1	RATEGIC PRIORITY 3 I INSPIRE EXCELLENCE	EXECUTIVE LEAD Andy Haynes													
	PROGRAMME/ACTION	LEAD MANAGER	BENEFITS REALISATION MEASURES / KPIs		KPI's - Ti	rajectory		MILESTONES					RAG	RISKS	COMMENTS
1	Foster an environment rich in innovation, discovery and learning			Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	19/20			
1	Plan and deliver a programme of seminars/masterclasses with experts and inspirational speakers drawn from a wide range of backgrounds and industries to help inspire, motivate and promote innovation and discovery.	CF	3 masterclasses/inspirational speakers held over 2018/19; in coordination with Service Improvement, Nursing and Organisational Development				*				*		G	If a budget cannot be agreed to fund external speakers, then this action may not be achieved. Mitigated by exploring opportunities for a joined up organisational approach across Service Improvement, Nursing and Organisational Development, and with regional partners	Inspirational speakers representing 'End PJ Paralysis' and 'Hello my name is' presented to staff in 2018. Dr Chris Turner, Clinical Lead for 'Civility Saves' planned for Q4 18/19. Budget to be agreed and future speakers/areas of focus to be scoped for 19/20.
1	Hold an annual Innovation Conference to showcase outstanding practice from within and outside the Trust, facilitating debate and promoting networking and collaboration	CF	Innovation Conference to be held in December 2018, linking in with the Clinical Leadership Development Programme and extending this to include other improvement projects IN 2019.			*				*			G	If a modest budget is not agreed to support this event (developing posters etc.) then staff may not feel engaged and supported to showcase their work	Multiple SFHFT QI projects showcased at East Midlands QI Network event in October 18. (2 main presentations and 4 posters). QI Showcase event was held in December 2018 delivered by Clinical Leadership Programme, This will be extended to any staff that have completed projects, with a QI event held in 2019.
10	Develop, implement and support an inclusive 'Knowledge Centre', maximising access to best practice, widening access to knowledge resources, horizon scanning, filtering and distributing new knowledge throughout the Trust.	CF	Knowledge Centre to be in place for October 2018, to support the new SFH Quality Improvement approach			*				*			R	The proposed system is dependent on external IT links to enable the storage of improvement information, and this may influence the proposed launch date.	SFH QI approach launched with staff in July 2018. ORDA - the proposed IT vehicle for hosting the Knowledge Management system has been experiencing glitches that are being worked on; it is a regional resource and SFHFT has no influence over the timescales. There is a piece of preparatory work being undertaken to identify projects and to standardise the outputs to compliment the system. New date expected in Q1 19/20.
11	Establish service improvement toolkits and make them available through the Knowledge Centre	CF	The SFH and NUH developed 'My Bright Idea' Quality Improvement website to be used as the vehicle to train staff in toolkits to support them to make improvements in their service			*				*			А		Improvement toolkit currently being cascaded as part of Sherwood Six Steps Toolbox Talks. The more targeted 'My Bright Idea' site is already developed, but health partners at NUH and Notts Healthcare have expressed an interest in using this site as a joint OI platform to support cross boundary working (in support of the joint OSIR training in QI taking place). This will need some further development. It is also influenced by the delay in the Knowledge Centre. New launch date in QI 2019 anticipated.
111	Establish an internal consultancy and community of experts to guide innovation and increase the likelihood of success	CF	A 'joined up' service improvement approach with Service Improvement, Programme Management Office, Organisational Development, Nursing and Governance will be piloted in Theatres from July 2018. Specific KPIs will be agreed, but this approach will amalgamate experts from multiple disciples to support service improvement		*				*				А	The SFH QI strategy relies on joining up current resources to achieve the outcomes. If there is no will, or no capacity to support this, then it will not achieve its outcomes. Furthermore, there is currently only 1 person within the Improvement team, pending recruitment of another post in 2019. This has impacted on the timescale to deliver this work.	The Patient Safety Culture work started in Theatres in August 2018 and staff feedback and conversations are on-going. Further work is being undertaken to develop a team of experts, as part of the 'QI Pow Wow' sessions which start in February 19 in order to solidify current networks. Internal consultancy work has been undertaken in 2018 in terms of reviewing the complaints process, mapping two Cancer pathways, supporting the Day Case Hips project and fractured neck of femur pathway in ED. This programme is also directly supporting the Chief Nurse Fellows and the Clinical Leadership Development nurses in terms of QI training and coaching.

11	. Develop and launch an innovation strategy in support of the clinical strategy and strategic priorities	CF	New SFH Quality Improvement approach launched in July 2018	*		*		G	If there is no support or commitment to the 'Sherwood Six Step; QI approach across all levels of the organisation, then global research shows that it will not deliver the benefits to support organisational improvement
100	Identify service improvement champions and train them in the latest service improvement methods	CF	Bl-monthly QJ Toolbox talks planned from September 18. Aim to increase SFH regional 'Quality Fellows' to 10 by December 18. Aim to raise 'QSIR Practitioners' (a nationally recognised QJ qualification) to 10 by December 2018. Working jointly with Greater Nottingham STP partner organisations to deliver joined up QJ training across Greater Nottingham over 2018/19.	*		*		G	If the capacity to deliver QJ training is not increased, then SFH may not be able to build capability at scale and pace. This is being mitigated by supporting the QSIR training programme with community partners, as part of an STP approach. If staff are not released to undertake QJ training, or do not see it as a priority, then this also impacts negatively on building QJ skills across the organisation
11	Create a structured programme of external visits aligned with organisational needs and ambition - targeting industries and organisations that have inspired their workforce and overcome challenges to be successful in their field.	CF	Aim for 3 external visits annually (2 by end of 2018/19)		*		*	G	If staff are not released to support these visits, then this may mitigate any impact. If a budget is not agreed to support these visits, then this may mitigate any impact. Staff from SFHFT visited The Sheffield System of partners working in October 18 which was hosted by the Q Commu Further visits have been planned for 2019 and furthe suggestions will be sought as part of the 'QI Pow Wow sessions in February 2019