

<b>Report to:</b>	Trust Board (Public)	<b>Agenda item:</b>	<b>SFT4076</b>
<b>Date of Meeting:</b>	2 August 2018		

<b>Report Title:</b>	Chief Executive's Report			
<b>Status:</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
	X			
<b>Prepared by:</b>				
<b>Executive Sponsor (presenting):</b>	Cara Charles-Barks, Chief Executive			
<b>Appendices (list if applicable):</b>	None			

<b>Recommendation:</b>
None

<b>Executive Summary:</b>
<p>This report provides an update for the Trust Board on some of the key issues and developments within this reporting period and covers:</p> <ul style="list-style-type: none"> <li>• <b>Recovery following the major incident</b> – update on second incident</li> <li>• <b>Performance</b> – update on current performance</li> <li>• <b>Financial recovery</b> – update on our financial recovery plan</li> <li>• <b>Workforce</b> – update on workforce situation</li> <li>• <b>Quality Account</b> – publication of the Trust's Quality Account</li> <li>• <b>Defence Medical Welfare Service for the Armed Forces</b> – new support at SDH for the armed services personnel and their families</li> <li>• <b>NHS 70<sup>th</sup> anniversary</b> – activities and events that supported the NHS birthday</li> <li>• <b>Top 70 NHS Confederation Stars</b> – staff acknowledged for their work during the major incidents</li> <li>• <b>International Chronic Myeloid Leukaemia Foundation award</b> – congratulations to Nick Cross, Director of the Wessex Regional Genetics Laboratory</li> </ul>

## **Recovery following the major incident**

The second patient involved in the major incident in Amesbury has now been discharged from hospital. We have stepped down from the major incident and I want to use my Chief Executive's report to publicly thank our staff again for their support over the last month and to recognise their skills and the professionalism they have shown throughout this incident. Their response to the first incident received praise at the highest level and this has been repeated again through the latest incident. The last five months have been a major challenge for the hospital. However, this has given us experience that we can benefit from. We are now the most experienced hospital in dealing with Novichok poisoning – not just in the UK, but in the world and we will use this as a real opportunity for learning that can be used throughout the whole of the NHS. We are continuing to work closely with all agencies to promote the city as part of the recovery phase.

## **Performance**

It is essential that we continue to provide good quality safe care and we have seen improved performance across our main quality indicators in the latter part of the first quarter of the year. While we had one case of Trust apportioned MRSA bacteraemia in May, (the first case in three years) we have had none since then and no cases of c. difficile. We have had no grade three or four pressure ulcers this year. In June there were also no falls resulting in major or moderate harm. There are a number of other significant quality indicators which are covered in the Trust Board report. Quality performance is, and will continue to be, a key focus for us in our internal communications with staff. In terms of our operational performance, we have had a slight improvement on our emergency department target. We have also met our diagnostic and main 18 week referral to treatment waiting time targets. We are not meeting our cancer two week and 62 day targets for June, although nationally, these are measured quarterly and we are still validating the figures. Work is ongoing to ensure our patients get good quality, timely treatment and improvement programmes are in place to ensure that we deliver against each of our cancer pathways.

## **Financial recovery**

Now that we have agreed the revised control total for the year with NHS Improvement, we are on our first steps to achieving additional funding in line with the national Provider Sustainability Funding (PSF) regime. The financial position at the end of quarter one, where the Trust achieved the planned deficit, meant that we earned an additional £0.4m of funding, which is important to our cash flow as we move forward. This is a good start to the year. However, we still have some significant financial challenges ahead. Our non-elective (emergency) activity levels have been above planned levels, putting even more pressure on our capacity, both in terms of beds and our staff. It will be even more important that we work with our system partners to manage patient flow over the coming months, if we are to achieve our challenging financial plan.

## **Workforce**

We continue to organise recruitment events and campaigns, both domestically and internationally and are working with a new provider to undertake Skype interviews with international nurses who have already passed the International English Language Testing System (IELTS). We will keep the Board informed over the coming months of the pipeline and our evaluation of the cost effectiveness of these campaigns. We have been implementing a new exit interview process and 100 days questionnaire and have given a brief summary of the exit questionnaires to date in the Board papers. The Trust's overall sickness absence rate is also now 2.9%, below the 3% target, but we continue to support specific areas to proactively manage sickness absence with the aim of reducing sickness absence to a sustainable level below target. We are also continuing meetings of the Staff Engagement Group which started in June, and a progress report is contained in the Board papers.

## **Publication of our Quality Account**

We have published our Quality Account which sets out our priority areas for the coming year and our performance against a range of quality indicators. This is a legal requirement and Quality Accounts are audited in much the same way as our financial accounts to ensure that hospitals have effective systems in place to assure the quality of care, and that patients have access to a greater range of information that can help them judge the standard of their local hospital. Patient safety and the quality of care is our number one priority and our Quality Account covers our performance against a range of quality areas and also gives us an opportunity to highlight the excellent work carried out by our staff right across the hospital. The Quality Account, together with our Annual Report and Accounts, which give more detailed operational and financial information, are on our website at [www.salisbury.nhs.uk](http://www.salisbury.nhs.uk) We also have a summary leaflet which includes key points and headline figures for our staff so that they are fully aware of our performance and our priorities for the 2018/2019 year.

## **Defence Medical Welfare Service for the Armed Forces (DMWS)**

We are working closely with the Defence Medical Welfare Service for the Armed Forces and they now have a welfare officer who visits wards twice-weekly to provide advice on the support that they can offer to patients, families and carers with an armed service background. DMWS is an independent charity which provides practical and emotional support to the armed forces community when they receive medical treatment. While they work with patients and family on their medical needs, they can also support them through other problems or issues that may affect their overall wellbeing. We have a commitment to support current and former armed service personnel and have signed up to the armed service covenant which sets out a number of principles that hospitals should follow to ensure that they meet the needs of this particular group of patients. The work that we are doing with DMWS reinforces our commitment in this area and supports our existing services.

## **NHS 70<sup>th</sup> celebrations**

We carried out a number of activities to celebrate the NHS 70th anniversary and we have had an excellent response from the public, staff and the rest of the NHS, bearing in mind that we were dealing with another major incident on the day of the main celebration. We kicked off our own celebrations with a fantastic event in Salisbury Cathedral in June, followed by the staff BBQ. We organised a number of activities on the day to celebrate the 70th anniversary which included special menus for patients and a historical exhibition along the Springs Restaurant walkway with a photos timeline. All parents of babies born on July 5 also received a certificate marking the occasion. BBC Radio Wiltshire ran their Breakfast programme live from Springs Restaurant on the morning, highlighting the history of healthcare in Salisbury and the excellent work that has taken place across the hospital over the years. This was a fitting tribute to our staff both past and present and it was a proud moment for me as Chief Executive here in Salisbury.

## **Top 70 NHS Confederation Stars**

I want to congratulate our emergency and intensive care teams who were placed in the top 70 NHS Confederation Standout Stars. The teams were put forward following their response to the first Salisbury incident, which attracted local, national and international recognition for their professionalism, dedication and skills in dealing with the situation. Our teams are a tribute to the day-to-day care they provide for our patients and the way they responded to the Salisbury incident and this was another piece of welcome recognition for all that they do for our patients and our community.

## **Professor Nick Cross wins prestigious scientific award**

Well done to Professor Nick Cross who has won a prestigious award from the International Chronic Myeloid Leukaemia Foundation (iCMLf). Nick is Director of the Wessex Regional Genetics Laboratory at Salisbury District Hospital. The award is given to outstanding lifetime contributions to the understanding of the biology of Chronic Myeloid Leukaemia and recognises Nick's considerable scientific achievements through his work to better understand the genetics involved in the condition and the development, validation and standardisation of genetic tests.

**Cara Charles-Barks**  
**Chief Executive**