

## TRUST BOARD

<b>Date of Meeting:</b> 05/04/2011		<b>Enclosure:</b> 3
		<b>Agenda Item No:</b> 5
<b>Title of Report:</b> Chairman's Report		
<b>Aims:</b>		
This report provides an update of the Chairman's business, activities and matters that the Chairman wishes to bring to the attention of the Trust Board.		
<b>Summary:</b>		
The matters mentioned in this paper are:		
<ul style="list-style-type: none"> <li>▪ Exception report on Board Cycle of Business 2010/11</li> <li>▪ Board Cycle of Business 2011/12</li> <li>▪ The NHS North West Chairs Meeting - 17 March 2011</li> </ul>		
<b>Specific implications for consideration (Financial/Workforce/Risk/Legal/Race Equality etc):</b>		
<b>Financial</b>	No specific implications.	
<b>Workforce/E&amp;D</b>	No specific implications.	
<b>Recommendations:</b>		
The Trust Board is asked to approve the Board Cycle for 2011/12.		
<b>Document previously approved by:</b>		
Report directly to the Trust Board.		
<b>Prepared by:</b>	<b>Presented by:</b>	
Ramona Duguid Company Secretary	Mike Little Chairman	

**TRUST BOARD  
CHAIRMAN'S REPORT  
APRIL 2011**

**1. INTRODUCTION**

This report provides a summary of those matters the Chairman wishes to bring to the attention of the Board.

**2. EXCEPTION REPORT ON BOARD CYCLE OF BUSINESS 2010/11**

In January 2010, the Trust Board approved a cycle of business for the financial year 2010/11. The cycle of business has been updated to show the end of year position on the key items discussed and approved by the Trust Board during the financial year (see Appendix 1).

The majority of the scheduled items on the business cycle have been delivered during the year.

There are some items on the cycle which have not been fully delivered at the end of the financial year, these include:

**2.1 Approval of the Annual Plan – 2011/12**

Due to the various strategic work programmes that the Trust currently has ongoing, the annual plan will be brought to the Board in May 2011 to outline the key objectives and outcomes that the Trust will be working to deliver during the year against its five strategic aims:

- 1. To ensure we provide high quality, safe and effective care for all our patients, including meeting the essential standards of safety and quality as set out by the Care Quality Commission.*
- 2. To develop a viable integrated clinical strategy for secondary care services across North Cumbria which is sustainable and affordable.*
- 3. To develop a new healthcare facility in West Cumbria that is fit for the 21st Century.*
- 4. To achieve sustainable financial balance through; the delivery of the Trust's internal cost improvement programmes; securing a viable income contract in conjunction with GP commissioners and contributing to the wider health economy turnaround plans to realise system wide cost reductions.*
- 5. To develop and implement a successful merger or acquisition plan that enables the Trust to become part of an existing NHS Foundation Trust.*

In addition, it is important to highlight that the Trust has been working towards the development of the health economy clinical strategy, which is central to the service development priorities that are taken forward during 2011/12.

A Trust Management Committee away day has been arranged for April 2011 to discuss the key priorities for 2011/12 and how these interlink with the Divisional priorities.

## **2.2 Medium Term Financial Strategy**

Whilst the Trust Board have not approved a medium term financial strategy, the Trust Board have reviewed the short and medium term financial position of the organisation throughout the year. This also includes the establishment of the Finance Sub Committee to allow greater scrutiny and debate on the financial position of the organisation going forward.

## **2.3 Register of Gifts and Hospitality**

The Trust has in place a register of gifts and hospitality, which is managed by the Company Secretary. The current policy on the responsibilities of staff in relation to the declaration of gifts and hospitality requires updating, which is in progress. The updated policy is scheduled to be approved at the Trust's Policy Group in May 2011. Following this new guidance will be issued to staff on the process for declaring gifts and hospitality.

This will also include guidance for declaring interests, particularly for senior staff and consultants.

## **2.4 Patient Survey Action Plan**

This item has been delayed, however, it will be presented to the Board in April 2011.

## **2.5 Staff Survey Results and Action Plan**

The Board has received an update on the workforce strategy and the specific staff pledges. The latest results have been published and a report has been produced for the April 2011 Trust Board.

## **2.6 Remuneration Committee Annual Report**

There has been minimal work carried out within the Remuneration Committee due to the national position on terms and conditions, therefore an annual report on activity has not been necessary.

I have however, requested that a Remuneration meeting is organised for April 2011, so that we can review any necessary areas of work.

### **3. BOARD CYCLE 2011/12**

The Company Secretary has reviewed the Board cycle for the new financial year to reflect further improvements on last year's cycle but also to ensure that our five strategic aims are given adequate Board time during the year. This will be particularly important in relation to the development of the merger and acquisition plans.

The cycle (attached at Appendix 2) will continue to be monitored by the Company Secretary and reported on, by exception, in my monthly reports to the Board.

### **4. THE NHS NORTH WEST CHAIRS MEETING ON 17 MARCH 2011**

The Vice Chairman attended the NHS North West Chairs meeting on my behalf on 17 March 2011. The meeting received updates from Sally Cheshire Chair of the SHA, Joe Rafferty, Director of Commissioning Development and Sir David Nicholson, NHS Chief Executive.

Key areas of discussion included:

- NHS Reform arrangements
- NHS North West Productivity and QIPP position
- Importance of collaboration on the new commissioning framework, particularly with secondary care
- Consortium arrangements
- Incentivisation of pathways of care to ensure they provide high quality and value for money
- Importance of strong leadership during the NHS reforms
- Future scrutiny on commissioning once PCTs are disbanded
- Health and Wellbeing Boards
- Move to focus on outcomes and not just the provision of healthcare

Miranda Hughes, Regional Commissioner for the Appointments Commission also attended the meeting to outline their "terminal" role, which will be to continue, but using faster tracks with significantly less bureaucracy.

Jane Cummings, Chief Nurse & Executive Director of Performance and Quality gave a very brief update on the extended targets from a performance and quality perspective that would continue to be driven across the system.

### **5. RECOMMENDATION**

The Trust Board is asked to approve the Board Cycle for 2011/12.

**Mike Little**  
**CHAIRMAN**