



**TRUST BOARD**  
**31<sup>st</sup> October 2019**

<b>AGENDA ITEM</b>	14.2
<b>TITLE OF PAPER</b>	Chief Executive's Report
Confidential	No
Suitable for public access	Yes
<b>PLEASE DETAIL BELOW THE OTHER SUB-COMMITTEE(S), MEETINGS THIS PAPER HAS BEEN SUBMITTED</b>	
n/a	
<b><u>STRATEGIC OBJECTIVE(S):</u></b>	
<b>Quality Of Care</b>	√
<b>People</b>	√
<b>Modern Healthcare</b>	√
<b>Digital</b>	√
<b>Collaborate</b>	√
<b>EXECUTIVE SUMMARY</b>	Highlights from the month
	This report provides assurance to the Board that the Chief Executive is providing enabling leadership to the organisation across domains of activity and focus that align to the strategic objectives. Work to create the #RightCulture continues so that TeamASPH feel they are able to work in an empowered way within a safe, caring and transparent environment.
<b>RECOMMENDATION:</b>	Take Assurance
<b>SPECIFIC ISSUES CHECKLIST:</b>	
Quality and safety	#RightCulture focus in order to enable and promote quality of care safety and integrity
Patient impact	Improves and enables Quality of Care
Employee	Improves, enables, values and recognises the Team
Other stakeholder	Improves and enables collaboration and partnership working

Equality & diversity	Demonstrates our #RightCulture values
Finance	Modern Healthcare focus on delivering constitutional standards, financial plans and encouraging innovation and efficiency.
Legal	No
Link to Board Assurance Framework Principle Risk	No
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<b>PRESENTED BY</b>	Suzanne Rankin, Chief Executive
<b>DATE</b>	23 October 2019
<b>BOARD ACTION</b>	Receive

## **#RightCulture**

On Thursday 3rd October we held our annual Staff Achievement Awards at Sandhurst Military Academy. As always, this was a real highlight and a fabulous evening of celebration; recognising the contribution of all Team ASPH and those who go above and beyond for patients and colleagues. You can read more detail in my [weekly message](#) to the team and also take a look at videos from during and after the event on the ASPH [You Tube](#) channel. I felt a huge sense of pride throughout the awards ceremony and listening to the individual stories of excellence was very inspiring.

## **Quality of Care**

### **Flu Vaccination Campaign**



The seasonal campaign to vaccinate staff against flu began earlier in October and we've had a very strong start with over 1100 colleagues receiving the vaccination. Last year we took a new approach to our campaign, focusing on personal responsibility to protect ourselves, patients and our families. We highlighted the fact that even if you don't contract flu yourself, you can carry and pass it onto others who may be more vulnerable.

We also introduced Peer Vaccinators, colleagues in clinical roles across various divisions who can bring the vaccinations to the front line and make it as easy and accessible as possible for team members to receive it. This worked really well and I'm pleased we have a team of 25 Peer Vaccinators this year ready and willing to help.

Occupational Health are doing a fantastic job co-ordinating the distribution of the vaccine and encouraging uptake. As an executive team we have been taking every opportunity to promote

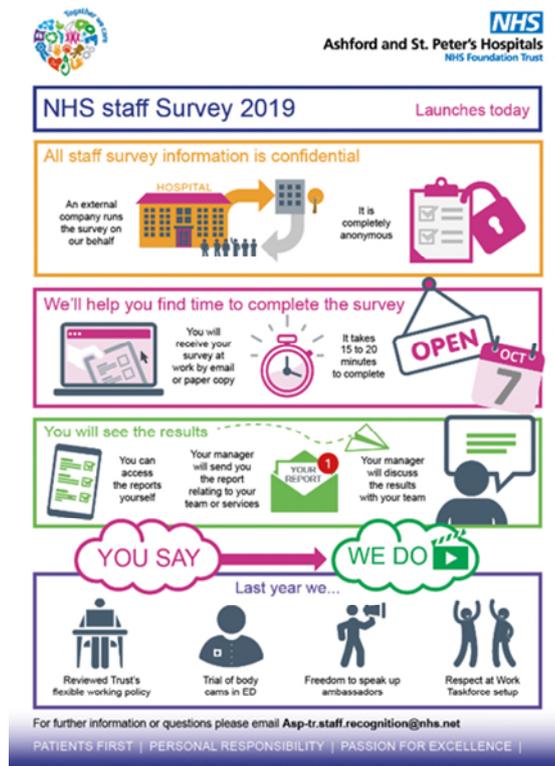
the importance of receiving the vaccine and my [weekly message](#) on 21st October explained all the reasons why.

We were also delighted to put Dr David Fluck, Medical Director, forward for an interview on BBC Surrey radio, to discuss the importance of healthcare workers receiving the vaccine and our successful approach at ASPH. You can listen to that [here](#) from 1 hr 12 mins into the recording.

## People

### **Staff Survey**

Our annual staff survey is out now and we are encouraging as many colleagues as possible to complete this. The campaign includes infographics such as the one below to explain the process, deadlines and how the information is used. We hope to achieve a good response rate and use this very valuable information to understand the current experience of working at the Trust and how we can improve this going forward. As we move into our exciting transformation programme, this is more important than ever.



## Digital

### **Electronic Patient Record (ePR) Update**

We have made good progress this month on the contract discussions and are now very close to contract signature. Our next steps are putting the correct governance in place, working up our resource plan and developing plans for a joint launch event with Royal Surrey. All of this work has started and over the next few weeks we will be starting to communicate further regarding our launch event. We envisage a Lessons Learned and Familiarisation event, inviting presentations from Trusts where they have already successfully implemented ePR, as well as demonstrations from the ePR supplier. It is an exciting time for the Trust and the members of the steering group

that have been working on the project to date are looking forward to finally being able to widen the engagement and gain input from colleagues across the Trust.

## **Other Developments**

Meanwhile, we have been rolling out the CareFlow mobile clinical communications app in Medicine to support patient flow. This includes some new reporting capabilities around delay codes. The app is live in all surgical and medical wards and we have a plan in place to ensure all staff are trained over the next few weeks. In addition, we are working towards the replacement of the RealTime patient flow system, which goes out of support from January 2020, using tactical solutions based on CareFlow and the legacy Inpatient Lists app (IPL). These temporary solutions will be replaced by Cerner in due course.

## **Modern Healthcare**

### **Travel Update**



As planned, the main outpatients' car park closed on 7<sup>th</sup> October and alternative arrangements for visitor and staff parking began. These changes were extensively communicated through variety of channels internally and externally and we were pleased to achieve some informative and positive local media coverage on the [Surrey Live website](#).

We have found that the majority of staff seemed to be prepared for the changes and whilst some colleagues have experienced difficulty in finding a space on certain days / times which causes inevitable frustration, the overall parking situation feels just about manageable. We will continue to monitor this.

Patients and visitors have experienced some frustrations in finding the new parking areas and the longer walk to access the hospital buildings. We continue to do all we can in terms of directional signage around the site and physical presence and support from the car parking / security team and volunteers to assist people.

We have also tried hard to make patients attending planned appointments aware of the changes in advance, such as through the text reminder service. However, around half of all visits to St Peter's are unplanned and visitors make up a large cohort of the traffic coming to site. So this does present a challenge in terms of advance communication.

We are hopeful these changes will begin to bed in over the coming weeks and will of course continue to monitor the situation.

## **Making Every Day Count**

### **New reporting tools**

The information team has carried out a significant amount of work to support the Making Every Day Count programme with the design, development and delivery of the new QlikView-based reporting solution, Measuring Success. This provides us with an overview of Trust operations and flow across a range of key metrics, from front door to discharge, with easy to understand visualisations. Support to the programme is ongoing to further develop these and other reporting solutions.

### **Increasing bed stock**

Changes are underway along the Level 2 corridor between pharmacy and MRI. This is the area previously used for rheumatology, phlebotomy, medical photography, part of pharmacy and therapy services.

The changes are to support the Making Every Day Count programme, helping to increase bed capacity and create additional ward space at St Peter's. As we move into winter, demand will rise further, so we need to create that extra capacity in the coming weeks.

The space has been vacated so it can be remodelled and become a new Acute Medical Unit, due to open in January 2020. All affected rheumatology, phlebotomy and therapy clinical and support services have been relocated to suitable alternative accommodation (some temporarily and some permanently).

The main impact on patients is a change to the location, day and time of some appointments and we have tried to contact all those affected by phone, offering the most suitable alternatives. Once on site the reception team and volunteers are briefed and plenty of signage is in place to direct patients and visitors to the new location of these services.

For staff, these moves have brought various degrees of inconvenience and disruption and we've really appreciated the support and patience of those affected. Whilst the temporary accommodation isn't perfect for all teams, colleagues have been very supportive of the reason for the changes and benefit to patients.

### **Overall plan for Medicine**

Creation of the new AMU is the first in a series of ward and bed changes in medicine. The following diagram summarises the changes taking place over the coming months:

# Making every day count

Adding value to each and every day a patient is with us and getting them back to the place they call home asap.

To embrace new ways of working and models of care we need to increase capacity and improve our infrastructure.

From October 2019 we will begin works to several clinical areas and work spaces across the Trust. This diagram summarises those changes.

**3**

Level 2 space to be remodelled and new ward area created. Acute Medical Unit to move from current location to new space. Layout of new unit will be better – more space for ambulatory care on trolleys and chairs enabling quicker assessment, treatment and discharge will help the flow of urgent and emergency patients from A&E

**1**

Area along Level 2 corridor between Pharmacy and MRI will be vacated and services temporarily relocated.

**4**

Old AMU space will be used for stroke and neurology beds which will move from Cedar Ward. This will provide a bigger bed space and better environment for these services

**2**

Outpatient physiotherapy services, including hydrotherapy has moved to the River Bourne Club in Chertsey providing a much better environment and facilities for patients.

Phlebotomy, rheumatology, other therapy services and medical photography relocated whilst works take place

**5**

Cedar will become a ward for medical beds – more detail to follow.

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

## **Estates Developments at St Peter's**

Building works are taking place on the courtyard area next to the pharmacy building to create a new Main Store and Medical Engineering Store facility. This is currently located on the West Site so needs to be relocated. The new location within the main hospital building will work much better, providing a single point of entry for deliveries and avoiding the need to regularly transport goods across the hospital site. Works should be completed by the end of the year.

Building works are also taking place in the courtyard next to the current urology centre. This is to create a space for urology clinical and support offices alongside a new waiting room and family discussion room for intensive care. The current intensive care rooms are small and located along the main hospital corridor, which is not the best environment for relatives and visitors who may be visiting critically unwell patients or receiving difficult news. The new facility will enable urology to come together as one team and provide a much better environment for intensive care families and visitors.

Works continue on the extension of the Postgraduate Centre restaurant and dining area. This is to ensure we have adequate facilities when the Aspect Restaurant (behind Chertsey House) closes as part of the sale of the West Site. Timescales on the completion of this are yet to be confirmed.

## **Estates Developments at Ashford Hospital**

Following the land sale at Ashford Hospital there has been substantial work taking place that includes the creation of a new children's day nursery. Work is just being completed on this and I'm told it looks fantastic. I'm looking forward to visiting it and we hope to hold an official opening event shortly. This is a great new facility for colleagues at Ashford and part of a fantastic offering at the Trust to support working families.

Elsewhere at Ashford we are relocating the workforce and transport departments and resurfacing and re-lining the main hospital car park. Works to create a new infusion suite have commenced and plans to deliver a new operating theatre are at design stage.

## **Collaborate**

### **EU Exit Planning**

As news and details of the plan for EU Exit unfold, the response across the health and care sector is being led by the Department of Health and Social Care. At a local level we are working to be as prepared as possible for various scenarios and ensuring our service-specific business continuity plans are up-to-date. We are following all regional and national guidance and attended a variety of briefing sessions and planning meetings around this. We have also held Trust level table top exercises to test our responses. As things change we will continue to monitor the situation on a daily basis, report any issues and liaise with relevant colleagues.

## Thank you Momentum

I'd like to thank Momentum Children's Charity and one of our paediatric families for refurbishing two children's isolation room on Ash Ward. The colourful artwork helps to reduce stress and provide distractions for the many children who spend time in hospital. One of the rooms was funded by a family that have spent time on Ash Ward and have been supported by Momentum, Kate Wells and Kieran Charnock. Their daughter, Jessica, was diagnosed with cancer in September 2017 at the age of two and is due to finish treatment next month. I'd like to thank the family and Momentum for their very generous support and donation.

