



Trust and Respect

# Integration Joint Board Perth & Kinross Stakeholder Engagement Session

Friday 29<sup>th</sup> May, 2020

## Tayside Executive Partners



# Tayside Mental Health & Wellbeing Programme

**Kate Bell**

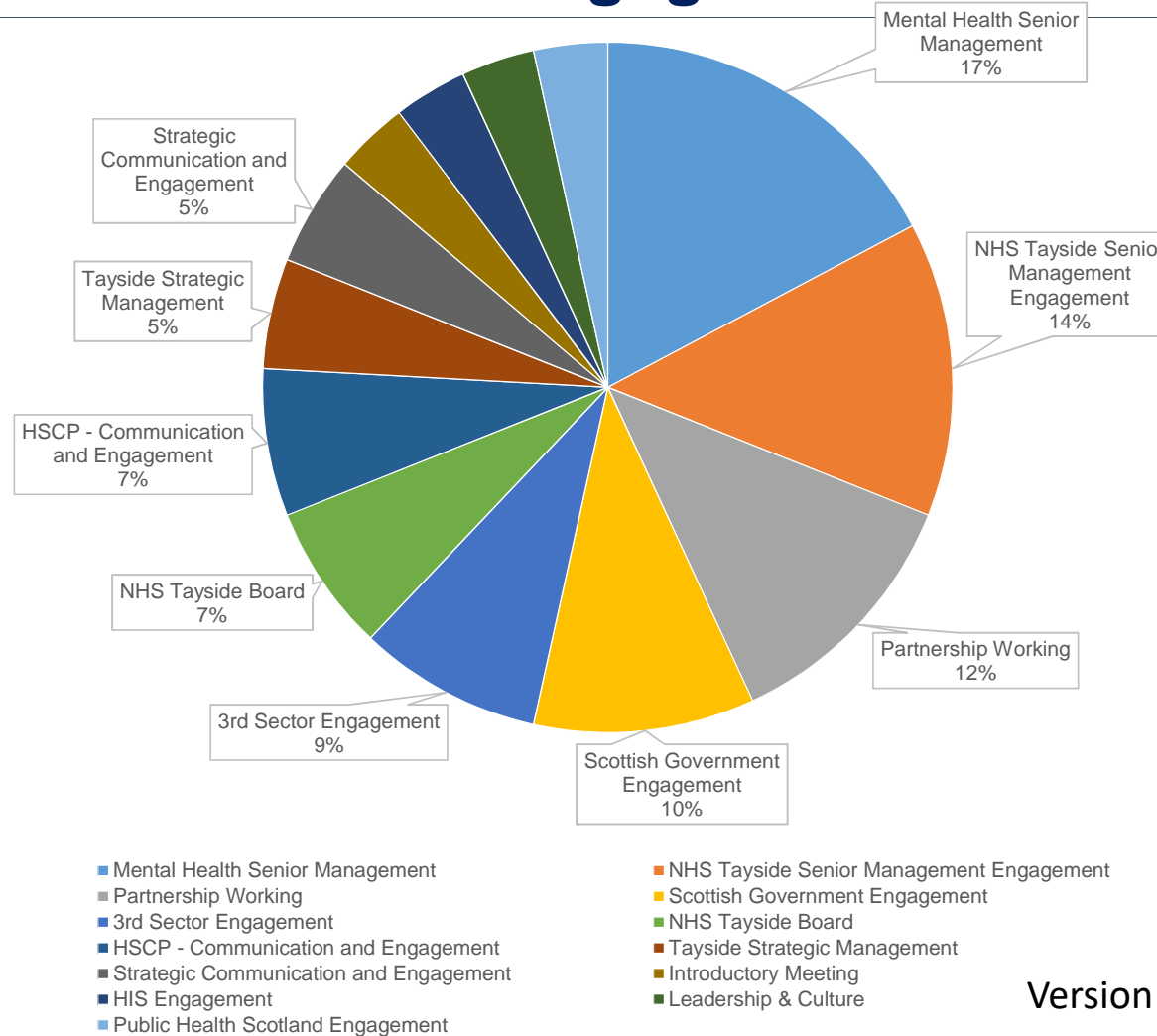
**Director of Mental Health and Wellbeing Programme**

**Interim Director of Mental Health**

# Independent Inquiry into Mental Health Services in Tayside

- Commissioned – May 2018
- Interim report – May, 2019
- Final Report – February 2020
- Listen, Learn Change Draft Action Plan – February to June 2020

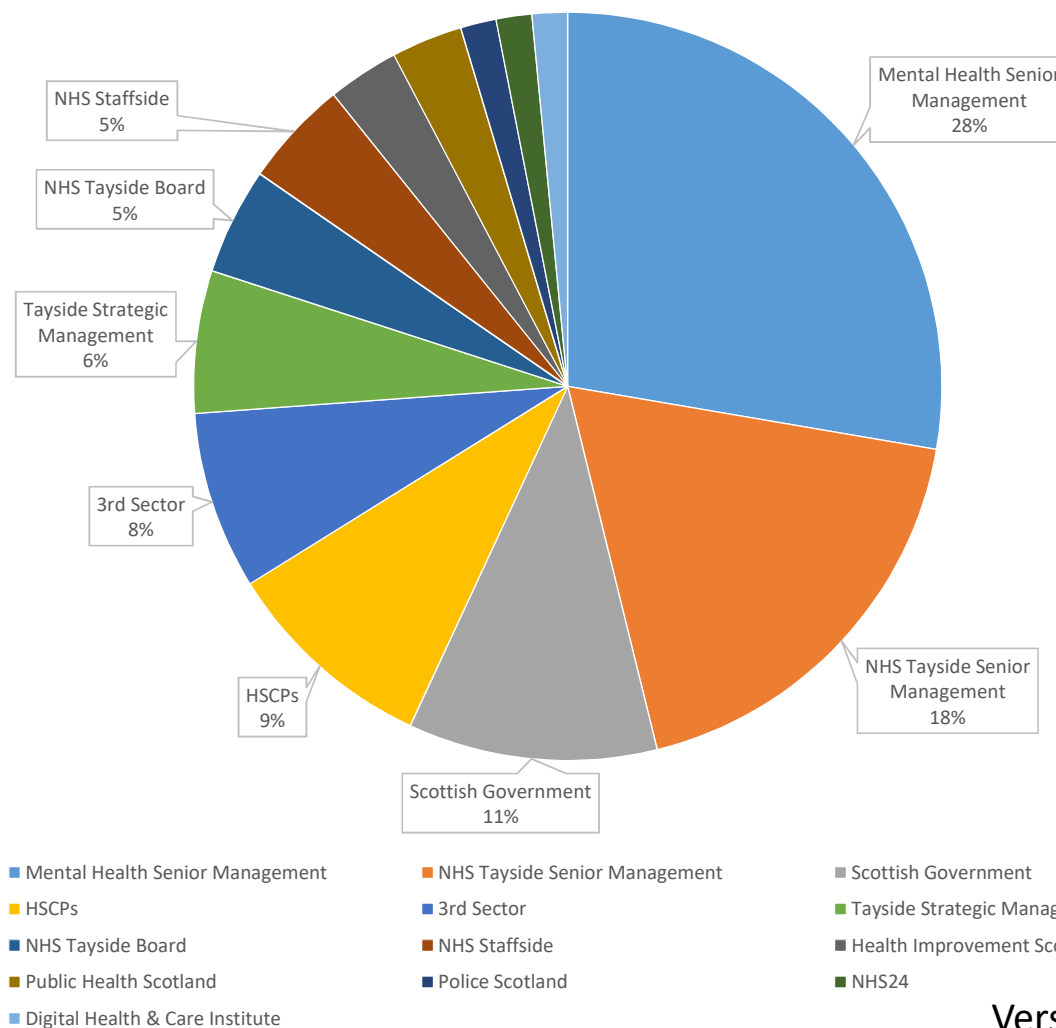
# Independent Inquiry Communications and Engagement Tracker



From March the 3<sup>rd</sup> up until the 27<sup>th</sup> of May over 200 stakeholders have been engaged with in 65 meetings occurring through Video Conference, Teleconference and face to face meetings.

Version 1 is based the purpose of the meeting

# Communications and Engagement



From March the 3<sup>rd</sup> up until the 27<sup>th</sup> of May over 200 stakeholders have been engaged with in 65 meetings occurring through Video Conference, Teleconference and face to face meetings.

Version 2 is defined by the Stakeholder Group

## Voices of stakeholders... a few extracts for context

- The Independent Inquiry spoke to approx. 1500 people
  - **High number of locums – inconsistent and poor continuity of care**
  - **Written communication to patients and families – inaccurate and not corrected to reflect facts.**
  - ‘Many reports from **patients and families of good treatment by kind, helpful staff** alongside **concerns** about **lack of available staff resource**’..
  - ‘**Staff members** reported **feeling worried about safety of patients**’...
  - ‘**Exceptionally caring**, understanding and wise professionals’....
  - ‘**Challenges with staffing** (Psychiatry, Nursing, AHP’s, MHO), ‘**long-winded**’ recruitment processes, workforce under pressure’
  - ‘**Staff not feeling listened to** or action rarely taken in response’..
  - ‘**Recognition that service improvements are badly needed**’

# Stakeholder Participation Group (SPG)

## The views of People with Lived Experience and Staff as Acceptance Criteria

The Health and Social Care Alliance Scotland (the ALLIANCE) alongside the Stakeholder Participation Group reviewed the report written in Dec 2019 [Hearing the voices of people with lived experience](#) and provided the following 11 key points they identified as key areas to measure improvement by.

**Building a long term recovery approach to services that focuses on holistic care** as opposed to a medical model by facilitating the breaking down of barriers, not just across health and social care services but across all services that support people - including housing, education and social security

**Provide carers with support** to best carry out their role effectively for those with ill mental health by sharing information on support groups and local resources and how to talk to someone in crisis and mitigate extreme experiences of mental ill health

**Ensuring sufficient processes and engagement of all key stakeholders** is achieved to bring learning is achieved from Adverse Incidents

**Creating a system of services that work together in an integrated way** – in particular mental health, substance abuse and suicide prevention

**Formally evaluate the Third Sector's contribution to mental health services in Tayside** and the role **that they are playing and can play in the** sustainable delivery of joined up services to ensure these services are maximising impact

**Better access to early intervention services** focused on achieving improved personal outcomes

**Stronger investment in preventative, community assets** which build and support a person's wellbeing as well as avoiding mental ill health escalating into a crisis

**Mental health awareness training should be required** for those employed by statutory agencies, schools and training as teachers in order to best support young people with their mental wellbeing

**Promoting a therapeutic environment** within and around services to assist people in thriving with the support of mental health services

**Person-centred assessments driven by personal situation and needs** rather than process and service capacity. While respecting confidentiality, the role of family carers should be seen as a valued part of the assessment process with the promotion of advance statements and other tools to assist with anticipatory care planning

**Enabling culture change and empowering staff to support a therapeutic environment** through the provision of staff training. Services should provide staff training on person-centred care and compassionate leadership principles and enable participation in values based reflective practice and the Scottish Government 'What Matters to You' initiative

# Employee Participation Group (EPG) and Trust & Respect

## Employee Participation Group Feedback

62% of respondents stated that there **were insufficient staffing levels on wards/departments**

“Bank staff **not appropriately trained** or at appropriate grade”

“**Due to savings targets vacancies are not filled** but we are expected to deliver same levels of service, despite growing demands of service”

**35% of respondents had either witnessed bullying or experienced bullying.** Respondents described a range of consistent concerns for colleagues, or from their own experiences, as a result of bullying.

“Bullied staff ignored by management and the people who are bullying seem to be allowed to continue”

**“You don’t Feel you have a Voice”**

Staffside Communication and Engagement

Open and Honest Dialogue

Inclusive of Everyone

Collaboration built on Trust and respect

## The Action we will take..

Staff are working in a Mentally Healthy environment and feel their Wellbeing is a priority for their employers

Staff engagement in the co-creation and development the service strategy

All staff offered exit interview  
Develop ‘Leadership, Accountability, Culture, Engagement and Communications’ project

Embedding a value based culture change

Clear line management  
organisational charts and Personal development reviews (PDR’s) for all staff

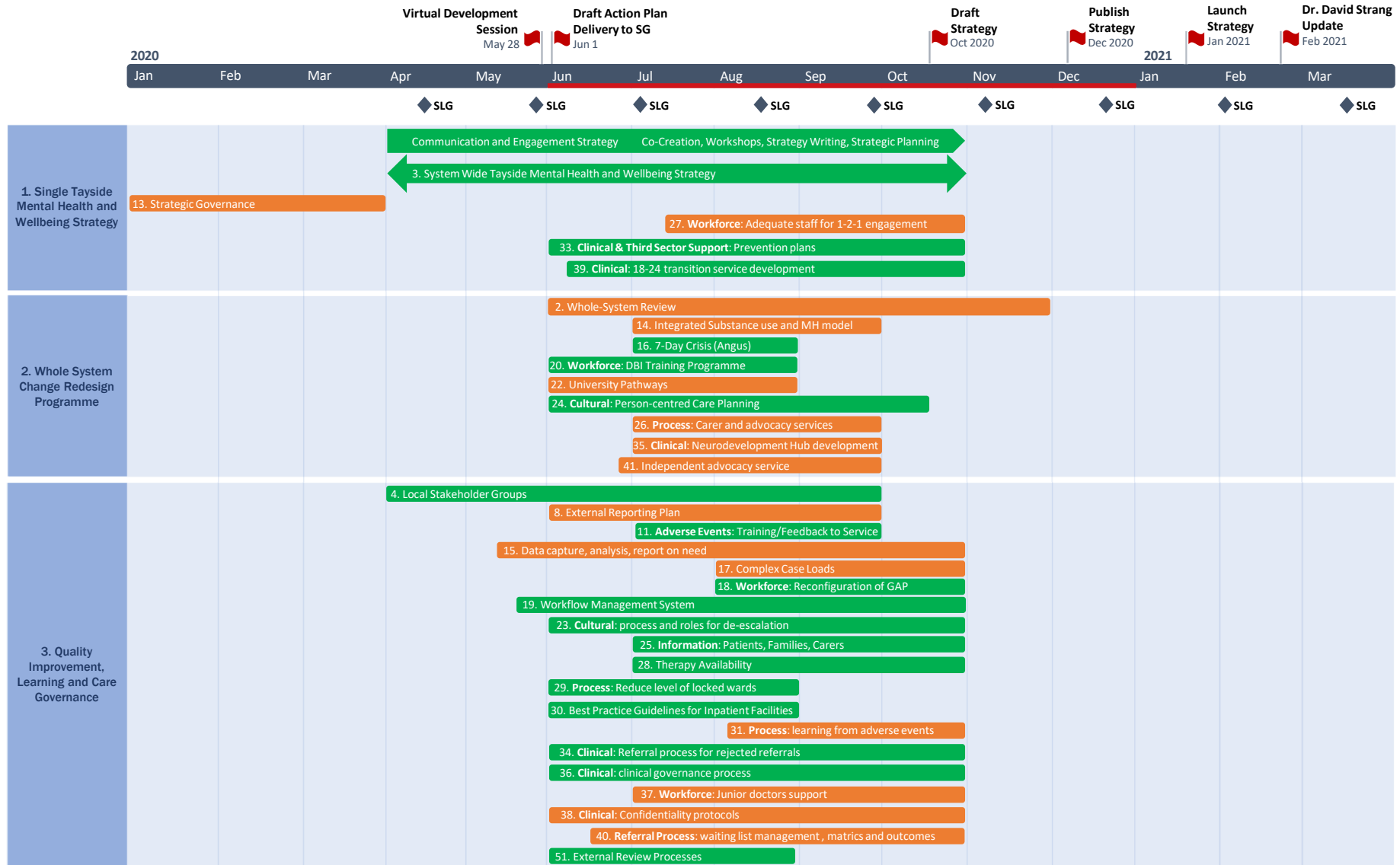


# Together we can....

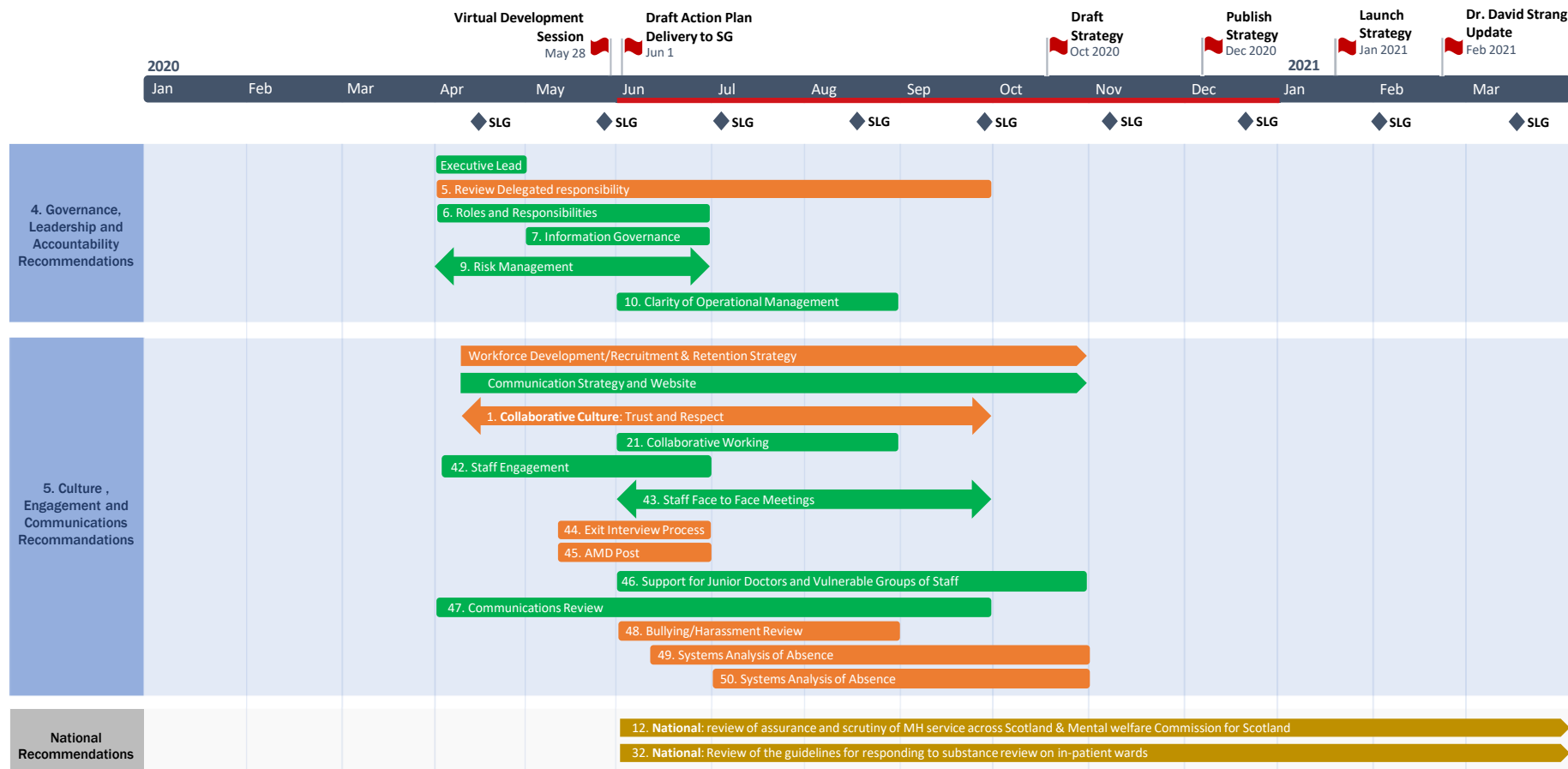
## Listen, Learn and Change

- Raise **Awareness**
- Eliminate **Stigma**
- Create **Support Structures** for people with lived experience and their families and Carers
- Provide **Safe Spaces** to talk about our mental health
- Make sure **No One Feels Alone**
- Generate ideas AND **Hope** for the future mental health supports and services in Tayside

# Independent Inquiry Action Plan Overview



# Independent Inquiry Action Plan Overview



# 1. Develop a new culture of working in Tayside built on collaboration and Trust and Respect.

Recommendation 1	Develop a new culture of working in Tayside built on collaboration, trust and respect.			Outcome – Staff are working in a Mentally Healthy environment and feel their Wellbeing is a priority for their employers. Incorporate communication plans and workforce plan for continuous improvement approach to becoming a learning organisation ( including development and learning opportunities)	RAG – Amber Date – Sept 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Grant Archibald NHS Tayside Chief Executive	NHS Tayside Corporate Wellbeing Group	Communication plans Organisational Development Plan	July 20 Aug 20	1. The programme will develop communication plans that include processes of how we ensure key messages are communicated to all staff describing the response to the inquiry and the steps we will be taking to ensure a continuous improvement approach to becoming a learning organisation.  This will include development and learning opportunities for all mental health staff at all levels to ensure a consistent application of values and behaviours is practiced by all.	
Team Involved (more team members will be added as we develop these plans) – Peter Stonebridge, Medical Director, Claire Pearce, Nurse Director Kate Bell, Director of Mental Health, George Doherty, Director of Workforce					

## 2. Conduct an urgent whole-system review of mental health and well-being provision across Tayside to enable a fundamental redesign of mental health and wellbeing services for Tayside.

Recommendation 2	Conduct an urgent whole-system review of mental health and well-being provision across Tayside to enable a fundamental redesign of mental health and wellbeing services for Tayside.			Outcome: New Clinical and service models with proportionate service configuration – a completed whole system review with recommendations for new model of care	RAG – Amber Date – Nov 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Kate Bell Interim Director of Mental Health, NHS Tayside	NHS Tayside	Develop programme of work for delivery of future models of care	May 20 Sept 20	Design and develop the 2021-2030 Tayside Mental Health and Wellbeing Strategy and Service Change delivery Programme 2020-2023.  1. To review work completed to date. 2. Full review of mental health supports and services 3. Co-create, design and develop Strategy as in strategic theme 1, recommendation with accompanying detailed plans. 4. Recognised that Clinical engagement of all staff key to delivery  Programme Director, Lesley Roberts will lead and be responsible for the delivery of this action.	
Teams Involved - Tayside Mental Health and Wellbeing Strategy Board Lesley Roberts. Programme Director MHWS. Programme Team					

5. Review the delegated responsibilities for the delivery of mental health and wellbeing services across Tayside, to ensure clarity of understanding and commitment between NHS Tayside and the three Integration Joint Boards. This should include the decision to host General Adult Psychiatry inpatient services in Perth & Kinross Integration Joint Board.

Recommendation 5	Review the delegated responsibilities for the delivery of mental health and wellbeing services across Tayside, to ensure clarity of understanding and commitment between NHS Tayside and the three Integration Joint Boards. This should include the decision to host General Adult Psychiatry inpatient services in Perth & Kinross Integration Joint Board.			Outcome - Detail of assignation of delegated responsibility for Mental Health Functions.  See interdependency recommendation 13 above	RAG – Amber  Date – Sept 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Kate Bell Interim Director of Mental Health	NHS Tayside	Draft Integration Schemes	Aug 20	<p>This requires a Tayside wide approach to developing the review process detailing a common service specification with common metrics and outcomes to ensure all services are adequately described, quantified and resourced accordingly.</p> <p>The Mental Health and Wellbeing Strategy Board will deliver on this.</p> <p>Establish the process and set up a group with representative of relevant stakeholders i.e. Integration Joint Boards (IJBs), Chief Officers (Scottish Government and Integration Unit as required)</p> <p>Work up all relevant intelligence required – Strategic Needs Assessment</p> <p>Workforce Development Plans based on requirements and Recruitment and Retention Plans</p> <p>Review current Dundee, Angus, Perth &amp; Kinross Integration Schemes with a view to reassigning Mental Health Functions across Health and Social Care Partnerships based on population need</p>	
Team Involved (more team members will be added as we develop these plans) - Bill Nicoll, Chief Officers					

# Aim



(1)  
Deliver a new culture of working in Tayside based on collaboration, trust and respect.

Consider the value of a Whole System Approach.

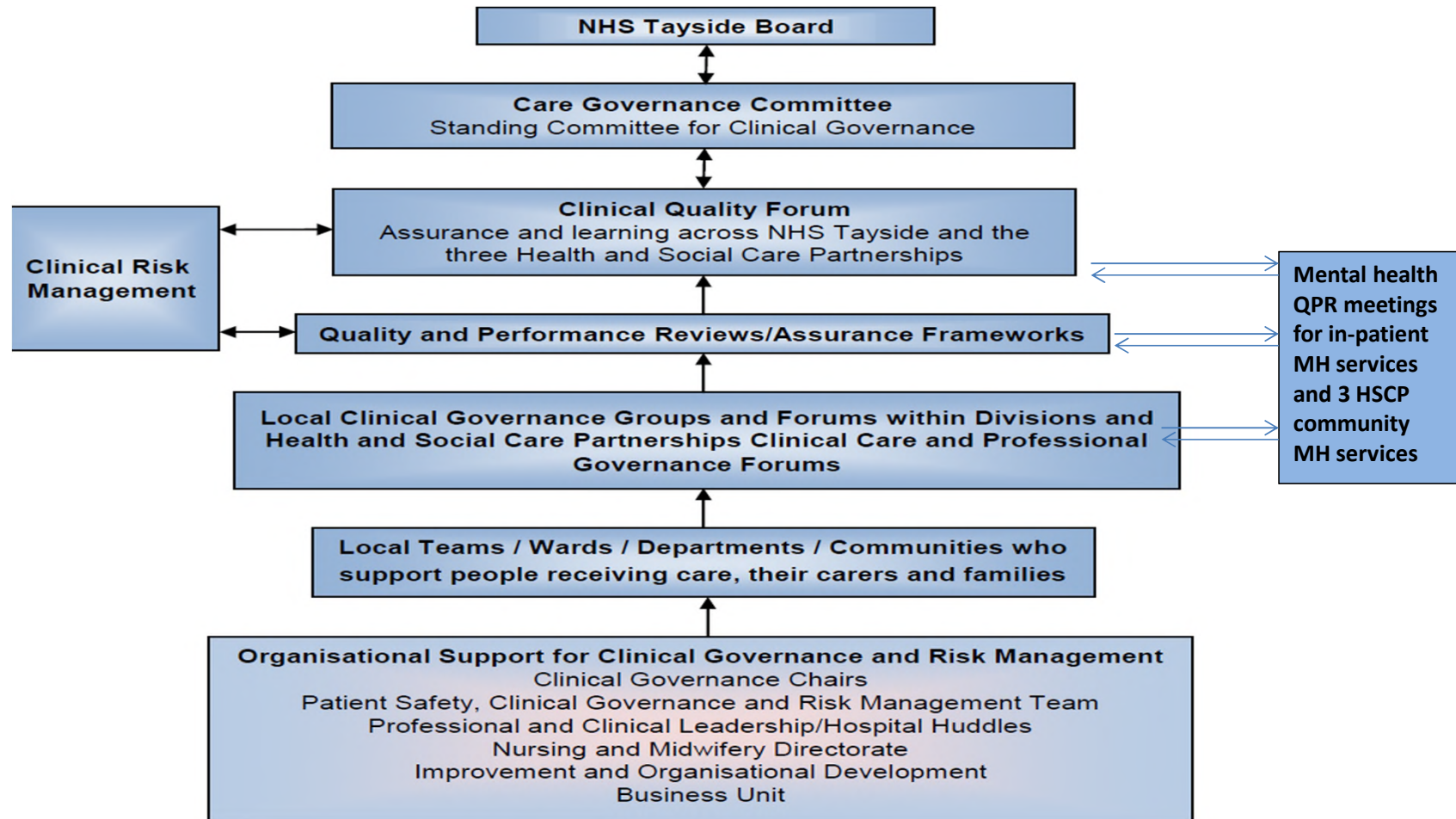
Primary Driver	Secondary Driver	Change Idea	
Retain and attract Trainee psychiatrists at the completion of training	<p>46: Encourage, nurture and support Junior Doctors who are vulnerable groups of staff on whom the service currently depends</p> <p>Foster a supportive training environment by valuing all colleagues.</p>	<p>37: Support Junior doctors working on call. Inc. Young people's mental health</p> <p>Consistent Consultant on call rota to support OOH</p>	<p>Work with the Directorate of medical education to optimise training</p> <p>Develop clinical fellows posts to attract trainees to Tayside</p>
Staff feel valued and listened to	<p>43: Prioritise concerns raised by staff by arranging face to face meetings where staff feel listened to and valued.</p> <p>47: Develop robust communication systems informally and formally. Uses of technology are crucial.</p>	<p>37: Support Juniors working on call with young people's mental health</p> <p>Online leadership programme across NHS Tayside</p> <p>44: Meaningful exit interviews</p> <p>48: Ensure that bullying and harassment are not tolerated</p>	<p>Career development programmes for staff</p> <p>45: Full time AMD post</p> <p>50: Mediation and conflict resolution to rebuild relationships inc with the press</p>
13: Ensure that there is urgent priority given to planning of community mental health services in Tayside. In partnership	<p>18: Plan workforce in community mental health teams in the context of Cons vacancies with the aim of achieving consistent, continuous care</p> <p>10: Ensure that there is clarity of line Mx for all staff and that appraisals (and job planning) are conducted effectively</p>	<p>Make teaching a virtual version with "Cons. Zoom" to communicate information</p> <p>17: Review complex cases on Comm. MH teams. Update care plans and ACPs.</p> <p>19: Develop Safe and effective workflow management. to reduce referral to treat times</p> <p>21: Close working of the CRHTT and community teams</p> <p>Develop a recruitment strategy across all of NHST with MH as a priority</p>	<p>Focussed Recruitment strategy for MN in Tayside</p> <p>15: Comprehensive data capture to understand the community need</p> <p>27: Provide adequate staffing levels to allow time for 1-1 engagement with patients</p> <p>Access to online Quality improvement learning for staff. Work with NES</p> <p>Embed MH redesign in transforming Outpatients programme (TOPS)</p>
42: Ensure all staff working across MH services have the opportunity to contribute to service development and decision making about future service direction. Managers of services should facilitate	<p>51: Ensure that all external reviews are embraced as an opportunity to learn. All staff should receive details.</p> <p>Learn from the experiences of staff from previous redesign processes.</p>	<p>31: Swift and comprehensive learning from reviews following events on wards</p>	

# SCOPE OF CLINICAL GOVERNANCE





# Tayside NHS Board Governance Framework

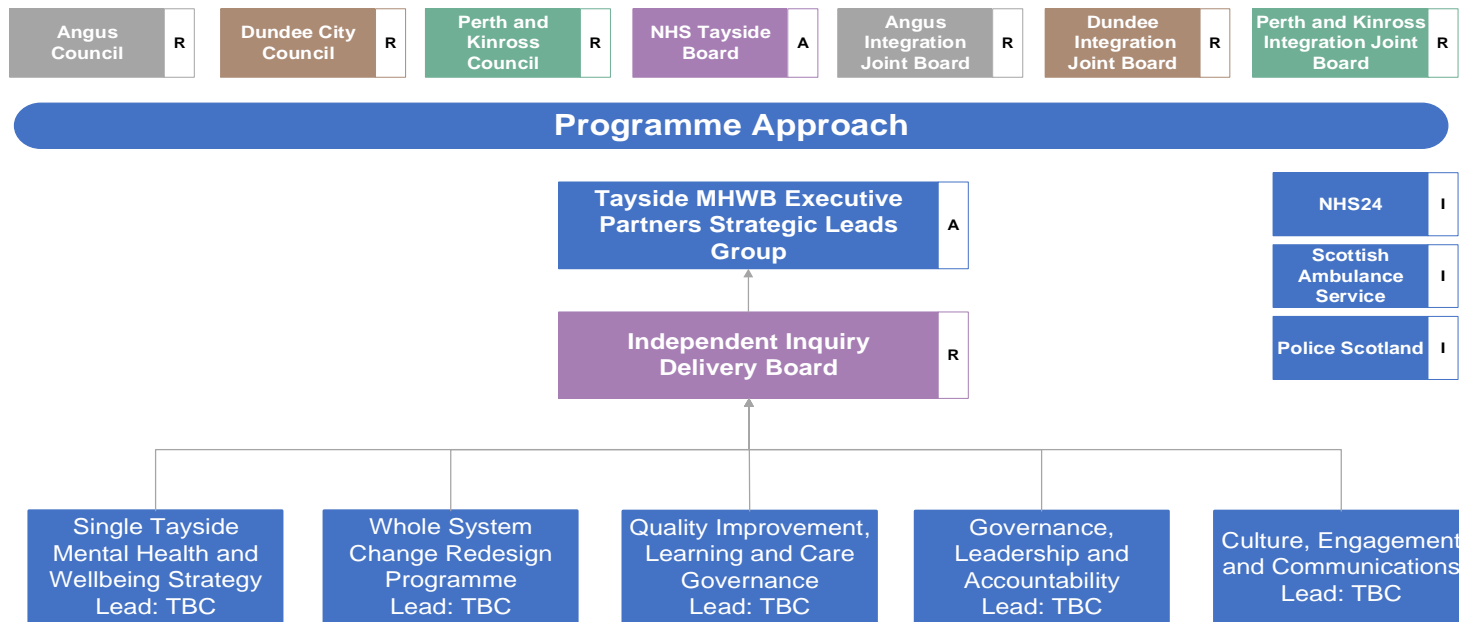


**What**  
**Next?**

# Programme 1 – Independent Inquiry Delivery



## Tayside Mental Health and Wellbeing Strategy Governance Arrangements



### Key (Strategy Board Governance)

R – Responsible      C – Consulted  
A – Accountable      I – Informed

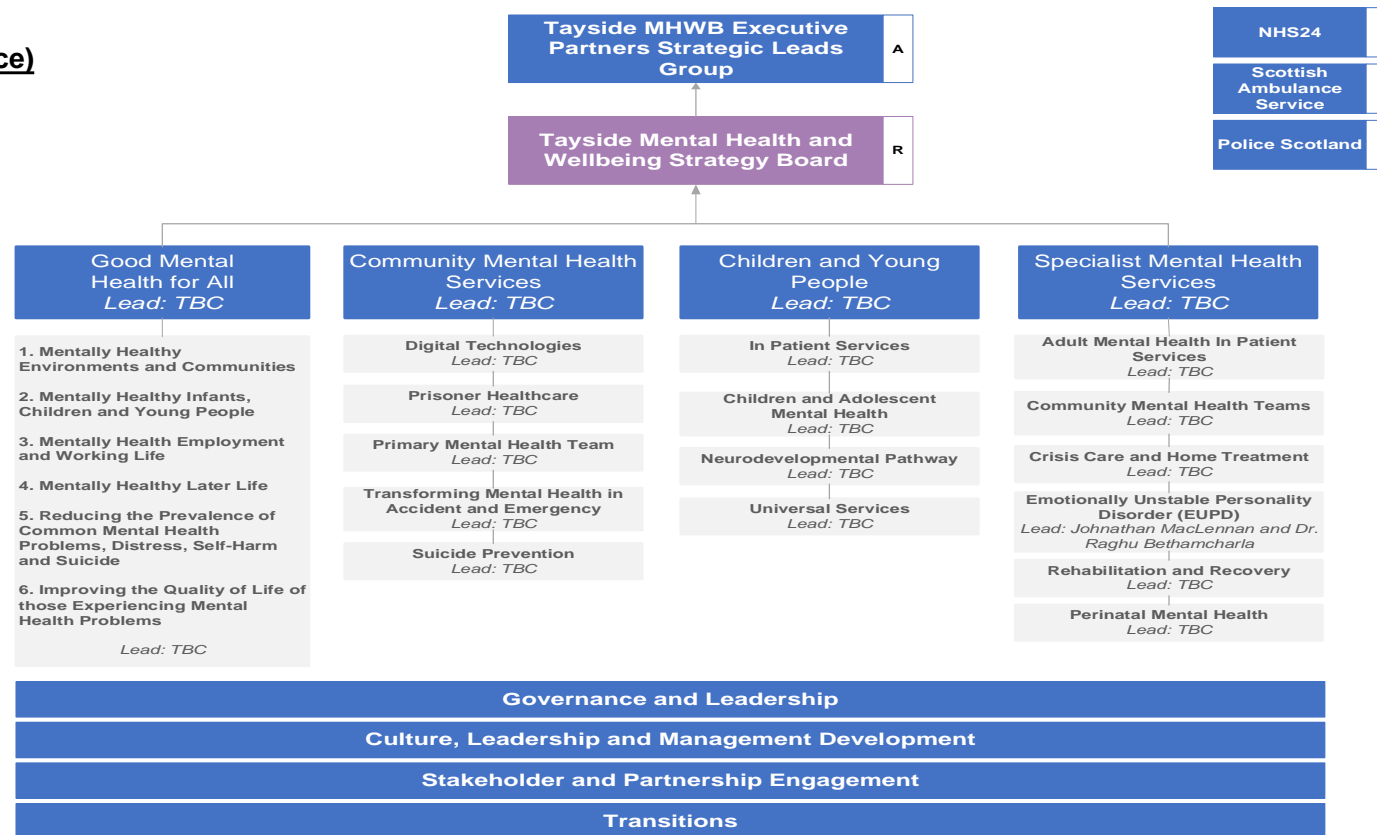
# Programme 2 – Whole System Change Programme



## Programme Approach

### Key (Strategy Board Governance)

R – Responsible  
A – Accountable  
C – Consulted  
I – Informed



# Merged Single Tayside Mental Health and Wellbeing Programme





## Engage – Co-create – Deliver

- Consider feedback **from all** to date **May 2018 - June 2020**
- Record and take on ideas generated from Stakeholder Participation Group meeting **26/05/20**
- Capture feedback from Executive Partners meeting **27/05/20**
- Take feedback from this session – **28/05/20**
- Take feedback from P&K IJB meeting – **29/05/20**
- Submit Draft Action Plan to Scottish Government – **01/06/20**
- Agree scope, scale and infrastructure write TMHW Strategy, to co-create, co-produce and implement the Single Tayside Mental Health and Wellbeing Programme

