

# Report to the Meeting of the

**CoG 05/2021**

(Agenda item: 05)

# Oxford Health NHS Foundation Trust

# Council of Governors

**Wednesday 16 June 2021**

**Trust Chair’s Report**

**For: Information**

Welcome – to members of the council of governors new and old. The council has been revitalised through the recent elections and tonight’s agenda already shows the energetic leadership of Mike Hobbs. I would like to thank his predecessor, Chris Roberts – now deputy lead governor – for his countless hours of voluntary service, making the council tick and bolstering our accountability as the Board of Oxford Health. Among new members it’s great to extend a greeting to Ben McCay, service user governor for Oxfordshire. Ben will, together with Rachel Miller, patient experience lead for learning disability services, help us ensure our meetings are as open and accessible as possible.

Can I record some comings and goings? Our thanks to Professor Sue Dopson, who left the Board at the end of May. Sue brought a refined knowledge of organisations to our discussions and we are grateful for the commitment of time she was able to make to OHFT despite the tremendous pressure of her teaching, administration and research at the Said Business School. I am asking the council of governors to receive the University of Oxford’s nomination of a successor, Professor Kia Nobre. Kia is a distinguished and internationally recognised neuroscientist whose appointment would link the trust even more closely with the Medical Sciences Division of the university and underpin our aspiration to be a trust seeking to treat its patients on the basis of the most advanced understanding of brain and mind.

The Organisation for Economic Cooperation and Development (OECD) recently looked at mental health provision across countries and found that Covid had worsened anxiety and depression, putting renewed stress on health systems where mental health has never been adequately recognised in terms of budgets or clinical staffing. The UK’s record on that front has recently been better. On a recent call, a chair observed that recently, for the first time ever, he did not have to repeat the mantra ‘...and mental health’: the government and the NHS at large seem committed to parity and (to coin a phrase) levelling up. But my fellow chairs are now intensely exercised by post-Covid increases in demand for services and especially the gap between the needs of children and young people for help and NHS capacity. Across the country, waiting times for eating disorders are growing, despite the best efforts of our clinicians who are still of course grappling with the restrictions and enhanced infection control protocols of Covid. However, I was very pleased the other week to visit our team at Cotswold House in Marlborough and find them enthusiastic and buoyant, while desperately concerned at not being able to meet increased demand.

I hope they are not atypical. The House of Commons health and social care committee has just warned of staff burnout and the need for much more attention to the mental health and wellbeing of NHS staff. We are all reviewing the past 16 months, knowing that the pandemic is not over. Staff and service users remain under tremendous pressure. There’s talk of higher ‘irritability’, among boards as well as on the wards – though I hope not among governors! Perhaps some of that has to do with at-a-distance meetings such as this. The logistics of face-to-face meetings of any size are proving tricky while social distancing has to be maintained – and we are conscious of the carbon cost and inconvenience of travel. We look forward to the the results of research being conducted by Professor Andrea Cipriani and colleagues here in the trust looking at at-a-distance diagnosis and treatment in psychiatry. We have to keep this under review, to find an optimal ratio of face-to-face and at-a-distance working.

You will know that an ‘integrated care system’ is to be built, embracing Oxfordshire, Buckinghamshire and Berkshire West. Its boundaries are under review: they could shrink to BO or expand to BOB +, taking in Slough, Windsor and Maidenhead. (And of course we provide services within the envelope of another ICS, Bath, Swindon and Wiltshire; I am talking to its chair, with whom I am hoping to go on a joint visit to Keynsham shortly.) At the very least, ‘integration’ means talking to colleagues much more – not least our neighbours at Oxford University Hospitals -- in order to smooth the pathway for patients between GPs, hospitals and other services. Those colleagues include councillors and officers in local government. The May elections changed the leadership at Oxfordshire County Council from Conservative to Liberal Democrat; congratulations to Councillor Liz Leffman, who we hope will visit us soon. We wish her predecessor well – Councillor Ian Hudspeth was deeply knowledgeable about the county’s health and social services. Buckinghamshire Council is now a unitary and we look forward to continuing collaboration with Councillor Martin Tett and his colleagues and officers.

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