



*your* healthcare

Quality  
Accounts  
2016/17

At the heart of the community



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# Foreword

## Welcome to our quality accounts 2016/17

Thank you for taking the time to find out a bit more about us and our services, and welcome to Your Healthcare's Quality Accounts - our statutory report on the quality of the health and social care services that we've provided to our local community in 2016/17.

We are proud of the safety and the quality of our service delivery so whilst it's true that the Health Act 2009 requires all providers of NHS services in England to publish annual Quality Accounts – we see our Quality Accounts as a fantastic opportunity to let you know how we strive to provide the best possible care in our local community; the care that people deserve.

Responding to the government's Transforming Community Services (2008), Your Healthcare CIC (YH) was the first London NHS organisation to be established as a social enterprise (a Mutual) in 2010. Since then, we have continued to provide and invest in a wide range of community based health and social care services for local people, being led by what they tell us is most needed, and where.

A Community Interest Company (CIC) is a special type of limited company, introduced by the government in 2005. CICs are designed for social enterprises that want to use their profits and assets to benefit the community. So as a CIC, this means YH can only use our assets for our social objectives.



As in previous years these 2016/17 Quality Accounts demonstrate the continuous service improvements we make with the commitment from our staff, to ensure high quality person centred care. We are of course regulated by the Care Quality Commission (CQC).

We remain committed to ensuring that as an organisation we continue to learn from people who use our services and our staff so that innovating our services continues to remain at the forefront of what we do.

We have invested in our staff, recognising the skills and attributions that lie within our skilled workforce. We have continued to work with our commissioners and partners to inform the customer journey and the work stream called Kingston Coordinated Care (KCC).

We are really pleased that our staff engagement score rose in 2017 to 87% (10% above the norm) and in our Friends and Family questionnaire, 96% of respondents said they would recommend us.

This year's Quality Accounts brings this and other statistics to life and demonstrates our continued focus on delivering high quality and safe care.

# Section 1

## About *your* healthcare

We were the first London NHS organisation to be established as a social enterprise in 2010 and have continued to provide and invest in a wide range of community based health and social care services for local people, being led by what they tell us is most needed and where.

Now celebrating our seventh year of trading, the decision in 2010 to become a Mutual and the benefits of being a public sector health provider remain apparent to us. We continue to deliver a better social return on our commissioners' investments and so help support efficiency gains within the local economy. Adopting 'mutualism' also assumes the adoption of happy workplace methodology. To support this we diligently work to realise an even greater autonomy within our whole workforce to remove the need for costly layers of any unnecessary management.

We use co-production to help us make sure that the way in which our services are set up corresponds with what the general public and our staff, tell us. This method will continue to be used

in the development of our services and is coupled with our ongoing desire to engage and empower our service users, their families and our staff. The report of the work of the King's Fund: 'Improving NHS Care by Engaging Staff and Devolving Decision-Making' strongly supports the direction of travel we have taken as an organisation.

We have continued to build on the development of Independently Led Teams (ILTs) and autonomous practice. This work helps drive up quality, reduces duplication and supports our understanding that staff who are free to act to support the needs of their service users at the point of delivery, also think beyond the boundaries of their own service to enable and deliver connected person oriented holistic care. Great news for the local populations we serve.



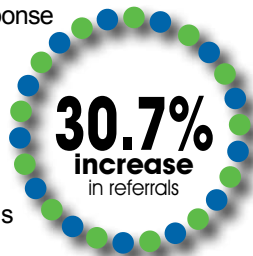
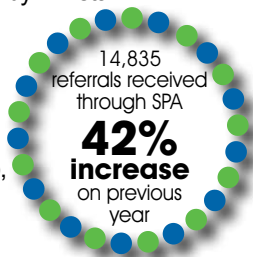


# Section 2

## Performance statistics

### Key Statistics for 2016/17:

- 31,440 local people were offered care and support on 294,586 occasions, a 32.9% increase in activity from last year. On 67,431 of these occasions people's care was supplemented with additional action by YH staff.
- 14,835 referrals were received through our Single Point of Access (SPA), which was a 42% increase from the previous year, mainly due to service developments we've made since last year to handle calls on a wider variety of our services.
- 13 Nursing Homes, 5 Residential Homes and 4 Sheltered Homes were visited by our Care Home Support (IMPACT) Team.
- Our Rapid Response Team received 3,102 referrals in 2016/17, representing a 30.7% increase from the previous year.



### School Nursing

Our School Nurses have once again achieved outstanding results on the National Childhood Measurement Campaign (NCMP).

This programme aims to measure the height and weight of all children, to assess overweight and obesity levels in children attending primary schools. This data is then used nationally to support local public health initiatives and inform the local planning and delivery of services for children.

Within Reception Year the nursery nurses weighed and measured 99.4% of children, and in Year 6 they measured 98.7% - better than the average in

England of 94%. This puts YH's school nursing team in the top 2% in the country in terms of numbers of children weighed and measured. Well done!

84% of the Reception children attending Kingston schools are in the healthy weight range. Knowing the trends within the age groups has supported us in targeting the advice we give in conjunction with parents and teachers, who fall into both the over and under-weight categories.

Our team also delivered 70 Personal Social and Health Education (PSHE) sessions to 10 secondary schools, and 180 sessions to 24 primary schools.

### Friends and Families Questionnaire

Since it was initially launched in April 2013, the NHS's Friends and Families Test has been rolled out in phases to most NHS-funded services in England, giving all patients the opportunity to leave feedback on their care and treatment. Nationally, there has been more than 10 million pieces of feedback, making it the biggest source of patient opinion in the world!

In 2016/17 YH had a higher return rate on our Friends and Families

Test from the previous year. We got an impressive 96% of respondents advising us that they would either be "Extremely likely" or "Likely" to recommend YH services to family and friends. 99% of people, who responded, rated their overall experience with us as Excellent or Good. The staff at YH are really pleased and proud that people who received our services, thought so well of them.

## Infant Feeding and Health Visiting

Research suggests that approximately 1 in 10 babies may be born with some misplaced membrane under the tongue with half of these babies displaying significantly reduced tongue function which makes breast or bottle feeding difficult. In Kingston this equates to circa 150 babies with 'tongue-tie' who would be likely to benefit from treatment to release the restriction that the membrane is having on the tongue and enable them to feed.

The YH Tongue Tie Release Service was started in response to this unmet need in Kingston. This is a service that has been welcomed by parents, who otherwise had to struggle and maybe give up breast feeding, go on a waiting list, or be seen privately.

In 2016/17, 161 babies were referred for potential feeding problems related to tongue tie and of these, 125 had the procedure to separate the tongue tie, resulting in improved feeding for baby.

The decision on whether or not a tongue-tie is impacting on feeding and whether it is appropriate to offer to 'divide' it, is made after a detailed feeding history has been taken. This includes details about the pregnancy and birth as well as the medical history of both mum and baby. The baby is also observed at the breast. All this is done by the person who 'divides' a tongue-tie such as a midwife, health visitor or breastfeeding counsellor lactation consultant.

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

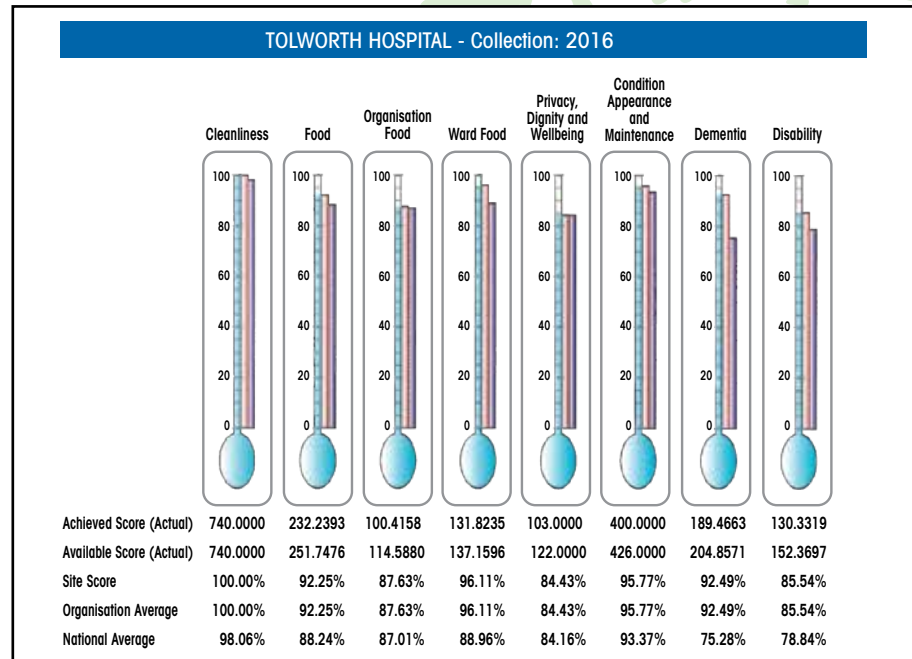
The Patient Led Assessment of the Clinical Environment (PLACE) assessment is mandatory and has been undertaken on an annual basis since 2013. The aim of the PLACE assessment is to improve upon the standards of cleanliness across all hospitals, hospices and social enterprises providing NHS care. It covers a number of areas such as the:

- general cleanliness of the environment
- meal content and delivery of service
- privacy and dignity
- dementia friendly considerations

- décor and maintenance of the environment to ensure that a patient's stay is safe and comfortable as possible.

Our Cedars Unit at Tolworth Hospital, was assessed by our Board Lead Front of House, with two independent assessors also present to oversee and add validity.

As you can see from the thermometers, YH performed better than the national average score in all categories. The food and condition, appearance and maintenance score improved on the 2015/16 scores (79% and 91%, retrospectively).



# Performance statistics

## Infection Control Summary

High quality infection prevention (including cleanliness) is essential to ensure that all users of YH services receive safe and effective care. As part of everyday practice, our clinical staff are committed to consistently providing quality prevention and control of infection.

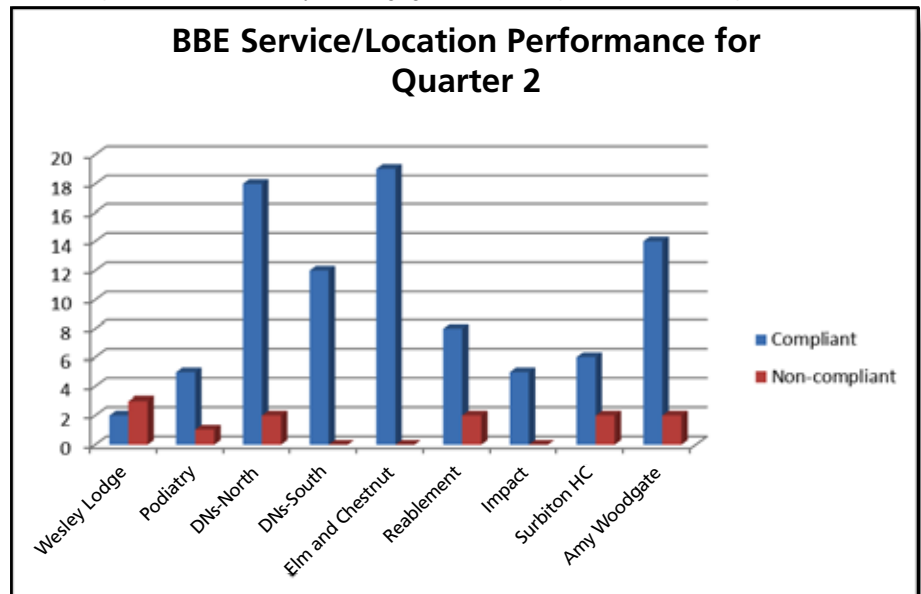
November 2016 saw the appointment of our new Infection Prevention Control Lead (IPCL) who reinstated the YH Infection Prevention Control Link team. This team acts as a resource in the clinical area liaising with the IPCL to create an environment that ensures safety of patients/service users, health care workers and visitors. Members of the team share knowledge, best practice, expertise and information along with following current legislation and guidelines that relate to infection prevention and control. This ensures we meet the standards set out in the Health & Social Care Act 2008 (Regulated Activities) Regulations 2014. The team has already identified some key areas to work on further such as visiting challenging homes and how different services were separately buying some products eg disposable latex gloves. From the beginning of the 2017/18 annual cycle the Link Team will undertake Bare Below the Elbow (BBE) and Environmental Audits quarterly within their clinical areas.

In addition to the return of the Infection Prevention Control Link Team, weekly surveillance recommenced on Cedars Unit and monthly surveillance began at Wesley Lodge and Amy Woodgate in January 2017.

The transmission of infection can occur directly via hands, or indirectly via an environmental source (eg commode).

Evidence indicates that hand mediated transmission is a major contributing factor in the acquisition and spread of infection in health and social care environments. During Q2 of 2016/17 a total of 101 staff members from nine services were audited to see if they were compliant with BBE. Overall good BBE was seen from the majority of services checked.

The chart below shows a breakdown of BBE compliance for each of the nine services involved. 100% of staff were BBE compliant in the South Locality District Nursing Team, Elm and Chestnut wards at the Cedars Unit and the Impact Team. This was very encouraging as these teams provide a lot of direct patient care.



## Reported Incidents

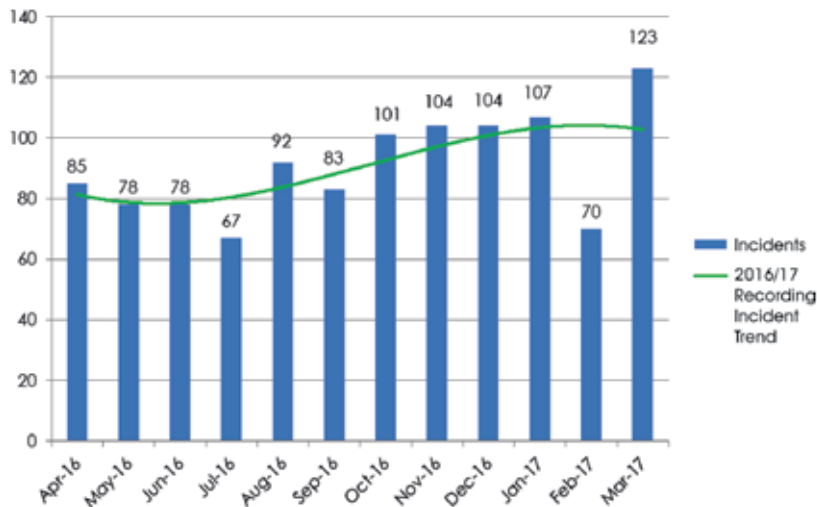
We take incident reporting very seriously and incidents are dealt with as soon as they are reported, with regular updates sent to our Integrated Governance Committee. All staff capture incidents onto our electronic recording system called Datix Web. This ensures that incidents are recorded accurately and are fully auditable.

In July 2016 we provided training to our staff on the importance of recording incidents onto Datix Web. As you can see on the graph below, this had a positive effect as after the training, we saw an increase in the recording of incidents.

Our highest level of incidents in 2016/17 are the same as the previous year and are around falls reported at our Amy Woodgate residential and day care dementia centre. These incidents are due to the residents' progressive dementia conditions which can obviously increase their risk of falling. Amy Woodgate services use Eden Model Principles in their dementia care. This means that service users are encouraged to be as independent as possible, whilst obviously being kept safe. Documented falls risk assessments and appropriate falls prevention strategies are in place and risk factors and interventions are considered for each resident on admission, post fall and when their condition changes.

To ensure the safety of all people who use our services, we consistently review all incident reports to ensure the shared learning and support for all staff and to inform our falls management and prevention programme.

**2016/17 Recorded incidents by month**



## Complaints and Compliments

As with incidents, we are committed to ensure all informal and formal complaints are addressed in a timely manner and managed promptly and effectively.

Compliments and complaints are managed in line with our Complaints, Comments and Compliments Policy and we aim to respond to all complaints within 25 working days.

YH has a dedicated Customer Care Liaison Officer who investigates and communicates with people when complaints are made. A report is prepared for our Board and information is also shared with the commissioners of our services on the compliments and complaints received. In 2016/17 we received 238 compliments and 29 formal complaints.

There were no Parliamentary Health Service Ombudsman cases raised against YH in 2016/17, but one decision on a longstanding case was received, which found no evidence to support the claim that had been made against us.

## Venous Thromboembolism (VTE) risk assessment for all inpatient service users

YH participates in the National Safety Thermometer Programme as we recognise that assessing a patient's risk of developing a VTE has a direct quality and safety impact for them. We undertake snapshot audits at our inpatient Cedars Unit and all show that 100% of patients had the VTE assessment within 24 hours of their admission across 2016/17, to find out whether prophylactic treatment should be given.

# Section 3 Audit

Each year YH works with our approved Internal Auditors to develop an internal audit programme which is undertaken by people external to YH and so provides us with unbiased analysis, additional scrutiny and assurance that YH as an organisation is operating robustly.

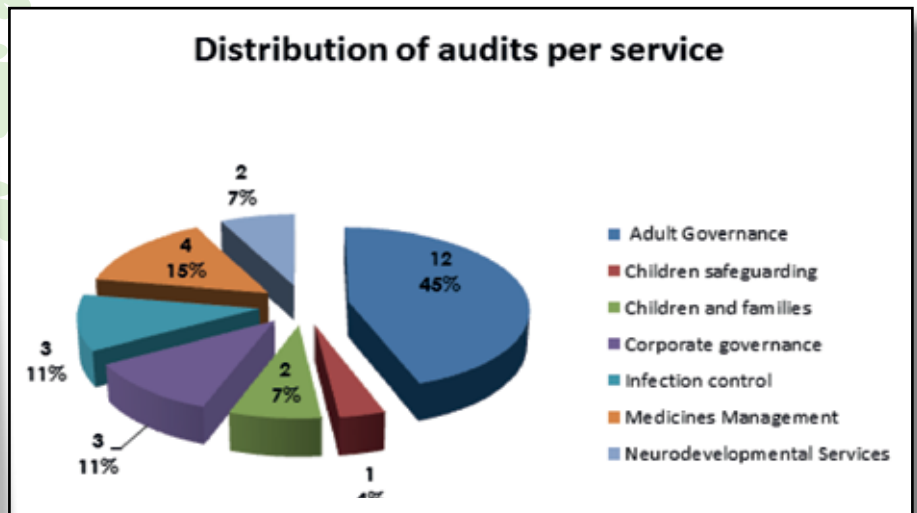
## Service Level Audits

YH staff led on 27 service based audits during 2016/17 (5 less than 2015/16).

Audits enable us to demonstrate our commitment to drive service improvements and to evaluate policy effectiveness, supported by local and national guidance. Besides providing supporting information on quality and safety to the CQC and fulfilling our requirements for the Information Governance Toolkit, audit also demonstrates and evidences areas that YH has excelled and where actions are needed to make sure

the audit's recommendations can be undertaken. The chart below shows the audit activity by service. Obviously the more niche service areas do fewer audits than the more broader service areas.

In 2016/17 YH's Governance Team significantly modified the YH audit calendar and it now more clearly presents information on the audits required and those that are underway. The new calendar also allows services to better monitor audit progress so that it's easier to assure everyone of the audit work that YH is undertaking.



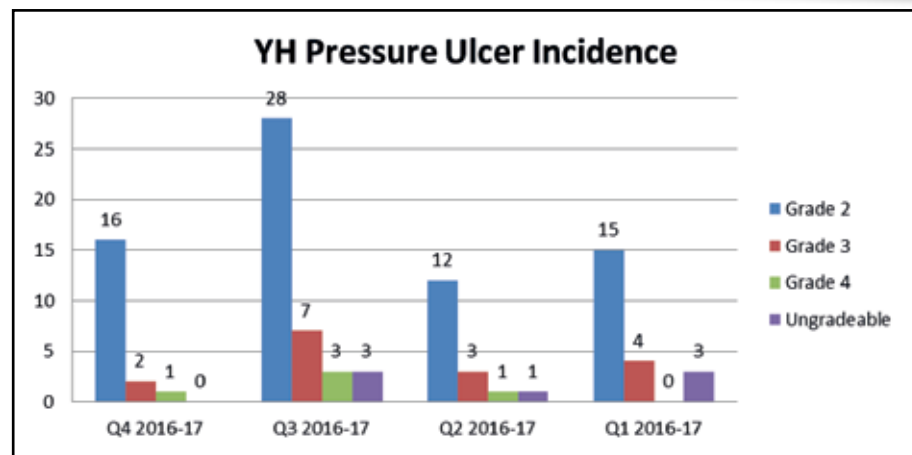
## Monitoring Pressure Ulcers

As far back as 1859, Florence Nightingale wrote, “If he has a bedsore, it’s generally not the fault of the disease, but of the nursing” and indeed the modern contemporary health system still understands pressure ulcers as an important indicator of poor care.

YH has a highly respected tissue viability team and we report on pressure ulcer prevalence to support any possible improvement in the care both we, and other agencies in the system, provide.

The YH Pressure Ulcer Review Group (PURG) meets weekly and continues to review pressure ulcers and support staff with identifying and disseminating learnings across their teams, as required.

Across 2016/17, YH has undertaken staff training to further promote accurate reporting of pressure ulcers and moisture lesions. The table to the right shows the pressure ulcers identified by YH.



# Section 4

## Care Quality Commission

YH is registered with the Care Quality Commission (CQC) and we use the CQC's Key Lines of Enquiry (Safe, Effective, Caring, Responsive and Well Led) to support our monitoring of the quality and safety of the care we deliver and to ensure that as a provider, we do not fall below these set standards.

There were three CQC inspections within YH services in 2016/17, with an important organisational inspection 15 to 17 November 2016, which covered all our health services. The report was published 9 June 2017, and provided an "Overall rating for community health services" of **Good** ●

Inspected and rated

**Good**



Care Quality  
Commission

	Inspection	Report	Rating
Shared Lives Scheme	1 Feb 2017	15 Feb 2017	Safe? <b>Good</b> ● Effective? <b>Good</b> ● Caring? <b>Good</b> ● Responsive? <b>Good</b> ● Well-led? <b>Good</b> ●
Overall Provider	15-17 Nov 2016	9 June 2017	Safe? <b>Good</b> ● Effective? <b>Requires improvement</b> ● Caring? <b>Good</b> ● Responsive? <b>Good</b> ● Well-led? <b>Good</b> ●
Adult Services	15-17 Nov 2016	9 June 2017	Safe? <b>Good</b> ● Effective? <b>Good</b> ● Caring? <b>Good</b> ● Responsive? <b>Good</b> ● Well-led? <b>Good</b> ●
Inpatient Services	15-17 Nov 2016	9 June 2017	Safe? <b>Requires improvement</b> ● Effective? <b>Good</b> ● Caring? <b>Good</b> ● Responsive? <b>Good</b> ● Well-led? <b>Good</b> ●
Children & Families	15-17 Nov 2016	9 June 2017	Safe? <b>Good</b> ● Effective? <b>Requires improvement</b> ● Caring? <b>Good</b> ● Responsive? <b>Requires improvement</b> ● Well-led? <b>Good</b> ●
End of Life Care	15-17 Nov 2016	9 June 2017	Safe? <b>Good</b> ● Effective? <b>Requires improvement</b> ● Caring? <b>Good</b> ● Responsive? <b>Good</b> ● Well-led? <b>Requires improvement</b> ●
Wesley Lodge	20 Sept 2016	10 Oct 2016	Safe? <b>Good</b> ● Effective? <b>Good</b> ● Caring? <b>Good</b> ● Responsive? <b>Good</b> ● Well-led? <b>Good</b> ●

# Section 5

## Spotlight on services

### Children's Speech and Language Therapy Training Success

The Children's Speech and Language Therapy (SLT) Team receives requests from our Achieving for Children Early Years colleagues, Kingston's mainstream and special schools.

YH's and autism spectrum disorder (ASD) specialist SLTs, work with the multiagency team from Achieving for Children who provide EarlyBird and EarlyBird Plus training for parents of children with ASD. EarlyBird is a 10 week course devised by the National Autistic Society for six families at a time to be educated on ASD and how to best parent their child.

We carried out an evaluation of the impact of our training programmes which focused on their effectiveness to train and enable our partners in education, social care and the private and voluntary sector to support the ASD children they work with.

From October 2015 - November 2016 we held 59 courses and trained 715 people and our audit showed that:

- 100% of objectives were met
- 100% would recommend the training to colleagues
- 100% said it had changed their practice in an informed way

- 100% said it had increased their confidence
- 100% said it was relevant to their role
- 100% said the trainers' skills were good or excellent.

Feedback from courses run for staff working for Achieving for Children and in mainstream schools advised us that:

- They now have the knowledge and confidence to share with parents.
- "It will help me be more patient and let the children talk more between themselves."
- "Gave me lots more information and how I could put things into place in my setting."
- "It has given me more information about how I can support a particular key child and how to approach the issue of her selective mutism with her parents."

- "To offer intervention tailored to suit children of different ages and something which parents can use at home also to support communication and language."
- "An enjoyable course as it was led by professionals in the field who were able to draw on recent experiences making the course more accessible and practical than theoretical. Thank you."
- "This was one of the best courses I have been on - very well run, with a mixture of information giving and interactive participation and discussion."
- "Understanding the children's frustration if they can't speak."

We are so pleased to provide parents with information and approaches they can take to maximise their independence and their child's.



## Community Dementia Nurse Specialist and Partnership working

YH has had a Community Dementia Nurse Specialist post in place for almost two years. In this time the people being cared for at any time has grown from 0 to 90, and over 300 of our staff have received our Person Centred Approach to Dementia Care training.

Partnership working has been key to the Dementia Nurse being such a huge success for local people. Our Dementia Nurse has very good working relationships with key services such as Amy Woodgate Specialist Resource Centre, Kingston Hospital, Adult Social Care, Staywell, the Kingston Carers Network, GPs and organisations such as the Alzheimer's Society. Working together with these organisations has proved a key reason for her work's success in Kingston.

Our dementia training for staff is provided by a multi-disciplinary team with each member bringing enriched learning using their real life scenarios. Feedback from staff who have attended has been incredibly good and we can see that they are using what they have learnt when they do their visits.





## Duty of Candour

As an organisation, YH is committed to being open and candid, and we are open and transparent about all our care delivery and treatment, including when things go wrong. We willingly share this information with patients and their families, carers and our commissioners.

This year we have continued to raise awareness of and implement the Duty of Candour Framework, through the delivery of training and ensuring our staff have the right communication and sensitivity skills to assist them in dealing with difficult situations.

## Bladder and Bowel Service

This service was redesigned at YH in February 2017 to incorporate both children and adult continence provision. Early indications show a more effective and efficient service, as young people transition from child to adult services.

## Research and Generating Enquiry

Activities such as clinical audit, local developments/innovation and quality assurance support existing research, service evaluation and patient and

staff surveys. Research however is defined as activity aimed at generating new knowledge.

Organisations providing health care such as YH, are required to engage with and support research and development activities that are focused on 'health and wealth', demonstrating contribution to the local economy, better care and improved services.

Research, development and its governance, continues in the main under the NHS Guidance model. The National Institute for Health Research (NIHR) provides the NHS with its health research system, with social enterprises such as ourselves, not really recognised or accommodated.

To address this, YH is a founding member of the Transforming Research Alliance (TRA) and has continued to work collaboratively with the other social enterprises and 'Mutual' members, to develop a platform on which high quality research within our organisations can be undertaken. In 2016/17 the TRA defined the research governance services it can offer members such as YH and whilst early days as our staff become more aware of this, we will be in a position to robustly support our staff with any research projects they may have.

# Section 6

## Our Staff

### Staff Survey

Every year we circulate a survey to all our staff and ask them to let us know what they think. The 2017 survey results confirm we just aren't like other organisations, as we've again performed very well. Our 2017 organisational engagement (i.e. those stating they 'agree' or 'strongly agree') is 87%, which is just phenomenal (norm =77%) and has been maintained since last year – which is brilliant. Our survey results are in line with organisations known to have excellent staff engagement, such as John Lewis – and we are very proud of this. But it's not just a %. Good staff engagement like ours, means that as a business we know we will be doing well in key areas that demonstrate value to the commissioners buying our services using public funds, on your behalf:

- **Higher productivity**

Engaged staff have an 18% higher productivity, realise twice the net profit and enable 2½x greater revenue growth

- **Greater creativity**

Engaged employees are 20 times more likely to bring creative ideas to their job

- **Lower staff turnover**

Higher levels of engagement show



up to 40% lower staff turnover

- **Fewer accidents**

Good staff engagement leads to 63% fewer work related accidents

- **Healthier workplace**

Good staff engagement reduces the sick days per annum from >10 to <2

- **Higher customer advocacy**

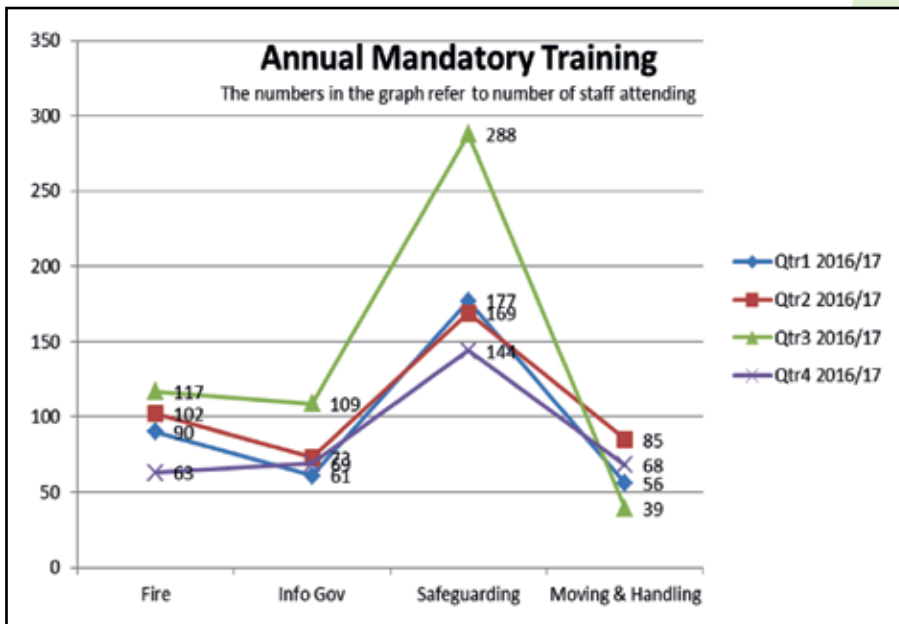
Engaged staff have a 12% higher customer advocacy rate.

The survey results indicated it may be worth us looking into:

- Making sure staff have the right working space and environment – such as having the right IT.
- Providing our staff with good career opportunities and enabling them to realise their potential at YH.
- Supporting staff to use their appraisal to develop themselves at YH.

## Training

To provide high quality and safe care, YH offers a learning and supportive environment to our staff, to ensure they have the right skills and knowledge to deliver the community services that we are proud to provide locally. We offer training sessions as both e-learning and in classrooms. It is a statutory requirement for YH to employ staff who are safe to undertake their role and we do this by ensuring all staff are appropriately qualified and have appropriate and up to date mandatory training. 2016/17 details are shown below:



We send out frequent emails to staff on the training that's coming up, and our newsletter keeps them advised of future training opportunities so they can schedule training around their frontline responsibilities.



# Section 7 Safeguarding

## Adult Safeguarding

YH has a well-established adult safeguarding structure which feeds into every level of the organisation. Responding to concerns about abuse and neglect and working to prevent abuse and neglect forms an important part of all the services that YH provides. Our Safeguarding Team continues to play an active role in the Safeguarding Partnership Boards for both Kingston and Richmond.

## Empowerment, protection, prevention, proportionality, partnerships and accountability

In 2016/17 YH raised 127 safeguarding alerts of which 88 related to other providers and 39 related to our own services. There were five safeguards raised regarding YH services by other providers.

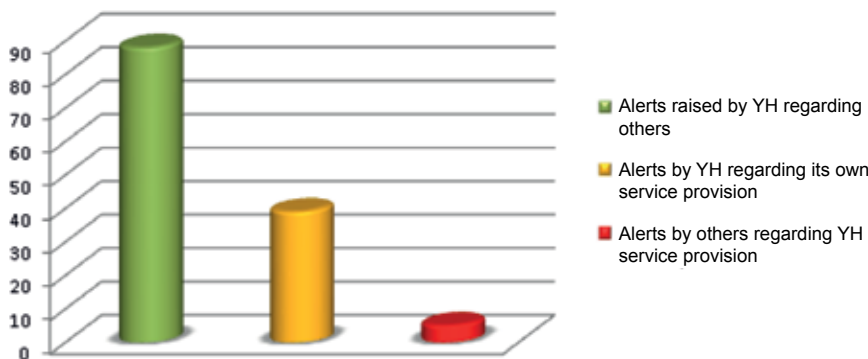
## YH ensures the requirements and the spirit of the Care Act 2014 are fully implemented

YH has formally adopted the Multi-Agency Adult Safeguarding Policy & Procedures 2015 and is compliant with the Care Act 2014, the Mental Capacity Act 2005 and Deprivation of Liberty requirements. In 2016/17 we kept our staff up to date by providing them with training around not only safeguarding but also additional forms of abuse such as self neglect, domestic abuse, modern slavery and FGM (female genital mutilation). In 2016/17 we also put extra mechanisms in place so that YH is 'Making Safeguarding Personal' – this ensures that a person's experience, wishes and choices are central to the safeguarding process.

## Objectives, plans and service interventions are appropriately and proportionately reviewed.

YH gives assurance of our safeguarding work to our local Safeguarding Partnership Boards, Kingston CCG, local authorities (such as the Royal Borough of Kingston and London Borough of Richmond) and NHS England, as well as all our internal governance committees and Board. As part of this assurance process, YH undertook the 2016/17 annual Self Assessment Framework led by Kingston and Richmond safeguarding boards, which assisted us in evaluating our safeguarding practices and setting our 2017/18 priorities. These will include launching the combined child and adult safeguarding level two training and working to further embed best practice under the Mental Capacity Act 2005.

Alerts raised by or regarding Your Healthcare 2016-17



## Children's Safeguarding

YH has a Named Nurse for Safeguarding Children and a Safeguarding Children Advisor, working specifically with YH Children and Families Services. We also support staff working primarily with adults where safeguarding children issues arise.

We have an internal Safeguarding Committee with regular and accountable reporting of safeguarding activity to the YH Board. YH also attends the Kingston Local Safeguarding Children Board (LSCB) main and subgroup meetings.

YH also has a Health Visitor based at the Guildhall, working within the Multi Agency Safeguarding Hub (MASH), alongside colleagues from the police, housing, Kingston Hospital and Richmond borough.

## Right Training

All staff receive safeguarding children training within their induction when they start work at YH. Further training is provided at a level dependent on job role. This is in line with national guidelines and the YH adult and children safeguarding training strategy. Safeguarding children training is now closely aligned to the adults' safeguarding training and this approach makes the training both relevant and time efficient for our staff.

The Safeguarding Team also provides lunchtime briefing sessions to update staff on safeguarding issues and changes in local and national policy.



## Safeguarding Supervision

Staff working directly with children and their families receive safeguarding supervision as laid down in the YH Safeguarding Supervision Policy. A recent audit showed that staff felt supported but were also pleased to be challenged during their supervision.

Our Named Nurse receives supervision from a specialist facilitated group at The Tavistock and Portman Group and the Safeguarding Children Advisor receives supervision from the Named Nurse.

# Section 8

## Next Year 2017/18

### Our priorities and improvements for 2017/18

- To continue telling everyone about how as a 'Mutual' YH is providing fantastic services, within the budgets we are given by our commissioners.
- Publish **Manifesto 2** to reflect how we and our staff work to deliver services to, and for, local people.
- Organisationally learning from and acting on the outputs from our **2017 Staff Survey**.
- To continue to work with all our staff to ensure they get the **training** they deserve. We will in 2017/18 be reviewing the database system we are using to ensure that it's as easy as possible for our staff to use and also to ensure it's providing all the reporting that we need.

Increasingly training is being made available via apprenticeships at various different levels. Many of the new apprenticeship courses are in their early stages of development, and across 2017/18 YH is working with the RCSLT (Royal College of Speech and Language Therapists) as the joint chairs for the SLT Apprenticeship Trailblazer Group. YH is very pleased

to have been selected and hopes that as part of this selection we can be an active part in the shaping of these apprenticeship courses and also to work further with our fantastic local universities.

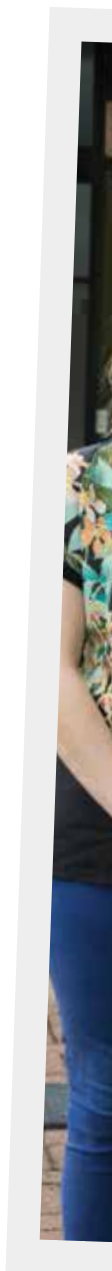
- Partnership Working and Reporting - in keeping with one of our key objectives, we will continue to further develop strong partnerships with all our health and social care partners. This will continue to help us ensure our local service users can access the best possible outcomes and quality of service. This work will mainly be undertaken through the **Kingston Coordinated Care (KCC)** project.

During 2016/17 we continued the work with our borough partners (Royal Borough of Kingston, Kingston Hospital, GPs, South West London & St George's Mental Health Trust and Staywell) on the KCC project. KCC will enable social and health services to be provided to local people in an integrated way. With our borough partners we will also continue to work collaboratively with commissioners to ensure we provide value for money services, by developing this new way of working.

- Creating a new culture that focuses on outcomes and not current professional roles and disciplines and organisational boundaries and budgets – it's about my skills and capabilities and not where I work or my qualifications.
- Enabling truly person centred care that supports those with complex needs to achieve the best possible quality of life and the goals that matter to them. This will be supported by an increased focus on prevention, proactive care and self-reliance.

It's all about "*what matters to me*" rather than "*what's the matter with me.*"

The work on developing the KCC new ways of working to deliver the integrated response, has strengthened our local partnerships working across health and social care and the voluntary sector. The strength of this partnership approach will ensure our local response to the continued delivery of the sub-regional System Transformation Plan in 2017/18.





# Section 9 Summary

We aim to be known both locally and nationally for delivering high quality safe services. Our core objectives we identified when establishing our Mutual in 2010, remain unchanged, and these are:

**People focus** – to provide and invest in a wide range of community based health and social care services for local people, when and where they need them.

**Community partnership** – to work in partnership with the people who use our services, their carers, the local community, our commissioners and other local and regional service providers to deliver coordinated health and social care, at the best value, and to the highest standard.

**Valuing staff** – to be the employer of choice for a well-trained, developed and valued workforce.

**YH is proud to be a financially solvent independent social enterprise provider, with:**

- excellent staff engagement
- more than 97% of resource operating autonomously in the frontline within independently led teams
- robust governance and assurance processes

**These strengths result in our provision of high quality and safe publicly funded services, which local people deserve.**





# your healthcare

Your Healthcare is a Community Interest Company, providing high quality, person-led health and social care services for residents in Kingston and Richmond as part of the NHS family. [www.yourhealthcare.org](http://www.yourhealthcare.org)

Company No. 06762290

Quality Accounts

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

