

CHIEF EXECUTIVE'S REPORT

Trust Board	Item: 7
Date: 3rd June 2020	Enclosure: C
Purpose of the Report / Paper:	
To provide the Board with information on strategic and operational matters 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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Risk Implications - Link to Assurance Framework or Corporate Risk Register:	The matters outlined in this report touch on many of the Trust's risks
Link to Relevant Corporate Objective:	The issues outlined in this report touch on many of the Trust's objectives
Document Previously Considered By:	N/A
Recommendations:	
The Trust Board is asked to note the content of this report.	

Chief Executive's Report

June 2020

Introduction

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

An update on matters not included elsewhere on the agenda

COVID-19 update

Since the start of the pandemic in March 2020, the NHS has been operating under EPRR (emergency preparedness, resilience and response) arrangements for a level 4 national incident. NHSE/I is co-ordinating the national response with local commissioners operating at tactical level. We have been contributing to the response through system calls and existing EPRR and surge arrangements for SW London, and have been describing in weekly reports to non-executive directors of the Trust the latest position within Kingston Hospital, and the work being done with partners, to care for patients and to support staff. Our Gold and Silver command incident teams have been in place throughout and that continues to be the case.

A verbal update on the current position within the hospital will be given at today's meeting.

The number of COVID positive patients within Kingston Hospital remains low and this position has remained relatively unchanged during the month of May. At its peak in early April, we were caring for 110 patients who had tested positive for COVID.

Upon national guidance, our programme for elective appointments ceased in March, with outpatient clinics in some areas being held virtually or as telephone appointments. Although our urgent services have continued throughout the pandemic, we saw a significant reduction in the numbers of patients attending our emergency department.

During the month of May, we have seen a steady return of patients to the hospital through the emergency department and into hospital beds. We are now preparing to bring our elective work back on-line, working within nationally issued guidelines.

At present the availability of beds, PPE and oxygen supplies continue to be well-managed. The number of staff absent from work due to the pandemic, continues to decrease.

We have been working through the Government's health and safety advice for employers about safe working practices, carrying out risk assessments in every part of the Trust. We are now addressing the issues which have come to light through these assessments, to ensure the ongoing safety of staff at work and patients as they return to the hospital.

A multi-disciplinary team of professionals at the Trust has completed an infection control and prevention, board assurance framework. No significant concerns have been highlighted.

An area of immense focus for us throughout the pandemic has been around supporting staff, listening to their concerns and responding. We are very conscious of the pressure staff have been under both physically and emotionally, in particular those who have cared for very unwell patients and those at the end of their lives, at times taking the place of family members who were not able to be with their loved ones at the end of life.

We have given significant attention to our internal staff communication and engagement activities, and we have channelled additional resources (including significant charitable donations) towards staff health and wellbeing. This has included additional psychological support for staff to strengthen the existing multi-disciplinary support on offer to staff through our health and wellbeing team, new staff rest areas, and hot meals for staff working at night.

During the pandemic, we have been overwhelmed by the support we have received from individuals and organisations from the Kingston community and beyond. We remain extremely grateful to the community for this support and will be writing to them to thank them for their extraordinary kindness.

Recovery

The NHS continues to be in a level 4 national incident across the country as the disease continues to circulate in the community. However, we have now moved into the next phase of managing the pandemic, looking at how we adapt health and care services for the longer term to help us manage COVID-19 patients, as well as making sure our non-COVID patients feel confident to use our services.

A South West London Recovery Board has been established for the SWL integrated care system of which we are a part. It has been agreed that we will accelerate our Five Year Plan developed across south west London and will begin the recovery process with a collaborative approach and planning grounded in the experience of health and care staff, patients, the public and local leaders.

The challenge will be doing this whilst we are still responding to the incident. However, we are confident in our joint ability to innovate and build on the way we jointly responded to the pandemic for the future.

We are keen to get going again with elective and diagnostic work and have now developed a local governance framework to oversee this work. Before we bring services back online, there are a number of important areas that we are working through such as infection control and prevention, increased staff and patient testing. The separation of COVID and non-COVID patients in the future is a complexity that could not have been imagined some months ago but we are beginning the discussions on the steps we will take into the future to manage this.

We have continued to talk to colleagues across the trust and patients to understand the changes which we have made in recent weeks so we can incorporate the positive improvements we have seen for staff and patients into business as usual post COVID.

FINANCE

Annual Operating Plan

The Trust submitted the draft Annual Operating Plan on 5 March, 2020. The original date for submission of the final Operating Plan was 29 April, 2020 but the planning process has been suspended and we await final guidance from NHSI/E with regards to submission.

Annual Budget 2020/21

A budget for 2020/21 has been approved by the Board as a holding position to act as a baseline for governance whilst recognising that changes will arise as a result of the COVID pandemic and the recovery phase. The baseline budget is below, however it is recognised that once further national guidance is received a revised version will be produced.

Income & Expenditure		2019/20 Actual - excl. Covid 19	2020/21 Plan	% Change
		£m	£m	
Income	NHS Patient Care Income	259.3	266.7	3%
	Other Patient Care Income	12.7	15.6	22%
	Other Income	26.7	24.8	-7%
	Central MRET Funding	3.1	3.1	0%
Income		301.9	310.1	3%
Expenditure	Pay	(191.0)	(193.7)	1%
	Non Pay	(100.9)	(102.7)	2%
Expenditure		(291.9)	(296.5)	2%
EBITDA		10.0	13.7	
Depreciation and Amortisation		(8.2)	(9.3)	
Investment Revenue		0.1	0.1	
Finance Costs		(4.1)	(4.5)	
Public Dividend Capital		(2.5)	(3.3)	
Control Total		(4.6)	(3.3)	
Provider Sustainability Funding (PSF)		6.1	3.3	
Total Surplus/(Deficit) (excl Don. Assets and Imp.)		1.5	(0.0)	
Depreciation on donated assets		(0.2)	(0.2)	
Donated Asset Income		0.9	0.3	
Impairments		(6.7)		
Total Surplus/(Deficit)		(4.4)	0.1	

Capital Plan 2020/21

There has been a change in the financial regime for capital. The guidance issued by NHSE/I in April now provides capital affordable envelopes to each Integrated Care System for local prioritisation of system driven operational capital expenditure.

We have recently received the allocation for SWL and there is a currently a national funding shortfall against the capital schemes listed in our operating plan submission. Each Integrated Care System has been asked to revisit their capital projects and highlight any slippage or reprioritisation against their 20/21 plans to address this funding shortage.

Emergency capital allocation will still be available for applications that meet the criteria. Applications must demonstrate urgent and essential capital expenditure that has been prioritised by the Integrated Care System and NHSE/ I regional team, but are unaffordable to individual organisations.

SUSTAINABILITY

Work continues across the Trust to deliver the capital development programme

Vera Brown House refurbishment

The refurbishment of Vera Brown House is currently progressing to plan, and staff from our HR and finance teams have moved into this new, improved work environment. Staff due to occupy level 2 of Vera Brown House are expected to move in during July and those due to occupy level 1 are expected to move in during September.

Rowan Bentall Wing

Works taking place on the Rowan Bentall Wing have continued, with only a five-week delay. The new interventional suites in the Rowan Bentall Wing are due to go live in the first week of July.

Other capital projects

In July, work will commence on replacing the second emergency department x-ray room. Renovations to endoscopy (level 7 Esher Wing) are on track to be completed in September.

Car parking

At the start of the pandemic, hospital car parking restrictions were lifted enabling staff without parking permits to park on site. This was possible due to the reduction in patient and visitor numbers to the site, with staff parking in patient areas.

Staff have appreciated being able to park at work, as driving to work has given them an alternative to public transport. We are also extremely grateful to The Royal Parks who have permitted our staff to

park in the Kingston Gate car park when Richmond Park has been closed to cars – an arrangement which will continue for the foreseeable future.

As we prepare to bring elective services back online which will mean an increase in members of the public on-site, many of whom will require on-site parking, we are preparing to move staff to alternative parking facilities. We are in talks with Kingston Council, and local businesses to understand what the off-site parking options are for our staff in the local area.

Through our internal staff communications we continue to promote green transport such as cycling and walking to work. We are also making additional cycle storage and showers available to staff.

OUR PEOPLE

Staff Awards

In recent weeks we have continued to run our monthly staff awards so that staff are recognised following nominations for staff who live our values.

We were however unable to proceed with our 2019/20 annual staff awards event on Thursday 12 March, 2020. It remains unlikely that we will be able to host a large scale gathering of staff for some time, so we have decided to go ahead with the 2019/20 awards, virtually.

In the weeks ahead the communications team will film each winning individual or team receiving their award from the board members or governor who had originally agreed to present the awards (if this is practical). Each of the film clips will be shared through the trust's communication channels, with a compilation film produced to be shared in July.

We are hopeful that we will be able to run a physical staff awards event for staff at some point in the future which will give us an opportunity to thank and recognise staff for their exceptional work during the pandemic.

Events and high profile visits

Launch of Rainbow Badge initiative

In March, Kingston Hospital staff celebrated the launch of rainbow badges, demonstrating a commitment to non-judgmental, inclusive care, and an understanding of the issues LGBT+ people can face in healthcare settings. The Rainbow Badge was introduced by Dr Michael Farquhar who works at Evelina London Children's Hospital, to promote a message of inclusion to hospital staff and patients. By wearing the rainbow badges, staff at Kingston Hospital are letting an LGBT+ person know that they can talk to them about who they are and how they feel.

The Duchess of Cambridge spoke to Kingston Hospital midwives ahead of Maternal Mental Health Awareness Week

The Duchess of Cambridge spoke with Kingston Hospital midwives, health visitors, parents and leading sector experts about the challenges and impact that COVID-19 has had on new and expectant mothers and their families, ahead of Maternal Mental Health Awareness Week. On Wednesday 22 April, The Duchess spoke with a group of our midwives through an online conversation into Kingston Hospital, where she heard about the ways in which staff are ensuring that women continue to have the best possible support before, during and after birth.

Korean resident groups donate over £22,000 to Kingston Hospital Charity

Kingston Hospital Charity was presented with donations amounting to over £22,000 from both South Korean communities and the North Korean community for Korean Unification, to support the hospital's staff wellbeing appeal. The presentations were made on 12 May and among those attending were Korean Ambassador, Enna Park, President of the Korean Residents Society, Chunsoo Song, Vice President of the Korean Chamber of Commerce, J S Kim, and Secretary for the Kingston Hospital Fundraising Campaign, Justina Jang.

First patient recruited to national COVID-19 clinical trial

In March, Kingston Hospital became the first hospital within South West London to recruit a patient into a multi-centre, national trial to investigate treatments for COVID-19 patients. The RECOVERY trial, established by the University of Oxford, aims to identify treatments that may be beneficial for adults that are hospitalised with confirmed COVID-19.