



LONDON AMBULANCE SERVICE TRUST BOARD

DATE: 29TH JANUARY 2013

PAPER FOR DISCUSSION

Document Title:	2013/14 business plan
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Why is this coming to the Trust Board?	To advise the Trust Board of the process for the development, approval and submission of the 2013/14 business plan
This paper has been previously presented to:	<input type="checkbox"/> Strategy Review and Planning Committee <input checked="" type="checkbox"/> Executive Management Team <input type="checkbox"/> Quality Committee <input type="checkbox"/> Audit Committee <input type="checkbox"/> Clinical Quality Safety and Effectiveness Committee <input type="checkbox"/> Risk Compliance and Assurance Group <input type="checkbox"/> Learning from Experience Group <input checked="" type="checkbox"/> Finance and Investment Committee <input type="checkbox"/> Other
Recommendation for the Trust Board:	To understand the 2013/14 business planning process and the support and sign off required by the Trust Board through to final submission on 5 th April 2013
Key issues and risks arising from this paper	
<p>The NTDA have published the planning and technical guidance for the preparation and submission of the 2013/14 business plans. The attached document summarises the planning guidance. Key issues are:</p> <ul style="list-style-type: none"> • The outcome of the capacity review in terms of commissioner investment and the level of efficiency required by the Trust over and above the national 4% efficiency to meet any gap: using all efficiencies delivered as part of the ORH capacity review to support the cost of this seriously limits the Trust's ability to deliver the national savings requirement of 4 percent. • Achieving successful contract outcomes for 2013/14 within the required timeframe. • Ensuring consistency with the Integrated Business Plan and Long Tem Financial Model – the NHS Trust Development Authority require 2013/14 plans to reflect the 1st year of the longer term strategy. • Sign off by the Medical and Nursing directors on the workforce plan, CIPs; assessment by them of the quality and productivity plans; presentation by them to the Board of the quality impact assessment of the 3 plans referred to here, in public, for consideration and endorsement. • 1st cut submission to the NHS Trust Development Authority (NTDA) by 25th January to include: workforce plans, financial plans, planning checklist (self assessment of compliance), and an overarching presentation. • Final submission by 5th April 2013. Trust Board approval on 26th March. 	
Executive Summary	
The planning guidance sets out the expectations for Trusts to deliver a fully integrated plan	

focussing on high quality services, living within resources available, and creating business processes to underpin future sustainability, in the medium-long term as well as the year ahead.

Trust Boards will fully endorse the plans submitted for 13/14 which are underpinned by proper clinical governance processes and represent absolute commitment from the Trust to deliver in 2013/14 and beyond.

The Board should note in particular the three clear focus areas of quality, delivery and sustainability as outlined on page 1 of the summary document. Four sections then follow on the content of the integrated plan: high quality services; core standards; workforce; and finance. Underpinning this are the contract system and CQUINs.

The Trust is asked to identify 5 key areas of delivery where there is significant variation from the top performers in the NHS. The 5 proposed areas that would then be signposted in the strategies can be linked to the CQC outcomes, the staff survey and to feedback from patients/service users and from our staff. For example: organisational culture – high morale linked to high quality service provision and outcomes as evidenced by the CQC report for December 2012, and from the annual staff survey; also signposting staff engagement and communication; commitment to training thereby equipping our staff with the skills they need to provide high standards of care. Using clinical quality indicators to benchmark where we need to improve the standard of care for urgent/category C patients. Using the CQC outcomes and regulations to confirm where we know there to be issues such as not having the right equipment in the right place at the right time to do the job required and then ensuring that where we have committed to take action, we see this through and are able to evidence the impact. We also need to recognise that some of these issues can be improved within the coming year however some areas, such as organisational culture, take more time to develop and take effect and we need to commit to such a programme over the strategic period.

We are also asked to identify 3-6 areas of high priority support and development needs. This is likely to be based on the board and senior management development programme that supports delivery of the Trust's strategic goals over the next 5 years.

The 1st cut submission is being submitted on 25th January and the high level/key messages within this will be discussed with the Board on 29th January.

Attachments

Summary of NHS Trust Development Authority Business Planning Guidance

Quality Strategy

This paper supports the following domains of the quality strategy

- Staff/Workforce
- Performance
- Clinical Intervention
- Safety
- Clinical Outcomes
- Dignity
- Satisfaction

Strategic Goals 2010 – 13

This paper supports the achievement of the following corporate objectives:

- To have staff who are skilled, confident, motivated and feel valued and work in a safe environment
- To improve our delivery of safe and high quality patient care using all available pathways
- To be efficient and productive in delivering our commitments and to continually improve

Risk Implications

This paper supports the mitigation of the following strategic risks:

- That we fail to effectively fulfil responsibilities to deliver high quality and safe care
- That we cannot maintain and deliver the core service along with the performance expected
- That we are unable to match financial resources with priorities
- That our strategic direction and pace of innovation to achieve this are compromised

Equality Analysis

Has an Equality Analysis been carried out?

- Yes
- No however this will be undertaken on the final draft of the 2013/14 business plan.
Key issues from the assessment:

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