

Annual Review 2017/18



“

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FOREWORD FROM THE CHIEF EXECUTIVE

“Welcome to the Livewell Southwest 2017/18 Annual Review. For those who are familiar with us and our services, we hope you will join us in reflecting on some of the positive outcomes achieved on behalf of, and in partnership with, our local communities in the past year. For those who do not know us, we hope this offers a window into our world, and an insight into the valuable role we play in supporting the health and wellbeing of people living across the south west.

In the last 12 months, Livewell Southwest has much to be proud of. We achieved a ‘Good’ overall rating from the Care Quality Commission, with some services being rated as ‘Outstanding’, a credit to our dedicated and committed workforce, and testament to their ability to shape services and care around what really matters to our communities.

We took bold steps, by means of a new three-year strategy, to address head on the ways in which we will make Livewell Southwest sustainable and fit for the digital age. Our 2018-21 strategy represents a subtle but significant shift of focus, with investment in three key areas: a well-skilled workforce, digital solutions and sustainable community care involvement. Each of these offers a strong foundation from which to continue to realise our vision of helping people to stay well in the place, and the community, in which they live, where they can enjoy the best quality of life.

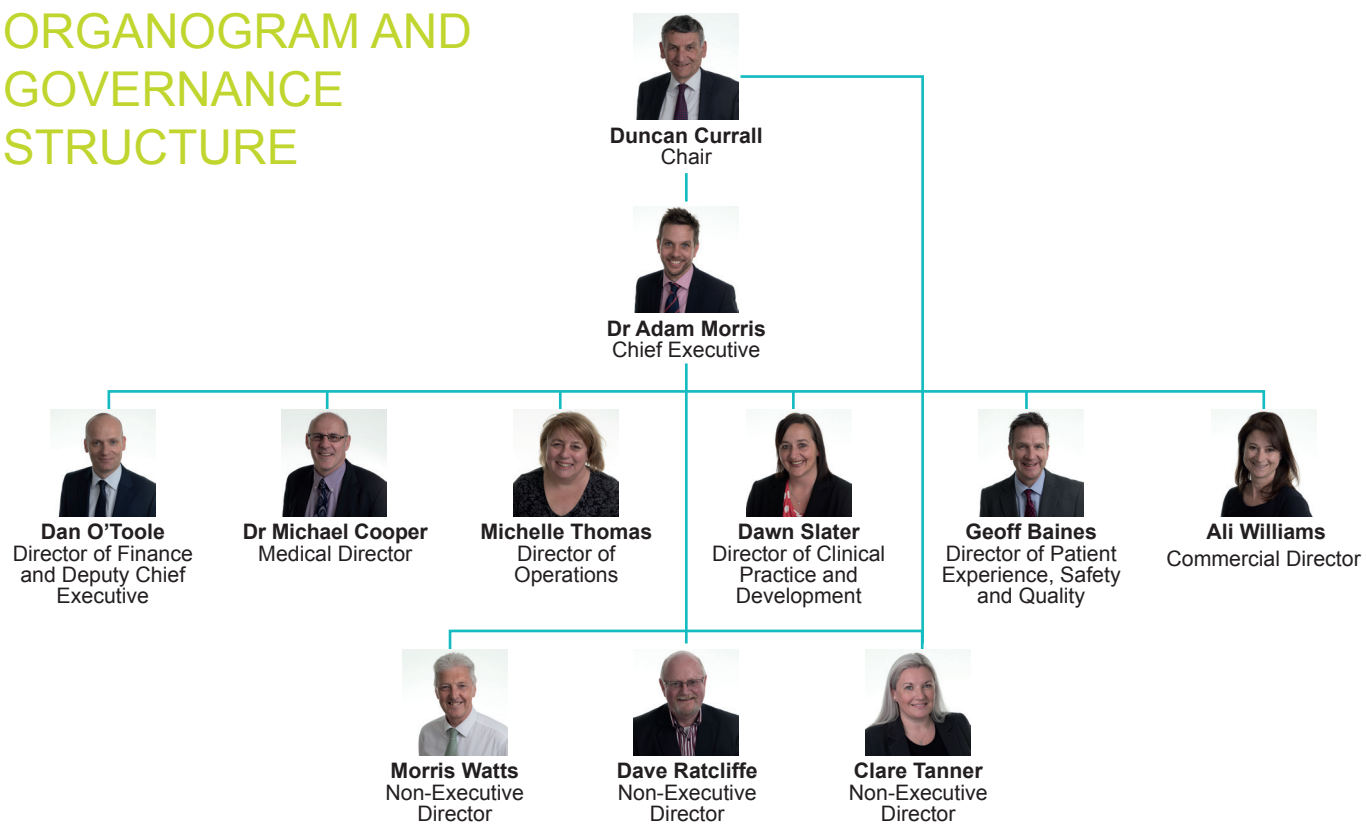
Another major development was the launch of the Livewell Foundation. A registered charity that provides funding for initiatives with community-wide benefits, or targeted programmes which support specific groups within those communities, it is our hope that the Livewell Foundation will have a positive and enduring impact on reducing health inequalities for people living in the south west.

We also took our commitment to integrated care to the next stage. In February, our Board unanimously agreed to work more closely with the University Hospitals Plymouth NHS Trust to work towards integrating services, incorporating the very best that we both have to offer. This partnership gives us a generational opportunity to build health and wellbeing services from the bottom-up, in which every point of contact exceeds expectation and offers a single point of access for people in need.

I invite you to read more about our ambitious strategy for the upcoming three years in this report, as well as taking the time to reflect on the last 12 months.”

Dr Adam Morris - Chief Executive

ORGANOGRAM AND
GOVERNANCE
STRUCTURE



Executive team: Geoff Baines, Dr Michael Cooper, Dr Adam Morris, Dan O'Toole, Dawn Slater, Michelle Thomas and Ali Williams.

The role of each committee is to be accountable to the board for the delivery of strategic objectives

Performance committee: Morris Watts and Dan O'Toole. Focus is to maintain safe high quality services that comply with regulatory requirements and provide safe and high quality accommodation.

Partnership committee: Morris Watts and Geoff Baines. Focus is to develop new partnerships to enable services to be delivered at home, or as close to home as possible, for voluntary and community organisations to be included in all care pathways and that community grants are provided through a charitable foundation.

Sustainability committee: Dave Ratcliffe and Dan O'Toole. Focus is to deliver a single point of access to services for those within commuting distance of Plymouth. To be able to supply our workforce with the right equipment, skills and confidence to support community-based working and their own well-being. Actively pursue innovation and empower people to be confident in using digital technology.

Workforce committee: Clare Tanner and Dawn Slater. Focus is to train the workforce to produce a single, trusted assessment, with targets set over the next two years to achieve access to services seven days a week, with three quarters of care assessments to be home-based. Meaningful opportunities to enable unemployed people to return to work will be created and an investment made into employee leadership across the organisation.

Remuneration and nomination: This committee appoints Directors of the company and reviews and approves their annual remuneration.

Audit: Clare Tanner and Dan O'Toole. Focus is on overseeing the Board Assurance Framework, managing risks within the organisation and overseeing the preparation of the annual accounts.

Our Voice: Livewell Southwest's staff engagement council, Our Voice, ensures the voices of our dedicated, expert staff are heard. By sharing their views and debating issues affecting our work at Board level, feedback gathered via Our Voice can influence our strategy, services and how we reinvest in the local communities we serve. Dawn Slater, our Director of Clinical Practice and Development, works closely with, and supports, Our Voice.

WHO WE ARE



Livewell Southwest is proud to be a community interest company and social enterprise. Everything we do – from how we shape our organisation to our culture, values and policies – is geared towards getting the best outcomes and greatest social value for the people of Plymouth, West Devon and South Hams. Our mission is to support people to stay well in the place and community in which they live, where they can enjoy the best quality of life.

Founded in 2011, today Livewell Southwest is the largest community health and adult social care enterprise in the UK. Being a social enterprise means we re-invest all our revenue back into the services we provide and the communities we serve.

We work alongside colleagues from local NHS hospitals and services, and with colleagues across Devon, as part of the Sustainability and Transformation Partnership (STP), to deliver expert care now and for future generations.

Livewell Southwest is an employee-led organisation. We employ more than 3,000 people who live and work in the local area and we champion their progression, development and commitment to providing outstanding care.

Our philosophy

Livewell Southwest believes that by ensuring equal access for all, treating the whole person, and wrapping care around the people we serve in the communities where they live, we can improve people's lives. We approach our work from the perspective of people, not patients.

Patients may need treatment, but people need so much more – they need services and support which help them to stay fit, healthy, happy and independent for as long as possible. Our vision is for wellbeing to be at the heart of everything we do, with healthy people and healthy communities being our long-term investment priority.

"You allowed me to be treated with compassion and dignity in familiar surroundings and with loved ones."

Livewell service user

Our services

We are committed to finding new ways to significantly reduce the need for hospital-bed based care – including for people with complex needs. We believe "the best bed is your own bed."

In order to realise this ambition, we provide a wide range of health and social care services to people living in South Hams, West Devon and Plymouth, with additional responsibilities for delivering specialist services in parts of Cornwall and Devon.

Our diverse services include:

- ▶ Community nursing
- ▶ Services for people with learning disabilities
- ▶ Physiotherapy
- ▶ Community mental health services
- ▶ Social work
- ▶ Wellbeing and health improvement services
- ▶ Services for children and young people and community pharmacists in health centres

We provide these services either within the person's home, or from one of 12 locations based across the south west, in close partnership with other organisations working in the local health economy.

Localities at our core

We have established locality teams which each deliver our range of services, including community nursing, mental health services, social care and children's services. They are based in the communities they serve, and understand and respond to specific local needs. It means a more seamless service for those requiring mental and physical health services and enables us to wrap care around families.

Locality managers are responsible for overseeing delivery of integrated services in their patch, working closely with city-wide and urgent care services, the newly-formed GP federations and expanding our local partnerships and networks.



Our locality managers are:

North Plymouth:
Ian Lightley
Tel: 01752 308901

East Plymouth:
Christine Little
Tel: 01752 435023

South Plymouth:
Lori Ashton
Tel: 01752 434439

West Plymouth:
Anne Prue
Tel: 01752 435477

South Hams and West Devon:
Sharon Scoging
Tel: 01752 881934

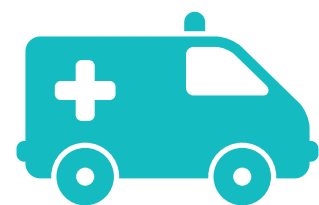
City-wide:
Tracy Clasby
Tel: 01752 435414

Community Urgent Care Services:
Sarah Pearce
Tel: 01752 434710

LIVEWELL BY NUMBERS



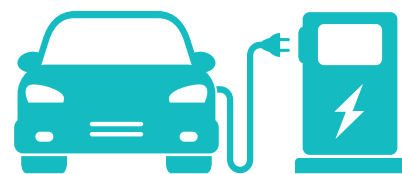
74,016
people used our services,
of which 27,618 were seen
at a home location (a care,
nursing or residential setting)



802
acute unit
admissions
avoided



9 community
grants worth
£45,000



6 electric
vehicle
charging
posts

OUR PRIORITIES FOR QUALITY IMPROVEMENT 2018/19

Statement from Geoff Baines, Director of Patient Experience, Safety and Quality

As an organisation we've agreed a new three-year strategy which better reflects our mission to support people to stay well in the place and the community in which they live, where they can enjoy the best quality of life.

We know that:

- ▶ Wellbeing is our priority: healthy people and healthy communities are what we are investing in, long-term
- ▶ We are about people not patients: people, our employees and our communities, are at the very heart of everything we do

Our strategy frames our priorities for the next three years with three key pillars:

We will be well-skilled – investing in our workforce

In 2018, we will:

- ▶ Launch a Livewell Ideas Forum to provide our workforce with support and encouragement to explore and develop innovative ideas
- ▶ Train our entire workforce in 'Making Every Contact Count'

We will be well-connected – investing in digital

In 2018, we will:

- ▶ Set out Livewell's required Digital Skills competencies for all our staff
- ▶ Establish compulsory Digital Skills support for all staff
- ▶ Establish agile working, supporting mobile working including using existing technologies to support staff

We will be sustainable – investing in the wider community

In 2018, we will:

- ▶ Donate 10% of our surplus to our newly-launched charitable Livewell Foundation to enable it to provide grants to support community resilience
- ▶ Nominate a Non-Executive Director for People and Community Partnerships to lead our partnership committee as part of our board assurance framework
- ▶ Establish an external advisory group to work alongside our partnership committee
- ▶ Establish a partners database that identifies and sets out a strategy by partner
- ▶ Ensure each geographic locality understands how to apply for funding from the charitable foundation

Our Quality priorities to support our strategy will include:

- ▶ An approach to Quality Improvement (QI) throughout our teams in order to continuously improve services and innovate improvements
- ▶ Joint investment along with our partners at University Hospitals Plymouth to undertake a three-year NHS Improvement Lean programme to improve patient care, support closer working and provide better patient outcomes
- ▶ The roll out of the Triangle of Care programme supporting staff, patients and families to work together in the interests of improving health outcomes for local people



PARTICIPATION IN AUDITS

Ensuring we are involved in clinical audits at a national, regional and local level, allows Livewell Southwest to have visibility of where our organisation is realising excellence in its services and areas where we can improve. In the last 12 months Livewell Southwest participated in four national clinical audits and three national clinical outcome enquiries. In addition, the findings of three local priority clinical audits were reviewed by Livewell Southwest in 2017/18, as well as the findings from annual general

record-keeping audits and infection control audits. For each local clinical audit undertaken, where appropriate, an action plan is created for the teams involved. Each audit has an identified lead and the action plans are monitored within operational and governance meetings.

Below details the findings of the national, regional and local audits and enquiries Livewell Southwest has participated in for 2017 – 2018.

Element 1: Collection of Patient Level Data between 1 April 2017 and 31 March 2018.

Audit or Enquiry	Eligible to participate in	Actually participated in	Data collection completed	No. of cases submitted
National Confidential Inquiry (NCI) into Suicide and Homicide by People with Mental Illness (NCI/NCISH)	Yes	Yes	Quarterly returns made	Livewell Southwest received five questionnaires relating to suicides in the period, and has returned four to the NCISH to date. We received one homicide questionnaire during the period which has been returned to the NCISH. We did not receive any requests to complete questionnaires relating to Sudden Unexplained Deaths (SUDs).
National Confidential Enquiry Into Patient Outcome And Death (NCEPOD) Child Health Clinical Outcome Review Programme Young People's Mental Health study which aims to: identify the remediable factors in the quality of care provided to young people treated for mental health disorders; with specific reference to: depression and anxiety, eating disorders, self-harm. To examine the interface between different care setting. To examine the transition of care.	Yes	Yes	2016-2017	Livewell Southwest contributed four case studies for this study

Audit or Enquiry	Eligible to participate in	Actually participated in	Data collection completed	No. of cases submitted
Learning Disabilities Mortality Review (LeDeR) Programme: Devon CCG coordinates a Devon-wide team to contribute to the review, and as an organisation, we contribute to this multi-agency oversight of the review. Clinical staff training is undertaken to support our involvement in the review process.	Yes	Yes	n/a	The Community Learning Disabilities Team (CDLT) has been invited to participate in two mortality reviews (these are allocated to teams outside of the locality where the deaths occur), and will be able to contribute to one of these, once staff LeDeR training is completed. The CDLT has not made any notifications to the LeDeR concerning deaths in our locality.
Sentinel Stoke National Audit Programme (SSNAP)	Yes	Yes	Continuous data collection starting January 2013	Between 1 Apr 2017 and 31 March 2018, the Mount Gould Hospital Stroke Rehabilitation service completed 128 cases to discharge, and the Early Supported Discharge (ESD) team completed 399 cases to discharge.
National Clinical Audit of Psychosis (NCAP)	Yes	Yes	October - November 2017 for NCAP, January 2018 for EIP	100 cases were submitted to NCAP, and 126 cases were submitted to the Early Intervention in Psychosis (EIP) case note audit.
Parkinson's Disease (PD) National Audit	Yes	Yes	May - September 2017	Livewell Southwest submitted 28 Care of the Elderly cases.
National Diabetes (adult) Audit – Foot Care Audit	Yes	Yes	February 2018, and with continuous data collection	44 cases were submitted by Livewell Southwest in February 2018.



Element 2: Reviewing National Audit reports published during the course of the calendar year January - December 2017

Audit	Report(s) received	Report(s) reviewed	Action planning
National Chronic Obstructive Pulmonary Disease (COPD) Organisational Audit	October 2017	Report reviewed within the Respiratory Service.	Actions being pursued include: a review of our offering around early post discharge Pulmonary Rehabilitation (PR) planned for 2018-19 to see if this could be achievable; and a review of electronic record keeping to ensure consistency. Regarding the number of referrals, promotion of the service to various colleagues in a variety of clinical settings to raise awareness.
Sentinel Stoke National Audit Programme (SSNAP) clinical audit	Four monthly reports received from SSNAP	The reports from SSNAP are regularly reviewed by the Stroke Team leads and stroke consultant, and the action plan is reviewed, and updated, accordingly. Data is also reported monthly to the CCG via the Stroke Clinical Pathway Group.	Action plans for the Stroke Rehabilitation Unit (SRU) and Early Supported Discharge (ESD) are continually monitored in response to the regular SSNAP reports. The main actions are to improve the therapy intensities for Occupational Therapy, Physiotherapy and Speech & Language Therapy and to improve discharge processes including: proportions of patients receiving a joint health and social care plan; with planned anticoagulant treatment for atrial fibrillation; treated by a skilled ESD team; with a named contact on discharge. Where applicable, to improve screening for mood and cognition, for nutritional risk and to address any continence issues.
National Confidential Inquiry (NCI) into Suicide and Homicide by People with Mental Illness (NCI/NCISH)	October 2017	An annual report is distributed to senior clinical staff and Directors for consideration, with views on its organisational impact expected in response.	



CQUINS AND CQC

Commissioning for Quality and Innovation (CQUINs)

The key aim of the Commissioning for Quality and Innovation (CQUINs) is to drive quality improvement and innovation with goals agreed between Livewell

Southwest and the NHS Northern, Eastern and Western Devon Clinical Commissioning Group (NEW Devon CCG).

CQUIN	Description
Improving staff health and wellbeing	In 2017 we were awarded the Workplace Wellbeing Charter in recognition of our commitment to improving staff health and wellbeing. Our continuing focus on protecting staff against flu is reaping rewards, with the highest ever uptake last winter - 54% of workforce - and a significant increase year on year since 2014.
Preventing ill-health by risky behaviours - alcohol and tobacco	We follow the ASK, ADVISE, ACT algorithm to start the conversation on use of alcohol and tobacco. Clinical staff all receive Smokefree and Nicotine Replacement Therapy Protocol Training and as part of our commitment to Making Every Contact Count we develop staff skills and confidence in supporting people to improve their own health and wellbeing. The main focus is 'healthy conversation skills' – sensitive listening and asking – which can help people to change their behaviours.
Improving physical healthcare to reduce premature mortality in people with serious mental illness	Physical health checks are being implemented to prevent premature death in those with serious mental illness. Work is taking place within the Assertive Outreach Team with the majority of service users. Within the generic Community Mental Health Teams, staff have recently been trained to ensure the same model is applied. There is also work taking place to work with primary care – shared care for those who are being prescribed antipsychotics in secondary care to be stabilised with physical health checks and then discharged back to primary care.

Care Quality Commission (CQC) Inspection

All health and adult social care providers who provide regulated activities are required to be registered with the Care Quality Commission (CQC).

In October 2016, the CQC published its report following an inspection which took place in June 2016 at Livewell Southwest. We achieved an overall rating of 'Good', with Glenbourne, our acute hospital for adults with mental health problems, and our Learning Disability Service both being rated as 'Outstanding'. Overall, the report commended our staff for providing great quality and compassionate care.

Following an inspection in December 2017, our Dental Access Centre was rated a 'notable practice' by inspectors who commented that other dentists could learn from them. The Dental Access Centre earned the top rating available for all five required categories: safe effective, caring, responsive to peoples' needs and well-led.

The inspection team singled out the staff's commitment to promoting equality of access for all patients and seeking out vulnerable groups as commendable, and was particularly impressed that there are key staff to work with refugee families in the local area, as well as a wheelchair platform that allows wheelchair users to be treated in their own chair.

The inspectors said: "These approaches demonstrate a commitment to identifying and responding to the needs of individual patients and to the needs of vulnerable groups and supporting patients to achieve positive outcomes in respect of their oral health."

Everyone working in Livewell Southwest has a responsibility to uphold the standard of quality and safe care that respects people's dignity and protects their rights, every day - not just during an inspection. We are proud to have a workforce that truly places value on achieving high levels of quality care for those who need it most in our communities.

DATA QUALITY STATEMENT

Good quality information underpins the effective delivery of patient care and is essential if improvements in quality are to be made. We understand the importance of ensuring that information held within the organisation is of the highest quality possible. This enables us to make informed, accurate and timely decisions about our patient care and our community involvement.

We have continued to develop automated warnings so that any errors, omissions and duplications are identified and resolved in a timely manner. This information is now being fed back to users so they can understand the importance of their own data quality.

The NHS number is the only national unique patient identifier used to help healthcare staff and service providers match people to their health records. Whilst the whole of the NHS and independent sector have made significant improvements in NHS number allocation, we continue to strive for 100% compliance in line with our allocation of GP surgery results for submitted records.



Secondary User Service

Livewell Southwest submitted 1,598 inpatient and 2,891 outpatient records between 1 April 2017 and 31 March 2018 to the Secondary User Service for inclusion in the Hospital Episode Statistics, which are included in the latest published data. The percentage of records in the published data - including the patient's valid NHS number was:

- ▶ 100% for admitted patient care
- ▶ 100% for outpatient care

The General Medical Practice (GMP) Code is an organisation code and Livewell Southwest has its own unique code. Accurate recording of the GMP code is essential to enable the transfer of clinical information about the patient from the patient's GP. The percentage of records in the published data which included the patient's valid GMP code was:

- ▶ 100% for admitted patient care (national average unavailable)
- ▶ 100% for outpatient care (national average unavailable)

Information Governance

Livewell Southwest's score for 1 April 2017 to 31 March 2018 for the Information Quality and Records Management was assessed using the Information Governance Toolkit (IGT). We scored 72% and were graded as Level 2 compliance. For 2018 Livewell will be using the new toolkit issued by NHS Digital.

QUALITY INDICATORS

Livewell Southwest is required to report on the following quality indicators which are relevant to the services we provide across our localities. These indicators help us to continually monitor our performance, providing clear feedback of services that are meeting, or surpassing, our targets. It also allows us to clearly assess where we intend to take action to improve the performance and quality in certain areas of the care we provide.



Indicator	Target	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	Action to improve performance
Percentage of patients on Care Programme Approach who were followed up within seven days after discharge from psychiatric inpatient care during the reporting period.	95%	99%	98%	98%	99%	98%	99%	We continue to monitor through contract performance meetings.
Percentage of admissions to acute wards for which the crisis resolution home treatment team acted as a gatekeeper during the reporting period.	95%	91%	83%	95%	100%	99%	99%	We continue to monitor through contract performance meetings.

Indicator	Target	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	Action to improve performance
Percentage of patients readmitted to hospital within 28 days of being discharged from hospital.	New indicator for 2014/15		3%	13%	12%	2%	3%	We continue to monitor through contract performance meetings.
The number and, where available, rate of patient safety incidents reported within the organisation. The number and percentage of such patient safety incidents that resulted in severe harm or death.	New indicators for 2014/15		18% 1%	5,448 incidents 39/ 5,448 incidents (0.71%)	5,157 incidents 54/ 5,157 incidents (1.05%)	5095 105/ 5095 =2.06%	6388 114/ 6388 =1.78%	We actively encourage all staff to report all patient safety incidents so we can continually improve the care we give. We continue to monitor through contract performance meetings.
Percentage of staff during the reporting period who would recommend Livewell Southwest as a provider of care to their family and friends.	60%	68%	71%	-	79%	-	78.5%	There will be a further staff survey taking place in May 2019.



AWARDS AND RECOGNITIONS

Livewell Southwest is proud to be able to describe its staff, and services, as award-winning. Staff from across our localities and services continue to be recognised on a local, regional and national level for their commitment, innovation and excellence. Here is just a snapshot of the awards won, and recognition received, in 2017/18:

Melanie Wilson was a finalist in the Team Leader of the Year category at the Social Worker of the Year Awards

Shortlisted for the Health & Social Care Social Enterprise category at the **UK Social Enterprise Awards**, singled out for “excellent vision and strategic direction, clear leadership and social, environmental and community impact”

Finalist in the Plymouth Herald Business Awards 2018, shortlisted in the **Apprenticeship Development** category

Gareth Benjamin was awarded Mental Health Social Worker of the Year at the Social Work Awards 2017 for his “tremendous advocacy for the people he works with and having a clearly positive impact on the area he works in”



Finalist in two categories of the HSJ Awards recognising the **finest achievements in healthcare**. Livewell Southwest’s successful recruitment and retention project ‘Investing in Growing Our Own’ was shortlisted in the Workforce category, alongside the ‘Wellbeing Club’ initiative, transforming the lives of people with leg ulcers, shortlisted in the Specialised Services Redesign category

REVIEW OF 2016/17 AIMS AND QUALITY ACHIEVEMENTS

Each year we measure our organisation's progress against the priorities we set for ourselves 12 months previously. These aims set out below allowed us to assess in 2016/17 whether those in our care truly felt safe, cared for and confident.

- 1) **A recognised employee-led organisation:** use the knowledge of staff across Livewell Southwest to help shape the future of the organisation and the services they deliver.
- 2) **Based around local people and communities:** continue to develop our organisation to reflect the uniqueness of the communities we serve.
- 3) **Providing seamless system leadership:** responsive to change and continually innovating new ways of working to avoid preventable hospital admissions.
- 4) **Sustainable, successful and admired:** develop our organisation in an innovative manner to ensure we are fit for the future delivery of health and social care services.
- 5) **Experience exceeding expectation:** reduce the need for people to tell their story twice by delivering quality care shaped by staff and our communities.

A recognised employee-led organisation

Our staff are our biggest asset - we champion their progression and development to help better inform and shape the organisation by drawing on their passion, commitment and knowledge. We have created an open environment to encourage suggestions to improve behaviour and change practice across our localities.

In 2017, we established an 'Admin Professional Practice Forum' to develop our administrators. As a result, admin staff from all areas of the business share expertise and best practice and have enhanced career development pathways.

Positive feedback on this approach has led to an 'Apprenticeship Forum' to enable those benefitting from Apprenticeship Levy funding to shape the delivery of programmes and the creation of career pathways. These forums will also be linked to other employee-led initiatives, including Our Voice and the wider Wellbeing at Work agenda.

Based around local people and communities

We work in locality teams that reflect the uniqueness of the communities we serve, with locality managers responsible for overseeing delivery of integrated services in their patch, working closely with city-wide and urgent care services, the newly-formed GP federations and local partners to deliver coordinated care to local populations.

Our Service User and Carer Engagement Forum enables people who use our services and their carers to influence the future direction of the organisation, ensuring we continue to respond to the needs of local people.

Providing seamless system leadership

We are proud to work closely with colleagues in the NHS to provide a wide range of NHS services. However, being an independent community interest company means we have the ability to respond quickly to change, innovating new ways of working as the needs of the people we care for change. We are developing our locality teams to work more closely with primary care and community groups to help people remain well and at home for longer. We are also expanding our innovative Wellbeing Club, which combines social interaction with holistic treatment for patients.

Sustainable, successful and admired

By investing in future-proofing our workforce, we have created opportunities for staff at various levels to feel positive about their career prospects by giving them training, mentoring and the space they need to learn and grow within Livewell Southwest.

For example, all our registered nurses have a minimum of three protected days per year for Continuing Professional Development (CPD), and we also ring-fence a dedicated budget to support all CPD.

Apprenticeship Levy Funding has provided a fantastic opportunity for us to offer genuine career opportunities for new starters and existing staff within the business. In 2017/18 we decided to increase apprenticeship pay to £7.05 per hour, ensuring fair pay for a fair day's work. We were also a finalist in the Apprenticeship Development Award category at the Plymouth Herald Business Awards.

We were invited to take part in a pilot for the Nursing Associate Programme (NAP), which launched in January 2017. This gives individuals an unprecedented opportunity to attain a Nursing and Midwifery Council-registered role that combines academic study with workplace learning. The programme has enabled us to recruit staff from a variety of clinical backgrounds, including mental health, general nursing and children's services, with another 20 places available this spring.

At Livewell Southwest, we offer mentor supervision and bespoke one-to-one support when required. A move to ensuring feedback is given face-to-face, bolstered by follow-up electronic surveys has enabled the NAP to develop dynamically. The programme has been acknowledged by Parliament through the support of Dr Sarah Wollaston MP, Chair of the Commons Health Select Committee, as well as represented at Livewell Southwest's Board and externally to a variety of audiences, spanning from Cornwall to London.

The NAP represents an excellent example of how we have focussed efforts on making our workforce sustainable, in conjunction with our systems partners.

Experience exceeding expectation

More than 70% of the people who receive support from adult social care also receive support from a healthcare professional. So now our social workers, community care workers, district nurses, health visitors, therapists and community mental health staff work together in integrated locality teams, greatly reducing the number of professionals unnecessarily involved in people's lives. We have single teams, working together, around the needs of the person, only asking for information once.

We are now working on a single, digital care record for everyone, joint health and social care triage, assessment and documentation and single points of contact for our integrated services to streamline further the care and support people receive.


In 2018, Livewell Southwest adopted a new strategy with three progressive aims to ensure the continual development of our organisation. These aims were to be well-connected, well-skilled and sustainable.



STAFF SURVEY

Livewell Southwest invests in an annual staff survey, inviting every member of staff to share their views on everything, from how we shape and structure our services at a community-level, through to individual training needs.

The results provide valuable insight into what Livewell Southwest has to be proud of, and where it needs to improve – either on an individual basis, or as a larger team.

 **83%** of staff 'strongly agreed' or 'agreed' that they felt enthusiastic about their job

By harnessing this primary feedback from the passionate and committed people working on our frontline and in essential support services, we can build on what is already working and drive change in areas that could do better. This continual dialogue is absolutely key to making Livewell Southwest a healthy and happy place to work. Our staff drive our success: we are employee-led and proud of that fact.

82% of staff stated they felt 'part of a team' 



89% of staff agreed that Livewell Southwest supports their health and wellbeing, whether it be a supportive network of colleagues, the intranet hub of resources focussed on events and training, or new initiatives like the subsidised yoga classes.



63% felt supported to progress and develop within their role, mainly citing the Livewell Southwest Academy as a place that grants them access to training, best practice and recognition of talent.



Livewell staff member



Livewell staff member



Livewell staff member

Areas we want to improve – and how we’re improving



43% of staff struggle to take their break entitlements. We have launched ‘Take Your Lunch’ - a campaign to encourage teams to explore the benefits of taking a break via activities such as scheduled walks, ping pong games and team lunches. Staff wellbeing is also now a standing item on all team meeting agendas.



40% felt good performance could be better rewarded by management. To combat this, we are openly discussing with managers how to best reward good performance and the importance of recognition within teams, including developing and rewarding talent.



58% of staff could not identify each member of the Executive Team (ET). To improve visibility and enable staff to put faces to names, we created short videos and posters with biographies of the ET, displaying them throughout all localities.

Our ET and Board meetings are now held out in localities in which staff are based, and also include an hour-long session for staff to drop in to chat.

RESEARCH PROJECT HIGHLIGHTS

In 2017/18, Livewell Southwest has continued to extend the range of clinical areas and services that offer patients and their families the opportunity to take part in research. We now have studies focussing on strokes, Parkinson’s Disease, mental health, autism, dementia, dental and podiatry services. Our clinicians continue to engage fully with a wide range of ongoing research projects and, with their support, have enabled many studies to be delivered on time, and to target.

We are working collaboratively with the University Hospitals Plymouth NHS Trust, as well as GP practices in our region, to extend research opportunities to the people of Plymouth. In addition, we are working with researchers from local universities, such as Exeter, to help deliver studies by, respectfully, providing access to people using relevant Livewell Southwest services. We have also supported staff who are studying to set up their own research as part of their Masters programme.

Parkinson’s Disease case study

By collaboratively working with Dr Camille Carroll at Derriford Hospital, we have begun to build a portfolio of studies into Parkinson’s Disease (PD); a condition in which parts of the brain become progressively damaged over many years.

One lead study, PDSAFE, was the largest trial of its kind in the world, led by researchers at the University of Southampton and delivered by research-active clinicians from Livewell Southwest.

The study looked into the effectiveness of a personalised physiotherapy intervention aimed at reducing, or preventing, falls in patients with PD. Following completion of the study, one of our participants, Bob Keane, shared his experience with the National Institute of Health Research (NIHR), which was then subsequently published in the Plymouth Herald.

“Research is a positive thing to be involved with; taking part in the study has also given me a bit of confidence back.

“Parkinson’s can be a lonely and frustrating disease to live with, so an offer to be involved in something interesting and positive such as research can really help you to feel more involved and like you personally can make a difference for others too.

“There is also always that bit of hope that you may be the one that tips the balance and enables someone to find a cure.”



Bob Keane, participant in Parkinson’s Disease research programme

Here’s a cross-section of some of the other research studies currently being undertaken

Subject area	Research study	Scope and purpose
Dental	To support parents to look after their babies’ teeth. Led by Jo Erwin, Plymouth University.	Thirty first-time mothers, aged 19 or under, with infants under two who were receiving support from the Family Nurse Partnership were recruited with assistance from family nurses and administrators at Livewell Southwest. A further phase of this study is planned.
Mental health	The effectiveness and cost-effectiveness of Mother and Baby Units versus general psychiatric units. Led by Dr Paula Robinson of Livewell’s Home Treatment Team. Professor Louise Howard from King’s College London (Section of Women’s Mental Health) was the Chief Investigator who set up the study and KCL worked together with the University of Manchester to deliver the study.	This research, in line with the National Institute for Health and Care Excellence (NICE) guidance, delves into further development of services for women with acute post-natal severe disorders. The results aim to assist strategic decisions for commissioning perinatal mental health services. Clinicians and staff from the Glenbourne Unit, Assertive Outreach Service, Home Treatment Team and Options helped to identify women who were admitted due to acute perinatal psychiatric disorders in the first year post-delivery. When deemed appropriate, they were offered the opportunity to be interviewed about their experiences of care received. Analysis of the findings is underway.
Stroke	Standing Practice in Rehabilitation Early after Stroke (SPIRES). Led by Angie Logan, Plymouth University.	Our physiotherapy team on the Stroke Unit, Skylark Ward at Mount Gould Hospital, successfully delivered the SPIRES study, offering patients chance to use a standing frame to practise functional move and was able to offer patients a new therapy while on the ward.

QUALITY ACCOUNTS

Our Quality Accounts detail the developments we have made in the past year, as well as our plans to improve our patient care over the next 12 months. In addition to reporting them to you here, we also publish them on our website and on the NHS Choices website.

Positive and proactive care

In July 2014 the Department of Health published ‘Positive and Proactive Care: Reducing the Need for Restrictive Interventions’. This guidance makes clear that restrictive interventions may be required in life-threatening situations to protect both people who use services and staff or as part of an agreed care plan.

Since that time, Livewell Southwest has developed a document benchmarking against the standards

identified by the Department of Health and this is discussed regularly at the Restrictive Intervention Governance Group. This is a multi-professional group that has formed to look at some aspects of restrictive intervention from both an operational and training perspective.

Livewell Southwest has been able to demonstrate increased reporting and awareness of what constitutes a restrictive intervention, and there is evidence of staff using least restrictive holds. The enhanced incident reporting that was refined and introduced in November 2015 includes additional fields to record the type of holds used, the length of time a person is in restraint, whether a debrief happened and to evidence the reasons for a type of restraint e.g. to administer medication, physical limitations / pre-existing injuries.

Incident reporting

We recognise the value of ensuring any lessons that can be learned from incidents are shared across our organisation. From 1 April 2017 to 31 March 2018, a total of 7,943 incidents were reported, of which: 7,133 resulted in no harm or were categorised as a low graded incident - with 392 near misses reported.

There was an increase of 668 incidents reported this period, compared to the 7,274 incidents that were reported in 2016/17. All staff are actively encouraged to report incidents and near misses. Promoting a culture whereby incidents are openly reported is very

important to Livewell Southwest. Sharing information about these incidents among our staff allows us take stock, identify learnings and, where pertinent, adapt our organisation to address issues which can prevent or reduce incidents in the future, as well as reduce the risk of incidents that could have more serious outcomes. Training is provided across the organisation on:

- ▶ How to use a web-based reporting system
- ▶ How to report correctly and the benefits that come with incident reporting
- ▶ To further embed the positive safety culture evident throughout Livewell Southwest

COMPLIMENTS AND COMPLAINTS

Between April 2017 and March 2018, Livewell Southwest received 1,568 compliments and 232 complaints. Stakeholders made 199 general comments, and 326 concerns were raised.

We welcome and encourage feedback from anyone who is touched by our services; whether receiving treatment or caring / supporting someone who is, or as a colleague.

We're delighted that in 2017/18, the majority of the feedback we received was positive. We didn't get it right all the time, but critical comments, concerns or queries about how we operate are equally valuable to us, helping us to identify if, when or how we are falling short of the high standards we set ourselves, and how to put it right.

"I was at the point where I felt I was not going to be able to walk for much longer, but the treatment I received basically changed my life for the better. I owe so much to the team - I have control back in my life... thank you."

Livewell service user



"The service my mum received has been exceptional. No amount of money could pay for the compassion she has been shown from every staff member. Thank you to a great team for seeing my mum so quickly and treating her with such respect. A brilliant job, and keep up the good work!"

Livewell service user



Last year, 96 per cent of the complaints we received were acknowledged within three working days. In 2017/18 we acted on 75 per cent of complaints submitted within 45 days.

We have a duty to inform anyone who uses our services if their safety has been compromised, but we also instil within our workforce a culture of being transparent with people, and discussing incidents quickly, honestly and compassionately to help all involved.

"I wish to thank the nurse and care worker who attended to us from the bottom of my heart. You were fantastic and showed care, consideration and compassion to my wife and I. You were a credit to your profession - you were angels."

Livewell service user



"Everything I've been through, my Family Nurse has always been there to pick me up and tell me that everything's going to be alright. Even in the deepest, darkest moment of motherhood, she reminded me of the amazing job I was doing. She is amazing - I love her."

Livewell service user



Changes as a result of complaints and comments

You said	We did
A patient was discharged from a unit with relatives unaware that this was being considered.	Our process was changed to ensure that the ward team (which includes, nurses, doctors and therapists) meets on a daily basis to review patients and decide if it is appropriate to discharge them.
Relatives were unaware that if they visit a Local Care Centre ward at weekends they should use lower entrance.	New signs were erected to direct visitors at weekends to ensure they were clear on how to gain entry.
A patient was given an incorrect dose of medication.	Drug stock is now separated into strengths and stored on different shelf levels, according to drug strength.
An appointment letter was sent to a patient with incorrect address for a team's base.	A new template has been added to team administration files to ensure the correct information is provided.
A patient was not escalated to the podiatry team quickly enough when they required a priority appointment.	An escalation protocol is now in place to ensure a podiatrist can review any patient who may require priority appointments.
A person being seen by the Learning Disabilities service was not aware that a staff member was away from work due to illness, and unable to attend an appointment.	Easy read letters will be sent to patients if time allows, otherwise a call will be made to ensure patients are aware.
Staff in an inpatient setting were not fully aware of what the Continence Service can offer	Training was provided to all staff within the unit by the continence link nurse.
Staff in the community were not fully aware of the Continuing Healthcare process and were unable to provide detailed advice	Staff within the team received Continuing Healthcare training by staff from the Continuing Healthcare department to ensure they were aware of the processes.
Waiting times for patients to be accessed by Psychiatric Liaison were too long.	The team now works 24/7 compared to its previous service which only operated 12-hour days.

STATEMENTS FROM STAKEHOLDERS

"We are fortunate that Livewell Southwest has been a partner supporting Scott College since we opened in September 2017. They support and encourage our students by providing work placement opportunities, visiting the college to deliver masterclasses and giving our students a valuable insight into the variety of careers on offer in the medical and healthcare profession."

Martyn Cox, Head teacher of Scott College



"Working in partnership with Livewell Southwest is key to responding to the future demands on our health and social care services, if we are to prevent unnecessary hospital admission and allow patients to remain at home. The impact of this approach is evident in our partnership with Livewell, combining our resources to provide an end of life hub co-ordination service. Collaboration between our two organisations delivers better patient-centered care for our community and we are very proud of our partnership."

George Lillie, Deputy CEO and
Director of Clinical Services
at St Luke's Hospice Plymouth



"We aim to continue our close work with Livewell Southwest to ensure that the patient voice is heard consistently across the organisation. We note the progress against the stated aims for 2017-18 and also the key areas for development during the forthcoming year, particularly those around digital skills and partnership working with University Hospitals Plymouth NHS Trust."

"We look forward in continuing our positive relationship with Livewell Southwest into the coming year through ongoing representation on key committees/boards and by further collaborative working to benefit local people."

Tony Gravett MBE, Deputy Manager,
Healthwatch Plymouth

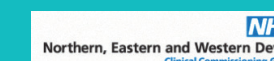


"We review the quality of services throughout the year, including safety, effectiveness and experience and Livewell Southwest has provided evidence of a commitment to high quality care. This annual review summarises and reflects the evidence and I commend it."

"Looking ahead, the CCG welcomes the specific priorities for 2018/19 and beyond, including investment in a well-skilled workforce, digital solutions and sustainable care. The CCG is assured that these priorities were developed in conjunction with key stakeholders, including patients and staff."

"This Quality Account is well considered and is reflective of a strategic approach to quality improvement. The CCGs look forward to our continued collaborative working to deliver safe and high quality care."

Lorna Collingwood-Burke, Chief Nursing Officer,
NHS Northern, Eastern and Western Devon CCG





**For more information about Livewell Southwest
and its services visit:**



www.livewellsouthwest.co.uk



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