

TRUST BOARD IN PUBLIC		Date: 22nd February 2017	
		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"> Recovering the cost of NHS treatments given to overseas visitors New national guidance on managing conflicts of interest in the NHS 			
Local:			
<ul style="list-style-type: none"> Freedom to Speak Up Guardian SaSH hosted South East Coast Emergency Medicine Conference 1st Anniversary of Opening of East Surrey Macmillan Cancer Support Centre & Hot Topic Event 			
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 –22nd February 2017 CHIEF EXECUTIVE'S REPORT

1. National/Regional Issues

1.1 Recovering the cost of NHS treatments given to overseas visitors

The Department of Health have put in place new regulations requiring all hospitals to check upfront whether patients are eligible for free NHS treatment will be in place under plans to recover the cost of health treatments provided to patients not ordinarily resident in the UK.

Legal changes will require all hospitals to establish whether patients are eligible for free treatment, and to charge upfront those who are not eligible, for any non-urgent, planned care.

The law will change from April 2017 and this will play an important role in meeting the government's ambition to recover up to £500 million a year from overseas visitors who are not eligible for free care.

The new measures will also require hospitals and NHS bodies to identify and flag a patient's chargeable status so that other parts of the NHS can more easily recoup costs from overseas visitors wherever charges apply.

The government consulted on extending charging rules to areas of NHS care between December 2015 and March 2016. The consultation aimed to support the principle of fairness by making people who are not ordinarily resident in the UK pay for NHS care.

The government will provide support and guidance to the NHS so it can identify those not eligible for free care and address any challenges ahead of the implementation of new legal regulations. NHS Improvement will also be working intensively over the coming months with trusts that have the most potential to recover costs.

1.2 New national guidance on managing conflicts of interest in the NHS

On 9 February 2017 NHS England issued new guidance on managing conflicts of interest in the NHS. This guidance:

- introduces common principles and rules for managing conflicts of interest
- provides simple advice to staff and organisations about what to do in common situations
- supports good judgement about how interests should be approached and managed.

The guidance comes into force from 1 June 2017 and is applicable to the following NHS organisations:

- Clinical Commissioning Groups
- NHS Trusts and NHS Foundation Trusts (including secondary care trusts, mental health trusts, community trusts, and ambulance trusts)
- NHS England

The guidance does not apply to bodies not listed above (i.e. independent and private sector organisations, general practices, social enterprises, community pharmacies, community dental practices, optical providers, local authorities).

However NHSE has invited these organisations to consider implementing the guidance as a means to effectively manage conflicts of interest and provide safeguards for their staff. To help organisations and staff implement this guidance a suite of tools and supporting materials will be made available:

- February 2017: main guidance - Organisations are required to review current processes against the guidance and prepare to amend them in time for 1 June 2017.
- March 2017: model policy content - To make implementation easier a model policy will be released which includes the content of the guidance. Organisations can adopt this policy or use parts of it to update their current policies and procedures.
- April 2017: guides for staff groups To help staff members to understand what they need to do and how the guidance applies to them we will release some short guides for key staff groups: administrative staff, members of strategic governance groups, GPs, secondary care clinicians, pharmacists, dentists, and opticians.

In line with the new guidance we will review our current policy to ensure any required changes are in place by 1st June 2017

Full guidance is available at: <https://www.england.nhs.uk/ourwork/coi/>

2. Local Issues

2.1 Freedom to Speak Up Guardian

I am pleased to introduce to the Board our newly appointed, Freedom to Speak Up Guardian, Catherine Sharpe who has been an urology oncology clinical nurse specialist at SASH for many years, has taken on this important new role as an independent speak up guardian to support any one at SASH to raise any concerns they may have and to ensure that the voice of staff is heard at a senior level.

2.2 SaSH hosted South East Coast Emergency Medicine Conference

SASH has a proud history of working in partnership with our health and community partners to ensure our patients get the best care. During early February we hosted the South East Coast Emergency Medicine Conference, which showcases best practice and shared learning in developing the emergency care we each provide. The event, led by Dr Julian Webb, our clinical lead emergency medicine consultant, was well attended and generated some great conversations. Congratulations also go to Julian who is now the south east coast council representative for the Royal College of Emergency Medicine. This is great recognition for his commitment to continuing to innovate and improve emergency care across the region.

2.3 1st Anniversary of Opening of East Surrey Macmillan Cancer Support Centre & Hot Topic Event

At the end of January we celebrated the opening of the East Surrey Macmillan Cancer Support Centre bringing support to patients and their family and friends closer to home. We joined patients, their friends and family along with colleagues from Macmillan and SASH to mark the first anniversary of the award winning Centre and all that has been achieved in just one year.

In this time the Centre has welcomed more than 1,600 people, affected by cancer, through its doors and provided them with a range of support and advice alongside an ever growing range of complementary therapies and activities. A year certainly goes quickly when good things happen. My thanks go to Shelagh Sheldrick, manager of the centre and her team of volunteers for their hard work and energy in making the centre such a welcoming place to be and for providing a wealth of activities and complementary therapies. My thanks also go to our Macmillan partners for their ongoing support.

Following the anniversary celebrations, we hosted the next in our series of Hot Topic events, with an evening hosted by our specialist cancer care team. It was great to welcome local people to meet the team and learn about the patient's journey when they are referred to the cancer team by their GP. Also taking part in the presentation was local GP Dr Julie Smallwood, who described the role of the GP team in referring patients when there is a concern and also their very important role in reviewing and planning for the future when a patient completes their hospital treatment journey. Giving a really powerful understanding of how it feels to go through this journey were two patients who have both been cared for by the cancer team and who shared their experiences with the audience. My thanks go to our patients and to everyone who took part. We have had some great feedback after the event and it was great to be able to give an insight into the high quality care that the cancer and diagnostics team provide for local people

3. Recommendation

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

Michael Wilson CBE
Chief Executive
February 2017