



Mid and South Essex
NHS Foundation Trust

Strategic objectives

15 May 2020

one team, working together

What we are doing?

Our proposed ambition and objectives

Our ambition is to improve health and wellbeing through excellent, financially sustainable services, provided by staff supported to develop, innovate and build rewarding careers.

Our ambition is supported by four strategic objectives:

1. Be an adaptive, well-led, high performing and innovative organisation which joins up care for the people we serve.
2. Deliver high quality, safe and responsive services shaped by best practice and our local communities.
3. Be an employer of choice for a supported, engaged and high-performing workforce.
4. Be effective and efficient with all our resources, creating an organisation that residents and staff can rely on for the long-term.

These objectives will be underpinned by a set of approaches we will aim to promote:

Digitally enabled

We are ambitious and work together to deliver care in more innovative ways, at greater convenience and with high quality systems and infrastructure. We embrace the new.

Data driven

We use information, analysis, and evidence to understand our work and inform our decisions, as well as to evaluate their impact and improve.

Financially responsible

We work within a clear financial framework and approach to everything we do with an aim to add value, we hold ourselves to clear standards.

Compassionate and inclusive

We listen to, and care for each other, and celebrate our communities and our differences.. We collaborate and work together. Our diversity makes us stronger

Sustainable and secure facilities

We manage our estate and assets well to support our patients and staff to be safe, healthy and secure

Positive Relationships

We work with local partners for the benefit of our communities.

one team, working together

Objective 1 breakdown

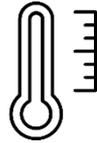
Be an adaptive, well-led, high performing and innovative organisation which joins-up care for the people we serve



Outcomes

How the organisation is able to reset from COVID-19 and progress its clinical and corporate strategy.

The reset from COVID-19 ensures the organisation is fit for purpose and delivers on its clinical and corporate strategy.



Measures

Review of Board competencies.
Well Led domain self-assessment.

All Trust merger conditions met.

Cancer performance standards.

Cancer patient experience.

Diagnostic access standards.

Reduction in face-face outpatient appointments.

Reduction in Trust floor space occupied by MSE clinical and corporate functions.



Deliverables

Develop a new, effective Trust Board and governance arrangements.

Trust showing measureable improvement in the highest risk clinical areas in the context of a COVID-19 care deficit environment, particularly cancer care.

Secure, build upon and maintain the transformation, technology and innovation initiated in response to the COVID-19 pandemic. This will include: discharge and community care, outpatients and primary care, the redesign of the acute footprint and the MSE FT corporate operating model.

Provide system leadership in the formation of the ICS.

Develop commercial and other enabling strategies for MSE FT, including approaches to securing intellectual property.

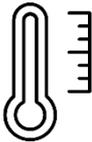
Objective 2 breakdown

Deliver high quality, safe and responsive services shaped by best practice and our local communities



Outcomes

- % of patients experiencing harm free care
- Improved in-hospital mortality
- Patient and staff benefits as described in individual clinical change business cases.



Measures

- Mortality and harm rates (pressure ulcers, infection control and falls, Never events, SIs – levels of harm)
- Reduction in avoidable cardiac arrest rates.
- Number staff trained and active in QI, evidenced through real world projects and application.
- Improved assessment of maternity services when reviewed by CQC. (Overall Good)
- Compliance with Maternity Standards NHS Resolutions



Deliverables

- Provide harm-free care for patients, by understanding and taking action on mortality rates and avoidable cardiac arrests in our hospitals.
- Progress local strategy for service reconfiguration, to develop and implement centres of excellence in emergency medicine, surgery, and cancer care.
- Grow quality improvement capacity across the Trust, embedding the MSE FT method of improvement practice and growing our faculty to sustain this into the future.
- Build a system to support assurance of care reliability across the Trust, through the development of a clinically led and evidence-based Design Authority, making best use of benchmarking and effectiveness resources.
- Achieve milestones related to Maternity Services with enhanced safety outcomes.
- Deliver a single, integrated pathology service that supports MSE FT's objectives.
- Public confidence in health services is rebuilt through a process of engagement and involvement.

Objective 2 breakdown



Deliver high quality, safe and responsive services shaped by best practice and our local communities

Metric	Baseline	Trajectory		
	Q1	Q2	Q3	Q4
Harm free care				
Mortality – crude mortality				
Mortality - SHMI				
Pressure ulcer	To be determined			
Inpatient Falls with harm	To be determined			
Infection Prevention Clostridium difficile ceiling 185	Basildon	Ceiling 51		
	Broomfield	Ceiling 83		
	Southend	Ceiling 51		
Infection Prevention – Hospital acquired MRSA	0	0	0	0
Never events – zero tolerance	0	0	0	0
Serious Incidents – per 1000 bed days				
Reduction in avoidable cardiac arrest rates. <1 in 1,000 admissions				
Number staff trained and active in QI, evidenced through real world projects and application.	Stepped down due to COVID-19	Relaunch Quality Improvement strategy subject to COVID-19 pressures. To include: <ul style="list-style-type: none"> • Trial and launch of online quality improvement training • All QI projects to be overseen by senior QI lead and to adhere to principles of measuring for improvement with appropriate stakeholder involvement. 		
Improved assessment of maternity services when reviewed by CQC. (Overall Good)	Stepped down due to COVID-19	Each Maternity Unit will have an internal compliance visit every 6 months to demonstrate compliance and continuous improvement against the Health and Social Care Regulations and Maternity Services specific Key Lines of Enquiry. The internal compliance visits will include the review of performance data, governance metrics, well led information, service user feedback, staff feedback and observational visits		
		Assurance programme across all sites to demonstrate compliance against the Must and Should take actions – see detail below.		
	To develop, implement and deliver on the Maternity Quality Improvement Plan meeting all deadlines by quarter.			
Compliance with Maternity Standards NHS Resolutions	Stepped down due to COVID-19 – maternity services chose to continue reporting on some elements	Subject to COVID-19 demands, to meet all NHR Maternity standards requirements		

Objective 2 breakdown



Mid and South Essex
NHS Foundation Trust

Improved assessment of maternity services when reviewed by CQC. (Overall Good)

MUST or SHOULD take action	How compliance will be measured
The trust must ensure that patient records are completed in line with trust policy (Regulation 17).	Quarterly audit of record keeping to be carried out across all maternity sites.
The trust must ensure medical staff have level three safeguarding training in line with national guidance. Regulation 18: (1)	Training compliance is reported in the maternity performance reports on a monthly basis. Assurance will be obtained that maternity services are meeting the standards or there is clear evidence of continuous improvement towards meeting the standard. 85% for mandatory training and 95% for safeguarding training.
The trust should ensure all eligible staff undertake annual competency assessment in cardiotocography (CTG) interpretation and auscultation in line with national recommendations.	Assurance will be obtained regarding training compliance and competency on a quarterly basis across all maternity units.
The trust should ensure all staff know what to do if a baby was abducted from the maternity unit.	Spot checks against this recommendation will be carried out during the internal compliance visits to provide assurance
The trust must audit compliance with the World Health Organisations (WHO) surgical safety checklist (Regulation 12).	WHO safety checklists audits will be carried out within maternity theatres on a quarterly basis to ensure compliance with the standards.
The trust should ensure they continue to recruit to improve medical staffing The trust should consider reviewing medical staffing arrangements to ensure they are in line with national recommendations..	Medical vacancy rates are reported through the maternity performance reports and will be used to provide assurance. Medical staffing levels will be measured as part of the internal compliance visits at each site on a 6 monthly basis.
The trust should ensure that all handovers have a multidisciplinary presence to ensure all staff that provide care for women have all relevant and current information.	Handovers will be observed during the internal compliance visits and assurance will be obtained regarding MDT attendance
The trust must ensure that medication including medical gases are stored in line with trust policy and national guidance (Regulation 12).	Storage of medication including medical gases will be reviewed during the internal compliance visits on a 6 monthly basis
The trust should ensure prescription charts are completed with women's weight and allergy status.	Audits of prescription charts will be carried out on a quarterly basis where relevant (not applicable for e-prescribing systems) to ensure compliance with this recommendation.
The trust should consider reviewing the appraisal process to ensure all staff find it useful.	Compliance with the appraisal process will be measured as part of the internal compliance visits and assurance provided on the effectiveness of these through the discussion with staff during the visits.
The trust should ensure all complaints are closed in line with the trust's policy.	Complaints are monitored on a monthly basis and reported through the governance reports to the Risk and Compliance Groups. Assurance will be provided via these reports on the effectiveness of processes to manage complaints within maternity services. KPIs to be measured will include the number of overdue complaints and the number of re-opened complaints.
The trust must ensure that the low risk midwifery pathway is robust and women access the correct pathway of care and give birth in the correct area according to their assessment of risk (Regulation 12).	Incidents will be monitored and reviewed to identify any reported breaches to the pathway. Adherence to the pathway will also be assessed during the internal compliance visits.
The Trust must ensure grading of incidents reflects the level of harm (regulation 17).	A quarterly review of all serious incidents in maternity services will be carried out to ensure that the level of harm has been reflected appropriate in all relevant reports
The trust must ensure that the Head of Midwifery and Clinical Lead have direct access to the board to present to them regularly in line with 'Spotlight on Maternity' 2016 (Regulation 17).	Evidence will be obtained from the Head of Midwifery and Clinical Lead during the internal compliance visits to ensure compliance with this recommendation.

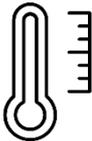
Objective 3 breakdown

Be an employer of choice for a supported, engaged and high-performing workforce



Outcomes

- Improved staff engagement.
- Baseline for mental health wellbeing.
- New MSE narrative, values and behaviours co-created with staff.
- A more stable and integrated workforce across Mid and South Essex.



Measures

- Staff survey uptake (60 %).
- Vacancy rates.
- Recruitment and retention rates for nursing staff.
- Statutory and mandatory and training compliance (85%).
- Staff engagement levels.
- Mental health wellbeing baseline (measured using short Warwick-Edinburgh Mental Wellbeing form).



Deliverables

- Ensure implementation of the NHS People Plan within Mid and South Essex to establish MSE as an employer of choice.
- Build upon the benefits of accelerated and enhanced recruitment and retention during the COVID-19 pandemic response, for example through securing volumes of new entrants, higher levels of volunteering and licencing across organisations.
- Build a route map for recovery around a new narrative, culture, leadership, values and behaviours and staff health and wellbeing, based on compassion and positive experience from COVID pandemic, whilst recognising the impact and ongoing health burden
- Establish new approaches to supporting professional development for frontline and corporate roles.

Objective 4 breakdown

Be effective and efficient with all our resources, creating an organisation that residents and staff can rely on for the long-term.

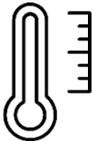


Outcomes

Delivery of the financial benefits aligned to plans for the merged trust and MSE system.

An MSE FT Commercial Strategy in place to progress our objectives.

Further outcomes to be developed as part of business cases.



Measures

Achievement of financial objectives.

Evaluation measures for the Hospital as an Anchor programme.

Proportion of service developments with successful business cases related to COVID reset priorities.

Value add from commercial, non-care ventures and relationships with local businesses, including the development of a local supply chain where possible.



Deliverables

Work with system partners to develop a new compact with the public within Mid and South Essex; including identifying and addressing care deficits due to COVID-19 restrictions and supporting positive behaviour change.

Deliver effective and efficient services in the context of wider system redesign.

Advance the Hospital as an Anchor Programme to explore how MSE can be a good partner for our local economy and add social value.

Make the right investment decisions in light of COVID-19 to enable reset, transform services for the better and maximise patient benefit.