

Strategic Objectives Delivery Plan 2014-19 – Final - Version 8

SO1: Safe –Deliver safe services and be in the top 20% against our peers

Overall Lead: Medical Director

Priority	High level actions	High Level Measures	Lead Director
<p>Consistently meet national patient safety standards in all specialities and across divisions</p> <p>Outcome of Chief Inspector of Hospitals Inspection to be rated as “Good” or better</p>	<p>The safety of patients comes first in all we do</p> <p>Regular mock CQC Inspections and speciality deep dives</p>	<p>Year 1 - 5: 100% compliance</p> <p>Patient safety performance standards benchmark Trust in the top 20% against peers</p> <p>Years 1-4: Achieve a rating of Good or better with ongoing improvements to ratings from mock inspections and deep dives</p> <p>Year 5: be in top rated category</p>	<p>Chief Operating Officer & Chief Nurse</p> <p>Chief Nurse & Medical Director</p>
<p>Avoid preventable harm</p>	<p>Work in partnership with community partners to deliver a “safety first” and personalising care culture</p>	<p>Year 1-5: Compliance with safety thermometer and as few as possible Never Events</p>	<p>Chief Nurse and Clinical Chief</p>
	<p>Every member of staff has relevant patient safety goals included in their annual objectives and can demonstrate how they achieve organisational quality goals</p>	<p>Year 1: 100% of clinical staff appraisals include safety goals</p> <p>Year 2: 75% of non-clinical staff appraisals records include safety goals</p> <p>Year 3: 100% of all staff appraisals</p>	<p>All Directors & Clinical Chiefs</p>

		include safety goals Year 4& 5: 100% of all staff appraisals include safety goals	
	Actively participate in national Patient Safety Collaborative in Kent Surrey & Sussex area	Years 1-5: Agree and deliver standards as agreed	Medical Director
We are open and transparent	Share good practice; learn from incidents, complaints and poor practice. Triangulate themes Develop a culture of openness and candour in handling & responding to complaints, serious incidents including communication with patients and their families in harmony with the principles of the NHS Constitution	Year 1: Baseline established using audit test approach and realistic improvement levels targets agreed for complaints and SIs Years 2-5: Deliver agreed year on year incremental improvements which are sustained	Chief Nurse & Clinical Chiefs

SO2: Effective –Deliver effective and sustainable clinical services within the local health economy

Overall Lead: Medical Director

Priority	High level actions	High Level Measures	Lead Director
Achieve the best possible clinical outcomes for our patients	Use monitoring and benchmarking of outcomes, by specialty, to maintain a quality focus across relevant services with progress reflected in the Quality Account Right patient, right place, right time through ring fenced beds, fast tracking and ambulatory care programmes	Year 1: Baseline against CQC indicators established and incremental improvement plan agreed Years 2 – 5: Deliver incremental improvement plan	Chief Nurse & Clinical Chiefs
Deliver services differently to meet need of patients, the local health economy and the Trust	In partnership with other organisations identify new ways of working e.g. integrated care pathways	Years 1 – 5: One new service per year in line with the Clinical Strategy	Chief Operating Officer
	Timely review, assessment and where relevant implementation NICE guidance across Trust and outcomes monitored Where guidelines are not implemented have clear, evidence based, reasons for the decision	Year 1: Establish process for review, assessment and implementation Years 2-5: Process embedded	Medical Director
	Effective working with partners in the local health economy	Years 1 -5: Year on year improvement in partnership development and relationships across the local health economy	Chief Executive
	Essential, mandatory and speciality based ongoing training and development programmes for all staff	Year 1: Baseline established and incremental improvement plan agreed Years 2 - 5 Deliver incremental improvement plan	Director of HR

SO3: Caring – Ensure patients are cared for and feel cared about

Overall Lead: Chief Nurse

Priority	High level actions	High Level Measurers	Lead Director
Deliver high quality care around the individual needs of each patient	Regularly review and audit working practices to ensure patients feel cared about	Year 1: Audit programme and process developed. Build on information from IP survey, Your Care Matters and FFT Years 2-5: Implement programme with evidence of year on year improvements	Medical Director & Director of Information & Estates
	Effective and competent multidisciplinary working in all areas	Year 1: Nursing and Midwifery Strategy embedded within Trust Baseline established for each specialty and incremental improvement agreed Year 2 -5: Nursing review and assessment reflects individual needs Deliver incremental improvement in all specialities	Chief Nurse
	Explore and establish new methods of gaining patient and carer input into care delivery	Year 1: Develop and implement a scheme based on the concept of “You said... We did...” to demonstrate responsiveness to patients’ views	Chief Nurse
Treat patients and their families with dignity, respect and compassion	Implementation of the SaSH Plus values and behaviours across the whole organisation delivering the Trust’s ambition to deliver excellent and compassionate patient care.	Year 1: Embed N&M strategy within Trust and customer care training developed and begin implementation, Implement Workforce Strategy	Chief Nurse & Director of HR

	Engender a culture that expresses commitment and pride in the quality of care provided, whilst monitoring and assessing performance to provide supportive challenge and to learn from successes and when things go wrong	Year 2: Establish and undertake programme of patient listening events Years 2-5: Develop and embed values based recruitment	
Listen to patients and their families	Continually work with patient and Carers representatives or champions part of the on-going Patient Experience Strategy Involve families in the care and planning of patients where appropriate	Year 1: Develop and implement a scheme based on the concept of “You said... We did...” Years 2-5: Use scheme to listen to and respond to patients’ views 50% reduction in complaints around communications, diagnosis & treatment through greater understanding on both sides	Director of Information and Facilities

SO4: Responsive to people’s needs – Become the secondary care provider and employer of choice for the catchment populations of Surrey & Sussex

Overall Lead: Chief Operating Officer

Priority	High level actions	High Level Measures	Lead Director
Deliver access standards	<p>Work in partnership with CCGs and ambulance services to ensure referrals are appropriate through education workshops, patient profiling etc</p> <p>Work in partnership with CCGs and other providers to identify alternative healthcare provision for non acute emergencies</p>	<p>Years 1-5: Compliance with Annual Plan objectives and standards and NHSE standards</p> <p>Alternative providers for frail elderly step-up and step-down facilities</p>	Chief Operating Officer
Use feedback to shape and improve the services patients receive	Take steps to ensure meaningful engagement with the local community including minority groups ensuring that through its membership and the Council of Governors, the communities it serves are able to influence the future development of services.	<p>Years 1-5: Demonstrate that services are shaped through patient and member feedback</p> <p>Year 2: Macmillan cancer Information centre</p>	Director of Information and Estates & Director of Corporate Affairs
	Active engagement of members, patients and carers in service review and development	<p>Year 1: Develop mechanism for engagement e.g. Quarterly patient/ member forums</p> <p>Years 2-5: Programme of engagement activities with patients and members</p>	Chief Nurse & Clinical Chiefs & Director of Corporate Affairs
Develop local services as appropriate at East Surrey Hospital, other Trust sites and in the community	<p>Support CCGs to repatriate activity from out of area providers</p> <p>With local partners increase community beds and capacity of Hospital at Home</p>	<p>Years 1-5: Repatriated services / activity to SaSH e.g. 80% of catchment area (on campus and/community)</p> <p>Achieve bed occupancy of 95%</p>	Chief Operating Officer

	Planned services developments as described in	Deliver planned service developments	
	Develop and implement recruitment & retention strategy to attract and retain high calibre staff which demonstrate and display Trust values	Years 1- 5: Become the employer of choice for the people of Surrey & Sussex with achievement of incremental targets year on year	Director of Human Resources
Value staff	Ensure staff are motivated and rewarded to innovate, shape and deliver high standards of care and professionalism	Years 1-5: Quality assured appraisals 90% of staff have a PDP Turnover rate 12% Staff engagement in the top 20% of trusts	Director of Human Resources

SO 5: Well- led

Overall Lead: Chief Executive

Priority	High level actions	High Level Measures	Lead Director
<p>Live within our means to remain financially sustainable</p>	<p>Deliver Non-elective/elective balance, increase productivity prepare 2 year CIP plan including efficiency gains</p> <p>Outline longer term areas for productivity gains for year 5; 3-5 for inclusion in next 2 year CIP; and repatriation/local referrals</p>	<p>Years 1 – 3: 100% compliance with Annual Plan targets</p> <p>Minimal cancellation or delays to timing of planned operations in theatre due to lack of beds/recovery space</p> <p>Years 4-5: Reduction in waste e.g. opened theatre packs etc</p> <p>Standardisation of processes across trust</p> <p>Agency bill reduced by 50%</p>	<p>Chief Finance Officer</p>
<p>We are an organisation that is clinically led and managerially enabled</p>	<p>Embed a clinically led divisional/service structure and develop an appropriate framework of decision making and accountability</p>	<p>Year 1: Establish Clinical lead roles, recruit to them and establish talent management and accountability process</p> <p>Year 2: Decision rights around specified areas allocated to clinical areas and agree implementation plan over next 3 years</p> <p>Years 3-5: Implement devolvement of decision rights</p>	<p>Medical Director & Clinical Chiefs.</p>
	<p>Implement an effective pro-active management and appraisal process</p>	<p>Year 1: Implement new performance appraisal system that accounts for behaviours against agreed outputs below Clinical leads and agree metrics and</p>	<p>HR Director</p>

		<p>targets for monitoring</p> <p>Years 2-5: Effectively operate the appraisal system, delivering metrics and standards</p> <p>Continuously improving and a learning organisation which supports Trust values</p>	
	Appraisals of all staff to demonstrate compliance with Trust values	<p>Year 1: Establish periodic (twice every 5 years) programme of 360 / multisource feedback for doctors</p> <p>Year 2: Establish multisource feedback programme for all other staff</p> <p>Years 2-5: Multisource feedback for all staff used in staff appraisals</p>	<p>Medical Director & Clinical Chiefs</p> <p>Chief Nurse & Director of HR</p>
Have appropriately qualified and competent staff always working to the highest standards of professionalism and ethics	<p>Embed Leadership development by implementation of the SaSH Plus values and behaviours across the whole organisation delivering the Trusts ambition to deliver compassionate excellence</p> <p>Implementation of National Quality Board guidance on nursing, midwifery and care staffing capacity and capability along with similar guidance for medical staff</p>	<p>Year 1: Ongoing implementation of GE clinical leadership programme and Foresight Board development programme</p> <p>Staffing review cycle and elements agreed and undertaken</p> <p>Ensure staff work to professional codes of conduct.</p> <p>Promote and undertake staff listening events</p> <p>Years 2 – 5: Deliver incremental</p>	<p>Director of Human Resources & Medical Director & Chief Nurse</p>

		improvement plan	
	Ensure IT and estate support/optimize patient experience by improving patient interface, sharing and capture of patient information and patient communication	Years 1 – 5: Ward refurbishment programmes New outpatients facility Smart terminals in outpatients, ED and corridors Develop an East Surrey Hospital app and where appropriate patient tracking system.	Director of Information & Estates
We are a well governed organisation working in partnership with others	In partnership with key stakeholders in health, social care and others, respond positively and pro-actively to challenges and opportunities posed by the economic environment, allowing rapid adoption of new ways of working	Years 1 – 5: Achieve planned Partnership Programme	Chief Executive
	Ensure the right governance systems and internal control mechanisms are in place and working effectively at all levels	Year 1: Audit review of governance provides strong assurance Year 2: Governance processes adapted to support clinical leadership model and remain effective Years 3-5: Steady state, and agile enough to adapt	Director of Corporate Affairs
We will have visible leadership team who are engaged and play a valuable part in the local health and social care system to ensure the development and delivery of safe	In partnership with other stakeholders in the health and social care system develop and deliver flexible and sustainable models of care.	Year 1-5: Year on year improvements to feedback from key stakeholders which is positive and inline with principles of good partnership working.	Chief Executive

and sustainable services		Evidence of joint working to achieve safe and sustainable services	
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