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Trust Board of Directors - 31 May 2022

Chief Executive's Report

Purpose of the report

This paper provides an update on current local issues and national policy developments since the last meeting. The details below are drawn from a variety of sources, including local meetings and information published by NHS England/Improvement (NHSEI), Health Education England, NHS Providers, the NHS Confederation and the Care Quality Commission (CQC).

Analysis of the issue

National Developments

Coronavirus COVID-19

With community cases and hospital inpatient numbers now seeing a sustained decline, thanks in part to the success of winter and now spring booster vaccines, the NHS Chief Executive Amanda Pritchard, following advice from the National Incident Director, has reclassified the Level 4 (National) Incident to a Level 3 (Regional) Incident.

Living with COVID-19

On 29 March 2022, the government set out the next steps for living with COVID-19 by publishing new guidance, confirming that free COVID-19 tests would continue to be available to help protect specific groups once free testing for the general public ended on 1 April 2022. This means that people at risk of serious illness from COVID-19, and eligible for treatments, will continue to get free tests to use if they develop symptoms, along with NHS and adult social care staff and those in other high-risk settings.

Government guidance advised people with symptoms of a respiratory infection, including COVID-19, and a high temperature or who feel unwell, to try to stay at home and avoid contact with other people until they feel well enough to resume normal activities and they no longer have a high temperature. From 1 April 2022, anyone with a positive COVID-19 test result is advised to try to stay at home and avoid contact with other people for five days, which is when they are most infectious.

Regarding lateral flow tests, the guidance notes that asymptomatic testing continues from April in some high-risk settings where infection can spread rapidly while prevalence is high. This includes patient-facing staff in the NHS, staff in hospices and adult social care services, care home visitors who provide personal care and staff in some prisons and places of detention and in high-risk domestic abuse refuges and homelessness settings.

Aside from the changes for the general adult population, guidance confirms that children and young people who are unwell and have a high temperature should stay at home and avoid contact with other people, where they can. They can go back to school, college or childcare when they no longer have a high temperature, and they are well enough to attend.

Although overall testing requirements have been reduced by this updated guidance, the government has retained the ability to enable a rapid testing response should it be needed, such as the emergence of a new variant of concern. It has a stockpile of lateral flow tests and the ability to 'ramp up' testing laboratories and delivery channels.

For more information please visit the government website: https://www.gov.uk/government/news/government-sets-out-next-steps-for-living-with-covid.

IPC guidance for staff continues to be updated and shared with them through weekly communications, including the use of lateral flow testing, self-isolation guidance, and visiting information. Our latest visiting guidance is available on our website here: https://www.leicspart.nhs.uk/latest/covid-19-latest-information/covid-19-visiting/



NHS Providers

After nearly ten years in post Chris Hopson, Chief Executive of NHS Providers, will be leaving on 10th June 2022 to take up the role of Chief Strategy Officer at NHS England. Saffron Cordery, Deputy Chief Executive, will take over as interim Chief Executive whilst the board determines the process for a permanent appointment. You can read more on the NHS Providers website: NHS Providers: Congratulations to Chris on his appointment to this key role at NHSE. The insights he brings into the issues and priorities for organisations like LPT from his experience at NHS Providers will I am sure be beneficial both to NHSE and provider organisations themselves. We wish Chris every success in his new role.

Health and Care Act 2022

On 28 April 2022, the Health and Care Bill received Royal Assent to become the Health and Care Act 2022. It builds on the proposals for legislative change set out by NHS England in its Long-Term Plan and places Integrated Care Systems (ICS) onto a statutory footing from 1 July 2022, when Integrated Care Boards (ICBs) replace CCGs. Integrated Care Partnerships (ICPs) will form alongside ICBs, bringing together the NHS and Local Authorities in local areas.

The Act introduces measures to address the COVID-19 backlog and rebuild health and social care services from the pandemic, backed by £36 billion investment over the next 3 years. It also includes provisions for increased transparency on mental health spending with the Secretary of State having to publish government expectations concerning increases in mental health spending by NHS England and ICBs. ICBs will also be required to report on mental health spending.

The CQC has been given new duties, under the Act, to review ICS service provision and Local Authority adult social care responsibilities.

The latest version of the Bill is available on the government website: https://bills.parliament.uk/bills/3022.

The Queen's Speech

On 10 May 2022, His Royal Highness the Prince of Wales set out the government's priorities for the year. From a healthcare perspective, one of the most significant announcements was the draft Mental Health Act Reform Bill, which is intended to ensure that those living with mental health conditions have greater control over their treatment and those with a learning disability and/or autism have a smoother discharge from hospital.

Amongst the things proposed by the Bill are changes to the criteria needed to detain someone to ensure that these powers are only used where the person is a genuine risk to their own safety (or the safety of others) and where there is a clear, therapeutic benefit from detention. It also proposes to deliver improved support through the option of an independent mental health advocate and the ability for patients to choose their own nominated person. A 28-day time limit on prisoner transfers to hospital is proposed along with a new form of supervised community discharge. Increasing the frequency with which patients can appeal their detention at Tribunal and the proposed introduction of a statutory care and treatment plan for all those detained also feature in the proposed changes.

The Speech also confirmed arrangements for the Health and Social Care Levy, which is set to raise c £13bn that the government will invest in health and social care services. A social care cap will be introduced from October 2023, placing a £86k limit on the amount anyone in England will need to spend on their personal care costs over their lifetime.

A women's health strategy will be published in 2022 focussed on priority healthcare issues for women across the life course. A Social Housing Regulation Bill is set to increase social housing tenant's rights to better homes and to enhance their ability to hold their landlords to account. A Renters' Reform Bill is intended to improve housing conditions for renters abolishing no fault evictions, apply legal binding 'decent home' standards in the private sector and introducing a new ombudsman for private landlords to help resolve disputes.

The Bill of Rights will introduce reforms to the Human Rights Act, restoring the balance of power between the legislature and the courts. The Brexit Freedom Bill will ensure that retained EU law can be amended, repealed, or replaced by legislation that meets the needs of the UK. A Data Reform Bill will help create a new UK data protection



framework, whilst the Levelling Up and Regeneration Bill will drive local growth and empower local leaders to regenerate their areas. A Conversion Therapy Bill will ban conversion therapy practices intended to change sexual orientation.

The full text of the Queen's Speech is available on the government's website: https://www.gov.uk/government/speeches/queens-speech-2022

Mental health and wellbeing plan

The government is committed to improving mental health and wellbeing outcomes, particularly for people who experience worse outcomes than the general population. It has committed to develop a new cross-government, 10-year plan for mental health and wellbeing for England to support this objective and has launched a public consultation based on a discussion document. Informed by conversations with stakeholders, people with lived experience and government departments, this discussion document poses the following questions:

- how can we all promote positive mental wellbeing? (chapter 1)
- how can we all prevent the onset of mental ill-health? (chapter 2)
- how can we all intervene earlier when people need support with their mental health? (chapter 3)
- how can we improve the quality and effectiveness of treatment for mental health conditions? (chapter 4)
- how can we all support people living with mental health conditions to live well? (chapter 5)
- how can we all improve support for people in crisis? (chapter 6)

To access a copy of the discussion document and to respond to the consultation, please visit the government website: https://www.gov.uk/government/consultations/mental-health-and-wellbeing-plan-discussion-paper-and-call-for-evidence.

New Deputy Chief Medical Officer for England

On 14 April 2022, the government announced the appointment of Dr Thomas Waite as Deputy Chief Medical Officer for England. Dr Waite will support Chief Medical Officer (CMO) Professor Chris Whitty as the deputy CMO (DCMO) leading on health protection, replacing Professor Jonathan Van-Tam who stepped down on 31 March 2022. His role will cover emergency response and preparedness, infectious diseases, vaccines, and therapeutics.

Restraint, segregation, and seclusion review: Progress report (March 2022)

On 25 March 2022, the Care Quality Commission (CQC) published a progress report following up on its 'Out of Sight' report published two years ago. It centres on the use of restraint, seclusion, and segregation in care services for people with a mental health condition, a learning disability, or autistic people.

The progress report highlights that since the 'Out of Sight' report was published, none of the recommendations have been fully achieved. While the CQC recognises that the pandemic has clearly had an impact on services and the people that use them in a way that could not have been foreseen, it believes that progress on the recommendations it made for change have not been happening quickly enough.

With the publication of its progress report, the CQC is calling on all partners to commit to a renewed effort and to share responsibility for implementing the changes needed. It highlights that these changes must now be coproduced at system level, provider level and at an individual level by collaborating with people and their families. Integrated Care Systems will play a key role in ensuring these changes are delivered. Named leads for learning disabilities and autism on each local integrated care board will support local implementation.

To access a copy of the report, please visit the CQC website: https://www.cqc.org.uk/publications/themes-care/restraint-segregation-seclusion-review-progress-report-march-2022.



Thematic review: people with a learning disability and autistic people's experience of acute care

On 23 March 2022, the CQC announced that it would be carrying out a review to better understand the experiences of people with a learning disability and autistic people when they go to hospital. As part of our review, the CQC planned to visit a sample of hospital trusts and speaking to people who use services, and the people who support them in order to understand:

- whether people have been cared for in a way that meets their needs
- how well people feel they have been supported and involved in their care planning
- if staff understand and are able to meet their needs.

The CQC expects to publish a report on its findings, which we shall review when it becomes available to identify the actions required within Leicester, Leicestershire and Rutland.

Commonwealth Fund's 2021 International Health Policy survey

Results of the Commonwealth Fund's 2021 International Health Policy survey became available in April. Through the survey, just under 19k older adults across 11 countries were about their health and health care between March and June 2021 (almost 2k of which were from the UK). Health Foundation analysis of the results shows that the UK still performs strongly in protecting older people from financial costs related to health care, with the highest proportion of people reporting no 'out-of-pocket' costs (56%).

Older adults in all countries were less likely to have seen a doctor or visited A&E during the pandemic, but the survey suggests that the UK health system experienced more disruption than others in Europe. 25% of UK respondents said that they had appointments either cancelled or postponed. Those in the UK were also most likely to say they had not seen a doctor over the past year, although the UK was among the best in access to same day GP appointments.

The UK was not alone in experiencing disruption to services, but it faces a steep challenge to recover, as the UK has a much leaner health and care system relative to comparable countries. The survey also illustrates the importance of expanding access to social care to reduce unmet need.

To read the Health Foundation's analysis, please visit the organisation's website: https://www.health.org.uk/news-and-comment/charts-and-infographics/health-and-care-for-older-adults-during-the-pandemic.

Spring Statement 2022

On 23 March 2022, the Chancellor delivered his spring statement within which he set out measures aimed at supporting households with the increasing cost of living, including a 5p per litre cut to petrol and diesel duty. The Office of Budgetary Responsibility (OBR) concluded that the measures announced in the Spring Statement will offset just one third of the decline in living standards.

The government retained the planned Health and Care Levy, funded via an increase in national insurance contributions (NICs), and confirmed that the threshold at which people start paying NICs will rise to £12,570 from July 2022.

It also announced that the NHS efficiency target will double from 1.1% to 2.2% a year to free up £4.75 billion to fund NHS priority areas over the next three years and ensure that the extra funding raised by the Levy is well spent.

Please see the government website for full details of the spending announcement: https://www.gov.uk/government/speeches/spring-statement-2022-speech.

Health and prosperity: Introducing the Commission on Health and Prosperity

On 27 April 2022, the Institute for Public Policy Research (IPPR) published "Health and prosperity: Introducing the Commission on Health and Prosperity", which highlights how the COVID-19 pandemic exposed and exacerbated wide and persistent economic and health inequalities. It proposes that government should go beyond simply returning to the pre-pandemic status quo and instead create better health both for the sake of the population and to



address the biggest weaknesses in the UK economy which leave it vulnerable to the impact of poor population health.

The report authors describe a health and an economic 'shock' the country has experienced as a result of the pandemic. It proposes a new approach to strengthen the link between health and wealth, describing how the health and care system has a key role to play in improving UK growth and prosperity. The authors call for the NHS to fulfil its potential by playing a larger role in national and local economies, ensuring access to high quality work, and supporting the transition to a net zero economy. Further information from the Commission is expected over the coming months.

To access the introductory report please visit the IPPR website: https://www.ippr.org/files/2022-04/health-and-prosperity-april22.pdf

Annual WRES data report

On 7 April 2022, NHS England and Improvement (NHSE/I) published its annual report for the NHS Workforce Race Equality Standard (WRES). Summarising the key findings of this report, in a briefing to Trusts, NHS Providers notes:

- Ethnic minority representation at very senior manager (VSM) level has increased in the NHS to its highest recorded point (9.2%), and there has been an increase in the number of Black, Asian and minority ethnic staff working throughout the workforce.
- There has been a fall in the number of executive directors on trusts boards from an ethnic minority background, which is masked by the increase in overall board figure (12.6%, up from 10%), driven by improved non-executive director (NED) representation.
- Only 44.4% of ethnic minority staff believe that their trust provides equal opportunities for career progression or promotion, compared to 58.7% of white staff. Black, Asian and minority ethnic staff also remain less likely to access CPD and non-mandatory training.
- There have been year-on-year improvements in the disciplinary gap, but ethnic minority staff remain more likely to enter a formal disciplinary process than their white peers.
- Improved data collection in 2021 has highlighted the differing experiences of ethnic minority staff from distinct groups and shows that people from Black backgrounds are more likely to experience discrimination and mistreatment from colleagues and managers. Gypsy and Irish Traveller staff are the most likely to experience bullying, harassment or abuse from patients and the public.

Please visit the NHSE/I website for a copy of the report: https://www.england.nhs.uk/wp-content/uploads/2022/04/Workforce-Race-Equality-Standard-report-2021-.pdf

NHS Providers - United Against Health Inequalities briefing

In April 2022, NHS Providers published a report on the results of its race and health equality survey, which was sent to Trust Chairs, Chief Executives and Non-Executive Directors (NEDs) in November 2021. Entitled "United Against Health Inequalities: A Commitment To Lasting Change", the report finds:

- Trust boards have a critical role to play in driving change on race quality and health inequalities;
- There are high levels of board commitment and strategic emphasis on tackling health inequalities but low confidence regarding putting the practical arrangements in place;
- Several barriers to progress, including wider system pressures and operational challenges;
- Embedding action on health inequalities as core business requires robust data analysis and harnessing the insights/skills of frontline staff;
- Health inequalities do not begin or end with individual trusts;
- Boards have an important role in building a culture of equity into services (some people need different access routes); and



Trusts need an enabling regulatory environment and supportive infrastructure in place.

To read the full report please visit the NHS Providers website: https://nhsproviders.org/united-against-health-inequalities-a-commitment-to-lasting-change.

Final report from the Ockenden Review

The Ockenden Report was published on 30 March 2022, setting out the findings, conclusions, and essential actions from the Independent Review of Maternity Services at The Shrewsbury and Telford Hospital NHS Trust. Commissioned by the Secretary of State, the review examined 1,592 clinical incidents between 1973 and 2020 at the hospital. It considered internal investigations where they occurred, external reports, local clinical governance processes, policies and procedures, and reports from the ombudsman and coroner.

The review team found patterns of repeated poor care and failures in governance and leadership. It recommends more than 60 local actions for learning and recognises that many of the issues highlighted in the report are not unique to the hospital. For this reason the review team also identified 15 areas as 'immediate and essential actions' that should be considered by all trusts in England providing maternity services.

To access a copy of the report, please visit the website: https://www.ockendenmaternityreview.org.uk/wp-content/uploads/2022/03/FINAL_INDEPENDENT_MATERNITY_REVIEW_OF_MATERNITY_SERVICES_REPORT.pdf

Local Developments

Urgent and Emergency Care

LLR currently carries a system risk arising from ambulance handover delays which are a result of wider system performance particularly that of flow and not just a result of ambulance and ED performance. This is being managed collectively with all partners contributing to daily tactical command meetings and wider service transformational programmes. LPT recognises this as a priority due to the impact it has on patients and is supporting the system to enable improvements.

LPT focus has been on:

- · Decreasing ED attendance
- · Keeping people well at home
- Safe rapid transfer from UHL to Community beds
- Decreasing the number of Medically optimised for discharge patients in beds to enable constant flow
- Enabling a home first approach to ensure limited resource is used smartly

We have made positive impact in many areas including:

- Increased community bed occupancy from 80% to 90+%
- Streamlining referral processes from UHL to the community to ensure safe and effective processes
- 2 hr Urgent Community Response has seen significant improvement from 26% to 73% ensuring patients are seen quickly in the community and avoiding hospital admission
- Reduction in emergency care home admissions by circa 100 per month
- Clear alternative routes are in place for those in a mental health crisis that can be used by EMAS and other system partners to avoid the need for ED attendances
- We have increased the responsiveness of the Mental Health Liaison Team to ensure that patients in ED are seen within an hour.
- Advice and guidance to EMAS via the Mental Health Urgent Care Hub provides greater understanding of the patient needs and often negates the need for any further input.



A system-wide planned unannounced CQC inspection into the urgent and emergency care pathway across partner organisations in Leicester, Leicestershire and Rutland has taken place in April. This included inspection of our all-age mental health liaison service in Leicester Hospital's emergency department. Initial informal feedback has been positive. We await a more formal report from the CQC for the LLR system.

Quality Improvement Support for St Andrew's Healthcare

We are pleased to be using our alliance with five community and mental health NHS Trusts across the East Midlands to provide quality improvement support to St Andrews Healthcare following its CQC inspection. The mental health charity, based in Northamptonshire, have buddied up with NHFT who is coordinating other trusts from Derbyshire, Leicestershire, Lincolnshire, Nottinghamshire and Northamptonshire to receive targeted support following their recent CQC report. The alliance will provide quality improvement support which aims to improve the quality of care at St Andrew's.

Nine workstreams have been set up to focus on patients, staff and culture. Each workstream has an NHS lead and a St Andrew's lead, meeting regularly to drive forward actions using the expertise and learning from the alliance trusts. LPT is providing specific workstream leadership support for the culture workstream and communications workstream.

Re-signing Armed Forces Covenant

LPT re-committed to the new Armed Forces Covenant, demonstrating our support of the armed forces community, by re-signing the Armed Forces Covenant in the company of MoD officials at County Hall on 16 March.

The trust received the Armed Forces Covenant Gold Award in 2019 and the re-resigning will maintain that gold award status. LPT is currently one of eight organisations in Leicester, Leicestershire and Rutland to hold the Gold Award, which is held with a high level of respect within the military for the support it provides as a civilian organisation.

The covenant is a pledge that local communities, business and public organisations acknowledge and understand that those who serve or who have served in the armed forces, and their families, should be treated with fairness and respect in the communities, economy and society they serve with their lives. We are committed to continuing our support with the employment of veterans and spouses and partners and also support for staff who are members of the reserve forces and volunteers in military cadet organisations.

Using Artificial Intelligence to improve the health and wellbeing of people with learning disabilities

A new study led by Loughborough University and the Leicestershire Partnership NHS Trust will use Artificial Intelligence to improve the health and wellbeing of people with learning disabilities.

About 1 in 100 people are identified as having a learning disability. Of this population, over 65% have two or more long-term health problems, known as multiple long-term conditions (MLTCs), and a life expectancy that is 20 years lower than the UK average. Often the physical ill-health symptoms experienced by those with a learning disability are mistakenly attributed to a mental health/behavioural problem, or as being inherent to their disability. This means they do not always receive the same level of care as those without a learning disability. And as there is no easy way to understand and predict the complex interactions between MLTCs and the care needs of individuals, it is difficult to provide effective joined-up care between health and social services.

For the DECODE (Data-driven machine-learning aided stratification and management of multiple long-term COnditions in adults with intellectual disabilities) project, the team will use machine learning to better understand MLTCs in people with learning disabilities. Read more here: https://www.leicspart.nhs.uk/news/using-artificial-intelligence-to-improve-the-health-and-wellbeing-of-people-with-learning-disabilities/

New grant scheme to transform mental health across Leicester, Leicestershire and Rutland awards its first grants



Getting Help in Neighbourhoods, the innovative scheme to that will eventually see around £3M being spent in local areas by charitable, voluntary and community groups to increase the support available for mental health and wellbeing, was announced this month to the recipients of it first round of grants.

Just under £800,000 has been awarded in round one to 28 local groups across Leicester, Leicester and Rutland to spend on their own projects, new or existing, to support people with their mental health and wellbeing.

This NHS funded grant scheme, has been organised in a partnership between the CCG, LPT, Leicestershire County Council, Leicester City Council and Rutland County Council and has been administered by Leicestershire & Rutland Community Foundation (LRCF), an organisation that strengthens local communities by giving thoughtful grants to local charities and voluntary groups, for all kinds of local needs. Read more:

https://www.leicspart.nhs.uk/news/new-grant-scheme-to-transform-mental-health-across-leicester-leicestershire-and-rutland-awards-its-first-grants/

CQC report published for acute mental health inpatient wards for adults of working age and psychiatric intensive care units

In May 2022, the Care Quality Commission (CQC) published a report following a focused unannounced inspection of the acute wards for adults of working age and psychiatric intensive care units in February 2022. The unannounced inspection took place to check whether specific improvements had been made following the previous inspections in May to July 2021.

It has been a consistent part of our Step up to Great improvement journey to put improved patient experiences and safety as our highest priority, and we are pleased that the CQC has recognised that significant progress continues to be made by our staff and leaders.

The CQC have moved up our ratings in this core service in recognition of these improvements in the two key domains they inspected – Safety and Responsiveness. The Safety domain of the service has moved up from Inadequate to Requires Improvement. The Responsive domain has moved up from Requires Improvement to Good for this service.

The CQC did not inspect the other domains of Effective, Caring and Well-led hence our overall rating for these domains remains the same and the overall core service rating remains Requires Improvement.

The CQC report concludes that we have met all actions required in the enforcement action issued at the last inspection.

More information: https://www.leicspart.nhs.uk/news/cqc-recognises-further-improvements-in-acute-wards-for-adults-of-working-age-and-psychiatric-intensive-care-units-at-leicestershire-partnership-nhs-trust/

CAHMS recruitment event

LPT's child and adolescent mental health services came together to host a very successful recruitment event for all their roles and services on 28 April at Leicester's Morningside Arena. Over 380 people attended the event and were able to hear about the various services and teams in CAMHS and apply for jobs. Feedback was extremely positive, thank you to everyone involved. The event evaluation is being used to undertaken quarterly recruitment events to showcase LPT jobs, starting with a joint event over the summer for CHS and DMH services.

Leicester Clinical Academic Practitioner Network (LCAPN) Celebration Event

On Monday 9 May, clinical academic nurses, midwives, allied health professionals and pharmacists in the Leicestershire, Northamptonshire and Rutland (LNR) regions came together to mark 3 years of the LCAPN, and celebrate achievements in research and clinical academic careers.

We heard from national keynote speakers, Dr Jo Cooper from NHS England and Improvement and Dr Hazel Roddam from Health Education England, who spoke about the nursing research and AHP research strategic focus and future for clinical academic careers.



Colleagues from LPT also got involved with presentations, such as Dr Sarah Baillon, who presented the LPT clinical academic pathway and clinical academic development opportunities which are available within LPT. Lois Dugmore presented her PhD research project about mental health within the Polish community, and Dr Dolly Sud gave an update about the CardioPhitness study that investigated experiences of physical health care by those with severe mental illness.

The event ended with a Q&A session with system senior leaders including our executive director of nursing, AHPs and quality Dr Anne Scott, and Associate director of AHPs Deanne Rennie.

International Nurses Day

Events were held across the week of International Nurses Day to mark the birth of Florence Nightingale and thank all of LPT's nursing colleagues. Staff shared their nursing stories through virtual events and social media, and local celebrations took place across the Trust.

Admin and clerical professionals' day

Our admin and clerical workforce was celebrated during the April, through virtual events, local celebrations and the sharing of stories through internal and external channels. Dedicated screensavers were created and talks were given on career pathways and support.

Mental Health awareness week

As part of Mental health awareness week the Youth Advisory Board created a series of tips that could be shared with other young people around the theme of loneliness. Signposting to mental health support for all ages was profiled throughout the week including the central access point and a traffic lights poster of where to get help. A new mental health support area has been launched on the LPT website which includes an innovative diagnostic tool to help you work through how you're feeling and relevant signposting support at the end of it.

Equality and Human Rights Week

A round up of all our very important work around equality, diversity and inclusion was shared and celebrated during the week, through events, emails, films and a Staff Networks information event. We re-shared our commitment to Together Against Racism and what this means to us. Further work continues on updating our zero-tolerance campaign which is being co-designed with staff representatives across the Trust.

Reset and Rebuild

We know that the last two years have been the longest marathon; we are extremely proud and grateful for the way staff have stepped up to great throughout this period. We are moving forward with the actions we need to take to support our LPT family to Reset and Rebuild, living with Covid.

In response to all the feedback staff and patients have given through previous BIG conversations, we are focusing on actions to move forward in the following areas.

- Workload pressures/health and wellbeing with an increased focus on financial wellbeing and mental health.
- New ways of working updated IPC guidelines have been issued and more are to come, including health and safety risk assessments toolkits, and support with blended working across our estate.
- Estates provision making best use of our sites for staff and patients.
- Service stability and recovery ongoing large recruitment events and reviewing demand and capacity to improve waiting lists.
- Connectivity (individual and team) regular opportunities for staff to connect with each other and with the execteam.
- Transformation and quality improvement bringing together all of our transformation initiatives to support quality improvement.

Awards



HSJ Partnership Award for innovation programme that is transforming ADHD diagnosis in the NHS

A scheme to speed up ADHD diagnosis in children and young people, which has involved Leicestershire Partnership NHS Trust participation, has won a national award.

Almost 57,000 people (aged 6-18 years) have received an objective assessment for ADHD since Academic Health Science Networks began to support a new digital innovation, QbTest.

The Focus ADHD scheme pioneered in the East Midlands with the support of NHS Trusts including Leicestershire Partnership NHS Trust, has been awarded the HSJ Partnership Award for Best Mental Health Partnership.

The QbTest is an approved computer-supported objective test which measures attention, motor activity and impulsivity – the core symptoms of ADHD. The results are instantly analysed and presented in a report which compares a patient's results against a normative dataset based on age and gender. ADHD practitioners then use information from the QbTest report alongside their clinical assessment to inform their decision whether the young person has ADHD.

The innovation speeds up the time to diagnosis, improving patient experience. It is being used in 59 trusts across 113 sites – just over half of the NHS providers of ADHD assessments for this age group, including consultants at Leicestershire Partnership NHS Trust. Read more: https://www.leicspart.nhs.uk/news/hsj-partnership-award-for-innovation-programme-that-is-transforming-adhd-diagnosis-in-the-nhs

Relevant External Meetings attended since last Trust Board meeting

April 2022	May 2022
LLR MP Briefing	LPT-NHFT CiC Joint Working Group
LLR System CEO & Chairs Meeting	Covid Inquiry Meeting
LLR System CEO Meeting	DCEO at NHFT
NHS Providers Board Check In Meeting	LLR ICS Board
LLR System CEO meeting with local Cllr	LLR Prevention Development Session
Strategic Gold with NHFT	LLR System Flow Partnership
Inclusive Leadership Matters Session	LLR System Executive Group
LLR System Flow Partnership	Strategic Gold with NHFT
LLR System Executive Group	LLR Prevention & Health Inequalities Board
East Midlands Alliance CEO Meeting	LLR Local Health Resilience Partnership
National Mental Health Trusts CEO meeting	Lutterworth Steering Group
National Chief Executive Working Group	LLR Local Authority & Health Leaders Discussion Meeting
NHS Providers Finance & General Planning meeting	Leicestershire Health & Wellbeing Board
LLR Integrated Care Board	NHS Midlands Leaders Update: Provider CEOs
NHS Midlands Leaders Update: Provider CEOs	Leading in the NHS during a pandemic - Speaking at In Conversation
LLR ICB Development Session	LLR QRSM
LLR System Financial Meeting	Mental Health and Dementia with NHSE/I - SRO update
NHSE/I CEO Advisory Group	
NHS National Leadership event	
Visit by Independent Veterans Advisor	
LLR CCGs System PMO meeting	
Director of Public Health at Leics County Council	



Proposal

It is proposed that the Board considers this report and seeks any clarification or further information pertaining to it as required.

Decision required

None.



Governance table

For Board and Board Committees:	Trust Board 31 May 2022		
Paper sponsored by:	Angela Hillery, Chief Executive		
Paper authored by:	Kate Dyer, Deputy Director of Governance and Risk		
Date submitted:	17 May 2022		
State which Board Committee or other forum within the Trust's governance structure, if any, have previously considered the report/this issue and the date of the relevant meeting(s):	None		
If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/partially assured / not assured:	n/a		
State whether this is a 'one off' report or, if not, when an update report will be provided for the purposes of corporate Agenda planning	Routine board report		
STEP up to GREAT strategic alignment*:	High S tandards		
	Transformation		
	Environments		
	Patient Involvement		
	Well G overned	Yes	
	Reaching Out		
	Equality, Leadership, Culture		
	Access to Services		
	Trust wide Quality Improvement		
Organisational Risk Register considerations:	List risk number and title of risk	none	
Is the decision required consistent with LPT's risk	Yes		
appetite:			
False and misleading information (FOMI)	None		
considerations:			
Positive confirmation that the content does not risk	Confirmed		
the safety of patients or the public			
Equality considerations:	None		