Ashford and St. Peter's Hospitals NHS Foundation Trust

COUNCIL OF GOVERNORS			
Date of meeting	11 September 2025	**Agenda Item**	6
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Exec Sponsor	Louise Stead, Group Chief Executive	**Date submitted**	1 September 2025
Title of paper	Group Chief Executive's Update		
Presented by	James Thomas, Chief Operating Officer		
Committee(s) where paper has been discussed previously and outcome of discussion:			
N/A			

Strategic Objective(s)

Quality of Care	x	**People**	x	**Modern Healthcare**	x	**Digital**	x	**Collaborate**	x

Executive Summary

This report highlights the key areas that Governors may be asked about by their constituent members. Progress continues with our Group Model with Royal Surrey, supported by a successful Board-to-Board seminar and the first joint Council of Governors meeting. This was the first opportunity for Governors from both Trusts to meet in person, to hear more about developments to date, and to contribute to early discussions on the refresh of Trust strategies.
The final CQC report for medical care, including older people's care, at St Peter's was published at the beginning of August, and we are pleased to confirm that our overall rating remains *Good*. We also take this opportunity to reflect on the recent period of industrial action and to extend our sincere thanks to all staff who supported our patients and services during this challenging time.

There have also been important changes to the Executive Team. Ruth Colburn Jackson has been appointed as our new Group Executive Director of Transformation and Digital, and on 21 July we welcomed Hannah Hamilton as our new Chief Financial Officer.

The report also reflects on recent achievements and events, including our Community Day on 19 July, which saw more than 1,000 people visit our hospitals to learn more about the wide range of services we provide and to engage with community and partner organisations offering information and advice. We also marked Armed Forces Week and celebrated the outstanding achievement of our Neonatal Intensive Care Unit at St Peter's, which has been awarded the prestigious Level 3 Baby Friendly Award from UNICEF UK's Baby Friendly Initiative.

Finally, the report provides an overview of key system and partnership updates, including significant national developments such as the publication of the NHS Long Term Plan and the new NHS Oversight Framework.

Recommendation	For: Decision ☐ Discussion ☐ Information ☒
Key issues: State impact/implications and mitigation (detailed info should be in the report)	
Quality, safety & patient impact	

Employee	
Other stakeholder(s)	
Equality, diversity & inclusion	
Finance	
Legal	
Risk(s) Identified (include link to Corporate Risk Register / Strategic (Board Assurance Framework) Risks:	

CEO Report to the Governors

1 PURPOSE OF THE REPORT

1.1 To update Governors on key activities and key issues of relevance within the Trust.

2 INTERNAL UPDATES

2:1 Group Model

On 21 July, the Boards of Ashford and St Peter's and the Royal Surrey came together for a half-day Board-to-Board seminar at St Peter's Hospital. We heard from colleagues at NHS England on how to optimise the potential of group model working, and importantly, we began meaningful conversations about developing both Trusts' strategies in parallel, exploring areas of overlap and synergy, as well as recognising where distinct, Trust-specific approaches should remain.

On 29 July, the Councils of Governors from both Trusts came together in a similar way, meeting at the Royal Surrey County Hospital. This was the first opportunity for Governors from both Trusts to meet in person, hear more about progress with the group model to date, and engage in early discussions around the development of Trust strategies. It was a positive and engaging session, with good conversations all round.

2:2 Joint Nominations and Remuneration Committee

On 28 August, a joint working group comprising of the RSFT and ASPH Governors' Nominations and Remuneration Committees was held to discuss the process for appointing a Group Chair. In line with constitutional requirements, each Trust must run its own independent appointment process, with the option for both organisations to appoint the same individual should that be agreed. The Committees reached broad alignment on key principles for the process. The next step will be for the ASPH Governors to confirm the detailed approach to the appointment of the ASPH Chair.

2:3 CQC Inspections

Following an unannounced inspection by the CQC in March 2024, the report for medical care (including older people's care) at St Peter's has now been published. We are pleased that our overall rating remains Good.

The inspection focussed on a selection of quality statements from all five of the key criteria areas; safe, effective, caring, responsive and well-led and the report highlights several areas of good practice. Inspectors praised the safe quality of care and treatment, noting that patients consistently reported positive experiences. It is clear that patient safety continues to be a top priority across our clinical teams, with staff taking concerns seriously and responding appropriately.

Areas for improvement were also identified, and actions are already underway to address these. We thank all colleagues who supported the process.

2.4 Industrial Action – reflection and acknowledgement

The most recent period of junior doctor industrial action, organised by the British Medical Association (BMA), took place from 7am on Friday 25 July until 7am on Wednesday 30 July 2025.

This followed an ongoing national dispute over pay between the BMA and the Government, not the NHS or individual trusts.

Throughout the period, we activated a comprehensive operational plan to minimise disruption for our patients and community whilst ensuring high quality, safe and compassionate patient care continued at all times.

To prioritise operational resilience, all non-essential meetings and training were stood down, and our administrative teams worked diligently to reschedule affected elective and outpatient activity, ensuring patients were contacted promptly. Public messaging was actively managed through TrustNet, our website, social media channels, and a BBC Radio 4 interview with me to provide reassurance to our community.

Importantly, we acknowledged our colleagues' legal right to strike, reinforcing to staff and patients that this was a dispute with national policy, not with local NHS services or values. We consistently emphasised kindness, mutual support, and wellbeing - encouraging colleagues to check in on one another, take regular breaks, and access available wellbeing resources during what was an emotionally and operationally demanding time.

On behalf of the Executive Team, I would like to express our heartfelt thanks to all staff who supported our patients and services during this period. Their professionalism, resilience, and compassion were vital in maintaining safe and effective care. We were 4 also grateful to receive a letter of thanks from Sir Jim Mackey, NHS Chief Executive, and the Secretary of State for Health and Social Care, Wes Streeting, recognition we are proud to echo here at ASPH.

2.5 Trust Executive Board

The Trust Executive Board (TEB), comprising Executive and Divisional Directors from our six clinical divisions, meets weekly to review performance, operations, and strategic priorities.

We continued to receive regular updates on the progress of the current Cost Improvement Programme, alongside work to identify further schemes to close the remaining financial gap and achieve balance for 2025/26. As part of this oversight, the Trust Executive Board (TEB) has had to make some difficult decisions regarding subsidised services, such as catering and parking - seeking to strike the right balance between supporting our staff and delivering the level of in-year savings required. It is likely that further difficult decisions will be necessary, as we progress through this financial year.

The Trust Executive Board (TEB) considered the proposed capital programme for 2025/26 and has approved two business cases. The first supports the introduction of a new treatment option for urology patients with Benign Prostatic Hyperplasia (BPH), using a laser technique that can be delivered under local anaesthetic in an outpatient setting. The second will enable Ashford and St Peter's Hospitals to offer a Vacuum Assisted Biopsy (VAB) service for breast patients, providing faster and more accurate diagnoses.

2.6 Executive Updates

2.6.1 Chief Financial Officer

We are delighted to welcome Hannah Hamilton, who joined ASPH on 21 July as Chief Finance Officer (CFO).

Hannah brings extensive experience from both the NHS and the private sector having joined the NHS in 2014 through the Executive Fast Track programme. Most recently, she was Chief Finance Officer at NHS Sussex Integrated Care Board, and before that, she served as Regional Director of Finance at NHS England, where she oversaw a £17bn budget for the South East and supported delivery of national and regional priorities.

At ASPH, Hannah will lead our Finance function, Cost Improvement Programme (CIP), and Estates & Facilities portfolio. Her strategic insight and leadership will be instrumental as we continue to strengthen financial sustainability, modernise our estate, and deliver on key improvement ambitions.

I would also like to take this opportunity to sincerely thank Paul Doyle, who has provided excellent leadership as Interim CFO over the past six months. Paul's expertise, dedication, and calm, collaborative approach have been hugely valued.

2.6.2 Group Director of Digital and Transformation appointment

Following a robust recruitment process we are pleased to welcome Ruth Colburn Jackson into the role of Group Executive Director of Transformation and Digital. Ruth was successful amongst an exceptionally strong field of candidates and will start with us in September.

Ruth brings over two decades of NHS experience across strategic, operational, and digital leadership at local, regional, and national levels. She combines financial acumen with deep transformation expertise, having led complex programmes such as the national delegation of commissioning functions, large-scale IT integration in hospital settings, and major clinical service reconfigurations. Ruth has a proven record of navigating across multiple Boards, aligning organisational cultures, delivering sustainable change, and engaging a broad range of stakeholders including patients, staff, and political leaders.

Her collaborative, compassionate, and delivery-focused leadership will be a tremendous asset, and we look forward to welcoming her to our group.

3 VISITS, EVENTS, AWARDS AND ACHIEVEMENTS

3.1 ASPH Community Day

On Saturday 19 July, we welcomed over 1,000 people at our Community Open Day as we showcased the variety of services that we provide in our hospitals as well as having community and partner organisations providing information and advice. We held various tours for the public to see behind the scenes, recruitments talks, the trust charity raised much needed funds with a tea party and an amazing array of baked goods, demonstrations on our virtual reality equipment and many interactive stands. I would like to thank everyone who lent their support to make it such a success.

3.2 NICU Baby Friendly Award

The Neonatal Intensive Care Unit (NICU) at St Peter's, as the team has achieved the Level 3 Baby Friendly Award from the UK Committee for UNICEF (UNICEF UK) Baby Friendly Initiative. At Ashford and St Peter's, we set out to ensure that all mothers and babies cared for by our neonatal unit are supported to form a close and loving relationship – whatever their choice of feeding method – as this is the best start for every baby. Congratulations to the NICU team and all who supported them in achieving this award.

3.3 Armed Forces Week

This year's Armed Forces Week was 23-29 June, where we celebrated our Armed Forces personnel, past and present, staff as well as the public with an Armed Forces BBQ. We warmly welcomed Canon Peter Bruinvels, Civilian-Military Liaison Adviser and James A Thomas, Chief Operating Officer to the BBQ celebrations. A great opportunity to share stories and information on the support that is available to our Armed Forces community.

3.4 Embers of care artwork installation

A new piece of artwork has been installed in St Peter's, Level 3 Corridor (near ICU), celebrating the shared experience and contributions by international healthcare workers in the UK. As part of a national project – Embers of Care – artist and nurse, John Yayen interviewed Alex Ghica, Clinical Practice Facilitator (Urgent and Emergency Care) who shared her journey to inspire a new piece of artwork making up a series inspired by journeys from international healthcare workers across the UK.

3.5 Volunteers at Runnymede and Spelthorne Volunteers Awards

In June several of our volunteers received individual recognition as well as being collectively honoured with a special recognition award at this year's Runnymede and Spelthorne Volunteers Award. A wonderful day enjoyed by our volunteers and a great way to recognise their incredible contributions they make to our hospitals.

4 SYSTEM AND PARTNERSHIP UPDATES

4.1 Integrated Care Board Reform and Operating Cost Reductions

As outlined in my last report all Integrated Care Boards (ICBs) have been asked to use the Model ICB Blueprint to create bottom-up plans that are affordable within the confirmed national running cost envelope of £18.76 per head of population. For Surrey Heartlands this means a savings requirement of 63% against the current operating cost.

After careful consideration, the board of Surrey Heartlands concluded that the option to operate alone is not financially viable and in May they submitted a proposal to NHS England to work collaboratively with NHS Sussex. This proposal has now been approved.

They also received confirmation from NHS England that the boundaries proposed across Surrey and Sussex, which would see the Surrey Heath and Farnham areas move from the Frimley health system to the Surrey health system, have been accepted. The timelines for this are to be confirmed.

Transition work is now taking place across both ICBs to develop one organisational structure to deliver the necessary cost reductions and embed this change programme.

4.2 NHS Ten Year Plan

On 3 July, the Fit for the Future: 10 Year Health Plan for England was published.

The plan sets out a bold and ambitious new course for the NHS focused around the 'three shifts' that have been previously described – from hospital to community, from analogue to digital and from treatment to prevention.

It is based on feedback from the 'Change NHS' engagement exercise that launched last October and collated views, experiences and ideas to shape the plan. We submitted a detailed organisational response to represent Royal Surrey and in total the government received over a million insights from people and organisations right across the country.

It is clear that the plan reflects the changes people want to see and there is a detailed section on creating a workforce fit for the future. I think many will agree that in order to ensure the NHS will be there for all who need it for generations to come we need to work differently and really get behind this plan. Many things are rapidly evolving across the NHS and we are at the forefront of many developments at Royal Surrey. We are well placed to capitalise on the opportunities ahead, particularly alongside our group model partner at Ashford and St Peter's.

Our focus now will be to translate the principles of the plan to our trust strategic priorities and operating models.

4.3 Review of patient safety across the health and care landscape

Hot on the heels of the ten year plan the review by Dr Penny Dash into patient safety across the health and care landscape was published on 7 July. The review was commissioned by the Department of Health and Social Care and looked at six specific organisations that were established to either assure – or contribute to improving – the safety of care.

These are the Care Quality Commission, Health Services Safety Investigations Body (HSSIB), Patient Safety Commissioner, National Guardian's Office, Healthwatch England and Local Healthwatch and the patient safety learning aspects of NHS Resolution
.
This is a detailed report with multiple conclusions and recommendations. We will watch closely to see how these recommendations are implemented and how they will potentially impact the way we work.

4.4 New NHS Oversight Framework

NHS England has launched a new NHS Oversight Framework for 2025/26. This will be used to assess integrated care boards and NHS trusts and foundation trusts, to ensure public accountability for performance and to provide a foundation for how NHS England works with systems and providers to support improvement.

The one-year framework will assess against a range of agreed metrics and is supported by set of national priorities, including those set out in the 2025/26 planning guidance. All NHS trusts and foundation trusts will be automatically allocated to a segment (1 to 4) based on performance. The framework sets out how the Recovery Support Programme will be replaced by the Provider Improvement Programme with the most challenged organisations placed into a new segment 5.

Ashford and St Peter's has currently been placed in segment 3 and this places us 43 out of 134 trusts in England. This may be subject to change further to final review in September. This is primarily due to a financial override in the segmentation criteria which means that any trust which has received deficit support funding can be placed no higher than segment. We understand that a dashboard with segmentation results and full league table comparisons will be published shortly.

The framework will be reviewed in 2026/27 to incorporate work to implement the ICB operating model and take account of the ambitions and priorities in the 10 Year Health

5 CONCLUSION

I welcome any feedback or questions from the Council of Governors and look forward to discussing these key areas further.