

Agenda Item 1.vi

Report to:	Board of Directors	Date: 3 November 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 National NHS leaders meeting

This month I joined a national meeting of NHS leaders that had chief executives or accountable officers in attendance from across the health sector. The meeting was opened by Amanda Pritchard, Chief Executive of NHS England, who set out clear priorities for NHS leaders over the coming months. She acknowledged that there were no magic bullets for the challenges that we face but encouraged leaders to identify areas to focus within their services that may offer small incremental gains.

In a passionate speech she described us as custodians of the NHS with a responsibility to do what is right for our patients, staff and organisations over the coming months but with a view to the long term.

Over the course of the day, providers shared improvement case studies from their own organisations and attendees were set the challenge of adapting and adopting the best practice examples showcased.

3 Compassion: our people

3.1 Recruitment activity

I am delighted to report that we had a very successful month in terms of recruitment, with an open day in our hospital atrium on 15 October. This was a joint event with our neighbours Cambridge University Hospitals. We recruited 29 people to join us at Royal Papworth Hospital, and then a further 12 people at recruitment events held in collaboration with system partners in Cambridge city centre and Huntingdon town centre. In total, 41 people were recruited across nursing, healthcare support worker and admin roles.

3.2 Staff Support Schemes

Retention and supporting our current staff is equally as important as recruitment at the moment. Thanks to collective hard work from everyone in terms of our financial position, we have recently been able to extend and enhance some of our staff support schemes to run until the end of March 2023.

This includes a discount on parking, free travel on buses from the Park and Rides in Cambridge, 50% off our restaurant and coffee shop in the hospital, and 50% off the catering van that visits our colleagues in our Huntingdon office. Staff will also receive a £100 thank you payment in their November pay.

We recognise the challenges that many of our people face this winter and I hope that this goes some way to helping them in the next few months.

3.3 Industrial action

We, like all in the NHS, await confirmation of the outcome of ballots for industrial action being undertaken by a number of trade unions. An industrial action working group, chaired by our Chief Operating Officer, has been established to lead on the preparation for any industrial action. The current focus is on reviewing and updating Business Continuity Plans and providing line managers with information on the preparations in their departments.

3.4 House relocation

The consultation process on the relocation of our teams based in our admin office in Huntingdon closed on 17 October. We are working closely with Cambridge and Peterborough NHS Foundation Trust, who manage Kingfisher House, on the arrangements for the relocation. We have not yet confirmed the date for the move but hope to be able to do so in the next couple of weeks.

3.5 Vaccination

Our vaccination hub has continued to operate most week days, vaccinating staff against both COVID-19 and flu. At time of writing, more than 51% of staff have received the COVID-19 jab and a similar number the flu jab.

We stopped offering the COVID-19 vaccine from our hub as of Tuesday 1 November, but the flu jab remains available.

3.6 Values and Behaviours training

This is a really important piece of work to embed our values and associated behaviours across the organisation, work led by our Compassionate and Collective Leadership team.

We have seen an increase in attendance to these workshops through September and the early part of October. By mid-October, more than 1100 staff have attended the workshops, which represents more than half of all staff.

Particularly pleasing has been the rapid rise in nursing staff attending the training, increasing from the last reported position of just 15% to more than 44% with more sessions planned throughout November.

3.7 Staff Survey

The NHS Staff Survey is currently running until 26 November. This is a really important tool for us to establish the areas where we are doing well and where we can improve. The responses from our staff in previous years have helped to bring about positive change in the organisation.

As of last Thursday, we had an overall response rate of nearly 41%, which is roughly reflective of where we were at this stage last year.

3.8 Staff governor elections

A warm welcome to our 10 newly elected governors who took up their roles at the Annual Members' Meeting on 17 October. The list of our new governors can be found in the appendix at the bottom of my report.

3.9 Long Service Awards

On Wednesday 19 October we held our annual Long Service Awards in the HLRI. A few dozen staff were invited and recognised for their commitment to Royal Papworth, ranging from 15 years all the way to 35 years of service. We thank them all for the contributions they have made to our hospital and the NHS, positively impacting so many thousands of patients along the way.

3.10 AHP Day

On 14 October we celebrated national Allied Health Professionals Day. The teams celebrated by holding an awards celebration for each AHP group and congratulations to Afua Tobigah from our social work team who was nominated as overall AHP of the Year.

4 Excellence: quality

4.1 Clinical Research Facility

I am really pleased to share that following a successful application and virtual inspection, our clinic rooms in the CRF in the HLRI have been authorised for regulated activity by the Care Quality Commission.

4.2 Surgical site infections

We continue to focus on making improvements especially in respect to infection prevention and control. Our rates of surgical site infection reduced in Q2 and I am grateful for the hard work of all our staff who continue to contribute.

4.3 Coronavirus (COVID-19)

Prevalence of COVID-19 in the community in saw an increase in September, however this did not translate into an increase in patients requiring respiratory support or ECMO for COVID in our hospital. We are currently putting measures in place to safely return to our regular pre-COVID visiting arrangements. We will continue to advise visitors not to visit if they have any symptoms and to wear a mask when visiting.

4.4 National blood shortage

NHS Blood and Transplant announced a shortage of group O blood and nationally declared an Amber alert status. Our response was expertly negotiated by the Emergency Blood Management Group through reducing standing stocks and highlighting best practice in blood use. No cases were cancelled due to the Amber status and our thanks go to all involved.

5 Collaboration: productivity

5.1 Financial update

The month six financial position for 2022/23 shows a surplus of £1.2m, which brings the Trust's year-to-date surplus to £2.8m. The position includes the continuation of national funding arrangements comprising locally agreed variable and block payments for NHS clinical activity, top-up payments, ERF and COVID funding.

Whilst ongoing community prevalence of COVID-19, the pace of elective recovery and headwinds in relation to inflation continue to indicate that the Trust and ICB is facing financial

risks during the financial year, the position to date is a cause for cautious optimism looking towards to year end.

5.2 Redeployments

Wards and departments have been working hard to support each other through regular redeployments in order to maintain safe staffing. Working in unfamiliar wards and departments can often require extra support and guidance, so I am very grateful to staff working collaboratively in this way.

5.3 NHS Provider Licence

On 27 October, NHS England announced a statutory consultation into changes to the NHS provider licence. This is the key regulatory instrument used by the NHS and governs how we operate as a Foundation Trust. We will be reviewing and responding to the proposed changes.

The licence has remained unchanged since it was first introduced in 2013 and the amendments proposed broadly reflect current statutory and policy requirements, including system working and collaboration. It is clear that system working and collaboration between providers is key to delivering NHS objectives, and that success will increasingly be judged against our contribution to the objectives of integrated care systems, in addition to our other duties.

The proposed modifications aim to further promote system working and patient-centred care, in line with national policy expectations and NHS objectives. We are committed to delivery in our role as an NHS Foundation Trust and as a part of the system and wider NHS and we will reflect that in our response to the consultation.

5.4 Ministerial visit from Lord Hunt and Scan4Safety GS1 UK Health Advisory Board

On Thursday 12 October the GS1 UK Health Advisory board and its president, Lord Hunt of Kings Heath, attended Royal Papworth to see the initiatives we are taking to embed Scan4Safety into the organization.

Scan4Safety is an initiative led by the Department of Health and Social Care (DHSC) to enable better patient care, improved productivity and efficiency and save money.

The visit was led by our Chief Medical Information Officer, Chief Nursing Information Officer and members of the digital team and was designed to showcase efforts to ensure patient safety, saving time through inventory management and traceability, our location numbering and bar code capability.

The tour included a trip our pharmacy, including a demonstration of the robot and how we are using bar codes within our Electronic Patient Record (EPR) Lorenzo to trace prescriptions to patients.

6 Reasons to be proud

6.1 Laudit award

Our positive incident reporting platform, Laudit, was a winner at the Health Tech Awards 2022, named as 'New Innovation of the Year'. Laudit is a Royal Papworth innovation, giving staff an easy-to-use platform to recognise colleagues for showing excellence.

Laudit is also a finalist in the UK IT Industry Awards next week. We are the only NHS Trust to be selected as a finalist across all of the categories.

6.2 New ablation technology

I am always blown away by the innovation that quietly just happens under our roof.

Back in the summer, our cath lab team performed the UK's first pulsed field ablation. This is a new treatment for atrial fibrillation, using pulses of electricity - as opposed to heat or freezing – to correct abnormal heart rhythms.

Early studies from Europe have shown excellent outcomes and low complication rates using this new system, with a reduced chance of damaging neighbouring tissue compared to traditional ablation techniques.

Royal Papworth is also the lead centre in the UK for the Advantage-AF research trial which will collect further data on the effectiveness of this technique.

6.3 Finance team nominations

Our finance team has been shortlisted for two Healthcare Financial Management Association (HFMA) awards.

They have been nominated in the Team of the Year category, and also the Havelock Award. This award recognises the significant contribution made towards finance skills development and recognises best practice in the training and development of finance staff or the raising of financial awareness and skills within the wider non-financial workforce.

It will be the third year running our team has been shortlisted and we are very proud.

6.4 HSJ Patient Safety Awards

Our microbiology and pharmacy team also made us very proud, representing us for the HSJ Patient Safety Awards as finalists in the 'Patient Safety Pilot Project of the Year' category. They were nominated for introducing twice-weekly multidisciplinary antimicrobial stewardship ward rounds for our surgical patients, and though they didn't win the award, their shortlisting is a fantastic achievement on top of the impact their innovation has already had on patient care and antimicrobial stewardship.

6.5 150th balloon pulmonary angioplasty patient – 400th procedure

Balloon pulmonary angioplasty (BPA) is a service only provided at RPH for the whole of the UK. It is a procedure used to treat a rare form of pulmonary hypertension, that occurs in 2-

4% of people following a pulmonary embolism when blood clots block-off the arteries in the lungs.

A tiny balloon is inserted into the blood vessels of the lungs and inflated to around the size of a pea, pushing the blockage aside, restoring blood flow to the lung tissue. Each patient requires two to four rounds of BPA.

We were commissioned by NHS England in 2018 to provide the BPA service across the UK, having carried out our first case in 2015. We recently treated our 150th patient and performed our 400th procedure.

This is most definitely a reason to be proud of the strong collaboration involved between PVDU, cardiology, the cath labs, ward 4 South and all our referring pulmonary hypertension centres.

Appendix 1

Susan Bullivant	Public: Cambridgeshire
Paul Berry	Public: Norfolk
Andrew Witham	Public: Norfolk
Marlene Hotchkiss	Public: Rest of England and Wales
Lesley Howe	Public: Rest of England and Wales
Harvey Perkins	Public: Rest of England and Wales
Angela Atkinson	Public: Suffolk
Sarah Brooks	Staff: Administrative, Clerical and Managers
Martin Ward	Staff: Ancillary, Estates and Others
Andrew Hadley-Brown	Staff: Nurses