

Agenda Item 6

Health Scrutiny Committee

7 July 2015

Mental Health Services provided by Norfolk and Suffolk NHS Foundation Trust

Summary

1. Norfolk and Suffolk NHS Foundation Trust (NSFT) provides a range of mental health services, alcohol treatment, learning disability and eating disorder services across Norfolk and Suffolk. To accommodate the growing demand for its services, and the financial constraints it faces, the Trust has been undergoing a radical redesign of services, which has been subject to scrutiny by the Suffolk Health Scrutiny Committee and the Suffolk and Norfolk Joint Health Scrutiny Committee. In October 2014, the Trust underwent an inspection by the Care Quality Commission (CQC) and received a rating of inadequate. This report provides information about progress with the actions the Trust has undertaken to address the CQC's concerns.

Objective of the Scrutiny

2. The objective of this item is to provide the Committee with an update on the implementation of Norfolk and Suffolk NHS Foundation Trust's Service Strategy 2012-16 and actions taking place to address the findings of the Care Quality Commission's latest inspection report, published in February 2015.

Scrutiny Focus

- 3. The scope of this scrutiny has been developed to provide the Committee with information to come to a view on the following:
 - a) What were the findings of the latest Care Quality Commission (CQC) inspection of Norfolk and Suffolk NHS Foundation Trust (NSFT) which took place in October/November 2014?
 - b) What actions have been taken by the Trust to address concerns highlighted by the CQC since the inspection took place?
 - c) What further action is planned and what are the timescales for completion?
 - d) What are the key challenges faced?

- e) In light of concerns highlighted by Norfolk Health Overview and Scrutiny Committee (HOSC) in respect of the availability of acute mental health beds in Norfolk, what is the picture for acute beds in Suffolk;
- f) Since implementation of different service models for Norfolk and Waveney and for Suffolk under the Trust's Service Strategy 2012-16, is there any learning from this which could help inform future service design?
- 4. Having considered the information, the Committee may wish to:
 - a) make recommendations to NSFT;
 - b) make recommendations to commissioners of the service;
 - c) identify matters which the Committee considers require further scrutiny;

d) seek further information.

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Background

- 5. Early in 2013 Suffolk Health Scrutiny Committee (HSC) and Norfolk Health Overview and Scrutiny Committee (HOSC) established a formal joint committee on a task and finish basis to examine the radical redesign of mental health services outlined in NSFT's Trust Service Strategy 2012-16. The joint committee's report made a number of recommendations to NSFT, Clinical Commissioning Groups, and Health and Wellbeing Boards. NSFT was recommended to:
 - a) only proceed with reconfiguration plans which had the commissioner's backing;
 - closely monitor its workforce costs during the transitional period and consider how to avoid excessive locum costs;
 - c) consult with health scrutiny before making any substantial changes to services on the ground during implementation of the Strategy, in liaison with the relevant CCG/s:
 - d) include Healthwatch Norfolk and Suffolk and representatives of services users and carers in an ongoing involvement and engagement process and in the development of consultation materials in respect of substantial changes;
 - e) work with GP practices, CCGs and other stakeholders on the issue of whether the Norfolk or Suffolk model would apply to Thetford for future years;
 - f) assess the likely effects of its plans on partner organisations and monitor these effects throughout transition to avoid gaps in service occurring.
- 6. The joint committee recommended that Suffolk HSC and Norfolk HOSC should review progress of the Strategy in six to nine months if consultation on substantial changes had not already begun. The Joint Norfolk and Suffolk HSC for the Great Yarmouth and Waveney area has continued to monitor progress under the Strategy in the HealthEast CCG area.
- 7. Suffolk HSC received a further report from the Trust on progress at its meeting on 22 January 2014. Regarding inpatient beds, the Committee was informed that a pilot scheme was due to be carried out at West Suffolk Hospital looking at the use of inpatient beds for mental health services. The Committee heard that the pilot would provide a service that would consist of two acute wards; the first being solely an assessment ward where the needs of patients would be assessed over a period of up to two weeks; the second would be a recovery and treatment ward. The aim was to provide a more efficient service focussing on the needs of the patient. The Committee noted the current pressure on acute beds in areas of Norfolk and that discussions were taking place with commissioners in this regard. The Committee considered it would be useful to receive an update on the pilot scheme and use of acute beds in Suffolk for a future meeting.
- 8. The Committee also recognised that the two models of service proposed by the Trust's Strategy were designed differently for Norfolk and Waveney and for Suffolk. The Committee heard that, prior to the merger of Norfolk and Waveney and Suffolk Mental Health Partnership Trusts, work had already commenced on a service review in the Norfolk and Waveney area. Following the merger, this work also commenced in Suffolk. Clinicians involved in the development of the new Strategy had clear views about how the services should look, based on the demography and knowledge of their locality. The Committee considered it would be useful to receive further information about how the two models were working once the Trust's Strategy had had more time to embed.

9. On 25 and 26 October 2014 and 6 November 2014 the Care Quality Commission (CQC) undertook an inspection of the Trust, which included visits to a range of services across Norfolk and Suffolk. The report from the inspection was published on 3 February 2015 and gave the Trust an overall rating of "Inadequate". A copy of the full report, and detailed reports for individual services provided by NSFT, can be found at: http://www.cqc.org.uk/provider/RMY

Main Body of Evidence

- 10. Evidence Sets 1 and 2 have been provided by Norfolk and Suffolk Foundation Trust and are appended to this report.
- 11. Invitations have been extended to representatives of Norfolk & Suffolk NHS Foundation Trust to provide information and answer questions from the Committee.

Glossary

A&E	Accident and Emergency	FACT	Flexible, assertive community
AAT	Access and Assessment Team		treatment
BAF	Board Assurance Framework	FPPT	Fit and proper person test
BME	Black and minority ethnic	FTN	Foundation Trust Network
BoD	Board of Directors	GY&W	Great Yarmouth and Waveney
BoG	Board of Governors	H&S	Health and Safety
CAMHS	Children and adolescent mental	HBPO	Health based place of safety
	health services	HSE	Health and Safety Executive
CCTV	Closed circuit TV	HTT	Home Treatment Team
CIP	Capital improvement plan	IAT	Integrated Access Team
CLL	Complex later life	ICU	Intensive Care Unit
CQC	Care Quality Commission	IMROC	Implementing Recovery through
CQUIN	Commissioning for quality and		Organisational Change
	innovation payment framework	INTRAN	Translation and interpreter
	enables commissioners to		services
	reward excellence, by linking a	KPI	Key performance indicator
	proportion of healthcare	LAC	Looked After Children
	providers' income to the	LEAN	project and change
	achievement of local quality		management tool
	improvement goals	LGM	Locality governance meeting
CTL	Clinical Team Leader	Lorenzo	a single electronic patient record
CYP	SCC Children and Young	LTFM	Long term financial model
	Peoples' Services	MAU	Medical Assessment Unit
DBS	Disclosure and barring service	MCA/DC	DLS Mental capacity Act
DCLL	Dementia or complexity in later		deprivation of liberty
	life	MH	Mental Health
DH	Department of Health	MHA	Mental Health Act
DICES	risk assessment training	Monitor	Regulator for Health Services in
DIST	Dementia and intensive support		England
	team	NED	NonExecutive Director
DNA	Did not attend	NHSE	NHS England
DoN	Director of Nursing	NHSP	NHS Professional
ED	Executive Director	NHSP	National Health Staff
EoE	East of England		Professional
F&FT	Friends and family test	NICE	National Institute for Clinical
			Excellence

NMC	Nursing and midwifery council	QGC	Quality governance committee
NSFT	Norfolk and Suffolk NHS	QIA	Quality Impact Assessment
	Foundation Trust	QIP	Quality Improvement Plan
OOA	Out of Area bed	QIV	Quality improvement verification
OOH	Out of hours	QUESS	T Quality education and safe
Parity o	f Esteem considering mental		systems training
-	health issues equally with	RAG	Red, amber, green
	physical health	RN	Registered nurse
PICU	Psychiatric Intensive Care Unit	Section	75 pooled budget arrangement
PID	project initiation document		Section 75 of the NHS Act 2006
PMA	Prevention and management of		allows local authorities and NHS
	aggression		bodies to pool budgets
PMO	Project Management Office	SLA	Service level agreement
Project Lite project and change		SOT	Senior Operational Team
-	management tool	SU/C	Service User/Carer
PWC	Price Waterhouse Coopers	ΥP	Young people

Supporting information

Norfolk and Suffolk Joint Health Scrutiny Committee on the Radical Redesign of Mental Health Services, including Final Report (April 2013); available from: http://tinyurl.com/m7rch2n

Suffolk Health Scrutiny Committee (22 January 2014); Agenda Item 5: Norfolk and Suffolk NHS Trust Radical Redesign of Mental Health Services; Available from the following links:

Covering report:

http://committeeminutes.suffolkcc.gov.uk/LoadDocument.aspx?rID=0900271181068601&qry=c_committee%7e%7eHealth+Scrutiny+Committee

Evidence Set 1:

http://committeeminutes.suffolkcc.gov.uk/LoadDocument.aspx?rID=0900271181068602&qry=c_committee%7e%7eHealth+Scrutiny+Committee

Evidence Set 2:

http://committeeminutes.suffolkcc.gov.uk/LoadDocument.aspx?rID=0900271181068603&qry=c committee%7e%7eHealth+Scrutiny+Committee

Care Quality Commission (February 2015); Norfolk and Suffolk NHS Foundation Trust; Available from: http://www.cqc.org.uk/provider/RMY

Norfolk Health Overview and Scrutiny Committee (16 April 2015); Agenda Item 6: Mental Health Services provided by Norfolk and Suffolk NHS Foundation Trust;

Available from: http://tinyurl.com/nzll3tr