



# Quality Account

1<sup>st</sup> April 2015 to 31<sup>st</sup> March 2016



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## Part 1: Statement of Quality Assurance

### 1.1 Statement from the Chief Operating Officer on behalf of the Board of Directors



The last 12 months has seen numerous changes throughout the NHS and the independent sector, the changes for Cygnet have afforded the opportunity to clearly focus and prioritise the inclusion of those with lived experience, and we look forward to developing this further over the next 12 months.

Following on from our acquisition of the Alpha Hospitals Group in September 2015, we added hospitals in Bury, Sheffield and Woking. This expanded our inpatient beds in CAMHS, Low Secure, Medium Secure and Locked Rehabilitation, in areas where Cygnet had not previously had a presence. This growth has led to a re-evaluation of corporate services required to support both the expansion in bed numbers as well as areas of expertise. The addition of the 98 CAMHS beds also led to the opportunity to re-launch schools at all those sites.

During this period a programme of integration of the two companies has been both challenging and rewarding as we have discovered strengths and areas for improvement which have led to a stronger united organisation.

We are delighted with the increased response rates to the staff survey demonstrating improved engagement and overall positive score. We recognise that a happy staff environment makes a huge positive impact on service users' experience. There are of course areas which we can improve upon and these will form the core of our human resources strategy for the forthcoming year.

On behalf of the Directors, I am satisfied that the Quality Account provides a balanced picture of the Company's performance during the period 2015/16 and the information is reliable and accurate. Data is assimilated from a range of internal sources, much of which is reported externally to our commissioners in order to satisfy the requirements laid out in our NHS Mental Health Contracts as well as being submitted as part of the Mental Health Minimum Data Set.

**Nicky McLeod**

**Chief Operating Officer, Cygnet Health Care Limited**

On behalf of the Board

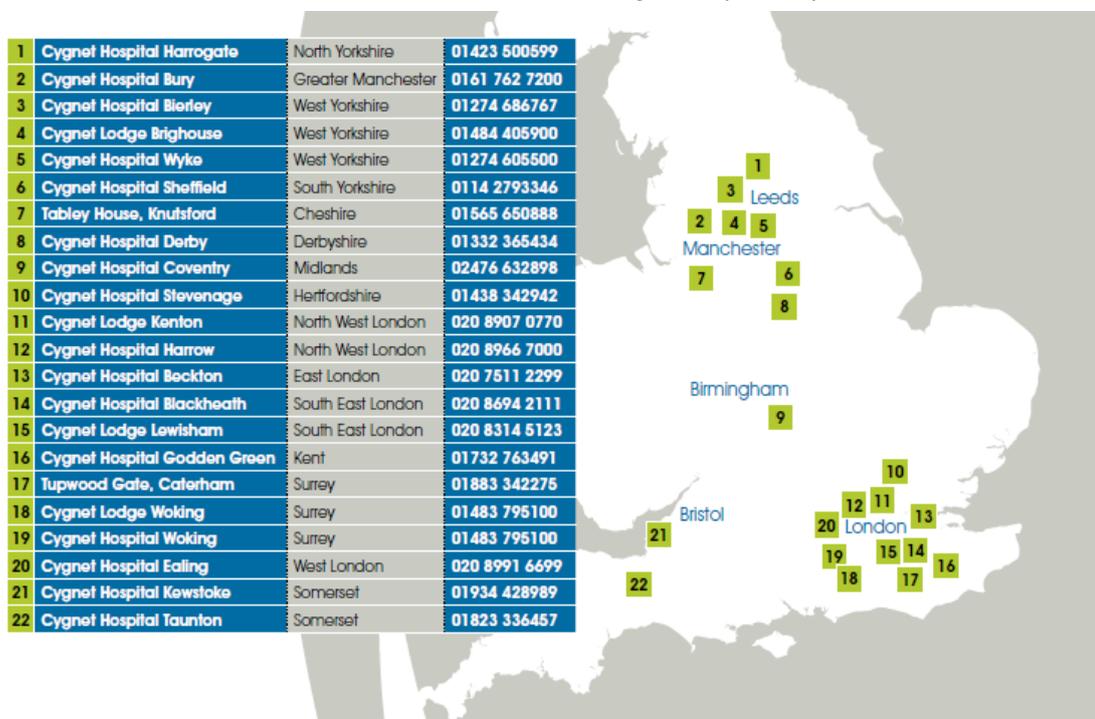
## Part 2: About Cygnet

### 2.1 About our organisation

Cygnet Health Care has been providing a national network of high quality specialist mental health services for almost 30 years and has a network of 21 services providing a range of mental health, learning disability and nursing services for men, women and adolescents.

Our services span the full age range from CAMHS to adult, and through to specialist older adult services for those with functional or organic mental illness. Services can support those with a range of different needs, including complex and acute mental illness, personality disorder, eating disorder, learning disability, and autistic spectrum disorder. Our hospitals have dedicated wards to support and treat service users at the appropriate point in their care pathway. Step-up and step-down pathways within hospitals, regions and nationwide, ensure continuity of care as required.

Cygnet's service provision, across the UK, can be seen in Figure 1 (below):



\* Cygnet Hospital Coventry is expected to open Spring 2017

**Figure 1: Locations of Cygnet hospitals and nursing homes across the UK**

### 2.2 Key facts about Cygnet

- 100% of quality payments achieved
- 179 NHS customers
- More than 1,000 beds across 20 inpatient service locations
- 7 sites smoke free
- 304,378 patient days
- Circa 2500 employees

## Part 2: About Cygnet

### 2.3 Patient experience progress 2015/16

Cygnet Health Care has a strong history and culture of service user involvement at a clinical level. Our approach builds on national policy where service user experience is one of three components of quality in healthcare, alongside clinical effectiveness and safety.

We strive to support the delivery of person-centred care by ensuring the people who use our services and their carers are active partners in their care. Positive service user experience has been associated with:

- Better outcomes and enhanced recovery rates
- Better patient safety and clinical effectiveness

We want to increase coproduction at a group, hospital and ward level. What are we talking about?

- Involvement in individual care
- Operational involvement
- Strategic involvement
- Assurance and evaluation

### 2.4 What the people who use our services say

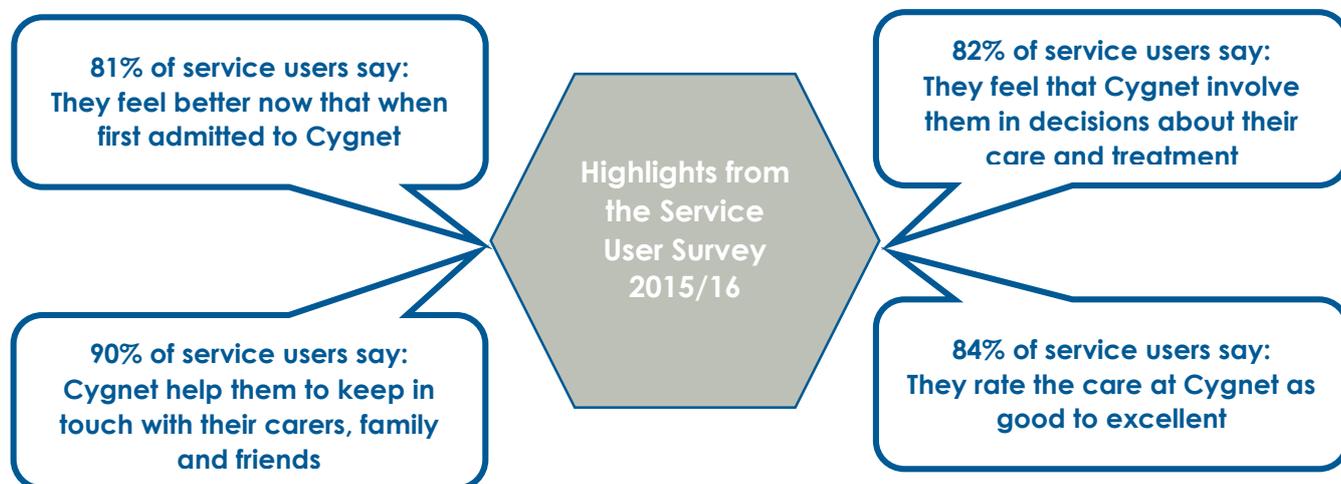
#### 2.4.1 Service User Survey

Cygnet has developed a new Service User Satisfaction Survey for the contract year 2015/16 with input from staff and service users across the organisation. The new survey was piloted across the group before being rolled out in May 2015. The new survey is:

- Significantly shorter - one complete survey covering all areas
- Uploaded on to Survey Monkey - reducing processing time
- Accessed via a handheld tablet - although service users can choose to complete a paper version if they prefer

All units carry out the new survey twice within a 6-month period on all low secure, medium secure, locked and CAMHS wards. There is also a process for capturing responses from the acute and Psychiatric Intensive Care Unit (PICU) services.

Units receive a summary of their results quarterly so that they can celebrate positive feedback as well as address any areas of concern quickly. An organisational overview of the survey is produced annually.

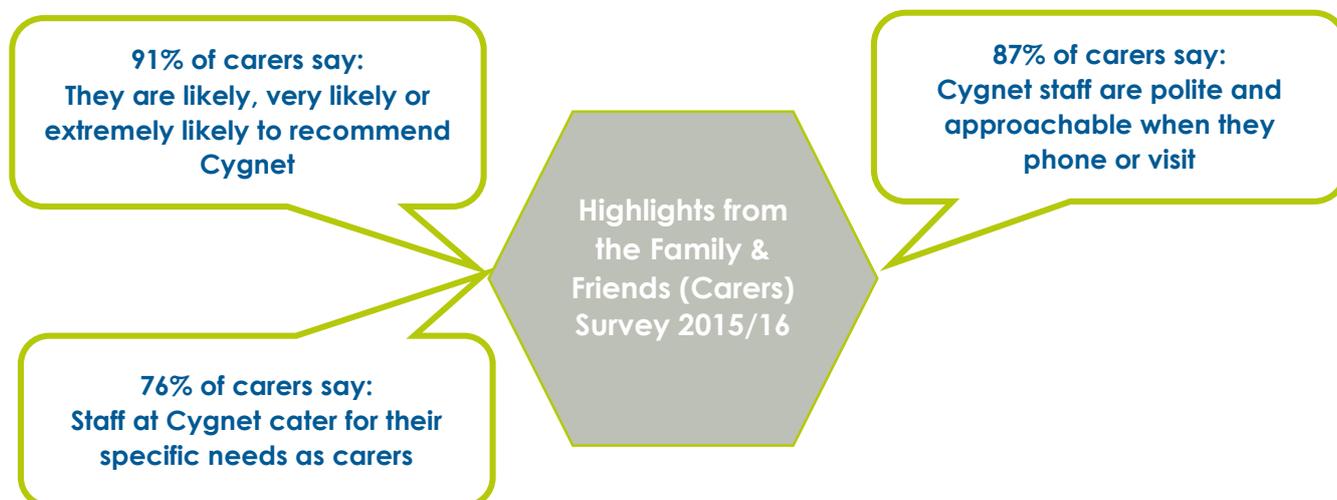


## Part 2: About Cygnet

### 2.4.2 Family & Friends (Carers) Survey

In July 2016 Cygnet introduced a new Family and Friends (Carers) survey. The new survey was introduced as a result of feedback from staff, families and friends of service users who said that the previous survey was primarily focused on the visiting experience rather than giving carers, families and friends the opportunity to feedback on what they thought was important. As a result of this review, Cygnet's Operations Support Manager worked with a group of carers, families and friends to create a new Carers Satisfaction Survey.

The hope is that creating a new survey that enables people to give feedback on areas that are most important to them, will encourage people to respond and units will have a better opportunity to make service improvements based on this feedback.



### 2.5 Smoke Free Progress Update

Cygnet Health Care has developed a Smoke Free strategy outlining our commitment to delivering smoke free hospitals, as part of our drive to improve the health and wellness of our service users and staff. Our commitment is to support our hospitals to provide services in a smoke free environment, with smoke free buildings and grounds. All our hospitals have undertaken the NICE Smoke Free audit and develop individualised implementation plans and timescales tailored to individual service need.

The strategy was developed in partnership with services users and staff, who were involved in a number of focus groups, we have three service users from Cygnet Hospital Beckton who are members of the Project Board overseeing the implementation on this strategy, and the strategy was launched in April 2015.

Cygnet Hospital Beckton has led the way in shaping and delivering smoke free services, and this work has been nationally recognised as best practice and is included in the DH framework.

We currently have seven hospitals who are smoke free.

### 2.6 Child and Adolescent Mental Health Services

We acquired an additional 98 CAMHS beds in September 2015 following the acquisition of Alpha Hospitals. We commissioned an external review of CAMHS in line with our expectations, the review identifies a number of areas for development:



## Part 2: About Cygnet

- Strengthening our CAMHS Clinical Leadership
- Developing a clear service strategy and clinical model
- Developing a CAMHS specific workforce and training plan
- To review and develop CAMHS specific policies

There is an action plan in place to address the development areas, staff are being involved in the co-production of the action plan and delivering the solutions.

We are in the process of appointing a CAMHS Clinical Nurse Specialist.

### 2.7 Allied Health Professionals (AHPs) Review

Cygnet Health Care commissioned an external Consultant to review the AHP Review, to look at: key documentation, leadership, organisational structures and current policies around appointment, induction, and supervision of each profession.

Overall the review, reported in February, was very positive, providing good assurance about the culture, processes and contribution AHPs make to multidisciplinary working. The review identifies a number of areas that we should work on to further enhance multidisciplinary working, to ensure we are fully utilising the talent and clinical leadership skills within our AHP workforce, and to ensure we have the best possible processes in place to support and develop AHPs.

We have an action plan in place, the Practice Development Groups are working to support delivery.

### 2.8 Nursing Strategy

The first Cygnet Nursing Strategy has been developed in partnership with our nurses. The purpose of the strategy is to articulate the unique contribution nurses make to delivering Cygnet's mission; it describes the values and behaviours our nurses aspire to in the delivery of high quality, safe care. The strategy is underpinned by six Strategic Objectives.

The strategy was launched at our first Nursing Forum. This year's focus was on Objective 4: Building and Strengthening our Nursing Leadership. Building a culture of nursing leadership at every level.

### 2.9 Safeguarding Progress Update 2015/16

In order to assure compliance with our statutory and contractual safeguarding responsibilities we have undertaken a high level safeguarding review.

To ensure we are compliant with statutory guidance and can lead and drive improvements in our safeguarding practise we have agreed we will strengthen our safeguarding infrastructure, this included appointing a Group Professional Lead for Safeguarding.

We have reviewed and updated the Safeguarding Children and Adults policies.

We have reviewed our safeguarding training offer and are in the process of procuring level 1 and 2 e-learning training and developing a modular approach to level 3 plus training.

We have seen a number of really positive examples of early identification of PREVENT (Governmental Anti-terrorism program) concerns, after a positive campaign to increase training and profile of this program across the group.

## Part 2: About Cygnet

### 2.10 Reducing Restrictive Practice Update 2015/16

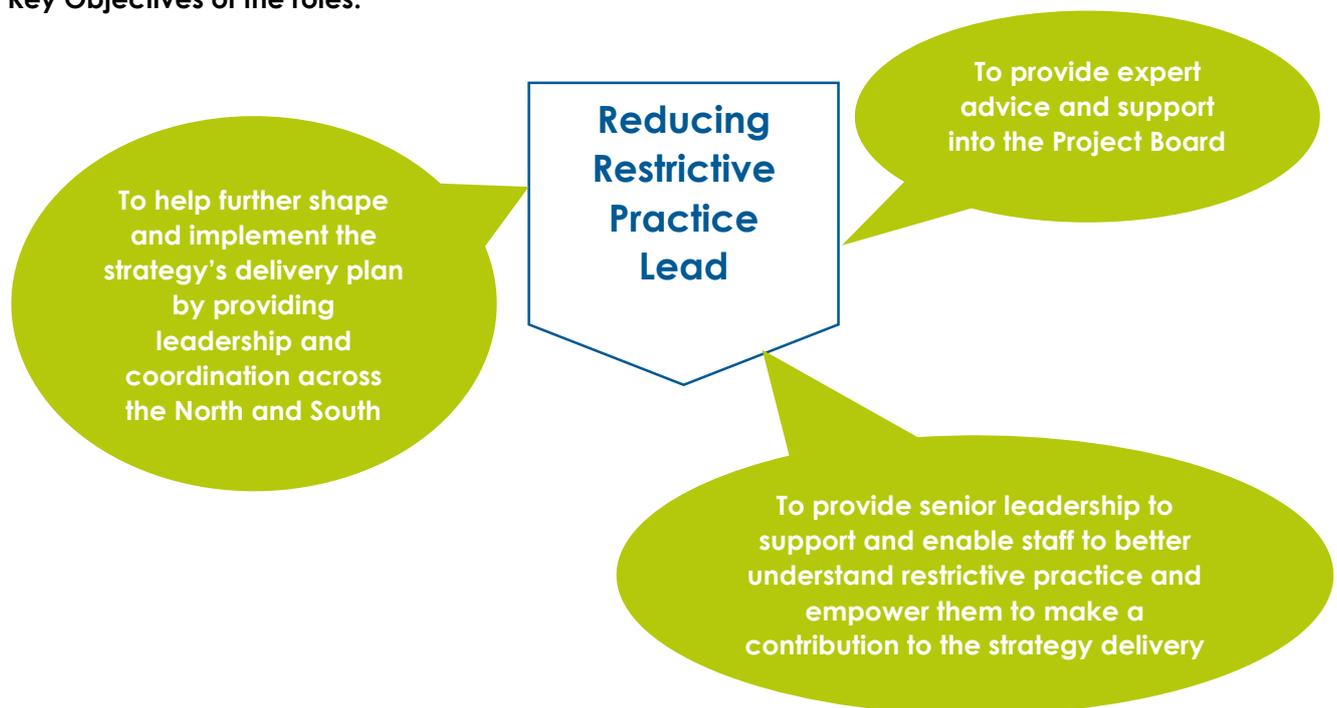
Cygnet Health Care has made a clear commitment to Reducing Restrictive Practice, and this is one of our main quality objectives.

We have a clear Reducing Restrictive Practice strategy and work plan that was launched at our management conference. The aim of the strategy is;

*Cygnet aims to change how risk behaviour is managed and develop a culture to promote recovery and reduce the need for restrictive interventions. We aim to re-define the relationship between staff and service users to one of risk sharing rather than risk management.*

As part of the strategy, Cygnet Health Care created two new Reducing Restrictive Practice Lead posts one for the North and one for the South to support and monitor the delivery of the strategy.

#### Key Objectives of the roles:



We have a project infrastructure to support the delivery of this strategy with an overarching Project Board and delivery boards in the North and South, which will have Experts by Experience and Service Users involved and coproducing the work at all levels.

## Part 3: Governance at Cygnet

### 3.1 Governance interface and the use of Key Performance Indicators (KPIs)

There are close links between corporate and local governance systems, this has further improved since the appointment of further Quality Assurance Managers who work closely with regional teams.

Key Performance Indicators (KPIs) help us identify areas that need more focus. We use KPIs to alert us to changes that may be small but allow us to question and quickly correct any areas that need changing. Cygnet's governance KPIs are illustrated in Figure 2 (below):



Figure 2: Cygnet's Governance Key Performance Indicators (KPIs)

### 3.2 Registration with the Care Quality Commission (CQC)

On the 31<sup>st</sup> March 2016 Cygnet operated twenty-one centres with more than 1000 beds; all registered with the Care Quality Commission (CQC), see Figure 4 (below) for regulated activities.

Nineteen units offer services to acutely ill psychiatric service users, suffering from a broad range of psychological and/or emotional disorders. Two units are registered nursing homes, providing long-term and respite care for elderly residents.

## Part 3: Governance at Cygnet

Regulated CQC activities: by unit	Accommodation for persons requiring nursing or personal care	Treatment of disease, disorder or injury	Assessment of medical treatment for persons detained under MHA	Surgical procedures
Beckton		✓	✓	
Bierley		✓	✓	
Bury	✓	✓	✓	
Blackheath		✓	✓	
Brighouse		✓	✓	
Derby		✓	✓	
Ealing		✓	✓	
Godden Green		✓	✓	
Harrogate		✓	✓	✓
Harrow		✓	✓	
Kenton		✓	✓	
Kewstoke		✓	✓	
Lewisham		✓	✓	
Park Grange	✓	✓	✓	
Stevenage		✓	✓	
Sheffield	✓	✓	✓	
Tabley House	✓	✓		
Taunton		✓	✓	
Tupwood Gate	✓	✓		
Woking	✓	✓	✓	
Wyke		✓	✓	

**Figure 3: CQC regulated activities by Cygnet unit**

Cygnet conducts internal assessments against all CQC Key Lines of Enquiry to ensure that it identifies where areas of improvement may be required. CQC reports are used as learning tools throughout the organisation.

During the period, thirteen units have been inspected by the compliance section of the CQC. Further units have been notified of impending inspection throughout 2016.

## Part 3: Governance at Cygnet

### 3.3 Staff governance

Recognition of the value of staff in delivering excellent quality care has led to the renewed focus on developing values and behaviours. This has been utilised to reinforce the expectations that our service users and customers have of the Core Corporate Values:



**HELPFUL:** Go the extra mile for service users, customers and team



**RESPONSIBLE:** Do what you say you will do, to deliver outcomes and results



**RESPECTFUL:** Treat people like you like to be treated yourself



**HONEST:** Be open and transparent, act fairly and consistently



**EMPATHETIC:** Be sensitive to other's needs, caring and considerate

The table below shows the level of positive engagement as measured at 2014, 2015 and 2016 and the increased level of responses received.

	% Positive score 2014	% Positive score 2015	% Positive score 2016
<b>OVERALL ENGAGEMENT SCORE</b>	64%	77%	78%
I am proud to work for Cygnet	62%	73%	74%
Care of service users is Cygnet's top priority	67%	78%	82%
I would recommend Cygnet as a great place to work	54%	66%	69%
I understand Cygnet's values	73%	90%	88%
% Respondents	N/A	51%	78%

### Sickness levels and turnover

Across the group staff sickness hours equated to just over 4.29% of all staff hours this is an increase on the previous year. However, it compares favourably with NHS staff sickness rates at 4.24% for PCTs, NHS Trusts and Foundation Trusts, with Mental Health and Learning Disability Trusts reporting increased absence rates of 4.94%<sup>1</sup>.

We recognise that sickness rates impact on staff turnover and the pressure that is placed on staff in the workplace. However, even with a low sickness level across the Group we are focussing keenly on reducing turnover of staff and see this as a key priority.

<sup>1</sup> Health & Social Care Information Centre Processed using data taken from the Electronic Staff Record Warehouse 2012/13

## Part 3: Governance at Cygnet

### Training

A comprehensive review of training within Cygnet Health Care was undertaken in order to both assess and assure compliance with our statutory and mandatory training responsibilities and to upskill staff to deliver high quality clinical care to our services users.

Whilst there was some excellent practice in training across the organisation there was also variable standards in relation to quality and content within some of the training programmes. With the acquisition of new services this was the ideal opportunity to further develop and improve upon the training being delivered and ensure that Cygnet Health Care was meeting best practice standards in clinical education.

The decision was made to move to eLearning modules to ensure both quality and consistency of mandatory topics and this is backed up by classroom face to face sessions focusing on clinical expertise.

Cygnet has developed several enhanced clinical programmes with external training providers offering bespoke content relevant to our service user groups e.g. a CAMHS specific clinical programme.

We also obtained some accreditations on courses and ran a series of trainer workshops to both develop and upskill our staff to deliver some in-house training sessions and to enhance their role.

At this time Cygnet also appointed a new Group Wide Lead for Training, a former University lecturer in healthcare with a background and experience in Clinical Training within mental health services.

Cygnet is required, as part of the CQUIN Framework and the NHS England contract, to meet multiple prescribed standards which evidence a positive approach to the delivery of a quality service. Our quality priorities for 2015/16 included some of these standards. They also take into account areas of national focus in mental health service provision:

- Service user experience
- Clinical effectiveness
- Service user safety

There were many important areas considered by Cygnet Health Care, however, these were determined to be our top priorities. A summary of how Cygnet measures itself against the objectives set in 2015/16 can be seen below (Sections 4.1, 4.2 and 4.3).

## Part 4: Quality Priorities: looking back 2015/16

### 4.1 Service user experience

As a key domain in the NHS Outcomes Framework, service user experience is a crucial area for review and improvement. We have identified the following two measures:

<b>KEY PRIORITIES:</b> Service user experience (2015/16)	Target / Evidence	Outcome
Work with service users to redesign the Service User Satisfaction Survey and improve accessibility	• Updated Service User Satisfaction Survey in place	MET
	• Increase the number of responses to the Service User Satisfaction Survey from previous years	MET
Appoint Director of Nursing & Patient Experience	• Individual in place	MET

### 4.2 Clinical effectiveness

As a key domain in the NHS Outcomes Framework, clinical effectiveness is a crucial area for review and improvement. We have identified the following two measures:

<b>KEY PRIORITIES:</b> Clinical effectiveness (2015/16)	Target / Evidence	Outcome
In line with Public Health England and NICE guidance <sup>1</sup> develop a Smoking Cessation Strategy to deliver sustainable smoke free services	• Appropriate strategy in place	MET
All units to undertake a self-assessment to determine their readiness to deliver smoke-free services and create an implementation plan to facilitate this	• By the 1 <sup>st</sup> February 2016, all units to have conducted self-assessment	MET
	• By the 1 <sup>st</sup> March 2016, all units to have an implementation plan in place	MET

<sup>1</sup> Smoking Cessation in Secondary Care: Mental Health Settings PH48

### 4.3 Service user safety

As a key domain in the NHS Outcomes Framework, service user safety is a crucial area for review and improvement. We have identified the following two measures:

<b>KEY PRIORITIES:</b> Service user safety (2015/16)	Target / Evidence	Outcome
In line with Cygnet's Reducing Restrictive Practices make improvements to electronic reporting systems to enable more sophisticated reporting of the differing types of interventions and specifically time spent in Prone or Supine restraint	• Changes made to ePRIME	MET
To maintain the sustained improvement in year on year levels of prescription and medication errors	• Results of an externally conducted Prescription Chart Audit	MET

## Part 5: Quality Priorities: looking forward 2016/17

Our quality priorities for 2016/17 take into account areas of national focus in mental health provision:

### 5.1 Service user experience

As a key domain in the NHS Outcomes Framework, service user experience is a crucial area for review and improvement. We have identified the following two measures:

KEY PRIORITIES: Service user experience (2016/17)	Target / Evidence
1. To build and grow a group of Experts by Experience who can provide expert input to the group at a senior strategic level	<ul style="list-style-type: none"> <li>Create a register of Experts by Experience</li> <li>Examples of Experts by Experience formally reporting into local board meetings (a minimum of three units)</li> </ul>
2. Appoint Experts by Experience to Cygnet's Reducing Restrictive Practice Project Board and ensure representation on the North and South Regional Groups	<ul style="list-style-type: none"> <li>Membership of the Reducing Restrictive Practice Project Board and local regional groups</li> </ul>

### 5.2 Clinical effectiveness

As a key domain in the NHS Outcomes Framework, clinical effectiveness is a crucial area for review and improvement. We have identified the following two measures:

KEY PRIORITIES: Clinical effectiveness (2016/17)	Target / Evidence
1. All our hospitals will have a date to be smoke free – the project board will work to monitor and support hospitals to achieve this	<ul style="list-style-type: none"> <li>Dates set for move to smoke free settings</li> </ul>
2. To complete the Restraint Reduction network audit to further develop our work plan and make a clear public commitment to work together with service users, families, leaders, managers and frontline staff to ensure coercive and restrictive practice is minimised and the misuse and abuse of restraint is prevented	<ul style="list-style-type: none"> <li>Completion of audit and analysis of results</li> </ul>

### 5.3 Service user safety

As a key domain in the NHS Outcomes Framework, safety is a crucial area for review and improvement. We have identified the following two measures:

KEY PRIORITIES: Service user safety (2016/17)	Target / Evidence
1. To implement a Safeguarding Supervision Framework	<ul style="list-style-type: none"> <li>Evidence of supervision implementation plan and records of supervision</li> </ul>
2. To introduce the Safeguarding Competency Framework	<ul style="list-style-type: none"> <li>Development of too and dissemination across the group</li> </ul>

# Quality Account

1<sup>st</sup> April 2015 to 31<sup>st</sup> March 2016



## Part 6: Comments

If you have any comments about this Quality Account, please provide your feedback to Nicky McLeod, Chief Operating Officer at the address below:

**Cygnets Hospital Stevenage**

**Graveley Road**

**Stevenage**

**Herts**

**SG1 4YS**

Website: [www.cygnethealth.co.uk](http://www.cygnethealth.co.uk)

Email: [nickymcleod@cygnethealth.co.uk](mailto:nickymcleod@cygnethealth.co.uk)



# Quality Account

1<sup>st</sup> April 2014 to 31<sup>st</sup> March 2015



## Annex 1: Statement from our Lead Purchaser on the Quality Account 2015/16

Received by email



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12<sup>th</sup> May 2017

**Re: Cygnets Quality Account April 2015 – March 2016**

**Statement from NHS England North Region (North West Hub), as the Lead Commissioner for the Cygnets Health Care Contract on behalf of NHS England.**

NHS England commissions both adult secure and CAMHs services from Cygnets Health Care. This year there has been an improvement in some services and we have moved out of Quality Surveillance Group for those services. Where quality concerns have occurred NHS England has been impressed with the open and honest approach to working together to address these.

NHS England recognises the new governance arrangements and work to strengthen reducing restrictive practice and the investments made to support this. NHS England is particularly supportive of the role of the expert by experience employed to support improvement and to challenge practice. NHS England looks forward to a continued relationship with Cygnets Health Care.

Yours sincerely,

Alison Cannon

Mental Health and Programme of Care Lead

North Region (North West hub)

