portfolio
Develop New Approach to Future Estates Developments
Improve quality/Reduce Cost of Non-Clinical Contracts
Improve Efficiency of Records Archiving Process
Reduce Luton & Bedfordshire Section 117 Spend
Further Develop Sustainability/Value Relationship
Develop Tailored Learning System for Value QI Projects
Develop a Value Section of Intranet
Implement Value Organisational Development Plan
Impact Key
Primary
Secondary
NHS
East London
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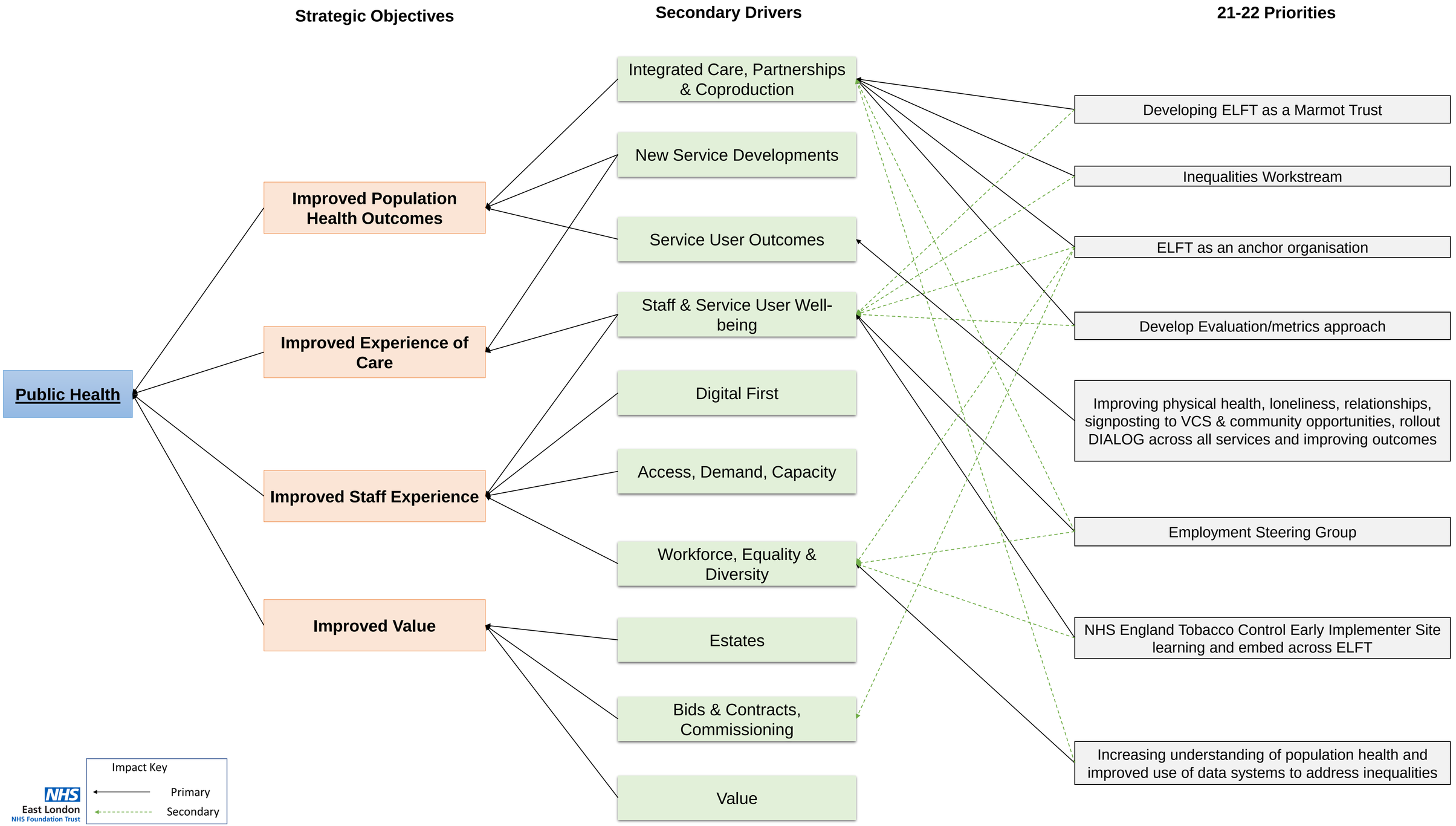
Financial Viability

NHS East London NHS Foundation Trust

No.	Top Key Priority Areas (Informatics)	Milestones	Local Leads	What Cooperate support is required	Expected Delivery Dates
1	Development of Single Points of Access to Improve Accessibility of Services – IAPT and CAMHS	Scoping. As per DMT plans.	Sarah Wilson/Sarah Barnett	P&C	3 months
2	Improve Quality of North East London Mental Health Rehabilitation Placements	Identify funding, Appoint project team Develop 22-23 rehab plan	Shiraz/Sarah/Lucy Harrison	CDD	1 month 3 months 6 months
3	Forensic Learning Disability Ward Expansion	Redevelop ward space Cost modelling Implement marketing plan As per DMT plans.	Sarah/Tony Kasambira	CDD/Finance/Estates/Informatics	6-9 months
4	Forensic Community Outreach Service Redesign	Implement phase 2 redesign As per DMT plans.	Sarah/Phil Baker	CDD/Finance	6 months
5	Forensic Low Secure Service Redesign	Redesign ward team As per DMT plans.	Sarah/Phil Baker/Sian	CDD/Finance	3-6 months
6	East Ham Care Centre Redesign	Scoping As per DMT plans.	Eugene/Sarah	CDD/Finance/Estates	6 months
7	Learning Disability Assessment & Treatment Unit (partner with NELFT)	Scoping As per DMT plans.	Sanjay Nelson/Ruth Cooper/Sarah	CDD/Finance/P&C/PPG	3-6 months
8	East London Neurodevelopmental Pathway	To agree funding arrangements. Align resource to provide an East London service	Dominic/Sarah Dracuss/Shiraz/Sarah	CDD/Finance	3-6 months
9	East London-Wide Crisis Pathway Redesign	Analysis of time and motion study. Modelling of delivering services across the patch	Andrew Horobin/Ed Lander/Melanie King/Sarah	CDD/Finance/P&C	3-6 months
10	Luton & Bedfordshire Mental Health Rehabilitation Service Redesign Reduce Luton & Bedfordshire Section 117 Spend	Public Intentions Intender notice (PIN) Service Modelling Develop dedicated team for Section 117	Michelle Bradley/Guy Thompson/Sasha Singh	CDD/Finance/P&C	6 months
11	Benefits Realisation of Community Mental Health Transformation	Scoping	Local CMHT Leads	Finance/QI/PPG	9 months
12	Benefits Realisation of Process Automation/Digitisation Reduce Paper Processes	Incorporate value considerations in digital projects. Re-negotiate Print supplier contract, provide head admin access to print portal, trustwide communications, QI project	Local service leads/Sarah	QI/Communications/P&C/IT	6 months
13	Implement E-delivery Option for Service User Letters	Run pilot with IAPT service. Develop plans for trustwide roll-out	Local service leads/Sarah	Communication/IT/PPG	3 months
14	Virtual Appointments, Meetings & Training	Audit of virtual contacts	Sarah/Local Leads	IT/PPG/Informatics	6 months

Financial Viability

No.	Top Key Priority Areas (Informatics)	Milestones	Local Leads	What Cooperate support is required	Expected Delivery Dates
16	Corporate Process Redesign	Establish corporate project team	Corporate managers/Sarah	All corporate teams	6 months
17	Improve Quality of Service User Transport Through Development of Internal Transport Service	Seek approval for review paper on recommendations, establish project team and implement plan on recommendations	Local service leads	P&C/IT/PPG/Estates/Procurement/ Finance	9 -12 months
18	Optimisation of Existing Estates Portfolio Develop New Approach to Future Estates Developments	Develop template for analysing estates space utilisation, explore opportunities where leases are ending in 21-22.	Sarah/John Hill/Frank	Estates/IT/Finance	12 months
19	Improve quality/Reduce Cost of Non-Clinical Contracts	On going work, Identify opportunities where supplier cost can be reduced	Sarah/local services leads	CDD	12 months
19	Improve Efficiency of Records Archiving Process	Model options for record archive storage	Chris Kitchener/Sarah	IG/IT/Procurement	6 months
20	Further Develop Sustainability/Value Relationship	Develop plan to understand relationship between sustainability and value	Adam Toll/Sarah	Estates	6-9 months
21	Develop Tailored Learning System for Value QI Projects	As per QI project plan	Sarah/Auz/Katherine/Susan	QI	3 months
22	Value culture change work	Implement Value Organisational Development Plan Develop a Value Section of Intranet	Sarah/Steven Course/Lorraine	Communication/Finance/P&C	3 months


Strategic Objectives
Secondary Drivers
21-22 Priorities
Public Health
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Developing ELFT as a Marmot Trust
Inequalities Workstream
ELFT as an anchor organisation
Develop Evaluation/metrics approach
Improving physical health, loneliness, relationships, signposting to VCS & community opportunities, rollout DIALOG across all services and improving outcomes
Employment Steering Group
NHS England Tobacco Control Early Implementer Site learning and embed across ELFT
Increasing understanding of population health and improved use of data systems to address inequalities
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Public Health

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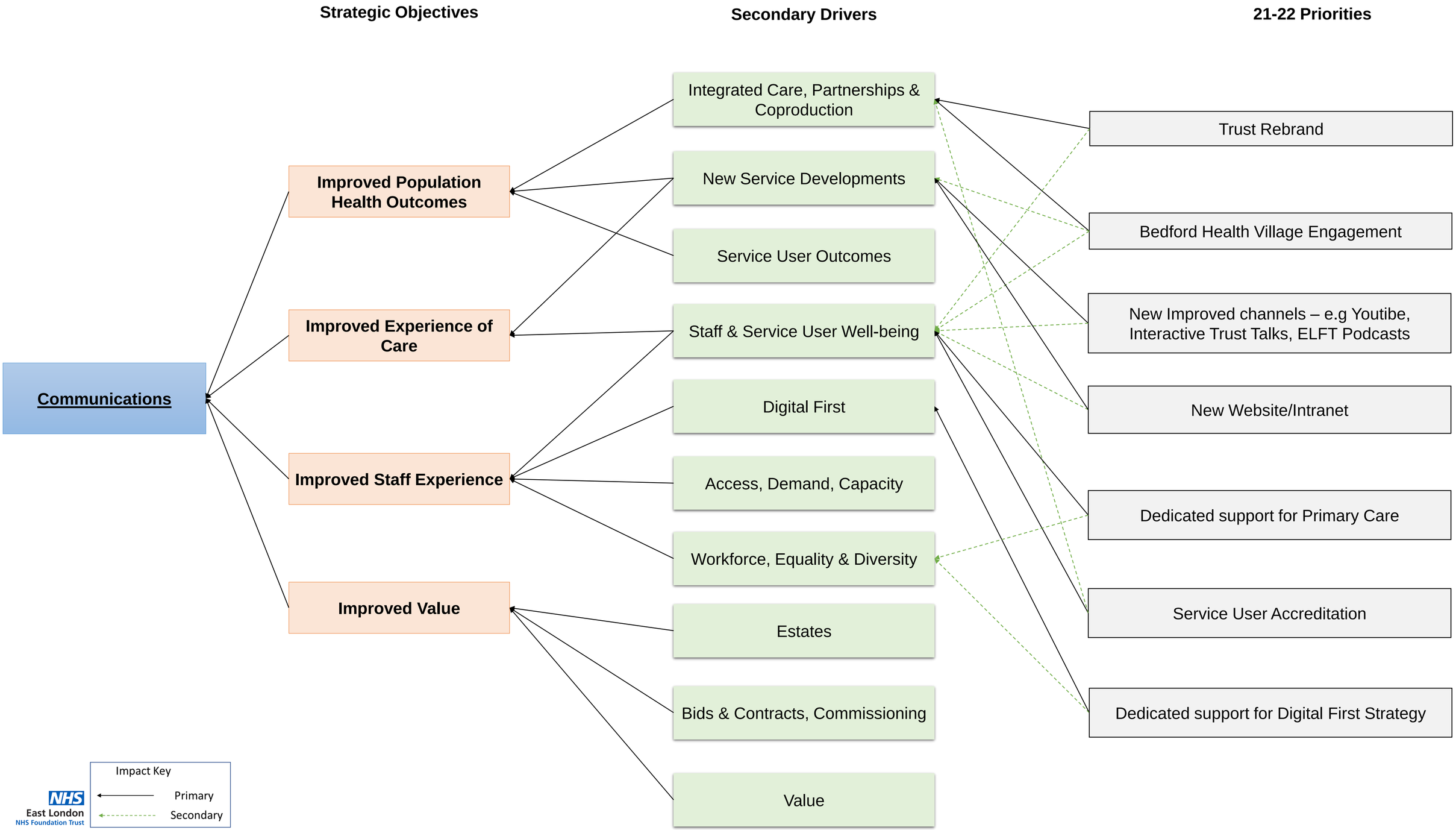
No.	Top Key Priority Areas (Inequalities workstream) population health)	Milestones	Local Leads	What Corporate support is required	Expected Delivery Dates
1	Developing ELFT as a Marmot Trust	Establish the strategic approach to enable ELFT to become a 'Marmot Trust' and develop plan to bring this together in partnership with UCL Institute of Health Equity.		TBC	September 2021
2	Inequalities Workstream	Continue to implement the inequalities driver diagram – focus on evaluation and measuring progress	Richard Fradgley Angela Bartley	TBC	Continuous
3	ELFT as an anchor organisation	Develop ELFT as a leading anchor organisation focussing on local employment and embedding social value as a key part of our procurement work	Angela Bartley Steve Newton	Procurement Team P&C	6 months
4	Employment steering group	To increase the number of ELFT service users in meaningful employment, education and training.	David Bridle Paul Binfield Angela Bartley	People Participation Team	Ongoing
5	Increasing our understanding of population health and improved use of data systems to address inequalities	Use of Power BI platform with clinical teams to be able to see services by protected characteristics and deprivation Pilot of population health training session with primary care	Tom Nicholas Forid Alom Angela Bartley	Analytics Team QI Team	June 2021
6	NHS England Tobacco Control Early Implementer Site learning and embed across ELFT	Workshops and learning sets (3 months) Pulling together in programme library (3 months)	Kate Corlett Angela Bartley Afia Khatun	Analytics & Performance team support on data collection People Participation	July 2021
7	Develop Evaluation / metrics approach	Develop an evaluation framework for the workstreams across ELFT and measure success. Increase the number of academic publications from ELFT related to population health	Richard Fradgley Angela Bartley	Analytics Team R&D Team	September 2021


Strategic Objectives
Secondary Drivers
21-22 Priorities
Communications
Improved Population Health Outcomes
Improved Experience of Care
Improved Staff Experience
Improved Value
Integrated Care, Partnerships & Coproduction
New Service Developments
Service User Outcomes
Staff & Service User Well-being
Digital First
Access, Demand, Capacity
Workforce, Equality & Diversity
Estates
Bids & Contracts, Commissioning
Value
Trust Rebrand
Bedford Health Village Engagement
New Improved channels – e.g Youtibe, Interactive Trust Talks, ELFT Podcasts
New Website/Intranet
Dedicated support for Primary Care
Service User Accreditation
Dedicated support for Digital First Strategy
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Communications

No.	Top Key Priority Areas (Informatics)	Milestones	Local Leads	What Cooperate support is required	Expected Delivery Dates
1	New Website/ Intranet		Steve Gladwin		Early 2022
2	Trust Rebrand		Steve Gladwin		Summer 2022
3	Dedicated support for Digital First Strategy		Steve Gladwin		June 2021
4	Dedicated support for Primary Care		Steve Gladwin		April 2021
5	Bedford Health Village Engagement		Steve Gladwin		On-going
6	Communications Team seeking Service User Accreditation		Steve Gladwin	QA	TBC
7	New and Improved Communication Channels e.g ELFT Youtube, interactive Trust Talk, ELFT Podcasts		Steve Gladwin		12 months