

Board of Directors Meeting in Public - Cover Sheet

Subject:		Chief Executive's report			Date: 4 August 2022		
Prepared By:		Rich Brown, Head of Communications					
Approve	ed By:	Paul Robinson, Chief Executive					
Present		Paul Robinson, Chief Executive					
Purpose							
An update regarding some of the most noteworthy events Approval							
and items over the past month from the Chief Executive's					Assurance	Χ	
perspec	tive.				Update	Х	
					Consider		
Strategic Objectives							
To provide		To promote and	To maximise the		continuously	To achiev	⁄e
outstanding		support health	potential of our	lea	arn and improve	better val	ue
care		and wellbeing	workforce				
	X	X	X		X	X	
Identify which principal risk this report relates to:							
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		that overwhelms capacity					
		shortage of workforce capacity and capability					
	Failure to achieve the Trust's financial strategy						
	, , , , , , , , , , , , , , , , , , , ,						
	innovation						
	PR6 Working more closely with local health and care partners does not fully						
	deliver the required benefits R7 Major disruptive incident						
change Committees/groups where this item has been presented before							
Committees/groups where this item has been presented before							
Not applicable							
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Executi	ve Summ	arv					

An update regarding some of the most noteworthy events and items over the past month from the Chief Executive's perspective.



Managing pressures in our hospitals

This month has seen the continuation of pressures across our services. This year, those pressures have extended far beyond those traditionally experienced during the height of winter and have recently been compounded by the recent red weather warning for extreme heat that was issued by the Met Office, resulting in a national incident being declared to help keep essential services running across the country.

Those pressures – including responding to the unique challenges presented by the extreme heat – continue to be managed as a truly Trust-wide response and I am grateful to my colleagues for their ongoing efforts in managing those pressures.

The Trust itself responded by holding daily incident meetings to manage its own response. Those meetings have now been stood-down and – as with any incidents of this kind – we will take the time to review what went well and draw upon colleagues' insights from across the Trust to understand how we can improve our incident response in future.

I also would like to express my thanks to all those who worked together to respond to the unprecedented challenges the heat presented to make things as comfortable as possible for the colleagues, patients and visitors in our hospitals during that time.

Reducing waiting lists for non-urgent treatments

We've been working with ICB colleagues to cut NHS waiting lists across Nottingham and Nottinghamshire, including by <u>eliminating Sherwood Forest Hospitals' own two-year waiting lists for patients who have been waiting the longest to access the treatment they deserve.</u>

Work to reduce those waiting lists will continue across the system and I thank all my hardworking colleagues for their efforts in helping to reduce those waiting lists to help our patients access their treatment as quickly as possible.

Vaccinations update

Our vaccine services team have been continuing their operational planning following the recent government announcement confirming which cohorts should be offered both a COVID-19 Vaccine Autumn Booster and a free flu vaccine from this autumn.

Our operational planning has been well underway for a number of weeks to ensure that those most at-risk of COVID and flu can boost their protection this autumn and winter.

We will continue those preparations to ensure that the Trust's vaccine services team can continue to be at the forefront of Nottingham and Nottinghamshire's vaccination programme this autumn and winter.

Pay award mention

The Government recently announced that NHS workers will be receiving a pay rise. That will be effective from 1 April 2022 with progressive distribution, meaning that the lowest bands on NHS Terms and Conditions Service will receive the greatest proportional uplift.

The Trust is waiting for the finer details to be communicated following the initial government announcement, which we will share details of with the Trust Board and our employees as soon as they are available and we are in a position to share those.



Ofsted re-inspection of our Little Millers Nursery

Colleagues at our Little Millers Day Nursery recently welcomed back Ofsted inspectors to the facility, who visited to re-inspect the facility in late July following the inspection which saw its overall rating downgraded earlier this year. While we are waiting to hear the outcome of its re-inspection, the initial feedback from inspectors recognises the progress made to address the points raised in its last inspection.

I would like to thank the Nursery team for how they have risen to the challenge of continuing to provide the best possible care for our Little Millers family and we look forward to sharing the outcome of this latest inspection with you – hopefully at our next public Board meeting.

Estates and Facilities 'Estates Return Information Collection'

The Executive Team recently approved the submission of the Trust's Estates and Facilities 'Estates Return Information Collection' (ERIC) for 2021/22, which forms the central collection of Estates and Facilities data from all NHS organisations in England during the fiscal year ending 31 March 2022.

All nominated leads participated in the data collection, taking ownership of their data. The Finance department played a vital role in providing all the financial data and have provided assurance that all data submitted reconciles back to the annual accounts and the quarterly NHSI Return. Professional support to manage the data collection and validation of the ERIC data return 2021/22 was undertaken by SAS Compliance.

Submissions are collated and the results reported via Model Health (formerly known as Model Hospital) which could result in efficiency opportunities being identified by NHSE. This will be considered when reports are made available in the autumn.