

Board of Directors Meeting

Subject: Chief Executive's Report
Date: Thursday 27 November 2014
Author: Paul O'Connor
Lead Director: Paul O'Connor

| |
|--|
| <p>Executive Summary</p> <p>This report provides an update on the latest issues affecting the Trust.</p> |
| <p>Recommendation</p> <p>The Board is asked to note the content of this paper and specifically where verbal updates will be given at the Board meeting.</p> |

| Relevant Strategic Objectives (please mark in bold) | |
|---|---|
| To consistently deliver safe, effective high quality care achieving a positive staff and patient experience | To eliminate the variability of access to, and outcomes from our acute and community services |
| To reduce demand on hospital services and deliver care closer to home | To develop extended clinical networks that benefit the patients we serve |
| To provide efficient and cost effective services and deliver better value healthcare | |

| | |
|---|-----|
| Links to the BAF and Corporate Risk Register | |
| Details of additional risks associated with this paper <i>(may include CQC Essential Standards, NHSLA, NHS Constitution)</i> | N/A |
| Links to NHS Constitution | N/A |
| Financial Implications/Impact | N/A |
| Legal Implications/Impact | N/A |
| Partnership working & Public Engagement Implications/Impact | |
| Committees/groups where this item has been presented before | N/A |
| Monitoring and Review | N/A |
| Is a QIA required/been completed? If yes provide brief details | N/A |

1. **Duty of Candour and Fit and Proper Person Requirements in the NHS**

On 11th November 2014 the government published the fundamental standards regulations and confirmed that the Duty of Candour and Fit and Proper Person Requirements for Directors (which will come into force for NHS Trusts, Foundation Trusts and Special Health Authorities) will take effect on Thursday 27th November. The remaining fundamental standards will come into force from April 2015. The Duty of Candour and the Fit and Proper Requirement for Directors will also be extended to all other providers from April through additional regulations still subject to parliament. The Duty of Candour and Fit and Proper Requirement Regulations will help to ensure that providers have robust systems in place to be open and honest when things go wrong and hold Directors to account when care fails people. Final debate to agree all of the fundamental standards regulations was held in the House of Lords earlier this month. The published regulations replace the previous 16 essential standards. The Care Quality Commission will shortly be issuing guidance to NHS providers on how they can meet the Duty of Candour and Fit and Proper Person Requirement Regulations.

2. **Industrial Action – Monday 24th November**

A number of trade unions representing healthcare staff have balloted for strike action and action short of strike action and received a positive mandate from their membership. A 4 hour stoppage action has already taken place on 13th October followed by a week of action short of strike. The trade unions have informed us that another 4 hour stoppage will take place on Monday 24th November between 7am and 11am (and 8am to 12pm for the Society of Radiographers), followed by a week of action short of strike action where staff may work to rule. The action has been proposed due to the dispute over this year's pay award and the trade unions' concern that the independent pay review body has not been used to determine pay awards. We recognise that many of our staff may wish to voice their concerns about this and we are working with staff and their representatives to avoid wherever possible the impact of any industrial action on the care we provide to our patients. In planning for the pending industrial action there have been extensive discussions with trade unions across the Trust and protocols and local agreements have been agreed through the Joint Staff Partnership Forum. We will be working to the key principles previously agreed, primarily that patient safety and welfare must not be jeopardised.

3. **East Midlands Breast Screening Programme, Contract Monitoring**

I am delighted to report that the latest data available from the East Midlands Cancer Screening Quality Assurance Reference Centre which shows relative performance across the whole of the East Midlands on cancer screening programmes, gives a very strong report for the Trust. The report, which captures key data across 8 different geographical sites for the 6 months from April 2014 to September 2014 shows that the Trust has consistently achieved the best scores across the region for all datasets measured. A copy of the report can be found at Appendix 1. Our congratulations are noted to all members of the team.

4. **FTN's Update on National Tariff**

NHS England and Monitor are expected to issue the statutory consultation notice on the national tariff on 20th November. At a time of significant financial pressure across the whole of the NHS it is clearly important for the Trust to play its part in actively responding to this consultation.

The FTN has submitted a response to the autumn statement and Health Select Committees inquiry into the public expenditure of the NHS. Earlier this month the FTN also agreed a joint letter with the NHS Confederation, Healthcare Finance Management Association and NHS clinical commissioners to highlight system wide concern about 2015/16 finances and the national tariff proposals. The FTN's priority is to ensure that any additional funding is routed through the payment system rather than to continue with the current approach for variable and inconsistent non recurrent funding

throughout 2015/16. The FTN has identified the following as its key expectations in the forthcoming proposals for the national tariff:

- An efficiency factor toward the lower end of the proposed 3 – 5% range. It had been suggested that the efficiency factor, taking “tariff leakage” into consideration, might have been as high as 4.5 – 5%. However, even with a lower efficiency factor there will still be considerable financial pressure on providers and this lower efficiency factor will also form only one part of a wider set of measures aimed at improving productivity;
- A major squeeze on specialised services and an attempt to manage the budgets through proposals such as a marginal rate over the previous year’s contract value, for the vast majority of services;
- Changes on some HRG chapters since proposals put forward in the tariff engagement document, including increased A&E and outpatient tariffs, as well as smoothing of the volatility proposed to the trauma and orthopaedic chapter;
- Some movement on the punitive payment arrangements in urgent and emergency care;
- No decision around the service development fund for 2015/16;
- A number of new national CQUINs including on the management of kidney injury and sepsis for the acute sector and dementia care for mental health trusts. There will be an emphasis in the planning guidance and standard contract for commissioners and providers to agree a menu of CQUINs around urgent and emergency care across the local health economy.

5. The FTN Becomes NHS Providers, the Association of Foundation Trusts and Trusts

On 18th November the FTN announced that its Board had decided that, from 1st December 2014, the Foundation Trust Network name will change to NHS Providers, the Association of Foundation Trusts and Trusts. The new name more accurately reflects what the organisation does, who it is and who it represents and a full letter of explanation is found at Appendix 2.

6. Newark Hospital Staff Listening Event

On the 5th November a listening event was held for staff working at Newark Hospital. The event gave an opportunity for any members of staff at Newark to identify the services that worked particularly well at the Trust and opportunities for further development. As a result of the listening event, a smaller group representative of all of the areas who attended the listening event, is working with our newly appointed Director for Newark, Jacqueline Totterdell to give momentum to changing services at the hospital in line with our published strategy for Newark Hospital. Under Jacqueline’s direction, the group is also formulating further proposals for development at Newark Hospital and I look forward to keeping the Board up to date with these developments. A weekly update on these development activities is being made available to all staff and governors. I look forward to holding other listening events across Mansfield Community Hospital and King’s Mill Hospital in due course.

7. Trust Awarded UNICEF Baby Friendly Award

I am delighted to report that the Trust is the latest UK healthcare facility to win international recognition from the United Nation’s Children’s Fund (UNICEF) by being awarded the prestigious Baby Friendly Award.

The Baby Friendly Initiative, set up by UNICEF and the World Health Organisation, is a global programme which provides a practical and effective way for health services to improve the care provided for all mothers and babies. In the UK, the initiative works with UK public services to protect, promote, and support breastfeeding and to strengthen all mother and baby and family relationships. The award is given to hospitals after an assessment by a UNICEF team has shown that recognised best practice standards are in place. This award recognises the hard work being undertaken by staff to encourage and support new mothers with breast feeding their baby. This

work helps to increase breast feeding rates and improve care for all new mothers and babies at the Trust.

Jo Lincoln, the Trust's Infant Feeding Co-ordinator has said, "The health benefits of breast feeding for both mum and baby are widely known. For baby these include early protection against a wide range of serious illnesses including gastroenteritis and respiratory infections in infancy, as well as asthma, cardiovascular disease and diabetes in later life. For mums, it can also reduce their risk of developing some cancers.

"But however a new mum chooses to feed her baby, we encourage her to form a strong loving relationship with her new-born by supporting maximum skin to skin contact, helping her to understand how her baby communicates and how she can respond to that."

Sue Ashmore, Baby Friendly Initiative Programme Director, said: "We are delighted that Sherwood Forest Hospitals has achieved full Baby Friendly status. Surveys show us that most mothers want to breastfeed but don't always get the support they need. New mothers can be confident that midwives at the Trust will provide full support and high standards of care."

Paul O'Connor
Chief Executive