

Council of Governors' Meeting: 5th May 2016

Chief Executive's Report

1. Welcome and Introduction

- 1.1 This paper provides an update to the Council of Governors on the current issues for the Trust. I will be happy to respond to questions Governors may have on these or any other issues.

2. Performance & Governance

- 2.1 The Trust continues to deliver its required Financial Sustainability Risk Rating and Green Governance Rating. In respect of 2015/16, subject to external audit, the financial plan submitted to NHS Improvement for 2015/16 has been achieved and the Financial Sustainability Risk Rating has outturned at a 4 (lowest risk) against a plan of 3.
- 2.2 In my report to the March Council of Governors meeting I highlighted that, in its analysis of the Trust's Quarter 3 position (to 31st December 2015) Monitor noted that the Trust failed to meet the Improved Access to Psychological Therapies (IAPT) six week access target and has signalled its expectation that the Trust addresses the issues relating to this target and promptly achieves sustainable compliance. I am pleased to report that the Trust met the target in March 2016 although this target remains an ongoing challenge.
- 2.3 I am pleased to be able to report that all our 2016/17 contracts with our main Commissioners have now been signed and this position is reflected in the Trust's financial plan.
- 2.4 The Council of Governors' Finance, Planning & Performance Sub Group continues to review the Trust's performance, including key operational targets.

3. Local Developments

3.1 *Operational Plan 2016/17*

The Trust submitted its operational plan to NHS Improvement (previously called Monitor: see below 4.3) on 18th April 2016. The plan describes NHFT's vision as to be a leading provider of quality integrated care for health and wellbeing services, as measured by patient and staff recommendation scores of 80% or more and sustainable revenue. To realise its vision, the Trust will design and lead innovative integrated care pathways that bring together partners from the NHS, social care, voluntary and community sectors. NHFT will ensure services are continually improving in quality and cost effectiveness to enable the Trust to meet the increasing health demands of the catchment population, aligning our intentions with those of

the key health and care stakeholders, minimising competitive threats and capitalising on business development opportunities as they arise.

The Trust's strategy for 2016/17 centres on five strategic themes:

- Develop in partnership;
- Innovate;
- Grow our staff capability;
- Build a sustainable organisation; and
- Quality.

A quality framework and clinical strategy underpin NHFT's corporate strategy, ensuring the Trust delivers quality (i.e. safe, effective, caring, responsive and well-led) services. The clinical strategy has five objectives:

1. Deliver safe, effective and integrated care closer to home
2. Help people to stay healthy and well
3. Develop and embed recovery based approaches
4. Work and learn together
5. Foster a culture of research and innovation

This plan has been developed in the context of a difficult national economic position and a challenged local health and social care economy in Northamptonshire, albeit with an improved national financial settlement for the NHS for 2016/17. In the context of the above, the Trust has developed a plan for 2016/17 that shows a surplus position of £0.2 million after addressing an underlying deficit of £3.7 million carried forward from 2015/16. Delivery of the proposed 2016/17 annual plan would result in the maintenance of an overall risk rating of three. This will provide the necessary organisational stability to allow the Trust, alongside health and social care partners, to collectively develop and refine plans for the necessary transformational change to meet the efficiency gains required beyond 2016/17 as well as facilitating improvements to joined-up care for patients.

3.2 Sustainability and Transformation Plan (STP)

As I have previously outlined, the other key component of this year's planning process is the requirement to develop a Sustainability and Transformation Plan (STP) which involves a local collaborative approach comprising the Clinical Commissioning Groups, Northamptonshire County Council, Kettering and Northampton General Hospitals and Primary Care Federations/Super Practice. The 'transformation footprint' for the STP will be Northamptonshire, but local leaders will develop four place-based delivery plans around the four natural geographies within the county covered by the system's four primary care organisations. The overall lead for our STP is John Wardell- Accountable Officer of Nene CCG.

System leaders have agreed a set of overarching principles for the STP including a focus on prevention and wellbeing, commissioning through outcomes, affordability and new models of care. The STP will be based around four care pathways: Wellbeing and Prevention, Complex Care and Long Term Conditions Management, Scheduled Care and Urgent Care.

The STP is due to be submitted at the end of June 2016 and Governors will be kept briefed on the progress in respect of both the Operational Plan as well as the STP.

3.3 *Health and Wellbeing Strategy*

The Northamptonshire Health and Wellbeing Board has now launched *Supporting Northamptonshire to Flourish*, its Joint Health and Wellbeing Strategy for Northamptonshire 2016-2020. The strategy builds upon *In Everyone's Interest* 2013-2016 and outlines its intentions as a Health and Wellbeing Board moving forward. It has been developed by the Board (which includes NHFT) in collaboration with local partners from around the county.

This strategy is based on the available evidence locally, nationally and internationally and takes into consideration local organisational health and wellbeing strategies, national priorities, the Joint Strategic Needs Assessment, and health and wellbeing trends in Northamptonshire. Three underpinning principles guided the selection of priorities for the strategy: those that can only be tackled by working together as a Board; those that will have a significant impact on health inequalities; and those that have a longer term impact, beyond the period of the strategy.

The vision contained in the strategy is to 'improve the health and wellbeing of all people in Northamptonshire and reduce health inequalities by enabling people to help themselves'.

Four priorities have emerged:

- 1. Giving every child the best start**
- 2. Taking responsibility and making informed choices**
- 3. Promoting independence and quality of life for older adults**
- 4. Creating an environment for all people to flourish**

I was particularly encouraged that the Strategy explicitly recognises that there is no health without mental health and therefore the Board has prioritised action to improve mental wellbeing, tackle social isolation and ensure everybody, no matter what their physical ability, can participate fully in the county.

By working together, the Health and Wellbeing Board's aim, through the Strategy, is to create a better quality of life and improved outcomes for the people of Northamptonshire. *Supporting Northamptonshire to Flourish* sets out a new vision for the county and provides an unrivalled opportunity to establish for the first time a unified approach to health and wellbeing with potential to achieve real and meaningful change for the benefit of all.

3.4 *First for Wellbeing Launch*

I am delighted to say that First for Wellbeing, the new community interest company was launched on 1st April 2016. First for Wellbeing is a joint venture between NHFT, Northamptonshire County Council and the University of Northampton. Together the three founding organisations have a shared vision for improving the physical, mental and social wellbeing of the population of Northamptonshire.

First for Wellbeing will deliver a range of core wellbeing services. Some of these were existing NHS or Council services such as the Stop Smoking service, which have moved over to reside within the First for Wellbeing family of services.

The core service offering will consist of weight and alcohol management, stop smoking programmes, financial management, housing support, employment and adult learning services, emotional health support and services to promote community inclusion.

This is an important initiative in which I know Governors have taken an active interest and I hope will continue to do so as the new organisation continues to develop and mature.

3.5 Volunteering Coordinator

I believe volunteering has always played an important role in the life of the Trust and there is further potential to develop in this area. I am therefore very pleased to report that NHFT has commissioned Voluntary Impact Northamptonshire (VIN) to provide a Volunteering Coordinator for the Trust, Mandy Keyes.

The initial focus of the coordinator is to identify the various volunteers and map out the volunteering opportunities there are in the Trust. This initiative is, in part, a response to the Savile Inquiry and resulting recommendations (particularly for the NHS) but also to ensure we have appropriate and consistent policies, procedures, processes, structures and support for existing, and new volunteers across NHFT. Mandy's role is also to coordinate the recruitment of new volunteers. A further component will be to develop appropriate support packages/training for managers so they can better support volunteers.

3.6 Staff awards

I am delighted to share with you our recent NHFT Quality Awards winners, as well some regional and national award winners. A huge well done to all the winners and runners up, they are great advocates of going the extra mile in providing excellent patient care and supporting their teams.

Quality Awards:

Leadership award – Deb Streeter, Lesley Robinson, Jo Whitcombe from Integrated Sexual Health Services

PRIDE award – PMVA team and Tracey Shepherd, CPN

Unsung hero award – Gillian Felton, Admin/Secretary

Quality care award – Cheryl Corrodus, Occupational Therapist

NHS ambassador award – Corby Collaborative Care Team

Patient choice award - Cheryl Corrodus, Occupational Therapist

Health Education England – East Midlands hosted the first Excellence in Education Awards. 230 nominations were received and we have two winners within the Trust:

Amy Johnson, charge nurse, Berrywood Hospital – winner of Special Recognition Award
Susan Parris, Podiatry, first runner up of Mentor of the year

NHS Leadership Recognition Awards: Judith Glashen, clinical governance facilitator, won the Inclusivity Leader of the Year Award in November and then went on to the national award ceremony in London in March. Judith didn't win the overall category but nevertheless many congratulations to Judith on being a finalist for these awards.

4. National Developments

4.1 *Learning from Mistakes League*

I briefly verbally mentioned this document at the March Council of Governors meeting but wanted to give you a greater insight into its key findings. It is pleasing to be able to report that the Trust has been ranked in the top quarter of NHS trusts (56th out of 230 NHS Trusts) in the Department of Health's 'learning from mistakes league' and we have achieved a standard of 'good'.

The league, which has been published for the first time, is designed to look at the openness and transparency in NHS provider organisations. Trusts are ranked according to their scores in relation to 'key findings' in their staff surveys that are strongly relevant to reporting and learning as well as how they report incidents to the National Reporting and Learning System (NRLS) and taking factors such as reports of bullying and harassment into account.

This year's League shows that 120 organisations were rated as outstanding or good, including us, 78 had significant concerns and 32 had a poor reporting culture. These findings come at the same time as the Health Secretary Jeremy Hunt announces ambitious plans to improve safety and transparency within the NHS. These plans include the development of an independent Healthcare Safety Investigation Branch and legal protection for anyone giving information following a hospital mistake.

The positive results of the 'Learning from Mistakes League' are encouraging as this indicates how we take reporting incidents and near misses very seriously at NHFT and that we are making continued progress in promoting an open and honest culture within the organisation. We will continue to strive to do more and have recently joined the national NHS 'Sign up to Safety' initiative which shows our on-going commitment to patient safety and taking action to improve things where we need to.

4.2 *Sign up to Safety Initiative*

NHFT has signed up to the Sign up to Safety initiative which is a new national patient safety campaign with the mission to strengthen patient safety in the NHS and make it the safest healthcare system in the world. I feel it's a really positive step for us in our commitment to providing quality, safe care for all.

Organisations who Sign up to Safety commit to strengthen patient safety by:

- Setting out the actions they will undertake in response to the five Sign up to Safety pledges and agree to publish this on their website for staff, patients and the public to see.
- Committing to turn their actions into a safety improvement plan which will show how organisations intend to save lives and reduce harm for patients over the next 3 years.

The five Sign up to Safety pledges are

1. Putting safety first. Commit to reduce avoidable harm in the NHS by half and make public our locally developed goals and plans
2. Continually learn. Make our organisation more resilient to risks, by acting on the feedback from patients and staff and by constantly measuring and monitoring how safe our services are
3. Being honest. Be transparent with people about our progress to tackle patient safety issues and support staff to be candid with patients and their families if something goes wrong
4. Collaborating. Take a lead role in supporting local collaborative learning, so that improvements are made across all of the local services that patients use
5. Being supportive. Help people understand why things go wrong and how to put them right. Give staff the time and support to improve and celebrate progress.

Further information on Sign up to Safety is available via the following link -

<http://www.england.nhs.uk/signuptosafety/>

Our next step is to develop a Safety Improvement Plan based on our five safety pledges and the areas we want to focus on.

4.3 National Whistleblowing Policy

Following a public consultation on the draft policy in November last year, NHS Improvement and NHS England have today published a single national integrated whistleblowing policy to help standardise the way NHS organisations should support staff who raise concerns.

Recommended by Sir Robert Francis in his Freedom to Speak Up review, this new policy contributes to the need to develop a more open and supportive culture that encourages staff to raise any issues of patient care quality or safety.

The new policy will ensure:

- NHS organisations encourage staff to speak up and set out the steps they will take to get to the bottom of any concerns;

- organisations will each appoint their own Whistleblowing Guardian, an independent and impartial source of advice to staff at any stage of raising a concern;
- any concerns not resolved quickly through line managers are investigated;
- investigations will be evidence-based and led by someone suitably independent in the organisation, producing a report which focuses on learning lessons and improving care;
- whistleblowers will be kept informed of the investigation's progress; and
- high level findings are provided to the organisation's Board and the policy will be annually reviewed and improved.

To support teams and managers to identify issues of concern, how to report these and understand more about the Raising Issues of Concern Policy, the Learning and Development and Human Resources team have developed two interactive and educational workshops, one for managers and one for teams, to help staff understand their responsibilities when faced with issues of concern. These workshops are compulsory for all staff to attend.

4.4 Launch of NHS Improvement

NHS Improvement formally comes into being on 1 April, bringing together Monitor and the NHS Trust Development Authority and groups from three other organisations: NHS England's Patient Safety Team and Advancing Change Team; NHS Interim Management and Support's two Intensive Support Teams; and the National Reporting and Learning System.

The organisation is the national improvement body responsible for overseeing foundation trusts, NHS trusts and independent providers.

4.5 New National Mental Health Director

Claire Murdoch, Chief Executive of Central and North West London Foundation Trust, has been appointed as NHS England's new National Mental Health Director, with responsibility for implementing the NHS's new programme of mental health reforms.

Claire is a registered mental health nurse as well as a director of Imperial Academic Health Science Partnership, a non-executive director at Health Education England NW London and Chair of the Cavendish Square Group.

She will be responsible for furthering the NHS programme to achieve parity between physical and mental health services following the Mental Health Taskforce's recent report

5. Recommendation

5.1 The Council of Governors is asked to receive this report.

Angela Hillery
Chief Executive
25th April 2016