



Best care by the best people

NELFT CQC Improvement plan

January 2024



CQC Inspection activity 2023

- NELFT has retained a rating of Good following the 2022 Well led inspection which also comprised of short notice announced inspections of acute wards for adults of working age, psychiatric intensive care units, mental health crisis services and health-based places of safety. They also carried out a focused inspection of specialist community mental health services for children and young people in Kent.



CQC Recommendations

- Following the 2022 Inspection there were a total of 2 new MUST do recommendations and one existing MUST do from the previous inspection and 28 new Should do recommendations.
- All recommendations were added to the Trust's risk register for organisational oversight monitoring and progression
- Currently only 1 MUST do recommendation remains open for Kent specialist mental health services for children and young people
- 2 Trust wide recommendations (split into 3 Directorate risks)
- 4 recommendations for the Acute mental health wards for adults of a working age.



Progression of MUST Do's

“The Trust must ensure that systems to identify and address changes in risk for young people who are waiting are consistently applied across all teams – relating to neurodevelopmental pathway (Regulation 12 (1)(2)(a)(b))”.

- Significant progression has taken place in 2022 and 2023
- The Quality Safety Committee, Trust Board and CQC are well sighted on the system wide challenges that impact upon the closure of this risk.
- Only one action now remains out of the 22 initial actions that relates to the neurodevelopmental pathway waiting list.
- Work through a dedicated project group continues to address the remaining waiters, caseload stratification has been undertaken, communication is in place for those on waiting lists, an online referral form with additional information for effective screening has been introduced, locality reviews and assessments by both locality consultants and neurodevelopmental consultants.
- System wide workstreams have commenced with all Kent providers to develop a new shared clinical model around ADHD/ASC assessments and to continue the work around long waitlists. This includes services are working with the ICB including using a multidisciplinary approach between health care providers, targeting early support packages of care in collaboration with schools and the primary care networks.



Progression of MUST Do's

The Trust must ensure that staff complete all mandatory training (Canterbury and Maidstone) (Regulation 12(2)(c)).

- Risk was closed in July 2023
- Local basic life support and clinical moving and handling training sessions have been put in place locally.
- Training compliance is monitored weekly by the leadership team and follow up action taken around any changes in compliance by the service leads.
- Training for the Kent teams has been maintained constantly above 85% and organisationally 90%

The Trust must ensure that systems to identify and address changes in risk for young people who are waiting are consistently applied across all teams (Regulation 12 (1)(2)(a)(b)).

- Risk was closed in July 2023
- A standard operating procedure and multidisciplinary process is in place across all teams for identification, discussion, escalation and management of changing level of risk. Any risk assessment that does not meet compliance standards are captured via the trust's quality dashboard.



Progression of Key Trust wide recommendations and organisation developments

- During 2022 and 2023 significant work has taken place around several key areas within the Trust further progressed as part of the CQC Improvement plan and should do recommendations.

These include:

- Quality Improvement
- Staff engagement with Mental Health Transformation
- Co-production and service user involvement
- Recruitment and retention
- Supervision and Appraisal compliance



Quality Improvement (QI)

The Trust should ensure that following the pandemic, QI is reinstated across the Trust.

- Risk Closed in July 2023.
- A total of 1075 new staff (since April 2023, launch of 3year QI strategy) have had a QI awareness session
- A total of 139 existing staff (since April 2023) have completed the half day QI foundation training – training and tools to start approaching problems using QI.
- A total of 9 existing staff (since April 2023) have completed the QI facilitation training – real world application through a QI project and share learning to help others in their teams use QI to approach problems.
- Trust wide sharing and learning event celebrating improvement work has resulted in QI projects being presented at every trust board and also every quarter at the trust's all staff webinar. From 2024 each directorate will have their own QI sharing and learning event at least once a year.
- Each directorate has a nominated improvement advisor from the QI team to help with any training, project advice as well as sharing and learning events.
- Since April 2023 there are currently 92 active QI projects with support from the QI team. Ongoing work is progressing with the patient involvement and experience team, to develop a model that will enable users of service to be involved in, lead and contribute to QI projects across the Trust.



Quality Improvement initiatives Barking and Dagenham(QI)

Recent QI Initiative projects include:

- Barking and Dagenham Integrated Children's Service – resulting in a reduction in the number of complaints about the service from an average of three per week to zero
- The B&D Adult Autism service as part of the QI collaborative being run by the National Collaborating Centre for Mental Health at the Royal College of Psychiatrists – aim of the project is to increase the discharge rate following specialist assessment.



Co-production with users of service

The Trust should continue its work in developing new patient participation structures in each locality.

- **Risk Closed in July 2023.**
- Monthly Strategic Patient and Carer experience partnership group meetings now in place attended by Integrated Care Directors of each directorate who provide feedback on the co-production occurring in each directorate and with external collaboratives.
- Young people's network has been set up with regular network meetings.
- Patient Partner advocate roles in place and have been recruited to.
- Integrated patient and carer experience partnership (IPCEP) groups now have now been formed in each directorate.
- T&F group to review and ensure the patient experience strategy is co-produced.
- Several engagement events across all localities during 2023 included in these were a number that were delivered in collaboration with key partners.



Recruitment and Retention

The Trust should ensure work continues around Recruitment and retention in Kent CYPMHS/Medway and continue its work to recruit to vacant posts in the MH Acute inpatients.

- **Risk Closed in July 2023.**
- From June 2022 to date the Acute Rehab Directorate (ARD) initiated continuous recruitment, successfully filling 101.1 vacancies within inpatient mental health wards.
- There are several initiatives in place to support recruitment of posts through Just R campaigns and retention of staff through an appreciative inquiry pilot.
- There has been an increase in applications in Kent in the past three months which has resulted in three appointments and four additional posts at interview stage.

Ongoing recruitment and retention remains a risk for the Trust. Actions in place to address this include:

- Dedicated retention and recruitment group
- Trust-wide recruitment and retention plan, including the Zero Vacancy initiative.
- Successful international recruitment programme (22 nurses placed in MH Inpatients)
- Recruitment events



Supervision and Appraisal Compliance

The Trust should ensure staff receive regular supervision and appraisals and these are recorded on STEPS.

Separated into 3 risks relating to directorates.

Significant improvement has been made in compliance throughout the Trust.

- Barking and Dagenham Directorate above the Trust standard of 85% for appraisal and 75% for supervision with a trajectory in place to meet compliance.
- Weekly monitoring of appraisal and supervision compliance is now in place through a Quality Dashboard which Heads of Service use to support appraisal with the operational managers. Monthly monitoring for assurance continues through leadership team and Assistant director meetings.
- New supervision software tool STEPS implemented.
- Supervision guidance refreshed and available for all staff.
- Video examples for staff available, updated web pages and user guides, direct support to managers and staff, Power Bi reporting



Staff involvement in MHS Transformation

- The Trust should ensure that all staff are supported to engage in (mental health) transformation programmes that affect their teams.
- Closed in July 2023
- Ongoing staff engagement work has continued in 2023.
- Task and finish groups were implemented for Transformation
- Co-production workshops regularly attended by users of service, carers and staff.
- MH Transformation Newsletters are produced and shared.
- MH Transformation Intranet and webpages were set up and updated.
- Regular Programme Delivery Group Meetings are in place and attended.



Acute MHS wards for working age adults

There are currently 3 remaining recommendations:

The Trust should ensure that all wards promote a therapeutic environment by maintaining good standards of decoration, cleanliness and maintenance.

- There is a dedicated programme of works underway to progress this recommendation, on track for completion date 29.02.24 and an ongoing process in place to promptly address any ongoing concerns.

The Trust should ensure planned works to extend patient call alarm system are progressed and call alarms in young people's bedrooms (Brookside).

- This is being progressed with a completed completion time frame of end of March 2024, in the meantime mitigations remain in place to ensure the safety of patients whilst waiting for the installation of call alarms.

The Trust should ensure that recognised ratings scales are used to help assess patient outcomes.

- The Trust is rolling out Dialog across all acute mental health wards of working age and psychiatric intensive care and a project manager is supporting wards with the implementation which is expected to complete by end of February 2024.

It is anticipated these remaining recommendations will have closed by end of March 2024.



Monitoring of Improvement plan

- Monthly directorate CQC meeting where any matters arising to CQC are monitored including ongoing assurance regarding the CQC implementation plan.
- Assurance of embedding of actions continues to be monitored at a monthly CQC Assurance group meetings.
- Progress of the implementation plan is reported to the Quality and Safety Committee in line with the cycle of business.
- Audit cycles are in place to monitor compliance of actions relating to quality and patient safety and record keeping
- A monthly Quality support visit programme provides ongoing assurance around CQC compliance.



Quality Support Visits

- Embedding of ongoing CQC compliance continues to be monitored by NELFT's internal Quality support visit programme which is conducted using an assessment framework based on the CQC Key lines of enquiry Safe, Effective, Responsive, Caring and Well Led.
- Changes to the questions are being implemented to incorporate the new CQC quality statements and single assessment framework
- Teams are being encouraged to carry out their own self- assessment around quality and patient safety and CQC compliance.
- Actions from Board member visits to services are incorporated into the process.
- Associate Directors of Nursing & Quality support local changes from learning and embedding of ongoing CQC compliance.
- Quality support visits actions are monitored at NELFT's CQC Assurance group meeting and directorate level CQC monthly.
- Good news stories and areas of good and outstanding practice are identified as part of the visits and shared to the wider trust through and "All staff webinar" and communications briefing, the Trust's social media platforms and internet pages.

