

REPORT TO THE TRUST BOARD - PUBLIC
11 JULY 2018

Title	Chair's Report
Author	Marie Gabriel, Chair

Purpose of the Report:

The report informs the Board of key points arising from the Council of Governors discussions and the Chair's most significant activities including the outcome of Non-Executive Director visits to services.

Summary of Key Issues:

To receive information on Governor decisions and recommendations.

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

Improving the patient experience	<input checked="" type="checkbox"/>	Working in partnership with local commissioner and NHS Confederation to discuss people participation enables the Trust to learn from and impact on national improvements that involve both patient experience and patients leading change
Improving the health of communities	<input checked="" type="checkbox"/>	Developing and maintaining effective partnerships with local leaders will result in additional joint work to improve population health
Improving staff experience	<input checked="" type="checkbox"/>	NED visits to services both identify ways to improve staff experience and illustrates that staff views are valued by the Board
Improving value	<input checked="" type="checkbox"/>	Strengthened Governor impact improves community voice and accountability, supporting our services to be more responsive, and thereby offer better value.

Committees / Meetings where this item has been considered:

Date	Committee / Meeting
17 May 2018	Council of Governors

Implications:

Equality Analysis	There is the real potential with local and national political commitments for ELFT to use STP arrangements and national networks to reduce health inequalities and secure parity of esteem, particularly for our most excluded communities.
Risk and Assurance	External partner engagement and the Governor informing of Board decisions assists in identifying and mitigating risks.
Service User / Carer / Staff	Non-Executive Director service visits enable an informed understanding of the experiences of our staff and service users thereby assisting the Trust to identify best practice and remove barriers to effective care.
Financial	Whilst there are no current financial implications, the report's advice that we proactively engage in the 10-year plan priorities may lead to

	future opportunities.
Quality	The new Governor emphasis on how we can improve day to day experience of care will inform future discussion on how we can systematically improve the quality of care.

Supporting Documents and Research material

a.
b.

Glossary

Abbreviation	In full

1.0 Background/Introduction

- 1.1 This report informs the Board of the discussions of the Council of Governors so that the Council view can inform Board decisions. It also provides information on the Chair's main activities and the results of Non-Executive Director visits to services, supporting the discharging of the Board's commitment to high quality services and public accountability

2.0 Council of Governors

- 2.1 The key strategic item discussed at the May meeting of the Council was improving the experience and satisfaction of staff based on the Trust's Staff Survey results. The outcome of this discussion is already incorporated within the Staff Survey report that the Board is to consider later on this agenda and so are not repeated here.
- 2.2 The meeting also included a 6-monthly report on the impact of Governors, which was provided as the result of a change idea from the Council's second QI Project. This Project had set itself the aim "to increase the number of Governors who are 'satisfied' or 'very satisfied' with their individual and the Council's impact to 60% by June 2018". The Project had been an overwhelming success and a range of change ideas have now been mainstreamed, from the meeting layout to a buddying system for new Governors. One area where work is continuing is with Staff Governors who have the same responsibilities as the rest of the Council but need some further work to enable them to better communicate with their constituency. Examples of Governor included our joint meeting on poverty and health, the new criteria for considering new opportunities and their positive impact during the CQC inspection. Finally, the Council of Governor annual improvement plan was considered with most elements achieved. The CQC itself commented on the improvements in the Council since their last visit.
- 2.3 The Council received presentations from candidates for the positions of Deputy Chair and Assistant Deputy Chair of Council which were very impressive. The election has now been completed with the result to be approved by the Council at

its July meeting. An update email with the result will be sent to the Board once the result has been confirmed.

- 2.4 Finally, two items raised under Any Other Business reflect a desire on behalf of Governors for the Trust to consider how to support great care on a day to day basis. The ideas put forward included participating in the 'Hello, my name is...' Campaign and simply summarising and then purposefully promoting what we mean by high quality care.

3.0 Chair's Activities

- 3.1 Non-Executive Director Group Visits – The NEDs have undertaken two visits since the last Board meeting, one to the Tower Hamlets Neighbourhood Care Team and the other to Bedfordshire services.

- 3.2 The neighbourhood Care Team is a pioneering nurse led model of delivering community health services based on successful work in Holland, which ELFT is piloting with Tower Hamlets Clinical Commissioning Group. Whilst the evaluation of the pilot is yet to take place there were clear indications of increased satisfaction for nurses who were being provided with autonomy to return to provide complete care, from patients who were receiving more responsive care and from GPs who value the increased input of district nurses. The main themes arising from the visit to the Neighbourhood Care Team are as follows:

3.2.1 Parking whilst visiting patients

3.2.2 The benefits and importance of nurse led prescribing

3.2.3 The need to formally evaluate the service and consider wider implementation of the model

- 3.3 The second Non-Executive Director Group visit to Bedfordshire included Fountain's Court, Cedar House, the Archer Unit and Bedford Health Village. The main themes arising from the visit to Bedfordshire services are as follows:

3.3.1 Impressive leadership of these services and the staff dedication to patients, which was leading to patient satisfaction, as was made clear by the patients spoken to at Fountain's Court.

3.3.2 Reported difficulties in maintaining sufficient staffing levels at Fountain's Court and planning for upcoming staff retirements at the Archer Unit

3.3.3 The time spent on organising discharge and step-down care, for Cedar House and the Archer Unit.

3.3.4 The need to continue to address IT and estates issues at the Archer Unit, following the transfer of the services to ELFT on 1 April

- 3.4 The Non Executives noted that there is a real opportunity for the Trust to take forward our new ambition of integrated care in Bedfordshire, achieving this within our own services and also, particularly within Bedford Health Village, developing new models with partners.

- 3.5 The Non-Executives will undertake a group visit to Forensic Services just before the actual Board meeting so a verbal update will be provided.

- 3.6 I undertook an individual visit to Newham Community Mental Teams. I was impressed with the range of services, dedication and desire to improve. The key themes raised were as follows:
- 3.6.1 The quality of the estate, including the impact of a recent flooding.
 - 3.6.2 The speed of the IT system
 - 3.6.3 Clarity about the potential move to another site
 - 3.6.4 Impact of service changes due to CRES
 - 3.6.5 The need to have local plans to attract and retain staff
 - 3.6.6 Service users would like more flexibility with depot timings
 - 3.6.7 The need for a recovery college and increased involvement in people participation activities
- 3.7 Thank you to all staff and service users who have kindly welcomed us and who have been so open about their successes and challenges.
- 3.8 All of the issues above have been fed back to the executive team to be addressed in line with feedback from executive walkabouts.
- 3.9 ELFT continues to share its experience with the wider NHS. It was well represented at the NHS Confederation Annual Conference, where in partnership with Newham CCG and West Ham we provided a Patient Participation Stand, attracting much interest including from Simon Stevens, the Chief Executive of NHS England. We also jointly delivered a successful workshop on the same theme. I also participated in a main stage equality and diversity panel, our Chief Nurse presented on our work with the Carter Review and we both participated in a Podcast. We are now considering how to respond to the interest all this work has generated. Separately, I also presented, along with Dr Farid Jaber and Andy Cruickshank, at the inaugural Isle of Wight NHS Trust's Clinical Senate. My thanks to Andy and Farid and, as a result of our joint input the Trust is considering how best to take forward this burgeoning partnership.
- 3.10 There have been political changes since we last met. Our local elections produced a new Mayor in Newham, Rokhsana Fiaz, and I have met with both her and the new Lead Councillor for Health and Social Care who is to visit our services. Our Hackney and Tower Hamlets Mayors remained in power, and in Tower Hamlets Councillor Denise Jones continues to be the lead Councillor for Adults, Health and Wellbeing, whilst in Hackney, the Deputy Mayor, Feryal Demirci, will now lead on health. I am pleased that in all 3 Mayoral manifestoes achieving healthier boroughs and working with the NHS to do so were key priorities.
- 3.11 Nationally, there has been the announcement of a five-year funding settlement for the NHS which is, on average, 3.4% above inflation that equates to £20.5bn more revenue. In exchange the NHS is tasked with developing a new 10-year plan, via an Assembly containing strong clinical leadership that will secure major improvements in mental health and cancer care. This includes potentially new clinical access standards for mental health. During her speech, which was attended by Mary Elford on behalf of ELFT, the Prime Minister also identified 5 NHS priorities. Putting patients at the heart of care delivery; empowering the workforce to deliver the future; harnessing the power of innovation; a focus on prevention; and true parity of esteem between mental health and physical health.

Finally, the Prime Minister has signalled that legislative reform may be considered to remove any barriers to progress. ELFT is in a good position to respond to the challenges set out by the Prime Minister but must also vigorously promote system wide solutions that support the strengthening of community and primary care services where most care takes place and that truly secure parity between physical and mental health

- 3.12 Finally, I take this opportunity to thank all staff, service users, carers, Governors, partners and Board colleagues whose hard work and determination have led to us not only retaining our outstanding rating with the CQC, but making improvements in many areas.

4.0 Action Being Requested

- 4.1 The Board is asked to **RECEIVE** and **NOTE** the report for information