

Whittington Health Trust Board

24 April 2013

Title:	Chief Executive's Report to the Board						
Agenda item:	13/056		Paper			2	
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 April:</p> <ul style="list-style-type: none"> • Accountability framework for NHS trust boards • CQC Inspection report • Changes to national terms and conditions handbook • Intensive Support Team review of Cancer and 18 weeks Referral to Treatment (RTT) pathway 						
Summary of recommendations:	The Board is recommended to discuss the report.						
Fit with WH strategy:	This report provides an update on key issues that could affect the achievement of WH strategy.						
Reference to related / other documents:							
Date paper completed:	15 April 2013						
Author name and title:		Dr Yi Mien Koh Chief Executive		Director name and title:		Dr Yi Mien Koh Chief Executive	
Date paper seen by EC	n/a	Equality Impact Assessment complete?	N	Risk assessment undertaken?	N	Legal advice received?	N



Chief Executive's Report to the Board

24 April 2013

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. Accountability Framework for NHS Trust Boards

The NHS Trust Development Authority published the Operating Framework for NHS Trust boards on 5 April. *Delivering High Quality Care for Patients: The Accountability Framework for NHS Trust Boards* sets out clear rules under which trusts are required to operate. The framework is underpinned by clear principles which will guide the TDA's judgement on both their operational decisions, as well as their long term strategic ambitions to achieve an all FT landscape.

3. Finance Report

The month 12 position is £329k worse than the planned position in month and £52k better than planned cumulative year to date. The annual target for the year of £3.56m has therefore been met at this stage subject to the Audit of the Final Accounts that are currently being prepared.

The CIP delivery is 100% of the £13.1m target with approximately £0.5m being delivered non-recurrently.

The 2013/14 financial plan sets a break even position after targeting a £50m cost improvement programme, reflecting a range of cost pressures and reducing levels of income. The CIP plan will be profiled to ensure that slippage is minimised during the early part of the year.

4. Care Quality Commission Inspection Report

The Care Quality Commission (CQC) conducted its annual visit to the Whittington Hospital on 29 January 2013. The final report is now published on the CQC website and can be viewed by clicking on the link <http://www.cqc.org.uk/directory/RKEQ4>.

Overall the report was complimentary about the quality of care provided by the Whittington Hospital. The CQC found the Trust to be compliant on ten of the 11 Health and Social Care Act 2008 essential standards but did not meet Regulation 9 HSCA 2008 - care and Welfare of people who use services (page 24).

We took immediate action to achieve compliance with the standard which relate to the care of medical outliers on Betty Mansell ward. This will be confirmed in our response to the report to CQC to be submitted on 20 April.

5. Changes to National Terms and Conditions Handbook

In February 2013 a pay circular setting out recent changes to NHS national terms and conditions was issued. The changes had been the subject of negotiation throughout 2012 and represent the first substantial revisions introduced since 2004. Details of these changes, as now included in the revised terms and conditions handbook are set out below.

- for staff in bands 8C, 8D and 9, pay progression into the last two points in a band will become annually earned, and only retained where the appropriate local level of performance is reached in a given year
- progression through all incremental points in all pay bands to be conditional on individuals demonstrating that they meet locally agreed performance requirements
- the removal of accelerated pay progression associated with preceptorship for staff joining pay band 5 as new entrants
- the scope to put in place alternative, non AfC, pay arrangements for Band 8C and above
- new guidance on the principles to be followed regarding workforce re-profiling , including the need to follow the processes set out in the NHS job evaluation handbook and the application of local organisational change policies to protect staff in cases of redeployment into lower grade posts.
- with effect from April 1st 2013 pay during sickness absence will be paid at basic salary level and not including any allowance or payments linked to working patterns or additional work commitments. This change will not apply to staff who are paid on spine points 1 - 8 of Agenda for Change, or to those whose absence is due to work-related injury or disease.

During April Human Resources staff will brief managers in Divisions and Directorates to provide more information about the implementation of these changes.

6. Intensive Support Team review of Cancer and 18 weeks Referral to Treatment (RTT) pathway

Following the issues raised in the endoscopy referral management process, the COO invited the Intensive Support Team (IST) to review the trust processes for 18 weeks referral to treatment (RTT) and Cancer. The IST identified issues around the following key themes: Leadership and management; governance and reporting; access and choice; data quality analysis and reports; and across

organisational working. A detailed action plan will be developed by 19 April, with continuing support provided by IST.

Yi Mien Koh

15 April 2013