

## Board of Directors Meeting in Public - Cover Sheet

<b>Subject:</b>	Chief Executive's Report	<b>Date:</b> 5 March 2020		
<b>Prepared By:</b>	Robin Smith, Acting Head of Communications			
<b>Approved By:</b>	Richard Mitchell, Chief Executive			
<b>Presented By:</b>	Richard Mitchell, Chief Executive			
<b>Purpose</b>				
To update on key events and information from the last month			<b>Approval</b>	
			<b>Assurance</b>	X
			<b>Update</b>	
			<b>Consider</b>	
<b>Strategic Objectives</b>				
<b>To provide outstanding care</b>	<b>To promote and support health and wellbeing</b>	<b>To maximise the potential of our workforce</b>	<b>To continuously learn and improve</b>	<b>To achieve better value</b>
X	X	X	X	X
<b>Overall Level of Assurance</b>				
	<b>Significant</b>	<b>Sufficient</b>	<b>Limited</b>	<b>None</b>
			X	
<b>Risks/Issues</b>				
<b>Financial</b>				
<b>Patient Impact</b>				
<b>Staff Impact</b>				
<b>Services</b>				
<b>Reputational</b>				
<b>Committees/groups where this item has been presented before</b>				
N/a				
<b>Executive Summary</b>				
<p>An update regarding some of the most noteworthy events and items over the past month from the Chief Executive's perspective:</p> <ul style="list-style-type: none"> <li>• Overall update</li> <li>• Wider SFH news</li> <li>• Next month at SFH</li> </ul>				

## Chief Executive Report – March 2020

### Overall update

Please find the latest harm information below:

	Monthly figure	Year to date figure
C Diff	4	31
MRSA	0	0
E Coli	2	34
Grade 4 avoidable Healthcare Associated Pressure Ulcers	0	0
Falls which cause moderate, severe or catastrophic harm	0	10
Never events	0	1
Total	6	76

Further information about the above is included in the Single Oversight Framework Performance Report. Appendix A details how we performed in January against our high level metrics for workforce, quality, access and finance.

The executive team and I visited the following areas in January:

#### King’s Mill Hospital and Mansfield Community Hospital:

AECU, Anaesthetics, Cath Lab, Chatsworth Ward, Clinic 5, Clinic Prep, Critical Care, EAU, Emergency Department, Endoscopy, Knowledge Services, Lindhurst Ward, Maternity Ward, Medical Managers, Medical Secretaries, Medical Typists Microbiology, Neonatal, Nervecentre Team, Oakham Ward, Paediatrics, Pathology, Research & Innovation, SAU, Sherwood Birthing Unit, Short Stay Unit, Surgical Business Office, Theatres & Recovery, Training & Education, Urgent Care Centre and Wards 11, 12, 14, 21, 22, 23, 24, 31, 32, 33, 34, 41, 42, 43, 44, 53 & 54.

#### Newark Hospital:

Bramley Children’s Unit, Day Case, Eastwood Centre, Endoscopy, Fernwood, General Office, Medical Records, Minster Ward, Newark, Out Patients, PALS, Patient Pathway Coordinators, Pre- op, Reception, Rheumatology/Haematology Specialist Nurses, Sconce, Theatres, Typists, Urgent Care Centre, Women’s Centre, and X-ray.

### Wider Sherwood news

#### Coronavirus

We are taking our responsibilities in relation to Coronavirus seriously, including ensuring we have appropriate systems and procedures in place, we are following national guidance, and we are appropriately communicating with colleagues, partners and the community. We are managing the situation through thrice-weekly meetings chaired by the Medical Director, Dave Selwyn and are taking the issue as a standing item in our weekly Execs/Trust Management Team meetings. A separate report on Coronavirus is attached.

### **Staff survey results – most engaged colleagues in the Midlands**

The annual staff survey results were published on Tuesday 18 February. The format of the report has changed making comparison with previous years more difficult. However, we know overall we have done very well and we should celebrate the progress we are making! The survey was open in October and November 2019 and this year 66% of colleagues responded, up from 62% the year before. This was one of the highest response rates for NHS Acute organisations.

In previous years when the annual Staff Survey results are published we received an overall engagement score (3.91 and we were 11<sup>th</sup> of 89 Acute Trusts in 2018). This year our overall engagement score has not been shared yet but we are equal ninth overall for all Acutes.

As well as having a high response rate we are proud with our staff engagement rating which is one of the eleven themes. We scored 7.25/10 which places us top for Acute Trusts in the Midlands and equal 13th in the country. In total we were either the best or the second best in the region for nine of the eleven themes with the exceptions being “safe environment – violence” and “health and well-being”.

Of the 90 questions this year, 57 of them scored higher (better) than the previous year and 16 deteriorated.

The biggest improvements were:

- Disability – organisation made adequate adjustment(s) to enable me to carry out work +10% on last year
- Not felt pressure from line manager to come to work when not feeling well +7%
- Organisation treats staff involved in errors/ near misses/ incidents fairly +6%
- Staff given feedback about changes made in response to reported errors/ near misses/ incidents 5%
- Senior managers act on staff feedback +5%

Of the scores that deteriorated, the biggest deteriorations were:

- Last experience of physical violence reported -5% compared to previous year
- Organisation acts on concerns raised by patients/ service users -3%
- Opportunities to show initiative frequently in my role -2%
- Care of patients/service users is organisation’s top priority -2%.

You can find more detail on the findings [here](#). I am aware these findings will not resonate with everyone. We still have too many colleagues who do not enjoy their experience at Sherwood and the questions where we have deteriorated over the last year and the last three years provide useful information about where we focus next. I am confident that with Emma Challans, Director of Culture and Improvement, and her team working with colleagues across Sherwood on this, we will see a dramatic improvement in engagement over the coming years. This is not something that lends itself to action plans but cultural improvement is based on conversations, providing honest feedback and working together. I want us to have the best engagement in the NHS because we know well supported colleagues will provide consistently excellent care to patients.

### **Winter 2019/20 update**

Our monthly performance update demonstrates we have continued to see a very high level of patients in January. We will also demonstrate that in the main we have managed to maintain good timeliness and quality of care for our patients which is due to the continued dedication and compassion of SFH colleagues and our partner organisations.

### **Last month's Board**

Each month after Board a member of our Executive team produces a video with their reflections of the meeting and the things we agree to share with the wider organisation. We will share these each month in this report. [For February's Board, Director of Culture and Improvement Emma Challans talked us through the key issues.](#)

### **Care Quality Commission**

Following updates in previous reports, the CQC have now completed their assessments. After the core services inspections and our Use of Resources assessment detailed last month, the final part of the process was our 'Well-Led' Assessment on 11 and 12 February. The Well-Led element included a number of group meetings, and one to ones with some of our senior leaders. After the visit we were given some informal feedback, and again the CQC were complimentary about the how they had been welcomed and what they heard.

The CQC will now write up their report, before we will see a draft copy for fact checking, with the hope to be able to communicate the outcome at some point in April. I believe we have been able to evidence to the CQC that we have continued to improve, and I think we will have done ourselves justice.

### **Park Run**

Sherwood Forest Hospitals will be holding a 'takeover' of our local Brierly Forest Park Run on Saturday 29 February. I am looking forward to taking part myself, and hope to see as many colleagues as possible either join the run, or act as volunteers. The run encapsulates our Healthier Communities, Outstanding Care strategy, in particular our commitment to colleague wellbeing. I also know that many colleagues are taking this opportunity to raise funds for the Hospital Charity. My thanks to everyone involved in getting this off the ground.

### **Next month at Sherwood**

Operationally we will expect to remain busy during March, and we will also continue to respond appropriately to the on-going Coronavirus outbreak. We have started the planning for our second annual Recognition Week (30 March to 3 April), which will again give us a great opportunity to reflect back on the successes of the previous 12 months, as well as to thank and recognise the colleagues involved.

Appendix A: Performance Infographics

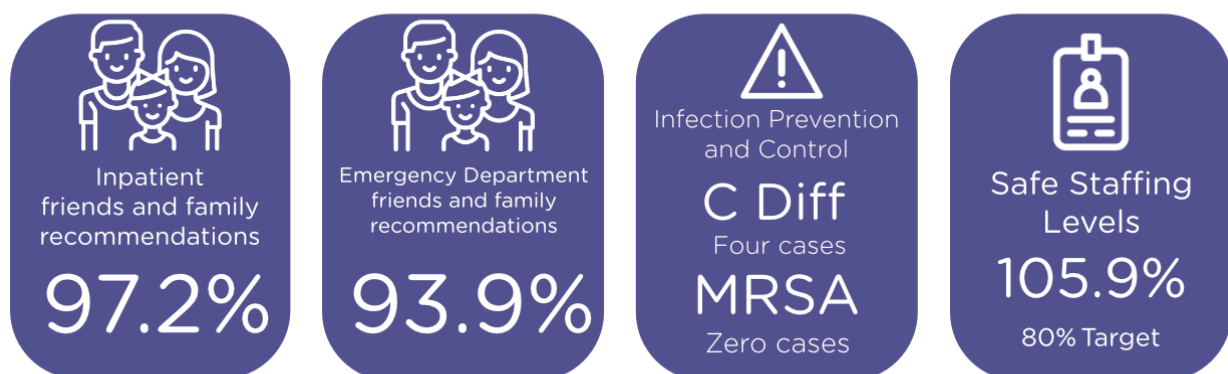
#TeamSFH  
@SFHFT

# Workforce



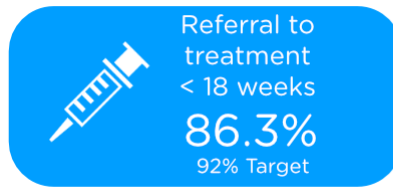
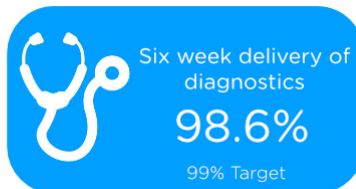
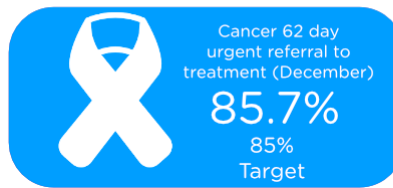
#TeamSFH  
@SFHFT

# Quality



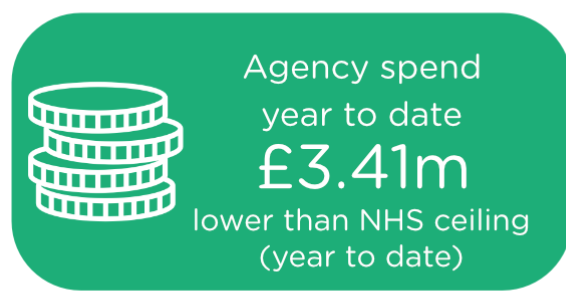
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 @SFHFT

# Access



#TeamSFH  
 @SFHFT

# Finance



## Appendix B



### **Mid-Nottinghamshire ICP Board Update – January 2020**

Below is a summary of the key items discussed. The full papers (and details of forthcoming meetings) can be found here: <http://bit.ly/ICPBoard>

#### **Board appointments**

Chair Rachel Munton confirmed that Hayley Barsby, Chief Executive at Mansfield District Council will also be deputy executive lead of the ICP. She joins Thilan Bartholomeuz, local GP and clinical chair of Newark and Sherwood CCG who is now the Clinical lead for the ICP.

#### **Estates Strategy Development**

ICP Estates lead Ben Widdowson presented work done to date by the ICP estates group and how it fits in with the ICS estates strategy to maximise the use of assets which included what had already been identified in Newark. There was then a discussion on what other assets were available to communities and how this linked to the ICP's community insight model so that communities had assets they wanted and needed. Ben will collate the feedback into an update paper which will return to Board later this year.

#### **Invitation to participate in a Musculoskeletal value improvement programme**

ICP Director of Care Integration Peter Wozencroft and ICS representative Rebecca Larder brought a proposal to the ICP which would see it participate in a 12 month value improvement programme in partnership with the Oxford Centre for Triple Value Healthcare and Pfizer. A discussion was had about the clear benefits and some concerns over details still to be worked out in terms of resource requirements for local GPs and the role of Pfizer. While members agreed in principle that this was a positive proposal, they wanted these details finalising first before committing to it. Peter and Rebecca agreed to work on this and bring it back to a future ICP Board.

#### **Outcomes Framework and the approach to Population Health Management (PHM)**

Dr Mike O'Neil, Nottinghamshire GP and member of Connected Notts presented on PHM, the possibilities and limitations of the data that is already available and how this can be used for decision making. Members discussed three key points:

- How can PHM support and be supported by the ICP's priority neighbourhoods approach?
- How does the ICP balance delivering now, while meeting tomorrow's needs?
- How will the ICP adopt PHM to deliver impactful interventions as part of its processes and how will the Board ensure delivery is different this time?

Summaries of the discussions were fed back to Mike to help with his discussions with other ICPs. Members also discussed areas (such as flu planning) where this could start to be used at an ICP level.

Next month's meeting will take place on February 27 at 2.30pm at the Summit Centre in Kirkby. Papers will be available a week in advance on the ICP website.





## ICS Board Summary Briefing – February 2020

*Please find below the Nottingham and Nottinghamshire Integrated Care System (ICS) update following the ICS Board on 13th February. Please ensure this is cascaded to Governing Boards/Bodies, Management Teams and other key stakeholders and teams across your respective organisations. Minutes from the ICS Board held on 16th January 2020 will shortly be published on the system's website – <https://healthandcarenotts.co.uk/about-us/ics-board/>*

### **Introduction**

The Chair of the ICS, David Pearson, welcomed a number of citizens and staff from across the system to the Board meeting – reminding colleagues that the meeting was held in public and all the papers for the meeting are available at <https://healthandcarenotts.co.uk/about-us/ics-board/>. Patients, citizens and staff from organisations across the system are always welcome to the Board to hear the discussions.

### **Patient Story – Mansfield ‘Street Health’**

Lynn Smart, Head of Nursing and Allied Health Professionals, Kate Wright, Associate Chief Allied Health Professional and Emma Wilson, Specialist Safeguarding Nurse from Sherwood Forest Hospitals NHS Foundation Trust presented a patient story showing the impact of the Street Health initiative in Mansfield. Even though it has been running for just eighteen months, the Street Health programme has already had a profound impact on the health of homeless citizens in Mansfield. Drawing together colleagues from across the Trust and from the wider community, including church and voluntary groups, the Street Health programme works with homeless citizens on their terms, offering services and support to address the widest possible health needs. This includes flu vaccinations, wound dressing, help with drug and alcohol issues, mental health support and wider care like hairdressing and provision of clothing. The initiative stemmed from the nursing team at the Trust recognising that this group of citizens were sixty times more likely than the average to attend A&E and that the traditional way of arranging services was not serving their needs.

The Board heard about Dean, a long term homeless resident of Mansfield who, through the support of the initiative has been able to receive care for his leg wounds, deal with his drug issues and move into permanent accommodation. Dean's story is an example of the wider impact including the fact that twelve street health clients now have avoided attending A&E for at least a year, with their needs being provided for in a more appropriate way.

The Board commended the results and the impact, but in particular celebrated the way that the programme was developed – with front-line colleagues not waiting for permission or formal approval to start the work but instead doing the right thing, working across organisational boundaries and focussing on the patient. This was identified as an exemplar way of working for team across the whole ICS.

### **Operational Planning for 2020/21**

Paul Robinson, the ICS's Director of Finance updated the Board on progress on planning for the year 2020/21. The Board discussed the recent national planning guidance issued by the NHS and in particular noted that the timetable to agree and submit a plan into NHS England / Page 2 of 2 Improvement required all organisations to move at pace. Partners around the table discussed various elements of the planning guidance including changes to the way that funding will be allocated and performance against financial targets measured. Local Authority partners in particular were keen to ensure that the clear direction in the planning guidance around social care, communicate care and prevention were at the forefront of our plans. The Board will discuss the latest draft of the 2020/21 plans at the March Board and confirm final approval at the April meeting.

### **ICPs Update**

Dr Nicole Atkinson, Clinical Director of the ICS and also Clinical Director of the South Nottinghamshire ICP presented an update on the work of the South Notts ICP to date.

Recognising the fact that the ICP area contained a range of communities and had perhaps a less coherent geography than the other two ICPs that make up the ICS, Dr Atkinson nevertheless identified the significant track record of innovation and transformation in the area. Now that the ICP has clear and settled leadership from Dr John Brewin, Chief Executive of Nottinghamshire Healthcare Trust and Dr Atkinson, the intention is to accelerate the standardisation and adoption of those innovations. Early priorities include a roll out of the proven social prescribing model and also the Primary Care Psychological Medicine service which was featured at the ICS Board in June 2019.

The Board noted and celebrated the progress to date and thanked Dr Atkinson for the presentation. The Board also noted written reports from the City and Mid Notts ICPs.

### **Integrated Performance Report**

The Board discussed the latest performance figures for the ICS, and highlighted the fact that the latest guidance from national leaders of the NHS is that ICSs should be operating as a "system by default" and focussing on both transformation of services and also ensuring that the system is performing as expected. The Board discussed how to ensure that the agendas of future meetings are aligned to those expectations.

*David Pearson,  
Independent Chair, Nottingham and Nottinghamshire ICS*

*Dr Andy Haynes,  
Executive Lead, Nottingham and Nottinghamshire ICS*