

Board of Directors Meeting Tuesday 22nd February 2022

Report from the Chief Executive

| Agenda Item Number: | | 6.0 | |
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| Presented for: | Discussion | | |
| Report of: | Chief Executive | | |
| Author (s): | Chief executive | | |
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| Links to HIF's Objectives | | | |
| Deliver an efficient and effective service offering to Harrogate and District $$$$ Foundation Trust | | ct √ | |
| Create strong sustainable partnerships | | | |
| Develop sustainable organisational systems | | \checkmark | |
| Develop and maintain a strong, efficient and agile workforce | | | |
| Strengthen the local community through collaboration | | | |
| Recommendation: | | | |
| The Board is asked to note the information within the report. | | | |

Harrogate Integrated Facilities

Board meeting 22 February 2022

Chief Executive Report

1. Introduction

This report will update the Board about a number of issues, focusing on national issues, working with HDFT, and strategic development. The Managing Director and I have coordinated our reports to ensure that items are sufficiently covered with minimal duplication.

2. Key messages

As I have mentioned previously, we continue to operate in an environment where the CoVid response is still a significant part of how we work and how we provide services to HDFT. There is though now a recognition that whilst we continue to have to manage the CoVid response, that we now need to be planning much more for a return to business as usual in terms of service provision.

The two key issues to highlight to the Board are

- The change in approach in relation to the vaccination as a condition of deployment (VCOD) regulations
- NHS planning guidance has been issued, in particular the financial allocations for systems for the next year

Whilst we are being encouraged to plan for the future it should also be recognised that sickness absence as result of CoVid remain at very high levels. The rate of infection is also high in the local community and this is impacting on life inside and outside of the working environment, and this is continuing to put a strain on all colleagues and we need to recognise the heightened levels of anxiety across our workforce and the need for support where we can.

3. Vaccination programme for colleagues

As the Board will be aware, the government initially announced that all staff who work within an environment that provides services regulated by the CQC are required to be fully vaccinated against CoVid, unless medically unable to be so. Fully vaccinated meant that colleagues have had the first and second dose of the vaccine. The deadline for this requirement was to be 1st April 2022, which means that the deadline for colleagues to have had the first dose of the vaccine was to be 2nd February 2022.

We were working with the Trust to manage the VCOD impact within HIF and significant work had been undertaken to identify people who might fall into the scope of the regulations and not be fully vaccinated. Meetings had been held with affected colleagues, and further plans drawn up.

On 31st January, the Secretary of State announced that there would be consultation on the implementation of the regulations, with a view to withdrawing them subject to parliamentary legislation.

Our approach has been to assume that the regulations will be withdrawn. All colleagues who were potentially at risk through these regulations have been communicated with and the work has now paused. We are still encouraging vaccine uptake but have always stated that it is for individuals to choose. The service risk has therefore been removed, and whilst there may be a risk of some potential claims from people who got the vaccine without really wanting to get it (in order to protect employment), the way in which our local managers have managed the situation has meant that this has been mitigated significantly.

4. National planning

I updated the Board at the recent workshop in relation to the NHS planning guidance issued just before Christmas. The priorities were to focus on elective recovery, urgent care, health and wellbeing of colleagues, and the ongoing CoVid response.

In terms of the financial framework, the key issues are:

- A return to local financial flows with no 'top-ups' each system will receive an allocation to manage within
- A level of growth in funding that is reduced by a 'convergence' adjustment to gradually return the NHS to the allocations planned before CoVid
- An explicit efficiency requirement (1.1%) for the NHS to meet
- A significant reduction (60%) in CoVid support funding

• A significant allocation available for elective recovery

The impact on HIF is that we will agreeing a contract with HDFT that is line with the national planning assumptions, with an inflationary uplift to cover pressures like pay awards, but a reduction which will need to meet the efficiency requirement expected.

We are in discussion about particular HIF specific pressures (eg energy price increases) and we will look to agree a position in the next few weeks.

In relation capital, again there will be a significant allocation for any capital schemes that deliver elective recovery, so the team are working with the Trust to develop a proposal in relation to additional theatre capacity on the hospital site. This would potentially be submitted for approval during 2022/23, with a scheme to start in 2023/24.

5. Working with HDFT

Within the context of the national priorities, we need to continue to work alongside HDFT to respond and deliver services in a way that ensures resilience and support to the clinical teams working across HDFT. This continues to impact upon HIF in a range of ways including

- Rapid response to deep clean requests
- Regular patient moves to keep flow moving across the hospital
- Efficient SSD processes to ensure elective activity is not compromised through equipment shortage
- Estate support to improve patient and staff environment, and maintenance so that clinical staff can concentrate on their roles

The fundamental priority across the group and therefore HIF continues to be to ensure efficient and responsive operational services that enable elective care to be stepped up whilst managing increased emergency activity alongside CoVid patients on the wards.

I am pleased to say that colleagues across HIF are stepping up and playing a key role within the hospital teams to support the work that we all have to do.

The one particular area at the moment where we are seeking to improve processes is in relation to the working environment within the hospital. We know that an improved environment improves people's health and wellbeing, and we need to make sure that areas of work, corridors, etc are tidy, professional and free from clutter. Whilst this may appear to be a relatively minor issue, it is a very visible issue and one that we want to improve.

6. xxxxxxxxxxx opportunity

Work continues in relation to the Decarbonisation project.

We are on target to commit the vast majority of the grant funding, recognising that there will be some commissioning costs next year. We are in dialogue with the xxxxxxxx about progress and the timing of various packages of work. We are also working with HDFT to manage the programme alongside the operational pressures, in particular the fact that the Trust has a number of beds open for patients that were not planned to be open, as a result of CoVid and winter escalation.

An update report is included later in the agenda that covers the current position in relation to the programme.

7. Board Recruitment

As the Board will be aware, our valued Board member Sarah Armstrong, has been successfully appointed as the new Chair of HDFT. This is fantastic for HDFT and also great for HIF as well, as I know that Sarah will be keen to follow the fortunes of the company over coming months/years.

We are therefore in discussion with HDFT about the appointment of a shareholder NED from 1st April. We are also in the process of recruiting a new NED externally to support the Board.

I'll update the Board at the meeting of any other issues in respect of the Board.

8. Summary

The Board is asked to note the information within the report.

Jonathan Coulter

Interim Chief Executive