

Chief Executive's report to the NHS Greater Manchester Integrated Care Board

20th September 2023



NHS Greater Manchester Integrated Care

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PURPOSE OF REPORT:

The report is as usual split into three key sections; national updates, regional updates and system updates. The report details various hot topics and themes which I would like to bring to the attention of Board members. Feedback on the format and content provided, as well as any requests of topics Board members would like covered in the coming months would be welcome.

KEY MESSAGES:

The Chief Executive's report is once again split into three key sections; national updates, regional updates and system updates here in Greater Manchester (GM).

RECOMMENDATIONS:

The Board is asked to:

- a. Provide feedback to the Chief Executive on the topics covered.
- b. Suggest and recommend future topics for the Chief Executive's report.
- c. Note the content of the report and the key messages provided.
- d. Note the update provided on the Lucy Letby case and FTSU arrangements.



1. INTRODUCTION

The Chief Executive's report is once again split into three key sections; national updates, regional updates and system updates here in Greater Manchester (GM).

2. National Updates

Industrial Action

As I have previously explained to the Board, industrial action across health and care services continues. Discussions at a national level have resulted in a settlement for some staff groups, whereas other staffing groups have continued to take industrial action. The system has worked well to plan for industrial action which has meant the impact has been kept to a minimum. NHS GM continues to work with trade union colleagues, whilst respecting an individual's right to take industrial action. Those individuals who take industrial action can access various support mechanisms available through the respective NHS organisation which employs them. However, there will be an ongoing effect on recovery and the achievement of key targets.

Verdict in the trial of Lucy Letby

On Friday 18th August, Amanda Pritchard – CEO of NHS England, sent the attached letter (Appendix 1) to senior letters across the NHS in England. I am sure the Board will join me in recognising that Lucy Letby committed appalling crimes and abused the trust placed in her. Our thoughts are with all the families affected, who have suffered pain and anguish that few of us can imagine. Mandy Philbin – Chief Nursing Officer and Janet Wilkinson – Chief People Officer at NHS GM are carrying out due diligence on behalf of the system, liaising with both national and regional colleagues. Following the outcome of the trial of Lucy Letby, the letter from Amanda Pritchard asked leaders and boards to urgently ensure the following:

- All staff have easy access to information on how to speak up. I can confirm that NHS GM have routinely shared information on the Freedom to Speak Up (FTSU) arrangements for the organisation. Board members will be aware that FTSU is a topic which I have personally championed since joining NHS GM. Moreover, I invited our Lead FTSU Guardian to our Extended Leadership Team in June of this year, to provide advice and guidance to the most senior members of staff within NHS GM. Our Lead FTSU Guardian will also be conducting an audit of FTSU arrangements across our NHS trusts and supporting provision where appropriate. I will be inviting the Lead FTSU Guardian to join our Extended Leadership Team once again during Freedom to Speak Up Month in October to discuss speaking up in our organisation and the work that is taking place across the health and care system in GM to ensure we have excellent speaking up arrangements for all staff across the system.
- Relevant departments, such as Human Resources, and Freedom to Speak Up Guardians are aware of the national Speaking Up Support Scheme and actively refer individuals to the scheme. As explained above, work is already underway in NHS GM to carry this out, with a programme of work in place to grow the FTSU agenda across the whole NHS here in GM.
- Approaches or mechanisms are put in place to support those members of staff who may have cultural barriers to speaking up or who are in lower paid roles and may be less confident to do so, and also those who work unsociable hours and may not always be aware



of or have access to the policy or processes supporting speaking up. Methods for communicating with staff to build healthy and supporting cultures where everyone feels safe to speak up should also be put in place. As explained above, a programme of work is already in place across the NHS in GM in respect of the reach and awareness of the FTSU agenda.

- Boards seek assurance that staff can speak up with confidence and whistleblowers are treated well. The Board will need to appoint one of the Non-Executive Directors (NEDs), to be the Lead Board Member for FTSU. I have already begun to discuss how this could work for NHS GM with Sir Richard as our Chair and with the Board Secretary. It is my intention to bring a proposal for how this will work, to our next Board Meeting in November. Once appointed it is my intention for the NED to understand the wider system position on our effectiveness of the FTSU agenda and the importance to act on any concerns raised to them.
- **Boards are regularly reporting, reviewing and acting upon available data.** As CEO I can confirm that there is already a reporting mechanism in place for NHS GM's FTSU arrangements. Once we appoint our FTSU NED, I will be liaising with them on this topic going forward.
- The letter also reminds organisations of their obligations under the Fit and Proper Person requirements. I can confirm that NHS England has recently strengthened the Fit and Proper Person Framework by bringing in additional background checks, including a board member reference template, which also applies to board members taking on a non-board role. Our HR Team, which falls under our Chief People Officer are following this up accordingly.

We will be providing fuller assurance to the Board on the GM system's response to the case via the Quality & Performance Committee.

Cancer waiting time standards

In 2018, the then Prime Minister Theresa May, asked Professor Sir Steve Powis, NHS England's Medical Director, to lead the first review of cancer waiting times standards in almost 10 years. This review aimed to make sure that they were appropriately aligned with modern clinical practice, as well as taking into account the recommendation of the 2015 Independent Cancer Taskforce to remove the two-week wait standard in favour of the Faster Diagnosis Standard. This review concluded in early 2020, however, the implementation has been delayed due to the need to focus on the restoration of services following the initial phase of the Covid-19 pandemic, and specifically the need to lower the 62-day backlog.

With the 62-day backlog having fallen from its peak of over 34,000 patients to around 21,000 recently, and a shared confidence that this will fall further by the end of the year, NHS England and DHSC agreed that now is the right time to implement these changes and focus on the measures that matter most for cancer patients and clinical outcomes. Following the review, the changes will come into effect from Sunday 1st October 2023. The changes will combine all of the previous standards and cover additional patients:

- The 28-day Faster Diagnosis Standard (75%)
- One headline 62-day referral to treatment standard (85%)
- One headline 31-day decision to treat to treatment standard (96%)



CQC assessment of Integrated Care Systems

I reported to the Board in July, that under the Health and Social Care Act 2008, as amended by the Health and Care Act 2022, the Care Quality Commission (CQC) now have new powers to assess Integrated Care Systems (ICSs). Before the CQC can move to ongoing assessments, the CQC advised that they will need to complete an initial formal assessment for all ICSs to establish a starting point, or 'baseline'. The CQC expect to commence their initial formal assessments from 2024. The CQC have undertaken co-production to develop their interim methodology and, with the intention to undertake pilot assessments, initially covering two ICSs between September and December 2023. NHS GM formally applied to be a pilot ICS and at the time of writing the report to the Board in July, NHS GM had not received feedback from the CQC. Sadly, the GM system was unsuccessful in the pilot application process. However, in the expectation of a forthcoming full inspection, we are beginning the process of our own "shadow" assessment of compliance to identify areas for improvement.

3. Regional Updates

NHS England – NHS System Oversight Framework Segmentation & Support Arrangements

As reported by the Deputy CEO to the Board in May, as part of NHS England's assurance against the NHS GM system, we have been highlighted nationally as an area of concern. Whilst performance against key targets is improving, major concern remains, particularly about finance. Considering the need for a plan to drive improvement, a decision was made by NHS England to move NHS GM from Segment 2 (SOF 2) to Segment 3 (SOF 3) in line with the requirements set out in the NHS Oversight Framework 2022/23: https://www.england.nhs.uk/nhs-system-oversight-framework

Consequently, NHS GM are in continued dialogue with NHS England's Regional Team to ensure that NHS GM is provided with the necessary support from not only NHS England, but wider partner organisations. NHS GM is progressing the action plan for delivering improvement and setting out monitoring arrangements. Although SOF 3 is not formally mandated intervention, it does allow support to be obtained and focused on key areas of challenge and concern. On 28th July, the Executive Team met with Richard Barker – Regional Director, along with his Regional Management Team for our Quarter 1 Assurance Meeting. A draft letter regarding our Assurance Meeting was received on 31st August. For completeness I will provide a copy of the final letter for the Board's awareness when we receive this.

Part of the support arrangements from NHS England was to enable the leadership and governance review by Carnell Farrar (CF) which was positioned to complement the diagnostic work already undertaken by PricewaterhouseCoopers (PwC) UK. Board members will be aware of the various engagement sessions and meetings that NHS GM have facilitated for system colleagues, which has culminated in the revised operating model for the Board's consideration and approval today. CF have reviewed the structures for oversight, delivery and transformation across the GM system to understand how effectively the current arrangements work, including leadership, decision-making, resourcing and culture.

I would like to take this opportunity to remind the Board that the CF Team have worked through a range of engagement methods including interviews, group discussions and a survey of senior leaders. The initial verbal feedback of the findings was provided to a system leadership event at the end of April where the



NHS GM Executive Team were joined by members of the Board, trust CEOs and Chairs, as well as Place Base Leads. The final report was completed in May and was shared with the Board. I would like to extend my thanks once again to system wider colleagues for not only their engagement, but their support throughout the CF review.

The GM system still finds itself in a challenging financial position, with this month's Finance Report demonstrating a worsening of the position year-to-date. The drivers of this further deterioration include ongoing pressures as a result of unplanned industrial action, increased prescribing costs, and a shortfall in efficiency delivery at organisation and system level, albeit with some improvement in delivery against savings targets in August. The ability to achieve a forecast balanced position is becoming harder, with an increased level of risk of delivery. As a result, further external support has been agreed through PWC so that the GM system can provide NHS England with assurance on its financial position for this financial year and over the medium term, to achieve a sustainable turnaround on the financial and operational performance. The support will focus on:

- I. Testing a number of scenarios and opportunities to achieve financial balance in 2023/24.
- II. Reviewing and establishing the underlying financial position.
- III. Providing detailed recommendations to ensure that the turnaround regime is embedded across the whole of the GM system going forward.

4. Greater Manchester Updates

Celebrating our health and care champion award winners

In July I had the pleasure of attending the Greater Manchester Health and Care Champion Awards 2023 to celebrate the fantastic work taking place in services across GM. Over 500 people were nominated for 13 categories including Community Champion, Volunteer Champion and People's Champion. Finalists attended the ceremony at the National Football Museum in Manchester, which was hosted by the TV presenter and journalist, Michelle Ackerley. There were plenty of inspirational stories shared on the night, really highlighting the strength, determination and dedication of all those who work within the health and care workforce, both employed and unwaged.

Professor Stephen Playfor, a Consultant in Paediatric Intensive Care at the Royal Manchester Children's Hospital since February 2002 won the Lifetime Achievement Award. Professor Playfor was recognised for his dedication to delivering and developing high quality services for critically ill children and his commitment to his patients and colleagues. His commitment to research into critical care has ultimately led to the saving of lives of children across the country.

The Mayor of Greater Manchester, Andy Burnham presented four individuals with his Mayor's Special Recognition Award, which celebrates a contribution to health and care that is truly unique. Barbara Lambert, Volunteer Chair of League of Friends, Wrightington, Wigan and Leigh Teaching Hospitals NHS Foundation Trust, Jill Dodge, Administrator, Pennine Care NHS Foundation Trust, Mary Armstrong, Director, Ferrol Lodge Care Home, Sale and Brenda Buckley, Receptionist, Lockside Medical Centre, Stalybridge, collectively having over 230 years of experience between them, working in health and care and serving the communities of GM. They were recognised on the night for dedicating not only their working lives, but their later lives to help care for others. I was also pleased to see one of our NHS GM nominees Alexia Mitton, Assistant Director of Communications and Engagement win the Wellbeing Champion Award for the work she does supporting the wellbeing of her colleagues. It was an honour to



hear of the fantastic work that happens across our system every day and so important that we take the time to recognise the commitment and dedication of our colleagues. I would like to once again say well done to all those who were nominated. I look forward to welcoming the awards back again in 2024.

Workforce project shortlisted for HSJ Award

Our NHS GM People and Culture Team have, in collaboration with the Northern Care Alliance NHS Foundation Trust (NCA), and other system partners, been for shortlisted for the Workforce Initiative of the Year in the Health Service Journal (HSJ) Awards. The Team have been shortlisted for their work delivering new and different approaches to recruitment which I explained in my report to the Board in July. The Team is already in the final three for the Healthcare People Management Association (HPMA) awards in the Working Smarter category. I am sure the Board will join me to wish the Team the very best of luck.

NHS GM to be part of a Digital Vanguard

NHS GM has partnered with Manchester University NHS Foundation Trust (MFT) to secure funding to become part of a national vanguard programme to improve productivity and efficiency within our HR Services. The 'Scaling and Transforming People Services' vanguard will develop a business case for driving improvement across our NHS providers by automating HR Services. This work will look at processes, such as pre-employment checks, onboarding arrangements, as well as systems such as Trac and ESR. The work will also look at enablers such as workforce portals and digital literacy.

Falls Prevention Awareness Week (18th September to 22nd September 2023)

Preventing falls over the life course is a priority for us in GM. Falls can be a crucial indicator of poor health and wellbeing in mid to later life and prevention interventions can support individuals to age well. Each and every one of us has a role to play in raising awareness of falls across community, clinical and care settings. During Falls Awareness week, the Greater Manchester Ageing Hub are hosting a week of learning events for falls prevention, promoting the positive benefits of falls prevention and showcasing how our services, staff and voluntary sector are working together to prevent falls.

Month of Hope

The Month of Hope runs annually from 10th September, which is World Suicide Prevention Day, until 10th October, which is World Mental Health Day. The Month of Hope is about raising awareness of suicide by encouraging everyone in GM to have open conversations and play a role in preventing suicide, while inspiring hope across the city-region. The Month of Hope is delivered as part of the <u>Shining a Light on</u> <u>Suicide</u> campaign. This year's campaign theme is 'Creating Hope Through Action' and we will be raising awareness of the actions we can all take to reduce suicide and instil hope.

To mark the Month of Hope, a number of events are happening across GM, including several vigils of remembrance, the Speak Their Name Greater Manchester Suicide Memorial Quilt on display at Bury Art Gallery and a wellbeing walk at the Royal Horticultural Society (RHS) Bridgewater. The Communications Team is supporting with a communications toolkit which includes a press release, newsletter copy and social media posts. The key message is to encourage people to take the free 20-minute online suicide prevention training, which I referred to in my July CEO Report to the Board. I would encourage Board



Members to learn more about how to save a life by completing the <u>free suicide prevention training</u>. As part of the Month of Hope, I have also invited GM's Strategic Commissioning Lead for Community Mental Health Teams Transformation, Suicide Prevention and Bereavement Support to attend the NHS GM Extended Leadership Team (ELT) meeting in September to deliver an update on the suicide prevention agenda to our organisation's most senior leaders.

GM ICS Digital Transformation Strategy

The GM ICS Digital Transformation Strategy is listed as an agenda item for today's meeting. This work is built upon Health Innovation Manchester's (HInM) development and rollout of the GM Digital Maturity & Investment Framework with engagement in all care settings. I would like the Board to note a point that I made to the HInM Board on 25th July, that the digital maturity assessment developed in GM has now been adopted by NHS England for rollout to all Trusts across the country. There is a full delivery plan underpinning the strategy which is critical for our collective delivery of new models of care, improvement of outcomes and efficiency, and supporting GM's broader ambition to become a world-leading digital city region.

5. Recommendations

5.1. The Board is asked to:

- a. Provide feedback to the Chief Executive on the topics covered.
- b. Suggest and recommend future topics for the Chief Executive's report.
- c. Note the content of the report and the key messages provided.
- d. Note the update provided on the Lucy Letby case and FTSU arrangements.

Appendix 1: Verdict in the trial of Lucy Letby, letter from Amanda Pritchard – CEO of NHS England