

Agenda Item 1. vi

Report to:	Board of Directors	Date: 6 October 2022
Report from:	Eilish Midlane, 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

2.1 Queen Elizabeth II

It has felt a somewhat turbulent month for the country, not least because of the very sad news of the death of Her Majesty Queen Elizabeth II, who was a constant in so many of our lives.

Queen Elizabeth II dedicated her life to public service and showed unwavering support for the National Health Service throughout her entire reign – as recently as awarding NHS staff the George Cross earlier this year for their compassion and courage across the lifetime of the service.

At Royal Papworth we have been privileged to witness that support both in person and by being granted our Royal title; with visits from Queen Elizabeth II in 1962, and more recently in 2019 when we were honoured with her presence at the official opening our new hospital. I

know that will remain a very special day not just for the Trust, but for our many staff who will personally remember those celebrations.

We placed a Book of Condolence in our atrium for staff, visitors and patients should they wish to share their thoughts; and appreciating that news of this kind can impact people differently, and sometimes remind us of very personal loss, we also took steps to ensure wellbeing offers were in place for our people.

Our Staff Awards and Annual Members' Meeting, which were postponed as a mark of respect during the period of National Mourning, have now been rearranged and we look forward to running both events in full before the end of the year.

2.2 Interim Chief Operating Officer

We are delighted to have officially welcomed Alex Baldwin as our Interim Chief Operating Officer. Alex joins us from West Suffolk NHS Foundation Trust and brings a wealth of operational and strategic experience to the position that I have no doubt will be of huge benefit to Royal Papworth and our teams.

3 Compassion: our people

2.2 Covid and flu vaccinations

We launched our staff flu and Covid vaccination programme on 19 September and have already seen a great response, with nearly 350 jabs given in the first day alone. We are running a number of vaccination stations in the hospital atrium that staff can drop into, and are running a vaccination day at Royal Papworth House to ensure our Huntingdon-based colleagues also get the opportunity to protect themselves, their colleagues and their loved ones as early as possible.

We are, alongside the wider NHS, encouraging people to have their vaccinations as soon as possible if they are eligible, and there has been an encouraging national response with more than 2.1 million boosters delivered in just over a fortnight. There is also wider concern that the country may face a serious challenge with flu this year, following the experience of Australia, and on behalf of Royal Papworth I would strongly urge people to have the flu vaccination if they are offered it.

2.3 Role changes

In the last month we have been pleased to welcome David Meek as the new medical lead of the Quality and Risk Management Group (QRMG) and Nicola Jones as the Director of Medical Education, a joint appointment with Health Education England. We are grateful to Stephen Webb and Clive Lewis for their contributions in these roles respectively over the past several years.

2.4 Relocation of Royal Papworth House

The project team are progressing with planning the set-up of the new office space for colleagues joining the proposed relocation of teams from Royal Papworth House to Kingfisher House in Huntingdon. We are still within the six-week consultation period, set to allow productive, individual one-to-one conversations with all staff affected to capture what changes to working arrangements might be needed.

2.5 Wellbeing coffee morning

At the end of August the health and wellbeing team ran a wellbeing coffee morning to gather feedback from staff about how the team could best provide support through the winter months. The continued focus on our people and their health – both physical and mental – remains hugely important to us as an organisation and we are committed to upholding this focus.

2.6 Council of Governors election results

Our newly elected governors will take up their roles at the rearranged Annual Members' meeting later this month. As an NHS foundation trust, Royal Papworth has a Council of Governors as required by legislation, comprising 18 public and seven staff members elected from membership, together with four representatives nominated from local organisations. Governors have an important role to play on behalf of our patients, our staff and our members, and we appreciate having access to their skills and experience to support our work and help to shape the future of the Trust.

At the Annual Members' Meeting we will also be thanking our governors who have come to the end of their final term of office. I would like to also formally say thank you here for their continued support, commitment, and service to our Trust.

2.7 Reciprocal mentoring

Colleagues who are a part of our new Reciprocal Mentoring programme came together for the second session last week, and there was a real sense of community and purpose in the group rejoining after the summer.

The Reciprocal Mentoring for Inclusion programme is a theoretical and practical framework that is helping us to deliver genuine and sustainable change in Royal Papworth's two areas of focus – race and disability – and brings together pairs of employees so that they may learn from one another and create a more inclusive workplace.

Once again, I was really impressed to see such a fantastic group of people coming together and being true advocates for change, and particularly heartened that a large number of colleagues chose to continue their time together after the session and have a group dinner.

4 Excellence: quality

4.1 Focusing on the experience of our patients

The national Adult Inpatient Survey 2021 results were published last week, and the hard work, compassion and excellence of our staff was recognised in the results; Royal Papworth was one of nine trusts nationally highlighted as a positive outlier, with results that were classed as 'much better than expected'. Seventy-eight percent of our results were in the most positive category and our overall experience score was 9.2, against a national average of 8.1. This is a testament to the high-quality care and experience our teams aim to give to every patient.

We also made statistically significant improvements from two of our results last year, relating to the information we give to patients when they leave hospital and how well patients' questions were answered before their procedures, which I am very pleased to see. Naturally however, we are not complacent and there are still areas where we can improve; our lowest scores, while still above the national averages, related to asking patients for their views on their quality of care during their hospital stay, and having access to enough to drink. We have shared the results with staff so that we can collectively share learning on what we are doing well and take action on the areas where we can and should improve.

It has also been good to see the expansion of the Trust's 'Read A Little Aloud' project, focused entirely on improving the experience of patients; the project was created to provide specially designed, live reading sessions through an iPad for longer-stay critical care patients to improve their mental wellbeing and aid their recovery. An innovation from our own Dr Stephen Webb and supported through a pilot with our library and digital teams, demand for the service has grown and sessions have now extended to the fourth and fifth floors.

4.2 Progressing research

There has been a great deal of skillful and focused effort to progress the opening of the Clinical Research Facility, part of the Heart and Lung Research Institute (HLRI). Needless to say these projects are complex, and this work has involved funding, fitting-out, staffing plans, and the writing and adoption of standard operating procedures (SOPs). We are grateful to all involved in this work and delighted that we are taking more steps towards opening to the first clinical trials.

We are pleased to note that new funding opportunities in terms of research are opening up thanks to the detailed and thoughtful work invested over the last few years. Bids are being put together for funding from the National Institute of Health and Care Research (NIHR) for a total body PET scanner, a local medical technology centre, and for support for our trials unit. Each of these is a competitive process, but regardless of any outcomes it is a testament to the research progress we are making that we are in a position to submit a number of credible applications.

In addition, we are most grateful to Nick Morrell for the work that he has delivered in his role as the interim Director of the HLRI. Nick has now formally stood down from his position and we are very pleased to welcome Professor Charlotte Summers as the new Interim Director of the HLRI.

4.3 Taking opportunities to improve

Following my report last month where I shared that higher-than-expected levels of Legionella were found in a small number of water samples, further testing and full remedial works have been carried out and our water has remained safe, with no evidence of transmission to any of our patients; though they are rare, we take these issues incredibly seriously.

Surgical site infections also continue to be a focus of attention; improvements across a wide range of infection prevention and control (IPC) practices have continued to be reflected in a reduction in SSI rates. Teams across the Trust are continuing to make improvements through attention to the essentials of IPC, and the introduction of best-practice techniques.

4.4 Staffing

Safe staffing was maintained across wards and other departments in August; however this has often been achieved through the redeployment of staff from different areas in order to mitigate short-notice absences. We are very grateful to our people for their flexibility and commitment to collaborative working in this way to ensure patient safety is maintained at all times.

5 Collaboration: productivity

5.1 East 1 Imaging Network

Royal Papworth has signed up to the East 1 Imaging Network and has jointly agreed a memorandum of understanding with seven other trusts in the region.

This exciting development, which follows recommendations set out in the national imaging strategy, enables us to join with other providers to maximise the use of capacity and improve access to specialist opinion across the East of England. This follows a sound evidence base which demonstrates that modernisation of equipment, technology and local innovation within imaging networks increases quality of service, experience, and safety for patients; we look forward to developing services with our partners as the East 1 Imaging Network evolves.

This digital work goes hand in hand with plans for a shared care record; the My Care Record programme will help health and care professionals to access the information they need to deliver joined-up care. Information is now being proactively shared with communities across the system in preparation for 'phase one', which will connect primary care, community and mental health services to the shared care record.

5.2 Elective surgical activity

Unavailability of theatre staff was reflected in a reduction in elective surgical activity in August, unfortunately marking us below the productivity and activity numbers that were seen in 2019/20, pre-pandemic. Initial response work highlights a complex set of reasons behind this position; the transformation steering group that has been set up to support improvements is underway and is designed to help the divisional management team in their planning and the implementing actions to change the position.

5.3 Financial position

At the end of month five the Trust's financial performance continues to be favourable to plan. At the end of August we posted a year-to-date surplus of £1.6m, driven by a favourable settlement in relation to the elective recovery fund (ERF) versus the Trust's plan.

Our capital programme also continues to be managed well, delivering in line with plan at the end of month five. Looking forward, the continued uncertainty in relation to inflation makes the Trust's year-end forecast more volatile than in other years. We are in the process of completing a bottom-up financial forecast, which will be published alongside our month six financial forecast.

6 Reasons to be proud

Alongside our aforementioned patient experience scores, there have been many reasons for the Trust to be proud this month.

Laudit, our Trust-developed positive reporting and feedback tool, has been shortlisted for two national awards – the Industry IT Awards 2022 and the Health Tech News Awards 2022. Regardless of the result, this is well-deserved recognition for the team who have been tirelessly collaborating, developing and rolling out this fantastic product, and we wish them luck for the ceremonies.

We have reason to celebrate some individual achievements too: Cath Willcox, our Head of Information Governance and Health Records, has been shortlisted for the Strategic Information Governance Network's 'Information Governance Person of the Year Award'; and our Chief Information Officer Andrew Raynes has been announced as a top 100 industry tech leader in the UK Industry CIO 100 list. We have long said at Royal Papworth that our people are our greatest and strongest asset, and this applies to those working non-clinically too. Congratulations both.

Finally, it was a true privilege to see the Trust featured in national TV and print news last week for a wonderful story that saw one of our longest surviving transplant patients, Katie, reunited with our now-Chairman and then-surgeon, Professor John Wallwork, who performed

her procedure 35 years ago. Katie is now among the longest surviving heart-lung transplant recipients in the world, ever.

The words of Katie's friend Samantha perhaps sum up what we have always done, and what we will continue to do, at Royal Papworth – to make a real difference to the lives of people and their families: “[Nothing] would have been possible without the donor family, John and his team, and Katie being brave enough to take it on. I don't think there are even words in the dictionary to describe it. I've had 35 years of my friend that we wouldn't otherwise have had.”