

Meeting title:	Trust Board (public session)				Paper D
Date of the meeting:	1 December 2022				
Title:	Chair's Report				
Report presented by:	John MacDonald – Trust Chair				
Report written by:	John MacDonald – Trust Chair				
Action – this paper is for:	Decision/Approval		Assurance		Update X

National Announcements

There have been a number of important national announcements that provide clarity of the funding for the NHS over the next two years. These include:

- The Chancellors Autumn Statement which identified [£3.3bn](#) for the NHS in each of the next two years to help with inflation and [improve waiting times](#). Whilst this is very welcome, it is less than half the estimate of the amount required to reduce the backlog, improve ambulance waiting time and meet the cost pressures. There will therefore, be a need for increased efficiencies. In addition, £2.8bn in 2023/24 and £4.7bn in 2024/25 will be made available to support the discharge of patients from hospital and wider support for adult and children's social care.
- £500m of funding in 2022/23 to support discharge of patients over the winter period. 40% of this will be distributed directly to local authorities and 60% will be distributed via Integrated Care Boards.
- A national long-term workforce plan will be published next year. This will set out independently verified forecasts of the resources the NHS needs over 5, 10 and 15 years. The plan will focus on the training, recruitment and retention of doctors, nurses and other health professionals as well as measures which will help to improve the overall productivity of the NHS workforce.
- The Rt Hon Patricia Hewitt, former Secretary of State for Health and current Chair of NHS Norfolk and Waveney ICB, will lead an independent review into the efficiency, autonomy and accountability of integrated care boards.

Winter

I am very grateful for the considerable work that has gone on across the LLR health and care system and the work of our staff and staff across the system in preparing for winter. Measures have included close partnership working to provide streamlined services, supporting staff wellbeing including cost of living initiatives, and recruitment and additional beds in hospital and in the community to boost capacity. Despite this, I share the concern of leaders and senior clinicians across the country and in LLR about our capacity to meet demand for services over the next 12 months.

We know that, at times, people will have to wait longer for urgent and emergency care than we would want or is desirable. For those who have to wait, I apologise and assure you we will do our best to make sure you are treated as quickly as possible.

HSJ Acute Sector Innovation of the Year Award

Working with Barts Health Centre, The STEMI (ST Elevation Myocardial Infarction) Early Discharge Pathway won the HSJ Acute Sector Innovation award. The service is led by Dr Bhavik Modi, Consultant Interventional Cardiologist, and Celia Bloor, Advanced Nurse Practitioner.

The scheme empowers heart attack patients with increased support and technology after discharge. It has reduced how long people need to stay in hospital following certain types of heart attacks from an average of three days to just over 24 hours.

Visit UCCH at Thurmaston Health Care Centre

I have continued to visit services and meet people across our three sites and the wider system. I was particularly impressed to visit the Urgent Care Centre at Thurmaston Health Centre where a multi-disciplinary team from across the health and care sector provide advice to patients to ensure they get the support and in the community so avoiding the need to go to A and E. A brilliant example of what, working together, we can achieve.