

Title:	Chief Executive report		
Report to:	Trust Board		
Meeting:	25th January 2023	Agenda item:	
Purpose of the report:	For Noting: <input type="checkbox"/>	For Decision: <input checked="" type="checkbox"/>	For Assurance: <input checked="" type="checkbox"/>

Executive Summary:

The report details the actions that have been taking place to manage the ongoing pressures in local systems and services.

The section on the Board Assurance Framework (BAF) sets out an accurate and up to date analysis of the major risks being faced across the organisation and the overall risk profile across our service divisions. The BAF is included in Annex A.

Finally, the Trust Board are asked to adopt the revised Freedom to Speak Up Policy which has been updated to align it with the revised national FTSU policy (published in June 2022). The policy is included in Annex B.

Recommendation:

The Board is asked to:

- (i) **Note** the content of the report
- (ii) **Accept** and agree to the Board Assurance Framework as an accurate reflection of the strategic risks facing the organisation
- (iii) **Approve** Freedom to Speak Up Policy

	Name		Title	
Report author:	Matthew Winn Rachel Hawkins Sarah Turner Mercy Kusotera		Chief Executive Director of Governance and Service Redesign Communications specialist Trust Secretary and Freedom to Speak Up Guardian	
Executive sponsor:	Matthew Winn		Chief Executive	
Assurance level:	Substantial <input type="checkbox"/>	Reasonable <input checked="" type="checkbox"/>	Partial <input type="checkbox"/>	No assurance <input type="checkbox"/>

How the report supports achievement of the Trust objectives

Trust Objective	
Provide outstanding care	The report sets out how we continue to respond to winter viruses and provide outstanding care to local residents despite winter pressures and the impact of the strike by RCN (Royal College of Nursing) members

Collaborate with others	Sections 1.4 and 5 contains many examples of how the organisation and services are working with partners to reduce pressures, especially on A&E departments.
Be an excellent employer	Freedom to speak up approach is fundamental to a healthy working culture. Support for staff during industrial action is key to ensure staff continue to respect each other and able to work effectively.
Be a sustainable organisation	Section 2.1 describes how the national operational planning guidance will support sustainable care delivery.
Equality and Diversity Objective	
To fully implement the actions identified following our review of the No More Tick Boxes review of potential bias in Recruitment practices	This is not covered in this report
The Trust Board will role model behaviours that support the Trust ambition to be an anti-racist organisation including actively implementing the Trust's and their personal anti racism pledges, to instil a sense of belonging for all our staff	This is not covered in this report
To commence collection of demographic data for people who give feedback.	This is not covered in this report
To work with the data team and clinical services to target the collection of demographic data	This is not covered in this report

Links to BAF risks / Trust risk register

BAF risks set out as an item in this report

Legal and Regulatory requirements:

NHS England Freed to Speak Up Policy
NHS England annual planning priorities

Previous Papers (last meeting only):

Title:	Date Presented:
Chief Executive report	23 rd November 2022

1 OPERATIONAL PRESSURES & WINTER PRESSURES MANAGEMENT

COVID and FLU

- 1.1 Trust staff continue to undertake lateral flow tests when they have any symptoms of COVID-19 and Personal Protective Equipment (PPE) continues to be available for all staff that need it and any support to partner organisations and families supporting children with complex needs, are given, as they are needed.
- 1.2 Staff sickness levels remain high currently at 6%, with the reasons mainly due to covid, flu and respiratory illnesses.
- 1.3 The current high levels of Covid-19, flu and respiratory infections means it is vitally important to follow infection, prevention and control (IPaC) measures to minimise the risk of outbreaks, slow the spread of infection and protect staff, patients and service users. In addition to the existing mask wearing arrangements, the Trust has reintroduced mask wearing for all clinical and non-clinical staff in office premises and maintaining 1 metre distancing. All visitors and patients/service users (unless exempt) are also encouraged to wear face masks when inside Trust buildings.

EMERGENCY CARE PRESSURES IN LOCAL SYSTEMS

- 1.4 The Trust is undertaking a number of actions to support local emergency flow in Bedfordshire:
 - Bedfordshire Hospitals been reporting Opel 4 since Christmas.
 - Twice daily escalation calls in place that Service Director and/or Deputy Chief Executive attend
 - Actively involved in daily flow calls to manage flow across the system.
 - Urgent Community Response (UCR) team linked with Ambulance service and has been accepting category 3 and 4 referrals directly since 16th November 2022.
 - Taking crisis response (UCR) referrals from primary care, 111 and other parts of the system to avoid hospital attendance. Achieving over 90% of UCR referrals within 2 hours.
 - Leading on identifying additional capacity within existing care homes to reduce pressure on the hospital and to enable them to reduce escalation beds
 - Working with hospitals Clinical Navigation team via jointly appointed post to maximise this resource

STRIKES

- 1.5 The Royal College of Nursing (RCN) took strike action in the Trust between 08:00 – 20:00 on Thursday 15th December and Tuesday 20th December 2022. Key points of note, including impact on the services provided by the Trust was as follows:
 - Twelve derogations were requested, four of which were rejected.
 - Picket lines were convened as follows:
 - 15th December 2022: one picket line was established at The Poynt, Luton, and an informal picket line at Havenbridge, Kings Lynn.
 - 20th December 2022: a picket line at Doddington Hospital, Ely and at Havenbridge, Kings Lynn.
 - In general services were able to maintain urgent and essential services as a minimum. Good partnership working remains in place between Trust leads and the RCN strike committee.
- 1.6 Looking ahead:

- Unison did not reach the 50% threshold, in their ballot of members, to trigger strike action in the Trust
- The Chartered Society of Physiotherapists balloted members and reached the threshold for action in the trust. Strike action is planned in the Trust for 26th January 2023.
- We will continue to use the excellent relationships with our local Trade Union representatives to ensure our staff are supported and urgent patient care is maintained.
- As any future dates are announced by the Royal College of Nursing, we will share our detailed plans with staff. This will include the introduction of business continuity plans for minimising the impact of strike action on services and maintaining staff and patient safety as they develop and throughout all periods of industrial action.
- These arrangements will be regularly reviewed and discussed with Unions to reduce the risk of industrial action negatively impacting on patient and staff care.

2 LOCAL, REGIONAL and NATIONAL ISSUES

National 2023/24 priorities and operational planning guidance – NHS England

2.1 [The planning guidance](#) has been published to “support local decision making, empowering local leaders to make the best decisions for their local populations and have set out fewer, more focused national objectives.” The document sets of three core priorities for the next financial year:

- Recover core services and productivity;
- make progress in delivering the key ambitions in the Long-Term Plan (LTP), and;
- continue transforming the NHS for the future.

NHS Providers has produced a useful summary: https://nhsproviders.org/media/694825/nhs-providers-on-the-day-briefing-planning-guidance-23_24.pdf and this is included in Annex C.

2.2 Areas specific to community health and the Trust within the guidance are:

Theme	Our role
<i>Reducing ambulance handovers</i>	<ul style="list-style-type: none"> • Expansion of 2-hour community health teams to mainstream responses to those who fall • Expansion of taking on category 3 and 4 calls (from the ambulance stack or from visiting paramedic teams) • Full implementation of the virtual ward focusing on admission avoidance and intensive support of care in a person’s home • Mainstreaming 7-day operations of the children’s urgent care clinics in Luton and Bedfordshire and plan for roll out in Cambridgeshire and Peterborough
<i>Bed occupancy</i>	<ul style="list-style-type: none"> • Implement the capacity increases in discharge services and manage the throughout put through those service tightly (see below) • Implement one team approach to management of community beds across Bedfordshire and Luton.
<i>Intermediate care/discharge from acute care</i>	<ul style="list-style-type: none"> • Employ and expand intermediate care workforce on pathway 1 across Bedfordshire Care Alliance footprint. Set standards and expectations for intermediate care provision and use data to inform decision making to improve flow across the system. • Actively manage the patents being supported on pathways 1 and 2 and discharge them into long term care options without any delays in Bedfordshire and Luton

Theme	Our role
	<ul style="list-style-type: none"> Undertake a share care model with the three local authorities, East London Foundation Trust and HCRG Care Group across Bedfordshire and Luton Continued support from CYP (Children & Young People) Community Nursing in facilitating hospital discharge in Cambridgeshire & Peterborough
<i>Self-referral into community health services</i>	<ul style="list-style-type: none"> Ensure all relevant community health services specified in the guidance are directly accessible by the public. Eradicate any “historic gate keeping” referral routes into our service via General Practitioners.
<i>Diagnostics</i>	<ul style="list-style-type: none"> Implementation of Community Diagnostic Centre developments on our sites in Ely and Wisbech (Cambridgeshire) Home based diagnostics in Bedfordshire and Luton as part of the virtual ward implementation.
<i>Permanent workforce</i>	<ul style="list-style-type: none"> Maximising opportunities for international recruitment in nursing and allied professional roles. Ensure all services have a 3-5 year workforce plan Establishing resilient bank across the Trust to eradicate need for agency workers Deliver against all of the NHS People Promise elements (people strategy)
<i>NHS long term plan priorities</i>	<ul style="list-style-type: none"> Older people priorities for community urgent care and support to care home residents
<i>Digital infrastructure and connectivity</i>	<ul style="list-style-type: none"> Faster data flows for urgent community response; virtual wards and Musculo skeletal services Adult services across Luton and Bedfordshire fully utilising the shared care records Ensure remote monitoring data collected by the Trust (and delivery partners) is integrated into the shared care record. Utilise BLMK (Bedfordshire, Luton and Milton Keynes) population health management tool to proactively target provision of Luton Adult Services.
<i>Mental Health</i>	<ul style="list-style-type: none"> Contribute to achieving CYP MH Access Standard through Emotional Health & Wellbeing Services in Cambridgeshire & Peterborough and Norfolk & Waveney
<i>Prevention and health inequalities</i>	<ul style="list-style-type: none"> Deliver on CYP Core20PLUS5 approach through service provision and as host of the CYP & Maternity Provider Collaborative in Cambridgeshire & Peterborough

2.3 Funding assumptions to deliver the above priorities are built on:

- NHS England is issuing two-year revenue allocations for 2023/24 and 2024/25. At national level, total ICB (Integrated Care Board) allocations [including COVID-19 and Elective Recovery Funding (ERF)] are flat in real terms with additional funding available to expand capacity.
- Integrated Care Boards capital allocations for 2022/23 to 2024/25 have already been published and remain the foundation of capital planning for future years. Capital allocations will be topped-up by £300 million nationally, with this funding prioritised for systems that deliver agreed budgets in 2022/23.
- The core efficiency and inflationary assumptions are laid out in the guidance and details are contained in the forward look of the section four in the Integrated Governance report

2.4 Each Integrated Care Board will need to develop a Joint Forward Plan, that takes into consideration the strategies developed by the Integrated care partnership and local health and wellbeing boards. The Trust will be part of the further refinement of these plans across the three Integrated care boards we are actively part of.

- 2.5 NHS England plans to delegate to Integrated Care Boards budgets that were held at a regional footprint for specific services areas in April 2023 and specific specialist commissioning budgets in April 2024. The Trust will work with regional and local ICB's as this process happens for the services the Trust provides that are funded through these budgets (Dentistry, HIV etc)

Local

- 2.6 The Chief Executives within the integrated care system in Cambridgeshire and Peterborough affected by the proposed congestion charge scheme in Cambridge have met with the lead officers undertaking the consultation and policy developments. Clarification was given that Trust staff travelling from their bases within the proposed congestion zone to undertake their work in peoples own homes and other local clinics, would not be charged. The details of how the exemption charging process was organised have yet to be developed.
- 2.7 The consultation process has now closed, and it will take up to six months to digest the feedback and develop recommendations to the local Councils and Combined Authority. If the scheme is approved, implementation will take up to three years, with bus service re-design and investment starting first, to provide alternatives to car travel, before any charging scheme is activated. As these proposals are worked up, we will continue to work with the travel authorities to ensure staff, whose base is within the proposed charging zone, have alternative travel arrangements to get to our sites, to avoid them being charged. This may also include the planning of health care sites outside of the charging zone, where they do not need to be geographically specific to a particular post code in Cambridge.

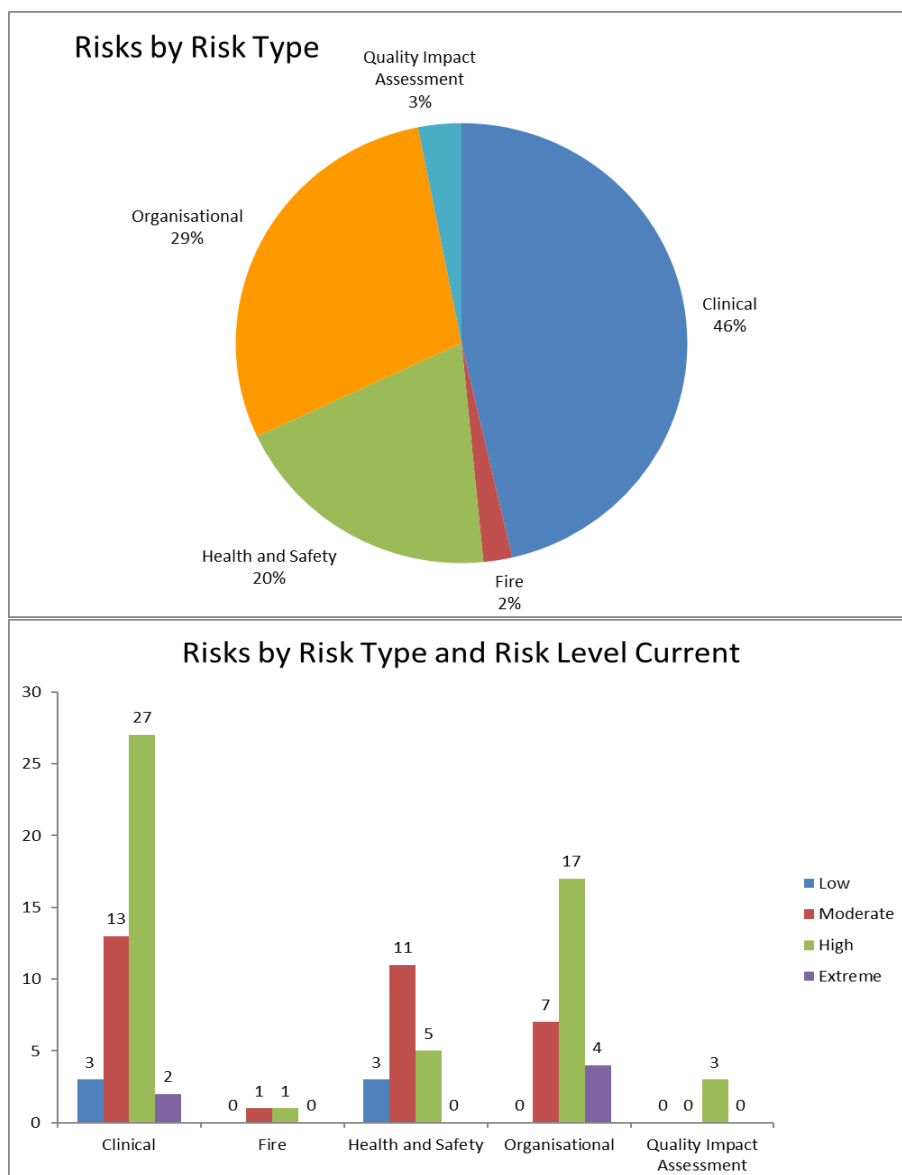
Defence Employer Recognition Scheme

- 2.8 The [Defence Employer Recognition Scheme](#) builds on the Armed Forces Covenant and through the bronze, silver and gold awards, identifies employers intent in supporting the defence and armed forces community in their organization.
- 2.9 The Trust has signed the [Armed Forces Covenant](#) and promote roles to be open to reservists, veterans, cadet instructors and their families. We are pleased that we have received the Bronze Award in recognition of our support to the armed forces community.

3 BOARD ASSURANCE FRAMEWORK

- 3.1 The Trust's Board Assurance Framework (BAF) incorporates a live register of the principal risks faced by the Trust in meeting its strategic objectives. It provides the Trust with a clear and comprehensive method of:
- ❖ describing the main risks to achieving the organisation's strategic objectives,
 - ❖ describing the controls, assurance and oversight of these risks and
 - ❖ identifying any gaps in controls and assurance
- 3.2 On 3rd January 2023 there were eleven strategic risks on the Board Assurance as shown in the dashboard in Annex A.
- 3.3 The Board Assurance Framework and strategic risks were last reviewed by the Audit Committee on 16th January 2023 to ensure they were aligned to 2022-23 Trust strategic objectives.

3.4 The following diagrams show the types of all risks on the risk register and the severity of those risks.



- 3.5 All risks are aligned to the Board or sub committees for oversight and reviewed at least annually.
- 3.6 All operational risks scoring 12 and above are reviewed and discussed each time a relevant sub- committee meets and anything needing Board discussion is escalated through the Integrated Governance Report (IGR)
- 3.7 The Board each time it meets in public, receives assurance and detail on the management of operational risks scoring 15 and above. And the detail behind the strategic risks facing the Trust (irrespective of their scoring) – all contained with the integrated governance report.
- 3.8 All new risks are reviewed by senior leaders monthly at the wider executive team together with high scoring and high impact risks. The monthly meetings also take a thematic review of all risks within a particular division. This has led to greater scrutiny of risks and greater consistency in articulation of risks throughout the Trust.

- 3.9 The assurance on how risks are identified and managed and how the impact is mitigated are integral to the Trust Board's approach to risk management and performance. Reports to the Board and all sub committees including the integrated governance report identify all risks associated with the reports.

4. FREEDOM TO SPEAK UP POLICY (FTSU)

- 4.1 In June 2022, NHS England published a revised national freedom to speak up policy which provides the minimum standard for local freedom to speak up policies across the NHS. The policy is designed to be inclusive and support resolution by managers wherever possible.
- 4.2 All NHS Trusts and Foundation Trust boards have been asked to update their local policy to reflect the new national policy by the end of January 2024. The Trust has revised its FTSU policy to align it with the national policy by further:
- Clarifying options in terms of who staff can speak up to both internally and externally.
 - Outlining other existing processes and local policies linked to speaking up, for example local policies relating to patient experience and human resources.
 - Providing details for Trust speak up leads.
 - Explaining what would happen when a person speaks up (Appendix A within the policy)
- 4.3 The revised Freedom to Speak Up Policy, which has been shared and agreed with our staff side colleagues and is attached at Annex B for approval by the Board.

5. COMMUNICATIONS UPDATE

- 5.1 Since the last Board update, the following are just some of the initiatives which have contributed recently to achieving the priorities set out in the Trust's communication strategy.
- 5.2 Embrace digitalisation:
- Digital Platform Project: Content sessions have been set up across our children's services (including clinical, business and corporate support) following the completion of the 'themes of access' report using clinical, business support and website data. In addition, several exciting features have been fast-tracked into v1.0 of the platform, including a login portal which has huge potential for future development.
- 5.3 Social media campaigns have included:
- in Norfolk and Waveney: All Babies Cry, Safer Sleep, 'Let's Get Talking' speech and language webinars, Families Warm and Well with a Trust led multi-faceted split testing Facebook/Instagram ad campaign. #ShareThePolarBear from the Warm and Well Campaign trended with over 78K hashtag views and counting. Promotion of Just One Norfolk with particular focus on Strep A and managing illness and how to access services over the festive period.
 - in Cambridgeshire and Peterborough: refresh of ICON crying babies accessible assets, emotional health and wellbeing spotlight posts (Anger Iceberg, New Year – New Me Culture), Start for Life smoking during pregnancy as a Trust led campaign/asset test, vibrant Trust recruitment posts, promotion of a wide range of digital resources on our services' websites for children, young people and families, with a particular emphasis on common illnesses support and how to access help over the festive period.

- in Bedfordshire and Luton: promotion of our first breastfeeding café in Luton; resources for families with sensory challenges; English for Speakers of Other Languages (ESOL) for Pregnancy 6-week Zoom course (run in collaboration with Flying Start); vibrant recruitment posts; the children and young people's single point of access health hub; ICON all babies cry campaign and how to access services over the festive period.

5.4 Celebrate our achievements (building our reputation/brand)

- Our Children's Epilepsy Pilot in Luton has been named the winner of the 'Using Data to Connect Services Award' at the Health Service Journal (HSJ) Awards 2022.
- The Mayor of King's Lynn visited our Shakespeare Barn Covid vaccination centre to pay tribute to the hard work and dedication of NHS staff and volunteers involved in the Covid-19 vaccine rollout.
- Bedfordshire Children's Community Nurse, Sarah Sharpe presented at Wounds UK Annual Conference 2022 in Harrogate. Sarah has been raising the profile of paediatric pressure ulcer risk assessment using a tool she adapted (with permission) for community use.
- Cambridgeshire Community Paediatric Service – Dr Tamsin Brown published an article 'Santa should phase out coal as punishment in Christmas stockings' in the BMJ (British Medical Journal). It was republished by 12 blogs/media outlets.

5.5 Work collaboratively to improve outcomes

Examples of collaborative projects include:

- Winter campaigns: the Trust's communications team is engaged with all three systems in developing campaigns to promote messages to make best use of NHS services and resources (i.e. #HelpUsHelpYou #KeepAntibioticsWorking #MouthCancerAction #CaringIsNotSharing #GroupASTrep #ScarletFever and Cambridgeshire's and Peterborough's #WellTogetherThisWinter and Norfolk's #WarmAndWell, including the Covid 19/flu vaccination programme for eligible people (#GetBoosted), and recruitment campaigns to support staffing levels over winter (#WeAreTheNHS).
- Shared Care Records: systems are developing communication resources to share key messages relating to this project which will enable clinical staff to access patient records from other engaged NHS organisations where this is needed for an individual's clinical care.
- Covid-19 autumn boosters: to promote uptake and protect individuals, families, wider communities and therefore NHS staff/services, in particular promoting last opportunities for people to get their Covid vaccines/boosters before our large-scale vaccination sites closed in December.
- Cambridgeshire and Peterborough: New ICON resource pack developed by the Trust to lead system-wide promotion as a Family Hubs/Start for Life campaign – QI approach being used to help system-wide project. Free to Feed breastfeeding pilot in partnership with South Cambs District council complete with great success. Led 'Digital Discovery' workshop with Family Hub partners to outline the digital offering.
- Collaborative 'Start for Life' pilot work in Wisbech and Peterborough continues with resource and digital development.

- Norfolk and Waveney: recruitment campaign for two new mental health support teams in Great Yarmouth and Broadland; leading delivery of system communication plan for delivery of access and referrals for community child and adolescent mental health services via Just One Norfolk. Warm and Well children's campaign strand - highly successful ad campaign with Norfolk and Waveney ICB. Growing Just One development of staff communications with partners to develop elevator pitch.
- Update circulated to staff across multiple partners on the North Cambs Hospital redevelopment, as work has started to prepare for the mobile scanners for the Community Diagnostic Centre.
- The Covid vaccination staff based at the Grafton Centre created a British Sign Language video in collaboration with Cambridgeshire Deaf Association, which explains who's eligible and how people can access their Covid Vaccination or autumn booster in Cambridgeshire and Peterborough, and also answers some frequently asked questions.
- Responding to referrer feedback to make changes to the referral portal for community paediatrics in Bedfordshire and Luton to make it more effective.
- Promoting our new Bedfordshire and Luton adults working together group, which has successfully recruited four members so far.

5.6 Create a healthy culture

Recent campaigns included:

- challenges faced by Trust staff who have disabilities or long-term conditions. This included promotion of our My CCS Employment (Adjustments) Passport and Long-Term Conditions and Disability (LTC&D) Network. We also shared an article written by NHS Disabled Directors Network Member and Non-Executive Director Fazilet Hadi explaining why she's passionate about equality and believes the NHS hugely benefits from a diverse leadership #UKDHM.
- Promotion of both the flu and Covid-19 autumn booster staff vaccination programmes.
- Celebration of our long service awards for our Adults, Ambulatory, Corporate and Children and Young People's Health Services across Bedfordshire, Cambridgeshire, Milton Keynes, Norfolk and Waveney, Peterborough and Suffolk. Collectively we had 94 members of staff celebrating 2,535 years of NHS service! #GoTeamCCS
- We continue to share #ThankfulThursday social media posts across our services celebrating the many compliments received from service users.
- The most recent Shine a Light award winners were Lucy Colley, FFT administrator at Luton Treatment Centre, who was nominated by Sarah Munroe for acting on a patient expressing low mood during a telephone call to gain patient feedback. The proactiveness meant that appropriate help and support was offered. Our second winners were Chris Morris and Pete Reeve, leaders in our Luton adult services, who stepped up to help with gritting and digging out the car park at the Luton Treatment Centre so that patients were able to park and enter the building safely.
- The latest recipient of our quarterly Valuing our volunteers award was Leah Mbaje. Leah's a Diabetes Education Volunteer, based at The Poynt in Luton and her nomination by Shaheen Haider, supported by Fay Westwood, was for being "a

fantastic addition to the Integrated Community Diabetes Service". The service estimates that 30% of the patients Leah contacts agree to book onto a diabetes education session where they receive education and resources to help manage their condition #CCSVolunteers.

- Regular communication with staff about industrial action in response to the two days of strike action by RCN Members. This included sharing our dedicated industrial action intranet page (including our Q&As), reminding staff that support is available on our health and wellbeing pages, and that we can all support each other by continuing to treat colleagues with respect and compassion in the coming weeks and months.
- Promoting the National Quarterly Pulse Survey, which provides an additional and more frequent opportunity to hear from staff, to help understand their experience and support decision making and actions for improvement, with the ambition of making the NHS the best place to work.