

**STRATEGIC PRIORITY 1
TO PROVIDE OUTSTANDING CARE TO OUR PATIENTS
OPERATIONAL AND ACCESS IMPROVEMENT**

EXECUTIVE LEAD
SIMON BARTON

PROGRAMME/ACTION		LEAD MANAGER	BENEFITS REALISATION MEASURES / KPIS	MILESTONES					RAG	COMMENTS
1	Maximise Theatre Productivity (Theatre Improvement Workstream)			Q1	Q2	Q3	Q4	18/19		
1A	Introducing and embedding a sustainable time based scheduling approach to listings (Units Model) across all elective theatres in three phases and streamlining the reporting and performance process.	DGM Surgery	Theatre lists are planned to full capacity (% of Booked and Achieved Utilisation)		x					Business Case presented to Finance Committee in Q1 2017/18. Case approved. Delay in implementation due to deferral of surgical bed reconfiguration
1B	To reduce Theatre Cancellations and DNAs in elective surgery across all specialties.	DGM Surgery	Theatre lists are planned to full capacity (% of Booked and Achieved Utilisation)			x				Risk stratification of patients on day of list has been implemented
1C	To align theatre start and finish times with consultant job plans across Surgery and Anaesthetics and re-align workforce to revised theatre template including theatre staff shift patterns.	DGM Surgery	Decreased number of unused theatre sessions and reduce WLI spend	x						Capacity and Demand planning complete. Job plans revised so that from April 2018 there will be no cross site Anaesthetic working.
2	Improve the safe flow of Emergency patients (Emergency Flow Workstream)			Q1	Q2	Q3	Q4	18/19		
2A	Reduce the % of OBD's associated with DTOC by 3.5% by Sept		% of DTOC OBD's	5.50%	4.50%	3.50%	3.50%			Q1 4.33% Q2 4.49% Q3 4.44%
2B	Reduce the number of patients with a red status on the R2G programme									Electronic bed management module required capture R2G status
3	Enhance the quality of access for Accident and Emergency patients			Q1	Q2	Q3	Q4	18/19		
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3A	Initiate ED Streaming pilot - reducing time-to-triage	DGM UEC	Achievement of KPIs as specified in BC	x						Senior streaming implemented, to be fully embedded during 2018/19
3B	Implement Tier 5 Consultant rota - supporting admission avoidance	DGM UEC	Greater distribution of skill mix and reduce Consultant vacancy gaps to zero		x					Dependent on Consultant posts fully established. Recruitment in progress, interviews to be held by April 2018.
3C	Improve performance for ambulance handover times	DGM UEC	Improved patient experience and time to triage time.		x					Ambulance handover operational policy in development, in conjunction with EMAS. Deterioration in performance during Q3 due to winter pressures, improvements expected during Q4
3D	Initiate Nursing Workforce Review	DGM UEC	Greater distribution of skill mix and reduction in breaches	x						In progress, due for completion March 2018
4	Further improve the processes for patient's making appointments for outpatient, diagnostic or planned admissions			Q1	Q2	Q3	Q4	18/19		
4A	Implement 100% mandatory e-referrals for first Cons OP	DGM D&O	100% e-referrals assessed via MAR return, weekly monitoring	Apr						Pioneer Trust supported by CCG and NHS Digital, implementation on 30th April 2017
4B	Implement patient portal access through Savience. Complete Business Case	DGM D&O	reduce DNAs by a further 1%, Appt changes, BC gone through approval process		BC approved					Portal access already available to the Trust. Savience upgrade required has been delayed within capital programme. Consideration being to alternative systems across the local health community
4C	Once above implemented can reduce follow up clinics in certain specialties as monitoring and 2-way Consultant to patient feedback possible	DGM D&O	Reduce Clinic appts and New to F/Up ratios (KPI dependent upon Speciality) . Reduction in clinic attendances				start to implement	Clinic changes implemented		As above
5	Ensure the delivery of Women-centred care in our Maternity Services			Q1	Q2	Q3	Q4	18/19		
5A	Strategies that Support the principles of Better Births	Head of Midwifery	Improved Client Satisfaction							Actively engaged with Nottinghamshire LMS and working to national timescales
5B	Implement the Maternity Vision For SFHT	Head of Midwifery	Improved patient experience							Delivering in line with above
5C	Personalise care for women and their families	Head of Midwifery	Improve Clinical Outcomes							Delivering in line with above Excellent outcome from CQC Women's survey
5D	Listen to the women who use our services	Head of Midwifery	Improve Clinical Outcomes							As above Active engagement with Maternity Voices