

Agenda Item 35/11

UPDATE ON CORPORATE OBJECTIVES

Update on 2010/11 objectives

Although it is obviously too early to have definitive information on how well we have done against the Trust's seven key corporate objectives, as we approach the end of the year achievement looks as though it will be roughly as follows:

- 1. Achieve agreed financial surplus: As indicated elsewhere in the Board papers, it now seems likely that we will achieve the revised surplus agreed with the SHA of £7.5m.
- 2. Become a Foundation Trust: As indicated in the half year report and as well known to Board members, this target could not be achieved in this year because it depended upon resolution of our application for debt rescheduling, the results of which we are awaiting. However, during the course of this financial year, the Trust has taken all necessary steps and achieved all that could be achieved in progressing our Foundation Trust application and that application remains fully alive and credible. So original objective not achieved, but success in progressing effectively everything possible that lay behind the objective.
- 3. Significantly improve in-patient survey results: We originally intended to do a customised in-patient survey in January to test this. For financial reasons we decided not to proceed with that survey. We have only just got the results of the 2010 national survey on a comparative basis, and we have not yet been able to do full detailed analysis, but it seems unlikely these will show we had achieved the objective by August 2010. Other indicators such as our patient experience national award are positive but overall it seems unlikely we would have achieved the major improvements targeted in this objective by January 2011.
- **4. Substantially improve out-patient survey results:** As I reported at half year, this objective has in essence been achieved. There is no doubt that the out-patient experience as reported in two surveys is dramatically better than it was.
- 5. Maintain and improve standards: We currently expect to maintain full CQC registration, but that is not yet confirmed. We also agreed to replace the CNST target, as this inspection has been deferred until June 2011 with a target on achieving 90% VTE assessment by year end. We are now very close to this target and as reported elsewhere in these papers, should achieve it.
- 6. Increase appraisals and mandatory training: These have undoubtedly increased very significantly over the last year, and we will be close to the 80% target on both. I suspect we will fall short on at least one of the two.
- 7. Implement Service Line Reporting: The essence of this target was to move Service Line Reporting forward sufficiently to enable it to be used in budget setting for this year. As indicated in the budget paper that the Board is also considering today, that has been achieved. Broad SLR performance by Division is also now being reported to Divisions monthly. The Finance Committee agreed before Christmas and reported to the Board that full roll out of SLR should be achieved by June. This is still on track.

I will give a definitive report on achievement against corporate objectives at the May Board meeting.

West Hertfordshire Hospitals NHS Trust

Initial proposals for 2011/12

The new financial year starts the day after the Board meeting and it is obviously important for the Board and the corporate team to have a broad sense of its key objectives for the start of that year. Equally, what these precisely will be will depend on the final outturn for 2011/12 in terms of outputs, outcomes, activity etc. much of which we won't have definitive information on until later in April, and the exact nature of the 2011/12 contract agreement which at the time of drafting this paper is not known.

It is also worth making a further point about the contract, namely that a crucial corporate objective every year is to ensure that the Trust secures a reasonable and achievable contract. It is very difficult to fit this into corporate objectives for reasons of timing and also because of the difficulty of demonstrating what is achievable and what isn't. I have therefore not attempted this year to put in an objective that reflects this crucial activity.

The executive team have had a preliminary discussion about key objectives and our view is that the areas of critical focus and achievement in the coming year are likely to be as follows:

- 1. **Achieving our key financial target** remains of paramount importance and will be as testing as ever, with a large cost improvement programme and static or shrinking funding overall.
- 2. **Foundation Trust status:** Again, it is of crucial importance that we progress this, arguably even more so given the current government's decision that remaining a non-Foundation Trust is not an option.
- 3. **Quality and Safety:** Achieving CNST Level 2 again appears to be the most important definable target.
- 4. **Dealing with emergency pressures:** Operationally this has been the most challenging task we have faced in 2010/11, particularly over the winter and it is imperative that we ensure we are well equipped to cope with emergency pressures throughout the year but particularly next winter. At this point in time, the best way of measuring this would appear to be the five / six outcome measures that are to replace the A&E target and which are being given much more prominence nationally.
- 5. **Patient experience:** Improving this is of key importance. Unfortunately the annual survey is not a particularly useful marker of what we should achieve in 2011/12 as it is undertaken in August and relates to an increasingly small section of our patient population. Also, the outpatient experience is now much more positive. The proposal is that we try to come up with a credible measure that we can work on right through the year probably focussing on our most pressurised area or areas (AAU being an obvious candidate). We will have a defined starting point and to be successful will need to show really significant measurable improvement.
- 6./7. Once we have agreed the **key parameters in the 2011/12 contract** we should be able to extract one or two of the most important as key objectives.
- 8. If we fail to achieve 80% of **appraisals and training** it may be appropriate to leave this in but with a higher target for 2011/12.

As indicated at the outset, this is necessarily very general but based on it I will come back to the Trust Board at their next meeting with precise corporate objectives building on the above including what the criteria for success are in each case.

Jan Filochowski Chief Executive