

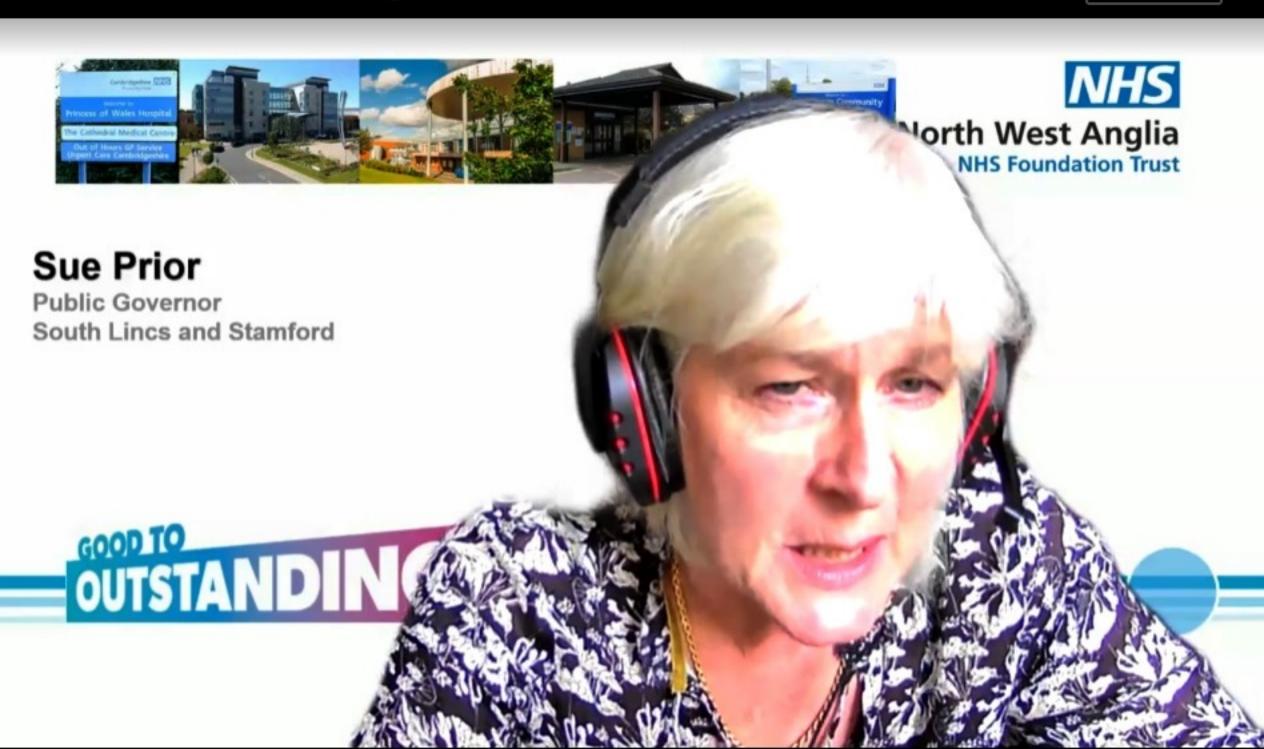




# Caroline Walker Chief Executive









2021/22

Council of Governors 18 May 2021



# 2021/22 Trust priorities, vision and goals

#### VISION

Working together to be the best at providing outstanding care for local communities

#### VALUES

'We put patients first'

'We are actively respectful' 'We seek to improve and develop' 'We are caring and compassionate' 'We work positively together'

#### STRATEGIC GOALS

'Delivering outstanding care and experience' 'Recruiting, developing and retaining our workforce' 'Improving and developing our services and infrastructure'

'Working together with local health and social care providers'

'Delivering financial sustainability'

#### PRIORITIES 2021/22

'Recover safely'
'We will work with partners to fully recover services, provide good quality care and experience while addressing health inequalities

'Celebrate and support our staff'
'We will celebrate our staff and their
successes, provide support and develop
them for the future'

'Sustainability'
'We will work sustainably to further develop our services, finances and protect the environment'

### SUPPORTING OBJECTIVES

## 'Recover safely'

'We will work with partners to fully recover services, provide good quality care and experience while addressing health inequalities

- Restore and achieve all cancer standards by Q4
- · Elective activity to exceed prepandemic levels
- · Reduce length of stay for inpatients in our hospitals by Q3

- Introduce a new NHS111 pathway for emergency care
- · Enhance patient experience and diversity of our patient voice through engagement of minority / hard to reach patient groups
- Evidence good quality of care through reduction of the measure of mortality (HSMR) to below 100
- Maximise safety, quality and patient experience in maternity by implementing Ockenden recommendations
- Put addressing health inequalities at the centre of all our plans and strategies

# 'Celebrate and support our staff'

We will celebrate our staff and successes and ensure we provide support to our staff and develop them for the future

- Celebrate staff successes
- Introduce individual health and wellbeing conversations by Q1
- · Talent strategy to recruit, develop and retain staff
- Extend e-Rostering to all staff. including doctors by Q2
- Reduce maternity service vacancies to 5% by Q4
- · Work with Health Education Institution providers to increase student numbers
- Widen participation and workforce diversity to recruit staff from local communities
- Facilitate staff movement between STP healthcare providers
- · Increase agile and flexible working
- · Achieve Associated University of Leicester status
- Embed quality improvements and transformation as part of our culture and support staff development

# 'Sustainability'

We will work sustainably to further develop our services, finances and protect the environment'

- · Commence the new build for Hinchingbrooke theatres
- New Urgent Treatment Centre at PCH
- · Shared pathways with system partners
- Develop Trust strategy for 2022 -2025 · Complete Stamford land sale and
- commence work on the new car park
- Joined up data, digital and technology. along our care pathways so the trust can provide better care outside and inside our hospitals
- · Develop a plan for working together towards our digitally enabled future so the Trust can support our staff and deliver outstanding care
- Develop our environmental strategy
- · Maximise the use of resources and improve productivity
- Realise the benefits of our strategic investments
- Achieve financial targets with a focus on the underlying cost base

## Priority:







# Baseline activity recovery profile

Our baseline position has been developed with our clinical teams to restore our activity to pre-pandemic levels, allowing time for our staff to recover and maintain social distancing to protect our patients. We plan to maximise capacity through new ways of working developed in the past year including the significant shift to digital services. We will invest in our workforce with a focus on recruitment and retention and develop more effective patient centred pathways that extend beyond organisational boundaries.

We will meet the targets set out in the NHS planning guidance for urgent and emergency care and for outpatients with the exception of May 2021. Elective activity remains our biggest challenge due to staffing availability, higher demand for critical care, and lack of surgical bed capacity to accommodate increased volumes of inpatient activity. We have additional uncertainty around theatre availability due to the ongoing RAAC panel issue at our Hinchingbrooke site which will close at least two theatres for surveying. We will work with partners in the Cambridgeshire and Peterborough system to share waiting lists, clinically prioritise patients and provide mutual aid.

	% of 2019/20 activity	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Elective	Total Elective Admissions - Day Case	74%	85%	101%	96%	107%	113%	117%	119%	120%	110%	123%	156%
	Total Elective Admissions – Ordinary	29%	48%	61%	65%	86%	99%	114%	118%	118%	112%	122%	155%
Total OP	Total Outpatient* attendance	78%	74%	85%	85%	92%	92%	87%	91%	92%	86%	92%	94%
1st OP	First outpatient** attendances	78%	74%	85%	85%	92%	92%	87%	91%	92%	86%	92%	94%
	First outpatient** attendances with procedures	78%	74%	85%	85%	92%	92%	87%	91%	92%	86%	92%	94%
FU OP	Follow-up outpatient** attendances	78%	74%	85%	85%	92%	92%	87%	91%	92%	86%	92%	94%
	Follow-up outpatient** attendances with procedures	78%	74%	85%	85%	92%	92%	87%	91%	92%	86%	92%	94%
Non Elective	Total non-elective spells	105%	106%	105%	105%	106%	106%	106%	106%	106%	106%	106%	106%
	Non-elective - length of stay of zero	103%	98%	101%	90%	99%	101%	106%	102%	103%	116%	111%	96%
	Non-elective - length of stay of 1 day or more	105%	110%	103%	114%	107%	106%	104%	105%	105%	101%	101%	90%
A&E	Type 1-4 A&E Attendances	98%	98%	96%	128%	129%	129%	132%	131%	133%	131%	130%	127%
	Type 1&2 A&E Attendances	104%	104%	101%	74%	74%	74%	74%	74%	74%	73%	74%	72%
	Type 3&4*** A&E Attendances	0%	0%	0%	1,006%	1,070%	957%	1,108%	1,078%	1,463%	1,130%	1,101%	1,124%

#### Notes:

<sup>\*</sup>Consultant and non consultant led

<sup>\*\*</sup>Consultant only

<sup>\*\*\*</sup>Opening of the new Peterborough Urgent Treatment Centre July. SRH MIU reopening not yet included

### Recover safely

# Continuing to meet the needs of patients with Covid-19





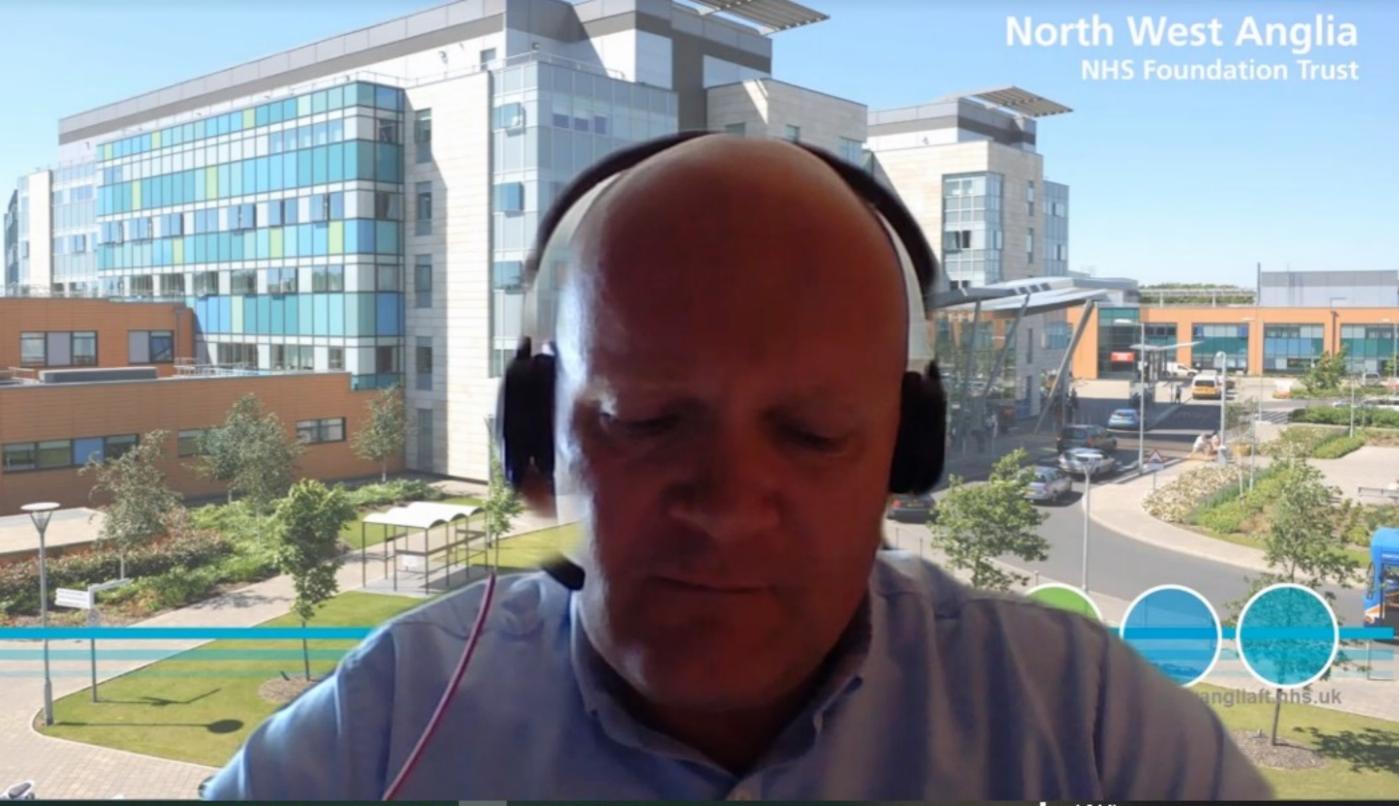




- We have assumed in our activity planning that there will be a continued and underlying demand for Covid beds. Our area went into the
  latest Covid wave after much of the rest of the country and consequently came out of it 2-3 weeks after others resulting in significant
  demand on staff and beds into early March 2021. We have planned for a continued requirement for patients with Covid, including
  patients with co-morbidity who will be segregated from other patients to receive all their care requirements
- · Our bed plans reflect this need with designated Covid beds
- If there is a future surge, we will reinstate our major incident plan with a review of all activity and redeployment of staff to areas with critical need
- We will work with system partners to provide timely and equitable access to Post Covid Syndrome ("Long Covid") assessment services
- We continue to work with system partners to create hospital led virtual wards in the community including the use of Healthcare at Home
  for patients who only require consultant led care as they are receiving IV antibiotics. The pilot suggests that this will release the
  equivalent of a minimum three beds.

Covid bed profile 2021/22	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	0ct	Nov	Dec	Jan	Feb	Mar
Covid-19 Beds Occupied	230	160	120	32	32	32	32	32	32	32	32	32	32	32	32









# **Patient Experience Team**

Lucy's Story

Patient communication during

Covid-19

Presentation created by: Jayne Kenyon
Patient Experience Manager – 04/11/20
Names and photos have been changed to protect the privacy of individuals



# Patient and Family Communication

Family and friend experience is an integral part of the holistic patient experience journey.

Visitors are an important part of the recovery process and help patients to recover faster, also helping to reduce their anxiety and stress.

Covid-19 visiting restrictions mean that we have had to devise alternative methods of communication. There follows a true patient story to reflect the importance of communication and the outcome following a breakdown of patient/family communication due to visiting restrictions.



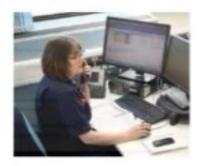


# What alternative methods of communication are available for patients and their families/friends?



The patient belongings service has been in place in the main hospital receptions since 7<sup>th</sup> April 2020; facilitating the delivery of patient belongings to the ward, supported by the porters and volunteers. 16,056 bags have been received to-date. Mobile communication aids can be delivered to patients, i.e. personal mobile phones and I-pads. Letters and emails can also be delivered via the 'Letters to Loved Ones' service who have delivered over 2200 since the start of the pandemic.

Trust I-pads are also available for patients to face-time/skype their loved ones. 40 new I-pads were purchased in October 2020 specifically for patients to use to communicate with their families/friends.



A dedicated telephone service has been set up which is managed by professional clinical staff acting as family liaison members, working closely with patients, their families and ward staff. Since 31st March 2021 there have been 1119 calls to update loved ones.