Ashford and St. Peter's Hospitals NHS Foundation Trust

COUNCIL OF GOVERNORS
5th September 2018

TITLE	**Assurance Report**
EXECUTIVE SUMMARY	The Assurance report gives an overview of some of the key areas of internal focus for the Trust and areas of performance in terms of its five strategic objectives: 1. Quality of Care 2. People 3. Modern Healthcare 4. Digital 5. Collaborate As well as operations and finance. The report seeks to provide assurance that activities within the Trust are focused on the delivery of excellent care and achievement of the constitutional standards.
The Council is asked to:	Note and review the report.
Submitted by:	Suzanne Rankin, Chief Executive
Date:	September 2018
Decision	For assurance

1 INTERNAL FOCUS

1.1 #Right Culture

Schwartz Round

I attended one of the recent Schwartz Rounds, which is an opportunity and safe space for colleagues to share and reflect on their experiences of caring for patients. This particular session focused on the impact and emotional responses that healthcare professionals operating at all levels have to critical incidents, in this case cardiac arrest.

I felt privileged to hear the stories and reflections shared and it made me reflect and remember what I felt like in similar situations as a student nurse some years ago. Clearly ensuring that colleagues have the opportunity to talk about situations and share their emotions is an important component of creating the #RightCulture and I would encourage all colleagues to find time to attend a Schwartz Round although just checking in with colleagues to see how they are goes a long way in situations like these.

Freedom to Speak Up Guardians

Recently I refreshed and re-circulated the message to colleagues about the Freedom to Speak Up Guardians. Describing how we are working towards a safe and open culture where colleagues feel comfortable and confident, speaking up about any concerns they may have around patient care and safety. The Freedom to Speak Up Guardians are one of the mechanisms for achieving this. The Guardians are Jacqui Rees, Head of Regulation and Patient Safety Improvement and one of the Non-Executive Directors Keith Malcourone and details of the support they can offer is on Trustnet. What has been positive to see is colleagues across the Trust using the message to reinforce and support work they are doing with their teams to promote a safety positive culture.

1.2 Quality of Care

CQC Inspection

We underwent a full routine Care Quality Commission (CQC) inspection with the final stages of the inspection regime completed in July.

We value these visits, even though they can be an anxious time for colleagues, as it is reassuring for patients and local stakeholders to have independent assurance on the quality of care we are providing. It's also a great opportunity for members of the team to showcase the approach we have adopted to continuous improvement and we encouraged colleagues to be open, honest and proud as we progressed through the different aspects of this rigorous inspection.

On 6th July NHS Improvement undertook the Use of Resources review, which contributes to a combined inspection assessment from both the CQC and NHSI reflecting how effective and efficient the Trust is.

Following this, on 10th & 11th July the final phase of the inspection took place – the 'Well-led Site Visit'. Over the course of the two days the CQC Inspectors met with many colleagues – all of the Executive team, the Chairman, some Non-Executive Directors and other senior managers. They also took the opportunity to visit departments and clinical areas and hear from colleagues on the front line.

Initial feedback from the inspection team was good; they particularly praised our openness and

warmth and recognised our culture was totally patient centred with our values at its heart. They also noticed that even though our strategy is newly launched, it was bedding in well and clearly resonated with members of Team ASPH.

Next steps are for the CQC to continue their review and triangulation of their findings offsite; we expect their full draft report to be issued in September.

Mass Casualty Exercise

We recently participated in the Public Health England's (PHE) Mass Casualty Exercise. This was a joint exercise across the South West London and Surrey Trauma Network so involved multiple organisations; St George's Hospital as the Major Trauma Centre, ourselves and six other trauma units, London and South East Coast Ambulance Services, NHS England, CCGs and Police.

The scenario was a shooting and bombing incident in a nearby location and we were able to test our trauma responses and command and control procedures as we received simulated casualties. The exercise was made more dynamic with the help of live casualty actors – with some amazing make-up and prosthesis to make their injuries look incredibly realistic.

Throughout the morning there was a fantastic response from all departments - including; senior clinicians, specialities (Emergency Department, Surgery, Orthopaedics, Paediatrics, Pathology, Radiology, and Pharmacy) as well as Communications and Loggists - who all joined together, to produce an excellent, coordinated team response.

This type of exercise helps us to test the readiness for a real Major Incident and I'd like to thank the Head of Emergency Planning & Resilience, Claire O'Brien and her team for all their hard work in organising this successfully and providing the opportunity to secure a great learning opportunity.

Infection Prevention and Control

You may recall a few years ago the national campaign and drive to eradicate MRSA across the NHS which was hugely successful. Nevertheless, the prevention of infection remains an incredibly important element of providing high quality care. We are not complacent and so we continue to strive towards eradicating other infectious disease at the Trust which has included recently:

- **Reducing Surgical Site Infections**

Winner of the poster competition at the Annual Quality Improvement (QI) Event (which I talk about below) was one of the amazing QI projects led by consultants Richard George and Christopher Gee looking at reducing Surgical Site Infection (SSIs) in Hip Fracture Patients. This work has led to the development of new guidelines for the prevention of SSIs in these patients and there have been no new SSIs since August 2017. The team are keen to share and spread their work to other surgical specialties in the next few weeks.

- **Successful Audit of Sterile Services**

Our Sterile Services department was recently audited by their notified body (SGS UK Ltd) to ensure compliance to the Medical Devices Directive. The audit was also extended to include transition and compliance to the some new systems and standards.

The outcome was excellent with only one minor corrective action and the best result ever achieved by the team. The auditor commented that the internal audit programme led by the department's Quality Management Officer and a team of technicians was excellent and observed

the whole team performing their duties to a high standard.

This is a tremendous achievement for all the Sterile Services team who provide a 'behind the scenes' but vital service for our patients.

- **Hand Hygiene Awareness Day**

Back in May the Infection Control team organised a successful Hand Hygiene Awareness Day – particularly focusing on the importance of proper handwashing to prevent the spread of Sepsis. They made this impressive video highlighting the key messages, experiences and photos from the day.

1.3 People

The first week of July was one of great festivities across the Trust, with lots of activities taking place to recognise the 70th anniversary of the NHS on 5th July. It was wonderful for us to celebrate the achievements of TeamASPH and wider NHS colleagues and the huge contribution the NHS has made to the health and wellbeing of the Nation over the past 70 years. Whilst giving an opportunity to reflect on the past it was also time to consider the future and thus the recent launch of the ASPH Together We Care Strategy was very timely.

Activities included burying our very own time capsule as we were joined by colleagues, volunteers, Deputy Mayor of Runnymede Cllr Parshotam Sohi, children from First Steps Day Nursery (on site at St Peter's) and Magna Carta Secondary School, as well as planting a pear tree recognising the invaluable contribution of our volunteers.

On the day itself we were joined by BBC Surrey and Sussex radio at both Ashford and St Peter's Hospitals, interviewing many colleagues, patients and visitors about their experiences of the NHS and ASPH.

In the afternoon Duncan Spring, OCS Catering Manager and I had the tough job of judging the ASPH Bake-off. The cakes were then served to colleagues at St Peter's as part of a special NHS 70 Afternoon Tea Party. The Ashford team enjoyed their NHS 70 Coffee Morning earlier in the day, with a breakfast buffet kindly donated by Tesco Ashford.

Throughout the week there were many other festivities – amazing performances by the ASPH choir, children in our nurseries dressing up as doctors and nurses for NHS themed parties, a service of thanksgiving in the Multi-Faith Centre, colleagues attending special services at York Minster and Westminster, parties and music on our wards for colleagues, patients and visitors. Some of colleagues were also featured in the Surrey Advertiser's special feature – https://www.getsurrey.co.uk/news/surrey-news/70-heroes-surreys-nhs-celebrating-14862296

EID Celebration

On Tuesday 26th June colleagues organised an Eid-al-Fitr celebration, following the end of Ramadan. It was lovely to see colleagues from all over the Trust come together – those of faith and those of non – to share the festivities.

There was great attendance and colleagues enjoyed a delicious buffet of curries, joined also by Cllr Iftikhar Chaudhri – previous Mayor of Runnymede and a great supporter of the Trust. A special thank you to Farhana Nargis, Amara Hamid and Pami Bains for organising everything – the decorations, food, cake and photography all looked wonderful.

ASPH Rounders Annual Tournament

After many matches, fun and team bonding the second ASPH Rounders Tournament drew to a close on 12th July. It was a close final but the Gastroenterology team – 'Put your Belly on the Tele' pipped the Respiratory team – 'Sputum Plugger' to the post and are the proud recipients of the 2018 trophy.

It's great to see social activities like this taking place and they are definitely growing in popularity at ASPH. On the rounders pitch everyone is equal and it's just a good opportunity to get out in the fresh air, do something fun with our colleagues and blow off steam. Thank you to Heather Bixley, Organisational Development Advisor, for organising this again and I look forward to the 2019 tournament where once again I will test my batting and catching skills!

Stepping into Health

I was delighted to join Andrea Lewis and other colleagues at the 'Step into Health' event on 2nd July at St Peter's Hospital, a careers event aimed specifically at armed forces personnel, veterans and their spouses who are looking to transfer to alternative careers.

With my Royal Navy background and Andrea's past Army career we have been working together on this initiative as we are passionate about the programme which connects employers in the NHS to people from the Armed Forces community. For many, leaving the Armed Forces is a daunting prospect but as we both know so many of the skills are transferable to the NHS and it's really important we work together to highlight the opportunities available and boost recruitment.

We had a good turnout at the event and a number of follow-ups by prospective future team members on which we will keep you posted.

1.4 Modern Healthcare

Get It Right First Time (GIRFT)

I was privileged to be invited to talk at the 2018 NICE Conference in June, with Professor Tim Briggs CBE Chair of the GIRFT Programme, about ASPH's strong commitment to the principles of the GIRFT Programme and how we have been successful in implementing the approach across a number of specialties. I received great feedback and many delegates wanted to hear more about how ASPH learned to GIRFT.

We have also had further visits by the regional team visiting a number of other specialties including ENT and Urgent and Emergency care where more opportunities to get it right first time for patients were identified. Feedback was very positive with the team commenting that we are more advanced in our implementation than most other local trusts.

Annual Quality Improvement Event

I was delighted to attend the third annual Quality Improvement event at St Peter's on 27th June. Throughout the day there were some fantastic presentations from teams who have been working together to improve their services and the quality of care we provide, through the application of quality improvement methods.

Dr Emma Wilkinson spoke about the work led by the Senior Adult Medical Services multi-disciplinary team to embed the 'What Matters to You?' initiative and provide more individualised care for elderly patients. Dr Nazia Rashid presented the work that the diabetes team are leading to improve safe use of insulin and empower patients through self-administration of medication in our hospitals. Dr Richard George shared the improvement work which has been carried out by a

multi-disciplinary team to reduce post-surgical infections for patients with fractured neck-of-femur.

There was also a poster competition – won by Dr Richard George and colleagues – as well as World Café break-out sessions on a variety of subjects.

I spoke towards the end of the day and was really impressed with the enthusiasm and buzz in the room. The overall theme was 'Keep Improving, Keep Learning' and there was certainly plenty of food for thought on sharing the learning when things go right and when they go wrong – it's the only way we can continuously improve.

ASPH Dragon's Den

On 22nd June we held the first ASPH Dragon's Den event, where 27 short-listed bids were presented by teams from across the hospitals. I was delighted to be one of the 'Dragon's, alongside other Executive colleagues on the panel. Colleagues came up with some very innovative ways of presenting their bids – with many dressing up, using props and even performing a specially written rap. There was also some good sport between the dragons – competing with each to become the sponsoring executive!

This was a superb event, overseen by Director of Operations, James Thomas. It gave everyone an equal chance of putting their ideas forward – ideas that continue to turn our vision of providing an outstanding experience and best outcomes for patients and the team, into reality.

Some of the ideas included folding beds so relatives can stay close to patients at the end of their lives, digital apps to support voice therapy and many ideas to deploy technology to support patients, reduce boredom and improve care. All the pitches were successful and we were so impressed with the creativity, innovation and team work shown.

1.5 Digital

WIFI Upgrade

The WIFI replacement programme has been taking place throughout June and July, the installation of the cabling is now complete and configuration will be complete by the end of July. This will be a real boost to our digital systems, ensuring staff are able to take full advantage of mobile technology, such as using tablets to view patient records on Evolve, record vital signs on digital devices and record the birth of a baby using the new BadgerNet maternity system. Patients will also benefit as the new technology has much improved bandwidth and will support the use of their own devices.

1.6 Collaborate

Annual Members' Meeting

On 17th July we hosted a very successful Annual Members' Meeting, with around 100 attendees. The Chairman, Andy Field, opened the evening, followed by presentations from Andrew Ryland, Lead Governor, myself and Simon Marshall, Finance Director.

This was followed by a presentation from Tom Smerdon, Director of Operations, Dr David Fluck, Medical Director and Dr Jonathan Robin, Co-Divisional Director for Medicine and Emergency Care about the plans for urgent care in the future. In particular, the plans to build a new Urgent and Emergency Care Centre where the A&E is currently situated, using funds raised from the sale of the West Site. The audience were clearly interested and engaged with this, with several people expressing an interest in becoming more closely involved in the planning process – great news, as we are really keen to work with patients and the community and stakeholders to get it right.

Thank you to everyone who made the evening such a success – particularly the Membership

Manager, Anu Sehdev.

Integrated Care Partnership (ICP)

Over the last month good progress continues to be made in the North West Surrey Integrated Care Partnership. Partners have come together to start to plan the future model of care for the system, and a further series of workshops involving both clinicians and local people are planned for the autumn.

Alongside this, other important developments in the system are taking place and will inform the future model. This includes extended access to primary care services delivered by North West Surrey Integrated Care Services (NICE) – the local GP Federation including all 40 GP practices in North West Surrey.

From late August, additional primary care appointments will be available within extended hours (weekday evenings and weekend mornings) seven days a week, 52 weeks a year. Initially providing c.350 GP appointments a week rising to c.750 from October. This will also include nurse led and phlebotomy appointments, as well as physio assessments to reduce the pressure on primary care and in particular the GP workforce. This is clearly excellent news for us, in terms of improving access to primary care for local people and managing demand on the urgent care services.

Surrey Heartlands – New Diabetes Service

An exciting new diabetes service for people with diabetes having an elective procedure at ASPH, Royal Surrey County Hospital and Epsom Hospital has been launched. New Integrated Diabetes Specialist Nurses, funded for two years through Surrey Heartlands transformational funds, will work to provide guidance on diabetes management and to optimise control of the diseases prior to their procedure.

It is hoped the service will reduce the length of stay for the patient and risks around medication errors and hypoglycaemic events. The integrated nature of this role will also improve communication between primary and secondary care.

Preparation for European Union Exit (Brexit)

Much debate in the media continues around the negotiations to agree the basis for the UK's exit from the EU and in particular the likely impacts on the NHS of the various exit scenarios.

Work to generate plans and mitigations continues and technical guidance was issued to all NHS organisations 23rd August 2018 by the Department of Health and Social Care. The Trust is in the process of reviewing the guidance and implications in order to generate the necessary assurance.

Governors can be assured that the Trust remains proactive in assessing the risks and implementing plans.

2 PERFORMANCE

2.1 Details of our operational performance including A&E are included in the separate report – Paper 7.2.

2.2 2018/19 Financial Position - Month 4 Position

The month 4 financial position showed that the Trust was £0.3m behind plan, with the table below setting out the key metrics:

Finance Scorecard					
	Annual Plan (Incl PSF)	Forecast (Incl PSF)	YTD Plan (Incl PSF)	YTD Actual (Incl PSF)	YTD Variance (Incl PSF)
NHSI Finance Score Rating	1	2	1	2	
Total income excluding interest (£000)	£305,055	£309,724	£102,038	£102,618	£580
Total expenditure (£000)	£280,298	£285,675	£93,665	£94,520	(£855)
EBITDA (£000)	£24,757	£24,049	£8,373	£8,098	(£275)
I&E net operational surplus/Deficit (£000)	£13,043	£12,396	£3,915	£3,577	(£338)
Month end cash balance (£000)	£31,095	£31,095	£35,223	£33,412	(£1,811)
Capital Expenditure Purchased (£000)	£19,360	£19,401	£3,040	£1,396	(£1,644)
CIP Savings achieved (£000)	£10,500	£9,764	£3,328	£2,790	(£538)
STF Funding within income £000)	£10,789	£10,142	£2,337	£2,121	(£216)
CQUINs (£000)	£4,424	£5,239	£1,475	£1,746	£272

NHS Improvement "Finance Score Rating "					
	Weighting	Current	Current Score	Forecast (incl PSF)	Forecast Score (incl PSF)
Capital Service Cover	20%	2.98x	1	2.95x	1
Liquidity	20%	25.4	1	22.6	1
I&E Margin	20%	3.50%	1	4.10%	1
I&E Margin Variance From Plan	20%	-0.20%	2	-0.20%	2
Agency	20%	37.11%	3	26.39%	3
Finance Score Rating			**2**		**2**

The key points are: -

- Clinical income from CCG's and NHS England activity was £0.4m ahead of plan mainly in day cases and elective surgery, critical care and drugs. Other income streams (non-NHS activity and other income) were £0.2m ahead of plan, mainly due the overseas and private patient income;

- Other income also includes the Provider Sustainability Fund (PSF) income, formerly Sustainability and Transformation funding (STF). The full year allocation for 2018/19 is £10.8m which is again on a phased quarterly basis. The trigger to accessing the funds is by meeting the year to date financial Control Total each quarter which generates a 70% payment. The remaining 30% is attributable to A&E performance against agreed quarterly trajectories. Whilst meeting all quarter 1 targets, it is now unlikely that the quarter 2 A&E trajectory will be met. This will mean a loss of £0.6m of A&E PSF for the quarter, £0.2m of this loss is accounted for in the month 4 results;

- Pay costs are £0.2m under plan at month 4 with temporary staffing costs (bank, locum and agency) at £9.9m, which is £1.8m higher than at the same point last year. There are significant vacancies within the Trust that is driving the temporary staffing spend. Year-on-year there has been a £0.9m increase in agency costs and the Trust is now £1.2m over the agency spend cap set by NHSI for 2018/19;

- Non-pay costs were £1.1m above plan, mainly in outsourcing (£1.1m); drugs (£0.5m),

partially offset by being under budget on clinical supplies (£0.6m). Most of the drugs overspend is recovered through excess pass through income;

- Cost improvement plans are currently behind plan by £0.5m with delays to the start of some schemes. Whilst not uncommon at the start of the new financial year, there is focus on recovering this position;

- Capital is currently behind plan by 54% (£1.6m) mainly due to delays in scheme business cases and approvals and slippage in other schemes;

- Cash balances were £1.8m lower than planned but sat at £33.4m at the end of July. All outstanding STF income from 2017/18 has now been received; and

- Overall performance shows that a surplus of £3.6m has been delivered to date with £1.5m being operational delivery and £2.1m of earned PSF income. This is £0.3m behind plan of which £0.2m is due to the loss of quarter 2 A&E PSF income. As a result of the I&E variance and the excess agency expenditure, this performance delivers a Finance Score Rating (FSR) metric of 2 at month 4, against a plan of 1.

Forecast

Cost saving targets, which are budgeted at £10.5m for the full year, are currently projected to come in £0.7m behind plan with additional savings being sought to meet projected shortfalls.

The capital programme is still forecast to be on plan for the full year, however a detailed review is being carried out to report to September Committee meetings.

At the end of month 4 the Trust is forecasting a surplus of £12.4m which includes £10.1m of PSF income. This is £0.6m below plan due to the forecast loss of quarter 2 A&E PSF income. This forecast would deliver an FSR of 1.

When the Trust set its budget for 2018/19 it was recognised that it was a challenging target. The plan included a breakeven operational position, £2.4m of profits on asset disposal and £10.8m of PSF. The breakeven operational delivery remains the case and the Trust is doing what it can to ensure that it achieves this for the full year.