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Meeting of: Joint Scrutiny Panel for Pennine Care (Mental Health) Trust
Date: Thursday, 21st March, 2019
Time: 10.00 am.
Venue: Training and Conference Suite, first floor, Number One Riverside, Smith Street, Rochdale, OL16 1XU

This agenda gives notice of items to be considered in private as required by Regulations 5 (4) and (5) of The Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012.

Item No.	AGENDA	Page No
1.	APOLOGIES To receive any apologies for absence.	
2.	DECLARATIONS OF INTEREST Members are required to declare any disclosable pecuniary, personal or personal and prejudicial interests they may have and the nature of those interests relating to items on this agenda and/or indicate if S106 of the Local Government Finance Act 1992 applies to them.	
3.	PUBLIC QUESTIONS Any members of the public present at the meeting are invited to ask questions on any matter relating to the work or performance of Pennine Acute NHS Trust. A period of up to 30 minutes is set aside for public questions.	
4.	URGENT ITEMS OF BUSINESS To determine whether there are any additional items of business which, by reason of special circumstances, the Chair decides should be considered at the meeting as a matter of urgency.	
5.	MINUTES To consider the Minutes of the meeting of the Joint Health Overview and Scrutiny Committee for Pennine Care held 24 th January 2019.	3 - 6
6.	MIXED SEX ACCOMMODATION Director of Quality and Nursing – Pennine Care NHS Foundation Trust	7 - 10

to report

7. **STAFFING AND WORKFORCE DEVELOPMENT STRATEGY** 11 - 14
Director of Strategy - Pennine Care NHS Foundation Trust, to report
8. **FINANCE UPDATE**
Director of Strategy - Pennine Care NHS Foundation Trust, to report.
9. **DATES OF FUTURE MEETINGS**
To consider dates for future meetings.
10. **EXCLUSION OF PRESS AND PUBLIC**
To consider that the press and public be excluded from the remaining part of the meeting pursuant to Section 100(A)4 of the Local Government Act 1972 on the grounds that discussions may involve the likely disclosure of exempt information as defined in the provisions of Part 1 of Schedule 12A to the Local Government Act 1972 and public interest would not be served in publishing the information.
11. **CQC IMPROVEMENT PLAN**
Director of Quality and Nursing – Pennine Care NHS Foundation Trust to report

Joint Scrutiny Panel for Pennine Care (Mental Health) Trust Members:

Councillor John Bell
Councillor Patricia Dale
Councillor Chris Gordon
Councillor Joan Grimshaw
Councillor Derek Heffernan
Councillor Jane Howard
Councillor Colin McLaren (Chair)
Councillor Gillian Peet
Councillor Susan Smith
Councillor Teresa Smith
Councillor Yasmin Toor
Councillor Roy Walker (Vice Chair)
Councillor John Wright

For more information about this meeting, please contact:
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Agenda Item 5

JOINT SCRUTINY PANEL FOR PENNINE CARE (MENTAL HEALTH) TRUST

MINUTES OF MEETING Thursday, 24th January 2019

PRESENT: Councillor McLaren (Oldham MBC) (in the Chair); Councillors Dale, Susan Smith (Rochdale Borough Council), Peet (Tameside MBC), Wright (Stockport MBC), Walker (Bury MBC).

OFFICERS: P. Thompson (Governance and Committee Services – Rochdale Borough Council).

ALSO IN ATTENDANCE: L. Bishop (Trust Secretary - Pennine Care NHS Foundation Trust), c. Parker (Director of Quality and Nursing – Pennine Care NHS Foundation Trust) and J. Crosby (Director of Strategy - Pennine Care NHS Foundation Trust)

APOLOGIES

19 Apologies for absence were received from Councillors Gordon (Stockport MBC), Grimshaw (Bury MBC), Howard (Rochdale MBC), Heffernan and Toor (Oldham MBC).

DECLARATIONS OF INTEREST

20 There were no declarations of interest.

PUBLIC QUESTIONS

21 There were no questions asked by members of the public.

MINUTES

22 The Committee considered the minutes of the last meeting held 4th October 2018.

Resolved:

That the Minutes of the meeting of the Joint Health Overview and Scrutiny Committee for Pennine Care NHS Foundation Trust, held 4th October 2018, be approved as a correct record.

FINANCE UPDATE - INCLUDING THE DEVELOPMENT OF THE TRUST'S OPERATIONAL PLAN FOR 2019/20

23 Pennine Care NHS Foundation Trust's Director of Strategy delivered a presentation that outlined the current financial situation appertaining to the Trust. Members were reminded that 2017/18 had been the first year that Pennine Care NHS Foundation Trust had recorded a budgetary deficit, which was largely due to reduced government funding. It was projected that the deficit would continue for at least the next two financial years. The Trust was currently projected to deliver against the control total of £6.4 million at the end of 218/19, which was made up of £1.5 million funding received from NHS Digital and £5 million that had been invested in 'safer staffing'.

The Committee were apprised of the Trust's Operational Plan for 2019/20 which included an efficiency target of 2.1% (£5.9 million). There was a potential Capital Allocation of £4.6 million. Plans were underway that may be required for external funding.

Resolved:

That a full report on the financial position of Pennine Care NHS Foundation Trust be presented to the Committee's next meeting on 21st March 2019.

PENNINE CARE FOUNDATION TRUST STRATEGY 2019 - 2022: MAXIMISING POTENTIAL

24 The Trust's Director of Strategy reported that their Board, at its last meeting on 19th December 2018, had approved the Strategic Position Paper. This meant that three major programmes of work were now fully initiated:

- a. Integrated Mental Health Programme
- b. Community Services Transfer Programme
- c. Corporate Services Redesign Programme

The Committee was updated on the Community Services transfer Programme, which had now become fully operational with appropriate internal and external governance arrangements. All of the community services that were currently being provided in the Oldham and Bury Boroughs were transferring to the Northern Care Alliance based at Salford Royal Hospital. The Heywood, Middleton and Rochdale Adult Services were due to transfer to the One Rochdale LCO (which was hosted by the Northern Care Alliance). The key risks were around the capacity and capability of delivering on the programme of work; the challenging timescales with a number of influencing factors; and the operational performance.

The redesign of Corporate Services continued apace. Phase 1 of this considered the impact of the disaggregation of community services. Phase 2 examined the redesign offer to support the redesigned organisational vision, design and strategy. The Trust was currently examining ways in which corporate services could be provided differently including partnership options.

Resolved that the report be noted and welcomed.

MEETING OF THE TRUST'S GOVERNORS AND MEMBERS OF THE JOINT OVERVIEW AND SCRUTINY COMMITTEE

25 Resolved:

The meeting between representatives of the Trust's Governors and Members of the Joint Overview and Scrutiny Committee, be held on Wednesday, 6th March 2019, at the Trust's head office (225 Old Street, Ashton-under-Lyne) on Tuesday, 26th February 2019 commencing at 1.30pm.

DATES OF FUTURE MEETINGS

26 Resolved:

It was agreed that:

1. The next formal meetings of the Joint Scrutiny Panel for Pennine Care (Mental Health) Trust be held on Thursday, 21st March 2019, to be held

in the Council Offices, Number One Riverside, Smith Street, Rochdale, commencing at 10.00am.

2. The next informal meetings of the Committee's membership be held with representatives of Pennine Care Foundation Trust's senior management, at the Trust's head office (225 Old Street, Ashton-under-Lyne) on Tuesday, 26th February 2019 commencing at 2.00pm.

EXCLUSION OF PRESS AND PUBLIC

27 Decision:

That the Press and Public be excluded from the meeting during consideration of the following item of business, in accordance with the provisions of Section 100A (4) of the Local Government Act 1972, as amended.

Reason for Decision:

Should the press and public remain during the following item of business as there may be a disclosure of information that is deemed to be exempt under Part 3 of Schedule 12A of the Local Government Act 1972.

FEEDBACK FROM CQC INSPECTIONS

28 The Trust's Director of Strategy reminded the Committee that the Care Quality Commission (CQC) had undertaken a 'Well Led' inspection of a selection of services provided by the Trust in the period August – October 2018. Some of the services inspected included dentistry, mental health hospital wards (for adults and for older people), PICU, home treatment teams, 136 suites access and crisis services and walk-in centres across the Trust.

The CQC's report had been presented to the Trust's Directors on 17th December 2018 with an overall 'requires improvement' rating, although it was acknowledged that many individual services were improving. In this regard it was noted that the Saffron Ward (for older people) had demonstrated innovative practice as it routinely admitted patients with mental illness but provide care for patients experiencing delirium. Also it was noted that the North and South Wars had access to a physical health check, drop in clinic which were additional to the physical health checks on the wards.

The CQC had highlighted a need for improvements in terms of: supervision, IPDR's, governance structures, staff morale, the quality of staff, mandatory training, patient rights, safer staffing, audits and bed occupancy.

The CQC had found a clear commitment from the Trust that the priority, throughout, was to improve the quality of services. The CQC had recognised a significant improvement in the organisational culture at Pennine care, describing the Board as being 'open and inclusive'.

In light of the inspection the trust will be required to submit a revised and updated Action List to the CQC. Each and every action will have both a 'lead' and an 'Executive' sponsor. There will be regular updates and monitoring of the Action Plan to ensure its full and timely implementation. The Action Plan

will be shared with key stakeholders including: the CCG's across the Trust's footprint, NHS England, this overview and Scrutiny Committee and HealthWatch.

Resolved:

1. The report be noted and welcomed.
2. A copy of the CQC's report be circulated to Members of the Joint Overview and Scrutiny Committee for Pennine Care.
3. A copy of the Trust's Action Plan be forwarded to Members of the Joint Overview and Scrutiny Committee for Pennine Care.
4. The Committee acknowledge that the CQC had formally praised the quality of staffing across the Trust's footprint.

March 2019

Managing Mixed Sex Accommodation: Briefing

REPORT

Background and context

The purpose of this paper is to present an update and details of next steps with regards to the Trusts intention to meet statutory mixed sex accommodation (MSA) requirements.

The regulatory requirements and expectations of PCFT are clearly outlined. The 2016 PCFT CQC inspection report highlighted a failure to comply with the Department of Health guidance on single sex accommodation on older people and acute wards for working age adults.

The report published following the inspection in June 2016 reported that the 'trust was not effectively managing the risks of mixed sex accommodation.' The recommendation was that 'The trust must ensure that all wards are compliant with the Department of Health guidance on same sex accommodation in order to ensure the safety, privacy and dignity of patients.'

In 2018/19 the PCFT CQC inspection report acknowledged there had been improvements in how the trust managed mixed sex accommodation. The CQC acknowledged that a consultation was on going to assist the trust in making future decisions about managing mixed sex wards.

Notwithstanding this recent positive feedback the CQC continue to remain interested in a number of sexual safety incidents that have occurred on PCFT inpatient wards.

Following the publication of 'The state of mental health services 2014 to 2017' and the CQCs report 'Sexual Safety on mental health wards' there has been a national commitment to eradicate dormitories on inpatient psychiatric wards.

Progress to date

The engagement exercise which was intended to explore attitudes among patients, staff, carers and other relevant stakeholders to moving from mixed to single sex accommodation on inpatient mental health wards has now concluded.

The Trust has formally received the outcome of the engagement exercise, a board development session was held on the 11th February where the lead analyst provided detailed feedback on the content of the report to board members.

The full report has been distributed via the CEOs blog and also directly to those staff who participated in the engagement exercise.

The engagement analysis report provides the detail of how the engagement was undertaken and analysed and provides comprehensive detail on the feedback and themes gathered through the process of the engagement exercise. The key area for acknowledgment was the vast amount and wide variety of views gathered regarding the delivery of mixed sex accommodation which also means that the report does not conclude with a consensus view.

The report also helpfully doesn't solely focus on the MSA issues as other related issues were highlighted and have been captured through the engagement exercise that directly impact on the safety, privacy and dignity of patients who are admitted to PCFT wards. This includes:

- Mixing patients with organic and functional illness
- Issues effecting LGBT patients
- Staffing levels (nursing, support worker and therapists):
- Staff attitudes/culture:
- Patient Choice:
- Location of hospital sites and wards
- Broader estates and Accommodation issues
- Bathing and toilets facilities.
- Staff skills/ specialisms
- Bed management and bed allocation
- Continuous Professional Development for staff
- Therapeutic engagement/ activities

We are aware operationally that the inpatient staff continue to proactively manage mixed sex accommodation and patient safety as a priority and report mixed sex breaches as per operational guidance.

Next Steps

Following receipt of the evaluation report, presentation at the Board development session on the 11th Feb and the JOHSC on the 21st March 2019, the Executive Director of Nursing will now in collaboration with the Managing Director of mental health services and other senior colleagues within the Trust lead the next phase of work with regards to the MSA agenda in order to support the Trust to meet the statutory requirements.

This will include:

- A detailed review of the engagement analysis and discussions with operational service leads
- Gathering of further feedback following publication and presentation of the report
- Develop a co-produced proposal for board decision which not only outlines the proposed approach to how the Trust should manage Mixed Sex Accommodation, the functional and organic split and the approach and impact of eradicating dormitories moving forward but also prioritises these workstreams in the context of quality, safety, identified urgency, feasibility and affordability.

The proposal to Trust Board will also pay attention and be aligned to the emerging GM mental health estates strategy.

It should be noted that there are a number of workstreams identified within the engagement report that feature in the Trust strategic and operational plans and are already being progressed:

- Continuous Professional Development
- Improvement in staffing levels on the wards (variety of disciplines)
- Availability of therapeutic interventions/ activities
- Further development of a sexual safety culture, management of MSA (including consideration of ward team development programmes)

- Improvements to bed management and bed allocation through the development of a centralised bed management team and a recently reviewed and launched bed comprehensive bed management protocol and mixed sex accommodation algorithm
- Development of stronger clinical and operational leadership across acute inpatient services
- Development of safer staffing and ward thresholds and associated escalation procedures
- Work to improve the experience of LGBT patients
- Development of ward based safety dashboards through tableau facilitating a ward level view of triangulated data linked to safety including staffing levels, incidents, sickness levels. This dashboard will continue to evolve.
- The initial scoping of acuity assessment tools
- Developments to support e rostering

Recommendations

Joint Health Overview and Scrutiny Committee are asked to note the report and offer any feedback.

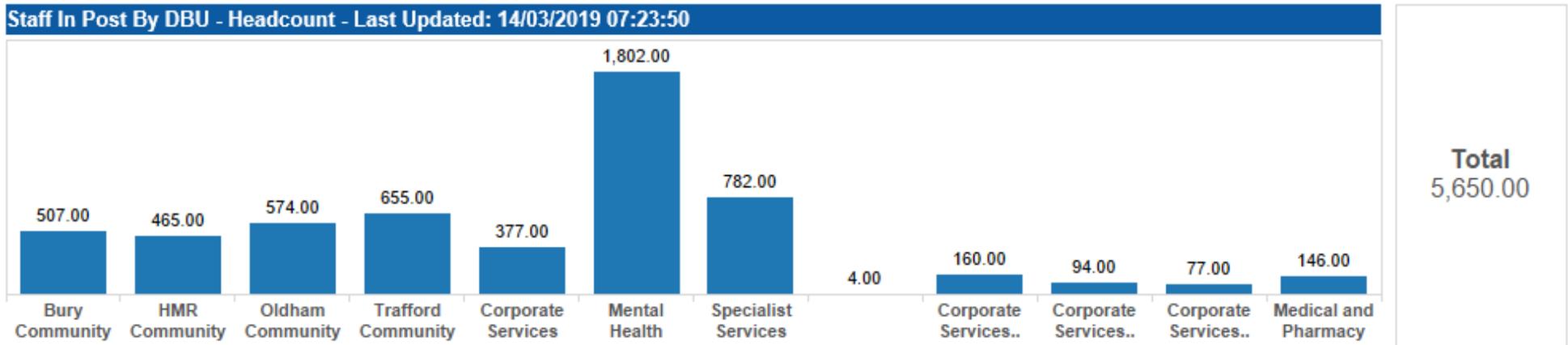
A detailed proposal will be presented to Public Board in May 2019 for a decision regarding direction of travel and timescales.

Pennine Care Workforce

Introduction

Pennine Care currently employs 5650 staff with a further 936 staff on the temporary bank who provide ad hoc cover to fill gaps due to sickness and vacancies.

The workforce comprises staff working with Mental Health/Learning Disability and Community Services across the Trust footprint as follows:



The current turnover rate for the Trust is 11.58% which is within the 'average' range compared to other Mental Health/Learning Disability NHS Providers in the North. The Trust vacancy rate is currently 11.37%. Sickness rates are currently running at 5.66% which is above average compared to the Trust peer group.

The harder to fill roles within Pennine Care mirror the regional and national gaps which include:

- Medical Staff
- Newly qualified nursing roles – Band 5 particularly in Mental Health services
- Walk-in centre staff
- Health Visitor

Brexit Implications

A risk assessment has been carried out into the potential implications of Brexit on the Pennine Care Workforce with a 'low risk' assigned to the immediate impact. This is based on the fact that only 1.8% of the Trust workforce are non-UK EU nationals. The Trust has monitored the leaver rates since 2016 and has only had 5 non-UK EU nationals leave the Trust in the last 2 years.

Based on the current profile of EU nationals and the low percentage of the Pennine Care workforce within this category there are no significant risks identified for any particular staff groups should there be a shortfall of EU nationals based on the current profile.

However, it is recognised that the national implications of Brexit may impact on the future supply chain for the wider NHS workforce which may impact Pennine Care as other competitor organisations look at different pools for recruitment.

Workforce Strategy

To address the future workforce challenges the Trust Workforce Strategy sets out the areas of focus and action to address these challenges.

The workforce strategy is set against four key domains as follows:

1 Effective and Sustainable Workforce

We will have the right numbers of staff, with the right skills in the right types of jobs in the right place to deliver effective and safe care. We will have a representative workforce that is flexible to meet the challenging service requirements of the future.

2 Capable and Skilled People

All staff will be appropriately trained and have access to the most effective and efficient learning and development opportunities. In alignment with the Informatics strategy to ensure the provision of technology and information to staff to allow and support them to continuously improve and communicate.

3 Effective Leadership

Our people will be valued and supported. Our leaders will model our values and behaviours. Our people will be engaged and encouraged to contribute. We will have a system in place to identify and develop succession planning. Performance measures will be used to temperature check we are providing effective leadership. We will ensure effective partnership with Higher Education Institutes.

4 Health, Wellbeing and Staff Engagement

We will have a healthy organisational culture where staff contribute to the delivery of organisational objectives and demonstrate our values. We will ensure positive staff experiences which support the wellbeing of our people, improved attendance and retention.

These key areas are underpinned by an Equality, Diversity and Inclusion strategy.

Transfer of Community services

The timeline for the transfer of community services are exceptionally challenging and we are currently working to the timeframes set out:

- North East Sector (Oldham, Bury and HMR Adults) – Salford Royal NHS Trust Board will consider the business case for transfer end April 2019. Following formal ratification the TUPE consultation process will commence from 1st May 2019 with a view to staff transferring across on 1st July 2019.

- Trafford – Manchester Foundation Trust Board will consider the business case for transfer in May 2019. Following formal ratification the TUPE consultation process will commence with a view to staff transferring across on 1st October 2019.

The transfer will affect those staff working directly in the clinical services within the community along with a number of corporate staff who provide support into the community services.

Monitoring Performance

A detailed action plan and performance report have been developed to monitor progress and impact. The People and Workforce Committee have oversight of the workforce strategy implementation.

Nicky Littler
Director of Workforce
14th March 2019