

TEES VALLEY JOINT HEALTH SCRUTINY COMMITTEE

Wednesday, 8 June 2022

PRESENT – Councillors Layton, Creevy, Falconer, Hellaoui, Smith, Watts, Cunningham, Hall and Weston

APOLOGIES – Councillors Cook, Davison and Gamble

ABSENT – Councillor Dan Rees

ALSO IN ATTENDANCE – David Gallagher (NHS Tees Valley Clinical Commissioning Group), Brent Kilmurray (Tees, Esk and Wear Valley NHS Foundation Trust), Paul Murphy (Tees, Esk and Wear Valley NHS Foundation Trust), Ann Bridges (Tees, Esk and Wear Valleys NHS Foundation Trust), Sarah Dexter-Smith (Tees, Esk and Wear Valley NHS Foundation Trust), Patrick Scott (Tees, Esk and Wear Valley NHS Foundation Trust), Dominic Gardner (Tees, Esk and Wear Valley NHS Foundation Trust), Helen Day (Tees, Esk and Wear Valley NHS Foundation Trust), Claire Bainbridge (Tees, Esk and Wear Valley NHS Foundation Trust), Mark Speight (Tees, Esk and Wear Valley NHS Foundation Trust), Jennifer Illingworth (Tees, Esk and Wear Valley NHS Foundation Trust), Cathy Byard (Tees, Esk and Wear Valley NHS Foundation Trust), James Graham (Tees, Esk and Wear Valley NHS Foundation Trust), Avril Lowery (Tees, Esk and Wear Valley NHS Foundation Trust), Dr Chris Lanigan (Tees, Esk and Wear Valleys NHS Foundation Trust), Ann McCoy (Tees, Esk and Wear Valley NHS Foundation Trust) and Brian Cranna (CQC)

OFFICERS IN ATTENDANCE – Hannah Miller (Democratic Officer), Joan Stevens (Statutory Scrutiny Manager), Scott Bonner (Democratic Services Officer), Alison Pearson (Governance Manager) and Gary Woods (Scrutiny Officer)

1 APPOINTMENT OF CHAIR FOR THE PURPOSE OF THE MEETING

RESOLVED – That Councillor Layton be appointed as Chair for the purpose of the meeting.

2 DECLARATIONS OF INTEREST

There were no declarations of interest reported at the meeting.

3 MINUTES OF THE MEETING HELD ON 18 MARCH 2022

Submitted – The Minutes (previously circulated) of the meeting of this Joint Scrutiny Committee held on 18 March 2022.

Pursuant to Minute 23, Members were informed that Chris Morton had been appointed Lived Experience Director for Durham Tees Valley and Forensics Care Group and Charles Nosiri had been appointed Lived Experience Director for North Yorkshire and Selby Care Group.

Reference was made to Stockton Borough Council's decision to call for a public inquiry into Tees, Esk and Wear Valley NHS Foundation Trust (TEWV) and the Lead Governor, TEWV

reassured the committee that the Council of Governors had regularly requested evidence as to how the Trust were working to address issues identified and that a special meeting of the Council of Governors was held to discuss how the non-executive directors were held to account.

RESOLVED – That the Minutes of the meeting of this Joint Scrutiny Committee held on 18 March 2022 be approved as a correct record.

4 PROTOCOL FOR THE TEES VALLEY JOINT HEALTH SCRUTINY COMMITTEE

RESOLVED – That, with amendment of the CCG to the ICB, the Protocol for the Tees Valley Joint Health Scrutiny Committee be agreed.

5 TEES, ESK AND WEAR VALLEY NHS FOUNDATION TRUST - QUALITY ACCOUNT 2021/2022

The Associate Director of Strategic Planning and Programmes and Director of Quality Governance, Tees, Esk and Wear Valley NHS Foundation Trust gave a presentation (previously circulated) presenting the Quality Account 2021/22 including Quality Improvement priorities planned for 2022/23.

It was reported that of the nine Quality Metrics, four were reported as red by the Trust at the end of Quarter 4 2021/2022; details were provided for those missed targets and the actions being taken by the Trust to address these; whilst four metrics were reported as red, two were close to meeting their target; and that the Trust deliberately set stretching targets.

Reference was made to the Quality Metrics for 2022/23; Members noted that a review of the suite of metrics was underway to align them more closely with the Trusts new quality journey and the improvement priorities.

The Quality Account Improvement Priorities for 2021/22 were outlined and it was reported that of the 46 actions 30 had been achieved or were on track; the reasons for delays in implementation of the actions, both covid and non-covid, were outlined and details were provided for the 2022/23 improvement priorities and associated actions.

Discussion ensued regarding care planning and implementation of the dialogue system; and particular concern was raised regarding the high number of incidents of physical intervention/restraints per 1000 occupied bed days with 37.66 against the Trust target of 19.25. Members were advised that the incidents related to a small number of patients; details were provided of the work programme that was in place to address this issue; and Members were assured that this was a key workstream for the Trust.

Following a question in relation to benchmarking, Members requested the inclusion of comparative data in future Quality Account update reports in order to provide context for Members.

Discussion also ensued regarding recording of incidents involving staff; learning from best practice and collaborative working; and following a question regarding training of agency staff, Members were assured that staff were employed from agencies on the NHS framework; that as part of the framework the agency staff were required to have received

statutory and mandatory training; and bespoke training would be offered for any specific training requirements prior to starting to work on the ward.

Members requested regular briefings on various aspects reported on in the Quality Accounts at future meetings of the Joint Committee, with a focus on topics based on the priorities/concerns at that given time; and it was suggested that an update be provided on the clinical and quality journey at the next meeting of this Committee.

RESOLVED – That the Tees, Esk and Wear Valley NHS Foundation Trust Quality Account 2021/22 be noted and the Committee's comments be submitted as part of TEWV's consultation on the Quality Account.

6 TEES, ESK AND WEAR VALLEY NHS FOUNDATION TRUST - CQC INSPECTION UPDATE

The Chief Executive submitted a report (previously circulated) providing Members with a general update and progress in relation to the CQC inspection report, since the last meeting of the Joint Committee held on 14 March 2022; and outlining the Trusts response to questions raised by this Committee. A presentation accompanied the report.

It was reported that the Trust had implemented a new governance and organisational structure on 1 April 2022, developed following feedback from staff, patients, families, carers, governors and partners; that two Care Groups had been established, Durham, Tees Valley and Forensic Care Group and North Yorkshire, York and Selby Care Group, enabling the Trust to be better aligned to the two Integrated Care System; and that two lived experience directors had been appointed for each care group. Reference was made to the role of the lived experience directors and the recruitment of additional peer workers across the Trusts services.

It was also reported that a new integrated performance Board Assurance Framework had been introduced; work was being undertaken to improve risk management, including establishment of risk groups at executive and care group levels and improved reporting to the Board and its committees through a new risk escalation framework. Members were informed that the revised governance arrangements had been developed to strengthen the Trusts leadership structure and capacity.

The submitted report stated that the Trust had an overarching People plan aligned the Board Assurance Framework, built around three key strands of recruitment and retention, staff wellbeing and experience, and culture.

Details were provided of recruitment and retention for the Trust; vacancy rates were currently 7-8 per cent; the number of employees had increased by 5 per cent in the previous 18 months; and the time taken to send conditional offers and commence pre-employment checks had vastly improved from 8+ weeks to 2 weeks following the introduction of a digital pre-employment checking system. Members also noted that staff absence remained a challenge, however absence rates had remained lower than neighbouring Trusts over the past two months.

In relation to staff wellbeing and experience it was reported that the Trusts People and

Culture Directorate was being restructured to increase the focus on workforce planning, health and wellbeing and staff engagement; and the work undertaken to improve staff wellbeing was outlined. Reference was made culture and staff feedback; it was reported the Collective leadership model had been made clearer to ensure that responsibility and ownership was transparent, this included increased clinical leadership and the appointment of two full time Lived Experience Directors; four staff networks were in place across the Trust; and a range of sessions were in place to enable staff to talk with each other and share ideas. The trust's response to the National Pulse Survey Quarter 1 2022 was outlined and members noted the response rate of 29 per cent which was second highest in the North East and North Cumbria region.

Reference was made to the CQC Action Plan and progress made within Secure Inpatient Services (SIS) and CAMHS. The key areas of focus for SIS were outlined and details were provided of the work undertaken in relation to staffing, which included review of staffing in three formal meetings per day; introduction of a Healthcare Assistant council, ward improvement groups and fundamental standards group; and face to face two day inductions for new staff. Members noted that training compliance for safeguarding level 3 was 95.98 per cent; and that a member of the corporate safeguarding team was now based within SIS offering direct support, supervision and involvement in clinical care.

In relation to governance it was reported that a new model of care and professional practice had been launched; there were increased staff wellbeing activities and a SIS wellbeing group launched; and the policy in relation to the use of mobile phones by staff within the perimeter was being reviewed and a 'safe area' where staff can use electronic devices was being developed.

Details were provided of the key areas of the work programme for children and young people's services; the Keeping in Touch (KIT) process which had been introduced, was monitored daily and 97 per cent of children on the waiting list had KIT contact; and the Trust were recruiting to alternative roles to meet the increase in demand.

It was reported that the Trust had moved to a nationally mandated framework, i-THRIVE, a whole system and evidenced-based approach in supporting families with their emotional wellbeing and mental health needs; the key components of the framework were outlined and it was noted the framework draws a clear distinction between treatment and support. Members were advised that an internal restructure of CAMHS was undertaken to align with i-THRIVE; and that the Mental Health Support Teams in schools and voluntary community sector providers had seen approximately 1,500 children and young people last year in the wider system, who would have historically come into the trust. Members noted that the mental health support in schools was an anticipated coverage of 50 per cent by the end of 2022/23.

Discussion ensued regarding the leisure activities and education for service users; concerns in relation to recruitment of registered nurses; and Members requested further information regarding the Lived Experience roles.

Following a question regarding children and young people, Members were advised that there had been an increase in demand for services following Covid, but this was at a lower level; and following concerns regarding wait times in relation to an autism diagnosis, Members

were assured that there was a bubble of support for those on a waiting list and that wait times were comparable to national benchmarks. Members requested an update on CAMHS at a future meeting.

It was noted that the CQC continued to monitor the Trust.

RESOLVED – (a) That the thanks be extended to Tees, Esk and Wear Valley NHS Foundation Trust for their informative update.

(b) That updates be provided at a future meeting on the Lived Experience roles and CAMHS.

7 WORK PROGRAMME

RESOLVED – That the work programme be deferred to the next meeting of this Joint Committee.