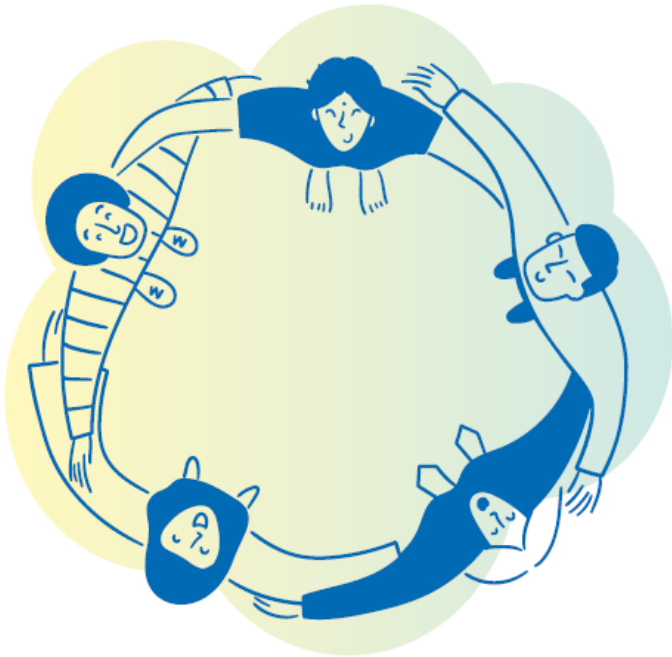




Tees, Esk and Wear Valleys
NHS Foundation Trust

Tees, Esk and Wear Valleys NHS Foundation Trust Quality Account Quality Priorities Update 2024/25

**Darlington Health and Housing Scrutiny Committee
15 January 2025**



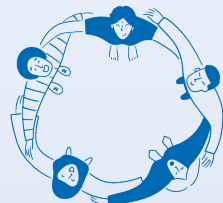
What is a Quality Account and why do Trusts have them?

A Quality Account is a report published annually about the quality of services and improvements offered by NHS healthcare providers. The public, patients and others with an interest, will use a Quality Account to understand:

- ❖ What an organisation is doing well
- ❖ Where improvements in service quality are required
- ❖ An organisation's priorities for improvement for the coming year
- ❖ How the organisation has involved people who use their services, staff, and others in determining these priorities for improvement.



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- ❖ As part of the Trust's ongoing commitment to co-creation, it was agreed that from 2024/25, development of the Quality Account Quality Priorities would be **led by people with lived experience**. This approach enables the voice of service users, relatives and carers to be at the heart of quality improvement across the organisation.
- ❖ Quality Priorities were developed at a dedicated **service user and carer Focus Group**. Members of the Group were recruited through the **Involvement Team** and included those with personal lived experience and also those currently working with local Involvement Networks across the Trust and other community organisations.
- ❖ The Focus Group (21 March 2024) was followed by two Care Group Co-creation Board sessions to further develop the priorities. Key quality issues from **national and local sources** (including learning from Co-Creation Boards, Lived Experience Directors, Involvement Networks, serious incidents and other governance intelligence) were shared with the Group to help inform development.
- ❖ The **Trust's Strategic Quality Standards Group** have supported the new approach and have maintained oversight of this year's quality priorities. This has included review of proposed measures and metrics that align to each priority.
- ❖ The progress on the quality priorities will be reported to external partners and demonstrated within the annual Quality Account which will be published by the end of June 2025.

The Co-Creation Boards have developed the Quality Priorities for 2024/25, and these were endorsed by the Trust's Quality Assurance Committee 04 April 2024:



Patient Experience: Promoting education using lived experience



Patient Safety: Relapse Prevention



Clinical Effectiveness: Improving Personalisation in Urgent



Quality Priorities 2024/25 including key updates



Quality Priority 1

Patient Experience: Promoting education using lived experience

Why is this important?

This priority is focused on improving accessibility of services and early intervention. Through the identification and review of themes of patient feedback regarding access to services; the use of the Recovery College and patient stories, we will establish a cycle of learning, which will be shared with key Partners.

What are we doing for this Quality Priority, and by when:

Our Lived Experience Directors and Involvement Team have experience of developing training sessions for clinical and non-clinical colleagues. The sessions include people with lived experience sharing their experience of services to support others to learn from a lived experience perspective. A recent example of this, has been training delivered to inpatient Eating Disorder Services. There was positive feedback from the clinical team about how this has further supported their understanding and helped inform their clinical practice.

The Lived Experience Focus Group and Co-creation Boards told us that it was particularly important for clinical staff in Urgent Care services (including Accident and Emergency, and Primary Care) to understand what is important to patients who present at these services and how they can help to improve patient experience.

The following measures have been developed to help us deliver this Quality Priority:

- 1) **By September 2024 (Quarter 2 24/25), we will develop a programme of training that can be offered. This will include facilitating training sessions as well as some formal workshops, in addition, referring to online resources accessible via the Trust Intranet pages and other associated communications. We will also ensure that this forms part of the personalised care training that is being delivered internally and externally. (Leads: Directors of Lived Experience)**
- 2) **By March 2025 (Quarter 4 24/25), we will deliver the identified training programme throughout Quarter 3 and Quarter 4 to internal and external colleagues and Partners (considering voluntary services) (Leads: Recovery College, Directors of Lived Experience, Peer Workers, Involvement Team)**

How will we know we have achieved the outcomes of this work and what will we measure?

- 1) A training programme for 2024/25 that is available and being accessed by TEWV staff and colleagues from Partner organisations.
- 2) We will hold a record of the number of staff that have attended sessions during 2024/25 by speciality and organisation.
- 3) Evaluations of people's experience following the training programme – this will include whether people attending feel they have gained new knowledge and skills about people's lived experience of mental health, learning disabilities and autism, and how this can help them support patients.



Key Updates:

- ✓ A Training Lead has been recruited to the Involvement and Engagement Team and commenced in post October 2024. Their role is focused on consolidating existing training packages that the Trust currently use about lived experience and coproduction. This review will incorporate training on personalised care planning. Another function of the Training Lead role will be supporting the training roll out across the Trust.
- ✓ The Trust Safeguarding and Public Protection Team have been working with groups of young people via Participation Groups and schools to look at what young people think about feeling safe. The voice of the young people will be collated and used in Safeguarding Training and other key work in relation to the impact of parental mental health on children to increase awareness and support early identification of needs for families.



Quality Priority 2

Patient Safety: Relapse Prevention

Why is this important?

This priority is focused on timely and proactive access to support, for patients who experience relapse, in order to minimise harm, particularly through the effective use of well-being plans.

What are we doing for this Quality Priority, and by when:

The following measures have been developed to help us deliver this Quality Priority:

- 1) **By December 2024 (Quarter 3 24/25) we will review how wellbeing plans are used for people in community services and establish best practice standards for wellbeing plans (Leads: Directors of Lived Experience, facilitated with SDMs and Clinical Networks, Head of EPR).**
- 1) **By March 2025 (Quarter 4 24/25) we will co-create an audit tool to review the plans (SDMs, Clinical Audit and Effectiveness Team).**
- 1) **By June 2025 (Quarter 1 25/26) we will measure if wellbeing plans are consistently being in place and undertake an audit of wellbeing plans to assess the quality of plans (Clinical Audit and Effectiveness Team, Operational Colleagues).**

How will we know we have achieved the outcomes of this work and what will we measure?

- 1) An established standard for wellbeing plans within our Community Teams.
- 2) An audit tool that clearly assesses key standards associated with wellbeing plans.
- 3) An assessment of the quality and application of wellbeing plans.

Key Updates:

- ✓ Review of Wellbeing Plans has been progressed, and further work continues on best practice examples for people using community services. Relapse prevention will be further supported through the implementation of the new Personalising Care Planning Policy, which will be live from February 2025. A communication and engagement campaign is currently in development and will last 6 months to embed the new policy. Practice guidance, best practice approaches and documentation to support clinicians and staff is also being developed to help embed the policy.
- ✓ Outline guidance for wellbeing plan content is also now available to all staff via the 'Ask Cito' robot.





Quality Priority 3

Clinical Effectiveness: Improving Personalisation in Urgent Care

Why is this important?

This priority is focused on improving the effective use of the 'my story once' approach. The priority will be linked with the community transformation work and also aims to improve patient experience when accessing urgent care services.

What are we doing for this Quality Priority, and by when:

The following measures have been developed to help us deliver this Quality Priority:

- 1) **By September 2024 (Quarter 2 24/25)** the 'My Story Once' principles will be incorporated into the new Personalising Care Planning Policy. This will be circulated for consultation (Leads: Directors of Lived Experience, ALD SDM)
- 2) **By December 2024 (Quarter 3 24/25)** we will review and update the associated online training pack which is currently named 'CPA Module' (which will include the 'My Story Once' approach) (Lead: Directors of Lived Experience)
- 3) **By March 2025 (Quarter 4 24/25)** 85% of staff will have undertaken the online training module on personalising care planning (Leads: Care Group Managing Directors)
- 4) **By June 2025 (Quarter 1 25/26)** we will assess the impact of improvements in personalisation in urgent care by evaluating the quality of patient experience feedback (Leads: Directors of Lived Experience)
- 5) **By June 2025 (Quarter 1 25/26)** we will undertake a baseline audit to demonstrate the impact / changes following implementation of the new policy (Leads: Directors of Lived Experience)

How will we know we have achieved the outcomes of this work and what will we measure?

- 1) A Trust Policy ratified and published.
- 2) Updated online training pack available.
- 3) Staff compliance with undertaking the online training module (achieving above 85%).
- 4) Positive patient experience feedback.
- 5) High quality care plans in place within Urgent Care.

Key Updates:

- ✓ The 'My Story Once' principles have been incorporated into the Personalising Care Planning Policy and the approach is modelled in the training that has been developed.
- ✓ The Policy was circulated for Trust wide and external consultation and is due for approval and launch (supported by communication and training campaigns).
- ✓ The training package has been reviewed and updated.

