

# Chief Executive's Report to the Trust Board

## 21st June 2018

### PURPOSE OF THE REPORT

This report updates the Board on activities undertaken since the last meeting and draws the Board's attention to any other issues of significance or interest.

### LOCAL UPDATE

#### 1. BOARD DEVELOPMENT FOCUSES ON TEAM WORKING AND FURTHER COMMUNICATING "TOWARDS OUTSTANDING" VISION.

Our recent board development session focused on reviewing our Organisational Development strategy considering how we wanted to strengthen it to align with our ambition "To be outstanding - in all we do and how we do it." When we updated this following the publication of our latest CQC results, we took the opportunity to refresh our supporting statement from "We're on a journey" to "Our journey continues..."

Our ambition of being "Outstanding in all we do" goes beyond simply achieving CQC Outstanding ratings - great as that is and not in any way lessening our admiration for the achievement of our teams in securing them. When we say we want to be Outstanding in all we do, we literally mean "all we do".

Our vision also is designed to emphasise the equal importance we attach to being outstanding:

- **"In all we do"**.... via our SPAR quality priorities, delivering services that are Safe, Personalised, Accessible and Recovery-focused; and
- **"how we do it"**... via our Proud to CARE values, being Compassionate, Approachable, Responsible and Excellent

One way we can make this even more apparent is to align all of the excellent initiatives underway across the Trust under an overall "Towards Outstanding" banner. We will be working this up over the next period, developing:

- *Towards Outstanding People* - bringing together our OD, workforce development, skills, recruitment and retention strategies and initiatives
- *Towards Outstanding Engagement* - bringing together Listening into Action, GoEngage and engagement strands of our communications activities
- *Towards Outstanding Value* - bringing together our fantastic Valuemakers initiative with our cost improvement programme, emphasising all the time our commitment to delivering value, not simply cost cutting
- *Towards Outstanding Ideas* - bringing together our fantastic efforts and achievements in research and innovation
- *Towards Outstanding Quality* - bringing together our quality and performance strategies
- *Towards Outstanding Partnerships* - bringing together our partnership working, our support for the North Staffordshire and Stoke-on-Trent Alliance Board.

We also spent time as a Board particularly discussing how we need to build on the improvement work we have done to date to ensure this spreads and is sustainable. Towards Outstanding Improvement will enable our staff and service users and carers to work together on using common improvement methodologies to improve services to deliver better outcomes. Whilst we have started this journey in partnership with AQUA – we now need to invest in enabling people to be trained and supported to make continual improvements. We already have two of our staff who have been trained in advanced improvement skills another five are imminently starting their training and there will be more to come. We are really keen that we have people trained as part of our new organisational changes so we maximise the potential for transformation and improvement.

## **2. LOCALITIES UPDATE**

Our progress towards implementing our new localities structures continues apace. Engagement sessions continue to be held with teams, which I know are proving welcome and valuable to frontline members of staff and this month we passed an important milestone as the consultation on the first phase of the Management of Change ended.

12 engagement sessions in total (2 per existing Directorate) have now been delivered, led by the project Clinical Lead and the current Heads of Directorate with support from the HR Team. These sessions have given a dedicated opportunity for clinical teams and staff within the directorates to give their valued contributions and comments to the transformation process. All feedback from these sessions has been collected and fed through into the Task and Finish Groups. Staff were welcomed to attend sessions outside of their own directorate to increase opportunities for engagement.

As requested by clinical staff during these sessions, further directorate engagement sessions will continue to be held throughout the process, giving teams timely updates on the transformation process and continuing to give them an opportunity to engage, feedback and comment.

We regularly remind staff that, if they have any questions about our plans, how they affect them and the opportunities it offers, they can use our dedicated webpage – including an FAQs page and a web form they can use to ask us anything they like and get an answer. They can, if they prefer, even ask a question or give us a comment anonymously.

It's really important that everyone feels involved and has the opportunity to have their say.

## **3. REACH 2018**

We have had a fantastic result with this year's REACH Awards. At the close of nominations we had received over 300 nominations - the first time in the Trust's history we've had such a response. As always, I really enjoyed taking part in the judging panel - it really is one of the highlights of my year each year.

Everyone who has nominated a fellow staff member has received an invitation to the event, so it should be even more packed the rafters than normal. In line with suggestions from the national NHS 70 Team, we have brought the normal date for REACH forward to take place on the 5<sup>th</sup> July.

It should be a great way to celebrate the 70th Anniversary of the NHS.

#### **4. OUR AWARDS SUCCESS CONTINUES**

We have had another month of Awards success.

Our Finance Team scooped the award for Finance Team of the Year from the West Midlands Healthcare Financial Management Association. The work of the finance team has been a regular item in my blogs and Board Report over the year - whether it's delivering our 19th consecutive year of financial balance, our innovative animated AGM film presenting our financial results or the Valuemakers scheme. It's great to see them getting external recognition and praise from their professional colleagues in the region. They have won a variety of awards recently and this prestigious one showcases what a fabulous team they are - really well done.

Our Learning Disability Directorate was rewarded for their fantastic achievements at the national HSJ value awards, scooping the award for Pharmacy and Medicines Optimisation. The HSJ judges themselves said "this project has worked across organisational boundaries to stop over-prescribing of medicines and significantly improve quality of care for a vulnerable group of patients. We would love to see this approach everywhere.

It was also a significant achievement that three more of our teams made the final shortlist: our finance team jointly with our clinical teams in the category "Improving value through innovative financial management or procurement" - for our Valuemakers programme - and no less than 2 out of only 11 across the whole in the NHS the Meir project for the Meir Partnership Care Hub and our CAMHS in Schools team- for our CAMHS in Schools innovative project.

A brilliant achievement - how fabulous to have 4 teams shortlisted in the national awards - it was a great evening - one where I felt immensely proud!" been made in the last few months.

#### **5. HEALTHY STAFFORDSHIRE SELECT COMMITTEE**

One of our most important meetings each year is our session at the Healthy Staffordshire Select Committee. This gives locally elected representatives the opportunity to hear from us about our performance over the past year and our plans for the future. Their role is to scrutinise us and ensure we are providing good services for our local communities.

It was a pleasure to be able to present a strong and positive story - of our continuing journey towards outstanding, our strong clinical and financial performance, our engagement with staff, service users partners and our future plans for locality working.

It was an even greater pleasure to receive warm and enthusiastic support from the Committee about what we have done, what we are doing and what we plan to do in future.

I am due to return next month to present with colleagues in our mental health STP plans.

#### **6. CQC SYSTEM REVIEW**

I am pleased to report positive feedback from Ed Moses from the Department of Health on the CQC Local System Review Improvement Plan. The feedback to me and Dave Sidaway, City Director from Stoke-on-Trent Council was very positive on the progress we have made and the positive position we are in compared to many other health and social care economies that were reviewed by the CQC. Whilst this was good to hear, there is still much for us to do. Our two biggest priorities going forward are NHS delayed transfers of care and supporting care planning for people at the end of their lives. It is however really important to thank people for the progress that has been made in the last few months.

I am also really pleased that, following an interview process that I was part of, Paul Edmondson-Jones has been appointed as the new Director of Adult Social Care, Health Integration and Wellbeing at Stoke-on-Trent City Council.

Paul has spent considerable time in the armed forces leading medical operations in the Falklands, Yugoslavia (including Bosnia) and the Gulf wars. He was responsible for a number of adult social care and public health functions in York, Hartlepool and Redcar and Cleveland Councils. He has also worked extensively in the NHS, contributing to several white papers on public health, pharmacy and health and social care.

This is a great appointment for Stoke-on-Trent and I am, alongside many others, very much looking forward to working with Paul.

## **7. HEALTH AND CARE TRANSFORMATION BOARD**

At the recent STP Health and Care Transformation Board, one of the items we discussed was the implementation model for the integrated community teams. Our Alliance will be working up the model for North Staffordshire and Stoke-on-Trent through our newly established Alliance Executive team. The integrated teams approach is a key pillar of the STP plan and will be part of the engagement and consultation process that the STP is currently planning.

The plans will be focused on the simplification of urgent and emergency care, including urgent treatment centres and how to support flow from A&E into our hospitals. It will also introduce the concept of integrated care teams (ICTs) and their potential urgent care offer, as well as integrating how we provide mental health services into primary and community teams.

The STP team is seeking clinicians to support public engagement events. These will be taking place in June and July, from 4 – 8pm. Training is being offered to anyone who volunteers to support the process. I have urged our staff to consider taking part via my CEO Blog.

## **8. TRUST CONFIRMED FOR LORENZO DIGITAL EXEMPLAR MOBILISATION STAGE**

It was great to hear confirmation that Combined Healthcare has passed a significant milestone by being chosen by NHS Digital as only one of four NHS Trusts selected for the mobilisation phase of the Lorenzo Digital Exemplar programme.

The Trust sees the Lorenzo Digital Exemplar programme as a great opportunity to improve our services for children in the community. Our exciting plans build on our reputation as a digital exemplar and will be an excellent opportunity to spread our learning to other Trusts across the country.

Combined Healthcare's plans centre on delivering a digital transformation programme with the Children and Young People (CYP) Directorate. We aim to deliver a future where young people and their families are empowered to use technology to revolutionise their care. We want to remodel the referral and assessment functions within our CYP service by increasing the proportion of children with the ability to self-care and self-refer into services. This self-referral approach improves recovery, and enables a person to seek prompt treatment at an early stage, and it also reduces the likelihood of lower degree problems becoming more severe.

We'll be working closely with local schools, helping us develop a vision of how technology can really change the lives of children, young people and their families. Well done to all the team continuing to develop our plans and congratulations on reaching this next stage.

## **9. LISTENING FINANCE TEAM AWARDED FUTURE FOCUSED FINANCE ACCREDITATION**

I was delighted to hear that the NHS Finance Leadership Council has agreed that North Staffordshire Combined Healthcare NHS Trust should be awarded Future-Focused Finance Accreditation, at level 1, with effect from Friday 11 May 2018. The overarching principle of Accreditation is that the organisation is fully signed up to Future-Focused Finance's aim of ensuring that everyone connected with NHS Finance can influence decision making in support of high quality patient services.

The national FFF programme is aimed at improving NHS finance for everyone. Whether we work in finance or not we all need access to the relevant finance skills, methods and opportunities to influence decisions affecting our services. This helps us then work together to produce high value services and reduce waste in NHS spending.

Our finance team are greatly valued and respected by the FFF programme, including for our fantastic Valuemakers Programme. It's great to see them getting this recognition for their work. Well done to our fantastic finance team and everyone across the Trust making a contribution through Valuemakers.

## **10. CONTINUED RELATIONSHIP BUILDING WITH POSITIVE PRACTICE MENTAL HEALTH COLLABORATIVE**

Our relationship building with the Positive Practice Mental Health Collaborative continues. The Positive Practice MH Collaborative is a user led multi agency collaborative of seventy-five organisations, including NHS Trusts, CCG's, Police Forces, third sector providers, front line charities and service user groups. It identifies, and disseminates, positive practice in mental health services by working together across organisations and sectors, to facilitate shared learning, and to raise the profile of mental health with politicians and policy makers.

We submitted 10 entries this month for their annual positive practice awards. We have been asked to start a national substance misuse collaborative which Dr Derrett Watts our Clinical Director for substance misuse will be leading. Some of the Executive Team has also been asked to be on the judging panel for the positive practice awards.

## **11. SCHWARTZ ROUNDS**

I am really pleased that we have recently introduced Schwartz Rounds to the Trust. Schwartz Rounds originated in America as the legacy of Ken Schwartz. In 1994, Ken, a health attorney, was diagnosed with terminal lung cancer. During his treatment, he found that what mattered to him most as a patient were the simple acts of kindness from health staff – both clinical and non-clinical- which he said made “the unbearable bearable.” Before his death, he left a legacy for the establishment of the Schwartz Center in Boston, to help to foster compassion in healthcare. From there Schwartz Rounds emerged.

Schwartz Rounds provide a structured forum where all staff, clinical and non-clinical, come together regularly to discuss the emotional and social aspects of working in healthcare. The purpose of Rounds is to understand the challenges and rewards that are intrinsic to providing care, not to solve problems or to examine the clinical aspects of patient care. Therefore rounds focus on the emotional and social aspects of our work.

Rounds can help staff feel more supported in their jobs, allowing them the time and space to reflect on their roles. Evidence shows that staff who attend Rounds feel less stressed and isolated, with increased insight and appreciation for each other's roles. They also help to reduce hierarchies between staff and to focus attention on relational aspects of care. The underlying premise for Rounds is that the compassion shown by staff can make all the difference to a patient's experience of care, but that in order to provide compassionate care staff must, in turn, feel supported in their work.

The Schwartz Rounds are being held monthly with 2 having been held to date.

## **12. CARE COORDINATION WORKSHOP**

We are currently focusing on strengthening our approach across the Trust to care co-ordination. The Executive Director of Nursing & Quality is leading an improvement programme with the first workshop held this month. There was strong representation across the directorates and examples of both positive practice and also where there are challenges. The programme will work on improving areas where needed to provide consistent and high quality support to service users and carers

### **13. HEALTH SELECT COMMITTEE PUBLISHES REPORT INTO INTEGRATED CARE: ORGANISATIONS, PARTNERSHIPS AND SYSTEMS**

The House of Commons Health Select Committee has published its report into “Integrated care: organisations, partnerships and systems.” The Report notes that NHS and social care services are looking after a population which is living longer and with increasingly complex health and care needs, including multiple long-term conditions.

Services need to change to reflect that and to be better organised around patients. Rising demand and costs for health and care are taking place alongside an unprecedented and prolonged squeeze on resources. More joined-up, coordinated and person-centred care can provide a better experience for patients, particularly those with multiple long-term conditions. However, progress to achieving these benefits has been slow.

Transformation remains key to sustainability. The Committee says it has seen and heard of examples of local areas which have made excellent strides forward in difficult circumstances. What is now required is the dedicated national financial and leadership support to enable the NHS to transform at pace.

The Report includes a specific mention of Staffordshire and Stoke-on-Trent from oral evidence from Simon Whitehouse, saying:

*“With Staffordshire and Stoke-on-Trent being one of the more challenged areas in terms of both performance and financial viability, we have a real challenge. We need some of the flexibilities that are being offered and talked about in the more successful parts of the patch to enable us to make the scale of changes we need to make, but the resource, effort and focus is going to areas that are doing really well; they are advanced and probably had strong and robust relationships in place previously to enable some of that to happen. I would make the case, and articulate really strongly, that while we understand that and we need to learn from those areas, if all of that resource and effort goes into the ones that are at the leading or cutting edge, we are creating an even greater gap in terms of what that looks like. “*

An STP area, or areas within it, work more effectively where they are meaningful to partners, local health professionals and most importantly the public. STPs, particularly those with more complex geographical boundaries, should be encouraged and supported to allow local areas to identify, define and develop meaningful boundaries within their patch in which local services can work together around the needs of the population

### **14. COMBINED HEALTHCARE PRAISED IN KEYNOTE ADDRESS AT NHS CONFEDERATION CONFERENCE 2018**

The success of Combined Healthcare in developing partnerships through the Alliance, with successes in reducing DTOCs and the Meir Hub, as well as our success in having CQC rating all of our services as ‘Good’ or ‘Outstanding’ for the first time in our history were specifically singled out by Shadow Health Secretary Jon Ashworth MP in his keynote address delivered by video link to the NHS Confederation 2018 Conference.