Agenda Item 6

Chief Executive's Report

Reference: 10B.011

Board Meeting: 22 February 2010

NHS Direct

Summary	This report updates the Board on key activities and issues from the Chief Executive since the Board last met in January 2010.
Issues to be considered	The following items are brought to the Board's attention: 1. The National Pandemic Flu Service has now stopped with all necessary arrangements in place for a smooth transition. 2. Formal consultation on the closure of the Plymouth site has commenced; Stevenage site closes on the 15th of March. 3. Executive Team Changes
Action required	To note the report.
Accountable Executive Director	Nick Chapman, Chief Executive
Author of Paper	Trevor Smith, Finance Director
Date prepared	February 2010

1 National Pandemic Fluline Stand-down

1.1 The National Pandemic Flu Service (NPFS) stopped taking in new assessments on the 11th of February. All NHS Direct reference to NPFS has been amended including any means previously used to direct patients to the NPFS such as leaflets, the website, messaging, Self Assessment Tool (SATs), and FAQs used by staff etc. Anti-viral medication collections using a Unique Reference Number will continue until the 18th of February. The Interim solution deployed on the 23rd of July is scheduled to be switched off at that time. Patients who might benefit from anti-viral medication or who are in need of further support will be encouraged to contact their GP or NHS Direct.

1.2 NHS Direct will retain the capability to respond to any patient feedback or complaints about the service for a 12 month period. We will also take responsibility for the safe storage of all patient data on behalf of the Department of Health. The NPFS Service centre, run by NHS Direct, will continue to operate until March 2010 to support the functioning of the Stock Management System.

1.3 Work is also underway to undertake a review exercise on lessons learnt (we have already contributed to a NHS wide exercise), and to ensure that all operations manuals and associated documentation are fully updated.

1.4 To aid preparedness for future pandemics, we will also carry out a full "dress rehearsal" on the Strategic NPFS solution, to test that it can be safely mobilised within seven days. Subject to a successful test, the NPFS platform will be put into a dormant state, which will include annual readiness tests.

1.5 NHS Direct is also contributing to a procurement process to secure a framework agreement for call centre capacity for any future pandemics.

2 Alternative Ways of Working

2.1 We have now commenced formal consultation on the closure of the Plymouth site and transfer of staff to alternative work bases including home working.

3 Online Enquiry Service

3.1 The Stevenage site, which currently hosts the Online Enquiry Service, closes on 15th of March. Staff have either taken redundancy or relocated.

4 Management Cost Reductions and Business Support Functions

4.1 The Trust is seeking to reduce its total management costs by 30% by the start of the financial year 2011/12. Phase 1 of the programme (target £1.7m) for 2010/11 has been agreed within the Strategic Development Programme and is reported each month within the Performance Report.1 It covers Finance, Human Resources and elements of administrative and analytical support with the Operation Divisions. Phase 2 will commence imminently and will cover the remaining areas of management cost and service support in order to fully achieve the total targeted reduction of circa £8m by 31st March 2011.

4.2 Phase 1 programmes are currently being assessed for consistency, equality of access to service and operational fit. Any overlaps with other areas of the Strategic Development Programme are also being assessed to avoid duplication or double counting. A workshop is scheduled for 18th February to take this work a stage forward. Any costs of re-organisation must be identified and brought into account in the current financial year.

[1] Strategic Development Programme initiative CP2.

5 Executive Team Changes

5.1 Chief Operating Officer

Advertisements have been placed in the Health Service Journal, Sunday Times and The Guardian online over the past two weeks. The closing date for applications is 26th February. The Appointment Panel will meet on the 17th of March.

5.2 Director of Public Health

Brian Gaffney was appointed to the post of Director of Public Health. This follows his appointment to our Public Health Advisor post last year, for which he will continue nominally reporting to the Clinical Director/Chief Nurse. We are in progress of formalizing the establishment of the post with the Faculty of Public Health. The post will be occupied for two and a half days a week, usually a full day on Mondays and Tuesdays with the remaining hours spread flexibly during the remainder of the week. It will be based at Headquarters.

In addition, for the next 6 to 9 months Brian will take on some of the responsibilities of the Medical Director, including attendance and participation at the NHS Direct Board as a non-voting member, and the development of an advocacy role for the organisation across the medical community. Towards the end of this period we will review whether this arrangement is satisfactory, and whether it is meeting the needs of the Trust.

5.3 Associate Director of Governance

Following interviews for the post of Associate Director of Governance, we have been unable to successfully appoint. I have decided to split the role with a part-time Associate Director taking responsibility for support to the Chair in respect of the governance of the Trust Board, Trust Board Sub-committees, compliance with corporate governance standards, freedom of information, corporate risk management and the annual report. James Bufford will continue to cover this role on an interim basis.

The remaining part of the role will be filled by Anne Riddaway, as Associate Director of Corporate Business, who will take responsibility for support to the Chair and Chief Executive in the overall management of the Trust's corporate business agenda, the Chief Executive's office, Headquarters support, the Senior Management Team meetings, Chief Executive's meetings, parliamentary business and briefing. In addition, she will undertake responsibilities reporting to Ruth Rankine (Director of Strategy and Planning) in relation to Strategy and Planning.

6 Risk Management

6.1 The Trust's risk levels decreased slightly in the past month, as improvements in performance and staff retention led to access targets being met.

6.2 The highest risks for the Trust remain as:

- The ability to improve our efficiency and effectiveness rapidly enough to creating recurring financial balance.
- Future policy uncertainty

6.3 The full risk profile can be found in the appendices 1, 2 and 3.

Nick Chapman	**Trevor Smith**
Chief Executive	Finance Director

Appendices:
Appendix 1 – Corporate Risk and Assurance Dashboard
Appendix 2 – Risk Universe
Appendix 3 – Corporate Risk and Assurance Register