

Whittington Health Trust Board

28 November 2012

Title:	Chief Executive's Report to the Board						
Agenda item:	6		Paper			B	
Action requested:	<i>For discussion</i>						
Executive Summary:	<p>The report updates the Board with local, regional and national policy changes that will affect the organisation and key issues facing the Trust.</p> <p>Headlines for November:</p> <ul style="list-style-type: none"> • The NHS Mandate • Norovirus outbreak in wards • Delay to FT application process • "Vision 2017 - Transforming Healthcare for Tomorrow" - Whittington Health's Five Year Strategy 						
Summary of recommendations:	The Board is asked to discuss the report.						
Fit with WH strategy:	This report provides an update on key issues that could affect the achievement of the WH strategy.						
Reference to related / other documents:	Month 7 Finance Report FT Application Progress Report						
Date paper completed:	20 November 2012						
Author name and title:	Dr Yi Mien Koh Chief Executive			Director name and title:	Dr Yi Mien Koh Chief Executive		
Date paper seen by ET	N/A	Equality Impact Assessment complete?	yes	Risk assessment undertaken?	yes	Legal advice received?	N/A



Chief Executive's Report to the Board

28 November 2012

1. Introduction

The purpose of this report is to update the board on local, regional and national policy changes that will affect the organisation and set out the key issues facing the Trust.

2. The NHS Mandate

The first Mandate (<http://www.dh.gov.uk/health/2012/11/nhs-mandate/>) between the Government and the NHS Commissioning Board, setting out the ambitions for the health service for 2013-15, was published on 13 November.

The Mandate is structured around five key areas where the Government expects the NHS to make improvements:

- preventing people from dying prematurely
- enhancing quality of life for people with long-term conditions
- helping people to recover from episodes of ill health or following injury
- ensuring that people have a positive experience of care
- treating and caring for people in a safe environment and protecting them from avoidable harm.

The key objectives contained within the Mandate include:

- improving standards of care and not just treatment, especially for the elderly
- better diagnosis, treatment and care for people with dementia
- better care for women during pregnancy, including a named midwife responsible for ensuring personalised, one-to-one care throughout pregnancy, childbirth and the postnatal period
- implementing the Friends and Family Test from next April – to enable patients to give feedback on which wards, A&E departments, maternity units and hospitals are providing the best care
- by 2015 everyone will be able to book their GP appointments online, order a repeat prescription online and talk to their GP online
- putting mental health on an equal footing with physical health – starting with timely access to treatment
- preventing premature deaths from the biggest killers (cardiovascular disease, respiratory disease, liver disease and cancer)
- transparent reporting of measures so that, by 2015, everyone should be able to find out how well their local NHS is providing the care they need, with the publication of the results it achieves for all major services.

Implementation details are expected to be set out in the annual Operating Framework due to be published in the week beginning 17 December.

3. Norovirus outbreak in wards

There is currently a high number of Norovirus cases in the community and an increased number of staff are absent from work due to suffering from the viral illness. On 13 November, eight patients and three staff in Cloudesley Ward reported having symptoms of diarrhoea. We closed the ward but it has since reopened, thanks to the efficiency of facilities, bed management and nursing staff. The outbreak spread to Montuschi ward (now closed) where 10 patients and a staff member were affected, and Ifor ward (which remains open) where three patients and one parent were affected. The Trust Infection Prevention and Control Team led by Dr Julie Andrews acted quickly to contain the outbreak which is now under control.

4. Finance

The in month position is £19k ahead of plan. This includes an actual surplus in month of £497k against a planned surplus of £478k (all figures on IFRS basis). The cumulative position is £38k worse than plan, which includes a cumulative surplus of £1,231k against a planned surplus of £1,269k.

Included within the month 7 position outlined above are non recurrent adjustments to income & expenditure of approximately £2,468k. If this favourable movement had not happened, then the in month position would show a deficit of £1,237k.

As reported in previous months, the key area to note in terms of adverse budget variances relates to slippage and non achievement of Cost Improvement Programmes. Achievement in the year to date is £985k below the planned level.

At the current time we are still forecasting a surplus position in line with the plan, but this is heavily dependent on a continued improvement in the run rate, and improvement in performance against CIP targets.

5. Delay to FT application process

The Trust Board decided last week to delay our Foundation Trust (FT) application by three months. The delay has been agreed with NHS London who supports our decision. This postponement should have no significant impact on our overall path to FT status.

Due to the significant financial challenges posed by our local health economy, we wish to take more time to strengthen a number of key aspects of our strategic and financial plans. We are working in a very difficult financial climate

and we have to have robust plans in place to demonstrate that we are a financially sound organisation.

We want to take the extra time to ensure our staff are fully engaged with the process. We also want our partners, namely GPs commissioners, to be fully engaged with what we are doing and what we aim to achieve going forward.

The delay is not a reflection on our progress to date. All of our recent reviews have been successful and the progress so far confirms that many important aspects of our plans including quality and governance are on track. The Board has agreed to take the extra time to ensure that we get all of the elements right before we submit our FT application.

6. Vision 2017 - Transforming Healthcare for Tomorrow

"2017 Vision - Transforming Healthcare for Tomorrow" is Whittington Health's strategy for the next five years. The mission is to provide best value care - high quality care at low cost with outstanding patient experience.

The strategy sets out new ways to engage with individuals and help them achieve their health and healthcare goals. It describes partnering with GPs, social care and other healthcare providers to expand patient access to health care, improve care coordination, and achieve the triple aims of improved health outcomes (quality), lower total healthcare costs and increased patient satisfaction.

The strategy describes the transformational changes that will enable the Trust to achieve its five strategic objectives.

Yi Mien Koh

20 November 2012