Welcome to our Annual Review for 2018-19, which provides an overview of the last year at Ashford and St Peter’s Hospitals.

Despite sustained challenges over the year and unprecedented demand for services, especially over the winter months, colleagues throughout the Trust responded amazingly well and continued to strive to deliver the best care.

We made excellent progress in becoming a learning organisation. This is starting to have a real impact. The medication safety improvement programme, for example, has resulted in a significant and positive reduction in the number of medications safety incidents.

Following an inspection in July 2018, we were pleased to retain our CQC good rating, with the Critical Care Unit at St Peter’s Hospital achieving an ‘Outstanding’ rating overall.

Increasingly over the year we’ve worked more closely with partner organisations across Surrey Heartlands to provide more seamless services to people receiving NHS care, taking account of national NHS priorities following the publication of the NHS Long-Term plan in January 2019.

Like many other NHS organisations, we continue to face year round challenges, and high demand for emergency services. Plans for new emergency and urgent care facilities will help this in the longer-term. In the short-term, we are making some changes in 2019-20 to improve how we provide emergency and urgent care within our existing buildings, some of which date from the 1930s.

However, we achieved a significant turning point at the end of the year by securing the funding we need to invest in our buildings and services through land sales. This will enable the Trust to improve care for local people, through new urgent and emergency facilities, better car parking and new digital services.

Looking ahead we will continue to face sustained operational, workforce and financial challenges but will continue our concerted efforts to deliver our vision to provide an outstanding experience and the best outcome for patients and the team whilst maintaining our strong financial position.

Andy Field, Chairman
Suzanne Rankin, Chief Executive
Strategic objective 1: Quality of Care

Creating a learning organisation and culture of continuous improvement to reduce repeated harms and improve patient experience

Key achievements in 2018-19

Medication safety

As a result of a medication safety improvement programme, we saw a 55% reduction in medication incidents resulting in moderate or severe patient harm compared to the same period in 2017-18. At the same time, we’ve been stressing the importance of reporting all incidents even if they don’t cause harm so we can continue to learn.

Continuous improvement

The Trust actively encourages all colleagues to be responsible for continuous improvement as part of the ‘Be the Change’ programme. This means front line staff who see things that could be changed are able to implement the improvements. During 2018-19, 400 colleagues took part in Quality Improvement training.

Real-time electronic patient feedback

In February 2019 we started a new electronic system to measure how we treat patients safely, promptly and compassionately and that individual care plans are being followed electronically. This allows us to identify best practice, as well as poor patient experience, as it arises to understand what works well and make improvements when things are not right.

Dealing with issues and complaints

We centralised our complaints system to provide a better service to people who are not satisfied. This is helping us to provide responses which have been investigated and thoroughly considered, within our 25 day timeframe. In 2018-19, we received 537 complaints. The Patient Liaison Team (PALS) received 2015 contacts over the same time.

Becoming a learning organisation

Alongside our continuous improvement ambitions, we are committed to becoming a learning organisation. This means we learn when things go wrong, taking feedback from patients and from complaints. As part of our new approach to learning from complaints, during the year we set up Patient Experience Based Co-design engagement workshops to see issues ‘through people’s eyes.’

Colleagues took part in monthly serious learning events over the year, allowing reflection in an open and safe way to prevent future harm. This is on top of the NHS wide structured judgement reviews after a death in hospital that all NHS trusts follow.
Strategic objective 2: People:

Be a great place to work and to be a patient, where we listen, empower and value everyone.

Addressing workforce challenges

Like every other NHS organisation, recruiting and retaining staff remains a challenge. 2018-19 was no exception. A reduction in the number of nurses and midwives resulted in our highest number of nursing vacancies to date. To address this we:

• held 21 hospital based recruitment events
• trialled use of digital marketing
• increased recruitment from overseas and appointed a deputy chief nurse to focus on recruitment and retention.

Alongside these we took part in a nursing and midwifery retention project resulting in fewer nursing staff leaving in their first 12 months.

Engaging and recognising Team ASPH

According to the NHS Staff Survey, we have above average staff engagement compared to other similar NHS trusts. We also had positive results from Friends and Family feedback when staff were asked if they would recommend the Trust as a place to receive care and as a place to work.

Alongside our popular annual staff achievement awards, hosted by BBC journalist and broadcaster Victoria Derbyshire, we introduced a new Team Member of the Month initiative, where colleagues who go above and beyond receive special recognition. We also launched Team Talk, a new forum where colleagues can directly ask questions to the executive team, including CEO Suzanne Rankin, and we continued with our successful health and wellbeing programme.

Equality, diversity and inclusion

Our Workforce Race Equality Standards report and Gender Pay Gap report published in April 2018 show we are making progress in key areas, including the gender pay gap. However, there is more for us to do in our commitment to equality of opportunity and removal of discrimination. In 2019 the LGBT+ (Lesbian, Gay, Bisexual, and Transgender plus) staff network worked with LGBT+ organisation Stonewall to help us develop an inclusive and inspiring working environment for all.

Case study

Nursing associate role launched

The Trust is part of a pilot scheme to develop the new nursing associate role, which bridges the gap between health care assistants and registered nurses. Eight nursing associates are due to qualify in May 2019 and a further 20 in 2020.
Strategic objective 3: Modern Healthcare:

Delivering the most effective and efficient treatment and care through standardisation in the delivery and outcome of clinical services

Key achievements in 2018-19

ASPH Transformation

We made a significant step forward in our plans to modernise some buildings and facilities in need of improvement when we sold surplus land, raising more than £18 million. This money will go towards paying for the investment. Over the coming years we will build new urgent and emergency care facilities, refurbish a number of other key clinical areas and build new staff wellness centres at both Ashford and St Peter’s Hospitals. We are also building a new multi-deck car park at St Peter’s, to address concerns from staff and patients about car parking at the site.

Get it Right First Time (GIRFT)

The Trust worked with the national GIRFT programme, hosted by NHS Improvement and Royal National Orthopaedic Hospital, to improve quality of care and efficient ways of working. Projects this year included:

- upper gastro-intestinal
- gynaecology
- cardiotocography (CTG) traces in labour
- suspected bladder and prostrate.

Reducing surgical site infection rates

A team of clinicians from a range of disciplines worked on a joint project to reduce the rates of surgical site infection (SSI), following analysis of data which showed our rate of SSIs were higher than the national average.

By looking at the patient journey, and jointly identifying areas for improvement, the rate of SSIs dropped to zero during a three month audit period. There is a double benefit as not only is this better for patients, there were financial savings as the cost of treating significant infections can be very high.

Outpatients Transformation Programme

With links to the NHS Long Term plan, we are running a programme to transform how we provide outpatient services to better meet patient needs, minimising trips to clinics and using new technology to consult with patients.

Over the year we embedded virtual clinics for Integrated Musculoskeletal (iMSK) and urology services. By setting up a virtual fracture clinic within iMSK, 6,000 patients (45% of the total for the year) received their care without attending a clinic. Patients say this is better for them and it frees up clinicians to provide other care. The urology team managed almost 3,000 patients remotely over the year with plans to introduce on-line consultations in the future.
Strategic objective 4: Digital:

Using digital technology and innovations to improve clinical pathways, safety and efficiency, and empower patients

Key achievements in 2018-19

Digital Strategy

Linked to the wider Surrey Heartlands plans, we set a new digital strategy providing a clear plan for the next three years. The strategy is based around five principles:

- empower the person
- support the clinician
- integrate services
- manage the system safely and effectively
- enable a digitally smarter future.

Electronic Referral System (eRS)

As part of a national initiative, we now receive all new referrals from GPs electronically, which integrates with our scheduling system. We received accolades from NHS England and NHS Digital for being the best trust in the south east to implement fully the refreshed referrals solution. eRS means better turnaround times for patient appointments and administration efficiencies.

VitalPAC Electronic Patient Observation System and CareFlow

Piloted on Aspen ward, VitalPAC is a system which provides automated alerting of deteriorating patients. Following a successful pilot, this will be rolled out to other areas by July 2019.

CareFlow links to VitalPAC to tell clinicians about patients who are deteriorating as well as provide other digital functions such as clinical handovers and internal referrals.

Wifi replacement

We installed a new wifi system internally over the year and in the coming year will extend this to hospital visitors.
Strategic objective 5: Collaborate – Sustain and Thrive

Working with our partners in health and care to ensure provision of high quality, sustainable NHS services to the communities we serve

Key achievements in 2018-19

A key partner in Surrey Heartlands

Ashford and St Peter’s is a key partner in the Surrey Heartlands Integrated Care System (ICS). We are fully committed to working in partnership to deliver Surrey Heartlands’ vision to be a prosperous and healthy place, with a high quality health and care system that is sustainable for the long term.

Key successes across Surrey Heartlands over the last year

- New perinatal mental health service
- Cardiovascular prevention service
- Integrated diabetes specialist nurses
- Care Home Advice Line
- Surrey Care Record
- Maternity transformation programme

Building North West Surrey ICP

We are a major partner in the North West Surrey Integrated Care Partnership (ICP) working with commissioners, GPs, borough councils, voluntary sector and others at a local level. In 2018-19, the ICP focused on strengthening out-of-hospital services and reducing reliance on acute hospital services.

Case studies

Maternity Advice Line

Partnership working by three Surrey Heartlands trusts – Royal Surrey, Epsom and St Helier, and Ashford and St Peter’s – together with SECAmb, the ambulance trust, created a 24 hour/7 days a week pregnancy advice line, which has won national awards and plaudits.

Not only has the Maternity Advice Line proved extremely popular with pregnant women, it reduced the number of ambulances dispatched and prevented unnecessary hospital admissions, while giving faster and more convenient access to personalised care from a midwife.

Physiotherapy closer to home

Working with the local GP federation in north west Surrey, we have started to provide physiotherapy services at GP practices without patients having to be referred from their GP first. The physiotherapist provides a patient examination, advice on how to manage the condition, as well as referral to other services, if required without GP input. Not only is this a more efficient use of clinical time, it’s better for patients.
Sustainability

As a large local employer and healthcare provider we have a responsibility to minimise the pollution that contributes to local and global health and environmental issues.

Our aim is to provide an efficient, effective healthcare service while minimising our polluting impact on the health of local people.

Our carbon footprint

Like many organisations, one way to measure our environmental impact is by measuring our carbon footprint. The NHS has a target to reduce emissions by 34% by 2020. So far we have achieved a reduction of 14% since 2008, while our activity levels have increased over the time (measured by operating expenditure an increase of 54%). This year, although emissions from energy, transport and waste are on track, our procurement carbon footprint increased by an estimated 35% compared to 2017-18 in part reflecting our development and building work.

Looking ahead

In the coming year we are aiming to:

Improve our waste management, specifically:
- Reduce single-use plastics
- Latex recycling
- Sharps bin re-use
- Work with local ward Green Champions
- Increase use of separate segregation in bespoke recycling bins.

Improve the energy use of our buildings and vehicles
As buildings and vehicles are responsible for 40% of our overall carbon emissions, we aim to reduce this by:
- Designing a new emergency department which is sustainable and suitable for a changing climate
- Reducing the number of redundant and inefficient buildings
- Seeking cost-efficient, low-carbon energy, such as renewable energy and combined heat and power systems
- Compensating the loss of green space through land redevelopment by enhancing remaining green spaces
- Creating alternatives to single-occupancy staff vehicle use to help improve local air quality, parking and traffic congestion issues
- Continuing to replace older fleet vehicles with electric, hybrid or fossil fuel models incorporating the cleanest emissions standards.

Our Carbon Footprint 2018-19

<table>
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<th>Category</th>
<th>% CO2e emissions change against previous year</th>
<th>% CO2e emissions change against 2007/08 baseline</th>
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<tr>
<td>Energy Use</td>
<td>-1%</td>
<td>-22%</td>
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<tr>
<td>Staff/Business Transport</td>
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<td>-68%</td>
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<td>Waste Production</td>
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<td>Water/Sewage</td>
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<td>Procurement (outsourced emissions)</td>
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<td>-20%</td>
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<tr>
<td>Overall Change in our carbon footprint</td>
<td>+18%</td>
<td>-14%</td>
</tr>
</tbody>
</table>
In this report, we’ve included some highlights from the account. You can read the quality account in full within the 2018-19 Annual Report and Accounts, which is on our website www.ashfordstpeters.nhs.uk

Quality priorities
In 2018-19 we set 11 quality priorities.
• We achieved six of the 11 quality priorities we set ourselves. The five areas not fully achieved in this year are being taken forward to 2019-20

Priority standards
• We met all four national priority standards for seven day services (7DS).
This means acutely admitted inpatients are seen by a consultant within 14 hours of admittance and get prompt access to diagnostic services.

Local safety improvements
• 59% reduction in medication incidents
• 29% fewer falls of inpatients
• 17% fall in number of hospital-acquired pressure ulcers

CQC
Following a CQC inspection in July 2018, the Trust was rated as good. This was unchanged from the previous inspection.

Core priority areas for 2019-20
• Improving medication safety
• Improving infection prevention and control

How the Trust is run
The Trust has a strong and well established Board. It comprises a Chairman, seven non-executive directors and seven executive directors. Chairman, Andy Field, took up his post in September 2017. Marcine Waterman was appointed Deputy Chair in September 2018.

Director Valerie Bartlett retired on 31 May 2019 after 10 years with the Trust. She held a number of board level roles including Chief Operating Officer, Deputy Chief Executive and Director of Strategy and Transformation.

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In March 2019, Tom Smerdon took on the role of Director of Strategy and Sustainability and James Thomas became Chief Operating Officer. Previously Tom held the position of Director of Operations for Unplanned Care and James Director of Operations for Planned Care.

Council of Governors
As a Foundation Trust, we have a Council of Governors comprising members who represent patients, staff and residents in the community we serve. The Council includes Appointed Governors from partnership organisations, Public Governors (elected members) and Staff Governors.

We would like to thank Lead Governor, Andrew Ryland, who stood down at the end of July 2018, and to the other governors who left the Council of Governors over the year for their many contributions. An Annual Members’ Meeting is held every July.

Awards
• Pressure care award – third place at national Journal of Wound Care (JWC) Awards 2019
• Shortlisted HSU Patient safety awards for:
  > Improving Safety in Medicines Management Initiative of the year
  > Quality Improvement Initiative of the Year
• National Institute for Health Research Clinical Network Kent, Surrey and Sussex Awards, ASPH Research and Development team:
  > Award for Best Finance Tool
  > Two highly commended awards in Best Contribution to Commercial Research category for asthma research
• Patient Experience Network National Awards
  > Winner for ‘Measuring, Reporting and Acting’
  > Runner up for ‘Communicating Effectively with Patients and Families’
Our vision and strategy

About us

The Trust was formed in 1998 from a merger of Ashford and St Peter’s Hospitals. It became a Foundation Trust in 2010. We serve a population of more than 410,000 people employing around 3,800. Our turnover was £335.6 million in 2018-19. The Trust provides a wide range of healthcare services. The majority of planned care, such as day case and orthopaedic surgery and rehabilitation, is provided at Ashford Hospital. More complex medical and surgical as well as emergency services are at St Peter’s Hospital.

We have five strategic objectives

Strategic objective 1: Quality of Care: creating a learning organisation and culture of continuous improvement to reduce repeated harms and improve patient experience

Strategic objective 2: People: being a great place to work and be a patient, where we listen, empower and value everyone

Strategic objective 3: Modern Healthcare: delivering the most effective and efficient treatment and care through standardisation in the delivery and outcome of clinical services

Strategic objective 4: Digital: using digital technology and innovations to improve clinical pathways, safety and efficiency and empower patients

Strategic Objective 5: Collaborate: working with our partners in health and care to ensure provision of a high quality sustainable NHS services to the communities we serve
Our values

- Patients first
- Personal responsibility
- Passion for excellence
- Pride in our team

This review is a snapshot of our work over 2018-19. For a copy of our full Annual Report and Accounts, go to our website: www.ashfordstpeters.nhs.uk.

If you need this document in any other format, please contact the Patient Advice and Liaison Team on 01932 723553

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