NORTHUMBERLAND, TYNE AND WEAR NHS FOUNDATION TRUST

BOARD OF DIRECTORS

Meeting Date: Wednesday 25 March 2015

Title and Author of Paper:

Chief Executive's Report John Lawlor, Chief Executive

Paper for Debate, Decision or Information: For Information.

Key Points to Note:

- 1. Learning disability services closure programme
- 2. Independent Commission to review the provision of acute inpatient psychiatric care for adults in England, Wales and Northern Ireland
- 3. Learning from Savile
- 4. Reducing harm from tobacco
- 5. Industrial Action / Pay Offer
- 6. Freedom to Speak Up Independent Review
- 7. Clinical Excellence Awards

Outcome required: For Information.

Chief Executive's Report

March 2015

1. Learning disability services closure programme

Last month, the Corporate Decisions Team held an extraordinary development session looking at our learning disability services in the context of Simon Stevens' recent announcement to transform services for people with a learning disability. This announcement included a two year closure programme for inpatient learning disability services and the development of community alternatives.

As part of this plan, all inpatients with a learning disability should, wherever possible, have a plan to be discharged by 2016. There has been an acknowledgement that for some individuals who are detained under forensic sections of the Mental Health Act, that this may not be possible but there is a desire to see as many people as possible moving from hospital in the coming months.

The Trust has been very successful in closing learning disability hospitals in the past and every day we support people with learning disabilities to live very well in their own homes and communities. Many staff will have worked through the closures of Prudhoe Hospital, parts of other hospitals and institutions and the campus closure programme.

People with learning disabilities should not live in hospital and our ambitions for them should be much higher. Simon Stevens highlighted that the North of England still has too many learning disability beds and announced that a task force would be created to tackle this. Already, there is a lot of work going on to think about the challenges that we have been presented with. Internally, Tim Docking, Group Director for Planned Care is leading a Trust-wide group to develop a strategic response to the announcements. This matter was discussed at the Corporate Decisions Team meeting last week and an outline project plan has been agreed.

The Trust also attends the Regional Learning Disabilities Network meeting chaired by Dominic Slowie, National Clinical Director for Learning Disability. Our local Clinical Commissioning Groups are also focussing on this issue and have prioritised learning disability services as a major area of transformation in the year ahead. We will need to engage with all partners around this matter, particularly Local Authorities.

I am pleased to announce that our services are already making significant changes. We recently announced the appointment of Jill Chaplin, to lead on Positive Behaviour Support (PBS) in the Trust. PBS is a value driven, person centred approach for working with people with challenging behaviour. The Trust is already rolling out training to community and inpatient staff and seeing the benefits. This is just one area where we are equipping our staff for the future, even at this early stage when the future model for services is not very clear.

2. Commission to review the provision of acute inpatient psychiatric care for adults in England, Wales and Northern Ireland

In February 2014 an Independent Commission to review the provision of inpatient psychiatric care for adults in England, Wales and Northern Ireland was launched. The commission is chaired by Lord Nigel Crisp, former Chief Executive of the NHS in England and Permanent Secretary of the Department of Health (2000-2006).

The Commission has been established by the Royal College of Psychiatrists (RCPsych) to respond to widespread concerns about the provision of inpatient psychiatric care for adults in many parts of England, Wales and Northern Ireland. Concerns highlighted by the Commission include:

- The number of patients in England travelling out of their local area for emergency mental health treatment more than doubled in two years from 1,301 in 2011/12 to 3,024 in 2013/14. One person was sent 300 miles, from Devon to West Yorkshire.
- A 2014 analysis of English coroners' reports found that seven suicides and one homicide were linked to a psychiatric bed not being available between 2012-2014.
- In Wales, psychiatric wards have been operating at above the RCPsych's recommended figure of 85% occupancy every year since 2010/11.
- In Northern Ireland, psychiatric wards have been operating at above the RCPsych's recommended figure of 85% occupancy every year since 1998/99.
- In a 2014 survey of UK psychiatric trainees, 24% said that a bed manager had told them that a patient would only get a bed if they were sectioned under mental health legislation.

The Trust welcomes this review, and is arranging for the review team to visit. The Trust lead for this work is Dr Mary Jane Tacchi, Deputy Medical Director.

3. Learning from Savile

On 26 February 2015, the "Themes and lessons learnt from NHS investigations into matters relating to Jimmy Savile" Independent Report for the Secretary of State for Health was published. The full report can be found via the following link <u>Savile Report</u>

In 2012 after the TV exposure programme and the setting up of Operation Yewtree, reports surfaced of Savile having committed sexual abuse at three NHS Hospitals with which he had had long-term associations, namely Stoke Mandeville, Leeds General Infirmary and Broadmoor. Three major investigations were set up by these Trusts, a further 28 NHS organisations were identified by the Metropolitan Police between 2012 and 2014 and investigations were also undertaken in these Trusts in matters relating to Savile. In total 44 reports have now been published.

From all of the NHS investigation reports into matters relating to Jimmy Savile, the common themes and issues that have emerged from the investigations findings that are relevant to the wider NHS today are;

- Security and access arrangements, including celebrity and VIP access;
- The role and management of volunteers;
- Safeguarding;
- Raising complaints and concerns (by staff and patients);
- Fundraising and charity governance; and
- Observance of due process and good governance.

The Secretary of State has accepted ten recommendations made from the themes identified in this report for Foundation Trusts. The Trust is currently assessing the

relevance of the recommendations and taking any actions necessary to protect service users, staff, visitors and volunteers.

A letter has also been received from Monitor (see attached) and a full presentation will be given to the Board of Directors, prior to the submission of an overview report to Monitor in June 2015, detailing the actions taken.

Lead: Gary O'Hare, Executive Director of Nursing and Operations

4. Reducing harm from tobacco

Smoking is arguably the most important modifiable lifestyle factor which increases the risk of early death amongst people with mental health problems. The Trust is working with partners in the North of England to reduce the harm related to tobacco use amongst service users, visitors and staff through implementing recent NICE guidance and moving towards smoke free sites.

The Trust has undertaken an assessment of its current position against NICE guidance, supported by Public Health England and the results from this assessment were discussed at a half day conference on 11 March 2015. This will be followed by a regional conference (jointly with Tees, Esk and Wear Valley NHS Foundation Trust and Public Health England) on 30 April 2015, where external speakers will discuss their experience of implementing smoke free sites for all users.

Following this conference, the Board of Directors will be asked to support the introduction of smoke-free status for service users at some point between 1 October 2015 and 1 April 2016. A more comprehensive paper will be presented to the Board of Directors in May 2015.

5. Industrial Action / Pay Offer

Following the recent ballots held by a number of unions in respect of the Government's improved pay offer, it has now been confirmed that all affected unions have accepted the proposals. The key elements are as follows:

- Abolition of the bottom point of AfC and increasing pay point 2 to £15,100.
- 1% consolidated rise for all staff up to point 42 from April 2015.
- A further consolidated pay rise of an additional £200 for staff on pay points 3-8.
- An increment freeze in 2015/16 for staff on pay point 34 and above for one year only.

6. Freedom to Speak Up Independent Review

Freedom to Speak Up, the independent review led by Sir Robert Francis into creating an open and honest reporting culture in the NHS was published on 11 February 2015. Five overarching themes were identified and these were highlighted in a previous report. Since the publication Lisa Crichton-Jones (Executive Director of Workforce and Organisational Development) and Gary O'Hare (Executive Director of Nursing and Operations) have been appointed as Executive Sponsors to oversee any work identified from the recommendations. Lynne Shaw (Deputy Director of Workforce) and Vida Morris (Group Nurse Director – Urgent Care) are currently reviewing the document and will produce an action plan to ensure that relevant pieces of work are identified and taken forward. The action plan will be monitored regularly through the Workforce Committee.

7. Clinical Excellence Awards

On 5 March 2015, a panel consisting of the Chairman, Chief Executive, Senior Medical staff, Executive Director of Workforce and Organisational Development, representatives from the LNC and Newcastle University, considered applications for the Local Clinical Excellence Awards. There were 142 eligible Consultants and 50 submitted applications for consideration. Fourteen panel members scored the relevant applications using National and Trust Guidance over five Domains. After careful discussion/debate it was agreed to allocate 28 points (this is the maximum number of awards that could be made based on financial resources). The awards are payable from 1 April 2014 and applicants are currently being advised of the outcome of their application.

John Lawlor Chief Executive March 2015