

## 2009/10 Trust Objectives

### 1) Licence to Operate - exceed Care Quality Commission standards

Objective	Outcome
<p>Improve patient care by reducing avoidable infections and providing a clean and safe environment</p>	<p>Reduce the incidence of avoidable infections:</p> <ul style="list-style-type: none"> <li>• Ensure no more than 31 MRSA infections in 2009/10</li> <li>• Ensure no more than 16 Clostridium Difficile infections per month by March 2010</li> </ul> <p>Provide a clean and safe environment:</p> <ul style="list-style-type: none"> <li>• Full compliance with existing and future Standards for Better Health</li> <li>• Achievement of a minimum 'good' rating for PEAT inspection standards</li> <li>• Achieve the site, Division and CAU targets set for hand hygiene, antibiotic prescribing, cleaning and peripheral line audits.</li> </ul>
<p>Consistently achieve patient access national standards</p>	<p>Achieve national access standards consistently from April 2009. These include:</p> <ul style="list-style-type: none"> <li>• At least 98% of A&amp;E patients admitted or discharged within 4 hours</li> <li>• At least 95% of patients needing admission are treated within 18 weeks of referral</li> <li>• At least 90% of patients not needing admission are treated within 18 weeks of referral</li> <li>• All outpatients are seen within 13 weeks</li> <li>• All inpatients are treated within 26 weeks</li> <li>• All cancer two week, one month and two month targets met</li> <li>• All breast, cervical screening and second cancer treatment targets met</li> <li>• Fully implement choose &amp; book systems and processes</li> </ul>
<p>Achieve financial targets (before IFRS)</p>	<ul style="list-style-type: none"> <li>• Achieve EFL, CRL and target surplus of £7m</li> <li>• Deliver a cost improvement programme of £40m including savings of £27m and additional net income of £13m (after costs)</li> <li>• Achieve ALE Level 3 standards</li> </ul>
<p>Improve workforce effectiveness and engagement</p>	<ul style="list-style-type: none"> <li>• Achieve full compliance with European Working Time Directive by August 2009</li> </ul> <p>By March 2010:</p> <ul style="list-style-type: none"> <li>• Reduce vacancies from 12% to below 8%</li> <li>• Reduce agency £1.5m</li> <li>• Reduce staff turnover from 17% to below 13%</li> <li>• Achieve a staff appraisal rate of over 90%</li> <li>• Reduce the staff sickness rate to 3.5%</li> <li>• Increase the staff survey response rate to over 55%</li> </ul>

## 2) Organisational Capability – achieve continuous improvement

Objective	Outcome
<p>Provide efficient, safe and effective care, improving patient outcomes, experience and clinical productivity</p>	<p>Organise clinical services around the needs of patients, reducing waits and eliminating waste and ensure commissioner support.</p> <p>Move to national top quartile performance in:</p> <ul style="list-style-type: none"> <li>• Day case rates</li> <li>• Length of stay</li> <li>• Theatre utilisation</li> <li>• Outpatient new to follow-up ratios</li> <li>• Admission on day of surgery</li> <li>• Delayed discharges</li> <li>• Readmission rates</li> </ul> <p>Improved clinical outcomes for patients:</p> <ul style="list-style-type: none"> <li>• Demonstrate excellent hospital standardised mortality rates (HSMRs) by further improving the monitoring system</li> </ul> <p>Improved patient experience:</p> <ul style="list-style-type: none"> <li>• Achieve a 5% improvement in the National Inpatient Survey privacy and dignity results</li> <li>• Record and improve Patient Reported Outcome Measures (PROMS)</li> </ul> <p>Improved patient safety:</p> <ul style="list-style-type: none"> <li>• Maintain a minimum of NHSLA level 1 standards, achieving level 2 within 2 years</li> <li>• Demonstrable evidence of achievement of CQUIN priorities</li> <li>• Achieve a year on year reduction in preventable incidents</li> </ul>
<p>Improve the quality of our Buildings and facilities</p>	<ul style="list-style-type: none"> <li>• Commission and move into Barts Phase I without unplanned disruption to services</li> <li>• Deliver the schemes in the 2009/10 capital programme within the funding identified</li> <li>• Comply with the national single sex accommodation standards</li> <li>• Increase compliance with disability access standards</li> </ul>

<p>Provide timely, accurate and comprehensive clinical and management information</p>	<p>Effective Care Record Service</p> <ul style="list-style-type: none"> <li>• CRS performance at least as good as minimum contract specification</li> <li>• Review and redefine Clinical ICT strategy and CRS business case</li> <li>• Implement next phase of Cerner Millennium</li> <li>• Standard Operating Procedures available and implemented for all key processes</li> <li>• Real time bed state available 24/7</li> </ul> <p>Effective contracting</p> <ul style="list-style-type: none"> <li>• Full coding within 15 days of month end</li> <li>• Full availability of contracting information</li> </ul>
<p>Improve the planning process to better integrate service provision, research and education</p>	<ul style="list-style-type: none"> <li>• Ensure all clinical and corporate areas have annual operating and medium term (3 year) business plans that are consistent with overall Trust objectives</li> </ul>

### 3) Strategic development – lead acute healthcare in NE London

<b>Objective</b>	<b>Outcome</b>
Deliver planned in-year service developments	<ul style="list-style-type: none"> <li>• Implement new stroke and trauma services by 31 March 2010, along with the associated clinical infrastructure</li> <li>• Deliver further improvements to maternity services as agreed in joint investment plan.</li> </ul>
Develop a 5-10 year service, finance and estates plan, consolidating our role as a major acute and academic Trust	<ul style="list-style-type: none"> <li>• Fully engage with the NE London provider landscape work, ensuring appropriate clinical involvement to agree sustainable sector-wide clinical and service plans</li> <li>• Develop integrated demand, supply, workforce, estates and financial plans to demonstrate operational and financial stability in the context of the new hospitals.</li> <li>• Best use made of the estate to maximise return on investment, subject to clinical need</li> <li>• Maximising the contribution from existing and new commercial opportunities</li> <li>• Establish a framework for CAUs to develop the service models that will operate in the new hospitals.</li> </ul>
Further develop Research and Education	<ul style="list-style-type: none"> <li>• Develop and implement a joint strategy with academic partners</li> <li>• Agree CAU and specialty level research and education priorities and metrics</li> <li>• Work with NHS Tower Hamlets and the Medical School to institute the Public Health and Primary Care CAU</li> <li>• Develop a strategy and implementation plan for a NE London Health Innovation and Education Cluster (HIEC) with NHS and academic partners</li> </ul>
Further develop relationships and partnerships	<ul style="list-style-type: none"> <li>• Improve relationship with GPs to understand referral patterns and identify opportunities to increase activity</li> <li>• Establish strategic alliances with neighbouring Trusts, supported by Memorandums of Understanding</li> <li>• Benchmark and then track the Trust's reputation with key stakeholders, patients and the public</li> </ul>