# Agenda Item 1.v

Report to:	Board of Directors	Date: 9 June 2022
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

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

### 2 Introduction

It was an expectedly busy Jubilee bank holiday weekend for the NHS and it is important to formally acknowledge the hard work of Trust staff who, while much of the country was resting and celebrating, were steadfastly working to provide 24/7 care to patients.

Their commitment to high quality care remains steadfast, and it is a reminder of how important it is for the Trust to return that dedication by ensuring that it takes opportunities to further support their wellbeing. The Trust is developing an additional staff support scheme, covered in more detail in the workforce section of this report, to further build upon the wellbeing initiatives already in place.

# 3 Operational

Despite the bank holiday reducing the number of working days in April, outpatient recovery progress remained steady and our teams have done exceptionally well in exceeding the 104% recovery standard that has been set nationally. Staff sickness plateauing has also expedited radiology recovery figures, with the department close to delivering its 110% national target.



Progress continues to be made in restoring elective day case admissions as well more complex admitted care pathways. The latter is supported by the Meridian productivity project, taking place in theatres and our cath labs as well as the Trust's critical care transformation project, which are on track and have shown some promising impact. It, however, remains important to accelerate the pace of delivery to meet the Trust's desired recovery standards for its patients.

COVID-19 community numbers have dropped considerably, and this has provided the Trust with a greater ability to embrace and utilise opportunities for recovery. Nationally the NHS is now operating at a Level 3 in terms of incident management, which reflects this shift but also continues to recognise the ongoing challenge facing the NHS in terms of backlog.

## 4 Clinical

## 4.1 Visiting

The reduction in COVID-19 cases has also allowed the Trust to review its associated guidance and processes, and it was welcome in particular to be able to review and extend visiting arrangements for patients and their loved ones. Patient visiting has been protected throughout the pandemic, but this has now been extended in terms of both time and the number of visitors allowed – this will undoubtedly help to further support patients' wellbeing and experience under the Trust's care.

## 4.2 Critical care transformation

The Trust is now 14 weeks into its critical care transformation programme. The transformation work has sustained the opening of 33 beds, and is working towards a planned trajectory of 36.

The multidisciplinary team on critical care is working with the transformation lead across a number of key workstreams, including improving staff experience through better roster management and other initiatives. This roster effectiveness will ensure the Trust and the unit is utilising staff resource in the best way, as well as providing a better focus on work-life balance for staff.

## 4.3 Surgical site infections

The Trust closely monitors data across a raft of indicators; following an upward data trend in quarter four (2021/22), it has put a number of actions in place over the last month in response to surgical site infections (SSIs). The data places the Trust as an outlier in terms of incidence for coronary artery bypass surgery.

The Trust has, rightly, reacted swiftly and robustly and put in place a broad series of actions in place; there is currently no single indicated factor identified as linked to this increase, so the Trust has put in place a range of measures that are considered to be best practice in the management of SSIs, including additional infection prevention and control (IPC) support, enhanced training, a review of our uniform policy, a deep clean in theatres and a pause on non-essential theatre visits, amongst other initiatives. The multidisciplinary teams appreciate the serious of this issue and, recognising that IPC best practice is a whole-organisation responsibility, the entire organisation is engaging in a campaign to support improvements.



# 4.4 Clinical decision cell (CDC)

The Trust's clinical decision cell (CDC) has pivoted from primarily focusing on COVID-19 issues to a more developed and expanded role. As an example, this regular meeting of senior clinical leaders has been a forum for discussion and action around the SSI issue and has facilitated rapid support of enhanced IPC measures, as well as contributed to the debate and agreement on other process changes.

The meeting will shortly be welcoming a visit from the Cambridgeshire and Peterborough system medical director, to better engage and assess what more the Trust can do from a clinical perspective to contribute to the wider working of the system in its new form.

### 4.5 Clinical impact awards

Historically Trust staff have been exceptionally well represented among recipients of Clinical Excellence Awards. The national awards have now been refocussed as 'impact awards', and the first round of applications to the new system is now active.

In the spirit of our collective and collaborative approach, the Trust is encouraging applications from across the range of specialty groups, from both part and full-time staff to ensure a broad and diverse recognition of the consultant body.

### 5 Finance

The month-one financial position for 2022/23 shows a deficit of £152k, which is £112k favourable to plan.

The position includes the continuation of national funding arrangements comprising of locally agreed variable and block payments for NHS clinical activity, top-up payments and COVID-19 funding. However, this deficit position reflects how challenging 2022/23 will be for the Trust considering the ongoing headwinds in relation to inflation.

Positively, £250k of efficiency savings were delivered in-month as part of the Trust's ongoing cost improvement programme (CIP), and there are £3.97m of pipeline schemes identified against an annual target of £5.8m.

#### 6 Workforce

#### 6.1 Launch of Laudit

The Trust was delighted to officially launch 'Laudit' last month, a digital reporting portal to enable the recognition and celebration of the extraordinary measures that staff perform in their everyday roles.

Laudit, which was originally created at Royal Papworth as 'Laudix' in 2018, has received thousands of submissions since. Laudit provides a convenient, simple and reliable way of saying thank you, while also contributing to departmental and organisational performance. Although every organisation has examples of their staff going above and beyond, most do not have any way of formally recording these episodes of excellence. In 2019 CQC captured our use of Laudix in their report as an item of outstanding practice.



The new Laudit platform makes it much easier and quicker for staff to submit a note of recognition, thanks or celebration about a colleague; now accessible through any internet connection in or outside the Trust, Laudit will also notify the person's line manager that a submission has been received for a member of their team. The Trust has partnered with Amazon Web Services to build the product and it is hoped it can be adopted across the NHS in the future.

It has been very well received so far by staff, with hundreds of Laudits submitted on the new system in just a few weeks, and it is clear the positive impact that this scheme has had. It embodies the Trust's values of excellence, collaboration and compassion in their entirety, and the Trust looks forward to further supporting and growing this fantastic initiative.

## 6.2 Compassionate and collective leadership programme and values workshops

The Trust's compassionate and collective leadership programme for line managers officially launched at the end of April.

This programme, with 16 people in the first cohort, plays an important role in embedding the Trust values and developing compassionate and confident line managers. A further two cohorts are due to begin in July and August respectively.

In turn, around 14% of staff have now attended the Trust's values and behaviours workshop, designed to support individuals in understanding their role in promoting, living and embedding the Trust's values and associated behaviours framework. The opening of the HLRI has allowed more space for training sessions and a reduction in COVID-19 absence has given wider scope for staff to attend, both of which have previously been limiting factors in attendance rates. Managers will receive regular updates on the attendance at these workshops for members of their team so that they can provide further support and capacity for colleagues who have not yet joined a session to do so.

## 6.3 Staff support and wellbeing

As a result of our positive financial and clinical performance in 2021/22, the Trust has been able to introduce some additional wellbeing schemes to support staff with some day-to-day pressures like food and travel costs.

The initiatives, which have been developed in collaboration with Staff side colleagues, will see staff benefits introduced for our staff ranging from reduced car parking and bus fare rates, along with a discount on food from the hospital restaurant and the catering provider at the House. It is intended that these schemes will be launched in June.

The Trust is also strengthening the financial wellbeing support already in place for colleagues.

#### 6.4 Scavenger hunt

As part of the Trust's wider commitment to supporting staff health and wellbeing we celebrated Mental Health Awareness Week and National Walking Month by inviting staff to take in a 'picnic lunch scavenger hunt', which ran both at the hospital and the House.

Staff were encouraged to step outside and follow a short, signposted walking route around the local area and collect food items for a free picnic lunch along the way. Colleagues then had the opportunity to sit together and enjoy their meal, supporting the national Mental Health Awareness theme this year of tackling loneliness. Hundreds of our colleagues joined



the events and for those whose breaks did not coincide with the walk and picnic times, lunches were delivered to them on the wards.

These gestures, whilst small, can make a huge difference to the wellbeing of our people and ensuring they feel valued for their incredible efforts. More events are planned for the near future to continue to support staff in new and innovative ways.

#### 6.5 Recruitment of healthcare support workers

The Trust has once again begun to hold in-person recruitment events to help boost healthcare support worker numbers within the organisation, with candidates welcomed, interviewed and then, if appropriate, offered roles all on the same day. The market has become much more competitive regarding candidates for these roles due to rising pay rates in the retail and hospitality sectors; this is the picture across all parts of the NHS, but it is particularly acute for the Trust because of the high cost of living in Cambridge.

Thanks to our recruitment team and the input from the wider organisation, the two in-person events held so far have however proved very successful, with 29 candidates being recruited. A further event is planned for this month.

### 7 Digital

The Trust's digital team has had a challenging month, with a number of issues combining to cause a level of disruption for staff. Notable were issues around the Trust's imaging system, shared drive access, and the migration to Office 365. The digital team's responsiveness has ensured that a number of these issues have now been resolved, with a recovery plan in place to reduce both the backlog of calls logged and the call hold times for the digital service desk.

These issues did impact the planned go-live date for the Trust's new picture archiving and communication system (PACS), but this is currently on track to launch in mid-July.

The Trust also welcomed Simon Bolton, Chief Executive of NHS Digital, to the hospital last month to share more about its digital innovations, progress and challenges.

### 8 Research

#### 8.1 Research innovation fund

The Trust's Research and Development directorate has, alongside the Royal Papworth Hospital Charity, launched its innovation fund once again to applications. The main aim of the innovation fund is to support the development of research projects by staff, and it prioritises clinical studies with a clear potential to improve patient care locally and across the NHS. Applications closed at the end of May and the Trust is looking forward to supporting colleagues with their ideas and initiatives to help bring tomorrow's treatments to today's patients.

#### 8.2 Heart and Lung Research Institute (HLRI)

We have been pleased to see University of Cambridge colleagues begin to join Trust staff in the HLRI, and the future outputs of this Institute will undoubtedly show the true strength of



collaborative working and the impact it can have not just on research, but health developments and treatments across the world.

Trust teams are working well in the new HLRI space, and feedback from clinical researchers indicates they are appreciating ready access to research and development colleagues, which has been a challenge over the last three years.

Planning and funding package discussions continue for the opening of the Clinical Research Facility (CRF) within the HLRI, and the Trust has been delighted to welcome a new member of the team into the role of CRF Manager.

The outside space between the HLRI and the hospital has also changed over the last few weeks, as staff moving into the building gave the opportunity for the Trust to remove the temporary structure of 'the Orangery' as planned. This has once again created space for benches and outdoor seating to help encourage teams to take restorative breaks, and the Trust has also increased the rest space for staff in the atrium in balance of the Orangery space being removed.

### 9 System

As referenced in last month's report, the system is prioritising the Royal Papworth system led cardiovascular disease (CVD) prevention and heart failure as a collective workstreams for implementation.

Developments are progressing in collaboration with primary care and local authority colleagues, and these are due for presentation at the system Strategy and Planning Group later in the month.