

Reporting to:	Trust Board – Public Session
Date	Thursday 3 May 2018
Paper Title	Chief Executive's Overview
Brief Description	<p>Workforce:</p> <ul style="list-style-type: none"> • Consultant Appointments • AED Staffing • Medical Staffing • Nurse Ward Pilot • Health Education England • Wolverhampton University • Skills Lab <p>Quality & Safety:</p> <ul style="list-style-type: none"> • National Patient Safety Finalist • Stranded Patients/Super Stranded • UCC/CDU @ PRH • Ophthalmology • Essential Fire Work in Ward Block • Learning from Maternity <p>Performance:</p> <ul style="list-style-type: none"> • AED Improvement • RTT/Cancer/Diagnostics • Easter – 'Lets Crack It' • Sustainability
Sponsoring Director	Simon Wright
Author(s)	Simon Wright
Recommended by (Tier 2 Committee)	
Previously considered by (consultation/communication)	
Link to strategic objectives	
Link to Board Assurance Framework	
Freedom of Information Act (2000) status (select one)	<input checked="" type="radio"/> This document is for full publication <input type="radio"/> This document includes FOIA exempt information <input type="radio"/> This whole document is exempt under the FOIA
Recommendation (select one or more)	<input type="checkbox"/> Decision <input type="checkbox"/> Approve <input checked="" type="checkbox"/> Note

Strategy	Strategic objectives	BAF risks
PATIENT AND FAMILY	Patient and Family 1) Deliver a transformed system of care and partnership working that consistently delivers operational performance objectives	<ul style="list-style-type: none"> ○ If we do not work with our partners to reduce the number of patients on the Delayed Transfer of Care (DTC) lists, and streamline our internal processes we will not improve our 'simple' discharges. Identified Nov 2014 (RR 951) ○ If we do not achieve safe and efficient patient flow and improve our processes and capacity and demand planning then we will fail the national quality and performance standards Identified April 2012 (RR 561)
VISION The Safest, Kindest Care in the NHS	Vision: Safest, kindest 2) Develop innovative approaches which deliver the safest and highest quality care in the NHS causing zero harm 3) Deliver the kindest care in the NHS with an embedded patient partnership approach	<ul style="list-style-type: none"> ○ If there is a lack of system support for winter planning then this would have major impacts on the Trust's ability to deliver safe, effective and efficient care to patients. Identified Oct 2016 (RR 1134) ○ If we do not have the patients in the right place, by removing medical outliers, patient experience will be affected. Identified March 2017 (RR 1185)
MISSION Healthiest Half Million Population on the planet	Mission: healthiest half million 4) Build resilience and social capital so our communities, including our staff, live healthier and happier lives and become the healthiest 0.5 million on the planet	<ul style="list-style-type: none"> ○ If we do not develop real engagement with our staff and our community we will fail to support an improvement in health outcomes and deliver our service vision. Identified March 2017 (RR 1186)
LEADERSHIP Innovative and Inspirational Leadership that Delivers our Vision	Leadership: innovative & inspirational 5) Through innovative and inspirational leadership achieve financial surplus and a sustainable clinical services strategy focussing on population needs	<ul style="list-style-type: none"> ○ If we are unable to implement our-clinical service vision in a timely way then we will not deliver the best services to patients. Identified April 2012. (RR 668) ○ If we are unable to resolve the structural imbalance in the Trust's Income & Expenditure position then we will not be able to fulfil our financial duties & address the modernisation of our ageing estate & equipment. Identified Sept 2012 (RR 670) ○ If we do not deliver our CIPs and budgetary control totals then we will be unable to invest in services to meet the needs of our patients. Identified March 2017 (RR 1187)
OUR PEOPLE Values into Practice	Our People: Values into Practice 6) Value our workforce to achieve cultural change by putting our values into practice to make our organisation a great place to work with an appropriately skilled fully staffed workforce	<ul style="list-style-type: none"> ○ If we do not get good levels of staff engagement to get a culture of continuous improvement then staff morale & patient outcomes may not improve Identified April 2012 (RR 423) ○ Risk to sustainability of clinical services due to shortages of key clinical staff. Identified March 2014 (RR 859)

