

**Essex County Council  
and  
South Essex Partnership  
University NHS Foundation  
Trust**

**Annual Partnership Report**

**2010/2011**

**October 2011**

# Annual Report for Essex County Council

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## INTRODUCTION

Since the inception of the original Partnership Agreement in 2002, South Essex Partnership University NHS Foundation Trust (SEPT) and Essex County Council (ECC) has continued to deliver and develop integrated provision of mental health and drug and alcohol services to adults of working age (18-65 years).

One of the requirements of the Partnership Agreement between SEPT and ECC is for the Trust to report formally to ECC quarterly and annually on the exercise of the delegated functions. This Annual Report provides an overview of activity and performance for the period covering 1 April 2010 to 31 March 2011.

Regular meetings covering the Service and Financial Agreement are held quarterly and a separate monthly Performance Management meeting both assist with the oversight of operations covered by the partnership between SEPT and ECC.

## INTEGRATED SERVICES DELIVERED IN PARTNERSHIP

SEPT is the main provider of a wide range of specialist mental health and social care services within south Essex. In 2010 a significant landmark was reached through successful competitive process to win the rights to manage and deliver the same services in Bedford, Bedfordshire and Luton from 1 April 2010. SEPT brought together under a single Board of Directors and Board of Governors the mental health and learning disability services for the people of Bedfordshire, Essex and Luton. This means that our service users and carers continue to receive excellent services but with a reduction in management costs. Jointly we have been able to deliver care and support to people in their own homes and from a range of hospital and community based premises, including:

- Mental health services for adults and older people
- Essex wide Forensic services
- Specialist children's services
- Learning disability services
- Drug and alcohol services
- Other specialist mental health services
- Community services in south East Essex, West Essex since August 2011 and in Bedfordshire since September 2011.

As the Trust expand at a time of rapid change within the NHS, SEPT was selected as the preferred bidder for the community health services for south East Essex, NHS West Essex and NHS Bedfordshire aligning them with the mental health services the Trust already provides. This transfer formed an important part of the government's plans to deliver 'world class' services for patients, carers and the community.

## STRATEGIC PARTNERSHIPS

Working in partnership over the past 8 years has strengthened relationships with partners to further develop local services for people with mental ill health and learning disabilities. As in previous years, a number of new initiatives have been taken forward by the partnership to develop the latest range of opportunities for service users.

The Partnership Agreements that the trust has with Essex, Southend and Thurrock local authorities underpin the approach taken to developing strategic partnership. The Trust continues to actively engage in statutory partnership groups such Safeguarding Children's Boards.

SEPT is the first mental health and learning disability trust in the country to achieve University Trust status

## CORPORATE VISION AND VALUES

Our customer service initiatives continued throughout this past year. Being 'in tune' with those we serve ensures that our service users and carers receive the best of care. This would not be possible without the expertise and commitment of our staff. We would like to take this opportunity to say a special thank you to everyone working in the Trust who continues to make this vision a reality ensuring a positive experience for all who come in contact with SEPT.

### Our Vision:

***"Providing services that are in tune with you"***

### Our Values:

<i>People who use the service</i>		<i>Colleagues (including partners)</i>
<i>In tune with me</i>	VALUES	<i>In tune with me</i>
We believe you can live a fulfilling life	<b>OPTIMISTIC</b>	Everything we do - every intervention - is focused on helping you feel better
We respect you as an individual, and expect you to respect us too	<b>RESPECTFUL</b>	We value each other's contributions
We listen to your point of view, and think about things in the context of your life	<b>EMPATHISING</b>	We consider each other's perspective
We will give you choices	<b>INVOLVING</b>	We work together as teams, within our organisation and with partners
We help you to take control of your life	<b>EMPOWERING</b>	We all have permission to innovate
We'll help you to play an active part too	<b>ACCOUNTABLE</b>	We want to be judged by our results

## TRUST WIDE PERFORMANCE OVERVIEW

This year's unprecedented changes and economic expectations have challenged all NHS organisations. However, we continued to maximise our resources ensuring that we maintained our excellent reputation for providing high quality services to the people we serve in Bedfordshire, Essex and Luton.

We are so pleased to once again confirm that we have maintained our excellent operational performance in all areas – clinical, financial and management. We met our income and expenditure financial targets and our regulator, Monitor, gave us an excellent financial risk

rating of 4 and awarded us Green Ratings for Governance and Mandatory Services – these being the highest Trusts can achieve.

The one consistent factor at the core of our success is our staff. During a period of enormous change and integration of services across two counties they continued to perform above and beyond all expectations. This is reflected in SEPT's inpatient survey results which were better than most Trusts in England, our compliments that continue to increase and the feedback we receive from our Mystery Shoppers and point of use surveys which is predominately positive.

Two important achievements identify that even with an organisation in huge transformation; our staff members continue to be more than satisfied with working at SEPT. The HSJ and Nursing Times' Healthcare 100 results in 2010 placed SEPT as the Top NHS Healthcare Employer and the Best Mental Health Trust to work – these among seven overall awards. SEPT's 2011 CQC's National Staff Survey results also topped the charts in the majority of indicators evidencing immense satisfaction by our staff.

At the helm our Directors and Governors continue to work together to provide excellent leadership. Our membership has swelled to over 17,000 and our community events are attracting new members and support in our campaign to raise awareness and reduce the stigma that surrounds mental health and the people it affects.

## KEY ACHIEVEMENTS

SEPT has once again enjoyed many more successes during 2010/11. Following comprehensive and inclusive local planning, four key priorities were identified for 2010/11 in our Annual Plan. Priorities were underpinned by a wide range of objectives that, thanks to the regular monitoring put in place by the Board of Directors, have been taken forward with much success.

A summary of our achievements in line with key priorities is provided in this section.

### ***Priority 1 - Delivering High Quality and Safe Services***

This priority reflected our continued commitment to respond to the national and local focus on quality, safety and patient experience. The Trust is, therefore, delighted to report that all targets set by MONITOR, relevant to providers of mental health and learning disability services, were met as at 31 March 2011. Additionally, the Trust has remained compliant with the Care Quality Commission (CQC) registration standards.

The Trust has been able to confirm its continued compliance with all the 'Eliminating Mixed Sex Accommodation' standards as at 31 March 2011 and can report that no breaches occurred during 2010/11. CQUIN (Commissioning for Quality and Innovation) stretch targets were set with local commissioners and additional quality standards were also agreed with local stakeholders to form the Trust's Quality Account. The Associate Director of Safeguarding has been appointed and closer scrutiny of safeguarding processes has been introduced with regular file audits and performance reports directly to the Directors.

SEPT was also successful in becoming a Department of Health Demonstrator Site for 'Better NHS Support for Carers'. This project (Who Cares?) was led by one of the Consultant Social Work Practitioners who had a lead on the Carers Strategy, and during 2010/2011 this project managed to increase the number of carers identified and receiving support, created a network of Carers Champions across the NHS in south Essex, as well as develop innovative peer- led models for the delivery of carer education and self-management programmes.

In addition the Trust was also successful in a DH tender and became one of 25 providers and sole provider in south Essex of the national Caring with Confidence programme for carers.

### ***Priority 2 – Transforming Services***

This priority focused on the delivery of an ambitious programme of service transformation set out for Bedfordshire and Luton and also the development of new services in response to local needs, meeting the expectations of commissioners and service users across the Trust.

All six Local Authorities have agreed to an overall vision of transforming social care in mental health via Personalisation. A regional Personalisation network has been established, with SEPT having a lead presence. During 2010/11 the Trust has continued its programme of service transformation, including the relocation of community based teams in Bedfordshire and Luton and the establishment of an Alcohol Detoxification Service in south Essex.

Quality improvements, agreed with our commissioners have been achieved across the range of services provided. These include greater involvement and empowerment of clients in our Medium and Low Secure Services, reductions in the time waiting between referral and treatment, in line with the Department of Health's guidance and increasing the number of carers being assessed and receiving services.

### ***Priority 3 – Creating an Efficient and Effective Organisation***

With substantial efficiency and productivity savings required and the potential for additional funding impacts as a result of the economic downturn it was clear that a drive for a more efficient and effective organisation was essential. The acquisition of Bedfordshire and Luton services provided an opportunity to review management and back office functions. Therefore, during 2010/11 consultations were completed and new structures implemented throughout back office services focused on ensuring efficiency and effective use of resources. In addition, the roll out of 'WorkSmart' across the organisation has continued which provides greater flexibility for staff and utilises technology to support enhanced productivity.

### ***Priority 4 - Ensuring a sustainable future***

The Trust acknowledged that in order to be the "provider of choice of world class specialist health care service" there was a need to ensure sustainability. A sustainability strategy was agreed with a focus on growth through transactions, however, it was acknowledged that if growth was not an option, contraction, or a combination of growth and contraction, was an alternative solution. During 2010/11 the Trust pursued a number of opportunities through both competitive tendering and acquisition and was successfully identified as the preferred bidder for Community Health Services in West Essex, South East Essex and Bedfordshire. In addition, to support sustainability the Trust reviewed management structures with a new Executive Team and supporting structure implemented during 2010/11. This provides the Trust with greater accountability and ensures the organisation is fit for purpose.

Following the retirement of the previous and well-established Executive Director for Social Care and Partnerships, the Trust Board searched nationally for a high calibre replacement and appointed Amanda Reynolds in this core and essential leadership role on the Board in March 2011. Amanda is well respected and brings a wealth of experience to the role having 21 years experience across the NHS and local government management. This includes work with social services, health authorities, commissioning and provision in PCT. She has also worked nationally the Department of Health and regionally with the East of England Strategic Health Authority. Her specific expertise includes experience in developing social care, NHS community, mental health and learning disability services and secured beacon status for work in implementing the 'Valuing People' initiative.

Also contained within this priority is a focus on environmental sustainability, which was to be delivered through the on-going implementation the Trust's Carbon Reduction Strategy. The Trust has instigated several projects to manage down energy consumption and thereby reduce the carbon footprint of the organisation. Improved insulation has been installed on the Ashingdon ward and at Knightswick Clinic, which is also benefitting from a new energy-efficient boiler. Further steps to reduce consumption include a voltage optimiser at Rochford Hospital which greatly reduces the amount of electricity wasted by, and minimises the wear on, equipment on site. Improved monitoring of energy consumption has also been facilitated by the installation of smart metering at Rochford Hospital to allow real-time reporting of energy use rather than reliance on retrospective reporting.

We are pleased to present this annual report and do so with great pride. We are sure you will find it informative and interesting. Our achievements would not be possible without our directors, governors, staff, service users, carers, partners, stakeholders and members and we thank all of you. The partnership working between all of us ensures improved mental health and learning disabilities services for the people we serve.

## LOCAL PERFORMANCE FRAMEWORK

Since the formation of the first Partnership between Essex CC and SEPT in 2002, a monthly Performance Framework has continued to provide regular information to both partners enabling robust and regular monitoring of social care outcomes.

Quarterly meetings of officers from both partners also continue to consider the performance on a detailed basis. These forums identify any 'hot spots' and initiate any further investigations in order to improve understanding and aid service improvement.

**Analysis:** The performance in each quarter against key performance indicators was as follows:

<b>NI 130 Direct Payments and Personal Budgets for Clients aged 18+ during the year</b>				
	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter
Number of Direct Payments/Individual Budgets	54	54	54	84
No local target was set for Direct Payments/Personal Budgets with ECC in 2010/2011; however we continue to see a steady increase in the number of people receiving Direct Payments/Personal Budgets.				
<b>D40 Adults and older clients receiving a review as a % of those receiving a service</b>				
	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter
Percentage of clients reviewed rolling 12 month figures	38%	59%	76%	82%
The target of 78% was achieved at year end. As these figures include clients that have joined caseloads up to April 2011, this is very good performance.				



**LI C31: Mental Health Adult Clients aged 18 -64 helped to live at home**

	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter
Mental Health clients aged 18-64 receiving a community based social service	4.54%	3.97%	4.40%	4.46%

The target of 5% was just missed.

**NI 135 Carers receiving carer service or advice as % of clients receiving Community Services**

	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter
Percentage of carers receiving a service or advice	10%	19%	24%	31%

The target agreed with ECC was 30% so performance was exceeded.

**NI 132 Time between 1<sup>st</sup> contact and completion of assessment is less than or equal to four weeks – clients aged 18+.**

	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter
Percentage of assessments completed in less than or equal to 4 weeks	97%	96%	96%	96%

The target of 90% has been met with excellent performance.

**NI 133 Acceptable waiting time for care package – aged 18+**

	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter
Percentage new clients receiving all services in Care Package in less than or equal to 4 weeks assessment	90%	90%	91%	92%

The target of 93% was just missed with 1%

<b>LAA LI3.1 clients helped into employment, volunteering education or training</b>				
	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter
Number of people helped into employment volunteering or education	29	49	73	88
The target for 2010/2011 was 106 so the target was not achieved.				

## REGISTRATION WITH CARE QUALITY COMMISSION

The Trust successfully registered all NHS services with the Care Quality Commission in April 2010 with no compliance conditions. This registration was extended to include social services in October 2010. A key part of this registration was ensuring that the CQC Essential Standards of Quality and Safety were fully embedded within all services.

The Trust has developed robust processes to ensure ongoing compliance with the CQC Essential Standards of Quality and Safety. All wards and teams have their own local portfolio containing the standards relevant to them and their own self assessment of compliance. This promotes strong understanding at front line services of the standards they are required to meet. Wards and Teams are regularly audited by the Trust Compliance Team as well as Trust Directors, Trust Governors and members of the local LINKs to ensure compliance.

In addition the Trust has a comprehensive analysis system in place that gathers all information about Trust services into one place and maps this against the Essential Standards, this includes clinical audit results, Internal audit results, national staff survey results, national patient survey results, MHA visits etc.

## ASSESSING CARER'S NEEDS

2010/2011 has seen more carers receiving assessment and services. A number of innovative projects have contributed to a cultural change and improvement in performance on carers' assessments and support.

This includes:

### ***Who Cares? Project***

The 18 month Department of Health (DH) 'Who Cares?' Demonstrator site project was concluded on 31<sup>st</sup> March 2011. The project achieved its aim and objectives, and fully met or exceeded on all targets agreed with the Department of Health. The project lead was a Consultant Social Work Practitioner, who established a project team to work in partnership NHS South West Essex, ECC, Thurrock and Southend Councils, as well as voluntary sector to promote early identification and support for carers in the NHS services in south west Essex.

The project developed a Carers Pathways across primary, acute and secondary care to enable early identification and support for carers of people with mental health problems, dementia or learning disabilities.

## Key Achievements

- 4 carers pathways developed and piloted in SEPT, BTUH, GP surgeries, and pharmacies
- 405 new carers identified (& 403 referred to services)
- 147 drop-in advice and information clinics held
- 177 Carer Champions recruited, trained and supported with range of resources
- 969 staff have received face to face Carers Awareness training
- An e-learning Carers Awareness training package
- Carer awareness achieved via road shows and Life Channel adverts and promotional / educational material in GP practices and schools..
- A Carers Champions Resource Pack developed and distributed
- A Directory of Carers Services in SW Essex published
- Credit Card Style Carers Card distributed via pharmacies, carers champions, etc.
- The “Who Cares?” website at [www.southwestessexcarers.co.uk](http://www.southwestessexcarers.co.uk)
- The Who Cares project, along with colleagues at ECC devised a ‘carers discount card’. This initiative with local businesses allows carers to receive discounts on a range of goods and services. This ranges from gym membership, MOTs, and entry to Southend United Football Club.
- Distribution of carers self identification forms to every SEPT team, and a wide range of voluntary and statutory agencies (Do You Care? Form)

### ***Carer Link Workers (ECC funded)***

Two ECC funded Carers Link Workers are now integrated into CMHTs covering Brentwood/Basildon and Rochford/ Castlepoint localities. They assist with carers’ self-assessments, provide information, advice and brief interventions, refer carers to local services and apply for direct payments for carers.

Carer Link Workers have contributed to a significant increase in Carer Direct Payments. This figure is increasing as the workers have developed a wide understanding of the types of services available to carers and the process to enable payments to be made. In their first year of employment the two Carer Link Workers successfully supported 15 applications for carer direct payments

### ***Caring with Confidence (CwC)***

This national programme for carers ran between September 2009 – September 2010 and during this period the Trust delivered 1,264 training places to **340** carers, with project lead being an ECC Consultant Social Work Practitioner.

When the national programme came to an end NHS East of England agreed to fund four providers to the end of the financial year, which enabled SEPT to deliver a further 546 training places to **113** carers November 2010 – mid February 2011.

The Trust also facilitated access to *Carers Health Checks* by working in partnership with Vitality (commissioned via NHS south west Essex) – providing it to all carers attending any of the educational/ self-management courses.

Feedback from the carers attending was extremely positive and many stated that it has provided them with a greater understanding of their role as carers but significantly the importance of maintaining their own identity, interests and wellbeing.

National evaluation of carers’ experience of CwC included:

97% of carers who have attended Caring with Confidence stated that they will recommend this programme to another carer.

96% of carers rate Caring with Confidence as either excellent or good.

95% of carers rated the information they learnt in the sessions as either excellent or good.

### ***Looking After Me***

This is a carer well-being and self-management course. This programme has been developed following a successful bid led by an ECC Consultant Social Work Practitioner to the NHS East of England. During 2010/2011 SEPT worked in partnership with the Expert Patient Programme Community Interest Company (EPP CIC) to develop the infrastructure for a Carers Self-management programme in South Essex. The development work has enabled a sustainable carer peer-led model through volunteer carers.

During 2010/2011:

- 8 Carers completed accredited EPP training and delivering courses as volunteers
- Volunteer Carer Tutors delivered 12 courses to 159 carers.  
191 carers accessing half-day workshops facilitated by SEPT clinicians it also acts as CPD opportunities for SEPT as well as voluntary sector staff who have also attended these sessions

## **PERSONALISATION**

Personalisation of services is the key priority for social care delivery in the Trust. 2010/2011 has seen further progress in rolling out self directed support, including the introduction of 'Recovery Budgets'.

Since January 2011 no social care domiciliary package has been agreed that is not through Self Directed Support or the Recovery Budget process. This has enabled service users to design increasingly creative, personalised and innovative care plans which can effectively address their needs and outcomes without restriction of a traditional 'one size' fits all model of service.

For 2010/2011 84 people received their social care support via a Direct Payment/ Personal Budget, and at the time compiling this report 126 service users are in receipt of a cash payment. We will be reviewing all direct payments to service users within the next year to offer a personal budget (SDS Package). This will have the consequence of offering greater choice and control to service users.

The majority of traditional Direct Payments are for Personal Assistants; however we are now observing increasing creativity of SDS packages to include leisure pursuits, horticultural, theatre, photographic and art materials, gym membership, adult education courses, choir and music lessons, swimming, utilisation of a computer rather than PA for shopping, cycles and self identified day care. All the outcomes addressed, fall within the critical and substantial bands of the FACs criteria.

Carers direct payments are strongly advocated by the carer link workers and the carers in receipt report a positive impact upon their ability to continue caring.

In January 2011, the Recovery Budgets Pilot was launched initially with Castlepoint CMHT and progressing to Coombewood and finally to Basildon CMHT. The Recovery Budgets are a one off payment of £500 to service users and £300 for carers. We have achieved significant success in addressing the outcomes identified by individuals providing greater independence and social inclusion and helping to prevent greater reliance on services. The pilot will be

evaluated by ARU during 2011/2012, in conjunction with clients and carers in receipt of a Recovery Budget.

Furthermore, the Trust has promoted the 'Right to Control' initiative across the Community Mental Health Teams in South Essex and Work Choice in particular is now being utilised as an alternate funding stream for clients with mental health difficulties wishing to seek employment in the near future.

To add strategic direction and momentum to the Personalisation agenda SEPT has established a Mental Health and Personalisation Delivery Board, chaired by the newly appointed Executive Director for Social Care and Partnerships. This Board meets quarterly and incorporates attendance from all six local authorities within SEPT geographical service boundaries. Arising from this board we have established a local ECC/SEPT Steering Group and agreed a local Action Plan. Champions for Personalisation have also been identified across the community teams.

All staff in the Essex teams have been trained in the basic principles of Personalisation and processes. Further plans are in place to formalise a Trust wide training programme led by a ECC Consultant Social Work Practitioner and will include:

- Tier 1: E Learning Package for all health and social care staff on the overview of Personalisation and the associated processes.
- Tier 2: Outcome Focused Support Planning
- Tier 3: Personalisation and Safeguarding, Personalisation and Mental Capacity

## **MOVING INTO EMPLOYMENT**

From October 2010 SEPT has been delivering a new contract for NHS South West Essex and the Employment Specialists for Basildon, Brentwood and EIP (West side) have been TUPE'd (from Rethink) into SEPT.

Employment Specialists have successfully integrated into the CMHTs, holding caseloads of about 20 people at any one time. Support into employment is facilitated using the Individual Placement and Support model, which is advocated by the Centre for Mental Health, and supported by both the previous and current Government administrations in their Welfare to Work strategies for people with mental health problems.

Within SEPT Secure Services the Employment Specialist has been facilitating access to accredited trade skills training courses run in plastering, tiling and woodwork.

The Contract for the provision of Supported employment for people with mental health problems in Mid and North East Essex between South Essex Partnership University NHS Foundation Trust (the provider) and NHS Mid Essex and Essex County Council (Commissioners) ended 31<sup>st</sup> July 2011. At the time of writing this report, it is known that SEPT was not awarded the new contract.

## **APPROVED MENTAL HEALTH PROFESSIONALS**

Ensuring that there are sufficient AMHPs to deliver the service in the future is being addressed through active recruitment for the next AMHP training, as well as working with operational managers.

SEPT has a history of working in partnership with North Essex Partnership Foundation Trust on AMHP recruitment and training strategies, including joint delivery of the AMHP CPD Programme as well as AMHP initial training.

The AMHP service in south Essex serves a population of approximately 360,881, and on average this equates to *1 AMHP per 13, 880* of the population.

National guidance provided through the Social Services Inspectorate on the ASW service in 2001 recommended a ratio of *1: 11,800*. This recommendation is pre the amended Act, and therefore should be considered as a conservative estimate. Ongoing recruitment of AMHPs therefore remains a key priority for the Trust.

The AMHP service for south Essex consists of 26 social workers and 1 nurse approved by Essex County Council. The majority of AMHPs (20) are integrated within the mental health teams, with a smaller number located in Older People and (2), the Social Care Leadership team (3), and one based in the Improving Psychological Therapies for You team (IAPT) and one in the training department.

The service provides an AMHP response for Basildon and Brentwood (15) and Rayleigh, Rochford and Castle Point (12) localities.

Over the past year three social workers have completed AMHP training and joined the rotas.

For 2010/2011 the two AMHP rotas in south Essex have received over 334 requests for MHA assessments (Basildon/Brentwood received 215 requests and the Castlepoint, Rayleigh and Rochford rota received 119 requests).

In addition AMHP involvement is also required outside the daily rotas for more complex and planned assessments such as the agreeing, renewal and revoking of Community Treatment Orders (CTO's) and applications for Guardianship Orders. As the majority of AMHPs are at a senior practitioner level, they can co-ordinate the most complex and challenging cases, including those who are on a CTO or S31/41 cases.

They bring expertise to mental health services in relation to safeguarding, risk assessment and management, alternatives to detention, as well as knowledge on other relevant legislation such as the Human Rights Act, Mental Capacity Act, etc. AMHPs provide an important role in developing the relationship with partner agencies such as the ambulance services, police service, GPs, housing, advocacy, CRHTT and other specialist services.

AMHPs are also often the leads in their teams for a range of Social Care agendas, including Direct Payments, Self Directed Support, Safeguarding, Carers, and other senior responsibilities. They also continue to provide input on the mental health duty provision, and Clinical Assessment Services.

## HOUSING STRATEGY

The overall arching vision of both SEPT and Essex County Council's accommodation strategies are to enable people with mental health needs to be in settled accommodation which enhances mental well being and reduces discrimination and social exclusion.

During 2010/2011 Locality Housing Forums has been (re) –established under the leadership of the Trust's Associate Director for Social Care and Consultant Social Work Practitioner. Each locality housing forum has developed their own bespoke action plans, but with the overall aim of bringing together Partner agencies, housing providers and SEPT staff to; map

resources, share priorities, improve co-ordination, explore and agree care pathway options and bring together local housing interests. They also provide the opportunity for SEPT staff to present complex client cases to seek advice, guidance and identification of appropriate resources and enable providers to discuss emerging themes. The forums are exploring shared referral paperwork to enable practitioners to refer directly to all social housing providers within each locality as well as the establishment of a database/SEPT internet page listing housing providers, their criteria and contact details. A practitioner in each of the CMHTs has now been identified to act as a Housing Champion.

A key priority for SEPT and ECC going into 2011/2012 is the review all residential packages and other high-cost care packages to ascertain if individual recovery needs are still being met appropriately, and to facilitate efficiency savings.

## OPEN ARTS ACHIEVEMENTS

2010/2011 was another significant year for Open Arts. Funding was received from East of England Development Agency through Southend Borough Council to run Open Arts in Southend. Further courses were run in Basildon and Thurrock through partnership working. A successful funding application of £1000 to Anglia Ruskin University for a student wellbeing course to take place 2011-12, and a grant of £1000 received from Essex County Council to pilot a Carers course.

2 Arts Project Co-ordinators were recruited as a job share, and their hours increased to cover maternity leave for the Arts Project Manager. A new Administration Officer was recruited to support the project.

12 Open Arts courses were run including fine art, film, photography, drama, glass-making, a course specifically for Carers and open studios for follow up provision.

Out of a total of 207 referrals, 131 participants completed their course, 80% reported having moved on to further learning, community involvement or employment

Course Number	Course Name	Number of Referrals	Number completed	Number of OCN	Volunteer Opportunities
1	Grays 5 Learning Shop	11	5*	4	1
2	Grays 6 Open Door	14	11	9	1
3	Basildon 5 TSX	14	11	8	2
4	Southend Glass	15	8	3	2
5	Southend Film	13	9	N/A	2
6	Carers	12	11	N/A	2
7	Southend Drama	12	6	N/A	2
8	Southend Art 8	16	15	10	2
9	Southend Photo	11	6	N/A	2
10	Southend Art 6	16	13	9	2
11	Open Studio 1	27	19	N/A	1



12	Open Studio 2	46	17	N/A	1
TOTALS					
		207	131	43	20

43 achieved accreditation awarded by the Open College Network

Open Arts have also expanded its volunteer network, with 20 volunteers working with the project throughout the year. In addition a new role of 'Support Artist' was created to further develop volunteers. Two networking events were held with volunteers to explore aims and aspirations of volunteers and how Open Arts can develop volunteer input.

During 2010/2011 Open Arts also contributed to two exhibitions i.e. - Rochford Art Trail and Shenfield Library

Open Arts is also represented as Board member of the National Alliance for Arts, Health and Wellbeing. Internationally Open Arts have also become known through Dr Jenny Secker's presentation at the Society for Arts in Healthcare conference, in Minneapolis, with reference in six international publications to date.

Service users' experience of Open Arts are summarised in the two quotes below:

*'My confidence as a person has increased over the last few weeks; to be in a group seems like belonging again and not feeling so alone as before. I enjoy people's company more now than I did in the beginning'.*

*'Coming to the Open Arts course has benefitted me more than any other type of therapy I ever had as it is a way of venting and expressing in a productive manner, a positive channel for otherwise negative feelings. Thank you.'*




























## SERVICE USER SURVEY AND EXPERIENCE

The national community mental health service user survey was carried out in the spring of 2011 and the Care Quality Commission (CQC) subsequently released the final and full results for the Trust and these were published on the CQC website on 9<sup>th</sup> August 2011. The survey was conducted on service users who were seen by the Trust between 1<sup>st</sup> July 2010 and 30 September 2010. 850 surveys were sent out and 263 were returned, producing a response rate of 32% compared to 33% nationally.

The subsequent full report (a copy is available from the CQC website [www.cqc.org.uk/publications](http://www.cqc.org.uk/publications)) and publication by the CQC compares the Trust results with that of Trusts across the whole country, totalling 17441 responses. This survey was the first to be carried out since the acquisition of BLPT by SEPT and therefore the first to incorporate the views of service users utilising services in both South Essex and Bedfordshire & Luton. This means that whilst 2010 results are available for South Essex Partnership University NHS Foundation Trust a direct comparison between these and the 2011 cannot be made.

The CQC aggregated the Trust's scores across the domains of the survey and employed confidence intervals to deduce comparative performance, which has been published on their website and is shown below:



Based on service users' responses to the survey, this trust scored:	How this score compares with other trusts
<b>8.2/10</b> For questions about → <b>Health and social care workers</b>	  
<b>6.6/10</b> For questions about → <b>Medications</b>	  
<b>6.8/10</b> For questions about → <b>Talking Therapies</b>	  
<b>8.3/10</b> For questions about → <b>Care Coordinator</b>	  
<b>6.7/10</b> For questions about → <b>Care Plan</b>	  
<b>7.1/10</b> For questions about → <b>Care review</b>	  
<b>6.1/10</b> For questions about → <b>Crisis Care</b>	  
<b>5.6/10</b> For questions about → <b>Day to Day Living</b>	  
<b>6.3/10</b> For questions about → <b>Overall</b>	  

Overall the results have been described by the CQC as “about the same” (using the CQC’s published definition) as other mental health providers.

The national survey programme occurs on an annual basis and has a relatively low level of responses and when published relates to an experience of some 6 months previously (in 2011 there were only 263 responses across the whole of SEPT). Therefore SEPT has introduced a local “point of use” survey programme which gauges the patients experience at the time of the service when the experience is “fresh in the mind”. This survey asks patients about their experience in key areas where service gaps were previously identified in the national survey. Results for last year are provided below and as can be seen are based on greater numbers than the national survey and therefore could be considered to provide a more accurate reflection of experience:

National Survey Question	Response	Benchmark 2011 National Average	South Essex		
			2010/11		
			Q2	Q3	Q4
Number of Responses			136	144	140
6. Did you have trust and Confidence in the person you saw?	Yes	71%	80%	89%	76%
10. Did you have a say in the decision about your medication?	Yes	56%	72%	80%	79%
13. Did staff explain the possible side effects of the medication?	Yes	43%	65%	67%	61%
23. Do you have a Care Plan?	Yes	42%	46%	45%	46%
43. Do you have the number of someone from your local NHS that you can phone OOH?	Yes	51%	50%	50%	55%

A Patient Experience Group oversees all aspects of experience, engagement and involvement and regularly reports to the Trust Board. An Action Plan has been developed by the group and is attached as Appendix 1, progress against which is also monitored by the Board. As always SEPT values the views and engagement of its service users and carers in improving services therefore a focus group was asked to review and contribute to the action plan. The group met in September 2011 and was facilitated by SEPTs Patient and Public Involvement Team. The group was attended by a range of service users and carers and the resulting feedback from this group has been shared with the Patient Experience Group for incorporation within the action plan.

There are a number of other initiatives aimed at gathering feedback and improving the quality of service. One example is the mystery shopper initiative where patients feedback anonymously on their experience of the service they have received. This in turn is fed back directly to the member of staff (without naming the patient) so any positives can be reinforced and any areas for improvement reflected upon.

## **SAFEGUARDING**

The Trust continues to prioritise and develop safeguarding adults within strategic plans, clinical practice and service user forums and is represented on ESAB and five sub groups.

A comprehensive audit on the Trust Safeguarding arrangements was completed in 2010 and presented to ESAB. The outcomes provided substantial assurance that the Trust have effective Safeguarding arrangements in place.

A number of initiatives have been developed in the past year to increase the quality of safeguarding further, these include

- Safeguarding Policy and procedures have been updated
- A Strategic Framework for Safeguarding 2010-2013 includes 6 domains of Safeguarding which are routinely reviewed at the Trusts monthly Safeguarding meeting
- Revised processes are in place to ensure staff respond appropriately, timely and effectively to Safeguarding concerns.
- Safeguarding cases are audited for quality and lessons learnt identified

Key performance measures have been formulated and reported monthly to the Trust Executive Team to ensure standards are maintained and improvements continue. Safeguarding Adult Training compliance has remained above 90% for 2010-2011.

An audit of the Safeguarding Adult service user questionnaire demonstrates that clients feel protected treated with respect and included in the process.

Two groups developed this year include a Lessons Learnt Group, established to explore the learning and emerging trends from Serious Incidents, Safeguarding Complaints etc.

A Safeguarding and Personalisation group has been developed to ensure effective links and services for clients within the personalisation agenda.

## SOCIAL CARE WORKFORCE

It is recognised that successful delivery of the Partnership is not possible without a committed workforce with the appropriate knowledge, skills and support that is needed to deliver the key objectives, priorities and outcomes.

SEPT values the staff seconded from ECC under Section 75 agreements and works with ECC to ensure that leadership and governance structures are in place to manage this resource effectively.

Executive leadership is provided through the Executive Director for Social Care and Partnerships, with local support and leadership provided by an Associate Director for Social Care and Partnerships. Three Consultant Social Work Practitioners provide further social care professional and practice leadership and support key social care policy developments within the Partnership.

SEPT has an established Trust Advisory Social Care Group (**TASCG**) in south Essex that meets on a monthly basis. This group forms part of governance arrangements and is chaired by the Associate Director of Social Care and Partnerships. Membership includes Consultant Social Workers, Senior Social Worker Practitioners and social care leads who meet to ensure that all social care issues are considered, relevant policies and procedures within the Trust are reviewed, disseminated and implemented, and to engage in the transformation of Social Care in the Trust to full implementation of Personalisation, Recovery and Social Inclusion.

Professional supervision of social work staff has been identified as a key development area for social work practice. In 2009-10 SEPT undertook a revision of social care arrangements for ECC seconded staff. This review and subsequent report considered two main areas. The first was the quality and frequency of social care supervision provided to seconded ECC staff. The second considered the wider political and social developments within the practice of social care delivery. The SEPT report identified that whilst many social workers experienced regular managerial supervision (mostly by nurses) the professional supervision arrangements were less robust.

A report on the findings and recommendations were completed in May 2010 and used the Social Work Taskforce recommendations (Building a Safe, Confident Future Final Report, November 2009) as a benchmark.

Milestones:

- April 2011 the findings of the SEPT report together with findings from the Social Work Taskforce (including the government response to implement 15 changes) presented to Social Work Development Forum by the author of the audit and report.
- The Trust's supervision database which includes arrangements for supervision of all seconded ECC staff was updated, by ensuring and validating that all social care staff were in receipt of appropriate supervision.
- Procedural Guidelines for the Supervision of Social Care Staff (CPG26(G) reviewed by SEPT.
- Awareness of supervision in Trust media (i.e. daily newsletter on intranet)
- All Managers and social care staff reminded that professional supervision should be take place every 4 weeks. No worker to go six weeks without professional supervision.

- This new reviewed policy has been presented to social care forums via TASCG.
- A Consultant Social Work Practitioner was appointed in March 2011 who lead in ensuring the effective delivery of social work supervision
- Update of the Supervision Action plan to include full recommendations of the Social Work Reform Board, 'One Year On' Report

## FINANCE BUDGETS

The Trusts accounts show expenditure for the period of £2,322k against income in respect of these commissioned services of £2,574k an under spend of £252k.

The overall financial position as at 31 March 2011 was as follows:

<b>Adult Mental Health Services</b>	<b>Budget</b>	<b>Expenditure</b>	<b>Variance</b>
Management Budget	<b>255</b>	<b>251</b>	<b>4</b>
Assertive Outreach	<b>120</b>	<b>204</b>	<b>(84)</b>
CMHT's	<b>1,296</b>	<b>1,165</b>	<b>131</b>
Coombewood	<b>64</b>	<b>62</b>	<b>2</b>
Criminal Justice	<b>117</b>	<b>121</b>	<b>(4)</b>
Drug & Alcohol	<b>206</b>	<b>113</b>	<b>93</b>
Forensics	<b>172</b>	<b>199</b>	<b>(27)</b>
Support Workers	<b>303</b>	<b>177</b>	<b>126</b>
Training	<b>40</b>	<b>29</b>	<b>11</b>
<b>Total Essex Social Services</b>	<b>2,574</b>	<b>2,322</b>	<b>252</b>

## CONCLUSION

The partnership has required a huge commitment from both SEPT and Essex County Council. 2010/11 has been another very successful year and the links between health and social care have strengthened and continue to improve.

Partnership working will become even more pertinent over the next years as SEPT's strategic commitment is "to become an integrated care organisation, providing a range of care services, not just mental health or traditional community health services". This direction of travel is driven by the Trust's commitment to deliver the best and highest quality services to those who use our services, their families and carers, and this requires strong and healthy partnership working.

The National Voices response to Future Forum (May 2011) supports this direction, as highlighted in the quotes below:

“Patients and service users want services that are organised around, and responsive to, our human needs. We are sick of falling through gaps. We are tired of organisational barriers and boundaries that delay or prevent our access to care. We do not accept being discharged from a service into a void. “

“We want services to be seamless and care to be continuous.”

“That means primary and community health services, social care services, and services from voluntary organisations should all mesh together to help us succeed in managing our lives and conditions.”

“We do not want to have to chase information about services – it should come to us. And we do not want to have to explain ourselves, and our choices and preferences, every time we use a new service or meet a new professional – information about us should follow us.”

“We know that getting services to work together for better outcomes is the biggest priority if we are to achieve better quality, better value and better experience in response to the ‘Nicholson challenge’.”

The Trust is confident that the partnership arrangements will continue to be successful in forthcoming years; building on the firm foundations that have been established in previous years, which will ensure even closer working with the local authority in delivering this better quality care for service users, their families and carers.

**Dr. Patrick Geoghegan, OBE**  
**Chief Executive**

## **APPENDIX 1**

### **Summary SEPT Annual Plan**