

## TRUST BOARD MEETING

25 July 2019

Paper Title:	Trust Board Walkabouts
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Agenda Item:	<b>17</b>
Presented For:	Information
Paper Category:	Quality

### Executive Summary:

BDCFT Quality and Safety Walkabouts have been running successfully since 2010. Board walkabouts are now using a themed approach and the recent visits took place on the acute in-patient wards.

This paper provides a summary of the themes highlighted across the wards. Each area receives a letter following the visit highlighting areas of good practice and improvements and the challenges they are facing. Where relevant, actions will be identified and followed up locally by the Ward Manager.

### Recommendations:

That the Board:

- Note the themes arising from walkabouts in respect of improvements and challenges and the process of managing the outcomes.

**Governance/Audit Trail:**

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

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

<b>This report supports the achievement of the following Regulatory Requirements:</b> <i>(please mark those that apply with an X):</i>	
<b>Safe:</b> People who use our services are protected from abuse and avoidable harm	x
<b>Caring:</b> Staff involve people who use our services and treat them with compassion, kindness, dignity and respect	
<b>Responsive:</b> Services are organised to meet the needs of people who use our services	x
<b>Effective:</b> 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.	x
<b>Well Led:</b> 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.	
<b>NHSI Single Oversight Framework</b>	

## Summary of Board Walkabouts for 27 July 2019

### 1. Background and Context

BDCFT Quality and Safety Walkabouts have been running successfully since 2010. The aim of the Quality and Safety Walkabouts is to:

- increase the awareness of quality and safety issues amongst all staff;
- make sure safety remains a priority for senior leaders;
- increase understanding of service user safety concepts such as incident reporting and risk registers;
- act on information that identifies areas for improvement;
- build relationships with frontline staff; and
- to discuss issues relating to staff engagement locally and corporately (a temperature test relating to the Staff Survey and the iCare programme).

Walkabouts were previously arranged throughout the year with services. BDCFT Trust Board agreed a new approach to the Board Walkabouts and these would take place the months there is a private board meeting, June, October and December 2019. All the Board member participate in this and a themed approach would be used.

### 2. Report detail

The revised approach was first used following Trust Board on 27 June 2019. The area of focus was acute in-patient services given the recent CQC S29A Warning Letter in March 2019.

Ward	Site	Attending	Attending
Ashbrook	LMH	Patrick Scott	Carole Panteli
Maplebeck	LMH	Tim Rycroft	David Banks
Oakburn	LMH	Brent Kilmurray	Simon Lewis
Clover Ward	LMH	Sandra Knight	Zulfi Hussain
Fern	ACMH	Paul Hogg	Mike Smith
Heather	ACMH	Liz Romaniak	Rob Vincent

## **Themes arising from the walkabouts**

### **Positives**

The Executives received positive feedback in several areas. A particular theme was the staff experience of the Rapid Improvement Week (RIW) and Clinical Summit, where they reported how beneficial it had been to them and the wards to work through issues. Staff fed back that the Daily Lean Management process and report out boards were supportive of discussing and managing risks. They also spoke of other actions taken in the RIW, such as the introduction of the SBARD assessment tool and improvements to the functionality of SystemOne.

Ward staff were very positive about the introduction of the functional model and of how this will support many aspects of safe care and treatment of our service users.

The current and planned improvements to ward environments were noted including the new murals on Heather and Fern Wards and the planned 3D imagery for Maplebeck. The feedback on the service user library and Four Seasons Café were also positive.

Ward staff have reported that the introduction of 12 hour shifts had a positive impact of staff morale and absence

### **Areas of challenge**

There were several areas which staff reported were a challenge at this time. The issue of managing leave where service users leave the ward for a cigarette was reported as problematic, especially around managing the documentation requirements. Staff also reported that a lot of time was spent managing smoking related incidents.

Ward staff raised some individual issues about ward environments such as the resource required to support service users in accessing the gym at Lynfield Mount. The Moorlands Suite at ACMH was felt to require some additional investment to improve the area. The ward manager is progressing this via charitable funds.

Some staff reported ongoing issues with SystemOne but, as stated above this area of concern was improving.

Wards reported that there are difficulties around balancing risks alongside the management of blanket restrictions which has featured in the CQC 2019 report.

Staff explained some of the challenges of the patient pathway from admission to discharge and on occasions the length of stay and occupancy levels can be problematic. Letters with agreed actions will be sent to all wards and there are individual actions for all areas.

## **3. Implications**

### **3.1 Legal and Constitutional**

None

### **3.2 Resource**

None

### **3.3 Quality and Compliance**

Letters with agreed actions are sent to the ward managers

### **4. Risk Issues Identified**

None

### **6. Monitoring and review**

A report will be provided following the October walkabout.