

The Future of Healthcare Summary Five Year Strategy (2014 – 2019)



The health and social care economy can withstand the financial squeeze it faces over the next five years, if we are all prepared to give up our traditional ways of doing things! By working together and not as fragmented services (commissioners, providers of acute, mental and community health care, social services and the voluntary sector) we can all achieve so much more for our local communities. Shared planning and priorities are the way forward with the needs of the person being everyone's main focus not hampered by organisational barriers.

A shared vision presents huge opportunities to deliver integrated health and care services in a way that improves outcomes and the experience for individuals and reduces overall cost. WSFT is actively involved in developing new integrated models of care that over the next five years will lead to a reduction in the number of emergency admissions coming into West Suffolk Hospital and people receiving the right care in the right setting by professionals best suited to deliver the care they need.

We will continue to build on our excellent reputation for achieving key quality standards which matter to patients. WSFT was named Trust of the year 2013 for the Midlands and East of England region in the Dr Foster Hospital Guide. The accolades we receive are a testament to the professionalism and dedication of all our staff, clinical and non-clinical, who work so hard to provide the best possible services for our patients.

WSFT has seen its previously strong financial position deteriorate mainly as a result of reductions in the national tariff and sustained high levels of emergency activity. The financial challenges are set to remain for the duration of this strategy. However, working with West Suffolk Clinical Commissioning group (CCG) we believe that the programme of work outlined in our plans:

- Treating more patients locally
- collaboration with partners
- improved efficiency and transformation

along with our dedicated, hardworking staff we will see our financial position begin to recover. Most importantly we will maintain our excellent record for safe, high quality care and putting our patients first.

Roger Quince
Chairman



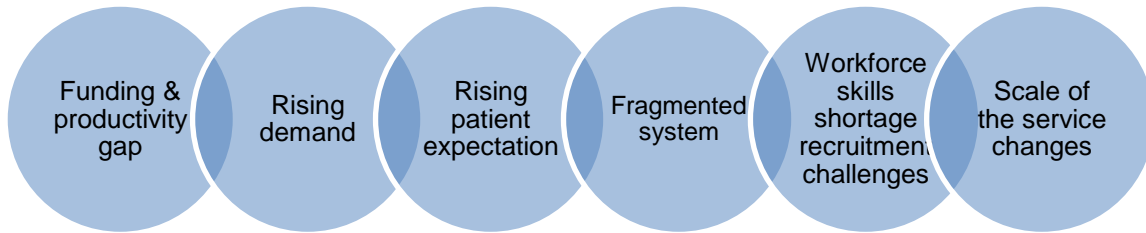
Mission Statement:

'Excellence in Healthcare – We will provide high quality, safe and caring services; and promote wellbeing'

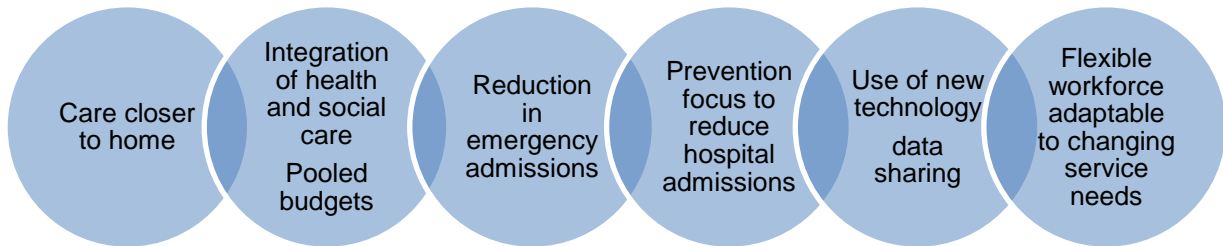
Strategic objectives:

- To be the healthcare provider of first choice by providing excellent quality, safe, effective and caring services
- To work with partners to develop integrated healthcare services to ensure that patients receive the right care, at the right time, and in the right place
- To be the provider of urgent and emergency care services for the local population
- To continuously improve service quality and effectiveness through innovation, productivity and promoting wellbeing in patients and staff
- To continue to secure, motivate, train and develop an engaged workforce which will be able to provide high quality patient focused services
- To deliver and demonstrate rigorous and transparent corporate and quality governance
- To provide value for money for the taxpayer and to maintain a financially sound organisation.

What the challenges are



What the future looks like to meet the challenges



Suffolk Health and Social Care

Suffolk is a predominantly rural county with an ageing population (second oldest in the country). In comparison with England it has a lower proportion of children and young people (up to age 44) and a higher proportion of middle aged and elderly people. Higher numbers of patients are living with long-term condition, many of which can be associated with urgent complications and an increasing number have two or more.

In Suffolk, the Health and Care Review is focusing on three areas of work:

- Health and Independence
- Urgent and Emergency Care
- Efficient Elective (planned) care

The outcome will provide the framework for the transformation which will start to address the need for services that:

- work effectively at weekends
- support patients being discharged from hospital
- make sure people get the help they need early to prevent unnecessary admission to hospital
- help patients to stay as well as possible with a good quality of life.

Suffolk's Clinical Commissioning Groups will be seeking the views of the public to inform the work of the Review. This includes services like NHS 111, out of hours, and community health services that will be coming up for tender during the term of this strategy.

Quality and Safety

WSFT encourages a "feedback culture" to flourish with patients honestly expressing their views. This wealth of opinion and insight from our patient, carers and staff can help us to improve our services and refresh our patient first standards.

The Board provides leadership in developing a culture of learning and continuous quality improvement with strong emphasis on clinical leadership. We will continue to promote an environment in which staff can voice concerns and make suggestions about improving patient care in a safe, supportive and confidential environment.

Quality Reports for the Board include a wide range of quality indicators which provide early warning of deterioration in performance and potential negative impact on quality. Quality themes are identified from incidents, claims, the Patient Advice and Liaison Service, inquests and national recommendations. For 2014/15 we are focusing in particular on: diabetes, sepsis and acute kidney injury (AKI).

We have been working to ensure our nursing, midwifery and care staffing is right and allows staff to deliver high quality care and the best possible outcomes for their patients. The Trust will continue to invest in additional nurses, where necessary, to ensure the new staffing guidelines are met. The Board receives monthly updates on workforce information and staffing capacity and capability.

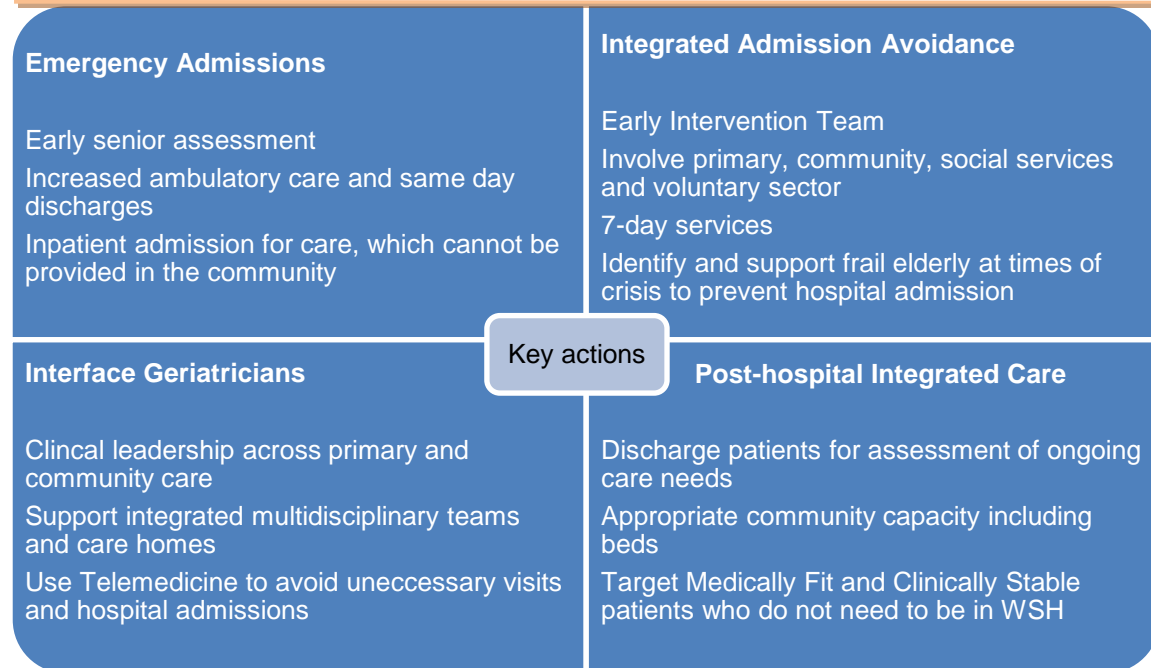
WSFT Transforming Services

Service transformation is taking place via two main programmes:

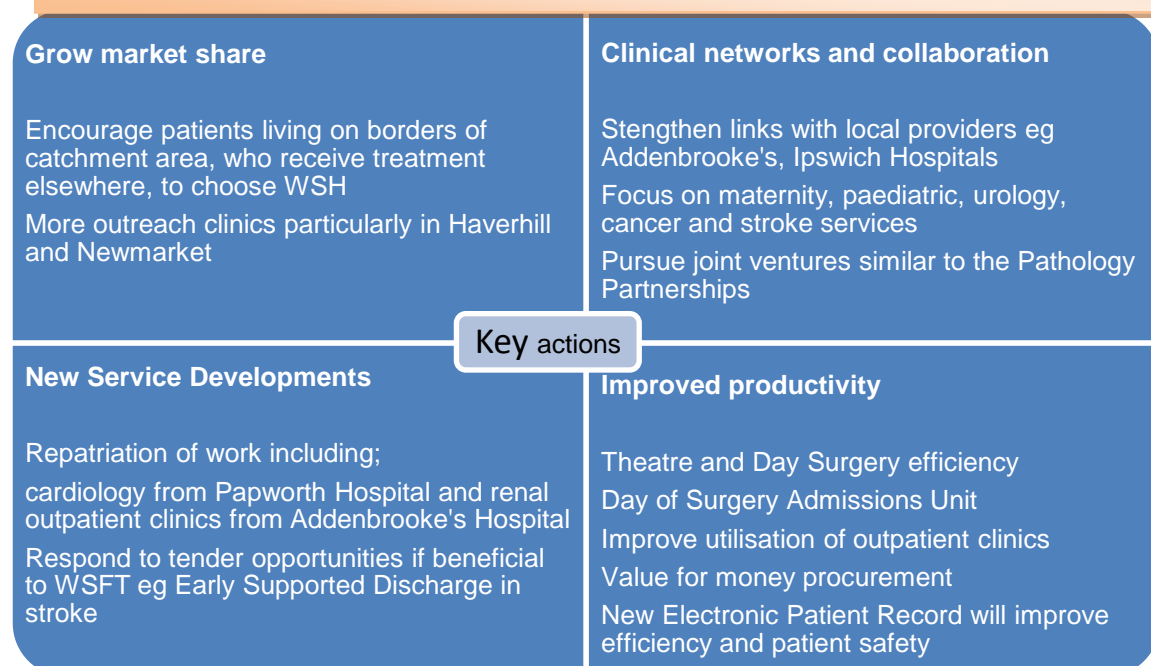
- Emergency Care Pathway, ECP
- Planned Care Pathway, PCP

WSFT's programmes are closely aligned with the Suffolk Health and Care Reviews on Urgent Care, Health and Independence and Efficient Planned Care and involve working in collaboration with partners across the local health and social care system.

ECP programme aims to improve the flow of patients across WSH; support a reduction in the number of emergency admissions, reduce length of stay and improve the patient experience. Released capacity provides an opportunity to accommodate additional inpatient planned activity.



PCP programme will focus on improved efficiency, productivity and income generation whilst maintaining and wherever possible improving safety, quality and the patient experience.



Finance and Facing the Future

Small hospitals should continue to play an “important role” in the NHS, Monitor has indicated after a new study found “no evidence” of poorer quality clinical performance when compared with larger providers. This is the conclusion of the foundation trust regulator’s review of the performance of all acute trusts with fewer than 700 beds, usually associated with incomes of less than £300m. Monitor’s findings were based on an analysis of data related to patient experience, clinical effectiveness and safety.

The regulator’s report *Facing the Future: Smaller Acute Providers* did however discover evidence that smaller hospitals may be more financially challenged and this could be driven by the move towards more intensive staffing models” in the wake of the Francis inquiry. Larger trusts are able to benefit from economies of scale not available to WSFT and other smaller organisations. They also benefit from other forms of income including specialist work, Research and Development and Education.

WSFT will look at innovative ways to respond to these challenges as outlined in this summary. The degree to which WSFT’s finances will recover over the next five years will depend on the success of these plans and factors outside the control of the organisation including national tariff deflation and a reduction in emergency activity, which is forecast to increase annually by 3% under the current model of care.

Our Workforce

A major challenge will be ensuring WSFT and the health system sustains and builds a talent pool capable of meeting the needs of the NHS in the future, maintaining standards whilst allowing for changes in service provision, including 7-day services and demand etc.

The need for multiple skills in an integrated health economy will require new training programmes and certification and there is the challenge of a finite availability of potential staff.

WSFT will look abroad to recruit staff having successfully recruited 60 qualified nurses from Portugal in 2013/14. Health Education East of England has been approached to support recruitment of medical registrars from Sri Lanka, to aid their training and development. The drive to reduce reliance on expensive temporary staff will continue.

New roles will be developed to cover the potential shortfall of doctors in training including; Advanced Nurse Practitioner and Physician Assistant roles. A leadership framework for all levels of staff will help to take WSFT forward with service development and the management of change.

Every opportunity will be taken to award and recognise our hard working staff and promote health and well-being. We will continue to actively engage with our staff and recognise that frontline staff are best placed to identify changes which can have an enormous impact on quality and productivity.

IT

WSFT’s vision for the future is one where computers are an integral part of everyday work for all staff: doctors, nurses, technicians, administrators and the patient. This will make healthcare more efficient, cost effective, safe, accessible and reliable.

A new comprehensive Electronic Patient Record (EPR), will replace the 19 year-old Patient Administration System (PAS) and 200 disparate systems, which do not all communicate with each other

The EPR, which will be implemented from April 2015, will communicate with other systems across health and social care to support data sharing and the best patient care.

Capital Projects

The capital programme will continue to be heavily focused on maintenance, upgrading and refurbishment.

The main developments will be:

- A Clinical Skills Unit to help make sure the next generation of doctors receive the best possible training
- Provision of an additional Birthing Pool, and a Bereavement Suite
- Cardiac catheterisation laboratory to be provided within the main hospital building
- The Central Sterile Services Department (CSSC) will be brought back onto the main WSH site. This will be subject to the Foundation Trust Financing Facility
- Replacing the current staff accommodation which is in poor repair in partnership with a housing association.