

Quality Account for the year 2014 – 2015



Swindon Borough Council

Children, Families and Community Health Service

Contents

Part 1.....	3
▪ Statement from the Board Director, Commissioning DCS/DASS, Swindon Borough Council	3
▪ Statement of Accuracy.....	4
Part 2.....	5
▪ What is a Quality Account?.....	5
▪ About Swindon Borough Council Community Health Services for Children and Young People.....	5
Part 3.....	12
▪ Review of Quality of our services in 2013/14.....	12
▪ Assurance Process.....	15
▪ Care Quality Commission Statement	15

Part 1

Statement from the Board Director, Commissioning DCS/DASS

I am delighted to present this Quality Account for Swindon Borough Council community health services for children and young people. We are committed to providing services of a high quality and this report allows us to tell you about how we are doing.

The purpose of our quality account is to describe the community health services we provide, from Universal, touching the lives of all children through Early Help, touching the lives of many, to Specialist, touching the lives of a small number.

In Swindon we have an enviable record of whole system working, with high levels of well-embedded, integrated and co-located services. The reality is that children and their families experience life as whole people in whole systems and we have tried to ensure this is reflected in the way we work together with partners to deliver services.

We want to be sure that what children, young people and families say about what matters to them is considered when we are planning and developing our services. All of the community health services we deliver have collected feedback and evidence is presented here on how examples have influenced changes and developments.

The focus of our work as managers in supporting practitioners is to ensure that quality, safety and performance standards are adhered to everywhere.

I hope that you enjoy finding out about the Health Services that we deliver for children and young people here at Swindon Borough Council.



**John Gilbert
Board Director Commissioning
DCS/DASS**

Statement of Accuracy

The statement of the Director's responsibilities in respect of the Quality Account.

The Directors of Swindon Borough Council are required under the Health Act 2009, National Health Service (Quality Accounts) Regulations 2012 and the National Health Service (Quality Accounts) Amendment Regulation 2011 to prepare a Quality Account for each financial year.

The Department of Health has issued guidance on the form and content of these annual Quality Accounts that incorporates the legal requirements above.

In preparing the Quality Account, Directors are required to take steps to satisfy themselves that:

- The Quality Account presents a balanced picture of our Organisation's performance for the period covered by the account;
- The performance information reported in the account is accurate and reliable;
- There are proper internal systems that are regularly reviewed and updated to ensure effective control of the collection and reporting of these performance measures;
- The data underpinning the performance measures reported in the Account is robust and reliable and conforms to the specified quality standards and prescribed national definitions;
- The data is subject to appropriate scrutiny and review both internally and externally; and
- That this Quality Account has been prepared in accordance with the Department of Health Guidance.

The Directors confirm to the best of their knowledge and belief that they have complied with the above requirements in preparing the Quality Account.

By order of the Swindon Borough Council Corporate Board.



Gavin Jones
Chief Executive

Part 2

What is a Quality Account?

A Quality Account is an annual report that all providers of healthcare services must publish to inform the public about the quality of the services being provided. This requirement is set out in the Health Act 2009 and other supporting Regulations.

The purpose of the Quality Account is to enable:

- Service users and their carers to make well informed choices about which provider to go to for their healthcare services;
- The public to hold providers to account for the quality of the services that they deliver;
- The Organisations delivering healthcare services to report on the improvements made during the year and to set out their priorities for the following year;
- The people delivering services to look back on their achievements during the year in order to focus on the quality improvements for the following year.

About Swindon Borough Council Community Health Services for Children and Young People

Swindon Borough Council is the main provider of community health services for children and young people locally.

On the frontline, staff are organised into local teams enabling them to deliver services to the communities they work with more easily. There are four geographically based teams; a range of services for disabled children, young people and their families are based at the Salt Way centre in West Swindon. The practitioners and support staff who deliver health services for Children, young people and their families include:

- Health Visitors
- Nursery Nurses
- School Nurses
- Children's Community Nurses
- Family Partnership Nurses
- Safeguarding Lead Nurse
- Mental Health Nurses
- Care staff and support workers
- Occupational Therapists

- Physiotherapists
- Speech and Language Therapists
- Child Health Administrative Staff
- Business Support Staff

It is our ambition to ensure the best start in life for every child in Swindon. This is set out in our Health and Wellbeing Strategy at:

<http://www.swindon.gov.uk/healthandwellbeingstrategy>

All agencies in Swindon are committed to providing high quality services so that outcomes for all children, young people and families improve. The way we all work together is described in the following document:

<http://www.swindon.gov.uk/cd/foi/cd-foi-publicationscheme/Documents/ChildrenAndYoungPeoplesEarlySupportStrategy2013-16.pdf>

About Swindon

Swindon is a small unitary local authority, with one of the fastest growing populations in England, now at 212,000 people and forecast to increase by 10-15% in the next 10 years. There are approximately 47,000 children under the age of 18 and 49,952 under the age of 19. Children from Black and Minority Ethnic (BME) communities account for 16% of all school age children. 117 languages are spoken in Swindon schools. Swindon has the highest proportion of children with English as an additional language in the South West.

One Swindon is a single, coordinated plan for Swindon, offering a sharper focus on priorities behind which the Council and its partners will align their collective resources. The four priorities of One Swindon are:

- We can all benefit from a growing economy and a better town centre;
- I like where I live;
- Everyone is enjoying sports, leisure and cultural opportunities; and
- Living independently, protected from harm, leading healthy lives and making a positive contribution.

Our local priorities are informed by national strategies and by local needs assessments. Commissioners then formulate a specification for the services we deliver. We, as providers, are responsible for delivering services to meet the specified targets and to safe standards.

The main findings of the Swindon Joint Strategic Needs Assessment (JSNA) can be viewed at <http://www.swindon.gov.uk/jsna>

Those relating to children and young people are included in the Health & Wellbeing Strategy and the Early Support Strategy. On the whole Swindon is a successful town economically and socially and the social determinants of health (education, employment, good mental health, poverty, obesity, smoking and alcohol) are captured in our strategies.

Our priorities are also based on a detailed analysis of what is working well, what needs to be improved and what children, young people and their parents and carers say about our services. We work together with Commissioners and Public Health to identify specific needs in relation to diversity and vulnerability.

Regulation

Swindon Borough Council's Children, Families and Community Health Service is registered with the Care Quality Commission (CQC) to deliver a set of specific regulated activities. Registration is a legal requirement for all providers of health care services. We have to ensure we have up to date evidence to demonstrate that we comply with the standards that are set for the four categories of regulated activities we deliver. This work is on-going and requires all of our practitioners and managers to understand their roles and responsibilities to meet the standards.

CQC can inspect services at any time. They did not select us for any inspection visits during 2014 – 2015 but we continued with our work to develop our evidence base and to challenge ourselves using our quality assurance work and peer reviewing areas of the service against CQC standards.

Headlines of Achievement for 2014 - 2015

We delivered some notable health service achievements during this time:

- We have continued to be successful in recruiting the majority of eligible young parents to the Family Nurse Partnership programme and now have some compelling evidence of the effectiveness and impact of this intensive model of work.
- In Health Visiting we have continued to implement the National "Call to Action" programme. The challenge to meet the target of 53 Health Visitors by March 2015 was a tough one and we reported we had successfully recruited a total workforce of 50 qualified HV by the end of March. However, we were able to report our plans to increase this number to meet the target over the first few months of 2015 -2016. We have continued to invest in important workforce development for the Health Visiting teams and are confident that we are making great progress towards ensuring a consistent and good quality delivery of the

universal Healthy Child Programme across Swindon. Our performance has shown a steady increase and in particular we have been pleased with the success of a new information sharing pathway between Maternity and Health Visiting ensuring we can now more accurately and safely schedule universal antenatal visits as indicated in the Healthy Child Programme.

- We have successfully introduced “Baby Steps” as a targeted antenatal programme to prepare mums-to-be and their partners for being parents. This programme was piloted nationally by the NSPCC and Swindon was one of the pilot sites. The outcomes from their evaluations suggest this will be a very, effective programme. As part of the HV service specification we are commissioned to deliver courses preparing people for parenthood. The Baby Steps programme aims to help parents to get ready for their new life with their baby. We are rolling out the programme at a rate of 1 group per month and will be carefully evaluating its impact and what parents say about it. We deliver the programme in partnership with staff from the Children’s centres and the new Family Centres and Midwifery staff.
- We have introduced the integrated review for all 2 - 3 year old children. This is delivered by Health Visiting (HV) and staff in early years (EY) settings when children of this age attend. The staff have worked with parents to ensure they have clear information about both reviews and what to expect and how to share the information if they so wish. We have been asked to speak about this success in Swindon at a national seminar in 2015.
- Swindon achieved the highest uptake of the HPV immunisation in the country once again. This programme is delivered by our SBC School Nurses as part of the school based immunisation programme commissioned by NHS England.

These achievements demonstrate to you how the local community health services delivered by Swindon Borough Council are helping more children and young people to be healthy in our local communities.

All of the workforce are trained to use the Early Help Record and Plan in order to ensure that when they work with children and young people they look holistically at all of their unmet needs and address those they are able to and work with others to develop solutions in partnership with families. We have continued to train and develop their knowledge and skills in this area. Ofsted in their inspection of the Local Authority in March 2014 commented on the good evidence they saw of how well this was being used and the positive impact it had for children, young people and their families.

Staff in our workforce have good access to learning and development opportunities to enable them to improve their knowledge, skills and clinical

effectiveness. This is linked to their personal development plans and the outcomes of their annual performance review meetings.

Supervision is a key process in ensuring that services are safely and effectively delivered. All our staff participate in regular management and professional practice supervision and they have access to extra support when they are involved with working with children and young people subject to child protection procedures. We know that staff who are encouraged and supported to think about their actions regularly and systematically and compare what they are doing against published evidence are more likely to be effective in their work.

Learning from Feedback

We value learning from the experiences of our users and we place a high priority on local resolution of complaints in a manner that is fair to all those involved.

We work hard to show users exactly how their comments have helped us to make improvements and consider this an important part of the whole feedback process.

One example of our work based on user feedback has been in Speech and Language Therapy we have implemented a means of gathering feedback using a system called “FOCUS outcome measures”. This work showed evidence of statistically significant improvement based on direct parent report of the progress their children had made. This came about after feedback from parents about wanting to contribute to the process of measuring their children’s progress.

National and Local Audit Programmes

A national clinical audit is either a project funded by the Healthcare Quality Improvement Partnership who manage the National Clinical Audit and Patients Outcome Programme (NCAPOP) or separately funded.

The purpose of national clinical audits is to engage healthcare professionals in the systematic evaluation of their clinical practice against standards and to support and encourage improvement in the quality of treatment and care.

In 2014- 2015 there were no national audits relating to children’s community health services but we did complete a number of local audits.

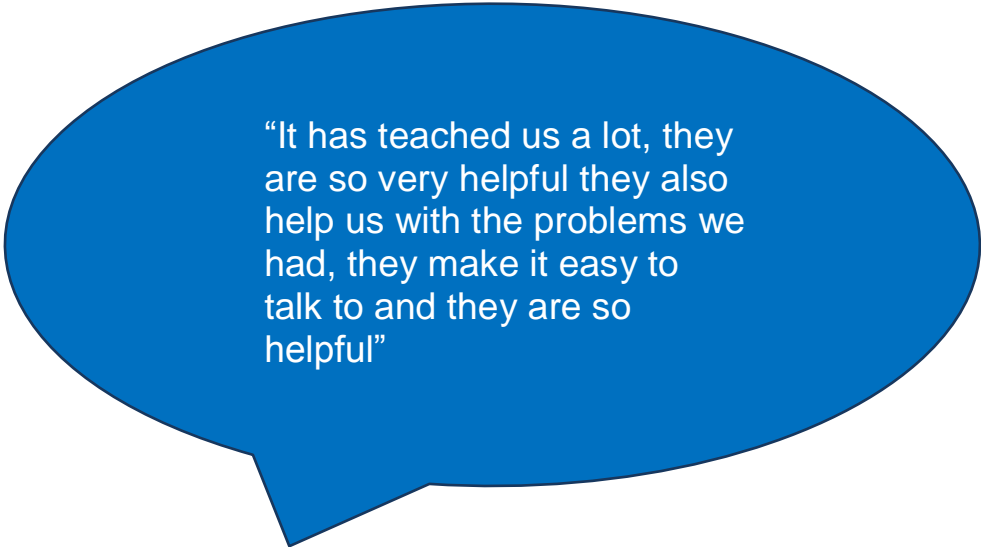
For example, we completed an audit of a sample of 30 current records of the health assessments and health care plans of looked after children against current record keeping standards to establish a baseline to measure the impact of the rapid improvement work needed to bring practice in this area up to a more acceptable standard. Another sample will be re-audited in 2015 – 2016 to ensure there is evidence of improvement.

Experience of our Services

There is a plan for each practitioner group or service area to ensure that they regularly seek the views of the people experiencing their services. All of the teams have been piloting ways of doing this work for some time and they share the learning at regular opportunities with each other to make the best use of their experiences.

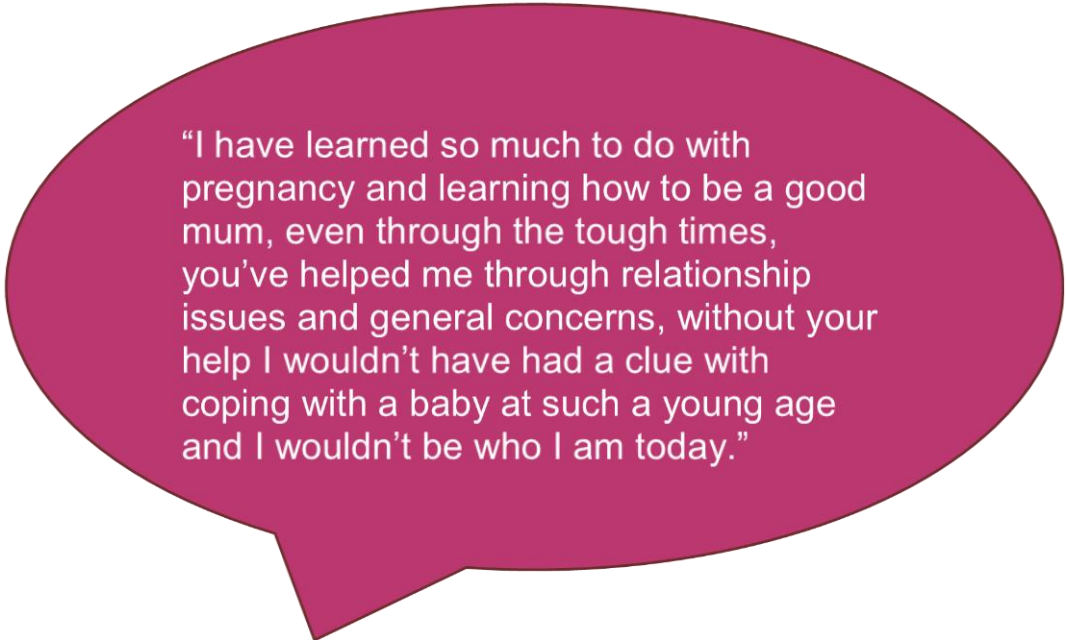
During 2014-2015 we sought feedback from our users on many occasions.

Here are some of the comments that we received:




“It has taught us a lot, they are so very helpful they also help us with the problems we had, they make it easy to talk to and they are so helpful”

❖ From parents working with our Family Partnership Nurses

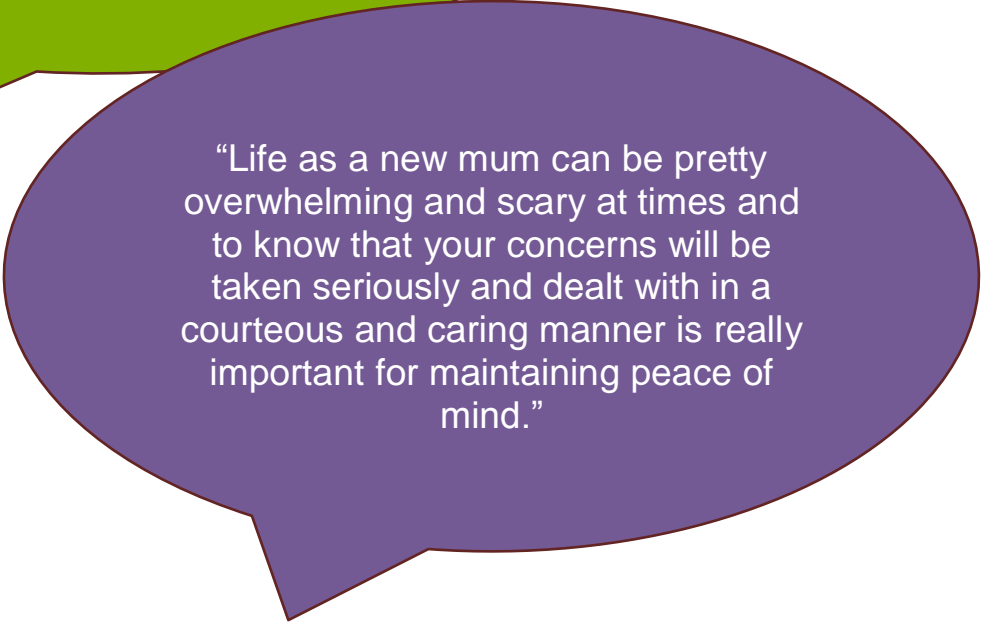


“I have learned so much to do with pregnancy and learning how to be a good mum, even through the tough times, you’ve helped me through relationship issues and general concerns, without your help I wouldn’t have had a clue with coping with a baby at such a young age and I wouldn’t be who I am today.”

❖ **From parents to Health Visitors**

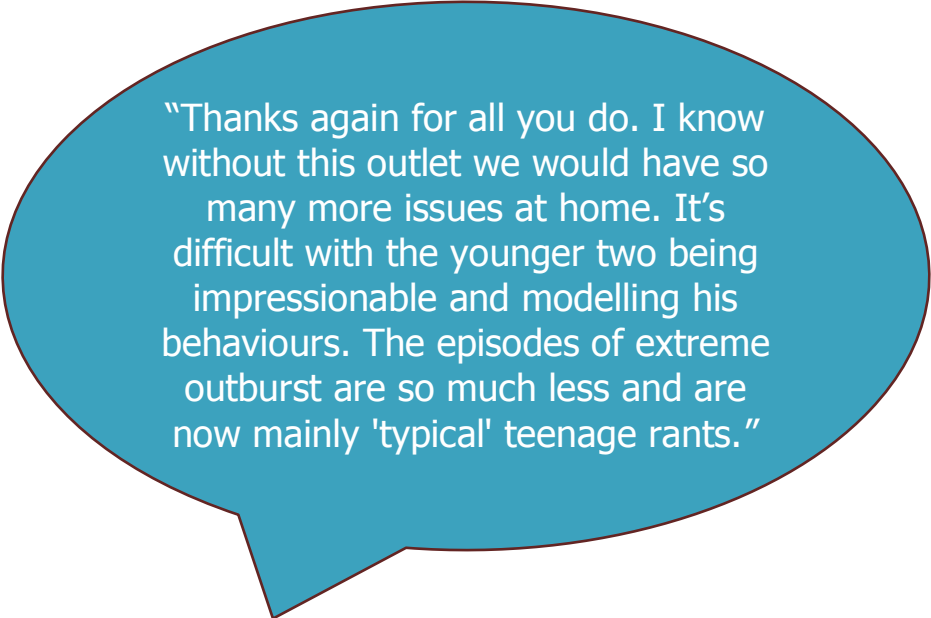


"Today, I made a call about a few minor concerns and after leaving the initial message, I received a return call within a few hours. I spoke with x who was very easy to talk to and managed my call efficiently and with a great deal of care and encouragement."



"Life as a new mum can be pretty overwhelming and scary at times and to know that your concerns will be taken seriously and dealt with in a courteous and caring manner is really important for maintaining peace of mind."

❖ **From parents working with our targeted mental health service**



"Thanks again for all you do. I know without this outlet we would have so many more issues at home. It's difficult with the younger two being impressionable and modelling his behaviours. The episodes of extreme outburst are so much less and are now mainly 'typical' teenage rants."

Part 3

Review of Quality of our services in 2014 /2015

It helps us to think about three key areas when we analyse the quality of our services and how we can improve them:

- Safety
- Experience of service users
- Effectiveness

Safety

Making sure that all children and young people and their families or carers who come into contact with our services are safe is a key responsibility for all of our staff and managers. We have a range of systems and processes to assess potential risks and to manage incidents should they occur.

Encouraging everyone to report risks and incidents is a priority and we are open and transparent about these events to ensure that we learn from them. We use a system to gather the information so as to maximise our understanding of what is going on in all of the services we deliver. Enquiring into incidents in a systematic way to ensure we understand the causes helps us to learn what went wrong and how we can avoid a similar thing happening again. Sharing the learning from this process is the key to future prevention. We had no serious incidents reported in our health services in 14/15.

Safeguarding is a key responsibility for all staff delivering services to children and young people. We ensure that all our staff regularly attend training delivered by the Local Safeguarding Children's Board and receive supervision to monitor their adherence to guidelines and procedures. We audited the training records of staff and their supervision records during the year to ensure compliance with standards and that it is of good quality.

We continued to make sure that all our staff accessed the appropriate level of child protection training. Supervision and appraisal sessions are opportunities to check on this and to check that learning is impacting on their practice. The Local Safeguarding Children's board sub-group on quality assurance has an annual multi-agency quality assurance programme that includes all of our community health staff. In 2014 /15 the audits focused on the effectiveness of work with teenagers and the quality of joint agency plans to ensure children are safe and achieve good outcomes whilst part of statutory procedures.

We have an annual infection control and prevention plan to ensure safety and to maintain continual improvement. There are regular audits of processes that

are known to be significant in minimising risk to our service users. The results of these are reviewed and any actions identified to make improvements are tracked and reviewed at the health practice governance meetings. For example, we regularly check they are adhering to the correct procedures when in busy baby clinics or out on home visits.

Safe practice is also about making sure processes are sound and complied with and the Senior Managers lead an annual quality assurance plan that includes audit case work and visits to the front line staff to observe their work.

There are a number of national systems to ensure safety that we work with including compliance with the Central Alert System (CAS). This is to enable us to respond to national alerts and safety notices. Swindon Borough Council's Children's community health services responded to all the relevant alert notifications received from the central CAS system within the prescribed time scales during the year 2014-2015.

In 14-15 we have addressed the following priorities related to safer practice cross the whole workforce:

- To continue to implement regular audits of our work for good use of infection control standards and implement the learning from these
- To improve the recording of practice and to move closer to full electronic recording of case management for an increased number of practitioners
- To develop further the confidence and competence of our frontline staff in understanding and using the performance data to help improve their services

Experience

We want children and young people to benefit from their involvement with our services. We understand that how we communicate with them and their families is critical to building safe and effective relationships with them. When we do this well we empower them to feel confident and to make informed choices about their health. We also know that listening to feedback is how we learn most about the services we deliver.

We have implemented some changes based on feedback in the ways we deliver services:

- We have once again reviewed the information on our consent forms and in our privacy notice to ensure they are clear and easy to understand

- We have developed a new Health Visitor wallet given to all parents at their first meeting with their Health Visitor. This contains a series of 6 cards describing the 6 key contacts within the universal Healthy Child Programme and the range of more targeted services available. It also has important contact information. We think this has been particularly useful as HV services have changed quite a lot in the last few years and we wanted to update our new service users

In 2015-2016 we will continue to gather feedback and to make sure we use the information to improve and develop services. We are participating in a national project in June 2015 to test out a specific tool to gather feedback from users of our Health Visiting services.

Effectiveness

The action plans that are devised in each practitioner group as they review their evidence against the standards set by CQC are the foundation of our work to improve effectiveness. The information we analyse from the incidents that occur locally and any national alerts is fed into this process too so that we keep drawing together the links between the different strands of work in order to co-ordinate our approaches to improvement.

The professional leads in each practitioner group lead this work in their teams in partnership with others to ensure that we bring in new evidence based interventions and approaches in line with the growing evidence base in each area of practice. Our multi-disciplinary structures means that there are plenty of opportunities for shared learning approaches and we think that this is very, beneficial both for staff and for all of our services.

The National Institute for Health and Clinical Effectiveness (NICE) guidance issues guidance and directions for interventions and practice following the review of the evidence available.

We continue to follow up relevant NICE guidance through our local Governance process with leads working to provide assurance that our work is in line with the latest guidance. For example in 2013/14 we reviewed best practice guidance in the areas of:

- Feverish illness in children under 5
- Hepatitis B
- Bi-polar disorders in children and young people
- Drug allergies in children and young people
- Perinatal mental health

The new guidance is carefully reviewed and all of our practice, information and advice are checked to ensure we are delivering the latest evidence based practice.

We had identified with CQC and Ofsted in their local Inspections early in 2014 the work needed to improve health outcomes for children who are looked after. The Designated nurse for looked after children has led this work. There has been excellent progress in both the process improvements and in the quality of the health assessments, reviews and plans. The audit planned for early 15- 16 will we hope give us tangible evidence of the impact of these improvements.

In 2014 – 15 we continued our programme of work to develop much more detailed performance frameworks for staff and managers and to ensure that outcomes are regularly reviewed by individual practitioners and by their managers. We want to get to a point where all our practitioners can see their role in ownership of performance both in terms of the amount they do and the quality of the activity. This will also help in our work to develop further the evidence for the impact of specific interventions.

Assurance Process

Performance is reported, monitored and reviewed at monthly quality and performance group meetings and then on through the Swindon Children's Trust Board, the Joint Commissioning Board and the Swindon Local Safeguarding Children's Board.

Each year, the Cabinet Member for Children's Services and the Cabinet Member for Health and Adult Social Care takes part in a challenging Cabinet Scrutiny Question and Answer session on their area of responsibility.

The Swindon Children's Trust Board is well established with clear lines of accountability across the Trust and the Local Safeguarding Children's Board. These include links to the Clinical Commissioning Group Board, and to the Health and Wellbeing Board.

The Local Safeguarding Children Board (LSCB) monitors the quality of safeguarding, provides clear direction on safeguarding matters across all partners and provides assurance to the Swindon Children's Trust Board. The LSCB has an independent Chair.

A Swindon Protocol has been established between the Safeguarding Boards and the Health and Wellbeing Board at:

<http://ww5.swindon.gov.uk/moderngov/documents/s63295/Annual%20Report%202012-13%20-%20Appendix%202.pdf>

There are anticipated changes to some of these processes in 2015-2016.

Care Quality Commission Statement

Current registration status for SBC children's health service is "registered no current conditions on registration". This means that CQC has not taken any enforcement action against SBC during 2014 - 2015 and we have not participated in any special reviews or investigations by CQC during the reporting time of this account.

We know that in 2015 – 2016 the new CQC framework will be implemented and this means we will be issued with a rating by CQC when they inspect the regulated services we deliver.

We will publish this online and in our service delivery locations as per the guidance from CQC.

www.swindon.gov.uk