

Board of Directors Meeting in Public - Cover Sheet

Subject:	Chief Executive's Report	Date: 6 May 2021		
Prepared By:	Robin Smith, Head of Communications			
Approved By:	Lorna Branton, Director of Communications, Richard Mitchell, Chief Executive			
Presented By:	Richard Mitchell, Chief Executive			
Purpose				
To update on key events and information from the last month		Approval		
		Assurance		
		Update		
		Consider		
Strategic Objectives				
To provide outstanding care	To promote and support health and wellbeing	To maximise the potential of our workforce	To continuously learn and improve	To achieve better value
X	X	X	X	X
Overall Level of Assurance				
	Significant	Sufficient	Limited	None
			X	
Risks/Issues				
Financial				
Patient Impact				
Staff Impact				
Services				
Reputational				
Committees/groups where this item has been presented before				
N/a				
Executive Summary				
<p>An update regarding some of the most noteworthy events and items over the past month from the Chief Executive's perspective:</p> <ul style="list-style-type: none"> • Covid-19 and restoration • Overall update 				

Chief Executive Report – May 2021

Covid-19 and restoration

As usual we will provide more detail on Covid verbally and in other agenda items, however there are some things we can provide more information on now.

Continuing the theme of the last few months, the immediate Covid-19 pressures on our organisation and system have continued to reduce during April. At the time of writing we have 12 Covid positive inpatients, whereas we peaked at around 220 in January. I believe we are seeing the positive impact of both the vaccination programme, and of the restrictions that we have been living with since the New Year. The vaccination programme is continuing to roll out, including through the King's Mill Hospital vaccination hub and we remain cautiously optimistic as the roadmap out of lockdown continues to progress.

A number of restrictions were lifted from Monday 12 April, including relaxing the number of people who can meet outdoors and the opening up of non-essential retail and outdoor hospitality. I know that this has been a boost for our local community and the majority of our colleagues.

However I am very conscious that we have colleagues who still will not be able to see family and friends, particularly if they live abroad. We have all been following the situation around Covid-19 in India, and I know that colleagues with family and loved ones in that region will be anxious about them. We have a number of wellbeing services that these colleagues can access, and have been communicating with them to ensure they are aware of the offer.

The easing of restrictions has also led to an increasing demand for emergency care, with our emergency care team seeing growing numbers of attendance. I would like to recognise colleagues who have been responding to that demand with safe and timely care.

As discussed previously, we now face the challenge of addressing the growing lists of patients that need our care for reasons other than Covid-19. We will continue to work with our system partners as we reintroduce more elective care, and will ensure our patients are kept informed, whilst being mindful of supporting colleagues who may be exhausted from pressures of the pandemic.

I was pleased to join an NHS Providers podcast last month, having the opportunity to talk about the pressures we have faced during the pandemic and recovery. The panel was chaired by the Deputy Chief Executive of NHS Providers, Saffron Cordery, and I was speaking alongside Siobhan Melia, Chief Executive of Sussex Community NHS Foundation Trust. [You can listen to it here.](#)

I have also written a blog called "Passing the peaks; longer term support for colleagues after Covid-19" for NHS Providers. It can be [read here.](#)

We continue to operate a compassionate visiting policy, which remains the same as last month at the time of writing. We will continue to be led by our Chief Nurse Julie Hogg in finding the balance between the needs of patients and visitors and infection control.

I continue to produce regular updates to our community. [Update 17 from Monday 19 April can be read here.](#)

Covid Public Broadcasts

On Wednesday 31 March we held the latest of our public broadcasts on Covid-19. If you were not able to tune in [click here](#) to catch up now. We have run eight of these broadcasts since August 2020, and they have been very valuable as a way to communicate directly with patients and the community and to listen to feedback and answer questions.

We have decided to pause the sessions for the time being, reflecting the latest situation on Covid-19 in particular, although we will return to them should the demand arise. I would also like to thank Healthwatch Nottingham and Nottinghamshire for their independent role in the broadcasts, representing the patient voice.

Sherwood Board changes

As reported last month our previous Chair, John Macdonald has recently joined University Hospitals of Leicester on a one year secondment, and Claire Ward has stepped into the Chair role for Sherwood. We will miss John, and I know many colleagues have taken the time to add their thanks and tributes to John and the work he has done in his four years at Sherwood. I am delighted though that Claire has moved into the role, and am excited about continuing to work with her to drive further improvement at our hospitals.

I am also very pleased that Dr Andy Haynes has re-joined the Sherwood Trust Board as a Specialist Advisor and look forward to benefitting further from his knowledge, experience and commitment to patients.

More new services reintroduced to Newark Hospital

In a new boost for residents in Newark and Sherwood, more new surgical procedures have taken place at Newark Hospital for the first time since 2014. In March 2021 the first patient for nearly seven years underwent an elective laparoscopic hernia repair at Newark, allowing local patients to be treated much closer to home.

The procedure is performed by keyhole surgery. Surgeons make three small incisions and insert special surgical instruments which allow them to pull the hernia back into place. This procedure has been reintroduced as part of the Trust's restoration plan following reduced services due to the Covid-19 pandemic.

Residents in the Newark area can now have the day case surgery closer to home instead of travelling to King's Mill Hospital. This type of surgery joins a range of operations that are now available at their local hospital including hip replacements, knee replacements, treatment for joints and other orthopaedic procedures, many of which were reintroduced in September 2020 after a similar period of unavailability.

Thanks to all colleagues involved in bringing these services back to Newark, in a move which further underlines our continued commitment to providing services locally.

Visit to Shrewsbury and Telford NHS Trust

On Monday 26 and Tuesday 27 April, Julie Hogg (Chief Nurse), Claire Teeney (Director of People) and I visited Shrewsbury and Telford NHS Trust as part of our buddying arrangement to support their maternity services. We were made welcome by the teams there and were impressed by what we saw and heard. It is clear they are putting a lot of effort into improving their services.

Pregnant women and support partners offered lateral flow test before scan appointments to help keep everyone safe

We are now offering all women and their support partner the option to have a Covid-19 test before their 12 and 20 weeks scan appointments at King's Mill Hospital, from Tuesday 6 April 2021.

The tests being offered are rapid 'lateral flow' tests. Women and their support partner are being asked to come to hospital 50 minutes before their scan appointment in order to allow time for the tests to be carried out. The test is a simple nasal swab, it isn't painful and it doesn't take long.

Women and their support partner will be given additional information before their appointment and the information is also available on our website here – <https://www.sfh-tr.nhs.uk/our-services/maternity/>

If a woman tests positive, maternity staff will arrange for them to have a further test to confirm that they are positive. This test involves another swab, this time from the nose and throat. This will be performed before they leave the hospital and they will be informed of the results as soon as they are available (usually 24-48 hrs).

If a support person tests positive they will not be able to accompany the woman to their scan and will be asked to leave the department and wait in the car/outside. They will be given information and guidance about self-isolation in line with the current government guidance.