### **BOARD IMPACT CASE STUDIES - ORGANISATIONAL STRATEGY**

### Whittington Health: The Development of a Five Year Strategy

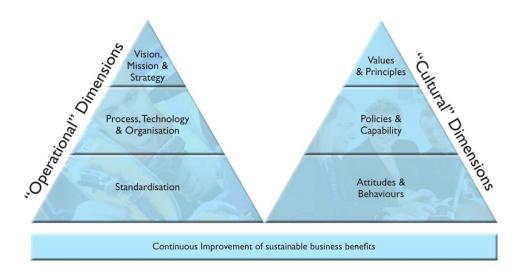
### 1. AREA OF FOCUS

- 1.1 Whittington Health evolved from the joining of Islington and Haringey community services including social care in Islington, and The Whittington Hospital in April 2011. The premise behind this re-organisation of health services in North Central London is to improve patient and service user care proactively and consistently through a process of the integration, working in partnership across primary care, community, mental health, social care and acute care. This will ensure a population focused approach and reinforces our commitment to work with other providers across the system for the benefit of and with patients, service users and their carers with the intention of providing integrated healthcare to the entire populations of Islington and Haringey.
- 1.2 This case study focuses on the development of the 5 year strategy for this new integrated care organisation. The Trust Board was keen to have a dynamic process to develop the strategy for the new organisation that would involve people from the Board to the floor

#### 2. RATIONALE

2.1 Whittington Health required a strategy that would align the operational and cultural dimensions of the organisation in order to drive sustainable change over the coming years (see figure 1). The organisation's task was to produce a five year strategic plan that reflected the rationale for its formation as an integrated care organisation, the strategic direction of the NHS, health economies in London and local needs.

Figure 1: Foundations for developing sustainable change



## 3. BOARD ASSURANCE THAT THE PLAN IN PLACE WAS ROBUST AND REALISTIC

3.1 The board gained assurance that the plan in place was robust and realistic by their scrutiny of and engagement in the process. This included a clear plan for developing the strategy (see figure 2), engagement with close liaison with key stakeholders throughout the development of the plan, and expert external advice brought to the board.

## 3.2 Key Stakeholders:

External stakeholders included:

- Liz Wise Director of Strategy QIPP NCL;
- Ann Johnson Director of Finance NCL;
- Rachel Bartlett NHS London, Islington and Haringey CCGs (Gillian Greenhough, Joe Sauvage and Katie Coleman – Islington; Helen Pelendredies, Peter Christian, David Masters and the CCG Board – Haringey);
- David Fish and Jenny Shand UCLP;
- Haringey and Islington LINK; Haringey OVS;
- Public health colleagues from Islington and Haringey.
- Internal stakeholders consulted included service managers and key staff in each new division, clinical and non-clinical.

### 3.3 External Reference:

- NHS London Integrated Peer Learning Group;
- NHS Elect
- Visits to beacon sites and developing ICOs: Trafford, North Tees and Hartlepool, North Devon, Croydon, Lewisham, and Torbay
- UCLP Director of Integrated Care, Jenny Shand as expert advisor in the development of an integrated care strategy.
- Integrated Health Partners (IHP) Consultancy Expertise in developing health markets and financial regulation in public health care systems. Particular expertise in emerging models for financing integrated models across primary and acute services.
- 3.4 This combination of resource and approach enabled the board to assess the validity and reliability of the process, method and content of the developing strategy.

Figure 2: Overview of the strategic planning process

	Deve lop project plan	Under stand context	Develop visi on	Develo p pri ori ti satio n c riteri a an d g oals	Deve lop stra te gic ini tiative s	Plan for delivery
Timing Key activities	Developcomprehensive- project plan and brief core team     Establish clinical strategy group and set up meetings     Developlist of strategic questions to address – e.g.  What are the major strategic choices for Whitting ton Health?	data for activity and firance across Whittington Health, community and hospital Review historic activity trends against population demographics Understand drivers of change and potential futurebaseline	3 we eks     Artic ulate a coherent, 5-year vision building on the one-pager developed by YiM ien     Test alignment with key stake holders, internally and externally	Sweeks     Use vision to developrobust prioritisation criteria based on Scale of the opportunity both financial and quality     Ease of implementation E.t.c.     Use the criteriato developa focused number of goals that are aligned with the overall vision realistic and achievable	4 weeks     Develop a focused number of initiatives that     Clearly underpin the delivery of the goals and overall vision     Are prioritised and have cleafly defined, timesensitive, measurable impact     Work through the implications on finance, quality and service configuration	planfor execution of each initiative showing Implications for staff and service configuration Timeline Performance measuresto be evaluated Identify and prioritise key risks, and developm itigation plan
Output	Project plan	Context section	Executive summary and vision	• Goals/Priorities	Initiatives     Overall im pacton quality, activity, cost	Organisation implications - people and services Risk management Stakeholders  J.Shand June 2011

# 4. BOARD ASSURANCE THAT THE PLAN IS IMPLEMENTED AND DELIVERS THE DESIRED CHANGES IN THE CULTURE

- 4.1 The Whittington Health Five Year Strategy was launched in January 2012. The next stage in the process is designed to assure the board of the implementation of the strategy through internal integration within each directorate and division and by delivery against key outcome measures. Outcome measures for the strategy are being developed and due for consultation with the board in March 2012.
- 4.2 The Director of Strategy has implemented a plan for engaging all clinical divisions and directorates in developing the five year strategy as part of their normal business, aligning with initiatives and projects alongside QIPP, supported by planning and programmes.
- 4.3 Divisions and directorate s are developing their annual business plans that will describe how they intend to deliver the five year strategy. The Director of strategy and staff are currently supporting this work.
- 4.4 The Trust Board will receive updates from the Divisions on the implementation of their strategies and any review of future strategy on a regular basis.

### 5. SPECIFICALLY EXPLAINE HOW THE NEDS WERE INVLOVED

5.1 Non Executive Directors have been involved in each step of strategy development both in attending stakeholder meetings and through a programme of seminars. The Chairman and deputy Chairman of the board along with a

nominated lead NED have made an important contribution to steering the development of strategy.

- 5.2 Meetings involving NEDS have included the following:
  - Division wide strategy development meetings (May July 2011)
  - Division/Department 'Deep Dive' board seminars to develop understanding of each clinical service area and its relation to Whittington Health and strategic direction
  - Strategy Development Seminars: Outline plan for Whittington Health Strategy Development (June 2011); Maternity strategy (July 2011); Surgery strategy (August 2011); ICAM strategy (September 2011); Strategic Options The Financial Challenge and Initiatives Designed to support Strategy (September 2011); ICO Productivity & EOLC (September 2011); Service Line Decisions (October 2011); Strategy in Context Engagement with Stakeholders, Contribution to Local Health Economy (October 2011); Foundations for developing sustainable change & Alignment with Projects (November 2011)
  - One to one meetings and telephone calls with lead NED on development of the strategy
  - Core team meeting involving UCLP Integrated care lead, Lead NED and Director of Strategy at key points in the process
  - Final agreement and sign off of the detail of the vision and strategic goals of the organisation by the Lead NED and Chairman (January 2012)

Siobhan Harrington

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Adam Smith

Deputy Director Strategy