Agenda Item 6

The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

REPORT TO THE BOARD OF DIRECTORS AND GOVERNORS' COUNCIL (IN PUBLIC)

SUBMITTED BY:	REPORT FOR:		IMPACT:		
Prof. Steve Barnett, Trust Chairman	Decision		High	Med	Low
CONSULTATION:	Information	✓		✓	
	REPORT TYPE:		RELATED WORK:		
	Strategic	✓			
	Operational	✓			
	Governance	✓			

Meeting Date: **01 / 03 October 2019**
Report Title: **Chairman's Report**

Purpose: To keep the Board informed in respect of key external / internal events and activities.

Financial Implications / Efficiency Savings / Quality Improvement:

None as a direct result of this report.

Risk Assessment:

Strategic / External	Operational/ Organisational	Financial	Clinical	Legal/ Regulatory	Reputational / Patient Experience
✓	✓	✓	✓	✓	✓

Recommendations: The Board is invited to consider and comment on the Chairman's Report.

Chairman's Report – September 2019

1 … Very good news, indeed!

My report this month has a largely 'outward-looking' feel to it. That said, however, I must begin my report by sharing my delight in reporting that Caroline Shaw was appointed to the role of CEO, substantively in early September! Caroline has been with us as interim CEO on a secondment from Nottingham University Hospitals since January and I am thrilled that she has made a long-term commitment to the Trust and its improvement journey.

The appointment process was a rigorous one, overseen independently by respected search agents, Harvey Nash and by Ann Radmore, who is NHSE/I Regional Director for the East of England. I am pleased to say that the appointment was endorsed unanimously by our governors attending an extraordinary Council meeting.

Caroline has already had a considerable impact at the Trust since her arrival in early 2019 and I believe that her permanent appointment is great news for patients, our staff, and the Norfolk and Waveney Health System. I am delighted that we have attracted someone of Caroline's calibre to the Trust, and I have every confidence that she will build on the positive changes she has been leading over the last eight months.. Since Caroline's arrival we have seen much strengthened staff engagement, more visible leadership and noticeable improvements to patient safety, financial performance and clinical and corporate governance, as well as more effective working relationships with our system partners.

… and it that wasn't enough executive good news for one month, I'm also delighted that Frankie Swords was also appointed as Medical Director substantively in September.

In her time with the Trust as Interim Medical Director, Frankie has already made a big impact and is driving us to be a clinically-led organisation. Frankie has the broad respect of her colleagues within the healthcare system, and we are very lucky to have her.

Our hospital needs stability, which these appointments and wider changes to the leadership and Board will very soon deliver. We are absolutely determined to get this right for our patients, and I am confident that through all of the changes we are making, and with the determination from our staff across the Trust, there is a bright future ahead.

2 An outward-looking perspective

2a CCG Developments and Board to Board

I reported last month on the development of proposals to merge the five clinical commissioning groups in Norfolk and Waveney. Melanie Craig was appointed as the single Chief Officer for the five commissioning groups in April 2019, in addition to her Executive Lead role for the Norfolk and Waveney STP.

All five CCG Governing Bodies will receive a recommendation at their meetings in public in September to support a merger and instruct officers to make the formal application to NHS England. This follows a formal vote by GP Practices in Norfolk and Waveney in which 91% voted in favour of the proposed merger. If CCG Governing Bodies support an application to merge the CCGs, NHS England will scrutinise the application and give their response by the end of October.

On 19 September, the Trust's Board met with Melanie and members of the Governing Body of West Norfolk CCG for the first of what has been agreed will become regular Board to Board meetings, going forwards.

The meeting was productive and forward thinking and both the CCG and the Trust were keen to acknowledge improved working relationships between the two partnership health system organisations, at all levels.

We discussed:

- The timetable for and development of plans to consult on and create a single commissioner for Norfolk and Waveney
- The QEH's progress in delivering its quality improvement plans
- Winter planning
- Norfolk Hospitals - Acute Integration and Clinical Strategy development

2b Norfolk and Waveney STP

The Trust continues to work closely with its partners in the STP for the benefit of its patients. Key work underway includes:

- Urology Services – 'Transfer and Transform'. A 'No Change' model has been agreed and patients will see no difference in service delivery as a result of the developments. The new arrangements will secure staffing sustainability and will provide an opportunity for considering improvements to the patient pathway in the future.
- Dermatology – a model (proposed by one of our own consultants!) for improvements in the delivery of Dermatology services is being discussed by the three Norfolk acute hospitals
- A review of how Vascular services are delivered reported in August. The recommendation of the review is for the status quo to be maintained, with additional governance and oversight and a further review at a later date
- A Clinical Strategy across the three Norfolk Acute Trusts is developing well with good clinical engagement

- The plans for moving to a common Electronic Patient Record (EPR) system across the STP are gathering momentum. The QEH hosted an EPR Provider Showcase event on 12 September, which was very well attended by extremely positive and enthusiastic stakeholders. Those who have a long-held interest in the NHS broadly and the QEH specifically, will know that a good EPR has been the holy grail in the effective processing of patient records for a very long time and these recent developments are very exciting!

2c The NHS Oversight Framework for 2019/20

I have reported on two aspects of closer system-wide working in my report this month. It is clear that our regulators are also developing their regulation and oversight systems and processes to support effective system-wide working.

The NHS Oversight Framework for 2019/20 has replaced the NHSI Provider Single Oversight Framework.

https://improvement.nhs.uk/resources/nhs-oversight-framework-201920/ - link to the full framework.

As NHSE/I align their operating models to support system working, 2019/20 will be a transitional year, with NHSE/I regional teams coming together to support local systems. The existing statutory roles and responsibilities of NHSE/I in relation to providers and commissioners remain unchanged; however, these roles and responsibilities will be carried out by working with and through system leaders where possible.

In line with the move to greater autonomy for better performing local systems, oversight arrangements will reflect both the performance and relative maturity of integrated care systems (ICSs). In 2019/20 it will be for regional teams to determine the level of oversight that best meets their assurance needs.

The specific dataset for 2019/20 broadly reflects existing provider and commissioner oversight and assessment priorities. They are split by their alignment to priority areas in the NHS long term plan:

- New Service Models
- Preventing Ill-Health and Reducing Inequalities
- Quality of Care and Outcomes
- Leadership and Workforce
- Finance and Use of Resources

Where appropriate these will be aggregated across system level and are likely to be complemented by purpose-built system metrics. Four metrics have been added to the set used to identify issues at providers based on questions in the annual NHS Staff Survey covering bullying and harassment, teamwork and inclusivity.

2d The Government's spending plans for 2020/21

The government set out its spending plans for next year, in September. Here is a link to a briefing on the plans, if you would like to see the detail.

https://nhsproviders.org/media/688094/nhs-providers-september-2019-spending-round.pdf

This was a one year 'fast-tracked' spending round with the intention to hold a full spending review in 2020, to set multi-year budgets. The government stated that as departmental capital budgets already exist for 2020/21, the September spending round was focused on revenue spending.

I will concentrate here on the implications for Health and Social Care.

Department of Health and Social Care spending

- The Department of Health and Social Care's (DHSC) resource budget will rise by 3.1% in real terms between 2019/20 and 2020/21.
- The government has reaffirmed a cash increase for the NHS England budget of £33.9bn by 2023/24 compared to 2018/19.

- The DSHC will receive a new multi-year capital settlement in 2020. The government has suggested this will form part of a full spending review which will look at the country's health infrastructure, including the construction of new hospitals, and investment in modern diagnostics and technology. The Spending Review will also specifically acknowledge the need to address 'current critical safety issues in the NHS estate' as part of this capital settlement.
- As announced last month, £1.1bn has been added to DHSC capital spending in 2019/20 for upgrades and maintenance, bringing the capital budget up to £7bn for the current year. Additional funding of £854m will be invested into upgrading facilities and equipment in 20 hospitals over the next several years.
- The anticipated capital spend for 2020/21 is £7.1bn. This represents a slight increase from the 2018 Budget figure of £6.8bn.
- The chancellor announced a 3.4% increase to the Health Education England budget, including an additional £150m for Continuing Professional Development, providing a £1,000 central training budget over three years for each nurse, midwife and allied health professional, as well as increased funding for wider education and training budgets.
- The government is making available £250m of investment in artificial intelligence, including £78m in 2020-21. The intention is to improve early cancer detection and to discover new treatments.

We will of course, as an STP, as a Trust and as a Board be lobbying to attract some of the additional funding to West Norfolk!

3 <u>Closer to Home</u>

3a Annual Members' Meeting

On 12 September, it was my pleasure to chair my first Annual Members' Meeting at the QEH. I was delighted to be able to introduce board members and governors to members in attendance and to be able to answer questions from the public and to say 'thank-you' to some very important supporters of the Trust, notably our governors, our volunteers and our League of Friends.

We reported on last year's performance, which is of course a statutory requirement. However, we were particularly keen to look forward and reaffirm the Board's commitment to improvement, in particular:

- Consistent, compassionate and safe care for our patients
- Well engaged staff
- Delivery of sustainable financial plans

It is my intention that next year's Annual Members' Meeting will be a more celebratory event, showcasing what the Trust does really well.

3b … Remember my earlier reference to winter planning?

I'm keen to use my report this month to remind ourselves that we should do a little 'winter planning' of our own, if we can!

Some forecasters predict that this winter may be a challenging one for flu. If you and members of your family are eligible for the free flu vaccination, I would urge you to have it. The vaccine will be available from October onwards.

Eligible groups for a free flu vaccination are:

- adults 65 and over
- people with certain medical conditions
  (including children in at-risk groups from 6 months of age)
- pregnant women
- children aged 2 and 3 on 31 August 2019
- children in primary school
- frontline health or social care workers

STAY WELL THIS WINTER

4 The Chairman's Diary

My recent diary engagements have included:

Internal

- QEH Visits, inc:
  - Pharmacy
  - The Mortuary
  - Recycling
- CEO and MD Interviews
- Values Awards presentation
- Objective-setting with the non-executive directors
- Lead Governor one-to-one

External

- STP Chairs' Oversight Group meeting, due to be held at the QEH and programmed for 05 September, was cancelled due to a high number of apologies. This was disappointing and I hope that we can hold future meetings here in King's Lynn
- WN CCG and QEH Chairs' meeting
- Meeting with WN Locality Director
- QEH / WN CCG Board to Board
- NHS East of England Chairs' Event