



Strategic Plan Document for 2014-19

The Christie NHS Foundation Trust

Public summary



Strategic Plan for y/e 31 March 2015 to 2019

This document completed by (and Monitor queries to be directed to):

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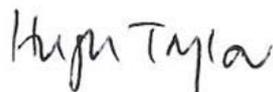
In signing below, the Trust is confirming that:

- The Strategic Plan is an accurate reflection of the current shared vision and strategy of the Trust Board having had regard to the views of the Council of Governors;
- The Strategic Plan has been subject to at least the same level of Trust Board scrutiny as any of the Trust's other internal business and strategy plans;
- The Strategic Plan is consistent with the Trust's internal operational plans and provides a comprehensive overview of all key factors relevant to the delivery of these plans;
- All plans discussed and any numbers quoted in the Strategic Plan directly relate to the Trust's financial template submission; and
- The 'declaration of sustainability' is true to the best of its knowledge.

Approved on behalf of the Board of Directors by:

Name (Interim Chair)	Sir Hugh Taylor
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Signature



Approved on behalf of the Board of Directors by:

Name (Interim Chief Executive)	Roger Spencer
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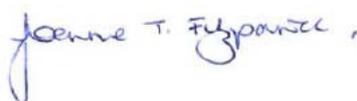
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Approved on behalf of the Board of Directors by:

Name (Finance Director)	Joanne Fitzpatrick
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Signature





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1. The Christie and our Declaration of Sustainability

We care, We discover, We teach

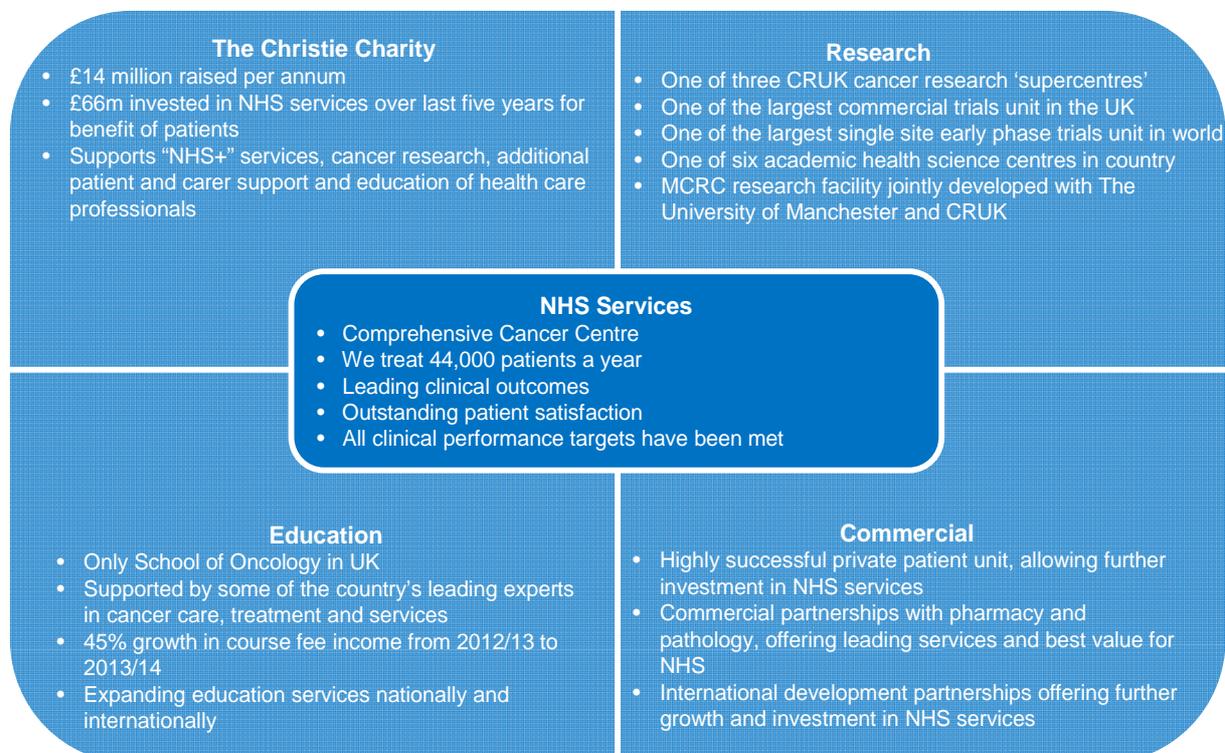
We specialise in cancer treatment, research and education and are the first UK centre to be accredited as a comprehensive cancer centre.

We are the largest cancer centre in Europe treating more than 44,000 patients a year. We serve an immediate population of 3.2 million in the Greater Manchester and Cheshire area and also deliver a number of regional and national services from our main Christie site. Our patients are at the heart of everything that we do.



As a Centre of Excellence we focus solely on improving outcomes for oncology patients. We are able to provide services based on expert staff and a specialised infrastructure dedicated to the delivery of cancer treatment care, research and education. Our focus and size enables us to uniquely deliver effective and efficient specialist care offering patients the best possible outcomes from our research programme. This is enhanced by the support that we receive from The Christie Charity which enables us to provide a level of care and experience for patients above and beyond that funded by the NHS.

The Christie's portfolio is made up of a number of component parts that together offer our patients access to leading treatments, care and the opportunity for the best outcomes.



Together these activities enable our team to deliver outstanding high quality patient services, consistently rated highly by our patients, and best value from our ability to treat a critical mass of patients and attract income from multiple sources.

Declaration of sustainability

The board declares that, on the basis of the plans as set out in this document, the Trust will be financially, operationally and clinically sustainable according to current regulatory standards in one, three and five years time.

Confirmed

In making this declaration the Board of Directors has considered the following key points:

Clinical

- Our compliance with IOG requirements, commissioner specifications and CQC standards.
- Our accreditation as a Comprehensive Cancer Centre for service and research by the Organisation of European Cancer Institutes.
- Our consistent delivery of the best outcome options for patients, and patient experience, not only through access to the latest treatments and techniques in our NHS services but also by our extensive research and education programmes, supported by The Christie charity, enabling considerable investment in patient services and research which is above and beyond NHS standard treatment.

Operational

- The expertise and critical mass of our workforce, together with the flexibility of our facilities and sound five year capital plan to meet changes in demand and care increasingly delivered on an ambulatory basis.
- The brand / reputation of The Christie enables us to recruit world leading health professionals to deliver the very best quality of care.
- Our significant investment in our equipment, facilities and informatics infrastructure ensuring state of the art facilities as close to home for patients as possible and flexible capacity to allow expansion if needed.

Financial

- The considerable financial record of the Trust, the understanding of its cost base together with consistent delivery of CIP, plans for transformational change through pathway redesign and the processes in place to ensure that there is no detrimental impact on clinical quality.
- The diversity of the trust's income with further opportunities to expand low risk commercial activities enables the trust to continue to invest in services whilst withstanding downside modelling.

Strategic planning

- The quality of our strategic planning and delivery, demonstrated by:
 - Stakeholder support drawn from the extensive engagement in the development of the 20:20 Vision, showing clearly what stakeholders want from The Christie.
 - The strong internal monitoring and governance procedures in place for standards and plan implementation.
 - The engagement of senior clinicians, staff and external stakeholders in the development of this plan.
 - The detailed market assessment work undertaken with the support of external experts.
 - The strength of the trust's existing strategic planning process, assessed through the self-assessment toolkit.
 - The challenge sought from external experts on our self-assessment toolkit assessment and development of the Strategic Plan.

		Measure	09/10	10/11	11/12	12/13	13/14	14/15	15/16	16/17	17/18	18/19
Clinical	Outcomes	% IMRT	n/a	n/a	n/a	41.0%	60.4%					
		Chemo trials ¹	1,980	2,383	2,869	2,142	1,983					
		30 day post-op mortality	n/a	n/a	0.3%	0.8%	0%					
	Safety	62 days ²	72.3%	69%	85.4%	89.3%	87.1%					
		C.diff ³	45	33	3	7	3					
Experience	Patient survey ⁴	93.8%	94%	93.1%	95.5%	96.1%						
	Complaints	165	236	160	67	66						
Operational	Workforce	Friends & Family test ⁵	3.95	4.00	3.96	4.13	4.18					
		Sickness ⁶	4.12%	3.63%	3.58%	3.42%	3.18%					
		Agency ⁷	1.04%	1.83%	1.38%	0.94%	0.49%					
	Facilities	PEAT ⁸	Exc ^{ent}	Exc ^{ent}	Exc ^{ent}	Exc ^{ent}	97%					
Financial	Margin	EBITDA	10.1%	9.5%	7.9%	9.1%	8.2%	6.2%	6.2%	7.0%	7.3%	9.3%
	Liquidity	Ratio	5	5	5	5	5	4	4	4	4	4
	Efficiency	CIP delivery	£6.0m	£6.0m	£6.0m	£6.3m	£6.3m	£5.0m	£5.0m	£5.0m	£5.0m	£5.0m

¹ number of patients within Chemotherapy trials, ² with reallocations policy from 2011, ³ attributable after 72 hours, ⁴ patients reporting good/excellent, ⁵ staff recommendation as place to work, ⁶ Ave monthly rate, ⁷ Ave monthly spend, ⁸ assessment changed in 13/14 to PLACE assessment with new scoring method

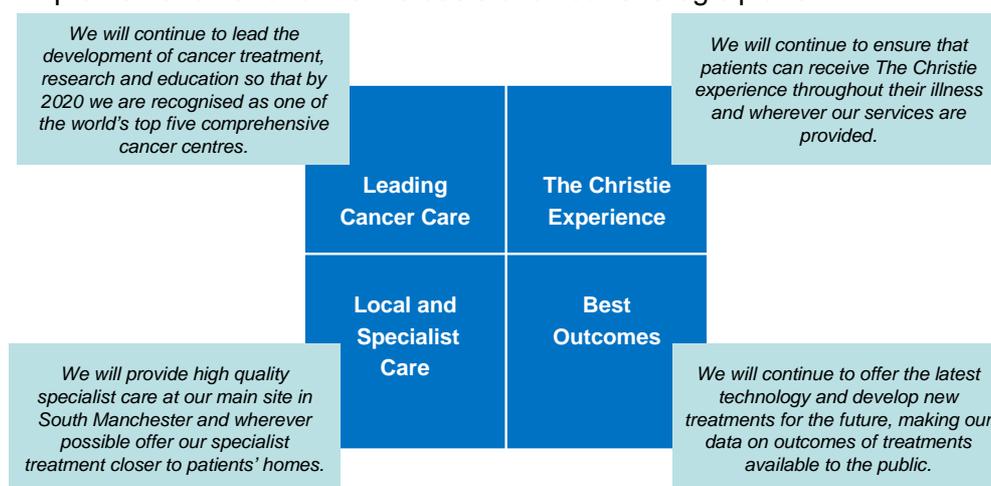
2. Introduction to The Christie's five year strategic plan

The Christie's strategic plan

The Christie has a strong strategic focus based on wide and detailed engagement. As such our five year strategic plan is set in the context of clear guidance from patient, staff and other stakeholders how we should develop our organisation to continue to provide excellent patient care within a financially strong organisation.

20:20 Vision

The Christie has a strong culture of patient focused care. This is our philosophy and patients are fully engaged and consulted in all we do. As a successful Foundation Trust since 2007 we developed our 20:20 Vision in 2012/13 through stakeholder engagement with over 2,500 contributions from the public, patients, carers, staff, charities, commissioners and local partner organisations. This Vision is now in its second year of implementation and forms the basis of all our strategic plans.



Our objectives

Our strategic objectives, set out to deliver the Trust's 20:20 Vision are as follows:

- To demonstrate excellent and equitable clinical outcomes and patient safety, patient experience and clinical effectiveness.
- To be an international leader in research and innovation which leads to direct patient benefits.
- To be an international leader in professional education for cancer care.
- To integrate our clinical, research and educational activities as an internationally recognised and leading comprehensive cancer centre.
- To provide leadership within the local network of cancer care.
- To maintain excellent operational and financial performance.
- To be an excellent place to work and attract the best staff.
- To play our part in the community.

Development of the strategic plan

We have developed our strategic plan by taking the following steps:

- An overview of the market context and analysis for The Christie – a national context, local context, clinical and financial drivers impacting on our services
- An analysis of The Christie as a Comprehensive Cancer Centre with a diverse portfolio of income. This includes the market conditions for each main area of income - NHS services (including service line analysis), Research, Education, The Christie Charity and commercial activities.
- Having established our sustainability we identify our strategic focus and plans for implementation linked to our 20:20 vision.

3. Market context

National context

Cancer incidence

Nationally the incidence rates of cancer continue to rise. Improving Outcomes: A strategy for cancer (2011) reports that more than one person in three will develop cancer at some time in their lives and one in four will die of the condition. With improving access and technology more people are surviving their cancer with an estimated 1.8 million people living with and beyond a cancer diagnosis at present. More than 331,000 people were diagnosed with cancer in 2011 in the UK, which equates to around 910 people per day. Cancer incidence rates in Great Britain have risen by 23% in males and by 43% in females since the mid 1970s. Other key factors that will create more demand for Christie services are:

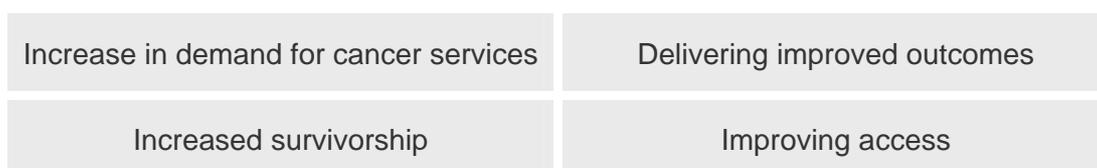
- The effect of a growing and ageing population is likely to further increase the incidence of cancer and more than a third of cancer diagnoses are in those aged 75 or over. Furthermore lifestyle factors such as obesity and alcohol consumption will continue to increase incidence and patient referrals to The Christie.
- The planned earlier detection of cancers will lead to a greater proportion of patients being referred to specialist centres with treatable cancers. This increase in demand for cancer treatment and care comes alongside more complex patient comorbidities requiring both ever more sophisticated treatments alongside non-oncology support services such as dementia care given the ageing population and increasing survival rates.

National commissioner strategy

Commissioner strategy has focused on improving cancer outcomes through improved screening, earlier diagnosis, improved access to treatments and information collection. As part of the 'Call to Action', NHS England is developing a five year strategy for specialised services, which will be published in Autumn 2014. It is anticipated that this will require a rationalisation of current service provision to concentrate on Centres of Excellence connected to research and teaching which deliver sufficient volumes of activity to satisfy competency requirements. It will also require different ways of working at an organisational level such as partnerships, prime vendor contracting relationships and hub and spoke models to raise quality standards and deliver value for money without reducing access to services wherever possible.

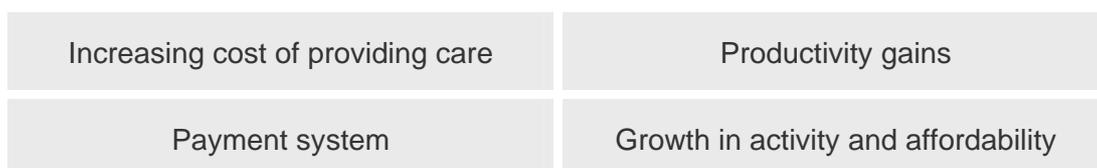
Clinical drivers

Both nationally and locally the ageing population and increase in cancer incidence, diagnoses and survivorship pose the greatest impact on commissioners and the trust over the coming five years.



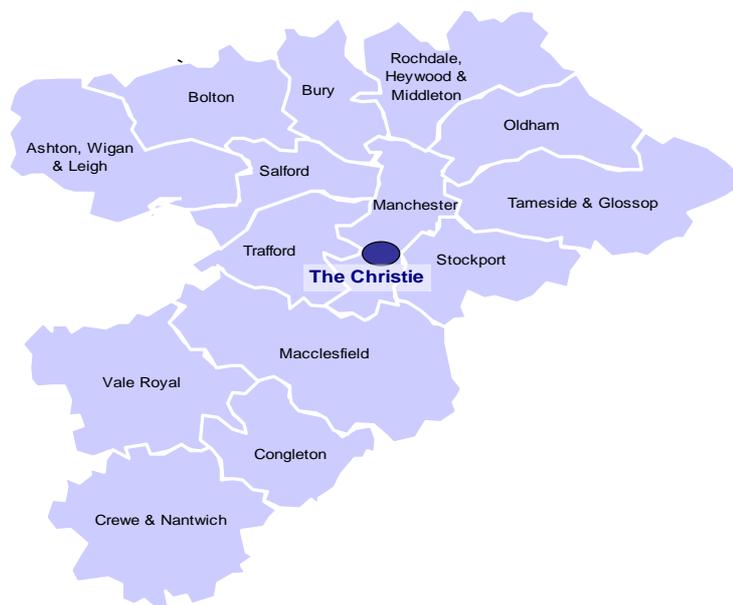
Financial drivers

Shifting to new patterns of care is a recognised requirement for the NHS, particularly if we are to balance growth and quality within a static funding status. There are a number of factors to consider as part of our strategy, that require a clear understanding of their potential impact and how we can best manage these to minimise the effect on our strategic intentions.



The Christie and the local health economy

Christie patients



The Christie serves a local population of 3.2 million residents. In addition, approximately 27% of our patients come from outside this locality to receive specialist care unavailable in their immediate area.

Our range of care services delivered include radiotherapy, systemic anti-cancer therapy (SACT), supporting care, haematological transplants, complex surgery, critical care, pain service, endocrinology and clinical and patient supporting services.

Local commissioning arrangements

Christie services are commissioned by NHS England, and there are national drivers for change which will impact on the local contracting arrangements and consequently on the Christie's strategic direction. These include a potential reduction in the number of specialised service sites to address the variations in quality and outcomes and in cost, and the challenges of a specialised workforce and creating a critical mass of activity. "Everyone Counts" foresees a concentration of expertise in fewer centres for most aspects of specialised care. This does not mean concentration of service delivery – access is a core factor – and different localities may require different models to deliver local service delivery. There will also be a key role for Academic Health Science Networks, strengthened links to research and teaching, and recognition that many specialised services are part of a wider pathway of patient care.

Local health economy challenges

Funding – Despite extremely high levels of deprivation our commissioners have received minimal levels of growth and face a significant challenge to balance their financial position.

QIPP challenges – A number of national QIPP initiatives have been identified by commissioners to bridge the forecast £800m shortfall in specialised services funding.

Surgical reconfiguration – commissioners have identified the reconfiguration of specialised surgical services for Upper GI, Gynaecology, Urology and HPB as a priority for their 2 and 5 year plans.

Healthier Together – this programme is being led by Greater Manchester Area Team as part of a wider review of health and social care in Greater Manchester. Whilst the programme does not directly affect the trust we fully participate with the Programme Board and redesign of any services for patient benefit.

4. Situation Analysis: The Christie Portfolio of Services

The Christie: comprehensive cancer centre

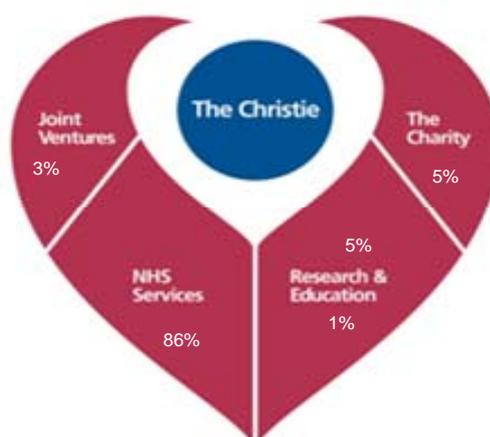
The Christie is a comprehensive cancer centre providing a range of NHS services, research, education and commercial activities with the sole aim of improving patient outcomes and experience, supported by The Christie Clinic. Accredited by the Organisation of European Cancer Institutes (OECI) we are the first cancer centre in the UK to meet the criteria for accreditation:

“The OECI is a network of cancer institutes which aims to improve the quality of cancer care and translational research in Europe from an organisational viewpoint. Although physicians, nurses and researchers, constitute the core of cancer care and research, a smooth organisation, efficient logistics and state of the art complex infrastructure is needed to accelerate the production and application of personalised care approaches: the comprehensive cancer centre.”

Turnover (income)

The total planned income for 2014-15 is **£219.5m** across the four service lines:

- Clinical Services (NHS Services)
- Education & Research
- Commercial – inc. The Christie Clinic LLP and The Christie Pathology Partnership LLP
- The Christie charity



Percentages represent planned income distribution

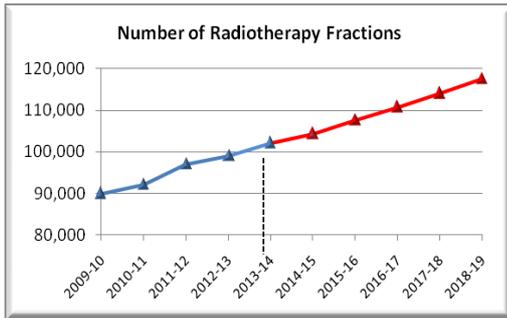
The breakdown of planned income for 2014/15 shows that 14% of income is from sources other than NHS service provision. Because of this diversity of income and interdependency of each sector to the success of The Christie each of the main areas of income for the trust need to be assessed in order to make a full assessment of the market for The Christie.

NHS services

As a Comprehensive Cancer Centre our focus of care is specialised oncology services offered to our 3.2 million population local catchment area across Greater Manchester and Eastern Cheshire, with 27% of referrals being made from outside of this area. Our range of care services delivered include radiotherapy, SACT, oncology/supporting care, haematological transplants, complex surgery, critical care, endocrinology and clinical and patient supporting services.

Being a comprehensive cancer centre brings significant benefits to our patients, such as the ability to coordinate care effectively across a large number of health professionals and the ability to deliver the very latest in trials. The individual services are not isolated activities but are part of a wider coordinated package of care for the patients. More generally, the level of activity on site provides sufficient critical mass of patients to deliver the key supporting services upon which our some of our unique offerings rest. For instance, the level of specialist surgery, SACT and haematology activity provides sufficient demand for the delivery of a level 3 Critical Care Unit, which allows The Christie to offer some very specialist clinical trials. Our plans look to carefully coordinate the need for each type of service being cognisant that dramatically changing one service will impact the wider eco-system of services.

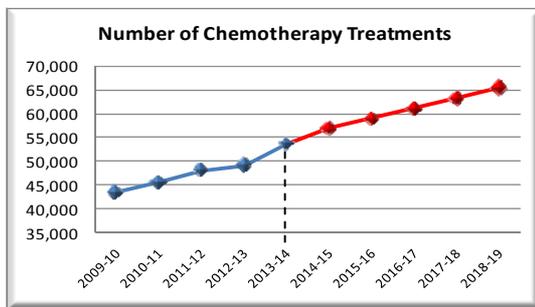
Radiotherapy



Networked radiotherapy services are offered on three sites with centralised planning offering all of the latest radiotherapy techniques for improved outcomes including IMRT/IGRT, VMAT, brachytherapy, SIRT and, with our partners Salford Royal NHS Foundation Trust, Stereotactic radiotherapy. With 15 linear accelerators we are one of the largest centres in the world and this enables us to employ 36 leading clinical oncologists, sub-specialisation, compliant MDTs and local access supported by a leading physics department.

We are currently the only provider of radiotherapy for the local population. We are working with the Department of Health/NHS England to establish a national high energy proton therapy service which will be one of two centres in the UK, offering the latest radiotherapy techniques and a natural hub for some radiotherapy services in view of the anticipated national radiotherapy strategy.

Systemic anti-cancer therapy (SACT) (chemotherapy & biological targeted therapy)



Christie Chemotherapy is delivered across eleven sites in the area including the cancer centre in Withington which offers one of the world's largest single site early phase trial unit. We also have a mobile chemotherapy unit enabling our localising chemotherapy strategy to reach patients who would otherwise have to travel significantly. We provide the majority of SACT across Greater Manchester and Cheshire and are able to employ 26 consultant medical oncologists, allowing

sub-specialisation and network delivery to take place.

Specialised surgery

We provide Specialised Surgery at the Withington site in five state of the art theatres, including a dedicated Robotic/Minimally Invasive and Teaching Theatre. Our disciplines include Urology, Gynaecology, Colorectal and Plastic Surgery. These provide Specialist Surgery for Testis, Penile, Anal, Melanoma, Complex Breast, Uterine, Cervical, Peritoneal Carcinomatosis/Pseudomyxoma Peritonei and other rare diseases. The Christie also houses the only Robot Assisted Surgery Unit in the city. This undertakes all Robot Prostatectomies in Greater Manchester and its surrounding areas, and is also used to develop other surgeries. The Christie configuration is unique in its provision of highly specialised pelvic surgery; providing the only Multidisciplinary Pelvic Team in the North of England that allows for routine scheduled joint operating, for example in cases of pelvic or retroperitoneal Sarcoma and post pelvic radiation recurrent carcinoma. It is not uncommon for patients to suffer from radiation and chemotherapy side effects that require joint assessment and surgery; our unit is the only one of its kind that allows for this vital part of survivorship care to take place. Our services span the care of post radiation fistulae, and post radiation urinary, bowel and sexual dysfunction, the latter including placements of penile prosthesis. Our services are compliant with IOG guidance and commissioner specifications.

Haematology oncology and teenage and young adult oncology

Both of these highly specialised services have recently moved in to a new state of the art facility. The integrated delivery of these specialist services will provide the service with much greater flexibility and the opportunity to implement a transformational change in the efficient delivery of services to these patients.

The Haematology and Transplant Unit at The Christie is one of the largest centres in the country specialising in the treatment of haematological malignancies. The Unit has seen continued growth and maturity of the programme with expansion into umbilical cord transplantation and the expansion of a dedicated facility offering stem cell transplantation.

For those patients between the ages of 16 and 25, chemotherapy is administered on our specialist

Young Oncology Unit, the designated Principle Treatment Centre for the region, tailored to the needs of this age group.

Supporting services

We provide a range of oncology-focused supporting services including new partnerships for pathology and in pharmacy, a regional PET-CT imaging service, endocrinology, critical care, end of life care, supporting care and patient supporting services including information services, nutrition, psycho-oncology and therapy support with a Maggie's Centre being developed.

The scale and focus of our services enable:

- A dedicated, expert workforce, with no recruitment or retention problems, an ability to provide local access to services, high standards of care and cover and sub-specialisation
- Excellence in supporting services including our regional PET-CT service
- Pre-eminent team of specialist pathology clinicians
- High quality oncology diagnostic and monitoring techniques,
- Innovation and value for money through our partnerships with pathology and pharmacy
- A track record of improving outcomes, productivity and delivering savings through economies of scale
- Fully networked services supported by informatics
- Flexibility to respond to changes in demand

Service level review

We strive for improvements in patient care, not only with new treatments and techniques but also in enabling greater access to acute oncology services and end of life care. Key to our improvements is the co-ordination of NHS services with education and research, in line with Comprehensive Cancer Centre status. With Manchester Cancer we are working to improve patient care across the network through our participation in pathway groups. Of the 20 groups established clinicians from The Christie will chair 11 of them. Supporting the standards of care across the network is the development of the 'Christie @' concept, supported by the development of a Christie Kitemark, to assure patients that standards of care received across the network meet the same high standards as those at The Christie's Withington site.

Clinical supporting services

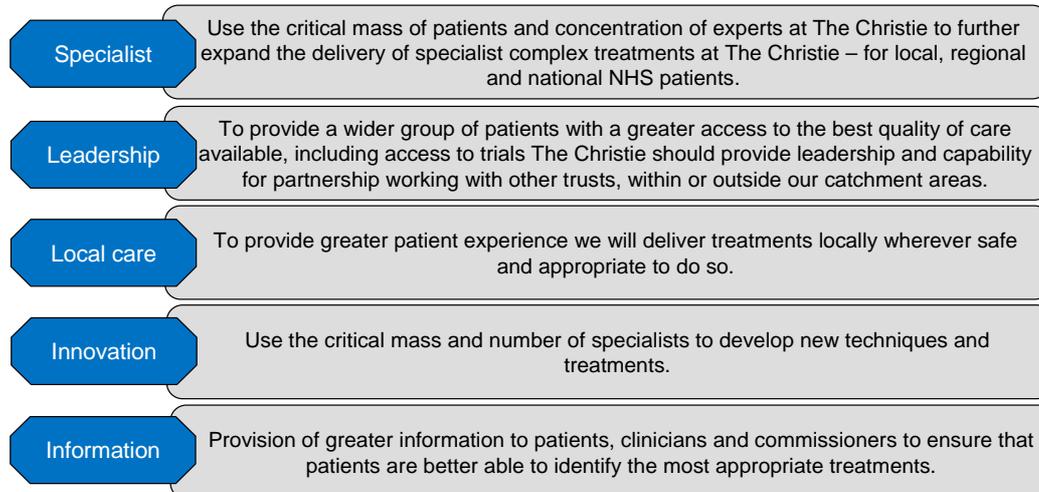
We have a comprehensive range of specialised clinical services to deliver our leading oncology care and treatment for patients. Our intention is to provide flexible care throughout the patients' pathway and coordinate with other providers of care where necessary. In order to meet the needs of an older population, we are promoting supported self management beyond treatment and ensuring access to Christie advice and expertise for cancer survivors and those requiring end of life care and as such we are seeking ways to expand access for our patient support services across our network of sites for delivering care including palliative care, pain management, nutrition and dementia support. We have adopted a flexible range of options for delivery, sometimes with partners from across the NHS, third sector and private sector, from formal joint ventures to delivery of in-house regional services ensuring that we have future-proofed the very best service, with the latest practice, investment and efficiency for patients.

Non clinical supporting services

In order to ensure the non clinical supporting services meet the clinical needs effectively and efficiently The Christie delivers these services through a mixed model of provision; some functions are delivered by internally employed staff and some functions are outsourced to external contractors. We will continue to be open to new models of working. These non-clinical supporting services, such as finance, informatics, capital planning, estates, facilities and fundraising are regularly benchmarked to ensure we receive the very best of service and at an economic rate.

Service level analysis

Each of the major clinical service lines have undertaken a strategic view of its activity, taking into account the local health economy partners and specific service line influences impacting its delivery. Across our key services a number major themes were identified in the service line objectives, namely:



Research at The Christie

The Christie has been at the forefront of innovative research for its one hundred year plus history and research continues to be an essential component of our vision. The primary purpose of research is to develop treatments such that they increase the life expectancy and quality of life of patients. Working with our partners delivering basic, translational and clinical research on site provides the integrated approach essential to turn research findings in the laboratory into better, more effective, treatments for cancer patients.

The Christie Research Division has approximately 300 staff within a broad range of specialties including clinical research nurses, radiographers, statisticians and administrators. The research facilities include one of the world's largest early phase chemotherapy trials unit, the greater Manchester tissue bank a dedicated radiotherapy research centre and the MAHSC Clinical trials unit.

The Christie currently undertakes the fourth largest commercial trial activity in the UK and in collaboration with our local academic partners we were identified as one of three CRUK major centres, alongside Cambridge and Oxford, to be formally ratified in November.

Strategic ambition

Research is strongly articulated within the themes of our 20:20 Vision as a core principle of what we deliver; patients, staff and charitable sponsors expect The Christie to be at the forefront of oncology research.

For over a century we have been at the leading edge of advances in the UK. In the latest Research Assessment Exercise (RAE), an independent review of research activity, Manchester is rated first in the UK for cancer research.

Following reaccreditation for the Manchester Academic Health Science Centre (MAHSC) in 2013, agreement has been reached with The University of Manchester for a five to ten year academic expansion plan supporting up to 20 new academic posts and the supporting teams.

The focus for the next two years will be the enhancement of the academic profile of the organisation and development of a robust bid to attain Biomedical Research Centre status.

Our ambitions are aligned with and supported by, CRUK's Beating Cancer Sooner strategy, published in May 2014, which sets out its plans to increase research in six priority areas including lung cancer, the discovery and development of new therapeutics, surgery and radiotherapy treatments and precision medicine approaches.

Research conclusion

Research is fundamental to The Christie. Research enables us to continue to deliver the wider excellent services. Placing research in the centre of our focus enables the Trust to:

- Provide the latest innovative treatments to its patients
- Increase commercial interest in provision of oncology in Greater Manchester
- Recruit from the very best in oncology care and research
- Maintain our brand and indirectly support our ability to fundraise

In order to continue to deliver this research focus it is believed that the Trust needs to maintain a strong oncology focus, maintain its recruitment of key opinion leaders, and ensure that the researchers continue to have sufficient access to enough patients.

Education at The Christie

The School of Oncology brings professional development, and pre- and post-registration educational training activities for medical, nursing, allied health and healthcare science professionals together into one academic structure at The Christie. The School is unique. It is multi-disciplinary providing education and training opportunities to all disciplines of health professionals at all levels. As well as the core courses developed for Christie staff, the School of Oncology has developed a wide range of bespoke events and courses for national and international health professionals.

Strategic ambition

The Christie intends to continue to improve on the excellent work it does in delivering training to its staff, whilst growing the delivery of education nationally and internationally.

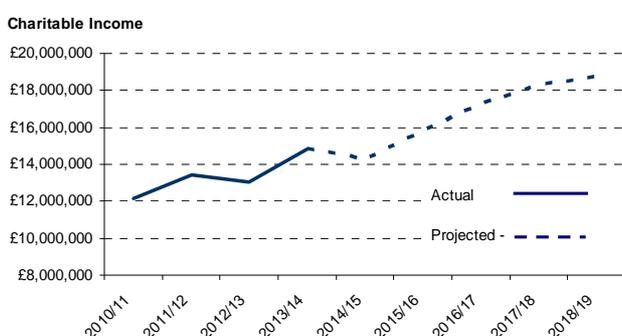
Education conclusion

Education is fundamental to The Christie's ambition to be a leading comprehensive cancer centre, and key to supporting the Trust's ability to continue to deliver the wider excellent services. In particular it brings:

- Valuable and growing income stream
- Opportunities for local staff to obtain additional training
- Ability to attract high quality staff and, national and international experts to the Trust and to Manchester

To maintain its market presence and to attract national and international education business the Trust needs to preserve its brand as an international leader in cancer care. This means maintaining a strong specialist oncology focus including specialist cancer centre status.

The Christie Charity



The Christie charity is one of the most successful hospital charities in the UK and is supported by over 30,000 active fundraisers. Fundraising income in the last financial year raised over £14.8million and over the last five years over £66 million has been invested for the benefit of patients.

The objective of The Christie charity is to enhance NHS services for Christie patients.

Our fundraising is focused across a broad selection of income streams which include public fundraising (community, sporting events, direct marketing and funeral donations) and private fundraising (corporate, major donors, charitable trusts and legacies). We have one of the most competitive Return on Investment (ROI) in the industry and in the last financial year achieved an ROI of 1:5.8.

The Christie charity conclusion

The current five year income forecasting model suggests that the charity will continue to grow and will therefore be able to offer additional support to the organisation year on year. As the charity primarily supports capital developments and research projects, the level of charitable income does not have a bearing on the future viability of the organisation as a whole.

Commercial activities at The Christie

We have developed a range of commercial activities that deliver significant income to the NHS Foundation Trust. This income is used to reinvest in NHS services. We have explored the use of commercial arrangements in a number of areas of our services to bring innovation, investment and income to our NHS services. Building on our experience and success through The Christie Clinic we have established that The Christie 'brand' is one that is highly attractive to potential commercial partners for which opportunities can be explored over the next five years to further our commercial activities.

The Christie Clinic

A private patient partnership between HCA International and The Christie NHS Foundation Trust



The Christie Clinic is a joint venture between Healthcare America (HCA) and The Christie to provide a range of oncology services to private healthcare patients. A Joint Venture partnership was formed in 2010 for a twenty year period in order to maximise income from private patients for The Christie that could be used to reinvest in NHS patient services.

Our pharmacy partner Boots has brought a number of benefits to our pharmacy service, maintaining and developing a high quality, efficient and oncology focused pharmacy service. Although this is a supplier contract together with Boots we have potential opportunities to work together to expand the service offered outside of The Christie. The contract provides a significant annual efficiency saving.

Following an extensive procurement a new pathology Joint Venture has been established to delivery pathology services. The Christie Pathology Partnership is a Joint Venture between The Christie and Synlab UK Limited, the UK division of one of the largest European independent providers of pathology services. The Christie Pathology Partnership will allow the Trust to further develop its pathology service, providing high quality, bespoke oncology focused services.

Our international development strategy seeks to develop international working to progress three aims – academic, philanthropic and commercial. We are currently formalising arrangements to pilot oncology advice, education and training with two international partners. These pilots have been selected in line with our risk assessment framework and represent low risk to The Christie to our ongoing delivery of NHS services, financial and reputation exposure. Once the pilots have concluded we will review our approach to international development.

The Christie commercial conclusion

With cost pressures on NHS services the trust will continue to seek alternative income sources that generate sufficient return with minimal risk to ongoing NHS services for which we have identified a number of potential options. The commercial arrangements that we already have in place with our various partners are focused on delivering high quality patient care, efficiency and income at low risk to The Christie and the commercial arrangements put in place limit the exposure of the trust to a downturn in any of those markets.

5. Sustainability

Clinical sustainability

Performance

At The Christie patients are at the centre of everything we do. We seek to demonstrate the quality of our services and secure continued improvement year after year. This process results from acting upon intelligence gathered from the collection and analysis of meaningful clinical outcomes data. The most comprehensive and accurate collection of data is achieved by clinicians, however in the past this has always been limited by time resources. To achieve this goal The Christie has established a Clinical Outcomes Unit (COU) which, working closely with doctors, nurses and allied health professionals, has developed an interactive web-based system of data collection. This has transformed the routine capture of patient and disease specific data. Accurate collection of prognostic factors and comorbidities can be linked with resulting survival and toxicity, meaning that for the first time all patient outcomes can be analysed with a similar rigor to that of trial patients. It allows trends to be identified sooner, audits to be run continuously, new techniques and equipment monitored in real time and hypotheses generated for trials. In addition it allows in-depth analysis on the many patients for whom there is, and may never be, a suitable trial. Using this system, approximately 75% of all new patients seen at The Christie now have at least 10 disease specific and 5 patient specific factors electronically captured (over 12,000 clinician completed forms) and this percentage has increased month on month over the last year.

The vision of The Christie is to take this process much further than using the data only for retrospective analysis and improvement. The system has now been extended and integrates data capture within routine care, allowing it to form an integral and seamless part of the care process itself. This has been extended to incorporate nursing and Allied Health Professional outcomes. The interactive nature of the system means that the data entered can be allied to decision support. This allows immediate improvements to be made to patient management and care, leading to direct effects to improve individual patient outcomes.

These innovative, in-house developed, processes will ensure that all aspects of our patient care are monitored, analysed and acted upon. Combined with patient reported outcomes and feedback, they will ensure excellence and allow comparisons with other centres in the UK and overseas. Indeed, The Christie has become an OECE reference site, to assess and benchmark the care and research undertaken at different cancer centres.

In terms of compliance as a trust we are compliant with all IOG requirements for our services and with commissioner specifications.

All performance targets have been met to date whether national, local or internally developed. Below we have a number of targets and measures that demonstrate some key indications of clinical performance at The Christie.

	Measure	2009/10	2010/11	2011/12	2012/13	2013/14
Outcomes	% IMRT	n/a	n/a	n/a	41.0%	60.4%
	% chemo trials	1,980	2,383	2,869	2,142	1,983
	30 day post-op mortality	n/a	n/a	0.3%	0.8%	0%
Safety	62 day cancer waiting time*	72.3%	69%	85.4%	89.3%	87.1%
	C.diff**	45	33	3	7	3
Experience	Patient survey***	93.8%	94.0%	93.1%	95.5%	96.1%
	Complaints	165	236	160	67	66

*with reallocations policy from 2011 **attributable after 72 hours *** patients reporting good/excellent

Challenges

For the coming five years the increasing complexity of care together with the overall increase in demand for oncology services are major clinical challenges. We have in place the multi-modality treatments and the critical mass required to be able to meet this future demand for individualised medicine. The number of referrals being made from outside of our traditional catchment area to receive such treatments is increasing together with the number of new patients overall. We continue to ensure that patients receive safe services with the latest treatments to deliver the best possible outcomes, for example the number of patients receiving Intensity Modulated Radiotherapy (IMRT) and the number of patients with 30 day post operative mortality. We were the first site to introduce IMRT, following a long history of innovative working, and exceed the national target, supporting other sites to adopt the new technology. We offer patients access to as many trials as possible and widening access to trials is backed up by our major academic expansion plan in partnership with the University of Manchester. As a centre of excellence we offer modern treatments, research, novel treatment and education which, together with our critical mass that enables superspecialisation, delivers outstanding outcomes for patients and ensure that we are able to meet the clinical challenges of the next five years. This Comprehensive Cancer Centre status is critical to our ongoing clinical sustainability as it offers patients access to the latest treatments, trials and research and enables us to recruit and retain leading clinicians.

Standards

We continue to meet commissioner specifications and IOG peer review standards for all of our services. As a conurbation Greater Manchester is non-compliant for gynaecology and urology surgical services and will be subject to a tender for the provision of services in the future. In January 2013 the Trust underwent an unannounced CQC visit. The inspectors reviewed eight outcomes to assess how the organisation is meeting the essential standards of quality and safety. The formal report noted compliance against all eight outcomes with no actions required. The Trust underwent a responsive announced visit in December 2013 in relation to Outcome 12, requirement relating to workers. The Trust was found to be fully compliant. We are also developing our own standards for use at any of the sites that we operate – a Christie 'kitemark' – a commitment to patients to offer the same standards of care from The Christie regardless of which site they are treated at.

Assurance

The Board receives assurance through a significant framework:

- Board Governance Structures: clinical viability, clinical outcomes and operational assurance are provided to the a Audit Committee and Quality Assurance Committees, formal sub committees of the Board of Directors;
- Annual report and annual governance statement;
- The clinical viability of business cases for development of services are debated and constructively challenged at Capital and Workforce Planning Group and approved following receiving assurance at Management Board a formal sub committee of the Board of Directors;
- The quality of clinical care provided by the Trust is reviewed and assurance provided by the clinical teams at the Risk and Quality Governance Committee through its sub committees of Patient Safety, Patient Experience and Clinical and Research Effectiveness. For all of the above committees there is an annual report produced and a committee effectiveness review;

External assurance

In addition to the internal assurance programme through the Quality Committee to Board of Directors external assurance is received in a variety of forms including peer review of services and the external audit of quality accounts. Specific third party assurance has been commissioned by the Board where it has been helpful, for example with critical care services, and will continue to be used as appropriate.

Operational sustainability

Performance

Our operational performance remains strong and we have expanded the capacity of our services to meet rising demand for treatment and care. We meet all patient waiting times required and have introduced our own internal waiting time monitoring. We have future proofed the capacity of our buildings and equipment and have a detailed capital plan in place to enable us to respond flexibly to future demand.

Challenges

The rising demand for cancer services means that our capacity needs to grow and we need to find new ways of treating more patients closer to home wherever possible. Although our site in Withington has limited clinical expansion capacity we have developed a 10-15 year site development plan to maximise the use of clinical space and have developed many sites to deliver treatment closer to patients. Nationally workforce recruitment and retention for some of our key staff groups can be challenging although this is not the case for our staff.

Workforce

In terms of meeting patient demand for services we have a highly skilled and motivated workforce. We continue to attract high quality staff and have not experienced any recruitment and retention issues. To ensure that we continue to have a motivated and well trained workforce we launched The Christie Commitment in 2013 which includes five staff pledges aligned to the NHS constitution. We have also introduced a divisional quarterly workforce plan appraisal at the divisional performance reviews with reporting to Capital & Workforce Planning Group.

We recognise the challenges that our staff face and have implemented a multi-disciplinary leadership and management development programme. We have developed a leadership development framework for senior medical staff and offer comprehensive training programmes for junior doctors, nurses, radiographers and scientific staff. We have maintained good results in the national staff survey particularly for staff engagement and advocacy of the trust as a place for care and to work. We also benefit from relatively low rates of sickness and use of agency staff.

Measure		2009/10	2010/11	2011/12	2012/13	2013/14
Workforce	Friends & Family test*	3.93	3.96	4.13	4.16	n/a
	Sickness *	4.12%	3.63%	3.58%	3.42%	3.18%
	Agency **	1.04%	1.83%	1.38%	0.94%	0.49%

* Score out of 5, ** Average monthly rate, *** Average monthly spend

Capacity

Services delivered on our main site in Withington are either highly specialised or services provided for the local population. Because of the large network that we serve services are also delivered from sites local to patients wherever possible. We have 24/7 medical admissions available and on-call arrangements in place that include twice-daily Consultant review supported by 24/7 diagnostics, pharmacy and treatment planning for urgent cases. A 24/7 urgent care hotline is in place for ambulatory patients with high levels of patient satisfaction for care and experience. Also we have an acute oncology enhancement plan in place to support the development of acute oncology across the network.

We have transformed the delivery of our care to significantly reduce the level of inpatient care to be delivered on an ambulatory care basis where safe to do so. During the period 2009-10 to 2013-14 we have seen a 12% increase in new patients seen at The Christie, yet we have been able to reduce our bed capacity by approximately a third by reducing inpatient admissions to The Christie by 27%.

We will continue to review our Estates Strategic Plans to ensure all future service developments are coordinated and that the estates reconfiguration is appropriately prioritised within the Trust. The Estates Review has identified options regarding the reconfiguration of inpatient beds and the outpatient developments to meet the changing service requirements.

Patient focus

Whilst we are currently reviewing the 24/7 agenda and how it may further apply to our services our extensive patient engagement work has informed our service development whereby patients would like access to services more locally rather than more flexibility to attend at weekends or bank holidays. Our work has focused on developing networked radiotherapy satellites and further local delivery of chemotherapy and we will continue to pursue this approach to improve patient convenience.

In terms of patient convenience appointments are booked wherever possible to take account of travel times, including an extended working day for radiotherapy and our six day a week regional PET-CT service where patients travel from as far a field as North Wales.

Once arrived for treatment patient waiting times are closely monitored to ensure prompt attention.

	Measure	2011/12	2012/13	2013/14
Patient waits	Pharmacy wait less than 20 mins	86.5%	85.5%	87.2%
	Outpatient wait less than 20 mins	85.3%	80.3%	82.7%

Capital investment

We have a substantial asset maintenance and replacement programme in place including donated assets and continue to assess options for the latest technology such as an MR-linear accelerator. Capacity across our sites is flexible with room for expansion in radiotherapy and chemotherapy across the network as well as specialised surgical capacity on the Withington site. Haematology and young oncology have new state of the art facilities that include the capacity to grow in line with the specialised nature of their services.

	Measure	2009/10	2010/11	2011/12	2012/13	2013/14
Facilities *	PEAT	Excellent	Excellent	Excellent	Excellent	97%

* - assessment changed in 13/14 to PLACE assessment with new scoring method

Financial sustainability

Financial strategy

The Christie has a rigorous focus on the quality of the care provided to its patients together with a strong track record of delivering cost improvement initiatives year on year. The economies of scale of being a large oncology specialist allow efficiencies to be delivered in the development and delivery of services. Furthermore, as a specialist cancer hospital with enormous support in the community, we recognise the assistance provided from the local population through the volunteering schemes and the significant contribution made by the fundraising activities undertaken in the name of The Christie.

Monitors risk rating

Monitor requires all Foundation Trusts to demonstrate that they are financial viable. Financially we have achieved all of our targets since becoming a Foundation Trust in 2007.

Monitor rating	2009-10	2010-11	2011-12	2012-13	2013-14
Optimum score	5	5	5	5	4
Christie Financial Risk Rating	5	5	4	5	4*

* change of regulatory framework. Top rating of 5 2010/11 – 2012-13, and top rating of 4 2013-14.

EBITDA margin

The trust has met all its internal financial objectives set as part of our strategy delivering a healthy EBITDA balance.

		2009-10	2010-11	2011-12	2012-13	2013-14
EBITDA Margin	Metric	10.10%	9.50%	7.90%	9.10%	8.20%
	Rating	4	4	3	4	3

Delivering cost improvement savings

The trust has a strong track record of delivering operational efficiencies, achieving at least £6m recurrent savings each year for the last 5 years (ending 2013-14). Our success is based on exploiting the economies of scale available from being a large specialist centre, and providing an environment and culture that encourages staff to identify efficiencies and the appropriate organisational structure to discuss, prioritise and implement proposals.

	2009-10	2010-11	2011-12	2012-13	2013-14
Achieved CIP, £m	6.0	6.0	6.0	6.3	6.3

Cash balance

The trust operates a prudent treasury management policy and is risk adverse in terms of the investment of cash surpluses. We engage external advisor to consider the risk associated with investment versus interest from government banking. The trust Finance and Investment Committee oversees the treasury management policy and reviews the trust investment capacity. The trust performs well in terms of liquidity. Based on the previous regulatory framework, The Compliance Framework, the calculation of liquidity days scores have consistently been high based on the Monitor metrics (the highest rating is 5).

		2009-10	2010-11	2011-12	2012-13	2013-14
Liquidity	Metric	61.2	67.7	80.6	91.1	76.4
	Rating	5	5	5	5	5

Additional prudent planning of cash has been used to determine level of funds available to both revenue and capital investments. The concept of a cash limit of 80% of “available cash” has been adopted by the trust, with “available cash.

Future financial viability: planning assumptions

The planning assumptions outlined below are fully supported by commissioners and reflective of the activity and finance plans agreed. The Trust has triangulated planning assumptions around activity growth which are in line with commissioner’s plans over both the two year and five years period.

	2014-15	2015-16	2016-17	2017-18	2018-19
PbR deflator	(1.3%)*	(1.8%)	(1.8%)	(1.8%)	(1.8%)
Underlying Growth	3.7%	3.0%	3.0%	3.0%	3.0%
Growth incl service developments	4.4%	3.4%	3.0%	3.0%	3.0%
CIP	£5m	£5m	£5m	£5m	£5m
Pay award	1.25%	1.5%	1.5%	1.5%	1.5%

** The National Deflator was set at (1.5%) however the net impact on Then Christie after tariff structure changes was (1.3%)

Financial stability

Based on the 5 year financial plan the trust plans to deliver against all the key metrics delivering an overall CoSR risk rating of 4.

	2014-15	2015-16	2016-17	2017-18	2018-19
EBITDA Margin	6.20%	6.20%	7.00%	7.30%	9.30%
	3	3	3	3	4
Liquidity	55.6	51.9	48.8	51.2	56
	4	4	4	4	4
CoSR	3.85	3.65	3.65	3.85	3.7
	4	4	4	4	4

Increasing cost of service delivery

The financial plan includes anticipated increases in costs of clinical and non-clinical service which is contained within the planning assumptions. These are based on inflation trajectory over the 5 years plus all allowance for energy and any statutory requirements that materialise.

Downside modelling

The Trust considers the overall strategy, basis of assumptions, mitigating action and the key risks when developing the downside planning for the strategic plan and associated financial analysis. The Board of Directors have scrutinised in detail a number of downside scenarios in the run up to the development of this plan. The downside scenario covers multiple service lines including stress testing the model to understand the impact of potential changes in funding. Following application of mitigation plans this would deliver the Trust a continuity of service risk rating of 3.

Sustainability - conclusion

Findings

The Christie, as a centre of excellence, is a clinically respected and financially secure organisation with a strong track record of delivering innovative care to improve the care delivered to patients within the financial constraints. As a Comprehensive Cancer Centre, our size and focus enables us to flex service capacity to respond to changing demand, delivering services locally to patients wherever possible and to the same high standard of care associated with The Christie. The analysis of each of the major areas of the portfolio has shown a clear understanding of the markets within which we operate and that there are no major risks to clinical or financial sustainability.

The Christie delivers its high standards of quality, outcomes and experience for patients through its combination of research, education and commercial activities, supported by The Christie charity, with its NHS services. This diverse portfolio within oncology services not only enhances patient services but enables The Christie to continue to invest and develop its services that may not be otherwise afforded by NHS commissioners

An understanding of the commissioner agenda moving forward will emerge more clearly later this year as NHS England publishes its strategy. Early signals are that NHS England wish to reduce the number of specialised service providers and make further financial savings on services commissioned.

Conclusions

Maintain and improve the excellent quality of patient outcomes and patient experience

Continue to ensure value for money of services

To address the emerging commissioner agenda. Our focus will be:

- 1. Develop our portfolio of national / regional specialist services**
- 2. Expand the catchment area for some Christie services**
- 3. Deliver more services closer to patients' homes**
- 4. Work in partnership with another/other organisation(s) to lead on oncology**

6. Overview of Strategic Plans

One page summary of Strategic Plan

Existing Initiatives		Delivering Value for Money	Emerging commissioner strategy	
Maintain and improve patient outcomes and experience				
Clinical Services	SACT – localising treatment strategy	Pharmacy initiative	Develop our portfolio of national / regional specialist services	
	Radiotherapy strategy	Pathology initiative		Expand the catchment area for some Christie services
	National / Regional Surgery focus	Transformation Group		
	Acute Oncology Strategy			Work in partnership with another/other organisation(s) to lead on oncology
	Quality Strategy			
	Clinical Outcomes			
	Local patient survey and review			
	Cancer Summit Implementation- Pathway Leads			
	Introduction new techniques / equipment – e.g. Proton, MR Linac			
	Equipment replacement programme – e.g. Linac			
Ongoing review of Estates Strategy – e.g. IPU, Ward configuration				
Organisational Development Strategy				
Supporting Services	Maggies Development			
	Electronic Sharing Patient Info with LHE	Review Offsite working		
		Bench marking external services		
Research	Research growth strategy			
	Academic Expansion Plan			
	BRC Bid			
	Trials at Christie @ sites			
Education	Education Strategy			
Commercial		The Christie Clinic		
		International Strategy		
Charity		The Christie charity		

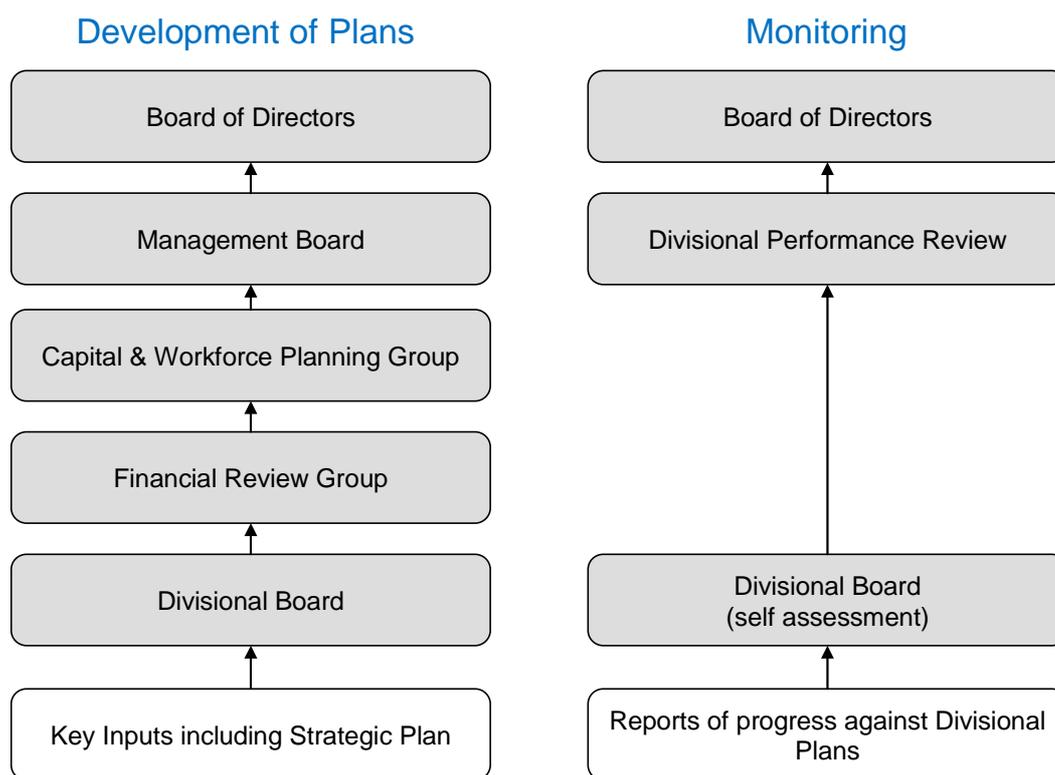
One page summary of plans aligned to 20:20 Vision

Leading Cancer Care	The Christie Experience
<ul style="list-style-type: none"> - Collection and publication of cancer outcomes - Develop web based brochure of Christie procedures to direct patients / clinicians to The Christie: <ul style="list-style-type: none"> - Services - Trials - Electronic sharing of data with local health economy - Developing relationship <ul style="list-style-type: none"> - commissioners - providers within our catchment area - providers outside our catchment area - Educate and train staff in and outside The Christie - Develop new facilities: <ul style="list-style-type: none"> - Integrated Procedures Unit - Proton Therapy - MR Linear accelerator - Further develop acute oncology provision - Living with and beyond cancer - Engage with commissioners / partners to define hub and spoke model of care 	<ul style="list-style-type: none"> - Widen and improve access to supporting services <ul style="list-style-type: none"> - Development of Maggie's Centre - Patient and public experience <ul style="list-style-type: none"> - Monitor and action plans - Effective use of IT - Implement Trust Strategies to improve patient experience: <ul style="list-style-type: none"> - Estates Strategy - Quality Strategy - The Christie Kite Mark - Organisational Development Strategy
Local and Specialist Care	Best Outcomes
<ul style="list-style-type: none"> - Engage with commissioners to continue and expanding delivering care closer to home <ul style="list-style-type: none"> - Chemotherapy Strategy - Radiotherapy review - Trials - Development of further regional and supra-regional services: <ul style="list-style-type: none"> - Surgery – Gynaecology / Urology tender - Surgery – maintain existing specialist services - Radiotherapy - Proton Therapy - Chemotherapy - Young Oncology Unit/Haematological Transplant Unit joint development - Diagnostics expansion 	<ul style="list-style-type: none"> - Providing approaches to maximise the equity to the best outcomes treatment (in and outside The Christie catchment area) - Providing approaches to maximise the equity to trials (in and outside The Christie catchment area) - Latest equipment, imaging and facilities <ul style="list-style-type: none"> - Proton - MR Linear accelerator - Integrate Procedures Unit - Improve utilisation of existing facilities - Continue level 3 critical care - Implement Quality Strategy - Continue to improve clinical outcomes - Continue to work with research partners: <ul style="list-style-type: none"> - Manchester Cancer Research Centre - Manchester Academic Health Science Centre

Performance monitoring of the strategic plan

In order to monitor performance against the strategic plan and any changes to that plan in response to unexpected challenges, the trust will use its established performance management systems. Annual corporate objectives are set each year based on the trusts strategy that then feed into annual divisional implementation plans. These link to the Trusts 20:20 Vision themes and include sections on strategy, clinical strategy, governance, board assurance, quality and workforce. Each divisional plan is assessed by the divisional board, Financial Review Group and the Capital and Workforce Planning Group. Alongside the divisional plans, the draft capital and revenue plan, cost improvement plan and quality plans are also developed and reviewed by board at their assurance committees and the Council of Governors through a sub-committee of the council. The plans are all approved by the Management Board and the Board of Directors in time for submission to Monitor.

Progress against the divisional plans is monitored through divisional board meetings and divisional performance review meetings. An annual service review meeting is carried out at one of the Board of Directors Time Out sessions where a review of progress against plans is presented to the Board. The review of the corporate objectives and Capital, Revenue and CIP plans is presented to Management Board, the Quality and Audit Committees and the Board of Directors on a six monthly basis. Here the plans are reviewed and progress against key milestones is noted. Actions are highlighted to address any delays in achievement of plans and these are followed up at the next six monthly review.



How we have approached the development of the strategic plan

Stakeholder engagement

Our 20:20 vision was developed with significant input from our stakeholders, giving us a clear mandate for our direction of travel. To develop this strategic plan we have engaged with our major stakeholders. At Board level we have held two Board away days to consider the strategic plan self-assessment toolkit

and the options for the Strategic Plan. With our Council of Governors Development and Sustainability Committee we have held sessions to work through the plan during the early stages and a detailed review. Two clinical engagement sessions have been held with over 70 consultant and other senior clinicians in attendance to review the direction of the trust and the strategic options at both trust and individual service level. All staff have had the opportunity to contribute and many other staff forums have discussed the options including the Local Medical Committee and 20:20 vision forum. Members and volunteers have also been updated as the plan has developed with the opportunity to provide comments.

Externally we have discussed the plan with our commissioners, NHS England, to ensure that our plans take account of their emerging strategy. We have also engaged with a wide range of other key stakeholders, including:

- Greater Manchester Cancer Provider Board,
- Manchester Academic Health Science Centre,
- Manchester Cancer Research Centre (a partnership with the University of Manchester and Cancer Research UK),
- The University of Manchester,
- Charities with whom we work in close partnership including Maggie's, Macmillan and Marie Curie,
- Our commercial partners, The Christie Clinic, Alliance Boots and Synlab,
- Academic Health Science Network,
- Strategic Clinical Networks, and,
- Health Education England.

This has allowed us to reflect internal and external stakeholder views on our proposals which have endorsed our 20:20 Vision direct and supported our proposals to work with commissioners as their agenda emerges.

Self-assessment toolkit

We have assessed ourselves against the steps set out in the self-assessment toolkit for our existing planning processes and followed the suggested steps for the development of the Strategic Plan. Our assessment included a written evidence assessment, compilation of a library of documentary evidence and a review by PwC. This assessment, together with feedback from PwC, were presented to the Board of Directors for their consideration. Our planning processes incorporate the majority of the hallmarks set out in the guidance and we have developed an action plan for a small number of areas that we thought could be further improved. This will be monitored regularly.

External assurance

In addition to completing the self-assessment toolkit we have sought external expertise from KPMG who have worked with us to develop our market assessments, facilitate our service and trust level workshops and worked with us to develop our service and trust strategic options. We also engaged PwC to provide challenge on the drafting of our Strategic Plan and to provide feedback on potential improvements. This has provided our Board with significant external expertise in the development of the Strategic Plan.