

# Board of Directors Meeting

**Subject:** Managing Directors Report  
**Date:** 5<sup>th</sup> October 2016  
**Author:** Peter Herring, Managing Director  
**Lead Director:** Peter Herring, Managing Director

<b>Executive Summary</b>	
This is the Managing Directors Report as presented to the Board of Directors.	
<b>Recommendation</b>	
The Board is asked to note the content of this paper.	
<b>Relevant Strategic Priorities (please mark in bold)</b>	
<b>Ensure the highest standards of safe care are consistently delivered by, and for, individuals, teams and departments</b>	<b>Ensure that patients experience the very best care, building on good practice and listening and learning from both negative and positive feedback and events</b>
<b>Provide timely access to diagnosis, treatment and care when people need it and safely reduce the time patients spend in hospital</b>	<b>Raise the level of staff engagement through strong leadership, communication, feedback and recognition</b>
<b>Reduce the scale of our financial deficit by reducing costs, improving utilisation of resources and productivity, and achieving best value for money</b>	<b>Work in partnership to keep people well in the community, and enable them to return as soon as they are ready to leave hospital</b>
<b>Develop and implement a programme of work in conjunction with Nottingham University Hospital NHST to create a new combined organisation</b>	

<b>Links to the BAF and Corporate Risk Register</b>	
<b>Details of additional risks associated with this paper</b> <i>(may include CQC Essential Standards, NHSLA, NHS Constitution)</i>	N/A
<b>Links to NHS Constitution</b>	N/A
<b>Financial Implications/Impact</b>	N/A
<b>Legal Implications/Impact</b>	N/A

<b>Partnership working &amp; Public Engagement Implications/Impact</b>	
<b>Committees/groups where this item has been presented before</b>	N/A
<b>Monitoring and Review</b>	N/A
<b>Is a QIA required/been completed? If yes provide brief details</b>	N/A

## BOARD OF DIRECTORS

5<sup>th</sup> October 2016

### MANAGING DIRECTORS REPORT

#### Removal of Section 29A Warning Notice

The CQC formally notified the Trust on 14<sup>th</sup> September of their decision to remove the above notice served under Section 29A of the Health and Social Care Act 2008 in August 2015.

The letter stated the following:

‘We inspected the Trust in July 2016 and are satisfied that you have now made significant improvements to the quality of the health care provided by the Trust in relation to the regulated activities set out in this Notice, by way of having effective systems in place that address the points numbered 1 to 3 below.

The reasons for the Commission’s view that the quality of health care you provide has made significant improvement are as follows:

1. Your systems to assess, monitor, and mitigate risks to people receiving the care as inpatients and outpatients operate effectively.
2. Your systems to assess, monitor, and improve the quality and safety of the services you provide to people attending your hospitals as inpatients and outpatients operate effectively.
3. You have proper processes in place to enable you to make the robust assessments required by the Fit and Proper Persons Requirement.

#### Update on CQC Inspection Report

The draft report following the CQC Inspection in July 2016 was considered by the CQC’s National Quality Review Panel on the 27<sup>th</sup> September. We will receive the final draft report in the coming weeks and will have 10 working days to check this for factual accuracy before the final CQC Report is subsequently issued.

#### Junior Doctors Industrial Action and outcome of ‘Justice for Health’ Judicial Review

Junior Doctor strike action planned for October, November and December has been suspended by the BMA. In a statement, the Chair of the Junior Doctors Committee suggested that this was due to feedback received regarding the risks to Trusts being able to maintain a safe service, but warned that the BMA are planning a range of other actions in order to resist imposition of the contract.

A number of junior doctors (through a company called Justice for Health) recently challenged, in judicial review proceedings, the decision by the Secretary of State for Health to introduce the new contract for doctors in training. Their arguments were heard by the court on 19<sup>th</sup> and 20<sup>th</sup> September 2016 and NHS Employers took part in the proceedings as an interested party.

The judgment of Mr Justice Green has now been published dismissing the three claims brought by Justice for Health. The judgment is a long document but in summary is as follows:

A. The Secretary of State did not exceed his powers in relation to the introduction of the contract, rather the court accepts that he acted within his powers by approving its content and strongly recommending its adoption, in principle individual employers are free to locally negotiate their own terms but the Secretary of State reserves the right to consider the exercise of his various powers of compulsion should the introduction of the contract be fragmentary or of sufficient concern.

B. Whilst there was a lack of clarity for doctors themselves as a result of the 6<sup>th</sup> July announcement about the extent to which employers retained their own contractual freedoms, the position was always clear to employers and was made clear shortly afterwards to Justice for Health (when they asked for clarity) and during the course of the case.

C. Mr Hunt did not behave irrationally in relation to the seven-day services NHS policy, or by his use of statistical research concerning the weekend effect when deciding to proceed in the absence of consensus about all areas of that research.

All in all, therefore, the judge rejected any suggestion that the new contract could not be introduced by the NHS in England from October 2016.

**Peter Herring**  
**Managing Director**