

# Quality Improvement Report

Special 2020 Edition

### Vision:

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



Collage of CWP being the best they can be, through Quality Improvement, in response to the COVID-19 pandemic

Helping people to be the best they can be

### Welcome to CWP's third Quality Improvement Report of 2019/20

These reports are produced three times a year, this being the third edition of 2019/20 (and **special** edition to take account of the current exceptional operating environment associated with the response to the COVID-19 pandemic). The report aims to update people who access and deliver our services, carers, the public, commissioners, internal



groups, and external scrutiny groups on progress in improving quality across our services. We are required to formally report on our quality improvement priorities in the annual *Quality Account*.

At CWP, we look at **quality** in detail to better demonstrate where we are making real improvements, with the aspiration to achieve **equity** of care through **Quality Improvement** (QI). We are using international ways of defining quality to help us with this aim.

CWP's Quality Account and Quality Improvement Reports are available via: <a href="http://www.cwp.nhs.uk/resources/reports/?ResourceCategory=2335&Search=&HasSearched=Tr">http://www.cwp.nhs.uk/resources/reports/?ResourceCategory=2335&Search=&HasSearched=Tr</a> ue

Reporting on the quality of our services in this way enhances involvement of people by strengthening our approach to listening and involving the public, partner agencies and, most importantly, acting on the feedback we receive.

QUALITY						
Ψ	Ψ	Ψ	Ψ	Ψ	Ψ	
Patient safety		Clinical effectiveness			Patient experience	
Safe	Effective	Affordable	Sustainable	Acceptable	Accessible	
Achieving Equity and Person-centred Care through						
CO-PRODUCTION, CO-DELIVERY, QUALITY IMPROVEMENT & WELL-LED SERVICES						
Delivering care in a way which increases safety by using effective approaches that mitigate unwarranted risks	Delivering care that follows an evidence base and results in improved health outcomes, based on people's needs	Delivering care in a way which maximises use of resources and minimises waste	Delivering care that can be supported within the limits of financial, social and environmental resources	Delivering care which takes into account the preferences and aspirations of people	Delivering care that is timely, geographically reasonable, and provided in a place where skills and resources are appropriate to meet people's needs	

This report is just one of many reviewed by the Trust's Board of Directors that, together, give a detailed view of CWP's overall performance.

This Quality Improvement Report provides a highlight of what CWP is doing to continuously improve the quality of care and treatment we provide. It also provides examples of Quality Improvement (QI) projects.

Implementation of our new Quality Improvement strategy commenced in April 2018. Phase 1 of the strategy stretches across three years and describes how our people and teams who deliver and support the delivery of our services will work together to create a culture where QI can flourish.

### EXECUTIVE SUMMARY QUALITY IMPROVEMENT HEADLINES THIS EDITION

24/7 Crisis line for mental health established to support the populations we serve 

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### QUALITY IMPROVEMENT PRIORITIES

We have set three Trustwide QI priorities for 2019/20, which reflect our current vision of "working 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. We have made a commitment in our Quality Account to monitor and report on these goal driven measures in our Quality Improvement Reports.

### Patient safety priority for 2019/20

#### We wanted to:

Reduce the number of incidents of people accessing CWP services that have caused harm to themselves.

### How we have delivered improvements:

- ✓ The National Reporting and Learning System (NRLS) publish patient safety incident figures in October and March each year. The October 2019 patient safety incident figures showed that there is no evidence for potential under-reporting of patient safety incidents. The previous six-monthly report available showed CWP had maintained its comparative position (the lowest 25%), however it had since improved to be in the middle 50% of reporters. This means that CWP has achieved this patient safety priority earlier than expected. The figures due to be published in September 2020 (later than expected due to the emergency response to the COVID-19 pandemic) will confirm whether this was sustained at year-end (end March 2020).
- The Clinical Practice & Standards Sub Committee have overseen progress with this priority, including receiving updates on how the self-harm group were continuing to meet to take forward improvement work, with assistance from CAMHS.
- ✓ As part of the Trust's organisational focus on positive behaviour support (PBS), subject matter experts, in relation to various areas of clinical practice and interventions including self-harm, have been involved in defining Trust standards and competencies which align with PBS best practice and the Trust's education programme. For example, whilst many wards are using 'self-soothe' boxes already, it is expected that all wards will be using this intervention to help in the reduction of self-harm.
- Part of the Trust's 'Rainbow framework', which is the organisation's education training programme for PBS being rolled out to all wards in the Trust, includes active support under which the management of self-harm very much forms a part.
- ✓ The Trust's ambition is to embed the PBS mindset into everything we do, understanding that every behaviour has a reason, and, within a clinical setting, building the understanding of functions of behaviour; this is critical to supporting people with self-harming behaviours.

### Clinical effectiveness priority for 2019/20

### We wanted to:

Improve access to psychological therapies for people accessing acute care services (this priority also aims to improve access for people accessing community and primary care services).

### How we have delivered improvements:

- ✓ The Heads of Operations for Specialist Mental Health developed a psychological interventions strategy that support increased access on our wards, home treatment teams and community services.
- ✓ The strategy links into the Structured Clinical Management (SCM) training that has been rolled out across community services, as well as the Personality Disorder (PD) guidelines written by the PD work stream and the NHS England funding for psychology intervention training in community mental health teams. The strategy is currently in the process of being implemented.
- Our approach to psychological and psychosocial interventions during acute inpatient care includes:
  - Protected 1:1 time with named nurse, other nursing staff, occupational therapy
  - Person centred care planning
  - Building motivation
  - Recovery focus
  - Psychoeducation

- Psychoeducation for carers
- Psychological approaches
- > Enhanced self-management skills

### Patient experience priority for 2019/20

### We wanted to:

Improve engagement with bereaved families and carers.

### How we have delivered improvements:

- ✓ We have worked with people who have been bereaved by suicide to understand their perspective in relation to our information and processes that take place. This is a sensitive time and judgement of when to involve people in this process is gauged carefully.
- ✓ We have reviewed the bereaved family's booklet and are working on a refreshed version to ensure all information is still up to date and relevant.
- ✓ We have also completed a self-assessment against the National Quality Board guidance so that we know our progress and further actions that are required. We meet many of the guideline requirements and we have applied a QI approach to review our processes for managing incidents across all our Care Groups and several improvements have been identified. We are currently identifying a pilot site to test the improved process for managing incidents.
- ✓ In undertaking the self-assessment, it has been very beneficial in identifying where our QI work can be focussed. This includes further developing assurances against some standards, for example enhancing our incident reporting system to provide assurance in reporting the actions that our Family Liaison Officers take.
- This priority area is very important to the Trust, moving forward we want to sustain the improvements we have made and build on this further by the work we are doing to improve the complaints and incident management process.

### Quality improvement priorities for 2020/21

The following table provides details of our quality improvement priorities for 2020/21 that were agreed by our Quality Committee. These priorities reflect our vision of "working in partnership to improve health and well-being by providing high quality care". These new QI projects are in line with our strategic objectives. We have made a commitment in our Quality Account to monitor and report on these goal driven measures in our Quality Improvement Reports.

	QI priority	Improvement target	How will progress be measured?
Patient safety priority	Improvement in team level patient safety systems and culture, as rated by the people who deliver our services.	At least a 10% improvement in the percentage of survey participants grading their team as excellent or very good.	A baseline will be measured during 2020/21 and will include teams that have completed a patient safety culture survey. This is in order to demonstrate, at the point of follow-up, the impact of specific work we will be doing with Patient Safety Leaders identified from each of these teams. Each survey participant gives their team a "patient safety grade" from A (excellent) to E (failing).
Clinical effectiveness priority	Improved and consistent recording and use of outcome measures across inpatient, community, EI, CAMHS and perinatal services.	Implementation of outcome measurements across specified mental health services by 31 March 2021: CYP Perinatal: 40% of children and young people and women in the perinatal period accessing mental health services will have their outcomes measured at least twice. Adult Community MH: 40% of adults accessing selected CMHS will have their outcomes measured at least twice. EI, CAMHS and inpatients: 100% of teams routinely and consistently reporting and using agreed outcome measures from April 2020 onwards.	Each Care Group will monitor the variation in their routine data collection and use of outcomes data within services.
Patient experience priority (	Improvement in asking people who access our services about their experience of care, and learning from what they tell us to make changes to our services and improve their experience.	Qualitative: Services will promote the revised FFT survey in addition to using a variety of opportunities to 'Ask, Listen, Do' in relation to what people say matters to them. They will report changes they make as a result of feedback they receive from people by publishing local posters.  Quantitative: CQC community mental health survey respondents' being asked for their views on the quality of their care – at least 6 out of 10.	Qualitative analysis of 'Ask, Listen, Do' posters (incorporating FFT feedback) and CQC 2020/21 community mental health survey results.

### **QUALITY IMPROVEMENT PROJECTS**

We're so proud and thankful for everything people who access and deliver our services, carers, the public and volunteers are doing in delivering patient safety, clinical effectiveness and patient experience improvements despite the challenge of the COVID-19 pandemic. Here's just a few examples that have been shared with us where people have gone above and beyond.

### 24/7 Crisis line for mental health established to support the people we care for



New 24/7 mental health helpline for urgent support, for residents of Cheshire West, Cheshire East and Wirral:

0300 303 3972

For people of all ages - you are not alone.

The 24/7mental health helpline was set up at the start of the pandemic as a part of the NHS Long Term Plan to improve access to mental health support. Originally it was due to go live next year, however, it has been fast-tracked to be available to support local people during the COVID-19 pandemic. Impressively, the crisis line was established within 6 days of the new national request.

The helpline is open 24 hours a day, seven days a week and is open to people of all ages – including children and young people. It is operated by CWP staff who can connect people experiencing mental health issues with the best local support A number of our clinical support service staff have been redeployed as call-handlers. The team are taking between 80-100 calls each day, at weekends and bank holidays. The feedback has been extremely positive from staff, patients and carers. In order to

make it accessible to the population, we started a direct marketing campaign which helped us reach up to 250k people through social media including shares, likes and retweets. We also had significant coverage in regions broad cast and media; in total reach of 2 million. Consideration is now being given to how the service may be further developed for the future.

For more information, please contact the Effective Services team on 01244 397390.

Colleagues from the Safe Services clinical support team redeployed to Bowmere Rehabilitation Unit to strengthen person centeredness and build a 'team around the team' approach

### **Background:**

Prior to the COVID-19 pandemic, CWP aimed to improve the quality of life for everyone in the Trust. This Trustwide initiative aimed to reduce the use of restrictive practices by focusing on a values and strength based approach, with active support and meaningful engagement being a foundation building block for this way forward. This is in line with standards around therapeutic support set out by the Restraint Reduction Network and the CQC.

Consequently, Positive Behavioural Support (PBS) training was being rolled out across the Trust via a "Rainbow Framework" which involved delivering different levels of training depending on staff members' roles. The Trust aimed to ensure that as a baseline, PBS level 1 training for



Safe Services Department Quality Improvement Report Edition 3 2019/20 Page 7 of 18 all bed based staff be delivered by 31 March 2020. However, due to COVID-19, training in large numbers needed to be suspended.

### What did we want to achieve?

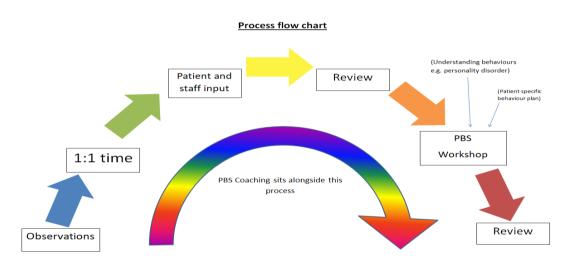
In light of COVID-19, the Trust had to adapt the way it was working, using available skills in Safe Services where they were most needed. Prior to COVID-19, Katherine Evans, Head of Quality Assurance & Improvement, was creating the PBS rainbow framework and was implementing this across the Trust Meanwhile Estee Tsang, Patient Safety Improvement Lead, was working with Willow ward conducting a Patient Safety Improvement Review. Therefore, this was a unique opportunity to work in an inpatient setting, directly with clinical staff, for a significant period of time and allow for a "team around the team" approach.

This enabled us to carry out a capable environment assessment which gathers information on how a ward or service is operating in its current state. We wanted to look at people's wellbeing (both people who access and deliver services) in its current state and implement changes to expand on the strategies already in place. The PBS philosophy recognises that the environment and staff wellbeing are the foundations to move forward with active support and meaningful engagement.

#### What we did:

We aimed for this to be a 12 week programme whereby we implemented the process, illustrated in figure 1, with six people accessing services who had been identified as potentially benefitting from PBS support.

Figure 1



In the initial few weeks, we were observing the ward; interactions between staff and patients, getting to know the team and establishing a baseline. We carried out a capable environment assessment on the ward that looks at how the ward space is used and the sensory considerations needed in order to maximise the suitability of the environment to implement PBS. We also gathered people's input regarding care being delivered on the ward, with the aim to use a functional assessment of behaviour to increase understanding. This then allowed us to create a personalised behaviour support plan collaboratively with the person accessing services.

We hosted a staff wellbeing day, to gather feedback on what the rehabilitation unit should entail, what is working well and what isn't, what do staff currently do to keep themselves well and what could CWP do to improve staff wellbeing. This feedback was valuable to see where the improvement needed to be made and this fed into the process of assessing the capable environment.

Involvement with people accessing services was also a priority. We asked all of these people what activities they would like to see on the ward. In light of the COVID-19 restrictions, there was no opportunity to link with the community, therefore pressure on Occupational Therapy to provide meaningful activities had increased. As a result, we assisted the Occupational Therapists to create an activity timetable in line with people's wishes and needs. We also worked with people to implement self-help resources on both wards and to create a wellbeing video to be shared on CWP social media platforms about coping during COVID-19; this gave people the opportunity for a creative outlet.

We triangulated all the data from the wards' data packs, the staff wellbeing day, patient and staff surveys to create a rehabilitation unit vision, and hosted a vision day to communicate this to staff. During this event, we asked staff what the barriers would be to implement PBS and what solutions they think could be put into place to address these barriers. Communication was a recurrent theme being raised. Therefore, as a solution to this, we proposed a ward/ shift planner board in the ward office. We created a number of mock boards and asked staff to vote on which would be the most useful.

#### Results:

The project is still ongoing, the first of six PBS workshops was held in the beginning of June 2020. We hypothesise that in the coming months there would be a significant decrease in the use of rapid tranquilisation and behaviours of concern (identified in a patient Behaviour Support Plan) exhibited by people who have a PBS plan in place that is being consistently implemented. We also aim for an increase in capability (confidence, capacity and competence) for all clinical staff on the rehabilitation unit, particularly confidence about how to respond to behaviours of concern.

### **Next steps:**

The Rainbow Framework is hoped to be rolled out across the Trust. We aim to create a standard operating procedure in order to implement this programme in order to offer it to other teams.

For further information please contact Katherine Evans, Head of Quality Assurance & Improvement at Katherine.evans9@nhs.net

## Personalised support and care planning to patients on Brooklands ward increases staff confidence to support sustainable improvements and better outcomes for patients

The ward manager on Brooklands Psychiatric Intensive Care Unit (PICU), Wirral, commenced a QI initiative to improve the care plans on the ward. The aim of the initiative was reviewed due to COVID-19 and depleted staff teams and prioritised as being to reduce physical restraint incidents.

The team, temporarily, were joined by the care planning lead, who was available to staff as an extra member of the PICU team. The care planning lead was able to initiate teaching opportunities in practice to increase awareness of trauma informed care and the use of personalised care and support. Any improvements made could then evidence how the use of person centred thinking and planning tools improve the effectiveness of personalised care for people that aim to reduce incidents in behaviours of concern.

Two staff nurses were identified as care planning champions and trained to use the person centred tools in practice, supporting people to talk about their preferred future outside of the unit, and initiated change talk using a motivational interviewing approach. The care



planning champions encouraged and supported involvement of other staff on the ward by sharing the information they had been told by the patients. Using the trauma informed model of care to seek an understanding of behaviours of concern which occurred at times of upset and distress, the way in which patients were perceived by staff altered.

Combining trauma informed care with person centred thinking and practice tools available to staff, promoted by the care plan lead, helped to increase confidence in staff to use the tools with people on Brooklands ward.

The important to me/ important for me tool was used with all inpatients and helped to capture aspirations and strengths that staff were able to document into the patients' one page profiles. Staff showed a greater understanding, which allowed people to look deeper and explore the behaviours of concern. This new way of working was initiated with all inpatients on Brooklands ward and we would expect to see improvements in personalised care by using the person centred tools.

The ward plans to regularly audit the care plans which will support sustainable improvements and better outcomes for people on the ward.

For more information, please contact the Brooklands Ward on 0151 343 5500.

### Clinical Prioritisation during the pandemic ensured continuity of planned appointments

### **Background:**

In the unprecedented time of the COVID-19 pandemic, potential staff shortages mean that delivery of essential services could come under threat.

#### What did we want to achieve?

The continuity of service delivery at CWP, during the pandemic, to ensure that the planned care appointments, in community mental health teams and physical health teams, carry on as far as practicable.

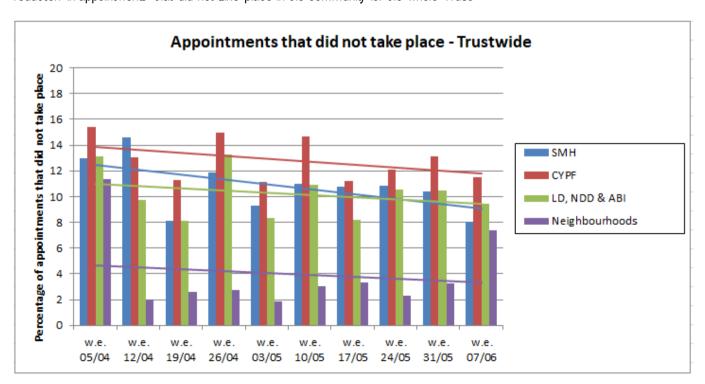
### What we did:

In order to help us deliver services to the right people, we created a system called clinical prioritisation to enable us to support the right people at the right time in the right place and by the right person. Patients were triaged as either red, amber or green depending on their clinical need and risk; those who needed face to face appointments were able to have them safely. Detailed flowcharts were created for community and inpatient teams to ensure people could be cared for in the safest way possible; this included looking at alternative approaches for consideration, including telephone appointments, video call, self-care and family support. If a face to face appointment was needed, staff followed the relevant PPE requirements for the setting and limited time spent with the person without compromising care.

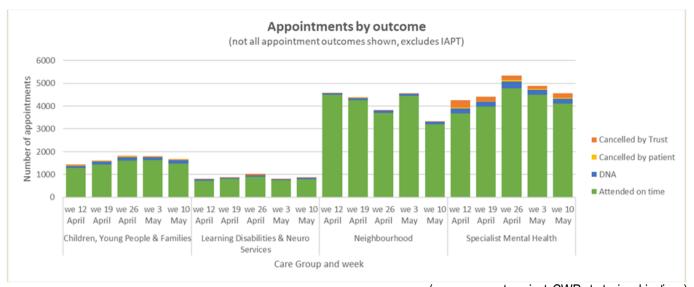
What made it possible is that we were able to use technology like phones and video consultations to reach people. The Trust has now approved three platforms – MS Teams, WebEx and Acrux Fleming. We continued to provide specialist support for people who required inpatient care within CWP, including the opening for two weeks of a specialist COVID-19 ward to care for patients with COVID-19 safely, ensuring both physical health and mental health were supported. We have now closed the ward and we are using it as per its previous use.

#### Results:

Throughout the pandemic, we were able to deliver 98% of planned appointments in our physical health services and 87% of planned community appointments across Learning Disability, and Children, Young People & Family services. The weekly situation reports show the percentage of appointments not taken place; this includes appointments cancelled by the Trust, cancelled by the person accessing our services, and those that did not attend (DNA). The chart below shows an overall reduction in appointments that did not take place in the community for the whole Trust.



For context, the chart below shows almost 91% of planned appointments were attended across all care groups (w.e. 12/04/2020 - w.e. 10/05/2020):



(source: report against CWP strategic objectives)

### **Next steps:**

Due to its success, the clinical prioritisation of community care will continue to be developed and refined to support clinical services and enable reporting against CWP strategic objectives to our Board.

For more information, please contact Bev Tudor, Quality Surveillance Specialist at beverley.tudor@nhs.net

### Perinatal 'staying at home' booklet helps mothers and families adjust their routines

The Specialist Perinatal Mental Health Team have co-produced a booklet with the Cheshire and Mersey Specialist Perinatal Service to provide information and support to people accessing their services during the pandemic, with routines, activity and wellbeing.

The booklet has been written by specialist occupational therapists and peer support workers; it includes examples and tips for maintaining daily routines and adapting to staying at home. There are good ideas for activities to provide joy and pleasure, activities to provide a sense of purpose and activities to help with self-care needs, and reassurance and how to resolve mums feeling like they are doing too much or haven't done enough.

The leaflet provides templates to help with scheduling; weekly, daily or simple to-do lists and really helpful information on how to make sure your environment and space is the best it can be for you. The team describe how it can take 'a village' to raise children, and how in current circumstances a person doesn't have their 'village' around them. The leaflet includes how to keep in touch with the important people in your life, with lots of resources for both mum and children to prevent feelings of isolation. These include the Chester Zoo Facebook page where they are recording live tours of the zoo, baby sensory groups and videos, toddler activities and exercise classes.

The team are publicising this across the Cheshire and Mersey Specialist Perinatal Service Twitter page.

For more information, please contact the Specialist Perinatal Mental Health Team on 0151 488 8434.



### CWP Recovery College YouTube channel provides ideas and resources for selfcare

In direct response to the current COVID-19 pandemic, the Involvement, Recovery and Wellness Centre has developed a YouTube channel where helpful self-management strategies and distractions can be practiced at home. Peer support volunteers have recorded videos and tutorials on things like crochet, eating well and their own poems and short stories.

Videos include relaxation techniques for adults and children, mindfulness (at work, mindfulness use of your mobile phone), meditation, exercise, self-care help and a number of 'how-to' videos from the Art Therapist.

Alongside this, the team have also developed a range of workbooks for people to work through at their own pace that can be used in conjunction with the videos or as a standalone tool. They have made these accessible to all on the CWP public website.

One of the newly developed booklets is called 'Looking after yourself during the COVID-19 pandemic'. This focuses on what we can control and letting go of what we can't. There is lots of advice on how to look after yourself at this time; creating a routine that works for you, keeping in touch with loved ones, exercise, quality of sleep, eating and drinking enough, talking to children about the pandemic and mindfulness and relaxation techniques. The book also includes resources and support available across the Cheshire and Wirral area.

For more information, please contact the Involvement, Recovery and Wellness Centre on 01625 505647.



### Hand-knitted hearts on Silk Ward keep loved ones connected

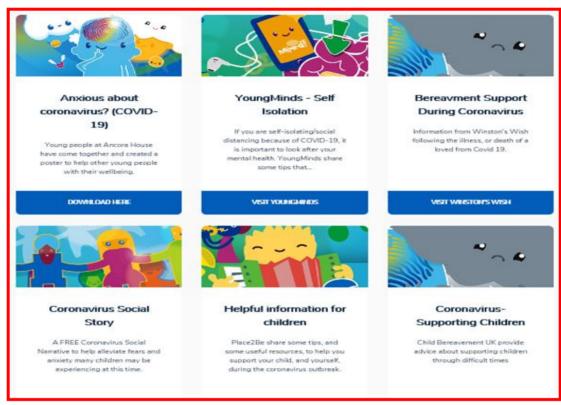
The ward manager on Silk ward, Macclesfield, has hand-knitted hearts for people to send to their loved ones with messages. One heart stays with the patient and the other goes to their loved one along with a card and a verse explaining the meaning behind it – allowing people to be given a special keepsake and feel more connected with the important people in their lives.



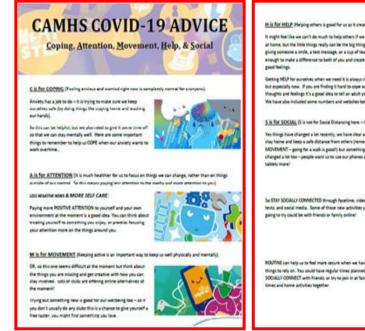
For more information, please contact Silk Ward on 0300 303 0709.

### My Mind CAMHS website is a hub for updates, information and resources for young people

The CAMHS teams have updated their website to let young people and their families know about the changes to service due to COVID-19. The team have included updates on which bases the teams are currently working from and contact details for all services. CAMHS have also provided dedicated resources to help support young people's emotional wellbeing during the pandemic.



Winsford CAMHS have put together some helpful advice for young people whilst staying at home and made their parent and carer support group virtual to continue providing support. Young people at Ancora House have co-produced a poster, to help other young people cope with worries about coronavirus, using the acronym ANCORA:







For more information, please contact our CAMHS team on 0300 303 3179.

### Adult inpatients maintain safe staffing through the pandemic

Minimum safe staffing requirements have been maintained throughout the COVID-19 response and all people who have required inpatient admission have been able to be supported within the CWP footprint. Initially, COVID-19 cohort facilities were been developed and remained operational when required, which included the development of comprehensive assessment and treatment pathways.

Inpatient staff have been provided with bespoke face to face training to improve clinical knowledge and skills in relation to supporting people with COVID-19. Subsequently, all inpatient wards have identified cohorting areas to support people with suspected and confirmed symptoms of COVID-19. Occupational Therapy provision has been developed to support people who are required to self-isolate. Staff have worked very hard to



ensure all wards maintained their minimum safe staffing levels by working across different wards and some staff being redeployed from community based services.

For more information, please contact Effective Services team on 01244 397390.

### Mental Health Law and ICT teams' innovative video conference hearings



During the emergency response to the COVID-19 pandemic, the Mental Health Law (MHL) team have found many creative ways of providing an effective service. One in particular, in conjunction with the ICT team, relates to the use of video conferencing which has been praised by a Judge in the Leicestershire area. The team managed to continue to provide their usual support, referring people for tribunals and supporting clinical staff. The judge praised the Trust for their efforts with the use of video conference hearings. She explained that the feedback received

from the panel was that one of their hearings was a "model video conference" with further praise for the efforts of our ICT team in making the changes to improve the quality of hearings being held and that this was immediately evident during a recent hearing. She also further noted the significant efforts by clinicians to provide a timely and professional hearing.

It has been highlighted that as video conference hearings are set to continue for the remainder of this year, other trusts could learn from adjustments that MHL team has made to provide better hearing and experience for people. The Trust's efforts have also been passed on to the Deputy Chamber President for the area.

For more information, please contact the Mental Health Law team on 01244 393162.

### Acts of kindness during the COVID-19 pandemic to improve wellbeing

This year's Mental Health Awareness Week's theme was 'kindness'. Random acts of kindness help people to connect with others, and boost everyone's mental wellbeing. Mental Health Awareness Week is a great time to start making kindness a habit. Staff on Rosewood used a day to share 'acts of kindness' and ideas around how they can improve wellbeing and strengthen the rehabilitation model. Other staff at Bowmere Hospital held a wellbeing event focusing on integrated working with acute wards, Home Treatment Teams, Liaison and Bed hub.



For more information, please contact the Bowmere hospital on 01244 397300.

### Podiatry team innovation provides continuity of care to people with biomechanical aids

The Podiatry team usually provide support face to face to people with biomechanical aids. During the COVID-19 pandemic, the team have made use of the technology available to ensure that this support has continued by using videoconferencing to carry out appointments.



For more information, please contact the Podiatry team on 01244 650342.

### Overcoming social distancing restrictions to celebrate VE day



Friday 8 May 2020 marked the 75<sup>th</sup> anniversary of the Victory in Europe. Despite the COVID-19 restrictions, ward staff at Saddlebridge supported people who wanted to commemorate and enjoy the day with a picnic in the garden. Juniper ward also held an afternoon tea for their patients to celebrate VE Day, and decorated the ward with Union Flag bunting and posters, whilst ensuring that patients and staff could adhere to the Government's social distancing rules.

For more information, please contact the Juniper Ward on 01244 397300 and Saddlebridge Recovery Centre on 01625 862400.

### LD CAMHS Wirral COVID-19 resources provide reassurance to families at home

The team have created a folder of resources on COVID-19 for people accessing their services. Staff have also created social stories for people who are struggling to understand the restrictions in place and young people who may have very literal thinking and think that 'stay at home' means they can never leave the house. Parents have shared these social stories with other families to support them.

The team have also provided reassurance to parents who are concerned about incorrect information about COVID-19 and people with disabilities being circulated in various groups. The team have used NICE guidance to do this and put flags on young people's notes for reasonable adjustments to be made should they fall ill.

For more information, please contact the LD CAMHS Wirral team on 0300 3033 157



### Letters to Loved Ones continue to proveide contact between patients and their families

A dedicated email address was set up for family and friends to send messages to their loved ones on our wards. A young person from Indigo ward designed the poster for the initiative:



For more information, please email <a href="mailto:cwp.letterstolovedones@nhs.net">cwp.letterstolovedones@nhs.net</a>

Between December 2019 and March 2020, CWP formally received **936** compliments from people accessing our services, and others, about their experience. Below is a selection of the comments and compliments received:

### Adult Home Treatment team Central & East

"Patient said that he would like to thank the whole team for the help and support that he has received. He found the Community Treatment Bed stay particularly beneficial, and the face to face/ telephone support has been fantastic. Also knowing that the support lines are there 24 hours is a massive help and a welcomed safety net, it made him feel like he was not on his own."

### Indigo ward

"So it is now more than ever that I wanted to thank you for doing the jobs that you do... TRUE Heroes. Thank you for never giving up on me, even when I gave up on myself."

### **CHEDS**

"In these truly bizarre times, I just want you to know how utterly everything you've done for our daughter and for us as a family. Honesty, we wouldn't have been where we are today without you. You've been such a guiding light, such a voice of balance and reason. You've given such sound advice without giving cause to believe that there is a perfect way of being; showing that we have to live with and find a way through some less comfy things in life and that it's OK to do that - and everyone does for the most part Your very gentle firmness has helped our daughter - helped us all believe in and stick to the process which has taken her from a very dark and sad place to a far better one. Honestly, we've learned so much from you and are so much better for it. You've been

### **Chester East Care Community team**

"I would like to send my gratitude to your department, their excellent support enabled mum to return to her family from her nursing home. The speed in which they organised the equipment enabling the move was outstanding. The care and compassion they showed was just amazing. I really believe they saved my mum at this distressing time. My heartfelt admiration for your staff and their commitment to us all."

### **Eating Disorder Team, Wirral**

"I have just received my discharge letter. Thank you very much for all your help over the last few months, I will be forever grateful to you as you have helped me to turn my life around. I would also like to thank you for including a section in my letter about how you feel there are no barriers in me being able to commence my university course this year. I cannot thank you enough and I have something for you to thank you for all your hard work and effort with me which I will drop in to the Stein Centre for you when this is all over and normality has returned (I hope!)"

### **Greenways ward**

"The care my son is receiving is really good, it's clear when I speak to him on the phone that he is improving. He said that he appreciates all that the team are doing."

### **Mulberry** ward

"To the staff of Mulberry ward, we are sending our most sincere thanks to you for looking after our mum as well as all your other patients in these testing times. You are a shining light at the end of a what was a dark tunnel. We hope we get to meet you and thank you in person someday soon. Lots of love and best wishes."

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### **Adult Mental Health – Chester**

"Occupational Therapist has created packs completely independently for patients who would benefit from the range of activities, including some of our patients who benefit from sensory objects due to complex ASD and other mental health disorders. This has demonstrated a creativity and positive, caring attitude in sharing this with the rest of the Chester Adults team. Good things can come from ideas being put into practice, this is a really good example of developing an innovative idea and putting it into practice!"

### Neston & Willaston CCT

"I am clapping my hands to say thank you to the Community Nurses for their care and kindness over the past few months."

### Oaktrees ward

"Thanking staff for the commitment and hard work put in every single day.

Eternally grateful for the love, support and dedication provided for their daughter."

### 24/7 Crisis Line

"He has found the crisis line very effective. He felt listened to, given options of how to self sooth, practitioner did not over respond when he spoke about having suicidal thoughts but no intent to act on these thoughts. He is aware of other people who have also used the service who have equally found this to be effective."

### All Age Disability – Family Support Services

"I just want to say thank you to you all for continuing with family support sessions. It is keeping us in some sort of routine and us all having a little break from each other. We really appreciate all of you."

### Share your improvement work!

We welcome your best practice examples and Quality Improvement successes; please share your work via the Safe Services Department using the QI Hub page on the intranet or contact the Patient Safety Improvement Team on 01244 397410

Look out for more about Quality Improvement in Edition 1 2020/21 of the Quality Improvement Report

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