Report to the Meeting of the Oxford Health NHS Foundation Trust

The Joint Health Overview and Scrutiny Committee

For Information

21st April 2016

Oxford Health NHS Foundation Trust Quality Account – Priorities and Objectives for 2016/17

Introduction
This report presents more detail on the proposed quality objectives for 2016/17. The four overarching quality improvement priorities for 2015/16 remain the same for 2016/17 as they are still relevant and further improvements can be made. Some of the objectives are also the same for 2016/17 as we are midway through the improvement journey.

Sent to HOSC for comment, the full annual Quality Account (including the objectives for 2016/17) will be ready in May 2016. The final Quality Account has to be submitted to Monitor as part of the annual report by 27th May 2016 and published on NHS Choices by 30th June 2016.

Priorities and objectives for 2016/17
Below are the proposed objectives for 2016/17, there are a smaller number of objectives than 2015/16 which will enable a greater focus in the next year. The specific measures for each objective are being worked up and will be presented to the meeting in May 2016.

Quality priority 1: Enable our workforce to deliver services which are caring, safe and excellent
Issue/ problem;
- ❖ Recruitment and retention of staff across some professions, some services and some geographical areas.
- ❖ Reduce the use of agency staff
- ❖ Improving how we work in partnership with patients to ensure care is coordinated, enabling and personalised to meet the needs of each person, and that this approach is demonstrated in care planning.
- ❖ Areas for improvement identified from 2015 staff survey results; appraisals, experience of harassment, bullying or abuse, working extra hours and suffering work related stress.
- ❖ Career progression that reflects diversity

Actions;
- ✓ Implement the actions for 2016/17 from the Nursing Strategy. The six work streams are; i) what patients want from nurses, ii) valuing nurses, iii) ensuring high professional standards, iv) developing career pathways, v) contributing fully to multi-disciplinary team practice and

vi) developing and supporting professional and clinical leadership. For each work stream the actions will be defined by June 2016. (Trust wide)
- ✓ Implement the actions for 2016/17 from the Workforce Strategy, including looking at enhanced roles and increasing the use and employment of different roles i.e. apprentices, volunteers, peer support workers… (Trust wide)
- ✓ Re-establish a programme of peer reviews to encourage learning and sharing between teams and as an inform approach to listening to staff about their experiences (Trust wide)
- ✓ Continue to embed and develop the electronic health record to support and enable staff (Trust wide)

Quality priority 2: Improve patients and carers experiences through involving people in their own care and how services develop

Issue/ problem;
- ❖ Improving how we work in partnership with patients to ensure care is coordinated, enabling and personalised to meet the needs of each person, and that this approach is demonstrated in care planning.
- ❖ Developing how we involve patients and their carers/ families in improving services
- ❖ Improving how be communicate and share information with patients and their carers/ families

Actions;
- ✓ Implement the relevant actions in 2016/17 from the Patient Involvement and Experience Strategy. The aims of the new three year strategy are to; i) Develop a culture which encourages, supports and develops effective partnerships between people who use OHFT services and their carers/ families and professionals, ii) improve the experiences of people who use services and their carers/ families, and iii) improve the opportunities of how people are involved to identify issues and actions to improve services. (Trust wide)
- ✓ Maintain the 'Triangle of Care' external accreditation, actions for 2016/17 will include ensuring all teams/ wards complete a self-assessment and the trust wide actions to roll out carer awareness training and to improve information provided/ available to carers/ families. (Trust wide)
- ✓ Introduce the Buckinghamshire recovery college ensuring we have co-design and co-production as standard practice (Adult Directorate)
- ✓ Promoting effective use of "knowing Me" passport in inpatient and community mental health teams (Older People Directorate)
- ✓ Involve patients and families in delivering safer care work (Children and Young People Directorate)

Quality priority 3: Improve quality through pathway remodelling and innovation

Issue/ problem;
- ❖ Across the trust there are pockets of excellent innovation and high quality of care and also pockets of poorer care
- ❖ Improve efficiency and effectiveness of services

Actions;

Trust wide
- ✓ Enhance the capacity and capability of our quality improvement teams to be able to deliver large scale improvements

Children and Young People's Directorate
- ✓ Continue to roll out and evaluate CBT service in Oxfordshire dentist service to reduce the need for sedation
- ✓ Buckinghamshire Speech & Language Therapy - increase the support for self-management and use of assisted technology to improve care and patients outcomes measures through TOMs (therapy outcome measures)
- ✓ Implement new Oxfordshire Phoenix team for children in special circumstances (bringing together LAC, YOS, Kingfisher team and residential edge of care team)
- ✓ Implement new Oxfordshire service model through Horizon team for young people and their families who are experiencing distress as a result of sexual harm
- ✓ Learning disability CAMHS across all five counties, improve quality of service for children and young people with a learning disability by increasing staff skills through providing evidence based training on positive behaviour support (PBS) using a train the trainer model
- ✓ CAMHS across all five counties; implement the newly remodelled pathways for Adolescent Eating Disorders

Adult Directorate
- ✓ AMHTs will be moving to a Flexible Assertive Community Team (FACT) model using smaller sub-teams, within their treatment functions, which are aligned to specific GP surgeries within certain geographical areas within the AMHT catchment areas.
- ✓ The Oxfordshire Mental Health Partnership will be introducing a Single Point of Access in 2016 for all patients accessing the partnership organisations.
- ✓ Unification of the current services provided out of hours and into the acute hospitals
- ✓ Service model for psychological therapies is being reviewed and changed to improve access (reduce waiting times) for patients needing specialist psychological interventions.
- ✓ Develop bed management system to ensure timely admission and discharge

Older People Directorate;
- ✓ Improving productivity & retaining quality in community and district nursing
- ✓ Achieving & maintaining accreditation for our mental health services (MSNAP for memory services and AIMs for inpatients)
- ✓ Improving inpatient identification & management of depression in mental health wards
- ✓ Implementing new model of unscheduled care in South East Oxfordshire (rapid access care unit)
- ✓ By embedding and extending Integrated Locality Teams (ILTs) across Oxfordshire, between primary care, social care and community healthcare and third sector organisations.

Quality priority 4: Increase harm-free care
Issue/ problem;
- ❖ Continue to reduce avoidable harm through developing a safety culture and leadership which encourages and enables continual improvements, openness and learning
- ❖ Continue to reduce the use of restrictive practice and restraint

Actions;

The trust is preparing to join the 'Sign up to Safety' campaign in the coming months, this will include publishing an improvement plan against five national pledges linked to the below objectives, many of which build on the work started in 2015/16. The five national pledges are; putting safety first, continually learning, being honest, collaborating and being supportive (to patients and staff).

- ✓ Reduce the number of avoidable grade 3 and 4 pressure ulcers. In 2016/17 deliver the pressure damage improvement plan (Older People Directorate)
- ✓ Improvement the physical health management of patients (Trust wide);
  - ▪ Physical health assessment and monitoring in community hospitals
  - ▪ Reviewing the Diabetes pathway in community hospitals to improve care
  - ▪ Improving physical healthcare across the Mental Health pathway
- ✓ Reduce the number of patients harmed by a fall (Older People Directorate)
- ✓ Reduce the need for restraint and monitor the use of seclusion and long term segregation by implementing the actions from the PEACE project for 2016/17. The actions are set against the following areas: i) workforce development, ii) leadership, iii) service user/ patient involvement, iv) use of data to inform practice, v) rigorous debriefing, vi) development of resources, vii) identify and minimise other restrictive practice. (Trust wide)
- ✓ Patients missing from mental health inpatient wards – failure to return from leave (Adult Directorate)
- ✓ Prevention of suicide (Trust wide)
- ✓ Implement the key work streams identified from the self-assessment against national guidance and recommendations relating to reducing avoidable deaths, including; (Trust wide)
  - o Establish a new trust wide mortality group
  - o Agree and communicate clear definitions for deaths, and how these are reviewed, reported and investigated involving partners as required
  - o Agree system wide approach for review of deaths
  - o Improve accuracy of data on deaths
  - o Improve use of data on deaths
  - o Bringing consistency to thematic reviews
  - o Review timeliness and completion of duty of candour, particularly when an incident/ death is not investigated as an SI

Conclusion
The HOSC is asked to note the above priorities and objectives proposed for the Quality Account in 2016/17.

Author and title:
Jane Kershaw, Acting Head of Quality and Safety

Lead Executive Director:
Ros Alstead, Director of Nursing and Clinical Standards