



**Trust Board Meeting
04 May 2017**

Title of the paper	Chief Executive's report
Agenda item	08/48
Lead Executive	Katie Fisher, Chief Executive Officer
Author	Jean Hickman, Trust Secretary
Executive summary (including resource implications)	The aim of this paper is to provide an update on items of national and local interest/relevance to the Board.
Where the report has been previously discussed, i.e. Committee/Group	N/A
Action required: <ul style="list-style-type: none">• The Board is asked to note the report for information.	

Risk to Board Assurance Framework (BAF)	<p><i>[Please indicate which Principal Risk this paper relates to by double clicking on the corresponding box]</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> PR1 Failure to provide safe, effective, high quality care <input type="checkbox"/> PR2 Failure to recruit to full establishments, retain and engage workforce <input type="checkbox"/> PR3 Current estate and infrastructure compromises the ability to deliver safe, responsive and efficient patient care <input type="checkbox"/> PR4a Underdeveloped informatics infrastructure compromises ability to deliver safe, responsive and efficient patient care – IM&T <input type="checkbox"/> PR4b Underdeveloped informatics infrastructure compromises ability to deliver safe, responsive and efficient patient care – Information and information governance <input type="checkbox"/> PR5a Inability to deliver and maintain performance standards for Emergency Care <input type="checkbox"/> PR5b Inability to delivery and maintain performance standards for Planned Care(including RTT, diagnostics and cancer) <input type="checkbox"/> PR7a Failure to achieve financial targets, maintain financial control and realise and sustain benefits from CIP and Efficiency programmes <input type="checkbox"/> PR7b Failure to secure sufficient capital, delaying needed improvements in the patient environment, securing a healthy and safe infrastructure <input type="checkbox"/> PR8 Failure to engage effectively with our patients, their families, local residents and partner organisations compromises the organisation's strategic position and reputation. <input type="checkbox"/> PR9 Failure to deliver a long term strategy for the delivery of high quality, sustainable care <input type="checkbox"/> PR10 System pressures adversely impact on the delivery of the Trust's aims and objectives <p style="text-align: right; font-size: small;">PR6 – business continuity has been closed (incorporated into PR1)</p>
Trust objectives	<p><i>[Double click on the box to mark as appropriate]</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> To deliver the best quality care for our patients <input type="checkbox"/> To be a great place to work and learn <input type="checkbox"/> To improve our finances <input type="checkbox"/> To develop a strategy for the future
Benefits to patients/staff from this project/initiatives	
Risks attached to this project/initiatives and how these will be managed	



Trust Board Meeting – 04 May 2017

Chief Executive's report

Presented by: Katie Fisher, Chief Executive

1. PURPOSE

1.1. The aim of this paper is to provide an update on items of national and local interest/relevance to the Board.

2. NATIONAL NEWS AND DEVELOPMENTS

Next steps on the Five Year Forward View

2.1. On 31 March, NHS England published the Next Steps on the Five Year Forward View. It reviews progress since October 2014 and sets out “practical and realistic steps” for the NHS to deliver a better, more joined up and more responsive NHS in England.

Time line	
Before September 2017	Improve A&E performance to 90%
By October 2017	Every hospital must have comprehensive front door clinical streaming, and have agreed with local partners initiatives to improve flow –assessment, handovers and discharges. This will be supported by £100m in capital funding. **
By March 2018	<ul style="list-style-type: none"> • Majority of trusts to meet the 95% standard • Use the £1bn in social care budget , and the “High Impact Change Model” to improve DTOCs
By Spring 2018	National roll out of 150 Urgent Treatment Centres, integrated with local services, available 12 hours a day, 7 days a week
During 2018	The NHS overall reporting 95% compliance.

** The Trust’s bid for emergency department capital funding was not successful.

2.2. Referral to treatment standard

While the number of procedures carried out is expected to increase, the 92% standard is being relaxed. The Trust has submitted a revised trajectory

2.3. Sustainability and transformation partnerships

The document renames the 44 footprints as sustainability and transformation partnerships (STP) and looks to set out how STPs will develop. The next steps document looks ahead to the establishment of accountable care systems (“ACs”).

ACSS brings together a number of providers to take responsibility for the cost and quality of care for a defined population within an agreed budget. It is envisaged that ACSSs will develop out of existing STPs, but will exhibit collective responsibility and shared management of funding for a population. Future candidates for ACS status will include successful vanguards, devolution areas and STPs that are working to the ACS goal.

2.4. Other priorities and context for delivery

The standards, STP and ACS outlined above are part of a wider package of plans, including:

- The NHS 10 point efficiency plan (beds/DTOCs, agency, procurement, pharmacy, demand, unwarranted variation, estates, admin, income recovery, control totals)
- Cancer: more bowel and cervical screening, grow diagnostic capacity, better incentives for performance, population cancer budgets in the vanguards.
- Workforce: nurse retention initiatives, electronic rostering, more medical school places. Mental health capacity, access, workforce, commissioning: use of the mental health dashboard.

3. **LOCAL NEWS AND DEVELOPMENTS**

Associate Medical Director visits Watford

- 3.1. Dave Briggs, the Associate Medical Director from NHS Improvement (NHSI) visited the emergency department at Watford in April 2017. He spent some time in the department and offered advice on how GP streaming models could support the work of the emergency department. Formal feedback on the visit will be received in due course.

Improving surgical service

- 3.2. To support the flow of emergency patients and to improve the experience for patients who require surgical management, the trust's emergency surgical assessment unit has been expanded from four to six cubicles. The unit now also has a dedicated team of doctors and a patient assessment room.

Transforming services

- 3.3. The Trust has established two new working groups with the objectives of transforming services by addressing efficiencies and making performance improvements. The notes of 800 adult ED attendances have been reviewed to provide analysis to support the transformation projects.
- 3.4. A clinically led bed configuration transformation group, chaired by the Chief Operating Officer, has been established to drive a programme of work which will have a positive impact on patient flow, performance, patient experience, and cost savings through bed reconfiguration. In the first instance the group will analyse bed utilisation by specialty and ward and reconfigure beds to enable operational efficiencies and repatriate intensive chemotherapy.
- 3.5. A second group, chaired by the Medical Director, will lead on work to implement the urgent and emergency care strategy, which is aligned to the trust's clinical strategy and will address areas raised by the CQC as requiring improvement. The urgent and emergency care strategy programme consists of four pillars; each has a clinical lead and

a set of clear deliverables; front of house, inpatient wards, discharge planning and aftercare.

Improving the patient experience

- 3.6. Mealtimes are an important part of the patient experience. The Trust's Hospital Food Group, acting on the results of an audit, has reviewed and will be re-issuing standard operating procedures. The procedures are designed to make meal times as enjoyable as possible for patients by providing clear guidelines for staff on how to prepare and support patients at meal times.
- 3.7. On 25 April 2017 the Trust launched a campaign #EndPJparalysis, which encourages patients to stop wearing their pyjamas or hospital gown when they don't need to, and to put on their normal clothes instead. Encouraging and supporting patients to get dressed and build their strength and mobility will help to enhance their wellbeing and encourage them to take greater responsibility for their health.
- 3.8. To raise awareness of the campaign, some Trust staff (including myself and the Chief Nurse) wore pyjamas to work on Tuesday 25 April 2017.

Efficient use of space

- 3.9. The Trust continues to face pressures regarding the allocation and reallocation of space in relation to the need for clinical, office and general working space. In order to ensure the effective management of the estate and to minimise the costs involved the Trust, a new Space Group has been established to manage the allocation of space and the principles that govern the decisions.

4. COMMUNICATIONS REPORT

Media

- 4.1. As expected, the Trust's CQC results gained coverage during March. The report was covered by the Hemel Gazette, Tring Today, Watford Observer and the Herts Advertiser. The Trust issued a media release explaining the results. BBC London News ran a report after filming at Watford. The report included a brief interview with Bernadette Hanney from the CQC and a short clip of a local woman whose life and her baby's life had been saved by the Trust. BBC Three Counties Radio interviewed the Chief Nurse on its drive time show.
- 4.2. Other items in the news during March included:
 - The St Albans Review reported that the Health Campus was rebranding as the serene-sounding 'Riverwell Watford' and the Watford Observer, St Albans and Harpenden Review reported that an architecture firm had been appointed for the two main residential phases at the Health Campus
 - The Herts Advertiser and the Hemel Gazette reported on Hertfordshire Community Trust's public engagement events following its plans to close Sopwell and Langton wards at St Albans City Hospital. Following the meeting the Watford Observer, the St Albans and Harpenden Review, and the Hillingdon Times reported the discussion
 - The Watford Observer reported that almost £130m of taxpayers' money had been spent on the Met Line Extension.
 - The Watford Observer, St Albans and Harpenden Review, Morning Star and Hillingdon Times reported that Medirest workers at Watford Hospital were preparing to go on strike over low pay

- The Watford Observer and St Albans and Harpenden Review reported on the installation of the Trust's new state-of-the-art MRI scanner at Watford
- A BBC Three Counties Radio breakfast show covered a report by the Liberal Democrats which stated that the number of people being seen within the four hour A&E target at trusts in Hertfordshire had gone down from 90% three years' ago to just over 70% in 2016.
- Following the release of the Trust's 'strategic outline case' the Hemel Gazette reported that patients' fears that a new hospital for West Herts may not happen, The Watford Observer and St Albans and Harpenden Review reported that the trust has disputed claims that building a brand new hospital would cost £200m less than current plans to redevelop the existing site.

A petition by the New Hospital Campaign reached just over 10,000 signatures on the Petition Parliament website which triggers a government response.

4.3. Sky News reported on the Trust on a couple of occasions in March:

- An investigation by Sky News showed that hospitals in England had breached the agreed hourly cap for locum doctors on 241 occasions in just three months. Sky News interviewed the director of workforce and a junior sister who was agency and is now a permanent member of staff.
- Sky News's technology show filmed for a news item on the use of Proximie which is an augmented reality platform which will transform surgery, training and global health across the world. The Trust has partnered with The Royal Free Hospital as one of the pilots to use this software in the UK.

*** Top five pages visited on Internet site (apart from home page):**

1. Watford wards and departments
2. Contact
3. Parking
4. Our hospitals
- 5 . Pathology

Freedom of Information	Month's Figures 16/17	Month's Figures 15/16	Total Quarter 1 (April – June)	Total Quarter 2 (July – Sept)	Total Quarter 3 (Oct – Dec)	Total Quarter 4 (Jan – March)	Total 16/17	Total 15/16	Target 16/17
March 2017									
Number of Fols received	60						662		
Compliance within 20 day deadline	95%						94.3%		
No of Fols received from media outlets	9						100 (32 BBC)		

Social Media:

Social media: Twitter	Followers	Posts	Likes	Retweets
March 2017				
Twitter	5619	59	184	98

In March the Trust gained 35 new followers and posted 59 times on Twitter.

A post congratulating the maternity and end of life care team on their Care Quality Commission (CQC) result received the most engagement with 88 likes. "A huge well done to our maternity and end of life care team who went up by two ratings from 'inadequate' to 'good'. You should be proud of yourselves."

Social media: Facebook	Followers	Posts	Likes	Reach	Shares	Comments
March 2017						
Facebook	947	38	549	35,806	76	29

The Trust is consistently gaining new followers as we had gained a further 41 followers by the end of March. The number of posts made is consistent as it remains at 38.

Like Twitter, post congratulating the maternity and end of life care team on their Care Quality Commission (CQC) result received the most engagement with 88 likes. "A huge well done to our maternity and end of life care team who went up by two ratings from 'inadequate' to 'good'. You should be proud of yourselves."

The post also reached 2,204 people on Facebook.

5. LEADERSHIP CHANGES

5.1. The following changes have been made to the senior management team:

- Dr Andy Barlow has taken over the post of Divisional Director for Women's and Children's from Dr Vasanta Nanduri
- Dr Freddy Banks has taken up the role of Associate Medical Director for Clinical Strategy
- Mary Bhatti has been appointed as the Divisional Manager for Women's and Children's
- James Mason has been appointed as the new Head of Emergency Planning and Resilience.

6. RECOMMENDATION

6.1. The Board is asked to note the report.

Katie Fisher
Chief Executive

May 2017