



## **Strategic Plan Document for 2014-19 Public Version**

**Great Ormond Street Hospital for Children NHS Foundation Trust**

# Strategic Plan guidance – Annual Plan Review 2014/15

The cover sheet and following pages constitute the Strategic Plan submission, which forms part of Monitor's 2014/15 Annual Plan Review (APR).

The Strategic Plan must cover the five-year period for 2014/15 to 2018/19. Guidance and detailed requirements on the completion of this section of the template are outlined in Section 5 of the APR

APR 2014/15 guidance is available [here](#).

Timescales for the two-stage APR process are set out below. These timescales are aligned to those of NHS England and the NHS Trust Development Authority, which will enable strategic and operational plans to be aligned within each unit of planning before they are submitted.

Monitor expects that a good strategic plan should cover (but not necessarily be limited to) the following areas, in separate sections:

1. Declaration of sustainability
2. Market analysis and context
3. Risk to sustainability and strategic options
4. Strategic plans
5. Appendices (including commercial or other confidential matters)

As a guide, we would expect strategic plans to be a maximum of 50 pages in length.

As a separate submission, foundation trusts must submit a publishable summary. While the content is at the foundation trust's discretion, this must be consistent with this document and covers as a minimum a summary of the market analysis and context, strategic options, plans and supporting initiatives, and an overview of the financial projections.

Please note that this guidance is not prescriptive. Foundation trusts should make their own judgement about the content of each section.

The expected delivery timetable is as follows:

|   |                     |
|---|---------------------|
| Expected that contracts signed by this date   | 28 February 2014    |
| Submission of operational plans to Monitor  | 4 April 2014        |
| Monitor review of operational plans   | April–May 2014      |
| Operational plan feedback date  | May 2014            |
| Submission of strategic plans<br>(Years one and two of the five-year plan will be fixed per the final plan submitted on 4 April 2014) | 30 June 2014        |
| Monitor review of strategic plans   | July–September 2014 |
| Strategic plan feedback date  | October 2014        |


## 1.1 Strategic Plan for y/e 31 March 2015–2019

The attached strategic plan is intended to reflect the Trust's business plan over the next five years. Information included herein should accurately reflect the strategic and operational plans agreed by the Trust Board.

In signing below, the Trust is confirming that:

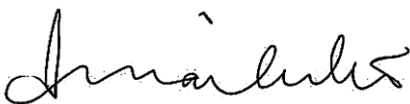
- The Strategic Plan is an accurate reflection of the current shared vision and strategy of the Trust Board having had regard to the views of the Council of Governors.
- The Strategic Plan has been subject to at least the same level of Trust Board scrutiny as any of the Trust's other internal business and strategy plans.
- The Strategic Plan is consistent with the Trust's internal operational plans and provides a comprehensive overview of all key factors relevant to the delivery of these plans.
- All plans discussed and any numbers quoted in the Strategic Plan directly relate to the Trust's financial template submission.
- The "declaration of sustainability" is true to the best of its knowledge.
- 

Approved on behalf of the Board of Directors by:

|                        |   |
|------------------------|---|
| <b>Name</b><br>(Chair) |  |
|------------------------|---|


Signature

Approved on behalf of the Board of Directors by:

|   |   |
|---|---|
| <b>Name</b><br>(Chief Executive<br>Julian Nettel) |  |
|---|---|

Signature

Approved on behalf of the Board of Directors by:

|  |   |
|--|---|
| <b>Name</b><br>(Chief Finance<br>Officer<br>Claire Newton) |  |
|--|---|

Signature

## 1.2 Declaration of sustainability

*The board declares that, on the basis of the plans as set out in this document, the Trust will be financially, operationally and clinically sustainable according to current regulatory standards in one, three and five years' time.*

**Confirmed**

### Contents

1. Overview
2. GOSH Strategy
3. Clinical Services
4. Risks to Sustainability and Strategies to Mitigate Risk
5. Strategic Plans

## 1. Overview

Great Ormond Street Hospital NHS Foundation Trust (GOSH) has been a specialist children's hospital for more than 160 years. Today it provides a mixture of specialised and highly specialised services to a local, regional and national population. The Trust has a strong International and Private Patient (IPP) service and an academic partnership with the University College London Institute for Child Health (ICH).

GOSH has been extremely successful in its NHS and IPP business in the last few years with strong financial and service performance on the back of a focus on service quality, safety and responding to family and patient need. For the next five years there is significant risk in the system, mainly around the degree at which the NHS can afford the level of specialist work, and GOSH's ability to attract and retain a highly specialist workforce given the labour market in Central London. What the Trust's strategy does is to ensure that these challenges can be overcome and that the hospital will continue to deliver excellent services to a growing number of children. The strategy is supported by a serious consideration of cost structures and workforce pressures to deliver services in the future with a more concentrated service portfolio. The hospital will continue to grow proven national and international services, which are leaders in their fields. IPP contributes significantly to the Trust vision and is projected to grow year-on-year. In order to be a sustainable organisation the hospital has recognised that things can be done better and this document includes plans to digitalise the hospital and improve productivity and efficiency.

This strategy contains an assessment of the Trust's relationship with the hospital's key academic partners, with a view to establishing GOSH's presence globally at the forefront of innovation and successful advances in the treatment of rare diseases in children. This will be enabled to a large extent by the building of a new Centre for Research into Rare Disease in Children, which will bring more than 400 GOSH clinicians and academics together in a state-of-the-art translational research facility, adjacent to the hospital site. This is scheduled to open in 2017/18.

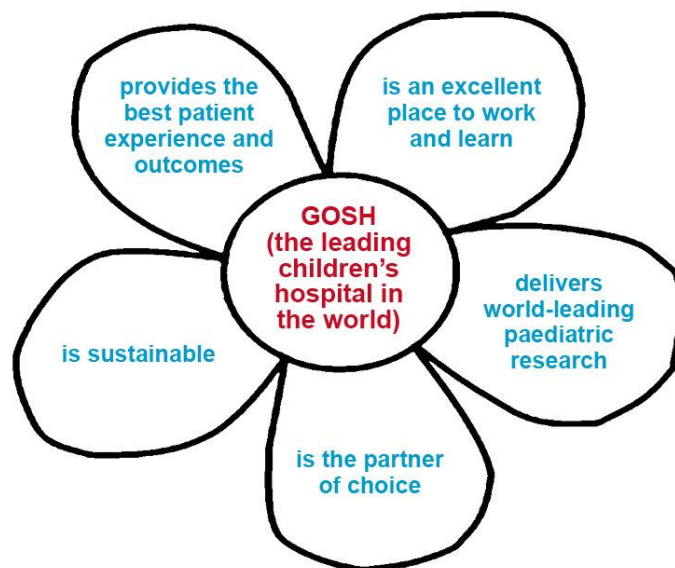
GOSH is developing an education strategy that will leverage its unrivalled brand identity internationally and nationally by commercialising with appropriate education and other activities to offset any reduction in NHS funding, as a result of any government limitations or reductions in investment in the NHS. The Trust also wishes to develop improved partnerships and collaborations with other paediatric centres. These partnerships will ensure that GOSH can treat more patients that vitally need the facilities and expertise available at GOSH, while also enabling children to receive care closer to home where this is clinically appropriate.

GOSH is supported by its partner Great Ormond Street Hospital Children's Charity. The charity is an exceptionally successful charity with high brand recognition and provides a significant contribution to the Trust, particularly in funding its ongoing redevelopment programme. GOSH is working in collaboration with the charity to ensure that their aims and support are specifically targeted to meet the objectives of the hospital's vision.

## 2. GOSH Strategy

### 2.1 Vision and Values

The vision of the hospital is to be “The leading children’s hospital in the world”. This vision will be achieved by five strategic objectives:



GOSH “The leading children’s hospital in the world”

To support the delivery of this vision GOSH has also developed a set of values in consultation with staff, patients, parents and carers. The developed values are referred to as “always” values:



These were the result of a consultation exercise across the Trust that involved 1,200 patients, family and carers and 1,444 members of staff defining the hospital’s expected values and behaviours.

The Trust has developed these and the “always” values into a set of behaviours for each standard, which outlines in a tangible, measurable and easily understandable way how the hospital will deliver this new vision for the Trust. The next stage will include a stepped approach of how to use the values to sustain change, including defining the culture, developing capabilities, creating connections, and resulting in clear consequences.

## 2.2 Future Scope

The strategy also defines what the business will aim to *do more of* and, importantly, what it will *do less of*.

On an island site in Central London, physical and staffing constraints will always exist – GOSH must maximise the benefit to patients who most need its expertise. Hence, the hospital has plans to grow some of the more highly specialised services and review the viability of services that do not have the same critical requirement for co-location. In addition, the Trust wishes to further focus on the stages of the acute pathway that must occur at GOSH and seeks to discharge patients earlier when they can receive the appropriate levels of care closer to home. Establishing key operational partnerships with providers of acute paediatric care will be an essential element of this approach.

GOSH has a strong tradition of introducing novel therapies and there is a desire for this to continue. This will create a greater emphasis on, for example, genetics, and treatment on the unborn child and gene therapies.

## 2.3 Strategic Priorities

In collaboration with key partners, eight strategic priorities have been agreed for the organisation. These are distinct from the strategic objectives in that they represent the eight issues the Trust needs to address in order to achieve the vision. In other words, they are the areas where there is the greatest variation between the hospital's current status and its vision.

### Clinical services

- Patient-centred delivery – improve patient pathways and processes
- Transformational change in the patient journey supported by the development of information resources and information technology
- Clinical service choices – clear decisions about clinical service portfolio in both IPP and NHS
- Improve relationships with commissioners and other providers
- Improve efficiency

### Research & Education

- Research and education strategies that illustrate full alignment with ICH and Great Ormond Street Hospital Children's Charity

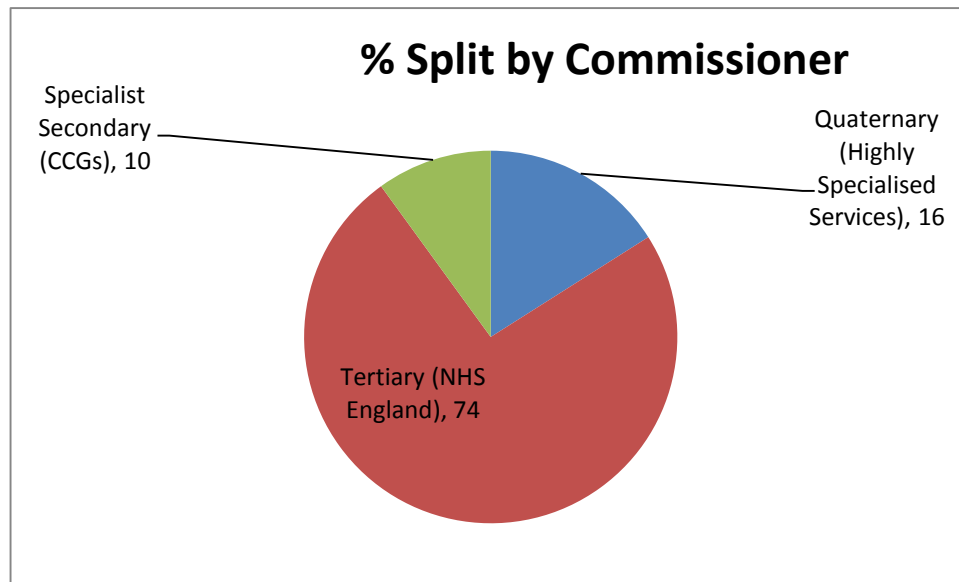
### People strategy

- Recruit, train and retain the right staff
- All staff champion the strategy with common values and behaviours – including staff management skills

### 3. Clinical Services

GOSH is predominantly a hospital that provides tertiary and quaternary services. Tertiary services being defined as those that offer specialist care and quaternary services being seen as an extension of tertiary care, in that the services are more highly specialised and offered by a small number of centres.

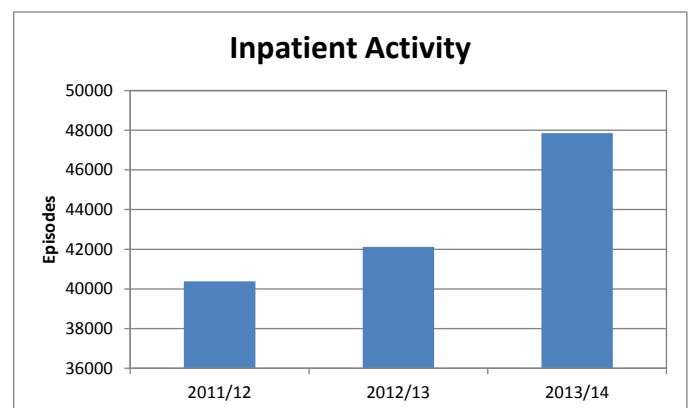
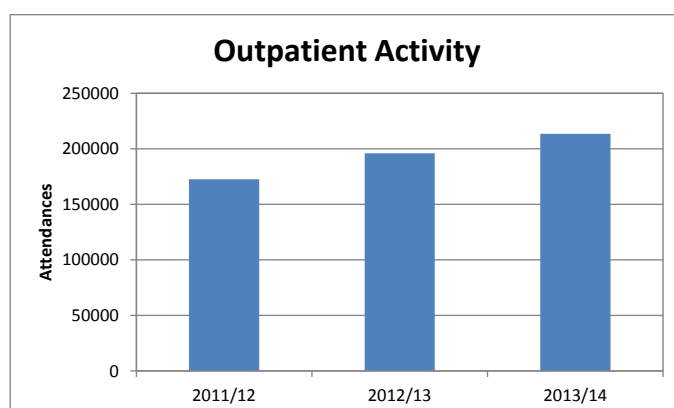
The type of services GOSH provides are highlighted by the split of NHS clinical income shown in the chart below:



This shows that 90 per cent of GOSH's income, and hence workload, relates to conditions that are categorised as highly specialised or specialised by the NHS, with only 10 per cent considered routine care that is commissioned by Clinical Commissioning Groups (CCGs). GOSH has the broadest range of specialist children's services in the UK under one roof.

Highly specialised services are commissioned on a national level due to their rarity and are only delivered at one or a very small number of hospitals. GOSH provides services for 19 of the highly specialised services, which is the highest number of any hospital in the country.

Historically GOSH has witnessed considerable activity growth, which is highlighted in the graphs below. Outpatient attendances have grown by 24 per cent in the past two years and hospital admissions by 19 per cent in the same period.



GOSH anticipates continued growth of its services being driven by the following reasons:



- Continued rationalisation of specialist services
- Increasing birth rate in England, particularly in North London
- New and improved treatments
- Improved survival rates for premature births and complicated childhood conditions
- Improved detection and hence intervention of childhood conditions

## **4. Risks to Sustainability and Strategic Choices**

### **4.1 Risk to Sustainability**

The Trust considers the following items to be the key risks to long term sustainability:

#### **a) Reduction in NHS funding**

NHS funding for acute trusts is expected to fall in real terms due to the transfer of funds from health to social care. In addition, NHS England has reported a deficit on specialist commissioning in 2013/14 and is seeking to recover the deficit through efficiency measures agreed with providers. For GOSH, this will potentially mean being paid less year-on-year for the same workload.

#### **b) Ability to recruit and retain sufficient high quality, skilled staff to service sufficient capacity to meet demand**

There is a national shortage of paediatric nursing staff, particularly those with critical care skills. The problem is compounded in London by both the cost of living and the close proximity of other specialist hospitals.

#### **c) Maintaining safe, high quality, clinical services**

GOSH's reputation is built on delivering high quality clinical services to children with complex conditions. Delivering a high quality service with excellent outcomes is challenging with the patient population GOSH serves. This challenge is becoming increasingly difficult with the growing numbers of patients with multiple health problems.

#### **d) Ensuring delivery of an excellent patient experience**

The hospital has extremely high patient and family satisfaction rates, which are among the very best in the country. Maintenance of these high levels is not only one of the Trust's key strategic objectives but is also important to ensuring that patients and referrers continue to select and use GOSH services.

#### **e) Current information technology (IT) interface deficits**

Across healthcare worldwide, major operational benefits are being realised through using technology to improve business processes and patient flows. GOSH is currently behind the curve in maximising IT to improve patient flow, safety, cost efficiency and the patient experience.

### **4.2 Strategies to Mitigate the Risks**

These are the strategies GOSH will employ to address the key risks to the Trust's long-term sustainability:

#### **a) Reduction in NHS funding**

- Development of a productivity and efficiency strategy
- Revision to the Trust's IPP strategy with increased income growth plans
- Development of a commercial strategy
- NHS Clinical Service strategy, which focuses growth on specific services

- b) Ability to recruit and retain sufficient high quality skilled staff to service sufficient capacity to meet demand**
  - Specific recruitment and retention strategy
  - Development of a workforce Strategy
- c) Maintaining safe, high quality, clinical services**
  - Development of a Quality Strategy, which has been published
  - Ensuring safety and quality remain at the heart of the organisation's vision
- d) Ensuring delivery of an excellent patient experience**
  - Embedding our "always" values
  - Listening to patients and families and acting on their feedback
- e) Current IT interface deficits**
  - Develop an IT strategic investment plan

## **5. Strategic Plans**

### **5.1 Introduction**

The hospital's Strategic Plans have been separated into a series of core strategies and those that support the delivery of these – supporting strategies. The core strategies address the future choices the hospital has made around the services offered and how the services will be delivered in terms of efficiency, effectiveness and experience. The supporting strategies cover the key resources required to provide services (e.g. staff, estate) and the smaller areas of the Trust's business (e.g. education and research)

### **Core Strategies**

### **5.2 Clinical Services Strategy**

The fundamental aim of the Trust's Clinical Services Strategy is to make the biggest positive influence on children's health. For GOSH, this translates to treating more patients and focusing on the complex treatments that must be provided at a highly specialised acute children's hospital. With this aim in mind, the hospital has carefully analysed its service portfolio and will focus growth on specific services that are core to achieving the vision.

In addition, the hospital will be able to treat more patients if it focuses its resources on the highly acute phase of treatment, and facilitates those areas of treatment that clinically don't need to be at GOSH being provided elsewhere. GOSH is finding it increasingly challenging to discharge patients to hospitals closer to their homes as local hospitals become less willing to managing complex paediatric conditions. As such, a key component of the hospital's strategy will be to establish partnerships with a small number of hospitals that will be willing and able to provide acute step-down facilities to a geographically wider patient population. Some of these partnerships are informally emerging and the hospital will establish more and formalise the arrangements.

#### **Market leaders**

The following services have a prominent national profile and are high volume services. They are core to the Trust's business and its reputation. Ensuring they remain the leading service nationally is an important strategic aim for the organisation.

#### Cardiac surgery

GOSH is the largest centre delivering paediatric cardiac surgery in the country. Nearly one in four children's heart operations in England happen at GOSH. The service has excellent outcomes and world-renowned surgeons. There are good foetal links with numerous maternity units, and well-established transitional links for patients approaching adulthood with heart conditions at University College London Hospitals (UCLH). GOSH will continue to invest in resources to increase capacity and meet the ever-increasing referrals.

#### Nephrology

GOSH is the largest kidney transplant centre in the UK and delivers the only paediatric home haemodialysis service in Europe. GOSH plan to develop the home dialysis service further and seeks to be recognised as the national hub.

### Neurosurgery

GOSH has the largest brain tumour neurosurgery service in the UK and is the largest centre delivering epilepsy surgery, for which it is the national lead centre. The hospital plans to develop a deep brain stimulation service for some epilepsy patients and open capacity to support this development and the increasing number of referrals received.

### Cancer

GOSH sees the largest number of new paediatric cancer diagnosis nationally. The hospital has the largest paediatric bone marrow transplant (BMT) service in Europe with highly specialised severe combined immunodeficiency and auto-immune gut services.

### **Essential services**

These are the 11 services that the Trust **must** maintain as they are essential to the functioning of the hospital as a whole. They must be thriving and sustainable as they are vital and other services are dependent on them. GOSH believes that providing these 11 services should be the bedrock of any tertiary paediatric hospital.

The eleven services are:

- Cardiac Surgery
- General Surgery (Specialist Neonatal and Paediatric Surgery –SNAPS)
- Nephrology
- Neurology
- Urology
- Cardiology
- Critical Care
- Neurosurgery
- Cancer
- Respiratory
- ENT

The organisation will support the ongoing development of these services.

### **Clinical Support Services**

The clinical services provided by the direct patient-facing specialties are reliant on the quality of the services that support them, such as imaging and pathology. Ensuring GOSH has world-leading clinical support services is just as important as the direct-facing specialties. Below are some of the developments that will be pursued in key clinical support services over the next five years:

#### Imaging

- Investing in a fifth magnetic resonance imaging (MRI) scanner
- Investing in a fifth angiography suite

#### Genetics

- Being at the forefront of whole DNA sequencing
- Being a national leader of non-invasive pre-natal testing

#### Laboratory Medicine.

- Developing new diagnostics and rapidly translating them into routine clinical service

## 5.3 Productivity and Efficiency (PE) Strategy

With the continued real-term reduction in NHS funding, GOSH recognises the absolute imperative of fully delivering planned savings for 2014/15 through to 2019/20. Delivering these savings will be essential to maintaining the Trust's financial viability. The Trust's five-year financial plan requires delivery of approximately £15 million in savings each year.

Savings will be made from a combination of the income generated from increasing NHS and IPP patients and doing things more efficiently and economically. Examples of improving efficiency and economics include:

- Using IT to reduce the administrative burden on staff
- Buying goods in collaboration with other hospitals to achieve a lower price
- Standardising the clinical pathway among medical teams to reduce variation and waste
- Using generic rather than branded drugs
- Ensuring patient contact time for clinical staff is maximised

## 5.4 Quality Strategy

**GOSH** is guided in all it does by its motto "The Child First and Always". Everything the Trust does is devoted to continual improvement of the health of children and young people, and to the support of their families during difficult times. GOSH has always been at the forefront of developments in children's health care, and the Trust has engaged actively in developing new ways to deliver both higher quality and greater safety.

A programme called "Zero Harm" commenced in 2007, and commits the Trust to the identification, progressive reduction, and ultimately the elimination of harm to children when under the hospital's care. Linked with similar work under the titles of "No Waits" and "No Waste", this programme is facilitated by an innovative process of transformation, supported by extensive training and partnerships with external leaders in Quality Improvement (QI).

This Quality Strategy builds on that experience and outlines the methods used to control and deliver quality, and defines the hospital's long-term aims. National goals and metrics are incorporated into the plans, but the aim is to always exceed those and to set standards, rather than simply to respond to them. Each standard will lead to the development of improvement goals and measures that will need to be achieved each year.

The Trust's vision is to be the leading children's hospital in the world. To do so, it must identify, validate and publish clinical outcomes, and be able to benchmark those outcomes against peers. The mechanisms by which the Trust intends to do this are incorporated into the Quality Strategy.

GOSH believes it is the duty of everyone who works in the Trust to make changes that will lead to better patient outcomes (health), better system performance (efficiency), better patient experience (care) and better professional development (learning). The importance the Trust places on quality and safety is

continually emphasised and embedded within the culture of the hospital.

To demonstrate this, GOSH places quality and safety (Q&S) at the top of its agenda, and has established mechanisms for recording and benchmarking clinical outcomes. GOSH utilises the three key domains identified by Darzi within which continuous improvement is necessary to achieve its goals:



GOSH has identified 12 standards against which the hospital will continually improve and these are:

|             |   |
|-------------|---|
| Standard 1  | Develop a strong governance structure for quality and safety with a systems approach to quality and safety  |
| Standard 2  | Maintain high levels of medication safety   |
| Standard 3  | Decrease and eliminate hospital acquired infections   |
| Standard 4  | Improve reliability in handover of clinical information at all interactions                                 |
| Standard 5  | Eliminate all pressure injuries occurring in hospital   |
| Standard 6  | Recognise and respond to unexpected deterioration of children   |
| Standard 7  | Decrease unnecessary delay in all processes in the patient journey  |
| Standard 8  | Develop clear measures of clinical outcomes to provide evidence of the top children's hospital in the world |
| Standard 9  | Measure and continually improve the experience of children and families.                                    |
| Standard 10 | Provide equal access to all children who need our care  |
| Standard 11 | Accelerate standardisation of clinical care   |
| Standard 12 | Develop reliable and accurate documentation of care   |

## 5.5 Patient Experience Strategy

GOSH appreciates that for children and their families coming to hospital can be an extremely stressful time. One of the hospital's core objectives is to ensure that it provides the most welcoming and comfortable experience for children and families during this difficult time.

The hospital has extremely high patient and family satisfaction rates that are among the very best in the country. GOSH's patient experience strategy aims to maintain or improve these rates by a series of actions:

- In partnership with the Great Ormond Street Children's Charity there will be an increased investment in parent and patient accommodation. This will ensure that the increasing number of children admitted over the coming years will be able to have a parent staying nearby.
- The national vision for nursing is based around the 6 Cs (Courage, Commitment, Care, Compassion, Competence and Communication). Based on these GOSH has developed its own nursing priorities

which are:



- Increased patient and family engagement.

A vital part of providing a good experience to patients and families is engaging with them, listening to their feedback (good and bad) and responding to their needs.

The hospital has a range of proactive methods to engage with children and their families, including:

- Hospital-wide patient and parent involvement forums
- Dedicated young person's forum
- Patient and family forums in many specific services
- Parents' participation in meetings and interview panels
- Active Members' Council with patient and carer members

## Supporting Strategies

### 5.6 People Strategy – workforce

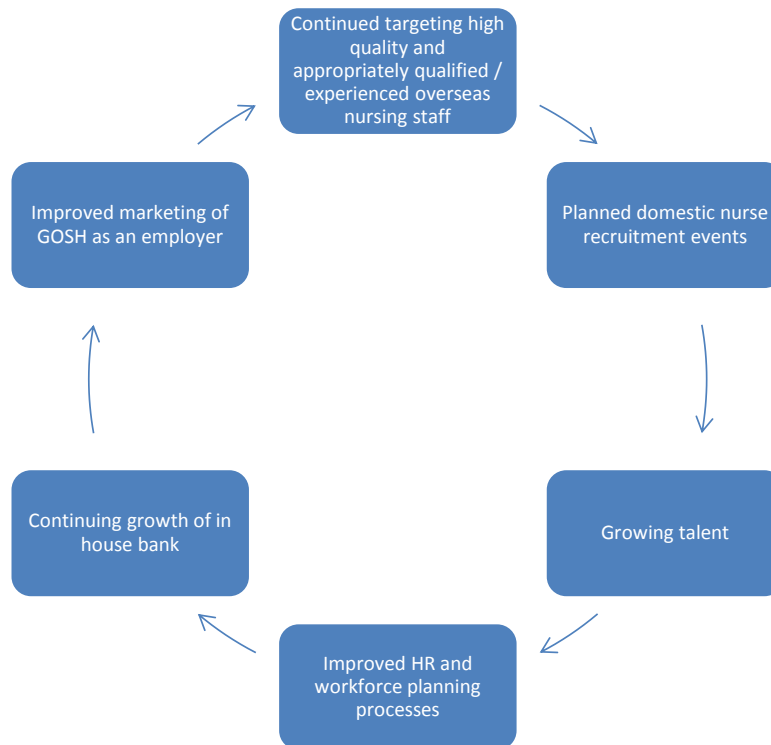
#### Recruitment and Retention Strategy

The ability to recruit and retain appropriate staff is one of the Trust's eight strategic priorities, and underpins the hospital's capacity to deliver current activity and future developments. GOSH operates in a challenging market for staff, due to high living/transport costs in Central London; quality of life issues; a young and highly mobile workforce; a large number of private and public sector competitors in the area; and a small pool of highly skilled staff which are in short supply nationally.



The Trust has developed a broad set of approaches to both attract and retain staff, and will continue to build on them over the next five years. It anticipates that work on, for example, our “always” values, reward and recognition, and further enhancing the education and training offering, will complement the development of GOSH as an employer of choice.

The core elements of the Recruitment and Retention Strategy are;



GOSH will explore the options for workforce redesign, utilisation and deployment as part of the desire to offer more services across a greater number of days per week. In particular, the Trust will seek to engage with staff, patients, families and commissioners to determine not only the range of services that they would like the Trust to provide, but also how those services will be provided. This will ensure that GOSH is able to gauge and deliver not only services which are safe and of the highest quality, but which also provide the best experience possible in line with the hospital’s values.

## 5.7 Research Strategy

The Trust has been working closely with partners at the UCL Institute of Child Health (ICH) and the Great Ormond Street Children’s Charity to develop a shared strategy. The aim is to provide world-class clinical care and training, and pioneering new research and treatments, in partnership with others for the benefit of children in the UK and worldwide. GOSH, with its key academic partner ICH, is a paediatric centre of research excellence; together they form the largest centre for paediatric research outside of North America.

GOSH is also part of UCL Partners, and the associated Academic Health Science Network, which allows for a multidisciplinary approach to research including epidemiological and population-based studies, basic molecular and cellular science, translational research, clinical interventional studies, patient-oriented clinical research, and patient and family experience research.

Over the next five years GOSH is committed to:

- Strengthening its research capacity and capability.
- Developing novel diagnostics and cutting edge treatments and care for its paediatric population, and contributing nationally and internationally to the health of children and young people.
- Creating a culture where research and innovation is embedded in the day-to-day clinical work.
- Listening and acting on the views of children and young people, and their family members.
- Training and educating paediatric health care professionals.
- Developing clinical academic careers across all professional groups.

In collaboration with partners there will be a significant investment in a new, dedicated Centre for Research into Rare Disease in Children (CRRDC). This facility, which will open in 2017/18, will include:

- A genomics facility that will offer faster, more accurate genetic diagnosis of children with inherited diseases and allow personalised treatment plans.
- A Good Manufacturing Practice (GMP) laboratory that will offer gene and cell therapies for a wide variety of inherited and acquired conditions.

By bringing these technologies and infrastructure together with world-class translational research groups, the CRRDC promises to be a world-leading centre for research in this area, with the ability to offer real and tangible benefits for children with rare diseases, either at GOSH or elsewhere nationally and internationally.

## 5.8 Education

Education, learning and development underpin the Trust's vision to deliver world-class clinical care and innovative clinical research. This is reflected in the Trust strategic priority to "recruit, train and retain the very best staff". The core principle of education at GOSH is to ensure staff have the ability, skills, knowledge and expertise to provide high quality, safe and effective care and that learning is effective.

GOSH, together with London South Bank University (LSBU) trains the largest number of children's nurses in the UK. The Trust is working closely with its partner the UCL Institute of Child Health, to provide training and qualifications (including BSc, MSc and PhDs), relevant to child health for medical and allied health professional staff. This integrated approach between ICH and GOSH provides "lifelong education" by offering continuing professional development (CPD) courses across a wide range of disciplines. GOSH staff contribute to, and teach, on UCL undergraduate and postgraduate programmes. For example, GOSH contributes directly to the training the doctors of tomorrow by offering "student selected components" and projects to UCL MB BS and Integrated BSc students. In postgraduate education, GOSH trains many of the future leaders in paediatrics and child health, who subsequently provide leadership in child health in the UK and abroad.

GOSH is currently working in collaboration with their key stakeholders to update the strategy for education, ensuring GOSH is an "excellent place to work and learn". Also, it will be important to ensure that the hospital works in conjunction with its key educational partners in higher and further education and to consolidate and expand the hospital's international education provision.

## 5.9 Information Technology (IT)

Over the past few years, the hospital has invested in improving its IT hardware. This investment has provided a platform for commencing the pathway of digitalising the hospital. The first phase of the Trust's strategy for improving IT systems will be a clinical electronic database repository on the journey to a complete electronic medical record. This will give significant benefits to patients and their families and the hospital. It will enable all the relevant clinical patient details to be accessed instantly and will enable immediate transmission of information to patients, families and care partners. Electronic medical records

can also assist the hospital with clinical decision making, thus improving safety and administrative processes, and, in turn, improving efficiency.

## 5.10 Commercial Strategy

Currently the organisation makes very little commercial income outside of International Private Patient work. The Trust recognises that the traditional NHS funding streams for clinical, education and research services will become further constrained over the next five years. As such, a key aim is to broaden the Trust's income base and views increased commercial income as an opportunity.

The strength of the GOSH brand brings with it opportunities to generate commercial income, which very few other NHS providers will have to the same degree.

## 5.11 Clinical Facilities

GOSH is midway through a complete redevelopment of its clinical facilities. This is a 20-year programme of ensuring that all wards, theatres, outpatients and other clinical facilities are modern and suitable for delivering world-leading clinical services. Over the next five years many of these new facilities will become operational. The facilities will be a combination of replacement of old accommodation and additional resources and are displayed in the diagram below:

