

REPORT OF THE CHIEF EXECUTIVE

1. Current Context

- 1.1 The operational context reflects more typical seasonal patterns which has been a welcome progression however, periods of peak activity continue to be experienced – particularly in the early part of each week and during these times patient experience is adversely impacted with A&E waits and cancelled operations still being a feature of some patients care. The Executive team and staff across the Trust remain very focussed on this priority both in respect of immediate steps and the more strategic solutions to the issues that create these conditions.
- 1.2 The impact of the new Patient Administration System (PAS) TrakCare continue to be felt. With the aim of expediting recovery and providing greater assurance to the Board, through its committees, the Chief Executive has revised the oversight and governance arrangements. In addition, the Executive team is currently working closely with a potential external partner who has expertise in supporting organisations who are experiencing some of the operational impacts being felt following our own deployment.

2. National

- 2.1 Since my last report, the Government has announced a “snap” election and the Trust, like other public sector bodies, is bound by the requirements of the pre-election period known as Purdah. This means the Trust cannot enter into any communications or activities that could be considered likely to affect the outcome of an election – local or national. In reality, this has had limited impact on the Trust’s activities; however careful consideration has been given to any Trust materials or activities in the public domain during this period including public Board papers.
- 2.2 Following the establishment of the Freedom To Speak Up Guardian (FTSUG) role, the National Guardian’s Office (NGO) will be shortly commencing its case review process to look into cases referred to where it appears that there is evidence that a NHS Trust has not appropriately responded to a concern raised by its staff. Following the departure of the Trust’s previous guardian Suzie Cro, Head of Patient Experience is now fulfilling this role and is actively raising the profile of the role, throughout the Trust.

3. Our System

- 3.1 Partners have continued to work together on the Gloucestershire Sustainability and Transformation Plan - *One Gloucestershire – Transforming Care, Transforming Communities* with the focus now moving to implementation and delivery. Following publication of the *Five Year Forward View Next Steps* and calls for expressions of interest from health systems to participate in national pilots for alternative delivery and commissioning models, the STP partners are actively considering the merits of expressing interest in the formation of an Accountable Care System (ACS) for Gloucestershire. The ACS model has its origins in the evidence emerging from health systems around the world that shows where providers and commissioners are more closely (virtually) integrated, benefits accrue that are not easily realised without such forms. STP partners are meeting with national representatives later this month to explore the proposal further. More information is available within the Five Year Forward View <https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf>
- 3.2 Following on from the publication of the Five year Forward View Next Steps, NHS England have recently circulated their *Urgent and Emergency care Delivery Plan*. This is a particularly important piece of national context given the work ongoing within the County in respect of developing urgent and emergency care services and specifically

the configuration of these services across acute and community sites. Helpfully, the direction and milestones set out in this plan are consistent with and reinforcing of the direction of travel for these services within our own STP. The document is not yet published but Board members may request copies from the Trust Secretariat if required.

- 3.3 In June Gloucestershire County Council will be launching the One You Pledge campaign and the Trust has agreed to become a partner within the “healthy workplace” element of this important initiative. The aim is to encourage our staff to make a pledge around one of five areas and maintain this pledge for four weeks – the areas are exercise, smoking, eating, drinking and stress. Our own Staff Health & Wellbeing Board has been asked to think of creative ways in which we can encourage and support uptake amongst staff in the Trust and at this week’s Trust Leadership Team, all members were asked to make their pledge and the Trust Board will also be invited to do the same at its May meeting.

4. Our Trust

- 4.1 The past month has seen the continuation of a very significant focus on developing the Trust’s financial recovery plan and importantly moving from identification of savings opportunities to developing and implementing plans. The Trust is still working to develop a plan which supports a £14.7m deficit position by March 2018. The meeting with NHS Improvement in April 2017 was not able to conclude the discussions regarding a control total for the coming year and discussions are ongoing. Pending agreement being reached the Trust will mobilise plans and therefore budgets on the basis of a £-14.7m plan.
- 4.2 Very positively, the Trust has been successful in its bid to the national fund for capital to support new ways of working within A&E services and will receive £920k to develop “streaming” of care in our two A&E departments which means those patients who continue to present to A&E but who have needs better met by primary care services will be able to be redirected to those services at the front door, in dedicated areas on our two sites. The streaming model is being advocated on the back of the success seen in other Trusts where this model is present and notably Luton and Dunstable NHS Trust who are consistently in the top five performing Trusts nationally on A&E 4 hour performance.
- 4.3 Activities to secure substantive directors to the Board continue and following the successful appointment of a Finance Director, who will commence on the 19th June, we are now advancing plans for the appointment of a substantive Chief Operating Officer & Deputy Chief Executive with interviews scheduled for the 5th June 2017.
- 4.4 After a long and successful career in the NHS and our own Trust Maggie Arnold has recently announced her retirement and will leave the Trust at the end of September. Maggie has been a huge asset to the Trust during her service and her patient centred approach to everything she does will be sorely missed by staff, partners and patients. Recruitment for a successor is also underway with interviews scheduled for the 20th June 2017.
- 4.5 Whilst awaiting the final Care Quality Commission report, the Trust continues to advance its actions to address the issues highlighted through the Commission’s initial feedback. Publication is provisionally expected to be the 23rd May.
- 4.6 Last month our Health and Wellbeing Committee endorsed [The Health and Wellbeing of our Community Strategy](#). This is the third of a trilogy of more detailed strategies which support our overarching Health and Wellbeing Strategy, published three years ago. This latest strategy complements two earlier documents which focused firstly on the health and wellbeing of our staff, and then on the health and wellbeing of our patients. This Strategy takes a broader perspective, looking outwards to the community and identifying some of the wider contributions which we can make to the

health and wellbeing of the population of Gloucestershire. Gloucestershire's Sustainability and Transformation Plan provides a new focus for joint working with partners and other stakeholders across the county. Prevention and self-care is one of its key themes and the first part of our Strategy sets out how we can support this area of work, as one part of a wider and more integrated health and social care system. We identify a number of areas in which we are involved, including:

- the development of cross-organisational clinical programmes and integrated pathways, with their focus on prevention, self-care and more effective long term management;
- the countywide programme to achieve a healthy weight;
- workforce health and wellbeing
- working together with the newly established countywide health and lifestyle service, increasing the number of our staff who receive Make Every Contact Count (MECC) training and using our social media and other opportunities to promote consistent health and wellbeing message
- supporting the health and wellbeing of carers.

4.7 The second part of the Strategy considers how, as one of the largest organisations in Gloucestershire, we can have an influence on some of the wider determinants of health – using our resources and assets responsibly to support local employment, training and businesses, by supporting volunteering and by protecting the local environment.

4.8 Finally, as reported last month we are in the final stages of the independent Financial Governance Review. The draft report is undergoing factual accuracy checking with key contributors. The initial timeline has slipped slightly with the report now expected to be considered by the Board at their meeting on the 26th May 2017. Publication will be impacted by the Purdah period and as such publication of the key findings will not happen in advance of the general election on the 9th June 2017.

Deborah Lee
Chief Executive Officer

May 2017