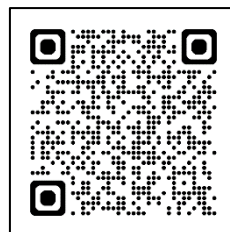




Quality Account Summary 2023/24

October 2024



This Quality Account summary highlights just some of the key Quality priorities for 2023/24 and the Trust's plans for 2024/25. Further information is in the full Quality Account, available at [Quality Account 2023/24](#)

Statement on Quality from the Chief Executive

I am pleased to present our Quality Account for 2023/24 for Salisbury NHS Foundation Trust, which shows how we have performed against our priorities this year and sets out the main areas of focus for 2024/25.

Improving Together is our way of delivering effective and sustainable change where it matters most, providing a sharp focus on a problem and enabling all colleagues to contribute to making change happen. This methodology aligns with our partners at Royal United Hospitals Bath (RUH) and Great Western Hospital Swindon (GWH).

Our area has a higher than average elderly population and falls are a significant contributor to patient harm and extended stays in hospital. Therefore, one of our targets for 2023/24 was to reduce the number of patient falls in the hospital. I am pleased that we exceeded our target in 8 out of the 12 months.

We also targeted a more sustainable bed occupancy rate of 96% and a reduction in our spend on agency staff and we have made good progress but have not quite achieved either target.

We recognise that the year has been difficult for the NHS with industrial action impacting our performance. However, we have been able to introduce Same Day Emergency Care to improve the level of same day discharge from our emergency department and improve our frailty service with significant reductions in length of stay.

The physical environment can make a significant difference to patient experience and there is no doubt that many parts of the estate at Salisbury Hospital are old, dating back to 1943. It was therefore pleasing to see the refurbishment of White parish Ward completed.

Our new Imber Ward within the new Elizabeth Building will be opening in the summer of 2024 and will provide 24 new beds providing a modern environment to care for our elderly patients.

One of the ways in which the quality of care is recognised is through the Sharing Outstanding Excellence Awards. Patients, family friends or staff can nominate someone.

"You guys obviously know how to effectively run a ward; I can't begin to tell you how very impressed I was."

"This ward is incredible. all the staff have shown an unwavering amount of patience, empathy and emotional support to my mum and also to me."

Staff remain our most valuable resource and we want all our staff to flourish and develop their skills.

We have introduced new training for leaders and aspiring leaders, initiated the staff-focused Tent Talks to provide inspiring speakers, wellbeing events and some fun for all staff to benefit from and continue to deliver a range of staff benefits.

I will end by expressing a huge thank you on behalf of the Trust Board to all our staff in all professions who every day work together to deliver compassionate and high quality care to our patients and strive to run an efficient and friendly hospital. We could not do this without the contribution from each and every one of them.

To the best of my knowledge the information in this document is accurate.

Lisa Thomas
Interim Chief Executive Officer



Looking back at 2023/24 – What did we say we would do?

Supporting our **People** to make Salisbury NHS Foundation Trust the Best Place to Work

Staff Availability

Reducing agency spending on staff



Target **3.7%**

As a percentage of gross pay

How have we performed?

We achieved close to our performance targets by the end of the year. Agency spend fell to

3.77%

in March 2024 (with similar figures seen in the months of December 2023 and January 2024).

Improving the health and wellbeing of the **Population** we serve

Reducing Falls



Target **<7**

Per 1,000 Bed Days

How have we performed?

There has been a significant improvement in our performance over the last year, and we have been below our target for

8 months of the year

and is a significant achievement.

Improving the health and wellbeing of the **Population** we serve

Time to First Appointment



Target **30%**

Reduce from an average of 126 to 87 days in 23/24

How have we performed?

Unfortunately, we have not achieved the performance targets set.

In 2024/25, we have continued this priority as one of our breakthrough objectives in recognition that we did not see the impact we wanted in 2023/24.

Working through **Partnerships** to transform and integrate our services

Reducing Bed Occupancy



Target **96%**

Down from 105% as of March 2023

How have we performed?

We have seen an overall reduction in bed occupancy (with a consistent run below the mean average since June 2023). Bed occupancy dropped to

98%

in March 2024, which is close to our target

Our 12-18 month 'Breakthrough Objectives' for 2024/25



Increasing Staff Retention

We aim to reduce the turnover for additional clinical services (HCA) from an average of **21%** in 2023 to **15%** by March 2025.



Managing Patient Deterioration

We aim to increase the percentage of NEWS2 observations taken on time from **29%** in Feb 2024 to **50%** and then toward **75%** within the year.



Reducing Time to First Outpatient Appointment

We aim to reduce the time to first outpatient appointment from a trust-wide average of **137** days down to **90** days in 2024/25.



Creating Value for the Patient: Improving Productivity

We aim to improve our productivity from **-18%** compared to 2019/20.

Further information is available on pages 20 to 25 of [Quality Account 2023/24](#)

Clinical Effectiveness

IN 2023/24, WE AIMED TO IMPLEMENT NEW COMPUTER SOFTWARE FOR MANAGING CLINIC AUDIT WHICH WILL BE FULLY EMBEDDED AND IN USE ACROSS THE TRUST BY OCTOBER 2023



The Audit Management and Tracking (AMaT) software was launched on **25th September 2023**

There were **372** registered users and **274** clinical audits being managed within the system shortly following its launch.

In 2024/25 we:

- ✓ Aim to embed **Improving Together** as the vehicle for driving continuous improvement across the Clinical Effectiveness portfolio. We plan to increase trust-wide engagement with our new Audit Management and Tracking system (AMaT) and to embed our new Clinical Audit and Mortality processes that were launched in 2023/24

Further information is available on page 17 and pages 64 to 67 of [Quality Account 2023/24](#)

Patient Experience

IN 2023/24, WE AIMED TO RESPOND TO 90% OF COMPLAINTS WITHIN AGREED TIMESCALES, & TO ACHIEVE A MINIMUM RESPONSE RATE OF 15% USING THE FRIENDS AND FAMILY TEST (FFT)



Complaints Divisions have actively engaged with identifying opportunities for early resolution. This has had some success, with Quarter 3 indicating almost **10%** of complaints logged were considered to have had an earlier resolution than anticipated.

Friends & Family Test

Implementation of a digital solution was delayed due to resourcing challenges, work on this recommenced in December 2023 and went live in Spring 2024.

In 2024/25 we:

- ✓ Aim to achieve a minimum response rate of 15% using the Friends and Family Test and maintain at least 95% good / very good rating.
- ✓ Aim to respond to 85% of complaints within their agreed timescale and reduce re-opened complaints to less than 5%.
- ✓ Pledge to increase our response rates to real-time feedback and maintain at least a 90% positive experience rating.

Further information is available on pages 15 to 16 and pages 61 to 63 of [Quality Account 2023/24](#)

Patient Safety & Risk

IN 2023/24 WE PREPARED AND PUBLISHED OUR PATIENT SAFETY INCIDENT RESPONSE PLAN, WHICH WILL DETERMINE HOW THE TRUST RESPONDS TO PATIENT SAFETY INCIDENTS IN THE FUTURE USING THE NEW PATIENT SAFETY INCIDENT RESPONSE FRAMEWORK MODEL (PSIRF)

To improve our approach to responding to patient safety incidents we implemented the national change from the Serious Incident Framework to NHS England (NHSE)'s new Patient Safety Incident Response Framework in January 2024.



In 2024/25 we:

- ✓ Will continue to embed our Patient Safety Incident Response Plan and Policy, which promote proportionate responses, engagement with the patient, family, carers and staff and focus more on sharing the learning.

Further information is available on page 19 of [Quality Account 2023/24](#)

Key Achievements of our Clinical Divisions

Clinical Support & Family Services Division

- ✦ **Improving Together** : Divisional Management Team worked with Service Leads to embed this trust-wide quality improvement approach.
- ✦ **National NHS Staff Survey**: Continuing engagement with staff and achieved highest clinical Division response rate for third year in a row.

Medicine Division

- ✦ **Divisional structure investment** supporting operational functions and performance.
- ✦ **Established Governance Structure** with regular well represented forums.
- ✦ **Overachievement of Cost Improvement Programme** against 4% target with firm control on governance and overspend.
- ✦ **Non-elective recovery** - improvements in 65 & 52-week waiting lists.
- ✦ **Flexible Working** - best performing Trust for flexible working for Emergency Department (ED) Registrars.

Surgery Division

- ✦ **Significant reduction in long-wait patient cohort in surgery.** The Division is projecting a year end position of 23 patients waiting longer than 65 weeks from around 2,000 patients.
- ✦ **Sustained reduction in patient falls**
- ✦ **NHFD (National Hip Fracture Database) BPT (Best Practice Tariff) performance** In 2023, we met the 80% target (80.23) for the first time since 2020.
- ✦ **Awarded Gold Level National Joint Registry Quality Data Provider Award.**

Women & Newborn Division

- ✦ **100th anniversary of Beatrice Maternity Unit.**
- ✦ **Compliance with CNST Maternity Incentive Scheme**, compliance increased from 5/10 in 2023 to 9/10 in 2024
- ✦ **Maternity Safety Support programme**, we have moved into the sustainability phase.
- ✦ **Creation of Divisional Behaviour Charter**, showing colleagues behaviour that is expected.
- ✦ **Nurse led Early Pregnancy Unit, Menopause and Pessary clinics**, providing continuity of care for the patient.
- ✦ **Renewal of Fertility Service Licence** for four years.

Further information is available on pages 79 to 82 of [Quality Account 2023/24](#)