



## **Council of Governors**

## 2 June 2015

# **Chief Executive's Report**

#### 1. PERFORMANCE

The Board of Directors has now moved to an Integrated Performance Report reflecting the five aims of the Trust's strategy. This is working well albeit with a remaining element of work in progress.

The performance overview for quarter 4 is attached at Appendix 1.

As Governors will see, 2014/15 has largely been a successful year for the Trust due to the hard work and dedication of all its staff. As previously reported to the Council of Governors, the Trust, in common with many other providers, was unable to meet the emergency admissions target in quarter 3, quarter 4 and hence for the year as a whole with performance being at 92% for 2014/15. I have set up a Steering Group to consider how the emergency pathway can be improved and the following 4 workstreams have been identified within that overall Steering Group.

- Actions within the A&E Department itself
- Improved assessment areas / arrangements
- Improved discharge arrangements
- Further understanding the wealth of data available concerning the emergency services performance and whether this has fundamentally altered in the recent period.

I would anticipate that some recommendations from this group will be implemented from the beginning of quarter 2 with the full impact in the winter when challenges are likely to be at their greatest.

Although the Trust has achieved all the cancer targets, 62 day target has been particularly challenging in quarter 4 due to late referrals from District General Hospitals and this matter continues to be the subject of urgent discussions with the relevant parties.

### 2. UPDATE ON 2015/16 TARIFF PAYMENTS

I am pleased to report that continuing negotiations with NHS England have been successful and that this matter has now been resolved.

### 3. WORKING TOGETHER

The current programme continues to work well and following the outcome of the general election it is now anticipated that the element of the Vanguard programme concerning the future of smaller hospitals will be taken forward as outlined in the 5 Year Forward View.

Governors will recall that the Working Together programme was the subject of a Vanguard application and it is likely that in the early summer the Trust will now hear whether that application has been successful ..

### 4. LISTENING INTO ACTION

This programme is progressing with 15 schemes being taken forward over a 20 week period. This will culminate with the teams sharing their work and the differences they have made at the "pass it on" event on 30 July 2015.

The following schemes are led by a triumvirate of medical, nursing and management colleagues:

- Reducing cancelled operations
- Encouraging sedentary staff to move more
- Valuing our colleagues (focus on engaging Hotel Services staff)
- Improving team working in Spinal Injuries
- Improving staff engagement in Sexual Health
- Getting more patients home for lunch (TTOs)
- Improving communication amongst OSCCA colleagues
- 7 day working in Radiology
- Improving protocols in Ophthalmology (IT)
- Improving patient experience in bladder cancer pathway
- Diversity and inclusion
- Patient Safety Zone (bed side safety checks)
- Improving way finding in Renal
- Patient Transport
- Improving flow in Medical Outpatients Department (NGH)

#### 5. Research

The Trust continues to take forward its Research Strategy and it now has a Research Committee which is meeting regularly.

I am pleased to report the following key features of the Trust's work on research:

- The Clinical Research Academy is now being developed and the first fellows will be selected in June 2015 with the fellowships beginning in September 2015. There will be an award of up 2 PAs per fellow and STH will be supporting up to 5 fellows.
- Academic Directorates the Research Committee has renewed the academic status of the 8 existing Academic Directorates and awarded Academic Directorate Status to the following 5 directorates:
  - Obstetrics, Gynaecology and Neonatology
  - Renal Services
  - Urology
  - Accident and Emergency
  - Professional Services

In terms of key performance indicators which are assessed nationally, the STH position is as follows.

- The STH performance for the 70 day metric in 2013/14 went from 20.5% in quarter 1 to 88.3% in quarter 4. The 70 day metric refers to the target for the lapsed time between the patient agreeing to be part of the trial and actually commencing on that trial. On the

basis of the quarter 3 adjusted performance this shows STH ranks  $18^{th}$  out of 59 Trusts. The Trust is in division 1 and ranks  $4^{th}$  out of the 16 Trusts in this division.

- STH is recruiting 91% of its agreed national institute for health research, clinical research network target number of patients for 2014/15.
- Recruitment to time and target is 45% compared to the national average of 51%. STH ranks 28<sup>th</sup> out of 57 Trusts. As a technical point, this data is taken from closed trials only.
- All key STH metrics continue to improve.

In conclusion, therefore, it is clear that this aspect of the Trust's strategy is now progressing well and the previous investment / efforts made are reaping rewards.

Andrew Cash Chief Executive 14 May 2015