

Agenda Item 7



Meeting / Committee:	Board of Directors	Meeting Date:	Tuesday 30 July 2013
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This paper is for: (Only 1 column to be marked with x as appropriate)	Action/Decision	Assurance	Information
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Title:	Chief Executive's Report
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Purpose:	The purpose of this report is to provide the Board of Directors with an executive summary of our key strategic objectives, national policy and organisational issues
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Summary:	<p>The paper provides information on:</p> <ul style="list-style-type: none"> • Public consultation on children's and maternity services at the Friarage • Friarage MRI Scanner Appeal • Liverpool Care Pathway • Keogh report • Friends and Family test • Awards and achievements • Annual members meeting
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Prepared By:	Prof Tricia Hart, Chief executive & Amanda Marksby, Head of communications	Presented By:	Prof Tricia Hart Chief executive
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Recommendation:	The Board of Directors is asked to note the contents of the report
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Implications (mark with x in appropriate column(s))	Legal	Financial	Clinical	Strategic	Risk & Assurance
			X	X	X

1. PUBLIC CONSULTATION ON CHILDREN'S AND MATERNITY SERVICES AT THE FRIARAGE

NHS Hambleton, Richmondshire and Whitby Clinical Commissioning Group (CCG) will start the formal public consultation around children's and maternity services at the Friarage Hospital on Monday 2 September.

The consultation will run for 12 weeks and closes on Monday 25 November. As governors are aware the CCG has been in discussions with our clinicians and managers for many months, after concerns were raised about the long-term sustainability and safety of these services.

This was backed by an independent report by the National Clinical Advisory Team (NCAT), which support, advise and guide the local NHS on changes to services to ensure safe, effective and accessible care.

In the spring of last year, the CCG, supported by staff from our organisation, held a three-month period of engagement to talk about the issues facing services and possible options for the future.

Proposals drawn from the engagement phase were then referred to the Secretary of State for Health for review by the North Yorkshire Scrutiny of Health Committee, although in May the Health Secretary gave the go-ahead for the consultation to begin on two options:

- Option 1 - running a short-stay paediatric children's assessment unit, children's outpatient and community services and a midwifery-led unit, outpatient services and community midwifery (CCG preferred option);
- Option 2 - Running children's outpatient and community services, midwifery-led unit, outpatients services and community midwifery

Members of the public will be able to give their views through an online or paper survey and the CCG is also be holding a number of public events, which are listed below:

- **Thirsk** - Wednesday 18 September – 7pm to 8.30pm – Thirsk Race Course, Station Road, YO7 1QL
 - **Richmond** - Wednesday 25 September – 7pm to 8.30pm – Richmond School, Darlington Road, DL10 7BQ
 - **Northallerton** – Saturday 28 September – 10.30am to midday – Hambleton Forum, Bullamoor Road, DL6 1LP
 - **Catterick Garrison** – Tuesday 1 October – 7pm to 8.30pm – Catterick Leisure Centre, Gough Road, DL9 3EL
 - **Masham** – Thursday 3 October – 7pm to 8.30pm – **Venue to be confirmed**
 - **Leyburn** – Tuesday 8 October – 7pm to 8.30pm – Tennants Auction House, conference room, Harmby Road, DL8 5SG
 - **Bedale** – Monday 14 October – 7pm to 8.30pm – Bedale Hall, North End, DL8 1AA
 - **Hawes** – Thursday 17 October – 7pm to 8.30pm - Hawes Community Primary School, Town Head, DL8 3RQ
 - **Stokesley** – Monday 21 October – 7pm to 8.30pm – Town Hall, main hall, TS9 5DG
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2. FRIARAGE MRI SCANNER APPEAL

Last week saw the launch of our ambitious appeal to raise £2million for an MRI (magnetic resonance imaging) scanner at the Friarage Hospital. South Tees Hospitals Charity is embarking on its first major fundraising campaign – in partnership with the Friends of the Friarage – to reach its target by December 2015.

Already the Friends have pledged £250,000 at the launch with further fundraising to follow. MRI scanners are increasingly used to diagnose a wide range of health conditions and the trust carries out over 17,000 scans every year – 4,000 of which are for patients living in the Hambleton and Richmondshire area.

However, as the Friarage Hospital does not have an MRI scanner, North Yorkshire patients currently travel to Middlesbrough or Darlington for these important imaging tests. Benefits of an MRI scanner at the Friarage include:

- Providing a local inpatient service for residents from North Yorkshire area
- Reduced waiting times
- Conditions being diagnosed more quickly and faster treatment planning
- Less travelling to other hospitals for scans
- Greater working with other clinical specialties such as the on-going orthopaedic developments at the Friarage
- Providing the trust with the capacity to comply with national guidelines
- Supporting clinical trials to help improve the trust's research profile
- Reducing the need for costly exploratory surgery

We're delighted to have the support of the Friends who have, over the years, raised hundreds of thousands of pounds for the Friarage

3. LIVERPOOL CARE PATHWAY

This month, the findings of an independent review were released recommending the use of the Liverpool Care Pathway should be phased out over the next 6 to 12 months, and replaced by a personalised end of life care plan.

This follows serious concerns raised about the inappropriate use of the pathway, with many stories in the media of patients being denied nutrition and hydration.

As an organisation, our aim is to support people to experience high quality and compassionate care in the last hours and days of their lives and for many years, we have used an adapted version of this pathway - 'care pathway for the last days of life' – across our hospital and community settings.

Following this report, we will clearly need to review our current practices, policies and documentation around end of life care although, at present, it is still very important that staff continue to use the existing pathway.

Over the next few weeks, we will review all of the findings and recommendations in the report and any actions taken will be shared and discussed widely. Colleagues can view a full copy of the report at www.gov.uk/dh

4. KEOGH REPORT

In July, the findings of a review into the quality of care and treatment provided by 14 hospital trusts in England – led by the national medical director for the NHS in England Sir Bruce Keogh – were also published.

His review looked at the quality of the care and treatment provided by the trusts which were identified as having higher than average death rates on one of the two well-established measures of death rates:

- the hospital standardised mortality ratio (HSMR), which compares the expected rate of death in a hospital with the actual rate of death
- the summary hospital level mortality indicator (SHMI), which compares death rates between individual hospitals

The report set out to determine where there were any on-going failings in the quality of care provided to patients; identify whether the trusts' actions to improve quality was adequate or further steps were needed, identify if any additional support should be made available and identify any areas which may require legal (regulatory) action to protect patients. Key findings from the review include:

- Understanding that concepts such as excess deaths and avoidable deaths are more complex than analysing a single-level summary death rate indicator (two widely used death rate indicators were the basis of results of this review)
- There are many different causes of high death rates but no 'magic' solution
- Factors often claimed to be associated with higher death rates (such as access to funding and poor health of the local population) were not found to be statistically associated with the results of these hospitals
- Accuracy of clinical coding (the way hospitals make a computerised record of diseases, operations and other "healthcare episodes") can impact on death indicator numbers
- More than 90% of deaths in hospital happen when patients are admitted in an emergency rather than for a planned procedure. The review said it wasn't surprising all 14 hospital trusts had higher deaths in urgent and emergency care
- Understanding the causes of higher death rates is not about finding a "rogue surgeon" or problems occurring in a single specialty area. The review says it is more likely to be a combination of problems that all hospitals in the NHS experience, such as busy A&E departments and wards, treatment of the elderly, and the need to recruit and keep excellent staff.

This report has once again put the NHS in the spotlight and, as an organisation, we need to look at it in detail and see where lessons can be learned. Full details of the report can be found on www.nhs.uk

5. FRIENDS AND FAMILY TEST

From today, results of the NHS Friends and Family test will be published for the first time on a national level, giving patients and the public feedback on each trust across the country.

Colleagues will be aware the test is based on one simple question – ‘would you recommend your accident and emergency department or ward to your friends or family’ and the trust rolled out this government initiative one month early in March.

Publishing the results signals the latest step towards greater transparency in the NHS to improve quality and care for patients and also helps staff to understand, celebrate and build on what is working well in their areas, while also tackling areas of weaker performance.

As well as the national information being available at NHS England and on NHS Choices, we also intend to publish regular data on the trust’s own website with constant feedback on how we have acted quickly on patient feedback and made improvements.

6. AWARDS AND ACHIEVEMENTS

I am delighted to share with colleagues some recent awards and achievements both at regional and national level.

- Gynis Peat, senior nurse, trauma, won the outstanding woman – Middlesbrough spinal cord injuries centre (SCIC) - at the Spinal Injuries Association’s women in spinal cord injuries awards ceremony. This new event recognises the outstanding women who contribute to the treatment and care of spinal cord injured people across the UK and Glynis was nominated by the SIA’s chief executive officer Paul Smith.
- Consultant ophthalmologist Chrisjan Dees and the eye clinic team at James Cook have been nominated by a patient for ‘clinical service of the year’ as part of the Macular Society’s awards for excellence.

7. ANNUAL MEMBERS MEETING AND MARKETPLACE EVENT

On behalf of the Board, I wanted to thank all the staff who contributed to the marketplace event and annual members meeting last week. Feedback was immensely positive and this really gave us the opportunity to showcase the work going on in such a large and complex organisation as ours.

More staff than ever before attended the formal part of the meeting, which included a short video, and we are already seeking views on how we could make this even better next year.

CHIEF EXECUTIVE - PROFESSOR TRICIA HART
