



MAKING A DIFFERENCE

A summary of our Quality Report
plus key information about our
performance and future priorities.

PROUD TO MAKE A DIFFERENCE

SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST



MAKING A DIFFERENCE

At Sheffield Teaching Hospitals NHS Foundation Trust we remain committed to delivering good clinical outcomes and a high standard of patient experience both in our hospitals and in the community.

Thanks to the dedication and professionalism of our staff, volunteers and partners we have a strong track record in this area. We are never complacent and continually look to adopt best practice, drive innovation and most importantly learn and improve when we do not meet the standards we have set for ourselves.

This drive for improvement is embodied within the Trust's recently refreshed Corporate Strategy 'Making a Difference'. The strategy outlines five overarching aims:

- Deliver the best clinical outcomes
- Provide patient centred services
- Employ caring and cared for staff
- Spend public money wisely
- Deliver excellent research, education and innovation.

In summary, our priority is to do all we can to continually implement quality improvement initiatives that further enhance the safety, experience and clinical outcomes for our patients. However, the NHS nationally is currently operating within a very tough financial climate and our Trust is also seeing increases in demand for both emergency and planned care.

With the support of our staff and partners we are addressing these financial and demand challenges by adopting new ways of working, forging partnerships with

other health and social care providers and continuing to engage our staff by actively pursuing a culture of innovation and involvement.

As a consequence, I am pleased to report that Sheffield Teaching Hospitals NHS Foundation Trust has continued to perform very well in 2017/18 and has made good progress against our quality priorities.

It was exceptionally pleasing that national and local survey results during 2017/18 consistently showed that the majority of our patients and staff would recommend the Trust as a place to receive care and to work.

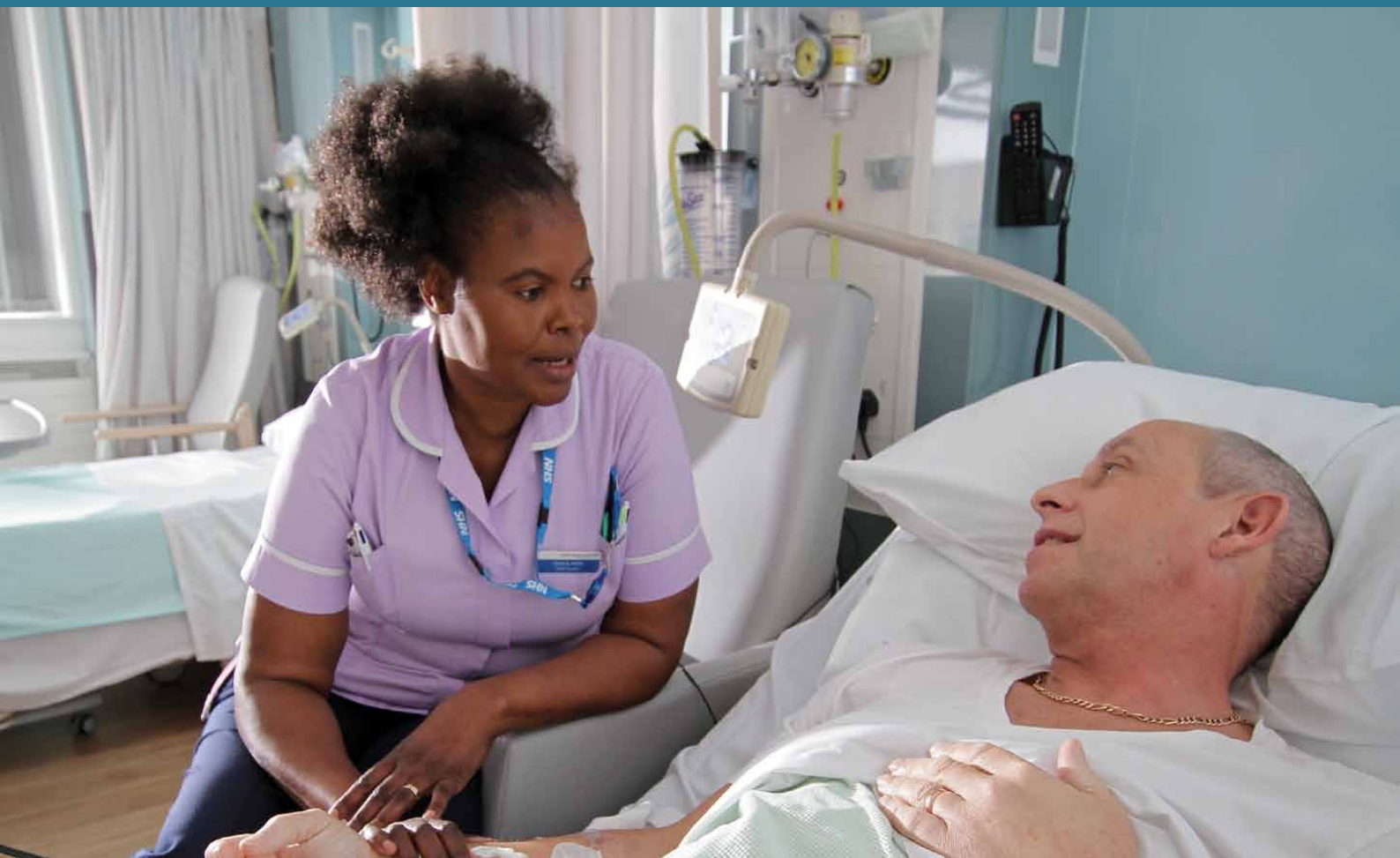
Indeed our staff won a record number of quality and safety awards throughout the year.

During 2017 we also called upon everyone who works for the Trust to be part of developing our new People Strategy which sets out our vision and plans to ensure Sheffield Teaching Hospitals is a 'brilliant place to work' as well as a brilliant place to receive care.

I hope you find the following pages interesting and you can be assured we will all continue to work hard to provide you with the best care possible.



Sir Andrew Cash OBE
Chief Executive



WHO WE ARE

We are one of the UK's biggest and most successful providers of hospital and community based healthcare.

We provide comprehensive NHS services ranging from maternity services to care of the elderly. We provide services to Sheffield, South Yorkshire, Mid Yorkshire and North Derbyshire but also specialist services to all parts of the UK.

We have a long history of providing high quality care, clinical excellence and innovation in medical research and we are proud to have been awarded an overall rating of 'Good' following the latest Care Quality Commission inspection.

With around 17,000 employees working within our hospitals and out in the community, we are one of the biggest employers locally. We aim to reflect the diversity of local communities and are proud of our partnerships with local people, patients, neighbouring NHS organisations, local authority and charitable bodies.

Thanks to the professionalism and dedication of all our 17,000 staff, we are proud to have a reputation for delivering high quality care, effective leadership and innovation in both clinical and non-clinical services. Our current Care Quality Commission rating is evidence of this with a 'Good' rating across all five domains of: Safe, Caring, Effective, Well led, Responsive with many of our services rated as 'outstanding'.

Through our partnerships with the University of Sheffield, Sheffield Hallam University, other health and social care providers and industry we remain at the forefront of advancements in clinical services, teaching and research.

FIVE
HOSPITALS



ONE OF THREE

major trauma centres in
Yorkshire and the Humber



OVER 17,000 MEMBERS
OF STAFF



OVER 2 MILLION
PATIENTS PER YEAR



OVER 150,000 ACCIDENT &
EMERGENCY
ATTENDANCES



OVER £1 BILLION BUDGET

OVER 40 COMMUNITY LOCATIONS &
CARE IN PEOPLE'S HOMES



RATED GOOD BY THE CARE
QUALITY
COMMISSION



Sheffield

Population 560,000

All clinical services

South Yorkshire (pop 2.2m)

- Cardiothoracic
- Vascular
- Bone
- Cancer

National including:

- Pulmonary Vascular Disease
- Ocular oncology
- Orthopaedics
- Gestational Trophoblastic Disease
- Spinal Injuries
- Infectious diseases

Providing safe, high quality care is our top priority and most of the time we achieve or exceed our patients' expectations.

During the year we have met almost all the national quality standards required but we want to really make a difference in the areas which we know mean the most to you and your family.

We listen to your feedback, complaints and suggestions and whilst the majority of our patients are very satisfied with their care, we also know that there are always areas where we can do even better.

That is why every year we discuss with patients, staff, Trust Governors, Commissioners of healthcare services, Healthier Communities and Adult Social Care Scrutiny Committee and Healthwatch the areas where they feel we should focus extra effort to resolve an issue or make things even better.

We have highlighted some of the improvement areas and performance in this summary but you can read more detail about all the improvement areas in the Quality Report.

The Quality Report is available on the Sheffield Teaching Hospitals NHS Foundation Trust website www.sth.nhs.uk or by calling 0114 2714322.

OUR PRIORITIES 2017-18

Every year we set priorities for improvement which are monitored and compared to how we performed in that area in the previous year. Here is a progress update on the improvement priorities identified for 2017-18:

To further improve the safety and quality of care provided to our patients through initiatives such as the Patient Safety Zone and Safety Huddles.

Safety huddles are short multidisciplinary briefings designed to give staff opportunities to understand what is going on with each patient and anticipate future risks to improve patient safety and care.

In addition to the 40% of inpatient areas that have introduced Safety Huddles, there has been interest from other areas such as Radiology, Charles Clifford Dental Hospital and Portering Services.

Many teams have achieved a stepped reduction in the number of falls since introducing Safety Huddles, and their patients have longer periods of time between new pressure ulcers.

To further improve End of Life Care

Clinical leads are now leading on the roll out of the implementation plan for the Trust's new End of Life Care Strategy.

An electronic core nursing care plan continues to be rolled out across the Trust. The plan includes recording of preferred place of care and death.

A new 'Individualised Care Plan for the last days of life' has also been developed and approved. This is currently being piloted on three wards and will then be rolled out across the Trust once an evaluation has taken place.

A new End of Life Care intranet page has been developed. This will act as a central hub for staff to access all relevant End of Life Care information.

A survey to seek feedback from bereaved family and carers in relation to

the care of their loved one during the last days and hours of their life has also been undertaken. The results and themes will be used as a baseline against which we can compare the results of future surveys to identify if improvements have been made.

Introduce Electronic Care Planning across the Trust to improve the quality of care planning.

An electronic version of care planning has been built into the Trust electronic patient record, and piloted on three wards. The aim is to further improve individual care plans, sharing of information and interaction with patients/carers.

Electronic care planning is now being rolled out Trust wide. It has provided the opportunity for several specialities to review any existing care plans and bring them up to date with current requirements.

To improve how complaints are managed and learned from.

A number of quality initiatives have been implemented over the past 12 months, to further improve responsiveness to complaints.

The response time to complaints this year was 93%, achieving the target (85%) for the third consecutive year.

To improve staff engagement by using the tools and principles of Listening into Action (LIA).

LiA is a staff engagement initiative that we have been using for a few years to allow us to gather ideas and insights from staff at all levels into how we can make improvements within our organisation.



Staff ideas are then 'brought to life' by being developed into schemes to try out new ways of working. Since the launch there have been 85 schemes delivered by 52 teams.

Over the last year, we have seen a number of achievements and useful findings through LIA schemes, for example, our Front Door Response and Active Recovery (AR) teams have proven by a trial in A&E that the patient's length of stay can be reduced by one night with AR support. As a result the team are looking for funding to secure this service on a permanent basis.

In July 2014 the Trust committed to a three year 'Sign up to Safety' campaign. The Trust's overall aim was to further improve the reliability and responsiveness of care given to patients, which in turn aims to achieve a 50% reduction in harm.

The Trust has since introduced bespoke training packages providing staff with the skills to undertake simulation exercises and to improve the investigation of and learning from serious incidents.

Care bundles for Red Flag Sepsis and Acute Kidney Injury (AKI) have continued to be rolled out and developed throughout 2017-18 and a joint education package for newly qualified nurses has been developed which links the management of sepsis, AKI and the deteriorating patient into one teaching session. The sepsis tool has been implemented in all areas and 80 champions have been trained to undertake a 'train the trainers' role.

The Trust continues to maintain a reduction in the cardiac arrest rate. Audits following every cardiac arrest have provided the Trust with quality data, which is submitted to the National Cardiac Arrest Database.

To ensure every hospital inpatient knows the name of the consultant responsible for their care during their inpatient stay and the name of the nurse responsible for their care at that time.

In July 2015, the Trust introduced a mix of tent boards and wall mounted boards at patients' bedsides which captures each patient's named nurse and consultant.

Following an evaluation, education packs have been produced to support the project and circulated to educators through the Nurse Directors. These, along with posters, have been used to promote the use of the tent boards within their care groups.

To review mortality rates at the weekend and to focus improvement activity where necessary.



The Trust continued to review mortality by day of the week during 2017-18. Findings show that our Hospital Standardised Mortality Ratio for all admissions (and for non-elective admissions only) for each day of the week, including Saturdays and Sundays, is 'as expected' when compared to the national average.

To ensure, as a Trust, we learn from all deaths we have been implementing the National Quality Board guidance on Learning from Deaths during 2017-18.

Cancelled Operations

The number of operations having to be cancelled on the day of surgery has reduced in 2017-18. Indeed 300 less 'avoidable' cancellations happened due to a number of initiatives that have taken place during the year.

This included:

- An expansion of reminder calls for patients at four days prior to surgery to ensure they are fit, ready, willing and able to attend as planned.
- Improved planning and scheduling processes to ensure appropriate equipment and staffing can be planned well in advance to reduce potential on day problems.
- Development of a Standard Operating Procedure for elective scheduling, to enable better communication with patients and clinical teams, reducing the chances of list and patient cancellations.
- The launch of a policy for Management of On-Day Cancellations, which when followed, ensures all steps are taken to avoid an on day cancellation.
- Introduction of new guidelines for high blood pressure in Ophthalmology.

Pressure Ulcer Prevention

The overall proportion of pressure ulcers has increased slightly during 2017-18.

During 2017 the Trust Executive Group formally approved the integration of the acute and community Tissue Viability Teams. Both teams have worked collaboratively over the course of the year and have been proactive in implementing strategies to reduce the incidence of acquired pressure damage through a number of different initiatives.

Safety Huddles, led by clinicians and with a multidisciplinary focus, are supporting teams to identify those patients most at risk of developing a pressure ulcer and a plan for prevention.

The Tissue Viability Team also delivered bi-monthly study days for Health Care

Assistants and Registered Nurses that focused on pressure ulcer prevention and management.

The Tissue Viability Team has worked with the technology team to develop electronic records for nursing staff relating to wound assessment and care planning for pressure ulcer prevention are also being developed.

Optimise Length of Stay

The Trust has been continuing to develop its arrangements to optimise patient flow and reduce length of stay.

Work during 2017-18 has included the development of the Sheffield SAFER Flow 10 principles based on national best practice and local learning from wards. The underlying principles of this work are informed by the NHS England guidance: Safer, Faster, Better: good practice in delivering urgent and emergency care. The aim is to ensure that all patients have a plan and they receive the care they need in a timely way.

The Trust is a partner in the Sheffield Delayed Transfer of Care Programme, aiming to enable more people to leave hospital immediately on the day that they no longer need hospital treatment and enable a greater proportion of people to be able to return safely to their own home. Routes out of hospital have been simplified to three main routes and four wards are involved in piloting these along with earlier discharge planning. A ward metrics dashboard has also been created to enable the impact of these changes to be assessed.



KEEPING WAITING TIMES LOW

We know that ensuring waiting times are kept as low as possible is important to our patients. The average waiting time for care at the Trust is eight weeks or less and the majority of cancer treatment waiting time standards are consistently met. During 2017/18 we achieved the majority of the national waiting time targets.

Whilst we did not consistently achieve the national 95% 4 hour wait time standard, on average we did treat, discharge or almost 9 out of 10 patients who came to the emergency department within the required 4 hour timeframe.

MEET SOME OF THE PATIENTS WE HAVE CARED FOR...

Baby joy after life changing MS treatment

Louise Willet, aged 36, from Dinnington, describes her incredible journey to motherhood:

"After suffering from an aggressive form of MS, I was offered a stem cell transplant at Sheffield Teaching Hospital NHS Foundation Trust, which meant my immune system would be rebooted to halt the disease using chemotherapy.

The MS team explained to me that while this treatment had the potential to drastically improve my quality of my life, it did pose a risk to fertility, and so I was given the option of IVF at the Trust's assisted conception unit, Jessop Fertility.

We decided to go ahead and the team at Jessop Fertility froze and stored four of our embryos. We instantly felt comfortable in their care and knew they were concerned with making sure they were attending to our needs.

Once my stem cell treatment had completed we were overjoyed to discover it had worked and I was symptom free from my multiple sclerosis. However we also discovered that my fertility had indeed been damaged and so we nervously decided to proceed with embryo implantation.

Thankfully, our dreams came true in the form of our gorgeous little girl, Joy, who was born on 12th February 2018.

Finding out I was pregnant was the best feeling in the world.

The staff at Jessop Fertility really were excellent, they listened to our concerns at every stage and worked to help us feel reassured. I never once believed it would happen but it absolutely did so miracles can come true."



Enhanced recovery programme enables patients to return home three days after major surgery

Jennifer Atkinson, 70, of Tickhill, South Yorkshire, underwent a radical cystectomy at the Royal Hallamshire Hospital in Sheffield, a 4 ½ hour long operation to remove her bladder and womb.

She was one of a group of patients who were able to return home just three days after the surgery as a result of enhanced post-operative recovery procedures at the hospital's urology department.

She said: "I feel wonderful and I can't fault the treatment I have had at any stage of the process. It really has been world class. I want to thank the NHS for saving my life." Sheffield Teaching Hospitals is the largest centre in the UK for bladder cancer surgery.

Radical cystectomy is a complex procedure and a few years' ago it was viewed as requiring an inpatient stay of up to two weeks, but multiple small technical improvements and changes in how patients are cared for mean that many patients are now able to go home within five days. In some cases as few as three.

Anaesthetic and critical care teams, stoma specialist nurses, theatre and recovery staff, urology nurses, junior doctors, physios and occupational therapists all work together before and after the operation to provide all the support patients need to enable them to return home as soon as possible.

In Jennifer's case, the operation went so well that she has subsequently been able to return to modelling, which she does for a local dress shop, and been on a long-haul holiday to Thailand without difficulty."



WHAT ARE OUR PRIORITIES FOR 2018/19?

Safety:

- ✓ Reduce inpatient falls by 10%.
- ✓ Develop a human factors plan to create tangible improvements in safety culture.
- ✓ Demonstrate a 30% improvement in the early recognition and management of sepsis
- ✓ Ensure a Trust wide reduction by 10% of all avoidable patient harm associated with pressure ulcer prevention and management.
- ✓ Implement an electronic system for tracking patients' observations.
- ✓ Reduce preventable Acute Kidney Injuries (AKIs) across the Trust (three year plan)

Patient Experience:

- ✓ Implement and evaluate at least one major coproduction project during the lifetime of the Quality strategy and develop a plan for embedding this approach more widely
- ✓ Ensure that End of Life Care continues to be individualised and meets the needs of both patients and those who are important to them
- ✓ Ensure out-patient and in-patient letters are clear and understandable, and meet the needs of both patients and national good practice guidelines
- ✓ Significantly increase the scale of patient engagement with those who may be harder to reach or seldom heard
- ✓ Increase the availability of high quality refreshment facilities in outpatients.

Effectiveness:

- ✓ Further improve the process and quality of consenting; with a focus on ensuring patients are provided with individualised information.
- ✓ Ensure that our Safety Checklist is further embedded into practice across the Trust; aiming to reduce errors and adverse events, and increase teamwork and communication

WORKING TO KEEP OUR PATIENTS SAFE

Rigorous infection prevention and control and clean facilities are fundamental to our care standards. We continue to work hard to minimise the chances of patients acquiring hospital acquired infections, such as Norovirus and MRSA. During 2017/18 we had no cases of MRSA bacteraemia and the number of cases of C.Difficile remained low.

During the winter months, flu can pose a real health risk for patients and so during 2017/18 we vaccinated the highest ever number of our staff (78%) so that we limited the risk of spreading the virus. We also offered patients who came in as emergencies with flu symptoms fast track testing which allowed them to be diagnosed in just 15 minutes. This helped us treat patients quickly and prevent the spread of the virus.

OUR FINANCES

Overall 2017/18 was generally another very challenging financial year for the NHS.

The major financial aim for the Trust in 2017/18 was to maintain financial stability, while meeting the demands of increasing numbers of patients and more stringent operational targets.

Our total income last year was just over a £1 billion and the majority of our costs are associated with paying the 17,000 staff who work for the Trust.

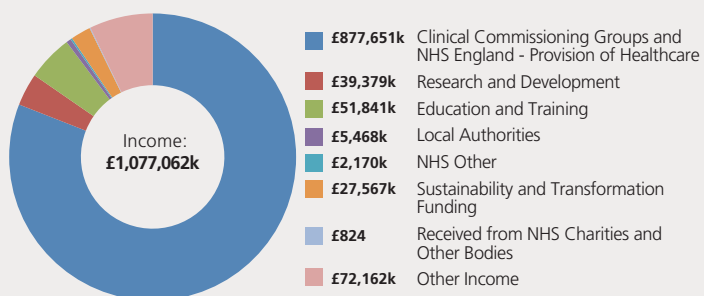
The Trust had a deficit of £8.4m (0.78% of turnover). However, there were exceptional items relating to impairment charges arising from the Estate Revaluation undertaken during the year and additional national Sustainability & Transformation Funding (STF). Without these items the deficit would have been £1.2m

The efforts of all staff to achieve this should not be underestimated given the current climate and the fact that our Trust has already delivered significant efficiency savings over the past few years.

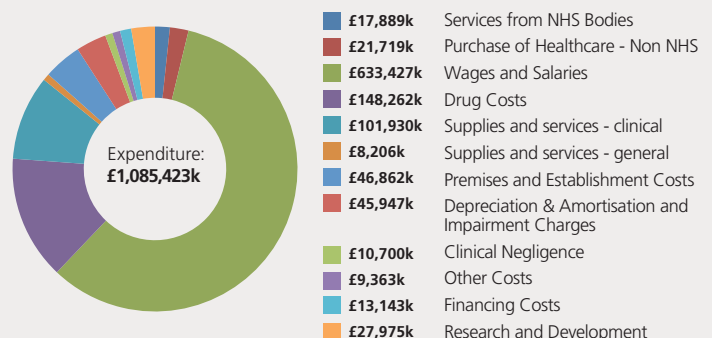


Neil Priestley
Director of Finance

Where our money comes from



How we spend our money



Refurbished Dental Laboratory

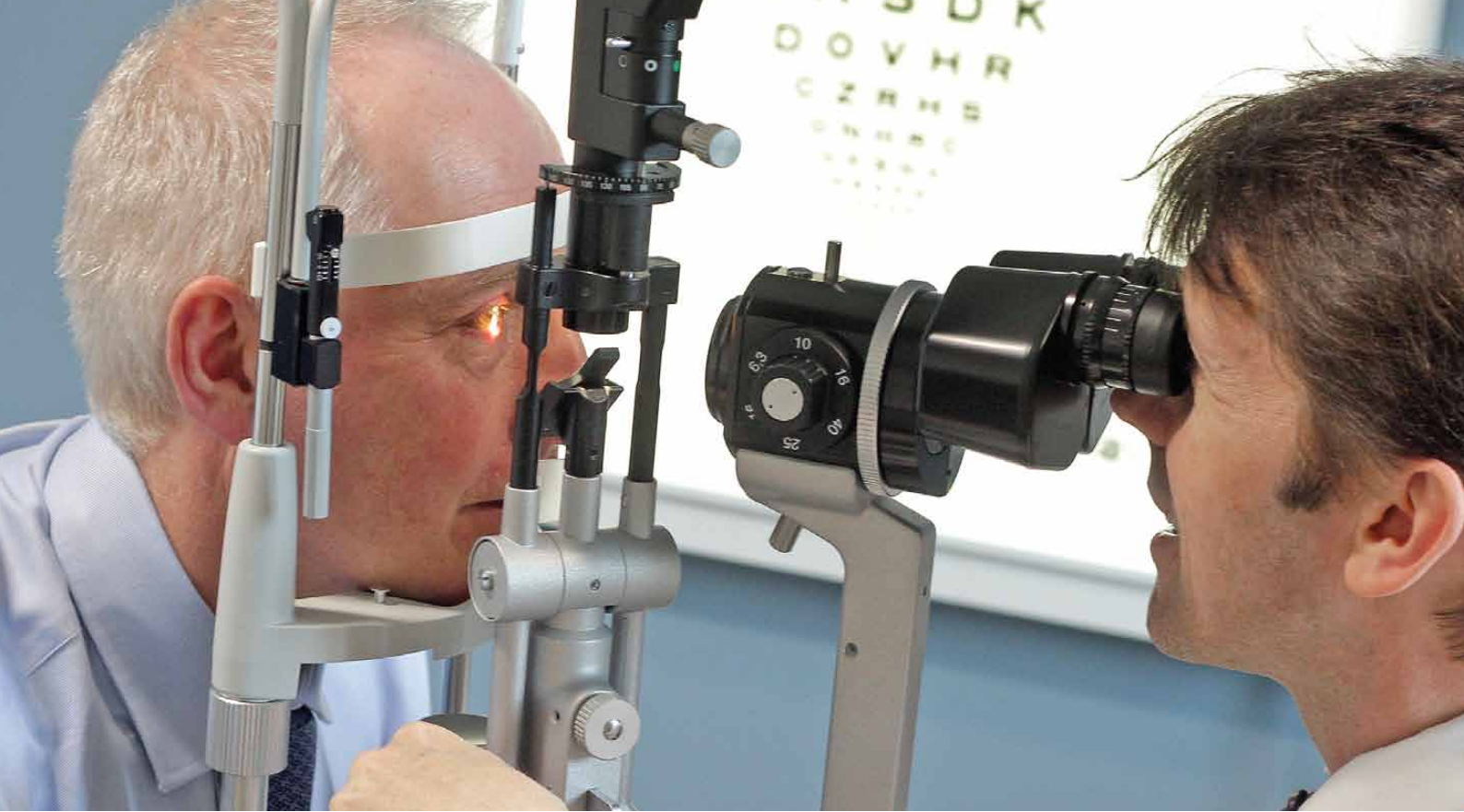
In total, over £35.9million has been spent improving our facilities and developing our services across the Trust during the year.

A key focus in 2017/18 was once again on investing in the Trust's medical equipment and supporting physical infrastructure to support new and existing services.

Some of the major schemes undertaken were a new state of the art Eye Centre at the Northern General Hospital (see next page for more details) and the creation of new theatres at the Hallamshire Hospital.

A number of wards were refurbished at Weston Park along with the lifts at the Hallamshire Hospital, laboratories at Charles Clifford Dental Hospital and the radiology department at the Hallamshire Hospital.

A new Minor Operations Suite also opened at the Hallamshire Hospital and a fantastic new dementia friendly Frailty Unit at the Northern General.



£6.7 MILLION EYE CENTRE OPENS

A brand new state-of-the art £6.7m eye centre opened its doors to patients in June 2018.

The new purpose-built centre offers some of the best ophthalmic assessment and surgical facilities in the UK, and provides care for over 5,000 patients across the Sheffield and South Yorkshire region in spacious and accessible surroundings.

The light, airy facility – which has been designed with the needs of people with limited vision in mind – boasts ten consulting rooms, world-class diagnostic equipment, two hi-tech operating rooms, a large, welcoming reception area, dedicated drop off and pick up points outside the centre, and handy self check-ins enabling patients to notify staff of their arrival in a matter of seconds.

As a dedicated centre for cataract surgery, patients visiting for assessment and treatment of cataracts will benefit from a unique 'one-stop approach'. This will mean that they will now be able to have their outpatient consultation, all diagnostic tests, pre-operative assessments and consent for surgery process completed in just one visit, saving unnecessary repeat trips prior to surgery.

If patients are fit for local anaesthetic cataract surgery they will be given a date for their operation before they leave. On the day of surgery, patients will be seen by the same consultant they saw at their outpatient appointment and a named nurse will stay with them to 'hold their hand' during surgery. Refreshments will also be provided to patients after surgery.

All patients returning for post-operative check-ups will be able to see their consultant if necessary and agree a date for surgery in their other eye if this is needed.

Dalip Malkani, 78, of Bradway, was one of the first patients in the region to benefit.

"My vision is much improved in that eye and the overall quality of my vision is much better than before," said the IT consultant who first started to get a cloudiness in his vision a year ago and was diagnosed with a cataract in his right eye.

"The staff have been marvellous, they've taken really good care of me and kept me informed throughout, and I can see things much more clearly now. My TV looks like it has much higher resolution than it did before. I am very fortunate to be in Sheffield and have world renowned eye specialists."



EMPLOYING CARING AND CARED FOR STAFF

The Trust is privileged to have many skilled and dedicated staff who contribute to the success of our hospital and community services.

That is why 'employing caring and cared for staff' is one of the key aims and objectives in our Corporate Strategy 'Making a Difference'. We also aim to be seen as an 'employer of choice'.

Our staff's dedication and commitment is a source of great strength for the Trust. It was therefore pleasing that the results of the 2017 NHS staff survey showed that 83% of our staff would recommend the Trust to family and friends for treatment. This is well above the NHS average for combined acute and community trusts of 68%. Additionally 67% of our staff would recommend the Trust as a place to work, this again is above the NHS average for combined acute and community trusts of 59%.

We also have a robust Health and Wellbeing programme which includes health checks for all staff over the age of 40 and free flu vaccination for staff. We also provide fast track access to physiotherapy, psychology and counselling services and stress management support such as a free mindfulness smart phone app.

Over the last 12 months more than 8,000 colleagues from across the Trust have given their views and ideas on what would make Sheffield Teaching Hospitals NHS Foundation Trust a brilliant place to work.



All of this information has been used to inform our new People Strategy which is called "Making it Personal". The strategy sets out how we want to build on our strong foundations to develop and support everyone who already works at the Trust and also to make it an organisation which attracts the very best people to work with us. The people strategy fits with our PROUD values, Making a Difference corporate strategy and our aims.

OUR VALUES ARE WHAT MAKE US DIFFERENT

P atient-first	Ensure that the people we serve are at the heart of all we do
R espectful	Be kind, respectful to everyone and value diversity
O wnership	Celebrate our successes, learn continuously and ensure we improve
U nity	Work in partnership and value the roles of others
D eliver	Be efficient, effective and accountable for our actions



WORKING TOGETHER

with our partners

The future shape of the NHS will see more integration and partnership working across organisations.

This has been a feature at Sheffield Teaching Hospitals NHS Foundation Trust for some years as exemplified by the integration of community services within our organisation and the stronger interface with GPs and social care colleagues across the city.

For example the Trust hosts the Yorkshire and Humber Genomics Medicine Centre which has recruited over 3,000 people to date as part of the UK 100,000 Genome project.

Our clinicians have joined forces with technology companies and researchers to test how new technologies can better support patients with long term conditions to manage their health and avoid a crisis which may see them admitted to hospital. This work is being coordinated through the Perfect Patient Test Bed hosted by Sheffield Teaching Hospitals – one of only 7 NHS Innovation Testbeds nationally.

A new direction of travel for the NHS nationally has also enabled us to further strengthen our partnerships with other healthcare organisations in Sheffield, South Yorkshire and further afield. This has followed an announcement in 2017 by Health Secretary Jeremy Hunt that 'Integrated Care Systems' would be established. The idea behind these new partnerships of NHS commissioners and providers of healthcare is for them to work together across a wider geographical footprint with a common set of goals and vision which supports the planning and delivery of sustainable services now and in the future. We are a partner in the South Yorkshire and Bassetlaw Integrated Care System and our Chief Executive Sir Andrew Cash is also the lead for the ICS. As well as this, we also saw the creation of the Sheffield Accountable Care Partnership in 2017 which brings together health and social care organisations in the City to jointly plan and deliver services tailored to the needs of the Sheffield population.



LISTENING TO OUR PATIENTS

Seeking and acting on patient feedback remains a high priority for the Trust

Our overall performance in national surveys consistently compares well against other Trusts and good response rates are being achieved.

A national survey of hospital inpatients carried out in 2017 by the Care Quality Commission has found that patients cared for by Sheffield Teaching Hospitals are pleased with the care they receive and in many areas the care was rated as 'better than the national average'.

Survey highlights included 96% of patients stating that they had been given enough privacy when being examined or treated and 97% saying they were kept well hydrated, having had enough to drink whilst in hospital.

STAFF IDEAS MAKE ALL THE DIFFERENCE

We recognise the importance of positive staff engagement and good leadership to ensure good quality patient care.

During the last 12 months we have continued to encourage more of our staff to be actively engaged and involved in developing services and driving innovations in both clinical and non clinical services.

Yet again during the popular 'Give it a Go' weeks many members of staff tried out new ideas or ways of doing things which made a difference to patients or staff.



The Innovation Hub at the Hallamshire Hospital is testing new ways of supporting patient's using smart technology.