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1 Part 1: Introduction

1.1 Executive Summary

As a provider of NHS health services, we write this annual Quality Account for our staff, stakeholders and for the people who use our services. It reflects and demonstrates the importance our organisation places on quality.

The Quality Account 2021 / 2022 is divided into four sections.

Part One contains an introduction by the Trust Chair, the Chief Executive and the Chief Nursing Officer.

Part Two outlines our Trust vision and values and commitment to continuous quality improvement. It also details our response to a series of mandatory questions.

Part Three contains a review of our progress in 2021 / 2022.

Part Four looks ahead and contains our priorities for improvements for 2022 / 2023.

1.2 Introduction

I am happy to introduce the Quality Account for Wirral Community Health and Care NHS Foundation Trust. The Quality Account gives us an opportunity to reflect on our many quality achievements and successes over a difficult year and also enables us to identify areas where we want to focus attention on the agreed quality priorities for the 2022 / 2023 coming year.

As the main provider of community health and adult social care across Wirral and with 0 -19 services in Cheshire East, 0-19 service for St Helen's and 0-25 service for Knowsley we aspire to achieve outstanding care and are committed to ensuring continuous quality improvements across the services we provide.

Our vision is to be a population-health focussed organisation specialising in supporting people to live independent and healthy lives.

Together...

we will support you and your community to live well.

Compassion

Supportive and caring, listening to others.

Open

Communicating openly, honestly and sharing ideas.

Trust

Trusted to deliver, feeling valued and safe.

A key strength of our Trust is how our teams are able to support people at critical points through their entire lives, enabling them to start, live, age and die well. We provide universal services focused on wellness as well as specialist services, working at the heart of communities and across whole Place footprints in Cheshire & Merseyside.

More people are living longer and with multiple long-term conditions. This requires new thinking about how high quality, sustainable health and social care services can actively support people to stay well and independent as well as treat specific conditions and illnesses. We are working in a time of rapid change, with much greater emphasis on how organisations can work together to meet the challenges of improving health and care services and equity of health outcomes and do so affordably.

We are registered with the Care Quality Commission (CQC) without conditions and play a key role in the local health and social care economy working in partnership to provide high quality, integrated care to the communities we serve.

Our expert teams provide a diverse range of community health and social care services, seeing and treating people right through their lives both at home and close to home. We have an excellent clinical reputation employing over 1,700 members of staff, 90% of who are in patient-facing roles. Our workforce represents over 70% of the costs of the organisation and is the most important and valued resource we have.

In 2021 / 2022, our services collectively delivered close to one million face to face contacts, telephone contacts and virtual consultations which is a fantastic feat considering we were in a global pandemic.

In addition, during 2021 / 2022 the Trust expanded services, supporting a system-wide response to the COVID-19 pandemic. This resulted in the increased use of technology to safely deliver services remotely, when appropriate. We also supported the local Wirral system by opening a rehabilitation in-patient unit to support safe, timely transfer of care from acute hospital care to home / other care setting.

Not unlike most places in the country, the local health and social care economy is faced with the challenge of meeting rising demand, within finite resources. This is driving the growth in provision of community health services ensuring we play a vital part in enabling people to live healthier, more active and independent lives, reducing unnecessary hospital admissions.

On behalf of the Trust Board, I would like to thank all staff and volunteers for their dedication, energy and passion for quality care, in what has been another successful year improving quality across all services.

There is not a requirement to have stakeholder feedback on the 2021 / 2022 Quality Account, however our local Commissioners and Healthwatch have agreed to provide a statement

1.3 Mandated Statement by Trust Chair and Chief Executive

The directors are required under the Health Act 2009 to prepare a Quality Account for each financial year. The Department of Health has issued guidance on the form and content of the annual Quality Account (in line with requirements set out in Quality Account legislation).

In preparing their Quality Account, directors should take steps to assure themselves that:

- The Quality Account presents a balanced picture of the Trust's performance over the reporting period

- The performance information reported in the Quality Account is reliable and accurate
- There are proper internal controls over the collection and reporting of the measures of performance included in the Quality Account, and these controls are subject to review to confirm they are working effectively in practice
- The data underpinning the measure of performance reported in the Quality Account is robust and reliable, conforms to specified data quality standards and prescribed definitions, and is subject to appropriate scrutiny and review
- The Quality Account has been prepared in accordance with any Department of Health guidance The Directors confirm to the best of their knowledge and belief that they have complied with the above requirements in preparing the Quality Account.

Trust CEO

Dated:

Trust Chair

Dated:

2 Part 2: Vision and Values and Commitment to Quality

2.1 WCHC Vision and Values

Throughout 2021 we embarked on developing our new Trust Vision and Values.

The development of our Values was driven by our staff. A cultural values assessment survey was undertaken with the workforce and then further focus groups to understand themes and meanings which sat behind the survey results. This allowed us to understand what mattered most to our workforce and more importantly for the staff to choose and own our organisational values. This led to the creation of **“Compassion, Open and Trust”**.

During 2021 we invited staff, governors, service users and our wider system partners to work with us in the creation of our 5-year strategy under the heading of “Shaping Our Future”. Through the gathering of local intelligence, understanding the national direction concluded in our ultimate vision, objectives and goals which are:



2.2 Staff Recognition

The Trust has for the last nine years held an annual Staff Awards ceremony that recognises the fantastic achievements and commitment of colleagues and teams

across the Trust. Unfortunately, due to the ongoing COVID-19 pandemic the awards could not go ahead for 2021 / 2022.

However, over the last two years, we have introduced alternative ways to celebrate and thank staff including 'Shout Outs' which welcome messages of thanks and recognition from all staff for each other across the Trust. So far, we have shared over one thousand 'Shout Outs' in The Update bulletins, each demonstrating our values of compassion, open and trust.



In March 2022 the Trust launched a new and refreshed Staff Recognition scheme along with the official launch of Team WCHC Staff Awards for 2022 which will be a wonderful culmination of all the amazing work of the Trust, the values and the people that make it a great place to work and receive care. It will also be an opportunity to welcome our new colleagues from St Helens and Knowsley who recently joined Team WCHC.



The Trust also introduced The Monthly Stand-Out to replace its previous Employee of the Month scheme. This monthly opportunity enables staff to expand on the shout outs and tell a more detailed story of how someone has stood out and demonstrated the Trust values in their role.



2.3 Mandated statements

2.3.1 CQC registration

Wirral Community Health and Care NHS Foundation Trust is required to register with the Care Quality Commission (CQC) and its current registration is 'Requires Improvement'. Wirral Community Health and Care NHS Foundation Trust has no conditions on registration and the Care Quality Commission has not taken enforcement action against the Trust during 2021 / 2022.

The Trust was inspected by the CQC in 2018. In March 2020 the CQC issued the Routine Provider Information Request (RPIR) to the Trust for submission, but this process was stopped due to the COVID-19 pandemic and the response of the Trust to the national Level 4 incident. We look forward to resuming the CQC inspection process as soon as possible and the opportunity this will provide to demonstrate the significant improvements the Trust has made.

Wirral Community Health and Care NHS Foundation Trust has not participated in any special reviews or investigations by the CQC during the reporting period.

2.3.2 Data security and protection toolkit attainment level

Wirral Community Health and Care NHS Foundation Trust submitted the 2020 / 2021 Data Security and Protection Toolkit in June 2021. The Trust were initially assessed as Standards Not Met, however, following implementation of an improvement plan the Trust were reassessed by NHS Digital as Standards Met in December 2021.

2.3.3 Clinical coding error rate

Wirral Community Health and Care NHS Foundation Trust were not subject to the Payment by Results clinical coding audit during 2020 / 2021 by NHS Improvement.

2.3.4 Data quality

During 2021 / 2022, Wirral Community Health and Care NHS Foundation Trust provided and / or sub-contracted 61 relevant health services.

Wirral Community Health and Care NHS Foundation Trust has reviewed all the data available to them on the quality of care across all relevant health services.

The income generated by the relevant health services reviewed in 2021 / 2022 represents £91 million of the total income generated from the provision of relevant health services by Wirral Community Health and Care NHS Foundation Trust for 2021 / 2022.

2.3.5 Central Alerts System (CAS) reporting

The Central Alerting System (CAS) is a web-based cascading system for issuing patient safety alerts, important public health messages and other safety critical information and guidance to the NHS

Alerts available on the CAS website include National Patient Safety Alerts (from MHRA, NHS England and NHS Improvement and the UK Health Security Agency (UKHSA)), NHS England and NHS Improvement Estates Alerts, Chief Medical Officer (CMO) Alerts, and Department of Health & Social Care Supply Disruption alerts.

During the period 2021 / 2022 The Central Alerting System issues 46 alerts to Wirral Community Health and Care NHS Foundation Trust for consideration and potential dissemination and actions. There is robust oversight and governance for CAS alerts which are reviewed for relevance at the Clinical Assurance Group and Clinical Risk Management Group. Appropriate alerts are disseminated to relevant services via the Trust's Standards Assurance Framework for Excellence (SAFE) system

Of the 46 alerts issued:

- 31 had no response required and were shared for information only
- 10 had actions completed
- 5 no action was required

In all cases updates and actions were made on time and in line with CAS guidance.

2.3.6 Participation in national clinical audits and local audits

During 2021 / 2022, 2 national clinical audit and 0 national confidential enquiries covered relevant health services that Wirral Community Health and Care NHS Foundation Trust provides.

During that period, Wirral Community Health and Care NHS Foundation Trust participated in 100% of national clinical audits and 0% national confidential enquiries of the national clinical audits and national confidential enquiries which it was eligible to participate in.

The national clinical audits and national confidential enquires that Wirral Community Health and Care NHS Foundation Trust was eligible to participate in during 2021 / 2022 is as follows:

- BASHH Chlamydia – online submission to BASHH
- National Audit for Cardiac Rehabilitation

The national clinical audits and national confidential enquiries that Wirral Community Health and Care NHS Foundation Trust participated in during 2021 / 2022 is as follows:

- BASHH Chlamydia – online submission to BASHH
- National Audit for Cardiac Rehabilitation

The national clinical audits and national confidential enquiries that Wirral Community Health and Care NHS Foundation Trust participated in, and for which data collection was completed during 01 April 2021 – 31 March 2022, are listed below alongside the number of cases submitted to each audit or enquiry as a percentage of the number of registered cases required by the terms of that audit or enquiry.

National Clinical Audit	Number of cases submitted (%) of the number of registered cases
Sexual Health - BASHH Chlamydia - online submission to BASHH	Figures are sent directly to BASHH from the laboratory not the Trust
National Audit for Cardiac Rehabilitation	100%

There have been zero national clinical audit reports published during the reporting period in which the Trust has participated.

Local Clinical Audits

Audit is part of a fundamental quality improvement cycle to measure the effectiveness of health and social care against agreed and proven national and local standards for high quality care.

The Trust have undertaken and published 33 local clinical and professional audits over 2021 / 2022. Progress against clinical and professional audits is tracked on the Trust's SAFE system (Standards Assurance Framework for Excellence). This ensures there is visibility and an active repository of evidence accessible to all staff.

Health and care audits are a way to support services and identify what's going well, to celebrate best practice and highlight opportunities for improvements. Clinical and professional audit is embedded into the Trust's governance structure to ensure that results are shared.

Published audit reports are shared with all staff and areas of good practice used as a springboard for further improvements. When areas are identified for improvement,

actions and leads are identified to support this improvement to happen and subsequent re-audits carried out as part of the Trust's continuous improvement cycle.

2.3.7 Management of National Institute for Health and Care Excellence (NICE) Guidance

During 2021 / 2022, NICE produced 134 new guidance. For the Trust:

- 117 were not applicable
- 15 were applicable and are under review
- 2 fully implemented

2.3.8 Learning from Deaths

During 2021 / 2022, 13 of Wirral Community Health and Care NHS Foundation Trust patients died. The figure represents the total number of unexpected deaths rather than deaths from all causes. This comprised the following number of unexpected deaths which occurred in each quarter of that reporting period:

- 5 in first quarter, none were attributable to the Trust
- 1 in the second quarter, none were attributable to the Trust
- 5 in the third quarter, none were attributable to the Trust
- 2 in the fourth quarter, none were attributable to the Trust

By 31 March 2022, 13 case record reviews and 11 investigations have been carried out in relation to 13 of the unexpected deaths detailed above.

In 11 cases an unexpected death was subjected to both a case record review and an investigation. The number of unexpected deaths in each quarter for which a case record review or an investigation was carried out was:

- 4 in the first quarter
- 1 in the second quarter
- 4 in the third quarter
- 2 in the fourth quarter

0 representing 0% of the patient unexpected deaths during the reporting period are judged to be more likely than not to have been due to problems in the care provided to the patient.

These numbers have been estimated using the Trust's mortality review screening tool, which is recorded centrally on the Trust's Datix incident reporting system. Each completed review tool is progressed through the Trust's Mortality Review group chaired by the Medical Director.

Learning from deaths – case record reviews and investigations

The Trust's Learning from Deaths Policy provides a framework for how the Trust will evaluate those deaths that form part of our mortality review process, the criteria for review and quarterly and annual reporting mechanisms. The Trust's Datix incident reporting system is aligned to the Learning from Deaths Policy to ensure prompt communication to the Medical Director, Chief Nursing Officer and Chief Operating Officer for all unexpected deaths.

Actions taken as a result from learning from deaths

Through review and analysis of reported incidents, the Trust has identified the benefit of a whole system approach to learning from deaths. As a result, the Medical Director is actively engaging with providers across the Wirral health and social care economy to ensure shared learning opportunities are identified and appropriately disseminated to support collaborative working to continuously improve the quality of care provided.

Assessing the impact of the quality improvement actions taken to learn from deaths

The impact of the system-wide approach to learning from unexpected deaths is assessed and monitored at the Trust's mortality review group. The group will continue to closely monitor the impact of implementing a system-wide approach to learning from unexpected deaths during 2022 / 2023.

0 case record reviews and 0 investigations were completed after 01 April 2022 which related to unexpected deaths which took place before the start of the reporting period.

3 Part 3: Looking back over the last year 2021 / 2022

3.1 Quality Plan 2021 / 2022

During 2021 / 2022 the Quality Plan detailed below was implemented with great success

QUALITY PLAN 2021-22 Supporting our populations to thrive through a preventative, personalised, holistic and integrated approach with the person at the heart of every conversation and decision working with system partners to optimise wellbeing and independence		
Engaged populations	Effective and innovative	Safe care & support every time
<p>We will involve people as active partners in their wellbeing and safety, promoting independence and choice by ...</p> <ul style="list-style-type: none"> Embedding a more inclusive approach which promotes the rights, strengths and wellbeing of people, families and communities <p>We will support this by ...</p> <ul style="list-style-type: none"> Working with Healthwatch and other partners to actively seek insights into the needs of people, recognising the expertise people and communities have Building engagement skills across all services Positioning 'what matters to me' and co-production as a core feature of personalised care & support planning and continuous quality improvement 	<p>We will nurture an improvement culture focused on consistently delivering effective, efficient care and support by ...</p> <ul style="list-style-type: none"> Trusting, liberating and empowering staff to innovate and test new ideas <p>We will support this by ...</p> <ul style="list-style-type: none"> Adopting a clear QI methodology which is easy to understand, implement and measure Establishing a QI faculty to coordinate training and development of staff in line with agreed competencies framework Building a system to track QI projects across the organisation Hosting celebration and sharing events throughout the year 	<p>We will nurture a positive safety culture, promoting psychological safety and supporting reflection by ...</p> <ul style="list-style-type: none"> Focusing on identified safety priorities (falls prevention and safe discharge) and launching our Just and Learning Culture campaign <p>We will support this by</p> <ul style="list-style-type: none"> Implementing Team Time and Schwarz Rounds Building the skills of identified safety specialists Strengthening our system of disseminating learning across the organisation Further embedding CRMG, SAFE and Datix as key systems for assuring safety across health and social care
<p align="center">POPULATION HEALTH FOCUS</p> <p align="center">Building back fairer – working with communities and system partners to optimise inclusion and tackle inequalities Appropriate access to care and support – expanding the benefits of digital inclusion Coalition of safety and improvement across system – leading the way in keeping people safe and well</p>		

3.2 Engaging Population

3.2.1 Partnerships

We have further strengthened our relationships with Healthwatch Wirral, working together in actively seeking and sharing insights into the needs of people and helping to shape and improve local health and social care services.

Healthwatch have attended meetings across the Trust, exploring wider opportunities for engagement and promotion of the Healthwatch resource vehicle offering

information and advice to patients, communities and staff particularly around self-care, care navigation.

Further partnerships have strengthened across our regional areas as our Trust has continued to grow. There is regular attendance at the Cheshire & Mersey Investing in Children and Young People Partnership forum, which allows the sharing of best practice, learning and innovation.

There is also Trust representation as part of the regional and national Head of Patient Experience (HOPE) network, with a clear focus on inclusion and the reduction in health inequalities.

3.2.2 Building engagement skills across all services

In order to actively engage our populations and involve people as active partners, we recognised the importance in building the knowledge, skills and capabilities across our workforce. Through the roll out of staff experience and engagement surveys and Trust wide focus groups we were able to identify how best to support and develop our workforce.

Based on the learning, there have been several initiatives developed to enhance knowledge, skills and capabilities across the Trust. These were launched in a special edition engagement communications update, which included several resources, templates and promotion and encouragement of accessing the engagement forums.

We were also delighted to welcome colleagues from NHS England & Improvement's Experience of Care Team to deliver bespoke co-production and Always Event training.

There has been specific engagement learning modules built and included within the onboarding recruitment and induction system as well as forming part of the managers essentials training platform for leaders within the Trust.

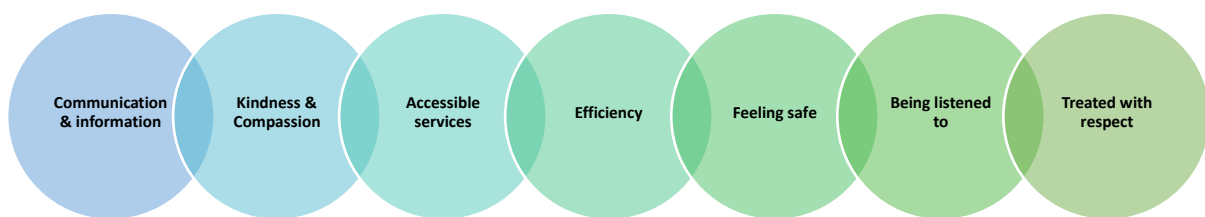
3.2.3 'What Matter to Me'

Our services are striving to deliver optimal **value** to the people, populations and

communities we service, ensuring we are delivering personalised care. By empowering patients and service users and involving them in decisions about their care we aim to see improvements in patient outcomes as well as improvements in experience of care. Therefore, we regularly ask “what matters to you?” at the point of care as well as part of our community engagement and experience processes.

The SystmOne patient records system has evolved, and further developments include an improved equality and reasonable adjustment template to allow services to adjust accordingly to a person’s needs. We are also able to monitor this data through the Trust Integrated Gateway dashboards and manage population needs accordingly.

The Trust has also received responses from over 700 people who have accessed our services and shared what matters to them. Themes have included:



3.2.4 Engagement Forums

Your Voice

The ‘Your Voice’ group is integral to the effective community engagement and contribution to the continual improvement across the Trust. Over the past year the group have met virtually.

The group provides a voice to help drive and improve the experiences of people and their families who access Trust services. The group includes service users, members of the public, public governors, and Trust staff. This year we have welcomed new group members and are continuing to increase the diversity of the group to ensure the group reflects the communities the Trust serves.

The Your Voice Group has supported services with various projects including:

- The development of service specific patient information leaflet
- Quality improvement project ideas
- Patient experience survey questionnaires

Involve

The group represents the universal voice of young people across Cheshire & Merseyside and enables our organisation to develop and sustain services that support the health and wellbeing of young people.

This year the group has welcomed several new members reflecting the growth of our 0-19 Service offer across Cheshire & Merseyside. There are now over 55 members of the group. There has been a lot of interest from young people themselves as well as through schools which may have been driven through the media profile of the NHS during the pandemic.

The purpose of the group is to improve the experience of service users receiving care from the Trust by:

- identifying opportunities for the group to input and share views on service redesign and key projects
- contributing to the evaluation and planning of services across the Trust that provide care for children and young people
- empowering young people and ensuring they feel valued and listened to
- involving our young people in shaping the future of our services
- presenting the views of our young people to the Board and Commissioners, helping inform service development
- encouraging members to act as a link between our services and our communities, capturing the views of our diverse populations

The group has continued to operate throughout the pandemic to ensure that young people continued to have a voice and that services could continually support their needs.

Inclusion Partnership Forum

The Trusts Inclusion Partnership Forum works together to support local people,

people with protected characteristics and those most vulnerable.

The Forum continued to meet during the pandemic, offering an opportunity for community organisations for underrepresented groups to share their experiences, supporting each other and provide feedback on the experiences of those groups during the period.

3.2.5 Friends and Family Test (FFT)

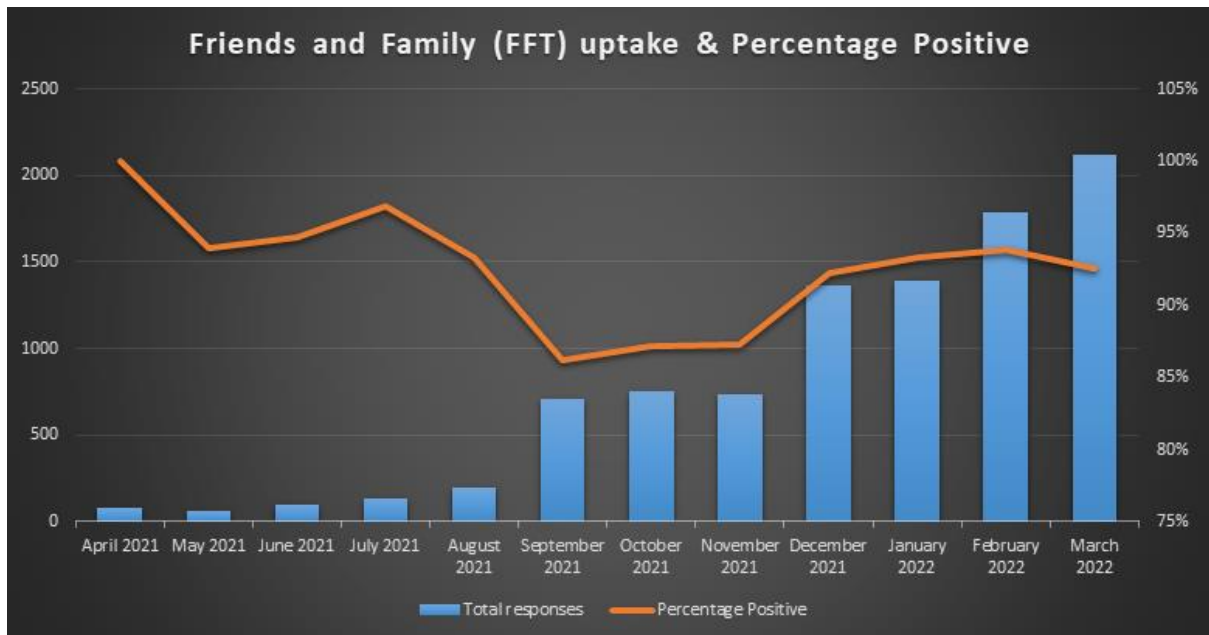
The Friends and Family Test (FFT) is an important feedback tool that supports the fundamental principle that people who use NHS services should have the opportunity to provide feedback on their experience.

It asks people if they would recommend the services they have used. When combined with the supplementary follow-up questions, the FFT provides a mechanism to highlight both good and poor patient experience. This kind of feedback is vital in transforming NHS services and supporting patient choice.

The friends and family question is incorporated into the Trust's Your Experience questionnaires, feedback cards, and our online form. Anyone who contacts the 'Your Experience service' by telephone will also be asked the question.

'How likely are you to recommend our services to friends and family if they needed similar care or treatment?'

The chart below shows monthly percentage of respondents who would recommend our services for care or treatment and the total number of responses received.



3.2.6 Compliments and thanks

In September 2021 we procured Healthcare Communications to host the Trust’s new ‘Your Experience’ digital platform and introduced an electronic survey and the Friends and Family Test (FFT) text messaging system.

Since then, we have received over 9000 responses from people who have used our services sharing compliments and thanks to the services. Over half of those people who provided compliments described how our workforce contributed to their positive experience. Other positive themes included:

- Implementation of care
- Care environment
- Communication
- Clinical Treatment
- Waiting time & access

Compliments and feedback are shared with all teams on a regular basis.

3.3 Effective and Innovative

3.3.1 Quality Improvement (QI) infrastructure

During 2021 / 2022, we strengthened our Quality improvement infrastructure by introducing the role of Quality Improvement Practitioner to support Quality Leads and Divisional Managers.

In addition, we developed a QI training strategy and supported 13 people to develop quality improvement skills at an expert level. The training model included QI, engagement and innovation training for newly appointed quality improvement practitioners who are leading larger scale quality improvements across the trust. In addition, WCHC have been the host site for a Cheshire and Mersey quality improvement and leadership development pilot along with St. Helen's CCG and East Cheshire NHS Trust. The course, driven by the needs of staff across the region, aims to develop QI knowledge and leadership skills to enable place-based QI initiatives to be effectively implemented. At a more local level, we have actively recruited over 20 staff across a range of services including nursing, allied health professionals, social care and corporate, as quality champions. Our vision is to continue to build on this number so that we have at least 2 champions in every service. We have worked closely with our colleagues in Learning and Organisational Development to build QI content into our newly launched management essentials programme and staff onboarding. QI and innovation are an integral part of staff development and this is also reflected in our updated appraisal documentation.

3.3.2 Quality Improvement Faculty

In keeping with a focus on embedding quality improvement and promoting and encouraging innovation, research and co-production of services, this faculty has been established during 2021 / 2022. Its purpose is to ensure that there are systems and process in place to effectively capture the insights and needs of our people, promoting accessibility and inclusivity and alongside "what matters to me" and co-production as a core feature of our culture of continuous quality improvement and innovation. The group will systematically review QI, innovation and engagement

activity, sharing and celebrating best practise and using this as a springboard for further improvements.

3.3.3 Beyond Boundaries Campaign

The Trust has continued with a series of blogs from colleagues who are keen to share their story about the innovations and developments that are taking place within their service. The series is called 'Beyond Boundaries' and showcases the innovative thinking and how people have overcome obstacles to provide great patient care, helping our communities to live well.

COVID-19 has been a catalyst for innovation and change and by sharing what we do and what's working, we create opportunities to empower staff to make changes.

An example of a Beyond Boundaries Blog:

Judy Fairbairn and I'm the Service Development, Outreach and Engagement Lead in Sexual Health Wirral

"Outreach, engagement and prevention plays a crucial role in our service and I feel lucky to be able to support our communities in this way.

I'm really pleased to be able to contribute to the Beyond Boundaries series by telling the story of how we have provided cervical screenings (smear tests) for a group of women in Wirral.

We've been working with several partners agencies to reach some of our more vulnerable populations and help reduce some health inequalities by providing access to cervical screening. We know as a service there are women who aren't accessing their regular cervical screenings for a few reasons, including sexual or domestic abuse, therefore offering bespoke cervical screening sessions is key.

As cervical screening awareness week was approaching, we engaged with one of our partners, Wirral Ways to Recovery, to offer cervical screenings to vulnerable women. Myself and our GP Champion provided overdue cervical screenings.

Taking our services out into the community ensures that we are delivering care and support to those who need it most. I'm so passionate about working with and supporting partner organisations – our partnership approach makes such a difference to people's lives.”

3.4 Safe Care and Support Every Time

3.4.1 Implementation of Schwartz Rounds

During 2021 / 2022, we established an organisation wide Schwartz Rounds Steering group. 6 facilitators received training and we ran our first WCHC Schwartz Round with the theme of COVID and Me.

In addition, we participated in the first Wirral System Schwartz Round, the theme of which was The Day I'll Never Forget. Both events provided a safe space for colleagues to share experiences and explore the emotional impact of working in health and care at a time of extreme pressure and uncertainty. The programme has been evaluated positively and will continue to form a key part of patient safety and staff wellbeing programmes moving forward.

3.4.2 Patient Safety Specialists

During the period of 2021 / 2022 we have successfully named two Patient Safety Specialists within the trust. Our Patient Safety Specialists delivered a presentation to the Board of Directors during quarter four. This included the introduction to the Patient Safety Specialists role, the introduction of Patient Safety Partners Role which will commence during 2022 / 2023.

Insight

We have sourced training for Patient Safety Incident Investigations and for Patient Safety champions which we will further develop this role during the next year. We have also developed a Safety Risk and Learning Review panel this year that focuses on the Trust key areas of risk. The group triangulates all levels of harm for the key areas of risk such as Pressure Ulcers, Falls, Medication and Discharge incidents, understanding themes and trends and measuring against action plans. This enables the Trust to demonstrate the effectiveness of learning strategies and if further actions are needed. This has enabled us to consider utilising digital technology for falls prevention which will be trialled during 2022 / 2023.

Involvement

We have also submitted a paper to Strategic Committee to align our training to the National Patient Safety training for all staff to be trained at level one including the Board with specific level one training. To ensure we are maintaining the high standards of training for patient safety all our front-line staff will be trained at level two. We are currently awaiting the publication of the Patient Safety Incident Review Framework to start the transition during 2022 / 2023.

Improvement

The Trust supports an open, honest and learning culture to incident reporting and engaging with staff at the front line to really understand their perceptions of safety for staff and patients. This has enabled us to move forward with the development of driver diagrams and plans to support the 'you said we did' model of care, to support an incident reporting culture and patients / families / staff experience.

3.4.3 Learning from incidents

The Trust is committed to learning from incidents at the earliest opportunity facilitating continuous improvement to deliver high-quality services. To support this aim, a robust governance framework has been developed ensuring timely identification and responsiveness to reported incidents. This enables lessons learned to be rapidly disseminated to all relevant services.

Through the Trust's dynamic clinical governance assurance system, services are closely monitored, ensuring learning for improvement is embedded and sustained into practice, resulting in positive outcomes for individuals in receipt of our services.

A weekly safety huddle led by the Trust's patient safety team is responsible for reviewing all incidents resulting in moderate harm and above. Analysis from this meeting is reported to the weekly Clinical Risk Management Group, chaired by the Trust's Executive Medical Director. This group is responsible for overseeing serious incident investigations, ensuring learning is identified and implemented throughout Trust services. Group membership includes senior operational and clinical leads

representing all Trust services, supporting the Trust's established culture of learning and improvement.

Organisational learning is at the heart of our systematic risk management approach to assuring safety. All staff are actively encouraged to report incidents on the Trust's incident reporting system (Datix), supporting an open, transparent culture of learning. This approach is central to the rapid identification of emerging themes and trends, enabling prompt intervention to effectively manage and mitigate risk.

Incident analysis is further enhanced by the development of bespoke dashboards on the Trust's Information Gateway, facilitating triangulation of multiple data sources to support learning. Data analysis is reported to the Trust's Integrated Performance Board monthly and by exception to the Quality and Safety Committee bi-monthly. This ensures visibility Trust-wide from frontline services to the Board of Directors, supported by a centralised system ensuring consistent, shared knowledge throughout the Organisation.

In addition to staff reporting, the Trust is committed to working with our communities, patients, service users and their families to understand what matters to them. We actively encourage people in receipt of our services to be partners in their own personal safety plans, ensuring care is personalised. This work will further evolve during 2022 / 2023 as we continue to implement the NHS Patient Safety Strategy, focusing on Insight, Involvement, and Improvement, ensuring a cycle of continuous learning.

3.4.4 Incident reporting

During 2021 / 2022 there was an increase in incident reporting within the Trust, maximising learning opportunities, supporting our open, transparent culture. An increase in reporting was particularly evident in no or low harm and near miss incidents, providing valuable learning to reduce the potential occurrence of serious incidents.

Reporting of incidents is part of the induction programme on appointment to the Trust, supporting a collective responsibility for the recognition and reporting of incidents. To ensure staff involved in incidents are fully supported, a debrief is offered when any incident is reported, to support the psychological safety and health and well-being of our staff.

3.4.5 Never Events

During the 2021 / 2022 reporting period the Trust had zero never events

3.4.6 Safeguarding

We are committed to ensuring that all staff are aware of their role in relation to Safeguarding Children and Adults at Risk and consistently demonstrate organisational compliance with statutory duties and local safeguarding frameworks.

During 2021 / 2022, we have successfully submitted evidence of compliance to commissioners and Designated professionals in relation to

- Section 11 of the Children Act 2004
- Chapter 14 of the Care Act 2014
- Quarterly Safeguarding Assurance Frameworks for Children, Children Looked After and Vulnerable Adults

In addition, compliance with Safeguarding training and Supervision remains high across all services.

The Safeguarding Service provides a comprehensive proactive service, which responds to the needs of staff and individuals. The service is committed to the promotion of safeguarding within everyday practice, focusing upon prevention and early intervention.

3.4.7 Freedom to Speak Up (FTSU)

During 2021 / 2022

- 30 FTSU concerns were reported, compared to 29 reported in 2020 / 2021

- 29 concerns have been concluded with one still under investigation
- 40% of concerns reported were reported anonymously or via a mediator i.e., FTSU Champion

Key themes included behaviours / relationships and systems and processes

Learning from FTSU for the period 2021 / 2022 include:

- Wider use of staff satisfaction surveys
- Strengthened mechanism for monitoring action plans created to address concerns
- Collaborative solutions to concerns enabling reporters to be part of the outcome or action planning process
- Enhanced collaboration with Higher Education Institutes and support for students to feel comfortable raising concerns
- Working in collaboration with HR to provide swift responses to individuals to answer queries or concerns regarding assumptions or rumours
- Providing team or service wide feedback and support when concerns have been reported anonymously
- Collaborative working with Staff Side Representatives to support their members
- Improved communication re PPE and COVID-19 Regulations
- Service wide support to staff members to minimise staff impact at times of service change

3.4.8 Complaints

The Trust received a total of 75 complaints. 32 of those related to health complaints and 43 for Adult Social Care, including access and intermediate care.

The top five themes of those complaints relate to:

- Unhappy with assessment or level of support
- Communication/information to patients
- Admission, discharge & Transfer arrangements

- All aspects of clinical treatment
- Unhappy with charges or information relating to charges

Following investigation, 33 were not upheld, 28 upheld and 16 partially upheld.

Where complaints were either upheld or partially upheld, services were required to identify learning and improvements and action plans were tracked through Clinical Risk Management Group (CRMG).

3.4.9 Medicines Management

Medicines management is an integral part of the Trust's core business, playing a crucial role in maintaining health, preventing illness, managing chronic conditions and curing disease. During 2021 / 2022, the medicine management team has played a crucial role in:-

- supporting the safe and effective delivery of COVID-19 vaccinations to our 12-15-year-old young people
- establishing safe and effective medicines processes within our inpatient reablement and rehabilitation unit
- delivering non-medical prescribing training
- addressing the challenges of antimicrobial resistance through collaboration with system partners

Through implementation of the Medicines Optimization Strategy 2021 / 2024, the activity has continued around 4 main themes:

- an open dialogue between the patient and/or the carer about patient choice and experience of using medicines to manage their condition
- evidence based use of medicines, ensuring that the most appropriate choice of clinically and cost-effective medicines are made that can best meet the needs of the people who use Trust services
- medicines use will be as safe as possible
- by making medicines optimization part of routine practise, the Trust will promote a culture of continuous quality improvement

3.4.10 Infection Prevention and Control (IPC)

The Trust has an integrated IPC Team led by the Chief Nursing Officer/Director of Infection Prevention and Control (DIPC). The team have played an integral part in the Trusts on-going response to COVID-19 providing support and advice to staff working both in Trust services and within the wider community.

The team have been instrumental in ensuring staff have received regular updates throughout the pandemic, interpreting new guidance and ensuring appropriate dissemination. As part of the NHS's response to the pandemic, an IPC Board Assurance Framework has been used to provide internal assurance that quality standards have been maintained. The Trust has demonstrated full compliance with the necessary measures taken in line with national guidance and to assess risks using the hierarchy of controls.

The IPC Service secured additional funding for the continuation of the care home improvement project throughout 2021 / 2022. The funding enabled ongoing dedicated support from an IPC nurse to care homes to support improvement of IPC standards and response to outbreaks.

This continued funding also allowed for continued support and development of our Standards Assurance for Excellence (SAFE) portal for care homes. Homes have continued to receive a series of virtual and face-to-face support visits to review IPC standards, covid arrangements, outbreak management and support with the inputting of data on SAFE.

Our innovative approach to maintaining the safety of our most vulnerable residents received national acclaim when our Specialist Community Infection Prevention and Control team were awarded Team of the Year 2021 by the Infection Prevention Society.

Standards Assurance for Excellence (SAFE)

Training and support in the use of SAFE has continued throughout this reporting period.

We have continued to offer a bi-monthly rolling training package for SAFE, which has included training and trouble-shooting sessions, to date:

- 98% of Nursing/Residential EMI homes have been trained on SAFE, with 82% of settings using SAFE
- 100% of Residential/Specialist Residential homes have been trained, with 80% of settings using SAFE

3.4.11 COVID-19 and our response

We are extremely proud of our strong track record of delivering high quality, safe services. This consistent commitment to safety has never been so apparent than during the past two years as we have played our part in keeping people safe across our communities throughout the COVID-19 pandemic.

Alongside internal organisational support offered, the Infection Prevention and Control Service (IPC) is also commissioned to provide a service to the wider local community. Its aim is to prevent and reduce the burden of infections through the provision of comprehensive high-quality evidence-based advice and support.

During 2021 / 2022, the service managed 270 outbreaks and 375 single cases of COVID-19. In addition to this, the team have supported the management of 47 outbreaks of communicable disease across a variety of community settings.

The IPC service has responded to over 2300 telephone calls, providing specialist advice and support to help services to manage COVID-19 and IPC within individual settings.

Our teams have gone the extra mile time and again to provide exceptional, safe care in the most challenging of circumstance with our Standards Assurance Framework for Excellence (SAFE) system continuing to evidence a strong system of quality assurance. Our resulting success has been recognised locally, regionally, and Nationally.

We have provided significant expertise through our specialist community teams to the local pandemic response and have been instrumental in supporting people to remain safely at home and return home swiftly with the personalised care they require.

Understanding the needs of the people we serve has always been central to our philosophy and our understanding the needs of people has extended during the pandemic. We have worked with communities to address issues such as vaccine hesitancy and our Integrated Children's Therapy team have been recognised for their engagement work with children and families to facilitate easy access of care via video consultations. This initiative was shortlisted for an HSJ Patient Safety Award, a recognition of the value of collaboration and co-design.

In addition, we have further embedded our focus on innovation during this period. Our Community Cardiology Service, for example, have been invited to present their innovations at national events to inspire leaders in other areas. They have demonstrated that exceptional preventative care is possible even in the most challenging of contexts. Our Occupational Therapists meanwhile have published research on therapy outcome measures which assess what really matters to people.

As we come out of the pandemic and having reflected on all that we have learned throughout that period, our quality strategy is more ambitious than ever before. Over the next 5 years, we will stretch ourselves by not only maintaining a focus on quality and safety, but by taking a population health approach and striving every day to create more equitable outcomes for the people we serve. In addition, we will ensure that we use our limited resources efficiently and sustainably. We will shift from a traditional approach to improving quality to one of assertive, proactive action with people and communities inspiring and guiding care developments. It holds at its

heart three Quality Ambitions underpinned by our organisational values, Trust, Open, Compassion and continues to build a culture of collective responsibility for the delivery of safe and reliable care. It will move our care beyond current boundaries and aims to enhance the experience of our staff and improve quality of life for the people we serve.

3.5 Service developments

3.5.1 Opening of Community Intermediate Care Centre (CICC)

CICC is the exciting new Discharge to Assess (D2A) bed-based model and was awarded to WCHC on the 30th June 2021.

The service provides high quality, integrated care for the local adult population, supporting them with their reablement and self-care and encouraging them to reach their optimum level of independence.

A Wirral system review was undertaken that informed the D2A model including a focus on the clinical model, patient outcomes and future capacity requirements for Wirral. The service specification was co-produced by clinicians and commissioner colleagues from both the CCG and Local Authority, as well as wider provider discussions with key system stakeholders.

CICC opened on Monday 4 January 2021 consisting of Bluebell Ward, followed the following month with Iris Ward and was in response to escalating COVID-19 and winter pressures. There are now 3 open wards at the CICC with a total of 71 D2A beds

The 3 CICC wards are:

- Bluebell with 22 beds
- Iris with 23 beds
- Aster with 26 beds

Working at the centre is an integrated multi-disciplinary team (MDT) of Managers, Physiotherapists, Occupational Therapists, Social Care Workers, Nurses, Health Care Assistants and Admin / Ward Clerks who provide a 'step-down' provision for hospital discharge. We also have a variety of specialist nurses to support the ward, for example Tissue Viability Service, Infection Prevention and Control and Safeguarding Nurses.

At the core of this MDT are the following aims:

- Rehabilitation for individuals to avoid admission or following an acute admission where the individual is ready for discharge to provide the additional support needed prior to returning home or longer-term support services being identified.
- Assessment of individuals within a less clinical environment to assess the needs for long term care.
- Optimising independence and enabling a successful return home through the provision of reablement

3.5.2 Restart and Restoration

Like Phase 1 of the COVID-19 pandemic response, the NHS Level 4 escalation in December 2021 required WCHC along with other community providers in England to identify certain services that if partially stopped could then release frontline staff to support areas of system pressure, in particular supporting discharges from the hospital.

In determining services suitable to support this system pressure and with minimal patient risk, the COVID-19 Prioritisation within Community Health Services guidelines were once again utilised to support decision making on reducing various community services as well as detailed risk assessments and Quality Impact Assessment's.

As the Trust transitions out of Level 4 it once again begins the restoration and recovery of services. Understanding the unique pressure for certain services in

WCHC due to the further partial stepping down is now required and will form part of the recovery planning.

Core principles to recovery planning and restoration is the assessment of current service risk areas, of which patient waiting lists is a priority. Trust governance structures will monitor, support, and gain assurance from services that operational delivery is meeting quality, performance, and contractual standards. Supporting all of this has been the development suite of waiting list, capacity and demand dashboards within the Trust Information Gateway that enable operational leads to identify and respond to any emerging risks.

Our recovery will only be achieved through the continued and amazing commitment of all our staff. Monitoring workforce issues, sickness trends/absence rates again via our internal governance structures will enable support to be provided in timely way.

3.5.3 Performance against relevant indicators and thresholds in the Risk Assessment and Single Oversight Frameworks

In accordance with the quality report for Foundation Trusts 2017 / 2018 guidance, the following indicators appear in both the Risk Assessment Framework and the Single Oversight Framework and have been identified as being applicable to the Trust.

Maximum time of 18 weeks from point of referral to treatment (RTT) in aggregate – patients on an incomplete pathway

	21/22	20/21	19/20	18/19
Maximum time of 18 weeks from point of referral to treatment (RTT) in aggregate – patients on an incomplete pathway	81%	100%	100%	100%

A&E: maximum waiting time of four hours from arrival to admission/ transfer/ discharge:

	21/22	20/21	19/20	18/19
A&E: maximum waiting time of four hours from arrival to admission/ transfer/ discharge:	99%	99.9%	99.65%	99.77%

3.6 NHS Staff survey - Summary of performance

The NHS staff survey is conducted annually. From 2021/22 the survey questions align to the seven elements of the NHS ‘People Promise’ and retains the two previous themes of engagement and morale. These replace the ten indicator themes used in previous years. All indicators are based on a score out of 10 for specific questions with the indicator score being the average of those.

The response rate to the 2021/22 survey among trust staff was 54 % (2020/21: 52 %).

2021/22

Scores for each indicator together with that of the survey benchmarking group (NHS Community Trusts) and NHS are presented below.

Indicators People Promise’ elements and themes	2021/22		
	Trust score	Benchmarking group score	NHS
People Promise			
We are compassionate and inclusive	7.5	7.6	7.2
We are recognised	6.1	6.4	5.9
We each have a voice that counts	7.0	7.2	6.7
We are safe and healthy	6.0	6.2	6.0
We are always learning	5.5	5.8	5.3
We work flexibly	6.3	6.6	6.0
We are a team	6.9	7.0	6.6
Staff engagement	6.9	7.2	6.8
Morale	5.6	6.1	5.8

The trust scores when compared to the comparison group were just below average for all seven People Promise elements and the two themes and Staff Engagement and Morale.

Compared to the NHS our scores were just above average for most indicators, with a slightly lower score than the average for staff morale.

Improvement plans are in development with staff to ensure an inclusive response that is co-designed to maximise impact and improvement.

4 Part 4: Planning ahead for 2022 / 2023

4.1 Quality Strategy

As we come out of the pandemic and having reflected on all that we have learned throughout that period, our quality and innovation ambitions are more ambitious than ever before and are detailed in our Quality Strategy 2022 / 2027.



Quality remains at the heart of our organisation and over the next five years, we will stretch ourselves even further by not only maintaining a focus on quality and safety, but by taking a population health approach and striving every day to create more equitable outcomes for the people we serve.

We will ensure that we use our limited resources efficiently and sustainably. We will shift from a traditional approach to improving quality to one of assertive, proactive action with people and communities inspiring and leading care developments

Our Quality Strategy 2022 / 2027 is based on the following three Quality Ambitions:

Our three Quality Ambitions are:

1

Safe care and support every time - continuously nurturing a positive safety culture across the system, promoting safety, wellbeing and psychological safety.

2

People and communities leading care - ensuring we hear from all voices, involving people as active partners in their wellbeing and safety, and promoting independence and choice through collaboration and co-design.

3

Ground-breaking innovation and research - nurturing an improvement culture and achieving systemic scale and sustainability of developments and innovations.

We will ensure:

- **Safe care and support every time by:** embedding a framework for system-wide learning, using data to drive improvement and facilitate community based initiatives to promote wellbeing and independence
- **People and communities lead care development in partnership by:** embedding inequalities data collection, establishing processes for systematically hearing from people and communities and co-production of care pathways
- **Groundbreaking innovation and research by:** developing a sustainable workforce to lead innovation and research, establishing an innovation hub and building a strong innovation and research portfolio

4.2 Inclusion and Health Inequalities Strategy

Health inequalities lead to people experiencing systematic, unfair, and avoidable differences in their health, the care they receive and their opportunities to lead healthy lives. We have, therefore, developed an ambitious Inclusion and Health Inequalities Strategy 2022 / 2027 which directs our efforts to reduce inequalities that exist across our places.



A lot can and is being done by working as a health and social care system to operate at a population level and impact positively on some of these wider determinants of health. We play a significant role in the system and will continue to work with partners to maximise our impact across Cheshire and Merseyside to ensure that we are tackling these wider determinants in a joined up and coordinated way as we move into the new Integrated Care System (ICS) structures.

We will also further develop a diverse workforce who feel valued and supported, embedding our Trust values of Compassion, Open and Trust. A valued and supported workforce provides better care.

Our Five-year Inclusion and Health Inequalities Strategy is based on the following three Ambitions:

Our Inclusion and Health Inequalities Strategy takes account of the Core20 PLUS 5 model and describes how we will tackle inequalities by:

- 1** Ensuring our approach meets the needs of individuals, ensuring equitable access to care and employment for all
- 2** Ensuring that everyone's experience of the Trust and its services is positive, inclusive and reflects our values of **Compassion, Open and Trust**
- 3** Reducing inequalities in outcomes for people with protected characteristics and those who live in our most disadvantaged areas

We will:

- **Remove barriers to access by:** embedding a system for improving data collection as standard, developing the Equality, Diversity and Inclusion (EDI) skills and knowledge of our workforce and, taking positive action to drive workforce diversity
- **Focus on the experience of care by:** collaborating and co-designing services and pathways to improve inclusivity, using data to better understand inequalities and developing a culture of inclusiveness and empower positive allyship
- **Improve outcomes for everyone by:** focussing on our population health impact using Core20 PLUS 5 principles, maximising our social value through local purchasing and employment and delivering effective, intelligence-led preventive programmes focused on improving outcomes

4.3 Priorities for 2022 / 2023

Key delivery priorities for 2022 / 2023 driven by our Five-year strategies are:

Safe care and support every time	People and Communities Guiding Care	Ground-breaking Innovation and research
We understand and act on our highest areas of clinical risk and take a preventative approach to minimising harm by supporting people to keep active and independent	We will hear from all voices, involving people as active partners in their wellbeing and safety, promoting independence and choice.	We will nurture an improvement culture focused on empowering people to stop, understand, ideate, test, and transform at scale
20% of eligible staff trained in National Patient Safety curriculum per annum	20% of eligible staff trained in Inclusion and Health i Inequalities curriculum per annum	20% of eligible staff trained in Quality Improvement curriculum
100% of harm reviews will invite people, their families or carers to be involved in the review.	A minimum of 4 pathways of care will be co-designed with people and community partners	Development and establishment of Innovation Hub
We will participate in 4 system wide Schwartz rounds (or equivalent) per year.	2 sharing events will be hosted per annum to ensure community groups and WCHC services are well connected	Delivery of twice-yearly celebration and innovation events, celebrating success