

# CARE PLUS GROUP QUALITY ACCOUNT 2014



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# PART ONE

## INTRODUCTION

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### 1.1 Statement from the Chief Executive



Lance Gardner Chief Executive

Throughout 2013/14 Care Plus Group has continued to embed itself as a significant care provider across North East Lincolnshire. We continue to strive for excellence in all that we do, ensuring our customers receive an exemplary service from us.

We recognise the continued efforts of our incredible staff team in ensuring we deliver the highest quality of care across the area. We continue to work in line with 10 customer care standards that we feel are critical to ensuring excellent service delivery, these are outlined below.

Care Plus Group will:-

1. Treat you with courtesy, dignity and respect and according to your individual needs.
2. Treat you fairly and not discriminate against you in any way.
3. Consult with you as our customer in a meaningful way and involve you in decisions – “Nothing about you without you”.
4. Use plain language and avoid unnecessary jargon.
5. Be on time to see you for any arranged appointments and let you know a day in advance if we need to cancel an arranged appointment. We will wear our ID badges so you know who we are. We will make sure you know and understand who will be providing your care.
6. Record your comments, complaints or compliments and use them to improve our services.
7. Apologise when we are wrong and do our best to put things right.
8. Produce useful up-to-date, relevant and accessible information about us and our services.
9. Ensure records relating to your care are maintained in a timely manner, accurately and remain confidential, to ensure personal information is protected at all times.
10. Ensure all Care Plus Group staff are trained and competent in all elements of their particular job role and have undergone all the required competency and individual checks to ensure the protection of all patients and service users.

We remain committed to ensuring customers are able to have a say in how we deliver our services and have worked hard over the last 12 months to ensure customers are more able to provide us with meaningful feedback we can use to improve services.



In 2013 we achieved ISO 9001 quality management accreditation for a range of our services and we aim to build on this success over the coming year. We remain absolutely committed to ensuring our systems and processes provide our customers with the outcomes they deserve. Similarly we achieved ISO 27001 information security management system accreditation for our IT department, providing us assurance that we deal with personal information and personal records safely and securely. We are also delighted that our charity arm, Care4All, achieved Investors in People status during the last year.

We remain committed to ensuring that our performance measures are outcome focussed, and measure what really matters to our customers.

The forthcoming year will not be without its challenges, especially with anticipated efficiency requirements, but we remain committed to ensuring the delivery of safe, effective and person centred services.

## 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 2014.

As a Board we recognise that the last year has not been without its challenges, particularly in relation to required efficiency savings, however, as an organisation we have continued to maintain excellent service delivery in these times of austerity.

Indeed the Care Plus Group Board remains intent on developing services and ensuring continuous improvement across the full range of health and social care services being provided. We believe that in order to ensure continuous improvement it is imperative that all our patients and service users are enabled and encouraged to provide feedback from which we can secure improvements. To this end we have sought over the last year to improve feedback mechanisms, and have introduced a new patient and service user satisfaction process.

The Board would like to pay tribute to all staff within the organisation for their absolute commitment over the past year and their tireless on-going work to serve local people.





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

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 2014/15.

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 presents 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 ensuring that our patient's 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.

Formed in 2011 Care Plus Group employs over 800 members of staff providing a wide range of community services.

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
  - Employability Services
  - Palliative and End of Life Care Services
  - Community Learning Disability Services

- Specialist Nursing (e.g. continence, diabetes, infection control, tissue viability)
- Intermediate Care at Home
- Substance Misuse Services
- Falls and Chronic Obstructive Pulmonary Disease (COPD)
- Health and Wellbeing Collaborative
- Transport
- Community Psychology Services

## 2.2 Quality Priorities for improvement for 2014/2015

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, the Care Plus Group priorities for the coming year have been grouped under the three quality dimensions. This allows us demonstrate our goals, what we think and what we need to do to achieve these targets.

### Quality Dimensions

1. Patient Safety
2. Clinical Effectiveness
3. Patient Experience

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 2014/2015

The following priorities have been identified as part of Care Plus Group's Strategic Objectives and form the SMART objective framework for 2014/15

IDENTIFIED PRIORITY	DOMAIN
Customer Focused, High Quality Delivery	3. Patient Experience
Effective Governance	1. Patient Safety 2. Clinical Effectiveness 3. Patient Experience
Openness, Transparency and Candour	1. Patient Safety 2. Clinical Effectiveness 3. Patient Experience
Stakeholder Engagement	1. Patient Safety 2. Clinical Effectiveness 3. Patient Experience
Staff Value	1. Patient Safety

	<b>2. Clinical Effectiveness</b> <b>3. Patient Experience</b>
<b>Training and Development</b>	<b>1. Patient Safety</b> <b>2. Clinical Effectiveness</b> <b>3. Patient Experience</b>

## PRIORITY ONE – Customer Focused, High Quality Delivery

### Domain(s) – Patient Experience

**Current Status** – Nationally, all providers of Community Services will be required to roll-out and implement the Friends and Family Test to their Patient/Service Users. The introduction of this was already planned as an extension of the Service User Survey and will be undertaken during Quarter 1 2014/15. In addition to this, the current 6 C’s Survey for Community Nursing teams will be extended to two additional teams each quarter as part of the organisational strategic/SMART objectives.

**Goal** - As part of the strategic/SMART objectives an internal Customer Satisfaction Score of 90% has been set and a 6 C’s score of 85%.

**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.

## PRIORITY TWO – Effective Governance

### Domain(s) – Patient Safety, Clinical Effectiveness, Patient Experience

**Current Status** – Care Plus Group has set a target to see effective governance continuing throughout the organisation and as part of the strategic/SMART objectives has set the following targets for the year:

- Remove staff identified unnecessary bureaucracy
- Assess and assure the management of quality

All management of Risk and Quality (Complaints, Serious Incidents etc.) will be subject to an annual audit to identify examples of good practice and also areas for improvement, if required putting in place an action plan to rectify which will be monitored until completed.

**Goals** – To further develop existing Governance procedures and remove any unnecessary ‘red tape’ whilst also engaging a key stakeholder (staff).

**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 – Openness, Transparency and Candour

### Domain(s) – Patient Safety, Clinical Effectiveness, Patient Experience

**Current Status** – On the back of the Francis Report, Care Plus Group has committed itself to ensuring openness, transparency and candour continues throughout the organisation and as part of the strategic/SMART objectives will undertake an annual Audit on customer care which will see face-to-face engagement with Service Users to gain quality feedback with the intention of using this to develop services maximised towards a greater patient experience. Within this objective Care Plus Group is looking to create a culture where Service Users and



staff alike feel comfortable in providing feedback. In light of this increased publicity material will be produced advising Service Users (and their friends/families) on how to provide any feedback, which will be displayed in all Care Plus Group buildings. Staff will also be advised as to how to advise when someone wishes to provide feedback.

**Goals** – Gather qualitative intelligence on Service Users views and increase awareness of feedback routes for Service Users and Staff.

**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 FOUR – Stakeholder Engagement**

**Domain(s)** – Patient Safety, Clinical Effectiveness, Patient Experience

**Current Status** – Care Plus Group recognise that numerous stakeholders are involved in all aspects of services delivered and are keen to engage them at every stage. Strategic/SMART objectives have been set to ensure all members of the Care Plus Group family feel valued and engaged.

**Goals** – Increase Community Membership levels, Increase number of volunteers involved in Care Plus Group, wider representation from staff groups at Staff Engagement events, Expand reach of Collaborative position.

**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 – Staff Value**

**Domain(s)** – Patient Safety, Clinical Effectiveness, Patient Experience

**Current Status** – Care Plus Group value their staff with the highest regard and recognise they are our greatest asset, however it is important that they are made to feel appreciated and that their views are not only heard but considered. The 2013/14 staff survey made strides towards opening an avenue of feedback but further work is needed, culminating in improved results on the staff survey.

**Goals** – Via the staff survey:

- Staff to state they feel they are able to use their own innovation when bringing new ideas into Care Plus Group.
- Staff to state that they feel listened to, appreciated and trusted.
- Staff to state that they would recommend Care Plus Group as a place to work.

**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.

#### **PRIORITY SIX – Training and Development**

**Domain(s)** – Patient Safety, Clinical Effectiveness, Patient Experience

**Current Status** – Care Plus Group has set a target to have maximum levels of staff compliance with training and development with a minimum level of 90%. The introduction of Oracle Learning Management (OLM) has allowed this to be more accurately monitored as well as areas for improvement to be quickly identified.

Care Plus Group are committed to the development of our staff and want all staff to feel they have appropriate opportunities to do so. A strategic/SMART objective is in place to ensure this is the case.

**Goals** –



- Statutory and Mandatory Training to be at 90%
- Staff to feel they have access to appropriate development opportunities

Each individual SMART objective has a designated lead who is required to provide updates on as part of a delivery plan system to aid making the delivery a reality.

## 2.2.2 Commissioner Agreed Priorities (CQUIN's) 2014/2015

The priorities below are based on new goals identified within our CQUIN Framework and agreed with our Commissioners for 2014/15.

CQUIN	DOMAIN	LOCAL/NATIONAL
CQUIN 1 – Friends and Family Test 1B & 1C	3. Patient Experience	National
CQUIN 2 - NHS Safety Thermometer – Reduction in the prevalence of pressure ulcers	1. Patient Safety 2. Clinical Effectiveness 3. Patient Experience	National with local variation
CQUIN 3 - Quality and timeliness of Serious Incident investigations.	1. Patient Safety 2. Clinical Effectiveness 3. Patient Experience	National

CQUIN is deemed as Commissioning for Quality and Innovation payment framework which rewards excellence by a percentage of revenue streams to local improvement projects and the achievement of such.

### CQUIN ONE – Friends & Family Test: Early Implementation and Phased Expansion (Staff and Patient Service User)

**Domain(s)** – Patient Experience

**Current Status** – The Friends and Family Test (staff) already forms a part of the Care Plus Group annual staff survey and will continue to do so (due in Quarter 4 2014/15), for each Quarters, 1, 2 and 3 a random selection of 33% of staff will be offered the chance to undertake the test in addition to the annual survey.

For Patient/Service Users, the Friends and Family Test will be added as an addition to the existing feedback mechanisms (Service User Survey and 6 C's) which on a quarterly basis equates to roughly 500 Patient/Service Users.

**Goals** – To improve the experience of patients in line with Domain 4 of the NHS Outcomes Framework. The Friends and Family Test will provide timely, granular feedback from patients about their experience.

**How we will monitor** – Both staff and Patient/Service User element will be collated and fed back to our commissioner as part of our quarterly performance reporting agreement.

## CQUIN TWO – NHS Safety Thermometer – Reduction in the prevalence of pressure ulcers

**Domain(s)** – Patient Safety, Clinical Effectiveness, Patient Experience

**Current Status** – A reduction in Pressure Ulcers of grade 3 & 4 was evidenced during 2013/14 with work on-going to continue this trend and also improve the quality of recording, which subsequently will have a positive impact on the effective care of patients.

**Goals** – A locally agreed variation is included in this CQUIN to see a further reduction in grades 3-4 pressure ulcers.

**How we will monitor** – Every incident of pressure damage is logged on a centralised reporting system. All incidents are monitored on an individual basis.

## CQUIN THREE – Quality and timeliness of Serious Incident investigations

**Domain(s)** – Patient Safety, Clinical Effectiveness, Patient Experience

**Current Status** – To ensure quality and reasonable timeliness of all Serious Incident (SI's) investigations, Care Plus Group adheres to the existing requirement for SI's to be submitted within nine-weeks of the incident occurring, also welcoming the additional measure around scoring of the Incident report grading at Good and above.

For 2013/14 Care Plus Group submitted 20. 100% were submitted within the required time-frame whilst 80% were graded as Good or above. Care Plus are currently rolling out a training programme for managers on Root Cause Analysis which will further assist investigations of Serious Incidents.

**Goals** – To ensure at least 90% of submissions are within the nine-week reporting timeframe and the report receiving a grading as Good or above.

**How we will monitor** – This will be monitored by the Commissioning Support Unit as the receiver of the report and an annual figure will be produced. However feedback will be given on a monthly basis and internally systems are already in situ to monitor time-frames and grading.

### 2.2.3 Other Priorities for implementation during 2014/15

Performance Measure	Target	Current Status/ RAG rating
Continued improvements in Record Keeping	Further improvements in all aspects of record keeping.	Record Keeping will continue to be a key focus during 2014/15. A more appropriate training package for Record Keeping has been developed in-house and is now in use.  Each service will have a

		designated Record Keeping champion to promote good practice and offer advice.  The Clinical Records Keeping audit will be revisited in 2014/15.
Implementation of NICE Quality Standards to ensure that patients and services users receive the best clinical and social care interventions possible	All aspects of best practice will be implemented across Care Plus Group with Quality Standards being identified and implemented as appropriate	Specific leads to be identified within Care Plus Group to implement the above standards. Quarterly updates will be requested from all of the identified leads.

## 2.3 Participation in Clinical Audits

This part of the Quality Account focuses on the audits undertaken by Care Plus Group during 2013/14. For the purpose of the Quality Account these have been split between Clinical and Non-Clinical audits

### 2.3.1 Clinical Audits – 2013/2014

During 2013/14 the following Clinical Audits were undertaken by Care Plus Group.

AUDIT TITLE	Assurance Level at Time of the Audit	Comments	Current status
Glucometer Quality Assurance Compliance Audit	Limited Assurance	Although a level of organisational compliance with Glucose Meter assurance levels was achieved, a lack of correlation between information stored on databases held internally and externally meant individual compliance levels was difficult.	Limited Assurance

		<p>Work is now on-going to match databases up to allow further analysis, in addition to work to raise compliance levels</p> <p>A re-audit will take place Summer 2014.</p>	
Clinical Record Keeping Audit	Limited Assurance	<p>This audit forms part of the annual audit cycle.</p> <p>Several useful issues and subsequent actions were identified with an overall objective towards improving clinical record keeping levels.</p> <p>This audit will be repeated on an annual basis.</p>	Limited Assurance

### 2.3.2 Non-Clinical Audits – 2013/2014

AUDIT TITLE	Assurance Level at Time of the Audit	Comments	Current RAG Rating
PDR and Supervision Compliance Levels	Limited Assurance	Action plan produced and identified areas for improvement both organisationally and for individual teams.	Significant Assurance
ISO 9001 Service Specific Process Audit (related to the services listed below) <ul style="list-style-type: none"> <li>• The Beacon</li> <li>• Rapid Response</li> <li>• Intermediate Care At Home</li> </ul>		As part of the wider ISO 9001 process, audits have been undertaken for all 'in-scope' services to ensure their process documentation is an accurate representation of the service.	Significant Assurance

<ul style="list-style-type: none"> <li>• Telephone Triage</li> <li>• The Home Team</li> <li>• Substance Misuse Services</li> </ul>		<p>These have identified non-conformities and opportunities for improvement, which have been actioned and monitored.</p>	
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During 2013/14 10 Care Plus Group undertook ISO 9001:2008 accredited audit training. In early 2014/15 6 additional staff (including 4 clinical staff) will also undertake this training which will further increase the scope for both clinical and non-clinical training to take place moving forward.

### Forward Plan of Audits for 2014/2015

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

#### **Clinical:**

Record Keeping Audit

Medication Management Audit

Palliative Care Audit

Glucometer Quality Assurance Compliance Audit (re-audit)

Calibration of Equipment

#### **Non-Clinical**

Customer Care Audit

Compliance with Document Control

PDR and Supervision Compliance Levels (annual)

Personal File Compliance Audit

### 2.5 Proactive Response

The Francis Report proved a benchmark moment for the whole of the Health and Social Care environment when produced in late 2012/13. The trend continued throughout 2013/14



with the Berwick Report, Cavendish Review, Keogh Report and Winterbourne View inquest adding further weight to the Francis Report.

From the offset, Care Plus Group welcomed and accepted recommendations from The Francis Report, even though the report was heavily focused on the Acute Sector. An Action Plan was produced to ensure patients outcomes and experiences were at the highest possible levels, including Dignity and Respect.

A key area of improvement identified was around candour and transparency. As part of this the 2013/14 (and following years) Annual Complaints Report will be uploaded onto the Care Plus Group website for public viewing.

## 2.6 What others say about Care Plus Group

### Care Quality Commission (CQC)

The Care Quality Commission undertook a number of unannounced inspections with registered services within the Care Plus Group during 2013/14. These inspections were vital to ensure we are meeting the Essential Standards of Quality and Safety.

Routine annual inspections with The Beacon, Intermediate Care at Home and Supported Living Service took place between May and November and all met full compliance.

*The Beacon* –compliant with all 6 standards inspected and Views were sought from people who use the service and staff which was very positive.

*Intermediate Care at Home* – compliant with all 5 standards inspected and the inspector checked how people were cared for at each stage of their treatment and talked with people who use the services as well as carers and staff

*Supported Living Service* – compliant with all 5 of the standards inspected and reported that care and treatment was planned and delivered in a way that was intended to ensure peoples safety and welfare.

During October some of our Community Services were visited by the CQC as part of the inspection process and met full compliance. Among these services were Quality & Performance, Infection Control, Out of Hours Service, Hope Street Specialist Service (COPD/Falls) and also met a representative from the Community Nursing Service. The inspector looked at the personal care or treatment records of people who use the service, observed how people were being cared for and talked with people who use the service.

### Staff Survey



In late 2013/14 Care Plus Group undertook its annual Staff Survey with over 50% of staff taking part. A full report has been produced with results shared 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:

- 84.55% of staff said they would recommend Care Plus Group to friends and family as an organisation to receive care/advice from.
- 68.22% of staff said they would recommend Care Plus Group to friends and family as an organisation to work for.
- 85.71% of staff felt their job was valued and important.
- 96.56% of staff felt that Care Plus Group treats patient/service users with dignity and respect.

Below are a section of comments from the staff survey:

“I do believe Care Plus provide the best standard of care in the area.”

“We provide excellent care and have staff who are committed to do a good job whatever their role.”

“I know the quality of care is set at such a high standard and that there are adequate professionals to deal with various situations.”

“A caring and professional organisation. Never been happier in work”

## 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 is a small example of some of the opinions given:

“This is the second time he has been in there (The Beacon) after being in hospital for a month prior to this. His welfare has been very good they are so caring for his every need” – The Beacon

“We think the service is excellent and we are very grateful of the help and assistance that we get” – Community Nursing

“I'm very happy with all the care I get and it's nice that I'm always involved with the planning of my care. Thank you for all you do for me” – Community Nursing

“The staff were more than helpful. I never thought I would be able to get around but with their help and encouragement I did. Thank you so much.” – The Beacon

“The nurses who have visited have always been caring and very supportive, and never fail to listen to any problems and lend a hand thank you.” – Community Nursing

“Everything and everyone were fantastic and so friendly” – Core Rehab

“I am highly satisfied and very grateful for the care and kindness given to me wherever they attended. At present once again I have had to call on them and once again they are marvellous.” – Crisis Support

“My experience at the Beacon could not have been better” – The Beacon



“I have been really pleased with the Rapid Response for my needs and I am delighted, and feel more confident knowing that they are there, well done and thank you” – Rapid Response

In addition to the Service User Survey, Customer Focus Groups have been set up for 2014/15 to further engage with Care Plus customers, this forms part of a “You said – We did” approach to engaging with our customer base ensuring they are at the heart of future service developments.

## Comments, Complaints & Compliments

The Complaints Team continues to operate Monday to Friday 0900-1700, taking calls in relation to complaints, compliments, queries and concerns.

All complaints are allocated an Investigating Officer and a full investigation is carried out within a deadline agreed with the complainant.

## Complaints

During 2013/2014, a total of 28 complaints have been received. The main themes for complaints were:

1. Staff Attitude
2. Admission, transfer, discharge process

Care Plus Group takes all complaints very seriously and implements actions as appropriate. We have responded to the issues of staff attitude by ensuring all staff have undertaken Dignity and Respect training aimed at front line staff. Also Conflict Resolution Training is continuing to be delivered on an on-going basis in relation to mandatory and statutory training for all staff aimed at tackling staff attitude and the impact of this and managing difficult situations in stressful circumstances. Customer Care Training is now being provided as an organisation to our staff to ensure that the best service is given to patients and to prevent staff attitude being an issue.

## Compliments

Despite us having identified that there are a minority of staff and situations who are the subject of complaints, 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 are:

“Thank you very much for all your care and compassion”  
(Community Nursing)



“To know that such a service exists is great, keep this very good work up, thank you” (IC@Home)

“To all the staff and buddies, with many thanks for all your support and help – and for making everything as easy as possible for me whilst taking part in my treatment” (Hope Street)

“Just want to say, thank you for listening to me and the support you gave me and just to let you know that I gave my first negative today and that I'm going to continue to do so in the future. Once again thank you” (Drug Intervention Programme)

## 2.7 Data Quality

Care Plus Group places a high priority on data quality improvements within the organisation. Good data enables us to be clear how we are performing and enables us to gain an overview of service requirements and gaps in needs for the future to be identified.

**SystemOne Optimisation** - SystemOne is the primary clinical tool used across North East



Lincolnshire and is the system of choice for Care Plus Group. An Optimisation Group has been established to improve the systems in relation to both time efficiency and data quality. This group looks at ways of simplifying processes to reduce paperwork and inputting, enabling staff to increase patient and service user contact time. The objective of the group is to try and implement consistency within the

Organisation, and encourage a more joined up approach amongst the various different services.

**Standardisation across Community Nursing Teams** - A data analyst is assigned to the Community Nursing Teams to support improvements in data quality. Feedback is given directly to the nurses to show where they are not recording accurately and the changes that need to be made. The nurses have given positive feedback about this support and the system is working well with errors reducing at a noticeable rate. As a collective, the nurses are regularly achieving 97% accuracy every month, which demonstrates the huge strides made. A Personalised Assessment has been rolled out at across the organisation, including the Community Nursing Teams, to further improve data quality and data standardisation.

**Community Information Data Set (CIDS)** - This is a national requirement and Care Plus Group are ahead of many other areas in the country in relation to preparing for this to be brought fully online. 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 now been deferred until 2015.

# PART THREE

## 3.1 Review of Quality and Performance Measures for 2013/14

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 2013/14 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. This reports illustrated where Care Plus Group was against the targets that had been set and detailed the achievements that were delivered.

For 2012/13, measures were highlighted within the Quality Account for closer scrutiny:

Identified Priority	Domain(s)	Year End Achievement
Reduction in the number of falls of patients and improved understanding of how to avoid circumstances that	1. Patient Safety 3. Patient Experience	Significant improvements have been made with regards number of falls whilst within the care of Care Plus Group. The Beacon has seen a reduction in number of falls by 47.06% over the last year. This is attributable to a change in

may lead an individual being subject to a fall		the environment and greater use of falls technology and aids.
Reduction in the number and grades of pressure ulcers developed by patients whilst in the care of Care Plus Group	1.Patient Safety 2.Clinical Effectiveness 3.Patient Experience	Pressure ulcers remain a key area focus both locally and nationally. During 2013/14 the number of avoidable and unavoidable Pressure Ulcers of Grades 3 & 4 reduced by 36.36%. Tissue Viability Nurses also noted an improvement in the recording relating to pressure ulcers. A Standardised Assessment framework is also to be launched early in 2014/15, adding to the improved quality of reporting.
3% of all individuals using services across the organisation will receive a service user feedback form from the Quality & Performance Team within Care Plus Group	3.Patient Experience	A service user survey has been distributed on a quarterly basis from the central base of the Quality and Performance Team, ensuring transparency when selecting Service Users but also to have all feedback collated together. The survey has run throughout 2013/14 and has received consistently high return rates and high levels of customer satisfaction scores. The survey also gives the option for Service Users to describe what they would do to improve their experience with Care Plus Group and leave their contact details for a member of the Quality and Performance Team to discuss their experience in greater detail.
Implementation of the "Six values essential to compassionate care"	1.Patient Safety 2.Clinical Effectiveness 3.Patient Experience	Care Plus Group is committed to the all of the 6 C's of Care. To capture evidence of this, a one-day a quarter survey takes place for all Community Nursing patients seen on the identified day. Within this survey a score is produced for Care, Compassion, Competence, Communication, Courage and Commitment, in

		<p>addition to an overall score. The first three quarters of this score have been pleasing and considerably above the 85% target. During 2014/15 this will be rolled out into additional teams across Care Plus Group.</p>
<p>End of Life Care - All care that people receive in relation to end of life is compassionate, appropriate and gives people choices in how they are cared for and where they die</p>	<p>1.Patient Safety 2.Clinical Effectiveness 3.Patient Experience</p>	<p>Annual average – 50% of people die at their usual place of residence.</p> <p>Annual Average - 92.33% people with a palliative care condition on the caseload with a care plan</p> <p>Number of compliments 211 number of complaints 2</p> <p>Compliance under care in the last days of life 74.75% (This figure relates to Community Nursing)</p>
<p>Implementation of NICE Quality Standards to ensure that patients and service users receive the best clinical and social care interventions possible</p>	<p>1.Patient Safety 2.Clinical Effectiveness 3.Patient Experience</p>	<p>Care Plus Group has an approach in place to manage and implement relevant NICE Quality Standards.</p> <p>However further work is needed to fully implement these across the organisation with work underway to assess what actions are required within the organisation in relation to each standard.</p>
<p>Number of admission alerts received that resulted in the case manager responding by means of in-reach to DPoW to support the discharge management process</p>	<p>1.Patient Safety 2.Clinical Effectiveness 3.Patient Experience</p>	<p>No target was set on this CQUIN measure. Information collected and submitted throughout the year showed that none of the requests came from the hospital setting but instead from other means, e.g family/career or the patient themselves.</p>

## PART FOUR

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

#### 4.1 Comment from Health Watch

Thank you for the opportunity to comment on this Quality Account. In broad terms, we are supportive of the strategic priorities for 2014/15 set out in this document. We welcome your plan to post your 2013/14 Annual Complaints report on your website but we would ask that, in terms of public transparency, as many findings as possible are posted on your website on a regular basis, particularly:



Priority 1 – quarterly results on the Friends and Family Test.

Priority 2 – annual audit on management of risk and quality.

Priority 3 – annual audit on customer care.

Priority 4 – quarterly reports on stakeholder engagement.

We would ask that, where possible, statistical clarity is given to the outcomes of quality and performance measures during 2013/14. The section on achievements against '3% of all service users across the organisation will receive a service user feedback...' states that the survey through 2013/14 'has received consistently high return rates and high levels of customer satisfaction scores' but actual figures are required.

We hope these comments will be taken into account and we look forward to continuing to work with the Care Plus Group over the coming year to ensure that the voice of local people is reflected in the Group's approach and priorities.

## 1.2 Comment from North East Lincolnshire Clinical Commissioning Group

North East Lincolnshire Clinical Commissioning Group is the lead commissioner for Care Plus Group and we are pleased to have the opportunity to comment on this Quality Report.

Over the past 12 months we have worked together with Care Plus Group as our key provider of a wide range of community based services.

The introduction to the report sets out in detail progress that has been made in the last financial year and well as setting clear prioritise and goals for the year ahead. It is pleasing to note that Care Plus Group have achieved ISO 9001 Quality Management accreditation as well as ISO 27001 Information Security Management – this is a significant achievement given the volume of work needed to attain such a standard.

The report is well formatted and ready friendly with a clear focus on providing jargon free information that is easily understandable – particularly to service users.

It is pleasing to note that Care Plus Group has identified its key risks and have significant and robust systems in place to mitigate them.

We are pleased to note the progress of Care4All, which since its inception has made significant progress in providing services for particular groups of vulnerable people. The achievement of the Investors in People Award in such a short timescale is particularly pleasing.

The report provides particular focus on the three domains of patient safety, clinical effectiveness and patient experience – all of which contribute to providing high quality cost effective and innovative patient care.

We are pleased to note the significant progress made on the areas of reporting serious untoward incidents given the new reporting timeframes set nationally. Care Plus Group have made a significant number of service improvements that have reduced the number of service users experiencing pressure related skin damage and falls.

In the past year the CCG implemented a series of commissioner led visits to our provider unit, both announced and unannounced. Such visits have been welcomed and actively supported by Care Plus Group. We particularly note and commend the significant improvements at the Beacon, which provides intermediate care to very vulnerable and sometimes frail service users.

**Paul Kirton-Watson**  
**Strategic Lead – Quality and Experience**  
**North East Lincolnshire Clinical Commissioning Group**

# PART FIVE

## 5.1 How to provide feedback on the Quality Account

Care Plus Group welcome 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

**[NEL-CT.CareplusAssure@nhs.net](mailto:NEL-CT.CareplusAssure@nhs.net)**

### By Telephone

**01472 266976**

### Facebook

**<https://www.facebook.com/careplusgroup>**

### Twitter

**<https://mobile.twitter.com/CarePlusGroup>**