

Meeting Title	Board of Directors		
Date	9 November 2023	Agenda item	Bo.11.23.6

Report from the Chief Executive Officer

Presented by	Professor Mel Pickup, Chief Executive Officer		
Authors	Katie Shepherd, Corporate Governance Manager		
Lead Director	Professor Mel Pickup, Chief Executive Officer		
Purpose of the paper	The report provides the Board with a summary position with regard to our Patients, People, Place and Partners since the last report to the Board in September 2023.		
Key control	N/A		
Action required	To note		
Previously discussed at/informed by	N/A		
Previously approved at:	Committee/Group	Date	

Situation

1. Patients

• Operational Update

Industrial Action

As at the end of October 2023 the Trust has responded to the following periods of Industrial Action:

Union	Dates	Duration
RCN	20 & 21 Dec 2022	24 hours
RCN	6 & 7 Feb 2023	24 hours
BMA JD	13 – 17 March 2023	72 hours
RCN	30 April – 1 May 2023	28 hours
BMA JD	11 – 15 May 2023	96 hours
BMA JD	14 – 17 June 2023	72 hours
BMA JD	13 – 18 July 2023	120 hours
BMA Consultants	20- 22 July 2023	48 hours
BMA JD	11- 15 August 2023	96 hours
BMA Consultants	24-26 August 2023	48 hours
BMA Consultants	19-20 September 2023	48 hours
BMA JD	20-22 September 2023	72 hours
BMA Consultants	2-5 October 2023	72 hours
BMA JD	2-5 October 2023	72 hours

Since the previous update in August the Trust has responded to two further periods of strike action which have taken place during September and October. The combined nature of the strike action with

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the overlap of both Consultants and Junior Doctors taking strike action at the same time brought in an added complexity to the operational response. This results in a much larger impact upon elective activity whilst we focus principally upon ensuring safe staffing levels for acute services.

As always, our teams have responded well and we have been able to maintain safe cover throughout the period.

- **Performance**

BTHFT continues to benchmark positively against the Emergency Care Standard at a WYAAT, Regional and National level. Despite this the ED remains challenged and unfortunately some patients do end up having an extended length of stay within the department whilst awaiting a bed. Average daily attendances to the department are slightly above previous years but in line with growth we anticipated in our modelling. This is the same for those arriving by ambulance but a change by YAS to starting the handover clock earlier means performance at BRI and all other Trusts in the region has reduced. Admissions into hospital from ED have recently increased and focus is being placed on reversing this trend before winter. There has also been an increasing trend for patients waiting to be discharged to either a care setting or to their own home with a care package. Our multi-disciplinary approach to discharge in minimising the impact and we are working with social care partners to find a longer-term solution to this issue. Some of this increase we believe is linked to the changes made by the Local Authority to the Intermediate Care Bed (IMC) bed base and the provision of Package of Care (POC) provision. We continue to engage at system level to ensure any impact is minimised.

Work to reduce elective waiting times has continued but reduced capacity due to industrial action means we are now slightly behind the trajectories set in our annual plan. This is a position shared by all acute Trusts and we continue to benchmark well despite the challenges. We remain hopeful that a position of no patients waiting longer than 65 weeks by the end of March 2024 can still be achieved. However, there is potential that this aspiration could be impacted by continued industrial action combined with winter pressures. As part of elective recovery commitments mandated by NHSE and in line with our delivering operational excellence plans we have implemented the validation toolkit and will meet all the related targets. This work will help with how we manage our waiting lists and best utilise our capacity.

Suspected cancer referrals remain significantly higher than previous years and increased further over summer, specifically for Skin cancer. Diagnostic turnaround times for imaging and histopathology increased during this same period and our overall cancer position deteriorated with a growth in patients waiting longer than 62 days without treatment. Targeted improvement work across the diagnostic phase is showing signs of stabilising the position. Demand is also starting to reduce and the continued commitment to prioritising outpatient and theatre capacity for cancer pathways will help recover the position. The Trust benchmarks well for cancer performance and is focussed on further pathway improvements, working with system partners on earlier diagnosis and implementing optimal pathways when cancer is suspected.

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- **St Luke's Day Case Unit (SLH DCU)**

The development of SLH DCU is progressing well with the modular panels for the super structure having arrived on site as planned during week commencing 11th September 2023. The external cladding for the new build has been selected along with the colour palate for the internal wall decoration.

The Clinical Pathways and Workforce groups are progressing with the recruitment of colleagues for the new unit taking place currently.

The programme is being managed through a dedicated Programme Board chaired by Sajid Azeb, Chief Operating Officer & Deputy Chief Executive reporting into the Capital Strategy Group.

- **Endoscopy Unit (BRI)**

The Trust was successful in securing £24.8m capital funding for a new 8 room Endoscopy unit. A Programme Board has been established chaired by Sajid Azeb and responsible for coordinating the work to ensure delivery of the scheme which is due to complete in 2025.

Work to select a principal contractor has progressed and Robertsons have been awarded the contract to help develop the design to the next stage of completeness and establish the site mobilisation plan. Enabling works are progressing at the current time and will involve the relocation of the green portacabins currently occupying part of the area identified for development. This will involve the relocation of a number of staff from this area to another location on the Trust premises.

2. People

- **People Promise**

As part of our ongoing work to implement the People Promise at BTHFT, we were selected as one of just two exemplar sites to receive a site visit to review our flexible working and recognition offering. This national site visit took place on 12th October when Em Wilkinson-Brice (Chief People Officer for NHS England) visited BTHFT where we showcased the work done to implement flexible working and recognition across the Trust. We were invited to be part of a panel for a national webinar as part of NHS England's people promise week, along with Mel Pickup as the Chief Executive, Karen Walker also formed part of the panel as our People Academy Chair on the webinar which was hosted by Em Wilkinson-Brice live from the Trust.

- **HPMA Award**

The Organisational Development (OD) Team were thrilled to be winners of the national 'Team of the Year' Award at the 2023 Healthcare People Management Association (HPMA) Awards in September. The judges praised our passion and commitment to improving the experience of our people at BTHFT

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and were impressed with how we have worked hard to bring the NHS People Promise to life through our innovative 'Thrive' approach.

- **HFMA**

The finance team were shortlisted for Team of the Year, North East and Yorkshire region.

- **NHS Staff Survey 2023**

The NHS Staff Survey went live from Wednesday 20th September 2023 and will close on 24th November 2023. We are now over half way through the survey period and our current response rate has already reached 37% which was the final response rate for last year's staff survey.

Working with our survey provider we have now been able to introduce more local level results (*if more than 9 responses are submitted within a team*) this will allow services to better understand how their teams are feeling. Due to the data being supplied at 'Team' level, we will receive heat maps from our staff survey provider that show a visual comparison of the highs and lows at a glance across the entire Trust.

- **Industrial Action**

For the first time all doctors took strike action on 20 September and 2,3,4 October. Following this action there has been some reprieve, it is understood national discussions are ongoing in an attempt to find a resolution to the ongoing pay dispute for Consultants and Junior Doctors. The BMA and the HCSA are balloting Consultants and SAS doctors to renew their mandate to continue industrial action with the ballots closing on 18th December and 15th November respectively.

We received a letter from NHS England on 8th November addressing the significant financial challenges created by industrial action in 2023/24, and have been asked to complete a rapid two-week exercise to agree actions required to deliver the priorities for the remainder of the financial year. The letter and subsequent correspondence detailing the specific requirements of the exercise and attached at appendices 1-2.

- **Filipino Event**

Our 2nd Filipino Appreciation Day took place on 24th of October, it recognised our long serving Filipino staff and celebrated our Filipino community within the Trust. Staff had organised a fantastic event with music, dancing, and a ceremony to present long service awards to staff from Filipino heritage who have been with for 20 years.

Karen Dawber, Sajid Azeb, Faeem Lal and Julie Lawreniuk attended the event which was held in the concourse. There was also food provided by staff to celebrate Filipino culture and cuisine.

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3. Place

- ICB Operating Model**

As one of the five places that make up the West Yorkshire ICB, on behalf of Bradford, District and Craven I have been contributing to the development of a new operating model which allows us to make a 30% reduction in the costs of operating as an ICB. The proposed model began being consulted upon on the 26th September and will close on the 24th November. It is important to recognise that our Act as One place based ICB colleagues are all affected by this exercise which is happening at what is traditionally the most challenging time of the year, and in BDC in particular comes as the latest in a succession of significant organisational changes.

- Celebrate as One Awards**

On Thursday 19 October we held our partnership's inaugural Celebrate as One Awards recognising the work and achievements of colleagues from across our place. The awards were open to anyone working in the NHS, local authorities, voluntary, community and social enterprise sector and independent care organisations. We set out to celebrate those individuals, teams, projects and services that demonstrated our Act as One ethos that help us in our efforts to make our vision of people living 'happy, healthy at home' a reality. In a break from the norm our awards were hosted by a local young person, Haris Ahmed, who also penned and filmed a poem dedicated to people's efforts across our partnership. All of our awards were presented by young people from across our place and the entertainment was provided by local, talented music artists including young people from All Star Entertainments.

The feedback has been overwhelmingly positive with colleagues already looking forward to our next event in 2025. People can see Haris's poem, our list of winners and our award brochure on our website www.bdcpartnership.co.uk/awards/

I'd like to place on record my thanks to all of our presenters, all those who submitted a nomination and to those involved in planning and delivering such a well-received event.

- Deliberative Event – acting on learning from Listen In**

Over the past year Bradford District and Craven Health and Care Partnership has visited 97 different community groups and talked to people in public settings like markets, bus stations or libraries right across Bradford District and Craven. The insight gathered in each locality has been published online and reported to our Partnership Board, and we're developing plans for the next year of Listen in cycles to work with specific communities of interest in response to some of the themes identified.

Through all the Listen in cycles, the strongest theme that we heard is challenges in access to GP services. On 5 October, Bradford District and Craven Health and Care Partnership's comms and involvement team ran a large-scale deliberative event to bring citizens, workforce, and leaders together to think collectively about solutions to the key challenges in access to GP services. At the

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event, key challenges were discussed and worked through in detail by over 100 people to come up with proposed solutions to each challenge.

Places at the event were limited so we're giving everyone the opportunity to participate online on our EngageBDC platform www.engagebdc.com

In [her latest blog](#), Elaine Appelbee – independent Chair for the Bradford District and Craven Health and Care Partnership Board – reflects on how involving people and communities can help support changes in services that helps the people we serve as well as colleagues working in our services. Her focus is on a recent deliberative event as part of our partnership's Listen In programme.

- **Bookings open for our partnership's Christmas Carol Service**

As we move towards the festive time of the year, we wanted to let you know that this year's NHS Christmas Carol Service is once again being opened up to a wider audience. Now anyone who works across the Bradford District and Craven Health and Care Partnership can join us on Thursday 14 December for the Carol Service within the wonderful surroundings of Bradford Cathedral. Doors will open at 5.30 with the service beginning at 6pm and running until approximately 7.30pm. Please [register to attend by using this Eventbrite link](#).

- **Healthwatch North Yorkshire highlighting rural inequalities**

Healthwatch North Yorkshire has published a report that highlights rural health inequalities. The report is based on their insight work with the public, support organisations and healthcare professionals around living rurally and the challenges of accessing NHS services. The research report, produced in collaboration with the [Institute for Social Justice](#) at York St. John University, explores the relationship between in-land rurality and people's experiences of accessing and using local healthcare services, including GPs, dentists, pharmacies, or hospital care.

I recognise that the work we do through the Reducing Inequalities Alliance, is sighted on the challenges rurality poses in tackling health and wider inequalities. This report is welcomed by our partnership for continuing to remind us of the challenges we need to address when considering the diversity of not just our population but also our geography and area we cover.

A copy of the report is available by following this link [Rural health inequalities.pdf](#) (healthwatchnorthyorkshire.co.uk)

- **Go ahead given to Shipley health and wellbeing campus**

The [investment from the Shipley Towns Fund](#) will transform The Old School building on Farfield Road, with plans for full refurbishment including landscaping in the grounds to create a wellbeing garden which will be accessible to the public. The Cellar Trust will run the new facility alongside strategic charity partner HALE. Its mission will be to provide health and wellbeing services by working with a range of organisations from the voluntary sector, public sector and social enterprise in one inclusive,

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welcoming and accessible place. With the aim of supporting more people across Shipley, especially those who are vulnerable and lonely. We'll be making good use of the improved facilities with the access to green space and the opportunity for classes and activities.

- **Welcome Lorraine**

I am delighted to welcome Lorraine O'Donnell as the new Chief Executive for City of Bradford Metropolitan District Council, who took up her role on 16 October. Lorraine joins us from Cheshire East Council and I very much look forward to working with Lorraine and the wider council leadership team to work on our joint challenges as well as exploiting opportunities to make Bradford District and Craven a great place to live, work and visit. I'd like to once again place on record my thanks to the previous Chief Executive Kersten England, I'm pleased that she will still be an influential figure locally as she takes on the role of Chair for Bradford 2025 - overseeing our plans as Bradford takes on the mantle of City of Culture in 2025.

- **Israel - Gaza conflict**

Like many of you I am deeply saddened and concerned by the ongoing human toll of the Israel-Gaza conflict and I hope that we continue to promote messages of peace and solidarity with all communities affected. This includes those who have links to the region or those that are being impacted by an unacceptable increase in incidents of Anti-Semitism or Islamophobia. Now more than ever we must stick to our strong values of kindness, civility and allyship to support all our colleagues, communities and our own friends and neighbours. We know news of conflict and other wider concerning global events impacts on people's wellbeing - if you or someone you know needs help with their emotional health and wellbeing please do seek support. Our Healthy Minds website can quickly help you access the right support for you www.healthyminds.services

4. Partners

- **West Yorkshire ICB Board Development Session, 17th October**

I joined the West Yorkshire ICB Development session in Hebden Bridge on 17th October. We looked at the financial outlook and opportunities to deliver a viable plan and looked at the role of transformation in all that we do.

- **WYAAT Senior Leadership Programme – Closing Event, 19th October**

The WYAAT Senior Leadership Programme held its final event on 19th October for cohorts, focusing on impacts and insights from system leaders. We heard from a number of leaders across the patch from various roles including BTHFTs own Nick Dodds, BI Operational Lead and Debbie Horner, Deputy CMO. A number of sessions were held including theory into practice, and the value of immersive placement experiential learning.

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• **West Yorkshire Association of Acute Trusts Committee in Common meeting, 31st October**

I attended the WYAAT Committee in Common meeting on 31st October where we discussed the current financial position, received the WYAAT Programme Executive report and the West Yorkshire Health and Care Partnership collaborative report. We discussed cancer and elective performance across the acute Trusts and the WYAAT senior leadership programme. We also received the annual report.

Recommendation

The Board of Directors is asked to note the report from the Chief Executive Officer.

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Risk assessment						
Strategic Objective	Appetite (G)					
	Avoid	Minimal	Cautious	Open	Seek	Mature
To provide outstanding care for patients				g		
To deliver our financial plan and key performance targets				g		
To be in the top 20% of NHS employers					g	
To be a continually learning organisation				g		
To collaborate effectively with local and regional partners					g	
The level of risk against each objective should be indicated. Where more than one option is available the level of risk of each option against each element should be indicated by numbering each option and showing numbers in the boxes.	Low		Moderate	High	Significant	
	Risk (*)					
Explanation of variance from Board of Directors Agreed General risk appetite (G)						

Benchmarking implications (see section 4 for details)	Yes	No	N/A
Is there Model Hospital data relevant to the content of this paper?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is there any other national benchmarking data relevant to the content of this paper?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the Trust an outlier (positive or negative) for any benchmarking data relevant to the content of this paper?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Risk Implications (see section 5 for details)	Yes	No
Corporate Risk register and/or Board Assurance Framework Amendments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Quality implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Resource implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Legal/regulatory implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Diversity and Inclusion implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Performance Implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Regulation, Legislation and Compliance relevance
NHS Improvement: (please tick those that are relevant)
<input checked="" type="checkbox"/> Risk Assessment Framework <input checked="" type="checkbox"/> Quality Governance Framework <input checked="" type="checkbox"/> Code of Governance <input checked="" type="checkbox"/> Annual Reporting Manual
Care Quality Commission Domain: Well Led
Care Quality Commission Fundamental Standard: Good Governance
NHS Improvement Effective Use of Resources: Choose an item.
Other (please state):

Relevance to other Board of Director's academies: (please select all that apply)			
People	Quality & Patient Safety	Finance & Performance	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	