

Strategic Objective	Over the next five years we will.....	In 2019/20 our progress will be....	Q3 Update	RAG	Executive Lead
1	<i>Give patients, carers and families a positive experience</i>	An increase in the opening hours and number of patients treated by our Ambulatory Emergency Care Unit	Our AECU is now open 7am - midnight during the week (compared to 7am - 10pm prior to winter 18/19) and 8am - 8pm at weekends. YTD 18/19 = 4,317 patients YTD 19/20 = 5,977 patients		SiB
		A reduced volume of patients cancelled within six weeks for non-clinical reasons	YTD 18/19 = 3.6% YTD 19/20 = 3.7%		SiB
		A Friends and Family Test (FFT) with an average >98% recommendation for Inpatient and Maternity Care and >94% recommendation for A&E and an increased sample rate to upper quartile for both	See quarterly SOF for details		DS
	<i>Provide safer and clinically effective care</i>	A reduction in the number of Serious Incidents by 50% with the aim of becoming the lowest for any East Midlands acute Trust	STEIS reportable incidents: YTD 18/19 = 22 YTD 19/20 = 22		JH
		Never events reduced by 50% with the aim of having none	YTD 18/19 = 2 YTD 19/20 = 1		JH
		Benchmarking in the top quartile for lowest readmission rates for non-elective care	A report on readmissions went to Quality Committee in Q3, demonstrating an increase in the readmission rate, which remains below peer average. An audit is taking place in Q4 to provide assurance regarding the root cause of this growth, which is understood to be due to a change in the configuration of the relevant services.		SiB
	<i>Improve coordination across health and social care</i>	85% of patients at the end of their life discharged to their preferred place	Where the preferred place is known, the percentages for mid-Nottinghamshire (as recorded by SystemOne) are as follows: Q1 = 79% Q2 = 81% Q3 = 83%		JH
		Working with partners to increase the number of patients who safely receive their rehabilitation at their home	HFID programme started on 20/5/19 with community partners, but the results have been slow to be delivered so far. New leadership team has been put in across the services to try to improve the number of complex discharges who return to their usual place of residence for rehabilitation rather than be admitted to bedded rehab care		SiB

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2	Support people to have healthier lifestyles	At least 80% of people admitted to our hospitals who smoke offered funded tobacco treatment services	An audit of 100 notes per quarter showed that the following percentages of current smokers were offered NRT Q1 - 75% Q2 - 57% Q3 - 77% <i>It should be noted that the sample size is small and therefore only indicative</i>		JH
		Our Health Heroes programme launched, to promote health and wellbeing amongst colleagues and this will support an improvement in the colleagues' health and wellbeing survey scores	32 colleagues attended the Health Heroes training days in November and December, which received very positive feedback. A focus group will be held in April to explore next steps		CT
		Making it easier for colleagues and patients to travel to Sherwood hospitals in ways that support a healthier lifestyle and the environment	New car parking permit scheme went live in September 2019. New bus commuter schemes in place with Stagecoach and Trent Barton, giving staff a reduced fare on regular bus travel, to encourage a greener mode of transport. Staff have already started to sign up for this scheme.		RM
	Help to improve mental wellbeing including reducing loneliness	The rate of colleagues off due to anxiety, stress or depression will be no more than 0.8% of our overall sickness absence	See quarterly SOF for details		CT
		An increase to the number of requests to the Employee Assist Programme	Q1 - 39 employees accessed the EAP service Q2 - 52 employees accessed the EAP service Q3 - Data not yet available		CT
		As a supporter of the "Campaign To End Loneliness" we will take practical steps to reduce feelings of loneliness	SFH Campaign to End Loneliness Proposal developed, to include: - Publicising local events / activities, across the ICP - A buddy culture for colleagues to have personal conversations in a safe space with 'work friend volunteers' - Creating an environment for patients to engage in conversation with each other e.g. corridor chat chairs as on Ward 36 - Adding the concept of 'taking time to see' to our Fundamentals of Care Study Day		JH
		Community gardens opened producing fresh fruit and vegetables on our three hospital sites	Bulbs and trees were planted this autumn and there are plans for vegetables and herbs to be planted in spring.		RM

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	<i>Work with partners to reduce health inequalities for those in greatest need</i>	Working with partners to expand our street health programme	Winners of HRH Integrated Approaches to Care Nursing times award October 2019. Further presentations planned to Nottinghamshire ICS board. Visit from King's Fund team to showcase Street Health project at a November event, with positive feedback. £15k short term funding received from District Council to support wound clinics at CGL (Care Grow Live) until 31st March 2020. Business case in development to outline the need for continuation of funding. Further Street Health Event planned for 10th February.		JH
		Measureable outcomes developed with partners	An ICS outcomes framework has been developed, which includes ambitions, outcomes and measures. 73 'measures' have been developed enabling a regular assessment of the impact of the work of the ICS.		JH
<b>3</b>	<i>Attract and retain the right people</i>	A 10% vacancy rate for band 5 registered nurses by the end of the year	See quarterly SOF for details		CT
		Agency spend within the NHSI limit	See quarterly SOF for details		CT
		Colleague turnover below 0.90 per month	See quarterly SOF for details		CT
		<7.3% of colleagues who are temporary	See quarterly SOF for details		CT
	<i>Have an engaged, motivated and high performing workforce</i>	<p>Staff survey scores as follows:</p> <ul style="list-style-type: none"> <li>• In top five acute Trusts for overall engagement</li> <li>• In top five acute Trusts for colleagues motivation at work</li> <li>• In the top five acute Trusts for colleagues recommending Sherwood as a place to work or receive care</li> <li>• +65% response rate</li> <li>• &lt;7% staff experiencing discrimination at work</li> <li>• In the top five acute Trusts for the quality of our appraisals</li> <li>• In the lowest 20% of acute Trusts for colleagues feeling unwell due to work related stress</li> </ul>	End of year measure only.		CT
	The WRES (Workforce Race Equality Standard) and new WDES (Workforce Disability Equality Standard) used to better understand the experiences of all our colleagues and action taken where required.	The WRES and new WDES were signed off at the People OD and Culture Committee in July 2019		CT	

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	<i>Develop and nurture our teams of colleagues and volunteers</i>	At least 70 apprentices in post	124 apprenticeships are currently being undertaken across the Trust as of the end of Q3 2019/20.		CT
		Appraisal compliance at 95%	At the end of Q3, performance was 95%		CT
4	<i>Adopt evidence based best practice</i>	Good practice learned and shared through our 'buddying' relationship with Queen Elizabeth Hospital King's Lynn	We continue to support QEHL with their governance, quality improvement, CQC preparation and clinical leadership in particular. Colleagues have visited KL and KL colleagues have been here. Our former Deputy COO, has recently been substantively appointed as COO at QEHL. We continue to check that no one individual or team are overstretched and we have an agreed contract with NHSI for the work we are doing.		RM
		90% of our clinical specialties with their compliance assessed with NICE guidelines	YTD = 66% of assessments completed and returned within the required 3 month deadline		DS
	<i>Make the best use of information and digital technology</i>	Paper-based patient assessments replaced with electronic ones, as a step towards digitised patient health records	Learning from the initial implementation of digital assessments has led to a plan to develop a comprehensive digital admission process		DS
		Our electronic prescribing system purchased and built, in preparation for rollout in 2020	Business case agreed by Finance Committee and Board		DS
		A refreshed digital strategy	New Digital Strategy Group launched, chaired by Deputy Medical Director. Circa. 400 individuals have provided feedback on the emerging strategy. Prioritisation and costing underway in Q3 before launching in 2020.		DS
		Improved information sharing between health and social care professionals, citizens and patients so that better decisions are made about care and treatment	The supplier contract has now been agreed and signed and the challenges with the NHS App are much improved. Work to engage with citizens and professionals is progressing well.		DS
	<i>Use research, innovation and improvement for the benefit of our communities</i>	An increase in the number of people participating in research	YTD 18/19 = 1,621 YTD 19/20 = 1,327		DS
		A location identified for a dedicated research facility, to enable a broader research offer	R&I included in Medicine business case for utilisation of space in clinic 9. Due to go to the Executive Team for a decision in Q4.		RM
	<i>Become financially sustainable</i>	A reduced deficit and our financial target met	Financial Plan met as at Q3 and forecast to achieve in full year. Deterioration in underlying deficit due to non recurrent actions. See quarterly SOF for details		PR
		Our Financial Improvement Plan delivered on a recurrent basis, demonstrating we have become more efficient	Deterioration in recurrent delivery of FIP. Financial Strategy approved and consistent with ICS plan. NHSI trajectories received and Strategy being updated for congruence.		PR
Financial delivery measured at a Mid Nottinghamshire level		ICP Financial Plan and transformation programme in place.		PR	

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5	<i>Work with our partners across Nottinghamshire to deliver efficiencies</i>	A redesigned outpatients service and reduced number of unnecessary patient visits created by working with commissioners	Year to date, our work has identified 20,000 face to face appointments that are not required or can be provided in a different way or setting up to the end of March 2020. Full year effect of schemes is a 35,000 reduction in face to face outpatient appointments. In line with the Long Term Plan, we are building on ideas and best practice this year to continue the programme into next year.		SB
		Multi-year plans developed with partners to improve efficiency, based on available benchmarking information	System wide benchmarking process under development.		PR
	<i>Maximise the use of all our resources</i>	>£10m invested in our estates, equipment and IT, including the purchase a state of the art Gamma Scanner, supported by charitable funds	YTD expenditure is £3.74m against plan of £4.364m. This includes £479k on laptop and PC replacement, £100k on Computers On Wheels, £571k on medical equipment and £653k on estates works.		PR
		A refreshed estates strategy including a developed plan for the renewal of our theatres and critical care unit at King's Mill Hospital	Estates strategy session held with Board in November 2019. The strategy will incorporate feedback from the session and will align ICS, ICP and clinical priorities. First draft is due by Easter 2020.		RM
		The improved financial efficiency of our services	Best Value Review process now implemented. Base budget confirm and challenge process in place for Q4.		PR