List of Appendices:

None

# Barnet, Enfield and Haringey Mental Health NHS Trust

A University Teaching Trust

| Title:   | Executive Chief Operating Officer Report  |
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| Report to:   | Trust Board   |
| Date:  | 2 October 2017  |
| Security Classification:   | Public Board Meeting  |
| Purpose of Report:   |   |
| This is a regular report to update the Board on Trust operational matters. The report is to inform and update the Board on key operational priorities and progress of operational issues across Borough and Specialist Services. |   |
| Recommendations:   |   |
| The Trust Board is asked to note progress made since the last report to the Trust Board on 18 July 2017.   |   |
| Report Sponsor:  | Andy Graham, Executive Chief Operating Officer  |
| Comments / views of the Report Sponsor:  | N/A. Comments contained in the body of the report.  |
| Report Author:   | Name: Andy Graham Title: Executive Chief Operating Officer Tel Number: 020 8702 6010 E-mail: andy.graham@beh-mht.nhs.uk |
| Report History:  | Regular Report  |
| Budgetary, Financial /<br>Resource Implications:   | Some cost reductions and productivity gains set out in this report.   |
| Equality and Diversity Implications:   | None.   |
| Links to the Trust's Objectives, Board Assurance Framework and / or Corporate Risk Register  | Links to the Board Assurance Framework summary (Trust Board agenda item).   |

## Report

#### 1. Introduction

- 1.1 I would like to start this month's report by thanking all of our staff, partners and Board colleagues for their excellent support during the period I have been acting Chief Executive. I have thoroughly enjoyed the experience, learned a lot, and also welcome Maria on her return on 2 October.
- 1.2 In terms of Chief Operating Officer business:
- 1.3 I would like to welcome our new Physical Health Care Leads for each borough. I had the privilege to meet them along with Dr Bindman, the Trust's Medical Director, and having done so, I am fully confident that with their knowledge, experience and leadership they will help us build on the good arrangements already in place to ensure that the Trust excels in the delivery of the best possible physical healthcare to our service users.
- 1.4 The Trust's excellent Improving Access to Psychological Therapies (IAPT) team will start delivering the new service in Barnet from 2 October. This is in addition to the existing service provided in Enfield. I would like to thank Dr Nicole Main and the Barnet Management Team for all of the additional work it has taken to mobilise the new service.
- 1.5 There have been some further delays in opening new nursing home accommodation in Enfield. Staff at Cornwall Villa are therefore continuing to provide the same impressive level of compassionate care that service users and their families have come to know before their transfer into their new accommodation and staff into their new jobs in the Trust.
- 1.6 I have had the privilege of chairing the Mobilisation Board of the new North London Forensic Consortium on behalf of the Trust. The contribution of Trust staff as well as partners in East London, North East London, Central and North West London and West London to see an even more impressive and consistent range of services across this large geography starting next year.
- 1.7 Finally, the Trust is putting the final touches to its future specification of the 'Enablement Programme'. I look forward to working with the new Third Sector Partners to make this a reality for our service users.
- 1.8 I undertook the following visits to wards and services:
  - Adult Acute Inpatients, Thames and Trent Wards, Edgware Community Hospital
  - Barnet South Locality Team
  - Barnet West Locality Team
  - Continuing Care for Older Adults, Cornwall Villa, Chase Farm Hospital
  - Forensic Learning Disability Service, Mint Ward, Chase Farm Hospital
  - Forensic Low Secure service, Seacole East (new Derwent ward), Chase Farm Hospital
  - Forensic Medium Secure inpatient services, Fennel and Paprika Wards, Chase Farm Hospital
  - Older Adults Inpatient services, The Oaks, Chase Farm Hospital
- 1.9 I attended the following meetings on behalf of Maria Kane:
  - Secure Schools Event hosted by the Ministry of Justice (MoJ). The event launched the MoJ's vision for the establishment of secure schools to tackle the low educational outcomes of young people in custody.
  - North Central London (NCL) Executive Leadership Group. The most recent meeting
    provided an update on the implementation of Sustainability and Transformation Plan and
    looked at ways in which to shift the existing Commissioner / Provider contracting
    relationship to a systems change approach.

1.8 The remainder of this report reflects local issues and highlights from our borough and specialist services.

## 2. Barnet Borough Services

## 2.1 Cost Improvement Programme (CIP)

2.1.1 The Borough's plans to deliver cost improvement through rationalisation of estates are at an advanced stage. Clinical teams and support services will be moving out of the top floor of the Dennis Scott Unit (DSU), relocating to a combination of the lower floors of the DSU and the Springwell Centre. New clinical spaces are being made available for Child and Adolescent Mental Health Services (CAMHS) at the DSU and for Adult Services at the Redhill Clinic in Edgware. Contractors have been appointed and the works will begin at the end of September and the project is scheduled for completion in December 2017.

## 2.2 Consultation on Borough Management and Leadership Structure

- 2.2.1 The consultation on the Borough's operational management structure has been completed and substantive appointments have been made to the new Service Manager posts through a combination of internal career progression and external recruitment. The new structure will see a service manager in each of the following areas:
  - Inpatient wards and Home Treatment
  - Adult Community Mental Health Services
  - Older Adult Services, Liaison, Health Psychology and Learning Disability
  - CAMHS (interim appointment)
- 2.2.2 The process of consultation was a productive one, and the significant contributions, comments and suggestions received enabled the Clinical Director to make important changes to the original proposed model. The refreshed structure is cost neutral and will better support the Borough to manage operational targets and drive improvements to clinical quality.

## 2.3 Barnet IAPT Contract

2.3.1 A significant piece of work for the Borough Team has been the transfer of the Barnet IAPT contract to the Trust. Transfers of staff from the current provider are being completed, as is recruitment to vacancies and developing the links to secondary care teams. The contribution of the Trust's Enfield IAPT service has been of enormous value to this complex process. The new service – Let's Talk Barnet IAPT – will go live from 2 October 2017.

#### 2.4 Barnet CAMHS

- 2.4.1 The Barnet CAMHS re-commissioning process continues. Whilst this process creates challenges, there has also been the opportunity to reflect on current models of provision and develop a future vision and model for CAMH Services. There have been a series of positive meetings with other secondary care providers and voluntary sector organisations to scope future collaborative work developing greater preventative wellbeing services.
- 2.4.2 The Trust's CAMHS leaders have also met with providers from across North Central London to develop the model for a new out-of hours crisis service, to commence in 2018 / 2019.

## 3. Enfield Borough Services

#### 3.1 Enfield CAMHS Waits

- 3.1.1 Enfield CAMHS continues to demonstrate a reduction in long waits to assessment for generic CAMHS. The service was not able to deliver on the forecasted July compliance with the 13 week national waiting time target. This was set back due to the early departure of 4 whole time equivalent (wte) agency staff supporting the waiting list initiative. The service is now on track to achieve compliance by the end of September. Workforce recruitment linked to the Future in Mind funding is well implemented with start dates for some staff in October that will increase clinical capacity.
- 3.1.2 Enfield CAMHS is participating in the Care Quality Commission (CQC) Thematic Inspection commencing 18 September 2017 for 5 days. The Enfield Health and Wellbeing Board area is one of ten areas selected to be part of the thematic review, based on a review of data about geographic areas, demographic characteristics, and area profile. Phase 1 of this review includes a literature review, analysis of available data on the quality of mental health care, including our inspection of mental health services, work with partner organisations to understand and document the experience of children, young people and their families / carers. The findings of Phase 1 will inform the development of the forthcoming green paper on mental health services for children and young people. Phase 2 of the thematic review, will explore:
  - Where has there been real change and where is change slower?
  - What were the enablers to change and the obstacles to implementation?
- 3.1.3 An awareness event for children's mental health support was successfully funded via the Trust's Dragon's Den. The event will be held at the Enfield Town Show on Saturday, 23 September and will involve young people and service users to highlight the existence of young people's mental health and mental health services. Themes developed at the event will be taken into local schools further raising awareness and challenging stigma around young people's mental health. The service will also use the art generated to decorate the service waiting rooms and make the environment more appealing to young service users.

## 3.2 Children and Young People (CYP) Specialist Services

3.2.1 On 6 September 2017, the Trust and the London Borough of Enfield reached a financial agreement that draws a line under some historical funding issues. Going forward in 2017 / 2018 some work will be undertaken to develop a service model that can deliver the Health Child Programme (HCP) and within the financial contract agreed. This work will involve recognition that the model is both deliverable and clinically safe for the children and families of Enfield. Currently, the service is delivering all aspects of the HCP Universally for New Births, 6-8 week review and 2 year review and targeting antenatal and 1 year reviews for those families who are identified as having safeguarding concerns or parental concerns.

## 3.3 Enfield Adult Mental Health Pathway

3.3.1 The Adult Care Pathway review, in collaboration with Healthwatch Enfield and service user representatives are on-going, with a key aspect of developing care pathways through inpatients and Crisis Resolution Home Treatment Teams, and across secondary mental health.

## 3.4 Healthbased Place of Safety (HBPoS)

3.4.1 In January 2017, the Trust centralised the provision of a HBPoS at Chase Farm Hospital, with a core group of dedicated nursing staff. This followed meetings and discussions with some key stakeholders and development of the Inter-Agency Mental Health Act Joint Protocol and Place of Safety Operational Protocol. Through these developments, the

service has become more efficient with a focus on improved quality of care with a well-developed governance structure.

## 3.5 Reprovision of Long Stay Continuing Care Patients (Cornwall Villa and Silver Birches)

3.5.1 There has been a further delay in the opening of the newly commissioned Bridgewood Care Home in Enfield. The Care Home is planning to issue a definite timescale by the end of September. The Cornwall Villa Ward Consultation and Way Forward paper have now been completed and all staff have been allocated new positions based on their preferences. Staff will take up their new positions when Cornwall Villa closes, which is now expected to occur towards the end of October 2017. There are regular support meetings with staff and an update letter has been issued to relatives.

## 3.6 District Nursing Services - Best Practice in Wound Care Dressings

3.6.1 A joint Enfield Clinical Commissioning Group (CCG) / Trust project group has been established to support and promote best practice in the prescribing of Wound Care Dressings in Enfield. As a borough, Enfield spends in excess of £920,000 (CCG spend) per annum on dressings. This project will aim to better support Primary Care and increase the number of District Nursing (DN) community prescribers, who currently only prescribe 25% of all dressings in Enfield. Increasing the proportion of DN prescribers will help to improve prescribing of the most effective and appropriate dressings and this will also lower costs. Plans are in place to share savings between the Trust and CCG.

## 4. Haringey Borough Services

#### 4.1 Haringey Community Services

- 4.1.1 The Kids Time project has had agreement around continued funding for the coming year. Kids Time arranges monthly workshops for children and parents who have mental health problems. Through art and drama children are enabled to work through experiences of having a parent with mental health problems. Haringey CAMHS and Haringey Adult Mental Health staff offer input into the workshops and the Kids Time project.
- 4.1.2 CAMHS CHOICES is now using social media (Instagram and Facebook) to link up with children and young people around mental wellbeing. The CAMHS CHOICES Instagram account already has 159 followers. Staff from Haringey CHOICES are attending an International Youth Mental Health Conference in Dublin in September, where they will give a presentation about the Haringey CHOICES services.

## 4.2 Haringey Adult Mental Health Pathway

- 4.2.1 Work on the Adult Mental Health Pathway is progressing. This work coincides with the relocation of community services currently based at Canning Crescent Centre to the St. Ann's Hospital site.
- 4.2.2 The Haringey Psychosis Teams will take part in the Research into Antipsychotic Discontinuation and Reduction (RADAR) study. The principal objective of this study is to evaluate the benefits and risks of a supported programme of antipsychotic dose reduction and discontinuation compared with continuous maintenance antipsychotic treatment in adults with a multiple episode schizophrenia spectrum disorder or non-affective psychotic disorders.

### 5. Specialist Services

### 5.1 North London Forensic Service (NLFS)

- 5.1.1 The in-house supervision training has reached over 120 nursing and Occupational Therapy staff combined. The training has received positive feedback and has been adapted throughout to meet the needs of staff. Recently, the training has expanded to include work colleagues in the Eating Disorders Service, Drug and Alcohol Services and Pentonville Prison.
- 5.1.2 The NLFS has recently increased the use of mobile phone communication innovation to the Medium Secure rehab wards which has once again seen positive patient experiences. The innovation allows each individual patient, upon request, to be risk assessed and managed to use one of the NLFS owned basic mobile phones (no camera or internet access) within the comfort of their own bedroom to phone or text loved ones in private. Patient's privacy, dignity and access surrounding their communication to friends and relatives has been highlighted over the years as a concern by NHS England, Quality Network Peer Reviews and the Care Quality Commission (CQC) as the ward payphones do not offer privacy and time.
- 5.1.3 The Recovery College is now fully available to all patients with a prospectus. Each ward has recovery champions supporting patients to access and enroll on courses. All 57 courses are co-produced with patients in both design and delivery and there is an increasing group of experts by experience who are both facilitating workshops and attending ward meetings to support patients.

#### 5.2 Eating Disorder Service

- 5.2.1 Phoenix Ward received an unannounced CQC inspection on 4 / 5 of September. In contrast to the focused inspection on Phoenix Ward in February 2017, this was a comprehensive inspection of the ward. The inspectors followed up on the actions that were taken as a result of the February inspection, which were highlighted in the action plan that was submitted to the CQC in May. The full report will be received in a few weeks, which will include a rating of the Ward. The inspectors commented on the improvements that had been made since the February inspection and highlighted physical healthcare, risk assessments and the leadership of the ward manager as positive areas they had noted. There was feedback about the ward environment that need to be addressed.
- 5.2.2 The Phoenix management team has been working closely with the Trust's architects as part of the Clinical Design Team to design a bespoke adult eating disorders unit as part of the plans for the redevelopment of St Ann's Hospital. The new ward will include a large kitchen in which a chef will be able to prepare food from fresh ingredients, a small self-catering kitchen for service users to prepare their own snacks when they are closer to discharge, and an interconnected dining room and group room so that there is a seamless transition from mealtimes to post-meal support groups. The service users and staff on Phoenix Ward have provided considerable input into the design and layout of the ward.
- 5.2.3 The weekly St Ann's Eating Disorders Service Peer Support Group commences on Wednesday evenings. The Group will be open to any service users who are seen in the inpatient, outpatient or day program and will be held at the Bowlby Centre in Highbury and Islington. With funding received from the Trust's Dragons' Den process, the service has hired two Band 3 Peer Support Group Facilitators who will be running the Group each week, with support and supervision from members of the Multi Disciplinary Team. The Peer Support Group will provide an essential part of the treatment pathway that is in line with the goals and aims of the Trust's Enablement Programme.

## 5.3 New Care Model Update

- 5.3.1 A Mobilisation Board has been established and will be meeting every two weeks. All partners are pleased with the current progress. Focus at present is on data cleansing the Out of Area lists. The next phase will be the launch of the sub-groups to work on a model design for the planned April go live.
- 5.4 Stalking Threat Assessment Centre (STAC)
- 5.4.1 Funding for a two year pilot has been approved. This is a national pilot with 3 hubs. Mobilisation will start shortly.

## **Implications**

- 6. Budgetary / Financial Implications
- 6.1 There are no budgetary / financial implications as a direct result of this report.
- 7. Risk Management
- 7.1 There are no risk management implications as a direct result of this report.
- 8. Equality and Diversity Implications
- 8.1 None.