

# Chairman's bulletin

November 2017

Dear member,

I am pleased to update you after our latest board of directors' meeting.

I hope you find this bulletin informative. If you have any comments about the format or content please contact the private office.

## Changes to executive team

Alan Foster has begun a new role to lead some work to investigate if more integrated working would support the delivery of some Sustainability and Transformation Partnership priorities across North Cumbria and North East (CNE).

In his absence, Julie Gillon has been appointed as interim chief executive for the trust.

She has been joined by Lynne Taylor as interim director of planning and performance and Julie Parkes as interim director of operations.

Caroline Trevena has also left her role as director of finance. Caroline will spend the next few weeks supporting the transition of estates, facilities and procurement to the new facilities management company. Robert Toole has been appointed interim director of finance. Robert is an experienced finance director having worked in the public and private sectors.

Director of human resources Ann Burrell has retired and Alan Sheppard has been appointed as interim director of workforce and has also now taken up his post.

I wish the new members of the executive team every success in their roles and, while there have been many changes, we still have a strong board.

## Preventing the spread of infection

In August the trust reported four attributed cases of clostridium difficile infection and no cases in September, which means we have now had 19 cases this year - exceeding our trajectory for this year (2017/18), of 13 cases. In the second quarter of the year we had fewer cases on Cdiff than last year.

The trust has also reported two trust attributed cases of MRSA bacteraemia in August.

Work is on-going to identify the reasons why we have had these cases.

If you are in one of our hospitals or in other clinical areas across the trust, you can help by making sure you wash your hands and following our bare below the elbows policy.

## Capital programme

Peter Mitchell, director of estates and facilities, updated the board on the trust's capital programme.

The major engineering infrastructure replacement scheme is progressing well and below budget.

The first phase to upgrade the electrical infrastructure is complete, while the second is well underway and expected to be completed by September next year, followed by the decommissioning of the boiler house and the demolition of the chimney by January 2019.

Other projects, including replacing the fire alarm system, lifts and the medical gases plant at the University Hospital of North Tees, are being planned.

We also have a clinically approved medical equipment replacement programme to ensure we are providing the best care we can be to our patients.

## Money

The trust's position up to September is in a deficit of £11.7m, which is £5.9m behind plan.

The NHS is facing unprecedented financial challenges and we are no different. This means we need to become even better at being efficient in the way we provide care to our patients, reducing waste without compromising on quality.

Our new campaign - Think Change Save - will help us to share our ideas and our successes right across the organisation. NHS England has published a "10 Point Efficiency Plan" which highlights ways in which trusts can make efficiencies and cut waste. The good news is we have already made a lot of these changes, but all staff need to continue to work together to identify further areas of improvement.

No single service or department can deliver this alone – we are all in this together. Already we have some fantastic examples where teams and individuals have identified small changes that resulted in big waste reductions and time saving.

However, the size of the challenge is great and there will be some difficult choices ahead unless NHS funding improves.

## Performance

We are one of the best performing trusts in the country – something which we have deservedly recently received national media coverage for recently and I am enormously proud of all our efforts in achieving this. Like every other trust, we find ourselves under increasing pressure to meet these very challenging targets every month. We need to work together to remain strong.

Our performance against the emergency care standard was achieved in September, reporting at 96.90% against the target of 95%. Overall, in the second quarter of the year, we also achieved above the target with 97.63%.

### *Cancer services*

The trust underachieved against the 62 day referral for treatment target and the two week rule standard for September.

### *Moving to Good*

We are taking part in a pilot led by NHSI and Advancing Quality Alliance (AQUA), in support of organisations Moving to Good. This follows our rating of requires improvement from the CQC in 2015.

A number of staff attended a launch event in Leeds last month. The Trust has been commended for a number of performance improvements and Fiona McEvoy, senior clinical matron, had spoken about the good work of the trust, which has been well received.

# Transformation and organisation development

A significant amount of work is on-going on a number of projects around the transformation and organisation development programme, including:

- Temporary staffing - medical
- Outpatients
- Seven day working
- Integrated care pathways (end of life care)
- Optimising services – model ward
- Organisation development
- Employee self-service (ESR), Health Roster implementation
- New projects - facilities management project, pharmacy and clinical coding activity

The programme of work under this team is very large, with a key focus on financial performance, improvement and sustainability of services.

## Information governance

Chief information and technology officer Graham Evans, who is the trust's senior information risk owner, updated the board about the trust's information governance (IG).

IG Training met its target of 95% of staff being trained in the last year.

There are 26 open risks on the IG risk register, none of which are rated high and six are moderate. Key risks rated moderate or above include storage of paper records, staff not following policy/procedure and using of fax and emails correctly.

The last year's IG toolkit was also graded as satisfactory with an overall score of 80% (against a target of 77%).

The trust has significantly reduced the number of incidents at level two and above from 13 in 2014/15 to two during 2015/16, and down to one last year.

We have made great strides in the last few months which is very pleasing.

## Scan4Safety

The fourth and final stage of the Scan4safety project has now started. The project will be extended until the end of December due to the changes to the milestones by the Department of Health.

During phase three, the Scan4Safety team have successfully implemented PEPPOL (Pan European Public Procurement On-Line). PEPPOL is a transaction platform which allows the trust and its suppliers to trade with each other without any requirement for manual intervention. It's an end to end, automatic process from sending out purchase orders to our suppliers, receiving order confirmation and then receiving invoices when the goods have been received in the trust.

This is a fantastic move forward to achieving our objective of being a paperless organisation.

## Hartlepool Matters report

The Hartlepool Matters report was published in October 2017. Written by Professor David Colin-Thomé, the Independent Chair of the Local Health and Social Care Plan Working Group, it identifies priorities for the delivery of integrated health and social care services across Hartlepool.

The report was compiled following a two-year partnership working group that included all 33 Hartlepool Borough Councillors, representatives from the Clinical Commissioning Group and experts from health and social care organisations responsible for the provision of services in Hartlepool and the surrounding areas, including ourselves, TEWV, NEAS and North Durham Clinical Commissioning Group. Views were also obtained from 'other interested parties' to help the group identify local strategic priorities for consideration in the development of the Plan.

The plan, which is available on line here [https://www.hartlepool.gov.uk/downloads/file/2709/hartlepool\\_matters](https://www.hartlepool.gov.uk/downloads/file/2709/hartlepool_matters) looks at the area's key challenges for health and social care services and outlines a number of recommendations that we can all work together to implement to improve the health and wellbeing of the people of Hartlepool.

## Endoscopy award

The trust has successfully achieved accreditation from the Joint Advisory Group (JAG) for Gastrointestinal Endoscopy. This is a fantastic achievement for both of our endoscopy units at the University Hospital of Hartlepool and the University Hospital of North Tees.

The assessors were very impressed with the positive, safe, patient centred and enthusiastic atmosphere that the units offer. The team continues to lead the way regionally and is the training centre of choice for trainees, delivering national training courses and national bowel cancer screening and Bowel Scope Screening (BOSS), in addition to pushing the boundaries research with two new national studies about to start.

## The board papers

The board papers from the last board meeting are posted on our website when the minutes of the previous meeting are approved. If you would like to read the board papers please go to <http://www.nth.nhs.uk/about/board-meetings/>

Board meetings are held in public and you are welcome to attend. To confirm your attendance please contact the private office on 01642 624060.