

## Escalation and Assurance Report

Agenda  
item

**12.3**

**Report from the: Mental Health Legislation and Quality and Safety Committee**

**Date the meeting took place: 18 March 2021**

**Report to the: Board of Directors**

### Key discussion points and matters to be escalated from the discussion at the meeting:

#### Alert:

We conducted an in-depth analysis following previous information presented on service-user waiting times for the Psychological Therapy Service. This highlighted ongoing staffing challenges, recruitment and retention issues, and a continued, increasing trend for referrals. Staffing ratios, benchmarked against other comparable trusts, highlighted that we may need four times as many therapists to offer all services. Community Mental Health Services are especially stressed. Previous but temporary interventions, including working with VCS partners, have provided improved outcomes but were temporary arrangements. An extraordinary alert was escalated to the Chief Executive and the Chair of the Trust by the Joint Committee Chair following the meeting (QSC), which received a rapid reply agreeing to Board-level analysis and a range of planned actions. **See attached.**

We received the Medicines Management Strategy and priorities therein - specifically the imminent and much needed E prescribing project. We gained considerable assurance concerning the project plan and other workstreams, all driving towards increased medicines optimization. The primary concern is the resilience of the pharmacy service as part of an integrated trust-wide approach to medicines management. The team and leadership are stretched, and the current resource is unlikely to sustain their performance in the medium and long term.

We received findings from a community mental health survey which revealed specific areas for improvements including more support for service users finance, employment, and physical health needs. Additionally, less than 60% of service users surveyed were able to discuss the side effects of their medicines.

#### Advise:

Vaccination update received on the expected national shortage of the COVID-19 vaccine, with plans refined to ensure continued service delivery and prioritisation (QSC to monitor). Vaccination of people outside of cohorts 1 to 9 would be halted until May due to supply shortfall, second doses will be supplied and administered according to original plans.

Concerns received via the Ligature and Environmental Safety Group on challenges with kit required in some clinical areas, including the management of keys, alarms, and fobs. The discussion identified the availability of essential kit and associated risks. Broad recognition that there is more work to do here (MHLC to monitor).

**Assure:**

Considerable assurance was received on the quality and safety oversight, and governance processes for the new collaboration with an independent healthcare provider to reduce out of area placements (QSC to monitor).

Committee welcomed the *Time to Think Week* as part of the Care Trust Way to support staff wellbeing; staff will wherever possible given protected time for individual and team reflection on the pandemic era (QSC).

Time constraints prevented committee from discussing items 9 and 18 in the necessary detail. Both will be appraised outside of committee through shared questions to paper authors and their answers, (a method for which has been already established), the answers will be reviewed at the next QSC and MHLC respectively

**Risks discussed:**

- Not applicable.

**New risks identified:**

- Board should discuss inclusion of the psychological therapies resource to the Risk Register.

**Report completed by:** Professor Gerry Armitage

**Date:** 19 March 2021