

Board of Directors Meeting in Public - Cover Sheet

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|---|--|---|--|--------------------------------|
| Subject: | Chief Executive's Report | | Date: 6 June 2019 | |
| Prepared By: | Robin Smith, Deputy Head of Communications | | | |
| Approved By: | Richard Mitchell, Chief Executive | | | |
| Presented By: | Richard Mitchell, Chief Executive | | | |
| Purpose | | | | |
| To update on key events and information from the last month | | | Approval | |
| | | | Assurance | X |
| | | | Update | |
| | | | Consider | |
| Strategic Objectives | | | | |
| To provide outstanding care | To promote and support health and wellbeing | To maximise the potential of our workforce | To continuously learn and improve | To achieve better value |
| X | X | X | X | X |
| Overall Level of Assurance | | | | |
| | Significant | Sufficient | Limited | None |
| | | | X | |
| Risks/Issues | | | | |
| Financial | | | | |
| Patient Impact | | | | |
| Staff Impact | | | | |
| Services | | | | |
| Reputational | | | | |
| Committees/groups where this item has been presented before | | | | |
| N/a | | | | |
| Executive Summary | | | | |
| <p>An update regarding some of the most noteworthy events and items over the past month from the Chief Executive's perspective:</p> <ul style="list-style-type: none"> • Overall update • Wider SFH news • Wider NHS update • Next month at SFH | | | | |

Chief Executive Report – June 2019

Overall update

Please find the latest harm information below:

| | Monthly figure | Year to date figure |
|---|----------------|---------------------|
| C Diff | 0 | 0 |
| MRSA | 0 | 0 |
| Ecoli | 3 | 3 |
| Grade 4 avoidable Healthcare Associated Pressure Ulcers | 0 | 0 |
| Falls which cause moderate, severe or catastrophic harm | 1 | 1 |
| Never events | 0 | 0 |
| Total | 4 | 4 |

Further information about the above is included in the Single Oversight Framework Performance Report. Appendix A details how we performed in May against our high level metrics for workforce, quality, access and finance.

Wider SFH news

Staff survey

On Thursday 30 May, we received the findings of the Quarter four (January – March 2019), staff friends and family survey. It was pleasing to see we remain consistent, with 88% of colleagues stating they would recommend us as a place to receive care and 78% as a place to work. This is positive especially considering our response rate is 25% which is one of the highest in the NHS. However 11% of colleagues would not recommend Sherwood as a place to work and 3% would not recommend Sherwood as a place to receive care and this should worry us. I believe there continues to be too much of a disconnect on a day to day basis between the stated values of kindness, support, compassion and respect and the lived values. We all need to look at the ways we personally behave and recognise we can all be better leaders and people.

Civility Saves Lives

Our first conference on civility in healthcare, “Creating a Culture of Civility”, took place on Tuesday 28 May at the King’s Mill Conference Centre. Around 100 colleagues and external partners attended the conference which was based on studies showing that being civil to each other creates happier staff and will translate into safer patient care.

We had a great line up of internal and external speakers and workshops, including a talk from Dr Chris Turner, Consultant in Emergency Medicine and founder of the Civility Saves Lives movement, Denise Guzdz, Clinical Governance & Patient Safety Advisor Theatres & Anaesthetics and Civility Saves Lives advocate and Dr Andy Haynes, Medical Director.

Thank you to everyone who made contributions to this important event.

Sherwood Forest Hospitals welcomed Roy Lilley

We had a fantastic day on 22 May when we welcomed Roy Lilley, health blogger and commenter to Sherwood and introduced him to some of our outstanding teams, projects and services.

Roy, who runs the Academy of Fab stuff website, which shares and celebrates outstanding or innovative NHS projects and services visited King's Mill and Newark Hospitals and was hugely impressed with everything he saw and heard. Thank you to everyone who took the time out of their days to talk to Roy. The services included:

- Children's - Clinic 11
- Wood Workshop - Therapy
- Dementia friendly bus stops
- Adult, paediatric and newborn resus trolleys
- MSK pathway
- Pre-op
- Falls grab box
- Research
- NIV
- Street Health Project
- Minster, Fernwood and UCC - Newark Hospital

You can read Roy's blog on his visit to Sherwood [here](#) and he concludes with "If this place were not a hospital it would be a symphony orchestra, if it were a team, it would be premier league, if it were an artist, their work would be hanging in the Louvre." High praise indeed....

New Deputy Medical Director appointed

I am delighted to announce the appointment of Dr David Selwyn as a Deputy Medical Director.

Dave is a highly-experienced consultant in Adult Critical Care Medicine and Anaesthesia and currently Deputy Medical Director at Nottingham University Hospitals NHS Trust (NUH) where he has worked for more than 20 years. He has an interest in Quality Improvement and has recently been responsible for leading NUH's Trust-wide clinical programme of work reducing unwarranted variation to improve the quality of patient care. In addition, he leads NUH's move to 7-day service implementation and has strengthened the medical leadership development programme and re-designed the Consultant recruitment process. At NUH, he was previously a Divisional Director, Clinical Director and Head of Service, delivering a number of high value capital and quality improvement projects.

Dave also has a wider healthcare system role as acute care clinician for the clinical services strategy, Council member of the Royal College of Anaesthetists and is Chair of the National Clinical Directors' Network.

Dave Selwyn joins us on a 12-month secondment in a role that will include spending three days a week covering Executive Medical Director responsibilities for the Trust on behalf of Dr Andy Haynes while he is seconded to the role of Medical Director for the Nottingham and Nottinghamshire Integrated Care System (ICS) and Dave will also do one day of clinical work here. He is expected to be in post by early July.

Following a national advert and interview process involving senior clinicians at Sherwood, I am pleased to welcome Dave to the team. To remind colleagues, we have also recently substantively appointed Helen Hendley as Deputy Chief Operating Officer, from NHS Improvement and Richard Mills, as Deputy Chief Financial Officer, also from NHS Improvement. It is promising to see the calibre of colleagues joining us from well-established organisations.

King's Mill Hospital welcomes fruit and veg stall pitching up to offer a healthier way of life

The fruit and veg stall that opened at King's Mill Hospital has been a great success, and it is positive that we have now been able to introduce a stall for patients, visitors and colleagues at Newark Hospital. In a bid to encourage healthy eating for patients, staff and visitors, a brand new fresh fruit and veg stall pitched up outside the entrance of the Urgent Care Centre from Monday 29 April. The stall is run by local stand operators Laiten McGuigan and Roxanne Burrows both from Leicester, and will be open Monday, Tuesday and Thursday 9am – 4:30pm.

Estates and Facilities Programme Manager for the Trust, Julie Dennis added: "We are really pleased that the stall has been so successful at King's Mill and we wanted to give staff, patients and visitors at Newark Hospital the same offering of healthy, affordable and local produce."

Updates from the Integrated Care Provider and the Integrated Care System boards are in Appendices A and B below.

Wider NHS update

Key updates since last Board are:

- Menopause: The BBC featured a week of news and discussion on the issue of the menopause. Including a reference to the work taking place at SFH in relation to our workforce.
- Stroke deaths in England have halved in the past 10 years thanks to better treatment, research suggests. The number of strokes has fallen among older people, who have been the target of medical interventions to control their blood pressure, such as prescription of statins. But those younger than 55 are having more strokes, probably as a result of obesity and type 2 diabetes.
- The Infected Blood Public Inquiry has been hearing from victims and their families about the impact of individuals being given HIV and Hepatitis infected blood by NHS organisations in the 1970s and 80s.

Next month at SFH

We will start debriefing on winter 2018/19 as part of our planning process for the coming winter.

Appendix A: Performance Infographic

#TeamSFH
@SFHFT

Sherwood Forest Hospitals
NHS Foundation Trust

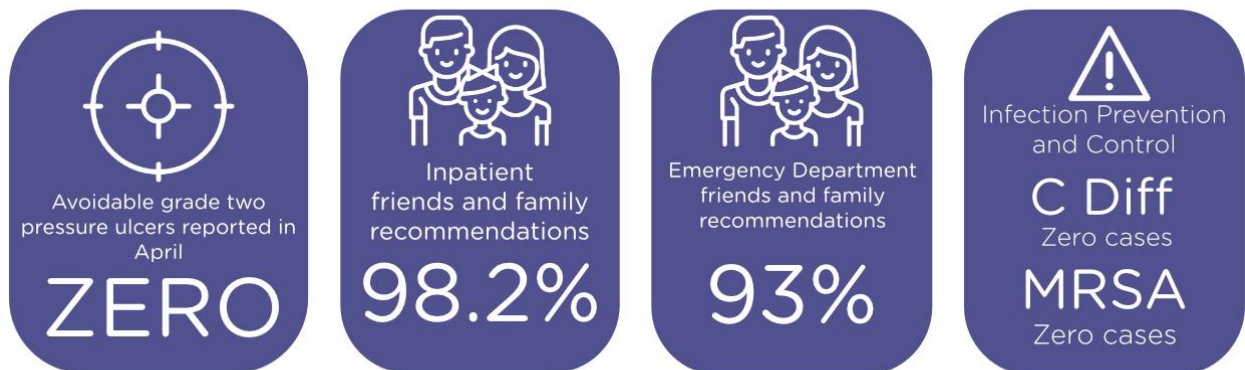
Workforce



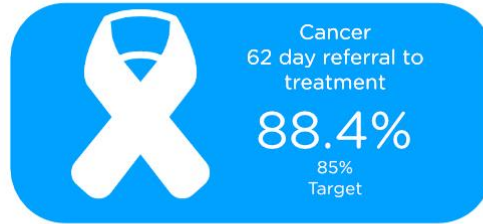
#TeamSFH
@SFHFT

Sherwood Forest Hospitals
NHS Foundation Trust

Quality



Access



Finance



Appendix B.

Mid-Nottinghamshire Integrated Care Provider Board Update – May 2019

The Mid-Nottinghamshire ICP Board met formally for the first time on May 14th 2019. This was also the first meeting for the newly appointed independent Chair Rachel Munton.

The key items discussed were:

- **Health inequalities across the ICP**

Jonathan Gribbin, Director of Public Health at Nottinghamshire County Council presented information on the health and wellbeing of residents across the ICP geography followed by discussions about how the ICP might effectively address these as a system. Data broken down to a PCN level will be presented at the next meeting in order to have fuller place-based conversations and agree next steps and actions.

- **ICP Transformation Monies**

Paul Robinson, ICP Finance Lead, gave an update on the £1.5m allocated to the Mid-Nottinghamshire ICP from the ICS and a discussion took place on how this money could be used to support transformation across the ICP. ICP partners will work on this outside of the Board meeting so that a full ICP plan on effective use of the sum can be taken to the June ICS Board.

- **Transition from Better Together Board to Mid-Nottinghamshire ICP Board**

It was agreed to formally transition from the Better Together Board to the Mid-Nottinghamshire ICP Board. The necessary adjustments to membership and updated Terms of Reference will be worked through, including the location for business and governance aspects of the BTB that will no longer be considered at this meeting. Thanks were given to those who had given their support to the Better Together Board as a strong foundation on which to build.

- **Developing an ICP strategy and identity**

It was agreed to work with partners in the ICP to use existing organisational strategies and plans to identify areas of commonality to form a set of strategic ICP intentions. This will also reflect upcoming results from the engagement on the Long Term Plan and the anticipated ICS five year plan in Autumn 2019. The formation of a consistent 'identity' for the ICP - a narrative about what the ICP is, and what it will achieve is critical.

Feedback from attendees suggested this was an excellent start to the ICP, where the enthusiasm must now be capitalised upon in order to improve the lives of those who live and work in Ashfield, Mansfield, Newark and Sherwood.

The next ICP Board is due to meet on Tuesday, June 11.

Appendix C



Integrated Care System

Nottingham & Nottinghamshire

ICS Board Summary Briefing – May 2019

Please find below the Nottingham and Nottinghamshire Integrated Care System (ICS) update following the ICS Board on 9th May 2019. Please ensure this is cascaded to Governing Boards/Bodies, Management Teams and other key stakeholders and teams across your respective organisations. Minutes from the ICS Board held on 11th April 2019 will shortly be published on the system's website – <http://www.stpnotts.org.uk/ics-board>.

Introduction

The Independent Chair of the ICS, David Pearson, welcomed a wide variety of citizens and staff from across the system to the second Board meeting to be held in public – all the papers for the meeting are available at www.stpnotts.org.uk/ics-board. Patients, citizens and staff from organisations across the system are always welcome to the Board to hear the discussions.

'Love Bump' Patient Story

The ICS's Director of Nursing, Elaine Moss, updated on the work undertaken in partnership with the System's Local Authorities to support expectant mothers to avoid smoking whilst pregnant. The update included sharing a powerful story of a local patient's own experience avoiding smoking for her second pregnancy. The Board welcomed the update and in particular the strong partnership working between the NHS and Local Government.

Workforce

As one of the key challenges and important supporting components of the ICS's emerging strategy (as outlined below), the Board welcomed a detailed update on workforce from Lyn Bacon, Chief Executive of CityCare and Nicky Hill, HR Director of Nottingham University Hospitals who are Senior Responsible Officer and Programme Director respectively of the Workforce workstream.

As experienced across all of the country, there is a shortage of nursing and medical staff across the ICS which, if left unchecked, could present significant issues for the delivery of the ICS's plans. Therefore the Board was reassured to receive a copy of the People and Culture Strategy for Nottingham and Nottinghamshire which outlines the strong delivery plans to recruit, retain and multi-skill staff for the future. The Board also welcomed a clarification of the proposed governance structure for workforce planning in Nottingham and Nottinghamshire and agreed to consider how to ensure that workforce matters are fully considered in the Board's discussions going forward.

Best Value Decision Making

The Board next considered a report setting out the proposed approach to commissioning NHS services in the future. The report set out the wider considerations that were recommended to be taken into account when setting a commissioning approach, including the Economic, Social and Environmental facets of commissioning decisions. The Board supported the adoption of these wider considerations and also agreed to receive a report on an annual basis of the proposed commissioning activity for the coming period to enable the Board to be aware of those upcoming decisions.

ICS Strategy and Memorandum of Understanding

Following discussions at the March ICS Board and the subsequent workshop attended by Board members and other system leaders in April, the ICS's Director of Strategy summarised the progress to date on developing the ICS's strategy. Whilst it is not yet fully clear what might be required to be submitted to NHS England/Improvement in the autumn, the Board has agreed that the ICS will need an articulation of the strategy for the system in order to provide clarity on the priority areas and actions. The Director of Strategy outlined the outputs from the April workshop including confirming that the top five priorities for the system were likely to be: redesigning the urgent and emergency care system; improving the care of patients with long term conditions; re-shaping services for patients with mental ill-health to make them more responsive; reducing waste and inefficiency in the system, and; taking more actions to prevent ill-health before it presents itself. It was also confirmed that there will be a number of supporting programmes of work to enable these priorities to be delivered, including a focus on workforce as discussed above. Further work will take place over coming weeks and months to develop the strategy including a further presentation in the August Board meeting.

Linked to this, the Board also had a brief discussion on the Memorandum of Understanding between the ICS and NHS England/Improvement. The Memorandum of Understanding (MoU), which is refreshed annually, sets out the expectations from NHSE/I for the ICS to deliver and also includes a summary of what support and additional freedoms the ICS can expect to enjoy in return. The Board was keen to be on the front-foot with the creation of this MoU and explored the relative balance that should be placed on achieving national standards in, for example, A&E waiting times and Mental Health access alongside the local priorities such as tackling alcohol harm and eliminating health inequalities in the ICP areas. Further work will be undertaken and the discussions with NHSE/I are expected to start soon.

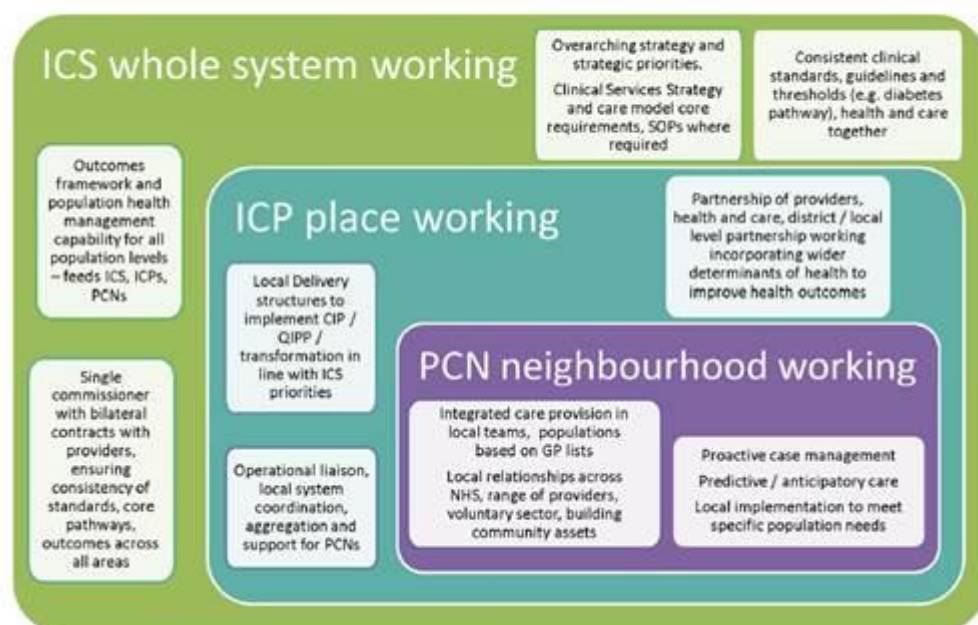
Local Engagement and Insights on Long Term Plan

The ICS and CCG Director of Communications and Engagement presented an update on the local public and staff engagement on the NHS's Long Term Plan that has been undertaken since late March this year. This engagement has been undertaken to both establish the public's attitude to the services provided in Nottingham and Nottinghamshire and the emerging priorities that may appear in the local system strategy and also to enable a dialogue between system leaders and the public in order to promote public confidence in the plans as they are developed. The Board welcomed the update on the engagement activities to date and those planned for the coming weeks and also had a brief discussion on the strategic insights that have begun to emerge from the engagement work, including a confirmation of public support for the likely priority focus areas (as outlined above) for the ICS's strategy.

ICS System Roles and Responsibilities

As the three Integrated Care Providers (ICPs) across the ICS start to establish themselves more clearly and as Primary Care Networks (see below) also start to come into focus, it was felt useful to re-confirm the ways in which these three tiers (along with the overall ICS level) would interact and allocate responsibility for work amongst themselves. The overriding approach to this is that work should be done at the most appropriate level and that work should be performed the fewest possible number of times – striving always for maximise efficiency and removing duplication. The below diagram illustrates this overall approach with some examples of what activities would take place at each level.

Working at system, place and neighbourhood population levels: what should happen where (right task for the right population level)



The Board welcomed the additional clarity that this approach provided and committed to continuing to work through the practical implications of this over the coming months.

Primary Care Networks

Dr Nicole Atkinson presented on behalf of General Practice leaders from across the system the latest view on how Primary Care Networks will be established across Nottingham and Nottinghamshire. Primary Care Networks are one of the main ways in which integrated care will be delivered in neighbourhoods across the ICS and will consist of clinical, social care and local authority professionals working together to improve health outcomes at a local level. In due course, therefore, teams consisting of GPs, pharmacists, social prescribing link workers, housing support officers, mental health practitioners, occupational therapists and others will be set up, serving populations of around 30,000 to 50,000 patients. Individual GP practices will need to agree amongst themselves which other practices they wish to join up with to form these Networks and an early view of these emerging Networks was shared and discussed.

Wendy Saviour,
Managing Director, Nottingham and Nottinghamshire ICS

David Pearson
Independent Chair, Nottingham and Nottinghamshire ICS