

## Public Trust Board – 29<sup>th</sup> June 2021

### East Midlands Alliance Common Board Paper

#### Purpose of the report

- This paper introduces the common board paper in Annex A, which is being shared by each Alliance partner with their respective Board during May and June 2021.
- The Common board paper provides each board with an outline of the current joint work programmes of the East Midlands Alliance, its evolving governance arrangements and view of local and regional system collaboration across the East Midlands in relation to mental health and learning disabilities.

#### Analysis of the issue

- The East Midlands Alliance is a group of six NHS Mental Health and Learning Disability providers and St Andrews who provide services to our population in the East Midlands;
- The Alliance partners include: Derbyshire Healthcare NHS Foundation Trust, Leicestershire Partnership NHS Trust, Lincolnshire Partnership NHS Foundation Trust, Northamptonshire Healthcare NHS Foundation Trust, Nottinghamshire Healthcare NHS Foundation Trust and St Andrew's Healthcare.
- The current joint programmes across the Alliance cover: Covid response, restraint & restrictive practice best practice and learning, mental health safety improvement programmes, clinical networks, demand and capacity modelling, research opportunities and the use of technologies. The Alliance is also pioneering the establishment and delivery of new care models at regional level and looking at system leadership approaches in relation to local ICS and regional provider collaboration.
- In line with an evolving and maturing partnership, Chairs and CEOs across the Alliance have agreed some proposals in relation to formalisation and strengthening of governance arrangements and these are detailed in the Common board paper for consideration by LPT.

#### Proposal

- The Board is asked to consider the recommendations in the EMA Common board paper, Annex A.

#### Decision required

- The Board is asked to approve the recommendations set out in the EMA Common board paper.

## Governance table

For Board and Board Committees:	Public Trust Board 29 <sup>th</sup> June 2021	
Paper sponsored by:	David Williams Director of Strategy and Business Development	
Paper authored by:	Amanda Johnston, Strategic Business Development	
Date submitted:	11 <sup>th</sup> May 2021	
State which Board Committee or other forum within the Trust's governance structure, if any, have previously considered the report/this issue and the date of the relevant meeting(s):	NA	
If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/ partially assured / not assured:	NA	
State whether this is a 'one off' report or, if not, when an update report will be provided for the purposes of corporate Agenda planning	Regular update report	
STEP up to GREAT strategic alignment*:	High Standards	x
	Transformation	x
	Environments	x
	Patient Involvement	
	Well Governed	x
	Single Patient Record	
	Equality, Leadership, Culture	
	Access to Services	x
	Trust wide Quality Improvement	x
Organisational Risk Register considerations:	List risk number and title of risk	all
Is the decision required consistent with LPT's risk appetite:	Y	
False and misleading information (FOMI) considerations:	NA	
Positive confirmation that the content does not risk the safety of patients or the public	Y	
Equality considerations:	NA	

## **Annex A – East Midlands Alliance for Mental Health and Learning Disabilities Common Board paper**

### **Introduction**

This paper provides an update to the Board on the progress made by the East Midlands Alliance since the previous common Board paper in November 2020. It also sets out the next steps on governance agreed by the Chairs and CEOs. The same paper will be presented to all six provider Boards in May or June.

### **Progress with joint work programme**

#### **Covid pandemic response**

The weekly Alliance CEO meetings have focused on sharing experience, learning and approaches to the Covid pandemic, vaccination programme, working with BAME staff, broader staff support and plans for recovery.

#### **Establishment of a learning collaborative on restraint and wider restrictive practice**

The baseline review of each provider has been completed and baseline reports shared with each provider. A broader Alliance-wide report has been developed by the East Midlands Academic Health Science Network.

The Alliance level report contains a valuable summary of the issues and best practice identified alongside a set of recommendations to help us minimise restrictive practice and prevent the abuse of restraint.

#### **Mental Health Safety Improvement Programme – East Midlands**

The Alliance has agreed to work with the East Midlands AHSN to establish the East Midlands element of the national mental health safety improvement programme. The Mental Health Safety Improvement Programme (MHSIP) is commissioned by NHS England.

The Patient Safety Collaborative is part of the Academic Health Sciences Network (AHSN) and is the delivery arm for the patient safety programmes. The national delivery model for the MHSIP is led through sub regional formation of MH Patient Safety Networks supported by the Patient Safety Collaboratives within each AHSN footprint and is a mandated aspect of the commission.

The three priorities for the MHSIP in 2021/22 are:

- Suicide and deliberate self-harm
- Restrictive practice
- Sexual safety

The AHSN discussed the approach with the Alliance Medical and Nurse Directors at a workshop on 6 May. The national launch of the MHSIP is on 10 May.

The governance of the MHSIP will be linked to the more formal governance of the Alliance and the AHSN has asked the Alliance to support the identification of a chair for the programme and clinical chairs for the three priority work-streams.

## **Mental Health Clinical Networks in the East Midlands**

The Alliance Medical and Nurse Directors met on 6 May to hear from the AHSN about the new Patient Safety Collaborative, to better understand the approach of the Clinical Networks hosted by NHS England and to consider actions to strengthen the link between the Alliance and those networks.

The group heard from the clinical and managerial leads for the East Midlands mental health clinical networks. The presentation was well received and helped to improve the understanding of the group on the nationally prescribed objectives and approach of the Clinical Networks. Some further work will be undertaken to share a further level of detail on the purpose, membership and schedule of meetings for the 26 networks in the East Midlands. This will enable the Medical and Nurse Directors to offer thoughts on the overall scope and opportunities for aggregation.

The Medical and Nurse Directors supported the programme of work set out and encouraged the Clinical Network leads to develop a greater focus on mental health data quality and actions to address health inequalities.

There are established separate Medical and Nurse Director forums in the East Midlands. The group agreed to meet quarterly as a joint Medical and Nurse Director forum to consider provider issues of common interest.

## **Demand and capacity model**

Further work has been undertaken to develop an Alliance demand and capacity model for mental health. Further versions of the model have been issued to the providers for review and validation. The process to validate inputs and outputs is complete in most of the Alliance providers.

Provider specific reports have been issued to each Alliance member. The model also generates Alliance wide comparative information. A presentation of the model was made in March to the CEO group who agreed to extend the hosting period for the model with the North of England CSU to the end of June 2021. The extension will enable the validation process to be completed and further versions of the model to be released. It will also allow the Alliance time to identify a host from within the Alliance.

## **Research opportunity with the East Midlands Police Academic Collaboration**

The Alliance has agreed to support the East Midlands Police Academic Collaboration in a research proposal to consider learning and evaluation from different policing and mental health approaches. The National Institute for Health Research (NIHR) called for expressions of interest by the end of

March 2021. If successful, the Alliance and Police Collaboration will be invited to submit a more detailed proposal later in the year.

## **Learning workshop with crisis alternative leads and police mental health leads**

Linked to the joint police research opportunity referenced above, the Alliance proposed to the Chief Constable group in the East Midlands that we hold a joint workshop to share the models used in the region for joint mental health and police work, the successes and challenges. The Chief Constable group supported the workshop proposal, and it will take place on 9 June.

## **Use of technology to support seclusion processes**

St Andrew's have been working with the Academic Health Science Network and their Patient Information System supplier to consider how technology could support the reminder and record keeping elements of the seclusion process. The outcome of the work will be shared with the rest of the Alliance later in 2021.

## **Regional provider collaboratives (New Care Models)**

Two provider collaboratives have been given the green light to go live from 1 April 2021. NHS England transferred the leadership of CAMHS and Adult Eating Disorders in the East Midlands to provider collaboratives led by Northamptonshire Healthcare for CAMHS and Leicestershire Partnership for Adult Eating Disorders.

The new Alliance Executive Board will discharge the part two Board role for these Provider Collaboratives (and the Impact Forensic Provider Collaboration). These collaboratives are also looking at joint roles and common approaches to areas such as communications.

The Alliance held a joint Finance and Strategy Directors workshop with NHS England on Provider Collaborative financial responsibilities in February 2021. The workshop considered approaches to sharing risk across the three new Provider Collaboratives and future NHS England collaborative opportunities.

The Alliance Executive Board will also monitor progress with the Midlands Veterans High Intensity Service (HIS) that went live on 1 October 2020. This service covers the whole of the Midlands patch which is then sub-divided into three areas. The three HIS teams are multi-disciplinary and offer a variety of skills to the service. The Partnership is led by Lincolnshire Partnership Foundation Trust in collaboration with Coventry and Warwickshire Partnership Trust and Birmingham and Solihull Mental Health NHS Foundation Trust.

The HIS works collaboratively with providers with the aim to ensure veterans have access to:

- A crisis service, 24/7 crisis response, rolling out specialist community care to prevent avoidable admissions
- Therapeutic acute mental health inpatient care to provide stabilisation and rehabilitation in the least restrictive setting as close to home as possible
- Comprehensive continuous care coordination of care
- Family support and coordination of care.

## Regional and local provider collaboration

The CEO group met with David Nicholson and Richard Mitchell to discuss and inform their work for the NHS England Midlands region on provider collaboration. A spectrum of options will be proposed from a Provider Leadership Board through to merging providers to create a single organisation.

The four options on the spectrum are:

- Provider leadership board
- Lead provider
- Shared provider leadership
- Single provider organisation

There was discussion about using the Single Oversight Framework as a mechanism to identify the strongest organisation in a system to take a lead. Higher performing systems would have more freedom to determine their own model with a lead provider relationship seen as sufficient, unless the local system chooses to go further. More challenged systems could be expected to act to bring together their providers as a single organisation.

The Alliance Strategy Directors shared approaches to ICS/STP level provider alliances at their meeting in March. The group discussed the ICS Mental Health Board and Learning Disabilities Board approach in Derbyshire and the lead provider model in Northamptonshire.

## Chair and CEO meeting – 24 March

The Chairs and CEOs of the six providers met in March to discuss progress and next steps for the East Midlands Alliance. The CEOs provided an update on the breadth of joint work captured in this paper. The CEOs also set out proposals to move to a more formal Executive Board, with an independent Chair, based on a new Partnership Agreement.

The Chairs provided suggestions on the governance and restated the importance of the Alliance taking key decisions back to provider Boards with a common recommendation. It was agreed that a common Board paper would be prepared after each Executive Board meeting to include key decisions with recommendations to provider Boards.

The Executive Board will meet at least every two months and will undertake the part B strategic decision-making role for the provider collaborative boards in one forum (rather than separately multiple times). The first shadow Board will take place on 14 May, with a second meeting on 10 June to build momentum.

## Recruiting an independent chair

A role description for the Independent Chair has been shared with CEOs and Chairs for comment. The plan is to advertise for an independent chair in early summer with a view to them being in post later in the summer.

## Joint Board development session

The Chairs and CEOs agreed to hold a joint Board development session focused on clarifying the roles and links between regional provider alliances, ICS level provider collaboration and provider Boards. The first of these joint Board development sessions will take place in June or July.

## CEOs meeting with Claire Murdoch

The CEO group met with Claire Murdoch, the national NHS England lead for mental health and learning disabilities on 23 April. The CEOs discussed provider collaboration, the CQC, the role of mental health trusts on ICS Boards, the challenges of competitive premiums being paid to clinical staff and the progress of the Alliance in the East Midlands.

## Partnership Agreement

A new Partnership Agreement, based on the three Agreements in place in the East Midlands for the provider collaboratives, has been developed. The new Partnership Agreement formalises the arrangements for joint Alliance working and the link to the three Provider Collaboratives. A further version of the Agreement will be shared at the first Alliance Board on 14 May for comment ahead of circulating a copy to each provider Board for review and approval.

## Work programme for 2021/22

A work programme for 2021/22 will be agreed at the June Executive Board.

## Recommendation

1. The Board is asked to note the update and progress made in collaborative working through the East Midlands Alliance.
2. The Board is asked to note the agreement to develop a more formal Executive Board with an independent Chair based on a new Partnership Agreement.
3. The Board is asked to note the planned Board development session.

Graeme Jones 7 May 2021