

TRUST BOARD IN PUBLIC	Date: 28 March 2013	
	Agenda Item: 1.4	
REPORT TITLE:	CHIEF EXECUTIVE'S REPORT	
EXECUTIVE SPONSOR:	Michael Wilson Chief Executive	
REPORT AUTHOR:	Gillian Francis-Musanu Director of Corporate Affairs	
REPORT DISCUSSED PREVIOUSLY: (name of sub-committee/group & date)	N/A	
Purpose of the Report and Action Required:		(√)
This report provides members with key updates and highlights from a national and local perspective to inform the Board's understanding of policy, performance or new developments.	Approval	
	Discussion	
	Information	√
Summary of Key Issues		
National Issues: <ul style="list-style-type: none"> • The Mid Staffordshire NHS Foundation Trust Public Inquiry • Results of the 2012 NHS staff survey • Building a culture of compassionate care – the Friends and Family Test • Local Authorities – Health and Wellbeing Boards and Health Scrutiny Regulations Local Issues: <ul style="list-style-type: none"> • Care Quality Commission (CQC) Unannounced Inspection • Endoscopy Department Open Day • Maternity Department Achieves CNST Level 1 • Endoscopy Department Open Day • Member of Parliament Visits 		
Relationship to Trust Corporate Objectives & Assurance Framework:		
Objective 4 – Become a sustainable, effective organisation.		
Corporate Impact Assessment:		
Legal and regulatory implications	Ensures the Board are aware of new requirements.	
Financial implications	N/A	
Patient Experience/Engagement	Highlights national requirements in place to improve patient experience.	
Risk & Performance Management	N/A	
NHS Constitution/Equality & Diversity/Communication	N/A	
Attachments:		
N/A		

TRUST BOARD REPORT – 28th MARCH 2013 CHIEF EXECUTIVES REPORT

1. National Issues

1.1 The Mid Staffordshire NHS Foundation Trust Public Inquiry

The final report of the public inquiry into Mid Staffordshire NHS Foundation Trust provides detailed and systematic analysis of what contributed to the failings in care at the trust. It identifies how the extensive regulatory and oversight infrastructure failed to detect and act effectively to address the trust's problems for so long, even when the extent of the problems were known.

The report builds on the first independent inquiry, also chaired by Robert Francis QC. Its three volumes and an executive summary run to 1,782 pages, and is structured around:

- warning signs that existed and could have revealed the issues earlier
- governance and culture
- roles of different organisations and agencies
- present and future.

It recognises that what happened in Mid Staffs was a system failure, as well as a failure of the organisation itself. Rather than proposing a significant reorganisation of the system, the report concludes that a fundamental change in culture is required to prevent this system failure from happening again, and that many of the changes can be implemented within the current system. It stresses the importance of avoiding a blame culture, and proposes that the NHS – collectively and individually – adopt a learning culture aligned first and foremost with the needs and care of patients.

The report makes 290 recommendations, which focus primarily on securing a greater cohesion and culture across the system, which 'will not be brought about by further "top down" pronouncements, but by the engagement of every single person serving patients'. However, no single recommendation should be regarded as the solution to the many concerns identified.

The Government still has to decide how it will respond to the recommendations in the Francis report and it is unclear as to what NHS-wide changes will be made. The report says that each Healthcare Trust should look closely at the recommendations and decide how to apply them to their own work.

As a Board and organisation we have already started to consider and take action on the relevant recommendations and have a separate report where we discuss our initial plans in more detail.

1.2 Results of the 2012 NHS staff survey published

The results of the 2012 NHS staff survey were published today on 28th February. A total of 202,000 NHS staff were invited to participate. Responses were received from 101,000 staff with an overall national response rate of 50% (compared to 53.7% in 2010).

The results are primarily intended for use by NHS organisations to help them review and improve staff experience so that staff can provide better patient care. The Care Quality Commission will use the results from the survey to monitor ongoing compliance with essential standards of quality and safety. The NHS Commissioning Board will use the results to help make better commissioning decisions. The survey will also support accountability of the Secretary of State for Health to Parliament for delivery of the NHS Constitution.

We have considered our local results and our response has been developed in more detail in a report included in the agenda.

1.2 Building a culture of compassionate care – the Friends and Family Test

Seeking and acting on patient feedback is key to improving the quality of healthcare services and putting patients at the centre of everything we do. From 1 April 2013, all patients in acute inpatient hospital wards and A&E departments across the country must be offered the opportunity to complete a Friends and Family Test (FFT). The test supports the 6Cs of ‘Compassionate Care’ – the three-year vision and strategy for nursing, midwifery and care staff.

Through the “Your Care Matters” programme which was piloted in the Trust from November 2012, we have now extended this patient feedback mechanism to all adult inpatient areas and the Emergency Department. Plans are in place to include outpatient areas in 2013 and therefore the Trust is ready to meet this requirement. We will continue to use this feedback to improve the experience of patients and develop current and future services.

1.4 Local Authorities – Health and Wellbeing Boards and Health Scrutiny Regulations

The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 were published on 8th February. The publication of these regulations provide a step forward in enabling local authorities to finalise local preparations for health and wellbeing boards and health scrutiny arrangements.

The regulations in relation to health scrutiny make provision for local authorities to review and scrutinise matters relating to the planning, provision and operation of the health service in their area. They replace the previous 2002 regulations on health scrutiny. Under the new system of health scrutiny, local authorities have greater flexibilities in how they discharge their health scrutiny functions. Certain elements of the previous regulations have been preserved but there are new obligations on both NHS bodies, relevant health service providers and local authorities around consultations on substantial developments or variations to services to aid transparency and local agreement on proposals.

As a results of these regulations, Surrey County Council’s Health Scrutiny Committee have invited NHS bodies in Surrey to sign up to an agreed Protocol which provides a framework to:

- Improve coordination across all parties;

- Better coordination of engagement and consultation with service users, carers and the public; and
- Give greater confidence in the planning for service change which in turn should improve outcomes for health services provided to communities across Surrey.

Surrey & Sussex Healthcare NHS Trust along with Acute Hospital Trusts, Clinical Commissioning Groups, Ambulance Trust, Mental Health Trust and Surrey County Council formally signed the protocol on 14th March 2013.

2. Local Issues

2.1 Care Quality Commission (CQC) Unannounced Inspection

The initial feedback from the two day unannounced inspection by the CQC which took place on 26th and 27th February 2013 has been positive. The full report is expected at the end of March 2013.

2.2 Maternity Department Achieves CNST Level 1

The maternity department underwent the CNST Level 1 (clinical negligence scheme for trusts) level 1 assessment which focused on how the hospital manages the safety of women and their babies. The trust achieved 50 out of 50 which mean we are well placed to move forward to undertake Level 2 assessment later this year. My thanks and appreciation to all staff that enabled this achievement.

2.2 Endoscopy Department Open Day

The Endoscopy team held an open day for patients, carers and members of the public on 21st March 2013. Consultant Gary Mackenzie along with clinical staff were on hand to answer questions, show those attending the equipment in use in the department and offer the opportunity to try out a simulator.

2.3 Member of Parliament Visits

The Trust was pleased to host visits by two local MPs during February and March. Crispin Blunt MP for Reigate and Francis Maude MP for Horsham and Minister for the Cabinet Office and Paymaster General. Both MPs held a meeting with the Chief Executive and toured the hospital and were pleased to see the improvements to services for patients and acknowledged the performance improvement journey during the last year.

3. Recommendation

The Board is asked to note the report.

Michael Wilson
Chief Executive
March 2013