

Agenda item 07

Chief executive’s report

Board of directors 25 May 2023

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| **Report title** | Chief executive’s report |
| **Report from** | Martin Kuper, chief executive |
| **Prepared by**  | The chief executive and executive team  |
| **Link to strategic objectives** | The chief executive’s report links to all five strategic objectives |

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| **Brief** **summary of report** The report covers the following areas:* Performance and activity review
* Urgent care update
* Sector update
* TIFF – Stratford and Bedford
* Oriel update
* Infection prevention control update
* Pathway to Excellence Designation
* Industrial action update
* Staff Survey
* Pay offer for staff covered by the NHS Terms and Conditions of Service (Agenda for Change)
* Excellence programme update
* New Electronic Patient Record
* April Financial Performance
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| **Action required/recommendation.** The board is asked to note the chief executive’s report. |
| **For assurance** |  | **For decision** |  | **For discussion** |  | **To note** | **✓** |

**MOORFIELDS EYE HOSPITAL NHS FOUNDATION TRUST**

**BOARD MEETING – 25 MAY 2023**

**Chief Executive’s report**

**Performance and activity review**

In terms of clinical activity, the Trust has had a good start to the year, delivering elective and outpatient first activity which is ahead of the weighted plan that has been set by commissioners. Despite this, the new patient backlog has not seen a further reduction for a few weeks and a significant amount of effort is therefore being made to further increase activity levels.

The performance of the Trust’s Booking Centre has improved significantly such that both of the overarching performance metrics are being met in May.

**Urgent care update**

Pilots to introduce Attend Anywhere in our St Georges and Ealing Units have been a good success and we are now looking to consolidate these arrangements through permanent staffing. Over the coming months we will also explore where it is appropriate to expand our Attend Anywhere services into other MEH elective centres so that our patients can receive a more equitable service.

**Sector update**

A business case has been approved to relocate our diagnostic hub within the Brent Cross shopping centre from the existing location to another one on the other side of the shopping centre. Work is now underway to plan this transition, seeking to minimise any gap in service occurring. We have yet to hear back regarding the strategic review of the Ealing site which we fed into earlier in the year.

The planned reconfiguration of NCL elective ophthalmology services continues to progress focussing on the development of a third surgical site to support patients across the north of the region. It is still envisaged that this proposal will go to public consultation later this summer.

**TIFF – Stratford and Bedford**

The first two floors of our Ophthalmology Hub at Stratford opened at the beginning of April. This has provided patients with outpatient and injection services and has permitted the closure of our facility on the Mile end site. The remaining floors of the building remain on track to open in August. These will provide further outpatient and surgical services to patients and will permit the closure of the Ludwig Guttmann site shortly afterwards.

We are continuing to work with Bedfordshire Hospitals NHS Foundation Trust to help them use the TIFF funding that they have received to develop the Ophthalmology Service which we provide on their behalf. Unfortunately, it has been confirmed that it is no longer possible to collocate theatres with our other services in the South Wing site but this will not prevent us consolidating all of our other services in one location and developing additional diagnostic capacity to help address our remaining capacity challenges.

**Oriel update**

Following FBC approval we have now completed the following;

- Land acquisition at St Pancreas hospital site

- JDV setup and leasing arrangements with UCL

- Main contract award with BYUK for the construction of the new site

- Sales agreement of City Road with Derwent London

Following site enabling works, demolition commenced on site in February 2023 and all of the old buildings on the site have now been demolished. Robust safety measures have been in place throughout this process and a monthly construction group is providing regular communications of site progress to local residents and other stakeholders.

To meet Camden planning conditions, the Museum of London Archaeology have been appointed to confirm the presence and evacuate remains of 1809 workhouse foundations that lay below the newer buildings on the site. When they have completed this work, they will undertake a number of public engagement activities to compare and contrast living conditions between past and present and in turn emphasising the value brought by the welfare state and NHS.

The Oriel team are planning a summer breaking ground celebration event to mark the start of construction and stage 4 design showcase events for all staff, students and patients to help them understand the floorplans and room designs. Following FBC approval, focus has also returned to the co-development of a comprehensive last half mile and internal wayfinding strategy.

**Infection prevention control update**

Covid case rates remain relatively low as do hospitalisation rates, staff absence rates and patient cancellation rates related to Covid. Following further guidance from UKHSA released on 31st March 2023, the Trust has discontinued testing of asymptomatic patients prior to elective procedures. The focus is now on reminding staff and patients if they experience any COVID related symptoms to test as needed and to continue to emphasise good hand hygiene practice and use of appropriate PPE.

**Pathway to Excellence Designation**

After three years of hard work from our nursing teams and colleagues across the trust, we have been successfully awarded this global accreditation by the American Nurses Credentialing Center (ANCC) and are now Pathway Designated. With a resounding vote of confidence (77% of nurses responded to the survey with >75% agreeing or strongly agreeing with 28 questions) our nurse survey and evidence submission met the requirements for designation. Designation recognises nursing excellence across 6 standards: health and wellbeing, shared decision-making, quality, safety, professional development, and leadership. Securing our accreditation, and the engagement it reflects, should aid our recruitment and retention programme, enhance our reputation as a centre of excellence, and help make us an employer of choice for all healthcare professionals. Moorfields is the first trust in London to achieve this designation and one of only 6 across the UK.

**Staff Survey update**

Since the March Board we have shared our headline results with colleagues, including at our All Staff Briefing on 29 March, which was attended by over 100 colleagues.

We have also drafted our trust wide Staff Survey action plan, with a focus on three of the themes as follows: ‘We are recognised and rewarded’, ‘We are always learning’, and ‘We are safe and healthy’. Two of the three themes are a continued area of focus from last year, and our focus on ‘We are safe and healthy’ is new this year, in light of our results. We have engaged our colleagues with our draft action plan, via a series of colleague engagement sessions, which took place on 12, 18 and 24 May. Each session was opened by a member of the executive, to reinforce the importance we place on Staff Survey as a senior leadership team.

The trust wide action plan will be revisited and finalised, following this engagement and in discussion with the Senior Responsible Officers (SROs) for our Excellence portfolio, to ensure we accurately capture and report progress on all the work underway to improve colleague experience, both as a direct consequence of the Staff Survey and also arising from other initiatives.

Equally important are our local action plans to address issues in individual areas. We have asked that local action plans are in place no later than 31 May and we will be inviting our Divisional Managers to attend our September People and Culture Committee to provide assurance on their progress. In the meantime, action plans will be governed via our monthly performance meetings.

**Industrial action update**

Junior doctors are doctors who are not consultants, SAS grade or Fellows. Moorfields has around 60 junior doctors. The BMA balloted junior doctors for strike action over pay, achieving a majority vote for industrial action. Therefore, the first period of action was for 72 hours from 13 March to 15 March. The BMA subsequently announced further industrial action by junior doctors across the country, which took place from 7am on 11 April to 7am on 15 April 2023. Since 15th May 2023, the BMA have announced the opening of a ballot with all NHS Consultant members eligible to vote until 27th June 2023.

From 23rd May, the RCN have also announced the opening of their national ballot in dispute against the pay award offer and this will run until 23rd June 2023. If both ballots successfully achieve the threshold required, the industrial action will be taking place between 11th July until 26th December inclusive.

To date, the Trust, through the industrial action planning group, have assessed the impact of the strikes on our services at Moorfields and put plans in place to help minimise the impact of any potential disruption on our patients and staff. Cover arrangements were put in place using other medical staff, enhanced pay rates and activity variation. We continue to be affected by industrial action, affecting patient attendance and staff availability and will keep this process under review as the ballot position becomes clearer.

**Pay offer for staff covered by the NHS Terms and Conditions of Service (Agenda for Change)**

Following the government announcement on 16 March 2023, a pay offer for Agenda for Change (AfC) staff has been put forward to trade unions. Unison and the Royal Collage of Nursing (RCN) have announced payment offer consultation outcomes, with Unison members voting to accept the pay offer and RCN members rejecting the offer. Consultations on the pay closed on 14 April 2023, and the government has decided on an outcome based on collective results. NHS Employers have confirmed the outcome of the NHS Staff Council meeting and have now published the new pay scales for 2023/24, a pay advisory notice and the TCS handbook, which has also been updated to reflect these new rates.

Eligible staff can expect to receive the additional 2022/23 payment and the new 2023/24 pay rates (including back pay to 1 April) as part of their pay in June. ESR has also confirmed its plans for implementation in June salaries of the 2022/23 non-consolidated payments and the 2023/24 consolidated pay uplifts (including arrears backdated to the 1 April 2023 effective date). The non-consolidated lump sum payment for 2022-2023 will be paid to employees employed on 31 March 2023. Staff can have non-consolidated payment either as a single lump sum payment in June pay or spread up to 10 months for the remainder of 2023-2024 equally. Only staff who receive universal credit can request that the payment be spread up to 10 months. We will be working with our payroll provider to manage the implementation of these pay changes.

**Excellence programme update**

As part of the maturation of our excellence programme we agreed to stratify our different projects dependent on both their strategic importance and also their complexity and resourcing requirements. The final workshop with Programme Board SROs identified 15 type 1 projects (with the greatest level of support and scrutiny), 19 type 2 and 26 type 3 (with a lighter touch approach). The list has now been shared with all key stakeholders and XDU are leading a gap analysis exercise to ensure the intended support offers are in place. There is agreement to review the portfolio every quarter to allow for projects that complete scoping to be allocated a category and to take into account capacity generated by projects that have closed.

The 15 type 1 projects include our Oriel build, our Electronic Patient Record (EPR), progressing work towards the Accessible Information Standard, our Equality, Diversity & Inclusion strategic priorities, review of temporary staffing provision with bank partners, E Roster optimisation, our review of Freedom to Speak Up, refining our approach to Agile working, reviewing our Central Sterile Supply Dept provision (CSSD), implementing our Telemedicine Support Unit in NCL, updating our Outpatient Waiting List, the Brent Cross II, and Stratford Hub projects (phase 1&2), developing our Commercialisation Framework, and developing Primary & Community Eye Care Services offer. Whilst all projects on the portfolio are aligned to our strategic objectives, the complexity and sphere of influence of these projects means that the greatest level of support and scrutiny is essential to have a high level of delivery confidence.

Several 22/23 projects have successfully closed using the XDU process and shared lessons across the portfolio. Projects closed during April included Telemedicine Support Unit (TSU) pilot, Eye Envoys and OD Programme: Values Behaviour Framework. Themes of lessons have included the importance of having appropriate named persons in project leadership roles, particularly to encourage and enable engagement from all professional groups. Learning from the TSU and OD Programme had informed a further phases of project work in each area.

Work continues with the IT PMO to embed the XDU project lifecycle. An initial workshop has identified all IT projects and will be followed up with an approach to categorisation, mirroring the wider portfolio. This will drive the reporting frequency at IT Programme Board as well as the support offer given to each project. A project health check has been commenced for the Oculus Data Warehouse Project. A look back exercise has been completed and Google are also supporting a technical assessment of the project to feed into the next steps planning.

**New Electronic Patient Record**

On Wednesday 17 May, we submitted the formal Electronic Patient Record Outline Business Case to NHS England, following a Letter of Support from the North Central London Integrated Care Board. A period of assurance review now follows by NHSE and we expect to be able to proceed with a tender for the solution in about 10 weeks’ time. The EPR will provide the clinical and administrative functionality to compliment our OpenEyes Clinical Noting System and will enable the trust to become fully digital in all its processes. We are targeting a go-live for the Autumn of 2025.

**April Performance**

The trust is reporting a £2.73m deficit in April, £0.27m favourable to plan. Patient activity during April was 101% for Elective and 106% on Outpatient activity respectively against the equivalent month in 2019/20. It is to be noted that the trust activity plan for the year increases in the second half as additional capacity at the new Stratford hub is completed. The trust cash position was £59.8m, equivalent to 82 days of operating cash, a decrease of £0.8m from the prior month. Capital expenditure was £2.5m, with the only capex being in relation to Oriel and the Stratford hub. Efficiencies were £0.03m in April, £0.62m adverse to plan, with work on-going at divisional level to finalise savings for the year.

**Martin Kuper**

**Chief Executive**

**May 2023**