

University College London Hospitals



NHS Foundation Trust

uclh

Strategic intent summary document



1 University College London Hospitals NHS Foundation Trust

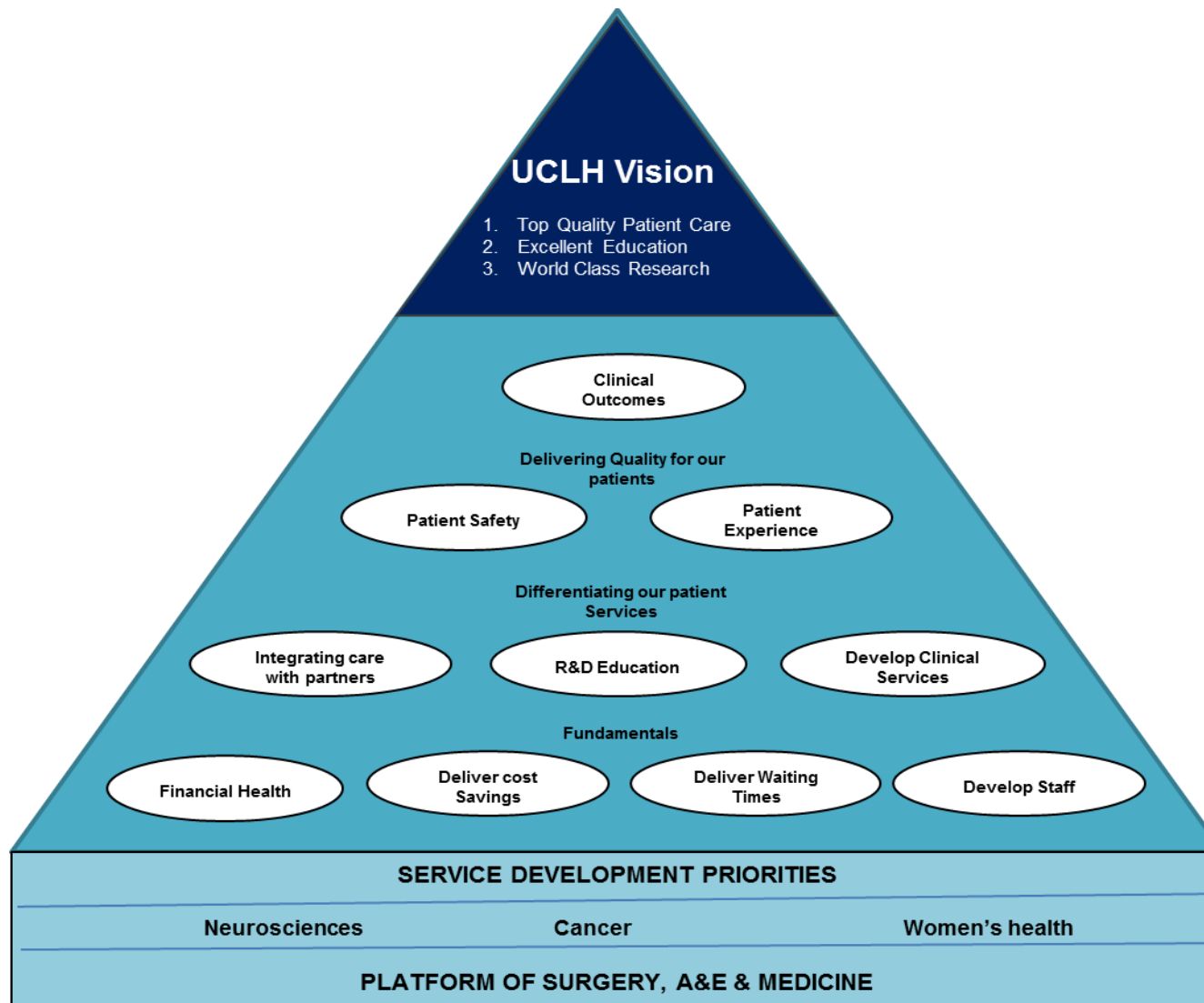
- 1.1.1 University College London Hospitals NHS Foundation Trust (UCLH) is situated in the heart of London. Our mission is to deliver top quality patient care, excellent education and world-class research.
- 1.1.2 Our values of *safety, kindness, teamwork* and *improving* are at the heart of everything we do, both for our staff and for our patients.
- 1.1.3 We provide academically-linked acute and specialist services, both to the local population and to patients from across the United Kingdom and abroad. We balance the provision of nationally recognised, specialist services with delivering high quality acute services to the local populations of Camden, Islington, Barnet, Enfield, Haringey and Westminster. We are committed to the strategy that success in both these portfolios (local and specialist local/regional/national care) strengthen each other.
- 1.1.4 We are proud of our close partnership with University College London (UCL), which is consistently reported as one of the best performing universities in the world. UCL's facilities are embedded across much of our hospital campus and the partnership is linked through a large number of joint clinical and academic appointments.
- 1.1.5 We are one of the country's five biomedical research centres and were a founding member of UCL Partners, designated as one of the UK's first Academic Health Science Centres.
- 1.1.6 We have a turnover of £840 million and contracts with over 70 commissioning bodies. On average we see 870,000 outpatients, 120,000 A&E attendances and admit over 150,000 patients each year. We employ over 8,000 professionals across all of our hospital sites.
- 1.1.7 UCLH delivers clinical services from six core hospital sites:
- ◆ University College Hospital (including the Elizabeth Garrett Anderson Wing, the Macmillan Cancer Centre, Hospital for Tropical Diseases and the Institute of Sports, Exercise and Health)
 - ◆ Eastman Dental Hospital (EDH)
 - ◆ National Hospital for Neurology and Neurosurgery (NHNN)
 - ◆ The Heart Hospital (HH)



- ◆ The Royal London Hospital for Integrated Medicine (RLHIM)
- ◆ The Royal National Throat Nose and Ear Hospital (RNTNE)

1.1.8 This document summarises UCLH's strategic intent over the next ten years.

Figure 1: Summary of the objectives, service development priorities & clinical service platforms for UCLH



2 Context: The health economy and commissioning landscape

- 2.1.1 The shape of healthcare provision required and expected by the UK population is changing. This shift is influenced by the global economic climate, development of technology, medical and scientific advancements, a series of high profile reviews of NHS services, and population health trends.
- 2.1.2 As with all societies with an ageing population, the UK has an increasing need to provide care for individuals who are often socially isolated and who have complex, long term health needs. We believe this will require a radical transformation of traditional models of health and social care.
- 2.1.3 The rapid development of new technology, including social media, has enabled patients and the public to access more information about the availability of novel treatments and interventions, as well as the performance of individual clinicians and healthcare providers. Alongside the high profile reviews published by Francis, Keogh and Berwick, this ready access to a breadth of information has increased the expectations of the UK population in relation to health and social care services.
- 2.1.4 There is increasing difficulty nationally in staffing a number of key areas of clinical service delivery. Challenging examples of this include the Emergency Department and the provision of experienced middle grade doctors; the same is true of obstetric units and the provision of appropriate consultants. In addition, there will be a reduction in the number of nursing trainees in 2015/16.
- 2.1.5 The projected continuation of public spending constraints will persist in placing financial pressure on the UK health and social care system. Further pressures on health spending are anticipated as a result of the 2013 Spending Review, which set out government spending for 2015/16, with the NHS budget likely to be flat-lined for an estimated further five years. The proposed shift of £3.8 billion of funds nationally from health to social care will place additional pressure on the NHS.
- 2.1.6 Commissioners are responding to these challenges by reshaping traditional financial flows and models of care. Local Clinical Commissioning Groups (CCGs) are increasingly working with local authorities to construct more sophisticated payment mechanisms that will deliver fundamental changes in care delivery.
- 2.1.7 Specialist commissioners have expressed the intent to reduce the number of contracts issued for specialist services, moving more towards a lead provider model. The need for critical mass in ensuring clinical expertise in specialist services has been acknowledged and it is likely that in future, commissioners will seek further centralisation of specialist services. We believe that in many areas this will support a flow of additional work and resources to our tertiary teams.

- 2.1.8 The NHS provider landscape is changing rapidly. The foundation trust approval process is likely to trigger further opportunities for partnerships and greater alignment between provider organisations. Gradual shifts to integrated care models and the increasing concentration of specialised services will also have a significant impact on the composition and objectives of providers across London.
- 2.1.9 Networked and collaborative working will increasingly become the way that we must work in order to provide the best, personalised and most appropriate care for patients, whilst at the same time supporting our referring partners in primary and secondary care. UCL Partners will continue to facilitate sector wide change and identify opportunities for collaboration between providers to improve patient care.



3 University College London Hospitals' current position

Clinical quality

- 3.1.1 We have a strong track record of providing high quality and safe care to patients and have consistently achieved some of the best mortality rates in the UK. We remain committed to ensuring the highest quality service for our patients and are particularly focused on the drive to reduce all avoidable pressure ulcers or hospital acquired infections.

"We found that, generally, services were safe, effective, caring, responsive to patients' needs and well led"

Taken from the CQC Inspection report of UCLH – Report Published January 2014

"This is a glowing report. CCGs will support and work with UCLH on all areas identified as challenges. We were aware of all issues identified in the report – which is a tribute to the openness and transparency of UCLH"

Dr Caz Sayer, Chair of Camden Commissioning Group (in response to the CQC Inspection report – January 2014)

- 3.1.2 We recognise the imperative to listen to, and learn from, patient feedback and acknowledge that there is more we can do to facilitate this. We want all our staff to understand the importance of listening to patients and responding to their individual needs. We want to provide our patients with information so that they are able to make the decisions that are right for them.
- 3.1.3 We are on a journey of ensuring we deliver customer service excellence in all our interactions with patients and their families and carers. This journey has begun in a number of areas (through our *'Making a Difference Together'* campaign) but we are committed to this becoming a wide ranging and hugely transformational journey for all our staff and the people we serve.
- 3.1.4 We know that we can do more to ensure consistency in the quality of care across weekends as well as during the week and traditional 'out of office' hours. UCLH has committed to ensuring that *all patients receive safe care, with equivalent clinical outcomes and personal experience, regardless of when they access and use our services*. A number of early areas of priority have been identified which focus on this need and meeting national or local standards, as well as ensuring demand for services is maintained.
- 3.1.5 We want the drive to improve our services to be continuous, diffusing innovation and learning across the organisation.

Research & development

- 3.1.6 Clinical research underpins all aspects of our high quality services, and will be a key driver for our key service developments over the next ten years.
- 3.1.7 We are one of the country's five Government-funded biomedical research centres. UCLH was re-designated by the National Institute for Health Research in 2011. We are a founding member of UCL Partners, which brings together a number of Britain's world renowned medical research centres and hospitals. UCL Partners was officially designated as one of the UK's first Academic Health Science Centres (AHSCs) by the Department of Health in March 2009.
- 3.1.8 The Clinical Research Facility at University College Hospital (now the second largest of its kind in London) provides a safe environment to trial early phase therapies and improves current and future treatments and outcomes across a range of clinical service areas.
- 3.1.9 Our service development priorities are underpinned by strong research. UCLH is a key partner, with the UCL Cancer Institute and Great Ormond St Hospital, in the Cancer Research UK Centre at UCL. Research grant income to the Centre has increased from £19million in 2009 to over £41million in 2013/14, making it the second largest such institute in the UK. This Centre exemplifies the seamless integration of basic, translational and clinical cancer research with the outstanding treatment and care offered at UCLH.
- 3.1.10 For over 65 years, the National Hospital for Neurology and Neurosurgery and the Institute of Neurology have worked together to deliver better treatments for adults with neurological diseases. Recently, the Wolfson Foundation recognised the unrivalled strengths of the partnership by awarding the Institute of Neurology over £20 million to establish the UK's first new experimental neurology unit. The unit provides a state-of-the-art facility which will test the newest experimental therapies for the first time on humans, for diseases such as dementia. This new unit will treat patients from all over the UK.
- 3.1.11 The link with research is crucial. The close working between the hospital and the university will deliver ambitious research and clinical strategies, translating excellent science into new treatments with improved outcomes across a range of areas such as stroke, epilepsy dementia, Parkinson's disease and brain tumours. All of this will ensure that we maintain our position as a national and international leader in neurosciences.

Workforce & education

- 3.1.12 Our staff will continue to be our most valuable asset as we seek to deliver our strategic ambitions. High quality, motivated and engaged staff correlate closely with high quality patient outcomes and safety and will be needed to deliver our expanded services.

- 3.1.13 We will continue to improve staff experience in order to improve patient experience. By continuing to engage staff in the plans and development of the organisation, keeping them safe, and making them feel supported, we will give patients a better experience at our hospitals.
- 3.1.14 We must embed leadership development, developing and implementing a systematic approach that generates a vibrant community of leaders at all levels of the organisation that are confident and competent to lead. Part of our strategy must be to ensure that we succession plan appropriately to continue to grow a cadre of leaders across all of our services.
- 3.1.15 We want to employ the most talented staff in the NHS. We recognise the importance of attracting and retaining the best candidates through provision of excellent facilities, a chance to be part of innovative R&D work and service models and being part of an organisation that engages its staff in its plans.
- 3.1.16 Our vision for education, learning and development consists of three key elements:
- to ensure that everyone has the skills, knowledge and support to do their job;
 - that everyone has access to positive education and learning experiences; and
 - that everyone understands the importance of education and learning in achieving continual improvements in the care and experience for patients, carers and staff.
- 3.1.17 Our strategic goals for education are excellent education, competent and capable staff, an adaptable and flexible workforce, wide participation in education, and particularly that UCLH and NHS values become embedded in our work. We expect that this strategy will deliver benefits to patients and the public in that they will receive safer, higher quality and more effective care; that they can be confident of consistency of care aligned to best practice; that they will be treated in an environment of kindness and compassion.
- 3.1.18 Our education partners and commissioners of education should have confidence that UCLH provides excellent education for all and value for money for the funding invested in educational activity; they should also find alignment of all of our educational activity both to the local and national workforce development initiatives currently in place, and to patients and to service delivery.

Estate

- 3.1.19 UCLH is committed to improve the patient environment by ensuring services operate from buildings in an appropriate condition. This will contribute towards enhanced patient experience, efficient pathways of care, co-location of services and better outcomes. The Board has also agreed to the future consolidation of services at two locations; Queen Square for the focussed development of neurosciences, and the UCH campus for all other services including a significant development plan of new facilities.

3.1.20 With the steady rise in demand of services provided from UCLH over the past 10 years there is an urgent need to create more clinical capacity. This is particularly relevant in areas such as theatres and inpatient/day case beds. Part of the wider estate strategy therefore includes the development of new capacity to cope with current and increasing demand, centred initially on the Phase 4 and Phase 5 developments.

Finance and transformation

3.1.21 Our financial position is currently robust, delivering a small surplus. It is clear, however, that we face a number of risks specific to UCLH as well as the challenges of the wider economic context and pressure on government funding described earlier in this document.

3.1.22 The failure of NHS funding mechanisms to reflect the costs of delivering specialist care will continue to present significant challenge to UCLH. In addition, specialties in which we are seeing increased demand are not necessarily appropriately remunerated, placing additional financial pressure on the organisation.

3.1.23 We are developing a comprehensive *Lean* transformation programme to include the redesign of inpatient clinical streams and corporate services, including significant change and development of our Information technology systems and processes. Our aim is to roll out *Lean* methodology, training and support across all of our teams in the organisation. Key themes within the programme will include flow and technology. *Lean* will ultimately become the single UCLH quality improvement model and the focus of all our staff in their journey to deliver the most effective and efficient models of excellent care.

3.1.24 We are committed to a strategy of changing the way we deliver care so that it becomes much more focused around the patient, their families and carers, is much more based on the improving the 'customer experience' and ultimately avoids the need for wasteful and costly processes which add no value to the organisation of the care we deliver. As part of the wider recognition of the importance of this transformation, an organisational restructure has now focused transformation and *Lean* working as part of the key remit of our Deputy Chief Executive.

3.1.25 We are proud of our history of innovation in service delivery and organisation. The development of collaborative joint ventures in areas such as in Imaging and Pathology continue to support our drive to deliver first class services supporting our clinical teams in the delivery of efficient models of care.

3.1.26 Despite the economically constrained environment, demand on the services provided by UCLH continues to grow. Figure 2 highlights the growth in turnover and its components within UCLH over the past four years, with predicted growth assumptions until 2018/19. Figure 3 demonstrates the growth in just one area of activity, often a key indicator of patient and referrer choice; outpatients over the past four years.

Figure 2: Total Trust turnover and components of growth from 2012/11 and the forecast to 2018/19

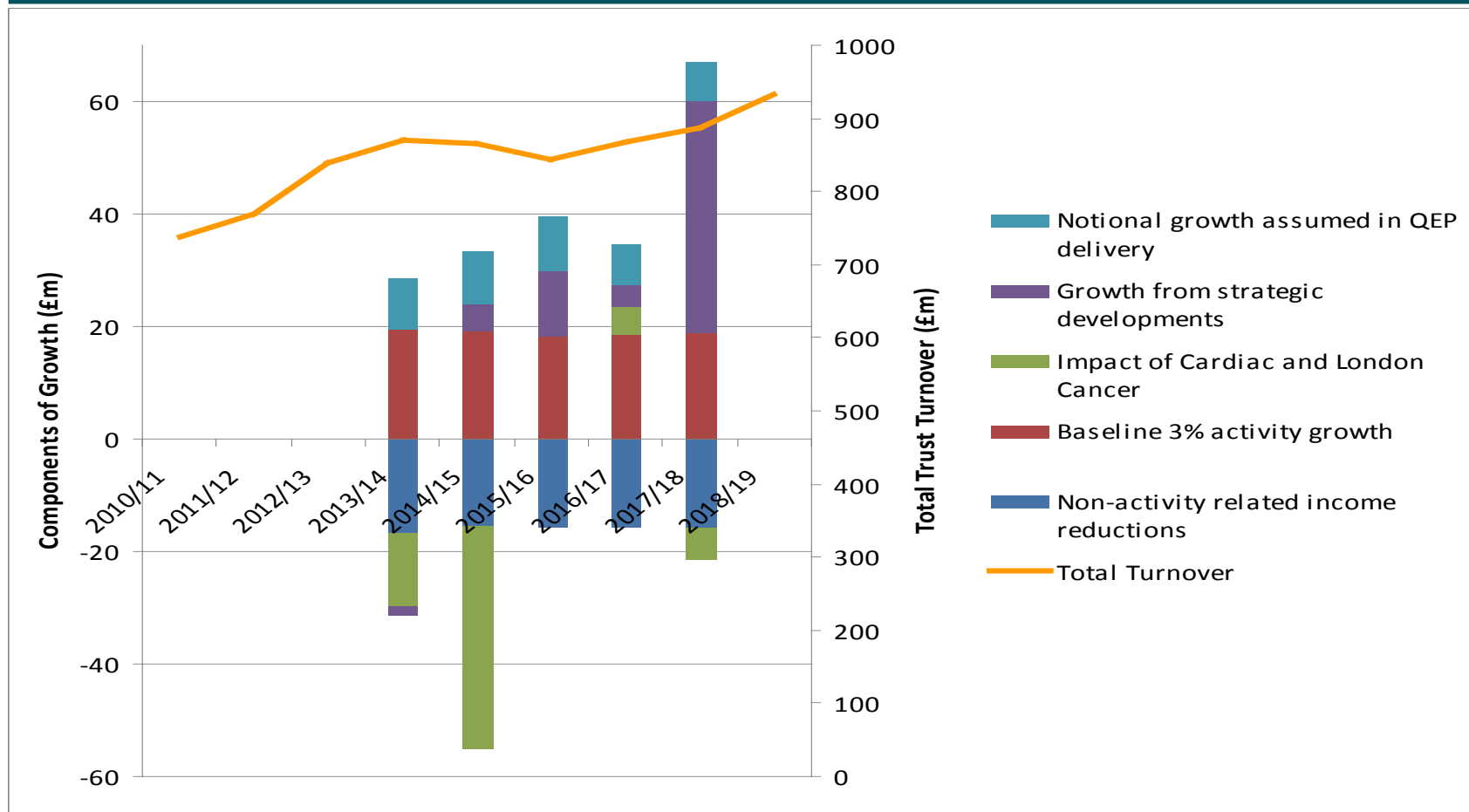
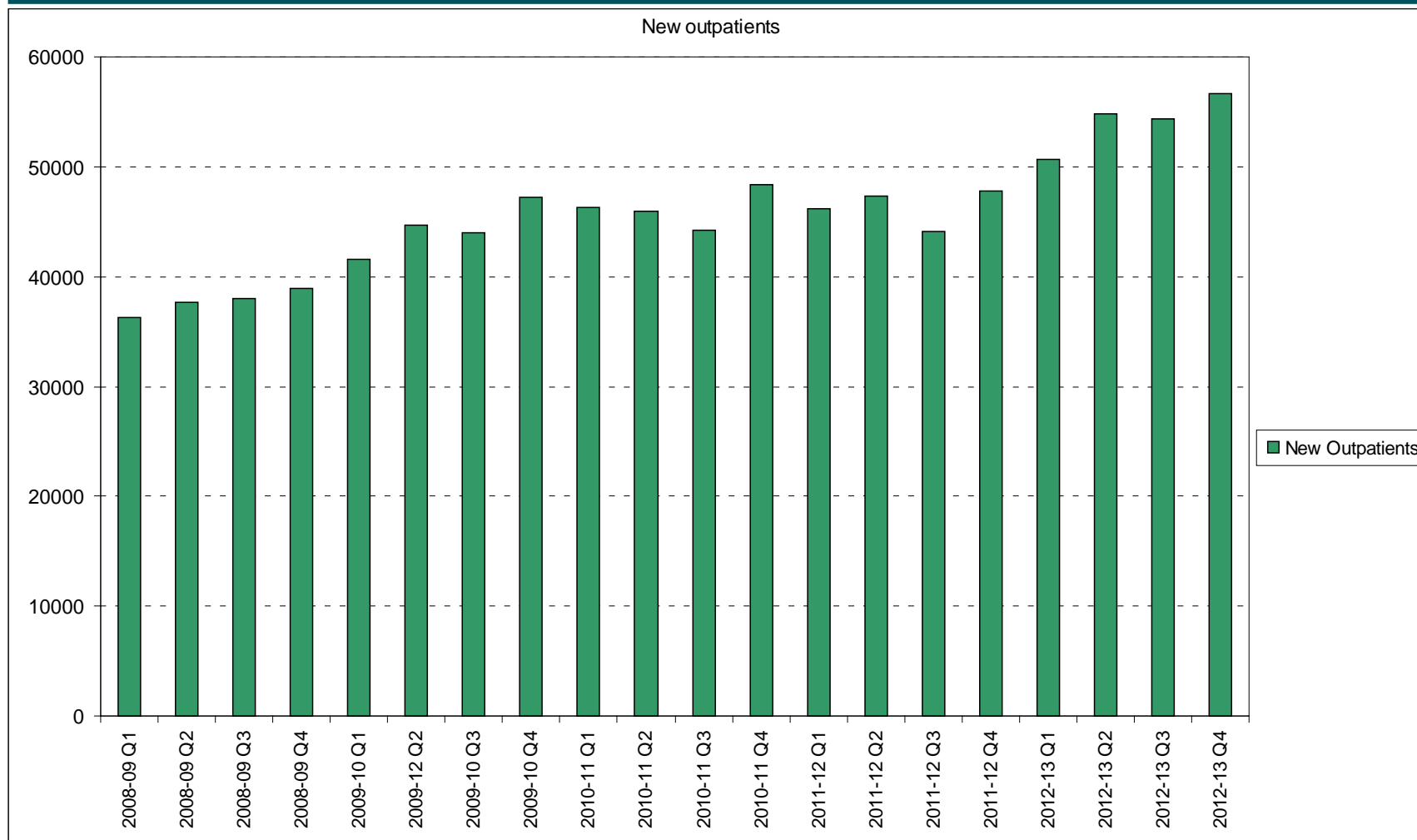


Figure 3: *Growth in new outpatients from 2008/09 to 2013/14*



4 Clinical services strategy

4.1.1 Our vision is as follows:

‘UCLH is committed to delivering top-quality patient care, excellent education and world-class research’

4.1.2 In November 2011, the Board reviewed the organisation’s service strategy and agreed to focus on development of three service areas with the potential to become world leading:

◆ Cancer services

◆ Neurosciences

◆ Women’s health

4.1.3 In order to deliver world leading excellence in these three specialties, it has been essential to develop a strong base in core medical and surgical specialties. Any strategic intent to grow the priority specialist services must be underpinned by appropriate investment in core medical and surgical services and in the delivery of high quality local care to the population we serve. As stated earlier in this document, we are committed to the strategy that success in both these portfolios (local and specialist local/regional/national care) strengthens each other.

4.1.4 We are proud of our ability to deliver a number of first class medical and surgical services to our local population, Greater London and the south east. These specialties include cardiac services (until 2015), dermatology, gastrointestinal, gynaecology, infectious disease, rheumatology, trauma and orthopaedics as well as urology. We are committed to supporting the implementation of the London Cancer and Cardiac reconfiguration proposals which will result in UCLH becoming a sector hub for specialist cancer and Bart’s Health NHS Trust the sector wide centre for cardiac services.

4.1.5 We also provide world leading hearing, balance, dental and head and neck services at the Eastman Dental Hospital and the Royal National Throat Nose and Ear Hospital.

4.1.6 Clinical research underpins all aspects of our high quality services, and will be a key driver for our service developments over the next ten years. We have already gained a national and international reputation in a number of areas of significant research and have continued to see a year-on-year growth in the number of patients entered onto clinical trials across a number of specialities. We will look to grow and develop our relationship with UCL and other academic and charitable partners, supporting our key strategic aims and vision.

5 Core medical (elective and emergency) and surgical services

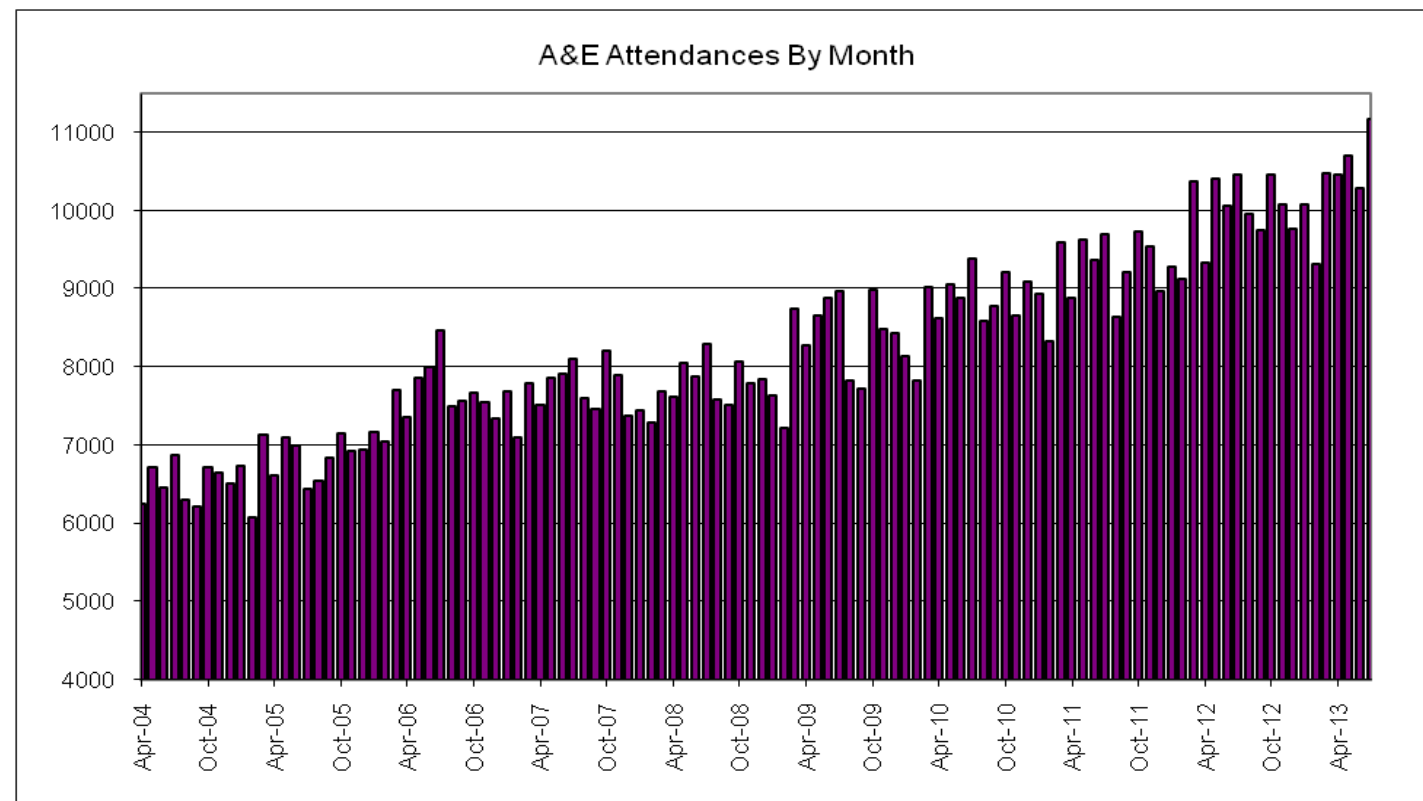
- 5.1.1 UCLH is a provider of core medical and surgical services to the local population, through both emergency and elective pathways. It is important to acknowledge that the aspiration to become world leading in neurosciences, cancer services and women's health cannot be achieved without a strong basis in these core medical and surgical specialties, including general paediatrics.
- 5.1.2 The Accident and Emergency (A&E) Department is the port of entry for the vast majority of patients on the urgent and emergency pathway. A&E has seen a continuous increase in attendances over the past ten years. It is assessed that demand on A&E services will continue to increase over the next five years, in line with the national trend; notwithstanding this, UCLH remains committed to working with primary care to ensure the best models of care for our local population that reduce the need for people to visit hospital where at all possible. With the increase in attendances to A&E UCLH has seen an increase in patient level activity and, subsequently, pressure to admit more patients into the main hospital. This pressure in demand is also being felt on the overall flow of patients through the acute hospital beds, creating a considerable pressure on current and potentially future capacity with significant changes in ways of working and use of stratification of care.
- 5.1.3 As we develop our acute services to more closely match the needs of our patients, we will need to ensure that only those who truly need to be in acute beds are placed there. Avoiding admission through breaking the traditional primary/community secondary care split through the increasing use of ambulatory care models and enabling earlier discharge to step down facilities, use of hospital at home and augmenting self-care, are key components to coping with this demand and providing top quality care with a positive patient experience. This must also be matched with links to educational and research opportunities from growth areas such as care of older people.
- 5.1.4 Our local commissioners are at different stages of articulating and planning for changes in how care can be delivered more effectively in community settings. All of our discussions with CCGs have been positive and collaborative, driven by a shared understanding of the need to improve care models and deliver savings in such a way that providers are not destabilised financially. We have established a clinical integration division within our Medicine Board and during 2013/14 began using this dedicated new resource to ensure that we deliver the opportunities for much more integrated working with local health providers.

5.1.5 Elective medical services are predominantly outpatient or procedure based (e.g. bronchoscopy and EBUS), with clinical teams increasingly focussed on developing integrated pathways with primary and community providers. The current elective medical inpatient services provide diagnostic and medical therapy treatments.

5.1.6 UCLH provides a comprehensive secondary care surgical service to the local population. The elective surgical service has elements of tertiary expertise across most specialties, with high volume practices in urology, head and neck, ENT, orthopaedics, gynaecology and elements of GI. As commissioners seek to consolidate specialist surgical services in order to improve outcomes, UCLH will need to prioritise those specialties in which it seeks to provide tertiary surgical services.

5.1.7 It is also vital that we build essential clinical support and diagnostic services (e.g. pathology) to match and enhance the strategic areas of development. There will be significant business opportunities and chances for regional and even national leadership of developments in this area (e.g. pathology joint venture).

Figure 4: Growth in A&E attendances since April 2004



To provide excellent urgent, emergency and elective medical and surgical services to our local population and support the development of all our services

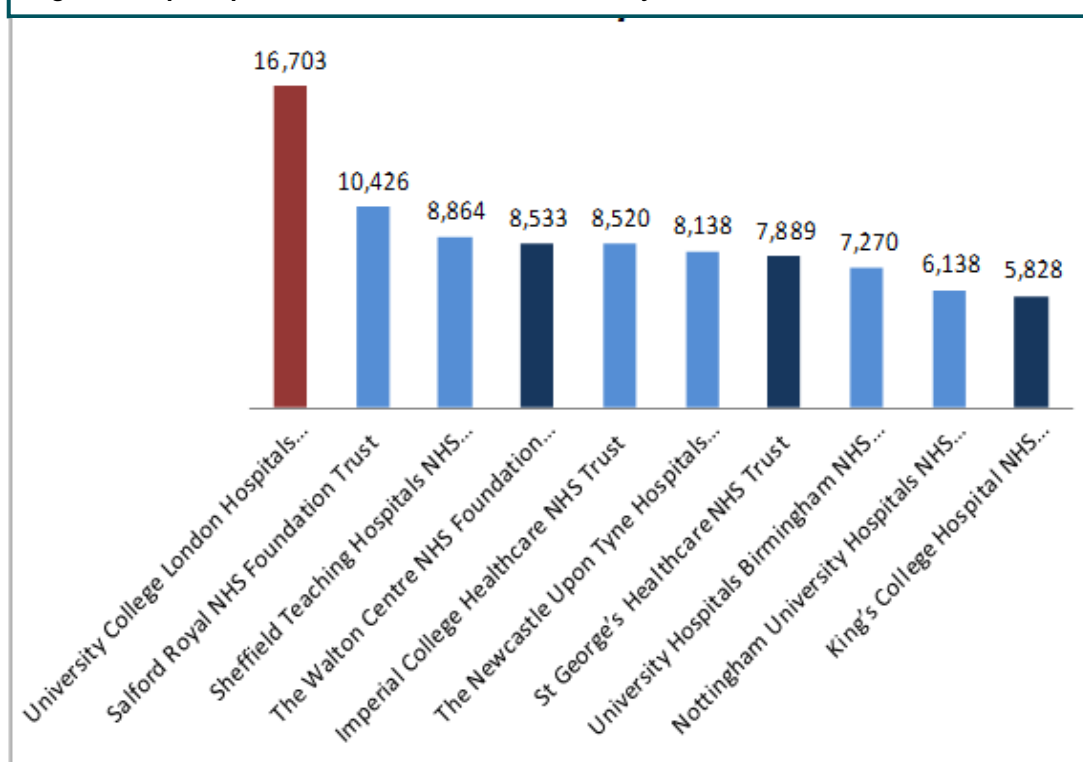
Short and long term strategic objectives

- Complete the Emergency Department redevelopment to meet demands and new models of care for the next 10 years and potentially beyond
- Ensure all patients are on pathways of care where innovation is encouraged but unwarranted variation minimised to maximise value for patients and the organisation
- Develop different care models and delivery of care to aid capacity required for strategic developments and local population
- Develop research and educational benefits through linkage to UCL (e.g. healthy aging and adolescent rheumatology)
- Continue to develop our relationship with Great Ormond Street Children's Hospital and other specialist paediatric providers in London to deliver the most appropriate configuration of children's, teenage and young adult services; especially in areas of a specialist nature such as oncology where we are the partner of the joint Principal Treatment Centre for children and young adults with cancer
- Continue to invest in high quality surgical facilities (including the completion of a new day surgery/23hr facilities) and develop our reputation further as a training environment for world class surgery
- Continue to work with primary, secondary and social care colleagues to ensure patients are treated wherever possible away from the hospital environment

6 Neurosciences

- 6.1.1 The National Hospital for Neurology and Neurosurgery is the largest clinical neuroscience provider in the UK, assessing and treating individuals with the most complex and difficult disorders from across the country and with the UCL Institute of Neurology, is internationally recognised as a centre of research and clinical excellence.
- 6.1.2 The impact of long term neurological conditions including stroke, dementia, Parkinson's disease, multiple sclerosis, and epilepsy on the UK health and social care system is significant. It is estimated that by 2020 over one million people in the UK will have dementia, costing 1% of GDP.
- 6.1.3 There is a significant opportunity to improve outcomes at a national level by working in partnership to develop efficient and effective methods for definitively diagnosing neurological disease. There is also scope to further improve the efficacy of existing treatments and to develop novel interventions to improve the clinical outcome and quality of life for individuals with a neurological condition.
- 6.1.4 There has been a dramatic expansion of clinical services and research activity in the last five years, with growth in activity close to 80%.
- 6.1.5 The changing commissioning landscape will present new opportunities to deliver high quality integrated neurological services across UCL Partners and beyond, including better links with other providers as part of a "managed clinical network". It will remain important to continue delivering general and urgent neurological services to our local population integrated with local community services.

Figure 5: Top ten providers of clinical neuroscience by FCEs 2012 /13



- 6.1.6 It is critical that the National Hospital for Neurology and Neurosurgery continues to grow its reputation and translational role as a national centre and world leader. Academic and clinical priorities must be aligned where possible to enable development of new treatments through translational research.

Neurosciences services vision, short term objectives and long term aims

To positively **impact on the clinical outcome and quality of life for every individual with a neurological disorder**

Short term strategic objectives

- Unify clinical services which are currently duplicated across the Trust and local health system
- Develop new models for assessing and treating chronic and complex neurological conditions
- Enable the delivery of the 20 year clinical strategy by developing appropriate business cases to support service expansion
- In partnership with UCL, maintain the National Hospital for Neurology and Neurosurgery's position as the leading national and European centre for neurosciences

Long term strategic aims

- Provide expert diagnosis, using the latest technology
- Offer novel treatments as soon as they are available, including pioneering internationally recognised clinical research
- Train tomorrow's leading scientists and clinicians
- To partner with services worldwide to deliver and debate on specialist opinions to broaden access to services whenever required and work to develop cures.
- In partnership with UCL, establish the National Hospital for Neurology and Neurosurgery as the world leader in neurosciences services and research
- Deliver the 20 year clinical vision and strategy

7 Cancer services

- 7.1.1 UCLH provides a wide range of cancer services including all types of cancer treatment and almost all tumour types. Workload has increased significantly over recent years in all areas, except paediatric inpatients, where there has been a shift away from inpatient treatment. Chemotherapy treatments have increased at 8% per annum over the same period.
- 7.1.2 The size and catchment area served by UCLH for different types of cancer varies considerably, ranging from specialist cancer services serving a large wide population, to some network services serving predominantly north London, and some local services serving only a small local population.
- 7.1.3 UCLH has provided national leadership in developing innovative ambulatory models of care in cancer services, underpinned by the opening of the UCH Macmillan Cancer Centre in 2012.
- 7.1.4 The proposed reconfiguration of specialist cancer services across the north and east of London and west Essex offers an opportunity to deliver a step change in outcomes and survival for cancer patients. Through active partnership with other providers, UCLH will ensure patients have access to world leading diagnostics and treatment throughout their care pathway, delivered locally wherever possible.
- 7.1.5 Designation as a provider of the new Proton Beam Therapy service from 2018 will enable UCLH to take a national leadership role in further developing novel interventions for cancer patients. Establishing the UK's largest haematology (blood cancer) inpatient facility on the Phase 4 site will further enable clinical teams to develop innovative pathways and treatments for cancer patients.
- 7.1.6 The Cancer Research UK Centre at UCL exemplifies the seamless integration of basic, translational and clinical cancer research with the outstanding treatment and care offered at UCLH.
- 7.1.7 The UK continues to perform poorly in survival rates for patients across most types of cancer when compared internationally. In addition to the need to improve clinical

Figure 6: Proposed Phase 4 development which will contain the Proton Beam facility, day surgery theatres and specialist cancer beds



outcomes, there is significant opportunity to improve the quality of patient experience for individuals diagnosed with cancer across the health and social care system.

- 7.1.8 UCLH will continue to work closely with the UCL Cancer Institute to develop its reputation and translational role as a national centre and world leader. Academic and clinical priorities must be aligned where possible to enable development of new treatments through translational research.

Cancer services vision, short term objectives and long term aims

To lead a national improvement in survival rates for cancer patients and to develop pathways which improve the experience for every individual diagnosed with cancer

Short term strategic objectives

- Support delivery of the proposed reconfiguration of specialist cancer services (including radiotherapy) in north east and north central London
- Develop appropriate business cases to ensure the Proton Beam Therapy and Phase 4 above ground facility are delivered in 2018
- Improve the experience of cancer patients and their families and their carers across the health system, in partnership with Macmillan Cancer Support
- Improve outcomes through world leading translational research, in partnership with UCL and Cancer Research UK (CRUK)

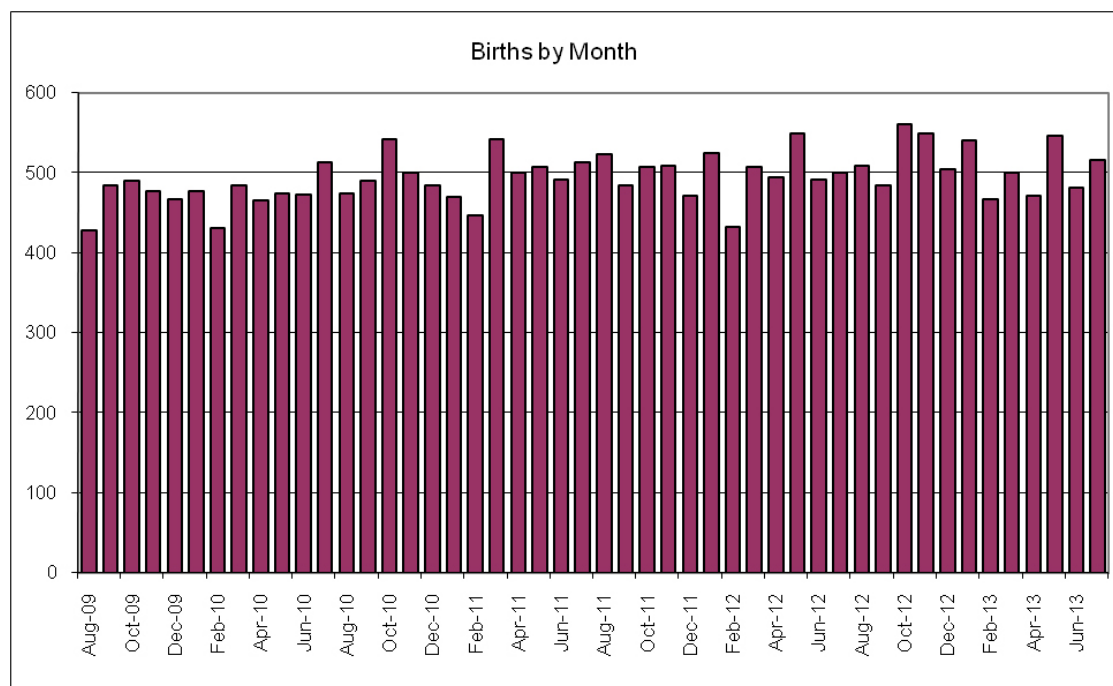
Long term strategic aims

- Improve early and accurate diagnosis by developing innovative diagnostic techniques and pathways which can be delivered locally across the UK
- Improve local treatment through our partnership with London Cancer
- Improve specialist cancer treatments by offering novel treatments as soon as they are available, including pioneering internationally recognised clinical research
- Train tomorrow's leading scientists and clinicians

8 Women's health

8.1.1 UCLH is currently a major provider of maternity services to the local population, delivering over 6,000 births per annum. It also plays a key role in supporting complex maternity services for populations much further afield than Camden and Islington. The neonatal care service is a recognised centre

Figure 7: Number of births per month at UCLH (2010 – June 2013)



of excellence and supports acutely ill and pre-term babies from across north and central London and beyond, as does our leading foetal medicine service, in which we see patients from across the wider population.

8.1.2 Alongside this, UCLH, in collaboration with UCL, has a national and international reputation for gynaecological service provision and research, especially in the field of gynaecological cancer. UCLH also provides breast cancer care to just under 200 newly diagnosed women per year and plays a key role in supporting the local population with more general breast care support.



8.1.3 Priorities for women's health services include developing plans for the expansion of maternity capacity in line with initiatives to offer families in London greater choice and further developing our role as a local and national provider of complex care for women and neonates.

To make a real and sustainable difference to women's health **locally, nationally and worldwide**

Short term strategic objectives

- Expand the existing infrastructure to support 7,000 births per annum, with appropriate medical and midwifery presence to ensure world leading care
- Grow UCLH's national and international reputation in the field of gynaecological cancer service and translational research delivery
- Develop UCLH's role as the network lead for neonatology and complex maternity service provision and continue to deliver world leading outcomes in neonatal care
- In partnership with London Cancer, ensure the most appropriate sector configuration for breast cancer surgery and local diagnostic provision

Long term strategic aims

- Ensure UCLH becomes the hospital of choice for families wishing to give birth in and around north central and north east London
- In partnership with the UCL Institute of Women's Health, establish UCLH as a world leader in gynaecological surgery and cancer care provision
- Improve knowledge, practice and education in all aspects of women's health

'UCLH is committed to delivering top-quality patient care, excellent education and world-class research'

