Appendix 2(a)

Present:

Councillor Hutton (in the Chair)

Councillors

Critchley D Scott Walsh

O'Hara Mrs Scott

In Attendance:

Mr Chris Oliver, Chief Operating Officer, Lancashire and South Cumbria Foundation Trust (LSCFT)

Ms Jo Stark, Locality Director of Operations, LSCFT

Ms Janet Barnsley, Executive Director of Integrated Care and Performance, Blackpool Teaching Hospitals NHS Foundation Trust (BTH)

Ms Linda Bennetts, Locality Director of Nursing and Quality, LSCFT

Ms Sarah Camplin, Head of Commissioning, Blackpool, Fylde and Wyre Clinical Commissioning Group (BFWCCG)

Mr Michael Chew, Divisional Director of Operations: Families and Integrated Community Care, BTH

Ms Caroline Donovan, Chief Executive, LSCFT

Ms Ursula Martin, Chief Improvement and Compliance Officer, LSCFT

Ms Maria Nelligan, Chief Nurse and Quality Officer, LSCFT

Ms Caroline Watkins, Commissioning Officer, BFWCCG

Mr Mark Worthington, Deputy Chief Medical Officer, LSCFT

Ms Sharon Davis, Scrutiny Manager

Councillor Jo Farrell, Cabinet Member for Adult Social Care and Health

1 DECLARATIONS OF INTEREST

There were no declarations of interest on this occasion.

2 MENTAL HEALTH SERVICES

Caroline Donovan, Chief Executive, Lancashire and South Cumbria Foundation NHS Trust (LSCFT) presented the report to the Committee and highlighted the improvement journey of mental health services in spite of the pandemic. She noted the significant impact of the pandemic on mental health services across the country and the fact that the number of presentations at the Emergency Department (ED) had been the highest on record. Despite the high volume of patients, 100% had been seen within four hours, with 95% assessed within one hour.

Ms Donovan advised that LSCFT had introduced a new organisational structure based on geography and had opened new urgent mental health assessment centres across the region, which had been cited as best practice by the Secretary of State. She noted the significant investment made in community teams, the 24/7 crisis telephone line and the new crisis lounge.

The Committee was informed that significant work had also been carried out at The Harbour, (the in-patient mental health hospital in Blackpool), which had transformed the services it provided and had resulted in reduced length of stay and a more positive experience for patients.

It was noted that there remained challenges with patient capacity and that work was being carried out in order to create additional beds through investment. Ms Donovan advised that sites in Whalley, Wesham and South Cumbria had been identified for a total of 90 new beds, however, these would take time to be completed.

Ms Donovan reported that LSCFT worked closely with Blackpool Teaching Hospitals NHS Foundation Trust (BTH) in the provision of services from Blackpool Victoria Hospital and that some services were the responsibility of BTH. Mr Michael Chew, Divisional Director of Operations: Families and Integrated Community Care provided an overview of the early intervention and prevention service and the innovative ways used to engage with patients during the pandemic. He added that there remained significant pressures on the Child and Adolescent Mental Health Service (CAMHS) and that despite those pressures the CASHER Service (Child and Adolescent Support and Help Enhanced Response) in particular continued to operate successfully.

Members noted that the report stated that the memory assessment service had exceeded targets, however, there was no data provided to support how many patients had been seen through the service. Mr Mark Worthington, Deputy Chief Medical Officer, LSCFT noted that there had been an average of 107 referrals per month to the service, with August 2021 accounting for the highest number of referrals. It was noted that there were no concerns that the pandemic had prevented access to this service.

In response to a question, Ms Maria Nelligan, Chief Nurse and Quality Officer, LSCFT noted that the peer support scheme put in place had been particularly successful in aiding improvement in The Harbour. She noted that there were currently 10 peer workers operational in the hospital and that both patients and staff had commended their value with more peer support workers being requested. It was noted that an evaluation had been carried out on the scheme, the findings of which could be shared with the Committee.

Clarification was sought regarding the statistic that 100% of patients presenting with mental health concerns at the ED had been seen within four hours, querying what level of engagement they received during this time. Ms Donovan reported that the statistic referred to the assessment of the patient and the identification of either a treatment or management plan as appropriate for the patient.

The issue of recruitment was discussed in detail, with the national problems noted, and the Committee requested additional information regarding the training programme for new staff. Ms Linda Bennetts, Locality Director of Nursing and Quality, LSCFT provided a detailed overview of the training put in place for new staff and highlighted that each new starter was assessed regarding their training need and that the level of support and training required for each individual and each role was different. The formal induction could take several weeks or even a year and was provided at the pace the learner required.

Members queried the timescale and detail of the provision of the 90 new beds identified to be developed. In response, it was reported that the new beds had been planned for some time and that over the next two years 28 rehabilitation beds would be provided at a site in Wesham. Additional beds would be provided for older adults and psychiatric patients in Whalley, South Cumbria and Preston. It was reported that the Trust had assessed what beds were required and was trying to add the capacity through creative ways in order to meet the demand.

It was noted that 42 new appointments had been recently made, and Members sought exact details on the number of current vacancies at the Trust. Ms Bennetts noted that the 42 appointments made had been registered nurses. She advised that the gain in recruitment was greater than the loss of staff experienced by the Trust and that many now viewed The Harbour as a positive place to work. There were 15 current vacancies on paper that had not yet been recruited to, however, it was expected that those positions would be filled by January 2022. In response to a further question, it was noted that the Trust had a 6.7% turnover rate.

The Committee addressed the relatively high number of referrals to the Intermediate Mental Health Service that had ceased waiting and queried what exactly this meant for patients. Mr Chew agreed to investigate this issue further and provide the detail in writing following the meeting.

Members went on to note the recent outcomes of the Care Quality Commission (CQC) inspections and noted that despite the positives and improvements made some services had still been rated as 'required improvement' and that in some circumstances wards had been downgraded from 'good' to 'required improvement'. In response, Ms Donovan highlighted that improvements had been made during the particularly difficult circumstances of the pandemic which was very positive. She added that the inspected wards that had been downgraded to 'required improvement' had not been inspected for some time. It was considered that despite appearances, improvements had been made over the last few years and that the previous performance of the services in question had not been accurately reflected in the CQC inspections due to them not being inspected frequently enough. She added that the Trust continued to work with the CQC to make improvements to services and that a whole system approach was being taken.

In response to further questions from the Committee seeking assurance that patients were safe, Ms Ursula Martin, Chief Improvement and Compliance Officer, LSCFT advised that feedback from the CQC had provided the reassurance that all patients were safe and

that the inspectors had not identified any unsafe practices. She added that the Trust met with the CQC on a regular basis and had an open and transparent relationship and that there was nothing that came out through the inspections that the Trust was not already aware of and addressing. She noted that staff morale was high and staff were proud of the improvement that had already been achieved.

Upon consideration of the information received during the meeting, the Committee requested that an update be provided in approximately six months on progress made against actions identified through the CQC inspection and that a full, detailed report of mental health services be provided again in approximately 12 months.

3 DRUG RELATED DEATHS SCRUTINY REVIEW FINAL REPORT

The Committee considered the final report of the Drug Related Death Scrutiny Review Panel.

The Committee approved the final report for submission to the Executive.

4 MEALS ON WHEELS SCRUTINY REVIEW FINAL REPORT

The Committee considered the final report of the Meals on Wheels Scrutiny Review Panel.

The Committee approved the final report for submission to the Executive.

Chairman

(The meeting ended at 7.11 pm)

Any queries regarding these minutes, please contact: Sharon Davis, Scrutiny Manager Tel: 01253 477213

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