

CEO's Report to the Board

March 2024



NHS Greater Manchester

	Integrated Care Board
	CEO's Report to the Board
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This paper relates to the following BAF risks:	
Workforce challenges including shortages in many roles across the whole health &	
care sector & staff wellbeing & efficiency	
Demand exceeds available capacity to deliver services in a timely and effective way	
Failure to deliver Financial Balance both for NHS GM organisationally and as an ICS	
Widening health inequalities due to a reduced focus on prevention for the GM	
population	
Sustaining a strong market for community-based services (including adult social care	
and primary care)	
An emergency could overwhelm NHS GM's ability to respond effectively	
There is a risk failure to comply with our statutory duties for quality assurance in	
Quality and Patient Safety within the NHS GM system	

EXECUTIVE SUMMARY INCLUDING KEY MESSAGES:

The report details various topics 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. My Chief Executive's Report to the Board is once again split into three sections; national updates, regional updates and system updates here in Greater Manchester (GM). The Board is also asked to note the decisions made outside of the normal meeting cycle of the Executive Committee.

The Board is asked to:

- a. Note the decisions taken by the Executive Committee and Chief Officers.
- b. Provide feedback to the Chief Executive on the topics covered.
- c. Suggest and recommend future topics for the Chief Executive's report.
- d. Note the content of the report and the key messages provided.



1.0 NATIONAL UPDATES

1.1. Measles Outbreak and the National Childhood Immunisations Campaign

Board members will be aware, from the media coverage on the rising cases of Measles. I would like to assure the Board of the work being undertaking here in Greater Manchester (GM), which has been a huge multiagency response to the rise in measles cases. The key focus is on prevention of further cases by ensuring people are up to date with their Measles, Mumps and Rubella (MMR) vaccination. Work is also ongoing to prevent secondary transmission and manage potential outbreaks.

The key activities include:

- The continuation of a locally commissioned service to provide MMR vaccination to primary aged children who do not have a complete MMR vaccination history. Primary schools with the highest number of incomplete vaccination histories are being prioritised. The service has now extended their offer to include staff, and also pre-school settings attached to local authority schools and Sure Start Centres, aimed at 2-3 year olds who have not had their first MMR.
- The School Aged Immunisation Services continue to improve vaccination uptake in secondary school children who do not have a complete MMR vaccination history, prioritising those with the lowest uptake.
- The introduction of vaccine catch-up clinics in general practice, including evening and weekend sessions.
- Community pharmacies being able to offer the MMR vaccine for the first time to run catch-up sessions.

A local campaign has also been launched across GM to raise awareness about the signs and symptoms of Measles and the importance of vaccination. The <u>toolkit</u> is available to download on our website, and as such I would welcome the Board utilising the channels where relevant and share more widely. There is also useful information to read more about the signs and symptoms of Measles and what to do if you think you or a family member has Measles by visiting our <u>website</u>.

Moreover, the National Childhood Immunisations Campaign was launched in GM on Tuesday 29th February. The media launch activity took place at Newbury Green Practice, which is a GP Practice in Salford. Filming took place with ITN, which saw interviews with Dame Jenny Harries who is the UK Health Security Agency (UKHSA) CEO and a GP from the Newbury Green Practice. The campaign is now to be rolled out nationally because of the increase in Measles cases across the country. The resources, which were developed with the help of NHS GM have now been circulated. The campaign will be upweighted in the North West with a specific focus on Manchester, Salford and Oldham due to low vaccination uptake in those areas.

1.2. International Women's Day – Friday 8th March 2024

In readiness for International Women's Day 2024, on Thursday 7th March, Janet Wilkinson welcomed a diverse group of women from our workplace to talk about the challenges that remain for women to flourish in the workplace. I was fortunate enough to be able to join for part of the session and I would like to particularly thank colleagues for making the event happen, as well as those who took part.



The session covered: Maternity, childcare and cost of living, how to develop career pathways where evidence tells us there are blockages, as well as what our gender pay gap data 2023 is telling us. During the Board Meeting I will invite the Chief People Officer to add any comments and reflections herself, from the event we held on Thursday 8th March, in addition to IWD itself on Friday 8th March.

2.0 NORTH WEST UPDATES

2.1. Assurance Processes with NHS England

Members of the Board will be aware of the recent media attention regarding NHS GM's current financial pressures and the agreed deficit position. Board members will already be aware of the hard work taking place to complete our annual and longer-term plans in what is a hugely challenging financial and performance environment for the NHS, nationally as well as here in the North West region and specifically in GM. There are substantive agenda items at this meeting. Once we have submitted our plans and budgets to NHS England we will be able to complete discussions with them on the assurances they will require around delivery.

3.0 GREATER MANCHESTER UPDATES

3.1. The Executive Committee Meeting

For my CEO's Report to the Board for March, I would like to report the following three decisions reached by the Executive Committee and Chief Officers in line with the financial scheme of delegation. For completeness, I will happily share the necessary formal reports, to provide additional information to members of the Board, upon request:

- Approval of the licence agreement for the Urgent and Emergency Care (UEC) system ADASTRA.
 Total contract value of £2,090,390.52 (plus an inflationary uplift in years two and three) over three years, agreed by the Executive Committee in line with the financial scheme of delegation.
- A contract extension for the Electronic Eye Referral System (EERS). Contract extension for 14 months up to the end of the 2024/25 financial year, for a total of £391,066 plus VAT. This decision was enacted by the Chief Executive, the Interim Chief Finance Officer, and the Chief Nursing Officer in line with the financial scheme of delegation.
- Agreed to move forward for Phase 1 of the Medicines Optimisation Team organisational change.
 Agreed by the Executive Committee.

3.2. Consultation on Adult Attention Deficit Hyperactivity Disorder (ADHD) Services

Engagement work continues with service users and stakeholders in preparation for the upcoming consultation in relation to Adult ADHD Services. The aim of the engagement exercise is to educate service users on the issues surrounding the current service model and help to inform the options appraisal stage



of the consultation. It is expected that the formal consultation will officially launch in May following the local elections and will run for an 8-week period.

Board members can expect to receive regular updates on the progress and outcome of the consultation as it progresses. The decision to consult on Adult ADHD Services was made by the Executive Committee in February 2023 following a recommendation from the Involvement Assurance Group. However, please note that going forward, all decisions as to whether formal consultation will be required over engagement will be made by the Board.

3.3. Care Quality Commission (CQC) Inspections of the ICB

Whilst there is no imminent inspection due, and indeed the methodology is not yet clear, NHS GM are now preparing for the likely new CQC requirements, in collaboration with the Good Governance Institute (GGI). Members of the Executive Team and their direct reports are already working closely with the GGI, with my intention to provide a more detailed update to the Informal Board Meeting in April. At the Informal Board in April, Board members will receive feedback from GGI on their own direct input, which took place during December's development session. Mandy Philbin and Janet Wilkinson are leading this work.

3.4. National Health and Care Strategic Information Governance Network (SIGN) – Award

The National SIGN brings together the chairs of a network of independent, regional, and sectoral information governance groups from across England. The individual groups provide information governance and data protection professionals working in health and care access to peer support, networking and best practice advice and guidance. Many of the groups have been in existence for many years. Issues identified locally are frequently escalated to the National SIGN, which works with central agencies, providing feedback on the impact of current issues and helping to influence the structure of their formal advice and guidance.

SIGN has given their 'IG Innovator of the Year' Award to NHS GM, Health Innovation Manchester (HInM) and the University of Manchester as a result of our collaborative work on the Secure Data Environment (SDE). I would like to congratulate all colleagues involved from NHS GM, HInM and the University of Manchester.

3.5. Oliver McGowan Mandatory Training

Following the sad story of the death of Oliver McGowan, legislation now requires all health and care providers to ensure their staff are trained in learning disability and autism awareness. There is a clear framework standard that must be met, and the preferred method is the Oliver McGowan Mandatory Training Programme. NHS GM has agreed with NHS England to coordinate the trained trainer capacity across the GM area to enable all health and care providers to be able to meet their trainer requirements to meet their training obligations. To support this, NHS GM's People and Culture Team has recruited a



full-time Programme Manager to reach across the train the trainer 12-month programme, working with health and social care stakeholders as well as third party stakeholders, potential suppliers of trained trainer capacity and lived experience trainers. This requires a massive amount of engagement across GM health and care to understand delivery of internal programmes to the wider GM workforce, looking to support their ability to meet the tier one and tier two trainer requirements.

3.6. GM Workforce Summit 2024

The GM Workforce Summit 2024: Unlocking Our Potential took place on Tuesday 12th March at the People's History Museum. This was a fantastic opportunity to bring together workforce leaders from across the health, social care and the voluntary sector, as well as education and training providers and trade unions and other partners, to share ideas and good practice, as well as identifying areas where we could be working together more closely. I know that the event has only been possible due to the support of a number of organisations who are delivering exhibits and workshops at the summit.

3.7. Expanding Freedom To Speak Up (FTSU) across our System

NHS GM has had a full time Freedom to Speak Up Guardian since March 2023, and it has been their role to lead on the development of the Freedom to Speak Up (FTSU) offer both within NHS GM and across primary care, social care and the Voluntary Community and Social Enterprise (VCSE) sector. Freedom to Speak Up (FTSU) is for anyone who works or volunteers in the health sector and is a clear and simple process for staff to be able to raise their concerns, all of which will be acted upon, without fear of detriment for speaking up. At NHS GM we are committed to embedding a culture that encourages all colleagues to be open and honest about their experience of work, where we encourage speaking up.

The National Guardian's Office and NHS England have recently published guidance for ICBs to ensure that speaking up routes are available for staff working across all four areas of primary care. In GM we have an ambition to be the first Integrated Care System (ICS) to embed FTSU effectively across the whole of primary care. However, with 22,000 staff across a large number of independent employers, this is going to be a significant programme of work. Our first step has been to undertake a survey across the sector to understand the FTSU provision that is currently in place and use that baseline data to inform the support that is designed and developed with primary care providers over the coming year. The survey closed at the end of February and the People and Culture Team are in the process of collecting the final survey results.

This work is alongside the support we provide to several NHS trust in GM, with additional FTSU Guardian access for Bolton NHS Foundation Trust, and the provision of a full time FTSU Service to Wrightington, Wigan and Leigh Teaching Hospital NHS Foundation Trust as of 1st March 2024. Our NHS GM Freedom to Speak Up Guardian also continues to support the Maternity Provider Guardians through GM FTSU Maternity Support Network.



4.0. RECOMMENDATIONS

The Board is asked to:

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