

Trust Board paper D

<b>Meeting title:</b>	Public Trust Board				
<b>Date of the meeting:</b>	14 September 2023				
<b>Title:</b>	CEO update				
<b>Report presented by:</b>	Richard Mitchell, CEO				
<b>Report written by:</b>	Richard Mitchell, CEO				
<b>Action – this paper is for:</b>	Decision/Approval		Assurance	x	Update
<b>Where this report has been discussed previously</b>	The items in the report have been discussed in meetings and committees during the month of August 2023				

**To your knowledge, does the report provide assurance or mitigate any significant risks? If yes, please detail which**

The report covers a wide range of risks in University Hospitals of Leicester NHS Trust.

**Impact assessment**

There are no specific impacts because of this report.

**Purpose of the Report**

The report is an update for the month of August 2023 on the University Hospitals of Leicester NHS Trust (UHL) and wider Leicester, Leicestershire and Rutland Integrated Care System.

**Recommendation**

The Board is asked to receive the update on the below items.

## **UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST BOARD OF DIRECTORS**

### **THURSDAY 14 SEPTEMBER 2023 CHIEF EXECUTIVE'S BOARD OF DIRECTORS REPORT PRESENTED BY RICHARD MITCHELL**

#### **Introduction**

The report is an update for the month of August 2023 on the University Hospitals of Leicester NHS Trust (UHL) and wider Leicester, Leicestershire and Rutland Integrated Care System.

#### **Ongoing improvement at UHL**

The operating environment in the NHS is incredibly challenging, yet despite this, at UHL we continue to deliver sustained progress. There are three phases of improvement for NHS Trusts; stabilise, recovery and transformation. Whilst we still have recovery work to do at UHL, we have now entered our transformation phase and I am excited that today we launch our new strategic framework, "Leading in healthcare, trusted in communities" which will support and guide our improvement over the next seven years.

Waiting time reductions are particularly strong. Ambulance handover delays have reduced by over 85% compared to this time last year, meaning ambulances are getting swiftly back onto the road when they arrive at our hospitals. In terms of flow out of hospital, we now have the lowest number of patients waiting for social care or community support since the pandemic, meaning more acute beds are available for those who need them most. Less than 100 patients at UHL are waiting more than 78 weeks for their planned care at UHL, down from over 6,000 this time last year and the reduction in waiting times here has been amongst the most dramatic in the NHS. We would have no patients waiting over 78 weeks if it was not for the recent industrial action. Whilst nationally the waiting list for planned care continues to grow, the waiting list at UHL is decreasing for the first time in four years, albeit there has been a slowing down in the reduction because of industrial action. Behind these numbers are people who will be experiencing a faster ambulance response, or like Janet who was treated in the East Midlands Planned Care Centre last month, earlier relief from pain. I do not underestimate how much work the team are putting in to deliver these important improvements and changes at UHL. In partnership with others, the UHL team are making a huge difference to patients, carers and families.

I am not aware of another Trust which has made us much progress as us over the last couple of years and we are excited by our future. We are building additional wards at the Glenfield Hospital, creating additional endoscopy rooms at the Leicester General Hospital and expanding community diagnostics in Hinckley. In October 2024, the East Midlands Planned Care Centre at LGH will be fully open to treat over 100,000 per year.

A key part of our future is our relationship with Kettering General Hospital NHS Foundation Trust (KGH) and Northampton General Hospital NHS Trust (NGH). We already have close and effective clinical relationships, patient flow and service interdependencies between KGH, NGH and UHL. On 1 July 2021, KGH and NGH formed the University Hospitals of Northamptonshire Group (UHN). There are many services at UHN and UHL that are co-dependent. Relationships have further strengthened with the 2022 funding round for the Leicester Biomedical Research Centre, hosted by UHL, now including UHN and John MacDonald has been the shared Chair at UHN

and UHL since July 2023. We look forward to strengthening clinical and support services and improving efficiency, productivity and quality across the three Trusts.

## **Letby Verdict**

We will all be shocked by the appalling crimes and our thoughts are with the families affected. Their pain is something few of us can imagine. The crimes are incredibly rare, but unfortunately they do happen. It is important not to prejudge the findings of the inquiry as we do not know yet what went wrong. I find the whole situation, based on what has been reported so far, difficult to understand. I do recognise that we need to learn from this and respond and the response needs to be balanced, proportionate and well thought through.

I want to remind everyone about the importance of listening to the concerns of patients, families and colleagues. In UHL we must follow whistleblowing procedures and ensure this is supported by good governance. Since October 2021, I have been very clear about the culture we want in UHL and the actions we are taking to get there. UHL is changing and I recognise there is more work to do. I want everyone in UHL to feel safe to speak up and confident that when you do, it will be followed by a prompt and appropriate response.

An independent inquiry has been announced by the Department of Health and Social Care into the events at the Countess of Chester Hospital NHS Foundation Trust and we will ensure we learn every possible lesson from this awful case.

Nationally, NHS England is committed to doing everything possible to prevent anything like this happening again, and they are taking decisive steps to strengthen patient safety monitoring. The national roll-out of medical examiners since 2021 has created additional safeguards by ensuring independent scrutiny of all deaths not investigated by a coroner and improving data quality, making it easier to spot potential problems. This autumn, the new Patient Safety Incident Response Framework will be implemented across the NHS. This represents a significant shift in the way the NHS will respond to patient safety incidents, with a sharper focus on data and understanding how incidents happen, engaging with families, and taking effective steps to improve and deliver safer care for patients.

We recognise cases like this can be difficult to deal with in many different ways and if you need support, there are services available for you including Amica, which is a confidential service available to all colleagues.

## **Freedom to Speak Up**

A decision was taken in June by the UHL executive team and was endorsed in July by the Trust Leadership Team, including the seven Clinical Directors of Clinical Management Groups, to work with a partner called The Guardian Service to strengthen our FTSU service. We know the safest providers of patient care have the best cultures, underpinned by a strong FTSU offer. The 2023 NHS staff survey identified University College London Hospitals (UCLH) as the best Trust to work in and I do not believe it is chance that UCLH have worked with The Guardian Service for at least five years now.

We started working with The Guardian Service from 1 September 2023. They are an experienced independent provider who run FTSU services for a range of high performing large trusts. We carefully explored different options and we believe this partnership will benefit all UHL colleagues. The service will provide greater independence in the process of raising and responding to concerns and it will significantly increase the accessibility of the service operating 24 hours a day, seven days a week. We will have two full-time Speaking Up Guardians who will be

contactable to meet virtually or face to face, whichever suits your needs best. The Guardians will be visible across UHL. We also have an accessible executive team who are very happy to meet with and listen to any colleague about their concerns.

## Staff survey

The 2023 NHS national staff survey launches on 25 September and I would like as many UHL colleagues as possible to complete it. Our response rate last year was 48% which was 15% higher than 2021 and for the first time it was higher than the national average. This is good because it suggests more people feel that if they speak up, they will be listened to. I would like our response rate this year to be +60%. Whilst I was pleased by the increase in the response rate, the staff survey confirmed that we have a huge amount to do to improve UHL. Fifty five per cent of colleagues recommended UHL as a place to work and 58% of colleagues recommended UHL as a place to receive care. Both scores are similar to the national average. We have listened to what colleagues told us and we have made many improvements over the last year including:

- **Recognition:** Long service awards and annual awards
- **Inclusion:** +3,000 colleagues took part in the We are UHL conversation, partnership with British Association of Physicians of Indian Origin (BAPIO), South Asian Heritage Month, Armed Forces Staff Network and Black History Month
- **Support:** Vivup offers on gym membership, Cycle2Work and home and electronics, grown as an organisation across all professions, more flexibility including self-rostering, increases in leave around bereavement, armed forces and health and wellbeing fortnight
- **Equipment:** Increased visibility and availability of IT support teams, bring Your Own Device scheme now live, increasing capacity and building of new wards, improvements in food and drink provision including free porridge, extended restaurant opening at all sites and improvements to staff Wi-Fi at all sites later this month.

In the survey this year, I would like more people to recommend UHL as a place to work and as a place to receive care than last year. Despite the many challenges the NHS faces, this will provide further evidence we have turned the corner.

## Winter plan

NHS England recently launched its plan for 'delivering operational resilience across the NHS this winter' and whilst winter is a particularly challenging time of year, at UHL we are much better prepared than at this time last year. We took our planning from last year and what colleagues said to us and published our urgent and emergency care plan for 2023/24 in March. This focusses on flow in, flow through and flow out of our hospitals. In May, we published our planned care plan. The two plans complement each other and our aim continues to be to protect as much of our planned care as possible whilst we run a safe and effective emergency care service for all patients through 2023/24. We are making good progress on specific preparations and initiatives which will be in place in the next three months include:

- A new respiratory support unit at the Glenfield
- Expanded same day emergency care services at both the LRI and Glenfield
- Expanded discharge lounge at the LRI
- Increased bedded capacity in the community
- Expanded virtual wards, meaning more people can recover from a hospital stay – with appropriate clinical oversight - at home

- Developing a children and young people's plan with system partners

### **Reinforced aerated autoclaved concrete (RAAC)**

Last week new guidance was published by the Department for Education regarding the approach to the presence of RAAC in the school estate. This has generated heightened public interest in the presence of RAAC in the NHS estate, and questions from colleagues. Mike Simpson, Director of Estates, Facilities and Sustainability, will provide a verbal update at Board about why we know there is no RAAC at UHL.

### **HSJ**

Congratulations to the UHL teams shortlisted in five prestigious Health Service Journal Awards 2023:

- **Medicines, Pharmacy and Prescribing Initiative of the Year category:** LUCID Medicines Optimisation - Integrated Pharmacist-led Care for Chronic Kidney Disease (featured on Friday Focus on 11 August)
- **Acute Sector Innovation of the Year and Driving Efficiency Through Technology Award:** Atrial Fibrillation Virtual Ward
- **HSJ Partnership Award:** Take AIR Inhaler Recycling Scheme (featured on Friday Focus 14 July)
- **Modernising Diagnostics Award:** Endo-sponge - Sponge on a string to detect oesophageal cancer in the community
- **East Midlands Acute Providers (EMAP) - Update September 2023**

### **East Midlands Acute Providers Network**

We are one of eight trusts in the East Midlands Acute Providers (EMAP) collaboration. We are working together to provide sustainable, equitable acute services where it makes sense to do so at scale, e.g. where the benefit is greater than working at a system or locality level. Following a session in May attended by all eight acute trusts, we each agreed to provide annual funding to EMAP for three years and to recruit a Managing Director (MD) to oversee the development of the collaboration. The MD recruitment is on track and should be completed by the end of September 2023.

EMAP's governance has been strengthened to better monitor and deliver improvement work and to identify new priority work programmes. The eight CEOs met for the first time as an EMAP Provider Leadership Board (PLB) on 21 August. The quarterly PLB will be supported by a monthly EMAP Executive meeting from September 2023. I have been nominated as the Chair of both the PLB and the Executive, with Stephen Posey, CEO of University Hospitals of Derby and Burton NHS FT, as the Deputy Chair. At this stage, there is no proposal to delegate any statutory function or responsibility from individual organisations to EMAP, however we are likely to need to consider ways of strengthening joint decision making and accountability in due course.

### **Leicester Pride**

I enjoyed joining UHL colleagues and many community partners at Leicester Pride, Leicester's annual Lesbian, Gay, Bisexual and Transgender festival on Saturday 2 September. This year, for the first time, the event took place at Abbey Park, due to the space being more suitable for multiple attractions and it was great to see many colleagues there and to meet many new people.

## **Industrial action**

We have already experienced five rounds of postgraduate doctor industrial action and two rounds of consultant industrial action with more planned for the near future. Industrial action is hugely disruptive to patients and the people who work in the NHS and is impacting on the important progress we are making with reducing maximum waiting times.