Leicestershire Partnership Trust Improvement Journey from 2018 CQC Inspection to Current Position February 2021
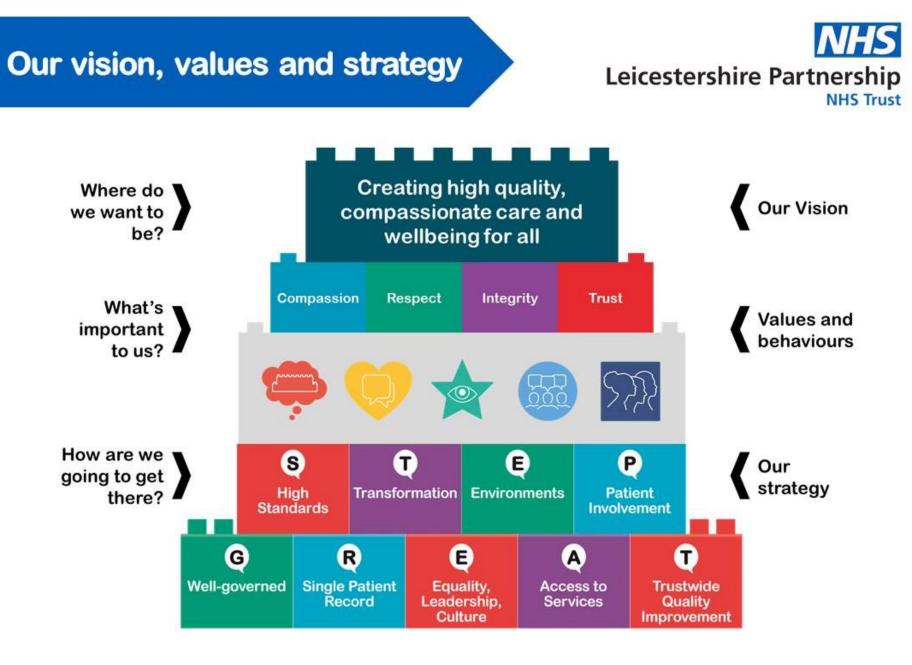
WeAreLPT

compassion respect integrity trust

www.leicspart.nhs.uk

Our vision, values and strategy

NHS
Leicestershire Partnership
NHS Trust

Where do we want to be? 〉

Creating high quality, compassionate care and wellbeing for all

〈 **Our Vision**

Compassion	Respect	Integrity	Trust

What's important to us? 〉

〈 **Values and behaviours**

How are we going to get there? 〉

S High Standards	**T** Transformation	**E** Environments	**P** Patient Involvement

〈 **Our strategy**

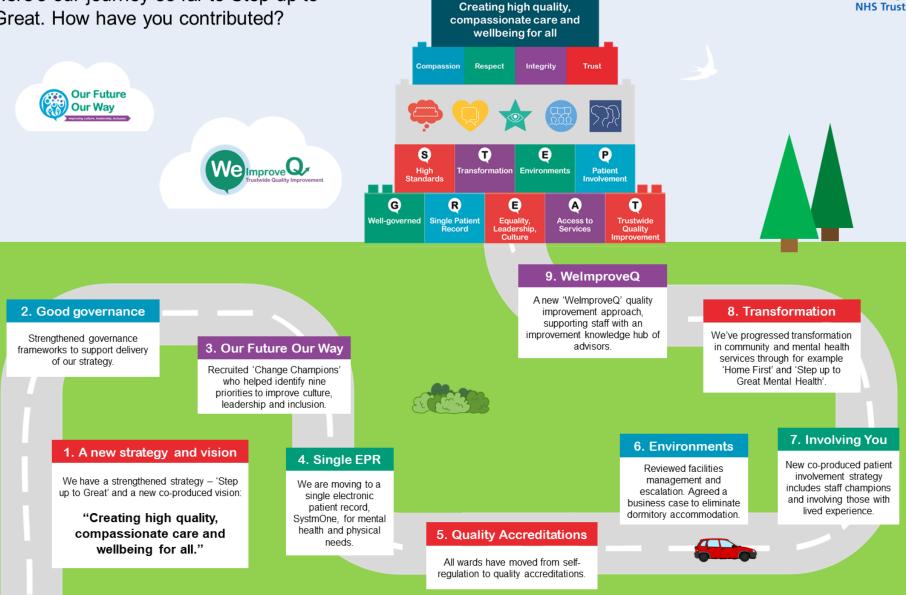| **G** Well-governed	**R** Single Patient Record	**E** Equality, Leadership, Culture	**A** Access to Services	**T** Trustwide Quality Improvement

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Our 2019/20 Highlights

Here's our journey so far to Step up to Great. How have you contributed?

NHS Leicestershire Partnership NHS Trust

Our Future Our Way
Improving culture, leadership, inclusion

We ImproveQ
Trustwide Quality Improvement

Creating high quality, compassionate care and wellbeing for all

Compassion	Respect	Integrity	Trust

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G Well-governed	**R** Single Patient Record	**E** Equality, Leadership, Culture	**A** Access to Services	**T** Trustwide Quality Improvement

9. WeImproveQ
A new 'WeImproveQ' quality improvement approach, supporting staff with an improvement knowledge hub of advisors.

8. Transformation
We've progressed transformation in community and mental health services through for example 'Home First' and 'Step up to Great Mental Health'.

2. Good governance
Strengthened governance frameworks to support delivery of our strategy.

3. Our Future Our Way
Recruited 'Change Champions' who helped identify nine priorities to improve culture, leadership and inclusion.

7. Involving You
New co-produced patient involvement strategy includes staff champions and involving those with lived experience.

6. Environments
Reviewed facilities management and escalation. Agreed a business case to eliminate dormitory accommodation.

1. A new strategy and vision
We have a strengthened strategy – 'Step up to Great' and a new co-produced vision:

"Creating high quality, compassionate care and wellbeing for all."

4. Single EPR
We are moving to a single electronic patient record, SystmOne, for mental health and physical needs.

5. Quality Accreditations
All wards have moved from self-regulation to quality accreditations.

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Improving standards of quality and safety

AIMS accreditations in MHSOP

Having great access to our services

Urgent mental health care hub

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Single electronic patient record

Involve our patients, carers and families

Creating the People's Council

Creating
Represent Difference
People
Respect
Voice Participation Transparency Diversity
Supportive Empowerment
Independent Real Compassionate
Developing Inclusive Independence
Inclusivity Listen Critical Friends
People-led Welcoming Council
Improving Aspiration
Continuous Change
Growth

Patient Involvement

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Our Priorities

Our staff, service users, volunteers and stakeholders have helped our change champions to identify 9 priority areas that we need to address to help us have the best culture at LPT.

Our Future Our Way
Improving culture, leadership, inclusion

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A clear vision
To create and own a clear vision that is supportive of and shows compassion towards patients and staff.

Leadership
To develop successful and supportive managers/leaders across all levels to have the right skills and behaviours that reflect our values.

Valuing one another
To ensure we communicate with compassion and respect to show that we value one another in everything we do.

HELLO

A clear Vision - Embedded into Step up to Great image and video, appraisal and external facing website.

Leadership - Launched behaviours framework and are measuring attendance at workshops, embedded into attraction, recruitment and selection, induction and appraisal.
Extended Senior Leadership Forum to Band 7's/
CUBE Feedback Model Session carried out, e-learning module coming in 2020, leadership review, consider a middle management forum.

Valuing One Another - Learning Lessons and Exchange Group, Leadership Behaviours, BAME Listening Events, Virtual Staff Support Groups, MS Teams Etiquette, CUBE Feedback Model, Career Aspirations in Appraisal, Bank staff included in annual survey 2020, bank staff check in's in process.
Next – Reward and Recognition Strategy and Email Etiquette

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Our Future Our Way
Improving culture, leadership, inclusion

Compassionate policies
To ensure our policies for staff and patients are compassionate, supportive, inclusive and that they are applied consistently and fairly.

Compassionate Policies - the following policies are currently up for review; disciplinary, bullying and harassment, sickness absence, grievance – staff group working on this.
Next - Behaviours and CUBE.

Meaningful data
To ensure we all collect and produce information which is meaningful and of high quality to continuously improve our ways of working.

Meaningful Data – Step up to Great – performance reports changed in line with new governance structures. Change Champion focus group commenced 10th November – more to come on influencing a cultural approach to meaningful data.

Remove silo working
To work collaboratively, learning and improving together as an efficient and effective organisation.

Remove Silo Working – Step up to Great impact, cross Directorate working evident through COVID and ICC, buddy organisational working, LLR systems working, new governance structures embedded, learning and lessons exchange group, standardised agendas, quality improvement

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No bullying
To take a Zero Tolerance approach to bullying behaviours, to speak up and support each other.

No Bullying – LiA undertaken, data gathered, Change Champion group formed to work on priority – policy change, CUBE feedback, provide middle managers development

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Blame-free culture
To create a blame-free culture built on trust, by actively listening, learning, caring for and valuing all staff.

Blame Free Culture – Sarah Willis and Tracy Ward kicked off this work 13th November, looking at what is already taking place across the Trust; the behaviours framework, compassionate policies, learning lessons exchange group, a just and learning culture supporting staff through incidents and taking a learning approach.

Supportive appraisals
To strengthen the quality of our appraisals as a fundamental aspect of staff feeling valued, supported and motivated.

Supportive Appraisals – New and updated appraisal launched.

We will be evaluating the impact with you in Spring 2021 – please get involved.

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LPT Champions of Race Equality

Our Response to:

- The Trust's CQC report published in February 2019 relating to the 2018 inspection
- Warning Notice to the Trust on the 30th January 2019

Phase One – Immediate Transactional actions

The Warning Notice key improvement areas identified were:

o   Access to treatment;

o   Privacy and dignity;

o   Environmental issues;

o   Care Planning / risk assessments;

o   Fire safety;

o   Medicines management / medical devices;

o   Seclusion environments and paperwork;

o   Physical healthcare;

o   Governance.

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CQC quoted improvements including

- Significant improvements to the environments at most wards
- Improvements in ligature risks, including thorough risk assessments by staff
- Improvements in assessing and monitoring the physical healthcare of mental health patients,
- Improved medicines management in all areas.
- Improvements in fire safety and the 'no smoking' policy at the Bradgate Unit,
- Improvements in seclusion documentation and seclusion environments.

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CQC quoted improvements including

- Improved patient privacy and dignity at the Learning Disability Short Breaks Homes,
- Significant reduction in waiting times of children and young people waiting for mental health assessments.
- An improved vision, strategy and priorities have been defined through our Step up to Great approach,
- Improved approach to sharing learning.
- Two external governance reviews to improve governance processes and structures within the Trust.

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Warning Notice re-inspection are

- Environmental improvements within the Bradgate Unit, I

- Roll out of medicines administration technicians

- Roll out of smoke-free wards at the Bradgate Unit

- Process of recording seclusion in line with the Mental Health Act code of practice including changes to documentation

- Improvement plans to address the long waiting lists

- The neurodevelopmental (ND) waiting list trajectory has been revised in the context of Covid.

- Autistic Spectrum Disorder (ASD) and Attention Deficit Hyperactivity Disorder (ADHD) pathways

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Phase 2 – to drive improvement

- A buddy relationship with Northamptonshire Healthcare NHS Foundation Trust

- The Trust also has support from NHS Improvement with a Transformation Director and over 90 change champions'

- On-going work with the national WRES team to address Equality and Diversity improvements

- A revised framework for greater patient involvement and engagement,

- Appointment of two external consultants who delivered reviews into our governance arrangements

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Phase 2 – to drive improvement

- Revised our Board Assurance Framework and Corporate Risk Register into a new Organisational Risk Register aligned to our Step up Great strategy.

- A significant governance journey over the last 18 months within the Trust which has resulted with improved clarity over the arrangements for the Corporate Directors and their deputies and teams.

- Strengthened the arrangements for committees and their various levels, roles and functions.

Phase 3 - embeddedness of changes

- Regular service led self-assessments against the CQC Key Lines of Enquiry
- Buddy Trust Peer Review against the CQC Key Lines of Enquiry
- Annual internal re-rate evaluation
- CQC led focus groups with staff
- Feedback from CQC focus groups
- On-going review of the embeddedness of previous actions

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Assurance and Governance

- Foundation of Great Patient Care meeting held weekly with a programme of deep dives.

- Heads of Nursing meeting held bi- monthly with DoN and CQC team.

- The Medicines Management Group and the Positive and Safe Group report to the Quality Forum and any risks are escalated to the Quality Assurance Committee.

- The Estates Committee reports and escalates into the Finance and Performance Committee.

- CQC actions an agenda item at Directorate meetings on a regular basis.

- Regular programme updates to the Strategic Executive Board.

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Assurance and Governance

- Activity/Highlight report produced weekly to the Strategic Executive Team.

- Evidence folders created on Teams to store and file evidence for board members and CQC inspection team.

- Dedicated CQC project team report directly to the DoN and to the Strategic Executive Team.

- A strategic risk on the organisational risk register (ORR number 5) 'capacity and capability to deliver regulator standards'.

Any Questions

Thank you!