

# BARKING, HAVERING AND REDBRIDGE UNIVERSITY HOSPITAL UPDATE

Matthew Hopkins  
Chief Executive



TAKING **PRIDE** IN OUR CARE

Barking, Havering and Redbridge  
University Hospitals **NHS**  
NHS Trust

# AGENDA

- Overview
- CQC report
- Our performance
- Our objectives
- Moving forward



# OUR HOSPITALS IN 2017/18:



# MATERNITY



8,299 BABIES DELIVERED THIS YEAR

# PAEDIATRICS



12,290 PAEDIATRIC OUTPATIENTS

# EMERGENCY



73,088 EMERGENCY ADMISSIONS



# 67,711 AMBULANCE ARRIVALS



# PLANNED CARE



739,842 OUTPATIENT APPOINTMENTS 2,027 A DAY



OUR HOSPITALS HAVE:

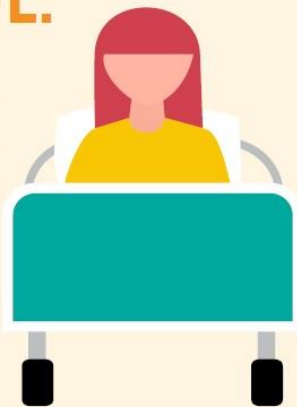
52 CRITICAL CARE BEDS



22 THEATRES



62 MATERNITY BEDS



911 INPATIENT BEDS

OUR HOSPITALS HAVE

123



OVER 500 VOLUNTEERS WHO BETWEEN THEM HAVE GIVEN MORE THAN 30,000 HOURS OF SUPPORT

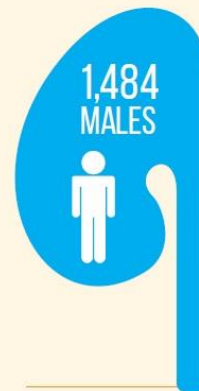


PROVIDED OVER 300 WORK EXPERIENCE AND APPRENTICE PLACEMENTS



123 MORE STAFF IN POST THAN LAST YEAR

6,585 STAFF OF WHOM 80% ARE IN DIRECT CLINICAL CARE ROLES



# 2015 CQC REPORT

## KING GEORGE HOSPITAL

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and emergency services	Requires improvement	Requires improvement	Requires improvement	Requires improvement	Requires improvement	Requires improvement
Medical care	Requires improvement	Requires improvement	Good	Requires improvement	Requires improvement	Requires improvement
Outpatients and diagnostic imaging	Inadequate	N/A	Requires improvement	Inadequate	Requires improvement	Inadequate

## QUEEN'S HOSPITAL

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and emergency services	Inadequate	Requires improvement	Requires improvement	Requires improvement	Requires improvement	Requires improvement
Medical care	Requires improvement	Good	Good	Requires improvement	Requires improvement	Requires improvement
Services for children and young people	Requires improvement	Requires improvement	Good	Inadequate	Requires improvement	Requires improvement
Outpatients and diagnostic imaging	Requires improvement	N/A	Good	Inadequate	Requires improvement	Requires improvement



# 2016 CQC REPORT

## KING GEORGE HOSPITAL

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and emergency services	Requires improvement	Requires improvement	Good	Good	Requires improvement	Requires improvement
Medical care	Requires improvement	Requires improvement	Good	Requires improvement	Good	Requires improvement
Outpatients and diagnostic imaging	Requires improvement	N/A	Good	Requires improvement	Good	Requires improvement

## QUEEN'S HOSPITAL

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and emergency services	Requires improvement	Requires improvement	Requires improvement	Requires improvement	Requires improvement	Requires improvement
Medical care	Requires improvement	Good	Good	Requires improvement	Good	Requires improvement
Services for children and young people	Requires improvement	Good	Good	Good	Good	Good
Outpatients and diagnostic imaging	Good	N/A	Good	Requires improvement	Good	Good



# 2018 CQC REPORT

## KING GEORGE HOSPITAL

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and emergency services	Requires improvement	Good	Good	Good	Requires improvement	Requires improvement
Medical care	Requires improvement	Good	Good	Good	Good	Good
Surgery	Good	Good	Good	Good	Requires improvement	Good

## QUEEN'S HOSPITAL

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and emergency services	Requires improvement	Good	Good	Requires improvement	Requires improvement	Requires improvement
Medical care	Good	Good	Good	Good	Good	Good
Surgery	Good	Good	Good	Good	Requires improvement	Good
Maternity	Requires improvement	Good	Good	Good	Good	Good



# OUR PERFORMANCE IN 2017/18

PERFORMANCE	THE STANDARD	OUR RESULTS
Emergency access	95% of all patients attending our Emergency Departments to be treated, admitted or discharged within a maximum of four hours	Not achieved: 81.8%
Access to treatment	92% of patients referred to us to have treatment started within 18 weeks	Not achieved: 90.8%
Cancer: urgent referrals	93% of our patients to be seen in two weeks following an urgent referral from their GP	Achieved: 96.8%
Cancer: 31 days	96% of our patients to have a diagnosis and first treatment within 31 days of the decision to treat	Achieved: 98.5%
Cancer: 62 days	Target of 85% of patients receiving first treatment from the date of GP referral	Achieved: 86.2%
Infection control: C diff	No more than 30 cases	Achieved: 15
Infection control: MRSA	Zero cases of MRSA bacteraemia	Not achieved: 6





# OUR 2017-18 OBJECTIVES

## DELIVERING HIGH QUALITY CARE

- Embed quality and safety systems to respond to quality concerns and reduce harm
- Ensure the highest standards of infection control
- Embed The PRIDE Way, our quality improvement methodology

## RUNNING OUR HOSPITALS EFFICIENTLY

- Develop our divisional teams to ensure we are well-led
- Continue to improve delivery of our constitutional standards
- Improve back office productivity, including procurement, IT and clinical support services, and refresh our estates strategy

## BECOMING AN EMPLOYER OF CHOICE

- Implement the Leader's Agreement to enable our staff to achieve excellence
- Establish new roles and implement our academic and education strategies to develop our staff
- Increase and retain our substantive workforce

## MANAGING OUR FINANCES

- Embed service line reporting and management to improve decision-making and budgetary control
- Make sure we get paid for all the work we do
- Achieve financial balance with the inclusion of transformation funding

## WORKING IN PARTNERSHIP

- Work with our partners to deliver the Sustainability and Transformation Plan
- Work with our partners to develop services to align with our Clinical Services Strategy
- Improve engagement and community development with our partners, patients and public

methodology  
 our quality improvement  
 Embed the PRIDE Way

our estates strategy  
 support services' and refresh  
 procurement, IT and clinical  
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 increase and retain our  
 Implement the Leader's  
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 with the inclusion of  
 Embed service line reporting  
 and management to improve

and public  
 with our partners' patient  
 community development  
 improve engagement and



# OUR FINANCES

## 2017

- Cash shortfall discovered (Autumn)
- NHSI approached for loans to cover immediate issues
- Trust commissions (with NHSI) Grant Thornton to undertake independent study into underlying issues

## 2018

- Significant in-year deterioration and discrepancy from plan identified
- Trust placed into Special Measures for Finance (February 2018)
- PwC appointed to support Financial Recovery Plan delivery
- Grant Thornton report published (April)
- Financial Recovery Plan approved by Board (June)

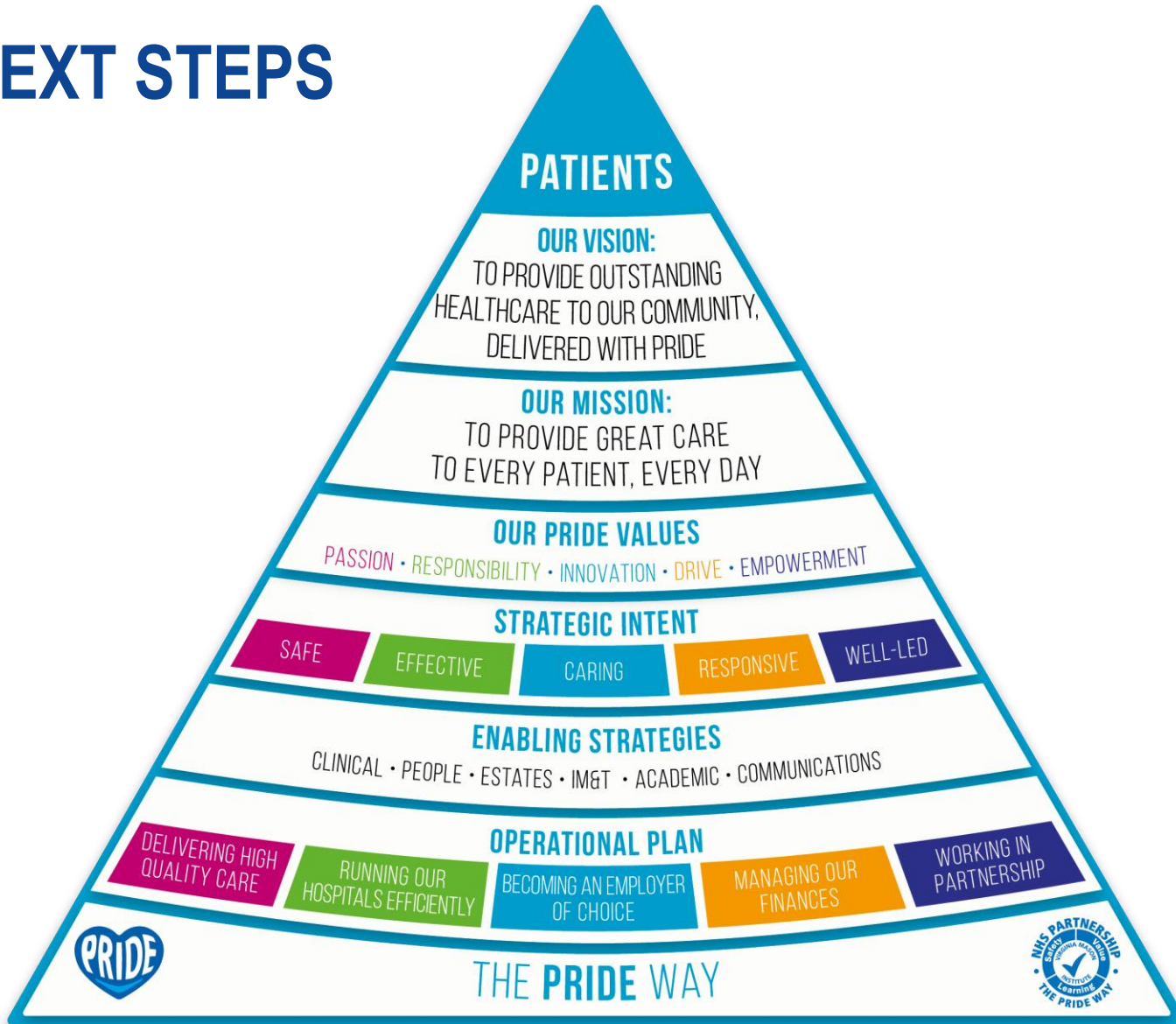


# PUTTING THINGS RIGHT

- Financial Special Measures
  - Returns Trust to a period of financial instability
  - Required to produce a Financial Recovery/Improvement plan
  - Improving understanding of benchmarks
- Cash support required from NHSI
- Development of action plan and changes needed to improve financial governance – to conclude this calendar year
  - Training
  - Compliance
  - Reporting



# THE NEXT STEPS



# MOVING FORWARD TOGETHER

- Delivering constitutional standards
  - Emergency access
  - Referral to treatment
- Bringing our finances back on track without compromising quality of care
- Continuing our improvements for patients

