Agenda Item: 07

The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

REPORT TO THE BOARD OF DIRECTORS (PUBLIC)

RESPONSIBLE DIRECTOR:	REPORT FOR:		IMPACT ON BUSINESS:		
Caroline Shaw; Chief Executive Officer	Decision		High	Med	Low
	Consideration			✓	
	Information	✓			
LEAD MANAGER:	**REPORT TYPE:**		**BAF REFERENCES & RAG:**		
	Strategic	✓			
	Operational	✓			
	Governance	✓			
	IMPLICATIONS:		**RELATED WORK: (PREVIOUS PAPERS TO BOARD/COMMITTEE)**		
	Patient Care/Safety/ Experience	✓			
	Finance	✓			
	Workforce	✓			
	Policy	✓			
PEER ASSIST (inc. clinical engagement):	**PEER REVIEW:**				
CQC Domain: (safe, caring, effective, responsive, well-led, use of resources)	All Five Domains				

Meeting Date: Tuesday 7 April 2020

Report Title: Chief Executive's Report

PURPOSE:						
The paper is to inform the Board of key external/internal events and activities.						
SUMMARY:						
This report summarises the Trust's quality and financial performance and brings to the Board's attention key activities of the CEO and significant issues coming up.						
Implications : Financial/Quality/Workforce/Policy:						
Strategic / External	**Operational**	**Financial**	**Clinical**	**Legal/ Regulatory**	**Reputational /Patient Experience**	**Workforce**
✓	✓	✓	✓	✓	✓	✓
RECOMMENDATION/S:						
The Board is invited to consider and comment on the Chief Executive's Report.						

CHIEF EXECUTIVE'S REPORT – APRIL 2020

1. QEH's response to COVID-19

In these worrying times when so many of the things we have long taken for granted have changed, I would like to pay tribute to our hard-working staff here at QEH and our fantastic local community.

For Team QEH – it is fair to say working worlds have been turned upside down. It is truly unprecedented and the hospital I report from this month is a very different place to the one I reported from at the beginning of March. I could not be prouder of the way in which our staff have embraced change and pulled together to focus on keeping our patients safe, and importantly, looking out for and after one another.

A report summarising our response to COVID-19 will be considered later on the agenda, and given this is a very clear priority for us presently, I have also captured some headlines below. By the end of last month, to create capacity for the expected increase in patients and to support national advice to reduce contact (social distancing), QEH teams had:

- Created four dedicated COVID-19 wards
- Increased our critical care capacity
- Prioritised operations for our cancer and clinically-urgent patients
- Switched the majority of outpatient appointments to telephone consultations where it was safe and appropriate to do so
- Set up a dedicated patient helpline to answer questions and concerns about appointments
- Started to roll-out a new digital virtual consultation system to allow patients, who don't need to come into hospital for a physical examination or procedure, to be seen online via video
- Taken the difficult but inevitable decision to stop visiting (with a few small exceptions, including visiting end of life patients)
- Drafted in former NHS (and recently-retired staff) – including ex-doctors, nurses and other frontline workers and recruited extra cleaners to support the increased demand of infection prevention and control
- Cancelled mandatory training and most external training, other than COVID-19 related updates, to release staff for frontline duties
- Introduced home working for staff, where possible, prioritising key workers
- Waived car parking fees to reduce the financial burden on our patients, visitors and staff (this will also support social distancing by encouraging more visitors to come by car, rather than public transport)
- Set up a dedicated COVID-19 incident room to ensure swift decision-making and actions
- Developed clear internal and external communications strategies to keep our patients, local community, Governors, partners, key stakeholders and staff well-informed

The way staff have tackled the significant challenges we face head on and at pace is remarkable and I cannot pay tribute to them often enough as I go round the hospital.
But this has been made easier knowing we have the support of our community. Their response has been equally impressive and has really helped keep us going in these difficult times.

From the practical to the emotional, whether it be donations of food and drinks to keep us going or simple messages of support, I would like to thank everyone. It really does mean a lot to everyone at QEH, knowing that we have the support of the people we are serving in these difficult and challenging times.

2. Our performance (up to the end of February 2020)

Four-hour performance in February was 73.49% compared to 76.78% in January. Ambulance handover within 15 minutes continues to improve, rising from 51.11% in January to 63.82% in February. Regrettably, there were six 12-hour trolley waits in February, two were due to waits for availability of mental health beds and four were due to internal escalation and capacity issues.

Eighteen-week referral to treatment performance in February was 76.22% against the trajectory of 81.53%. At the end of February 2020, the total Trust waiting list was 15,094 against a trajectory of 15,009 and the total backlog of patients waiting more than 18 weeks was 3,589 against a trajectory of 2,772. Performance for January improved slightly to 90.96% against the standard of 99%. There were 419 breaches in the month, of which 377 were in non-obstetric ultrasound.

The Trust achieved six of the seven cancer waiting time standards for January. Performance deteriorated from 74.77% in December to 65.13% in January, against the 62-day cancer standard of 85% and trajectory of 74.80%. There were 76 treatments in January, of which 26.5 were not within 62 days from referral.

Our financial performance saw us report a negative variance to plan for February of £16k and a year-to-date position of an overall negative variance to plan of £139k. To date we have received all of the central funding support available to us, totalling £15.3m. We continue to forecast delivery of our year-end plan and our £6m savings plan, which will be a fantastic achievement for QEH. Whilst COVID-19 related costs will be separately reimbursed, we continue to focus on delivering our financial plan for the year and getting over the line.

3. #QEH40 open day and engagement events postponed

While we have decided to put the large-scale events that we had planned to mark our 40th anniversary on hold for now as we focus on responding to COVID-19 and beyond that the inevitable recovery plan, we still hope to mark our 40th anniversary in some way this summer and then hold full celebrations later in the year and going into 2021.
Even midst these challenges times, I am pleased that we have launched our 2020 Team QEH Staff Awards and introduced Long Service Awards to recognise our staff for going above and beyond and for their loyalty to QEH.

4. Recognition and accolades for Team QEH

Many congratulations to Dr Mario Lupu from our Emergency Department who was the winner of the Health Worker of the Year at the Local Hero Awards and Gavin English who was named Fundraiser of the Year at the same event.

I'd also like to congratulate two of our apprentices, Laura Thomas and Emily Giles, for achieving distinctions in their HR and Business Administration exams. And many congratulations to Senior Specialist Registrar Mat Gilbert who won best presentation at the regional British Geriatrics Society conference last week. In the last month, Radiology's David Huggett was recognised for his 'Outstanding impact since joining the NHS' at the Step into Health Awards. Our fantastic Research Team have received £20,000 funding following its success in conducting clinical trials. The Department of Health and Social Care (DHSC) has awarded the money after the Research and Development team surpassed the 500-patient target to participate in research for new treatments. Many congratulations to all.

I am pleased to report that QEH is one of 24 hospitals to be awarded a share of £28m funding to assist with digital transformation projects so we can provide safe, high quality and efficient care (Digital Aspirant status for Norfolk and Waveney system).

These good news stories show that notwithstanding our challenges presently, our improvements and achievements can be demonstrated by these awards and accolades.

5. New Corporate Strategy

Thank you to our patients, system partners, external stakeholders, Governors, staff and volunteers who have taken the time in recent months who have had their say and contributed to the development of our new five-year Corporate Strategy. The final strategy – which will focus on improving further improving quality, engagement and healthy lives – will be launched later in the year following publication of the five-year system plan.

6. External stakeholders and visits

North West Norfolk MP James Wild visited QEH on 21 March and saw our COVID-19 incident room in action, and visited a number of wards where he met and thanked staff for their hard work. Several days later both James and Matt Hancock, Secretary of State for Health, recognised the efforts of staff at QEH in a speech in Parliament.

7. Closing remarks

We have robust plans to deal with COVID-19 – and this includes planning for our bed, people and equipment requirements. We know the coming weeks are going to be tougher still and we are ensuring we have the necessary support in place for our staff during this difficult period.

Amid all of this uncertainty, what I do know is that Team QEH will come out of this stronger than ever, including strengthened teamwork and changes to how we work for the better that are being accelerated through the digitisation of our hospital.

If we continue to respond to in the right way, and continue to focus on doing what is best for our patients and staff, we will impress the CQC and instil confidence in the work we do, and this will put us in a really good position going into the summer and beyond.