



## TEWV 2016/17 Quality Account update for Tees Valley Partnership Health Scrutiny Committee

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## TEWV Geography



- TEWV's Quality Account covers the MH and LD services for County Durham, York and most of North Yorkshire as well as the 5 Tees Valley boroughs:



Key	
Main Towns	○
Main town and location of TEWV inpatient beds	●
<b>Durham and Darlington</b>	
County Durham	■
Darlington	■
<b>North Yorkshire</b>	
Scarborough and Ryedale	■
Hambleton and Richmondshire	■
Harrogate	■
<b>Teesside</b>	
Stockton	■
Hartlepool	■
Middlesbrough	■
Redcar & Cleveland	■
<b>York and Selby</b>	
York and Selby	■



## Quality Priorities

- Within the 2015/16 Quality Account the Trust agreed the following four quality priorities for 2016/17:
  1. Continue to develop and implement Recovery focused services;
  2. Implement and embed the revised harm minimisation and risk management approach;
  3. Further implementation of the nicotine replacement programme and smoking cessation project;
  4. Improve the clinical effectiveness and patient experience at times of Transition Monitoring Progress.
- 33 of the 35 actions within these 4 priorities are **Green**.
- 2 actions are **Red** for priority 3 & 4 (Transitions and Nicotine).

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- **Red action** - Training element of *Implement and embed the revised harm minimisation and risk management approach*:

- Target = train 3137 TEWV clinicians by end March 2017 (65% of the total clinical workforce of 4827 people).
- Between the 22<sup>nd</sup> July and the end of March 2017 we trained 2044 (42%) staff.
- We are extending the period in which face to face training will be provided and introducing e-learning from May 2017, to increase the proportion of staff who are trained.
- The primary barrier we have come up against in staff being trained is due to clinical capacity.

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**Red action** - Training element of *Further implementation of the nicotine replacement programme and smoking cessation project*.

- Target = train 75% TEWV community clinicians by end March 2017.
- During 2016/17 we have trained 10% community staff.
- We are extending the period in which face to face training will be provided to May 2017, to increase the proportion of staff who are trained.
- The primary barrier was due to increased time spent supporting inpatient services.

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## Green Quality Metrics

6 of our 9 Quality Metrics were reporting **Green** at the end of March 2017 (full year), they were:

● **Patient Safety Measures**

- Number of unexpected deaths classed as a serious incident per 10,000 open cases.
- Number of outbreaks of Healthcare Associated Infections.

● **Clinical Effectiveness Measures**

- Percentage of patients on Care Programme Approach who were followed up within 7 days after discharge from psychiatric in-patient care (validated).
- Percentage of clinical audits of NICE Guidance completed.
- Average length of stay for patients in Adult Mental Health Assessment and Treatment Wards.

● **Patient Experience Measures**

- Delayed Transfers of Care.

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## Red Quality Metrics

Tees, Esk and Wear Valleys **NHS**  
NHS Foundation Trust

3 of our 9 Quality Metrics were reporting **Red** at the end of March 2017 (full year), they were:

### Patient falls per 1000 admissions

- The Trust position for the period 1<sup>st</sup> April 2016 to 31<sup>st</sup> March 2017 is 64.32, which is 35.53 above target of 28.79. This relates to 399 falls during this period.
- Of the 399 falls, 120 related to people from Tees Valley; 90 (23%) were classified low with minimal harm (patient required extra observation or minor treatment) and 27 (7%) were reported as moderate short term harm (patient required further treatment).
- 60 were in MHSOP services, 19 in AMH services, 17 in FMH services, 6 in FLD services, 13 in ALD services and 5 in CYPS services for the falls relating to people from Tees Valley.

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## Red Quality Metrics

Tees, Esk and Wear Valleys **NHS**  
NHS Foundation Trust

### Average length of stay for patients in Mental Health Services for Older People Assessment & Treatment Wards

- The Trust position for 1<sup>st</sup> April 2016 to 31<sup>st</sup> March 2017 in MHSOP is 78.06 which is 26.06 above (worse than) target of <52 days. The median length of stay is 50 days.
- Of these, the longest length of stay for patients from Tees Valley was 1496 days. The Tees Valley mean length of stay was 74 days and the median length of stay was 52 days.

### Percentage of complaints satisfactorily resolved

- The end of year data indicates that 74.87% (48/191) of our complaint letters do not have requests from the complainant for further review/action by the Trust. This means therefore that there were 48 complaints where we had a follow up request from the complainant.

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## Quality Priorities for 2017/18

- Ensure we have Safe Staffing in all our services.
- Implement phase 2 of our Recovery Strategy (this will be a 3 year priority).
- Reduce the number of preventable deaths.
- Reduce the occurrences of serious harm resulting from inpatient falls.
- Improve the clinical effectiveness and patient experience in times of transition from Child to Adult services (second year).



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## Quality Metrics for 2017/18

- During 2016/17 a new TEWV Quality Strategy was approved.
- Includes a set of metrics to monitor progress.
- The Quality Metrics within the Quality Account will be replaced to align with the Quality Strategy for 2017/18.



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## Next Steps

Step	Timescales
Draft Quality Account circulated	13 <sup>th</sup> April 2017
<b>Deadline for responses</b>	<b>13<sup>th</sup> May 2017</b>
Quality Account submitted to Secretary of State	30 <sup>th</sup> May 2017
Quality Account Published	30 <sup>th</sup> June 2017
Quality Account included in Annual Report	July 2017



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