

<b>Trust Board</b>	<b>Item: Patient First Strategy Update</b>
<b>Date: November 2021</b>	<b>Enclosure: J</b>
<b>Purpose of the Report:</b> <p>The purpose of this report is to provide an update on progress against delivery of the Patient First Strategy over the last 12 months. It provides examples of how we are delivering against our goals which are aligned to our strategic themes of quality, our people, systems and partnerships and sustainability. The content of the report is intended to provide an overview of progress, with examples included to demonstrate the progress made, although this is not an exhaustive list.</p> <p>It sets out the context in which the strategy is being delivered and highlights that work is required to develop a process for identifying wider system aligned objectives for 2022-23.</p> <p>The current Board Assurance Framework is attached at Appendix 1 which provides the detail of performance against the detailed objectives, highlighting the areas where further focus is required up to March 2022.</p>	
<b>For: Information</b> <input checked="" type="checkbox"/> <b>Assurance</b> <input checked="" type="checkbox"/> <b>Discussion and input</b> <input checked="" type="checkbox"/> <b>Decision/approval</b> <input type="checkbox"/>	
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<b>Risk Implications – Link to Assurance Framework or Corporate Risk Register:</b>	NA
<b>Legal / Regulatory / Reputation Implications:</b>	NA
<b>Link to Relevant CQC Domain:</b> <b>Safe</b> <input type="checkbox"/> <b>Effective</b> <input type="checkbox"/> <b>Caring</b> <input type="checkbox"/> <b>Responsive</b> <input type="checkbox"/> <b>Well Led</b> <input checked="" type="checkbox"/>	
<b>Link to Relevant Strategic Theme:</b>	All themes: Quality, Our People, Systems & Partnerships and Sustainability
<b>Document Previously Considered By:</b>	Executive Management Committee
<b>Recommendations:</b> <p>The Board is asked to note:</p> <ol style="list-style-type: none"> <li>a) The progress made to date in the delivery of the Patient First Strategy</li> <li>b) The changing context in which the strategy is being delivered</li> <li>c) A process is to be developed to support identification of objectives for 2022-23 to reflect the focus on joint objectives at place/system level alongside the Better Together programme to support the integration of care.</li> </ol>	

# Patient First Strategy 2020-2025 – Progress Report

## 1. Purpose of report

The purpose of this report is to provide an update on progress against delivery of the Patient First Strategy over the last 12 months. It provides examples of how we are delivering against our goals which are aligned to our strategic themes of quality, our people, systems and partnerships and sustainability. The content of the report is intended to provide an overview of progress, with examples included to demonstrate the progress made, although this is not an exhaustive list.

It sets out the context in which the strategy is being delivered and highlights that work is required to develop a process for identifying wider system aligned objectives for 2022-23.

## 2. Context

**Our ambition is to always provide outstanding hospital care to our local community, being part of a vibrant, resilient and sustainable health and care system, supporting healthier lives, addressing inequalities and ensuring that where health and care is needed that it is safe and timely.**

We set this ambition for 2020 - 2025 to reflect our immediate lessons from the COVID 19 pandemic, the priorities set out in the NHS Long Term Plan and NHS People Plan and identified key objectives to support its delivery over the next 5 years:

- Deliver outstanding care and put the **patient first** in everything we do
- Continue to be a **fantastic and inclusive place to work**, where opportunities to develop and learn are open to everyone, equally. Racism, bullying or harassment will not be tolerated, and we will support our staff to stay safe and healthy at work and make sure they feel valued for their contribution to outstanding patient care
- Make sure our staff are empowered to take a more proactive role to **addressing health inequalities** in the patients we see. We will do this by giving our staff the tools to identify early opportunities to intervene and prevent a decline in mental or physical wellbeing
- Working with community, primary care and social services, deliver simpler, **more joined up care** for patients, that offers the right support, at the right time
- Be known as a **centre of excellence for elective care**
- Be seen as a **maternity service of choice for local people**
- Sustain our delivery of timely cancer treatments and continue to enhance the **cancer services** we provide for local people

Since agreeing our strategy, we have continued to respond to the challenges of the COVID-19 pandemic, alongside the changes that are taking place following further national guidance setting the future direction for the NHS focusing on integrating care. Some of the key elements are set out below outlining the context in which we are operating.

### 2.1 COVID-19 pandemic

Over the last year our priority has been to continue to provide safe high-quality care whilst managing the challenges of responding to the COVID-19 pandemic. We have focused on accelerating our return to near normal levels of non-COVID health services, whilst preparing for winter demand pressures and responding to the COVID spikes we have experienced. We are continuing to focus on our elective recovery programme and seeing urgent and cancer patients and those who have been waiting many weeks as a

result of the disruption to services caused by the pandemic. We continue to work jointly with other hospitals in SW London and with support from the private sector, we are making good progress in our elective catch up work. However, this is against a back-drop of sustained significant pressure, with high levels of attendance in our emergency department. We are continuing to see high numbers of patients with minor illnesses and so we are working with partners across Kingston and Richmond to encourage people to seek the care they need in appropriate alternative locations.

## **2.2 Transitioning to Integrated Care Systems**

The NHS is currently in the process of transitioning to working as part of Integrated care systems (ICSs) which, pending legislation, will be established as statutory bodies with major responsibilities for planning and funding from April 2022. The Trust is a part of the South West London ICS, collaborating with partners across health, social care and the voluntary sectors to develop the local place-based partnerships in both Kingston and Richmond. Place based partnerships within ICSs will play a key role in driving forward change at a local level to integrate care and improve population health.

Provider collaboratives will be a key component of system working, enabling providers to work together to plan, deliver and transform services. All trusts providing acute and mental health services are expected to be part of one or more provider collaboratives by April 2022. Community trusts, ambulance trusts and non-NHS providers should be part of provider collaboratives where this would benefit patients and makes sense for the providers and systems involved.

The Trust is a part of the SWL Acute Provider Collaborative, which is well established and working to tackle unwarranted variation, making improvements and delivering the best care for patients.

## **2.3 NHS System Oversight Framework 2021/22**

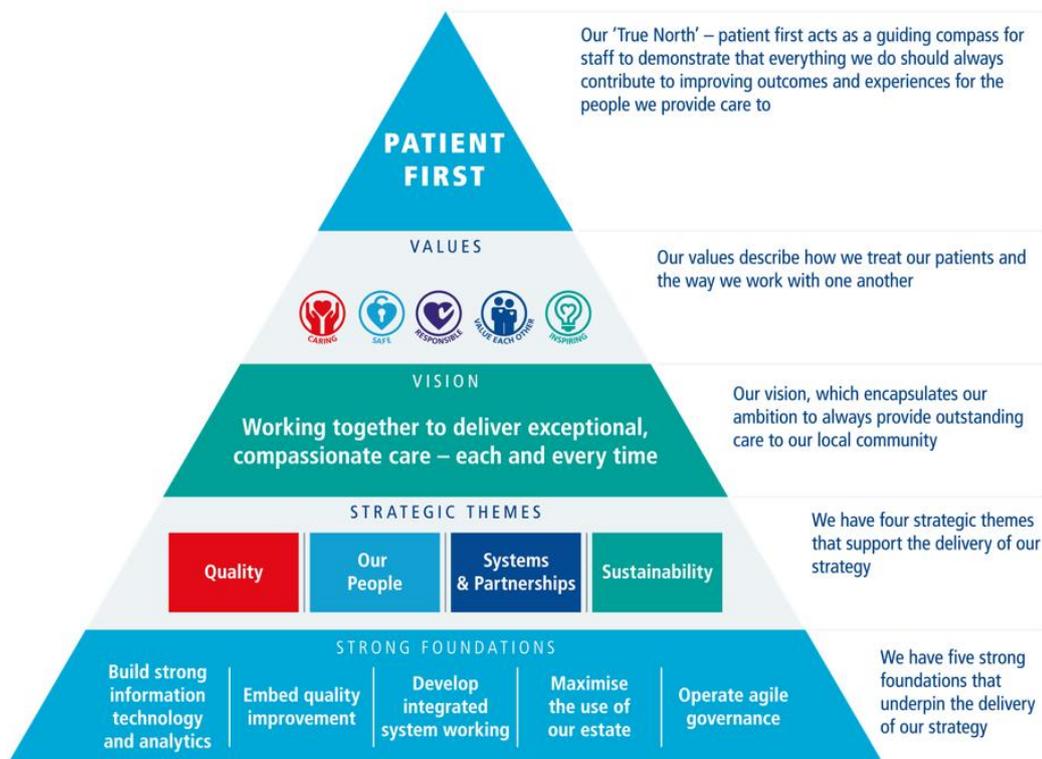
The NHS System Oversight Framework for 2021/22 replaced the NHS Oversight Framework for 2019/20, which brought together arrangements for provider and CCG oversight. The framework reflects an approach to oversight that reinforces system-led delivery of integrated care, in line with the vision set out in the NHS Long Term Plan, the White Paper – Integration and innovation: Working together to improve health and social care for all, and aligns with the priorities set out in the 2021/22 Operational Planning Guidance.

This framework applies to all Integrated Care Systems (ICSs), Clinical Commissioning Groups (CCGs), NHS trusts and foundation trusts.

A single set of oversight metrics, applicable to ICSs, CCGs and trusts, will be used to flag potential issues and prompt further investigation of support needs with ICSs, place-based systems and/or individual trusts and commissioners. These metrics align to the five national themes of the System Oversight Framework: quality of care, access and outcomes; preventing ill health and reducing inequalities; people; finance and use of resources; and leadership and capability.

### 3. Delivering Our Ambition

The Trust’s strategic framework is based on a Lean Improvement approach with the aim of aligning objectives across the organisation:



To support the delivery of the strategy the Trust developed strategic goals for each of the 4 Strategic Themes:

<b>Quality</b>	<b><i>Delivering outstanding care at every hospital encounter</i></b>
<b>Our People</b>	<b><i>Be a great and inclusive place to work</i></b>
<b>Systems &amp; Partnerships</b>	<b><i>Delivering care that connects between organisations</i></b>
<b>Sustainability</b>	<b><i>Live within our means to make lasting improvement including clinical sustainability</i></b>

#### 3.1 Progress made in year 1

Below we set out examples of some of the achievements we have made against these goals which provides an overview of the progress we have made in the last year.

The current Board Assurance Framework is attached at Appendix 1 which provides the detail of performance against the detailed objectives, highlighting the areas where further focus is required up to March 2022.

## Quality

### ***Delivering outstanding care at every hospital encounter***

There has been good progress made to deliver the quality objectives, including maintaining cancer services and emergency procedures throughout the pandemic.

However, there are a number of challenges impacting on our ability to deliver against all objectives, including the pressure on our critical care capacity, staff resilience, issues arising from virtual consultations which need further analysis and the sustained operational pressure that the hospital is under.

We are working with the independent sector to support cancer pathways and emergency procedures and revisiting our outpatient pathways and the utilisation of virtual appointments. We are continuously promoting our health and wellbeing offering to staff.

**Our goal is to always deliver safe effective care striving to meet the highest standards expected within the NHS to provide a positive patient experience.**

Examples of how we have progressed to deliver this goal include the following:

#### **Orthopaedic care**

- In December 2020 a report by the National Hip Fracture Database, named the Trust as one of only 9 hospitals to consistently achieve KPIs for hip fracture care. We are the only London hospital in the 9 hospitals named in the report.

#### **Dementia care**

- The Trust won the “Best Dementia Friendly Hospital” category in the National Dementia Care Awards 2020. “The judges chose Kingston Hospital as the winner because of their exceptional commitment to improving the hospital experience for patients with dementia and their carers....”.

#### **New Volunteering Initiatives**

- Despite the challenges of the pandemic, volunteering has continued to thrive, with many traditional volunteering roles creatively converted into remotely-delivered services, via telephone and online platforms, and some new initiatives have started including:
  - Message to a Loved One is a new service launched in May 2020 which has already delivered over 1,500 messages to inpatients from the community
  - Working within palliative care team, trained volunteers are supported to discuss end of life wishes with patients and their families
  - Piloting of a theatres ‘hand holding’ role proved successful with 100% of patients reporting a valuable service
  - Helpforce and Kingston Hospital Charity have funded community placements. Through this initiative volunteers and colleagues from Your Healthcare, are providing support in the homes of patients who have recently been discharged home from hospital with concerns about their risk of falling.
  - A discharge support service sees volunteers supporting patients upon discharge from hospital. With an average monthly case load of 18 patients, distributed amongst 8 volunteers, patients reported an outcome of 20% average improvement in confidence to cope at home.

## Our People

### *Be a great and inclusive place to work*

We are on-track to achieve the objectives for this domain. We are the best acute hospital in England for staff survey engagement and the best acute in London across the whole survey. We have delivered an effective COVID vaccination and booster programme, fully utilising the vaccine supply we received. We responded to needs of staff and provided free meals for those working at night during the height of the pandemic.

However, we face challenges, including maintaining the resilience and morale of staff as we transition from responding to COVID straight into dealing with winter demand pressures. We need to ensure staff have the capacity to engage in training, complete their appraisals and can take their annual leave.

**Our goal is for our staff to live the values of the organisation and demonstrate the behaviours that underpin them. We will have a culture of learning and opportunities to develop and progress will be open to all. We will invest in our staff to keep them safe, well and feel valued for the work they do.**

Examples of how we have progressed delivery of this strategic goal include the following:

#### **COVID Vaccination Programme**

- We delivered the COVID vaccination programme to staff which commenced with first doses in December 2020, where we vaccinated over 5,000 people, including staff from our local community trusts.
- We have also successfully delivered the second vaccination and booster programmes with 70.5% of our substantive staff double vaccinated

#### **Allied Health Professionals - strategy**

- In July 2021 the executive management committee approved a piece of work to develop a new strategy for our allied health professionals (AHPs) which is all about harnessing the potential of this important group of staff, giving them more of a platform and a voice, addressing inequity across the different professional groups, and ensuring we deliver against the CQC 'Well Led' domain.
- The strategy is being implemented in collaboration with the wider integrated care system. From next month the Strategic Lead for AHP's will be developing the strategy across Kingston, Richmond and Hounslow. This work will initially focus on an AHP Strategic Workforce Plan.

#### **Diversity champions**

- We have recruited 26 diversity champions for the Trust who will work within their department or service area to support the delivery of our equality, diversity and inclusion strategy. All of those who have put their hand up as champions are passionate about equality, diversity and inclusion. Champions will act as a point of contact for colleagues, advising on equality, diversity and inclusion issues in their area.

#### **Staff Away Days**

- In response to feedback from staff, the trust developed a programme of staff away days, which launched in September 2021. The away days were designed to support staff health and wellbeing, giving teams an opportunity to spend some time out together, re-connect and build resilience. Over 1,400 staff participated in the away days.

#### **Clinical Psychologist**

- We have employed a clinical psychologist to support staff health and wellbeing. We are also offering psychological support for staff who are supporting their own children with Mental Health issues.
- We introduced a new booking system for appointments, and this has seen an increase in referrals for support.

## Staff exercise classes

- Our staff exercise classes are back up and running. We have delivered 146 musculoskeletal classes and 16 workshops for staff this year as part of our health and wellbeing offering.

## Staff Awards

- Throughout the pandemic we have continued to recognise and reward our staff by maintaining our staff awards programme. We adapted our approach and converted the annual staff awards to being run virtually, and have safely recognised long service and monthly staff awards in line with social distancing guidelines.



### *Delivering care that connects between organisations*

We are on-track to achieve the objectives for this domain. We have established a clinical leadership group involving consultants and GPs to address service and pathway issues. The hospital has led the elective recovery programme across South West London and is working with other acute trusts to develop surgical hubs. As part of the development of Place Based Partnerships, we are working with partners to develop refreshed Health and Care Plans for both Kingston and Richmond, identifying joint priorities across health and social care to address health inequalities.

We do face some challenges in particular relating to the rising demand pressures and the impact on our elective programme. We are taking steps to minimise impact through our escalation plan and the management of patient flow through Gold and Silver Command. In addition, the A&E Delivery Board is overseeing a number of initiatives to support flow and address workforce pressures.

**Our goal is to drive integration of our clinical pathways, providing care closer to home. We will strengthen and deepen our working relationships with primary, community and social services across the 'place' and at SWL ICS level.**

Examples of how we have progressed delivery of the strategic goal includes the following:

### **South West London Recruitment Hub**

- The SW London recruitment hub launched in October 2020, bringing the recruitment teams from the four SWL acute trusts (Croydon, Epsom and St Helier, Kingston and St George's Hospitals) into one joined up service. This development has harmonised recruitment processes across the trusts and will make it easier for staff to move between trusts, helping with their career development. Progress is being made to ensure that staff are more evenly shared across the SWL trusts.
- The hub was selected as a finalist in the HSJ awards in the People & Organisational Development Initiative of the Year Award, which was a fantastic achievement.
- In addition to recruiting to the four SWL trusts, the hub has successfully staffed nine vaccination sites across SW London, hiring 700 bank staff across various disciplines to support in delivering the COVID-19 vaccine programme.

### **Connecting Care for Children**

- Also in October 2020, we launched a 'Connecting Care for Children' (CC4C) hub, bringing together the hospital's multi-disciplinary team, colleagues from the Primary Care Network and parents. CC4C is based on a model trialled at Imperial College Healthcare NHS Trust pre-COVID and is an innovative integrated child health programme providing more holistic care for patients. The clinic is held in a host GP practice, with a hospital Consultant Paediatrician and a nominated GP from the host practice. We are now looking to expand the pilot to practices across Kingston and Richmond.

## Transfer of Care Hub

- We have continued to make progress in terms of closer working relationships with Hounslow and Richmond Community Healthcare NHS Trust, and Your Healthcare, which has been key to facilitating the swift and safe discharge of patients out of hospital and into the community during the pandemic and throughout 2021.
- More recently we are working across Your Healthcare and Kingston Hospital to establish a transfer of care hub to further improve the process of getting patients out of hospital more quickly and into the community. A joint role has been recruited to facilitate the operations of the hub.

## South West London Procurement Partnership

- The South West London Procurement Partnership (SWLPP) came together on 1st April 2021 as a new single procurement service bringing the procurement teams from the four SWL acute trusts (Croydon, Epsom and St Helier, Kingston and St George's Hospitals) into one joined up service. The new service is hosted by St. George's NHS Foundation Trust.
- The service continues to build on its previous successes of collaboration within the local Integrated Care System to introduce standardisation and remove unwarranted variation. The aim of the service is to enable the delivery of excellent care by proactively providing the right quality of goods and services at the right time, in the right quantity, at the right place, and at the right price.

## Post COVID Services in Kingston and Richmond

- We have been working collaboratively with partners across Kingston and Richmond to develop local Post COVID services which went live in April this year. We have developed a holistic service including multidisciplinary teams across primary, community and secondary care, working alongside voluntary and social care services.
- The Post COVID Assessment Tool that the hospital developed is now being adopted across South West London.

### Sustainability

#### *Live within our means to make lasting improvement including clinical sustainability*

Overall, we are on track to meet our sustainability objectives and have undertaken a joint planning process across the South West London Integrated Care System to support delivery of H1 and H2 financial targets, whilst balancing the elective recovery with COVID-19 response and the operational pressures being experienced earlier than usually experienced.

There is some slippage in relation to delivery of our environmental sustainability metrics, due to the pandemic and capacity to progress initiatives to reduce our environmental impact. We have applied to the Public Sector Decarbonisation Scheme, which if successful could result in a carbon footprint reduction.

**Our goal is to ensure that Trust has a strong financial base to allow investment into services. We will work with partners to ensure economic efficiencies are realised and waste and duplication minimised.**

Examples of how we have progressed delivery of the 3-5 year strategic goal includes the following:

### New Endoscopy Suite

- A new endoscopy suite opened to patients in September 2020. The new unit boasts the first nurse led transnasal endoscopy suite in London. Transnasal endoscopy requires no sedation and is a less intrusive procedure, resulting in a better patient experience.

### **Bariatric / metabolic surgery**

- In July this year colleagues from St George's Hospital began bariatric/metabolic surgery at the trust, for the first time. Our consultant colleagues have been working towards this for some time and, collaborating with the team at St George's, it became a reality. The intention is that we can use metabolic surgery as a tool to improve quality of life and to reduce the resources that the NHS spends each year to treat conditions directly linked to obesity, and through delivering the service at Kingston we are helping to reduce the waiting times for patients.

### **Workstations on Wheels**

- In July we also completed the deployment of 130 new workstations on wheels (WOWs), which have brought huge benefits to our staff working in clinical areas in terms of high quality, larger display screens and faster log-ins to access our clinical systems, in a mobile environment.

### **Royal Eye Unit**

- The Trust invested and implemented an EPR system for ophthalmology in October 2021 to reduce the reliance on paper medical notes and to help enhance efficiency in clinical decision making. The new system enables collection of ophthalmology specific clinical information and images via one portal and will also help to address growing demand for planned and emergency care in our Royal Eye Unit.
- Charitable funding and receipt of a bequest funded work being completed to develop a two-storey extension to Bernard Meade Wing to provide a medical retina unit at ground floor level and a paediatric day care oncology suite on the first floor, which will be stand-alone but linked to the rest of the paediatric service. This extension is the second phase of a planned development of the Royal Eye Unit.
- The expansion of the unit's acute referral centre has also been completed.

### **Patient portal**

- We are working with two other trusts in SW London (St George's and Croydon) to prepare for the launch in early 2022, of an online portal, accessible on a mobile phone, giving patients easy access to the information they need for their outpatient appointments. This development will give patients much more control over their personal health journey as they will be able to access their appointment letters online.
- Going forward, people will be able to book in for their own appointments at a time to suit them and we are working so that results will also be available in some specialties through the portal. This improvement is part of our developing digital strategy which will help us to decrease the administration burden on our staff, which will free up time to care and put patients in charge of their own health and care.

### **Electronic Document Management system**

- We are extending our system for storing patient health records electronically, meaning that all existing paper records for patients, will be scanned into an electronic record viewing system.
- Once a patient's paper records have been scanned, their whole hospital record can be viewed 24 hours a day, 7 days a week by any health professional at the Trust working with a patient, enabling us to enhance the quality of care we deliver.
- The changes are being introduced gradually, starting with our colposcopy service, which went live with the system in September this year.

## **4. Enabling strategies**

We have a number of enabling strategies which underpin the delivery of our Patient First Strategy.

At the heart of our **digital strategy** is developing our systems so that all patient data is digitally stored, accessible immediately from anywhere on the hospital site. We are striving to reduce the amount of paper

that is generated across the Trust and move towards being a 'paper-light' Hospital. A major component of achieving this is the provision of an Electronic Document Management system which started a phased go-live from September this year.

We are working with our stakeholders in the SWL Health and Care Partnership to deliver the SWL Digital Strategy to enable information to be accessible in all care settings. SWL has been successful in securing significant funding for sharing records and has two exemplar projects to support the 'One London' Local Health and Care Record Exemplar, which aims to connect information, engage the community and works towards a 'population health' system.

Delivery against the key strategic objectives outlined within the **workforce strategy** continues to be overseen by the workforce committee. Work is being progressed to design and transform the workforce at place and across the ICS. We are focusing on how we attract and retain staff incorporating the principles of equality, diversity, and inclusion and supporting staff development through the use of the apprenticeship levy.

We have continued to deliver our **health and wellbeing** programme for staff including employing a clinical psychologist for staff, getting our exercise classes back up and running and delivering team away days for over 1,400 staff. We are currently updating our approach to supporting the health and wellbeing of our staff to reflect the recently published NHS Health and Wellbeing Framework.

We are continuing to deliver against our **estates strategy** with some key developments including the final decant of the Command Centre and Regent Wing. Modular builds have been completed for additional office accommodation and to accommodate the clinical services decanted from Roehampton Wing. The rollout of agile working has supported the programmes to maximise the use of office space.

The Quality Improvement (QI) team is supporting delivery of the strategy through the Trust's **Patient First Improvement Programme** and has this year undertaken phase 1 of development and deployment work with the QI team, the executive team, theatres and the estates department. This work includes the roll out of Improvement Huddles for the teams involved to improve engagement, communication and agree the key performance objectives on a regular basis, and to track their performance against them.

## 5. Risk to delivery up to March 2022

The report has highlighted some of the key challenges we have faced against each of our strategic themes this year and a number of these will most likely continue to impact on delivery of the strategy. The earlier than usual onset of 'winter demand' is impacting on our operational plans, such that it adversely impacts capacity for the remainder of the year. There is a risk that the sustained operational pressures alongside the wellbeing and resilience of our workforce will result in not delivering against all the current objectives.

## 6. Refresh for 2022/23

Looking forward to 2022-23, collaborating with partners across health, social care and the voluntary sectors to deliver greater integration will be a key objective. In order to deliver this objective, we will need to work with our local partners to develop and agree aligned priorities.

A proposal on how we will develop our objectives with local partners for 2022-23 will be brought back to the Board in January 2022 for consideration.

## **7. Recommendations**

The Board is asked to note:

- a) The progress made to date in the delivery of the Patient First Strategy
- b) The changing context in which the strategy is being delivered
- c) A process is to be developed to support identification of objectives for 2022-23 to reflect the focus on aligning objectives at place/system level to support the integration of care

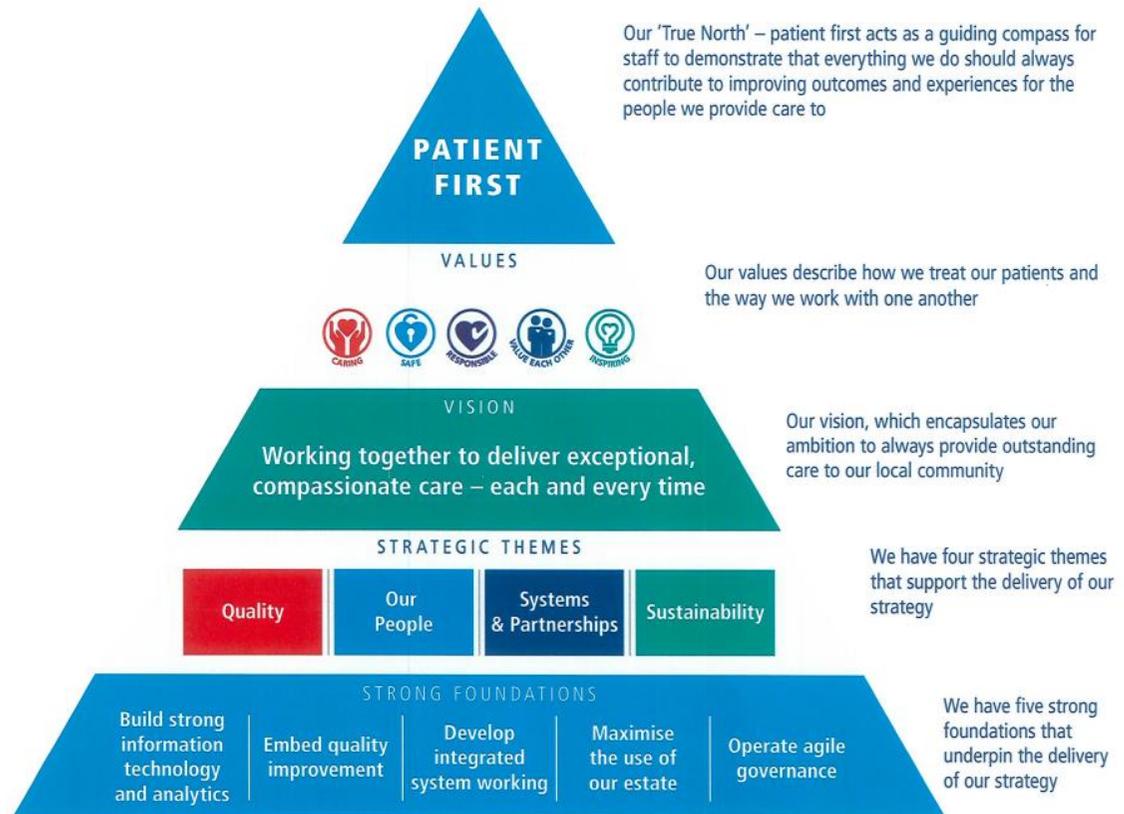
<b>Trust Board (Public)</b>	<b>Item: Board Assurance Framework</b>
<b>Date: November 2021</b>	<b>Enclosure: Appendix to Enc J</b>
<b>Purpose of the Report:</b> The Board Assurance Framework (BAF) enables the Board to review its principal objectives to ensure there are sufficient controls in place to manage the risks to their delivery and to understand the assurance there is on the effectiveness of those controls.	
<b>For: Information</b> <input checked="" type="checkbox"/> <b>Assurance</b> <input type="checkbox"/> <b>Discussion and input</b> <input type="checkbox"/> <b>Decision/approval</b> <input type="checkbox"/>	
<b>Sponsor (Executive Lead):</b>	Sam Armstrong, Director of Corporate Governance
<b>Author:</b>	Sam Armstrong, Director of Corporate Governance
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<b>Risk Implications – Link to Assurance Framework or Corporate Risk Register:</b>	
<b>Legal / Regulatory / Reputation Implications:</b>	Those related to the objects and the associated risk management.
<b>Link to Relevant CQC Domain:</b> <b>Safe</b> <input type="checkbox"/> <b>Effective</b> <input type="checkbox"/> <b>Caring</b> <input type="checkbox"/> <b>Responsive</b> <input type="checkbox"/> <b>Well Led</b> <input checked="" type="checkbox"/>	
<b>Link to Relevant Strategic Theme:</b>	All
<b>Document Previously Considered By:</b>	
<b>Recommendations:</b> To review the content of this report and to comment on the level of assurance provided.	

**KINGSTON HOSPITAL NHS FOUNDATION TRUST  
BOARD ASSURANCE FRAMEWORK**

**Our True North**

The Board Assurance Framework (BAF) enables the Board to review its principal objectives to ensure there are sufficient controls in place to manage the risks to their delivery and to understand the assurance there is on the effectiveness of those controls.

The Board Assurance Framework is closely linked with the Trust Risk Register which reflects significant risks identified at both a corporate department and divisional level.



## **Current Governance Arrangements**

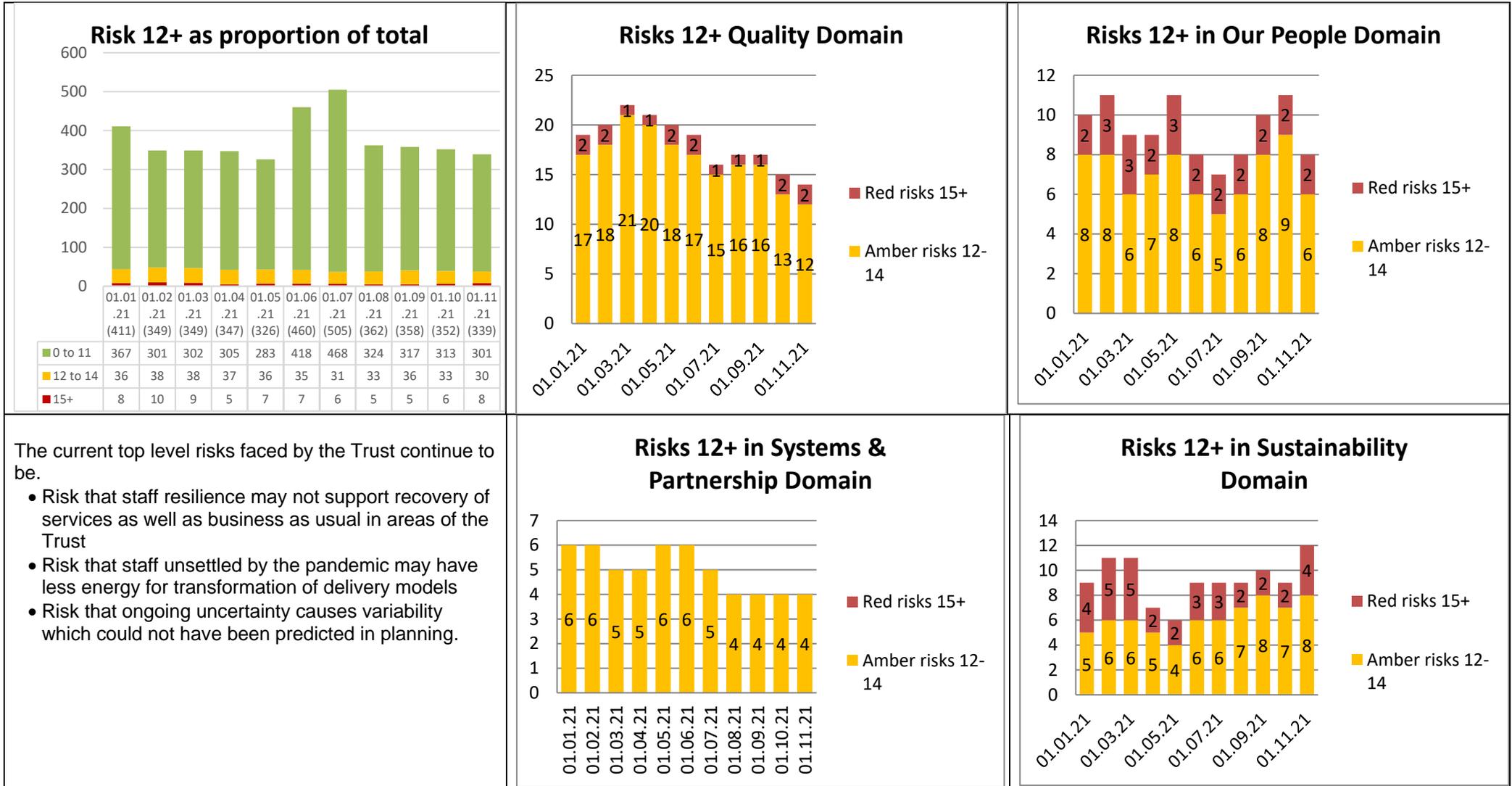
Strategic (Gold) and tactical (Silver) command were stood down after the second wave of the pandemic. Since September however, the Trust has escalated to Gold and Silver command on certain days in response to flow pressures experienced by the Trust. These escalations have been temporary, and de-escalation has occurred once the situation has been alleviated. From 22nd November a more formal arrangement will be implemented: a site operational team, made up of on call directors and managers and an EPRR representative, will provide cover 7 days per week and will work to support the Trust in the management of winter pressures.

The Trust Board and its committees, the Council of Governors and the Executive Management Committee continue to meet to timetable as far as possible, albeit that all meetings are virtual. Meeting agendas continue to return to normal, where appropriate and possible. Operational committee meetings continue to be reintroduced, albeit virtually. These activities will be monitored and altered, if needed.

Informal discussions between lead Executive and Non-Executive Directors according to areas of responsibility (e.g. DoNQ/DIPC and NED Chair of Quality Assurance Committee) are continuing as needed. NEDs and Governors receive the weekly Chief Executive's email to staff, and the Chief Executive also writes each month to the Governors to provide an update.

## Trust Risk Register Overview

As at 1<sup>st</sup> November 2021 there were 38 risks on the risk register with a score of 12+ (three less than the last report). These have been discussed at Patient Safety and Risk Management Committee. For the BAF, the risks scored 12+ are categorised according to the four strategic theme domains. The Patient Safety & Risk Management Committee oversees the management of risks within the Trust.



**QUALITY - Deliver outstanding care at every hospital encounter**

We will always deliver safe effective care striving to meet the highest standards expected within the NHS to provide a positive patient experience. Our teams will constantly seek to improve and will be supported by a Quality Improvement culture that is evident throughout the organisation and which draws upon the best evidence available. In particular, We will be an exemplary elective care centre, become the maternity unit of choice in SW London and sustain the Trust’s leading position in delivering timely cancer treatments

Objective 1	Progress	Objective 2	Progress	Objective 3	Progress	Objective 4	Progress
Restore and maintain to the full extent possible, all cancer , elective, outpatient and diagnostic services	On track	Work with GPs and other partner organisations to restore the number of people coming forward for treatment	On track	Expand the 111 First offer to provide low complexity urgent care without the need for an A&E attendance ensuring those who need care can receive it in the right setting	On track	Provide alternatives to patients having to attend physical outpatient appointments	On track
	Slippage		Slippage		Slippage		Slippage
	At risk		At risk		At risk		At risk
	Complete		Complete		Complete		Complete

**Metrics 2020-22**

<ul style="list-style-type: none"> <li>Maintain low number of patients waiting for treatment longer than 62 days on an urgent pathway or over 31 days on treatment pathway.</li> <li>100% of last year’s outpatient activity achieved from September 2020</li> <li>90% of last year’s elective activity achieved from October 2020</li> </ul>	<ul style="list-style-type: none"> <li>60% of all Patient initiated follow up appointments are virtual and at least 25% of new appointments are virtual</li> <li>Patient and staff experience measures for virtual appointments</li> <li>Reduction in number of minor illness attendances in A&amp;E</li> <li>Deliver the quality priorities metrics</li> </ul>
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**Monthly Commentary**

What’s going well?	What are the current challenges?
<ul style="list-style-type: none"> <li>SW London joint working</li> <li>Cancer services and emergency procedures have continued through recent Covid-19 peak, which is now completed</li> <li>Stable number of Covid-19 positive patients in the Trust</li> <li>Maintenance of reduction in number of Covid-19 positive patients in Trust.</li> </ul>	<ul style="list-style-type: none"> <li>Critical Care capacity</li> <li>Staff resilience</li> <li>New backlog as a result of increased referrals into hospital</li> <li>Virtual consultation presents with certain challenges that need to be further investigated</li> <li>Continued pressure in ED</li> <li>Backlog reducing, however there is still work to be done to get back to pre-covid position.</li> <li>Pressure on 111 effecting ability to utilise available appointment slots</li> <li>Number of available general beds</li> </ul>
How are we managing the challenges?	Sources of assurance
<ul style="list-style-type: none"> <li>Use of independent sector to support cancer pathways and emergency procedures</li> <li>Profiling of elective work and prioritisation</li> <li>Establishment of the RAS</li> <li>Revisiting outpatient pathway and utilisation of virtual appointments</li> <li>Health and Wellbeing or staff being promoted</li> </ul>	<ul style="list-style-type: none"> <li>Metrics in integrated performance report to EMC and Trust Board</li> <li>Quality priorities progress report to QAC</li> <li>Transformation programme progress reports to QAC</li> </ul>

**OUR PEOPLE - Be a great and inclusive place to work**

Our staff will live the values of the organisation and demonstrate the behaviours that underpin them. They will experience a learning culture which encourages them to be their best selves and will have the opportunity to develop their skills and knowledge to build rewarding careers. We will develop diversity across all workforce groups. They will experience a great place to work , where racism, bullying and harassment are not tolerated, where opportunities to develop and progress are open to all, where we invest in our staff and keep them safe, well, and at work, so that they feel valued for the incredible job that they do.

Objective 5	Progress	Objective 6	Progress	Objective 7	Progress
To develop our response and implementation plan to the People Plan that describes how the organisation will develop and lead its workforce over the next 2-3 years	On track	Agreement to implement the diversity and inclusion plan for KHFT	On track	Agree a refreshed Health and Wellbeing strategy building on lessons from COVID to provide health and wellbeing support to staff	On track
	Slippage		Slippage		Slippage
	At risk		At risk		At risk
	Complete		Complete		Complete

**Metrics 2020-22**

<ul style="list-style-type: none"> <li>5% of advertised roles are using new job plans</li> <li>Achievement of the Flu vaccination target</li> <li>Annual staff survey score to be in the top 5 of the country</li> <li>Quarterly pulse surveys on staff engagement (nb NHSE now requiring quarterly surveys)</li> </ul>	<ul style="list-style-type: none"> <li>Staff turnover is at target rate for all staff groups and data reporting from exit interview questionnaires indicate positive experiences of working at the Trust</li> <li>Achievement of target WRES and WDES indicator scores</li> <li>Significant reduction in the number of staff reporting bullying and harassment from patients, other staff or managers</li> </ul>
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**Monthly Commentary**

What's going well?	What are the current challenges?
<ul style="list-style-type: none"> <li>Best acute in England for staff survey engagement, and best acute in London across whole survey</li> <li>Covid vaccination programme (80% of staff both vaccines). Full supply used.</li> <li>Free meals for staff working at night</li> <li>Covid booster vaccine being launched in September and flu vaccination campaign launch</li> </ul>	<ul style="list-style-type: none"> <li>Maintaining resilience and morale through Covid-19 second wave – increase in ER cases / stress and increase staff turnover / absence</li> <li>Vaccine mandate</li> <li>Capacity of staff to engage in training and appraisals</li> <li>Focusing staff on changing priorities – ambiguity of emergency care, elective recovery and covid-19</li> <li>Adverse publicity around diversity in recruitment</li> </ul>
How are we managing the challenges?	Sources of assurance
<ul style="list-style-type: none"> <li>KHFT People Plan and Equality, Diversity &amp; Inclusion Strategy approved by Trust Board</li> <li>Workforce Project Plan</li> <li>KH Charity funding to support health and wellbeing initiatives, including food</li> <li>Staff survey action plan</li> <li>Planning for flu campaign and vaccination boost for this autumn</li> </ul>	<ul style="list-style-type: none"> <li>Metrics in integrated performance report to Trust Board</li> <li>Workforce Committee, particularly aware of ER cases</li> <li>Equality Diversity &amp; Inclusion Committee</li> <li>Health and Wellbeing Steering Group</li> <li>Staff Survey data</li> <li>WRES and WDES data</li> <li>Publishing diversity data</li> </ul>

**SYSTEMS & PARTNERSHIPS - Deliver care that connects between organisations**

We will drive integration of our clinical pathways, providing care closer to home. We will fully participate in improving the health and wellbeing of the communities in which we serve and work with partners to reduce health inequalities. We will strengthen and deepen our working relationships with primary, community and social services across the 'place' as well as the SWL Integrated Care system and we will build on our strengths to lead on areas of work across SWL such as elective care.

Objective 8	Progress	Objective 9	Progress	Objective 10	Progress	Objective 11	Progress
Work with GPs and other partner organisations to ensure the most vulnerable are protected from COVID	On track	Work with community partners to ensure the discharge to assess process is fully embedded.	On track	Lead on the elective recovery programme for SWL	On track	Develop a plan to create an integrated care partnership with our community providers, to provide support to keeping people well and receiving as much of their care in their own homes or in the community as possible	On track
	Slippage		Slippage		Slippage		
	At risk		At risk		At risk		
	Complete		Complete		Complete		

**Metrics 2020-22**

<ul style="list-style-type: none"> <li>Reduction in the number of stranded and super stranded patients 140 to 100 and 40 to 20 respectively</li> <li>Local health inequalities plan and metrics in place locally (end of first 6 months)</li> </ul>	<ul style="list-style-type: none"> <li>Improved co-ordination of services across primary, community and acute and social care services</li> <li>Achievement of the elective performance metrics</li> <li>Delivery of SWL Elective Programme</li> </ul>
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**Monthly Commentary**

What's going well?	What are the current challenges?
<ul style="list-style-type: none"> <li>Clinical leadership group established which includes GPs and hospital consultants addressing service and pathway issues</li> <li>Leadership of elective recovery programme across SWL, working with other acute providers in SWL on development of surgical hubs, utilisation of additional theatre on QMH to support recovery</li> <li>Population Health group established looking at population health requirements focused on Cambridge Road Estate which is multi agency and focusing on a small number of priority areas. Early initiatives being progressed focused around obesity and working with schools and voluntary sector</li> <li>Place based working arrangements progressing well</li> <li>Mobilisation of Patient First Strategy with the Trust</li> <li>Long COVID and COVID follow up arrangements in place and additional funding secured. Coordinating work across Kingston and Richmond</li> <li>Local health and care plans being refreshed addressing inequalities and other key priority areas</li> <li>Developing a place-based Obesity plan and framework for Kingston and Richmond - now engaged with the London wide programme for London</li> </ul>	<ul style="list-style-type: none"> <li>Seeing a rise in the number of stranded and super-stranded patients as a result of demand and workforce challenges across local health and care organisations</li> <li>Impact of increasing pressure in ED and Covid-19 pandemic impacting on staff capacity to progress transformation programmes</li> <li>Staff resilience to support service change</li> <li>Balancing Elective recovery with Covid-19 and Winter pressures</li> <li>Impact of revised elective recovery trajectories</li> <li>Fragmentation of services delivery</li> </ul>

<ul style="list-style-type: none"> <li>• Contract agreed with East Elmbridge PCN where the Trust working in Partnership would employ and oversee physiotherapist support into the PCN</li> <li>• Strengthening working relations with other health care partners</li> </ul>	
<p>How are we managing the challenges?</p>	<p>Sources of assurance</p>
<ul style="list-style-type: none"> <li>• Local assurances Gold/Silver – enhanced support over winter</li> <li>• A&amp;E Delivery Board progressing a number of initiatives with place-based partners to support flow and address workforce pressure</li> <li>• Submitted winter funding proposal to support additional pressures</li> <li>• Place leaders group established for Kingston and Richmond</li> <li>• K&amp;R sub groups established to support place based working and transformation and delivery</li> <li>• Transformation programmes established, joint appointment for the JAD in place, strengthening collaborating working</li> <li>• Working with partners on workforce solutions locally to support areas that are particularly fragile</li> <li>• Refreshing system priorities to ensure focus is on fewer and more impactful</li> <li>• Population health profiles for each borough being progressed by local authorities</li> </ul>	<ul style="list-style-type: none"> <li>• Daily Exec Huddle</li> <li>• Metrics in integrated performance report to Trust Board</li> <li>• Reports to place meetings in Kingston and Richmond</li> <li>• Updates to EMC</li> <li>• Updates on place based working</li> <li>• Monthly PRM overseeing performance</li> <li>• Reports to FIC</li> <li>• A&amp;E Delivery Board</li> </ul>

SUSTAINABILITY - Achieve long term financial sustainability					
Objective 12	Progress	Objective 13	Progress	Objective 14	Progress
Deliver the financial target by working with partners to support H1 system financial target and continued response to COVID and elective recovery.	On track	Reduce our environmental impact as set out in our sustainability strategy.	On track	Achieve financial regime for Kingston within the ICS for 2021/22.	On track
	Slippage		Slippage		Slippage
	At risk		At risk		At risk
	Complete		Complete		Complete
Metrics 2020-22					
<ul style="list-style-type: none"> <li>Financial target was achieved as a system in H1</li> <li>Efficiencies delivered through SWL Acute Provider Collaborative (APC)</li> <li>Improvements in GIRFT and Model Hospital outcome metrics</li> </ul>			<ul style="list-style-type: none"> <li>Delivery of sustainability metrics</li> <li>% Reduction in unnecessary internal tests (to be confirmed)</li> <li>Delivery of H2 system plan</li> </ul>		
Monthly Commentary					
What's going well?			What are the current challenges?		
<ul style="list-style-type: none"> <li>Joint planning dialogue across SW London ICS</li> <li>The Trust has applied to the Public Sector Decarbonisation Scheme; if fully successful could result in a carbon footprint reduction of approximately 4,268tCO<sub>2</sub>e</li> </ul>			<ul style="list-style-type: none"> <li>Balancing Elective recovery with Covid-19 and Winter pressures</li> <li>Impact of revised elective recovery trajectory to 95% in H1</li> <li>Loss of income and additional costs linked to Covid pandemic response</li> <li>Covid pandemic impacting on ability to progress sustainability strategy objectives.</li> <li>Work on estates compliance and management of associated risks</li> <li>Draft H2 system deficit plan submitted in November</li> <li>Lack of input from key clinical and operational staff to achieve efficiencies due to BAU and daily commitments</li> </ul>		
How are we managing the challenges?			Sources of assurance		
<ul style="list-style-type: none"> <li>Monthly review across the system</li> </ul>			<ul style="list-style-type: none"> <li>Monthly Finance report to Trust Board</li> <li>Finance &amp; Investment Committee</li> <li>SW London NEDs group</li> <li>SW London Recovery Board</li> </ul>		