



PERTH & KINROSS INTEGRATED JOINT BOARD

26 October 2022

MENTAL HEALTH SERVICES UPDATE

Report by Chief Officer
(Report No. G/22/158)

PURPOSE OF REPORT

The purpose of this report is to provide the Integration Joint Board (IJB) with an update on the current position in relation to mental health services. This is a standing item for the IJB.

1. RECOMMENDATIONS

It is recommended that the IJB:

- i. Notes the contents of this report;
- ii. Authorises the Chief Officer to continue to engage with NHS Tayside Executive Directors and other Chief Officers (Dundee and Angus IJBs) to consolidate the leadership arrangements and refine governance and structures to deliver on Living Life Well and to bring forward a report for IJB approval by end of March 2023;
- iii. Requests that the Chief Officer brings forward a report on the implications of the final report by the IOAG and the responses by Scottish Ministers by end of December 2022; and
- iv. Requires the Chief Officer to bring forward detailed proposals to progress the decision about single site provision in Tayside for inpatient Mental Health by end of March 2023.

2. SITUATION/BACKGROUND / MAIN ISSUES

2.1 The IJB has requested an update on the current position in relation to mental health services Tayside-wide as a standing agenda item. This report provides:

- an updated position in relation to inpatient mental health services (for which operational responsibility rests with NHS Tayside) to assist the IJB with

oversight of acute, mental health inpatient services and ensure compliance with the strategic plan;

- an update on the coordination of strategic planning for mental health services across Tayside (which is delegated to the Perth and Kinross IJB as lead partner within the revised Integration Scheme approved in June 2022); and
- an outline of the current position in relation to Listen Learn Change and the work of the Independent Oversight and Assurance Group.

A similar report will be considered by the NHS Tayside Board on 27th October 2022.

2.2 Inpatient Services

The Integration Scheme clarifies that operational management responsibilities for mental health and learning disability inpatient services rests with NHS Tayside. The Executive Nurse Director is the executive lead with responsibility. Day-to-day functions are managed by two General Managers, one responsible for general adult psychiatry inpatient services and one responsible for learning disability inpatient services.

2.3 Learning Disability Inpatient Services

Learning Disability Inpatient Services continue to be provided from the following hospital sites:

- (1) Carseview Centre in which the Learning Disability Assessment Unit provides for 10 patients
- (2) Strathmartine Hospital which provides for 15 longer-term patients in small units.

There were 14 patients whose discharge was delayed at 7/10/22 and these are broken down in the table below.

Hospital Site	No. of Learning Disability Delayed Discharges	Health and Social Care Partnership
LDAU – Carseview (Capacity 10)	8	Dundee (5) Angus (3)
Flat 1 – Strathmartine (Capacity 9)	1	Other
BSI Unit – Strathmartine (capacity 6)	5	Dundee (2) Perth & Kinross (3)
Total	14	

- 2.4 The majority of patients have very complex needs, and many have been receiving inpatient care for long periods. Complexity of the care and support needs of these patients have resulted in extended periods. There are significant delays

in achieving a supported transition to the community when hospital care and treatment is no longer required due to this complexity. All require 24/7 care and support via intensive care packages by specially trained and supervised care teams in order to support people to move from hospital and to live within their own accommodation. Securing care providers and teams of social care staff is notoriously difficult across Tayside for this level of need. In some instances, in order to leave hospital, these patients require specialist residential care for which there is a national shortage. The pressure on the Learning Disability Assessment Unit (LDAU) in Carseview is particularly challenging and there are instances where vulnerable patients with a learning disability requiring inpatient assessment are having to be admitted inappropriately to General Adult Psychiatry inpatient services.

- 2.5 Recruitment and retention of an appropriately skilled workforce continues to present challenges across the in-patient Learning Disability Service. Promoting conditions which ensure positive staff wellbeing continues to be a priority for managers in order to enhance recruitment, retention, and support in the event of challenging clinical situations.
- 2.6 The Mental Welfare Commission (MWC) visited the Learning Disability Assessment Unit on 24 May 2022 and a report on the visit will be published in October 2022.
- 2.7 There is much work required to achieve a single site model for learning disability inpatient services and to accelerate the discharge of long term patients in line with the Coming Home Implementation report published in February 2022 (<https://www.gov.scot/news/coming-home-implementation-report/>). In order to progress this, it is essential that an urgent workstream is established within the revised governance arrangements for realising the Living Life Well strategy referred to in paragraph 2.13 of this report.

2.8 **General Adult Psychiatry Inpatient Services**

The challenges of demand and capacity persist. These services continue to experience high levels of occupancy beyond the Royal College of Psychiatry's recommended level of 85%. In the 3 months June-August 2022 the occupancy levels were 97%, 101% and 104% respectively. Actions to reverse this trend will require whole system change.

- 2.9 There were 13 patients whose discharge was delayed at 7/10/22 and a further 4 people experiencing a delay from rehabilitation. Delays are attributed to the availability of supported accommodation, residential care/nursing placement, care and support packages and the requirement to safeguard welfare through Guardianship Orders.

Hospital Site	No. of GAP delayed discharges	Health and Social Care Partnership
Carseview	7	Angus 3, Dundee 4
Murray Royal: GAP	2	Perth & Kinross 2
Total	13	

- 2.10 Workforce issues continue to present ongoing risk to service delivery and quality of care and in a few instances, there are deficits of 50% in the Registered Nursing workforce.

A number of actions have been taken to improve the situation, including:

- successful recruitment to senior nursing posts and newly qualified practitioners
- supplementary staffing and block booking of agency staff to support continuity of care
- the Moredun Ward at Murray Royal is currently capped at 19 (a reduction in the bed base from 22) to ensure safe staffing ratios
- a workforce review undertaken within the Crisis and Intensive Home Treatment Team and redirection of urgent referrals and weekend support

Dr Gordon Cowan, Consultant Psychiatrist has been appointed in an Interim Clinical Director role and it is anticipated that this key additional leadership role will help drive improvement and address medical shortages.

- 2.11 The Mental Welfare Commission (MWC) has published a report on 22 August following a recent visit to Moredun Ward, Murray Royal Hospital on 22 August 2022. The report highlights a number of positive findings, including:

- Patients mostly spoke positively about their care and treatment on the ward.
- Patients were aware of having a named nurse and were able to have one-to-one sessions with them when required. Patients were also aware that they could speak to their doctor if they wished to and could attend weekly clinical meetings.
- Patients were aware of their rights as detained patients and had access to advocacy and legal representation.
- Patients talked about the activities that they participated in
- The MWC saw a range of detailed and person-centred care plans that addressed both physical and mental health care needs.
- Each patient had a risk assessment on file which was comprehensive and showed evidence of appropriate intervention and strategies to manage risk.
- Multidisciplinary Team (MDT) involved in the provision of care and treatment in the ward and the social work team has provided two dedicated social workers to link with the ward which should ensure a joined-up approach for patients.

- Presence of Citizens Advice Bureau on ward and access to “therapet” dog

The following is a summary of the recommendations which will be incorporated into a service improvement plan:

1. Managers should have a clear process to ensure that any requirements set out by medical staff using the Mental Health (Care and Treatment) (Scotland) Act 2003 are completed lawfully, and with the proper authority and safeguards in place.
2. Managers should clarify what steps and/or discussions with relevant stakeholders are being undertaken to ensure that non section 22 locum consultant psychiatrists are able to access and undertake section 22 AMP training, as a priority, to reduce the likelihood of the circumstances above arising.
3. Managers should ensure that staffing numbers within Moredun Ward reflect patient needs and take into account the challenges presented by the layout of the ward.
4. The size and layout of the ward is not conducive for nursing staff observation especially when the ward has a significant staffing issue. Managers should prioritise a review of the ward layout to ensure that it provides a safer environment for patients.
5. Managers should ensure that the boosting of the Wi-Fi signal and improvement of mobile phone reception takes place as soon as is practicable.
6. Managers should ensure that plans to install an additional phone on the ward are expedited.

2.12 Lead Partner: update on the coordination of strategic planning

A review of the requirements for programme management support has been completed and resulted in a decision to establish a new permanent team to support the delivery of the Living Life Well Strategy and transformation programme. A permanent team consisting of a Programme Manager and two project support officers have now been recruited. The Programme Manager commenced the role on 3 October and will be managed within NHS Tayside’s Improvement Academy by the Associate Director – Improvement. This will bring additional “in-house” capacity and dedicated resources.

- 2.13 As intimated in August, a review of the governance structures for Listen Learn Change and Living Life well has commenced and soundings taken from the Tayside Executive Partners, the Strategic Leadership Group, members of the Integrated Leadership Group and the Programme Board. In addition, there has been initial discussion with NHS Tayside Employee Director and staff-side representatives to consider how their involvement will be most effective. Next steps include finalising a streamlined structure, a re-evaluation and re-prioritisation of the current workstreams and updating the terms of reference for the Programme Board. It is intended that these changes will better support transformational change and achieve the following:

- new reporting arrangements that take account of responsibilities in the revised Integration Schemes

- clarification of decision-making & use of Directions through the IJB/Lead Partner in order to commission services to be provided by NHS Tayside and the three local authorities to meet the requirements of the strategic plan
- refine the number of priorities and workstreams and provide a much stronger focus on progressing to a single site model for inpatient services, addressing environmental deficits and delayed discharge
- incorporating the development of a financial framework to support delivery into the governance arrangements
- incorporate the 'legacy' from the Listen Learn Change action plan and improvements
- increase pace of change and transformation to ensure the delivery of new models of care and an agreed financial framework to bring this about
- enable and resource for meaningful engagement & co-production with people with lived experience and the workforce
- use existing structures and streamline wherever possible

2.14 A Short-Life Working Group with representation from the 3 Health and Social Care Partnerships and NHS Tayside Board Secretary has commenced to prepare a policy and decision-making route for delegated services coordinated by a Lead Partner. This will enable the Perth and Kinross IJB to lead the strategy for the transformation of mental health services with confidence including the use of Directions. It is intended that there will be a workshop event for IJB Chairs and Vice Chairs and NHS Tayside Board members in the next few months.

2.15 The Chief Officer has taken forward the plans for a values-based leadership and relationship building experience supported by Norman Drummond and Columba 1400. A member of the Living Life Well Programme Board representing the Stakeholder Participation Group is jointly planning two sessions to be held in November 2022. This will bring together a number of people with lived experience of mental health and learning disability services and an equal number of senior leaders who are instrumental to the delivery of a successful transformation programme.

2.16 **Listen Learn Change and the work of the Independent Oversight and Assurance Group (IOAG)**

The Listen Learn Change Action Plan was published in August 2020 and is the whole system response to the 51 Recommendations set out in Trust and Respect, the report of the Independent Inquiry into mental health services in Tayside led by David Strang. The IOAG on Tayside's Mental Health Services was established by the Minister for Mental Wellbeing and Social Care in October 2021 to provide assurance to Ministers of the progress being made and to give advice and support to the Tayside Executive Partnership as they lead the change that is required for Tayside's mental health services. The IOAG is chaired by Fiona Lees with David Williams and Fraser McKinlay as members. The Tayside Executive Partners comprises the Chief Executives of NHS Tayside; Angus, Dundee City and Perth & Kinross Councils; and the Divisional Commander for Police Scotland.

2.17 The Independent Oversight and Assurance Group published its third and final quarterly report for the period May to August 2022 on 22 September 2022 and this

can be found via this link: [Independent Oversight and Assurance Group on Tayside's Mental Health Services: quarterly report - May 2022 to August 2022 - gov.scot \(www.gov.scot\)](https://www.gov.scot/publications/independent-oversight-and-assurance-group-on-tayside-mental-health-services/quarterly-report-may-2022-to-august-2022/pages/12.aspx). This report provides progress against seven themes:

1. Integration
2. Patient Safety
3. Engagement and Culture
4. Workforce
5. Governance
6. Performance
7. Children and young people

The next steps in the quarterly report are for the Tayside Executive Partners to provide a collective assessment of their delivery of their leadership promise set out in Living Life Well and a repeat of the recommendations to the TEP in the second quarterly report which were to:

1. progress the decision about single site provision in Tayside for inpatient Mental Health care as a matter of priority
2. address environmental issues arising from the accommodation provided to patients with a learning disability at Strathmartine
3. address the significant issues of delay in discharge for some patients who do not require to be cared for as an inpatient

2.18 An evidence repository has been built by NHS Tayside to provide a single site for a wide range of documentary evidence to demonstrate progress in relation to the 49 recommendations set out in Trust and Respect and contained within the Listen Learn Change Action Plan. These are also organised around the themes being taken forward by the IOAG. The IOAG has carried out a substantial engagement with leaders, staff, patients, communities and visits to various establishments and services across Tayside and is coming to the end of its work and will be preparing a Final Report to Scottish Ministers by mid November 2022. A final update was provided by Tayside partners on 7 October 2022 in a template which sets out the understanding of each of the 49 recommendations, partners' response, outcomes achieved, the actions required and the milestones for success. This was accompanied by an assessment of progress using a RAG status to end of September 2022. The Oversight Group indicated that they would also provide an assessment of the commitment and capacity for change and continuous improvement within Tayside and a commentary on the leadership of the transition from Listen Learn Change to Living Life Well.

3. CONCLUSION

3.1 This report updates the IJB on the current position in relation to mental health services across Tayside. It sets out the continued challenges associated with demand management in acute inpatient services and serves to highlight the urgent need to advance plans for new models of care and to refine the number of priorities currently underpinning the delivery of Living Life Well to provide a much stronger

focus on progressing to a single site model for inpatient services, addressing environmental deficits and delayed discharge and addressing workforce shortfalls. The work of the IOAG will conclude in a report to Scottish Ministers in mid-November and there will be a need to ensure that outstanding or legacy actions are taken forward within our strategic planning arrangements.

Author(s)

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NOTE: No background papers, as defined by Section 50D of the Local Government (Scotland) Act 1973 (other than any containing confidential or exempt information), were relied on to any material extent in preparing this report.

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1. IMPLICATIONS, ASSESSMENTS, CONSULTATION AND COMMUNICATION

Strategic Implications	Yes / None
HSCP Strategic Commissioning Plan	None
Transformation Programme	None
Resource Implications	
Financial	Yes
Workforce	None
Assessments	
Equality Impact Assessment	None
Risk	None
Other assessments (enter here from para 3.3)	None
Consultation	
External	Yes
Internal	Yes
Legal & Governance	
Legal	None
Clinical/Care/Professional Governance	None
Corporate Governance	None
Directions	None
Communication	
Communications Plan	None

1. Strategic Implications

1.1 Strategic Commissioning Plan

There are no implications for the Perth and Kinross IJB Strategic Commissioning Plan at this stage.

2. Resource Implications

2.1 Financial

The Chief Officer and Chief Finance Officer have worked with the Director of Finance for NHS Tayside and the Chief Officers and Chief Finance Officers for Dundee and Angus IJBs to provide a financial package to support the recruitment of a programme management team for the Tayside Mental Health Strategy. The costs will be shared equally and funding of £63K is required from Perth and Kinross HSCP.

2.2 Workforce

There are no implications for the Perth and Kinross workforce at this stage.

3. Assessments

3.1 Equality Impact Assessment

Assessed as **not relevant** for the purposes of EqIA

3.2 Risk

The risks associated with a lack of clarity in relation to roles and responsibilities for mental health services are reduced as a result of the publication and approval of the revised integration scheme for 2022. A series of risk workshops are underway to update and revise the risk management arrangements for strategic mental health risks. This may result in a change to the Perth and Kinross IJB strategic risk register which will be reported to the IJB Audit and Performance Committee.

3.3 Other assessments

Not applicable

4. **Consultation – Patient/Service User first priority**

4.1 External

NHS Tayside Executive Nurse Director, Medical Director and Director of Finance.

4.2 Internal

Chief Finance Officer.

5. **Legal and Governance**

Not applicable

6. **Directions**

There are no directions as a result of this report.

7. **Communication**

There is no requirement for a communications plan.

8. **BACKGROUND PAPERS/REFERENCES**

NHS Tayside reports and minutes of meetings (NHS Board and Care Governance Committee).

9. **APPENDICES**

None