

Corporate Objective 1: Provide Safe, High Quality and Effective Care

Principal PfA Targets	Supplementary PfA Targets	Trust-Specific Priorities
<ul style="list-style-type: none"> • A reduction in Health care associated infection (PfA 2) 	<ul style="list-style-type: none"> • Proper management of staff health and safety and support, specifically reducing the incidence of attacks and abuse on staff (PfA 2.1) • Learning from at least three major interventions which are known to save lives (PfA 2.2) • Post-discharge surveillance of surgical site infections following Caesarean Section (PfA 2.4) • Full implementation of DHSSPS Safety First framework action plan and that safer, high quality care is a standing agenda item for Board meetings (PfA 2.5) • Staff training in infection prevention and control (PfA 2.6) • Implementation of 'Improving Patient Safety, Building Public Confidence' (PfA 2.7) • Compliance with Emergency Planning Controls Assurance Standard (PfA 2.8) • Recommendations from the Child Protection Overview report are implemented (PfA 6.4) 	<ul style="list-style-type: none"> • To establish systems and capabilities to ensure compliance with the Trust's statutory obligations, including its responsibilities as Corporate Parent. • To review information flows and performance reporting on the Trust's discharge of statutory functions, identify key information requirements and design reports which will enable performance to be evaluated. • To embed within the Trust's structures the capacity and capability to ensure safe and effective care. • To implement the recommendations of the Regulation and Quality Improvement Authority (RQIA) review of the Quality Standard for "Safe and Effective Care". • To implement the Trust's Action Plan to address the recommendations of the SSI Overview Report.

Corporate Objective 2: Ensuring Accessible and Responsive Care

Principal PfA Targets	Supplementary PfA Targets	Trust-Specific Priorities
<ul style="list-style-type: none"> • Improvements in access to consultant-led elective care (PfA 3) <ul style="list-style-type: none"> • Outpatients (13 weeks) • Diagnostics (13 weeks) • Inpatient and Day Case treatment (21 weeks) • Improvements in access to AHP services (PfA 4) • Improved access to cancer assessment, diagnosis and treatment (PfA 5) • Reduced waiting times in A&E – a maximum waiting time of 12 hours moving towards a 4 hour wait for 95% of patients (PfA 6) • Improved waiting times for fracture treatment, with 75% waiting no longer than 48hours (PfA 7). • Timely hospital discharge (PfA 9) • Improved access for assessment (8 weeks) and provision (12 weeks) for the care needs of older people with continuing care needs (PfA 11) • Increased numbers of foster carers (PfA 12) 	<ul style="list-style-type: none"> • All referrals for suspected breast cancer to be seen within 14 days (PfA 3.1) • Increased capacity of paediatric and neonatal intensive care service (PfA 3.2) • All patients on waiting list with severe inflammatory arthritis to have commenced treatment (PfA 3.3) • Maximum waiting time of 13 weeks for MS patients assessed as eligible for disease modifying treatment (PfA 3.4) • Timely access to renal dialysis services (PfA 3.5) • Improved access to GUM services for patients assessed as clinically urgent (PfA 3.6) • Any patient waiting more than 12 hours in A&E to be reported to DHSSPS (PfA 4.1) • Increased percentage of people living independently at home, including increased direct payment cases (PfA 5.2) 	<ul style="list-style-type: none"> • To embed Person Centered Planning as an approach to identifying and responding to the needs of service users. • To continue to develop community and primary care services to meet the needs of older people, people with a learning disability, people with physical and sensory disability, people with mental health problems and people with chronic disease. Specific actions for 2007/08 include: <ul style="list-style-type: none"> • Review of Mental Health Services; • Review of Intermediate Care; • Review of non-acute hospital care for Older People. • Review of Statutory Residential Care • To deliver more integrated care through the development of a comprehensive multi-disciplinary team approach in: <ul style="list-style-type: none"> • Mental Health services; • Care of Older People

	<ul style="list-style-type: none">• 50% of young people coming into care participate in a family group conference (PfA 6.1)• Increased numbers of young people leaving care should be living with their former carers (PfA 6.2)• Regional recruitment and training team for foster care (PfA 6.3)• Creation of specialist eating disorder posts (PfA 7.2)	
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Corporate Objective 3: Improving Health and Wellbeing

Principal PfA Targets	Supplementary PfA Targets	Trust-Specific Priorities
<ul style="list-style-type: none"> • A reduction in smoking prevalence by 7% (PfA 1) 	<ul style="list-style-type: none"> • Full coverage of diabetic retinopathy service (PfA 1.1) • 10% reduction in births to mothers under 17 years of age (PfA 1.2) • Reduction in binge drinking (PfA 1.3) • Reduction in illicit drug taking (PfA 1.4) • Recording BMI of year 8/9 pupils in school (PfA 1.5) • 92% uptake of MMR (PfA 1.7) 	<ul style="list-style-type: none"> • To work with the Southern Investing for Health Partnership to support and implement regional and area health promotion strategies and the Southern Health Improvement Plans. • To work alongside local partners to develop a wellbeing strategy that focuses on health promotion, disease prevention and community development. • In partnership with key stakeholders, to develop robust plans to support local communities consistent with the “Protect Life” Strategy.

Corporate Objective 4: Effective User and Community Engagement and Partnership Working

Principal PfA Targets	Supplementary PfA Targets	Trust-Specific Priorities
		<ul style="list-style-type: none"> • To develop and implement a User and Community Development Strategy, drawing on the Southern Health and Social Services Board's Strategy and best practice in the legacy Trusts and beyond. • To review the arrangements for effectively involving users in service planning, and develop a robust process for the Southern Trust which builds on existing engagement arrangements developed within the legacy Trusts. • Engage young people identifying how the Trust can increase their meaningful participation in Case Conferences and Looked After Children Reviews. • To develop communication strategies to keep service users and communities informed about actual and proposed changes in service provision. • Embed a community development ethos to working in partnership for the development and delivery of high quality services.

Corporate Objective 5: Driving Innovation, Continuous Improvement and Modernisation

Principal PfA Targets	Supplementary PfA Targets	Trust-Specific Priorities
<ul style="list-style-type: none"> • Submit targets and reform plans for improving the response to, and support for, people with mental health problems presenting in primary care (PfA 13). • Resettlement of people currently being cared for in learning disability hospitals to appropriate places in the community (PfA 14) 	<ul style="list-style-type: none"> • Further augmentation of community mental health and learning disability services (PfA 7.1) • Increased resettlement from mental health and learning disability hospitals (PfA 7.3) • Continued development of services for people with autism (PfA 7.4) • Produce evidence of more flexible working patterns, evening and weekend working (PfA 9.3) 	<ul style="list-style-type: none"> • To develop and implement a performance management framework which will drive performance improvement, service reform and modernisation. • To establish an effective performance reporting system throughout the Trust which ensures that those staff charged with delivering key targets can access information about their performance. • To develop the capacity within the Trust to detect and appraise good practice and ensure application across the Trust and beyond. • To develop a SHSCT Modernisation and Reform Plan by October 2007, which will include the ongoing development of Managed Clinical Networks (MCNs), Integrated Clinical Assessment and Treatment services (ICATs) and the Trust's service improvement priorities. • To agree a Capital Development Plan and associated CRL processes which will support the implementation of

		decisions in relation to 'Delivering Better Services' and the Primary and Community Care Infrastructure Programme, and will facilitate the Trust's reform and modernisation priorities.
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Corporate Objective 6: Ensuring Effective Organisational Governance

Principal PfA Targets	Supplementary PfA Targets	Trust-Specific Priorities
	<ul style="list-style-type: none"> • Action plan in place to address the recommendations from RQIA governance reports (PfA 2.2) 	<ul style="list-style-type: none"> • To develop and implement an Integrated Governance Strategy and Framework for managing clinical and Social Care Governance. • To implement a Board Assurance Framework. • To achievement compliance against all Controls Assurance Standards. • To establish processes to deal with the findings and recommendations of RQIA inspections and audits. • To implement an Action Plan to address the RQIA Review findings in relation to the Quality Standard “Corporate Leadership and Accountability”. • To implement a robust risk management strategy to integrate clinical and non-clinical risk management activity in order to improve performance and outcomes.

Corporate Objective 7: Organisational and Workforce Development

Principal PfA Targets	Supplementary PfA Targets	Trust-Specific Priorities
		<ul style="list-style-type: none"> • To effectively manage the transition from the four legacy Trusts to the new Southern Health and Social Care Trust. • Improved service integration and management structures. • To embed professional leadership throughout the Trust. • To develop an Organisational Development Plan and Workforce Strategy that will integrate people processes and technology to achieve sustainable improvement.

Corporate Objective 8: Making Best Use of Resources

Principal PfA Targets	Supplementary PfA Targets	Trust-Specific Priorities
<ul style="list-style-type: none"> • Submit Productivity Improvement Plans (PfA 16) 	<ul style="list-style-type: none"> • Implement agreed actions to meet the targets set in the Pharmaceutical Service Improvement Programme (PfA 8.2) • Co-operate with DHSSPS strategy for surplus assets (PfA 10.1) • Reduce estate backlogs in respect of statutory and other standards (PfA 10.2) • Reduction in staff turnover, vacancy rates and the costs of locum staff compared to 2006/07 (PfA 9.1) • Reduction in absenteeism rates (PfA 9.2) 	<ul style="list-style-type: none"> • To make best use of the capacity of our Hospital network, maximising the potential of cross site working and sharing of resources. • Develop plans to realise efficiency savings and/or enhanced productivity through workforce modernisation in Children & Young People's Services Directorate. • To ensure appropriate management and administrative cost savings are generated through the ongoing implementation of Trust structures.

Corporate Objective 9: Financial Viability, Reform and Control of Costs

Principal PfA Targets	Supplementary PfA Targets	Trust-Specific Priorities
<ul style="list-style-type: none"> DHSSPS and all HPSS organisations should live within the resources allocated and achieve financial balance (PfA 15) 	<ul style="list-style-type: none"> Achievement of DHSSPS efficiency targets (PfA 8.1) 	<ul style="list-style-type: none"> The delivery of planned efficiency savings in 2007/08 and subsequent years To prepare for the introduction, from April 2008, of a tariff-based system for the allocation of funds. To live within the resources allocated and achieve financial balance in 2007/08 and beyond. Review the use of both locum and agency staff, seeking to reduce costs compared to 2006/07.