

20th May 2016 NHSE Mental Health Patient Safety Improvement Working in Partnership

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Introduction background

- ECCG coordinating lead commissioner for BEHMHT. The CCG was authorised in April 2013 worked in shadow from April 2012
- Managing all elements of the contract performance and quality through CQRG, CRM and Technical meetings monthly
- BEHMHT Provider of full range of MH services including forensic MH and Enfield Community Services
- 2012/13 BEHMHT range of improvement action plans from CQC to TDA and internal trust plans
- In 2012/13 increased level of concern relating to quality

Some examples of the Journey

- Extended Round tables x3
- Enhanced monitoring older people
- Enhanced monitoring Beacon
- Demonstrated sustainable improvements over time-evidence validated further through recent 2016 CQC inspection
- 2015/16 embedded an agreed re structure of contract meetings to JQP and Technical monthly for MH bi monthly JQP for community bi monthly operational leads for community
- Enablers
- Clear work plan
- Re worked quality schedule
- New approach to CQUIN
- Trust
- Transparency
- Challenge-works both ways
- System working TDA NHSE
- Partnership collective agreement to restructure the meeting arrangements

Joint Performance and Clinical Quality Review Meetings

- Joint Performance and Clinical Quality Review (JPQ) meetings were created in recognition of the interdependent relationship quality and performance have on clinical services.
- Joint meetings provide an effective way of combining quality and performance review and for the co-production of commissioning intentions with Barnet, Enfield and Haringey Mental Health Trust (BEHMHT).
- Meeting membership is made up of commissioners (Lead and co-commissioning CCGs, NHSE & local authority) quality leads, clinicians, governance leads, patient safety leads, safeguarding leads, GPs, performance analysts, contract managers, finance leads, CSU and the TDA.
- All meetings have director level input from commissioners and the Trust.



JPQ Meeting Structure and Reporting Line

Monthly Meeting Structure

- Single agenda
- Single action tracker
- Single annual work plan
- Exception reporting
- High level activity and performance review
- Contract Technical Meeting refers topics that need Director level input
- Topics referred to JPQ that require greater scrutiny are referred for quality review at subsequent meetings
- Largest portion of the agenda dedicated to quality review and discussion
- Each month the Trust delivers a presentation on either Best Practice Guidance and Application or an in-depth 'Focus On' a given service.
- Main body of the meeting receives and discusses provider reports covering patient safety, patient experience, incidents, serious incidents, quality alerts, safeguarding, workforce, new national guidance, audit, NICE compliance, CQUINs.
- Intelligence gathered at meetings can be shared with sector Directors of Quality, commissioning where issues apply to the wider healthcare system.

CCG Reporting Line



Provider Focus On Sessions

JPQ 'Focus on' sessions allow clinical staff the opportunity to meet commissioners, discuss their service and share their own ideas for service improvement. Focus on sessions are held alternate months with presentations following a consistent format. Clinical staff are required to include theme analysis and learning as well as quantitative data. Presentations include the following topics:

- Service and workforce operational overview
- Best Practice Guidance and how this is applied
- Caseloads
- Waiting Times
- Risks
- Recommendations for commissioners to consider
- Staff feedback
- User feedback
- Safety Reporting (serious incidents, NRLS)
- Safeguarding
- Complaints
- Governance and Leadership

Further Example - Suicide Prevention Work

- **The Annual National Confidential Inquiry into Suicide and Homicide by People with Mental Illness** (NCI, July 2015), highlighted the need to focus on suicide prevention within the community as a whole rather than as professional silos.
- The report and its recommendations, along with a review of other associated publications, *Preventing Suicide in England* (2012) & *One Year On* (2014), were discussed at inaugural JPQ in July 2015.
- The meeting agreed that a sector wide approach to preventing suicide, drawing together expertise from, for example, public health, mental health trusts, commissioners, voluntary sector, GPs, police/transport police & London Ambulance was required.
- In September 2015 Enfield CCG hosted a tri-Borough suicide prevention workshop (Barnet, Enfield and Haringey) to discuss and agree cross sector/cross discipline working to enable suicide prevention.
- Local user groups have been held with voluntary sector colleagues, most recently for Enfield in April 2016, seeking views from service users and families.
- BEH MHT medical director reported on progress with actions following the latest NCI in April 2016.
- A follow up tri-Borough workshop is scheduled for 24 May 2016 to review actions so far and identify joint work streams.

QUESTIONS?