

Trust response to Barnet, Enfield and Haringey Overview and Scrutiny Committee Sub-Group's comments on 2019/20 draft Quality Account

Following the meeting of the Barnet, Enfield and Haringey Sub-Committee of the JHOSC on 24 June 2021 to consider the draft Quality Account for 2020/21, the Trust has outlined its response to each of the Sub-Groups comments on the draft 2019/20 Quality account below as requested.

(i) The Quality Account could be made more accessible. One option might be to provide an easy read version for lay people. Data could also be presented in a more meaningful way. In particular, looking at data over a longer period could provide a clearer picture of trends.

The content of the 2020/21 Quality Account has been reduced and work undertaken to make this a more accessible document. In order to assist local people to understand key messages from the Quality Account, a short summary presentation and a short video will also be included on the Trust website alongside the Quality Account.

Next year, the Trust will engage with a group of service user and carer representatives to review the Quality Account in once drafted to help ensure it is accessible to a wide audience.

(ii) The patient experience has been highlighted in the latter parts of the Quality Account and it is felt that it should be given greater prominence. A lot of feedback on services has been received by the Trust and this has come from a range of sources. This should be disaggregated so that it is possible to determine the level of response from service users.

This feedback has been taken up by the Patient Experience Team to support the team in reviewing the information presented in the Quality Account and how the experience of service users can be highlighted further.

To support the new approach to regulation by the Care Quality Commission (CQC) the Trust will be looking at how we currently provide further opportunities to receive feedback from service users and how this information is utilised to inform the delivery and development of our services.

(iii) The commissioning by the Trust of an independent review of the Crisis Care pathway is welcomed. They request further information on the recommendations and how they will be implemented by the Trust.

The Trust commissioned the independent review in 2019 to look at further improvements needed to strengthen the adult acute mental health crisis care pathway. Since the review was completed, the Trust has opened an additional ward at Edgware Community Hospital and a further additional ward in Enfield, run in partnership with The Priory Group. This has created an additional 24 inpatient beds for the Trust.

In addition to this additional inpatient capacity, the Trust is now leading the mental health transformation work across North Central London, which will see significant expansion in more alternatives to admission, reducing the need to admit patients to a ward by providing other alternatives where this is clinically appropriate. As mentioned at the JHOSC meeting,

over the next three years, a total of £23 million in additional investment is coming to BEH, with £15 million being invested to significantly strengthened community mental health services through additional staff and additional support from local voluntary sector organisations. In addition, another £4 million is being invested in new Crisis Houses, to provide a short term alternatives to admission to a bed and a further £3 million to improve access to Child and Adolescence Mental Health Services (CAMHS).

This NCL work has now superseded, but builds on, the 2019 review and the JHOSC will be kept up to date with the overall North Central London Mental Health Transformation Programme as it progresses.

(iv) They note that the staff survey has indicated that bullying and aggression is an issue and welcome the fact that this is the focus of specific attention, with engagement taking place with staff and external assistance procured through the use of a “cultural thermometer”.

The Trust is currently developing a Just Culture as part of our major Trust-wide Inclusion Programme. This is being supported by the Kings Fund and Brap (a charity that supports equality and inclusion for ethnic minority groups).

The Inclusion Programme aims to ensure that all patients, carers and staff are treated fairly and in line with their individual needs. This is expected to positively impact on a range of important issues across the Trust, including incidents of bullying.

(v) The Committees welcome the work by the Trust to improve access to community based services. Action that has been undertaken recently included the establishment of a place of safety at the Dennis Scott Unit in Edgware, staff being located in Accident and Emergency units and establishment of a 24 hour crisis line. In addition, the trust had been appointed to run the crisis line for north central London.

As part of the significant additional investment in transforming mental health services outlined in the response to point (iii) above, the Trust’s support to local Emergency Departments at the North Middlesex University Hospital and Barnet Hospital is also being strengthened. The Trust’s mental health liaison teams at both hospitals are being strengthened further, to support local people attending EDs with a mental health condition.

The point mentioned during last year’s discussion about services at Edgware Community Hospital was about the Trust’s opening of an additional inpatient ward (as mentioned in point (iii) above, it was not a Place of Safety Suite, which, for BEH, is at Chase Farm Hospital in Enfield.

(vi) In respect of patient experience feedback and the lack of QI compliance in collaboration, it is noted that that work to address this was now being stepped up. The Committees feel that this section within the Quality Account could be simplified so it is easier for lay people to understand.

As reported above, the Trust has reduced size of the Quality Account this year and aimed to simplify the content. We will continue to aim to improve this through next year’s Quality Account and seek the advice of service users and carers in designing the content and making it more accessible.

We continue to develop our collaboration with service users and carers throughout our work in the Trust. This is being led through our new Service User Engagement and Involvement Strategy and the ongoing recruitment of experts by experience (recruitment of those who have used mental health services, or their carers). These experts will be involved as members of Trust governance committees and in projects to develop service delivery.

(vii) The low response to the Community Mental Health Survey is noted. This was a national survey and permission needs to be obtained for information from patients to be shared. Work by the Trust to improve participation is welcomed.

The response rate to this survey remains low, and it has been noted that the lowest responses are from ethnic minority groups. The Trust Lead for Equality, Diversity and Inclusion is currently reviewing this to assess how responses can be increased among these groups. The Patient Experience Team continue to focus on increasing the response rates and addressing the outcomes of the survey. The team are currently piloting a new on-line survey (the current form is in paper) and the use of reminders sent through text messages. It is hoped that this will improve the numbers and content of responses.

(viii) Further information on the reason why the interface with Haringey Council is referred to as a challenge within the Quality Account would be welcomed. It was noted that there was no section on what had gone well and what was challenging in respect of Barnet.

The Trust continues to work closely with our local authorities in all three boroughs and there are close working relationships at all levels. The experience of working together through the COVID-19 pandemic has helped to increase understanding in both directions between NHS and local authority colleagues and the increased working at borough level through the Integrated Care Partnerships has also helped to ensure effective working, which has progressed since the specific comments were made last year.

(ix) Further information would also be welcomed on the reason why there are more complaints from Haringey service users than Barnet and Enfield.

The Patient Experience Team review trends in complaints made, in order to identify themes or specific areas for development. In addition, complaints data is reviewed monthly in the Safe, Effective and Experience Group, chaired by the Chief Nurse and reported to the Trust Board Quality and Safety Committee.

Over the past year, there has been continued variation in complaints reported across the clinical divisions. Haringey reports higher complaint rates compared to other divisions, no specific rationale has been identified regarding this and there is not a specific area of concern as some variation by borough by year is expected. However, this will continue to be reviewed on a monthly basis.