



**Report To:** Lanarkshire NHS Board

**Subject:** Forensic Services Annual Report, Mental Welfare Commission Annual Review, Scottish Government Annual Review of Progress in "Delivering for Mental Health"

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**Date:** 25<sup>th</sup> August 2010

## **1 Purpose of Report**

This compendium report has been prepared to update the NHS Board on three key performance areas within mental health services. These are:

- Forensic Services Annual Report.
- Mental Welfare Commission Annual Review.
- Mental Health Division, Scottish Government Annual Review of Progress in "Delivering for Mental Health".

## **2 Forensic Services Annual Report**

### **2.1 Background**

It is a requirement under mental health policy for the NHS Board to receive, as a minimum, an annual report on the progress being made within the Board Area in implementing and monitoring national requirements for the safe and effective management of patients within the Forensic Spectrum. The legislative framework is governed by the Mental Health Care and Treatment (Scotland) Act (2003) and The Management of Offenders Act (2005).

The legislation is supported by annual guidance issued to NHS Boards through a range of Chief Executive Letters. The most recent of these are:

- HDL 48 (2006)
- CEL 13 (2007)
- CEL 19 (2008)
- CEL 9 (2009)
- CEL 7 (2010)
- Memorandum of Procedure on Restricted Patients (SGHD 2010)

It is important to take account of all of these communications as each letter since 2007/08 builds on the comprehensive guidance issued under cover of HDL 48 (2006) and CEL 13 (2007)

## **2.2 Care Programme Approach**

### **2.2.1 CPA - Restricted Patients**

CEL 13 (2007) sets out standards for the use of CPA with specific reference to the mandatory use for restricted patients. In accordance with these standards NHS Lanarkshire have now conducted three six monthly audits of restricted patients and are in the process of extending the audit to those patients who are temporarily restricted as set out in CEL 9 (2009). Currently NHS Lanarkshire is providing care for nine patients who are on a Compulsion Order with a Restriction Order (CORO). The latest audit results for this client group have been made available to the Scottish Government and demonstrate 100% compliance against the set standards. The audit report has also been shared with the NHSL Health and Clinical Governance Committee.

The most recent Memorandum of Procedures for restricted patients was published in July 2010 and awareness sessions for nursing and medical staff are ongoing. In a recent letter reminding Board Chief Executives of their responsibilities under the Care Programme Approach the Scottish Government Health Department have included the NHS Lanarkshire Restricted Patient audit template in the Memorandum of Procedures as an exemplar of good practice.

### **2.2.2 CPA - Forensic Non Restricted**

Following the publication of the Mental Welfare Commission for Scotland report on their investigation into the care and treatment of Mr. F, the Scottish Government Health Department issued CEL 07 (2010) reminding NHS Boards that the risk assessment and audit procedures linked to CPA were not confined to restricted patients. NHS Lanarkshire has carried out a further audit of non restricted patients and are currently analysing the results. Initial results indicate positive comparisons with the restricted patient's audit in respect of the application of CPA standards.

### **2.2.3 CPA - General Mental Health**

A scoping exercise on the use of CPA across general mental health services in Lanarkshire has been undertaken in accordance with the latest Scottish Government Health Department guidance. Results are being analysed and a working group led by a Clinical Director will provide recommendations on the criteria for inclusion in CPA including the use of risk assessment and risk management tools and procedures. NHS Lanarkshire have been invited to contribute to a National debate on the use of CPA in general mental health services, this was initially scheduled for June however has been cancelled and a new date is awaited.

## **2.3 Multi Agency Public Protection Agency**

The Multi Agency Public Protection arrangements were introduced in 2007 as part of The Management of Offenders Act (2005). NHS Boards responsibilities as the responsible authority for mentally disordered offenders and their duty to co-operate with other statutory agencies for sex offenders were set out in CEL19 (2008). The main aim of MAPP is to ensure that effective multi agency information sharing and risk management was applied to offenders in the community who are assessed as posing a risk of harm to others. The Lanarkshire Community Planning Partners have fully embraced the MAPP principles and following a national review by Dr Raj Darjee, Clinical Lead for MAPP, Lanarkshire has been highlighted by the Scottish Government as an example of good practice.

## **2.4 Secure In-patient Provision**

Over the last five years the forensic estate across Scotland has changed significantly to reflect the amendments in the Mental Health Legislation which made provision for patients to appeal the level of security in which they are detained. This has resulted in the State Hospital reducing from 240 male and female beds to 140 male beds. On the rare occasions when high secure care is required for female patients this is delivered via Rampton Hospital. This shift in high secure care provision has necessitated developments at both medium and low secure care.

Rowanbank Clinic in Glasgow provides medium secure care beds for male mental illness through a regional service level agreement. The challenge of accessing beds at the time when needed is approached through collaborative working with colleagues in regional planning and clinical forums. The provision of female medium secure beds is also through Rowanbank, but on a spot purchase basis.

An agreement at a recent Chief Executive meeting means that Rowanbank will provide a national provision for medium secure beds for patients with a learning disability.

The West of Scotland Forensic Planning Group has indicated a need for a review of the forensic estate, and to include all care groups.

NHS Lanarkshire's low secure care unit in Hamilton will be complete in December resulting in the closure of the current unit in Hartwoodhill Hospital. This will increase the capacity from 11 to 15 low secure beds 2 of which will be for females.

The learning disability assessment and treatment unit at Kirklands Hospital is planned for completion in August 2010. This will have 12 beds, 3 of which will be for low secure care.

In summary in respect of low secure care provision for mental health and learning disability NHSL will be in a better position to manage locally its demand and reduce the reliance on external provision. This will improve care and if demand remains at existing levels will potentially reduce the level of out of area spend triggered by the appeals system and the closure of high secure care beds.

The use of out of area beds for forensic patients continues to be kept under close scrutiny. The current patients in out of area beds are currently being assessed for beds in the Low Secure Unit at Caird House or the two new rehabilitation and recovery units at Caird and Coathill. It is the intention to repatriate patients to these local services as soon as is practical and to have a clinical model which will be flexible and patient focussed to significantly limit out of area bed utilisation.

## **2.5 Development of a Continuous Quality Improvement Framework for Forensic Mental Health Services in Scotland**

The Forensic Network in association with NHSQIS are developing a quality framework for Forensic Services in Scotland. The aim is to use a multi-disciplinary approach to quality improvement including the sharing of good practice and supporting learning needs. Peer reviews supported by NHSQIS will review services and report to boards, areas of good practice and areas for further development. The review will focus on assessment of low secure and community forensic care standards.

## **2.6 Conclusion**

The NHS Board is asked to note:

- That the Lanarkshire Forensic Service is meeting all policy and legislative requirements for this client group. The required CPA audit has been carried out in 100% of cases and all standards have been

met. A report has gone to the Health and Clinical Governance Committee.

- The NHS Board is also asked to note that the SGHD have issued the NHS Lanarkshire Audit Tools in the Memorandum of Procedures and that the Lanarkshire Partners have also been cited by Scottish Government as an example of best practice on MAPPA system.
- The Board is also asked to call for further updates as requested.

### **3 Mental Welfare Commission (MWC) Annual Review**

#### **3.1 Background**

The Mental Welfare Commission for Scotland fulfils its statutory function through a programme of planned and unplanned visits to Mental Health Services. The Commission meets with patients, relatives, staff and advocates. During the course of 2009/10, as part of their planned programme the Commission conducted a series of themed visits on:

- Acquired brain injury and alcohol related brain injury
- Adult mental health – acute services
- Older people – acute admission services

For all visits to NHS Lanarkshire, MWC forwarded an overview report highlighting areas of good practice as well as areas where further improvements are required. These matters were followed up at the Annual Review meeting which took place in May 2010. The key issues are as set out in the paragraph below:

#### **3.2 Progress Report**

##### **3.2.1 Update on Modernisation of Lanarkshire Mental Health Services**

Feedback was given to the Commission on

- Capital Developments – Caird ,Coathill and the LD Assessment and Treatment Centre
- Revised CHP Management arrangements
- Quality improvements within the MH and LD Strategies
- Extended Crisis Services
- Psychological Therapies Review
- Eating Disorders Services
- Mental Health Collaborative and LEAN Kaizen events
- Economic situation and impact on proposed North Lanarkshire Acute Development
- Option appraisal for provision of IPCU

The MWC advised that one of the themed visits to NHS systems in 2010/11 will be to acute hospital settings to review the care of patients with dementia whilst receiving clinical care in acute specialties. Work is already underway to ensure the best possible standards of care are provided for this patient group.

##### **3.2.2 Themed Visits**

National reports from the three themed visits are to follow. The Commission highlighted some key issues which are likely to feature in the reports

- ABI/ARBD themed visit

The ABI/ARBD report will highlight issues around specialist re-assessment.

- Adult mental health acute themed visits

Variations in Nurses Holding Powers across Scotland was identified as a theme in acute wards.

Senior Charge Nurses are to carry out further awareness raising with their teams in relation to implementation and use of Nurses Holding Powers.

The Commission commented positively on the pilot currently underway to monitor and reduce observational levels on a daily basis.

They commented positively on the smoking cessation work which is underway and also around the range of therapeutic activities particularly in Monklands Hospital where they highlighted the calm and relaxed environment.

- Older people acute admission visits

Old Age themed visit noted some issues around food delivery particularly within PFI hospitals.

The Commission commented on the inappropriateness of the 5 Old Age beds within ward 19 at Hairmyres.

This concern is shared by NHS Lanarkshire and a scoping exercise is currently underway looking at the management and distribution of the inpatient estate.

### **3.2.3 CAMHS Services**

The Commission were concerned around the difficulty in admitting to the Skye House Adolescent Unit in Glasgow.

The North CHP Director is leading a West of Scotland Group looking at how best these beds can be utilized, recognising that bed numbers are not sufficient to deal with demand.

There are robust protocols in place for admissions to paediatric beds or adult mental health beds in the event of Skye House being full with every effort made to maintain children and adolescents within the community where possible.

### **3.2.4 Dungavel Detention Centre**

The Commission recently visited Dungavel Detention Centre and commented favourably on the increased psychiatric provision and formal contract arrangements with NHS Lanarkshire.

### **3.2.5 MWC Monitoring of the use of the Mental Health (Care and Treatment) (Scotland) Act 2003 and Adults with Incapacity (Scotland) Act 2000**

The Commission discussed their recent report (March 2010) and proposed to meet with representatives from NHSL and North and South Lanarkshire Councils in the summer to discuss specific statistics related to Lanarkshire activity.

## **3.3 Conclusion**

The NHS Board is asked to note the very positive reports received from the MWC over 2009/10 and that action plans to address those areas where further progress is required are in place. These include the more strategic issues of Intensive

Psychiatric Care provision and Age Specific Admissions, together with more operational changes around patients meals and use of nurse holding powers.

#### **4. Mental Health Division Annual Review**

##### **4.1 Background**

NHS Boards are required to deliver on the targets and commitments set out in the National Policy "Delivering for Mental Health". Progressively these targets and commitments are being included in the HEAT Performance Management System. This performance reporting system is supported by a minimum annual visit from the SGHD, Mental Health Division.

This years visits to NHS Lanarkshire took place on 9<sup>th</sup> November 2009 and 9<sup>th</sup> June 2010.

##### **4.2**

SGHD forward an agenda for the meeting including Performance Reports on all National Targets and initiatives. The visiting team spent the full day on the 9<sup>th</sup> June as they took the opportunity to visit the Sinclair Unit; Coathill; Glencairn Complex, Coathill and Buchanan Centre, Main Street Coatbridge.

##### **4.3 June 2010 Review**

Papers had been circulated prior to the Review Meeting responding to the specific questions posed by the Scottish Government.

- Jim Wright, General Manager, Mental Health and Learning Disabilities Services gave a brief overview around NHSL Organisational Change and an Update on Capital Developments.
- There was a presentation from the Mental Health Collaborative on progress on the Readmissions, Antidepressant Prescribing and Dementia HEAT Targets together with a separate presentation around the Suicide HEAT target and the multi agency work taking place around Towards a Mentally Flourishing Lanarkshire and Mental Health Improvement in general.
- The Review Team acknowledged a considerable level of improvement in staffing and in the scope and range of CAMHS services, particularly in relation to Tier 3 provision. They noted the ongoing difficulties in accessing inpatient adolescent services at Skye House in common with other Board areas and advised that they are to monitor the outcome of the review into the regional inpatient service closely.
- An update was given around Increasing Access to Psychological Therapies and around the continued commitment towards the national AHP mental health work stream. There was some discussion around Realising Potential the national three year plan for Allied Health Professionals which was launched shortly after the Review visit.
- Feedback was given around Forensic services and the use of CPA which will feed into the National CPA meeting planned for later in the year.

- A paper was provided outlining the commitment to local implementation of the refreshed Nursing Review and there were discussions around ongoing work to improve Mental Health Information systems.
- There was some discussion around workforce issues, particularly those being experienced by medical staff in the light of EWTD and changes to workforce planning and training.
- In response to discussions around future plans for Acute and Crisis Services, the Scottish Government acknowledged that Lanarkshire, in common with other Board areas, was reviewing inpatient services and would welcome national discussions around this.

#### **4.4 Conclusion**

A letter from Denise Coia was sent to Tim Davison, Chief Executive, NHS Lanarkshire on 7<sup>th</sup> July 2010 giving formal feedback from the visit.

The letter stated that the composition of the team, quality of discussion and excellent reports provided continues to suggest good local working arrangements and commitment to delivery of the mental health agenda.

Dr Coia commented that the visits to the developments within Coatbridge showed excellent examples of multi-agency and multi-disciplinary team work and that it was good to see at first hand the positive impact these service developments are having on client care.

The NHS Board is asked to note the positive feedback from the review.

For further information please contact:  
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