

NORTH YORKSHIRE COUNTY COUNCIL
SCRUTINY OF HEALTH COMMITTEE
17 December 2021

Tees, Esk and Wear Valleys NHS Foundation Trust – A brief update and overview of the issues that led to the temporary closure of Esk Ward, Cross Lane Hospital, Scarborough, and the implementation of improvement plans in response to recent CQC inspections.

Report of Naomi Lonergan, Director of Operations, Tees, Esk and Wear Valleys NHS Foundation Trust

Purpose of this report

1. The purpose of this paper is to provide an update on the issues that led to the temporary closure of Esk Ward (13 bed female ward at Cross Lane Hospital, Scarborough) and the recent trust wide CQC inspection, specifically in relation to inpatient services at Foss Park Hospital in York.

2. Esk Ward

Within the service and trust, the ability to retain and recruit staff into the adult wards at Cross Lane Hospital has been a challenging issue in recent years. Key actions to address this has been to introduce attractive roles to the unit, bespoke recruitment events, with limited success, and the recent introduction of an international recruitment programme and the piloting of a recruitment and retention premia.

2.1 In the context of staffing challenges, a full review of the ward's staffing escalation template was undertaken in October 2021 due to an increasing number of nursing staff vacancies and the imminent retirement of the locum consultant. On its review, whilst the staff available across all roles showed only a moderate % gaps in posts, the overall number and forecast of registered nurses across the band 5 and band 6 clinical lead posts was considered unsafe. In addition to access to nursing capacity, the unit still has not been able to recruit into the consultant psychology and psychiatry posts that are essential to delivering a multidisciplinary approach to patient care, providing effective treatment and support to the ward.

2.2 A key mitigating factor of using block booked agency was also lost due to changing pay conditions with the agency and offer of other providers.

2.3 Alongside the core number of registered nurses that support care delivery, professional development and operational running of the ward, there exists:

- Ward Manager
- Practice Development Practitioner
- Psychological therapist
- 15.05 wte Health Care Assistants (over established to support the S136 suite and back of people on RNDP)
- 0.5 Occupational Therapy
- Occupational Therapy assistants

In addition, there is also senior posts supporting the unit:

- Acting nurse consultant
- Acting modern matron.

2.4 Joint review of current staffing

On 11 October, an urgent meeting was held to consider the options and ability to safely staff the ward, managing the level of clinical need for patients and the safety of the ward. The meeting included senior leads across the Trust responsible for operations and including clinical representation of nursing, psychiatry, psychology.

In this remedial review, 4 primary options were considered, against the chronic inability to recruit staff to the ward over time, retain staff and the increasing patient experience issues that are presenting, in part due to changing nature of patient presentations, but also the wards reduced ability to engage patients in a consistent way.

Risk	Benefits
Option One: Continue to manage the ward on a day by day basis at risk	
Option two: staff the unit using the senior nursing leadership in the locality and within AMH (requires 3.58wte to meet the requirements of the core rota)	
Option three: reduce the overall bed base to 10	
Option four: Close Esk ward and consideration of a flexible patient mix on Danby for 6 months	
<ul style="list-style-type: none"> • Impact on trust bed capacity and need to support out of area admissions and secure out of Trust bed capacity • Increase of patient complaints due to loss or reduction of local access to beds • Impact on the lone impatient psychiatrist without a peer – mitigate by the crisis consultant on site • Risk that Danby medic confirms her intention to go to the Ripon community or Scarborough community posts that is due to be advertised • Inpatient staff leave due the change to in patient group. 	<ul style="list-style-type: none"> • Protects remain staff resource to improve staffing on Danby and within the crisis team • Capacity to make sure of the operational and development leads to do targeted recruitment • Protects crisis and S136 responses, including the role of medic • Mitigate against patient experience and incident concerns • Protects operational and senior nursing capacity • Increases OT and psychological therapy capacity to Danby ward • Reducing the need for bank and agency staff and costs •

2.5 From the review, there was consensus from all those present at the review meeting that Option 4 was to be the joint recommendation for trust consideration with the following considerations:

- The ward remains closed for a period of up to 6 months and we are work in partnership with colleagues across PCN, local authority and CCG partners regarding a joint approach to recovery;
- That the current Esk patients are not decanted and supported on the ward until the end of October, reducing the number that need to be transferred to another ward and allowing them wherever possible to complete their treatment prior to discharge;
- Operational leadership supports a project to proactively recruit into vacant posts;
- The released capacity accelerates the development of the international recruits, starting in December 2021 and provision of physical workforce in March / April 2022;

- Retention and recruitment premia is financially approved to protect against the loss of current staff at Cross Lane Hospital, Scarborough – this is now an agreed pilot for 12 months.

3. Trust wide CQC inspection

3.1 In January 2021 the CQC inspected our acute wards for adults of working age and psychiatric intensive care units across the whole Trust. In a follow up to the January inspection, in May the CQC re-inspected our acute wards for adults of working age and psychiatric intensive care units.

3.2 Actions since our January inspection we have:

- Introduced new, simpler, safety (risk management) summaries and safety plans for our patients in both inpatient and community settings.
- Reviewed individual safety summaries and safety plans for approximately 56,000 patients who are currently under our care.
- Ongoing assurance schedules and more regular ward safety audits, which are carried out by different groups of staff – both senior management and staff peers – to ensure the new procedures are being fully implemented.
- Introduced masterclasses about the new simpler processes, with over 1,500 frontline staff attending sessions so far
- Developed a new mandatory and statutory training package, which will be delivered via e-learning, including refreshed suicide prevention training.
- Extended the use of Oxehealth Digital Care Assistant, which provides sensory monitoring of patients in their rooms, from three wards to a further 12 wards. This is in place at Foss park. It does not replace good nursing care but prompts staff to any key environmental changes which could signal a physical change in a service users' presentation.
- Committed and extra £5.4 million for extra staffing for our inpatient wards and these posts are currently being advertised.
- Established a practice development team, a new clinical supervision working group and additional leadership development across the whole Trust

3.3 Assurance and oversight embedded

- We have provided assurance to the Care Quality Commission (CQC) that effective systems are in place to help keep patients safe - and that further improvements are already underway.
- Our improvement programme is overseen and reviewed by an external quality assurance board which includes representatives from NHS England and Improvement, commissioners and the CQC.
- New assurance schedule launched in April includes ongoing supportive audit and programme of improvement.
- Directors visits monthly focussed on learning from incidents.
- Peer review took place in May.

3.4 Re-inspection of our adult acute and psychiatric intensive care units – May 2021

- On 27 August the CQC published its report following the re-inspection of our acute wards for adults of working age and psychiatric intensive care units, from the re-inspection in May 2021.
- This focused inspection was to see if improvements had been made.
- The CQC has rated our acute wards for adults of working age and psychiatric intensive care units as requires improvement.

3.5 The re-inspection took place over 9 wards, including Ebor (female) and Minster (male) wards at Foss Park Hospital.

3.6 The CQC findings, detailed in the August report:

- The CQC no longer has significant concerns relating to risk management of service users in our care.
- We have better systems in place to comprehensively assess and mitigate patient risk on our wards.
- Staff have a better understanding regarding the risk assessment process and what is expected of them when updating clinical documentation.
- We have appropriate mechanisms in place to monitor, audit and ensure oversight of the patient risk assessment process.
- We have effective procedure and process in place to review and learn from serious incidents.

3.7 However:

- Patient risks were still not always fully reflected within the written patient safety summaries in a small number of files reviewed.
- Staff had not always flagged current incidents, so these did not pull through into the written overview section of patient records. Information across other parts of the record usually showed that staff were mitigating these identified risks.
- Staff were not always following the trust's policy and expectations. An example was an unlocked window which presented a ligature risk. The CQC noted that we addressed these very quickly.
- Staff were not always mitigating the risks of operating mixed sex accommodation to fully promote patients' safety, privacy, and dignity. What people who use the service say
- The CQC spoke to 16 patients. However, there was limited feedback from patients about risk assessments and risk management, which was the focus of this inspection.
- Most patients we spoke with found nursing and support work staff to be supportive and caring.
- Patients commented that they sometimes found it difficult to cope on the ward as the wards were very busy and some patients were acutely mentally unwell.
- They reported that staff worked hard to keep patients safe.

3.8 Next steps:

- We are pleased that the CQC has recognised the improvements we have made within our adult acute inpatient and PICU wards.
- Our teams have worked incredibly hard to make positive changes in a short space of time to improve safety and risk management. It's also demonstrates our commitment to providing a better experience for people in our care, their families and carers and for our staff.
- We recognise that there is a lot more work to do and over the coming weeks and months we will be driving a number of changes across our organisation.
- These include continuing to embed improvements across our trust, and the introduction of new technology and digital solutions over the coming months, which will have a positive impact on patient care, and a focus on people and culture to support our workforce.
- We've also made significant investment in key areas such as staffing, which we acknowledge can be extremely challenging.

- We recently invested £5.4m to recruit new roles for adult inpatient services as well as our forensic services, and we are in the process of recruiting to those new roles. This is challenging work as there is a nationally recognised shortage of qualified nurses

4. Conclusions

Esk Ward

The ward was temporarily closed on the 12th November 2021 and with safe management of patients and one transfer to Foss Park Hospital, York to complete their treatment. A full communications plan to support patients, their families and to inform the local community and partners was also developed and implemented w/b 25th October 2021. Remaining staff have been deployed to support Danby Ward, Cross Lane Hospital, the crisis team and community teams to ensure we provide additional support where needed. We have implemented a pilot re the use of recruitment and retention premia and there is positive progress regarding the internal recruitment project with 5 candidates appointed and further interviews scheduled.

CQC inspection

Moving forwards the involvement of the CQC, alongside service user and carer feedback is essential so that we can continue to learn lessons, and to improve our understanding of service users' experiences of receiving care at Foss Park. The CQC feedback has been taken seriously and actioned accordingly but we prefer not to take a stance of complacency, instead continually focussing on developing our services to deliver the best possible care. Equally we need to ensure that we can move with the times, adopt and embed new evidence-based approaches that emerge and develop our services to meet expectations, designing care around individual needs rather than meeting needs in environments which can present significant compromise for care delivery. Foss Park is designed to afford this opportunity long into the future. We expect that the CQC will publish our well-led inspection report on Friday 10 December. We'll be in a position to provide you with an update on the report when we attend the meeting.

Recommendations

The committee is asked to review and note this paper.

Author

Naomi Lonergan, Director of Operations, Tees Esk & Wear Valleys NHS Foundation Trust.