

# Delivering the Future

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**SEIZE THE MOMENT DELIVER THE FUTURE**

HCA National Leadership and Development Forum 2017



# The NHS in 2017

***2018 marks the 70<sup>th</sup> Anniversary of the NHS!!***

- Current estimates show by 2030 population will be at 60.5 million, a rise of 6 million from 2015
- Meanwhile over the same period the number of 75+ year olds will grow by 50 %
- Without action this would need an additional 22 new hospitals and around 800 beds (*Nuffield Trust*)
- Life expectancy has been rising by Five Hours a day!...
- Costs 3 times more to look after a 75 year old, and 5 times more to look after an 80 year old than a 30 year old.



# The NHS in 2017

*(5YFV Review Published 31<sup>st</sup> March 2017)*

So.....

- *We're getting Healthier, but we're using the NHS more*
- *The Quality of NHS Care is improving, but we're becoming far more transparent about care gaps and mistakes*
- *Staff numbers are up, but staff are under more pressure*
- *The Public are highly satisfied with the NHS, but concerned for its future*
- *There is now an underlying consensus about how care needs to change to 'future proof' the NHS, but the ability to do so risks being overtaken by what the CQC has called today's 'burning platform'*



## The Drivers.....

An exhaustive list exists, but amongst those.....

- Health & Social Care Act 2012
- NHS Annual Mandate
- NHS Five Year Forward View – update 31/3/2017
- Lord Carter Productivity and Efficiency Review
- Sustainability Transformation Plans
- CQC/NHSI – increasing expectations of performance (quite Rightly!)
- Growing elderly population, ‘customer/patient expectations’, A&E ‘Front door – first call’, DETOC’s, hospitals not designed for the 21<sup>st</sup> Century.....etc
- and.....
- **Unprecedented activity across the NHS during 2016/17**



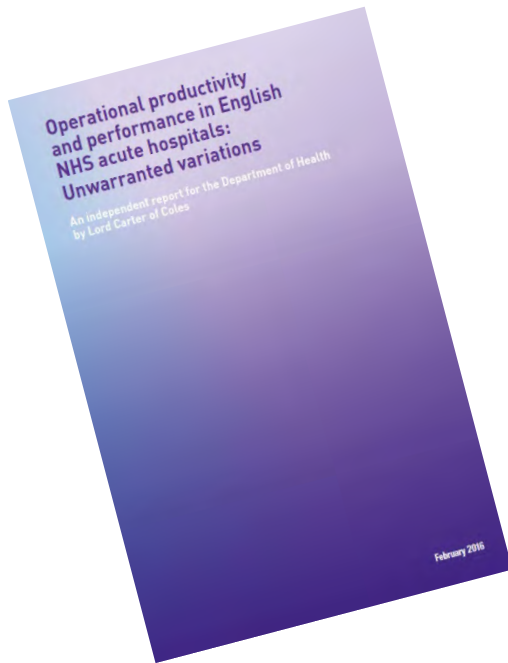
## The Drivers for Estates and Facilities....

- Lord Carter Productivity and Efficiency Review
- Lord Naylor Review – March 2017
- HTM's / HBN's / Technical guidance
- Health and Safety Legislation – (Asbestos, EAW, RRO (Fire), COSHH etc.)
- PLACE
- Hospital Foods Standards Panel Report
- National Standards of Cleaning / PAS 5748 / Infection Prevention and Control
- Single Equality Act
- CQC Standards
- Premises Assurance Model – PAM 2016 - The most important change is that the NHS PAM has been updated to support the **NHS Constitution right:**

***“You have the right to be cared for in a clean, safe, secure and suitable environment.”***



# Lord Carter



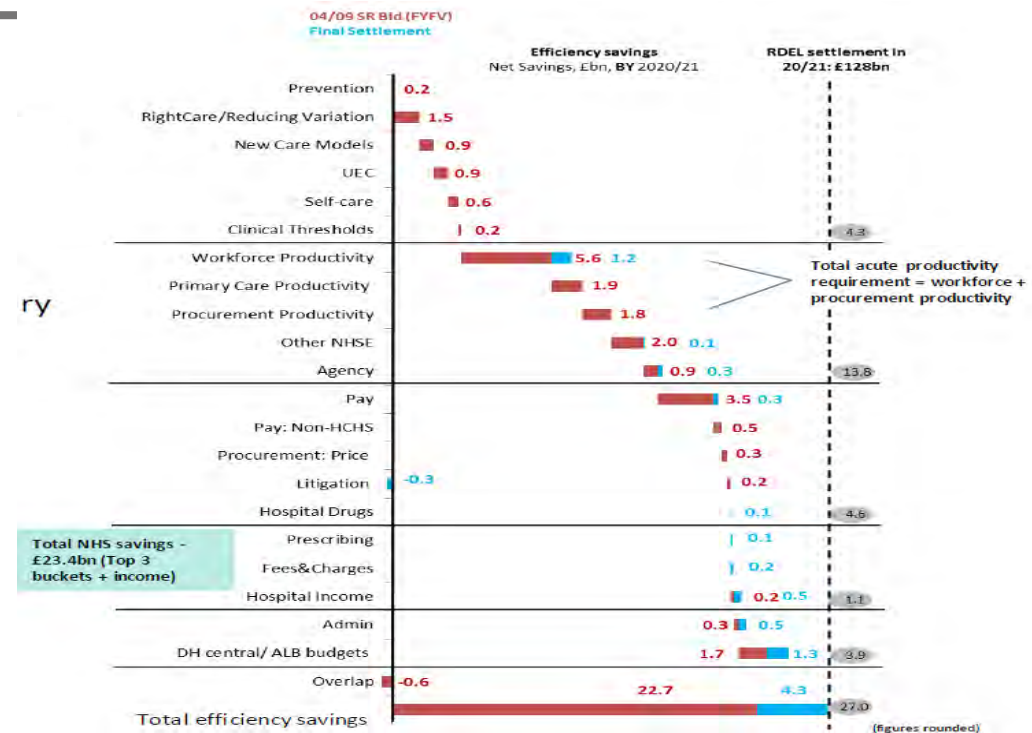
NHS provider trusts occupy:

- 1,200 sites
- around 3,000 other treatment facilities
- Buildings GIA of 26million m<sup>2</sup>
- 6,500 Hectares of Land
- Over 100 licenced independent providers of NHS Healthcare
- Cost of running these facilities is over £8 billion per annum and these costs are rising.
- 138.5 million in-patient main meals were requested in 2015/16, at an average cost of £10.93 per patient

# Background



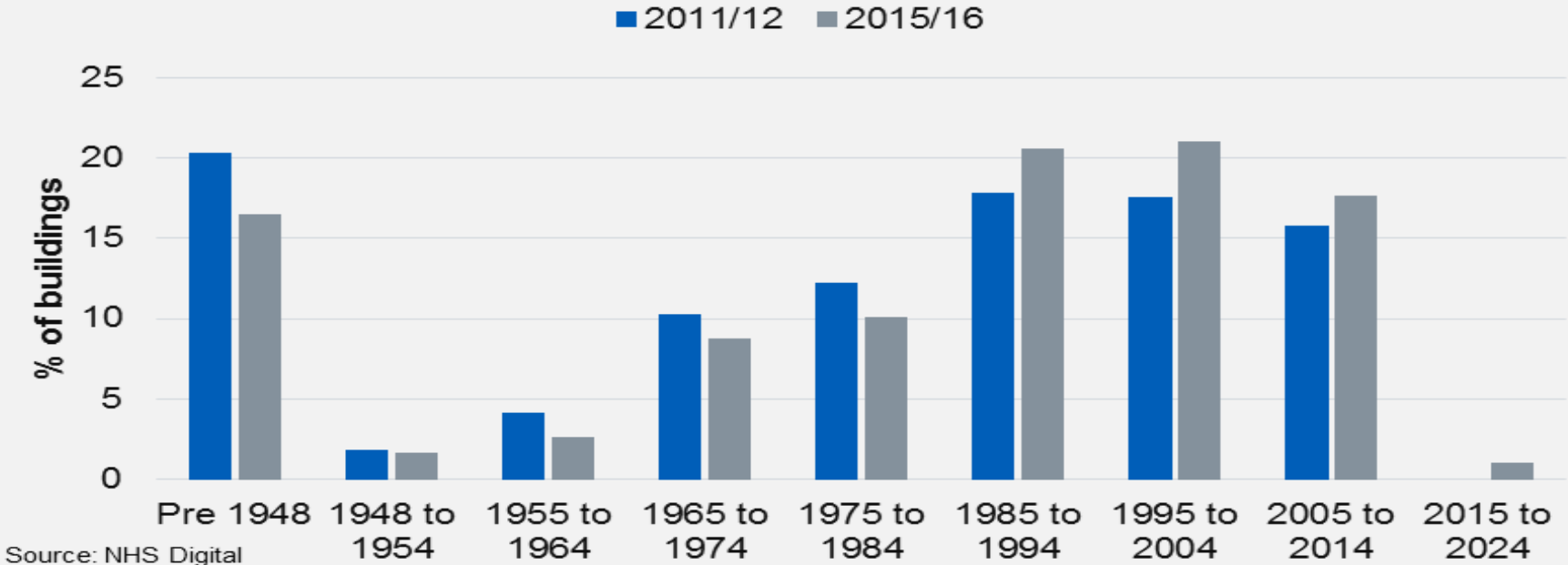
- 5 Year Forward View estimates the NHS needs to find £30bn by 2020-21, assuming no investment or efficiency savings
- This means **10-15% real terms cost reduction** by April 2021
- Proportion of £22bn that is **acute productivity requirement** is £9.5bn including Agency
- Lord Carter estimated £5bn could be saved through better operational grip and tackling system issues such as delayed transfers
- EFM target £1.2bn



# The NHS Estate



Figure 1: Age Profile of the NHS Estate from 2011/12 - 2015/16



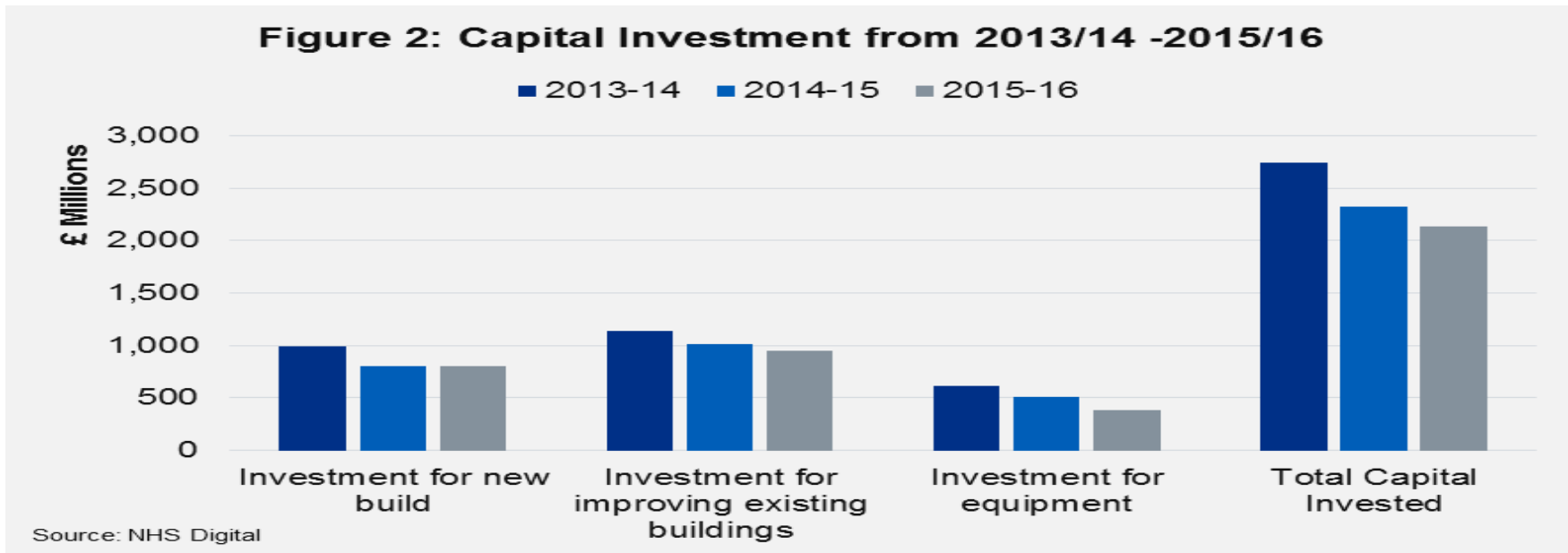


# The NHS Estate



## Capital Investment at Trust Level

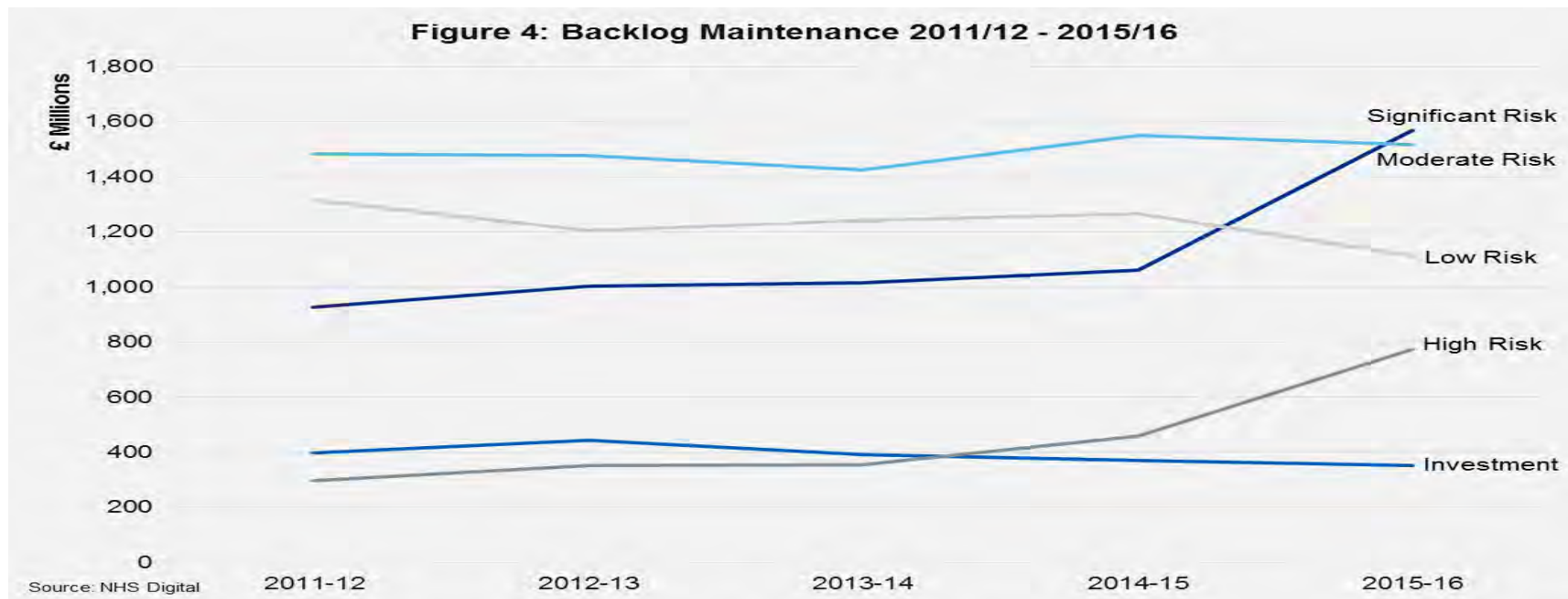
The total capital invested **decreased by 8%** (£185.8 million) from 2014/15 to 2015/16, whilst the investment for new build had increased slightly by £5.2 million.



# The NHS Estate

## Backlog Maintenance

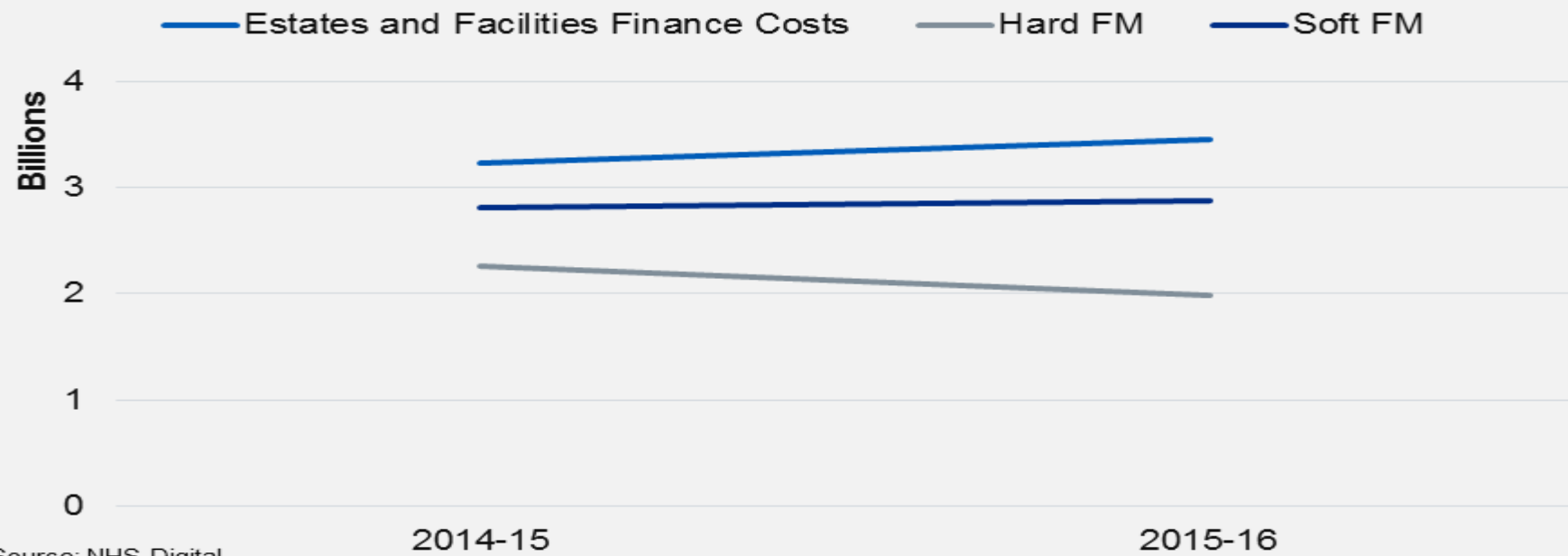
The total cost to eradicate High, Significant, Moderate and Low risk Backlog maintenance across the NHS Estate is around **£4.8bn**



# The NHS Estate



**Figure 3: Overview of Facilities Management Services Costs  
2014/15 - 2015/16**



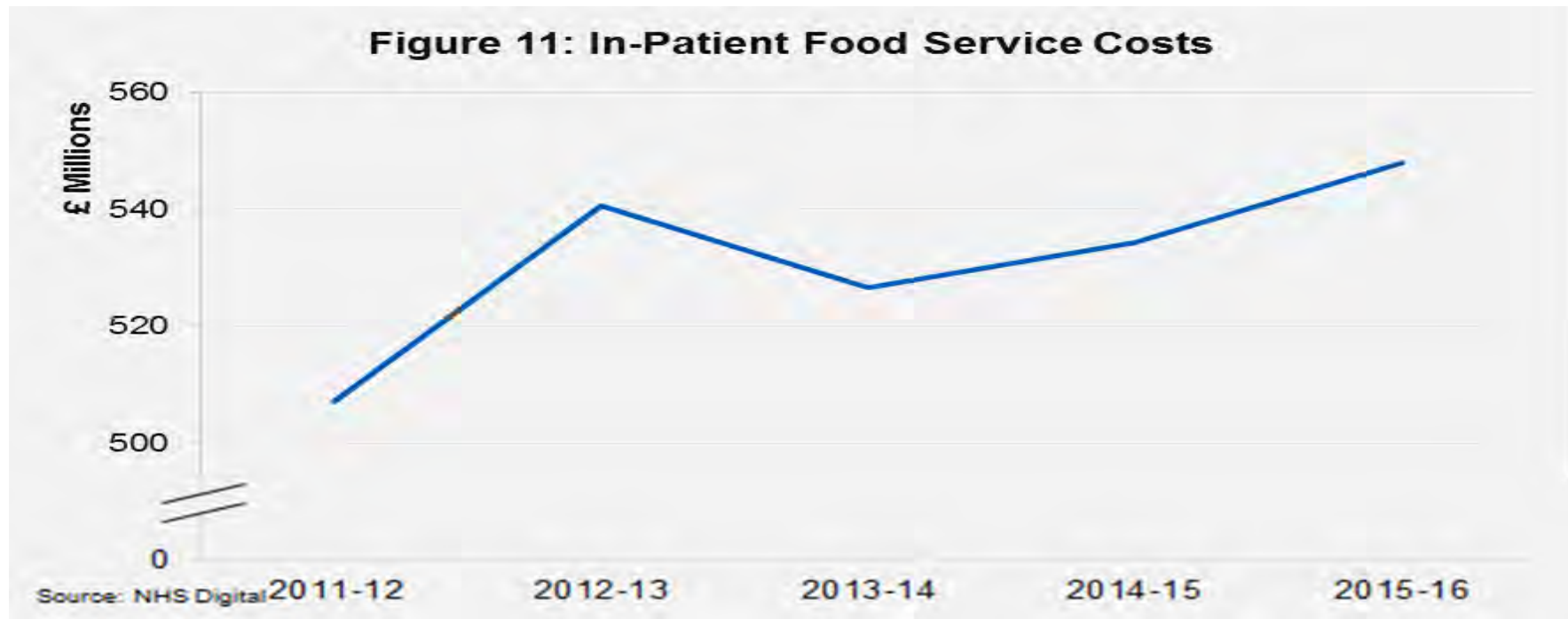
Source: NHS Digital



# The NHS Estate

## Annual gross costs of inpatient Food service

The annual inpatient food costs for 2015/16 was **£548m**



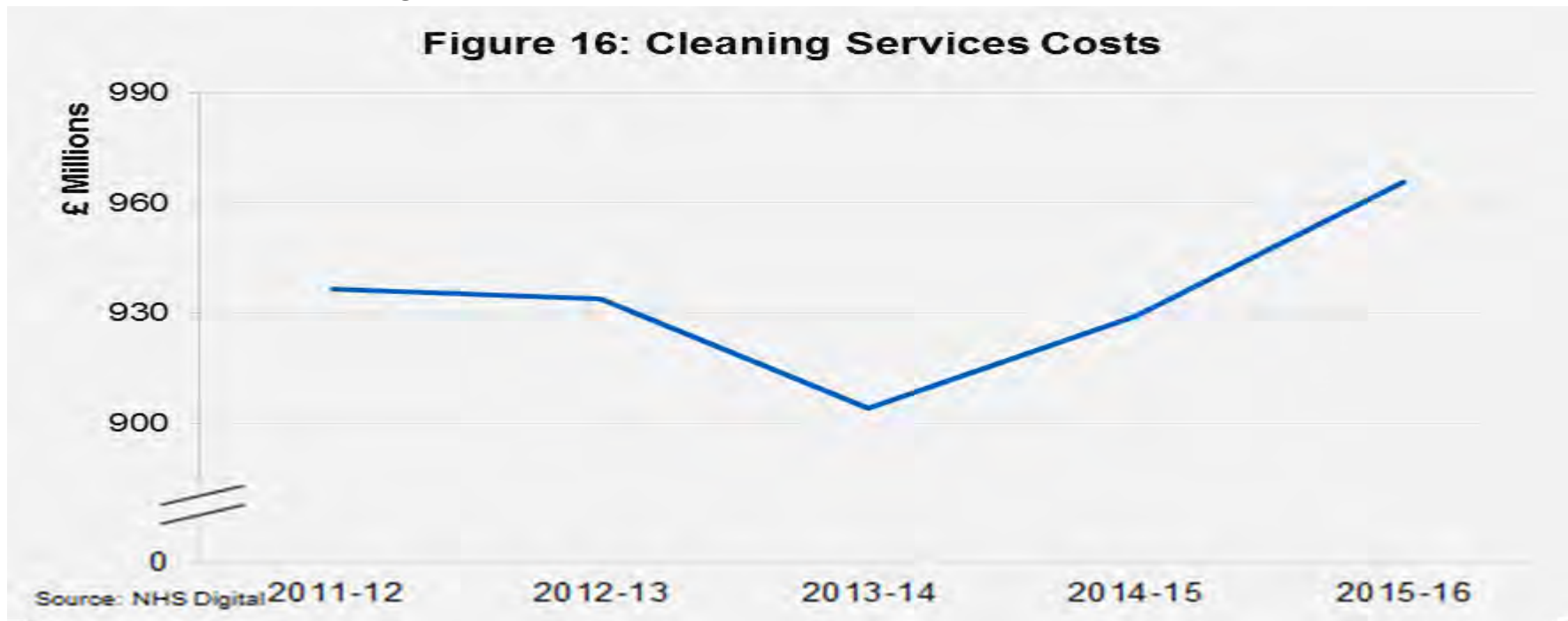
# The NHS Estate

## Cleaning Services

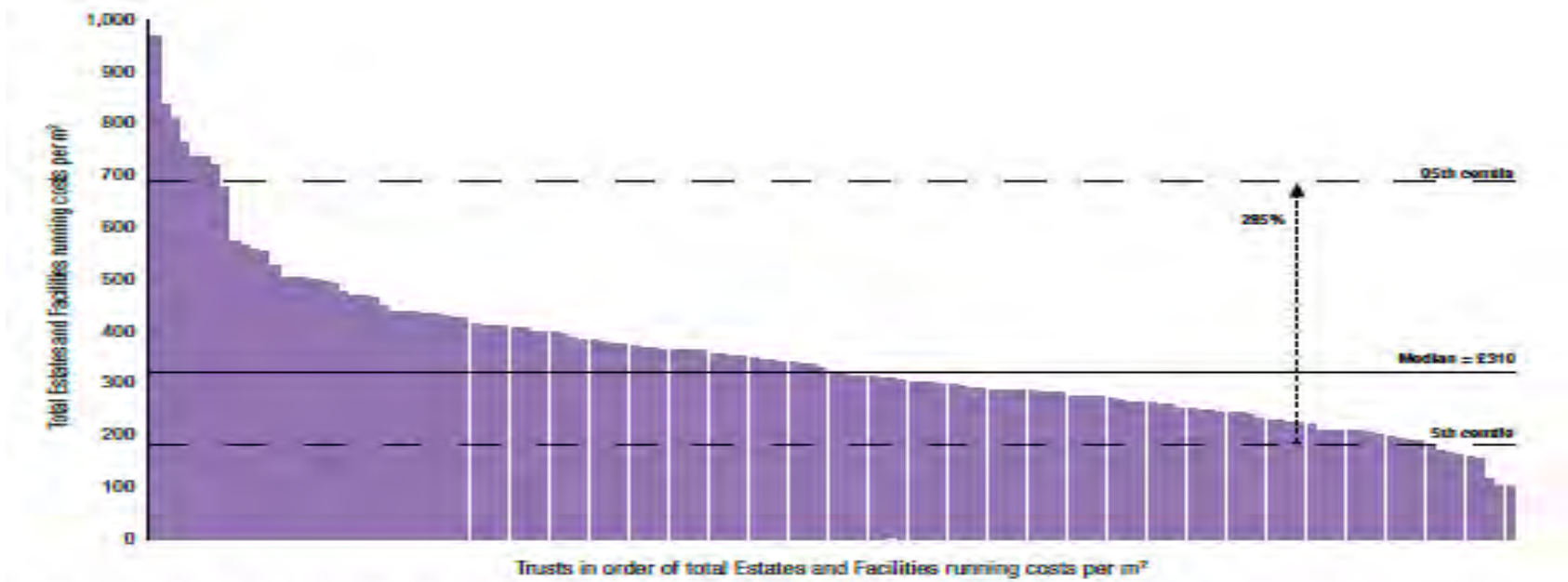
The annual cleaning service costs for 2015/16 was **£965m**



**Figure 16: Cleaning Services Costs**



# Scale of the Challenge



**Figure 3.5 – A distribution of estates and facilities running costs per m<sup>2</sup>. The most expensive trusts spend around 3.8 times more on running costs per m<sup>2</sup> than the least expensive trusts. Analysis showed no direct correlation between running costs and safety or quality<sup>49</sup>**

# Scale of the Challenge

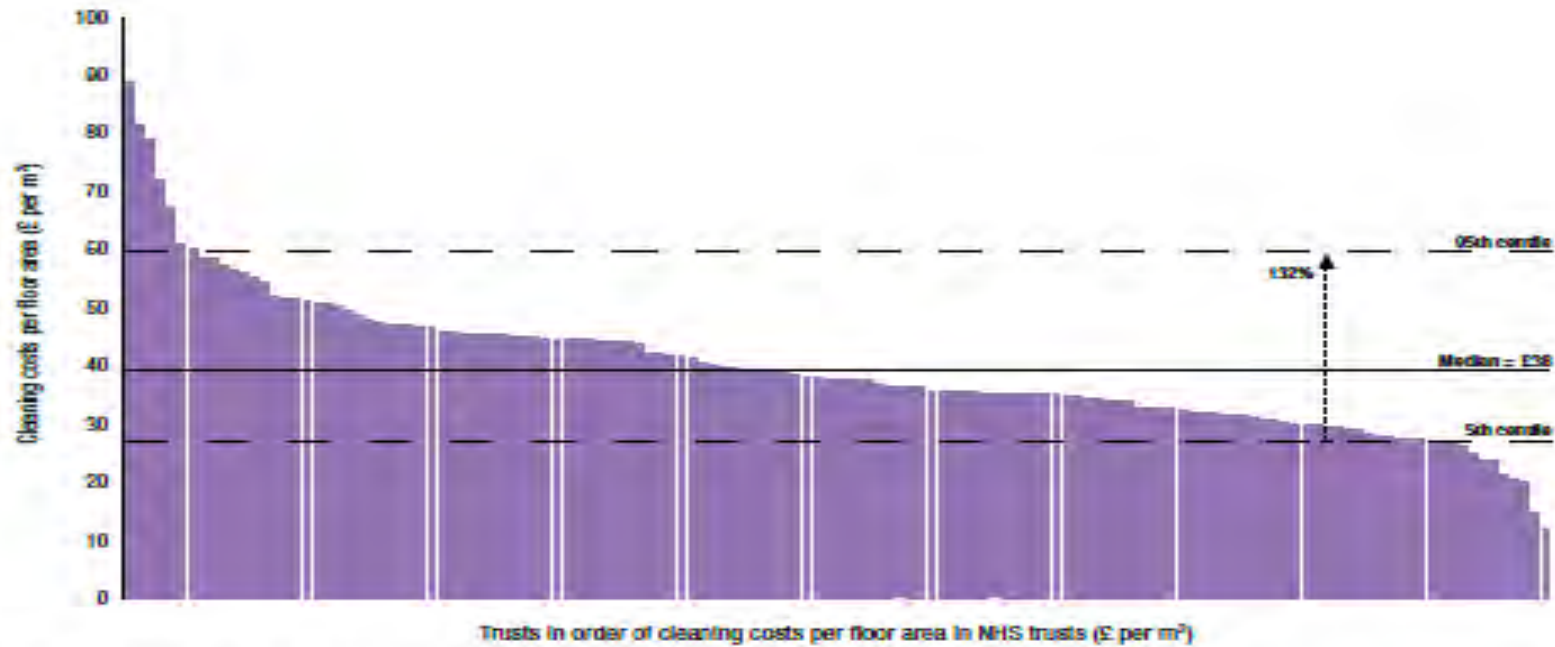


Figure 3.7 – A distribution of cleaning costs per floor area (m<sup>2</sup>). The most expensive trusts spend around 2.3 times more on cleaning costs per m<sup>2</sup> than the least expensive trusts<sup>52</sup>

# Scale of the Challenge

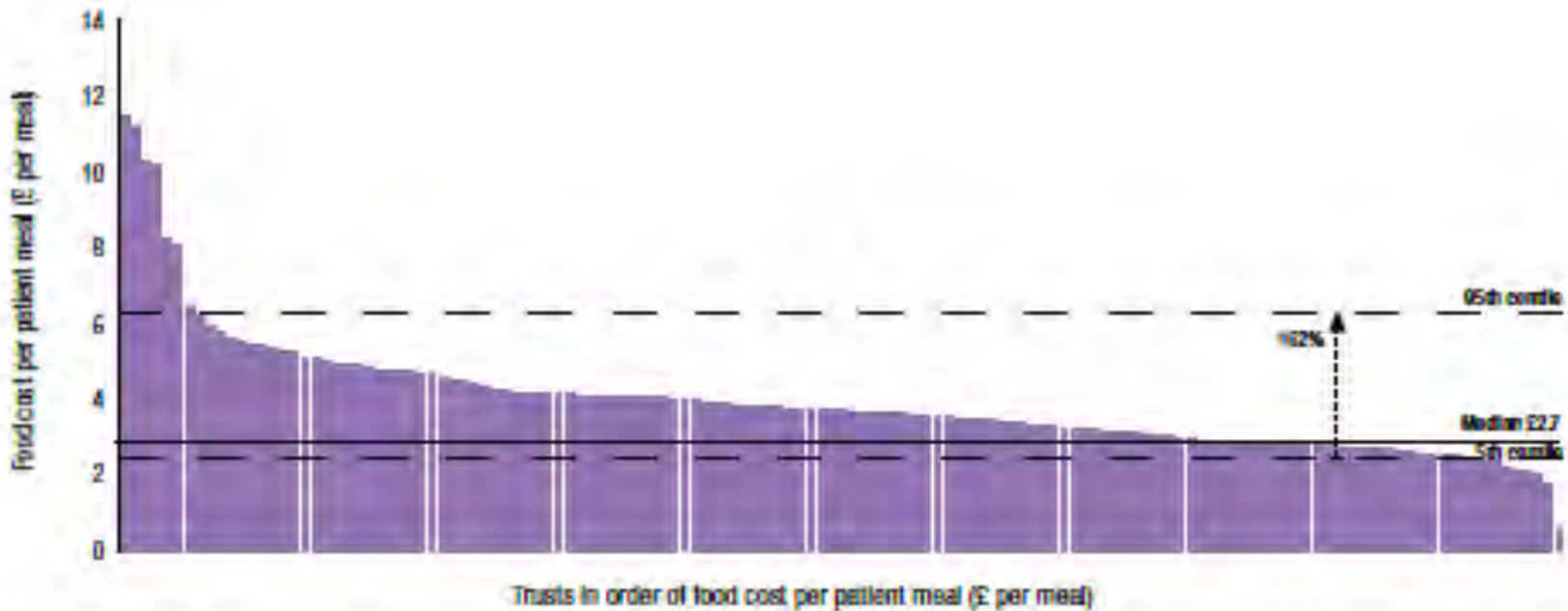



Figure 3.8 – A distribution of food costs per patient meal. The most expensive trusts spend around 2.6 times more on food cost per patient meal than the least expensive trusts. There is no correlation observed between food cost per patient meal and food quality<sup>23</sup>




# Carter - Final report published 5 Feb 2016

## KEY MESSAGES

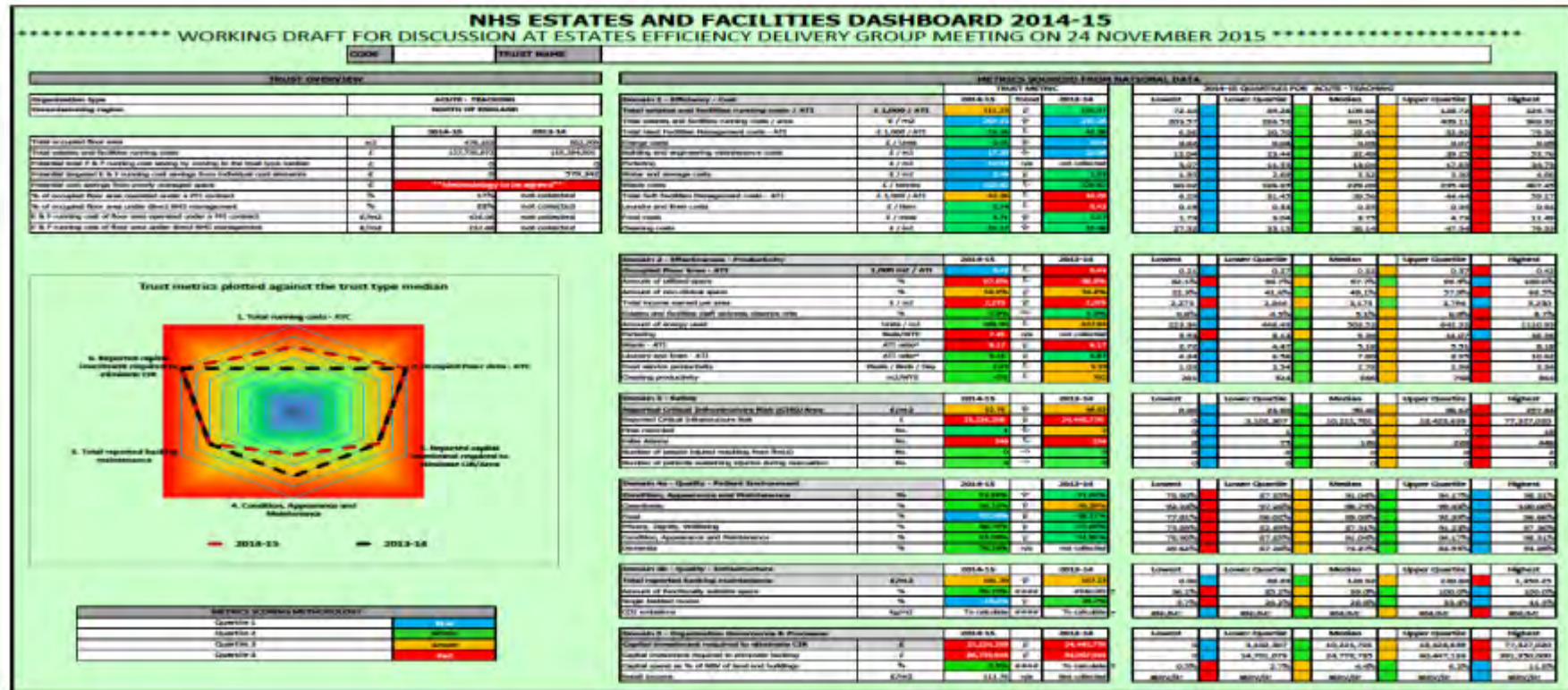
- ***Unwarranted variation*** across all areas of cost (clinical & non-clinical)
  - Need 'model hospital' – metrics and “what good looks like”
  - Data needs to become single version of the truth – leading to an **integrated performance framework (IPF)**
  - CQC to embed **IPF** into its quality and resource assessments
  - Ensure CIPs are consistent and based on Carter
  - **15 recommendations from the Final Report**
- 

## Recommendation 6 – Supporting Actions

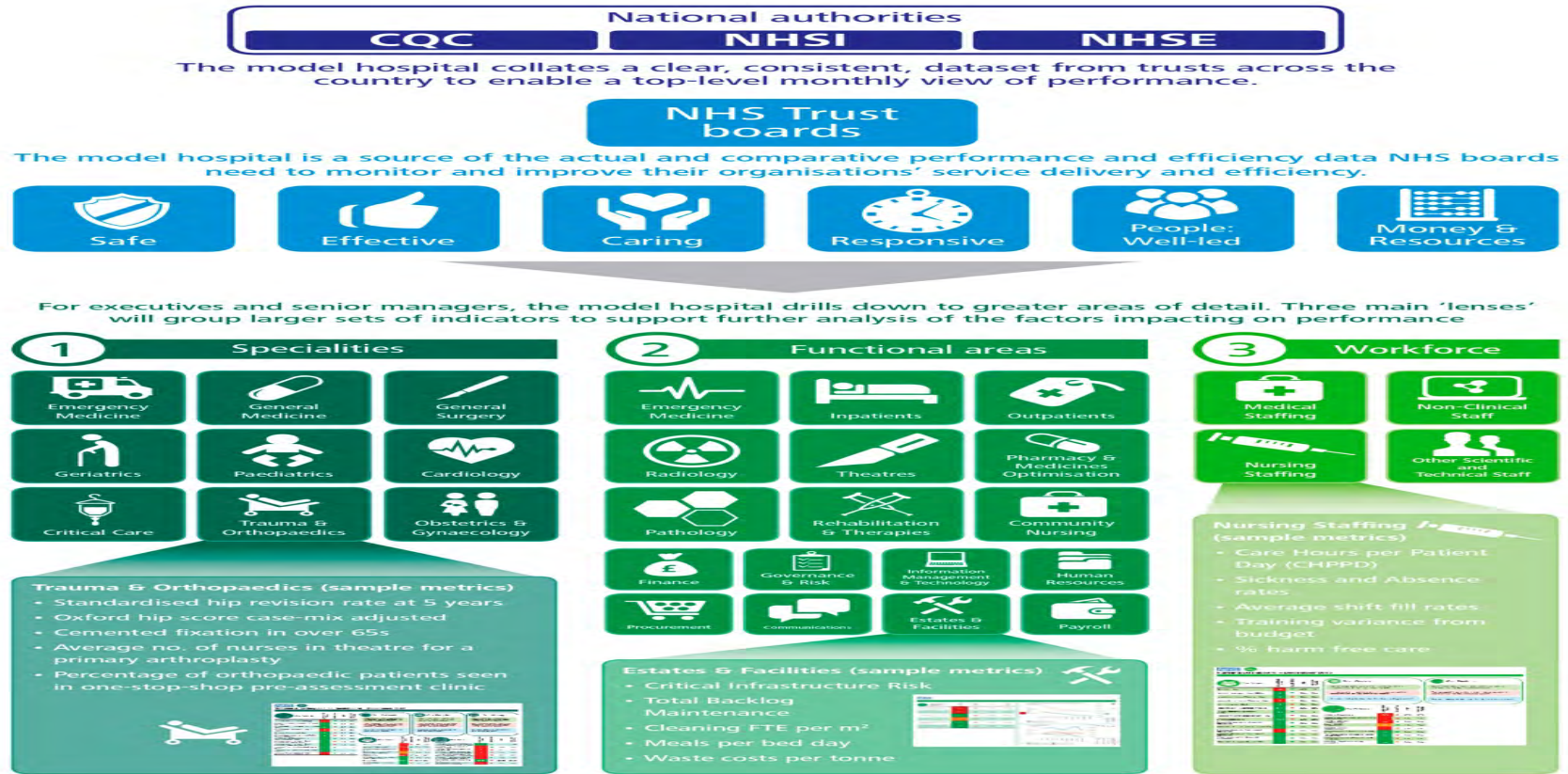
### **This will be delivered by:**

- Ensuring every trust has a strategic estates and facilities plan in place.
  - All trusts having a plan to operate with a maximum of 35% of non-clinical floor space and 2.5% of unoccupied or under-used space by April 2017 and delivering this benchmark by April 2020
  - Investing in energy saving schemes funded through a new Department of Health, “invest to save energy fund” set up by April 2017, working in partnership with Salix and other partners
  - The HSCIC and NHS trusts should ensure better data accuracy of the Estates Return Information Collection (ERIC) data
  - Ensuring estates and facilities costs are embedded into trusts’ patient costing and service line reporting systems, to be monitored by NHSI
- 

# Anonymised Dashboard



# Model hospital & Single Integrated Performance Framework



The anatomy of the Model Hospital



# Sir Robert Naylor Review

**Why the Estate Matters for Patients.** (Published 31<sup>st</sup> March 2017)

## 17 Overall Recommendations that fall into 3 categories:

1. *Improve capability and capacity to support national strategic planning and local delivery*
2. *Encouraging and incentivising local action*
3. *Funding and National Planning*

- Establishing a new NHS Property Board
- Vacated NHS land should be prioritised for development of homes for NHS staff, where there is a need
- Sale receipts to be kept by NHS Trusts
- Capital investment and the '2 for 1' offer matched by HMT



# Next Steps on the Five Year Forward Review

(Published 31<sup>st</sup> March 2017)

Main Priorities of the Review is to mark the '3<sup>rd</sup> Phase' of the 5YFV by concentrating on:

- *Improving A&E Performance*
- *Strengthening access to high quality GP Services*
- *Improvements in cancer services (including waiting times standards)*
- *Improvements in Mental health*
- *Accelerate service redesign locally*
- *Focus on 'enablers' namely workforce, safer care, technology and innovation.*



# Next Steps on the Five Year Forward Review

(Published 31<sup>st</sup> March 2017)


The NHS 10 Point Efficiency Plan:

## Point Number 7:

*“The NHS also needs to protect and improve its **estates and facilities**. Facilities Management has a direct bearing on patient experience, for instance by ensuring that premises are safe, warm and clean environments for staff and patients and by preparing high quality and nutritious hospital food. The NHS spends over £6.5bn maintaining and running its estate and facilities. Here too there are opportunities to achieve efficiency savings....”*

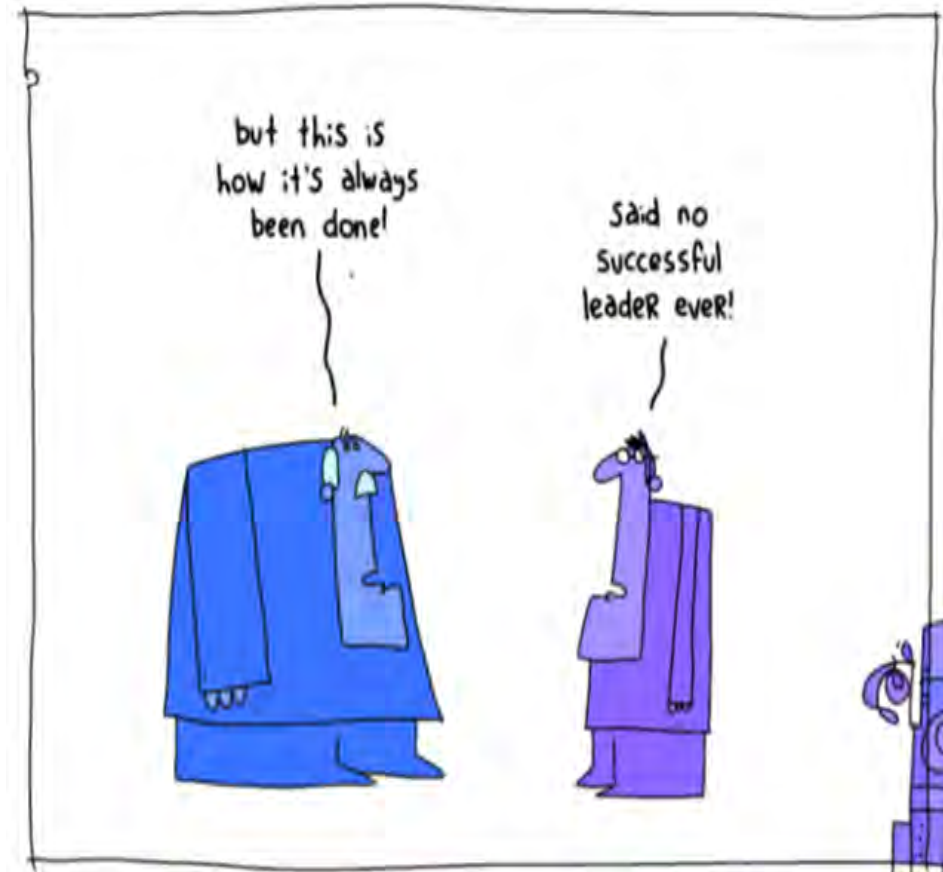


## Sustainability & Transformation Plans

- Impact of the 44 STP's Nationally??...
  - Capital requirements of £10bn
  - Backlog maintenance of £5bn
  - Similar sum required to deliver 5YFV
  - Intrinsically linked to Carter and Naylor review
  - DH/HMT pledge of £325m & £100m for ED 'streaming'
  
  - *Transformation with Big or Small 'T'?*
  - *Real integration can be achieved!!*
  - *Need to 'be brave'!*
- 



***How does the EFM  
Professional  
'deliver the future'  
in the  
NHS???***



# Delivering the Future

## Enabled Workforce – Intelligent EFM

- EFM/ICT engagement...factored into Estates and Workforce Strategy
- 'Enabled workforce' whether Acute or Community based
- Do we own Assets in the Future????
- 'Free Flow' of information/data between Patient Information Systems
- Internet of Things (IoT) embedded into EFM whether for asset management /maintenance or patient monitoring/location and wellbeing
- 'Smart'asset management, GS1 roll out, use of BIM in capital schemes



# Engagement

- 'True' Partnership working with suppliers, contractors
- Non-adversarial contractual relationships
- Innovation sharing and learning with the Private Sector
- Sharing Best Practice and Case Studies
- Professional bodies/associations (HefmA, IHEEM, HCA, AHCP, etc)
- Communication!!
- Training events – seminars, study days, career development
- Succession Planning across EFM within the NHS



## **Collaboration - the name of the game!**

- Shared Services, joint collaborations between NHS Trusts, FT's etc
- Joint Venture Companies through 'Teckal' exemption route with Local Authorities and other Public Sector
- Realising the benefits of JV/Collaboration with Local Authorities in the Health and Social Care relationship, management of DeTOC's
- 'One Public Estate' and the clear benefits it offers in delivering 'Health Villages' etc
- Collaboration with Housing Associations for Domiciliary and Intermediate Care
- **HefmA – MoU signed with HCA & AHCP**



## How do we improve and deliver?

- Recognition of the importance that EFM services have on Patient treatment and recovery, especially that of food and hydration!!
- Patient Engagement in Service Delivery
- Belief in the Vision and Strategy for EFM
- Drive the Vision - Passionately, Relentlessly & with Pride!
  
- Build the 'Patient Experience'
  
- The Key to Success:
  - ✓ **Cultural and Behavioural Change at all Levels in the Organisation**



# Cultural and Behavioural Change

## This is not training

Training can improve service by setting standards of behaviour, teaching a tangible process such as how to use a system or answer a query.....**BUT...**

It cannot fundamentally change an organisation's culture or the attitude of its employees towards patients and service



**Is it about creating a Customer Focussed SERVICE  
or a  
Patient EXPERIENCE?**



## Essentials for creating the 'Patient Experience'

- Define the Vision (What is it?) – Measure it – Communicate it!!
- Embed the Culture
- Training and Development – Reward and Recognition
- Communicate in person - Walking the floor - Visible presence
- Strong 'Leadership' rather than 'Management'
  - ✓ What you do (management)
  - ✓ The way you do it (leadership)
- *It's about.....*

**'Doing the Right Things' rather than 'Doing Things Right'**



# Passion, Pride, Drive & Enthusiasm



- EFM services ARE CRITICAL to patient treatment and well being
- Invest in your staff – training, development, encourage networking, membership of Professional Associations, innovation, creativity, resilience in your workforce
- The Patient Journey is touched at every point by the services YOU provide
- Deliver the service as YOU would want it, for Every Patient, Every Day
- Ask your patients “What matters to you?”
- **YOU drive the change...SEIZE THE MOMENT...DELIVER THE FUTURE!**







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