

<b>Meeting title:</b>	<b>Trust Board (public session)</b>
<b>Date of the meeting:</b>	<b>5 May 2022</b>
<b>Title:</b>	<b>Chair's Report</b>
<b>Report presented by:</b>	<b>John MacDonald – Trust Chair</b>
<b>Report written by:</b>	<b>John MacDonald – Trust Chair</b>

<b>Action – this paper is for:</b>	Decision/Approval		Assurance		Update	X
<b>Where this report has been discussed previously</b>	N/A					

### Integrated Care Board to be Established as a Statutory Authority on 1<sup>st</sup> July

The Health and Care Bill received Royal Assent on 28<sup>th</sup> April. This is a welcome and important step on the journey towards establishing Integrated Care Systems (ICS) on a statutory footing from 1st July 2022. The Leicester, Leicestershire and Rutland (LLR) ICS will bring together the local organisations responsible for delivering health and care services to provide more integrated and high quality care for the people we serve.

The LLR ICS will also give us opportunities to address inequalities which have been exacerbated by Covid. We learnt from the Covid vaccination programme that we need to provide services in a way which enables people from different communities to access care equitably. But the greater impact on reducing inequalities will come through the NHS working in partnership with local government, the three universities, the voluntary sector, community and social enterprises and businesses. Employing nearly 17,000 people we must strengthen the opportunities for local people to work at UHL, concentrate more of the investments and money we spend within LLR and, through our Green Plan improve our environment to make a very real and meaningful difference to the health of our patients and communities.

### Strengthening our Partnership with Primary Care

As we develop and strengthen our partnerships across LLR I am very keen that we build trusting relationships with other parts of the system and that our decisions are taken with the active engagement with partners.

I am delighted that Dr. Gopal Sharma has joined the Board. He has considerable experience in primary care both as a GP but also in his work with NHSE and the wider regulatory organisation.

In addition three GPs have joined the Senior Leadership Team working closely with the executive and clinical directors. They are:

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- Dr. Asma Bukhari (SILVERDALE MEDICAL CENTRE)
- Dr. Unnatiben Patel (THE JUBILEE MEDICAL PRACTICE)
- Dr. Abbas Tejani (GROBY ROAD MEDICAL CENTRE).

A very warm welcome to them all.

Finally Richard and I have had a number of discussions with Paula Clark, chair of LLR Patient Care Locally with a view to strengthening and developing our partnership. PCL facilitates the development of clinical pathway transformation, working closely with other system partners to identify patient activity that can be transferred into primary care.

### The Legacy of Covid

Whilst the number of people with Covid has begun to reduce in the last few days, we are still seeing a high number of people coming to the hospital requiring urgent or emergency treatment. The number of people attending A and E have doubled over the last four years and on particular busy days nearly treble that number. At the same time we are seeking to deal with the legacy of Covid including people waiting longer for treatment and increased referrals of people with suspected cancer.

I know that all of us who work at UHL are committed to doing just this. But it is a huge ask after two years of Covid and I would like to thank each and every one of you for your compassion, commitment and determination to provide high quality care.

The majority of patients understand the pressures on the NHS and the staff. But I also know that for many patients it is also a time of worry with delayed diagnosis and treatment. As was reported earlier this week there are a few, but increasing number of people where this concern, worry and frustration comes out as threatening to staff. I would ask that in these challenging times we treat each other with the respect, compassion and understanding that we are all doing our best in very difficult times.

### Reconfiguration

A number of schemes to support the wider Reconfiguration Strategy have or will come to fruition this year. Nearly £25m was spent last year on these schemes and a further £25 million in 2022/23. These developments include:

- Renal Services
  - Transplant unit at Glenfield
  - Transfer of three nephrology wards to Glenfield from LGH.
- Intensive care
  - Ten additional beds at Glenfield.
- Medicine

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- Relocation of medical ward from LRI to LGH
- Move of respiratory wards at Glenfield and medical wards at LGH.
- Surgery
  - Day case hub at LGH.
  - Transfer of emergency hepatobiliary and general surgery and some elective inpatient from LGH to LRI.
- Diagnostics and Therapy services
  - Interventional Radiology department at Glenfield.
  - Upgrading of pharmacy and ultrasound services at LRI and Glenfield.

In addition approval has been received from NHSE for theatres and ward refurbishment at LGH with nearly £40m allocated for this development.