

Strategic Objective 1: To provide outstanding care

Over the next five years we will.....	In 2019/20 our progress will be....	Exec Lead	Q1 Update
Give patients, carers and families a positive experience	An increase in the opening hours and number of patients treated by our Ambulatory Emergency Care Unit	SiB	Q1 18/19 = 1,332 patients Q1 19/20 = 1,855 patients
	A reduced volume of patients cancelled within six weeks for non-clinical reasons	SiB	Q1 18/19 = 3.6% Q1 19/20 = 3.5%
	A Friends and Family Test (FFT) with an average >98% recommendation for Inpatient and Maternity Care and >94% recommendation for A&E and an increased sample rate to upper quartile for both	AH	Q1 Recommendation rates: <ul style="list-style-type: none"> • Inpatient = 97.6% • Maternity = 92.4% • A&E = 92.5% Q1 Response rates: <ul style="list-style-type: none"> • Inpatient = 31.2% (target = 24.1%) • A&E = 12.5% (target = 12.8%)
Provide safer and clinically effective care	A reduction in the number of Serious Incidents by 50% with the aim of becoming the lowest for any East Midlands acute Trust	SuB	STEIS reportable incidents: Q1 18/19 = 8 Q1 19/20 = 6
	Never events reduced by 50% with the aim of having none	SuB	Q1 18/19 = 0 Q1 19/20 = 0
	Benchmarking in the top quartile for lowest readmission rates for non-elective care	SiB	Q1 not yet available, but readmissions report has been provided to PSQG and QC and work is progressing within ED, Gynaecology and Geriatrics as the specialties who look to be outliers.
Improve coordination across health and social care	85% of patients at the end of their life discharged to their preferred place	SuB	Q1 = 79% (across mid-Nottinghamshire).
	Working with partners to increase the number of patients who safely receive their rehabilitation at their home	SiB	HFID programme started on 20/5/19 with community partners and results will be assessed throughout Q2.

Strategic Objective 2: To promote and support health and wellbeing

Over the next five years we will.....	In 2019/20 our progress will be....	Exec Lead	Q1 Update
Support people to have healthier lifestyles	At least 80% of people admitted to our hospitals who smoke offered funded tobacco treatment services	SuB	Q1 not yet available - data will be available for Q2.
	Our Health Heroes programme launched, to promote health and wellbeing amongst colleagues and this will support an improvement in the colleagues' health and wellbeing survey scores	JB	Programme details have been agreed, with a plan to introduce Health Heroes as part of the Health and Wellbeing week in September 2019.
	Making it easier for colleagues and patients to travel to Sherwood hospitals in ways that support a healthier lifestyle and the environment	RM	Car parking plan launched and live by end of Q2. This includes making it easier for colleagues to car share, use public transport, cycle or walk to work.
Help to improve mental wellbeing including reducing loneliness	The rate of colleagues off due to anxiety, stress or depression will be no more than 0.8% of our overall sickness absence	JB	Q1 = 0.96%.
	An increase to the number of requests to the Employee Assist Programme	JB	Q1 data not yet available – data will be available for Q2.
	As a supporter of the “Campaign To End Loneliness” we will take practical steps to reduce feelings of loneliness	SuB	A focus group has been established and a there is a standing agenda item at the Children’s and Young People’s board. The dementia café has been relaunched, and Mental Health first aid training has commenced.
	Community gardens opened producing fresh fruit and vegetables on our three hospital sites	RM	Raised garden bed at KMH has been planted and work has begun on the garden at Mansfield Community Hospital. We also have a garden at Newark Hospital.
Work with partners to reduce health inequalities for those in greatest need	Working with partners to expand our street health programme	SuB	Four Street Health events have now been held, with increasing engagement and contribution from partners and other services. Board story presented at August Board.
	Measureable outcomes developed with partners	SuB AH	An ICS outcomes framework has been developed, which includes ambitions, outcomes and measures. 73 ‘measures’ have been developed enabling a regular assessment of the impact of the work of the ICS.

Strategic Objective 3: To maximise the potential of our workforce

Over the next five years we will.....	In 2019/20 our progress will be....	Exec Lead	Q1 Update
Attract and retain the right people	A 10% vacancy rate for band 5 registered nurses by the end of the year	JB	At the end of Q1, performance was 16.3%. The Trust is on track to receive 47 newly qualified nurses in autumn 2019.
	Agency spend within the NHSI limit	JB	Q1 = £3.135m. This is £0.817m below the ceiling for the quarter.
	Colleague turnover below 0.90 per month	JB	At the end of Q1, performance was 0.88%.
	<7.3% of colleagues who are temporary	JB	At the end of Q1, performance was 7.4%.
Have an engaged, motivated and high performing workforce	Staff survey scores as follows: <ul style="list-style-type: none"> • In top five acute Trusts for overall engagement • In top five acute Trusts for colleagues motivation at work • In the top five acute Trusts for colleagues recommending Sherwood as a place to work or receive care • +65% response rate • <7% staff experiencing discrimination at work • In the top five acute Trusts for the quality of our appraisals • In the lowest 20% of acute Trusts for colleagues feeling unwell due to work related stress 	JB	End of year measure only.
	The WRES (Workforce Race Equality Standard) and new WDES (Workforce Disability Equality Standard) used to better understand the experiences of all our colleagues and action taken where required.	JB	The WRES and new WDES were signed off at the People OD and Culture Committee in July 2019.
Develop and nurture our teams of colleagues and volunteers	At least 70 apprentices in post	JB	89 apprenticeships are currently being undertaken across the Trust as of the end of Q1 2019.
	Appraisal compliance at 95%	JB	At the end of Q1, performance was 95%.

Strategic Objective 4: To continuously learn and improve

Over the next five years we will.....	In 2019/20 our progress will be....	Exec Lead	Q1 Update
Adopt evidence based best practice	Good practice learned and shared through our 'buddying' relationship with Queen Elizabeth Hospital King's Lynn	RM	We are supporting QEHLK with their governance, CQC preparation, clinical leadership and change management in particular. Colleagues have visited KL and KL colleagues have been here. We continue to check that no one individual or team are overstretched and we have an agreed contract with NHSI for the work we are doing.
	90% of our clinical specialties with their compliance assessed with NICE guidelines	AH	Q1 = 80% of assessments completed and returned.
Make the best use of information and digital technology	Paper-based patient assessments replaced with electronic ones, as a step towards digitised patient health records		Q1 has seen the launch of three digital assessments, replacing current paperwork (dementia, falls and nutrition).
	Our electronic prescribing system purchased and built, in preparation for rollout in 2020		Detailed discussions continue with system suppliers to understand optimal option. Still awaiting national decision on funding, but project to progress regardless. Proposal to be developed and presented to Executive Team in Q2.
	A refreshed digital strategy		A project group established, with plans in development for engagement, commencing with stalls in KTC in the last week of July 2019. Strategy expected to be approved in Q3.
	Improved information sharing between health and social care professionals, citizens and patients so that better decisions are made about care and treatment		A supplier has been appointed to develop and deliver public facing digital services across the ICS to enable citizens to interact with their health record and health and social care professionals through the NHS App.
Use research, innovation and improvement for the benefit of our communities	An increase in the number of people participating in research	AH	Q1 18/19 = 837 Q1 19/20 = 461 (Q1 of 18/19 included a particularly high recruiting study, which explains the difference between the two years.)
	A location identified for a dedicated research facility, to enable a broader research offer	RM	Being considered as one of several options for vacated space in KTC. Options paper to go to Execs in Q2.

Strategic Objective 5: To achieve better value

Over the next five years we will.....	In 2019/20 our progress will be....	Exec Lead	Q1 Update
Become financially sustainable	A reduced deficit and our financial target met	PR	Financial Plan being met as at Q1. Risks identified to achieve 19/20 control total.
	Our Financial Improvement Plan delivered on a recurrent basis, demonstrating we have become more efficient	PR	Financial Strategy in final stage of development following external review.
	Financial delivery measured at a Mid Nottinghamshire level	PR	ICP Financial Plan and transformation programme in place.
Work with our partners across Nottinghamshire to deliver efficiencies	A redesigned outpatients service and reduced number of unnecessary patient visits created by working with commissioners	SB	The Outpatient transformation programme has commenced and currently has a pipeline plan to safely reduce 17,000 outpatient appointments during 19/20.
	Multi-year plans developed with partners to improve efficiency, based on available benchmarking information	PR	System wide benchmarking process under development.
Maximise the use of all our resources	>£10m invested in our estates, equipment and IT, including the purchase a state of the art Gamma Scanner, supported by charitable funds	PR	Complete as per 19/20 Capital Programme.
	A refreshed estates strategy including a developed plan for the renewal of our theatres and critical care unit at King's Mill Hospital	RM	Theatres & CCU – Strategic Outline Case in draft, ready for Board approval in September. OBC due in autumn. Estates strategy refresh due later in year.
	The improved financial efficiency of our services	PR	Best Value Review process now implemented.