

Royal Free London Annual Members' Meeting

20 July 2016





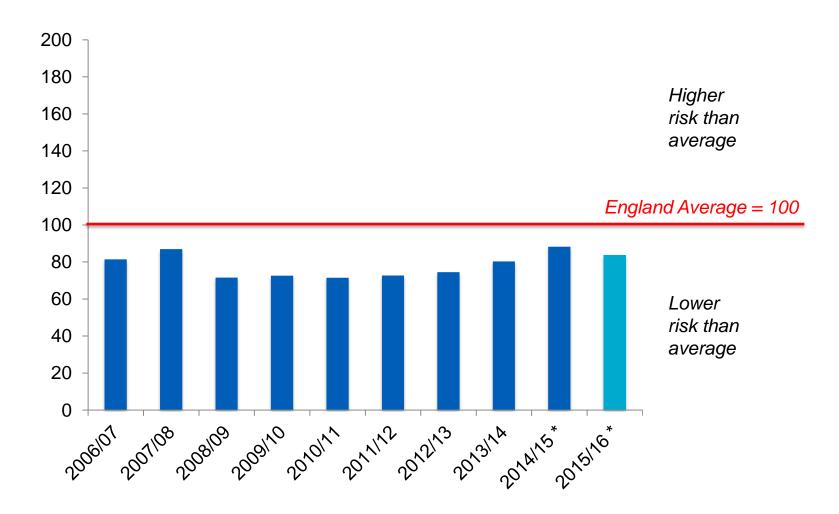
Royal Free London:

Progress, challenges and future direction

Dominic Dodd, chairman David Sloman, chief executive



Mortality rates: HSMR



Hospital standardised mortality rates (HSMR); confidence interval +/- 4-6

* Includes Barnet and Chase Farm Hospitals

world class expertise local care



On the MORTALITY of LONDON HOSPITALS: and INCIDENTALLY On the DEATHS in the PRISONS tend PUBLIC INSTITUTIONS of the METRO-POLIS. By WILLIAM A. Guy, M.D., F.R. S., F. R. C.F., Professor of Forensic Medicine, King's College, London; Physician to King's College Hospital, &c.

Table III. General Mortality for the Five Years 1861-65.

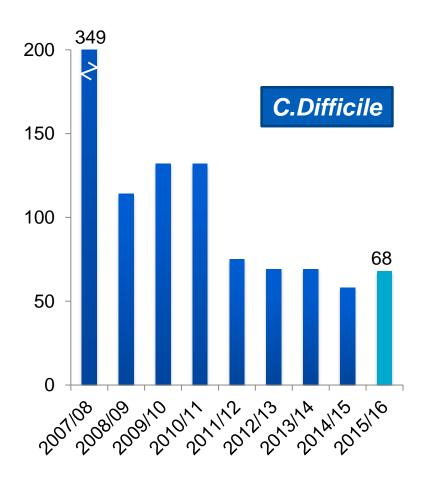
Hospital	Deaths per 1,000									Ditto
	1861	1862	1863	1864	1865	Max.	Min.	Mean.	Range.	per Cent.*
1. St. Bartholomew's	107	112	102	111	102	112	102	107	10	9
2. Guy's	94	96	97	96	93	97	93	95	4	4
3. St. Thomas's	98	97	103	125	101	125	97	103	28	22
4. London	84	76	87	105	89	105	76	88	29	28
5. St. George's	87	85	83	86	97	97	83	88	14	14
6. Westminster	98	103	91	106	92	106	91	98	15	14
7. King's College	107	101	123	151	126	151	101	120	50	33
8. St. Mary's	103	96	98	112	106	112	96	103	16	14
9. Royal Free	67	73	64	74	77	77	64	71	13	17
10. Charing Cross (3 Years)	83	87	77	-	-	87	77	82	10	11
11. Metropolitan Free (4 Years)	69	56	69	-	56	69	56	63	13	19
12. Great Northen (2 Years)	82	45	_	_	-	82	45	66	37	45

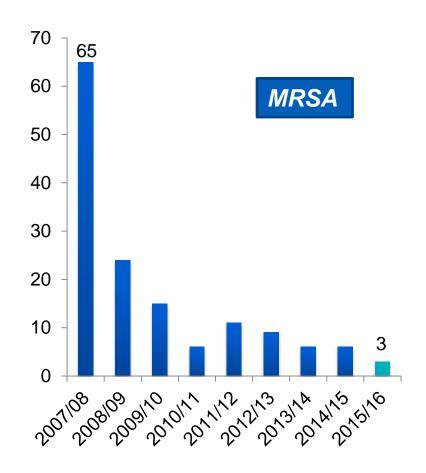
Imperial College London





Infection control



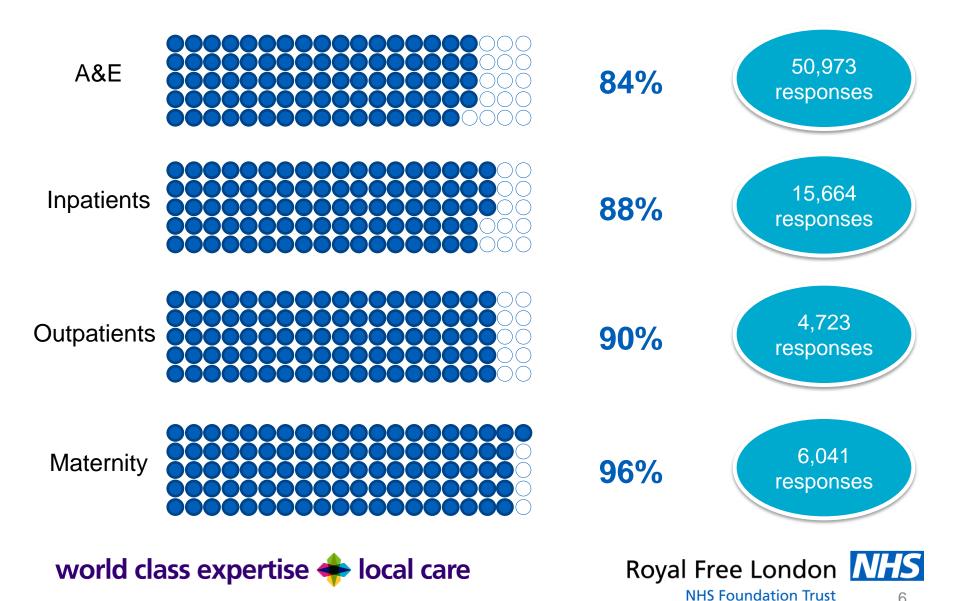


Combined Royal Free and Barnet & Chase Farm trust apportioned cases throughout



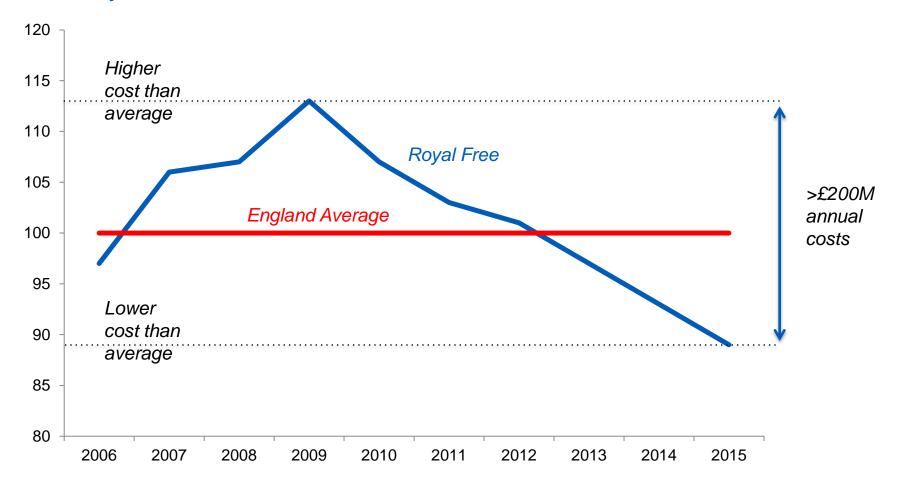


Patient recommendation

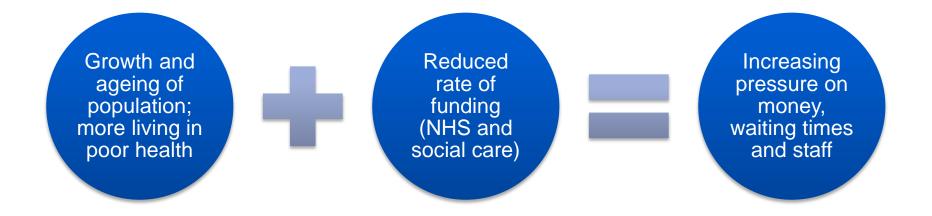


Value for taxpayers' money

Royal Free London Reference Costs Index

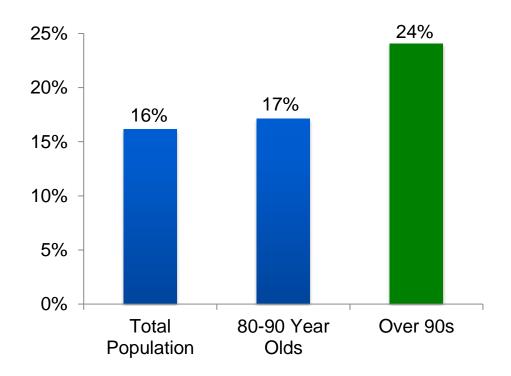


The challenge we face



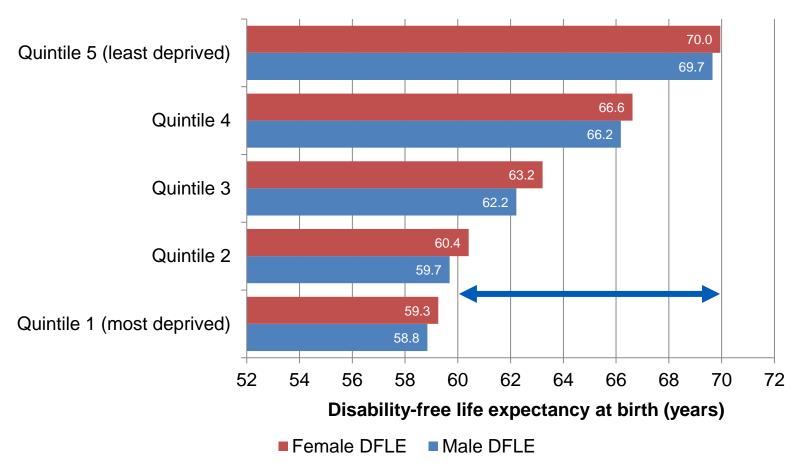
Population change

Royal Free London core catchment: Barnet, Camden and Enfield population growth 2005-2016



Source: Greater London Authority Demographic Projections Base Data 2005-2016

More living longer with poor health



Disability Free Life Expectancy 2009-13: Average at birth by Index of Multiple Deprivation Quintiles 2015 for main RFL catchment area (2.5 million people)

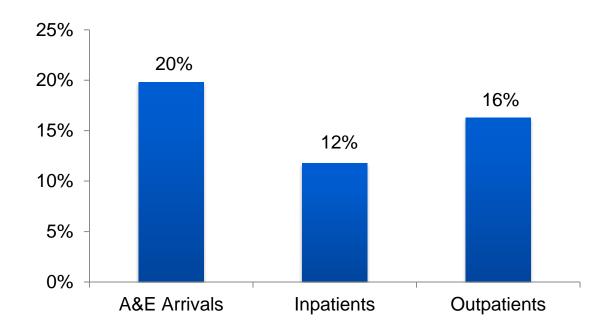
Source: Office for National Statistics



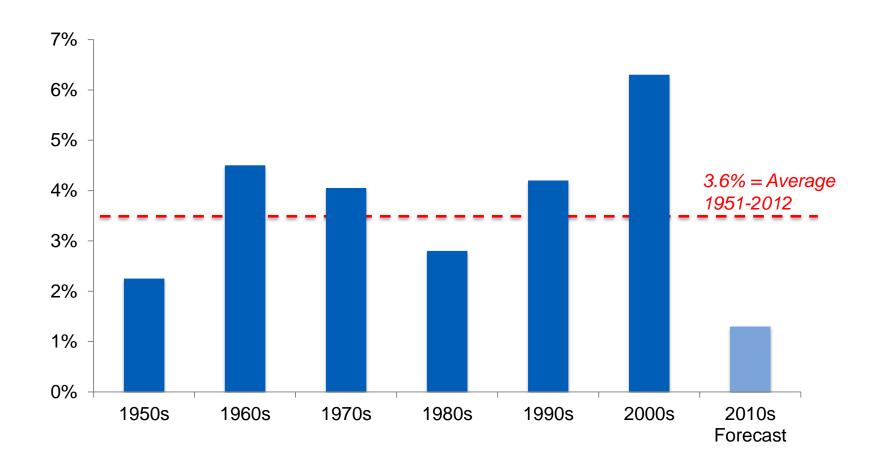


Royal Free London activity growth

Royal Free London activity growth 2008/09-2015/16



NHS funding growth

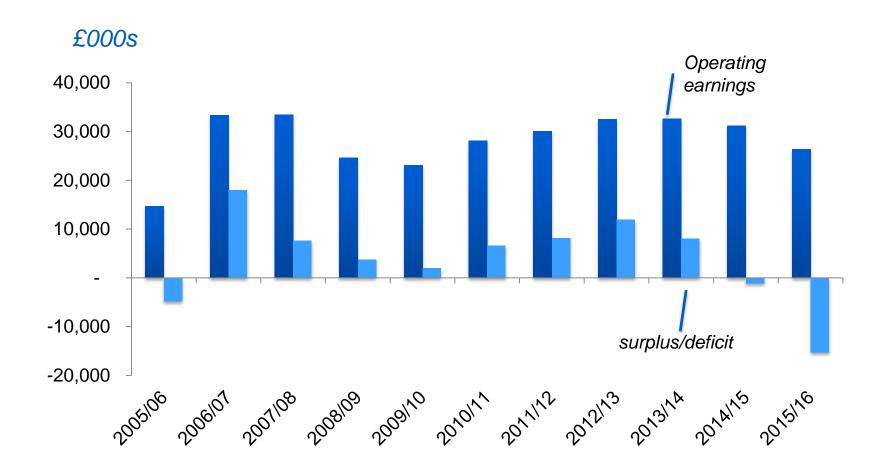


Real annual average changes in UK NHS spending by decade Source: Kings Fund analysis 2015





Pressure on financial performance...



Pressure on waiting times...

A&E four-hour standard

18 week referral to treatment standard

62-day cancer standard

Pressure on staff

NHS national staff survey (autumn 2015 – 38% response rate)

Better than average

"% staff experiencing violence from patients or public"

"quality of appraisals"

"% staff feeling pressure to attend work when feeling unwell"

"quality of training, learning and development"

"staff satisfaction with quality of work and patient care they are able to deliver"

Worse than average

"% staff believing there are equal opportunities"

"% staff experiencing discrimination at work"

"% staff experiencing harassment, bullying or abuse from staff"

"effective team working"

"staff satisfaction with level of responsibility and involvement"

Future direction: five priorities

- Quality improvement...and through that, better value for money
- 2. Supporting our **staff** and helping everyone to feel that they belong
- 3. Unprecedented levels of **investment** in our services for patients
- 4. New partnerships and new ways of working
- **5. Pioneering** to transform the effectiveness and safety of healthcare

1. Quality improvement



- Do you know how good you are?
- Do you know where you stand relative to the best?
- Do you know where the variation exists?
- Do you know your rate of improvement over time?
- Are you working with patients to help us to improve?



2. Supporting our staff

- Equality and diversity:
- focus on leadership
- mandatory recruitment and selection training
- diversity training for board members
- BME listening surgeries
- BME staff forum
- Staff wellbeing including health checks, managing stress sessions and extended Fit at the Free programme
- Involving and engaging all staff in continuous quality improvement
- Addressing bullying and harassment

3. Investment programme

Chase Farm redevelopment

Backlog maintenance and infrastructure programme

Ward improvement programme

Staff facility improvement programme

Decontamination and endoscopy strategy

Private patients strategy

Royal Free Hospital Emergency Department

IM&T improvement programme

Medical equipment improvement programme

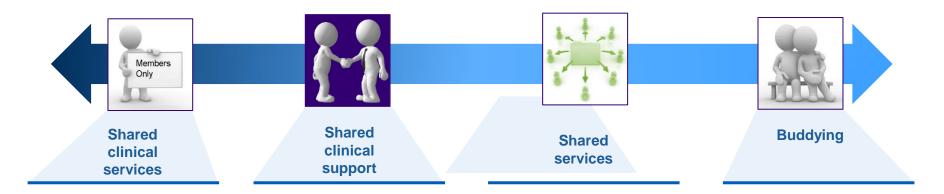
Chase Farm Hospital 2018



Chase Farm Hospital today



4. New partnerships





University College London Hospitals

NHS Foundation Trust



North Middlesex NHS
University Hospital
NHS Trust



5. Pioneering in healthcare

Public health and equality

Genomics

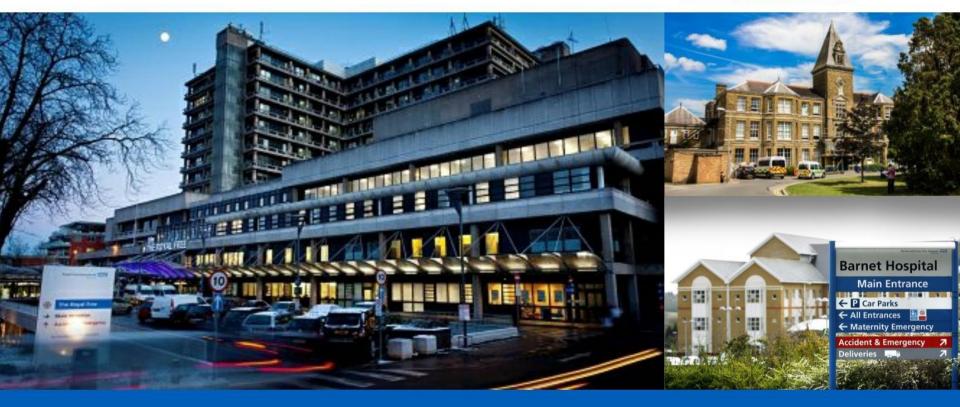
Immunology

"Big data" and machine learning

UCL Institute for Immunity and Transplantation – Pears Building







Annual Public Health Report 2015/16 Royal Free London NHS Foundation Trust

world class expertise 🔷 local care

Future direction

- Quality improvement...and through that, better value for money
- 2. Supporting our **staff** and helping everyone to feel that they belong
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- **5. Pioneering** to transform the effectiveness and safety of healthcare

- Effective and safe care to help people live longer in good health
- Value for taxpayers' money



Review of the Year 2015/16

Caroline Clarke, deputy chief executive Frances Blunden, deputy lead governor



Review of the Year 2015/16

Financial accounts

Quality accounts

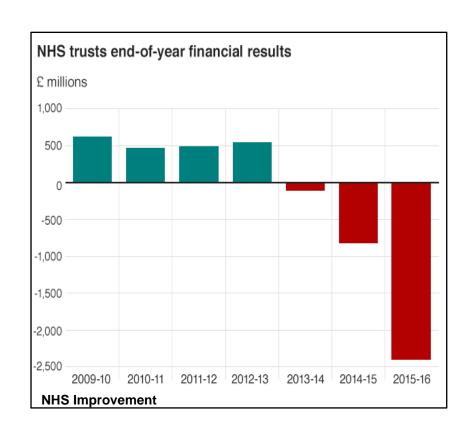
The governors' year

Caroline Clarke

Chief financial officer and deputy chief executive

The national picture

- significant financial pressures on all trusts including RFL
- an unprecedented 21 million emergency patients across NHS last year
- £2.9 billion in efficiency savings between April 2015 and March 2016m, £316 million less than planned.
- the sector ended 2015/16 with a deficit of £2.45 billion for the second successive year overall, £461 million worse than planned
- the NHS provider sector spent £3.64 billion on agency and contract staff, £1.4 billion more than planned



Our financial position

We have a £15.3 million overspend, largely due to:

- a reduction in the price for our specialist services
- continuing high levels of agency staff £45 million in 2015/16

Pay costs are our single biggest expense - £464 million in 2015/16

£122,000 spent on average per day across the trust

£40 million of savings in 2015/16 came from:

- pathology services at Barnet Hospital and Chase Farm Hospital
- our renal strategy
- growing market share in maternity
- post-acquisition efficiency savings

What we are doing to improve?

The trust has put in place a financial improvement plan to save £50 million in five years by:

- ✓ reducing agency spend to £29 million
- ✓ accelerating nurse recruitment programme to increase workforce by 400
 by March 2017
- ✓ providing greater rigour around requests for agency staff
- ✓ saving £5 million through price negotiations with suppliers
- ✓ saving £5.5 million by eliminating wastage of clinical and general supplies
- ✓ saving £1.6 million on drug spending
- ✓ asking staff to identify money-saving opportunities in their own areas

Quality accounts priorities

- 1. Patient safety
- 2. Clinical effectiveness:
- in-patient diabetes
- 3. Patient experience



Review of the year 2015/16

Financial accounts

Quality accounts

Caroline Clarke
Chief Financial Officer & Deputy Chief Executive

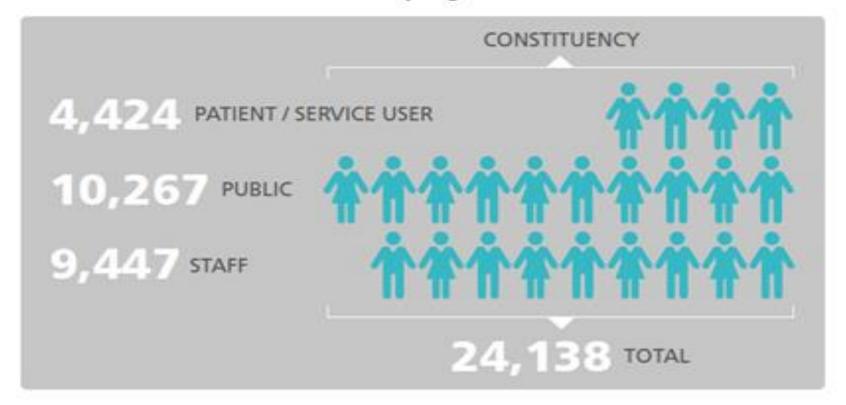
The governors' year

Frances Blunden
Deputy Lead Governor

Royal Free London members

Our membership has grown by 5.5% in 2015/16

Membership figures 2016



Royal Free Council of Governors

31 governors:

Partner appointed (9)

Staff elected (6)

Public elected (8)



Partner organisations

- London Boroughs of Barnet, Camden and Enfield
- Hertfordshire local authority
- University College London
- NHS England and local commissioners





1. Holding the board to account

- Joint trust board and council of governor meetings
- Governors aligned to trust priorities and represented on steering groups:
 - ✓ Developing clinical pathways
 - ✓ Seven-day hospital
 - ✓ Chase Farm Hospital redevelopment
 - ✓ The Pears Building
 - ✓ A&E redevelopment Royal Free Hospital
- Governor observers on board quality committees
 - ✓ Patient and staff experience
 - ✓ Patient safety
 - ✓ Clinical performance
- Non-executive director appointments, objectives, appraisals

2. Making a difference

- Highlighting areas of concern on behalf of our patients, for example:
 - ★ Non emergency transport
 - ★ Bullying and harassment
 - ★ Car parking at Barnet Hospital
- Contributing to the development of the trust's quality objectives and the trust's annual planning process
- 'Go-see' visits with non-executive directors and active participation in PLACE assessments

3. Engaging with members and public

- Regular medicine for members events
- Monthly newsletter to members and the public
- Promoting the expansion of the membership of the trust to include surrounding areas which use our services (e.g. publicising our membership activities at the Enfield Show)
- Bi-monthly council of governors meetings
- Annual members' meeting
- Strengthening links with our local Healthwatch organisations



Questions and answers

