

Report to:	Public Board of Directors	Agenda item:	7
Date of Meeting:	25 November 2020		

Title of Report:	Chief Executive's Report
Status:	For Information
Board Sponsor:	Cara Charles-Barks, Chief Executive
Author:	Helen Perkins, Senior Executive Assistant to Chair and Chief Executive
Appendices	None

1. Executive Summary of the Report
The purpose of the Chief Executive's Report is to highlight key developments within the Trust, which have taken place since the last Board meeting.

2. Recommendations (Note, Approve, Discuss)
The Board is asked to note the report.

3. Legal / Regulatory Implications
Not applicable

4. Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc)
Strategic and environmental risks are considered by the Board on a regular basis and key items are reported through this report.

5. Resources Implications (Financial / staffing)
Not applicable

6. Equality and Diversity
Not applicable

7. References to previous reports
The Chief Executive submits a report to every Board of Directors meeting.

8. Freedom of Information
Public

CHIEF EXECUTIVE'S REPORT

1. Finance

The funding regime for the Trust changed at the start of October with all funding now coming via allocated blocks, including fixed funding to cover COVID-19 costs. In line with national requirements, the Trust submitted a revised plan to NHSE/I for 2020/21 forecasting a deficit of £3 million at the end of the financial year. Work is underway to ensure the required levels of activity are delivered with this envelope and further productivity savings are being pursued with the aim of improving the financial position. At the end of October the Trust is reporting a deficit of £214,000 which is an improvement of £37,000 on the revised plan. The key financial risk relates to a continued high use of high cost agency staff to cover vacancies and our response to COVID-19. The capital programme remains behind plan and needs to accelerate to ensure that funding is not lost.

2. Performance

Four hour performance has improved slightly during October to 79.1%. We have reopened the Respiratory Assessment Unit (RAU) as a separate respiratory front door which became fully operational week commencing 9th November 2020 due to the exceptional team work across the organisation to make this happen in one week.

Performance for Initial Assessment Time in the Emergency Department has improved in Majors (76.7% from 74.9% in September) and in Minors (up to 71.4% compared to 56.9% September). Performance against the RTT incomplete standard of 92% was 67.3% in October, up 3.1% from September. The total over 18 week backlog has decreased by 722 patients (8%) in month. Diagnostic activity continues to improve across all modalities which benefits both elective and cancer pathways.

We continue to balance our elective recovery plan with increased levels of covid admissions and all teams are working incredible hard to maximise care for emergency and elective patients.

3. Quality

The Quality Report summarises performance against key quality work streams supported by the Quality Improvement Centre with a focus on the Improving Together 2020 patient safety and quality improvement priorities. Although there were 3 category 2 pressure ulcers reported in October the Trust remains within target for category 2 pressure ulcers. The Trust is above trajectory for the number of medical device related pressure ulcers. A digital and face-to-face campaign has been organised with the support of the communication team for STOP the pressure day in November. This is a global annual event to raise awareness of pressure ulcers.

The Serious Incident (SI) Review Panel continues to meet weekly and, as a sub-group of Quality Board, is responsible for the review and sign off of completed Root Cause Analysis (RCA) reports for Serious Incident (SI) investigations and for monitoring the effectiveness of the SI and duty of candour processes. During October, 8 serious incidents were approved by the panel with key lessons learnt from these investigations which have since been shared with the divisions. Ensuring that Duty of Candour is completed and any outstanding action plans are completed in full remains an area of focus. A new duty of candour video, refreshed guidance, letter templates and an information leaflet is now available to staff. A Duty of candour Intranet page is also due to go live in November. In October the date of apology and explanation was documented for 100% of serious incidents.

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The first meeting of the Patient Safety Steering Group took place on 16th November. It is a sub-group of Quality Board with the objective to monitor and review the quality and safety of services provided by the organisation and to promote a culture of organisational learning and ongoing quality improvement and innovation. The first meeting was planned to have a dedicated focus on the work to support early detection and treatment of the deteriorating patient.

The Ward and Outpatient Accreditation Programme re-launched in October. William Budd Ward and Urology Outpatients have been re-assessed and both achieved Silver Accreditation. This is recognition of sustained performance in achieving key standards of quality and safety. The Accreditation assessment forms for wards at silver level have also been reviewed and updated and now include additional Key Performance Indicators that will assess wards' compliance with infection control standards in line with the Infection Prevention and Control Board Assurance Framework. This framework has been produced by NHS England and is used by the Care Quality Commission (CQC) as part of their Emergency Support Framework to assess whether trusts have effective plans and processes in place for infection prevention and control.

Relaunch Ward and Outpatient Accreditation Programme 2020 (Post Covid)

The Ward and Outpatient Accreditation programme commenced in 2014, and was developed to:

- Recognise and incentivise high standards of care
- Reduce variation of practice in wards and departments
- Provide assurance that the Care Quality Commission (CQC) standards are being met
- Help identify where any improvements in practice are required.

The programme uses performance indicators for each of the CQC domains to measure the quality and safety of the services provided at individual ward and outpatient level, and has expanded to include Maternity, Paediatrics, Critical Care and Emergency department.

Assessment of the indicators is based on levels of performance over the previous 6 months to a year depending on the indicator and level. A graduated score 1-3 is given per indicator depending on the level of performance. The programme takes a tiered approach of assessment from Foundation level to Gold level.

Proposal for relaunch

Following the Covid pandemic and the resulting significant changes in the clinical environments which directly impacted and affected teams, causing the disruption of normal activity and services and the availability of data there is a need to refocus, review and subsequently relaunch the programme.

- Indicators for Silver level have been revised, updated and agreed by Director and Deputy Director of Nursing and Midwifery and Heads of Nursing
- New assessment tool developed to track data and streamline the assessment process
- During the social isolation restriction period the proposed process for unannounced observations is :
 - Staff questionnaires/interviews – sample of 6 staff to be completed via teams conducted by range of staff who would usually take part in observations including Non-Executive Directors and Governors.

- Patient questionnaires/interviews –sample of 10 patients (with consent) who have been discharged from the clinical area would be spoken to by phone or other virtual means by the Patient Experience Team.
- Senior Sister interview conducted via teams
- Observations of practice and environment conducted by Quality Improvement Team and other corporate staff (maximum of 2)
- Portfolio presentation conducted via teams

4. Gamma Camera

Our new gamma camera - the first of its kind in the country is now being used to scan patients. The hospital's new Veriton digital (solid state) gamma camera reduces scanning time for patients while creating clearer images which help with diagnosis. Funding for the new equipment was only made possible thanks to the generosity of the Bath Cancer Unit Support Group (BCUSG), which donated an incredible £340,000 towards its purchase, in addition to the other equipment and facilities it already helps to fund for the RUH's cancer patients. In addition to the new technology, which is housed in the RUH's Clinical Imaging and Measurement department, the department's camera examination room has been refurbished to provide a modern, bright, comfortable space for patients to be scanned in.

5. Veteran Aware Accreditation

Staff at the Trust are working towards achieving full Veteran Aware Accreditation, committing to further improving NHS care and support for members of the armed forces community.

Veteran Aware status is granted by the Veterans Covenant Hospital Alliance (VCHA). To achieve it, Trusts make a series of pledges such as training staff in veteran-specific needs, supporting the armed forces as an employer and ensuring that members of the armed forces are never disadvantaged when receiving care. The RUH has appointed clinical and management Veterans' champions who are working with Medicine, Surgery and Women's and Children's Divisions, and plans to achieve full Veteran Aware status by 31st March 2021.

6. Year of the Nurse and Midwife Display

A new window display is in place in the centre of Bath to celebrate 2020 being the International Year of the Nurse and Midwife. The display in Milsom Street, part of B&NES Council's Shop Window Art Project, reflects the changing face of nursing through the years and was put together by staff at the Royal United Hospitals Bath NHS Foundation Trust, including the Art at the Heart team. The display includes the artwork Butterfly Rainbow, generously donated to the RUH by Damian Hirst, who created the work to show support for the NHS in the coronavirus crisis. A limited edition of the work was produced with all profits donated to NHS Charities Together, raising a total of more than £1.5m.

7. 2020 National Quality in Care Diabetes Award

Gillian Purcell, Specialist Dietitian in the Paediatric Diabetes Team, has been named as a finalist in the 2020 National Quality in Care Diabetes Awards under the category of Outstanding Diabetes Educator. Gillian devised a virtual teaching package to help educate young diabetes patients during wave 1 of the COVID pandemic which will also be instrumental for the Trust in the recovery phase.

Last year, together with Dr Edward Coxson, Gillian also organised a patient education evening where patients were taught how to interpret their blood glucose patterns and

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readings and make insulin adjustments which received excellent feedback from patients and parents who attended.

8. 2020 Patient Safety Awards

The Trust has been awarded top honours at this year's 2020 Patient Safety Awards for its work in caring for patients with Sepsis and Acute Kidney Injury.

The hospital's Sepsis and Kidney Injury Prevention (SKIP) team was awarded the coveted Patient Safety Team of the Year by the Health Service Journal. The SKIP team was recognised for its ambition, visionary spirit and the demonstrable positive impact it has had on patient and staff experiences within the health sector.

Award judges said: "This winning project is an amazing and inspiring piece of work which clearly demonstrates the desire to improve outcomes for patients. There were impressive results, showing improvements in safety across a range of indicators, and great methods of engaging staff. The judges felt that this displayed fantastic learning which should be rolled out nationally".

9. Chief Executive Visits to Wards and Departments

As part of my induction programme I have spent some further time this month visiting a number of the Surgical and Medical wards, as well as meeting staff from the Forever Friends, Medical Physics, Bioengineering, Oncology, Haematology, Library and Rheumatology teams.

10. RUH Membership

We are always actively seeking new members to help us shape the future of the hospital and as a member of the Trust you can influence many aspects of the healthcare we provide.

By becoming a Member, our staff, patients and local community are given the opportunity to influence how the hospital is run and the services that it provides. Membership is completely free and offers three different levels of involvement. Through the Council of Governors, Members are given a greater say in the development of the hospital and can have a direct influence in the development of services. Simply sign up here:

<https://secure.membra.co.uk/RoyalBathApplicationForm/>

11. Governor Elections 2020

Following the close of the elections on Friday 31st October, the following candidates have been elected to join the Trust's Council of Governors:

- Dr Nesta Collingridge-Padbury, City of Bath
- Suzanne Harris North East Somerset
- Peter McCowen, North Wiltshire
- Anna Shantry, North Wiltshire
- Jill Scott, South Wiltshire
- Sophie Legg, Staff
- Baz Harding-Clark, Staff
- Julie Stone, Staff

Mendip and Rest of England and Wales constituencies were uncontested and the following candidates were elected unopposed:

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- John Osman, Mendip
- Virginia McNab, Rest of England and Wales

The full election report can be found on our website: www.ruh.nhs.uk/membership

12. Senior Management Appointments

Rebecca King has been appointed as the organisations new Deputy Director of Finance following an interview process on 9th October 2020. Rebecca will join the Trust on 25th January 2020 from Dorset County Hospital where she currently works as Deputy Director of Finance.

Our Director of Nursing and Midwifery, Lisa Cheek, will be leaving the Trust in March 2021 to take up a new role as Chief Nurse at Great Western Hospitals NHS Foundation Trust (GWH). Lisa's role at GWH will encompass primary and community care as well as working in an acute setting.

Lisa joined the RUH in 2016 and has been instrumental in developing our nursing and midwifery strategy and the Trust's constant focus on improving the quality of patient care and experience.

The recruitment process for replacing Lisa has commenced and interviews will take place on Thursday, 17th December 2020

13. Consultant Appointments

Mr Muhammad Addin was appointed as a Consultant in Paediatrics with expertise in Cardiology on 11th November 2020 and is currently working at the Trust as a Paediatric Registrar.

Dr Daniel Jolley was appointed on 11th November 2020 as a Consultant in Paediatrics and Neonatology and is currently working at Gloucestershire Hospitals NHS Foundation Trust as a Locum Consultant in this area.

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