



Healthcare  
Improvement  
Scotland



# Applying the new Essentials of Safe Care within Mental Health

SPSP Mental Health Programme

Leading quality health and care for Scotland





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# Welcome

**Rachel King**

Unit Head

Transformational Change Mental Health  
Healthcare Improvement Scotland

Leading quality health and care for Scotland



# Breakout session agenda

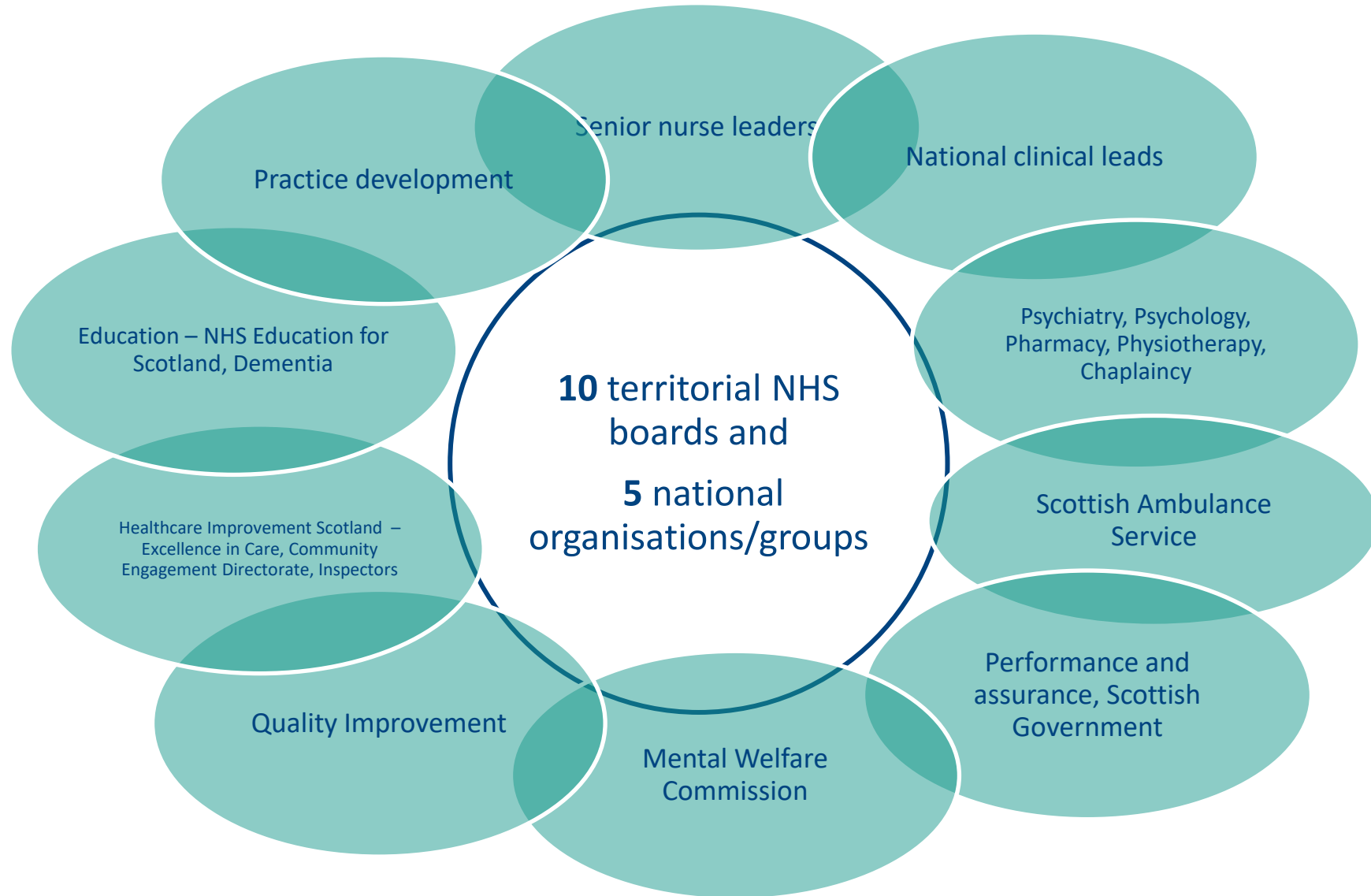
Time	Topic	Lead
13:35 – 13:45	Introduction and housekeeping	Rachel King
13:45 – 14:05	Presentation from NHS Grampian on their restructure of clinical governance within Aberdeenshire HSCP	Julia Wells and Vicky Henderson
14:05 – 14:15	Q&A with speakers	Scott McBride (facilitating room) Fiona Lacey (facilitating online)
14:15 – 14:20	Introduction to workshop	Rachel King /Scott McBride
14:20 – 14:45	Workshop Part 1: <b>A people-led approach to the planning and delivery of safe care and Effective and inclusive communication</b>	Rachel King Scott McBride Fiona Lacey Carina Bryce
14:45 – 15:00	Break	
15:00 – 15:25	Workshop Part 2: <b>Leadership at all levels to support a culture of safety and Safe clinical and care processes</b>	Rachel King Scott McBride Fiona Lacey Carina Bryce
15:35	Close	

# Aims of the breakout

- Consider the impact of effective clinical governance on quality and safety of care
- Explore the new essentials of safe care drivers and change ideas, and how these can be applied in the context of mental health care settings
- Share examples of essentials of safe care improvement work from health boards



# Who's here online and in the room?



# Scottish Patient Safety Programme (SPSP)



**SPSP aims to improve  
the safety and reliability  
of care and reduce harm**

## **Core themes**

**Essentials of Safe Care**

**SPSP Programme improvement focus  
Perinatal, Paediatric, Adults in Hospital and  
Mental Health**

**SPSP Learning System**

# Key changes

## Our Vision

**The delivery of safe care, improving outcomes for every person,  
every time across health and care**

## New Focus

**People Led , Inequalities, Clinical and Care Governance, Digital**

## Change at each level

**Change Ideas developed at practitioner, service and organisational  
level**

## Readiness for change

**Readiness for change assessment aligned to the Scottish Approach  
to Change**

# Essentials of Safe Care 2025



EoSC



Readiness  
Tool

## Our vision is

## Delivered through ...

## Which requires...

**The delivery of  
safe care,  
improving  
outcomes for  
every person,  
every time across  
health and care**

A people-led approach  
to the planning and  
delivery of safe care

Effective and inclusive  
communication

Leadership at all levels  
to support a  
culture of safety

Safe clinical and care  
processes

People and professionals are equal partners in shared decision making

Care and support is shaped to meet the needs of people

People, families, carers and staff are systematically listened to, and concerns  
are acted upon

Communication tailored to individual needs and preferences

People and teams feel safe and able to speak up

Team communication and collaboration

Leadership is compassionate and inclusive

Staff feel supported and valued

Learning system for continuous improvement

Everyone has the opportunity to learn and develop

Safe staffing and skill mix

Care is up to date and evidence based

Clinical and care governance structures support safety

Information systems that work together



# Essentials of Safe Care 2025 – how this maps to this mornings presentation

## Our vision is

**The delivery of  
safe care,  
improving  
outcomes for  
every person,  
every time across  
health and care**

## Delivered through ...

A people-led approach  
to the planning and  
delivery of safe care

Effective and inclusive  
communication

Leadership at all levels  
to support a  
culture of safety

Safe clinical and care  
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## Which requires...

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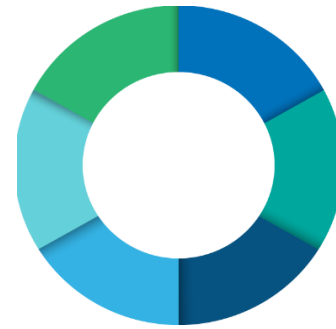
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Information systems that work together

# Governance in a HSCP system



Aberdeenshire  
Health & Social Care  
Partnership

**Dr Julia Wells**

Chief Nurse MHLD for Grampian HSCPs

**Vicky Henderson**

Central AHSCP MHLD Service Manager



# Background

**Grampian is a very complex health and social care system made up of:**

- 3 HSCPs
- A total of 292 hospital beds across 5 sites
- All services are delegated across the 3 HSCP, with Royal Cornhill Hospital sitting within Aberdeen City HSCP, whilst financial authority remains within NHS Grampian



Aberdeenshire is a complex system again divided into:

- North
- Central
- South

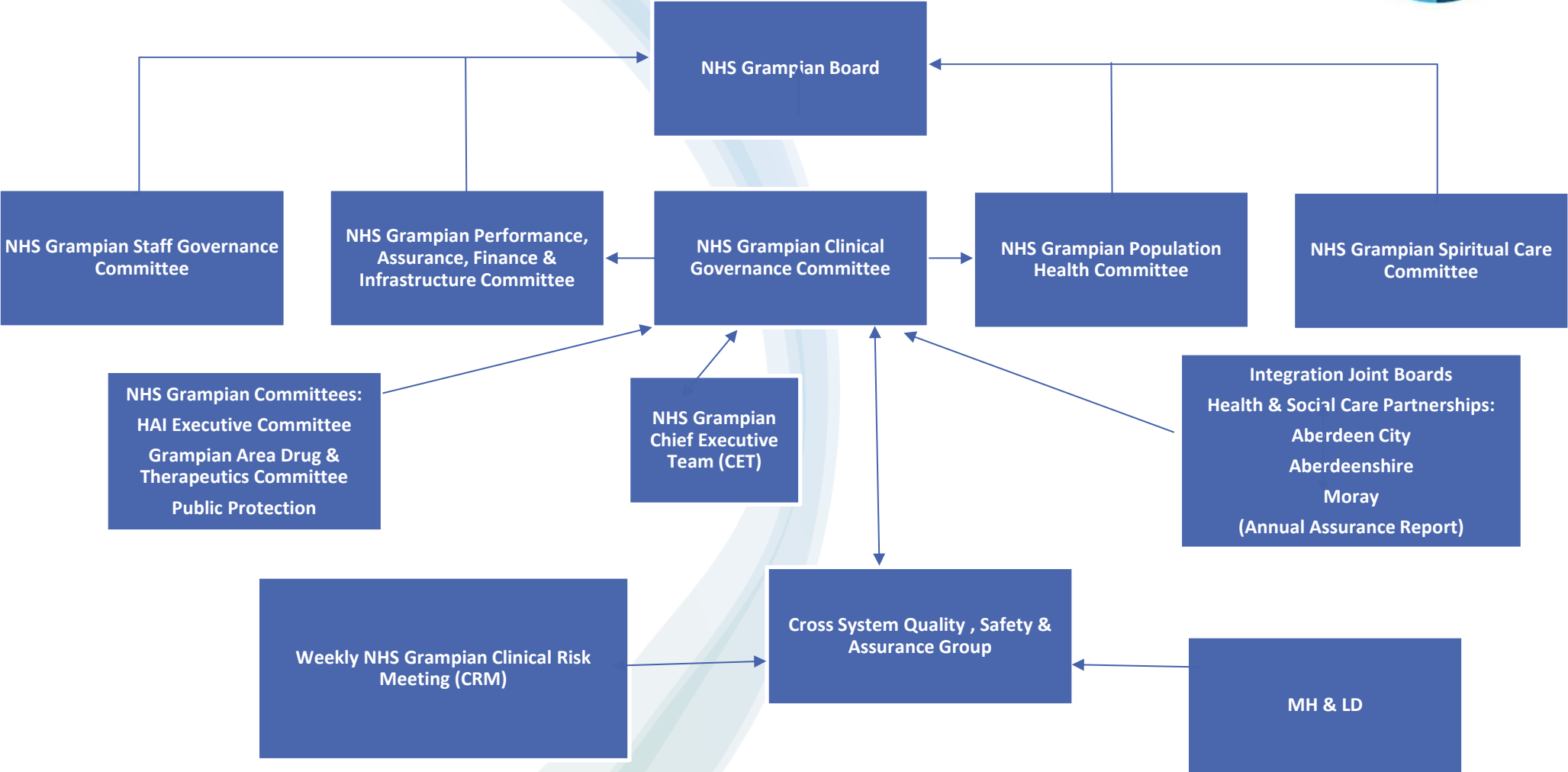
With each service currently managing MHLD Services per location



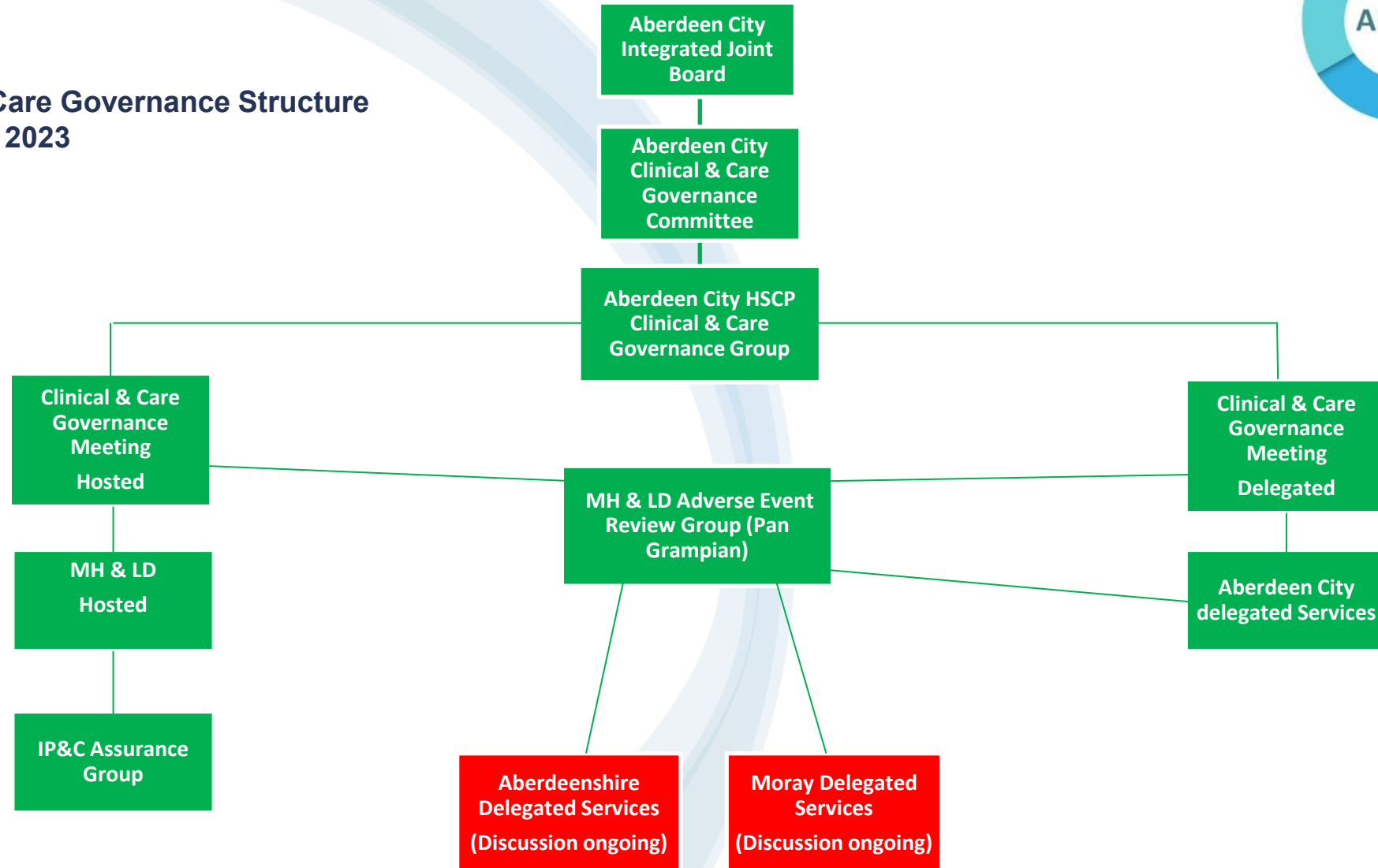
Range of services that there is responsibility for:

- Learning Disability – Health and Social Work
- Adult Mental Health – Health and Social Work
- Older Adult Mental Health – Health
- 2 x Inpatient Dementia Assessment Wards
- Drug and Alcohol Services
- Prison Health Care
- Psychology
- Medical staffing across – AMH, OAMH and LD
- Mental Health Officers

NHS Grampian  
Cross System Quality, Safety &  
Assurance Group ToR

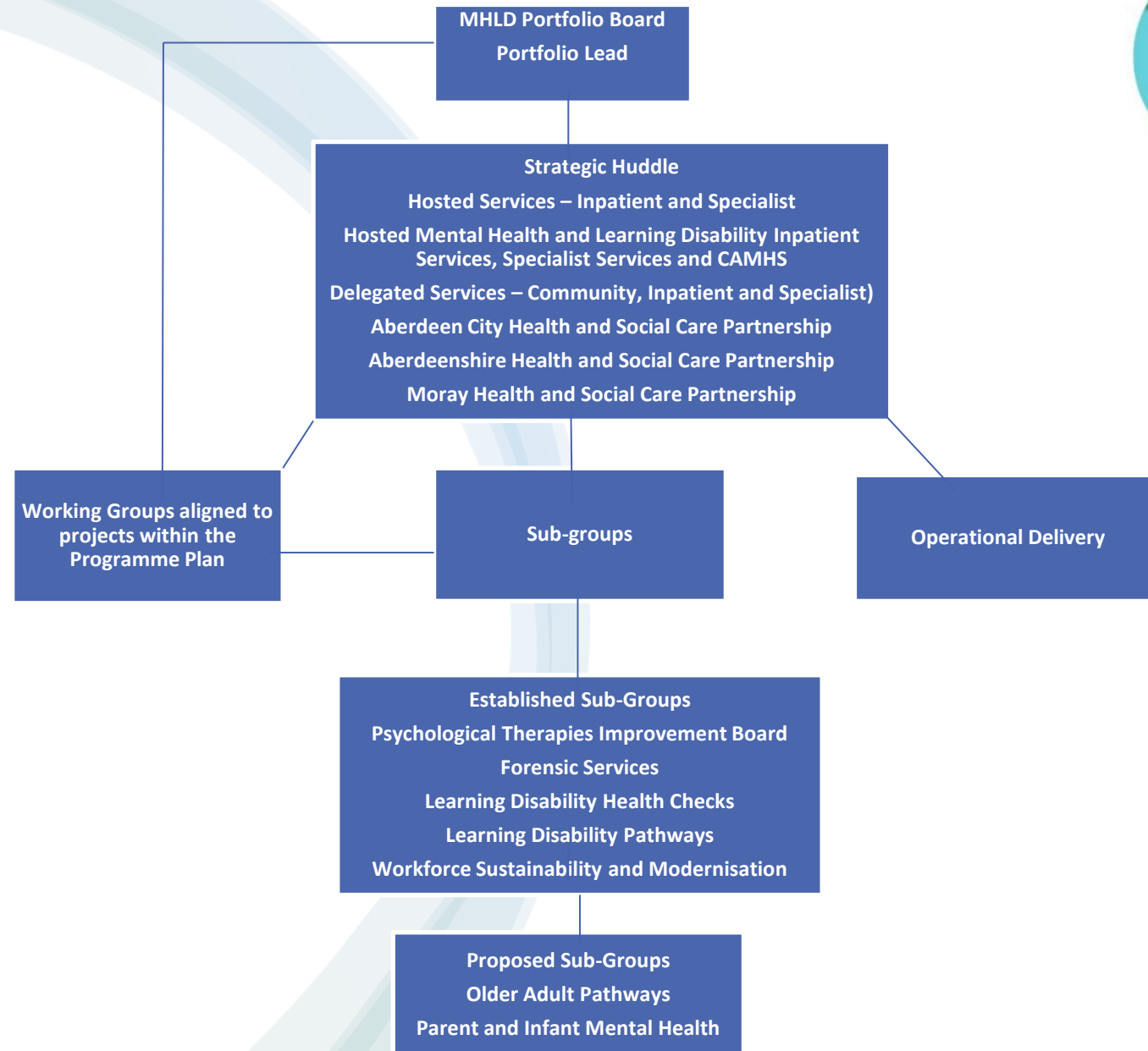


**MHLDs  
Clinical & Care Governance Structure  
September 2023**





# Grampian MHLDs Strategic Huddle ToR version 1.2 (May 2023)





## Aberdeenshire HSCP Governance structure



### Operational Working Groups

- Collaborative Care Home Support Team
- Clinical & Professional Oversight Group for Care at Home & Community Health
- Mental Health/ Learning Disabilities and Drug and Alcohol Services Governance
- Health & Safety Group
- Infection Prevention Control Operational Group
- Resilience Group
- Primary Care Services Group

Aberdeenshire  
Integrated Joint Board

Aberdeenshire HSCP  
Clinical & Adult Social  
Work Governance  
Committee

Aberdeenshire HSCP  
Clinical & Adult Social  
Work Governance Group

Aberdeenshire HSCP  
Clinical, Care and Risk  
Management Group

### Links to other Committees & Boards (via Lead Officers)

- NHS Grampian Clinical Governance Committee
- NHS Grampian Cross System Quality, Safety & Assurance Group
- NHS Grampian Clinical Risk Meeting (CRM)
- Aberdeenshire Council Communities Committee
- Adult Protection Committee
- Child Protection Committee
- Vaccination Transformation Board
- Violence Against Women Partnership
- Risk and Assurance Group
- Corporate Risk Management Steering Group (Council)
- Occupational Health and Safety Subgroup (Council)



## Complexity

- No dedicated governance structure for MHLD in AHSCP from point of integration to 2022.
- Once a meeting structure set up people didn't understand the purpose
- Governance meeting stopped taking place as people didn't understand why needed therefore attendance and reporting reduced.
- Professional leads escalated concerns which led to the meeting being reinstated.



# Challenges

- IT systems don't speak to each other to pull data, Social Work and NHS recording on different systems and access what not shared.
- No dedicated or shared business support time to gather data and present in reporting template
- The breadth of services discussed is wide ranging with various issues
- Time and capacity to be able to report.



## What did we do to address?

- A workshop was held with our lead for governance in AHSCP and NHS Grampian QIAT team with all key stakeholders, governance was explained, and participants were asked to identify how governance could be improved.
- This led to a functional model for reporting being trialled with positive results for the past two meetings.

Learning Disabilities, Adult Mental Health, Older Adult Mental Health and Drug and Alcohol Services.

- Leads for each functional service with others, devised the reporting template
- Professional leads support data gathering for the reporting template



## What did we do to address? (continued)

- At the same time, the lead for governance set up a workshop for all leads in AHSCP to attend to ensure everyone was on the same page for reporting requirements.
- A pan Grampian oversight assurance meeting was formed for the 3 HSCPs to feed into
- This pan Grampian oversight feeds into the Grampian MHLD board, which will be the three Chief Officers in main attending for cross system oversight and assurance.



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# Thank you

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