

# Sherwood Forest Hospitals NHS Foundation Trust (SFH) 2022/23 Strategic Priorities Quarter 2 Update

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## 1. Summary – ‘Q2 Position on a Page’

Ref	2022/23 Trust Priority	Executive Lead	Overall RAG Qtr. 1	Overall RAG Qtr. 2	Change to Previous Qtr.
1.1	Develop an action plan to re-launch Family and Friends feedback, plus develop a framework for assurance (on actions taken).	Chief Nurse			↔
1.2	Improve the Quality and Safety of the services we provide to children with complex needs.	Medical Director	Update will be provided in Q2		n/a
1.3	Achieve the levels of waiting times as identified in the 2022/23 plan and trajectories.	Chief Operating Officer			↑
1.4	Work with all partners to reduce the number of patients who are delayed moving to their onward destination outside of SFH.	Chief Operating Officer			↔
2.1	Delivery of the SFH Green Plan and provide support to deliver the ICS Green Plan.	Chief Financial Officer			↓
2.2	To embed and enhance the current offer of support regarding the Mental and Physical Wellbeing of our Colleagues.	Director of People			↔
2.3	Design and deliver a recruitment and retention programme for maternity; to right size the service and enable the delivery of the Continuity of Carer Health Inequalities service delivery model (Maternity Transformation).	Chief Nurse			↔
3.1	Develop and Implement a Strategic workforce Plan for SFH in collaboration with the ICS.	Director of People			↔

### Overall RAG Key

	<b>On Track</b> - no issues to note.		<b>On Track</b> – action underway to address minor issues		<b>Off Track</b> – action underway to address minor issues
	<b>Off Track</b> – action underway to address major issues		<b>Off Track</b> – issues identified no action underway		<b>Off Track</b> – issues not identified and no action underway

Ref	2022/23 Trust Priority	Executive Lead	Overall RAG Qtr. 1	Overall RAG Qtr. 2	Change to Previous Qtr.
3.2	Respond to the 2021 NHS Staff Survey. Identify Key Focus Areas.	Director of Culture and Improvement Director of People			↔
4.1	Successfully implement and optimise the use of EPMA.	Medical Director			↔
4.2	Develop a refreshed Digital Strategy.	Medical Director			↓
4.3	To introduce an Innovation Hub across the Mid Notts Place Based Partnership.	Director of Culture and Improvement Director of Strategy & Partnerships (tbc)			↓
5.1	Delivery of the SFH Transformation & Efficiency Programme that supports the delivery at PCB/ICP level.	Director of Culture and Improvement. Chief Financial Officer			↓
5.2	Be a key partner in the development of the Provider Collaborative.	Chief Executive			↔
5.3	Shape and define a new SFH Trust 5-year strategy (2023-2028) working with ICS partners.	Director of Strategy and Partnership			↔
5.4	Continue to progress Pathology Network initiatives alongside NUH (and across the region where required).	Director of Strategy and Partnership			↔

### Overall RAG Key

	<b>On Track</b> - no issues to note.		<b>On Track</b> – action underway to address minor issues		<b>Off Track</b> – action underway to address minor issues
	<b>Off Track</b> – action underway to address major issues		<b>Off Track</b> – issues identified no action underway		<b>Off Track</b> – issues not identified and no action underway

2. Detailed Quarter 2 Update

Ref	2022-23 Trust Priorities	Executive Lead	SFH Governance	Measures of Success	Quarter 2 Update
1.1	<b>To Provide Outstanding Care</b> - Develop an action plan to re-launch Family and Friends feedback, plus develop a framework for assurance (on actions taken).	Chief Nurse	Quality Committee	<ul style="list-style-type: none"> <li>Action plan developed to re-launch Family and Friends feedback</li> <li><del>Design and implement a Community Gynae Service</del> <b>Establish assurance framework by the end of Qtr 3</b></li> </ul>	<ul style="list-style-type: none"> <li>The new system is implemented, and we have trained 149 users, including Compass colleagues, with unique role related access. Training continues.</li> <li><u>SMS Totals sent out</u></li> <li>June 40,001</li> <li>July - 34, 537</li> <li>August - 52, 544</li> <li>Inpatient areas are included (not previously)</li> <li><u>Response's</u></li> <li>inpatient - 516 (postcards) 1288 (online) and smartphone/app/tablet 378. Maternity 42 (online)</li> <li>Outpatients 49 (postcards) 2332 (online)</li> <li>ED 1453 (online)</li> <li>We are working on sending SMS to under-16s in collaboration with the Paediatric consultant, LAC, and CPPPC</li> <li>PET continues working with our volunteer colleagues who have returned and visit wards (KM&amp;NH) to help with engagement and collection of FFT data</li> </ul>

					<ul style="list-style-type: none"> <li>• Monthly reports are shared, all teams can access responses to focus on improvements</li> <li>• New QR codes as the old ones were not compatible with our new system.</li> <li>• A number of system changes have limited progress in community service. QR codes will be re-launched following amendment. The implication of the impact of these and the launch of new IT system should be complete at the end of November.</li> </ul>
1.2	<b>To Provide Outstanding Care</b> - Improve the Quality and Safety of the services we provide to children with complex needs.	Medical Director	Quality Committee	<ul style="list-style-type: none"> <li>• Appoint SFH lead to lead transition of complex paediatric patients into adult service via MDT forum by the end of Q2 2022/23</li> <li>• Support ICB to link SFH, NHCT and NUH transition MDTs by the end of Q3 2022/23</li> <li>• Develop business case for ICB wide transition nurse specialist team to support parents, patients and service development by the end of Q4 2022/23</li> </ul>	<ul style="list-style-type: none"> <li>• Associate Medical Director appointed to SFH role in Q1</li> <li>• Progressing system wide MDT's</li> <li>• System wide business case development awaited.</li> </ul>

1.3	<p><b>To Provide Outstanding Care</b> - Achieve the levels of waiting times as identified in the 2022/23 plan and trajectories.</p>	Chief Operating Officer	Quality Committee	<ul style="list-style-type: none"> <li>• 'Timely care' SOF metrics to be presented to Trust Board of Directors, which will illustrate performance (reported monthly) <i>(Note: this will also include system performance metrics)</i></li> </ul>	<ul style="list-style-type: none"> <li>• Month 5 SOF presented to Trust Board in October 2022</li> <li>• Number of patients on the incomplete RTT waiting list <b>rated Amber</b>. The RTT waiting list is made up of new and overdue review patients to ensure that they are not lost to follow up</li> <li>• Number of patients waiting 78+ weeks for treatment <b>rated Green</b>. Patients are tracked weekly through the elective care Patient tracking List (PTL) and a trajectory is in place at specialty level. The majority of specialties are ahead of plan with the remaining either able to improve in month or as a result of providing mutual aid to other organisations (NUH/UHL)</li> <li>• Number of patients waiting 104+ weeks for treatment <b>rated Green</b>. There are no SFH patients waiting over 104 weeks. Any over 104 wait patients are as a result of providing mutual aid to other organisations</li> <li>• Number of completed RTT Pathways (against Yr2019/20) <b>rated Green</b>. This is monitored against a trajectory at the weekly elective care PTL</li> </ul>
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1.4	<p><b>To Provide Outstanding Care</b> - Work with all partners to reduce the number of patients who are delayed moving to their onward destination outside of SFH.</p>	Chief Operating Officer	Quality Committee	<ul style="list-style-type: none"> <li>• 'Timely care' SOF metrics to be presented to Trust Board of Directors, which will illustrate performance (reported monthly) <i>(Note: this will also include system performance metrics)</i></li> </ul>	<ul style="list-style-type: none"> <li>• Month 5 SOF presented to Trust Board in October 2022</li> <li>• The local position continues to remain significantly above the agreed threshold of 22 delayed patients. The worsening position is a direct link to capacity issues within adult social care and care agencies.</li> <li>• Additional winter capacity remains open and there is a further national drive to support the roll out of Virtual Wards for early supported discharge.</li> <li>• The system D2A business case and trajectory have been signed off however there has been no clear sign of improvement. The SFH Transfer of Care Hub is due to open w/c 17 October 2022 which will significantly improve communication between system partners to expedite discharge to the most suitable care environment.</li> </ul>
2.1	<p><b>To Promote and Support Health and Wellbeing</b> - Delivery of the SFH Green Plan and provide support to deliver the ICS Green Plan.</p>	Chief Financial Officer	Executive Team Meeting	<ul style="list-style-type: none"> <li>• Embed Environmental Impact Assessment into all planning and investment case process by end of Q2 2022/23</li> <li>• Evidence that the SFH Green Plan has been promoted internally and externally, including public commitments by the Trust Board of Directors.</li> </ul>	<ul style="list-style-type: none"> <li>• Environmental Impact Assessment incorporated in the standard business case template and considered as part of the decision-making process.</li> <li>• Update on Green Plan and Net Zero ambitions provided to Trust Management Team scheduled in October 2022.</li> <li>• Bid submitted to Phase 3b of the Public Sector Decarbonisation Scheme (PSDS) to support heat decarbonisation and energy efficiency schemes (decision likely in 2022/23 Q4).</li> <li>• Further activities planned:             <ul style="list-style-type: none"> <li>○ Review of published ERIC (Estates Return Information Collection) data to assess performance compared to peers (Q3)</li> </ul> </li> <li>• Carbon Literacy and Sustainability Awareness training with the Board of Directors (Q3/Q4)</li> </ul>

2.2	<p><b>To Promote and Support Health and Wellbeing</b> - To embed and enhance the current offer of support regarding the Mental and Physical Wellbeing of our Colleagues.</p>	<p>Director of People</p>	<p>People, Culture and Improvement Committee</p>	<ul style="list-style-type: none"> <li>• Staff health and well-being SoF metrics to board each month (On-going)</li> <li>• Introduction of a dedicated Health and Wellbeing Approach by the end of Q2 2022/23</li> <li>• Embedded Health and Wellbeing Approach by the end of Q4 2022/23</li> </ul>	<ul style="list-style-type: none"> <li>• Development of focused Wellness Campaign to support the next few months with focus on Physical, Mental and Financial Wellbeing</li> <li>• Wellbeing framework being rolled out across the organisation to support with development of the Trust Wellbeing Strategy.</li> <li>• Schwartz rounds have been implemented and embedded with sessions undertaken online and face to face. Sessions have been focused on Women in the Workplace, Reflections from past 2 years and a focus session for Junior Doctors. This supported staff psychological wellbeing across the whole organisation.</li> <li>• Wellbeing Champion programme continues with 35 Wellbeing Champions in place since April 2022 to support staff and champion the Wellbeing agenda. Wellbeing champions support areas of work including menopause, financial wellbeing and physical health.</li> <li>• SFH Virtual exercise group (#SFHVEG) "Fitness for All" is well established via a Wellbeing Champion with over 700 members. Focus for September was Divisional step challenge.</li> <li>• Introduction of Thrive App with 200 registered from across SFH.</li> <li>• People Directorate and Wellbeing team supported walkarounds at peak times during heatwave with focused message on rehydrate and refuel as well as supporting general wellbeing at work during this time</li> <li>• Menopause work continues with a conference scheduled for 18<sup>th</sup> October 2022.</li> <li>• "Take a Pause for Menopause" sessions introduced for all staff to attend. This is confidential space to share experiences and ask questions.</li> <li>• Financial Wellbeing group established to support with proposals and initiatives to support staff financial wellbeing through winter. Initiatives include consideration of food banks, exploration of hardship funds, buy a meal/drink scheme.</li> <li>• Links have been made with Citizen Advice Bureau to support staff with advice and guidance. These close</li> </ul>
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					links developed include the offer of open appointments for staff to access Citizens advice off site and also on site once per month.
2.3	<b>To Promote and Support Health and Wellbeing</b> - Design and deliver a recruitment and retention programme for maternity; to right size the service and enable the delivery of the Continuity of Carer Health Inequalities service delivery model (Maternity Transformation).	Chief Nurse	Quality Committee	<ul style="list-style-type: none"> <li>• Delivery of Ockenden recommendations for Continuity of Carer (by end of Q4 2022/23)</li> </ul>	<ul style="list-style-type: none"> <li>• NHSE published a letter dated 21 September which clarified the situation relating to COC. They have indicated the national target to deliver this was removed. Local systems are asked to focus on the recruitment and retention and growth of the workforce</li> <li>• We continue to work toward delivering principle of CoC to all women but particularly those from vulnerable groups.</li> <li>• The Trust programme related to workforce continues with successful recruitment ongoing. We are delighted to have recently managed to gain registration for our second international midwifery recruit.</li> </ul>
3.1	<b>To Maximise the Potential of our Workforce</b> - Develop and Implement a Strategic workforce Plan for SFH in collaboration with the ICS.	Director of People	People, Culture and Improvement Committee	<ul style="list-style-type: none"> <li>• Resourcing SoF metrics to board each month (On-going)</li> <li>• Introduction of a dedicated Strategic Workforce Plan by the end of Q2 2022/3</li> <li>• Annual refresh of dedicated Strategic Workforce Plan by the end of Q4 2022/23</li> </ul>	<ul style="list-style-type: none"> <li>• Our Strategic People Plan was agreed at Trust Board in October 2022, and we have been meeting with clinicians to understand current workforce pressures. We have also been developing a template for the tactical people plans that we will use to provide service lines intelligence on their workforce and use for prioritising workforce pressures.</li> </ul>

3.2	<p><b>To Maximise the Potential of our Workforce</b> - Respond to the 2021 NHS Staff Survey. Identify Key Focus Areas.</p>	<p>Director of Culture and Improvement Director of People</p>	<p>People, Culture and Improvement Committee</p>	<p>A number of detailed metrics will be monitored via the People, Culture and Improvement Committee. These will be focused on:</p> <ul style="list-style-type: none"> <li>• <b>Valuing YOU</b>; enough staff to do my job, recognition and reward programme</li> <li>• <b>Caring about YOU</b>; reducing colleague experience of V&amp;A/BH from patients/users/colleagues</li> <li>• <b>Developing YOU</b>; improve quality of appraisals, fair career development</li> </ul> <p>Improvement trajectories have been set and a summary of performance will be reported to the Trust Board of Directors via quarterly updates throughout 2022/23.</p>	<ul style="list-style-type: none"> <li>• All commitment pillars have an allocated lead and working group in place</li> <li>• Trust commitments are shared routinely via all Trust communications channels with updates provided on a minimum of a monthly basis</li> <li>• August DPRs focussed on discussions with Divisions regarding their Cultural improvement progress and plans in line with the Trust commitment areas</li> <li>• Q2 pulse survey indicated some reduction in experience compared to previous quarters but still benchmark high nationally against comparable Trusts</li> <li>• NSS22 launched successfully on 03.10.22 with communications and You Said Together We Did comms linking back to our 2021 commitment areas.</li> </ul>
4.1	<p><b>To Continuously Learn and Improve</b> - Successfully implement and optimise the use of EPMA.</p>	<p>Medical Director</p>	<p>Executive Team Meeting</p>	<ul style="list-style-type: none"> <li>• Roll out EPMA into surgery, incorporate VTE screening tool, develop and embed fluids module, scope requirements for ED EPMA module. Complete by end of Q2/beginning of Q3 2022/23</li> <li>• Develop and embed analysis and system reporting opportunities by the end of Q4 2022/23</li> </ul>	<ul style="list-style-type: none"> <li>• VTE screening tool launched and data capture and analysis feeding into SoF</li> <li>• Surgery live with ePMA</li> <li>• Fluid module roll out in piloting on 2 wards</li> <li>• Next areas to roll out in project board development</li> </ul>

4.2	<b>To Continuously Learn and Improve</b> - Develop a refreshed Digital Strategy.	Medical Director	Executive Team Meeting	<ul style="list-style-type: none"> <li>EPR Business case approved by NHSE by the end of Q4 2022/23</li> <li>Production of three-year digital investment plan in line with the Multi Year planning process (Dates to be published by NHSE)</li> </ul>	<ul style="list-style-type: none"> <li>EPR FBC approved by Trust Board and submitted to NHSE Frontline Digitisation</li> <li>Awaiting formal feedback on submission and business case development process</li> </ul>
4.3	<b>To Continuously Learn and Improve</b> - To introduce an Innovation Hub across the Mid Notts Place Based Partnership.	<p>Director of Culture and Improvement</p> <p>Director of Strategy &amp; Partnerships (tbc)</p>	People, Culture and Improvement Committee	<ul style="list-style-type: none"> <li>Introduction of an Innovation Hub, working in partnership with key ICS Partners, implemented by Q1 2022/23</li> <li>Key principles and year 1 aspirations defined and implemented by Q1 2022/23 (including methodology for quantifying impact on patient care)</li> </ul>	<ul style="list-style-type: none"> <li>As noted in the quarter 1 update, we have secured some joint funding with our Integrated Care System partners to develop a Nottinghamshire wide online hub. We are currently in the design stage.</li> <li>Our hub will be based on the Alder Hay Innovation Centre model (<a href="https://www.alderheyinnovation.com/">https://www.alderheyinnovation.com/</a>) which has been developed specifically to enable quick access to help, assistance and sources of online information and support. We have used part of the funding to commission specialist web design expertise.</li> <li>Discussions are ongoing with system partners to ensure that despite the hub being viewed as a system resource, we maintain respective local identities. This will help promote local innovation and encourage individuals with relatively small innovative ideas to seek help in the development, implementation, and evaluation of their ideas.</li> <li>We anticipate that the design stage will be complete shortly, following which implementation can begin.</li> </ul>

5.1	<p><b>To Achieve Better Value</b> - Delivery of the SFH Transformation &amp; Efficiency Programme that supports the delivery at PCB/ICP level.</p>	<p>Director of Culture and Improvement. Chief Financial Officer</p>	<p>Finance Committee</p>	<ul style="list-style-type: none"> <li>• Deliver Year 1 of the 2022-25 Transformation and Efficiency Programme ('the Programme') by 31st March 2023</li> <li>• Deliver Financial Improvement element of the Programme by 31st March 2023, ensuring it is delivered on a recurrent basis</li> <li>• Have in place a plan for the delivery of Year 2 of the Programme (plan developed Q3 2022/23, implementation begins Q4 2022/23)</li> <li>• Continuously review delivery milestones ensuring that changes are enacted where there is a risk of under delivery (ongoing and overseen by the Transformation and Efficiency Cabinet)</li> <li>• Proactively contribute to the ICS/PBP Transformational Programmes of work, ensuring all collaborative opportunities are exploited ((ongoing and overseen by the Transformation and Efficiency Cabinet)</li> </ul>	<ul style="list-style-type: none"> <li>• Although a three-year Transformation and Efficiency Programme has been developed and is being implemented, which includes a £11.7m financial improvement component; the current forecast is that £4.0m will be delivered.</li> <li>• Urgent mitigation work is therefore underway, focusing on the following areas:             <ol style="list-style-type: none"> <li>a. Discretionary spend and non-pay budgets.</li> <li>b. Refreshed benchmarking and comparative data (including Model Hospital).</li> <li>c. Maximising elective activity income opportunities.</li> <li>d. System opportunities.</li> <li>e. Creating additional divisional support.</li> <li>f. Governance and delivery models.</li> </ol> </li> <li>• Associate Director of Transformation continues to remain an active member of various System Transformation Groups.</li> </ul>
5.2	<p><b>To Achieve Better Value</b> - Be a key partner in the development of the Provider Collaborative.</p>	<p>Chief Executive</p>	<p>Executive Team Meeting</p>	<ul style="list-style-type: none"> <li>• Provider Collaborative Formally Established by 1st July 2022</li> <li>• PC priorities established by 30th September 2022</li> <li>• Formal review of PC achievements reported to SFH and System Boards March 2023</li> </ul>	<ul style="list-style-type: none"> <li>• SFH is a proactive contributor to the Provider Leadership Board and Provider Collaborative Work Programme.</li> <li>• CEO and Chair are key members of the Nottingham and Nottinghamshire Provider Collaborative Chairs and CEO Group.</li> <li>• Priorities now established</li> <li>• NUH CEO is Executive Lead and now in post</li> <li>• Managing Director now appointed and start date to be confirmed.</li> </ul>

5.3	<p><b>To Achieve Better Value</b> - Shape and define a new SFH Trust 5-year strategy (2023-2028) working with ICS and wider partners.</p>	Director of Strategy and Partnership	Executive Team Meeting	<ul style="list-style-type: none"> <li>• Strategy agreed at SFH Board November 2022</li> <li>• Launch of new strategy completed by 31st January 2023</li> </ul>	<ul style="list-style-type: none"> <li>• Board time out held 13/14 October to shape the strategy – update on progress presented and discussed.</li> </ul>
5.4	<p><b>To Achieve Better Value</b> - Continue to progress Pathology Network initiatives alongside NUH (and across the region where required).</p>	Director of Strategy and Partnership	Executive Team Meeting	<ul style="list-style-type: none"> <li>• Programme Delivery in line with existing programme plan and national planning expectations (<b>to be refined once Director of Strategy and Partnership commences</b>)</li> </ul>	<ul style="list-style-type: none"> <li>• Attended first Pathology network board – now need to establish the right level of resource to represent the trust and ensure we are part of the decision making for future service provision.</li> <li>• Clinical representation has been consistent through the divisional clinical director.</li> </ul>

*Appendix A*

**Timetable for Updates**

<b>Period</b>	<b>Trust Board of Directors Meeting</b>
<u>Quarter 2</u> (July 2022 – September 2022)	3 <sup>rd</sup> November 2022
<u>Quarter 3</u> (October 2022 – December 2022)	2 <sup>nd</sup> February 2023 <i>(TBC)</i>
<u>Quarter 4</u> (January 2023 – March 2023)	4 <sup>th</sup> May 2023 <i>(TBC)</i>