

Public Trust Board – 26 October 2021

Chief Executive's Report

Purpose of the Report

This paper provides an update on current local issues and national policy developments since the last meeting. The details below are drawn from a variety of sources, including local meetings and information published by NHS England/Improvement, Health Education England, NHS Providers, the NHS Confederation and the Care Quality Commission (CQC).

Analysis of the Issue

National Developments

Coronavirus COVID-19

On 14 September 2021, the Government announced its Autumn and Winter Plan 2021 for managing COVID-19. Built around two scenarios ('plan a' and 'plan b'), the premise of the plan is that the country is learning to live with COVID-19, and the main line of defence is now vaccination rather than lockdown. The plan confirms that the Government intends to manage the pandemic over the winter period by building defences through pharmaceutical interventions; identifying and isolating positive cases to limit transmission; supporting the NHS and social care; advising people on how to protect themselves and others; and pursuing an international approach. Having considered the advice of the UK Chief Medical Officers and the Joint Committee on Vaccination and Immunisation (JCVI), the Government's plan confirms that the NHS will offer those 12-15 year olds not covered by previous advice with a first dose of the Pfizer vaccine against COVID-19.

On 10 September 2021, the Secretary of State for Health and Social Care issued a [notice](#) under regulation 3(4) of the Health Service (Control of Patient Information) Regulations 2002, requiring organisations to process confidential patient information as described in the notice to support the Secretary of State's response to COVID-19. The notice provides a clear description of the purpose of the information being shared, together with its basis in law and sets the date of expiry as 31 March 2022 unless a further notice is issued. We shall need to review our own information governance arrangements to ensure we remain compliant.

On 16 September 2021, the UK Health Security Agency published guidance on the COVID-19 booster vaccination in which it confirmed that people aged 50 years and over, health and social care workers and younger people at risk will be offered a booster dose of coronavirus (COVID-19) vaccine. Eligible people will be contacted by the NHS when it is their turn for a vaccination.

On 6 September 2021, the Government announced an additional £5.4bn funding for the NHS to support its COVID-19 response over the next six months. £1bn of this funding is targeting backlogs caused by the pandemic, £2.8bn is to cover related costs such as enhanced infection control measures and £478m will support the continuation of the hospital discharge programme to free up hospital beds. This funding is in addition to the £3bn announced for the NHS as part of the Comprehensive Spending Review 2020.

Build Back Better – Government's plans for the NHS and Social Care

The Government has published its plan for health and social care "Building Back Better: Our Plan for Health and Social Care" in which it notes that the shift in focus to respond to the pandemic has had a significant impact on delivery of other forms of treatment within the NHS. The plan describes a very significant backlog in elective care, where patients need non-emergency tests or treatment. The impact of the pandemic has been profound and

addressing the backlog will take longer than the next few weeks or months. In addition to elective care, the plan also highlights the impact the pandemic has had on primary care, A&E, mental health services and dental services.

Concerning the NHS, building back better involves three things: (1) tackling the electives backlog; (2) putting the NHS back on a sustainable footing; and (3) increasing the focus on prevention. The plan describes how additional investment will be made to increase elective care capacity, improve productivity and catalyse innovation. Investment will be targeted to those services that matter most to people's lives. The Government will establish a new Office for Health Improvement and Disparities, the new UK Health Security Agency and will consider the potential to turn the NHS Health Check programme into a National Prevention Service. New requirements will be placed on NHS England and Improvement to introduce a yearly prevention spend, outcome and trajectory reporting criteria, including an assessment of the 10-year spend and outcome trajectories of the major preventable diseases such as diabetes.

The Government's plans for adult social care in England are also included within the document. These plans reflect the Government's commitment to creating a sustainable adult social care system that is fit for the future. Such a system will offer choice, control and independence to care users; provide an outstanding quality of care and be fair and accessible to all who need it, when they need it. To achieve its vision for adult social care, the Government's plan will introduce a cap on personal care costs; provide financial assistance to those without substantial assets; deliver wider support for the social care system and improve the integration of health and social care systems.

To fund its plan the Government has decided to raise taxes via a new Health and Social Care Levy, which it expects will raise c£12bn per year on average for health and care services across the UK. The 1.25% levy will be based on National Insurance Contributions and will be ringfenced to fund the investment in health and social care described in its plan.

In October, the Government will facilitate a consultation on its adult social care charging reforms. Later this year, it will also publish the funding settlement for NHS England and Improvement, the delivery plan for tackling the electives backlog, the White Paper for reforming adult social care and the plan for integration. The Health and Social Care Levy will increase rates of dividend tax from April 2022 and new social care charging reforms will be introduced from October 2023.

For more information on the Government's plan to build back better, please visit the Government website: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1015736/Build_Back_Better-Our_Plan_for_Health_and_Social_Care.pdf

Integrated Care System Implementation Guidance

As part of ongoing work in preparation for the new legislation proposed to Parliament in the Health and Care Bill, NHS England and Improvement have published a range of guidance designed to support system leaders to establish Integrated Care Boards (ICBs) by 1 April 2022. Since the new legislation is in draft, it is worth noting that this guidance will need to respond to changes that come about as the Bill progresses through the legislative process.

The purpose of the guidance is to provide Integrated Care System (ICS) leadership teams with as much information as possible to assist them in establishing their local arrangements. It builds on the [Integrated Care Systems: design framework](#) that was published in June 2021.

[Interim guidance on the functions and governance of the integrated care board](#) sets expectations on statutory functions to be conferred on ICBs; the delegation of direct commissioning functions; decision making within an ICB;

the composition, membership and remuneration of the ICB; ICB committees; and supporting information on providers, provider collaboratives, and place-based partnerships.

An [HR framework](#) for developing integrated care boards has also been published to support the successful transition of people into ICBs. It sets a clear national change approach and principles for the handling of the transition, which includes establishing ICBs in a way that minimises uncertainty and limits employment changes. It endorses a 'one NHS Workforce' approach.

Guidance on the ICS people function [building strong integrated care systems everywhere](#) sets expectations of NHS leaders and organisations to work together to deliver ten outcomes-based functions with their partners in the ICS from April 2022 to make the local area a better place to live and work for their people. This guidance builds on the ICS Design Framework and the priorities set out in the [NHS People Plan](#). By the end of the current financial year, system leaders are asked to agree formal governance and accountability arrangements for the people and workforce functions of the ICS; agree how and where specific people responsibilities are delivered within the ICS, review and refresh the ICS People Board; and assess the ICS' readiness, capacity and capability to deliver the people function.

Other guidance published includes the ICB readiness to operate statement (ROS) and checklist and implementation guidance on the due diligence, transfer of people and property from CCGs to ICBs and CCG close down.

For further information on this guidance, please see the NHS England website: <https://www.england.nhs.uk/publication/integrated-care-systems-guidance/>

Reform for people: a joint vision for integrating care

The Richmond Group of Charities, Age UK, the King's Fund and National Voices have joined together, with input from a range of health, local government and voluntary sector partners, to produce a shared vision of what the new reforms could achieve. This joint vision, 'Reform for people', aims to lay out a shared ambition of what integrated care and improved ways of working could mean for people and communities; patients service users and carers and people working in health and care services.

The vision recognises the impact that the wider determinants of health have on our health and wellbeing and urges ICS leaders to prioritise prevention, early intervention and tackling the causes of health inequalities. It emphasises the need to value and use assets already in place locally including local people themselves, sharing data and intelligence effectively to ensure a targeted approach. Ensuring there are enough people with the right skills is another element of the vision, which seeks commitment from ICS leaders to proactively work with local communities and Voluntary, Community and Social Enterprise organisations.

For more information on the vision, please visit the Richmond Group's website: https://richmondgroupofcharities.org.uk/sites/default/files/reform_for_people_-_a_joint_vision_for_integrating_care_2.pdf

Flexible working

In March 2021, the NHS Staff Council agreed a change to the NHS terms and conditions of service handbook concerning the framework for agreeing local flexible working policies (Section 33: balancing work and personal life). The key changes that came into force from 13 September 2021 were:

- New enhanced day one contractual right to request flexible working;
- Revised structure which is aimed at supporting managers to be more explorative in reaching mutually workable outcomes; and

- A re-emphasis on the importance of monitoring flexible working requests at an organisational level, to ensure greater consistency of access to flexible working.

These changes are consistent with the NHS People Promise, which includes flexibility as one of its seven strands:

We work flexibly

We do not have to sacrifice our family, our friends or our interests for work.

We have predictable and flexible working patterns – and, if we do need to take time off, we are supported to do so.

At LPT we have a flexible working policy that allows staff to request flexible working. Since the pandemic, an agile working policy has been developed to promote new ways of working, which supported efficient ways of working whilst delivery effective patient care. Our special leave policy ensures staff have several options when time needs to be taken to provide support to loved ones, or in times of bereavement.

Children and young people's mental health

On 25 August 2021, the Mental Health Network of the NHS Confederation published a report that considered the impact the pandemic has had on children and young people's mental health, the services that support them and how local systems are working in new ways to confront the issues before them.

The report's title 'Reaching the Tipping Point' reflects the mounting concern that the mental health system for children and young people is reaching tipping point with the COVID-19 pandemic having exacerbated existing challenges, including mental health inequalities.

The report found significant increases in demand for mental health support for children and young people across all services, but particularly for eating disorder services. It suggests that further funding and solutions to workforce challenges are required to address this increase in demand and to continue the transformation of services/support for children and young people.

Advocating for a greater focus on early intervention and the social determinants of mental health, the report encourages ICS leaders to consider children and young people's mental health services as a priority.

For more information on this report, please visit the NHS Confederation website: https://www.nhsconfed.org/sites/default/files/2021-08/Reaching_the_tipping_point_Final.pdf

Primary care networks: two years on

On 2 August 2021, the NHS Confederation published a report on the progress made by primary care networks (PCNs) and the challenges they have faced two years since their creation. The report 'Primary care networks: two years on' found that despite being in their infancy PCNs have played a leading role in the response to COVID-19. There are high levels of enthusiasm for PCNs remaining with growing awareness of the services they offer; strengthened relationships with local partners; increased capacity, capability and retention of workforce; and creative ways to reach underserved communities, tackle health inequalities and manage population health.

Workload within PCNs remains an issue, new service specifications have caused confusion over the purpose of PCNs, and a lack of consistent infrastructure was seen as hindering progress. The principles of PCNs having autonomy over their resources/influence over policies; a flexible approach to development; and the shift towards ICS' being accompanied by streamlined processes for PCNs have informed national ICS policy. Further findings are expected to follow in the autumn following a period of further engagement with PCN managers.

For more information on this report, please visit the NHS Confederation website: <https://www.nhsconfed.org/sites/default/files/2021-08/Primary-care-networks-two-years-on-01.pdf>

NHS mental health access standards

On Thursday 22 July 2021, NHS England and Improvement announced another major step towards improving patient access to mental health services with the proposal to introduce five new waiting time guarantees. Under these plans, people of all ages will be able to access mental health services in their communities and close to home within four weeks.

The proposals could also ensure that patients requiring urgent care will be seen by community mental health crisis teams within 24 hours of referral, with the most urgent getting help within four hours. Mental health liaison services for those who end up in A&E departments would also be rolled out to remaining sites across the country and should see patients who present to A&E within one hour from referral.

For more information on the proposed access standards, please see the NHS England website: <https://www.england.nhs.uk/2021/07/nhs-england-proposes-new-mental-health-access-standards/>

Reforming the Mental Health Act: Government Response to Consultation

On 15 July 2021, the Government published its response to the public consultation on the proposed reforms to the Mental Health Act, set out in the White Paper published earlier this year.

The report is based on more than 1,700 written responses to the consultation and 19 policy development workshops. It sets out stakeholders' views on each of the key themes of the MHA Review and represents a significant milestone on the road to reform. There has been overwhelming support for the majority of proposals, many of which will give people more choice and control over their care and treatment.

The Government will now work closely with stakeholders to build on the feedback from the consultation, and to further develop and refine policy proposals. This will include continued engagement with service users, carers, individuals with lived experience of detention, and groups disproportionately subject to the Act.

The Government intend to bring forward a Mental Health Bill, which will give effect to many of the changes set out in the White Paper. The consultation also highlighted that legislative reform is only part of the solution and that, in particular, the implementation of the NHS Long Term Plan and especially the expansion of community and crisis mental health services for adults and older adults, is a critical part of delivering on all aspects of the reform agenda.

For more information on the outcomes of the consultation, please visit the Government's website: <https://www.gov.uk/government/consultations/reforming-the-mental-health-act/reforming-the-mental-health-act>

NHSX 'What good looks like' framework

On 31 August 2021, NHSX published its What Good Looks Like Framework, which sets out best practice on digital transformation for NHS leaders. The guidance sets national standards for digitally enabled care across seven success measures: well led, ensure smart foundations, safe practice, support people, empower citizens, improve care and healthy populations. An NHSX support offer to aid implementation is under development and will include frontline, online resources and peer-to-peer support.

For more information on the framework, please see the NHSX website: <https://www.nhsx.nhs.uk/digitise-connect-transform/what-good-looks-like/what-good-looks-like-publication/>

National Director of Learning Disability and Autism

On 9 September 2021, NHS England announced the appointment of Tom Cahill as the national director for learning disability and autism. A former mental health nurse and Chief Executive of Hertfordshire Partnership University NHS Foundation Trust, Tom joins NHS England to build on progress already made in providing people with a learning disability or autism with care in the community rather than in inpatient settings. He starts his role at NHS England and Improvement on a part time basis in October 2021.

Major drive to boost the NHS workforce

To coincide with students receiving their exam results in August, the Chief Executive of NHS England announced a £15 million package to bring in 5,000 more healthcare support workers for those considering leaving full time education. Requiring no formal health background, healthcare support workers assist nurses, midwives and other healthcare professionals to carry out health checks, update patient records, help patients wash, dress and move around, and care for women and families in maternity services.

Improving non-emergency patient transport services

On 2 August 2021, NHS England published a report on non-emergency patient transport services (NEPTS) in which it sets out a strategic framework to enable local improvement. From April 2022, subject to legislation, NHS Integrated Care System (ICS) bodies would assume responsibility for overseeing NEPTS and transport support more widely. The report confirms NHS England's expectations that ICS bodies should implement the five components of the national framework (described in the report); appoint a lead officer for NEPTS; make sure that transport forms an integrated part of wider pathway improvements; ensure that Oversight and budget management should look at NEPTS delivery, reimbursement, the Healthcare Travel Costs Scheme and wider transport facilitation in the round; and consider coordinating with other system-level and regional partners.

To access a copy of the report, please visit the NHS England website: <https://www.england.nhs.uk/wp-content/uploads/2021/08/B0682-fnal-report-of-the-non-emergency-patient-transport-review.pdf>.

Local Developments

Awards

Our recovery cafes project was a runner up in the national patient experience awards, which is a fantastic achievement and a credit to what they do. We were shortlisted for two national communications awards – for our exemplary digital engagement with young people through Covid, and for our use of data to inform our vaccinations campaign – both great pieces of work. We've also been shortlisted for a BMJ award for our physical health register innovation with mental health patients – again fantastic work that others could learn from. And finally our bespoke vaccination sessions for people with learning disabilities has been shortlisted for a Nursing Times award. I emphasize all of these because people are doing incredible things and you are pioneering out there, you're really doing the best for our populations and people are recognising it so a real credit to everyone involved.

AGM

We held our AGM on 14 September which was attended by around 100 people. Here we launched our Annual Report and year in review film. You can watch [Year in Review film](#) here, featuring highlights of our last year. A [summary version](#) of our Annual Report has been circulated to all staff and printed copies will be available in our receptions and staff rooms.

Autumn Health and Wellbeing Festival

We held our staff health and wellbeing festival on 13 October, offering a range of taster sessions for Tai-Chi to being Time Smart throughout the day. All sessions were shared via the staff Closed Facebook group too and recorded for staff to revisit at a time convenient to them. We are also working with our system partners to undertake a further wellbeing and collaboration event for all staff across health and social care in November. This will also feature world renowned guest speakers at quality improvement seminars.

AHPs Day – 14 October

On the 14th of October, the 14 allied health professions (AHPs) celebrated the 4th annual AHPs' Day, as the third largest clinical workforce in the NHS. We are extremely proud of our AHP workforce. Here in LPT we have over 650 AHPs from 5 of the 14 allied health professions, and recognise the unique contribution they bring to patient care and population health across Leicester, Leicestershire and Rutland. A programme of virtual events were available to staff working across Leicester, Leicestershire and Rutland during the week, to recognise their contribution and share learning across the system.

Black History Month

October is Black History Month in the UK and it's been celebrated nationwide every year for nearly 40 years. This month was originally founded to recognise the contributions that people of African and Caribbean backgrounds have made to this country over many generations. Now, Black History Month has expanded to include the history of not just African-Caribbean black people but all black people in general. We have teamed up with NHFT to offer all our staff a range of awareness raising and celebration sessions throughout October.

Staff campaigns

Well engaged staff lead to higher motivation and better quality of care for our patients. We are currently asking all of our staff to complete the annual NHS staff survey, building on the positive progress made last year – where staff feedback was that more of them would recommend LPT as a place to work, they felt more engaged and felt safer to raise concerns. October is Freedom to Speak Up month so the campaign is being supported by daily social messages on speaking up by our FTSU guardian.

We are also encouraging all of our staff to have their Covid-19 booster jabs and their flu jabs. Safety is our key priority, and it is important our staff are protected, for themselves, their colleagues and those we care for. This is an important part of our winter resilience plan.

Relevant External Meetings attended, and Service Visits undertaken since last Trust Board meeting

Whilst formal service visits have been suspended throughout this time for Infection Prevention and Control reasons, we are ensuring that leadership is visible across the Trust through a range of digital solutions including Microsoft Teams, recorded videos, the staff briefing and Twitter.

Chief Executive and Deputy Chief Executive external meetings (as at 18 October 2021)

September	October
East Midlands CEO Weekly Meeting	East Midlands CEO Fortnightly Meeting
System Exec Meeting	System Exec Meeting
CQC Ad hoc meetings	CQC ad hoc meetings
BAME Network Meeting	BAME Network Meeting
Midlands Star Board	Covid Heroes Awards
NHS Providers Roundtable	Reverse Mentoring Evaluation with BAME

September	October
LLR ICS Board	NHS Providers Board
East Midlands Alliance	East Midlands Alliance Board
Regional Roadshow - Midlands & East with NHSE/I CEO and COO	CEO – St Andrews
CEO-CCG-LA - Leaders Discussion Meetings	CEO – NHS Nene CCG
Covid Heroes – Recording in studio	MH Trusts CEO meeting
Step up to Great Public Consultation	Midlands and East CEO workshops - Inspiring Hope
LLR QSRM	Buddy Trust Forum
CYP Transformation	East Midlands Alliance for Mental Health and Learning Disabilities - Board Development Session - 2
NHS Chief Executive Informal Meeting	NHS Midlands Leaders Update: Provider CEOs/CCG AOs/STP Leads, RD NHS Midlands
3 CEO Exec Team Meeting	Black History Month – Various
ICS Provider Collaboratives	ICS Provider Collaboratives
Chair, Leicester Council of Faiths	LLP ICS CEO Interviews
LLR Joint Health Scrutiny Committee	
LLR CCGs	
Triage Team - Keyham Lane Police Station	
Leics County Council HWB Development Session	
SCG Fuel Supply meeting	

Service Visits by Directors

September/October

City Community Nursing Team, Braunstone health and social care centre
Hinkley and Bosworth hospital
Beacon Unit
Evington Centre
BMHU
Mill Lodge
The Willows

Proposal

It is proposed that the Board considers this report and seeks any clarification or further information pertaining to it as required.

Decision Required

The Board is asked to consider this report and to decide whether it requires any clarification or further information on the content.

Governance Table

For Board and Board Committees:	Trust Board 26 October 2021
Paper sponsored by:	Angela Hillery, Chief Executive
Paper authored by:	Kate Dyer, Deputy Director of Governance and Risk
Date submitted:	18 October 2021
State which Board Committee or other forum within the Trust's governance structure, if any, have	None

previously considered the report/this issue and the date of the relevant meeting(s):		
If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/ partially assured / not assured:		
State whether this is a 'one off' report or, if not, when an update report will be provided for the purposes of corporate Agenda planning	One off	
STEP up to GREAT strategic alignment*:	High Standards	
	Transformation	
	Environments	
	Patient Involvement	
	Well Governed	Yes
	Single Patient Record	
	Equality, Leadership, Culture	
	Access to Services	
	Trust wide Quality Improvement	
Organisational Risk Register considerations:	List risk number and title of risk	n/a
Is the decision required consistent with LPT's risk appetite:	n/a	
False and misleading information (FOMI) considerations:	None	
Positive confirmation that the content does not risk the safety of patients or the public	Confirmed	
Equality considerations:	None	