

**TRUST BOARD**  
**27<sup>th</sup> September 2012**

<b>TITLE</b>	<b>Chief Executive's Report</b>
<b>EXECUTIVE SUMMARY</b>	General overview of issues/developments including: <ul style="list-style-type: none"> <li>▪ Trust responds to a Major Incident</li> <li>▪ Monitor Ratings</li> <li>▪ Care Quality Commission Report</li> <li>▪ Emergency Care Pathway Staff Engagement Campaign</li> <li>▪ The Queen's Award for Voluntary Service</li> <li>▪ National Hip Fracture Database</li> <li>▪ Shadowing Speech and Language Therapy Team</li> <li>▪ Patient Environment and Action Team Scores</li> <li>▪ Research and Development Open Day</li> <li>▪ Epsom Transaction</li> <li>▪ Innovation Fund</li> <li>▪ New Consultant Appointments</li> <li>▪ Meetings and visits</li> </ul>
<b>BOARD ASSURANCE (RISK)/ IMPLICATIONS</b>	Incident Plan successfully implemented on Tuesday 11 <sup>th</sup> September. Improved Monitor Governance rating to Green. CQC full compliance. Excellent results from national hip fracture data base. PEAT scores
<b>STAKEHOLDER/ PATIENT IMPACT AND VIEWS</b>	Comprehensive staff engagement in the emergency care pathway. The Queen's Award for Volunteers. Successful public event on R&D
<b>EQUALITY AND DIVERSITY ISSUES</b>	n/a
<b>LEGAL ISSUES</b>	n/a
<b>The Trust Board is asked to:</b>	Note the report
<b>Submitted by:</b>	Andrew Liles, Chief Executive
<b>Date:</b>	17 <sup>th</sup> September 2012
<b>Decision:</b>	For Noting

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**Chief Executive's Report**

**Key News and Developments**

**Trust responds to a Major Incident**

In the early hours of Tuesday 11<sup>th</sup> September, the Trust was contacted by the South East Coast Ambulance Service and asked if we would respond to a major incident, the serious coach crash on the A3 just north of Hindhead. Overall seven hospitals were involved and St Peter's Hospital was asked to take the majority of the walking wounded and less injured, with the most severe cases being taken to St George's and Southampton hospitals.

In total St Peter's took 23 casualties, around half of all those involved in the crash. We put our own major incident plan into action and I am proud to say how smoothly and efficiently this was done and how well everyone handled the situation. Those who were called in came quickly and willingly and immediately set to work, joining staff already on the ground, all focused on helping the young casualties in the best way they could.

Although all Trusts plan for such events, it is a rare occurrence to have to implement a major incident plan and responding to such a large number of casualties in the early hours of the morning is no mean feat. Our staff in A&E worked hard to triage and treat patients quickly before discharging them to the Postgraduate Education Centre which was set up as a patient and relative centre. When I arrived at the hospital early the next morning, seeing the young people affected really brought home what they had been through. And seeing our staff giving them breakfast and comforting them while they waited to go back home was very impressive.

I would like to record my thanks here to everyone involved, from those called out during the night, those already on duty to those who came in and took over so smoothly the next morning – everyone's collective response was tremendous. When incidents like this happen, everyone looks to services like ours for help and reassurance and whilst this will remain with many of our staff for some time to come, I am proud to say Ashford and St Peter's showed real resilience and rose to the challenge.

**Monitor Ratings**

The Trust's Monitor Governance rating (which reflects performance and quality issues) has recently been moved back up to Green – the top rating. This follows recent return visits by the Care Quality Commission (which gave a much improved picture of quality standards within our Trust) and our much improved 4 hour waiting target (currently at around 98% for this quarter). To move from Amber-Red (the 3rd out of 4 possible ratings) back up to the top rating of Green is a real achievement.

The Trust's Financial Risk Rating has also risen, from 3 (the middle rating) up to a 4 (out of 5) for the first quarter of this year. This reflects an improving financial position for us and means overall our Monitor position - Green/4 - is looking very positive.

**Care Quality Commission Report**

In July the CQC published a report following their [return] visit to St Peter's Hospital in May. The report declared the Trust fully compliant with five of the six quality standards they looked at, and in particular with all of those they had previously found to be of concern during their

initial unannounced visit last December. One concern remained which was around record keeping; however, following a further visit to St Peter's hospital earlier this month, on 11<sup>th</sup> September, the CQC has now given the Trust a clean bill of health. During this latest visit the CQC visited 6 wards and examined some 30 sets of patient notes with no significant concerns noted.

### **Emergency Care Pathway Staff Engagement Campaign**

Improving our patients' experience when they come into hospital as an emergency is one of our top priorities this year and getting this right not only improves care to patients, it also helps ease pressure on our staff. Over the past few months, particularly with the support of the national Emergency Care Intensive Support Team, we have put into place a number of improvements to our 'emergency care pathway' working closely with staff, particularly our clinicians. Throughout September we have widened our communication and have been running a comprehensive engagement campaign right across our hospitals, involving as many front-line and support staff as possible.

Members of the Executive Team, Divisional Directors and other senior leaders and managers have been visiting as many clinical areas as possible to chat to teams, listening to their experiences and talking through their ideas for improvements. Overall the campaign has been well received with much useful feedback already being collated. In total some 40+ events are taking place, from ward handover meetings to larger divisional team meetings. I have also been personally involved, presenting and chatting to our ward managers, at nursing handover times and to some of our divisional teams.

### **The Queen's Award for Voluntary Service**

Earlier this month we were proud to host the official presentation of The Queen's Award for Voluntary Service, awarded to our volunteers by The Lord Lieutenant of Surrey, Dame Sarah Goad. The award was officially received on behalf of the volunteers by Eldon Sandys, well known at St Peter's as a key member of the ward trolley team.

The event was held in the conservatory at Painshill Park, generously donated at no cost by the Park, with around 150 of our 380 volunteers attending. We were also joined by a number of our local Mayors, Deputy Mayors and other local VIPs. We were particularly pleased to welcome Jonathan Lord, MP for Woking, who had officially supported our nomination for the Award.

The afternoon was hosted by Aileen McLeish who paid tribute to the dedication and hard work of our volunteers in their many different roles. I would just like to add my thanks and appreciation to Julie Addison, our Voluntary Services Manager, who has helped the service develop significantly over the last few years, introducing new volunteer roles such as our Hospital Guides, and who personally championed this nomination. We learnt from Dame Sarah that it's these kinds of developments that assessors look at when making such awards and that was what really marked us out.

### **National Hip Fracture Database**

Latest figures from the National Hip Fracture Database Report for 2012, published earlier this month, show that once again Ashford and St Peter's is one of the best Trusts in the country for treating patients with hip fractures. The national database is a way for Trusts to record data on how they are performing - for example how quickly patients go to surgery, access to specialist staff and treatment, how long patients spend in hospital - which is then compared at a national level so we can all measure and improve our performance.

We were the top Trust nationally in terms of meeting the nationally agreed set of care standards for hip fractures, which contribute towards us receiving higher payments (known as the Best Practice Tariff, a quality linked payment). The care given to 88% of our hip fracture patients meets these exacting standards, which is the highest percentage in the country. We were also reported as the second best Trust nationally for operating on patients

with hip fractures within 36 hours of admission, at 88% compared with a top rate of 90% and a national average of 67%.

### **Shadowing Speech and Language Therapy Team**

Together with Aileen McLeish, I recently spent an afternoon shadowing and assisting the Speech and Language Therapy (SALT) team as part of the Board's "back to the floor" programme. This included taking part in a voice therapy session with Head of SALT Lucy McGill and helping the team on Holly and Cedar wards and MAU. In particular I accompanied Therapist Fiona Anderson who was undertaking a swallowing assessment before helping out with writing and displaying eating and drinking plans for the patients.

Most ward referrals for SALT are to assess swallow function and provide help with eating and drinking for patients who are unable to swallow or stop liquid going down their breathing tube. The team also look after people with communication difficulties, often after a stroke. This was a very informative afternoon and well received by the staff within the team as well as by our patients.

### **Patient Environment and Action Team Scores**

Both Ashford and St Peter's Hospitals have once again received excellent results in the recent 'Patient Environment and Action Team' inspection, known as PEAT. The inspection takes place every year and looks at the quality of non-clinical services provided by all NHS hospitals – in the categories of environment (including cleanliness), food, privacy and dignity.

	<b>Environment</b>	<b>Food</b>	<b>Privacy and dignity</b>
<b><i>St Peter's Hospital</i></b>	Good	Excellent	Good
<b><i>Ashford Hospital</i></b>	Good	Excellent	Excellent

The PEAT inspection involved a small team of patient representatives, a Non-Executive Director and staff from the Trust who visited areas within each hospital between January and March. The team allocated scores, ranging from 1 (unacceptable) to 5 (excellent) for each category, looking specifically at food, cleanliness, infection control and the general patient environment (including bathroom areas, décor, lighting, floors and patient areas).

### **Research and Development Open Day**

On Friday 14<sup>th</sup> September, the Research and Development department held an open information afternoon for patients and the public at Ashford Hospital. Presentations were given by consultants and research staff to illustrate the range of work that takes place. Research and development plays a hugely important role in the development of medicine and clinical treatments, and Ashford and St Peter's continues to have a wide involvement in a number of clinical trials and research projects.

### **Epsom Transaction**

We continue to progress our work on the Epsom transaction, through nine key workstreams:

- Clinical assurance
- Clinical design and quality
- Clinical operational performance
- Communications and engagement
- Corporate governance and assurance
- Estates and facilities
- Finance and commercials
- Technology informatics
- HR and organisational development

This is a challenging and complex process and there are two specific areas we are focusing on at the moment before we make our full submission to Monitor. The first is to engage further with the new clinical commissioning groups as they develop their future

commissioning plans. Secondly further clarification is needed on how various elements of the split of Epsom and St Helier hospitals will be managed, in particular the finances.

Work is also progressing well on the wider implementation plan, and we have recently launched a transition website for staff to keep them up to date with developments with a similar site expected to launch shortly to the public. A wider stakeholder engagement campaign is being planned for later in the year.

### **Innovation Fund**

Earlier this year we announced an Innovation Fund to allow us to invest in good ideas to improve the quality and productivity of our services. We are looking for innovations that need initial investment to be implemented in 2012/13, that:

- Improve quality – with measures to identify this
- Improve productivity and/or reduce costs – (aim – double the value of the pump priming in a full year).

The Fund has attracted some good proposals which are being implemented as follows:-

- Reducing catheter associated infections – 2 handheld ultrasound units - staff are now purchasing the units
- Blanche Heriot patient survey (sexual health service) - this is being launched in September
- Patient controlled epidural anaesthesia to Labour Ward - staff are being trained in using the equipment and the pilot will start in October
- 2 transcutaneous bilirubinometers (measures jaundice) - these are now being purchased
- Goal directed therapy for high risk surgical patients – (2 monitors and consumables for 1 year) – now being piloted

Another group of proposals are having their Business Cases prepared and will go to the Trust Executive Committee for approval at the end of September:

- Oxygen therapy for diabetic foot users
- Orthodontic therapists
- Musculo skeletal CATS (clinical assessment and treatment service)
- Mobile flexible sigmoidoscopy service (minimally invasive way of examining the large intestine using a type of scope)

Finally, we are also considering three new proposals -

- Extending the stroke therapy service to 6 days per week as a pilot
- Voice recognition for A&E imaging which should help to improve reporting turn around times
- Creating an interventional pain treatment suite at Ashford - thus taking the service out of main theatres.

The scheme shows that staff have excellent ideas about how they can innovate in their services and achieve better services for their patients. I have been really pleased by the interest shown in the scheme.

### **New Consultant Appointments**

This month we made the following new consultant appointments:

- Mr Shashidhar Irukulla – Upper GI and Bariatric Surgeon
- Dr Giancarlo Camilleri and Dr Rajib Dutta – Anaesthetic/Chronic Pain Consultants
- Dr Santosh Pradhan – A&E Consultant
- Mr Andrew Cruise – Consultant in ENT (Ear, Nose, Throat)
- Dr Jan Coebergh – Consultant Neurologist
- Dr Muhammad Kashif Mansoor – Consultant Neurophysiologist

## Meetings and visits

I presented and welcomed new staff at our monthly induction meeting at Ashford Hospital, and also attended our Employee Partnership Forum. I have also visited immunology, virology and blood science staff and have been assisting our speech and language therapists as part of the Board's '*Back to the floor*' programme. I have also spent a morning with our Health Informatics department. As part of our Emergency Care Pathway staff engagement programme I have attended several sessions with staffing different areas across the hospital.

I attended a quarterly informal meeting with our Non-Executive Directors and also took part in a Board development day. I attended the quarterly public Council of Governor's meeting and was part of the interview panel for a new Anaesthetic/Chronic Pain Consultant.

Within North Surrey I have attended some of the weekly capacity meetings and have had meetings/teleconferences with Sarah Mitchell from social services, Nick Moberly, Chief Executive of The Royal Surrey County Hospital, Anne Walker, Chief Executive of NHS Surrey, John Omany, Medical Director at NHS Surrey and Alison Edgington from Surrey Community Health. I have also met Julia Ross, the new Chief Accountable Officer for the North West Surrey Clinical Commissioning Group. I have also had meetings with Cally Palmer from The Royal Marsden, Bart Johnson from Virgin Care, Amanda Fadero from NHS Sussex and Nick Skellet, Chair of Surrey County Council's Health Overview and Scrutiny Committee.

I have attended several meetings in relation to the Epsom Transaction including the Transaction Programme Board, an Epsom and St Helier staff forum meeting, a Clinical Strategy Stakeholder event, a visit to the Elective Orthopaedic Centre at Epsom Hospital and a meeting with the new Surrey Downs Clinical Commissioning Group. I also presented at a public meeting on the future of Epsom Hospital which was hosted by Epsom and Ewell Borough Council.

I also attended NHS Surrey's Transformation Board with other Surrey Chief Executives and the Surrey and Sussex NHS Commissioning Board's Local Area Team engagement event. I also went to the Kent Surrey Sussex Academic Health Science Network workshop.

Aileen McLeish and I had a meeting with Idrees Iwan regarding the Hashim Welfare Hospital in Pakistan (a charity the Trust has supportive links with) and with Roberto Tambini, Chief Executive and Liz Borthwick of Spelthorne Borough Council.

**Submitted by:** Andrew Liles, Chief Executive

**Date:** 17<sup>th</sup> September 2012