Hertfordshire Partnership University
NHS Foundation Trust

15 March 2023

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Our Ref: FOI/04536

Thank you for your request concerning the reviews of Quality and Safety of Mental Health, Learning Disability and Autism Inpatient services.

Your request has been considered and processed in accordance with the requirements of the Freedom of Information (FOI) Act 2000.

All written and electronic correspondence between your Trust and NHS England, responding to instructions set out in an NHS England letter, dated 30 September 2022, titled 'Quality and Safety of Mental Health, Learning Disability and Autism Inpatient services', including:

1. **Reviews of safeguarding of care and any immediate issues requiring action now, including, but not limited to Freedom to Speak Up arrangements, advocacy provision, complaints, CETRs and ICETRs, and other feedback on services**
2. **Reviews of restrictive interventions, long-term segregations and plans for reduction**
3. **Reviews of culture**
4. **Feedback to the national team, regarding the inpatient quality programme run by Liz Durrant.**

We can confirm receipt of the above letter dated 30 September 2022, asking organisations to review the above four points.

We did not respond directly to the National Mental Health Director, so are unable to provide any written or electronic correspondence as requested[1].

However, under Section 16 – Duty to provide Advice and Assistance, we can confirm that, as a Trust, we responded in a number of ways, including:

- A communication from our Chief Executive Officer to all Trust staff, reflecting on the content of the programs and expressing their view of the importance of talking about the issues raised in the Trust. The CEO's communication acknowledges the high-quality care provided and delivered, in line with the Trust's values, and the knowledge that staff will continue to both place service users at the heart of everything, and to listen to what they themselves and their families are telling about their experience and care.
  The CEO also acknowledged that incidents do happen, and that staff must continue to report these; and that the Trust, as a learning organisation, will continue to improve and make things better. They asked all staff to use this opportunity to not walk by anything they feel is not in line with the Trust values, or where practice falls short. To continue to speak up, raising issues with line managers, contacting them directly, with an Executive Director or with the Trust's Freedom to Speak Up (FtSU) Guardian or one of the FtSU Champions.

[1] Section 1(1) Any person making a request for information to a public authority is entitled
(a) to be informed in writing by the public authority whether it holds information of the description specified in the request, and
(b) if that is the case, to have that information communicated to him.

- A discussion was held with the Executive Team and at the Trust's Board meeting, providing confidence in the good governance, scrutiny and monitoring and the positive experience for service users
- A session was held with the Trust's Senior Leadership Team (SLT), with group discussions and feedback collated, identifying key areas of focus noted by those present. Individual pledges were also made by members of the SLT regarding the action they were taking. A follow up discussion was held with the Trust's Executive Team, to agree the next actions and steps to take across the organisation
- The Executive Director, Quality and Safety (Chief Nurse) wrote to all Clinical Matrons, to remind them of the importance of consistently providing and maintaining standards in the inpatient services. Furthermore, to ensure that, as clinical leaders, they are receiving assurances, responding to any issues, and providing the necessary visibility and leadership on ensuring standards are maintained
- Local engagement with individual service users receiving inpatient care also provided an opportunity discuss and reflect on the programs
- The Trust's governance and assurance regarding the use of Restrictive Practice – including restraint, Long-Term Segregation and seclusion – has continued. This includes individual frequent and regular monitoring and review, reporting into the Strategic Business Unit's (SBU) Quality and Safety meetings and, the Trust's Restrictive Practice Committee. A further review of individual cases also been undertaken by the Trust's Deputy Medical Director, and with oversight from the SBU's senior leaders
- An assessment against the Mental Health Act Code of Practice regarding seclusion was completed, confirming that the Trust's practice is compliant
- The Trust assesses and audits the environments, with regards to ligature risk and management, and undertakes daily checks on the emergency equipment on all areas. Furthermore, a series of mock ligature calls were held in inpatient services to ensure that staff were clear about where the required emergency equipment is held, and their response time with all required equipment to an incident
- The Trust reviews every Absent Without Authorised Leave, and has established a Task and Finish group, led by the Trust's Head of Safety, considering any themes with risk assessment and management
- The Executive Director, Quality and Safety (Chief Nurse) participated in a Regional Mental Health Inpatient Quality Engagement event with Liz Durrant, as well as had individual discussions with Liz regarding the Trust's involvements in the quality programme.

Should you require further clarification, please do not hesitate to contact me.

Please find enclosed an information sheet regarding copyright protection and the Trust's complaints procedure in the event that you are not satisfied with the response.

Yours sincerely

Sue Smith

Sue Smith
Information Rights Officer

Enc: Copyright Protection and Complaints Procedure Information Leaflet.
If you would like to complete a short survey in relation to your Freedom of Information request please scan the QR code below or click here.