The Shrewsbury and Telford Hospital **NHS**

NHS Trust

Corporate Business Plan 2009/10

Treatment Centre, Royal Shrewsbury Hospital

Princess Royal Hospital, Telford

Delivering A Healthier Future
Version 1.0
Approved by the Trust Board on 26 March 2009

Summary

Our Integrated Business Plan sets out our organisational strategy for improving and developing our services, and contributing to improved health for the people we serve.

This Annual Plan sets out our goals for 2009/10 to enable us to deliver this strategy. It reinforces that quality of care is the highest priority for The Shrewsbury and Telford Hospital NHS Trust as both the first element in our Framework of Values and our first Corporate Objective.

Vision

What is our aspiration for the future?

Our aspiration is to ensure **a healthier future** and **enable high quality care for all** for people in Shropshire, Telford and Wrekin and mid Wales through *clinically sustainable services in a financially viable NHS Teaching Foundation Trust that puts patient care first.*

Mission

What is the Trust's role?

Our role is to provide integrated health services that are consistently **excellent** and that put **quality** at the heart of everything we do. We do this by harnessing the commitment and the creativity of the **people** who work for us and with us, and ensuring our decisions are made with openness and **integrity**. Through this we strengthen our role in the **community** as the first choice provider of health services and a model employer.

A Healthier Future

What do we mean by A Healthier Future?

These simple words capture so many aspects of what we aim to achieve through improving and developing our services and becoming an NHS Foundation Trust:

- We will ensure *a healthier future* for our patients and service users by improving safety, effectiveness and patient experience. When we become an NHS Foundation Trust we will become more accountable to local communities and have new freedoms to continually improve the quality and outcomes of the care we provide.

- We will have *a healthier future* in the way we do business and work with our partners. For example, our Framework of Values underpins the way we make decisions in the best interests of the people we serve and drives our partnerships with local authorities and other partners to deliver truly integrated services.

- We recognise our role in creating *a healthier future* for the wider community. This includes reducing our own impact on the environment, and developing our role as a major employer in the county, through the priorities set out in our Corporate Citizenship Action Plan.

- Underpinning all of this, we aim to offer *a healthier future* to our staff by supporting and developing them to provide the services needed by people in Shropshire, Telford & Wrekin and mid Wales.

Framework of Values

Our Framework of Values has been developed with staff and local communities and formed part of our consultation on NHS Foundation Trust status. It represents an important commitment that the decisions we make will be in the best interests of the people we serve and the people we employ.

Quality	Our priority is to ensure high quality, clinically safe services for local people. This includes improving patient safety and providing a comfortable patient environment. We will learn from people who use our services, from our staff and from best practice across the NHS and beyond. We will ensure quality by developing and supporting our workforce, empowering them to provide high quality, safe, effective patient-centred care.	Health & Care Safety Experience & Environment Learning & Development
Integrity	We will treat patients and service users with dignity and respect, promoting equity and valuing diversity and offering the highest standards of customer care. Our decisions will be honest and responsible, in the best interests of the communities we serve. We will support our workforce to act with openness and integrity. We will constantly look for ways to build our services around the needs of service users, supporting our staff to meet their needs and expectations.	Dignity & Respect Responsiveness Equality & Diversity Honesty & Reliability
People	People are at the heart of every NHS Trust: the people we provide services for, the people we employ, the people who become our members and governors, the people who fund the services we provide through taxation, and the people we work with in order to provide integrated care. Staff are the most valuable resource in any NHS organisation, and we will support and develop our workforce to use this framework of values as a contract with every patient, service user, colleague, member, governor and partner.	Patients & Service Users Staff, Volunteers & Students Members & Governors Partners
Excellence	We want people in Shropshire, Telford and mid Wales to feel confident that our services are the right choice for them. We will look to the future, planning our services based on the changing needs of local communities, expecting continuous improvement in the outcomes of treatment and care that we provide. We will use the best available evidence to provide services that are effective, both in terms of clinical outcomes and use of financial and other resources.	Improvement Professionalism Choice Effectiveness & Efficiency
Community	We recognise that we are more than a provider of hospital services. We are a consumer of resources, we use energy, we create waste and we rely on the local transport infrastructure. We are a major employer, so we are a significant partner in the local economy and business community. We will reflect our community responsibilities in the decisions we make, working in partnership with public sector, community & voluntary and independent sector organisations to make the maximum collective contribution to the lives of local people and minimise our impact on the environment.	Environment & Sustainability Business & Economy Partnership Relationships

This Framework is being delivered in a variety of ways:

- Increasingly reflecting them in our decisions and strategies. They will become a touchstone for decisions by the Board as well as for the Council of Governors when we become an NHS Foundation Trust.

- Using them to underpin the ways in which we motivate and reward our staff. For example, they are the foundations of our Staff Awards scheme.

- Building them into our new governance arrangements when we become an NHS Foundation Trust. For example, our values underpin our communications with our members.

- Using our values to frame our partnerships. Our values will help us to ensure that we enter into partnerships that are in the best interests of the people we serve.

Strategy
How will the Trust deliver value?

Goals
What must the Trust achieve by the end of 2009/10?

CO1:Improve safety, effectiveness and patient experience →

1.1 Deliver agreed benchmark improvements in clinical outcomes

1.2 Achieve agreed Commissioning for Quality and Innovation (CQUIN) targets

1.3 Maintain and improve compliance with Standards for Better Health, NHSLA risk management standards and CNST maternity clinical risk management standards

1.4 Maintain and improve patient experience by reporting on Patient Reported Outcome Measures (PROMs) and delivering agreed thresholds

1.5 Achieve agreed targets for reduction in healthcare associated infections and maintain registration with the Care Quality Commission

1.6 Deliver 2009/10 milestones in the Privacy and Dignity action plan

1.7 Develop "leadership for safety" at Trust Board level and deliver agreed patient safety programme through participation in the Patient Safety First campaign

CO2: Deliver national and local targets and priorities →

2.1 Deliver the financial plan

2.2 Continue to deliver national targets for access to health services

2.3 Maintain and improve ALE use of resources, achieving at least Level 3

2.4 Deliver the priorities set out in the Trust's Continuous Improvement and Efficiency Strategy

CO3: Support and develop our workforce and the organisation as a whole to deliver high quality care for all →

3.1 Establish an integrated Leadership Strategy to drive improvements in quality, innovation and staff engagement.

3.2 Establish medical workforce transformation strategy and deliver milestones for 2009/10

3.3 Deliver continued improvement in staff satisfaction, engagement and health & wellbeing, including the development of a staff communications and engagement strategy.

3.4 Deliver 2009/10 milestones in the Organisational Development Strategy and Workforce Strategy

Strategy
How will the Trust deliver value?

Goals
What must the Trust achieve by the end of 2009/10?

CO4: Achieve NHS Foundation Trust status

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4.1 Achieve NHS Foundation Status during 2009/10

4.2 Articulate a clear five year vision for services and deliver the key milestones for the first year

4.3 Demonstrate financial viability over the next 5 years through the Long Term Financial Model and Historic Due Diligence

4.4 Deliver 2009/10 milestones in our Membership Strategy and establish the first Council of Governors

4.5 Deliver in-year milestones in the Marketing Strategy, supporting our aspiration to be the provider of choice for patients in Shropshire, Telford & Wrekin

4.6 Transform the policies and practice of the Trust to reflect the new NHS Constitution

CO5: Improve engagement and partnership working to develop and deliver a coherent vision for health and social care

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5.1 Work with partners to develop a long term vision for health and health care for the local health economy (DH&HC) and deliver milestones for 2009/10

5.2 Develop the Patient, Community and Stakeholder Engagement Strategy and deliver milestones for 2009/10

5.3 Participate in the development and delivery of partnership strategies

5.4 Ensure the Trust is well prepared to respond effectively to major incidents

5.5 Deliver the 2009/10 milestones in our Corporate Citizenship plan

CO6: Deliver high quality care for all by embracing technology and other enabling strategies

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6.1 Establish a New Quality Framework for the Trust

6.2 Implement 2009/10 milestones in the IM&T Strategy.

6.3 Implement 2009/10 milestones in the Estates Strategy

CO1 Objective: Improve patient safety, effectiveness and patient experience

The primary focus for any NHS Trust is the provision of health services. Patients expect NHS services to be of a consistently high quality, provided in ways that respect their dignity and privacy.

Raising the satisfaction of patients who use our services, and increasing the confidence of the public who fund it, must therefore be at the heart of everything we do. Choosing the improvement of safety, effectiveness and patient experience as our first objective is therefore a clear signal that these issues are the top priority for The Shrewsbury and Telford Hospital NHS Trust.

In order to continue to provide a full range of district hospital services for patients in Shropshire, Telford & Wrekin and mid Wales we also need to ensure that patients choose to use us. Levels of hospital associated infections, and the reputation of services based on the experience of friends and relatives, have an increasing influence on people's choice of hospital. We will set challenging targets for improvement that supports us to maintain our position as the first choice provider for local communities

| Quality | Integrity |

This objective links with the themes of **quality** and **integrity** in our Framework of Values by ensuring high quality, clinically safe services that treat patients and service users with dignity and respect, promoting equity and valuing diversity and offering the highest standards of customer care.

Goals	Results	Owner
1.1 Deliver agreed benchmark improvements in clinical outcomes	1.1.1 Develop a quality dashboard and reporting process that embraces clinical outcome indicators, patient experience measures, CQUIN, PROMS and other SHA quality metrics	DoS
	1.1.2 Ensure PCT "Vital Signs" measures are publicised within the Trust and where appropriate form part of the quality framework	DoS
	1.1.3 To deliver the agreed improvements in clinical outcomes measured through the dashboard	MD
1.2 Achieve agreed Commissioning for Quality and Innovation (CQUIN) targets	1.2.1 Agree CQUIN scheme metrics with commissioners	MD
	1.2.2 Establish process for data collection and monitoring at operational and Board level[1]:	MD
	• Percentage of patients following myocardial infarction discharged on generic prescribed medication (TBC)	MD
	• Maintain Healthcare Commission score for treatment with dignity and respect (Currently 87% TBC)	DSD
	• Time to procedure for emergency admissions relating to fractured neck of femur patients. Proportion within 48hrs of admission (TBC)	MD
	• Percentage of no, low, moderate, severe and fatal harm patient safety incidents reported to the National Reporting and Learning system (TBC)	DCA
	• % patients have had an explanation about their treatment and have understood the information prior to admission (TBC)	MD
	• Demonstrate improvement in the quality of medical discharge information to both GPs and patients (TBC)	MD

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[1] These metrics are currently being negotiated with commissioners and are subject to change

	1.2.3 Establish and implement plans to deliver agreed targets	MD
1.3 Maintain and improve compliance with Standards for Better Health, NHSLA risk management standards and CNST maternity clinical risk management standards	1.3.1 Maintain compliance with all standards for 2009/10 set through the Annual Health Check	DCA
	1.3.2 Develop and implement a new complaints policy in line with national guidance	DCA
	1.3.3 Establish process to ensure full compliance with Mental Capacity Act requirements (including Deprivation of Liberty Safeguards)	DCA
	1.3.4 Maintain and develop systems and processes for implementation and monitoring NICE Guidance	MD
	1.3.5 Maintain NHSLA Level 2 for risk management standards and plan for Level 3 assessment in 2010/11.	DCA
	1.3.6 Achieve CNST Level 2 in the new CNST maternity clinical risk management standards and develop a robust action plan for achieving Level 3 in the new standards in 20010/11.	MD
	1.3.7 Deliver year-on-year improvement in performance against the Healthcare Commission assessment framework for inpatient children's services including child protection and paediatric life support	MD
1.4 Report on Patient Reported Outcome Measures (PROMs) and deliver agreed thresholds	1.4.1 Agree threshold for return of PROMs questionnaires and implement the collection and reporting on PROMs from April 2009	DoS
	1.4.2 Invite all patients undergoing the following procedures participate in PROMs: hip replacements, knee replacements, groin hernia repair and varicose vein ligation	DoS
	1.4.3 Establish process for PROMs data collection and monitoring at operational and Board level	DoS
1.5 Achieve agreed targets for reduction in healthcare associated infections and maintain registration with the Care Quality Commission	1.5.1 Achieve the annual target for the reduction in the number of MRSA bloodstream infections	MD
	1.5.2 Achieve the annual target for the reduction in the number of C difficile infections	MD
	1.5.3 Strive for 100% and maintain at least 95% compliance with the Code of Practice for the Prevention and Control of Healthcare Associated Infection	MD
	1.5.4 Achieve annual target for MRSA screening for all elective admissions	MD
	1.5.5 Continue to meet the compliance criteria for registration with the Care Quality Commission in 2009/10.	MD
1.6 Deliver 2009/10 milestones in the Privacy and Dignity action plan	1.6.1 Continue to improve the patient environment, including developing local plans for strengthening single sex accommodation	DSD
	1.6.2 Assess Trust against the "Dignity Challenge" and agree targets for improvement	DSD
1.7 Develop "leadership for safety" at Trust Board level and deliver agreed patient safety programme through participation in the Patient Safety First campaign	1.7.1 Ensure a leadership culture at Board level which promotes quality and patient safety and provides an environment where continuous improvement in harm reduction becomes routine throughout the organisation	MD
	1.7.2 Deliver Patient Safety First intervention "reducing harm through deterioration" by reducing in-hospital cardiac arrest and mortality rate through earlier recognition and treatment of the deteriorating patient	MD
	1.7.3 Develop and deliver a communications and engagement campaign to raise the profile of Patient Safety First throughout the Trust	DoS

CO2 Objective: Deliver national and local targets and priorities

Improving access to services not only improves patient experience but can also deliver real improvements in health outcomes. Maximum waiting times have fallen to record lows with the achievement of the 18 week target from referral to treatment during 2008/09. Alongside this, the Trust is successfully paying off its historic debts to ensure that there are firm financial foundations for the future.

National targets and priorities therefore represent a commitment to patients that they will receive consistently high standards of service from the NHS.

This objective therefore reassures people in Shropshire, Telford & Wrekin and mid Wales that we are focused on maintaining the major gains that have already been made in access to health services and continuing to improve to ensure a healthier future for the people we serve.

Integrity | Excellence

This objective links with the themes of **integrity** and **excellence** in our Framework of Values by meeting the needs and expectations of local people through continuous improvement in our services, both in terms of clinical outcomes and use of financial and other resources.

Goal	Results	Owner
2.1 Deliver the financial plan	2.1.1 Deliver a CIP programme of (TBC) that is risk rated and profiled on a month by month basis	FD
	2.1.2 Achieve the agreed run rate on a monthly basis	FD
	2.1.3 Deliver the agreed capital plan	FD
2.2 Continue to deliver national targets for access to health services	2.2.1 Achieve all existing targets for access to health services: • Sustain delivery of the 18 week referral to treatment target including admitted and non admitted patients and direct access audiology • Ensure diagnostic waits are <6 weeks treatment • Continue to achieve existing targets including the 4 hour 98% access target in A&E • Maintain 68% within 60 minute call-to-needle time for thrombolysis • Maintain a maximum 2 week wait for rapid access chest pain clinics • All elective operations cancelled on the day of admission or after to be treated within 28 days	DSD
	2.2.2 Achieve all the existing and new national access targets for cancer including: • % patients with breast symptoms seen within 2 weeks of referral • % patients waiting no more than 31 days for all cancer treatment (surgery and drug treatments) • % patients waiting no more than 31 days for all cancer treatment (radiotherapy treatment) • % patients with suspect cancer detected through national screening programmes or by hospital specialist who wait less than 62 days from referral to treatment	DSD
	2.2.3 Implement Bowel Cancer screening programme for men and women age 70-75 years old	DSD

	2.2.4 Continue to contribute to PCTs plans to increase the % of women seeing a midwife or other maternity health professional by the 12th week of pregnancy	DSD
	2.2.5 By the end of 2009 to offer choice to women of: how to access maternity care; type of antenatal care; place of birth and place of postnatal care.	DSD
	2.2.6 Achieve agreed thresholds for 26 week referral to treatment target for Welsh patients by December 2009	DSD
2.3 Maintain and improve ALE use of resources, achieving at least Level 3	2.3.1 Develop an action plan to achieve a Level 4 rating in financial management, internal control, value for money, financial reporting and financial standing	DCA
2.4 Deliver the priorities set out in the Trust's Continuous Improvement and Efficiency Strategy	2.4.1 Agree a five year Continuous Improvement and Efficiency Strategy for the Trust and deliver year 1 milestones	DoS
	2.4.2 Maintain day surgery rates at above 80%	DoS
	2.4.3 Improve theatre utilisation to >85%	DoS
	2.4.4 Improve Outpatient utilisation by implement Drum Buffer	DSD
	2.4.5 Implement Hospital at Night	MD
	2.4.6 Achieve length of stay milestones to achieve 20th percentile performance for elective and non elective within 5 years	DoS
	2.4.7 Deliver the benefits of implementing medical staff job planning tool and meet target of 80% annual appraisal of medical staff	MD
	2.4.8 Deliver productive ward roll out to agreed programme	DSD

CO3 Objective: Support and develop our workforce and the organisation as a whole to deliver high quality care for all

In every NHS organisation, staff are the most precious resource, providing care 24 hours a day, 365 days a year to thousands of patients. We are committed to being a learning organisation. This includes emphasising the involvement of employees in achieving positive growth in the individual, the team and the organisation with learning at its core, providing development opportunities for staff. It also means being an organisation that learns from our patients and from best practice within the NHS and beyond, and from each other to continually improve our services.

Leaders throughout the NHS can make a major difference every day in building the confidence and support of the staff who work in the NHS, the patients who use it and the public who use it. Effective organisations recognise and develop leaders throughout the organisation to champion change in health outcomes, service quality and working lives. During 2009/10 we will strengthen our leadership arrangements across the Trust, giving power and responsibility to clinical leaders to drive improvements in safety, effectiveness and patient experience in their services.

This objective links with the themes of **quality** and **people** in our Framework of Values as we will learn from people who use our services and support and empower our workforce to provide high quality, safe, effective patient-centred care that meets their needs and expectations.

Goal	Results	Owner
3.1 Establish an integrated Leadership Strategy to drive improvements in quality, innovation and staff engagement.	3.1.1 Develop a Trust Leadership Strategy that reflects the aspirations of High Quality Care for All and the new National Leadership Council	DCA
	3.1.2 Develop a Trust Staff Award for Leadership, and contribute to the new NHS National Leadership Awards	Ch/CE
	3.1.3 Further develop management and leadership programmes for managers and clinicians that deliver our aspirations to nurture current and future leaders	DCA
3.2 Establish medical workforce transformation strategy and deliver milestones for 2009/10	3.2.1 Work closely with the SHA and Deanery to embed leadership skills at the earliest stages of career development for Doctors in training	MD
	3.2.2 Deliver key milestones within the medical workforce job planning programme	MD
	3.2.3 Respond to changes in the medical workforce to include EWTD, Hospital at Night and Modernising Medical Careers	MD
3.3 Deliver continued improvement in staff satisfaction, engagement and health & wellbeing, including the development of a staff communications and engagement strategy	3.3.1 Develop the Trusts Staff Communications and Engagement Strategy and deliver the key milestones for year 1	DoS
	3.3.2 Deliver the action plan from the Staff survey and demonstrate an improvement year on year	DCA
	3.3.3 Further develop advanced nursing practitioner roles	DSD
	3.3.4 Conclude the development of the new accommodation facilities	MD
	3.3.5 Deliver improvements in meaningful appraisal, supporting and developing staff and achieving at least 80% target for annual appraisals	DCA
	3.3.6 Develop a plan for an earned autonomy / innovation fund for 2010/11 to reward quality, empower clinical teams and staff and stimulate innovation	CE

	3.4.1 Establish learning and development agreements with the SHA to ensure high quality education & training and effective workforce planning	DCA
	3.4.2 Develop and deliver the key milestones within a comprehensive Integrated Training and Development plan	DCA
3.4 Deliver 2009/10 milestones in the Organisational Development Strategy and Workforce Strategy	3.4.3 Develop the Trusts workforce planning function to ensure that plans support existing and emerging models of care and particularly the Care Closer to Home Strategy	DCA
	3.4.4 Deliver improvements in attendance at statutory training	DCA
	3.4.5 Make progress towards an integrated approach between clinical, medical and corporate education and training departments	DCA
	3.4.6 Deliver the milestones in the Library Services national service framework	DCA

CO4 Objective: Achieve NHS Foundation Trust status

Becoming an NHS Foundation Trust is an important priority for the Trust as it will give us new freedoms and flexibilities to improve our services with and on behalf of local communities, giving people in Shropshire, Telford & Wrekin and mid Wales a much stronger voice in decisions about their health services. Being an NHS Foundation Trust is also about becoming better at the way we do business – both in our decision-making process but also in the partnerships we develop within the NHS, with local government and beyond.

Integrity | Community

This objective links with the themes of **integrity** and **community** in our Framework of Values as we will make honest and responsible decisions that reflect our community responsibilities, working in partnership with public sector, community & voluntary and independent sector.

Goal	Results	Owner
4.1 Achieve NHS Foundation Status during 2009/10	4.1.1 Prepare the final version of the IBP, LTFM and self certification evidence for submission to Monitor	DoS
	4.1.2 Ensure Monitor Compliance reporting is embedded within the Trusts committee structure	FD
	4.1.3 Complete all the actions within the HDD action plan within the agreed timescale	DoS
	4.1.4 Complete all the actions within the SHA FT action plan within the agreed timescales	DoS
	4.1.5 Deliver the Board Development Programme	Ch
	4.1.6 Implement plan to develop capacity and capability in finance and informatics	FD
	4.1.7 Develop and articulate a clear plan for *"the first 100 days as an FT"*	DoS
4.2 Articulate a clear five year vision for services and deliver the key milestones for the first year	4.2.1 Refresh all Clinical Service Strategies and develop a *probability matrix* approach to service developments	DoS
	4.2.2 Further develop and articulate the Trust's long term strategy for stroke services	DoS
	4.2.3 Further develop and articulate the Trust's long term strategy for dementia services	DoS
	4.2.4 Further develop and articulate the Trust's long term strategy for renal services	DoS
	4.2.5 Further develop and articulate the Trust's long term strategy for cardiac services	DoS
	4.2.6 Further develop and articulate the Trust's long term strategy for cancer services (including the Cancer Reform Strategy)	DoS
	4.2.7 Further develop and articulate the Trust's long term strategy for emergency services (see also 5.1.1 and 5.1.2)	DoS
	4.2.8 Further develop and articulate the Trust's long term strategy for decontamination services	CE

	4.2.9 Further develop and articulate the Trust's long term strategy for diagnostic services (including pathology and radiology)	DoS
	4.2.10 Ensure the emerging outcomes of the Developing Health and Healthcare review are articulated appropriately within the Trust's strategy	DoS
4.3 Demonstrate financial viability over the next 5 years through the Long Term Financial Model and Historic Due Diligence	4.3.1 Migrate the LTFM to the IFRS version and ensure the implications of HRG4, the outcome of 2009/10 LDP process and refreshed service developments are included	FD
	4.3.2 Review and complete the 3 year detailed CIP plans in line with Monitors revised implied efficiency and income assumptions	FD
	4.3.3 Establish programme of benchmarking and review of corporate functions to assess value for money and improve efficiency	FD
	4.3.4 Implement Service Line Management and reporting to agreed timescales	FD
	4.3.5 Refresh the key organisational risks and develop and quantify the financial implications and mitigation of a number of future scenarios	FD
	4.3.6 Negotiate and secure an appropriate working capital facility	FD
4.4 Deliver 2009/10 milestones in our Membership Strategy and establish the first Council of Governors	4.4.1 Develop the new governorship arrangements through a successful election process for Public and Staff Governors and an induction programme for Public, Staff and Partner Governors	DCA
	4.4.2 Build a growing and representative membership through delivering the key milestones within the FT membership strategy	DCA
4.5 Deliver in-year milestones in the Marketing Strategy, supporting our aspiration to be the provider of choice for patients in Shropshire, Telford & Wrekin	4.5.1 Build capacity and capability within corporate and divisional finance teams to be able to respond effectively to competitive tendering exercises	DoS
	4.5.2 Further develop the GPConnect brand through delivering a GP Newsletter, the development of the Trust website and the GPConnect phone line	DoS
	4.5.3 Strengthen market intelligence within primary and secondary care through Dr Fosters Market Manager tool and develop regular divisional marketing reports	DoS
	4.5.4 Develop plans to enhancing the Trust corporate brand as provider of choice for the population of Shropshire, Telford and Wrekin and Mid Wales	DoS
	4.5.5 Develop the capability of Choose and Book to secure the Trust as the provider of choice	DSD
4.6 Transform the policies and practice of the Trust to reflect the new NHS Constitution	4.6.1 Review the Trusts policies and practice against the 7 key principles, the rights of patients and staff and the pledges contained within the new NHS Constitution and make recommendations for change	DCA

CO5 Objective: Improve engagement and partnership working to develop and deliver a coherent vision of health and social care

NHS Trusts do not exist in isolation but form part of a complex system that provides health and care services, improves health and wellbeing and reduces inequalities across society. We recognise that we have an important role within society that goes beyond our core purpose to provide health services.

We are committed to working in partnership within the NHS, with local government and public sector bodies, with the community and voluntary sector, with the independent sector and with the people of Shropshire, Telford & Wrekin and mid Wales. Through this we aim to provide services that people are proud of and feel safe in, and to fulfil our role in supporting people to fulfil their potential within society.

This objective links with the themes of **people** and **community** in our Framework of Values by recognising the value and potential of everyone we come into contact with and working in partnership with others to make the maximum collective contribution to the lives of local people.

Goal	Results	Owner
5.1 Work with partners to develop a long term vision for health and health care for the local health economy (DH&HC) and deliver milestones for 2009/10	5.1.1 Deliver the key milestones within phase 3 for the review of challenged services to include development of service plans, key workforce strategies and the revenue and capital consequences of options for change	MD DoS
	5.1.2 Deliver the key milestones within the 2020 feasibility study to examine options for a single acute site for the critically ill and injured	DoS
	5.1.3 Ensure the Trust plays its part in an effective engagement and communication process for stakeholders and particularly for its staff to ensure they are informed of developments as they emerge from the Developing Health and Healthcare Strategy	DoS
5.2 Develop the Patient, Community and Stakeholder Engagement Strategy and deliver milestones for 2009/10	5.2.1 Deliver the key milestones in the Patient, Community and Stakeholder Engagement Strategy	DCA
	5.2.2 Maintain and strengthen commissioning relationships during the transition to new NHS arrangements for Wales	CE
5.3 Participate in the development and delivery of partnership strategies	5.3.1 Work with partners in the Local Strategic Partnerships to agree LAA priorities for local people that improve health outcomes	CE
	5.3.2 Develop joint strategies with health and social care partners for End of Life, Care Closer to Home, Child Health and Maternity Matters	MD
	5.3.3 Contribute to the development of Integrated Workforce Strategies for Health and Social Care in Shropshire, Telford and Wrekin	DCA
	5.3.4 Work with partners in health and social care to develop robust plans for access to and provision of appropriate bed capacity and pathways of care within the community hospitals , residential homes and nursing homes	DSD
5.4 Ensure the Trust is well prepared to respond effectively to major incidents	5.4.1 Review and test the Trusts Major Incident Plan at least annually including ensuring that there are robust plans for Pandemic Influenza	DSD
	5.4.2 Deliver 2009/10 milestones within the Business Continuity Plans	DSD
5.5 Deliver the 2009/10 milestones in our Corporate Citizenship plan	5.5.1 Deliver the 2009/10 milestones in our Corporate Citizenship plan, including the agreement of a Green Transport Plan	DCA

CO6 Objective: Deliver high quality care for all by embracing technology and other enabling strategies

The delivery of excellent, high quality services is built on the infrastructure provided by information & communications technology, our estates and facilities, new diagnostic and treatment technologies and the business processes that support effective management of services. This objective ensures that the Trust takes advantages of the opportunities presented from the full range of enabling factors to deliver the outcomes that are expected from the other elements of this Annual Business Plan.

This objective links with the themes of **quality** and **excellence** in our Framework of Values as we ensure continuous improvement in the quality and outcomes our services, using the best available evidence to provide services that are effective.

Goal	Results	Owner
6.1 Establish a New Quality Framework for the Trust	6.1.1 Develop an integrated performance management framework that includes a balanced set of quality metrics across the domains of safety, effectiveness and patient experience	MD
	6.1.2 Develop strategies for recognising, rewarding and raising quality standards	DoS
	6.1.3 Develop a clear plan for improvements in data quality.	FD
	6.1.4 Increase the Trusts participation in innovation and research	MD
	6.1.5 Develop an action plan to embed all the elements within the SHAs Quality Framework and plans around developing the Quality Observatory within the Trust systems and processes	DoS
	6.1.6 Deliver a plan to improve measurement and reporting of activity and quality, including publication of the Trust's Quality Account	DoS
6.2 Implement 2009/10 milestones in the IM&T Strategy.	6.2.1 Roll out Vital PAC and ensure benefits are realised	MD
	6.2.2 Implement E-rostering and ensure benefits are realised	FD
	6.2.3 To make progress towards the target of a single electronic patient record by 2010	FD
	6.2.4 Implement ESR and OLM, and develop workforce data quality and its use in strategic workforce planning and monitoring	DCA
	6.2.5 Further develop electronic ordering and reporting of diagnostic tests	FD
	6.2.6 Ensure that the five key elements for secondary care within the Health Informatics Review are incorporated within the IM&T Strategy of the Trust	FD
	6.2.7 Ensure effective information governance including maintaining at least Level 2 performance in the Information Governance Toolkit	DCA
	6.2.8 Improve data quality and the quality and safety of patient care through consistent and effective use of the NHS Number	FD
6.3 Implement 2009/10 milestones in the Estates Strategy	6.3.1 Address the 0-2 year service plans subject to the necessary approvals	DSD
	6.3.2 Further review and adjust the Estates Strategy to take account of the outcomes of the Shropshire, Telford and Wrekin Strategic review and other emerging strategies	DSD
	6.3.3 Develop and implement Plans to improve KPIs in the area of energy and maintenance costs	DSD
	6.3.4 Address the risk and contingency issues within the estates strategy	FD
	6.3.5 Further development of the 5 year capital programme in line with the Trusts service development strategy	FD

Towards a Quality Account

Improving quality and integrity is central to the Trust's Framework of Values. This reflects our commitment to placing improvements in quality, and reporting on our progress and challenges, at the heart of our organisation. It is our top priority for the patients and communities we serve, and for the staff we employ.

In *High Quality Care for All*, the Government has proposed that all provides of NHS care should produce Quality Accounts to provide the public with information on the quality of care they provide.

The Department of Health has introduced legislation to require the publication of **Quality Accounts** from 2009/10. However, to support transition to these new arrangements the Department of Health and Monitor propose to introduce an earlier **Quality Report** in the Annual Report and Accounts of NHS Foundation Trusts and for NHS provider organisations in the East of England. A consultation document has been published to outline proposals for these **Quality Reports**.

The Shrewsbury and Telford Hospital NHS Trust also plans to publish a **Quality Report** for 2008/09. This will form part of our Annual Report and Accounts which will be presented to the Annual General Meeting of the Trust on 30 July 2009.

Producing a **Quality Report** for 2008/09 requires the Trust to consider the quality of the services we offer, our priorities for improvement, the actions we have been taking to secure improvements and the actions we propose to take in future. This publication will provide an opportunity for our patients, communities, staff and stakeholders to work with us to develop our thinking for the statutory **Quality Account** when this comes into effect next year.

Our **Quality Report** will include the key areas highlighted in the Department of Health's consultation document (subject to changes made as a result of consultation):

- a statement on the quality of care offered by the organisation

- a description of the priorities for quality improvement, reflecting our priorities set out in the Corporate Plan 2008/09, the action the organisation plans to take, and the rationale for their prioritisation

- a commentary on issues raised by the regulators or public representatives in the last year in relation to quality

- a quantitative description of the quality of care including indicators selected by the organisation covering patient safety, clinical effectiveness and patient experience as well as indicators covering the Department of Health's national priorities and compliance with Department of Health's core standards as declared to the Healthcare Commission/Care Quality Commission.

It is important to note that the Trust already publishes significant information about the quality of services in our Annual Report. Our Annual Reports have gone above and beyond the core requirements set out in the Finance Manual to provide a wider account of our priorities for quality improvement and our progress. In our Annual Report for 2008/09 we will build on our current reporting to provide an explicit Quality Report to our patients and communities.

Measuring Our Progress

During 2009/10 we will refresh our integrated performance management framework to include a balanced set of quality metrics across the domains of safety, effectiveness and patient experience as well as our wider corporate objectives. Key features are likely to include:

- External assessments and other assessments with external validation:
  - Healthcare Commission Annual Health Check (incorporating Quality of Services and Use or Resources)
  - Auditors Letter of Evaluation
  - Patient Environment Action Team (PEAT) assessments
  - Standards for Better Health (incorporating safety, clinical and effectiveness, governance, patient focus, accessible and responsive care, care environment and amenities, public health)
  - NHS Litigation Authority assessments of risk management arrangements
  - National Patient Safety Agency reports on incident reporting

- Patient Safety
  - Trust incident reporting, National Patient Safety Agency reports on incident reporting and "Never Events"
  - Healthcare Associated Infection monitoring and root cause analysis

- Clinical Effectiveness and Outcomes
  - Clinical Quality Dashboard metrics to be developed during 2009/10

- Patient Experience
  - Complaints, Compliments and PALS Activity
  - Customer Perception and Stakeholder Analysis
  - Healthcare Commission Inpatient Survey, other Healthcare Commission surveys, Trust patient survey and other ad hoc surveys
  - PEAT assessment
  - Choice data and market share

- Service Performance (quality, activity etc.)
  - Activity, Waiting Times and Access Targets
  - Service Improvement (e.g. Length of Stay, Day Surgery Rates and other High Impact Changes)

- Financial Performance
  - Financial position and forecast outturn
  - Delivery against cost improvement plans
  - EBITDA
  - Income against activity
  - Pay and non-pay expenditure

- Workforce Performance
  - Staffing Profile, Turnover/Stability and Sickness Absence
  - Equality and Diversity
  - Appraisals and Personal Development Plans
  - Healthcare Commission Staff Survey

List of Abbreviations

Executive Leads:

CE	Chief Executive
Ch	Trust Chairman
DCA	Director of Corporate Affairs
DoS	Director of Strategy
DSD	Director of Service Delivery
FD	Finance Director
MD	Medical Director

A&E	Accident and Emergency
ALE	Auditors Local Evaluation
CIP	Cost Improvement Programme
CNST	Clinical Negligence Scheme for Trusts
CQUIN	Commissioning for Quality and Innovation
DH&HC	Developing Health and Health Care
EBITDA	Earnings Before Interest, Taxes, Depreciation and Amortization
ESR	Electronic Staff Record
EU WTD	European Working Time Directive
FT/NHSFT	Foundation Trust / NHS Foundation Trust
GP	General Practitioner
HCAI	Health Care Associated Infection
HDD	Historic Due Diligence
HRG4	Healthcare Resource Group 4 (the latest release of the Payment by Results tariff)
IBP	Integrated Business Plan
IFRS	International Financial Reporting Standards
IM&T	Information Management and Technology
KPI	Key Performance Indicators
KSF	Knowledge and Skills Framework
LAA	Local Area Agreement
LDP	Local Delivery Plan
LoS	Length of Stay
LTFM	Long Term Financial Model
MRSA	Methicillin Resistant Staphylococcus Aureus
NHSLA	National Health Service Litigation Authority
OD	Organisational Development
OLM	Oracle Learning Management
PBC	Practice Based Commissioning
PCT	Primary Care Trust
PRH	Princess Royal Hospital
PROMs	Patient Reported Outcome Measures
R&D	Research and Development
RACP	Rapid Access Chest Pain
RSH	Royal Shrewsbury Hospital
SHA	Strategic Health Authority
SWOT	Strengths, Weaknesses, Opportunities, Threats

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