

TRUST BOARD PUBLIC– AUGUST 2013

Agenda Item Number: 153/13  
Enclosure Number: (2)

<b>Subject:</b>	Report from the Chief Executive
<b>Prepared by:</b> <b>Sponsored by / Presented by:</b>	Ursula Ward, Chief Executive Ben Lloyd, Director of Finance and Deputy Chief Executive
<b>Purpose of paper</b>	To updated the Board on national and local items of interest.
<b>Key points for Trust Board members</b> <i>Briefly summarise in bullet point format the main points and key issues that the Trust Board members should focus on including conclusions and proposals</i>	Note contents of the report
<b>Options and decisions required</b> <i>Clearly identify options that are to be considered and any decisions required</i>	None required, for information
<b>Next steps / future actions:</b> <i>Clearly identify what will follow the Trust Board's discussion</i>	None
<b>Consideration of legal issues (including Equality Impact Assessment)?</b>	Considered, none apparent
<b>Consideration of Public and Patient Involvement and Communications Implications?</b>	None

**Links to Portsmouth Hospitals NHS Trust Board Strategic Aims, Assurance Framework/Corporate Risk Register**

<b>Strategic Aim</b>	<p><b>Strategic aim 1:</b> Deliver safe, high quality patient centred care</p> <p><b>Strategic aim 2:</b> Develop a reputation for excellence in innovation, research &amp; development and education in the top 20% of our peers.</p> <p><b>Strategic aim 3:</b> Become the hospital of choice for general, specialist and selected tertiary services.</p> <p><b>Strategic aim 4:</b> Staff would recommend the trust as a place to work and a place to receive treatment</p> <p><b>Strategic aim 5:</b> Develop sufficient financial strengths to adapt to</p>
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	change and invest in the future.
<b>BAF/Corporate Risk Register Reference (if applicable)</b>	N/A
<b>Risk Description</b>	N/A
<b>CQC Reference</b>	N/A

<b>Committees/Meetings at which paper has been approved:</b>	<b>Date</b>
None	

**Chief Executive's Report**

**Board of Directors – 29 August 2013**

1. **A promise to learn– a commitment to act: Improving the Safety of Patients in England, National Advisory Group on the Safety of Patients in England**
  - A further response to the Francis Report
  - Group chaired by Don Berwick, a leading expert on patient safety, and an ex-advisor to President Obama
  - Key points from the report says the health system must:
    - recognise with clarity and courage the need for wide systemic change
    - abandon blame as a tool and trust the goodwill and good intentions of the staff
    - reassert the primacy of working with patients and carers to achieve health care goals
    - use quantitative targets with caution - they should never displace the primary goal of better care
    - recognise that transparency is essential and expect and insist on it
    - ensure that responsibility for functions related to safety and improvement are established clearly and simply
    - give NHS staff career-long help to learn, master and apply modern methods for quality control, quality improvement and quality planning
    - make sure pride and joy in work, not fear, infuse the NHS
  - Secretary of State is considering the Government's response
2. **Appointment of Dr Dominic Slowie – National Clinical Director for Learning Disability**
  - Professor Sir Bruce Keogh, has announced the appointment of 23 National Clinical Directors (NCDs).
  - Their roles are to work with NHS England to provide clinical leadership and support towards delivering improved health outcomes across the five domains of the NHS Outcomes Framework, set out in objectives within the Secretary of State's Mandate.
  - Dr Dominic Slowie, has been appointed NCD for Learning Disability is the first of these appointments
3. **Local Government Association and NHS England publish vision for £3.8 billion integrated care fund**
  - The Local Government Association and NHS England have published their planning 'vision' for how the pooling of £3.8 billion of funding, announced by the Government in the June spending round, will ensure a transformation in integrated health and social care.
  - The 'Integration Transformation Fund' is a single pooled budget for health and social care services to work more closely together in local areas. The publication today provides a roadmap for local areas to plan in the run up to the fund taking full effect from 2015/16.
  - In the June 2013 spending round the following was announced:

2014/15	2015/16
An additional £200m transfer from the NHS to social care, in addition to the £900m transfer already planned	£3.8 billion pooled budget to be deployed locally on health and social care through pooled budget arrangements.

In 2015/16 the following will apply:

<b>£1.9 billion existing funding continued from 14/15 - this money will already have been allocated across the NHS and social care to support integration</b>
£130 million Carers' Breaks funding.
£300 million CCG re-ablement funding.
c. £350 million capital grant funding (including £220m of Disabled Facilities Grant).
£1.1 billion existing transfer from health to social care. <b>Additional £1.9 billion from NHS allocations</b> Includes funding to cover demographic pressures in adult social care and some of the costs associated with the Care Bill. Includes £1 billion that will be performance related, with half paid on 1 April 2015 (which we anticipate will be based on performance in the previous year) and half paid in the second half of 2015/16 (which could be based on in-year performance).

- To access the ITF each locality will be asked to develop a local plan by March 2014, which will need to set out how the pooled funding will be used and the ways in which the national and local targets attached to the performance-related £1 billion will be met.
- This plan will also set out how the £200m transfer to local authorities in 2014/15 will be used to make progress on priorities and build momentum.
- Plans for the use of the pooled monies will need to be developed jointly by CCGs and local authorities and signed off by each of these parties and the local Health and Wellbeing Board.

#### 4. £500m funding to help ease winter pressures

- The Prime Minister announced that local health and care systems are to receive £250m to ensure the NHS is better prepared for winter this year and next.
- The money will be targeted at local systems which will benefit the most from the extra funding. NHS England, Monitor, the NHS Trust Development Authority and the Association of Directors of Adult Social Services will continue to work closely with the local NHS to identify those areas that will benefit most from this extra funding.
- Given with conditions, the money will be used to support initiatives that best address local needs, with hospitals having to show how they have made improvements.
- Details of how to apply to access the fund are expected in the next couple of weeks.

## **5. NHS TDA places five trusts in special measures**

- The NHS Trust Development Authority has placed five NHS Trusts into special measures.
- The move was triggered by the publication of the NHS England Medical Director's Independent Review which has highlighted concerns. The five Trusts are:
  - North Cumbria NHS Trust
  - United Lincolnshire Hospitals NHS Trust
  - Buckinghamshire Hospitals NHS Trust
  - East Lancashire NHS Trust and
  - George Eliot Hospital NHS Trust.
- The five Trusts were part of a broader review of 14 NHS organisations which were reviewed on the basis of higher than average mortality rates in the last two years. The reviews found that, despite pockets of excellence being found in each organisation, all Trusts must address an urgent set of actions to support improvements in services for patients.
- The NHS Trust Development has suspended their Foundation Trust applications and asking them to set out their plans for implementing the findings of the Keogh Review. Each Trust will have their action plans rigorously scrutinised and the Board leadership at each organisation will be further assessed.