

# Agenda Item 7

		<b>THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE</b>	
Boston Borough Council	East Lindsey District Council	City of Lincoln Council	Lincolnshire County Council
North Kesteven District Council	South Holland District Council	South Kesteven District Council	West Lindsey District Council

Open Report on behalf of  
Lincolnshire Partnership NHS Foundation Trust

Report to	<b>Health Scrutiny Committee for Lincolnshire</b>
Date:	<b>17 May 2023</b>
Subject:	<b>Temporary Closure of Lincolnshire’s Male Psychiatric Intensive Care Unit (PICU) – The Hartsholme Centre</b>

**Summary:**

- In October 2022, the Lincolnshire Partnership NHS Foundation Trust (LPFT) took the difficult decision to temporarily close the Hartsholme Centre in Lincoln, the county’s male psychiatric intensive care unit (PICU) on safety grounds, due to on-going significant staffing pressures across adult mental health wards.
- The ward, which had four male patients at the time of the decision, fully closed in November 2022, once the remaining patients had suitable alternative placements.
- Since its temporary closure, the Trust has undertaken an engagement programme with patients, carers, staff and stakeholders to understand the impact of the temporary closure and what people felt needed to be in place before the decision was made to safely and sustainably reopen the PICU.
- Further work has also taken place on proactively marketing vacancies and careers in adult mental health wards, as well as workforce planning for the future pipeline of staff, particularly qualified nurses through international recruitment, apprenticeships and alternative roles.
- Whilst staffing levels across the remaining wards in the adult inpatient and urgent care division have stabilised, the Trust does not yet feel in a position to safely reopen the Hartsholme Centre, without negatively impacting the wider safety of staffing on remaining wards.

- It is proposing a stepped reopening of the ward over the next year, with significant work taking place on retention and recruitment over this period and continuous monitoring to reopen earlier if able to do so. Initially reopening four beds in November and fully reopening in March 2024.
- The Trust remains committed to providing a psychiatric intensive care unit in Lincolnshire. It is also exploring the options to extend this provision to females in the future.

**Actions requested:**

The Committee is asked to note the report on the work to date to increase staffing across Lincolnshire's adult mental health wards and future projected timelines for reopening the Hartsholme Centre in Lincoln

**1. Background**

In October 2022, the Trust took the difficult decision to temporarily close the Hartsholme Centre in Lincoln, due to on-going significant staffing pressures which were affecting our ability to safely staff our adult mental health wards across the county.

The Hartsholme Centre is a 10-bed male psychiatric intensive care unit (PICU) and is the only ward in Lincolnshire providing this type of service. There is currently no female provision commissioned in Lincolnshire.

The temporary closure of PICU was identified as the preferred option for temporary closure as it is the smallest of Lincolnshire's inpatient wards, often not reaching its maximum capacity of ten beds during the pandemic. Therefore, any temporary closure affected the least number of patients, while benefiting patients across other inpatient units due to the increased number of staff available to meet their needs.

This was an urgent clinically driven decision based on recommendations of senior clinical and operational leaders in the Trust and further engagement work and workforce planning has now taken place to understand any impact from the temporary closure and next steps to stabilise the workforce across the division and reopen the Hartsholme Centre.

**2. Clinical Impact to Date**

Since the temporary closure the Trust has undertaken extensive community and staff engagement to understand the impact of decision, what support needs to be in place during the temporary closure and what people would like to see in place before taking a decision to reopen the ward. See engagement section below for the themes of feedback received to date.

- Since the temporary closure three male patients\* requiring psychiatric intensive care have been admitted to PICU services outside of Lincolnshire to receive their care. This is in addition to one patient who was already placed out of area due to safeguarding needs. This patient would be considered appropriately placed in this circumstance. In comparison there are currently two\* appropriately placed female patients in out of area wards, as currently Lincolnshire does not offer a female service. It should be noted that the male and female split of demand does fluctuate month to month. \*These figures are as at 2 May 2023.
- Anyone in out of area care continues to be robustly supported by our Bed Management team who remain in contact with the mental health unit providing care, and work to bring patients back to Lincolnshire services as soon as clinically appropriate.
- The Trust's adult acute care out of area position has not been affected by the temporary closure which remains at zero, demonstrating no negative impact on other wards from the temporary closure of PICU.
- There has been a positive decrease in the use of both bank and agency use since the temporary closure, with the PICU staff redeployed to support the remaining wards.
- Staff sickness and turnover has also slightly reduced, see figures 1.1 and 1.2.

Figure 1.1 Division position at the time of the PICU closure (November 2022):



Figure 1.2 Division position as at 28 February 2023



However, what we do know that whilst vacancies and turnover have improved across the division, there are still some areas where further recruitment was required. Some members of staff currently redeployed from the PICU have chosen to take up permanent posts in the areas in which they were redeployed. Whilst this is welcome for those wards and the division is not losing these staff to other services, or away from the Trust, it has created a higher vacancy position at the Hartsholme Centre that will need to be filled before reopening.

As a consequence of the additional staffing being available on the remaining wards, the Trust has also seen positive impact on:

- Mandatory training and supervision/appraisal compliance.
- A reduction in employee related HR activity.
- A decrease in patient complaints when compared to the months preceding the temporary closure.
- An improvement in patient experience reported through the Trust’s friends and family test survey, with 86% of patients reporting a positive experience between October and December 2023.
- A decline in slips, trips and falls.

### 3. Engagement Feedback

As a condition of the temporary closure, the Trust committed to carrying out targeted engagement work to better understand the impact of the temporary closure and determine the conditions that would be required to reopen the unit both safely and sustainably.

A number of planned public and staff engagement events took place between November 2022 and March 2023, alongside patient, carer and staff surveys.

Date	Location
23/11/22	Public Lincoln – face to face
6/12/22	Public Boston – face to face
14/12/22	Public virtual event
10/1/23	Public Skegness – face to face
28/2/23	Stakeholders Lincoln – face to face
14/3/23	Staff Lincoln- face to face
15/3/23	Staff Boston, Sleaford, Lincoln - face to face
11/11/22 – 16/12/22	Public and staff surveys

The key themes from this feedback can be summarised as:

#### ***What patients, carers and the public told us***

- Welcomed the opportunity to engage and understand rationale for temporary closure.
- Concern that out of area PICU placements will rise.
- Requested ongoing communication, updates and ‘check ins’ during temporary closure.
- Requested signposting to support services and support from the voluntary and community sector.
- Wanted a commitment to re-opening PICU.
- Would like to see a local female PICU provision in the future.
- Recognised the workforce pressure within the NHS and wanted assurance of workforce plans.

### ***What staff told us***

- Understood rationale for temporary closure.
- Felt a sense of relief that action was being taken.
- Felt listened to by the trust and senior management.
- PICU staff committed to returning to posts once PICU re-opened.
- Additional staffing resource into other teams was having a positive impact – less movement of staff across services.
- Minimal impact felt on rehabilitation wards and urgent care pathway.
- Felt there was increased acuity on Conolly ward (male acute mental health ward).
- Felt that there were increased challenges and pressure linked to patients with personality and complex trauma presentations.
- Would welcome a long-term plan to provide local female PICU.
- Felt that incentive payments for ward staff and introduction of an environmental allowance across all inpatient wards would recognise the challenging nature of roles on the wards. Felt this would help with recruitment and retention.
- Felt that organisational growth has impacted on staffing – more opportunity for staff to choose new roles in community teams, which offer a better work life balance and seen as less stressful.
- Recognition that rotational posts in clinical teams could be beneficial for both recruitment and retention.
- Would like to see development posts available.
- Valued the new clinical leadership roles introduced across disciplines and services.
- Felt that current commissioned 10 beds for male PICU could be reduced – as environment was not conducive to recovery and there had been a decrease in demand.

### ***What stakeholders (professionals) told us***

- Acknowledged the current workforce pressure.
- Were encouraged that there was a clear commitment to re-opening PICU.
- Concern that temporary closure would have/has impacted negatively on key stakeholders and wider 'system' pathways.
- Concerns that local PICU provision was not available and impact of potential out of area placements on patient, families and wider system.
- Financial impact on families who may need to travel to visit loved ones.
- Wanted the Trust to be ambitious around timeline for re-opening – open as soon as possible if workforce plans prove successful.
- Appetite to explore how we can work across agencies to provide a more robust workforce.
- Wanted to explore the opportunity of providing female PICU locally to provide parity of esteem.

#### 4. Actions Taken Since Temporary Closure

A task and finish group was established following the temporary closure, initially within the divisional leadership group, this was then extended to include a wider group of corporate colleagues and clinical leads. The task and finish group has focussed on six key areas:

- Immediate actions to improve staffing support across the division.
- Stakeholder engagement.
- Review of the staffing position.
- Workforce planning and recruitment predictions.
- Identifying additional actions to improve the staffing situation.
- Establishing a timeline for re-opening the unit.

##### Recruitment

- Ensured the Trust is advertising all vacancies and held a dedicated recruitment event, showcasing the opportunities currently available within our inpatient rehabilitation wards.
- Begun a proactive marketing campaign running across social media and other media such as bus, petrol pumps and other outdoor advertising space across the region specifically highlighting roles in PICU and the adult acute wards.
- Looking at how the Trust could future proof ward staffing and develop a sustainable supply, along with a review of the skill mix in each clinical team. There have been several new initiatives and roles created including carer champions, clinical leads, and professional leads to create opportunities for professional development. It is hoped this will have a positive impact on recruitment and retention and create opportunity for staff who may not wish to take up operational leadership roles such as ward/team managers but aspire to progress their careers through a clinical route.
- Increasing international recruitment and apprenticeships for nurses and other professional groups.

##### Retention

- Supporting staff and managers to manage attendance effectively and appropriately.
- Benchmarked healthcare support worker roles to ensure they remain competitive and acknowledge the skill and work they do to support the wider healthcare team.
- Clearer guidance for using temporary staffing, enhancing the offer to substantive staff to do additional overtime hours where they would like to do so, and give patients a consistent team and reduce the number of temporary staffing used.
- Offering rotational roles for staff who may wish to spend time in other areas, whilst still periodically supporting the wards.
- Exploring the introduction of enhancements in pay for staff working across all inpatient wards. This is already offered to staff working on the PICU due to the nature of complexity of the patient group they care for.
- Greater flexibility in working arrangements, ensuring staff have rotas three months in advance to aid their planning and reflecting on requests for flexible working arrangements.

## Workforce Planning

- Introduced and developed predictive workforce dashboard, which is reviewed and monitored frequently.
- Reviewed safe staffing levels, which had been identified as needing further investment to support the current demands of the wards and ensure a productive and safe workforce. This business case is currently being considered through the Trust's approval routes, but if approved would increase the number of staff available across wards, as well as change the current skill mix of staff to increase the ratio of more professionally registered posts.

## Estate Improvements

As part of engagement that has been undertaken, it was also identified that there are currently some environmental aspects of the current PICU ward that needed addressing. With the current temporary closure it was felt prudent that this improvement work and essential maintenance take place now whilst the ward is empty to prevent any further impact on patients when they return and make necessary improvements. This work is due to be completed June 2023.

### **4. Timeline for Reopening**

Whilst the Trust has seen a positive increase in the number of staff available and reduction in turnover and sickness, we do not yet feel in a position to safely reopen the PICU as it currently stands. A phased reopening of the service is therefore proposed, in line with continued targeted recruitment taking place over the next few months.

- **Phase 1 - Continued Targeted recruitment** – Ongoing (when building repair work has been completed a re-marketing of service along with open day events will be undertaken for PICU– estimated time of completion of works is June 2023).
- **Phase 2 – Reopen four PICU beds November 2023** - prior to the admission of patients the team will undertake a training needs analysis and robust induction for new staff.
- **Phase 3 – Fully reopen the unit in March 2024.**

The proposed staffing levels will ensure the unit is safe, effective and meets the requirements that have been identified from the engagement work, including sufficient staffing to:

- provide one to one care for patients.
- respond to changes in observation levels.
- facilitate patient leave.
- facilitate meaningful daily activity.
- provide intervention and reduction/management of violence and aggression.
- reduce patient safety incidents.
- support family and carers.
- allow regular breaks.
- improve staff morale, recruitment and retention.
- reduce the rotation of staff from other wards to support deficits.
- reduce reliance on bank and agency staff.

- allow staff to do additional in training and continued professional development.
- provide a robust induction for new staff.
- provide a positive learning experience for students.

## 5. Risks to Delivery

The main risk to delivery is the successful recruitment of the required number of staff, across the various disciplines, in the required timeframes. The plans in place to manage this risk are:

1. A widespread recruitment campaign across social media and public space advertising.
2. Review opportunities for rotational posts with new and existing staff.
3. Introduce new alternative roles such as more occupational therapists
4. Retain the band seven clinical leads (subject to approval of the business case).
5. Maximise opportunities for international recruits and nurse apprentices.
6. Inpatient quality improvement project to be launched to help improve staff morale and patient experience.
7. Clinical pathway/protocol for managing complex trauma to be finalised and implemented.
8. New build acute wards at Lincoln, providing improved working conditions for staff.

## 6. Summary

Whilst the re-deployment of PICU staff has given a degree of stabilisation and some improvement to other core adult mental health wards, the overall divisional staffing vacancy factor has not yet made enough sustainable improvement to reopen PICU.

From a quality and safety perspective, some patients (two) have been inappropriately placed in out-of-area PICU beds. Conversely, there has been a noticeable decrease in complaints, incidents, negative feedback and no recorded escalation of concerns to our freedom to speak up guardian from staff since the closure of PICU in November. A wealth of information has been gathered through a comprehensive engagement process, which has informed the conditions for providing safe and sustainable services.

To return redeployed PICU staff back to open the Hartsholme Centre at present would destabilise the division and leave several teams vulnerable and unable to safely staff clinical areas. Services would become compromised, patient and staff safety negatively impacted. There would also be an increased risk of staff burnout and a rise in both short and long-term sickness would potentially occur. The division would need to frequently move and rotate staff, there would be an increased reliance on bank and agency, and a potential increase in clinical incidents.

The Trust has therefore agreed with commissioners, a phased approach to the re-opening of the PICU, initially opening four beds in November 2023 and then opening the unit in full by March 2024. If targeted recruitment campaigns and other initiatives to improve recruitment are more successful than anticipated, then we will re-open sooner.

The Trust remains committed to providing a male PICU service in Lincolnshire and following the engagement with staff, patients and stakeholders is also now exploring the options available to extend this scope to include a female provision in the future.



**7. Consultation**

This is not a formal consultation item.

**8. Conclusion**

The Committee is asked to note the report on the work to date to increase staffing across Lincolnshire's adult mental health wards and future projected timelines for reopening the Hartsholme Centre in Lincoln.

**9. Background Papers**

No background papers, as defined within Section 100D of the Local Government Act 1972, were used in the preparation of this report.

This report was written by Jo Walker, Head of Communications, Lincolnshire Partnership NHS Foundation Trust, who can be contacted via [Joanna.Walker2@nhs.net](mailto:Joanna.Walker2@nhs.net)

This page is intentionally left blank