

CHIEF EXECUTIVE'S REPORT

Trust Board	Item: 7
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Purpose of the Report / Paper: To provide the Board with information on strategic and operational issues not covered elsewhere in the agenda.	
For: Information <input checked="" type="checkbox"/> Assurance <input type="checkbox"/> Discussion and input <input checked="" type="checkbox"/> Decision/approval <input type="checkbox"/>	
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Link to Relevant Corporate Objective:	The issues outlined in this report touch on many of the Trusts objectives and risks
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Recommendations: The Trust Board is asked to note the content of this report.	

Chief Executive's Report

October 2018

1. Introduction

This paper provides the Board with an overview of matters to bring to the Board's attention which are not covered elsewhere on the agenda for this meeting. The Board is asked to note the content of this report.

2. Current progress on internal matters not elsewhere on the agenda

2.1 Winter Plan

Winter 2017/18 was an extremely challenging year nationally and locally. Last year's winter plan for Kingston hospital involved the creation of a medically optimised ward (Blyth 30 beds) and the opening of Claremont ward (up to 22 beds). We also built a new UTC and created additional Resus capacity and major's capacity. We reduced our elective programme substantially due to the fire programme which released additional capacity in surgery to accommodate medical outliers through an extremely difficult winter. Critical care capacity was extremely stretched and we were often in our contingency plan that includes the use of theatre recovery for additional capacity. Silver command was a regular feature to manage the pressures from early January through to March/April 2018.

A letter was received by the Trust from Ian Dalton on 18th April 2018 outlining the expectations for winter. It asked us to review demand and capacity, work with system partners to refine our plans, commit to our waiting list for electives being no greater than March 2018 through:

- Reducing the number of long stays in hospital by 25% (super stranded)
- Triaging patients away from A&E & admitted pathways
- Consistently treating non admitted patients in UTC in less than 4 hours (100% performance)
- A draft winter plan was submitted reflecting the following;
- As per the above recommendations- Kingston Hospital is the best performing Trust in London in relation to Long stays and recognised as a site of best practice. This is recognised in the reduction of stranded >6 days LOS, super stranded > 21 days LOS and DTOC lists
- Redirection has been trialled in ED however it confirmed that the opportunity was small as primary care is good in this area and patients attending generally need same day intervention. There is more opportunity through ambulatory care that requires partner support later into the evening for social care and some health needs to support at home which is being scoped.
- The UTC is consistently performing > 99%

The next draft of the winter plan is in progress and the demand and capacity work suggests that if no further capacity is created externally we will have a 15-70 bedded capacity problem peaking at 70 for 6 weeks Jan- Feb 2019.

The trust is working with partner providers on a winter contingency plan. There are options being worked through that either include the Trust absorbing an additional cost pressure through opening capacity to creating a financial risk share where the money would follow the patients. This is complex and requiring a high degree of negotiation and compromise. These options will be presented to the A&E Delivery Board and final agreed plan to the Board in November 2018.

2.2 Brexit Risks

The Executive Management Team has had a number of discussions on Brexit and what implications there may be for the Trust. The Board will be aware of the support put in place for members of staff from the EU, partly as a result of this work. NHS Providers has requested information on planning taking place in individual member organisations with the intention of producing a briefing for members. The Trust has suggested that this should cover national arrangements for access to drugs, licences, and technology, as well as implications for procurement and the workforce. The Chief Operating Officer has established a contingency planning group to support maintenance of operations in the period up to and immediately after Brexit.

2.3 Exercise Buzzard

In July 2018, the Trust participated in a NHS England facilitated exercise (Buzzard) to simulate a Marauding Terrorist Firearms Attack in a fictional crowded environment. During the exercise the Trust was required to test its Major Incident Command Control and Coordination procedures as well as casualty flow against the current capacity of the Trust.

The Trust's Strategic and Tactical Command (Gold and Silver) were set up in Kingston Surgical Centre. Over the duration of the exercise a clinical group triaged virtual casualties and formulated initial treatment plans as they entered the Trust. The exercise was managed against business as usual –using the staff numbers and resources available on the day. The Trust received in excess of 40 casualties over the duration of the exercise, including paediatric and burns patients, facilitating the need to maintain liaison with other Trusts.

The formal exercise report is currently being collated by Public Health England. A structured debrief of the Trust participants has been conducted by the Emergency Planning Team and this identified a number of lessons. These are being actioned by the Emergency Planning Team under the stewardship of the Emergency Preparedness Group and include enhanced training to on call managers and on call directors and improved signage.

2.4 Fire safety work

Fire remedial works are continuing to deliver against the detailed plan which includes Esher Wing, Maternity and Bernard Meade. Additionally, detailed options on the clinical strategy for vacating Roehampton Wing in October 2018 is being discussed by the Trust Space Committee.

The London Fire Brigade have recently undertaken an inspection of the completed work, while closely scrutinising the forward plan to ensure the Trust becomes fully compliant within an acceptable time frame. LFB have reported that they are happy with our performance and have recommended that the Trust continue with the current pace of delivery to ensure full fire safety compliance by Q4 2019.

2.5 Blue Badge Holder Car Parking

The Trust is in the process of undertaking a review, led by the Director of Nursing & Quality, of the impact of introducing charges for Blue Badge Holders. A reference group was established, chaired by Dr Rita Harris (non-executive director), which included RBK Councillors, KHFT governors and patients who are blue badge holders. A survey was conducted which attracted nearly 600 responses, many from blue badge holders, and this has helped to inform the reference group's discussion on transport issues faced by patients and visitors eligible for blue badges. Initially it was estimated that the decision would have been reviewed by July 2018 but this timescale was extended after discussion at the first meeting of the reference group. A number of options have been co-produced with the reference group for the Executive Management Committee to consider when reviewing the decision to introduce the charges. During October the Executive Management Committee is expected to review the original decision and will inform stakeholders of the outcome. The Chief Executive and the Director of Nursing & Quality will also be attending a meeting of the Kingston Health Overview Panel in October to give an update on this issue.

2.6 NHSI Learning Disability Improvement Standards

NHS Improvement Learning Disability Improvement standards were published in June 2018. The standards contain requirements that span all of the Trust's portfolios and will generate a considerable volume of work which will require large scale change across the organisation and potentially require additional funding. Trusts are expected to publish performance against these standards in their Quality reports with NHSI providing further guidance and tools to help quantify and demonstrate performance against the improvement measures.

The most challenging aspects of these standards will be:

- Electronic flagging of all patients with learning disabilities.
- Demonstrating reasonable adjustments to the level required.
- Education and training for staff.
- Assessing the local need in our community.

The Trust is already in a position to demonstrate high quality evidence for some of the standards.

2.7 Staff Survey 2018

The 2018 Staff Survey was launched this week. Once again the Trust is using the Picker Institute to administer the survey. Last year's results were the best ever at KHFT with a response rate of 53%. Our staff engagement score was the 3rd best in London and results overall were very positive.

However the Survey identified three areas the Board agreed to prioritise for improvement-Pay, Access to Training and Bullying/Harassment. A letter from the Chief Executive and flyer (“You said, We did”) is accompanying the e mailing of the survey to each employee outlining the measures we have taken under each area.

The Board has expressed a particular interest in measures to tackle bullying which will feature high on the Equality and Diversity and Workforce Committee agendas. Peer review shows that the Trust has significant resources available to staff to report bullying by patients and managers, and a suite of training interventions to improve managerial awareness, but that the organisation and publicity of these resources requires improvement. To combat this we have launched our expert resources (including the Staff Chaplain, Freedom to Speak Up Guardian, Staff Side and HR Business Partners) as “Dignity at Work Champions” .The role of these staff is being publicised and each Champion, will wear a lanyard encouraging staff to report issues of bullying or harassment using the Trusts Dignity at Work Policy as the framework. The Director of Nursing & Quality will monitor and escalate issues of bullying by patients via the Nursing and Midwifery Board .The Director of Workforce will lead this work and report back to the Board on the impact of these measures, which will be tested in the Staff Survey results available February 2019

3. Matters external to the Trust

3.1 South West London Health & Care Partnership Update

The most recent bulletin from the partnership indicates that there have been further developments across South West London and individual boroughs.

Highlights are:

- Following the publication of the STP refresh in November last year. Local health and care plans are being developed for each borough. These local plans will outline the priorities and plans to improve health and care.
- Working with clinicians across South West London a common specification for the delivery of ENT services has been developed which is now being discussed with provider trusts; the next phase of the MSK pathway redesign was discussed and agreed with the Clinical Senate.
- Following the success of two workshops which considered the opportunities for South West London to take forward its priority health promotion and prevention work-stream, emotional wellbeing in children and young people, a strategy and implementation plan have now been developed.
- A clinical conference is planned for the autumn to set the clinical strategy and priorities for SWL. Clinicians and care professionals from across the system will be invited to take part.

- The Five Year Forward View programme milestones are being delivered and a bid for specialist perinatal transformation funding, which will see £1.6 million invested in this essential area, has been successful.
- Cheryl Coppell OBE was appointed as the new Independent Chair as of September 2018.

3.2 NHS Workforce

Official figures have revealed that the shortage of NHS staff in England has started to worsen again.

Despite efforts to tackle the shortages, including a new pay deal and recruitment and retention campaigns, the data shows that 11.8 per cent of nurse posts were not filled - a shortage of nearly 42,000, 9.3 per cent of doctor posts were vacant - a shortage of 11,500, and an overall 9.2 per cent of all posts were not filled - a shortage of nearly 108,000.

3.3 £145 million to prepare for winter demand

The Department of Health and Social Care has announced a £145 million of capital funding pot to help NHS trusts across the country ahead of winter to improve emergency care.

The funding, which comes from existing departmental budgets, will be spent on 81 new schemes to upgrade wards, redevelop A&E departments, improve same-day emergency care, improve systems for managing bed use and provide an extra 900 beds.

3.4 NHS England 10 year plan priorities

Simon Stevens has highlighted five long-term priorities which will form a core part of the 10 year plan for NHS England:

- Mental health - especially services for children and young people, and potentially “core crisis care”.
- Cancer – intention to overhaul many aspects of screening services.
- A new focus around cardiovascular disease – stroke and heart attacks.
- A renewed focus on children’s services, and prevention and inequality as they affect children.
- New objectives for reducing health inequalities.

3.5 Lord David Prior chosen as next Chair of NHS England

Former health minister Lord David Prior has been named as the government's chosen candidate to be the next chair of NHS England. Lord Prior has experience in high-level leadership roles in the health industry. He served as a Conservative MP for North Norfolk from 1997 to 2001 and previously held the role of chairman at the CQC and of the Norfolk and Norwich University Hospital.

Lord Prior is currently the chairman of the University College London Hospital NHS Trust and is a minister in the Department of Business, Energy and Industrial Strategy, having previously held the same role in the Department of Health and Social Care.

3.6 Ian Dalton Visit

In August, just before the CQC results were published, Ian Dalton, Chief Executive of NHS Improvement, and therefore our national regulator, visited the Trust and met with a range of staff. Following his visit, Ian wrote to us stating:

“I was most impressed at the progress you have made in a short space of time and the strong patient focus is a real credit to both the staff team and your board leadership.

It was particularly heartening to see the improvement work in the emergency department environment, radiology and the elderly care wards. It was evident from those staff we spoke with, how supported they feel and how inspired they are to pioneer new initiatives. You clearly have some enthusiastic and passionate staff, working in what we appreciate, are often highly challenging conditions. Please could you pass on my thanks to everyone who gave up their time to talk to me; it was very much appreciated, they did you proud.”

4. Things to celebrate

4.1 Maternity/Tamba Project

Over the last year Kingston Hospital's Maternity Unit have participated in the Tamba's Maternity Engagement Project. This is a national project whose main aim is for Maternity services to improve their adherence to NICE Multiple Pregnancy Quality Standard 46 (QS46), the result of which shows a reduction in still births, neonatal admissions, neonatal deaths and emergency C-section rates. The programme were very positive about the input and commitment of our unit throughout the process and said:

“It's been heartening to be engaged with a unit that is passionate about driving change in order to improve the services it offers to multiples. Some of the changes you've implemented in a relatively short space of time show what can be achieved with strong leadership and cohesive team working across the different disciplines, combined with a desire to implement positive change.”

Details of the programme of works around the country will be released in the New Year.

4.2 Public Health England Audit Visit

In mid-September 2018 we had a quality assurance visit from Public Health England to audit our antenatal and new-born screening services. The initial feedback was overwhelmingly positive and it included great praise for the level of teamwork across maternity, paediatrics and neonatal unit, sonographers and our pathology services. The official report will be with us in 6 weeks.

4.3 Annual Staff Awards

Each year, the staff awards provide a chance to recognise the hard work, dedication and outstanding care given by our staff members and teams – those who go the extra mile to improve the lives of people and communities we serve. Nominations opened this year in mid-September and will close on Friday 12 October 2018 and winners will be announced at a ceremony in November 2018. Once again patients and public have the opportunity to nominate under the Patient's Choice Award category and the online nomination form and criteria can be found on our website.

4.4 World Sepsis Day

World Sepsis Day 2018 took place recently and in true Team KHFT style we got fully involved to mark the day and raise awareness about sepsis amongst staff, our patients and visitors. This public awareness is vital as the sad truth is, in the UK sepsis affects 25,000 children each year; it kills 5 people every hour or 44,000 people every year; and, a quarter of all sepsis survivors suffer permanent life-changing after effects.

Many departments got involved:

- Paediatrics got creative and created/decorated their own Sepsis tree!
- The ED team had an awareness display; held a 'Make a sepsis bug' competition; created a sepsis 'treasure' hunt – with quizzes and facts; and, ran a sepsis teaching and awareness campaign
- Earl, one of our ED Charge Nurses won the Gold Sepsis Star Award for ensuring patients receive antibiotics within 60 minutes.
- A number of teams participated in the 'sock it to Sepsis' initiative – with members wearing red and white striped socks and tights, prompting many questions from patients, visitors and staff and really raising awareness around sepsis.

4.5 Owl Visit to Paediatric Cancer Unit

Momentum and our Paediatrics team arranged a visit by owls from a local bird park in September as part of Childhood Cancer Awareness Month. The owls were brought into the hospital's paediatric play area and gave children on the wards, and those in children's outpatients, a rare and wonderful experience while being in hospital.

Mother of 6-year old Vinny said: *"It was lovely seeing the owls. Vinny has to visit the hospital every day for a month to receive treatment for cancer. It's really unpleasant for him and the owls were a great distraction."*

4.6 Cardiac Teams Fundraising 'Bed Push'

In September, members of the Kingston Cardiac Support Trust undertook their annual bed-push fundraiser around Kingston town centre. After circulating amongst the busy crowds, and with some judicious navigating through the Market Place, the volunteers ended the day with aching limbs and croaking voices. The day ended well with a total being raised from sponsorship and the street collection of just in excess of £2,100.

The money raised will be used to support patients of the Cardiology Department by funding 24 hour tape and blood pressure monitors, ECG machines, software licences for the ward to be able to review diagnostic results online and most recently has provided £100k towards the purchase of an echo reporting system.

4.7 Council of Governors Elections

Elections to the Council of Governors will take place from 30th October to 20th November 2018 for members from Kingston, Richmond and Elmbridge. Staff will also elect a governor from the Medical and Dental Practitioners group of staff. The nomination period closes on 11th October 2018. Anyone interested in standing for election should contact khft.ftmembership@nhs.net to find out more, or go to the Trust website via this link: <https://www.kingstonhospital.nhs.uk/our-trust/council-of-governors.aspx>