

York and Scarborough Teaching Hospitals NHS Foundation Trust

Report to:	Council of Governors
Date of Meeting:	1 December 2022
Subject:	Chief Executive's Update
Director Sponsor:	Simon Morritt, Chief Executive
Author:	Simon Morritt, Chief Executive

Status of the Report (please click on the appropriate box)
Approve \Box Discuss \boxtimes Assurance \Box Information \boxtimes A Regulatory Requirement \Box

Trust Priorities	Board Assurance Framework
 Our People Quality and Safety Elective Recovery Acute Flow 	 Quality Standards Workforce Safety Standards Financial Performance Targets DIS Service Standards Integrated Care System

Summary of Report and Key Points to highlight:

To provide an update to the Council of Governors from the Chief Executive in relation to the Trust priorities. Key points include: recruitment, industrial action, flu and covid-19 vaccinations, celebration of research, CQC update, digital documentation rollout, support for our improvement journey, operational pressures and winter respiratory viruses, governance and system updates and board recruitment.

Recommendation:

To note and discuss the report.

Report History Council of Governors only.		
Meeting	Date	Outcome/Recommendation
Council of Governors	1 December 2022	

1. Our People

1.1 Recruitment

As previously reported, our efforts to expedite recruitment of Patient Services Operatives (PSOs) and Healthcare Assistants (HCAs) are moving at pace.

Our second recruitment event in early October resulted in 101 offers of employment, and the team is working through these to enable us to welcome our new recruits as soon as practically possible. In the meantime, the staff who were recruited at the first event in September are now arriving and will be making a difference on the medical and elderly wards in York. In total over 200 offers of employment have been made through these events.

These are key roles for supporting delivery of the CQC action plan, and in helping ensure that fundamentals of care are consistently delivered.

Our thanks must go to the recruitment team, who are working tirelessly to meet the demands of this step-up in our recruitment efforts and to ensure we can welcome our new starters as soon as possible.

1.2 Industrial action

As has been widely reported in the media, the Royal College of Nursing (RCN) has announced the outcome of its ballot on industrial action over NHS pay.

The ballot was conducted on an organisation-by-organisation basis, and our trust is one of the majority of NHS organisations whose RCN members voted in favour of industrial action.

The RCN has now announced the first two dates for action, which will be 15 and 20 December, with the potential for the announcement of further dates at a later stage.

At the time of writing we are awaiting formal notice of the intention to take action in our trust, however we have been working in anticipation of this for a number of weeks and have a command structure in place to support planning and delivery of services should strike action go ahead.

We recognise that the decision to strike is not taken lightly and are working closely with staffside colleagues to ensure we can continue to provide safe care during the period of industrial action.

The majority of the unions representing healthcare workers have also signalled their intention to ballot their members on industrial action and are at varying stages of consultation on this issue. We will provide further updates as the position becomes clearer.

1.3 Flu and Covid-19 vaccinations update

Our campaign to vaccinate staff against flu and Covid-19 concluded at the end of this month. Uptake has been lower than in previous years' campaigns, however we are in line

with the uptake in the rest of region for flu vaccination and are above the regional uptake levels for the Covid-19 vaccine.

Staff who wish to receive the vaccine after the campaign has finished will still be able to do so, and we continue to encourage staff who have been vaccinated elsewhere (for example via their GP) to let us know so that we can have as full an understanding as possible as to the rate of vaccination in our workforce.

1.4 Celebration of research

The Trust recently hosted its first Celebration of Research event, to mark the achievement of two significant milestones of over 1,000 studies hosted and delivered, and more than 50,000 people taking part in our research trials.

The studies cover a wide range of clinical trials and involve collaboration with universities, NHS partners and the private sector. Attendees included guests from the University of York, York St John University, Hull York Medical School, Tees, Esk and Wear Valleys NHS Foundation Trust as well as industry.

Speakers from our Trust included Dr Sarah Baker, Professor James Turvill and Professor Richard Gale, plus Southampton's Mike Grocott, John Wright from Bradford Research, and the University of Oxford's Professor of Medicine and Epidemiology, Martin Landray.

It was a fantastic day of learning and a great way to celebrate and raise the profile of research within our organisation. Thank you to our Head of Research Lydia Harris and the wider team for hosting this successful event.

2. Quality and Safety 2.1 Care Quality Commission (CQC) update

The CQC carried out its well-led inspection of the trust this month as part of its wider inspection of the organisation. This involved three days of interviews and focus groups with the board and other senior leaders and subject-matter experts, including a governor focus group which a number of governors attended.

During this time the CQC also re-visited a number of clinical areas on both sites, including the emergency departments and maternity units, to follow up on the actions we committed to undertake following their last visit on 11, 12 and 13 October.

The inspection is still formally underway, as the CQC is yet to carry out a number of interviews, and they have requested further information and evidence, however we have received a letter from the CQC summarising their feedback from this latest part of their inspection.

It is pleasing to see that the CQC found improvements in the emergency department at York in relation to management of demand, risk and escalation, as these were flagged as areas of concern during the October visit. They observed improved systems for managing demand particularly in the majors waiting room, improved record keeping, and more timely risk assessment and response to escalation of risk to patient safety.

However, the CQC flagged serious and significant concerns in the maternity department at York, specifically in relation to governance processes, and assessing and responding to risks for patients.

The letter also outlines their broader observations from the well-led visit. These relate to the assessment of and response to risk, with staff working in a reactive rather than proactive way, and concerns around the trust's correlation of risks, incidents and complaints and the learning from these.

The letter contained no findings of note in relation to Scarborough Hospital.

In response to the concerns raised by the CQC we are required to submit a detailed action plan focussed on their areas of concern, followed by regular reporting of progress against that plan to the CQC. We will share this action plan at a future Board.

This feedback is both concerning and disappointing, and we are providing support to the care group management team to develop the action plans and put in place rapid mitigation to address the findings. We are also focussing the external support on these areas of greatest concern.

These inspections will culminate in a final report, which we expect to receive in January 2023.

2.2 Digital documentation phase one complete

Nucleus, the new software system, which is revolutionising the admission process, has now been rolled out to all adult inpatient units.

The software has been developed in house using ideas and feedback from staff and can be used on handheld devices to help reduce duplication of work and help deliver better care. It facilitates a much quicker admission process and is recorded in real time meaning staff can at-a-glance know what care has been delivered and what still needs to be done.

This is already proving successful in reducing the time taken to complete documentation, freeing up time to care for patients, and the response from staff has been overwhelmingly positive.

Activity so far...

- 16,000 nursing assessments
- 26,000 Care Plan evaluations
- 268 mobile phones and 85 tablets issued
- 1000+ nurses completed Nucleus training
- 200,000 care plan tasks completed.

Next steps include collecting feedback and weekly virtual Nucleus drop-in sessions. Phase 2 will prioritise and digitise more documents, improve mobile observations on a hand-held device and roll-out Nucleus to our emergency departments (including Mental Health Triage/Mental Capacity Assessment).

I want to recognise the fantastic work that has taken place to develop and implement Nucleus. Thank you to everyone involved, particularly Nicola Coventry (Chief Nursing Information Officer), Vicci Anderson (Lead Nurse for Digital Projects) and Kevin Beatson (Head of Systems Development) for developing the product and driving forward its delivery.

3. Support for our improvement journey

We continue to be a challenged organisation in relation to our operational performance. There has been no let-up in pressure, and we continue to experience issues with flow, leading to delays in our emergency departments and in the ambulance queue, as well as a large cohort of patients who are waiting to be discharged. Our Covid-19 inpatient numbers also remain consistently high (over 100 at time of writing) and we are seeing growing numbers of flu cases.

In addition to this we are also under significant pressure with our elective backlog and cancer delivery, with diagnostic capacity playing a major part in this.

As I reported at last month's Board, we are engaging with offers of a range of external support to target our most significant risk areas.

We have received formal confirmation of the move to Tier 1 due to the risk to delivery of our elective recovery programme. The first action under Tier 1 is a visit from the Elective Intensive Support Team, who will be with us for two days in early December to review our processes and identify opportunities for improvement.

The National Maternity Support Team will also be with us in early December and I have asked them to focus their three days on our York site in light of the recent CQC inspection feedback.

Further support includes Lorna Squires from NHS England working with us on a review of our governance architecture, Sue Peckitt from the ICB is providing three days a week to support infection prevention and control, External midwifery consultant Michaelene Holder-March continues to work with the care group with specific pieces of work (for example the stillbirth review), and Dr Matthew Cooke is supporting an independent review of the proposed new operating model for the emergency department in York.

Finally, Shaun Stacey has now formally joined us as Improvement Director on an interim basis, predominantly to focus on our elective recovery plan and delivery of actions under the trust's priorities.

4. Acute flow4.1. Operational pressures and winter respiratory viruses

Humber and North Yorkshire Health and Care Partnership Chief Executive Stephen Eames has written to all organisations in the partnership asking for mitigations to be put in place in anticipation of some of the challenges facing us all this winter, including respiratory infections, the impacts of cold weather on health, and worsening cost of living.

Our numbers of patients with Covid-19 is consistently above 100, and flu numbers are increasing with the experience in the Southern Hemisphere suggesting that we should expect a difficult flu season this year.

Local Directors of Public Health across Humber and North Yorkshire have collectively advised on a number of actions including reinstating face masks for staff and visitors, encouragement of staff to have their flu and Covid vaccinations, and the continued adherence to rigorous infection prevention and control measures. As a trust we are already taking these steps, and our flu and Covid surge plans are well rehearsed and will be implemented as necessary.

5. Governance and system updates

5.1. Humber and North Yorkshire Integrated Care Board update

York Place Director appointed

Sarah Coltman-Lovell will take up the post of Place Director for York from 19 December 2022. Sarah is currently the Interim Director of Strategic Planning for the ICB and will take over from Simon Bell who has held the Place Director role on an interim basis since August 2022.

This is the final appointment to the six Place Director roles for our ICS, with the NHS Place Directors acting as core members of the six Place Committees across Humber and North Yorkshire.

Cancer Alliance Chair appointed

Humber and North Yorkshire Cancer Alliance has announced that Stephen Eames CBE has been appointed as its new Chair. Stephen will officially take up the role from 1 January 2023 and he will combine the role while serving as Chief Executive of the Humber and North Yorkshire Integrated Care Board. As Chair, Stephen will oversee the work of the Cancer Alliance and provide leadership on the key issues affecting cancer services in the Humber and North Yorkshire area.

Lucy Turner, our current deputy Chief Operating Officer, will also be joining the Cancer Alliance as Managing Director from 1 January 2023.

5.2. Board recruitment

Following the substantive appointment of Chief Operating Officer Wendy Scott as the Managing Director of the Collaborative of Acute Providers, we are in the process of recruiting a new Chief Operating Officer for the trust.

Finally, I would like to formally welcome Dr Karen Stone as our new Medical Director. I am sure you will join me in making Karen feel welcome.

Date: 1 December 2022