

# **Board of Directors Meeting**

Subject: Chief Executive's Report Date: Thursday 29 January 2015

Author: Paul O'Connor Lead Director: Paul O'Connor

# **Executive Summary**

This report provides an update on the latest issues affecting the Trust.

# Recommendation

The Board is asked to note the content of this paper and specifically where verbal updates will be given at the Board meeting.

Relevant Strategic Priorities (please mark in bold)	
To consistently deliver a high quality patient experience safely and effectively	To develop extended clinical networks that benefit the patients we serve
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To eliminate the variability of access to and outcomes from our acute services	To provide efficient and cost-effective services and deliver better value
	healthcare
To reduce demand on hospital services	
and deliver care closer to home	

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Links to the BAF and Corporate	
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Risk Register	
Details of additional risks	N/A
	14/74
associated with this paper (may	
include CQC Essential Standards,	
NHSLA, NHS Constitution)	
Links to NHS Constitution	N/A
Links to Milo Constitution	IV/A
Financial Implications/Impact	N/A
'	
1	1.1/4
Legal Implications/Impact	N/A
Partnership working & Public	
•	
Engagement Implications/Impact	
Committees/groups where this	N/A
item has been presented before	
	1.1/4
Monitoring and Review	N/A
Is a QIA required/been	N/A
· · · · · · · · · · · · · · · · · · ·	IN/A
completed? If yes provide brief	
details	



#### 1. A&E Unprecedented Levels of Activity

Since my last Board report there has been significant media coverage of the huge impact on A&E departments across the country as a result of unprecedented levels of demand and acuity of patients. Coming as it did during the Christmas to New Year period, one in which a number of external support services are less able to cope with the strain on services, the national picture against A&E performance deteriorated significantly. This Trust continues to work closely with its CCGs and other key partners to ensure that everything is being done that can be done to maintain safe access to hospital services via the emergency department. Other reports within these Board papers give fuller details and it is my intention to give a verbal update on the very latest position for January at the Board meeting.

I would like to offer my personal thanks to so many of our staff who worked tirelessly over the Christmas and New Year period to ensure that our services would be appropriately manned around the clock during the festive period.

#### 2. Star of the Month - November 2014

This month we have selected two individuals for our Star of the Month awards - Mel Morris for clearly keeping a day in day out exemplary manner of working over such a long period, and Beverley Pickering for really delivering on our Board Rounds - an absolute necessity for positive change to impact our flow problems.

#### Mel Morris, Maintenance Assistant nominated by Damian Kilday

"I would like to nominate our star maintenance Assistant, Mel Morris. The quietest and most unassuming of characters Mel is a silent star and has been for over 33 years. I have a team of 50 operational staff with high achievers like the Newark supervisor Carl Turnbull and a newly promoted estates officer Ian Spencer but Mel is a rock within. I have worked with him for 6 years and have always relied on the fact that he will complete any task he accepts.

It came to light whist he was on holiday just how far Mel goes. The effort he puts in has a positive effect throughout the department and hospital. While on holiday a few passing comments were made about Mel and how well he works so I decided to investigate.

Gary Sisson (Estates Officer) "Mel is one of the very best and will always help, someone to rely on", Chris Dent (Maintenance assistant) "Mel is always willing to help he is great to work with", Miguel Gomez (Mechanical Supervisor) "Excellent worker and always puts the patient first." Peter Geary (electrical supervisor) Wish we had more like him, helpful, reliable and always with a smile."

I could ask any member of the team and they would all say something positive without prompting. Following his holiday I noted his varied tasks and attitude to everything was exemplar. I probably would not have nominated anyone until I read the phrase "above and beyond the call of duty and will go the extra mile."

I could not recommend anyone in the department higher."

#### Beverley Pickering, Housekeeper on ward 31 nominated by Emma Pownall

"I would like to nominate Beverley Pickering Housekeeper on Ward 31 for Star of the Month.



As you may be aware we have recently implemented Ward Board rounds across the Trust in order to facilitate patient discharges. Ed Sum and I attended Ward 31 to help implement their board round.

We were both astounded by the amount of effort Bev has clearly put into the board on Ward 31. She definitely embodies the Trust 'Quality for All' values and behaviours; she obviously takes much pride in her work and aspires to improve.

She recognises that the board is essential to 'communicating and working together', and that the team is efficient to ensure patient safety, ultimately encompassing the respectful and caring aspects of the values.

I mentioned that they might incorporate something else into the board and within hours Bev had done all the necessary work to include it. Her commitment to the ward and the team is admirable.

I shall be recommending that Ward 31 is utilised as an exemplar site for board rounds. Please consider her for Star of the Month."

### 3. Appointments to Director Positions

The Trust is pleased to announce that Paul Robinson has been appointed as the substantive Chief Financial Officer for the Trust and will be starting with us in March, before the end of the current financial year.

Paul will join us on Monday 23 March from Sheffield Health and Social Care NHS Foundation Trust where he has worked for two years as Executive Director of Finance. During this time he was the lead for development and delivery of financial planning, successfully delivering a surplus, while achieving efficiency targets.

Paul brings with him over 25 years of NHS experience delivering financial targets in large, complex healthcare organisations and has held a number of senior roles including Assistant Director of Finance, Executive Director of Finance and Deputy Chief Executive.

I am sure you will all join me in welcoming Paul Robinson to the Trust.

I would also like to take this opportunity to thank Margaret Ashworth, our current interim Chief Financial Officer. I am very grateful that Margaret has done so much to lead a far greater understanding within the Trust of our financial position since arriving in August 2014. Margaret's has developed improved budget planning processes for the forthcoming year, strong relationships with commissioners and tighter management of cash flow.

I am also very pleased to confirm that Sue Barnett took on the role of interim Director of Operations on the 5 of January. Sue has already made a significant impact on the Trust and she brings a wealth of experience to the role.

Sue has more than twenty years' experience in the NHS and is an experienced leader with a track record of working across organisational boundaries delivering major change projects. She has held a number of roles in the acute sector both as deputy chief executive and director of operations and has often brought groups together to solve complex scenarios.

Among Sue's achievements are turnaround, development of clinical and service strategies and successful financial planning and delivery.

I am sure you will all join me in welcoming Sue as a member of the Board of Directors.



## 4. "Healthcare in Newark" - Adjournment Debate

On the 7<sup>th</sup> of January Robert Jenrick, MP for Newark called an Adjournment Debate; House of Commons entitled "Healthcare in Newark". To support this I spent the day before briefing Jane Ellison, Parliamentary Under-Secretary of State for Public Health on a range of issues in relation to our services at Newark. The debate coincided with our announcement of extensions to both the MIU at Newark and the emergency department at King's Mill, funded through the Prime Minister's Challenge Fund. These extensions remain subject to planning permission and the intention is a combined circa £1.2m development which will enable local GPs to take a more integrated role in delivering front door services at these two hospitals.

Further to the Adjournment Debate during which the subject of the Trust's PFI was raised, it appears that Mr Jenrick has secured an opportunity for the Trust to join him and the Secretary of State for Health in a discussion to understand the options available to the Trust in managing its PFI contract.

# 5. Joint Meeting of the Executive Teams from the Trust and Newark & Sherwood and Mansfield & Ashfield CCGs

On the 13<sup>th</sup> January the Trust Executive Team met with its counterparts of the two local CCGs in one of its regular meetings with an agenda that met the three key objectives the Trust is currently delivering, as follows:

- Quality Improvement Plan the opportunity was used to explore any areas in which the CCG felt that further quality improvements could be made to enhance the continuous improvement programme in place across the Trust.
- Emergency department progress colleagues discussed the report into emergency department care and processes at the Trust, drafted by the CCG and responded to by the Trust. These discussions are further reviewed at the System Resilience Group that currently meets on a weekly basis.
- The financial position of the Trust and the implications for the Better Together Programme and 2015/16 contract negotiations.

#### 6. Buddying Arrangements

On the 13<sup>th</sup> of January we were very pleased to host a visit by colleagues from Royal United Hospitals Bath (RUHB). As part of the ongoing buddying arrangements for Special Measures Trusts, the Chief Executive, Finance Director and Director of Nursing & Midwifery spent a number of hours at the Trust interviewing individual directors as well as taking soundings from our local CCGs. The purpose of this visit was to ensure that RUHB had a comprehensive picture of the current position of the Trust, both against its quality improvement plan and its wider contextual sense so that an appropriate MoU can be drawn up between our two Trusts. I will be happy to give a verbal update on these buddying arrangements at the Board meeting.

#### 7. Trust Partnership with Primary Integrated Community Services Ltd

On the 22<sup>nd</sup> December I met Dr Kelvin Lim and Alison Rounce, Directors of Primary Integrated Community Services Ltd (PICS). PICS are a GP owned provider organisation with a strong track record of provision established trading history and relationships with other provider colleagues. PICS is CQC registered, has GP and secondary consultant members and is registered as an independent provider for Choose & Book.



PICS originally operated from within Nottingham West PCT and its service interests cover the four broad areas of which unselected patients can be identified, i.e. respiratory, cardiac, diabetes and falls.

The objectives of PICS is to provide a corporate vehicle through which all GPs can benefit from opportunities arising from contracts tendered by CCGs.. More recently PICS has extended its work into non-malignant palliative care services in an attempt to put in place the support required to allow these patients to remain in their home environments.

The Trust is developing a MoU with PICS to help to further these objectives by creating a more strategic alignment between our two organisations and agreeing pathways of care that meet these objectives. I will keep the Board updated as these arrangements progress.

#### 8. Industrial Action - 29 January 2015

NHS trade unions have announced plans to escalate their campaign of industrial action during January and February 2015 as part of the national pay dispute.

NHS Trade Unions will be calling on their NHS members to take action on Thursday 29 January 2015, this will be followed by action short of strike as detailed below:

- UNISON, Unite and GMB strike action for 12 hours between 9am and 9pm. This will be followed by a period of working to rule until 24 February.
- RCM strike action between the hours of 1pm and 3 pm, followed by a period of working to rule until 24 February
- SOR strike action between the hours of 8 am and 2 pm, following by action short of strike until 24 February

The RCN and BMA are not taking industrial action.

In addition Ambulance staff will be taking strike action on 29 January 2015 - UNISON will be calling its members to take strike action for 12 hours between 9 am and 9 pm and GMB will be asking its members in the ambulance service to take part in a 24 hour strike from 00:01 - 23:59.

A further 24 hour period of strike action is planned for Wednesday, 25 February 2015.

The Trust continues to work with trade union colleagues in order to effectively plan for the strike action and mitigate the impact on our patients. Operational contingency plans have been developed for the day of strike action and the days immediately following to prepare for the anticipated increased activity.

Paul O'Connor Chief Executive