

Board of Directors Meeting

Subject: Chief Executive's Report
Date: Thursday 24 September 2015
Author: Karen Fisher, Acting Chief Executive
Lead Director: Karen Fisher, Acting Chief Executive

Executive Summary	
This is the Chief Executives Report as presented to the Board of Directors.	
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
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	

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

Chief Executive Report – September 2015

Since the last Board meeting contacts with external regulators have continued. There has been regular contact with Monitor and ongoing dialogue with the CQC. The executive team continues to focus on driving forward the activities necessary to sustain quality improvements and at the same time supporting the delivery of financial efficiencies.

Detailed below are highlights from this month:

1. **Monitor**

We have been advised that effective from 1 September Jayne Rhodes will be our new Senior Regional Manager as Jay Mistry is moving to a new role within Monitor. In addition, Aida Emadi-Allahyari has taken over Regional Manager responsibility from Oli Morris. We wish both Jay and Oli best wishes in their new roles.

The routine PRM took place with Monitor on 11 August 2015. Discussions focused on CQC activities, our Section 31 response and delivery of our Quality Improvement Plan, together with Maternity improvement and the achievement of national targets (RTT and Cancer). We received feedback on our Board Governance Action plan and had a helpful discussion regarding future reporting.

The next routine PRM is scheduled for Monday, 28 September.

2. **Exec to Exec with CCG**

Fortnightly meetings of the CCG and Trust Executive Teams continue, these forums provide the opportunity to discuss and agree activities in relation to joint priorities which continue to be critical to our ongoing journey of quality improvement.

3. **Horizon Scanning Schedule**

See Appendix 1.

4. **Update to the NHS Constitution**

The [NHS Constitution and Handbook to the NHS Constitution](#) have been updated to reflect current policy and legislation and to make the Constitution a more practical document.

In his inquiry into the failings at Mid-Staffordshire, Sir Robert Francis QC recommended amendments to the NHS Constitution based on:

- prioritising patients
- protecting patients from avoidable harm
- providing assistance that patients need
- staff compliance with guidance

Each of these recommendations has been fully accepted and implemented within the new NHS Constitution.

5. Update to the Monitor Risk Assessment Framework

The Monitor Risk Assessment Framework, set out how Monitor assess an organisation and categorise them. This consultation has now concluded and several changes have been made to reflect the challenging financial context in which foundation trusts are operating and to strengthen Monitor's regulatory regime to support improvements in financial efficiency across the sector.

The changes include:

- Monitoring in-year financial performance and the accuracy of planning
- Combining these two measures with the previously used continuity of services risk rating to produce a new four-level financial sustainability risk rating
- Introducing a value for money governance trigger.

The reporting requirements have also been reviewed and as a result from August 2015 NHS foundation trusts will be required to submit financial information monthly as well as quarterly.

6. New Rules for Nursing Agency Spending

On 1 September the Trust Development Authority (TDA) and Monitor wrote to all NHS organisations setting our new rules for nursing agency spending.

The letter set out a ceiling for the proportion of nursing expenditure able to be spent with temporary staffing agencies. In addition it will be necessary to only procure nursing staff from agencies that are on approved 'framework agreements' from 19 October. It is anticipated that price caps on hourly rates will be announced later in the year.

The Trust has requested a review of its ceiling band in light of its current reported vacancy position. We will continue to monitor vacancy levels and drive recruitment campaigns to ensure safe staffing.

7. HSJ Awards nomination

The Trust put forward six entries in this year's prestigious HSJ Awards and we are delighted to report that Samantha Musson, Team Leader in the Women's Health and Continence Physiotherapy service, has been shortlisted for the 'Rising Star' category at this year's HSJ Awards. This is fantastic news.

Samantha has been employed at the Trust since November 2007 and was initially employed as a Senior Physiotherapist in Women's Health before being seconded into the role of Team Leader, before subsequently being substantively appointed to the role in February 2014.

Samantha will be attending a finalist interview on 8 October, with the awards ceremony taking place at the Grosvenor Hotel in London in November.

8. Star of the Month

Brent Gillicker, ODP, Theatres, and Lee Scothern, Theatre Support Worker

Nominated by Dale Travis, Divisional General Manager, and Liz Williamson, Divisional Nurse

Brent is an ODP in theatres and Lee is a theatre support worker but they work as a collective team on improving patient experience through theatres. They have put themselves forward voluntarily to focus on the patient journey through theatre and to make improvements to ensure the changes are embedded. Their work portfolio focuses on scheduling improvements and ensuring that all the elements that make a productive theatre are ready to go for the first patient.

Our particular nomination is to reflect the impact they have had on the reduction of same day cancelled operations. They developed a new cancellation policy and algorithm in March of this year and have worked tirelessly to implement it. In April we saw a 50% reduction in over more than year of the number of cancelled operations (same day) for non-clinical reasons, again in May this continued and we see the same in June. For May the overall Trust compliance had reduced to 0.3% against a target of 0.8%. This is a fantastic achievement in just two months and really shows how staff on the shop floor can really make the difference by a simple change.

We would like to nominate them for this achievement but also to be a shining example of staff taking ownership to make improvements for patient benefit.

Karen Fisher
Acting Chief Executive