

CHIEF EXECUTIVE'S REPORT

Name of meeting: Trust Board	Item: 6
Date of meeting: 7th February 2018	Enclosure: C
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"/>	
Sponsor (Executive Lead):	Chief Executive
Author:	Executive Team
Author Contact Details:	Ann.radmore@kingstonhospital.nhs.uk 020 8934 2814
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Link to Relevant Corporate Objective:	The issues outlined in this report touch on many of the Trusts objectives and risks
Document Previously Considered By:	N/A
Recommendations: The Trust Board is asked to note the content of this report.	

Chief Executive's Report

February 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 Fire Safety Programme

The fire team have completed the Theatre programme on-time and within budget, covering theatres 1, 2, 4, 6, 7 & 8. This month the team will be working on the lift landing areas and level 2 of Esher wing, as part of the next phase of the project, which will not only create fire safe refuge areas, but will also deliver an updated space on each floor, offsetting any obvious damage the essential fire work installation has had on the building fabric. Maternity, Bernard Meade and Esher Wing fire alarms are also being updated and remapped to facilitate improved messages for first responders, allowing the exact location of the activated fire head to be displayed on the main fire panel. Coupled with this the site-wide fire cable network has been installed and commissioned to mitigate the risk in this area. Additionally, Haematology has moved to Roehampton Wing as a temporary location prior to its final home within Sir William Rouse, thus allowing the vacated space on the 7th floor to be used for winter pressures.

2.2 The Urgent Care Treatment Centre

The Urgent Care Treatment Centre opened in December 2017 and has been really well received by patients and staff. The environment has provided a sense of calm and the waiting space has substantially reduced crowding. The new majors and resus extension is now open.

2.3 Response to Winter

The surge plan was implemented to the highest level in January and silver command was put in place. All partners worked extremely well together to manage a challenging period with high volume of patients with Flu compounded by norovirus and staff sickness. The Trust had planned to reduce elective work by 50% in this period to facilitate the fire works. We opened some extra escalation beds and cancelled some elective outpatients and surgery to release additional resources for the emergency pathway. We recovered flow within a week and have managed to sustain good emergency care performance although the demands remain high.

2.4 Flu Vaccine

The Trust has a current flu vaccination rate for staff of 72%;this not only means the Trust has met the CQUIN for this measure, set at 70%,but has achieved the 4th best vaccination rate in the NHS in London.

Occupational Health are continuing to offer the vaccination given the high levels of flu in the patient population this winter. We await further guidance on managing Flu for next winter; there are discussions going on nationally about making this a mandatory requirement for front line staff.

2.5 Time to Change

Time to change is a campaign running since 2007 organised by the mental health charities Mind and Rethink Mental Illness with the aim of improving the attitudes and behaviours towards those among us with mental health problems. The campaign specifically targets the stigma around mental health which results in people feeling they need to hide symptoms for fear of discrimination. This means that problems go undiagnosed until symptoms are severe making recovery more difficult and lengthy, and extending the suffering of the individual and those close to them. The Trust joined the campaign at the Health & Well-being Conference in November 2017.

The campaign recruits volunteer Time to Change Champions who they resource and encourage to create more open workplaces where staff are encouraged to talk and listen to each other. They also target schools and community organisations and are members of the Global Stigma Alliance which shares evidence and best practice between countries.

Time to Change is a grass roots movement which does not educate or tell people what to think but aims to model acceptance and understanding through positive language and normalising discussions about mental health. The campaign is on-going but each year there is a Time to Talk Day on which Champions co-ordinate attention onto that fact we all have mental health and need to look after it. This year Time to Talk Day was on Thursday 1st February.

2.6 Private Patient Unit (PPU) Procurement

The Trust's contract with BMI Healthcare to operate The Coombe Wing – a dedicated Private Patient Unit (PPU) for the provision of private patient services on site, is coming to an end later this year. In May 2017, the Trust began a procurement exercise to find a new partner to run Coombe Wing and to invest in a new private hospital on the main Kingston Hospital campus and has recently identified a preferred bidder – One Healthcare.

One Healthcare was established in August 2014 to create a national network of purpose built hospitals designed to replicate the highly successful surgery centres common in Australasia and the US. One Healthcare currently has two hospitals open, Ashford in Kent and Hatfield in Hertfordshire and has plans to open several other new facilities over the next 5 years. Each hospital is designed to provide highly efficient, leading edge clinical facilities supported by rapid recovery programmes in

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modern, welcoming high-quality patient surroundings. One Healthcare's management team has been responsible for the financing, development and operation of over 40 private hospitals and private patient units across the UK over the last 25 years.

The Trust is now entering a period of contract negotiation with One Healthcare and subject to negotiation and due diligence, private patient services will transfer to the new provider later in the year.

Having a private patient unit on site provides an income stream that contributes positively to the Trust's overall financial position, which in turn supports the delivery of NHS patient care.

2.7 Car Parking

Kingston Hospital NHS Foundation Trust has introduced a new parking system operated by CP Plus who have taken over the management of Kingston Hospital car parks to address issues highlighted by patient and public feedback on current arrangements.

The new system operates a 'Pay on Exit' model and users do not need to display a ticket. CP Plus uses an Automatic Number Plate Recognition system (ANPR) and is in operation across all entrances/exits of the hospital site. When paying at the new machines, patients and Visitors will need to put their registration number into the machine which then calculates their payment.

The new system also makes paying for parking easier as both credit and debit card (including contactless) payments are accepted. Some machines also give change and accept notes.

The hospital's car parking charges will be staying the same, but in line with many NHS Trusts and local councils, the Trust has introduced charges for blue badge holders for parking at the hospital.

This change has been brought in independently of the new car parking system, but came into effect at the same time.

The Trust currently has 30 Blue Badge spaces on site, located close to most of the buildings patients need to access. The Trust plans to increase the number of blue badge spaces over the coming year, in addition to carrying out other works designed to improve accessibility to the hospital. The revenue generated will help fund these improvements.

The Trust has committed to undertaking a review of the impact of introducing charges for Blue Badge Holders after the first three months of operation, including a full equality impact assessment using the Trust's standard methodology.

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The terms of reference for the review are under development with input from representatives of the Royal Borough of Kingston Health Overview and Scrutiny Panel, Kingston Healthwatch and the Council of Governors. A reference panel including patients who are Blue Badge Holders will be created as part of the review.

The Trust has identified staff who are Blue Badge Holders and we are working through arrangements for each individual case. A policy addressing the car parking needs of disabled staff will be produced for future reference.

2.8 Deep Dives & Walkabouts

We have been reviewing the processes in place for review and governance of quality and risk, including benefiting from the input of the new Director of Nursing & Quality. A Senior Nurse led peer review approach has been introduced on the wards. These reviews occur fortnightly with senior nurses reviewing the same wards to build a relationship with the staff to improve continuity and so that there is a consistent approach.

At the end of the review senior nurses meet and discuss, document and escalate concerns for action. Trends the themes of finding are discussed which then help identify the focus for the upcoming review.

Themes have been uniform policy, professional standards, information & information boards, estates issues etc.

The monthly Walkabouts programme is led by Executive Directors and joined by Non-Executive Directors and Governors. The Walkabouts programme will undertake announced visits to services and departments across the whole Hospital (clinical and non-clinical). This will address feedback received from staff that they would like to see Executive Directors more often and feedback from governors that there was a preference for knowing which areas are to be visited in advance. The first Walkabout of 2018 was led by the Director of Workforce on 22nd January 2018 and visited Breast and Maternity service lines.

2.9 Freedom to Speak Up – Raising Concerns

The Trust submitted Q3 data (1 September – 31 December 2017) to the National Guardian's Office in January 2018. A summary of the national data will be published on 29th January 2018. In Q3 the Trust's Freedom to Speak Up Guardian reported that three cases had been brought to her attention. Cases are counted irrespective of whether they have been 'closed' or not during that period and are recorded as a separate case even if they are individuals coming as part of a group about the same matter. It is a positive sign that none of the cases reported in Q3 were made anonymously. All three cases in Q3 related to behaviours of others within the Trust and none had any element of patient safety attached. The Freedom to Speak Up Guardian continues to work with

the Communications team to raise the profile of the role within the Trust and to signpost the different routes available to staff who wish to raise a concern.

2.10 Point of Care Testing (POCT) for Flu

The Trust has recently introduced a new way of testing adult patients for flu, using a new molecular analysing device. In December, Point of Care Testing (POCT) for Flu was introduced in both the Emergency Department and Acute Assessment Unit, where senior nurses were trained in how to use the new molecular analyser to test for Flu. This new way of testing gives a result in 20 minutes, allowing staff to diagnose adult patients with flu faster than ever before.

Kingston Hospital is the first hospital in the country to fully implement this new molecular test by the bedside, and after an increase in flu cases over the Christmas period, the device has been extremely useful. From 21st – 31st December the testing was called into action 87 times, with a third of these cases testing positive for Flu.

With this increase of flu cases at the hospital, having the POCT analysers in place has not only meant patients have been diagnosed and treated quicker, but has also had a positive effect on bed management. It has led to a significant reduction in the need to close bays and isolate patients due to infection control reasons.

3. Matters external to the Trust

3.1 The Sustainability and Transformation Partnership – now called Health & Care Partnership

The refreshed Sustainability and Transformation Partnership Plan for SW London was published at the end of November 2017 with new narrative strengthening the focus on keeping people healthy. To achieve this focus on keeping people well, the SW London STP recognises that a local approach works best. Planning is to be based on people's health and care needs from local communities upwards, with key principles including best bed is own bed, care centred around the person, and focusing on prevention and keeping people well, which is likely to result in changes to services locally but not expected to mean the closure of any hospitals. Further details of the refreshed plan can be found at <https://www.swlondon.nhs.uk/wp-content/uploads/2017/11/STP-discussion-document-final.pdf>

The second phase of the refresh commenced December 2017, involving Local Transformation Boards engaging with partners and stakeholders to develop their locally focused Health and Care Plan. Where LTBs cover more than one borough, individual Place plans will be written so that borough level issues, priorities and plans are identified. Borough level Place plans will then be brought together to create the LTB's Health and Care plan. It is expected that these plans will outline the LTB's joint vision; their model for Health and Care; the local context and challenges faced including financial and clinical sustainability; and the priority areas of focus for the next 2

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years to meet the health and care needs of the local populations. The Trust is represented on the Local Transformation Board and will actively participate in the development of plans.

4. Things to celebrate

4.1 RemindMeCare

The Trust is revolutionizing care for their patients with dementia by using a new unique piece of software to help understand their needs, likes and dislikes. RemindMeCare is bespoke reminiscence and family engagement software that helps create an e-collection of meaningful pictures and video that describe the habits and achievements that make everyone unique and help us deliver more informed care. The resulting collection of music and images constantly evolves as new responses are registered.

We are one of the first Trusts to introduce RemindMeCare. Thanks to Kingston Hospital Charity for the funding, staff on Derwent Ward are using the software. It has been a real success and a wonderful opportunity to explore how the power of bespoke reminiscence therapy and life story work benefits our patients, their relatives and carers. Staff use this unique tool to support conversation one to one or to stimulate, discover common experiences and reinforce self-worth. They use it daily to promote group discussion whilst activities are taking place in our Dementia Activities Room.

The information discovered remains the property of the person being cared for, and with consent it is shared amongst relevant members of our care team. Access remains available to the individual, their family and friends once they leave/stop working with the care team at Kingston Hospital.

4.2 Relaunch of Kingston Hospital Charity (KHC)

Kingston Hospital Charity, the charity for Kingston Hospital NHS Foundation Trust, relaunched in November with a new logo and graphic identity to help build greater awareness of its work and to support its fundraising. The charity's new identity highlights its connections to the local community, and encourages people to support their local hospital.

Kingston Hospital Charity raises vital extra funds for things the hospital would not otherwise be able to afford – equipment for better diagnosis and treatment; patient-friendly amenities and environments; patient comforts; clinical research; and staff training, development and general wellbeing.

The Kingston Hospital Charity team is eager to work with all departments and services at the hospital, to create a greater contribution that benefits all staff and patients at the Trust, now and in the future.

Charity funds and support have delivered a long lasting difference to the hospital, its patients and its staff and Kingston Hospital Charity's new identity will help create an environment where we can achieve much more.

4.3 Non-Executive Director receives a Damehood

Kingston Hospital NHS Foundation Trust's Non-Executive Director, Cathy Warwick CBE has received a Damehood in the New Year's Honours list for her services to midwifery. Dame Cathy Warwick joined Kingston Hospital's Trust board as a Non-Executive Director in October 2017 after retiring from her position as Chief Executive of the Royal College of Midwives.