

**Board of Directors Meeting in Public - Cover Sheet**

<b>Subject:</b>	Acting Chief Executive's report		<b>Date:</b>	3 <sup>rd</sup> October 2024	
<b>Prepared By:</b>	Rich Brown, Head of Communication				
<b>Approved By:</b>	David Selwyn, Acting Chief Executive				
<b>Presented By:</b>	David Selwyn, Acting Chief Executive				
<b>Purpose</b>					
An update regarding some of the most noteworthy events and items over the past month from the Acting Chief Executive's perspective.				<b>Approval</b>	
				<b>Assurance</b>	Y
				<b>Update</b>	Y
				<b>Consider</b>	Y
<b>Strategic Objectives</b>					
Provide outstanding care in the best place at the right time	Empower and support our people to be the best they can be	Improve health and wellbeing within our communities	Continuously learn and improve	Sustainable use of resources and estates	Work collaboratively with partners in the community
Y	Y	Y	Y	Y	Y
<b>Principal Risk</b>					
<b>PR1</b>	Significant deterioration in standards of safety and care				
<b>PR2</b>	Demand that overwhelms capacity				
<b>PR3</b>	Critical shortage of workforce capacity and capability				
<b>PR4</b>	Insufficient financial resources available to support the delivery of services				
<b>PR5</b>	Inability to initiate and implement evidence-based Improvement and innovation				
<b>PR6</b>	Working more closely with local health and care partners does not fully deliver the required benefits				
<b>PR7</b>	Major disruptive incident				
<b>PR8</b>	Failure to deliver sustainable reductions in the Trust's impact on climate change				
<b>Committees/groups where this item has been presented before</b>					
None					
<b>Acronyms</b>					
AGM = Annual General Meeting BAF = Board Assurance Framework BMA = British Medical Association CDC = Community Diagnostic Centre EMAP = East Midlands Acute Provider			NSDC = Newark and Sherwood District Council PIFU = Patient Initiated Follow Up RTT = Referral to Treatment SFH = Sherwood Forest Hospitals UK = United Kingdom		
<b>Executive Summary</b>					
An update regarding some of the most noteworthy events and items over the past month from the Acting Chief Executive's perspective.					

# Operational updates

## Overview of operational activity

Demand across our urgent and emergency care pathway eased in August 2024, which supported a significant improvement in our emergency access performance (otherwise known as four-hour performance) to 82% -- the highest monthly position since February 2022. The improved performance demonstrates that with manageable levels of demand, our underlying systems and processes are robust.

We continue to benchmark among the best trusts in the country for ambulance handovers, recognising the emphasis we place on releasing ambulance crews to respond to the needs of our local community. The Trust's success in this area is due to be shared in the *Outstanding Service* video at October's Public Board meeting.

We are seeing a continued reduction in the number of planned care patients on our waiting list, including those patients waiting over 52-weeks. Unfortunately, both these metrics are behind planned levels in August 2024. We have also fallen behind our plan for 65-week waits in August 2024, which is in-part driven by the support we are offering across the system, together with the interplay between Referral to Treatment (RTT) and cancer pathways and staff availability over the holiday period.

At the end of September 2024, the Trust has no patients waiting more than 78-weeks for treatment.

In outpatients, activity levels remain strong and favourable to plan for outpatient firsts, follow-ups and procedures. We consistently exceed the 5% Patient Initiated Follow Up (PIFU) target and benchmark within the top 15 trusts nationally. In July 2024 and August 2024, we exceeded our plan against the new outpatient metric measuring the proportion of outpatient attends that are first or follow-up with a procedure.

In terms of our cancer metrics, we continue our strong delivery of the national 28-day faster diagnostic standard exceeding the national standard. As of July 2024, we have consistently delivered against our planning trajectory for cancer 31-day treatments. Unfortunately, we were off-track against our planning trajectory for the cancer 62-day treatment standard in July 2024, after previously having set a very ambitious plan for that month. Despite this, we remain better than the England average position and above the interim standard of 70% for the cancer 62-day standard.

While the Trust has not been notified of any further periods of planned industrial action during the past month, we have welcomed the news that the British Medical Association (BMA)'s junior doctors committee (JDC) in England has accepted the Government's pay offer, with 66% of resident doctors (also known as junior doctors) voting in favour of the deal. We hope that this agreement will bring an end to the ongoing industrial action that has affected NHS organisations across the country for more than a year.

A more comprehensive update on our operational performance is due to be presented at the November 2024 Trust Board meeting, where we are due to reflect on our quarter two 2024/25 performance.

## “Martha’s Rule” initiative launches at King’s Mill Hospital



King’s Mill Hospital has become one of the first in the UK to introduce Martha’s Rule – a scheme which provides patients and their families with easy access to an urgent review if their condition worsens. The site is one of 143 in the country who have chosen to pilot the first phase of the major patient safety initiative – six months ahead of the deadline of March 2025.

Martha’s Rule provides a clear and consistent way for patients, their families and carers to seek an urgent review if they feel a patient’s condition is deteriorating and not being responded to quickly enough by staff.

It will apply to all inpatients across all areas of the hospital, including Maternity, Paediatrics and the Emergency Department from the point when a decision is taken to admit the patient.

The acute hospital already has an established 24/7 Critical Care Outreach Team, which enables staff to escalate concerns about a patient’s condition. This will now be extended and, for the first time, the specialist team will be directly available to patients and their families, so they too can escalate care concerns if they feel there has been a noticeable change or deterioration in a patient’s condition.

Patients, their families and carers should first raise their concerns with the teams who are caring for the patient. If they remain concerned then they are now able to call a dedicated phone number – 07385 115 574 – to activate Martha’s Rule and speak to the Critical Care Outreach Team, who will listen to their concerns and act immediately to review the patient.

Clinicians will also record daily information about a patient’s health directly from them or their families. This will ensure that the vitally important concerns of those who know the patient best are listened to and acted upon and allow the teams caring for them to be responsive to the patient’s needs sooner.

The need for this escalation of care will hopefully only be needed in a limited number of cases but will provide an extra safety net.

We are delighted to be supporting this vitally important national initiative working together with our patients for better communication and to ensure that the concerns of our patients and their families are really

listened to. We want to be known as an outstanding local hospital that delivers quality services for our patients, delivering consistently outstanding care by compassionate people.

This is an important step forward for patient care and safety, which will always be our priority.

Outstanding Care,  
Compassionate People,  
Healthier Communities

NHS  
Sherwood Forest Hospitals  
NHS Foundation Trust

# MARTHA'S RULE

Are you worried about a change in a patient's condition?  
Have you asked your patient how they are feeling today?  
Are their relatives and carers also concerned?

**Learn how you and they  
can now activate Martha's Rule**

**Call 07385 115 574**

To speak to our Critical Care Outreach Team (CCOT) who will listen to your concerns

Go to **'Martha's Rule'** on the Intranet to find out more

**#HearMeHelpMe**

## Trust staff flu vaccination campaign begins

Another key component of the Trust's preparations for winter are the roll-out of free flu vaccinations to Trust colleagues. This year's staff flu campaign has now begun: the campaign has made a great start, with hundreds of colleagues already having received their free flu vaccinations in the campaign's first week.

Each year, we see a great uptake from Trust colleagues who come forward in their thousands each year to receive their free flu vaccines. Last year, the Trust's staff flu vaccine uptake was among the best in the East Midlands.

We know that vaccines are among our best defence against flu and the Australian flu season suggests that this year's UK flu season is predicted to be one of the toughest in recent years following the pandemic.

As someone who works in a hospital setting, I have been involved in the care of patients requiring critical care support as a result of Influenza virus. Choosing to protect myself, my family, my colleagues and patients, I have received my free flu vaccine and would professionally advise all colleagues to do the same. Those members of the Trust Board not already vaccinated will be offered their vaccines on the day of October's Trust Board meeting.

## Partnership updates

### **Provider collaboratives**

The Trust is increasing its contribution to its two provider collaboratives, with both collaboratives' 2024/25 workplans are progressing well.

The Nottinghamshire collaborative is focusing on key priorities of elective care, people, corporate back-office efficiencies and sustainable estates. The regional East Midlands Acute Provider (EMAP) collaborative is heavily focused on fragile services, digital opportunities and procurement.

In October, Chief Executives and Chairs are due to meet to discuss further opportunities for collaboration.

### **Working more closely with general practice**

The Trust's Medical Director, with the support of the Strategy and Partnerships Team, has established an interface group linking SFH consultants with general practitioners in Mid Nottinghamshire.

The group aims to improve patient's experience of care as they move from primary into secondary care and back by developing collaborative working, agreeing improvements, reviewing progress and promoting successes.

Early work has focused on those areas where small changes can improve efficiencies, including work to streamline the interface between primary care and urgent and emergency care teams by clarifying their respective responsibilities, the appropriate prescribing practice and the process for onward referrals.

### **Supporting partner district councils in developing local plan for towns vision**

The Trust's three local district councils have been preparing their local plans for their towns' vision – the next step in the levelling-up programme to regenerate local towns across the country. Local towns identified are Kirkby-in-Ashfield, Mansfield and Newark-on-Trent.

The Plan allocates up to £20million per town, focused on safety and security; high streets, heritage and regeneration; and transport and connectivity.

Following the forming of the new government, the local plan for towns programme is under review by the Secretary of State. Once the future of the programme is confirmed, SFH – through its membership of the place boards – will continue to support its local partners in progressing this work for the benefit of the local communities it serves.

### **Working with Newark and Sherwood District Council (NSDC) to improve hospital discharge**

The Trust and NSDC recently hosted a workshop to focus on improving hospital discharge for Newark and Sherwood patients.

It was well-attended by the Council and the Trust, along with wider partners from primary care networks. The commitment and compassion of all partners was evident during the session, with all attendees focused on the needs of patients and citizens and what can be done to support them.

The event established valuable relationships between council and hospital teams, agreed a small number of quick wins with a long-term action plan developed.

## Other Trust updates

### Trust hosts Annual General Meeting (AGM) and latest *Step into the NHS* event

On Tuesday 24<sup>th</sup> September 2024, the Trust hosted its 2023/24 Annual General Meeting at King's Mill Hospital to provide an in-depth look at the Trust's performance over the past financial year, as well as highlighting how the Trust is planning to meet the challenges it will face for the remainder of 2024/25 and beyond.

The Trust's Annual Report and Accounts for the year ending 31<sup>st</sup> March 2024 were also formally presented at the meeting, with our annual report already having been published on the Trust's website at [www.sfh-tr.nhs.uk/about-us/publications-and-reports/](http://www.sfh-tr.nhs.uk/about-us/publications-and-reports/) along with our Quality Report.

As with last year's Annual General Meeting, this year's event was again hosted alongside the Trust's latest *Step into the NHS* careers showcase event to give anyone attending the event an opportunity to find out more about the work that is going on across our hospitals.

Our Step into the NHS events are a fantastic opportunity for individuals to explore the range of career opportunities within the Trust with potential job seekers, in a range of both clinical and non-clinical roles.

The event also continued our work with our partners from West Notts College and Nottingham Trent University as two local education providers who can support anyone looking to explore a career within their local NHS.

### Revised plans approved for Nottinghamshire's first Community Diagnostic Centre



In early September 2024, we welcomed the news that revised plans to build a state-of-the-art Community Diagnostic Centre (CDC) at Mansfield Community Hospital have been approved by planners at Mansfield District Council.

Once built, the new facility will serve as a one-stop shop for patients across Nottinghamshire to access tens of thousands of health checks and tests in a single visit, reducing referral times and enabling patients to receive diagnoses more swiftly.

The plans for the building have been carefully revised to move from a two-storey design to a single-storey design, which has helped to reduce construction costs and make better use of existing space at the Hospital – without reducing the benefits to patients.

The redesign incorporated feedback from clinical colleagues to better meet the needs of local people and the services they will access there, while making more effective use of the existing Mansfield Community Hospital buildings.

The move will ensure that the Trust is spending public money as efficiently as possible, helping to focus more of the budget for the project on providing the vital tests that will eventually be delivered there.

This news is another significant and exciting milestone for our local NHS and the patients we serve. With demolition work now complete on the derelict building that has been removed to make way for the new facility, work to create a permanent home for Nottinghamshire's first Community Diagnostic Centre is on-course to provide our local communities with modern, efficient healthcare facilities that complement the existing services they can already access across our local NHS.

Since the project began in October 2023, the Trust has worked to deliver almost 40,000 blood tests from existing NHS sites as part of the Community Diagnostic Centre programme. They include a range of blood tests, heart scans and ultrasound scans that are already being delivered from a range of sites, including Mansfield Community Hospital, Newark Hospital and the Nottingham Road Clinic in Mansfield.

The Trust's commitment to sustainability has also played a significant role in shaping the revised design, with the new building to meet high environmental standards. Importantly, those environmental benefits have been achieved without benefiting the range of services being offered at the Centre.

The design of the new building has been developed following extensive consultation with the doctors, nurses and other healthcare professionals who have been able to design the new Centre to meet the needs of the new services that will be offered there.

The Centre is due to open in 2025 and will also offer a wide range of diagnostic services - including blood testing, ultrasound, and endoscopy services. It will be great to see the positive impact this will have on patient care in the future.

The revised planning application was unanimously approved by Mansfield District Council's Planning Committee on Monday 2 September, subject to a 'Section 106' agreement being implemented to secure a £18,400 contribution towards improvements to local bus stop infrastructure, a proposal to secure a 10% net gain of biodiversity in the area and a contribution towards local travel plan monitoring.

For more information about the planning application, the project and the services that will be provided there, please visit the CDC website at [www.sfh-tr.nhs.uk/cdc](http://www.sfh-tr.nhs.uk/cdc)

You can also speak to one of our Trust's growing number of passionate 'CDC Ambassadors' who are helping to spread the word about this exciting project among our patients, their colleagues and our local communities.

### **Update on the Trust's involvement in the national Thirlwall Inquiry**

I have previously updated the Trust's Board on the Trust being asked to contribute evidence into the Thirlwall Inquiry into examining the events at the Countess of Chester Hospital and their implications following the trial, and subsequent convictions, of former neonatal nurse Lucy Letby of murder and attempted murder of babies at the hospital.

To date, the Trust's involvement has included:

- To complete and return its response to the Rule 9 Request
- To complete the data sharing agreement in relation to the Inquiry's requirement for a list of midwives, doctors, nurses and managers in SFH's neonatal unit so they could be asked for their views on the culture in the unit

- To issue a notice to staff informing them that the Inquiry will commence its sittings on Monday 16 September 2024 and to offer appropriate avenues for staff to discuss any concerns and source support.

The Inquiry's terms of reference detail the three broad areas it will investigate, which are:

- A. The experiences of the Countess of Chester Hospital and other relevant NHS services, of all the parents of the babies named in the indictment.
- B. The conduct of those working at the Countess of Chester Hospital, including the board, managers, doctors, nurses and midwives with regard to the actions of Lucy Letby while she was employed there as a neonatal nurse and subsequently, including:
  - i. whether suspicions should have been raised earlier, whether Lucy Letby should have been suspended earlier and whether the police and other external bodies should have been informed sooner of suspicions about her
  - ii. the responses to concerns raised about Lucy Letby from those with management responsibilities within the trust
  - iii. whether the trust's culture, management and governance structures and processes contributed to the failure to protect babies from Lucy Letby
- C. The effectiveness of NHS management and governance structures and processes, external scrutiny and professional regulation in keeping babies in hospital safe and well looked after, whether changes are necessary and, if so, what they should be, including how accountability of senior managers should be strengthened. This section will include a consideration of NHS culture.

The Trust will continue to support the inquiry when approached, with updates being formally fed via the Trust's People Committee for ongoing Trust oversight of its involvement in the Inquiry.

## Trust risk ratings reviewed

The Board Assurance Framework (BAF) Principal Risk 7 – 'A major disruptive incident' – for which the Risk Committee is the lead committee, has been scrutinised by the Trust's Risk Committee.

Committee members discussed the risk scores and assurance ratings but decided that they should remain unchanged.

The full and updated Board Assurance Framework (BAF) is next due to be presented at the Public Meeting of the Trust's Board of Directors in November.