

## Recent 'Go See' Board Service Visits

- The Go See Service visits offer opportunities for Executive and Non-Executive Directors to see where the work happens within the Trust and build relationships with staff based on mutual trust. The visits are an opportunity to get an overview of what is going on in the workplace, offering the ability to gain insights into potential improvement opportunities.
- Visits following the April Board Meeting were to the following services:

Service Visited	Executive and Non-Executive Directors Involved
Palliative Care	Andrew Chang and Tafadzwa Mugwagwa
Homeless & New Arrivals Service	Carole Panteli and Paul Hogg
MyWellbeing IAPT – Airedale Team	Simon Lewis and Tim Rycroft
MyWellbeing IAPT – City Team	Maz Ahmed and Bob Champion
MyWellbeing IAPT – North Team	Mark Rawcliffe and David Sims
MyWellbeing IAPT – South Team	Alyson McGregor and Therese Patten

## Key issues emerging from visits\*

Service Visited	Key issues raised
Palliative Care	<p>Change in team leadership and a changing picture of what the service offers, but good continuity from long-standing staff within the team and a good quality of service being delivered. Commitment given to work with commissioners to ensure the service offer aligns to local plans. Currently exploring moving to a 7 day service, using e-prescribing and increasing the team.</p> <p>Continuing with telephone triage and referrals, struggle with GPs not engaging with patients at end of life, to be picked up at Palliative Care Clinical Network.</p> <p>Suggested that the KPO and TWICS team make contact to support on transformation programme.</p>
Homeless & New Arrivals Service	<p>Experienced and well established team with a current focus on TB screening, supporting increasing number of asylum seekers and signposting of services for homeless people during COVID-19. Some issues raised about information sharing on SystemOne across MH services and this service, and the need to access weekly asylum seeker data of those who are in temporary accommodation to support TB screening. Data sharing agreement requested.</p>
MyWellbeing IAPT – Airedale Team	Letter not yet available

\*Go See letters provide more detailed information about the visits which have been submitted to the Quality Governance for triangulation. Significant highlights only will be raised verbally at Public Board.

## Key issues emerging from visits\*

Service Visited	Key issues raised
MyWellbeing IAPT – City Team	<p>Resources reportedly stretched but staff morale and wellbeing good. Some frustrations regarding limited career development and a lack of senior roles.</p> <p>Need to review access criteria as often seeing people more appropriate for CMHT.</p> <p>Staff struggling with pace and complexity of workloads.</p> <p>Impact of increasing service users who are refugees, bringing a different challenge.</p>
MyWellbeing IAPT – North Team	<p>Hard working high achieving team with robust processes in place to manage the workload.</p> <p>Issue with electronic patient record not interacting with that in Primary Care or Acute Trust.</p> <p>Concerns around understanding the nature of referrals to the team and onward referrals to community teams or IHTT.</p> <p>Would like to see improvement in the work with individuals with emotional regulation issues.</p>
MyWellbeing IAPT – South Team	Letter not yet available

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