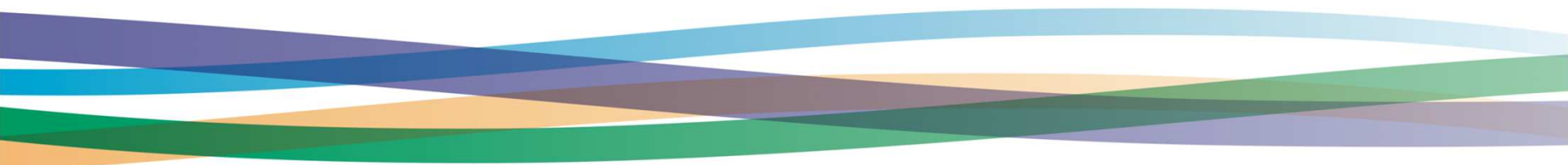


A vision and strategic direction for  
**Sherwood Forest Hospitals NHS FT**



Our **vision** is to deliver....

# Outstanding, personalised and efficient care

So we  
**prioritise**....

## PEOPLE

(patients and staff)

- *Continuously improving patient outcomes & experience*
- *Clinically-led, valuing mental & physical health equally*
- *Always involving patients, carers, staff & communities*
- *Promoting staff & public health & wellbeing*

## PARTNERSHIPS

(health and social care)

- *Working together to provide care closer to home*
- *Developing clinical networks to sustain local services & facilitate transfers of care to specialist centres*
- *Making the most of our clinical and non-clinical support services*
- *Improving access to services, 7 days a week*

## PRODUCTIVITY

(value for money)

- *Safely reducing the time patients spend in hospital*
- *Developing & retaining our workforce, reducing our reliance on temporary staff*
- *Making the best use of our resources and eliminating waste*
- *Getting it right first time*

Working to the  
Quality for All  
**values**....

**C**  
Communicating  
and working  
together

**A**  
Aspiring and  
improving

**R**  
Respectful and  
caring

**E**  
Efficient and safe

## Where are we on this journey to achieving *Outstanding, personalised and efficient care?*

### PEOPLE

(patients and staff)

CQC praised us for:

- Our caring **staff** who go the extra mile for **patients**
- Our **leadership** and **development** programmes
- Specific initiatives that improve **patient experience**, such as the dementia friendly ward

### PARTNERSHIPS

(health and social care)

Collaborations include:

- **Stroke** partnership
- **Cancer** network
- **Pathology** alliance

We need to look at **other** partnerships to support:

- **Sustainable** services
- Reductions in **avoidable admissions** & delayed transfers of care
- Care closer to **home**

### PRODUCTIVITY

(value for money)

We need to:

- Understand the **efficiency** and **viability** of each of our services
- Take action to **improve** efficiency and **productivity**
- Implement and apply **financial controls** across the organisation

## Underpinned by our values and behaviours...

<b>C</b>	<b>Communicating</b> and <b>working together</b>	<b>Share information</b> openly and honestly and keep people informed
		<b>Listen and involve</b> people as partners and equals
		<b>Work as one team</b> inside our organisation and with other organisations
<b>A</b>	<b>Aspiring</b> and <b>improving</b>	<b>Set high standards</b> for ourselves and each other
		<b>Give and receive feedback</b> so everyone can be at their best
		<b>Keep improving</b> and aspiring for excellence
<b>R</b>	<b>Respectful</b> and <b>caring</b>	<b>Treat everyone with courtesy and respect</b> , help people to feel welcome in our organisation
		<b>Show care and compassion</b> and take time to help
		<b>Support and value each other</b> and help people to reach their potential
<b>E</b>	<b>Efficient</b> and <b>safe</b>	<b>Competent and reassuringly professional</b> so we are always safe
		<b>Reliable and consistent</b> so we are always confident
		<b>Efficient and timely</b> and respectful of others' time

Outstanding, personalised and efficient care

## What will the future look like in mid-Nottinghamshire?

### What we know:

- There is a need for a range of local acute services providing outstanding, personalised and efficient care
- There is a need for greater integration and coordinated care as described by Better Together
- Increased investment in community and primary care services will reduce the demand for hospital-based services
- Greater efficiencies will continue to be required from all services, wherever they are provided
- We will need to replace our theatres, critical care and diagnostic imaging services in the next fifteen years

### What we don't know:

- What organisational structure will support integrated service provision in future – will service integration lead to mergers?
- How our high quality estate will be used as the demand for hospital services reduces
- What the shape of primary and community services will be in the future, and whether this might bring a different flavour to services at Newark Hospital and Mansfield Community Hospital
- How clinical and non-clinical support services will be organised in future to support integrated care delivery

# Our journey over the coming years is not about revolution, it's about...

- Getting the basics right – doing the right thing, first time, every time
- Thinking about what we're doing and questioning whether it's adding value
- Listening to what our patients, carers and communities are telling us and responding positively and honestly

**Outstanding, personalised and efficient care**

## **If you work in services that support the emergency care pathways for medicine and surgery...**

### *You can expect:*

- Demand to steadily reduce over time as a range of community based services are developed and strengthened
- The number of wards dedicated to providing in-patient care to frail older people and those with long term conditions to reduce
- That you will be working more closely with, or as part of, the community services

*And we would ask you to consider:*

- How you will form the teams that will continue to provide hospital-based care
- What role you can play in supporting or providing community services
- How you will maintain the quality, safety and effectiveness of services provided in a different way.



## If you work in women's or children's services...

### *You can expect:*

- That the Trust will continue to offer choice and support to local women in having their children, both in hospital and community settings
- That neo-natal care will continue to be provided here as part of a network of care delivery to those babies who require it
- That there will be a range of children's services available to serve the needs of the majority of children and young people, and to help them through the transition to adulthood for those with long term conditions.

*And we would ask you to consider:*

- How you will know where the limits of safe and effective care lie in the context of local service provision
- How you will enable patients and families to make informed choices about their care and facilitate them exercising these choices
- How you will actively engage in clinical networks in order to support local service provision optimally

## **If you work in one of the larger surgical or elective medical specialties...**

### *You can expect:*

- The demand for your service to reduce to an extent, as GPs manage their referral practice more rigorously
- The quality of referrals to improve as a consequence of the above
- To be challenged to move some components of your service into community settings where appropriate

*And we would ask you to consider:*

- How you will develop your service in the future in terms of sub-specialisation and the workforce
- What role you can play in supporting or providing services in the community
- How you will use the theatres, clinics and supporting infrastructure in our hospitals most effectively and efficiently
- How you will enrich the ambulatory and day case elements of your service
- What you need to do to secure the loyalty of local patients and GPs, so that they choose to use our hospitals as their first preference

## If you work in one of the smaller surgical or elective medical specialties...

### *You can expect:*

- To be challenged about the safety and sustainability of your service

### *And we would ask you to consider:*

- How you operate as part of a wider clinical network to remain stable and resilient
- How you will shape your service to strike a balance between local and centralised provision

## If your service supports people with long term conditions...

### *You can expect:*

- To be working more closely with primary and community care services to support your patients
- To see the focus of care moving away from our hospitals

### *And we would ask you to consider:*

- How you will take a proactive role in creating new models of service built around the needs of patients

## If you work in a clinical support service...

### *You can expect:*

- To be challenged to provide your service equitably in response to demand on every day of the week and at every hour of the day – particularly to support emergency pathways

### *And we would ask you to consider:*

- How to optimise your efficiency in responding to demand
- Whether your service operates at sufficient scale, and what options for consolidation might exist

## If you work in a non-clinical support service...

### *You can expect:*

- To be challenged to change and evolve to support different models of service delivery within our hospitals and in community settings

### *And we would ask you to consider:*

- How you will engage with the clinical services to respond to their needs
- How you will use enabling technology to make your service more efficient and cost-effective



## ...and it's about...

- Pulling together as a team – it's the most certain way of creating a sustainable future
- Each of us having a unique contribution to make
- Caring for one another and embodying mutual support and respect

It is within our grasp to be one of the safest and highest performing Trusts in the country, providing **Outstanding, personalised and efficient care**



**Outstanding, personalised and efficient care**

**“In order to succeed, we must first  
believe that we can”**

*Nikos Kazantzakis*

**Vision**

**Outstanding, personalised  
and efficient care**

**Priorities**

**PEOPLE**  
(patients and staff)

**PARTNERSHIPS**  
(health and social care)

**PRODUCTIVITY**  
(value for money)

**Values**

**C**  
Communicating  
and working  
together

**A**  
Aspiring and  
improving

**R**  
Respectful and  
caring

**E**  
Efficient and  
safe

