Council of Governors - March 2018
Chief Executive’s Overview

Recommendation

- For information [x]
- For discussion [x]
- For assurance [ ]
- For approval [ ]
- A regulatory requirement [ ]

Current approval route of report

This report was drafted for the Board of Directors.

Purpose of report

The attached report provide an overview from the Chief Executive for the Council of Governors for information and discussion.

Key points for discussion

There are no specific points to raise.

Trust Ambitions and Board Assurance Framework
(https://www.yorkhospitals.nhs.uk/about_us/our_values/)

The Board Assurance Framework is structured around the four ambitions of the Trust. How does the report relate to the following ambitions:

- **Quality and safety** - Our patients must trust us to deliver safe and effective healthcare.
- **Finance and performance** - Our sustainable future depends on providing the highest standards of care within our resources.
- **People and Capability** - The quality of our services is wholly dependent on our teams of staff.
- **Facilities and environment** - We must continually strive to ensure that our environment is fit for our future.
To be a valued and trusted partner within our care system delivering safe effective care to the population we serve.
1. Winter pressures

I want to start this report by acknowledging the exceptionally busy winter months we have experienced across all of our services, and to place on record my thanks and appreciation for the efforts of all of our staff during what at times has felt like an unsustainable level of pressure.

We were anticipating a busy winter, and in planning terms, we have seen a more ‘joined up’ planning process than in previous years, however we can only plan with the resources we have available, and this doesn’t always enable us to account for the worst case scenarios.

A number of factors have had an impact on our services. High levels of flu (particularly in York, which has been noted as a hotspot in the region) have meant increased admissions for flu and flu-related conditions. The complexity and severity of some of these patients, meant that we have not been able to discharge as many patients as we need to create capacity, which has put the bed base under pressure. Flu has also inevitably led to higher staff sickness levels which further compounded the pressure as we went into the New Year.

NHS England asked all Trusts to review, and where possible postpone, non-urgent appointments, operations and other activities in order to free up capacity for our sickest patients, and to ensure our medical staff are available in the areas of greatest need. This meant that we canceled a number of elective operations and procedures.

The national media coverage during January was unremitting, and we have seen our fair share of this locally as well. Whilst the pressure has now eased somewhat, we continue to see large number of patients and we know all too well that so-called winter pressures can last for several months, and it is therefore important that we continue to focus on fast, effective decision making in order to maintain patient flow.

2. Finance and performance

We continue to work with our regulator, NHS Improvement, on our financial recovery. At the close of month 10 the Trust’s income and expenditure deficit stood at £23.5m.

Again in the month of January the corrective action that directorates are taking resulted in the Trust almost balancing its in-month income and expenditure. This is really positive and is testament to the way the organisation is taking its financial position seriously.

With only a few weeks left of the current financial year, it is really important that we place ourselves in the best possible position we can at the end of March. That means tightening expenditure control even further and deferring any expenditure that can safely be postponed or avoided entirely.

This can make a significant impact on our year-end position and all staff have been briefed regarding this expectation.

To be a valued and trusted partner within our care system delivering safe effective care to the population we serve.
3. Care Quality Commission report

As governors are aware, The Care Quality Commission (CQC) published its report at the end of February.

The CQC visited the Trust as part of its planned inspection programme in September and October last year. Following that inspection they have given the Trust an overall rating of Requires Improvement.

The majority of the Trust is rated Good and there are evident improvements across our most challenged services, despite the very difficult context we work in. The report also highlights areas where we recognise the need for continuous improvement. These are a reflection of our existing priorities, and we will respond positively to the recommendations.

It is both encouraging and appropriate that the rating for York Hospital and community services is Good, as these services make up the largest proportion of the Trust’s overall activity. It is also encouraging to see the many positive findings noted in the CQC’s reports for Scarborough and Bridlington Hospitals, despite both sites being given a Requires Improvement rating, particularly as our hospitals on the East Coast continue to face well-documented pressures, specifically the recruitment of medical and nursing staff.

At a time of national attention on emergency services it is great to see improved ratings for both of our Emergency Departments, particularly as during the inspection both departments were seeing a sustained increase in the number of acutely ill patients requiring care.

Once again our services are rated as Good across the board for being caring, and it is a testament to all of our staff that they continue to put patients first, despite the significant pressures they face.

It is incredibly disappointing that our overall rating remains as Requires Improvement, despite improvements made since the last inspection and the fact that the majority of the scores given for our clinical services are Good, with no areas of major concern and no areas rated as Inadequate. Our well led rating is difficult to understand when the majority of the organisation is rated as Good in this regard, and we operate a single management team and structure across the Trust.

The overall rating for the Trust appears to be disproportionately influenced by our most challenged areas, relating to issues we are fully aware of, and much of which is beyond our control. For example, our overall rating in the safe domain relates in large part to our difficulty in recruiting medical and nursing staff, particularly on the East Coast, and our reliance on temporary and agency staffing.

There is also recognition at a national level of the difficulties in delivering services in remote coastal areas, and the East Yorkshire region is amongst the most remote and economically challenged in the country. Our challenges cannot be wholly resolved without better access to staffing and resources.

The report highlights examples of the innovative solutions we have put in place to address some of these challenges in planning the configuration of essential services across a large
rural area at a time when resources are strictly limited. The mobile chemotherapy unit, one-stop urology diagnostic service in Malton, and acute medical model in the emergency department in Scarborough are all highlighted in the report and each of these is amongst the first of their type in the country.

I am confident that we continue to provide safe and effective services and this is supported by the many positive comments in the report.

Summary of ratings:

<table>
<thead>
<tr>
<th>Area assessed*</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust overall</td>
<td>Requires Improvement</td>
</tr>
<tr>
<td>York Hospital</td>
<td>Good</td>
</tr>
<tr>
<td>Scarborough Hospital</td>
<td>Requires Improvement</td>
</tr>
<tr>
<td>Bridlington Hospital</td>
<td>Requires Improvement</td>
</tr>
</tbody>
</table>

*Community services were not reassessed as part of this inspection, and retain a rating of Good overall.

4. Estates and facilities services update

As previously discussed with the Council of Governors, the Trust has been looking at setting up an alternative delivery model for its estates and facilities services.

In January, the Board of Directors approved the establishment of an alternative company, and agreed to consider the different types of models at its February meeting.

Governors will be updated as to the outcome of the February Board discussions during the Council of Governors meeting.

 Whichever model is agreed, the company will remain wholly owned by the NHS, and we will ensure that any staff moving to the new organisation will be able to keep their current NHS terms and conditions.

 We are committed to protecting our estates and facilities services and to safeguarding jobs for the future, keeping these services within the NHS by creating a company under the control of the Trust, rather than outsourcing to a separate private provider.