

Board of Directors Cover Sheet

Subject:	Chief Executive's Report		Date: 28 June 2018	
Prepared By:	Kerry Beadling-Barron, Head of Communications			
Approved By:	Richard Mitchell, Chief Executive			
Presented By:	Richard Mitchell, Chief Executive			
Purpose				
To update on key events and information from the last month.			Decision	
			Approval	
			Assurance	X
Strategic Objectives				
To provide outstanding care to our patients	To support each other to do a great job	To inspire excellence	To get the most from our resources	To play a leading role in transforming health and care services
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"> • Overall update • Wider SFH news • Wider NHS update • Next month at SFH 				

Chief Executive Report – June 2018

Overall update

Please find the latest harm information below:

	Monthly figure
C Diff	2
MRSA	0
Ecoli	2
Grade 4 avoidable Healthcare Associated Pressure Ulcers	0
Falls which cause moderate or severe harm	2
Never events	0

Further information about the above is included in the Single Oversight Framework Performance Report and Appendix A details how we performed in May against our high level metrics for workforce, quality, access and finance. It is pleasing that we delivered three of the four key access standards in May, as we believe timeliness of care is a key contributor to overall patient experience. We continue to make progress with the referral to treatment (RTT) standard.

In June we concluded our listening exercises with staff to understand more about their experiences in winter 2017-18 and we have made progress with our plan for winter 2018-19. Simon Barton, Chief Operating Officer, will update on this today. Due to the timing of the divisional performance meetings, the actions from June's meetings have not been included in this paper but a verbal update, if required, will be provided by the Chief Operating Officer.

The Trust's overall risk profile remains stable, and continues to demonstrate active review across all divisions and corporate services. Finance and staffing remain the most common cause of increased risk exposure within clinical services. This is reflective of our principle risks identified within the Board Assurance framework that identified Financial sustainability; Managing emergency and Staffing levels as our highest principle risks.

In May 2018, executive colleagues and I visited the following areas, amongst others, to listen to and thank staff:

EAU, Labs, Lindhurst Ward, Newark General Office, Pre-op, Radiology, Stroke Early Supported Discharges, AECU, Booking team, Cath Lab, Chatsworth Ward, Clinic 3, Community Hub, Critical Care, ED, Endoscopy, Fracture Clinic, GSU Comm Cell, J3 and J4, KTC Patient Experience Team, Maternity, Mansfield Community Hospital, Medical Students, Microbiology, Mister Ward, MRI, Newark Daycase, Newark Medical Records, Newark Outpatients, Newark PPCS Newark UCC, Oakham Ward, Orthotics, Outpatients X-Ray, Pharmacy, Sconce, Sexual Health, Therapy services, Ward 14, Ward 25, Ward 31, Ward 32, Ward 34, Ward 43, Ward 44.

Wider SFH news

Learning Disability Review

The executive team and other senior leaders received some excellent feedback on how our staff support people with a learning disability and/or autism when they come into hospital. NHS

Improvement asked “Changing Our Lives” to review how we are doing and the feedback was truly inspiring. I will provide a more detailed update in Board and I would like to thank Ruth Harrison, Learning Disability Specialist Nurse, in particular for her work in this area.

East Midlands Leadership Academy

I was delighted to be confirmed as the new Chair of the East Midlands Leadership Academy and I took over in the role in mid-June from Gavin Boyle who is Chief Executive of Derby FT. The East Midlands Leadership Academy is a membership organisation created in November 2009 aimed at developing leaders for NHS organisations in the East Midlands. Its central aim is to “Improve services to patients, carers and service users through inclusive, more effective leadership.” My reason for wanting to get involved in this was because I firmly believe the best possible patient care can only be provided by teams of highly engaged, well supported staff. Given financial and staffing pressures across the NHS, we need leaders with different skill sets, capabilities and beliefs to support these staff and I am excited about playing a role in shaping this across the East Midlands. I believe the work of EMLA can support the journey we are on at Sherwood.

Care Quality Commission (CQC) inspection

At the time of writing we have not received the draft report but if it arrives before Board, I will provide a verbal update.

Chief Nurse Awards

It was my second time at the Chief Nurse Awards and it reminded me of everything good at Sherwood; huge individual effort, lots of smiling staff who were laughing and hugging each other, personalised patient care, safe care, great outcomes, loads of support and team work to name but a few. The full details of everyone who was shortlisted and won are contained in the Chair’s report but I would like to say congratulations to everyone involved and in particular, I would like to recognise Penny Tindall, Lead Cancer Nurse, who won the overall Chief Nurse Award for 2018.

National Volunteers’ Week

Earlier this month was National Volunteers Week and it was a great opportunity to recognise the positive impact our 650 volunteers have. Every hospital I have worked in has had volunteer support but I can honestly say I have never worked anywhere with a team of volunteers who are so dedicated, proactive and friendly. Thank you so much to Tracey Brassington and her team.

Paul Moore

Paul Moore has been offered a new substantive job as Director of Governance and Quality Improvement at Wirral University Teaching Hospital NHS Foundation Trust. Paul initially joined Sherwood in January 2016 and towards the end of 2016 he joined St George’s for eight months before re-joining us in March 2017. Paul has done an excellent job at transforming our approach to and our understanding of risk and governance and I have personally learnt a lot from him in my time at the Trust. I know Paul will be an absolute asset to WUTH and I wish him lots of success in his new role. I will not be replacing Paul’s role and instead, it is my intention to divide Paul’s

executive responsibilities between pre-existing members of the team as I believe this is the most effective way of building on the progress that has been made already.

Wider NHS update

Key updates since last Board are:

- The Secretary of State for Health and Social Care Jeremy Hunt has announced a number of new measures designed to improve patient safety and protect doctors and nurses when mistakes are made. These include the investigation of every hospital death by a medical examiner or coroner, and data on doctors' performance to allow them to see how they compare to others to help them improve.
- A report by the Institute for Public Policy Research (IPPR) says that machines could take over a wide range of tasks currently done by doctors, nurses, healthcare assistants and administrative staff. It found that widespread adoption of AI and the NHS embracing "full automation" could free up as much as £12.5bn a year worth of staff time for them to spend interacting with patients. The report goes on to say that there would not be significant job losses because unlike other settings, machines would work alongside human beings, not replace them.
- Spending on social care is 9% lower per person than a decade ago despite extra government funding and councils trying to protect services by switching money from other budgets, a report by the Institute for Fiscal Studies said.
- The government have announced the NHS England budget will increase by 3.4% a year on average over the next five years, starting in April 2019. That means by 2023 the budget will be £20bn higher than it is now, once inflation is taken into account. Currently, NHS England spends £114bn a year, but the plan does not include other parts of the wider health budget, such as training, stop-smoking clinics and other preventative services, so the overall "health" increase might be lower than 3.4%. The average annual rise since the foundation of the NHS in 1948 is 3.7%.

Next month at SFH

We will be responding to the CQC draft report and will begin the process of updating and refreshing our strategy.

Appendix A: Performance Infographic

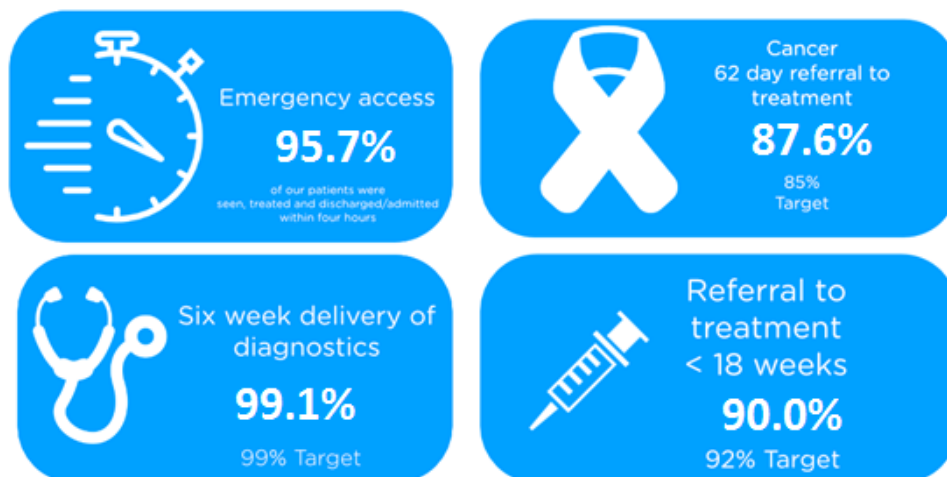
Dedicated to Outstanding care

Workforce



Dedicated to Outstanding care

Access



Dedicated to Outstanding care

Quality



Dedicated to Outstanding care

Finance

