vita health group

# Quality Account 2019/20

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### Part One: Statement from our CEO

n behalf of our Executive Board and our entire Vita Health Group workforce, I am pleased to introduce you to our first Quality Account covering both musculoskeletal (MSK) physiotherapy and mental health services that we provide on behalf of the NHS. Our first Quality Account specifically focusses on the services we have delivered over the last twelve months.

This document provides us with the opportunity to describe to the public and our stakeholders, in a transparent, open and honest way, the progress we are making towards improving the quality of our services. It allows us to demonstrate how we measure and gain assurance about the quality of the services we are providing on behalf of the NHS.

It also allows us to present the priorities we will work hard to meet over the coming twelve months, to achieve continuous improvement in the quality of the care we deliver. We have chosen these priorities by reflecting on developments during the reporting period and looking ahead to next year, and beyond, in line with our three-year quality improvement plan. We are passionate about what we do and continuously challenge ourselves to identify innovative ways to improve patient safety, clinical effectiveness and the patient experience, that will benefit patients, staff and other key stakeholders year on year.

The last twelve months have been a period of significant change, during which time we have successfully launched the new Vita Health Group brand. During the year we have also experienced a series of changes in our Senior Leadership Team, including the restructure of our Executive Management Team, to enhance our existing NHS services and support future growth.

We are proud of what we have achieved over the last twelve months but are also very much aware of the areas where we have further challenges to overcome. This includes pressures within some of our Improving Access to Psychological Therapies (IAPT) services, particularly in relation to recovery, access and waiting times. We are working in close collaboration with local Clinical Commissioning Groups to improve in these areas and will continue to do so.

The most significant challenge we need to overcome is the current COVID-19 (Coronavirus) crisis, which continues to have an unprecedented impact not only on our business, but on businesses and individuals nationally and internationally. We are in the midst of a very unsettling time and we empathise and sympathise with everyone around the globe experiencing this public health pandemic. We are deeply saddened by the loss of so many lives and wish to extend our heartfelt condolences to those who have lost friends, family and colleagues.

Unfortunately, almost a quarter of our workforce were furloughed as a result of this crisis, with the biggest impact on our MSK physiotherapy services.



**Derrick Farrell - CEO - Vita Health Group** 

Like many other healthcare providers, we have been united in our response and quickly adapted how we deliver some of our services using alternative digitally enabled technology. We are following the government and public health guidance and monitoring the evolving COVID-19 situation daily. We support the government campaign to "stay alert, control the virus, and in doing so, save lives."

I would like to take this opportunity to thank each and every member of staff for how they have adapted during these unprecedented times. I would also like to express my thanks for their continued effort, dedication and hard work over the last twelve months to consistently deliver the highest standards of care and drive quality improvement so together we make a difference, and make people better.

This Quality Account meets the requirements set out by the Health and Social Care Act 2012 and the Care Quality Commission (CQC). It reports on the continuous improvement of the quality of our services during 2019/20 and key areas of accountability, including safety, clinical effectiveness of treatment, clinical quality and patient experience.

This Quality Account has been endorsed by our Executive Management Team; we confirm that the content reflects an accurate view of the quality of our services. We believe to the best of our knowledge that the information contained within this document is accurate.

John Su

Derrick Farrell

### Part One: About Vita Health Group



ita Health Group is a leading UK healthcare provider, with over 30-years' experience of delivering holistic, patient-centred physical and mental health solutions to employers, insurers, the NHS and private patients.

Vita Health Group comprises three leading UK healthcare providers, each with their own proven track-record and reputation within the physical and mental healthcare industry.

Vita Health Group Limited (previously RehabWorks) was established in 1987 and has become a leading provider of physical and mental health programmes across the UK, providing physical and mental health services to corporate clients specialising in utilities, logistics and manufacturing, alongside a range of general and private medical insurers.

Vita Health Wellness Limited (previously RightCore Care / Workplace Wellness) was established in 1989 and specialises in understanding and assisting emotional and mental health in the workplace. The broad scope of their services has seen this brand work with some of the UK's biggest corporate clients supplying personal, immediate support to thousands of people across the UK. Vita Health Solutions Limited (previously Physiotherapy Solutions / Crystal Palace Physio Group) was established in 1985 and focusses on providing integrated physical and mental health solutions to the NHS, helping people to live full and happy lives.

Our united brand, Vita Health Group, combines the strengths and expertise of each of these individual entities, with an overall objective to become the UK's leading provider of physical and mental healthcare solutions.

Vita Health Group celebrates life. Improving lives physically and mentally drives everything we do.

### Part One: Our Executive Management Team



### **Derrick Farrell - CEO**

Derrick is our CEO. He is an accountant by profession and has held senior positions in the corporate health sector for the last twenty years. Derrick has successfully held various executive positions, managing senior teams and cross function groups.

He is well known for his ability to drive positive customer-focussed business change through a commitment to investment in innovation and continuous improvement, and building dynamic and effective teams, which make a difference.



### **Stuart Paterson - Deputy CEO**

Stuart is our Deputy CEO and Market Director for Private Services, and is a Board member. He is a qualified Chartered Physiotherapist with over thirty years' experience, the last twenty years spent in leadership and entrepreneurial positions. He is passionate about driving forwards high-quality care and is an elected Council member of the Chartered Society of Physiotherapy. In his healthcare leadership positions, Stuart has collected awards for Clinical Excellence (Best Service in the UK as awarded by the CSP), Staff Engagement (Sunday Times Top 100 Companies to Work for) and Customer Service (London Business Customer Service Award).



### **Caroline Farren-Hines - HR Director**

Caroline is our HR Director and is a Board member. She has nineteen years' experience in HR and business, and is a member of the CIPD. Caroline has a proven track record in leading the HR function and driving change, whilst contributing to the strategic direction of our organisation. Having worked across various sectors, including IT, media and telecoms, she takes a holistic view of HR and can successfully deliver diverse projects across the business that achieve continuous improvement. Her real passion is employee engagement and demonstrably improving engagement and communication. The impact of this across our diverse multi-site business has been a key cornerstone to improving business performance.



### **Mat Fahey - Support Services Director**

Mat is our Support Services Director and is a Board member. He has over twenty years' experience in business and operational services, ensuring optimal delivery. Our Support Services Department covers IT, Administration and Call Centre, through to Governance, Soft Facilities and Estates. Whilst continuing to drive cost saving initiatives across the business, Mat is also a key member of our Governance, Quality and Risk Committee, which ratifies our quality intent ensuring that standards such as ISO 9001 and 27001 are re-accredited and that we continue to uphold CQC registration.

### **Part One: Our Executive Management Team**



### **Andy Clark - Sales Director**

Andy is our Sales Director and is a Board member. He has over eighteen years' experience in the Corporate Healthcare industry. Andy has a proven track record within customer relationship management and business development, leading the sales and account management functions, whilst contributing to the overall strategy of the organisation.

Andy's passion is to provide effective customer solutions that exceed expectations, whilst delivering profitable growth for the business.



### Mark Armour - Market Director

Mark is our Market Director for Corporate Services and is a Board member. He is an experienced and passionate Physiotherapist with twenty-five years' experience specialising in return to work and function. Mark has responsibility for clinical governance and quality across Musculoskeletal services, which achieved SEQOHS accreditation in 2017. Mark served as Honorary Chair of ACPOHE (Association of Chartered Physiotherapists in Occupational Health and Ergonomics) between 2014-2018. Mark is a guest lecturer on the "Effects of work on health and fitness for work" module at the Institute of Occupational and Environmental Medicine within Birmingham University. As part of his responsibilities Mark has occupied a seat on the National Council for Work and Health.



### Jane Muston - Clinical Director

Jane is our Clinical Director, a Board member and is the Deputy Chair for the Accreditation Programme for Psychological Therapies Services (APPTS). She is an experienced mental health clinician with over twenty years' experience delivering evidence-based mental health preventative and treatment interventions at organisation, team and individual levels. Jane is passionate about the strategic implementation and delivery of innovative and evidence-based mental health provision. She is committed to facilitating equity of access and delivery at all levels so that prevention, early identification and intervention lead to the best possible patient outcomes, exceeding expectations.



#### Emma Weighill-Baskerville -Business Development Director

Emma is our NHS Business Development Director and is a Board member. She is a qualified Psychotherapist (UKCP) and accredited CBT therapist (BABCP) and has over 16 years' operational and clinical experience within primary care mental health in the third sector, NHS and corporate environments. Emma has worked within national Improving Access to Psychological Therapies (IAPT) services since inception in 2009 and has chaired NHS transformation teams developing better depression pathways for mental health and suicide prevention. Emma has been involved in the procurement process for several IAPT services nationally, striving for continuous improvement in service design and delivery.

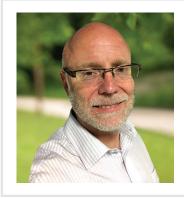
### **Part One: Our Executive Management Team**



### Jon Clover - Chief Financial Officer

Jon is our Chief Financial Officer and a Board member. He is a Chartered Accountant with over twenty years' experience in finance, commercial and strategy roles. Most of his career has been spent within the healthcare sector, working for and advising several leading private healthcare companies and the NHS.

Jon is passionate about developing and optimising high performing teams who work with the business to deliver an exceptional customer experience. He has a proven track-record of delivering innovative customer solutions and sustainable growth.



### **Corin Margetson - Programme Director**

Corin is our Programme Director and a Board member. He has thirty years' experience in the wellness and primary care sector, within projects and transformation programme roles. Corin started his career working for a corporate wellbeing provider and was part of a leadership team that built the business to become one of the UK's largest providers in the sector. He subsequently spent 11 years at Nuffield Health delivering key strategic projects and managing transformation programmes. He leads on all Vita Health Group projects, striving to optimise our delivery solutions so together we make a difference.



### Mark Driver - Market Director

Mark is our Market Director for NHS Services and is a Board member. Mark is an experienced Physiotherapist with a background in both NHS and corporate settings and leads the strategic direction of Vita Health Group's NHS portfolio. Whilst working within commercial roles over the last eight years, Mark has successfully tendered for NHS services within MSK and mental health, designing innovative service delivery models and ensuring optimal service delivery for over 40 CCGs nationwide.

Mark has a passion for working with his team to design clinical and commercial service models that exceed customer requirements, creating new commercial opportunities and providing exceptional service transformation and delivery.

### Part One: Our values



uring 2019, Vita Health Group underwent a complete re-brand; we wanted one strong brand to unite the businesses that had been accquired under the Vita Health Group umbrella.

In line with our commitment to co-production and ensuring we listen and truly value the views of our workforce, we offered all employees an opportunity to get involved and provide their opinion on what our values should be, ensuring our workforce knew our chosen values would define the way we all behave and our vision for Vita Health Group's future.

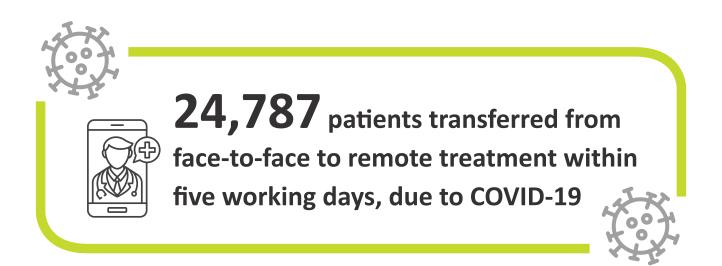
This information was fed through to our Employee Reference Group, which is made up of representatives from each of Vita Health Group's services. Our Employee Reference Group work together as the employee voice to drive forwards change and ensure a positive working environment for all.

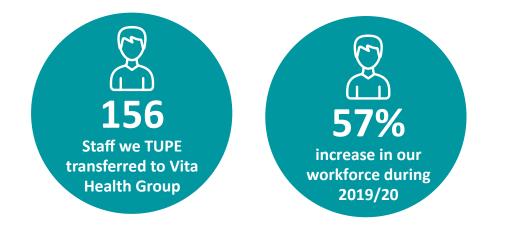
Our Employee Reference Group reviewed the suggestions and put forward a proposal to our Executive Management Team, which reviewed the proposal, seeking final approval from our Board of Directors; our new values were launched. The top ten most popular suggestions for our company values were:

Integrity. Respect. Innovation. Quality. Teamwork. Passion. Customer-focussed. Excellence. Honesty. Accountability.

### Part One: 2019/20 statistics







### **Part One: A patient story**



aving had an incredible corporate career in sales spanning more than thirty years and being recognised as a highly successful achiever, it came as a massive shock to me when work related stress caused me to have a **mental breakdown** in 2014. I attempted to go back to work eight months later, but with the added stress of caring for my beloved 90-year old Mum, I experienced a further breakdown in 2016. At this point, I gave up work completely and devoted my time to care for my Mum. I was constantly on hand to help and support her, and as a result I was getting very little sleep."

"I couldn't function normally, I **sobbed almost constantly,** my emotions were all over the place, and I was completely **unable to manage basic day to day tasks.** I retreated from the world, completely isolating myself. I stopped talking to friends and engaging with others – in fact, friends had stopped contacting me, I felt forgotten about and irrelevant. I was **unable to control my fear and worry** and experienced severe **panic attacks;** at this point I felt my only way out was to **take my own life**. I considered this solution on a daily basis, planning how I would do it in the quickest and most effective way. I was in **a crisis situation and knew I needed help."** 

"I visited my GP for support. I was diagnosed with depression, anxiety, exhaustion, chronic fatigue, and traits of an emotionally unstable personality disorder. I was prescribed Sertraline, an anti-depressant, to help me cope. I received some cognitive behavioural therapy (CBT) counselling, but I found it was too general and I wasn't in the right frame of mind to take on any of the CBT elements, as I was unable to commit to change."

"In June 2017, my GP referred me to the local **Improving** Access to Psychological Therapies (IAPT) Service. I was assessed and put on a waiting list to participate in a 13-week group IAPT treatment programme for Emotional Intensity. A couple of weeks later, I commenced this programme, which was the start of my journey to transforming my life it has been a real 'game-changer' for me." "The programme taught me to have an awareness of my emotions and what triggers them. It also taught me how to talk more openly about my emotions, both within the group setting, and on a personal level. If I could wave a magic wand, I would incorporate this 13-week programme into our education system, so everyone benefits from this and has a beautiful mind!"

"In December 2018, my Mum passed away, and although I was stable, by mid-2019 it was clear to me that I was really struggling with my Mum's death. I felt like I was stuck, just going through the motions of life, but not living with any joy. This was exacerbated by a cancer diagnosis and treatment side effects, adding to my anxiety, fatigue and sadness; I simply didn't feel able to engage with the world."

"In November 2019, I re-entered my local IAPT Service, now being run by Vita Health Group. I was diagnosed with posttraumatic stress disorder (PTSD) and complex grief, on-top of my previous diagnosis. I commenced a one-to-one Vita Health programme for Complex Grief. The programme was tailored exactly to my needs. My therapist provided guidance, theoretical practice, and most importantly the tools I needed to help me understand my thought processes, review my triggers, and how to manage them. During my oneto-one sessions, we touched on what I had learnt during the IAPT course I completed in 2017, but also built upon this. During the sessions, I talked openly about my own experiences and how I was dealing with the challenges I was experiencing. My Vita Health therapist praised me for my openness and reassured me I was doing the right things; this all helped to build my confidence. I have used a 'thought record' to accurately record facts, enabling me to think about things in a balanced way, leading to an enormous improvement in my mood - so simple but so effective!"

"How extraordinarily heartening to see the results of my questionnaires, which demonstrate my **improvement and** growth! Seeing this has given me such a sense of control and I feel I can trust myself to make good decisions, allowing me to be empowered to live happily again."

"I am currently being supported by my GP, with a 6-month plan to come off Sertraline, and I am managing my fatigue through diet, daily exercise, routine and holistic treatments. I **meditate daily** and have **developed behaviours** to enable me to be of **healthy mind**, **body and spirit**. I continue to strive to learn, to grow and evolve to make me a better person, thinking in my higher mind. I **can laugh again!** I am now in a loving and emotionally mature relationship where we communicate at a level that allows support and understanding. I am happier than I have ever been and have **the tools to remain that way. Thank you, Vita Health!**"

Vita Health Group IAPT patient

### **Part One: Our locations**

uring the reporting period we have opened 53 NHS clinics to support our aim of delivering accessible services, closer to people's homes, empowering patient choice.

Our geographical coverage will expand during the next reporting period initially across Calderdale, Derby and Derbyshire and Kent and Medway.

As an established provider of mental and physical health services to a large range of non-NHS organisations, we have over 650 network therapists, and over 600 MSK network clinics; this ensures we have an excellent national coverage, bringing care closer to home.

VHG MSK Clinics

• NHS VHG IAPT Clinics

### Part Two: 2020/21 Quality improvement priorities

e have agreed upon the quality initiatives detailed within this section, as they are fundamental to us achieving our three quality improvement priorities to ensure Vita Health Group achieves measurable quality and safety improvements, particularly within its NHS services. We have listened to feedback received from patients, stakeholders and external organisations such as Healthwatch, all of which have supported our key priority improvement decisions.

### **Priority 1: Implement new initiatives** to improve patient safety

In order to prevent people from dying prematurely (Domain 1), enhance quality of life for people with longterm conditions (Domain 2) and provide treatment and care for people in a safe environment and protect them from avoidable harm (Domain 5), during 2020/21 we will implement a range of initiatives to improve patient safety.

	Key initiative		How we will measure successful implementation
1	Appoint a dedicated Health and Safety Officer	->	Suitably qualified individual recruited, appointed, inducted and carrying out their role
2	Sign up to Safety Pledge to demonstrate commitment to patient safety	->	Vita Health Group signed up to Sign up to Safety Pledge and demonstrable adherence to pledges made
3	Conduct full review of Risk Management Framework	<b>→</b>	Risk Management Framework reviewed, and project plan created to define priorities
4	Launch patient safety impact assessments within service models	->	Patient safety impact assessments added to Vita Health Group's Health and Safety Agenda
5	Assess patient safety culture within Vita Health Group	<b>→</b>	Staff survey conducted to assess opinion regarding safety culture and feedback used to guide staff training
6	Launch new mandatory training module: Human Factors in Healthcare	->	Content of new module created by Learning and Development Team and new module launched as part of mandatory training
7	Ensure lessons learned from COVID-19 are used to inform future practice across all business areas and shared with wider stakeholders	->	Changes to practice as a result of lessons learned, evidenced and an annual 'table-top' Business Continuity Planning session implemented

### Part Two: 2020/21 Quality improvement priorities

### Priority 2: Invest in improved technology and digitally enabled care

In order to enhance quality of life for people with longterm conditions (Domain 2), help people recover from episodes of ill-health and injury (Domain 3), ensure people have a positive experience of care (Domain 4), and provide treatment and care for people in a safe environment and protect them from avoidable harm (Domain 5), during 2020/21 we will further invest in improving our technology offering and digitally enabled care.

	Key initiative		How we will measure successful implementation
1	Launch new accessible, informative Vita Health Group Intranet	•	New Vita Health Group intranet available to workforce, Intranet Steering Group established to drive content, and feedback from staff survey used to drive continuous improvement
2	Use innovative technology to deliver NHS treatment via webinars	•	Successful launch of Microsoft TEAMS live webinars and video consultations, across our IAPT and MSK Services
3	Launch online educational seminars to empower people to look after their mental and physical health during COVID-19 crisis, so together we make a difference	•	Successful launch of online educational seminars, Intranet with links to credible, accurate government and NHS resources, and Office 365 for access to the office suite online and offline
4	Strengthen IM&T infrastructure to support remote workforce	•	VPN capacity increased to accommodate future workforce growth

### Part Two: 2020/21 Quality improvement priorities



#### **Priority 3: Enhance workforce learning and development**

We are passionate about continuously improving our learning and development so we empower our workforce to advance their knowledge and skills, resulting in our workforce contributing further to enhancing the quality of life for people with long-term conditions (Domain 2), and ensure people accessing our services have a positive experience of care (Domain 3). During 2020/21 we will enhance learning and development across our workforce in a variety of ways.

	Key initiative		How we will measure successful implementation
1	Improve induction program for all new staff	•	Revised induction programme launched to enrich the induction process
2	Enhance mandatory training modules	•	Existing modules reviewed and new modules created and launched via innovative eLearning platform
3	Enhance internal training for IAPT clinicians to aid staff retention	•	Increase in Psychological Wellbeing Practitioners taking up Senior Psychological Wellbeing Practitioner roles and career development opportunities to become High Intensity Therapists
4	Additional upskilling of workforce using innovative initiatives	•	Annual away days for clinical teams launched, along with additional training for non-clinical teams

#### **Executive Management Team** statement of assurance

During 2019/20 Vita Health Group provided community physiotherapy, Musculoskeletal Clinical Assessment and Treatment Services (MCATS) and Improving Access to Psychological Therapies (IAPT) Services to 13 Clinical Commissioning Groups, either directly, or via a subcontracting arrangement with a Lead Provider. Vita Health Group has reviewed all available data regarding the quality of the NHS services we delivered.

### Participation in clinical audits and confidential enquires

During the reporting period 2019/20, no national audits and no confidential enquires covered the NHS Services that Vita Health Group provided. Within Appendix 1, we have provided further detail regarding the local audits we have performed during the reporting period 2019/20.

All local audit reports were reviewed throughout our governance structure. As a result of audit findings, we have implemented the following changes to reduce risk and improve quality:

- Additional training provided to South East London (Bromley) MCATs Team to improve reasoning and decision-making following receipt of blood requests
- Changed the way we report health and safety and infection, prevention and control (IPC) incidents to make the reporting content user-friendly for our staff
- Introduced a new IPC audit tool to support all areas of IPC; this focuses on IPC ten key themes, enabling greater service transparency.

#### **Participation in clinical research**

Participation in clinical research showcases Vita Health Group's commitment to continually improve the quality of care we deliver, so together we make a difference.

#### During 2019/20 we:

Participated in a 6-month joint research project with one of our corporate partners, Severn Trent Water, to assess the prevalence of common mental health conditions. The aim was to identify those displaying mild to moderate common mental health disorders in people presenting with MSK problems and treat their mental health condition concurrently with their MSK treatment. This pilot is ongoing, and results will be detailed in our 2020/21 Quality Account. Participated in a joint research project with University of Essex to conduct a statistical analysis of telephone assessment / triage to establish if specific questions accurately predict which pathway people follow, for example, guided self-help, face-to-face treatment, escalated to their GP or referred urgently to A&E. The data will be used to develop an accurate digital triage tool which can be used by corporate service-users at the beginning of their journey, avoiding lengthy initial assessment that leads to the same outcome. This pilot is ongoing, and research results will be detailed in our 2020/21 Quality Account.

Entered into discussions with University of Bristol to support their current research project, funded by the National Institute for Health Research. The overall aim of the research is to establish if an IAPT Service that blends high quality clinical support with community-based interventions delivers enhanced mental health outcomes than achieved through clinical support alone. The research also aims to establish whether a particular patient cohort benefits the most, therefore reducing health inequalities across the region. The research project commenced in April 2020 and therefore we will provide an update in our 2020/21 Quality Account.

#### **Care Quality Commission (CQC)**

Vita Health Group is required to register with the CQC for the regulated activities 'treatment of disease, disorder or injury' and 'diagnostic and screening procedures.' Vita Health Group does not have any conditions placed on its registration and there have not been any inspections to report on. The CQC has not taken any enforcement action against Vita Health Group during 2019/20. Vita Health Group has not participated in any CQC special reviews or investigations during the reporting period.

We recognise that psychological therapies are not currently a regulated activity requiring CQC provider registration, but in light of the Five-Year Forward View on Mental Health, this may change in the near future. We will continue to monitor this during the 2020/21 reporting period.

#### **Secondary uses services**

During 2019/20, Vita Health Group did not submit records to the 'Secondary Uses Services' for inclusion in the Hospital Episode Statistics.

#### **Payment by results**

During 2019/20, Vita Health Group was not subject to the Audit Commission's payment by results clinical coding audit.

# **Commissioning for quality and innovation payment framework (CQUIN)**

A proportion of Vita Health Group's 2019/20 income was conditional upon achieving quality improvement and innovation goals. These specifically relate to our contracts held with South East London CCG, Basildon and Brentwood CCG, and Bristol, North Somerset and South Gloucestershire CCG. These schemes relate to:

- IAPT front line staff, who are in face-to-face contact with patients, having flu vaccines
- Using anxiety disorder specific measures in our IAPT Services
- 🕖 Pain management within our MSK services
- Co-designing an improved pathway for Fibromyalgia patients.

#### **Duty of Candour**

We have a Duty of Candour Policy, an Ethical Business Policy (which details our approach to Whistleblowing), a Whistleblowing Procedure and a Serious Incident Policy. They are all in alignment with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 20: Duty of Candour, and are available to our workforce via our Intranet. During the next reporting period, whilst reviewing our Risk Management Framework, we will review our training programme that supports delivery of our Risk Management Framework. We will identify how we can enhance our training and supervision to up-skill our staff.

#### **Data quality**

Vita Health Group adopts a structured and robust approach to data quality. We have several training and operational procedures in place at both local and third-party level to ensure the information stored in our systems, and therefore the data we report on, is accurate. We employ a team of experienced Data Analysists who have been recruited based on their attention to detail and ability to analyse, model and interpret data. They are responsible for:

- Training our workforce, in line with established training procedures, to ensure they understand our operational procedures regarding data entry, access and use
- Conducting audits to verify the quality and integrity of the data within our systems
- Preparing weekly cleansing reports to highlight data inaccuracies within the systems, which are escalated to management for data correction
- Data submission to Clinical Commissioning Groups and other external bodies.

#### Data Security and Protection Toolkit (DSPT)

We hold DSPT demonstrating our compliance with:

- Data protection legislation, including the General Data Protection Regulations 2018 and the Data Protection Act 2018
- Care Quality Commission (CQC) key lines of enquiry.

All staff complete annual mandatory information protection training, which they complete via our innovative eLearning platform, 'The Knowledge.' Completion is monitored by our Learning and Development Team. Training results are published externally to DSPT and internally to our Governance, Quality and Risk Committee to maximise completion and drive forwards continuous learning.

Vita Health Group Limited holds ISO 27001 accreditation. Other companies under the Vita Health Group umbrella utilise information governance systems that are compliant with ISO 27001 and will obtain full ISO 27001 accreditation during the 2020/21 reporting period.

#### Safeguarding

Ensuring we protect our staff, our service-users and their carers and family members from avoidable harm, promote their welfare and respect their human rights is a key component of our integrated clinical governance framework.

We are always striving to implement change to ensure we are continuously improving in this fundamental area. During the reporting period we have:

🧹 Enhanced our safeguarding team

🎺 Improved our safeguarding training

#### Enhanced our safeguarding team

As our business continues to grow, it is vital our safeguarding team has sufficient resource and breadth of knowledge to discharge its safeguarding responsibilities. During the reporting period, we altered the structure of our safeguarding team, to ensure a more multidisciplinary approach. Our Safeguarding Team now has the following members:

- 🎺 Clinical Director Head of Safeguarding
- 🎸 Professional Head of MSK Deputy Head of Safeguarding
- Vational Clinical Lead for Mental Health (Corporate)
- Vational IAPT Clinical Lead
- Local Safeguarding Champions from each NHS Service we deliver, ensuring both clinical and administrative teams are appropriately supported and represented during service delivery so together they make a difference.

#### Improved our safeguarding training

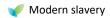
Our mandatory safeguarding training is in line with the Intercollegiate Document to ensure our staff complete safeguarding training that is proportionate to their role within Vita Health Group. Completion is monitored closely by our Learning and Development Team.

Our mandatory safeguarding training includes:

Safeguarding children and young people (levels 1-3 dependent on role) and Safeguarding adults at risk (levels 1-3 dependent on role), including Mental Capacity Act (MCA) and Deprivation of Liberty (DoLs)

- Preventing Radicalisation
- Level 4 safeguarding training for our Head of Safeguarding and Deputy Head of Safeguarding, to ensure they can effectively provide businesswide safeguarding support.

We are passionate about continuously improving the training we provide to our workforce. Therefore, during the reporting period 2020/21, we will be introducing a standalone mandatory MCA module and further mandatory modules covering:



- √ Human trafficking
- 🎺 Child sexual exploitation
- 🎻 Domestic violence and abuse
- 👽 Female genital mutilation
- V Forced marriage.

During the reporting period 2019/20 our Learning and Development Team have worked closely with key members of our Governance Team, and local Service Leads, to enhance both the content and delivery of our safeguarding training to ensure we empower our workforce to protect vulnerable people and people at risk of abuse, from avoidable harm. Two key changes have been implemented:

The vast majority of our safeguarding training is now delivered via our eLearning platform; this is in line with our commitment to optimise innovation in all aspects of service delivery. This brings a range of benefits; it makes our training accessible to our geographically spread workforce, many of which work remotely. It also provides bitesized learning, which helps to improve knowledge, especially about more intensive subject matters

We have improved the content of our modules by making them more case study and scenario-based with more user interaction through videos and quizzes and opportunities for reflection.



### **Registered Manager statement of assurance**

ita Health Group remains a registered provider with the Care Quality Commission (CQC) under the Health and Social Care Act 2008. Crystal Palace Sports Injury Centre is registered as a location for the regulated activities of 'diagnostic and screening procedures' and 'treatment of disease, disorder or injury.'

Vita Health Group does not have any conditions placed on its services and the CQC has not taken enforcement action against us during this reporting period. Vita Health Group has not participated in any CQC special reviews or investigations during the reporting period. We are awaiting a formal CQC inspection. However, the CQC announced on 16.03.2020 that they had placed their inspections on hold due to COVID-19.

Over the last twelve months, Vita Health Group has implemented several changes to drive forwards quality improvement in the services we deliver. We have made changes to our Governance Leadership Team, including recruiting a Head of Governance and a Health and Safety Manager. Furthermore, several changes have been implemented by our Quality, Governance and Risk Committee, which is led by senior Vita Health Group managers; all changes have a shared goal of driving forwards improvements in patient safety, clinical effectiveness and the patient experience so together we make a difference. These changes will ensure our regulated services are continually challenged and benchmarked for quality improvement. Our regulated services, led by Dr Wing Chu, have seen improvements not only in the way we share our learning, but have also been enhanced through invaluable external expertise within our in-house team. Dr Wing Chu's monthly clinics include the provision of injection therapy, ultrasound scans and occasional second opinions, and are proving to be successful, with appropriate patients being referred from the team. Dr Wing Chu is keen to be involved in our monthly In-Service Training schedule and this is something we intend to implement over the next reporting period, subject to COVID-19 travel restrictions being lifted. If restrictions continue for longer than anticipated, we will look at how we can utilise technology to ensure this training is delivered remotely to our workforce. Dr Wing Chu is also keen to be involved in service developments, including implementing an NHS pathway for Extracorporeal Shockwave Therapy (ESWT).

Our next CQC mock inspection has been provisionally arranged for quarter three of 2020 – although this again will depend on COVID-19 travel restrictions being lifted. Our Head of Governance and MSK Clinical Lead will be jointly responsible for this mock inspection, using our internal inspection tool, which has been designed to support Vita Health Group governance and quality processes to drive forwards quality improvement at our registered location, whilst also informing our annual audit programme.

marcen

Mat Fahey CQC Registered Manager and Director of Support Services

### Infection, Prevention and Control (IPC) statement of assurance

ver the last twelve months, we have grown significantly as an organisation, and have experienced substantial change, including the merger of our three entities under one new brand, Vita Health Group. This has required us to amalgamate three sets of policies and procedures into one policy framework, ensuring they are fit for purpose for our NHS, Corporate and private services.

To support these changes and ensure IPC remains a key focus during a period of rapid business growth, we appointed an IPC Lead in December 2019. The key initial focus of our IPC Lead was to review existing policies, procedures and practices and launch a new IPC Framework that complies with the Code of Practice for Health and Adult Social Care on the Prevention and Control of Infections and Related Guidance.

Unfortunately, due to the current COVID-19 situation, some of these plans have taken a back seat and are likely to continue into the next reporting period. We will be led by public health teams and the government regarding the evolution of this situation and will implement any mandatory clinical changes once our clinical environments reopen to patients and the wider public.

During the reporting period, we have strived to engage and inform our staff about the importance of effective hand hygiene and maintaining a clean and safe environment to prevent and control infections so together we make a difference; this was significantly increased and reinforced from the onset of COVID-19.

Despite COVID-19, we have made some positive quality improvements over the last twelve-months, including:

Implementing a comprehensive IPC audit that focusses on ten key IPC topics specific to the services we deliver, namely:

- Policies, procedures and guidelines
- The environment
- Treatment rooms
- Personal protective equipment (PPE)
- Management of sharps
- Medicines storage
- WC and cloakroom
- Cleaners room
- Waste management
- Gym or group facilities

Adding a Vita Health Group hand hygiene audit to our Audit Schedule.



We have also restructured our Governance, Quality and Risk Committee (GQRC) who meet monthly to offer a multidisciplinary collective, where IPC is a rolling agenda item. This provides a strategy for continuous improvement in IPC which includes:

- Risk assessment and management
- Review and development of evidence-based policies and procedures
- Ensuring resources are sanctioned and made available at the point of care
- Ratifying policies and disseminated them to our workforce to ensure they become part of everyday practice, through learning, development and training
- Reviewing audit results and using them to inform lessons learned and future audit planning.

We are committed to driving forwards continuous improvement in all that we do, and IPC is no exception. Our future plans include submitting an annual IPC statement to our Executive Management Team outlining the progress made throughout the year, and our plans for the following year. Our plans also include a complete review of our Risk Management Framework, including changing the way IPC incidents are reported and managed at Vita Health Group.

Yvonne Attwell Head of Governance

gattwell

### Head of Safeguarding statement of assurance

S afeguarding the safety of every individual patient who uses our services and delivering optimum quality evidence-based care and the best possible experience throughout the patient pathway, are all of paramount importance to Vita Health Group as an organisation, and to all our staff.

We are committed to ensuring that each and every person who receives care and treatment from us is able to do so in the knowledge that we will work with each individual to guarantee they are safe and able to live free from avoidable harm, abuse and neglect. This includes any child, young person, or vulnerable adult, including adults at risk they may have contact with, or be responsible for. Having an awareness of everyone's circumstances and risk status enables us to achieve this at both an individual clinician level and as an organisation.

It is our duty to hold each other accountable to ensure that when necessary, safeguarding needs are identified and acted upon appropriately, involving key external agencies.

Vita Health Group has grown significantly over the past twelve months across our NHS, corporate and private services. To support this growth we have doubled the size of our Vita Health Group safeguarding team. One of our key priorities has been to align all services under one comprehensive and cohesive safeguarding policy framework. Whilst doing so, we have enhanced our policies and frameworks, seeking guidance from the Intercollegiate Documents published by the Royal College of Nursing, which seeks contributions from multiple organisations. Specifically, we have:

Reviewed our Vita Health Group policies covering clinical risk, adult safeguarding and children and young persons' safeguarding

Refined our safeguarding reporting processes

Enhanced our mandatory training covering clinical risk, Mental Capacity Act (MCA) and safeguarding up to level 3 (both vulnerable adults and children and young people) via our e-learning platform, which is in line with elearning for health

Introduced mandatory training compliance monitoring and reporting at Board level

- Added safeguarding to the agenda for each clinical supervision session
- Introduced live safeguarding supervision for each case, as required
- Appointed a duty risk clinician for each mental health service line, as well as an out-of-hours senior duty risk contact, which our Musculoskeletal (MSK) Teams can access as required
- Appointed a Safeguarding Lead for each service line, feeding into Vita Health Group's companywide Safeguarding Leads, which report up to our Vita Health Group Deputy Head of Safeguarding and ultimately our Vita Health Group Head of Safeguarding
- Launched safeguarding roadshows within our MSK Services.

Over the next twelve months we will build upon the improvements we have made; from April 2020 we will start to implement the following:

- Monthly safeguarding newsletter, which will include a reflective CPD case study activity
- Monthly safeguarding dashboard for review by our Governance, Quality and Risk Committee, which will be shared with our entire workforce for complete transparency and organisational learning
- Female Genital Mutilation (FGM) Workshops and Workshops to Raise Awareness of Prevent (WRAP); both will be onsite workshops (in line with COVID-19 social distancing regulations) to enhance our current mandatory safeguarding training for all clinical staff
- Quarterly Safeguarding CPD informed by the Intercollegiate Documents, starting with level 4 safeguarding training for all Safeguarding Leads and Champions within each service line.

These initiatives demonstrate our ongoing commitment to safeguarding so together we make a difference.

Jane Muston Clinical Director and Head of Safeguarding

### **Part Three: Enriching the patient experience**

ita Health Group is experienced in working on a national scale and has developed a robust integrated clinical governance structure that supports safe, clinically effective MSK physiotherapy and IAPT delivery, which strives to provide a positive experience for all patients referred into our services.

We actively listen to patients and seek feedback regarding their individual journeys, whether positive or not, to support continuous improvement and enrich the patient experience. This is primarily via patient feedback surveys.

#### **MSK survey feedback**

As a result of lessons learned and to streamline our questionnaire process, in November 2019 we launched a revised patient feedback survey across our NHS MSK services, which incorporates the friends and family test. Therefore, the statistics below relate to the period November 2019 to the end of March 2020. We will provide a full year of patient survey feedback in our 2020/21 Quality Account.

"Very efficient and friendly. Immediate text confirmation of appointments. Kind and courteous treatment. Listened to my descriptions of my discomfort carefully and attentively"

> "Very professional and courteous service"

85%

of surveyed patients would recommend our service to family and friends

### 88%

of surveyed patients were provided with a clear treatment plan with mutually agreed goals

We believe there is more we can do to improve the patient experience and are confident we will be able to report higher levels of patient satisfaction in our MSK services in the next reporting period. "An excellent service. Self-referral system was quick and very convenient for me and I had a choice of clinics to attend"

> "Everything was amazing - very friendly, helpful and knowledgeable staff"

### **Part Three: Enriching the patient experience**

#### **IAPT survey feedback**

Within our IAPT services, we ask all service-users to complete a feedback questionnaire following their assessment and again following treatment, as well as the friends and family questionnaire. Our results show we are providing a positive patient experience, and we will strive to improve even further next year.

**95%** of surveyed service-users felt they were given information about the treatment options available to them

97% of surveyed service-users felt listened to at all times / most of the time during treatment

**91%** of surveyed service-users felt involved in making choices about their treatment and care at all times / most of the time

Over the reporting period we have placed considerable emphasis on facilitating patient and public involvement to co-produce how our service models are designed and evolved to enhance the experience for all that access them. This has led to:

- 🧹 Launch of our IAPT brand 'VitaMinds'
- Introduction of 'Welcome Packs' post assessment, utilising non-clinical language to explain treatment for a range of conditions, improving information and communication
- Amending our appointment text reminders so they adopt a 'warmer' approach and include URL links to clinical maps and transport links.

"The service has really helped me understand the way and reasons why I have felt the feelings I have had since having my baby. I'm so thankful for this service as I feel it has made a real positive change to the way I think and feel. I can't thank the service enough for making me feel more like myself again. Thank you"

"Could not have wished for a better experience of therapy. Life-saving interventions by an expert in a professional, caring, consistent, knowledgeable manner. Very effective, great outcome"

"I feel the experience of having CBT treatment has benefitted me in several ways, as I feel I better understand my thoughts and feelings, and what has and does cause them. I have learnt several techniques for coping with negative thoughts and feelings, which I believe will help me in the future with improving my wellbeing"

"I feel tremendously grateful for the help I've received and see significant change in my mental health - for the better"

### **Part Three: Optimising patient safety**

### 92%

Physiotherapy patients initial assessment booked and attended within 20working days

### 87%

IAPT service-users started psychological therapy within 6 weeks of referral, exceeding national target

## 99%

IAPT service-users started psychological therapy within 18 weeks of referral, exceeding national target

Patient safety is very much high on our clinical governance agenda and we are continuously striving to improve patient safety across our organisation; implementing new initiatives to improve patient safety is one of our quality priorities for 2020/21.

During 2019/20 our key areas of focus to improve patient safety have been:

- Re-structuring how safety alerts are received and disseminated throughout Vita Health Group to ensure they are cascaded more efficiently. This will enable us to act quickly and responsively in accordance with central alerting system (CAS) alerts, health protection reports, MHRA alerts alongside appropriate communication with stakeholders and other agencies including public health teams and commissioners. All alerts are reviewed, and those relevant to the services we deliver are escalated and disseminated according to the designated timeframes within each alert. During the reporting period we received 13 alerts alongside multiple evolving alerts, guidance and updates regarding COVID-19 which had the potential to impact our services, including:
- 23.01.20 CAS Alert 583 people have been identified, in Wuhan China, with respiratory infections caused by a novel coronavirus, 17 RIP and multiple variations on the presentation spectrum
- 28.01.20 CAS Alert Problems with HeartStart Monitors – on investigation there was no impact on our service
- 30.01.20 CAS Alert How to handle estates and facilities alerts which your organisation receives, and what to report on and how

- 31.01.20 CAS Alert World Health Organisation (WHO) declares COVID-19 outbreak a global health emergency
- 03.02.20 CAS Alert Guidance for Health Care Professionals and primary care settings regarding providing patient advice and guidance
- 04.02.20 CAS Alert Clinical negligence indemnity in response to COVID-19
- 10.02.20 CAS Alert Update showing geographical expansion of COVID-19 and revised clinical case definition
- 16.02.20 CAS Alert Update showing geographical expansion of COVID-19
- 04.03.20 CAS Alert Guidance update on personal protective equipment (PPE) in relation to COVID-19
- 05.03.20 CAS Alert Update regarding COVID-19 symptoms
- **10.03.20 Update to previous CAS Alert –** Change to clinical case definition
- 11.03.20 CAS Alert Now in delay phase of COVID-19 response
- 16.03.20 CQC Alert All routine inspections suspended as a result of COVID-19
- 17.03.20 CAS Alert Advice regarding taking anti-inflammatory medicines when suffering from COVID-19

### **Part Three: Optimising patient safety**

There have also been multiple GOV.UK updates regarding COVID-19 and these have been shared with our Emergency Preparedness Steering Group, which is made up of service critical staff including service leads, managers, heads of services and directors who feed into our Executive Management Team; this ensures a multi-disciplinary leadership approach to the management of COVID-19 within Vita Health Group.

- Strengthening our clinical governance team, including recruiting a Head of Governance (with over 7-years' experience within senior governance roles) and an experienced Health and Safety Manager
- Introducing an enhanced Infection Prevention and Control audit
- Allocating responsibility for monitoring revoked and suspended licenses for manufacturers and wholesalers of UK medicines to our Head of Governance. As part of our Audit Schedule, this is checked monthly to verify our suppliers are licenced to trade.

Our robust Risk Management Framework ensures we can effectively assess and manage all patient risk, including dealing with emergencies safely and appropriately as and when they arise. This means we can maintain patient safety whilst in our care, or transfer patients to other services, organisations and agencies if a higher level of risk is indicated, so we safely manage emergency and high-risk situations. This is absolutely vital, particularly in our IAPT Services.

We capture a broad range of patient safety data, including internal audit outcomes, incidents, and complaints, and we use this data to identify opportunities to learn and improve so we mitigate risk and maximise patient safety.

### 0.12%

Percentage of incidents, complaints and expressions of dissatisfaction as a percentage of all NHS appointments

### 7,944

Number of safety-related mandatory training modules completed by our staff In addition, patient safety has been further enhanced by our Head of Safeguarding and Deputy Head of Safeguarding completing Level 4 safeguarding training.

"The two-day in-depth interactive course has further enhanced my knowledge about the safeguarding legal framework, which underpins safeguarding practice. The course involved looking at themes from case reviews and tools for managing risk – this has helped us identify how we can enhance our organisational approach to safeguarding, so we close the loop on safeguarding referrals we make. The course has also influenced how we escalate and reflect on the safeguarding incidents we encounter, so together we all make a difference."

> Jenny Ralls – Professional Head of MSK and Deputy Head of Safeguarding

### Part Three: Improving clinical effectiveness

Our robust procedures ensure our workforce deliver effective clinical care in line with the latest NICE guidance, quality standards and clinical guidelines. These procedures relate to:

🎺 Keeping up to date with emerging new evidence
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👽 Induction programme

Ongoing training and continual professional development

🎻 Clinical and management supervision

Audit to identify specific topics so these can be addressed, driving forwards enhanced clinical improvement within our MSK services and improved clinical recovery within our IAPT services.

#### **100%** MSK patients offered outcome measure EQ-5D-5L during their Initial Assessment

72% of MSK patients reported improvement

**5.6%** DNA rate for MSK appointments

We have experience in utilising a range of PROMs but most commonly use EQ-5D-5L as it provides common currency allowing comparison of clinical outcomes across all patients. During the reporting period, 68% of MSK patients were offered outcome measure EQ-5D-5L during their discharge appointment.

During the next reporting period we expect this figure to improve considerably as we are making this a mandatory field within our MSK Patient Administration System.

We recognise the pressures within our IAPT services, particularly in relation to clinical recovery. Our Basildon and Brentwood IAPT Service commenced in April 2019 and our Bristol, North Somerset and South Gloucestershire Service soon after in September 2019. Both services involved the transfer of a significant number of clinical and non-clinical staff from a range of NHS Trusts and private providers. During service transition, a key priority was to closely manage the cultural shift to ensure staff were fully supported and remained with us. Once the services were embedded, we have implemented a number of initiatives to improve our clinical recovery rate, including:

- Engaging Nick Hool, the IAPT High Intensity Training Course Director at Chester University, to provide supervision to our internally qualified supervisors
- Increased the frequency of our clinical supervision to weekly within both step 2 and step 3 treatment
- Implemented a process for our senior therapists to review clinical outcome data on a weekly basis, to verify step-ups are happening as quickly as possible, problem descriptors are complete, the right protocol is followed, including using the correct outcome measure. Weekly reviews ensure issues can be quickly identified and rectified, before they have an opportunity to impact on recovery rate
- Recruited additional clinicians to reduce the time between assessment and the start of treatment, as waiting times have a direct impact on clinical recovery.

During the next reporting period, we are confident our recovery rate will be in line with, or exceed, the national recovery target. We will provide an update in our 2020/21 Quality Account.

### Part Three: Driving forwards innovation and growth

We pride ourselves on being at the forefront of innovation and we are passionate about identifying improved ways of operating as a business, and new ways to deliver pioneering and sustainable services to the populations we serve. Over the last twelve months, Vita Health Group has explored how we can optimise innovative technology to enhance communication across our entire workforce and ways in which we can elevate clinical effectiveness and the patient experience across all our service delivery models.

### Launching Microsoft TEAMS to enhance communication

In response to staff feedback, during the reporting period, Vita Health Group invested in Microsoft TEAMS technology to enhance communication across our business as a whole and within specific service delivery teams.

"TEAMS has been invaluable within our Bristol, North Somerset and South Gloucestershire IAPT Service as it has supported our 150-strong workforce, which is spread over a large geographical area, to truly feel part of one team with a shared purpose and vision. It allows our workforce to seamlessly link together, ensuring effortless multi-channel communication, from one-to-one chat right through to group conversation when managing large projects. The benefits of secure video link technology within TEAMS have been fully realised during the COVID-19 pandemic, when team members need to see each-other more than ever, to prevent silo-working and individuals feeling isolated. We have even extended this technology to our service-users, transforming how we deliver care during these unprecedented times."

Miles Atkinson - Head of Service

### Innovative roles within our workforce models

In April 2019 we introduced Wellbeing Navigator roles into our Basildon and Brentwood IAPT Service, which are dedicated roles to support service-users to navigate their package of care and access the additional support services they need, both concurrent to treatment and in the community. In September 2019 we introduced Partnership Liaison Officer roles into our Bristol, North Somerset and South Gloucestershire IAPT Service to improve access rates, particularly from protected and vulnerable groups which are typically under-represented in mental health services.

### Piloting virtual reality software in our IAPT Services

In October 2019, we commenced a 12-month pilot within our Basildon and Brentwood IAPT Service. The pilot offered patients presenting with phobias and anxiety disorders, with the option to utilise virtual reality technology to support their treatment and / or enhance their recovery outcomes.

The technology provides services-users with access to a range of modules including:

- V Social phobia
- V OCD
- 👽 Health anxiety
- V Panic disorder
- 👽 Agoraphobia
- 🧹 Depression
- Specific phobias including animals, heights, driving, flying and hospitals.

Results will be collated at the end of the 12-month pilot.

### Part Three: Driving forwards innovation and growth

### Piloting SilverCloud technology in our MSK Pain Management pathways

In January 2020, we commenced a pilot using SilverCloud in our South East London (Bromley) pain management pathway, to assess how it enhances the care pathway. SilverCloud is a leading digital mental health and wellbeing platform. During PhysioDirect (our rapid access telephone triage service) and face-to-face consultations, patients are asked about the wider determinants of their MSK presentation, and when clincially appropriate, are directed to SilverCloud to complete appropriate modules on chronic pain, sleep, health anxiety, stress, and money worries. During the first quarter, 46 patients were invited onto the SilverCloud platform; full patient feedback data is being collated, and phase two of the pilot will comence during the next reporting period.

### Innovation to ensure business as usual during the COVID-19 pandemic

Following government advice regarding social distancing to reduce the spread of COVID-19, we needed to quickly transfer all our existing patients to a remote delivery solution.

# 10,396

MSK physiotherapy patients set-up to receive remote treatment within 5-working days

# 14,391

IAPT service-users set-up to receive therapy via secure telephone and videoconferencing within 5working days iss Sedira went to see her GP to discuss the pain she was experiencing due to having dextroscoliosis, a musculoskeletal (MSK) condition where the top of the spine is curved. Within 24-hours of receiving her referral, we telephoned Miss Sedira to arrange her Initial Assessment.

"I was incredibly grateful and pleasantly surprised to receive a call so soon after the GP referred me to Vita Health for physiotherapy – I didn't expect to hear anything for a while due to the COVID-19 outbreak."

"I spoke with Laura, who I understand works in Vita Health's Customer Services Team. She was extremely friendly and made me feel like I really mattered, and I wasn't just a number. She even took time to ask how I was coping with living in self-isolation. Laura explained that due to COVID-19, my initial assessment would take place over the telephone, and I was offered an appointment 3-days later, which I accepted."

"My subsequent telephone assessment went well. Zoe, the Vita Health physiotherapist, took time to listen and understand what I was experiencing. She explained some exercises I could complete from home, and how often I should do them, and she also sent this information to me via email."

"I have experienced a reduction in pain since starting to regularly complete the exercises. Zoe has also provided me with some exercises to complete for lower back pain, which I feel I have developed due to being less active during this time of social isolation. I am grateful to Vita Health, and all other healthcare providers, for continuing to provide a service in these very trying times."

Miss Sedira – Vita Health Group MSK patient

### Part Three: Statement from a key partner

#### Statement from a key partner - Ruth Jackson – CEO – Bluebell Care Trust

B luebell is a sub-contracted partner for the Vita Health Bristol, North Somerset and South Gloucestershire (BNSSG) CCG IAPT Talking Therapies Service. Bluebell delivers low intensity, nonclinical wellbeing support for parents experiencing mental health difficulties in the perinatal period, which is during pregnancy and up to two years after birth.

During the early part of project development, Bluebell worked closely with Emma Weighill-Baskerville and Mark Driver, who were great to work with and right from the start, we collaboratively developed the perinatal ideas, including inputting into the bid process and attending the pitch. Following this, we have worked closely with the local Vita Health team including Steve Patterson, Libby Bray and Jen Cole, who have all been very helpful. In addition, Katherine Grice, has been extremely helpful with the induction, training and ongoing support with IAPTUS.

Bluebell and Vita Health Group have worked closely together since September 2019 to develop plans for the delivery of holistic perinatal wellbeing services for families, including:

- Bluebell's 12-week therapeutic group programme 'Mums' Comfort Zone'
- Bluebell's Buddy programme, a 1-2-1 peer support service.

These two services have been integrated into the Vita Health programme of support for families in BNSSG, to ensure families have equal access to provisions across the region. The new Bluebell IAPT group programmes are in three areas of BNSSG:

- ✓Thornbury in South Gloucestershire
- 🎻 Clevedon in North Somerset
- Veston Super Mare in North Somerset.

These areas were identified by Bluebell, Vita Health and BNSSG CCG as areas lacking in this type of provision, meaning parents were falling through the gaps.

The Buddy 1-2-1 support service also runs alongside the group programmes in these areas, providing up to five supportive home visits for mothers, delivered by a trained, paid peer support worker who are mothers with a previous lived experience of similar difficulties.

Thirdly, Bluebell has been commissioned at part of the IAPT service, to expand its provision to support Dads affected by perinatal mental health difficulties, by expanding it's 'Dads in Mind' service into South Gloucestershire and North Somerset. This service also provides 1-2-1 support at evening group meets in community settings, delivered by paid, trained peer support workers who are fathers with a previous lived experience of similar difficulties.

In order to establish these services, during the set-up period, Bluebell staff and Vita Health met regularly to:

- Create pathways for families
- Ensure the Bluebell team were fully trained to use IAPTUS
- Collaboratively produce marketing materials to ensure local parents and healthcare professionals were aware of these new services.

The new Mums' Comfort Zone groups have been running since January 2020, as well as the new Buddy support programme; over sixty mothers have already been referred into these services and are accessing support. The Dads in Mind services are now live in South Gloucestershire and North Somerset, with two new peer support workers in post and actively supporting Dads.

#### **COVID-19 update**

Despite the impact of COVID-19, the Bluebell Vita IAPT perinatal services are still running, with new referrals being taken. The Mums' Comfort Zone group programmes have all moved online and sixteen mothers are currently actively taking part in these programmes, which the Bluebell group leaders are delivering via a mixture of:

**W** Recorded video content of weekly sessions, which mothers can watch in their own time

Weekly whole group Zoom meetings managed safely with their group leaders

√ 1-2-1 phone support.

The resources that accompany the groups have been delivered or posted safely to the mums in these programmes.

### **Part Three: Statement from a key partner**

In addition, the 1-2-1 Buddy support is actively supporting all mothers by phone; this ensures all mothers are receiving the same amount of support time they would have previously received during face-to-face contact. This is a busy service, with the three IAPT Bluebell Vita Buddies actively supporting over forty mums.

The Dads in Mind service is still running via evening Zoom groups and 1-2-1 telephone support.

### Feedback from parents who have accessed the service

As well as the Work and Social Adjustment Scale (WSAS) scores, which are captured at the start and end of interventions and reported on IAPTUS, we capture qualitative feedback from mothers who have accessed either the groups or the Buddy support. I have included some examples below:

### A mum who accessed the IAPT Buddy service in South Gloucestershire:

"I was referred to Bluebell through my Health Visitor and through IAPT, after suffering with postnatal depression. I was visited by Victoria, the Bluebell Buddy, who was so friendly, she sat with an open mind and listened. There was no judgement and I could talk to her about the issues I was having."

"During our second session Victoria came back with classes and sessions I could attend and coping mechanisms to deal with depression, and later my anxiety. Victoria was a very reactive support worker. She came to each session prepared with ways to help me based on the session we had before."

"I can manage my depression and anxiety and going forward have coping mechanisms and someone to turn to if I'm really struggling. Thank you so much for everything."



Quotes from Mums who took the IAPT Mums' Comfort Zone group programmes:

"The group made me realise that struggling and suffering from stress and anxiety is very common and I am not alone and there are ways of helping yourself to get better" "I feel overall more able to manage my anxiety and mood. I feel happier in general" "Some really useful techniques for relaxing and taking my mind off worrying" "Being reminded it's important to take time for myself" "It is very easy to feel alone and isolated with a small baby and Bluebell has helped so much with that"

### **Appendix 1: Local audits**

Audit	Description		
Information Security and Quality Management Systems	Audit of our systems and services ensuring our compliance with ISO 27001 standards Audit of our systems and services ensuring our compliance with ISO 9001 standards		
Lone working	Audit of lone working clinics and policies		
Safeguarding	Audit of safeguarding cases, safeguarding reporting processes, policies, supervision and mandatory training		
Infection, prevention and control	Audit of clinics, equipment, compliance, policies and procedures, clinical practice		
Hand hygiene	Audit of environment, equipment and compliance with hand hygiene technique, policies and procedures		
Employee compliance	Audit of mandatory compliance requirements including professional registration, DBS clearance, insurance		
Information governance	Audit of data protection and information governance compliance		
Administration support	Audit for call quality, email quality and customer services		
Clinical notes	Audit of the standard of treatment notes and record keeping		
Incidents	Audit of incident and incident processes		
Complaints	Audit of complaints and complaint processes		
Clinical	Clinical reasoning in line with NICE or relevant guidance		
Quality assurance	Meta audits to determine if clinical notes / treatment have been conducted appropriately		
Triage	Audit of clinical guidelines, care plans, chaperone and appointments		
Governance, quality and safety clinical visits	Overarching audit encapsulating all aspects of quality and safety within a clinical environment		
Document control	Audit of the document control register		
Paper Triage (GP Referrals to MCATS, T&O, Rheumatology and Pain Management)	Peer audits for consistency and appropriateness of decision-making		
Audit Register / Schedule	Compliance audit		
Serious diagnosis and red flags	Non-conformances to flag under, over or missed diagnosis		
Injection therapy notes and competence	Clinician audits through observation and clinical notes review		
Radiology referral quality	MRI and IRMER audits for Advanced Physiotherapy Practitioners		
Clinical observation / call review	Clinical reasoning in line with NICE guidance, patient communication and shared decision-making tools (SDMTs)		
Medicines management	Audit of the management of injectable medicines ensuring compliance with policies and processes		

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