

CARE PLUS GROUP QUALITY ACCOUNT 2015





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PART ONE

INTRODUCTION

1.1 Statement from the Chief Executive



Lance Gardner MBE Chief Executive

The year 2014-15 was one of consolidation and ensuring sustainability for Care Plus Group. Financially, in light of further austerity cuts in both health and social care we have remodelled and made further efficiency savings whilst continuing to meet service user needs. This is due in no small part to the excellent

work of our finance team and the Heads of Service who have worked tirelessly to ensure we perform within our means.

We have continued to secure our place as a cornerstone organisation within North East Lincolnshire. We have a seat on North East Lincolnshire Councils Strategic Partnership Board and we are the only care provider with a seat on the local Growth and Development Board and the Humber Local Enterprise Partnership Board. We are currently finalising a new legal structure which will bring together Care Plus Group, Northern Lincolnshire and Goole NHS Foundation Trust and NAVIGO into a single contracting entity to support the creation of a sustainable culture of care and public service across local providers. It is hoped to include primary care, GP out of hours and St Andrews Hospice into this partnership in the future. This is believed to be a ground breaking development in the UK and demonstrates Care Plus Groups commitment to ensuring sustainable services locally whilst at the same time contributing to the regeneration agenda of the area.

From a quality perspective, Care Plus Group has had a good year. On the NHS friends and family test we have seen improvement in the number of staff who would recommend us as an employer from 62.69% to 79.76%. Equally, on the question of whether staff would recommend us as a provider of care to their friends and family, we saw an impressive positive response of 94.53%. We were successful in the revalidation of both our ISO 9001 and ISO 27001 last year with our End of Life Services (Macmillan and Haven Team) added to our portfolio of services with ISO 9001 accreditation.

Our consistently high level of quality and performance is providing Care Plus Group with a growing and widening excellent reputation, which has resulted in us receiving 3 unsolicited approaches from national and international organisations seeking to work in partnership with us.

Having said all of this, we are, above all, not complacent and we will continue to strive for improvements in the quality of the care we provide no matter who the customer is, or the environment in which we perform.

PART TWO

2.1 Priorities for improvement & Statement of Assurance from the Board



Colin Childs Chairman

Care Plus Group Board are pleased to receive and approve the Care Plus Group Quality Account for 2015.

As a Board we recognise that the last year we've built on our strong commitment to quality. We have further engaged with our service users and have empowered

our front line staff in driving forward quality to ensure that our services are safe, effective, caring, responsive and well-led. All this has been completed whilst continuing to meet the challenges of ongoing efficiency savings.

The Care Plus Group Board remains focused on developing services from feedback via service users, volunteers and staff and ensures continuous improvement across the full range of health and social care services being provided. This year we have improved on our feedback mechanisms, and have introduced a new service user satisfaction questionnaire which will enable us to gather further information for areas for improvement. Whilst targets and activity are an important element in service delivery it is just as important that we continue to ensure patients are treated with respect, compassion and dignity at all times.

The Board would like to thank all staff within the organisation for their commitment for working to continually improve quality over the past year and their tireless on-going work to serve the local community.

We recognise that in order to continue to reduce health inequalities across the area, we need to foster and further develop relationships with other key partners across the area to streamline pathways of care.

As a board we are satisfied that the indicators contained in the Quality Account give a balanced view focusing on our successes as well as illustrating areas that have been identified for improvement during 2015/16.

We can confirm that the information contained within this report is true and accurate.

Introduction to our Quality Account

This Quality Account is Care Plus Group's annual report to the public and other stakeholders about the quality of the services we provide. It shows our achievements in terms of clinical

excellence, effectiveness, safety and patient experience and demonstrates that our managers, clinicians and staff are all committed to providing continuous, evidence based, quality care to those people we treat. It will also show that we regularly scrutinise every service we provide with a view to improving it and ensuing that our patients' treatment outcomes are the best they can be. It will give a balanced view of what we are good at and what we need to improve on.

Welcome to Care Plus Group

Care Plus Group is an organisation working in communities across North East Lincolnshire. We're a social business that provides adult health and social care services to people across North East Lincolnshire to help improve people's health and wellbeing and enrich people's lives.

Care Plus Group is a Community Benefit Society – any profit we make is reinvested back into the development and delivery of health and care services ensuring we can constantly evolve and develop the services we offer to our communities.

Care Plus Group provides services right across the communities of North East Lincolnshire, covering Grimsby, Cleethorpes, Immingham and the surrounding villages. Our services are diverse and are entirely about care and supporting those in need in our community. Care Plus Group Services include the following:-

- Community Nursing
- Rapid Response
- GP Out of Hours
- 24 hour triage service
- Discharge team
- Specialist Nursing
- Rehabilitation and Re-ablement/Nursing and residential care
- Palliative and End of Life Care Services
- Intermediate Care at Home and Crisis Response
- Community Learning Disability Services
- Intensive Support team
- Community Occupational Therapists
- Substance Misuse Services
- Falls and Chronic Obstructive Pulmonary Disease (COPD)
- Health and Wellbeing Collaboratives
- Employability Services
- Training
- services
- Transport
- Care Homes turnaround

2.2 Quality Priorities for improvement for 2015/2016



Care Plus Group continues to play a key role in the delivery of health and social care in North East Lincolnshire, working with our partners to ensure that services are personal to all individuals, meeting their specific requirements.

As in last year's Quality Account, Care Plus Group's priorities for the coming year have been grouped under the five quality dimensions reflected in the NHS outcomes Framework 2015/16. This allows us to demonstrate our goals, what we think and what we need to do to achieve these targets.

Quality Dimensions

- 1. Preventing people from dying prematurely
- 2. Enhancing quality of life for people with long-term conditions
- 3. Helping people to recover from episodes of ill health or following injury
- 4. Ensuring that people have a positive experience of care
- 5. Treating and caring for people in a safe environment and protecting them from avoidable harm

This year the Quality Account also splits our priorities between those agreed with our Commissioner and those identified as part of our own Strategic Objective Framework.

2.2.1 Strategic Priorities for improvement for 2015/2016

The following priorities have been identified as part of Care Plus Group's Strategic Objectives and form the SMART objective framework for 2015/16.

IDENTIFIED PRIORITY	DOMAIN
Customer Centred, High Quality Delivery	Preventing people from dying
	prematurely

	 Enhancing quality of life for people with long-term conditions Helping people to recover from episodes of ill health or following injury Ensuring that people have a positive experience of care Treating and caring for people in a safe environment and protecting them from avoidable harm
Growth and Sustainability	 Preventing people from dying prematurely Enhancing quality of life for people with long-term conditions Helping people to recover from episodes of ill health or following injury Ensuring that people have a positive experience of care Treating and caring for people in a safe environment and protecting them from avoidable harm
Accountable and effective Governance	 Preventing people from dying prematurely Enhancing quality of life for people with long-term conditions Helping people to recover from episodes of ill health or following injury Ensuring that people have a positive experience of care Treating and caring for people in a safe environment and protecting them from avoidable harm
Benefitting the communities we serve	 Preventing people from dying prematurely Enhancing quality of life for people with long-term conditions Helping people to recover from episodes of ill health or following injury Ensuring that people have a positive experience of care Treating and caring for people in a safe environment and protecting them from avoidable harm
Skilled people, proud to belong to care plus group	 Preventing people from dying prematurely Enhancing quality of life for people with long-term conditions Helping people to recover from

episodes of ill health or following injury
4. Ensuring that people have a positive experience of care
5. Treating and caring for people in a safe
environment and protecting them from
avoidable harm

PRIORITY ONE - Customer Centred, High Quality Delivery

Domain(s) - Preventing people from dying prematurely, Enhancing quality of life for people with long-term conditions, Helping people to recover from episodes of ill health or following injury, Ensuring that people have a positive experience of care, Treating and caring for people in a safe environment and protecting them from avoidable harm

Current Status – Care Plus Group have implemented the roll-out of the Friends and Family Test to Service Users. In addition there have been changes to the Service User Satisfaction questionnaire which now incorporates our 6C's, Friends and Family Test and our latest Service User Satisfaction. This has been rolled out within May 2015 and the organisation is now sending out questionnaires every month instead of every quarter to ensure that we have more timely and relevant feedback about our services.

Goal - As part of the strategic/SMART objectives an internal Customer Satisfaction rating of 90% has been set for achievement by 31st March 2016.

How we will monitor – All surveys are distributed and collated from a central base in the Quality and Performance Team to ensure transparency. The results are displayed on a quarterly basis and form part of the Performance Report. The results are also shared within the Trend report and will be shared on our external facing website.

PRIORITY TWO – **Growth and Sustainability**

Domain(s) – Preventing people from dying prematurely, Enhancing quality of life for people with long-term conditions, Helping people to recover from episodes of ill health or following injury, Ensuring that people have a positive experience of care, Treating and caring for people in a safe environment and protecting them from avoidable harm

Current Status – Care Plus Group has set a target of 5% income with a 5% net profit which will be delivered by tendering and expanding our services to other stakeholders. Care Plus Group is an organisation that continues to grow in a measured and appropriate way and ensures that service users are assured that their quality services will continue to be delivered with the added confidence in the stability of the organisation.

Goals – To generate an additional 5% income with a 5% net profit and also the delivery of planned efficiency savings.

How we will monitor – All of the above will be monitored as part of the strategic/SMART objectives with each designated lead providing a quarterly update.

PRIORITY THREE – Accountable and Effective Governance

Domain(s) – Preventing people from dying prematurely, Enhancing quality of life for people with long-term conditions, Helping people to recover from episodes of ill health or following injury, Ensuring that people have a positive experience of care, Treating and caring for people in a safe environment and protecting them from avoidable harm

Current Status – Implementation of the Duty of Candour on the 1st April 2015, Care Plus Group is committed to ensuring openness, transparency and candour throughout the

organisation and as part of the strategic/SMART objectives will undertake annual Audits to assess and assure the appropriate management of quality including complaints, SI's and Risk

Goals – Assess and assure the appropriate management of quality i.e. Complaints, SI's and risk. Implementation of Duty of Candour/Annual audit to assess and assure the appropriate management of complaints and SI's.

How we will monitor – All the above will be monitored via annual audits for the organisation.

PRIORITY FOUR - Benefiting the Communities we serve

Domain(s) – Preventing people from dying prematurely, Enhancing quality of life for people with long-term conditions, Helping people to recover from episodes of ill health or following injury, Ensuring that people have a positive experience of care, Treating and caring for people in a safe environment and protecting them from avoidable harm.

Current Status – Care Plus Group recognise that numerous stakeholders are involved in all aspects of services delivered and are keen to engage new working arrangements which will result in better care.

Goals – Introduce 5 new working arrangements resulting in better care. Continue with 8 positive press stories per quarter, 5 nominations for national awards per annum and representation at 1 international event per year.

How we will monitor – All of the above will be monitored as part of the strategic/SMART objectives with each designated lead providing a quarterly update.

PRIORITY FIVE – Skilled People, Proud to Belong to Care Plus Group

Domain(s) – Preventing people from dying prematurely, Enhancing quality of life for people with long-term conditions, Helping people to recover from episodes of ill health or following injury, Ensuring that people have a positive experience of care, Treating and caring for people in a safe environment and protecting them from avoidable harm.

Current Status – Care Plus Group value our staff with the highest regard and recognise they are our greatest asset. It is, important that they are fully appreciated and that their views are not only heard but taken on board.

Goals – Via the staff survey/Volunteer focus group:

- Staff survey do you feel that there is fair and effective leadership in place across CPG? 90% by 31st March 2016
- Staff Survey Are you able to introduce new ideas? 75% by 31st March 2016
- Staff survey and volunteer focus group do you feel listened to, appreciated and trusted? 90% by 31st March 2016

How we will monitor – All of the above will be monitored as part of the strategic/SMART objectives with each designated lead providing a quarterly update. The final results will be evidenced from the annual staff survey.

2.2 Commissioner Agreed Priorities (CQUIN's) 2015/2016

The priorities below are based on new goals identified within our CQUIN Framework and agreed with our Commissioners for 2015/16.

CQUIN	DOMAIN	LOCAL/NATIONAL
CQUIN 1 – Improving the quality of end of life care	 Preventing people from dying prematurely Enhancing quality of life for people with long-term conditions Ensuring that people have a positive experience of care Treating and caring for people in a safe environment and protecting them from avoidable harm 	Local
CQUIN 2 – Improve the quality of record keeping in Community Nursing Services alongside the development of electronic system	 Preventing people from dying prematurely Enhancing quality of life for people with long-term conditions Helping people to recover from episodes of ill health or following injury Treating and caring for people in a safe environment and protecting them from avoidable harm 	Local
CQUIN 3 — Evaluation of Rapid Service Users Non-Elective re-admissions	 Preventing people from dying prematurely Enhancing quality of life for people with long-term conditions Helping people to recover from episodes of ill health or following injury. Treating and caring for people in a safe environment and protecting them from avoidable harm 	Local

A CQUIN is a payment which rewards excellence in achievement by a percentage of funding.

CQUIN ONE – Improving the Quality of End of Life Care

Domain(s) – Preventing people from dying prematurely, Enhancing quality of life for people with long-term conditions, Ensuring that people have a positive experience of care, Treating and caring for people in a safe environment and protecting them from avoidable harm

Current Status – Newly defined CQUIN initial baseline to be established from Quarters 2 and 3. Over the last year continued improvement has been made in Palliative and End of Life Care services, we have increased the Specialist Palliative care provision to seven days which provides support to both community care homes, and within the hospital. Our Haven service which commenced in 2013 which supports people at home at their end of life, has been embedded and has supported 384 to die in the preferred place of care.

CPG remains part of the integrated approach to the delivery of the End of Life care strategy which has seen an improvement in more people dying in their usual place of residence and meeting their preferred place of care. Raising the profile of death dying and bereavement continues and CPG were requested to speak at a National conference on their use of social media in engaging the public in this matter.

Goals – To improve the quality of end of life care within Community Nursing Services by 80% by recording place of death, using the advanced care plan and achieving the place of death. **How we will monitor** – The CQUIN will be monitored by the CCG on a quarterly basis through the Care Plus Group Performance Report.

CQUIN TWO - Improve the Quality of record Keeping in Community Nursing Services alongside the development of electronic system

Domain(s) – Preventing people from dying prematurely, Enhancing quality of life for people with long-term conditions, Helping people to recover from episodes of ill health or following injury, Treating and caring for people in a safe environment and protecting them from avoidable harm

Current Status – A mobile working solution has been provided for clinicians within the Community Nursing Services this is improving the accuracy and completeness of performance and management information, enables contemporaneous data entry at the point of care, reduces the need for paper based records, allows the patient record to be updated quickly and enables more informed decision making at the point of care. Any incidents relating to record keeping are either logged within DATIX via an SI or an incident and these are monitored with action plans.

Goals – Improve the quality of electronic mobile record keeping with the Community Nursing Teams.

How we will monitor – The CQUIN will be monitored by the CCG on a quarterly basis through the Care Plus Group Performance Report also an audit of service users' documentation will be undertaken as a yearly audit.

CQUIN THREE – Evaluation of Rapid Nursing Team

Domain(s) – Preventing people from dying prematurely, Enhancing quality of life for people with long-term conditions, Helping people to recover from episodes of ill health or following injury, Treating and caring for people in a safe environment and protecting them from avoidable harm

Current Status – Newly defined CQUIN initial baseline to be established from Quarters 2 and 3.

Goals – To ensure that service uses attended to by the Rapid Response Service will be maintained at least for 28 days outside the Acute Service. Baseline to be set

How we will monitor – The CQUIN will be monitored by the Commissioning Support Unit on a quarterly basis through the Care Plus Group Performance Report.



2.2.3 Other Priorities for implementation during 2015/16

Performance Measure	Target	Current Status/ RAG rating
Expansion of Care Plus Group services accredited with ISO 9001:2008	To explore the potential and feasibility of expanding the portfolio of ISO 9001:2008 services within Care Plus Group whilst maintaining our current registration.	To explore this throughout the summer months of 2015. However the pending changes from 2008 to 2015 standard and subsequent implementation may delay any expansion.
Incorporating all service user survey's together including the 6C's leaflet and friends and family test	To distribute this on a monthly basis to gain further feedback from Service Users, including mystery shopping audits and patient participation feedback.	The revised questionnaire has been produced and printed. First distribution took place in May 2015. To continue to roll-out every month.

2.3 Participation in Clinical Audits

This part of the Quality Account focuses on the audits undertaken by Care Plus Group during 2015/16. For the purpose of the Quality Account these have been split between Clinical and Non-Clinical audits

2.3.1 Clinical Audits – 2014/2015

During 2014/15 the following Clinical Audits were undertaken by Care Plus Group.

AUDIT TITLE	Assurance Level at Time of the Audit	Comments	Current status
Glucometer Quality	Significant Assurance	Due to the development of a	Significant
Assurance		system to automatically	Assurance
Compliance Audit		record compliance levels, this	
2.		audit has been delayed until	
		the system is in place.	
		Instead the allocated project	

		team receive an update (which is collated via a	
		manual system) on	
		calibration levels. This has	
		returned improved levels of	
		compliance throughout the	
		year.	
Clinical Record	Not Applicable	This audit has been re-	Not Applicable
Keeping Audit		scheduled until later in	
		2015/2016 due to the roll-out	
		of improved mobile working	
		solutions for clinical teams	
		within Care Plus.	
		The mobile working solutions	
		will see the use of SystmOne	
		offline which will allow staff	
		to record electronic records	
		whilst in the community and	
		connect to the network when	
		in accessible WiFI areas. This	
		will reduce the need for some	
		paper records.	
		Once this is fully established	
		an audit will take place.	
TIME Pressure	Significant Assurance	Action plan produced and	Significant
Assessment Audit		identified areas for	Assurance
		improvement.	

2.3.2 Non-Clinical Audits – 2014/2015

AUDIT TITLE	Assurance Level at Time of the Audit	Comments	Current RAG Rating
PDR and Supervision	Significant Assurance	Action plan	Significant
Compliance Levels		produced and	Assurance
2.		identified areas for	
		improvement both	
		organisationally and	

		for individual teams.	
ISO 9001 Service	Significant Assurance	As part of the wider	Significant
Specific Process Audit		ISO 9001 process,	Assurance
(related to the		audits have been	7 lood a loo
		undertaken for all	
services listed below)		'in-scope' services to	
The Beacon		ensure their process	
Rapid		documentation is an	
		accurate	
Response		representation of	
 Intermediate 		the service.	
Care At Home			
 Telephone 		These have	
Triage		identified non-	
 Macmillan 		conformities and	
The Haven		opportunities for	
Team		improvement, which	
Tealli		have been actioned	
Staff File Audit	Limited Assurance	and monitored.	Limited Assurance
Stall File Audit	Lillilled Assurance	Action plan produced and	Limited Assurance
		identified areas for	
		improvement both	
		organisationally and	
		for individual teams.	
Complaint,	Significant Assurance	Action plan	Significant
Compliments,		produced and	Assurance
Concern and Query		identified areas for	7 100011 011100
Policy Audit		improvement for all	
Policy Addit		parties involved in	
		the complaints	
		process	
CAS Policy	Significant Assurance	Very high levels of	Significant
Compliance Audit		compliance shown	Assurance
		towards the CPG	
		CAS Policy	
National Audit of	N/A	Care Plus Group	N/A
Intermediate Care		participated in this	
		national audit,	
		however, there are	
		no localised actions	
A:		at this stage.	

During 2014/15 Care Plus Group put forward End of Life Services (Macmillan and Haven Team) for ISO 9001:2008 accreditation. In February 2015 an external accreditor from ACS

Registrars audited and inspected the services over a two day period with a final outcome of full accreditation.

Forward Plan of Audits for 2015/2016

The following audits have been scheduled for the next 12 months:

Clinical:

Clinical Record Keeping Audit

Glucometer Quality Assurance Compliance Audit

Community Nursing Specification Audit

NICE Compliance Audit

Non-Clinical:

PDR and Supervision Compliance Levels (annual)

Personal File Compliance Audit

Intermediate Care at Home Process Audit

Rapid Response Process Audit

Telephone Triage Process Audit

The Beacon Process Audit

Macmillan Process Audit

Have Team Process Audit

Sentinel Stroke National Audit

National Audit of Intermediate Care

Risk Management Audit

2.5 Proactive Response

Duty of Candour was published and all health providers were to comply with this legislation by the 1st April 2015. Care Plus Group welcomed and accepted the legislation and have implemented a duty of candour policy, a leaflet for service users and have added a Duty of

Candour section into all Serious incidents that occur within the organisation. Training is also provided for all staff who are involved in this process.

Care Plus Group recognises when something has gone wrong and will work with the service user and family/Carer to ensure they are involved within the investigation from the start to the finish. A key area of improvement which the organisation has been working on and will continue to work on is ensuring that all staff understand the incident reporting process and that patients understand the meaning of being open. We will continue to work on ensuring that staff are fully trained and that we are open and honest with service users.

2.6 What others say about Care Plus Group

Care Quality Commission (CQC)

The Care Quality Commission have introduced a number of new processes and regulatory standards which have been disseminated throughout the Care Plus Group including the Fundamental Standards, New Ratings and Provider Handbooks. The CQC Champions quarterly meeting is well attended and all champions feedback to their relevant teams.

The CQC have recently inspected The Beacon and Intermediate Tier Service. It is expected that all the other services within the Care Plus Group will be inspected within the next few weeks.

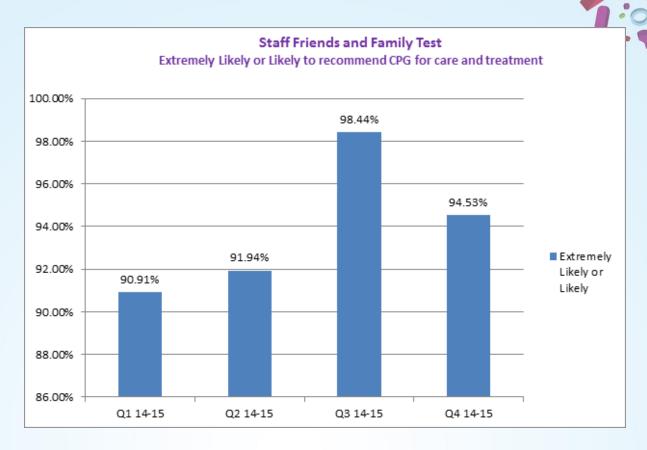
Staff Survey

In late 2014/15 Care Plus Group undertook its annual Staff Survey with a participation rate of over 50.00%. As per previous years, a full report has been produced and will be shared with all staff across the organisation. Within the report are some very pleasing results and comments given from staff about the organisation.

Below is a selection of results:

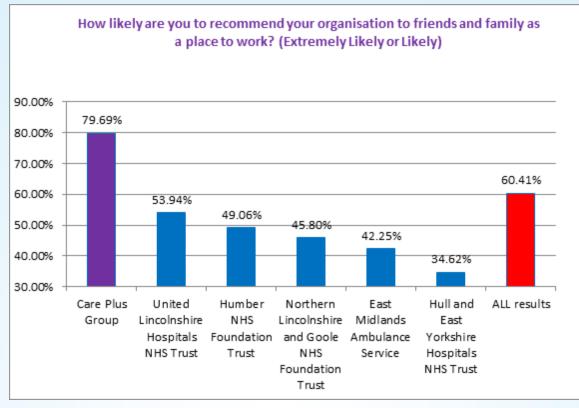
- 94.53% of staff said they would recommend Care Plus Group to friends and family as an organisation to receive care/advice from.
- 79.69% of staff said they would recommend Care Plus Group to friends and family as an organisation to work for.
- 97.39% of staff felt responsible for their performance.
- 93.21% of staff have confidence in the skills and commitment of their colleagues.
- 97.86% of staff felt that Care Plus Group treats patient/service users with dignity and respect.

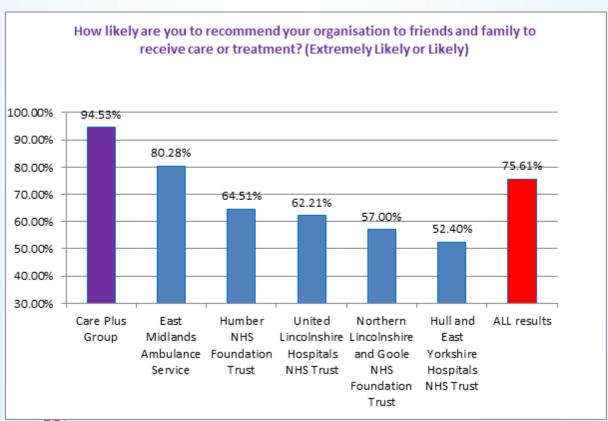
Below the graph displays the percentage of staff for each quarter last year who stated they would be either Extremely Likely or Likely to recommend Care Plus Group to Friends and Family:-



The below two graphs are a comparison which comes from the Quarter 2 NHS Staff Friends and Family Test submission to NHS England against the CPG staff survey for Quarter 4. The NHS staff survey (which is carried out in Quarter 3) does not carry the Staff Friends and Family Test. Quarter 4 2014/15 data for the overall returns for the Staff Friends and Family is not yet available at this stage.







Below are a section of comments from the staff survey:

"CPG is a good organisation to work for and I am glad to be part of it."

"I enjoy my work in CPG."

"I am proud to work for a fantastic organisation."

"Care plus is an excellent place to work. Everyone is trained to an excellent standard."

"I really enjoy working for the Care Plus Group and hope to continue my career here in the future."

Service User Experience

Each quarter a centrally managed Service User Survey is sent out to Care Plus Group Service Users to gather their opinions and ultimately use their opinions to improve services. Below are some examples of the opinions given:

"The lady was very helpful and I was very happy with the service" - Triage

"The quality of service provided to myself was excellent all round. The people at the Hope Street Clinic were really on top of the job as regards their patients and were really good to all concerned" – Respiratory

"I was very apprehensive of attending your services to help with my 'falls'. Having completed the course I benefit with excellent suggestions on how to manage my problem. Your staff were 'the tops' as indicated with my answers to your questions and wish all future patients the same good outcome" - Falls

"The nurses are kind and considerate. They make me feel confident and trusting in the care they give me, thank you" – Rapid Response

"Very happy with treatment from all staff would recommend" – Beacon

"Completed this form on mother's behalf. As a family, the total package from all group we have been involved with has been first class. So on behalf of my mother and family I thank you". – Crisis Support

"I receive a visit from a member of the community nursing team every 10/12 weeks. This has been provided for several years now. I cannot speak highly enough of the care they provide" – Beacon Medical

"The nurses that have attended my wife have been very polite and helpful when necessary. I am very grateful" – 360 Grimsby

My brother has a lifelong learning disability I feel he has been treated with the upmost respect. I don't think you could improve on this and I would like to thank you for that" – Churchview



"I could not complain about anything. Every nurse was so kind, friendly and helpful. I felt much better after their visit and a little friendly chat. Excellent Service.". – Clee Medical

"Really appreciated the fact that the girls were encouraging me to help myself but on my 'bad' days were always ready to help a hand 'extra'. An when I was really improving I was very much involved as the calls were decreased and assured that if I just couldn't manage on my own further help would be available. I am so grateful to them all as is my family". — Roving Nights

"Very nice know that someone is out there for you should you need help. Very friendly people". – IC @ Home

For 2015/16, Care Plus Group has made the strategic decision to increase the frequency of the distribution of Service User Satisfaction Surveys from a quarterly basis to monthly. This will not only meet the NHS England requirements for the Friends and Family Test but also allow for more up-to-date and relevant feedback to reach the organisation.

Comments, Complaints & Compliments

The Quality and Performance Team deal with all Complaints for the organisation and operates Monday to Friday 0900-1700, taking telephone calls in relation to complaints, compliments, queries and concerns.

All formal complaints are allocated to an Investigating Officer and a full investigation is carried out within a deadline agreed with the complainant, usually 12 weeks.

Complaints

During 2014/2015, a total of 27 complaints have been received. The main themes for complaints were:

- 1. Staff Attitude
- 2. Clinical Treatment

Staff Attitude was the main theme last year and continued work in relation to this is in progress. All staff have undertaken Dignity and Respect training aimed at front line staff and Conflict Resolution training is continuing to be delivered on an on-going basis and the number of the complaints relating to Staff Attitude has reduced from last year

All action plans within complaint reports are monitored by the Quality and Performance team and the Chief Operating officer. All reports are circulated to the Integrated Governance Committee to ensure that the organisation is reviewing and consistently improving service users' care/treatment. Reports are also shared within teams and at the Clinical Forum group to deal with reoccurring themes.

Compliments

Care Plus Group are inundated with compliments about the service we provide via telephone, letters, thank you cards, and through comments books at the various service bases.

Below are a small selection of compliments we have received:



"You helped me to face my worst fears. I am now in a safer place and taking small steps in reconstructing my life" – Macmillan

"fantastic, friendly and efficient team of workers, nothing ever too much trouble. At first I was very dubious as I am very independent but was put at ease right from the start" – Intermediate Care at Home

"You have shown great kindness to us all. Your professionalism and dedication showed no bounds. We shall never forget" – Community Nursing

"A massive thank you to the Crisis Team who has been coming to see my Dad for 1 ½ weeks. Nothing has been too much trouble for them, they are an absolute credit to the community. We in this area are lucky to have such a fantastic team" – Crisis Support

2.7 Data Quality

Data quality is essential in the delivery of quality care and Care Plus Group is committed to the continuous improvement of data quality within the organisation. Accurate and timely data also enables us to be clear on how we are performing and allows us to gain an overview of service activity and areas for improvement. Enhanced data quality supports the front line staff in their ability to deliver safe and effective care to Service Users, giving practitioners across the system confidence that the data that they access is accurate and up to date.

SystmOne is the clinical system primarily used by Health & Social Care organisations across North East Lincolnshire and is the clinical system of choice for Care Plus Group. To support the continued development and improvement of all the systems used within Care Plus Group we have an established System Optimisation Group. The Terms of Reference for the group are in delivering the following key requirements:

- 1. To facilitate optimisation of delivery through the use of technology in clinical and general systems through specific work programmes to support Care Plus Group's performance framework;
- 2. Communicate and disseminate information to all users to improve system use and to raise awareness of National and Organisational changes;
- 3. To champion and embed a culture of data quality within Care Plus Group ensuring that data quality is further recognised as everybody's business/role;
- 4. Identify IT, SystmOne and Recording and Reporting training needs;
- 5. Responsible for the ratification of Information Governance Documentation (excluding Policies) as delegated by the Integrated Governance Committee in line with the Care Plus Group Document Control Policy and support the Organisational compliance of Information Governance in line with the IG tool kit requirements.
- 6. Hold the responsibility in respect of supporting the effective delivery of Registration Activity for Smart Card use.

This in turn supports the CPG IG Toolkit Level 2 compliance, our Version 12 (2014/2015) has recently been approved at 73% compliance by the Department of Health.

Standardisation across Community Nursing Teams — Over the past year there has been a roll out of a mobile working solution to all Community Nurses across CPG. This work has enabled nurses to access the SystmOne data for their patients whilst out in the community and the ability to record into the client record without the need to dual record. The benefits of this arrangement are beginning to be realised. One of the most significant improvements has been that data is now uploaded into the live patient record much quicker than before with averages of 6 hours compared to a previous 15 hour average on updates being delivered. We also support the improvement of data quality by assigning a data analyst to the Community Nursing Teams, feedback is given directly to the nurses to show where they are not recording accurately and they are supported where changes need to be made. The nurses have given positive feedback about this support and the system is working well with errors continuing to reduce. As a collective, the nurses are regularly achieving 98% accuracy every month. A Personalised Assessment has also been rolled out at across the organisation to further improve data quality and standardisation.

Community Information Data Set (CIDS) - The introduction of CIDS provides national definitions for the data required to generate consistent person based data from care records, which should be used for reporting and to monitor and manage Community Health Service provision. The requirement for mandatory submissions has been deferred until September 2015. Care Plus Group are working hard to ensure that they are able to engage with a Data Warehouse Supplier to facilitate this reporting requirement.

PART THREE

3.1 Review of Quality and Performance Measures for 2014/15

Care Plus Group has strategic priorities in place which provides the framework for all governance processes for the organisation in order to support and monitor all areas of our business:



Performance measures were identified for Care Plus Group for 2014/15 and these all fell within one of the priority areas shown above. A quarterly report was produced for the Care Plus Group Board and Integrated Governance Committee as well as for commissioners. These reports illustrated where Care Plus Group was against the targets that had been set and detailed the achievements that were delivered.

For 2014/15, measures were highlighted within the Quality Account for closer scrutiny:

Identified Priority	Domain(s)	Year End Achievement
Customer Focused, High Quality Delivery	3. Patient Experience	Care Plus Group achieved extending the 6C's to two extra teams which included Macmillan and the Haven Team. The organisation scored an overall percentage of 96.77% for 6C's with the target being 85%. A target was set for an overall score of 90% for internal customer satisfaction score of 89.75% for 14-15.
Effective Governance	1.Patient Safety 2.Clinical Effectiveness 3.Patient Experience	Work has taken place in relation to removing staff identified unnecessary bureaucracy by Care Plus Group senior management. The introduction of identification and removal of red tape which involved: • overlap and duplication • insurmountable paperwork resulting in time delays on care • unnecessary or inflexible policies and regulations • lengthy delays in processing • inefficiencies in the system
		Completion of the annual complaints audit has been completed along with the SI audit.
Openness, Transparency and Candour	 Patient Safety Clinical Effectiveness Patient Experience 	Care Plus Group has developed a new service user feedback leaflet, containing information on how to make a compliment, concerns, complaints and Our Duty of Candour. An annual complaints report has been written for 2014/15 seeing a reduction within complaints. Care Plus has undertaken a Patient Participation Group within The Beacon however, was unable to

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ngagement 2.Cl	overall score for 14/15 be 96.77%. We encourage involveme organisation from all sectors.
ngagement 2.Cl	inical Effectiveness organisation from all sect
taff Value 1.Pa	the community. We are committed to ensuring the stakeholders can be involved have a say in shaping the deliver services. In May 20 organised a Community F at People's Park which was at promoting and raising awareness of the Health & care services that are available within North East Lincolns. There were over 60 organ involved on the day. Care Group are also involved in Healthy Lives Healthy Futuagenda who are looking a we can develop an improve health and care system the delivers safe, high quality affordable services for year come.

		 Staff would recommed to work the staff would recommed to work the staff would recommed to the staff w
		79.69% Yes / 20.31
Training and	1. Patient Safety	Care Plus Group achieved
Development	2. Clinical Effectiveness	all CPG staff trained within
Development	3. Patient Experience	Statutory and Mandatory
	3. Fatient Experience	competencies for 2014/15
CQUIN ONE – Friends	3. Patient Experience	Care Plus Group had introd
& Family Test	3. Fatient Experience	and implemented both the
a ranning rest		Patient and Staff elements
		Friends and Family Test ah
		the CQUIN 2014/15 Sched
		with both firmly embedde
		organisational feedback c
		For the staff element, our
		workforce consistently sta
		•
		they would either be extra
		likely or likely to recomme
		as a place to receive care
		treatment (over 90.00% throughout each quarter of
		year). Internally a SMART
		Objective was set of 75.00
		more of staff being extrer
		likely or likely to recommo
		Plus Group as a place to v
		From a figure of 62.69% in
		each subsequent quarter
		achieved scores over 75.0
		culminating in a Q4 score
		79.76%. Over the course 2014/15 96.54% of return
		Friends and Family Test fr
		patients stated they woul
		either extremely likely or
		recommend us for care ar
		treatment. All three of th
		elements compare incred
		favourably with nationally
		produced results for the F
		and Family Test.
COLUNITA/O NUIC	1 Patient Cafety	For the 5 month period
CQUIN TWO – NHS Safety Thermometer	Patient Safety Clinical Effectiveness	November 2014 – March 2
- Reduction in the	3. Patient Experience	we achieved against the ir
	3. ratient expendice	
prevalence of		target set of 1.00% each needs for Grade 3 Pressure Ulce
proceure ulcor		Tot Grade 5 Pressure Oice
pressure ulcer		Grade 4 Pressure Ulcers; t

•

		target was 2.01%, and we
		successfully achieved in 4 of the 5
		months, narrowly missing the
		target in January.
CQUIN THREE -	1. Patient Safety	Care Plus Group achieved CQUIN
Quality and	2. Clinical Effectiveness	3. All SI reports were submitted
Timeliness of Serious	3. Patient Experience	within the agreed timeframe and
Incident		all reports were graded as good
Investigations		or above.



PART FOUR

Statements from Health Watch, Overview and Scrutiny Committees and Clinical Commissioning Group

4.1 Comment from Health Watch

Thank you for asking Healthwatch to comment on your draft Quality Account 2015. We are pleased with the priority that Care Plus Group is giving to a clear voice to service user experience in this report. We also see this in the 'your opinion matters' and 'recent feedback' links on



the homepage of your website and that such feedback is not only reflected in your Quality Account but in your Annual Report and in the lessons learned section of your Complaints Report which are also available online. It is important that, where possible, feedback is incorporated into a 'you said we did' approach and we would suggest that this could be evidenced with a link on the 'recent feedback' icon to such documentation.

Healthwatch understands and concurs with the five priorities that you are setting for 2015/16. We particularly welcome your commitment to implementation of the Duty of Candour which will further develop openness and transparency across the organisation.

We are pleased that you have managed to keep this Account reasonably brief but would be grateful if you would consider producing an easy read version to capture your key public messages.



4.2 Comment from North East Lincolnshire Clinical Commissioning Group

North East Lincolnshire Clinical Commissioning Group is pleased to be given the opportunity to review and comment on Care Plus Group Quality Report for 2014 /15.

The Quality Account is well presented and the information included in the report provides a view of Care Plus Group performance against it quality indicators for 14/15. The report provides commissioners with useful insights on how Care Plus Group delivers its services in line with national and local quality indicators.

We are pleased to note that the report reflects patient satisfaction during the year and it is positive to see that Care Plus Group is building on the work undertaken and focusing on areas for improvement which provides an on-going focus on improving patient safety, and quality of care, with the use of technology to enhance and enable clinicians to deliver care by having accurate information at point of care.

The NELCCG recognises the organisation for investment in training and development of their staff which is reflected in surveys this year both in areas of service delivery and staff satisfaction.

Hopefully this will be enhanced by the x5 priorities they have set themselves for the coming year.

We look forward to a complete picture of the performance against some of their quality indicators achievements next year to ensure quality measures overall are being maintained, improved or where not, they are being addressed, even if there are no benchmarks to compare to as yet.

NEL CCG remains committed to improve the quality of services available for the population in order to improve patient outcomes

Taking that into account, we confirm that to the best of our knowledge, the report is a true and accurate reflection of the quality of care delivered by Care Plus Group and that the data and information contained in the report is accurate. The Clinical Commissioning Group is working with Care Plus Group to improve the quality of services available for our patients in order to continually improve patient outcomes.

Sue Cooper Lead Nurse-Quality North East Clinical Commissioning Group



PART FIVE

5.1 How to provide feedback on the Quality Account

Care Plus Group welcomes any feedback in relation to the contents of the Quality Account. We hope we have made it as easy as possible for you to contact us by offering as many options as possible.

If you have any issues, questions, concerns or recommendations in relation to this report, please contact the Care Plus Group Quality and Performance Team via any of the methods below and we will ensure that the most appropriate person responds to you as quickly as possible.

In Writing

Quality & Performance Team
Care Plus Group
Freeman Street Resource Centre
41-43 Kent Street
Grimsby
North East Lincolnshire
DN32 7DH

Via Email

CPG.CareplusAssure@nhs.net

By Telephone

01472 266976

Facebook

https://www.facebook.com/careplusgroup

Twitter

https://mobile.twitter.com/CarePlusGroup

