



AGENDA ITEM

3.2.12

QUALITY & SAFETY COMMITTEE

LEARNING DISABILITIES PROGRESS REPORT

Date of meeting

19/07/2022

FOI Status

Open/Public

If closed please indicate reason

Not Applicable - Public Report

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Presented by

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Approving Executive Sponsor

Chief Operating Officer (COO, DPCMH)

Report purpose

FOR NOTING

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals

Date

Outcome

(Insert Name)

(DD/MM/YYYY)

Choose an item.

ACRONYMS

CTMUHB

Cwm Taf Morgannwg University Health Board

SBUHB

Swansea Bay University Health Board

SRS

Specialist Residential Service

1. SITUATION/BACKGROUND

- 1.1 The detail of this report is to provide the CTMUHB Quality & Safety Committee with assurance in regards to key indicators for people experience, workforce and quality.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1 COVID Response

- 2.1.1 The Learning Disability Division within the SBUHB Mental Health & Learning Disability Service Group has worked with inpatient and community areas to risk assess the COVID position and ensure preparedness for future outbreaks.

As of 27th June 2022, there is one person within the CTM part of the service who has tested positive for Covid-19. They are being managed in isolation within the Specialist Residential Service (SRS) where they are a service user.

2.2 Service development

- 2.2.1 To manage the risks associated with COVID transmission, the acute hospital admission pathway for people with a Learning Disability was adapted to introduce a single admission point where individuals could be assessed, treated and cared for. Following a period of quarantine individuals would transfer for ongoing treatment to an acute assessment unit.

With the de-escalation of COVID procedures, this has been stepped down and admissions are now directly into the acute admission units. This reduces the need for people to travel unnecessary distances for admission and avoids multiple transitions for patients.

- 2.2.2 The environment improvement work at Bryn Afon Specialist Residential Service Unit has been completed and the unit re-opened on the 31st May 2022. Two service users have returned to the Unit and another has been transferred from an acute admission unit. There are plans to take a phased approach to moving more individuals into the newly refurbished unit, which has been re-designed to meet sensory needs and to be adaptable to the needs of individuals who may use the service in the future.



2.3 Quality Assurance

- 2.3.1 A Quality Assurance Framework is embedded within the Division and additional senior team assurance visits have taken place throughout June to assess estates and environmental issues.

A number of estates issues, which could affect patient safety have been escalated to CTMUHB by SBUHB. There are ongoing discussions between SBUHB and Cwm Taf Estates team to address these.

- 2.3.2 The Service Group has established an Infection Prevention Control (IPC) group, which reports into SBUHB's Infection Control Committee. There are very low levels of reportable healthcare associated infections in Learning Disabilities. The work of the group focuses on understanding training needs, compliance with IPC measures and supporting initiatives in the environments to increase ownership.

2.4 HIW/External reviews

- 2.4.1 There are no outstanding actions from Healthcare Inspectorate Wales (HIW) reviews in the CTMUHB area.

- 2.4.2 There has been collaborative work to carry out recommendations following an ombudsman report in response to a complaint. Of the four recommendations relating to the Learning Disabilities service, three have been completed and one is due to be completed by September 2022. The recommendations included SBUHB producing a summary document of their service specification and remit to be provided to service users on initial referral or when a specific request is made for a service provision outside the team's remit and to produce guidance on the triggers for involvement from the Acute Liaison Disability Nurses.

2.5 Performance

- 2.5.1 The Learning Disability services are continuing to meet the Welsh Government access target for people in receipt of secondary mental health services under the Mental Health (Wales) Measure 2010 having a valid Care and Treatment plan. The snapshot shown below is at 31st May 2022.

Number in Secondary Care	Current Month	Valid CTP's
CTM LD	94	88
Compliance Percentage	Current Month	WG Target
CTM LD	94%	90%



2.6 Waiting times by profession

- 2.6.1 Within Community Learning Disability Teams there are requests made for assessments and interventions by different professional groups generated by Care Coordinators to meet individual needs.

The nursing waiting time has increased and discussion with the team reflects the complexities of the referrals and ongoing work including transition, court of protection cases, care and treatment planning and continuing healthcare input. This is at a time when there continues to be a national shortage of registered staff. The actions in place to mitigate the risk include active recruitment, use of bank and agency staffing and facilitating retire and return of nursing staff to maintain expertise.

CTM South CLDT - Waiting Times	Weeks Waiting															Total
	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	
SLT	2	1														3
OT			2	2	1	1	2									8
Nursing	1	4	3	2	3	3	7	2	3							28
Psychology				1									1			2
Physiotherapy	1	1					1									3
Psychiatry	1	2	2													5
Total	3	2	10	5	5	4	8	4	3	0	0	1	0	0		49

CTM North CLDT - Waiting Times	Weeks Waiting															Total
	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	
SLT	2	1		1	2	2										8
OT			2	1												3
Nursing	3	2	1													6
Psychology	1															1
Physiotherapy	3	2	1			1	1									8
Psychiatry				1												1
Total	9	4	5	2	1	0	3	3	0	0	0	0	0	0	0	27

2.7 Service User Experience

- 2.7.1 The Service User Feedback Team report from January to May 2022 highlights only one item of service user or family feedback on Learning Disability services in CTM. This was positive feedback about an individual practitioner and the support they had provided an individual and their family.

The number of service users giving feedback across the Health Board is currently small. Areas continue to develop a range of approaches to gathering feedback at different points during the pathway.

The CTM Lead Nurse has engaged with RCT People First and has met with the Bryn Afon unit to explore Self-Advocacy support needed for our service users to be active within the network.



2.8 Compliance with safeguarding training

- 2.8.1 There is high training achievement in inpatient services but actions are in place to increase the community team safeguarding training compliance from 83%.

Training	Target	Tolerance	SRS			
			CTM	CTM	CTM	CTM
			Ty Garth Newydd	Bryn Afon	Dan Y Bont	Meadow Court
Safeguarding Adults	90%	85%	91%	94%	100%	100%
Safeguarding Children	90%	85%	86%	88%	94%	100%

Training	Target	Tolerance	Community	
			CLDT RCT South	CLDT RCT North
Safeguarding Adults	90%	85%	100%	83%
Safeguarding Children	90%	85%	83%	83%

- 2.8.2 There have been three safeguarding referrals for the CTMUHB area for this reporting period.

2 patient on patient assaults

1 verbal threat and intimidation (patient on patient).

Following these incidents reviews of risk assessments and individual patient needs have taken place. An in-depth multi-disciplinary review of individual needs has been recommended due to the vulnerability of one individual whose needs have changed and remains in a 'challenging behaviour' environment.

2.9 Complaints

- 2.9.1 SBUHB have completed an investigation into a complaint made by a family member into the conduct of a Registrant when they were a Student Nurse. There was an allegation that data protection was breached and confidentiality betrayed. A formal process was followed and the complaint was not upheld.

2.10 Serious Incidents

- 2.10.1 Learning from deaths reviews

There is a peer review process for deaths of people with a learning disability, which allows the clinical team to identify any concerns, and review cases with a space for sharing learning.

An escalation strand has been included in the processes to ensure that where concerns are identified by clinical services or families, the case can be escalated to a full review.

A designated Lead Nurse in the Division will hold a monthly meeting with a member of the Serious Incident Team and the MDT to review the learning and collate a report to the serious incident group.

2.11 **Workforce**

- 2.11.1 Challenges remain across recruitment in Nursing, Therapies and the Medical workforce and this is included on the SBUHB risk register. The number of staff vacancies by service and Health Board area and the number of vacancies in recruitment are reported to the Learning Disabilities Joint Commissioning Group through the Performance Dashboard. Consideration is being given to the metrics for the CTM workforce to determine if this should also be included as a risk on the CTMUHB risk register.

The strategies in place to improve recruitment and retention include:

- The apprenticeship model
- Specific bank recruitment for Registered Nursing and HCSW roles
- Creative ways of delivering services with medical workforce in partnership with the MDT.

- 2.11.2 SBUHB keenly anticipate the recruitment of student streamliners in September 2022. Swansea University will be launching the first Learning Disability Nursing programme in March 2022.

2.12 **PADR position**

- 2.12.1 The May position for CTMUHB Directorate is 74% which is below compliance. This is mainly due to unexpected sickness relating to administrative staff that would usually be responsible for updating ESR with new dates provided by each Team Manager. Outstanding PADR dates have been updated on ESR more recently, which will be reflected in June's performance.

There are currently 27 PADRs out of compliance on ESR. Team Managers have been tasked with addressing this with the expectation the PADR position will be compliant by August 2022.



2.13 Good News stories

- 2.13.1 Learning Disability Awareness Week was celebrated in June 2022 with some high profile activities from the Acute Liaison Nurses in CTM. This was supported by the CTM Learning and Development Team and training was organised on Autism. The Acute Liaison Nurses reflected on the links they have made and the value of the Learning Disability Champions training in improving outcomes for people with learning disabilities.

Bridget Robinson from the Paul Ridd Foundation has written to the CEO to thank the Health Board for their support in raising the awareness of those with a learning disability. They were also highly complementary on the work of the Learning Disability Liaison Nurses in CTM.

3. KEY RISKS / MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 3.1 An assessment of CTM workforce metrics is being undertaken to determine if staff vacancies needs to be included on the CTMUHB risk register.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	There are no specific quality and safety implications related to the activity outlined in this report.
Related Health and Care standard(s)	Choose an item. If more than one Healthcare Standard applies please list below: Safe Care Individual Care Dignified Care Timely Care Effective Care
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	No (Include further detail below) If yes, please provide a hyperlink to the location of the completed EIA or who it would be available from in the box below. If no, please provide reasons why an EIA was not considered to be required in the box below.



	Not required
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.
Link to Strategic Goals	Creating Health

5. RECOMMENDATION

To **Note** the contents of this report.