

## Board of Directors (In Public)

### Item 1.8

**Subject:** Chief Executive's Report  
**Date of Meeting:** Wednesday 31<sup>st</sup> May 2023  
**Presented by:** Jane Tomkinson, Chief Executive  
**Purpose of Report:** To Note

BAF Reference	Impact on BAF
All	The report updates on a range of issues.

Level of assurance ( <i>please tick one</i> ) <i>To be used when the content of the report provides evidence of assurance</i>					
<input checked="" type="checkbox"/>	<b>Acceptable assurance</b> Controls are suitably designed, with evidence of them being consistently applied and effective in practice	<input type="checkbox"/>	<b>Partial assurance</b> Controls are still maturing – evidence shows that further action is required to improve their effectiveness	<input type="checkbox"/>	<b>Low assurance</b> Evidence indicates poor effectiveness of controls

### 1. NHS response to COVID-19: Stepping down from NHS level 3 incident

NHS England (NHSE) have written to organisations to confirm that the NHS would be stepping down the COVID-19 incident. In May 2022 the incident was stepped down from level 4 to level 3, and whilst there have been waves of covid-19 since that date there has also been a significant NHS vaccination programme.

In the letter, NHSE thanked organisations and their teams for the outstanding efforts to deal with the impact of this extraordinary health emergency.

Implications of stepping down the NHS incident will include:

- Data will no longer be collated on the COVID-19 Patient Notification System (CPNS) for patients who have died of COVID-19, with processes reverting to the death certificate aligned to other infectious diseases.
- The acute COVID-19 data collection process will be stood down with a subset of data incorporated into the existing UEC data collection from June. This will ease the burden on NHS trusts.
- Communications: We have recognised the value of having a permanent operations structure to support you, disseminate information and collect data during declared incidents and/or other periods of heightened risk or disruption, e.g. industrial action and winter pressures. NHSE National and Regional Operations Centres have been valuable during the pandemic and the plan is to continue to operate these, but with a review of the hours of operation.

NHSE are also currently reviewing the outbreak reporting process and will be contacting Trusts about this separately.

## **2. Cheshire and Merseyside ICS Update**

Cheshire and Merseyside ICS are required to develop and coproduce a Joint Forward Plan (JWP). This is a document that describes how the Integrated Care Board (ICB) and partner trusts intend to arrange and/or provide NHS services to meet the population's physical and mental health needs.

This document is currently in draft form and being consulted upon with respective parts of the system. The Trust is part of this planning and has been a contributor in its development with reference to the work of the Cardiac Board and Cardiovascular prevention

In summary, the Cardiac Board and clinical network has identified the following as key priorities for its 2023/24 work programme:

- Tangible progress toward the new stretch targets for the National CVD Prevention Ambitions as per 2023/24 priorities and operational planning guidance
  - Increase percentage of patients with hypertension treated to NICE guidance to 77% by March 2024
  - Increase the percentage of patients aged between 25 and 84 years with a CVD risk score greater than 20 percent on lipid lowering therapies to 60%
  - Continue to address health inequalities and deliver on the Core20PLUS5 approach
- Publication of a Cheshire and Merseyside wide Advancing CVD Prevention strategy
- Develop further innovative partnerships, focusing on primary and secondary prevention priorities including CVD, Stoke, Respiratory, Kidney Disease and diabetes
- Targeted health inequalities with programs such as Healthy Lung
- Work with Population Health Board in respect of health inequalities
- Work with Diagnostic work programme on increasing access to Echocardiogram through innovative solutions such as Automated Intelligence for Echo.
- Continued Implementation of the 4 National Cardiac Pathways (refer to the Liverpool Cardiology Partnership)
- Further development and roll out of the Cheshire and Merseyside Familial Hypercholesterolemia service.

## **3. Cheshire and Merseyside Acute and Specialist Trust Collaborative (CMAST) Update**

CMAST was formed in spring 2021, following a system wide focus on, and contribution to the pandemic response. Our collaborative was named CMAST from summer 2021 and sought to build on the solid foundations established by the Cheshire and Merseyside Hospital Cell.

The CMAST workplan for 2023/24 includes:

- Elective Recovery
- Workforce

- Finance Efficiency and Value
- Clinical Pathways Program
- Orthopaedics
- ENT / Dermatology networks
- Facilitation of GIRFT
- National Cardiac Pathways as per Liverpool Cardiology partnership
- Diagnostics

LHCH is an active member of CMAST and appropriate work streams.

#### **4. One Liverpool Update**

A Population Health Management Summit has been held with excellent attendance from colleagues, demonstrating the importance of this agenda to partners across Liverpool.

This summit output will provide valuable input to the development of a system wide Winter Plan.

#### **5. Cheshire and Merseyside Urgent and Emergency Care (UEC) Tier 1 and Improvement Support**

Recognising the challenges and the priorities for improving urgent and emergency care, NHS England will be working with regions and systems to provide bespoke support to improve services for patients. As part of the UEC improvement approach, each system has been allocated into one of three tiers, which will determine the level of improvement support and oversight.

Cheshire and Merseyside (C&M) has been identified as a Tier 1 system. As a Tier 1 system, C&M will receive the highest level of support to help achieve these ambitions with a tailor-made approach depending on the changes required and the most appropriate improvement approach.

LHCH is committed to supporting the system in its response to improving urgent and emergency care and will work with system partners as required to drive this forward.

#### **6. Liverpool Clinical Services Review**

Further discussions have taken place on the structures and governance to support delivery of the recommendations from the Liverpool Clinical Services Review. In addition to the recently established site based joint committees, the proposal is to form an overarching Liverpool Provider Joint Committee. The new joint committee will meet on the 16<sup>th</sup> June 2023, with the Trust CEO and Chair as members.

An update on these arrangements will be provided to the Board of Directors following the inaugural shadow meeting.

#### **7. Liverpool Health Partners**

The hosting arrangement between LHCH and LHP is due to end on 30<sup>th</sup> June 2023. The Trust has been supporting the transition of these arrangements to Liverpool University Hospitals NHS Foundation Trust who will host LHP from 1<sup>st</sup> July 2023.

The Trusts are currently drafting a 'heads of agreement' to support the transfer. The purpose of the agreement is to set out the terms and conditions that will govern the rights and obligations of the Parties in relation to the transfer of the responsibility for hosting LHP from LHCH to LUHFT. The agreement will include:

- Transfer and transaction documents:
  - Schedule of staff to be transferred
  - Schedule of equipment (as appropriate)
  - Financial position and forecast I&E
  - Lease agreement
- Approvals
- Conduct and due diligence in relation to the transfer
- Responsibilities, liabilities, dispute and termination conditions
- Confidentiality

The Hosting SLA has been shared with LUHFT and a new agreement will be put in place between LUHFT and LHP when the current agreement ceases on the 30<sup>th</sup> June 2023.

The LHP Board met on the 23<sup>rd</sup> of May 2023 and expressed their thanks to the LHCH team during their time as Host Organisation.

## **8. CQC Executive to Executive Meeting**

The CQC have met regularly with LHCH through relationship meetings. Following a number of changes at the CQC the Trust was approached to set up an executive to executive meeting with senior leadership from the CQC to support them in learning from an Outstanding organisation. This meeting is scheduled to take place on the 26<sup>th</sup> May 2023, and at the request of the CQC the LHCH Executive Team have brought together a presentation on why the Trust continues to be outstanding. Feedback will be provided to the Board of Directors following the meeting.

## **9. Industrial Action Update**

The NHS alongside other sectors continues to face the challenges of planning for industrial action from a number of unions. LHCH ensure a strong focus on preparedness for strike action, as well as the implications for cancelled activity and delays in patient care.

The Trust is currently working through the backlog arising from the recent junior doctor strikes and is awaiting the outcomes of the British Medical association (BMA) ballot for consultants which is due to close on 27<sup>th</sup> June 2023. The Royal College of Nursing has opened a further ballot on the 23<sup>rd</sup> May 2023.

The Trust has also received confirmation of junior doctor strike action 14<sup>th</sup>-17<sup>th</sup> June 2023.

## **10. LHCH Tech Bar**

iDigital have been working hard to open a new drop-in centre for any digital related issues, named the Tech Bar. The Tech Bar will allow people to turn up without a booking to have an digital related problem looked at, be it a device issue, a password reset, a smart card problem.

The service opened on the 22<sup>nd</sup> May 2023 and will operate 9am-5pm, Monday to Friday. The Tech Bar and digital teams have been doing meet and great sessions to support colleagues in finding out more from the teams.

## **11. High Risk Report**

The Executive Team is currently reviewing the high risk report to ensure clarity of the risks, consistency of risk scoring and alignment to the Board Assurance Framework.

## **12. Recommendations**

The Board of Directors is asked to review the content of this report.

## **Appendix A – NHS England letter: UEC Tier 1 and Improvement Support**