NHS Board Meeting 29th July 2020

PURPOSE

1.

Lanarkshire NHS Board Kirklands Fallside Road Bothwell G71 8BB



Telephone: 01698 855500

www.nhslanarkshire.scot.nhs.uk

SUBJECT: COVID-19 MENTAL HEALTH & LEARNING DISABILITY SERVICES – BASELINE REPORT

by the Chief Officer, North Lanarkshire Health & Social Care Partnership

3. SUMMARY OF KEY ISSUES

The attached report was provided to the Minister for Mental Health, Scottish Government, at the end of June 2020 as a baseline audit of services.

Mental Health and Learning Disabilities in NHS Lanarkshire began to defer cases where the need was not felt to be high in March 2020. Since then, clinical focus has been mainly on the needs of those with higher and more immediate needs, and those who are at risk of developing a greater level of need.

During this process people who have had their appointment deferred have been contacted initially by letter and then by phone, to enquire into their current wellbeing and to ensure that they can access the service. As a result of this services have organically redistributed staff to meet the needs of the local population and the needs which are arising, with additional resources begin used to keep in touch with those involved with the service and waiting to be seen. There are additional dependencies however that limit further movement, many of which are common to other services, namely requirements for social distancing; safe home working practices; access to general practice (especially prescribing arrangements); arrangements for obtaining and processing blood tests, radiology tests and ECGs; social work services; and third sector agencies.

The baseline audit sets out a description of current services across the entire spectrum of services delivered by the North Lanarkshire Health & Social Care Partnership.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	AOP	Government policy	
Government directive	Statutory requirement	Achieving Excellence/	
		local policy	
Urgent operational issue	Other		

5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

Three Quality Ambitions:

Safe	Effective	Person Centred	
------	-----------	----------------	--

Six Quality Outcomes:

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	
People are able to live well at home or in the community; (Person Centred)	
Everyone has a positive experience of healthcare; (Person Centred)	
Staff feel supported and engaged; (Effective)	
Healthcare is safe for every person, every time; (Safe)	
Best use is made of available resources. (Effective)	

6. MEASURES FOR IMPROVEMENT

The Management Team and clinical staff are working with information services to build new reporting structures. We have where possible included relevant data with the following caveats:-

- Referrals are recorded for all members of the MDT within the CMHT
- Outpatient contacts are for medical staffing only
- Nursing staff appointments are not recorded on an electronic system so are not so easily accessible
- Phone and Near Me contacts have been recorded in a variable way, the above contacts are likely to under represent
- Near Me being a relatively new system and is not always recorded appropriately and therefore data is not always reliable.

7. FINANCIAL IMPLICATIONS

Any additional Covid-19 costs are being flagged to the Finance Director to be included in the assessment of the Health Boards overall Covid-19 pressures.

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

There is considerable pressure on the use of the estate and in particular shared clinic rooms or waiting spaces as services are beginning to be stepped up.

Locality Managers are now looking at this, working to prioritise services and modify spaces. Thus, in the meantime, the service will be using phone and Near Me for most cases, with a small number being seen face to face (usually in their homes) in situations where we feel it brings clinical value and the benefits outweigh the risks. We will constantly review the impact of stepping up services in line with NHS Lanarkshire's Redesign and Recovery process.

Clinical teams are being asked to:-

- Continue to see people who have urgent needs, including those with longer term high risk and those who are at risk of deterioration
- Work with your team to start assessing people who have been referred and who are waiting (including those new patients who were deferred)
- Identify patients on the caseload who have a preference for Telephone or near me contacts and those who will require Face to face contact. This will allow us to plan the logistics around stepping up services to the next stage.

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	Effective partnerships	Governance and	
		accountability	
Use of resources	Performance	Equality	
	Management		
Sustainability			
Management			

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

Not required.

11. CONSULTATION AND ENGAGEMENT

Staff and patients are consulted as part of the recovery process.

12. ACTIONS FOR THE BOARD

The Board is asked to:

1. Note the baseline audit and the steps being take to restart a range of services.

13. FURTHER INFORMATION

For further information about any aspect of this paper, please contact:

Ross McGuffie, Chief Officer, North Lanarkshire Health & Social Care Partnership Tel: 01698 858119