

## Whittington Health Trust Board

25 September 2013

|  |   |   |              |                                    |   |                               |           |
|--|---|---|--------------|------------------------------------|---|-------------------------------|-----------|
| <b>Title:</b>                                  | <b>Chief Executive's Report to the Board</b>  |   |              |                                    |   |                               |           |
| <b>Agenda item:</b>                            | <b>13/117</b>   |   | <b>Paper</b> |                                    |   | <b>2</b>                      |           |
| <b>Action requested:</b>                       | <b><i>For discussion</i></b>  |   |              |                                    |   |                               |           |
| <b>Executive Summary:</b>                      | <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 September:</p> <ol style="list-style-type: none"> <li>1. Introduction</li> <li>2. National Cancer Patient Survey</li> <li>3. Finance Report</li> <li>4. Monitor Risk Assurance Framework</li> <li>5. A&amp;E Funding</li> <li>6. NHS Procurement Strategy</li> <li>7. LBH Domestic and Gender based Violence</li> <li>8. Report back from Transformation Board</li> <li>9. Annual General Meeting</li> </ol> |   |              |                                    |   |                               |           |
| <b>Summary of recommendations:</b>             | The Board is recommended to discuss the report.   |   |              |                                    |   |                               |           |
| <b>Fit with WH strategy:</b>                   | This report provides an update on key issues that could affect the achievement of WH strategy.  |   |              |                                    |   |                               |           |
| <b>Reference to related / other documents:</b> |   |   |              |                                    |   |                               |           |
| <b>Date paper completed:</b>                   | 18 September 2013   |   |              |                                    |   |                               |           |
| <b>Author name and title:</b>                  | <b>Dr Yi Mien Koh<br/>Chief Executive</b>   |   |              | <b>Director name and title:</b>    | <b>Dr Yi Mien Koh<br/>Chief Executive</b> |                               |           |
| <b>Date paper seen by EC</b>                   | 13/7/13   | <b>Equality Impact Assessment complete?</b> | n/a          | <b>Risk assessment undertaken?</b> | n/a                                       | <b>Legal advice received?</b> | <b>No</b> |



# Chief Executive's Report to the Board

25 September 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. National Cancer Patient Survey 2013

The results of the annual cancer patient survey were published by Quality Health and the Department of Health on 30 August 2013. Macmillan Cancer Support published a league table from the data, which showed Whittington Health in the bottom 10 (we were 8th from bottom), nine of which are London trusts. Once again the main area we fell short in was communication. We also had a very low response rate, which limited speciality based analysis. The Surgery, Cancer and Diagnostic Division is developing an action plan. There is an urgency as the current cohort of patients who are inpatients in quarter 3 will be surveyed for their experience next year.

## 3. Finance Report

The month 5 position shows an in-month deficit of £569k and a year to date (YTD) deficit of £418k which is £1,868k worse than the YTD planned position. The underlying YTD position excluding non-recurrent benefits shows a deficit of £4,662k (£5,696k worse than plan). The key contributors for the adverse budget variances relate to slippage / non achievement of Cost Improvement Programmes (CIPs), which is year-to-date £2,011k (38%) below the planned level, and additional cost pressures including those relating to clearing Referral to Treatment (RTT) backlog, and meeting the A&E 4 hour target.

At present we are still planning to achieve a breakeven position in line with the annual plan. This is dependent on effective management against key risks identified, which require full delivery of the CIP plans, containment of cost pressures and maintaining income levels at or above the planned position.

## 4. Monitor Risk Assurance Framework

Monitor published a new Risk Assessment Framework (RAF) to replace the current compliance framework from 1 October 2013. As the FT regulator Monitor will use the framework to monitor FTs, assessing how well they are governed and any potential risk to their financial sustainability. The framework will cover all providers of NHS services, including Whittington Health from 1 April 2014. The Board should note the RAF as it will impact on the trust provisional ratings as we progress on our application.

## **5. A&E Funding**

The prime minister announced on 8 September £500m of funding over two years to relieve the pressures of A&E departments. Funding has been made available to 40 trusts across England that are considered to be the most challenged so they can sustainably improve the services they provide. Whittington Health has been allocated £2.9m to implement a number of initiatives that will improve our preparedness for the winter period.

## **6. NHS Procurement Strategy**

The Department of Health published on 5 August a new strategy to save £1.5bn by getting the NHS to change the way it buys supplies and does business. The document *Better procurement, Better Value, Better Care : a procurement development programme for the NHS* also reviews the procurement inefficiencies in the NHS. The report lists a number of specific actions. Whittington Health hosts the UCLPartners procurement shared service, and already benefits from some of the best practices in the report.

## **7. LBH Domestic and Gender based violence report**

I attended a multi-agency meeting in July that looked at domestic and gender based violence in Haringey. Hosted by the Community Safety and Business Intelligence teams of Haringey Council, participants discussed actions that each agency needs to take forward in both short and longer terms. For Whittington Health the issues are linked to safeguarding and the recording and sharing of appropriate data. Our A&E department and women and children services all have a part to play in mitigating the risks.

## **8. Report back from Transformation Board**

The Transformation Board aims to provide strategic oversight of major change projects in Whittington Health and Haringey and Islington CCGs (including QIPP plans) that are in the Trust's operational plans and Integrated Business Plan (IBP). The board meets monthly and membership consists of executives and clinical leaders of the Trust and CCGs, as well as the Director of Adult Social Care of both boroughs. The Terms of Reference was revised in July 2013 to improve the board's effectiveness.

## **9. Annual General Meeting**

Our annual members meeting and annual general meeting were held on 18 September in the Undergraduate lecture theatre. Over 50 people attended each meeting. The acting chairman thanked Joe Liddane (who has resigned to look after his elderly parents) for his four and a half years of dedicated service to the trust. He then gave an overview of the past year with presentations by executive directors and clinicians. Copies of the Annual Report can be downloaded from the website <http://www.whittington.nhs.uk/default.asp?c=1030> or contact the Communications Office on 020 7288 3915

**Dr Yi Mien Koh**

**18 September 2013**