

Local Members Interest
n/a

Healthy Staffordshire Select Committee - Monday 28 October 2019

Midlands Partnership NHS Foundation Trust: merger and quality accounts

1. Recommendation

That the Healthy Staffordshire Select Committee consider and comment on the content of the report.

Report of the Midlands Partnership NHS Foundation Trust

Summary

2. What is the Select Committee being asked to do and why?

The Committee is being asked to receive and provide views on the report prepared by Midlands Partnership NHS Foundation Trust.

Report

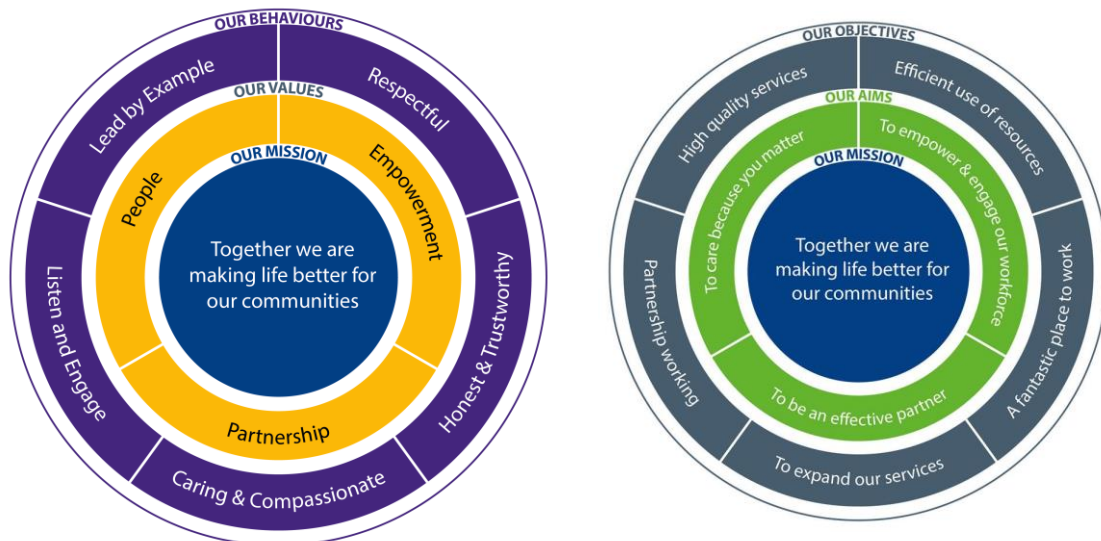
3. Background

3.1. The report is in two parts. The first provides an update on the creation of the Trust, following the merger between Staffordshire and Stoke on Trent Partnership NHS Trust and South Staffordshire and Shropshire Healthcare NHS Foundation Trust. The second clarifies two issues raised by the committee when they considered the draft quality accounts.

4. The creation of Midlands Partnership NHS Foundation Trust

4.1. Midlands Partnership NHS Foundation Trust was created on 1st June 2018, as a result of a merger between Staffordshire and Stoke on Trent Partnership NHS Trust and South Staffordshire and Shropshire Healthcare NHS Foundation Trust. The new Trust employs over 8,000 people and has a budget in excess of £400m. It provides mental health and learning disability services in South Staffordshire and Shropshire and Telford & Wrekin, community health services in Staffordshire and Stoke-on-Trent and adult social care in Staffordshire. We also have a national footprint with contracts that include provision of military health services, specialist drug and alcohol services and healthcare in prisons.

4.2. We engaged staff and stakeholders on the development of our strategic framework. We have one mission, together making life better for our communities. How we will do that is determined by three values and five behaviours. What we will deliver is set out in our aims and objectives.



4.3. Corporately, we use three key methodologies to ensure we continuously improve our offer to our communities.

- a. For staff engagement we use the nationally-recognised Listening into Action (LiA).
- b. Our approach to patient experience is described in our Involvement for Impact Framework. This incorporates the national 4Pi standards developed by the National Service User Network and the National Involvement Partnership (NIP). Principles, purpose, presence, process and impact.
- c. These are both underpinned by quality improvement tools and techniques taken from the Virginia Mason Production System. We deploy Daily Lean Management across the organisation and staff and patients engage in Kaizen events to make significant improvements to services. During our Rapid Process Improvement Workshops, teams input into several weeks of real-time data collection, during which existing processes are observed and measured. This is followed by a week-long workshop of change activity, undertaken by the staff who work on that process and patients with experience, with their ideas shaping the future. Several months of formal follow-up ensure changes are sustained.

4.4. We have undergone our first inspection by the Care Quality Commission, where we retained our Good rating overall. This was a significant achievement for an organisation that was not even a year old when the inspectors arrived.

4.5. We have received many awards in our first year, the highlight being the only organisation to have been shortlisted for seven Health Service Journal (HSJ) awards. We will learn the outcome at the prestigious award ceremony on 6th November. The success reflects the range of services that makes MPFT different

- a. Health and Local Government Partnership of the Year: Community Managed Libraries Partnership with Staffordshire County Council

- b. Community or Primary Care Service Redesign: Lichfield Staying Well pathway - supporting frail patients to live and age well
 - c. Digitising Patient Services Initiative: digitally empowering staff to deliver a fully integrated care record
 - d. Freedom to Speak Up Organisation of the Year
 - e. Mental Health Provider of the Year
 - f. Military and Civilian Health Partnership Award: Joining Forces Network
 - g. Primary Care Innovation of the Year: Telford and Wrekin innovatively supporting the mental wellbeing of patients with musculoskeletal conditions.
- 4.6. The proposals for the new organisation were set out in a Post Transaction Implementation Plan (PTIP), which was reviewed at 100 days; 6 months; and 12 months.
- 4.7. There were 50 projects in the Post Transaction Implementation Plan. In terms of project delivery, all of them have either been closed or transferred into one of the formal Programme Management Office (PMO) programmes as part of business as usual. All projects, deliverables, risks and benefits that were a part of the PTIP have been logged and tracked with a full audit trail.
- 4.8. In the PTIP, we stated that our approach to the integration of services would be to allow the benefits of integration to emerge, taking into account the national evidence base whilst ensuring we take account of local issues.
- 4.9. The lifetime of the benefit realisation process is two years. Our benefits register is a live document; many of the clinical synergies and benefits will continue to be identified and defined.
- 4.10. NHS Improvement (NHSI) seeks assurance that there is a robust and comprehensive plan for delivery of the transaction, including integration and realisation of benefits.
- 4.11. During 2019, internal auditors RSM undertook an audit of the PTIP. The final rating applied by the auditors was the highest level of assurance possible, stating that 'the Board can take substantial assurance that the controls upon which the organisation relies to manage the identified risk are suitably designed, consistently applied and operating effectively.'

5. Update on the quality accounts

5.1. Inappropriate out of area placements for adults in mental health services

- 5.1.1. The draft quality accounts included data relating to inappropriate out of area placements. This data related to the Trust as a whole. People funded by NHS Shropshire and Telford & Wrekin make up the majority of the quoted figure as the area does not have a Psychiatric Intensive Care Unit.
- 5.1.2. The out of area data for 2019/2020 (April – September) shows that for people funded by NHS commissioners in south Staffordshire, MPFT did not need to place adult acute patients out of area due to lack of bed availability.
- 5.1.3. MPFT placed women needing psychiatric intensive care out of area due to there not being a female Psychiatric Intensive Care Unit in the county. The

number relates to the number of days during the period April – September 2019.

NHS Cannock Chase CCG	21
NHS East Staffordshire CCG	0
NHS South East Staffordshire and Seisdon Peninsula CCG	0
NHS Stafford and Surrounds CCG	26

5.2. Low level incidents

- 5.2.1. In the draft quality accounts, the National Reporting and Learning System (NRLS) data showed the degree of harm from low level incidents being higher than all community trusts. The committee asked for clarification about what this data meant for patients.
- 5.2.2. The reported NRLS data is based on the degree of harm that is identified within the patient safety incident report completed by the staff member at the time of the incident. The reported NRLS category of low harm will capture any unexpected or unintended incident that required extra observation or minor treatment and caused minimal harm to one or more persons.
- 5.2.3. The data under consideration related to community health services and will capture incidents under tissue viability. Tissue Viability will include conditions such as a skin tear, moisture wound or ulceration and will be reported by the team when they are visiting patients.
- 5.2.4. The Trust has a positive reporting culture which is reflected in the levels of incidents being reported when compared to other organisations. This reporting culture ensures that lessons are learnt and shared; promoting a safety culture within the Trust.

6. Link to Strategic Plan

Not applicable

7. Link to Other Overview and Scrutiny Activity

- 7.1. The committee has the opportunity to comment on the quality accounts each year.

8. Community Impact

Not applicable

List of Background Documents/Appendices:

The full report into the first year of MPFT was presented to our public board meeting in September:

https://www.mpft.nhs.uk/application/files/6115/6931/0403/MPFT_Trust_Board_Papers_20190926.pdf

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