

TO: 2gether NHS Foundation Trust Board

FROM: Shaun Clee – Chief Executive

DATE: 28th September 2009

SUBJECT: CHIEF EXECUTIVE'S REPORT

PURPOSE

To bring to the attention of the Board significant items of business in progress.

Items of business requiring decision or reporting performance against service agreements are the subject of specific papers on the Board's agenda. The Chief Executive's Report provides the opportunity for significant issues to be brought to the attention of the Board outside this framework.

SUMMARY OF KEY POINTS

- Care Quality Commission registration required by 1 April 2010
- New guidance on information sharing for Mental Health
- Consultation on temporary changes to the Mental Health Act
- Launch of consultation on Quality Accounts
- The Big Care debate commences
- Top ten impact changes for nurses and midwifery to be launched at CNO's summit on 11 November

RECOMMENDATIONS

The Board is asked to note the contents of this report.

WHICH TRUST KEY STRATEGIC OBJECTIVES DOES THIS PAPER PROGRESS OR CHALLENGE?

Quality and Safety	P	Skilled workforce	P
Getting the basics right	P	Using better information	
Social inclusion	P	Growth and Financial Efficiency	
Seeking involvement	P	Legislation and Governance	

WHICH TRUST VALUES DOES THIS PAPER PROGRESS OR CHALLENGE?

Seeing from a service user perspective			
Excelling and improving	P	Inclusive open and honest	P
Responsive		Can do	
Valuing and respectful	P	Efficient	

REVIEWED BY:	
	Date
	Date
Forums / Community groups whose views have been sought	
	Date

1. CONTEXT

1.1 National Context

1.1.1 Care Quality Commission

The regulation of health and adult social care services is changing. New registration standards are being introduced that will apply to NHS trusts for the first time. Standards for Better Health for the NHS are being replaced by these new registration requirements – essential common quality standards across the care sector.

All NHS trusts (including primary care trusts as providers) must be registered with CQC from 1 April 2010. To help preparation for registration The CQC has broken the development and roll-out of the new system into five phases. Later this month the CQC will be sending out a leaflet explaining the registration phases and giving more detail about what providers will need to do.

The director of Quality and Performance has ensured that these have been built into the Business Planning guidance.

1.1.2 Safety in doses

The National Patient Safety Agency (NPSA) has published *Safety in doses: improving the use of medicines in the NHS*, a detailed view of medication safety incidents reported to the NPSA's Reporting and Learning System. The document looks at patterns of reporting and what the NHS can learn from serious medication safety incidents. To view the report: www.npsa.nhs.uk/nrls/medication-zone/reviews-of-medication-incidents

The Chief Executive has asked that this report be reviewed by the Delivery Committee.

1.1.3 Backing Young Britain

The Government has recently launched Backing Young Britain. The campaign asks businesses, employers, voluntary organisations and public sector bodies to join the Government in helping young people through the current difficult economic times by providing access to jobs, apprenticeships, training and work experience. The campaign has strong personal support from the Prime Minister and other ministers across Government.

1.1.4 Regulations and guidance on responsible officers

Responsible officers will play a vital part in supporting organisations and doctors as they strive to improve the quality of care they deliver. Once introduced by the GMC, they will also have a key role in confirming the fitness to practise of individual doctors as part of the revalidation process.

Link: www.dh.gov.uk/en/Consultations/Liveconsultations/DH_104587

1.1.5 **Tackling Violence Action Plan: One year on**

The Tackling Violence Action Plan *Saving Lives. Reducing Harm. Protecting the Public* supported the delivery of the Home Office led PSA 23(1): reducing all forms of violence with injury.

Link: www.crimereduction.homeoffice.gov.uk/violence/violence028.htm

1.1.6 **Pandemic influenza and changes to the Mental Health Act**

A consultation exercise is running until 7 October on temporary changes to the Mental Health Act 1983, which might be needed in the event of a severe staff shortage during an influenza pandemic.

Link: www.dh.gov.uk/en/Consultations/Liveconsultations/DH_103683

The Chief Executive has asked the Chief Operating officer to coordinate a draft response to the consultation from the organisation. Given the date at which the consultation closes, this will require Chief Executive action and the Board are requested to provide guidance on any specific points that they would wish included in the response to the Chief Operating Officer in good time for the response to be drafted.

1.1.7 **Taskforce on health aspects of violence against women**

The new taskforce aims to identify the role and the response of health services in preventing, identifying and supporting women and girls who are victims of violence or abuse. It will also make recommendations on what more could be done to meet their needs. The taskforce will report in early 2010.

Link: www.dh.gov.uk/en/Healthcare/ViolenceagainstWomenandGirls/index.htm

1.1.8 **Information sharing and mental health**

This guidance sets out some of the issues relating to the exchange of information between mental health trusts and external organisations and individuals. It sets out when, why and how information can safely be exchanged for the benefit of the individual and the public.

Link: www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_104949

The Chief Executive has asked the Caldicott Guardian to review existing arrangements within the organisation against this guidance and make recommendations as appropriate.

1.1.9 **Learning Community, 20–21 October 2009**

The NHS Institute for Innovation and Improvement and Ashridge Consulting recently organised an action-learning network for senior leaders handling complex improvement challenges. They are now offering a new opportunity for chief executives to build their own discreet group within this programme.

Link: <http://tools.ashridge.org.uk/nhseshot>

1.1.10 **Monitor reviews learning from Mid Staffordshire failings**

Following the publication of the Healthcare Commission's report into significant failings in quality of care at Mid Staffordshire NHS Foundation Trust, Monitor commissioned our internal auditors KPMG to examine how our methods and processes could be improved. The purpose of this review was not only to learn potential lessons, but also to share them with others in the healthcare system. The report makes fourteen recommendations, each of which we accept and against many of which we have already made good progress. There are two main themes:

1. The need for better sharing of information across the healthcare system.

Monitor has already taken action in this area. We have agreed arrangements with the Care Quality Commission (CQC) to ensure that we are informed about concerns that they might have about the quality of care delivered by foundation trust applicants and that these concerns are resolved before a decision is taken to authorise the applicant. Arrangements have also been agreed to share information about under-performing foundation trusts and to coordinate any action. These agreements are part of the Memorandum of Understanding which Monitor and the CQC have now signed and which is available on our website.

2. The need for Monitor to focus on developing a more effective approach to assuring itself that appropriate clinical governance is in place in applicant or existing foundation trusts. By clinical governance we mean the combination of structures and arrangements in place at, and immediately below, the board level to manage and monitor clinical performance, plan and manage continuous improvement, identify performance that may be below standard or out of line, investigate it and take management action. We have already commenced an independent study of this area.

1.2 Local Context

1.2.1 RiO

The RiO IT system will replace all existing electronic records within the Trust, and Phase I is due to go-live on 23rd March 2010, involving approx 570 staff comprising most of WAA. Other phases are due to be completed by December 2010. On 21st August the Rio Project achieved Stage 2a, a major milestone reflecting the hard work that people across the Trust have contributed to the project. Stage 2b extends to 19th November and involves Transformation workshops and location preparation. Detailed information in the form of FAQ's and planned deployment is available on the recently launched RiO intranet page.

1.2.2 Debbie Furniss has successfully completed the Health Foundation course designed for exceptional leaders in the NHS. Competition was fierce to be accepted on the course, with only 15 people from across the country being accepted. It has been twelve months of many evenings and weekends on top of the leadership role she has in Learning Disability services, and more recently leading the Pandemic Flu resilience planning. The Chief Executive Officer and Chief Operating Officer went to Lancaster University (partner in the running of the course) to receive feedback on her achievements and receive Debbie's final presentation on her learning from the course.

1.2.3 Colin Merker took up post as Director of Internal Customer Services on 21st September. Colin has worked within the NHS for over 30 years, the past 15 within mental health, learning disabilities and substance misuse services management. He has a wealth of experience as a committed leader, director, supporter and initiator of change.

At ²gether, one of Colin's key objectives will be to ensure that the necessary infrastructure is in place to support clinicians and managers in delivering the highest quality care. His work as a leader and team builder will ensure that the Trust's vision to provide excellence is reflected in its internal services and working relationships.

2. RECOMMENDATION

- 2.1 Members of the Board are asked to receive the report and note its content.