Report to:	Board of Directors	Date: 1 November 2018
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	

#### Agenda Item 1 vi

# 1 Purpose/Background/Summary

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

# 2 Key items

## 2.1 NHS Long Term Plan engagement event

On Monday 22 October Roger Hall, Medical Director and I attended an engagement event for the new NHS Long Term Plan in London. The Secretary of State and the Chief Executives of both NHS Improvement and NHS England spoke at the event. The event placed a significant emphasis on greater integration and described the work underway to revise the financial architecture of the health service going forward as part of the anticipated financial settlement for the NHS.

The NHS Plan will identify a number of health outcomes where England is an international outlier, with cancer, cardiovascular, respiratory and child mortality featuring significantly in the new Long Term Plan. Royal Papworth will continue its work to support system partners under the auspices of the STP.

# 2.2 The new Royal Papworth Hospital

We are making good progress towards our move to the new Royal Papworth Hospital, which is now due to take place during a three-week period from 23 April 2019. Our construction partner Skanska is carrying out remedial work to replace some of the insulation materials used in the hospital building and this work is being completed according to the agreed timetable. We will move into a new phase of equipping and staff training early in the New Year.



# **3** Operational performance

# 3.1 Improving our Referral to Treatment (RTT) times in Cardiology

Our focus on recovering our RTT performance is beginning to deliver improvements, with breach reductions and waiting list reductions exceeding our recovery trajectory for both Cardiology and Cardiac Surgery. In Cardiology, performance has exceeded our RTT recovery trajectory by more than two per cent. In Cardiac Surgery, our waiting list has reduced more quickly than expected, meaning that the proportion of breaches we have been able to stop is slightly lower than planned. However, our aggregate RTT position is more than one percentage point ahead of plan and we continue to run meetings three times per week to focus on supporting our RTT recovery.

# 3.2 Reducing 52-week breaches

We continue to work hard to reduce the small number of patients waiting more than 52 weeks for treatment. The four patients reported in the latest Papworth Integrated Performance Report (PIPR), which is included in this month's Board papers, have not been available for treatment since they re-appeared on our patient tracking list.

# 3.3 62-day performance for cancer patients

Further to last month's update, we are working to ensure that cancer patients receive treatment within 62 days of being referred, in accordance with NHS guidelines. Our 62-day cancer performance for August was 71.4 per cent, but we expect this to reach 100 per cent in September's figures due to the smaller number and improved timeliness of referrals from other organisations. We continue to work with our Commissioners and Cancer Alliances to support wider pathway improvements which will benefit all cancer patients.

## 4 Finance update

## 4.1 Finance performance

The Trust's year to date (YTD) position is a deficit of £3.94m which is marginally favourable to the refreshed plan by £10k. Our total clinical income remains below plan at month 6 with a YTD variance of £1.23m. The underlying income variance when pass-through variances are removed is favourable by £0.01m. The Trust continues to experience 9.9 per cent less admitted activity than planned, although this is being broadly offset by increases in the complexity of case mix, changes in portfolio mix, increases in private patient income and the positive benefit of the guaranteed income contract with Cambridgeshire and Peterborough CCG. Non-pay costs are favourable, reflecting the activity and pass-through variances in income. Pay is adverse to plan with temporary staffing costs replacing substantive savings from vacancies.

# 5 Workforce update

## 5.1 Nurse vacancy rate

In September 2018, our nurse vacancy rate – inclusive of Pre-Registration Practitioners - reduced to 4.6 per cent (30WTE). Pre-registration Practitioners (PRPs) are registered nurses from overseas or newly qualified UK nurses working towards registration with the Nursing and Midwifery Council (NMC). We have a comprehensive programme in place to support our PRP staff to gain NMC registration, and we are achieving especially good outcomes for staff undertaking the objective structured clinical examination (OSCE) programme, with a 100 per cent



pass rate for staff joining the programme since February 2018. The pass rate for our EU staff members who are undertaking the Occupational English Test (OET) is approximately 41 per cent against a national average of 20 per cent. We continue to pursue our local, national and international recruitment strategy, and our pipeline projections indicate that we will achieve a five per cent nurse vacancy rate exclusive of PRPs by April 2019. The key risk to achieving this target would be a higher than anticipated increase in turnover as we approach the move to our new hospital.

# 5.2 Annual flu campaign

Our annual flu campaign is well underway, with around 70 percent of staff in patientfacing roles having been vaccinated against flu. This is an excellent figure just a few weeks into the campaign, but we are working extremely hard to reach as close to 100 percent of staff as possible. I would like to thank our Occupational Health team and the many peer vaccinators who have been so dedicated to protecting our staff and patients from the risk of flu.

# 5.3 Planning for the UK leaving the EU

The Trust is making preparations for the UK's withdrawal from the UK, informed by advice from the Department of Health and Social Care (DHSC), Government technical notices and EU Exit briefings. The DHSC has advised that a scenario in which the UK leaves the EU without agreement (a 'no deal' scenario) remains unlikely. However, as this outcome is not yet certain, the Department has put in place plans to ensure the continuity of supplies to the NHS. Central planning is in place to cover the supply of medicines and medical devices and we are undertaking a review of our contracts as part of our local planning. The Senior Responsible Officer (SRO) for this work is the Chief Financial Officer.

## 5.4 Continuation of the X3 bus which serves Papworth Everard

A few weeks ago, transport provider Whippet announced that it would be suspending the X3 bus which serves Papworth Everard this month. This would have affected some of our staff members who use the bus to travel to work. Fortunately, South Cambridgeshire District Council and the Cambridgeshire and Peterborough Combined Authority have agreed to pay Whippet a subsidy to keep the bus running until the end of March. This will 'bridge the gap' until proposed changes to bus services come into effect in April 2019.

## 6 Clinical developments

## 6.1 Fundamentals of Care Board

Further to last month's update, we held the first meeting of our 'Fundamentals of Care' Board on Friday 12 October. The main purpose of the Board is to gain assurance that the fundamental standards of care, as set out by the Care Quality Commission (CQC), are delivered every time, for every patient. The group also aims to ensure that we are prepared for future regulatory inspections. The meeting was very well attended by representatives from operational, clinical and nursing teams.

## 6.2 Mock CQC inspection

On 11 October, the Trust carried out an internal mock CQC inspection, which rated the organisation as 'Good', with an 'Outstanding' rating in the 'Caring' category. The team carrying out the mock inspection included participants from partners such as NHS Improvement, NHS England and staff from neighbouring Trusts. The draft reports are currently being written and will be available in full to our Quality and Risk Committee in November and the Board of Directors in December.



# 7 Digital transformation update

# 7.1 Interoperability between our electronic patient record system, Lorenzo, and the Epic system used at Cambridge University Hospitals (CUH)

Blood test results from patients at Royal Papworth Hospital can now be sent electronically from the laboratory at CUH back to Royal Papworth, thanks to a new link between the different electronic patient record systems used at the two Trusts. The complex link between the two systems means that clinicians will receive results from blood tests – which are analysed at the CUH laboratory – much more quickly than if they had to wait for them to arrive by post. It is hoped that the electronic link will also lead to a reduction in transcribing errors, as clinicians will no longer have to enter test results manually into Lorenzo, the electronic patient record system used here at Royal Papworth. The interface, which went live on 16 October 2018, marks the first ever connection between Lorenzo and the Epic electronic patient record system used at CUH. Eventually it is hoped that further connections will be developed to allow other types of clinical information to be shared, benefitting the many patients who receive treatment at both hospitals. I would like to thank the Digital teams both here and at CUH for their hard work on this important milestone in our digital transformation plans.

# 8 News and updates

# 8.1 National Allied Health Professionals (AHPs) Day

On Monday 15 November, we held an event to mark national Allied Health Professionals Day. Occupational therapists, physiotherapists, speech therapists, dietitians and radiographers were among the AHPs taking part in a special event to raise awareness of the different roles and explain how they work collaboratively to improve patient care.

## 8.2 Screening of Papworth: A Moving Story

Earlier this year, we made a documentary celebrating 100 years of Royal Papworth Hospital thanks to funding received from the Heritage Lottery Fund. There will be another chance to see the film, *Papworth: A Moving Story*, on Sunday 25 November at Saffron Screen in Saffron Walden.

## **Recommendation:**

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