

Avon and Wiltshire Mental Health Partnership NHS Trust

REPORT TO THE: HEALTH OVERVIEW AND SCRUTINY PANEL

DATE OF MEETING: 26 MARCH 2015

SUBJECT OF REPORT: QUALITY & PERFORMANCE UPDATE

**PRESENTED BY: EVA DIETRICH (CLINICAL DIRECTOR) & SUZANNE HOWELL
(MANAGING DIRECTOR)**

RECOMMENDATIONS

It is recommended that Members consider and comment on AWP's Quality & Performance report.

1. DETAILS

1.1 Introduction

This brief report provides an update on AWP's North Somerset's Locality's performance against the Trust's key quality indicators. The service's performance including the monitoring of the Section 75 agreement (Schedule 5) which is reviewed at the monthly North Somerset CCG Quality & Performance Meeting. It should be noted that a verbal briefing on the Locality's CQC Inspection & Action Plan will be provided at the HOSP meeting.

1.2 How are we performing?

For information, Appendix A includes AWP's current performance results (January 2015) and also for comparison, the results which were previously presented to the HOSP meeting in July 2013 & September 2014.

Over the last 6 months, performance has generally been steadily improving across all indicators. Most indicators (with the exception of Sickness) are performing to a high standard. It was very pleasing to see that in January, the service user employment indicator after several years on red and amber, turned green (10%)! This improvement must be in part due to the work of the job club which is based at the Carlton Centre.

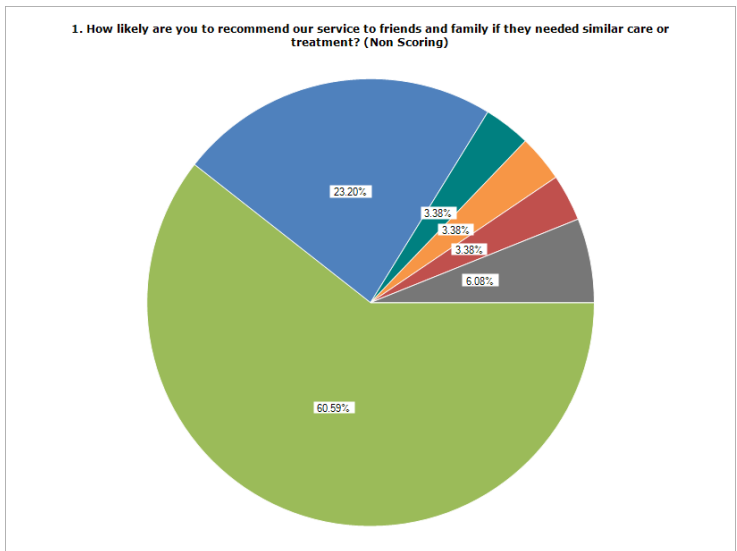
1.3 Friends and Family (F&F)

The Friends and Family score continue to perform very well (54). The Friends & Family response rate has steadily been increasing; the current score of 13.8%. However, this is still short of the 15% target. The Locality is currently reviewing its processes and it's hoped that a greater input from the admin team will help to improve the response rate.

The following graphs illustrate the proportion of responses against each of the Friends and Family satisfaction categories.

Community Services (August 2014 – January 2015)

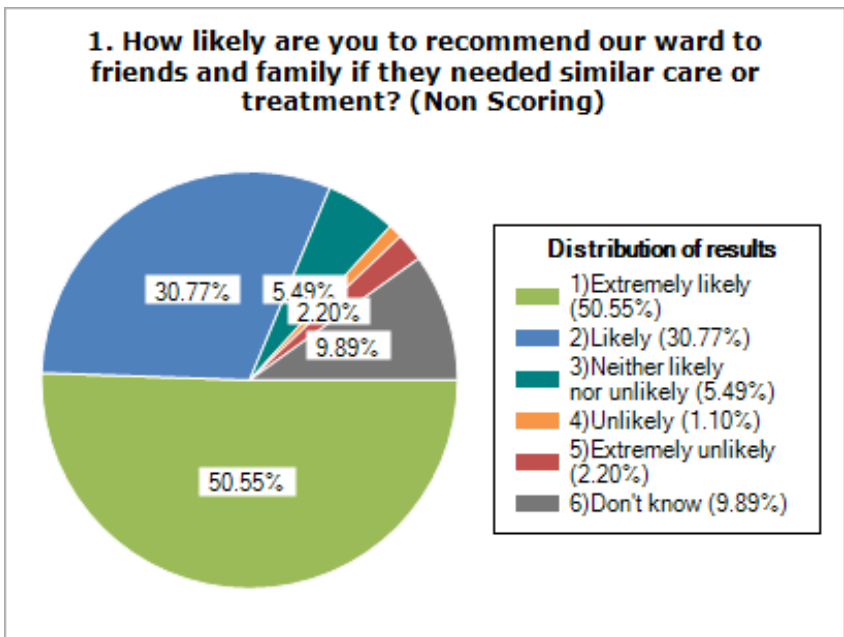
A total of 444 community questionnaires were received:



For AWP’s Community services, overall **84%** of service users would either extremely likely or likely to recommend, with **8%** unlikely or extremely unlikely to recommend.

Inpatient Services (August 2014 – January 2015)

A total of 91 questionnaires were received.



For AWP's Inpatient services, overall **81%** of service users would either extremely likely or likely to recommend, with **3.3%** extremely unlikely or unlikely to recommend.

The vast majority of comments across all services received are most positive; the following is a small sample:

Inpatient Comments

- My recent stay at Juniper ward after I experienced serious problems coping with my ongoing condition at home proved extremely helpful. It gave me a break, build up my confidence, helped me review my medication and initially kept me safe. I haven't got family or a partner to support me at home and I can't thank the staff enough for their care and dedication.
- All staff I had contact with were friendly, polite and extremely helpful. I was kept informed at all times. I was very pleased with the outcome of the treatment.
- I think Elmham Way is a brilliant place. The staff are (mostly) polite and helpful. There are some exceptional staff. There are activities to do with other people and I felt very included during my stay, although I could have quiet, private times too. Thank you for providing such amazing help to get me well. I would recommend Elmham Way to family and friends where as I would not recommend any other places I have been. It's a calm environment in which to recover and go home.
- Because they are genuine people who care and don't judge and are worth their weight in gold.

Community Services Comments

- The service is most informative and nothing is too much trouble for all staff concerned. I cannot praise them too much
- Completely non-judgemental service. Everything was explained in a clear, precise but caring manner.
- Feel that I have received a great deal of sympathetic support and guidance, already leading to a slight improvement in my condition. I am very grateful to the people involved in my case.
- The person providing the service was kind, understanding and informative and I had confidence that I could contact her if I needed further support

The following table includes the actions that have been taken to address the small numbers of negative comments that have been received (October 2014 – January 2015):

Month Comment Received	Team / ward	Comment	Action taken	Date Action Taken
December 2014	PCLS	I was only in the appointment for 25 minutes and another member of staff came in and interrupted.	It was discussed in a team meeting to remind staff not to interrupt assessments unless absolutely necessary. The Access Team Managers also meet weekly to discuss all comments which are then discussed in the team meetings and minuted.	December 2014
December 2014	Recovery	Too slow giving support, got better and faster support from my GP who did something about it as the coast	Friends & Family responses have been added to the agenda of the weekly Management and Senior Practitioner meeting for discussion.	Jan 2015

		Recovery team could of taken things more seriously and took better action when I was taking one overdose after a other without investigating more into my care.	Comments requiring action will then be taken to the team meeting for discussion.	
December 2014	Intensive	They are no help at all, when I need help they just discharged me from there services. I am very unhappy with the way I have been treated and will be complaining to PALS about this. One of the staff was very rude to me and I don't expect that from a professional at all. I definitely would not want to receive help from them again (what help) they are rubbish.	The Access Team Managers meet weekly to discuss comments which are then discussed and minuted in the team meetings and appropriate action taken as necessary.	December 2014

1.4 Areas for improvement

The only indicators which are currently not on target are:

- **Contract & Monitor Compliance**

Indicator	Nov'14	Dec'14	Jan'15	Commentary
Data Quality Timeliness	87.6%	86.1%	86.9%	This indicator is currently under review by the Trust; there is a recording issue relating to the recording of telephone contacts.
Service User with a review (non-cpa)	91.5%	91.8%	93.2%	This indicator is now green, 95.5% .
EI Psychosis (new cases)	13	15	17	Target for January = 18
Gate-keeping Crisis & Home	89.4%	90.4%	91.6%	There were no gate keeping breaches in January.

- **Sickness (8%, red, target <= 4.6%)**

Unfortunately this is due to a small number of staff being on long term sick (Long term sickness: 5.1%, short term sickness: 2.9%).

2. **AUTHOR**

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Scorecard Results

July 2013

F&F Score	F&F Response Rate	CQC Compliance	Records Management	Contract & Monitor Compliance	CQUIN Delivery	Supervision	Appraisal	Sickness	Finance
57	4.9%	89.6%	78.3%	0		83.2%	87.2	6.4%	

July 2014

F&F Score	F&F Response Rate	CQC Compliance	Records Management	Contract & Monitor Compliance	CQUIN Delivery	Supervision	Appraisal	Sickness	Finance
49	10.1%	94.8%	83.4%	0		82.4%	93.1%	5.92%	

January 2015

F&F Score	F&F Response Rate	CQC Compliance	Records Management	Contract & Monitor Compliance	CQUIN Delivery	Supervision	Appraisal	Sickness	Finance
54	13.8%	97.3%	88%	1		87.9%	92.8%	8%	