

‘You matter, we care’

<b>Summary Report – Trust Board Meeting (Part 1)</b>	<b>Date: 26<sup>th</sup> June 2013</b>
<b>Report Title: Chief Executive’s report</b>	
<b>Agenda Item: BD/13/73</b>	<b>Enclosures:</b>
<b>Sponsor; Chief Executive</b>	<b>Presenter: Iain Tulley</b>
<b>Report Author: Head of Communications, Company Secretary</b>	
<b>Report discussed previously at:</b>	<i>n/a</i>

<b>Purpose of the Report and Action required</b>		
To brief the Board on matters of national and local interest and reports on the work of the Chief Executive	Approval	✓
	Discussion	
	Information	X

<b>Executive Summary of Key Issues</b>
<p>The report draws members’ attention to recent national and local NHS activity and reports on the work of the chief executive in the context of leading the organisation.</p>

<b>Which Strategic Objective does this paper address</b>	
Consolidate	
Integrate	
Expand	

<b>Recommendations to other committees</b>
n/a

<b>Recommendation/Decision</b>
The Board is recommended to <b>note</b> the report

## Chief Executive's report

### 1. Introduction

This report covers the period since the last Board, highlighting national and local NHS activity, as well as reporting on Trust issues not dealt with elsewhere on this agenda

### 2. National issues

#### 2.1. Chief Inspector of Hospitals

Sir Mike Richards has been appointed to this new role. The chief inspector and his team will sit within the Care Quality Commission. The post was created by the government in response to the findings of the Francis report.

#### 2.1. Changing Care, Improving Quality'

The NHS Confederation, National Voices and the Academy of Medical Royal Colleges has published a report calling for major change in the health service, with greater emphasis on healthcare provided outside of hospitals. The report, 'Changing Care, Improving Quality', states that the reorganisation of services is essential to provide sustainable care, but that service users must be involved from the beginning. The NHS must emphasise a whole-system approach to ensure change is not perceived as a loss.

#### 2.2. Consultation - health and social care regulation

The Care Quality Commission (CQC) has launched a consultation on a proposed regulation regime for the health service and social care. The proposals include a "tough and rigorous" Ofsted-style ratings scheme which would see hospitals given a single performance rating, and a set of eight "commandments of care" covering fundamental care standards.

#### 2.3. Carers

A report by a coalition of voluntary sector organisations to mark Carers' Week 2013 says carers in the UK "are being let down by a lack of support". Research for the report Prepared to Care? found that 81 per cent of carers were unaware of the help available to them, 61 per cent experienced depression and 92 per cent felt more stressed because of their caring role.

#### 2.4. Business development

A survey by the Mental Health Network shows that almost two thirds of NHS in-house mental health providers now also provide non-mental health services. Roughly half of mental health providers took on elements of community services provision from their local primary care trust under the transforming community services programme in 2010. 64 per cent of organisations said they currently provided non-mental health services while 88 per cent of those who did not, said they would be interested in doing so in the future.

#### 2.5. Physical restraints

Last week Mind published a report on the huge variation between health trusts over their use of restraints and called for an end to face down restraints. Figures showed that our Trust had an above average number of incidents involving physical restraints and there was criticism that we could not identify the number of face down restraints. The above average numbers arguably reflect the fact that we are a large Trust and that we have done a lot of work to encourage reporting so that we can ensure that all uses of physical

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restraints are appropriate. We are committed to keeping the number of physical restraints to a minimum and we have comprehensive training for all frontline staff to ensure they have the knowledge and skills to ensure that any physical restraint is appropriate and proportionate and does not harm the individual being restrained. From the beginning of this financial year, our new electronic reporting system enables us to gather statistical data on some of the areas covered in the Mind report.

### 3. Trust

#### 3.1. Sutherland Report

As the Board is aware Sue Sutherland, who wrote the highly critical report on the Trust which was published last year, recently conducted a follow up visit at the request of the Trust and the NHS England Local Area Team for Bristol, North Somerset, Somerset and South Gloucestershire. In a positive report, the authors described the Trust as “open, honest, transparent, and supportive and focussed on the delivery of high quality care” and “completely different and unrecognisable from our previous visits in a very positive way.” While there is still much to do to make our Trust one of the best performing mental health trusts in the country, it was good to see independent recognition that we were on an upward trajectory.

#### 3.2. HMP Bristol inspection

Excellent feedback was received from an inspection by Her Majesty's Chief Inspector of Prisons and the Care Quality Commission. This was a full unannounced inspection of the prison as a whole however, as the provider of primary and secondary mental health and psychosocial substance misuse services, our service was also inspected. It was noted that we provided a well managed, well integrated and comprehensive service within the prison and several aspects were described as excellent.

#### 3.3. Views sought in national inpatient survey

For the fifth year, AWP is again participating in the national inpatient survey with more than 450 service users who had a stay of at least 48 hours on an acute ward between 1 July and 31 December 2012 being asked to take part. Questionnaires have been sent to them seeking information about various aspects of their care, including admission and discharge, the ward environment, relationships with staff and the care they received. The survey is being administered by the independent survey provider, Quality Health, and is completely confidential.

#### 3.4. Carers Week

The important role of carers was celebrated at events in Chippenham and Bristol. Both the chair and I attended the Chippenham event which was attended by around 25 carers and staff. In Bristol, an event organised in partnership with Rethink and social services attracted over 45 people including carers, professionals and students

#### 3.5. Suicide prevention conference

Sixth Annual Suicide Prevention Conference took place last week, entitled 'Interventions for People at Risk of Suicide' Keynote speakers were Professor Rory O'Connor, University of Stirling and President-Elect of the International Academy for Suicide Research and Madeleine Moon, MP, Chair of the All Party Parliamentary Group on Suicide and Self Harm Prevention.

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### 3.6. Bristol and cultural change

I want to highlight the major initiative that has been launched by our Trust in Bristol to better understand and be better able to meet the needs of the city's diverse communities. In addition to strengthening our expertise in diversity via the secondment of Bristol City Council's senior programme manager Marvin Rees to the Trust, 12 senior clinicians including all members of the locality management team are working with representatives from agencies such as Off The Record, SARI and Nilaari to examine AWP's approach to culture and difference in the city and to plan changes in how AWP's services in Bristol approach and respond to diversity. The programme will include visiting faith centres across Bristol, meeting faith leaders and representatives of local communities, as well as hearing feedback from service users about access and use of mental health services for people from diverse backgrounds. The team has already had their first series of visits, spending a day visiting faith centres and community leaders including meeting faith leaders at a Hindu temple, a Muslim mosque and a Sikh gurdwara where the specific needs and issues facing these communities were discussed. In addition the team has met with representatives from the Somali and the gypsy and traveller communities.

### 3.7. Resources directorate

I mentioned in my last report the consultation that was taking place over a proposal to appoint a Director of Resources with responsibility for finance, procurement, HR, business development, IM&T, estates and audit. There was positive support for the new model including proposals to move more of the transactional and operational delivery of some of functions, such as facilities management and some elements of HR, to the locality delivery units. Some concern was expressed that such a major change would distract from current goals and so I have agreed to postpone implementation until the next financial year. This will enable changes to be planned and implemented effectively with the minimum of disruption.

### 3.8. Interim Programme Director – Development

I am delighted to inform the Board that our Head of Innovations, Rachel Clark has been appointed to this new role on a 12 month secondment. The programme director will support organisational development and provide leadership, vision and inspiration on all aspects of innovation, strategic development and transformation.

### 3.9. Staff Awards

Nominations close at the end of the month for our annual staff awards. Now in its fourth year, the awards are an opportunity to celebrate outstanding contribution of our staff. Already more than 140 nominations have been made for the seven categories.

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