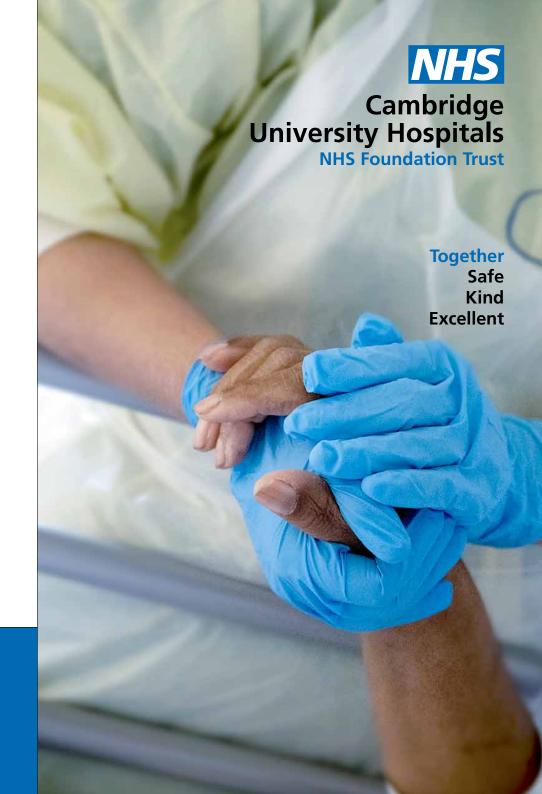
# **CUH Together Our Strategy**

Our strategy for a healthier life for everyone through care, learning and research



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#### **Foreword**

CUH is about people: the patients we care for, the staff who deliver that care, the community we serve and the partners we work with across our health and care system. Throughout the pandemic our colleagues went to extraordinary lengths to serve our patients and each other, living our values: Together – Safe, Kind, Excellent.

Our people delivered outstanding care to patients with Covid in uncertain and dangerous circumstances; continued to provide 24/7 emergency care and as much planned care as possible; and led world-leading research that developed the treatments that are enabling society to return to a new normal.

In November 2021 it was our privilege to award the Covid Star to our colleagues and members of the wider CUH community as a lasting token of gratitude for their contribution during the pandemic.

Looking further back, our previous strategy led to some significant achievements:

 A hugely improved 'Good' rating from the Care Quality Commission

- Deepening relationships with health and care partners locally and regionally
- Continued expansion of the Cambridge Biomedical Campus (CBC) with industry and academic partners
- Cambridge Children's and Cancer Research hospitals in development with support from the Government

Looking forward, we have progressed this strategy alongside colleagues, patients and partners – and we are excited about the next phase of our journey together. We set out an ambitious agenda for care, learning and research for the next three years, articulating the next phase of long-standing priorities as we come out of the pandemic, such as:

- Tackling a huge backlog and long waits for planned care
- Providing emergency care to a growing and ageing population
- Building a culture of continuously improving outcomes, experience, value and equity
- Conducting world-leading research with academic and industry partners

 Ensuring we are sufficiently staffed, and that all our staff feel equally valued and can thrive

We also set out opportunities to realise our potential over the next three years:

- Working more closely with primary, community and social care partners, and using technology, to help patients to stay well at home
- Working more closely with other hospitals in our region to increase local access to specialised services
- Tackling inequalities in access to, experience of, and outcomes from our services between different patient groups
- Delivering major new hospital builds on the CBC: Cambridge Children's and Cancer Research hospitals
- Reducing our carbon emissions on the way to NHS net zero to tackle the climate emergency

We look forward to working with colleagues, patients and partners to deliver this ambitious strategy over the next three years.

Mike More Roland Sinker
Chair Chief Executive

#### Introduction

#### Who we are?

Cambridge University Hospitals is an internationally renowned healthcare organisation. Part of the NHS, we deliver expert care for patients while our vibrant teaching community equips and empowers the healthcare leaders of tomorrow.

CUH – Addenbrooke's and the Rosie – is a community of twelve thousand people who are passionate about improving people's lives. We provide services as a local hospital for people in Cambridge, South and East Cambridgeshire, and as a specialist hospital for a much wider population. As an academic medical centre we work across 75 medical and surgical specialties, with corporate and support teams – and health, care, academic and industry partners – to deliver care, learning and research.

Each of these three strands is equally important: caring for patients who are sick today while training the skilled staff who will care for patients in the future and researching the next generation of advances to clinical

practice. Each strand also supports the other two strands: conducting research attracts staff wanting to broaden their skills and enables our patients to benefit from better care sooner; and providing care enables innovative clinical treatments to get into practice sooner.

Our location in Cambridge, as part of an innovation ecosystem, unlocks huge opportunity to go further. As the largest centre of health science and medical research in Europe, we aspire to continue developing the crossindustry partnerships that further improve outcomes for patients while powering economic growth.

#### Care – CUH provides:

- Emergency, medical and surgical care for a local population of half a million people in Cambridge, South and East Cambridgeshire; and is a member of the Integrated Care Board serving a million people across Cambridgeshire and Peterborough
- Specialist services for a regional population of six million people across the East of England
- National services in organ transplantation, cancer,

neurosciences, paediatrics, genetics and rare or complex conditions

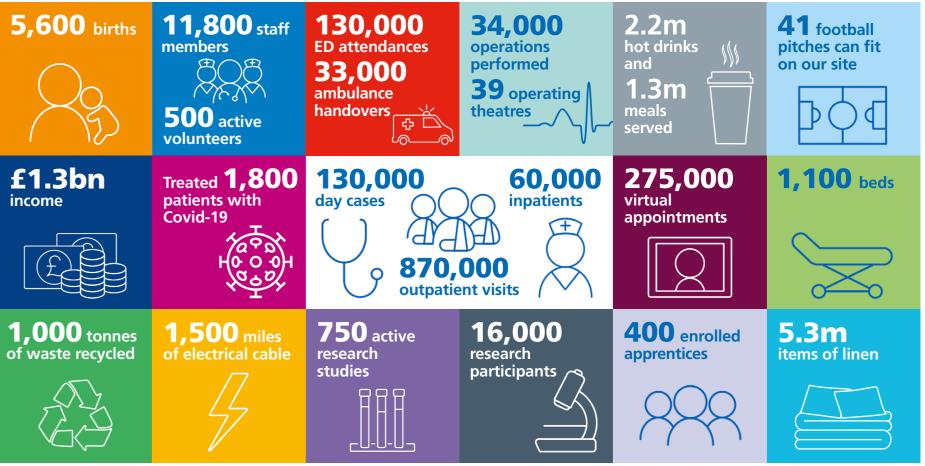
## **Learning** – CUH is a teaching hospital for:

- Medical students from the University of Cambridge
- Undergraduate students and apprentices in areas including Nursing, Midwifery, Pharmacy and Allied Health Professions, from a number of partner Higher Education providers
- Apprentices in non-clinical roles including estates, engineering, maintenance, plumbing, customer service, administration and data

#### Research – CUH is:

- Part of the National Institute for Health and Care Research (NIHR) through the Cambridge Biomedical Research Centre (BRC)
- A member of Cambridge University Health Partners (CUHP), one of eight Academic Health Science Centres
- A partner with the University of Cambridge and a thriving ecosystem of life sciences and technology industry on and beyond the Cambridge Biomedical Campus (CBC)

#### A year at CUH in numbers



2021/22

#### **The Strategy Triangle**



#### **Our commitments in summary**

Improving patient care	Supporting our staff	Building for the future
Integrated care: We will work with NHS, other public sector and voluntary sector organisations to improve the health of our local population	Resourcing: We will invest to ensure that we are well staffed to deliver safe and high quality care	Specialised services: We will work with hospitals across the East of England to provide high quality specialised care for more patients closer to home
Emergency care: When patients come to the hospital in an emergency we will treat them, and help them to return home, quickly	Ambition: We will invest in education, learning, development and new ways of working	Research and life sciences: We will conduct world-leading research that improves care and drives economic growth
Planned care: When patients need planned care we will see them as quickly and efficiently as possible	Good work: We will strive to ensure that working at CUH will positively impact our health, safety and well-being	New hospitals and the estate: We will maintain a safe estate and invest in new facilities to improve care for patients locally, regionally and nationally
Health inequalities: We will tackle disparity in health outcomes, access to care and experience between patient groups	Inclusion: We will seek to drive out inequality, recognising that we are stronger when we value difference and inclusion	Climate change: We will tackle the climate emergency and enhance environmental sustainability
Quality, safety and improvement: We will continuously improve the quality, safety and experience of all our services	Relationships: We will foster compassionate and enabling working relationships	Digital: We will use technology and data to improve care

#### **Our strategic priorities**

#### Improving patient care

Integrated care: We will work with NHS, other public sector and voluntary sector organisations to improve the health of our local population

We are proud to be part of a diverse system of health and care partners dedicated to serving our local population in the South of Cambridgeshire: GPs, community NHS teams, social care workers, public health professionals, care providers, local government, patient groups and many voluntary sector organisations.

We want all our patients to live long and healthy lives. Good health helps people to thrive at home, at work and in their community. However, our population is ageing and living for longer in poor health. Health and care services should work together to help patients stay well and spot early signs of ill health, and hospitals like CUH have a responsibility to work with others to address the wider

determinants of ill health: poverty, loneliness, debt, poor housing, health risk factors such as smoking and obesity, as well as long-term health conditions. By working in this way, the NHS can support patients to thrive in their normal life, rather than simply restoring people to health when they are sick.

Each year, one out of one hundred and fifty people in our local population has an emergency admission to hospital for a potentially avoidable exacerbation of a long-term condition such as asthma.

Additionally, many outpatient appointments currently performed at the hospital could be undertaken closer to home, as part of an integrated team in the community. By improving the health and well-being of our population we reduce the need for unplanned hospital care, which means we can care for more patients requiring treatment that can only be provided in a hospital.



#### By 2025 we want to:

- Improve the health of our local population by integrating pathways across primary, community, secondary and social care alongside the voluntary sector and local government
- Reduce unnecessary hospitalisations by supporting more patients at home during a health crisis, and enabling patients in hospital to return home as soon as they are able
- Increase the value of every pound spent to maximise the health and well-being of our population, with an increasing share of resources used to support patients outside the hospital
- Deepen trust and relationships with partners in other organisations so that we work together with energy and purpose to achieve our shared outcomes for those we serve

#### We will achieve this by:

 Hosting the South Place partnership of health and social care providers, local government, voluntary sector organisations and partners

- that will enable us to work even closer to make collective decisions, co-designed with patients, and use a shared budget to improve population health and health outcomes, share learning, expertise and resources and commission services to provide better integrated local services
- Supporting the South Place to nurture 'integrated neighbourhoods' that add more of our staff to single teams based around local Primary Care Networks and use data to target services where they are needed most
- Supporting the South Place to lead key operational priorities at the interface of secondary, primary, community, voluntary and social care such as admission avoidance and hospital discharge
- Implementing a change programme within CUH to ensure all of our services focus on proactively improving the health of our population and making the best use of collective resources, alongside treating patients who are currently in the hospital

 Embedding integrated care through other elements of our strategy, including our new builds and digital transformation Emergency care: When patients come to the hospital in an emergency we will treat them, and help them to return home, quickly

Acute health emergencies are extremely frightening for patients and their loved ones. Quick access to highly trained clinical teams and the right equipment can be the difference between life and death, and gives patients the best chance of recovery.

Major trauma is the leading cause of death for people under 40, and CUH is the Major Trauma Centre for the East of England, providing surgery, critical care, inpatient, rehabilitation and discharge services to some of the sickest patients in our region.

We are seeing the highest ever activity in our Emergency Department (ED) from our growing and ageing population, increasingly including those with multiple long-term conditions. Patients requiring admissions are waiting much longer

because we have fewer beds available, which also leads to crowding and delays in offloading ambulances. Patients who wait the longest are often experiencing a mental health crisis, and we have many frequent attenders with very complex needs.

In this context we are working closely with other partners in the urgent care pathway to improve services.

#### By 2025 we want to:

- Reduce the proportion of patients needing to access emergency care, particularly at hospital
- Reduce crowding in the ED to ensure patients are treated, and staff are able to work, in a calm environment
- Reduce journey times through the ED to ensure patients move on to the most appropriate setting as quickly as possible
- Reduce waiting times for patients requiring admission to leave the ED and reach an appropriate inpatient bed

- Reduce excess length-of-stay for emergency admissions to ensure patients return home as soon as they are able
- Reduce ambulance handover delays to ensure the next acutely unwell patients in the community get quick access to expert clinical care
- Reduce avoidable harm in emergency pathways and increase the quality, safety and patient experience in these services
- Ensure equitable access to high quality emergency care for all patients

- Working more closely with primary, community and social care partners to improve population health and reduce the need for unplanned hospital care
- Streaming more patients away from the ED through different channels such as urgent community response,

- video appointments and NHS 111; and to quieter times of day by expanding same-day emergency care (SDEC) and bookable appointments
- Improving flow by embedding a front door frailty model to support patients most at risk, reclaiming assessment units, and maximising use of SDEC
- Modelling admissions and discharges by speciality and ward to optimise bed capacity planning
- Creating more capacity within the ED through use of temporary structures, repurposing adjacent capacity within the hospital and implementing plans rapidly to increase flow including by reverse boarding
- Improving inpatient flow and creating additional community capacity with partners in primary, community and social care



Planned care: When patients need planned care we will see them as quickly and efficiently as possible

Quick access to planned outpatient, diagnostic and surgical care gives patients the best chance to recover from ill-health. During the pandemic waiting times for these treatments increased considerably as our capacity to treat patients was reduced. Many of our patients travel significant distances for specialised treatments that can only be provided at CUH within our region or across the country, and so ensuring we have enough capacity to treat patients as soon as possible is of paramount importance.

Advances in clinical practice, new technology and different ways of working with partners mean our services are continuously evolving to deliver the best care for patients. Over the coming years this will mean working differently to ensure we can treat as many patients as efficiently and effectively as possible, increasing capacity and productivity by helping

frontline teams to identify and implement improvements to care.

Access to planned hospital care is lower among the most deprived patients, which contributes significantly to stark inequalities in life expectancy and healthy life expectancy within our local population and across the East of England. We want everyone to have equitable access to our services and recognise our responsibility to work alongside patients and partners to achieve this.

#### By 2025 we want to:

- Increase resilience of elective capacity to withstand future Covid surges, winter pressures and other shocks
- Achieve outstanding outcomes and experience for patients, and bestin-class productivity and efficiency across all our pathways, informed by national Getting It Right First Time (GIRFT) best practice standards
- Reduce inequalities in access, outcomes and experience within our population

 Achieve national ambitions on access to care including first, follow-up and virtual outpatients plus enhanced advice and guidance, 52-78-104week waiters, 28-day faster diagnosis standard, and 31-day decision to treatment for cancer patients

- Increasing surgical capacity through use of new P2 and Q2 facilities on the Cambridge Biomedical Campus (CBC) as an elective surgical centre, and off-site diagnostic capacity including mobile scanners in the community
- Changing the setting of care, such as conducting more activity in primary care, off-site capacity or at smaller or independent sector hospitals; and the channel of care, such as through virtual appointments
- Using digital technology to raise productivity through remote monitoring, voice recognition and asynchronous communication through MyChart and Secure Chat

- Ensuring patients can return home more quickly and live more independently by promoting rehabilitation, utilising remote technology-enabled care, creating virtual wards and integrated pathways across organisations
- Changing pathways to reduce unnecessary referrals, such as through integration of specialist services into primary care, use of shared decision-making and advice and guidance
- Maintaining transparent clinical prioritisation processes to ensure the sickest patients are treated first and that harm to patients while waiting is minimised
- Reviewing data on access rates and waiting times between different patient groups and acting decisively where inequalities are identified



Health inequalities: We will tackle disparity in health outcomes, access to care and experience between patient groups

Every patient is a unique and equally valued individual. We recognise and value the diversity of all our patients and strive for every patient to have equitable access to our services so that they can live healthier and more fulfilled lives. Age, disability, gender reassignment, race, religion or belief, sex, and sexual orientation have a significant impact on people's health; and, despite our aspirations for equity, significant and long-standing disparities in the actual experience of patients in our communities and in hospital remain, and in some cases are growing.

Deprivation and geography also play a significant role in excess mortality and morbidity of our population, with the poorest areas having higher rates of health risk factors, fewer GPs and lower rates of access to planned care. For example, the life expectancy of traveller communities is approximately 10 to 12 years less than non-traveller populations.

Tackling these inequalities is a growing priority across the NHS, with the Government's focus on 'levelling up' across the country; the NHS's 'Core20PLUS5' framework targeting the most deprived fifth of the population and the five biggest service areas to address inequalities (maternity, severe mental illness, respiratory, cancer and hypertension); increasing focus on racial disparities including through the formation of the NHS Race & Health Observatory and many other initiatives. We are committed to playing our role, and working with others, to ensure every patient receives the safe, kind and excellent care that we aspire to. We achieve this directly through our clinical services, and indirectly as an 'anchor institution' that employs people, purchases goods and services, owns assets, advocates for causes and works with partners.

Other commitments in the strategy also present opportunities to tackle inequalities for patients, inequalities for staff, targeting care to the neediest patients, improving air quality and many others.

#### By 2025 we want to:

- Reduce the gap in avoidable mortality and morbidity between different population groups in our local and regional population
- Reduce the gap in access to and experience of care at CUH between different population groups
- Maximise the positive impact of our core activities to address the wider determinants of health as an 'anchor institution'

- Increasing data completeness and using data to identify and understand disparities in outcomes, access and experience, including using the Equality Delivery System Tool (EDS2) to assess our performance
- Collaborating with staff and partners with lived experience to improve our services including through staff networks, partners in our ICS, Healthwatch and other patient engagement groups
- Playing our role in the five Core20PLUS5 priorities

- Identifying opportunities to address inequalities at each stage of planned care pathways, and working with partners to improve models of care to address these inequalities locally
- Maximising the wider impacts of our core activities to improve the health of our population as an employer, partner, asset-holder and purchaser
- Working with a range of organisations to build inclusive leadership capability



Quality, safety and improvement: We will continuously improve the quality, safety and experience of all our services

As one of our values, safety is a core priority at CUH. Hospitals provide care for people at a time when they are vulnerable and many clinical interventions carry risk.

During the pandemic protecting patients from a highly infectious virus was one of our overriding priorities, and CUH had among the best outcomes for Covid patients, and the lowest rates of in-hospital transmission, in the NHS. We also introduced innovative ways of working to sustain the quality and safety of services during ongoing and unprecedented disruption, but the increase in waiting times across our pathways brings many challenges for quality and safety.

We strive to create a culture accompanied by robust processes that sustainably and continuously improve the quality of services that we provide, investing in improvement capability in leaders and teams, listening to patients and staff, identifying and learning from errors, and sharing good practice.

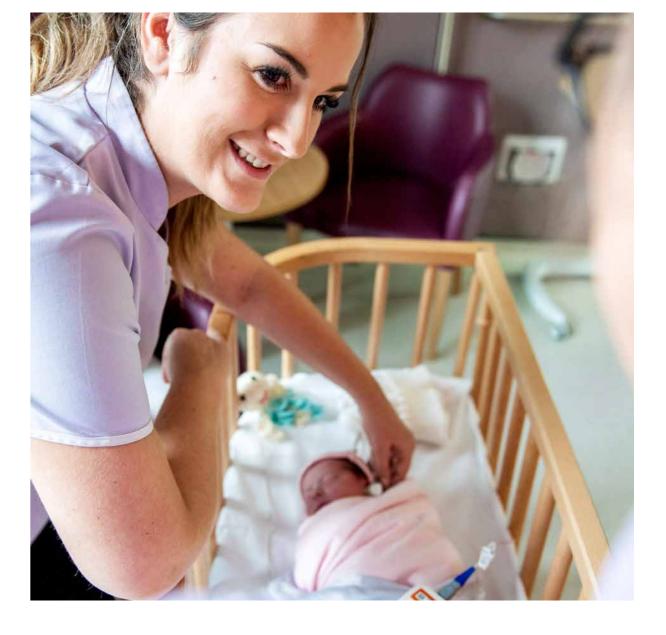
#### By 2025 we want to:

- Continue providing consistently high-quality care to all patients in line with our values, plus CQC and other professional standards
- Continue to learn from safety incidents and promote a process of transparency and learning
- Embed a culture of sustainable continuous improvement where staff are empowered and equipped to lead change
- Create a just culture environment for learning
- Achieve a CQC rating of Outstanding

- Embedding accreditation, safety huddles and quality board reports in all wards and departments
- Implementing the new NHS Patient Safety Strategy including the Patient Safety Incident Response Framework and Patient Safety Partners

- Managing corporate quality processes such as harm reviews, clinical prioritisation and surgical prioritisation groups to prioritise care for patients in greatest need
- Implementing Digital Consent to support a consistent and safe consenting process
- Actively seeking feedback from patients and their loved ones through our Patient Engagement Group, survey data, Patient Advice and Liaison Service (PALS) and other engagement channels
- Refreshing the CUH Mental Health Strategy in line with ICS plans
- Creating psychological safety, encouraging reporting of incidents and errors without fear with a focus on learning and improvement
- Evolving the 'Learning from Deaths' process to identify further improvements to quality and safety
- Embedding After Actions Reviews as an approach to learning
- Investing in leadership training for clinical and non-clinical staff

- Training staff in improvement techniques, supported by the Institute for Healthcare Improvement (IHI)
- Delivering improvement projects across the hospital, supported by the improvement team, or by teams utilising those techniques directly
- Building capacity in divisions to give staff the time, resources and skills required to focus on improvement
- Celebrating and sharing best practice improvements



#### **Supporting our staff**

**Resourcing:** We will invest to ensure that we are well staffed to deliver safe and high quality care

Healthcare is provided by people and all our services rely on having enough staff with the right skills and experience to deliver the wide range of ambitions in this strategy: cleaners, porters, scientists, engineers, nurses, allied health professionals, doctors, administrators and countless others.

CUH employs almost twelve thousand people, but where teams are short of staff patients can come to harm and colleagues are put at risk. In the national staff survey only 24% of our staff said there were enough staff to work safely.

Having made significant progress prior to Covid to reduce our vacancy rates to below 4%, the pressures of the pandemic led some staff to leave

and disrupted our recruitment and training pipeline. We also now need to expand our staff further to deliver the additional capacity required to reduce waits for planned and emergency care.

We are constantly developing new ways to recruit and retain staff, such as being among the first NHS organisations to welcome degree nursing apprentices as part of the 800 apprentices we have welcomed since 2017 following introduction of the Apprenticeship Levy. We also work closely with schools and the voluntary sector to promote NHS careers and training to a wide range of people in our local population.

We also need to retain more staff, which is increasingly difficult in a competitive labour market given the cost of living in Cambridge and high inflation, but without being able to offer the high cost area supplement that is available in London.

#### By 2025 we want to:

- Increase our staffing to address the backlog in care and provide safe, high quality care to all patients
- Recruit staff from a wide range of backgrounds, including from communities who are underrepresented in the NHS, and valuing our international recruits
- Increase retention of current staff
- Lead nationally innovative work on recruitment such as through Health Education England's (HEE's) refugee nurse programme
- Maximise efficiency of spending on staff by minimising premium pay and optimising deployment of staff
- Improve staff survey results on adequate staffing levels

- Maximising undergraduate and postgraduate training places
- Working with education and training providers to deliver innovative routes into training at CUH

- Continuing a strong pipeline of international nurses
- Expanding the number, and broadening the range, of apprenticeships offered at CUH
- Working with schools, local government and the voluntary sector to promote career opportunities in the NHS
- Working with ICS, regional and national partners to shape policy and co-design programmes that meet the needs of our current and future staff pipeline
- Providing practical support with the cost of living in Cambridge, such as with transport, accommodation and food
- Delivering the other elements of our workforce strategy to help retain existing staff



**Ambition:** We will invest in education, learning, development and new ways of working

People are capable of amazing things at work. The pandemic demonstrated the professionalism and dedication of health and care staff across the country and we are committed to equipping all of our staff with the skills to continuously improve our services.

Teaching and education is central to CUH's purpose. By training new staff, and supporting existing staff to broaden and deepen their skills, we build the next generations of clinical and non-clinical leaders who will care for our patients in the future. Many of our staff are attracted to

CUH by the educational and research opportunities that we provide.

CUH provides vocational, undergraduate and postgraduate training opportunities that offer the foundations for a fulfilling career in the NHS. The pandemic hugely disrupted educational activities as staff were redeployed to frontline care, but also stimulated some



new ways of learning, particularly through greater use of virtual opportunities.

We want all our staff to be engaged, enthusiastic and enjoying their careers with us and to feel supported to achieve their goals whilst staying within the CUH family.

We offer Continuous Professional Development to all staff, and support from line managers, so that people are constantly building their capability to do more, and are able to respond to the changing needs of the organisation over time. In the staff survey, 74% of staff said that the organisation offers challenging work and 82% of staff have received an appraisal, which helps to retain skilled staff.

We recognise and promote talent of all staff groups and across all protected characteristics, and are committed to ensure equitable access to these opportunities for everyone.

#### By 2025 we want to:

- Train a skilled workforce to meet the needs of the health and care system now and in the future
- Support all staff to develop their careers, broadening and deepening their capability through education and training
- Grow capable and experienced leaders and line managers at all levels across all staff disciplines
- Maintain strong relationships with educational institutions, local government, schools and government bodies and widen access to education, training and development as part of our corporate social responsibility
- Embed a culture of sustainable continuous improvement

#### We will achieve this by:

 Continuing our programme of vocational, undergraduate and postgraduate training and education programmes

- Maximising CUH's contribution to the apprenticeship levy funding to take full advantage of a range of training and career progression routes
- Establishing modern, fit-for-purpose educational facilities at the hospital
- Providing high quality Continuous Professional Development and learning for all our staff, including in-service improvement
- Providing an annual appraisal, including a career conversation, to all staff
- Running leadership programmes within targeted cohorts of staff and on general inter-disciplinary courses
- Providing opportunities to gain experience working abroad through Cambridge Global Health Partners

Good work: We will strive to ensure that working at CUH will positively impact our health, safety and well-being

The safety and well-being of our staff is equally important as that of our patients.

The Covid pandemic brought unprecedented challenges to keeping

staff safe at work, with Personal Protective Equipment (PPE), testing, contact tracing and isolation and vaccination becoming part of daily life. Our Occupational Health service handled more than 200,000 episodes of care during the pandemic; and our Estates teams have maintained a Covid secure environment for staff and patients.

Alongside physical safety we placed equal emphasis on helping staff to be psychologically well and emotionally supported through this period of intense uncertainty and demands. We provided practical support with food, travel and accommodation to make life a little easier, and access to a range of psychological well-being services to support staff impacted.



The next three years bring new challenges on top of these, with clinical services, education and research all catching up after two years of disruption. High inflation is reducing the real incomes of staff, and when coupled with the high cost of living in Cambridge some are facing financial hardship as a result. We remain dedicated to doing everything possible to help staff to thrive so that we can continue to provide the best possible care for patients.

We also acknowledge, and express continued gratitude for, the ongoing support provided by our partners at Addenbrooke's Charitable Trust (ACT) and their donors.

#### By 2025 we want to:

- Maintain a safe environment for patients, staff and visitors
- Improve the health and wellbeing of staff, particularly through focusing on prevention

- Reduce the number and severity of staff safety incidents, and manage these transparently and effectively
- Reduce staff attrition rates including reducing staff turnover resulting from ill-health or stress

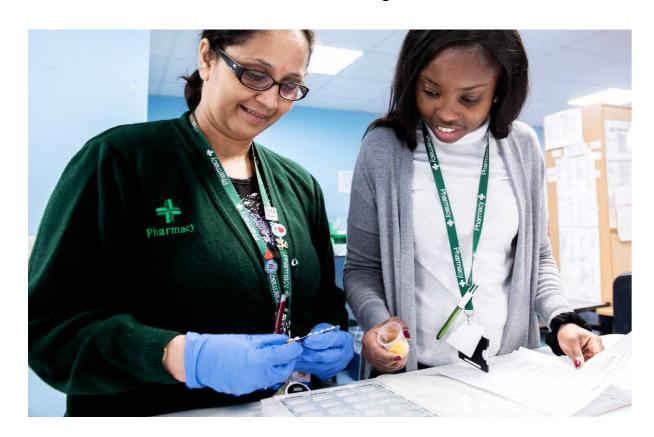
- Keeping the hospital as safe as possible for staff, patients and visitors by monitoring and responding to levels of community Covid transmission
- Supporting line managers to promote the health and wellbeing of their teams
- Providing influenza, Covid and other vaccinations to staff in line with national guidance
- Delivering an outstanding Occupational Health service
- Providing regular forums for staff to provide feedback to shape our policy and practice

- Providing adequate rest and break areas for all staff
- Providing appropriate practical support to staff including with transport, accommodation, food, on-site childcare and leisure facilities

**Inclusion:** We will seek to drive out inequality, recognising that we are stronger when we value difference and inclusion

Our staff serve patients and each other because they care deeply about others, and everyone brings the diversity of their perspectives, experience, history, culture and identity to work every day. This diversity makes us collectively more resilient and enriches our common life together as the CUH family.

CUH welcomes staff from more than a hundred countries, of all races, ethnicities, religions, sexualities and gender identities, health and



disability statuses. Everyone is welcome and equally deserving of respect, opportunities and support.

Sometimes staff or patients may make other people feel unwelcome, marginalised or ashamed of their identity. We want staff to feel able to bring their whole selves to work and take pride in their work as an expression of their identity. When people are safe and welcome they are happier, and better able to excel in their work and to support their colleagues.

Some staff groups have faced particular barriers across the NHS including at CUH. Ten per cent of staff report experiencing discrimination from their manager or colleagues but this is higher for staff from ethnic minority groups. Ethnic minority and disabled staff are also under-represented at senior levels at CUH.

We are committed to driving out these inequalities so that all of our staff can thrive and our organisation grow stronger as a result, and we are working with national programmes such as the Workforce Race and Disability Equality Standards (WRES / WDES) to improve our performance in improving equality, diversity and inclusion. This will also make us better able to serve the diversity of our patients.

#### By 2025 we want to:

- Achieve a culture of inclusivity and respect for difference, with a safe and supportive environment where everyone can thrive
- Improve WRES and WDES performance making a tangible difference for our staff
- Improve staff survey performance on discrimination and respecting individual differences
- Ensure all workforce processes are equitable, including recruitment, promotion, professional development and disciplinary procedures

- Increasing use of diversity and inclusion panellists in recruitment
- Using equality impact assessments to assess the impact of changes to policy and practice on inclusion
- Actively promoting staff networks as partners in these goals, and offering peer support to colleagues
- Promoting cultural intelligence and anti-racism to our line managers and leaders
- Training line managers in sensitivity to individual differences and treating people as individuals with specific needs
- Actively playing our role in delivering local, regional and national inclusion strategies such as the East of England anti-racism strategy



# Relationships: We will foster compassionate and enabling working relationships

Healthcare is a human industry where skilled people work together to meet the needs of people experiencing ill-health.

Positive working relationships within the hospital enable the collaboration and sensitivity required to deliver high quality care, and provide the platform for innovative work with partners. We are glad that more than 70% of our people in our latest survey felt that they were treated with kindness and respect by colleagues. This culture emerges from living our values every day, and we place significant emphasis on creating and maintaining an environment that broadens and deepens the support that we provide to one another.

CUH is also proud to work with a diverse range of partners in health and care services, academia and industry. These partnerships provide huge opportunity for teams at CUH to deliver better care, learning and research by working with others. We value our relationships with these partners deeply and commit to nurturing them over the coming years.

Relationships have never been more important than during Covid, as our staff and partners faced unprecedented disruption to their normal work and prolonged periods of working under extreme uncertainty and intense pressure. Colleagues have consistently reinforced that a sense of team – within and between organisations – and maintaining supportive relationships with each other, was crucial for maintaining their motivation in difficult circumstances.

Last autumn we presented the Covid Star to all our staff in recognition of the outstanding contributions made during this period. We received positive feedback from colleagues about their pride to be part of CUH's response to the pandemic.

#### By 2025 we want to:

- Deepen positive workplace culture and relationships between colleagues within CUH and with partner organisations
- Ensure that all staff recognise how much their work is valued by our patients and respected by their colleagues
- Demonstrate a culture of compassionate leadership, listening and empathy
- Create a just culture where staff feel supported to learn when things do not go as expected, rather than feeling blamed

- Demonstrating compassionate leadership through Trust-wide events and communications
- Recognising and rewarding staff for outstanding achievements, such as through our monthly You Made A Difference and new CUH Annual Awards

- Championing staff networks that deepen connections between staff with similar experiences
- Continuing to provide all staff with access to the Freedom to Speak Up service as an important channel for raising concerns
- Conducting After Action Reviews (AARs) to learn and improve based on the practical experiences of staff
- Ensuring that Employee Relations processes are in line with the principles of a just culture
- Developing line manager training to promote compassionate relationships
- Delivering all our commitments in a way that deepens the mutual respect of partners
- Contributing to ICS-wide leadership and organisational development initiatives



#### **Building for the future**

**Specialised services:** We will work with hospitals across the East of England to provide high quality specialised care for more patients closer to home

Some of our sickest patients require quick and easy access to scarce clinical expertise and equipment. CUH works with other trusts to provide specialised services to more than six million patients across the East of England: delivering integrated clinical pathways with fifteen other hospitals, running regional services and managing regional specialist clinical networks.

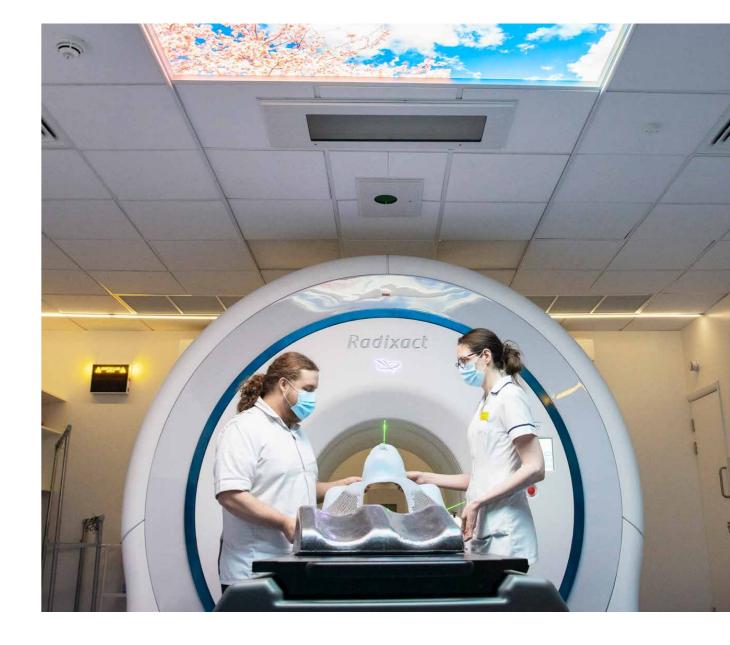
Basing specialist services in a smaller number of hospitals nationally can improve safety, quality, and efficiency. However, in a rural geography like the East of England this can also make access to these services very unequal: primary care services based further away from specialist centres can lack the easy connectivity to specialists that can streamline referral pathways, and the time and cost of travelling further is a barrier to some patients. The East of England has the fewest hospital beds and lowest number of clinical staff per patient of any region in the NHS. Consequently many patients go to London or elsewhere for specialist treatment that could be provided within the region.

Specialised commissioning is changing over the coming years to enable closer partnerships between providers. Other sectors of the NHS, particularly mental health, have seized this opportunity to repatriate services provided outside of their region and enable patients to access services closer to home.

#### By 2025 we want to:

- Improve access to specialised services for patients within the East of England, particularly where patients have long waits or distances to travel
- Reduce the disparity in access between patients within the region, ensuring that pathways of care proactively identify all patients who could benefit and address barriers to access for those who find it difficult
- Improve outcomes for patients through specialised services, particularly where we compare poorly to other regions
- Support trusts across the region to build capacity in specialised services by repatriating some of the £500m that it costs to provide care to patients from the East of England in London hospitals. This will also support other major challenges such as recruitment and financial balance, and opportunities such as spreading research and innovation
- Deepen trust and relationships by working with other trusts in the region, and with commissioners, to align with broader strategies to improve care

- Forming the East of England Specialised Provider Collaborative as a partnership of seven trusts, with governance appropriate for the responsibilities that the Collaborative is undertaking
- Engaging closely with specialised commissioners and Integrated Care Boards (ICBs) within the region to align with their priorities for improving services for patients, particularly in cardio-respiratory, cancer, neurology and neurosurgery, paediatrics, burns and plastics, including delegated commissioning responsibility as appropriate
- Implementing practical changes to improve care pathways and increasing capacity for specialised services across the region
- Embedding regional collaboration on specialised services through our planning for new hospitals builds, support for developing the Cambridge Biomedical Campus and ongoing research and innovation activities



Research and life sciences: We will conduct world-leading research that improves care and drives economic growth

Cambridge is an unparalleled ecosystem of world-class research institutes, laboratories, industry and investors working alongside clinical teams to innovate and improve healthcare. The University of Cambridge has scored top position in the country for clinical medicine in the latest results from the Research Excellence Framework (REF); and our county is home to 470 life sciences companies, employing more than 20,000 people and annually growing turnover by more than 10%.

CUH and the University of Cambridge host a NIHR Biomedical Research Centre (BRC), supporting, delivering and providing leadership in translational research within the NHS locally and nationally. CUH embeds innovative practice and research across our clinical pathways to ensure that our patients have quick access to the latest developments in treatment and care. We are also working to extend research and innovation outside the hospital into primary care, where remote diagnostics also offer



extraordinary potential to increase early detection of disease.

Pioneering research, and subsequent translation into direct care for patients, wouldn't be possible without support from across the hospital laboratory space, clinical trial infrastructure, data, skilled teams and study participants. Together they give CUH the resources, skills and capacity to develop new world-class treatments in bioscience and health technology. They also provide the foundations for commercial partnerships that drive economic growth and draw investments into healthcare.

#### By 2025 we want to:

- Increase the number and breadth of research studies conducted, particularly in areas of high disease burden and clinical need
- Increase the number and diversity of research participants
- Increase the number and diversity of researchers, building on our world leading centre for Nursing, Midwifery and Allied Health Professions (NMAHP) research

- Increase the scale and pace of research positively impacting clinical practice inside and outside the hospital
- Increase the economic value of the life sciences sector and extend the reach further within the East of England

- Fully embedding research and industry partnerships within the new Cambridge Children's and Cancer Research hospitals, particularly through genomics
- Further extending research outside the hospital through CUH's clinical pathways, particularly using early diagnosis to improve outcomes and reduce health inequalities
- Growing the impact of the Cambridge Biomedical Campus (CBC) and working with CBC Ltd to deliver the 2050 Vision
- Fostering innovative commercial partnerships through our 'Open For Business' framework and Investment Fund

- Developing links between research, education and training to attract and retain talent
- Increasing our capacity to deliver digital innovation and research allied to health and data in the fields of Artificial Intelligence (AI), big data, diagnostics and health inequalities

New hospitals and the estate: We will maintain a safe estate and invest in new facilities to improve care for patients locally, regionally, and nationally

cult has enormous clinical and research capability, but our ability to capitalise on this for the benefit of local, regional and national patients is severely limited by our ageing estate which is not fit for modern healthcare delivery. The East of England is the only region without a dedicated Cancer or Children's hospital, meaning we are unable to provide the care patients need in specialist facilities.

To tackle these issues CUH has worked with NHS, academic and industry partners to design a 'hospital of the future', called 'Addenbrooke's 3', underpinned by world-leading research, which starts with our Cambridge Cancer Research Hospital (CCRH) and Cambridge Children's Hospital (CCH) projects.

Alongside our ambitious development plans we are equally committed to maintaining safe, efficient and effective facilities across our current estate.

#### By 2025 we want to:

- Maximise the use of our Regional Surge Centre (RSC) capacity of 120 beds to reduce waiting times for planned and unplanned care
- Re-provide suitable accommodation for histopathology
- Implement expansions to the Emergency Department
- Commence construction of the Cambridge Cancer Research Hospital as part of the New Hospitals Programme. CCRH will be focused on prevention, early detection of disease and novel precision medicine treatments
- Commence construction of the Cambridge Children's Hospital as part of the New Hospitals Programme. CCH will be the world's first integrated physical, mental health and research 'smart' hospital for children and young



people, enabling earlier diagnosis and intervention and delivering improved lifetime health outcomes

- Reduce the amount and risk of backlog maintenance in line with available capital resources
- Maintain safety and optimise effective use of our current estate
- Develop a multi-year forward capital investment strategy with key pipeline projects

- Working with patients, staff, carers, and wider stakeholders across health, mental health, social care, research, and education, as well as with leading architects, engineers and other experts, on the design of all our new hospital buildings and
- the development of new integrated models of care
- Securing funding through completion of the HM Treasury business case process and our fundraising activities, supported by ACT, Head to Toe and the University of Cambridge fundraising teams
- Investing in an ambitious programme of repairs and maintenance on our current estate
- Enhancing our delivery capability and capacity across the Trust to maximise the benefits of these changes to patients and staff



Climate change: We will tackle the climate emergency and enhance environmental sustainability

Climate change is a globally pressing matter that has led to the UK government declaring a 'climate emergency'. Unless global warming is limited to 1.5°C, climate change will continue to devastate the environment, the economy and people's way of life. Higher

temperatures also lead to increased rates of respiratory and cardiovascular disease, more injuries resulting from extreme weather events, greater spread of infectious diseases, threats to public health from constrained food and water supply and economic costs crowding out investment in healthcare.

The NHS has committed to halving carbon emissions before 2032 and delivering net zero carbon by 2045.

CUH has developed a Green Plan to deliver our commitments, promoting environmental sustainability and playing our part in creating a safer and healthier future for everyone. CUH welcomes innovative practice and research beyond our clinical services, and works in close partnership with researchers and companies seeking to innovate in environmental sustainability. Our staff increasingly highlight their expectation that CUH



will play a leading role in this globally significant challenge.

#### By 2025 we will:

- Reduce our direct emissions by 10% (from a 2019 baseline) and be on a clear path to halving our carbon emissions before 2032 and reduce to net zero by 2045, in line with national NHS commitments
- Protect our services from the effects of climate change including severe weather
- Provide opportunities for academic and industrial innovation in Cambridge to bring forward technological breakthroughs to tackle climate change
- Be able to demonstrate that we are on a net-zero / zero-waste circular economy trajectory and to help and encourage others to take the same bold steps

#### We will achieve this by:

 Reducing energy use and decarbonising energy supplies for Trust premises and meeting the NHS Net Zero Building Standard for new buildings and major refurbishments

- Transitioning Trust business miles from fossil fuelled to electric vehicles and continuously improving sustainable travel options for staff, patients and visitors
- Avoiding the emission to atmosphere of high global warming potential anaestheticrelated gases
- Working with our suppliers to develop, procure and provide goods, materials and services that meet our net-zero / zero-waste ambition
- Providing the means for all teams across the Trust to set their services on a net-zero / zero-waste trajectory and embedding carbon and waste reduction as essential aspects of decision-making
- Establishing clinically led multidisciplinary teams to adapt the relevant elements of models of care in ways that reduce carbon emissions and waste



 Developing carbon retention and local off-setting practices that account for residual emissions in meeting the net-zero challenge in full

### **Digital:** We will use technology and data to improve care

Our hospitals benefit from a very high starting level of digital maturity, which supports the safety and efficiency of our services and improves decision-making. The pandemic has helped us to achieve a culture shift and level of digital transformation within and beyond the hospital that would otherwise have taken years. As we continue to recover our services, we must build on this momentum to reduce waits and make it more convenient to access care.

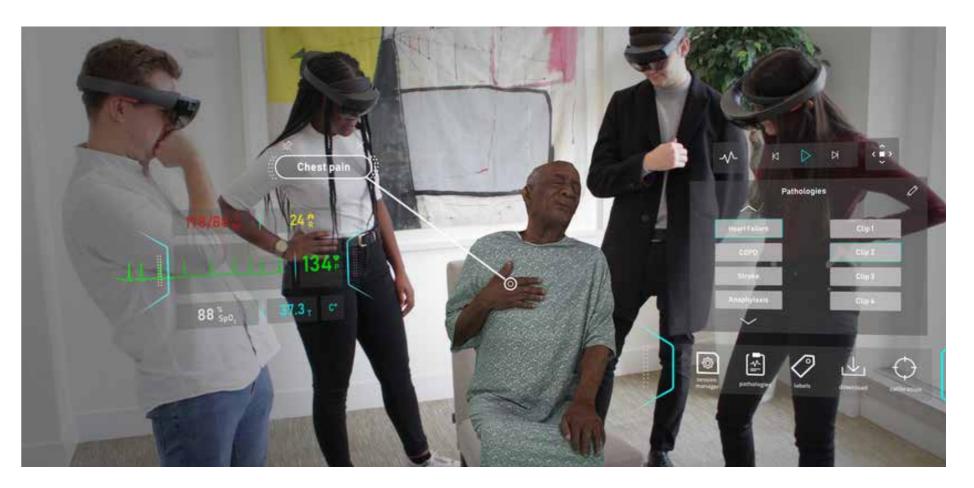
Digital transformation underpins our ambitious targets for improving efficiency, safety, and quality; can help to tackle health inequalities; and plays a central role in empowering our patients and supporting our staff to work differently to deliver all the commitments across our strategy.

#### By 2025, we will:

- Ensure our infrastructure and data environments are secure, sustainable, resilient and fit for the future
- Increase use of digital channels to access care to better manage demand on our services
- Provide a seamless patient journey using digital systems to share medical records inside the hospital and in collaboration with other health and care providers
- Use insights from our operational data to deliver efficiencies in how we use our current capacity and develop services for the future
- Deliver digitally smart new hospitals, working with industry and academic partners to innovate and improve patient outcomes and efficiency alongside cutting-edge research

- Improving our core systems through proactive management of software and underpinning infrastructure by keeping it secure and current, consistent with industry-wide prevailing standards
- Increasing digital leadership expertise across the Trust and developing the digital skills of our workforce through provision of additional, targeted training opportunities
- Investing in supporting staff and patients as we change, implement and adopt new digital solutions
- Maximising the potential of our existing investments and capability by exploiting the use of Epic tools and extending the utilisation of the MyChart patient portal, bringing workflow efficiencies and empowering the patient
- Digitising burdensome manual processes where safe and appropriate to do so, releasing time to care
- Extending our 'virtual' offering to establish virtual wards and clinics

- including telemedicine opportunities for home monitoring
- Developing a 'Shared Care Record' across our ICS to provide access to patient medical records beyond the walls of our organisation
- Investing in partnerships and tools to assist with predictive modelling of patient demand and flow
- Establishing a means for academics to access our data safely and use
- technology to support different models of care pathways
- Innovating through collaboration with partners, research and digital innovation hubs to exploit potential opportunities



#### Implementing the strategy

The commitments outlined in this strategy are ambitious, seeking to overcome challenges and seize opportunities to do more for our patients and staff.

In implementing our previous strategy over the last five years, and particularly over the last two years during the pandemic, we learned a huge amount about how we can work purposefully and effectively over the next three years.

We have five priorities that articulate the mind-set, behaviours, skills and capabilities required to implement our strategy:

#### 1. Creating strong foundations

Prior to Covid we had spent several years improving our staffing position, relationships with partners, the quality and safety of our clinical services and developing our digital and estates infrastructure. Entering the pandemic in a weaker position would have made our response harder and less effective, and the resilience provided through these vital underpinnings is impossible to overstate.

We commit to excellence in the fundamentals of running a large hospital as the foundation for everything else that we strive to achieve.

#### 2. Supporting frontline leaders

During Covid our people used their expertise and dedication to do amazing things. Teams across the hospital collaborated to meet new challenges and our corporate structures trusted them to deliver: reducing bureaucracy, devolving power and responding to requests for help. We want to sustain this initiative over the coming years, freeing up frontline teams to implement the strategy within their teams and across the hospital.

We commit to reducing bureaucracy and ensuring that frontline teams have sufficient time to drive change, including using service improvement techniques and with the support of skilled project managers to help deliver their priorities.

#### 3. Communicating and engaging

During Covid we listened intently to the experience of staff and patients so that our response under pressure constantly adapted to changing needs. We shared publicly the extent of the disruption that we faced and how we were responding, which built trust and confidence and helped people to plan ahead.

We commit to sharing both our challenges and successes with everyone impacted, and to coproducing solutions with patients and partners alongside our staff, so that we convene the right diversity of expertise to identify and implement positive change effectively.

#### 4. Working in partnership

During Covid we recognised both our strengths and our limitations and worked to share our strengths for the benefit of others and to welcome outside expertise to help us address our limitations. Co-creating solutions with our diverse tapestry of partners locally, and ensuring that national decisions were informed by our and others' expertise, was a pivotal part of responding well under pressure.

We commit to continued work with partners across the NHS locally, regionally and nationally, and with academic and industry partners, to enable us to innovate faster and do more together.

#### 5. Using resources wisely

During Covid the NHS financial framework enabled rapid investment to support urgent transformation across the country, but other resources, such as PPE and testing capacity, were scarce. We responded by conserving precious resources to ensure they were available in the highest priority areas. The financial position across the NHS, and particularly in Cambridgeshire and Peterborough, is under significant pressure, with an underlying deficit, rising costs and the requirement to deliver significantly more activity.

We commit to maximising the value for taxpayers' investment in our

services and with partners, and will pursue transformative shifts in care delivery, especially with primary care colleagues, to unlock step-changes in efficiency alongside incremental improvements to productivity.



CUH Together 2025: Our strategy for a healthier life for everyone through care, learning and research

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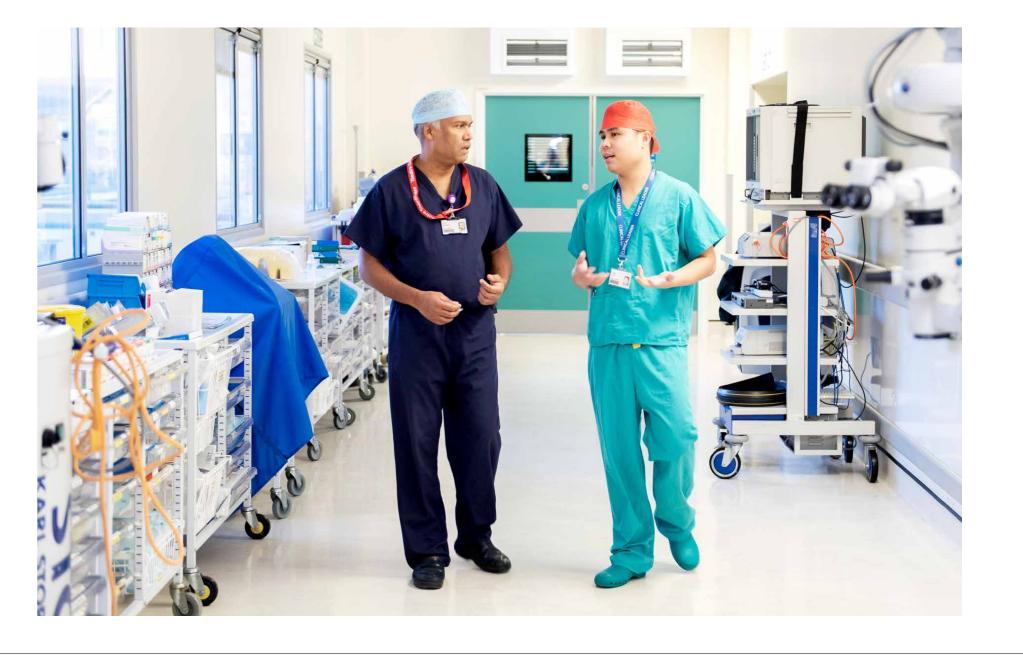
#### **Keeping in touch**

This document sets out our strategy and commitments for the next three years. We have tried to articulate an ambitious vision to inspire and motivate staff, to inform patients and to signal important shifts in how we will work with our many partners across health and social care.

Every single member of our staff continues to play a crucial role in how we will achieve our commitments, and we want to continue to engage our staff, our patients and our partners in how we develop and deliver our strategy moving forward. We will use the commitments as a starting point from which we can plan, embed and build an even better health care service for those who need our services with ongoing monitoring and reporting of progress through our Board and Committees to ensure that we are delivering our plans, and having the positive impact we hope for, for all our patients, carers, partners and colleagues.

If you would like to comment on this strategy, please email:

cuh.strategy@nhs.net



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