

Board of Directors Meeting

Managing Directors Report 3rd August 2016 Subject:

Date:

Peter Herring, Managing Director Author: **Peter Herring, Managing Director Lead Director:**

Executive Summary

This is the Managing Directors 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)

| | , |
|--|--|
| Ensure the highest standards of safe care are consistently delivered by, and for, individuals, teams and departments | Ensure that patients experience the very best care, building on good practice and listening and learning from both negative and positive feedback and events |
| Provide timely access to diagnosis, treatment and care when people need it and safely reduce the time patients spend in hospital | Raise the level of staff engagement through strong leadership, communication, feedback and recognition |
| Reduce the scale of our financial deficit by reducing costs, improving utilisation of resources and productivity, and achieving best value for money | Work in partnership to keep people well in the community, and enable them to return as soon as they are ready to leave hospital |
| Develop and implement a programme of work in conjunction with Nottingham University Hospital NHST to create a new combined organisation | |

| Links to the BAF and Corporate Risk Register | |
|--|-----|
| Details of additional risks associated with this paper (may include CQC Essential Standards, NHSLA, NHS Constitution) | 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 |



BOARD OF DIRECTORS

3rd August 2016

MANAGING DIRECTORS REPORT

CQC Inspection 18th - 20th July

An unannounced limited inspection of the Trust was conducted by the CQC on the afternoon of Monday 18th July and over the following two days. The inspection concentrated on the areas of Medicine, Urgent and Emergency Care, Outpatients and Maternity across all three hospitals, and assessed the safety and well-led domains, and additionally in respect of Medicine, the effectiveness domain. The informal feedback, which was very positive, has been shared with the Board of Directors, Governors and staff.

The draft CQC report will be considered by the CQC's National Quality Assurance Panel, following which it will be released to the Trust for factual accuracy. We believe individual ratings in the areas inspected will be adjusted where appropriate and consideration will be given to the removal of the section 29a warning notice and also whether to recommend to NHSI that the Trust be removed from special measures.

Application to add the regulated activity 'Assessment or medical treatment for persons detained under the Mental Health Act 1983'

Directors will recall earlier in January, the CQC informed the Trust that our registration with them did not include the assessment or medical treatment for persons detained under the Mental Health Act 1983, albeit that we had appropriate arrangements in place to manage such patients in partnership with the Mental Health Trust. We submitted our application in February and on 15th July were visited by the CQC team to consider that application.

We have now received notification from the CQC that they are satisfied with our arrangements and have granted us registration for patients falling into this category.

NHSI A & E Improvement Plan - Emergency Department Peer Review

As one of the stronger performing Trusts in the country in achieving the 4 hour A & E target we have been asked by NHSI to partner with other challenged Trusts in the region in helping them to improve their A & E performance. This will involve the identified Trusts shadowing our staff and processes over a number of days, nominating specific individuals within the Trust as advisory contacts for other Trusts, and sharing best practice. We believe this can be accommodated without damaging SFH operational performance, but emphasised to NHSI that this would best be conducted over the next two months or so prior to the merger.

In addition, Dr. Ben Owens, Clinical Director for Urgent and Emergency Care Division has been appointed as Urgent and Emergency Care Clinical lead for NHS England Midlands and East.

Peter Herring Managing Director

