

REPORT TO TRUST BOARD

Enclosure No:

Date of Meeting:	24 th January 2019		
Title of Report:	CEO Board Report		
Presented by:	Caroline Donovan, Chief Executive Officer		
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Executive Lead Name:	Caroline Donovan, Chief Executive Officer	Approved by Exec	<input type="checkbox"/>

Executive Summary:		Purpose of 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.		Approval	<input type="checkbox"/>
		Information	<input checked="" type="checkbox"/>
		Discussion	<input type="checkbox"/>
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Strategic Objectives (please indicate)	<ol style="list-style-type: none"> 1. To enhance service user and carer involvement. <input checked="" type="checkbox"/> 2. To provide the highest quality services <input checked="" type="checkbox"/> 3. Create a learning culture to continually improve. <input checked="" type="checkbox"/> 4. Encourage, inspire and implement research & innovation at all levels. <input checked="" type="checkbox"/> 5. Maximise and use our resources intelligently and efficiently. <input checked="" type="checkbox"/> 6. Attract and inspire the best people to work here. <input checked="" type="checkbox"/> 7. Continually improve our partnership working. <input checked="" type="checkbox"/> 		
Risk / legal implications: <small>Risk Register Reference</small>	None		
Resource Implications:	None		
Funding Source:			
Diversity & Inclusion Implications: <small>(Assessment of issues connected to the Equality Act 'protected characteristics' and other equality groups). See wider D&I Guidance</small>	Includes update on Inclusion Council and responses to the NHS Staff Survey		
STP Alignment / Implications:	Includes update on Capital Investment, NHS Long Term Plan and Trust Operational Plan Submission		
Recommendations:	To receive for information		
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1.0	Caroline Donovan	17 th January 2019	

Chief Executive's Report to the Trust Board 24th January 2019

PURPOSE OF THE REPORT

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LOCAL UPDATE

1. CQC INSPECTION

The CQC core service inspections that have taken place this month built on the Adult Community Core Service positive inspection in December. The CQC chose to inspect our Crisis Core Services, including our Access team, Home Treatment, Liaison team and Place of Safety. In addition they inspected our Older Peoples wards 4, 6, and 7. The feedback has been very positive from all the clinical visits. The CQC also ran a number of focus groups with psychologists, support workers, BME staff, AHPs, nurses, modern matrons, pharmacy staff and managers, MHA staff and managers, a patient focus group and a couple of general focus groups, which overwhelmingly were positive.

The last part of the inspection is the Well-Led Inspection, which takes place the week commencing 21st January. This will involve a presentation from me, as well as a number of one-to-one interviews with senior management and members of the Board

A number of partner interviews also took place throughout this period including with some of our local MPs.

All the hard work and preparations we have put in place over recent weeks and months really bore fruit and the feedback we have had so far has been really positive. So, well done and congratulations to all of our staff and teams for demonstrating to the CQC the excellent work they do day in and day out and showcasing excellent practice and innovation that they are leading to continually improve services for our service users and carers.

2. FANTASTIC NEWS FOR CAMHS

We ended 2018 on a real high as our fantastic CAMHS service received the best possible Christmas present – the news that Combined Healthcare has been selected as a Wave 1 pilot site, to receive almost £2 million a year from April 2019 to invest in children's mental health services across Stoke-on-Trent and North Staffordshire.

This is excellent news for our CAMHS service and further real testament to their reputation for delivery, quality and innovation. Congratulations to everyone involved in the bid and a big thank you to those who have worked behind the scenes over the past few weeks to start planning the implementation of the new services!

The money is split into two parts. The first part will deliver over 30 new posts in CAMHS to form four educational mental health support teams of children's mental health specialists and trainees to work directly with schools. There will be two teams in each of the locality Directorates of Stoke-on-Trent and North Staffordshire, serving between 10 and 20 schools per team.

The second element of the funding will be used to expand our existing three CAMHS community teams in order to provide additional staffing to each team, with the aim of reducing children's mental health waiting times to under four weeks.

We have begun a major recruitment drive for trainee educational mental health practitioners as well as qualified mental health practitioners to form the new mental health support teams covering both Stoke-on-Trent and North Staffordshire. The Trust will also begin working with the existing community teams to ensure the new staff are recruited as soon as possible to help expand our services and start to deliver reduced waiting times.

This major development will benefit parents, children and schools across Stoke-on-Trent and North Staffordshire. We are simply thrilled to have been chosen to deliver this multi-million transformation for children's mental health and are raring to go.

3. MAJOR CAPITAL INVESTMENT IN MENTAL HEALTH CRISIS CARE CENTRE AT HARPLANDS

Our we also had the fantastic news that £1.6m has been approved by the Government to develop a mental health crisis care centre and detoxification suite at Harplands Hospital, as well as four crisis cafes in the county.

The crisis care centre will include a crisis lounge and three places of calm for people experiencing mental health issues. It will also provide working space for social care staff, police and voluntary sector workers so they can support patients once they are ready for discharge.

The urgent care and detoxification centre will allow people experiencing substance misuse issues to recover in safety and for care and support to be planned once they are ready to go home. The crisis cafes will be located in East Staffordshire, Stoke-on-Trent, Stafford and Staffordshire Moorlands and support people experiencing mental health problems.

Currently, people who are having a mental health crisis can feel they have nowhere to go. Very often, they will go to A&E because they know it will be open. However, A&Es are staffed and equipped to deal with physical and not mental health emergencies. A&E also specialises in dealing with immediate life-saving problems and is not there to plan on-going care or assessment.

These new specialist facilities will be able to offer more appropriate places for people experiencing crises involving either mental health or substance misuse problems. They will not just see them through the immediate problem but help provide joined-up care once they leave the Trust.

The NHS Operational Planning and Contracting Guidance 2019/20 were published on 10th January, alongside CCG 5 Year Allocations and NHS Control Totals. Within the new guidance comes a new financial framework will give local organisations and systems the space and support to shape their operational and financial plans to their circumstances, whilst reducing those with deficits year-by-year. The guidance is clear that CCGs must continue to increase investment in mental health services, in line with the Mental Health Investment Standard (MHIS).

For 2019/20 the standard requires CCGs to increase spend by at least their overall programme allocation growth, 5.8% for Staffordshire CCGs, plus an additional percentage increment to reflect the additional mental health funding included in CCG allocations for 2019/20. We will be working with CCG colleagues over the coming weeks to agree this in line with NHS Long Term Plan, both of which will feature heavily in our Operational Plan for 2019/20.

The first draft of our organisational Operational Plan will be submitted on 12th February with the final version due on April 4th 2019

4. WELLBEING ACADEMY LAUNCHED

One of key initiatives being taken forward this year by our Director of Nursing and Quality, Maria Nelligan, is the creation of our Wellbeing Academy. The Academy will offer, together with our partners, a wide range of courses, workshops and activities to support people to discover interests and develop their skills on their mental health recovery journey.

All of our course facilitators are dedicated to recovery and wellbeing and have a range of personal and/or professional experience in adult education; activities related to mental Health recovery or lived experience of mental health issues.

Wellbeing Academy courses will be open to anyone, regardless of their past experience. Everyone is welcome to attend the Wellbeing Academy and we will promote equality & diversity in all of our settings. We hope to support everyone who becomes a student to accomplish their learning and recovery ambitions. We will do this by providing a safe, welcoming and non-judgmental learning environment to help them to get the best out of their experience. Participants don't need any formal qualifications or experience to attend the college.

January saw the internal 'soft launch' of the Academy, hosted by our Medical Director, Buki Adeyemo, and it was incredibly well attended by a range of service users and staff.

The Wellbeing Academy is supported by a fantastic new website, where people can get details of courses, book places and learn more about the initiative. You can visit it at <https://wellbeingacademy.combined.nhs.uk> to find out more.

5. 'NEW' LEADERSHIP ACADEMY LAUNCHED

I really enjoyed welcoming everyone to our 'new format' Leadership Academy in December. Under our new approach, we are looking to increase the range of masterclasses we can offer, drawing on outside speakers and organisations. The Academy is focused on supporting our senior leadership community but we will continue to support the leadership development needs of all our staff.

This first session featured our improvement partners AQuA, who will be co-creating with us a Leadership Development Programme, complementing our move to a locality structure and really bringing to life our leadership competency framework. Details of this will be sent out in due course.

We also kicked off the session with a hugely enjoyable 'Human Bingo' ice-breaker, where everyone learnt something new about their colleagues! It was enormous fun and congratulations to Jane Rook and the OD Team on supporting the event.

6. INCLUSION COUNCIL GOES FROM STRENGTH TO STRENGTH

I was really delighted to chair the latest meeting of our Inclusion Council. The energy in the room was really palpable as we heard about all that's being delivered – from recruitment, to HR policies and appraisal, plans for reverse mentoring and increasing staff confidence in reporting incidents. We also heard about the impact the Stepping Up programme has in building confidence and stories of our BAME staff subsequently getting promotions.

We have created a new dedicated section on the Trust Intranet and on the Trust website, where everyone can keep up to date with all the work of the Council.

Our intention for each Inclusion Council meeting is to choose one topic each time where we can have a more in-depth discussion and for this meeting we chose the topic of micro-aggression.

Micro-aggression is a term used for brief and commonplace daily verbal, behavioural, or environmental indignities, whether intentional or unintentional, that communicates hostile, derogatory, or negative prejudicial slights and insults toward any group. Often it can be subtle, even unconscious on the part of those demonstrating it, but the cumulative effects over time can be to make someone feel devalued, demotivated or lower their confidence or mental wellbeing.

As part of the Council Action Plan, we will be shortly launching an awareness campaign and survey so we can understand the degree to which our staff may be experiencing micro-aggression, to be followed by specific programme to tackle it and support those affected by it.

7. CAMHS DIGITAL EXEMPLAR ENGAGES IN CO-PRODUCTION WITH YOUNG PEOPLE

Our programme to become a CAMHS Digital Exemplar continues and as part of this, the digital team, our CAMHS Team and our digital partners DXC, held an engagement session this week with young people at the Watermill School, in Tunstall. This was an opportunity to get feedback and ideas from service users to inform the co-production, co-design and development of a key part of the exemplar project, an Engagement Portal, where young people can go for advice and support.

I'm told that the event was really positive and the feedback from attendees was both enthusiastic and informative. We'll be releasing details of the portal once it's ready for launch. In the meantime, congratulations to our Chief Information Officer, Dave Hewitt, our CAMHS teams and all involved in bringing forward this exciting development.

8. STP ZERO SUICIDE CONFERENCE

I was pleased to open a major Suicide Conference attended by over 300 delegates, jointly organised by the Mental Health workstream of the STP and a team from Combined Healthcare and chaired by our Medical Director, Dr Buki Adeyemo.

The conference brought together a whole range of experts, service users, clinicians and others from across Staffordshire and Stoke-on-Trent and beyond, including Switzerland to share perspectives and knowledge.

The most impactful part of the day for me was the sharing of heartfelt personal stories from service users and carers. It was incredibly brave if the individuals and made such a difference to us all being able to think about the personal and emotional consequences of suicide and what we could do better as organisations and the wider community.

It also was an opportunity for the partners across our area to sign a **Suicide Charter**, setting out their determination to work together with an ambitious aim for nothing less than zero suicide in Staffordshire and Stoke-on-Trent from 2019 onwards.

Well done to all involved in organising and delivering a fantastic event and initiative.

9. CRITICAL INCIDENT STRESS MANAGEMENT CONFERENCE

Our 2nd Annual Critical Incident Stress Management Conference took place in December 2018 and was a great success.

We welcomed a variety of speakers including RCN rep Colin Burgess, our very own Maxine Tilstone, Professor Stephen Regel OBE, DS Mark Naylor, A&E Consultant Julie Norton and PSA's Angela Lewis.

It was a fantastic day of insightful theories, emotional experiences, collaborative approaches to CISM and engaging Q&A sessions. Attendees left the day not only with a certificate and a badge, but with a buzz and enthusiasm about CISM and how to put it to practice.

Thank you to everyone who attended and to those who organised the day and thank you to RCN for sponsoring the event. Its success goes to show how many people stress affects, so we hope to make next year bigger and better yet again positive

10. HEALTH AND WELLBEING BOARD

I was pleased to attend the latest meeting of the Stoke-on-Trent Health & Wellbeing Board. It was great to be able to celebrate the really positive CQC system review outcome. When the CQC returned to visit the Stoke system before Christmas, they recognised the excellent progress that has been achieved – well done and thank you to everyone. [The report can be found here.](#)

There was also discussion about the really great system working supporting the high use of monkey dust in Stoke. This has resulted in partners from UHNM, GP Federation, the Council, the police and Combined working collaboratively and being very responsive so again thank you particularly to our substance misuse teams.

11. WELCOME TO OUR NEW KEELE UNIVERSITY GRADUATES

I attach great pride and importance to our relationship with Keele University. We are proud to be able to call ourselves a Keele University teaching Trust.

In this vein, it was great to be able to welcome 25 new graduates from Keele University, who have started their preceptorship programme with us. The programme will include masterclasses, action learning sets and rotation across specialties. Thank you to Maria Nelligan for her leadership of this really important initiative.

I was also really pleased to be invited to our medical leadership programme at Keele University and privileged to be able to share my personal leadership journey including insights into challenges and personal resilience. Our group of medical leaders were really fantastic in engaging in the programme and each sharing their quality improvement project. Well done to Dr Buki Adeyemo for sponsoring this important programme which I hope will continue with action learning support.

12. GREAT RESPONSE TO NHS STAFF SURVEY

I used my blog each week to keep all staff updated on progress on our NHS Staff Survey and urge everyone to take part and have their say.

The survey came to an end in November, and I am thrilled that we had the highest response rate since 2015 and one of our best rates of 58%, meaning 797 staff shared their views.

Congratulations to staff working in Workforce and Leadership for posting a perfect 100% response rate and thanks to everyone throughout Combined who took this opportunity to tell us what they think about working at Combined and where we can do even better. We will be publishing the results of the survey, as well as an action plan, setting out precisely how we intend to respond to its findings once the national figures are collated and published in February by NHS England.

We have given many thanks to everyone who engaged – their feedback is so important.

13. COMBINED FLU FIGHTERS UPDATE

By the end of December and 12 weeks into our Flu Fighters campaign, we hit our target of 75%, which is excellent. That means that a total of 1070 vaccines were given, which includes declaration forms received. Congratulations and thank you to all staff working hard and supporting our campaign.

NATIONAL UPDATE

14. NHS LONG TERM PLAN PUBLISHED

The NHS Long Term Plan was published in January, with the overall stated aim “to make the NHS fit for the future, and to get the most value for patients out of every pound of taxpayers’ investment.”

NHS England says the new 10-year plan could save up to 500,000 lives by focusing on prevention and early detection. GPs, mental health and community care will get the biggest funding increases to shift the focus away from hospitals.

The plan, unveiled by Simon Stevens and the Prime Minister, commits to giving a third of the extra £20bn the NHS will get by 2023 on GPs, community care and mental health.

Mental health is due to get £2.3bn extra of the £20bn, while GP and community care is to get £4.5 bn. Highlights include:

- Investment in mental health services will grow faster than the overall NHS budget, creating a new ring-fenced local investment fund worth at least £2.3 billion a year by 2023/24.
- By 2023/24, an additional 380,000 adults and older adults will be able to access NICE-approved IAPT services.
- NHS England will test four-week waiting times for adult and older adult community mental health teams in selected local areas to understand how to introduce achievable improvements in access, quality of care and outcomes
- local areas “will be supported to redesign and reorganise core community mental health teams to move towards a new place-based, multidisciplinary service across health and social care aligned with primary care networks”, with “new models of care, underpinned by improved information sharing” by 2023/24.
- A 24/7 community-based mental health crisis response for adults and older adults available across England by 2020/21, offering intensive home treatment as an alternative to an acute inpatient admission, and all-age mental health liaison service in Emergency Departments and inpatient wards by 2020/21.
- Specific waiting times targets for emergency mental health services to take effect from 2020.
- The Five Year Forward View for Mental Health programme is working to eliminate inappropriate out of area placements for non-specialist acute care by 2021.
- Work to bring units with a long length of stay down to the national average of 32 days.
- NHS England will design a new Mental Health Safety Improvement Programme, which will have a focus on suicide prevention and reduction for mental health inpatients.
- 70,000 more children and young people will access mental health treatment each year by 2020/21.
- Funding for children and young people’s mental health services will grow faster than both overall NHS funding and total mental health spending.
- By 2023/24, at least an additional 345,000 children and young people aged 0–25 will be able to access support via NHS funded mental health services and school or college-based mental health support teams.
- New mental health support teams working in schools and colleges will be rolled

- Out to between one-fifth and a quarter of the country by the end of 2023.
- Testing approaches to delivering four week waiting times for access to NHS support, ahead of introducing new national waiting time standards for all children and young people who need specialist mental health services.
- STPs and ICSs are expected to ensure that reasonable adjustments are being made to support people with learning disabilities

A link to the full NHS Confederation Briefing document can be found at https://www.nhsconfed.org/-/media/Confederation/Files/public-access/NHS_Confederation_LTP_member_briefing.pdf

Moving forward, NHS England says that Sustainability and Transformation Partnerships (STPs) and Integrated Care Systems (ICSs), now need to develop and implement their own strategies for the next five years.

These strategies have been given the task by NHS England of setting out how they intend to take the ambitions that the NHS Long Term Plan details, and work together to turn them into local action to improve services and the health and wellbeing of the communities they serve – building on the work they have already been doing.

NHS England also says that over the next few months, NHS staff, patients and members of the public will have the opportunity to help shape what the NHS Long Term Plan means for their area, and how the services they use or work in need to change and improve.

15. NHS PROVIDERS LAUNCH NEW WORK PROGRAMME ON RELATIONSHIP BETWEEN NHSE/I AND THE PROVIDER SECTOR

NHS Providers have announced their intention to create a new work programme on the relationship between NHSE/I and the provider sector and have invited feedback and involvement as they develop this work.

NHS Provides sets the context for this work as being five intertwined developments:

- The next stages in the move from individual institutions to local system working
- The future shape of the provider landscape including provider sector consolidation
- How the new NHSE/I structure will work in practice
- Two workstreams in the long-term plan on future system architecture and potential legislative changes and
- How all of the above interacts with current provider governance and the 2012 Act, within the context of the best way to oversee and assure delivery of local healthcare services.

Taken together, NHS Providers think these developments could result in far-reaching changes to the strategic environment in which providers operate.

Although there are formal proposals for legislative changes being developed for consultation, NHS Providers believes that the way that the new NHSE/I structure actually operates will be just as important. NHSI's chair and chief executive have both said they want to create a new, more collaborative, relationship with the NHS frontline that works for both NHSE/I and providers – one based more on support and improvement and less on regulation and performance management.

NHS Providers believe there are a number of things NHSE/I could do to deliver this new relationship, including:

- Collaborative agreement of the behaviours and processes governing how the new NHSE/I regional directors and frontline trust, CCG and STP leaders will work together
- New approaches to reduce the volume of ALB requests and ‘all trust’ communications, for example, through setting up a formal gateway with frontline input
- A formal, collaboratively agreed, protocol setting out how NHSI will intervene in chair and CEO appointments so everyone knows where they stand when providers start a new appointment process
- Development of a new “strategic support not tactical performance management” approach to special measures, based on trust feedback on what works and doesn’t
- A genuinely collaborative planning process covering all elements of planning, not just the tariff where formal consultation is required by law
- A collaborative approach to designing the new financial architecture including what will replace control totals and the Provider Sustainability Fund and a much needed new capital regime
- A return to genuine and full consultation on all major new policy developments, for example, the development of system working.

The proposed work programme will continue to push for the importance of developing this type of collaborative approach and in ensuring that provider views are fully represented if and when this work is undertaken.