

# REPORT TO THE TRUST BOARD – PUBLIC 9 MAY 2018

Title	Chair's Report
Author	Marie Gabriel: Trust Chair

# Purpose of the Report:

The report provides feedback from the Council of Governors and outlines the Chair's most significant activities.

# **Summary of Key Issues:**

To receive information and insight from Governor discussions

Strategic priorities this paper supports (Please check box including brief statement)

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Improved patient	$\boxtimes$	The report highlights a clear focus on improving patient experience as
experience		part of our annual plan priorities and through the NEDS visits.
Improved health of the	$\boxtimes$	The Joint Council of Governor and Board meeting considered how the
communities we serve		Trust could address the impact of poverty on health
Improved staff	$\boxtimes$	Ensuring Staff Governors are supported to effectively discharge their
experience		responsibilities will help to ensure the Trust's strategies are informed
		by and responsive to staff.
Improved value for	$\boxtimes$	Maintaining effective relationships and learning from best practice will
money		support our aim to provide sustainable, integrated services

Committees/Meetings where this item has been considered:

Date	Committee/Meeting
15/03/18	Council of Governors and Trust Board Joint Meeting

Implications:

Equality Analysis	The report highlights national and Trust work to improve equality, which will lead to a refresh equality, diversity and human rights strategy.
Risk and Assurance	External stakeholder engagement and shared learning assists in mitigating risks
Service User/Carer/Staff	The report highlights how our annual plan should improve service user experience and address issues of poverty and health for both our communities and our staff.
Financial	There are no financial implications above existing budgets
Quality	NED visits and attending national and regional events help to ensure an understanding of our services, of our context and how we may best respond.

### **Supporting Documents and Research material**

**Glossary** 

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Abbreviation	In full	
NEDs	Non-Executive Directors	

#### 1.0 Background/Introduction

1.1 The report provides feedback from the Council of Governors' meetings and outlines the Chair's and Non-Executive Directors' most significant activities.

#### 2.0 Council of Governors

- 2.1 The April 2018 Council of Governors' meeting was the annual joint meeting between the Council and the Trust Board.
- 2.2 At the meeting we jointly considered the relationship between poverty and health. Richard Fradgley outlined the challenges faced by our populations and highlighted that there are a variety of assets within our local communities, partner organisations and population themselves to tackle such challenges. The meeting considered what ELFT's contribution could be, as a provider of mental health and community health services. A wide-ranging discussion raised the following suggestions:
  - Support health improvement and prevention behaviours with our service users and staff.
  - Partnership working with pre-school, families, schools and educational institutions
  - Become an accredited living wage employer / work with a Credit Union to support staff
  - Work with housing associations and local authorities to develop and access affordable homes for staff
  - Establish a volunteering scheme for staff, so that staff receive paid time-off to volunteer within the local community and also offer study days for leaders of local companies to study with us
  - Use social prescribing to involve and capacity build community organisations and the voluntary sector
  - Employ people with mental health and long-term conditions within the Trust
  - Enhance our work on employment of services users within the Trust
  - Focus on wellbeing not just mental health, and partner with the local authorities on such a strategy
  - Consider the obstacles, such as data and what must be done differently, and plan accordingly
  - Identify the big three self-help solutions that are happening already and support their delivery in homes, schools and the workplace.
- 2.2 Mason Fitzgerald provided the strategic themes arising from the Annual Member Consultation events, which sat comfortably under two headings: Improving the Patient Experience and Improving the Health of Our Communities. The individual priorities under each will be used to shape the Trust's strategy over the coming year and it was reassuring to note that population health and integrated care were consistent priorities for our Governors, Members and Staff: further illustrating that our new ambition is particularly relevant and meaningful.
- 2.3 The Council agreed the Board and the Nominations and Conduct Committee recommendation that we should strengthen the Trust's governance arrangements by appointing Mary Elford as the Vice Chair, Bedfordshire and Luton. These new

arrangements are in addition to those we already have in place. I am pleased to report that Mary is already active and has attended a number of meetings as part of her new responsibilities. In addition she has agreed a terms of reference for the Bedfordshire and Luton Strategic Delivery Group, which will be responsible for gaining assurance on the delivery of the Trust's strategy in the area.

- 2.4 Finally, you will recall that the Significant Business Committee had developed a set of six criteria against which the Trust and the Committee itself could consider opportunities. They applied the criteria to our consideration of the Bedfordshire Community Health Services contract and were pleased to report that they had been very effective and will therefore guide their future considerations.
- 2.5 As part of the Governor Qi Impact Project, a separate meeting was held with Staff Governors to consider how they can be better supported to discharge their Governor responsibilities. A number of ideas, including better promotion of the Staff Governor role, a regular Staff Governor and Executive meeting and a Staff Members working lunch or supper with Staff Governors were highlighted. Norbert Lieckfeldt, our new Corporate Governance Manager, will ensure that the full range of ideas will be considered by the Qi Project Group and plans put in place for their implementation. I take this opportunity to formally thank Norbert for his work as Lead Governor and to congratulate him on his appointment. I am very pleased that we are able to retain and fully utilise his skills and talents.

#### 3.0 Chair's Activities

- 3.1 The Council of Governors' theme of poverty, health and inequality has been constant in other areas of my work. I am now a member of an advisory group to the Synergi Collaborative Centre, which is a five-year research-based initiative. Its aim is to examine, through co-production, how the multiple disadvantages experienced by ethnic minority people can be better understood and tackled. It is anticipated that the result will be a strong evidence base to inform and guide service reform.
- 3.2 Equality, diversity and human rights have also been a consistent theme over the last two months. This has included me working with our network leads and executives, along with Dr Habib Naqvi, to begin to shape our own refreshed strategy in this area. It also included celebration of International Women's week with an ELFT interview and a presentation to external partners. Finally, it has involved me in speaking at a NHSI Masterclass and the National Freedom to Speak Guardian conference.
- 3.3 Working in partnership is my final theme. I have been involved in a number of discussions about integrated care. This includes conversations about governance and practical implementation with our individual boroughs as they design their Integrated Care Systems. It also includes a focus on the role of mental health service providers in integration / STP with my fellow Mental Health Network Board colleagues.
- 3.4 The final partnership I would like to highlight is our one with Norfolk and Suffolk Foundation Trust. Norbert and I visited the Trust together in March. I had a useful conversations with their NEDs, service users, carers and joined Norbert for a

conversation with their Governors. It was a real opportunity to understand the challenges they have faced and how we could learn from this.

- 3.5 The NED undertook a group visit to our teams providing health care for older people. NEDs were especially interested to visit these services, as they have recently been restructured and brought into the local adult mental health services, and we wanted to hear from staff and patients how these new arrangements were working. Older people's services also depend on excellent local integration of care between agencies, and as this is a priority for the Trust in its new strategic direction NEDS were keen to explore these issues too. Jenny and Mary have provided the following overview of the results.
- 3.5.1 Non-Executive Directors were very impressed by the knowledge and skills of the staff they met, and the dedication and commitment to improving care for this patient group, who can be especially vulnerable. There was much to be proud of, including examples of good integration with social care; creative approaches to supporting patients and their families in their day to day lives; evidence of holistic person centred care; and a fundamental commitment to quality improvement.
- 3.5.2 However, the NEDs identified some cross cutting themes that they wish to bring to the Board's attention. In addition, a more detailed view has been shared with the Executives.
  - o Workforce: There are recruitment difficulties for some posts and the need to continue to build relationships with universities across our geography. The Trust also needs to consider aligning banding and ensure conversations are held with commissioners to meet nationally expected standards of care.
  - Learning: It is important to ensure there is time for shared learning across the five geographies, to embed the new integrated structure effectively and to pursue academic relationships and work. As part of the embedding of the new structure it is important to understand the specific needs of the different groups of patients and what they may need in terms of skill set and approach.
  - Integration: There are variable degrees of integration success with primary care, acute care and local authorities. NEDs are aware that there is much work locally and through the STPs to improve integration and it would be useful for us to further consider have we can improve on the links between partners and community services. As always, resources to support integration can be problematic, for example bed availability or robust alternative arrangements for home care and the availability of Continuing Care Funding.
- 3.6 I finish my report by saying thank you to all those staff, Governors and service users who have been involved in our recent CQC well led inspection. I know that all seized the opportunity to highlight what we do well and what we are doing to improve things further. We expect the results later this month.

## 4.0 Action Being Requested

4.1 The Board is asked to **RECEIVE** and **NOTE** the report.