



# Quality Report

Quarter 1  
April – June 2014

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



The Trustwide **Early Intervention Service** has developed the *OpenMinded* website for everyone across Cheshire and Wirral that want to know more about psychosis and how the Early Intervention Service can work with people using the service to ensure a successful journey to **recovery**.

Andy Pulford, Team Leader within the Early Intervention Service, pictured above reviewing the *OpenMinded* website.  
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An explanation of terms used throughout this report is available on the Trust's internet:  
<http://www.cwp.nhs.uk/reports/1628-quality-reporting-glossar>

## Welcome to CWP's first Quality Report of 2014/15

These reports are produced every quarter to update staff, people who use the Trust's services, carers, the public, commissioners, internal groups, and external scrutiny groups on progress in improving quality across CWP's services, which CWP is required to formally report on in its annual *Quality Account*.



CWP's *Quality Account* 2013/14 and the four quarterly *Quality Reports* of 2013/14 are available on the Trust's internet site:

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

Reporting on the quality of the Trust's services in this way enhances public involvement by strengthening the Trust's approach to listening 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 can mean different things to different people, for example:



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

- the three times a year *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 Performance dashboard – reviews the Trust's quality and safety performance by reporting on compliance in achieving key local and national priorities;
- the Medicines Management Group newsletter – contains clinical information for practitioners, articles of interest and general pharmacy information for ward staff and teams.

**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 made good progress in delivering against its trustwide **quality priorities** for 2014/15 in quarter 1.

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**Parliamentary Under Secretary of State** at the *Ministry of Justice*, Jeremy Wright, and **Chester MP** Stephen Mosley visited the **drug and alcohol team** at Aqua House in Boughton.

➔ [see page 7](#)

The **Early Intervention Service** has created its own website [OpenMinded.org.uk](http://OpenMinded.org.uk) and share their successes within the service in this report.

➔ [see page 8](#)

CWP has recognised the importance of continuous improvement and has invested in **#CWPZeroHarm**. Further information is provided on the details of the implementation of **Zero Harm**.

➔ [see page 10](#)

**Merseyside Recovery Awards** recognise and honour an **Alcohol Associate Practitioner** at CWP for her '**Footsteps to Recovery**' – a visual project providing inspiration to service users seeking support for substance misuse.

➔ [see page 11](#)

The **Care Quality Commission** has received positive feedback on its website in relation to the **Eating Disorder Service**.

➔ [see page 12](#)

CWP has received **751 formal compliments** about the quality of its services during the first quarter of 2014/15.

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## QUALITY PRIORITIES 2014/15

CWP has set three **trustwide quality priorities** for 2014/15, 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 unnecessary avoidable harm** to help reduce avoidable variations in the quality of care and to improve outcomes.

### **Patient Safety priority for 2014/15 –**

**Achieve a continuous reduction in unnecessary avoidable harm and make measurable progress to embed a culture of patient safety in CWP, including through improved reporting of incidents**

CWP has worked towards achieving this quality priority, as detailed below:

- More than 50 CWP staff have attended training in **safe clinical Human Factors** practices. Human Factors is a patient safety science that acknowledges human limitations which will enable CWP to build resilience and reduce the impact and consequences of human error by designing and educating for safety. More sessions are planned throughout the year. The training will improve staff understanding of human factors and how it relates to their role. In raising this awareness, it will help to reduce unnecessary avoidable harm and embed a culture of patient safety in CWP.
- The Trust has invested in **Quality Surveillance Support Managers** who will provide localities with support for monitoring quality of care so that any positive changes can be spread and enhanced and any potential dips can be managed at an early stage to better safeguard quality. They will do this by evaluating themes across quality and performance information, including recommendations following a review of incidents. This will help to improve learning from current and previous experience of health care delivery to **further improve patient care**.

### **Clinical Effectiveness priority for 2014/15 –**

**Achieve a continuous improvement in health outcomes for people using the Trust's services by engaging staff to improve and innovate**

CWP has worked towards achieving this quality priority, as detailed below:

- The Trust's Quality Committee has endorsed the distribution of *British Medical Journal* **quality improvement licences to 100 staff** across the Trust to provide staff with **recognised improvement methodology tools**. This will **enable learning opportunities** from the results of quality improvement work to increase the ability to **share best practice** and to **learn** when things do not deliver hoped for improvements.
- A "**Your good ideas**" has been added as a quick link on the Trust's Intranet page for staff. These ideas will be considered by a panel to make a decision on whether they will be developed further and receive any development funding. This will help to **spread innovative practices that improve outcomes for people using the Trust's services**.

***Patient Experience* priority for 2014/15 –  
Achieve a continuous improvement in people’s experience of healthcare by promoting the highest standards of caring through implementation of the Trust’s values**

CWP has worked towards achieving this quality priority, as detailed below:

- Following **feedback from patients** and **valuable learning from the Care Quality Commission**, the Trust’s policies in relation to admission, discharge and transfer of care are being reviewed to ensure that the Trust **improves people’s experience in relation to co-ordination of their care**.
- **CWP has signed up as a pilot Trust for ‘Care Connect’**. In conjunction with routine learning from experience, feedback and complaints, this will help to **identify actions to improve key areas**, including appropriateness and effectiveness of communication.

## IMPROVING OUTCOMES FOR SERVICES USERS BY SUPPORTING RECOVERY

CWP is committed to **improving outcomes** for the people who use its services, 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 people who use its services by supporting recovery.

Parliamentary Under Secretary of State at the *Ministry of Justice*, **Jeremy Wright**, and **Chester MP Stephen Mosley** have praised the **drug and alcohol team** for the work they do to support people in the community. The visit took place at **Aqua House in Boughton**.



It included a tour of the facilities which include:

- Nursing support;
- Healthy living advice;
- Mental health support;
- Hospital liaison;
- A range of partnerships including work with local hostels and other voluntary groups.

Also in attendance were partners from Cheshire Police.

**Jeremy Wright** stated:

*"I've been really impressed by the work of Aqua House. Helping people with drug and alcohol addiction is important for all of society. It is particularly important for those at risk of entering a downward spiral into prison and those who are trying to get themselves back on the straight and narrow after a period in prison. The staff at Aqua House are **transforming lives** and it's been inspiring to meet the beneficiaries of the work they do."*

*"Drug and alcohol addiction is a great challenge – for the individuals involved, their families and for all of society. Overcoming it requires passionate and **tailored intervention** at facilities like Aqua House."*

**Stephen Mosley** added:

**Tony McLeod, Clinical Service Manager**  
for CWP said:

*"We were delighted to receive a visit from the Minister of Justice and the local MP to our Chester team. We talked about the recent changes to the way the Trust delivers its services for people in West Cheshire, which enables us to work more effectively and holistically to deal with the challenges people with addictions face. We now have an exciting mix of **recovery services** including **physical health, mental health and wellbeing interventions** which enable our clients to integrate back into communities and lead better lives."*





**Public Health England** chose to highlight a series of **best practice** examples on the “**Recovery Resources**” website that demonstrate how commissioners and providers are putting the national drug strategy outcomes into practice at local level. One of the articles was in relation to the dedicated over-the-counter (OTC) and prescription-only medicines (POM) substance misuse practitioner from within the **Wirral Drug and Alcohol Service**.

Part of the practitioner’s role is to:

- Run campaigns in GP surgeries and pharmacies, highlighting what the **drug and alcohol service** provides.
- Once service users are identified, a three-way conversation is held between the practitioner, service user and their GP, where a **package of care** is developed collaboratively.
- Offer to service users’ **psychosocial interventions** such as motivational interviewing and cognitive behavioural therapy, as well as support in managing anxiety and triggers.
- Arrange residential and community detox, alternative prescribing and access to support groups.



With its **20-year history** of working with GPs, the drug and alcohol service has **strong working relationships** with the area’s GP surgeries. It also works closely with local pharmacies, voluntary sector organisations, mutual aid, other support groups and the local pain clinic.

Since the creation of the post in 2010, the OTC and POM substance misuse practitioner has:

**Seen 205 people.** Of these...

**64** have been **discharged drug free** and

**23 transferred** to either another substance misuse practitioner or agency.

The remainder have either returned to their GP having **reduced the medication they are taking** or **transferred to medication that still manages their pain but has a reduced risk of misuse or dependency.**



**Early Intervention (EI)** in Psychosis is one of the most evidence based specialties in psychiatry and is an approach focused upon supporting and treating those people experiencing symptoms of psychosis for the first time; most commonly occurring in the late teens

to early years of adulthood. **CWP EI Team** is part of a prevention and recovery model of mental health services, providing interventions that successfully span this critical period of life development.

**Optimism, hope of recovery, family support, holistic care** and a **reduction in stigma** associated with mental illness are at the centre of the specialty’s values. The importance of early intervention in psychosis services and the interventions available with such teams for service users is recognised in the updated **NICE** guidance for psychosis and schizophrenia for adults (2014) and the new **NICE** guidance for psychosis and schizophrenia for children and young people (2013).

The approach used is similar to that seen in many physical health conditions such as heart disease or diabetes; where support and treatment starts earlier on in the course of an illness, reducing the chances of longer-term effects. It can help to think about it working in the same way as heart disease, where the symptoms of mild chest pain would be treated, rather than waiting for a heart attack to happen. By **providing individualised specialist treatments** early on and in a timely manner, the **long-term effects can be minimised or avoided entirely**, so that the people can **enjoy a healthy and fulfilling life.**





**Duration of Untreated Psychosis (DUP)** within EI Services represents the delay between the onset of psychosis and accessing appropriate services. The DUP has been shown as an indicator of prognosis, with **a longer DUP associated with more long term disability**. Nationally EI Services are being monitored on a 3 month 'median' (average) DUP, however within the CWP EI Teams, the average DUP for each locality falls well below this, indicating **a better prognosis**.

Median DUP National Target = <90 days		
East EI Service <49 days	West EI Service <60 days	Wirral EI Service <23 days



100% of service users accepted into EI Services are offered **psychological therapy** at their point of access into the service. Psychological therapy is delivered either by appropriately trained members of the team, or by the Clinical Psychologist. Cognitive Behavioural Therapy (CBT) is the most commonly used psychological intervention.

**Family interventions** are used across the EI services. **East EI Service** recorded that over **70%** of people using their services are involved in a family intervention. The **West EI Service** has developed an eight week programme aimed at carers of clients which enables them to access information about psychosis within a group environment. Carers provided the following feedback:

*"I realised how much my husband had improved and had lost sight of his progress until I talked about it"*

*"I listened to other people's stories and realised that I was not on my own"*

*"The group helped my understanding of mental illness."*

**Wirral EI Service** are currently in the process of providing **in-house training** to 9 members of staff on **Behavioural Family Therapy (BFT)** to increase availability to more families.

## 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 recognised the importance of continuous improvement and has invested in **#CWPZeroHarm**.

Zero Harm is an aspiration of “continuously improving the quality of care by tackling unwarranted risks and variation”. CWP has taken the following actions in relation to the implementation of Zero Harm:

- **Quality Surveillance Support Managers** have been appointed in each locality to provide teams with the information they need to support the needs of their local communities better.
- A Trustwide **physical health lead** is being recruited to, in order to promote the delivery of the right care, promote shared decision making and support staff with effective care planning.
- Each locality is now able to access the **CRAC (complex recovery and assessment) team**. The CRAC team support complex cases, to reduce length of stay on acute wards and out of area placements.
- **Education** and **training opportunities** will be made available as part of #CWPZeroHarm including courses on **Human Factors** and **care planning**.



**Dr Anushta Sivananthan, consultant psychiatrist and medical director says:**

*“CWP wants to respond **proactively** to national reports including Francis, Keogh and Berwick by promoting the **highest safety standards** across the Trust and ensuring that we harness all of your good ideas. Our aim is for the maximum number of people to achieve **good outcomes** and **positive recovery**, with the smallest number of people experiencing adverse outcomes. You may have seen the national ‘Sign up to Safety’ scheme, which sets the acute sector a target of a 50% reduction in incidences of avoidable harm. Our **#CWPZeroHarm** campaign is in the same spirit. We have set a CWP target of continuous improvement over the next three years. Zero harm is one of two main themes in the Trust’s Strategic Plan for 2014-19, so you will hear a lot more about it in the coming weeks, months and years!”*

## Clinical Effectiveness News

Rosewood Integrated Services has been shortlisted and are now a finalist in the **Nursing in Mental Health** category for this year's *Nursing Times Awards*. **The award recognises individuals or teams who have developed initiatives that have improved the delivery of mental healthcare.** The finalists are from both NHS and independent organisations from any care setting. All finalists have demonstrated the benefits of their work in terms of *improved quality of life or increased independence* of their patient or client group.



**The Rt Hon Norman Lamb, Minister of State at the Department of Health** recently visited the West locality's **Integrated Physical Health Teams** and chose to present a patient story at the *NHS Confederation* around the value of the Ellesmere Port Integrated team.

During the *NHS Confederation* conference, **Norman Lamb** mentioned the integration pioneers, who are staff from integrated initiatives across the country who are leading the way for pioneering coordinated care saying they have been given "*a licence to do things differently*".

Over recent years there has been a massive change in the way in which drug and alcohol problems are addressed in Merseyside, and this has led to **a recovery revolution** in the area. The **Merseyside Recovery Awards** recognise and honour the people of Liverpool, Wirral, Knowsley and Sefton who have made this happen.



**Annie Lynn, Alcohol Associate Practitioner** at CWP, was honoured at the Merseyside Recovery Awards 2014 for her **outstanding creativity in service delivery**. The award was for her '**Footsteps to Recovery**' – a visual project providing inspiration to service users seeking support for substance misuse.

The '**Footsteps to Recovery**' project consists of positive messages and images being placed by service users on the walls throughout the treatment and waiting areas of the Trust's **Stein Centre**, highlighting what can be achieved by finding a route to recovery. Annie added:

*"From the feedback we've received, 'Footprints to Recovery' has been able to inspire people who have previously become stuck in their recovery journey and this has assisted them in moving forward. The project has service user involvement, gives hope to new and existing clients and is visually inspiring to all who see it."*



**"Methadown May"** – **Wirral Drug & Alcohol services** introduced the idea of service users committing to a small reduction in their methadone prescription as a way to start looking at longer term reductions and a move closer towards abstinence where appropriate. A total **reduction of 54 litres** during the month of May was achieved.

Pictured to the left are staff from the **Shared Care and Recovery Team**. Left to right on the back row, **Colin Tyrer, Paddy Byrne, Dr Pete Whitby**. Left to right on the front row, **Danielle Parry, Linda Johnstone, Karen Hoile**.

## Patient Experience News and patient feedback



In May 2014 the **Care Quality Commission** received positive feedback on their website in relation to the **Eating Disorder Service** and their **Consultant Psychiatrist, Dr Matthew Cahill** (left).

*“There is very good teamwork to ensure continuity of care and as a service, they are very person-centred in the planning and delivery of individual care. I have been a patient there since 2007. They listen to user views and act on them. Patient involvement in shaping the service is encouraged.”*

*“The Eating Disorder Team at Macclesfield is part of Cheshire and Wirral Partnership Eating Disorder Service. Dr Cahill has clinic at different sites; Macclesfield, Chester and Warrington. I have always gone to Macclesfield but last week had to go to Chester clinic as a 'one-off' instead of Macclesfield. When Dr Cahill asked if my journey had been ok, I commented that it is much easier to get to on the bus than Macclesfield. He straightaway said that I can always see him in Chester from now on if it is easier. He has also given me the choice of staying with the Macclesfield Team as well because I know them or I can transfer all my care to Chester. I think Dr Cahill has really considered me and my needs and that it is commendable that he is so caring and professional at all times.”*



In June 2014 CWP organised an open afternoon for carers to attend **Bowmere Hospital**. Carers are vital partners in the provision of mental health and social care services. 1.5 million people care for someone with a mental illness in the UK. That is one in every forty people, or one in four of the UK's six million carers.

Carers are increasingly being recognised for their expertise and knowledge, and the fact that they can be **essential partners in the treatment and recovery processes**. Indeed, caring rarely stops when the person cared for enters acute care services. Carers are often integral to a service user's support system, and their input and support can substantially improve that person's chances of recovery.

The carers event has helped promote **'Triangle of Care'** which is a therapeutic alliance between a service user, staff member and carer that **promotes safety, supports recovery** and **sustains well-being**.

**Helen Bainbridge, Carer Experience and Recovery Lead**, (right) said

*“A key achievement from my perspective was to have a range of providers from the Voluntary Sector covering the whole age spectrum and specialists in Mental Health. Organisations included **Cheshire Young Carers, Cheshire Carer's Centre, Making Space, Alzheimer's Society, Age UK (Cheshire)**.....I was present with the **Triangle of Care Stand, CAMHS** handed out bracelets they had made to carers and **Cherry Ward** had a fabulous cake stand. I was delighted I managed to attract the **full age spectrum of support** agencies to attend.”*



In quarter 1, CWP formally received **751 compliments** from people using the Trust's services, and others, about their experience of the Trust's services. Below is a selection of the comments and compliments received for the specialties across the Trust:

### **Adult mental health services**

*"The assessment and outreach team are fantastic. They stand out as a particularly strong element of our experience, my daughter was very anxious about discharge and the staff that supported her made a very stressful time easier to manage."*

### **Physical health – CWP West**

*"The family nurse partnership programme has helped me a lot through my pregnancy from the start. Helping me become the best parent I can be by myself and since I have given birth my family nurse has educated me about caring for my child in the best way possible and I feel lucky to receive this programme. Thank You!!"*

### **Child & adolescent mental health services**

*"Thank you for making me feel that I am in fact not alone and I feel that I have finally found someone to talk to."*

### **Learning disability services**

*"They have met his needs and meet our needs too and provide emotional support."*

### **Drug and alcohol services**

*"Thanks for the service and advice over the past few months. I've taken on board everything you said. I really appreciate it! Thank you!"*

### **Share your stories**

We welcome feedback about any of the Trust's services; please share your stories via email at [hayley.mannin@cwps.nhs.uk](mailto:hayley.mannin@cwps.nhs.uk)

Look out for more quality stories in the quarter 2 *Quality Report*