Report to:	Board of Directors	Date: 3 September 2020
Report from:	Chief Executive	L
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 1v

1. Purpose/Background/Summary

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

2. Operational update

2.1 Restoring clinical services

Restoring clinical services that have been impacted by the COVID-19 pandemic is a huge priority for all NHS trusts at the moment; here at Royal Papworth, we are working towards recovery targets set by our own Clinical Decision Cell as well as those laid out by Sir Simon Stevens in a letter to trusts about phase three of the NHS' recovery strategy on 31 July. Thanks to the hard work and commitment of our staff, I am pleased to report that most of our services have now achieved or exceeded the targets set both within our own organisation and at a national level.

Our surgery, cardiology and diagnostics services have all exceeded expectations and, although our respiratory medicine service has taken longer to restart, it is now making good progress with its recovery plans. We have now turned our attention to supporting the recovery of the other acute trusts within our Sustainability and Transformation Partnership (STP), where recovery has been slower due to the challenges of reduced capacity, lower theatre productivity and reduced diagnostic capacity. As a key member of the STP, we know we have a responsibility to support NHS services across the system and understand the clear benefits this will bring to patients in Cambridgeshire and Peterborough.

2.2 Response to COVID-19 pandemic debrief exercise

In the last few months we have carried out an extensive debriefing exercise with our staff to assess our response to the COVID-19 pandemic and identify any learnings that could help us manage a similar incident in the future. The findings – based on surveys completed by more than 300 staff members – have led to a number of 'task



and finish' groups being set up to review where actions need to be taken, either immediately or in case of a future incident. I would like to thank all of our staff who have taken part in this important project to ensure we continuously learn from our experience of managing emergency situations.

2.3 Five-year strategy

Earlier this year, we decided to postpone the launch of our five-year strategy for 2020-25 in order to focus on responding to the COVID-19 pandemic. The strategy has now been reviewed in light of the changes that have happened within the hospital and the wider NHS in the last few months and is tabled for approval at today's Board meeting.

3 Financial update

3.1 NHS financial framework and recovery planning

As reported in previous months, as a result of the COVID-19 pandemic NHS England/Improvement (NHS E/I) suspended the 2020/21 operational planning round and implemented a revised and simplified financial framework for April to July inclusive. The temporary framework was based on the following principles:

- that financial constraints do not stand in the way of taking urgent, immediate and necessary actions;
- that during a period of potentially increased staff absence, transactional and administrative burdens were reduced; and
- that sufficient, and guaranteed levels of cash flowed quickly to providers to maintain supply chains.

There have been three core elements to provider funding in this period:

- a block payment based on 2019/20 Clinical Commissioning Group (CCG) income;
- a prospective top-up payment based on 2019/20 expenditure run-rate; and
- a retrospective top-up to fund COVID-19 costs and any other additional costs.

In this context, the Trust reported a breakeven financial position in July, which is in line with our regulator's expectations.

On 31 July NHS Improvement/NHS England (NHSI/NHSE) notified organisations that current financial arrangements for CCGs and trusts will largely be extended to cover August and September 2020 to support service restoration, and enable continued collaborative working,

A revised financial framework is being put in place for the latter part of 2020/21 once the position has been finalised between NHSI/E and the Government. The revised framework will retain simplified arrangements for payment and contracting but with a greater focus on system partnership and the restoration of elective services. The intention is that systems will be issued with funding envelopes comprising funding for NHS providers that is equivalent in nature to the current block as well as prospective top-up payments and a system-wide COVID-19 funding envelope. There will no longer be a retrospective payment mechanism but systems and organisations will still be expected to achieve financial balance within these envelopes in line with a return to usual financial disciplines. The detail of the arrangements is yet to be clarified and the Trust continues to work with system and regional colleagues to understand the implications for the organisation over the coming months.



4. Clinical update

4.1 First MitraClip procedure performed

At the end of July, clinicians at Royal Papworth performed the hospital's first percutaneous mitral valve leaflet repairs, otherwise known as the MitraClip procedure – a minimally invasive treatment option for patients with mitral regurgitation who may be unsuitable for open-heart surgery. The potential benefits of the procedure include a much shorter recovery time, which often means just one or two days in hospital after the device is inserted. The procedure also enables higher-risk patients with severe mitral regurgitation or who are older in age to receive treatment and experience a significant improvement in symptoms and quality of life. We hope to be able to offer this treatment to patients from across the East of England in the future.

4.2 Recognition of our contribution during ECMO surge

Last month, we received a letter from NHS Specialised Commissioning thanking us for our work to significantly expand our ECMO capacity at the peak of the pandemic. I would like to thank all of our staff who played an important role in responding to the huge increase in demand for ECMO – there is no doubt that their hard work and dedication saved lives.

4.3 New cystic fibrosis drug approved for use

Last month, European regulators approved the use of a life-changing new treatment for cystic fibrosis which is already benefitting patients at Royal Papworth Hospital. Kaftrio, also known as the 'triple combination therapy', was approved for use on Friday 21 August, setting live a deal struck by NHS England in June to get the drug onto the frontline of patient care as soon as it was licensed. I know this is hugely welcome news for our cystic fibrosis patients and our staff who are involved in their care.

4.4 Research update

From the outset of the coronavirus (COVID-19) pandemic, Royal Papworth Hospital has participated in a number of research studies to support the ongoing treatment of COVID-19 patients. This work included enrolling patients to the RECOVERY trial to explore possible treatments for the disease, the GenOMICC study to better understand the role of genetics, and the NIHR BioResource research tissue bank to support work on understanding the immune response to infection. We are also pleased to be leading on a major trial focussed around understanding the factors in COVID-19 immunity: the role of T-cells in the immune response. The COVID-19 pandemic has highlighted our ability to rapidly develop new research programmes in an agile and nimble fashion, working closely with clinical and management teams. COVID-19 research will continue to be a central part of our research over the next five years alongside our existing research programmes in cardiothoracic medicine and surgery. When it opens in early 2022, the Heart and Lung Research Institute will provide further infrastructure and opportunities for us to collaborate with other research groups and organisations, nationally and internationally, to discover new treatments in heart and lung disease and improve outcomes for patients.

5 Workforce and employee engagement

5.1 NHS People Plan

The NHS People Plan (2020/21) has now been published, setting out clear guidelines for what NHS staff can expect – from their leaders and from each other – in the year ahead. Central to the NHS People Plan is the NHS People Promise,



which invites all staff to make a commitment to aims such as developing a compassionate and inclusive culture, supporting flexible working and making sure people are recognised and rewarded. We will be drawing on the new NHS People Plan to develop our own Trust People Plan which we will share over the coming months.

6. Governance

6.1 Governor elections

We will be conducting elections to our Council of Governors this autumn and have 12 vacancies in our public constituencies. Governors have an important role to play on behalf of our patients, our staff and our Members and it is vital we have a good representation of governors from areas where our patients are based. The deadline for receipt of nominations is 17:00 on 14 September 2020. To find out more about our governors visit: royalpapworth.nhs.uk/our-governors

7. News and updates

7.1 Royal Papworth teams shortlisted for Nursing Times Awards

Last month, two teams in our thoracic directorate were shortlisted for awards in this year's Nursing Times Awards. Our cystic fibrosis nursing team, led by Sam Henman, have been nominated for the 'Promoting Patient Self-Management Award' and Charlotte Smith, one of our specialist oncology nurses, has been shortlisted for the 'Rising Star Award' for her commitment to care, excellence and innovation. Judith Clark, Discharge Planning Nurse Specialist and Nicky Speed, Pulmonary Hypertension Nurse Specialist, were also nominated for the Patient Safety Improvement Award for their outstanding work over the last year. I would like to thank all of them for their continued commitment to Royal Papworth Hospital and wish them the best of luck with the awards.

7.2 World's first DCD heart-lung featured in The Sunday Mirror

On Sunday 23 August, The Sunday Mirror ran a double-page story about the world's first Donation after Circulatory Death (DCD) heart-lung transplant, which was carried out at Royal Papworth Hospital last year. The patient who received the transplant, 25-year-old Aaron Green, is doing extremely well and is due to get married this month.

7.2 Channel 5 News visit to Royal Papworth Hospital

Last month, Channel 5 News visited Royal Papworth Hospital to hear from our staff about their experiences of working in the hospital during the pandemic and find out more about their work to recover clinical services. I would like to thank the staff members who took part in interviews to highlight the extraordinary work carried out by NHS staff caring for COVID-19 patients and the need to continue supporting staff to recover from the pressures of responding to a pandemic.

7.3 Transplant patient discharged after seven months in hospital

On Friday 14 August, one of our long-standing inpatients, Richard Priest, was discharged from hospital after waiting in the hospital for a heart transplant since New Year's Eve last year. Richard spent more than eight months in hospital before finally receiving his heart transplant in August. He is now recovering well at home and we wish him all the best for the future.

