

Sherwood Forest Hospitals NHS Foundation Trust (SFH) 2022/23 Strategic Priorities Quarter 1 Update

Contents		Page
1.	Summary – ‘Quarter 1 Position on a Page’	1
2.	Detailed Quarter 1 Update	2
	<i>Appendix A</i> – Timetable for Updates	9

1. Summary – ‘Q1 Position on a Page’

Ref	2022/23 Trust Priority	Executive Lead	Overall RAG
1.1	Develop an action plan to re-launch Family and Friends feedback, plus develop a framework for assurance (on actions taken).	Chief Nurse	
1.2	Improve the Quality and Safety of the services we provide to children with complex needs.	Medical Director	Update will be provided in Q2
1.3	Achieve the levels of waiting times as identified in the 2022/23 plan and trajectories.	Chief Operating Officer	
1.4	Work with all partners to reduce the number of patients who are delayed moving to their onward destination outside of SFH.	Chief Operating Officer	
2.1	Delivery of the SFH Green Plan and provide support to deliver the ICS Green Plan.	Chief Financial Officer	
2.2	To embed and enhance the current offer of support regarding the Mental and Physical Wellbeing of our Colleagues.	Director of People	
2.3	Design and deliver a recruitment and retention programme for maternity; to right size the service and enable the delivery of the Continuity of Carer Health Inequalities service delivery model (Maternity Transformation).	Chief Nurse	
3.1	Develop and Implement a Strategic workforce Plan for SFH in collaboration with the ICS.	Director of People	

Ref	2022/23 Trust Priority	Executive Lead	Overall RAG
3.2	Respond to the 2021 NHS Staff Survey. Identify Key Focus Areas.	Director of Culture and Improvement	
4.1	Successfully implement and optimise the use of EPMA.	Medical Director	
4.2	Develop a refreshed Digital Strategy.	Medical Director	
4.3	To introduce an Innovation Hub across the Mid Notts Place Based Partnership.	Director of Culture and Improvement	
5.1	Delivery of the SFH Transformation & Efficiency Programme that supports the delivery at PCB/ICP level.	Director of Culture and Improvement	
5.2	Be a key partner in the development of the Provider Collaborative.	Chief Executive	
5.3	Shape and define a new SFH Trust 5-year strategy (2023-2028) working with ICS partners.	Director of Strategy and Partnership	
5.4	Continue to progress Pathology Network initiatives alongside NUH (and across the region where required).	Director of Strategy and Partnership	

Overall RAG Key

	On Track - no issues to note.		On Track – action underway to address minor issues		Off Track – action underway to address minor issues
	Off Track – action underway to address major issues		Off Track – issues identified no action underway		Off Track – issues not identified and no action underway

2. Detailed Quarter 1 Update

Ref	2022-23 Trust Priorities	Executive Lead	SFH Governance	Measures of Success	Quarter 1 Update
1.1	To Provide Outstanding Care - Develop an action plan to re-launch Family and Friends feedback, plus develop a framework for assurance (on actions taken).	Chief Nurse	Quality Committee	<ul style="list-style-type: none"> Action plan developed to re-launch Family and Friends feedback Design and implement a Community Gynae Service 	<ul style="list-style-type: none"> The implementation of the new Friends and Family system is in its final stages. The system is now almost fully operational and being used to its full capacity. Once requested, staff can access reports on a monthly or weekly basis. QR Codes have been piloted in the Maternity Ward, Sherwood Birthing Unit, Ward 25 and Ward 25 (CAU), Antenatal Clinic, Ward 14, GAU, EPU and Emergency Department (Newark and Kings Mill). This did not result in a large increase in feedback or collection of data. It was noted however that this was a useful method of feedback for our digital advanced patients. Further training is planned around the new system with our teams within the Trust in order to highlight/identify any themes or trends within the departments. Questions can be changed at any time for Inpatients, Outpatients, ED patients to ensure they are always relevant.
1.2	To Provide Outstanding Care - Improve the Quality and Safety of the services we provide to children with complex needs.	Medical Director	Quality Committee	<ul style="list-style-type: none"> Appoint SFH lead to lead transition of complex paediatric patients into adult service via MDT forum by the end of Q2 2022/23 Support ICB to link SFH, NHCT and NUH transition MDTs by the end of Q3 2022/23 Develop business case for ICB wide transition nurse specialist team to support parents, patients and service development by the end of Q4 2022/23 	<ul style="list-style-type: none"> Update will be provided in Q2.

1.3	<p>To Provide Outstanding Care - Achieve the levels of waiting times as identified in the 2022/23 plan and trajectories.</p>	Chief Operating Officer	Quality Committee	<ul style="list-style-type: none"> • ‘Timely care’ SOF metrics to be presented to Trust Board of Directors, which will illustrate performance (reported monthly) <i>(Note: this will also include system performance metrics)</i> 	<ul style="list-style-type: none"> • Month 2 SOF presented to Trust Board in July 2022 - https://www.sfh-tr.nhs.uk/media/13967/enc-11-final-sof-month-2.pdf. • Number of patients on the incomplete RTT waiting list rated Amber. • Number of patients waiting 78+ weeks for treatment rated Green. • Number of patients waiting 104+ weeks for treatment rated Green. • Number of completed RTT Pathways (against Yr2019/20) rated Amber.
1.4	<p>To Provide Outstanding Care - Work with all partners to reduce the number of patients who are delayed moving to their onward destination outside of SFH.</p>	Chief Operating Officer	Quality Committee	<ul style="list-style-type: none"> • ‘Timely care’ SOF metrics to be presented to Trust Board of Directors, which will illustrate performance (reported monthly) <i>(Note: this will also include system performance metrics)</i> 	<ul style="list-style-type: none"> • Month 2 SOF presented to Trust Board in July 2022 - https://www.sfh-tr.nhs.uk/media/13967/enc-11-final-sof-month-2.pdf. • The local position continues to remain significantly above the agreed threshold of 22 delayed patients. The worsening position is a direct link to capacity issues within adult social care and care agencies. • Additional winter capacity remains open and there is a further national drive to support the roll out of Virtual Wards for early supported discharge. • The system D2A business case is complete; however there has been no evidence of positive change within the trust.

2.1	<p>To Promote and Support Health and Wellbeing - Delivery of the SFH Green Plan and provide support to deliver the ICS Green Plan.</p>	Chief Financial Officer	Executive Team Meeting	<ul style="list-style-type: none"> • Embed Environmental Impact Assessment into all planning and investment case process by end of Q2 2022/23 • Evidence that the SFH Green Plan has been promoted internally and externally, including public commitments by the Trust Board of Directors. 	<ul style="list-style-type: none"> • All Transformational Change Programmes must now have a completed Environmental Impact Assessment before proceeding. • The Trust, supported by the Board of Directors have signed the Climate Emergency UK declaration. • A series of events and significant dates have been publicised on the Trusts website (https://www.sfh-tr.nhs.uk/about-us/climate-action-at-sherwood/climate-action-2022/). These are routinely promoted via social media.
2.2	<p>To Promote and Support Health and Wellbeing - To embed and enhance the current offer of support regarding the Mental and Physical Wellbeing of our Colleagues.</p>	Director of People	People, Culture and Improvement Committee	<ul style="list-style-type: none"> • Staff health and well-being SoF metrics to board each month (On-going) • Introduction of a dedicated Health and Wellbeing Approach by the end of Q2 2022/23 • Embedded Health and Wellbeing Approach by the end of Q4 2022/23 	<ul style="list-style-type: none"> • There is significant work being undertaken to ensure our people are physically and emotionally well at work. There has been the development of a Financial Wellbeing group to understand the impact of the current cost of living crisis on our people, with the aim of developing and implementing innovative solutions including an internal food bank, a robust wellbeing campaign over the coming months. • A Menopause in the Workplace conference is currently being planned for world menopause day on 18 October 2022. • The Trust has worked with the ICS to review mileage rates in relation to car users, and the Trust has increased mileage rates by 26% on national terms and conditions. • There has been the reintroduction of Schwartz Rounds, which provide a structured forum where all staff, clinical and non-clinical, come together regularly to discuss the emotional and social aspects of working in healthcare.

					<ul style="list-style-type: none"> During the recent heat wave, the People, Culture and Improvement directorates conducted walk arounds of the site to ensure our people were safe and well, while also reminding them of the importance of regular breaks and keeping hydrated.
2.3	<p>To Promote and Support Health and Wellbeing - Design and deliver a recruitment and retention programme for maternity; to right size the service and enable the delivery of the Continuity of Carer Health Inequalities service delivery model (Maternity Transformation).</p>	Chief Nurse	Quality Committee	<ul style="list-style-type: none"> Delivery of Ockenden recommendations for Continuity of Carer (by end of Q4 2022/23) 	<ul style="list-style-type: none"> The ongoing maternity recruitment and retention plan continues with positive outcomes. There is some uncertainty around the pathway of Continuity of Carer (CoC) following recent national conflicting reports. The SFH team have submitted the system plan for out CoC, aligned with NUH and are awaiting further feedback.
3.1	<p>To Maximise the Potential of our Workforce - Develop and Implement a Strategic workforce Plan for SFH in collaboration with the ICS.</p>	Director of People	People, Culture and Improvement Committee	<ul style="list-style-type: none"> Resourcing SoF metrics to board each month (On-going) Introduction of a dedicated Strategic Workforce Plan by the end of Q2 2022/3 Annual refresh of dedicated Strategic Workforce Plan by the end of Q4 2022/23 	<ul style="list-style-type: none"> A strategic workforce plan has been developed and has been presented to various clinical and non-clinical forums in relation to the predicted workforce challenges over the next 3 - 5 years and the options to be considered. This document identifies risks and opportunities. A key element of this plan has been to involve the divisions and corporate functions in relation to its development and gaining commitment regarding implementation once approved.

3.2	<p>To Maximise the Potential of our Workforce - Respond to the 2021 NHS Staff Survey. Identify Key Focus Areas.</p>	Director of Culture and Improvement	People, Culture and Improvement Committee	<p>A number of detailed metrics will be monitored via the People, Culture and Improvement Committee. These will be focused on:</p> <ul style="list-style-type: none"> • Valuing YOU; enough staff to do my job, recognition and reward programme • Caring about YOU; reducing colleague experience of V&A/BH from patients/users/colleagues • Developing YOU; improve quality of appraisals, fair career development <p>Improvement trajectories have been set and a summary of performance will be reported to the Trust Board of Directors via quarterly updates throughout 2022/23.</p>	<ul style="list-style-type: none"> • All commitment pillars have an allocated lead and progress is reported into an established workstream (except for Violence and Aggression which is a newly established group which sits in the 'Caring About You' pillar). • The Trust commitments have been shared across the organisation with monthly updates provided in the Staff Brief, Staff Bulletin, CEO blog, Facebook Group and other communication forums. Each month focusses on one of the commitment areas: May: commitments launch, June: Valuing You update, July: Caring about You update and August: Developing You update. • The Valuing You 3 metrics for improvement have also been included in the Q2 pulse survey which runs through July. • Progress against the Trust commitments is underway for all key improvement areas. A progress report was presented to PCIC on 26.07.2022.
4.1	<p>To Continuously Learn and Improve - Successfully implement and optimise the use of EPMA.</p>	Medical Director	Executive Team Meeting	<ul style="list-style-type: none"> • Roll out EPMA into surgery, incorporate VTE screening tool, develop and embed fluids module, scope requirements for ED EPMA module. Complete by end of Q2/beginning of Q3 2022/23 • Develop and embed analysis and system reporting opportunities by the end of Q4 2022/23 	<ul style="list-style-type: none"> • All aspects of the EPMA roll-out are on track for completion by the stated target date. • Analysis and system reporting functionality is now available; although this will only be embedded across the Trust once the data has been validated.

4.2	To Continuously Learn and Improve - Develop a refreshed Digital Strategy.	Medical Director	Executive Team Meeting	<ul style="list-style-type: none"> EPR Business case approved by NHSE by the end of Q4 2022/23 Production of three-year digital investment plan in line with the Multi Year planning process (Dates to be published by NHSE) 	<ul style="list-style-type: none"> A decision on whether our EPR Business Case is approved by NHSE is expected by the end of Q2/beginning of Q3. Once confirmation is received, this will then inform the production of a three-year digital investment plan. All elements are on track.
4.3	To Continuously Learn and Improve - To introduce an Innovation Hub across the Mid Notts Place Based Partnership.	Director of Culture and Improvement	People, Culture and Improvement Committee	<ul style="list-style-type: none"> Introduction of an Innovation Hub, working in partnership with key ICS Partners, implemented by Q1 2022/23 Key principles and year 1 aspirations defined and implemented by Q1 2022/23 (including methodology for quantifying impact on patient care) 	<ul style="list-style-type: none"> Despite remaining a priority for the Trust, the development of an Innovation Hub has been impacted by a combination of funding constraints and operational pressures. We have however recently secured some joint funding with our system partners to enact this. This funding will help us to complete the infrastructure element of the Hub, which will in turn naturally lead to the operationalisation stage. Although the Hub will not therefore be 'live' in Q1 as planned, we now have a funded plan to ensure this is operational by the end of Q2. A small multi-professional working group has been established to oversee this.
5.1	To Achieve Better Value - Delivery of the SFH Transformation & Efficiency Programme that supports the delivery at PCB/ICP level.	Director of Culture and Improvement	Finance Committee	<ul style="list-style-type: none"> Deliver Year 1 of the 2022-25 Transformation and Efficiency Programme ('the Programme') by 31st March 2023 Deliver Financial Improvement element of the Programme by 31st March 2023, ensuring it is delivered on a recurrent basis Have in place a plan for the delivery of Year 2 of the Programme (plan developed Q3 2022/23, implementation begins Q4 2022/23) Continuously review delivery milestones ensuring that changes are enacted where 	<ul style="list-style-type: none"> A three-year Transformation and Efficiency Programme has been developed and has been signed-off by the Trusts Finance Committee. The programme includes a £11.7m financial improvement component, although qualitative benefits also form a large element of the programme's objectives. Additional layers of governance have been added to both complement and support the Transformation and Efficiency Cabinet. This

				<p>there is a risk of under delivery (ongoing and overseen by the Transformation and Efficiency Cabinet)</p> <ul style="list-style-type: none"> Proactively contribute to the ICS/PBP Transformational Programmes of work, ensuring all collaborative opportunities are exploited ((ongoing and overseen by the Transformation and Efficiency Cabinet) 	<p>will help to ensure milestone delivery is monitored closely and action taken where required.</p> <ul style="list-style-type: none"> Associate Director of Transformation is an active member of the System Transformation Group.
5.2	<p>To Achieve Better Value - Be a key partner in the development of the Provider Collaborative.</p>	Chief Executive	Executive Team Meeting	<ul style="list-style-type: none"> Provider Collaborative Formally Established by 1st July 2022 PC priorities established by 30th September 2022 Formal review of PC achievements reported to SFH and System Boards March 2023 	<ul style="list-style-type: none"> SFH is a proactive contributor to the Provider Leadership Board and Provider Collaborative Work Programme. CEO and Chair are key members of the Nottingham and Nottinghamshire Provider Collaborative Chairs and CEO Group. SFH Planning and Transformation Leads are actively involved in establishing Provider Collaborative priorities and have provided data to support this.
5.3	<p>To Achieve Better Value - Shape and define a new SFH Trust 5-year strategy (2023-2028) working with ICS partners.</p>	Director of Strategy and Partnership	Executive Team Meeting	<ul style="list-style-type: none"> Strategy agreed at SFH Board November 2022 Launch of new strategy completed by 31st January 2023 	<ul style="list-style-type: none"> The Director of Strategy and Partnerships is now in post, and a plan to ensure delivery is currently being developed. At this stage no issues have been identified. A more detailed update will be provided in the Q2 report, including the measures of success against which delivery will be monitored. These measures will be taken to the Executive Directors Team meeting at the earliest opportunity.

5.4	<p>To Achieve Better Value - Continue to progress Pathology Network initiatives alongside NUH (and across the region where required).</p>	<p>Director of Strategy and Partnership</p>	<p>Executive Team Meeting</p>	<ul style="list-style-type: none"> • Programme Delivery in line with existing programme plan and national planning expectations (to be refined once Director of Strategy and Partnership commences) 	<ul style="list-style-type: none"> • The Director of Strategy and Partnerships is now in post, and a plan to ensure delivery is currently being developed. At this stage no issues have been identified. • A more detailed update will be provided in the Q2 report, including the measures of success against which delivery will be monitored. These measures will be taken to the Executive Directors Team meeting at the earliest opportunity.
-----	--------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------	-------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Appendix A

Timetable for Updates

Period	Trust Board of Directors Meeting
<u>Quarter 1</u> (April 2022 – June 2022)	4 th August 2022
<u>Quarter 2</u> (July 2022 – September 2022)	3 rd November 2022
<u>Quarter 3</u> (October 2022 – December 2022)	2 nd February 2023 (<i>TBC</i>)
<u>Quarter 4</u> (January 2023 – March 2023)	4 th May 2023 (<i>TBC</i>)