

TRUST BOARD PUBLIC – JUNE 2016

Agenda Item Number: 80/16
Enclosure Number: (1)

Subject:	Report from the Chief Executive
Prepared by / Sponsored by / Presented by:	Ursula Ward, Chief Executive
Purpose of paper	To updated the Board on national and local items of interest.
Key points for Trust Board members	Note contents of the report
Options and decisions required	None required, for information
Next steps / future actions:	None
Consideration of legal issues (including Equality Impact Assessment)?	None
Consideration of Public and Patient Involvement and Communications Implications?	None

Links to Portsmouth Hospitals NHS Trust Board Strategic Aims, Assurance Framework/Corporate Risk Register	
Strategic Aim	<p>Strategic aim 1: Deliver safe, high quality patient centred care</p> <p>Strategic aim 2: Develop a reputation for excellence in innovation, research & development and education in the top 20% of our peers.</p> <p>Strategic aim 3: Become the hospital of choice for general, specialist and selected tertiary services.</p> <p>Strategic aim 4: Staff would recommend the trust as a place to work and a place to receive treatment</p> <p>Strategic aim 5: Develop sufficient financial strengths to adapt to change and invest in the future.</p>
BAF/Corporate Risk Register Reference (if applicable)	N/A
Risk Description	N/A
CQC Reference	N/A

Committees/Meetings at which paper has been approved:	Date
None	

Report of Chief Executive

Board of Directors – 2 June 2016

1. NHS Choice Framework

The Department of Health has published the NHS Choice Framework. The framework brings together information about patients' rights to choice about their health care; where to get more information to help make a choice; and how they can complain if they have not been offered choice.

In some circumstances the patient has legal rights to choice and they must be given these choices by law. In other circumstances they do not have a legal right to choice but should be offered choice about their care, depending on what's available locally.

2. Changes to Department of Health Accounting Guidance to all NHS Bodies

The Department of Health has issued a consultation document on 'The Department of Health Group Accounting Manual (GAM)' which is based on the 2016-2017 Treasury Financial Reporting Manual, adapted for the NHS. It includes mandatory accounting guidance for all NHS bodies on completing their statutory annual report and accounts.

In previous years Monitor and the Department of Health issued separate manuals for this purpose, one targeted at NHS Foundation Trusts and the other at the remainder of bodies within the Department of Health accounting boundary (including NHS Trusts, Clinical Commissioning Groups and arm's length bodies). This year, the accounting requirements in the two manuals have been merged to into one single reference document.

The Department of Health is consulting on the content of the 2016-2017 GAM. Consultation closes on 1 July 2016 and the final version of the Department of Health Group Accounting Manual will be published during August 2016.

3. Review of Public Health England (PHE)

The Department of Health reviews its arm's length bodies at least once every Parliament. This tailored review looks at Public Health England's performance and effectiveness, efficiency and governance. The Department of Health wants to know what you think about:

- Whether Public Health England performs necessary functions
- Whether these functions are delivered effectively
- How issues are prioritised and how well Public Health England performs
- Whether Public Health England is efficient and provides good value for money
- Whether the governance processes are appropriate and effective

Responses to these questions are required by 24 June 2016.

4. Improving Safety Investigations in Healthcare

A report from an expert panel, chaired by Dr Mike Durkin, has been published. The report makes recommendations about establishing the Healthcare Safety Investigation Branch (HSIB) as well as how to improve investigation, and learning from investigation, across the health system. The recommendations are based on the expertise of the advisory group members and the evidence they heard from hundreds of patients, families, NHS staff and other stakeholders with experience of investigations or harm caused during NHS care.

The Department of Health is currently undertaking a recruitment process to appoint a Chief Investigator to lead HSIB. The successful candidate will take on full responsibility for the work of HSIB, determining how it will operate and when it will begin its investigation work.

The Secretary of State for Health announced the formation of a new health investigation organisation in July 2015. HSIB's primary purpose is to:

- Support local NHS organisations to conduct their own consistent high quality investigations
- Conduct a small number of its own investigations to help establish the causality of what happened and make recommendations to enable improvements to care and patient safety

HSIB will operate independently of Government and the healthcare system.

5. Controlling the Cost of Agency Spending

The controls launched in October 2015 are helping the NHS to cut spending on expensive agency staff. Before the agency control measures were introduced, the NHS was on course to spend £4billion on agency staff. Following their introduction in October 2015:

- The NHS has saved up to £300 million
- The average price paid for a nursing shift has dropped by 10% - this adjusts for changes in demand for nurses of different levels of expertise and different timing of shifts

6. Local News

- A copy of Team Brief is attached