Progress Meeting following Healthcare Improvement Scotland Review of Mental Health Services in Tayside (December 2017)

Background

Healthcare Improvement Scotland carried out a focused review visit to Tayside mental health services from Thursday 7 to Saturday 9 December 2017. A review report was published in February 2018. The report set out the key findings from the visit, which had a specific focus on:

- General Adult Psychiatry (GAP) services within the Carseview Centre, Dundee, and
- Community mental health services and crisis support for residents in the local council areas and localities of Angus, Dundee City and Perth & Kinross.

During the review, Healthcare Improvement Scotland highlighted five key areas of strength and six areas for improvement.

At the time of the review, NHS Tayside and Perth & Kinross Health and Social Care Integration Partnership, which hosts mental health and learning disability services across Tayside, were redesigning the adult mental health and learning disability inpatient services as part of its Mental Health and Learning Disability Services Redesign Transformation Programme.

On Monday 4 June 2018, Healthcare Improvement Scotland met with senior management from mental health and learning disability services in Tayside. The focus of the meeting was:

- for Tayside to provide an update on the consultation of adult mental health and learning disability inpatient services, and the decision on the preferred option that was announced on 26 January 2018, and
- to discuss progress against the six areas for improvement.

Ahead of the meeting, Tayside shared their improvement action plan that had been created to track their actions and progress against the six areas for improvement.

Update on the consultation and the decision about mental health and learning disability inpatient services in Tayside

Tayside told us that it has moved forward with the preferred option of centralising GAP services from across Tayside to Carseview Centre through a stepped approach. NHS Tayside has a structured and agreed plan in place for facilitating this. The NHS board is following a clear and agreed operational change process and ensuring that all key stakeholders are actively involved in the process.
However, due to staffing issues in one of the inpatient units that will be moving to the Carseview Centre, it has been agreed to speed up the process of refurbishing the wards to enable relocation to the Carseview Centre. We were told that this should be completed by September 2018.

We expect that the decision to accelerate the refurbishment and relocation of wards will not negatively impact on the NHS board’s ability to engage and communicate effectively with these stakeholders in the management of significant change.

**Update on the areas for improvement from the review in December 2017**

**Area for improvement 1**

‘With regards to ensuring that clinical staff maintain the necessary knowledge and skills to deliver high quality care, we were told NHS Tayside is developing a training strategy that reflects both current need and considers future demands aligned to the Transformational Nursing Agenda. This is a national approach reflecting how nursing, as a profession, will need to evolve including consideration to the development and professional positioning in an integration Health and Social Partnership context. We acknowledge that the partnerships have significant challenges in recruiting and retaining psychiatrists, however we were told that efforts are being made to establish posts that offer clinical and academic combined opportunities.’

**What senior managers told us**

NHS Tayside is currently reviewing its education strategy, led by the associate nurse director, who is the corporate lead for nursing and midwifery education and training. Mental health services are participating in the review which will have a focus on the continuing professional development of the workforce.

We were told that Tayside is continuing to meet its target of recruiting 50 mental health nurses each year. However, there was a challenge in recruiting learning disability nurses due to the low number of training places available nationally.

The improvement action plan stated that mental health staff in NHS Tayside had met with NHS Fife, Abertay University and University of Dundee to co-design a mental health module as part of an Advanced Nurse Practice Training Programme. Other essential elements of the programme are already delivered within NHS Tayside and early discussions with NHS Grampian have taken place to support regional delivery of this programme.

NHS Tayside told us that to support staff through the service redesign and the development work around sustaining services, two new substantive posts have been funded: a mental health quality improvement lead and an improvement advisor post. We were told that there was a clear commitment to supporting services and leaders within NHS Tayside, using improvement science in order to test changes and work towards their collective shared goal.

NHS Tayside is currently reviewing its training strategy led by the associate nurse director who is the corporate lead for education and training. Mental health services are participating in the review. Tayside is also progressing a number of educational opportunities, including a second joint-funded lecturer practitioner post with Abertay University.
Our findings

Reshaping the workforce to support new models of care is a massive opportunity, but also a huge developmental and operational challenge. NHS Tayside needs to begin with a deep understanding of what their patients need and then train, recruit and skill the workforce to meet those needs.

There was a collective agreement from the management team that this is what they need to do to progress and sustain mental health service provision within Tayside. However, they have faced many challenges in understanding and navigating the current systems and services to identify a baseline of what is already available and to capture the skills their workforce already have. Part of the reason for this challenge is around the complexities of mental health services being delivered by different health and social care partnerships within Tayside, and the already existing shortfall of psychiatrists which is placing an increased strain on existing capacity.

We were also told psychology services for Tayside are hosted by Dundee Integration Joint Board. However, this can lead to a challenge in understanding and agreeing priorities across all parts of the service.

Area for improvement 2

‘There was inconsistency with regards to psychiatric consultants. High numbers of locum psychiatrists are employed in the inpatient facilities and community areas. We were told that this has been challenging for staff and those who use the services. Patients told us that they were frustrated by the number of different psychiatrists they were in contact with. This can cause problems in building therapeutic relationships and trust.’

Area for improvement 3

‘The consistent use of locum psychiatrists has reduced the opportunity for medical learning and minimised the opportunities for medical leadership to evolve.’

What senior managers told us

The management team spoke about the continued challenges in maintaining a consistent medical psychiatrist workforce. They told us that the use of locum psychiatrists remains high and has increased since the review visit in December. They also told us that there were real anxieties about the sustainability of the medical service and a real concern that the availability of locum psychiatrists is reducing.

We were told that there is no clear due diligence process for effective governance for locum psychiatrists. In the localities of Angus and Perth & Kinross, there is an identifiable lead psychiatrist who has responsibility for the governance of the locum psychiatrists. A lead is not available at present in Dundee, but there was a recognition that would need to change and we were told that this was under review.

The associate medical director told us that there was inconsistency across the GAP inpatient beds in relation to psychiatrists not having split posts. This means that there is no clear interface between the hospital and the community, and patients can have different psychiatrists during their care journey through the service. If a psychiatrist has a split post this means they provide consistent intervention and treatment throughout the patient’s journey if they are treated in
the hospital and the community. We were told that a consistent model of split posts for psychiatrists will be applied across all GAP services.

We were told that NHS Tayside in the process of employing two staff grade psychiatrist posts funded for a year to provide additional medical input.

During our discussion, senior managers told us that they are actively planning what the future will be for mental health services in Tayside, in particular around the model of care and service sustainability for the future. The general consensus was that the plans being put in place today will not see immediate rewards but will take years to come into effect. There was an agreement that the partnerships need to be clear about what they are aiming to provide and what their priorities are. They told us they had to ensure that they were getting the basics right and delivering on this well, in the first instance.

**Our findings**

There continues to be ongoing challenges in recruiting psychiatrists, whether it be in a permanent post or a locum post. We have significant concerns about these ongoing challenges and the use of locum staff. The inconsistency of psychiatrists will continue to impact on patients being able to build and sustain therapeutic relationships with their psychiatrist and will lead to inconsistency in medical leadership in clinical teams. There are also concerns that this affects the quality and consistency of training, support and supervision available to trainee medical students. NHS Tayside must ensure that they are supporting trainee medical students in line with national General Medical Council (GMC) guidance.

The absence of a lead psychiatrist to oversee locum psychiatrists in Dundee is a significant concern. Although we were encouraged to hear that there was a commitment to review the governance processes, we would ask NHS Tayside to ensure this is an immediate priority.

Increasing the numbers of psychiatrists and the consistent model of split posts will facilitate person-centred care and improve communication. We understand that this will take time to implement, again we would encourage NHS Tayside to ensure this is an immediate priority.

**Area for improvement 4**

‘Although the general environment in the Carseview Centre was good, improvements and adjustments could be made. Making adjustments will ensure patients are cared for in a less restrictive environment, whilst ensuring appropriate levels of safety and encouraging recovery.’

**What senior managers told us**

Services have taken a collaborative approach towards the environmental improvements within the Carseview Centre. This now includes input from carers and some input from service users. Senior managers told us that the need to make improvements is challenging as they need to balance risk and maintain a safe environment for their patients and staff. We were told that there were different perspectives being expressed on the improvements proposed. However, we heard that there was a commitment to continue to involve stakeholders in this process of improvement to allow this dialogue to be informative and useful.
Our findings

NHS Tayside is progressing with the environmental changes to the Carseview Centre, with the aim of achieving the least restrictive environment for patients. We were advised that the environmental changes will be completed by end of September 2018. It was clear to us that the NHS board is actively involving all relevant key stakeholders in this process, including carers.

Area for improvement 5

‘There was an inequity of service for patients who live in Angus. For example, patients in this area do not receive 7-day intensive home treatment support. In some instances, patients have had to be admitted to hospital as no support was available at the weekend. This could also have an impact on the support needed by patients when they are discharged from hospital.’

‘The Angus Health and Social Care Partnership should review their current provision and consider a 7-day service for patients in Angus.’

What senior managers told us

In Angus’ Mental Health Services Priority Performance Plan 2018/19, Angus Health and Social Care Partnership has set out plans to expand the existing Monday - Friday community mental health teams. It aims to deliver enhanced home treatment to support people, who may require daily visits by professional staff to their own homes to manage an acute mental health episode, 7 days a week, 52 weeks a year. We were told that the earliest this can be put into place will be April 2019. However, there has been no financial commitment made by Angus Integration Joint Board, and there would need to be an additional seven posts to support this service.

No consistent information has been collected to outline the numbers of patients who would use the seven day service and the frequency the service would be used. However, there was a general agreement that this would facilitate person-centred care and treatment choices to support early discharge from hospital and offer alternatives to admission for patients in Angus.

The 7-day enhanced home treatment service will also be supported by the existing multidisciplinary crisis assessment service which is available 24 hours/7 days a week and will be based at the Carseview Centre.

Our findings

Angus Integration Joint Board has committed to expand the service to 7 days in Angus to provide an equitable service to all patients in Tayside. However, there has been no financial commitment made by Angus Integration Joint Board and it has been projected that an additional seven staff will be needed to support this service.

However, we were told that Perth and Kinross Health and Social Care Partnership have given a commitment that the restoration of a 7-day service within Angus will be the priority for any funding released as part of the Tayside Mental Health Services Review Transformation Programme.

There was some discussion around creating a service based on a health and social care integrated model. It was hoped that this model would support better care experiences, improve care outcomes for patients and would be delivered more cost effectively.
Area for improvement 6

‘Psychiatrists and junior doctors did not document risk assessment details or contribute to patients’ care plans. This could weaken the consistency of care approach or interventions.’

What senior managers told us

NHS Tayside told us it had taken the following actions in response to our recommendation and a similar recommendation made by the Mental Welfare Commission for Scotland.

- The process of how consultant psychiatrists contribute to progress notes, risk assessments and patient care plans was fed back and discussed at the inpatient governance forum and shared with the information management group.
- An internal survey of the process for recording risk assessments and contributions to care planning of medical staff was undertaken across GAP inpatient services, this highlighted inconsistencies in how information is being recorded.
- The associate medical director is taking this forward as an action and has written to all senior medical staff detailing the process for the recording of this information.
- The associate medical director will ensure case record audit is established to monitor compliance with recording standards.

We were told that the electronic patient recording system (EMIS web) will be rolled out across all mental health services in NHS Tayside from June 2018.

We were told that the inpatient clinical care and professional governance group are in the process of reviewing for approval, inpatient guidance for medical staff for the use of EMIS web.

Our findings

The NHS wide roll-out of EMIS web will enable the centralisation of patients’ assessments and care and will ensure that health professionals can have speedy and accurate information about their patients to inform person-centred care.

NHS Tayside needs to ensure that its medical team has a consistent approach to the way they are recording and contributing to care planning and risk assessment. It is encouraging to see that steps have been taken to allow this improvement to ensure consistency of recording information.

Next steps

In May 2018, NHS Tayside announced that an independent inquiry would be carried out into mental health services in Tayside. Healthcare Improvement Scotland will allow Tayside to focus on this inquiry. The review team will request an update, and plan future quality assurance activity, once the independent inquiry has concluded.