

**TRUST BOARD MEETING IN PUBLIC
26 MAY 2021
CHIEF EXECUTIVE'S REPORT**

Introduction

In this report I provide an update on key developments over the last couple of months in areas that will be of particular interest to the Board. Appended to this report is a list of the eight fantastic winners of our Trust CARE value awards for the last two months (Appendix 1), and a summary of Executive Management Committee and Transformation Board meetings to provide oversight of the significant discussions of the senior leadership team in other areas (Appendix 2).

Quality, performance and recovery

We recognise that we, like many others, have a significant road ahead to expand and transform our services so that we can see and treat the many patients who have been waiting for appointments or interventions in a safe way. Our clinical, operational and support service teams are working extremely hard both to see patients as quickly and safely as possible, while ensuring that those who are waiting continue to have clinical oversight. We are working together with Buckinghamshire, Oxfordshire & Berkshire West Integrated Care System (BOB ICS) colleagues to meet the required targets of a national initiative called the Elective Recovery Fund (ERF). This is a fund of £1 billion to support elective activity to incentivise increasing the value of activity delivered above 2019-20 baselines. There are monthly targets of increasing value. I am pleased to confirm we have been able to increase our activity levels, delivering the following for April:

	Activity (% of 2019-20)
Outpatients	94.2%
Day-case	73.0%
Elective	69.8%

The ERF is also subject to the BOB ICS meeting a number of gateway criteria, including: addressing health inequalities; transforming outpatient services; implementing system-led elective working; tackling the longest waits; and supporting staff. Within the Trust we are confident that work is underway to meet these.

At the start of this month we submitted our operational plan for the first six months of 2021-22, which for the first time has been prepared together with BOB ICS partners across the system as per requirements from NHS England & Improvement (NHSE/I). The plan includes the following: workforce capacity and recovery; continuing to meet the needs of patients with COVID-19; maximising elective activity; delivering improvements in maternity care including the recommendations of the Ockenden Review; implementing population health management and personalised care approaches to address health inequalities and improve outcomes; transforming community services and improving discharge of patients from hospital. I would like to take this opportunity to thank the teams involved for all the hard work in pulling this plan together in collaboration with our BOB ICS partners.

In our emergency department (ED), work continues to improve how the department and the pathways that support it perform. Though we continue to have challenges, we have made improvements since my last report, reporting 82.6% for March and 82.0% in April against the 4-hour target of 95%. Focus has also been on reducing the number of people in department with a total length of stay of twelve hours, reducing our Medically Optimised for Discharge numbers and our ambulance handover times.

Performance of Cancer services has improved as measured by the 62 day cancer treatment standard. Whilst we have not achieved the standard, we have overachieved the faster diagnostic standard, which requires us to have diagnosed or excluded cancer within 28 days of referral. This reduces the amount of time patients carry uncertainty about their condition and as well as being an important quality improvement it allows more time to arrange treatment.

In April I was pleased to meet with the Regional Chief Midwife at NHS England and Improvement alongside our Head of Midwifery and clinical teams to review our submission and action plan in response to the Ockenden review of maternity services. A clear area of focus was the current and future challenges relating to midwifery staffing and I am pleased to report that we have recently been successful in recruitment of our third year midwifery students, who expressed interest in remaining at the Trust following registration. This is the highest number of entrants we have had in the last few years.

Learning

In March we recorded two instances of *clostridioides difficile* infection and six in April. We reported zero instances of MRSA bacteraemia infection in March and April, and zero never events in the same months. In March we recorded 422 births and 426 in April; in the same months we recorded 114 and 87 deaths respectively.

We continue to learn from what we have done right as well as where our patient care may not have met the high standards that we aspire to. In March and April we recorded 47 and 48 formal complaints respectively, and 43 and 31 excellence reports. The following is an excellent example of the patient-centric care we aspire to deliver at all times:

“Dr *** conducted a thorough assessment of a gentlemen with Parkinson’s disease who had repeatedly expressed a wish to die. Dr *** demonstrated excellent interpersonal skills, navigating some exceptionally challenging verbal behaviour by the patient, to allow the patient to honestly reflect the true impact of his illness on his quality of life. The assessment, which was excellently documented in the medical notes, reflected advanced care planning, the physical and psychological impact of the patient’s illness and a through capacity assessment. Dr *** had liaised with the patient’s GP and next of kin to gain a thorough understanding of the patient’s psychological and physical condition prior to his admission to hospital, providing essential background knowledge for the assessment.”

People

In my last report I introduced Thrive@BHT, our two-year programme to support the recuperation of our colleagues following the significant challenges of 2020-21 and our ongoing ambition of making our Trust a great place to work for all. As well as dedicated wellbeing support to some of our most affected teams, one of the first components of this programme is the Trust-wide rollout of ‘REACT’ mental health training for all managers. REACT stands for: Recognise, Engage, Actively Listen, Check Risk, Talk about a plan, and this comprehensive rollout is designed to ensure managers can identify individuals in their teams who would benefit from wellbeing and/or mental health support, as we know it can be difficult to identify it in oneself.

I am also pleased to share that we are once again offering £15 to all colleagues to spend on something that supports their wellbeing, and in recognition of the extraordinary events of 2020-21, are giving all individuals an additional day’s leave as a Wellbeing Day. We have received lots of positive feedback from colleagues and hope that these two initiatives will both encourage our people to invest in their personal wellbeing and give them the opportunities to do so.

Recognition of our people when they excel or go the extra mile is an extremely important part of our organisation and this year more than ever it will be a delight to celebrate those who have been so fundamental to our story of the COVID-19 pandemic: on 20 May we will be announcing, albeit in a slightly different way this year, the winners and runners up in our annual Staff Awards. I look forward to sharing more in my next report to the Board.

As digital transformation will be a continued key focus for the Trust, I am delighted to welcome Ross Fullerton who has joined the Buckinghamshire Integrated Care Partnership as Interim Chief Digital & Information Officer. Ross joins us from the London Ambulance Service where the projects he was responsible for included the digital technology underpinning 999 services and more recently leading the strategic recovery from COVID-19.

Finally, we have all been shocked and saddened by the news from India over the last few weeks. Many colleagues have friends and family in India, as well as in other countries, where COVID-19 is having a devastating impact. In addition to our existing wellbeing support services, we have asked managers to be flexible in meeting requests from their team to call friends and family for compassionate reasons during work hours as we know that this can be a problem with different time zones around the world. We have been hosting weekly ‘drop in’ virtual meetings during May with a focus on linking up with and supporting colleagues who have friends and family overseas. We have also put in place a fund to support colleagues who need to travel to countries on the “Red List” at short notice and may have difficulties in meeting the additional costs of travelling to these countries.

Place and System

Domestic Violence and Abuse (DVA) was discussed at the ICP Board Chairs’ meeting in April where lead officers for DVA proposed a post lockdown strategy and communications plan. This is an area that affects all partners in the ICP and has been highlighted as a priority for collaboration this year. A new Domestic Abuse Board has been formed and met in shadow form in March. Key leads across the ICP will also be involved in a DVA strategy working group to drive forward this area of work.

Over the last few months, our investment in infrastructure is helping us to transform the way that we can deliver care to our patients as we traverse the pandemic landscape. We have been actively building on the work we started with our integrated care partners in the delivery of Carecentric, the local shared care record. All partners now have access to this record embedded within their systems allowing access to shared information at the point of care. Over the next few months, we look forward to working collaboratively to use this platform to transform the way we deliver care across Buckinghamshire. The ICP has recently signed up to the Combined Intelligence for Population Health Action (CIPHA) collaborative, enabling access to national data analytics dashboards fed from the information held within our local shared record dataset. We are working with our partners to develop novel ways to use our population health information to deliver efficiencies in reducing our waiting lists and identifying any potential areas of health inequalities.

Financial reporting

The 2020-21 financial year ended with the Trust reporting a full year break even position in line with the plan agreed with NHS England & Improvement and BOB ICS. The group consolidated Trust position including our wholly owned subsidiary, Buckinghamshire Healthcare Projects Ltd, was reported as £0.1m surplus.

For the first month of the new financial year 2021-22, the Trust reported a break even position in line with plan. This included £0.8m spend on COVID-19-related expenditure. Our full year forecast was reported at £22.3m deficit, in line with our draft annual plan which includes delivery of a £16m efficiency plan.

Proud to be BHT

May has been a time to recognise and celebrate some of our wonderful colleagues and raise awareness of just some of the careers opportunities that exist within the Trust. We have had the International Day of the Midwife, International Nurses Day and Operating Department Practitioners Day.

We held our very first virtual nursing conference, 'The Courage of Compassion', on the 7th May 2021. We would like to extend our thanks to all our guest speakers who included Professor Dame Elizabeth Nneka Anionwu, Dr Crystal Oldman CBE, CEO Queens Nursing Institute, Andrea Sutcliffe CBE, CEO and Registrar of the Nursing and Midwifery Council and Professor Jacqueline Dunkley-Bent OBE.

In April, we marked the 20th anniversary of the Trust's first cohort of Filipino nurses. In April 2001, over 35 nurses made the long journey from the Philippines to Buckinghamshire to start a new life followed by a further group later that year. Two decades later, over 30 of these nurses still work for the Trust and are key members of the local Filipino community. The community has grown considerably and in October 2020 the Kalinga Bucks Filipino Health Professional Organisation launched. It now has over 200 members and is open all Filipino healthcare professionals who live and work within Buckinghamshire.

Many congratulations to our colleagues who have been shortlisted for the Bucks Health & Social Care Awards. The four people and two teams who have been nominated are: the research & innovation team, the critical care team, school immunisation team, Ornella Ortensi (trauma and orthopaedics), Megan Howe (A&E and NICU), Marianne Reyes, (dialysis unit) and Hazel Nyack-Kaseke (ophthalmology). The results will be announced on the 21st May 2021.

Finally, many of colleagues have taken time to reflect on the last year and we have launched our own internal virtual wall of reflections with blogs, poems and pictures to capture their experiences and feelings about the pandemic. Our Junior Doctors Forum has also organised an art exhibition with drawings and paintings created by our colleagues during lockdown. The standard is outstanding and you will be able to view some of their work on the Trust's website.

Neil Macdonald

Chief Executive

Appendix 1 – Trust CARE value awards

Appendix 2 – Executive Management Committee and Transformation Board

Appendix 1 – Trust CARE values awards

I am delighted to share this summary of the winners of our Trust CARE value awards. Every month from all nominations received from colleagues and members of the public, the Executive Management Committee award four winners, one for each of four categories, which are: Collaborate, Aspire, Respect, and Enable.

March 2021

Category	Name & role	Nomination	Nominated by
Collaborate	Aylessia Boardman, Physiotherapist Respiratory	Aylessia has been a positive influence, motivating and uplifting any of her team members and any of the redeployed physiotherapy staff on the respiratory wards. She notices if colleagues are not themselves, checks in, offers a space for them to discuss their issue should they want to. She approachable and generous with her already pressured time when it comes to providing insight, advice, treatment discussion, case based discussions and any other issues that may be adding pressure or stress to the respiratory team or to any redeployed staff who may be feeling out of their depth. She is knowledgeable, friendly and always has a way of de-escalating the situation, simplifying it to an understandable means and reinforcing your confidence in the matter. Always joyful, inspiring and providing holistic care where she can.	Member of Staff
Aspire	Karen O'Rourke, Support Secretary to ENT Department	Karen has wanted to undertake her Medical Terminology course for some time and achieved this last year. She was an attentive and diligent student who was always willing to help and support her classmates. To register for the AMSPAR qualification she needed to pass the additional exams, and despite two attempts unfortunately she had not passed. The AMSPAR awarding body frustratingly does not feedback which areas of the exam are unsuccessful, making it challenging for individual students to improve. Karen has been understandably very disappointed by this, and her confidence took a bashing. However, in true BHT style, she picked herself up and registered onto a Diploma in Medical Secretary Skills course, which she self-funded and completed in her own time. Karen was awarded a Distinction on 4th March! Her Aspirations have been achieved!	Member of Staff
Respect	Andy Cotrell and Rebecca Pearce, ODP	I have PTSD and huge anxiety. I came into theatre awake for procedure to desensitise my nerve. I was terrified and this has been the 8th or so time I have been into theatre awake. Andy and Rebecca could not have been more amazing. They treated me as an individual, had a great sense of humour which I use to mask fear and they certainly picked this up quickly and ran with it. They were patient, funny, respectful and very compassionate. This is the first time I have managed a procedure without sedation, or a major panic attack. I honestly could not have been so brave without them. Shame that not all the staff could get this right in previous visits. Mental health is severely overlooked.	Service User
Enable	Member of IT staff	This member of staff recently volunteered to go onto a ward as a ward clerk during the recent covid surge. This was no easy task as they had to be retrained for this role. They also stayed in accommodation provided by the acts of kindness team isolating from loved ones due to not wanting to risk their health whilst being redeployed. They also stayed in accommodation provided by the acts of kindness team isolating from loved ones due to not wanting to risk their health whilst being redeployed. They never moaned, always smiled and was an asset to the ward during the recent covid surge in the Trust. As her line managers we would like to nominate them to receive one of the monthly CARE awards for all they have sacrificed whilst being redeployed. They missed their partners birthday, valentine's day and a few other memorable dates and could only catch up with loved ones via a video call due to being redeployed.	Member of Staff

Category	Name & role	Nomination	Nominated by
Collaborate	Rhinna Young, HCA	Whilst on call as the medical registrar on the weekend, Rhianna showed exemplary clinical and communication skills when she recognised a deteriorating patient. She had sought advice from a staff nurse and did not feel her response met with her clinical concern for the patient. Rhianna therefore approached me as the medical registrar on the ward (reviewing a different patient) and effectively highlighted her concerns. An emergency call was soon put out and this patient transferred to ITU. Without her confident and appropriate escalation of her concerns this would not have happened in such a timely way. An excellent example of how as a whole medical team, we should feel empowered to escalate and raise our concerns for patients in the most appropriate way we feel suits the clinical need.	Member of Staff
Aspire	Gemma Heath, Paediatric Theatre Liaison Nurse	Gemma works tirelessly and always with a smile, she has so much on her shoulders but never lets it show! she has worked on ICU through the pandemic dealing with unspeakable trauma but has also been the voices of hundreds of children requiring surgery who have been delayed due to such unprecedented circumstances. She arranges all the lists/staffing/covid swabs everything! & She is a ray of sunshine to work with and deserves a shout out for all that she does. I look up to her as her knowledge base is amazing! She is an unsung hero!	Member of Staff
Respect	Simon Nesbeth, IT engineer	With reluctance, I joined a queue and called the IT desk and spoke to Simon who talked me through the computer issues I was having. Simon was patient and kind, and although I am sure he could sense my frustration, was calm in helping me resolve the issue. He did not rush me, and I was able to resolve the problem with his instruction and guidance. He told me he really enjoyed his job and even stayed late to ensure the problem was solved. He gave me his undivided attention, he made me feel competent and able - which I really appreciated! It struck me afterwards that perhaps the IT team do not get much recognition in all they do to help, so I just wanted to say a big thank you.	Member of Staff
Enable	Michelle James, Workforce Manager	I want to nominate and thank Michelle for not only working with us collaboratively, but also for ENABLING myself and a colleague to do our jobs and ensure that we can recognise and acknowledge colleagues for their long service, without her support we couldn't do our job. Michelle is the manager of the ESR team but takes on a lot of this work herself. Her ESR team provide a huge amount of data and business intelligence to the rest of the organisation and everyone's need for workforce data is a huge task, but Michelle always delivers. However, when there are queries and there are usually loads once we have delivered a quarter, her role continues as we ask staff to complete a reckonable service form to update their record and make it correct - Michelle then validates the data on the form by going back to and scrutinising the individual files for staff, before updating the record - not an easy task when having to deal with all the other data reports and returns the ESR team have to deliver every month, hundreds of updates and changes. Thank you Michelle.	Member of Staff

Appendix 2 – Executive Management Committee and Transformation Board

Executive Management Committee 30 March to 11 May 2021

Executive Management Committee meets on a weekly basis and covers a range of subjects including early strategy discussions, performance monitoring, consideration of business cases and moderation of risk documentation. During recent months this has also included important updates relating to our COVID-19 pandemic response. The meeting is chaired by the Chief Executive Officer and attended by Executive Directors and other key leaders within clinical and corporate services. The following provides an overview of some of the key areas considered by the committee since 30 March 2021.

Quality and Performance

Maternity safety report
Infection Prevention & Control (IPC) monthly reports
24/7 Outreach business case
IPC Board Assurance Framework
Cancer services report
Clinical audit
Summary Emergency Department Indicator Table
Patient experience report
Ophthalmology mobile theatre site
Young people mental health
Paterson and Cumberlege report
Research and Innovation committee
Covid-19 inpatient visiting
Ageing well pilots
Patient safety surveillance and safeguarding vulnerable patients report
Safe staffing
Integrated care and disability sport
Nursing Midwifery and Allied Health Professional Board
Covid-19 third wave divisional planning
Internal professional standards
Midwifery workforce
Divisional operational committee
Care Quality Commission quality improvement plan
Spinal cord injury service transformation
Fluoroscopy replacement in radiology
Quality Impact Assessments
Robotic surgery business case
Speech and Language Services provision for Children & Young People
Maternity bid
Hospital at night audit
Lateral flow testing across Buckinghamshire
Quality accounts annual report

People

CARE value awards
Thrive @ BHT people recovery programme
Education and training to health & social care workforce
HR processes
Agile working
Health Education England
Wellbeing day
Staff travel
Appraisal framework

Money

Monthly finance report
Transformation update
Covid-19 cost-tracking
Purchase Order approval
Cost Improvement Plan targets
IT equipment procurement
Business planning prioritisation
Recovery resourcing
Contract activity and income review
Annual business planning 2021/22
Capital 5-year programme
Annual report and accounts

Strategy, Estates & Commercial

Operational planning
Subsidiary social enterprise application
Integration and innovation
Population Health Programme
Audiology tender
Buckinghamshire Healthcare Projects Ltd 3 year strategy
Text messaging service
Commercial strategy
ICS Operational Plan
Buckinghamshire frailty strategy
Security strategy

Governance

EMC Terms of Reference review
Caldicott & Information Governance
Legal services annual report
Data Security & Protection toolkit
Risk management strategy
Internal audit plan
Corporate risk register
Annual Governance Statement
Self-certification
Governance manual –
Standing Orders and Standing Financial Instructions
Summary of internal audit

The following policies were approved:

- BHT Pol 030 – Data Quality Policy v4.3
- BHT Pol 240 – Antimicrobial Prescribing Policy
- BHT Pol 122 – Ionising Radiation Policy
- BHT Pol 004 – Bed Management, Patient Flow & Escalation Policy v7.0

Established in 2020-21 as an Executive-level meeting with clinical leads from across the Trust, Transformation Board is dedicated to strategic projects and meets on a monthly basis covering transformation portfolio updates, strategic business cases, and quality improvement. Below is an overview of some of the areas considered in the last two months:

Outpatient transformation

Urgent and emergency care transformation

Transformation measures

Consolidation of ophthalmology outpatients business case

Quality Improvement huddles rollout update

Buckinghamshire Integrated Care Partnership integration vision and priorities

Cost improvement update

Quality Improvement projects on a page:

- Rapid Response Intermediate Care named clinician of the day
- Falls task and finish group
- Incorporating Comprehensive Geriatric Assessment into admission clerking
- Quality Improvement training plan