



**Great Western Hospitals**  
NHS Foundation Trust

# **Our Strategy**

## **2019 - 2024**

**Great People.  
Great Place.  
Great Western Hospitals.**

# Introduction

The past seven years have been what many consider to be one of the most challenging periods in the history of the NHS.



**Our ambitious push to improve safety through our Sign up to Safety pledges are one of the best examples of how we can make a life changing difference to people when we commit to a goal.**

Despite those challenges, we have much to be proud of in terms of how we have improved the care we provide and how we are saving more lives than ever before. Our ambitious push to improve safety through our Sign up to Safety pledges are one of the best examples of how we can make a life changing difference to people when we commit to a goal.

Equally the way staff pulled together to help lift the Trust out of enforcement action, which we were placed in because of our worsening finances, was no mean feat and was achieved because we were clear with ourselves about what we were trying to do and why.

That is why a strategy like this is important. It sets out in black and white our ambition to improve the quality of care in the years ahead and how we expect to do that. It helps provide clarity for all of us who work here about what it is we are trying to do and where we are trying to get to.

In truth there is no such thing as a 'finished job' when it comes to delivering a strategy or indeed at all in the NHS. Each success moves you forward to the next and puts us in a stronger position to meet new challenges that require new ways of doing things.



**The support and commitment of staff is essential if we are to deliver our strategy.**

At the time of writing our previous strategy, the landscape within which we operated was different. STPs [Sustainability & Transformation Partnerships] did not exist, Integrated Care Systems were scarce, the NHS 10 Year Plan was a long way off and we were not the provider of community services in Swindon.

The support and commitment of staff is essential if we are to deliver our strategy. We have many reasons to be proud and to share our learning and experience with other Trusts nationally, but equally there is much we can learn from the best providers.

We need to be as ambitious in searching for new ideas to bring to Swindon as we are of developing our own. We also know that we can only deliver sustainable improvements if we work much more closely with our partners.

This refresh of our strategy has given us the opportunity to come together and share our thoughts and ideas for how we meet future challenges. Through a range of staff discussions and open meetings, discussions with local Healthwatch representatives, the Employee Partnership Forum, the Executive Board and Council of Governors, we have sought views on what our future goals should be and how we should plan to meet them.

The ultimate goal is to join up care for patients to improve their outcomes, keep people well for longer and doing it with care and compassion, ensuring that by working together the local NHS is greater than the sum of its parts.

We may not know all that the future holds, but this update of our strategy represents a restatement of our own commitment to continue to work hard, on behalf of local people. We will continually search for ways to improve care and ensure that patients continue to have access to high quality, sustainable services in the years ahead. How we do that over the next 3-5 years is up to us to decide. This is our chance to shape our future.



This is our chance to shape our future.

A handwritten signature in black ink, appearing to read 'K McNamara'.

Kevin McNamara

Acting Chief Executive

A handwritten signature in blue ink, appearing to read 'Liam Coleman'.

Liam Coleman

Chairman



# Our Strategy

## Why have we refreshed our strategy now?

Our previous strategy was set in 2015, at the time we were placed in enforcement action by Monitor (now NHS Improvement) the regulator, due to our worsening finances.

The previous strategy was specifically designed to lift the Trust out of enforcement action and thanks to the hard work of staff in helping stabilise our finances, the Trust moved out of enforcement action in autumn 2017.

## What did we achieve through that strategy?

We said... 	We did... 
We would stabilise our finances through careful consideration of cost savings and delivering efficiencies.	In three years we delivered £40m of savings safely.
We would save an extra 500 lives through a number of additional safety initiatives such as Sepsis and Acute Kidney Injury.	In three years we have saved up to an extra 356 lives thanks to our action and the work of our staff.
We wanted to make sure the services we provide are joined up for patients and users.	<p>In July 2016 we established Wiltshire Health and Care as a partnership with Royal United Hospitals Bath NHS FT and Salisbury Hospital NHS FT to provide adult community services across Wiltshire with the aim of improving pathways and helping keep people at home.</p> <p>In October 2016 we became responsible for all Adult Community Health Services in Swindon as we recognised the big opportunity in Swindon to join services up and remove some of the old organisational boundaries.</p> <p>These services were rated as Good across all domains by the CQC in December 2018 and now means local people are able to access better community services and it is also helping with flow and supporting discharges from hospital.</p> <p>Working with our local partners, we have also developed a new model of care for Swindon – the Team Swindon model – which is the blueprint for an Integrated care system for Swindon. Work is now underway to implement that model across a range of pathways for patients, for example End of Life patients and the development of community based MDTs [Multi-Disciplinary Teams].</p>
We would work closely with other providers to bring services closer to home.	<p>A key success has been securing national approval for a Radiotherapy Unit for Swindon and we have successfully raised over £2.9m towards the project through our Brighter Futures charity.</p> <p>Enabling works were complete in 2017 and, following the approval of funds to Oxford University Hospitals NHS FT, we expect the main building work to start in 2019.</p>
We wanted to look at options for how we can get better value for money for the taxpayer from the PFI – a significant financial burden for the Trust.	We developed a business case exploring a range of options including looking to buy out the PFI – unfortunately this case was not supported by regulators and despite some small savings, the PFI remains the main reason for our structural deficit of around £12m a year.
We would recruit more frontline staff.	<p>We now have 230 more nurses, 60 more doctors* and 31 more therapists in post than we did three years ago.</p> <p>*includes medical and dental staff</p>

These are some of the key elements of the strategy that we have successfully delivered and now we need to reflect on what is happening around us, what challenges remain and to agree new goals for the long term.

We also need to consider the NHS Long Term Plan, making sure that we are clear on how our strategy delivers on the nationally set ambitions such as tackling health inequalities and making better use of data and digital technology.

## Our vision



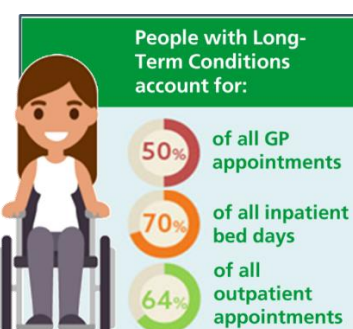
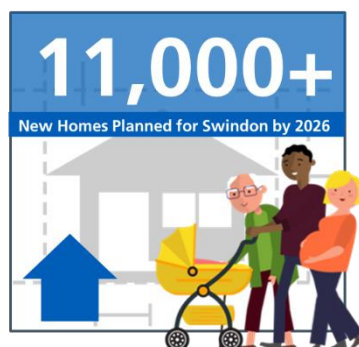
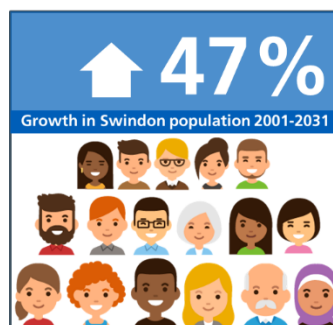
We will deliver joined up services for local people at home, in the community and in hospital helping them to lead independent and healthier lives.

We developed our vision in 2015 and it remains largely the same. We will keep patients at the forefront of everything we do and work to join services up as much as possible to make things easy and more accessible for patients and for staff.

We have summed this up simply in our strapline:

Great People. Great Place. Great Western Hospitals.

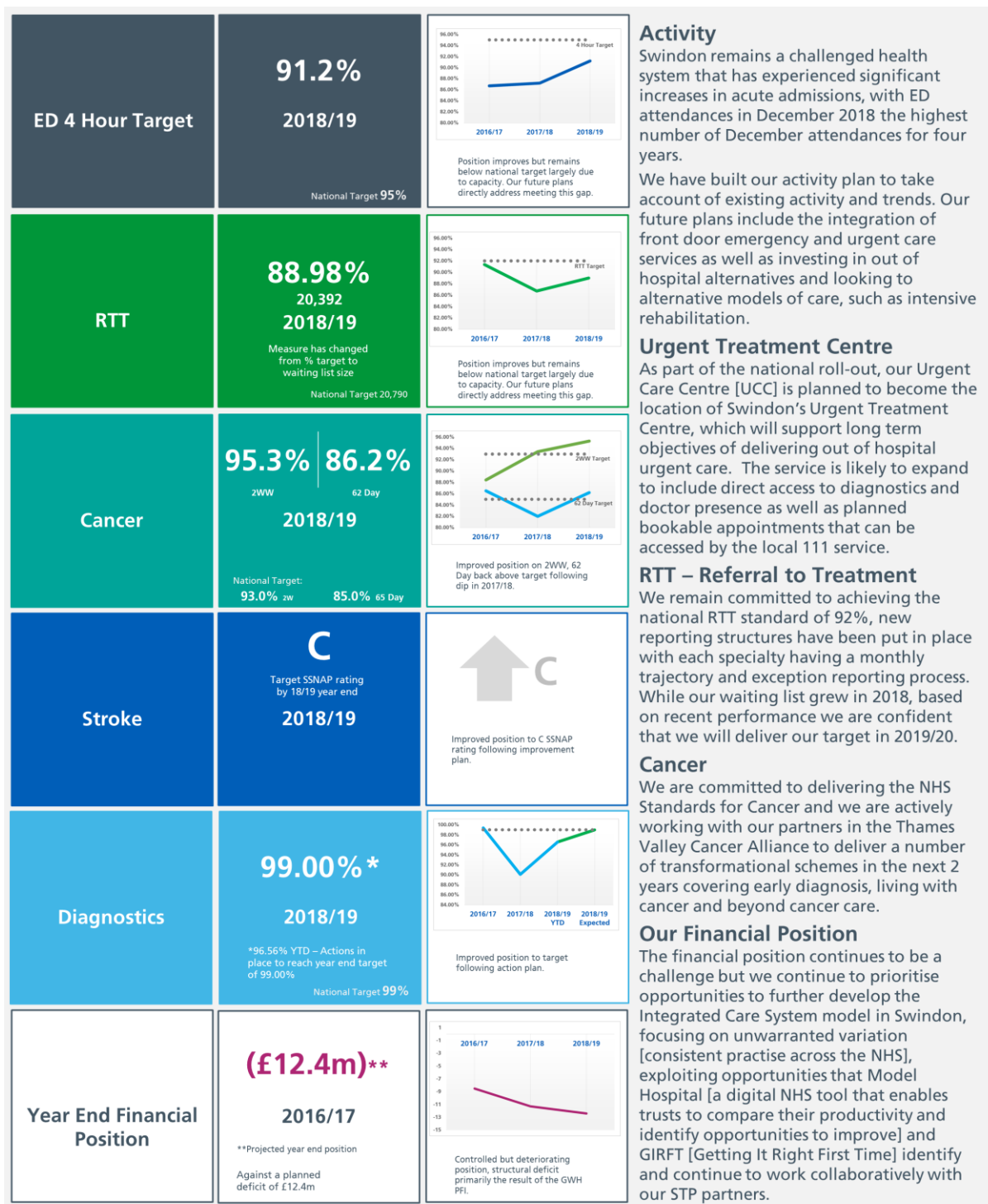
## The environment we're operating in and the people we serve



Data sourced from Swindon Borough Council, Swindon CCG, the local JNSA [Joint Strategic Needs Assessment] & GWH NHS FT.

# Our performance

The dashboard below shows where we are on our main targets and our financial position over the past 3 years.





There are lots of opportunities for staff, with good people in the organisation that inspire staff.

## We've Listened

### Listening to staff, patients and the public

Across the summer of 2018, we spent time talking and listening to our staff, patients and public (through groups like Health Watch) as well as other stakeholders such as our governors and commissioners. We used these listening opportunities to inform our strategy development and areas of focus for the years ahead.

We are incredibly proud of our staff who continue to provide the very best care in the face of continued challenge of demand and our own capacity. It's no surprise that our staff also feel immensely proud of their work, and they know that patients appreciate the care they provide. A clear network of peer to peer staff support is evident and we need to ensure that we continue to provide the right tools to these groups and to their team leads to allow them the space to be innovative, have ideas, make improvements and sound decisions.



We want to be outstanding!

Our staff recognise the excellent service that we deliver but also recognise that we can do more. As a Trust we need to make sure we spend more time recognising and celebrating achievement, internally, locally and nationally. Indeed, we have much to celebrate.

Our staff want to be recognised by the CQC and want to be part of a Trust that has services rated as 'Outstanding'. Our recent inspection shows that in 80% of areas we are now rated as 'Good'. Making as many services as possible 'Outstanding' will be a key focus for us in the coming years.

In terms of the way we approach our services and our future strategic approach, staff have reminded us that, following a sustained period of cost reduction in order to stabilise our finances, we should now be focused on delivering change through quality improvement measures. Adopting this approach will ensure that we keep the patient at the centre of everything we do and will result in us providing services which are efficient and provide good value for money.

In the face of a national shortage of healthcare staff, we know that staffing levels have a direct impact on morale, this is clear



**Less red tape,  
more investment  
in good ideas to  
drive quality  
improvement.**

from our staff survey and our listening sessions. Central to our workforce strategy will be a refresh to the way we recruit and much stronger emphasis of talent development and retention. Our staff know that there are lots of opportunities, and moving forward we intend to offer this in a more structured and systematic way.

We've heard from our staff and our patients that we need to continue our work on bringing community and hospital services together. There are many examples where this is starting to emerge, such as in End of Life Care, and we can use these to drive forward our agenda at pace. As we continue on this work, and develop our relationships with the wider health and care system [developing an Integrated Care System for Swindon] we will need to put more time into looking how we could do things differently, such as keeping people well and at home or other out of hospital alternatives.

Our patients, staff and other organisations, such as Primary Care [GPs], have raised the need for improved communication – for example patients telling us that they do not want to have to tell every healthcare professional they come into contact with their story. In part this relies on improvement to how we use IT and patient data, for example accessible shared care records which will help with more timely clinical decision making and a smoother journey for patients. We'll be working with our commissioner colleagues and the wider system to make this happen.



**Improve  
staffing, so  
people have  
time to think,  
learn, reflect  
and plan, not  
just charge from  
one task to the  
next.**

Capacity is a recurring theme throughout all our engagement. Services across the board are under pressure and population growth has a significant impact on this. Key pinch points within the Trust include the Emergency Department, which currently sees almost twice the number of patients that it was designed for. This makes it difficult to ensure we deliver a good experience at all times through earlier diagnosis, a key goal in the NHS 10 year plan, for diseases such as cancer. Such demands not only make the delivery of services physically difficult but they also place an additional challenge on staff and impact on the patient experience. The Trust has been working hard in this area over the past 18 months and has recently been awarded £30m of central funding to co-locate and expand emergency and urgent services and to develop a new intensive rehabilitation service which will help address the current capacity issues, and begin unlocking our estate for expansion in other service areas.

# What we want to achieve over the next 5 years



# Making a difference for our patients

Ultimately we are working towards achieving the best possible level of care for our patients. Our strategy sets out clear priorities for the years ahead, we are confident that our approach will bring meaningful change to the quality of people's lives and the care they receive from us.

## Living the changes



Sue is currently recovering on Forest Ward following a stroke.

She gets 45 minutes of rehabilitation based therapy each day and gets to use the small gym located in the building when it's not in use by someone else.

Sue hopes she can go home in the next 2-3 weeks.

After 3 weeks Sue is finally home.

She has the support of the Community Stroke Team to help her with her on-going rehabilitation. Although the care she has received has been great she's tired of re-telling her story to the different people involved in delivering her care and worries that she may not remember important information.

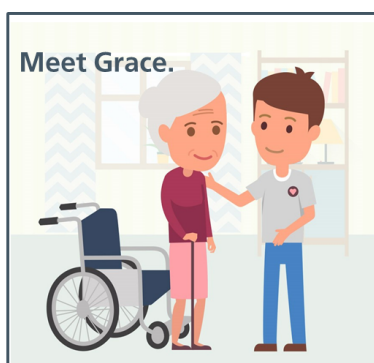
Within the next 12 months people like Sue will only need to tell their story once.

Shared care records are coming. Electronic access to your care record for you and for those that care for you.

Supported discharges combined with services to reduce time needed in hospital will also mean that Swindon improves in national scores for stroke care.

Within the next 3 years our goal is to offer people like Sue access to a significant amount of rehab every day [through a new purpose built facility], making use of gym equipment and real life settings - linked closely with home based therapy.

This approach should allow people to return home more quickly, lead more independent lives and have improved options in returning to work. Long term care support and the risk of readmission to hospital should also both reduce.



Grace is 84 and is currently living at home with support from community health and social care teams.

She visits her GP frequently and has multiple conditions that need care and treatment.

Sometimes Grace forgets to keep hydrated by not drinking enough water and ends up needing more care.

Grace has been in hospital 3 times in the last 6 months, due to dehydration, an injury from a fall due to no hand rails being fitted at home and from not taking essential medication due to being confused from different advice given by different carers.

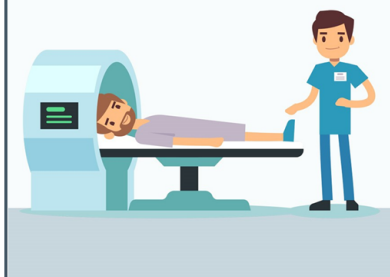


Community Multi-Disciplinary Teams are being established, involving input from all key health and social care professionals so that single care plans can be put in place to keep people well and out of hospital, preventing unplanned admissions.

This will be underpinned by a shared care record so that everyone involved knows exactly what that plan involves.



## Meet Yusef.



Yusef is 54 and has advanced lung cancer.

He has a difficult road ahead and wants to get his affairs together so he can focus on spending valuable time with his family.

There are many things he would like to decide about his care, including making sure that he can be at home when he does die.

We've been working hard over the past 12 months to ensure that for people like Yusef there is a co-ordinated [rapid response where its needed] approach for patients at end of life providing seamless support and care and providing choice in where to die.

This will be further improved by a shared care record that is accessible across primary, community and acute services so that any clinician involved in the provision of care knows the story of the patient and what the patient's wishes are, making sure that these wishes are central to the plan.



Yusef can be sure that when the time comes his wishes will be respected and those important decisions he's made regarding his care will be carried out.



## Meet Jane.



Jane lives in Swindon and tells us about what services look like in Swindon – in 3 years time...

"I tell my story once."

"The professionals involved with my care talk to each other. We all work as a team."

"I can plan my care with people who work together to understand me and my carers, allow me control, and bring together services to achieve the outcomes important to me."

"Information is given to me at the right times. It is appropriate to my condition and circumstances. It is provided in a way that I can understand."


"I am as involved in discussions and decisions about my care, support and treatment as I want to be."

This is Swindon.

This is integrated care.

# What will the future look like for our staff?

Our staff are key to delivering our strategy. With the right tools and support, together with development and recognition we know we can bring further improvement and ensure that our services work together and can stand the test of time for future generations.



**Meet Shani.**

Registered Nurse  
Emergency Department  
Great Western Hospital

Shani has worked at the hospital for 5 years and finds her job rewarding.

She feels like she's part of a family and enjoys caring for her patients.

At very busy times, Shani can find it a challenge to do her job as well as she would like.


Shani knows that the hospital's Emergency Department is very busy, in-fact it's seeing almost double the amount of people than it was designed for and because of the lack of capacity across the system, at busy times it doesn't meet the national 4 hour quality indicator.

She knows that Swindon's population is set to continue to grow too.

In the last 12 months there have been significant improvements in systems to manage flow and reduce those attending A&E.

The CQC has praised staff for their kind and compassionate care.

Ambulatory Care has been expanded and a new Medical Day Unit has been opened to ease the burden on emergency care.



Within the next 2 years as part of a £30m investment in the future of the hospital, work will begin to reconfigure [co-locating important services] and expand the Emergency Department and create an integrated front door. This will provide a safer space to provide care and closer working with other 'front door services'.



**Meet Chris.**

Divisional Director of Nursing  
Planned Care  
Great Western Hospital

Chris is a Divisional Director of Nursing within Planned Care and has worked for the Trust for the past 8 years.

Starting out as Nurse he has experienced first hand the opportunities there are within the Trust to develop his career.

Chris is linked in well to Trust communications and feels informed about what we've achieved and what our future vision is.


He has noticed that not all communications are reaching all levels of staff and thinks that not all staff are being encouraged to bring new ideas forward.

He also notes that some managers are not sure where they are able to make decisions.

In the next 6 months the Trust will be rolling out a new leadership framework, guided by our leadership principles to give clear guidance and what we expect from each other all underpinned by our STAR values.

In the next 6 months the Trust will also be rolling a new communications toolkit to provide managers, at all levels, a regular team briefing which they can add to as needed to reflect their own updates whilst still conveying key messages.





**Meet Rachel.**

Physiotherapist  
Swindon Community Health Services

Rachel has worked as a Physiotherapist within the community for the past 12 years.

She has seen a lot of change, particularly since the Trust started delivering community services in 2016. Before this point services were struggling to deliver, staffing levels were a problem and there were organisational boundaries that often got in the way of making the right decision for patients.


Thanks to the work people like Rachel have been doing, she now belongs to a resilient service which actively works with other parts of the system in health and social care, including the hospital, to deliver a more joined up service that works for patients.

In the last 18 months there have been significant improvements to health services run in the community, which are now being provided by the Trust.

The CQC has recently rated all community services as 'Good', a fantastic achievement, which demonstrates the improvements which have been made to improving care and to integrate services into the wider system.

Rachel knows that although the achievements in the community have been good there is still much to do. But we now have a solid foundation on which to build.

Next step... 'Outstanding'!



## Pillar 1 Our Priorities

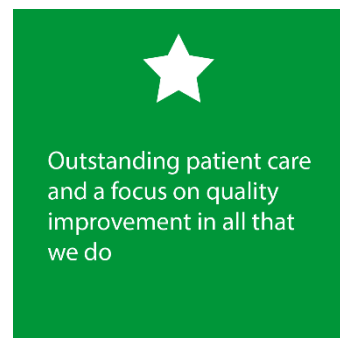
We want quality to be the golden thread running through everything we do. We want to be held up as an example of an organisation that, when it commits wholeheartedly to focus its energies to deliver improvements in quality, becomes a beacon across the NHS in terms of improved safety of care. We want to raise the bar each time and be ambitious and innovative in how we deliver improvements in quality so that we become an outstanding Trust.

### Our Priorities:

- Adopt and embed a continuous Quality Improvement [QI] approach to how we change the way we provide our services. This will keep patients at the centre of what we do and ensure that services are efficient and provide best value.
- Reduce unwarranted clinical variation to improve outcomes, using tools already available to us like GIRFT & Model Hospital.
- Create space to grow for the next 10 years and beyond in areas such as Cancer, Maternity and integrated and right-sized Front Door. We will develop a master plan for the hospital site which sets a direction for how services can develop in the years ahead to meet growing needs and set out how, through working with other providers in developing new models we will be able to service those needs to reduce reliance on acute hospital beds and other parts of the system.
- Reduce unnecessary delays and ensure only patients that need acute care are in hospital. We will do this by working with all areas of the system and develop out of hospital alternatives.
- Integrated pathways of care to create a more joined up and proactive service. Focusing on Elderly and those with Long Term Conditions to ensure they can remain home for as long as possible, avoiding multiple admissions and prolonged stays.
- Develop outstanding services across the Trust and be recognised by our peers for services such as Cardiology, Respiratory Care and Intensive Rehabilitation.
- Build a stronger voice for service users to shape how we develop services and deliver care. We know that to build better services we need to more closely involve those who are directly affected.
- Invest in leadership skills at all levels and attract new talent through a refreshed workforce strategy.

### What will success look like?

We aim to be rated as Outstanding by the CQC. We will take a big step towards this by achieving a Good rating overall at our next inspection in 2019/20.



### What do we mean by quality?



### For the people who use our services

**Safety** our patients will be protected from avoidable harm.

**Effective** care and treatment achieves good outcomes, promotes a good quality of life and is based on the best available evidence.

#### Positive experience

- Caring – staff involve and treat with compassion, dignity and respect.
- Responsive/person centred – services respond to needs and choices and enable patients to be equal partners in their care.

### For how we provide services

**Well-led** we are open and collaborate internally and externally, we are committed to learning and improvement.

**Sustainable use of resources** we use our resources responsibly and efficiently, providing fair access to all, according to need, and promote an open and fair culture. We will ensure that inequalities in health outcomes are a focus for quality improvement, making sure care quality does not vary due to characteristics such as gender, race, disability, age, sexual orientation, religion, belief, gender assignment, pregnancy and maternity or marital or civil partnership status.



## Pillar 2 Our Priorities

We aspire to be an organisation where staff and volunteers at every level and in every setting know the part they play in improving quality for our patients. We want to work in an environment where people can freely offer up their ideas and insights for how we will work together to drive improvements and empowered to make the right decisions for their patients.

### Our Priorities:

- Roll out a Leadership Framework aligned to our leadership principles and value, setting out expectations, development and support. This is important so our staff know what is expected of them and what they can expect from us.
- Roll out 'Engage to Change' across the organisation to improve our approach to staff engagement and promoting ideas from the front line.
- Release time to care, giving staff space to think and develop new ideas, reducing unnecessary admin. We know that with demand increasing and a growing population it's all too common that we get caught up with dealing with the pressures of the day. We'll be working hard to make sure staff get that important space to think and grow.
- Recruit and retain our talent through a Learning and Development Strategy, which ensures we support the training and development of our staff so they reach their potential and deliver good quality care. A new recruitment approach is already underway and in the coming months we'll be developing longer term plans.
- Invest in health and wellbeing programmes for staff and volunteers. Supporting improved role design, flexibility and better support. Our staff are important to us and we want to keep them well and healthy, we also want to make sure that as their circumstances may change so too can their role.
- Empower staff by providing tools to do their job – IT, information and equipment. This will include device refreshes, behind the scenes infrastructure upgrades and working on getting systems working together. We also want to make the quality of information better to allow good, informed and timely decision making. To do this we will need to not only be more innovative about where and how we source funds for this investment but also in how we use IT and data to make the most of it.



Staff and volunteers feeling valued and involved in helping improve quality of care for patients

Service Teamwork Ambition Respect ★

Our STAR values and our leadership principles will form the basis of our leadership framework and how we deliver on behalf of our patients.

### Our Leadership Principles

- 1 Patient First**  
It's all about the patient. We're here for them. We design our services around them.
- 2 Ownership**  
Own what you do. Act on behalf of the Trust and the patients we care for, beyond just your own team. We never say "that's not my job."
- 3 Make it Great!**  
Learn and improve. We do things well and we do them consistently. Explore what's possible, look for new ways, be ambitious, be inspired by others, make it great!
- 4 Top Talent**  
Recognise talent and achievement. Train and develop to improve. Raise the bar with every new recruit or new way of working. Develop others by coaching and empowering. Help others be great.
- 5 Inspire**  
Bring your team with you. Give clarity, keep them informed and engaged, not just about their area. Let them know the value they bring and the part they play in the Trust.
- 6 Get Involved**  
Stand in their shoes to better understand an issue. Listen, understand, improve.
- 7 Be Smart**  
We are funded by taxpayers so spend every penny as if it were your own. Don't let resources be the block, the best ideas don't always cost more, what are the options available to us?
- 8 Deliver**  
Focus on our key objectives, deliver them with the right quality in a timely way. Workaround setbacks, find a way, meet the challenge!

**What will success look like?**

Achieve top 20% in the National NHS Staff Survey and achieve upper quartile in staff retention rate.



## Pillar 3

### What we will do

We know that the vast majority of healthcare is done outside of hospital and involving not just the formal parts of the NHS and the voluntary sector but also the informal but vital role of carers and local communities. For the Trust to not only survive but thrive, we need to tap into these resources and work closely to ensure that collectively we are greater than the sum of our parts, to make things easier and more joined up not only for patients navigating the system but also staff to help their patients find the care or support they need first time.

#### Our Priorities:

- Implement the 'Team Swindon' model – the model for integrated care in Swindon, redesigning key pathways across acute, community and social care.
- Work with local partners on ways to improve flow and introduce shared care records and common IT infrastructure.
- Integrate acute, community, primary care, social care and mental health under a single professional leadership where appropriate with opportunities for staff to work flexibly across both.
- Play an active role in the STP and the Acute Alliance through the delivery of a shared approach to fragile services and support services.
- Develop a new approach to contracting that enables and empowers a new model of care. To include arrangements that work for the Trust & CCG for front door emergency activity.
- Work as a system to develop a sustainable investment strategy that promotes investment in out of hospital alternatives. Future models will require input and expertise from more organisations outside of our Trust; in health, social care and beyond.

#### What will success look like?

We will see single pathways of care operating between acute and community and a shared care record in place. With our partners we will have reduced growth in demand for urgent and emergency care through joining up services, prevention and reducing hospital bed days.



Improving quality of patient care by joining up acute and community services in Swindon and through partnerships with other providers

#### Our journey towards integrated care

Local health and social care organisations in Swindon are transforming services through working known as 'integrated care', which promises a better experience for patients, more efficient services and better value for tax payers.



Removing organisational barriers, improving communication and working together to plan, finance and provide patient services are at the heart of this work.

It makes sense that better coordination between general practices, community services, hospitals and social care, should mean a more positive experience for all.

There is also a big shift towards helping people to stay healthy, doing more to keep long term conditions such as diabetes under control and preventing ill health in the first place.



## Pillar 4 Our Priorities

We need to get the very best out of the resources we have available to us. We know that striving for efficiency at the expense of quality is unthinkable whilst quality without efficiency is unsustainable. We therefore have to find ways to free up capacity and release resources to invest in those ideas and models of care that will help deliver sustainable improvements in quality. Improvements that are not about the short term immediate impact but improvements that future generations can benefit from.

### Our Priorities:

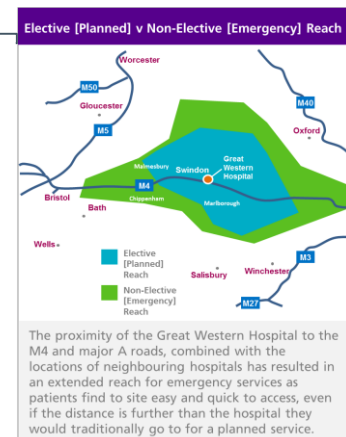
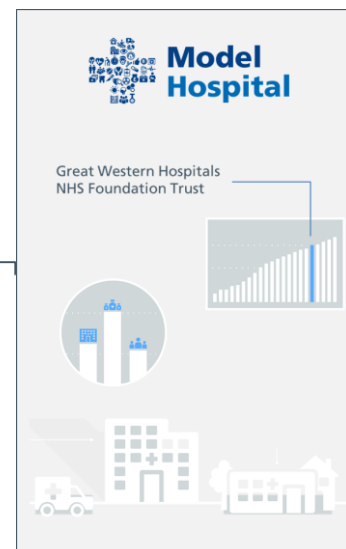
- Remove unwarranted variation and improve efficiencies through standardising practice across clinical and non-clinical services and making full use of national tools showing how we benchmark, including Model Hospital & Getting It Right First Time (GIRFT). By improving efficiencies and benchmarking we will, in turn, drive improvements to patient care.
- Implement IT and information systems that help timely decision making and ensure decisions are 'intelligence led'.
- Fully understand our costs and associated income for every service through an annual process of service reviews. This will bring greater transparency and allow us to see more clearly where we can drive improvements in patient care, benchmarking against other Trusts to inform this.
- Increase our Elective as a percentage. Our geographical position, located next to the M4 and the A419 means that we have a significant reach, particularly for admissions into our Emergency Department. Elective services have not evolved in the same way. Rebalancing will bring important income with it.
- Realise the benefits of AI Technology to remove repetitive tasks from staff, releasing time to allow the ability to focus on patient care.
- Develop commercial opportunities to bring new funding to invest in staff and services, including section 106, Research and Innovation and external partnerships. With large scale housing development set to continue for Swindon and the surrounding area, we will make sure that the appropriate contributions are made to support the longer term expansion of healthcare. We will also ensure that we explore research opportunities and look to other partners where we can not only learn new and smarter ways of working but also benefit from additional funding routes.
- Continue our successful work of charitable fundraising. Following the completion of the Radiotherapy appeal, we can now focus raising funds for areas of need right across the Trust.

**What will success look like?**

Services should be operating within the top quartile of Model Hospital, offering best value for money.



Using our funding wisely to give us a stronger foundation to support sustainable improvements in quality of patient care



\*A mechanism which allows a development proposal to be acceptable in planning terms, that would not otherwise be acceptable. They are focused on site specific mitigation of the impact of development. Section 106 agreements are often referred to as 'developer contributions' along with highway contributions and the Community Infrastructure Levy.

# Great Place – Improving our infrastructure to support great care

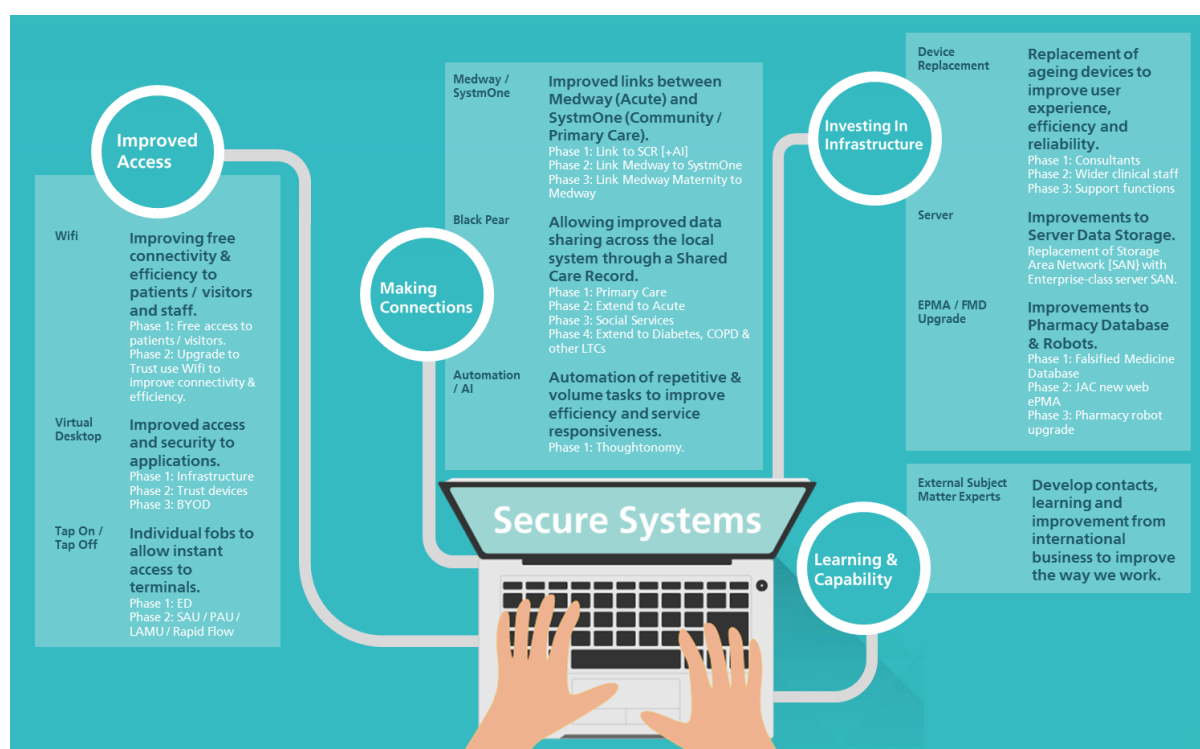
## IT

From listening to staff and patients one of the things that connects a number of the issues we face is the need for better IT – IT that supports good clinical decision making and makes it easier for patients to tell their story once.

Our priorities are:

1	<b>Improved Access</b>	To make it easier and quicker for our staff to get access to the information they need.
2	<b>Making Connections</b>	So that our systems ‘talk’ more easily with other parts of health and social care, allowing a single shared care record to become a reality. To develop automation and digitisation (to include Outpatients Transformation), driving paperless solutions and releasing time to care.
3	<b>Investing in Infrastructure</b>	So that our staff have access to the right tools to do their jobs.
4	<b>Learning &amp; Capability</b>	Develop new ways to use IT and new partnerships with suppliers so we get the most out of the investments we make in IT.

Below are our key areas of focus for IT for the first phase of our strategy.




## Our Estate

We want to provide our patients with the high quality service they deserve, and our staff with a working environment that helps them be the best that they can be, to do this partly relies on space and capacity.

Since the hospital opened in 2002, we have seen significant population growth in and around Swindon. Between 2001 and 2031 the population of Swindon alone will have grown by 47%, all of which creates added demand for services.

We have ambitious plans for how we will ensure that we can continue to care for patients in the right environment.

Our priorities are:

<p>1 <b>Expansion Land</b></p>	<p>To secure the expansion land next to the hospital which will allow for the expansion of health and social care services.</p>	
<p>2 <b>Master Planning</b></p>	<p>To develop a Master Plan of the Great Western Hospital site to develop a campus which is fit for purpose for a generation to meet the need of services in highest demand, including our plans for future cancer and maternity expansion.</p>	
<p>3 <b>Planned Development</b></p>	<p>During the summer of 2018 we bid for £30 million of national funding to expand our Emergency Department, purchase land for potential expansion and to help us develop new models of care, such as an intensive rehabilitation offer (which could be funded through a different route). This is a great milestone which will help us to maintain quality and safety for people in Swindon and the surrounding areas over the coming years.</p>	
<p>4 <b>An Integrated Front Door</b></p>	<p>We plan to expand the Emergency Department and bring some of the 'front door' services currently on level 3 of the hospital to the ground floor, creating a truly integrated front door service. This will help those who do not need to be in hospital to be seen and directed to alternative services more quickly.</p>	
<p>5 <b>Intensive Rehabilitation Transitional Care Facility</b></p>	<p>Part of our proposal is centred on how we could develop a different model of care to reduce demand in the future, rather than simply adding more and more beds to the local system. We're in a great position to do this through integrating pathways across our hospital and community services and one of the new models of care we have been looking at is a model of intensive rehabilitation. This work has involved looking at how intensive rehabilitation works in Northern Europe. There is still work to do on setting out how this could work from a clinical and financial perspective. But if this is something we can make work, it will free up beds in the hospital, which in turn, could support our goal of creating a dedicated cancer centre. Collectively, this has the potential to really transform care for patients and unlock much needed space for our services.</p>	

# From strategy to action

Whilst this strategy sets the overall direction for the Trust, how clinical divisions and individual services plan for the future will be guided by our ongoing business planning process. We will be working with clinical divisions to undertake Strategic Service Reviews of each service within their area to set out how they will contribute towards delivering this strategy and help us make decisions about the mix of services we provide, how we provide them and what partnerships we may need to develop to help us.

Each strategy and plan that underpins this document will be reviewed to ensure it remains fit for purpose and aligns to our future direction. They will also be reviewed to ensure there are clear measurable outcomes to track progress so we can make decisions along the way as to whether we are on the right track and are improving services for patients.



**Great People.**  
**Great Place.**  
**Great Western Hospitals.**