

## **Statement from Healthwatch Birmingham on Birmingham and Solihull Mental Health NHS Foundation Trust Quality Account 2018/19**

Healthwatch Birmingham welcomes the opportunity to provide our statement on the Quality Account for Birmingham and Solihull Mental Health NHS Foundation Trust. We are pleased to see the many initiatives the Trust has implemented over the year to improve patient care. In particular, two of these initiatives (Physical Observation App and the MERIT Programme) were winners at the 2019 Leading Healthcare Awards.

It is, however, disappointing that the Trust's CQC rating remains 'requires improvement' for the safety, effectiveness and well-led domains. Nonetheless, we are pleased the CQC has given the domains for caring and responsiveness a rating of good. We encourage the Trust to continue implementing the actions it has outlined in the Quality Account. These are important issues and reflect what Healthwatch Birmingham has heard from patients and members of the public (e.g. failures to take into account patients' multiple health concerns; difficulties getting in touch with care teams; inadequate support for patients; attitudes of healthcare professionals; delays in getting a CPN and frequent changes to the CPN; long waiting lists for appointments; issues with prescriptions; failure to get blood test or physical checks; and inaccessible procedures such as for changing care teams).

We also note that the CQC has rated the Health Exchange, one of the Trust's services, as 'inadequate'. Homelessness has been a key policy issue for Birmingham and the Health and Social Care Overview and Scrutiny Committee. Stakeholders working on homelessness in Birmingham have named the Health Exchange as a key asset for the implementation of the city's homelessness strategy. This service is, therefore, an important support for the homeless in Birmingham and we welcome actions being taken to improve. We particularly welcome the action to 'gain feedback and explore effective ways to act on feedback in order to improve patient satisfaction'. We note that the Trust has already implemented recommended changes and the CQC has re-inspected Health Exchange. We believe one way to demonstrate the use of patient feedback would be to engage with patients to find out the impact of the changes that have been implemented and determine how well they meet their needs. However, Healthwatch Birmingham believes that having a structured process for engaging people would be ideal (i.e. through a patient and public involvement [PPI] strategy).

### **Patient and Public Involvement**

It is evident in the Quality Account that the Trust is responsive to the needs of patients. According to the Service User Survey, there has been an improvement in how the Trust works with service users and involves families'. The Quality Account does demonstrate that the Trust uses various methods to engage with patients, service users and carers. For instance, through the 'recovery for all' training, patients and carers can articulate what recovery means to them, set goals and select the support they need. We also welcome the establishment of a Family and Carer Pathway Group, which has contributed to various activities within the Trust. We also note that the Trust is gathering feedback from spaces where seldom heard or hard to reach groups might be, such as local charities, the Somali group, and mosques. This is important to ensure that the views of the diverse population the Trust serves are heard and reflected in changes and improvement. We look forward to reading about the impact of these initiatives in the 2019/20 Quality Account.

It is positive to read how patient feedback and experiences are used in decision-making across the Trust. In particular that the Family and Carer Pathway Group has contributed to

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the development of a carer assessment tool, to the wording on the Trust's complaints letter, to the serious investigation letters to families, and to the review of the carers strategy. We also note that, based on an inpatient survey and the Friends and Family Test, the Trust is planning to increase the number of activities available to inpatients (such as the outdoor gym). We welcome that the Quality Improvement Projects for 2019/20 will include activities to improve physical health indicators and subsequent care planning. We look forward to reading about the impact of this on the level of activities for inpatients in the 2019/20 Quality Account.

Regarding the Friends and Family Test (FFT) scores, we note that 90% of patients would recommend the Trust to their family and friends. On the other hand, the Staff Friends and Family Test indicates that only 53.1% would recommend the Trust as a provider of care to their family or friends. This is 36.9% lower than the patient FFT scores. We recommend that the Trust investigates this difference further and use the findings to inform service improvement. We would like to read in the 2019/20 Quality Account the actions that have been developed in response to staff feedback and involvement.

The work the Service User Engagement Team is carrying out is commendable and will help the Trust to develop the structures needed for the effective use of feedback and experiences. We note the development of a feedback tool that records all patient experiences and is in a format that enables comparison with FFT, complaints and PALs data. Also, a dashboard that is available to all Clinical Governance Committees to track trends and quantities of all feedback. We particularly welcome that the 360-degree feedback tool is continuing to enable managers to give feedback on the effectiveness of patient experience on their wards to ensure buy-in. We would have liked to read in this Quality Account how this has improved staff buy-in across the Trust in relation to the use of feedback and patient experiences.

Healthwatch Birmingham believes that having a staff team that understands the Trust's strategic approach for patient experience is important for developing a shared vision around the use of patient experience and feedback. We believe that Healthwatch Birmingham's Quality Standard for Patient and Public Involvement (PPI) has some questions that might help the Trust to develop thinking around staff buy-in.

Healthwatch Birmingham still believes that the Trust would benefit from developing a Patient Public Involvement (PPI) Strategy that would ensure a shared vision across the Trust services. We also believe that a strategy would support the achievement of one of the Trust's 2019/20 Quality Priorities: *'Promoting recovery, co-production and family, carer and service user involvement'*. We note that one of the enablers for this priority is to *'scope all opportunities (existing and future) for co-production and family, carer and service user involvement from ward to board'*. A PPI strategy would outline:

- Why the Trust is listening
- What the Trust is listening for
- How the Trust listens
- Who the Trust wants to hear from (including 'seldom-heard' groups)
- How the Trust will use what it hears
- Clear arrangements for collating feedback and experience.

Over the past year, Healthwatch Birmingham has worked with clinical commissioning groups (CCGs) and Trusts to benchmark their PPI processes using Healthwatch Birmingham's Quality Standard. We have had meetings with Birmingham and Solihull Mental Health Trust on this

and recognise the work that the Trust is carrying out regarding patient experience and feedback. We hope to continue to support the Trusts PPI activities in 2019/20.

## **Trust Performance 2018/2019**

### **Quality Priorities 2018/19**

We are pleased that the Trust is moving in the right direction regarding suicide prevention such that the benchmarking position has improved from 9.2 suicides per 100,000 population in the first year of implementation of the strategy to 8.0 suicides per 100,000 population in the second year. We would like to see a more significant improvement in 2019/20. Equally, prone restraints have reduced by 14% on 2017 figures. This is welcome as the Trust had one of the highest levels of prone restraints in the country. We look forward to reading further improvements in the coming year. We welcome that the Trust's Positive and Proactive Care Expert Panel have undertaken work to understand the experience of exclusion and have engaged staff and patients to identify improvements. We would like to read on the impact of this in the 2019/20 Quality Account.

We note that the Trust has not achieved the goal to ensure 90% of inpatients get a cardio metabolic assessment and 75% for community patients. However, we are encouraged by the range of physical health opportunities and activities for inpatients such as an outdoor gym and the use of pedometers for all patients to measure the level of activity. We would like to read of an increase in these activities across the Trust's different services in the 2019/20 Quality Account. We also ask the Trust to consider social prescribing community patients to community-based activities such as leisure centres, local park run or walking groups.

We note that the Trust continues to face challenges in addressing falls, which have increased from two in 2017/18 to seven in 2018/19. We welcome the Trust's recognition for a new approach to addressing this issue and hence the inclusion of a qualitative measure to better understand individuals' needs. We would like to read in the 2019/20 Quality Account the impact of the use of falls champions, the use of assistive technology if implemented, and the increase of staff at times when there are more cases of falls.

### **Learning from Audits**

We note the number of national and local clinical audits the Trust has taken part in 2018/19. We welcome that the Trust has taken the time to develop actions to address the findings of the audits reviews. We particularly welcome plans around improving the number of debriefs carried out following an episode of rapid tranquilisation, embedding the use of SafeWards to reduce violence; and activities to ensure adherence to the Mental Health Act when prescribing medication. We would like to read in the 2019/20 Quality Account, the impact of these actions on patients' safety.

### **Patient Experience of Community Mental Health Services**

We are pleased that the Trust has a score of 7.1, which is above the national average of 6.8. We note the changes planned and would like to read in the 2019/20 Quality Account the impact of Trust-wide recovery strategy; increased publicity for the crisis line; recovery training, and distribution of Buzz guide mini directory to all services. Healthwatch Birmingham would like to request a copy of the directory for our information and signposting line. We receive calls through our information and signposting line from patients of the Trust and this would be a useful tool for us.

### **Patient Safety Incidents**

The Trust has only reported on data from April to September 2018. We note that the total incidents reported during this time were 5233, and there were forty-four patient safety incidents per 1000 bed days, and twenty-two resulted in severe harm or death (representing 0.4%). We ask the Trust to update this data to cover the reporting period.

The Trust states that 636 patients died between April 2018 and March 2019. Thirty-eight deaths were subjected to a review and twenty-four to an investigation. Three of these deaths were identified as unavoidable and resulting from problems with care. We note the emerging themes from these three cases, which include: lack of professional curiosity in risk assessment, gaps in service due to communication in interagency working, involving family and carers in the assessment process, involving medics at an earlier point and access to out of hour's medics, and the management of cancelled appointments. We would like to read in the 2019/20 Quality Account, how these themes have been acted on and learning shared across the Trust.

### **National Mental Health Indicators**

We are pleased that the Trust has performed above average in improving access to psychological therapies and people experiencing a first episode of psychosis treated with a NICE approved care package within two weeks of referral. However, it is disappointing that out of area placements for adult mental health services average bed days are increasing from 138 in 2017/18 to 566.75 in 2018/19.

### **PLACE Results**

We are pleased that the Trust is performing above average in all categories (cleanliness; food and hydration; privacy, dignity and wellbeing; condition, appearance and maintenance; dementia (environment); and disability (environment)). We note that the Trust is involved in the PLACE Assessment process review with NHS Improvement. Healthwatch Birmingham recently published a report into people's experiences in NHS Hospital waiting rooms. The focus of the report is on people's experiences of waiting times, the environment, communication, accessibility, and dignity and respect. We believe that the findings and recommendations in this report would be useful to the Trust and feed into this review. In particular, the report findings and recommendation could inform the review into the format of the paper work, the questions, and many other aspects of the assessments. The report can be found here: <http://bit.ly/2H1ZKMD>

### **The Trusts Priorities for 2019/20**

Healthwatch Birmingham has taken note of the Trust's priorities for 2019/20 and these reflect the experiences people tell us. We are pleased that the priorities have been developed following consultation with senior clinicians across the Trust and the council of governors. In addition, there has also been input from patient surveys, learning from serious incidents, staff survey, patient feedback and CQC inspections. We look forward to collaborating with the Trust on these priorities over the year.



**Andy Cave**  
CEO  
Healthwatch Birmingham