

'You matter, we care'

Trust Board Meeting (Part 1)	Date: 29 October 2014
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Title:	Chief Executive's Report
Item:	BD/14/179

Executive Director lead and presenter	Iain Tulley, Chief Executive
Report author(s)	Company Secretary, Head of Communications

History:	N/A
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This report is for:	
Decision	
Discussion	
To Note	X

The following impacts have been identified and assessed in relation to this report:	
Equality	<i>None identified.</i>
Quality	<i>None identified.</i>
Privacy	<i>None identified.</i>

Executive Summary of key issues
<p>The report signposts some of the key management and development issues facing our Trust and draws members' attention to recent national and local NHS and regulatory activity.</p> <p>The Board should note this report.</p>

This report addresses these Strategic Priorities:	
We will deliver the best care	X
We will support and develop our staff	X
We will continually improve what we do	X
We will use our resources wisely	X
We will be future focussed	X

1. Introduction

Since the last Board I have attended our Trust's Staff and Long Service Awards Presentation Evening, the Band 8 and Modern Matron Conference, the Joint WEAHSN and Local Clinical Research Network Conference, the NHS Mental Health Network Board Away Day & Network Board and was scheduled to attend as a judge, the Positive Practice Awards evening in Sheffield.

In addition to the normal pattern of meetings, the chair and I have met with the TDA's (NHS Trust Development Authority) Chief Executive David Flory and its Director of Delivery & Development (South) Steve Dunn; visited Sycamore Ward and was scheduled to attend the National Health Service Executive, TDA and Monitor Tripartite Planning Priorities Conference.

With the Medical Director, I met consultants in Bristol and attended the Mental Health Network and CQC Conference Learning from the first wave of mental health inspections and gave a presentation on Quality Summit with Chris Thompson, who was the CQC lead inspector in our Chief Inspector of Hospitals Trust inspection earlier this year.

I have also met the CQC with the Medical, Nursing and Operations Directors.

I chaired the interviews for the recruitment of a Bristol Mental Health System leader, a conference with Non-executive Directors re Bristol Tender Assurance and participated with Julie Hankin in the Wiltshire Health and Wellbeing Peer Review Challenge.

Reviews have been completed with all the delivery unit triumvirate leadership teams.

2. Current issues

2.1. CQC inspection follow up

Following the publication of the inspection report by CQC and taking into account the warning notices and compliance actions required of the Trust, all actions are contained within a comprehensive Quality Improvement Plan. Actions contained within this are being implemented in full across the Trust. The Director of Operations has responsibility for overseeing the implementation of this plan and Clinical Directors are accountable for comprehensive delivery.

We have responded in full to three of the warning notices that have been issued and the fourth will be submitted following this Board meeting.

I would like to recognise and thank staff for the way in which they have engaged in responding to the concerns raised by CQC in a positive and constructive way. Having had the chance to meet with some staff and to view, first hand, the improvements that have been made, I am encouraged by the progress made. As mentioned above the Chairman and I conducted a walk around in Sycamore Ward and witnessed a remarkable improvement in every aspect of the ward.

2.2. Risk

For the first time, the Risk register is presented in two formats, with one broken down by CQC domain. There has been no significant change in our key risks, which we continue to manage carefully.

2.3. Acute care pathway

The Board is aware of the increasing pressures within the acute care pathway, locally and nationally. As discussed, we have embarked on a large diagnostic exercise to understand the current state of the pathway, identify root causes and critical success

factors and articulate the proposed 'future state' for AWP services. This will then be followed by a programme of work designed to move services forward, with newly designed pathways that better meet patients' needs and expectations. This programme is being overseen by a reference group, chaired by the Associate Director of Commissioning in Swindon.

I would like to acknowledge the very considerable efforts our clinical staff are making to deliver safe and effective care within what is a challenging environment.

The pressures are impacting on the quality of service which we can deliver and we have formally escalated our concerns to our commissioners. Concerns have also been raised via the Medical Directors Network to NHS England. Elsewhere on this agenda there are proposals which seek to address some of the capacity issues and we are supporting the work of our commissioners to address some of the root causes of this problem.

2.4. Nursing Director Recruitment

Earlier this year and following an unsuccessful recruitment process, Deputy Director of Nursing Alan Metherall agreed to fulfil the Director of Nursing role on an interim basis. The process to make a permanent appointment is underway again and we hope to do so during November.

2.5. Laura Scull (deceased)

I had the privilege of meeting Laura's family on 26 September 2014 together with Medical Director Hayley Richards and Head of Patient Safety Systems Linda Hutchings.

Board members will recall that the Coroner criticised the care afforded to Laura and issued a Regulation 28 report. Our failure to recognise that Laura was suffering from Neuroleptic Malignant Syndrome (NMS) was core to the family's concerns and the way that news of Laura's death was broken to Mrs Scull was shocking. The family offered us much to reflect upon from their description of how they felt their concerns were not taken seriously enough and that they were not listened to both before and after Laura's death.

I would like to formally record my apology on behalf of our Trust to the Scull family for Laura's untimely death. Our failure to recognise that Laura was suffering from NMS meant that we did not do all that we might have done to help Laura and I am really sorry for this failure.

We have agreed to work with the family to raise the profile of NMS and to increase awareness and recognition of this condition, both within our Trust and across the country.

3. National issues

3.1. Strategic framework for NHS development

The recently published NHS Five Year Forward View sets out a vision for the future of the NHS. It has been developed by the partner organisations that deliver and oversee health and care services including NHS England, Public Health England, Monitor, Health Education England, the Care Quality Commission and the NHS Trust Development Authority. Patient groups, clinicians and independent experts have also provided their advice to create a collective view of how the health service needs to change over the next five years if it is to close the widening gaps in the health of the population, quality of care and the funding of services. In publishing the Forward View,

NHS England chief executive Simon said the NHS was at a "crossroads" and "must fundamentally change" but that there was no reason why a tax-funded NHS would not continue if the plans outlined were followed.

3.2. Focus on mental health

The greater national focus on mental health is reflected in the Department of Health's publication of 'Achieving Better Access to Mental Health Services by 2020' which sets out a range of new waiting time targets for mental health trusts to achieve by 2020. These outline ministers' ambition to introduce the first ever access targets for mental health from next April as part of the department's plan to introduce "parity of esteem" between mental and physical health by 2020.

It is also reflected in calls by England's chief medical officer, Dame Sally Davies, for mental health needs to be more of a priority. Her annual report said mental illness led to the loss of 70 million working days last year – up 24% since 2009. As well as calling for greater emphasis on mental illness in the NHS, she also recommended that employers offer flexible working to people with mental health problems to keep them in employment and maintain regular contact during sick leave.

3.3. National sport scheme

A £2m programme using sport to improve the lives of people with mental health problems has been announced. It is hoped the scheme, run by the charity Mind with funding from Sport England, will help 75,000 people. They will be offered help to join sports clubs to take up a new activity or go to the gym as part of the project. I'm pleased that our Trust has already recognised the importance of physical exercise in supporting mental wellbeing.

3.4. Annual conference for physiotherapists

AWP's Head of Profession for Physiotherapy and Exercise Clare Leonard presented at this national conference on '*A positive experience for physiotherapists in engaging with a person with dementia*'. It covered the problems a physiotherapist may encounter when assessing and treating people with dementia and was positively received.

3.5. External awards

The winners of the Positive Practice finals will be announced on 23 October with four AWP teams making it to the finals - Substance Misuse Team, HMP Portland; the Walking Challenge and BoxFit Bristol.

Three AWP entries have also been shortlisted for the NHS leadership awards and I congratulate Angie Jakubowska, Eva Dietrich; Anthony Harrison and Bill Bruce Jones; and Lynda Hughes on this achievement.

LIFT Psychology has been shortlisted for this year's General Practice Awards for the category Clinical Team of the Year - Long Term Conditions. The winners are announced on 20 November.

3.6. Community Care magazine

The work that AWP's social work lead Phil Wilshire has been doing to promote social work within our Trust has been recognised by the Magazine's marking of World Mental Health day by including this in one of its five most popular stories about mental health social work practice.

4. Local round-up

4.1. Bristol Festival of Health

The two day Festival of Health organised by Bristol Health Partners and the Festival of Ideas, explored the big issues facing the NHS and health. AWP's Clinical Director for Bristol, James Eldred and Clinical Director for Specialised Services were part of an expert panel for a session in the Healthy Cities and Communities section of the event which looked at how to support mental as well as physical health. Initial feedback suggests that the Festival was a positive experience for those attending.

4.2. BANES

I would like to congratulate BANES CCG for its success in being shortlisted for the HSJ awards in the Managing Long Term Conditions for its innovative approach to improving care for patients with heart failure.

4.3. BBC Inside Out West

David Wilcox, clinical lead for our South West Veterans' Mental Health Service, has been interviewed for a BBC1 programme 'Afghanistan - The Homecoming' which is being shown as part of the Inside Out West series. The programme is being transmitted at 19.30pm on Monday 27 October, and looks at the physical and mental health support provision for service personnel returning from active war zones.

5. Trust update

5.1. Bristol & System Leader Governance

Further to a presentation to the Board at its last meeting on Bristol – further work has taken place on governance and system leadership. A bi-weekly assurance meeting with the Chair of Finance Committee and Associate Non-executive Director is to scrutinise the plans for finance, governance and staffing. Further development meetings with both the CCG and Partners have taken place to refine further the practical arrangements for system coordination and partnership working.

A paper to the November Board will present the final arrangements.

I am sorry to report that a recent interview panel was unable to appoint to the Bristol Mental Health System Leader role, which Rhona MacDonald has been filling on an interim basis. We are now reviewing our approach in conjunction with the clinical commissioning group and I would like to thank Rhona for agreeing to continue to fulfil the interim role.

5.2. Team of the month

Congratulations go to October winners HMP Bristol team in specialised services. The team has shown great resilience in providing support and services for prisoners who demonstrate more challenging and complex behaviours including drug and alcohol dependencies. The team recently passed a CQC inspection with flying colours with one of the inspectors saying "this is the best example of mental health care in prison I have ever seen".

Other nominees at the Quality Huddle were Swindon's Windswept unit, the BANES Intensive Team, Bristol's Acute Liaison Team, the modern matrons in secure services, South Wilts Intensive Team, North Somerset's Early Intervention Team and our Trust's Bank Team.

The winners each month are entered into the Team of the Year category at the staff awards. The 2014 team of the year announced at the Staff Awards earlier this month was STEPS.

5.3. Staff awards 2014

For the first time both the staff achievement and long service awards were combined in a single event held in Bath. Feedback suggests that those attending found it an enjoyable and worthwhile event and I would like to place on record my congratulations to all those who were nominated and won awards.

5.4. The Staff Friends and Family Test

This provides an important 'temperature check' as to how staff feel about the organisation. We ran the test for the second time at the beginning of September. The response rate increase from 19% in May/ June to 26% (967 responses) in September. Staff were asked to respond to 3 questions:

- 56% of staff agreed that care quality is the organisations top priority, compared with 70% in June
- 63% of staff would recommend the service their team provides to family and friends if they needed care, compared with 72% in June
- 42% of staff would recommend AWP as a place to work, compared with 52% in June

Individual reports have been shared with each locality and will be discussed by the Senior Management Team when they meet on 5 November. The Employee Strategy and Engagement Committee will review feedback on 3 November and a full report prepared for consideration by Board at its November meeting.

5.5. NHS staff survey

This national survey is in progress and for the second year all staff are being invited to complete the survey. The response rate to date is 16.1 % with five weeks remaining. A range of communication activity is planned build around the theme of "Have a Voice". This is an important opportunity for staff and I would urge everyone to complete the survey so that we have a comprehensive picture of staff opinion across our Trust.

5.6. Health and wellbeing

The first Health and Wellbeing Newsletter is being disseminated, designed to draw to promote healthy living to staff and to draw attention to the range of services available and initiatives being undertaken in our Trust.

5.7. Flu vaccinations

Our annual staff vaccination campaign was launched earlier this month with 45 clinics being held in 14 locations. The campaign runs until 27 November and I would urge all staff to take advantage of this opportunity to protect themselves and to reduce the risk of spreading flu to their families, colleagues, friends and service users.

5.8. AWP in Bloom

Windswept Unit and Amblescroft won this competition which has brought many benefits for service users and staff, including strengthening local relationships. I would like to thank those local businesses which donated equipment and seeds.

5.9. Julie Hankin

I am sorry to have to advise the Board that our Clinical Director for Wiltshire, Julie Hankin is leaving the Trust to take up the role of Medical Director for Nottinghamshire Healthcare NHS Trust. I am sure the Board will join me in congratulating Julie on her success and in thanking Julie for the contribution she has made, most recently as Clinical Director, but also throughout her time with the Trust.