Annual Report 2018-2019

Mental Health Section 75 Partnership Agreement

London Borough of Islington and Islington and Islington Mental Health NHS Foundation Trust
1. Executive Summary

This is the annual report into the section 75 partnership between Camden & Islington Foundation trust and the London borough of Islington during 2018/19. This report also includes some information from 2019/20 to keep it current since it is being presented towards the end of 2019. The Council and the Trust have a long history of working together in partnership of delivery of mental health services in the borough. The report outlines functions delivered under the section 75 agreement and outlines key highlights and challenges over the course of the last year.

Key highlights identified in the report are as follows:

1. The section 75 agreement has continued to deliver services in partnership.
2. There have been a number of improvements over the past year although there still remain some challenges.
3. The new Joint Head of Mental Health Social Work role has provided a useful bridge between the Trust, Clinical Commissioning Group and both Camden and Islington Councils.
4. There are much more clear governance arrangements in place to ensure that Human Resources, finance and performance reporting arrangements are now improved.

During 2018/9 there has been a focus on the following key themes:

1. Implementation of the Section 75 review, focusing on improving partnership working and how social workers are supported and the responsibilities under the Care Act are delivered.
2. Enhanced focus on Safeguarding through new S75 oversight arrangements and C&I Safeguarding hub.
3. Improved Carer engagement by implementation of the triangle of care.
4. Further development of safeguarding assurance and reporting processes.
5. Appointment of a Mental Health professional within the Council’s access service to improve focus on prevention and early intervention, whilst reducing the level of inappropriate referrals to statutory services. This post is currently vacant.

2. Introduction

2.1 This Annual Report reviews the mental health services provided under the Section 75 partnership arrangements for 2018/19 between the LBI and C&I. The report also includes actions for 2019/20. The services covered by the partnership agreement include a range of multi-disciplinary community based mental health and substance misuse teams that provide integrated, holistic care. The services and functions covered by the partnership agreement include:
• Assessment and support as defined by the Care Act 2014
• Provision of care and support packages which may include residential or nursing home placements, community support care packages and Self-Directed Support through the use of Direct Payments.
• Commissioning of day activities for adults and older people to support their personal outcomes
• Provision of social care personnel to input in multi-disciplinary community support teams
• Adherence to a range of legislation such as the Care Act 2014, Mental Capacity Act 2005 and the Human Rights Act 1998.
• Ensuring that there are appropriate responses to safeguarding issues.

2.2 The appointment of a sufficient number of Approved Mental Health Professionals (AMHPs) and the performance of Local Authority duties under the Mental Health Act 2007 remains the responsibility of the London Borough of Islington, whilst the day to day management of AMHPs is undertaken by the Trust.

2.3 New performance indicators have been agreed in partnership which is a major achievement since last year. The performance section is enclosed as Appendix 1.

3. **C&I CQC Inspection**

3.1 C&I was inspected by the Care Quality Commission (CQC) in December 2017. This inspection covered all Health and Social Care Services delivered by the Trust. Whilst there was still more to do, C and I were one of very few Trusts with the majority of service areas rated ‘Good’ or ‘Outstanding’. A further inspection is underway in October 2019. Ratings for the Trust in 2017 were as follows

• Overall rating for this Trust - Good
• Are services safe? Requires Improvement
• Are services effective? Outstanding
• Are services caring? Good
• Are services responsive? Good
• Are services well-led? Good
3.2 Trust Highlights

The CQC inspection identified areas of improvement that the Trust needs to make going forward but also a number of positives. Highlights reported were:

- The Trust had “An excellent Clinical Strategy providing clear future direction for the services delivered”. This strategy is currently being revised for 2019/20 with the involvement of social care.
- “Good progress” in ensuring that patients had their physical health care needs met.
- A “holistic approach to assessing, planning and delivering care and treatment” to patients in community-based mental health services for older people
- The success of the Substance Misuse Services which has led to a reduction of 37% in patient attendances at A&E, with hospital admissions down by 27% and the number of days in hospital cut by almost 50%
- The Trust was well-led and the senior team had an appropriate range of skills, knowledge and experience.
- There were many examples of innovative models of care that were well-regarded such as the practice based mental health teams in Islington.
- There were many examples of person-centred care, where staff had been thoughtful about working with patients and carers to meet their individual needs.

3.3 Remaining Challenges identified within CQC Report

Although C&I was rated Good, overall within the report, CQC identified a number of areas of further work to be done. These are identified below and the subject of action plans which are monitored through C&I’s CQC oversight group.

- The trust still faced challenges with the recruitment and retention of staff. This sometimes impacted on ability to support patients on Acute Wards through escorted leave or individual sessions.
- There were significant pressures in accessing an acute bed. This was impacting on the amount of time patients were waiting in various settings. This remains an issue especially when AMHP assessments identify a need for admission.

4.1 Section 75 Review

A joint review of the Section 75 Partnership between LBI and C&I took place towards the end of 2018. This considered what were the successes of the partnership, the challenges and areas for improvement. The review included a number of workshops with key staff and managers across the organisation. This concluded that the role of social care work could be further developed across the Trust and the Council. The current Section 75 partnership has now been revised to include new performance indicators and a focus on
strengthening partnership working between the Council, the Clinical Commissioning Group (CCG) and the Trust.

4.2 Key Changes:

A new post of Joint Head of Mental Health Social Work Islington was created to act as a bridge between the two organisations and to work closely with the CCG on commissioning services for mental health. The post is currently filled on an interim basis but is to be advertised on a permanent basis again, having failed to recruit initially. Having this post has meant that there is a more formalised “go-to” person for social care issues across the Trust, Council and CCG. This has also identified some of the challenges in joint working.

4.3 Key Challenges:

- Data collection and access to LAS (the council record keeping system) remains a real issue, progress has been made but it is yet to be fully resolved and streamlined.
- Safeguarding policies and processes are in place, however, concern has been expressed regarding compliance, linked to the availability and standardisation of recording systems. Assurance regarding Care Act compliance varies across teams, which reflects concerns regarding data entry and therefore the reliability of the data.
- LA staff are committed but had felt unsupported by the LBI and C&I.
- Concern regarding HR data and level of support available across the partnership.
- Financial governance arrangements were unclear.
- Section 117 Aftercare arrangements have not always been clear.
- Training for council staff seconded into the Trust is not always clear and has meant that the seconded staff sometimes had to replicate induction across the Trust and the Council.

4.4 Response to these challenges

Monthly Section 75 operational meetings provide a forum between operational managers in the Trust and key departments such as performance and finance to resolve issues. This has resulted in the following responses:

- **LAS (the council record system)** New safeguarding documentation which is compliant has been jointly produced and once signed off will mean that Trust staff can record their issues onto care notes. Reporting performance indicators have been streamlined and meetings are held jointly between the Council and the Trust performance teams to clarify what is produced and how it is extracted from the systems used. The process for third party access to LAS is in place and this should mean that in future Trust staff and seconded staff are more easily able to access the system leading to improved response times and more accurate recording.
• **Social Care model** There is still a need to define the unique role of social work and what social workers do that differs from other disciplines. Workshops will be arranged to determine this and what other disciplines do in terms of social care. It is recognised that having to use different systems for recording and infrequently carrying out some activities such as safeguarding enquiries means that some Trust staff feel ill equipped to do these tasks.

• **Human Resources** The processes for leave, sickness absence, grievances and disciplinary action for seconded staff are in place and information on using the Local Authority system is distributed to Trust managers. There is acknowledgement that the current two systems are cumbersome and an easier process would be desirable.

• **Finance** Current updates regarding staffing and the whole Section 75 budget are reported via the operational meeting and will include financial updates on what services have been purchased on behalf of the council in future. This will ensure a greater focus on value for money. Regular liaison with the CCG by the interim joint Head of MH Social Work Islington will also provide more clarity on how the services work together efficiently. The accommodation pathway has made the process for identifying needs for housing much more straightforward.

• **Section 117 aftercare** A register of people eligible for Section 117 aftercare is kept by the Council to ensure that no one is charged for services that they should receive free of charge. Training sessions for staff and written information for service users will further ensure that people are clear of this entitlement.

• **Training** Core skills training needs are being agreed between the Trust and the Council to reduce duplication whilst still giving assurance that people are trained and supported appropriately.

4.5 **Finances**

Finances were managed within the partnership during the year with a slight overspend of £30k at year end. This is compared to a slight underspend the previous year. The s75 partnership budget covers staffing, equipment and on costs. LBI holds the purchasing budget which pays for support plan needs such as placements. The LBI purchasing budget is expected to come under more pressure during 19/20 and is currently £500k overspent at October 2019. It is expected that there will be efficiencies made in this budget by reviewing people’s needs, using strengths based approaches and ensuring that placements are appropriate. This spend is being reported to the Section 75 Operational sub group.

4.6 **Safeguarding**

Safeguarding adults and children is everyone’s business and at the core of the Section 75 agreement. The joint responsibility is to safeguard both colleagues who work for the Trust and the adults and children who may be at risk of abuse, ill-treatment or neglect.
A substantial proportion of the C&I’s safeguarding activity is delivered in accordance with partnership agreements derived from S.75 of the NHS Act 2006. In addition:

- Safeguarding adults and safeguarding children processes within the Trust are delivered and performed in accordance with the statutory arrangements derived from the Islington Safeguarding Adults Partnership Boards and the Islington Safeguarding Children Boards.
- During the year C&I has made further improvements in respect of awareness of safeguarding procedures, training, and the interface with partners including developing a safeguarding hub.

There is further work required to provide clarity in respect of responsibility for screening Merlin reports (cases referred by the police). To ensure best safeguarding practice and consistency across the Trust and ASC there has been the creation of a Trust lead practitioner safeguarding post. This post will liaise closely with the ASC safeguarding lead practitioner and focus on embedding Making Safeguarding Personal practice. This, along with the creation of the safeguarding hub within the Trust is a positive step.

4.7

Safeguarding Training has improved and as at 30th April 2019 is on target across the Trust. The safeguarding hub is in place in the Trust with a new Head of Safeguarding in place to work closely with partner organisations.

In the coming year it is a priority to ensure that mental health social workers have carried out the relevant local authority training and that the two sets of training complement each other and do not duplicate. This will be part of the core skills training work.

5. Joint Work in respect of Delayed Transfers of Care

5.1 The issue of Delayed Transfers of Care (DTOCs) has risen to prominence on a national basis with a requirement that Local Authorities and the NHS work together to minimise unnecessary delays. For C&I these delays are both to service users waiting discharge from service provision but also delays in transfer to C&I services or facilitated by them. A process for the CCG and LBI social care to work with the Trust in facilitating discharge is in place. The advent of the MADE meetings and a pan London compact on admissions is also in place for mental health. There have been a couple of people with complex needs who have waited a long time in hospital for the right placement which has increased the overall number of delayed days. Although the overall numbers of people delayed in Islington remain relatively low the proportion of days spent in hospital awaiting a placement are high. An action plan to reduce delays is being drawn up alongside the MADE meetings in the Trust.
6 Recovery, neighbourhood/partnership working and strengths-based services

6.1 Through the Section 75 partnership, there is a strong focus on recovery and strengths-based outcomes. The Trust is developing trauma-informed practice. There will be a partnership focus on ensuring that mental health is a key part of the work being carried out across Islington on developing locality-based services and ensuring that people are linked into what is happening within their communities. This will include opportunities for greater support with physical health and connections with the voluntary and community sector as well as supporting the carers and friends of people who use services. C and I have a growing number of user and carer groups to assist in co-producing services.

7 Areas of focus and challenge during 2019/20

2019/20 will be another busy and challenging year. There are several key areas of focus for the partnership which include the following:

7.1 Delivering an improved offer to people using services which is focussed on recognising and supporting their strengths – developing an improved assessment process will support this. Reviews must take place at least annually to ensure that people are having their needs identified and met. Reviews for the Care Programme Approach, Section 117 and social care reviews should be much more integrated.

7.2 Ensuring that LBI and C&I finances are managed within the agreed envelope

This will remain a challenge during 19/20 but appropriate structures have been put in place and improved monitoring plus more creative use of personal health budgets and direct payments should assist. There appear to be some very much more complex problems for a small number of service users including those with concurrent substance misuse problems. This has meant that it is not always easy to find packages of support without paying increased costs for this. The accommodation pathway work being co-ordinated by the CCG is assisting in identifying needs early and will the reviews carried out by social care staff will contribute to a better picture of what is needed in future to inform what is commissioned and how services work more closely with providers.

7.3 A move towards no delayed discharges

A continued focus on discharge and DTOCs is demonstrating need to join up approaches with supported and general housing pathways. The Accommodation Pathway work ensures that this will be in place.

7.4 Local Authority personnel

Ensuring that Islington managers and social workers are supported by the local authority and that there are improved links between adult social care local authority and Trust Managers is essential. There is a half time AMHP training lead supporting AMHP training. In addition, all seconded social care staff are included in LBI training opportunities and workshops. There is
still more to be done to ensure that supervision is regular and of good quality which will be a focus for the coming months. An audit should be carried out to establish whether managers and staff feel supported by both the trust and LBI.

7.5 Embedding strengths-based practice
Roll out of the strength-based practice model across the partnership building on personal and community strengths thereby reducing reliance on paid for care as a first option.

7.6 Identifying and developing involvement and support for carers.
A re-invigorated carer group is in place in the Trust and will link with the work that the Council is doing to support carers. Carers play a vital role in supporting people with mental illness and the performance indicators for carers will be monitored by the Carer Partnership Board. An action plan is being co-produced by this group based on the assessments returned by all Trust services.

7.7. Development of Safeguarding assurance and reporting processes
LBI & C&I are committed to ensuring that safeguarding activity is carried out to the highest standards. To underpin this there will be a focus on improving Safeguarding reporting and assurance processes. Currently Council and Trust systems are not interoperable and do not share data. In the longer term it is envisaged that a technological solution to this is developed and work towards this has commenced. In the short term a plan is being developed to support widened access to LBI systems to enable recording and follow up of Safeguarding incidents to take place on Council systems. This will give greater assurance to the Council and increased similarity to systems in place in other areas of social care. The following key themes are being tackled through this programme:-

- Development of technological solutions
- Management of Merlin’s (safeguarding notices from the police)
- Access to systems
- Recording
- Follow up
- Process Audit (failsafe)

7.8 AMHP Recruitment
The national Chief Adults Social worker has prioritised a ‘refreshed focus on the vital role of the AMHP, including: improving data, competencies, consistency and quality of training and approval arrangements, research evidence and a recruitment and retention strategy. This will be taken forward as part of the implementation of the S75 review. It is likely that the review of the current Mental Health Act will also make recommendations about numbers of AMHPs needed.
In addition to the priorities above a mental health strategy for Islington is being developed and will involve service users, carers, the voluntary sector and other providers. This will inform further priorities to develop over the coming year.
Appendix 1. 2018/19 Performance Indicators

1. Service Users receiving Community Support

At 2018/19 year end, 84% of ACMHT (CMH and R&R) service users were living in the community. This is a slight decrease from last year at 86%. Within the SAMH division, 52% of service users were living in the community, compared to 60% in 2017/18. This is generally a steady indicator for both divisions. Please note these figures also include people who receive Professional Support only.

2. Reviews

Average over the year, Adult Services (CMH and R&R) completed 15 reviews a month which is 55% lower than last year’s average of 34. Average assessments per month have also reduced by 15, from 29 to 13. SAMH is performing similarly to last year, completing on average 6.1 reviews a month (compared to 6.6 in 2017/18). There was a slight improvement on the number of assessments from 4.4 a month in 2017/18 to 5.8 this year.
3. Admissions to Residential and Nursing Care

There were a total of 9 new permanent admissions to residential or nursing care setting for ACMHT and 10 for SAMH in 2018/19. This is a decrease in admissions for ACMHT from 17 in 2017/18, and an increase for SAMH from 7 admissions.

4. Secondary care Users in Paid Employment

Although not statistically significant, there was a 0.7% increase in the proportion of adults on CPA in paid employment from 4.9% in 2017/18 to 5.6% in 2018/19. The target of 5.8% was reached in 7 out of 12 months. There are data discrepancies between local and NHS Digital in this indicator. These are now understood and we are confident the figures reported represent our activity. NHS Digital uses a different formula and rule to generate our position which at the moment ICT is unable to replicate. A new employment service is now available for Islington providing some employment workers embedded in some R and R teams.

5. Secondary Care Users living independently
The proportion of secondary care users living independently in 2018/19 was consistently below target (86%). However, the overall performance for 2018/19 was 3.3% higher than in 2017/18 (an increase from 67.1% to 70.4%).

At 2018/19 year end only 62.8% of carers from both ACMHT and SAMH had received an assessment or review. Although this is lower than the target of 80%, it is an improvement from the 2017/18 overall performance of 47.5%. The proportion of SAMH carers receiving a review or assessment within the year decreased from 75% in 17/18 to 63% in 18/19.
6. Safeguarding

The number of safeguarding enquiries is lower than last year for ACMHT (R&R and CMH Division), despite the number of concerns raised increasing (628 in 2018/19 compared to 493 in 2017/18). ACMHT completed 28 enquiries this year compared to 64 in 17/18. There were no enquiries that were completed by SAMH this year, despite the fact that 5 enquiries were started. This is a decrease from last year when 29 enquiries were completed.