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## TRUST BOARD

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| Title:   | <b>Chief Executive and Chairs report</b> |
| Action:  | <b>FOR DISCUSSION/NOTING</b>             |
| Meeting: | <b>12 September 2018</b>                 |

### **Purpose:**

The brief report outlines the development of a new NHS plan; plans to ensure that NHS Trusts are ready for any 'no deal' scenario on 1<sup>st</sup> April 2019 and the key strategic risks affecting the organisation.

The Trust is pleased to have been short listed for the Provider of the year Health Service Journal award and to have hosted Stephen Barclay MP, Minister of State from the department of Health and Social Care.

### **Recommendation:**

The Board is asked to note the change in the format for the 'risk on a page' report.

|                    | <b>Name</b>  | <b>Title</b>                               |
|--------------------|--------------|--|
| Authors:           | Taff Gidi    | Assistant Director of Corporate Governance |
|                    | Karen Mason  | Head of Communications                     |
| Executive sponsor: | Matthew Winn | Chief Executive                            |



## 1. LOCAL, REGIONAL AND NATIONAL ISSUES

- 1.1 The Secretary of State has written to all NHS Organisation concerning the Government's preparations for a March 2019 'no deal' scenario. The letter is included in Annex A and is self-explanatory. The main action for the Trust is to review any vulnerable areas that are linked to a joint approach with European institutions/regulatory frameworks. Dr David Vickers (Medical Director) will lead the work around the access and availability of drugs. The Director of Governance will present an updated business continuity plans in line with the NHS England EPRR Core Standards and the NHS England EPRR Annual Assurance process, for areas we view as at risk.
- 1.2 NHS Improvement and England have started the detailed work to produce a new NHS plan to provide the framework for the next five years funding settlement to the NHS. The structure of the development of the plan is:

| Life course programmes  | Clinical priorities  | Enablers  |
|---|--|---|
| <ul style="list-style-type: none"><li>• <b>Prevention and Personal Responsibility</b><br/><i>Duncan Selbie, Dr Neil Churchill, Dr Vin Diwaker, Dr Amanda Doyle</i></li><li>• <b>Healthy Childhood and Maternal Health</b><br/><i>Sarah-Jane Marsh, Professor Russell Viner, Professor Jacqueline Dunkley-Bent, Dr Matthew Jolly</i></li><li>• <b>Integrated and Personalised Care for People with Long Term Conditions and the Frail Elderly (including Dementia)</b><br/><i>Caroline Abrahams, Julian Hartley, Martin Vernon, Matthew Winn</i></li></ul> | <ul style="list-style-type: none"><li>• <b>Cancer</b><br/><i>Cally Palmer, Lynda Thomas, Paula Head</i></li><li>• <b>Cardiovascular and respiratory</b><br/><i>Professor Stephen Powis, Professor Mike Morgan, Simon Gillespie, Juliet Bouverie</i></li><li>• <b>Learning Disability and Autism</b><br/><i>Ray James, Dr Jean O'Hara, Rob Webster</i></li><li>• <b>Mental Health</b><br/><i>Claire Murdoch, Paul Farmer, Sheena Cumiskey</i></li></ul> | <ul style="list-style-type: none"><li>• <b>Workforce, Training and Leadership</b><br/><i>Dr Ruth May, Professor Ian Cumming, Jim Mackey, Dr Navina Evans</i></li><li>• <b>Digital and Technology</b><br/><i>Dr Simon Eccles, Sarah Wilkinson, Steve Dunn, Matthew Swindells</i></li><li>• <b>Primary Care</b><br/><i>Dominic Hardy, Dr Amanda Doyle, Dr Nikita Kanani, Professor Helen Stokes-Lampard</i></li><li>• <b>Research and Innovation</b><br/><i>Dr Sam Roberts, Professor Tony Young, Roland Sinker, Professor Dame Sue Hill</i></li><li>• <b>Clinical Review of Standards</b><br/><i>Professor Stephen Powis, Professor Carrie MacEwan, Imelda Redmond</i></li><li>• <b>System Architecture</b><br/><i>Ben Dyson, Ian Dodge, Matthew Swindells</i></li><li>• <b>Engagement</b><br/><i>Simon Enright, Sian Jarvis, Imelda Redmond, Rachel Power</i></li></ul> |

I am one of the NHS Chief Executives on the Integrated care work stream and confident that the work the Trust is undertaking in Luton, is strategically at the centre of national developments. The Trust will ensure the early year's integrated approach is fully being reflected in the Healthy Childhood and Maternal health work stream. As the working groups produce contract and the strategy develops, I will further brief the Board.

## 2. TRUST ISSUES

- 2.1 The Trust is proud to have been shortlisted for the Health Service Journal Trust of the year national award. Over the next weeks, we will host members of the judging panel to a site visit and will present to the whole panel in London.
- 2.2 With partners from Cambridgeshire and Peterborough Clinical Commissioning Group and Cambridgeshire and Peterborough Foundation Trust, we were pleased to host Stephen Barclay MP, Minister of State for the Department of Health and Social Care at North Cambs Community Hospital in Wisbech on the 7<sup>th</sup> August 2018. The Minister of State was able to visit staff in their clinical settings; view the building work being undertaken to provide for a new MSK centre and host a roundtable for staff from across all local NHS organisations.

## 3. BOARD ASSURANCE FRAMEWORK

- 3.1 We continue to make improvements to our risk management processes and reporting. The format for the 'risk on a page' risk report has now been revised to pull additional information from Datix to give the Board more information on risks.

**Recommendation:** The Board is asked to note the change in the format for the 'risk on a page' risk report.

- 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 in July 2018.
- 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 149 open risks across all services as at 04 September 2018.

There are currently 8 risks scoring 15 or above:

- **Risk 2575** – risk due to insufficient capacity within Luton Community Paediatric Service posing risk to patient safety and outcomes. At the time of the Clinical Operational Board in February 2018, the risk score was rated at 12.  
**Update:** The risk was discussed at the August Clinical Operational Board in August 2018. An update is included in the key issues report.
- **Risk 2757** – There is a risk that as the Community Eye Service in Bedfordshire does not have access to S1 they are not aware of changes to children's contact details etc., level of safeguarding risk and family circumstances; this can potentially impact on their care and treatment.

**Update:** The risk was discussed at the August Clinical Operational Board in August 2018. ) This is in the process of being downgraded.

- **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 August Clinical Operational Board in August 2018.
- **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.  
**Update:** The risk was discussed at the August Clinical Operational Board in August 2018.
- **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 August Clinical Operational Board in August 2018.
- **Risk 2802** – There is a risk that the application of TUPE to the exit of the Serco contract will be notified late in the process so costs cannot be planned by the new providers or because of the nature of the new services, TUPE will not apply and Serco may attempt to charge current shared services partners for redundancy costs.  
**Update:** This is a new risk added in August 2018 which will be reviewed by the Deputy Chief Executive.
- **Risk 2802** – There is a risk that the current suppliers will not work effectively with the Trust through the shared services procurement.  
**Update:** This is a new risk added in August 2018 which will be reviewed by the Deputy Chief Executive.
- **Risk 2807** – There is a risk that costs could be doubled during transition and mobilisation as a result of procuring the new shared services contracts early to work parallel with the existing contract to enable a smooth transition.  
**Update:** This is a new risk added in August 2018 which will be reviewed by the Deputy Chief Executive.

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 A full summary of communication activity is set out in the 'Strategy Implementation Progress Report' being presented to the public board meeting today.

#### **Attachments:**

Annex A – Secretary of state letter to NHS Trusts on 'Brexit'

Annex B – Board Assurance Framework: Strategic Risk Register

Annex C – Overview of all open risks across the Trust