The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

Meeting:	Board of Directors (in Public)		
Meeting Date:	5 April 2022	**Agenda item:**	8
Report Title:	Chief Executive's report to the Board		
Author:	Caroline Shaw, Trust 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		
Significant risk register		
	Y/N	If Yes state impact/ implications and mitigation
Quality		
Legal and regulatory		
Financial		

Assurance route					
Previously considered by:	*N/A*				
Executive summary					
Action required: *[highlight **one** only]*	Approval	**Information**	Discussion	Assurance	Review
Purpose of the report:	The paper is to inform the Board of key external/internal events and activities during March 2022.				
Summary of Key issues:	This 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 this paper.				

CEO report to Board – April 2022

1. Operational pressures

We continue to respond to the ongoing challenges of COVID-19. Cases at QEH and in West Norfolk have increased significantly in recent weeks, and at the time of writing (25 March 2022), the Trust has 127 COVID-19 positive inpatients in its care.

We have nearly twice the number of staff testing positive for COVID-19 compared to our neighbouring hospitals and continue to strongly encourage all staff to boost their immunity this by having the COVID-19 booster – this will help to ensure our patients and staff are protected. So far 86.2% of staff had their COVID-19 booster jab; 96.2% have had their first jab and 94.6% their second jab.

Despite the the current pressures, our Surgical Assessment Unit (SAU) has now been relocated back to Elm Ward from the Day Surgery Unit (DSU), and DSU reopened on 21 March resuming elective procedures, which means we can work to get our full elective programme back on plan. The Trust is presently on track to ensure there are no patients waiting over 104-weeks, consistent with the national requirement, however, due to COVID pressures and staff sickness, this is not without risk. The delivery of outpatient services is already back to the levels of 2019.

We continue to work very closely with leadership and clinical teams at Norfolk and Norwich University Hospitals and James Paget University Hospitals to adapt and ensure the safety of our patients remains a priority and risks are managed across the organisation and the local health and care system.

2. Our performance

Four-hour emergency access decreased slightly to 60.05% in February 2022, compared to 64.4% in January 2022, reflecting the sustained pressure on our urgent and emergency care pathway and mirroring the pressures across the region and wider NHS. Just under 8.05% of all patients who attended our Emergency Department (ED) presented to our red (COVID-19) ED. Too many of our emergency patients are experiencing long waits and not receiving the timely care we would wish for our patients and as such there is an improvement programme in development which will launch Trust-wide in April 2022. In February 2022, 30.28% of ambulance handovers were within 15-minutes, compared to 41.4% in January 2022.

Regrettably, there were 37 patients who waited in the Emergency Department longer than 12 hours in February 2022 (including 26 patients awaiting admission to an amber medical bed, 6 patients awaiting admission to a red medical bed, and 5 awaiting transfer to a neighbouring specialist hospital). I apologise profusely to these patients and their families for these unacceptably long waits.

At the end of February 2022, there were 19,441 patients on the Trust's waiting list, of which 7,358 patients have waited over 18-weeks from referral, making our performance 62.15%. The three specialties with the longest waits are Orthopaedics (1029), Ophthalmology (950) and Cardiology (931).

Performance during January 2022 was 74.03% against the 85% cancer 62-day national standard. There were 38.5 treatments, of which 10 were not within 62-days from referral. Improvement plans are in place, including additional resource, capacity for CT and colonoscopies, to support the backlog and create additional capacity, recognising the importance of timely care for our cancer patients.

3. Focus on improving ambulance handovers

There is a clear national, regional and local focus on improving performance in relation to ambulance handovers. All systems are being asked to complete actions in order to drive a sustainable improvement in performance, notably:

1. Development of an agreed plan to balance risks across the whole system
2. Moving admitted patients out of the Emergency Department as soon as all of the care prescribed has been initiated

3. Focusing on hospital actions in relation to patient discharge and specifically maintaining flow throughout the weekends: ensuring that discharges which are in the control of the hospital are at the same level as during the week
4. Visibility and daily monitoring of ambulance handover performance by the Integrated Care Board and Trust Boards

The Trust is developing an Urgent and Emergency Care improvement plan which will encapsulate the detailed actions required to deliver the priorities. The plan will be operationally manged on a daily basis by the Chief Operating Officer. Oversight and assurance of delivery will be reported through to the Trust's Quality Improvement Board and Quality Committee.

Robust focus continues in relation to ensuring delivery of the agreed performance priorities for elective recovery with a specific oversight of patients who are waiting longer for their treatment. In addition, the Trust continues to engage proactively with Norfolk and Suffolk NHS Foundation Trust and wider system partners to ensure that patients requiring mental health support are treated in the most appropriate location for their care.

Regionally work is underway to develop and agree the East of England Operating model for 2022/23. The current draft aims to provide clarity around how the Region will engage with wider systems and partners recognising that 2022/23 is a transitional year. As such, the operating model will be reviewed on a quarterly basis in order to reflect the emerging role of Integrated Care Systems. The operating model will be finalised in March 2022.

4. Board Assurance Framework

We continue to review and refine our risk management processes following the positive finding of "Significant Assurance" from our internal auditors Grant Thornton. Any changes to risks associated with our Key Strategic Objectives (KSOs) will be highlighted under the relevant agenda sections at April 2022's public Board meeting. However, to note that KSO 1 and 5 were reviewed at the Quality Committee on 29 March 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 23 March 2022. The current risk level for each KSO Principal Risk is summarised below.

	Quarter 2 21/22	**Quarter 3 21/22**	**Quarter 4 21/22**	**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) & 12 (2791)	9 (2758 & 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. New appointments

We are pleased to announce some changes to our Estates and Facilities Team as we continue the ongoing maintenance and repair of our estate to minimise the risk of RAAC plank failures, modernise our hospital through a programme of service improvements, and secure funding to bring a new hospital to King's Lynn and West Norfolk.

From the 1 April 2022, Nichola Hunter, our current Associate Director of Estates and Facilities, will become Acting Director of Estates and Facilities with the post soon going out to advert as a substantive Board-level opportunity. Doug Ward will join the Estates and Facilities team as RAAC Programme Director. Doug is an engineer and brings over three decades of experience in the NHS to the role.

Finally, many thanks to Sarah Jones for her work over the last six months as Director of Strategic Estates projects. Sarah's secondment is coming to an end and she will return to her substantive position as Deputy Chief Operating Officer.

6. QEH's third Leadership Summit

We were delighted to host our third Leadership Summit last month which was a huge success and attracted a fantastic turnout.

The themes of our latest summit were teamwork, resilience, and inclusion – all of which are central to the Trust's culture and leadership development programme. The summit was a 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.

We welcomed some fantastic speakers including Simon Weston CBE, Falklands War veteran, Dr Jayne Chidgey-Clark, National Guardian for Freedom to Speak Up, and the Trust's very own Dr Chris Jeanes, Consultant Microbiologist and Infection Control Doctor.

We also had the honour of welcoming John Amaechi OBE as our keynote speaker – John is a leading psychologist, organisational consultant, and high-performance executive coach. I had the privilege of interviewing John about his career and successes before he went on to give an interactive and engaging question and answer session with colleagues on teamwork and teamship.

7. Team QEH Awards 2021

It was with a heavy heart and great reluctance that we decided to move the Team QEH Staff Awards from a face-to-face to a virtual event due to the rising number of COVID-19 cases at the Trust and in West Norfolk.

Notwithstanding this difficult decision, it was still a great celebration in recognition of the many achievements from our staff over the past year.

The awards evening has always been a hugely important milestone in the Trust's calendar and is one of the highlights of the year. But this year it held an extra special meaning – as everyone at Team QEH has worked so hard over the last few years, consistently going above and beyond in exceptionally challenging circumstances through the pandemic to provide the best possible care for their patients.

Many inspiring stories were heard which highlighted examples of outstanding patient care, inspirational support and leadership, excellent teamwork and how living the Trust's values of kindness, wellness and fairness has made a significant difference to the lives of our patients and their families – and so much more.

16 awards in total were presented and the nominees were chosen by the many hundreds of people, including our patients, local community and staff who took the time to nominate our staff and volunteers.

Two particularly special awards were also highlighted at the event. Firstly, the Volunteer of the Year Award was awarded posthumously to John Voaden, a much-loved volunteer in our Emergency Department. We are delighted to announce that to recognise the significant contribution John made over many years to QEH that going forward this award will be renamed the John Voaden Volunteer of the Year Award.

Secondly, the judging panel specifically asked for the Special Recognition Award for Services for the Wellbeing of Staff to be created this year due to the exceptional work delivered in support of our staff during the pandemic. The very worthy recipients of the award were our Clinical Psychology Team who superbly supported our colleagues through very challenging times by providing dedicated inhouse support – they were one of the first teams in the country to do this.

8. Opening our Juniper Hub

Last month QEH opened its third off-site midwifery suite – The Juniper Hub – in Downham Market, providing new and expectant mothers in the area antenatal and post-natal care, reducing the need to attend routine appointments in an acute hospital setting.

The Juniper Team, which consists of nine midwives and one senior maternity support workers, will initially run five clinics, Monday to Friday initially with a view to extending this to seven days a week, offering maternity support for baby checks, infant feeding support, and baby weighing.

Additional services include phlebotomy, postdates appointments and hypnobirthing.

9. Closing remarks

As we start to turn our attention to the next stage of our improvement journey and delivering our priorities for 2022/23, it's important to reflect on some of the significant improvements we've seen over the past twelve months.

Some of our achievements include, being rated as 'Good' in all of the Core services which were inspected by the Care Quality Commission (CQC) and 'Good' for caring, well-led and effective, and being recommended that the Trust move out of the recovery support system (formerly special measures); further improving patient experience as evidenced by improving in all of the national patient surveys over the last year; and receiving national recognition for our 'Learning from COVID-19 exercise' in which we contacted the families or next of kin of the families affected by COVID-19 – as part of our commitment to openness and transparency. We have also delivered a £38m capital programme, invested in and modernising our buildings and facilities for our patients, their families and staff – with our capital allocation as a ratio to our turnover is one of the largest in the country. Achievements such as this and our CQC inspection result are inspiring confidence in the QEH.

QEH is going from strength to strength and the best is yet to come. We go into 2022/23 with very clear priorities - as we will see from the agenda item on our Year 3 Corporate Strategy milestones – and with a well-developed financial efficiency programme. We are really

looking forward to the year ahead, to building on achievements over the last 12 months and to working with our staff, volunteers, Governors, members, local community, partners and external stakeholders to move closer to our vision of becoming the best rural District General Hospital for patient and staff experience.