

COUNCIL OF GOVERNORS 26 June 2020 NEWSLETTER 6

Chair's Welcome



Dear Governors.

Welcome to our late-June newsletter. Thank you for your positive feedback about the Newsletter at our recent Council Meeting – I am glad it is helping you to feel involved and connected. I am pleased that for this edition we have a Getting to Know You article from Faisal Khan who you elected as Lead Governor until December at the meeting, after Simon Smith had to step down due to family reasons. Thank you Faisal, both for your input here, and going forward, its lovely to find out a bit more about you and I look forward to working with you and Mervyn Dawe, who has kindly agreed to act as deputy lead governor for this period.

I was pleased to see so many of you at our meeting on 17th June, it was good to see such a strong turn out of governors, execs and non-execs and I was delighted to see the enthusiasm for mini-seminars on the Staff Survey outcomes and plans and the Annual Report and Accounts and to take forward the Review and Refresh Sessions.

Dates for these are planned to be:

7th July - 10.30-12.30 - Constitution 9th July 1.45-3.30 - Membership -CONFIRM YOUR PLACE NOW at Trust.Secretary@ghc.nhs.uk!

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P2 Black Lives Matter – Paul Roberts, CEO P3 Non- Exec Viewpoint – Jan Marriott P4 Learning Disability Week – Team Intro In this edition we have an update on how we plan to live our response to the **Black Lives Matter** discussion. I know you will have been heartened by Sumita Hutchison's input on this at the Council of Governors' meeting – particularly her feedback that the action groups will be focused and output driven. Ensuring that we are supporting actions which demonstrate the Trust **and** our individual commitment to equality must be manifest in what we say **and what we do** and I was delighted to hear this echoed through the Council membership.

I am glad to update you that our first BAME focus group took place on 23rd June with 26 GHC colleagues taking part with strong and confident voices – confirming that this activity is resonating with colleagues who may not have previously got involved. There is another one planned, in advance of the launch of our new Diversity Network in Summer – things are already happening here!

This edition also has an article from Jan Marriott who balances being a GHC NED with a significant role with the Gloucestershire Partnership Boards. It is amazing what these groups are achieving even in lockdown to ensure that the voices of diverse groups are heard. Jan sets out clearly the role these groups can play in genuine co-production and I am keen to ensure we make best use of existing networks as we take co-production further within the Trust. I know that the links you have in your communities will also help to support this.

I hope you are all staying safe and well,

Best wishes.

Ingrid

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P6 – Update on Ongoing Recovery

working together | always improving | respectful and kind | making a difference

Writing our Own History - Paul Roberts, CEO

Since my communication on **#BlackLivesMatter**, a lot has happened and I wanted to follow up. Two commonly used English phrases seem to me more relevant today than ever.

The first is "putting people on a pedestal" – it means we admire and look up to them. The current relevance is clear given the fate of the statue of Edward Colston in our neighbouring city – he is quite literally no longer on his pedestal and people walking past no longer have to look up to him! I don't want to enter into the debate about the rights and wrongs of what happened, or perhaps more importantly, how it happened, but I do think that as we build our own culture as "GHC" we should reflect on the sort of values and behaviours we want to look up to in our own community.

I have seen the second phrase expressed many times in recent days: "you can't rewrite history". This has usually been said in the last fortnight to defend our national figurative status quo. I am tempted to respond with Napoleon's view that: "History is a set of lies agreed upon", but I am not quite that cynical, and in the current context I prefer George Orwell's: "The most effective way to destroy people is to deny and obliterate their own understanding of their history". I prefer this sentiment because it applies to us all, whatever our background, and it goes to the heart of the cultural wars that seem to have erupted around us. My own refection is that, with effort and determination, you can write your own history.

A number of people contacted me after I sent out my Black Lives Matter blog. Virtually all the responses were positive but most asked me – **what next?** Fortunately most also came with offers of support and involvement.

I want to suggest two things.

(i) we will hold three initial focus groups of colleagues who have expressed an interest in establishing a Diversity Network. Amongst other things, the aim of the network will be to celebrate and value difference and contribute to improvements in our GHC workplace. The focus groups will engage with colleagues and inform the future shape and content of the network, with sessions for Black, Asian and Minority Ethnic colleagues (BAME), Lesbian, Gay, Bi-sexual, Trans and Queer (LGBTQ) colleagues, and those with a disability. Colleagues will also be able contribute online.

Once we've held the focus groups and reviewed colleagues' wishes, **Sumita Hutchison**, one of our non-executive directors who has been a member of the Bristol Commission for Race Equality and the Bristol Women's Commission, both set up by the elected Mayor Marvin Rees, has agreed to facilitate the first network session. The network emerging from these discussions, will be supported by the board, but entirely led from within the membership of the network. We will also be seeking colleagues' views in the focus groups about whether there would be an appetite for separate network sub-groups specifically supporting BAME, LGBTQ and disability issues in the workplace. These have been found to add value in other organisations. You may recall that the Trust's Women's Leadership Network was established in 2019, chaired by Sandra Betney, our Director of Finance and Deputy Chief Executive.

(ii) I will establish a task group to agree and oversee action to tackle the issues which emerge from our network. As I suggested in my previous blog it is up to me, as CEO, regardless of my own race, gender or sexuality to ensure this organisation is a great place to work regardless of who you are. As an organisation, a community of people who share a common purpose and common values, it is up to us to write our own history and to decide who it is we want to look up to.

As CEO, I believe that by taking the above actions we will ultimately be able to create a better, fairer organisation for all our colleagues alongside the wider community we serve – and such an organisation will ensure we serve out community even better.

Paul is supported in his commitment by the Board, across the board. Neil Savage, Director HR & OD, in a thought provoking piece on LinkedIn highlighted that "For the NHS and society more widely to be the best it can and to achieve its optimal potential, **we've got to tackle this more swiftly and more effectively. Now. Not tomorrow.** All the evidence is that truly diverse and valued workplaces make better, more successful organisations".

Jan Marriott, Non-Executive's view on the world!



In addition to my role as a NED with the Trust, I Chair and Co-Chair three of the Gloucestershire Partnership Boards. The main Partnership Boards are: -

- Autism Spectrum Condition Partnership Board
- Carers' Partnership Board
- Mental Health and Wellbeing Partnership Board
- Learning Disability Partnership Board
- Physical Disability and Sensory Impairment Partnership Board

My Co-Chair for the Learning Disability Partnership Board is Tim Heaven*. Tim also works for Inclusion Gloucestershire, which is a User Led Organisation working with and for people with disabilities and mental health problems.





Dr Jean Waters* is my Co-Chair for the Physical Disability and Sensory Impairment

*Permission to use these photos provided

In "normal" times these Board meetings welcome attendees and we are working on how we will operate going forward – and would hope to welcome you to find out more – please ask!

During the Covid-19 the five Partnership Boards have been working together with the voluntary sector and health and care commissioners and providers to ensure peoples' needs and concerns are being heard and that solutions are co-produced and communicated. The weekly Zoom meetings were set up at the very beginning of the Pandemic and have proved to be invaluable in ensuring co-production continued during this time. It has meant that the "Big Bosses", as we call them at the Learning Disability Partnership Boards, were aware of issues far earlier than they might otherwise have been and that the voluntary sector has been supported to better support our communities. Partnership Board bulletins have been sent out to all the Board members and wider stakeholders for circulation far and wide, both providing and sharing information but also seeking peoples' feedback on issues they are facing as well as good news stories. Easyread versions of the Bulletin have been developed by Inclusion Gloucestershire. The Bulletins are all available on a new joint Partnership Board website – which we hope will be further developed over time. https://www.gloucestershire.gov.uk/health-and-social-care/disabilities/partnership-boards/

The fundamental role of the Partnership Boards is to facilitate co-production. As you will know co-production has become the "flavour of the month" but it is understood differently and unfortunately is often interpreted as engagement and participation by organisations. The Co-production Network explains co-production as follows: "Co-production is an approach where people, family members, carers, organisations and commissioners work together in an equal way, sharing influence, skills and experience to design, deliver and monitor services and projects. Co-production acknowledges that people who use social care and health services (and their families) have knowledge and experience that can be used to help make services better, not only for themselves but for other people who need them, which could be any one of us at some time in our lives.

Real co-production means that people are truly involved in planning and designing services from the very beginning" - I am passionate about co-production and look forward to working with the Governors and the Trust in their commitment to embed co-production in the way we live and work.

Learning Disability Week 2020



It's #LearningDisabilitiesWeek2020, and the theme this year is **friendship**. So in the spirit of friendship, we would like to introduce ourselves to you and tell you a little about what we do, while recognising that some governors may have an understanding of the service on a personal basis – if visits to sites are limited we can still get a flavour of our services.

What is a learning disability?

A person is identified as having a learning disability and being eligible to receive a service if all three of the following are present:

- significant impairment of intellectual functioning (this can sometimes be classified as mild, moderate or severe but we work with all levels of learning disability);
- significant impairment of adaptive behaviour; and
- onset before adulthood.

GHC's Learning Disability Services

The first point of contact for most adults with a learning disability will be one of the Community Learning Disabilities Teams (CLDTs). These are multi-disciplinary teams made up of community nurses, occupational therapists, physiotherapists, psychiatrists, psychologists and speech and language therapists. There are four CLDTs covering the whole county:

- Pullman Place (Gloucester and surrounding areas),
- Weavers Croft (Stroud, Cirencester and surrounding areas),
- Colliers Court (Forest of Dean)
- Leckhampton Lodge (Cheltenham, Tewkesbury and North Cotswolds).

The CLDTs provide specialist healthcare support to adults (18+ years) with a diagnosis of learning disability and we also work a lot with people who support those with learning disabilities, and that could include you! We work with families and direct care staff to help them to better understand the needs of the person they support, and we also work with other professionals and services to help them to make "reasonable adjustments" in order for people with learning disabilities to access appropriate health care.

We also have a number of other services:

- Berkeley House (inpatient unit)
- Health Facilitation Team
- Intensive Health Outreach Team
- Learning Disability Intensive Support Service (LDISS)

We also work closely with the wonderful **Learning Disabilities Liaison Nurses**, Bev Farrar and Carol Forbes, who are based in the hospitals trust. Bev and Carol are well known to many of our service users and they work to support people with a learning disability who need to visit one of the acute hospitals.

Alongside our adult services, there is also a specialist **Children's Learning Disabilities Team**The team comprises specialist clinicians offering different types of intervention tailored to meet the needs of young people and their families. The team provides support to children and young people aged under 18 who have a moderate to severe learning or development disability, attend a special school and are registered with a Gloucestershire GP.

They also support other professionals working with children who have a learning disability.

Getting to Know You

This Week we find out a bit more about Faisal Khan – Staff Governor – Medical Dental & Nursing and newly Appointed Lead Governor





Can you tell us a little about yourself?

My name is Faisal Khan and I am a Consultant Psychiatrist with the Cheltenham Crisis Team. I am also the Associate Medical Director and Clinical Director for Countywide Services. I have been a Staff Governor for the past couple of years and have recently been elected to be the interim Lead Governor.

What drew you to stand as a governor?

I became a Governor to get a better understanding of how the organisation works to meet the needs of the population we serve and how we might work collectively to support and hold colleagues to account.

What is the part of being a governor you enjoy most?

I enjoy working closely with public Governors and listening to their experiences and views is very useful. It is also a good opportunity to meet the Trust Board and get updates on all the work the Trust is involved in.

What is the most challenging?

As is the case with most responsibilities, there have been challenges as well. Managing my clinical and management responsibilities alongside my role as staff Governor. I have always aimed to take all my roles seriously and do justice to them all. I continue to work hard to try and maintain that balance.

What do you hope to contribute as Lead Governor?

I am taking over from Simon Smith who was our previous interim Lead Governor. Simon was an incredible Lead Governor and I have big shoes to fill.

I decided to put my name up for the role of Lead Governor because we are at a crucial juncture following the merger of the two Trusts with the added unprecedented challenges associated with COVID19. I am really keen on seeing Governors continue to serve their constituents and hold colleagues to account in a supportive and constructive way. I would like to ensure that Governor elections are held on time. There should be appropriate Governor representation at senior management level where necessary. I would like to maintain the consistency we have had so far and hopefully would then be able to elect a long term Lead Governor following the elections for vacant Governors posts later in the year.

How would you encourage new governors to settle in?

I would encourage new Governor's to get to know the others especially experienced Governors as I found their input invaluable. We would like to strengthen the Governor Induction and ensure that Governors continue to play the role they were elected for.

What is helping you, personally, to cope during these difficult times?

These are exceptional times. It is imperative that we all take care of ourselves and our loved ones. I enjoy gardening, music and family time to cope with the pressures of work and the lockdown. I now have a new Cavachon puppy that's keeping me busy as well. We are looking at a new normal moving forward where we have to be cautious but aware of the impact of illness and isolation on people. Stay safe.

Council of Governors Updates

Governor elections – these are now ongoing with elections targeted to be complete by September 2020

At the Council of Governor meeting the following appointments were agreed:

Lead Governor – Faisal Khan appointed. **Deputy Lead Governor** (new role) – Mervyn Dawe – appointed

These are interim appointments until December, when hopefully the new Council will have been up and running for three months after the election campaign which should see us appoint to the vacancies which we are currently holding. We are very pleased to welcome Faisal and Mervyn into these roles. The introduction of a deputy is new and will be another of the aspects to be explored within our Review and Refresh sessions.

Council Meeting Dates

Thursday 16 September – pre meeting – 1.15-1.45pm Council Meeting – 2.00 – 4.00pm - Via MS Teams

Thursday 19 November – Pre meeting – 1.45-2.15pm Council Meeting – 2.30 – 4.30pm – TBC, but likely MS Teams

Other Dates

Annual General Meeting – 24 September 2020

Time to be confirmed

Next Board - Weds 22 July - 10.00 - 12.00

Thank you

Thanks to Simon Smith for his contribution as Governor for the Forest of Dean and Lead Governor. Simon's knowledge, commitment & warmth meant he made a big contribution in a short time which was much appreciated.

Recovery Planning Update

Our Executive team has now agreed that the following further services can move into active recovery:

Urgent Care Services:

Specialist Services:

- Mental Health Crisis Teams
- MH Liaison Service
- Minor Injury and Illness Units
- Approved Mental Health Professionals (AMHP) hub
- First Point of Contact Centre (FPCC)
- Care Home Support Team (Physical Health)

Hospitals (Mental Health and Learning Disability):

- Wotton Lawn Hospital
- Montpellier Unit
- Honeybourne and Laurel House
- Charlton Lane Hospital
- Berkeley House

- Podiatry
- Musculoskeletal Advanced Practitioner Service (MSKAPS)
- Adult Speech and Language Therapy Services
- Telecare
- Falls Assessment and Education Service
- Neuro Rehabilitation Clinical Specialist Service

Children and Young People's Services:

- Children's Community Nursing
- Children's Complex Care Respite Service
- Children's Physiotherapy Service
- Children's Occupational Therapy Service
- Childhood Immunisation Service
- Children's Speech and Language Therapy Service

All services have now attended a recovery clinic, with only a small number of services to submit their recovery plan for consideration by the Executive team. It is anticipated that by the start of July, all services will be in active recovery.

Recovery plans for the following services are now in place:

- IAPT (Let's Talk)
- Primary Mental Health Nursing
- Dementia Education Team
- Podiatry
- Telecare
- Speech and Language Therapy
- Child and Adolescent Mental Health Services
- School Nursing
- Musculo-Skeletal Advanced Practitioner Service.

Thank you for reading our Council of Governors Newsletter.

We hope you found it a helpful update.

Remember to give your input

TAKE CARE, STAY SAFE

Best Wishes from the Governance Team Input/comments to: TrustSecretary@ghc.nhs.uk