Our Strategy

CELEBRATING OUR

east coast
community healthcare

10TH ANNIVERSARY · 2021

DESTINATION
2025

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Celebrating a decade of building healthier communities

Celebrating a decade of high quality community care

It is ten years since East Coast Community Healthcare CIC (ECCH) launched as a social enterprise. We take great pride in the high quality of community-based NHS care we have delivered in Norfolk and Suffolk since October 2011.

We believe the social enterprise model offers us the opportunity to create a more sustainable and flexible organisation, to take charge of our own destiny and make real improvements to services for patients.

We are a 'people first' organisation, with most of our funds spent on staff to care for our local communities. Crucially, we are also staff-owned. This means our 750 staff have the opportunity to have a stake – and therefore a real say – in how the organisation runs. 80% of staff are shareholders - well above average for a social enterprise - and we have two Staff Directors, appointed by their shareholder colleagues, who sit on the Board and help shape our business. We also have a Shareholder Council made up of representatives from all departments, which is a sub-committee of the Board and is consulted on important issues affecting the organisation.

Delivering positive patient outcomes

This document outlines ECCH's new Strategy – Destination 2025 – which brings together the ideas and aspirations of our entire organisation.

One of the first things I noticed when I joined ECCH in January 2021 was my colleagues' pride in their work and their drive to be recognised as leaders in their field. As we launch this strategy and look to build an organisation for the future, it is my aim to develop that ambition, empowering teams to use their knowledge and skills to innovate. If we do this well, we can enhance our services for the benefit of local people and deliver on our vision to build healthier communities through outstanding healthcare.

We are already implementing development plans for our Primary Care Home model which launched in 2019, and has been forward-thinking from the outset. We plan to streamline and standardise our successful working practices while increasing integration with the acute hospitals, our social care partners and local primary care practices to deliver better connected services. In line with the aims of the new Integrated Care System, this means people will receive more joined-up care, and find it easier to access that care.

It is important that we grow our business and we intend to achieve this by diversifying some of our core services and partnering with other healthcare organisations and third sector organisations to co-produce services tailored to the patients who need them. This will help us to improve health outcomes and enable us to re-invest more in our communities. We want to shift focus towards preventing conditions rather than treating them, involving service users in decisions about their care and building their confidence to self-manage elements of this care.

The use of digital technology within healthcare has come into sharp focus during the pandemic and we are embracing that. We have introduced remote video consultations and improved the way we triage patients and work alongside our primary care colleagues. We now plan to use technology to further improve our effectiveness and efficiency, and to provide care for people in a way that is more convenient for them.

This document outlines our strategy for developing ECCH in the coming years and, from the feedback I have had from staff as we work together to develop it, I know we are all excited about the opportunities we have ahead of us.

Ian Hutchison, Chief Executive

Our vision and values

Our Vision

To **build healthier communities** through outstanding healthcare, as a provider, partner and employer of choice.

How we deliver our purpose and strategy is what really differentiates us and sets us apart, and that is driven by our culture, values and behaviours.

Our Values outline the core behaviours that we can all achieve and are summarised as the acronym 'CARE'. This stands for: Compassion, Action, Respect, Everyone.

'CARE' is the foundation of everything we do and everything we stand for. Our culture is driven by how we interact with each other, our patients, our community and our stakeholders.

We want our colleagues to feel empowered to be the best they can be, to focus on building community relationships, making connections and using their judgement to deliver exceptional patient care.
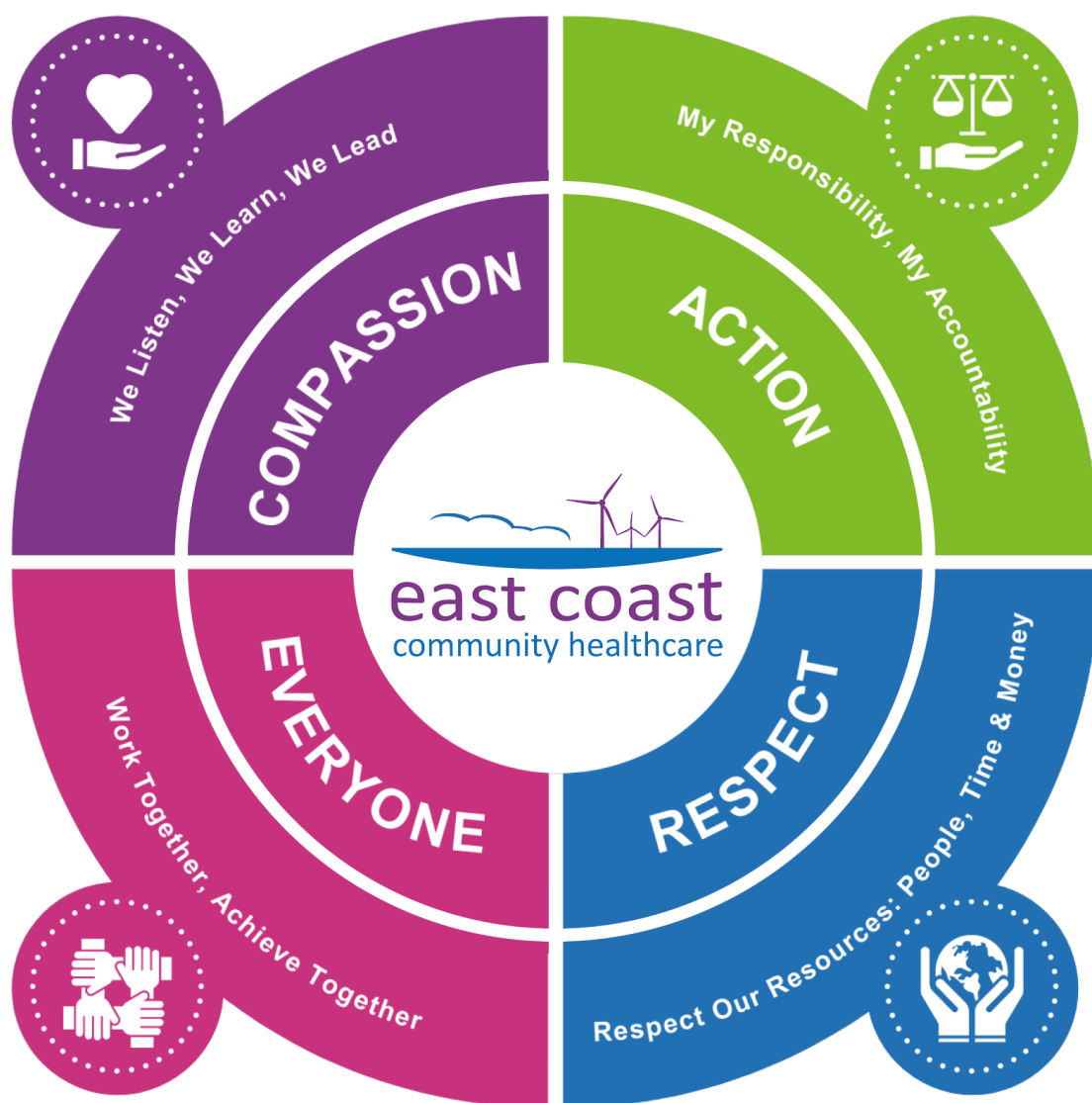
Why we need to change

The healthcare system is changing

We want to ensure that ECCH remains an **indispensable** part of the changing healthcare system, delivering **excellent outcomes** for our patients, with **improved financial performance** and reduced reliance on any single income stream.

Our innovative place-based model, with an integrated workforce and strong focus on partnerships and person-centred care, is forward-thinking and challenges more traditional approaches. This places us in a **strong position to influence** how changes to the local system are implemented.

We are currently dependent on a small number of NHS contracts. ECCH therefore needs to **diversify** income streams and **develop** new services in order to become more profitable, sustainable and to better serve our communities.

Changes around us include:

The development of the Integrated Care System (ICS) means that providers are required to work closer together.

We have an ageing population, with healthcare shifting its focus towards proactive interventions.

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COVID-19 has put an even greater strain on our staff and a system that was already at capacity, and the effect will be felt for some time to come.

Technology and data enable new ways of working and are becoming more important in decision-making.

Our ambition

These statements describe the organisation we want to be and are the principles that guide our strategy.

We aspire to be the provider, partner and employer of choice in all the areas in which we work:

1
Valued community partner
Be a valued part of our local communities, **co-producing and delivering** - in partnership with local people and community organisations - services that improve health outcomes

2
Proud to work for ECCH
Be the organisation that people aspire to work in, **where staff feel valued**, empowered, and proud to work for ECCH.

3
Integral to the ICS
Be an integral part of the ICS - the **'go-to' organisation** for providing forward-thinking healthcare.

4
Hand-in-hand with primary care
Work **hand-in-hand with primary care**, collectively managing resources to provide the right care, in the right place, with the right team, at the right time.

5
Leaders in innovation
Lead the way in innovation, **utilising digital technology** and new ways of working to deliver our services even more effectively, efficiently and productively.

6
Sustainable services
Provide a sustainable portfolio of services across a diverse mix of revenue sources, **reinvesting surplus** to deliver even better services for our communities.

Our strategy

Our strategy sets out what we will do to benefit our communities.

1. Improve health outcomes by leading the development of community-based care

2. Grow, diversify and partner to increase the value we re-invest into our communities

**3. Build an organisation for the future**

Making it happen

There are five key workstreams underpinning our strategy:

1. Place-based Care

Building on the Primary Care Home (PCH) concept, the **Place-based Care** programme is where improvements delivered through our strategy are **brought together**, putting into practice our aim of delivering outstanding community care.

- A simple and consistent operating model across all 4 PCHs is fundamental to doing this well.

- Integrated care through multidisciplinary teams will continue to be central to our model.

- Greater integration with primary care is key to a successful outcome, as well as collaboration and strong partnerships across the wider health and care ecosystem.

- Coordinating our response to major ICS programmes, such as Discharge to Assess (D2A), Ageing Well and Urgent and Emergency Care (UEC), will ensure our transformation remains aligned to ICS system and partner priorities – and we are willing to take a system leadership role, to develop these initiatives, wherever appropriate.

- Particular emphasis will be given to reducing hospital admissions through greater patient participation in decisions about their care, improved self-management of conditions and working with partners to promote population health.
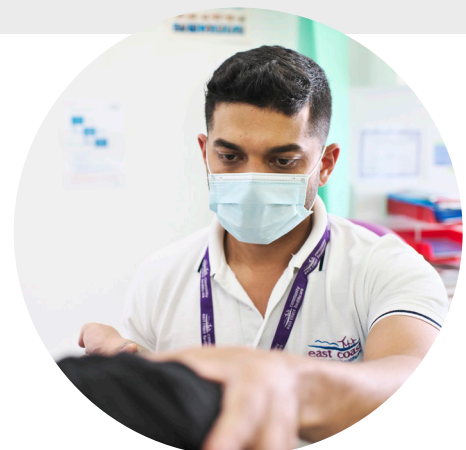
📊 2. Grow, Diversify & Partner

The Grow, Diversify and Partner programme will increase our **commercial and financial resilience** as an organisation, build the resources we need to develop and grow, and create more surplus resources to invest in the communities we serve.

- We will improve the efficiency of our publicly funded work and thereby increase our capacity to deliver.

- Adapting our services and finding (or creating) new markets is essential if we are to deliver our ambition.

- We will build on our strengths as an organisation and look for areas where we can add value and scale our offering. This will be delivered through a combination of organic growth, acquisition and partnering with other organisations.

This approach is new to ECCH, so we will start in a measured way and then accelerate as we grow in experience and confidence. The programme will also ensure that we are optimising our financial resources through sound, commercially-focused business management across the organisation.

We will be guided by our core beliefs and principles as we diversify and grow, and our reinvestment will be focused on developing our teams, expanding and improving our core statutory activity and investing, with partners, in areas that will make tangible improvements to population health.

🖥️ 3. Digital ECCH

Effective use of **digital** technology is key to delivering a **'step change'** in outcomes for our staff and, crucially, for our patients and service users.

The user will be the focus of Digital ECCH as we seek out and develop system solutions aligned with ICS initiatives, wherever practicable.

We will aim for system integration and simplicity in our digital architecture and, wherever possible, look to optimise the capability within existing systems, rather than adding complexity by introducing new ones.

Central to the success of the workstream, and our success as an organisation, will be how we manage and use our data.

To help us coordinate our digital transformation, we will focus effort on 3 main areas: patients, partners and our own organisation. We will:

- Enhance the patient user interface (websites/virtual clinics etc.) to improve access and patients' ability to self-care.

- Align digital operational systems with health and social care partners to enable better partnership working.

- Have fewer, simpler and better systems within the organisation to facilitate collaboration and improve our efficiency and effectiveness.

👥 4. The Way We Lead

Improving **The Way We Lead** will empower our staff and unlock potential, helping us to create a more **dynamic and innovative** organisation. Removing obstacles to effective delegation, giving managers the confidence to lead and giving our staff the information and permission to make decisions at the appropriate level, will create an organisation that attracts and retains talent from across the system.

• Honest and constructive developmental conversations between leaders, individuals and their teams will be a key enabler.

• A simplified objective setting, review and appraisal process, focused on individual and team development, will build strong, confident and resilient teams capable of excelling in the most challenging of circumstances.

• Removing complexity from our organisational design, increasing spans of control and reducing management layers will enable greater empowerment for junior leaders and their teams.

Behavioural change requires strong, visible leadership and leaders will be required to role model the behaviours and support their teams to adopt them.

💡 5. Simplify How We Work

Simplify How We Work has a very **broad remit** and is where most of the detailed improvement to ways of working will be initiated and delivered.

Using 'Agile Scrum' methodology wherever possible, this workstream will identify and deliver improved outcomes and efficiencies by removing complexity, simplifying our processes and making it easier for other organisations to work with us.

Closely aligned to our quality agenda, this workstream will deliver improvements to clinical pathways, care coordination and other supporting processes across the organisation.

Following the principle of 'simplify before you automate', the workstream will act as a key enabler for successful digital transformation activity, as well as being a critical contributor to the success of our Place-based Care programme.

Making a difference: Service users & patients

Service users and patients will be better supported to manage their own health and wellbeing in their own homes and communities, where appropriate, and will experience a more seamless route of care.

Patients will be seen more quickly by the right person, in the right place, at the right time - and will spend less time waiting.

Our focus on reducing population health inequalities will see our whole community benefit, particularly those with long-term conditions and those who have previously been hard to reach.

Examples of what this means in practice:

Patients will only have to tell their story once

Waiting lists for specialist services will be shorter

Our website will provide patients with helpful information on how to care for their conditions

Conditions can be diagnosed and treated more quickly as a result of remote consultations and better collaboration between professionals

Making a difference: Colleagues

Staff will operate across organisational boundaries unhindered by governance, within a structure that supports greater empowerment.

Improvements to pathways will create additional capacity within our services.

Staff closer to the patient will be empowered and supported to take more decisions, rather than always having to seek higher approval.

We will simplify administrative processes to make it quicker and easier to achieve results. Improved digital systems will enable more seamless communication between ECCH staff and our partners.

Growth and diversification will open up new career opportunities for staff as additional services emerge.

Examples of what this means in practice:

Faster turnaround on decisions, such as spending on equipment or a specific treatment or procedure

New ways of working, such as an advanced matrix to triage patients, designed with primary, social care and acute partners (with training and support to help staff adjust)

Increased functionality of digital tools (e.g. SystmOne and Teams), such as a 'quick response' chat function for GPs and automated reminders for appointments or medication

Our quality

For health and social care providers, quality assurance involves assessing our services against a set of essential standards, in three key areas:

- **Clinical Effectiveness**
- **Patient Safety**
- **Patient Experience**

At ECCH, we are passionate about delivering patient-centred care. It is our ambition to develop a well-led culture of continuous quality improvement, supported by robust systems and processes and organisational learning.

We also want to ensure our services are person-centred, clinically effective, responsive to the needs of the populations we serve, delivering a positive experience and safe for our staff and patients all the time.
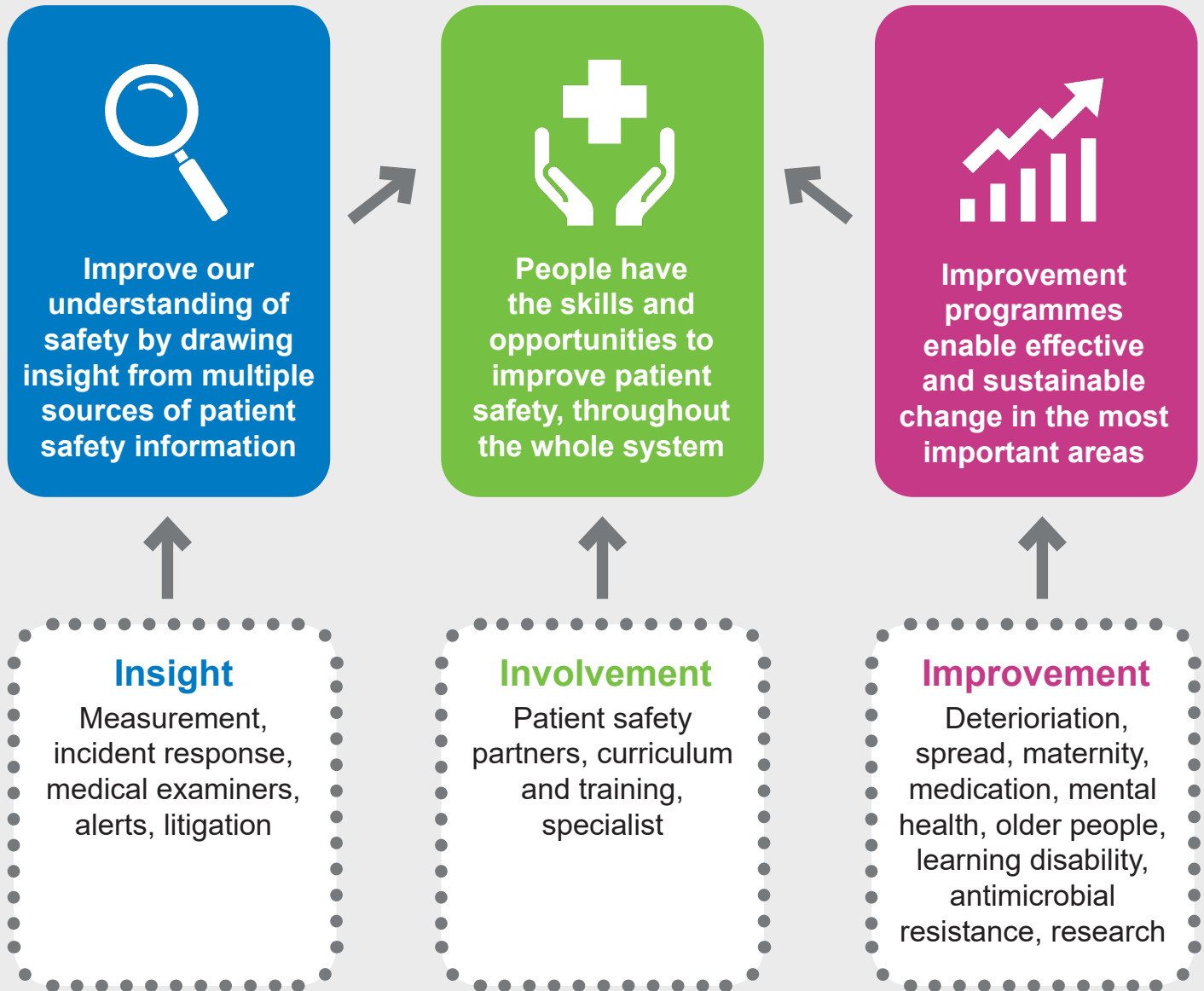
We use intelligence from a range of sources to provide evidence that quality standards are being met and, if they are not, we identify and implement remedial action.

By obtaining feedback, we can improve our services and meet the needs of our patients.

By ensuring our staff are highly skilled, we can ensure we provide optimum care for our patients and improve their health outcomes.

Continuously improving patient safety

Improve our understanding of safety by drawing insight from multiple sources of patient safety information

People have the skills and opportunities to improve patient safety, throughout the whole system

Improvement programmes enable effective and sustainable change in the most important areas

Insight
Measurement, incident response, medical examiners, alerts, litigation

Involvement
Patient safety partners, curriculum and training, specialist

Improvement
Deteriorioration, spread, maternity, medication, mental health, older people, learning disability, antimicrobial resistance, research

A patient safety *culture*
A patient safety *system*

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