

ITEM: 09/004
Doc: 3

Meeting: Trust Board
Date: 21st January 2009.

Title: **Customer focused marketing – a progress report**

Executive Summary: The attached paper updates the implementation plan approved by the Board in September as part of the customer-focused marketing strategy. All key milestones are being met. There is an appendix which details the roll out and response rates to date in terms of capturing patient experience feedback. The detail of the feedback is presented in the Patient Experience Domain of the Dashboard and not in this paper.

The key issues to highlight are

- progress on measuring patient experience. Paper capture of patient experience feedback and roll out across Departments continues. A solution will be in place from April which will capture feedback more comprehensively across the Trust and that will achieve 10% target from that time.
- consistent patient experience measures now being captured across Departments and roll-out plan in place, linked to transformational projects across the Trust.
- progress on measures developed to capture progress and track improvement. Work to continue on agreeing targets and trajectories.
- website development in line with resource aligned.
- This work will be aligned with the development of improvement measures with our commissioners as part of ‘Commissioning for quality and innovation’ (CQUIN development).
- This work will continue to be embedded as part of the work to develop Quality Accounts at a clinical team level and part of the service line management roll out.

Action: To note progress.

Report from: Siobhan Harrington – Director of Primary Care.

Sponsor: David Sloman – Chief Executive Officer.

Financial Validation	Name of finance officer
Lead: Director of Finance	

<p>Compliance with statute, directions, policy, guidance</p> <p>Lead: All directors</p>	<p>Reference:</p>
<p>Compliance with Healthcare Commission Core/Developmental Standards</p> <p>Lead: Director of Nursing & Clinical Development</p>	<p>Reference:</p>
<p>Compliance with Auditors' Local Evaluation standards (ALE)</p> <p>Lead: Director of Finance</p>	<p>Reference:</p>
<p>Evidence for self-certification under the Monitor compliance regime</p> <p>Lead: All directors</p>	<p>Compliance framework reference:</p>

Customer-focused Marketing Strategy – Implementation Plan Update to Board Jan 09.

Action	Outcome	Lead	Process & measures	Timescale	Progress
1. Understanding patient expectations.	Brand and Whittington Promise refreshed.	SH	Interviews with 5 patient governors and 5 patients by March 09. Focus groups x6 Jan-March. Process & resource agreed for 09/10. Council of Governors half-day.	End of March 2009	2 patient interviews conducted. Remainder to be planned from Jan. Process agreed and dates in diary Business plan to BPG Feb 09. January day planned.
2. Patient experience - understanding of experience on a real-time basis across the organisation.	Methods of data capture agreed. Patient feedback gathered across all Departments & system in place to share feedback.	SH/GW SH	EC to agree. Target 10% of patients giving feedback.	October 2008 March 09	Pilot completed. Output-based specification being completed on basis of pilot results. Solution in place by end of March. Specification for intranet page complete; technical feasibility underway; page in place by end of January. Still early in implementation of use

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Action	Outcome	Lead	Process & measures	Timescale	Progress
	Net promoter score baseline and trajectory agreed.	SH/FE	Continual capture of net promoter score.	Oct 08	of NPS. Baseline being captured across whole organisation. Initial plan to use as benchmark for next 3 months and agree trajectory from April 2009.
	Annual patient survey questions used to measure patient experience; showing improvement and meeting top decile of Trusts.	SH	4 core annual patient survey questions used consistently. Board Dashboard populated. SLA target achieved Aim to be in top 10% of Trusts.	Oct 08 March 2010 March 2012	4 questions now captured. In discussion regarding development of CQUIN with PCTs. Internal responses captured show improved results compared to external national postal survey.
	Patient experience feedback & net promoter score part of corporate; operational staff and clinical director objectives.	DS/ MB/HB	Part of objective setting for 2009/10.	2009/10	Is part of corporate objectives. To be embedded as part of appraisal round in 2009/10.
	Employment	MB	Contracts containing	April 2009/10	

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	contracts reflect commitment to refreshed Whittington promise/CFM.		commitment to promise/CFM.		
3. Design and Delivery of services – aligned to deliver customer value.	Efficient redesigned patient focused services in place informed by customer expectations & feedback on experience. CFM informing:- 18 week redesign programme.	HB	Programme measures include the same patient experience measures.	2008-11	Programme underway and patient experience measures as part of scorecard.
	Customer relationship management (tracking) system across the Trust.	GW	Interim solution explored. Final solution in place.	Nov 08 2009	Feasibility underway; products being explored.
	Patient expectations & experience informing Trust strategy.	SH	Distribution of results & improvements being made communicated internally & externally. Intranet page populated Executive Committee updates.	Nov 08 and ongoing	Results communicated through operational managers. Intranet page in place from end of Jan 09.
	Increased time for direct care given by nurses through productive ward	DW	Patient experience measures as part of KPIs captured are the same as CFM.	Nov 08	Patient experience measures captured on 5 core wards since November – to be

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	initiative. Patient information leaflets reviewed corporately. Website up to date & refreshed.	SH/DW SH/GW	Publishing group established with corporate rules in place. Planned approach to leaflet updates. Appropriate resource in place to ensure ongoing update of website.	March 09 Jan 09	rolled out in plan for Productive Ward. Meeting dates agreed. Work to establish template commenced. Capture of current baseline regarding leaflets used planned. External company benchmarking of website against other Trusts obtained. Being used to inform development.
4. Communications	Strategy launched. Engagement of staff through team briefings and induction. Communications strategy realigned to CFM.	DS SH/HB SH	Staff awareness of strategy. Strategy agreed. Measures to include - market share of referrals - analysis of media coverage - website hits - staff survey –	October 08 March 09 Dec 08	Article in LINK✓ CEO briefing Oct 08✓ Ongoing Updated strategy to Board Jan 09. Jan-Dec 08 media coverage analysed. Jan-Dec 08 website hits to home page = 415047 hits. Staff survey

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Action	Outcome	Lead	Process & measures	Timescale	Progress
			national & local		questions being developed. Regular surveys from April 09.
5. Strategy development	Primary Care CFM strategy.	SH	Strategy agreed. Measures to include <ul style="list-style-type: none"> - market share of referrals - referral activity dashboard to be developed by GP practice - quarterly GP surveys via GP Link and eGP Link including NPS - GP extranet portal in place 	Dec 08	Updated strategy to Board Jan 09. From April 09. Jan 09.