

CARE QUALITY COMMISSION REPORT

REPORT FOR SOCIAL CARE & HEALTH OVERVIEW & SCRUTINY COMMITTEE 10TH MARCH 2016

INTRODUCTION

Walsall Healthcare NHS Trust had our full Care Quality Commission (CQC) inspection in September 2015. The Trust's report was published in January 2016 and a Quality Summit involving the Trust, CQC, Trust Development Authority (TDA) and other stakeholders including Walsall Council was held in early February 2016.

As the Scrutiny Committee will be aware from its meeting in January, the CQC rated the Trust "inadequate" and the Trust has been placed in Special Measures as a result of this.

This report provides a summary of the Trust's response concentrating particularly on issues of leadership and organisational culture.

THE REPORT AND THE TRUST'S RESPONSE

The Trust Board received a report at its meeting on 4th February setting out the approach that we are taking to ensure that the Trust can improve for our patients and our staff and exit special measures as soon as possible.

This report is attached to this summary along with the summary trust report published by the CQC.

The Trust's response is based on a set of actions in eight key areas. These are summarised in the diagram below.

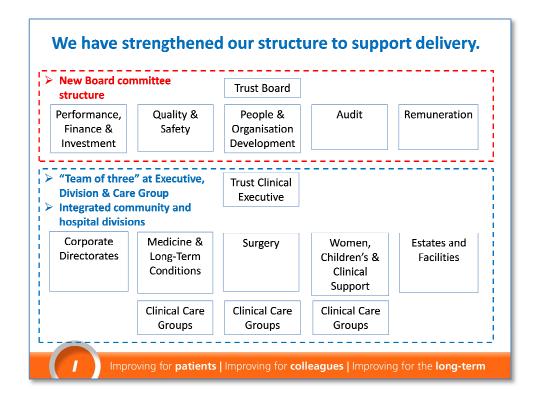


Previous discussions at OSC have concentrated on maternity services and the Emergency Department and, at the request of the Chair, this report therefore focusses on our plans to improve our organisational culture through changes to our engagement, leadership and structure.

ORGANISATIONAL CULTURE

There are a number of actions within the Trust's response to the CQC report that aim to improve our organisational culture. These are set out on page 10 of the report that went to the Trust Board and are also included here for ease of reference.

A summarised version of the Trust's organisational structure is also set out below.



3. Engagement

- Initial sessions with groups of staff from each of our Care Groups to consider the report and the action staff feel is most important in response to it.
- Launch of "Listening into Action" programme to drive improved staff
 engagement across the Trust. This approach has been widely used in other
 Trusts both in the West Midlands (e.g. SWBH, Dudley) and by other Trusts
 responding to special measures (e.g. Morecombe Bay, Barts Health).
- Working with staff from across the Trust on an explicit set of values that will define the culture we intend to establish going forward.

4. Leadership

- Series of a new appointments to the Trust Board including:
 - the appointment of a new non-executive director with specific OD and HR experience;
 - filling our most recent non-executive director vacancy;
 - a new Director of OD & HR appointed to the Executive Team plus recruitment in progress for a new Chief Operating Officer and new Director of Nursing.
- Commissioning a development programme from Ashridge for the Trust Executive Team, looking at proposals for wider board development.

• Delivering an "Effective Management" development programme for our divisional and care group teams to ensure managers across the organisation are equipped for the tasks we are asking them to undertake.

5. Structure

- Moving our Divisions and Care Groups to a clinically-led model in which the lead responsibility within the "team of three" responsible for each division is a clinician rather than a general manager. At divisional level this will be in place in April; at Care Group level in June.
- Introducing a revised Trust accountability framework and staff appraisal process to ensure consistency of purpose across the trust and support the delivery of our agreed plans.

CONCLUSION

This summary report and the accompanying papers provide an overview for the OSC of the action that the Trust is taking in response to the CQC report to ensure that we deliver the improvements that are needed for our patients and our staff.

Richard Kirby Chief Executive

29th February 2016