

Avon and Wiltshire Partnership NHS Trust Update

Adults Health, Adult's Care and Housing Overview and Scrutiny Committee

Date: 30th January 2018

Author:	Newlands Anning, Operations Lead, AWP
Wards:	All Wards
Locality Affected:	All Locality Area
Parishes Affected:	All Parish Area

1. Purpose and Reasons

- 1.1 This report provides the Adults Care, Adults Health and Housing Overview and Scrutiny Committee with an update of performance and key issues relating to Avon and Wiltshire Mental Health Partnership NHS Trust.
- 1.2 A key purpose of the Adults Care, Adults Health and Housing Overview and Scrutiny Committee is to hold Commissioners and providers of Health and Social Care Services to account.
- 1.3 Any Commissioner or provider of Health and Social Care Services in Swindon is required to provide information on the planning and provision of health and social care services within the Borough and consult with the Committee on any planned substantial changes or developments to service provision.

2. Recommendations

The Committee is recommended to:

- 2.1 Note the report
- 2.2 Identify any areas of concern or interest that require further investigation.

3. Detail

- 3.1 The NHS has undergone significant change over the past 10 years, and mental health services are no different. More recently, we have experienced a significant increase in demand of our services, perhaps in part due to the increased public awareness around mental health. We, like other mental health trusts across the country, now need to look at different models of working to ensure that our services remain safe, high quality but are financially sustainable and make the best and most efficient use of public monies.

Along with a move to Sustainable and Transformational Partnerships (STPs) and in accordance with the '*Five Year Forward for Mental Health*', the Trust has revised our clinical strategy to strengthen the provision of community services to reduce reliance on inpatient provision.

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Developing community services will enable the Trust to make better use of inpatient beds and to develop a highly specialist inpatient resource to provide care to people with the most complex mental health needs.

The Trust has developed a Transformational Programme which will review current models of care and develop these in light of current and projected demand to ensure sustainability for the future.

3.1.1 Top Five Priorities

Top Five Priorities	Process	Outcomes
Financial austerity	A Financial Improvement Plan has been developed by the Trust.	The elements within the FIP are progressing in year.
Recruitment and retention	Developing through the Accountable Care System (STP) workforce plan with GWH, SBC and Public Health.	Improvement in substantive staffing levels and reduction of agency usage. Challenges remains in recruitment and retention within the Inpatient wards across the Swindon Locality.
Bed pressures (AOWA & older adults)	Further development of community services, to support the robust Acute Care Pathway in Swindon. A bed management project has been piloted in the Bristol area.	Reduction in admission rates and length of stay. Reduction of Out of Area and Out of Trust admission. Demand over the past 2 months has been increasing.
Health Based Place of Safety	Agreed decision made by NHSE regarding East Health Based Place of Safety. Public engagement to occur.	Discussed further below in report
CQC inspection	CQC inspection report October 2017	The CQC made 72 recommendations with 27 of these "actions the provider must take to improve". A significant number of the 'Safe' and 'Effective' areas for improvement are related to the Trusts Health Based Places of safety

Further information on the subject of this report can be obtained from Newlands Anning, Direct Dial Telephone Number, 01793 836821, newlandsanning@nhs.net

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3.2 Health Based Place of Safety

Due to quality issues identified by the Care Quality Commission following an inspection of the Avon and Wiltshire Mental Health Partnership Trust (AWP) in 2016 and 2017, NHS England has authorised the temporary consolidation of two of three Health Based Places of Safety (HBPoS) Suites in Swindon and Salisbury to a third site in Devizes in Wiltshire for 12 months. This will provide an opportunity to address the CQC improvement requirements, particularly around assessment times. A key element of this will be to support the delivery of the Policing and Crime Act 2017 that amended the Mental Health Act to reduce the maximum period someone can be detained on a Section 135/6 from 72 to 24 hours”

During the period of temporary reallocation, engagement will be undertaken with the populations of Swindon and Wiltshire and individuals using the service. This will then lead to recommendations to NHS England and NHS Improvement.

Longer term arrangements in relation to these HBPoS suites will be subject to an NHS England assurance process.

3.3 CQC

Currently, there are 2 HBPoS in Wiltshire and 1 in Swindon. The CQC state that the Trust must make changes to the way in which individuals receive services, particularly in relation to the time that it takes to receive an assessment and the time taken to find a bed for those that require ongoing in-patient care. The CQC did acknowledge in their report that AWP Trust would not be able to resolve all issues without multi-agency solutions.

The specific ‘requirements’ are:

- ‘There were significant problems accessing beds for people requiring admission to hospital. We saw examples of patients waiting 32 to 50 hours after being assessed in all the place of safety suites before admission to hospital’.
- The CQC stated that ‘There was limited access to Section 12 Doctors (a Psychiatrist) who acts as a second opinion in the application of the (MHA) which was causing delays to Mental Health Act assessments, in order to work within the trust’s Section 136 joint protocols and the Mental Health Act Code of Practice’.
- The CQC stated that ‘There regularly remained significant delays in assessments commencing at the places of safety. There were significant problems with the availability of section 12 approved doctors. There were times when the AMHP services were delayed in attending due to the need to attend when the doctor was available or due to problems with their own capacity to respond. Overall 61%

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of people waited more than 12 hours to be seen for assessment. This was an increase on the level of people waiting 12 hours or more than at our inspection in May 2016.

- The provider should ensure that local guidelines are followed so that the places of safety are staffed with staff trained in prevention and management of violence (PMVA).
- In 2016 the CQC stated 'that the HBPOS in Salisbury and Swindon lacked general space and both environments lacked an outdoor space that could be accessed without using the ward facilities, which created 'mixed' dynamic of ward based patients and detainees within the same area'.
- The provider must demonstrate that action is being taken to ensure that limitations on access to Section 12 doctors are not responsible for delays to Mental Health act assessments in order to work within the trust's Section 136 joint protocols and the Mental Health Act Code of Practice.
- The provider must ensure that there are clear procedures and joint working arrangements in place with local authorities, to ensure assessments take place in a timely manner in the each place of safety and reduce the level of transfers between places of safety.

As from the 11th December 2017, the Police and Crime Act has amended the Mental Health Act to reduce the maximum period someone can be detained on a Section 135/6 from 72 to 24 hours.

This change in the law increases the pressure to make significant changes to increase pace and flow through the system requiring oversight by staff skilled in managing and accessing 136 detention services.

This change requires a dedicated HBPOS improving capability and capacity to manage these processes as efficiently and effectively as possible.

4. Alternative Options

4.1 None

5. Implications, Diversity Impact Assessment and Risk Management

Financial and Procurement Implications

- 5.1 There are no financial and procurement implications contained within this report. Any emerging financial and procurement implications will be detailed if the committee wishes to investigate the issue further or to make recommendations for improvement.

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Legal and Human Rights Implications

- 5.2 There are no legal and human rights implications contained within this report. Any emerging legal and human rights implications will be detailed if the committee wishes to investigate the issue further or to make recommendations for improvement.

All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

- 5.3 None.

Diversity Impact Assessment

- 5.4 A DIA has not been done for the purposes of this report.

Risk Management

- 5.5 None.

6. Consultees

- 6.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.