

## Board of Directors

Thursday, 05 July 2018

<b>Report Title:</b>	<b>Approach to Trust Strategy development</b>
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<b>Previously considered by:</b>	EMC (CHUFT & IHT)

**Approval**
         
  **Discussion**
         
  **Information**
         
  **Assurance**

### Executive summary

The Trust has committed, through the full business case (FBC) for merger, to developing its strategy by the end of January 2018-19. This paper and its attachments set out the approach and high-level timetable for developing the strategy.

Whilst Colchester has not had a strategy refresh for a number of years, Ipswich refreshed their strategy in 2016. The approach to developing the ESNEFT strategy takes learning from this process, informed by some of the key staff involved, the Monitor Strategy Development Toolkit and learning from recent strategies of other NHS Trusts.

#### Strategy development framework & timeline

These attachments set out the policy and national strategy context, principles and milestones for the strategy development approach. It identifies leading and enabling strategies within the Trust and their interplay. The governance and content development for the strategy is described, with clear clinical leadership and divisional involvement as well as stakeholder involvement.

#### Framing the strategy – key early decisions for the Trust board

The board has a role early in the process to define the ‘frame’ for the development of the strategy. This attachment sets out the key decisions which will help the clinical and corporate services to focus their contributions to the strategy. It is proposed that the board addresses these decisions at an all-day workshop on 29<sup>th</sup> August; *this paper is presented to allow the board to review the issues in advance and to shape the approach to this important workshop.*

#### Engagement plan

The engagement required to develop the strategy is significant. A draft engagement plan is attached and sets out, at high level, the approach, the stakeholder groups and engagement activity to date.

#### PMO and supporting resources

A programme management office (PMO) is in place, with the Director of Strategy as senior responsible officer. External advisory support is in place for clinical strategy development (Green Door Consulting). Additional support may be required to implement the engagement programme but are within allocated resources.

Funding for strategy development is within the Strategy department budget.

#### Attachments

1. Strategy development framework & timeline
2. Framing the strategy
3. Draft engagement plan

#### Action Required of the Board of Directors

**Approve the proposed approach, identifying any additional requirements.**

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<b>Link to Strategic Objectives (SO)</b>		<b>Please tick</b>
SO1	Improve quality and patient outcomes	<input checked="" type="checkbox"/>
SO2	Provide better value for money	<input checked="" type="checkbox"/>
SO3	Sustain and improve access to services that meet the needs of the population	<input checked="" type="checkbox"/>
SO4	Deliver a sustainable, skilled workforce	<input checked="" type="checkbox"/>

<b>Risk Implications for the Trust</b> <i>(including any clinical and financial consequences)</i>	<b>Click here to enter text</b>
<b>Trust Risk Appetite</b>	Innovation: The board has a flexible view of innovation that supports quality, patient safety and operational effectiveness. It will support the adoption of innovative solutions which involve systems/tech developments as enablers of operational delivery

<b>Legal and regulatory implications</b> <i>(including links to CQC outcomes, Monitor, inspections, audits, etc)</i>	The strategy must enable the Trust to meet its regulatory requirements and create the conditions for high-quality, sustainable service delivery.
<b>Financial Implications</b>	The strategy must enable the Trust to deliver its financial commitments in line with the LTFM.
<b>Equality and Diversity</b>	Any changes to services proposed in the strategy will require equality impact assessment and may also be subject to public consultation in due course.