

Report to:	Council of Governors	Agenda item:	19
Date of Meeting:	7 June 2018		

Title of Report:	Update following NHS Providers Governors Conference
Status:	For Information
Sponsor:	Amanda Buss, Public Governor
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Appendices	None

1. Executive Summary of the Report
The purpose of the report is to provide the Council of Governors with an update following the NHS Providers annual Governors conference 2018.

2. Recommendations (Note, Approve, Discuss)
The Council of Governors is asked to discuss the report.

3. Legal / Regulatory Implications
N/A

4. Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc.)
N/A

5. Resources Implications (Financial / staffing)
N/A

6. Equality and Diversity
N/A

7. References to previous reports
N/A

8. Freedom of Information
Public

Governor Focus Conference - May 2018

This is an annual conference was organised by NHS Providers and attracted approximately 180 delegates from Trusts nationwide.

Sessions

1. Setting the Scene - A national policy update Chis Hopson, CEO of NHS Providers

The main points made were:

External Environment

- Unstable Government focusing on Brexit
- Austerity now impacting on some key public services
- PM promising a long term solution
- Changing model of care from provider towards system, treatment towards wellbeing and health.

Current Challenges

- Longest deepest financial squeeze in NHS history. Deficit currently predicted to reach @£20bn by 2022/23
- Workforce issues - shortage of staff and poor morale
- Public satisfaction with NHS beginning to drop (6% lower than last year)
- Targets are being missed
- Increased Regulation - loss of autonomy
- Financial pressures have generated a huge backlog in capital improvements

OBR claims NHS needs 4% increase for the next 5 - 10 years. Equivalent to 5p on income tax/2p on NI

Regulatory Response

- Increased number of Trust in special measures/requiring improvement
- 67% Trusts feel that the regulatory burden has increased
- NHSI seen more as a Regulator than an Improvement Agency
- Current model of care based around medication and hospitalisation rather than health and wellbeing

How NHS Providers are Responding

- Vertical Integration - Systemwide integration : Accountable Care Organisations/Integrated Care Systems

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- Horizontal Integration - mergers and integration between similar providers: Hospital to Hospital
- Collaboration - Committees in common OR within your own walls - technological efficiencies, Improvement methodology, staff empowerment
- Partners - building partnerships with local authority, education facilities, charities, housing associations etc

Of note: Royal Wolverhampton now runs GP practices across the region and has reduced emergency admissions by 11% = vertical integration.

Thoughts on the Governor Role

- Need to get the balance right between support and challenge
- How do we engage the public?
- Ensure yourself that the Board has the right balance between operational and strategic concerns
- Getting the balance right between your own organisation and the systemwide concerns
- Remain positive despite growing challenges

On a more positive note.....

- Workforce Strategy being prepared - will it address the need to make the NHS a good place to work?
- A long-term plan is promised
- Regulation of Social Care

NB: Neither STP's, ACOs or ICS's have any statutory authority (which remains with Providers and CCGs) - this will need to be addressed if ICS's are to succeed in the long run.

2. Integration and Collaboration: How can Governors contribute to Systemwide plans?

Miriam Deakin - Head of Strategy NHS Providers, Suzy Brain, Chair Doncaster and Bassetlaw FT

There is a need to reframe the public's relationship with the NHS - need to move away from the idea that it is available to meet all needs with no effort or responsibility on their part.

Focus is now on Integrated Care Systems (ICS's) . Currently there are 44 STP footprints with 14 ICS's. This general direction of travel towards integrated systems means that there is an expectation that by 2019/20 the current model for transformation (involving STF's and control totals) for individual organisations will be scrapped.

ICS's (as opposed to the previous Accountable Care Organisations) will be defined by:

- Shared Vision
- Co-ordination of Services - seamless transfers
- Shared Control Total

- More support from NHSI to performance manage.
- BUT smaller units of delivery |(individual providers) will be retained.

Unknowns:

- Population size to be served by an ICS
- How will organisational accountability work in terms of both regulation and engagement?
- How will success be measured?
- This is a Tory agenda and is not supported by Labour - how will services be delivered in areas with different politics?

The current regulatory system focuses on Organisations rather than Systems and this will need to change - NHSI and NHS England. In particular, how will services be commissioned and what will the Governance be?

Governors can possibly help with encouraging members to help themselves: supporting smoke-free hospitals and healthy lifestyles.

3. Governor Elections - Achieving the best

Kim Hutchings - Head of development and engagement, NHS Providers
Philippa Wiffen, Membership Services Manager, Cambridge FT
Pauline Mountain, Carer Governor - Linconshire FT

This session focussed on the decline number of members voting at Governor elections and the scarcity of Governor candidates - uncontested elections are rising. The average Trust has @25 Governors, and turnout is down from 48% to @15% since 2004.

Suggestions put forward included:

- Cleanse your membership so that remaining members are more engaged
- Keep your Trust in the News
- Use Social Media and Twitter
- Keep in touch

Note: e-voting has been found to decrease turnout.

This session was the least useful and really didn't seem to offer any meaningful solutions to the problem - even using the above tactics didn't seem to have had much impact.

4. The NHS at 70

Geoffrey Rivett, retired GP, SMO at Dept of Health and NHS Historian
Siva Anandaciva, Chief Analyst at The Kings Fund

The first speaker gave us a history of the services, challenges and demands made on the NHS since inception.

The second speaker looked towards the future, and was the best presentation of the day. He ran through the need for Social Care Reform and the 10 year workforce strategy in development before focussing on some innovative solutions already being tried by some trusts:

- An App which directly contacts the duty Dr when a pt is deteriorating based on their results (eg NEWS Scores). Proven method for the early identification of AKI
- Becoming a good flexible employer
- Patient centred Care - Alder Hey employ a full time Chef to cater for children on demand = less food wastage
- Promoting self treatment and empowerment - eg teaching patients to set up and perform their own dialysis
- Social Prescribing - tackling loneliness to prevent admission
- Healthy Town Planning - designing cycle paths and Health and Wellbeing facilities

Message: Care is changing - Do you understand what the strategy of your Board is?

As a Governor, ask yourself: What am I accountable for? To whom am I accountable?

All slides from the presentations are available at

http://nhsproviders.org/programmes/governwell/governor-focus-2018?utm_medium=email&utm_campaign=Governor%20Focus%202018%20-%20evaluation%20form&utm_content=Governor%20Focus%202018%20-%20evaluation%20form+CID_552a43e26e1453b503fe4abbb3c2d143&utm_source=campaign%20monitor&utm_term=our%20website

Round Table Discussions

5 Key themes identified:

- Governors are often keen to contribute and passionate about their role, but often feel they are in “receive” mode - ie always presented to.
- Governors do not always understand their duties, and cannot balance organisational duties vs the wider system - how do they hold NEDs to account on this?
- ICS: Seen to be well intentioned, but relatively untested and not thought through. Our table particularly felt that they would be a very high financial price involved in changing the system and a need to completely alter regulation and governance.
- What does success look like for an ICS?
- What will NHS Providers do to support Governors during the change?

FT showcase stands

- I-Log - for logging and dealing with member issues
- Increasing the turnout at the AMM
- Improving the methods for holding NED’s to account
- Producing a Governor Newsletter for members
- Governors as Critical Friends - inspecting internal and external environments

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- Raising the voice of less heard and hard to reach staff groups
- Enhancing the Governor role and effectiveness in major transactions
- Enhancing Governor Effectiveness

All posters available at: <http://nhsproviders.org/programmes/governwell/governor-showcase-2018#birmingham>

Recommendations

- M & O WG might like to look at some of the member initiatives on the FT showcase stands
- Consider utilising some of the methods used by other FTs to hold NEDs to account – showcase
- Governors would find the presentation slides interesting to look at.

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May 2018

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