



REPORT TITLE:	MMUH Report		
SPONSORING EXECUTIVE:	Rachel Barlow – Managing Director; MMUH Programme Company		
REPORT AUTHOR:	Rachel Barlow – Managing Director; MMUH Programme Company		
MEETING:	Public Trust Board	DATE:	8 th March 2023

1. Suggested discussion points *[two or three issues you consider the Trust Board should focus on in discussion]*

The Trust Board is invited to discuss the critical path towards opening the new hospital in 2024.

This month the Midland Metropolitan University Hospital (MMUH) Programme Company start to set out what success looks like in the context of the MMUH programme level objectives related to Patients, People and Population. This aligns with the Strategy Deployment (True North and Breakthrough objectives) paper on today’s agenda and is not separate to this implementation.

The MMUH Programme Company has recently received the outputs of the benefits work led by our benefits partner via Price Waterhouse Coopers (PWC). The outcomes of this work will be considered alongside focussed ‘Success workshops’ at MMUH workstream level in March 2023 at the MMUH Programme Company Away Day and in the April 2023 Trust Board Seminar session.

This work will inform a set of success measures associated with the MMUH Programme objectives and workstream outputs, as well as a revised and updated benefits realisation case.

In the May iteration of the MMUH Report, we will be clear on the full scope of how success will be measured for the new MMUH. For the remainder of the MMUH Programme, we will then report against our success measures and track our revised benefits case.

Our patient and staff story this month is related to the transformation of stroke pathways, of which we are currently engaging the local population.

A key business case has been completed to establish an Urgent Treatment Centre (UTC) at the Midland Metropolitan University Hospital (MMUH) site. This paper provides a briefing on the clinical model and benefits aspects of the case which is being considered by Birmingham and Solihull (BSol) Integrated Care Board and Black Country Integrated Care Board.

2. Alignment to our Vision *[indicate with an ‘X’ which Strategic Objective[s] this paper supports]*

OUR PATIENTS		OUR PEOPLE		OUR POPULATION	
To be good or outstanding in everything that we do	X	To cultivate and sustain happy, productive and engaged staff	X	To work seamlessly with our partners to improve lives	X

3. Previous consideration <i>[at which meeting[s] has this paper/matter been previously discussed?]</i>
None

4. Recommendation(s)
The Public Trust Board is asked to:
a. DISCUSS the critical path
b. CONSIDER the MMUH report with respect to Patients, People and Population
c. EXPECT future programme reporting to track success measures and benefits delivery

5. Impact <i>[indicate with an 'X' which governance initiatives this matter relates to and, where shown, elaborate in the paper]</i>						
Board Assurance Framework Risk 01	x	<i>Deliver safe, high-quality care.</i>				
Board Assurance Framework Risk 02		<i>Make best strategic use of its resources</i>				
Board Assurance Framework Risk 03	x	<i>Deliver the MMUH benefits case</i>				
Board Assurance Framework Risk 04	x	<i>Recruit, retain, train, and develop an engaged and effective workforce</i>				
Board Assurance Framework Risk 05		<i>Deliver on its ambitions as an integrated care organisation</i>				
Corporate Risk Register <small>[Safeguard Risk Nos]</small>						
Equality Impact Assessment	Is this required?	Y	N		if 'Y' date completed	
Quality Impact Assessment	Is this required?	Y	N		if 'Y' date completed	

SANDWELL AND WEST BIRMINGHAM NHS TRUST

Report to the Public Trust Board on 8th March 2023

MMUH Report

1. Introduction

- 1.1 With the new Midland Metropolitan University Hospital (MMUH) due to open in Spring 2024, there is now a real focus on readiness to ensure we have a safe and successful move for our patients, staff and local population.
- 1.2 This paper sets out the updated Midland Met critical path for the next 6 months (**Annex 1 Midland Met Critical Milestones; February - July 2023**).
- 1.3 The patient story this month describes our transformation efforts for patients on a stroke pathway once MMUH opens and offers a staff view on this work.
- 1.4 The paper also provides an update on the design of a proposed new Urgent Treatment Centre located on the Midland Metropolitan University Hospital (MMUH) site.
- 1.5 Since formation of the MMUH Programme Company there has been focus on assessment of a comprehensive baseline transformation programme and implementation of enhanced programme governance in line with Managing Successful Programme methodology (**Reference; Managing Successful Programmes 2020; AXELOS**). This has created improved alignment, clarity and purpose in the programme. There is more work to do on measuring outputs to make workstream performance assessments more objective and be clear on tracking success – a theme of today’s paper.
- 1.6 The paper explores aspects of the forthcoming programme as we get ready to open MMUH through the MMUH Programme objectives approved at the January 2023 Trust Board (**Annex 2 MMUH Programme Vision and Objectives**) and sets out our initial measures of success for Patient, People and Population programme objectives.
- 1.7 The MMUH Programme Company has recently received the outputs of the benefits work led by our benefits partner via Price Waterhouse Coopers (PWC). The outcomes of this work will be considered alongside focussed ‘Success workshops’ at MMUH workstream level in March 2023 at the MMUH programme Company Away Day and in the April 2023 Trust Board Seminar session.
- 1.8 This work will inform a set of success measures associated with the MMUH Programme objectives and workstream outputs, as well as a revised and updated benefits realisation case.

- 1.9 In the May iteration of the MMUH Report, we will be clear on the full scope of how success will be measured for the new MMUH. For the remainder of the MMUH Programme, we will then report against our success measures and benefits delivery.
- 1.10 This aligns with the Strategy Deployment (True North and Breakthrough objectives) paper on today's agenda and is not separate to this implementation, contributing to a set of concise and defined long term measures of success. MMUH in the context of 'Getting to True North' is a corporate project.

2. Critical path road map

- 2.1 **Annex 1 Midland Met Critical Milestones; February – July 2023** shows the major points of our critical path for the next 6 months.
- 2.2 Achievements in January 2023 and work in progress includes:
- Commencement of our Logistics project which includes preparing to use automated guided (robot) vehicles in MMUH to deliver goods to departments.
 - Appointment of a Move Partner and establishment of the Operational Move Group as we start to prepare the detail of the hospital moves.
 - Continued focus on clinical pathway transformation in Same Day Emergency Care (SDEC), Frailty and Cardiology pathways.
 - Public engagement on stroke pathways.
- 2.3 Major activities in the current period include:
- Our new Medical Same Day Emergency Care (SDEC) unit at Sandwell will open in March 2023 which enables the service transformation ahead of MMUH opening.
 - Establishment of a Near Neighbours Group for local engagement and communication with residents and businesses who live within half of mile of the new hospital.
 - Completion of reassessment of the benefits that MMUH will provide and a commitment to deliver those.
 - Finalising the estates plans for City and Sandwell sites.
 - Preparation of induction materials to orientate our staff to MMUH and the start preparing our staff for the future through training, organisational development intervention to support transforming teams and management of change.

3. Patient objective - To be good or outstanding at everything we do

- 3.1 This section of the paper provides an update on key success factors for the MMUH Patient objectives and offers a patient story based on our new MMUH stroke pathway design which is part of an ongoing public engagement conversation.

The paper also provides an update on a business case the Trust has submitted to Birmingham & Solihull Integrated Care Board (BSol ICB), to establish an Urgent Treatment Centre (UTC) at the MMUH site, expanding capacity and service provision for local patients requiring urgent treatment of minor illnesses.

3.2 The **MMUH Programme patient objectives** are to:

- Enable outstanding health outcomes for patients with equality of service provision no matter where they live.
- Provide a safe and welcoming environment for care.
- Provide integrated care services that are seamless for patients.

3.3 As we transform clinical services, hire, and train staff and prepare to open the new hospital our **success measures** will include:

- Meeting Urgent and Emergency Care standards by the end of 2024. This includes streaming more than 30% of patient activity away from the Emergency Department (ED), which mitigates the risk of overcrowding in the ED and allows focus on earlier clinical decision making and treatment.
- Recovering and meeting Cancer and Referral to Treatment planned care standards by the end of 2024.
- Transforming care and ensure levelling up of services to provide clinical services consistent with national good practice; this includes increasing the Same Day Emergency Care (SDEC) throughput. pathways from 21,000 patients to 26,000 patients a year and establishing a frailty assessment unit that appropriately avoids 3210 admissions a year providing care to patients appropriately out of hospital.
- Increasing operating theatre productivity from 73% productivity, closer to 85% in 2024, with the split of emergency and day case planned elective care, between MMUH and our Treatment Centres enabling more effective theatre scheduling.
- Improving our friends and family scores across our wards through our hospital standardisation project, which is part of the Trust Fundamentals of Care (FOC) framework. This safety focussed project will deliver an improvement in harm free care and ensure timely flow, increasing the number of discharges before 5pm by 20%.
- Rightsizing of Place based community services to provide seamless integrated care. Quantifying the impact of the Place initiatives to support the MMUH beds plan and clinical service transformation is imperative to ensure there is sufficient scope ahead of MMUH opening. The 2 immediate opportunities identified as additional elements to existing MMUH work streams are virtual wards and enhanced care homes. There is work in train to determine the necessary success measures required for MMUH opening.

3.4 In the next MMUH report, we will provide an update and forward look on all our essential major clinical transformation work inclusive of Place based transformation which enables achievement of the MMUH programme Patient objectives. We will describe our transformation approach in the clinical services workstream, explaining how we will track success before the hospital opens inclusive of the remaining changes that are needed to ensure we fit into the new hospital and that our Place based services are right sized. This work is being supported by 3rd party assurance partner and will be presented alongside the programme risk register.

3.5 **Patient story**

This month we provide an example of a patient story which describes how our newly designed **Stroke patient pathways** will work once Midland Met is open.

Mrs Badger, a 49-year-old patient, is taken by ambulance to Midland Metropolitan University Hospital following a facial droop and weakness to her left side. On the way to the hospital, the ambulance crew video calls ahead to the specialist stroke consultant, who completes a virtual review and confirms that she has had a stroke and will need a scan on arrival.

When Mrs Badger gets to the Emergency Department, she is taken for a CT scan and then treated with a clot-busting drug to dissolve the clot on her brain. This early assessment, scan and treatment increases her chance of recovery and reduces the likelihood of long-term brain damage.

Once the treatment is complete, Mrs Badger moves to the specialist acute stroke unit, where specialist nurses and therapists help identify how the stroke has affected her and the best course of treatment to aid her recovery. After discussions, Mrs Badger has identified a short-term goal, to safely use a wheelchair so that she can go outside. Her longer-term goal is to walk independently within her own home.

Over the next few days, Mrs Badger works with the team throughout the day to practice sitting and transferring with a hoist into a wheelchair. The team use every contact throughout the day to practice the skills she is learning in therapy. It helps Mrs Badger to achieve her short-term goal quickly and allows her to become independent in everyday tasks such as washing her face.

Once Mrs Badger has stable blood pressure, a joint decision is made not to return home at this point in her recovery because she has young children and does not have room for a hoist at home.

Mrs Badger moves from Midland Met to the stroke rehabilitation unit, where she stays for three weeks learning to transfer without the hoist and stand with help. Whilst on this ward, the specialist therapists assess Mrs Badger's home and provide equipment that will enable her to be at home to receive her rehabilitation. Before returning home, Mrs Badger meets people from the Different Strokes organisation and the Stroke Association that will help support her needs in the community.

Once home, Mrs Badger receives regular visit from the integrated stroke therapy team, a team of specialist therapists, to support her achieving her goal of walking around her house unaided and making a meal independently. She is also ready to complete her driving assessment and is looking at what needs to happen to enable her to return to work. Through being treated in her home by a specialist team, Mrs Badger has been able to spend more time with her children whilst receiving the same intensity of therapy that she was receiving on the ward. Recovery is often quicker when a patient is surrounded by their loved ones and in a familiar environment.

Mrs Badger's experience with this pathway has provided her with immediate assessment and management of her stroke in a timely manner. It ensured that rehabilitation is delivered at the required intensity, by appropriately trained staff, in the right environment for every stage of her recovery.

- 3.6 There are currently active public engagement activities taking place in relation to the new Stroke pathways. A group has been established including community organisations who support stroke survivors and their families, patients and carers. The MMUH programme is keen to involve our local population inclusive of patients and carers in the design and implementation of the new pathway. A stroke takeover day is planned at Sandwell on the stroke unit to support engagement. Members of the public can participate by contacting our engagement team on swbh.engagement@nhs.net.
- 3.7 To support the delivery of the Urgent and Emergency Care standards, the Trust are proposing that a new Urgent Treatment Centre (UTC) is developed on the MMUH site, within close distance of the ED. The proposed UTC will enable patients streamed from the ED or attending the UTC directly to receive treatment for their minor illnesses in a timely way. The adjacency to an ED which is designed to deal with patients with life and limb threatening conditions and the proposed UTC clinical model is national best practice.
- 3.8 The proposed UTC is designed to see 78,000 patients a year. The desired operating model is a 24-hour 7 day a week service, that would be primary care led. This service model would level up the service with for our local population to be equitable with the rest of the Black Country providers.
- 3.9 The business case for the proposed UTC is currently with BSol ICB for consideration and the project plan enables the UTC once approved to open in Spring 2024.
- 3.10 The building design future proofs demographic growth projections in the local area and has capacity to develop the clinical model over subsequent period to include minor injuries.

4. People objective – To cultivate and sustain happy, productive and engaged staff

- 4.1 This section of the paper provides an update on key success factors for the MMUH People objectives and offers a staff story based on our new MMUH stroke services and recruitment update. The paper shares our recent staff survey results which forms a baseline measure of staff engagement in relation to MMUH.
- 4.2 The MMUH Programme people objectives are:
- Develop career pathways for local people.
 - Provide an inspiring and inclusive place to work.
 - Provide comfortable and productive spaces that make people feel valued.
- 4.3 As we transform clinical services, hire, and train staff and prepare to open the new hospital our **success measures** will include:
- Creating over 1000 new learning opportunities at the new Learning Campus due to open in 2024 on the MMUH site. This includes education in entry level roles supporting people choosing new careers in the NHS.
 - Improving the recruitment experience by reducing the time to fill a vacancy to 67 days in 2023 and sustaining that as a minimum standard.
 - Recruit at least 35% of our MMUH workforce from our local communities by 2024.
 - Reducing the Trust vacancy rate to 9% by the end of 2026.
 - Reducing sickness rate from 6.34 % to 4.5 % by 2026.

- Improving staff engagement score to 80% by 2027.
- Increasing our workforce representation for minority ethnic groups from 40% for BAME staff to 48% to represent our local population ethnicity levels.
- Increasing the representation of our disabled workforce to reflect our local community figures of 20% for residents experiencing long term health conditions or illness protected by the Equality Act.

4.4 The performance of the Workforce workstream has been rated as red and underperforming for over a year. Despite some in month progress particularly in recruitment and design of the management of change approach, a lack of leadership is causing significant issues and a detrimental impact to other workstreams is now being seen. Unless this is mitigated, this will impact on the successful delivery of the MMUH People objectives. A 3rd party review of the Workforce workstream has been commissioned to inform recommendations on how the performance of the workstream can be rapidly enhanced. The outputs will be considered by the MMUH Programme Company Managing Director, Chief People Officer, MMUH Delivery Director and Chief Executive Officer alongside the programme risk register to inform mitigating decisions and actions now necessary to avoid negative impact on the critical path activities.

4.5 **MMUH recruitment** update - We continue to recruit staff ahead of opening the new hospital. We are seeing positive movement in our recruitment, with a net reduction of just over 50 vacancies in the last month (adjusted for starters and leavers). However, we are operating 35 posts behind the planned MMUH recruitment trajectory. Critically, 5 posts that are linked to our frailty assessment unit project. There is mitigation focus with our strategic recruitment partner and the core organisation recruitment team on a recovery trajectory, to recruit to the posts linked to our 2 major bed day saving transformational changes where recruitment is required to deliver the change.

4.6 Time to recruit is now at 67 days, which is a notable improvement. Additional resourcing into the recruitment team has been scoped and is underway to allow swift and effective recruitment of all vacant posts, especially those associated with essential MMUH service transformation and those posts with avoidable agency costs associated with them.

4.7 **Staff story** – This month’s colleague story below complements the patient story on stroke and provides a staff view of the care pathways we are implementing.

Clair Finnemore, Therapy Lead for Stroke Services, is leading the stroke decoupling project ahead of the opening of Midland Met. The goal is to launch an integrated community stroke service with acute stroke services moving to Midland Met in 2024.

A physiotherapist by trade, Clair is helping to transform stroke services by decoupling acute stroke and rehabilitation services. She explained: “The work we are doing cuts across all disciplines, including therapies, nursing, medicine, estates, social care, psychology, imaging, GPs and operational leads across PCCT and medicine.

“We decided to review the full stroke pathway to ensure those with acute needs can access them quickly and those requiring further rehabilitation can be supported in either inpatient rehab beds or in their own homes stroke services to deliver rehabilitation outside the acute hospital environment. Launching the integrated community stroke service (ICSS) is set to take place in May 2023,

depending on successful recruitment. It will help us prepare for the opening of Midland Met by establishing a new domiciliary stroke rehabilitation service in line with the national and regional stroke strategies via integrated stroke delivery networks and planning for rehabilitation to create integrated community stroke specialist teams.

“It also provides a home-first model of care for all stroke patients who can return home safely with appropriate support and rehabilitation through intensive, specialist therapy services in a home setting. This approach will reduce the average length of stay in hospital, facilitating bed flow in Midland Met. Plus, it provides a seamless transition of care from acute to non-acute inpatient or domiciliary services with the same level of stroke multi-disciplinary team (MDT) expertise.

Clair continued: “So far, we’ve set up a patient engagement forum, and two events took place in 2022. It has been instrumental for us in reaching out to patients and families to ensure they are aware of the proposed changes we are making to our services ahead of Midland Met opening. It’s a two-way forum, and we’ll be actively calling on patients to co-design the delivery of key touch points and stroke care across the acute, rehab and community care pathways.

“We also held a multi-agency stroke away day and agreed on an eight-point action plan. It supports our work to prepare for the opening of Midland Met by creating a shared vision of how the multi-disciplinary team can work differently to improve the patient experience, maximise recovery for life after stroke, and optimise resources.”

Speaking of the benefits of these service changes, Clair remarked: “Patients admitted to Midland Met will have access to diagnostics which will ensure they are diagnosed and treated swiftly in line with the latest national guidelines. Having this opportunity to make the stroke service operate in line with best practice will ultimately benefit patients and help us improve the patient experience from admission to after discharge.

“We’ve also had additional funding provisionally approved to recruit additional staff to ensure a diverse and skilled workforce working collaboratively between inpatient acute and rehabilitation services, plus community rehabilitation. Overall, we’re making positive steps to change our services ahead of our move in 2024, and the team is taking advantage of every opportunity to seek feedback and patient input to help shape our services.”

- 4.8 **Staff survey** - In order to assess staff knowledge and engagement in the MMUH Programme, two questions about MMUH were included in the January 2023 Pulse survey that is sent to all Trust colleagues. These will be repeated in each Pulse survey (quarterly apart from Q3 when the national staff survey takes place) up to the opening of the new hospital.
- 4.9 90% of staff responded positively to the first question that asks whether they know about the development of MMUH.
- 4.10 42% responded positively to the second question that asks whether they know about the impact that MMUH will have on their role and the way they work.

4.11 Results from this first survey form the baseline for two KPIs for the communications and engagement workstream and enable us to focus on hotspot areas to improve knowledge and understanding.

5. Population – To work seamlessly with our partners to improve lives

5.1 The MMUH Programme population objectives are:

- Be #morethanahospital engaging with local people to provide accessible and inspiring community spaces.
- Seize every opportunity for MMUH to regenerate the neighbourhoods.
- Create a catalyst to improve life chances for today's' and future generations.

5.2 MMUH is a significant catalyst for major transformation and collective long-term investment with key partners driving transformation wider than just health.

5.3 As a major anchor institution and one of the largest local employers, we are working with partner organisations such as the West Midlands Combined Authority, Birmingham City Council and Sandwell Metropolitan Borough Council, the Birmingham and Solihull and Black Country Integrated Care Boards as well as the local population to maximise the regeneration impact of the MMUH.

5.4 This impact goes beyond the boundaries of traditional healthcare and will affect economic, social, cultural and environmental transformation. The measures of success will include increased educational and employment opportunities, increased local procurement via local businesses, improved connectivity and active travel opportunities and the provision of new homes and commercial opportunities in the local area.

5.5 Our work already has significant traction with the planned Midland Met Learning Campus which was successful in its bid for Towns Funding from the Government. Work is due to commence on the MMUH site later in the year and will bring together in one location Sandwell College, Aston University and the University of Wolverhampton to deliver education focused on future careers in the health sector.

5.6 In 2023 partner organisations have agreed to participate in co-creation activities which will enable us as a partnership to prioritise the focus of regeneration for the local neighbourhood and define measures of success.

6. Summary

6.1 The Critical Path shows intensive transformational activity scheduled over the next 6 months.

6.2 The MSP methodology of the MMUH Programme Company has brought improved alignment, clarity and purpose to the MMUH programme.

6.3 As we get operationally ready to move into MMUH, we must be clear on what good looks like – our key measures of success.

- 6.4 The outputs of the benefits work led by our benefits partner via Price Waterhouse Coopers (PWC) will be considered in the next reporting period.
- 6.5 The outcomes of this benefits work will be considered alongside focussed 'Success workshops' at MMUH workstream level in March 2023 at the MMUH Programme Company Away Day and in the April 2023 Trust Board Seminar session.
- 6.6 This work will inform a set of success measures associated with the MMUH Programme objectives and workstream outputs, as well as a revised and updated benefits realisation case.
- 6.7 In parallel additional performance and insight capacity is being commissioned to support good KPI reporting inclusive of forecast plans.
- 6.8 The MMUH Programme has also commissioned 3rd party inputs to support necessary improvement to the function of the Workforce workstream and to provide assurance that our clinical transformational remaining changes ensure we fit into the new hospital and that our Place based services are right sized.
- 6.9 The development of the success measures and the revised benefits case will be considered by the MMUH Opening Committee prior to the next Trust Board, alongside the programme risk register.
- 6.10 Future programme reporting will track success measures and benefits delivery, which is appropriate for this stage of the programme.
- 6.11 These next steps align with the Strategy Deployment (True North and Breakthrough objectives) paper on today's Trust Board agenda and is not separate to this implementation.

7. Recommendations

- 7.1 The Public Trust Board is asked to:
 - a. **DISCUSS** the critical path
 - b. **CONSIDER** the MMUH report with respect to Patients, People and Population
 - c. **EXPECT** future programme reporting to track success measures and benefits delivery

Rachel Barlow
Managing Director; MMUH Programme Company
February 2023

Annex 1: Midland Met Critical Milestones; February - July 2023
Annex 2: MMUH Programme Vision and Objectives