

**Audit Yorkshire
NHS Monthly Insight Report
June 2022**

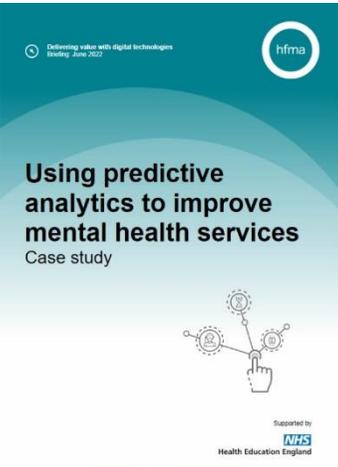


Monthly Insight Report

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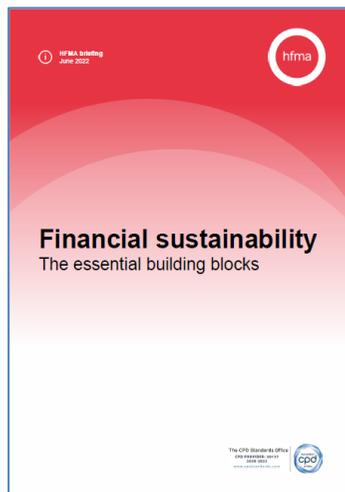
Introduction

The Internal Audit Network (TIAN) comprises the 10 NHS internal audit consortiums and in house teams operating in England. These organisations collaborate across a number of areas to leverage their collective knowledge and expertise and drive efficiency and effectiveness. The NHS Monthly Insight Report is produced by CW Audit on behalf of TIAN and is shared across TIAN members and their clients.

Developments in the NHS	
<p>NHSE issue counter fraud statutory guidance for ICBs</p>	<p>This document sets out the respective counter fraud roles and responsibilities with respect to ICBs and NHSE, particularly with regard to alleged fraud within primary care services.</p>
	<p>The document can be found here: NHS England » Integrated care boards: counter fraud statutory guidance</p> <p>For noting by ICB boards and audit committees</p>
<p>Using predictive analytics to improve mental health services</p>	<p>Mersey Care NHS Foundation Trust provides physical health and mental health services in the North West of England. Services are delivered by over 11,000 staff across more than 150 sites. The trust has nearly 1,000 inpatient beds, but over 90% of all contacts are in the community.</p>
	<p>In common with many other mental health trusts, Mersey Care's community mental health teams (CMHTs) were experiencing rising caseloads and increasing numbers of service users with complex mental health problems. This meant that the service was prioritising the management of risk to keep people safe, and had limited time to deliver recovery-based care.</p> <p>The lack of information about the size and complexity of team and practitioner caseloads meant that it was hard for managers to ensure that adequate time and resource was allocated to those service users who needed it most. The trust was keen to make better use of the information held in their clinical systems to address these issues. Using Global Digital Exemplar funding, the trust worked in collaboration with Holmusk to develop a digital solution, called the Management and Supervision Tool (MaST).</p> <p>The tool uses a 'risk of crises' algorithm to identify those people who are most likely to require crisis services such as A&E, community mental health crisis services or inpatient care. It can also be used to identify people who are at the lowest risk of using crisis services, who can be reviewed and potentially discharged from the CMHT, with support from other services for their continued recovery. This has the potential to reduce the size of CMHT caseloads, freeing up time to care for others. This HFMA case study can be found here: https://www.hfma.org.uk/publications/details/using-predictive-analytics-to-improve-mental-health-services</p>
	<p>For information</p>

Developments in the NHS

HFMA briefing: Financial sustainability – the essential building blocks



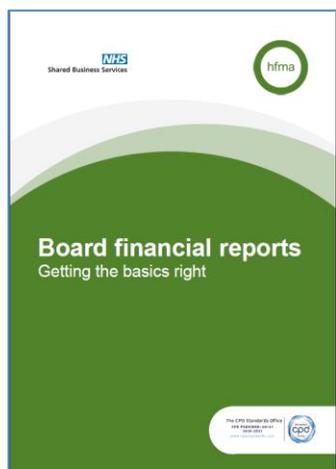
Delivering long-term financial sustainability is not something that can be achieved quickly and is an ongoing process rather than a one-off plan, with a focus on delivering value. Since March 2020, NHS organisations have been focused on the operational management of the Covid-19 pandemic. This, coupled with the temporary financial regime and additional funding, meant efficiency requirements were put on hold. Now there is a renewed focus on improving financial sustainability and a need to regain financial grip, while still balancing the competing priorities from operational activity, workforce demands and recovery from Covid-19.

The HFMA interviewed a number of experts who support NHS organisations to improve their financial performance, as well as finance directors and senior clinicians, asking them for their views on the building blocks for improving financial sustainability. This briefing summarises the key themes (<https://www.hfma.org.uk/publications/details/financial-sustainability-the-essential-building-blocks>).

The HFMA recognise that implementing each of them will come with challenges and they will not be implemented quickly. However, most organisations won't be starting from a blank canvas and this report is intended to be a reminder of how essential these building blocks are when improving financial sustainability.

For consideration by NHS bodies as part of their self-assessment of financial sustainability

HFMA briefing: Board financial reports – getting the basics right



The NHS is under financial pressure and there is a renewed focus on improving financial sustainability. NHS bodies are being challenged to regain financial grip, while still balancing competing priorities from operational activity, workforce demands and recovery from the impact of Covid-19.

This briefing, produced with the support of NHS Shared Business Services, looks at how financial information should be presented to boards to support their assessment of their financial position. It can be found here: <https://www.hfma.org.uk/publications/details/board-financial-reports-getting-the-basics-right>

For consideration by NHS boards

Developments in the NHS

Consultation opens on inspection framework for C&YP with SEND



Ofsted and CQC are asking people to share their thoughts on a new framework for inspecting services for children and young people with special educational needs and/or disabilities (SEND) in a local area. The regulators want to hear from anyone who has experience of education, health or care provision for people with SEND – including people working in services, children and young people, parents and carers. The consultation includes proposals for assessing how agencies in a local area work together to meet the needs of children and young people with SEND, including the impact of commissioning arrangements on people's experiences.

Previously, the joint area SEND inspections focused on how local authorities were meeting their responsibilities in the SEND code of practice – statutory guidance produced by the Department for Education and the Department of Health and Social Care. The new proposals give a greater focus on hearing directly from children and young people with SEND, and their families. This would allow inspectors to get a better understanding of what local services actually feel like to the people using them. The framework would also see greater accountability for local areas, introducing a regular cycle of inspections and three inspection outcomes that make clear what needs to improve and who is responsible.

The consultation runs until 11 September 2022 with the new inspections expected to start in early 2023. It can be found here:

<https://www.gov.uk/government/consultations/a-new-approach-to-area-send-inspections>

For information

The guide for the NHS on freedom to speak up



This NHSE/I guidance is designed to help senior leaders, in NHS organisations who provide services to the NHS, develop a culture where:

- leaders and managers encourage workers to speak up
- matters raised by workers drive learning and improvement.

The guide can be found here: <https://www.england.nhs.uk/publication/the-guide-for-the-nhs-on-freedom-to-speak-up/>

For information

NHS violence prevention and reduction standard: guidance notes



This guidance document is designed to be used in conjunction with the NHS violence prevention and reduction standard. NHSE/I want to help provider organisations share and communicate risks of violence and their mitigation controls through processes that are robust and transparent. This guidance will help the implementation of a data-driven method focusing on colleague health and wellbeing.

It can be found here: <https://www.england.nhs.uk/publication/nhs-violence-prevention-and-reduction-standard-guidance-notes/>

For action alongside the NHS VPAR standard

Developments in the NHS

Health and social care review: leadership for a collaborative and inclusive future

In October 2021 the government announced a review into leadership across health and social care, led by former Vice Chief of the Defence Staff General Sir Gordon Messenger and supported by Dame Linda Pollard, Chair of Leeds Teaching Hospital Trust.

As outlined in the terms of reference, the review focused on the best ways to strengthen leadership and management across health and with its key interfaces with adult social care in England. Following extensive stakeholder engagement, the review has now completed with the following 7 recommendations:

1. Targeted interventions on collaborative leadership and organisational values
2. Positive equality, diversity and inclusion (EDI) action
3. Consistent management standards delivered through accredited training
4. A simplified, standard appraisal system for the NHS
5. A new career and talent management function for managers
6. Effective recruitment and development of non-executive directors (NEDs)
7. Encouraging top talent into challenged parts of the system

All 7 recommendations have been accepted by the government and publication of the report will be followed by a plan committing to implementing the recommendations. The report can be found here: <https://www.gov.uk/government/publications/health-and-social-care-review-leadership-for-a-collaborative-and-inclusive-future>

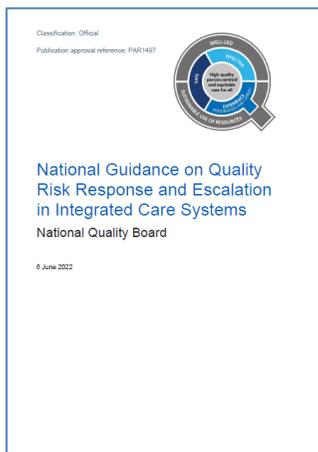
For information

National Guidance on Quality Risk Response and Escalation in Integrated Care Systems

This NHE/I guidance is to support system leaders as they develop their approach to quality management, providing clarity on how quality concerns and risks should be managed through systems. It supersedes the NQB Guidance on Risk Summits and aligns with the NHS Oversight Framework (NHSOF) and the NQB's previous publications for Integrated Care Systems.

It can be found here: <https://www.england.nhs.uk/publication/national-guidance-on-quality-risk-response-and-escalation-in-integrated-care-systems/>

For action within ICS



Developments in the NHS

NHS providers' report: The financial and performance ask for trusts in 2022/23



The pressures facing the NHS now can be traced back over the last decade as four long-term fault lines, all of which have been exacerbated by the pandemic:

- the longest and deepest financial squeeze in NHS history
- a growing mismatch in capacity and demand resulting in pressure on national performance standards pre pandemic
- staff vacancies and the need for better workforce planning
- an underfunded social care system in need of reform.

NHS Providers' survey shows how the pandemic has deepened these existing fault lines, leaving trusts facing a tough task in 2022/23 to meet patient need within the financial envelope and to deliver stretching efficiency targets.

- Trusts are ambitious about reducing care backlogs and they are caring for more patients, but some targets will be challenging to deliver. The majority of respondents are confident they will eliminate long waits of over 52 weeks by March 2025, and that their trust will ensure 75% of patients who have been urgently referred by their GP for suspected cancer are diagnosed or have cancer ruled out within 28 days. However, only 37% of respondents are confident that their trust will be able to deliver 104% of pre-pandemic elective activity by the end of 2022/23.
- Staff shortages, burnout, capacity constraints, challenges in patient flow and increasing clinical complexity will limit trusts' ability to make activity gains during 2022/23. The biggest barriers reported are operational pressures coupled with major staffing shortages.
- Trust leaders have welcomed the recent announcement by NHS England/Improvement (NHSE/I) to allocate an additional £1.5bn to systems to alleviate inflationary cost pressure. While this will help, there will still be a need to continue to monitor and address inflationary pressure over 2022/23. Trust leaders will also want reassurance from government and national bodies that the additional funding to address inflationary pressure will not put other national health and care budgets under pressure.
- The financial ask of 2022/23 remains challenging for the vast majority of trusts. 85% of respondents said they are not confident that their system will reach financial balance in 2022/23, while 91% said they are not confident that their trust will end 2022/23 in a better financial position than it ended in 2021/22.
- Trust leaders strongly support an uplift in staff pay but this must be appropriately funded. 94% of trusts are not confident that they would have sufficient revenue funding for additional pay costs if the pay review body's recommendations exceed budgeted allocations.
- Trusts are working as hard as they can to drive cost improvement programmes. However, they are unlikely to deliver efficiency savings at the level expected by government and NHSE in 2022/23. Among respondents, the average estimated required efficiency savings rate for 2022/23 is 4.04% but 73% of respondents told us that a realistic and achievable efficiency savings target would be between 1% and 2.5%.

The report can be found here: <https://nhsproviders.org/nhs-reality-check>

For information

Department of Health and Social Care's new plan for digital health and social care.

The plan for digital health and social care sets out a vision for a digitally enabled health and social care system and how it can be achieved – it collates existing digital strategies, plans and guidance into one single action plan. It is aimed at health and social care leaders across the system, and industry partners to help them plan for the future.

In the document (<https://www.gov.uk/government/publications/a-plan-for-digital-health-and-social-care>), the DHSC:

- make clear their priorities for digital transformation
- begin to set out the support that will be available to local systems to enable the changes that are needed

For information

Disclaimer: This briefing paper is intended to highlight recent developments and issues within the NHS that may be of interest to non-executive directors, lay members and NHS managers. It is not exhaustive and TIAN cannot be held responsible for any omission.