Welcome to the annual general meeting 2020

Paula Vennells CBE
Chair
Annual general meeting
Wednesday 15 July 2020
(Virtual live-streamed event)

Agenda

18.00 Welcome and introduction - Paula Vennells CBE, chair
18.05 2019/20 review and look ahead - Professor Tim Orchard, chief executive
18.20 Financial performance - Jazz Thind, chief financial officer
18.30 Presentation: How Covid-19 response is changing health and care for good
   Dr Bob Klaber, director of strategy, research & innovation
   Claire Hook, director of operational performance
18.45 Questions and answers
19.25 Wrap up and thanks - chair
19.30 Live event closes
Recognising and remembering colleagues
2019/20 review and look ahead

Professor Tim Orchard
Chief executive
Thank you
Our Trust in numbers 2019/20

1,294,000
Patient contacts
(including inpatients, outpatients and day cases)

305,000
Emergency attendees
(including A&E and AEC)

38,000
Operations
(including day and inpatients)

97%
Inpatients who would recommend us to their friends and family

13,000
Number of staff

Over 700 active research projects
Performance against 2019/20 objectives

Objective 1:
To enable more patients to get the right care and support, in the right place, at the right time

Headlines:
- Expanding A&E at Charing Cross Hospital
- Setting up ‘command centres’
- Improvement in CQC ratings
  - 2 ‘Outstanding’ ratings
- Patient transport
Operational performance 2019/20

Cancer: 2 week wait from urgent GP referral

- Operational standard
- Trust 2018/19
- Trust 2019/20

Cancer: 62 day wait from urgent GP referral
Performance against 2019/20 objectives

Objective 2:
To expand and connect developments that enable better integration of care

Headlines:

• Patient and public involvement
  • Strategic lay partners
  • Working with local authority partners
• Primary care partnerships
  • Primary Care Network test bed
• Collaboration with Chelsea and Westminster
• New care models across NW London
Performance against 2019/20 objectives

Objective 3:
To reduce unwarranted variations in care pathways

Headlines:
- Improving quality
- Flow Coaching Academy
- Improving safety
- Maintaining low mortality rates
Performance against 2019/20 objectives

**Objective 4:**
To develop strategic solutions to key challenges

**Headlines:**
- Staff recruitment and retention
- Hotel services
- Investment in building works
- Redevelopment
Performance against 2019/20 operational objectives

Objective 5: To strengthen the connections between our service developments and our research

Headlines:
• Research and innovation
• AHSC redesignation
• Global digital exemplar
• Covid research programme
Performance against 2019/20 operational objectives

Objective 6:
To achieve a measurable improvement in our organisational culture

Headlines:
• Improving our organisational culture
  • Values and behaviours
• Staff engagement
  • Improved engagement score and staff survey
  • Virtual engagement
• Improving equality, diversity and inclusion
• Building staff-led networks
• Impact of Covid-19 on BAME communities
Looking ahead

• Recovery and reset – our longer term response to Covid-19
  • safety and reassurance
  • operational performance
  • building on what has worked

• Strategy refresh – vision and values
  • integration, population health and partnerships
  • tackling health inequalities
  • practical support and wellbeing for staff
  • user-focused digital offer – for patients and staff

• Redevelopment
Redevelopment: aspirations for our hospitals…

- **Queen Charlotte’s & Chelsea**
  - Maternity, women’s and neonatal

- **Hammersmith Hospital**
  - Specialist care centre – including planned complex surgery and medicine, intensive care
  - Modular rebuild

- **St Mary’s Hospital**
  - Major acute and specialist hospital – including full A&E, major trauma centre, intensive care, maternity/neonatal, urgent surgery and medicine
  - Full rebuild

- **Western Eye Hospital**
  - Specialist eye hospital, with A&E
  - Incorporate into one of our redevelopment

- **Charing Cross Hospital**
  - Acute and specialist care – including full A&E, urgent surgery and medicine, planned surgery centre, intensive care
  - Rebuild based around current tower
...services and partnerships

Research and education
On all sites, with Charing Cross as Imperial College’s main medical undergraduate centre and Hammersmith as our largest research centre.

Integrated care
Integrated care hubs at Charing Cross and St Mary’s plus specialist ‘outreach’ with our health and social care partners

Digital care
Expanded offer across all services, including virtual urgent and planned clinics and patient portal for health records, information and engagement
Financial performance

Jazz Thind
Chief financial officer
**Headlines**

<table>
<thead>
<tr>
<th>Reported Surplus £8.7m</th>
<th>Total Provider Sustainability Funding £17.8m</th>
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<tbody>
<tr>
<td>Savings £43m</td>
<td>Capital £56m &amp; Cash £44m</td>
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## 2019/20 – The context

<table>
<thead>
<tr>
<th>Statement of comprehensive income</th>
<th>2016/17 £’m</th>
<th>2017/18 £’m</th>
<th>2018/19 £’m</th>
<th>2019/20 £’m</th>
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<tbody>
<tr>
<td>Revenue from patient care activities</td>
<td>890.1</td>
<td>974.0</td>
<td>1,030.9</td>
<td>1,124.3</td>
</tr>
<tr>
<td>Other operating revenue</td>
<td>181.0</td>
<td>161.3</td>
<td>133.7</td>
<td>158.5</td>
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<tr>
<td>Provider sustainability funding</td>
<td>25.5</td>
<td>25.5</td>
<td>48.4</td>
<td>17.8</td>
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<tr>
<td>Total revenue</td>
<td>1,096.6</td>
<td>1,160.8</td>
<td>1,213.0</td>
<td>1,300.6</td>
</tr>
<tr>
<td>Staff costs</td>
<td>(600.0)</td>
<td>(640.0)</td>
<td>(678.8)</td>
<td>(749.2)</td>
</tr>
<tr>
<td>Other operating costs</td>
<td>(491.5)</td>
<td>(501.1)</td>
<td>(493.2)</td>
<td>(526.7)</td>
</tr>
<tr>
<td>Operating surplus (deficit)</td>
<td>5.1</td>
<td>19.8</td>
<td>40.9</td>
<td>24.8</td>
</tr>
<tr>
<td>Net financing costs</td>
<td>(1.1)</td>
<td>(1.1)</td>
<td>(0.9)</td>
<td>(0.6)</td>
</tr>
<tr>
<td>Public dividend capital payable</td>
<td>(12.2)</td>
<td>(10.1)</td>
<td>(11.8)</td>
<td>(12.3)</td>
</tr>
<tr>
<td>Donated asset adjustment</td>
<td>(7.2)</td>
<td>(5.5)</td>
<td>(0.1)</td>
<td>(2.2)</td>
</tr>
<tr>
<td>Surplus (deficit) for the financial year</td>
<td>(15.3)</td>
<td>3.0</td>
<td>28.2</td>
<td>8.7</td>
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Our income

- Clinical Commissioning Groups, £567.0m
- NHS England, £447.5m
- NHS Other, £41.9m
- Non-NHS Patient Care, £67.9m
- Non-patient care services to other bodies, £14.8m
- Other revenue, £41.3m
- PSF, £17.8m
- Education, training and research, £102.4m
- Other revenue, £41.3m
Our expenditure

- Staff, £749.2m
- Clinical supplies and services, £284.6m
- General supplies and services, £38.1m
- Property and premises, plant and equipment, £117.0m
- Other, £13.6m
- Financing and interest, £12.9m
- Education, training and research, £31.5m
- Clinical negligence, £30.5m
- General supplies and services, £38.1m
Savings delivered £43m

- Activity, commercial & other income, £29.8m
- Workforce, £6.6m
- Procurement, £3.8m
- Estates & facilities, £1.3m
- Drugs, £0.9m
- Theatre Efficiency, £0.3m
- Other, £0.4m
Covid19 pandemic

Responsiveness was key

£ was not to be the limiting factor however…

Scrutiny, oversight and approval processes still needed to be robust

£5.7m
Investing in estates and IT - £56m

### Infrastructure programmes

<table>
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<tr>
<th>Backlog maintenance £20.4m</th>
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<td>Continuation of 8 year plan to address highest risk areas</td>
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<tr>
<th>ICT £8.7m</th>
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<tr>
<td>IT programme included:</td>
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<tr>
<td>Network replacement</td>
</tr>
<tr>
<td>Desktop replacements</td>
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<tr>
<td>Windows 10</td>
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<td>Communication rooms</td>
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<table>
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<tr>
<th>Medical Equipment £8.2m</th>
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<tr>
<td>Replacement of items deemed highest risk. Included;</td>
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<tr>
<td>Ultrasounds</td>
</tr>
<tr>
<td>Dialysis machines</td>
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<tr>
<td>Cardiac bypass machines</td>
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<td>Endoscopy stacks</td>
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### Priority developments

**Projects £15.5m**

- Including:
  - CXH Emergency department
  - SMH Paediatric Intensive Care
  - Paediatric parent Accommodation
  - Hybrid Vascular Theatre
  - Care Information Exchange

**Other £3.2m**

- Redevelopment programme
- North West London Pathology transformation

* = includes £3.2m of charitable funding to projects
Looking ahead

- Challenging financial landscape
- Funding regime for the 20/21 and beyond tbc
  - COVID and Winter
  - Contracting
  - System allocations
- Focus on cost control & address the underlying financial challenge
- Continuing to invest in our estate, equipment & IT
- Receiving funding approval for the redevelopment of our sites
How Covid-19 response is changing health and care for good

Dr Bob Klaber, director of strategy, research & innovation
Claire Hook, director of operational performance
## Timeline of events

<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
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<tbody>
<tr>
<td>31 Dec</td>
<td>WHO informed of cases of pneumonia of unknown cause in China</td>
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<tr>
<td>10 Jan</td>
<td>PHE guidance on infection prevention and control for COVID-19</td>
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<tr>
<td>20 Jan</td>
<td>First cases of COVID-19 reported outside of China</td>
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<tr>
<td>24 Jan</td>
<td>COBR meeting on COVID-19 chaired by Health Secretary</td>
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<tr>
<td>27 Jan</td>
<td>Health Secretary statement to Parliament</td>
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<tr>
<td>End Jan</td>
<td>Trust initiates planning for COVID-19 pandemic response</td>
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<tr>
<td>31 Jan</td>
<td>First known cases of COVID-19 confirmed in England</td>
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## Timeline of events

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<tr>
<td>20 Feb</td>
<td>NHS minimum operating standards for COVID-9 patient pathway</td>
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<tr>
<td>5 Mar</td>
<td>Trust multi-site exercise to test pandemic response plan</td>
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<tr>
<td>5 Mar</td>
<td>UK reports first death related to COVID-19</td>
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<tr>
<td>9 Mar</td>
<td>Trust admits first COVID-19 positive patient</td>
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<tr>
<td>12 Mar</td>
<td>Trust moves to ‘Gold command’</td>
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<tr>
<td>12 Mar</td>
<td>Trust reports first death of patient related to COVID-19</td>
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<td>23 Mar</td>
<td>Prime Minister announces lockdown measures</td>
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<td>7 Apr</td>
<td>Number of COVID-19 positive patients being cared for by the Trust reaches peak 360 total</td>
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<tr>
<td>13 Apr</td>
<td>Number of COVID-19 positive ventilated patients in the Trust reaches peak 132 total</td>
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Caring for Covid-19 patients

As of 30 June 2020:
- 1,239 Covid +ve patients recovered and discharged
- Sadly 425 deaths
Clinical and operational response

- NHS response managed as a ‘level 4 major incident’ at national, regional and local levels
- Overall Trust ‘gold command’ structure was established supported by site level management to ensure clear decision making and coordination in each hospital
- Quickly made temporary changes to the way services are organised – in order to increase critical care capacity to meet the surge in demand and to minimise the risk of contracting the virus for other patients we reduced elective capacity to time-critical procedures only
- Increased critical care capacity from 68 to 143 beds and planned additional capacity to increase to up to 300 beds as needed
- Almost 700 members of staff from all clinical and non-clinical groups were trained and redeployed to directly support our response
- ‘Virtual’ outpatient appointments replaced on-site appointments and visitor attendance restricted to exceptional circumstances
Wider response and support

- Followed national guidance for the use of personal protective equipment (PPE) – problems with the availability of PPE was a national issue and, although we have never run out, supplies of some types of equipment were very low at times so we had to use agreed alternatives.
- Support for our staff including emotional wellbeing – groups meet at dedicated spaces on our main sites and individual counselling is available to help staff deal with the challenges presented by dealing with Covid-19 – this is continuing.
- Other support initiatives have been established including transport, parking, accommodation, provision of a range of free hot food, 24/7 onsite free ‘shops’, shopping collections/deliveries and ‘welfare’ boxes.
- We are extremely grateful to Imperial Health Charity and a range of generous donors and volunteers – local councils, community organisations and businesses and individual members of the public – for making all of this possible.
Where we are now

- As the number of cases of patients being treated for Covid-19 has reduced, we have turned our attention and efforts to organisational and system recovery and reset
- configuring our sites and services to facilitate the safe restart of some elective activity, increased non-Covid care and safe working for our staff – designing ‘Covid risk managed’ and ‘Covid protected’ pathways for elective and non-elective care
- reinstating elective activity focusing on patients with greatest clinical need
- embedding and expanding pathway changes that minimise risk to patients and staff
- coordination of staff re/de-deployment and ongoing support to staff with their wellbeing
- continued readiness for further waves of the Covid-19 pandemic
Reflections on our learning

Community insights
Reflections on our learning

- Significant inequality across NW London with some communities outliers on a range of measures

Inequalities and a focus on need

https://data.london.gov.uk/dataset/covid-19-deaths-mapping-tool
Reflections on our learning

Staff and the importance of their health and well-being
Reflections on our learning

Fear
Reflections on our learning

Accelerated digital change
Reflections on our learning

Research and rapid learning
Reflections on our learning

New ways of working
Reflections on our learning

Gratitude and hope
Looking to the future

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<tbody>
<tr>
<td>1</td>
<td>Care that is centred around the things that matter most to each individual</td>
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<tr>
<td>2</td>
<td>Strong attention to staff health &amp; wellbeing</td>
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<tr>
<td>3</td>
<td>Safe, sustainable and high quality clinical services</td>
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<tr>
<td>4</td>
<td>Care that is driven by research, innovation and data</td>
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<tr>
<td>5</td>
<td>A culture of working and learning together in partnership</td>
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<tr>
<td>6</td>
<td>A focus on building healthier communities</td>
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</table>
Thank you - annual general meeting 2020

Contact us at:
imperial.communications@nhs.net