

<b>REPORT TO:</b>	<b>BOARD OF DIRECTORS</b>
<b>DATE:</b>	<b>8 DECEMBER 2017</b>
<b>SUBJECT:</b>	<b>REPORT FROM THE MANAGEMENT BOARD</b>
<b>BOARD SPONSOR:</b>	<b>CHIEF EXECUTIVE</b>
<b>PAPER AUTHOR:</b>	<b>ASSISTANT TRUST SECRETARY</b>
<b>PURPOSE:</b>	<b>DISCUSSION</b>
<b>APPENDICES:</b>	<b>NONE</b>

## **BACKGROUND AND EXECUTIVE SUMMARY**

The purpose of the Management Board is to oversee the effective operational management of the Trust (including achievement of statutory duties, standards, targets and other obligations) and the delivery of person centred care and to support the Trust Board in setting and delivering the Trust's strategic direction and priorities.

Previous reporting from this Committee has previously been included within the Chief Executive's Report. A separate report will now be provided to the Board of Directors.

The following sets out key discussion points and decisions made at the last meeting held on 29 November 2017.

### **Performance**

The Integrated Performance Report (IPR) was received and key elements of quality, finance, performance and estates/health & safety were discussed. A copy of the IPR is a main agenda item for the Board of Directors and the Quality Committee and Finance and Performance Committee have also received and discussed the key headlines in detail and a summary will be included in their Chair Reports to Board. Work would be undertaken to align key metrics within the Care Quality Commission's Insight Report to the Integrated Performance Report.

A paper was received setting out the Trust's latest financial forecast. Risks to delivering the year end forecast position linked to: maximisation of the emergency department (A&E) position; potential commissioner challenges; and delivery of the Cost Improvement Programme (CIP). The Finance and Performance Committee also discussed this paper and a summary will be included in the Chair Report to Board.

It was important to note the Trust had received an improvement notice from the Health and Safety Executive linked to equipment in microbiology. The issue was previously known to the Trust and a plan was in place.

A report was received providing assurance that approved cost improvement programmes had been quality impact assessed. The same report is also received by the Board's Quality Committee.

Performance against CQUINs is a standard report to Management Board to support monitoring of progress, early identification and escalation of risks to achievement of milestones and mitigations in place.

A presentation was received by Management Board on the current demand and capacity plan for the Trust. A report is a substantive item for the Board on 8 December 2017.

**Governance and Assurance Reports**

The Corporate Risk Register was discussed noting changes to the corporate risk register, proposed closure of risks and new and emerging risks. The Risk Register is then reported to the Quality Committee each month and reported to Board through the Committee Chair Report. Two new risks were added to the register:

- Potential failure of the Radiotherapy LINNAC machine (linked to the age of the machine); and
- Inability to provide a Tracheostomy service to Neuro-rehabilitation patients linked to repatriation of patients. A thorough review of the Harvey Ward facility in order to ensure the services provided align accurately with those the Trust is commissioned to undertake.

Funding was made available for the implementation of Allocate Safecare and Clinical Activity Management and the Allocate Insight service in order to improve Trust rostering processes. A progress report was received and roll-out is progressing well.

Management Board considered recommendations to review contractual notice periods for all staff with the aim of aligning to Trust peers and mitigating risks of service gaps during recruitment processes. The paper will be presented to the Staff Committee for approval.

Management Board agreed that the Trust's Information Governance Manager also fulfil the role as designated Data Protection Officer for the Trust.

Standing Operating Procedures (Business Continuity) were agreed. The procedures set out clear guidelines to ensure essential business and governance of the Trust continues during intense times of operational pressure.

Progress report on the development of a Dementia Village was received. The same report was presented to the Finance and Performance Committee and will be reported through the Committee Chair Report to Board.

**Items for Decision**

Management Board supported the business cases to replace replace 2 Gamma Cameras for 2 SPECT/CT cameras at KCH. Further work would be undertaken to determine the most appropriate financial enablers. Due to the financial limits, the business case will also be presented to the Finance and Performance Committee with a recommendation to the Board of Directors.

Management Board supported in principle a proposal to secure the right to provide the pharmacy services from the primary care facility to be built at Kent and Canterbury Hospital. Further work would be undertaken to determine the accounting treatment. Due to the financial limits, the proposal will also be presented to the January 2018 Finance and Performance Committee.

Management Board agreed an action to determine the future strategy of the Trust to assist with the alignment of future service developments.

**Information Reports**

Regular information reports are received and noted from:

- Information Assurance Board
- Transformation Board
- Vacancy Control Panel
- Strategic Investment Group

<b>IDENTIFIED RISKS AND MANAGEMENT ACTIONS:</b>	The Management Board receives reports covering a broad range of performance and governance issues.	
<b>LINKS TO STRATEGIC OBJECTIVES:</b>	<b>Provision:</b> Provide the services people need and do it well.	
<b>LINKS TO STRATEGIC OR CORPORATE RISK REGISTER</b>	The Management Board receives reports covering a broad range of performance, governance and risk management issues.	
<b>RESOURCE IMPLICATIONS:</b>	Key financial decisions and actions may be taken on the basis of this report	
<b>COMMITTEES WHO HAVE CONSIDERED THIS REPORT</b>	None	
<b>PRIVACY IMPACT ASSESSMENT:</b> NO		<b>EQUALITY IMPACT ASSESSMENT:</b> NO
<b>RECOMMENDATIONS AND ACTION REQUIRED:</b>  To discuss and note the report.		