

**Trust Board paper J4**

<b>Meeting title:</b>	Public Trust Board				
<b>Date of the meeting:</b>	13 June 2024				
<b>Title:</b>	<b>Escalation Report: Our Future Hospitals and Transformation Committee 22 May 2024</b>				
<b>Report presented by:</b>	Dr Andy Haynes MBE, OFH&TC Non-Executive Director Chair				
<b>Report written by:</b>	Alison Moss, Corporate and Committee Services Officer				
<b>Action – this paper is for:</b>	Decision/Approval		Assurance	x	Update
<b>Where this report has been discussed previously</b>	Not applicable				

<b>To your knowledge, does the report provide assurance or mitigate any significant risks? If yes, please detail which</b>
BAF risk 8 (IT infrastructure)

<b>Impact assessment</b>
NHP - New Hospital Programme SRO – Senior responsible Officer

**1. Purpose of the Report**

To provide assurance to the Trust Board on the work of the Our Future Hospitals and Transformation Committee and escalate any issues as required.

**2. Recommendation**

To note the report.

**3. Summary**

The Committee met on 22 May 2024. The meeting was quorate and considered the following reports.

**4. Discussion Items**

**4.1 Digital, Data & Technology Enabling Strategy 2024-27 (in mitigation of BAF risk 08 'IT infrastructure unfit for the future').**

The strategy is a key enabler to the overarching Trust strategy and has been widely consulted upon. Three key frameworks inform the strategy: UHL's 'Leading in Healthcare, Trusted in Communities'; strategy expectations listed in the 2024 NHSE Digital Maturity Assessment and 'What Good Looks Like' (an NHSE framework for assessment of digital capability and maturity).

The Committee supported the strategy and suggested that it be amplified with respect to the strategic goal of 'partnerships for impact' and digital inclusion.

The challenge is to balance the need to ensure the right foundation and being open to innovation and exploiting opportunities when they arise. The Committee questioned whether there were sufficient resources to deliver the strategy. Whilst the delivery plan provides more detail on what can be achieved, it is not yet clear what proportion of the national funding UHL will receive. The level of funding will determine the pace of change.

There will be summary documents to support engagement with stakeholders.

## **4.2 Our Future Hospitals Programme Director/ SRO Update**

### **Live Projects**

The plan to open the East Midlands Planned Care Centre (EMPCC) is going well. A huge amount of work had been undertaken to mitigate risks. Early recruitment to key posts had been agreed. Whilst the digital innovation was dependent of the deployment of the Patient Administration System (PAS), alternative plans were being drawn up in the event it did not go ahead prior to the Centre opening. The proposal for an additional 60 car parking spaces at Leicester General Hospital is being progressed, Capital funding had been agreed to support TrustMed. The Target Operating Model for both operations and digital would be presented to the next meeting.

Approval for the Outline Business Case (OBC) for the LRI Enabling Works is expected from NHSE in August 2024. In the meantime, the Trust is developing the Full Business Case. Work is in train for the OBC for the Glenfield Hospital Enabling Works linked to the Glenfield wards case.

Plans to expand the Leicester Diabetes Centre are progressing and a Short Form Business Case will be presented to Trust Board in October 2024.

## **4.3 Clinical Digital Review Themes and Action Update (in mitigation of BAF risk 08 'IT infrastructure unfit for the future').**

The Committee received an update on the progress made in responding to a review of the Trust's clinical digital governance. The Committee was assured in respect of the progress to strengthen clinical digital leadership and governance; developing a digital vision and implementation plan; ensuring clinical safety, prioritising data driven clinical decision-making; investing in digital resources and skills; and strengthening UHL/Nervecentre partnership.

## **4.4 Digital Programme Plan 2024/25**

The Committee received the digital delivery plan for 2024/25 which described the approach to prioritising activities given constraints on capital and revenue funding. The report set out the 5 key areas for focus which sought to achieve a balance between maintaining the core infrastructure and exploiting future initiatives. The main challenge was the investment needed, and activities currently on hold pending any further funding being made available were highlighted. The key focus for 2024/25 would be the replacement of PAS and the network refresh.

The Committee sought to understand the scale of risks and considered that the Trust Board needed to be sighted to what the Trust is not going to do and the potential impact.

## **4.5 UHL IMPACT Programme**

The Committee was updated on the development of UHL's Transformation & Improvement Programme 2024-2026 'UHL IMPACT', and the progress of the Continuous Quality Improvement and Operational Productivity Programmes. The development of transformation programme across

UHL has three objectives: systematising improvement; building capability & capacity; and delivering change with impact.

The National Clinical Director for Improvement considered that the Trust had an excellent structured approach to improvement which could be promoted nationally. He acknowledged that the transformation team was too small and that the Trust was unable to put enough time into the dosing model to spread the culture of Quality Improvement.

It was acknowledged that the approach was UHL-centric at present. There is a need for fundamental change across the Integrated Care System and specifically for urgent and emergency care to reduce demand by managing patients' long-term conditions and frailty.

**Date of next meeting – 19 June 2024**