

TRUST BOARD IN PUBLIC		Date: 27th October 2016	
		Agenda Item: 1.6	
REPORT TITLE:		CHIEF EXECUTIVE'S REPORT	
EXECUTIVE SPONSOR:		Michael Wilson Chief Executive	
REPORT AUTHOR (s):		Gillian Francis-Musanu Director of Corporate Affairs	
REPORT DISCUSSED PREVIOUSLY: (name of sub-committee/group & date)		N/A	
Action Required:			
Approval ()	Discussion (√)	Assurance (√)	
Purpose of Report:			
To ensure the Board are aware of current and new requirements from a national, regional and local perspective and to discuss any impact on the Trusts strategic direction.			
Summary of key issues			
Regional/National:			
<ul style="list-style-type: none"> • Taking further action to reduce agency spending • Improving the safety of maternity care in the NHS 			
Local:			
<ul style="list-style-type: none"> • Mouth Care Matters Profiled at NHS Expo • East Surrey Cancer Support Centre receives Civic Award • SaSH Carers Support in national press 			
Recommendation:			
The Board is asked to note the report and consider any impacts on the trusts strategic direction.			
Relationship to Trust Strategic Objectives & Assurance Framework:			
SO5: Well led - Become an employer of choice and deliver financial and clinical sustainability around a patient focused clinical model			
Corporate Impact Assessment:			
Legal and regulatory impact	Ensures the Board are aware of current and new requirements.		
Financial impact	N/A		
Patient Experience/Engagement	Highlights national requirements in place to improve patient experience.		
Risk & Performance Management	Identifies possible future strategic risks which the Board should consider		
NHS Constitution/Equality & Diversity/Communication	Includes where relevant an update on the NHS Constitution and compliance with Equality Legislation		
Attachment: N/A			

TRUST BOARD REPORT –27th October 2016

CHIEF EXECUTIVE'S REPORT

1. National/Regional Issues

1.1 Taking further action to reduce agency spending

NHS Improvement has written to all Chairs, Chief Executives and Directors of Finance to provide further detail on the actions on agency spending.

It has been one year since NHS Improvement introduced the agency rules, at trusts' request, and the sector has delivered reductions in agency spending of over £600 million. Spending on agency staffing across England is now 20% lower than the same period last year. We know of many trusts across the country that have overcome workforce challenges and used the rules as a springboard to improve governance and processes, negotiate lower rates and reduce demand across every staff group. This has been recognised as an excellent and important achievement.

However, agency staff still cost the NHS around £250 million a month – at present the sector is falling short of what is needed. In order to retain costs within the available resources for the NHS, Boards need to ensure that their organisations are doing all they can to take control of agency spending. There is a need to bring an end to paying over the odds for very expensive individuals or relying on the same agency staff members for very long periods of time.

From November NHSi will be sharing data on agency expenditure (in relation to ceilings and total workforce costs) for all trusts in the region. To further support collaboration, starting in November 2016 NHSi will be holding further regional workshops and working to ensure that agency spending forms a key component of STP discussions. There is an expectation on STPs to ensure the agency rules and controls are implemented across the footprint to reduce excess cost and provide services within the System Control Total.

In addition, as part of the broader approach to transparency, from Quarter 2 NHSi will publish in their quarterly finance report trust level data on agency expenditure. This is likely to include the best and worst performing trusts against ceiling and relative to workforce costs.

A new self certification check list has been introduced for Boards to review and to be submitted to NHSi by 30th November 2016. NHSi also require that in all trusts that the chief executive personally sign off on all agency shifts by individuals costing more than £120 per hour and all framework overrides above price cap.

1.2 Improving the safety of maternity care in the NHS

New measures to make giving birth safer, including maternity safety funding and publishing maternity ratings, have been announced. The safer maternity care action plan, designed to dramatically improve the safety of maternity care in the NHS, was announced by the Health Secretary on 17th October 2016. This action plan is part of the national ambition to halve rates of stillbirths, neonatal deaths, maternal deaths and brain injuries that occur during or shortly after birth, by 2030.

The new measures will provide resources for trusts to improve their approach to maternity safety, including £8 million for multi-disciplinary training, with at least £40,000 available to each NHS trust in England. They also will make sure lessons are learned from mistakes and shared openly and transparently across the NHS. The Department of Health will also consult on how to change the litigation culture, which can prevent openness and

transparency, by taking views on a new voluntary compensation scheme as an alternative to costly legal processes.

The safer maternity care action plan also includes:

- a £250,000 maternity safety innovation fund to help create and pilot new ideas for improving maternity care, like the successful PROMPT (Practical Obstetric Multi-Professional Training) scheme pioneered by Professor Tim Draycott in Southmead, which has some of the lowest child mortality rates in Europe
- publishing new maternity ratings for every clinical commissioning group (CCG) across the NHS to improve transparency, raise standards and give families better information about the quality of local maternity services
- a new national Maternal and Neonatal Health Quality Improvement Programme for all trusts to exchange ideas and best practice – a similar scheme in Scotland was linked to a 19% decrease in stillbirths over a 3 year period
- a consultation to develop a ‘safe space’ to allow clinicians to speak openly about things that go wrong without fear that information they disclose may be used against them in court or professional misconduct hearings
- the Healthcare Safety Investigation Branch, modelled on the highly successful Air Accident Investigation Branch, which will be up and running from April 2017

There will also be a consultation on a new rapid resolution and redress (RRR) scheme. The RRR scheme could investigate and learn lessons from more than 500 incidents a year. In cases where harm was avoidable this would offer timely access to financial support without the current obligation on families to launch a formal legal process. At present, the average time families have to wait for resolution of a case is 11.5 years.

Eligible families would be given the option to join an alternative system of compensation that offers support and regular payments without the need to bring a claim through the courts and the scheme would ensure families receive personalised support including counselling, case management and legal advice. A similar scheme operating in Sweden has reduced serious avoidable birth injuries by around 50% in the last 6 to 7 years.

Full details of the report are available at:

<https://www.gov.uk/government/publications/safer-maternity-care>

2. Local Issues

2.1 Mouth Care Matters Profiled at NHS Expo

Our Mouth Care Matters initiative was profiled at the NHS Expo in Manchester and mentioned by Sara Hurley, Chief Dental Officer for NHS England as a showcase example of improving quality care for older patients during their hospital stay. This is a brilliant acknowledgement of what Mili Doshi, consultant in special care dentistry and her Mouth Care Matters team have achieved with the support of Health Education England.

2.2 East Surrey Cancer Support Centre receives Civic Award

Our East Surrey Cancer Support Centre, which opened early this year, was awarded a Civic Award for architecture by the Reigate Society. I am delighted that the newest addition to our SASH health campus has been recognised for the excellent design, sustainability and, most importantly, the positive impact and benefit for local people.

2.3 SaSH Carers Support in national press

Our Trust has also been acknowledged nationally in an article in The Guardian about *John's Campaign*, which aims to give the carers of those living with dementia the right to stay with them in hospital in the same way that parents stay with their sick children. I am pleased that the article also included the SASH carers' passport in their list of good practice and delighted that we are able to offer this vital support to carers and their loved ones.

3. Recommendation

The Board is asked to note the report and consider any impacts on the trusts strategic direction.

Michael Wilson CBE
Chief Executive
October 2016