

'You matter, we care'

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| Trust Board Meeting Part 1 | Date: 26 th February 2014 |
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| Title: | Report of the Foundation Trust Steering Group |
| Item: | BD/13/342 |

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| Executive Director lead and presenter | Tony Gallagher – Trust Chair Emma Roberts – Director for Corporate Affairs, Company Secretary |
| Report author(s) | Moira McMurran – Foundation Trust Project Manager |

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| History: | <i>To report to the Board, the work of the Foundation Trust Steering Group, in relation to the progress of the Trust's Foundation Trust Journey.</i> |
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| This report is for: | |
| Decision | |
| Discussion | |
| To Note | x |

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| Executive Summary of key issues |
| <p>1.1. This report outlines the progress made on reviewing the FT work programme and structures to deliver a sustainable, licensed NHS FT. This is the report of the FT Steering Group, the strategic working group with delegated authority on behalf of the Board, to direct the progress of the FT application.</p> <p>1.2. The Executive Team is responsible for ensuring delivery of the FT work programme and that all risks to this are identified, managed or mitigated. An FT Risk Register is in place to support this.</p> <p>1.3. The FT Steering Group has responsibility for the strategic leadership of the FT programme, and oversees the work of the FT Delivery Group which is part of the new project methodology to manage the FT application and assessment process.</p> <p>1.4. Trust membership continues to be on, and above target with 17,027 members; the focus on membership continues to maintaining this figure, rather than on growth.</p> <p>1.5. Discussion around Governor election timetable to be brought to Board Seminar.</p> <p>1.6. BGAF/QGAF refreshes to be tested by the Board in March 2014.</p> |

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| 1.7 | IBP rewrite currently taking place. |
| 1.8 | Chief Inspector of Hospitals regime update. |
| 1.9 | Alternative options to Foundation Trust status. |
| 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. Background

1.1. This report brings forward key highlights from the FT Steering Group, which met on 11th February 2014.

2. FT Programme Leadership

2.1 The FT Steering Group was convened by the Board, and has met regularly during the year. The role and function of the group is to oversee:

2.1.1 the NTDA and Monitor application processes - and related guidance

2.1.2 external assessment requirements and reports including the monthly oversight process

2.1.3 the status/progress on the FT work programme including the Quality Governance risk score

2.1.4 Board preparation for the NTDA and Monitor assessment process

2.2 The group has extended its membership to include the whole Executive Team.

3. FT Timeline and NTDA Status Update

The Trust continues to be involved in a busy and wide ranging programme of activity meaning that AWP is progressing along the FT journey: key milestones achieved are TDA National Desktop Review, Mock Board to Board, and Clinical Quality Visits, previously conveyed in January Board Report.

3.1. Mock Board to Board Meeting – Friday 13th December 2013.

The Trust Board attended a Board to Board meeting with the TDA in Taunton. The role of the TDA is not only to hold the Trust to account, but also to support us in maximising our potential for delivering high quality sustainable services, and to achieve Foundation Trust status. The purpose of the meeting was a development

opportunity as part of NHS TDA's assurance process in support of our NHS Foundation Trust application.

3.1.1 Following the meeting, verbal feedback was provided to the Chief Executive and the Trust Chair and included a discussion around the challenges that AWP is facing, and for the need for improvement in certain areas. These are in the main:

- Overall Board Interaction
- Quality and Governance
- Financial Viability
- Delivering Sustainability and External Relations

3.1.2 The Chief Executive confirmed to the TDA that the Trust would wish for as early as possible Chief Inspector of Hospitals visit, and TDA confirmed that they will recommend that AWP be put forward for the visit in Quarter 1 of 2014/15. Subject to a 'good' or 'outstanding' rating, TDA will move forward with the Trust in supporting our final FT application to go proceed to Monitor stage of the process. This was endorsed in a written feedback provided by Steven Dunne of TDA to the Trust Chair in a letter received 29.01.14.

3.3 Clinical Quality Visits – 17th January 2014.

Three sites were selected by TDA for their visits and included inpatient and community settings. These were at Bristol, Swindon and North Somerset. The schedule for the visit involved meeting the Clinical Leadership Team at each site, a staff focus group involving a wide and representative group of staff at each site, and visits around clinical sites.

Generally the feedback was really positive and initial feedback suggests that TDA were impressed with openness of staff & willingness to share their thoughts and feelings with them.

Of the areas where development needs are identified, these can be readily addressed, and TDA has offered support where needed which the Trust is keen to accept..

3.3.1 At the same time TDA National Leads met with Trust Leads around Medicines Management and Infection Control.

3.3.2 Next steps involve a peer review report, and this together with the imminent Inspector of Hospitals visit will help inform the progress of the FT journey. A written report is being finalised and its outcome is anticipated shortly.

3.4 QGAF/BAGF Refresh.

The Board undertook a self-assessment of its Governance arrangements in accordance with guidelines, in Quarter 2. Following an independent assessment from auditors KPMG, the initial self-assessment scoring was 4.5 – the optimum score should be 3 or less. However it was understood that the Trust would be able to demonstrate improved Quality performance and embeddedness be reviewed in March 2014. A detailed improvement plan was produced, and work is underway to re-evaluate the evidence and improvements made, to be considered by the Board in March. The Board should note that this is not a complete re-refresh, rather that the areas to be tested were those where our initial performance and supporting evidence was weak.

3.5 IBP Rewrite

In accordance with the requirements as set out by Monitor and TDA and outlined in the Business Planning Cycle, the Trust is currently refreshing its 5 year Integrated Business Plan and 2 year Operational Model. A draft version will be available to be reviewed in March Board.

3.6. Anticipated Chief Inspector of Hospital Visit

It was indicated by TDA following the Board to Board in December, that they were happy to recommend AWP's progression to Wave 2 of the Chief Inspector of Hospitals visits, howbeit with the caveat that this was not an automatic guarantee, since this was the decision of CQC using specific criteria, and not a TDA driven decision : we have recently learned that AWP is not to be included in Wave 2, although yet to be confirmed by CQC.

3.6.1 Mock Hospital Inspections

In readiness for the above, a regime of Mock inspections is being devised and led by Kristen Dominy , Executive Director for Operations, and Dr Julie Hankin, Clinical Director Wiltshire LDU, supported by the Quality Academy. The proposed approach will be a combination of the well- received 15 Step Method, supported by peer review. An operation- led initiative, clear schematics around trust and wards will be communicated shortly.

4. Membership Update

4.1. The emphasis for the membership team will be on reengagement, retention and maintenance of these numbers, and in reinvigorating interest in the benefits to members in becoming a governor. Trust membership remains to be on, and above target with 17,027 members.

4.1.2 A Membership newsletter will shortly be issued with the principal purpose of reconnecting and engaging with our members, inviting them to participate in a short a survey around communication, contact and involvement and their preferences, and promoting the role of Governor.

5. Governor Election process

5.1. Plans exist around the process for Governor elections and high level versions are attached as appendix for illustration. The start date for Governor elections process was initially proposed to commence in April 2014, however, following recently revised advice provided by TDA and Monitor suggests that aspirant Trust should **not** commence with the elections process until advised to do so by Monitor. Although we note the TDA and Monitor advice in relation to governor elections, it is the Board objective to move forward as planned, and as soon as possible.

6. Foundation Trust – other options

6.1. The Chair has requested that a discussion take place around alternative options to Foundation Trust status

7. Recommendations - the Board is recommended to note the content of this report.