



Quality Report

Quarter 1 April – June 2013

Vision:

Leading in partnership to improve health and well-being by providing high quality care



CWP has been shortlisted as a finalist in the *patient safety in mental health* category at the national *Patient Safety Awards 2013*See page 12

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INTRODUCTION

Welcome to CWP's first Quality Report of 2013/14.

The trust produces these reports every quarter to update staff, service users, carers, the public, commissioners, internal groups, and external scrutiny groups on progress in improving quality across CWP's services, which the trust is required to formally report on in its annual *Quality Account*.



CWP's Quality Account 2012/13 and all of the Quality Reports of 2012/13 are available on the trust's internet site:

http://www.cwp.nhs.uk/our-publications/reports/categories/431

Quality Accounts are annual reports to the public from NHS providers about the quality of services they provide.

Reporting on the quality of the trust's services in this way enhances public accountability by strengthening the trust's approach to listening to and involving the public, partner agencies and, most importantly, acting on the feedback the trust receives.

Quality in the NHS is split into three parts. It means different things to different people. Here is what it might mean to the trust's service users:



This report is just one of many reviewed by the trust's Board of Directors. Other reports include:

- the three times yearly Learning from Experience report –
 reviews learning from incidents, complaints, concerns, claims and compliments, including Patient Advice and Liaison Service [PALS] contacts
- the quarterly Infection Prevention and Control report –
 reviews the management and clinical governance systems in place to ensure that people experience care in a clean environment, and are protected from acquiring infections
- the monthly Corporate Performance report reviews the trust's quality and safety performance by reporting on compliance in achieving key local and national priorities

Together, these reports give a detailed view of CWP's overall performance.

This *Quality Report* provides a highlight of what CWP is doing to continuously improve the quality of care and treatment that its services provide.

Executive Summary – Quality Headlines this Quarter

CWP has achieved its quarter 1 milestones for its four trustwide quality priorities for 2013/14. The common focus across all of the priorities is reducing health inequalities.

⇒ see pages 5 - 6

Rosewood intensive rehabilitation unit's occupational therapy service has presented at the internationally recognised *European Pathway Association* annual meeting. This was for its work on transforming rehabilitation pathways through innovative occupational therapy.

see page 7

CWP has been shortlisted as finalists at the national *Patient Safety Awards* for its work in monitoring and consistently improving safety standards across all of the trust's inpatient wards over the past two years.

⇒ see page 12

The acquired brain injury service in Chester has had a book published nationally, which aims to provide useable guides for readers to develop their clinical practice.

⇒ see page 12

'Rempods', providing a 1950s environment for patients with dementia, have been introduced on CWP's dementia care wards, to enhance the experiences of service users, carers and staff.

⇒ see page 13

CWP has been recognised by the *Carers Trust* by being awarded with England's first *Triangle of Care* gold star, demonstrating its commitment to improving help and support for carers and families.

⇒ see page 13

CWP received 431 formal compliments about the quality of its services during the first quarter of 2013/14

⇒ see page 14

Performance against contractual quality requirements and quality incentive schemes for 2013/14 is on track

⊃ see pages 15 - 17

An explanation of terms used throughout this report is available on the Trust's internet: http://www.cwp.nhs.uk/reports/1628-quality-reporting-glossary

Quality priorities for 2013/14

CWP has set four **Trustwide quality priorities** for 2013/14, which reflect the trust's vision of "**leading in partnership to improve health and well-being by providing high quality care**". They are linked to the trust's strategic objectives, and reflect an emphasis on **patient safety**, **clinical effectiveness**, and **patient experience**.

The trust has made a commitment in its *Quality Account* to monitor and report on these in its quarterly *Quality Reports*. This year, the common focus across all the priorities is **reducing health inequalities to** help reduce avoidable variations in the quality of care and to improve outcomes.

Patient Safety priorities for 2013/14

Improve the safety, effectiveness, and efficiency of patient care and services, through the development of a dashboard to monitor safety and quality indicators during the transition and after the community mental health team and learning disability service redesigns

Ouarter 1 milestones:

- Develop and agree quality indicators in order to measure and monitor the safety and quality impact of service redesigns, in the domains of patient safety, clinical effectiveness and patient experience.
- Develop a dashboard to provide baseline compliance against the safety and quality indicators.
- Report baseline compliance against the safety and quality indicators to the Quality Committee.

CWP has achieved the quarter 1 milestones for this quality priority, as detailed below:

- As part of the approval of the community mental health and learning disability services redesigns, the Board agreed a set of quality indicators to measure and monitor the safety and quality impact of the service redesigns. These were developed by senior clinicians and managers and consulted on through internal task and finish groups.
- The quality indicators are captured through the trust's 'quality dashboard', which is presented by the service director and clinical director representing each clinical specialty, at the trust's *Quality* Committee.
- The quality dashboard has demonstrated baseline compliance against the quality indicators and will continue to be used to measure ongoing compliance, which will be reported on in future Ouality Reports.

Improve patient safety and experience through the development of priority trust 'never events' and implementation of associated preventative, positive, and patient focused 'always events'

Quarter 1 milestones:

- Develop a list of trust 'never events' with rationale for prioritisation
- Identify associated 'always events' in support of achieving the never events and associated markers of improved patient safety and experience
- Undertake a gap analysis and identify actions/ support required to ensure the capability and competence to deliver the identified always events and implement these. This should be underpinned by the values and behaviours covered by the 6Cs outlined in the "Compassion in Practice" national vision and strategy
- Agree revision to the trust's 'operating framework' to set out structured means of escalation of performance [escalation triggers] where it is deemed to be below expectation, including noncompliance with trust 'never events'

CWP has achieved the quarter 1 milestones for this quality priority, as detailed below:

- A task and finish group, made up of representatives from each locality and clinical specialty, has met to propose a series of never events and associated always events.
- The proposals have been presented to the trust's 'operational board' and the never events and always events are being refined based on this feedback. This will identify training needs and will analyse any other gaps, for action, before full implementation.
- The trust's 'operating framework' will be reviewed alongside the trust never events framework, once agreed, and then approved at Board.

Clinical Effectiveness priority for 2013/14

Improve outcomes by implementing clinically effective practice through the development of evidence based care pathways, including transitional pathways

Quarter 1 milestones:

- Prioritise, agree and develop locality clinical and process pathways, linked to service specifications, for implementation from quarter 2 onwards.
- Agree data collection methodology.
- Identify priority integrated care pathways, including transitional pathways, for development in quarter 2. To include schizophrenia, bipolar, dementia and depression.

CWP has achieved the quarter 1 milestones for this quality priority, as detailed below:

- Care pathways for dementia, schizophrenia/psychosis, and adult attention deficit hyperactivity disorder have been developed and will be implemented, using existing information systems, during quarter 2.
- The care pathway for bipolar disorder is currently being finalised and will also be implemented during quarter 2.
- The care pathway for depression relies on information from the development of the single point of access, and therefore will be developed after this.
- Locality clinical and process pathways will be prioritised following agreement of the locality and trustwide clinical strategies, which will be agreed in quarter 2.

Patient Experience priority for 2013/14

Improve service user and carer experience, by developing patient/ carer reported outcome measures, and patient experience measures across care pathways – linked to Payment by Results

Quarter 1 milestone:

Develop patient/ carer reported outcome measures and patient experience measures as markers against each of the care pathways identified as part of the trust's clinical effectiveness priority for 2013/14.

CWP has achieved the quarter 1 milestones for this quality priority, as detailed below:

- The new NHS 'friends and family' test has been identified as one of the measures that the trust will use to measure and improve patient experience.
- The care pathways will be developed with in-built patient/ carer reported outcome measures specific to each pathway.

Improving outcomes for service users by supporting recovery

CWP is committed to **improving outcomes** for its service users, so that the care and treatment that the trust provides improves their **quality of life**, **social functioning** and **social inclusion**, self reported **health status**, and supports them in reaching their best level of **recovery**. Recovery is CWP's approach to **helping people to be the best they can and want to be**.

In each *Quality Report*, CWP reports on how its services are improving outcomes for service users by supporting recovery.

Focus on...

Transforming rehabilitation pathways through innovative occupational therapy



Rosewood intensive rehabilitation unit has a multi disciplinary team of approximately 50 staff who form part of a nurse led suite of rehabilitation services, with outreach services led by an occupational therapist lead. Since its introduction in 2012, the *Complex Recovery Assessment & Consultation [CRAC]* service has demonstrated how, by adding a small additional targeted resource, it has efficiently **improved the existing care pathway** and **smoothed the patient journey** from health, through recovery, towards resilience, by linking up the right inputs, at the right time, in the right way, to the right people, by the right people.

Rosewood's innovative occupational therapy service was presented at the UK *College of Occupational Therapists* annual meeting on 18 June, where these members of staff [above] displayed a poster and provided a brief presentation about innovative occupational therapy at Rosewood. A presentation was also given at the *European Pathway Association* annual meeting, held in Glasgow on 20 June. This conference receives international recognition, so it a major achievement for CWP to have had the opportunity to present its achievements and the work of the *CRAC* team at Rosewood. This ongoing success is evidence of CWP getting benefits from **new ways** of working for nursing and therapies staff. These benefits include the following positive outcomes:

- Fewer delays in acute wards.
- Two thirds of those discharged living in the community.
- Increasingly skilled staff.
- Return on investment delivered in just over a year, and recurrent savings of £2 million.
- 12 people have returned to community living in last financial year.
- Only four people readmitted in the two-year post discharge audit period to the end March 2013 three for a few days, one longer term. This is compared to up to 10 years in hospital prior to coming to Rosewood unit.

Focus on...

The 6Cs

CWP has adopted the *Department of Health*'s '6Cs' of value and behavior as its new trust values. This demonstrates a commitment to the national vision and strategy, called *Compassion in practice*, for delivering a culture of compassionate care. The 6Cs are:

- care
- compassion
- courage
- communication
- competence
- commitment.

Adopting these 6Cs across the whole of the organisation is how the trust will achieve its vision of 'leading in partnership to improve health and well-being by providing high quality care'.

"CWP has care at the heart of our organisation and this is the reason why the 6Cs are relevant to everyone working in the trust. During the course of my working day, I always see staff demonstrating the 6Cs, whether I am in a clinical setting, in a meeting or working from my office base."

Avril Devaney
Director of nursing, therapies and patient partnership/
6Cs implementation lead
June 2013



Focus on...

Tissue viability - wound care formulary



The trust's tissue viability nurses, based in Western Cheshire, have written a revised edition of the trust's wound care formulary. They have introduced a 'traffic light' system to the formulary to achieve the following clinical and cost effectiveness outcomes:

- To ensure that the patient is being referred to tissue viability appropriately, so that the right care is provided at the right time to the right patient.
- To reduce the number and cost of dressings that are being used inappropriately.

The nurses are holding two launch events in July, and all nurses from both community and inpatient teams are being encouraged to attend to **promote best practice across the trust**. There will be trial sessions for using the dressings and the opportunity to ask questions.

Improving patient and staff experience of pharmacy services

The trust's pharmacists and pharmacy technicians ensure that service users receive **safe and effective medicines**, in a **timely** manner, **tailored** to their own individual pharmaceutical needs. Detailed below is a summary of how the team has facilitated this during the past quarter, as well as other quality updates and developments.

The pharmacy team has participated in service user and carer groups, by providing meaningful advice and independent information on medicines used in mental health. For example:

- A pharmacist has provided advice to a community psychiatric nurse regarding possible side effects from a blood pressure medication. The pharmacist also received thanks from the patient's partner for the information, which they found very helpful.
- A previous talk given to a mood group in Chester has led to referrals for advice for individual patients on medicines side effects and management.
- A patient due for discharge was very complimentary of time taken to explain how to use medicines in a blister pack to them.

The pharmacy team has provided **education around medication** to support the clinical staff on inpatient units and in the community teams. This is identified through staff requests for additional training as part of recommendations from incidents, and also from newly qualified or newly recruited staff to CWP. The points below highlight the quality outcomes obtained from providing such support:

- Support provided to a senior medic with a medicines reconciliation and help with a choice of medication for a lady of child bearing age.
- Help provided to a senior medic in suggesting treatment options for a person with hepatic impairment.
- Support provided to a consultant in a community team about a patient who returned from out of area on a combination of antipsychotics.
- Advice and support given to a consultant in reviewing a patient of Clatterbridge Cancer Centre NHS Foundation Trust.
- A pharmacist has provided a talk on polypharmacy to a new team.
- Support provided to doctors and multi disciplinary teams on wards.

A thank you was received from *Greater Manchester West Mental Health NHS Foundation Trust* for explaining the work the trust has done on shared summary records with primary care and the obstacles faced.

Two pharmacists have provided lectures on psychopharmacology to the MRCPsych course held at the *University of Liverpool* and both pharmacists received excellent feedback from the doctors in training participating in the course:

"Very interesting session from a very engaging speaker"

MRCPsych course attendee

"Fantastic!"
MRCPsych
course attendee

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Clinical Effectiveness

Research

CWP is committed to providing timely and high quality data for the national portfolio of research studies. Figures published by the *Comprehensive Clinical Research Network* for 2012 – 2013 show that CWP recruited 534 people into studies. The trust has recruited approximately 200 people since April 2013. During quarter 1, CWP has commenced an interventional study looking at training for managers to improve staff attendance and stress levels, an industry study looking at the impact of illness and a study looking for neuronal cell surface antibodies in patients with psychotic illness. The 'ATLAS' trial of antipsychotic treatment of very late-onset schizophrenia-like psychosis has now recruited two patients. In addition, the trust is also recruiting to studies in relation to autism, self harm and obsessive compulsive disorder.

In the coming quarter, CWP expects to start another industry study from the *Mental Health Research Network* and hopes that some dementia studies will be placed in CWP from the *Dementias and Neurodegenerative Diseases Research Network*. The study on falls, which took place on two of CWP's dementia wards, finished on 30 June 2013. The trust anticipates receiving the results and reviewing any recommendations, which it will feed in to its ongoing work in relation to falls management and prevention.

National Confidential Inquiry into Suicide and Homicide by People with Mental Illness

This is a research project that aims to improve mental health services and to help reduce the risk of similar incidents happening again in the future. The number of cases submitted to each category as a percentage of the registered cases required by the terms of the Inquiry are:

Categories of the National Confidential Inquiry into Suicide and Homicide by People with Mental Illness	Cases submitted as a percentage of registered cases	
Sudden unexplained death in psychiatric inpatients	-	n = 0
Suicide	100%	n = 7
Homicide	100%	n = 1
Victims of homicide	-	n = 0

Clinical Audit

CWP's Clinical Audit Team co-ordinates a significant programme of clinical audits, by providing specialist advice to all healthcare professionals, and by providing direct input into the delivery of CWP's annual Trustwide clinical audit programme. This contributes to ensuring that CWP:

- Monitors the implementation of standards within its key clinical policies, best practice standards from NICE and other national guidance.
- Meets its contractual requirements with its commissioners, including helping to support the delivery of CQUIN schemes.
- Participates in the 'National Clinical Audit Programme', commissioned by the Healthcare Quality Improvement Partnership, and other national audits run by professional bodies and royal colleges.

Trustwide clinical audits

Clinical audits that are contained on the clinical audit programme will be reported on throughout the year in future *Quality Reports*, as they are completed, and when actions have been identified to improve the quality of healthcare that the trust provides.

National clinical audits

This year CWP is participating in the following national audits:

- National audit of continence care
- National audit of psychological therapies
- National audit of schizophrenia
- Prescribing observatory for mental health

National clinical audits are reported in the trust's annual *Quality Account*, and are important as they allow the trust to compare its results with findings from other NHS trusts to help in identifying any necessary improvements.

Service level/ specialty clinical audits

In addition to clinical audits on the clinical audit programme, service level clinical audits are conducted by individual healthcare professionals, teams, and medical trainees, to evaluate aspects of care that they have selected as being important to them and their teams. These are reviewed and reported to frontline staff through locality/ clinical specialty meetings. In addition, there are supporting medicines management and infection prevention and control clinical audit programmes, which are also reported to frontline staff to promote local learning in these specialty areas.

NICE guidance and clinical effectiveness

Implementing National Institute of Health and Care Excellence [NICE] guidance:

- enhances the effectiveness of clinical services and
- improves clinical outcomes, and also improves non-clinical outcomes for patients, such as gaining employment or returning to education

The trust holds regular *Clinical Effectiveness network* meetings to monitor performance to ensure **adherence to best practice**. During quarter 1, CWP held two meetings. Presentations were received on low back pain, post traumatic stress disorder, and obsessive compulsive disorder, from the respective *NICE* champions from within the trust. CWP now has ten work plans available on the intranet detailing how the champions plan to assess and improve the implementation of guidance.

The table below demonstrates the trust's compliance for the guidance it has been able to fully assess.

Type of NICE guidance	CWP's ability to deliver as at quarter 1			
Type of MCE guidance	Full	Partial	Not	Total
Clinical Guideline	54	17	0	71
Public Health Interventions	24	7	0	31
Interventional Procedures	2	0	0	2
Technology Appraisal	16	0	0	16
Medical Technology	1	0	0	1
Cancer Service Guidelines	0	1	0	1
Patient Safety	2	0	0	2
Total	99 79.8 %	25 20.2 %	0 0 %	124

CWP continues to work with its clinical leads in the trust, and its commissioners, to further promote compliance with *NICE* guidance.

Quality success stories

In addition to earlier success stories featured in the report, below is a summary of some of CWP's other success stories over the past quarter in **promoting quality** within the communities that the Trust serves, and in **improving the quality of the Trust's services**.

Patient Safety News



CWP has been shortlisted as finalists at the national *Patient Safety Awards*, in the category of 'patient safety in mental health'. The trust's submission was for its 'inpatient safety metrics' programme, which monitors policy standards across all of the trust's inpatient wards. Peer reviews are undertaken by ward managers to provide a contemporaneous method of measuring and tracking patient safety standards, to reinforce local accountability, and to act as a spur for providing high quality care, facilitated by targeted action planning. The programme has delivered demonstrable improvements in compliance with patient safety standards over the past two years. The final is being held in London in July.

Clinical Effectiveness News

Staff from the CWP acquired brain injury [ABI] service in Chester have recently celebrated their new book being published. 'Practical Neuropsychological Rehabilitation in Acquired Brain Injury: A Guide for Working Clinicians [Brain Injuries]' aims to acknowledge the complexity of working with clients who have ABI, giving practical and useable guides for readers to develop their practice.





CWP has recently introduced a weight loss programme to people throughout Western Cheshire. Why Weight? offers a free 12 week membership to a weight loss programme with support and encouragement from friendly and highly trained advisors. The programme is based on healthy eating, physical activity and behaviour change and aims to help individuals start to lose weight and lead a healthier lifestyle. On completion of the 12 week programme, free 'stay on track' drop-ins are also available for long term support. Readers can find more information from the following website: www.cwp-whyweight.com

Patient Experience News and patient feedback

'Rempods' have been introduced on CWP's dementia care wards, to enhance the experiences of service users, carers and staff. They are available at Bowmere Hospital. Chester. Springview Hospital. Clatterbridge, and the Millbrook Unit, Macclesfield. Rempods are 'pop up rooms' that provide a complete environment containing authentic furniture. wallpaper and smaller items that the service users can see, touch and interact with. These might include a wireless playing 1950s radio programmes and 'Rem-Scent' machines that diffuse a range of fragrances to stimulate memories. Reminiscence work was introduced to dementia care over 20 years ago and can take many different forms. People with dementia often have difficulty remembering what has recently happened in their lives. This can leave them feeling confused, vulnerable and less confident. However, their memories from years ago often remain detailed and intact. The main benefits to service users are:



- Empowerment
- Raised self-esteem
- Improved communication
- Stimulation and fun
- Enhanced mood.

There have been many positive comments about the Rempods. Staff will continue to develop their use in their ongoing commitment to the provision of person-centred care within the hospital environment, in order to enhance well-being and promote recovery for people with dementia.



CWP's commitment to improving help and support for carers and families has been recognised by the *Carers Trust* by being awarded with England's first *Triangle of Care* gold star. CWP was one of the first members of the *Triangle of Care* membership scheme, which was set up to enable mental health trusts to demonstrate how they are **including and supporting carers**. Since joining the project, CWP has worked to ensure that the principles of good practice are adopted by all trust employees when working with carers and families in the Cheshire and Wirral area.

In quarter 1, CWP formally received **431 compliments** from service users, and others, about their experience of the trust's services. Below is a selection of the comments and compliments received:

"I went to [service user's] first review and I'm very positive about his future. I came away very positive for the first time. Thank you for all your support. Fingers crossed he may now have the start of a better life. There are also pathways for his journey into the community. Everyone involved in [service user's] care are all saying the same thing and I'm fully involved with lots of support. Hope at last! Thank you."

Adult Mental Health Services

"I am impressed with the tremendous service we have received from the children's speech and language therapy [SALT] service and the SALT therapist. The speech and language advice line, the self-referral option, information and reassurance we received from the department and [the therapist] was fantastic. The service is easy access and staff listened to our concerns."

Physical Health West

"The level of support and the calibre of treatment this service offers is like no other I have come across and I hate to think that it is not more widely available after the effect that it has had on my life!"

Child & Adolescent Mental Health Services

"Thanks for all your help, [service user] absolutely loves coming to "Resi" [Residential Care] and she is in such a good mood when she comes home, which is fantastic." Learning Disability Services

"This is just to say thank you for allowing [staff member] to help me in the way she did. You've got some good, good people there – yourself included. When I think back to how poor [and, frankly, amateur!] the drug services were in the seventies, you've come a hell of a long way. If I can ever help or contribute, don't hesitate to ask."

Drug and Alcohol Services

Contract requirements – Quality improvement and innovation

CWP has certain quality requirements and goals which have been agreed with commissioners [those who buy the NHS services that the Trust provides] detailed in the trust's contracts. These are monitored through the contract monitoring process, to ensure that the aim of improving quality of care is on track. This is monitored at quality meetings held jointly with commissioners to ensure all of the trust's performance is on track.

Quality requirements

This part of the contract sets out the requirements of CWP's commissioners in regard to the quality of all the services it provides. CWP aims to build on its positive performance against these requirements in its contract last year. **Performance against contractual quality requirements for 2013/14 is on track**.

Commissioning for Quality and Innovation [CQUIN]

A proportion of CWP's income from its contracts in 2013/14 is conditional on achieving **quality improvement and innovation goals** agreed by CWP and its commissioners, through the *CQUIN* payment framework. The total *CQUIN* monies in 2013/14 equates to £ 3,439,175 subject to achievement of certain milestones.

During quarter 1, CWP has been agreeing the in-year quarterly milestones with all of its commissioners. Progress against the agreed milestones will be reported in the next *Quality Report*. Below is an introduction to each of the agreed CQUIN schemes.

Trustwide schemes

- Safety thermometer
 - Data is uploaded via the Information Centre web portal on a monthly basis.
- "Advancing Quality" dementia and psychosis Ongoing reporting of compliance to commissioners.

Western Cheshire schemes

- Long term conditions: patient education programmes
 A programme of education is to be developed, with consistent key messages, for patients with one or more long term conditions.
- Ageing well: planning and predicting health care needs
 Support patients through the use of patient held personalised care plans.
- Chronic obstructive pulmonary disease [COPD] advanced service in the community
 To provide an integrated care service[acute/ community] for patients with COPD.
- Transition between children's and adult services
 To ensure the successful and smooth transition of young people from children's to adult health services through the introduction of a trigger in the assessment process to improve person centered transition planning.
- Mental and physical health care pathways
 Collaborative working with the Countess of Chester Hospital NHS Foundation Trust to develop and implement pathways of care that facilitate multi disciplinary working and best practice.

Central and Eastern Cheshire schemes

- Long term conditions [LTC] quality, innovation, productivity and prevention [QIPP] programme
 To work in partnership to deliver proactive personalised care co-ordination for high health care users, in accordance with the LTC QIPP programme.
- Transition across services

Improving patient experience for transition across services and acting upon the feedback received to improve transition for patients experiencing transition between child and adolescent mental health services and adult services.

Psychiatric assessments

Enhance the quality of psychiatric assessment and intervention for people presenting with physical health problems in general hospitals.

Vale Royal schemes

LTC QIPP programme

To work in partnership to deliver proactive personalised care co-ordination for high health care users, in accordance with the LTC QIPP programme.

Transition across services

Improving patient experience for transition across services and acting upon the feedback received to improve transition for patients experiencing transition between child and adolescent mental health services and adult services.

Physical health checks

Ensuring people with serious mental illness have physical health checks, and if appropriate, brief intervention for weight management, exercise programmes and smoking cessation.

- Dementia baseline screening for people with Down's syndrome
 Establishing baseline screening for dementia for people with Down's syndrome aged 30 years or
 over known to services provided by CWP.
- Autism

Improving the care pathway for patients with autism, to include staff training in autism awareness and reasonable adjustments.

Wirral schemes

Contract dataset

Implementation of systems and processes to support the provision of meaningful, accurate, high quality activity data sets and associated key performance indicator information.

Dementia

To improve the quality of care for patients in acute care, and to reduce the number of excess bed days.

Long term conditions

Developing an infrastructure to sustain integrated long term condition management, delivering risk stratification, integrated teams and supporting pathways for life.

Innovation

Develop at least one innovation that supports the QIPP agenda, for each of the following service areas: learning disability, adults and older people, CAMHS, drug and alcohol.

North West Specialised Commissioning schemes

Optimising care pathways

Optimise length of stay in order that service users are not within specialised mental health services for longer or shorter periods than is clinically appropriate.

Physical healthcare

To improve the physical health and wellbeing of all patients, as an integral part of their overall treatment and rehabilitation plan.

Care programme approach [CPA]

A baseline audit and development of an action plan to ensure the CPA process is effective and appropriately identifies unmet need.

Literacy

Provision of resources to improve literacy, numeracy, IT and vocational skills within secure care environments, providing better opportunities for future participation in various aspects of life.

Improving service user experience through innovative access to and for secure services This will involve the increased utilisation of communications technology in CPA for the benefit of service users, carers and clinicians. To utilise the use of technology for relatives and carers to 'virtually visit' patients.

Trafford Clinical Commissioning Group schemes

Health Equality Framework

To implement use of the health equality framework, capturing how interventions have resulted in improvements for the target group agreed for initial implementation.

Health improvement strategies

Design, develop and deliver a series of detailed health improvement strategies to the required national learning disability health assessment criteria.

'Dragons' Den'

Building on the successful allocation of CQUIN monies last year via a 'Dragons' Den' process, all staff were given the opportunity to bid for funds to support quality related projects. These bids were shortlisted and staff then had the opportunity to 'pitch' their project to members of the trust's executive team. A list of projects that have successfully received funding from this year's CQUIN monies is listed below:

- A Development of a website for the eating disorders service.
- B 'In sight in mind' second phase of the Complex Risk and Assessment Consultation pilot in Western Cheshire, which reviews out of area placements in Wirral and Western Cheshire.
- C 'Next Step' goal based outcomes resource CAMHS.
- D Peer mentor opportunities Trustwide recovery programme.
- E Clinical and business systems benefits realisation and evolution Trustwide investment in clinical systems development to support a clinical systems review.

Further details are available by request from the trust's Safe Services Department – details are available on the following CWP web page: http://www.cwp.nhs.uk/pages/1-what-we-do

Advancing Quality

Advancing Quality [AQ] is an ongoing regional CQUIN. It is a programme that was introduced in order to drive up quality improvement across the North West of England region. AQ is about giving the best quality treatment first time, every time. The programme applies a systematic approach to care, by measuring and monitoring interventions to ensure that they happen.

There is up to a six month time lag in reporting the data, therefore during quarter 1 2013/14, the quarter 4 2012/13 performance was confirmed, and CWP met the Advancing Quality stretch targets for dementia and psychosis for 2012/13, as detailed in the table below. Performance against the targets for 2013/14 will be reported in the next Quality Report.

Diagnosis area	Composite target April 2012 – March 2013	CWP compliance April 2012 - March 2013
Dementia	88.6%	89.6%
Psychosis	87.9%	92.0%