



## **Additional / To Follow Agenda Items**

**This is a supplement to the original agenda and includes reports that are additional to the original agenda or which were marked 'to follow'.**

### **Nottingham City Council Health and Adult Social Care Scrutiny Committee**

**Date:** Thursday, 23 June 2022

**Time:** 10.00 am

**Place:** Ground Floor Committee Room - Loxley House, Station Street, Nottingham, NG2 3NG

**Governance Officer:** Jane Garrard **Direct Dial:** 0115 876 4315

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## **Nottinghamshire Healthcare Trust Quality Account 2021/22**

### **Comment from Nottingham City Council Health and Adult Social Care Scrutiny Committee**

The Nottingham City Health and Adult Social Care Scrutiny Committee welcomed the opportunity to discuss the Trust's Quality Account 2021/22 with colleagues from Nottinghamshire Healthcare Trust and is pleased to be able to comment on it. The Committee's comments focus on areas in which it has engaged with the Trust in 2021/22.

The Committee welcomes the establishment of a Crisis Support Line 24 hours a day, 7 seven a week as a positive development for those experiencing a mental health crisis and their family/ carers, and the establishment of the Crisis Sanctuaries which run throughout Nottinghamshire every evening. It is important that this investment is accompanied by longer term support so that individuals aren't just supported to get out of a crisis situation only to return to that situation in the future. The Committee suggests that data on the number of individuals who repeatedly access crisis support, and an understanding of referrals made by the Crisis Resolution Home Treatment Team (CHRTT) would be useful in assessing that. One of the two Prevention of Future Death Reports that the Trust was issued with during this period referred to the CHRTT considering its role to be limited to avoiding the need for patients to receive in-patient treatment. That the Service should be acting as a 'gatekeeper' to inpatient care is of great concern to the Committee and this concern was raised with the Trust. The Trust advised the Committee that this is not the case, but it is not clear from the Quality Account document what learning, if any, has taken place in relation to the issue being raised in the Prevention of Future Death Report, and elsewhere in the Quality Account document there is reference to 'crisis gatekeeping'. In addition, the Committee has met with the Trust both in public meetings, and privately when the phrase 'gatekeeping' has been used by senior Trust officials regarding the CRHTT. This does not provide the Committee with sufficient reassurance that gatekeeping does not take place. The Committee supports the Quality Improvement Priority to improve clinical risk assessment, management and safety planning to contribute to reducing suicide and self-harm.

The Committee welcomes the focus on improving waiting times for treatment. It has spoken with the Trust about waiting times for Step 4 Psychotherapy and Psychological Therapies and, while it remained concerned about the length of wait for treatment, it welcomed the actions being taken by the Trust to address this and the assurance that individuals receiving alternative care whilst waiting for specialist support are not removed from the waiting list for Step 4 services. The Committee will want to review this to ensure that individuals were not removed from the waiting list as assured by the Trust. The Trust advised the Committee that waiting times for the service should have significantly improved by summer 2022 and therefore the Committee will want to review the position again at that point. The Committee also discussed access to adult eating disorder services with the Trust. The Committee was concerned that some referrals to the Service are rejected based on BMI criteria. Despite the Trust stating they don't routinely enforce a BMI threshold, the Chair of the Committee has received evidence from patients suggesting that not to be the case. The Trust acknowledged to the Committee that access to specialist services can sometimes be difficult and that, for example, some GPs do not always have the skills and experience to appropriately refer. Whilst the Committee accepts this may be accurate in some cases, it remains of the belief that primary care is not set up to deal with complex mental health issues such as eating disorders. The Committee believes that primary care should not be used as a fall back and that secondary services require appropriate investment to ensure services fully meet the needs of Nottingham citizens. The Committee remains concerned that when asked what

services were available for adults with eating disorders who weren't accepted into the Eating Disorder Service, they were given details of a charity commissioned by the Trust. Whilst the Committee believes the work of this charity is commendable, it is only available in Nottingham for university students leaving non-students without access. The Committee also has an interest in access to transgender services and this is something that it would like to explore with the Trust in more detail during the forthcoming year. The Committee welcomes the ambitions to improve access, including through the Severe Mental Illness Transformation Programme, and hopes to see that start to happen during 2022/23. The Committee suggests that data on, and an understanding of the number of referrals to services that are rejected and the reasons for those rejections could be useful in informing this activity.

For 2021/22 the Trust had a Quality Improvement Priority to increase compliance with the Mental Health Act. The Committee would expect that non-compliance would be resolved as a matter of urgency however the Committee is concerned about the pace of improvement given that there still appear to be some outstanding issues.

Finally, the Committee would like to thank all staff at the Trust who have worked on the frontline throughout an incredibly difficult year.

## **Nottingham CityCare Partnership Quality Account 2021/22**

### **Comment from Nottingham City Council Health and Adult Social Care Scrutiny Committee**

The Nottingham City Health and Adult Social Care Scrutiny Committee welcomed the opportunity to discuss its Quality Account 2021/22 with colleagues from Nottingham CityCare Partnership and is pleased to be able to comment on it.

As the Committee has not undertaken any scrutiny of Nottingham CityCare Partnership during 2021/22, its comments are restricted to planned priorities for 2022/23.

The Quality Account document outlines a wide range of quality improvement activity that the organisation has been undertaking over the last year and it is really positive that many of these, for example ambitions to reduce inequalities in child development and ensuring an urgent response to support those in crisis, align with the priorities of Nottingham City Council and what other local health organisations are telling the Committee. This suggests good system working. This can also be seen in the Quality Improvement Priorities identified for 2022/23, which the Committee is supportive of. Many of them align with priorities of Nottingham City Council, for example the use of trauma-informed practice. It is positive to see aligned working across the system to address the challenges facing our City and bring about improvements for our population. While the Committee has not looked at the issues specifically in relation to CityCare, it is aware of the significant challenges in recruiting and retaining staff to work in health and social care in the City and nationally, and therefore welcomes the focus on addressing this through initiatives such as increasing clinical supervision. The Committee is also supportive of the organisation's emphasis on local recruitment which, again, aligns with Nottingham City Council's focus.

Many of the workforce initiatives outlined in the Quality Account document, for example supporting staff on religious observance and those going through the menopause, sound really positive and suggest a good understanding of the workforce profile of the City. However, the results of the equality and diversity aspects of the staff survey are less than positive. This indicates that there are significant issues to be tackled. The organisation tells us that it is taking these issues seriously and has now carried out a cultural audit and is considering how to take this forward. There is specific data in the report relating to ethnic minority and disabled staff, but it is not clear whether data is being reviewed by other protected characteristics, for example LGBT – it is important that this does happen.

The document provides some good examples of how the organisation is trying to listen to patients and communicate with them in a way that is easily understandable, including considering the needs of those with lower levels of literacy. It is positive that the organisation is working in a way that is reflective of the needs of those living in the City. The information provided on complaints is detailed and it is positive that the organisation is being open about things that have not gone well, the lessons learnt and feedback. This open and honest approach is what the Committee wants to see.

Finally, the Committee would like to thank all staff in the organisation who have worked on the frontline throughout an incredibly difficult year.

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