Paper ref: TB (04/22) 004



Report Title:	Chief Executive's Report				
Sponsoring Executive:	Richard Beeken, Chief Executive				
Report Author:	Richard Beeken, Chief Executive				
Meeting:	Trust Board (Public)	Date 6 th April 2022			

1. Suggested discussion points [two or three issues you consider the Trust Board should focus on]

This month's report focuses on some key developments in the wider regulatory and system environment and includes:

- An update on the acute services collaboration programme in the Black Country, now overseen by the Provider Collaborative Board
- Information on the National Covid Public Inquiry and a decision we need to make about whether to apply for "Core Participant" status
- Confirmation of the appointment of our Chief Integration Officer
- An update on the assurance and oversight process related to the transition of West Birmingham to the Birmingham & Solihull Integrated Care System (ICS)

2. Alignment to our Vision [indicate with an 'X' which Strategic Objective this paper supports]									
Our Patients		Our People		Our Population					
To be good or outstanding in everything that we do	X	To cultivate and sustain happy, productive and engaged staff	X	To work seamlessly with our partners to improve lives	X				

3. Previous consideration [where has this paper been previously discussed?]

The Board has previously stated it wishes to volunteer to contribute evidence to the public inquiry.

4.	Recommendation(s)				
The	The Trust Board is asked to:				
a.	a. NOTE the report				
b.	DECIDE whether the Trust should apply for "Core Participant" status in National Covid				
	Public Inquiry				
c.	DETERMINE whether adequate progress is being made with regard to the assurance we				
	seek on the three "key tests" regarding the transfer of West Birmingham to the				
	Birmingham & Solihull (BSol) system				

5. Impact [indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]							
Trust Risk Register							
Board Assurance Framework							
Equality Impact Assessment	Is this required?	Υ		N	Χ	If 'Y' date completed	
Quality Impact Assessment	Is this required?	Υ		N	Χ	If 'Y' date completed	

SANDWELL AND WEST BIRMINGHAM NHS TRUST

Report to the Public Trust Board: 6th April 2022

Chief Executive's Report

1. Purpose of the Report

1.1 The Chief Executive's report is a monthly opportunity to update the Board on pertinent matters in the strategic, regulatory or system environment, not reported on elsewhere in the Board papers or agenda.

2. Acute Care Collaboration

- 2.1 The third clinical summit of the Black Country Acute Services Collaboration was held this month. The following issues were presented upon and discussed:
- 2.2 A report with high level options on service configuration and elective/emergency activity segregation was received. It was agreed that the next step was for each system-wide clinical lead to work up the pro's and con's of each theoretical option and work up clear recommendations, by service, with regard to how the collaborative can make the service better than the sum of its parts. The Provider Collaborative Board, now chaired by the Trust Chair, Sir David Nicholson, would make the final decisions in principle, in advance of any further engagement with local elected representatives or the wider public.
- 2.3 Clinical networks in gynaecology, ear nose and throat (ENT), urology, dermatology, breast surgery, colorectal, ophthalmology, critical care and orthopaedics, are now forming across our system. Each has varying levels of maturity and detail of its work, however this is a major step forward for a system whose clinicians have never been given the mandate to work together to plan for improved service provision across our system before.
- 2.4 Our executive leads for the work remain the Chief Medical Officer and the Chief Strategy Officer.

3. The COVID-19 Public Inquiry: draft Terms of Reference

- 3.1 On the 15th March 2022 the UK Government published draft Terms of Reference (ToR) for the Public Inquiry into the Covid-19 pandemic. The draft ToR set out the areas to be examined, considered and reported upon regarding the preparation and response to the pandemic in England and the devolved nations. The draft ToR are wide ranging covering a range of issues, industries and sectors. Topics include:
 - How the NHS and the social care system responded to the pandemic.
 - How the government came to make decisions (including those related to lockdowns and shielding).
 - The effect of the pandemic on industries, such as travel and hospitality.
 - The economic support provided to businesses and members of the public.

- 3.2 Specifically to the health and care sector, the draft ToR are:
 - preparedness, initial capacity and the ability to increase capacity, and resilience;
 - the management of the pandemic in hospitals, including infection prevention and control, triage, critical care capacity, the discharge of patients, the use of 'Do not attempt cardiopulmonary resuscitation' (DNACPR) decisions, the approach to palliative care, workforce testing, changes to inspections, and the impact on staff and staffing levels;
 - the management of the pandemic in care homes and other care settings, including infection prevention and control, the transfer of residents to or from homes, treatment and care of residents, restrictions on visiting, and changes to inspections;
 - the procurement and distribution of key equipment and supplies, including PPE and ventilators;
 - the development and delivery of therapeutics and vaccines;
 - the consequences of the pandemic on provision for non-Covid related conditions and needs; and provision for those experiencing long-Covid
- 3.3 Following a period of public consultation the ToR will be finalised and then consideration given to Core Participants of the Inquiry and requests for disclosure. The consultation ends on 7 April 2022.
- 3.4 In due course, a timetable will be set for the Inquiry. The Government's response to the pandemic and decision making, as well as that of the health and care sector, will likely be prioritised in the timetable. However, given the scale of the draft ToR the start of the Inquiry remains many months away.
- One of the tasks that the Inquiry Chair, Baroness Hallett, will be required to undertake is to designate those organisations, and possibly individuals who will be given Core Participant status. In addition, any person or organisation can apply to be a Core Participant with permission of the Chair.
- 3.6 Given the reference within the draft ToR to the response by the health and care sector, it is likely some NHS Trusts and Care Homes will be afforded Core Participant status. It is still unclear whether there will be some form of selection of NHS Trusts and care homes to cover the range of different types of settings.
- 3.7 We may wish to apply for Core Participant status because of our Trust's notable experiences throughout the pandemic which could provide valuable learning, such as:
 - The Trust was one of the most impacted providers in the country for the number of Covid-19 inpatients as a proportion of total beds.
 - Intensive Care Units (ICU) reservists a programme to train and deploy our own staff to support where most needed.
 - Inclusive testing programme offering PCR testing to all key workers in advance of this becoming more widely available.
 - Support to care homes with training, testing and PPE.

- Equipment safety concerns raised by Trust clinicians which led to changing provision of ventilators.
- Listening to health concerns from BAME staff about personal safety at work which influenced individual risk assessments.
- Community concerns about the impact of Covid-19 on the BAME population and how that influenced clinical decision-making.
- Community vaccination programme including the house-bound, pop up community clinics and child friendly environments.
- 3.8 As reported to the Board in January 2022, the Trust has taken steps to prepare for the Inquiry including appointing an Inquiry Lead, issuing a "stop notice" to all staff to prevent destruction of evidence and checking processes for ensuring contact details for leavers and key personnel. The local inquiry teams' focus will now shift to start collating and sequencing documentation "relevant" to the ToR for possible disclosure to the public Inquiry.

4. Chief Integration Officer appointment

- 4.1 I am delighted to confirm the appointment of Daren Fradgley to the Chief Integration Officer role, following a competitive recruitment process and an interview involving all our statutory partners in Sandwell. Board colleagues will be aware that this role serves the Sandwell Health & Care Partnership as well as being a member of our Board. The post is funded jointly by all the statutory partners in the borough and is the key response of the partnership to the Integration White Paper expectation that each "Place" has an accountable officer for service integration.
- 4.2 Daren is a practicing and registered paramedic and will be the executive lead for the delivery of all our primary care and community services at the Trust.

5. The transition of West Birmingham "Place" to Birmingham & Solihull ICS

- 5.1 The Chief Finance Officer and I represented the Trust at the oversight group for the transition on 16th March. Our key objective in attending these sessions is to seek assurance on the three "key tests" our Board set out it needed, in relation to the transfer.
- 5.2 The transfer will happen on 1st July, in line with Integrated Care Boards (ICB) becoming statutory bodies.
- 5.3 There was a transparent sharing of budget information regarding the CCG's management resource for West Birmingham as a place. The resource is not insignificant. Development funding has been allocated by the CCG on top of this budget to help West Birmingham and its multi-agency partnership, better establish itself as a virtual organisation, much as we are doing in Sandwell place. Unfortunately, there was no specific commitment from the BSol system team regarding full devolution of that budget to the West Birmingham partnership. Whilst this is not a "deal breaker" from a GP/PCN perspective at this juncture and there is a general view that a decent level of local determination will be possible, it doesn't yet completely fulfil one of our key tests

regarding subsidiarity. I suggest we should be partially assured at this stage on this point.

- 5.4 On the financial/resource transfer, the work has been done satisfactorily regarding the technicalities of the c £300 million budget between the two systems. West Birmingham has been shown to not be the worst off locality in the BSol system from a resource allocation perspective (per head of population spend). The funding allocation may change in the future to better reflect population need. It was accepted that resource allocation and needs based expenditure profile were two very different things, so we can only state that we are partially assured on the second key test at this stage.
- 5.5 On the third key test regarding support for the Midland Metropolitan University Hospital (MMUH) development, it was agreed that general support regarding continued funding flows and patient flows needed to convert into specific support for the development, after and only after, our Trust Board scrutiny and sign off of the acute care model, workforce elements and affordability. It was agreed that the Trust would convene, for both our systems, a half day MMUH business case session in May 2022, to begin that process of socialisation and detailed support. A specific, non-recurrent resource to assist our executive team leads to liaise with primary care regarding MMUH pathway changes and development, was helpfully agreed. I suggest we can be partially assured on this key test also.
- 5.6 In summary, there was a general consensus that we considered decent progress was being made on the key tests and we had until June, in advance of 1st July, to refine and improve upon that assurance.

6. Recommendations

- 6.1 The Trust Board is asked to:
 - a) **NOTE** the report
 - b) **DECIDE** whether the Trust should apply for "Core Participant" status in National Covid Public Inquiry
 - c) **DETERMINE** whether adequate progress is being made with regard to the assurance we seek on the three "key tests" regarding the transfer of West Birmingham to the Birmingham & Solihull (BSol) system

Richard Beeken Chief Executive 29th March 2022