

Annual Plan 2006/07

As a Foundation Trust we remain firmly part of the NHS. The difference is that we will have more freedom to act more flexibly in the interest of our patients. We are accountable to our membership and not directly to Whitehall. This means that we can take decisions more quickly, that are in our local patients interests and we will be able to cut out bureaucracy.



The year ahead

We know that patients want safe, effective and convenient services which are focussed on their personal needs. This is why we are committing ourselves to improve the patient's experience of our services so that we will be the hospital that people will want to choose to use.

We also know that every pound that is not spent efficiently is a pound that we cannot be spent on improving the patient experience and improving our services. We know it is important therefore to improve our performance and efficiency.

We are providing services in a competitive environment where services have to be provided within a national set of prices and where we will not be paid if patients chose an alternative hospital. This system is called 'payment by results' and it requires us to continue to reduce our costs to ensure that we have sufficient funds to continue our financial viability, thereby safeguarding and developing our services.

In the inside pages you will find the Board's plans for the year. We have chosen 8 key themes for the development of the Trust and each of these themes has a number of plans that we will be pursuing. There are 30 plans in total – please take the time to look at these plans and see how they relate to the Trust's development themes and to our core purpose of improving the patient's experience.

You will also see our investment plans for this year which total £8.5million. This will enable us to provide many new facilities for our patients.

Later this year we expect to be able to announce approval for the major redevelopment of the hospital that will provide new high quality facilities to replace the old Victorian wards.

On the back page you will see that we have selected 10 key targets for improvement from the Healthcare Commission's national set of over 30 standards and targets. These 10 are our most difficult and challenging targets and we will therefore need utmost teamwork and commitment from our staff to make the necessary improvements.

This is the essence of what being a Foundation Trust is all about – having the motivation to find our own solutions to the problems and challenges that we face. We know that we have the quality of staff to make the difference to our patients.

M. A. MORRIS

Margaret Morris - Chair

David Dalton - Chief Executive

Key Facts for the Year

The Trust's planned income is £225 million. Most of this money will be spent on our 4,300 staff who will work together to provide services to:

40,800 inpatients
18,600 day cases
60,000 new outpatients
202,000 follow up patients
74,300 emergency attenders

By December 2006, no one will wait more than 10 weeks for an outpatient appointment and 17 weeks for inpatient treatment.

Our plans for Salford Royal NHS



Strong corporate governance and organisational development

- Establish FT Council of Governors and develop programmes with the new
- Embed new Board governance and assurance including risk management at clinical grade
- Ensure effective reporting systems are in place to ensure serious untoward events are reported
 - All staff to receive an annual appraisal
 - Pursue programme of leadership development



Partnerships and Joint Ventures with other service providers

- Explore the concept of 'St Marys at Salford Royal' neonatal service
- Develop 'Christie at Salford Royal' initiative to bring a Cancer Centre to the hospital
- Develop cancer service models with Wigan and Bolton for the North West
- Review opportunities to extend the Neuro ICATS (Integrated Clinical Assessment and Treatment Service) model involving other service providers



Satisfying the needs of commissioning

- Move and discharge patients
- Maintain and continually improve relationships
 - Respond to patient surveys
 - Develop our relationships
- Encourage more people to be members of our



Clinical and organisational performance

- Clinical groups to monitor performance supported by an electronic dash board of key performance indicators
- Clinical and non clinical teams to work together and achieve the Trust's Healthcare Commission Health Check targets, including the top ten identified in this document (see backpage).



Finance and development

Develop work
new Council
e systems,
group level
in place for
d incidents
al appraisal
development

Partners

Service
re to
l site
North
ector
inical
service
viders

Partners and users

ts more effectively
ip with Salford PCT
veys and comments
ip with Salford GPs
r Foundation Trust



Financial reform

- Achieve £6.5m and identify savings for coming years
- Clinical Groups to PBR tariffs

Service

- Develop community services
- Improve patient experience
- Pursue and develop the

Strategic

- Promote and champion patient
- Expand patient services
- Pursue Manchester Assessment
- Support Outline



Education and research

- Integrate the Trust's Research & Development Directorate with Salford PCT to enable joint working
- Develop ways of protecting and increasing Research and Development income
- Implement new undergraduate medical education strategy in partnership with Wigan and Bolton
- All staff to be compliant with CNST Level 3 education, learning and training requirements



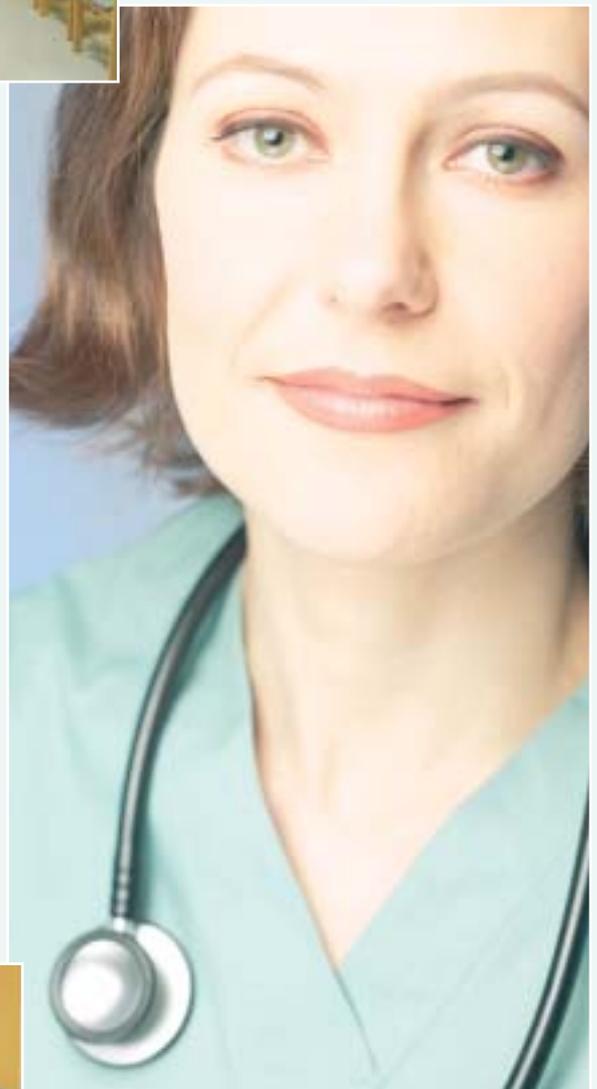
Form and the control of costs

5m cost improvement programme
y ongoing cost reduction initiatives
years
groups to assess service costs in relation
ff



ce developments of the SHIFT programme

Develop an effective design for the new hospital which results in
Commissioner approval of the Full Business Case
Implement Service Change Management and Delivery projects,
including respiratory disease and self care developments.
Execute the Trust's five year IM&T strategy, implementing PACS
making improvements to clinical coding systems
Develop local IT investment and delivery plans that complement
revised Connecting for Health programme



ic service change & developments

ce the retention and the development of maternity, neonatal
Children's services
renal in-patient services on the Salford Royal site and out-
dialysis at Wigan.
a strengthened Neurorehabilitation model for Greater
Manchester and the development of Neuro ICATS (Integrated Clinical
Assessment and Treatment Service) to improve patient pathways
at the process for gaining agreement to the Cancer Centre
Business Case being developed by the Christie Trust



Trust's top ten targets

In 2006/07 effective teamwork will help us achieve our top ten targets. The pursuit of each one will improve our services to patients and enable us to work more effectively.

Emergency bed days

Support development of services, (particularly in the community and in the Emergency Department), which reduce the need for patients to be admitted as an emergency, or which reduce the time they need to stay in hospital. This should particularly benefit patients with long term (chronic) conditions.

Total time in A&E

Reduce the time our patients spend in A&E from arrival to admission, transfer or discharge, consistently achieving the 4-hour wait target.

Patient experience

Improve the patient experience by regularly monitoring and effectively responding to patient feedback. This year patients have asked us to improve they arrangements for their discharge from hospital.

Healthcare associated infections

Achieve consistent reductions in MRSA and levels of other healthcare associated infection.

Cancelled operations

Minimise cancellations and ensure our patients are given a binding date that falls within 28 days of a cancelled operation.

Cancer care

Ensure all cancer patients are treated within two months of their referral.

Tertiary outpatient waiting times

Ensure all tertiary outpatients are seen within 21 weeks of a GP written referral.

Diagnostic waiting times

Achieve local targets to ensure the Trust meets the 18-week national standard.

Length of stay

Identify safe and effective ways of reducing our patients' length of stay, so that more patients can be treated.

Staff sickness and absence

Reduce levels of sickness absence and the costs associated with covering absences.

Future investment ...

This year we will make huge investments in the hospital to improve our environment and help us achieve our core objective of improving the patient experience



... £8.5m of improvements

Work will start on **new theatres and day case facilities** to allow us to treat more patients and offer **more cancer and orthopaedic surgery**. This £1 million investment will also give us space to develop a **new day case service for children**.

Half a million pounds will be spent on improving the environment for our heart care patients with the **creation of a new heart care unit**. Investing in the updated accommodation will offer us the opportunity to introduce a **new cardiac catheterisation facility**.

Work to upgrade and **refurbish the microbiology laboratory**, to the value of £0.7m will be completed this year and our **new £1.2 million MRI scanner**, which started scanning patients in June, will improve the scope and quality of patients' diagnostic scans.

Continued expansion of our **renal services** will see £0.45 million invested in **7 extra specialist beds** at Salford Royal Hospital and **12 new dialysis stations at Wigan**.

Adding to our innovative practice we will spend £0.15 million on an **automated robotic dispensing unit**, which will create a safer, more efficient and patient responsive pharmacy service.

These investments will be supported by the spending of £4.45 million on important areas of **maintenance, new medical equipment** and **site preparations** for our forthcoming major redevelopment. Work is due to start on the PFI scheme in March 2007, with the possibility of some enabling works from September 2006, **creating a modern hospital to house our progressive services**.