

Meeting:	Brighton and Sussex University Hospitals NHS Trust Board of Directors
Date:	27th April 2015
Board Sponsor:	Chief Executive
Paper Author:	Chief Executive
Subject:	Chief Executive's Report

Executive Summary

This report updates the Board on progress with key strategic developments including: the 3Ts and site reconfiguration programmes, which is discussed elsewhere on the agenda; the contractual position and planning for 2015/16; progress with the transition of soft Facilities Management contract; the further development of the Values and Behaviours programme; and a welcome to our new Non-Executive Directors

Links to corporate objectives	There is a particular focus in this report on <i>the delivery of the clinical strategy</i> , through the site reconfiguration developments; supporting <i>empowered skilled staff</i> through the Values and Behaviours programme
Identified risks and risk management actions	Key risks are aligned with the risks to the Trust objectives described in the Board Assurance Framework.
Resource implications	None specific to recommendations in this report
Report history	The Chief Executive reports formally to each Board meeting

Action required by the Board

The Board is asked to note the Chief Executive's report and ask for further information or clarification as required.

Report to the Board of Directors, 27th April 2015

Chief Executive's Report

1. Site reconfiguration

Following assurance meetings with the executive team in February and March the moves of elective and emergency cranial neurosurgery from Hurstwood Park Neurosciences Centre (HPNC) to the Royal Sussex County Hospital (RSCH) and fractured neck of femurs and inpatient urology services to the Princess Royal Hospital (PRH) will take place on 19, 20 and 21 June 2015. A final assurance meeting will be held at the end of March to review progress on managing the outstanding issues, risks and mitigations. These include operational flow across the hospitals, timely access to neurosurgery critical care beds, and medical and surgical cover at PRH.

A great deal of work is underway to prepare for these significant moves. Two major electrical shut downs have successfully taken place in the Millennium Wing to enable essential works to the power supply to take place for the bi planar angiography suite. The capital programme at RSCH has been delayed due to a number of issues but work on the new neurotheatres, ITU, recovery, MRI and bi-planar angiography is nearing completion and commissioning will take place in early June.

A number of departments and services are involved in the planning of the service moves and the intention is to minimise the number of in-patients who need to be moved between sites; the service moves will take place on Friday 19 and Saturday 20 June to minimise any impact from the London-Brighton cycle ride which takes place on the Sunday 21 June.

All affected staff have been briefed on the date of the move and staff will continue to be kept closely informed as plans develop in the weeks leading up to the move. It has been agreed to provide an express bus service between the sites for a six month period pending a longer term review of the organisation's travel and transport policy.

A meeting is taking place with local CCGs, acute providers and SECAMB in May to further review the new agreed clinical pathways and assess any impact on partner organisations.

2. 3Ts Programme

As I reported previously to the Board, we were seeking an approval of the Full Business Case for the programme in advance of the pre-election period. This has not proved possible, but we are continuing positive discussions with the relevant national approving bodies in order to secure that approval which supports contract signature and start on site to the same timetable.

Our strategy has always been to secure the resources to undertake the decant and enabling works for the build element of the programme in parallel with the main approval and we have been successful in that. We completed the St. Mary's Hall refurbishment over a year ago and two further projects are underway.

At the Royal Sussex County there is a significant addition to the front of the hospital as the process of craning in the modules which will form the "Front Car Park" building is nearly complete. This will provide facilities for Nuclear Medicine, Physiotherapy and Rheumatology whilst the first Stage of the main new buildings is underway. The last module is due to be craned in on Wednesday 29th April (subject to weather conditions).

On Saturday 8th May the first modules for the Courtyard ward building to replace the inpatient beds in the Jubilee Block will be lifted into place with the last modules being installed on Sunday 7th June.

Both of these projects will provide a far better patient and staff environment than the existing buildings. The Front Car Park will be operational by Christmas and the Courtyard ward during October.

We will also be submitting a planning application for a new permanent building to be constructed on the North Road, to the north east of the emergency department. This will house other hospital departments which are part of the decant and enabling works. It is also our intention to provide space for emergency department offices and support accommodation within that to allow further development of the ED and to increase the space available within it for patient care areas. We intend to have this completed by Christmas.

3. Contractual position

CCG - The Trust is currently agreeing the final contractual arrangements together with an associated 'risk share' with Sussex CCGs which will form the basis of this year's £253m (approximate value) contract. The 'risk share', will enable a degree of financial certainty to underpin health economy business planning and will ensure that focus is applied to a number of key service delivery programmes designed to improve performance and patient experience.

NHS England (NHSE - Specialist Commissioning) – The national timetable for agreeing contracts with NHSE has slipped significantly in recent weeks. The Trust is awaiting a revised consolidated offer from NHSE - South following receipt of an initial offer which was received on 30/03/15. The offer of £128.3m, was short of Trust income expectations. However, it was soon acknowledged that the offer excluded a number of significant factors including; non - demographic growth, Dental services, agreed Service Developments, RTT uplifts and some specific service lines. These differences are currently being worked through collaboratively by both parties and the intention is to reach an offer which is acceptable to all parties ASAP. If this is not possible, the Trust and commissioner may be required to use the 'Dispute Resolution' process

mandated by NHSE, Monitor and the TDA. Such escalation is best avoided if at all possible.

4. Planning for 2015/16

The final Annual Plan for 2015/16 will be discussed later on the agenda. The Plan describes our objectives for the year including the ten high impact changes which are designed to improve patient safety and quality. Delivery of the plan will be supported by the new executive governance arrangements which reflect the findings and recommendations of the *Review of the delivery of Projects, Programmes and Change*.

A leadership conference was held on 23rd April which discussed the People and Well-Being Strategy which will be submitted to the Board on 1st June, and the new executive management structure.

5. Unscheduled Care and Easter

The Trust, with partners, undertook significant planning to make sure the hospital was ready and prepared to manage unscheduled care over the four-day holiday. These included a focus on ensuring we had no patients, on either site, “waiting” for referral, review, tests or results; and achieving sufficient discharges to give us the empty beds we knew we would need over the weekend. Along with many others I worked on this before the Easter break and on the whole these preparations went well. We also had additional clinical staff on site over the weekend who continued to manage the patients coming into our Emergency Departments and discharge patients who were ready to go home. The combined effect of this preparation and hard work on the part of many teams and individuals (despite the fact that the number of patients attending A&E was consistently higher than average) was that the Easter weekend itself went well and we emerged from it in much better shape than we have done in previous years. For this I would like to thank everyone involved internally and in our partner organisations

Significant challenges in unscheduled care remain however and they are highlighted in a separate report to the Board.

6. Sodexo

As reported previously, a project team has been established to oversee the transition of soft facilities management functions from Sodexo to the Trust. A number of additions to the team have been made since my last report including the appointment of a Clinical Lead. A project office has been established in Sussex House to co-ordinate the project work-streams which include HR, Finance, Procurement and Communications amongst others. Noticeboards are being located in key areas of the hospitals to ensure staff are kept up to date on the latest developments which will include a Frequently Asked Questions section. A dedicated e-mail address (softfm@bsuh.nhs.uk) has been created to capture any concerns or questions that might arise during the transition period.

7. Values and Behaviours

Much of the team's focus over the last month has been on planning for 2015/16. There is a clear 'golden thread' narrative from the 'you said' analysis of the qualitative staff feedback, and results of the 2014 National Staff Survey, to the 'we've done', work completed in 2014/15, and 'we're planning', further work in 2015/16.

The 2015/15 plan continues to focus on: (i) aligning our people processes with the Behavioural Blueprint, (ii) developing individuals & teams, and (iii) engaging for improvement. This will be launched as part of the Trust Business Plan, alongside the People & Wellbeing Strategy.

Highlights of our current work are set out below:

- The five day 'Leading the Way' development programme for 67 Directors/direct reports has now concluded and has been positively evaluated by participants. A Leadership Standard is in development, recognising the additional responsibility that Trust leaders (at all levels) have for role-modelling Values & Behaviours and fostering environments in which the Behavioural Blueprint can flourish.
- 13 staff have been recruited as part-time internal team coaches, to work alongside the Values & Behaviours Team Coach in supporting team development. The 'improving how we work' workshop has been piloted with the first 'early adopter' team, and further pilots have been arranged over the coming months. The refined toolkit will then be rolled out and around 30 teams currently have asked for support.
- 170 staff have signed up as Values & Behaviours Champions and this 'social movement' continues to grow. To improve visibility and communication, 22 visits by senior leaders to meet Champions/teams in their workplace have been arranged, and a further programme of 'back to the floor' activities (learning from the June 2014 Evergreen week) is planned for 2015/16.
- A 'Framework for Learning' is being developed through the Education & Knowledge Board, to ensure that all educational activities within the Trust (including induction and the transition of statutory & mandatory training to the Virtual Learning Environment) reflect best educational practice and appropriately cross-reference the Behavioural Blueprint.
- Regular open staff meetings at RSCH are continuing and are due to re-start at PRH, and these provide useful 'real time' feedback on the impact of the programme in practice. As part of the Staff Engagement Strategy, work is currently underway to improve communication and engagement with medical and other clinical students on placement with the Trust.

It is recognised that cultural change takes a minimum of three to five years of consistent, sustained effort and investment to realise. The challenge remains to maintain momentum and staff confidence, particularly during the hiatus of year-to-year financial/business planning.

8. Positive developments

The Trust has just received confirmation from the Joint Advisory Group (JAG) on GI Endoscopy that after considerable work we have now been accredited for the standards of our endoscopy units at PRH and RSCH. This is the result of a huge amount of work and will be of immense benefit to our patients and staff and I have congratulated all those involved.

Last's week's Brighton marathon was, as always, a special day for the City but it would be a real issue for the hospital were it not for the huge contribution of volunteers throughout the course, and this year was no exception. Over 150 doctors, nurses, physiotherapists and podiatrists, working alongside 300 St John's Ambulance volunteers, saw around 350 patients throughout the day; only seven runners attended A&E on the day, and all were ok thanks to receiving immediate intervention on the course. When you also consider that from midnight that Sunday to midnight Monday we saw 540 patients across our Emergency Departments, the most in any 24-hour period for over a year; high numbers of marathon runners also needing our care may have been very difficult to manage. I have thanked everyone who volunteered and my congratulations to all the staff who ran this year.

9. GMC visit preparation

The General Medical Council is due to visit the Medical School and HE KSS to assess the quality of training provided to undergraduates and post-graduates. BSUH as the lead provider of education for both these organisations is due to be visited by the GMC on the 27th of May. This will be an all day visit and will involve meeting trainers and trainees at various levels of training. The education department is putting together a programme which will present the GMC with information on the various aspects of the education we provide. The visitors will meet around 60 trainees during the days in 4 to 5 cohorts. We have already provided the GMC with a large amount of documentation demonstrating the various governance procedures we have in place to ensure the quality of education we provide. We will be highlighting to the GMC the areas that offer challenges and our efforts to meet these challenges. We shall keep the Board informed of the outcome later in the year.

10. Integrated Delivery Meeting

The Chairman, executive team and I met the NHS Trust Development Authority (TDA) on Wednesday followed by the routine Integrated Delivery Meeting (IDM) where we discussed our plans for 2015/16, including our work on key safety, quality and access standards, the

financial plan, and performance in relation to emergency and unscheduled care and referral to treatment. We discussed the plans we have in place and are developing and the support that could be provided from elsewhere and this will help in the implementation of the work we have set out.

11. Partnership working

A Board to Board meeting was held with Brighton and Hove CCG on 21st April when we had constructive and useful discussions regarding our joint strategic vision, the development of our external relationships, financial planning and sustainability and assuring performance

A similar meeting is planned with Horsham and Mid Sussex CCG.

12. New Non-Executive Directors

The Board of Directors will welcome three new Non-Executive Directors to their first meeting on 27th April: Dr Farine Clarke, Michael Edwards and Kirit Patel, who will bring an impressive range of skills and experience to the Board. With other Executive Directors, I look forward to working with them throughout their time on the Board.

Matthew Kershaw
Chief Executive
April 2015