The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

Meeting:	Board of Directors (in Public)		
Meeting Date:	2 August 2022	**Agenda item:**	8
Report Title:	Chief Executive's report to the Board		
Author:	Caroline Shaw, Chief Executive		
Executive Sponsor:	N/A		

Implications					
Link to key strategic objectives *[highlight which KSO(s) this recommendation aims to support]*					
KSO1	**KSO2**	**KSO3**	**KSO4**	**KSO5**	**KSO6**
Safe and compassionate care	**Modernise hospital and estate**	**Staff engagement**	**Partnership working, clinical and financial sustainability**	**Healthy lives staff and patients**	**Investing in our staff**

Board assurance framework	N/A	
Significant risk register	N/A	
	Y/N	If Yes state impact/ implications and mitigation
Quality	N	
Legal and regulatory	N	
Financial	N	

Assurance route					
Previously considered by:	N/A				
Executive summary					
Action required: *[highlight **one in bold**]*	Approval	**Information**	Discussion	Assurance	Review
Purpose of the report:	The purpose of the report is to inform the Board of key external/internal events and activities in June and July 2022.				
Summary of Key issues:	The report summarises the Trust's performance and brings to the Board's attention key activities of the CEO and significant upcoming issues.				
Recommendation:	The Board is asked to note the paper.				
Acronyms	N/A				

CEO report to Board – August 2022

Introduction

Last week I announced that I will be leaving the Trust to take up a new role as Chief Operating Officer of innovative global digital health and wellness company Evergreen Life.

I joined QEH as CEO in January 2019 determined to put in place the foundations that would ensure sustainable changes and create a culture of continuous improvement. The Trust's CQC report and ratings published earlier this year, which saw the Trust exit 'special measures' and rated 'Good' for Caring, Well-Led and Effective, provided external endorsement of QEH's progress and of the achievement I set out to accomplish in 2019.

I can honestly say that my time at QEH has been the most challenging, yet by far the most rewarding of my career to date. I could not be prouder of what Team QEH has achieved and how far we have come over the last few years. After almost four decades of service to the NHS, I am now ready to look to my next and likely final stage of my career and I know now is the right time to end my chapter at QEH and move on to make a positive difference to people and healthcare in a different way. I am really excited that I have been asked to join Evergreen Life – a global company that is all about using digital technology to innovate NHS services and improve people's health and wellness, which I am hugely passionate about.

Alice Webster, our Chief Nurse, will be Acting CEO from 1 October 2022 following my departure at the end of September 2022. I wish QEH all the very best for the future and know that with the strength in depth now in place, the Trust will only go onwards and upwards.

1. Operational pressures and our excellent response to the heatwave

Consistent with the wider health and care system in Norfolk, QEH remains incredibly busy. The recent heatwave has compounded the challenge, yet Team QEH has responded superbly over the last few weeks, working in difficult circumstances but remaining absolutely focused on delivery safe and compassionate care, displaying our values of kindness, wellness and fairness at every step of the way.

COVID-19 cases in the Trust are increasing again. At the time of writing (22 July 2022) we have 68 number of inpatients, (1 patient in our Intensive Care Unit).

We continue to strongly encourage all staff to boost their immunity by taking up the COVID-19 vaccine and booster – this will help to ensure our patients and staff are projected. To date, 96% of colleagues have had one dose, 94% have had two doses and 89% of our colleagues have completed a full course of COVID-19 vaccines.

2. Our performance

Four-hour emergency access deteriorated slightly to 59% in June, from 61% in April 2022, reflecting the pressures on QEH and wider health and care system in Norfolk and Waveney.

In June 2022, 20.6% of ambulance handovers were within 15-minutes, compared to 32.8% in April 2022.

Regrettably, there were 437 patients who waited in the Emergency Department longer than 12 hours in June 2022.

At the end of June 2022, 65% of patients were waiting less than 18-weeks from referral.

Performance during May 2022 was 73% against the 85% cancer 62-day national standard.

3. LUNA Patient Tracking List (PLC)

The Norfolk and Waveney Integrated Care System (ICS) has procured the LUNA Patient Tracking List (PTL) platform from MBI Technologies to help our health and care system address the growing backlog of patients waiting for elective procedures.

LUNA PTL is a platform that will enable our staff working to view, manage, and prioritise patients and procedures on elective care waiting lists to improve efficiencies for both patients and staff. Overall, it will help to reduce the number of patients waiting for treatment.

The platform will merge and standardise Norfolk and Waveney's three acute hospitals - QEH, Norfolk and Norwich and James Paget Hospitals' tracking lists into a single referral management system. This will assist in the prioritisation of all elective patients across the system.

This will be used as a fundamental support to the movement of patients between the three trusts, also known as the mutual aid process, to support timely care and improve patient choice in where they are seen. We look forward to the roll-out of this platform in late Summer/early Autumn 2022.

4. Reduction of cancer 62-day backlog and 78-week electives

As part of the national Elective Recovery Plan, work has been undertaken to place all Providers into Tiers in relation to progress against reducing the cancer 62-day backlog and 78-week elective long waiters.

The tiering is in three tranches with Tier 1 encompassing Providers at the highest risk who will receive additional national oversight and support to develop and deliver plans. Tier 2 encompasses providers who are less challenged but still have a material risk to delivery who will receive enhanced regional oversight and support to develop and deliver plans. Tier 3 encompasses all other Providers.

I can confirm that the QEH has been placed in Tier 2, with neighbouring hospitals Norfolk and Norwich in Tier 1 and James Pagetin Tier 3. Recognising the internal and wider focus which is in place as a result of the Elective Recovery Board, which I chair, we are querying the fact that we have been placed into Tier 2 for delivery of 78-weeks to better understand the rationale for this. I feel that we are robustly managing this process and that we do not have a risk relating to achievement. This has been raised via our Regional colleagues who are supportive of our approach. Alongside this, we have robust plans in place to get back on track with our Cancer 62-day backlog trajectory. This work is being led by our Deputy COO with oversight from our COO.

5. Cancer Services recovery and improvement within the East of England

A letter was received from the Regional Director on 19 July 2022 in relation to Cancer Services recovery and improvement within the East of England. Whilst it was recognised that referral levels for 2-week waits within the Region have increased significantly (to 112% above pre-COVID levels) the East of England is one of the worst performing regions in relation to management of patients awaiting cancer treatment within the National target of 62-days. As a result, we have been asked to prioritise the reduction of the 62-day backlog alongside delivery of our elective plans.

We have agreed clear plans to support this work which include ensuring that clinical prioritisation is in place for all cancer pathways alongside potential harm reviews; that we are communicating effectively with all patients who are waiting more than 62-days on a cancer pathway and that we have robust processes in place for patients who are not diagnosed with cancer and / or do not proceed to treatment. We will be sharing these plans back with the Regional team by 5 August 2022.

By the end of August 2022, we will also have shared with the Regional team assurances in relation to our recovery trajectory by main tumour site, our detailed improvement plan and clarity around any additional support which we will require in order to ensure delivery.

6. QEH's Board Assurance Framework

The Board Assurance Framework was recently audited by Grant Thornton in October 2020, with the audit returning a positive finding of "Significant Assurance with some improvement required." Since then, the Trust has continued to embed its Risk Management processes throughout the organisation, as evidenced by the CQC inspection report published in February 2022, rating the organisation 'Good' for Well-Led, with positive reference to the Trust's Risk Management arrangements. A further Grant Thornton audit was completed in April 2022, which again confirmed "Significant Assurance" with just one low level and advisory recommendation, providing assurance to the Board of Directors of our strength in this important area.

Any changes to risks associated with our Key Strategic Objectives (KSOs) are highlighted under the relevant agenda sections at August's Public Board meeting. However, to note that KSO 1 and 5 were reviewed at the Quality Committee on 26 July 2022, KSO 2 and 4 were reviewed at the Finance and Activity Committee, and KSO 3 and 6 were reviewed at the People Committee, both of which were held on 20 July 2022. The current risk level for each KSO Principal Risk is summarised below.

	Quarter 3 21/22	**Quarter 4 21/22**	**Quarter 1 22/23**	**Target Risk**
KSO 1 - *Safe and compassionate care*	16	16	16	1-5
KSO 2 - *Modernise hospital and estate*	20	20	20	6-10
KSO 3 - *Staff engagement*	9 (2758) & 12 (2791)	9 (2758 & 2791)	12 (2758) & 9 (2791)	12-16

KSO 4 - *Partnership working, clinical and financial sustainability*	12	12	12	8-12
KSO 5 - *Healthy lives staff and patients*	12	12	12	6-10
KSO 6 - *Investing in our staff*	12	12	12	12-16

7. QEH welcomes being a central part of system working

On 1 July 2022, the Norfolk and Waveney Integrated Care Board (ICB) formally launched with an official public meeting chaired by the Rt Hon Patricia Hewitt, Chair of the Norfolk and Waveney Integrated Care System (ICS) and Chair of the ICB.

This is a really important development and will build on the significant progress made over the last few years in Norfolk and Waveney to improve care for our patients and provide more joined up services. The move to integrated care gives us the opportunity to really make a difference for our patients, residents and the communities we serve, leading to improvements to the health and wellbeing of people in Norfolk and Waveney, with the aim of helping them to lead longer, healthier and happier lives.

8. QEH welcomes Secretary of State for Health and Social Care

The Trust welcomed the Secretary of State for Health and Social Care, the Rt Hon Steve Barclay MP, to QEH on 15 July 2022, just a week-and-a-half into his new role.

The Secretary of State was accompanied by West Norfolk MP, James Wild, and we were proud to update both on the hard work and the considerable progress the Trust has made over the last three years as we continue on our improvement journey.

The Secretary of State met and spoke with many colleagues from across the Trust and recognised the hard work and dedication that every member of Team QEH has shown to caring for our patients and their families during COVID-19. He also recognised the significant progress QEH has made in recent years and reminded us all of the importance to

Deputy CEO, Laura Skaife-Knight, hosted the visit with members of the Executive Team, joined by David Dickinson, Non-Executive Director and partners, Lorraine Gore and Cllr Stuart Dark, CEO and Leader of the Borough Council of West Norfolk, briefing the Secretary of State on the challenges facing our ageing estate, and the proactive work we are carrying out to improve the safety of our existing hospital for our patients and staff following the welcome allocation of £20.6 million national emergency capital funds in 2021/22 and a further minimum of £80m in the next three years.

In addition to the ongoing programme of estate and maintenance works we are carrying out as a RAAC (reinforced autoclaved aerated concrete) hospital, he heard about the impact it is having operationally and on the experience of patients and staff. The Secretary of State was also briefed on our longer-term ambition to bring a new hospital to King’s Lynn and West Norfolk with details of our compelling case being shared during the visit.

The Secretary of State also took the opportunity to formally open our new £3m West Norfolk Eye Centre which help patients to be seen more quickly and address the backlogs that have built up by creating more capacity. He unveiled a plaque in the new facility recognising its instrumental role in providing a dedicated, specialist ophthalmology outpatient unit at the Trust for the first time and freeing up valuable outpatient space in the main hospital for other specialties.

9. Unanimous support for a new QEH continues

We are extremely fortunate and grateful that we continue to receive a huge amount of fantastic support from our local community for a new QEH, and are hugely grateful to our local MPs and Councilors who continue to press the urgent need for a new hospital.

In March 2022, James Wild MP for North West Norfolk, led an excellent debate in Parliament about our case, and in the Queen's Speech debate in May 2022 and in Department of Health and Social Care questions recently he called on the Government for a new QEH.

At the end of May 2022 we were also delighted to welcome the Minister for Health, The Rt Hon Edward Argar MP to QEH. He saw first-hand the desperate state of our buildings and the challenges we have with RAAC (Reinforced Autoclaved Aerate Concrete) which was used to build the hospital. He heard how there is no 'plan B' for QEH if we don't get funding to build a new hospital and the very worst-case scenario is that parts of the hospital may have to close.

10. Modernising our Estate

Last month, West Dereham Ward opened a brand-new frailty ward, following refurbishment. It brings a second dementia-friendly ward to QEH and brings our frailty team together in one area of the hospital – along with the existing West Newton Ward – in one of the largest specialist frailty units in the region. It will create a safe, secure and supportive environment for patients to receive care and treatment, as well as spend time with family and friends.

We have also opened our brand-new, purpose-designed, maternity unit – Brancaster Ward – and services from Castleacre Ward have now moved into this new unit, which includes a dedicated welcoming reception area and admission and discharge area, and refurbished bays with new shower and toilet facilities.

Our newly-refurbished Neonatal Intensive Care Unit is the latest to open at the Trust and bring in line the unit into line with the latest standards of patient care, including improved fire safety, a new ventilation system and air conditioning. The unit also includes updated space for families, including a family room with new kitchen facilities, alongside two overnight rooms with refurbished shower rooms.

And our new Maternity Bereavement Suite – the Butterfly Suite – was opened by service users last month also, providing a much-needed dedicated facility for parents and their families who are unfortunate enough to experience babyloss.

11. Staff update - joiners and leavers

Dr Govindan Raghuraman has commenced in his position as Acting Medical Director after the the Trust said farewell to Dr Frankie Swords, who left the Trust in June 2022 to take-up the post of Interim Medical Director-designate for the Norfolk and Waveney Integrated Care Board (ICB).

Many congratulations to Denise Smith, our Chief Operating Officer who has led the Trust superbly through COVID-19, for securing a promotion to Chief Operating Officer at Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust – a bigger Trust, much closer to home. Denise will leave QEH in December 2022. The Trust will soon recruit an Interim COO to ensure continuity until a substantive appointment is made.

We are very pleased to welcome Mr Syed Hyder to his new appointment as Divisional Director for the Division of Surgery. My Hyder commenced in post on 25 July 2022. I would like to thank Dr Alistair Steel for his support to the Division while we recruited to this post.

At the end of July 2022, we said farewell to our Divisional Director of Clinical Support Services and Chief Pharmacist, Nichola Berns, as she retired from QEH after an incredible 40 years' NHS service. I am pleased to welcome Alla Williamson, Associate Chief Pharmacist who will become our Acting Chief Pharmacist on 1 August 2022.

And I would like to extend my thanks to Nick Redwood, Divisional Director for Medicine, who also retired at the end of July 2022, after long service to the NHS and 24 years' service to QEH. Thank you to Nick for his service and strong clinical leadership during this time, and we look forward to Nick retiring and returning in the months to come so the Trust can benefit from his experience. Recruitment to the Divisional Director role for Medicine is underway with interviews on 3 August 2022.

Finally, Amanda Hallums has now left QEH following period as interim General Manger for Medicine, with Liz Bradley, Deputy General Manager for Medicine, becoming Acting General Manager in the next period until a substantive appointment is made.

12. Cancer Patient Survey results

Last month we published our 2021 National Cancer Patient Experience Survey results and they showed that we have made significant improvements, scoring within or above the expected range in 58 out of 59 questions.

The two areas where we scored above the expected range included:

- Diagnostic test results were explained in a way that patients could completely understand
- Patients were told about their diagnosis in an appropriate place

The survey highlighted one area for further improvement, which the Trust scored below the expected range on, and that was patients having confidence and trust in all of the team looking after them during their stay in hospital.

Like complaints, patient surveys are a gift and are an opportunity to further improve for our patients and their families. We have commenced a Personalised Care Project to improve

patient experience, as part of a wider national programme and will see our patients having access to key workers and being fully involved in their cancer care as part of our response to these latest results.

13. High Performing Teams Programme is underway

Our High Performing Teams Programme is now fully underway with colleagues from the first cohort already sharing positive feedback and the benefits gained from this important learning process.

The six-module programme, in partnership with the King's Fund, is designed to ensure our middle and local managers have the skills and insights necessary to be the best they can in their role recognising we have much more to do in this area based on feedback from our CQC inspection and latest staff survey results.

14. Reward and Recognition

The last couple of months have given the Trust a great deal to celebrate, especially in terms of reward and recognition for members of Team QEH.

Firstly, I would like to extend my congratulations to our Staff Experience and Communications Teams for winning the Chartered Institute of Public Relations excellence award for Improving staff engagement, wellbeing and communications.

This accolade recognises the very best communications initiatives happening across the country, and it's great to see our work recognised on the national stage in this vital area.

Secondly, huge congratulations to, Rowan Davies, Physician Associate, who last month, successfully passed his Diploma in Geriatric Medicine. Rowan is one of the only Physician Associates in the country to have achieved this, and this will make such as positive difference to our patients and staff.

Finally, very many congratulations to our Clinical Psychology Team for being shortlisted and winning the regional competition for the COVID-19 Response Award at this year's Parliamentary Awards. This is a fantastic achievement and well-deserved recognition for this outstanding team.

15. Looking ahead

As I close my final Board report, I want to look ahead to September 2022 at a couple of exciting and really important events during what will be my final month at the Trust.

Firstly, we are really excited to be holding our Annual Members Meeting on 6 September 2022 which will be held at The College of West Anglia, in King's Lynn. This event allows people to learn more about our hospital, our future plans, and our ongoing improvement journey to become the best rural District General Hospital for patient and safe experience. We will look back at how we've done over the last year and look ahead to our priorities in 2022/23.

Secondly, we are really looking forward to hosting our fourth Leadership Summit on 14 September 2022, which will provide a very valuable opportunity for our leadership community and aspiring leaders to come together and hear from a range of experts from inside and outside of the NHS to share their experiences of leadership and to discuss what leadership looks like in a progressive, high-performing and caring organisation.

During the summit we will be joined by some fantastic speakers at the forefront of their industries, including Professor Kevin Fenton CBE, Regional Director London, Office for Health Improvement and Disparities, Department of Health and Social Care, Adam Peaty OBE, Triple Olympic swimming champion, and Jo Salter MBE, Britain's first female jet pilot and one of the 50 most inspiring women in the world, and PwC's Chief-of-Staff for transformation.