

Board of Directors

Date:	28 November 2018	Attachment:	E																
Title of Report:	Chief Executive's Report																		
Purpose of the report and the key issues for consideration/decision:	<p>The purpose of the Chief Executive's Report is to highlight developments that are of strategic relevance to the Foundation Trust and which the Board needs to be aware of.</p> <p>This report covers developments that have happened since the October Board meeting.</p> <p>Appendix 1: Single Stroke Service Report Appendix 2: Flu Programme 2017/18 Evaluation Report Appendix 3: CQC Bradford Local System Review Action Plan</p>																		
Prepared by:	Jane Downes, Group Company Secretary																		
Presented by:	Brendan Brown, Chief Executive																		
Strategic Objective(s) supported by this paper:	<table border="1"> <tr> <td>Financial Sustainability</td> <td>X</td> <td>Empower & Engage Staff</td> <td>X</td> </tr> <tr> <td>Quality of Care</td> <td>X</td> <td></td> <td></td> </tr> </table>			Financial Sustainability	X	Empower & Engage Staff	X	Quality of Care	X										
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Quality of Care	X																		
Is this on the Trust's risk register:	<table border="1"> <tr> <td>No</td> <td>X</td> <td>Yes</td> <td></td> <td>If Yes, Score</td> <td></td> </tr> </table>			No	X	Yes		If Yes, Score											
No	X	Yes		If Yes, Score															
Which CQC Standards apply to this report:	Well-led domain																		
Have all implications related to this report been considered: (please X)	<table border="1"> <tr> <td>Finance Revenue & Capital</td> <td>X</td> <td>Equality & Diversity</td> <td>X</td> </tr> <tr> <td>National Policy/Legislation</td> <td>X</td> <td>Patient Experience</td> <td>X</td> </tr> <tr> <td>Human Resources</td> <td>X</td> <td>Terms of Authorisation</td> <td></td> </tr> <tr> <td>Governance & Risk Management (BAF)</td> <td>X</td> <td>Other:</td> <td></td> </tr> </table>			Finance Revenue & Capital	X	Equality & Diversity	X	National Policy/Legislation	X	Patient Experience	X	Human Resources	X	Terms of Authorisation		Governance & Risk Management (BAF)	X	Other:	
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Action Required: (please X)	<table border="1"> <tr> <td>Approve</td> <td></td> <td>Discuss</td> <td>X</td> <td>Receive for information</td> <td>X</td> <td>Decision</td> <td></td> </tr> </table>			Approve		Discuss	X	Receive for information	X	Decision									
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Previously Considered By:	<table border="1"> <tr> <td>n/a</td> <td>Date:</td> <td>n/a</td> </tr> </table>			n/a	Date:	n/a													
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Recommendations:	To receive and note the Chief Executive's Report.																		

Chief Executive's Report

29 November 2018

This month's report details events that have taken place since the October Board meeting.

The report is set out against our 'Right Care' values, as I am keen to see this mirrored in the organisation from Board through to ward, and framing our conversations as leaders of the organisation.

1. Working Together for Patients

Chief Executive - Partnership and External Engagement

During October I have met with a number of our external partners and neighbouring Trusts. Since the last meeting I have attended the following:

- Integration and Change Board
- Airedale Wharfedale Craven Health and Care Partnership Board
- West Yorkshire Association of Acute Providers – Programme Executive
- West Yorkshire and Harrogate Health and Care Partnership (WY&H) System Leadership Executive Group
- Joint Bradford and Leeds Health and Care System Leaders' Conversation
- NHS England and NHS Improvement Quarterly Review
- Quarterly STP/ICS Assurance meeting with NHS England and NHS Improvement

West Yorkshire Association of Acute Providers ('WYAAT')

I am continuing to meet with my WYAAT Chair's and Chief Executive's to progress and deliver our collaborative approach to system performance across the patch. The WYAAT is working jointly with colleagues by focussing its efforts on working at a system level thereby enabling a response to the NHS long-term plan. The next steps would be for the WYAAT to consider how this could be addressed across an Integrated Care System.

West Yorkshire and Harrogate Stroke Care

Keeping everyone updated on the [West Yorkshire and Harrogate Health and Care Partnership](#) work to further improve stroke care for people across our area has been a Partnership priority and will continue to be so.

Since our engagement and conversations with staff, partners and the public began in February 2017, we have kept people updated throughout to try and ensure everyone had the opportunity to have their say on the development of the work.

On Tuesday 6 November 2018 a report was presented to the West Yorkshire and Harrogate Joint Committee of Clinical Commissioning Groups (meeting in public), to provide an overview of progress, conclusions, recommendations and next steps. You can read the report [here](#). You can also read this [letter](#) sent to all stakeholders informing them of the decision made by the Joint Committee of Clinical Commissioning groups

The decision from the Joint Committee of Clinical Commissioning Groups concludes the West Yorkshire and Harrogate Stroke Programme work on hyper acute stroke services. However, it is important to note that our conversations with people across the area have highlighted the importance of further improving care from prevention, hospital stroke care, community rehabilitation services, through to after care. These conversations will continue in the six local areas (Bradford District and Craven; Calderdale, Harrogate, Kirklees, Leeds and Wakefield) which make up West Yorkshire and Harrogate as appropriate.

The Partnership is grateful for everyone's contribution to the West Yorkshire and Harrogate stroke care work; those views have shaped the Partnership's work and have been summarised in the publication '[You said, we did](#)'. Further engagement work undertaken by the Partnership can be found [here](#).

Single Stroke Service

Work has been progressing on improved collaboration to support the further development of a single sustainable stroke service for Bradford and Airedale.

The attached report (appendix 1) provides an update on the following:

- The progress being made by the collaboration project to the single stroke service across both the Bradford and Airedale sites.
- The ongoing improvements to the stroke service in relation to Sentinel Stroke National Audit Programme (SSNAP) whilst highlighting areas of non-compliance regarding SSNAP outcomes.
- The reasons why some SSNAP outcomes are not where we would wish, along with the agreed improvement plans to get us to a joint sustainable SSNAP level B at both sites.
- Progress towards a reliable live SSNAP dashboard for both sites. This will aid the teams to respond to SSNAP domain breaches in a timely fashion.
- Our work towards a 7 day transient ischemic attack (TIA) clinic provision for both sites.

The Board of Directors is asked to:

- Note the significant progress being made to the collaboration project to achieve a truly single stroke service;
- Note the current position with regard to performance; and
- Note the significant improvement the single stroke service has made in the delivery of the SSNAP outcomes at its BTHFT site.

2. Commitment to Quality of Care

Care Quality Commission ('CQC') Quality Assessment

I briefed the Board at the October Board meeting on the CQC inspection dates and programme scheduled to take place on 18 to 20 December. Since then we have received our core service inspection which took place on 13, 14 and 15 November. At this stage we have received very high level feedback in which no major concerns have been raised. The CQC also undertook their unannounced inspection on 21 and 22 November which focussed on Diagnostics.

I will brief the Board on the latest developments at the Board meeting.

CQC Bradford Local System Review Report

As reported at the October Board meeting, the CQC published the Bradford Local System Review Report in September. The report is one of 20 local area reports produced as part of the local system reviews programme. Attached as appendix 2 is the Action Plan produced in response to the Report. The Board will see the Trust featured in three specific actions relating to the moving of frail patients, elimination of faxes; and, the self-administration of medication. Bradford Metropolitan District Council are responsible for collating responses and providing monitoring updates to the CQC.

Flu Vaccination Campaign

The Board will recall the commitment made at the September Board to achieving the ambition of 100% of front line healthcare workers vaccinated. At the time of writing this report I can confirm that 65.3% of front line healthcare workers have been vaccinated.

An evaluation of the flu programme for 2017/18, including data, successes, challenges and lessons learnt is attached as appendix 3.

Clinical Waste Storage

The Board will be aware of the clinical waste storage problems across the region, and reports in the national media about the situation. Our priority has been to protect patient services and provide a safe working environment for staff by managing our waste safely and appropriately.

As previously reported and on instructions from the regulator the Trust terminated its contract with the previous waste management provider and entered into a new contract with Leeds Teaching Hospitals Trust and MITIE. While this contract bedded in, the Trust implemented its contingency plans and stored waste safely and securely on site here at Airedale Hospital.

Since then the situation with clinical waste has improved with an established collection schedule for all waste streams.

Nurse Recruitment Event

A successful recruitment evening was held on 15 November with the aim of recruiting registered and student nurses. The event provided the opportunity to meet our senior nursing team and discuss our care values, our roles and why we are so passionate about the care of our patients; discuss the career opportunities available to qualified and student nurses, including our preceptorship and associate nursing programmes for those more newly qualified; hear about the rotational opportunities we can facilitate; discuss the ways in which we can help achieve career goals, and how we can support those new to the Trust; and finally, tour our wards and clinical areas.

Quality Summit

We have experienced four never events in the organisation in the last 12 months, and the learning from these has revealed a number of themes for us to address and explore. Our first Quality Summit in September saw the launch of our new safety campaign. A second Quality Summit was held on 7 November, the aim of which was to share that learning more widely in the organisation. The event also created a unique opportunity for discussion amongst all staff groups (clinical and non-clinical), to recognise the contribution and responsibility of all our staff in delivering a safer healthcare environment for our patients, visitors and colleagues.

3. Improving Lives

Mobile Cancer Care Unit

A new mobile cancer unit for West Yorkshire was launched on 5 November. The facility had been enabled thanks to a collaboration between the Trust and the charity 'Hope for Tomorrow'. The state-of-the-art Mobile Cancer Care Unit ('MCCU'), which has four treatment chairs has been designed to enable flexibility for treatment locations and will be deployed across the district.

Airedale Research Education Event

Our research team held an education event on 12 November, for the purpose of informing staff about all the different kinds of research that take place here. The programme was packed full with a variety of presentations from people all across the Trust, including immunotherapy treatment developments, the role of the National Institute of Health Research and presentations showing research from midwifery, paediatrics and rheumatology services.

4. Everyone Counts

NHS Improvement ('NHSI') - Use of Resources ('UoR') Assessment

The Trust received its UoR assessment on 20 November 2018. The outcome of the assessment will be a draft report and proposed rating that will feed into NHSI's consideration about the Trust's improvement support as part of the Single Oversight Framework. NHSI's findings will also be considered by the CQC as part of the post-inspection process for reviewing and approving the inspection reports and rating for the Trust, resulting in the publication of the UoR rating.

NHS England – Performance Data

NHS England has published its [latest combined performance data](#) for October 2018.

The key points from the data show:

- Trusts have managed to increase A&E performance by seeing more people within four hours than last month, despite an increase in attendances
- There has been the most emergency admissions in one month since data collection began, which may be of concern with winter looming
- There has been an increase in 12-hour trolley waits, which is up 271% in a year
- Referral to Treatment performance has fallen to 86.7% and cancer performance has missed the two week urgent referral for the sixth month
- Out of area placements have increased since last month

Brexit - EU Exit NHS Trust Contract Review

As reported and agreed at the October Board meeting, the Director of Finance has been appointed as the board-linked Senior Responsible Officer to oversee the Trust response to the Secretary of State in ensuring continuity of supply of goods and services in the event of a 'no deal' Brexit. The Director of Finance is progressing the Trust response to the request to provide a summary of contracts deemed highly impacted, with mitigating activities, by 30 November.

The Board will receive a summary report at the next Board meeting.

NHS Improvement – Lord Carter Report

The Procurement and Supplies team at AGH Solutions Ltd have been named in the top 25% of all acute Trusts in the country by NHS Improvement for the efficient way it runs its procurement process and how effectively it gets best prices for its products.

The national rankings are a result of the Lord Carter report on NHS productivity, the recommendations from which aim to end variation in Trust purchasing across the country and help the NHS save millions. They are an assessment of the performance of procurement departments in NHS Trusts and show which Trusts are setting best practice examples, helping others identify improvement opportunities.

5. Respect and Dignity

Occupational therapy week

The theme of Occupational Therapy Week that ran from 5 to 11 November was “Securing the future of occupational therapy”.

The team of occupational therapists raised the profile of their profession which supports people to ‘live life their way’ despite any health or care needs they may be living with, as part of this year’s Occupational Therapy Week, organised by the Royal College of Occupational Therapists (RCOT).

Employer Recognition Scheme Silver Award

The Ministry of Defence have recognised our work as an employer and our commitment regarding service personnel. We have been given the silver award which Jane Lang, Head of Diagnostics and the Trust Military Champion and HR colleagues collected on 22 November on behalf of the Trust.

HSJ Award

The stammering therapy team at Airedale Hospital have been shortlisted for a prestigious national award for their innovative service offered UK-wide for patients who stammer. The project, which has already won a Guardian Public Service Award, offers a specialist speech therapy service to adults across the UK via videolink.

Pride of Airedale

During October the following Trust staff and teams received the following Pride of Airedale Awards:

- Jasmine Hartley and Chantal McPartland, Research Department
- Debbie Walsh, Maternity, Ward 21
- Therapies, Information and IT Team award for Therapy SystemOne implementation
- Pre-op Assessment Unit Team award
- Pat Dyminski and Ian Donohue for the Mobile Cancer Care Unit project

Annual Pride of Airedale nominations

Nominations for our Pride of Airedale 2019 awards have opened. This year, the team of the year and colleague of the year categories will be seeking nominations for clinical and non-clinical colleagues and teams, and the patient experience category will be looking at nominations for teams in and out of hospital. Staff have been asked to submit their nominations by 31 December.