

NAVIGO Health and Social Care CIC



Quality Account 2014/15

Part 1

QUALITY - CHIEF EXECUTIVE'S VIEW AND DECLARATION OF QUALITY ACCOUNT ACCURACY 3
 SUMMARY OF QUALITY ACCOUNT 5
 What is the purpose of the Quality Account? 5
 Why these areas 6
 Statement of director's responsibilities in respect of the Quality Account 6

Part 2

WHO WAS INVOLVED IN SETTING PRIORITIES FOR 2015-16 7
 HOW DID NAVIGO COLLECT THESE PRIORITIES 7
 HOW DID NAVIGO SHORTLIST 8
 PRIORITIES FOR 2015-16 8
 OVER-ARCHING ORGANISATIONAL OBJECTIVES 9
 Objective 1: Ensure compassion is core to service delivery 10
 Objective 2: Embed the 5 CQC principles throughout NAViGO to improve service delivery still further 10
 Objective 3: Continue to provide and improve upon support to Carers within NAViGO 10
 Objective 4: Actively promote NAViGO locally 10
 Objective 5: Continue the policy of creativity within NAViGO models of care 10
 QUALITY INDICATORS 11
 Service user safety 11
 Service user safety Priority 1 (Linked to organisational objective 2): 11
 Service user safety priority 2: (Linked to organisational objective 2): 11
 Clinical Effectiveness 12
 Clinical Effectiveness Priority 1: (Linked to organisational objectives 4 and 5): 12
 Service user Experience 13
 Service user Experience Priority 1: (Linked to organisational objectives 1 and 3): 13
 Mandatory statements 14
 HOW NAVIGO MONITOR QUALITY AND PERFORMANCE 14
 MANDATED QUALITY INDICATORS 15
 Service users on CPA who were followed up within 7 days of discharge 15
 Crisis Resolution Home Treatment (CRHT) 17
 Readmissions 18
 Staff who would recommend NAViGO to their family or friends 19
 Service user experience of community mental health services 20
 Service user safety incidents 21

PARTICIPATION IN CLINICAL AUDITS 23
 National Audit of Schizophrenia (NAS) results 24
 Local Audits 25
 PARTICIPATION IN CLINICAL RESEARCH 29
 GOALS AGREED WITH FUNDERS OF SERVICES 30
 CARE QUALITY COMMISSION (CQC) REGISTRATION 31
 DATA QUALITY 32
 INFORMATION GOVERNANCE 33
 PERFORMANCE ON INFORMATION GOVERNANCE TOOLKIT 34
 CLINICAL CODING 34

Part 3

HOW NAVIGO PERFORMED ON QUALITY LAST YEAR – 2014-15 35
 Performance on Quality Account Priorities for 2014-15 35
 Achievements across the service in 2014-15 38
 NAViGO won Social Enterprise of the Year 38
 NAViGO inpatient areas rank in the top 20% in the country 39
 Improving Access to Psychological Therapies (IAPT) for people with Long Term Physical Health Conditions 39
 Update on Grimsby Offender Liaison and Diversion (GOLD) service 40
 Older People's Memory Service Retain Excellent Rating 41
 Older People's innovative award 41
 Achievements in Adult Acute services 43
 Tukes continue great work in training and work experience 44
 Tukes Property Services (TPS) continue to provide work experience 44
 Rharian Fields receives 'excellent' Quality standards for Eating Disorder units (QED) accreditation 45
 Staff Survey and Health Service Journal top ten place to work 47

Glossary of key terms 48
Statements from other organisations about the Quality Account 50
 HealthWatch 50
 North East Lincolnshire Clinical Commissioning Group (NELCCG) 51
 Service User and Carer Forum 51

Words highlighted in orange throughout the Quality Account can be found in the glossary on page 48.



Part 1

Quality - Chief Executive's view and declaration of Quality Account accuracy

NAViGO Health and Social Care Community Interest Company is a not for profit organisation that emerged from the NHS in April 2011 to run all local mental health and associated services in North East Lincolnshire.

NAViGO has all the services you would expect of a mental health provider including acute facilities, but also specialist services such as eating disorder services, systemic family therapy, highly developed employment and training services, running its own and other people's ancillary services (catering, cleaning, maintenance, etc.), creating jobs and training for people with mental health problems and many more. NAViGO designed the services in conjunction with people who use them and as such many are bespoke.

NAViGO was named a top ten national NHS employer by the Health Service Journal (HSJ), alongside some of the larger well known trusts. NAViGO scored top national scores in 65% of the categories in the confidential NHS staff survey 2014. Its services also continue to be recognised nationally in all areas of its practice and won a further prestigious national award (its seventh major national award) for excellence for dementia care services. NAViGO's inpatient environments scored over 99% in external Accreditation for Inpatient Mental Health Services (AIMS) audits and its Eating Disorder inpatient service achieved an accreditation of excellent in Quality standards in the Eating Disorder unit's (QED) review.

NAViGO continued to see more and more people

beyond the 8% experienced by other mental health trusts during this government. There is pride, that despite this, NAViGO continued to provide many services that other mental health providers did not and services which NAViGO members asked for, not just services NAViGO is contracted for. This is achieved by working smarter and wasting less in bureaucracy. Last year the staff sickness rate fell to a quarterly average of 2.2%, which was another notable achievement, and way below the previous NHS level of 6.8%, which further demonstrates the commitment to staff.

There is movement into a period of increased activity this year with a new Eating Disorder unit being built, expanding highly successful specialist services in this area, both in capacity and

be replacing the previous Tukes café and conference centre with an even more elaborate retail styled scheme, trading direct with the public and giving people with mental health problems more experience, training and jobs. This is building on its multi award winning schemes, which have received a lot of interest in the form of hundreds of visitors from other health trusts and organisations.

A great deal of time has been spent in partnership with other organisations, such as Northern Lincolnshire and Goole NHS Foundation Trust (NLaG), creating new options for care where physical health and mental health skills overlap. NAViGO currently has a highly successful scheme in place, teaching people with Chronic Obstructive Pulmonary Disease (COPD) how to deal

with anxiety and depression associated with COPD. There are also initiatives around reducing the amount of frequent attenders at Accident and Emergency at the local Hospital and an innovative scheme providing care and treatment for people with confusion of any cause in more appropriate environments and in the community which has just begun.

NAViGO endeavour to be accountable to the local population and has a membership of over 750 staff members, people who use the service and carers, all of which have equal voting rights. The membership set the objectives, vote representatives onto the boards and can appoint, or indeed remove senior figures, including the Chief Executive Officer (CEO) and Chair.

With many top national scores benchmarked against other NHS providers and top quartile indicators, NAViGO is a successful organisation, but does not rest on these achievements and continue to work with the population and its membership to develop more bespoke solutions to local issues.

Kevin Bond
Chief Executive

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.

“NAViGO's mission is simple - to provide the quality and type of services that it would be happy for its families to use and it does everything with this in mind.”

In 2014-15, NAViGO continued to attract high quality staff and ensured they were able to provide good quality care; as such

with less and less resource (activity increased by 14% each year). NAViGO has had its funding cut for both health and social care far

to people under the age of 18. This brings funding into the area which is spent on improving local services. NAViGO will also



Summary

What is the purpose of the Quality Account?

The purpose of the Quality Account is to:

- Evidence to the public the quality of service NAViGO deliver
- Show measureable quality improvement in identified areas and discuss plans to further improve quality
- Involve and respond to service user feedback

The three areas of priority NAViGO has chosen to focus on are:

- Service user safety – Ensuring service users do not come to harm whilst in NAViGO's care
- Clinical effectiveness – Applying the best knowledge, derived from research, clinical experience and preferences of service users to ensure NAViGO achieve the best outcomes for service users
- Service user experience – Listening to and acting on service users views to ensure that the best service and experience possible is provided



Why these areas?

Service user safety, clinical effectiveness and service user experience were the three categories Lord Darzi used in his review of the NHS in 2008, "High Quality Care for All". Lord Darzi felt that keeping service users safe, providing them with an effective service to produce the best outcomes, and acting on their feedback, would ultimately lead to health services focusing on quality rather than speed of delivering the service. In this way health services would be led by service users and not by government targets. This vision fits with NAViGO's vision of providing services it would be happy for its families to use.

Statement of director's responsibilities in respect of the Quality Account

The directors are required under the Health Act 2009, National Health Service (Quality Accounts) Regulations 2010 and National Health Service (Quality Account) Amendment Regulation 2012 to prepare Quality Accounts for each financial year. The Department of Health has issued guidance on the form and content of annual Quality Accounts (which incorporate the above legal requirements).

In preparing the Quality Account, directors are required to take steps to satisfy themselves that:

- The Quality Account presents a balanced picture of the Trust's performance over the period covered;
- The performance information reported in the Quality Account is reliable and accurate;
- There are proper internal controls over the collection and reporting of the measures of performance included in the Quality Account, and these controls are subject to review to confirm that they are working effectively in practice;
- The figures underpinning the measures of performance reported in the Quality Account are robust and reliable, conforms to specified data quality standards and prescribed definitions, is subject to appropriate scrutiny and review; and
- The Quality Account has been prepared in accordance with Department of Health guidance.

The directors confirm to the best of their knowledge and belief they have complied with the above requirements in preparing the Quality Account.

By order of the Board

Kevin Bond
Chief Executive

Simon Beeton
Director of Finance

Dr Aamer Sajjad
Medical Director

Part 2

Who was involved in setting priorities for 2015-16?

NAViGO's priorities for quality improvement for the financial year April 2015 to March 2016 were identified in conjunction with the Membership Board (which includes service user, community and staff member representation) and NAViGO's main funder of services, North East Lincolnshire Clinical Commissioning Group (NELCCG).

How did NAViGO collect these priorities?

NAViGO is a **social enterprise**, it is owned by the staff and run by community and staff members. Community members are service users, **carers** or people in the local area with a genuine interest in mental health. The membership representatives sit on the Board as **non-Executive directors** and help set priorities and plans and monitors if processes are working. Members are part of every committee and issues of quality are always discussed. The Quality Account helps focus this process and activity into an annual plan.

The process for identifying priorities began with a review of performance in the previous financial year (April 2014 to March 2015). This included an evaluation of priorities featured in last year's Quality Account to establish whether further work was needed in these areas or whether enough work had been done to justify retiring these priorities, whilst continuing to monitor them through regular internal performance reporting. Members' priorities (both staff and people who use the service/**carers**) were gleaned from various events and surveys to become the core objectives.

Performance Indicators set nationally for mental health providers as part of the NHS Standard Contract were examined to ascertain whether NAViGO was performing below target in any, or had a downward trend in results which would necessitate the need for identifying them as a priority for improvement.

Staff meetings involving representation from the Service user and **carers** Forum discussed potential quality improvement priorities based on the results of the previous financial year performance review alongside a range of qualitative and quantitative data. This data featured complaints, service user safety incidents and accidents, local member/service user surveys, and **Commissioning for Quality and Innovation (CQUIN)** indicators set by NAViGO's main funder of services, North East Lincolnshire Clinical Commissioning Group.



Open Minds, Grimsby

How did NAViGO shortlist?

The shortlist of priorities was developed based on the ethos of NAViGO – providing services it would be happy for its families to use. Quality improvement priorities reached the shortlist where there were trends in both the qualitative (feedback from complaints and patient surveys) and quantitative (numbers of incidents/people seen/people waiting for appointments) data.

Priorities for 2015-16

Each year NAViGO consult with its members to define key organisational objectives which are then built into team and individual staff personal development objectives. These are detailed below and provide an over-arching sense of direction for the organisation in the coming 12 months. Following on from these organisational objectives are the measurable quality indicators NAViGO members have identified to improve quality over the next 12 months. The measurable quality indicators are referenced to the organisational objectives by the objective number.

Over-arching Organisational Objectives

The following objectives have been identified and developed in partnership with NAViGO's membership following a consultation event with members on 24th February 2015. They have been agreed by the Independent User and Carer Forum and NAViGO's Membership Board and endorsed by the Senior Management Team.

Objective 1: Ensure compassion is core to service

Compassion is central to all NAViGO services and as such deserves to be taken to heart by everyone employed by the organisation. Whilst NAViGO has performed well on all indicators, it is an area where continued work is always required. NAViGO will continue to develop staff to place greater emphasis on reflective practice around compassionate care and to ensure this is rooted in everything it does.

Objective 2: Embed the 5 CQC principles throughout NAViGO to improve service delivery still further delivery

The Care Quality Commission identifies 5 key areas that should be addressed within a care setting in order that the care provided is of outstanding quality. NAViGO recognise this and will continue to embed these principles throughout the organisation to further enhance the quality of service delivery to service users and their carers.

The five principles are:

- Safe
- Effective
- Well-led
- Responsive to People's Needs
- Caring

Objective 3: Continue to provide and improve upon support to Carers within NAViGO delivery

NAViGO has always provided a support service to Carers and is committed to the continuing provision of that service. Future provision will involve NAViGO in the following:

- Providing dedicated posts within NAViGO to deliver this objective
- Setting up/involvement in social outlets and stimulation for Carers
- Giving a commitment to Carer engagement in the care delivery process
- Ensuring there is a more equal balance between support for service users and Carers

Objective 4: Actively promote NAViGO locally

NAViGO need to continue/further enhance communication efforts locally in order to deliver a consistent picture to North East Lincolnshire and the wider community. It will find innovative ways to 'get the message out there' regarding services. NAViGO is a local community organisation trying to give its best to the local community and needs the support and understanding of people to succeed fully in this. NAViGO also need to constantly work to prevent the stigma which mental health often has attached to it.

Objective 5: Continue the policy of creativity within NAViGO models of care

Newly fledged services such as Home from Home and the Hub and Spoke Project have been identified by the Membership as areas they consider to be good practice. NAViGO will continue to employ innovation in its service delivery models and further investigate:

- Alternatives to care homes (and promotion of such alternatives)
- Methods of sharing best practice



Guest Speaker, Gail Porter, at the AGM 2014

Service User Safety

Service user safety Priority 1 (Linked to organisational objective 2):

Ensuring service users come to no harm whilst receiving services is paramount to NAViGO delivering on its vision of providing services we would be happy for our families to use. Feedback from service user experience surveys and the local main funder of NAViGO Services, North East Lincolnshire Clinical Commissioning Group (NELCCG), has suggested that there is room for improvement in how NAViGO proactively communicate with General Practitioners (GPs) in the wider care team. Information sharing is paramount in ensuring service user safety. A significant part of effective communication is how timely the information reaches other aspects of the care team.

- To ensure General Practitioners (GPs) are sent a weekly list from the **electronic patient record (Silverlink)** of any of their service users who present in crisis in the past 7 days along with contact details of the person and the NAViGO Crisis worker they were seen by. Alternatively GPs could be sent a weekly list of their service users who disengage with the NAViGO Crisis/Acute teams i.e. who are offered services but who do not attend (DNA) the first/subsequent follow up.

Service user safety Priority 2: (Linked to organisational objective 2):

Another important part of service user safety is ensuring risk management plans are updated following an incident where a service user may have or has suffered any harm, whilst under the care of NAViGO. Risk management plans detail any risks and how the risk will be managed. A clinical audit and subsequent re-audit showed that not all service areas were 100% compliant in ensuring risk management plans were reviewed and updated following such incidents or near misses.

- For 95% of all Risk Management plans to be updated following an incident being logged on the incident reporting system (Datix) where a near miss occurred, or where the service user suffered any harm by March 2016.

Clinical Effectiveness

Ensuring services are as effective as they can be is a significant part of what NAViGO believe should define quality.

Clinical Effectiveness Priority 1: (Linked to organisational objectives 4 and 5):

The previous model for accessing health and social care services in North East Lincolnshire had two main points of access for standard non-emergency referrals – one for social and community based care and one for mental health services. This has arguably made it more challenging at times for the public to easily access services and be directed to the place which best serves their needs as quickly as possible. The local Clinical Commissioning Group funding services in the area, North East Lincolnshire Clinical Commissioning Group, plan to fully integrate all professional advice and guidance in one genuinely integrated Single Point of Access (SPA) that will allow access to a rapid response by the right professional.

NAViGO is to have staff available as part of the Single Point of Access to offer mental health advice at the first point of contact. The mental health crisis service provides care for the most acute mentally unwell people. Due to the nature and intensity of care which is needed in this service it is important to maximise staff resource to ensure rapid and effective response to support people in a crisis situation. In previous years the number of referrals to this service has been higher than expected and staff have found it challenging to effectively treat those most in need. Previously, over 200 referrals per annum have been received from people who already have a key worker (care coordinator) within mental health services. Although this has decreased by 35% between 2013 and 2014, as part of the work NAViGO has already done to promote awareness about the most appropriate part of the service to provide treatment in relation to the need of the individual, it is recognised that further work needs to occur in this area. Improvements in effectiveness and efficiency are expected to be realised by NAViGO being

part of the new integrated Single Point of Access service. NAViGO is also committed to the principals of the Crisis Care Concordat (The Mental Health Crisis Care Concordat is a national agreement between services and agencies involved in the care and support of people in crisis. It sets out how organisations will work together better to make sure that people get the help they need when they are having a mental health crisis) and part of this work includes proactively working to promote clear pathways of care for people wanting to access services on its website.

- To reduce the proportion of presentations to NAViGO's **Crisis team** by >15% in 2015-16, where the service user has a care coordinator and has presented in crisis during office hours. Ensure service users with a care coordinator have the correct contact details for and know how to contact their care coordinator (or an alternative member of staff) between the hours of 9am – 5pm on weekdays.

Service user Experience

The heart of what NAViGO do centres on providing positive experience and outcomes for people who use the service and **carers**. The importance NAViGO put on service users and **carers** to drive the quality of its services is significant and can be proven by the influence of its service user and **carer** forum, its membership or shareholders, which has a high service user representation, and its commitment to providing employment and training opportunities for service users within its **Tukes** enterprise.

Service user experience Priority 1 (Linked to organisational objective 2):

As part of Payment by Results (PbR), NAViGO ask every service user who is eligible for PbR to complete a Patient Rated Experience Measure (PREM) which asks service users if they would recommend NAViGO to friends and family for care and treatment and also asks service users to provide comments on what would improve their experience further. Whilst a lot of work has gone into achieving a good response rate for this feedback and actively monitoring the overall results, staff reported they may not be aware of some of the comments made as part of these surveys.

- To produce an action plan from the comments for improvement from the PREMs, which will include what actions to take, who is responsible within NAViGO for ensuring the action is completed, and the deadline for completion. The action plan will feed into the NAViGO mental health survey action plan, which is monitored through the NAViGO survey group, where clinical/managerial service leads and member(s) of the community membership and independent service user forum attend. The action plan will be communicated to front line staff via service leads who will work together to celebrate the positive achievements alongside action planning any constructive improvements to enhance the service further.



Mandatory statements

The following sections are mandated for inclusion in all Quality Accounts. This is to enable the public to compare NAViGO with other providers of health and social care.

How NAViGO monitor quality and performance

NAViGO's Performance Team produces data from the Service User **Electronic Patient Record (Silverlink)** to inform progress against national performance indicators set by the **Care Quality Commission**, the **Department of Health** and the Local Authority.

Performance is also monitored locally against priorities set in contracts with funders of services, namely North East Lincolnshire Clinical Commissioning Group (NELCCG). All performance indicators are monitored at least monthly using a traffic light system (green for on or above target, amber for slightly below target and red for well below target). Data are broken down into service areas and discussed at monthly meetings with service leads. Any issues are passed down to operational staff and action plans for improvement are agreed. Any constant under-performance is escalated to the Associate Director of Operations and the Membership Board. The Membership Board and the main service funder receive a performance report including a summary of exceptions where targets have not been met every quarter.

Any data quality issues within **Silverlink** are identified on at least a weekly basis using internal reports. This includes missing data where it is a vital part of the service user's record, such as the National Health Service number (NHS number). NHS numbers are traced using an electronic system which ensures health records are linked to the correct service user.

Mandated Quality Indicators

Set out in the tables below are the quality indicators that providers of services are required to report in their Quality Accounts.

Additionally, where the necessary data is made available to NAViGO by the Health and Social Care Information Centre, a comparison of the numbers, percentages, values, scores or rates of NAViGO (as applicable) are included for each of those listed in the table with

- a) the national average for the same; and
- b) with those NHS trusts and NHS foundation trusts with the highest and lowest of the same, for the reporting period.

Service users on CPA who were followed up within 7 days

People cared for by specialist mental health teams are likely to be monitored under the Care Programme Approach (CPA). Service users on CPA usually have multiple needs and require care coordination which is usually managed by a care plan. All service users on CPA discharged from psychiatric inpatient care are to be followed up either by face to face contact or by phone within 7 days of discharge to reduce risk of suicide and social exclusion and improve care pathways. The national threshold is to follow up 95% of service users within 7 days.

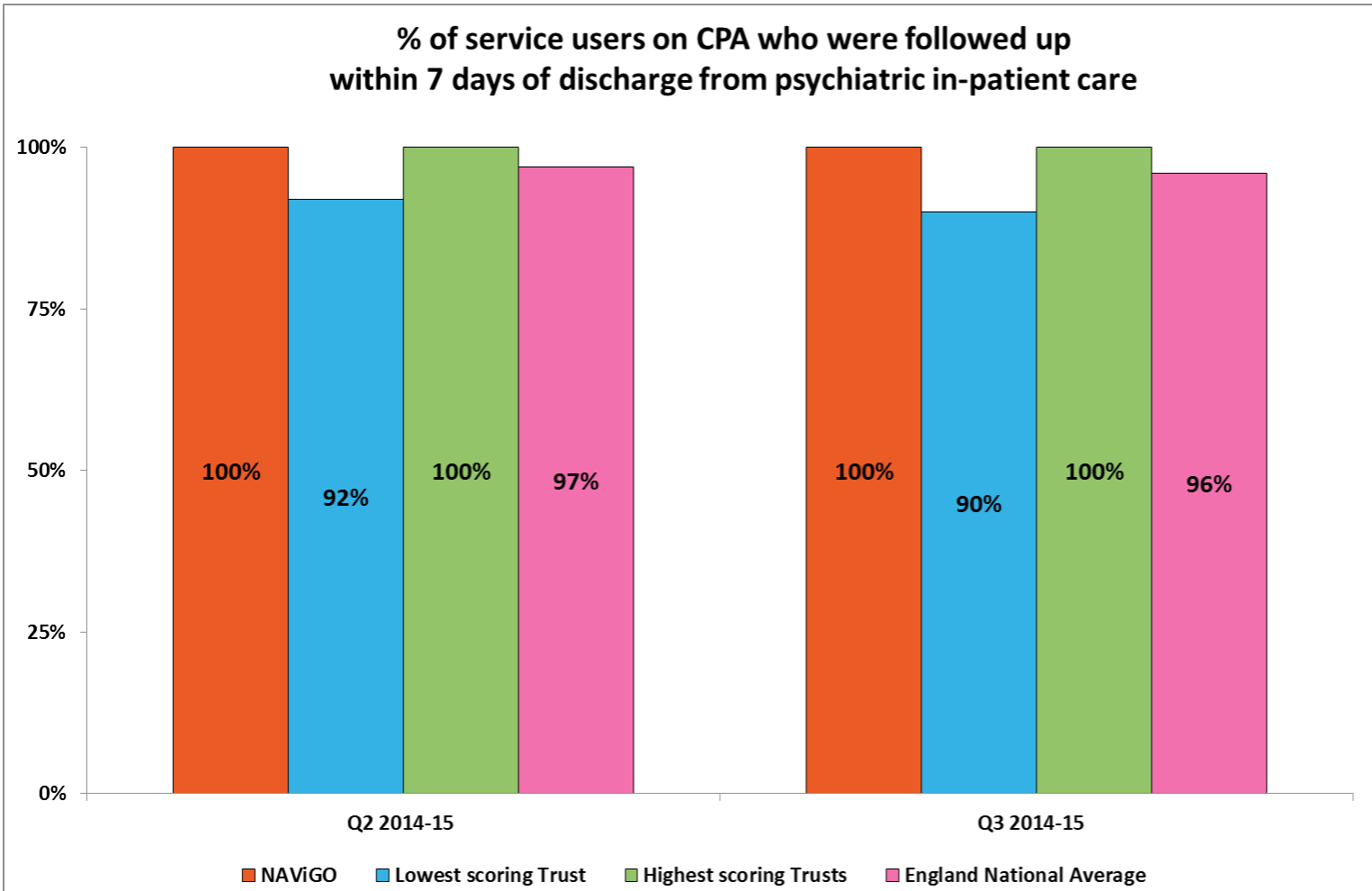


Figure 1.1

NAViGO has followed up every service user who has been discharged within 7 days between 1st July 2014 and 31st December 2014 as shown in figure 1.1. 5 other trusts in England scored 100% in quarter 2, 2014-15 and 3 other trusts in England scored 100% in quarter 3, 2014-15, meaning NAViGO is performing within the top 25% of all trusts in England for this indicator.



“ Service user’s family are very happy with their care and also with the support they receive. The care the service user is receiving from all the staff has helped their family cope with the service user being away from them. ”

A carer regarding the Older People’s Care Home Liaison Team.

Crisis Resolution Home Treatment (CRHT)

Crisis Resolution Home Treatment (CRHT) teams offer intensive short-term support for people in mental health crisis in their own home, or a suitable alternate non-NHS setting, thereby avoiding hospital admissions. All admissions to psychiatric inpatient wards are gate kept by a CRHT team by assessing the service user before admission and by being involved in all requests for admission. The national threshold is to gate keep 95% of all admissions to psychiatric inpatient wards.

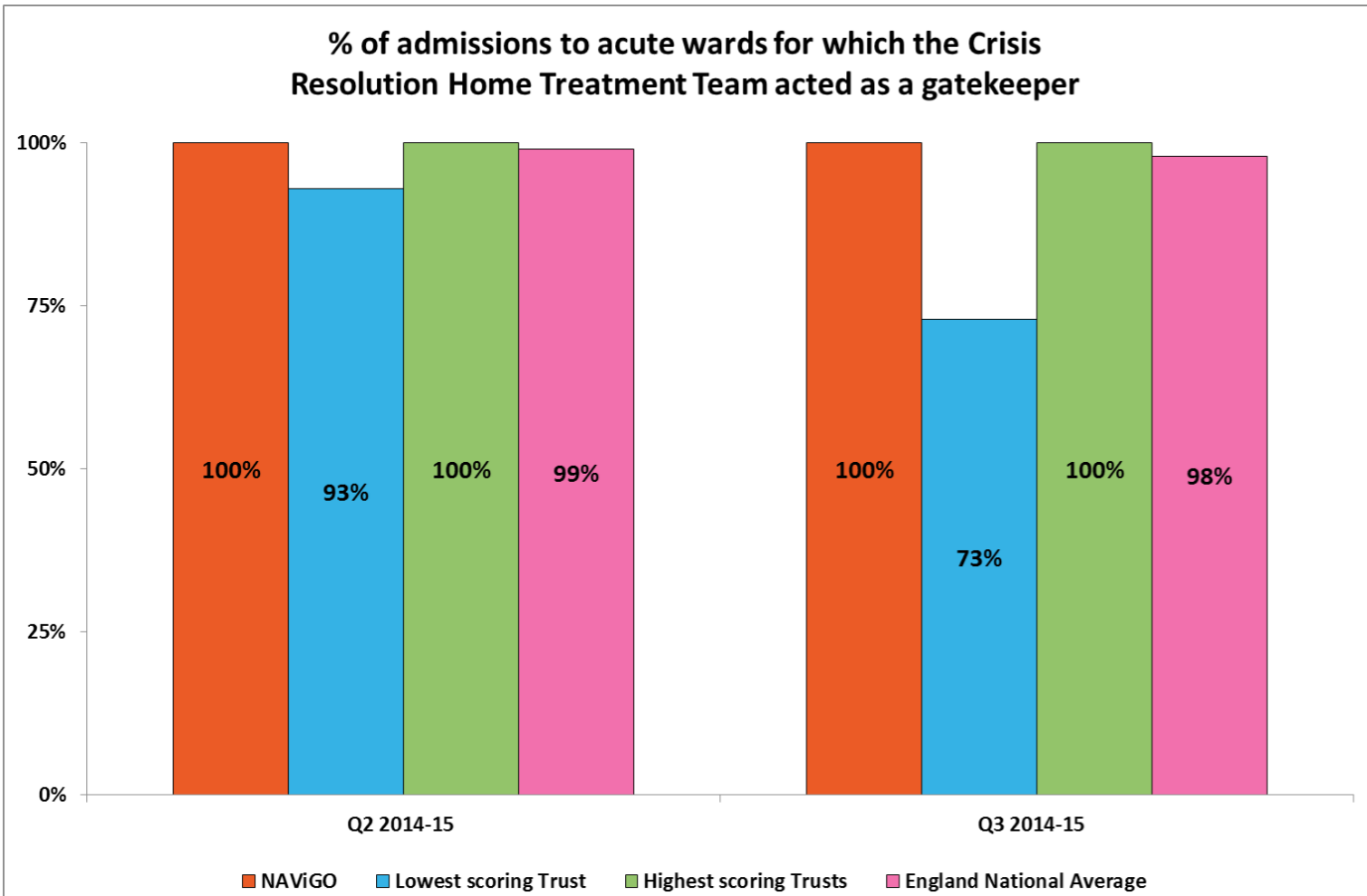


Figure 1.2

NAViGO's CRHT team has acted as a gatekeeper for all service users between 1st July 2014 and 31st December 2014 as shown in figure 1.2. 20 other trusts in England scored 100% in quarter 2 and quarter 3, 2014-15, meaning NAViGO is performing within the top 25% of all trusts in England for this indicator.

Readmissions

The purpose of the indicator shown in figure 1.3 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 at risk and target services.

Performance Indicator Description	Related NHS Outcomes Framework Domain	NAViGO	National Average	Highest and Lowest scoring Trusts
The percentage of service users aged — (i) 0 to 14; and (ii) 15 or over, readmitted to a hospital which forms part of the trust within 28 days of being discharged from a hospital which forms part of the trust during the reporting period.	3: Helping people to recover from episodes of ill health or following injury	Data not available	No data for NAViGO published nationally so cannot compare to other nationally available data	No data for NAViGO published nationally so cannot compare to other nationally available data

Figure 1.3

Unfortunately NAViGO is unable to compare its performance in this area due to the latest nationally published data relating to a period before NAViGO was established as an organisation.

NAViGO is performing within the top 25% of trusts for families



Service user experience of community mental health

The 2013 survey of people who use community mental health services involved 58 trusts in England (including combined mental health and social care trusts, foundation trusts and primary care trusts that provide mental health services). Responses were received nationally from more than 13,000 service users with a response rate of 29%, NAViGO's response rate was lower than the national total with 26%. Service users aged 18 and over were eligible for the survey if they were receiving specialist care or treatment for a mental health condition and had been seen by the trust between 1st July 2012 and 30th September 2012. The survey included service users in contact with local NHS mental health services, including those who receive care under the

Care Programme Approach (CPA). The 2014 survey is yet to be benchmarked using the same methodology hence why older data has been used.

NAViGO's 'service user experience of community mental health services' indicator score with regards to a service user's experience of contact with a health or social care worker during the reporting period can be seen in figure 1.5. The score provided is an overall score based on a weighted average of four survey questions from the community mental health survey (score out of 100) The higher the score, the better the trust is performing.

Staff who would recommend NAViGO to their family or friends

The NHS staff survey is completed every year and surveys all NHS trusts in England. The 2014 survey was completed in quarter 3, 2014-15, the response rate for NAViGO was 62% (281 usable responses from a sample of 453), which was 20% higher than all other trusts surveyed.

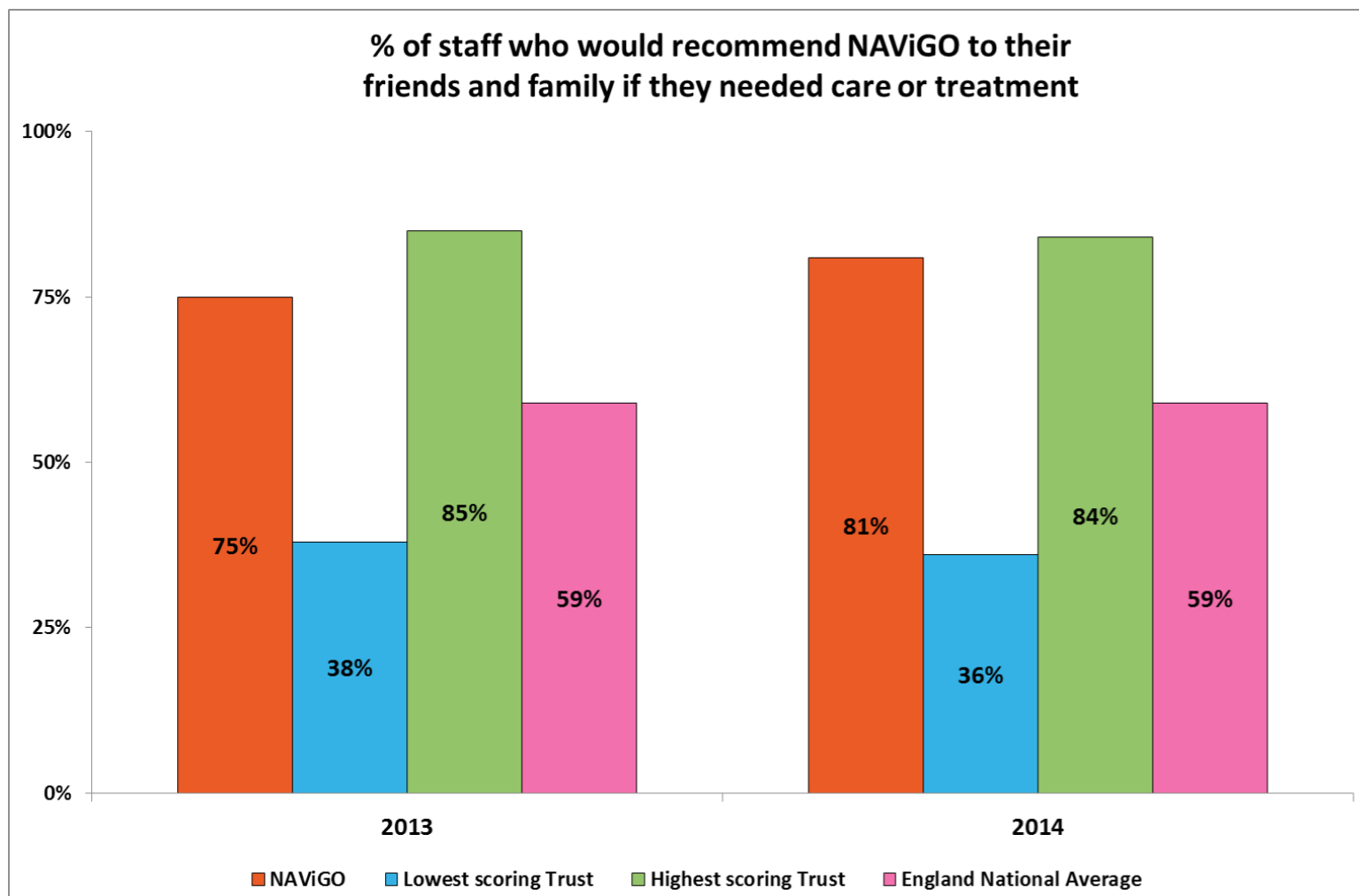


Figure 1.4

NAViGO scored 81% in the 2014 survey and ranked second out of 58 mental health providers nationally, as shown in figure 1.4.

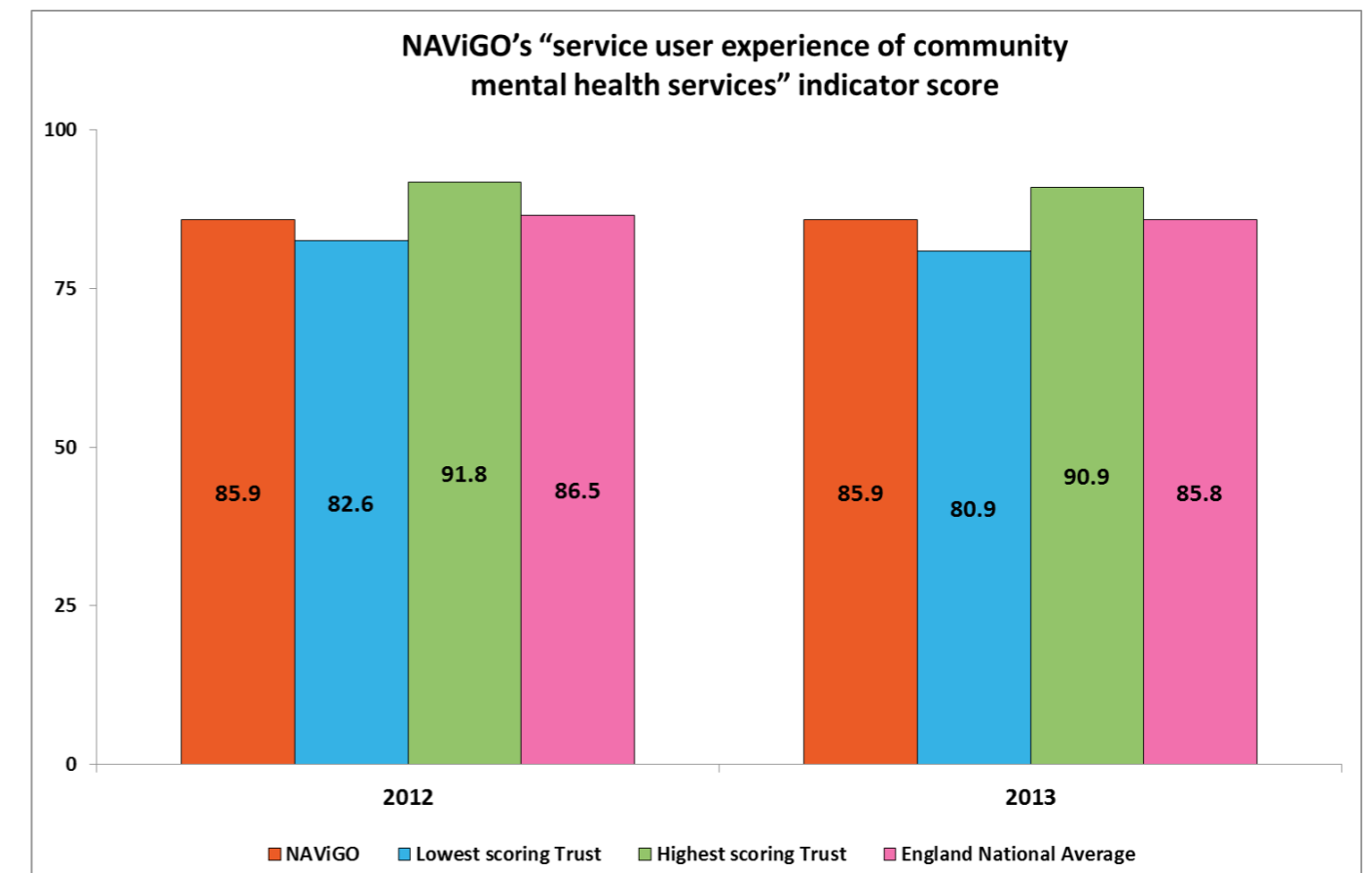


Figure 1.5

NAViGO consider that this data are as described for the following reasons: NAViGO was rated as: 'Average' (About the same), which means NAViGO is performing about the same as most other mental health trusts who took part in the survey. NAViGO regard average as being below the standard it requires and has taken actions below to improve this score, and so the quality

of its services, by continuing to have regular service user input in the way it shapes and develops its services via the Membership Board, its community membership and the Independent Service User and Carer Forum. NAViGO has developed local survey user surveys to gain more frequent written feedback throughout the year with action plans for every service area each quarter.

Service user safety incidents

All service user safety incident reports submitted to the [National Reporting and Learning System \(NRLS\)](#) categorised as resulting in severe harm or death are individually reviewed by clinicians to make sure that as much as possible is learnt from these incidents, and, if appropriate, action taken at a national level. The indicator shown in figure 1.6 looks at the rate of severe incidents to assess how safe a provider may or may not be.

Performance Indicator Description	Related NHS Outcomes Framework Domain	NAViGO	National Average	Highest and Lowest scoring Trusts
The number and, where available, rate of patient safety environment and incidents reported within the trust during the reporting period, and the number and percentage of such patient safety incidents that resulted in avoidable harm in severe harm or death	5. Treating and caring for people in a safe environment and protecting them from avoidable harm	Data not available nationally for Social Enterprises	No data for NAViGO published nationally so cannot compare to other nationally available data	No data for NAViGO published nationally so cannot compare to other nationally available data

Figure 1.6

Unfortunately NAViGO is unable to compare its performance in this area as nationally published data are only currently available for NHS Organisations. NAViGO review all of its incidents and has provided full lessons learned reports to its funder of services where serious incidents have occurred. Themes from serious incidents are made available to staff as part of a quarterly Quality Newsletter which promotes best practice and shared learning.

“ I wish to give the team top marks as I am impressed with their overall care. ”
A service user regarding the Konar Suite



Participation in clinical audits

Clinical audit provides a way to review and reflect on current practice to assess whether a healthcare provider is doing what it should be doing according to national and local guidance.

Clinical audit is important because its aim is to continuously improve the quality of care provided to service users.

National confidential enquiries collect data on adverse events to identify shortfalls and improve future clinical care; they also highlight short falls/failures in service organisation. In 2014-15 there was one national confidential enquiry into suicides which Mental Health providers were required to report on as part of

the Quality Account.

During 2014-15, NAViGO Health and Social Care (CIC) participated in one national clinical audit and one national confidential enquiry, out of one national clinical audit and one national confidential enquiry which it was eligible to participate in. This was in addition to NAViGO's local clinical audit programme.

The national clinical audit that NAViGO participated in and for which data collection was completed during 2014-15 is listed in figure 1.7, alongside the number of cases submitted and the number of registered cases required by the terms of that audit.

Audit	Trust Participation	Organisational Questionnaire Completed	Audit of Practice	
			Submissions	Minimum number of submissions
POMH Prescribing for substance misuse: alcohol detoxification	Yes	N/A	10	10

Figure 1.7

National Audit of Schizophrenia (NAS) results

The National Audit of Schizophrenia (NAS) Audit was completed at the end of 2013 and NAViGO was required to participate (as detailed in NAViGO's 2013-14 Quality Account). 100 service user records were audited against NICE guidelines for Schizophrenia. NAViGO performed above the national average for 71% of the questions asked in the audit. The audit covered standards relating to interventions, physical health risk factors and prescribing. The report containing the audit results was released in November 2014 and shows that NAViGO made improvements on:

- Crisis and care planning
- Monitoring physical health risk factors
- Providing rationale for prescribing medication in correspondence.

Areas for improvement include:

- Offering **Cognitive Behavioural Therapy (CBT)** and Family Interventions within the community
- Offering interventions for physical health (this will be addressed in the community **WHiSe** Clinics).

NAViGO was the above the national average for the monitoring of physical health factors mainly due to the roll out of the Wellbeing and Health Improvement Service (referred to as 'WHiSe'). WHiSe compliments the treatment given by the Community Mental Health Teams (CMHT) and aims to address the physical and holistic needs of people suffering from severe and complex mental health conditions.

The audit lead has formulated an action plan in conjunction with other relevant NAViGO colleagues and this has been uploaded to the following NAViGO website page: <http://navigocare.co.uk/about/providing-quality-services/>

Local Audits

A number of local audits were also carried out during 2014-15 and monitored via the NAViGO Clinical Audit Committee. Two of these completed audits are depicted in figure 1.8.

Local Audits completed in 2014-15	Numbers partaking in the audit	Actions agreed
Eating Disorder Unit (Rharian Fields) Self Harm longer term management	14 inpatient admissions (11 service users)	<ul style="list-style-type: none"> Rharian Fields named workers to ensure that information written on service users' care plans are also in the risk assessments and vice versa. Rharian Fields staff to ensure that risk assessments cover the broad detailed area of risk; not to focus specifically upon eating disorders. Rharian Fields staff to continue to complete risk assessment refresher training. A uniform approach to assessment of needs and care planning to continue; using the same format and latest version of documentation throughout. Care planning to include service user future aspirations and goals such as occupation/ education. Archiving of service user records needs to be clearer so anyone needing to access service user records can do so quickly and easily.
Re-audit: Prescribing antipsychotic medication for people with dementia – POMH (Prescribing observatory for mental health) - UK Topic 11b	24 service users	<ul style="list-style-type: none"> To ensure that the discussion of risks and benefits will be carried out and recorded in service users' records (with the initiation/review of antipsychotics form) in the electronic patient record document centre. Administration staff to prompt consultants to complete the initiation/review of antipsychotics form following antipsychotic reviews

Figure 1.8

These local audits contributed to improving the care of service users and the quality of service NAViGO provide by:

Eating Disorder Unit (Rharian Fields) Self Harm longer term management

Self-harm is an area of specialist interest for the elected Community **non-executive** Representative at the Clinical Audit Committee within NAViGO and the Audit Committee agreed this was an area in which NAViGO would like to evidence best practice. The aim of the audit was to ensure that Rharian Fields Specialist Eating Disorder Service is compliant with NICE guidelines for self-harm.

11 service users who have had one or more inpatient stay at Rharian Fields (14 inpatient stays in total) since Rharian Fields opened in 2012 were audited and the objectives were:

1. All incidences of self-harm to be treated in line with NICE standards (2011) for the management of self-harm.
2. To offer an integrated and comprehensive psychosocial assessment of needs and risks to understand and engage service users who self-harm and to initiate a therapeutic relationship.
3. Service user care plans should be multidisciplinary and created with the service user who self-harms and, provided the service user agrees, with their family, **carers** or significant others. The aims of longer-term treatment should be discussed and agreed with the service user who self-harms and documented in the care plan.
4. Service user risk assessments should be a detailed clinical assessment that includes the evaluation of a wide range of biological, social and psychological factors that are relevant to the individual and, in the judgement of the healthcare professional conducting the assessment, relevant to future risks, including suicide and self-harm.
5. Service user risk management plans should be a clearly identifiable part of the service user's care plan.

Overall all NICE standards were met and Rharian Fields performed well in relation to assessing service users' needs for longer term management and also in relation to the care plan standards (point 3 above), which included ensuring GPs have a copy of the care plan to allow a holistic approach to care across organisations.

The audit showed that performance was not 100% in ensuring risk assessments are created or updated with information on methods of past and current self-harm, the frequency of past and current self-harm, coping strategies and other factors (such as personal relationships) which can change the level of risk. It was also noted that service user risk management plans were not always a clearly identifiable part of the care plan. This is being addressed.

Timescales and action leads are yet to be identified as the action plan is yet to be discussed by the Rharian Fields team. It will also be disseminated to senior managers for wider understanding.

Re-audit: Prescribing antipsychotic medication for people with dementia – POMH (Prescribing observatory for mental health) - UK Topic 11b

Following the baseline audit on prescribing antipsychotic medication for people with dementia in 2013, which measured NAViGO's practice against NICE guidelines (CG42 – Dementia); NAViGO completed a re-audit in 2015. The 2015 re-audit focused on finding out if improvements had been made with regards to antipsychotic prescribing in dementia and whether actions from the baseline audit had been implemented.

36 service users were audited in the baseline audit compared to 24 in the re-audit. Improvements were found in all standards (listed below). Even though improvements were found across all standards, in standard 3, only 50% of records audited met the standard.

1. Target symptoms such as verbal/physical aggression, agitation have been identified.

2. The effect of comorbid conditions such as physical health, undetected pain/discomfort,

psychosocial and physical environmental factors, side effects of medications were considered prior to prescribing.

3. The possible risk and benefits of treatment were fully discussed before prescribing the antipsychotic, including possible increased risk of stroke/transient ischaemic attack and possible adverse effects on cognition.

4. The antipsychotic was prescribed for severely distressed service users and/or whether there is an immediate risk of harm to the service user or others.

5. The antipsychotic was prescribed at a low dose and whether it was titrated upwards.

6. Whether changes in target symptoms were reviewed and recorded at regular intervals i.e. every 3-6 months and the treatment was time limited.

There were two actions from the baseline audit, one was implemented and showed an improvement, and this was for service users to have a review of changes in their target symptoms at least every 3-6 months and a trial of withdrawal to be considered. The second action related to documenting discussion of the possible risks and benefits of antipsychotic treatment with the service user and their carer. Re-audit showed that improvement was still required in this area so the action was carried forward in the action plan for the re-audit.



Participation in clinical research

Clinical research involves gathering information to help understand the best treatments, medication or procedures for service users. It also enables new treatments and medications to be developed.

The number of service users receiving NHS services provided by NAViGO so far that were recruited to participate in research approved by a research ethics committee was 56, all of whom were treated as part of the on-going research study by Professor Ann Mortimer, M.D. and Dr Colin Robertson, Ph.D into Transcranial Magnetic Stimulation (TMS) to treat chronic depression.

The NAViGO TMS centre implemented a brain analysis system (Electroencephalography (EEG)) using Independent Component Analysis (ICA) and low resolution brain imaging called sLoreta. These provide important images of brain activity that can be used to guide the application of TMS to treat people with depression, anxiety, obsessive compulsive disorder (OCD) and post-traumatic stress disorder (PTSD). The aim is to develop a TMS treatment database which will be an evidenced based system to identify which subtypes of mood disorders will respond to TMS. So far 56 people have been treated and 34 have shown a significant benefit which is a 61% success rate that compares extremely well to other forms of treatment.

An EEG assessment and TMS treatment process has been established with Pelham and Meridian lodges based at NAViGO's Harrison House inpatient site. This process combines the EEG and TMS together to offer a unique assessment and treatment protocol that has so far produced significant benefits for service users.

The TMS centre also offers TMS treatment to out of area service users for a modest fee. For further information on the service offered please visit <http://navigocare.co.uk/services/transcranial-magnetic-stimulation-tms-centre/> where information is available on the NAViGO EEG and TMS treatment service and how out of area service users can make a request for treatment.



The Gardiner Hill Caravan, Thorpe Park

Goals agreed with funders of services

Clinical Commissioning Groups hold the NHS budget for their area and decide how it is spent on hospitals and other health services. This is known as 'commissioning'. North East Lincolnshire Clinical Commissioning Group (NELCCG) is the main funder of services at NAViGO. It sets NAViGO targets based on quality and innovation.

A proportion of NAViGO's income from the NELCCG in 2014-15 (£432,864, 2.5%) was conditional on achieving quality improvement and innovation goals agreed between NAViGO and any person or body it entered into a contract, agreement or arrangement with for the provision of NHS services, through the **Commissioning for Quality and Innovation (CQUIN)** payment framework.

Further details of the agreed goals for 2014/15 and for the following 12-month period are available electronically at: <http://www.navigocare.co.uk/index.php?id=providing-quality-services>.

Previous CQUINs were met in full.

Care Quality Commission (CQC) registration

The CQC regulate and inspect health organisations. If it is satisfied the organisation provides good, safe care, it registers the organisation.

NAVIGO Health and Social Care is required to register with the CQC and its current registration status is registered. The CQC has not taken enforcement action against NAVIGO during 2014-15.

NAVIGO has worked hard in achieving all standards of care being fully compliant at all three registered sites: Harrison House, the Gardens (including Rharian Fields), and NAVIGO House (covering headquarters, community services and Tukes). Inspection reports can be viewed on the CQC website at <http://www.cqc.org.uk/directory/1-177460793>.

NAVIGO teams continue to work to improve the quality of services provided and to provide assurance to the Board. NAVIGO has passed every one of its CQC inspections, all inspection reports have been very positive and demonstrate NAVIGO is a safe, effective, caring, responsive and well led organisation. NAVIGO continue to strive for even better services for its local community.

Updates and discussion regarding compliance are discussed in Service area team meetings regularly.



Data Quality

Part of NAVIGO's commitment to providing quality services is to ensure it keeps accurate, complete and up to date records. Data quality measures include whether service users' NHS numbers were present in their health records.

NAVIGO submitted records during 2014-15 to the Secondary Uses Service for inclusion in the Hospital Episode Statistics which are included in the latest published data*.

The percentage of records in the published data, which included the service user's valid NHS number, was:

- 99.7% for admitted service users care;

The percentage of records in the published data, which included the service user's valid General Medical Practice Code, was:

- 100% for admitted service users care;

*Latest published data January 2015.

These results are both above the national average and are close to or are 100% therefore there are no actions required to improve data quality in these areas.



“ Cannot thank all the staff enough for excellent care and attention. ”

A service user regarding East Community Mental Health Team

Information Governance

Information Governance ensures necessary safeguards for, and appropriate use of, service user and personal information.

The director accountable for managing service user information and ensuring service user confidentiality is also known as the Caldicott Guardian. NAViGO's Caldicott Guardian is Dr Aamer Sajjad, Medical Director. NAViGO is utilising the skills of North Yorkshire and Humber Commissioning Support Unit (NYHCSU) through a service level agreement which covers Information Governance and Security.

NAViGO's information governance framework has been developed in partnership with the NYHCSU's Information Governance and Security Manager.

NAViGO continue to take its duty to protect personal information and confidentiality very seriously and is committed to taking all reasonable measures to do so, both for electronic information and paper records. At Trust Board level, the Director of Finance is accountable for managing the service level agreement with NYHCSU which covers all information assets and any associated risks

and incidents.

The Caldicott Guardian is responsible for the management of service user information and service user confidentiality. Information governance and information risks are managed and controlled via the Information Governance Toolkit submissions and the Clinical Governance Committee.

The toolkit and supporting evidence focuses on:

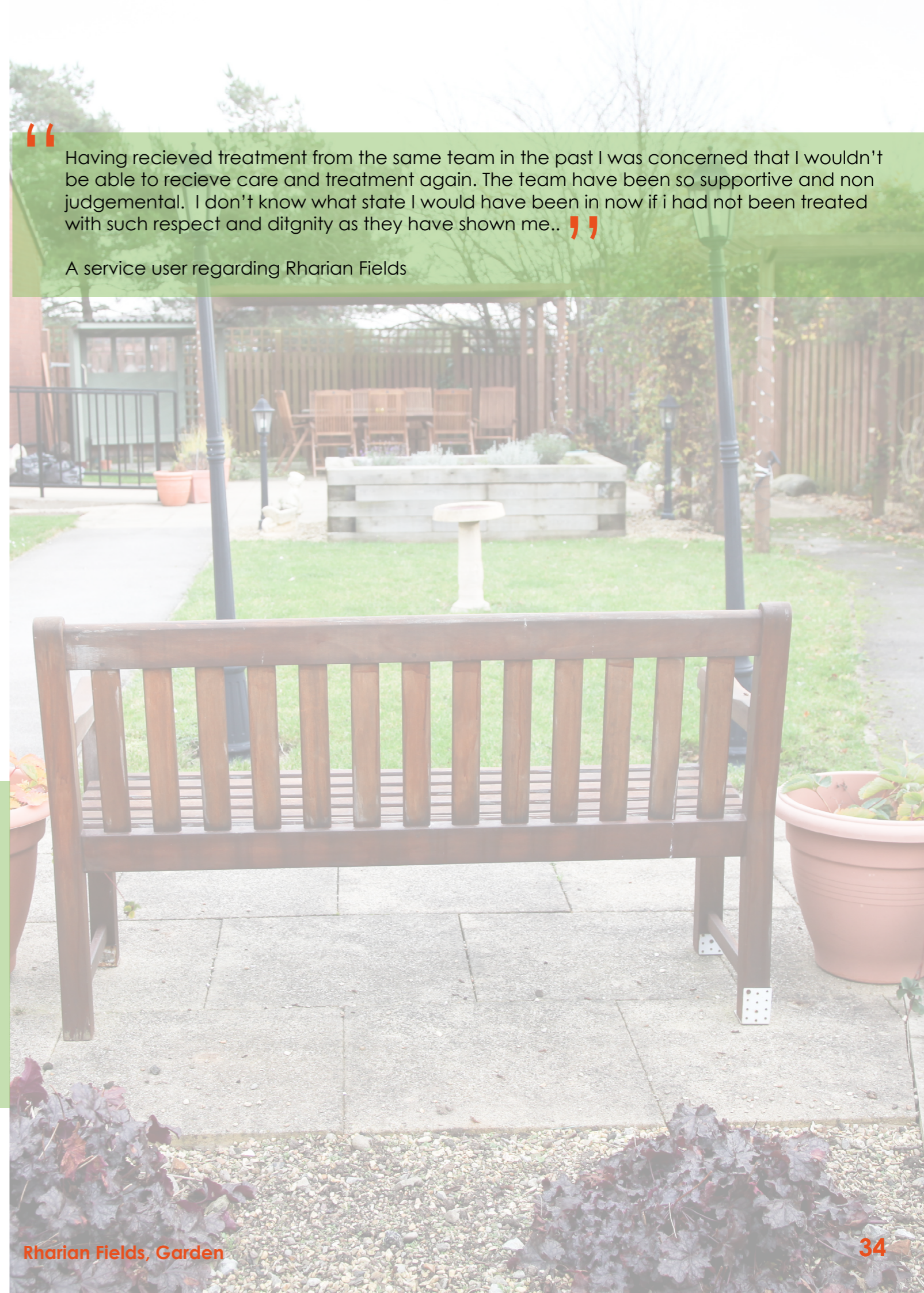
- The formal assignment of responsibilities to named individuals or groups;
- Documented policies subject to formal review, approval and dissemination; and
- Checks and measures of staff understanding, and compliance with policies and processes.

Performance on Information Governance Toolkit

NAViGO's Information Governance Assessment Report for 2014-15 is still level two (satisfactory). NAViGO received the same overall score in 2012-13 after making improvements in local policies and procedures monitored through its Clinical Governance Committee to evidence compliance with the Toolkit standards. The evidence submitted has been validated by the Health and Social Care Information Centre.

Clinical coding

Clinical codes are a way of recording service user diagnosis and treatment. NAViGO was not subject to the Payment by Results (PbR) clinical coding audit during 2014-15 by the Audit Commission.



“

Having recieved treatment from the same team in the past I was concerned that I wouldn't be able to recieve care and treatment again. The team have been so supportive and non judgemental. I don't know what state I would have been in now if i had not been treated with such respect and ditgnity as they have shown me.. ”

A service user regarding Rharian Fields

Part 3



How NAViGO performed on Quality last year – 2014-15

Part 3 of the Quality Account evaluates NAViGO's overall performance in 2014-15. This includes a review of whether or not NAViGO achieved the priorities set in the previous year's Quality Account.

Achievements over the past 12 months are subsequently discussed, which contribute to improved quality for service users.

Performance on Quality Account Priorities for 2014-15

Figure 1.9 reviews the performance of last financial year (March 2014 to April 2015) and summarises NAViGO's performance against the quality priorities set in the previous year using a traffic light rating system. Green meaning objectives were fully achieved, amber meaning objectives almost achieved whilst recognising there is still work to do, and red meaning there is significant work still to do to realise objectives.

Theme	Objective	Actions achieved	Outcome	Achieved?
Service user Safety	To ensure 90% of inpatient discharge summaries for NAViGO are received by the service user's General Practitioner (GP) within 24 hours of discharge.	<p>This was a local CQUIN for NAViGO in quarter 2, 2014-15.</p> <p>NAViGO met the 90% target for the CQUIN. 88 out of 92 (96%) of all discharge summaries in quarter 2, 2014-15 had been sent to the GP within 24 hours.</p>	<p>Although NAViGO did achieve the CQUIN target of 90% in quarter 2, 2014-15, not all discharge summaries were sent to the GP in 2014-15, and although NAViGO is sharing information, it is recognised that more work needs to be done in order to meet the 100% target.</p> <p>Following this, NAViGO is taking the following actions to improve communication.</p> <ul style="list-style-type: none"> The Performance Team continue to monitor the discharge summaries to ensure all are completed and sent within 24 hours. A window is currently being developed for the electronic patient record (Silverlink), which will allow staff to input information for the discharge summary directly into Silverlink. This will save staff time scanning paper forms into Silverlink. Guidance and data quality reports will be created for the window when completed, to ensure discharge summaries are completed correctly and sent to the GP in a timely manner. 	
Theme	Objective	Actions achieved	Outcome	Achieved?
Clinical Effectiveness	To evaluate patient rated outcome, service user experience feedback and peer review feedback by team/individual worker where appropriate	All service users eligible for Payment by Results (PbR) complete a Patient Rated Outcome Measure (PROM) at admission, discharge and any reviews in	NAViGO has achieved this through continually monitoring themes in service user surveys, complaints and feedback and working towards freeing time up for workers to concentrate more on service user care.	

	<p>and incorporate any actions for improvement or positive results into annual personal development reviews.</p>	<p>between. PROM improvement by the service user's worker is regularly discussed at clinical infrastructure meetings and is available for service managers to look into and identify any training needs for workers.</p> <p>Communication within NAViGO was a corporate objective in 2014-15 which fed into individual staff members' annual personal reviews, NAViGO held a 'no email day' in February 2015 to promote more effective face to face and non-verbal communication between workers.</p> <p>A surveys group was set up in 2014-15 which had representation from the service user forum and service level managers, to discuss comments and themes from service user surveys and complaints. An action plan was created from the group and this is regularly monitored.</p> <p>NAViGO won a bid for mobile working, which allowed a pilot of 10 workers to trial using laptops out in the community, so the workers could spend more time on seeing service users face to face. Regular contact reports are also produced to monitor workers.</p>		
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Theme	Objective	Actions achieved	Outcome	Achieved?
Service user Experience	To perform in the top 25% of mental health providers for the friends and family test where service users are asked whether they would recommend NAViGO to friends and family.	<p>NHS England required mental health services to submit their Friends and Family service user data nationally from January 2015.</p> <p>NAViGO has submitted two returns for this so far this financial year (for January and February 2015), NHS England only released the January 2015 data so far, therefore NAViGO can only compare the month of January 2015 against other mental health providers.</p>	NAViGO performed in the top 14% (5th out of 35 providers) of all Mental Health services who submitted data nationally and also performed above the national average in January 2015.	

Figure 1.8

Achievements across the service in 2014-15

NAViGO has had another busy year. Many more developments have been made to a service which is flourishing, guided by what its members and service users want. These are detailed below and on the following pages by service area.

NAViGO won Social Enterprise of the Year

Following on from 6 previous national awards, such as national Health and social care award, HSJ public service of the year, NAViGO won **Social Enterprise** of the Year 2014 at the Enterprise Yorkshire and Humber Awards. The award recognises the most dynamic and innovative **social enterprise** of the region. It is another fantastic reward that recognises the creativity and passion of NAViGO staff. NAViGO is one of 180,000 **Social Enterprises** in the UK alone, contributing a massive £24 billion to the economy.

NAViGO's focus is on tackling local social issues and mental health within the community and the fact that all of the profit NAViGO generates is reinvested either back into the service or the community means NAViGO is a community-focussed, not-for profit organisation.

NAViGO's community membership offers local service users, **carers** and those with a genuine interest in mental health to actively be involved in NAViGO. The fact that everyone has equal voting rights means the local community really do have a say in crucial matters. NAViGO provide training and employment opportunities through **Tukes**, to people who have little or no previous training, qualifications or work experience due to mental health problems or learning disabilities.



NAViGO inpatient areas rank in the top 20% in the country

NAViGO inpatient areas scored in the top 20% of all mental health trusts in the country in the **Care Quality Commission (CQC)** Mental Health Inpatient Survey 2014.

The survey takes place annually and the 2014 survey questioned service users who had an inpatient stay of at least 48 hours between 1st July 2013 and 31st December 2013.

Service users were asked about the care and treatment they received while they were an

inpatient.

NAViGO performed well on questions relating to staff making service users feel welcome on the inpatient ward/lodge, the cleanliness of the inpatient area, the fact that they were listened to and respected by consultants and staff and having the phone number of someone from NAViGO that service users can phone out of office hours when they are discharged.

Improving Access to Psychological Therapies (IAPT) for people with Long Term Physical Health Conditions

NAViGO's Improving Access to Psychological Therapies (IAPT) service was awarded a two year grant in 2012 from the Burdett Trust to develop integrated pathways for people with chronic obstructive pulmonary disease (COPD) and was awarded further funding by North East Lincolnshire Clinical Commissioning Group (NELCCG) until March 2015.

In line with evidence for talking therapies in long term conditions (Kings Fund, 2012), pathways were developed for assessing and treating depression and anxiety; integrating **cognitive behavioural therapy (CBT)** with acute and community COPD services. In addition to individual CBT, group sessions on depression and anxiety were being delivered as part of the Pulmonary Rehabilitation (PR) programme and cardiac rehabilitation (the service had been extended in the last 18 months to include cardiac referrals for heart failure).

Results showed significant improvements in mental health, quality of life, functioning, physical health outcomes and patient experience. 382 people have been referred for individual CBT and a further 284 attended the group sessions for pulmonary and cardiac rehabilitation groups up to September 2014. Results from the Work and Social Adjustment Scale (W&SAS) which measures functioning, similarly indicated that 91% of people had

an improvement in their scores, particularly in the 'social leisure' and 'home management' components.

The existing service has achieved statistically significant reductions in preventable hospital admissions, bed days and A&E attendances of around £110,000, as well as estimated reductions in GP visits, medication and social care costs.

The service is now expanding into primary care; this will start with the service taking referrals for COPD, heart failure and also developing services for people with diabetes in practices with the highest deprivation scores, as evidence indicates that there is a strong link between deprivation, long term conditions and co-morbid mental health problems. This will also address some of the health inequalities in health care that have been identified for service users in deprived areas of the community. The second expansion will see the service integrate talking therapies into the Advanced Community Care (ACC) teams that work with the top 2% of complex service users who make up 54% of secondary care costs in terms of emergency admissions in North East Lincolnshire. This second expansion will gradually be rolled out and the service has just recruited two more therapists which doubles the size of the team.

Update on Grimsby Offender Liaison and Diversion (GOLD) service

NHS England created the first Liaison and Diversion service national service specification, which reflects the need for services to provide a consistent approach across England, and focuses on, among other things, ensuring a service is provided at all times to reflect demand. The national service specification is currently in draft and is being trialled by a selection of NHS Trusts in England, but it will be used by commissioners to assure services users and the public of the quality of services in future.

In line with the specification, the NAViGO Grimsby Offender Liaison and Diversion (GOLD) team has begun providing an out of hours service (4pm – 8am Monday to Friday and weekends) to the local Grimsby Police

Station for when people present with a mental health need, as this was identified as a further improvement to the quality of the GOLD service. This out of hours service currently focuses on advice, but from 1 May 2015, the GOLD team will also provide an assessment service out of hours.

The GOLD team has also employed its first substance misuse worker as part of the follow up service. The worker will try to engage people who offend after misusing substances with appropriate drug and alcohol rehabilitation services to prevent re-offending and therefore improve their quality of life. This will also reduce pressure on the GOLD team and the local police service.

Older People's Memory Service Retain Excellent Rating

The English National Memory Clinics Audit 2013 demonstrates that the provision of memory services in England varies widely from place to place, with large variance in waiting times, capacity, involvement in research and provision of post-diagnostic interventions. People being assessed for dementia therefore receive a very variable service depending on where they live in the UK. North East Lincolnshire Memory Clinic, run by the NAViGO Community Health

Older People's innovative award

Congratulations to the Older People's team who won the 'Excellence in Dementia Care category' at the Independent Specialist Care Awards in March 2015. The award is one of the most highly regarded accolades available in the UK health and care sectors and is run by healthcare experts LaingBuisson. The award celebrates the most innovative and effective practices within healthcare.

Janine Smith, NAViGO's Senior Operational Manager for the Older People's Service commented:

"It is a wonderful achievement... and we are all incredibly proud to be recognised for the creative ways we work. The Older People's Service is a perfect example of how NAViGO have changed the face of service delivery within healthcare and we will continue to work towards offering specialist healthcare with a difference."

and memory Service, secured another "excellent" rating from the Memory Services National Accreditation Programme, performing in the top 3 national accredited memory services for compliance with standards, and placed first in the country for waiting times from referral to first assessment..

"It is a wonderful achievement... and we are all incredibly proud to be recognised for the creative ways we work. The Older People's Service is a perfect example of how NAViGO have changed the face of service delivery within healthcare and we will continue to work towards offering specialist healthcare with a difference."

Janine Smith, Senior Operational Manager



offering
specialist
healthcare v
a difference

“ The entirety of the staff appeared to be genuinely and deeply, caring and professional. ”

A service user regarding Pelham Lodge



Meridian Lodge, Harrison House

Achievements in Adult Acute services

NAViGO's Adult Acute team achieved great success in 2014-15 achieving over 99% compliance in the Accreditation for Inpatient Mental Health Services (AIMS) inspection which provided an "excellent" rating. AIMS is a standards-based accreditation programme designed to improve the quality of care in inpatient mental health wards. Inpatient services at Harrison House in Grimsby went through a comprehensive process of review, which identified and acknowledged high standards of organisation and service user care.

NAViGO's Adult Acute team also reduced the number of crisis referrals from police in 2014, as part of a national drive to improve the care and support service users receive when in crisis. The Mental Health Crisis Care Concordat, which is a national agreement between services and agencies involved in the care and support of people in crisis and sets out how organisations will work together better to make sure that people get the help they need when they are having a mental health crisis.

The police were one of the highest referring organisations to the Adult Acute crisis team. Staff found that the high volume of crisis referrals via the police was detracting from service user care on the inpatient lodges. The Acute Service Manager and a representative

from Humberside Police completed training with Incident Response Officers alongside NAViGO staff members to provide education on what constitutes an appropriate crisis referral in an effort to reduce the number of referrals made to crisis and direct these referrals to the correct service. Additionally, police began contacting NAViGO to request relevant service user information prior to making a referral in order to determine the best course of action to take.

As a result of this training, which took place in August 2014, the number of crisis assessments referred by the police fell by 29% at the end of 2014. This equates to a saving of approximately 80 crisis assessments per year.

The police are now more likely to identify a person in crisis; people are no longer brought to the acute lodges for an assessment when they have no mental health need and crisis staff members are able to spend more time supporting the service users whose presentations meet the acute criteria.

Tukes continue great work in training and work experience

Tukes has had another busy year in 2014-15, with thousands of hours spent on training and providing work experience to NAViGO service users, volunteers and people referred by the job centre, among others. 144 members, volunteers and people on work placements achieved qualifications in a variety of different subjects, 10 members and volunteers gained paid apprenticeships with CERT in customer service and administration and 18 members and volunteers gained employment in 2014-15, taking the total to 209 employed since Tukes was first set up in 2003.

One such example of a person, who gained

employment through their involvement with Tukes, is a member who joined in 2012 with low confidence. The member enrolled onto a life skills course, including English and Maths and progressed steadily. Working closely with a partner organisation – The Shaw Trust, the member utilised their skills and new found confidence developed through their involvement with Tukes to apply for, and secure a job in the recycling industry. The member, who has already begun their employment, is continuing with their life skills course with Tukes, and has said they "would recommend the Tukes experience to anyone".

“ I would recommend the Tukes experience to anyone. ”

Tukes Property Services (TPS) continue to provide work experience

Tukes Property Services (TPS) has been awarded a contract by Shoreline Housing to re-decorate 110 properties for re-housing local people, after initially being asked to re-decorate 10 properties. TPS have also completed the refurbishment of a local Dental practice, including plastering, decorating, and plumbing.

Following on from the success of working with local company Lincs Inspire last year, TPS were also awarded the contract to re-decorate the Bradley Football facilities in Grimsby by Lincs Inspire again this year and received excellent

feedback from for the works completed. Tukes volunteers and members received football coaching as an incentive.

All contracts will provide members and volunteers with real life work experience and will help them learn a trade while improving their skills in confidence and customer service and hopefully help in gaining employment.

Rharian Fields receives 'excellent' Quality standards for Eating Disorder units (QED) accreditation

Rharian Fields, NAViGO's Specialist Eating Disorder Service, has achieved an accreditation of excellent in the recent Quality standards for Eating Disorder units (QED) review after receiving incredibly positive feedback from the initial assessment. Overall, Rharian Fields met 98% of expected standards that included factors such as environment and facilities, service user and carer questionnaires and training.

QED is a standards-based accreditation programme designed to improve the quality of care in Eating Disorder inpatient wards, all eating disorder units are required to achieve accreditation. The report highlighted aspects of the service that stood out as areas of achievement and the team of staff, in particular were given consistent praise for their wide skill-set and active involvement in day-to-day activities.

It was noted how unified the team are in the way they work together and this was reflected in the respect they showed each and service users. It was stated that staff encourage openness and honesty whilst acknowledging that a service user's journey will not be perfect, which altogether promotes a greater chance of recovery.

Rharian Fields was applauded for its strong and varied programme of activities and therapies as well as for excellent resources available for crafts and activities. Innovative support methods, such as every service user leaving a letter of support on discharge in their bedroom for a new service user were highlighted. A poster painted by an ex-service user in front of the scales reminds the person being weighed that the numbers on the scales can't tell them anything about their value to other people or their positive qualities as a person.

The summary highlighted the active involvement of service users in their recovery and also the desire to help others who suffer with the same illness. Carer involvement is also encouraged and comments from carers were incredibly positive and said they felt very involved and were happy to express their views.



“ The service is very tailored to your individual needs - you're not just treated as an eating disorder. ”

A service users regarding Rharian Fields.

Staff Survey and Health Service Journal top ten place to work

As a provider of NHS services, NAViGO is required to undertake an annual staff survey. The NHS Staff Survey is recognised as an important way of ensuring that the views of staff working in the NHS inform local improvements and input into local and national assessments of quality, safety, and delivery of the NHS Constitution.

Official results published in December 2014. This year, again most of the results were great with NAViGO scoring top national scores in a staggering 65% of the categories. Year on year the survey shows higher rates of compassion, commitment and understanding of what is required.

These excellent results are supported by the accolade that the Health Service Journal (HSJ) rated NAViGO in the Top 10 Best Places to Work in Healthcare in September 2014.

In association with NHS employers, the HSJ aim to celebrate the 100 best acute trusts, community trusts, clinical commissioning groups and mental health trusts to work for the English NHS. It searches for employers that showcase commitment from its leaders, who

engage their staff and support innovation and aims to provide them with information they can use to identify where improvements could still be made.

The HSJ and Best Companies Group work together to analyse organisations on factors such as working environment, training and development, corporate culture and communications, and leadership and planning.

NAViGO has been recognised for being uniquely 'owned' by its membership, consisting of staff and community members, including service users and **carers**, all with equal voting rights. NAViGO was also recognised for its Rising Star programme offering staff at every level the chance to join a management development programme and the fact that any surplus the non-profit body makes is reinvested in local services.

Read the summary document of the staff survey results here:
<http://navigocare.co.uk/data/uploads/publications/navigo-staff-survey-results-2013.pdf>

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 someone who looks after their relatives or friends on an unpaid, voluntary basis, often in place of a paid care worker.

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.

High Quality Care for All

A national report published on 30 June 2008, resulting from a year-long review of the NHS, led by health minister and surgeon Lord Darzi. High Quality Care for All sets out the government's approach to health policy, focusing on quality outcomes for service users rather than the speed of delivering the service. It encompasses three key areas for measuring quality: service user outcomes and experiences and clinical outcomes which come under the headings of 'service user safety', 'service user experience' and 'clinical effectiveness'.

HealthWatch

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.

Service user and carer's Forum

The Forum is for mental health service users and carers in North East Lincolnshire to have a say in the planning, development and monitoring of local mental health services.

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.

North East Lincolnshire Clinical Commissioning Group (NELCCG)

If you require this leaflet in another format please ask an English speaking relative to contact PALS on (01472) 583 040. (Include this in other languages).

Copies of this Quality Account can be obtained from our website <http://www.navigocare.co.uk/index.php?id=providing-quality-services> and the NHS Choices website <http://www.nhs.uk>

Printed copies can be obtained by contacting the Corporate Affairs team via:

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Service user and carer Forum

