

Board of Directors Meeting

Subject: Chief Executive's Report

Date: 26th May 2016

Author: Jon Scott, Chief Operating Officer Lead Director: Peter Herring, Interim Chief Executive

Executive Summary

This is the Chief Executive's Report as presented to the Board of Directors.

Recommendation

The Board is asked to note the content of this paper.

Relevant Strategic Priorities (please mark in bold)

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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	
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Details of additional risks	N/A
associated with this paper (may	
include CQC Essential Standards,	
NHSLA, NHS Constitution)	
Links to NHS Constitution	N/A
	A1/A
Financial Implications/Impact	N/A
Legal Implications/Impact	N/A
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Partnership working & Public	
Engagement Implications/Impact	
Committees/groups where this	N/A
Committees/groups where this	I IV/A
item has been presented before	
Monitoring and Review	N/A
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Is a QIA required/been	N/A
completed? If yes provide brief	
details	
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BOARD OF DIRECTORS

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CHIEF EXECUTIVE'S REPORT

1. Industrial Action – Junior Doctors

There has been agreement on the terms of the contract between the Government and the BMA. A recommendation will be going from the BMA negotiators to BMA members to determine acceptance of the deal.

The details released on Wednesday include several major changes:

- the basic pay rise is to be reduced from 13.5% to between 10% and 11%
- weekends will no longer be divided up between normal and unsocial hours, instead a system of supplements will be paid which depend on how many weekends a doctor works over the course of a year
- extra pay for night shifts is to be reduced from 50% to 37%
- extra support will be made available for doctors who take time out, such as women who go on
 maternity leave, to enable them to catch up on their training and thus qualify for pay rises after
 claims women were being unfairly penalised
- junior doctors will get an enhanced role in advising and liaising with the independent guardians who keep an eye on the hours doctors work
- the deal remains cost-neutral, which means the government is not putting in extra money

2. National Communications

All Trusts received a letter from Jim Mackey of NHS Improvement on 13th May clarifying the issue of competitive tenders for NHS services. The letter stated that CCGs must ensure that they secure the best deal for their patients by contracting with the most appropriate providers. The letter stated that "for the avoidance of doubt, tendering is not the automatic solution in every case. But there is definitely a requirement for CCGs to have good processes to ensure that chosen providers are best placed to deliver what patients need locally".

A letter was received from Wendy Saviour, Director of Commissioning Operations (North Midlands), NHSE and Frances Shattock, Regional Director (Midlands and East) NHSI requesting that our performance trajectory for Quarter 4 of the Four hour Emergency Access Standard be reassessed and that we submit a "more ambitious trajectory". Our initial trajectory was for achievement at 95%. After a thorough review of historical demand and performance we have 95.68% for Quarter 4 which relies on a reduction in ED demand and DTOCs to achieve Quarter 4. The Trust response also highlights the need for a single trajectory for the merged Trust.



3. Central Nottingham Clinical Services

CNCS, who have been providing PC24 at KMH and Out of Hours (OOH) support to Newark and MCH, have announced that it intends to file for administration and ceased providing services on Thursday 12th May. In Nottinghamshire, OOH and services in the Primary Care 24 at King's Mill Hospital, urgent care at Newark Hospital and OOH support at MCH will transfer to Nottingham Emergency Medical Service (NEMS). Care Home support services will transfer to Nottinghamshire Healthcare NHS Trust.

The Leicestershire, Leicester and Rutland Out of Hours service and Loughborough Urgent Care Centre, services will transfer to Derbyshire Health United. Derbyshire Health United is an experienced provider organisation, already managing out of hours services in Derbyshire as well as NHS 111 for the East Midlands.

Peter Herring
Interim Chief Executive