

Agenda Item 1.vii

Report to:	Board of Directors	Date: 7 November 2024
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

The past two months have been full of celebrating, thanking and recognising our people for the contributions they make every day.

Whether it was the Long Service Awards, the nomination period for the Staff Awards, Black History Month celebrations or the latest gathering of our Transformational Reciprocal Mentoring and Inclusion Programme graduates, there have been plenty of opportunities to help people feel seen and heard.

This sense of belonging was the centrepiece of a leadership away day which was held off-site at the Møller Institute where more than 100 leaders came together to discuss our new leadership behaviours and accompanying framework. This will allow our leaders in the organisation to hold themselves and each other accountable to the very highest of behaviour standards. Thank you to all my executive colleagues and non-executive directors for their support with the event.

We are now approaching the winter months and with that comes our usual winter planning, whether that's our staff vaccination campaign or operational and financial planning for the rest of 2024/25 and the start of 2025/26.

3 Compassion: our people

3.1 National NHS Staff Survey

The annual NHS Staff Survey is currently open. All staff received their email at the start of October and can respond until Friday 29 November.

As of Thursday 31 October, our response rate was 36.26% (806 respondents from an eligible sample of 2,223 staff). This is broadly in line with the average response so far from acute specialist trusts (37.57%).

Work is ongoing to increase the response rate in areas that are currently under-represented so that our data can be as valuable and reliable as possible.

3.2 Staff Awards

Since our last public Board meeting we have opened and closed the nomination period for our annual Staff Awards. We had a remarkable response this year with 730 nominations – about a 50% increase on 2023.

That longlist has now been whittled down to a shortlist of 45 finalists in 15 categories. It was a pleasure to be involved in the judging process, seeing and hearing first-hand what colleagues had written about each other, showcasing the extraordinary work that our people do every day.

Winners will be announced at the awards ceremony on Thursday 12 December at Homerton College, Cambridge.

3.3 Long Service Awards

At the start of October we held our annual Long Service Awards, recognising and celebrating staff who have worked at Royal Papworth Hospital for 15, 20, 25, 30, 35 or – in two cases – an extraordinary 40 years.

Thank you to all those colleagues who have given so much time and energy to caring for our patients or supporting each other over so many years.

3.4 National AHP Day

On 14 October we celebrated national Allied Health Professionals Day. The day began with presentations of awards to AHPs who were nominated for providing exceptional care and leadership. Throughout the day there were stands in the atrium

with each speciality proudly presenting the fantastic improvement work they are undertaking with their teams.

3.5 New patient safety partners

As part of the patient safety incident response framework (PSIRF) we are delighted to welcome our three patient safety partners.

Welcome to Carole Cooper, Chik Knox-Macauley and Magdalini Triantafyllidou.

Recruiting patient safety partners is an important step in our patient safety improvement journey. By providing their perspective, experience and skill they will provide invaluable support to our programme.

4 Excellence: quality

4.1 Financial position

The trust is reporting a surplus to date in this financial year of c£1m. This is mainly driven by the phasing of reserves which are expected to be used later in the year.

The national financial context for 2024/25 remains challenging. This is the first year that specialised services have been delegated to local commissioners and we are working with partners across the Integrated Care System (ICS) to ensure stability to our commissioned services.

Planning has already started for 2025/26 operational planning, with early engagement sessions being held with teams across the organisation.

4.2 Surgical site infections (wound infections)

We continue our work on reducing surgical site infections (SSIs). Our verified SSI rates for coronary artery bypass graft (CABG) surgery for Q1 in 2024/25 (April to June) was 5.6%. This relates to inpatients and readmissions, which is what the UK Health Security Agency monitors.

This is an improved rate from the previous quarter, with fewer patients also developing the most serious type of infections known as 'deep' and 'organ space'.

4.3 Innovation fund winners

Congratulations to our seven winning applicants from our most recent round of innovation fund requests. This is an in-house fund, and with 22 applications this year everyone who was awarded funds has done an exceptional job.

The successful projects range from sleep apnoea research to home monitoring in patients with adult congenital heart disease (ACHD).

The diversity in applicants was also really pleasing, with healthcare scientists, AHPs, nurses and consultants all awarded funds.

4.4 Staff vaccination programme

Our staff vaccination programme is busy protecting people against Covid-19 and flu. As of Friday 25 October, the team had delivered 1,024 flu vaccinations and 877 Covid vaccinations.

This equates to approximately 41% and 35% of staff respectively, but it does include staff from partner organisations so the percentage for Royal Papworth staff only will be slightly lower.

Our batch of Covid vaccines has now run out but we are still vaccinating against flu. Thank you to all our staff who have had their jabs so far to help protect themselves, each other and our patients this winter.

5 Collaboration: productivity

5.1 New pathway for ACS patients

On Monday 28 October, after months of careful planning, we treated the first patient on a new pathway for patients with acute coronary syndrome (ACS).

As part of this collaboration with Cambridge University Hospitals (CUH), patients who are in CUH and match specific criteria are brought across to our hospital, receive their treatment and then are transferred back to CUH.

As well as establishing positive working partnerships between the two trusts, this will benefit both sites by aiming to release bed pressures to cardiology wards and ensure patients are treated as efficiently as possible.

A review of the first patient has already happened with lessons learnt to make the process even smoother for future patients.

5.2 National report on mechanical circulatory support

A national report from NHS Blood and Transplant which details activity and outcomes for patients on mechanical circulatory support has been published.

This year's report shows three big achievements at Royal Papworth Hospital:

- Since April 2019 almost half of our patients who had an implantable device to support left-side heart failure (LVAD) went on to receive a heart transplant, which is more than double the rate at the next best centre.

- All of our patients on LVADs who have not been transplanted are still being safely supported on mechanical circulatory support. Our survival rate during this time was 100%.
- We are a positive statistical outlier for survival after LVAD implant in the UK. Our overall survival at three years is 92%. This is impressive because having a heart transplant is a very major operation for anyone, but a particularly big operation for patients who have an LVAD fitted.

This suggests we are supporting the right patients at the right time.

Our retrieval team works tirelessly throughout the UK to make transplants happen, while back at the hospital our whole team does everything possible to get our LVAD patients through to a heart transplant.

I want to thank everyone involved for showing our values of collaboration and excellence throughout the patient journey to deliver these outstanding results.

6 Reasons to be proud

6.1 Restart a Heart Day

To mark Restart a Heart Day, our resus officer Sara Almeida was part of a collaboration with fellow NHS trusts CUH and the East of England Ambulance Service, as well as the charities Magpas Air Ambulance and East Anglian Air Ambulance, offering free life-saving training for the public in Cambridge.

More than 600 people visited our stand in the Grand Arcade shopping centre, where they learnt to recognise the signs of a cardiac arrest, carry out cardiopulmonary resuscitation (CPR) and learn how to use an automated external defibrillator (AED).

6.2 Surgery featured on national television

A pulmonary endarterectomy (PEA) was featured on a Channel 5 documentary in September, presented by the late Dr Michael Moseley.

The operation was filmed at our hospital last December, showcasing this pioneering surgery to treat chronic thromboembolic pulmonary hypertension (CTEPH).

We are the only hospital in the UK performing this highly-specialised operation to clear blood clots deep inside the lungs.

I want to thank all of our teams involved for showcasing the outstanding care and treatment they provide to all of our patients undergoing this surgery.