



# BETTER CARE TOGETHER FOR EAST SUSSEX

ESHT five year strategic plan (interim)

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Steve Phoenix Chairman

## **FOREWORD**

We are proud to share our ambitious strategic plan for East Sussex Healthcare NHS Trust (ESHT). It sets the overall direction for our services; enabling our residents to access the best care in the most appropriate place – at home, in the community or when they need to come into hospital. Our plan is built on four strategic aims:

Improving the health of communities

Collaborating to deliver care better

Empowering our people

Ensuring innovative and sustainable care

The time horizon for this plan is five years. Health and care services will undoubtedly look different by 2026, and we are excited to be already planning major new buildings and service models at our Eastbourne and Hastings hospitals to support this.

We recognise that ESHT is just one part of the change. The health and care challenges we aim to tackle for residents are complex; so East Sussex care providers will need to come together to ensure that we achieve this equitably for our communities. Working across organisational boundaries will make the difference, which is why we are especially proud of our history of collaborative working with East Sussex County Council (ESCC) locally (at Place) and with wider partners across Sussex (System).

We must prioritise access to care for all our communities. COVID has changed all our worlds, and in healthcare it has enabled us to fast-track digital technologies and change the way that we provide care efficiently. We must recognise, however, that the most vulnerable often do not have access to technology so securing the outcomes that we want for them may need to come from traditional approaches too.

#### We will collaborate with health and care partners to deliver our aims.

This plan for the next five years will help us focus on patients' needs; prevent exacerbation, enable better lives, support long term care needs in the right place, with the right care.

To do this differently, to make durable changes and to improve the lives of our residents means that we are reshaping services collectively as a health and social care partnership.

**Better Care Together for East Sussex** 

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## WHO WE ARE: WHAT WE PROVIDE



#### We are Sussex's only integrated care provider

East Sussex Healthcare NHS Trust (ESHT) is Sussex's only integrated acute and community health services provider, caring for over half a million residents as well as the visitors and tourists that visit our coastal county all year round. We are the lead provider of a wide range of hospital-based services across East Sussex as well as offering community led services across much of the same area.

Our services are mainly provided from two district general hospitals, the Conquest Hospital in Hastings and Eastbourne District General Hospital both of which have Emergency Departments and provide care 24 hours a day. They offer a comprehensive range of surgical, medical and maternity services supported by a full range of diagnostic and therapy services.

At Bexhill Hospital we provide outpatients, ophthalmology, rehabilitation and intermediate care services. At Rye, Winchelsea and District Memorial Hospital we provide Outpatient and inpatient intermediate care services. We also provide some services at Uckfield Community Hospital.

Our community teams also provide care in the patient's own home, over 100 community sites across East Sussex and GP surgeries. We employ 7,700 people across the organisation. Our annual income for 2019/2020 is £535 million, making us one of the larger NHS Trusts in Sussex.

#### We have a track record of improvement

By 2020, ESHT had turned a page. We exited financial and clinical special measures in 2018 and 2019 respectively, and secured an overall Care Quality Commission (CQC) rating of "Good" with several services being rated as "outstanding".

This achievement represented the apex of our previous strategy (ESHT 2020: Outstanding and Always Improving); to return the Trust to a position from which patients could take confidence, in which our partners could build trust and of which our staff could be proud.

This was all achieved within the context of maintaining and sustaining a distinct approach to an ESHT way of working; a culture that recognises a sense of team, maintains social cohesion and empathy with colleagues and our patients (see the section on Supporting Our Staff for more details).

#### We work in partnership

This new five year plan seeks to build from our strong foundations and enables ESHT to have a directive role in shaping our local place with partners in East Sussex and to support Sussex-wide collaborative working to ensure care is provided optimally across Sussex.

## We are a proudly diverse organisation

East Sussex could be considered, in a comparative sense, as far less diverse than more urban, densely populated parts of the country. However, considering diversity in its wider sense, there are significant differentials across our communities (see Section 2 'Health Priorities in East Sussex' for more detail). Serving the population centres of Eastbourne, Bexhill and particularly Hastings means that ESHT we see a broad range of residents from a wide range of communities, here at the Trust over 100 languages are spoken by our staff,

NORTH AMERICA

RUROPE

ASIA

AFRICA

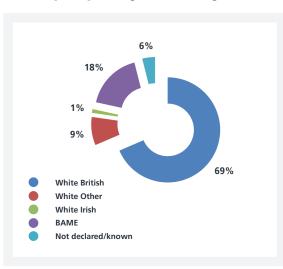
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and nearly one in five staff identifies as BAME (18% of our people, compared with 8% across the East Sussex population). We are proud of our diverse ESHT community and will continue to promote equality and diversity in our workforce. This document refers to Place (East Sussex) and System or 'ICS' (Sussex). Please see the glossary for further information.

#### **ESHT** people by ethnicity:



Diversity and difference is a strength and we recognise that a deeper understanding of wider perspectives can lead to better, more sustainable responses to the challenges we face as an organisation. We are committed to supporting and harnessing the insights of our LGBTQ+ staff and staff with disabilities and have established network groups that engage ESHT people from these communities.



Looking more widely at diversity; we are proud of how broad and diverse our services are; our integrated provider status means we are not a typical district general hospital. Every day we have staff who could be assessing elderly bone health, providing complex specialist care for urology patients, implementing early intervention initiatives for children or sourcing packages of care working with social services to support people at home, as just a few of our many services.

This diversity is complemented by the integrated nature of our service portfolio, which will drive the future shape of the care we provide and outcomes we deliver. As our strategic aims show later in the document our five year plan considers the role we play, not in an isolated way (e.g. as individual hospital or community services) but as how the services we provide can support improved community health and support more collaborative working to improve patient outcomes in a wider sense.

# WHO WE ARE: WHO WE SERVE

#### **Supporting our staff**

There is a strong local sense to ESHT, with 74% of staff living within ten miles from where they work. Many of our current staff truly see themselves as East Sussex people; they work now for the Trust that will care for them in the future. Their investment is personal.

Our patients too are, in the most part, local residents who could easily be the friends and family of our teams. This underscores our commitment (that supports one of our four strategic aims) to look after the health and wellbeing of our people so that they will be better equipped to provide good care for our patients. We strive to put our service users, staff and community at the heart of everything we do. We are committed to embedding user experience into the development of our organisation and the services we provide.

Alongside the process of developing this strategy we commissioned a piece of work using the 'appreciative enquiry' approach that sought, through interviews with over 100 of a wide-ranging selection of our staff, to identify "the best of ESHT".

As part of this extensive engagement with staff, we sought to explore what is special about the Trust and what our future could look like.

What we heard included:



Our caring and supportive culture staff going the extra mile, with a strong team spirit



Our services, which have overcome significant challenges to improve care for patients



Our value-driven approach that has built a sense of cohesion, unity and togetherness



Our approach to change, driven by a willingness to learn and improve across the organisation

We asked staff "what are the values and behaviours that characterise ESHT". The resulting exercise revealed a range of words that together distil the ESHT culture; Empathetic, Adaptive, Dignified, Compassion, Caring, Action-oriented. During the challenging COVID months, these qualities enabled teams to come together to adapt and change. This was made possible by living by our values of respect, compassion and working together as a part of one fantastic team.

#### **Delivering care for East Sussex and beyond**

ESHT is an important part of the local community – We provide acute care services to a population of over half a million people in our local boroughs of Eastbourne, Hastings, Rother and Wealden. As well as those who directly engage with our services, we also have a responsibility to our whole local population to promote and protect their mental and physical health, working alongside our partners in primary and mental health care.

We also have a larger, regional coverage – providing specialist urology services to a larger population, extending beyond Sussex and into Surrey.

Over the years covered by this plan, ESHT recognises that this foundation – as a local and regional provider of care – provides us with a strong position from which to build further in terms of integrating care for patients across the whole of Sussex; especially shaping shared pathways with acute hospital partners. From our unique position in Sussex as a provider of both hospital- and community-based services, we can consider how best to care for people; using our teams in the community we can support in people's homes or as close to their home as possible. We are also keen to deepen our pathways with GP and social care partners, especially where patients need care that our services provide but do not necessarily need a visit to hospital to achieve this.

Our five year plan includes priorities that cover both of these areas – the system-led, acute collaboration and also the place-shaping community, primary and social care closer to home.





#### Tackling inequality of access to care

When we talk about the people we serve, we mean our patients and staff and, as noted earlier, many of these see themselves as East Sussex people. ESHT covers a geography in East Sussex that is both coastal and rural. We know that coastal towns in particular have higher levels of deprivation, employment seasonality and an ageing population. Coastal towns experience high levels of out migration of young people that contributes to an imbalanced and ageing population. For those who remain, drug and alcohol issues tend to be higher than the national average; the same is true for rates of 15 to17 year-old pregnancies. So even before COVID, pockets of deprivation existed in East Sussex that were comparable with inner city wards. Section 2 covers this in more detail.

COVID exacerbated the issue and overlaid BAME onto deprivation, with vulnerable groups hardest hit. Working with the system, ESHT is moving forward with targeted analysis of long waits and joining up with LA and PCNs to support managed pathways and acutes to facilitate care. This feeds into our strategic aim around improving community health, which is supported at both ICS level through its five year strategy as well as the Place priorities (see section 3 for more details).



# WHO WE ARE: WHAT WE STAND FOR

### Our mission, vision and values

Our motto is "Better Care Together for East Sussex".

Our mission is: East Sussex Healthcare NHS Trust delivers outstanding care with partners across East Sussex, enabling all residents to lead active, healthy lives and supporting those in need of our services at home or in hospital. We achieve this by fostering multidisciplinary working internally and collaborating widely externally.



## Our vision describes our ambition for the organisation over the five years of this plan:

- To develop outstanding services, building a reputation for excellence in care, becoming "the best DGH and community care provider"
- To lead a modern organisation for our people, enabled by technology, agile working and a light environmental footprint
- O To harness existing strong relationships to forge a vanguard collaborative tackling the social and health challenges that face our coastal towns
- O To make a demonstrable economic and social impact through our partnership commitments; on health, employment, education, training and skills development across Sussex
- O To develop as a financially sustainable and innovation-led organisation

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Our values are shown below.

We considered whether these remain relevant post-COVID and asked staff how they felt about these as statements of the behaviours we seek in our everyday interactions.

#### **Working Together**

"We care about building on everyone's strengths"

### Improvement and Development

"We care about striving to be the best"

**Respect and Compassion** 

"We care about acting with kindness"

### Engagement and Involvement

"We care about involving people in our planning and decision-making"

On balance it was felt that these do indeed reflect the values that ESHT staff both live to and continue to aspire to in their day-to-day work at the Trust. Moving forward over the coming five years, it is recognised that more important than the words themselves are how these translate into policies, principles, actions and behaviours if we are truly to make them core to the ESHT way of working.

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#### Our role in the changing care landscape

Running through the NHS 2021 White Paper is the dual principle of integration and collaboration to improve care. It talks of health services delivering the "Triple Aim" of 1) improved care/experience, 2) improved population health and 3) reducing the cost of care.

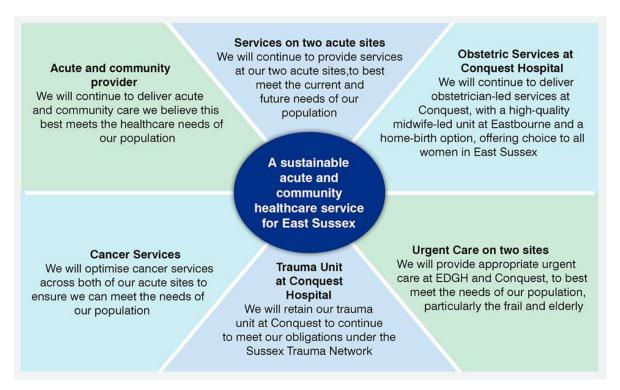
To achieve this will require formal and informal collaborative efforts across organisations to deliver complex change and tackle long-term population health issues. Additionally, organisations within the system will continue to fix problems at "ground level" on a day-to-day basis. The White Paper recognises this, with organisations retaining an ability to chart their future course, within the context of the wider aims for Place and System.

So in coming to this five year plan, ESHT has considered our focus at the broadly three levels implied by the White Paper; as an organisation, as a shaper of Place and as a co-ordinated provider at System level. We feel that these three layers as we define them are mutually inclusive and show our commitment to deeper, closer working to improve outcomes.



#### **Building the organisation**

In our previous strategy we articulated the "fixed points" for the Trust that we feel are waypoints guiding the organisation. These remain salient guides even in the new world of System and Place and do not detract from the wider aims for Sussex and East Sussex. We propose to retain these and anticipate that the organisation does not shift away from these.



#### **Shaping the Place**

East Sussex has benefitted more than other Places from some strong relationships during the earlier iterations of collaboration/integration. Examples of existing joint working at Place include the shared aims and ambitions for community services and social care (known as the Target Operating Model) and senior joint posts across ESCC and ESHT. Building on this explicitly, to recognising the social value that can be created at Place (in terms of employment, estates-sharing, procurement) is central to how ESHT wishes to define further with partners the nature of Place for East Sussex.

#### **Supporting the System**

As the ICS body for Sussex evolves, it is clear that ESHT as part of a provider collaborative will play a role in ensuring acute care provision is optimised across the whole of the county and we are committed to support a principle of improving minimum standards of care to reduce outlier outcomes across Sussex. Currently ESHT is playing an active role supporting the pathology and radiology networks across Sussex and is recognised as leading the Sussex-wide engagement on digital initiatives with partners."

# OUR FUTURE DIRECTION

#### **Health priorities in East Sussex**

Over half a million people live in East Sussex. It is a mixture of urban and rural areas with a large elderly population, particularly in its main coastal towns (Eastbourne, Bexhill and Hastings). There are stark inequalities within the county with some areas having significantly worse health, as well as significant differences across the determinants of health.

East Sussex has a demographic that skews toward the older end of the range. The county has fewer residents than the E&W average in almost all age groups from 0 to 49 (it is slightly higher in the 20 to 29 group) but more residents in every age group from aged 50 to 90+. Over the coming five years, this balance is not expected to change; indeed the greatest growth is expected in the older age group (65+). This group represents a quarter of the county's population and is projected to make up nearly a third of all people by 2035. The fastest rate of growth will be seen in the 85 and over group. Those aged 85 and over are the largest users of health and social services. The working age population in east Sussex is expected to grow but more slowly than the older age group and birth rates are expected to remain flat.

In common with the rest of the country, life expectancy in East Sussex has stalled. Those living in our most deprived communities have the lowest life expectancy and can expect to live fewer years in good health. Moreover, the gap in life expectancy in the most deprived areas of Hastings versus those least deprived areas in Rother is around 12 years for men and 6 years for women. Arresting this slide through improved collaboration across health and care must be a joint priority.

Considering where the most deprived communities are located within East Sussex, 14% of East Sussex's Lower-layer Super Output Areas (LSOAs – similar to neighbourhoods as units) appear in the most deprived 20% nationally. Just under half of these are in Hastings and just over a quarter are in Eastbourne. The remaining 25% are spread across Rother, Wealden and Lewes.

Targeting the causes of death which contribute most to the life expectancy gap should have the biggest impact on reducing inequalities between the most and least deprived groups in the population. The biggest causes of inequality in life expectancy in East Sussex are circulatory disease, cancer, and respiratory disease. All these areas are reflected across the planning documents and collaborative work streams of the Sussex ICS.

#### Vision 2025: an overarching plan for Sussex

At the summit of strategic planning for Sussex is the System plan (for Sussex) known as Vision 2025. This seeks to group outcomes into phases of life – starting life, working life and end of life. The intention is that this structure will be underpinned by the three Place-based priorities, currently being refreshed in East Sussex and that a consistent thread should run from System, through Place and down into individual organisational five-year plans.

#### Place priorities: supporting the refresh

The original ICP (now Place) priorities are also in the process of revision, mindful that these too need to reflect the outcome focus of the Vision 2025 document.

#### Alignment from organisation through Place into System

We talk of a "golden thread" woven from organisation, through place and on into the system that ensures a consistent approach to plans and strategic development can be traced. This is summarised below and shows how the ESHT strategic aims (see next section), shown down the left-hand side of the schematic, fit with the focus of both Place and System (ICS) priorities/outcomes, showing that as ESHT delivers its aims, so the benefits will be evident beyond traditional organisational boundaries.

		ICS Vision 2025 outcomes			Place priorities				
		People will live more years in good health	Gap in life expectancy between most and least disadvantaged will be reduced	Experience of using services will be better. Staff work to make the most of skills, dedication & professionalism	Cost of care affordable & sustainable	Population health & wellbeing	Experience of local people	Transforming services for sustainability	Quality care & support
salth ties	Developing excellent care for our Older People		•			•		•	•
Improving health of communities	Supporting 'digital by default' across all services			•	•		•	•	
Impro of co	Tackling persistent health inequalities across Sussex	•	•	•					
er.	Driving collaborative change to acute provision to improve access for patients			•	•				
Collaborating to deliver care better	Supporting the development of primary and community pathway priorities within the ICS			•					
	Continuing to strengthen joint provision with ESCC across integrated care projects to deliver better care	•	•	•	•	•	•	•	•
=	Creating a supportive, rewarding workplace for our people			•					•
Empowering our People	Building on the foundations of a just culture model to enable all staff to feel they have a voice			•				•	•
Empow	Strengthening our improvement to underpin a learning culture Implementing digitally enabled flexible working			•				•	•
Sustainable & nnovative Care	Ensuring financial viability - Trust &ICS								
	Delivering high quality flexible and future- proofed buildings				•			•	
staina ovativ	Supporting productivity-focused transformation				•			•	
us un	Ensuring clinically-led innovation underpins our planning				•				

## **OUR FIVE YEAR PLAN**

#### The strategic aims

Following the 2021 White Paper, the changing operating environment over at least the next five years places the emphasis on organisational collaboration, joint pathways for health and care and a renewed focus on improving outcomes for residents. So our organisational plan must be able to address challenges well beyond the more traditional boundaries.

- In developing this plan, the board considered the question of describing our "core principles" about the organisation, and several key themes emerged from our discussions:
   We are committed to improving access to services for our population; which includes the most deprived/dependent areas within Sussex and the wider South East
   We are uniquely placed in Sussex to lead cross-sector service transformations (via ESCC & community services)
   We ensure strong collaborative working with Sussex acute partners to optimise service provision across the county
   We have strong enablers via our (Building for our Future) BFF programme, digital presence and our "can do" resilient operational culture
   We recognise the importance of the shift in emphasis toward place/system outcomes
- We are currently in a challenged ICS and understand the importance of securing a sustainable system and our role in that
- We then sought to build strategic aims that brought these principles to life and that also reflected what we know about our local health priorities and operating environment over the time horizon of this plan. We agreed four strategic aims for the Trust that we feel demonstrates our commitment to our principles, aligns with system and place direction and remains outcome focused.

- Our coverage includes pockets of deprivation among SE highest
- Post-COVID especially we recognise the health deprived
- Prioritise access and equity
- Ageing, dependent population
- Integrated services offers wider reach/impact
- Evolving system and place = we embrace collaboration needed to lead/support new models/pathways
- Current reality is that almost all our care happens locally; we are a local hospital for local people
- Transport links across county are suboptimal so retaining access is key

- Staff remain the greatest asset we have
- It's been tough and people need to feel valued
- Engaged staff stay, and tell their networks to join us
- Act as ambassadors they're residents too
- Already recognised as driving digital innovation across Sussex
- BFF is prime opportunity to modernise facilities and care experience
- ICS financial position remains fragile - need to play a role in supporting affordability





Collaborating to deliver care better



**Empowering our** people



Ensuring innovative and sustainable care



Each of these four aims will be realised through a set of associated priorities, together these represent the areas that the Trust will prioritise. Tracking each of these will come via internal and/or ICS/Place forums where progress/performance will be monitored against the plans.





#### **Strategic Aim 1: Improving the health of our communities**

We will focus on service improvement to drive better outcomes and address inequalities of access to care.

#### **Context**

Our primary function is to deliver excellent care for our population. We are committed to developing our services to ensure we deliver the best care possible across all of our services. We are planning to progress new models of care across several of our specialist services and are looking for further opportunities to excel, most notably in areas that support our demography.

#### Our response

We will deliver high quality care across all of our services, recognised through service user and staff feedback and external assessment (e.g. CQC rating). We will integrate our services to centre care on our service users and we will progress opportunities to improve our models of care, specifically those affecting services with greatest impact on our older population. We will lead integration and become an integrated out of hospital provider.

Priorities	Description
Developing excellent care for our Older People	<ul> <li>Become a recognised leader in frailty</li> <li>Strengthen effective discharge out of acute into community/ home/other</li> <li>Deliver improvements key older peoples' services (Orthopaedics, Ophthalmology)</li> </ul>
Supporting 'digital by default' across all services	<ul> <li>Identify and deliver priority services for fully digital pathways</li> <li>Maximise the digitisation of OPD to support transformation</li> </ul>
Tackling persistent health inequalities across Sussex	<ul> <li>Collaborate with primary care and local authorities to deliver Place-led prevention priorities (smoking, alcohol, obesity)</li> </ul>

What will successful delivery mean for:			
Patients	Staff	The Trust	
"I can access high quality care across all ESHT services"	"lam proud of the care we provide - I see the difference it makes"	"We consistently deliver high quality care, and are here for our communities where and when they need us"	

#### **Strategic aim 2: Collaborating to deliver care better**

We will actively strengthen partnerships to deliver integrated care for the communities.

#### **Context**

With a move towards integrated care, organisations will need to work together to create joined up systems of care centred on the service user. Partnering with other organisations can help realise efficiencies, improve experience of care for service users and support a population health management approach.

#### **Our response**

We will partner with other local providers across sectors to deliver integrated care that improves the health of our population. This will open opportunities for us to develop and sustain our services and provide better care for our service users as the healthcare landscape changes.

Priorities	Description
Driving collaborative change to acute provision to improve access for patients	<ul> <li>Play an active role in delivery of the system Acute Service Review (ASR) initiatives/projects</li> <li>Work with partners on other services/pathways that will improve outcomes for Sussex patients</li> </ul>
Supporting the development of primary and community pathway priorities within the ICS	<ul> <li>Establish models in services that are consistent with system (primary and community) priorities (e.g. Sussex-wide Long Term Conditions)</li> </ul>
Continuing to strengthen joint provision with ESCC across integrated care projects to deliver better care	Fast-track new approaches to integrated care and ensure that Place supports delivery of system priorities

What will successful delivery mean for:			
Patients	Staff	The Trust	
"I feel that my health and well beign comes first - and I understand how the service meets my needs"	"I am confident working across organisations with colleagues because we share a common goal to improve services"	"We are developing our organisational form to deliver services that improve health across Sussex"	



#### **Strategic aim 3: Empowering Our People**

We will nurture our culture and champion the capabilities of our people.

#### **Context**

Our workforce is the heart of our organisation and it is our responsibility to ensure they are supported to deliver the best care possible. With persistent workforce shortages across the NHS we want to create a culture where we champion and develop our people and promote diversity and equality across the organisation. Our staff are keen to be given further opportunities for learning and career progression and we are keen to empower them to lead at all levels and involve them full in the development of our services.

#### Our response

We will empower our staff and develop our culture to support equality and diversity across our organisation. We will develop a workforce that consistently delivers excellent care by embedding our QI approach and collective leadership throughout our organisation. We will develop a digitally-enabled agile and efficient workforce, improving staff and service user experience. Together these will support us to develop a happy, sustainable workforce delivering high quality, integrated care. Our staff are keen to be given further opportunities for learning and career progression and we are keen to empower them to lead at all levels and involve them full in the development of our services.

Priorities	Description
Creating a supportive, rewarding workplace for our people	<ul> <li>Ensure we sustain levels/learning from support provided during COVID &amp; consider best practice</li> <li>Establish and invest in succession management and internal development of our people</li> </ul>
Building on the foundations of a just culture model to enable all staff to feel they have a voice	<ul> <li>Ensure fairness and equality across our organisation</li> <li>Develop collective leadership</li> <li>Strengthen clinical leadership development</li> </ul>
Strengthening our model of improvement to underpin a learning culture	Develop culture change champions to build a network of improvers across the Trust
Implementing digitally enabled flexible working	<ul> <li>Implement an agile working policy as appropriate and efficient</li> <li>Look for opportunities to integrate new technologies into staff daily working practices</li> </ul>

What will successful delivery mean for:			
Patients	Staff	The Trust	
"I am cared for by higly trained staff I feel involved in my care"	"I feel empowared, I am listened to and feel I can support in my care career development"	"We have a culture that promotes continuous improvment. We attract and keep high quality staff"	

#### Strategic aim 4: Ensuring innovative and sustainable care

We will embed a culture of innovative, affordable care that meets the changing needs across Sussex.

#### **Context**

The demand for healthcare is increasing and putting significant pressure across all our services. This means that in many areas "doing the same, but better" will not be enough and even incremental improvement will leave services unsustainable. We will need to transform our service models and create a culture of innovation to ensure that we remain able to deliver high quality care through services that are forward-thinking and viable.

#### **Our response**

We will tackle the rising demand levels by embedding a culture of innovation that promotes research, uses digital tools to support care delivery and progresses prevention initiatives to support the System health and well-being priorities.

Priorities	Description
Ensuring financial viability - Trust and ICS	Develop savings plans to ensure ESHT fits within affordability envelope
Delivering high quality flexible and future-proofed buildings	Adopt zero carbon NHS principles and wider footprint considerations in our Estates planning
Supporting productivity-focused transformation	<ul> <li>Pilot new models of care delivery &amp; measure the impact on footprint/productivity/efficiency</li> <li>Collaborate with other Trusts to develop digital care partnership working (e.g. PACS/RIS)</li> </ul>
Ensuring clinically-led innovation underpins our planning	<ul> <li>Restart clinical networks to focus on clinical innovation - supportive of Trust transformation and ICS/Place priorities</li> <li>Sustain our tertiary provision and maximise opportunities for ESHT</li> </ul>

What will successful delivery mean for:			
Patients	Staff	The Trust	
"I am able to access to new andinnovative care option"	"I feel I can contribute to the delivery of my service - I cand make my ideas happen "	"We are changing the way we work to enable technology-led sustainable improvements"	

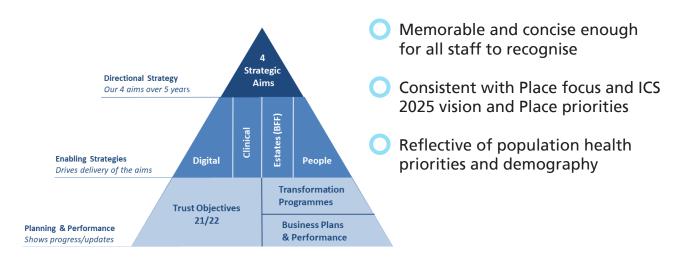


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## TRACKING DELIVERY

#### The ESHT framework

The four strategic aims represent how we describe ESHT and our place in the world as a Sussex, East Sussex player. They are designed to fulfil very specific purposes:



These 4 stragtegic aims cannot exist outside of a wider approach that structures and manages the performance of the organisation effectively. Putting this together gives us the ESHT triangle as an approach to drawing together strategy, planning and delivery across the organisation.

The second layer of this triangle is composed of the key enabling strategies that are of standalone importance and require individual plans. Each of these strategies sets out the "roadmap" priorities over the 5 year horizon (BFF up to 10) for each of these areas. These are consistent with the priorities within the strategic aims and/or explicitly support their achievement.

The final layer of the triangle reflects the near-term/ in-year plans and priorities. Transformation programmes cover Trust-wide 'step change' priorities and will support the operationalisation of internal productivity/efficiency gains. The annual process through which these areas are reviewed/developed includes a triangulation with strategic aims and strategies to ensure trackability/consistency from the granular plans to the strategic aims.

#### The difference our strategic plan will make by 2026

ESHT has delivered significant improvements in quality and financial performance over the last two years; but we are entering a new era for care delivery and – as the saying goes "what got us to here, won't get us over there".

In celebrating all that we have achieved we can recognise the necessary improvements that lie ahead if we are to reach the vision to which we aspire. We are confident that this new strategy will deliver significant benefit to patients and staff and strengthen our organisational processes and collaborative culture.

The summary characteristics over the next page answer the question "what will be different upon successful implementation of this five year strategic plan?" illustrating the scale and nature of the improvements from where we are now. Putting it another way; listed below are the outcomes that effective delivery of the strategic aims and their objectives will deliver.

This is the ESHT we are striving to create by 2026.



Our current model	Our future vision for 2026
Existing approach:	Will enable:
Retains boundaries between traditional acute care model and community services	Operating in Segment 1 of the Single Oversight Framework (SOF)
Exhibits pockets of digital excellence	<ul><li>Recognised by the CQC as outstanding</li><li>Seen by Sussex system partners as a proactive player</li></ul>
Constrains service provision and innovation through poor estate	National recognition for at least one service area (frailty)
Contains some inequalities of access for the service user	Inspirational approaches to work, enabled by a modern environment
Is not based on a single operating model across all sites - so service users, their families and our staff can experience variations in performance and	Recognition as an employer of choice due to both the quality of care we provide and the support we provide for our people
Does not fully engage service users and carers effectively in	Prioritising our approach to green/ sustainability issues – notably our footprint through BFF
service redesign	Artificial Intelligence (AI), apps and virtual clinics as normal models of provision alongside traditional methods of delivery
	Electronic patient records, joining up GP and hospital records
	New clinical roles and ways of working that are collaborative and innovative that reach across organisational boundaries
	A digital-first way of working across our services, leading on ICS priorities
	ESHT as a financially sustainable organisation within a viable Sussex region

We have a wide range of volunteering opportunities and you don't need previous experience in a health setting to volunteer for us.

For more information visit our website:

esht.nhs.uk/volunteering



Page





## **GLOSSARY**

#### of words used in this document

#### **Building For Our Future (BFF)**

This is the name of the Trust's programme co-ordinating both the new developments to be funded by the national Health Infrastructure Plan (HIP) and the Trust-wide transformation initiatives.

#### Care Quality Commission (CQC)

The Care Quality Commission is an executive non-departmental public body of the Department of Health and Social Care (DHSC). It was established in 2009 as the independent regulator of all health and social care services in England. The Care Quality Commission monitors, inspects and regulates hospitals, care homes, GP surgeries, dental practices and other care services to make sure they meet fundamental standards of quality and safety and publishes what it finds, including performance ratings to help people choose care.

## Integrated Care System (ICS) or "System"

Integrated care systems are partnerships that bring together providers and commissioners of NHS services across a geographical area with local authorities and other local partners to collectively plan health and care services to meet the needs of their population. The central aim of ICSs is to integrate care across different organisations and settings, joining up hospital and community-based services, physical and mental health, and health and social care. Since April 2021, all parts of England have been covered by one of 42 ICSs.

## Lower Layer Super Output Areas (LSOAs)

Lower Super Output Area is a unit of statistical measurement that reports outputs over a small geographical area. sector and other local networks.

#### **Outmigration**

Leaving one place in order to reside in another (usually within the same country).

#### **Place**

The term "Place" is not specified within the White Paper but it refers to collaboration at a local level (meaning over a smaller area than an ICS). In Sussex, there are three Places within the System (West Sussex, Brighton and Hove, and East Sussex). The collaboration is between sovereign organisations working together to improve population health outcomes. These organisations will include health, social services, third sector and other local networks.

#### **Primary Care Network (PCN)**

Are a key part of the NHS Long Term Plan, with general practices being a part of a network, typically covering 30,000-50,000 patients. GP practices are working together with community, mental health, social care, pharmacy, hospital and voluntary services in their local areas. The networks provide the structure and funding for services to be developed locally, in response to the needs of the patients they serve.

#### **Single Oversight Framework (SOF)**

This refers to the national approach to monitoring performance of ICSs, Commissioners and Provider organisations. The measurement areas reflect the five national themes aligned to the NHS Long Term Plan: Quality Access/Outcomes, Preventing III Health, Reducing Inequalities, People, Finance/Resources, Leadership/Capability. A sixth theme will be determined locally by individual ICSs.

#### **White Paper**

This refers to what is the Health and Care Bill, laid before Parliament in July 2021. The Bill follows proposals for legislative change originally brought forward by NHS England & NHS Improvement (NHSE/I) in autumn 2019.

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#### **Contact**

#### **Bexhill Hospital**

Holliers Hill, Bexhill-on-Sea, East Sussex, TN40 2DZ 0300 131 4500

#### **Conquest Hospital**

The Ridge, St Leonards-on-Sea, East Sussex, TN37 7RD 0300 131 4500

#### **Eastbourne District General Hospital**

Kings Drive, Eastbourne, East Sussex, BN21 2UD 0300 131 4500