

Agenda Item 1.v

Report to:	Board of Directors	Date: 7 th November 2019
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/Background/Summary

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

2. Royal Papworth Hospital rated ‘Outstanding’ by Care Quality Commission

The Care Quality Commission (CQC) announced on Wednesday 16 October that it rated Royal Papworth Hospital NHS Foundation Trust as ‘outstanding’ overall, and across all five of the CQC domains; safe, caring, effective, responsive, and well-led.

This is the first time ever that an NHS hospital trust has achieved an ‘outstanding’ rating across the five key questions that the CQC asks when it inspects hospitals. It is also the first NHS acute Trust to have gained an ‘outstanding’ rating in the ‘Safe’ category.

The inspection took place in June and July, with a previous inspection in 2014 having rated the hospital as ‘good’.

In the report, the inspectors commended the hospital’s care, treatment of patients and leadership as well as the learning culture that exists at the hospital to deliver the best possible outcomes for patients.

To have been rated as ‘outstanding’ in all five CQC domains only two months after moving into our new building is testament to our skilled and dedicated staff whose work has created a culture which delivers the best possible care for our patients. Everyone is immensely proud of what they have achieved and we all thank the staff for their efforts and extraordinary commitment.

The Trust has received a number of kind messages congratulating us on our rating:

Congratulations on becoming the first to achieve an “outstanding” rating in each of the CQC’s five categories, as well as overall. Achieving ‘Outstanding’ ratings in all

categories is not only a historic achievement for both your hospital and the health service, but is a great reflection on your staff and your leadership. It is all the more impressive that you have achieved this while in the process of moving to a newly built hospital. Please pass on Stephen's and my best wishes to your board and your team.

We would be keen to share your story with other members and wondered if you or one of your colleagues would be willing to write a short piece about your progress or one of your services or initiatives for NHS Voices, the NHS Confederation's blog site? This attracts significant numbers of views and we would also promote it heavily in our member bulletins and via our twitter account which has 60,000 followers.

If you felt it was convenient and appropriate, I'd certainly welcome the chance to see first-hand the fantastic work you are doing, particularly your recently rated outstanding services.

In the meantime, if there is anything I or my team can do to support you, (or messages we should convey to the centre) do let me know.

Best wishes

*Niall Dickson CBE
Chief Executive, NHS Confederation*

What a wonderful and thoroughly well deserved result for the whole team at the Royal Papworth! To have continued delivering their world renowned care whilst moving to the biomedical campus is quite something and I would like to offer my congratulations to every single member of staff. You should all be very proud indeed.

Best wishes,

*Heidi Allen
Member of Parliament for South Cambridgeshire*

Dear Stephen and John,

I just wanted to drop you a quick note to say congratulations on achieving an Outstanding CQC rating. I know how hard you and your team across the Trust will have worked to make this possible and also what a positive difference you will all be making for patients as a result.

Please could you pass on my thanks and congratulations to everyone in the organisation for a job very well done. I look forward to watching and hearing of your continued improvement journey for patients as you all do even greater things!

Very best wishes

*Dido Harding
Baroness Harding of Winscombe and Chairman of NHS Improvement*

Ahead of the announcement we welcomed Prof Ted Baker, Chief Inspector at Care Quality Commission to the hospital for a tour of the building. It was a great opportunity to show him around to witness the great care our patients receive.

3. Operational performance

3.1 Hospital Optimisation

September has seen improvements in admitted activity levels in Cardiology, Thoracic Medicine and all areas of Surgery with the exception of pumps. Work continues to optimise flow through theatres and cath labs. Theatre 6 opened as planned on 1st October and has delivered 21 additional cases in the first 12 days of operation despite a shortfall in the expected staffing in Critical care and level 5 wards.

Out-patient activity is behind plan by 8.2% year to date, which is a marginal improvement when compared to month 5, however it is recognised that recovery at the current rate is too slow. As a result a productivity project has been launched in Outpatients, supported by experts Meridian Productivity. The aim of the project is to increase the number of patients seen through our Outpatient facilities on the ground floor and the areas of focus are increasing booking, template review and patient flow. The productivity work will be accompanied with a training package for staff involved in patient flow so that the improvements achieved are embedded within the organisation.

4. Financial performance

4.1 Finance and activity update

The Trust's year to date (YTD) position excluding the land sale is a deficit of £2.5m which is favourable to plan by £0.8m. Total clinical income is below plan YTD by £1.55m, with the Guaranteed Income Contracts (GICs) providing £1.6m of protection to the income position, therefore the underlying income position is £3.2m below plan, a marginal improvement for the last three months.

This lower activity is driven by 9.3% less admitted activity than planned YTD and 8.2% lower Outpatient activity than planned.

Pay costs are adverse to planned levels and have not fluctuated in line with the reduced activity. The Trust had 88 WTE vacancies which were offset by temporary staffing costs (a reduction on prior month value of 251 WTEs due to the impact of planned CIP).

Non-pay costs continue to be favourable to plan, reflecting the lower activity in consumables, non-utilisation of revenue contingency (required to offset the CIP gap) and underspends on the NPH transition programme.

5. Workforce update

5.1 Compassionate and Collective Leadership Update

The team's work to build a compassionate and collective leadership culture for the Trust is ongoing. The last of the focus groups and survey work is currently being undertaken, the results of which will be reported later in the year, alongside conclusions gained from the other workstreams that when considered together will give us a revealing picture of how close we are to our goal of creating a culture where compassionate and collective leadership can thrive.

5.2 Flu vaccination campaign

We are currently in our second tranche of the programme with another 480 vaccines delivered in the middle of October to continue our programme of vaccinating those who are in patient-facing roles. This covers any member of staff, including bank, who has regular contact with patients; clinical staff, support staff and admin staff working

in all patient areas, which includes inpatient, outpatient and community services. None patient facing staff will be in the final round of vaccination likely to be early November.

5.3 AHP of the Year awards

There were over 140 nominations from across the hospital and a huge amount of interest regarding AHP day, which really helped meet our aim of raising awareness of who our AHPs are in the Trust and the unique and essential skills they provide to our patients.

The AHP of the Year award was awarded to Occupational Therapist, Sarah Pethurst, for being an understated champion and advocating for the patient in all she does. She is supportive of her team and other teams too and goes above and beyond to find out how she can best connect with her patients. She is innovative, always with the patient at the heart, and continues to develop professionally and in her own confidence.

5.4 National Staff Survey 2019

The annual NHS Staff Survey 2019 launched earlier this month. The survey is run in partnership with trade unions and is one of the best ways for staff to share their views about their job, their organisation and the NHS. Results from this survey are used to improve care for patients and working conditions for staff.

5.5 Long service awards

The date has been set for this year's Long Service Awards: Monday 25 November. We will be contacting staff very soon with more details.

6 News and updates

6.1 Cystic fibrosis: Life-saving drugs Orkambi and Symkevi to be made available on the NHS

NHS England has announced on Thursday 24 October that life-saving cystic fibrosis drugs will be made fully available on the NHS. An agreement has been secured with Vertex Pharmaceuticals for Orkambi, Symkevi and Kalydeco, which means around 5000 people may now take up these treatments. There is no cap on patient numbers, and each and every patient in England who might benefit can now get these treatments, free on the NHS. Clinicians should be able to begin prescribing these drugs within 30 days.

6.2 Cell salvage: Returning a patient's own blood during surgery

Royal Papworth Hospital's patients are benefiting from a technique that sees them receive their own blood back during cardiac, thoracic and transplant surgery. Blood saves lives; it is a lifeline in an emergency, is vital in surgery and is essential for people on long-term treatments. That means we need donors from all backgrounds and blood types to ensure the right blood is available for patients who desperately need it.

However, there is a national shortage. Nearly 400 new blood donors are required each day to meet demand and around 135,000 needed each year to replace those who can no longer donate. Therefore, it is critical to make the best use out of the blood that we do have available. Cell salvage is a technique that does just that. It is the process of collecting all blood that is lost from the beginning of surgery, allowing patients to receive their own blood back during surgery. The chance of then needing

bank blood is much reduced, although may still be necessary if some blood can't be collected or bleeding is happening too quickly. Cell saver machines are run by perfusionists who are the specialists on the equipment.

7.3 Ten cyclists. Three hundred miles. And lots of rain.

On Wednesday 25 September, 10 cyclists set off on a 300-mile bicycle journey to raise money for Royal Papworth Hospital Charity. During the next four days, they encountered beautiful English villages, stunning French countryside and two capital cities as part of the London to Paris Bike Ride. And the conditions couldn't have been more gruelling, with driving rain and 40 mph winds greeting the group along the way, before the sun emerged to greet them over the line at the iconic Eiffel tower on day four (Saturday 28 September).

The group, comprising five hospital staff, three patients, and two supporters, have raised in excess of £20,000 – an amazing sum of money for our charity.

Recommendation:

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