

| TRUST BOARD IN PUBLIC | Date: 31 Agenda It | January 2013 em: 1.4 | |
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| REPORT TITLE: | CHIEF EXECUTIVE'S REPORT | | |
| EXECUTIVE SPONSOR: | Michael Wilson Chief Executive | | |
| REPORT AUTHOR: | Gillian Francis-Musanu Director of Corporate Affairs | | |
| REPORT DISCUSSED PREVIOUSLY: (name of sub-committee/group & date) | N/A | | |
| Purpose of the Report and Action Required: (√) | | | (√) |
| This report provides members with key updates | | Approval | |
| and highlights from a national and local perspective to inform the Board's unders | tanding of | Discussion | |
| policy, performance or new development | ts. | Information | √ |

Summary of Key Issues

National Issues:

- NHS Trust Development Authority planning guidance for 2013/14
- NHS Commissioning Board planning guidance for 2013/14
- Winterbourne View Report Governments final review
- New child abuse alert system for hospitals
- Launch of pathology quality assurance review

Local Issues:

- New Chief Nurse
- Proud to care awards
- Health & well being day
- Winter pressures

Relationship to Trust Corporate Objectives & Assurance Framework:

Objective 4 – Become a sustainable, effective organisation.

Corporate Impact Assessment:

| Legal and regulatory implications | Ensures the Board are aware of new requirements. | |
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| Financial implications | N/A | |
| Patient Experience/Engagement | Highlights national requirements in place to improve patient experience. | |
| Risk & Performance Management | N/A | |
| NHS Constitution/Equality & Diversity/Communication | N/A | |
| Attachments: | | |



N/A



CHIEF EXECUTIVES REPORT

1. National Issues

1.1 Planning Guidance for NHS Trust Boards for 2013/14

The NHS Trust Development Authority (TDA) has published "Toward High Quality, Sustainable Services" which is the Planning Guidance for NHS Trust Boards for 2013/14 which sets out the expectations of what NHS Trusts will deliver in the coming year and how the TDA will support Trusts to achieve high quality and sustainable care for the patient and communities they serve. The guidance set out clear expectations on:

- Quality
- Delivery
- Sustainability

Delivery against these three areas is intended to ensure that there is real improvement in the quality of care provided to patients throughout 2013/14.

The guidance also set out a clear timetable and supporting technical guidance that by 31st March 2013 all Trusts should have an integrated Operating Plans for 2013/14. The first draft Operating Plan for Surrey & Sussex Healthcare NHS Trust was submitted to the TDA on 25th January 2013. The final plan will be presented to the Board for approval at the March 28th March 2013. Full details of the guidance can be found on http://www.ntda.nhs.uk/

1.2 NHS Commissioning Board Planning Guidance 2013/14

The NHS Commissioning Board has published its planning guidance for NHS commissioners, called 'Everyone Counts: Planning for Patients 2013/14'. The guidance covers a set of outcomes against which to measure improvements. It outlines five offers – moves toward seven-day a week working for routine NHS services, greater transparency and choice for patients, more patient participation, better data to support the drive to improve services, and higher standards and safer care.

For further information go to: http://www.commissioningboard.nhs.uk/everyonecounts/

1.3 Winterbourne View Report – Governments Final Review

The Government has published its final review into the criminal abuse that took place at Winterbourne View Hospital. This sets out a programme of change to rapidly improve the standard of care for vulnerable people across the health and care system, with specific recommendations for healthcare providers.





The programme of action includes:

- by spring 2013, the department will set out proposals to strengthen accountability
 of boards of directors and senior managers for the safety and quality of care which
 their organisations provide
- by June 2013, all current placements will be reviewed, everyone in hospital inappropriately will move to community-based support as quickly as possible, and no later than June 2014
- by April 2014, each area will have a joint plan to ensure high quality care and support services for all people with learning disabilities or autism and mental health conditions or behaviour described as challenging, in line with best practice
- as a consequence, there will be a dramatic reduction in hospital placements for this group of people
- the Care Quality Commission will strengthen inspections and regulation of hospitals and care homes for this group of people, including unannounced inspections involving people who use services and their families
- a new NHS and local government-led joint improvement team will be created to lead and support this transformation

A further report on progress to implement these recommendations will be published by December 2013.

For further information go to: http://www.dh.gov.uk/health/2012/12/final-winterbourne/

1.4 New Child Abuse Alert System For Hospitals

Hospitals will have a new system to help doctors and nurses spot children suffering from abuse and neglect. It will be known as the 'Child Protection – Information System' and will enable medical staff in emergency departments or urgent care centers to see if the children they treat are subject to a child protection plan, or are being looked after by the local authority, or have frequently attended their units.

They will be able to use this information as part of their overall clinical assessment, along with data about where and when children have previously been receiving urgent treatment. This will help them build up a better picture of what is happening in the child's life so they can alert social services if they think something might be wrong. Work on the system begins in early 2013 and it will start to be introduced to NHS hospitals in 2015.

1.5 Launch of Pathology Quality Assurance Review

A review of quality assurance arrangements for NHS pathology services has been announced, to be led by Dr Ian Barnes, the National Clinical Director for Pathology. It will scrutinise NHS arrangements for the oversight and safeguards of laboratory testing. Serious incidents are rare but concerns were raised at Sherwood Forest NHS Foundation Trust in October about pathology testing of breast cancers, used





to choose the best treatment for each patient, where the care of a small number of women was disadvantaged.

The review, expected to report at the end of 2013, will bring together experts in the field to explore how quality assurance systems can be strengthened and how organisations can be more confident about the monitoring of the quality of care they offer the public.

2. Local Issues

2.1 New Chief Nurse

We are pleased to welcome the Trust's new Chief Nurse, Susan Aitkenhead who started on 10th January 2013. Susan brings with her a raft of experience in caring for patients and I know she is looking forward to joining our great team of nurses and helping us further improve our patients' experience.

2.2 Proud to Care Awards

The hospital has joined NHS Sussex in the launch of the 'Proud to Care' awards where patients, their families and carers are invited to join the celebration of nursing by nominating an individual or team for a Proud to Care Nursing Award. The awards will celebrate the very best patient care that nurses and care givers deliver in hospitals, the community, primary care, and nursing homes. From the feedback we get from patients, we have many individuals and teams who live and breathe the principles of quality care: Care, Compassion, Competence, Communication, Courage and Commitment and we hope to see lots of our staff win these awards in recognition of their hard work.

2.3 Health & Well Being Day

Our annual staff and volunteers Health and Wellbeing day was held on Wednesday 9 January which was a resounding success with over 600 members of staff attending throughout the day.

2.4 Winter Pressures

The Board will be aware that the health economy is facing challenges during this current winter period. This is multi-factorial and is combination of the following; high demand, difficulty in discharging patients with on-going health needs, and sickness absence over the holiday period. We have commissioned some community beds, an ambulance for out of hour transfers where appropriate and had far greater dialogue with community partners in addition to beginning to work on a definition of what an acute bed is for which will be agreed with all stakeholders. In the longer term both Surrey and Sussex CCGs have agreed to fund a Community Care of the Elderly consultant who will work across traditional primary and secondary care boundaries.

3. Recommendation

The Board is asked to note the report.

