

CHIEF EXECUTIVE'S REPORT

Council of Governors	Item: 6
Date of meeting: 16 th October 2019	Enclosure: C
Purpose of the Report / Paper:	
To provide the Council of Governors with information on strategic and operational performance, issues and risks.	
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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Recommendations:	
The Council of Governors is asked to note and discuss the updates provided in the report.	

Chief Executive's report

1. Introduction

This paper provides the Council of Governors with an update on performance, key risks that could impact upon the strategic development of the organisation and items of note not covered elsewhere on the agenda. The attention of the Council of Governors is drawn to the current key risks for the Trust:

- Continuing operational pressures across the health and care system as a whole, and the impact on performance and staff resilience within the Trust.
- Brexit.

2. Operational performance

The Trust achieved the Referral to Treatment (RTT) and all other performance targets for August, with the exception of the A&E four hour wait, despite continuing operational pressures. It maintained its good performance in ambulance turnaround times, which releases the crews in a timely way to be able to response to emergency calls.

All cancer targets were achieved in July, apart from the 31-day subsequent surgery target (one breach as a result of treatment delayed due to infection). Maintaining the 62 day performance target remains challenging. There were three 100 day breaches with the main themes relating to multiple diagnostics and poor patient compliance. The Trust had a spike in two week wait referrals in July (1,600); this is the highest number of referrals ever received. This volume of referrals will continue to place increased pressure on diagnostics and the Trust's ability to achieve transfer of care for the small number of cancer patients within 38 days.

The high demand for non-elective services continues and there is a significant rise in working age adults attending A&E, with work ongoing to understand the drivers. There is a clear impact on patients, who wait longer, but also recognition of the impact on staff who continue to deliver outstanding care despite the challenges with patient flow. The Trust's Emergency Care Programme Board, which feeds into the A&E Delivery Board, is focusing on a new approach to surge planning which involves non bed based solutions across the south west London health and care system. The Trust will engage with key staff in developing this plan to ensure that it stays safe, remains quality focused and builds in some recovery time for staff.

Brexit

The Department of Health and Social Care (DHSC) is leading national NHS preparations for a 'no deal' Brexit. The Department has established a national Operational Response Centre (ORC) which includes NHSE/I and Public Health England (PHE). This will lead on responding to any disruption to the delivery of health and care services in England, which may be caused or affected by EU exit. NHSE/I's operational response, led by EU Exit Strategic Commander Professor Keith Willett, is based on enhancing existing command and control structures used in emergency preparedness, resilience and response (EPRR) in common with a unified approach agreed across PHE and NHS Blood and Transplant. NHSE/I has issued guidance that all trusts should have full contingency plans in place to ensure safe services for patients can continue to be provided in the event that the UK leaves the EU without a deal on 31 October 2019. The Trust's Brexit Risk Assessment Group, led by SRO Mairead McCormick, Deputy Chief Executive and Chief Operating Officer, has reinstated regular meetings to review the detailed risk assessment, gap analysis and scenario testing of the use of business continuity plans against the key risk areas to ensure that the Trust's no-deal Brexit plan is still fit for purpose.

3. Financial sustainability - finance position month five

Income & Expenditure	Annual Budget £000's	IN MONTH			YEAR TO DATE		
		Budget v Actuals			Budget v Actuals		
		Budget £000's	Actual £000's	Var £000's	Budget £000's	Actual £000's	Var £000's
Income from patient care activities	263,733	21,854	21,160	(694)	109,410	107,237	(2,174)
Other Operating Income (incl. PSF)	32,203	2,590	2,988	398	12,651	13,628	977
Employee expenses (incl. Non-exec directors)	(182,816)	(15,235)	(15,361)	(126)	(75,966)	(75,071)	895
Non-Pay Expenses (excl. dep'n and non-exec directors)	(96,188)	(8,355)	(7,994)	361	(41,723)	(41,419)	304
Non-Operating costs (inc depreciation)	(15,773)	(1,315)	(1,229)	86	(6,575)	(6,197)	378
Subtotal (Deficit)/Surplus (Incl PSF/MRET/Don Assets)	1,159	(461)	(435)	26	(2,203)	(1,823)	380
Central Funding including PSF	(8,859)	(642)	(642)	(0)	(2,923)	(3,293)	(370)
Donated Assets Adjustment	(61)	(6)	(20)	(14)	(30)	(25)	5
Control Total excl Don Assets & PSF (Deficit)/Surplus	(7,762)	(1,109)	(1,097)	12	(5,156)	(5,140)	16

*PSF - Provider Sustainability Funding

The Trust reported a cumulative deficit in year of £1,823k at the end of month five, which is £380,000 favourable against the year to date plan. The favourable position is linked to the receipt of £370,000 additional PSF (Provider Sustainability Funding) for the prior year, and does not contribute to the overall control total, which is in line with plan. There has been some additional cost, as would be expected with the unprecedented level of demand for services seen recently. The Trust is monitoring those cost pressures and they will inform the forecast outturn in the coming months. The Trust is performing above the contract for SW London and is discussing the impact and management of these pressures with the CCG, primarily from a clinical and operational perspective, but including the financial implications.

4. Workforce

The Trust's workforce performance indicators remain strong, although behind target. In August the position was:

- Vacancies 8.2% against target of 6%.
- Turnover 14.1% against target of 13.5%.
- Stability index 87% against target of 90%.
- Appraisal 65.8% against year-end target of 90%.

Statutory and mandatory training

Following a major push to raise compliance, the Trust's statutory and mandatory training figure for September was 89.69%, against target of 85%. At the time of the last report (July) this figure was only 75%. This is a fantastic achievement, particularly in light of continued operational pressures.

Pensions

As reported previously, the topic of pensions is creating a lot of interest and unease in the NHS at present. The Trust is reviewing how it can assist staff to mitigate their liabilities legally and ethically and continues to lobby for change nationally via the London HR network and NHS Improvement/NHS England. The pensions workshop that was run in May for staff has been repeated in October. Films of both are published on the intranet for all staff to access the information and financial advice given at the session. The October workshop also included details of a new salary sacrifice car loan scheme available to staff.

Annual Staff Awards

Nominations for the 2019 Annual Staff Awards are open. The annual awards, like the monthly staff awards, are hugely important to staff, and their teams, and celebrate the Trust's *living our values everyday* ethos: Caring, Safe, Responsible, and especially Value Each Other. The categories have been revamped this year and patients and staff will be able to nominate staff members for a variety of awards aligned to our values. Nomination forms are available on the Trust's website:

www.kingstonhospital.nhs.uk

5. Estates

Capital development plan

There is a wide range of projects scheduled for the coming year that will significantly improve patients and staff experience, including the relocation of services in Roehampton Wing; the decant of Regent Wing; the redevelopment of Vera Brown House, and ongoing developments in ED and Radiology. Earlier this month, the Trust held a Site Development Forum for staff to find out more about plans to develop the hospital site. Over 200 staff attended throughout the day and feedback

received suggested that the sessions were useful in keeping staff updated and engaged with plans. The Trust envisages that the Site Development Forum will be held quarterly going forward.

Command Centre

The project to remove asbestos in the Command Centre is underway, with the site set-up being carried out. The asbestos is undisturbed and presents no risk to health. It will be removed in a controlled way starting with the unoccupied top and middle floors. Removal works commenced on Monday 15 July, with a view to finishing in early November 2019.

Coombe Road development

A small parcel of land on the corner of Coombe Road was sold in March to Advanced Living (AL), which provides accommodation for senior living; their plan is to develop 120-140 homes. AL anticipates submitting a planning application in October and a decision being made in January 2020. Planners will contact local residents and the hospital for feedback ahead of making a decision in January 2020. The Trust will be submitting a formal response to AL's planning application at the appropriate time and is moving forward with its plans to relocate staff from the Regent wing building by September 2020.

TIMINGS:

October 2019 – submit planning application

January 2020 – planning decision made

Autumn 2020 – site work begins

For more information contact Advanced Living: enquiries@advancedliving.co.uk 0203 174 2018

Fire code works

The work across the estate continues and has been completed in Bernard Meade, the neonatal area and the spirituality and wellbeing centre. Additionally, horizontal evacuation has been reinstated in Esher Wing following the completion of the fire code works.

Kennet ward

Despite the challenges around operational demand, the Trust went ahead with the renovation of Kennet ward to bring it in-line with Derwent and Blyth wards. As an elderly care ward, Kennet was in need of enhancements to align it with our existing upgraded dementia wards. The work was previously been postponed due to the unprecedented high patient bed demand however the estates and clinical teams have worked closely to deliver a timely outcome. The works have been progressing well and Kennet ward opened ahead of schedule at the beginning of October.

Vera Brown House

A contractor has been selected for the fitting out of the second and third floors, to accommodate staff from Regent Wing, and the requisition is going through the approvals stage. The intention is to mobilise the site during September and commence the third floor early October to complete in March. The second floor works are due to commence in February 2020, to be completed in July.

6. Systems and partnerships

Health and Care Vision for London

In early October the Mayor of London, Sadiq Khan, launched his health and care vision for London. Developed by the Healthy London Partnership, a collaboration between Public Health England, the NHS, the Mayor of London and London Councils, the shared ambition is to make London the world's healthiest global city and the best global city in which to receive health and care services. The London Vision has 10 areas of focus that link into borough priorities:

- Reducing childhood obesity
- Improve wellbeing of young Londoners
- Progressing towards zero suicides
- Improving air quality
- Tobacco control and reducing smoking
- Reducing violence
- Improving homeless health
- Preventing HIV and STIs
- Better support for people who have dementia
- Better care and support at the end of life

It is the beginning of a conversation about the next phase of collaborative work across public service and wider society to make the most of opportunities for good health and tackle issues that cause poor health and health inequalities. A short summary of the vision, and the full report, are available on the Healthy London website: www.healthy london.org/vision/

South west London response to the NHS Long Term Plan

The NHS Long Term Plan published in January 2019 sets out a requirement for local health and care systems to develop a five year strategy to identify how they will deliver the ambitions in the Plan. In response, South West London STP published its discussion document entitled the *Five Year Health and Care Plan for people in South West London*. The plan outlines the ambitions of both the Borough Local Health and Care Plans and the pan-South West London programmes to enhance clinical care and standards. These are supported by three critical enablers of digital, estates and workforce, as

well as a narrative on how we will work together as we move towards an integrated care system. The Trust has been asked during October 2019 to discuss the content within our organisation.

Patient First Strategy

The Trust is in the process of refreshing its strategy, as part of the refresh the Trust's values is also being reviewed. The purpose of the review is to ensure that they are aligned with the Trust's patient first approach – i.e putting patients are the centre of values. The review sees the existing values stand but adding an additional value to reflect our focus on improvement and innovation. The closing date for the survey was Friday 11 October. In addition to refreshing the values work is progressing around the development of the Trust's strategy and clinical priorities. This work is not only informed by staff but also the London and South West London strategic areas of focus. Further information will follow.