

# Highlights from our quality account 2022-23

## Reflecting on our performance and priorities for improvement

Quality accounts are annual reports about the quality of services provided by an NHS healthcare service. They are published by each NHS healthcare provider and made available to the public. The reports are retrospective and forward looking.

The quality account measures the quality of services by looking at patient safety, the effectiveness of treatments and patient feedback.

We have three quality priorities which were a focus throughout 2022/23 and continue to be our focus for 2023/24. These priorities are:

1. Safe and responsive care
2. Equality, inclusion and equity
3. Health, wellbeing and experience of staff

You can read an overview of some of the work that has been happening in each of these areas in this highlight document.

You can read our quality account 2022-23 on our website: <https://www.southwestyorkshire.nhs.uk/about-us-2/performance/annual-report-and-quality-account/>

# Safe and responsive care



**Learning disability services – we planned to reduce waiting times for community, support GPs with annual health checks, undertake a workforce review, improve the quality of documentation.**

**We have** developed an out of hours service; waiting list monitoring and support to service users who are waiting; wellbeing support and development for staff; established a greenlight toolkit.

**We will** launch a community improvement programme; complete the waiting list project; establish a greenlight process; develop and establish new roles.

**Improving access to child and adolescent mental health services (CAMHS) – we planned to improve waiting times, and ensure people have early access to the right support.**

**We have** made significant progress in reducing waiting times over the past three years; increased service capacity; expanded and invested in services; changed care packages to better meet need.

**We will** continue to strengthen capacity in CAMHS; develop a business case to address challenges in meeting the needs of children in crisis and those with eating disorders.

**Patient safety – we planned to continue to develop our patient safety strategy and plans adjusting for national priorities and new guidance.**

**We have** continued to focus on improving the quality of incident recording and data collection; begun transition to the new patient safety incident response framework (PSIRF), including learn from patient safety events (LFPSE); used safety huddles to help team communication and support safe care.

**We will** transition to PSIRF; work on a range of national patient safety developments and further develop the patient safety specialist role.

- Developed our 2022-2025 suicide prevention strategy, including an implementation plan.
- Replaced paper medication charts with Electronic Prescribing and Administration (EPMA).
- Set up improvement work to improve clinical record keeping around clinical risk assessment and care planning. Focused on routine completion of outcome measures, including paired outcome measures.
- Continued focus on sustaining reductions in the number of people placed in beds out of area.
- Improved the flow of the complaints process through a quality improvement initiative.
- Developed our use of quality dashboards, a continuous programme of quality monitoring visits and supported services with quality improvement plans.

# Health, wellbeing and experience of staff



## Staff experience and wellbeing – we planned to improve using our NHS staff survey feedback.

**We have** continued to invest in occupational health; implemented Schwartz rounds; promoted staff networks and supported wellbeing groups and champions; raised awareness of menopause; introduced support for staff with the increased cost of living.

**We will** further embed the wellbeing at work champion; review wellbeing offers and encourage uptake; review the leadership and management development framework; review access to development opportunities for non-clinical roles and professions; redefine our prevention of bullying and harassment approach.

## Staffing initiatives – we planned to focus on safe staffing and develop new career pathways and professional roles.

**We have** implemented senior leadership seven days a week on inpatient units; increased international nurse recruitment; embedded tools to support staffing initiatives; setup an agency scrutiny and management group; identified workstreams to improve staff retention and recruitment; incentivised ward staff to take up extra bank shifts with enhanced payment.

**We will** roll out e-rostering and SafeCare; review our efficiency of how we use bank and agency; create a recruitment and retention group; establish a shortage occupation list; strengthen our international recruitment; implement Genius application tracking system.

## Learning from incidents and feedback – we planned to enable continuous improvement of our systems.

**We have** continued to share learning through – events, sharing data on serious incident themes and equality data, blue light alerts, the learning library; continued the complex case group; done a thematic review of three year's data from serious incidents to look at experiences.

**We will** continue to share learning; implement the patient safety and incident response framework (PSIRF); capture examples of good care.

# Equality, inclusion and equity



**Patient experience (the friends and family test (FFT)) – we planned to achieve tailored targets for some specific services and a Trust wide target.**

**We have** used FFT data to work towards service specific targets; developed patient experience representatives; looked at how we collect data (including accessibility); reviewed the patient experience improvement framework and worked with teams on actions following feedback.

**We will** design a patient experience dashboard; continue to develop patient experience champions; pilot the patient experience improvement framework; develop service line patient experience surveys.

**We planned to deliver the objectives within our equality, involvement, communication and membership strategy.**

**We have** supported the collection of insight and data; captured the voices and views of people through a quarterly insight report; used creative ways to tell stories; continued with the work of 'race forward'; supported our approach to race, LGBT, religion and belief, disabilities and gender, through dedicated initiatives; continued to develop our support for carers and successfully rolling out a carers passport.

**We will** collect good quality data; develop and sustain an equality competent organisation; involve; encourage the active participation of all our stakeholders to make sure our services meet the needs of our communities and support our workforce.