

**Council of Governors' Meeting: 5<sup>th</sup> March 2014****B****Chief Executive's Report****1. 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 achieved its planned Financial Risk Rating (FRR) and a Green Governance Rating for the quarter ended 31<sup>st</sup> December 2013 and expects to maintain its planned position for the remainder of 2013/14.
- 2.2 The Council of Governors' Finance, Planning & Performance Sub Group continues to review the Trust's performance, including key operational targets.
- 2.3 The new NHS Provider Licence came into effect on 1<sup>st</sup> April 2013, replacing Foundation Trusts' Terms of Authorisation. Foundation Trusts are required by Monitor to be compliant with the Provider Licence conditions. The Governance Committee, at its meeting on 18<sup>th</sup> February 2014, received a report which provided positive assurance over Provider Licence compliance. The Finance, Planning & Performance Sub Group is also scheduled to receive this report at its 17<sup>th</sup> March 2014 meeting.
- 2.4 The Governance Committee also received at its February 2014 meeting a self-assessment against the Department of Health's Board Governance Assurance Framework (BGAF). Whilst the BGAF is designed to support aspirant Foundation Trusts in their application process, the majority of the tool is relevant to authorised Foundation Trusts. The BGAF covers a range of issues, including Board composition and skills, performance reporting, and stakeholder relationships. This self-assessment provides positive assurance about the robustness of the Board's governance structures and will inform preparation for the future independent governance reviews which form part of Monitor's Risk Assessment Framework. If Governors wish to receive this self-assessment, Paul Martin can make it available.

**3. Closing the Gap: Priorities for essential change in mental health**

- 3.1 The Department of Health published on 20<sup>th</sup> January 2014 "Closing the Gap: Priorities for essential change in mental health" which sets out its priorities for bridging the gap

between its long term ambitions for mental health and shorter term actions. The Government strategy, “No Health Without Mental Health”, was launched in 2011, followed by its 2012 implementation framework and suicide prevention strategy. These earlier papers have a long term focus. The “Closing the Gap” report seeks to show how changes in local service planning and delivery will make a difference in the next two or three years to the lives of people with mental health problems.

3.2 “Closing the Gap” covers 25 areas where the most immediate change and improvement is expected. These priorities are set out under four key themes:

- Increasing access to mental health services
- Integrating physical and mental healthcare
- Starting early to promote mental wellbeing and prevent mental health problems
- Improving the quality of life of people with mental health problems

3.3 I have attached the Foundation Trust Network’s briefing on this important document. The Trust’s mental health transformation agenda is very much consistent with the “Closing the Gap” priorities but obviously we will ensure the document’s key messages are reflected in our work going forward.

#### 4. Healthier Northamptonshire

4.1 In my January 2014 report to the Council of Governors I described some of the headlines from the various workstreams of Healthier Northamptonshire. The Boards of the various local NHS organisations, together with Northamptonshire County Council, are meeting on 26<sup>th</sup> February 2014 to review progress of the programme and to discuss the key priorities moving forward. I will update the Council of Governors at the 5<sup>th</sup> March 2014 meeting.

#### 5. Commissioning & Service Developments

##### 5.1 *Better Care Fund*

5.1.1 The Better Care Fund (BCF) is “a single pooled budget for health and social care services to work more closely together in local areas, based on a plan agreed between the NHS and local authorities” (Everyone Counts – Planning for Patients 2014/15 to 2018/19).

5.1.2 The BCF is not new money but requires health and social care to put a minimum amount of funding into a pooled budget. This local fund will be used to drive integration and improve outcomes for patients, service users and carers.

- 5.1.3 In 2014/15 the BCF pooled budget in Northamptonshire will total approximately £12m. This will be used to fund a number of new, existing and redesigned services which will impact on one of the health and social care system's main challenges – urgent care. The 2014/15 schemes are designed to align with the model of health and social care integration developed by Healthier Northamptonshire.
- 5.1.4 In 2015/16 the BCF pooled budget will be circa £43m. This will be used to fund three key components of the Healthier Northamptonshire health and social care integration model: community hubs, community beds and crisis/discharge services. These will be supported by a fourth component: self care and enabling people to improve their health and wellbeing.
- 5.1.5 The Healthier Northamptonshire programme is currently developing plans to take these components forward to detailed design and implementation stages.

## 5.2 *Community Beds Provision*

- 5.2.1 The Trust continues to lead the countywide programme of work to improve the care and services provided for frail and elderly patients. In line with the Healthier Northamptonshire initiative, the Trust and Northampton General Hospital (NGH) are working closely together with the intention that the community beds currently provided by NGH will transfer to the Trust on 1<sup>st</sup> April 2014, thereby enabling the ongoing development of this care pathway.
- 5.2.2 A process is now underway in partnership with NGH to transfer this community bed provision to the Trust. The 84 beds are located at Danetre Hospital, Isebrook Hospital and Corby sites.
- 5.2.3 The staff currently working in these services will transfer across to the Trust under a TUPE process. The consultation process at NGH is already underway, supported by the Trust's HR team. We look forward to welcoming these staff into our organisation in due course.
- 5.2.4 Management of the community bed stock is entirely consistent with the Trust's strategic direction and I am pleased that we have managed to secure this service development opportunity.

### 5.3 *Children and Young Person's Services*

5.3.1 Governors will already be aware that Commissioners have indicated their intention to tender Children and Young Person's Services in the county. Our current understanding of the timetable is that the service specification will be finalised in April 2014 and the procurement process itself will start in August 2014. Contract award is expected in December 2014/January 2015 with a go live date for the new service scheduled for 1<sup>st</sup> April 2015.

5.3.2 The Trust is already progressing its work on looking at a future service model for these services and is engaging with staff in this process. I know Governors have expressed a keen interest to understand more about Children and Young Person's services and I very much support the Governor Briefing on this subject being planned for April 2014.

### 5.4 *New Older Peoples' Unit at St Mary's Hospital, Kettering*

5.4.1 In my January 2014 report I confirmed that the new 24-bedded Older Peoples Unit at St Mary's Hospital was nearing completion. The scheme, costing approx. £7.4m, replaces the outdated inpatient accommodation of Ian Bennett and Carlton wards.

5.4.2 I am pleased to report that the current intention is for patients to move into the new unit in the week commencing 24<sup>th</sup> March 2014. Prior to this, staff and Governors will have the opportunity to visit the unit. Further details of this invitation will follow in due course.

## 6. Annual Plan Update

6.1 I know an update on the development of our 2014/15-2015/16 Annual Plan is elsewhere on the Council's meeting agenda. However, I did want to acknowledge the ongoing contribution of Governors and Foundation Trust members to the process. The two member events held on 21<sup>st</sup> and 25<sup>th</sup> February 2014 in Northampton and Kettering respectively were well attended and the contributions made by participants have been most valuable.

## 7. Staff Survey Results for 2013

7.1 The staff survey results for the Trust for 2013 were published at the end of February 2014 and can be accessed via this link:

<http://www.nhsstaffsurveys.com/Page/1010/Home/Staff-Survey-2013/>

7.2 I am determined to lead this Trust so that we would all recommend it as a place to work and, along with patients, service users and carers, as a place to receive care. When I read the survey results, I see both reasons to feel encouraged and reasons to feel concerned. Here are a few headlines:

- For the large majority of scores, there was no change from 2012
- Staff have told us that communication from senior management has improved
- The number of staff who have had an appraisal has risen again
- The number of staff experiencing bullying, harassment and abuse from other staff has decreased
- Staff motivation is strong but job satisfaction is not as good
- Staff are good at reporting errors, near misses or incidents but we still have some work to do to make staff feel the reporting procedures are both fair and effective.

7.3 Looking forward, I want to understand how everyone can work together to achieve a big improvement in the number of staff who would recommend this Trust as a place to work (49% down from 54% in 2012) and as a place to receive care (60% down from 61% in 2012).

7.4 The survey results provide useful information about what staff feel but not always why they feel that way. I have asked the executive directors to take the lead for their areas of responsibility so that we can respond in meaningful ways.

7.5 I know the Staff & Resources Sub Group will examine the survey in more detail and I look forward to receiving any observations it has on the results, together with any ideas for making improvements.

## 8. Operational and Clinical Management Structure

8.1 I am pleased to confirm the substantive appointments to key operational and clinical management roles. Following the appointment of Richard McKendrick, Chief Operating Officer, his three deputy leads are:

- Sandra Mellors, Deputy Director for adult services
- Sharon Toyer, Deputy Director for children's services
- Des McMorrow, Interim Deputy Director for mental health and specialty services

8.2 Following the consultation process with the clinical directorate during late 2013, a number of appointments have been made in regards to the clinical structure. The following clinical leads report to Alex O'Neill-Kerr, Medical Director:

- Deborah Manger - adult services
- Sachin Sankar - childrens services
- Agastya Nayar - adult mental health

8.3 This operational and clinical structure was in place from 1 February 2014.

9. Recommendation

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

Angela Hillery  
Chief Executive  
25<sup>th</sup> February 2014