

REPORT TO PUBLIC TRUST BOARD

Enclosure No: 4

Date of Meeting:	16 th January 2020			
Title of Report:	CEO Board Report			
Presented by:	Peter Axon, Chief Executive Officer			
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Executive Lead Name:	Peter Axon, Chief Executive Officer	Approved by Exec	\boxtimes	

Executive Summary:		P	Purpose of report			
This Report updates the Board on recent activities, developments and			Approval			
news of interest across Combined and the wider STP.			nformation			
			Discussion			
			Assurance			
Coop of	SLT Execs	-				
Seen at:	Date:		Document Version No.			
Committee Approval / Review	Quality Committee					
рротан т	Finance & Performance Committee					
	Audit Committee					
	People, Culture & Development Committee					
	Charitable Funds Committee					
	Business Development Committee					
	Primary Care Committee					
	1 milary out of online of					
Strategic Objectives						
(please indicate)	 To enhance service user and carer collaboration.					
	2. To provide the highest quality, safe and effective services 3. Inspire and implement innovation and research. 					
	4. Embed an open and learning culture that enables continual improvement.					
	5. Attract, develop and retain the best people.					
	6. Maximise and use our resources effectively.					
	7. Take a lead role in partnership working and integration.					
Risk / legal implications:	N/A	•	<u> </u>			
Risk Register Reference						
Resource Implications:	N/A					
Funding Source:	Light des details of any involvement is noticed DAME to being					
Diversity & Inclusion	Includes details of our involvement in national BAME Inclusion event.					
Implications: (Assessment of issues connected to						
the Equality Act 'protected						
characteristics' and other equality						
groups). See wider D&I Guidance	NI/A					
STP Alignment / Implications: Recommendations:	.N/A					
Recommendations.	To receive the report for information					
Version			od			
Version 1.0	Name/group	Date issue	ed			



Chief Executive's Report to the Trust Board 16th January 2020

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.

1. HAPPY NEW YEAR

The New Year is always a time for reflecting on the year just passed and committing to new challenges for the 12 months ahead. That's what I'd like to do in this report to the Board. 2019 was, quite literally, an Outstanding year for Combined Healthcare. An early highlight, of course, was us becoming 1 of only 2 specialist mental health Trusts in the country to be awarded the highest possible organisational rating from CQC. Since then, our focus has been on avoiding complacency, by maintaining and further improving our levels of performance and capability.

There has been so much we've done in this regard since I became Chief Executive on 1 April, across all 5 CQC domains – to which I would like to bring the Board's attention as well as congratulating our frontline teams on their efforts and commitment:

In SAFE we have:

- fully embedded the Community Safety Matrix (CSM) across all teams;
- implemented our SPAR ward accreditation programme to further enhance quality and safety on inpatient wards;
- held a successful suicide prevention conference for the region which helped to raise the profile of suicide prevention and bereavement support;
- fully rolled out a stretch target of 95% 48hr follow up post discharge. The Trust is a leading pilot site for the NHS England programme with performance in November 2019 at 90%. This is in addition to the 95% seven day follow-up target which has been maintained;
- embedded an electronic monitoring system for fridge temperatures; and
- been actively engaged in a programme of work with the Mental Health Safety Improvement Programme.

In EFFECTIVE, we have:

- achieved a 'Good' Ofsted rating for our Short Break Learning Disability Service;
- · piloted video consultations with our Memory services;
- successfully embedded a DocMan system which supports safe transfer of discharge summaries to primary care services;
- successfully increased the number of service users participating in research studies;
- implemented a new pathway for acute detoxification to be completed in substance misuse inpatient services as opposed to the Acute Trust;
- increased the size of our High Volume User (HVU) service to ensure extended access for service users who would benefit from the outcomes being achieved; and
- opened our Crisis Care Centre, providing state of the art and additional facilities for our place of safety service, home treatment, access, high volume users and site managers

In CARING, we have:

- co-produced a Person centeredness Framework with service users, carers and staff;
- produced our Quality Priorities with consideration given to feedback from our Service Users and in collaboration with the Service User Carer Council;
- delivered structured Clinical Management Training to staff in inpatient and community areas to support the effectiveness of support to people with a personality disorder;
- developed and launched our Autism Strategy;



- introduced a BAME Practice Education Lead Position supporting the academic and career potential of our BAME workforce;
- co-produced and delivered quality improvement projects with service users/carers and staff;
- increased our number of volunteer peer mentors and support workers and offered a bespoke programme of education to support their development;
- extended our Recovery College to from being web-based to a physical venue.
- introduced compassion focussed clinical supervision;
- dedicated service user involvement in Reducing Restrictive Practice work and in a National Sexual Safety Project; and
- implemented the Observe & Act observation tool designed by volunteers and staff initially for use in community services to help highlight areas of good practice and flag up things that need to improve.

In RESPONSIVE, we have:

- exploited the opportunity afforded by our new Psychiatric Intensive Care Unit to implement further improvements based on trauma informed care;
- implemented new pathways with UHNM and respond to new pathways for mental health liaison and the new Crisis Care Centre;
- further reduced Delayed Treatments Of Care;
- incorporated a stretch target of 95% service users being seen for assessment within 4 weeks of the date of referral into our IQPR;
- again supported the system through increasing our capacity to support winter resilience in particular with older people's services and additional place of safety capacity;
- been selected as one of only 12 sites nationally to be both a CAMHS Trailblazer site for Mental Health Support Teams (MHSTs) in schools and to trial a 4 week referral to treatment target in CAMHS by 2021;
- developed a Values and Behaviors Framework which is about to go live, and agreed a BAME action plan;
- · further embedded Equality Impact Assessments with staff; and
- developed a new model of care that has bought together and collocated: access and home treatment teams; Place(s) of Safety; the Intoxication Observation Unit; and linked to a network of Crisis Cafés.

In WELL-LED, we have:

- appointed to all Executive / Very Senior Manager posts through competitive processes;
- continued to be the STP Mental Health Programme Director, via our Director of Operations;
- continued as Senior Responsible Officer for System Leadership and OD and Mental Health via myself as our CEO;
- received Significant Assurance from Internal Audit with regards to our BAF and Risk Management arrangements;
- reviewed the effectiveness of Board and Senior Management governance arrangements;
- completed an annual Board skills assessment completed providing assurance on skills and abilities of Board members;
- strengthened our approach to Freedom to Speak Up to further complement the other 'being open' initiatives including Dear Peter, Whistleblowing and Raising Concerns
- continued strong engagement with services regarding financial requirements and pressures;
- continued strong grip and control, including around approval of agency and new cost pressures;
- developed improved CIP governance to support identification of schemes, progression and OIA:
- been a pilot site for HFMAs Engagement, Values, Outcomes (EVO) programme, leading to better understanding and engagement with PLICS and AID information to improve patient experience;
- strongly engaged with system partners to deliver improved pathways for MH patients, especially detox pathways and out of area patients;



- developed new ways of contracting with commissioners that support system financial delivery and organisational delivery; and
- developed IQPR and move to SPC reporting / measuring for improvement

So, we begin 2020 with a determination and energy to continue unabated the improvement journey we began a few years ago. Our undimmed ambition is to be Outstanding in ALL we do and HOW we do it and throughout the year to come, we will be working to support all our staff and services to achieve that aim for all of our service users, their carers and families.

A number of initiatives are already in hand and will be involving frontline teams over the coming few months:

- · Completing our review of our strategic priorities;
- Updating our public website and Intranet, with greater content highlighting and celebrating the work and profile of all our staff;
- A review and refresh of our headline achievements, giving all of our teams the opportunity to showcase and shout about the fantastic things they do.

2. A SMALL TOKEN OF APPRECIATION

We also, for the first time this year at Christmas, sent a token of our appreciation to all our frontline teams in the form of a small bag containing a Thank You message - each one personally signed by myself and our Chair - some fruit, chocolates, biscuits and tea bags. It was quite an in-house effort to organise, pack and distribute, but I have been struck by the number of really positive responses I've received from staff for this gesture of recognition. Sometimes, the smallest things can make a big difference

3. NEW BOARD GOVERNANCE ARRANGEMENTS

A review to strengthen the governance arrangements across the Trust committee structure has been undertaken with a view to maximising Exec and Non-Exec Director time and providing as close to real-time data as possible to Board and Committees. This coincides with the routine annual Committee Effectiveness Review that the Trust undertakes. The reporting and sequencing of the meetings has been revised to ensure that the board receives the most up to date information (a month in arrears) moving away from two months in arrears. In doing so, careful planning has been undertaken to ensure that management committees are also aligned so that information is considered by management first prior to going to board assurance committees and the board.

A summary of key changes are:

- · Monthly Private and bi-monthly public board meetings
- All board assurance committees to have three Non-Exec Directors as members and an identified Vice Chair
- Monthly Quality Committee meetings
- Bi-monthly Board development sessions
- Disbanding Primary Care Committee from 31st March and subsequent reporting through Performance meetings
- Disbanding Business Development Committee from 31st March and subsequent reporting through to FP&E

The next steps will be to review all Terms of Reference to ensure they are fit for purpose and align with the changes. Each committee will consider its revised ToRs at its meeting with a view to getting a final version for board sign off in March. This includes reviewing the sub-committees of the assurance committees. Standings Orders and Standing Financial Instructions will also be reviewed so that the whole suite of governance documents is in order and reflects the changes in time for the new reporting year.



4. SUPPORTING A RESTORATIVE JUST CULTURE

Our Board members –Tosca Fairchild, Shajeda Ahmed, Janet Dawson and Patrick Sullivan - attended an intensive 4 day training programme delivered by Mersey Care Healthcare NHS Foundation Trust and Northumbria University on 'Transforming Organisational Culture - Principles and Practise of Restorative Just and Culture.

Mersey Care shared their learning of how a restorative justice approach benefited both the staff and organisation alike, demonstrating a reduction on the formal employee relations cases and the cost savings associated with managing cases on a formal basis.

The programme learning comprised of the OD approach of restorative just culture to support a culture of compassion, learning and continuous improvement through achieving congruence.

They were trained on the implementation of a four step process for managing people process in a supportive way using a restorative just culture approach. Through the application of Restorative Just Culture techniques attempts to understand the contributory factors promotes psychological safety and also facilitates deeper learning and adoption of better practices.

The implementation process heavily features on supporting managers and staff to have restorative conversations and cascading the techniques around restorative just culture learning conversations throughout the organisation and remembering that there can be multiple victims affected as a result of an adverse event.

Next Steps

- To support the implementation of a restorative just culture, the following actions will be taken:
- The Director of Workforce, OD & Inclusion, the Director of Nursing and the Medical Director will apply the four step process retrospectively to a case to determine further learning using this approach.
- The Director of Workforce, OD & Inclusion will deliver a session to the HR Team including Staff Side colleagues on the application of the four step process to enable this to form part of the overall employee relations advice/process.
- The learning from steps 1 and 2 to be shared at People, Culture and Development Committee, Quality Committee and Trust Board.
- Following a review of the learning, all associated organisational polices will be updated accordingly thereafter utilising the current policy ratification process.
- The four step process will form part of the future management training delivery on managing employee relations cases.

5. PLASTIC WASTE REDUCTION PLEDGE

The NHS Long Term Plan published in January 2019 included a commitment for the NHS providers to look beyond the immediate boundaries of healthcare provision and consider their role in helping to influence the shape of local communities and how they might create social value. This included a commitment for NHS providers to consider sustainability as a key criterion of their service provision, specifically how they might reduce waste, water consumption and carbon footprints.

In this context, NHSE/I have published a 'Pledge to reduce Plastic Waste' and have invited all NHS organisations to commit to three specific goals:

- By April 2020, no longer purchase single-use plastic stirrers and straws
- By April 2021, no longer purchase single-use plastic cutlery, plates or single-use plastic cups
- By April 2021, go beyond these commitments in reducing single-use plastic food containers and other plastic cups for beverages

The Trust has already committed to exploring how it can best reflect the ambition of the Sustainable Development Goals (SDGs) across the organisation through the concept of being an 'Anchor Institution'. This is another commitment in the NHS Long Term Plan and is a feature of the Trust's Partnering Strategy approved by the Business Development Committee in August 2019 and ratified



at Trust Board in September 2019. The Trust's delivery programme for the SDGs will be included within the Trust Strategy due for Board approval in March 2020. This will include a commitment to no longer purchase single-use plastic stirrers, straws and cups from April 2020 – in this respect we will be moving faster than the timelines contained within the pledge.

The Trust is also an active partner in the system-wide effort (including all NHS organisations and the two Local Authorities) to produce a 'Sustainable Development Management Plan' (SDMP) that recognises social, environmental and economic determinants to health and will offer ambitions to improve outcomes for our population. This will include specific focus on energy, travel, waste, procurement, water and estates infrastructure. The SDMP will be published in March 2020 follow

6. LOCAL SYSTEM UPDATE

The system continues to develop plans for the 2020/21 financial year. Having provided an initial set of planning assumptions to regulators in mid-December, financial, activity and workforce projections continue to be refined.

Further guidance is due for release during mid-January and will inform our next set of Trust and system submissions prior to April 2020.

The guidance will also provide an update on the expectations for systems to develop Integrated Care arrangements at both a system and place level. Combined is the lead organization in Staffordshire for the development of Integrated Care Partnerships and is working hard with system colleagues to ensure that shadow arrangements are in place over coming months.

7. RECRUITMENT EVENT SUCCESS

On the 10th December we hosted a recruitment open event at Hanley Fire Station. The day was a great success with over 200 people attending. Representatives from all Directorates supported the event including Ward Managers, Nurses and Occupational Therapists providing information on the care and services we provide and what it is like to be on the front line of supporting those who are most in need.

The event was also held in partnership with Keele University who held a stand to promote the fantastic range of qualifications. They commented on how well the day had gone for them and how pleasantly surprised they were at the levels of interest in both degrees and apprenticeships.

As a result of the day we received 131 "Register Your Interest" submissions ranging from Bank Support, Healthcare Support Worker and Nursing. The feedback from the day was excellent with applicants stating that they had found the event very informative and colleagues remarking that it was the most successful event so far. We look forward to the next steps with those that attended the day and hosting similar events in the future.

8. REVIEW OF PEOPLE PLAN

The review of our People Plan is currently underway.

Our People Plan will guide what we do within Combined to develop our People, our culture and how we attract, recruit and retain talented staff. We strive for a transparent organisational culture where our collective leadership is transformational and inclusive, improving our people's experience and shows that we are living our values.

By achieving this, we can further improve the quality of care we are able to provide to our patients, carers, local communities and beyond.

Engagement has already started with the entire HR directorate participating in a workshop, brainstorming where we are, the possibility of what we could achieve and what we believe will have most impact on our staff and patient care.

Our 5th February Leadership Academy session will engage our senior leadership cadre, seeking their views, feedback and input to shape our People Plan.



Staff engagement sessions taking place across the Trust between 21st – 28th February, are aimed at all staff, of all levels and of all professions, both clinical and non-clinical staff, encouraging them participate and provide their feedback on what they believe is important for inclusion in our People Plan

This extensive engagement will shape our People Plan, strengthening our approach and creating buy-in and support for helping us to turn our ambitions into reality.

9. STEPPING UP ALUMNI

We held our first Stepping Up Alumni conference in October for all participants of the programme (from the Staffordshire ICS and beyond). We had some really useful feedback from participants who said the programme was fantastic, providing lots of motivation and inspiration to learning to help our BAME staff progress their careers. We did however, receive feedback that a lot of staff felt they lacked support accessing further development and progression opportunities once they returned to the workplace.

Acting on this feedback, we have circulated a survey to gather and track career progression, career aspirations, development needs, how staff are addressing these needs, plus identifying any barriers they may be encountering. We are also developing a framework, highlighting development opportunities such as coaching, mentoring, reverse mentoring, experience opportunities (including cross-organisational) and will hold further alumni events.

Recent national findings show that health inequalities are 'Profound and growing', threatening the NHS with huge financial implications for our sustainability. Mental health inequalities are often linked with wider cultural and societal systems of disadvantage that impact on a person's wellbeing. There is a clear steer from NHS England and NHS Improvement that Trusts and integrated care systems will be expected to plan delivery against their local health inequalities. We are currently reviewing what implications this may have for Combined and will look to incorporate actions into our Trust service delivery plans.

10. HIGH POTENTIAL SCHEME PARTICIPANT LAUNCH EVENT

Following the kick-off of the High Potential Scheme (HPS) for our STP on 1st April 2019, it was a privilege to be able to confirm the first cohort of participants for the scheme in early December 2019. The open application process for the scheme was a fresh and innovative approach and we are confident that it has enabled us to identify 16 high calibre participants to progress furthest, fastest into senior executive roles in the future

Many months of stakeholder engagement, promotion and a rigorous assessment process took place over the intervening period. We had over 80 applicants for the scheme with over 40 applicants completing all aspects of the assessment process: an application, on-line diagnostic and attending the assessment centres.

A real highlight of the scheme was the spirit of collaboration shown by our 31 assessors from all organisations across the STP system during the assessment centres. Their dedication was a credit to us all and demonstrates the benefits of collaborative working and huge additional value for staff in our system.

The scheme's two year development journey commences for our 16 participants at our launch event on 28th January 2020. The event will celebrate their achievement and showcase the HPS for our system. We are delighted to have secured Chief People Officer of the NHS as our Key Note Speaker.

Post launch, participants of the scheme will work with a careers coach to develop their own personal development plan to support them in gaining practical leadership experience. They will also be supported by a careers mentor, their own organisational sponsor and will participate in Action Learning Sets. There will be four master classes over the course of the 2 years.