



Common Board paper

May 2024

1. Introduction

This paper provides a summary of the work and plans of the East Midlands Alliance including the discussions and agreements from the March East Midlands Alliance Board meeting.

The same Board paper, agreed by the CEO group, is shared with the six Boards of the providers that make up the East Midlands Alliance for mental health, learning disabilities and autism.

2. The East Midlands Alliance

The East Midlands Alliance is made up of the six largest providers of mental health services in the East Midlands region:

- Derbyshire Healthcare
- Leicestershire Partnership
- Lincolnshire Partnership
- Northamptonshire Healthcare
- Nottinghamshire Healthcare
- St Andrew's Healthcare

The Alliance has agreed a vision for the Alliance:

Working together in partnership to enable the best mental health, learning disability and autism care and support for the people of the East Midlands.

The Alliance has also agreed a set of values:

- Working together
- Respectful
- Integrity
- Supportive

The Alliance agreed a set of principles:

- Patient first
- Care closer to home and maximising independence
- Subsidiarity take decisions as locally as possible
- Collaboration by consent
- Not acting to the detriment of others
- Sharing and applying learning at pace

The Alliance agreed five strategic objectives:

- 1. Quality improvement and productivity
- 2. Enabling safe care
- 3. Developing our workforce
- 4. Improving population health
- 5. Reducing inequalities

This common Board paper includes summaries of the recent work under each of the strategic objectives.

The March Alliance Board reviewed a strategy document from the West Midlands regional mental health collaborative. The Alliance Strategy Director forum will review a draft strategy document for the East Midlands Alliance in May to be presented to the Alliance Board in June. The draft document will be shared with provider Boards for review, comment and approval.

3. Quality improvement and productivity

3.1 Physician Associates in mental health settings

The Alliance agreed to receive £150,000 of funding from NHS England to support the development of Physician Associates in mental health settings. The Alliance Medical and Nurse Directors agreed to use the funding to:

 promote the potential use of Physician Associates and success elsewhere to the wider clinical body through an Alliance conference

- support the recruitment of new Physician Associates
- funding for the costs of supervision backfill for new recruits
- offering places on the Sheffield Physician Associate development programme to new Physician Associate recruits
- and support with recertification and CPD with a focus on the physical health modules for staff who choose to work in mental health.

Funding of £90,000 has been allocated to support six new Physician Associate roles in Derbyshire, Lincolnshire and St Andrew's. Lincolnshire Partnership will carry forward the remaining funds to use for further support of new Physician Associates in 2024/25.

3.2 Therapy Supervision Hub

The Alliance secured external funding to develop a Therapy Supervision hub to match those in need of supervision and potential supervisors. Access to therapy supervisors is a common challenge across the Alliance and this new system enables supervision at a distance between Alliance providers and for others to sign up to provide supervision into the Alliance.

St Andrew's has taken a lead on behalf of the Alliance in developing the booking software, recruiting supervisors and undertaking needs audits in each provider.

The March Alliance Board discussed the progress made and the need increase the number of potential supervisors. The Board agreed that the programme will receive some promotional support from the new Alliance Communications lead. The Board also noted that Lincolnshire would transfer the remaining funds to St Andrew's.

The Therapy Supervision programme meeting held on 25 April heard that more supervisors are now registered on the system. The programme team are developing adverts for specific types of supervisor. The group discussed building closer links with the regional mental health collaboratives to consider opportunities for specialist supervision.

The programme will offer two funded places per Alliance provider for CBT accredited training to develop a further cohort of supervisors.

3.3 Innovation and learning

The Alliance agreed to receive external funding from Health Innovation East Midlands (AHSN) to appoint a dedicated regional Innovation lead for mental health embedded in the Alliance. The Medical and Nurse Directors have fed into the early work programme for the role.

The key responsibilities of the role include reviewing innovations on behalf of both Alliance partners and Health Innovation East Midlands to establish their fit with local need and brokering introductions and connections into Alliance partner organisations to facilitate the adoption and spread of proven innovation.

The Alliance Strategy Director network meetings have a regular focus on innovation and technology. At the March 2024 Alliance Strategy Director forum meeting, a Senior Health Innovation East Midlands lead presented a horizon scan on innovation in ADHD and ASD provision.

The group was also joined by the lead from Flow Neuroscience who explained the use of a headset with remote monitoring to support people with depression and the impressive outcomes achieved in various pilot projects including one in Northamptonshire.

The Alliance Strategy and Medical Director forums have been linked with Health Innovation East Midlands to consider opportunities under the national NIHR and Alphastar programmes to act as demonstrator sites for new technology. Some Alliance providers have applied to be demonstrator sites.

The Alliance Strategy Director forum also met with the Advantage Mentoring CIC who use links with professional football clubs to improve access to mental health support for teenagers and young people. The group heard about the success of work with the CAMHS Young People's team at Leicestershire Partnership NHS Trust and Leicester City Football Club's Community Organisation which helps teenagers and young people who are experiencing, or at risk of experiencing, mental health issues.

The Advantage programme offers mentoring support to young people aged 11-21 years with mild to moderate mental health and wellbeing difficulties. The Advantage programme has worked well elsewhere in the country, and Advantage Mentoring are keen to expand the programme across the East Midlands. Strategy leads from Nottinghamshire, Derbyshire and Lincolnshire agreed to meet separately with the national manager of Advantage CIC to consider opportunities in their local systems.

4. Enabling safe care

4.1 East Midlands Mental Health Patient Safety programme

The Alliance works in partnership with Health Innovation East Midlands to run a region-wide Patient Safety programme involving leads from all six Alliance provider organisations.

The national programme support has ended in other regions, but the Alliance secured external funding to extend the programme by two years in the East Midlands. The programme takes a community of practice approach involving lived experience voices to develop and share best practice.

The Alliance Medical and Nurse Director forum Patient Safety programme has five priority areas:

- Reducing restrictive practice
- Reducing suicide and self-harm
- Sexual safety
- Mechanical restraint in high secure settings

• Patient Safety Incident Response Framework

The patient safety programme includes a series of share and learn deep dive sessions. The next share and learn session will focus on sharing the learning from a QI project in Northamptonshire Healthcare on Seclusion Packs and how these have been improved for medics.

The mental health patient safety programme held a large learning event in March 2024 with a focus on Service User Experience and Patient Safety. The learning event focusing on 'Caring Together – Improving Safety Through Experiences' brought together over 80 delegates from across the region at the Trent Conference Centre in Nottingham.

The aims of the event were:

- Enable networking, discussion, and cross-organisational learning.
- For delegates to have an opportunity to improve their knowledge and skills and have time to think about improvements they could make in their own work and practice.
- To provide delegates with an opportunity to gather ideas to improve care and practice that they can take back to their own services.
- To generate improvement data which will inform the improvement programme in the three CoPs for the next year.

Colleagues from across the six provider organisations, patients, members of the public, Experts by Experience and people with a keen interest in improving mental health services attended the interactive event, hosted in partnership with Health Innovation East Midlands.

Vivienne McVey, Chief Executive at St Andrew's Healthcare, delivered the keynote address on patient safety. This was followed by a presentation from Gill Gookey, Medicines and Safety Lead Pharmacist at Health Innovation East Midlands, who shared an update on the review of Mechanical Restraint used in high secure services.

This was followed by presentations by the three Communities of Practice (CoPs) on improving sexual safety, reducing restrictive practice and preventing suicide and self-harm.

The evaluation of the event was very positive:

- "I was satisfied with the event overall": Average rating of 4.79 out of 5.0
- 100% of delegates felt that the event had provided them with an opportunity to improve their knowledge and skills.
- Where applicable, 100% of delegates said that the event provided them with an opportunity to think about the improvements that they could make in their work/practice.
- Of those for whom it was applicable, 97% said that following the event, they have ideas that they could take back to their organisation and share with others.

The Patient Safety Board on 19 April reviewed the learning event and heard updates on progress with the Sexual Safety and Restrictive Practice Community of Practices. Fifteen

wards are signed up to the sexual safety Community of Practice. Training has taken place to role play having effective and appropriate conversations about sexual safety.

The Reducing Restrictive Practice Community of Practice has been promoting the HOPE model on Long Term Segregation and has heard from Mersey Care about their use of the model. The next steps are a focus on effective patient debriefs. Later in the year, Health Innovation East Midlands will undertake a further restrictive practice audit to monitor progress since the 2022 audit.

4.2 Urgent and Emergency Mental Health Capital

The Alliance was asked to prioritise the allocation of £800,000 of national Urgent and Emergency mental health capital to be used in 2024/25. The Alliance Board put three proposals forward:

- Perinatal estate improvements proposals from Derbyshire
- Crisis Service telephony proposal from Nottinghamshire
- Work to increase inpatient bed capacity from Leicestershire

The Nottinghamshire UEC capital bid had been brought forward in the process and is agreed. National confirmation of the allocations to Derbyshire and Leicestershire are expected soon.

4.3 Mental Health Act best practice

The Alliance secured external funding to share and promote best practice in the application of the Mental Health Act. Northamptonshire Healthcare will take forward the procurement of a legal partner to run a series of best practice workshops and clinics across the Alliance. The Alliance Medical Directors have agreed a series of specific topics for focus for the best practice workshops.

4.4 Review of the escalation processes and outreach support for the regional collaboratives

The Alliance Medical Director group agreed to take forward priority recommendations from the review of regional collaboratives relating to admission criteria, escalation processes and outreach support from specialist centres to patients waiting in local systems.

The Medical Directors met in March and April to review the written processes for each collaborative. The Medical Directors developed a draft dispute resolution process which was reviewed on 24 April by a group made up of the Alliance Medical and Nurse Directors. A further draft has been circulated to both professional groups for comment by 15 May. A final version will be presented for approval to the Alliance CEO Board on 4 June.

5. Developing our workforce

5.1 Retaining and developing Clinical Support Workers

The Alliance has run a very successful programme to support the development, retention and career aspirations of Clinical Support Workers. Across the Alliance there have been issues with the recruitment and retention of Clinical Support Workers (those working in salary bands 2-4). The Alliance secured significant external funding to run a shared package of development programmes.

The core programme is called Developing Healthcare Talent. It is complemented by a programme that works with the line managers of Clinical Support Workers, known as the Developing Healthcare Leaders programme. Over 250 staff have been through the programmes to date. Both courses have very high completion rates, and the feedback has been very positive.

A case study has been developed on the programme and the impact it has had for individuals and the Alliance providers. There are also a series of participant videos sharing the impact of the programme on them as individuals. The case study has been shared regionally and nationally, including with other collaboratives establishing similar programmes to that run in the Alliance.

A further round of CSW and line manager programmes will run in 2024/25. Cohorts 13 and 14 are underway for the Developing Healthcare Talent programme and Cohorts 5 and 6 for the Developing Healthcare Leaders programme.

There are also pilots agreed by the Alliance HR Director forum running in Lincolnshire and St Andrew's which apply the CSW approach with internationally recruited nurses working who begin in CSW roles and newly qualified nurses.

The Alliance has also used the funding to develop a common best practice Competency Framework for bands 2, 3 and 4.

NHS England offered further funding to the Alliance to develop the programme. The funding has been distributed to the Alliance providers for local activities to complement the Alliance wide programmes. Each provider received £100,000 for a range of activities including CSW careers events; a CSW conference; CSW recruitment campaign; a CSW marketing role; a CSW Education Facilitator; Advanced Physical Healthcare skills programme; trialling a new recruitment approach; and developing a new Senior CSW/Healthcare Assistant programme.

5.2 Enabling clinical staff to work across the Alliance

The Alliance providers have agreed a Memorandum of Understanding developed by a task and finish group sitting under the HR Director forum. The focus of the MOU is to make it easier for clinical staff to work across the Alliance. The MOU has been developed with some expert national input tied to the Collaborative Innovator status of the Leicestershire and Northamptonshire Group.

5.3 Midlands secure workforce strategy and plan for implementation

The HR Director forum in February 2024 focused on the new draft regional Secure workforce strategy and the work led by Impact to implement the strategy in the East Midlands. Workforce challenges remain the highest rated risks on IMPACT's risk register.

6. Improving population health

6.1 Working with ICBs

The Alliance CEOs met with the East Midlands ICB CEOs in December. The CEOs introduced the Alliance, how it has developed, the work on the vision, principles and strategic objectives and the value of the professional networks. The CEOs explained that the Alliance is an informal collaborative that enables learning and sharing across the sector.

The Alliance CEOs described the specialist collaboratives and their successes explaining that the Alliance brings together the East Midlands MHLDA specialised provider collaboratives for mutual support and learning.

The Alliance CEOs highlighted the success of the Impact Forensic collaborative in reducing out of area placements from 19% to 6%, a 20% overall reduction in restrictive practice and the reduction in multiple access assessments to zero.

The Alliance CEOs explained that the East Midlands CAMHS collaborative had brought in £12m of new national funding for Tier 3.5 service which has led to 20% reduction in referrals to inpatient facilities; the implementation of the Family Ambassador programme; and the new way of conducting assessments for tier 4 inpatient settings that have led to lower admission rates.

The Alliance CEOs also explained that the East Midlands Adult Eating Disorders collaborative has established a Clinical Activity Panel to centrally manage referrals and potential referrals; increased the quality oversight of providers; and invested in the Waterlily service, a community approach to reduce admissions to Specialist Eating Disorder Unit for patients with Anorexia Nervosa.

The CEOs described the two most recent new service offerings developed and run by the Alliance partners for the population of the East Midlands, the development of a new Gambling Harm service for the East Midlands and the approval of the regional Perinatal collaborative. Both services are led by Derbyshire working across the East Midlands.

The CEOs also highlighted the joint work with Health Innovation East Midlands (formerly known the East Midlands Academic Health Science Network). The Alliance and Health Innovation East Midlands jointly run the Mental Health Patient Safety programme in the East Midlands.

The meeting discussed the opportunities for the Alliance and ICBs to plan together and to develop future strategies and plans for mental health, learning disabilities and autism for the East Midlands.

The meeting discussed research, development and innovation. The group discussed opportunities to collectively lobby for resources for mental health, learning disabilities and autism. The group also discussed opportunities for capital investment and the challenges for regional services of a capital allocation system that is locally led.

The ICB CEOs agreed to nominate a lead to work with the Alliance. The CEOs collectively recognised the value of having met and committed to future sessions.

6.2 Gambling Addictions and Harm service for the East Midlands

The Alliance secured £1million of recurrent funding to establish a new Gambling Addictions and Harm service for the East Midlands. The service is run by Derbyshire Healthcare on behalf of the Alliance.

The main CBT treatment pathway and consultant pathway are up and running, the Psychodynamic Psychotherapy pathway commenced in January 2024. The service now provides triage, assessment, educational/motivation courses and CBT therapy.

The Principal Psychologist is now in place. There have been 160 referrals from the East Midlands.

7. Reducing inequalities

7.1 Patient and Carer Race Equality Framework

One key area of focus for the Alliance on reducing inequalities has been the joint work to progress implementation of the Patient and Carer Race Equality Framework (PCREF).

Over the last year an Alliance network has met three times and shared issues and progress, as well as hearing from two of the five national PCREF pilot Trusts with a focus on the voice of lived experience and establishing leadership and governance for the PCREF.

Alliance representatives attended the PCREF session aimed at Non Executive Directors in March 2024 and CEOs have nominated leads to attend a session on PCREF data and reporting to be held at the end of April. The data and reporting session will hear from national leads and South London and Maudsley NHS Foundation Trust on their use of data to determine priorities and how they report progress.

A further Alliance PCREF session will take place on 23 May. The forum will review and share progress, consider the use of PCREF data by the regional mental health collaboratives and collective goals for the Alliance in 2024/25.

8. Regional mental health collaboratives

8.1 Op COURAGE in the East Midlands

Op COURAGE is an NHS service developed with people who have served in the Armed Forces and experienced mental ill-health. In the Midlands (East and West), Op COURAGE is delivered in partnership by Lincolnshire Partnership NHS Foundation Trust, Birmingham and Solihull Mental Health NHS Foundation Trust, Coventry and Warwickshire Partnership NHS Trust, St Andrew's Healthcare, Walking With The Wounded, The Ripple Pond, Tom Harrison House, and Mental Health Matters.

The March Alliance Board noted the progress made in signing contracts and rolling out the new service offering. The Op COURAGE paper highlighted the high referral numbers into the service along with staffing issues (planned sickness and vacancies) which have led to waiting lists and the service not meeting the KPI for assessment in non-urgent pathway across the region. Plans are in place to improve performance.

8.2 Perinatal Collaborative

The specialist Perinatal collaborative for the East Midlands, led by Derbyshire Healthcare NHS Foundation Trust, launched on 1 October 2023. The majority of Perinatal collaboratives in other parts of England had their launch postponed until later in 2024.

The East Midlands Perinatal Mental Health Provider Collaborative is a partnership to deliver high-quality care for pregnant women and new mothers with serious mental illnesses who require admission to a Mother and Baby Unit, and to ensure seamless support between Mother and Baby Units and community perinatal mental health teams.

The collaborative partners include community perinatal service providers, creating an opportunity to bring together decision-making on inpatient services from providers across the whole pathway and work closely with community teams to connect services and improve quality.

The March Alliance Board reviewed the recent work of the Perinatal collaborative on contractual mechanisms and progress against the authorisation condition to have a risk and gain share agreement in place.

8.3 Impact Forensic Collaborative

The Alliance Board in March reviewed progress in agreeing a risk and incentive agreement for the Forensic collaborative. The Impact report also reported on the IMPACT Quality Team Roadshows.

The number of East Midlands patients treated outside of natural clinical flow is at a new low of 24 patients. Bed occupancy performance remains above the 90% target. The waiting list has remained below the mean since September 2023.

IMPACT continue to work with the regional NHS England team to discuss the practicalities and resources to facilitate the transfer of the coordination of Care and Treatment Reviews for patients with Learning Disability and Autism. It is likely the start date will be 1 July 2024.

8.4 CAMHS Collaborative

The March Alliance Board reviewed the success of the CAMHS 3.5 model and the data that demonstrates progress in reducing referrals, admissions, occupied bed days. The success has been noted nationally. The meeting discussed the distribution of the 2023/24 underspend between provider partners to invest in local services.

The Alliance Board in June will have a focus on the longer term funding of the CAMHS community models.

8.5 Adult Eating Disorders Collaborative

The Alliance Board in March reviewed the increase in bed price that has been agreed to bring the Welford Ward in Leicester in line with other providers nationally. This increase is subject to the unit carrying out access assessments for all patients within the collaborative.

The Alliance Board spent time discussing some concerns over the management and escalation of particularly complex patients, escalation and outreach support. This tied to the Medical and Nurse Director review of admission criteria, escalation processes and outreach support to patients waiting in local settings recommended as part of the external review of the regional collaboratives.

9. Review of the regional collaboratives

The Alliance Board commissioned a review of the functioning of the specialist collaboratives in the East Midlands from the viewpoint of partner providers. A themed report was shared with and approved by the Alliance Board in October. The Alliance Board agreed to prioritise the recommendations relating to admission criteria, escalation, outreach and broader support while people wait, led by the Medical Director group.

The Alliance Boards in December and March discussed concerns over access issues, the application of admission criteria, the escalation and dispute resolution processes, how to reach a binding decision on admission, the outreach support available while patients wait in non-specialist local settings, the sharing of clinical risk, input from the CQC and the high cost of caring for the most challenging patients in non-specialist settings.

The Alliance Board agreed on the importance of having clear escalation flow charts, being clear about independent input to escalated cases and outreach support to those waiting locally.

The Medical Directors met in March and April to review the written processes for each collaborative. The Medical Directors developed a draft dispute resolution process which was reviewed on 24 April by a group made up of the Alliance Medical and Nurse Directors. A further draft has been circulated to both professional groups for comment by 15 May. A final version will be presented for approval to the Alliance CEO Board on 4 June.

10. Alliance Communications

The March Alliance Board received an update on communications. There is a new Alliance communications lead – Ed O'Mara. Dionne Mayhew will continue to provide senior support. Ed is leading work on the second Alliance quarterly newsletter with a plan to publish it by the end of April. Ed is also working on some case studies and has offered to support the Therapy Supervision programme and with the planned Alliance learning, networking and celebration event.

The website – www.eastmidlandsalliance.org.uk – went live at the end of 2023 and provides a hub for information about the Alliance and the provider collaboratives. Further development work has taken place on the Alliance website and a new set of news posts will be uploaded by the end of April.

11. Alliance learning and networking event

The Alliance is planning to hold a learning and networking event for the Boards of the six member providers and lead governors. The focus will be on showcasing some of the collective progress made through the Alliance, setting out future plans, launching the Alliance strategy document and providing space for networking between different groups including Non-Executive Directors. The event is likely to be held at the St Andrew's site in Northampton in September.

12. Actions and recommendations

The Boards of the Alliance providers are asked to:

- I. Note the progress made under each strategic objective;
- II. Receive the updates from each regional mental health collaborative;
- III. Endorse the prioritisation of recommendations from the review of the regional collaboratives relating to admission criteria, escalation, outreach and broader support while people wait, led by the Medical and Nurse Directors;
- IV. Note the progress on Alliance communications and the plans for a wider Board event in September.