

# Report summary

## Trust board meeting: Part 1 (in public)

### January 2019

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Report title: Chief Executive's report to the Board

Executive lead: Chief Executive

Report authors: Chief Executive

Report discussed previously at: N/A

### Purpose and action required

For approval	
For discussion / decision	
To note	✓

### Relates to?

Strategy & Planning	✓
Quality & Safety	✓
Performance & Activity	✓
Legal & Governance	✓

### Relationship to Board Assurance Framework?

Are any existing risks in the Board Assurance Framework affected?	No
If yes, insert relevant risk reference:	N/A
Do you recommend a new entry to the Board Assurance Framework (i.e. Trust-wide level 1 risk) is made?	No

## Relationship to Trust strategic objectives?

<b>Outstanding</b>	<b>We coordinate and collaborate – to deliver holistic care We innovate – to turn research into practice</b>	✓
<b>Improving quality</b>	<b>We invest – in people, estates, technology We listen and learn – from patients, carers, staff, the public</b>	✓
<b>Compassionate care</b>	<b>We work together – and implement the principles of recovery We are recommended – by patients, carers, friends and families</b>	✓

## Summary

This paper contains updates on national, London and local issues, highlighting Trust impact and local meetings and visits of relevance.

Latest Brexit guidance is included and an outline of operational guidance for 2019/20.

## Supporting documents and/or further reading

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# Trust Board meeting (Part 1): January 2019

## Chief Executive's Report

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### 1 Purpose

- 1.1 This report aims to highlight recent key activities and to draw the Board's attention to a number of recent developments.

### 2 Recommendations

- 2.1 The board is asked to note the contents of the report.

### 3 National

#### 3.1 European Union (EU) Exit

The Secretary of State for Health & Social Care wrote to all Chief Executives on 12th October 2018 to set out what the Trust needs to do to step up preparations to ensure continuity of supply of goods and services in the event of a 'no deal' exit from the EU. In his letter, Mr Hancock stated that, while a scenario in which the UK leaves the EU without agreement remains unlikely, he had asked his Department to put plans in place to ensure the continuity of supplies to the NHS. As part of this activity, the Department of Health & Social Care (DHSC) has developed a self-assessment methodology for NHS Trusts to use to identify contracts that may be impacted by EU exit. This methodology has been tested with four Trusts, covering Acute, Mental Health and Ambulance, and shared with the Trust's Head of Procurement.

More recently, the Trust has also been asked to appoint a Senior Responsible Officer (SRO) with a direct link to the Executive Board who will oversee the prompt completion of the methodology. We have also been asked to ensure that our staff prioritise any relevant activities accordingly and that updates on progress are incorporated into existing governance arrangements. Procurement colleagues had also been requested to identify contracts deemed highly impacted, along with mitigating activities. The Department of Health have confirmed that they will provide a list of suppliers/categories that are being centrally managed by them, such as the supply of medicines.

In terms of the Trust's Workforce, currently 7% of our staff are EU nationals. Executive Directors have decided to fund the costs associated with EU national staff applying to regularise their residency status in light of Brexit, and this has been well-received.

#### 3.2 No deal Brexit

- 3.2.1 In new guidance published pre-Christmas, the DHSC have requested a Board member undertake a role to oversee preparations for Brexit and ensure that Trusts have updated their business continuity plans to factor in all potential fallout from a 'no deal' exit.

- 3.2.2 The EU Exit Operational Readiness Guidance, which covers seven areas in which the government is focusing “no deal” planning in health and care, has requested that each organisation should assess whether it has incurred a reduction in the number of EU nationals in the workforce before the UK leaves the EU, and publicise the EU settlement scheme, under which they can apply to remain. The Trust is paying for this scheme as agreed at the December Board and this is promoted to staff via Exchange and staff meetings.
- 3.2.3 Organisations are also expected to undertake local risk assessments to identify any staff groups or services that may be vulnerable or unsustainable if there is a shortfall of EU nationals.
- 3.2.4 Providers should also review capacity and activity plans “as well as annual leave” around 29 March.

### 3.3 **Planning Guidance for 2019/20**

- 3.3.1 This was issued on 21<sup>st</sup> December 2018 by NHS England (NHSE) and NHS Improvement (NHSI) and the headlines are as follows.  
The guidance includes a timetable with relevant submission milestones including:

[14 January](#) - initial plan submission (activity focused)

[12 February](#) – draft 2019/20 organization operational plans

[19 February](#) – draft aggregate system 2019/20 operation plan submission, system operating plan overview and STP led contract/plan alignment submission

[21 March](#) – deadline for 2019/20 contract signature

[29 March](#) – organization board approval of 2019/20 budgets

[4 April](#) – final 2019/20 organization operational plan submission

[11 April](#) – final aggregate system 2019/20 operation plan submission, system operating plan overview and STP led contract/plan alignment submission

[Autumn 2019](#) – 5 year system plans to be signed off by all organisations

- 3.3.2 Alongside this guidance, NHS England has [launched a consultation on the draft NHS Standard Contract 2019/20](#), as well as proposals on the use of a standard activity and finance report.
- 3.3.3 Full guidance will be published in January and will set out the full trust financial regime for 2019/20, alongside control totals and indicative CCG allocations.

### 3.4 **Mental Health Spending**

- 3.4 1 NHS England has announced rules for clinical commissioning group spending on mental health services and will implement stricter controls on those failing investment standards.

In its preparing for 2019-20 guidance, NHS England has said Clinical Commissioning Groups (CCGs) must increase spending on children and young people’s services and warned those failing the mental health investment standard could face “regulatory action”.

According to the guidance, in the next financial year CCGs will have to increase the share of investment in both front line mental health provision and children and young people services, as a proportion of their overall mental health spend.

- 3.4.2 CCGs which have historically underspent on children and young people's services will be "required to make good on this shortfall".
- 3.4.3 Commissioners' investment plans for Mental Health will need to be signed off by both their sustainability and transformation partnership leads and main mental health provider; while any CCGs which fail to achieve the mental health investment standard will face "appropriate regulatory action, including in exceptional circumstances imposing directions".

For 2019-20, the investment standard will require CCGs to increase their spend on the sector by the same rate as the growth in their overall allocations, plus an additional percentage increase to reflect the uplift in mental health funding given to each CCG. The minimum mental health uplift for each commissioner will be published in early January, according to a timetable included in the guidance.

- 3.4.4 NHS England has said it will start examining mental health spend per head for each CCG, but has not specified whether this data will be published.
- 3.4.5 In the NHS standard contract for 2019-20, NHS England has included incentives for trusts to improve the physical health of mental health patients. This was previously included in CQUIN incentives; while for the first time NHS England has included Children and Young People eating disorder targets in the contract.

## **4. London-wide**

- 4.1 I attended a London wide workshop for trust chief executives with the new London regional Director on the Workforce Race Equality Standard (WRES). The agenda focussed on senior personal commitment and the need to ensure faster and consistent progress across London.
- 4.2 The London Specialised Commissioning Board discussed the new forensic Child and Adolescent Mental Health Service, currently being recruited to since our successful bid, and to be launched this month.

## **5. North West London**

- 5.1 I attended a Shaping a Healthier Future refresh meeting organised by the North West London Collaboration of Clinical Commissioning Groups, together with all trusts.

## **6. Trust**

- 6.1 CQC: On 20<sup>th</sup> December, the CQC published the formal report and highlighted the following:



	Safe	Effective	Caring	Responsive	Well led	Overall
Long stay or rehabilitation mental health wards for working age adults	Requires improvement	Requires improvement	Good	Good	Requires improvement	Requires improvement
Child and adolescent mental health wards	Good	Outstanding ☆	Good	Good	Good	Good
Community health inpatient services	Good	Requires improvement	Good	Good	Good	Good
Community-based mental health services for adults of working age	Requires improvement	Good	Good	Requires improvement	Good	Requires improvement
Community-based mental health services for older people	Good	Good	Outstanding ☆	Good	Good	Good
Forensic inpatient/secure wards	Good	Good	Outstanding ☆	Good	Outstanding ☆	Outstanding ☆
Mental health crisis services and health-based places of safety	Requires improvement	Good	Good	Good	Good	Good
Specialist community mental health services for children and young people	Requires improvement	Good	Good	Requires improvement	Requires improvement	Requires improvement
Wards for older people with mental health problems	Requires improvement	Good	Good	Good	Good	Good
High secure hospitals	Requires improvement	Good	Outstanding ☆	Good	Good	Good

**Overall**

Overall ratings for mental health services are from combining ratings for services. Our decisions on overall ratings take into account the relative size of services. We use our professional judgement to reach fair and balanced ratings.

The link to the press release is here:

<https://www.westlondon.nhs.uk/news-events/news/trust-moves-up-to-good-cqc-rating-with-staff-going-the-extra-mile-for-patients/>

- 6.2 I hosted a celebratory gathering of Trust, Ealing CCG staff and key partners following the successful Ealing community services bid.

## **7. Recent Activities & Meetings**

### **7.1 NHS Providers Chairs and CEs network**

A national meeting in early December focussed on the NHS Long term plan, operational planning for 2019/20 and Brexit.

- 7.2 The Trust also attended an NHS England Specialised Commissioning meeting with Kier to provide further assurance on the Broadmoor redevelopment. This was also discussed at the recent National Oversight group on the high secure services.

- 7.3 I presented the Employee of the Month award to Laura Fitzsimons, Senior Workforce Partner; and the Team of the Month award to Wolsey Wing wards, Hope and Horizon.

- 7.4 With Leeanne Mc Gee, Executive Director of High Secure and Forensic Services, Father John McMahon and the two co-chairs of the Patients' Forum, we judged the ward Christmas decoration competition at Broadmoor Hospital.

- 7.5 With Dr Jose Romero-Urcelay, we visited Tony Hillis Wing, Thames Lodge, the Wells Unit, the Orchard, Lakeside unit, Jubilee Ward, Butler House, Mott House and Glyn ward, Wolsey Wing, the Limes, Ealing and Hounslow Crisis and assessment teams, Hounslow CIDS, the Research and Development Unit, St Bernard's pharmacy department, Hammersmith and Fulham inpatient unit and Claybrook Centre and other services across the Trust.

- 7.6 With Janice Barber, Non-Executive Director, we attended the CAMHS Eating Disorder service multi-disciplinary meeting.

- 7.7 I participated in the Trust's Equality and Diversity Steering Group meeting.

## **8. Recommendation(s)**

- 8.1 The Board is asked to note the content of the report.

**Carolyn Regan  
Chief Executive  
January 2019**