
TRUST BOARD

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| Title: | Chief Executive's Report |
| Action: | FOR DISCUSSION/NOTING |
| Meeting: | 13 March 2019 |

Purpose:

The report details development in national policy concerning the training of the workforce in digital technologies; development of General Practice and Primary Care Network and changes in personnel for key leadership role sin national organisations.

The risks facing the organisation are largely static, with a new emerging issues in the stability of our data infrastructure, due to national procurement processes.

The final section details the great work to recognise the outstanding services and staff we have across the organisation and celebrate their successes.

Recommendation:

The Board is asked to note the report and agree to the recommendation in section 2.1, to delegate approval of the draft Annual Report to the Trust's Chief Executive and Chair for submission to Auditors. Final approval will take place at the 24 May 2019 Audit Committee.

| | Name | Title |
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| | Karen Mason | Head of Communications |
| | Matthew Winn | Chief Executive |
| Executive sponsor: | Matthew Winn | Chief Executive |

1. LOCAL, REGIONAL AND NATIONAL ISSUES

1.1 The **Topol review** has published its final report on preparing the NHS workforce to deliver digital care in the future. The recommendations of the review were:

- The NHS must focus on building a digitally ready workforce that is fully engaged and has the skills and confidence to adopt new technologies and deploy them in the delivery of day to day care across the health system. This will be achieved through training programmes, continued professional development (CPD), sabbaticals and secondments, as well as top-down cultural change to create a culture of learning and development
- Digital medicine will require leadership to direct the agenda, including board level roles and senior roles to advise boards on digital technology. Board level skills in data provenance, curation and governance will be necessary to support organisations to safely and effectively build digital capability, and make informed investment decisions.
- The NHS will need to build specialist capacity to commission and evaluate health technologies and make informed investment decisions. It should collaborate with academia and industry to create a pipeline of specialist staff including robotics engineers, data scientists and artificial intelligence (AI) specialists moving into the NHS.
- Regulators, academic institutions and professional bodies will be encouraged to identify the skills, behaviours and values required to build a digitally enabled workforce, and to develop curricula and training programmes accordingly.

Anita Pisani will include the themes in our annual workforce reviews and incorporate any developments that are relevant to our portfolio as they emerge.

1.2 NHS England has published **A five-year framework for GP contract reform to implement *The NHS Long Term Plan***. This important document specifies how General Practices and the wider Primary care sector will develop over the next five years, with the certainty of an agreed funded settlement.

The specifics of the agreements include:

- Primary care networks (PCNs) formed of practices covering populations of 20,000-50,000 patients will cover the whole of England and work closely with integrated care systems (ICSs) as a formal basis for collaborating with other system partners including community services
- Initiatives such as the enhanced health in care homes scheme, rapid-response community reablement services, and anticipatory care services, supported by the introduction of an Investment and Impact Fund (IIF), will be implemented by local systems led by PCNs in collaboration with community providers.
- In response to workforce pressures in primary care, PCNs will form multidisciplinary teams comprising of clinical pharmacists, physician associates, first contact physiotherapists, social prescribing link workers and first contact community paramedics. These roles will support GPs and nurses in general practice and play a key role in providing joined up care, working in ICSs to streamline care pathways.
- There is flexibility for networks to decide who employs the staff associated with the new network contract, including trusts, GP federations or a single lead provider.
- A new state-backed indemnity scheme will introduce a number of measures to relieve the impact of spiralling cost of indemnity cover on out-of-hours staffing and GP recruitment and retention.

- A refresh to the Quality Outcomes Framework (QOF) will retire ‘low value’ indicators in favour of new indicators which reflect the changing evidence-base and up-to-date clinical practice.
- A raft of changes to the use of technology in general practice, including IT infrastructure reform, the introduction of patients’ right to access records and correspondence online as well as access GP appointments via video link, and an increased focus on anticipatory care and analytics supported by technology.

This approach will build in the great work already undertaken in Luton with the GP clusters, and as more details are known about implications, we will inform and involve Board members.

- 1.3 The New NHS England/NHS Improvement regional Director for the East of England, Anne Radmore, will start in her new role on the 1st April 2019. The regional role will be an important leader in developing healthcare in the region and accountable for providers and commissioners alike. We look forward to working with Anne and her team as she settles into the East of England.
- 1.4 NHS England and NHS Improvement have announced that they are going to accelerate the merger (within statutory boundaries) of the two organisations. The most visible evidence of that merger is that Simon Stevens will (in the coming months) take over the leadership of NHS Improvement in addition to his existing responsibilities. The two organisations will increasingly share directors and a common infrastructure. As a consequence of this change, Ian Dalton (current CEO of NHS Improvement) will be standing down.

2. TRUST ISSUES

- 2.1 Production of this year’s **Annual Report 2018/19** has commenced and the timescale for completion is set out below

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| Deadline for draft submissions from services/leads to the communications team (and re-drafting) | Monday 18 March |
| Initial draft to Board Members | Monday 25 March |
| Deadline for comments back from Board members | Friday 12 April |
| Final version to CEO/Chair for Board delegated approval | Tuesday 23 April |
| Submit to Auditors | Tuesday 30 April |
| Auditors review report; comms team to make changes in response to Auditor feedback | By 13 May |
| Papers go out for Audit Committee | Wednesday 15 May |
| May Audit Committee ((no changes to text after this date other than addition of year end information) | Friday 24 May |

Action: The Board is asked to delegate approval of the draft Annual Report to the Trust’s Chief Executive and Chair for submission to Auditors. Final approval will take place at the 24 May 2019 Audit Committee.

3. BOARD ASSURANCE FRAMEWORK

- 3.1 There are currently 8 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 A** attached.

3.2 **Risk 2940** - There was 1 new strategic risk added to the risk register since the last Board meeting relating to delays in HSCN procurement and deployment due to issues with BT, the telecoms provider. The risk is currently scored at 9. This is also included in **Annex A**.

3.3 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 2897** - There is a risk that the UK leaves the EU with no agreed deal or with a limited deal resulting in disruption to and delays in imports, fuel shortages, travel disruption and food shortage.
- **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.

3.4 **Annex B** shows an overview of all open risks across the Trust. The Trust currently has 180 open risks across all services as at 05 March 2019.

There are currently 3 risks scoring 15 or above:

- **Risk 2919** – There is a risk that children with community nursing needs may not be supported due to current Bedfordshire Children's Community Nursing (CCN) vacancies and transformation of the service.

Update: The active caseload for the service has been mapped, assessed for clinical prioritisation and continues to be monitored closely. Interim arrangements for use of bank staff are in place. Recruitment for substantive staff is in progress. No action required from the Board at this time.

- **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: Interim arrangements in place continue to provide sufficient mitigation for the risk. Recruitment to the Named Nurse post in December 2018 was unsuccessful. The service is now out to recruitment again for the same post. No action required from the Board at this time.

- **Risk 2850** – There is a risk that the staffing required may not be available to deliver the Luton Enhanced Model of Care.

Update: A workforce planning group meets regularly to focus on addressing recruitment in Luton Adults to support this programme of works. No action required from the Board at this time.

3.5 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 committee as appropriate.

3.6 Learning from the Wider Executive Team's monthly review of risks continues to be implemented to support continuous improvement in the Trust's risk management systems and processes.

4. COMMUNICATION ACTIVITY IN THE PAST MONTH

4.1 Promotional Activities

Our continued focus on raising awareness at a regional and national level of the great work our services are doing continues to bear fruit. Below is a summary of activities over the last two months:

Awards

- **Leading Healthcare Awards:** Just One Norfolk was awarded 'Highly Commended' in the Innovation of the Year category. The Luton GP Liaison Service won the Staff and Patient Experience category and was 'Highly Commended' in the Improving Outcomes category.
- **Public Engagement Network National Awards (PENNA):** The Cambridge Community Nursing Service was shortlisted in the Engaging and Championing the Public, and Communicating Effectively with Patients and Families categories. Winners will be announced on 20 March 2019
- **RCNi Awards:** Luton Children's Epilepsy Team and the adult Integrated Discharge Team have been entered into the Innovation in Your Specialty Award category. Norfolk Just One Number has been submitted in the Child Health Award category and the Cambridge Community Nursing Service into the Promoting Continence Award. The shortlist will be published in April; and winners will be announced on 3 July.
- **Public Sector Paperless Awards:** Luton Children's Epilepsy Team has been nominated in the Best Use of a Digital Solution category. The shortlist will be announced on 15 April and winners on 11 July.
- **Student Nursing Times Awards:** our Cambridgeshire Community Nursing team has been shortlisted in the Community Placement of the Year category. Winners will be announced on 26 April.
- **Specialist Community Public Health Nurses (SCPHN) Student Award 2018-2019.** Victoria Fenton, Cambridgeshire School Nurse won this award.
- **Advancing Healthcare Awards:** The Bedfordshire neuro rehabilitation team has been shortlisted for the Chroma award for realising potential through creativity. The celebration lunch is on 12 April.
- **Healthcare People Management Association Awards:** Three submissions have been entered (Staff Wellbeing; Education, Development and Learning; and Smarter Working categories). Winners to be announced on 6 June.

4.2 Publications/Media coverage

- Two articles from our DynamicHealth service have been published in the Chartered Society of Physiotherapy Frontline professional journal. The articles covered sharing learning from the successful redesign programme. Dr Richard Cooper, former Non Executive Director, wrote an article on the same redesign programme which will be published on the NHS Confederation 'Voices' blog site on 11 March
- A case study from the Bedfordshire Food First Team was accepted for inclusion in NHS England/NHS Improvement publication on Enhanced Health in Care Homes. Publication is expected April 2019

- BBC Look East covered an innovative hearing set developed by Dr Tamsin Brown, Consultant Community Paediatrician which helps children with glue ear avoid developmental delay. An aligned app, developed in partnership with Cambridge Digital Health and Cambridge Hearing Trust was launched on 4 March 2019.

4.3 Conference Speakers/presentations

- Dr Catherine Schunmann, iCaSH Norfolk delivered a talk on 'Do we leave vulnerable patients behind when integrating services?' at the Joint British Association for Sexual Health and HIV (BASSH) and Faculty of Sexual and Reproductive Healthcare (FSRH) Annual Conference
- Becky Grace, trainee Clinical Psychologist with our Bedfordshire Acquired Brain Injury team presented on 'Developing a model of how clinical psychologists make ethical decisions' at The British Psychological Society, Division of Clinical Psychology Annual Conference.
- Prof Barbara Wilson, Oliver Zangwill Centre, gave a keynote speech at the Recol national conference: Growing the new you - Brain injury rehabilitation as a different experience
- Andrew Bateman (as President of the Society for Research in Rehabilitation Network) hosted the Society's Winter 2019 national conference and is delivering a talk entitled 'Making Brain Injury Visible' at the European Neuro Convention in March
- Mike Passfield, Head of iCaSH, was invited to participate in the Health & Social Care Committee Sexual Health Inquiry working group to inform the Committee's inquiry.

Additional highlights include:

- Trust-wide: promoted widely the fantastic results from the annual staff survey widely (internally and externally via multiple channels)
- Trust-wide: social media promotion of a range of service initiatives/achievements, recruitment opportunities, Shine a Light award winners, patient feedback; national campaigns including Children's Mental Health Awareness Week; Cervical Cancer Prevention Week; Eating Disorders Awareness Week
- Norfolk children's services: three simultaneous pop up promotions during National Obesity Awareness Week to launch #NorfolkCan (healthy weight programme) and created promotional materials for a Young Carers Day event to highlight services available. Significant resources continue to be invested in the ongoing development of JustOneNorfolk
- Cambridgeshire children's services: a range of staff briefings have been set up during March to share latest news on the integrated Cambridgeshire and Peterborough Healthy Child Programme service; filming and presentations for various awards as outlined earlier; FAQs and updates for acute staff transferring to North West Anglia NHS Foundation Trust
- Luton services: various internal and external communications to promote understanding of the Enhanced Models of Care; presentation for a range of staff briefings to promote our 'One Service' approach; promotion of ChatHealth text messaging service for young people; development of Baby Feeding Booklet
- Bedfordshire services: communications plan developed to support service redesign, website presence updated, action plan and promotional activities being development for launch of ChatHealth and Parentline in April.

- Ambulatory services: a proactive social media plan to promote widely the iCaSH services; invitations disseminated for the formal opening of refurbished service accommodation at Rowan Lodge, North Cambridgeshire Hospital; planning for a celebration event to mark the 10 year anniversary of our Minor Oral Surgery service; and development of a new website for the DynamicHealth service continues.

Attachments:

Annex a – Board Assurance Framework: Strategic Risk Register

Annex B – Overview of all open risks across the Trust