The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

Meeting:	Board of Directors (in Public)		
Meeting Date:	4 October 2022	**Agenda item:**	8
Report Title:	Acting Chief Executive's report to the Board		
Author:	Alice Webster - Acting 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 August and September 2022.				
Summary of Key issues:	The report summarises the Trust's performance and brings to the Board's attention key activities of the Acting CEO and significant upcoming issues.				
Recommendation:	The Board is asked to note the paper.				
Acronyms:	N/A				

Acting CEO report to Board – October 2022

1. Introduction

I am privileged to have stepped up into the Acting Chief Executive's role at a very critical stage in the Trust's journey of improvement. As a Board we are determined to build on our recent successes and ensure the focus remains on the delivery of safe and compassionate care and continuous improvements to patient and staff experience.

2. Operational pressures

QEH remains incredibly busy and as a result, consistent with the wider health and care system in Norfolk, many patients are experiencing longer than acceptable waits for care and treatment, for which we apologise.

This is not the experience we want for our patients, and we remain focused on delivering safe care and timely access to our emergency, cancer and elective patients.

COVID-19 cases in the Trust are fluctuating although have reduced. As of Friday 23 September 2022, we had 33 positive inpatients.

In August 2022, the Trust took the decision to no longer mandate the wearing of masks in non-clinical areas, and in September 2022 we began ceasing asymptomatic admission screening for COVID-19, except for immunocompromised patients. This decision follows a steady decrease in COVID-19 admissions seen across the region; a decision we will keep under review should cases begin to rise or outbreaks within hospital increase.

Last month the Trust also launched its Autumn Booster programme, inviting all colleagues to boost their immunity by taking up the COVID-19 booster vaccine. As of Friday 23 September 2022, 10.6% of colleagues have either had or booked their booster vaccine.

3. Our performance

Four-hour emergency access performance was 59.1% in August 2022, compared to 57.1% in July 2022 and 59.3% in June 2022.

Regrettably, there were 390 patients who waited in the Emergency Department longer than 12 hours in August 2022 (347 in July 2022, and 437 in June 2022).

At the end of August 2022, 714 patients were waiting over 52-weeks for treatment and 55.4% of patients were waiting over 6-weeks for diagnostics (versus 55.7% in July and 53.6% in June 2022).

Performance in July 2022 was 66.66% against the 85% cancer 62-day national standard (versus 57.8% in June 2022 and 72.7% in May 2022).

Our stroke patients spending at least 90% of their time on a stroke unit improved to 58.82% (34.04% in June 2022 and 48.38% in May 2022) however remains below the 90% target.

4. Board Assurance Framework

The Board Assurance Framework was 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 in 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.

Any changes to risks associated with our Key Strategic Objectives (KSOs) are highlighted under the relevant agenda sections at the October Public Board meeting. However, to note that KSO 1 and 5 were reviewed at the Quality Committee on 27 September 2022, KSO 2 and 4 were reviewed at the Finance and Activity Committee on the 20 July 2022 and will next be reviewed on 19 October 2022, and KSO 3 and 6 were reviewed at the People Committee on 21 September 2022. The current risk level for each KSO Principal Risk is summarised below.

	Quarter 4 21/22	**Quarter 1 22/23**	**Quarter 2 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 & 2791)	12 (2758) & 9 (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

5. Our Urgent and Emergency Care Improvement Programme – an update

Over the Summer, we refreshed our programme and we are now focusing on three key areas internally which will make a significant impact on patient flow through the hospital and in turn improve the care and experience our emergency patients receive:

1. Ambulance handovers
2. Patients discharged home from ED
3. Pre-noon discharges

We continue to work closely with system partners to make the required improvements to the timeliness of care for our emergency patients recognising this is both a QEH and system priority. We will continue to keep the Board updated on our progress, and we regularly update our staff on how we are doing.

4. **Introducing our plans for a new ambulance handover area and Emergency Department (ED) expansion**

In August 2022, our Board approved £1.76m of capital funding to expand our ED, including the creation of a new ambulance handover area. Work begins this month.

This will help to reduce long ambulance waits, allowing ambulances to get back on the road and patients to be seen and clinically assessed more quickly, improving patient safety and experience and reducing overcrowding in ED.

Our ED has outgrown its original footprint and is no longer fit for purpose to meet the needs of the increasing numbers of patients attending.

This expansion of our ED aligns with priorities in the Trust's 2022/23 Corporate Strategy to improve urgent and emergency care and to modernise our hospital to support the delivery of optimal care.

5. **Welcoming our new Interim Chief Nurse**

A warm welcome to Helen Blanchard, who joined the Trust as our Interim Chief Nurse on 26 September 2022 whilst I step up into the position of Acting CEO. Helen will ensure the continuity of our improvement journey and continued focus on the delivery of safe and compassionate care.

Helen is an experienced registered nurse with a clinical and leadership career spanning over 30 years, therefore bringing much experience to QEH. She has worked at Board level as Executive Director of Nursing and Director of Infection Prevention and Control in a number of NHS Trusts. Helen also has experience working in the education sector and with our Regulator, NHS Improvement.

6. **Staff appointments**

Dr Subramani Durai Raj, Respiratory Consultant and TB Lead, has been appointed as the Trust's new Cancer Lead. Having worked at QEH for 12 years, he brings a wealth of knowledge and expertise to the role.

This Summer, the Trust appointed Dr Shiva Ugni as its new Divisional Director for Medicine, and Ben Fox as its new Divisional Director for Clinical Support Services, with both colleagues now in post.

7. **Further national recognition for QEH**

QEH has been shortlisted for two Nursing Times Workforce Awards and for Trust of the Year in the Health Service Journal Awards, bringing more national recognition for the Trust for its improvements and innovations.

The Trust's international nurse recruitment and pastoral care programme has been

shortlisted in the Best International Recruitment Experience category and our Practice Development Team has been shortlisted in the Preceptor of the Year category.

These awards receive hundreds of entries every year and being shortlisted recognises that the hospital's nursing initiatives are contributing to innovation in the profession, inclusivity in the workplace, and patient safety and wellbeing.

The Trust last week presented to a final panel in a bid to secure a win in the Trust of the Year Awards at the prestigious Health Service Journal Awards, with the result to be announced mid-November 2022.

8. Recognised for our commitment to patient Safety

In August 2022, we were named as a National Joint Registry (NJR) Quality Data Provider after successfully completing a national programme of local data audits.

In order to achieve this award, we were required to meet a series of six ambitious targets during the audit period (2020/21) – one of which was being compliant with the NJR's mandatory national audit aimed at assessing data completeness and quality within the registry.

The NJR Data Quality Audit investigates the accurate number of joint replacement procedures submitted to the registry compared to the number carried out and recorded in our hospitals Patient Administration System. The audit ensures that the NJR is collecting and reporting upon the most complete, accurate data possible across all hospitals performing joint replacement operations, including at QEH.

Improving patient safety is of the upmost importance and this achievement is a shining example of how seriously we take this commitment.

9. Inpatient survey results

The latest Care Quality Commission National Inpatient Survey results were published on Thursday 29 September 2022, and they show we have some way to go to consistently ensure our patients receive a great experience in our care. The results do not show the improvement we would have hoped for. Along with other feedback we receive throughout the year, including that received via complaints, compliments and the Friends and Family Test, survey results are always an opportunity to learn and improve.

The survey contained 49 questions which when standardised by the CQC resulted in:

- QEH benchmarking similar to other trusts in 36 of the 49 questions
- QEH benchmarking "worse" to other trusts in 4 of the 49 questions
- QEH benchmarking "somewhat worse" to other trusts in 7 of the 49 questions

The 4 main Trust-wide priority areas for improvement in the year to come are as follows:

1. Communication
2. Attitudes and behaviours
3. Privacy and dignity
4. Staffing concerns (including confidence and trust in Doctors and enough nursing staff on duty)

We will monitor progress against our action plan at Quality Improvement Board and Quality Committee.

10. Looking ahead

As we head into Autumn there is much to look forward to as QEH, not least of our annual Team QEH Awards and Health Service Journal Awards in November 2022. This is a wonderful opportunity to recognise, celebrate and reward just some of our incredibly brilliant colleagues.

On 3 October, the 2022 National Staff Survey opens. This is a hugely important opportunity for our colleagues to have their say and help us make the necessary changes and further improve the experience of working at QEH.

We remain hopeful that an announcement on future funding will come soon, recognising a new hospital is the only solution for solving the unique challenges that we face. We remain confident that we have developed a compelling case and done everything possible to secure funding and deliver a new hospital by 2030. We continue to press our case on every front.