



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

What we'll be known for





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







Dr Jon Westbrook **Medical Director** 



**Lisa Cheek Chief Nurse** 



**Claire Thompson Director of Improvement** & Partnerships



We want to be held up as a beacon for improving care, raising the improving care, raising the bar each time and being more ambitious and innovative in how we deliver improvements in quality so that we become an 'Outstanding' Trust.

## **Our Quality Strategy**

## **Our strategic pillars**









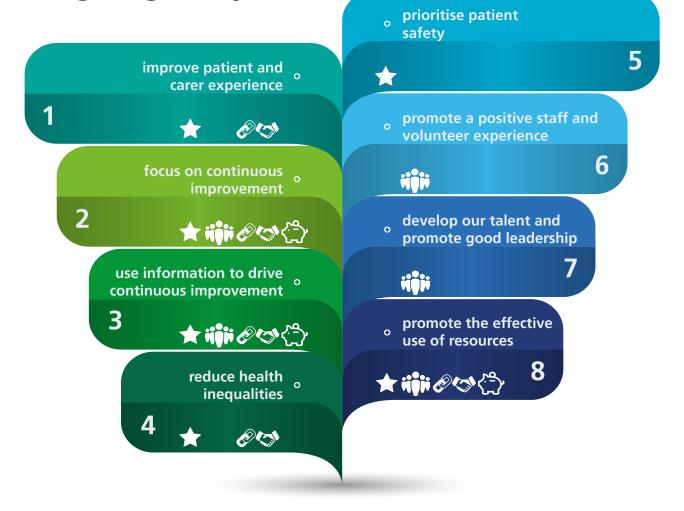
## **Our quality aims**

**Deliver Great Care** 

Improve staff and volunteer experience

Improve population health through better patient outcomes, safety and clinical effectiveness and reducing health inequalities and harm Ensure value for money through improvement and efficiency

We'll deliver this through eight objectives



# Quality runs through everything we do

#### Trust Strategy

Our vision is to deliver joined up care for local people at home, in the community and in hospital, helping them to lead independent lives. We placed quality at the heart of our strategy - a golden thread running through everything we do, underpinning each of our four strategic pillars.

#### Integrated care, community services and our primary care network

Making sure quality and efficiency are considered at every level as we focus on a more preventative and integrated approach across care pathways.

As an integrated provider we already provide primary care to over 30,000 patients in Swindon, community services across Swindon and acute services from the Great Western Hospital. This provides us with an opportunity to join up care and improve together without organisational boundaries.

#### Involvement and engagement

We will work with our communities and patients actively seeking those who find it difficult to access our services, including the most vulnerable, to support the co-design of services and person-centred planning.

#### Our place in the system and our role as an anchor institution

We are part of the BSW system (this covers Bath and North East Somerset, Swindon and Wiltshire). Working together with all health and care partners we are developing better ways of working, ensuring equity and consistency of care, sharing learning opportunities and making the best use of our collective resources.

We also recognise the wider impact we can have as an 'anchor institution'. The actions we take, using our position and influence within our own system, could have a significant impact on the life outcomes of our communities, they could also impact on how people use our services and potentially reduce future admissions.

## • Equality, diversity and inclusion

Contributing to and influenced by our equality, diversity and inclusion objectives.

#### Clinical effectiveness

Making sure quality resources, such as audit and NICE (The National Institute for Health and Care Excellence) support, are in place and enable evidence-based practice across the Trust.

#### Clinical risk management and patient safety

Making sure that quality issues from adverse events and risk issues are appropriately escalated, resolved and/or mitigated. To ensure that a culture of learning is embedded throughout the Trust.



#### Performance monitoring

How we can be assured we are meeting the required quality metrics and key performance indicators.

## • Statements of internal control

Increasing the contribution of quality tools to how the Trust gains assurance about the quality of its services and effectively manages risk.

## • Clinical and integrated governance

Moving beyond assurance and providing staff with the confidence and skills to make continuous improvements in the quality of care they provide.

#### Corporate assurance

Including the CQC registration standards and Board assurance framework.

#### Research

Providing understanding of the health needs of our local populations, identifying potential interventions and opportunities to tailor treatments and care.

#### Great Care

Our Great Care programme is an umbrella for every initiative, new process or pathway, quality improvement project or other good work that seeks to improve the patient experience. This will supoprt us on our journey to becoming a CQC (Care Quality Commission) Outstanding Trust.

#### • Improving together

## - our quality improvement (QI) methodology

A critical enabler to provide us with the tools to understand the impact of our work in improving patient care. This will be rolled out by our Transformation & Improvement Hub and linked to our BSW Academy.

## • Complaints and patient feedback

We will listen closely. Themes will be used to address quality issues and make improvements.

#### Workforce development

Providing staff with the foundations and tools to improve quality through continuing professional development and appraisal and enabling allied health professionals and clinicians to compy with their professional codes of practice and revalidation.

#### Innovation

Identifying and making best use of new and emerging technologies and new ways of working, using these to develop products or interventions for patient care.



## improve patient and carer experience

Patient and carer experience is positive when staff give care that is compassionate, involves patients in decision-making and provides them with good emotional support.

Our staff and volunteers always strive to provide the best level of care, but we do recognise that sometimes things don't always go to plan and we are committed to making improvements to our services and the experience our patients, carers and visitors receive.

This is why we have set up the Great Care campaign. It acts as an umbrella for every initiative, new process or pathway, quality improvement project or other good work that seeks to improve the patient, carer and/or visitor experience.

Everything feeds into the campaign, this good work is then streamlined and shared between every team in the organisation so that learning is embedded and every team can provide the same level of high quality care.

The campaign will help to record and collate any work that fits into our four workstreams (see diagram, top right), and means we can share the learning with other teams easily and consistently. This could include things like reducing bed moves, encouraging patients to get up and dressed, focusing on nutrition and hydration or having important conversations with patients and their families or carers to ensure the care they are receiving is personalised and compassionate to their needs.

## what this will look like

Every patient and carer will have easy access to provide feedback about their care and experience, they will feel listened to and evidence of action from feedback will be clear to see.

As an integrated Trust that directly provides primary care, community services and secondary care it's important that our listening and engagement plans extend throughout all these settings and beyond, we will proactively work with our communities to understand what is important to them and help support them to live healthy lives.

Care and treatment will be received in the right environment and we will continuously improve what you can see, do, hear and feel during your stay or visit.



learning and improvement.





## Patient and carer experiences



Charlotte is 80 and is living at home with support from community health and social care teams.

Last year Charlotte spent five days in hospital following a fall at home.





Patrick is Charlotte's husband. When his wife was in hospital he found it difficult to find out how she was when he phoned the ward.

"The person I spoke to said I'd be called back but this didn't happen. I was worried as I had no update so I drove to the hospital."

"I find it hard to get a GP appointment." **Simone** 



"There were no hooks in the toilet to hang my coat or bag. This makes it very difficult to use the toilets as I don't want to put my coat on the floor."

Lucy



"Staff don't always volunteer information due to workload but when we ask them they provide updates."

Jacob



"I made a friend in the bed next to me but our chairs were removed so we couldn't sit together."

**Tobias** 



Meet Ria.



Ria attended the Emergency
Department following a fall at home, she suspected that her arm was

"I waited for over four hours to be seen in a very small waiting area. It was so busy! They took great care of me but every area was full up." This is Maria.



"My teenage son has a severe disability and when he visits the hospital for his regular appointments he needs the use of an Adult Changing Room. Unfortunately there isn't one available. The ward makes special arrangements for us but he often worries and feels uncomfortable that this facility isn't there."

Meet Hannah and baby James.



Baby James was born six weeks premature and was admitted to the Neonatal Unit where he stayed for four weeks.

"James was very poorly when he was born and he needed lots of additional support and monitoring." "The support that the team provided to both me and my partner was amazing and the care they provided for James was excellent, we can't thank everyone enough."



Following his stay with us in the Neonatal Unit, baby James was able to go home with his parents with ongoing care

ongoing care from the community midwife team.



more options so that I can manage my condition at home."

"I'd like to see

Nia



"I wasn't helped to wash and my pad wasn't changed."

**Abbie** 



"I had five different bed moves during my stay in hospital." Ickra



"I waited a long time for my test results." **Mira** 



"My call bell wasn't always answered."

**Sidney** 

"There weren't many options for my special dietary requirements." Matthew



Names and identifying details have been changed to protect the privacy of individuals.

Listening to our patients is an important part of learning and will inform our improvement programme. But we also need to reach out and engage with patients, carers, visitors and our wider communities to understand what they want from us and the services we provide in the future. Our engagement needs to be representative and inclusive, involving our system partners where it's appropriate, using a variety of communication channels.

# Objective 2 focus on continuous improvement

We want our staff to feel empowered to make improvements in care by using good quality timely data and an evidence-based methodology. We want to work in a consistent way across our Integrated Care System and to do that we are developing our 'improving together' approach. This will see us share best practice, our insights and our resources.

We know that improvement effort is precious; unless we are pulling together in the same direction and focused on achieving a common goal, much of this effort can go to waste or lack traction and it can often feel like we are trying to do too much.

We are building a programme that will see us deliver our strategy and address these challenges, not just for the next few years but as a continuous journey.

It will see us working together on a few shared goals, with every improvement effort we make bringing us closer to reaching them.

## what this will look like

We want to be an 'Outstanding' Trust. To achieve this we need to be clear about what needs to be achieved along the way with the right level of resources, tools and support.

Improvement needs to be part of what we do every day, so that we see a culture of continuous improvement. It will be a part of who we are, a key focus for each and every one of us and we'll understand our own contribution.

We will have a small number of clearly communicated goals and a set of annual break-through objectives, which will define the areas of performance where we want to drive significant improvement. This will help ensure that everyone is pulling in the same direction.

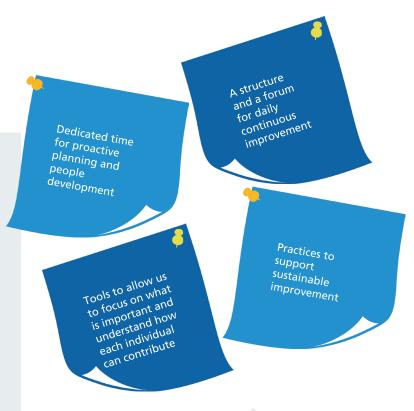
We will have help for teams to work in a different way, every day. We'll provide support for training, coaching and build capability.

Our executive team will display a visible and personal commitment to own and drive change.

Our approach will be consistent across our system yet specific for our integrated Trust and the communities we serve.

I understand the contribution to the strategy that my team and I need to make.

I am able to both deliver great work and improve how I do it as part of my "day job" to help deliver the strategy.







# Improving together

Improving Together is an ambitious transformation of the way we do things which will empower staff to drive continuous improvements in services, which will lead to higher standards of patient care and patient experience.

We're committed to continuous improvement to help us deliver our vision to provide the highest quality of care. We work together on our shared goals, with every improvement bringing us closer to achieving them. Often it can feel like we have too many priorities and too little focus.

Working in a busy environment and trying to emerge from a pandemic highlights the fact that improvement needs to be part of everything we do.

We want to empower every single one of our staff and volunteers to become problem solvers, to continually improve together for our colleagues, our patients and our local communities. We'll be investing to make this happen, with training, coaching and new tools.

Everyone has a part to play. We know where we want to go as an organisation and how we are doing on our journey to get there.

As an organisation of over 5,500 problem solvers we really will be making a difference big and small each and every day, continually improving together. No matter what your role is, your contribution, your support and your ideas matter.

## use information to drive continuous improvement

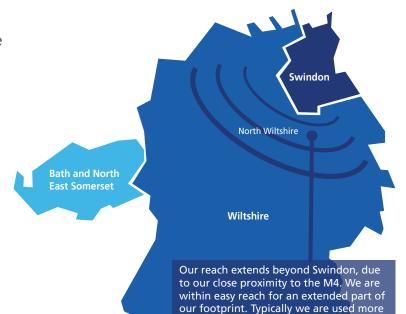
In order to successfully deliver care for our local populations we need to really understand their needs, now and for the future

Given the pressures on everyday working it's easy to get stuck in a 'fire-fighting' mode but this leads to a constant need to deal with the problems being presented rather than trying to tackle root causes or plan for better, more preventative care options.

We'll be taking a 'population management' approach, improving the health of our communities by data driven planning and the delivery of proactive care to achieve the maximum impact, inform future services and our ongoing continuous improvement.

We want a thriving, successful and vibrant Swindon and North Wiltshire which delivers better opportunities for more people.

Everyone should have the best possible chance of living well, achieving their potential and getting the most out of our great community.



## what this will look like

We will collect useful data that not only provides a transparent view of our performance and the care we provide but will also inform decision-making on the form of future services and improvement programmes.

The data we use will allow us to identify the needs of our local communities by highlighting inequalities and emerging trends.

We'll collect data and join up intelligence, sharing information across our integrated Trust in primary care, community and secondary care as well as our system partners.

The information we collect will show that we have made significant progress in removing variation and inequity across the care we provide.



for urgent and emergency care (rather than planned care), however, there is clear benefit for us to more closely work with communities within North Wiltshire and to work with system partners in this area as this will also impact on those people

using our services.

## What we know about Swindon and North Wiltshire

The information below sets out broadly what we know about the profile of different groups of people in Swindon. It helps us to understand better the issues which may impact on the people who, at some point, may use our services. We know that many people, outside of Swindon, in North Wiltshire also access our care. There are many similarities in these communities with those in Swindon but we will be working closely with Wiltshire Council and local community groups in the coming years to better understand this part of the county and any specific needs they may have.







- 72 teenage pregnancies
- 1 in 20 15 year olds smoke
- 3.5 children (per 1,000) die under the age of 1
- Choking, suffocation, poisoning, burns and drowning most common cause of death in under 5s





1/6 smoke

Age

- 2/3 of adults are overweight / obese
- 421 hospital alcohol admissions
- 17 substance misuse deaths





- 1/7 provide unpaid care
- 7 in 10 have a long term condition
- 1/3 over 65 and 1/2 over 80 fall at least once
- 1/2 over 65 and almost 9 in 10 over 75 are socially isolate
- 1/6 have dementia

disability





- Women live 12 years less in the most deprived parts of the town
- Men live 14 years less in the most deprived parts of the town





### Disability



3,500 have severe hearing loss 10,750 live with a

 860 have a moderate to severe learning

- moderate physical disability, a further 3,200 live with a severe one
- 27,600 live with a mental health condition

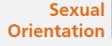


## Ethnicity



• 15.4% (32,128) are

- significantly between wards, half of people in central wards to just 1 in 20 in others
- 1 in 8 people born outside of the UK and 2,296 report that they cannot speak English well or at all



- 1.7% identify as LGB
- 0.5 1% identify as Transgender

1 in 20 deaths as a

result of poor air

quality



## Wider Determinants of Health

 Educational attainment is below the national average  Deprivation is most severe in the education, skills and training measure where Swindon is the 47th most deprived out of 152 local authorities – the driver appears to be children and young people's indicators



population from 2001 to 2031



planned for Swindon by 2026

## Objective 4 reduce health inequalities

The impact the NHS has on people's health extends well beyond its role as a provider of treatment and care. As large employers, purchasers, and capital asset holders, health care organisations are well positioned to use their spending power and resources to address the adverse social, economic and environmental factors that widen inequalities and contribute to poor health.

There is a clear link in Swindon between deprivation and life outcomes, with lower life expectancy for both men and women, 42% of children living in poverty located in the most deprived wards and poor educational attainment. Smoking rates (Swindon already has a significantly higher rate than the national average) and substance misuse are higher in deprived areas and there are also higher levels of severe mental illness.

As the population grows older, the focus on ageing well and self-caring is paramount in responding to the growing numbers entering retirement, while leading a full and active life. For those needing support, the development of rapid community response teams and improved support to care homes, aims to reduce unnecessary care in hospital while providing the best and most appropriate treatment in or near to home as possible.

We also want to support our patients to make the best possible decisions for their own care that will reflect their own circumstances and quality of life choices. This will need to be provided with good quality information and the appropriate amount of time to explain what it means. This will allow patients and carers to co-create their future care.

We will not only need to ensure that we are able to continue to provide accessible services to match demand from local communities but with 1.2 million patient contacts a year (2019) and a spend equivalent to £1.2million every day we need to look beyond service provision to our wider impact and role as an anchor institution.

The actions we take, using our position and influence within our own system, could have a significant impact on the life outcomes of our communities, they could also impact on how people use our services and potentially reduce future admissions.



## what this will look like

Collectively, working with our partners across the system, we take responsibility to improve the health and wellbeing of local people, tackle inequalities and achieve better outcomes and access for everyone, ensuring that health and care services are high-quality and to make the most efficient use of our resources.

We will engage with all of our local communities, taking extra care to ensure that we reach those who find it difficult to access our services. By engaging and listening we can co-design services fit for the future needs of our communities.



# Highlighting inequality

We know that in the most deprived areas of Swindon, men live on average 14 years less in good health and women live 12 years less than those in the least deprived areas whereas in Wiltshire, life expectancy for men is 5.8 years lower and for women it is 2.9 years lower. In the most deprived areas of Swindon 42% of children live in poverty and we know that in these areas wider determinants of health, such as below average educational attainment, are present. 27,600 people in Swindon live with a mental health problem while some 860 people live with a moderate to severe learning disability and around 10,750 people live with a moderate physical disability and 5,200 with a severe one.

We want to play a key role in addressing inequalities in our local community and this is set out in our plan for working with our partners to achieve this in our Equality, Diversity and Inclusion Strategy. Central to this will be development of our personalised care agenda empowering patients to have a greater say in their own care and increasing the use of personalised health budgets and social prescribing to improve access to local community services.

We know that the Swindon population is growing (222,193 at May 2019) and will continue to do so with the significant planned housing development. As the population grows older, the focus on ageing well and self-caring is paramount in responding to the growing numbers entering retirement, while leading a full and active life. For those needing support, the development of rapid community response teams and improved support to care homes, aims to reduce unnecessary care in hospital while providing the best and most appropriate treatment in or as near to home as possible.

Given the continuing growth around primary care activity, the focus is on the right person in the right place, delivering the most appropriate health care. With the expansion of clinical roles to ease access and reduce the reliance on always seeing a GP, plans to expand the primary care workforce are essential with increasing numbers of pharmacists, physiotherapists, paramedics and physician associates, taking on greater responsibilities for care within a multi-professional team approach.

# Objective 5 prioritise patient safety

Focusing on our safety culture is central to ensuring we provide high quality care. We believe that unlocking the knowledge, experience and ideas of our staff will be key to achieving the aims set out within this strategy.

Developing a culture where transparency, openness and a true patient-centred approach are evident requires real commitment, from all of our staff, all the way to our board. We want an open learning culture given this is a pre-requisite for sharing insights about safety, while embedding and sustaining change that brings improvements to care.

We'll make use of the 'Just Culture' principles when we reflect on what went wrong to keep focussed on learning and improving.

We want to create an environment where staff are motivated to give their best and supported to succeed.

According to Professor Michael West (2010) healthcare organisations with higher levels of staff engagement have fewer hospital acquired infections, significantly fewer mistakes, better outcomes and better patient experience.

We will ensure that our existing and future leaders are equipped with the skills to lead and succeed in a changing and diverse health system. We've already appointed patient safety specialists who will

what this will look like

We will deliver safe care with compassion and we'll do so in a way that embraces learning and improvement.

We will run a range of quality improvement projects focused on specific harms and interventions, such as the use of NEWS2 (National Early Warning Score), continued work with the Sepsis Care Bundle (Sepsis 6 UK Sepsis Trust) and the use of clinical systems and technology to aid patient safety.

Through appointed Safety Partners we will use the NHS National Patient Safety Syllabus to explain the importance of a safety culture and the role of systems in safety, together with the right approaches to reduce risk and protect patients.

champion the work we have planned and form an important link between turning our strategy into our working culture.

We've also established a new 'Learning Zone' where staff can share and reflect, ensuring that we all learn and improve together.



66

The provision of safe, effective care, leading to positive patient experiences.

Lord Darzi (2008), a leading NHS surgeon.

This definition sets out the three key aspects to quality, all three of which must be present in order to provide a high quality service.

### The NHS Patient Safety Strategy: Summary

#### Continuously improving patient safety Improve understanding programmes People have the enable of safety by skills and drawing on insight from effective and opportunities to sustainable improve patient multiple change in the safety, throughout the sources of most patient safety important whole system. information. areas. Insight Involvement Improvement A patient safety culture A patient safety system





# Objective 6 promote a positive staff and volunteer experience

There's overwhelming evidence that patients receive better care in organisations where staff are motivated and feel they are able to make a difference. That's why we're investing in staff and supporting them to make lasting improvements to services.

Our Improving Together initiative creates an environment where all staff, at every level and in every setting, can freely offer up their ideas for how we will work together to drive everyday improvement.

They are empowered to implement positive changes in their respective areas with support from their divisional or service leads, and with broader support when needed.

#### Ideas don't need to be big transformational changes

It's often small changes and how we do things day-to-day, which make a big difference to the quality of care and services we provide.

Ideas can be:

- Quality improvement initiatives, service changes, experience enhancements
- Reviewing processes and key pathways for efficiencies
- Ouick wins
- Staff engagement, recognition or wellbeing
- Technology based
- Charitable funding opportunities
- Time and cost savings

## what this will look like

Staff and volunteers will feel empowered to make a difference, they will know that their feedback will be listened to and their ideas will be supported. They will feel proud to be part of our Trust.

Improvement will be part of what we do every day. Staff and volunteers will have tools and support to turn ideas in to action, we will be continually improving how we work and the quality of care we provide.

Our staff will have the right level of training and opportunities for personal and professional development will be highlighted in appraisals.

The work that our teams are doing will be communicated through a number of different channels so that we can all learn and celebrate success.

To help generate and share ideas, we will hold themed weeks, where staff can provide ideas through the use of trolley rounds and dedicated events. All ideas will be reviewed and feedback given directly even if the idea is not able to be taken forward.

We want every member of staff to understand their own role in delivering our strategy and how they can contribute to our overall success. By setting clear objectives for the long term and being clear on the steps we need to get there our staff are able to focus effort in the places that will make a real difference.

Our Communications and Engagement Team will ensure we regularly update on good ideas and share great examples to inspire others. Our best ideas will become part of our social media plan and general efforts to raise the profile of the Trust nationally.

#### Ideas roadmap - ideas into action



## **Staff & Volunteer Experiences**



"We frequently have medical outliers on our ward and we often struggle to get doctors to attend the unit especially to update expected discharges so patients can go home."



"It's frustrating when my appointments keep getting cancelled."



"We need better integration with other services to support us in discharging patients safely."



Meet Carol, Ben & Catherine.



"I work at a GP practice that has recently joined the Trust. It's been an incredibly busy time but we have improved our quality governance significantly and invested in our building which has been

welcomed by our patients."



"Working through the Covid-19 outbreak has been exhausting, but I've been supported by my team and the Trust every step of the way."



"There are so many IT systems, some are slow to access and we often have to duplicate the information we input."



Meet Anna and Laura.



"Our department needs to expand but there's no space, this is impacting on our ability to work effectively and provide high levels of care."



"I have an idea on how to make my service better, but it's too difficult to make it



Meet Lucas.



"We need to work more closely with our community partners to tackle health issues at their route cause to keep people healthy and avoid admissions."

Meet Paul, Jo and Rory.



"I volunteer here at The Great Western Hospital. The work keeps me active and I love meeting new people everyday. I would be interested in finding out about other things I could

out about oth get involved with but I'm not sure how I would do that."



"In the community we have been working hard to integrate pathways of care, it's great that we can work as one team with our colleagues in the hospital and primary care to make improvements."



"It feels like family here! Everyone really pulls together."



Names and identifying details have been changed to protect the privacy of individuals.

Our staff and volunteers know our services inside out. They deal with problems and issues everyday and know when things can be done better. Our Improving Together initiative will provide a platform to ensure all ideas are looked at and we will be looking at ways in which we can make decisions quickly and safely. Not all ideas need business cases, project plans and approval by the Board - we'll need to empower our people to take ownership and make changes, where it's appropriate, in an environnment where it's ok to fail safely.

We, of course, need to learn when things don't go according to plan but we also need to remember that when we get it right, we need to share the success - and shout about it!

## develop our talent and promote good leadership

We'll achieve everyday improvement through the continuous alignment of our efforts to our over-arching strategic pillars. By adopting a consistent methodology and backing this up with mentoring and coaching for our leaders we can start our journey. But to have real impact the heart of our approach will be to work collectively, engaging staff, patients and carers and any other stakeholders.

We recognise that fully embedding a quality improvement culture will require a step change in the way we do things. We'll be working closely with our Organisational Development team to make sure we have a range of training and tools available to support our everyday improvement.

We've started this journey through our Improving Together initiative and the formation of our Coach House team, who will deliver the quality improvement training across the Trust.

We've also set out our leadership principles so that we can be clear on what we expect from our leadership teams and they can fully understand the part they play in effective decision making, ownership and making improvement part of what we do every day.

## what this will look like

We will 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 will have an environment where people are freely offering up their ideas and insights for how we can work together to drive improvements and they will be empowered to make the right decisions for their patients.

We will be an organisation that shares and celebrates success, this will be evident internally and externally.

We will have good leaders who demonstrate our leadership principles actively to deliver great patient care.

We will attract talent and nuture development so that we create future leaders.

Our workforce will be representative of the communities we care for and we will ensure that people from all backgrounds are supported to develop into leadership roles.



Our leadership principles:

Patient First

It's all about the patient. We're here for them. We design our services around them.

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."

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.

Get Involved
Stand in their shoes to better understand an issue. Listen, understand, improve.

**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!

**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 oreat.

**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?

Deliver

Focus on our key objectives, deliver them with the right quality in a timely way. Work around setbacks, find a way, meet the challenge!



# Space to grow

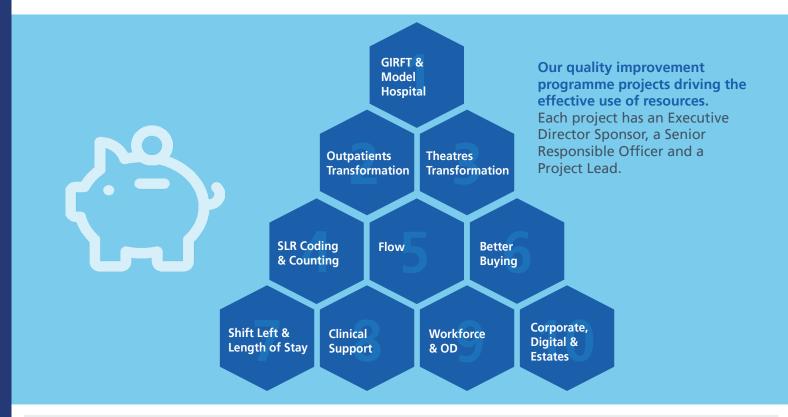
We're all busy and that's not about to change. But we can make sure we allow our teams to take important breaks to complete some important tasks:

- ensure that everyone has up to date objectives this gives our staff a clear direction and allows for an opportunity to review training and any further support needed.
- allow teams to connect in different ways different teams need to connect in different ways, some teams may not even know they need to reach out to others, clear communication and ownership can help support this
- think and reflect we need to give everyone the space and time to do this, it's easy to get caught up and not give this the time it needs.
- learn from mistakes an important part of the learning process, making sure we take measures to avoid repeating them.
- check-in with each other looking at how the team works together, identifying any health and wellbeing issues or non-work concerns, it's ok to not be ok.
- value a good job well done all too often we don't appreciate the good things we do, these are important to allow the reward that it brings and the ability to share that message and inspire others.
- allow for opportunities to do things differently we need to nurture creativity and that drive to do things better, remove the bureaucracy and to allow a safe place for staff to try new things without worrying about failure.
- plan for the future all our services need to plan for how they will operate in the future, the changing needs of the communities we care for, new technologies and new ways of working.

## promote the effective use of resources

The NHS belongs to us all. It is there to improve our health and well-being, support us to keep mentally and physically well, to get better when we are ill, and when we cannot fully recover to stay as well as we can to the end of our lives.

To make sure that we can provide the best care for the maximum number of people it is vital that we make every penny count.



## what this will look like

We will have a clear focus on better quality, sustainable care and better outcomes for patients. We will lead the promotion of good practice to aid continuous innovation and improvement.

Through the effective use of data we will drive good and informed decision making. Our efficient services will see the Trust operating at a financial balance and able to invest in priority areas for future development.

We will have a holistic approach to planning patient discharge, transfer or transition to other services that are more appropriate for the delivery of care or rehabilitation.

We will be operating using an acceptable and affordable level of agency workers and have a low staff turnover and sickness level. Innovative and efficient staffing models and roles will be used to deliver high quality and sustainable care. This will include ensuring that there is an appropriate skill mix

for the care being provided.

Transformational change projects and effort will be focused on those which can best deliver against our brekthrough objectives and contribute to our strategic pillars.

This may mean that we pause some projects so that we can ensure we use our resources effectivey and deliver what we have set out to achieve.









### Let us know about your experience

We welcome feedback, good or bad, through our Patient Advice and Liaison Service (PALS). We will investigate all complaints thoroughly and take action if problems are identified. We will also follow-up on positive feedback and make sure that staff, volunteers and teams receive it.

#### How to contact us:

Online form on our website.

Complete and return our 'Tell Us What You Think' (Easy Read) contact form, available when you visit.

Email: gwh.pals@nhs.net Phone: 01793 604031

Visit PALS on the ground floor of the Great Western

Hospital, Swindon. Our offices are open

Monday - Friday, 9.00am - 5.00pm.

Write to us at:

Patient Advice and Liaison Service (PALS)

**Great Western Hospitals NHS Foundation Trust** 

**Great Western Hospital** 

Marlborough Road

**Swindon SN3 6BB** 

