



### Tees, Esk and Wear Valleys NHS Foundation Trust – Draft Quality Account 2013/14

The Health and Partnerships Scrutiny Committee remit covers the Governance arrangements of the Trust and has the responsibility to comment on the Quality Accounts, in line with its Health Scrutiny Powers. The Adults and Housing Scrutiny Committee remit scrutinises the delivery and provision of mental health and learning disability services.

Members of the Health and Partnerships Scrutiny Committee have considered the draft Quality Account 2013/14 for Tees, Esk and Wear Valleys NHS Foundation Trust and attended both Stakeholder events over the past year. Members would like to acknowledge that the Stakeholder events are always well attended and informally structured to enable meaningful audience participation, with the opportunity for a free exchange of views.

Members agreed that the presentation of the document was user friendly and readable.

In respect of the Quality Improvement Priorities for 2013/14, Members have the following comments to make:

**To implement recommendations of the Care Programme Approach (CPA) review relating to improving care planning and communications between staff and patients** – Scrutiny Committee welcomed these two priorities and have looked forward to receiving assurances of improvement to the quality of care through the Care Programme Approach during 2013/14. Members also acknowledged that the aim of both these priorities was to improve service users and carers' experience of the care planning process, improve the standard of patient focussed care planning, reduce staff time spent on administrative tasks and increase face to face treatment time with service users. It was noted that the Trust were two years into a complex and significant three to four year programme of change with the first two years focussing on the development of an implementation plan and the commencement of the CPA project to implement the Plan.

Scrutiny Committee were pleased to learn that the Trust had established project governance arrangements with representation from each locality/speciality and two service users, formed links with other co-dependent Trust projects including recovery, model lines, GP communication, PbR and the Paris Electronic Care Record system (PARIS) as a significant part of the CPA project would be delivered through these projects.

The Committee welcomed the introduction of a Care Plan for all patients and the invitation for them to be involved in the CPA project. Members were pleased to note that if a patient regressed the Care Plan would be reviewed and alternatives tried.

Members were also delighted at the development of the service user information folder to include new CPA information leaflet; appointment information; community team and contact information; mental health/service fact sheet and recovery diary.

Members noted that these Priorities appeared in the 2014/15 Quality Accounts as they underpinned everything the Trust do and that the Trust was focussing on further implementing the recommendations via the CPA project.

**To improve the delivery of crisis services through implementation of the Crisis review's recommendations** – Scrutiny were advised that the aims of this Priority were to have a standard of high quality crisis and home treatment services across the Trust, avoid unnecessary admissions to inpatient care and provide more care closer to home and finally to improve service users' experience of crisis services.

Scrutiny welcomed the consistent operational policy for Durham, Darlington and Teesside with new out of hours arrangements to ensure 24/7 access with an additional night shift co-ordinator covering all teams in each Locality to co-ordinate activity. Members also welcomed new shift patterns to match staff numbers to peaks and troughs in demand, the development of better working relationships with inpatient wards to ensure safe and supported discharge and implementation of the Friends and Family Test to help monitor the patient experience.

Committee noted that in County Durham and Darlington medical input into crisis teams had been standardised and standard work for crisis handover had been applied. Members welcomed the development of a new model for a crisis/recovery house, a review of all staff skills and a training plan developed for 2014/15. Members were particularly pleased to learn that in relation to Tees Esk and Wear Valley a centralised Section 136 suite for Teesside at Roseberry Park was being piloted with formal arrangements to be agreed based on the success of the pilot.

With regard to staff, Members were pleased to learn that an assessment had been made of staff stress within the crisis teams and action taken where required. Scrutiny Committee look forward to the establishment of an internal crisis network for staff to share issues, solutions and best practice.

**To further improve clinical communication with GPs** – Members welcomed improved clinical communications with GP's which ensured a standard of high quality communication with GPs across the Trust that was timely, focussed and highlighted what they needed to know. It also ensured that services users were offered copies of any communications in relation to their care.

Scrutiny Committee noted that to date the Trust has achieved agreement of the project plan in June (revised December 2013), developed a standard template which was aligned to the old and new CPA documentation which could be generated electronically on PARIS and developed a standard template for communication with GPs.

Members noted that further work to be completed included the testing and implementation of the template and development and piloting of a standard process for GPs to access expert advice via telephone and email which is on track for implementation in 2014/15.

Quality Improvement Priorities for 2014/15 are and Members have the following comments

**Suicide prevention with particular emphasis on increasing suicide prevention training** – Members welcome the development of a suicide prevention framework and implementation plan understand the need for the development of a training needs assessment and training plan.

**Implement recommendations of CPA review including improving communication between staff, patients and other professionals and treating people as individuals** – Members again, acknowledge that this priority has arisen following the success of the Care Programme Approach Review and support its inclusion. Members believe that improved service user experience and involvement in personal recovery will be a huge benefit to improving service delivery. Members also recognise that services should be personal and meaningful and that carers should feel recognised, valued and supported.

**Embed the recovery approach in conjunction with CPA** – Members look forward to the development of an implementation plan to ensure the principles of recovery are embedded within all key programmes and welcome the development of an implementation plan to increase opportunities for co-production.

**Managing pressure on acute inpatient beds** – Members embrace this priority as it will ensure patients are treated close to home and within the unit that has been identified for their locality. It will also reduce 'out of locality' admissions to the Trust target. The actions to monitor the impact on patients and additional staff time associated with out of locality admissions and implementation of the agreed out of locality admissions action plan are welcomed.

Overall, Health and Partnerships Scrutiny Committee welcomed the opportunity to comment on the Trust's Quality Accounts and are pleased with the Trusts progress against the chosen priorities, in a challenging year for all NHS organisations. Members would like to receive six monthly reports on the progress being made, to enable them to provide a more detailed and valuable contribution to the Quality Accounts in the future. They would also like to continue to be invited to Stakeholders events.

Councillor Wendy Newall  
Chair, Health and Partnerships Scrutiny Committee