

Public Board Meeting: 26 March 2021

Agenda item number: 2020-21 (133)

Title: Chief Executive's Report

Category of paper: For assurance

History: Not applicable

Responsible director: Chief Executive
Report author: Chief Executive

Executive summary (Purpose and main points)

This report updates the Board on the Trust's activities since the last meeting and draws the Board's attention to any issues of significance or interest.

This month's report focusses on:

- Covid response
- HSJ Award: Speaking Up Organisation of the Year
- Post pandemic ways of working
- Leeds integrated staff training offer
- Leeds integrated research governance, management and delivery service

The staff integrated training offer and the integrated research management, governance and delivery service are aligned, and seek to fundamentally enable a left-shift for research, education and innovation at scale for Leeds.

A further verbal update will be provided at the Board meeting, including the most up to date figures on infection rates.

Recommendations

Note the contents of this report and the work undertaken to drive forward our strategic goals

1 Introduction

This report updates the Board on the Trust's activities since the last meeting and draws the Board's attention to any issues of significance or interest. The report, which aims to highlight areas where the Chief Executive and senior team are involved in work to support the achievement of the Trust's strategic goals and priorities: delivering outstanding care in all our communities, staff engagement and support, using our resources efficiently and effectively, and ensuring we are working with key stakeholders both locally and nationally.

2 Current position on the key areas of Trust's involvement in managing the Covid pandemic:

2.1 Asymptomatic Staff Covid19 Testing

The majority of patient-facing staff are conducting asymptomatic lateral flow testing regularly, with 2305 members of staff participating. 60 staff had declined to engage at the start of March 2021. With more than 22000 results submitted only 52 positive lateral flow test results have been returned (0.23%) and of these 29 have been followed by a positive result on PCR testing. In line with NHSE guidance and our partners in the City, asymptomatic lateral flow testing twice weekly for patient facing staff was mandated from 15th March 2021. Staff were engaged via Leaders' Network, the clinical staff engagement sessions held by the Executive Director of Nursing and Executive Medical Director, and an anonymous questionnaire circulated to all staff eligible to participate. This showed that of those who had declined to engage with the program, many had made this decision early when there were increased concerns regarding false positive rates, and uncertainty regarding the accessibility of the test and process. An updated set of staff communications has been circulated. Any ongoing individual reasons or concerns regarding participation are being discussed with the individual. Staff in patient facing roles are aware that this is a requirement

2.2 Staff Health and Well-Being

Our focus on the health & wellbeing of staff continues, as we plan for how we support people beyond the pandemic as well as during it. In particular at present we are working alongside managers and the LCH Shielding Support Group to ensure that our Clinically Extremely Vulnerable staff, many of whom have now been shielding for a year, are supported with individual conversations and tailored plans for their transition away from shielding following the current planned 31 March shielding end date.

2.3 Care homes

The Care Home Silver Group continues to meet and there is a protocol in place to ensure that visiting professionals have been tested before visiting. There are meetings with Leeds Care Association in the coming days to discuss and refine the protocol further with them

2.4 Quality governance

There are ongoing capacity issues in the Adult Business Unit Neighbourhood Teams and the Clinical Governance Team is providing a lot of additional support with regards incident investigation. There is a risk that the Trust will not always meet the 72 hour timeline for initial investigation – this is being monitored closely and the team have undertaken a risk assessment.

2.5 Vaccination programme

The vaccination programme is progressing well. A verbal update will be given at the meeting.

The Trust is offering 1:1 conversations for any staff that remain with questions or uncertainties about taking up the offer of a vaccine, to ensure people have access to any additional information or assurance they need in order to make their informed choice about take up.

2.6 Reset and Recovery

The work on the resetting and recovery of services is ongoing. In addition to working with individual services particularly around their response to waiting list management the programme team has also established cross cutting workstreams including:

- Embedding virtual consultations effectively and sustainably across the Trust in a way that is digitally inclusive
- Enhancing patient experience, choice and empowerment through the provision of self-management content and interventions
- Maximising opportunities for our services to work together to create more joined up, effective patient care with a focus on prevention, self-management, proactive care and reducing health inequalities
- Embedding effective, efficient and equitable administration models that better support new ways of working
- Creating the offices, call centres and associated infrastructure that support more flexible new ways of working
- Ensuring safe and appropriate places for staff to work in bases and at home and promoting staff health and wellbeing

3 HSJ Award: Speaking Up Organisation of the Year!

On March 17 2021 our Freedom to Speak Up team, led by John Walsh and Kulvant Sandhu, won the prestigious Health Service Journal (HSJ) Award for Speaking up Organisation of the Year; recognised for their work to build an effective and caring speaking up culture in the Trust and across the wider system.

HSJ judges said of the entry:

“Leeds Community Healthcare Trust gave an authentic representation of freedom to speak up that is embedded within the life-blood of an organisation. The team is

working beyond organisational boundaries and engaging with, and supporting, a range of organisations within their geographic footprint – an approach that will promote a consistent and integrated system that will enable freedom to speak up to flourish. The entry demonstrated leadership from the top and a caring approach throughout that ensures those who face the most barriers to speaking up are listened to and supported.”

During the pandemic, new forms of speaking up were developed. This included recruiting 10 Black, Asian and Minority Ethnic (BAME) Speaking Up Champions to support BAME colleagues and a new Speaking Up Champion working with our Safeguarding Team, to focus on colleagues facing issues of domestic violence and abuse. Ongoing support was also offered to Clinically Extremely Vulnerable colleagues who have been shielding since July, to facilitate peer support and to help the Trust learn from their experiences.

Our Freedom to Speak up Guardian role supports the Leeds GP Confederation and Leeds GP practices to build speaking up into its work and is one of the national vanguard sites for speaking up in General Practice. The Leeds Community Healthcare team is also working with Leeds City Council colleagues to support their development of this work, which we understand to be the first such work in the country by a local authority.

4 Post-pandemic ways of working

The Trust continues to explore the different ways of working that could be available post-pandemic, and is engaging with staff to understand the approaches that would work best. Staff who work at Stockdale House are currently taking part in a survey which explores staff perspectives on remote / home working and will inform the Trust’s ongoing work in this area and the principles have been discussed with union colleagues and our staff consultation group – 50 Voices.

5 Leeds staff integrated training offer

LCH are working with Leeds GP Confederation and the Primary Care Workforce hub to integrate the training and development offer for staff across primary and community care in Leeds. There is work ongoing looking at several areas including; student placement, preceptorship for new staff, statutory and mandatory training, clinical and non-clinical training including the newly developed Long Term Condition training, clinical supervision and work with University of Leeds around medical training. LCH’s clinical education team and medical education team are working with the Confederation and Primary Care Workforce hub to develop the work and operationalise this. This work will support integrated care delivery for the future

6 Leeds integrated research management, governance and delivery service

Leeds has a suboptimal number of general practices that are research-active or research-ready (10% of practices, national average is 42%) . The combined Clinical Research Network (CRN) bid between LCH and Leeds GP Confederation for 20.21 to scope the feasibility of providing a comprehensive out of hospital research governance, management and delivery service to Leeds GP practices has been

successful. Clarity has been gained regarding the regulatory and operational requirements of providing an integrated research management, governance and delivery service in Leeds; this aim was surpassed, and achieved with support and enthusiasm for continued work from our funder and collaborators. LCH and the GP Confederation are now in the position of vanguard for left shift in clinical research delivery, and have been encouraged by the CRN to submit a further bid which evidences the CRN understanding that LCH are well placed to continue its leadership of this work. This further bid is currently under assessment by the CRN and would enable this work to be further progressed, understanding of the infrastructure required to deliver at scale and to embed it within the city as a fundamental opportunity to progress research supportive of left-shift, city priorities and health inequalities.

7 Members of the National Shared Professional Decision-Making Council: Community Nursing

We are very proud that three of our staff members, Mankem Fobella, Joanna Williamson and Elizabeth Keat have been chosen to be members of the National Shared Professional Decision-Making Council: Community Nursing. They will feed into the Community Nursing Plan and will join Steph Lawrence, Executive Director of Nursing and Allied Health Professionals (co-chair of the Clinical Reference Group) in giving input on behalf of Leeds Community Healthcare. The National Shared Professional Decision-Making Council supports the development and delivery of the national community nursing plan for England.

8 Board development workshop

The Board held two interesting and successful workshops in March 2021, with Board members and senior managers in attendance. The first workshop was to establish the priorities and design the roadmap for a three year health inequalities strategy, which is a key objective for the Trust. The second workshop centred on the 2021 White Paper: Integration and innovation, particularly focussing on the creation in statute of Integrated Care Systems and Partnerships and the workshop provided an opportunity to consider the implications for the Trust of the contents of the White Paper.

9 Recommendations

The Board is recommended to:

Note the contents of this report and the work undertaken to drive forward our strategic goals