The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

Agenda Item 8

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

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: **04 February 2020**
Report Title: **Chairman's Report**

Purpose: To keep the Board & Governors' Council 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 & Governors' Council are invited to consider and comment on the Chairman's Report.

Chairman's Report – 04 February 2020

This is my first formal report of 2020 and although we have just crept into February, the new year is a time both for reflection and looking forwards.

2019 was clearly a challenging year for the Trust. However, we made significant and positive changes that we can build on in the future. We have addressed a significant proportion of the CQC's concerns, raised at their last inspection, although we appreciate that we have much more yet to do to sustain the improvements. We have undertaken some important estate development works that will improve the patient journey through the hospital and also the experience of patients and visitors to the Trust. We have been building our leadership team throughout 2019 and I am delighted that we now have a fully substantive Board in place. I am confident that by working together with our staff, our governors, our partners and out patients, we can develop the QEH into the excellent hospital we all want it to be and know it can be.

Looking forwards, 2020 is an important year for the Trust as the QEH celebrates its 40th anniversary. You will hear about an exciting programme of events planned for this special year, later on the agenda.

In common with the entire NHS, we are dealing with the challenges of winter and will be for a while yet. We have planned well for winter but inevitably our staff are working extremely hard to cope with the

additional demand and I should like to take this opportunity to thank our frontline and support staff for their hard work and flexibility. However busy we get, our priority must always be to deliver safe care for our patients.

2 An outward-looking perspective

2a The Norfolk and Waveney Health and Care Partnership's draft Five-Year Plan for a Healthier Norfolk and Waveney

The Norfolk and Waveney Health and Care Partnership is developing a five-year plan for improving the health, wellbeing and care of people living locally.

The plan will set out how we will deliver our local priorities in our Joint Health and Wellbeing Strategy, as well as the commitments made in the national NHS Long Term Plan for making health services fit for the future.

Thousands of people have so far contributed to the development of the draft plan. This has been done via:

- Workshops
- Surveys
- A crowdsourcing site
- Meetings with local groups and people who work in health and care

Work is ongoing to finalise the plan, but a draft copy is available to download.

https://www.norfolk.gov.uk/what-we-do-and-how-we-work/policy-performance-and-partnerships/partnerships/health-partnerships/health-and-wellbeing-board/stp-five-year-plan

The Norfolk and Waveney Health and Care Partnership brings together key organisations from across our health and care system to improve the health, wellbeing and care of the million people who live locally. Working with local health and wellbeing boards, district councils, voluntary sector organisations and the public it collectively takes responsibility for delivering national and local priorities across health and social care.

The partnership works at three levels to commission and deliver health and care to our population:

'Neighbourhood' level – 17 Primary Care Networks (PCNs):
These multi-disciplinary teams comprising staff from different organisations will help to ensure people receive more joined-up and coordinated care, near to where they live, from primary and community care.

'Place' level – current five Clinical Commissioning Group (CCG) areas:
Within each CCG area there is a Local Delivery Group (LDG) that brings together a broad group of providers and stakeholders, including the district councils and voluntary sector organisations.

'System' level – across Norfolk and Waveney:
At system-levels – there is a single conversation across the whole of Norfolk and Waveney to try and stop inconsistency and implement large-scale change.

The Goals – what does the partnership want to achieve?

1. To make sure that people can live as healthy a life as possible.

This means preventing avoidable illness and tackling the root causes of poor health. We know the health and wellbeing of people living in some parts of Norfolk and Waveney is poor – how healthy you are should not depend on where you live. This is something the partnership seeks to change.

2. To make sure that you only have to tell your story once.

Too often people have to explain to different health and care professionals what has happened in their lives, why they need help, the health conditions they have and which medication they are on. Services have to work better together.

3. To make Norfolk and Waveney the best place to work in health and care.

Having the best staff, and supporting them to work well together, will improve the working lives of our staff, and mean people get high quality, personalised and compassionate care.

The Plan – five big changes

The Norfolk and Waveney Health and Care Partnership Plan sets out a whole range of actions to help it meet its goals and to address the challenges faced in our area. There are five big changes planned to improve the health and wellbeing of people living locally. These fit neatly with the foundational commitments in the NHS Long Term Plan.

1. **We will help people to make healthier choices to prevent them from getting ill and we will treat and manage illnesses early on**
2. **Our GPs, nurses, social workers, mental health workers and other professionals will work together in teams, in the community, to provide people with more coordinated care**
3. **Our hospitals will work more closely together so people get treated quicker in an emergency and don't have to wait as long for surgery and other planned care**
4. **We will work together to recruit more staff and we'll invest more in the wellbeing and development of our workforce**
5. **New technology will modernise our health and care services, making it quicker and easier for people to get the care they need**

The partnership will continue to talk with local people, organisations and staff to develop and test out ideas as changes are made.

I would urge you to have a look at the full draft plan. It sets out a lot of interesting information about our community and the health and care challenges it faces, together with more detail about the plans in place to deal with those challenges.

2b Norfolk Acute Hospitals

You will recall that I reported recently on our first Board : Board : Board meeting with NNUH and the James Paget Hospitals. I am pleased to say that this was a very successful meeting and we undertook to meet regularly and develop a tripartite agreement committing us all to working collaboratively for the benefit of our patients.

The QEH will host the first meeting of the Acute Trust Board sub group and the agenda will be to:

- Agree the Terms of Reference
- Agree the governance structure and how the group will fit within the wider STP governance framework

I will provide regular updates on how the new group develops and of course, on its programme of business. Any decisions affecting our trust will need to be considered and ratified firstly by the full board of the QEH.

3 Closer to Home

3a Support for the QEH

We were very pleased to welcome our new MP, James Wild, to the Trust. Caroline has featured his visit in her report, so I will not repeat what she has to say here. Suffice it to say that James is very supportive of the Trust and even mentioned the QEH in his maiden speech in Parliament.

We are also grateful to our regulators for their support in securing the recent allocation of central funding for some key projects, including improvements to the ED, the discharge lounge and the same-day surgery care centre.

Support of this kind for the Trust is in part a sign that there is growing confidence about our ability to deliver the improvements to which we have committed.

3b Governors' Council Elections

The ballot for election to our Governors' Council closes on 30 January and we shall have the results from our Returning Officer by the time we meet at the early February Board and Governors' Council meetings, where I will of course provide a verbal update on the outcome of the elections.

There are however, one or two announcements that I can make ahead of the closing of the ballot. We will be saying 'goodbye' to several long-serving governors who decided not to nominate themselves for re-election this time. Our grateful thanks go to Dave Coe, Julie Calton, Steve Clarke and Barrie Taylor for their contributions to the work of the Governors' Council over a long period. Indeed, Dave and Barrie have both been Governors since the QEH's authorisation as a Foundation Trust in 2011.

We also know that Malcolm Bruce and Betty Lewis will be returned to office from 01 February, as the Cambridgeshire Governors' Council seats were uncontested this year.

We know too that we will be welcoming David Close and Gavin Walker as staff governors in uncontested seats. Both David and Gavin will be new to the role and I know that our experienced governors will support them both.

I look forward to continuing to work with our Governors' Council in 2020, with both new and familiar faces. I am currently arranging a joint Board and Governors' Council facilitated workshop for March, so that the Board Members and the Governors can discuss their respective roles and develop a strategy for effective working together. Governors will receive an invitation to this workshop just as soon as we know the results of the election.

4 The Chairman's Diary

My recent diary engagements have included:

Internal:

- Volunteers' Christmas Lunch – an opportunity to thank our volunteers for their work
- North Cambs Hospital visit
- Children's Community Nursing Team
- Serving Christmas Lunch to our staff
- Central Delivery Suite
- Values Awards presentations
- I dropped in to the hospital to visit patients and staff on Christmas Day and distributed mince pies
- Education, Research and Innovation Committee – chair
- Roxborough centre visit

External:

- Health and Wellbeing Board meeting
- STP Chairs' Oversight Meeting
- STP Provider Chairs' meeting
- CCG – Chairs' meeting
- CCG Board : Board
- RAF Marham – meeting with Station Commander, Group Captain Beck
- Norfolk Health Overview and Scrutiny Committee (NHOSC)
- Meeting with Ann Radmore – Regional Director, NHSE/I
- NHS East of England Chairs' Event