

## BOARD MEETING

23 February 2017

Paper Title:	Assurance Reports from Committee Chairs
Section:	Public - Information
Lead Director:	Committee Chairs
Paper Author:	Committee Chairs
Agenda Item:	<b>9</b>
Presented For:	Assurance

### EXECUTIVE SUMMARY:

To update the Board on any significant issues arising from Board Committee meetings since the last Board meeting in January 2017, namely the Quality and Safety Committee, the Audit Committee and the Charitables Committee.

### RELATED RISK(S):

None

### FINANCIAL IMPLICATION:

There are no financial implications arising from the content of this paper.

### RECOMMENDATIONS:

That the Board:

- notes the issues highlighted from the meetings, seeking any further clarification from the Committee Chairs.

### LEGAL IMPLICATIONS:

None

**PREVIOUS MEETINGS/COMMITTEES:**

Highlight whether the paper has been discussed at any of the following meetings:

Audit Committee	<input type="checkbox"/>	Quality & Safety Committee	<input type="checkbox"/>	Remuneration Committee	<input type="checkbox"/>	Finance, Business & Investment Committee	<input type="checkbox"/>
Executive Management team	<input type="checkbox"/>	Directors' Meeting	<input type="checkbox"/>	Charitable Funds Committee	<input type="checkbox"/>	MH Legislation Committee	<input type="checkbox"/>

## Assurance Reports from Committee Chairs

### Background

This paper provides a short update on any significant issues raised at Board Committees since the last Board meeting in January 2017.

Reports from the Audit Committee and the Charitables Committee held on 20 February 2017 will be tabled by the Committee Chairs.

Key items from the Quality and Safety Committee held on 3 February 2017 can be found below:

Progress on previous challenges:

- the committee were assured that Patricia, whose story the board heard at their meeting in June 2016, now reports positively on the support she receives and the way in which services identify and respond to the frequent changes in her daughters health. Patricia is also enjoying volunteering at the Carers Hub
- in managing waiting times for Psychological Therapies and Dementia Assessment Unit staffing is noted below
- the committee were assured that recruitment of two locum pharmacists to the Medicines Management team by BTHFT, who provide the service, was due to commence this month.

One new challenge was identified by the Patient Experience team leading to a delay to planned quality assurance work.

Quality Improvement work continues as noted below notably:

- Triangle of Care
- Relaunch of Smoke Free strategy
- Outstanding Care. This work in the Adult Physical Health Services Business Unit is already leading to improvements.

### Corporate service support for Quality and Safety

#### Patient Experience:

**Triangle of Care:** an initiative to improve and evidence involvement of carers, alongside service users and professionals, in care of the service user. Due to the impact of sickness and maternity leave in the Patient Experience team alongside current resource constraints the committee supported a six month delay to completion of the first phase of the project i.e. completion at the end of this calendar year on inpatient wards and in crisis teams.

**Friends and Family Test:** the committee and board dashboards evidence the ongoing struggle to maintain the flow of service user responses. The committee were advised that the current electronic systems have not been well used. There will be a move to a new provider of a paper based system from April 2017, with the potential to handle double the number of responses received last year.

A total of 72 service users and carers have now been trained to take part in recruitment and selection of staff.

### **Serious Incidents:**

There is an upward trend in the number of serious incidents. Almost all of the increase relates to suicide. The committee were assured that this a national trend. An expert review of all known suicides that have occurred in the local health system in the last five years has been undertaken. Key findings and recommendations will be reported to the committee at their next meeting. The Suicide Reduction group have a number of actions ongoing including suicide awareness training across the Specialist Inpatient Services and Adult Mental Health Services.

The committee has scheduled a deep dive into the nine reports, out of thirteen serious incidents, where no care or service delivery problems were identified.

### **Business Units**

#### **Specialist Inpatient Services** (including Dental and Administration services)

The committee noted ongoing incidents of long call transfer times of up to 20 minutes between the Single Point of Access and First Response. The committee were assured the call pathway is being reviewed. The Single Point of Access is a daytime only service.

The administration service is being redesigned to align with the new Business Units. The committee were assured that the staff concerned view this as a positive development.

There has been no further investment in psychological therapies by commissioners. The move of the service to the Adult Mental Health Business Unit has taken place to facilitate redesign of the service and IAPT into a single clinical and management pathway. Strengthened performance management has been put in place including an electronic patient administration system and weekly targets for the number of consultations.

### **Acute and Community Mental Health**

The committee were assured that the relaunch of the smoke free strategy has been associated with improvements including: improved reporting of smoking incidents, little or no smoking leave, minimal smoking around inpatient entrances and increased availability of support activities for service users and staff.

Wellbeing College: there has been a steady increase in self-referrals

Absence without Leave: the Trust is no longer an outlier, with a fall of "AWOLs" to 0-3/week from 12-20/week