
TRUST BOARD

Title:	Chief Executive Report
Action:	FOR DISCUSSION/NOTING
Meeting:	14 November 2018

Purpose:

The report has a summary of the Care Quality Commission national report into the state of the health and social care sectors and areas within the recent Budget that impact on the healthcare sector.

The major strategic risks facing the organisation are detailed within section three as well as high scoring new risks that have been recorded since the last public Board meeting. The Board are not asked for any new decisions or actions concerning these risk and they are/will be monitored through appropriate managerial routes and Board sub0-coimmittees.

Recommendation:

Agree to sign up to the “Living well” concordat for Cambridgeshire and Peterborough

	Name	Title
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1. LOCAL, REGIONAL AND NATIONAL ISSUES

1.1 The **Care Quality Commission** published its annual review of the state of health care and adult social care for 2017/18. It found that overall the quality of health and care has been maintained or improved. The Care Quality Commission has identified five factors that affect the sustainability of good care for people: access to care and support; the quality of care services; the workforce available to deliver that care; the capacity of providers to meet demand and the funding and commissioning of services. The Care Quality Commission recommends that government reforms funding to incentivise stronger local collaboration and partnership working.

The key messages in the report centre on:

- This year's State of Care builds on the CQC's July 2018 report about care in local areas based on reviews of older people's experience of moving between the different health and care services they need. Overall, the CQC found that the quality of health and social care has been largely maintained and in some cases improved, despite continued demand and funding pressures and significant workforce shortages. However, there is growing 'integration lottery', with quality and timely access increasingly dependent on how well local systems work together.
- The continued fragility of the adult social care market is impeding effective collaboration between community based health and social care services in many local areas. With rising unmet need for older people's care, the government's longer term funding settlement for the NHS risks being undermined by the lack of a long term funding solution for social care. The CQC recommends that government explore funding based solutions to incentivise stronger collaboration, such as pooled resources to fund improvements in technology for more joined up care and to help prevent people from needing hospital admission.
- The proportion of acute hospitals and mental health services rated good or outstanding has improved slightly compared with 2016 / 2017; the proportion rated inadequate remains unchanged. NHS community services remain good and the quality of care delivered by NHS ambulance services, which is heavily shaped by the system pressures, remains unchanged. However, not all providers are responding to the demand pressures in a way that effectively protects care quality and safety remains a significant concerns in most services.
- A complex commissioning environment makes co-ordinating local care systems difficult. Sustainable funding reform that addresses social care and the NHS together is needed, to remove the barriers that prevent social care and NHS commissioners from pooling their resources and using their budgets flexibly to best meet the needs of their local populations.

1.2 The Government has published the details in the last **budget** before the country leaves the European Union and 2019 spending review. The details for the health care sector were broadly in line with information already announced or committed and revolve around:

- The new detail on the future efficiency requirement for the NHS. It says the NHS long term plan must set out how the NHS will achieve cash-releasing productivity growth of at least 1.1% a year, as one of the government's five financial tests for the plan.
- The five financial tests, which were first outlined in June, are restated in full. The NHS long term plan must set out how the NHS will:
 - return to financial balance
 - achieve cash-releasing productivity growth of at least 1.1% a year (with a final number to be confirmed in the plan), with all savings reinvested in frontline care
 - reduce the growth in demand for care through better integration and prevention (with

- a final number to be confirmed in the plan)
 - reduce variation across the health system, improving providers' financial and operational performance
 - make better use of capital investment and its existing assets to drive transformation.
- As also set out in June 2018, the government will consider proposals from the NHS for a multi-year capital plan to support transformation, and a multi-year funding plan for clinical training places.
 - The government will also ensure that public health services help people live longer healthier lives. Budgets in these areas will be confirmed at Spending Review 2019.
 - In addition, the government has made provision for NHS pension costs until 2023-24, which will be adjusted in line with the confirmed Superannuation Contributions Adjusted for Past Experience (SCAPE) rate change.

When more details emerge on issues affecting the Trust, such as capital and public health budgets, I will brief the Board.

2. TRUST ISSUES

- 2.1 In line with the Well Led Improvement Plan, the Executive Team is now working on developing a Trustwide integrated performance report. The aim is to introduce the new integrated report from January 2019. It will build on the information already discussed at clinical operation boards and ensure trust wide information is triangulated for quality, workforce, performance and financial issues in one format.
- 2.2 Led by the Cambridgeshire and Peterborough Health and Well Being Boards and the local healthy living partnerships (based around District Council boundaries) a **“living well” concordat** has been developed. Each organisation is being asked to sign up to the principles. The concordat is totally in line with how the Trust operates, our values and objectives and something we should whole heartedly support. The collaboration is most likely to be focused around and within our children services. The simple one page concordat is appended in **Annex A**.

3. BOARD ASSURANCE FRAMEWORK

- 3.1 The recommendation from the Deloitte Well Led Review for the Wider Executive meeting to conduct regular reviews of risk has now been implemented. The monthly report covers new risks added in the last month, all risks scoring 15 or above and a thematic analysis or risks relating to a specific service. The Audit committee was briefed on the new approach in October 2018.
- 3.2 There are currently 6 risks on the strategic risk register concerning Board level strategic issues. The details of the strategic risks and mitigation in place are contained within **Annex B** attached.
- 3.3 There were no new strategic risks added to the risk register since the last Board meeting.
- 3.4 The highest rated strategic risks facing the organisation are:
- **Risk 2776** - There is a risk that the organisation, services and staff face instability as NHS Improvement resorts to structural changes in the NHS Provider sector to drive greater provider efficiency.
 - **Risk 2748** - Due to the increased number of services facing workforce challenges there is a risk that the Trust is unable to maintain high quality care across the organisation.

- **Risk 2610** - There is a risk that the Trust doesn't fully identify plans to recurrently deliver the £3m savings target for 2018/19, and the result would be that this could contribute to the Trust being financially unsustainable in the future.

3.5 **Annex C** shows an overview of all open risks across the Trust. The Trust currently has 190 open risks across all services as at 02 November 2018.

There are currently 6 risks scoring 15 or above:

- **Risk 2773** – There is a risk that the special schools nursing service (SSNS) in Bedfordshire will be unable to deliver the commissioned service due to reduced staffing.
Update: The risk was discussed at the October 2018 Clinical Operational Board.
- **Risk 2777** – There is a risk that 0-19 Single point of Access in Bedfordshire in its current form will impact negatively on 0-19 performance and the ability to achieve key performance indicators.
Update: The risk was discussed at the October 2018 Clinical Operational Board.
- **Risk 2830** – There is a risk that children who require Community Paediatric assessment diagnosis and care are waiting for this care to be initiated for an extended period of time. During this time there is a risk that the child requires interventions including those in Education which they do not receive in a timely way. This can negatively impact on their developmental outcomes.
Update: The risk was discussed at the October 2018 Clinical Operational Board.
- **Risk 2834** – There is a risk that the capacity within the Cambridgeshire Children's Safeguarding team is not sufficient to support staff in their safeguarding responsibilities.
Update: The risk was discussed at the October 2018 Clinical Operational Board. The committee had conducted a detailed review of the risk and agreed to maintain the score.
- **Risk 2850** – There is a risk that the staffing required may not be available to deliver the Luton Enhanced Model of Care.
Update: This is a new added in October 2018. It has not yet been discussed at a Clinical Operational Board. The senior management team in Luton are aware of the risk and closely monitoring it.
- **Risk 2872** – There is a risk that there could be a shortage of clinical staff to implement the E-Rostering and Auto-Planner systems in Luton due to capacity of teams to deliver patient care and other change projects.
Update: This is a new added in October 2018. It has not yet been discussed at Strategic Change Board. The programme leads are aware of the risk and closely monitoring it.

The Board receives assurance via the Clinical Operational Boards and other subcommittees that any risk scoring 12 or higher is being managed appropriately and that a mitigation plan is in place and working. The new risks added will all be scrutinised and discussed at the relevant Clinical Operational Boards as appropriate.

4. COMMUNICATION ACTIVITY IN THE PAST MONTH

4.1 Communications/promotional activities since last Board meeting

Trust-wide initiatives

- A presentation pack was developed to support staff who met with members of the Health Service Journal Trust of the Year award panel, together with a presentation for our CEO to share with the panel. The Awards event is being held on 21 November when we will find out if we are winners of this award.
- A number of engagement events have taken place with staff from the Queen Elizabeth Hospital, Kings Lynn and Cambridgeshire and Peterborough NHS Foundation Trust to progress ideas for relocating services on the North Cambs Hospital site as part of our site redevelopment plans.
- The 2017/18 annual report was launched at the Trust's AGM with slides identifying key achievements during the previous 12 months which were also shared with stakeholders and staff. A Long Service Celebration event took place in September 2018.
- Promotion of the national staff survey and the annual flu vaccination campaign is taking place through a variety of channels with positive uptake to date.
- The latest edition of our Live Life Well newsletter was developed and disseminated
- Promotion via social media of various service initiatives/achievements, recruitment opportunities, Shine a Light award winners, national and local campaigns.

Ambulatory services

- The opening of the fantastic newly refurbished accommodation for DynamicHealth Services on the North Cambs Hospital site was promoted widely via the local media and social media, with flyers produced to promote the move and leaflets updated. Friends of North Cambs Hospital were invited to tour the new accommodation before it opened.
- Following the successful submission of a case study reflecting the achievements of the DynamicHealth service redesign, the service was selected to showcase its achievements at the NHS Providers Annual Conference showcase event in October.
- Promotional material was produced for the DynamicHealth Service for use at the Chartered Society of Physiotherapists Annual Conference.
- Filming has been undertaken of various clinical activities, and is now in the process of being uploaded to the GP education area on the DynamicHealth website.
- Arrangements are underway for the official opening of the Dunstable priority iCaSH hub in Luton on 9 November.
- A social media plan has been implemented to promote widely the iCaSH services delivered across our localities.
- A new area of the Trust's Let's Collaborate platform was created to support AHP engagement across the Trust.

Luton and Bedfordshire

- The first monthly staff newsletter promoting the work of the CCS/ELFT Joint Partnership Board was designed and disseminated to Bedfordshire staff. The second newsletter is currently being drafted.
- Promotional literature to share changes relating to times and locations of the Healthy Child Programme Pop-ins held in Children's Centres across the Bedfordshire locality were produced

- Initial discussions are underway about improving website information for Bedfordshire children's services.
- A training session was delivered on 'using social media' to a number of champions in Bedfordshire, with a second session planned.
- Work is underway to update a range of leaflets within the Bedfordshire Speech and Language Therapy Services, and also the joint Bedfordshire stroke service being introduced by CCS/Luton & Dunstable Hospital.
- A film has been created of staff from the Luton locality, as well as Luton Borough Council and a GP rep sharing their understanding and benefits of the Enhanced Collaborative Models of Care. Clips will be used to promote messages externally via social media.
- We are supporting the Luton patient experience team to design patient surveys for the district nursing and children's epilepsy service, as well as a staff and stakeholder survey relating to the Enhanced Collaborative Models of Care.
- Three sets of Q&A have been disseminated to Luton adult staff to support understanding of the Enhanced Collaborative Models of Care programme.
- A twitter site has been created for the Luton children and adult services and is now being actively utilised with planned messages being scheduled to wider the audience reached.
- A monthly Watch This Space newsletter for staff across the Luton children and adult services is produced and disseminated, with staff proactively contributing to this on a regular basis.
- Communication collateral has been produced to support the launch of ChatHealth in Luton in the New Year.

Norfolk and Cambridgeshire Children & Young People's Services

- The formal opening of the Peacock Centre took place on 23 October and we were privileged that Louis Rolfe, MBE and Paralympian, together with Jasper Grooms and Jacob Ward (service users), undertook the ribbon cutting. The opening was attended by approximately 100 staff, children and families, and stakeholders and was a fantastic opportunity to celebrate the amazing work of these services. The opening was covered by the Cambridge News and via social media.
- A joint newsletter has been disseminated to staff updating on progress with joint work underway between CCS and CPFT to deliver an equitable Healthy Child Programme service across Cambridgeshire and Peterborough.
- A major programme of work is underway to support the development and 'soft launch' of the Just One Norfolk website portal including creation of films, infographics, animations, photography. The formal launch is scheduled for November.
- Norfolk Children & Young People's Services has launched a Just1Norfolk health passport app for 16-19 year olds.
- Plans are underway to use Self-Care Week 12-18 November to promote a range of services and activities including a 6-8 week campaign to promote the Just One Norfolk digital portal, with each day focussing on one section of the portal and a social media campaign to mirror these themes.

- A social media plan is being implemented to promote our Norfolk Healthy Child Programme Services.
- Promotional material was produced to support the move of the Suffolk school immunisations services to its new base.

Attachments:

Annex A – Living Well concordat – Cambridgeshire and Peterborough

Annex B – Board Assurance Framework: Strategic Risk Register

Annex C – Overview of all open risks across the Trust