

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY (RQIA)

IMPROVEMENT NOTICE

Name of Trust: Acute Mental Health Inpatient Centre (AMHIC), Belfast Health and Social Care Trust (RQIA ID: 020654)	Name of Trust's Responsible Individual: Dr Cathy Jack, Chief Executive
Address of Trust: Belfast Health and Social Care Trust Trust Headquarters 2nd Floor Non Clinical Support Building Royal Victoria Hospital 274 Grosvenor Road Belfast BT12 6BA	
Issue Date: 16 August 2024	IN Ref: IN000019
Minimum standard requiring improvement: <i>The Quality Standards for Health and Social Care: Supporting Good Governance and Best Practice in the HPSS (DoH, 2006)</i> 5.1 Safe and Effective Care: <i>Safe and effective care is provided by the HPSS to those service users who require treatment and care. Treatment or services, which have been shown not to be of benefit, following evaluation, should not be provided or commissioned by the HPSS.</i>	
<hr/> Failure to Comply: Criteria 5.3 <u>5.3.1 Ensuring Safe practice and the Appropriate Management of Risk</u> The organisation a) <i>has effective person-centred assessment, care planning and review systems in place, which include risk assessment and risk management processes and appropriate interagency approaches;</i> b) <i>acknowledges and promotes the central place that patient, services users and carers have in the prevention and detection of adverse incidents and near misses;</i>	

- c) *has a safety policy in place which takes account of the needs of service users, carers and staff, the public and the environment ; and*
- d) *has properly maintained systems, policies and procedures in place, which are subject to regular audit and review to ensure:*
 - *risk assessment and risk management in relation to the acquisition and maintenance of medical devices and equipment, and aids and appliances across the spectrum of care and support provided.*

5.3.2 Preventing, Detecting, Communicating and Learning from Adverse Incidents and Near Misses

The organisation:

- a) *has systems and processes in place to prevent, identify, assess and manage and review adverse incidents and near misses across the spectrum of care and support provided;*
- b) *has reporting systems in place to collate, analyse and learn from all adverse incidents, and near misses, share knowledge and prevent reoccurrence of adverse incident or near miss;*

Specific failings to comply with the statement of minimum standard:

The Belfast HSC Trust has failed to comply with the statement of minimum standard and associated criteria above, by failing to ensure safe practice, appropriate management of risk, and preventing and learning from adverse incidents.

RQIA undertook an unannounced inspection to AMHIC commencing on 29 April 2024 and concluding with feedback to the Belfast HSC Trust's Senior Management team (SMT) on 23 May 2024.

Significant concerns were identified as part of the inspection relating to the Belfast HSC Trust's management of ligature risks in AMHIC, namely the replacement of internal doors/door handles. As a result RQIA invited Belfast HSC Trust representatives to an Intention to Serve an Improvement Notice meeting on 7 August 2024.

The actions proposed by the Belfast HSC Trust in relation to the management of ligature risks, namely the replacement of internal doors/door handles as described during the meeting on 7 August 2024, does not provide the necessary assurances with respect to the management of the risk.

There has been a lack of progress by the Trust to address the ligature risks associated with the internal doors/door handles in AMHIC over a significant period of time. A review of the Serious Adverse Incident (SAI) report, relating to the death of a patient in the unit on 9 May 2020, identified that a modified door handle was used as a ligature anchor point on two occasions in September 2019. A recommendation in the SAI report indicated, at that time, that the Belfast HSC

Trust's Capital Development Team confirmed that there was no alternative, reducing ligature risk, door handle that was compatible with the current electronic door access system. Subsequently the doors/door handles required to be replaced.

At the meeting on 7 August 2024 RQIA were informed that the Belfast HSC Trust have released some capital funding to commence a programme of replacement of the doors/door handles in AMHIC. It was good to note that some funding has been made available. However, the available funding is limited in terms of the number of doors that can be replaced. The information provided to RQIA indicates that the funding available will only permit doors/door handles to be replaced in one of the wards. AMHIC has five acute mental health inpatient wards. Additionally, work is only now commencing with the Trust's capital development team/estates teams to determine the most suitable replacement doors/door handles and the timescales associated with the work plan are not yet agreed.

RQIA were not assured by the governance arrangements surrounding the management of the risk associated with the door/door handles. The risk has been on the Mental Health Directorate Risk register since the risk was identified in 2019 and is rated as 'high' risk. A risk assessed as 'high' over a five-year period, indicates that the mitigations described as being in place are not effective risk reducing mitigations. There was no evidence to indicate that considerations had been given to escalating this risk to the Trust's corporate risk register. Consequently, it is not clear that the Trust's Executive Management Team and Trust Board are aware of the continued 'high' risk in this area. Trust colleagues committed to reviewing this in the context of the discussions with RQIA.

The lack of progress to replace doors/door handles is unsatisfactory and is a serious risk to the safety, health and welfare of patients.

In accordance with Article 39 of the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, we have determined to serve an Improvement Notice.

Improvements necessary to achieve compliance:

The Belfast Health and Social Care Trust must:

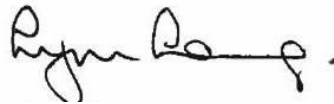
1. Develop a timely programme of work to replace the doors/door handles in AMHIC.
2. Share the developed programme of work with RQIA and ensure RQIA are kept apprised of any changes to the programme.
3. Review the Directorate Risk register with respect to the risk associated with the doors/door handles to ensure all controls, gaps and mitigations are accurately documented.
4. Following the review of the risk associated with the door/door handles consider whether the risk needs to be escalated to the Corporate Risk

Register until such times as the doors/door handles have been replaced and/or the risks are reduced.

5. Ensure effective governance processes are implemented to oversee the works associated with the replacement of the doors/door handles and the progress towards compliance with the actions outlined in the Improvement Notice.

The Registered Person/s/trust's Responsible Individual/s may make written representations to the Chief Executive of RQIA regarding the issue of an Improvement Notice, within one month of the date of serving this notice.

Date by which compliance must be achieved: 17 February 2025.



Signed.....

Director of Mental Health, Learning Disability, Children's Services and Prison Healthcare

This notice is served under Article 38 and 39 of The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Department of Health, Social Services and Public Safety Quality Standards for Health and Social Care (March 2006).

It should be noted that failure to comply with the measures identified in this Improvement Notice may result in further enforcement action by RQIA.