

TITLE OF MEETING
28th July 2016

AGENDA ITEM NUMBER	4.2
TITLE OF PAPER	Chief Executive's Report
Confidential	NO
Suitable for public access	YES
PLEASE DETAIL BELOW THE OTHER SUB-COMMITTEE(S), MEETINGS THIS PAPER HAS BEEN VIEWED	
STRATEGIC OBJECTIVE(S):	
Best outcomes	√
Excellent experience	√
Skilled & motivated teams	√
Top productivity	√
EXECUTIVE SUMMARY	Highlights from the month
RECOMMENDATION:	To note
SPECIFIC ISSUES CHECKLIST:	
Quality and safety	No
Patient impact	Positive impact on patients
Employee	Skilled, motivated teams
Other stakeholder	No
Equality & diversity	No
Finance	No
Legal	No
Link to Board Assurance Framework Principle Risk	No
AUTHOR NAME/ROLE	Anna Scott, Communications Manager
PRESENTED BY DIRECTOR NAME/ROLE	Suzanne Rankin, Chief Executive
DATE	20 th July 2016
BOARD ACTION	Receive

(PLEASE REMOVE ITALICS IN THE BOXES ABOVE – FOR INFORMATION ONLY)

#RightCulture

On 29th June I attended our first ASPH Quality Improvement (QI) Event, with a theme of 'Supporting a Culture of Curiosity and Creativity'. Over the past year we've made some great progress in our approach to quality improvement and the event was an opportunity to celebrate these successes; with staff presenting their QI projects, experiences and lessons learnt.

The day had a varied and full agenda, with some fantastic presentations from colleagues of different professional backgrounds, working in many different areas of the Trust. It was really encouraging to see people coming together in this way and the leadership skills they displayed in owning and solving problems that were getting in the way of good patient care.

We also held a poster competition, which was won by Foundation Year 1 Doctor, Kiran Devgun, for her work on the 'Junior Doctor Guidelines Smartphone App', which is a fantastic initiative.

Overall, the event had a great 'buzz', with real energy and enthusiasm. It highlighted how a few simple quality improvement skills, together with some support, can help make significant changes. This approach of encouraging and supporting people to share their ideas and take ownership of them is at the heart of developing #RightCulture, and the event was a good reminder of how far we've come and also the opportunities ahead of us.

Best Outcomes

Stroke Services

Following a Surrey-wide stroke review by commissioners, plans are being developed to improve stroke services across the county, working closely with clinicians, patients and groups such as the Stroke Association. The current proposal is to have three hyper-acute (specialist) stroke units across the county, with one unit serving the population of West Surrey. The preferred option is to concentrate stroke services for West Surrey at St Peter's Hospital and we have worked with our colleagues at the Royal Surrey County Hospital in coming to that conclusion.

Concentrating the most specialist stroke care and treatment in one larger unit will provide the critical mass and clinical expertise needed to make a real difference to outcomes for patients; saving lives and reducing longer-term complications. The development will see continued and strengthened partnership working with Royal Surrey County Hospital and we will be consulting patients and local stakeholders on these proposals over the coming months.

Older Person's Short Stay Unit

It was great to learn about the success of our Older Person's Short Stay Unit – Cherry Ward – in terms of length of stay for our elderly patients. The unit was established last year to specifically care for patients over the age of 75, who often come into hospital with complex health issues. The multidisciplinary team of doctors, nurses and therapists on Cherry Ward identify appropriate patients early – in A&E and our assessment areas – so a comprehensive geriatric assessment, looking at all of their needs, can be carried out. This enables better care planning for the duration of their stay in hospital and ensures any necessary support at home can be arranged in advance, before discharge.

Between December 2015 and May 2016, 5186 patients over the age of 75 were admitted, with an average length of stay of 7.55 days. This is a great improvement compared to the previous year (December 2014 to May 2015, where 5253 patients were admitted with an average length of stay of 9.30 days).

SAFE Test

Our maternity team are now offering a new, non-invasive prenatal test, known as 'SAFE', which evaluates with remarkable accuracy whether a pregnancy is at risk of certain chromosomal conditions – Down's, Edwards or Patau's syndrome.

The current combined test (a blood test and measurement of the fluid at the back of the baby's neck during the dating ultrasound scan) is still available to all women between 10 and 14 weeks of pregnancy. Previously, if this test revealed a 'higher risk' result and the woman wanted to know with certainty, they would be offered an Amniocentesis or Chorionic Villus Sampling (CVS) – both of which are invasive tests involving passing a needle through the mother's abdomen and carry a small (1%) chance of miscarriage.

Being able to now offer women with higher risk results the new SAFE test is an excellent development for our maternity service. It is a simple blood test that looks at the baby's DNA in the mother's blood, to predict with 99% accuracy whether the baby is affected by one of these conditions. It saves women for having to make the difficult decision of opting for an invasive test that carries a small chance of miscarriage, or to spend the rest of their pregnancy waiting and worrying.

Corneal Cross-linking Procedure

Our Ophthalmology team has started a new service, known as 'Corneal Cross-linking'. The procedure is used to treat Keratoconus, a condition which leads to progressive bulging and thinning of the cornea (the transparent layer forming the front of the eye) and ultimately to a deterioration in vision. We are the first Trust locally to offer this procedure on the NHS and Consultant Ophthalmologist, Mr Vinod Gangwani, treated the first patient last September.

Keratoconus is a condition which usually starts in young people, during their teenage years, and gets worse with age. As the condition progresses it leads to scarring and a loss of transparency of the cornea; affecting the ability of the eye to focus properly (astigmatism) and resulting in poor vision. In advanced cases a corneal transplant may be required, which comes with associated risks and complications. The new Cross-linking procedure, which can be performed as a short day case, is designed to stop the condition worsening by strengthening the cornea. It's effective in nine out of ten patients and is an exciting development for our ophthalmology service and these young adult patients.

Excellent Experience

Forget-Me-Not Scheme

I was pleased to learn that the Forget-Me-Not Scheme is now up and running on our wards, to help staff identify and provide better care to patients with memory difficulties. The blue flower symbol of the forget-me-not is placed above the patient's bed or on their information board to

help staff recognise when someone is experiencing memory problems or confusion. This allows them to make more time when communicating with patients who have difficulty understanding information and offer additional help, or support with tasks when needed, such as eating, drinking, going to the toilet and being accompanied off the ward. It also provides reassurance to the families of these patients that we are providing the right care and support.

Adopt a Grandparent Scheme

I have been really impressed to see the way our Adopt-a Grandparent scheme has taken off and to hear some of the positive comments from staff taking part and helping out on the wards. This is a great initiative, established by Junior Doctor Chris Marsh, calling on staff to take half an hour out a week to visit a ward and spend time chatting with patients. Dr Marsh came up with the idea after working on Maple Ward with predominantly older patients and realising the benefit social interaction and stimulation can provide them with. It's heartening to see our non-clinical staff and clinical-staff working alongside each other in this way and the benefits to our patients that a simple chat can bring.

Skilled, Motivated Teams

Staff Friends and Family Test

Our most recent results show that 88.5% of staff would recommend the Trust as a place to be treated and 78.5% of staff would recommend the Trust as a place to work. We received some really positive feedback around our staff working hard and feeling there is a good sense of team spirit; as well as comments that people see their colleagues as compassionate, dedicated and committed. Some staff commented they feel under pressure operationally and also that there needs to be better communication between departments. It's always really useful to have this overview of how our colleagues feel and also where we need to make improvements.

Launch of new Manager's Toolkit training programme

We are launching a new training programme for our managers this month – aimed at those who are new to managing people, have not had formal training in management skills, or are looking for a refresher. The programme is broken down into different modules, such as people management skills, managing performance capability and managing disciplinary issues. Managers are able to pick and choose the modules they feel will be of most benefit to them and I look forward to hearing how the programme is working.

Mental Health First Aiders

Our health and wellbeing team are currently recruiting staff volunteers from across the Trust as mental health first aiders. They will receive two days of training and become a point of contact for all staff, and managers, who feel they need any help or support with mental health issues. Primarily they will provide a friendly, listening ear and I think this a really positive development in terms of the emotional and mental wellbeing support we offer at the Trust.

Congratulations to Sandra Chinyere

Well done to Sandra Chinyere, Clinical Service Manager for Neurophysiology, who has been selected as one of four inspiring female healthcare scientists for NHS England. Sandra was chosen out of 60 applicants to receive the first Chief Scientific Officer's 'Women in Science and

Engineering Fellowship scheme 2016'. The Fellowship aims to develop the next scientific leaders of the NHS and also to inspire and encourage more women to study science, technology, engineering and mathematics subjects. It is also a great opportunity to showcase the vital role of healthcare scientists and to attract much-needed trainees into the field.

Top Productivity

eMR Launch

Our move to electronic medical records continues to be successfully rolled out across the Trust. Breast was the first service to successfully begin using Evolve in May. More recently all inpatient notes have been scanned when the patient is discharged, ready for the electronic version to be used in their follow-up clinic appointment. Alongside this, the team have been busy overseeing the scanning of other notes from medical records, ready for their 'Hop' stage – where 33% of all clinics will start using Evolve from the 9th August. I'm pleased to hear the project is being rolled out successfully and managed so well by the eMR team.

Clinical Coding Centre of Excellence

I was really impressed to learn that our clinical coding service was recently accredited as a centre of excellence by the Clinical Classifications Service (CCS). They have become a Coding Academy – one of only three centres across the country; recognised as centres of excellence for the application of standards and for training. Clinical coding is a highly specialised skill and is the way we translate the clinical activity that happens at ward level onto paper. Accurate coding means we are paid correctly by our commissioners and can ensure clinical performance and outcomes are measured accurately. Becoming an academy will open a lot of doors for our coding service and is a great achievement.

Sustainability and Transformation

I have previously outlined the Surrey Heartlands Sustainability and Transformation Plan and lots of collaborative work has continued. Together with our Surrey Heartlands partners we have now submitted our initial thoughts to NHS England. We will now move to developing more detailed plans, engaging with colleagues, local residents and other stakeholders for consideration later this Autumn.

As I have also said previously, following the announcement that our merger plans with Royal Surrey County Hospital are paused, NHS Improvement has now undertaken an investigation and as agreed we will now review the implications together before making a final decision.

