

## Meeting of the Board of Directors - **Public**

**10 March 2022**

|                      |                                 |                                      |
|----------------------|---------------------------------|--------------------------------------|
| <b>Paper title:</b>  | Chief Executive's Report        | <b>Agenda item</b><br><br><b>9.0</b> |
| <b>Presented by:</b> | Therese Patten, Chief Executive |                                      |
| <b>Prepared by:</b>  | Therese Patten, Chief Executive |                                      |

| Purpose of the report  |                 |          |
|--|-----------------|----------|
| The purpose of the report is to provide commentary on strategic, operational and systems issues. | For approval    |          |
|  | For discussion  | <b>X</b> |
|  | For information | <b>X</b> |

| Executive summary  |   |  |
|--|---|--|
| <p>The purpose of this report is to inform the Trust Board of significant issues that occurred in the past month. The key headline discussed in the report is:</p> <ul style="list-style-type: none"> <li>• <b>Ukraine Conflict</b></li> <li>• <b>Trust news</b></li> <li>• <b>System and national developments</b></li> <li>• <b>Media coverage</b></li> <li>• <b>Regulatory Matters and Visits</b></li> <li>• <b>Patient Safety Incidents and Never Events</b></li> <li>• <b>Reportable issues</b></li> <li>• <b>COVID-19</b></li> </ul> |   |  |
| Do the recommendations in this paper have any impact upon the requirements of the protected groups identified by the Equality Act?   | <p style="text-align: center;"><b>State below</b><br/><b>'Yes' or 'No'</b></p> <p style="text-align: center;"><b>No</b></p> | If yes please set out what action has been taken to address this in your paper |

| Recommendation   |
|--|
| <p>The Board of Directors is asked to:</p> <ul style="list-style-type: none"> <li>• Note the content of the paper, and</li> <li>• Seek any further clarification as appropriate</li> </ul> |

| <b>Strategic vision</b>                                  |                                 |  |  |                         |
|--|---------------------------------|--|--|-------------------------|
| Please mark those that apply with an X                   |                                 |  |  |                         |
| Providing excellent quality services and seamless access | Creating the best place to work | Supporting people to live to their fullest potential | Financial sustainability growth and innovation | Governance and well-led |
| X  | X                               | X  | X  | X                       |

| <b>Care Quality Commission domains</b> |           |            |        |          |
|--|-----------|------------|--------|----------|
| Please mark those that apply with an X |           |            |        |          |
| Safe                                   | Effective | Responsive | Caring | Well Led |
| X                                      | X         | X          | X      | X        |

|  |  |
|--|--|
| <b>Relationship to the Board Assurance Framework (BAF)</b> | <p>The work contained with this report links to the following strategic risk(s) as identified in the BAF:</p> <ul style="list-style-type: none"> <li>• SO1</li> <li>• SO2</li> <li>• SO3</li> <li>• SO4</li> <li>• SO5</li> <li>• SO6</li> </ul> |
| <b>Links to the Supporting Operational Risk Register</b>   | <p>The work contained with this report links to the following corporate risk(s) as identified in the Supporting Operational Risk Register:</p> <ul style="list-style-type: none"> <li>• N/A</li> </ul>   |
| <b>Compliance and regulatory implications</b>              | <p>The following compliance and regulatory implications have been identified as a result of the work outlined in this report:</p> <ul style="list-style-type: none"> <li>• N/A</li> </ul>  |

## **Board of Directors – Public Thursday 10<sup>th</sup> March 2022 Chief Executive Report**

The Chief Executive report provides an overview of news, events and significant issues that have occurred during the month that require Trust Board to be aware of and/or to discuss.

### **1 Ukraine Conflict**

We are shocked and saddened to see the situation in Ukraine and are doing all we can to support staff who are directly or indirectly affected by this. On the 26<sup>th</sup> February the Secretary of State sent a letter to all Ukrainian health and care staff in the UK (Appendix 1) and our HR team have been leading work to identify and support all those affected. The Staff Support and Therapy Service have offered a number of circle time sessions where staff can meet together and discuss their concerns or if they prefer book a one-to-one appointment. For staff, who may have family and friends in Ukraine, the Trust's Employee Assistance Programme (EAP) have put together a comprehensive list of support available for people in Ukraine including organisations and their contact details. The regional and national health and wellbeing support offer to staff has also been promoted including access to free mental wellbeing apps. The letter to Ukrainian staff from Savid Javid has also been loaded onto Sharepoint and has been cascaded via managers. In addition, a specific page on Sharepoint has been set up detailing all the support and resources available around the Ukrainian conflict. We will continue to reach out and support our staff as the situation unfolds.

### **2 Trust news**

#### **Article in the International Journal of Geriatric Psychiatry**

Our research and development team have been working on a project with colleagues from Leeds, Hull and Cambridge to do a comparative evaluation of inpatient dementia units across the four Trusts. It has taken some time but they have successfully had an article published in the International Journal of Geriatric Psychiatry (Appendix 2). This is the first multi-site review conducted anywhere in the world, and it describes the staffing and activity in units that will be recognisable to clinicians across the UK and beyond. As such it is a significant addition to the literature in this field.

The most important message from the article is that, despite arising organically in response to local needs rather than out of any centralised commissioning framework, all four units look remarkably similar across a range of attributes - from the number

of beds per person, to admissions per year, lengths of stay and admission being an inflection point leading to a move to 24-hour care. This should give us assurance that our DAU looks to be performing in line with comparator units.

The article reflects the great work our teams do in research and thank you to everyone involved especially Raj Gohri, Greg Sawiuk, Wali Nazar and Darren Roberts, who were a huge help in finding and collating the data we used in the analysis.

### Better Lives Charity 2022 – Your charity!

During the past year due to the fantastic work of our Charity we have been able to fund many extras for staff, volunteers and service users - from rainbow gardens to blood pressure monitors, music therapy and allotments, RITA equipment and hand creams. The Charity has big plans for 2022 and is asking all of us for support. We are being asked to consider planning our own fundraisers, such as hosting a bake sale, running a marathon, or simply joining the staff lottery or pennies from heaven. We can also join one or more of the Charity organised fundraisers which are set out in the calendar below, with events across the year. The Charity is asking all colleagues, friends, family and communities across Bradford and Craven to get involved – we are invited to walk, run, swim, eat, paddle, have a cuppa, shake a bucket, pop on your glad rags, or maybe just share on social media! My thanks to our Charity staff who do so much to make this work successful and fun.

| 2022                                |   |  |  |  |
|-------------------------------------|---|--|--|--|
| <b>MARCH</b><br>Social supper club  | <b>APRIL</b><br>Three Peaks training walks (Free of charge) | <b>MAY</b><br>5k in May                      | <b>JUNE</b><br>5 June - Brathay Cross Bay walk | <b>JULY</b><br>3 July - Dragon boat race<br>5 July - NHS Big Tea             |
| <b>AUGUST</b><br>Social supper club | <b>SEPTEMBER</b><br>10 Sept - Yorkshire Three Peaks         | <b>OCTOBER</b><br>8 Oct - P.E.C charity ball | <b>NOVEMBER</b><br>Social supper club          | <b>DECEMBER</b><br>Christmas gift appeal<br>Alhambra panto bucket collection |

Register your interest today, limited spaces available  
[betterlivescharity@bdct.nhs.uk](mailto:betterlivescharity@bdct.nhs.uk)

Charity No. 1130011

## Islamophobia statement

Here at the Trust, we want to ensure that we do all we can to tackle Islamophobia which can be experienced by our Muslim service users, patients and staff. Our Trust this year supported Islamophobia Awareness Month in November along with West Yorkshire and Harrogate Health and Care Partnership (WYH&CP) by raising awareness of the threat of Islamophobic hate crimes and emphasising the positive contributions that British Muslims make to society. The Trust launched an Anti-racist toolkit in 2021 to support staff to increase their knowledge and continue to have conversations and address racism.

Bradford District Care NHS Foundation Trust supports the recommendations (Appendix 3) and call to action in the report 2020: Tackling health inequalities for Black, Asian and minority ethnic communities and colleagues commissioned by WYH&CP of which our Trust is a proud partner. We will continue to support and play our part in WYH&CP Root out Racism movement and Health Inequality Fellowship as well as act on the recommendations from the report. We will continue to tackle Islamophobia as part of our belonging and inclusion work and support those that are affected by it.

## 3 System and national developments

### The Health and Care Bill

The Health and Care Bill continues to make progress through parliament, and details have been published of the first amendments in areas including mental health, inequalities, and climate change. This follows pressure from peers and other groups, in recent months.

There are three mental health amendments which are:

- requiring the definition of health to include mental health,
- placing a duty on new integrated care boards to have mental health expertise; and
- requiring more transparency and accountability on mental health funding

On the funding matter the Health Secretary will be required to state each year whether mental health spending is increasing as a share of overall NHS funding, and by how much. Integrated Care Systems, alongside NHS England, must also include information about mental health funding in annual reports. We very much welcome these amendments and feel they will help on our journey towards parity of esteem for mental and physical health.

## **Joining up Care for People, Places and Populations**

On the 11<sup>th</sup> February the government published a White Paper, Health and Social Care integration: joining up care for people, places and populations. This integration paper sets out the government's ambition to accelerate the delivery of joined-up health and social care as a way of improving health and care outcomes and making best use of public resources.

The White Paper has been developed in recognition that our populations have a range of needs which cannot be addressed by one organisation. We know that our patients and service users often feel the lack of coordination between our services, that resources are often duplicated and that there are often delays in care due to competing budgets or care processes.

The White Paper seeks to deliver a joined-up vision by introducing shared outcomes for person centred reform, agreed by all local health and care organisations and by holding local leaders to account for delivery. Work is focused at Place level, where local government and the NHS face common challenges requiring joint action and recommends a single point of responsibility and accountability for shared outcomes and effective leadership.

I very much welcome the White Paper and the ambition for better integration across primary care, community health, adult social care, acute, mental health, public health and housing services. It builds on work we have been doing in our Place, Bradford District and Craven, where as partners through ActasOne we are developing shared outcomes that focus on our people and populations rather than systems and institutions. We are already making progress towards a number of key deliverables in the White Paper, including:

- a single person accountable for delivering shared outcomes at place level by Spring 2023
- a significant and, in many cases, growing proportion of health and care activity and spend overseen and funded through the place-based partnership
- oversight arrangements with a clear focus on the planning and delivery of shared outcomes at Place level
- the exploring of other integration enablers including workforce, digital and data

Our Integrated Care System published a response to the Health and Social Care Integration White Paper <https://www.wypartnership.co.uk/news-and-blog/news/response-to-health-and-social-care-integration-white-paper-24-february-2022>

## **4 Media coverage**

Media and news highlights since the last Board meeting include:

**External media report – April 2021 - May 2022**

| April 2021 - May 2022 media monitoring |       |      |                              |      |                    |   |         |          |               |                |          |         |            |
|--|-------|------|------------------------------|------|--------------------|---|---------|----------|---------------|----------------|----------|---------|------------|
| Objective                              | April | May  | June                         | July | August             | September                                       | October | November | December      | January        | February | Average | Cumulative |
| Local media                            | 16    | 21   | 29                           | 27   | 15                 | 13  | 15      | 7        | 12            | 16             | 21       | 17.5    | 191        |
| National coverage                      | 0     | 0    | 1                            | 0    | 1                  | 2   | 0       | 0        | 1             | 1              | 1        |         | 7          |
| Twitter engagement                     | 864   | 884  | 1428                         | 790  | 701                | 952   | 663     | 858      | 660           | 432            | 520      | 796     | 8752       |
| Facebook engagement                    | 795   | 1005 | 1600                         | 1221 | 532                | 1402  | 1319    | 1305     | 1070          | 1480           | 1066     | 1163    | 12795      |
| National coverage and campaigns        |       |      | National Medical Health News |      | The Asian Standard | Mental Health today. National Health Executive. |         |          | Asian Express | Asian Standard | RCNI     |         |            |

**February coverage:**

- **New service for those with Long Covid** – BCB Radio (x1), BBC Radio Leeds (x2), Keighley News (x2), Ilkley, Wharfedale & Airedale Gazette and Observer (x1), Telegraph & Argus (x2), Ilkley Gazette (x1)
- **Second gold star for completion of phase two of the Triangle of Care scheme** – Keighley News (x2), Telegraph & Argus (x2)
- **This year’s Time to Talk day theme** – BCB Radio (x2)
- **MyWellbeing College name change** – BCB Radio (x1), Telegraph & Argus (x2), Keighley News (x1)
- **Kindness, Compassion and Understanding primary school campaign** – BCB Radio (x1)
- **Jacob’s Well one year anniversary** – BCB Radio (x2)

Negative media coverage:  
None

## 5 Regulatory Matters and Visits

We have had no Mental Health Act reviews during January or February.

## 6 Patient Safety Incidents and Never Events

In terms of patient safety incidents six new SI’s have been reported since last board:

- January - Suspected suicide (2)
- February - Unexpected death (2) Suspected suicide (2)

Currently we have 14 open investigations:

- 1 with agreed extension and 2 on stop the clock
- 1 investigation was completed in January with learning identified being limited adult safeguarding documentation, exploration, and escalation

Two inquests were held during the period one in January and one in February – with a road traffic collision conclusion and a suicide conclusion, there were no HMC actions or criticism for the Trust, the Coroner noted the recognition of the learning by the Trust case which was not contributory.

Since the last report no Never Events have been reported.

## **7 Reportable issues**

We have had two CQC reportable incidents since the last report, both relating to the death of detained service users:

- Death of a detained service user whilst on planned agreed Section 17 leave: no cause of death has been confirmed by the HM Coroner and they are awaiting toxicological results due to suspected substance use
- Death of a detained inpatient: no cause of death has been confirmed by the HM Coroner and they are awaiting post-mortem results due to suspected physical health causes

In addition, we have had two AWOLS, one of which was CQC reportable:

- Thornton abscond from escorted leave (this was low secure and reportable)
- Baildon failed to return from authorised leave (this wasn't low secure reportable as return was before midnight)

## **8 COVID-19**

The executive team continue to lead the Trust response to the pandemic. The following slide deck highlights the key issues for Board to note:

**Therese Patten**  
**Chief Executive**

**2 March 2022**