

enabling and empowering people to reach their potential and live fulfilling lives

<b>Summary Report – Trust Board Meeting (Part 1)</b>	<b>Date: 26 September 2012</b>
<b>Report Title: Report of the Chief Executive</b>	
<b>Agenda Item: 09</b>	<b>Enclosures: none</b>
<b>Sponsor Chief Executive – Paul Miller</b>	<b>Presenter – Paul Miller</b>
<b>Report Author – Emma Roberts Company Secretary</b>	
<b>Report discussed previously at:</b>	<i>n/a</i>

Purpose of the Report and Action required		
To provide the Board with a briefing of the key issues arising since the last Board meeting in August 2012.	Approval	
	Discussion	X
	Information	

Executive Summary of Key Issues
<p>The period July to August 2012, has seen the Trust continue on its journey of improvement, focused around our three key areas of focus; namely ensuring the service user is at the heart of all we do; enabling effective clinical engagement, and listening to those with whom we have key relationships, be that carers, service users, commissioners, our employees, and regulators.</p>

Which Strategic Objective does this paper address	
A sustainable value for money business	Y
Excellent service user access and experience	Y
Excellent partnership working with other organisations	Y
Effective engagement and improvement in staff satisfaction	Y

Link to Fit for the Future Implementation Plan	
Objective	None specific

Corporate Impact Assessment	
Quality and Safety implications	None specific
Corporate Risk Register	None specific

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FGEB (Trust ALE replacement)	None specific
IG Toolkit	None specific
Equality Impact Analysis	None specific

### Recommendations to other committees

NA

### Recommendation/Decision

The Board is recommended to **note** the report.

## Report of the Chief Executive

### 1. Overview

- 1.1. The period July to August 2012, has seen the Trust continue on its journey of improvement, focused around our three key areas of focus; namely ensuring the service user is at the heart of all we do; enabling effective clinical engagement, and listening to those with whom we have key relationships, be that carers, service users, commissioners, our employees, and regulators.
- 1.2. In my role as Interim Chief Executive, I continue my rounds of meetings with all our key stakeholders; meeting service users and staff at our Board meeting at Sandalwood Court in Swindon; current and future commissioners from PCTs and Clinical Commissioning Groups across the patch; and preparing for a further meeting with the Department of Health about our path to FT. More about that follows in the Report of the FT Programme.
- 1.3. I have appreciated the ongoing, beneficial discussions with our current and future commissioners as we work hard to implement the Fit for the Future Plan, and to continue to improve our performance across our geography. Colleagues have worked extremely hard, and this is beginning to be evidenced in two ways. Firstly, our commissioners have welcomed the new approach we are taking; and appreciate that we are being open, transparent and clear about what we need to do to move things on. We have taken great care to listen to the needs and expectations of our current and future commissioners, and our Local Area Directors are working hard to develop and improve the way we can respond to these local needs. We need to keep up the good work.

### 2. Service Redesign

- 2.1. I reported in July that the Primary Care Liaison Service (PCLS) has been established in all 6 geographic areas covered by the Trust. Since early May we have transitioned across to the new model. We are working with our commissioners, listening to their views about how the PCLS model is 'bedding in', and discussing how the model can respond to specific local needs in some areas.
- 2.2. Vacancies in staffing remain a challenge in some areas. We are working hard to recruit, but we are still relying heavily on our bank and agency colleagues. This is an area which is receiving high levels of scrutiny from the Board and its Committees, and we are working hard to support Strategic Business Units whilst we try hard to fill these gaps as quickly as possible and acknowledge the strain that being unable to fill vacancies puts on colleagues.

### 3. Fit for the Future Programme

- 3.1. Over the summer months, the Executive Team have been leading the work to ensure we meet the requirements of the Fit for the Future Plan, which I introduced in my July report. The Board Committees are each monitoring the effectiveness of the implementation of the changes, and ensuring, on behalf of the Board, that the work is being delivered on time, and with the right results.
- 3.2. The Board wishes to monitor progress against the recommendations as part of the public Board meeting, to ensure appropriate transparency and accountability and a later report to the Board sets out the progress to date.

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### 4. Quality and Performance

- 4.1. As I mentioned above, we are continuing to work with our current commissioners in relation to assurance that we are making sufficient progress against quality targets in some of the most challenging areas. I would like to thank our commissioning colleagues for the opportunity to open up new areas of discussion and for the feedback in relation to how we are showing signs of improvement.
- 4.2. Our Local Area Directors have proved to be an essential link for our local commissioners and are well placed to be able to have effective dialogues about local commissioning needs and expectations now and in the future.
- 4.3. The work over the summer will enable us to continue to develop our overarching approach to performance management, ensuring that clinically valid indicators are agreed by clinicians, supported by clinicians – and that our teams feel that these indicators represent a means of measuring quality.
- 4.4. I reported in July that following the raising of concerns by colleagues working in one of our Wiltshire teams, a review into the way our patient record system (RiO) is used was taking place over the Summer led by a team drawn from across the NHS in the Southwest.
- 4.5. We have, in the last two weeks, received a draft of the report of the evaluation team, for review for factual accuracy. This has also given us an opportunity to be sighted on the areas of improvement recommended therein. We have started work to plan how we respond to the recommendations, and the required actions will be monitored and implemented alongside our existing programme of change, the Fit for the Future Plan.

### 5. Communications and relationship management

- 5.1. Throughout the summer months a range of activity has been undertaken to implement the Trust's recently approved communication strategy, the communication and engagement requirements of the Fit for the Future Action plan and a range of Trust projects.
- 5.2. Media relations activity has been dominated by coverage of the independent review report, CQC inspections and surveys, inquests and engagement activity with a range of proactive interviews being provided. The communications team worked with colleagues from Bristol City Council, NHS Bristol and other agencies in relation to the publication of the serious case review of Child K. Coverage of various court cases and disciplinary hearings by professional bodies in relation to former staff also took place. Discussions are taking place with a number of production companies re possible opportunities for some AWP services to be featured.
- 5.3. Communications with stakeholders has been supported by the production and publication of the FT Members Update, the introduction of Snapshot and publication of Ourvoice. The weekly Ourspace round-up has promoted a more diverse range of information about Trust activities, including good and bad news. Internally I have continued to write to all staff on an ad hoc basis on major issues.
- 5.4. Internal communications supported a number of staff surveys including those relating to clinical engagement, patient safety, diversity, staff and supervision.

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- 5.5. The communications team has also provided substantial support to a range of projects including the implementation of Rio 1.1, Inspire, Staff Awards, Pharmacy, Flu vaccinations as well as promoting various events such as the operations engagement meetings, Nursing Conference; the Violence, Anxiety and Coping conference; the Bristol Specialist Drug and Alcohol Service (BSDAS) Shared Voice event; and an ADHD workshop.
- 5.6. Stakeholder mapping workshops have been held this month with area directors and managers and more work will be undertaken as a result, particularly in identifying actions to be taken. The same workshops considered the usage of an information sharing system on Ourspace for senior managers.
- 5.7. Mike Relph is continuing to meet with local MPs and has recently seen for example John Penrose, James Gray, Stephen Williams, Claire Perry and Dawn Primarolo with the Chair and area directors where appropriate.

## 6. Compliance and Regulation

- 6.1. As I reported in my last report, we operate under a license from the Care Quality Commission (CQC) and that we participated in a planned inspection of our Community Services by the CQC. We have received the report of the review team, which showed that we had some work to do to ensure full compliance with some of the Quality Standards. We have submitted our plan detailing the work we will do to ensure compliance, back to the CQC. The implementation of this is being scrutinised in some depth by our Quality and Safety Board Committee.
- 6.2. The CQC additionally joined us in September to review our Learning Disability Service provision at our Lansdown Unit. We are awaiting the formal result of this review, but have been working, in the interim, closely with the CQC to ensure we respond to initial points raised.

## 7. Conclusion

- 7.1. It's continued to be an extremely busy time for me as Interim Chief Executive during the past two months, and I know colleagues have been working as hard. I would like to thank everyone again for their hard work and support, and urge you to continue this so we can demonstrate our 'fitness for the future' and continue to provide improved quality of service for our service users and carers.

## 8. Recommendation

- 8.1. The Board is asked to note the report.

Report for the Avon & Wiltshire Mental Health Partnership Trust Board – 2012-09-26		
For the Part 1 Session sponsored by the Acting Chief Executive		
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