

Board of Directors Meeting in Public - Cover Sheet

Subject:	Chief Executive's Report		Date: 20 December 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			Approval	
			Assurance	X
			Update	
			Consider	
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 – December 2018

Overall update








Please find the latest harm information below:

	Monthly figure	Year to date figure
C Diff	4	27
MRSA	0	0
Ecoli	4	22
Grade 4 avoidable Healthcare Associated Pressure Ulcers	0	0
Falls which cause moderate, severe or catastrophic harm	3	20
Never events	0	1

Further information about the above is included in the Single Oversight Framework Performance Report and Appendix A details how we performed in November against our high level metrics for workforce, quality, access and finance.

We are definitely starting to feel winter pressures with our admissions increasing and the number of patients seen, treated and discharged or admitted within four hours decreasing to 93.1% from 94.4%. However we are still at 95.1% for our year to date performance which is a reflection of everyone's hard work. I focus on the access targets because I know that timeliness of care is a good indicator of quality of care and because I know that if my family member was sick and in an Emergency Department, I would want them seen and treated as quickly as possible. A number of measures as detailed in our winter plan have started in December, such as the use of 20 extra beds in the community, and I am hopeful that these will start to make an impact. We are also going to be sending some targeted public messages around days we know we traditionally see a lot of patients (such as the Monday before Christmas Day, Boxing Day and then the Monday after Boxing Day) which will complement the national campaign by reminding members of the public of the full range of NHS services available to them.

The Trust's overall risk profile was reviewed at the Risk Committee in December and remains stable.

Principle Risk	Current Risk Exposure	Tolerable risk
PR 1: Catastrophic failure in Standards of Care	High (12)  (no change)	Low (4)
PR2: Demand that overwhelms capacity	Significant (16)  (no change)	Medium (8)
PR3: Critical shortage of workforce capacity & capability	Significant (16)  (no change)	Medium (8)
PR4: Failure to maintain financial sustainability	Significant (20)  (no change)	High (10)
PR5: Fundamental loss of stakeholder confidence	High (10)  (no change)	Low (5)
PR6: Breakdown of Strategic Partnerships	Med (5)  (Reduced)	Low (4)
PR7: Major disruptive incident	High (10)  (no change)	Low (5)

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

Ward 11, Ward 12, Ward 14, Ward 23, Ward 25, Ward 32, Ward 34, Clinic 1, Clinic 5, Clinic 9, Clinic 15, ED, EAU, CSU, UCC, ITU, GUM, Radiology, Pathology, Hydrotherapy, Pharmacy, Minster, Fernwood, Discharge Lounge, Sconce, Theatres, Critical Care, Cath Lab, Newark General Office, Newark Outpatients, Community Involvement Hub and Switchboard.

Wider SFH news

2018 Staff Survey update

The staff survey closed at the end of November and although I have not seen the final response rate we were at 59.4% which is better than the response from last year which was 57% and we are expecting to be over 60% with the final count. Thank you to all SFH colleagues who took the time to respond to this year's annual NHS Staff Survey. Our high response rate gives us the confidence that when the report is released the findings reflect the collective views of a large majority of our staff. We won't receive the official report which will compare us with other acute NHS trusts in England until mid-February. Whilst the national report will be embargoed until early March, we will be able to start analysing the raw data and information locally and compare it to last year's results to look for any trends and themes. Additionally we can start planning feedback to teams, for us to celebrate what we do well and work together on any areas for improvement.

We also received the national Quarter two update on staff engagement results. We had already published our engagement scores but we were now able to compare them to the wider NHS. All staff were asked two questions; would you recommend your organisation as a place to receive care and would you recommend your organisation as a place to work? The results were:

- 88% per cent of colleagues said "yes" they would recommend Sherwood as a place to receive care
- And 77% of colleagues said "yes" they would recommend Sherwood as a place to work.

For the first time ever, we were first for both questions when compared to the other 16 trusts in the East Midlands. We were 20th and 38th respectively out of 213 trusts in the NHS and we had the sixth highest response rate.

I was pleased when I saw this because it suggests we are making progress. This evidence shows that colleagues at Sherwood, in general, feel more engaged than all other Trusts in the East Midlands and most other Trusts in the NHS. However we do know this is not consistently felt by everyone. We all know colleagues who do not enjoy the experience of working at Sherwood and I want to focus on this when the results come out to see how we can improve this further.

2018 Flu Survey update

The national information for flu vaccination rates by Trust has been published and it was very promising to see our uptake rate was sixth highest in the NHS out of 253 Trusts. This is a great commitment to safe care.

We are pleased that 80% of our SFH frontline staff have had their vaccination but I am still hopeful we can continue to improve on this by the end of December which will help ensure many of our patients and staff have been protected from this serious illness.

SFH asked to share our learning with a ‘buddy’

We will be buddying up with Queen Elizabeth Hospital Kings Lynn NHS Foundation Trust initially for 12 months. In particular the agreement will focus on supporting QEHL in three key areas: governance, quality improvement and clinical engagement.

The hard work of staff over the last three to four years at Sherwood has delivered huge improvements to the care we provide our patients, and I hope the way we support our staff. We were pleased this was recognised by the CQC in 2018. Buddying up with QEHL gives us a great opportunity to spread our learning as well as learning ourselves from another Hospital Trust. At Sherwood we recognise there are many areas we can further improve.

Dr Nick Lyons, Acting Chief Executive of The Queen Elizabeth Hospital NHS Foundation Trust said: “It is very positive that we are being buddied up with Sherwood as the team there understand the challenges we are facing here. We are looking forward to taking the learning from them and using it here to benefit our patients and staff.”

Details of the buddying arrangement are being worked out. It is anticipated it will include a mix of visits and phone calls to make best use of staff time from both organisations.

SFH departments and teams recognised nationally

It has been a positive month with Ruth Harrison and our learning disabilities team winning a national HSJ award for Enhancing Care by Sharing Data and Information and our Waste Management team winning the Sustainable Health and Care Award at the National Waste and Resource management awards for their great work in waste management. Congratulations to both.

The Quarter one “Sentinel Stroke National Audit Programme” national results were also published at yet again the care from our Stroke team was rated “A”, the best in the East Midlands and within the top ten in the NHS. Well done to the team.

Wider NHS update

Key updates since last Board are:

- Nottingham and Nottinghamshire Integrated Care System Update: A two day workshop took place where it was agreed there would be three layers within the system: Primary Care Network (PCN), Integrated Care Provider (ICP) and Integrated Care System (ICS). I am pleased that I have been confirmed as the ICP lead for Mid-Nottinghamshire and will be able to drive this ICP forward, building on all the positive that have already taken place as part of the Better Together vanguard. An ‘Outcomes Framework’ is also being developed which will enable both the leadership of the ICS and also patients to judge the success of the work of the ICS and guide its strategic decision making. The Outcomes Framework will also enable other bodies that have an influence on the progress of the ICS e.g. Health and Wellbeing Boards to align their work and activities. The framework is proposed to have one overarching set of outcomes focussed on improving the overall wellbeing of the Nottingham and Nottinghamshire population including increasing both overall life expectancy and health life expectancy and four supporting outcome strands: healthy lifestyle; people and communities; wellbeing and; quality of care.
- Brexit update: We continue to follow Government guidance and have a number of contingency plans in place. This means that regardless of what the outcome will be we are assured that patients should not be affected. In terms of staff, the EU settlement scheme

will launch in early 2019 allowing EU nationals to register for settled status if they have been here for five years, or pre-settled status if they have been here for less than five years. The process to register is simple and largely digital, and will cost £65 per adult and I am pleased to confirm that at SFH we will pay this cost for our staff.

- Winter planning: SFH was highlighted in an article by The Observer focusing on the measures hospitals are putting in place ahead of winter. Our purchase of 20 additional beds in the community, as highlighted in the Winter Plan previously discussed at Board, was highlighted. The article also focused on measures other organisations are taking including expanding A&Es, paying for patients to be cared for in nursing homes and looking after more people at home.
- Fax machines: Health and social care secretary Matt Hancock has banned the purchasing of fax machines in the health service and has ordered the NHS to phase out the outdated machines by March 2020. The Department of Health and Social Care said that, by then, all NHS organisations will be required to use modern communication methods, such as secure email, to improve patient safety and cyber security.
- Joint NHS England and NHS Improvement structure announced: The new joint executive team for NHS England and NHS Improvement has been announced as: Julian Kelly (joint chief financial officer), Professor Stephen Powis (medical director), Ruth May (chief nursing officer), Matthew Swindells (deputy chief executive), Pauline Philip (director of emergency and elective care), Ian Dodge (director for strategy and innovation) and Emily Lawson (director for transformation and organisational development). Simon Stevens and Ian Dalton remain chief executives of NHS England and NHS Improvement respectively. Recruitment is still ongoing for the roles of chief commercial officer, chief improvement officer, chief people officer and chief provider strategy officer. Under the executive team will be seven new regional teams. The regional directors have also been announced this month with Dale Bywater confirmed as Regional Director for the Midlands.

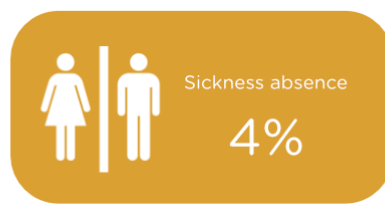
Next month at SFH

We will continue to prepare our new strategy and implement our winter plan.

Appendix A: Performance Infographic

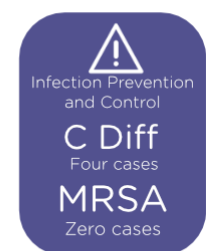
Dedicated to Outstanding care

Workforce



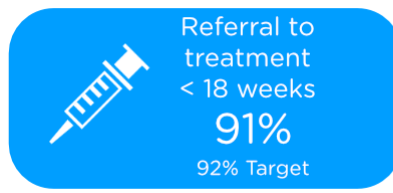
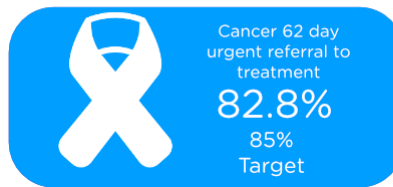
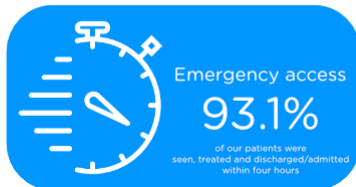
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Quality



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Access



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Finance

