

REPORT TO THE TRUST BOARD- PUBLIC
29 June 2017

Title	Chief Executive Officer's Report
Author	Dr Navina Evans, Chief Executive
Accountable Executive Director	Dr Navina Evans, Chief Executive

Purpose of the Report:

The purpose of this report is to provide the Trust Board with the Chief Executive Officer's update on significant developments and key issues for the month. The Board is asked to receive and note this report.

Summary of Key Issues:

This report provides a brief update on the Trust's Quality Improvement Strategy. It also contains details of the CQC inspections of the Trust, awards and recognition and updates on changes and improvements to services across the Trust. The report provides a brief update on national/ regional issues.

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

Improving service user satisfaction	<input checked="" type="checkbox"/>	Update on projects that improve service user experience
Improving staff satisfaction	<input checked="" type="checkbox"/>	Update on leadership work within the Trust.
Maintaining financial viability	<input type="checkbox"/>	

Committees/Meetings where this item has been considered:

Date	Committee/Meeting
N/A	N/A

Implications:

Equality Analysis	This report has no direct impact on equalities.
Risk and Assurance	This report provides an update of activities and issues across the Trust.
Service User/Carer/Staff	This paper provides an update on activities that have taken place across the Trust involving staff, patients and carers.
Financial	There are no financial implications attached to this report.
Quality	This report provides a brief update on the work taking place across the Trust to support the delivery of the Quality Improvement Strategy.

Supporting Documents and Research material

a. N/A

Glossary

CCG	Clinical Commissioning Group
CMHTs	Community Mental Health Teams
CQC	Care Quality Commission
QI	Quality Improvement

Chief Executive's Report June 2017

1.0 Purpose

- 1.1 The purpose of this report is to provide the Trust Board with the Chief Executive Officer's update on significant developments and key issues.

2.0 Cyber Attack in May

- 2.1 Many organisations were affected by the worldwide Cyber Attack that took place in May causing serious problems for many NHS organisations. ELFT systems were not seriously affected apart from some of our services who use systems supported by Barts Health. This was due to regular system updates rolled out by the ELFT IT department and robust antivirus security systems which detect assaults of this kind.
- 2.2 All services were taken off line as a precaution on the day of the cyber attack, and steadily restored over the weekend.
- 2.3 The Newham phlebotomy (blood testing) clinics were not able to function for one week after the incident as pathology lab systems at Newham University Hospital could not process samples. This was communicated to GPs by email, and to the public online, via social media, posters at clinics, and telephone and face to face discussion between patients and staff.
- 2.4 The email system for Tower Hamlets Community Health Services staff did not function for over two weeks after the incident. ELFT IT staff set up an emergency Wifi connection, and staff brought in their own devices and used paper records to ensure services continued. Not one home visited was missed.
- 2.5 A thank you message was issued to IT staff who worked long hours over the weekend of the attack and in the week that followed to ensure ELFT systems had optimum protection. And a thank you message went out to the staff in Tower Hamlets for their ingenuity and determination to keep services running.

3.0 UK Threat Level Raised to Critical

- 3.1 Following the major incident in Manchester in May, the Joint Terrorism Analysis Centre (JTAC) advised that the UK Threat Level should be changed from Severe (an attack highly likely) to Critical (an attack is expected imminently). This sadly proved to be the case with the London Bridge incident on 3 June.
- 3.2 NHS England contacted all trusts activate their NHS Emergency Preparedness Resilience and Response so that the NHS is prepared for all eventualities. ELFT communicated this to staff, and directed them to information about our Major Incident Response and Business Continuity on the Trust intranet.
- 3.3 Managers have been asked to review staffing levels and security arrangements across facilities, and to ensure their teams are aware of the Trust's Incident Response Plan and Business Continuity Plan. We sent a further communication to all staff after the London Bridge incident to remind them of steps to take with

regard to their personal safety, and key actions set out in the Lone Worker Policy.

4.0 Tower Hamlets Community Teams Evaluation Sessions

- 4.1 Six weeks after they joined the Trust, the Trust held two staff engagement events for community health staff to talk about how things were going, highlights, and areas still to be addressed. Chief Executive Dr Navina Evans, Chair, Marie Gabriel and members of the executive team attended these sessions.
- 4.2 Overall, the transfer appears to have gone extremely well with staff stating that they had felt very welcomed by ELFT and impressed with the steps taken to make sure they had what they needed on joining the Trust. Staff had been hampered by the cyber attack but were impressed with the response from the ELFT IT team.

5.0 A New Approach to Community Nursing in Tower Hamlets

- 5.1 From 1 June, a new approach to community nursing is being trialled in Tower Hamlets. The Neighbourhood Care Team will support people to: Recover from a health issue; Gain stability and independence if they have a long term health condition; and Receive intensive support and end of life care.
- 5.2 The team is unique in that the community nurses have the freedom to plan their hours around the needs of the patient. They will have no manager and will be a self-managing team, determining their own schedules and rotas, and will be responsible for their own costs and training.
- 5.3 The team will visit patients in Shadwell and Limehouse and be available seven days a week, 365 days a year, working from 8am in the morning to 8pm in the evening.
- 5.4 The Neighbourhood Care team approach is based on a home care model pioneered in Holland called the Buurtzorg approach which has received international recognition for delivering high quality care.

6.0 Breaking the Rules Update

- 6.1 The Trust ran an internal campaign with staff earlier this year called 'Breaking the Rules,' asking staff to send in ideas to improve efficiency, remove obstacles and identify change to improve care, save money and cut through red tape and bureaucracy. This generated over 100 ideas. Staff were then invited to vote for the idea that they wanted to see taken forward which resulted in 600 votes.
- 6.2 We have run a series of features on the staff intranet where the results of the vote and the action taken to implement specific changes has been publicised. Suggestions varied from being able to wear cycle shorts at work (yes), making RiO documents editable (in progress), redesign of forms (yes), to reducing the need for managers to sign training forms which delays bookings (Done).

6.3 The suggestion process will continue. Now that staff have got a taste for 'Breaking the Rules', we look forward to more ideas to improve the way we do things in the Trust.

7.0 The Big Conversation

7.1 ELFT is embarking on a 'Big Conversation' consultation with staff, service users and other key stakeholders to help us define the future purpose and direction of the Trust.

7.2 There will be a series of events covering all areas of the organisation with workshops for staff to debate and discuss issues of importance to them to help to shape the Trust's strategy for the coming years. We hope to engage with as many staff and service users as possible in June and July. There is also an option to contribute electronically if that is more convenient.

7.3 The next stage will be to involve stakeholders in similar discussions to understand expectations and agree priorities.

8.0 Action being requested

8.1 The Board is asked to **RECEIVE** and **NOTE** this report.