

Board of Directors - Open

Date: 12 August 2020

Item Ref: 07

TITLE OF PAPER	Well-led Developmental Plan
TO BE PRESENTED BY	David Walsh, Director of Corporate Governance
ACTION REQUIRED	To receive the update and consider proposed revisions to assurance schedule.

OUTCOME	To provide an appropriate update and ensure consistency in future reporting.
TIMETABLE FOR DECISION	Trust Board 12 August 2020
LINKS TO OTHER KEY REPORTS / DECISIONS	CQC Inspection Report 2020 Assurance reports to the Quality Assurance Committee
STRATEGIC AIM STRATEGIC OBJECTIVE	Getting Back to Good
BAF RISK NUMBER & DESCRIPTION	BAF0002 – Well Led
LINKS TO NHS CONSTITUTION /OTHER RELEVANT FRAMEWORKS, RISK, OUTCOMES ETC	Health and Social Care Act 2008 (Regulated Activities) Care Quality Commission’s Fundamental Standards Care Quality Commission’s Enforcement Policy Mental Health Act 1983
IMPLICATIONS FOR SERVICE DELIVERY & FINANCIAL IMPACT	Failure to comply with CQC Regulatory Standards could affect the Trust’s registration, negatively affect care delivery and require additional funding to address.
CONSIDERATION OF LEGAL ISSUES	Failure to comply with the Health and Social Care Act 2008 (Regulated Activities) and in particular the recent enforcement notice issued could leave the Trust open to further action by the CQC, with a potential financial and reputational impact.

Author of Report	David Walsh
Designation	Director of Corporate Governance
Date of Report	5 August 2020

Summary Report

1. Purpose

For approval	For assurance	For collective decision	To seek Input	To report progress	For information	Other (Please state)
				X	X	
To update the Committee on the actions required to respond to the CQC assessment of well-led at trust-wide level and to consider further actions to prepare for a well-led developmental assessment.						

2. Summary

Background

Audit and Risk Committee approved the Well-Led Development Plan (WLDP) in May 2020, and this was subsequently approved by Trust Board in June 2020.

Reporting schedule

It was initially proposed that a report be provided to Trust Board at every meeting to report on progress against the WLDP, and to highlight areas of risk or concern.

As the WLDP programme has now been adopted into the Back to Good Programme as a separate workstream, and to avoid duplication arising as a result, it is proposed that the Well-Led report be provided periodically as required, rather than being a standing item.

Progress

The Trust worked closely with a facilitating partner, Charis Consultants, in developing the WLDP. Following a period of considering options in relation to procurement, Charis were appointed to support the delivery of the plan. The former Interim Director of Corporate Governance has also been re-engaged to support the delivery of this work alongside Charis, given her expertise and experience within the organisation.

The table at Appendix 1 shows progress against the WLDP workstreams to date.

3 Next Steps

- 1) Board to receive regular progress reports of delivery against the WLDP as a whole workstream as part of the Back to Good Programme;
- 2) Board to receive periodic specific progress reports in relation to the WLDP as required;
- 3) Audit and Risk Committee to continue to receive WLDP progress reports in relation to governance-related improvement activity.

4 Required Actions

Receive the progress report, including:

- Nine of the 12 workstreams within the WLDP are in progress without new concern (rated amber);
- One of the workstreams is on track but new risk has been highlighted (red)
- One of the workstreams is rated red due to an exception report in relation to one specific area (as detailed in Back to Good progress report).
- One of the workstreams is complete (rated green)

5 Monitoring Arrangements

As detailed in section 3 on previous page.

6 Contact Details

David Walsh

Director of Corporate Governance

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Appendix 1 - WLDP – Progress Summary Report

WL Ref	WL Description	Exec Sponsor	Progress
WL1	Leadership understanding of priorities supported by a cohesive, visible board to implement improvements and hold executives to account	Jan Ditheridge	In progress
WL2	Alignment of Trust's strategy with underlying enabling strategies (quality, clinical, estates, IT (IT systems, telephony, patient record system), HR/OD) backed up with monitoring of strategic delivery	Philip Easthope	In progress
WL3	Board leadership and ownership of a culture of high quality sustainable care that relies on effective governance and embeds trust values from board to ward	Jan Ditheridge	In progress
WL4	The trust must ensure that effective governance systems are in place to assess, monitor and improve the quality and safety of services.	David Walsh	In progress
WL5	Quality assurance reporting through Board, board committees and governance below committees addressing safeguarding referrals, MCA compliance, mandatory training, supervision and appraisal compliance, safe staffing, medicines management, restraint & tranquilisation, incident reporting, care plans, mental health assessments, privacy and dignity, physical health monitoring, patient care records, s12 doctor delays, decision documentation	Dr Mike Hunter/ Beverley Murphy	Exception in relation to Back to Good action TW2, as detailed in Back to Good Progress report
WL6	High levels of data quality and performance reporting are required to support effective challenge and to ensure that timely action is taken to address risks or poor performance (reduce waiting times, provision of psychology services)	Philip Easthope	In progress
WL7	Workforce/OD reporting through Board, board committees and governance below committees (DBS compliance, prof regist'n, equality & inclusion (LGBTQ+), creating a values based culture)	Caroline Parry	In progress
WL8	The trust must ensure that accurate and contemporaneous records are kept in line with the fit and proper persons regulation.	David Walsh	Complete
WL9	Review of risk management policy and governance structures to ensure the embedding of risk management processes including risk management plans, escalation of risks and moderation of risk scores (incl. fire risk, seclusion, patient need/suitability, ligature risks, blanket restrictions, estates strategy)	David Walsh	In progress
WL10	Board assurance on engagement mechanisms in care planning, across staff groups and development of an effective working relationship with the Council of Governors	David Walsh	In progress
WL11	Greater awareness and embedding of trust methodology for continuous improvement, learning and innovation	Dr Mike Hunter	In progress
WL12	The trust must ensure that all complaints are monitored and responded to in a timely manner and in line with their own policy.	David Walsh	On track – but some new risk in relation to staffing levels

