

Council of Governors, April 2023 Report from the Chief Executive, Jo Farrar

Position in the hospital

The pressures of recent weeks remain in terms of operational busyness, and we have continued to focus on supporting our staff to take their breaks, and their annual leave in the aftermath of a challenging few months.

Last week, 72 hours of national industrial action involving junior doctor colleagues, on the back of the Easter bank holiday weekend, added to the pressure. Regrettably, we had to postpone approximately 75% of outpatient appointments that were due to take place on the days of strike action and we have also had to cancel a number of planned surgeries, to enable us to deploy staff to the wards, and unplanned care services during the period.

I am grateful for the way colleagues have pulled together, making sure rotas in key areas are covered and patient safety maintained – and as always, the support from our partners has been outstanding. We are hopeful that discussions between the government and the BMA will continue, to allow an agreement to be reached. We also await the outcome of the offer of a pay deal following talks between the government and the Agenda for Change unions (which includes the RCN).



Quality

Maternity Incentive Scheme

NHS Resolution's Maternity Incentive Scheme (MIS) developed in partnership with the national maternity safety champions, Dr Matthew Jolly and Professor Jacqueline Dunkley-Bent OBE, recognises trusts that meet ten safety actions designed to improve the delivery of best practice in maternity and neonatal services. I am pleased to confirm that Kingston Hospital's maternity service is one of a small number of trusts that have achieved full compliance, meeting all 10 standards of 'year four' of the scheme.

Communications framework

Building on feedback received through our Friends and Family Test (FFT), our Patient Experience and Involvement Team has been working on a new communications framework, outlining seven key areas of focus to help us ensure we are communicating effectively with all patients, families, carers, and colleagues. We are working with staff groups across the Trust to develop a plan to launch the framework and embed it in our working practice.

You can watch a short film about the communications framework [here](#), and we look forward to talking to governors and members about this more, as part of the rollout.

Staff survey 2022

The NHS staff survey results were published last month, and Kingston ranked as the second highest scoring district general hospital in London, for staff recommending us as a place to work.

The report tells us that 79% of staff agree that care of patients / service users is Kingston Hospital's top priority (against an average of 74% among other acute / acute and community trusts) and that 72% would be happy with the standard of care provided if a friend or relative needed treatment (against an average of 63% among other acute / acute and community trusts). However, I'm not complacent, and we will continue to do everything we can to listen to our staff and to support them as a priority.

Living Wage Employer Status

We have recently been accredited as a London Living Wage Employer, as championed by the London Mayor. This is an important development that highlights the commitment of Kingston Hospital and HRCH to ensuring fair pay and equal treatment for all staff (and includes our ISS contracted staff too).

The London Living Wage is a voluntary hourly rate that is set independently and updated annually, based on the high cost of living in the capital. It is currently set at £11.95 per hour in London.

Makaton training for staff

At the end of last year, thanks to funding from Kingston Hospital Charity, 19 members of staff from a range of departments, received training in Level 1 Makaton.

Makaton is the leading UK programme for adults and children with learning and/or communication difficulties. It combines signs and symbols and speech, to support communication and help someone with difficulties communicating to express themselves and be better understood by others.

We are encouraging colleagues who are seeing patients that use Makaton to get in touch with our learning disability team to be linked with a trained member of staff to help improve our communication methods.

Growing the next generation of health and care staff

Last month, the South West London Recruitment Hub team attended an employability fair at Kingston College. As a result, we have secured four business students who joined us earlier this month to take up our work placement scheme as band 2 administrators and patient pathway coordinators, for a period of between 13 and 14 weeks.

During National Careers Week, Caroline Ellis (Practice Development Matron), Jennie Agass (Maternity Clinical Practice Facilitator) and Emily Orme (AHP Workforce Supply Project Lead) also visited Kingston College, to speak to over 90 students studying Health and Social Care, and Sports Science programmes, and to answer their questions. The event gave students the opportunity to hear about the various roles, opportunities and options available to study for a career in nursing, midwifery and the 14 allied health professions.

Some of Kingston Hospital's pharmacy team also represented their department at the event to promote pharmacy apprenticeships and job opportunities.

Collaborating with Careers Camp

In March, we welcomed 'Careers Camp' to Kingston Hospital to showcase the healthcare support job opportunities we currently have available. Career Camps is a training organisation that encourages, reskills, and trains adults into vacancies after unemployment, redundancy, or illness – as well as those looking to change careers.

This is a new collaboration supporting local residents in Hounslow, Richmond and the Kingston areas to undertake employment at their local hospital, and we are excited to see this develop.

Berenice Constable, Deputy Chief Nurse and Deputy DIPC at Kingston Hospital welcomed the group on the morning, and the day was facilitated by the practice development team.

International nurse recruitment

Last month our Chief Nurse, Nic Kane, and our Lead Nurse for Education and Practice Development, Siobhán McCawley, received a letter of thanks from NHS England's Chief Nursing Officer, Ruth May, and Deputy Chief Nursing Officer, Duncan Burton.

The letter recognises our success in meeting our ambition for international nurse recruitment in 2022 at Kingston Hospital, in line with the funding received from the NHSE International Nurse Recruitment Programme. Well done to all colleagues involved.

Supporting AHPs to return to practice

The South West London Recruitment Hub recently launched a campaign to support allied health professionals (AHPs) to return to practice. Led by Kingston Hospital's AHP Workforce Supply Project Lead, Emily Orme, the initiative highlights the support and mentoring available to AHPs to help them develop the skills and competencies they need to get on to the Health and Care Professions Council register.

We are hopeful that this will support the work we are doing to increase the numbers of AHPs returning to the workforce at Kingston Hospital and HRCH.

'The Natural World' photography exhibition

A new gallery space in the Link Corridor between Esher Wing and the Surgical Centre is now in place at Kingston Hospital, for colleagues and patients to enjoy. Health and wellbeing chaplain, Steve Summers, and the wider health and wellbeing team have led on this project, which is funded by Kingston Hospital Charity.

Chief Nurse, Nic Kane, officially opened the new gallery on Monday 20 March. The first exhibition is on 'The Natural World' and features photographs from the local Canbury Camera Club. The gallery will be regularly refreshed, with exhibits by the nursery, staff photographers and artists planned for the future.

Director of Estates and Facilities

I am pleased to advise that Steven Malarkey has been appointed as Director of Estates and facilities across Kingston Hospital and HRCH.

We have taken the opportunity to bring the roles together to help us to develop an estates and facilities strategy which makes best use of our buildings and facilities. Steven has been Deputy Director of Estates at Kingston Hospital for the past two years and I would like to congratulate him and wish him well in his new role.

Systems & Partnerships

Joint Forward Plan for South West London

South West London ICB has developed the first phase of the Joint Forward Plan for the NHS in South West London. The plan sets out priorities for the next five years.

This first phase of the plan includes the understanding of health needs and health inequalities in South West London, population data, the wider determinants of health, and importantly the views, experiences and concerns of local people and communities

Moving to phase two and the development of the final plan, delivery actions will be outlined, plans made to improve performance and reduce variation and health inequalities, and responses made to the views of people and communities. It will also set out how progress and outcomes will be measured.

The first phase of the plan has been shared with our key partners for their consideration and feedback with the deadline of Monday 1 May 2023.

Hewitt Review

Rt Hon Patricia Hewitt has conducted an independent review of the oversight, governance and accountability of integrated care systems (ICSs).

The review makes several recommendations:

- **Fewer central targets:** the review recommends that government and NHS England set fewer central targets, to enable systems to prioritise how they use their resources based on the needs of their local populations.
- **Enabling a shift towards upstream investment in prevention:** a combination of increased prevention funding and attention are needed to embed health promotion at all levels to improve population health and ensure the longer-term sustainability of the health and care system.
- **Multi-year funding:** the government and NHS England should end the use of small in-year funding pots with extensive reporting requirements for the NHS and social care.
- **Payment mechanism flexibility:** NHS England should give ICSs more flexibility to determine allocations for services and appropriate payment mechanisms within system boundaries, and the NHS payment scheme should be updated to reflect this.

- **Defining accountabilities:** guidance on system accountabilities, including NHS England’s operating framework, should be updated so that national support and intervention in providers should be exercised ‘with and through’ ICBs as the default arrangement.
- **Data available to ICSs:** data held by NHS England (including regions) about performance within an ICS, including benchmarking with other providers and systems, should be shared with ICSs themselves.
- **An enhanced role for the CQC in systems:** CQC and ICSs should work together to develop a long-term approach to system inspections and ensure that CQC develops the capabilities and skill sets needed to support successful development of ICSs.

If you would like to find out more about the Hewitt Review you can read the full document [here](#).

The London Care Record (SWL Kingston HIE)

On 6 March, the newly consolidated London Care Record went live for South West London – the culmination of a project between Kingston Hospital and South West London ICS Digital Leadership Board, to consolidate three HIEs (Health Information Exchanges) for Kingston, Croydon and St George’s, into a single HIE.

The London Care Record (SWL Kingston HIE) brings together information from our health and care organisations, meaning that patient records can be seen by health and care staff anywhere across South West London. Users will also be able to see the records of their patients who live in other parts of London. This will improve patient care, making it quicker and easier to get a full picture of the patient, including details of their Urgent Care Plan, if they have one, saving time, improving patient safety and the patient’s experience.

The London Care Record also contains information from other health and care organisations across London, such as social care, acute trusts, mental health, community nursing, GP practices, and out of hours services. Most recently, The Royal Marsden also linked into the London Care Record.

Wolverton Centre featured in ‘Youth Out Loud!’ sexual health film

As part of their Digital Youth Projects, Youth Out Loud! – a group of people aged 13-17 working with Healthwatch Kingston – recently created a sexual health information film which features the Wolverton Centre at Kingston Hospital, and an interview with Judith Murray in her previous role as Lead Nurse. You can watch the film [here](#).

Sustainability

Finance update

We are currently in the process of closing the 2022/23 financial year and, subject to audit, we expect that our reported performance will be in line with the plan for the year and we will deliver a break-even position. In addition, we have delivered our capital programme of £16.5m, and we anticipate that we will finish the year with £45m cash in the bank.

We are currently in the process of finalising our plans for 2023/24, prior to submission of our plan to NHSE on 4 May 2023. As part of the plan we have been asked to deliver three national asks:

1) Recover our core services and productivity, specifically to:

- improve ambulance response and A&E waiting times
- reduce elective long waits and cancer backlogs, and improve performance against the core diagnostic standard
- make it easier for people to access primary care services, particularly general practice

2) Make progress in delivering the key ambitions in the Long-Term Plan:

- new service model for 21st century, e.g., boost 'out-of-hospital' care and dissolve divide between primary and community health services
- more action on prevention and health inequalities
- digitally enabled care
- taxpayers' investment used to the maximum effect

3) Continue transforming the NHS for the future:

- Level up digital infrastructure and drive greater connectivity and take a digital first approach

The financial challenge that the NHS faces in 2023/24 is significant. Systems, and providers within them, have been set the task of delivering a break-even position in-year and beyond. Despite reasonable endeavours, and the support of PA Consulting, it is likely that both the Trust (and our acute colleagues) and SWL will submit a deficit plan, and not without risk.

Our plan has focused on productivity improvements, returning to pre-covid levels of activity and above, which will also allow us to earn additional income, reducing spend on high-cost agency staffing as well as improving workforce utilisation.

In parallel we will also take forward our transformation schemes that will put us on a more sustainable footing for the future as well as working with local partners to invest in preventative schemes that will pay an NHS dividend in the longer term.

We have also agreed a capital plan of £18.7m for 2023/24 including phase 2 of our REU development, investment for a diagnostic centre for cardiology and £3m relating to the first phase on the critical care new build.

Forming a joint vision and ten-year strategy for Kingston Hospital and HRCH

Healthcare is changing and increasingly, care will take place in the community, close to where people live, focusing on the often complex needs of local people. In addition, the current model of health and care is unsustainable, with overall demand and complexity increasing each year.

With this in mind, we need to significantly adapt the way we work so we can thrive as a leading partner in our boroughs, and in the wider system in the longer term. Over the past few months, we have been holding conversations with all our staff groups at Kingston Hospital and HRCH, to help us to develop a vision for our partnership and a ten-year strategy.

Over the coming weeks, we will be extending our engagement, to gather views from our governors, members, patients and service users, and based on the views of our people we are aiming to create a sustainable roadmap that will allow our people, our services and our 'places' (the boroughs in which we work) to thrive.

A more detailed discussion about the strategy development will follow on today's meeting agenda.

Plans to build a new intensive care unit

Planning is underway to build a new intensive care unit (ICU) within Kingston Hospital. Outcomes for patients cared for in our intensive care unit are nationally recognised and the Trust has received agreement in principle to build an enhanced facility on site, which will further improve the quality of the environment for patients, their families and staff working in the unit, as well as increasing the number of ICU beds.

The new building, which we hope to locate in the centre of the Kingston Hospital site, will comprise of four levels incorporating the intensive care unit, as well as car parking on the ground floor and additional space that can be adapted for future use.

In support of the business planning process for the new intensive care unit, the Patient Experience and Involvement Team has carried out an engagement exercise to identify factors that drive experience of care, and to gather feedback on the proposed floor plans. We have involved ten patient / family groups together with Chaplaincy staff providing pastoral and spiritual support specifically in ICU. This has been through small group discussions with Hunters architects and also one to one interviews. In addition, the ICU at Chelwest (the model on which our proposed design is based) was visited with a specific focus on understanding lessons from a patient and visitor experience perspective.

We are currently working on plans with our construction partner, Mace Willmott Dixon, and will be holding public engagement events to help inform our planning.

Digital design and manufacturing facility at Kingston Hospital

With the support of Kingston Hospital Charity, construction is now underway to create a new digital clinical design and manufacturing facility within Princess Alexandra Wing.

Completion of this new facility (expected to be later this Spring) will ensure Kingston Hospital is one of only a small number in the country to provide onsite digital customised anatomical models and medical devices, using 3D biomedical design and printing in a bespoke facility.

Once operational, patients will receive more efficient care, with better outcomes, underpinned by a custom-built technology system. For example, a child who requires a replacement hearing aid may currently wait months for a new one, which has a significant impact on psychological wellbeing, educational progress, and social interactions. The new service will be able to manufacture a replacement hearing aid ear-mould using an impression that has been virtually stored in less than 24 hours and can be sent by post.

A patient requiring orthodontic retainers to hold the final positions of teeth after 'train track' braces are removed, currently waits one to two weeks. Using this new technology, patients will receive their retainer the same day ensuring they experience no discomfort when first using it. They will also need to attend only one appointment, instead of returning for a second.

This facility will also introduce three-dimensional virtual surgical planning for patients with complex facial deformities. For patients with complex broken bones or fractures that require surgery, the new facility will enable three-dimensional printed custom models to be made to enable the surgeon to plan the best approach and orientation of any surgical fixation screws.

Introducing Dragon Voice Recognition

In December of last year, the pilot of the Dragon Voice Recognition (Dragon VR) began at Kingston Hospital. The new tool represents the next step in how dictation can enhance both clinician and patient experience. The future of Voice Recognition at the Trust will see AI playing an increasing role in the function of the tool, with intuitive technology that continuously develops and refines each user's personal speech profile, increasing the accuracy of each dictation.

Dragon has a vast medical terminology including an extensive drug dictionary, ensuring that this important information can be recorded accurately, and the tool is agile and easily accessible via a desktop app, with recordings made via smartphone or using a dedicated SpeechMic. The pilot is ongoing, with the VR project team currently delivering 1-on-1 training to introduce the system to consultants in all outpatient departments.

The figures so far are positive, with a reduction in the average turnaround time for all BigHand workflows, from 24 days (in Oct 2022, before the pilot began) down to 10 (Feb 2023). Over time we see much wider applications for this technology at Kingston, with increasing system integration to broaden the scope and scale of the usage of the tool, from creating a letter in real time to dictating directly into CRS.