

Agenda Item 1v

Report to:	Board of Directors	Date: 04 June 2020
Report from:	Chief Executive	
Principal Objective/ Strategy and Title	Chief Executive Report	
Board Assurance Framework Entries	Governance	
Regulatory Requirement	N/A	
Equality Considerations	None believed to apply	
Key Risks	N/A	
For:	Information	

1. Purpose/Background/Summary

This report provides the Trust Board with a monthly update from the Chief Executive.

2. Our response to the COVID-19 pandemic

At the time of writing, we are caring for 24 patients with COVID-19, which represents less than half as many as at the peak of the virus in mid-April. Despite this, our Extracorporeal Membrane Oxygenation (ECMO) service is still in surge, looking after around 5 times as many patients as in normal circumstances. This means that we still have many staff members redeployed to our critical care team, although we are gradually releasing staff back to their usual wards and departments as we restore other services. As we adjust to a new stage of the pandemic response, where we continue to care for patients with COVID-19 while running other services, I would like to express again how proud I am of the way that staff at Royal Papworth Hospital have responded to the challenges of the last few months. Our staff – whether they are working in the hospital, at our office at Royal Papworth House or from home – have shown extraordinary levels of commitment, compassion and resilience. In the coming months, we are determined to recognise their efforts and make sure they get the rest and support they need to recover from their recent experiences.

I would like to thank our partners, patients and the general public for their continued support for our staff, which has made a significant impact on morale during these difficult times. From people sewing scrubs for our staff to local businesses donating food and people generously donating to our charity appeal, every act of kindness or gesture of thanks towards our staff has been very much appreciated.

3. Operational update

3.1 Recovering our elective activity

As the number of COVID-19 cases in the hospital reduces we have begun planning the restart of clinical services that were paused in response to the pandemic. To ensure that all of our teams' plans are co-ordinated, we have set up a Living with COVID Steering Group along the lines of the hospital move project. The steering group has received an outline Clinical Strategy for the next stage from our Clinical Decision Cell, as well as draft operational plans for re-start from each speciality and imaging. The pace at which we will be able to re-start is linked to the de-escalation of our critical care surge; so far, we have begun to see some services admitting elective patients as staff return to their normal area of work from critical care. Following a reduction in demand for staff needing tests for COVID-19, we have also been able to extend the use of our testing facility which is now being used to carry out patient testing and collect our sleep study devices that are being returned. It is clear that delivering normal services while continuing to treat COVID-19 patients will be challenging, with a significant loss in productivity due to personal protective equipment requirements and enhanced cleaning regimes.

3.2 Staff and patient testing

We have now been able to make antibody serology testing available for our patients and staff. Our local Pathology network have selected Peterborough as the location for antibody testing and the centre will carry out 1,000 tests per day for patients and staff from Peterborough, Hinchingsbrooke, Royal Papworth, Bedford and Cambridge University Hospitals. It is anticipated that 400 testing slots per day will be reserved for staff testing. Testing will involve the collection of a venous blood samples and our team is currently assessing how samples can be collected locally using existing staff with phlebotomy skills.

4 Financial update

4.1 NHS financial framework

I mentioned in my report last month that the NHS financial framework had been significantly re-designed to help trusts respond at pace to the risks posed by COVID-19. These changes have been vital in supporting Royal Papworth's response to date, and continue to provide certainty over the short term financial performance of the Trust. In this context, the Trust reported a breakeven financial position in April, which is in line with our regulator's expectations.

The Trust continues to work with colleagues both regionally and nationally to understand and forecast the likely cost base impact of COVID-19. This important piece of work will undoubtedly shape both the operational and financial performance of the Trust in the months and years to come.

5 Procurement update

5.1 Procurement of Personal Protective Equipment (PPE)

During May the Trust accepted the delivery of more than 6,000 reusable gowns from local supplier TBT uniforms. These Public Health England-approved gowns,

alongside arrangements the Trust has put in place with local laundries, have enabled the Trust to:

- limit its exposure to the global supply challenges for this vital item of PPE;
- reduce the impact on the environment from burning disposable gowns; and
- support local businesses during this difficult time.

I'd like to take this opportunity to personally thank our estates and procurement team for all they have done to make this possible, and TBT for responding so rapidly to the Trust's request for support.

Whilst pressure on the Trust's PPE supply chain has eased during May the Trust remains in far from a 'normal' procurement operating environment. We continue to operate heightened monitoring of our PPE supplies and stand ready to enact contingency measures should a particular product become unavailable.

6. Clinical update

6.1 Royal Papworth Hospital Clinical Decision Cell

At the beginning of the COVID-19 outbreak, we set up a Clinical Decision Cell with representatives from senior clinicians to discuss potential patient transfers and provide advice to other hospitals caring for patients who were seriously ill with COVID-19. This group now meets three times per week and is currently focused on developing a new clinical strategy for restoring our other clinical services while continuing to treat patients with COVID-19. Each week, the Clinical Decision Cell hosts a 'critical care conference' for clinicians across the country to discuss research and experience relating to the management of COVID-19 patients in critical care.

6.3 Participation in clinical trials

The Trust continues to participate in the national RECOVERY trial to assess the effectiveness of existing drugs in treating COVID-19. We have also now joined a clinical trial aiming to find a safe vaccine which can create immune responses against the virus and prevent the disease. All of our staff members working in clinical or patient-facing areas, who are over 18 years old and in good health, are eligible to participate.

6.4 Critical Patient Resource Management Cell

In April/May we hosted the region's Critical Patient Resource Management Cell on behalf of NHS England/Improvement, which coordinated the management of patient transfers across the region. NHS England wrote to us at the end of May to thank us for hosting this group. A copy of this letter is attached at Appendix 1.

6.5 Clinical academic appointment in critical care

In the last month we have taken the decision to appoint a clinical academic in our critical care department to build on our clinical strengths. This appointment will help us develop an academic programme around Acute Lung Injury which is particularly relevant to COVID-19 and the research interests of the new Heart and Lung Research Institute on the Cambridge Biomedical Campus.

6.6 Change in organ donation law

Last month, organ donation in England has changed to an opt-out system, meaning that consent for organ donation will be assumed unless an individual has opted out of being an organ donor. On the day of the law change, our clinicians and one of our

patients spoke to ITV Anglia and BBC Radio Cambridgeshire about their hopes for how a change in the law could eventually lead to an increase in organ donors.

7 Workforce and employee engagement

7.1 Staff risk assessments

The safety and welfare of our staff remains an absolute priority. As our response to COVID-19 continues, we remain focused on mitigating the risk to our staff and ensuring we provide adequate support to them, whatever their role or circumstances. In light of further risk factors for COVID-19 that have been identified recently, we have revised our staff risk assessment process to incorporate ethnicity and gender. At the beginning of May, the Chairman and I wrote an open letter to all staff setting out the emerging evidence concerning COVID-19 risk factors and in particular the impact on staff from a Black, Asian and Minority Ethnic (BAME) background. In the letter we outlined a series of actions that we were taking to provide open forums for staff to hear directly from our infection control team and to raise any concerns or queries. We have discussed extensively with our BAME Network, our Freedom to Speak up Guardian and staff-side colleagues how we include ethnicity in the risk assessment process and then how we provide support for staff from a BAME background to undertake their roles safely. Understandably, given the growing evidence about the disproportionate impact of COVID-19 on people from a BAME background, there were significant concerns expressed by members of the BAME Network about the risk they were potentially exposed to. Following a session with the BAME Network at which the Chief Nurse provided detailed information on the infection control measures across the Trust and the rationale for the PPE guidelines used in the Trust, the Chair of the Network confirmed that she felt reassured and confident to reassure others about the Trust's approach to PPE.

Our new staff risk assessment process involves an online tool which all staff are being asked to complete. Staff who are identified as being at high and medium risk will have an individual review with a member of a team established within the workforce directorate about what actions the Trust and individual need to take to mitigate those risks and enable the member of staff to safely continue in their post. Ultimately if we are unable to manage these risks then we may need to redeploy the member of staff. The workforce team will be advised as appropriate by our occupational health advisers and will liaise with the relevant line managers.

7.2 Support for staff

The Trust has put in place a range of support to help staff whose emotional and physical wellbeing may be affected by the COVID-19 pandemic. This includes face-to-face and online resilience sessions and access to an employee assistance programme that provides online and telephone support for staff and their families. We have procured coaching for managers on supporting the mental health of their staff and will be rolling out training on this in the autumn. Our chaplain has been providing tailored support for individuals and teams which has been much appreciated by staff. In addition, a range of national support services is available for staff and we are regularly signposting staff to these through our internal communications. The Cambridgeshire and Peterborough Sustainability and Transformation Partnership (STP) is developing a specification for a service to provide rapid access to mental health services for NHS health and social care staff across the STP.

Throughout the emergency situation we have sought to ensure that staff have been enabled and encouraged to take breaks. We implemented a managed approach to annual leave that ensured that all staff had a period of leave allocated in April - June.

We reviewed that framework during May and reinstated the ability for staff to book leave as normal from July onwards.

7.2 Staff pulse survey

In May, we carried out a 'pulse survey' for all staff, giving them the opportunity to let us know how they were feeling and where they needed more support. More than 500 staff members completed the survey, which represents approximately 25% of the workforce. The proportion of staff recommending the Trust as a place to receive treatment improved significantly to 92% and the percentage of staff recommending the Trust as a place to work improved to 70%. The key areas of concern reported by staff related to the ability to maintain social distancing in the workplace, the redeployment of staff to critical care, a sense of isolation and disconnect among staff working from home and a reduction in regular contact between staff and line managers. We have put in a place a range of actions to address these issues – please see the report in today's Board papers for more details.

8. Royal Papworth Charity COVID-19 Appeal

In order to support Royal Papworth Hospital's efforts to tackle the COVID-19 pandemic, Royal Papworth Charity launched its own COVID-19 appeal and has carried out various fundraising initiatives including virtual events, patient mailings, social media giving initiatives, corporate asks, grant applications and an urgent appeal mailing to over 3,000 supporters.

The executive team is keen to allocate these funds in a timely manner to allow immediate benefit to our staff and patients and to facilitate effective messaging back to our supporters and donors. The team has established a pipeline of over 20 projects to fund from the COVID-19 appeal, supporting initiatives in staff psychological wellbeing services, employee rest and recharge stations, patient welfare services and research.

9 Digital update

9.1 Cyber security

Airline Easyjet, German healthcare company Fresenius and Royal Surrey County Hospital are some of the latest victims of cyber-crime during the pandemic. The Trust is on heightened awareness again following a noticeable increase in reporting of phishing and spam attempts exploiting the pandemic crisis to attempt to steal information. Royal Papworth is one of the first Trusts in England to have now rolled out full Advanced Threat Protection (ATP) as part of our Win10 rollout. This adds an additional layer of security and has been deployed to all of our computer estate. We continue to encourage our staff to remain vigilant to the threat of cyber-crime and report and suspicious activity.

9.2 Virtual patient clinics

In response to the need for many of our patients to stay at home wherever possible, Royal Papworth has launched a new virtual consultation clinic platform. 'Attend Anywhere' enables our clinicians to run outpatient clinics in a new secure online room, reducing the need for patients to travel to the hospital. The virtual consultation has been successfully piloted in our cystic fibrosis department to a handful of

patients and is now being rolled out to help accelerate digitising our outpatient services as part of a wider national initiative.

10 Heart and Lung Research Institute (HLRI) update

10.1 Update on construction work

Construction work continues at the Heart and Lung Research Institute site despite the additional challenges presented by COVID-19. The contractor, SDC, has confirmed that it is currently able to comply with Government guidelines to maintain progress on site but has submitted a planning application to extend site working hours later into the evening as more operatives are required on site and start and finish times need to be staggered.

The external structure to the west side of the building adjacent to Francis Crick Avenue is now at second floor level and work will commence on the east elevation towards the end of June. The HLRI tunnel has been broken through to the existing Royal Papworth Hospital tunnel and work is going on to complete the connection. The extended height hoarding between the construction site and hospital is being installed this week and will take about 10 days to complete.

11. News and updates

11.1 Nurses' Day 2020

On Tuesday 12 May, we marked Nurses' Day in the hospital. Although the celebrations were different to those which we had originally planned, we shared a video message from our executive team to nursing staff, a number of the Executives spent time with teams across the hospital, held a socially-distanced event in our hospital atrium and gave all nursing staff a gift bag with gifts donated to Royal Papworth Hospital Charity. We also shared some photos and case studies on our social media channels to mark national Operating Department Practitioners (ODP) Day on 14 May.

11.2 Staff Awards 2020

Finally, we had to take the difficult decision to cancel our staff awards ceremony which was due to take place in March this year due to the COVID-19 outbreak. Although we will be unable to hold a similar kind of event for the foreseeable future, we are planning to hold a special staff awards day in the hospital on Wednesday 17 June to give recognition to the nominees for their hard work and achievements.