

## 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, NHS Providers, the NHS Confederation, and the Care Quality Commission (CQC).

### Analysis of the Issue

#### National Developments

##### *Winter pressures, Coronavirus COVID-19 and Influenza*

##### *NHS response to COVID-19: Stepping down from NHS level 3 incident*

On 18 May 2023, NHS England confirmed that the NHS will be stepping down the COVID-19 incident from a level 3 to a level 2 incident. This step down to a level 2 is done whilst acknowledging that COVID-19 continues to be a health issue, and the wider long-term impact of the pandemic will continue to be significant for years to come.

As we move away from incident arrangements for COVID-19, there will be less requirements for data reporting to ease the burden on NHS Trusts.

On 5 May 2023, World Health Organisation Director-General, Dr Tedros Adhanom Ghebreyesus, declared COVID-19 over as a global health emergency while cautioning that this does not mean COVID-19 is over as a global health threat. He went on to explain "what this news means is that it is time for countries to transition from emergency mode to managing COVID-19 alongside other infectious diseases". This is positive news indeed, after over 1,000 days since the first outbreak of the virus in China and the impact it has had on the whole of society. To access the full transcript of the announcement, please see the WHO website - <https://www.who.int/director-general/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing---5-may-2023>.

Here in the UK, we have been 'living with COVID-19' for some time now. The latest COVID-19 surveillance figures published by the Department of Health and Social Care at the start of the month showed that COVID-19 case rates had decreased since the previous week in all age groups, regions and most ethnic groups. Whilst the highest rate for hospital admissions due to the virus were amongst those aged 75 to 84 years old, the rate of admission has declined. It follows that everyone aged 75 and over should access a 'spring booster' vaccine. This opportunity is also open to children aged from 6 months to 4 years who are in a clinical risk group and those aged 5 years and over with weakened immune systems. (Anyone who believes they should be eligible for a vaccine but does not get invited can check online at <https://www.nhs.uk/nhs-services/covid-19-services/covid-19-vaccination-services/book-covid-19-vaccination/>.)

It is positive to see that influenza-like illness remained stable compared to the previous week and is within the 'baseline activity range'. The rate of emergency department attendances and hospital admissions had also decreased since the previous week.

To access the national COVID-19 and influenza surveillance report, please see the Government website: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1154691/Weekly\\_Flu\\_and\\_COVID-19\\_report\\_w18-final.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1154691/Weekly_Flu_and_COVID-19_report_w18-final.pdf).

### *NHS pay settlement (agenda for change)*

On 2 May 2023, the NHS Staff Council Trade Unions considered the outcomes of the ballots of each individual trade union's members and decided to endorse the recommendation the pay offer made by the government should be implemented. The Council requested that the government confirms that the pay aspects of the offer for both 2022/23 and 2023/24 can be implemented by employers as soon as possible. It also set out its expectation that the NHS Pay Review Body pay-setting process will be set aside for 2023/24. The Secretary of State for Health and Social Care has accordingly given the instruction that the pay offer is implemented. The news of an agreement having been reached it welcomed. However, it is not yet clear what action might be taken by the four unions whose members rejected the pay offer individually. For more information, please see the NHS Employers and government websites: <https://www.nhsemployers.org/system/files/2023-05/Staff%20Council%20statement%20-%20pay%20offer%20outcome%20-%2002.05.23.pdf>, <https://www.nhsemployers.org/articles/pay-scales-202324> and <https://www.gov.uk/government/publications/nhs-pay-settlement-ministerial-direction-request/letter-from-the-secretary-of-state-to-the-permanent-secretary-regarding-the-ministerial-direction-request-for-the-nhs-pay-settlement>.

### *Findings of independent review of ICS' published*

On 4 April 2023, the government published the findings of an independent review it commissioned of Integrated Care Systems (ICS') chaired by former Health Secretary, Rt Hon Patricia Hewitt. The review considered how the oversight and governance of ICS' can best enable them to succeed in improving outcomes for their populations.

The review has identified six key principles that will help to create the context in which ICSs can thrive and deliver: collaboration within and between systems and national bodies; a limited number of shared priorities; allowing local leaders the space and time to lead; the right support, balancing freedom with accountability and enabling access to timely, transparent and high-quality data.

It calls for genuine change in how the health and care system operates, shifting the focus upstream to improve population health and reduce pressure on the health and care system. To do this it recommends an increase in the total NHS budget going towards prevention at ICS level by at least 1% over the next five years.

Improved use of data is another theme in the report, which recommends improvements to data interoperability, more effective use of high quality data and greater use of the NHS App. Increased transparency to enable local autonomy is also considered to be a priority. The report recommends the national team should incentivise the flow and quality of data between providers and systems, replacing situation reports with a federated data platform.

The report recommends enabling ICS' to become 'self-improving systems' given the time and space to lead with national government and NHS England significantly reducing the number of national targets. This is coupled with devolving more decisions to local areas and developing a new model with a far greater degree of autonomy, combined with robust and effective accountability.

According to the report, a complementary strategy should be developed for the social care workforce and more should be done to enable flexibility for health and care staffing to move between roles. A new framework for primary care (general practice) contracts is recommended to remove barriers to local leaders wanting to work in innovative and transformational ways.

There should be a focus on value in designing a new payment model with the aim of implementing population-based budgets that will incentivise and enable better outcomes and significantly improve productivity. Reviewing the NHS capital regime is recommended to address the inflexibility in the use of capital and the layering of different capital

allocations/approvals processes. To access a copy of the full report, please visit the government website:

<https://www.gov.uk/government/news/findings-of-independent-review-of-icss-published>

#### *Making it easier for patients to see their GP*

On 8 May 2023, the government announced a £240m investment into GP surgeries to enable patients to be able to contact their practice more easily. Funding will be used to introduce the latest technology, replacing old analogue telephones so that patients never get engaged tones and have access to easy-to-use online tools to ensure they get the care they need. The new system will mean that if the patient's need is urgent, they will be assessed and given appointments on the same day. If it is not urgent, appointments will be offered within two weeks, or patients will be referred to NHS 111 or a local pharmacy.

In addition to funding technological improvements, funding will also go towards 6,500 care navigator training places, enough for one member of staff per practice nationwide who can then pass on the training to colleagues. Care navigators will help assess, prioritise, respond and assist patients contacting their practice. They can help make sure those who want to see a named GP or preferred member of staff can do so while those who are happy to see a duty doctor can also do so. Care navigators will also direct patients to other professionals within the general practice or other medical professionals such as community pharmacists who can best meet the needs of the patients.

For more information on the investment and the government's plan to recover access to primary care please visit the government's website: <https://www.england.nhs.uk/publication/delivery-plan-for-recovering-access-to-primary-care/>.

#### *UKHSA launches new Adverse Weather and Health Plan*

On 27 April 2023, the UK Health Security Agency published a combined Adverse Weather and Health Plan to protect people from the health effects of adverse weather and build community resilience. Bringing together the previous Heatwave Plan for England and the Cold Weather Plan for England, the new plan will be underpinned by a collection of supporting scientific evidence, updated weather-health alerts and new, updated guidance/supporting materials providing advice on how to stay safe during severe weather events.

To access a copy of the plan, please visit the government's website: <https://www.gov.uk/government/news/ukhsa-launches-new-adverse-weather-and-health-plan>.

#### *Next steps to support social care*

On 4 April 2023, the government published a policy paper in which is set out plans to further digitise the social care sector and bolster the workforce building on the 2021 white paper 'Building on the People at the Heart of Care'. These plans will support the ambition to cut waiting lists by reducing pressure on urgent and emergency care services, freeing up beds for those who need them. Previously announced funding that accompanies the plan will be used to: fund training places (including a new Care Certificate qualification); accelerate digitisation in the sector; introduce a new innovation and improvement unit; create a Market Sustainability and Improvement Fund (to increase rates paid to social care providers); fund the small but significant adaptations people need to remain at home, stay independent and avoid hospital admission; and improve social care insight, data and quality assurance.

In parallel with the publication of the plan, the government is also asking for expressions of interest from integrated care systems to fund care technologies that focus on the quality of care and help reduce avoidable hospital admissions, or which will support people to live independently.

For more information, please visit the government website: <https://www.gov.uk/government/publications/adult-social-care-system-reform-next-steps-to-put-people-at-the-heart-of-care/next-steps-to-put-people-at-the-heart-of-care>.

#### *Expanded access to soups and shakes for people with type 2 diabetes*

On 26 April 2023, NHS England announced plans to expand access to NHS 'soups and shakes' diets through the new 'Type 2 Diabetes Path to Remission' programme. Based on the findings of a 2020 pilot / Diabetes UK-funded Remission Clinical Trial (DiRECT), eligible patients will have access to low-calorie meal replacement product for up to 12 weeks to kick start weight loss with careful support from health professional. After this time, patients will receive support to reintroduce healthy, solid foods and maintain their weight loss. Referral to this programme will come from a GP. The pilot showed that by the end of the year-long programme, patients had lost 11kg on average (just over one and a half stone). Weight loss was similar to that seen in clinical trials, showing early promise that the programme might lead to remission in up to half of the people with type 2 diabetes.

For more information on this announcement, please visit the NHS England website: <https://www.england.nhs.uk/2023/04/nhs-to-expand-soups-and-shakes-for-people-with-type-2-diabetes/>.

#### *NHS England and Health Education England complete merger*

On 3 April 2023, NHS England confirmed that it had completed its merger with Health Education England to form a new, single organisation for the NHS in England. This means that NHS England has assumed responsibility for all activities previously undertaken by Health Education England, including planning, recruiting, educating and training the health workforce, and ensuring it has the right numbers, skill, values and behaviours in place to support the delivery of healthcare to patients and the public. It is expected that, by the end of the 2023/24 financial year, the new organisation will be between 30% and 40% smaller than the combined size of NHS England, Health Education England and NHS Digital pre-merger.

For more information on this announcement, please visit NHS England's website: <https://www.england.nhs.uk/2023/04/health-education-england-and-nhs-england-complete-merger/>.

#### *CQC appoints James Bullion as Interim Chief Inspector for Adult Social Care and Integrated Care*

On 27 April 2023, the Care Quality Commission (CQC) announced that James Bullion is joining the CQC as its new interim Chief Inspector of Adult Social Care and Integrated Care. Mr Bullion is currently the Executive Director of Adult Social Services at Norfolk County Council and a member of Integrated Care Board for that area. He has already been working closely with the CQC in his capacity as the Association of Directors of Adult Social Services (ADASS) representative, supporting the development of the CQC's new approach to assessing local authorities.

For more information on this announcement, please visit the CQC website: <https://www.cqc.org.uk/news/james-bullion-appointed-new-interim-chief-inspector-adult-social-care-and-integrated-care-care>.

#### *Update on CQC's plan and approach to transformation*

As reported previously, the CQC is transforming its regulatory approach and is providing regular updates to stakeholders on the progress it is making. In April, the CQC confirmed it had completed the move of its colleagues into new integrated assessment teams. The current assessment framework will remain in place until later this year whilst staff are trained and become familiar with the new approach. Looking ahead, the CQC will be rolling out its new provider portal in stages during the summer. In tandem with the ongoing pilot of its new approach to assessing local authorities and integrated care systems, the CQC will published evidence gleaned in specific thematic areas. Later in the year, the CQC will gradually start to conduct assessments of providers using its new approach.

For more information, please visit the CQC website: <https://www.cqc.org.uk/news/update-our-plan-and-approach-transformation-april-2023>.

### [NHS Providers launches digital guide for boards](#)

On 5 April 2023, NHS Providers published a comprehensive guide for boards on digital transformation as part of its Digital Boards Programme. The guide highlights lessons drawn from six previous guides, including: digital leadership – understanding the role of the board; building and enabling digital teams; creating an effective digital strategy; making technology decisions; digital delivery; and optimising the Electronic Patient Record.

To access the guide please visit the NHS Providers' website: <https://nhsproviders.org/effectively-embedding-digital-in-your-trust>.

## Local Developments

### [Improved flow of patients across group partnership highlighted](#)

The provider collaborative work that Leicestershire Partnership NHS Trust (LPT) and group partner Northamptonshire Healthcare NHS Foundation Trust (NHFT) have been doing to improve patient flow has been highlighted in a new report from NHS Providers.

The report '*Providers Deliver: Patient flow*' presents a series of five case studies, highlighting where trusts have developed effective approaches to improve patient flow in the face of unparalleled pressures.

The case study on LPT and NHFT focuses on our work on virtual wards – a service which enables patients to receive treatment at home instead of in hospital. More recently, working within our Integrated Care Systems, we have expanded our virtual wards capacity and begun developing relationships with other organisations and providers in the area.

### [Chair of LPT announces she is standing down](#)

At the beginning of May we announced that the chair of LPT, Cathy Ellis, would be standing down later in the year.

Cathy said: 'I am proud of our staff and the way they continue to step up to great towards our Trust's vision: "Creating high quality, compassionate care and wellbeing for all." Our Step up to Great strategy has focused us to ensure we are always striving to achieve great health outcomes, through great care, a great place to work and being an important part of our community.'

### [Celebrating Excellence awards launched](#)

In April we invited members of the public, patients, and LPT staff to put forward nominations for the annual Celebrating Excellence awards. We had a record entry of more than 250 nominations. Judging will take place over the next few weeks, with a gala celebration evening at the Mercure Grand Hotel in Leicester in September.

### [Learning Disability vaccinations come to an end](#)

In April we carried out the final three specialist Covid vaccination sessions for people with learning disabilities. During the 28 sessions we helped protect 640 individuals with first, second or booster jabs. Clinics provided attendees with a friendly and calm atmosphere, longer appointment times and vaccinators specialising in learning disability support and care.

### [Junior doctors and industrial action](#)

LPT services were affected by junior doctor strikes, as part of an ongoing pay claim. Outpatient clinics were cancelled so more senior doctors could concentrate on providing care for inpatients. Crisis services were maintained.

### [Scanners maintain high standards](#)

Following a recent external audit by the British Standards Institute, the Clinical Document Scanning Team have been

recommended for ongoing certification to British Standard 10008:2014 ‘Evidential weight and legal admissibility of electronically stored information’.

### Student wins national award

A student has won a major national award for her work while on placement at LPT. Bethan Jones, 25, is carrying out a master’s degree in nursing and leadership at the University of Leicester. She was named winner in the “Student Nurse or Midwife of the Year: Clinical Research” in the Student Nursing Times awards. At LPT, she helped design a four-week placement which will help future nursing students get their first taste of research, which in turn will help them to deliver better care for patients.

### Relevant External Meetings attended, undertaken since last Trust Board meeting

Chief Executive and Deputy Chief Executive external meetings

April	May
NHS Providers Board	NHSE Director of Finance
East Midlands Alliance CEO’s	UHL, LLR ICB Chairs, CEO’s and NED discussion
East Midlands Alliance Board	Joint working group
LLR Mental Health Programme	System Executive
NHSE Chief Strategy Officer	*Women in medicine conference
LLR ICB Chair	*ICB Children and young people’s summit
EMA Lead Graeme Jones	*Together against Racism with NHFT
UHL CEO	*Leicestershire Health and Wellbeing board
NHS Leadership – Trust and ICB CEO’s	*UEC Partnership
Midlands Inclusivity and Diversity filming	*LLR Integrated Care Board - development session
UHL ICB CEO’s 3 way discussion	*Mental Health Trusts Chief Executives meeting
East Midlands Alliance CEO’s and Chairs	*LLR LHRP Meeting
LLR Integrated Care Board	
UHL Chair	
LLR System Executive	
Mental Health Collaborative	
Stoneygate Centre for Excellence in Empathetic Healthcare launch	
Operational and financial planning webinar	
Governance review	
LLR Health & Wellbeing Partnership	
Leicestershire Partnership and Northamptonshire Healthcare Group / Equality of Opportunity Coalition	

\*planned meetings as at 22 May 2023

### 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

<b>For Board and Board Committees:</b>	Trust Board 30 May 2023	
<b>Paper sponsored by:</b>	Angela Hillery, Chief Executive	
<b>Paper authored by:</b>	Angela Hillery, Chief Executive Richard Smith, Interim Director of Corporate Governance (NHFT) Kate Dyer, Acting Director of Corporate Governance (LPT)	
<b>Date submitted:</b>	22 May 2023	
<b>State which Board Committee or other forum within the Trust's governance structure, if any, have previously considered the report/this issue and the date of the relevant meeting(s):</b>	None	
<b>If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/ partially assured / not assured:</b>	n/a	
<b>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</b>	Routine board report	
<b>STEP up to GREAT strategic alignment*:</b>	High Standards	
	Transformation	
	Environments	
	Patient Involvement	
	Well Governed	Yes
	Reaching Out	
	Equality, Leadership, Culture	
	Access to Services	
	Trust wide Quality Improvement	
<b>Organisational Risk Register considerations:</b>	<b>List risk number and title of risk</b>	none
<b>Is the decision required consistent with LPT's risk appetite:</b>	Yes	
<b>False and misleading information (FOMI) considerations:</b>	None	
<b>Positive confirmation that the content does not risk the safety of patients or the public</b>	Confirmed	
<b>Equality considerations:</b>	None	