

Report to:

ADULT SOCIAL CARE AND HEALTH SCRUTINY COMMITTEE

Relevant Officer:

Caroline Donovan, Chief Executive, LCFT

Date of Meeting:

16 October 2019

MENTAL HEALTH SERVICE PROVISION

1.0 Purpose of the report:

1.1 To provide an update on Lancashire Care Foundation Trust's (LCFT) and partners' progress in making improvement on the actions identified within the Care Quality Commission inspection report, the outcomes of the external review undertaken and the discussions and recommendations made at the special meeting of the Committee on 24 January 2019.

2.0 Recommendation:

2.1 To scrutinise the update provided by Lancashire Care Foundation Trust, identifying any areas of concern, improvements required or recommendations that Members might wish to make.

2.2 To seek an update on the implementation of the recommendations identified by the Committee at the special meeting on 24 January 2019. (Highlighted in paragraph 6.4 of the report)

3.0 Reasons for recommendation:

3.1 To ensure the Committee is satisfied with the improvement being made to mental health services.

3.2 Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

3.3 Is the recommendation in accordance with the Council's approved budget? Yes

4.0 Other alternative options to be considered:

4.1 None.

5.0 Council priority:

5.1 The relevant Council priority is:

- Communities: Creating stronger communities and increasing resilience.

6.0 Background information

6.1 At the Adult Social Care and Health Scrutiny Committee meeting held on 10 October 2018, Members raised a number of concerns which are summarised below:

- The citing of staffing issues as a reason for poor performance, Members highlighted that huge risks were being taken with patients in life or death situations.
- That a number of the 'must do' actions from the CQC inspection were basics of care that should not fail to be undertaken by the Trust.
- That the response provided by Blackpool Clinical Commissioning Group did not give sufficient assurance that the situation would be monitored with steps taken, where required, to address failures.
- GPs were frustrated that patients were not receiving the treatment that their GP would like to see them have. Key concerns included the lack of a crisis team at Accident and Emergency to enable a quick decision on whether a patient needed admitting.
- That there were a number of very vulnerable people in Blackpool who required an immediate intervention and raised concerns that the only proposals being made were for long term solutions.
- Key officials from LCFT had not been attending meetings with partners despite confirming attendance.
- Emails sent requesting information and liaison from senior Council staff to LCFT representatives had not been answered.
- The issues relating to poor communication had been ongoing for over 12 months and were not one-offs.
- Discussion had been held at the Health and Wellbeing Board relating to the basic action plan that had been provided to address concerns with no detail of how improvements would be achieved or when.
- Anecdotal evidence had been received relating to poor patient management, including lack of communication with a suicidal patient regarding their discharge.
- The issues with staffing would not be rectified without addressing the culture of the organisation, accepting failures and improving staff morale.
- The speed in which LCFT was addressing the actions contained within the CQC report.

- 6.2 The Committee resolved that a written response be provided within 21 days to the key concerns raised by the Committee and that a special meeting be established in January 2019 to consider the progress made by the Trust in addressing the 22 'must do' and 'should do' actions contained within the CQC report.
- 6.3 The response letter was provided to the Chairman within 21 days as requested and was subsequently circulated to all Members of the Committee.
- 6.4 The special meeting of the Committee was held on 24 January 2019 and was attended by the Executive Team from LCFT. The minutes of that meeting have been included at Appendix 6(b) for information. The recommendations made at the meeting were as follows:
1. That LCFT be requested to identify all voluntary and community mental health support groups in Blackpool and arrange to meet with them quarterly to ensure the views of service users were truly reflected and understood.
 2. That LCFT consider setting all targets for completion of mandatory training, completion of appraisals etc at 90% with a view to incrementally increasing the target to 100%.
 3. That all representatives be requested to attend a further meeting of the Committee in approximately six months to further update on progress made and to:
 - Provide feedback on the implementation of the Committee's recommendations.
 - To provide evidence of the work undertaken to reduce the number of four and 12 hour delays at Accident and Emergency and the impact of that work.
 - To report on the outcomes of the external review and action taken to implement the actions.
- 6.5 Representatives from LCFT will be in attendance to speak to the report provided in Appendix 6(a) and to answer any questions from Members. Representatives from the Integrated Care Partnership will also be in attendance for this report.

Other representatives from a range of partners have also been invited to the meeting to provide additional information.

Does the information submitted include any exempt information? No

7.0 List of Appendices:

- 7.1 Appendix 6(a) Report provided by LCFT
Appendix 6(b) Minutes of the special meeting of the Committee on 24 January 2019

8.0 Legal considerations:

8.1 Contained within the appendix.

9.0 Human resources considerations:

9.1 Contained within the appendix.

10.0 Equalities considerations:

10.1 Contained within the appendix.

11.0 Financial considerations:

11.1 Contained within the appendix.

12.0 Risk management considerations:

12.1 Contained within the appendix.

13.0 Ethical considerations:

13.1 Contained within the appendix.

14.0 Internal/external consultation undertaken:

14.1 Contained within the appendix.

15.0 Background papers:

15.1 None.