

Surrey County Council Wellbeing and Health Scrutiny Board 2 July 2015

Report from Epsom and St Helier University Hospitals NHS Trust

Purpose of the report: Scrutiny of Services

Report from the Chief Executive of Epsom and St Helier University Hospitals NHS Trust on the current performance, including quality and finance and the future direction of the Trust.

Introduction

Thank you for inviting me to your meeting today and for giving me the opportunity to provide you with a progress report on my first six months as Chief Executive of Epsom and St Helier Hospitals. I'm going to share with you how we performed last financial year, explain our five year strategy and key objectives for 2015/16, report on how we are doing as we approach the conclusion of Q1 of 2015/16 and a look beyond our five year plan for the future of our estates.

One of the things that has impressed me from my very first day has been the professionalism, dedication and enthusiasm of our staff and volunteers and I'd like to come back to this at the end of this presentation, when you will also have an opportunity to ask any questions.

1. How did we perform in 2014/15?

I am pleased to report that the trust performed well against almost all of the key quality, performance and financial standards.

1.1 Quality and performance:

Our Hospital Standardised Mortality Ratio (HSMR) was favourable at 96.8 (at Dec 2014) against the standard of less than 100.

We achieved the four hour A&E target of 95% of patients being seen, treated or admitted with 95.7% and are only one of three London trusts that achieved this.

The 18 week referral to treatment (RTT) performance for the remaining target following the recent announcement about changing it was 93.5% against a target of 92% for completed pathways.

We reported seven trust apportioned MRSA bacteraemias (vs 8 in 2013/14) of which five were classified as avoidable and two unavoidable. The standard was zero avoidable bacteraemias.

For C.difficile infections, we reported 42 hospital apportioned cases against the DH limit of less than 40 cases. Our limit for 2015/16 is no more than 39 cases.

For cancer treatment we worked hard throughout the year to improve on our performance for treatment to start within 62 days of urgent GP referral where the target was 85% and we achieved 75.1%.

1.2 Our finances:

The Trust met its breakeven plan and delivered a small surplus of £79k – the first time we have achieved a surplus in recent years.

At the end of March 2015 we sold of a small parcel of land on the Sutton Hospital site to Sutton Borough Council and made a profit of £5m on the land sale all of which is being reinvested in our estate in 2015/16.

2. Our Five year strategy and key objectives for 2015/16

At the end of March 2015, our board approved our 5-year strategy for 2015-2020 and our 2015/16 objectives.

- **2.1 Our five year strategy** states that both Epsom and St Helier hospitals will continue to provide consultant-led, 24/7 Accident &Emergency (A&E), maternity and in-patient paediatric services. St Helier will provide specialist and emergency care, such as acute surgery, and Epsom will expand its range of planned care. We will work with GPs to provide significantly more care in community settings so that people only come to hospital when it is absolutely necessary.
- **2.2 Our 2015/16 objectives** will ensure we provide high quality, compassionate care to all our patients by:
- delivering safe and effective care with respect and dignity
- creating a positive experience that meets the expectations of our patients, their families and carers
- providing responsive care that delivers the right treatment, in the right place at the right time
- being financially sustainable

- working in partnership with all of our local stakeholders in the interests of our local patients and a sustainable local health and social care economy.

In setting these objectives we have recognised the principal challenges that we face:

- the need to strengthen staffing in key service areas
- address variability in the delivery of clinical care
- address the poor quality of our estates
- create a financial recurrent surplus each year.

3. Q1 performance

I can report the following for Q1 to date (April):

- A&E four hour standard we achieved 95.4% in April
- Our 18 week referral to treatment (RTT) performance for complete pathways achieved 92.9% (target = 92%)
- MRSA = zero bacteraemias
- C.difficile = three cases
- Cancer 62 days = 65.3% (target = 85%)

Finances – we posted a deficit of £2,304k against the planned deficit of £1,382k which was £992k adverse against our plan. A detailed recovery plan has been implemented to address this shortfall.

4. Investing in a high quality healthcare environment

We are committed to our five-year plan of improving our existing estate and facilities for all our patients.

We also need to plan for the long term to deliver high quality care from facilities our patients deserve and can be proud of. No proposals beyond 2020 have yet been formulated but you will, no doubt, have heard that a review of the options is underway and our next public Board meeting on 26 June will include an update on where we are.

The paper we will be presenting to our board will outline why we are looking at our estates strategy for 2020-2030, describing our buildings and the current challenges we are facing. It will highlight what hospital buildings should look like in 2020-2030 giving some examples of what can be achieved through excellent buildings. The paper will then compare our current estate to others, encompassing the developments we already have planned and the impact this will have on patient experience. It will also look at the cost of developing our current estate to be fit for 2020-2030.

As you can see from this brief overview, it will be a discussion document and makes no proposals on options. It does look at what could be the next steps which are focused on meeting with patients and local people, key stakeholders and interested parties to discuss what they see as important to them in terms of hospital estate.

This approach to engagement, which will be discussed at the Board meeting on 26 June, is scheduled to take place over this summer and will report back to our board in October 2015.

5. Our People

I want to share with you some of the fantastic work our staff and volunteers have been doing in the last couple of months to support our patients and our hospitals.

Nurses Day on 12 May was celebrated at Epsom for the excellent work our nurses and midwives do every day across both our sites. Midwife Lydia Baker won our Nurse of the Year Award and Suzanne White was awarded Support Worker of the Year.

From 1 to 7 June was our Volunteers Week which celebrated the contribution they make to help feed patients, help visitors find their way around our hospitals, run the shops and tea bars and broadcast on our hospital radio stations. We have nearly 500 volunteers aged 17-94 who contribute a staggering 65,000 hours each year.

Two colleagues Ron Dalton, a staff Nurse in A&E and Joanna Edwards, physiotherapist recently travelled to Kenya with 139 wheelchairs as part of the 'Wheels for the World' charity to provide disabled people in Africa with wheelchairs and giving them increased independence.

There have been many other examples where our staff have gone above and beyond the call of duty. This includes our staff who supported us over two May bank holidays and Derby Day on Saturday 6 June, held our Dementia Awareness Week in May and held training for our new healthcare assistants in caring for our older patients.

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