



**LESS PAIN.
MORE INDEPENDENCE.
LIFE-CHANGING CARE.**

**TRUST STRATEGY
2023-2028**



**The Royal
Orthopaedic Hospital**
NHS Foundation Trust

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FOREWORD

When I took on the role of Chief Executive at the Trust, I did so knowing that The Royal Orthopaedic Hospital is a unique organisation full of incredible people. Since then I have continued to be impressed by just how amazing this team is.

This strategy recognises the strengths of this Trust. We know what we do well and we want to do more of it. This strategy also recognises the potential of our people. All of this ambition sits on their shoulders, so it's only right that we invest in them and encourage them to innovate and lead.

Partnership is fundamental to this strategy. We are part of a system and we will continue to work closely with our partners to tackle the long-standing inequality faced by our communities.

I'm enthusiastic about our refreshed vision; *'Less pain. More independence. Life-changing care'*. I think it describes the essence of what drives us every day, helping people to lead healthier, more active, fulfilling lives.



Jo Williams, Chief Executive

A STRATEGY BUILT ON ENGAGEMENT

As we developed this strategy, we talked to lots of people to understand what was important to them.

We ran engagement sessions with patients who shared their experiences and the importance of having seamless pathways and person-centred care. We spoke with clinicians from different specialities who wanted the strategy to reflect our clinical expertise and the positive impact this has for patients. We spoke with health and social care partners who felt it was important our strategy was strategically aligned, prevention focussed and centred on the reduction of health inequality. We spoke to people from across our Trust who shared their ambition to continue caring, growing, researching, innovating and improving.

This strategy reflects all of that engagement and it is richer for it. As we deliver this strategy, we will continue to listen, learn, engage and co-produce.



ABOUT US



CQC rating
Good



The Royal
Orthopaedic Hospital
NHS Foundation Trust

The Royal Orthopaedic Hospital NHS Foundation Trust (ROH) is a specialist hospital located in Birmingham UK. One of the largest orthopaedic units in Europe, the ROH offers a comprehensive range of surgical and non-surgical treatment. We perform the most elective orthopaedic procedures in the NHS and are known nationally and internationally as a centre of excellence for orthopaedic care and innovation.

OUR TRUST

Our team

1,300
people

Our turnover

£130m
per year

Our treatment

We deliver the most elective orthopaedic procedures in the NHS treating circa 60k outpatients and 14k inpatients every year.

OUR SERVICES

- ✓ Admissions and Day Case Unit
- ✓ Anaesthetics
- ✓ Children & Young People's Outpatients
- ✓ Foot and Ankle
- ✓ Hands and Forearm
- ✓ Hips
- ✓ Hydrotherapy
- ✓ Imaging (X-ray and MRI)
- ✓ Infection Prevention and Control
- ✓ Knees
- ✓ Musculoskeletal
- ✓ Occupational Therapy
- ✓ Oncology (cancer)
- ✓ Orthotics
- ✓ Outpatients
- ✓ Pain Management
- ✓ Pathology
- ✓ Physiotherapy
- ✓ Podiatry
- ✓ Pre-Operative Assessment Clinic
- ✓ Royal Orthopaedic Community Scheme
- ✓ Safeguarding and vulnerabilities
- ✓ Shoulder and Elbow
- ✓ Spines
- ✓ Woodlands Suite

OUR PURPOSE

LESS PAIN. MORE INDEPENDENCE. LIFE-CHANGING CARE.



Our vision

Less pain.
More independence.
Life-changing care

Our mission

We will deliver compassionate, patient-centred care that empowers people to regain their mobility, independence, and quality of life. Through efficiency, expertise, innovation and collaboration we will tackle health inequality and improve access to life-changing care.

Our values



Compassion



Openness



Pride



Innovation



Excellence



Respect

OUR STRATEGIC OBJECTIVES



OUR CARE

Deliver outstanding care that is safe, seamless and patient-centred

By 2028, we will be rated as 'outstanding overall' by our regulators, the Care Quality Commission. This will indicate that we are achieving the highest levels of care and quality.



OUR EXPERTISE

Innovate, improve, research and teach

By 2028, we will be kitemarked as a Major Revision Centre and Surgical Elective Hub and will publish 30% more research publications. This will indicate our expertise.



OUR PEOPLE

Rated as among the best NHS hospitals to work for by our team

By 2028, we will be rated in the top 5% of Trusts to work for by our people in the NHS Staff Survey. This will indicate that we are supporting our most valuable asset; people.



OUR COMMUNITY

Work with our community to reduce health inequality and support prevention

By 2028, we will be reducing health inequality by improving access for people in the most deprived 20% of our communities. This will indicate that we are reducing health inequality.



OUR SERVICES

Efficient, effective and sustainable

By 2028, we will have increased the number of people we treat by 20% within our current resources (this figure will be adjusted as resources increase). This will indicate excellent productivity and support more people to access treatment.



OUR COLLABORATION

Collaborate to support improvement, locally, regionally and nationally

In the next five years, we will help to deliver a standardised pathway for elective orthopaedics in Birmingham and Solihull. This will indicate that our system is transforming for the benefit of patients.

OUR STRATEGIC OBJECTIVES: CARE

Deliver outstanding care that is safe, seamless and patient-centred

ABOUT THIS OBJECTIVE

The way we understand, plan and deliver care is the most fundamental part of our organisation. Care encompasses safety and quality, how we treat our patients and support them before, during and after their journey. We can already be very proud of the care we deliver but we are ambitious about the future.

In the future, we will offer the best patient experience in the NHS. Our pathways will be seamless and patient-centred, optimised to deliver outstanding experience, outcomes and quality. Digital technology will support patient-led booking and we will support patients at every step of their journey. Our team will deliver best-practice care and use the latest technology to optimise clinical outcomes. Our care will be outstanding.



Our work in this area will include:

- Delivering our 'outstanding pathways programme' which focusses on creating seamless, connected, efficient pathways
- Building on the success of JointCare and embedding optimised joint-replacement pathways across all of our specialities
- Developing a Day Case service across surgical specialities that offers excellent efficiency and outcomes
- Embedding Shared Decision Making across the organisation to support more informed choice and better outcomes

Critical success metric

By 2028, we will be rated as 'outstanding overall' by our regulators, the Care Quality Commission. This will indicate that we are achieving the highest levels of care and quality.

IMPROVEMENT TARGETS

Where are we now	Where will we be by 2028
Inpatient survey score: 78% positive	85% positive
PROMS (Patient Reported Outcomes Measures): only collected in arthroplasty	PROMs collected across all relevant services
Shared Decision Making compliance: 93%	99%

OUR STRATEGIC OBJECTIVES: EXPERTISE

Innovate, improve, research and teach

ABOUT THIS OBJECTIVE

The Royal Orthopaedic Hospital has always been a specialist organisation. From our inception 205 years ago to today. We have, and continue to pioneer new treatments and techniques which shape how care is delivered across the world. We will build on this legacy over the next five years.

In the future, we will develop our knowledge brand and establish an Musculoskeletal (MSK) Academy to maximise our ability to 'know how and show how'. We will continue to develop specialist services, leading at a local, regional and national level. Our research will grow in scale and impact. We will grow our teaching intake and build upon our excellent educational programmes. We will be seen as knowledge leaders in orthopaedics and MSK.



Our work in this area will include:

- Establishing the MSK Academy; an institution to advance orthopaedic knowledge, skills and training
- Growing our research portfolio and growing the number of participants in studies
- Supporting the development of national Metastatic Bone Cancer Service
- Developing an Osseointegration service
- Continuing to develop our innovative Imaging Services
- Building ROH into a leading centre for robotic-assisted surgery and research
- Delivering more high quality teaching to more students to train the next generation of specialists
- Maintaining the highest levels of compliance with National Joint Registry data

✓ Critical success metric

By 2028, we will be kitemarked as a Major Revision Centre and Surgical Elective Hub and will publish 30% more research publications. This will indicate our expertise.

IMPROVEMENT TARGETS

Where are we now

Increased number of participants in research studies and trials. Currently 481

Increasing publications by ROH authors. Currently 80-100 per year

Where will we be by 2028

Increased to 700 participants

Increased 30% to 104-130 per year

OUR STRATEGIC OBJECTIVES: PEOPLE

Rated as among the best NHS hospitals to work for by our team

ABOUT THIS OBJECTIVE

The NHS faces a number of significant workforce related challenges and these are likely to become more significant over the next five years. People are the most important asset of our organisation and we can only accomplish our strategy if we prioritise how we support our people.

In the future we will deliver our People Vision to build a healthy, diverse, resilient, flexible and capable workforce who are enabled to learn, lead and innovate. One team, which will thrive in a supportive, inclusive, wellbeing-focussed culture, with investment in training and development, and excellent management.



Our work in this area will include:

- Delivering our People Plan which includes four elements; looking after people and their wellbeing, supporting inclusion and belonging in the NHS, developing new ways of working and growing for the future
- Delivering our Workforce Plan which takes into account the different roles and professions needed to deliver healthcare services effectively at ROH
- Delivering our equality objectives to support inclusion
- Delivering a Performance Management Plan which supports our staff to succeed in their roles

Critical success metric

By 2028, we will be rated in the top 5% of Trusts to work for by our people in the NHS Staff Survey. This will indicate that we are supporting our most valuable asset; people.

IMPROVEMENT TARGETS

Where are we now	Where will we be by 2028
Retention - turnover rate of 17.82%	12%
Recruitment - establishment rate of 83.56%	90%

OUR STRATEGIC OBJECTIVES: **COMMUNITY**

Work with our community to reduce health inequality and support prevention

ABOUT THIS OBJECTIVE

To improve community health and reduce inequality, we must respond to the needs of our communities and shape our services accordingly. People in Birmingham and Solihull have poor musculoskeletal (MSK) health outcomes. We cannot simply 'fix' people when they need surgery, we must play an active role in helping prevent poor health and supporting self-management.

In the future, we will share our expertise and knowledge earlier to support communities. We will go to where people are to improve access. We will work with people and partners to collaborate and co-produce. We will reduce health inequality by improving access, outcomes and experience.



Our work in this area will include:

- Establishing a programme to reduce health inequality through working in partnership to improve access, experience and outcomes
- Embedding engagement and coproduction into our services to ensure people help design and deliver the services they need
- Opening more physical and virtual clinics in our communities to support more people to access early care and support
- Developing our knowledge brand to support prevention, self-management and community health. This includes using our orthopaedic and MSK expertise to build tools and resources for our partners and communities

Critical success metric

By 2028, we will be reducing health inequality by improving access for people in the most deprived 20% of our communities. This will indicate that we are reducing health inequality.

IMPROVEMENT TARGETS

Where are we now

Limited collection and oversight of health inequalities data

No comprehensive governance structure or workplan focussed on tackling health inequality

Where will we be by 2028

Comprehensive health inequalities data collection to enable overlaying to a unified waiting list for people in BSol

Embedded governance framework and workplan which is helping to tackle health inequality

OUR STRATEGIC OBJECTIVES: SERVICES

Efficient, effective and sustainable

ABOUT THIS OBJECTIVE

Delivering productive services is essential because it directly impacts patient care and outcomes. Efficient use of resources, effective communication between staff, and streamlined processes ensure that patients receive timely and effective treatment. Moreover, it can help to manage costs, allowing for more efficient use of healthcare and better healthcare outcomes

In the future, we will build on our already excellent services to make them even more productive, enabling us to reduce wait times, increase access to care, and improve patient experience. Digital technology will significantly streamline our operations and we will introduce an Electronic Patient Record (EPR). The service improvement methodology QSIR (Quality Service Improvement and Redesign) will be fully embedded and known as *'the way we do things around here'* and we will use local and national data to support the best efficiency and outcomes.

Critical success metric

By 2028, we will have increased the number of people we treat by 20% within our current resources (this figure will be adjusted as resources increase). This will indicate excellent productivity and support more people to access treatment

IMPROVEMENT TARGETS

Where are we now	Where will we be by 2028
Achievement of HIMSS and EMRAM : level 3	Level 7
Activity growth (Inpatient / Day Case): 14,394	17,272
Referral To Treatment (RTT) performance: 63.4%	95%



Our work in this area will include:

- Improve access by reducing Referral To Treatment (RTT) times, and productivity by improving theatre utilisation rates and increasing the number of day case patients we treat
- Embed the service improvement methodology QSIR (Quality Service Improvement and Redesign) in to our service development and improvement programmes
- Use digital technology to improve the patient experience and quality of care through leveraging digital solutions to promote better, faster, accessible, and equity driven health and care
- Developing our estate to meet the needs of our workforce and our patients
- Reducing our environmental impact in line with NHS net zero and the Green Plan

OUR STRATEGIC OBJECTIVES: COLLABORATION

Collaborate to drive improvement, locally, regionally and nationally

ABOUT THIS OBJECTIVE

With the advent of integrated care, we have a unique opportunity to improve orthopaedic and Musculoskeletal (MSK) care in Birmingham and Solihull. There are areas of excellent practice and collaboration, but the population experiences unwarranted inequality primarily due to variation in service provision and access.

In the future, we will work with partners in Birmingham and Solihull to develop a new model which enables an integrated approach to service development, delivery and planning. We will continue to deliver the MSK Transformation Programme. We will become a Major Revision Centre (MRC) and we will develop productive partnerships. All of this will enable us to become local, regional and national leaders in orthopaedics.



Our work in this area will include:

- Support the coordination of a single Patient Tracker List for Birmingham and Solihull
- Establish the ROH as a Major Revision Centre (MRC)
- Establish ROH as a [GIRFT Surgical Elective Hub](#)
- Lead the [BSol ICS MSK Transformation Programme](#)
- Develop productive partnerships with important stakeholders (including BSol ICS, the National Orthopaedic Alliance (NOA), the Federation of Specialist Hospitals, and Birmingham Health Partners)



Critical success metric

In the next five years, we will help to deliver a standardised pathway for elective orthopaedics in Birmingham and Solihull. This will indicate that our system is transforming for the benefit of patients.

IMPROVEMENT TARGETS

Where are we now	Where will we be by 2028
Achieve MRC status: in progress	Achieve status
Getting It Right First Time (GIRFT) accreditation as an Elective Hub: in progress	Achieve accreditation
Deliver MSK Transformation Programme case for change and business case: in progress	Delivered

THE KEY ENABLERS

ENABLER	Alignment to strategic objectives					
	Care	Community	Expertise	Services	People	Collaboration
Operational Delivery Plan	✓	✓	✓	✓	✓	✓
People Plan	✓	✓	✓	✓	✓	✓
Digital, Data and Technology (DDT) Plan	✓			✓	✓	
Estates Plan	✓	✓	✓	✓	✓	✓
Clinical Strategy	✓	✓	✓	✓	✓	✓
Nursing & Allied Health Professionals (AHP) Plans	✓		✓	✓	✓	✓
Governance Plan	✓			✓	✓	
Health Inequalities Plan	✓	✓		✓		
Engagement and coproduction Plan	✓	✓		✓	✓	✓
Knowledge Plan	✓	✓	✓	✓	✓	✓
Performance Management Plan	✓			✓	✓	
Marketing Plan		✓	✓			✓

KEY ENABLING PLANS

PEOPLE PLAN

Our People Plan explores how we will support the wellbeing of our team and culture and develop new ways of working. Without our People Plan we cannot achieve our wider strategy because it entirely relies on our team.

CLINICAL STRATEGY

Our Clinical Strategy focuses on specialised care, patient needs and outcomes, service delivery, the fostering of innovation, the development of our workforce and is a key contributor to the success of our strategic objectives.

NURSING & AHP PLANS

Our Nursing and AHP Plans are crucial and support the development of large and important sections of our workforce who directly impact patient care.

ESTATES PLAN

Our Estates Plan is an important enabler for creating the right physical environment to support excellent care for patients, and experience for our team, both now and in the future.

DDT PLAN

Our Digital, Data and Technology (DDT) Plan is a vital enabler to drive forward our ability to transform services, realise productivity and offer truly patient-centred care and excellent experience.

THE KEY ENABLERS

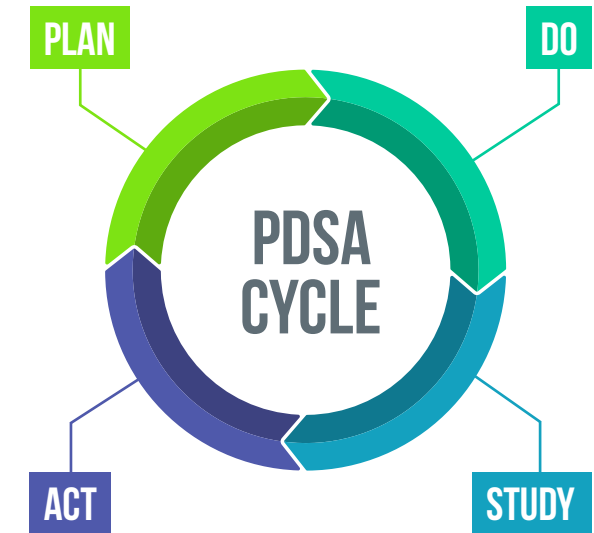
CONTINUOUS IMPROVEMENT

Continuous improvement is important for the Royal Orthopaedic Hospital. It ensures we stay at the forefront of orthopaedic care, optimise operational efficiency, foster innovation, and adapt to evolving patient needs. By consistently reviewing and enhancing processes, we will deliver the best possible care and outcomes for patients.

EMBEDDING A CULTURE OF CONTINUOUS IMPROVEMENT

Over the next five years we will embed a culture of continuous improvement by focussing on:

- ✓ Prioritising learning and development
- ✓ Supporting open communication & feedback
- ✓ Implementing systems to capture & analyse data
- ✓ Encouraging experimentation
- ✓ Encouraging collaboration
- ✓ Offering QSIR to our whole team
- ✓ Embedding improvement in Trust governance
- ✓ Supporting ownership of improvement



The Plan-Do-Study-Act cycle is a four-step model for carrying out change. We will use PDCA to support continuous improvement

QSIR: 'THE WAY WE DO THINGS AROUND HERE'

Our methodology for continuous improvement is called QSIR (Quality Service Improvement Redesign). The QSIR methodology is a systematic approach to enhancing quality and service delivery. It involves analysing existing processes, identifying areas for improvement, redesigning workflows, and implementing changes. QSIR supports a culture of continuous improvement. We will offer QSIR training to our entire workforce and support everyone to understand how to make improvements happen.



GET INVOLVED

LESS PAIN

MORE INDEPENDENCE

LIFE-CHANGING CARE

Help us improve healthcare

We are keen to work with people who want to help us design, develop and deliver healthcare services in the future. If you're interested in co-production and improving your local health services, please get in touch. Call or email 0121 685 4128 or roh-tr.PALS@nhs.net

Patient Experience

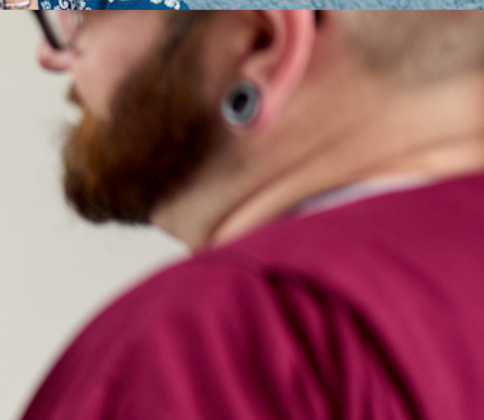
We are always keen to hear from people who use our services. Our Patient Experience Team has lots of ways to listen and help you share your experience, feedback and ideas. Find out more, scan the QR code or call 0121 685 4128



If it matters to you,
It matters to us.
We're listening.



**The Royal
Orthopaedic Hospital**
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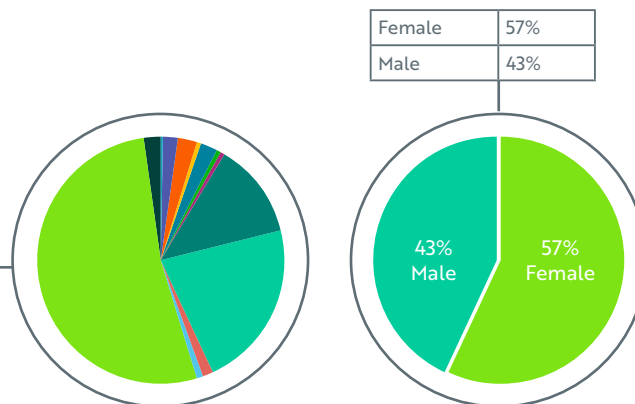


OUR CONTEXT: OUR PATIENT PROFILE

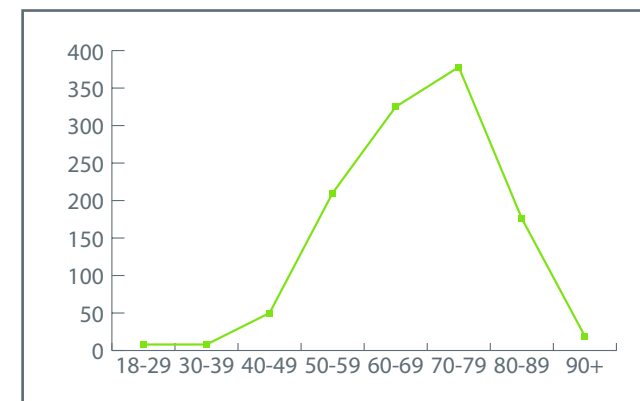
THE ETHNICITY OF OUR BSOL PATIENTS

Asian or Asian British Any other Asian background	1.00%
Asian or Asian British Bangladeshi	0.05%
Asian or Asian British Indian	1.80%
Asian or Asian British Pakistani	2.35%
Black or Black British African	0.20%
Black or Black British Any other Black background	0.50%
Black or Black British Caribbean	2.10%
Mixed Any other mixed background	0.20%
Mixed White and Asian	0.40%
Mixed White and Black African	0.10%
Mixed White and Black Caribbean	0.50%
Not known	12.49%
Not stated	21.79%
Other Ethnic Groups Any other ethnic group	1.25%
Other Ethnic Groups Chinese	0.05%
White Any other White background	1.00%
White British	52.02%
White Irish	2.20%

THE GENDER OF OUR BSOL PATIENTS



THE AGE OF OUR BSOL PATIENTS

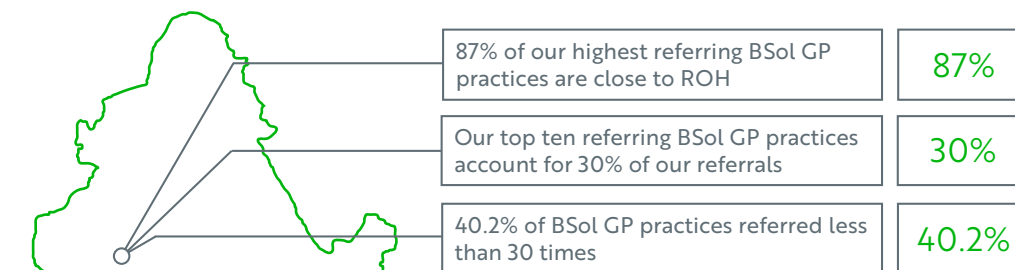


WHAT SERVICES ARE PEOPLE REFERRED FOR? (2019-2023)

Arthroplasty	5508	Clinical Support	10515	Young Adult Hips	2186	Mutual aid patients from other Trusts	1196
Arthroscopy	5037	Foot & Ankle	3143	Spinal	7003		1965
Oncology	13514	Hands	2664	Spinal Deformity	5060		
Oncology Arthroplasty	1739	CYP	635				

THE SOURCE OF OUR REFERRALS











Commissioner	Years					Total referrals
	2019	2020	2021	2022	2023	
Birmingham and Solihull	15325	13110	18848	19033	1333	67649
Out of area	13526	13166	15728	16605	1152	60177
Total referrals	28851	26276	34576	35638	2485	127826












OUR CONTEXT: COMMUNITY HEALTH

People in our communities face a number of significant challenges related to health inequality and musculoskeletal health. It is only through understanding the challenges people face that we are able to provide the support and services people need.

A PUBLIC HEALTH PROFILE OF PEOPLE IN BIRMINGHAM AND SOLIHULL

	Total population: 1.3m		Age 20% Under 15 years old 65% 15-64 years old 14% Over 65 years old		Ethnicity 59.6% White 25.1% Asian 8.1% Black 5.2% Mixed 2% Other
	Sexual orientation and gender identity	Between 2.5 - 5% of our population identify as lesbian, gay, bisexual, trans or with another non-heterosexual identity.			Disability 18.1% of people have long term health conditions and disabilities that limit their activities of daily living a lot
	Disease and inequality	The main diseases causing inequality in life expectancy are infant death, lung disease, heart disease and cancer			Infant mortality
	Life expectancy				
England average	Women = 82.6 years	Men = 78.7 years			
Birmingham average	Women = 80.5 years	Men = 75.8 years			
Solihull average	Women = 83.1 years	Men = 78.1 years			
	Poverty and unemployment				
Birmingham	Households have £49 less per week than the uk average. The unemployment rate is 7.3%				
Solihull	Households have £80 more per week than the uk average. The unemployment rate is 4.1%				
				England average	3.6 deaths per 1000 live births
				Birmingham average	6.6 deaths per 1000 live births
				Solihull average	4.7 deaths per 1000 live births

THE MUSCULOSKELETAL (MSK) HEALTH OF PEOPLE IN BIRMINGHAM AND SOLIHULL

	30% MSK conditions account for 30% of GP consultations in England		8.85 million Chronic joint pain or osteoarthritis affects more than 8.75 million people in the UK.		2x People living in deprived areas are twice as likely to wait more than a year for joint replacement
	Physical inactivity	Birmingham	24.8% inactive adults in Birmingham		1/10 Supporting inactive people (those doing less than 30 minutes per week) to become more active could prevent 1 in 10 cases of stroke and heart disease.
		Solihull	23.2% inactive adults in Solihull		
	Working days lost to MSK conditions		57.8% The employment rate for people with a long term MSK condition is only 57.8%, compared to 82.2% for people without a long-term health condition	 MSK conditions are one of the most common causes of sickness absence in the local NHS (a workforce of 70,000).	
Birmingham	17.9%		People from disadvantaged communities are less able to participate in physical activity and do not tend to engage with traditional exercise programme delivered within the NHS		
Solihull	21.5%				

OUR CONTEXT: ALIGNING OUR AIMS

LOCAL ALIGNMENT

In 2023, The Birmingham and Solihull Integrated Care Partnership (BSol ICP) published an Integrated Care Strategy: '[A Bolder, Healthier Future for the People of Birmingham and Solihull](#)'. This 10-year Integrated Health and Care Strategy sets out the collective health vision for the future and the necessary improvements needed in the next ten years. The focus of this strategy is improving life-expectancy and reducing health inequality.

The Royal Orthopaedic Hospital (ROH) is a partner within BSol ICP and was involved in helping to shape the ten-year strategy. While we have a specific remit as a specialist elective orthopaedic hospital, we still have a vitally important role to play to support the delivery of this ambitious strategy. The development of our strategic objectives is aligned to the shared objectives within the BSol ICP strategy.

ROH objectives	Care	Expertise	Community	People	Services	Collaboration
BSol ICP objectives						
Reduce inequalities						
Deliver integration for people						
Be there across the life course						
Protect people from harm						
Build, develop and retain a great, inclusive workforce						
Contribute to the wider determinants of health						

NATIONAL ALIGNMENT

NHS Long Term Plan

The [NHS Long Term Plan](#) sets out a vision for the future of the NHS over the next ten years. Our strategy aligns with the NHS Long Term Plan's objectives around improving access to services, reducing health inequalities, and providing more patient-centered care.

NHS Digital Transformation

The NHS is undergoing a significant digital transformation, which aims to improve patient outcomes and efficiency through the use of technology. Our strategy aligns with the [digital transformation agenda](#), by adopting new digital technologies and processes to improve patient care and reduce costs.

NHS England's Five Year Forward View

The [Five Year Forward View](#) sets out an integrated vision for the future of the NHS. Our strategy aligns by focussing on delivering integrated care across different settings, improving patient outcomes, and reducing costs through improved efficiency.

NHS Improvement's Operational Planning and Contracting Guidance

[NHS Improvement provides guidance on operational planning and contracting](#) for NHS providers. Our strategy aligns with this guidance to ensure our services are financially sustainable and able to meet the needs of its patients.



NHS

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