

**Council of Governors' Meeting: 8<sup>th</sup> March 2017****Chief Executive's Report****1. Welcome and Introduction**

- 1.1 This paper provides an update to the Council of Governors on the current issues for the Trust. I will be happy to respond to questions Governors may have on these or any other issues.

**2. Performance & Governance**

- 2.1 The Trust continues to deliver its requirements under the Single Oversight Framework. The Trust is currently placed within Segment 2 within this framework.
- 2.2 The Council of Governors' Finance, Planning & Performance Sub Group continues to review the Trust's performance, including key operational targets.

**3. National Developments****3.1 *NHS England Mental Health Briefing***

In January 2017, NHS England released a briefing on Mental Health.

The independent Mental Health Taskforce's report recommended investing significantly to improve care – crisis care, psychological therapies, and liaison services in A&Es, suicide prevention, perinatal and children and young people's services – supported by additional investment in mental health growing to £1bn annually by 2020/21. NHS England together with their partner Arm's Length Bodies has accepted the Taskforce's recommendations and are almost a year into implementing a new mental health programme to deliver the change outlined by 2020/21 that will see an extra 1m children, young people and adults receiving high quality support when they need it.

NHS England is committed to delivering the transformation of children and young people's mental health set out in Future in Mind, endorsed and extended in the Taskforce's report. By 2020/21, 70,000 more children and young people will receive swift and appropriate access to care each year.

Local areas are being supported to develop joint agency Local Transformation Plans, aligned with Sustainability and Transformation Plans, to set out action plans for change across the whole pathway, from inpatient care to crisis care and community service provision.

Following the introduction of the referral to treatment standard for children and young people with eating disorders in 2015, there are now 61 community eating disorder teams for children and young people across the country. By 2020, 95% of those referred for assessment or treatment for an eating disorder should receive NICE concordant treatment within one week for urgent cases and within four weeks for routine cases.

A national public consultation on specialised inpatient children and young people's services will shortly be launched, as part of a reconfiguration of care aimed at improving access to services as close to home as possible, and ending avoidable out of area placements.

### *3.2 Allied Health Professions join forces to help shape future healthcare*

England's 145,000 allied health professionals will be encouraged to innovate and lead within the NHS and wider care system under a new shared commitment published by NHS England in January 2017.

'Allied Health Professions into Action' has brought together the views of the third largest workforce in the health and care system, including chiropodists, dieticians, orthoptists, paramedics, physiotherapists, art therapists and speech and language therapists. It sets out how the 12 Allied Health Professional groups across England can be at the forefront of innovative changes to patient care and shape future health policy by having a full involvement in transformation plans being developed across the country.

The new guidance aims to provide a blueprint for Clinical Commissioning Groups, provider organisations, health leaders and local authorities to fully utilise and involve Allied Health Professionals (AHPs) in transformation programmes and the delivery of NHS England's Five Year Forward View. It offers 53 examples of AHPs working to drive and support change by working innovatively, and a framework to help utilise AHPs in the development and delivery of transformation planning.

### *3.3 New guidance to address obesity in mental health secure units*

Public Health England has issued new guidance in February 2017 to address obesity in mental health secure units, based on research by the University of Sheffield. Recommendations are for commissioners and providers to work together to improve access to health promotion approaches and the associated training and equipment required, employ a range of dietary and physical activity strategies, and make policy changes at ward level that address staff and patient behaviour change.

### *3.4 NHS Improvement review into community and mental health trusts' operational productivity*

NHSI has now commenced its review into community and mental health trusts, building on the approach of the Carter report on operational productivity and performance in NHS acute hospitals. As Lord Carter was finalising his report, he was contacted by many community and mental health trusts who expressed willingness to be involved in a similar detailed approach.

In his role as a Non-Executive Director in NHS Improvement, Lord Carter is overseeing and steering the NHSI review. His intention is to follow a similar structure and methodology of his original acute review, with some significant tailoring to community and mental health.

The review's aims are to understand:

- how organisations in mental health and community trusts operate
- what good looks like
- what approaches to improving productivity and efficiency are already in place and what opportunities there are to drive these further
- what metrics and indicators are required to support the development of the model for these sectors

Mirroring the approach taken in the acute sector review, a cohort of 23 trusts across both community and mental health has been set up, with which more detailed engagement will be focused over the initial stages of the review process over the next six months.

### *3.5 NHS Improvement's independent panel for advising governors disbanded*

The national panel for advising NHS foundation trust governors was introduced by the Health and Social Care Act 2012. The panel's role was to answer questions from NHS foundation trust governors about whether a trust has failed or is failing to act in line with its constitution or Chapter 5 of the NHS Act 2006

A governor could refer a question to the panel if more than half of the members of the council of governors voting agreed to the referral. Governors must have given the panel evidence of this voting process before they could consider a question.

Since governors have chosen not to make use of the Panel's facility (including raising substantive questions) in accordance with the referral criteria laid out in legislation – NHS Improvement took the decision to disband it in January 2017 with the full support of the Panel's Chair, Linda Nash.

## 4. Local Developments

### 4.1 *CQC visit*

As you are aware our week-long CQC inspection took place from 23 to 27 January and again the dedication, focus and efforts of all staff were acknowledged by the inspectors. I am grateful to everyone for helping us to prepare for our visit, taking part in the different groups and meetings with inspectors. The feedback I received at the end of the week was very positive about how staff welcomed them. I am also very grateful to those Governors who participated in the Governor focus group with the inspectors during their visit.

We hope to receive our draft reports in early March when we will have time to reflect and comment on what is said before our rating is published. Our Quality Summit is anticipated to take place during April. I will, of course, keep you updated on how things are progressing as we have all been part of this important journey.

### 4.2 *Winter Planning*

There have been recent pressures in the health economy which have been caused by an increase in unwell patients being admitted to hospital rather than a large spike in numbers attending A&E.

On a positive note the community beds discharges are now part of a countywide single point of access for discharge and we are expecting to see positive outcomes for patients once this is embedded. Additionally, the Intermediate Care Team (ICT) service has been providing significant extra support to both acute hospitals over the period and has seen a large increase in the amount of patients discharged with ICT support from A&E and post admission.

### 4.3 *Crisis Cafe - NHFT & Mind Joint Venture*

NHFT and MIND are coming together to provide a new Crisis Café in Northampton.

Starting Thursday 5<sup>th</sup> January and based at Anchor House, Regent Square, Northampton, the Crisis Café will be open between the hours of 17.00 and 22.00 Thursday, Friday and Saturday. Dedicated MIND peer support workers will provide 1:1 engagement, advice and pathway direction for service users who attend the café. The café will be open to current and new service users and will also provide a direct point of contact for other partner organisations such as EMAS and the police. NHFT will be providing a health professional response to the café if peer supporters feel that further assessment or access to specialist pathways and advice is required. This is an exciting

new service that further supports NHFT's commitment to providing appropriate mental health advice and liaison within the community for service users and carers at the point of crisis.

#### *4.4 Crisis pathway new service information and update*

As part of the Trust's on-going commitment to support service users at their point of crisis in the community we have a new service in place with the police which started in January.

Two members of staff have been appointed as Police Liaison nurses working during the day and based out of the police control room. Their role will be to support the police with the day to day concerns raised in incidents related to mental illness. They will work towards improving service user pathways and reducing the police use of section 136 in crisis periods. They will also be working to train and educate officers around trust pathways and mental ill health.

This is an extension to the existing street triage car which is a deployable police and mental health professional resource working from the control room in the evenings.

Alongside this new resource the crisis pathway continues to support the Crisis Café at Anchor House, Thursday Friday and Saturday evenings and the EMAS street triage car on the same evenings that works to reduce A&E admissions for those in mental health crisis.

#### *4.5 Events and visits*

On 2<sup>nd</sup> February 2017 I presented on New Care Models with Primary care at the NHS Providers network of Chief Executives/Chairs. This provided an excellent opportunity to share at a national level the partnership working we are undertaking in Northamptonshire and to learn from the experiences of colleagues elsewhere in the country.

On 6<sup>th</sup> February 2017 Sam Jones, Director of New Models of Care from NHS England visited the Trust. There were various items on the agenda for the visit including driving quality improvement, multispecialty community providers' developments and the mental health crisis pathway. The visit went well and the Trust received positive and encouraging feedback from Sam.

I was also delighted that the Trust was invited to share its work on leadership development with the Chair of NHS Improvement. Chris Oakes and myself met with Ed Smith on the 9<sup>th</sup> February 2017. The discussion with Ed was very useful and he was very supportive and enthusiastic about our leadership work within the Trust.

The Chief Executive of the Mental Health Network, Sean Duggan, visited the Trust on the 16<sup>th</sup> February 2017. The visit focused on our mental health services and was very positive.

#### *4.6 Free Lifestyle and Wellbeing Tool*

Governors will be aware of the Trust's involvement in the establishment of the First for Wellbeing organisation.

First for Wellbeing has developed a free online wellbeing assessment tool. A simple, easy to use assessment involving a series of questions around the eight core areas of wellbeing. The full assessment takes just 10 minutes to complete, after which you will be provided with a holistic analysis of your health and wellbeing needs and goals. It can be accessed here: <https://www.firstforwellbeing.co.uk/wellbeing-assessment/>

The Trust intends to promote this opportunity through our services and our staff. This builds on and supports the Trust's focus on the Healthy Workplace.

## 5. Recommendation

5.1 The Council of Governors is asked to receive this report.

Angela Hillery  
Chief Executive  
2<sup>nd</sup> March 2017