

BOD 62/2016

(Agenda item: 6)

# Report to the Meeting of the

# Oxford Health NHS Foundation Trust

# Board of Directors

**25th May 2016**

**Chief Executive’s Report**

**For Approval**

1. **NHS Improvement (Monitor) –** **Annual Plan FY17 submission and ongoing review of financial sustainability.**

**1.1 FY16 Q4 and full year results**

The full year financial results were submitted to NHSI as required. The overall deficit of £1.9m was in line with our forecast and £3.5m better than plan. The results were reviewed with NHSI on 12 May together with the financial sustainability plans and, subject to the continued delivery of our CIP plans and the satisfactory completion of the FY17 contracts, no particular concerns were raised.

Service line reporting is in the process of being implemented; both Adults and Children & Young People directorates Heads of Service have received training and the first reports will be issued by the end of May.

**1.2 FY17 plan**

Following submission of the FY17 plan in April, NHSI reviewed by teleconference the plan with the same emphasis on CIP delivery and securing contracted clinical revenues. Subsequent discussions have not so far raised any further concerns or issues on the part of NHSI.

We are still awaiting feedback on our alternative proposal for an agency-spend target for FY17.

1. **CQC Inspection and improvement plans**

The CQC have reviewed the evidence submitted to demonstrate completion of the actions for Luther Street GP and we have received their draft report. Subject to finalisation of the report the expected outcome of the review is that the CQC will award the service an ‘outstanding’ rating. I will update the Board once the finalised report is received.

As reported last month, the CQC have confirmed the three core services within mental health rated as requires improvement will have the opportunity of being re-inspected in the **week of 13th June 2016** and the data collection process has already commenced to support that.

1. **Contract position**

The contracting process has been a lengthy affair for FY17 being complicated by the requirement to consider contemporaneously 5 year system sustainability plans (STPs). Agreement has now been reached with Buckinghamshire CCGs and Specialised commissioners for which we have draft contracts that are expected to be signed shortly and for Oxfordshire CCG an interim contract has been signed by OH, the CCG and OUH for the first 3 months to enable the parties to develop an integrated partnership approach, particularly around the frail & elderly urgent care pathway.

1. **National Issues**

A helpful digest of national issues and guidance emerging since the last report is attached as an appendix.  Key developments worthy of particular reference are as follows:

4.1. **Junior Doctors**

On 18 May, [ACAS issued a statement](http://www.acas.org.uk/index.aspx?articleid=5737) setting out the terms of an agreement presented to the government and NHS Employers, and to the BMA. This has now been agreed by all parties as resolving the current dispute, subject to securing the support of BMA junior doctor members in a referendum.

Work will continue on both sides over the next two weeks to finalise the communications with BMA members on all the details of the agreement and their new contract. The details released on Wednesday 18th include several major changes:

* the basic pay rise is to be reduced from 13.5% to between 10% and 11%
* weekends will no longer be divided up between normal and unsocial hours, instead a system of supplements will be paid which depend on how many weekends a doctor works over the course of a year
* extra pay for night shifts is to be reduced from 50% to 37%
* extra support will be made available for doctors who take time out, such as women who go on maternity leave, to enable them to catch up on their training and thus qualify for pay rises - after claims women were being unfairly penalised
* junior doctors will get an enhanced role in advising and liaising with the independent guardians who keep an eye on the hours doctors work
* the deal remains cost-neutral, which means the government is not putting in extra money

The fact that something has been agreed is a major breakthrough. But this dispute is still a long way from being over. The BMA has promised its 40,000 members a vote on the agreement and that will be carried out in June.

4.2 **Local issues**

4.2.1 **Devolution**

There are developments with the proposals for local government restructuring in Oxfordshire with the county council appointing Grant Thornton LLP UK to conduct an independent study that looks at all the options for unitary councils, as well as the status quo. To inform this work, they are in the process of assembling an advisory group with an independent chair and are also organising a series of events with parishes and town councils, to take place in June, to consider the opportunities for greater devolution of decision-making powers and services to communities.

4.2.2 **Southern Health NHS Foundation Trust**

Southern Health has appointed Tim Smart as its Interim Chair. This follows action NHSI took last week in response to serious concerns raised by the Care Quality Commission, and NHSI will work closely with the new Chair to determine if further regulatory action is needed. Tim's early priorities are to make sure:

* the quality and safety of the trust's services improve
* the Board functions more effectively

Tim was the Chief Executive of King’s College Hospital NHS Foundation Trust for seven years.

4.2.3 **Learning Disabilities**

Discussions with Oxfordshire CCG, Oxfordshire County Council, NHS England Specialised Commissioning and Southern Health NHS Foundation Trust are progressing regarding learning disabilities. It is the intention of all parties that Oxford Health take over the responsibility for the provision of the majority of these services so as to ensure that this potentially vulnerable client group is consistently well looked after. The Trust has stated to all partners that in order to be in a position to take on these services it will need to be assured that they can be provided safely, that we have the clinical and management capacity to manage the transition, and that the financial envelope provided is adequate to sustain quality services. I am pleased to report that Liz Williams has been appointed as Programme Director to lead this work on behalf of all parties. She will be employed by the Trust and will start on 1 July.

* + 1. **Sustainability and Transformation Plans (STPs)**

The development of the Sustainability and Transformation Plan for the Buckinghamshire, Oxfordshire and Berkshire (West) ‘footprint’ (‘BOB’) is continuing, led by David Smith, Chief Executive of Oxfordshire CCG. The initial submission required a description of the footprint and the main issues it faced and was submitted to NHS England on time. Informal feedback received to date suggests that it is one of the ‘lower risk’ STPs nationally. The next major step is a submission at the end of June which describes in more detail the nature of the transformational change required across BOB. This is expected to be based on themes emerging from each of the three constituent parts.

In Oxfordshire that will come from the Oxfordshire Transformation Board, which will be holding a public engagement event on 6th June to review the transformation plans for various clinical pathways and to begin the process of developing options and criteria as the basis for subsequent formal public consultation. In Buckinghamshire it will come from the work of the Bucks Healthy Leaders Group, though that work is at an earlier stage. There are similar arrangements in Berkshire (West). The Oxfordshire Transformation Board, at its most recent meeting, has welcomed new members from Healthwatch and a representative from the CCG locality public and patient involvement forums. In addition to the public engagement event there are events planned for clinicians and key decision makers (including Boards) later in the summer.

1. **Queen’s Speech**

Attached is a briefing which gives an overview of the areas within the Queen’s speech of most relevance to the health and care sector and a summary of other legislation of interest.

1. **CEO Stakeholder Meetings & Visits**

Since the last meeting, key stakeholders with whom I have met; visits I have undertaken and meetings that I have attended have included:

* Leader of Oxfordshire County Council, Ian Hudspeth
* Berkshire, Oxfordshire & Buckinghamshire (BOB) System Transformation Programme (STP)
* Aylesbury Vale and Chiltern Clinical Commissioning Groups, Contract Escalation meeting
* Secretary of State visit to the Department of Psychiatry
* Weekly Oxfordshire CEOs meeting
* Oxfordshire Clinical Commissioning Group, Strategic Finance Contract meetings
* Programme Director for the Oxfordshire Transformation Board: Damon Parker
* Chief Executives of NHS Organisations with NIHR Infrastructure meeting
* OHFT Improvement and Innovation Conference
* Healthy Bucks Leaders meeting
* Programme Director for the Healthy Bucks Leaders: Ann Donkin
* Oxfordshire System Resilience Group
* Oxfordshire Health Overview and Scrutiny Committee
* Oxford Delayed Transfer of Care Summit
* Academic Health Science Centre Board
* Care Quality Commission Learning Event: Adult Directorate
* Advanced Health and Care telecon
* Oxfordshire Transformation Board
* University of Oxford: Professor Richard Cornall
* Academic Health Science Network Board
* Oxford Chairs and Chief Executives meeting at OUH
* BRC Planning
* Oxfordshire Clinical Commissioning Group, System Transformation Programme, Information Management and Technology Group
* Joint OHFT and University of Oxford: Warneford Masterplan tender interviews
* Care Quality Commission Summit: Lincolnshire Partnership NHS FT
* Regius Professor Sir John Bell
* Healthy Bucks System / Bucks Transformation Programme Workshop
* OHFT and University of Oxford Joint Warneford Buildings and Estates Working Group

7. **Consultant appointments**

An Advisory Appointments Committee was held on 4 May 2016, chaired by Dr Mark Hancock, Medical Director, and attended by Mr Martin Howell, Chair of the Trust.

Dr Frances Whitaker has been offered the position of Consultant in Children and Adolescent Psychiatry, Abingdon CAMHS. Dr Whitaker completed her medical training at Leeds University in 2007, having also obtained an intercalated BSc in Psychology (first class honours) in 2005.   She currently works two days a week as an ST6 CAMHS trainee in Oxford and three days a week as the Dinwoodie RCPsych Fellow with the Royal College of Psychiatrists, where she is examining a ‘Values-Based approach in Child and Adolescent mental health services’. She is due to complete her specialist training in August 2016.

Dr Panawalage Perera has been offered the position of Consultant in Children and Adolescent Psychiatry, Melksham OSCA service. Dr Perera graduated from the University of Oxford in 1996 and obtained his CCST in Child and Adolescent Psychiatry in 2008 from St George’s, London. He obtained an MSc in Mental Health Studies from King’s College, London, in 2004 and an MSc in Systemic Psychotherapy from the Institute of Family Therapy and Birkbeck College in 2011. He has worked as a Consultant in Child and Adolescent Psychiatry at Sussex Partnership NHS Foundation Trust since May 2008.

The Board is asked to ratify these appointments.

8**.   Recommendation**

The Board of Directors is invited to note the report and to seek any necessary assurances arising from it or its appendices; and is invited to ratify the new consultant appointment.

**Lead Executive Director:** Stuart Bell, Chief Executive