Chairman's Note

Trust Board paper D

Dear Board Member,

Last week we marked the grim milestone of over 126,000 Covid related deaths and it grieves me to note that as a Trust we have also seen over many Covid related deaths amongst our patients, including from within our own hospital community. We have a diverse community served by staff that are reflective of it and with individuals and their families belonging to many faiths and to none. I would again, on behalf of the Board, like to highlight the critical role that all our staff have played and will continue to play in serving our patients and communities and to express our heartfelt thanks for their commitment and motivation during what has (and will continue to be) a difficult period for some time ahead.

I believe the impact of the pandemic during the past twelve months has exposed the fragility of our society and we all know that this has had an uneven impact upon our own local communities and staff. Looking ahead it raises the question of how do we ensure that a new geography of disadvantage does not emerge in the areas and communities served by our Trust as services are restored to pre pandemic levels and we respond appropriately to the challenges posed by different facets of vulnerability and inequality?

Whilst we have rightly been transparent about the financial challenges that we face as an organisation, I think it is important to highlight our many clinical, service and other achievements over the past few years. Our continual focus on patients and the quality of care they receive has led to the award of a Good rating from the Care Quality Commission and the opportunity presented by capital funding in order to transform our estate and services should be focus on the future needs of our communities living in a diverse geographical and demographic landscape.

Against this background canvas I would like to draw the attention of the Board to my own thoughts about an issue that I consider to be a key theme in the culture we would want to embed within the Trust. I am conscious that representatives from groups such as the Asian Family Carers Group and others who reflect the diverse communities we serve have made the point many times to me and other Board colleagues that the Trust Board itself needs to make a public commitment to ensuring the needs and concerns of carers are taken note of. The suggestion is that there is a single point of contact on the Board for this. As someone who has previously had a lived experience for a decade as a carer for a close family member interacting with the NHS elsewhere, I understand the strength of feeling and the concern that this needs continual focus. I also believe that this is an important example for underwriting the type of receptive and responsive culture we as a Board would wish to see. With this in mind I would ask the Board to approve my recommendation that a named Executive Director delegated by the Acting Chief Executive takes on this responsibility and in addition to responding to any carer issues that are raised there is an annual report which comes to a public Trust Board meeting.

This will be the final Trust Board meeting that I will be chairing. I would like to place on record my appreciation of the support and courtesy that I have always received from Board colleagues and staff at all levels in the organisation. For me personally this role as Trust Chairman has provided a rich and rewarding seam of experience. I hope to make visits to all three acute hospital sites over the next few days in order to personally thank staff for their contribution before my last working day on April 16th 2021.

I look forward to seeing you at our next Trust Board meeting on Thursday 1st April 2021.

Regards

Karamjit Singh Chairman, UHL