

Virgin Care

Essex Child and Family Wellbeing Service Quality Account

Services delivered in Essex by Virgin Care Services Limited

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Part one

Important note about this document

Within this document we proudly present our inaugural Quality Account relating to the services we deliver as part of the Essex Child and Family Wellbeing Service (Essex C&FWS). Virgin Care Services Limited (Virgin Care) commenced delivery of this service in April 2017 and is the prime provider meaning we provide some services but also sub-contract with other organisations to provide specific services or roles, mainly with Barnardo's, the provider arm of the children's charity.

It is important to note when reading this document that we would not have been able to deliver many of the services changes and improvements without the support of our commissioners, the hard work and dedication of our staff and the commitment to partnership working by our sub-contractors and other providers in our community.

This Quality Account is published by and is the responsibility of Virgin Care. Throughout this document however, services to which it applies may be referred to as the **Essex Child and Family Wellbeing Service (Essex C&FWS)**, which includes integrated activities carried out by Virgin Care and Barnardo's colleagues as well as the children's community health services delivered only by Virgin Care and only in West Essex.

Barnardo's is not an independently registered NHS healthcare provider and is therefore not required to provide a Quality Account.

Executive Summary

A Quality Account is an annual report which providers of NHS healthcare services must publish about the quality of services they provide. This Quality Account covers the services provided by Virgin Care.

Virgin Care delivers services on behalf of our Commissioners Essex County Council and West Essex CCG in Essex - and is one of a number of providers of health and care services locally. This document is a demonstration of Virgin Care's commitment to providing the best quality community healthcare services to children, young people and families in Essex. Quality Accounts are an opportunity for the organisation to reflect and take stock of what has been achieved and to plan for the coming year. It also provides the opportunity to recognise and appreciate the achievements from our dedicated and hard-working colleagues who deliver services every day, in continuing to improve services.

This document contains a great deal of information on the quality of Virgin Care services, and the information has been arranged into the three specific areas as defined by the Department of Health and Social Care: safety, clinical effectiveness and patient experience. Virgin Care has used information gathered for this report to examine its performance and to set priorities for the coming year and in doing so, making sure our priorities reflect the needs of the children and families of Essex who use and need our services. Virgin Care has involved different groups to help compile this report, including people who use services and community representatives, commissioners, partners and frontline colleagues.

If you would like:

- A hard copy of this quality account, or a copy in another language please contact our Customer Experience Team on **0300 303 9509*** or email **customerservices@virgincare.co.uk**
- To talk to someone about your experience of our services or would like to know how to find one of our services, our 'Here to help' team will speak with you in confidence on **0300 303 9509*** or by email: **customerservices@virgincare.co.uk**
- To give us feedback on any aspect of this document – please email **communications@virgincare.co.uk**, or speak to our Customer Experience Team on **0300 303 9509***

*030 numbers are charged at the same rate as 01 and 02 numbers and are usually included in free minutes bundles. If you would prefer, please send us an email or a text and we will call you back.

Review of the services provided

The services provided within the Essex C&FWS include:

Essex County Council (ECC) commissioned services

ECC commission the delivery of pre-birth to 19 years integrated child and family services which are made up of services previously known as: 0-5 Healthy Child Programme; Healthy Schools Programme; 5-19 Healthy Child Programme and management of Children's Centres (now known as district Family Hubs and satellite Healthy Family Delivery Sites).

All of these activities are now collectively known as the Essex Child & Family Wellbeing service and are delivered across the whole of Essex (with the exception of unitary authority areas such as Southend-on-Sea and Thurrock).

Services are delivered and managed within four Essex quadrants:

- Mid (Braintree, Chelmsford, Maldon)
- North East (Colchester, Tendring)
- South (Basildon, Brentwood, Rochford, Castle Point)
- West (Harlow, Epping Forest, Uttlesford)

Children and young people can access the services up to the age of 19 years or up to the age of 25 years if they have Special Educational Needs and Disabilities (SEND).

All services are provided by integrated, geographically based Healthy Family Teams which include colleagues from both Virgin Care and Barnardo's.

Services delivered in the ECC commissioned PB-19 service include:

Health Visiting

- Largely home or Family Hubs and satellite Healthy Family Delivery Sites based mandated checks e.g. ante-natal contact, new birth and six to eight week assessment, one and two and a half year checks
- Health Visitors work with children and families from notification of antenatal at 28 weeks (or earlier if vulnerable).
- Additional care may include support around, for example, Sudden Infant Death Syndrome, or maternal mental mood assessment
- Ante-natal to 8 years support, advice, and signposting, including around safeguarding issues

School Nursing

- Largely school-based support, advice and signposting for children and young people aged 8-19 years, including around Safeguarding issues, mental health and PSHE (personal, social and health education).
- Continued support to young people up to 25 years who have Special Educational Needs and Disabilities (SEND), ensuring a smooth transition to adult services

Family support interventions

- Delivered from district-based Family Hubs and satellite Healthy Family Delivery Sites as well as in families' homes.
- Available to all families but with a particular focus on vulnerable children and families (priority groups), including those under 5 years who need early support and help to be 'school ready'.
- Largely delivered by Healthy Family Support Workers and colleagues from partner agencies who are hosted to deliver services from Family Hubs and Healthy Family Delivery Sites.
- Includes a range of activities including one-to-one and child and/or parent-centred groups.

Safeguarding Children Team

- Work within a standalone team that is embedded in each of the four quadrants, providing specialist support, advice, training and supervision to colleagues in Essex C&FWS in relation to Safeguarding and child and family protection.
- Oversee the attainment and maintaining of improved quality in service provision in relation to Safeguarding from assessment of findings in serious case reviews and local investigations.

Looked After Children Team

- Work within a standalone team that is embedded in each of the four quadrants and provide pathways of care for Looked-after Children and Young People and Care Leavers up to 19 years of age, including Looked After Children Initial Health Assessment (IHA).

Healthy Family Team Colleagues

Any or all of the above colleagues may offer support to families, including working with them on, for example:

- Parenting Support: e.g. breastfeeding support, school entry review, childcare confidence support, support for expectant mother and father
- Family Health: e.g. substance misuse (parents), contraception advice, nutrition support, mental health (maternal & infant), smoking cessation
- Resilience and Development: School readiness and preparing children for learning (including support for FEEE2 children), Domestic Abuse support, returning to work, accessing Education, Training and Employment (ETE), Safeguarding.

West Essex CCG commissioned services

In addition to the ECC commissioned services as listed above, West Essex CCG commissions the following services which are delivered within the West Essex (WE) Quadrant only, these services are also offered to young people up to 25 years who have Special Educational Needs and Disabilities (SEND), ensuring a smooth transition to adult services :

Community Paediatrics	<ul style="list-style-type: none">• Community developmental medical advice delivered by Consultant Paediatricians, Specialty Doctors and a Clinical Psychologist• Primary focus on developmental diagnostics, advice and treatment, including those related to Autistic Spectrum Disorders (ASD) and Attention Deficit Hyperactivity Disorder (ADHD).• SEND Designated Medical Officer• Named Doctor for Safeguarding
Children's Community Speech and Language Therapy and Dysphagia Service	The Paediatric Speech and Language Therapy service provides assessment, diagnosis, treatment, support and advice for children and young people with speech, language, communication and swallowing difficulties
Community Paediatric Physiotherapy and Occupational Therapy	The Community Paediatric Physiotherapy and Occupational Therapy services provide assessment, diagnosis, treatment, support and advice for children and young people with physical, neurological, perceptual or sensory difficulties
Children's Community Nursing Service	<p>The Children's Community Nursing service provides community paediatric nursing support to children, young people and their families who have a range of health and medical needs, including providing:</p> <ul style="list-style-type: none">• Domiciliary nursing procedures to children with acute or long-term health conditions or end of life care being managed at home
Specialist Paediatric A& E Liaison Service	Specialist Paediatric A&E Liaison nurse collects information regarding children, young people and their families who have had an attendance at A&E for a medical health need. This information is shared with the relevant health professionals in EC&FWS to offer additional support and care.
Specialist School Nursing Service	Specialist school nursing delivered to children with health or medical needs attending the three special schools in West Essex.
Children's Community Continence Service	The Paediatric Continence Advisory Service provides assessment, support and advice for children and young people with health related continence issues.
Children's Community Dietetics	The Paediatric Dietetics Service provides assessment, treatment, support and advice for children and young people with a range of eating, drinking, nutrition and dietary related health needs.
Children's Community Allergy Clinic	The Paediatric Allergy Advice Clinic is a newly commissioned service which provides assessment, treatment, support and advice for children and young people with a range of needs relating to allergy.

Essex Healthy Family Team Service Delivery Model



Managing Director's Introduction

We began providing children's services across Essex in April 2017 and we have worked incredibly hard since then to lay the foundations and put in place the infrastructure required to deliver our integrated operating structure for our Essex Child and Family Wellbeing Service model, which launched on 01 October 2017.

We have already achieved much in the short time we've been providing these services and in this document we will present projects we've worked on so far and outline what we'll be working on in the year to come.

Over the past year I am particularly proud of the achievements we've made across our Essex Child and Family Wellbeing Service.

Over the next 12 months we move to a period of consolidation with our operational teams to focus on driving up quality and achieving the contracted outcomes for our families. We will continue to commit to ongoing service development in such programmes as the Autism assessment pathway in West Essex, CHAT Health school nursing texting advice line, community development plans particularly focussing on the needs of priority groups and in supporting eligible families take up free early education funding for 2-year olds, amongst others.

I would like to thank our colleagues who have demonstrated in this document the work we've done and for the work they will do over the coming year.

In putting together this publication we have sought feedback from staff and people who use services and I would like to take this opportunity to thank them for their input into the process.

I can confirm that, to the best of my knowledge, the data and information in Parts Two and Three of this report reflect both success and the areas that we have identified for improvement over the next 12 months.

Richard Comerford

Managing Director – Essex C&FWS
Virgin Care Services Limited

Director of Children's Services Introduction

I want to take this opportunity to thank and congratulate all staff and volunteers across this Essex partnership, who have contributed to the successes that have been achieved to date. The scale of change and innovation which has been brought about through this contract and the partnership between Virgin Care and Barnardo's is impressive.

I am delighted that this report represents and reflects the hard work that has taken place and demonstrates the positive impact of these changes. We are still in the early days of this contract and we know that there are further changes, tweaks and adjustments that will be made in the coming months and years. As we continue to evolve, we seek at all times to remain child centred in our approach, ensuring that all our activity is with the sole purpose of providing better outcomes for more children.

We look forward to the challenges ahead, fully aware that many authorities around the country are carefully watching our progress and holding us as a standard by which they themselves will be measured and compared.

Jonathan Whalley

Director of Children's Services
Barnardo's

Clinical Director's introduction

As Clinical Director for Virgin Care I am responsible for ensuring that the care we provide is safe, high quality and continuously improving and over the last year I am pleased that we have continued to make such a wide range of improvements for our patients, not just in their experience but also in continuing to improve the safety and quality of our services.

We achieve continuous improvement by having a well-defined and working clinical governance system in place. This means that we have strong clinical leaders working in partnership with managers and holding clear responsibilities, processes and systems to ensure we operate safely and that we monitor the quality of care delivered to our patients.

I would like to thank members of my Clinical Directorate, the local Clinical and Quality Leads and the Heads of Services for their involvement in providing the information which makes up this report. It contains many examples which show how we place an emphasis on quality and safe care, and react to patient and customer feedback.

We continue to work closely with our partners, the Care Quality Commission and other health organisations including the voluntary and faith sectors to demonstrate high standards.

We have further improvements planned for the next year, and I trust you will both enjoy reading this publication and provide us with your feedback on the changes we have planned.

Peter Taylor

Clinical Director, Virgin Care

About Virgin Care

Since 2006, Virgin Care has been on a journey to improve health and care services in England. Focused on delivering high quality care, good value and the fantastic customer service you'd expect from Virgin.

Virgin Care only provides services where it believes it can make a difference, with the vast majority of its services funded by the tax payer and free-to-use for local people.

Using innovative technology and investing in new models of care, Virgin Care delivers improvements and innovations to community and primary care services all across England.

Part of the Virgin Group and ultimately owned by Sir Richard Branson, Virgin Care has saved the NHS millions of pounds and improved services all across the country. 93% of people rating services run by the company say they'd recommend them to someone else needing a similar service.

Virgin Group has invested more than £30m in Virgin Care since 2010 and in January 2018, Sir Richard Branson confirmed that as and when Virgin Care makes a profit (over and above his original investment) all of that money will be re-invested back into NHS and Local Authority health and care services.

Virgin Care Services Limited and Virgin Care Limited are both rated 'good' by the CQC for community services they deliver, following inspections in 2017.

Which part of Virgin Care does this document cover?

Throughout this document the term 'Virgin Care' refers to services operated by Virgin Care Limited or a subsidiary company providing the Essex C&FW Service – in this case Virgin Care Services Limited (VCSL). As a national company, Virgin Care operates services in many areas and each area produces its own Quality Account. National achievements, where relevant, are included within the Quality Account for each area.

Find out more about Virgin Care at www.virgincare.co.uk.

Key successes and innovations delivered in 2017-18

Virgin Care Services Limited has achieved much over the last twelve months and colleagues have reported a great deal of pride in what has been achieved.

Overview of Essex Child and Family Wellbeing Service

In order to create and operationalise the new service model delivered as part of the Essex C&FWS, Virgin Care and our partners Barnardo's have undertaken a root and branch programme of transformation over the past 12 months. The overall objectives we achieved within our transformation plan were based on those found within our Commissioner's published service specification and are reflective of the ambitions laid down in our successful bid.

The transformation plan included the following projects:

1. A service restructure and workforce redesign programme which incorporated the merging of staff groups and teams from ten previous provider organisations and the integration of management functions and service delivery teams from Virgin Care and Barnardo's.
2. A large scale consolidation of estates incorporating a greater use of local delivery sites, partnership with communities to build resilience, and sessional events for hard to reach groups and rural communities.
3. The merging and updating of IMT hardware and software systems, with colleagues from the 10 legacy organisations now using the same electronic records which improves safety and removes repetition for services users.
4. The development, merging and delivery of new and existing systems, policies and processes, including caseload management, incident reporting, complaints, risk management, performance reporting and a review of overarching clinical governance, safety and quality monitoring.
5. Complete review of Safeguarding as little provision transferred into the EC&FWS in April 17 – looking to ensure that the staffing levels for Safeguarding and Looked After Children to meet the relevant national requirements
6. Community Development Plans, looking at the needs of each district and how the service can build local community involvement to provide the resilience for local people
7. Community Engagement Strategy to detail how to engage with each local area and increase the level of volunteers supporting a community and development of Citizens Panels for each district
8. The Allergy service in West Essex providing clinical advice, guidance and support to families and local GPs
9. Establishing the underlying activities to achieve the 27 commissioned outcome measures from year 3 (2019-20) of the contract.
10. Implementing new district-level Citizen's Panels and relaunching Family Hub (children's centre) Advisory Boards.

Many of these major changes are now in place and are running as 'business as usual', while others are nearing final sign-off and implementation.

The service has met with Commissioners to review, update and agree our overarching transformation strategy for 2018-19. A smaller, second round of workforce development is planned for the summer ahead as we continue to improve quality and meet national objectives such as the delivery of the Healthy Child Programme and the implementation of our commissioned Outcome Measures.

Essex C&FWS will continue working to improve pathways for accessibility to services. For example, we will be launching a Single Point of Access hub, introduce the Journey to Autism Diagnosis and Early Support ('JADES') pathway and open our 'Chat Health' support lines for school age young people.

Essex C&FWS will continue to strive to meet and exceed all CQC and OFSTED standards of care and quality by learning through regular self-assessment inspections, audits, and reviews of complaints / compliments, risks and incidents. We will develop improved processes to better monitor and meet national guidelines from NICE and current recommendations of professional bodies.

Essex C&FWS is planning to step up our current programme of child and family engagement, involvement and pursuit of feedback that includes Citizen's Panels, the recent re-launch of Family Hub (Children's Centre) Advisory Boards, Friends and Family Test, 'You Said, We Did' and our complaints system.

This section of the document includes highlights identified by Virgin Care's National Quality Team and colleagues working in the Essex C&FWS. These items have been split into the three key areas identified by the Department of Health and Social Care for all providers to focus on.

1. Safety/ensuring consistency in care
2. Clinical effectiveness
3. 3Experience of people who use services

Safety/Ensuring consistency in care

Introduction of the newly formed Safeguarding and Looked After Children operational structure, bringing together for the first time Safeguarding and LAC for children and families within the Pre-birth to 19 years services across Essex under one management structure, thereby allowing for closer working with partners across the County e.g. MARAC and Social Care.

Clinical Effectiveness

In our first year of operating all staff working in Essex Child and Family Wellbeing Service were able to use a single electronic patient information recording system (SystemOne). Before this point there were 10 different provider organisations with a mixture of electronic and paper recording systems, which meant families often needed to tell their story more than once. The ability to record and share information fluently amongst multidisciplinary professionals improves the speed, quality and safety of clinical decision-making, which is better for children and families and minimises clinical risk and reduces inefficiency and waste.

Experience of people who use services

We have introduced Citizen's Panels in each of our four Quadrants across Essex whereby families and the wider community have the opportunity to voice their opinions to shape the way in which services are delivered. Themes are collated for consideration by Quadrant-based management meetings and district-wide Family Hub Advisory Board.

Part two

Achievement of priorities for improvement in 2017-18

Virgin Care's core objective is to be the best community-based provider of care in England, with its stated purpose being *Everyone feels the difference*.

Each year, Virgin Care also identifies themes and goals for specific improvements to services. The below achievements reflect the work Virgin Care has completed against both its local objectives identified in last year's Quality Account and the work towards Virgin Care's overall objectives.

Priority 1: Ensuring service quality, safety and enhancing user experience: Providing excellent clinical outcomes, meeting and exceeding relevant standards and regulatory requirements

The following activities and achievements demonstrate the Essex C&FWS's commitment to innovation and service developments which are aimed at improving the quality and safety of the services delivered to the children, young people and their families across Essex.

- One of the greatest, if most challenging achievements has been the bringing together of colleagues from a diverse and culturally distinct group of legacy provider organisations to create one coherent integrated service, the Essex Child and Family Wellbeing Service. Throughout 2017-18 Virgin Care and their partner organisations, principally Barnardo's, have worked hard to create an entity which has a clear common purpose, shared values and the highest standards and expectations of care for the people who use the services. This is an ongoing process but the Essex C&FWS is proud of the transformation that has been achieved to date.
- An example of a practical improvement to support the above integration is the development of joint communications which now links every Healthy Family Support Worker with a Health Visitor. This has led to more robust, safer communication processes and means that every family only has to say their story once, which is better for everyone involved.

- The VCSL contract in Essex includes the delivery of measurable outcome based services. Essex County Council and West Essex CCG have commissioned 27 outcome measures which are due to be implemented with agreed Key Performance Indicators (KPIs) in April 2019. During 2017-18 a large amount of planning, negotiation and background work has taken place in order to create strong foundations on which the outcome measures and associated interventions will be built. This has included working closely with:
 - o A range of colleagues to research the outcome measures and produce Standard Operating Procedures (SOPs) and process maps for each outcome
 - o Children, young people and families to test the validity of proposed assessment tools for outcome measurement (baseline and progress following interventions)
 - o ECC and West Essex CCG commissioners to agree and sign off refinements to the wording and parameters of each outcome. As a result of these negotiations two outcomes measures are in the process of being merged to create a suite of 27 outcome measures from the original 28
 - o Systems analysts to set up the appropriate electronic reporting and recording processes

This work will continue throughout the coming year.

- In several geographical areas the Essex C&FWS has established an administration hub and instigated duty Health Visiting in each of family hubs, providing up to 50 hours a week in each district for support and advice when it's needed, thereby improving access and creating greater responsiveness and flexibility for families in moments of crisis, uncertainty or simply general enquiry.
- In order to improve the experience for families with young infants, Essex C&FWS have set up self-weigh baby sessions. These have reduced waiting times and freed up Health Visitors and Healthy Family Support Workers to conduct more meaningful discussions with people who need it. Some of the self-weigh sessions also have associated stay and play events, thereby increasing the choice of activities which offer opportunities for socialising with other families which helps to reduce isolation and provide peer support
- The Essex C&FWS has introduced Multi-Disciplinary Team (MDT) Supervision for complex cases to improve working integration and role awareness, alongside improved assessment and support for families. This has also led to greater opportunities for joint working and shared learning which will ultimately improve the rates of safety for the children, young people and families who use the services and who have Safeguarding needs.
- The Essex C&FWS has supported the development of a new Multi-Agency Risk Assessment Conference (MARAC) process. This has resulted in excellent feedback from the MARAC membership and improved overarching processes across several teams.
- The Essex C&FWS is engaging with and encouraging participation from people who use the services, stakeholders and the public. A role promoting 'Family Voice' – recording of experiences related directly by people who use the services – has been appointed to.

- In addition, Citizen Panel activities have taken place in all four quadrants. The Citizen Panel is described as A group of residents who help shape services by offering their views and insight into what matters to them, and what their priorities are
- The Essex C&FWS is committed to increase the number of volunteers and develop their skills to provide support for their local area
- Virgin Care has recently set up an Essex C&FWS website which includes a wealth of information about the services on offer and signposting to related services. It has received a large number of 'hits' which are continuing to grow. It allows services users to search for services close to them by using their postcode or key words
- The Essex C&FWS has organised the Healthy Schools Awards System, including hosting two very successful awards events in March 2018
- As part of the Virgin Care commitment to providing accessible and high quality locations that benefit children, young people and families, a programme of estates consolidation has taken place for both office bases and service delivery sites. Health services have been moved away from health care settings into the local community delivered from Family Hubs and delivery sites to help support integrated and multi-agency working, increase footfall, reducing duplication of work and always ensuring the most appropriate EC&FWS is working with the family and available when and where services users need them

As the new locations become established, some have been refurbished and others will undertake improvement over the coming year. An example of this, as well as of Virgin Care working together with other agencies and stakeholders, is the remodelling of Chelmsford Library. This was the result of a joint bid with the library to improve the children's area and to make it a joint hub including a sensory area (which is ASD friendly), and a dedicated space for confidential one-to-one consultations and clinical delivery. Together we have created a space that enables staff to work together to ensure that the community have access to a full range of services which support children's learning, health, wellbeing and cultural enrichment



- Essex C&FWS has been working with Home Start and is successfully delivering wellbeing groups in rural districts which include a counsellor available for 1-1 sessions; and Elpitha help and support for mums with PND (post-natal depression) – this is an effective, evidence based programme which includes CBT(cognitive behaviour therapy). Homestart work across Mid / West / South Quadrants; (Homestart NE covers the NE and offers similar services)

In the West Essex CCG commissioned specialist services:

- The Community Children's Nursing service has been working on high impact areas with an aim of reducing GP visits and admission to A&E/or hospital. The service is also rolling out the information to the PB-19 workforce in order for them to be able to work with families who use the services in supporting them in managing their children's healthcare needs at home when appropriate and how to identify when recourse to the GP or A&E would be recommended
- The service has improved the paediatrician waiting times and put in a clear policy for DNA's to reduce waste (DNAs cost £120 each on average)
- Paediatric therapy waiting times have also been reduced
- A process of peer review and observation has been set up in paediatric therapies
- Working with commissioners, Virgin Care has managed the introduction of a community based paediatric allergy service. This supports the avoidance of unnecessary attendance at acute settings when it can be managed locally under the guidance of a dietician. Virgin Care have also introduced community children's services allergy champions in West Essex so that PB-19 services colleagues are able to offer front line advice which helps to prevent tier two testing
- There has been a complete service review of the West Essex Paediatric Liaison Service, which is now working to improve communications between the acute hospital and the community services, ultimately to support parents/carers in the healthcare management of their children who have experienced a visit to hospital

FAMILY VOICE –

Received by the West Essex Paediatric Physiotherapy Manager February 2018

When my son J was 1 he was diagnosed with muscular dystrophy and we were warned he probably would never walk: may not be able to eat solid food and we could lose him anytime from when he was 15 and there was nothing that could be done to help him – this is very difficult news for a loving parent to hear but we never gave up on J. All the physio he received and his hard work paid off because when he was 5, he took his first step and even now is still able to walk, albeit only approx 15 metres, but he is still on his feet and working hard to keep his independence and mobility.

Sadly, he also developed scoliosis and his curve progressed to 89 degrees, so in August 2015 he had spinal fusion from T2-L4. We were warned of the many possible complications but J's lungs were being compromised, so we had little choice but to go ahead with the operation, which thankfully was a massive success. Since the surgery, he has made slow progress with his mobility which we are thankful for – however there are two things that have really helped James - the first being the hydro sessions held at St Margaret's Hospital where the physios at the pool were excellent! They were so professional, encouraging and attentive to J and the other children in the pool, giving them advice and encouraging them to beat THEIR OWN reps/exercise time from the weeks before – the children could see their individual progress and J especially took this challenge really seriously. The hydro sessions were invaluable – thank you.

The second time we noticed a real improvement in J was when H [physiotherapist] first assessed him in January 2018. We had been following the same program for over 18 months with no progress but we thought this was because of the MD and the surgery, however, H gave us a very different set of exercises to implement with J and the difference is incredible. She kindly came back just 3 weeks later and was pleased with his progress and gave us further exercises to add to his program – she also offered to attend a gym with J to build a program that he could take forward to build his stamina as well as his strength. J's older sister, who is almost 22, has the same condition so we have had very many physios but there are three that have really made a difference to my children – A, J and H. We are so incredibly grateful that H has taken over as J's physio, she is incredibly knowledgeable, progressive, professional and kind and the improvement we have seen in our son in such a short time is simply amazing.

I have personally thanked H but the difference in my son is so immediately noticeable I would like to highlight this but not sure how to go about it. Please pass our personal thanks on to H and please recognise this unique commitment and achievement as J was static for over an 18 months but her input has made such an improvement to my son.

Priority 2: Robust governance: fostering safeguarding and quality assurance processes which are standardised across the business.

Virgin Care Nationally

- Virgin Care's Medicines Management team have completed their five year strategy and have refined their national audit (see 'Medicines management statement' in Part 3).

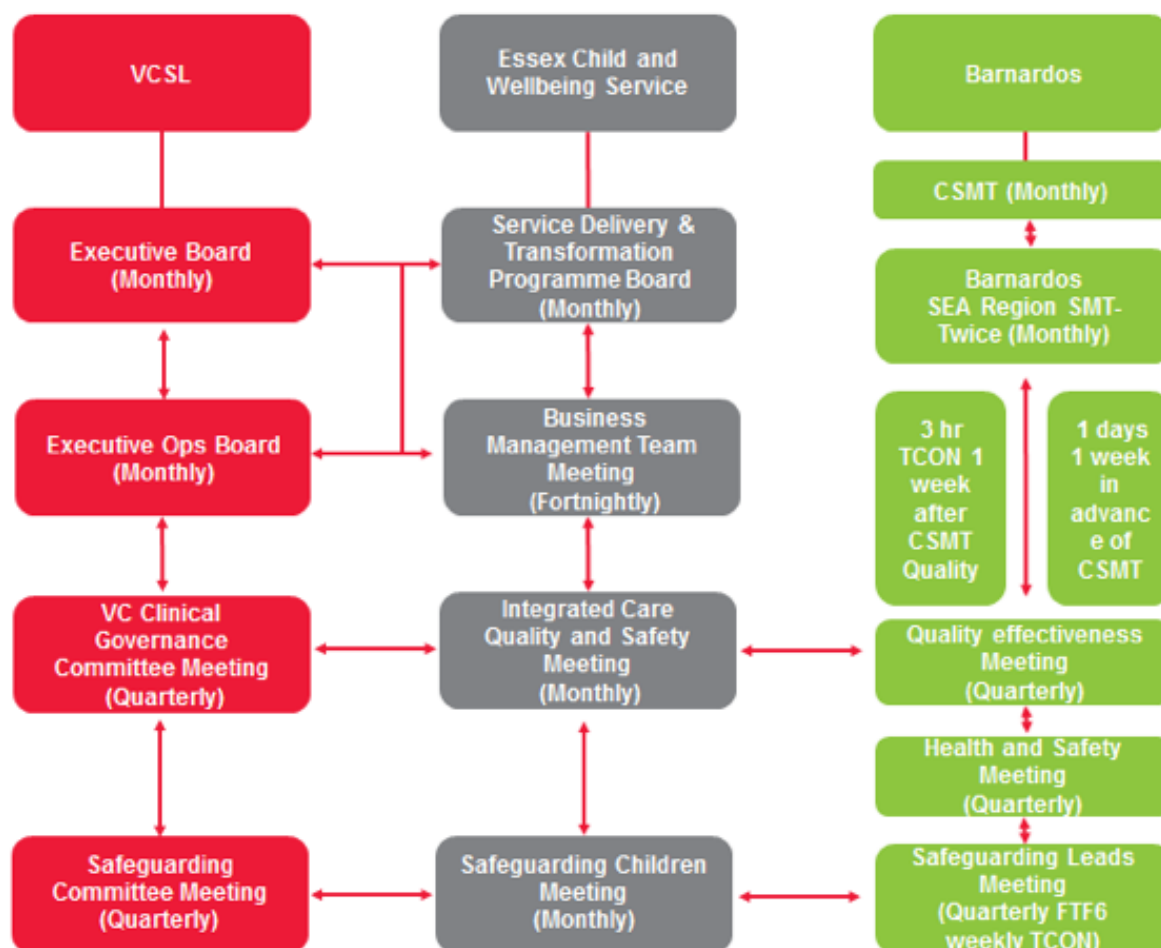
Essex Child and Family Wellbeing Service

- A priority for the Essex C&FWS at the point of mobilisation was to swiftly put clinical governance processes and pathways into place for reporting, monitoring, escalating and cascading issues and sharing learning. As part of the quality assurance framework, a monthly Essex-Wide Care Quality and Safety meeting was set up, followed by similar meetings within each of the quadrants in order to disseminate information effectively and robustly in both directions. The Essex-wide Care Quality and Safety group links with the Virgin Care Clinical Governance Committee where any issues can be escalated and support offered as appropriate by the national clinical governance and quality team. This includes the Clinical Director, Chief Nurse, and national leads for Safeguarding Children, Safeguarding Adults, Medicines Management, Quality, Regulation Compliance, and Health and Safety.
- There has been a review of the governance arrangements and procedures from both Virgin Care and Barnardo's and we have introduced a governance checklist for all new users of SystmOne who have come into the organisation.
- An Integration Handbook was created to support colleagues who were navigating different processes from two historically different providers. Included in this process was a 'buddy system' for Virgin Care and Barnardo's colleagues, which comprised arrangements whereby team leaders and other colleagues could pair with a colleague employed by the other organisation and who could help access to systems in order to aid processes such as ordering supplies, reporting incidents and complaints, and following HR processes such as recruitment and sickness management on behalf of their teams
- The service is in the process of bringing together policies and procedures from both Virgin Care and Barnardo's by completing joint Standard Operating Procedures (SOPs) and process maps which meet the requirements of CQC and OFSTED as well as the governance arrangements for both provider organisations. This has included the antenatal and new birth procedures and process maps detailing SystmOne user guides (for electronic record keeping and caseload management). By agreeing and consolidating the best practice policies and guidelines, and creating local underlying SOPs, the Essex C&FWS is committed to promoting a consistent and standardised approach to care quality and safety regardless of which team or location the people who use the services are accessing. Within this system it is acknowledged that there may be the need for some local differences in order to be responsive to specific areas of need, and this will be possible provided it is agreed by the senior team and all the governance requirements continue to be met.

- Alongside policies and SOPs, the Essex C&FWS has been working on allowing access to systems for both Virgin Care and Barnardo's colleagues in order to manage training, incident reporting and investigations and the management of complaints and risks
- Essex C&FWS has introduced a joint electronic record system (SystemOne) that enables all staff to safely share information both internally and externally
- Safeguarding children colleagues in the Essex C&FWS have overseen the development of a comprehensive and standardised Safeguarding supervision process with an improved model of reviewing themes to allow the identification of training needs within service and to support both the Barnardo's and Virgin Care workforce to ensure that all colleagues receive this in a timely manner.
- The services have undertaken Virgin Care national audits in Safeguarding, record keeping, medicines management, infection prevention and control, information governance data flow mapping and health and safety. We are also rolling out the Virgin Care Internal CQC Service Review – see later section in this document.
- Virgin Care business units are required to complete a monthly Clinical Governance Scorecard which includes items on incidents, Safeguarding, audit and peer review. The Essex C&FW services are now set up to record these processes and the results are monitored by the Virgin Care Clinical Governance committee on a quarterly basis.
- Virgin Care colleagues in the Essex C&FWS have been working with their counterparts in Barnardo's to ensure that all members of both organisations are familiar with the requirements of CQC and OFSTED, and training is underway to ensure all colleagues understand the imperative for compliance with the standards from the regulatory bodies.
- The Essex C&FWS Safeguarding leads have been working with central Virgin Care Safeguarding team on the development of a Looked After Children (LAC) policy which meets the needs of a range of service who work with LAC or care leavers.
- In some areas there has been the introduction of duty school nurses and the co-location of Safeguarding and LAC nurse. This means that representatives from management, clerical / administration, School Nursing, Health Visiting and healthy Family Support Workers are together in the same location. As a result, sections 47 or 17 or any other Safeguarding issues are dealt with speedily and have helped liaison with Safeguarding which considerably cuts down on the time frame for action. Social Care colleagues have praised the model because of the improvement in responsiveness and effectiveness.
- A new role of Essex C&FWS Lead Pharmacist has been appointed to and is currently working on many new initiatives, including creating new standard operating procedures related to medicines management, coordinating the flow of CAS alerts, overseeing action plans arising from the medicines safety audit and looking at revising the pathways for non-medical prescribing

Our aim as an integrated service is to ensure free flow of transformation, care governance

and quality across all three elements of Virgin Care, Barnardo's and the integrated Essex C&FWS. To this end we have a meetings structure as illustrated below in which escalation and cascade can take place regularly and transparently.



FAMILY VOICE –

Received by members of a Healthy Family Team December 2017 [sic]

Hi, hope everything's going well for you and you're looking forward to your Christmas break! The girls have been doing so well this year. K is doing amazing with her school work and has managed to catch up with a whole year's worth of school work; she is doing fantastic in maths! Her behaviour has improved so much too. T is doing well in school, staying to the school standard grades and making lots of friends. She also plays her boccia a lot with the school and loves that. We are starting to see her condition start to deteriorate now but she's still that happy go lucky little monkey. This is all thanks to the support you set in place all them years ago. Thank you for all you have done for my family. Don't forget you're always welcome here and the kettle's always ready to be put on x

Merry Christmas, love from us all xxx

Priority 3: Continue to be recognised as an outstanding employer

Virgin Care Nationally

- During 2017-18, Virgin Care has focused on engaging all new colleagues joining directly or via a service transfer so that they had a great induction and are clear about what values-driven leadership looks like within the organisation. The events equip colleagues with the knowledge and tools they need to hit the ground running from day one.

The project which Virgin Care ran has reviewed the arrivals events process (induction event process), the induction platform, welcome packs, line manager guidance and a new blueprint for the induction process when bringing new services on board.

- Virgin Care's Leadership Development programme Leading the VC Way has produced a suite of leadership learning tools, supporting colleagues to make their next move at each level in the organisation. Linked to the 'behaviours framework' and focused on Level 3 Apprenticeship in Team Leadership, the content is delivered as an apprenticeship with the first cohort due to join the modules in 2018-19.
- As an organisation grown through acquisition, taking on large numbers of new colleagues overnight at the point of transfer, a focus for the year was to move to a simplified payroll and people system and Virgin Care is very pleased that this work has been completed. All colleagues are now using a single payroll solution, providing a single source of trusted 'people' data on which projects in 2018-19 (below) will be based. This solution, using the iTrent People Portal, allows managers easy access to annual leave and sickness administration and does away with insecure paper-based systems for tracking. The new system will go live on 31 March 2018, as the organisation progresses into the new financial year.
- Virgin Care has refreshed its Employer Brand during the year, producing a suite of materials which support efficient recruitment to our services in Essex. Including a suite of videos, paper and online materials as well as a new Careers Portal, the Feel the Difference branding has been incorporated into the new employer brand.
- Virgin Care has extended its Feel the Difference awards (see Part 3) with colleagues, people who use services and others now able to nominate colleagues for three awards each month linked to the organisation's values
- The organisation made the difficult decision not to hold Big Thanks parties for our colleagues in December and to prioritise investment elsewhere within the organisation. Virgin Care instead launched 'Little Big Thanks' for Christmas, with each team receiving vouchers for food and activities for a team party.
- Virgin Care has introduced the 'BETTER Map' (see part 3) as promised in Quality Account 2016-17 with new tools and resources for colleagues.

Essex Child and Family Wellbeing Service

- With the integration of Virgin Care and Barnardo's colleagues and several newly appointed team leaders, it was felt to be a valuable and timely exercise in 2017-18 to offer a joint training package where colleagues from both organisations would together receive a leadership foundations course. This has been provided by The Learning Enterprise (TLE) with the aim to help improve and develop management skills, increase confidence and provide a joint forum where organisational cultural differences could be aired and shared, and a new common purpose be celebrated and promoted. Modules include:
 - Understanding Yourself as a Manager
 - Managing People
 - Managing Performance
 - Managing your Contract
 - Managing Quality
 - Managing Change
 - Coaching and Mentoring
- EC&FWS colleagues are offered monthly one-to-ones, usually with their direct line manager where they have an opportunity to discuss any achievements, concerns or issues. When colleagues have been asked whether they feel supported, there has been excellent feedback from these one-to-one meetings.
- An external package of training, including Root Cause Analysis has been offered to all managers and Safeguarding colleagues, which has been extremely well received
- Training has also been offered to colleagues on Disguised Compliance
- The workforce reorganisation mentioned in the introduction to this document has meant that opportunities have opened up for higher level roles and several colleagues are being trained into their new development roles. Examples of this include: following a successful secondment with IT a member of the admin staff has secured a permanent promotion within the IT team; several health visitors have secured successful promotion within the Safeguarding team and our lead for Citizens Panels started as a secondment for an administrator with the communications team and has resulted in a permanent position too!
- We are offering staff the opportunity to apply for apprenticeships and have had a large amount of interest in this. To date a number of colleagues have shown an interest in or applied for a place on the scheme:
 - Business Admin Level 3 - 3 applications received
 - Team Leader / Supervisor - 5 applications received plus 7 expressions of interest (not yet submitted application)
 - Assistant Practitioner - 14 applications received plus 5 expressions of interest (not yet submitted application)
 - Health Care Support Worker - 3 applications received plus 1 expression of interest (not yet submitted application)

- The Essex C&FWS now has a dedicated Virgin Care People Business Partner who is able to support managers and other colleagues with a range of HR issues
- Introduction of Mindfulness training and identification of Mindfulness champions across the quadrant, providing emotional support for colleagues during the significant change processes that have been undertaken across the services.
- Introduction of the Wellness platform for all staff in EC&FWS which offers advice, support and guidance on all aspects of health and wellbeing.

CASE STUDY of a much appreciated service

C is a Healthy Family Support Worker within a multidisciplinary Healthy Family in the South Essex Quadrant. Healthy Family Support Workers regularly support local families to manage sleep problems in children, introducing new routines and adapting the advice and information given around each family's individual needs. C talks about this being a tailored service that listens to the whole family, setting plans together. Once parents feel confident to move forward then a continued support is offered as it can be a long journey to happy sleeping. This service is valuable to families and recently C was given a thank you gift from a Rochford family that now has a baby that sleeps through the night, achieving better outcomes for the whole family.

Priorities going forward in 2018-19

Continuing to demonstrate service quality and safety remains a top priority for Virgin Care over the coming year. Virgin Care has also identified other areas where improvements can be made to the services it delivers to ensure everyone feels the difference.

How Virgin Care identified its priorities for 2018-19

Virgin Care's national priorities were identified by its board as part of an annual process, having reflected upon the feedback provided by people who use services and other stakeholders throughout the year in a variety of methods.

Individual business units, including Essex C&FWS were then able to set their own priorities.

The Essex C&FWS has worked closely with our commissioners, Essex County Council and West Essex CCG at every step in order to agree priorities. Part of this has been the negotiated changes to the Outcome Measures, originally 23 from ECC and 5 from West Essex CCG. There has been several changes in wording to ensure that the positive changes made to the outcomes of the children, young people and families as a result of our care and intervention are captured in the most effective way. Two ECC outcome measures have been combined so that there are now 22 (plus 5 specifically for the West Essex CCG services).

The Essex C&FWS is also committed to engaging with service users and the public to help set our goals based on their needs and priorities. To this end we have a process of recording 'You Said, We Did' as outlined elsewhere in this document.

Essex has also started a series of Citizens' Panels where participants have been invited to reflect on their experiences of the services so far and outline their views on the direction of the services going forward. These views have been incorporated into the priorities for the coming year and beyond.

Summary of Essex Citizen's Panel

- There are currently 51 members of the panel in Essex and this number is continuing to grow
- There have been four Citizen's Panel held so far across the county
- Twelve Citizen Panel / Transformation Events are planned to take place between May and December 2018 in various family hubs across Essex (three in each district). The aim of these public events is to raise the profile of the Citizen Panel and our transformation projects and to gather the views of participants and encourage co-design where possible. A copy of the planned events is available upon request and all are welcome to attend.
- By hosting these events and encouraging both existing and new members to be involved this will help to keep momentum.
- We will monitor and review all of the events.

- A further newsletter will be sent in May to our current panel members.
- Proposed themes from the events around transformation projects are:
 - o Early Years: School Readiness
 - o School Age: Healthy Schools
 - o Early Years: Baby Friendly
- A report reviewing the outcomes of the Citizens' Panel meetings that were held between January and March was written and distributed to management. A copy of this report is available upon request.
- A further report of the outcomes for each quarter of 2018 will be produced and distributed through various channels.
- We have produced a marketing strategy, budget and implementation plan for these events in order to raise optimum awareness and attendance from our residents. The design team are putting together graphics for posters, leaflets, postcards and banners and a distribution list has been created. A press release has been sent to the Communications and Contents Specialist. Deputy Quadrant Managers and other colleagues are being encouraged to be "Citizen Panel Champions" and to get actively involved.

Priority 1: Ensuring service quality, safety and enhancing user experience: Providing excellent clinical outcomes, meeting and exceeding relevant standards and regulatory requirements

- As mentioned in the section on 2017-18 priorities above, the VCSL contract in Essex includes the delivery of measurable outcome based services. Essex County Council and West Essex CCG commissioned 28 (revised to 27 in March 2018) outcome measures which are due to be implemented with agreed Key Performance Indicators (KPIs) in April 2019. Following the planning stage in 2017-18, 2018-19 will focus on training colleagues, rolling out pilots for each of the outcomes, including identification, assessments processes and thresholds for interventions, in order to identify baselines on which to build achievable and meaningful KPIs which will be agreed with the commissioners.
- The Essex C&FWS will embed the newly launched Safeguarding supervision process and start reviewing gathered data to influence training requirements
- The Essex C&FWS will be delivering internal training for all Healthy Family Support Workers to enable them to deliver the Ages and Stages Developmental assessments. This will support the timely rollout of the outcome measures and provide a more flexible and responsive service to families.
- The Essex C&FWS in West Essex will be introducing the Virgin Care 'Jades pathway' aimed at improving access to a consistent and timely approach to the diagnosis of autistic spectrum disorders (ASD)

- The Essex C&FWS in West Essex will be looking to extend the very successful continence service to increase the capacity and alleviate the attendances at A&E or GP surgeries
- The Essex C&FWS School Nursing services will be developing and implementing the use of 'Chat Health', a means of children and young people being able to contact the school nurse with concerns or questions directly through text messaging. The contact can be anonymous if the child wishes and has been shown in other areas to be a highly effective method of supporting children and young people with range of issues
- There are plans to implement a 'second round' of workforce consolidation and to improve ways to delegate and promote shared responsibilities and ownership of, for example care governance and quality among colleagues. The Essex C&FWS is in a unique position to access a wealth of experience and knowledge from two provider organisations that have traditionally worked in very different ways.
- There are plans to work with libraries on ensuring complementary universal activities related to children and families by developing greater integration between our colleagues and library staff: and look at how Essex libraries could be optimally used to support an integrated PB19 offer.
- The Essex C&FWS aim to review and update out SEND offer and publish it on our website so that families can access the support and care they need

Priority 2: Robust governance: fostering safeguarding and quality assurance processes which are standardised across the business.

- The Essex C&FWS will develop and introduce the training passport to assure the attainment of the mandated 16 hours of Safeguarding training for all Level 3 staff in a 3 year period.
- For the first twelve months of the contract, Virgin care and Barnardo's colleagues have accessed different statutory and mandatory training according to their organisation's training schedules and modules. In 2018 The Essex C&FWS will be implementing joint training for all staff, including the level 3 Safeguarding training delivered by The Learning Enterprise (Virgin Care's training arm).
- There will be a continuation of work on the development and integration of governance processes across the services and organisations that make up the healthy family teams. This will include further rollout of Virgin Care's (CQC) Internal Service Review process and Barnardo's (Ofsted) Service Evaluation Form process; implementation of the Virgin Care peer review policy and introduction of a NICE guidance tracker to better monitor compliance with NICE guidelines and conduct NICE audits within clinical teams.
- Virgin Care will be working with the CQC and OFSTED in exploring the possibility of a joint inspection process that encompasses all aspects of the integrated Essex C&FWS.

- The Integration Handbook mentioned in the previous year's priorities will be updated to incorporate developments that have taken place over the past year.
- As a result of the partnership with Barnardo's we are looking to develop our workforce integration through joint training and development of staff. The training and development will cover common skills, behaviours and values, for all colleagues when liaising with families.
- We will look to identify system-wide opportunities to reduce attendance at and the prescribing burden on GPs and Acute Hospitals by scoping specific health conditions that are identified or assessed by school nursing, health visiting and specialist services in the West Essex Quadrant who can provide an alternative solution.
- We will further look to promote the use of over the counter medicines for common illnesses by Health Visitors and school nurses.

Priority 3: Continue to be recognised as an outstanding employer

In addition to a continuation of all the initiatives mentioned in the 2017-18 sections above designed to support colleagues in the workplace:

- The Essex C&FWS will utilise the newly developed training needs assessment from the recently introduced supervision process to inform the training to be delivered in the 2018-19 period.
- In addition to the statutory and mandatory training mentioned above, the Essex C&FWS are exploring the delivery of foundation training for all staff (eg solution focussed interactions).
- Virgin Care will continue to offer further apprenticeships opportunities and support internal promotion wherever possible, as well as offering opportunities for staff to develop in areas of interest in relation to their personal development plans to support succession planning.
- We will promote the Virgin Care Wellness Platform which provides an assessment tool and advice for all aspects of our colleagues' lives from work, personal relationship, finances and general health.
- We will identify Mindfulness champions across each service to support staff and allow them a confidential space to focus on their emotional wellbeing.

Creating a clear workforce plan

During 2017-18 Virgin Care developed and implemented a new toolkit to enable all of its services to create a comprehensive Workforce plan, ensuring people's needs for the services were met.

The plan is based on five pillars:

- Leaders who lead
- Great people in the right place at the right time
- Best selves
- Happy People
- Future Read

These are underpinned by the CQC domains and the Workforce Plans allow Virgin Care's services to translate local people issues into tangible action plans and ensure recruitment activity is target-driven building high performing, highly engaged teams to deliver exceptional services to people who use services.

Virgin Care's Workforce Plans remain live and working documents, adapting and evolving as services do. Over the coming year, Virgin Care will review its workforce plan and make tactical recruitment decisions but in the coming years Virgin Care expects the plans to support transformation and provide long-term people solutions.

The plans feed into Virgin Care's organisational people strategy. Virgin Care considers this action to be industry-leading and the approach has been praised by our partners at the Royal College of Nursing who consider this level of Workforce Planning to be best practice.

Taking part in national, local and clinical audits

National Clinical Audit Participation: Community Services

National Safeguarding Audit

The 2017 Safeguarding annual audit was based on a combined Children's Section 11 and Adult Safeguarding Self- Assessment Tool (Best Practice). The audit focused on seven areas relating to safeguarding governance for example; safer recruitment and selection of colleagues and the management of complaints, allegations and whistleblowing. Additions were made this year to include a further six questions to gauge application of the Mental Capacity Act to practice.

The annual national safeguarding audit evidences that Virgin Care continues to manage safeguarding well across services. The areas that require improvement overall include access to safeguarding supervision and knowledge of the Mental Capacity Act, and the safeguarding sub-committee are taking steps to address these.

Other clinical audit programmes

Across all its services Virgin Care runs a core audit programme, including the following core audit programmes:

- Medicines Safety Audit (see Part 3)
- Record Keeping
- Infection Prevention and Control (environmental)
- Information Governance – confidentiality and data flow mapping
- Health and Safety

In addition The Essex C&FWS took part in several localised audits, including:

- Initial Child Protection Conference cross referencing – to assess the accuracy of our ICPC caseloads in comparison to ECC Social Care team (North initially – roll out across all 3 remaining patches)
- Audit of level of follow-up required to graded interventions in unplanned care in Mid and South Essex (In progress)
- Internal audit looking at triage of A&E notifications.
- Audit of Duty Health Visiting and School Nursing task notifications.
- Internal Quadrant Audit looking at the receipt and number of Domestic Abuse Notifications leading to the development of revised Standard Operating Procedure

In 2018-19, having introduced several new Standard Operating Procedures related to Essex C&FW service delivery during 2017-18, the services will aim to carry out a range of audits to ensure safe and good quality operational delivery that meets the requirements of the SOPs and where appropriate, NICE guidelines.

Virgin Care Research Statement

Participation in clinical research demonstrates an organisation's commitment to improving the quality of care it offers and represents part of its contribution to wider health improvement in the United Kingdom.

Virgin Care's clinical staff are kept up-to-date with the latest treatment possibilities and by taking part in research. Virgin Care believes it can improve outcomes for people who use services it provides as well as services operated by other providers.

Virgin Care is a proud participant in research to help improve care for people who use NHS and Local Authority services and the organisation plans to continue to develop this area over the coming year.

Current research activity

The organisation currently has a number of programmes on its research database which are in progress or due to commence within a few weeks of the publication of this document.

Essex Child and Family Wellbeing Service Research Statement

Proper research governance is essential to ensure that customers, colleagues and members of the public can have confidence in, and benefit from, quality research in health and social care. We support high scientific, ethical and financial standards, transparent decision-making processes, clear allocation of responsibilities and robust monitoring arrangements. The dignity, rights, safety and wellbeing of participants must be the primary consideration in any research study.

A core standard for health care organisations is that they have systems to ensure the principles and requirements of the research governance framework are consistently applied. Virgin Care achieves this through our Research Governance Committee that meets quarterly and has a membership made up of range of clinical expertise.

Current research activity

The Essex C&FWS currently has one active project included on the Virgin Care Research Database, which remains in progress with regular updates provided by the lead researchers, namely:

The Role of the School Health Nurse in Safeguarding Children and Young People

This project will be an exploratory study into the role of the school health nurse in child protection and Safeguarding practice in the UK. The study will be conducted across four study sites and focus on the identification and response by school health nurses to cases of child abuse.

There are also a number of staff engaged in research projects of various types, as part of postgraduate studies. Our partners in these studies include Oxford Brookes University.

Publications

The Essex C&FWS has not been involved in any publications over the last twelve months.

Learning from deaths

Virgin Care responded to the 'National Guidance on Learning from Deaths' issued by the National Quality Board in March 2017 by developing an annual mortality report that is presented at the Virgin Care Clinical Governance Committee and to the Board of Directors. Virgin Care complies with the Framework for NHS Trusts and NHS Foundation Trusts on Identifying, Reporting, Investigating and Learning from Deaths in Care where applicable.

The death of a child or young person is always a tragic scenario regardless of the circumstances. All infant and child deaths that Virgin Care are made aware of in Essex are reported on our incident investigation system, CIRIS and will be followed up with an initial investigation and 72 hour report. The investigation and report is usually conducted by a member of the Safeguarding team and will include a chronology, and where appropriate, liaison with local colleagues who have been involved in the family.

Should the death be unexpected and the Essex C&FWS has been recently active with the family, and if there is any indication that the service as a whole or individual colleagues have acted in any way, or omitted to act in any way, that could have changed the outcome, the information will be escalated through the Serious Incident (SI) route to the Virgin Care Clinical Governance team, the local CCG and other commissioners, and to CQC and will be investigated and reported on using the Root Cause Analysis (RCA) process.

Where there is any learning from deaths this will be shared with colleagues through the Virgin Care and Essex C&FWS Care Quality and Safety framework and may also be cascaded through newsletters or bulletins if appropriate to ensure all colleagues are aware and any recommendations are quickly adopted and embedded in practice.

In 2017 a series of child suicides across Essex resulted in the instigation of a thematic review led by the Essex Safeguarding Children's Board (ESCB). The Essex C&FWS Safeguarding team has participated in the review by sharing information on the service's involvement with the children, young people and their families. Once the review has been completed and the findings shared by ESCB, the Essex C&FWS and other health providers across Essex will ensure that any learning is shared and any potential or recommended changes in practice resulting from the review are acted upon at the earliest opportunity.

Statements from CQC

Some services operated by Virgin Care, including the Essex C&FWS, are required to register with the Care Quality Commission (CQC).

As part of this document, it can be confirmed that VCSL is registered with the CQC and has no conditions attached to its registration.

VCSL's Essex C&FW services have not participated in any special reviews or investigations by the CQC during the reporting period.

Full copies of CQC reports Virgin Care services are available on the CQC's website at www.cqc.org.uk.

Internal Service Reviews (ISR)

Virgin Care operates a programme of 'Internal Service Review' (ISR), with each of its clinical services being required to complete such assessment twice during each calendar year, (starting after it has been operating as a new contract for a period of 6 months) with no longer than 6 months elapsing between subsequent reviews.

Each ISR is completed by a manager, sometimes of another Virgin Care service, and results are logged, analysed and reported using our internal reporting platform 'Tableau'.

The ISR programme covers the same areas as a CQC inspection, produces a rating based on the same scale as the CQC's reports and an action plan is created to be completed within a set timeframe.

In the Essex C&FWS, Virgin Care undertook one completed ISR during the reporting period and three others are currently in progress. The review identified the areas of differences in historic practice prior to Virgin Care managing the service. The learning is being shared across all services in Essex.

Safeguarding Statement

Virgin Care is committed to Safeguarding and promoting the welfare of adults, children and young people and to protect them from the risks of harm. To achieve this Virgin Care has dedicated National and Local Safeguarding Adults and Children's Leads and polices, guidance and practices which reflect statutory and national Safeguarding requirements.

- National Safeguarding Assurance function working across localities and partnership boundaries to respond to national developments, legislative changes leading to continuous improvement and learning across the organisation
- Virgin Care's Clinical Governance and Safeguarding Committees provide Board assurance that services meet statutory requirements
- Named professionals are clear about their roles and have sufficient time and support to undertake them
- Where appropriate, services have submitted a Section 11 Review report and/or Safeguarding Adult Self- Assessment audit tool
- Action plans are monitored across the organisation at committee and board level
- Safeguarding policies and systems for children and vulnerable adults at risk are up to date and robust.
- Safeguarding training is included in induction and integral to the organisation's training policy
- Virgin Care's sexual health services now keep a Safeguarding activity log relating to Safeguarding children, when the child is already known to Social Care and their case is open (and if a new referral not required). A tool was developed and is in-situ to identify if an adult is at risk of harm and may need referring to external agencies.

Virgin Care continues to deliver on the recommendations from the CQC, "Not seen, not heard" report (July 2016) to ensure that services new to Virgin Care are included. The implementation and a planned roll out of the Child Protection Information- Sharing project (CP-IS) has started across Virgin Care's scheduled care services and ensure that the Mental Capacity Act, DoLs (Deprivation of Liberty) and Prevent are fully embedded within Safeguarding processes across all services within Virgin Care.

Essex Child and Family Wellbeing Service – Safeguarding

At the start of our contract only staff working in West Essex in the field of Safeguarding Looked After Children (LAC) transferred to Virgin Care. Therefore, one of the first actions was to quickly resource and staff a Safeguarding and LAC provision to cover all of Essex and that met the requirements of the respective intercollegiate documents. This was immediately put in place with a dedicated line manager.

Much work has been carried out over the last 12-months to ensure that the integration of children's services across Essex has included Virgin Care's robust and effective Safeguarding processes.

Developments during 2017-18 include: (some of these have also been mentioned in the sections on achieving priorities for improvement earlier in the document):

- Recruitment to a range of Safeguarding children's roles across the four quadrants to ensure adequate staffing levels to cover all the services' Safeguarding needs
- Embedding Safeguarding colleagues in the quadrants' team so that they are accessible and visible to colleagues on the ground and have a good understanding of the specific needs of local teams and the people who use the services in their area
- Appointing to a new role of Safeguarding and Looked After Children (LAC) Manager to have an Essex-wide overview of all Safeguarding and LAC colleagues and to ensure that even though there may be local differences on the ground, there is a robust and consistent adherence and approach to national and Essex-wide policies, guidelines and standard operating procedures
- The introduction of Multi-Disciplinary Team (MDT) Supervision for complex cases to improve working integration and role awareness, alongside improved assessment and support for families. This has also led to greater opportunities for joint working and shared learning which will ultimately improve the rates of safety for the children, young people and families who use the services and who have Safeguarding needs
- Supporting the development of a new Multi-Agency Risk Assessment Conference (MARAC) process. This has resulted in excellent feedback from the MARAC membership and improved overarching processes across several teams
- Developing up to date and responsive Safeguarding Children and Looked After Children (LAC) Level 3 training delivery; this has received very positive feedback from colleagues who have attended
- Safeguarding children colleagues in the Essex C&FWS have overseen the development of a comprehensive supervision process with an improved model of reviewing themes to allow the identification of training needs within service. The development of multi-disciplinary Safeguarding supervision has supported cross-team working and shared learning
- The tracking of Section 17s and 47s as part of the newly agreed KPI's
- EC&FWS colleagues are offered monthly one-to-ones where they have an opportunity to discuss any achievements, concerns or issues. There has been excellent feedback from these one-to-ones when colleagues have all been asked whether they feel supported.
- An external package of training, including Root Cause Analysis has been offered to all managers and Safeguarding colleagues, which has been extremely well received
- Training has also been offered to colleagues on Disguised Compliance

- Participation in the Essex Safeguarding Children's Board thematic review of the large number of child and young people suicides in the county during 2017
- Completion of the first Section 11 self-assessment for the new service

CASE STUDY

Example of opportunistic good practice and the benefits of having an accessible Duty Health Visitor

B, (a VCSL administrator) was in the front office when a pregnant lady and her partner came into the centre to use the community café. B noticed that the lady was pregnant and engaged her in conversation about this and asked if she'd met her health visitor yet. Mum she hadn't heard from us and had no detail of the services available to her.

B explained the service and introduced her to the duty Health Visitor, who undertook the full Antenatal assessment with her and her partner there and then, identifying that two previous children had been removed from the couple. A referral was made to social care (with Mum and Dad's full involvement) and the parents have been engaged in the MECOSH programme and the centre based antenatal programme.

This is a good outcome for this family and hopefully with the right support they will go on to be great parents.

Statement on the accuracy of our patient data

Virgin Care submitted information during the year to the Secondary Uses Service (SUS) for inclusion in the Hospital Episodic Statistics, which are included in the latest published data.

Community service outpatient data for SUS submissions is being validated to ensure ongoing submissions are confirmed as being successful.

The percentage of records in the published data which included the patient's valid NHS number was not applicable to the Essex C&FWS (figures required are for admitted patient care; for outpatient care; and accident and emergency care)

The percentage of records in the published data which included the patient's valid General Practitioners' Registration Code was also not applicable to the Essex C&FWS (figures required are for admitted patient care; and for outpatient care)

Errors introduced into patient notes

Any occurrence of errors introduced into service user's notes are reported as incidents on CIRIS and due process is followed using Caldicott and data protection guidelines, and where appropriate, duty of candour would be triggered.

Local initiatives to improve data quality

ONLY PROJECTS LINKED WITH NHS NUMBER / GMC PRACTICE are required here and are not applicable to the Essex C&FWS, however, it is noted that the following activities have taken place in the Essex C&FWS to improve the quality of data:

- Appointment of an Information Governance specialist (shared with another services) to oversee and advice on IG, data and confidentiality issues
- Completion of a KPI reporting and data cleansing exercise
- Caseload management – Improved management of diaries to help with workload allocation.
- Setting of KPI trajectories
- Review of SystemOne templates
- Aligning back end and front end reporting
- Ceasing the use of Essex County Council's Capita One E-start programme and upgrading SystemOne functionality to capture the required family support activity

Information Governance Toolkit Attainment Levels

Virgin Care's Information Governance Assessment report for this year was graded Satisfactory.

More than 98% of Virgin Care colleagues in the Essex C&FWS completed their induction or annual refresher IG modules during the year.

Virgin Care has an action plan in place to improve compliance and toolkit scores during 2018/19 and further the IG agenda.

This includes the continual review of IG policies and procedures (rolling programme of review).

Duty of Candour Statement

Virgin Care is committed to being open and transparent with people who use services and, (taking into account confidentiality), their representatives. The organisation encourages its colleagues to be open and honest from the first time people who use services come into contact with services.

Where a notifiable safety incident is recognised, colleagues are advised to report this via the organisation's incident reporting system (CIRIS) and follow the Duty of Candour policy. This includes following the Staff Guide on Duty of Candour.

Template letters have been designed to assist colleagues to write to the person using the service or their representatives to apologise and to advise that an investigation into the incident is underway [within 10 days of the notifiable safety incident occurring].

An appropriate colleague will conduct an investigation to establish the facts of the notifiable safety incident in line with the Management of Incidents policy, in line with timescales for external reporting including STEIS. For incidents relating to Safeguarding, the relevant Safeguarding Policy and Safeguarding lead will also be consulted before any disclosure is made to the person using the service or their representative.

Once the investigation has been concluded, a further letter is sent to the person who uses the service advising of the outcome, lessons learnt and how the Organisation will share such lessons and knowledge to reduce the likelihood of a similar incident occurring in the future. A meeting will also be offered as well as any other support that may be required.

Compliance is monitored through the local Root Cause Analysis panel action plans.

'Sign up to Safety' Statement

Last year, Virgin Care committed to the 'Sign-up to Safety' statement during 2017-18. This has been investigated at a national level this year and individual business units provided with a framework in order to sign-up. This approach, rather than a national approach, was seen by the group as the most appropriate way to reflect the varied range of services which Virgin Care operates across the country.

The Essex C&FWS joined the 'Sign up to Safety' framework earlier this year. As part of five Sign up to Safety pledges we have committed to:

1. Putting safety first. Commit to helping people work safely. **We will:**

- Look to improve the working lives of our colleagues through activities such as our Wellness Platform, identifying and training mindfulness champions in each service
- Promote 'Love Your Lunch' events to encourage colleagues to take a lunch break
- Promote our Carers Clubs
- Ensure all our working environments have been audited and health and safety checked
- Ensure the lone working policy is widely understood and put in to practice
- Ensure all of our colleagues have access to the relevant training and development to undertake their roles effectively and safely

2. Continually learning. Listen and act on what we are hearing in our conversations with our staff, patients and families. **We will:**

- Use the feedback from clients through our 'You Say We Did' practice to improve services
- Look to take the learning from complaints and incidents and use it to further develop service, educate and train colleagues and change practice where required
- Use our Citizen Panel events to listen to our clients and share with them our work and activities
- Look at promoting our 'Family Voice' messages across our colleagues as well as with our commissioners

3. Being honest. Create an environment where staff, patients, families can have open and honest conversations about what went wrong and what went well, free from judgement and be treated with kindness. **We will:**

- Follow the Duty of Candour Process and policy ensuring that any learning is shared
- Using the Duty of Candour principles will we support colleagues to be open and transparent in their communications and dealings with families in a non-judgemental and supportive manner
- Continue to promote our 'Speaking Out' (Whistle Blowing Policy) for all colleagues

4. Collaborating. Create opportunities for conversations where all staff, regardless of their role or position can share what they know about working safely to help others learn. **We will:**

Though our partnership with Barnardo's we have developed an integrated team of NHS and third sector colleagues which promotes opportunities for sharing expertise, experience and knowledge to maximise the care to clients

Promote multidisciplinary / multiagency working across all of our services

5. Being supportive. Really listen to each other when support is needed and act on what has been said. Create opportunities to celebrate success and spread joy. **We will:**

- Continue to lead the Healthy Schools events across Essex to promote the benefits of Healthy Schools Enrolment
- Though a range of activities ie 121, learning sets, supervision and meetings we will continue to listen to colleagues and act on their concerns and celebrate their successes.
- Take seriously any allegations of bullying, harassment or discrimination and pledge to investigate thoroughly and act on all findings

NHS Staff Survey

Virgin Care runs its colleague survey 'Have Your Say' on a bi-annual basis with regular 'pulse checks' covering a random sample of colleagues. In 2017-18 62% of our colleagues across England took part and we saw significant improvements in feedback from colleagues based on tracking data from previous years.

A summary of key results as required by Department of Health are included below.

It should be noted that the results below are for Virgin Care as a whole from the NHS staff survey that was conducted in May 2017. Colleagues from services that were mobilised in April 2017, including Essex C&FWS, were not included in this survey but will be taking part in the forthcoming May 2018 survey.

KF26

Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months)

6% of colleagues said they had experienced harassment, bullying or abuse at work from staff.

(White colleagues 5%, BME 9%)

KF21

(Percentage believing that the organisation provides equal opportunities for career progression or promotion for the WRES)

67% of colleagues believe that the organisation provides equal opportunities for career progression.

(White colleagues 66%, BME 67%)

Delivering high quality services

Virgin Care's teams and its services are recognised for their hard work and excellence throughout the year, both internally and externally. This is a summary of some of those awards.

Star of the Year awards

Virgin's Star of the Year Awards are the national recognition programme for colleagues in Virgin companies. Each year we have several hundred nominations with two national winners invited to dinner with Sir Richard Branson at the award ceremony.

Feel the Difference Awards

Virgin Care's primary recognition programme for colleagues is the 'Feel the Difference' awards, with colleagues eligible for an award in three categories: Strive for better, Heartfelt service, Team spirit, based around the values of Virgin Care.

Colleagues and the public can nominate Virgin Care staff for an award online at any point throughout the year online, with monthly winners and a yearly award ceremony in West London.

More information about the awards is at www.virgincare.co.uk/awards/

Joyce Wells (Health Visitor in Mid Essex) has been working in partnership with the staff at the Community Café at St Peters and together they have been supporting vulnerable families by supplying food parcels on a weekly basis. The food has been donated by the community café and the local Tesco Foodshare scheme that Joyce collects on her day off. Julie is a strong role model and she has built positive relationships up with these families.



Nikki Smith, Health Family Support Worker received the Feel the Difference Award for the extensive support she provided to her team during and post transferred to Virgin Care. Throughout the significant period of change Nikki was a massive support to her team, upskilling staff in National Child Measurement Programme and assisting with Information Technology. Nikki is always cheerful and willing to help, and has gone above and beyond to support full integration.



External awards

Hadeel Lufti is a volunteer in North Essex who won the Marsh Trust award 2017, for her work with the EC&FW service (under our partnership with Barnardo's).

Training and Development by The Learning Enterprise (TLE)

The Learning Enterprise is the training and development arm of Virgin Care, and has been awarded the Skills for Health Quality Mark for delivery of face-to-face training and education for the health and care sector.

The Learning Enterprise provides a mixture of clinical training for Continued Professional Development, eLearning (both clinical and non-clinical) and vocational training including Business Administration, Health and Social Care, and providing training for parents/carers of children with continuing care and complex needs and in schools where we deliver training on Asthma, Diabetes and Epi-pen use.

During the past year, The Learning Enterprise has:

- Implemented a Nurse Revalidation platform, providing a central point for Virgin Care's nurses to collate their data for revalidation and provide a convenient way of uploading the information to the Nursing and Midwifery Council
- Been accredited to provide the Leadership ILM Apprenticeship for first time Team Leaders and where appropriate experienced leaders can participate to support their role
- Launched a new Appraisal platform for Virgin Care, designed around the Behaviours Framework and ensuring all colleagues received a mid-year and end year appraisal which is pertinent to them and relevant to the organisation.
- Launched an external-facing training platform, allowing volunteers to access additional training funded by Virgin Care.
- Access on JAM (Virgin Care's intranet) to the Assessed and Support First Year of Employment (ASYE) Framework for Newly Qualified Social Workers (NQSW) to ensure delivery for all NQSW within VC

- TLE have developed and Launched 12 month a Preceptorship programme for all new registrants in Virgin Care
- E- Learning Packages for Mental Capacity Act & Deprivation of Liberty Safeguards have now been developed in-house for all staff and launched on MyLearning
- Reviewed internal Quality Assurance process within TLE to ensure all training packages are quality assured and signed off at senior level. Ensuring all Training packages are standardised across Virgin Care nationally
- Embedded Governance structure across TLE ensuring all areas of the business have robust reporting mechanisms and clear accountability
- The Learning Enterprise won the Student Nursing Times Award for student placement of the year: community 2017, for its work with Virgin Care.
- Virgin care has been delivering a Foundation Degree in Health and Social care leading to the qualification of assistant practitioner. The first cohort started in Surrey with 20 students in June 2017. The award is accredited and delivered in partnership with the University of Derby. Recruitment to the course is jointly shared between the University and TLE.

Over the coming year, The Learning Enterprise will:

- Re-launch Virgin Care's Arrivals process for new starters
- Launch the Level 3 Apprenticeship for Team Leaders
- Receive Royal College of Nursing approval of its Preceptorship programme
- Develop an in-house Looked after Children eLearning Programme

In the Essex C&FWS

- All Healthy Family Team Leads & Hub Coordinators are currently undertaking internal leadership / management training provided by TLE.
- Essex C&FWS is currently training 4 Student Health Visitors (SCPHN)
- A Health Visitor is undertaking the Health Visitor to School Nurse 3 month conversion course.
- Several colleagues have been offered apprenticeships (see above for details)
- Colleagues have been offered 'acting up' and 'secondment' opportunities e.g. Healthy Family Team Lead positions.
- All Healthy Family Support Workers are undertaking Ages and Stages Training.
- Internal NCMP training is ongoing (the National Child Measurement Programme)
- All qualified colleagues are to undertake a mentorship qualification.

Highlights of initiatives to improve the experience of using services

Across our services we have a number of national initiatives to improve experience. This includes our *You Said, We Did* programme which sees us make more than 1,300 changes a year to our services as a direct result of feedback from people using services.

Some examples of the many improvements made in Essex include:

YOU SAID	WE DID
Client came to Hub; she had received a lot of family support previously and wanted to give something back to her community to let other people know about the EC&FWS	Client organised an event with support from the Hub. The event was well attended by about 30 people; feedback all positive and parents have returned to centre since.
The new self-weighing clinic has been helpful and a good way to meet other parents however sitting on the floor to change & weigh my baby was slightly uncomfortable as I have a bad back	We ensured weighing scales were available at different levels to ensure that parents are now able to weigh their infants and children in comfort and safety when attending the self-weigh clinic. This change has been welcomed by those families attending the clinic.
Parents have identified the need for more information and guidance relating to healthier eating for their children attending the Special School.	The Special School Nurse is now organising workshops in school to provide this support starting in Spring 2018
<p>Fun with Under Ones Group</p> <p>Families approached the group facilitator and said</p> <ol style="list-style-type: none"> 1. Some of the babies would be 1year old soon and parents felt that there was no other group suitable from 1 year upwards in their locality. The parents didn't want to leave the group as they had started making friends with other service users. The Families had personally invested into the group and wanted to continue to be a part of it. 2. The parents asked if the start time could be changed from 10:00am to 10:30 am as this would fit in better with school/nursery runs and babies sleep time. 3. The parents asked that the group be extended by half an hour so that the session started at 10:30 am and finished at 12 noon. They said that that would fit in to lunch and nap times. 	<p>The families' views were discussed with the HFT team (including health colleagues). We changed the times of the group to suit the parents and also extended the age range of the group to up to 2yrs old to meet the need within the locality.</p> <p>The group is now called Fun with Under Twos</p> <p>The session is age appropriate and offers support to those children in their early stages. The group facilitator is still able to support with breast feeding and continues to signpost to our timetable and other community groups</p> <p>We continue to register new parents every week and the numbers of service users attending is constant.</p> <p>The feedback from the parents is that this session is a great opportunity to continue meeting up with friends they have made - they have their own what's app group - and now socialise outside the group.</p>
Responding to the national and local news regarding health and lifestyles especially dental hygiene, clients at a group showed an interest in finding out more and learning what to do with their children and families	A 'Healthy Lifestyles' event at the children's hub, to include dental care, healthy eating, lunch etc have been organised to be run during the schools' half term

YOU SAID	WE DID
Health Visitors required more sessional spaces in order to provide services that respond more effectively to the needs of their clients	We approached a local primary school, who have provided these for free.
We find it difficult to get to a SLT drop-in clinic if we live in Ongar, where public transport is limited	We set up SLT drop-in assessment clinics once a term in Ongar.
Clients were asking, 'How can I help my child to eat more variety of food?'	We provided messy food play therapy at home to demonstrate strategies to families
A community flagged up that all services in their area had disappeared.	A healthy family drop-in in the library and a buggy walking group has been set up.
Parents asked for baby massage. There is a high level of deprivation and isolation in the area so a group was appropriate	A baby massage group was organised specifically for them to reduce isolation and help create friendships
A need was identified by care leavers that there was little support.	The LAC team are working to improve our service for the vulnerable leaving and after care for young people. As part of this outreach work we attended a tenants meeting in the evening at one of the larger supported accommodation premises in the area. We met with the young people to explore how we could provide additional support and as a result will be implementing a monthly early evening drop in session.
We received information from parents asking if we could provide a session specifically for children aged 2 years and up. The parents explained that they were sometimes concerned about attending sessions with babies as their children were very energetic and enjoy running around	A session has been commenced which provides children with a range of different physical activities and group games. The focus of the group is Physical development, Language and Communication and supporting healthy lifestyles. It is a popular session with 19 plus children attending. The parents have given lovely feedback on how much their children are enjoying the session.
We would like to receive text messages to remind us of appointments	We have re-established text message reminders for appointments with community paediatricians, OT, physiotherapy, psychology and continence services.
Clients were having trouble contacting the different areas of the quadrant by telephone	A single telephone number was set up, with options to select the area required. An automatic answerphone has been added; voice messages are automatically emailed to admin to action.

The BETTER map

Over the course of the year, Virgin Care introduced the BETTER principles to support a high quality experience in the journey through its services (see over). This map provides a focus for services, managers, colleagues and Virgin Care's Service Design Team when reviewing the performance of services and the experience of people who use services when something goes wrong.

The *Feel the difference* experience is all about making things **BETTER**



The Booking

The Environment/setting

The Welcome

The Consultation/your stay

The Goodbye

The Result/follow up

Worries you may have

- Will I get through?
- Will I have to explain everything twice?
- What if I can't get an appointment?
- Will they understand?
- What if I cry?
- What should I have with me?

Our commitment to you

- We'll give you options on how to book
- We'll make it quick and easy to get an appointment
- We'll make you feel like we're here to help you and to listen to you

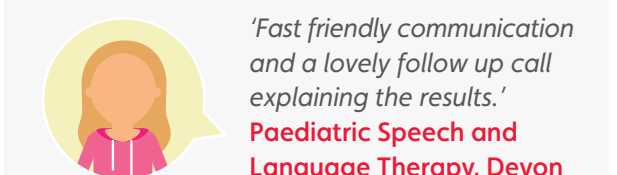
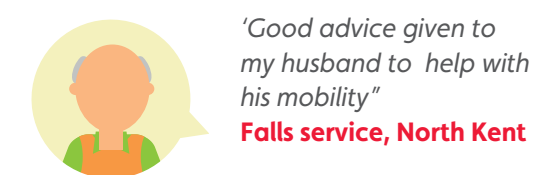
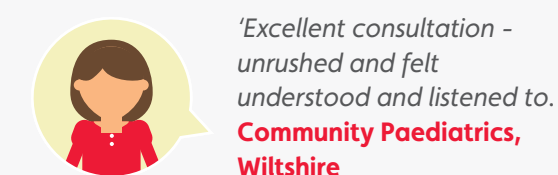
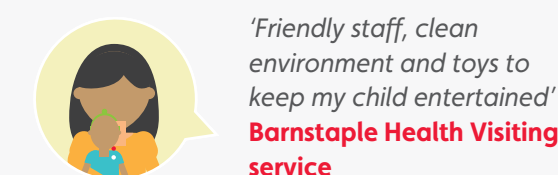
Your commitment to us

- You let us know if you can't turn up to an appointment in good time

So you feel... [the difference]

- We're efficient and competent
- We've removed barriers to help you
- Nothing's too much trouble
- You are being listened to
- Your needs are being met

And say...



- Will they ask me questions in front of everyone?
- Will they be too busy?
- How do I know where to wait?
- What if I need the loo?
- Will I need to complete any forms?

- We know you are coming
- We will say hello with a smile and introduce ourselves
- We'll check with you what you like to be called
- We'll tell you what's going to happen (including how long you may have to wait)
- If we are running late we will let you know

- You treat us as you'd like to be treated, with courtesy and respect

- We're welcoming
- You are genuinely cared for a respected
- You can relax because you can trust us
- You know what it going to happen

- Who are they?
- Will they listen?
- Will I understand what the problem is?
- Will this hurt?
- How long will it take to recover?
- Is it serious?

- We'll introduce ourselves by our first name
- We'll make sure we've got your name right
- We'll listen to your story and explain as we go
- We'll ensure the consultation is thorough
- We'll signpost you to other community support available to you
- We'll be open and honest with what can and can't be done

- You give us al the information we ask for in order to make an informed diagnosis
- You will work with us to agree next steps

- We're committed to you
- You are a person and not a number
- Your are in expert hands
- You are confident in the diagnosis
- You can trust us
- You only have to tell your story once

- What do I have to do next?
- What will they do now?
- When will I hear back?
- What about the other thing I forgot to mention?
- Will I need to come back again?

- We'll check you have understood everything
- We'll explain what will happen next and any literature to help you remember
- We'll be open about the ongoing support available to you
- We'll give you a timescale when we can
- We'll ensure you have support at home and involve others if you need us to

- You let us know if there is anyone we need to involve and if you are worried and don't understand anything

- You understand what the problem might be
- You feel prepared and better able to cope
- You are in good hands
- You would recommend the service

- What if it gets worse?
- When should I expect a call?
- Can I get an appointment in time?
- What if I don't hear back - who can I talk to?

- We'll keep you safe
- We'll tell you the results when we promise we will
- We will give you contact details if you are worried
- We'll listen to your feedback and take onboard suggestions

- You will give us the time we agreed to get back to you but get in touch if you feel worse

- We provide a seamless, joined up, service
- We keep our promises
- Surprised and delighted with the service
- You are safe and have peace of mind

Feel the difference

Aligned with our purpose, Virgin Care are giving all of our colleagues in Essex the opportunity to pledge how they will support people using services to feel the difference. The Feel the Difference fund is a £100,000 centrally held ring-fenced fund dedicated to supporting projects which improve the experience of people who use services.

Applications can be made by all colleagues in the country and submissions are considered by a monthly peer panel each with funding being made immediately after approval.

This year, the following projects received funding to help transform and improve services in Essex:

Service

Summary of improvement project

**School Nursing Team,
Basildon**
May 2017

The team successfully applied for funding to deliver the 'Why Try' programme which is a programme for children and young people to help improve their resilience, behaviour, school engagement and self-esteem. The team are already using the programme with positive results and the funding will allow them to continue to use the programme and also train other colleagues who may be able to use some of the techniques with their service users.

**Child Healthy Weight
clinics - Child and
Family Wellbeing
service, Essex**
December 2017

The School Nursing team in Essex were successful in their application to fund healthy weight clinics across the county. The proposed healthy weight clinics will be run in partnership with Barnardo's colleagues and aim to help families learn more about the benefits of balanced diets and regular exercise. Parents will have the opportunity to seek advice from dedicated health professionals who will be able to arrange support programmes for families. The healthy weight clinics will help in the fight against childhood obesity in Essex as well as promote the good work the child and family can provide to the community.

**Universal cookery
clubs that focus
on basic nutritious
ingredients – Mid Essex
Quadrant**
February 2018

Families surviving on small food budgets as well as those who often source food from food banks and reduced items in supermarkets may not have the skills or confidence to utilise basic ingredients wisely. The team requested funding to run cookery sessions to demonstrate and educate families, as well as producing menus and recipe cards that can be taken away or accessed online.

**Florence Nightingale
Child Development
Centre Harlow –
Community Paediatrics**

Working in partnership with Lexacom, the Florence Nightingale Child Development Centre in Harlow are now benefiting from Lexacom's digital dictation and speech recognition systems, allowing for speedier and more accurate referrals and documentation.

Each service has also set a 'feel the difference goal' to improve one further aspect of service. In the past year, 100% of services had an audited, valid 'feel the difference goal' in place.

Customer Experience Team

Since 2014-15, Virgin Care has operated a central Customer Experience Team working with people who use services across England and handling all queries, concerns and formal complaints on behalf of all services across England. This year, Virgin Care improved and refreshed its complaints policy to enhance the experience of those people who wish to complain and seek an early resolution.

As well as providing training for anyone across the organisation who meets with people who use services, the team are responsible for providing insight into complaints and themes to operational managers, regional managers, and the executive team and to Board on a monthly basis.

Across the organisation, everyone with internet access is able to see reporting on the number of complaints, their current status, and the themes they cover – as well as viewing whether an action plan is yet to be completed or where improvements have got to. This year, Virgin Care improved its Tableau reporting of complaints allowing colleagues to see the stages of the journey (according to the BETTER Map) where the improvement could be made. In 2017-2018 Virgin care received 9 formal complaints for services within East Staffordshire. All complaints are investigated and action plans put in place. The complaints received were across a range of clinical services, which have not identified any emerging themes.

The organisations approach is to encourage people who use services and colleagues to attempt to resolve complaints 'on the spot' but offer our 'Here to help' service as service-independent option to resolve concerns and as a signposting service for the fastest and most appropriate resolution of issues.

The Customer Experience Team also regularly manages face to face meetings between complainants and operational managers and ensures that complaints are handled in line with the NHS constitution.

Improvements in 2018-19

During the coming year, Virgin Care will:

- Develop learning and development to support colleagues to be their best selves and provide the best customer service
- Focus on action plans following complaints and better understand the complaints and lessons learned across the whole of the organisation
- Improve the exportable versions of reports in Tableau, allowing easier 'offline' access to complaint reporting
- Map You Said, We Did to the BETTER map allowing these to feed more efficiently into transformation plans

NHS Friends and Family Test

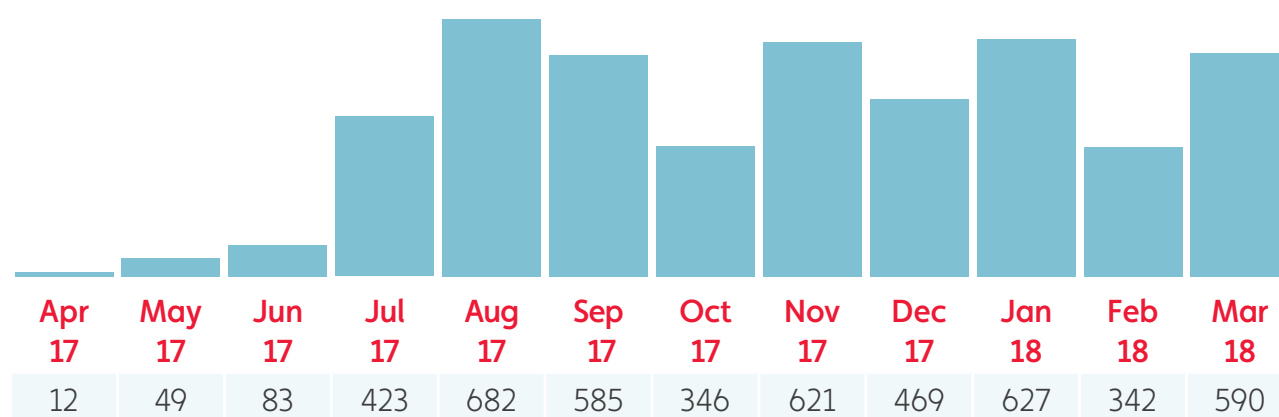
The Friends and Family Test (FFT) is mandated by NHS England for all providers of NHS services and is now fully in place across all services. Everyone who uses Virgin Care's services has the opportunity to provide anonymous feedback on their experience and a chance to provide comments on how their experience could've been improved.

Comments are collected from people who use services using paper and SMS systems provided by Optimum Healthcare and using the Meridian Technology Platform. This system allows us to capture comments by SMS, online using a feedback survey or via paper in one of our services but also allows us to introduce tablet computers or kiosks and other collection methods where this best suits a service or will enable more people who use services to give us their comments.

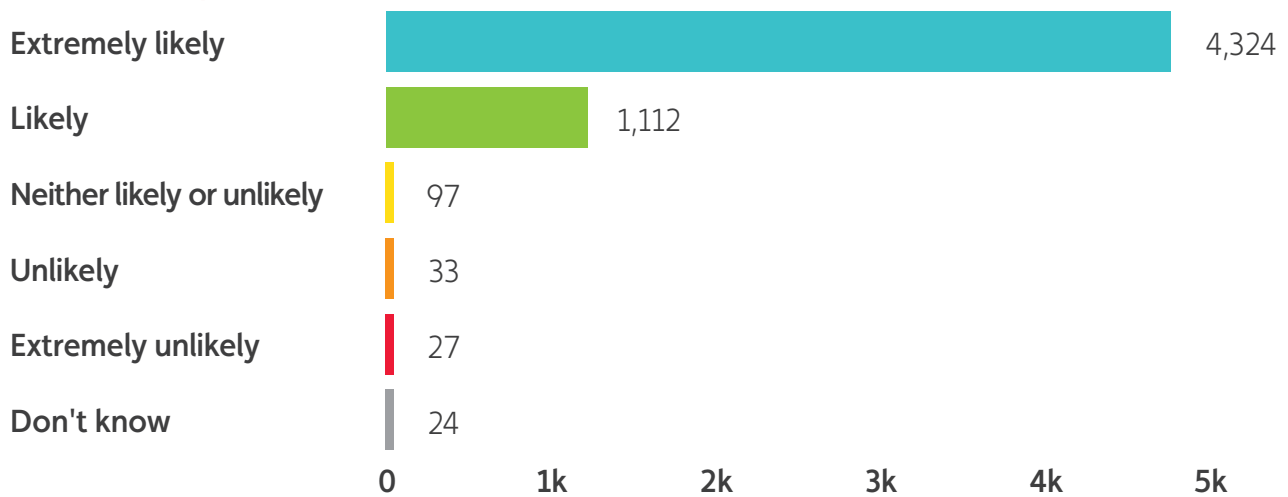
Virgin Care's teams can access information about their service using our in-house data reporting system powered by Tableau. This powerful reporting tool allows actionable insights for managers. Virgin Care encourages staff to discuss their FFT and other feedback, accessible through Tableau, at team meetings and to make actionable change in response to the feedback provided by the people who use services.

FFT statistics for Essex C&FWS

Questionnaires completed



Feedback response to main question



Submission of FFT data to NHS England

Our Information Management Team submits FFT response data to NHS England each month, and services receive a copy of the data submitted by people who use services at this point. This is important not only to see how their services will be reflected when published on the NHS England website, but is also a chance to pick up key themes from the feedback that can be used to identify changes that can be introduced to improve the experience of people who use services.

Part three

Indicators of quality performance

Prescribed information

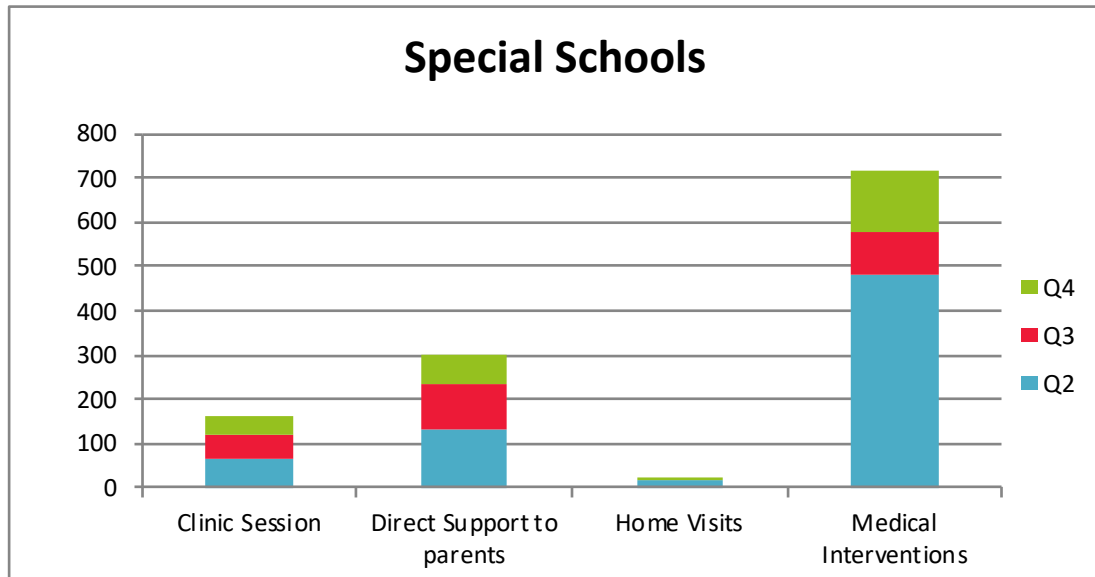
12	(a) The value and banding of the summary hospital-level mortality indicator ("SHMI") for the trust for the reporting period (b) The percentage of patient deaths with palliative care coded at either diagnosis or specialty level for the trust for the reporting period.	Not applicable
13	The percentage of patients on Care Programme Approach who were followed up within 7 days after discharge from psychiatric in-patient care during the reporting period	
14	The percentage of Category A telephone calls (Red 1 and Red 2 calls) resulting in an emergency response by the trust at the scene of the emergency within 8 minutes of receipt of that call during the reporting period.	Not applicable
14.1	The percentage of Category A telephone calls resulting in an ambulance response by the trust at the scene of the emergency within 19 minutes of receipt of that call during the reporting period.	Not applicable
15	The percentage of patients with a pre-existing diagnosis of suspected ST elevation myocardial infarction who received an appropriate care bundle from the trust during the reporting period.	Not applicable
16	The percentage of patients with suspected stroke assessed face to face who received an appropriate care bundle from the trust during the reporting period.	Not applicable
17	The percentage of admissions to acute wards for which the Crisis Resolution Home Treatment Team acted as a gatekeeper during the reporting period.	Not applicable
18	The trust's patient reported outcome measures scores for: (i) groin hernia surgery, (ii) varicose vein surgery, (iii) hip replacement surgery, and (iv) knee replacement surgery, during the reporting period.	Not applicable

19	The percentage of patients aged: (i) 0 to 14; and (ii) 15 or over, readmitted to a hospital which forms part of the trust within 28 days of being discharged from a hospital which forms part of the trust during the reporting period.	Not applicable
20	The trust's responsiveness to the personal needs of its patients during the reporting period.	Not applicable
21	The percentage of staff employed by, or under contract to, the trust during the reporting period who would recommend the trust as a provider of care to their family or friends.	Not applicable
21.1	This indicator is not a statutory requirement. The trust's score from a single question survey which asks patients whether they would recommend the NHS service they have received to friends and family who need similar treatment or care.	Not applicable
22	The trust's "Patient experience of community mental health services" indicator score with regard to a patient's experience of contact with a health or social care worker during the reporting period.	Not applicable
23	The percentage of patients who were admitted to hospital and who were risk assessed for venous thromboembolism during the reporting period.	Not applicable
24	The rate per 100,000 bed days of cases of C. Difficile infection reported within the trust amongst patients aged 2 or over during the reporting period.	Not applicable
25	The number and, where available, rate of patient safety incidents reported within the trust during the reporting period, and the number and percentage of such patient safety incidents that resulted in severe harm or death.	

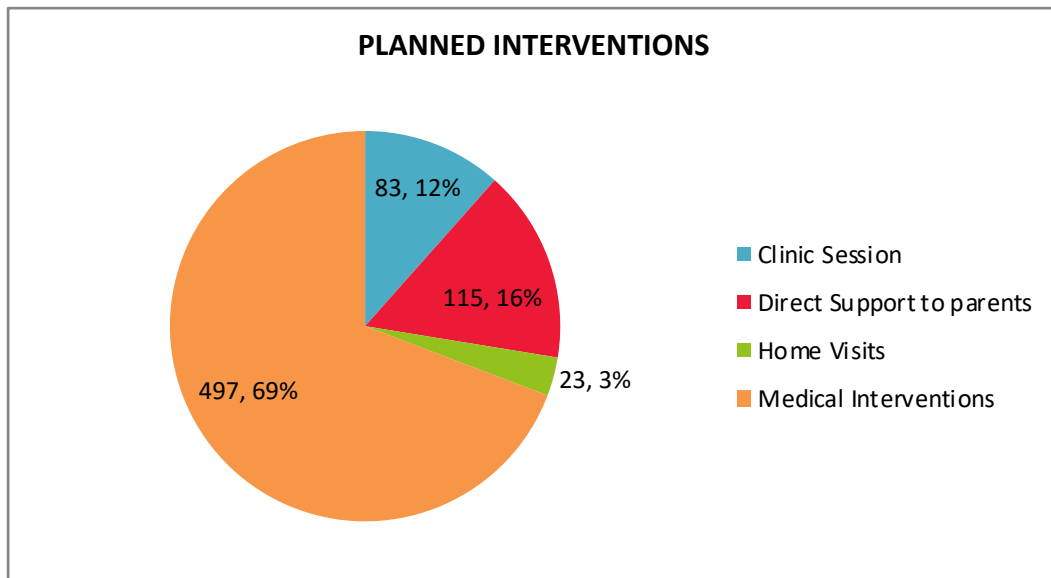
Virgin Care works with its commissioners and other local providers to support the delivery of CQUIN targets. Essex C&FWS did not have any CQUINs for the first year of the contract.

Community Services Performance Report

1. West Special Schools Tables (a)

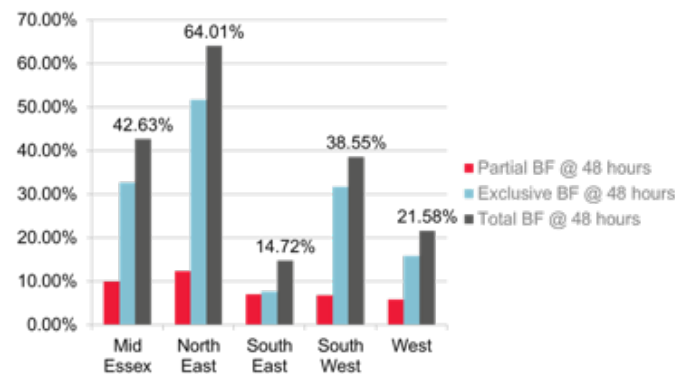


West Special Schools Planned Interventions Table (b)

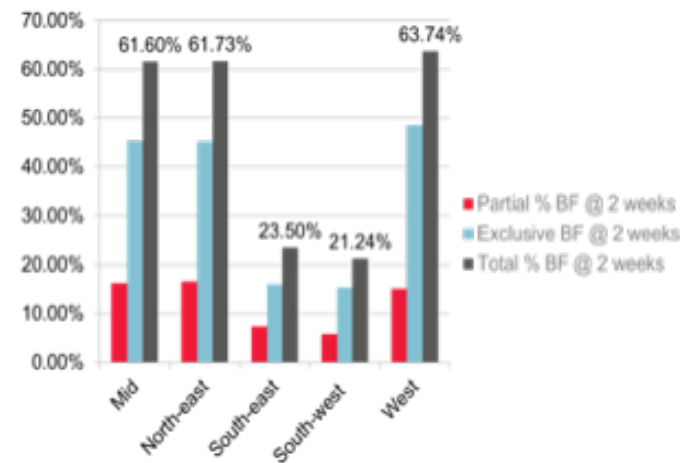


2. Infant Feeding

Quadrant-by-quadrant infant feeding at 48 hours of birth (a)

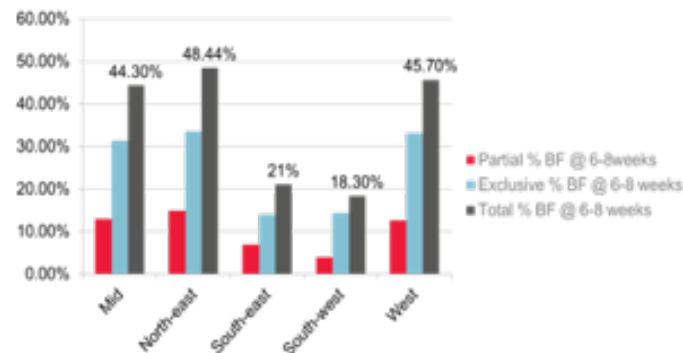


Quadrant-by-quadrant infant feeding at 2 weeks post birth data Table (b)



Quadrant-by-quadrant infant feeding at 6-8 weeks post birth data Table (c)

2. Infant Feeding



3 Safeguarding and Looked After Children

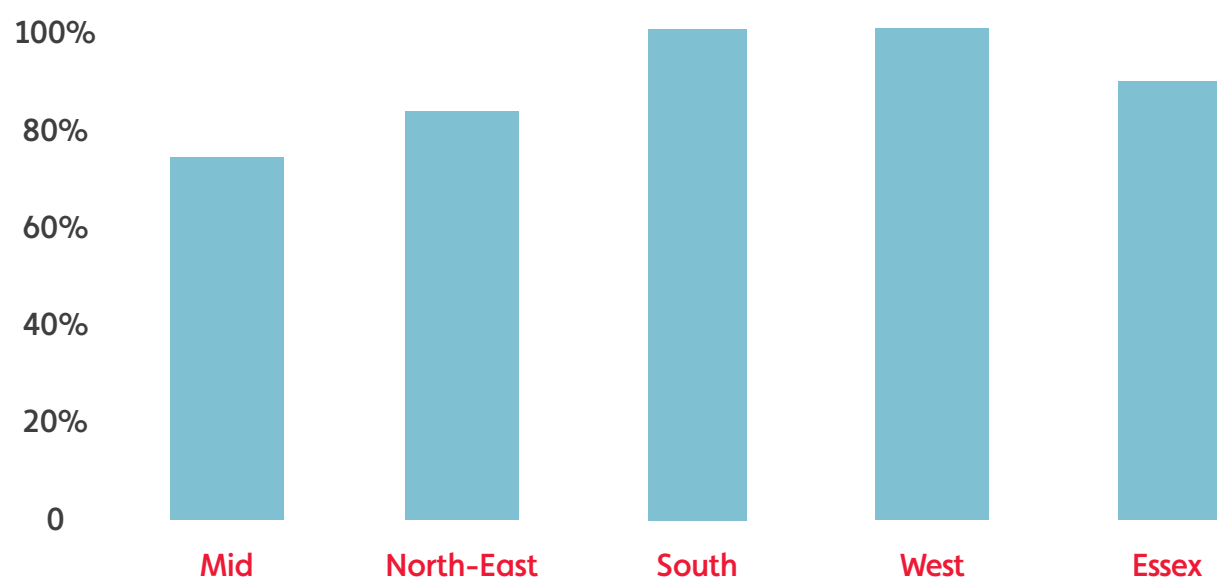
No. and percentage of Section 17 and 47 requests that are responded to within 2 working days and 1 working day respectively by the Essex C&FWS

KPI 2.12



Percentage of Looked After Children (LAC) aged 0-5yrs who receive their six-monthly Review Healthcare Assessment

KPI 2.19



Medicines Optimisation Statement

Quality Account: national statement for medicines optimisation (2017-18)

Within Virgin Care we have a medicines optimisation strategy. Launched in 2017, this is a five-year forward view to improve medicines optimisation across six principles. Principle 3 of this strategy is to have robust systems and processes in place for the safe handling and use of medicines throughout Virgin Care. One implementation tool is the annual comprehensive organisation-wide 'medicines safety audit', completed by all services down to delivery level (e.g. ward, clinic or department).

The audit has over 200 questions and collected data is used to develop individualised action plans for each respondent, and identify key organisation-level and regional-level improvement plans.

In 2017-18 the audit achieved transparency in medicines safety metrics across established services through the development of a real-time on-line dashboard. This enabled identification of, and direct action on, the top areas for improvement at service, regional and national level. This will be rolled out to all services during 2018. Subsequent internal benchmarking between services and regions has driven the sharing of best practice and resources.

This audit is updated each year to include user feedback and we are working with our IT development team to convert it from web-based to an app for 2018-19.

Comments by co-ordinating Clinical Commissioning Group

The draft quality account was submitted to the West Essex Clinical Commissioning Group and Essex County Council 29th May 2018 and their comments were used to improve the document prior to publication.

Below is the feedback from Essex County Council

"Commissioners have worked closely with Virgin Care and Barnardo's over the past eighteen months to develop a shared expectation of the changes and improvements we wanted to see for children and family outcomes, beyond historically commissioned and mandated activity. I am pleased with the considerable progress to date on developing integrated teams, infrastructure, governance and assurance which put the service on a firm footing with which to approach challenging new outcomes going forward."

Adrian Coggins

Head of Public Health and Wellbeing Commissioning
Essex County Council

Appendices

1: Glossary of terms

Care Quality Commission

Also known as CQC

Independent regulator of health and social care in England.

Replaced the Healthcare Commission, Mental Health Act Commission and the Commission for Social Care Inspection in April 2009.

Clinical audit

Quality improvement tool, comparing current care with evidence-based practice to identify areas with potential to be improved.

Clinical Commissioning Group

Local organisations which seek and buy healthcare on behalf of local populations, led by GPs.

Commissioning for Quality and innovation

Also known as CQUIN

System to make a proportion of healthcare providers' income conditional on demonstrating improvements in quality and innovation in specified areas of care.

Community Services

Health services provided in the community (not in an acute hospital)

Includes health visiting, school nursing, district nursing, special dental services and others

CP-IS

Child Protection Information System

A computerised way of sharing data about child protection securely between organisations.

Did Not Attend

Also known as DNA

An appointment which is not attended without prior warning by a patient

Healthcare

Care relating to physical or mental health

Healthcare Quality Improvement Partnership

Also known as HQIP

Organisation responsible for enhancing the effectiveness of clinical audits, and engaging clinicians in reflective practice

National Institute for Health and Clinical Excellence

Independent organisation responsible for providing national guidance on promoting good health and preventing and treating ill health

Net Promoter Score

Also known as NPS

A customer loyalty metric often used for customer experience. Records a score for each respondent between 0 and 10, and returns an overall score in the range -100 to +100.

NHS Outcomes Framework

Document setting the outcomes and indicators used to hold providers of healthcare to account, providing financial planning and business rules to support the delivery of NHS priorities.

Patient-reported outcome measures

Self-reporting by patients on outcomes following treatment and satisfaction with treatment received

Here to help/PALS

Informal complaint, concern and query service which gives advice and helps patients with problems relating to the access to healthcare services

You Said, We did

Feedback system used for making changes to services directly in relation to feedback from patients.

Emotion Gym

Workshop intended to appeal predominantly to males, run anonymously and without registration by First Steps in Surrey

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