

North Tyneside CCG Annual Learning Disability Mortality Review (LeDeR) Report

01 April 2019 – 31 March 2020

Introduction

This is the 2019 – 2020 annual report presented by North Tyneside Clinical Commissioning Group (NTCCG) as required by the 'The NHS Long Term Plan January 2019'. A particular focus is on deaths for which a review was completed during the financial year (01 April 2019 – 31 March 2020). This annual report provides information about recommendations and intended actions that reviewers have made and the improvement work that has been implemented across North Tyneside during the year.

The persistence of health inequalities between different population groups has been well documented, including the inequalities faced by people with learning disabilities. Today, people with learning disabilities die, on average, 15-20 years sooner than people in the general population.

The Learning Disabilities Mortality Review (LeDeR) programme was established to support local areas to review the deaths of people with learning disabilities, identify learning from those deaths, and take forward the learning into service improvement initiatives. It was implemented at a time where there was a considerable focus on the deaths of patients in the NHS, and the introduction of the national Learning from Deaths framework in England in 2017.

The programme has developed a review process for the deaths of people with learning disabilities. All deaths receive an initial review; those where there are any areas of concern in relation to the care of the person who has died, or if it is felt that further learning could be gained, receive a full multi-agency review.

LeDeR Process in NTCCG

Key processes to deliver mortality reviews of people with learning disabilities have been established in North Tyneside. Notification of any death of a person with a learning disability comes to the Local Area Contact (LAC) in the CCG. The LAC then allocates the review to a named reviewer, there are 12 reviewers available to NTCCG and this is a mixture of CCG clinical staff and members of the Community Learning Disability Team (CLDT). North Tyneside have a local steering group which meets quarterly with the Deputy Director of Nursing, Quality and Patient Safety from the Clinical Commissioning Group (CCG) chairing and taking the Strategic lead. Since November 2018 when Bristol University stopped the quality assurance process, NTCCG has developed a robust quality assurance process to ensure that reviewers are supported and that we deliver high quality reviews and share the lessons learned across the system.

Activity during the reporting period 01.04.19 – 31.03.20

Table 1 below details deaths reported by year, the numbers of reviews completed, since 2016 up to March 2020 and include those cases which remain ongoing.

During this financial year NHS England offered all CCG's the opportunity to hand back backlog LeDeR cases based upon a set criteria, North Tyneside CCG did not submit any cases as we did not have a backlog.

Table 1

Year	Number of deaths notified	Completed reviews	Reviews allocated
01/04/16 - 30/03/17	5	2	5
01/04/17 - 30/03/18	9	3	9
01/04/18 - 30/03/19	11	12	11
01/04/19 - 30/03/20	8	10	8
Total	34	27	34

There are 7 cases which remain ongoing.

Patient Profiles

The age range of the patients reported during 19/20 is between 13 and 64, with the average being 42. Of the 8 deaths reported in the time period 5 died in their usual place of residence and 3 died in hospital. All of the patients were Whit British.

Identified Learning

There are a number of themes which have emerged from the completed reviews:

- Record keeping
- Mental Capacity Assessments and Deprivation of Liberty Safeguards
- Delays in diagnosis due to behaviours
- Lack of health promotion
- Clinic letters not in easy read format

Identified Areas of Good Practice

There are a number of good practice examples which have emerged from the completed reviews:

- Personalised care and support from the GP
- Excellent communication with the family
- Good involvement with MDT and family in relation to Best Interest decision making
- Comprehensive emergency health care plans
- Carers attending hospital and providing continuity

- Direct admission to wards which are familiar to the patient
- Longer GP appointments
- Regular annual health checks
- Good MDT communication and sharing of information

At the beginning of 2019 North Tyneside CCG delivered a number of learning events across the borough to patients, families, carers and professionals. The CCG has provided funding to the CLDT to continue the events as part of a rolling programme. North Tyneside has also adopted the STOP and WATCH campaign, sharing the resources across the system.

NTCCG is a member of the regional steering group and continues to share the LeDeR newsletter and information from the Confirm and Challenge group widely across North Tyneside.

Conclusion

North Tyneside CCG remains committed to delivering the LeDeR programme. The past year has been challenging due to the lack of resources especially in relation to the availability of trained reviewers and time for reviewers to undertake the reviews due to competing work priorities. Robust governance systems have been embedded to ensure the quality assurance process and to ensure learning is shared from the reviews across the system.

Stop People Dying Too Young Group Statement for CCG Annual Reports

- All people should be given the same respect, value, access to treatment and rights.
- Our lives are not valued as much as other people's.
- This has to change and it starts with you.
- You need to understand our rights and know the Law.
- Start by listening to us - hear our worries but also what we want from our life.
- Listen to the people who know us best. This might be our family, friends or paid support.
- Know how to make reasonable adjustments so that it is easy for us to get health care.
- Information, information, information - make it Easy Read and don't use jargon.
- Don't let us die too young.

The annual report will be uploaded on to the NTCCG website.