

## **HEALTH & SOCIAL CARE PARTNERSHIPS - HOSTED SERVICES OVERVIEW**

**NAME OF SERVICE: Mental Health and Learning Disability Inpatient and Specialist Services.**

**HOST HSCP: Aberdeen City**

### **SERVICE OVERVIEW**

*Please provide a brief overview of the service.*

Royal Cornhill Hospital (RCH) is an in-patient Mental Health and Learning Disability service organised to ensure that those requiring longer term assessment and care, for example patients with dementia, are cared for as close to home as possible with units based in a number of community hospital sites.

Specialist Acute Mental Health assessment units are located at RCH and at Dr Gray's Hospital (DGH) in Elgin with all other specialist in patient services, for example Forensic Psychiatry and those with severe Learning Disabilities provided at RCH.

In addition to the hospital-based services, two in-patient units exist at Polmuir Road and Great Western Lodge in Aberdeen City to provide stepped rehabilitation. The hospital provides services for the whole of Grampian, Orkney, Shetland, and the Ministry of Defence and have a regional Eating Disorders Unit (Eden Unit) serving the North of Scotland.

The disposition and function of all in-patient Mental Health Units is summarised in Figure 1 and 1a below. Whilst the wards contained in Figure 1 do not form part of the Hosted Service, they do form part of the pathway for patients who have been admitted to Royal Cornhill Hospital. Patients may go to one of these Aberdeenshire Units if they live close by, to ensure patient centred care is delivered close to home.

**Figure 1 NHS Grampian In-Patient Mental Health services November 2022**

Location	Ward	No. of Beds	Type of service
Seafield Hospital Buckie	Muirton	8	Dementia assessment
Fraserburgh Hospital	Brucklay	12	Dementia assessment
Bennachie View Care Home, Inverurie	Ashcroft	10	Dementia assessment
Glen O'Dee Hospital, Banchory	Scolty	12	Dementia assessment
Dr Gray's Hospital, Elgin	Ward 4	18	Acute Mental Health Assessment

**Figure 1a NHS Grampian In-Patient Mental Health services November 2022**

Location	Ward	No. of Beds	Type of service
RCH, Aberdeen	Dunnottar	21	Adult Mental Health Admission Ward
RCH, Aberdeen	Fraser	21	Adult Mental Health Admission Ward
RCH, Aberdeen	Huntly	21	Adult Mental Health Admission Ward
RCH, Aberdeen	Fyvie	21	Older Adult/Adult Mental Health Admission Ward
RCH, Aberdeen	Drum	21	Older Adult - Functional
RCH, Aberdeen	Skene	17	Older Adult - Dementia
RCH, Aberdeen	Brodie	10	Acquired Brain Injury Unit
RCH, Aberdeen	Corgarff	16	Rehabilitation
RCH, Aberdeen	Strathbeg	8	Learning Disability – close supervision unit (Forensic)
RCH, Aberdeen	Loirston	5	Learning Disability - admission

RCH, Aberdeen	Eden	10	Eating Disorders Unit
RCH, Aberdeen	Blair Unit	8	Intensive Psychiatric Care Unit
RCH, Aberdeen	Blair Unit	8	Low Secure Forensic Acute
RCH, Aberdeen	Blair Unit	16	Low Secure Forensic Rehabilitation
RCH, Aberdeen	Muick	21	Older Adult Ward
RCH Aberdeen	Davan	21	Older Adult Ward
Great Western Lodge		8	Rehabilitation Forensic Pathway
Polmuir Road		10	Rehabilitation – Adult Mental Health Pathway (5x2 bedroom flats)

## ACTIVITY

### Child and Adolescent Mental Health Service (CAMHS)

It has been a very successful year for our CAMHS service with the following work being progressed:

- CAMHS Grampian continues to meet the 90% Scottish National Waiting Time Standard
- Roll out of Enhanced Psychology Practitioner posts National Education for Scotland (NES) funded, also in Adult Mental Health to be aligned with early intervention within the three Health and Social Care Partnerships.
- Test of change site for two Silver cloud Cognitive Behavioural Therapist (CBT) programmes for those patients who may not need to be seen by CAMHS or who are waiting.
- Roll out of Trakcare to enhance reporting on waiting times and in preparation for electronic patient record.
- Creation of Dialectical behaviour therapy (DBT) team and roll out of DBT training.
- Roll out of Distress Brief Interventions (DBI) in particular areas.
- Therapeutic garden development at Links Unit
- Hosted the CAMHS Connection event which was a multi-agency networking event.
- Workforce wellbeing initiatives
- Brief Behavioural Activation pilot for people waiting to be seen by CAMHS.
- Roll out of Functional Assessment of the Care Environment (FACE) Caras risk assessment tool.
- Providing Multi-agency training - opening up our (Continued Professional Development) CPD programme to our partners.
- Part of the Health and Wellbeing collaborative - Aberdeen City

- Joint posts with Local Authority (FitLike Hubs, Psychology posts in Shire for 'The Promise').
- Social Work student placements embedded within CAMHS - pilot of this.
- Neurodevelopmental test of change in Aberdeen City, which is developing innovative solutions to accessing Neurodevelopmental assessments and diagnosis.
- Pilot for VCreate, which is secure video technology that connects patients/families and clinical teams for improved diagnostic management and enhanced family-focused care.
- Creation of a CAMHS Grampian Website

### **Transformation**

Transformation work has commenced again following a delay due to the Covid-19 response and subsequent remobilisation. The work will be done in line with the Grampian Wide Strategic Framework for a future proof, Sustainable Mental Health and Learning Disability Service (April 2020-April 2025) document. The first workshop with a range of stakeholders present was held on the 5th December with the rest planned for early 2023 looking at what the priorities are for the Mental Health and Learning Disability Service as a whole and how change can be facilitated.

### **Ligature Reduction Work**

In June 2017, following an incident at RCH and a subsequent inspection visit, the HSE issued NHS Grampian with an improvement notice which stipulated: "You have failed to ensure that the risks to the safety of patients receiving care at RCH who have been assessed as being at risk of self-harm or suicide have been reduced to as low as reasonably practicable in that you have failed to remove or adequately control environmental ligature risks within the private and communal areas of the wards. The work on the six wards at RCH is now substantially complete with occupation of the final two wards delayed due to a legacy water quality issue. Remedial work that was anticipated would sort the issue, has failed to do that and the service is unable to open the wards as anticipated. Work is ongoing to identify further solutions.

In May 2019, the HSE issued a further Notice of Contravention requiring the Board to demonstrate action to remove potential ligature points from other inpatient areas of accommodation where there is the potential of high-risk patients being accommodated. Accordingly, the Board approved a further programme of non-invasive ligature reduction measures in the Intensive Psychiatric Care Unit, Crathes, Drum, Bracken, Muick, Skene, Eden and Forensic Acute Wards. The work included replacement of beds, with the bespoke designed ligature reduction beds, replacement of hardware, e.g., door handles, locks, lamps, vents and other fittings with ligature reduction products and the sealing of frames, light switches, mirrors etc. with anti-pick sealant. This programme completed in March 2022.

The programme explained above has required £16m of investment to date.

Work has been completed on the final 2 wards; however, the service has been unable to open these wards following IP&C advice. This is due to water issues i.e., raised TVC's (Total Variable Counts) and water temperatures.

#### **Ward 4 Dr Gray's Hospital**

A formal programme governance structure has now been agreed to progress the ligature reduction works for Ward 4 at Dr Gray's Hospital, the remaining high risk ligature environment. A service solution to vacate the facility is still pending, and there is now sufficient confidence that a workable solution can be achieved and that a formal project governance structure is now in place with a view to preparing a business case for consideration and approval by the Board in the near future. There are obvious dependencies between this project and the planned MRI development at Dr Gray's Hospital and the programme management structure has been created to ensure the two projects are properly integrated.

#### **Scolty Ward**

RCH has been under increased pressure due to the closure of Scolty Ward for operational reasons. Scolty Ward is a 12 bedded Dementia Unit located in Glen O' Dee Hospital and does not form part of the Hosted service although it does form part of a pathway for the Older Adult patients who have a diagnosis of dementia and who may have been/or are an inpatient in Royal Cornhill Hospital. This ward was closed in October 22 for at least 6 months, with some of the patients moving to Morven Ward. Patients with more complex needs have been absorbed into the other 2 dementia units in Aberdeenshire, however this is also creating additional pressures on the Royal Cornhill Site.

### **CHALLENGES**

#### **Flow and Acuity**

We have seen an increase in patient acuity with around 60% of our patients detained under the Mental Health Act. This has been due to a number of factors; lockdowns due to Covid-19 pandemic saw people isolated and not seeking support with mental health issues, the community teams supporting unwell patients out in the community as there is no capacity in the hospital to admit in a timely fashion and the change in the way clinicians worked i.e., no face-to-face appointments has been challenging for a variety of patients.

This has led to longer patient stays with our average length of stay 34.8 days in our acute adult admitting wards and 69.4 days in our Older Adult Wards. This gives us challenges in RCH regarding flow into the hospital, but it also causes challenge for colleagues in the community who cannot admit patients in a timely manner.

## **Workforce**

RCH continues to have significant workforce challenges in regard to the recruitment and retention of registered staff; Nursing, AHP's and Medical. Appreciating the challenging nature of the work means that the service ensures there is a functioning Staff Partnership meeting every month and a Healthy Working lives group that meets monthly and highlights initiatives staff may want to take part in to improve wellbeing at work. For example, encouraging staff to take a walk round the site at lunchtime using one of the recognised routes.

**Nursing:** We have recently had our new graduate nurses' start and the NGNs were able to gain employment in the areas they selected. However, this was challenging this year by many students having to make up training time due to the pandemic interfering with their training. This meant that some failed exams or the course. Projected workforce plans had to be amended due to this.

A positive was the upgrade of the Band 2 HCSW to Band 3 due to the level of training specifically PMVA. It is hoped that this may help sustain the HCSW workforce, which is difficult to maintain, and we are with the service currently seeing a lack of suitable candidates.

A return to practice advert for Mental Health and Learning Disability Service has attracted some applicants, unfortunately none to the inpatient services as yet. Exploration of the Open University route into Mental Health Nursing is being encouraged for staff who would like to apply but do not have the academic grades for RGU.

**Medical:** In 2021 Grampian Mental Health and LD services launched the first ever sponsored CESR (Certificate of Eligibility for Specialist Registration) Fellowship in Scotland. The programme provides access to a sponsored route for GMC registration for international Psychiatrists keen to gain experience and work in Scotland. These doctors hold an international postgraduate qualification in Psychiatry and have extensive experience of working in mental health. The three-year programme provides valuable experience in a specific specialism in Psychiatry and facilitates experience in a variety of specialisms and other non-clinical experience needed for a successful CESR application. Our first CESR fellowship programme was advertised in January 2022 and received a high number of international applications. The GMC regulations around sponsorship and further visa delays due to global factors impacted the start dates for the fellows, but in September 2022 we welcomed 5 CESR fellows in General Adult Psychiatry in Grampian. We have further expanded the CESR fellowship to include CESR in OAMHS (Older Adult Mental Health) from 2023, and we are looking forward to a second round of recruitment by the end of 2022.

**Allied Health Professionals:** All disciplines apart from Speech & Language Therapy within in-patients hosted services (Dietetics, Physiotherapy and Occupational Therapy) have experienced some extended vacancy periods and levels of turnover in all grades of staffing, the same is being seen in the community and services are often pursuing the same staff.

Dietetics had Band 6 & 7 movement over the summer, this settled but notice has been received so further movement is imminent. For such a small team of 6 staff covering Eden Unit and the rest of mental health services any staff turnover is significant.

Physiotherapy has had maternity cover and their usual staff rotation with vacancies earlier in the year and over the summer, currently in an improved position. A band 6 post continues to be vacant; these posts are challenging to fill across a range of services.

Occupational Therapy in all areas has had a range of short- and longer-term vacancies with some posts now awaiting new incumbents but lengthy gaps meaning interim arrangements having to be put in place which spreads the strain further on existing staff. Eden, Adult Mental Health, Older Adult Mental Health, Blair Unit and Learning Disabilities have all had a range of graded vacant posts throughout the year with a lot of work to redesign and skill mix to find the best options for filling posts and delivering services. Some posts remain unfilled despite recurrent advertising.

Along with the Band 4 Wellbeing and Enablement Practitioner work ongoing, services are redesigning to enable the sustainability of same. An example of this is the Occupational Therapy service looking to appoint to a dual role covering adult services and specialisms (specifically the forensic service).

### **Infrastructure**

Although ageing, compared with other critical parts of the Board's physical estate, the accommodation occupied by our Mental Health in-patient services is in a relatively good physical condition. Like all parts of our estate there is a requirement for backlog maintenance to ensure the physical integrity and safety of the building and engineering infrastructure but in general terms the issues raised are not unusual and typically include:

- Access to and maintenance of garden spaces,
- Leaks in roof spaces,
- Window repairs,
- Repairs to sanitary facilities,
- Decoration.

All regular maintenance issues are reported through the help desk facility managed by the Estates team who liaise with local management to review and prioritise all essential repairs. Where a matter requires substantial repair or significant investment in backlog or cyclical maintenance then this is risk assessed and prioritised against all other critical areas based on available funding and agreed through the Board's Asset Management Group. With the exception of some minor ongoing maintenance activity, there are currently no significant or high rated backlog maintenance risks associated with the building and engineering components of the accommodation.

### **Forensic Service**

The *Barron Report*, an independent review of Forensic Services commissioned by the Scottish Government, was published in 2020. The report was particularly critical of the current dormitory style accommodation in NHS Grampian's Blair Unit "*the Review was*

*disappointed to find people in one area were required to share rooms, including some in four bedded dormitory accommodation”.*

The report also highlights the general fabric of the building becoming a security risk as the condition deteriorates, a lack of dedicated female forensic beds, flow and privacy within the facility and a lack of en-suite provision as key issues.

Notwithstanding the recommendations arising from the *Barron Report* and the associated political pressure to make improvements, it should be recognised that a significant upgrade to the existing unit is unlikely to be feasible. The nature of the work will be invasive and will require vacant occupation of part or all of the facility during construction. Demand for the specialist services of the Blair Unit is very high and there is no other suitable facility that can be used to decant patients while we carry out the necessary works. The level of physical works that we can meaningfully deliver in the short term will therefore be restricted to only those elements that can be delivered with minimal impact and distress to the patients in situ.

We have commissioned an options appraisal to consider this and hope to be in a position to report back to the NHS Grampian Asset Management Group (AMG) with recommendations for a possible programme of deliverable short-term improvements by the end of December. To progress this work, we have recently agreed that the existing Ligature Reduction Programme Board (LRPB) which has overseen the highly successful programme of ligature reduction works in the Acute Mental Health Assessment wards, will now take responsibility for developing an improvement programme for the Blair Unit. This work will also include, in the longer term, the development of a business case for a new fit-for-purpose facility. Timing of this obviously would be dependent on the availability of capital funding from the Scottish Government.

### **Psychological Therapies**

Extensive waits for Psychological Therapies (PT) within NHS Grampian have resulted in the Board receiving tailored support from the Scottish Government (SG) to create an improvement and development plan to understand and address issues. The Scottish Government mandates that waiting lists are reduced by March 2023. NHS Grampian has begun to engage with a process of improving performance, working alongside SG specialist advisors for mental health.

Historically, within NHS Grampian the landscape with regards to the provision of Psychological Therapies is heterogeneous and complex, with multiple distinct areas, teams and services. There is multi-professional delivery with varying Matrix level provision and different waits.

The Director of Psychology post has been vacant since early 2021, coinciding with the Covid-19 pandemic and huge associated pressures on Health and Social Care systems. In the absence of this post, there has been limited whole systems work focussed on PT planning and performance.



To ensure governance around Psychological Therapy waiting times there is an improvement board to support the delivery of an improvement plan. Assurance is given to the Hosted Senior Leadership team on progress of the improvement plan at the Hosted service monthly governance meeting which is chaired by the Chief Nurse. This then feeds into the Aberdeen City Clinical and Care Governance committee.

### Audits

RCH has had an active 12 months in regard to Audit. We have a bi-monthly Quality Improvement and Audit meeting where the agenda is centred on the rolling programme of audits, audits completed and planned audits. We currently have 21 'live' audits ranging from quality of referrals to completion of Core Discharge Documents. Completed Audits are used to proactively improve service delivery.

### Complaints

RCH has received 66 complaints from 01/01/2022 – 01/01/2023. 22 of these were directed to the CAMHS service, with the remainder (44) for the Hosted service. The below table offers further details:

Specialty	Number of Complaints	Early Resolution	Proceeded to Investigation
Acute Admission Wards	20	7	13 (1 upheld) (1 partially upheld) (5 not upheld) (6 ongoing responses).
Adult Liaison Psychiatry	3	1	2 (Upheld)
Clinical Psychology	1	0	1 (not upheld)
Eating Disorders	2	0	2 (ongoing)
Forensic Wards	6	3	3 (1 ongoing) (2 not upheld)
Long Stay Wards	1	0	1 (Partially upheld)
Older Adult Wards	2	0	2 (2 ongoing)
Gender Identity Clinic	6	2	4 (3 upheld) (1 ongoing)
Unscheduled Care	3	1	2 (not upheld)
CAMHS	22	6	16 (6 not upheld) (2 ongoing) (2 partially upheld) 5 (upheld) 1 (no consent)

Themes include waiting times for CAMHS and the Gender Identity Clinic, and disagreements with clinical staff on treatment options. We have had 0 complaints that have gone via the Ombudsman in 2022.

## **FINANCE**

We are forecasting an overspend at year end of £1.25M which takes into account an increase in service usage over the winter period as well as the opening of the New Fyvie ward. The main causes of the overspend is a significant spend on Agency Nursing (£945K year to date) as well as an outstanding legacy target of £218K year to date (£326K for the year). This has been partly offset by an over-recovery in income of £462K related to Service Level Agreements with NHS Orkney and NHS Shetland.

The service is trying to identify 2% savings and are actively working on a savings plan however some costs are likely to increase i.e., use of agency staff.

The increased spend on Agency nursing is twofold. Firstly, the inability to recruit to nursing posts has meant that the service has often had to work below safe staffing numbers, this has meant increased pressure on the service to deliver safe and effective patient care. Secondly patient acuity in our forensic and Intensive Psychiatric Unit (IPCU) has meant that the service has had to request agency staff in order to maintain patient care and safety for staff and patients. Following the successful introduction of Band 4 Wellbeing and Enablement Practitioners into 3 of the ward areas, the service is looking to extend this into other ward areas. The practitioners undergo a 2-year course at the Robert Gordon University and are welcome additions to the wards.