



At the heart of the community.....

*your* healthcare

# Quality Accounts

April 2023 - March 2024

*At the heart of the community*

# Welcome to our Quality Accounts

**At Your Healthcare we are proud to deliver safe, effective, caring and well-led community health and social care services in Kingston Upon Thames, and learning disability and autism services in Richmond Upon Thames. This annual Quality Account provides a welcome opportunity to look back at some highlights of the year.**

The Care Quality Commission's inspection report about our Children, Young People and Family services is an obvious place to start. We were pleased to receive a Good rating, with our safeguarding provision highlighted as being robust and thorough and our treatment of children and their families and carers being described as kind and compassionate. Families provided overwhelmingly positive feedback about the service, praising staff for their help and support and explaining that they felt listened to, informed and involved in their children's care. Staff members also gave the inspectors very positive feedback, describing a good culture, very supportive management and excellent staff wellbeing support. Adopting a partnership approach in healthcare is not new, but increasingly, the full benefits of ensuring that health, social care and the voluntary sector work closely together to

provide joined-up care, are being recognised. Your Healthcare has been a key founding partner in one such initiative during 2023-24. Proactive Anticipatory Care (or PAC), supports patients with multiple long-term conditions and frailty who are at risk of becoming reliant on emergency care. The PAC programme co-ordinates a wide range of services, including GPs, community nursing teams, social workers and mental health workers. I was delighted to receive feedback from the South West London Integrated Care Board which expressed appreciation for the outstanding workforce, management and leadership we had provided to the Kingston and Richmond programme over the last two years. Recognition for our skilled and talented staff members is always welcome. This year I was pleased to be able to congratulate a number of colleagues who reached the finals of national awards schemes and delighted to celebrate winning two particular awards: the 2023 Nursing Times Award for Continence Promotion and Care, and the Best Health and Wellbeing Provider in the 2024 Kingston Borough Business Awards. For both awards, acting on feedback from our patients and service users played a key role in our success, so I was delighted to



**Ed Montgomery** *Managing Director*

see that 2023-24 saw an impressive 50 per cent increase in the amount of feedback received from them. This puts us in a very strong position to learn from those who have experienced our care. An important development during 2023- 24 was Your Healthcare's transition to a new way of working with patient safety incidents, building its Patient Safety Incident Review Framework Plan (PSIRF). The new patient safety improvement approach accepts that risk is inevitable and looks at the whole system in order to reduce the risk and likelihood of patient incidents reoccurring. Staff members have accessed the required training with enthusiasm and our plan has been developed and promoted across the organisation. I can confirm, to the best of my knowledge, that the information contained within this report is an accurate reflection of quality and performance during 2023-24.

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# About us

Established in 2010, Your Healthcare CIC is a social enterprise, not-for-profit organisation that delivers integrated health and social care services for residents in the Royal Borough of Kingston, and learning disability and autism services for adults in the London Borough of Richmond.

As a Community Interest Company (CIC), we reinvest any surplus that we generate back into our frontline services thereby benefitting our community. We were the first London NHS organisation to be established as a social enterprise (a Mutual) in 2010 and since then we have continued to invest in, and provide, a wide range of health and social care services, guided by what our local community, and our staff members, tell us is most needed.

We're guided by our local community and our staff members



## We support our community

**Our community is at the heart of everything we do. We are a socially responsible organisation with the ability to respond quickly and deliver integrated care that achieves the best outcomes for service users and their families.**

Our support teams are vital to us. From Learning & Development through to Facilities and IT, they provide an efficient yet innovative platform for our frontline teams.

Our frontline services provide a range of health and social care services for babies, children, parents, young adults, through to older people, and including those with the most complex needs. Our teams offer a person-centred approach, ultimately helping the individual to feel as comfortable as possible.

## We value our people

**Everyone is valued, and is encouraged to 'have a voice' and to come together to own our environment so that it is one in which we can all learn and thrive, providing a positive platform for us to deliver the best health and social care possible for our community.**

We care about our staff members, and their wellbeing is important to us. We ensure help and guidance is available including confidential psychological wellbeing support.

The essential principles of equality and inclusion are embedded within the very fabric of our culture. We make the reasonable adjustments required to ensure everybody feels treated fairly and with respect, and embrace the rich variety of views that diversity brings. Our ultimate aim is for all our staff members to feel included, be connected, enjoy work and deliver the best services available for our community and for each other.

## We work in partnership

**We value our relationships with commissioners, stakeholders and other local partners which ensure that the care we deliver is of the highest quality and is responsive to the needs of our local community.**

We have continued to adapt our approaches to meet the needs of our service users

Your Healthcare was named **Best Health and Wellbeing Provider** in the 2024 **Kingston Borough Business Awards**

### Our Community

During this period, the Kingston community continued to experience the after-effects of living through a lengthy pandemic and the ongoing impact of a 'cost of living crisis'. The implications of these issues were felt in a number of ways and teams within Your Healthcare found themselves needing to make provision for an **increasing number of service users with complex acute and chronic physical, psychological and social needs.**

The learning gained during the pandemic about different ways of working, enabled us to continue to support the efficient and effective delivery of healthcare services, while improving access for patients and service users. These approaches were vital and remained of particular importance as the demand for support from some services, including neurodevelopmental, mental health and safeguarding, continued to escalate. Whilst this was in the main attributed to the combined effects of the pandemic period and national financial challenges, in the case of neurodevelopmental provision, it was also affected by increased societal awareness about ADHD and autism assessment and medication shortages.

### Our Key Responses

During the year the organisation, as a provider of NHS-funded care, completed its extensive transition to managing patient safety under the requirements of the NHS Patient Safety Strategy, and launched its Patient Safety Incident Review Framework, approved by the SWLICB (South West London Integrated Care Board) and the YH Board.

The aim of the new approach is to improve the patient safety culture of organisations and effect meaningful change by using a systems approach to investigate when things go wrong. Evidence demonstrates that this approach improves outcomes for service users and patients.

During the year our infection control team, supported by wider members of the organisation, continued to prioritise the safety of the service users and staff under its care. In relation to COVID 19, PPE continued to be provided, when needed, to ensure the risks to staff and service users were minimised and testing and isolation regimes remained compliant with national guidance. The vaccination of staff was promoted and monitored and relevant teams supported the provision of vaccines to more vulnerable service user groups. The most vulnerable adults and children in our care continued to be

prioritised during the year, and we participated actively in the Learning from Lives and Deaths reporting (LeDeR), prioritising the needs of service users who have a learning disability and/ or who are autistic. This ensured that we supported the review of care received by a group known to have poorer health outcomes. Our work in this important area was also highlighted by YH representation at a local and national level, where we were shortlisted for a range of associated awards.

## Awards

**In December Your Healthcare was named Best Health and Wellbeing Provider in the 2024 Kingston Borough Business Awards, organised by the Kingston Chamber of Commerce.**

We were recognised for our role delivering safe, high quality, patient-led community health and social care services. The judges were particularly impressed by both our ability to treat patients in the community, reducing or removing the need for costly hospital care, and in our social enterprise model which allows us the freedom to adopt new and progressive ways of working. We were also recognised at a national level. Your Healthcare was shortlisted in two categories of the Royal College of Nursing Awards, for a

school-based young people's Mental Health Ambassador project run by our School Health Service and for Project 2020, a programme delivered by our Learning Disability Team to address health inequalities and access to preventative health programmes, for people with a learning disability. The same team were also extremely proud to win the 2023 Nursing Times Award for Continence Promotion and Care. The winning project was recognised for its patient-centred approach to improving clinical outcomes for adults with intellectual disabilities, which positively impacted their quality of life.

## Care Quality Commission Inspection

**Our Children, Young People and Family services were inspected this year and we received a Good rating, with our safeguarding provision highlighted as being robust and thorough and our treatment of children and their families and carers being described as kind and compassionate.**

The families who were contacted by CQC, provided overwhelmingly positive feedback about the service, praising staff for their help and support and explaining that they felt listened to, informed and involved in their children's care.

## System Partner Feedback

**We work on a range of core initiatives with our system partners and one of these areas has been our involvement in the Proactive Anticipatory Care Programme (PAC).**

This targeted programme aims to work with people of all ages experiencing frailty, multiple long-term conditions and/or complex needs to stay independent and healthy for as long as possible, at home, or a place they call home. The South West London Integrated Care Board (SWL ICB) provided feedback to us this year, in relation to our involvement, expressing appreciation for the outstanding workforce, management and leadership we had provided to the Kingston and Richmond programme over the last 2 years. It highlighted our commitment to excellence, outstanding professionalism, responsiveness and willingness to go above and beyond to ensure a quality standard of provision.

# Quality Accounts

April 2023 - March 2024

**In line with the CQC's transition to a new Single Assessment framework in 2023-24, we have followed the Care Quality Commission's (CQC) new Key Questions model for this section of our report:**

Are we  
**Safe?**

Are we  
**Effective?**

Are we  
**Caring?**

Are we  
**Responsive?**

Are we  
**Well led?**

# Are we Safe?

**We are committed to ensuring that our service users and staff members are kept safe and protected from avoidable harm.**

The number of Quality Concerns raised against us by other organisations remain low with 5 in the year.

**The new and sustainable developments to our services across 2020-23 became well established for our staff, and across our range of service provisions, broadening access to our service users.**

## Infection Control

**High quality infection prevention and control is essential, to ensure that our staff members deliver safe and effective care to our service users.**

**This provision continued to be of the upmost importance during the year.**

Overall responsibility for this area is held by our director of infection prevention and control, overseen by the infection prevention and control lead who in turn supports the infection prevention and control operational group. This group of frontline service leads provide support and guidance to their colleagues and ensures best practice is shared across the organisation.

A robust infection prevention learning programme runs throughout the year and is offered to all staff members.

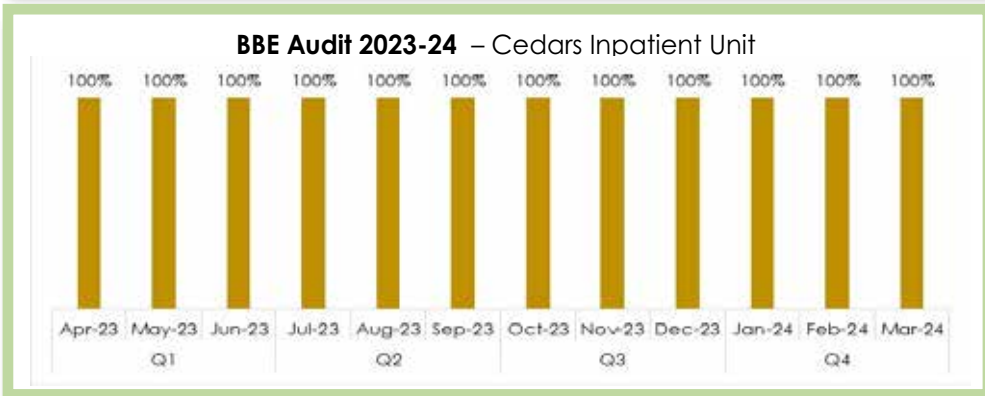
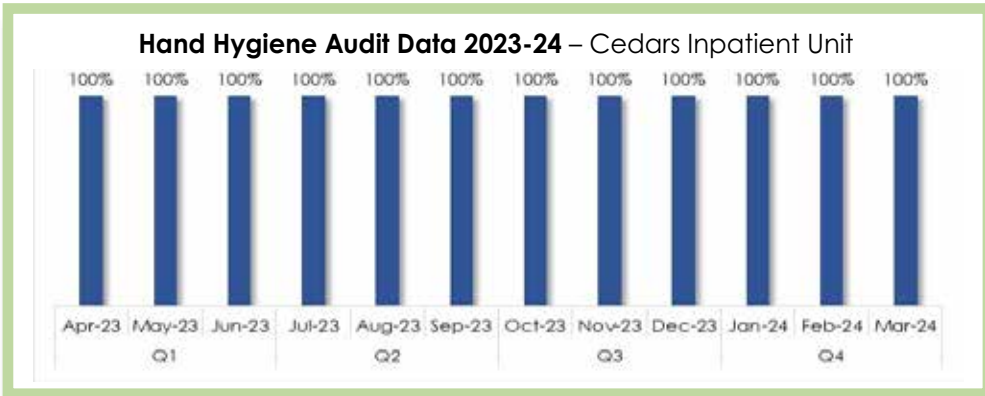
Compliance with the IPC elements of the Social Care Act 2008 are monitored through a range of audits, including

Environmental, Personal Protective Equipment (PPE) use, hand hygiene and bare below the elbows.

The infection prevention lead and, due to a period of sickness, her frontline service lead, maintained regular contact with the South West London Infection Prevention Team and provided updates to the senior leadership and frontline service teams. This ensured that Government guidance and directives were effectively implemented across the organisation, through policy and process updates, environmental risk assessments, and vitally, inpatient infection prevention and management, including Covid-19.

IPC audits, conducted to support safe outcomes for service users, are an ongoing priority for all service areas and in the latter period of the year an IPC audit improvement plan was put in place to support easier access to, use of, and compliance with the wide range of required IPC audits. This acknowledged the workload associated with audit and the value of the learning that comes from it, which supports an understanding of areas that may need improvement. This improvement plan demonstrated areas for improvement, all of which demonstrated improvements by the end of the year.

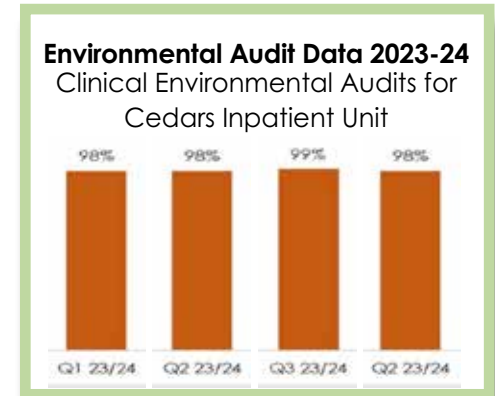
Our compliance against core IPC requirements has been well maintained.



## Patient-Led Assessment of the Clinical Environment (PLACE)

This annual assessment, which aims to improve standards of cleanliness across all hospitals, hospices and social enterprises that provide NHS care, was paused between 2020 and 2022 due to pandemic restrictions, capacity issues and staffing challenges.

It returned in a 'light' local format in 2022-23 instead of a national format, with the intention to run a national PLACE in 2023-24. However, due to an extended period of IPC staff sickness during the year, this remained paused but local environmental audits continued to be run for all YH settings where patient/ service user care is delivered, with good outcomes.





## Monitoring pressure ulcers and moisture lesions

**Pressure ulcer prevention and management is one of our top clinical safety priorities. In 2023-24, two Category 4 pressure ulcers were reported by Your Healthcare related to patients in community settings, and none within our inpatient setting.**

When pressure areas and moisture lesions are discovered, they are reported through the required reporting channels and, where they meet the relevant criteria, they are raised as a safeguard with the local authority. They have traditionally been investigated through root cause analysis and then any identified and required changes to process and practice are acted upon. However, at the end of the year, this began to change, as the organisation transitioned across to its use of the new Patient Safety Incident Review Framework (PSIRF). The new approach no longer requires us to report significant incidents to commissioners, the SWL ICB, including more significant pressure ulcers. Incidents are reviewed instead through new locally defined processes that

form part of the YH PSIRF Plan. These approaches take a more systemic view, underpinned by the evidence-based understanding that no one thing leads to the occurrence of an incident and considers the views of a wider group of staff to contribute to learning about system gaps. This approach supports the enactment of meaningful, practical and realistic action plans that actively engage service users and do not attempt to remove all risk, which is unrealistic, but rather to reduce risk to As Low As is Reasonably Practicable (ALARP) within the finite resources and capacity of the organisation.

Our incident reporting system distinctly captures all categories of moisture lesions and pressure ulcers including those that are unstageable as per the \*NPUAP/ EPAUP/PPPIA (2014) international classification tool. In cases where more than one lesion is present, each lesion is reported separately to support accurate data capture and clinical investigation.

(\*National Pressure Ulcer Advisory Panel, European Pressure Ulcer Advisory Panel and Pan Pacific Pressure Injury Alliance).

## Venous Thromboembolism risk assessment for inpatients

A patient's risk of developing a Venous Thromboembolism (VTE) has a direct safety impact on them, therefore we undertake snapshot audits on our inpatient ward. This has continued to demonstrate very high compliance, with an average across the year, of 99.33% of patients having VTE assessments completed within 24 hours of admission.

We are proud of the fact that we only needed to report one Serious Incident this year but proactively investigated non-reportable incidents to support learning.

## Incidents

**In 2023-24 the total number of valid incidents reported at Your Healthcare was 1447. Of these valid reported incidents, 1210 were patient safety incidents and 42.9% of these were attributable to Your Healthcare.**

Staff continued to report things that could have gone wrong (near misses) and did go wrong (incidents). This enabled review and learning to take place which supported improvements in the quality and safety of service provision.

In 2023-24, near misses, those incidents which nearly led to harm occurring, accounted for **11.98%** of all reported patient safety incidents. This represented a slight decrease from 2022-23, highlighting our high-quality reporting and learning culture. Training on the reporting of incidents and near misses is provided during the Your Healthcare new staff induction and at each mandatory update. When incidents or near misses occur, team and service leads make a risk assessment using an agreed matrix, investigate the incident and support the delivery of action plans designed to address identified gaps in our delivery. The action plans put in place to address

any required practice changes, are shared at team meetings and committees and through internal communications and training.

Serious incidents are rare; however, staff members are trained to be vigilant ensuring that if one might have occurred, it is identified early and these are reviewed where relevant, by specialist groups, our medicines management group or pressure ulcer review group and by our patient safety specialist. Immediate action is taken to mitigate against any immediate risks and then the incident is reported to the relevant external bodies and investigated. This supports learning and the opportunity to reduce the risk of future incidents occurring.

In 2023-24 the organisation completed its transition to a new way of working with patient safety incidents, building its Patient Safety Incident Review Framework Plan (PSIRF) which was signed off by the SWL ICB and within the YH committees, towards the end of the year, ready for a 'go live' in April 2024. This requires a new approach to investigating all patient safety incidents, and no longer requires any incident to be defined as a serious incident, which previously required commissioner reporting.

Our Patient Safety Incident Review Reporting Framework was approved during 2023-24

The organisation is expected to develop its own investigatory processes which take a systems approach. Staff have accessed the required training and our plan has been developed and widely promoted across the organisation, to support the required cultural changes.

The new patient safety improvement approach accepts that risk is inevitable and looks at the whole system in order to reduce the risk and likelihood of patient incidents reoccurring, by looking at all of the factors that contributed to the risks. A 'systems' or 'big picture' approach to risk considers all relevant factors, maximising the frequency of things going right and minimising the frequency of things going wrong. This evidence-based approach leads to meaningful change and improvement, at a local and wider level.

## Safeguarding Adults and Children

**Your Healthcare has a long-established safeguarding structure and culture. The safeguarding team, lead adult safeguarding nurses and a named nurse and assistant for children's safeguarding, supervise and train Your Healthcare staff and specific specialist staff from partner organisations.**

These specialist safeguarding practitioners also provide the organisation with assurance that it is meeting its responsibilities through audits and the scrutiny of cases. They report into a joint safeguarding committee operating collaboratively between Your Healthcare and Hounslow and Richmond Community Healthcare which, in turn, reports to the Your Healthcare board.

### Key Achievements for 2023-24:

**An inspection of Children and Young People's services by our regulators, the Care Quality Commission, took place this year and this highlighted the quality of safeguarding management within the organisation. This was despite a picture of ongoing and significant increases in child safeguarding needs which have put increased pressure on YH children's services.**

The use of children and adult safeguarding passports to monitor staff training compliance, introduced during the Covid-19 pandemic, became well embedded during the year and a successful Level 3 child safeguarding day was delivered, which received positive feedback from those attending.

To support ease of access to a range of information related to safeguarding for our staff, we launched a Safeguarding Hub on our intranet, hosted on Microsoft SharePoint. The range of information available in this space will continue to be developed over the next year.



## Safeguarding Supervision

**All staff are able to ask for advice directly from the safeguarding team and they maintain an 'open-door policy' on and offline.**

Formal supervision is provided face-to-face and through virtual routes, to suit the needs and capacity of staff and the supervision team. Through the support provided by the safeguarding team and service leads, staff members are supported to be fully equipped to take the necessary actions required, to promote the safety of service users.

Staff members who work directly with children and their families receive safeguarding supervision as stipulated in our Children's Safeguarding Supervision Policy. This requirement has remained vital in 2023-24, as the numbers of children receiving safeguarding input has continued on an upward trajectory. The safeguarding team receive additional training as supervisors and also access individual personal supervision and group supervision to support the quality of the provision that they make to staff.

A specialist safeguarding nurse continues her work within the school health service, focussing on the supervision of non-clinical team members who may interact with, and support, vulnerable children and young people, as part of their role. She provides focussed support and opportunities for learning and development in the sessions provided.

## Partnership Working

**We are active partners with the Adults Safeguarding Board and Children's Partnership Boards, with practitioners completing joint audits with the Kingston and Richmond Partnership Board (KRSCP).**

We contribute to discussions and support the embedding of recommendations that come from these workstreams. We also work closely with our core health and social care partners and during 2023-24 this included joint working on the implementation of the Persons in Positions of Trust (PiPoT) recommendations, which supports the actions of organisations in relation to allegations about staff who work with vulnerable adults. It also included ongoing scoping work on Liberty Protection

Safeguards (LPS) which are an aspect of the Mental Capacity Act, designed to provide protection to people over 16 who need to be deprived of their liberty. Cross-organisational training will be implemented in 2024-25 when the LPS are published.

Joint supervision with our partners in social care is encouraged and attendance at multi-agency case and strategy discussions is encouraged for adult cases and required for children's cases. This approach aims to support safer outcomes for our service users. Involvement in the children's multi-agency strategy discussions is vital, supporting effective decision making about children at risk, but the continuous increase in these discussions across the last 4 years has been marked, rising from 84 in 2019-20 to 312 in 2022-23 and increasing further to 469 in 2023-24. The challenges this poses have been met with the support of the children's safeguarding team and there are regular discussions with the Borough of Kingston commissioners in relation to the challenges created by this burgeoning workstream.

Complementary mental health supervision continues for the school health team half-termly,

provided by our specialist mental health partners from Achieving for Children. This meets the needs of the school health team's work, with a continued increase in the number of children and young people with mental health problems, who can be a risk to themselves and others. This upward flow continues to show no sign of abating, likely impacted by the after-effects of the Covid-19 pandemic and the cost of living crisis. This has had a wide-ranging impact on children, which includes an increasing prevalence of emotion-based school avoidance, and on their families, many of whom find themselves living for extended periods within temporary accommodation.

A specialist safeguarding nurse continues her work within the school health services

### Falls

**We closely monitor the incidence of falls occurring in our services, to ensure the safety of our service users. They are supported in their environments, whether being cared for as an inpatient, or at home, to minimise their risk of falling.**

In 2023-24 we had an average of 5.51 per 1000 occupied bed days on our inpatient unit, below the most recent England average of 6.63.

As part of our new PSIRF approach we reviewed the management of falls investigations within the organisation and, as part of our patient safety transition, began the review of specific systems approaches to falls investigation, piloting a SWARM huddle approach which will be rolled out with training to the inpatient staff team, to support our Patient Safety Plan 'go live' in 2024-25.

### Learning from Deaths (Mortality Review)

**Your Healthcare uses a case review form, adapted from the Preventable Incidents, Survival and Mortality (PRISM) methodology, to review inpatient deaths.**

These reviews are supported by the ward manager, lead for service effectiveness, commissioned General Practitioner and an end of life specialist.

During 2023-24 there was 1 death which was reviewed using the local tool. Through this review it was established that the care provided before, during and after death, was of a good quality.

### LeDeR- Learning from Lives and Deaths

**Research has shown that on average, people with a learning disability and autistic people die earlier than members of the wider population and do not receive the same quality of care.**

LeDeR reviews the deaths of people within these groups, looking at key episodes of health and social care that

they received. It supports an understanding of what excellent practice looks like and highlights development areas which then inform service improvements. This process is designed to reduce inequalities in care provision and reduce the number of people dying sooner than they should.

Notifying LeDeR about these deaths is not mandated but there is a strong expectation, supported by the Care Quality Commission (CQC), that health and social care service providers will do so. YH complies with this expectation and notifies LeDeR in the event of the death of service users, open to its services, and participates in regional steering groups.

No required improvement activity has been identified by the SW London steering group for YH services, related to our submissions. However, a number of our teams, including the Urgent Care and Support Service who support residential care homes, our Rapid Response Service, who support deteriorating patients and our learning disability team have all been praised for their responsiveness and high quality multi-disciplinary working practices.

## Freedom to Speak Up

**Our culture is one of openness and honesty, where staff are able to raise concerns without fear of reprisal or victimisation.**

Staff can raise concerns about poor practice, or wrongdoing, that could cause harm to service users, their carers or colleagues.

If staff feel the response they receive does not meet their needs, they can contact the Freedom to Speak up Guardian who is currently a non-executive director at Your Healthcare. This is an independent and impartial role, publicised to staff across the organisation. Concerns can also be escalated to a board lead or to the managing director.

The Your Healthcare learning disability team won a prestigious Nursing Times award for their innovative bowel management service.



# Are we Effective?

We have continued to place great importance on providing our service users with high quality care through the delivery of effective services.

Staff have continued to learn new skills, embrace the use of digital technologies and develop ways of working that support both the efficient use of finite resources and best meet the needs of our patients and service users.

The ongoing and relentless pace of challenge and change has continued to place significant demands on our staff who have maintained quality services throughout this period.

## Audits

**Audits are an important aspect of our quality processes, helping to improve services for users against approved guidance.**

Your Healthcare adheres to the National Institute for Health and Care Excellence (NICE) standards and guidance, alongside those from other regulatory and professional bodies. We use audit to support changes being made at a team, service and an organisational level.

## Local (Internal) audits

**The ability to complete audits and service development reviews has been challenging for several years.**

It was first impacted by the Covid-19 pandemic between 2020-22 and then again in 2022-23 by a clinical record keeping system outage. During these periods, YH focussed on infection control and prevention audits, clinical and care record keeping and medicines management audits. In 2023-24 more comprehensive audit activity took place. This remained challenging as the impact of the pandemic and the financial

crisis increased the complexity of patients being managed. However, audit and service developments remain high on staff agendas and this was exemplified by another successful Research and Audit Day held during the year with good attendance from staff, external partners, HealthwWatch Kingston and our regulators the CQC.

#### Some examples of Infection prevention audits activity during 2023-24:

- Environmental risk assessments
- Bare below the elbow
- Hand hygiene
- Personal protective equipment use

### National Audits

**We participate in national cardiac and respiratory rehabilitation audits and this continued in 2023-24, despite service pressures.**

Results are published retrospectively and the results for 2022-23, published in 2023-24, demonstrated excellent outcomes, with the service meeting all 7 key

performance indicators set by the British Association for Cardiovascular Prevention and Rehabilitation and the National Audit of Cardiac Rehabilitation. We also participated in the Sentinel Stroke National Audit Programme which looks at the quality of post stroke provision, against nationally set standards, within healthcare settings. Our Community Neuro Rehabilitation Service met the required national standards.

### Research

**Despite the financial challenges associated with maintaining a research function within the organisation, Your Healthcare's research support team have continued to promote excellence and enhance evidence-based best practice.**

The team receive research proposals from staff members and offer feedback and support from proposal, through ethics, to delivery. It tracks progress and then shares its outputs with the wider organisation. Your Healthcare staff are encouraged to take an innovative approach to care and service delivery and the research team has supported their 'freedoms' when they design research projects that

might lead to improved service outcomes. New and ongoing projects were supported by the research lead and rotating assistants, and monitored through the governance frameworks in place within YH.

Another successful research and audit day was held in September

#### Our Research Projects in 2023-24

Projects during 2023-24 included Screening for Hearing Loss in People with Learning Disabilities, and the Impact of Autism Diagnosis and Healthcare Professionals' Awareness.

One piece of research was published during the year which looked at the use of tap water in place of saline for the cleaning of wounds. This research concluded that this was a safe and cost-effective solution for wound cleansing.



## Equality and Diversity

**We are committed to promoting equality and diversity within our workforce and ensure that we are compliant with the requirements of the 2010 Equality Act and national frameworks and strategies. We adhere to the Workforce Race Equality Standards (WRES) and the Equality Delivery System (EDS2) which is a robust framework launched to assist NHS organisations and those providing NHS services, to review and improve their performance for people with protected characteristics ensuring that services are fair and accessible to all.**

The repercussions of the Covid-19 pandemic and the cost of living crisis on vulnerable people and groups, continued to make it essential that YH could easily identify people considered to be at greater risk. This included ensuring ethnicity was recorded at the point of contact with patients and our high rates of recording continued to be maintained, during 2023-24, through a concerted level of encouragement by the data and information team. Our Age, Diversability, Race Equality Inclusion and LGBTQ+ network groups continued to run through the year and we consulted with our staff membership to assess their impact. The result of this consultation provided positive feedback and some additional learning. As a consequence of our engagement with these groups we also made some facilities changes providing some gender-neutral toilet facilities for both staff and patients. As the year progressed we moved towards a staff member led model of delivery,

relaunching the groups and offering facilitation training to their membership. We also allocated sponsors to each group from the leadership team, people who had both an interest in, and knowledge of, specific equality areas and could facilitate any required activity or changes. As the year closed and with declining memberships and a lack of facilitators coming forward for the groups, we began to take a different approach and integrated a 'We're Listening' slot into our regular Base Briefing, which is open to the whole organisational membership. We also provided EDI suggestion boxes in our buildings for staff. These two approaches provide staff with an opportunity to raise areas related to EDI, either in advance, in person or anonymously and this plan was communicated to staff via regular communications and via the Equality Diversity and Inclusion Hub on our intranet site, hosted on Microsoft SharePoint.

## Training and Development

**A range of training and development opportunities are offered at Your Healthcare, including apprenticeships, independent prescribing courses and Master's and undergraduate degree courses, including the Specialist Community Public Health Nurse qualification SCPHN.**

Leadership development for staff was accessible via a range of online modules and via apprenticeship routes. The plan to reconsider an internal comprehensive leadership programme remained under review. The learning and development team, who moved the majority of training online for staff in 2021-22 as a response to the restrictions imposed by the Covid-19 pandemic, has maintained a hybrid model of delivery which supports different learning styles as well as accessibility. The training team also provide regular training communications highlighting course availability. These approaches continue to support the achievement of mandatory training levels for staff with some ongoing challenges due to staff capacity being supported with bespoke

The SCPHN programme ran again in 2023-24.

approaches. Training compliance levels are now provided via the Electronic Staff Record portal, which supports service leads to manage the compliance levels within their teams, supporting the delivery of good quality and safe provision to service users.

### Apprenticeships

**During 2023-24 we supported 10 staff members on apprenticeships.**

**The programmes included registered nursing, nursing associates, health care support workers, physiotherapy and a clinical associate in psychology.**



# Are we Caring & Responsive?

Compassion, respect and dignity are essential and central to the way we deliver care. Our services are delivered in direct response to the needs of our service users and their families.

The way we delivered services changed during the Covid-19 pandemic's height, necessitated by infection prevention and control restrictions and the need to support service users to feel safe.

Whilst the majority of provision returned to a face-to-face model after this period, we have, where appropriate and helpful, maintained some online delivery as part of business delivery as usual.

This approach supports a range of efficiencies and is based on service user feedback that suggests many elements of service delivery have become more accessible to a range of service users when provided in flexible formats.

## Duty of Candour

Promoting a culture of openness plays an essential role in improving safety for any of our service users, as well as the healthcare services we provide.

Our 'Being Open and Duty of Candour' Policy has ensured that our teams can be open and honest with anybody who may have been harmed as the result of a reportable incident. We can then explain what went wrong, apologise and provide feedback on what we have already done to support them, and what we will do to prevent similar incidents reoccurring.

This approach will be enhanced further, in line with the requirements of our new Patient Safety Plan and we will seek to more actively engage patients, who are experts in their own care, from the point at which things go wrong.

## We are listening...

**Feedback is really important to us as it helps us to understand how service users experience our provision.**

We are able to seek feedback through a range of routes, on and offline, and through the use of a QR code. This approach has supported feedback from a wide range of service users who access our services in different settings. Our "You Said, We Did" approach is embedded throughout our organisation and we are committed to informing people about how their views and opinions have influenced change.



**Below are some issues raised and our responses and actions:**

**In relation to a stay on Cedars inpatient rehabilitation unit:**

**"I found it boring particularly in the afternoon. If you can provide some entertainment, TV is not enough. Some staff in the afternoon do singing and dancing, thank you from the bottom of my heart (October 2023)."**

**We reached out to Age Concern for volunteers and discussed how exercise volunteers could support activity at Cedars.**

**In relation to the Health Visiting Service antenatal classes:**

**"I think the way we found out about the session was difficult, it would be good to improve the process of registration/ marketing of the course as it was really useful (June 2023)."**

**We looked at the wording of the letter about the classes and made plans to promote the class through posters in appropriate places such as children's centres.**

Out of the  
**250,000**  
service user contacts  
we had in 2023-24,  
we dealt with  
**49 informal 'concerns'**  
and responded to  
**16 complaints.**

### Concerns and Complaints

Informal complaints (concerns) are managed at service level, and are escalated to the attention of our service effectiveness team when additional support is required. A redesign of this process took place at the end of 2022-23 and, in 2023-24, a new concerns process was launched. This has been designed to enable the logging of informal complaints, managed at service level, on an easy to use app.

The process was designed to support a greater understanding of any themes emerging across the organisation. One key theme this year related to issues accessing ADHD medication, which was part of a national challenge relating to increasing complexity with supply chains.

We responded to individual complainants but also provided some supportive communications on our website and access to resources including a drug searching app.

All complaints that we receive are reviewed, investigated and responded to as quickly and efficiently as possible by the individual services with the support of our service effectiveness team. This supports a speedy resolution of the issue that is to the satisfaction of those raising concerns.

The Parliamentary and Health Service Ombudsman (PHSO) provides an independent complaint decision service for complaints that cannot be resolved by organisations providing NHS-funded care.

In 2023-24 one complaint escalated to the PSHO was under review and we supported this by making the requested provision. At the end of the year we were awaiting feedback in relation to any required next steps.

The handling of informal and formal complaints is monitored through our governance structures, to ensure oversight and an understanding of themes that may need organisational consideration.

## Feedback from service users

**The Friends and Family Test is a standardised service user experience survey, which we use to collect patient experiences of care.**

Many service areas collect their own service user feedback, in addition to the delivery of this survey, to support an ongoing review of specific aspects of their care.

### Service User Feedback

**"The Enablers were amazing! They got Nan back to being independent. Kind, and caring but knew when to push her. Lovely people!"**

*(Reablement team March 2024).*

**"The Twilight and District Nursing service could not have given Linda a better service. They went above and beyond normal care. They came out promptly, were extremely empathetic and very caring and kept Linda as comfortable as possible in this very difficult time. I cannot thank them enough"**

*(District Nursing and Twilight teams January 2024).*

Service user  
feedback numbers  
increased to  
**3,213**  
which is a  
**50% increase**  
on 2022-23.

## Staff Wellbeing

**Learning from the 2020-21 wellbeing survey continued to inform the provision made to our staff during 2023-24.**

We made some changes to our in-house wellbeing provision to support staff during and after the pandemic period. In the latter period of the year we ended the 'in-house' counselling provision but provided staff with access to online therapeutic support via our wellbeing provider.

Other organisational initiatives which remained in place included access to a monthly Menopause Matters group which remained well attended. This initiative proactively considers the needs of the organisation's workforce, whose largest staff group is female.

Access to these services and initiatives was supported by service leads, highlighting the importance we place on maintaining staff wellbeing.

We received  
**2796**  
compliments  
an increase of  
**around 20%**  
on 2022-23.



# Are we Well led?

The organisation's committees moved into a fully hybrid format during 2022-23 and this continued in 2023-24, supported by the interactive technology available.

This has supported ongoing ease of access and supported time and cost efficiencies.

We operate a rigorous governance framework with committees reporting and providing assurance to the board through our Integrated Governance Committee, chaired by our managing director.

## External audit of our ISO 27001 accredited Data Centre

**Your Healthcare IT Services' hosting service is IEC/ISO27001:2013 accredited.**

In 2023-24 YH achieved and maintained its ISO 27001 accreditation which relates to the security of any data held in our data centre and which is subject to an annual external audit, and Cyber Essentials Plus.

## Data Security and Protection Toolkit

**We have achieved standards met for our 2023-24 Data Security and Protection Toolkit submission.**

This annual self-assessment offers assurance that, as an organisation, our data security practices are robust and provide assurance that personal information is handled correctly and safely. Our toolkit was also audited independently by RSM and provided a high level of confidence and a satisfactory assurance rating.

## Data Quality

**We understand the importance of data quality and adhere to organisational and regulatory requirements. By meeting these**

regulations, we are able to demonstrate that the data we hold is accurate, and we are able to use it to demonstrate performance improvements and to support future planning.

Our data systems ensure that our service leads, board and external stakeholders have the right information to make decisions and action plan.

We are also part of local shared care record keeping systems which supports safer and swifter interventions and outcomes for our service users.

## Digital Innovation

**All YH members who require it have access to the digital equipment that they need to perform their roles on and off-site, enabling them to work, where relevant and appropriate, in a hybrid way. This has continued to support flexible working, work stream efficiencies and attendance at partner meetings.**

In addition, the organisation's upgraded digital interfaces in its meeting spaces meet the ongoing requirement for hybrid meetings and improve the visual and sound quality which supports more meaningful and participatory sessions with internal staff and external partners, whether located on or off site.

## Annual Members Survey 2022-24

**As an organisation we have good take up of our annual members' survey, and high engagement scores which have followed a pleasing upward trajectory from 88% in 2021-22, to 89% in 2022-23.**

Engagement scores are calculated from specific questions in surveys and measure how committed employees are in helping an organisation to succeed.

In 2023-24, 65% of staff completed the survey and the engagement score had further increased to 90%.

YH members have 5 Freedoms, one of which is the freedom to ask questions, and there are a variety of routes to do this and provide feedback about their work-based experiences. This includes access to an EDI suggestion box and the ability to ask questions in person, online or anonymously in the 'We're Listening' slot at the regular Base Briefing.

Members are also supported through their supervision and one-to-ones, to explore concerns and challenges that may need to be escalated by their supervisor and/or manager.

## Membership Council

**YH is a membership organisation, and the input and views of members are enacted through the YH Membership Council.**

The Council comprises elected staff and provides a membership voice to the board and managing director. The Council ensures that YH is held to account in meeting its commitment to deliver social value and community benefit.

The Council meets quarterly and provides reports to the YH board. New members were appointed in the latter stages of 2023-24 representing a wide range of frontline and infrastructure teams.

## Futures Forum

**YH offers all members an opportunity to contribute to the future direction of the organisation through our Futures Forum which highlights success and promotes collaboration and innovation.**

It supports the organisational membership to feel involved and included. Access is supported by a hybrid delivery and the availability of post forum recordings.



## Looking ahead

We will continue to evolve and change to reflect the evolving picture of health and social care, responding to the requirements of our commissioners, regulators and the NHS Patient Safety Plan.

-  We will continue to prioritise the safety of our service users and staff, embedding our systems approach to improving patient safety outcomes through the delivery of our patient safety plan and the enactment of advanced workforce training and oversight activity.
-  We will publish our patient engagement strategy and proactively develop our range of service user engagement workstreams, designed to inform service delivery developments that best meet the needs of our users and our wider community.
-  We will remain committed to addressing inequalities in health and will develop our interfaces with the public and professional groups, including upgrading our website and our referral processes, to support swifter and more efficient and effective health access for our patients, service users and professional partners.
-  We will develop our quality improvement processes, including the development of a QI automated database, designed to support easier access to, review of and activity related to, audits and service innovations.
-  We will continue to work actively with our partners across South West London in the development of Integrated Care Systems and with a core focus on Kingston Place, focussing on key improvement activity, including access to mental health support for children and young people and deconditioning.



## Appendix

Comments received from SW London Integrated Care Board and Healthwatch Kingston, following receipt of Your Healthcare Quality Account 2023-2024.



Elaine Clancy  
Chief Nursing Officer  
Southwest London ICB  
2<sup>nd</sup> Floor, 120 The Broadway  
Wimbledon SW19 1RH  
17 September 2024

Dear Ed

**Re – Your Healthcare Quality Account 2023/24**

Thank you for sharing the Trust's 2023/24 Quality Account with Southwest London Integrated Care Board (SWL ICB). Having reviewed the Quality Account, we are pleased to see the progress and commitment made by the organisation in maintaining high quality care for patients and ongoing improvements to enhance staff health and wellbeing.

The ICB commends your work during 23/24 to enhance patient experience. Obtaining a 50% increase in the number of patients and families who are providing feedback on their experiences is a significant achievement. We also note the feedback rates from patients who access the Children, Young People and Families Service including the increase in compliments highlights the service is providing a positive patient experience to service users.

The ICB commends your results from national and local audits, evidencing care provision against nationally set standards and the achievement of the organisation's quality priority for 22/23 to increase the breadth of audits and research across the organisation.

The ICB also acknowledges your organisations commitment to patient safety through the successful implementation of the Patient Safety Incident Response Framework (PSIRF) and further actions identified to continue embedding this new approach across the organisation with a focus on learning and continuous improvement.

Your commitment to continue to uphold patient safety and improve patient experience is evident in several achievements you have made in 2023/24 such as low incidence of community acquired pressure ulcers, 99% compliance with venous thromboembolism risk assessment and achievement of a Good CQC rating for the children and young people's services. In addition, the ICB recognises the work undertaken to improve bowel management for those with learning disabilities and congratulates the team for receiving a national award in recognition of this work to improve patient safety and outcomes.

It is encouraging to see the progress you have made with your quality priorities and the further improvement work planned through 24/25 to build on your achievements.

For 2024/25, we acknowledge that your organisation has identified the following quality priorities:

**Patient Safety**

To continue embedding a systems approach to improving patient safety outcomes, delivery of the patient safety plan and development of a quality improvement automated database.

**Patient Experience**

Proactive development of your range of service user engagement workstreams.

**Clinical effectiveness and Well-led**

Ongoing commitment to addressing inequalities in health including enhancing access to services with a particular focus on mental health support for children and young people.

Your priorities are aligned to the ICB's Joint Forward Plan and the SWL Integrated Care Plan priorities, and we are committed to working with your organisation as a core member of the Integrated Care System to improve outcomes for our patients and deliver our shared quality priorities.

We look forward to continued work with your organisation under our partnership arrangements and strengthening our collaborative approach to system quality improvement.

Yours sincerely

Elaine Clancy  
Chief Nursing Officer



**Statement from Healthwatch Kingston Upon Thames on Your Healthcare CIC's Quality Account 2023-2024.**

Healthwatch Kingston upon Thames welcomes the Your Healthcare Quality Accounts (April 2023-March 2024). We have appreciated the openness and responsiveness of the YH leadership team to engage with us, whether we are sharing the views, experiences and concerns of local people about their care or, while scrutinising plans for service transformation.

We are pleased that YH service provision has been recognised with awards, (congratulations to all) and that these have been informed by increasing levels of feedback from patients and service users. YH commitment to adapt your approaches to meet the local needs of an increasing number of service users with complex acute and chronic physical, psychological and social needs is laudable.

It is good to read recognition of the work done by the Care Quality Commission to include positive feedback from families to inform their review the YH Children, Young People and Family services and that the CQC found these services 'Good', 'robust', 'kind' and 'compassionate'. Safeguarding Adults and Children is everybody's business. Healthwatch Kingston recognises the long-established safeguarding structure and culture at YH and looks forward to working closely with YH to implement our Healthwatch Kingston safeguarding recommendations via the Kingston Safeguarding Adults Board and others at the Kingston Place Based Partnership Committee.

Thank you to you and your team for your continued efforts to improve integrated health and social care for Kingston residents.

Stephen Bitti  
Chief Executive Officer  
30<sup>th</sup> September 2024

# yourhealthcare

Established in 2010, we are a social enterprise not-for-profit organisation that delivers integrated health and social care services for residents in the Royal Borough of Kingston, and learning disability and autism services for adults in the London Borough of Richmond.

If you require this document in any other language or format, please email the Your Healthcare Customer Care Team within Front of House who will be happy to help

چنانچه این سند را به زبان یا در قالب فرمت دیگری نیاز دارید، لطفاً از طریق ایمیل [contact@yourhealthcare.org](mailto:contact@yourhealthcare.org) با تیم پشتیبانی مشتریان Your Healthcare تماس بگیرید تا با کمال میل به شما کمک کنند.

إذا كنت تحتاج هذه النشرة في أي لغة أو شكل أخرى، يرجى الاتصال بفريق خدمة الرعاية الصحية للعملاء الذي سيكون سعيداً للمساعدة  
[contact@yourhealthcare.org](mailto:contact@yourhealthcare.org)

이 문서를 다른 언어나 형식으로 원하신다면, 귀하의 헬스케어 고객관리팀 ([contact@yourhealthcare.org](mailto:contact@yourhealthcare.org))으로 이메일을 보내주십시오. 기꺼이 도와 드릴 것입니다.

Jeśli chcieliby Państwo otrzymać ten dokument w dowolnym innym języku albo w innym formacie, prosimy o skontaktowanie się z zespołem ds. opieki nad klientem Your Healthcare pod adresem e-mail [contact@yourhealthcare.org](mailto:contact@yourhealthcare.org).

இந்த ஆவணத்தை வேறு ஏதேனும் மொழியில் அல்லது வடிவத்தில் பெற விரும்பினால் [contact@yourhealthcare.org](mailto:contact@yourhealthcare.org) ஏனும் முகவரியில் உங்கள் நலப்பராமரிப்பு வாடிக்கையாளர் சேவை மையத்திற்கு மின்னஞ்சல் அனுப்பங்கள். அவர்கள் உங்களுக்கு மகிழ்ச்சியுடன் உதவுவார்கள்

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Company no. 06762290

## Our Locations

1. Cedars at Grace Anderson, Teddington Memorial Hospital
2. Hollyfield House
3. Sheridan House
4. Surbiton Health Centre

We run services from the locations below as well as other community sites, such as local schools.

