

**'You matter, we care'**

Board (Part 1)	Date: 30 July 2014
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Title:	Update on actions in response to the Francis Report
Item:	BD/14/107

Executive Director lead and presenter	Director of Organisational Development
Report author(s)	Director of Organisational Development

History:	<i>n/a</i>
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This report is for:	
Decision	X
Discussion	
To Note	X

Executive Summary of key issues
<p>To maintain focus on the main findings and recommendations of the Francis Report AWP Trust Board receives an update every six months describing progress against key recommendations. This report, alongside assurance received through Board committees, provides Board with assurance that the Executive Team is sighted on the recommendations of the Francis Report and the four key reports that followed.</p> <p>The report to Board in January 2014 demonstrated that, in terms of integrated governance and focus on quality, the Board is well placed to demonstrate that appropriate focus and attention are given through the integrated assurance framework, the work of Board Committees and the availability of, and focus, upon quality information. The report highlighted embedded cultural change as the key area of focus.</p> <p>Recommendations approved by Board in January have been implemented. This report highlights remaining areas of work that will focus our efforts in the next nine, months.</p> <p>Board is asked to <b>note</b> and <b>approve</b> planned actions.</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	
We will be future focussed	

## 1. Introduction

The Board receives a report every six months highlighting progress against the key recommendations of the Francis Report. The report received in January broadened the focus of the report to include recommendations from four key reports that followed:

- Review into the quality of care and treatment provided by 14 hospital trusts in England; Professor Sir Bruce Keogh KBE, July 2013
- An Independent Review into Healthcare Assistants and Support Workers in the NHS and social care settings; Camilla Cavendish, July 2013
- A promise to learn – a commitment to act; Professor Don Berwick & National Advisory Group on the Safety of Patients in England; August 2013
- A Review of the NHS Hospitals Complaints System: Putting Patients Back in the Picture; Right Honourable Ann Clwyd MP and Professor Tricia Hart, October 2013

The report offered assurance that as part of on going transformation activities, AWP had addressed key recommendations around quality reporting and integrated governance. The report highlighted the area that requires maintained activity and focus is embedded cultural change.

As a Trust we maintain a rigorous focus on culture and staff engagement through the Organisational Development Programme, Enabling Excellence, and monitor staff experience through IQ data (sickness absence, supervision and appraisal rates), the annual staff survey and the recently implemented Staff Friends and Family Test. The Employee Strategy and Engagement Committee maintain oversight for this work on behalf of Board. Staff Survey results are reported directly to Board.

Board receives assurance on matters of quality through the Quality and Standards Board Committee and through direct reporting to Board through the monthly Quality and Performance Report.

Recommendations approved by Board in January have been implemented. This report highlights remaining areas of work that will focus our efforts in the next 12 months.

## 2. Current position

The Director of Organisational Development Oversight maintains oversight for cultural change, staff experience and engagement, and works closely with the Clinical Executive to ensure comprehensive attention is maintained to the key themes and recommendation of the reports described above.

As recommended in January, responsibility for tracking progress and implementation has been devolved to a senior manager from the Nursing and Quality Directorate. Evidence for actions and focus on the key recommendations has been compiled using the template agreed by Board in January. Working with stakeholders across the Corporate Directorates, planned actions in a number of themes have been identified and timescales mapped. The Executive Team has scrutinised this information and reports, by exception, the planned areas of work for the next nine months.

## 2.1. Planned actions

### Developing our unregistered workforce/Certificate of Fundamental Care:

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|---|----------------------------|----------|
| - Practice based competence framework for unregistered practitioners to be developed                                  | Nursing and Quality        | 30-11-14 |
| - L&D portfolio will be adapted in light of pilot outcomes. Roll out of 'Certificate of Fundamental Care', March 2015 | Organisational Development | 31-03-15 |

### Openness and Transparency:

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|---|----------------------------|----------|
| - 360 Organisational Review planned to systematically gather feedback from key stakeholders | Organisational Development | 30-09-14 |
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### Language Proficiency:

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|---|-----------|----------|
| - Identify and implement language proficiency checks as part of recruitment process         | Resources | 30-11-04 |
| - Incorporate language proficiency into competence framework for unregistered practitioners | Resources | 30-11-14 |

### Common Culture/ Leadership:

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|---|----------------------------|----------|
| - Introduce values based recruitment  | Resources                  | 30-11-14 |
| - Development of leadership and management programmes e.g. ILM 5 accredited programme for ward managers and team leaders (collaboration with UWE) | Organisational Development | 31-12-14 |

### Learning from incidents:

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|--|---------------------|----------|
| - Internal thematic review in two parts<br>1. Benchmarking UD data relative to NCI data nationally<br>2. Analysis of lessons learned, SDPs/CDPs and recommendations. | Nursing and Quality | 31-12-14 |
| - Patient Safety Team proposed to support teams to embed improvement actions following SUIs. Consultation as part of Quality Academy review.                         | Nursing and Quality | 30-09-14 |

### Responsibility for, and effectiveness of, healthcare standards:

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| - Clinical Networks to set Trust wide standards and promote service innovation | Nursing and Quality | 30-09-14 |
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**Our values: PRIDE – passion, respect, integrity, diversity, excellence**

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and improvement

### Value input from Junior Doctors:

- Initiate process for investigating concerns raised by junior doctors. Process reflects GMC requirements for investigation of concerns raised by junior doctors and will link into AWP service SUI investigations. Medical 31-10-14

### 3. Board Assurance

On a routine basis Board receives assurance that issues of quality and culture receive appropriate attention via the Board Committees; principally Quality and Standards and Employee Strategy and Engagement Committees.

Board committees scrutinise quality data, monitor relevant policies and receive 'deep dive' reports from Locality and Specialist Delivery Units. Board Committees, as part of the Integrated Assurance Framework, are the key assurance mechanism for Board with respect to the findings of the above reports.

Alongside the work of the committees and regular reports from the Chair of each committee, Board receives direct reports on quality and performance data and staff survey results.

The current report allows Board, on a six monthly basis, to maintain a specific focus on the themes and recommendations of the Francis Report and subsequent reports referenced above.

The Executive Team has scrutinised the collated evidence and reports to Board, by exception, the planned areas of work for the next nine months.

### 4. Recommendation

Board is asked to note the report and approve the planned actions described.