

Agenda Item 1.v

Report to:	Board of Directors	Date: 4 July 2019
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. Operational performance

2.1 Operational performance update

The reduction in activity over the cutover period was in line with plan but recovery to normal levels of activity has been somewhat slower than expected due to some staffing concerns. Recovery of activity levels and bedding in new ways of working is now the focus of the newly launched Hospital Optimisation Project.

Cardiology have sustained compliance with the RTT standard since February 2019 despite the planned reduction in capacity over the hospital move period. On this basis Cardiology has moved out of recovery and returned to business as usual. Surgery saw a further decline in RTT at month two, however the service does remain ahead of trajectory by 2.01%. The reduction is a direct result of the restriction of capacity as part of the ramp down plans, ongoing staffing issues and bed closures, high numbers of cancellations and ongoing demands for the prioritisation of IHU patients.

Supporting recovery in this area is the prime focus on the Hospital Optimisation Project.

Agreement has been reached with Cambridge and Peterborough CGG regarding the appropriate management of GP CSS patients, which will see 200 pathways and 30 breaches being removed from the Trust's RTT waiting list in June. This will return the

Trust's waiting list size to target level and increase RTT performance for Respiratory Medicine by 1%.

3. Financial performance

3.1 Finance and activity update

The Trust's year to date (YTD) position is a deficit of £1.4m which is favourable to plan by £0.9m. Total clinical income is below plan YTD by £0.6m, however, the Guaranteed Income Contracts (GICs) has provided £1.8m of protection to the income position. This lower activity is driven by 7.8% less admitted activity than planned YTD and 12.6% lower Outpatient activity than planned. The plan included the ramp down for the hospital move.

Pay costs are favourable to plan by £0.1m, with the 269 WTE vacancies being predominately offset by temporary staffing costs. Non-pay costs are favourable, reflecting the lower activity in consumables, non-utilisation of revenue contingency (required to offset the CIP gap) and timing differences on the NPH transition programme.

4. Official opening of Royal Papworth Hospital

4.1 We are working very closely with a number of agencies regarding the official opening of the Hospital on 9th July 2019.

5. Workforce update

5.1 Culture and Leadership Programme

The Trust is embarking on a programme what will support the hospital in the continued development of a culture that enables and sustains safe, high quality, and compassionate care. This programme is based on extensive research undertaken by Professor Michael West with healthcare organisations and has been co-designed by the Kings Fund and NHSI. The Trust has asked for volunteers from all levels and roles within the Trust to contribute to this exciting and important programme.

5.2 Royal Papworth Garden Party and Royal Papworth House first anniversary

As a thank you to all the staff who helped deliver the successful move, Royal Papworth Hospital Charity funded and organised with colleagues in Communications and Workforce a Garden Party with refreshments, music and a souvenir on The Green and The Gardens. It was wonderful to see so many staff enjoying the atmosphere and the sunshine together.

There were also celebrations in Huntingdon to mark one year since the opening of Royal Papworth House, with a quiz, buffet lunch and Bake Off competition.

It has been an extraordinary time for the Trust and its staff so I am very pleased that these two events allowed the hospital to show how grateful we are to staff and allow time for everyone to reflect on what has been achieved.

5.3 Recruitment Day

Our joint recruitment day with CUH held on Saturday 22 June was a great success. There were 132 people who came along and with interviews taking place on the day, the team were able to make 28 offers of employment (20 Healthcare Support Workers and eight Registered Nurses). Over 50 members of staff helped out on the

day and they did a fantastic job in showcasing the variety of work opportunities available as well demonstrating the positive working environment here.

6. Quality and safety

6.1 Care Quality Commission (CQC) Update

The CQC carried out their core inspection of our hospital between the 18th and 19th of June.

In their brief feedback session, CQC thanked all those who helped them learn more about Royal Papworth and for their warm welcome. They were very impressed with the knowledge, expertise and care offered to our patients.

They will return on the 25th and 26th July, when they will carry out the well led inspection and following this visit we are likely to receive our final rating in the autumn.

The CQC highlighted how positive an experience their inspection of Royal Papworth had been for the entire Inspection Team and highlighted numerous examples of best practice in their feedback. They spoke extremely positively about the consistency of the care and compassion on display and identified a particular theme relating to the importance placed on multi-disciplinary team working and the clear pride displayed in the hospital's work.

There were of course a small number of relatively minor issues which they identified which are already being addressed through our new hospital optimisation project.

7 Strategy Development

7.1 The second strategy workshop has taken place which was a chance for the Board and clinical leaders of the organisation to hear and discuss the conclusions of five workstreams, who have been exploring the five "Big Questions" set out in the last Strategy Update at the end of May. There was a general consensus about what the way forward should be:

- A commitment to a "collaborative" rather than a "competitive" mindset; Royal Papworth will seek to play a role in all systems that is both valuable and valued by our partners, and in particular will seek to be a respected collaborator and partner on the Campus.
- A commitment to innovation and excellence, seeking to be at the forefront and leading development in our areas of expertise, and ensuring that all areas of our service live up to the reputation set by the best.
- A focus on those areas where we have particular strength and expertise; and recognising that we should aim to add value not just by what we directly provide within Papworth Hospital, but also by outreaching with advice, support and leadership to the wider network and patient pathways.
- A recognition that we may need to think differently about how we provide services, around diagnoses and specialisms rather than around procedures, and viewing patients from a holistic pathway perspective rather than mode of treatment upon referral.

- A shift towards a more strategic and disciplined approach to prioritising research and education activities, based on clear criteria and governance, including the establishment of an innovation fund and recognising the importance of our educational role for the system.
- A more structured approach to attracting income through international and private income and partnerships with industry.

Each clinical directorate and support function is now to think about what this direction of travel might mean for its own services, building on the Clinical Vision work that was done earlier this year. Meetings are being set up with directorate leadership teams, and the conclusions will be brought to the next milestone workshop in September.

8 News and updates

8.1 Increased emergency services presence at old Royal Papworth site

Decommissioning work is now under way on our old buildings, lasting through until the summer, prior to handing over the site to a future buyer. During this time we will be working with other public sector organisations such as Cambridgeshire Constabulary and Cambridgeshire Fire and Rescue Service to allow them to undertake training exercises on the site. Therefore, residents and workers in Papworth village should not be alarmed or concerned by the increased presence of blue light vehicles and emergency services in the area.

8.2 Papworth Haemostasis Checklist: Improving patient care and saving money

Royal Papworth Hospital's surgical team has been nominated for a national patient safety award, thanks to the impact of the Papworth Haemostasis Checklist. The 21-bullet point list outlines a number of checks to be performed at the end of cardiac surgery. The whole process, if everything is ok, takes only a couple of minutes. It was designed to reduce the amount of bleeding and the number of patients who need to return to theatre after surgery, in turn reducing a patient's length of stay in hospital and improving their outcomes.

8.3 New heart, new hospital and new home for first transplant patient

I am pleased to report that Mike Stickland became the first person to undergo a transplant at the new site, adding to the thousands of heart and/or lung transplants that have taken place during the past 40 years at the hospital's old site. He is now making good progress in his recovery and when he is discharged from Royal Papworth will be heading back to a new home on the south coast.

Recommendation:

The Board of Directors is requested to note the content of this report.