



The Queen Elizabeth
Hospital King's Lynn

NHS Foundation Trust



ANNUAL REPORT SUMMARY

2021/22



EXCELLENCE
STARTS HERE

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Pictured: Professor Steve Barnett, Trust Chairman (below) and Caroline Shaw CBE, Chief Executive Officer (right)



Welcome to this summary of our year. It describes the progress we have made between April 2021 and March 2022 and our areas of focus in the year to come.

It has been another significant 12 months for QEH, during which we have made further progress and continued to provide safe and compassionate care to our patients even as we have responded to the COVID-19 pandemic and faced sustained pressures on our urgent and emergency care services. Alongside the wider system, we have relentlessly focused on four main priorities:

1. Addressing the waiting lists that have built up for elective care
2. The ongoing COVID-19 vaccination programme
3. Providing timely urgent and emergency care, and
4. Staff health and wellbeing

We have also concentrated on continuing our improvement journey and the delivery of our Integrated Quality Improvement Plan, against which we can evidence further considerable progress for our patients, their families and staff.

Below are some highlights from the year:

Quality

- The Trust received a 'Good' rating for Well-Led and is now rated 'Good' in three domains - Caring, Well-Led and Effective
- We were one of the first Trusts in the country to be recommended to be lifted out of segment four of the System Oversight Framework (previously known as 'special measures')
- We received national recognition for our 'Learning from COVID-19' exercise, which saw us contact all of the families who definitely or possibly contracted COVID in our care or their next-of-kin to apologise and answer any questions as part of our commitment to being open and transparent.
- We launched our new five-year Clinical Strategy to ensure that we deliver high quality services while supporting our ambition to become the best rural District General Hospital for patient and staff experience
- QEH submitted two Expressions of Interest to the Department of Health and Social Care to become one of the eight further new hospital schemes. We also attracted more than £42m capital funding (a record for the Trust) to carry out vital modernisation work
- We were awarded £12.9m in revenue funding to support elective recovery by reducing waiting lists and treating more patients
- Our £625,000 charity-funded Cancer Wellbeing and Support Centre opened to provide a welcoming space where patients can receive support to manage the impact of cancer, while work on our £228,000 Maternity Bereavement Suite neared completion
- QEH achieved its financial plan for the third year running and was one of very few Trusts nationally to continue our Cost Improvement Programme, achieving £6.3m in savings

Engagement

- In response to staff feedback, we extended free staff car parking, provided a Midnight Café and offered half-price gym memberships and annual leave carry over
- A third of our staff attended Values into Action workshops as part of our work to bring our values to life across QEH so that we can create a culture with kindness, wellness and fairness at its heart

- Our staff networks have gone from strength to strength and continue to ensure staff have a voice. We also received the Bronze Rainbow Badge Award for creating a safe and inclusive workspace for LGBTQ+ patients, their families and staff
- We increased our Freedom to Speak Up support from 30 hours to 120 hours per month. Three Guardians (and a new blended model of staff and independent Guardians) are now in place to help staff raise concerns, and are supported by a community of Freedom to Speak Up Champions

Healthy Lives

- We delivered more than 120,000 COVID-19 vaccinations to keep our patients, their families and each other safe
- QEH continued to be one of the most research-active Trusts in the country and recruited more than 1,000 participants to National Institute for Health Research portfolio studies in 2021/22 - an increase of 33% compared to 2019/20
- We were the first NHS Trust to start a UK-wide adaptive trial called 'Helping to alleviate the longer-term consequences of COVID-19'
- Our comprehensive health and wellbeing programme for staff expanded during the year with the recruitment of 20 Mental Health First Aiders, two Clinical Psychologists and a Post-Traumatic Stress Disorder specialist
- We were awarded Independent Menopause Friendly Accreditation for our work to build awareness and understanding around menopause

Looking to 2022/23

Although the Trust has made significant progress in many areas, we know where we need to focus our efforts as we start the next chapter of our improvement journey. This includes building on the strong foundations now in place while embedding and sustaining our many improvements from the last three years.

Our focus for the next 12-months remains very much on further improving Quality, Engagement and Healthy Lives (QEH). Our priorities will include:

- Ensuring our patients consistently receive timely care
- Creating a Quality Improvement Team to drive our continuous improvement
- Listening to and responding to staff feedback so that we can further improve people's experience of working at QEH
- Embedding our new values of kindness, wellness and fairness
- Reducing sickness absence
- Further modernising our estate, including maximising the safety of our current hospital, and securing a new hospital
- Achieving our financial plan and capital programme while delivering £8m in Cost Improvement Programme savings

Finally, we would like to thank our 4,000 plus team of staff, volunteers, Governors, members, local communities, partners and key external stakeholders for their support throughout the year. We look forward to continuing to work with you over the next-12 months as we take steps to improve still further and move closer to our ambition of becoming the best rural District General Hospital for patient and staff experience.

OUR ONGOING RESPONSE TO COVID-19

The COVID-19 pandemic continued to have a significant impact on the hospital during 2021/22, affecting the flow of patients through the building and the way we provide services. Despite facing significant pressures, our staff have once again worked tirelessly and so effectively together to deliver safe and compassionate care to our patients.

We took a number of robust actions at QEH in response to the pandemic during 2021/22. This included:

- Delivering more than 120,000 COVID-19 vaccinations at our QEH and Downham Market vaccination centres to keep our patients, their families, and each other safe
- Carrying out a 'Learning from COVID-19' Duty of Candour exercise'. We contacted 389 patients who either definitely or probably contracted COVID-19 in our care, or their next-of-kin or legal representative, as part of our commitment to being open and transparent. The project was the first of its kind in the country and attracted national recognition
- Celebrating the invaluable role played by our dedicated team of Family Liaison Officers (FLOs), who were introduced to help patients to keep in touch with loved ones while visiting was restricted. Our FLOs have proved so successful that other Trusts are now seeking to introduce similar roles to improve the patient experience
- Continuing to offer phone and video outpatient appointments, in addition to face-to-face consultations where possible
- Playing an active role in COVID-19 research. QEH was the first NHS Trust to start a UK-wide adaptive trial called 'Helping to alleviate the longer-term consequences of COVID-19'
- Investing in additional welfare and engagement activities to help our teams to look after their own health and wellbeing

We ended the year with 127 COVID-19 positive inpatients in our care, which compares with a peak of 220 at the height of the second wave in 2020/21. Inevitably, this has impacted on our ability to deliver planned care. Our focus now is on recovering our position so that patients on our waiting lists can receive the elective treatment they need as quickly as possible.

ABOUT US

We have approximately 530 beds, 33 wards and serve a population of around 331,000 people across West and North Norfolk, in addition to parts of Breckland, Cambridgeshire and South Lincolnshire.

We employ more than 4,000 staff and volunteers who are committed to working with partners to deliver safe, high quality care.

We have seven main operating theatres including two fully integrated endoscopic theatres, the Sandringham Unit (our planned care facility), a dedicated West Norfolk Breast Unit and the midwife-led Waterlily Unit, which provides expectant mothers with greater choice.

In 2021/22:

- 80,057 patients attended our Emergency Department (9,676 more than in 2020/21)
- We treated 47,244 elective and non-elective inpatients (6,431 than 2020/21)
- We carried out 28,518 day case procedures (8,679 more than 2020/21)
- 71,049 new outpatient appointments took place (8,262 less than 2020/21) and 180,661 follow-up appointments (26,659 less than 2020/21)
- 2,065 babies were born at our hospital (110 more than 2020/21)

2019 CQC INSPECTION RATINGS FOR QEH

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent & Emergency Care	Inadequate ↔ July 2019	Inadequate ↓ July 2019	Requires Improvement ↓ July 2019	Requires Improvement ↔ July 2019	Inadequate ↔ July 2019	Inadequate ↔ July 2019
Medical Care (including Older People's Care)	Inadequate ↔ July 2019	Inadequate ↓ July 2019	Requires Improvement ↔ July 2019	Requires Improvement ↔ July 2019	Inadequate ↔ July 2019	Inadequate ↔ July 2019
Surgery	Requires Improvement ↔ July 2019	Good ↑ July 2019	Good ↔ July 2019	Requires Improvement ↔ July 2019	Good ↑ July 2019	Requires Improvement ↔ July 2019
Critical Care	Good July 2015	Good July 2015	Good July 2015	Good July 2015	Good July 2015	Good July 2015
Maternity	Requires Improvement ↑ July 2019	Good ↑ July 2019	Good ↔ July 2019	Good ↑↑ July 2019	Requires Improvement ↑ July 2019	Requires Improvement ↑ July 2019
Gynaecology	Requires Improvement July 2019	Good July 2019	Good July 2019	Requires Improvement July 2019	Requires Improvement July 2019	Requires Improvement July 2019
Services for Children and Young People	Good ↔ July 2019	Good ↔ July 2019	Good ↔ July 2019	Good ↔ July 2019	Requires Improvement ↓ July 2019	Good ↔ July 2019
End of Life Care	Requires Improvement ↔ July 2019	Inadequate ↔ July 2019	Good ↔ July 2019	Inadequate ↓ July 2019	Inadequate ↓ July 2019	Inadequate ↓ July 2019
Outpatients	Good ↑ July 2019	Not Rated	Good ↔ July 2019	Requires Improvement ↔ July 2019	Requires Improvement ↔ July 2019	Requires Improvement ↔ July 2019
Diagnostic Imaging	Inadequate ↓ July 2019	Not Rated	Good ↔ July 2019	Requires Improvement ↔ July 2019	Inadequate ↓ July 2019	Inadequate ↓ July 2019
Overall Trust 2019	Inadequate ↔ July 2019	Inadequate ↓ July 2019	Requires Improvement ↓ July 2019	Requires Improvement ↔ July 2019	Inadequate ↔ July 2019	Inadequate ↔ July 2019

2022 CQC INSPECTION RATINGS FOR QEH

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent & Emergency Care	Good ↑ February 2022	Good ↑ February 2022	Not Rated	Requires Improvement ↔ February 2022	Good ↑ February 2022	Good ↑ February 2022
Medical Care (including Older People's Care)	Requires Improvement ↓ February 2022	Good ↑ February 2022	Good ↔ February 2022	Good ↑ February 2022	Good ↑ February 2022	Good ↑ February 2022
Surgery	Good	Good	Good	Requires Improvement	Requires Improvement	Requires Improvement
Critical Care	Good ↔ February 2022	Good ↔ February 2022	Good ↔ February 2022	Good ↔ February 2022	Outstanding ↑ February 2022	Good ↔ February 2022
Maternity	Requires Improvement December 2020	Good July 2019	Good July 2019	Good July 2019	Requires Improvement December 2020	Requires Improvement December 2020
Gynaecology	Requires Improvement July 2019	Good July 2019	Good July 2019	Requires Improvement July 2019	Requires Improvement July 2019	Requires Improvement July 2019
Services for Children and Young People	Good July 2019	Good July 2019	Good July 2019	Good July 2019	Requires Improvement July 2019	Good July 2019
End of Life Care	Good	Requires Improvement	Good	Requires Improvement	Requires Improvement	Requires Improvement
Outpatients	Good July 2019	Not Rated	Good July 2019	Requires Improvement July 2019	Requires Improvement July 2019	Requires Improvement July 2019
Diagnostic Imaging	Requires Improvement December 2020	Not Rated	Good July 2019	Requires Improvement July 2019	Requires Improvement December 2020	Requires Improvement December 2020
Overall Trust 2022	Requires Improvement ↑ February 2022	Good ↑↑ February 2022	Good ↑ February 2022	Requires Improvement ↔ July 2019	Good ↑↑ February 2022	Requires Improvement ↑ February 2022

MODERNISING OUR HOSPITAL

Our hospital is now more than 40-years-old and investment is required to build a new hospital to replace the building by 2030.

We are striving to ensure that the Trust is included on the Government's new hospital list. The Secretary of State for Health and Social Care visited the Trust in June 2021, which gave us the opportunity to press our case. In September 2021, we submitted two Expressions of Interest to the Department of Health and Social Care to become one of the eight new hospital schemes. We expect our Strategic Outline Case for a new hospital to be completed by June 2022.

During the year, we have continued to modernise our existing building while installing steel and timber support props where needed to maximise safety and reduce the risk of plank failures in the roof. The work has been made possible after we secured more than £42m in capital funding. This is the largest sum we have ever received in a single year and demonstrates the urgent need for capital investment in our hospital.

Our patients, their families, our staff, and local communities deserve to be cared for and work in better facilities. The Trust's poor physical estate inevitably has a detrimental impact on the confidence patients have in QEH and their care, on staff morale and wellbeing, and on the Trust's ability to retain and recruit staff. As such, we continue to press our case on all fronts, with unanimous support from our partners and stakeholders across Norfolk and Waveney, Lincolnshire and Cambridgeshire.



HOW WE ARE PERFORMING

An important part of measuring the quality and effectiveness of the care we provide is based on how quickly we treat cancer patients, elective patients and those arriving for Urgent and Emergency Care.

The impact of COVID-19 on the Trust and wider NHS has been significant. As a result of the identification of the Omicron variant in January 2022, we had to significantly change the way care was delivered, which included reconfiguring the site and reducing elective day surgery to meet emergency demand. There has also been a significant rise in the number of patients attending and being admitted to the Trust as an emergency for reasons other than COVID-19.

Four-hour emergency access standard

We have focussed on improving the experience of our emergency patients and flow in and through our Emergency Department (ED) and out of the hospital. We have made a number of proactive changes to the way in which patients move through the organisation, including:

- Splitting ED to deliver red (COVID-19) and amber (non-COVID-19) areas, which has allowed the ED team to work more flexibly
- Utilising our Sandringham Hospital and Day Surgery Units as surgical wards while increasing the medical ward footprint to provide an extra 45 medical beds
- Introducing primary care screening at the front door to ensure that patients who arrive at the ED for treatment but could be seen by a GP are able to access the right service

Ambulance handovers

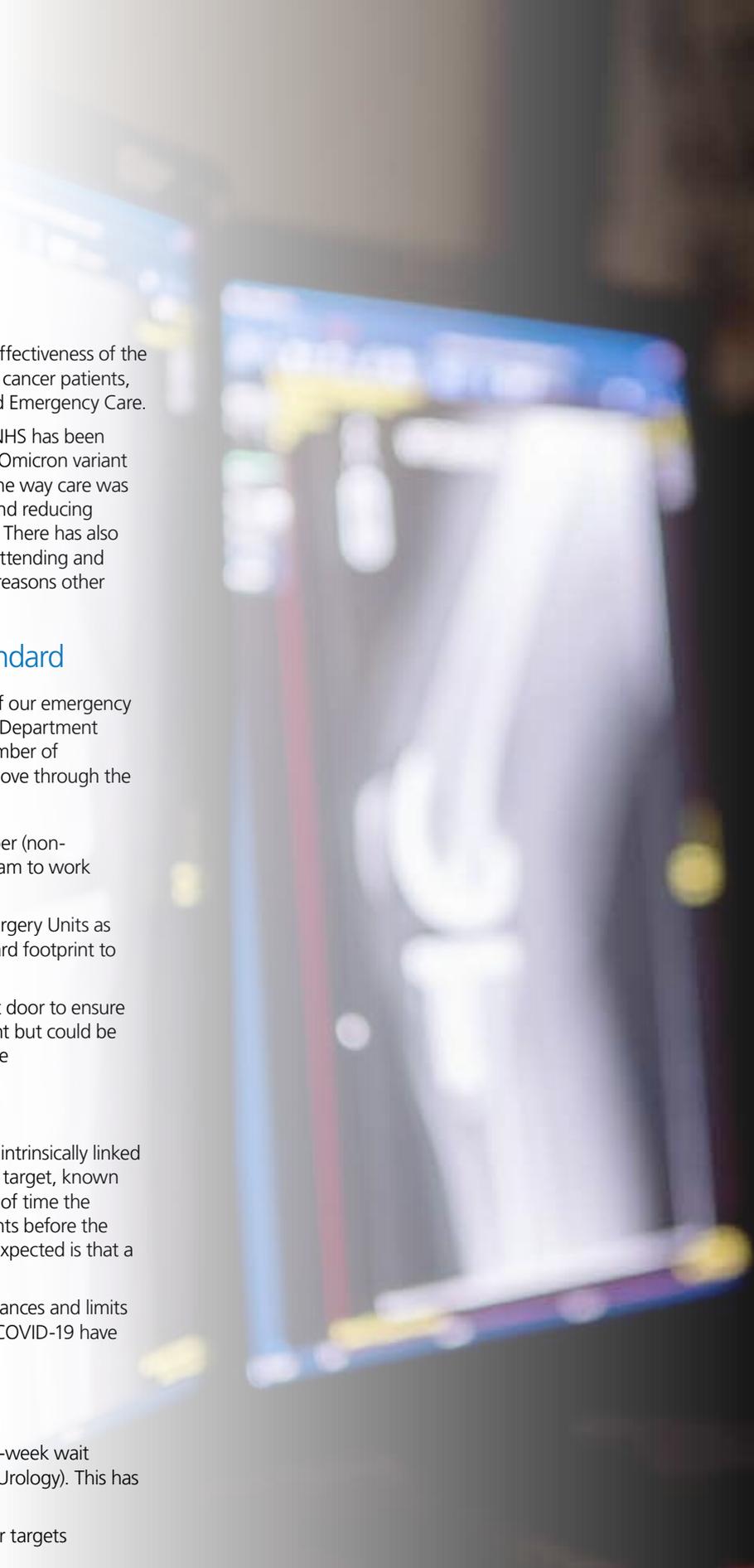
Our ability to receive patients from ambulances is intrinsically linked to the four-hour emergency access standard. This target, known as the handover waiting time, shows the amount of time the ambulance and crew have had to wait with patients before the ED was able to accept the patient. The standard expected is that a patient is handed over within 15-minutes.

During 2021/22, an increase in emergency attendances and limits to the flow and footprint of the ED as a result of COVID-19 have impacted on ambulance handover times.

Cancer access targets

Our cancer services received in excess of 886 two-week wait referrals per month prior to COVID-19 (excluding Urology). This has increased to 946 in recent months.

The Trust achieved six of the seven national cancer targets in 2021/22.





OUR FINANCIAL PERFORMANCE

As in 2020/21, the financial regime was changed during the year in response to the management of the ongoing COVID-19 pandemic. NHS England/Improvement provided the Trust with sufficient funding to develop a plan that set a break-even budget for the first six months of 2021/22. Although the additional inflation pressure of increased pay awards was also funded, the practice of providing a top-up to achieve a breakeven position ceased.

QEH submitted a final plan to NHS England/Improvement to cover months seven to 12, which set a £0.044m deficit, yet the Trust went onto to deliver an actual surplus of £0.26m. This included funding received to cover the costs of the pandemic and additional funding to cover the cost of carrying over annual leave commitments for staff.

We also achieved £6.3m savings, which was in line with the plan set.

QEH spent £42.1m on capital projects during the year, which was funded by our own internally-generated resources and from Public Dividend Capital. This spend was above our planned value of capital expenditure of £32.2m.

The key elements of our capital programme were:

- Addressing backlog maintenance and investment in critical infrastructure
- Facilitating the implementation of failsafes for RAAC (Reinforced Autoclaved Aerated Concrete)
- Endoscopy Unit
- Emerson Outpatient Unit
- Digital investment

PATIENT EXPERIENCE AND PATIENT SAFETY

We are committed to engaging with our patients, their carers and the public so that they can fully contribute to further improving the quality of services that we provide.

We capture patient and carer experience through a number of different methods, including:

- Promoting the 'Friends and Family' Test to receive anonymous but timely feedback
- Attending meetings and events held by community organisations
- Listening to and learning from patients' stories at Board meetings
- Ensuring patients and the public are represented at key committees
- Carrying out mock Care Quality Commission visits, which include interviews with patients and carers (if they are present during the visit)
- Reading and responding to patients' and carers' feedback posted on websites and social media
- Inviting Healthwatch to the hospital to meet patients and discuss their experiences

During 2021/22, we appointed our Family Liaison Officers (FLOs) to manage our Patient Advice Line and facilitate virtual visiting and telephone communication. The FLOs help patients to keep in touch with their families, which was particularly important during COVID-19 while visiting was restricted.

They have proved such a success that several other Trusts have contacted us to find out more about the role and FLOs have been rolled-out across the NHS in Norfolk and Waveney. The CQC inspectors also identified our FLOs as an example of good practice.

OUR PARTICIPATION IN CLINICAL RESEARCH

We recruited more than 1,000 people to National Institute for Health Research (NIHR) studies in 2021/22 – a 33% increase from 2019/20, which is used as a reference because of COVID-19. Non-COVID-19 study activity also increased from less than 10% in 2020/21 to 70% in 2021/22 as we made significant progress towards reintroducing research which was suspended during the pandemic.

During the year, we successfully recruited to 37 active studies covering more than 14 specialties including infectious diseases, cancer, stroke, mental health, critical care, surgery, dermatology, neurology, anaesthesia and pain management. We also added new specialties to our research portfolio, including radiology, psychology, dietetics, dementia and speech and language therapy.

We are committed to expanding the reach of research across the Trust and published our Clinical Strategy during 2021/22, which includes the aim of building research and education into every clinical encounter in our care.





OUR PEOPLE PLAN

The NHS's People Plan sets out what staff and volunteers can expect from their leaders and each other. Called 'We are the NHS: People Plan', it focuses on how we must continue to look after each other and foster a culture of inclusion and belonging, as well as taking action to grow our workforce and train together differently.

The plan has four key themes, which are:

- Looking after our people - with quality health and wellbeing support for everyone
- Belonging in the NHS - with a particular focus on tackling the discrimination that some staff face
- New ways of working and delivering care – making effective use of the full range of our staff's skills and experience
- Growing for the future - how we recruit and retain our staff and welcome back colleagues who want to return

Norfolk and Waveney has developed a local plan called #WeCareTogether, which mirrors the ambitions of the national plan. It has a system-wide workforce focus and sets a goal to be the best place to work, with a vision to have happy, healthy staff providing excellent compassionate care within five years.

QEH People Plan

The QEH People Plan was developed in response to both the national and regional plans and focuses on delivering:

- Our Trust's strategic objectives
- COVID-19 phase three recovery and restoration
- The four key themes from the NHS People Plan

Our aim is to create a culture where we always put patients first, where kindness is the norm and where staff feel valued and are comfortable speaking up, and know they will be listened to. Our focus for 2022/23 will be to continue supporting kindness, fairness and wellness, which is reflected in our commitment to our staff.

QEH will continue to use a triangulated approach to make informed, safe and sustainable workforce decisions to ensure we have the right staff, with the right skills, in the right place at the right time. This will be measured by improvements to patient and staff outcomes, people, productivity and financial sustainability. In addition, we will continue to report, investigate and act on incidents and use patient, carer and staff feedback.



It's official! The CQC have rated us **'Good'** for Caring, **'Good'** for Well-Led and **'Good'** for Effective.



28,518
day cases

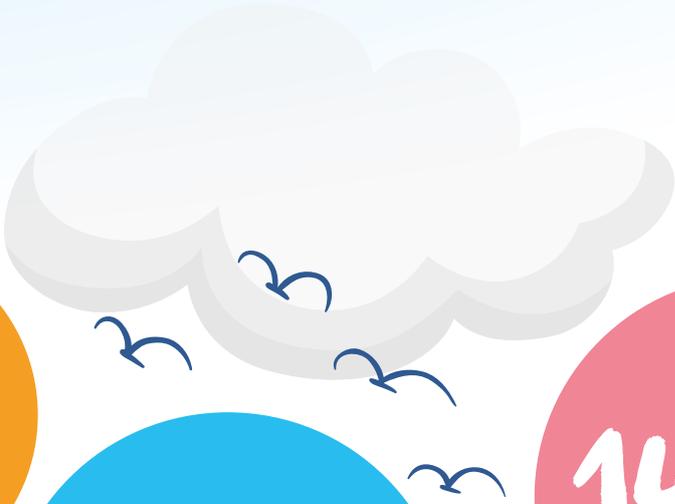
80,057
Emergency Department
attendances

£283.6M
total income

 **3M** impressions on Twitter
(@TeamQEH)

 **300K** interactions on Facebook
(@TeamQEH)





OUR BOARD OF DIRECTORS

Non-Executive Directors



Professor Steve Barnett
Trust Chairman (to 31 March 2022)

Steve has more than three decades of experience working in senior NHS positions. Steve was previously Chair at West Hertfordshire Hospitals NHS Trust for three years, during which time the hospital was removed from 'special measures'. He is no stranger to our hospital, having previously supported the Trust's work on the Quality Improvement Programme, which saw the Trust exit 'special measures' in 2015.



Alan Brown
Non-Executive Director, Vice Chairman and Senior Independent Director

Alan worked in digital solutions for 40 years, the last 13 of which were in healthcare. He has been a Non-Executive Director for seven years, initially at Hinchingsbrooke Health and Care NHS Trust and, more recently, at North West Anglia NHS Foundation Trust, before joining the Board at QEH in May 2018.

Alan moved to Norfolk in 2016 and continued to work part-time as a partner in a consultancy company until July 2019. Alan is Vice Chairman of the Trust and Senior Independent Director. He is Chair of the Trust's Charitable Fund Committee and also sits on a number of collaboration committees and boards across the Norfolk health system.



Dr Ian Mack
Non-Executive Director

Ian spent most of his working life in the NHS as a doctor in West Norfolk. He came to the Queen Elizabeth Hospital as a house physician in 1985. He was a GP in West Norfolk between 1992 and 2017 and held a number of senior roles on NHS boards in Norfolk, leading clinical improvements particularly for services supporting older people. He served as a Borough Councillor for 10 years.

Ian was the Vice Chair of the Norfolk Health and Wellbeing Board and Chair of West Norfolk CCG for four and a half years until his retirement as a GP. Since retirement, he has been involved in charitable and church work. Ian is Chair of the Trust's Quality Committee.



Simon Roberts
Non-Executive Director

Simon is an experienced business leader and adviser having worked substantively and as a consultant/adviser in the NHS and private healthcare markets, holding executive leadership positions in both. He has worked extensively for, and across, NHS England on system and commissioning transformation, including leading major change and transition programmes providing strategic oversight and direct support, notably to evolving Integrated Care Systems. Simon is Chair of the Trust's People Committee.



Graham Ward
Non-Executive Director

Graham is a chartered accountant who has 40 years of experience in senior financial and commercial roles within the accountancy profession, industry, higher education and management consultancy. He has extensive Non-Executive Director experience, especially within the NHS, including at Sherwood Forest Hospitals NHS Foundation Trust, where he is also the Vice Chair. During the period, Graham has been Chair of the Trust's Finance and Activity Committee.

With effect from 1 April 2022, Graham will take on the position of Acting Chair for a period of up to 12 months, following the departure of Professor Steve Barnett.



David Dickinson
Non-Executive Director

David moved to West Norfolk after retiring from the post of Director of Resources at Newark and Sherwood District Council in Nottinghamshire. He is a qualified accountant and was a member of the Chartered Institute of Public Finance and Accountancy. David is Chair of the Audit Committee.



Dr Claire Fernandez
Non-Executive Director

Claire is a research manager with significant experience in project delivery and strategy working across universities, research organisations, industry and NHS provider and commissioner services. She has a background in academic science and spent 10 years carrying out fundamental research at Cambridge and Oxford research institutes. Claire is passionate about delivering evidence-based, high quality care to improve patients' outcomes and experience. Claire is Chair of the Education, Research and Innovation Committee, and the Board Maternity Safety Champion.



Sue Hayter
Non-Executive Director (from 1 May 2021)

Sue qualified as a general nurse in 1969, and has worked in Wales, Scotland and England in addition to working as a civilian registered nurse at a RAF hospital in Cyprus. She retired from full-time employment with the NHS in April 2010 as the Chief Nurse in Suffolk. Since retirement, she has maintained her passion for patient safety and effectiveness, contract working for the NHS and Suffolk County Council. In 2013, she was appointed as the nurse at West Suffolk CCG with responsibility for quality and patient safety working with contracted services. Sue is the Trust's Wellbeing Guardian.

OUR BOARD OF DIRECTORS

Executive Directors



Caroline Shaw CBE
Chief Executive

Caroline joined us as Interim Chief Executive at the start of 2019 and was appointed permanently in September 2019 after making a considerable positive impact. She started her NHS career as a nurse before moving into midwifery and then leadership roles at trusts around the country, including Leicester, Nottingham and Manchester. Caroline became a Commander of the Order of the British Empire (CBE) in 2013 for services to the NHS.



Laura Skaife-Knight
Deputy Chief Executive

Laura joined QEH and moved to Norfolk in October 2019, after spending 12 years at Nottingham University Hospitals NHS Trust where she was Director of Communications and External Relations. Laura brings 20 years of experience working at some of the largest acute teaching hospitals in the country, including in Nottingham and Leicester, and has over 10 years of Board-level experience.

In addition to deputising for the Chief Executive, Laura's portfolio at QEH includes Trust strategy, digital and information (including being Senior Information Risk Owner), strategic estates (including leading on the new hospital bid), transformation and improvement, Freedom to Speak Up, communications, engagement and external stakeholder relationships, Governors and fundraising.



Dr Frankie Swords
Medical Director

Frankie completed her medical training in Oxford and then London and had been a consultant physician specialising in endocrinology for more than 10 years prior to joining QEH. She held various leadership positions at the Norfolk and Norwich University Hospital before joining our team as Medical Director in September 2019. She has three children and a dog, and continues to practice as an Endocrinologist one day a week.



Carmel O'Brien
Interim Chief Nurse (from 17 March 2021 to 30 April 2021)

Carmel joined the Trust in November 2019 as Director of Patient Safety, taking on the role of Interim Chief Nurse in March 2021 before retiring at the end of April 2021. She is a registered nurse and midwife with more than 35 years of experience across acute, community and primary care settings in the UK and Australia, and spent nine years as a Chief Nurse for CCGs across the East and West Midlands. She has a wealth of experience in quality and safety assurance systems and is passionate about ensuring the provision of high-quality compassionate care for patients.



Alice Webster
Chief Nurse (from 1 May 2021)

Alice brings to the QEH 30 years of experience in nursing and interdisciplinary leadership. Integrated care and system leadership have been integral to programmes of work Alice has led in a number of posts across acute and community settings. Alice has a portfolio which includes patient experience, safeguarding, infection and prevention and professional leadership for nursing, midwifery and allied health professionals.



Denise Smith
Chief Operating Officer

Denise joined QEH on an interim basis in April 2019 from Sherwood Forest Hospitals NHS Foundation Trust, where she had been Deputy Chief Operating Officer since 2017. She became our substantive Chief Operating Officer in March 2020. Denise's portfolio includes the leadership of the clinical divisions and operational service delivery, including emergency planning resilience and response, patient flow and discharge, business support and cancer services.



Chris Benham
Director of Finance

Chris joined the team in January 2020 from University Hospitals of Leicester NHS Trust, where he was the Director of Operational Finance for four years having spent the previous three years working as the Deputy Director of Finance at Calderdale and Huddersfield NHS Foundation Trust. He began his NHS career as the Assistant Director of Finance at Shrewsbury and Telford Hospitals NHS Trust in April 2009.



Jo Humphries
Director of People (non-voting)

Jo joined the QEH as Director of People in March 2021 from Arriva Plc, where she held several pan-European People and Transformation Director roles. Her People Services portfolio includes workforce sustainability, resourcing, HR business partnering, talent, leadership development, culture, staff experience and wellbeing, Occupational Health, and Equality Diversity and Inclusion.

Jo brings to QEH significant commercial people management experience gained over three decades in manufacturing, retail and transportation industries before joining the NHS. A specialist in work psychology, she is passionate about people and ensuring the working environment and culture are conducive to happy, healthy and engaged members of Team QEH.

Advisors to the Board (non-voting)



Louise Notley
Director of Patient Safety (from 1 May 2021, acting from 17 March 2021)

Louise joined the Board as the Acting Director of Patient Safety in March 2021, being appointed to the position substantively in May 2021. Louise qualified as a nurse in 1991 and has over 30 years' experience in nursing and leadership, and was previously Divisional Director and Associate Director at the East Suffolk and North Essex NHS Foundation Trust. Louise's portfolio includes leading on the Integrated Quality Improvement Plan, CQC regulation and compliance and patient safety, including management of serious incidents, Duty of Candour, risk management, clinical audit and legal affairs, including claims and all coronial matters.



Carly West-Burnham
Director of Strategy and Integration

Carly began her NHS career in 2004 as a graduate management trainee and has extensive experience within the NHS having worked in operational, transformational and integration roles. Carly's portfolio includes annual and business planning, Integrated Care System engagement with a focus on the development of Acute Provider Collaboration, Place Based Care and health inequalities within West Norfolk, Cambridgeshire and Peterborough, and South Lincolnshire.

OUR VALUES

Our new values are:

Kindness

We want QEH to be a kind place to work and receive care: where colleagues and teams work well together, support each other and communicate openly to provide the best possible care.

Wellness

We are compassionate, professional and positive: we take responsibility for our actions and look after our own wellbeing, as well as that of our patients and colleagues.

Fairness

We are fair and respectful towards each other: we value diversity and difference, seek to understand others' opinions, and always act with integrity.

These values are extremely important to us and we expect everyone who works at QEH in any capacity, including permanent staff, bank staff, contractors, agency staff, people who hold honorary contracts, students and volunteers, to share and uphold them. Each value is underpinned by behavioural standards and employees are expected to demonstrate these behaviours at all times.

We also expect everyone who works at the Trust to act in such a manner as to justify public Trust and confidence and to uphold and enhance our good standing and reputation.

OUR QUALITY IMPROVEMENT PLAN

The Trust's Integrated Quality Improvement Plan (IQIP) reflects our pledge to deliver high quality, patient-centred, integrated care for the community we serve.

It has been produced with input from staff and stakeholders and responds to recommendations from our regulators and the CQC. It outlines our longer-term ambitions to be recognised for the care we provide and the way we help staff to continually develop throughout their careers so that they are proud to say they work for QEH.

The IQIP is aligned to the Trust's 2020-2025 Corporate Strategy and has two main areas of focus. They are:

1. Ensuring the provision of safe, effective care for our patients and a positive working environment for our staff
2. Ensuring the care we provide is delivered in accordance with all regulatory requirements

The Trust's 2021/22 IQIP built on the sustained progress and improvements achieved during 2020/21 IQIP and included 83 actions. These actions were a combination of section and warning notice conditions and 'must do' and 'should do' actions. Of these, 57 (69%) were approved for closure by the end of March 2022, which demonstrates sustained progress throughout the year.

This progress was clearly recognised by the CQC during its unannounced core service and Well-Led inspection in December 2021 and January 2022, and was reflected in the improved ratings received by the Trust in its February 2022 report. Further details are available on pages 4 to 6 of this summary.

In addition, the CQC has removed 18 of the 22 section 31 conditions from the Trust's Certificate of Registration and all 16 of the remaining 29A warning notice conditions spanning the services of Maternity, Diagnostic Imaging and Medicine.

We also expect everyone who works at the Trust to act in such a manner as to justify public Trust and confidence and to uphold and enhance our good standing and reputation.

THE WELL-LED FRAMEWORK

Following the CQC's inspection in January 2022, QEH was rated 'Good' in the 'Well-Led' domain. This represented a significant improvement from 2019, where the Trust's rating was 'Inadequate'.

The 2022 report detailed how the organisation's leadership has strengthened and matured over the past two years in conjunction with robust governance and assurance processes, supporting long-term improvement.

Key Well-Led findings from the inspection included:

- Leaders had the skills and abilities to run the Trust, understood the priorities and issues and were visible and approachable for patients and staff
- There was a clear vision in place for what the Trust wanted to achieve and a strategy to turn it into action, developed with stakeholders
- Staff felt respected, supported and valued and were focused on the needs of patients and given opportunities for career development. Equality and diversity were promoted in daily work and there was an open culture where patients, their families and staff could raise concerns without fear
- Leaders operated effective governance processes throughout the Trust and with partner organisations. Staff at all levels were clear about their roles and had regular opportunities to meet, discuss and learn from the performance of services
- Leaders and teams effectively managed performance, risks and issues
- The Trust collected reliable data. Staff could find the data they needed, in easily accessible formats, to understand performance, make decisions and improvements
- Leaders and staff actively and openly engaged with patients, staff, equality groups, the public and local organisations to plan and manage services
- All staff were committed to continually learning and improving services
- Leaders encouraged innovation and participation in research

The report also highlighted leadership development and improving our estate as Well-Led areas on which we need to give even greater focus in the year to come.

NATIONAL STAFF SURVEY 2021

In 2021, QEH recorded an increase in the number of staff completing the NHS Staff Survey for the third consecutive year. A total of 45.33% of our workforce completed the questionnaire, placing the Trust just 1% below the national median. This is a positive reflection of the improved engagement which is taking place at QEH.

The survey underwent some significant changes in 2021, with 32 new questions added and 24 removed. It was also aligned to the NHS People Promise, with reporting based around the seven People Promise elements.

Each Division or corporate area has a single point of contact who is responsible for encouraging staff to complete the national survey so that we can continue to make improvements. This is supported by a communications and engagement plan which keeps staff updated on actions which have been taken as a result of their feedback using a "you said, we did" format.

Despite our focus on staff engagement during the year, our survey results were disappointing. We recognise that we must listen to our staff and take action if we are to make the improvements and impact we are striving for. As a result, 2022/23 will see us place a greater focus on:

- Relationships and team development
- Keeping staff well at work
- Developing a new staff engagement programme for 2022/23
- Continuing to encourage people to speak up without fear of reprisal
- Creating a culture of kindness, fairness and wellness

STAFF ENGAGEMENT

Following feedback from colleagues, our Staff Engagement Programme was refreshed for 2021/22 to focus on three main priorities, in line with the Trust's new values:

1. Kindness
2. Wellness
3. Fairness

A variety of initiatives have taken place during the year to support this work. They include:



- Providing practical tools to help staff role model, manage, coach, appraise and lead their teams through our Leading with Values masterclasses and Values into Action workshops
- Continuing to embed the behavioural standards detailed in 'The QEH Way'
- Promoting a culture of saying 'thank you'



- Building on the support services available to staff, which includes dedicated Clinical Psychology support
- Making improvements to staff rest and break areas
- Expanding the emotional and psychological support available to staff by recruiting additional Mental Health First Aiders and providing access to Change Grow Live services on-site
- Receiving accreditation as a 'Menopause Friendly' employer and introducing a new Peri-Menopause and Menopause Policy, Menopause Champions and education and training sessions for managers and staff
- Offering health MOT sessions
- Recruiting the Trust's first Wellbeing Guardian
- Introducing a new app to keep our staff informed
- Introducing a financial support and advice service for staff
- Offering gym memberships and our Employee Assistance Programme to staff



FAIRNESS

- Recruiting an Equality and Diversity Lead
- Making changes to interview panels to ensure gender balance and BAME representation on panels for jobs at band seven or above
- Developing our Anti-Racism Strategy
- Launching our 'See Me First' campaign, which invites colleagues to sign a personalised pledge to uphold the Trust's values, promote inclusivity and celebrate diversity
- Further strengthening our staff networks
- Running our Diversity Café
- Celebrating the diversity of our workforce by displaying the 65 nationalities which make up Team QEH on our lift doors
- Introducing an Equality, Diversity and Inclusion calendar for 2022
- Launching 'My Reality', which provides guest speakers with a safe space to share stories and challenge stereotypes
- Providing reverse mentoring

Our focus on these three areas will continue throughout 2022/23 so that we can deliver a step change in how people feel about working for QEH and as part of our drive to become the best rural District General Hospital for patient and staff experience

FREEDOM TO SPEAK UP

We remain committed to developing a culture where staff with safety concerns feel empowered to speak up, have confidence that they will be listened to and thanked, and that action will be taken.

During 2020/21, 71 staff raised concerns via our Speak Up routes, which include our Freedom to Speak Up Guardian, Champions and Executive Lead. This compares to 75 in 2020/21, 25 in 2019/20 and 15 in 2018/19.

Throughout the year, lots of work has taken place to further strengthen Freedom to Speak Up across the Trust. This includes:

- Increasing the number of dedicated hours provided by our blended model of Freedom to Speak Up Guardians (2 staff and one independent Guardian) from 30 to more than 120. The positive impact which this has already had was reflected in feedback from the Care Quality Commission
- Holding quarterly meetings to discuss themes and trends arising from Freedom to Speak Up referrals and triangulate this data with other staff experience measures
- Recruiting 22 Freedom to Speak Up Champions, who meet monthly to discuss themes and gain support from our Guardians
- Learning from the best practice in place elsewhere to strengthen our Freedom to Speak Up function while supporting managers to recognise and respond to concerns
- Completing a self-assessment gap analysis to ensure we provide a consistently robust and fair response to Speak Up concerns which is supported by organisational policy and practice

Whistleblowing

We have taken the decision to have one dedicated contact number for staff who wish to raise whistleblowing or Speak Up concern to make it as easy as possible for staff to share concerns.



The net assets of the QEHL Charity were £3.84m in 2021/22 compared with £3.29m the previous year – an increase of 16.7%. This was a result of some significant legacies, which saw the total incoming resources increase to £1.018m in 2021/22 (£757K in 2020/21). At the same time, spending decreased from £1.241m in 2020/21 to £573K.

The Trust spent £204K on new building projects and refurbishments to further improve the environment we provide for our patients and staff. Of this, we committed £142K to the ongoing development of the Maternity Bereavement Suite and made a final contribution of £28K towards the Cancer and Wellbeing Suite, which opened during the year.

Other spend during the year included:

- £67K on medical and surgical equipment, including as vital signs monitors, a video laryngoscope and mammography equipment
- £131K to support staff to attend courses, conferences and symposiums, as well as funding welfare and engagement activities to help our teams to look after their own health and wellbeing during the COVID-19 pandemic
- £28K supporting and improving patient welfare. This included buying Christmas presents for patients and offering free baby scans during the pandemic, as well as funding IT equipment to help patients stay in touch with their families and friends while visiting was restricted



OUR CULTURE

Our 2020-2025 Corporate Strategy made clear our aim to focus on our culture through one of our strategic objectives:

'Strengthening staff engagement to create an open culture with trust at the centre.'

We subsequently launched 'The QEH Way', which is a comprehensive guide to the behaviours and actions we expect from everyone who works at QEH. This is supported by our new values of kindness, wellness and fairness.

During 2021/22, a third of our staff attended Values into Action workshops as part of our work to bring our values to life across QEH while ensuring they are at the heart of all we do. We also threaded our values through our appraisal, induction and recruitment processes and recognised the staff who have embedded them in their everyday work through our monthly 'Living our Values' awards.

Other actions which the Trust has taken during the year to further strengthen our culture include:

- Launching our 'Leading with Values' programme
- Holding two Leadership Summits, which attracted a range of nationally-recognised speakers from inside and outside the NHS and were attended by hundreds of staff, Governors and partners
- Becoming the only Trust in the region to appoint a full-time Equality, Diversity and Inclusion Lead to accelerate our work to create a culture with inclusion and fairness at its centre
- Further strengthening our Freedom to Speak Up support by increasing its hours from 30 to 120 a month. We now have three Guardians in place and a community of 22 Freedom to Speak Up Champions spanning staff, volunteers, and Governors

The positive work which is taking place to improve the culture at QEH has led to fewer direct to CQC referrals. The CQC also spoke positively about the Speak Up culture which is being created at the Trust and highlighted significant improvements in the culture of the organisation and the care of patients in its February 2022 report.

OUR VOLUNTEERS

Volunteers began returning to the Trust at the start of the year, initially to help at the COVID-19 Vaccination Hub before slowly being reintroduced into their previous roles.

We now have 145 volunteers supporting our patients, who contributed 14,500 hours to QEH during 2021/22 working in the pharmacy, wards and front of house, as well as with our Chaplaincy, Macmillan and League of Friends teams.

During the coming year, our aim is to increase the number of volunteers at the Trust by introducing new roles as we continue to recover from COVID-19. In addition, we plan to:

- Recruit a Volunteer Co-ordinator to further aid the recovery of the service and help establish stronger foundations for 2022/23. Funding for this role has been secured from NHSE/I
- Increase awareness of Voluntary Services both internally and externally by publicising case studies showcasing the valuable work carried out by our volunteers
- Continue to work within Norfolk and Waveney ICS to share best practice and develop training modules for volunteers
- Celebrate the significant contribution our volunteers make during Volunteers Week 2022

LOOKING TO 2022/23 OUR STRATEGIC OBJECTIVES

When we asked our patients, partners, staff (including our Executive Team), volunteers, Governors and external stakeholders what they wanted to see in our future strategy - the feedback fell into three broad areas - shaping our strategic priorities as follows:



QUALITY
ENGAGEMENT
HEALTHY LIVES



STRATEGIC OBJECTIVE

1

To consistently provide safe and compassionate care for our patients and their families.

Executive Lead – Chief Nurse

STRATEGIC OBJECTIVE

3

Strengthening staff engagement to create an open culture with trust at the centre.

Executive Lead – Director of People

STRATEGIC OBJECTIVE

5

Supporting our patients to improve health and clinical outcomes.

Executive Lead – Medical Director

STRATEGIC OBJECTIVE

2

Modernising our hospital (estate, digital infrastructure and medical equipment) to support the delivery of optimal care.

Executive Lead – Deputy CEO

STRATEGIC OBJECTIVE

4

Working with patients and system partners to improve patient pathways and ensure future financial and clinical sustainability.

Executive Lead – Director of Strategy and Integration

STRATEGIC OBJECTIVE

6

Maximising opportunities for our staff to achieve their true potential so that we deliver outstanding care.

Executive Lead – Director of Patient Safety



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