

Public Board Meeting: 5 February 2021

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## **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
- Integrated Care System consultation
- Black, Asian and Minority Ethnic (BAME) Allyship Programme
- West Yorkshire and Harrogate Suicide Prevention Campaign

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

#### **Chief Executive's Report**

#### 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:

#### Patient discharge pathways

There are now clear pathways agreed for patients discharged from hospital to care homes and Community Care Beds to ensure this is safe but also maintains flow in the system.

#### Care homes

There continues to be a small number of care homes with outbreaks and the Infection Prevention and Control Team are continuing to support where this is required. The numbers fluctuate but are somewhere between 15-20 care homes on average affected. Some outbreaks involve just staff, some just patients and some a mixture of both.

#### **Quality governance**

Scrutiny continues of incident reports and complaints to ensure any themes or trends are picked up and acted upon during this time whilst some quality processes e.g. Quality Walks are stepped down.

Clinical oversight of the impact on services if redeployment is required is continuing through the Executive Medical Director and Executive Director of Nursing and AHPs to prevent an impact on quality and safety.

### Staff vaccination programme

Staff Covid vaccination is now underway and all eligible staff in the Trust have now been emailed inviting them to book an appointment.

### **Asymptomatic Staff Covid19 Testing**

The Trust now has 1847 staff (79.5%) who are voluntarily conducting asymptomatic lateral flow testing twice weekly, in line with the national program. This has been offered to all patient facing staff and those who visit or attend patient facing areas

frequently including estates, domestics and IT support. Fewer than 1% of tests completed have returned a positive result, and of the 25 positive lateral flow tests submitted, 14 (56%) have subsequently been confirmed with a positive Polymerase Chain Reaction (PCR) test. Reporting is now available on the Performance Information Portal (PiP) according to business unit and service, enabling services to follow up staff who have consented and collected test kits but are not submitting results. We have applied for a small number of LAMP (loop-mediated isothermal amplification) tests to pilot with a particular group of staff to ascertain whether it is feasible for us to offer the more accurate form of asymptomatic testing should it become available to the Trust, but initially it appears the required logistics of this are likely to preclude wide scale use in a community setting.

#### **Supply of Personal Protective Equipment (PPE)**

Personal Protective Equipment (PPE) supply remains stable and the logistics processes are operating in business as usual mode. The Trust continues to respond to isolated concerns about the quality of particular items which can vary, withdrawing and replacing any supplies that are not satisfactory. The Trust has now consolidated its own purchase of reusable masks onto one brand to reduce the amount of fit testing for staff. A supply of clear masks, long sought after by some staff for their specific clinical or therapeutic intervention, has been sourced and ordered through the West Yorkshire collaborative arrangements.

## Staff flu vaccination campaign

Delivery of the staff Flu campaign is nearly complete and to date 78.9 % of front line clinical staff have been vaccinated.

## Staff Health and Well-Being

Supporting our staff to keep well and at work throughout this period.

- The overall sickness absence rate for December is 5.5% (short-term absence 1.5% and long-term absence 4%). At the start of the pandemic sickness absence was over 6%.
- The positive news is that since then, the sickness absence rate month on month has been consistently lower when compared to 2019.
- These figures compare favourably with national absence figures which are 7.6% with on average 3.9% of this figure attributable to COVID related absence. LCH COVID related sickness absence has for the past two months has been around 1%.
- Daily absence figures will be provided verbally on the day of the Board.
- Overall, however, and importantly, monitoring of staff accessing of support and offers available to them including listening line, Occupational Health, Employee Assistance Programme service etc. continues.
- Development of an enhanced health and well-being offer for teams.
- Continued focus on communications relating to staff health and well-being ongoing focus in Midday Brief, revised intranet pages on Oak and launch of a closed Facebook group.
- Between December 2019 and December 2020 there have been 299 contacts made to access counselling services via our Employee Assistance Programme (EAP) including 20 contacts in November and 23 in December 2020; this is approximately half of the contacts for counselling in September and October (38 and 38 respectively).

- Risk Assessments a revised template for capturing risk assessment conversations has been published and in light of continued reviewed and updated evidence relating to the virus; all staff and managers have been encouraged to revisit risk assessments given the altered context now i.e. new national lockdown as well as a new and more virulent strain of COVID.
- Focussed meeting with Black, Asian and Minority Ethnic (BAME) staff network Chair and Vice Chairs to discuss support to this group including on risk assessments and encouraging staff to take up the offer of the vaccine.
- Two rounds of lunch deliveries were made to all bases through November,
   December and into January with a third round now being planned. These have been funded by the LCH Charity.

#### **Resourcing and Capacity**

Ensuring we understand and maximise the staffing resource available to us at this time.

- Recording and reporting: Continued push to encourage managers to report this information accurately daily and operational feedback remains that the daily reports are now much more aligned with sense 'on the ground' in terms of capacity.
- Capacity modelling undertaken and sought to understand in skills and numbers terms what the impact of staff release to the vaccine programme and a third surge of the virus would be.
- This information has been used in practice to operationalise the release of staff to the vaccine centre at Elland Road in the first instance with the redeployment team and Workforce team working closely with operational managers on this and using all of the redeployment preparatory work previously developed.
- LCH support provided to the central vaccine centre rostering team both to add capacity and capability in that space but also importantly to ensure that the interests of LCH staff are protected within the central team.
- A massive focus within the staff bank on filling shifts both within LCH for priority services including the Neighbourhood Teams and for the vaccine centre at the Thackray Museum.
- From the start of December to 14<sup>th</sup> January the LCH bank has filled 2627 shifts with a fill rate of 58% against a trend fill rate month on month of just over 50%.
- Neighbourhood Team posts to support End of Life care 38 appointments made for to cover both the new posts needed and to reflect some turnover within Health Care Support Worker roles.

#### **Guidance and Advice**

Ensuring national guidance and local questions are responded to and published for managers and staff in a timely manner.

- Weekly meeting with Chairs of Joint Negotiation and Consultation Forum (JNCF) and Joint Negotiating Committee (JNC);
- Ongoing support to managers by the Human Resources team on a range of issues:
- Safe Working Environment work continues concentration on safe working in office bases including continued messages on safe working practices, recruitment of Health Centre Navigator posts and additional touch point cleaning.

- Guidance for staff and managers relating to school closures recently published and ongoing support to working parents at an individual and collective level with a working parents open session held on 18<sup>th</sup> January 2021 and further meetings planned.
- Updated guidance for Clinically Extremely Vulnerable (CEV) staff also published and in light of the national direction for shielding to recommence following the announcements of a further national lockdown. Support and liaison ongoing for the CEV support group.
- Annual leave carry over position worked through and published in light of a number of queries relating to this.

It is important also to note that business continuity plans for the Workforce Directorate remain intact and Payroll continues to function effectively remotely.

## 3 Integrated Care System (ICS) consultation

The Trust has been involved in responding to the national consultation document which sought feedback on its proposals for developing ICSs and the legislative changes required to support them. Across West Yorkshire and Harrogate, a number of responses to this consultation were produced including an overall ICS response plus responses from Joint Committee of Clinical Commissioning Groups (CCGs), the acute collaborative, the mental health collaborative and the clinical forum. All local places and some individual organisations also responded. The consultation has now closed and NHS England/Improvement will reflect on the feedback received and take forward policy development as they work through the implications of their preferred model. There will also be a legislative process later in the year led by the Department of Health and Social Care.

### 4 Child and Adolescent Mental Health Inpatient Service

We continue to progress the transfer of the Child and Adolescent Mental Health Inpatient Service (CAMHS) in Leeds from Leeds Community Healthcare NHS Trust (LCH) to Leeds and York Partnership NHS Foundation Trust (LYPFT) by 1 April 2021. This will mean LYPFT taking formal contractual responsibility for managing the current eight bed inpatient service at Little Woodhouse Hall until the transfer across to the new 22 bed unit in December 2021. Both Trust Boards took the decision to transfer as part of a regional commitment to improve mental health care for children and young people, at every level of need. LCH will continue to provide expertise to the new unit as the city's lead for general children's services, and as the provider of community based CAMH services. Our shared ambition is to ensure we deliver the right care, at the right time, and in the right place for children who require highly specialist mental health support.

#### 5 West Yorkshire and Harrogate Suicide Prevention Campaign

Our "Feel Good Pledge" which promotes staff's health and wellbeing was introduced some years ago and has continued to evolve over time. Since then, as part of our overall health and wellbeing offer for staff, we have continued to develop a culture of destigmatising mental health by encouraging staff to talk openly about their experiences, through open conversations. This work culminated last February in a

public signing of our commitment to the "Time to Change Employer Pledge", which is England's biggest programme to challenge mental health stigma and discrimination, run by the charities Mind and Rethink Mental Illness.

Covid-19 has added unprecedented pressures to everyone's lives, whether people have experienced mental health concerns or not, which is why we have joined forces with over 140 organisations across West Yorkshire & Harrogate as part of a suicide prevention "check-in" campaign. Suicide is the biggest killer of people under the age of 35 and the biggest killer of men under the age of 50, with on average 102 people dying every week in England (2019 figures).

The campaign will be launched on "Time to Talk Day", 4 February 2021, and we will be encouraging staff to take some time to check in with colleagues and to take the <a href="Zero Suicide Alliance 20-minute training">Zero Suicide Alliance 20-minute training</a>, to provide them with a better understanding of the signs to look out for and the skills needed to approach someone who is struggling, as well as other resources and tools. We will also be reminding staff of ways we can support with their mental wellbeing.

## 6 Black, Asian and Minority Ethnic (BAME) Allyship Programme

The BAME Allyship Programme started in November 2020, with 18 allies keen to understand more about themselves and how they can use their privilege and power to first learn about the experiences of BAME people, and how they can ultimately empathise with their challenges and use their voice alongside that of their BAME colleagues. The programme is co-delivered by members of the BAME staff network group and covers a range of topics such as systemic racism, understanding their own personal bias, privilege, white fragility and the Workforce Race Equality Standard (WRES). The programme consists of pre-reading, video clips, research articles and staff stories and experience. The Allies are charting their experience and learning throughout the Programme within a Journal. It is planned that an Allyship network will be set up to share learning and experience to keep the momentum of the programme and to help drive cultural change.

## 7 Trust ranked 21<sup>st</sup> in the Inclusive Top 50 Employers List

In recognition of our continued dedication to workplace diversity, this is the 3<sup>rd</sup> year the Trust has been included in "The Inclusive Top 50 UK Employers List" – a definitive list of UK based organisations that promote inclusion across all protected characteristics, throughout each level of employment. This year we were ranked 21<sup>st</sup>. This is an indicator that we are continuing to make progress across the wider Equality, Diversity and Inclusion agenda to be a more inclusive employer where everyone feels empowered to be the best they can.

#### 8 Recommendations

The Board is recommended to:

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