

REPORT TO THE TRUST BOARD: PUBLIC
30 January 2020

Title	Chair's Report
Author	Marie Gabriel

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 Non-Executive Director visits to services.

Summary of Key Issues

To receive feedback on Governor discussion and key strategic points arising from Chair and Non-Executive Director activity.

Strategic priorities this paper supports

Improved experience of care	<input checked="" type="checkbox"/>	Council of Governor focus on discharge and transition will assist the Trust to improve experience of care at critical points in the patient journey
Improved population health outcomes	<input checked="" type="checkbox"/>	The Governor's focus on Member priorities emphasises improving population health outcomes
Improved staff experience	<input checked="" type="checkbox"/>	Governors have requested that we also focus on supporting staff to ensure effective discharge
Improved value	<input checked="" type="checkbox"/>	Working collaboratively with our health and care partners will secure better integrated and more accessible care, thereby increasing value.

Committees / Meetings where this item has been considered

Date	Committee / Meeting
16 th January 2020	Council of Governors

Implications

Equality Analysis	Positive impact on reducing health inequalities through system partnerships
Risk and Assurance	Ensuring that we respond effectively to Member feedback will provide additional assurance, minimise risk and improve accountability
Service User / Carer / Staff	Improving transition and discharge will improve service user and carer experience and staff engagement
Financial	Improving transition and discharge will lead to greater value as waste is reduced.
Quality	Improving in response to the experiences of Governors and Members will help drive quality improvements further.

Glossary

Abbreviation	In full

1.0 Background/Introduction

- 1.1 This report updates the Board on the Council of Governors discussions so that these views inform Board decisions. It also provides information on the Chair's main activities and strategic outcomes of Non-Executive Director visits as part of the Board's commitment to public accountability.

2.0 Council of Governors

- 2.1 The Council of Governors began 2020 with a focus how to ensure that Transition and Discharge were more effective for those moving within our services and into services provided by others. The key themes are outlined below, with the Council of Governors receiving a response in September on how this feedback will inform our improvement of these processes. The September meeting will also consider complete discharge from Community Mental Health and Physical Health teams.

- Real need to improve communication, which needs to occur in a timely way between services both internal and external
- Confirmed plans must be based on consultation with, and agreement by, service users and include input from carers
- We need to give practitioners the tools and authority to do their job well in terms of discharge (e.g. easy ordering of equipment etc).
- Consider a single coordinator to ensure that all the agreed service users' needs – are met and be the point of contact when things do not go well after discharge, including when there is a crisis
- Preparation for discharge needs to begin on admission, not just before discharge
- The Trust should ensure it has mechanisms in place follow through on its commitments, (time of discharge, medication ready etc)

- 2.2 The Council also received an update on the actions taken in response to the points raised by our Members in the 2019 Annual Plan Consultation Meetings. In considering the "You Said, We Did" examples Governors particularly noted the following:

- Evaluation of school-based Mental Health Services is ongoing – Tower Hamlets is one of the national trail blazers and the evaluation will be shared with the Council.
- That the CAMHS Preventing Self-Harm project in Luton is a QI project with ongoing review of change ideas.
- We have GP Practices that are providing a fully comprehensive primary care service for the homeless population in East London. We are now starting to provide other services wrapped around those services, for example E1 primary care services are also providing mental health sessions.
- City & Hackney is the best area in the country in terms of delivering physical health checks for mental health patients. Funding has enabled this geography

to be flexible with Healthcare Assistants helping to deliver the checks, so that they are not just undertaken within GP practices.

- Whilst ELFT aren't providing primary or community health services in Luton we are talking to Commissioners to see how we can support their delivery and also integrated care.
- Council voiced concern about co-morbidity and requested closer cooperation between mental health, substance misuse and physical health services, particularly where the actions of one specialist may contradict or compromise the actions of another.
- The Trust is working within the East London Community Mental Health Team Pilot Project and through this are seeking to clarify various roles, reducing confusion and duplication and ensure that they proactively and systematically support the patient in achieving their goals. An example of clarity that is being sought is the differing but similar roles of social prescribers and community connectors. The Council are very interested in these roles and may request an update at a future meeting
- I sought, (and received), assurance that work on these priorities will not stop when new priorities may emerge from the 2020 Annual Plan Meetings.
- The Council agreed it required further dedicated time to consider the strategic update on the evolving systems for delivering integrated care, this will be arranged for a later date

2.2 The Council received presentations from 2 Candidates who are standing for election as Deputy Chair, (Lead Governor), with the result of the Council's vote expected in February. My thanks to both, Keith and Zara, for their willingness to stand.

3.0 Chair and NED Activities

3.1 I would like to begin my report with a series of congratulations. My first congratulations are to our Chief Executive, Dr Navina Evans who was awarded a CBE, (Commander of the British Empire), in the New Year's Honours for her outstanding contribution to public life. This award is richly deserved with Navina receiving international recognition for her commitment to quality improvement, staff engagement, people participation and to the furtherance of equality and inclusion. Her continued commitment to the people of East London, to those who use our services and to improving health outcomes as well as the experience of care is well known.

3.2 My next set of congratulations are to our Non-Executive Director and Audit Chair, Anit Chandarana who has been appointed Chief of Staff at National Rail. I am so very pleased for him and know he will continue to make an exceptional contribution to the organisation's success, I am also very pleased that his appointment included agreement to his continued commitment to ELFT.

- 3.3 My final congratulations are for Norfolk and Suffolk NHS Foundation Trust, (NSFT), who have moved from inadequate to requires improvement following the recent Care Quality Commission, (CQC) inspection. The CQC identified that the Trust is making “early improvements in almost all areas” and singled out older people’s services for particular praise. The staff were also rated good for caring with the CQC praising the staff’s positive and respectful relationships with service users and carers. In total the CQC found improvements in 22 out of the 48 areas it examined, with 21 remaining the same. Sadly, 5 areas had deteriorated and specialist community mental health services for young people were rated inadequate overall, particularly due to waiting times. There are clear plans in place to address these concerns. There is still much to do but this is a good start and ELFT Board can be rightly proud of their decision to support the Trust on its improvement journey. NSFT has agreed to remain in special measures to access the additional support it has identified it needs to embed and expand these improvements.
- 3.4 The Board knows that meaningful, rights-based People Participation, which leads to improvement and recovery is my passion. During December I had the benefit of delivering against this commitment in a new way, through participating in the co-production and co-delivery of a Charing Meetings course. This was a truly positive experience, where the reality of a multi-disciplinary albeit small team worked effectively together to produce something unique. I learnt much about how co-production is achieved in practice and also about how I can be a better chair, the feedback from attendees was also positive. This may be an opportunity that other Non-Executive Directors would wish to pursue.
- 3.5 The joint NED visit this month was to the Hackney Centre for Mental Health. As this has only just occurred at the time of writing this report a verbal report will be provided to the meeting.
- 3.6 Finally, you are all aware of my appointment to a new role at East London Health and Care Partnership (North East London Sustainability and Transformation Partnership.) I have so much to thank ELFT for, I have grown so much as a person as I have learnt from the feedback, challenge and encouragement of my Governors, service users, carers, staff and Board colleagues. The opportunities we have embraced and the new thinking that our ambitions require have truly enabled me to improve as a Chair and I have grown to truly value and care for each of my Board colleagues past and present. I wish you every success for the future and know that you will continue to lead, provoke, innovate and constantly improve as you must for the benefit of those we serve. Although I will miss you all I will not be far away and will indeed call on ELFT and expect you to hold me to account as part of the North East London Partnership. Thank you for everything.

4.0 Action Being Requested

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