

OHFT Quality Report

Oxfordshire Health Overview and Scrutiny
Committee
25th June 2020

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Approach to Quality



- Vision – outstanding care delivered by outstanding people
- Current quality rating by the CQC is Good – our ambition is to achieve outstanding
- To achieve outstanding we need to;
 - ❖ Have a strong patient/ carer voice in our developments
 - ❖ Ensure staff are fully engaged and feel valued
- We are committed to make year on year improvements to quality
- Invested in a healthcare improvement centre –develop staff capacity and capability to make and sustain changes
- Aim that every member of staff is empowered/ takes responsibility to improve the quality of care where they work
- Quality governance framework led by the Board to promote and learn from improvements and to keep an oversight

Context and Covid-19

- Note earlier presentation today.
- Outbreak transformed services, created challenges but also many opportunities.
- Examples of innovations;
 - New patient/ general public helplines for mental health support (more than 1,000 calls), support with managing diabetes, carers befriending etc..
 - New patient pathways developed with system partners to provide psychological support
 - Over 10,000 on-line video patient consultations completed – about 60% of all appointments (from 15% before covid)
 - Redeployment of staff to improve system capacity for core services and setting up special clinics with primary care for suspected/confirmed patients
 - Letters to loved ones on the ward – more than 100 letters received to date
- Some services are still in a response phase i.e. district nurses, care home support services, dental service. However recovery work is also starting.

Last Years Objectives

- 14 quality objectives were identified in discussion with staff, governors and commissioners.
- Key progress – mostly up to end of January 2020.

Quality Priority	Key Progress (up to Jan 2020)
1. Improving Staff wellbeing and retention	<ul style="list-style-type: none"> - Schwartz rounds were introduced across a number of sites from Sept 2019. Designed for staff to come together to share stories, reflect on and explore the emotional challenges of working in healthcare. Feedback has been extremely positive. - We rolled out cultural ambassadors to support BAME staff – 9 staff were trained. - An employee assistance programme was procured and launched to offer staff support 24/7 i.e. counselling, legal information and wellbeing resources. - 2019 national staff survey results showed a slight improvement in staff engagement from last year and the Trust achieving higher than average compared to other NHS trusts. In relation to ‘does the Trust take positive action on health and well-being’ there was an improvement from last year but more work to do (responses from 2,711 staff).
2. Improving Staff recruitment	<p>Development of Oxford Health nursing ‘offer’ to enhance recruitment. Initial achievements being:</p> <ul style="list-style-type: none"> - The first group of 22 nursing associates qualified in 2019. The two-year course combines paid work with academic study. A further 122 nursing associate trainees are currently in training with 23 of the trainees due to qualify in June 2020. Approx. 50% are likely to go onto the degree apprenticeship to become full registered nurses. - The Trust is the host for the Thames Valley nurse cadet programme which opened in February 2020 for 16-19-year olds. This is an innovative and creative way of ‘growing’ interest in healthcare careers and allows us to engage with young people offering an entry route to apprenticeships. - The first cohort of Peer Support Workers (n=16) in Oxfordshire are now recruited into posts and another cohort of around 20 people are going through training. - We launched large scale recruitment campaigns during Covid-19 which have been successful. Over 700 local people contacted the Trust resulting in over 200 offers of employment. - Improved candidate experience during recruitment through use of a new system.

	Quality Priority	Key Progress (up to Jan 2020)
3.	Improving the triangulation of information to improve decision making	- A new web-based dashboard was developed and rolled out. This improves access to real time information and presents different data sources in one place to enable triangulation of information related to activity, workforce, finance and quality.
4.	Improving Patient, carer and family experiences	<p>- A refreshed patient experience and involvement Strategy was approved in May 2019 and launched. Some achievements include; the development of a new app called “My journey” for anyone accessing mental health services, a post diagnosis pack was developed with parents accessing the children’s neurodevelopment pathway, 2 films have been produced to help reduce anxiety about going to the dentist for people with a learning disability, patient stories have been used as part of the service redesign of children’s integrated therapies. Co-production has also been strong with patients joining staff interviews, assisting in designing garden spaces and developing resources.</p> <p>- Under the friends, family and carers Strategy we have achieved; e-learning on carer awareness co-developed with carers and launched in June 2019, 6 volunteer carer support roles have been appointed and a series of co-produced carer resources have been developed including a new handbook for community hospitals and resources available for bereaved carers.</p> <p>- In 2019/20 the Trust received 20,926 surveys through our internal mechanism, with 93.9% saying they would recommend the service received. In addition to this internal survey we use a range of other methods to gather feedback.</p>
5.	Improving the lives of people with Dementia	<p>- The Trust’s new dementia Strategy co-developed with people who live with dementia was approved in August 2019. The Strategy has five workstreams around living well with dementia, each with a named clinical lead.</p> <p>- Workshop held in November 2019 to identify workplan.</p> <p>- We are one of the national pilots for the ‘ageing well’ programme to respond swiftly to support older people in their own homes.</p>
6.	Improving End of life and palliative care	<p>- The Trust developed an End of Life Strategy relating to children and adults.</p> <p>- Nine Staff engagement workshops were undertaken in 2019 to develop skills and improve the use of the End of Life care plan.</p> <p>- We are participating in a system review of End of Life service provision in Oxfordshire to identify opportunities for pathway improvements.</p> <p>- A monthly audit is undertaken and the results inform the work of the End of Life Steering Group, currently there is a focus on asking/ understanding patients spiritual needs.</p>

	Quality Priority	Key Progress (up to Jan 2020)
7.	Improving the safe transition of young people from child and adult mental health services	<ul style="list-style-type: none"> - Across Oxford Health there are now jointly written and agreed transition protocols between CAMHS and AMHT. - Monthly transition meetings are held attended by both child and adult mental health services to discuss the care to patients in transition.
8.	Suicide prevention	<ul style="list-style-type: none"> - Progress has been made against the self-harm and suicide prevention Strategy workplan for 2019/20. This includes; follow up within 48 hours for all mental health patients when discharged from hospital, introduction of safety planning supported by training, focus groups held with carers to understand better the support they need as part of safety planning, and a support group was set up to held psychiatrists affected by suicide. - The Oxford Suicide Centre has led the self-harm monitoring system reported to the Department of Health and Social Security and the National Suicide Prevention Strategy for England Advisory Group to assist with the government's suicide prevention policy in relation to the pandemic. - The Trust has contributed to the multi-agency suicide prevention strategies and led on a bid to develop a standardised psychosocial assessment for those at risk of suicide/repeated self-harm.
9.	Reducing the use of restrictive practice	<ul style="list-style-type: none"> - A 'Positive & Safe' committee has been established chaired by the Chief Nurse to continue to reduce the use of restrictive practice through a quality improvement approach and benchmarking good practice from across the Country. - The Trust joined the NHS Improvement QI collaborative on reducing the use of restrictive practice, 3 wards were involved and some improvements have been seen in the reduction of restrictions by; increasing activities, improving engagement in meal preparation and helping patients to get to know staff. - The Trust's training certification application has been successful and the PEACE training department will be submitting the required evidence over the next 6 months. We will become a commissioner and provider of externally accredited de-escalation and restrictive practice training. - Core data on restrictive practices at team level was developed with teams and is provided monthly. This supports teams and PEACE champions to review their local practice and guide quality improvement work.
10.	Reducing the harm from violence and aggression on mental health wards	<ul style="list-style-type: none"> - A series of small quality improvements have been started to impact on reducing harm from violent and aggressive incidents, these include; new roles to provide more activities for patients, more structure to debriefs with patients following an incident of violence, using team safety huddles and running learning events at ward level. - The use of restrictive practice as a result of violence and aggression has reduced.

	Quality Priority	Key Progress (up to Jan 2020)
11.	Reduce falls that cause harm on community hospital wards	<ul style="list-style-type: none"> - All community hospital wards have started a joint quality improvement project using a series of tests of change alongside learning events for example improving the quality of risk assessments and introducing stickers for drug charts to assist in identifying culprit drugs and their indication for use. - In comparison to previous years the number of patients that have fallen resulting in harm and the level of harm caused seems to be decreasing however it is too early to describe a trend. In 5 out of the 9 months (prior to covid-19), the number of falls with harm was less than in 2018/19.
12.	Reducing the use of medication for people with a learning disability	<ul style="list-style-type: none"> - Audit demonstrated our prescribing was in line with all expected standards. The national standards are 'stopping the over medication of people with a learning disability and/ or autism' (STOMP) and also the 'safe treatment and administration of medicine in pediatrics' (STAMP). - Information is now routinely highlighted and embedded within our letters to GPs - We are seeing medication levels reducing for this client group. - Participation in the national audit on prescribing for people with a mental health and learning disability. We are waiting for the results.
13.	Improve the practice and recording of mental capacity	<ul style="list-style-type: none"> - A Mental Capacity Act (MCA) working group was established to lead on the quality improvement work. Initially a Trust-wide staff survey was completed between Aug-Sept 2019 to understand barriers in practice/ documentation for staff and how we can best provide support and guidance in using the MCA. - The MCA training is in the process of being reviewed. - Amendments have been made to the patient record system to improve the consistency of recording and the launch of a new assessment form. - Significant national changes are being made to Deprivation of Liberty Standards which were planned for late 2020. The Trust has been preparing to implement the changes however we are waiting for the final regulations to be published.
14.	Reduce inappropriate out of area placements	<ul style="list-style-type: none"> - Improved patient experience through the reduction in the number (from 14 in March 2019 to 7 in March 2020 across Oxon and Bucks) and the length of stay of inappropriate out of area placements - The investment in mental health safe havens and crisis services to provide more alternatives to admission will help us to achieve the aim of zero inappropriate out of area placements and will support improvements in patients experiences out of hours.

This Years Focus

- Recently significant effort and capacity has been focused on service delivery and responding to covid-19.
- We want to harness and continue with the opportunities created to work differently.
- Recognise key driver to improving quality is our staff and the support we give them to feel safe, valued and empowered. This underpins our priorities.

Priorities

Leadership

- Further develop and begin embedding the use of a Restorative Just Culture approach
- Develop and evaluate a framework of support for our BAME colleagues in order to reduce inequalities at work
- Continue to support and improve staff wellbeing to enable recovery

Safety

- Reduce restrictive practice through introducing a Positive and Safe approach (national NHSI quality improvement collaborative and action from 2019 CQC inspection)
- Improve sexual safety in mental health inpatient settings (national NHSI quality improvement collaborative)
- Improve tissue viability and reduce avoidable harm in pressure damage (national NHSI quality improvement collaborative)

Priorities

Experiences

- Ensure we have strong patient voices as part of developing and improving services, part of the Trust's Experience and Involvement Strategy
- Continue our focus on improving personalised care planning (action from 2019 CQC inspection)

Clinical Effectiveness

- Improve and enhance the service offer to care homes and end of life care planning
- Improve clinical care pathways through continuing to implement the three regional mental health New Care Models – move from commissioning in shadow form to full delegated responsibilities from NHS England/ Improvement.
- Develop the consistency and application of staff supervision (action from 2019 CQC inspection)
- Improve clinical documentation and practice in relation to the Mental Health Act (action from 2019 CQC inspection)

Questions?

