

Quality Account

2017/18



Providing services we
would be happy for our
own families to use.

Our Vision

To deliver services that we would be happy for our own family to use.

Who we are

During the reporting period of 1st April 2017 to 31st March 2018 NAViGO Health & Social Care CIC provided the following services to the residents of North East Lincolnshire:



NAViGO has reviewed all data available to us on the quality of care of these services. The income generated by the above services reviewed in this reporting period represents 100% of the total income generated by NAViGO.

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Welcome to our Quality Account

Welcome to our Quality Account which sets out how NAViGO continue to provide safe, responsive and high quality mental health services for the people of North East Lincolnshire.

The whole basis of our work within NAViGO is the firm belief that we are here to deliver mental health services that we would be happy for our friends and family to receive. We strongly recognise in everything that we do that recovery requires much more than just a focus on treatment. High quality treatment makes a major contribution to a recovery journey but so does giving hope, supporting people to reach their full potential whether this is through training, employment or simply through engagement with social activities. NAViGO's whole philosophy is one where we value people as people and give people a real say within the organisation.

Within my statement this year I will highlight a number of areas where we have worked to bring real improvements to local services but it is our philosophy and values that drive the use of innovation to be the best at what we do.

One of the service areas that has been experiencing increased pressure over recent years is our crisis and mental health liaison service. These services had seen a 30% increase in people presenting to their service and there was an urgent need to increase the number of staff in the service but also to bring together all the staff who undertake crisis assessments whether they be in adult or older people's services. This work led to the establishment of our new Access Team, the provision of additional funding from the CCG (Clinical Commissioning Group) to appoint additional crisis and liaison staff and putting in place direct mental health support when needed for people attending at the local Accident and Emergency Department.

The second area of quality improvement work I want to highlight is the work led by our staff within Acute and Rehabilitation services to enable people with more complex needs to return to live in our local area with the right support in place. This was a complex project made successful through an absolute focus on the needs of the individuals we were supporting to come home and through the skills and passion of the staff working within our rehabilitation service.

In December 2017 the CQC (Care Quality Commission) completed a Well Led Inspection of NAViGO and also inspected three of our core service areas – The Konar Suite (Older Peoples Unit): Rharian Fields (Eating Disorder Unit) and our adult Community Mental Health Teams.

In our Well Led inspection we were rated Good overall with a Good rating for being safe, effective, and responsive and well led. However we were rated Outstanding for our services being caring. Our unique position as a social enterprise that incorporates staff and community was recognised by the CQC. It was noted that engagement with staff, service users and carers around the development of NAViGO's vision and values was exceptional and engagement of service users and carers was strong at every level of the organisation.

Our Community Mental Health Teams were rated Good. Many congratulations to the staff of both the Konar Suite and Rharian Fields. Both of these services were rated as Outstanding by the CQC.

Early in 2017 we were made aware that our electronic clinical information system that supports the delivery of all our front line services would no longer be supported by the supplier beyond September 2018 and that we would need to select, purchase and implement a new clinical information system by this date. A formal programme was put in place to complete the technical procurement exercise. We have now selected our new system – Systmone – and with robust planning we anticipate implementation of our new system in advance of the September date this year.

Our other key quality achievements in 2017/18 include:

- NAViGO has secured or maintained national accreditation with the Royal College of Psychiatry for all of the following service areas:

Harrison House – Adult lodges
Konar Suite – Older peoples
Rharian Fields - Specialist Eating Disorder service
Older People's community mental health and memory service
Older People's home treatment team

The national accreditation scheme provides assurance to regulators, staff, service users and carers on the quality and safety of services provided by individual service areas or teams.

- We improved our position in the Sunday Times 100 Best not-for-profit companies to work for 2018 by achieving 61st place – our highest ever placing
- We had excellent results in the 2017 NHS staff survey – NAViGO had the 6th highest response rate nationally; our staff engagement score was the 11th highest out of the 308 organisations taking part in the survey, in 78% of the key findings within the NHS survey NAViGO's results were in the top 10% and in 28% of the key findings we either had the best or second best score in the country. As always surveys highlight areas where the organisation needs to do more to support its staff and for us the areas of focus from the responses include increasing staff appraisals and tackling areas where staff feel they have experienced harassment, bullying and abuse.
- Our membership now stands at 418 staff members and 306 community members. We published a new membership strategy last year and two new engagement forums started their work in 2017/18 – Your Voice.
- The Your Voice forum has met fortnightly and received support from a wide range of local organisations including Centre4, Humberside Police, Cloverleaf, Citizens Advice and North East Lincolnshire Council.
- NAViGO worked closely with Franklin College and members of the Youth Parliament to launch Nexus our young people's forum launched in January 2018. Responding to the needs of young people Nexus meetings have covered a wide range of topics including – Food and mood; Sleep and Mental Health; stress busting techniques, exam stress and hate crime.
- Open Minds recently celebrated its 10 year Anniversary. Over their first 10 years the service has treated more than 20,000 service users and have a referral rate of 225 people per month. Open Minds provides a range of psychological interventions to help people experiencing stress, depression or anxiety. This year the service will be introducing an online referral system, making psychological therapies even more accessible.

Everyone working within NAViGO takes real pride in the way we work together to continually improve our services and to deliver better outcomes for our service users. I am always humbled by the passion, innovation and commitment that our staff and members bring to the delivery of our local service and my thanks go out to them.

I leave you with comments from two different health leaders following individual visits they made to NAViGO this year.

"The innovative, ingenious and thoroughly fabulous NAViGO understand the three pillars of public health:

*A safe place to live,
a job
and someone to love.*

They own apartments, create communities and piece by piece, carefully reassemble the components of shattered lives and glue them together with skills, care, attention and tuff-love."

Roy Lilley, Health Policy Analyst, Broadcaster

"On the train home now and Sarah just said to me "its days like this that make work worthwhile". What terrific people we met. Values, creativity, business acumen, utterly person focussed and so proud of what they and their colleagues are doing. An inspiring day @NAVIGOCARE."

Claire Murdoch, National Director of Mental Health, NHS England

In accordance with the National Health Service (Quality Accounts) Amendment Regulations 2012, I hereby state that to the best of my knowledge the information in this document is accurate.

EJ Lewington

**Jane Lewington
Chief Executive**



Part 2

Key successes and areas for improvement

NAVIGO continue to achieve national recognition for innovation and excellence, below are some of our award successes during the reporting period.

National Awards in Reporting Period:

Sue Pembrey Nursing Award - Most Inspiring Leader 2017 – Freedom Nwokedi, Older People's Inpatient Services	Successful
Women in Health Award - Acute Mental Health Operational Manager of the Year 2017 – Ellie Walsh, Adult Acute Services	Successful
Positive Practice in Mental Health Awards - Sequoia Therapeutic Community 2017	Successful
Positive Practice in Mental Health Awards - WHISe (Physical health parity of Esteem)	Successful
Best Companies & Sunday Times 100 Top Companies Award 2017	Successful
BMJ Award	Shortlisted

Tenders & Grants Applied for in Reporting Period:

As a social enterprise it is important for us to generate income to continually improve our services, below are some of our applications and outcomes.

Tender/Grant Application	Outcome	Income received
N E Lincs Council - Travel Grant	Successful	£3000
Awards for All - Older People's	Awaiting Result	TBC
VANEL - NEXUS	Successful	£2000
Santander - Admiral Nurses	Successful	£1000
NHS England - Safe Space	Awaiting Result	TBC

CQC (Care Quality Commission) inspection 2017/18 results & actions

NAVIGO is required to register with the Care Quality Commission; we are currently rated as good overall following our comprehensive inspection in December 2017 in which we were also very pleased to receive a rating of outstanding for the standard "caring".

SAFE	GOOD	●
EFFECTIVE	GOOD	●
CARING	OUTSTANDING	★
RESPONSIVE	GOOD	●
WELL-LED	GOOD	●
OVERALL RATING		
OVERALL RATING	GOOD	●

SERVICE AREA RATINGS:

Harrison House - Adult Acute Mental Health	GOOD	●
Community Mental Health	GOOD	●
Older Peoples Community Mental Health	GOOD	●
Rharian Fields – Specialist Eating Disorder Unit	OUTSTANDING	★
Konar Suite – Older People's Inpatient Unit	OUTSTANDING	★

The CQC has never taken any enforcement action against NAVIGO and have issued no conditions on our regulated activities. NAVIGO have not been the subject of any special reviews or investigations by the CQC.

The latest CQC inspection highlighted only two key areas which NAVIGO must address as follows:

Appraisals (PDR's):	ACHIEVED 78%	TARGET 100%
Clinical Supervision:	ACHIEVED 72%	TARGET 100%

Senior Managers of each clinical service are now robustly monitoring their clinical supervision and appraisal rates on a monthly basis.

NAVIGO's Quality Team have also created an action plan comprising elements of the inspection report which inspectors advised NAVIGO "should consider", this is being monitored in monthly Practice & Clinical Governance Committee Meetings and fed into the CIC Board.

Example of positive comments made by inspectors in our CQC inspection report

There was strong collaboration, team working and high levels of satisfaction across all staff.

- Staff cared for patients with compassion. Feedback from patients confirmed that staff treated them well and with kindness.
- Staff were empowered to lead and deliver change.
- Services provided a mixture of planned and ad hoc therapies and activities, in response to patient feedback on the service.
- Staff were committed to ensuring a patient's individual needs and preferences were central to all aspects of the delivery of care and treatment.



Priorities for improvement 2018/19

We engaged with our staff and NAViGO staff and community members via survey monkey (an online survey tool) and grouped the responses into themes which were presented at CIC Board, the Board selected 4 key priority areas for improvement as follows:

Identification of improvement	Improvement action	Responsible manager
Crisis Clinicians are Band 6 senior practitioners, they require advanced assessment skills. NAViGO are committed to the continued enhancement and development of our staff to support the safety of service users in crisis.	Develop a training and development programme for crisis workers to enhance safety of the assessment and treatment process.	Associate Director of Nursing and Quality/Head of Psychology.
Our service users told us they benefit from having contact with an individual who has been in a similar situation to them. Service users told us they are given hope of recovery which will be a positive motivator for them.	Explore and develop the role of peer support worker in all clinical teams.	Associate Director of Business Development.
We are aware of inconsistencies in the quality of clinical supervision between service areas.	Improve clinical supervision and reflective practice process.	Associate Director of Nursing and Quality.
Service user records must be updated in a timely manner and in line with NHS Record Keeping Standards.	Further develop & embed standards for record keeping.	Associate Director of Nursing and Quality.

How quality improvements are monitored and measured:

NAViGO's quality improvements are monitored by the Quality Team who are responsible for the audit of action plans. The Quality Team report any exceptions to targets directly to the CIC Board ensuring the Board are aware of any serious problems in a timely manner. Our progress towards the improvements are published in our next annual Quality Account.

Quarterly Quality Reports and Newsletters are produced and shared with all staff, the reports and newsletters focus on our identified areas for improvement across the organisation. We feel it is important for all staff to know and understand how their team and the organisation as a whole are performing and meeting our requirements for improvement. In addition, the Quality Team submit quarterly updates to NAViGO's Membership Board ensuring our members can see how we are progressing areas of improvement.

Review of services/external accreditation

NAViGO's Service Managers and Team Leaders have over the past year achieved and maintained national recognition with accreditations from the Royal College of Psychiatry. This evidences that our service areas are demonstrating enthusiasm and commitment by staff to provide excellent services. These are NAViGO's current accreditations:

Service area	Royal College of Psychiatry Accreditation
Harrison House Adult Inpatient Units	Accreditation for Inpatient Mental Health Services (AIMS)
Konar Suite Older Peoples Inpatient Unit	Accreditation for Inpatient Mental Health Services (AIMS)
Rharian Fields Specialist Eating Disorder Unit	Quality Eating Disorder (QED)
Older Peoples Community Mental Health & Memory Service	Memory Services National Accreditation Programme (MSNAP)
Older Peoples Home Treatment Team	HTAS (Home Treatment Accreditation Scheme)
Sequoia Therapeutic Community Service	Undertook initial peer review in preparation for accreditation



Participation in audits / clinical research

National clinical audits navigo was eligible to participate in during 2017/2018 – the only audit at 'actions produced' stage is in green below

Clinical Audits eligible to participate in	Included Yes/No	Data Complete	Status	Actions (if applicable)
*RCP National Clinical Audit of Anxiety and Depression	Yes	No (in progress)	Data collection period not yet open	Audit still in progress
*RCP National Clinical Audit of Psychosis	Yes	Yes	In progress – data collection completed. Awaiting report from POMH	Report not received so not at the stage to agree actions
**POMH Monitoring of Patients Prescribed Lithium	Yes	Yes	Completed. Report received.	Report received but actions have not yet been agreed at Clinical Audit Committee
**POMH Rapid Tranquilisation	Yes	Yes	Completed and actions approved	See below
**POMH Prescribing High Dose and Combined Antipsychotics	Yes	Yes	Report received. Still to present and identify actions	Report received but not at stage to create actions yet
**POMH Prescribing Valproate for Bipolar Disorder	Yes	Yes	In progress	Audit still in progress
**POMH Use of Depot/LA antipsychotic injections for relapse prevention	Yes	Yes	Awaiting report	Awaiting report

*RCP = Royal College of Psychiatry

**POMH = Prescribing Observatory in Mental Health

National Clinical Research Projects 2017/18

NAVIGO also participated in the following national clinical research projects:

National Clinical Research Project	Numbers Recruited	Period of Research
The Care Givers Pro Project	19 service users & carers	Dec 2017 to March 2018
Join Dementia Research	27 to date and ongoing	Nov 2017 - ongoing

Local Clinical Research Projects 2017/18

In the reporting period NAVIGO commenced two internal clinical research projects in response to the 5 Year Forward View (a report from the Independent Mental Health Task Force to the NHS in England in 2016) these are:

- Psychology Waiting List
- Clinician Confidence – Reducing Suicide Risk (coincides with the introduction of Collaborative Assessment and Management of Suicidality (CAMS) suicide risk assessment tool)

Outcome and actions from national audit completed:

Audit Reference	Audit Title	Objective	Recommended Action
2016POMH03	POMH Rapid Tranquilisation (RT)	1. Datix Entry doesn't specifically report RT.	1. To consider introducing an entry for RT medication (name, dose and route).
		2. Documents not uploaded to Silverlink from Acute Wards.	2. Admin staff to kindly scan and upload drug charts, TPR chart and RT Charts – Team manager to request administrator to upload documents.
		3. Prescribing RT medication as a single dose.	3. Nursing Staff to monitor vital signs using NAViGO's RT Form.
		4. Monitoring of vital signs	4. Options: Food & Fluid Charts + Silverlink entry regarding consciousness. OR Pharmacist / Medical Team to work towards adding a column for hydration & consciousness to the existing RT monitoring forms.
		5. Frequency of monitoring between NAViGO Policy and NICE Guidelines.	5. Medical Staff to kindly follow the recommended protocol for choosing RT medication.
		6. Nursing staff to monitor and document level of consciousness and hydration.	7. Team to consider introducing a new hourly RT monitoring form for doses within BNF limits and use the current one for above doses BNF limits.

Local Clinical Audits Completed 2017/2018

Objective	Recommended Action
Early Interventions Outpatient Follow-Up	<ul style="list-style-type: none"> Improve filing of OPD clinical correspondence in Silverlink
Carers' Audit (This audit was completed with carer and community representative involvement)	<ul style="list-style-type: none"> Implement a new pathway where all identified carers are referred through to the Carers' Assessment Officer for advice and information and triaging of their need for a carer's assessment Ensure all feedback received from carers is being recorded and analysed to improve the service. Improve the accuracy of historical data held about carers on the clinical recording system. Improve the accuracy and timely submission of quarterly monitoring reports to North East Lincolnshire Clinical Commissioning Group. Improved understanding of the needs and rights of carers for staff Ensure adequate protected administrative time to support the implementation of the new pathway and inputting of feedback forms



Drivers for improving quality

Last year NAViGO reported in our annual Quality Account, the establishing of a dedicated Quality Team focusing on identifying areas for quality improvement and supporting staff with embedding quality in our service areas and monitoring this. Since then numerous drivers for improving quality across the organisation have been initiated:

The Quality Team conduct team visits supporting the completion of and embedding of action plans monitored in Practice Clinical Governance or Quality Governance meetings including actions from CQC inspections, serious incident investigations, audits and quarterly Quality Report actions.

An Expert by Experience Group has been established, a group of interested service users/ carers supported by the Quality Team to conduct independent surveys with service users and carers.

Quality Leads have been identified from staff groups in each service area to help embed quality standards within service areas and represent their team in meetings where quality initiatives and actions are required.

Quarterly Quality Reports are now specific to service areas ensuring they are relevant and areas for improvement can be actioned directly by the team concerned whilst high performing areas can see their achievements, the reports are shared with staff.

A new Leadership Development Programme has been created to improve leadership capacity ensuring we have a leadership talent pipeline in readiness for future succession planning.

All qualified practitioners have now been trained in the use of the suicide assessment tool, CAMS (Collaborative Assessment and Management of Suicidality) to reduce completed suicides and improve packages of care delivered to individuals with suicidal thoughts (CAMS assessment tool in place from April 2018).

Bronze Quality Improvement Training (Improvement Academy online training) has been included as mandatory training for all clinical staff and Silver Quality Improvement Training is recommended for all Clinical Quality Leads, Band 7 Clinical Managers and members of the Quality Team.

Commissioner	CQUIN available	CQUIN achieved	CQUINN shortfall	CQUIN achieved %
2016/17	£474,789	£474,789	£0	100%
2017/18	£499,830	Not confirmed yet by the commissioners		

Information governance tool kit & data quality/clinical coding errors

Data Quality and coding

Data quality assurances and processes

NAViGO complete a regular NHS Litigation Authority (NHSLA) audit to ensure inpatient and community teams meet the national standards of record keeping, which every NHS provider should adhere to. NAViGO also have a record keeping policy which sets out the standards it's staff are required to adhere to (such as ensuring patient notes are concise, timely and there are no abbreviations), the NHSLA audit feeds into this policy.

Data capture scrutiny

NAViGO adhere to the national standards of the data protection act, ensuring all data is secure, confidential and accurate. NAViGO has a Caldicott Guardian and a SIRO (Senior Information Risk Owner), all data/information breaches are graded using the national Information Governance Tool and reported where necessary.

How we continually improve data quality

NAViGO has its own bespoke data warehouse, which staff can view reports in, the reports display any missing data on a service user's case note. Staff have been educated on how to access and use the reports to improve data quality and the data shows that staff are accessing the reports on a regular basis. NAViGO have also introduced admin data quality leads in each service area, the data quality leads ensure they regularly run reports, chase up information and amend data on the electronic patient record (EPR – Silverlink) to ensure the EPR is as accurate as possible.

NAViGO has commissioned a new EPR system called SystemOne to replace Silverlink (due to Silverlink ceasing to trade in 2018) SystemOne is due to be implemented across the organisation in the summer of 2018. Quality Admin Leads have been identified to robustly monitor and manage data quality in each service area ensuring a safe and smooth transition to the new system.

NAViGO are classed as an arm's length body on the Information Governance Toolkit, therefore NAViGO are not required to complete the clinical coding audit, which is carried out by an external body.

NAViGO was not subject to the Payment by Results clinical coding audit for 2016/17 by the Audit Commission.

The following are mandatory for inclusion within all Provider's Quality Accounts to allow the public to compare NAViGO with other providers.

NAViGO submitted records below during 2017-18 to the Mental Health Services Dataset (MHSDS), last published February 2018.



These results are above the national average, therefore there are no actions required to improve data quality in these areas.

Indicator	NAViGO	National Average
Service Users with a recorded NHS Number	100%	99%
Service Users with a recorded valid General Practitioner Code	99%	98%
Service Users with a recorded Commissioner organisation code	100%	99%
Service Users with a recorded date of birth	100%	100%
Service Users with a recorded postcode	99%	99%
Service Users with a recorded gender	100%	100%
Service Users with a recorded and valid Ethnic Category Code	97%	81%

Accommodation and Employment information is collected for service users who are being treated under the Care Programme Approach; this information is in line with the Five Year Forward View target to improve the holistic care provided to mental health patients in order to improve their quality of life and recovery.

Indicator	NAViGO	National Average
Settled accommodation	74%	66%
Employment	10%	10%

Information Governance Assessment Report

The purpose of the Information Governance Assessment is to enable providers to measure and report standards of compliance against the law and national guidance, and to ensure information is being handled correctly and protected from unauthorised access, loss, damage and destruction.

NAViGO's overall score for the Information Governance Assessment Report for 2017/18 is level 2 (adequate compliance) and is currently awaiting formal assessment by NHS Digital.

27 out of 29 (93%) requirements are relevant to NAViGO.

Information Assets

NAViGO monitors the many different digital systems in use (such as the Electronic Staff Record, Clinical Patient Admin System and the Telephone Systems). NAViGO hold an Information Asset Register which is reviewed annually, with all assets on the register having an asset owner assigned.

Part 3

Review of quality performance 2017/18

Core quality indicators

Quality Goal: Service user safety – Reduce incidents of harm to service users

- 1. Embed specialist Collaborative Assessment and Management of Suicide (CAMS) risk assessment tool to improve skills amongst our staff in assessing for suicide in a more robust way, looking at the drivers in order to improve risk management.**

The implementation date for this risk assessment tool was 16 April 2018, to date 240 staff have been triage trained, 30 champions trained and now 26 crisis/psychology staff undergoing on-line CAMS assessment training & concordance supervision.

NAViGO is supporting a graduate worker to undertake an evaluation of the CAMS framework as part of her role as a Research Associate in partnership with the University of Hull. The research involves comparing treatment outcomes for people undertaking CAMS to those that have previously presented to Crisis services with high levels of suicidality to assess whether CAMS improves service user outcomes, as has been demonstrated in sites across the world.

We are in the very early days of implementation and will continue to monitor the impact of this tool.

- 2. Reduce unwitnessed falls in older people's inpatient areas.**

The number of unwitnessed falls has reduced significantly during this reporting period as shown in the table below and we continue to strive to keep them to a minimum by following a robust falls risk assessment process and sharing information with the staff group caring for those at risk effectively.

	2016-17	2017-18	Grand Total
Older Adult Inpatient Services	58	37	95
Fall - not witnessed	38	26	64

- 3. Implement the Sign up to Safety Scheme to ensure we have an organisational approach to improving safety.**

We have agreed on our pledges and our areas of focus which are to continue to reduce falls in all areas, to impact positively on self-harming behaviours and to reduce avoidable medication errors.



Quality Goal: Service user & carer experience – Improve on our engagement and involvement of service users and carers in NAViGO's service areas.

4. Improve engagement with young carers and young service users within NAViGO's membership.

NEXUS is NAViGO's youth forum, the forum is for people aged 16-21. It was launched in January 2018 and we meet monthly, on average attendance is between 15-22 young people some of whom are carers.

Activities that have been offered include making stress jars, glitter jars, fitness, stress bucket, mindfulness, yoga, how sleep and diet affects your mental health and Ignite attended to talk about life after college. All activities are guided by what the young people want to do.

Nexus Youth Forum has been successful in obtaining a grant from Voluntary Action for £1,000 this will support further activity days throughout NEL. These will be offered to all that attend the Youth Forum. The plan is to encourage more young people to attend this forum so that the benefits of this supportive community can reach a wider audience.

Talks have ensued around allowing under 18's to become members of NAViGO, however, due to the membership being shareholding it was felt that this would not be appropriate for under 18's, therefore NAViGO is looking at how young people can join the membership but not have a shareholding right until they are 18.

5. Continue to improve carer assessment process, monitoring & reporting.

In 2017 NAViGO introduced a dashboard comprising outcome measures relating to carers assessments, this has given our Carer's Assessment Officer and the Quality Team easily accessible information regarding the number of carers assessments completed, reviews, waiting times. This is presented to our Membership Board every quarter for information.

In the reporting period NAViGO recorded 93 carers' assessments, 299 contacts were recorded and as at April 2018 we were providing support to 111 carers. Further work being done to continually improve our carers service is:

- A Carers Strategy is currently being produced by NAViGO's Corporate Affairs Team in partnership with carers.
- A Carers Information Pack is currently being produced.
- Carers awareness training – NAViGO has a dedicated Carers' Assessment Officer who is facilitating this training in teams and in the NAViGO Corporate Induction. We are also very fortunate to have the valuable support of carers in delivering this training. Carers talk with staff about their personal experiences as carers making the course more meaningful.
- All Band 7 Team Leaders have been contacted requesting they remind staff about the need to offer referrals for carers assessments.

6. Develop Experts by Experience through community membership and volunteers within our services to instill hope of recovery in our service users by speaking to others who have walked a similar path.

Our eating disorder service actively encourages recovered service users to support current users of our specialist service, this provides a real sense of hope to current service users and supports recovery.

Quality Goal: Clinical effectiveness - Ensure care is monitored to demonstrate clinical effectiveness using appropriate tools

7. Improve clinical pathways between NAViGO service areas.

Clinical pathways have been established for adult acute to adult community services, staff from each clinical area contributed to the establishment of the pathways and so have buy in from each relevant service area. Our newly appointed Community Manager is facilitating these pathways and has created more effective and positive working between service areas.

Our older adult services have established clinical pathways between their services and these are now well-embedded into practice. These include care pathways for each team in terms of the journey the patient will take. We have been working on additional (to the memory pathway) diagnostic pathways for Learning Disability, Mild Cognitive Impairment and Younger Dementia patients which are currently going through approval. We continue to develop more productive ways of working between clinical service areas to enhance the effectiveness of care.

8. Improve the use of outcome measures and service user feedback within NAViGO service areas.

In regard to service user feedback we have engaged an experts by experience group that have started to actively seek feedback by speaking face to face to inpatients fortnightly in our service areas, this has already assisted us in making positive changes on inpatient areas. The Experts by Experience will also participate in mock CQC inspections gaining first hand feedback on services with the Quality Team.

We continue to promote the completion of Your Opinion Counts Forms to ensure people using our services have access to a confidential method of providing feedback. Complimentary feedback is entered onto Datix (our electronic incident and accident reporting system) and numbers are collated quarterly and shared with the team it relates to via the Quality Report. Forms which provide suggestions for improvements or concern negative experiences are collated by our Service User Experience Lead in the Quality Team, these are discussed with Band 7 Team Leads who address the issue directly with the service user (where appropriate) and action plans with lessons learnt are collated where necessary.

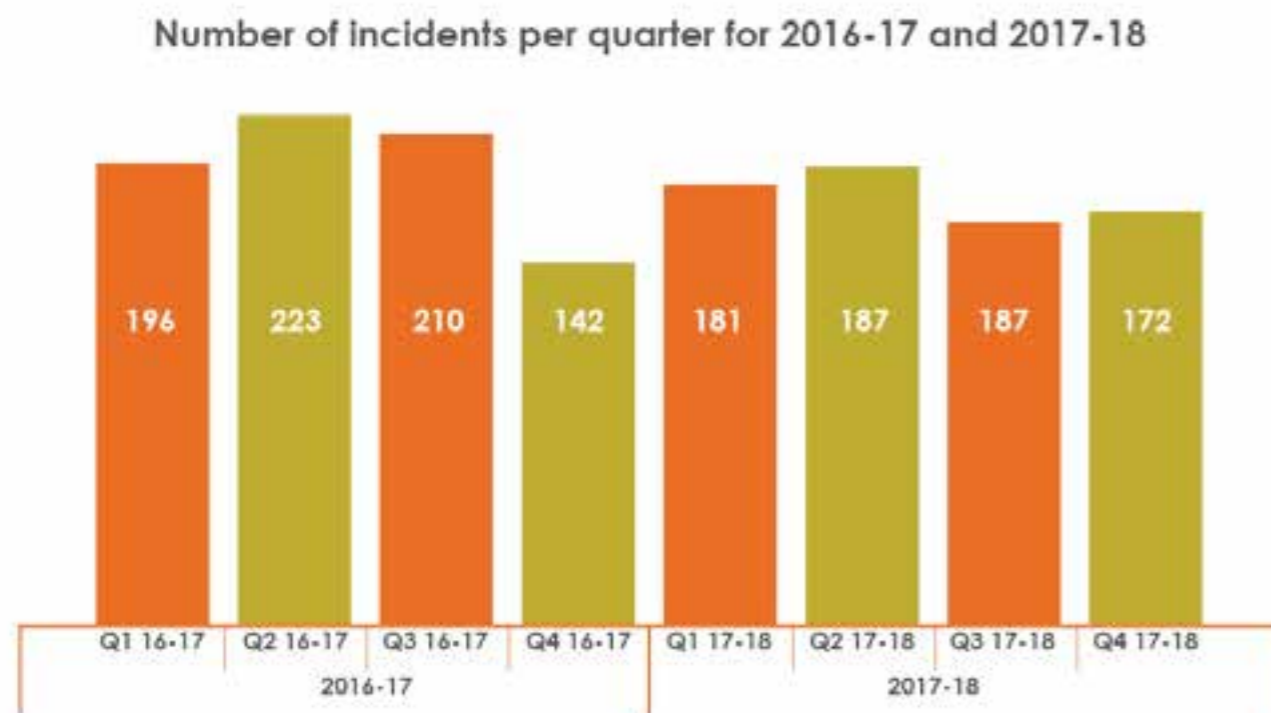
NAViGO membership representatives and members continue to provide valuable contributions towards setting our annual objectives we also engage and encourage feedback with service users and carers via Your Voice meetings and the young people's forum (Nexus).

The use of outcome measures as a method of assessing improvements in health across our services has proved difficult to implement. Our service users are asked to complete a questionnaire known as Patient Reported Experience Measures (PREM) and in Open Minds a Patient Experience Questionnaires (PEQ). The PREM and PEQ includes the national Friends & Family Test plus a number of questions specifically relevant to services we provide. Service users are asked to complete these at the start and end of their treatment package. The vast majority of the answers given are positive comments and although we are not able to measure improvement scientifically they do provide a measure of service user satisfaction. Our successes in meeting national and local targets, CQC inspection ratings and low numbers of complaints are indications of high quality service provision.



Number of incidents/accidents recorded on DATIX (NAVIGO's incident and accident electronic reporting system)

The table shows the number of incidents/accidents recorded on DATIX which were reported in 2016/17 and 2017/18.

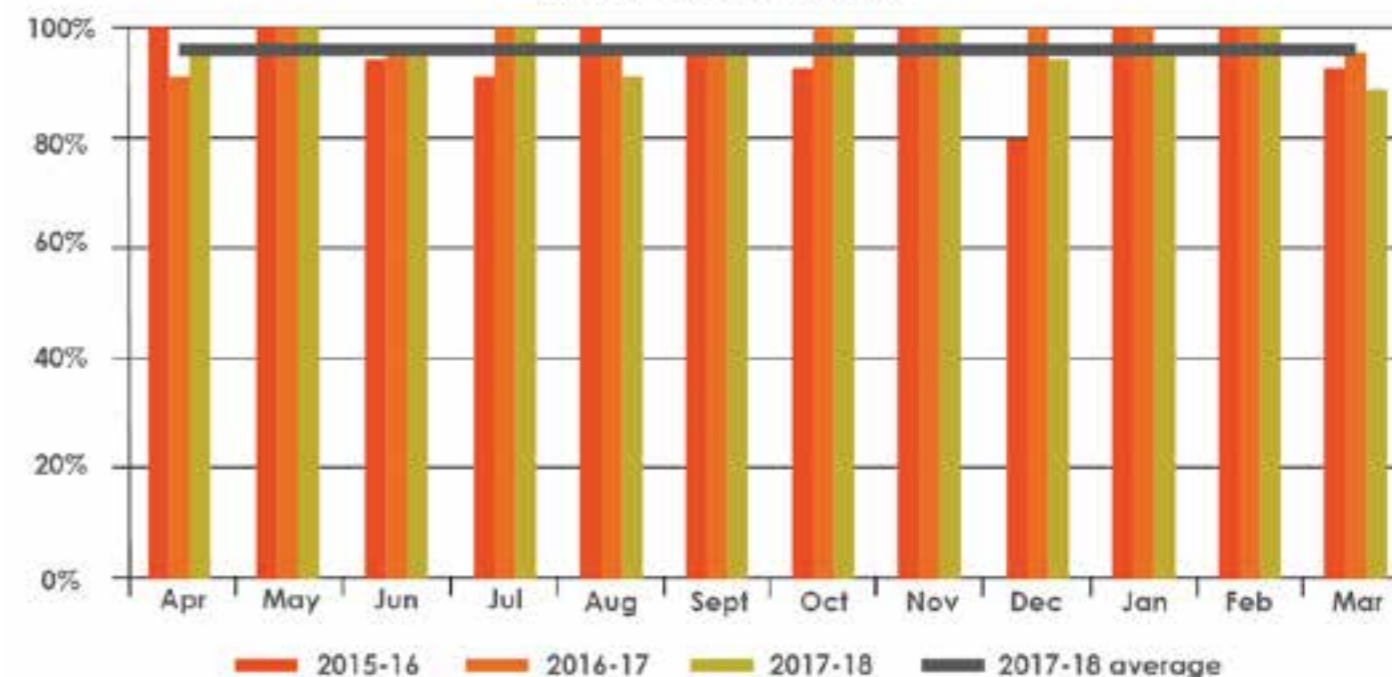


Patient safety Incidents

The table below indicates the total number of incidents reported on DATIX and the number of those which met the Department of Health categorisation of "serious incident" which required a comprehensive investigation. The figures show a comparison of 2016/17 versus 2017/18.

	Total incidents 2016/17	Total Incidents 2017/18	Serious Incidents 2016/17	Serious Incidents 2017/18
Q1	196	181	0	3
Q2	223	187	5	3
Q3	210	162	1	2
Q4	142	172	1	1

Percentage of people on Care Programme Approach (CPA) followed up within 7 days of discharge



7 day follow ups comparison nationally

As the 2017/18 Q4 figures have not yet been published and were not published in time for the 2016/17 Quality Account we have included Q4 2016/17 figures.

7 day follow up	Q4 2016/17	Q1 2017/18	Q2 2017/18	Q3 2017/18
NAVIGO	98.6%	98.4%	97.9%	98.3%
National average	98.6%	96.7%	96.7%	95.4%
National best	99.4%	100%	100%	100%
National worst	84.6%	71.4%	87.5%	69.2%

Quarter 1 - There was one 7 day follow up fail. There are 9 attempts to contact the service user noted on Silverlink through cold calling at the home address and trying to ring through to the phone number. When the ward staff finally managed to contact the service user by phone, they revealed that they had been staying with a relative out of area and had not realised that staff had been trying to get in touch.

Quarter 2 - One 7 day follow up fail. The service user was an out of area inpatient discharged back to the area under the care of another NHS Foundation Trust. The last recorded contact from their local service indicates they were unable to contact the service user on the agreed date.

Quarter 3 - One 7 day follow up fail. Reminder emails are in place (auto-generated from the data warehouse). Performance and exceptions to meeting 100% of follow up visits are escalated to the Quality Team and monitored monthly.

Quarter 4 - Two 7 day follow up fails. One fail had numerous phone calls, pre-booked and cold call visits to which none were successful. It materialised that the service user had been actively avoiding staff, there were no causes for concern when the service user eventually engaged with staff. The second fail the worker attempted to visit the care home to be told the service user had died.



Gate-keeping

All admissions to our inpatient units require an assessment by a crisis assessor to ensure the admission is appropriate for admission. In this reporting period NAViGO achieved 100% for all four quarters in relation to gatekeeping targets.

As the 2017/18 Q4 figures have not yet been published and were not published in time for the 2016/17 Quality Account we have included Q4 2016/17 figures.

Gatekept by crisis	Q4 2016/17	Q1 2017/18	Q2 2017/18	Q3 2017/18
NAViGO	100%	100%	100%	100%*
National average	98.8%	98.7%	98.6%	98.5%
National best	100%	100%	100%	100%
National worst	90%	88.9%	94%	84.3%

*NAViGO submitted an inaccurate return for Q3 performance as 83.4%

Emergency Readmissions

The purpose of the indicator shown in the table below is to help monitor NHS success in prevention and treatment outside hospital. Emergency admissions to hospital can be avoided if local systems are put in place to identify those individuals at risk.

Number of readmissions within 28 days of discharge from inpatient units – 2017/18		
Quarter	Number of admissions	Number of readmissions
1	104	10
2	114	9
3	114	9
4	105	9
	Total admissions = 437	Total readmissions = 46

The data on readmissions has been produced using NAViGO's internal data. National published data could not be compiled due to NAViGO having small readmissions. Any readmissions below 5 per month are not published. The target used is the previous year's readmission percentage. The total percentage for 2017-18 is 10.5%, 0.2% above last year's total percentage of 10.7%.

All 46 readmissions were audited and it was found that all followed NAViGO's pathways and policies and the discharge was clinically appropriate in supporting positive risk taking in the least restrictive environment possible. Service users were readmitted due to deterioration in their mental health. All discharge plans are checked by qualified staff to ensure they are appropriate and clinically relevant.

To improve the percentage NAViGO will monitor individual emergency readmissions within 28 days of discharge to ensure learning is facilitated to improve discharge pathways and community care.

Delayed transfer of care

NAViGO consider a delayed transfer of care as: a service user who is fit for discharge from the Mental Health inpatient ward but is still occupying a bed. Delays can be for example a result of awaiting social care support in the home or awaiting an appropriate care home bed to become available.

The delayed transfer of care percentage achieved by NAViGO in this reporting period has improved significantly compared to last year and is well below the national target of 7.5%.

NAViGO 2016/17	NAViGO 2017/18	Target for delayed transfers of care
4.4%	2.3%	7.5%

Early Intervention in Psychosis

Number of patients contacted within 14 days of referral – the national target for this is 50% therefore NAViGO have met the national target for the whole year of 2017/18

14 day first contacts	Total of those treated	Within 14 days	%
Q1	8	6	75%
Q2	6	5	83%
Q3	2	2	100%
Q4	6	5	83%
Overall	22	18	82%

IAPT - Improving Access to Psychological Therapies (IAPT) - Open Minds

National targets are set for those awaiting access to IAPT services as 75% to be seen within 6 weeks and 95% to be seen within 18 weeks as the table below demonstrates NAViGO's Open Minds IAPT Service well exceeded requirements and continues to provide excellent and timely IAPT services.

Month	Number of treatments commenced	Seen within 6 weeks	Proportion seen within 6 weeks	Seen within 18 weeks	Proportion seen within 18 weeks
April 2017	206	184	89.3%	206	100%
May 2017	256	233	91%	255	99.6%
June 2017	264	254	96.2%	263	99.6%
July 2017	257	249	96.9%	256	99.6%
August 2017	196	185	94.4%	196	100%
September 2017	232	220	94.8%	232	100%
October 2017	194	181	93.3%	192	99%
November 2017	233	217	93.1%	233	100%
December 2017	147	130	88.4%	147	100%
January 2018	261	234	89.7%	261	100%
February 2018	223	208	93.3%	223	100%
March 2018	313	296	94.6%	313	100%

Learning from deaths

This year it is a requirement to publish information relating to our learning from deaths including the total number of patients who have died during the reporting period. For the purpose of this publication we have counted the number of patients who died whilst open to one or more of our services or were open within six months of their death. It is a requirement for providers to demonstrate the number of deaths meeting the criteria for serious incident investigation and/or case note review and the percentage of those investigated which were judged by the provider to be due to problems in care provision.

NAVIGO has a robust serious incident investigation process which involves a thorough review of case notes and a review of the care provided with face to face interviews with staff involved in care provision and face to face meetings with the service user/family/friends ensuring a complete overview of the case. We now involve a Membership Representative in our investigations to be the voice of the family/service user. Our serious incident investigators use root cause analysis tools to help assess contributory factors, areas of strength and weaknesses in the care provided, such as the Fishbone Diagram, Incident Decision Tree, 5 why's in addition to the Structured Judgement Review and the Yorkshire Contributory Factors Tool.

In quarter 3 one death met the Department of Health criteria for serious incident investigation, our twelve week investigation process has identified some areas of concern possibly judged to be due to problems in care provision (see table below), Commissioners have granted an extension to this investigation and final report as investigators are awaiting statements from external agencies following further questions raised by the family. An action plan and lessons learnt are being created to address the problems and they will be monitored robustly in monthly Quality Governance Meetings.

These numbers have been estimated using the findings from Serious Incident investigations. Where there has been either a root or contributory cause found from the incident review then this has been used as a way to determine if the patient death may have been attributable to problems with care provided. There is currently no agreed or validated tool to determine whether problems in the care of the patient contributed to a death within mental health or learning disability services so we are using this approach until such a tool becomes available. This means that currently mental health and learning disability organisations are using differing ways of assessing this.

Serious Incident and Case Note Reviews 2017/18

- Quarter 1 - 90 deaths
- Quarter 2 - 101 deaths
- Quarter 3 - 122 deaths
- Quarter 4 - 101 deaths

Quarter of year the figures relate to	Number of serious incident investigations	Number of case note reviews	Estimated percentage of those investigated judged to be due to problems in care provision
Q1	3	0	0%
Q2	4	0	0%
Q3	1	2	0.8%
Q4	1	7	0%

A group of NAVIGO managers attended a training course in April 2018 on how to complete structured judgement reviews on case notes of deceased service users with a view to identifying actions and lessons learnt. This is in response to the national Mazars Report on learning from candour and accountability which identified the need for providers to complete a case note review on all deaths rather than assume the cause of death to be due to natural causes. Going forward, all deaths we are aware of which have been open to NAVIGO services within the past 6 months will be reviewed.

Compliments & Complaints

Formal complaints

There were six formal complaints received in 2017/2018, compared to 18 in 2016/17 and five in 2015/16.

We aim to respond to formal complaints within 35 working days.

The formal complaints for 2017/18 primarily related to the following subjects:

Subject area	Number of complaints
Communication	2
Patient Care	4

None of these complainants have taken their case to the Parliamentary Health Service Ombudsman (PHSO).

Examples of actions and learnings from formal complaints investigated in 2017/2018 are as follows (all patient specific actions have been excluded):

- Training provided to staff working in the Crisis Service regarding how best to communicate with people who cannot be assessed if they are presenting with substance and/or alcohol misuse.
- All presenting service users who are not able to be assessed by the Crisis Service because they are under the influence of drugs and/or alcohol to be given an information sheet to explain why they cannot be assessed and what will happen next.
- Assertive Outreach Team become involved earlier with inpatients that are transferring to this service following discharge.
- Staff consider how best to communicate with family members when service users who are inpatients have not given consent for information to be shared.

Informal complaints/PALS (Patient Advice & Liaison) contacts

There were 122 informal complaints/PALS contacts received in 2017/2018, compared to 80 in 2016/17 and 48 in 2015/16.

Informal complaints/PALS contacts are questions or concerns received which can be responded to more quickly than a formal complaint as they are less complex.



Compliments

We received a grand total of 1565 compliments and positive comments from the patient Friends & Family Test in 2017/18 which includes individual compliments forwarded to us by service users, carers and families; and also positive comments from the Patient Reported Experience Measure survey (PREM) and the Open Minds Patient Experience Questionnaire (PEQ). A very small percentage of non-positive comments were received, the Quality Team meet with managers from service areas bi-monthly where actions are agreed in response to these and managers are asked to share these and the positive comments with their staff.

Positive comments received from service users, carers and their families:

- 439 Compliments – Your Opinion Counts, Thank You Cards etc.
- 428 Patient Reported Experience Measure survey (PREM) 97% of responses
- 698 Patient Experience Questionnaire (PEQ) 99% of responses

Examples of those received are as follows:

“I wouldn’t be here without you”.

“Without the first point of contact and coming here I believe my life would have been short”.

“Made to feel at ease as soon as I sat down and was understood straight away”.

“I felt like I could really open up - thank you for putting me at ease and listening to me”.

“When I first contacted your team, I felt so alone. From the moment I called for help, I have had pleasure in every visit. The support of someone is so precious and an amazing comfort.”

Patient Experience of Community Mental Health Services – 2017 National Survey

NAVIGO continued to score high in the national Community Mental Health Survey for 2017 with a rating of 72.4% with regards to the overall experience of contact with a health or social care worker during the reporting period.

Lowest Scoring Trust 2017	Highest Scoring Trust 2017	NAVIGO Score 2017
58.4%	74.6%	72.4%

Staff Survey results & Staff Friends & Family Test

Quality Health NHS National Staff Survey 11th October 2017 - 1st December 2017

Positive results:

- NAViGO's response rate was 6th highest nationally
- Scored positively in top 10% nationally in 25 key findings
- Scored positively in top 5% nationally in 21 key findings
- Scored top or second top nationally in 9 out of 32 key findings
- Scored top with lowest national score of 39% in response to staff attending work despite feeling unwell due to manager/colleague pressure
- 94% of staff said we provide equal opportunities for career progression
- Staff satisfaction with resourcing and support 3.64/5 score
- Effective team working, score 3.94/5
- Fairness and effectiveness of procedures for reporting near misses/incidents, score 4.05/5

Results we aim to improve on:

- Number of staff appraised 86% (up from 79%)
- 88% staff agreeing role makes a difference to service users
- 28% staff experiencing bullying, harassment & abuse from service users/ public
- 25% staff experiencing physical violence from service users/ public
- 6% staff experiencing violence from staff

In response to these lower scores NAViGO's Head of Workforce & Development has presented an action plan to the NAViGO CIC Board with clear actions on how to address these areas of concern.

In January 2018 NAViGO's Board approved increasing the hours of our Occupational Health & Wellbeing Practitioner from part time to full time. We believe this to have had a significant impact on the health and wellbeing of our workforce which has also helped with staff moral in relation to feeling valued. The Occupational Health & Wellbeing Practitioner now focusses on prevention and wellbeing including smoking cessation support and providing free health checks to all staff.

In this reporting period NAViGO staff collectively voted for their Freedom to Speak Up Guardian who has settled into her post and reports directly to the CEO and/or the CIC Board.

Best Companies Survey

Run 12th October 2017 - 10th November 2017

For the third consecutive year NAViGO were successful in the Top 100 Best Companies to Work For achieving our highest position to date of 61st nationally.



Friends & Family Test – Staff

NAVIGO participated in the national Friends & Family Test survey in three out of four quarters in this reporting period, we did not survey staff in quarter 3 as we were asking for the national staff survey to be completed and wanted to avoid conflict with this survey.

Period	Number & percentage of staff who would recommend NAViGO to friends & family should they need a service	Number & percentage of staff who would recommend NAViGO as a place to work
Q1	70 out of 79 responses (88.61%)	58 out of 79 responses (73.42%)
Q2	62 out of 68 responses (91.18%)	48 out of 68 responses (70.59%)
Q3	N/A - national staff survey	N/A - national staff survey
Q4	71 out of 79 responses (89.88%)	70 out of 79 responses (88.61%)

NAVIGO Staff Awards

We believe in demonstrating gratitude and appreciation to our workforce, one of the ways we do this is through our annual awards ceremonies.

Annual Staff Awards 2018 – held on 2nd February 2018 at The Humber Royal Hotel

Held since 2017 the staff awards evening provides an opportunity for the organisation and individuals to give thanks and recognition to colleagues. Those staff who have made an outstanding contribution to the care NAViGO provides whether they work directly with people who use our services or in a support role are awarded for their excellent work.

AGM (Annual General Meeting) Awards 2017 – held on 20th September 2017 at The Humber Royal Hotel

An opportunity for staff and NAViGO Community Members to nominate individual staff, teams and volunteers, the recipient of the award is selected by NAViGO's Chairman, Tom Hunter and the Community Award by Community Representatives.

Patient & Carers Involvement

As a social enterprise we actively seek involvement from service users, carers and residents of North East Lincolnshire. NAViGO's community and staff membership play an active role in shaping the services we provide and the way we run our services, members are encouraged to vote on key decisions and help set quality objectives whilst ensuring we provide services we'd be happy for our own families to use.

Here are some of the ways we actively engage and involve service users and carers:

A carer from NAViGO's membership sits on the NAViGO CIC Board as a Non-Executive Director giving high level input on the services we provide and has involvement in board decision making, this person is voted on the CIC Board by the NAViGO Membership.

NAViGO has four Community Representatives elected from the membership by members, they sit on the NAViGO Membership Board, attend meetings, sitting on sub-committees feeding into the CIC Board, they are the frontline voice of the NAViGO Community Membership who have exactly the same voting rights as our staff members.

All recruitment interviews include a service user, carer or NAViGO Community Member on the interview panel to ensure we recruit people who have the attributes required to work with our service users and carers.

Carers provide support in the delivery of carer training to staff by explaining their personal situations making the training more meaningful.

In 2018 we have created a group of service users and carers as NAViGO Experts by Experience, this group have expressed an interest in conducting surveys with service users, supported by the Quality Team to provide feedback on service user experience.

NAViGO have had a focus on improving service user and carer engagement during the reporting period. This has included volunteer opportunities, regular meetings to enable staff, service users and carers to speak out, offering suggestions and ideas on the way we run our services and engagement with local young people via local education establishments.

Carers week is being planned, this year it falls on the 11th June 2018, the local Carers Centre and

NAViGO are planning a breakfast event "Let's Talk About Carers in the Workplace" which will include opportunities for carers to discuss any issues, a carers exhibition and a "Carers Got Talent" show. NAViGO funds a day trip for carers every summer which helps carers to enjoy a social respite day out together.

Our carers groups have been opened up for all carers of NAViGO to access. This includes carers of those receiving a service from our older people and adult services. We currently facilitate the following groups:- creative writing, choir, a monthly carer to carer peer support group, Forget Me Knot Group, jewellery making group, craft, knitting and dancing groups.

Your Voice:

During the reporting period NAViGO launched a group which brings NAViGO community and staff members together along with anyone in the local community with an interest in mental health services, meetings are held bi-weekly in the Floral Hall at The People's Park with an average 15 attendees.

Nexus – 16-21 year old youth engagement partnership:

Since January 2018 NAViGO have been involved in a local partnership with Franklin College, Police Life Style, North East Lincolnshire Council youth group ICan, Ignite and YMCA Humber @1 project which holds monthly meetings with local young people aged 16 to 21 years to support and offer advice on subjects such as managing stress during exams, life after college and health and wellbeing.

Volunteers

NAViGO has two volunteering routes one being with Tukes which is our well-established and successful training and education team with currently eleven people engaged in volunteering. Opportunities are at placements with Tukes at the Floral Hall, Grimsby Garden Centre, NAViGO House and Harrison House. Volunteering opportunities with Tukes are in horticulture, catering, reception and domestic duties.

NAViGO's Dementia Engagement Officer also actively recruits volunteers to support our clinical areas with various service user activities and administration support, currently this route has approximately 50 volunteers either recruited or in the process of recruitment.



Statement from North East Lincolnshire Clinical Commissioning Group (CCG)

On behalf of North East Lincolnshire Clinical Commissioning Group (NELCCG) thank you for the opportunity to review and comment on the NAViGO Quality Account for 2017/18.

NELCCG acknowledges the commitment of the organisation and staff to providing safe, effective and well-led services which strive to achieve a positive experience for all service users and staff. The achievements of the organisation and staff are recognised in the awards and accreditations. The high standard of quality care delivered by the organisation recognised in the Care Quality Commission's inspections in 2017 is a significant achievement and should be celebrated by all in the organisation.

We are pleased to note the improvement agenda for 2018/19 articulated in this report which has been based on; consultation with service users and staff and the intelligence data for the organisation. We are keen to understand the work to improve the standards for record keeping and how the position will be continually reassessed and evaluated by the service. The focus on supporting and developing staff is positively received by commissioners.

We are pleased to read of the improved engagement with young carers and service users within NAViGO membership that was launched in January 2018 and to hear of the good attendance at the youth forum.

We confirm that to the best of our knowledge, the report is a true and accurate reflection of the quality of care delivered by NAViGO and that the data and information contained in the report is accurate.

The Clinical Commissioning Group is continuing to work closely with NAViGO to improve the quality of services available for the population we serve.

John Berry
Quality Assurance Lead.



North East Lincolnshire
Clinical Commissioning Group

Statement from Healthwatch North East Lincolnshire

Healthwatch North East Lincolnshire welcomes the Quality Accounts for 2017/18 and the priorities for the forthcoming year, and acknowledges the key priorities that NAViGO has identified to focus on.

However moving into 2018/19, Healthwatch North East Lincolnshire would like to offer the following thoughts as we would like to see more information on how these priorities will be measured so it can be clarified how the targets will be met.

NAViGO is open to improvement and has made it a priority to listen to the views of the public and their staff in a bid to improve. Service users and their families are asked their views and opinions and this needs to be further clarified, potentially with targets set around these areas. It is stated that views are collected from a variety of sources but it does not state how that information will be used. In part 3 point 8, it also states that NAViGO continues to promote the completion of 'Your Opinion Counts Form'; how many were completed and do you have a figure for the future?

Within the Patient & Carers section it states that a carer sits on the board as an Executive Director, however this is not obvious from the website as there is not an Executive Director stated. It would be useful if this could be clarified.

In addition Healthwatch does applaud the efforts of all staff and volunteers to improve Mental Health Services offered to those that live within North East Lincolnshire. We hope that we can develop our working partnership into 2018/19.

Congratulations on the improvements made and to your future developments.

Tracy Slattery
Healthwatch North East Lincolnshire



Glossary of key terms

Care Quality Commission (CQC)

The CQC regulates all health and adult social care services in England, including those provided by the NHS, local authorities, private companies or voluntary organisations. It also protects the interests of people detained under the Mental Health Act.

Carer

A carer is anyone who cares, unpaid, for a friend or family member who due to illness, disability, a mental health problem or an addiction cannot cope without their support.

Cognitive behavioural therapy (CBT)

This is an approach to treatment that involves working with people to help them change their emotions, thoughts and behaviour. A person's personal beliefs are addressed in order to understand and change behaviour.

Commissioning for Quality and Innovation (CQUIN)

The CQUIN payment framework enables the people who fund services (commissioners) to reward excellence, by linking a proportion of English healthcare providers' income to the achievement of local quality improvement goals.

Crisis Team

The crisis home treatment service works directly with people who are experiencing a severe mental health crisis and need immediate and more intensive care and treatment, mostly at home.

Department of Health (DoH)

The DoH provides leadership for public health, the NHS and social care in England. Its purpose is to improve England's health and well-being and in doing so achieve better health, better care, and better value for all.

Dual diagnosis

This refers to two or more disorders affecting one person, for example, mental illness and learning disability. It is also used for people who have a mental health problem and also misuse substances, such as illegal drugs, legal drugs or alcohol.

Electronic patient record

Details of a service user's current health and history held on a computer. NAViGO uses a system called Silverlink for this purpose.

Forensic Mental Health Services

Specialist services for people with mental health problems, who have been arrested, are on remand or have been to court and found guilty of a crime.

National Institute for Clinical Excellence (NICE)

NICE provides clinical staff and the public in England and Wales with guidance on current treatments. NICE is an independent organisation that provides national guidance and standards on the promotion of good health and the prevention and treatment of ill health.

National Reporting and Learning System (NRLS)

The NRLS is the reporting system of the National Patient Safety Agency (NPSA). The NPSA is an arm's length body of the Department of Health. It was established in 2001 with a mandate to identify patient safety issues and find appropriate solution leads and contributes to improved, safe service user care by informing, supporting and influencing the health sector.

NHS Connecting for Health

NHS Connecting for Health (NHS CFH) maintains and develops the NHS national IT services.

Non-Executive

An individual who gives advice to a company, but is not responsible for making decisions or making sure the decisions are carried out.

Open Minds

Open Minds provides care and support for people age 16+ who are experiencing common mental health problems, such as stress, depression and anxiety.

Root cause analysis

Root Cause Analysis is a way of investigating the key reason why an incident occurred, to ensure lessons are learned to prevent similar occurrences. Incidents investigated using root cause analysis are often serious and may involve harm to a service user.

Service user

A service user is someone who uses health services and may also be referred to as: service user or client.

Silverlink

Silverlink is the name of the electronic patient record system NAViGO utilises.

Social enterprise

A social enterprise is a business whose goals are mainly social, and whose profits are put back into its services or the community.

Systemic Family Therapy (SFT)

Family therapy can help support families through communication problems and other issues to help improve the family environment.

Tukes

Tukes provides training, skills development and work experience in real working environments for people with mental health problems and others.

WHISe

WHISe is an innovative service which was originally piloted by the Community Mental Health Team (CMHT) in NAViGO. It is a Wellbeing and Health Improvement Service which compliments the treatment given by the CMHT and aims to address the physical and holistic needs of people suffering from severe and complex mental health conditions.



If you would like this information in another format or language, such as Braille, large print or audio please contact:

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**NAViGO Quality
Account 2017/18**