

Quality Report

2014 - 2015

Summary Quality Report 2014/15

Our goal is to deliver safe, effective and consistently high quality care.

Over the last year we have listened to people who have used our services, carers, commissioners and other partners. We have also carefully considered the thorough, expert and independent feedback we have received from organisations such as the Care Quality Commission – the national regulator which inspects the quality of our services.

This Quality Report helps us to look back over the last 12 months and see where we have made improvements for people who use our services and their carers.

It also helps us identify the areas where we have more to do.

The full report incorporates our Quality Account, which is as important as our Financial Account, and is formally reviewed by our auditors (PwC).

This is therefore an important statutory document that helps the people we serve hold us to account.

This is a summary and the full report is available from NHS Choices website.

About Sussex Partnership NHS Foundation Trust

In a year, there are approximately

- 3,600 admissions to our hospital services
- 52,000 outpatient appointments
- 430,000 community appointments

Last year (2014/15)

We look at quality under three headings:

- **Safety**
- **Experience**
- **Effectiveness**

Safety

The **Mental Health Safety Thermometer** is used nationally [link]. On one day each month data is collected for every patient on the ward about self harm, being a victim of violence, missed medication, patients who are subject to restraint and whether patients report feeling safe.

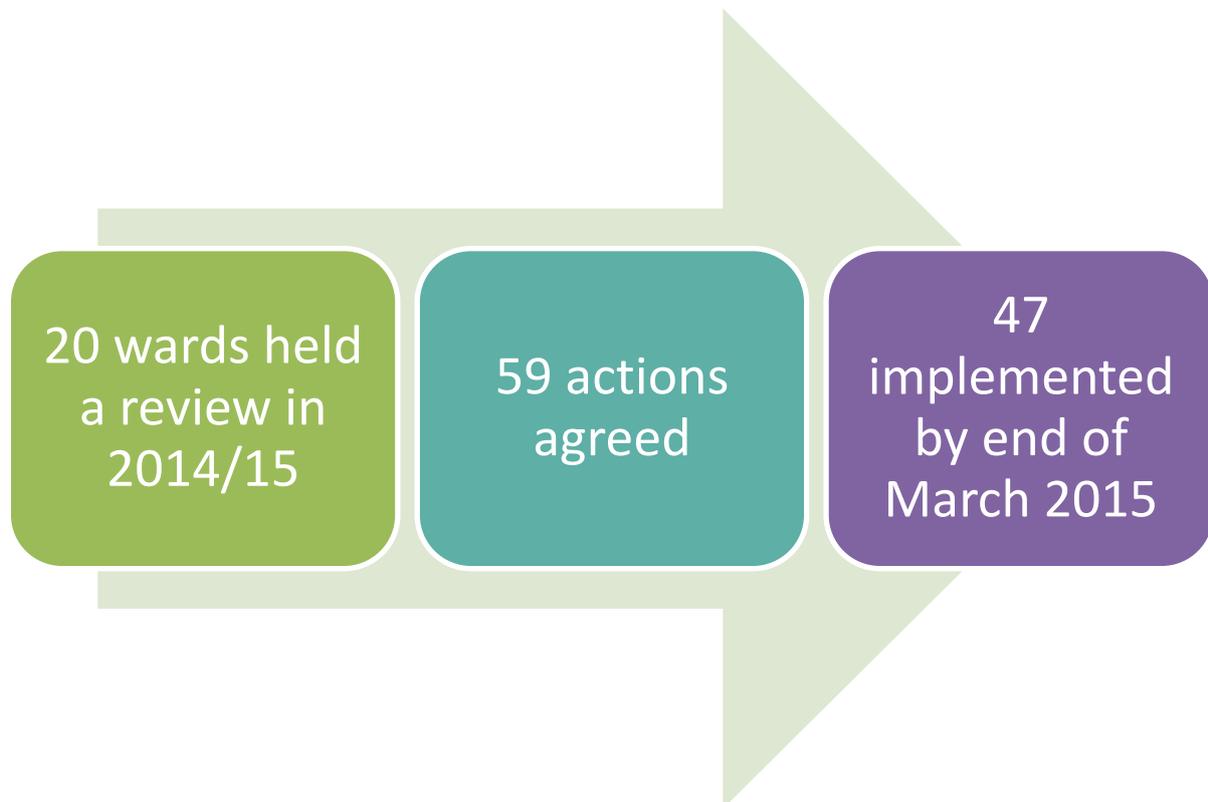


For example:

As a result of information collected via the Mental Health Safety Thermometer we have;

- Made changes to the way that staff report on pressure ulcers
- Improved reporting around the use of restraint and seclusion
- Launched a program to reduce the harm from falls:
 - Falls and fall-related injuries are a common and serious problem for older people and falls are the second leading cause of accidental or unintentional injury deaths worldwide. (WHO 2012)
 - Launched a pilot on four of our wards. We tested out Gripper Socks, and Fall sensor mats.
 - Amongst other things, we also held focus groups with patients, their families and members of the multi-disciplinary team. One issue raised by the groups and implemented was that patient safety wristbands would be coloured - but produced without text such as “requires assistance” in order to prevent stigmatisation.
 - On the four wards we saw the number of falls reduce by 42%
 - This programme is now being extended to cover the whole Trust

Patient Safety Peer Reviews are led by the Director of Nursing Standards & Safety and a team comprising of the ward manager, matron, and other designated clinicians from the ward along with a visiting ward manager. The team meet to discuss safety issues of the ward and then attend focus groups of patients, staff and carers. Finally the team meet to feedback what has been discussed on the day and agree 3 local actions to be completed within 3 months.

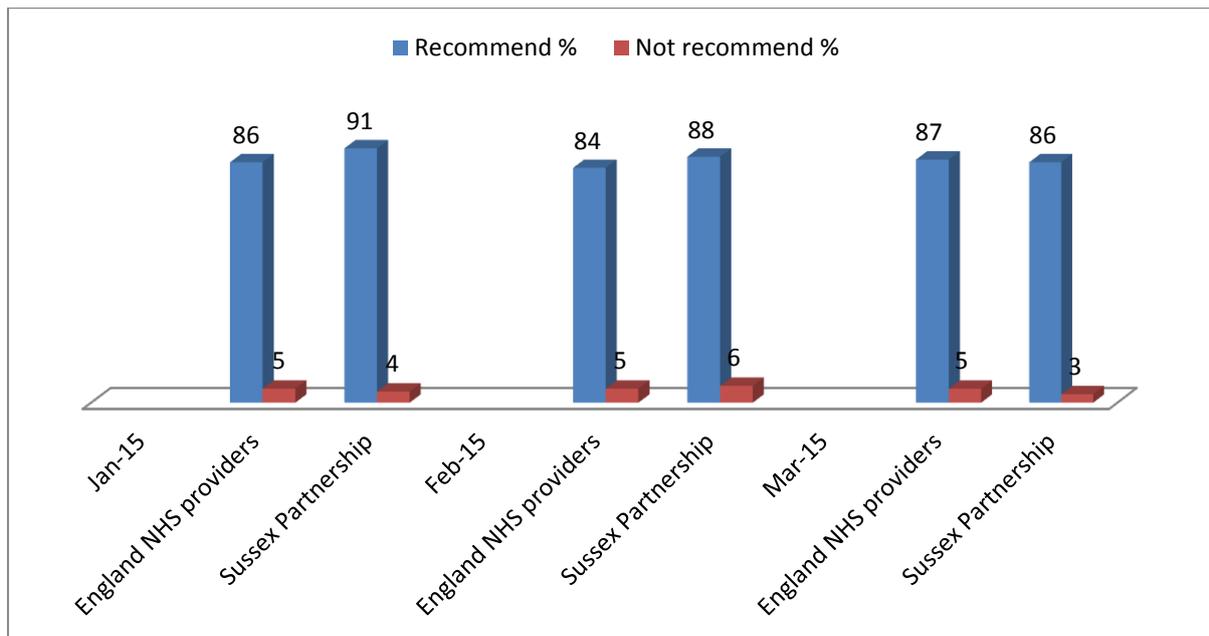


For example:

- Provision of lockable storage to help keep personal property safe
- Improved provision of information for carers
- Development of a carers' drop in clinic
- Environmental improvements / decoration (i.e. garden lighting, deep cleans, new flooring)
- A welcome board designed by young people using the service.

Experience

We routinely ask people who use our services, and our staff, about their experience using the **national Friends and Family Test (FFT)** across the Trust <http://www.england.nhs.uk/ourwork/pe/fft/>. The FFT is an anonymous questionnaire and asks people – Would you recommend this service to friends and family?



The above chart shows that the majority of people would recommend Sussex Partnership services to their friends and families. These scores are similar to other providers of NHS funded services across England.

We also receive written responses from people who complete the FFT:

“The staff are so supportive and show great empathy. I would highly recommend the service to others.”

“I think this service is very welcoming reception staff are very warm and helpful. (Nothing should change).”

“As a women only space this felt safer and more supportive than past experiences. Staff were friendly and professional. The accommodation and food was good.”

“There is one worker who has been very rude and judgmental when I have rung and I will be feeding this back to the team leader. Their attitude was mocking, sarcastic and so unpleasant that I avoided ringing the line for some time after a very upsetting call with them. It's a shame because the rest of the staff I have found to be kind and caring.”

“I have mixed feelings. Individual staff were mostly friendly and helpful but it felt quite disorganised at times and communication was hit and miss. This undermined my confidence.”

We have now established 'You said – we did' boards across many of our Trust sites.

These demonstrate that:

We are hearing the feedback being generated by the FFT

We are responding to it.

Much of the feedback we receive is simple and the issues raised quick for us to address. A recent example from Chalk Hill (children and young people's inpatient ward) highlighted that the service users' showers weren't working properly and they were quickly repaired in response. Some feedback raises issues which take longer to address.

We have worked with carers to implement the **Triangle of Care** <http://www.carers.org/news/mental-health-and-triangle-care> (a way of getting people who use services, carers and staff to work together).

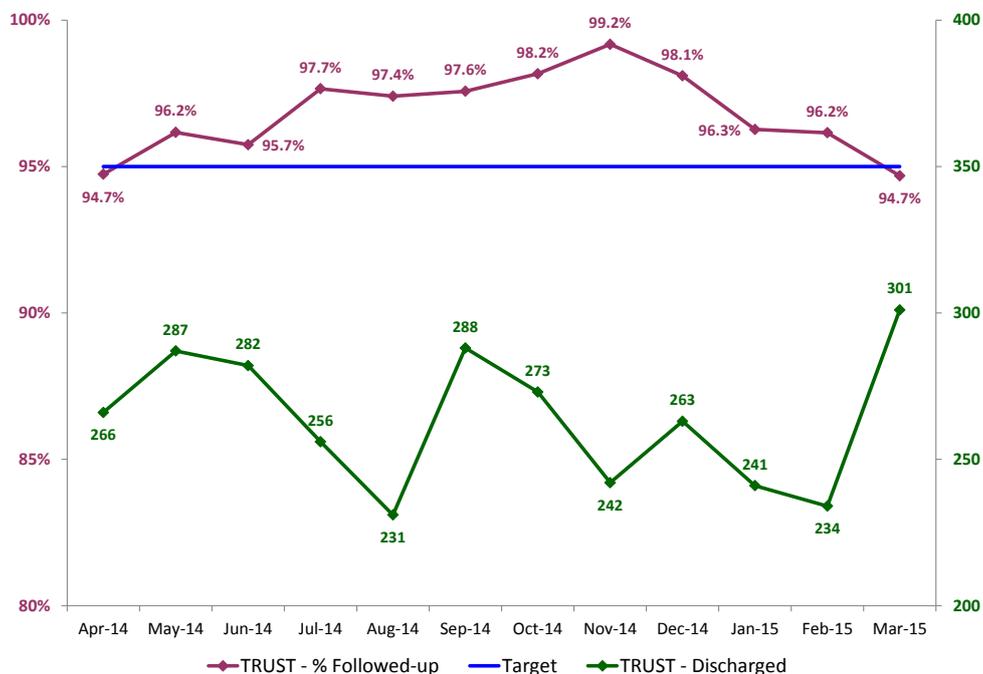
Common developments linked to the **Triangle of Care** have been: the provision of carers' awareness training for staff, the development of carers' support groups, the development of specific information available for carers, better identification of carers and greater involvement of carers in care planning, and improved links to carers' support organisations.

Effectiveness

We have participated in all the national clinical audits and confidential inquiries (for example the national inquiry into homicide and suicide). We have also conducted 32 local clinical audits. This systematic approach enables us to identify good practice and identify where we can improve.

When our patients were asked if they had blood tests in the last 12 months we were the third highest scoring Trust in the country for the answer being yes. However, we know that we need to improve the monitoring of physical health, particularly for monitoring of Body Mass Index (height and weight combined), blood glucose control, blood lipids, blood pressure, smoking, and alcohol use.

An audit of letters showed that the majority of service users do not receive copies of their clinic letters. There are some excellent examples of where a service user has opted in to receive letters and subsequently has consistently been copied in to all correspondence. These examples have been led by psychiatrists who have had clear discussions with both the service user and their admin support team. The process is clear to all. During 2015-16 this will be a Trust quality improvement priority led by the Executive Medical Director. A set of actions is being agreed. To ensure there are improvements another audit will take place.



The graph above shows the percentage of people seen within 7 days of being discharged from hospital. The national target is set at 95% and over 2014/15 Sussex Partnership achieved 96.9%. This indicator is particularly important as there is research evidence to show that people are at risk of suicide in the first week after being discharged from hospital.

Every time someone is not followed-up within 7 days this is investigated to make sure that lessons are learnt.

Based on the data, breaches mainly occur in relation to gaps in communication and with people who have no fixed abode or a chaotic lifestyle. We are installing a new electronic patient record system. The patient's notes will be available to inpatient and community teams alike at all times of the day and night. This will mean that the discharge plan, including the 7 day follow up pre-booked appointment, will be available to the community team at the point of discharge. Also, problems with communication are trickier when a person is admitted to a ward outside the area they live in. We will manage our in-patient beds more effectively and ensure that everyone is admitted to an acute bed in their on local area wherever possible.

Compliance – we are registered with the Care Quality Commission, which regulates the quality of health and social care services. The CQC carried out a full inspection of our services in January 2015 and this was reported in May 2015 (<http://www.cqc.org.uk/provider/RX2>).

The CQC rated us as 'requires improvement'. Its report highlighted services where the care we provide is outstanding and where staff are compassionate, kind and motivated to go the extra mile for the people they serve. However, it also identified the need for greater consistency across all our services and to be better at getting the basics right on issues like staff training and learning from incidents.

We've addressed areas where the inspection team raised concerns about the patient environment, improved the way we deliver staff training and have been talking with patients, public and staff about the steps we need to take to improve patient care. Our 2020 Vision describes what we will do to achieve consistently outstanding care across all our services: <http://www.sussexpartnership.nhs.uk/our-strategy>

Looking Forward

The examples above illustrate some of the improvements we have made and the challenges we still face. Our 2020 Vision sets out our ambitions for the next five years:

**Our overall vision:
Outstanding care and treatment you can be confident in**

- Provide the safest NHS mental health services in England.
- Use recovery as a guiding principle, inspiring hope and supporting people to achieve their goals and live meaningful lives.
- Provide care and treatment based upon reliable evidence that it works and where its impact on patients and their families is measured and published.

- Enable patients and carers to access the services they need easily, encouraging them to choose to receive their care from Sussex Partnership.
- Develop and maintain a culture of openness, transparency and innovation that values everyone's contribution in delivering high quality patient care.
- Have standard operating protocols across all our clinical services to help reduce and eliminate variation in outcomes and the experience of the care we provide.
- Provide services in clean, safe environments.
- Always look after the physical health needs of people using our services.

This year 2015/16

We will make progress against our 2020 Vision ambitions this year. For instance:

Sign up to safety – we have signed up to this national NHS campaign to improve safety. We will focus on reducing slips, trips and falls while being honest and open when things go wrong so that we can learn; We are also working to reduce the number of suicides by people who are in contact with our services.

Patient experience – shining a light on one of the Friend and Family test questions that we routinely ask: **Tell us if you have agreed with someone from NHS Mental Health Services what care you will receive?** We will be looking for consistent high standards from every ward and team.

Carer experience – we will work together with carers designing a survey and then working together to make the improvements needed

Effectiveness – improving physical health and reducing unnecessary re-admissions to hospital. Making sure the new patient records-electronic system Carenotes is properly implemented so that it can measure outcomes for people using our services and support improved clinical practice.

We need to challenge ourselves, be open to new ideas and have the conviction to put good ideas into practice, evaluate outcomes and share learning where this will improve practice.

Putting into practice our quality improvement priorities will help us provide the services where you will feel confident about your friends and family being treated, and where you would want to be treated yourself if you became unwell.