

TRUST BOARD MEETING

30 May 2019

Paper Title:	Chief Executive's Report
Lead Director:	Brent Kilmurray, Chief Executive
Paper Author:	Brent Kilmurray, Chief Executive
Agenda Item:	7
Presented For:	Information
Paper Category:	Strategy & Planning

Executive Summary:

This report includes a number of topical updates regarding our CQC inspection, research and development, prevention and early help and 'Nursing Now'.

Recommendations:

That the Board:

- Receive and note the report

Governance/Audit Trail:

Meetings where this item has previously been discussed (please mark with an X):					
Audit Committee		Quality & Safety Committee		Remuneration Committee	Finance, Business & Investment Committee
Senior Leadership Group				Chair of Committee Meetings	Mental Health Legislation Committee
Council of Governors					

This report supports the achievement of the following strategic aims of the Trust: (please mark those that apply with an X):	
Quality and Workforce: to provide high quality, evidence-based services delivered by a diverse, motivated and engaged workforce	
Integration and Partnerships: to be influential in the development and delivery of new models of care locally and more widely across West Yorkshire and Harrogate STP	X
Sustainability and Growth: to maintain our financial viability whilst actively seeking appropriate new business opportunities	

This report supports the achievement of the following Regulatory Requirements: (please mark those that apply with an X):	
Safe: People who use our services are protected from abuse and avoidable harm	
Caring: Staff involve people who use our services and treat them with compassion, kindness, dignity and respect	
Responsive: Services are organised to meet the needs of people who use our services	
Effective: Care, treatment and support achieves good outcomes, helps to maintain quality of life people who use our services and is based on the best available evidence.	
Well Led: The leadership, management and governance of the organisation make sure it's providing high-quality care that is based around individual needs, encourages learning and innovation, and promotes an open and fair culture.	X
NHSI Single Oversight Framework	

Equality Impact Assessment :
N/A

Freedom of Information:
<p>Publication Under Freedom of Information Act</p> <ul style="list-style-type: none"> This paper has been made available under the Freedom of Information Act.

Chief Executive's Report

1. Background and Context

This report includes a number of topical updates regarding our CQC inspection, research and development, prevention and early help and 'Nursing Now'.

Key Issues

Care Quality Commission (CQC) Well Led Inspection

Further to last month's report, I am pleased to confirm that the Trust submitted its response to the CQC's warning notice of 27 March on time. As Directors are aware, there was a robust response to the issues raised and a number of pieces of work have resulted from the Rapid Improvement week that took place during the week of 1 April. I wanted to take the opportunity to note that there has continued to be a significant commitment from staff and our leaders to rolling out and embedding this work. The introduction of Daily Lean Management, work place audits/checks and the Purposeful Inpatient Admission (PIPA) processes is ensuring that there is a sustainability to the approach and that, whilst errors and omissions are difficult to totally eradicate, there is the ability to discover them in real time and correct them and reduce any potential for harm.

Within the past week, we have received the draft overall report from the CQC for our review of factual accuracy issues. We are currently working through this and will return any matters of accuracy to the CQC on 3 June. The CQC is therefore still on target for the publication of the full and final report in July.

It is clear that we will continue to adopt the approach we have taken with the warning notice to engage staff and partners and to generate ideas and develop our improvement work that should allow us to make our services as safe as possible, improving the experience of patients and improving outcomes.

Nursing Celebration May 2019 & Nursing Now

On 10 May (during the week of International Nursing Day), the Trust hosted a Nursing Celebration day. The day included a number of presentations from staff and other speakers regarding a range of interesting issues. The day also included the presentation by a number of wards to celebrate the commitment of nursing and support staff. The presentations included an important session on the Nursing Now initiative, which the Trust has signed up to.

Nursing Now is a three-year global campaign run in collaboration with the International Council of Nurses and the World Health Organization. It was launched by the Duchess of Cambridge in February 2018 and aims to empower nurses to improve world health, contribute to improved gender equality and build stronger economies.

For the 2019 BDCFT Nursing Celebration Event we will be using the Nursing Now 5 core areas as our framework:

1. Ensuring that nurses and midwives have a more prominent voice in health policy-making;
2. Encouraging greater investment in the nursing workforce;
3. Recruiting more nurses into leadership positions;
4. Conducting research that helps determine where nurses can have the greatest impact; and
5. Sharing of best nursing practices.

Research and Development

During the last month there were two very important meetings that support the progression of the Trust's research and development strategy.

The first included David Sims, Gerry Armitage and I meeting with Prof John Wright of the Bradford Institute for Health Research. John is well known to the Trust and is known for, amongst other key achievements, the Born in Bradford initiative. BIHR has three areas of focus: Patient Safety, Centre for Aging, Child Health. The conversation was about the potential common ground between the work of the BIHR and our agenda. There is clearly lots of common ground around children and young people and older adults but there is lots of potential around patient safety too. The tenor of the conversation was about longer term partnership working and the potential for joint roles. There are also announcements imminent about the award of research funding around physical and mental health that we now need to ensure we are working closely with the University on. Overall, a very encouraging meeting and I anticipate that there will be tangible benefits emerging from this relationship. John has offered to come to the Board to present on the Born in Bradford work should we wish him to.

Later that same week, David Sims, John Hiley, Gregor Russell and I met with Prof Simon Gilbody from the University of York. Simon leads a mental health research group within the Applied Health Sciences department. This was an equally exciting discussion regarding the potential for us to build on the great work we are already doing through Dr Najma Siddiqi on mental and physical health (with an emphasis on diabetes). Simon was keen to explore further opportunities for us to encourage more research activities locally through PhD fellowships, clinical fellowships. Similarly, there will be funding opportunities coming up, which we will review as the opportunities become apparent.

Both institutions have well established relationships with the Trust and are keen to work with us more in the context of our new organisational strategy and specifically the research and development strategy. Gregor Russell and John Hiley, with Gerry's support are considering how we respond and will bring back their thoughts in due course.

Prevention and Early Help

Bradford Health and Wellbeing Board has commissioned work on the establishment of a multi-agency Prevention and Early Help project. West Yorkshire Police has seconded Superintendent Dan Greenwood to lead this work on behalf of the partnership. It is still early in the process and Dan has been engaging with partners to refine the scope and project mandate. The emphasis will be a whole system, whole household approach to working with communities and individuals in need. The overall aim is to ensure a more proactive and coordinated response, reducing the need for crisis interventions and urgent responses. The intention is that this will lead to an improved offer for those in need and deliver better outcomes for people improving life chances.

I have indicated the Trust's support for this work at this stage and we look forward to working with Dan to develop the project mandate and seek the approval of the Health and Wellbeing Board to progress this very important but challenging piece of work.

2. Implications

2.1 Legal and Constitutional

There are no immediate resource implications from this report.

2.2 Resource

There are no immediate resource implications from this report.

2.3 Quality and Compliance

There are no direct implications arising from this paper.

3. Risk Issues Identified

Risk	Likelihood High/Medium/Low	Implication	Mitigation
None identified - see Section 2 (above)			

4. Communication and Involvement

Where required, communication and involvement arrangements are made for specific items included in the CEO report and communicated within the narrative.

5. Monitoring and review

This will be included regularly in the monthly CEO report and is likely to require separate Board papers in addition.

6. Timescales/Milestones

Not applicable.