Agenda Item 8

The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

REPORT TO THE BOARD OF DIRECTORS (IN PUBLIC)

SUBMITTED BY:	REPORT FOR:		IMPACT:		
Prof. Steve Barnett, Trust Chairman	Decision		High	Med	Low
CONSULTATION:	Information	✓		✓	
	REPORT TYPE:		RELATED WORK:		
	Strategic	✓			
	Operational	✓			
	Governance	✓			

Meeting Date: 29 October 2019
Report Title: Chairman's Report

Purpose: To keep the Board informed in respect of key external / internal events and activities.					
Financial Implications / Efficiency Savings / Quality Improvement: None as a direct result of this report.					
Risk Assessment:					
Strategic / External	Operational/ Organisational	Financial	Clinical	Legal/ Regulatory	Reputational / Patient Experience
✓	✓	✓	✓	✓	✓
Recommendations: The Board is invited to consider and comment on the Chairman's Report.					

Chairman's Report – October 2019

1 … two warm welcomes!

I reported in August 2019 on one of our key priorities - the development of our leadership capacity at all levels of the organisation, including at Board-level. As part of this work and supported by the Board and the Governors' Council, I decided to increase the number of non-executive directors (NEDs) on the Board from five to seven (in line with our constitutional provisions), in order to enhance non-executive independent oversight, scrutiny and assurance at the Board.

I am delighted to introduce Jackie Schneider, who has joined the Board in October. Jackie's appointment by the Governors' Council on 03 October, takes our NED contingent to seven. Jackie is a nurse by background and has had 30 years of working within a broad and varied range of clinical and senior clinical leadership positions. Jackie also has over 5 years of experience, working as the Nurse member of the Governing Body of North Norfolk CCG.

Welcome to 'Team QEH', Jackie! I know that your contribution is going to be extremely valuable to our Board. I look forward to introducing you to the Governors' Council.

I am also delighted to report that the UEA has made a new appointment to the Partner Governor position on the Governors' Council. I am very pleased to welcome Sue Madden and I am looking forward to my personal introduction meeting with her in November. Sue is a senior lecturer in

Medical Education. The improvement of the Trust's offering in respect of medical and non-medical training and education is a high priority for the Trust and I'm sure that Sue will be a very valuable addition to our Governors' Council. Sue replaces Paul Dansie as the UEA nominated Governor and I have written to Paul to offer the Trust's thanks for his contribution in the role. Paul has also communicated with the Trust and has thanked the QEH governing body for "the opportunity to be a part of (y)our community".

2 An outward-looking perspective

2a The Queen's Speech – 14 October 2019

The second Queen's Speech of the 2017 Parliament set out the priorities of the government and the planned legislative agenda for the year ahead.

The NHS and health and social care in general was broadly covered in the speech, with the address declaring that "measures will be brought forward to support and strengthen the NHS, its workforce and resources, enabling it to deliver the highest quality of care".

The Queen's Speech contained a number of bills tied to the NHS as well as broader proposals to improve the health and social care sector:

- As expected, the government committed to bring forward draft legislation to support the implementation of the NHS Long Term Plan.
- The government reiterated its intention to bring forward proposals to reform adult social care.
- The government committed to introduce the draft Health Service Safety Investigations Bill to parliament.
- The government committed to put a bill on medicines and medical devices to parliament.
- The government stated that it would work to reform the Mental Health Act.

2b NHS Providers' Report – 'The state of the NHS Provider sector'

You will recall that the Trust welcomed Chris Hopson, CEO of NHS Providers to the QEH recently. NHS Providers is the membership organisation for the NHS acute, ambulance, community and mental health services that treat patients and service users in the NHS. Chris delivered one of our very well-received leadership forums for us.

NHS Providers has published its fourth edition of a series of reports examining the state of the NHS provider sector.

NHS Providers has combined its own policy analysis with published data and, most importantly, the views of the chairs and chief executives who run hospital, mental health, community and ambulance services in England.

The state of the NHS provider sector is published at a time when the provider sector is seeking to answer some big questions about how we ensure the NHS remains sustainable and meets the expectations of the public in future years.

See page 3 for a summary infographic outlining the findings and conclusions of NHS Providers' analysis.

The full report is available on the NHS Providers' website:

http://nhsproviders.org/the-state-of-the-nhs-provider-sector-october-2019

NHSProviders

THE STATE OF THE NHS PROVIDER SECTOR

Challenges facing the NHS provider sector

1.2 million people employed by the NHS in England

Almost **500** patients treated every minute across the NHS

9% increase in demand over last three years

£571m current provider sector deficit

4 of 28 monthly key access targets met in 2019 to date – A&E, RTT, cancer

100,000 NHS staff vacancies

£6bn built-up backlog maintenance across the NHS

Trust leaders are calling for realism about the scale of the challenges facing the NHS

72% are worried about whether their trust can make the capital investment needed to maintain and modernise equipment and estates

91% want more public debate about the opportunities and challenges facing the NHS and its future direction

90% are worried that not enough investment is being made in social care

77% are worried that not enough investment is being made in public health and prevention

45% are worried that the support and infrastructure is not in place to enable integration between primary and secondary care

What does the provider sector need to deliver the NHS long term plan?

1. **Realism about the scale of the challenge facing trusts and the wider health and care sector** with an informed public debate about the sustainability of the NHS and its future direction
2. **A funded, credible NHS people plan** addressing recruitment, training, culture and inclusion to attract and keep the skilled staff the NHS needs
3. **Greater clarity on the quality standards the public should expect** underpinned with the resources for all trusts to deliver them
4. **Whole system investment** with appropriate funding for public health and social care and a multi-year capital settlement to support the plan
5. **Support for integration and collaborative working** through the appropriate development of ICSs and STPs

References for all figures available on our website

OCTOBER 2019

2c The CQC's 'State of Care' report

The Trust is clearly going quite well in attracting high profile, senior NHS leaders to visit King's Lynn and the QEH. In October Ted Baker - CQC, Chief Inspector of Hospitals visited and spoke to a packed Conference Room at one of our Leadership Forums.

The CQC has in October, also produced a sector study report – 'State of Care'. The State of Care report is the CQC's annual assessment of health care and social care in England.

The report looks at the trends, shares examples of good and outstanding care, and highlights where care needs to improve. There are some clear common themes in the reports of NHS Providers and the CQC.

Key Points:

- CQC has found that the overall quality of care that people receive in England has improved very slightly from last year. When people are receiving care, it is mostly of good quality. However, even where care services are of good quality, CQC has found many people can struggle to get access to the care they need and want, impacting on their experience of care
- Access and staffing are presenting challenges across all care settings, with geographic disparities in provision presenting particular barriers in some parts of the country.
- The report highlights pressures in A&E and across the system. It states figures for emergency attendances and admissions are continuing to rise year-on-year, and patients struggling to access non-urgent services in their local communities can have a direct impact on secondary services.
- This year's report focuses particularly on inpatient mental health and learning disability as this is an area where the CQC is seeing some decline in quality. While the overall quality picture for the mental health sector remains stable, and CQC has seen good and outstanding care, CQC states that this masks deterioration in some specialist inpatient services.
- CQC has also seen too many people using mental health and learning disability services being looked after by staff who lack the right skills, training, experience or support from clinical staff. CQC states the lack of appropriately skilled staff it has observed in services reflects a national shortage of nurses in these areas of practice.
- In adult social care, CQC states issues around workforce and funding continue to contribute to the fragility of the sector. 2018/19 saw providers continuing to exit the market and CQC has highlighted the sustainability of the domiciliary care market is a particular concern.
- The report calls for actions in the following areas:
    - More and better services in the community
    - Innovation and technology, workforce and models of care
    - System-wide action on workforce planning
    - Long-term sustainable funding for adult social care

Full report link:

https://www.cqc.org.uk/publications/major-report/state-care

2d CCG Merger

You will recall that I reported in August on the proposals for the five Clinical Commissioning Groups in Norfolk and Waveney to merge.

I can report now that NHS England and Improvement has authorised in principle the merging of the five NHS CCGs in Norfolk and Waveney. Plans are therefore on track to have a single CCG known as NHS Norfolk and Waveney from April 2020.

This follows a wide ranging programme of engagement with key partners and the wider public. The proposal received a strong level of support from member practices and key partners in the NHS, local authorities and other organisations.

The ultimate aim is to help improve the quality and performance of NHS services for the people of Norfolk and Waveney, maintaining local identities and building on existing local relationships. There are other potential benefits, such as making better use of our resources and reducing the amount of money spent on administration so that more can be spent on patient care. A single management team will be created, working across all five existing CCGs, to reduce duplication and improve efficiency. An important element of the plan is the creation of Locality Teams to ensure a continuing strong locally-focussed approach to commissioning health care.

3 Closer to Home

3a Hospital Environment - Improvements

You will recall that the most recent CQC Inspection report was highly critical of our Emergency Department environment. It was clear that the department is no longer fit for purpose for the high number of patients that present each day.

I am pleased to say that the first phase of an improvement programme, – aimed at improving patient experience, has been completed.

The alterations provide a better environment for patients to be assessed and treated and for staff to work in, with the benefit of improving the flow of patients.

Three cubicles have been created in the Primary Care area, which manages minor ailments and injuries seen in the busy ED department. A former waiting area has been reconfigured to form two cubicles with examination couches and facilities for eye examinations.

Emergency Department Practitioners Allison Boughnimi and Hannah McGill in a new ED cubicle

Further work scheduled in the coming months includes improving the ambulance offload area and the reception foyer.

… however, there is so much more to do!

Our hospital will be 40 years old next year, and while we'll be celebrating her birthday - we know that she is feeling her age!

We have been very pleased and grateful to have been allocated some additional funding for some specific capital projects. However, the Trust is 100% utilised in terms of space and has a backlog maintenance programme valued at £19m, £12m of which relates to high risk and critical infrastructure works that are commonly associated with 'Best Buy' hospitals.

I want to let you know that Caroline and I are working extremely hard to impress upon our local members of parliament and our regional leaders just how urgent the QEH's need for major investment is becoming. We met with Liz Truss, MP in September and will be meeting with Sir Henry Bellingham, MP very soon.

We will be making our case as strongly as we can for support and lobbying for an equitable allocation of available funding for the benefit of our patients and the community we serve.

3b The re-opening of the Log Cabin

One facility at the Trust, has after a lengthy period of being in need of refurbishment, been re-opened - due to some very generous donations to our charitable funds.

The Raymond Dent Log Cabin which provides a haven for relatives and carers of patients at the QEH, has reopened following an extensive and very impressive refurbishment. The cabin has been fitted with a new kitchen, bathroom and flooring throughout and is tastefully decorated and furnished, thanks to the work of volunteers, dedicated staff and generous fundraisers.

A bequest of £135,000 from Blackborough End resident Raymond Dent enabled the cabin to be opened in 2006 to allow families some quiet time, the ability to cook and prepare meals, to wash and freshen up and provide rest and relaxation.

Visitors from as far afield as South Africa have used the cabin, which provides a 'home away from home' in a relaxed and tranquil environment, while enabling families to stay close to loved ones at the hospital.

Over its 13 year lifetime, the cabin has been used for more than its intended purposes, which include a family party, post wedding celebrations, a wedding anniversary and a 40th birthday gathering - all for patients at the end of life.

It was my pleasure to re-open the refurbished 'home away from home' on 15 October and to meet some of the inspirational people who have been behind the transformation.

Photo from left to right: Caroline Shaw, Chief Executive Officer, Leonard Rudd (the late Raymond Dent's lifelong friend, Professor Steve Barnett, Chairman, and Nicola Whales, Ward Manager for Cancer Care

3c Education

In order for us to be able to address our quality issues and develop a sustainable future for the Trust, we need innovative, highly motivated, well trained medical and non-medical professionals working with us. In order to attract high calibre professionals to the Trust and keep them here as they progress in their careers, it is important for us to offer quality education, training and support for medical and non-medical students and trainees.

We are currently working to address the issues raised by the GMC concerning the standard of our training and education offering. To assist in this work, I am commissioning an independent review of our Medical and Non-medical Education capacity. The review will take about 12 weeks and the review output will inform our improvement actions.

We have ambitious aspirations, involving working effectively with strategic partners, towards the QEH becoming a hub for the training and education of a wide range of professionals. This review is a very early step towards achieving those ambitions.

4. The Chairman's Diary

Internal:

- Recycling Team
- Values Awards
- Staff Awards – shortlisting
- NED interviews

External:

- BMI Sandringham Hospital
- WN CCG Chair
- STP Chairs' Oversight Group
- Norfolk Acute Hospitals – Chairs' meeting
- Freebridge Community Housing
- Borough Council of King's Lynn and West Norfolk – CEO retirement