



MENTAL
HEALTH
CONCERN

Quality Accounts

2021 / 22

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Quality Accounts Statement

We are delighted to introduce our quality accounts for 2021/22.

We are committed to quality and continuous improvement in all areas of the organisation. Our aim is for the people who use our services, their families and carers, to have the best possible experience and outcomes. Health and social care can be very complex, involving many people, so it's crucial that we work in a proven and collaborative way to make improvements that last, and really make a difference.

Our unique position as a healthcare charity that was born of the NHS means we can continue to partner closely with the statutory services to deliver complex care to the people of the North East. In 2021/22 we positively impacted the lives of over 5,400 people through our NHS commissioned services in the North East.

During 2021/22 we launched our new organisational strategy entitled "Shaping our Future". This ambitious strategy will see Mental Health Concern provide high-quality integrated health and wellbeing services, placing people and communities at the heart of everything we do. Through this strategy we aim to become the VCSE provider of choice for the NHS, partnering with other charities and providers to deliver high-quality outcomes in an integrated manner.

The year was not without its challenges. Easing of Coronavirus restrictions saw our community teams return to face to face work, whilst still maintaining remote interventions for those that required it. This hybrid way of working allows us to reach more people and deliver great outcomes, but it also puts strain on the system.

Despite these challenges, Mental Health Concern has continued to deliver strong quality outcomes across all our services. We also mobilised new commissioned contracts including the launch of a recovery college, a city-wide peer support worker programme and a VCSE (Voluntary, Community and Social Enterprise) Alliance where Mental Health Concern acts as an anchor charity providing micro-commissioning on behalf of the CCG to smaller charities.

Looking forward, 2022/23 is a year of investment for the charity. Due to our charitable status we will be investing a significant value into our North East services to further improve our quality and outcomes. This includes an ambitious estates programme across our older person's services and significant investment in our people. We will also focus on developing our services to meet the needs of the people of the North East, including a re-launched crisis service and dementia centre of excellence for the North East. These services will work in partnership with the NHS to deliver specialist sub-acute care to the people of the North East.

We would like to personally thank all Mental Health Concern colleagues who continue to go above and beyond to deliver high-quality services and outcomes to all our service users. We are constantly humbled to see their commitment to our values and our core purpose. Through them, we can ensure nobody struggles alone.



Adam Crampsie
Chief Executive
Mental Health Concern
and Insight IAPT



Rosemary Granger
Chair of Trustees

Corroborative Statement

Corroborative Statement from Newcastle Gateshead, North Tyneside and South Tyneside Clinical Commissioning Groups (CCGs) for Mental Health Concern Quality Accounts 2021/22

The Clinical Commissioning Groups (CCGs) welcome the opportunity to review and comment on the Annual Quality Account for Mental Health Concern for 2021/22 and would like to offer the following commentary

As commissioners, Newcastle Gateshead, North Tyneside and South Tyneside CCGs are committed to commissioning high quality services from Mental Health Concern. They take seriously their responsibility to ensure that patients' needs are met by the provision of safe, high quality services and that the views and expectations of patients and the public are listened to and acted upon.

Firstly, the CCGs acknowledge that 2021/22 has again been an extremely challenging time for all NHS providers and the entire NHS due to the

unprecedented challenges of the pandemic. The CCGs would like to extend their sincere thanks to Mental Health Concern and all their staff for the commitment shown in responding to the pandemic and for adapting and transforming ways of working, whilst ensuring that high quality services and outcomes continued be delivered to service users. The CCGs would also like to thank Mental Health Concern for the high levels of flexibility they continued to deliver in 2021/22 and for their excellent support in responding to system pressures.

The CCGs have remained sighted on the Mental Health Concern's priorities for improving the quality of services and have continued to provide robust challenge and scrutiny through the Quality Review Group (QRG) meetings. Due to social distancing restrictions, these meetings were held on a virtual basis during 2021/22 which created significant efficiencies in terms of staff time and continued the improved attendance at meetings seen in 2020/21. QRG meetings are a helpful and constructive forum for discussing and reviewing quality issues and it is hoped this collaborative working relationship will continue as an integral part of the new Integrated Care Board (ICB) arrangements.

Mental Health Concern's quality account provides an open, transparent and comprehensive description of the improvement work undertaken. In 2021/22 Mental Health Concern set six quality priorities and the CCGs recognise the good progress made.

The CCGs welcome the progress made with the 'Learning from events and development of a safety culture' priority. The development of a newsletter to share learning from incidents, complaints, audits and quality reviews is an excellent initiative and helps to provide assurance of a positive and safe culture within the organisation. The improvements made to incident reporting procedures to ensure a consistent approach to the categorisation and grading of incidents is welcomed. It is reassuring that from the 573 incidents reported in 2021/22 the vast majority were no/low harm events, and none met the NHS serious incident reporting criteria. It is positive to see that a new incident reporting system was procured to enhance risk management processes, and this will go live later in 2022. The commissioners look forward to working in partnership with Mental Health Concern on their implementation of the national Patient Safety Incident Response Framework, which is scheduled to be launched later in 2022.

The CCGs recognise the excellent progress made with the 'learning from experience' quality priority. It is positive to see that over 30 peer support worker roles, with lived experience, have been established across services and at board level. The CCGs note that within specialist 24 hour services the recruitment of people with lived experience has commenced and there are plans to develop this further in 2022/23.

The CCGs commend Mental Health Concern for achieving the 'Great Place to Work' accreditation and for the excellent progress made in the 'supporting

our staff' quality priority. It is acknowledged that the pandemic has had a significant effect on staff, and it is positive to note that the wellbeing strategy was launched, with a clear focus on health and wellbeing. The CCGs congratulate Mental Health Concern for the positive results received in their wellbeing pulse staff survey; with 93% of their staff reporting that they felt supported with regards to their wellbeing. This is a significant improvement on the previous survey undertaken, where 30% of staff reported that their mental health and wellbeing had got worst. The CCGs fully support the quality priority for 2022/23 to invest in people and create high performing teams, with a strong emphasis on their learning and development.

It is very positive to note the progress made with improving the environments within older people's services with refurbishment works underway at Briarwood, Alderwood and Pinetree Lodge. It is noted that there has been significant capital investment from charitable funds into these services, and this is the first step in the ambition to create a Dementia Centre for Excellence. The commissioners look forward to receiving regular updates on how this important environmental improvement work is progressing.

The CCGs note the progress made in the 'improving data to improve services' quality priority, which included investment in a data warehouse and the launch of a strategy to improve the quality of data held across all services. It is positive to see that dashboards are now in place which facilitate the effective monitoring of data quality and trends. It is noted the data warehouse will continue to be developed over the coming year, which will further enhance and support data informed decision making and the monitoring of key performance indicators.

The CCGs recognise the ongoing work in the continued development of psychologically informed environments and trauma-informed practice quality priority. It is positive to see that the new supervision

arrangements are now in place for all nursing staff who support people with complex trauma; and the evaluation of this was positive. The CCGs supports Mental Health Concern’s commitment over the coming year to trial a similar supervision system for their support workers.

The CCGs recognise the continued focus on reducing healthcare associated infections and regular infection control audits have been undertaken, with appropriate measures being implemented where improvements are identified. It is noted that three COVID-19 infection outbreaks occurred at Pinetree Lodge and Alderwood during December 2021 and January 2022, and these were appropriately managed in line with government guidance. It is reassuring to note the positive outcome from the two Care Quality Commission (CQC) infection prevention and control inspections to Older People’s Services in February 2022. It is acknowledged that despite the challenges of the pandemic the annual quality review and clinical audit programme has successfully continued, with over 300 audits and six quality and service reviews taking place. The emphasis given to clinical audit demonstrates that Mental Health Concern is committed to delivering evidence based best practice and continuous service improvement.

The CCGs commend MHC for their approach to practice in using recovery-focused outcomes in specialist adult services. It is pleasing to see the number of service users in Jubilee Mews and Coalway Lane services who have been supported to achieve a positive outcome and the narrative examples which have been included in the report.

The CCGs note that Mental Health Concern has launched their three year strategy ‘Shaping our Future’ in 2021; setting out four key pillars of activity which were developed in collaboration with staff

and service users. The purpose, mission and value aspirations as set out within the strategy are to be commended and the commissioners welcome this and look forward to receiving updates on how this progresses over the next three years.

The CCGs supports Mental Health Concern’s commitment to receiving meaningful patient and carer experience feedback to improve service provision. It is noted that learning was identified from all complaints received, regardless as to whether they were upheld or not. The plans to improve the accuracy of the recording of compliments and positive feedback received have been noted. The CCGs were impressed with the overall positive results received from the Older People’s Services carer and family survey undertaken in November 2021. It is noted that the lowest scores were around the quality of the estate, and this will be addressed by the refurbishment works currently underway in older people’s services. The CCGs also found it particularly heart-warming to read the comments from community service users and patient stories included in the report.



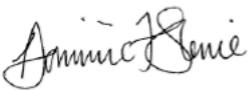
The CCGs welcome the five quality priorities for 2022/23 highlighted in the Quality Account. These are appropriate areas to target for continuous evidence based quality improvement and link well with the commissioning priorities, which will be transferred to the new ICB. The CCGs can confirm that to the best of their ability the information provided within the Annual Quality Account is an accurate and fair reflection of Mental Health Concern's performance for 2021/22. It is clearly presented in the format required and the information it contains accurately represents Mental Health Concern's quality profile and is reflective of quality activity and aspirations across the organisation for the forthcoming year.

The commissioners look forward to continuing to work in partnership with Mental Health Concern to assure the quality of services commissioned in 2022/23.



Julia Young

Executive Director of Nursing,
Patient Safety & Quality



Dr Dominic Slowie

Medical Director

June 2022

For and on behalf of:

NHS Newcastle Gateshead Clinical Commissioning Group
NHS North Tyneside Clinical Commissioning Group
NHS South Tyneside Clinical Commissioning Group

Quality Assurance and Governance

Mental Health Concern is governed by an independent board of trustees and supported by four committees with defined responsibilities to deliver aspects of the board's remit.

Each committee has established formal terms of reference, which support a systemic approach to mapping assurance against key strategic and operational risks. The four board committees are:

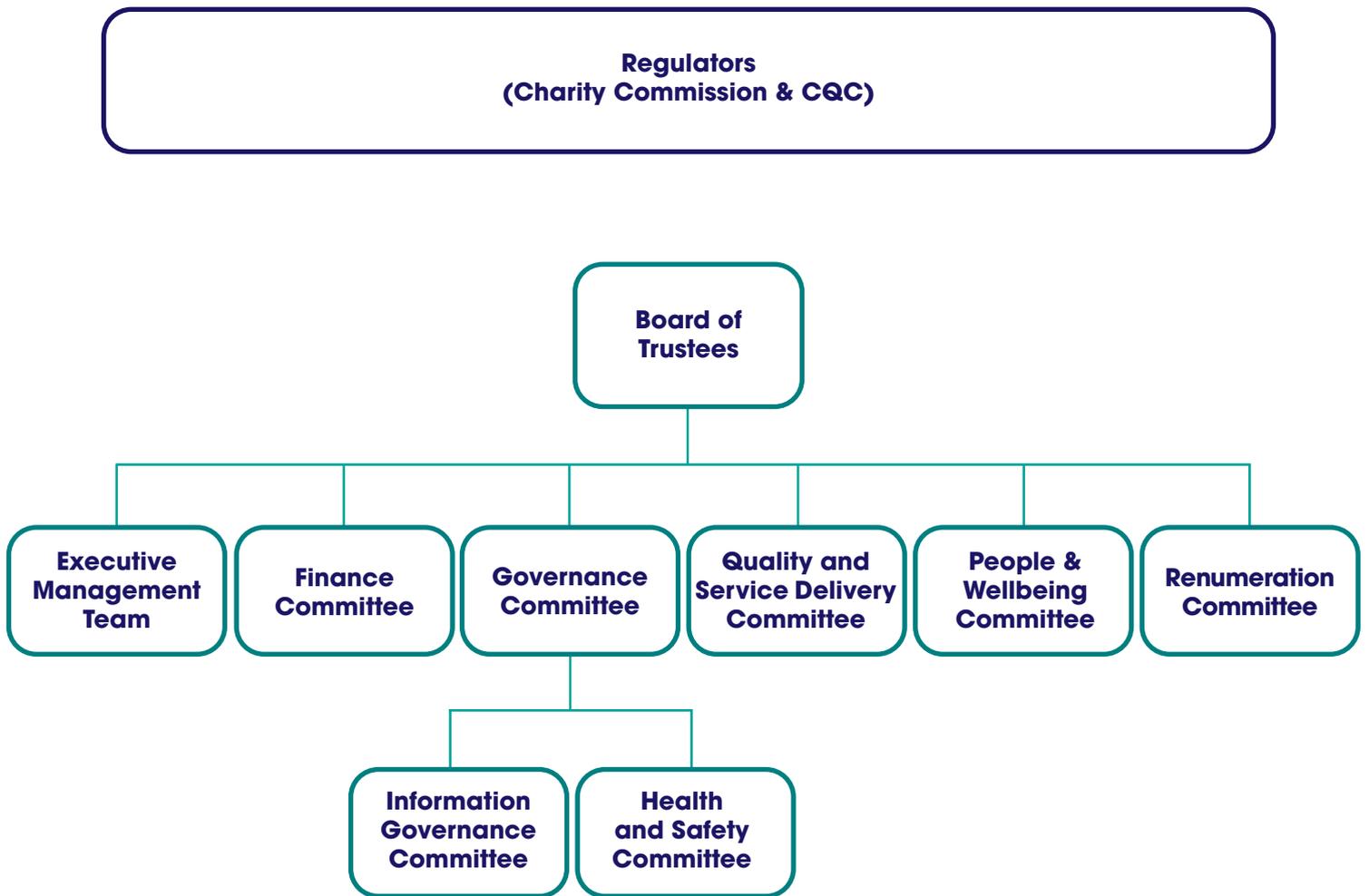
- Governance Committee
- Quality and Service Delivery Committee
- Human Resource Committee
- Finance Committee

Our Quality Governance and Assurance Framework provides clear direction and a shared vision for how we deliver high-quality, safe services. It outlines how quality governance is organised as part of a whole-system approach to improving standards, and protecting service users from unacceptable standards of care.

To ensure a coherent and integrated approach, the framework draws together our key strategies and policies:

- Strategic Plan
- Corporate and Organisational Governance Policy
- Service User Involvement Strategy
- Risk Policy

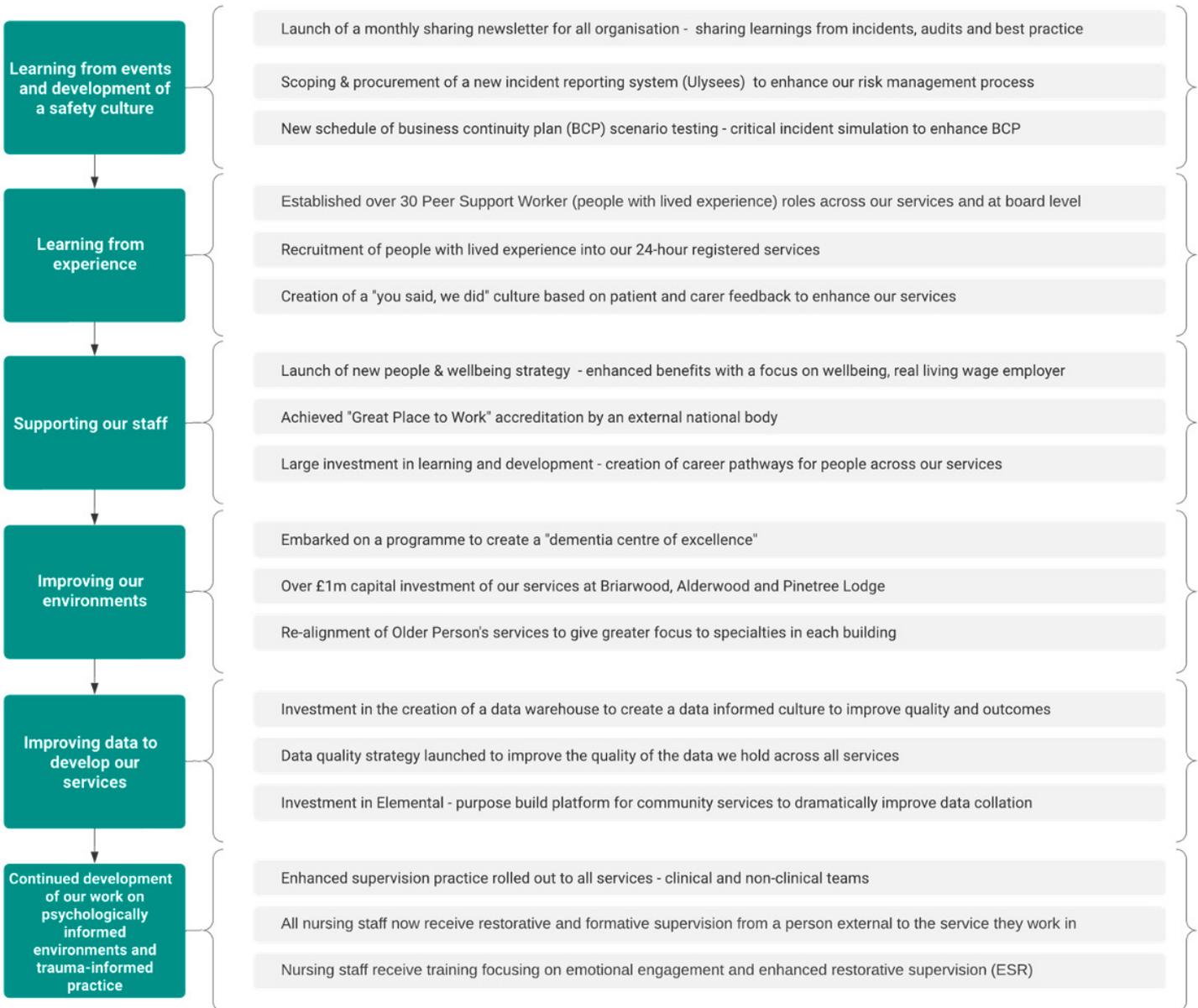
Overview of governance structures



Review of our priorities in 2020/21

As part of our 2020/21 quality accounts, our board agreed four quality priorities. In this section, we outline the progress we have made in delivering these priorities.

What have we done in 2020/21?



Review of our priorities in 2020/21

Priority 1: Learning from events and development of a safety culture

While we await the implementation of the new NHS Patient Safety Strategy and Incident Response Framework we have implemented our Sharing learning newsletter. Our newsletter is a tool for sharing learning with all colleagues and for promoting best practice across the organisation. We collate and share findings from incidents and complaints investigations, as well as from audits and quality reviews.

We procured a new Incident Reporting system in the last quarter of 2022 and we are preparing to go live in 2022. Our new system will greatly enhance our risk management processes.

Priority 2: Learning from experience

As part of our Service User Engagement strategy, we wanted to amplify the voice of people with lived experience in our services, so that we are increasingly guided by the people who use our services. We set a priority to develop Peer Support Worker role(s) in our Adult and Community Services.

During 2021/22 we successfully established Peer Support Worker roles in most of the Community Services. All new services and extended provision have included these roles as an integral part of the workforce with 30 positions in Community services alone. Some of the new staff have been supported by our own services. One of the Peer Support Workers in the Community Development

Team in Newcastle had been supported by one of our Social Prescribing Link Workers in Primary Care and a Navigator in Moving on Tyne and Wear. In a recent newsletter Mark* described the experience of getting back to work. "I had previously been out of work for a long while, so am also really enjoying being part of a team again, especially a team that has such an active shared voice.

“ I’m really proud to be in this role and feel supported with my future. ”

In addition to encouraging service users to take an active role in developing our own services, our Recovery Colleges in Northumberland and South Tyneside are supporting people with lived experience of services to take an active role in shaping the wider provision of services in their locality. In Northumberland students participate in local Development Groups to determine the provision of activities locally. In South Tyneside the Residents Voice feeds provides a forum for people to influence the development of local services.’

Within our specialist 24-hour services we have started recruitment of people with lived experience and look forward to developing this thoughtout 2022/23.

Priority 3: Supporting our Staff

We appreciate that working during a pandemic has been very challenging for our staff and throughout the year we have continued to invest in an ongoing programme of support.

A key part of our Shaping our Future strategy is ‘Investing in our People to create a high performing

organisation’ and our total commitment to supporting our staff has been demonstrated in numerous ways in the past 12 months. This commitment and the positive engagement of our workforce has been recognised externally as we were accredited as a ‘Great Place to Work’ following our positive staff survey outputs. This accreditation is benchmarked against the Top UK Workplaces and requires positive statements across a number of areas including trust and leadership. Some highlights included:

88% people said people care about each other

87% people said their work has special meaning and is not just a job

84% people said they are proud to tell others they work for Mental Health Concern

97% people have confidence in our Executive team

88% people felt warmly welcomed on joining

We also completed a wellbeing pulse survey in which 93% of our people said they felt supported by the organisation with regards their wellbeing.

Priority 4: Improve our Older People's environments

We set out our intentions to launch a major investment project in 2021/22 to improve our older peoples' environment. Significant capital investment has enabled us to work with our commissioners, family carers, staff and other stakeholders in our first step in developing a 'Dementia Centre for Excellence'. Refurbishment of our existing service at Briarwood, Alderwood and Pinetree Lodge has commenced and is due to be completed in summer 2022.

Priority 5: Improve our data to improve our services

Over the past year we have focused on our patient centred data and the quality of that data. We have been ensuring our data quality is of the highest level to make sure we are using accurate and timely information to ensure better data informed decisions can be made to improve our services and accountability. Our work has included transforming our data to more friendly terminology to be easier to understand so that no matter what level of data literacy anyone has they can make use of data to help inform decisions. Dashboards are now in place to allow easy motoring of data quality and highlight any trends or anomalies.

We are continuing to develop our data warehouse and building our data-informed culture by centralising more systems data to enable us to further enhance our data informed decision making and monitor our key performance indicators.

Priority 6: Continued development of our work on psychologically-informed environments and trauma-informed practice

We wanted to expand our enhanced supervision

practice into all services that support peoples with complex trauma. During 2020 we developed a training and trauma awareness package for all staff in the organisation, including non-clinical teams.

Nursing staff in adult services received a day's training focusing on emotional engagement and enhanced restorative supervision (ESR) and the new process was rolled out.

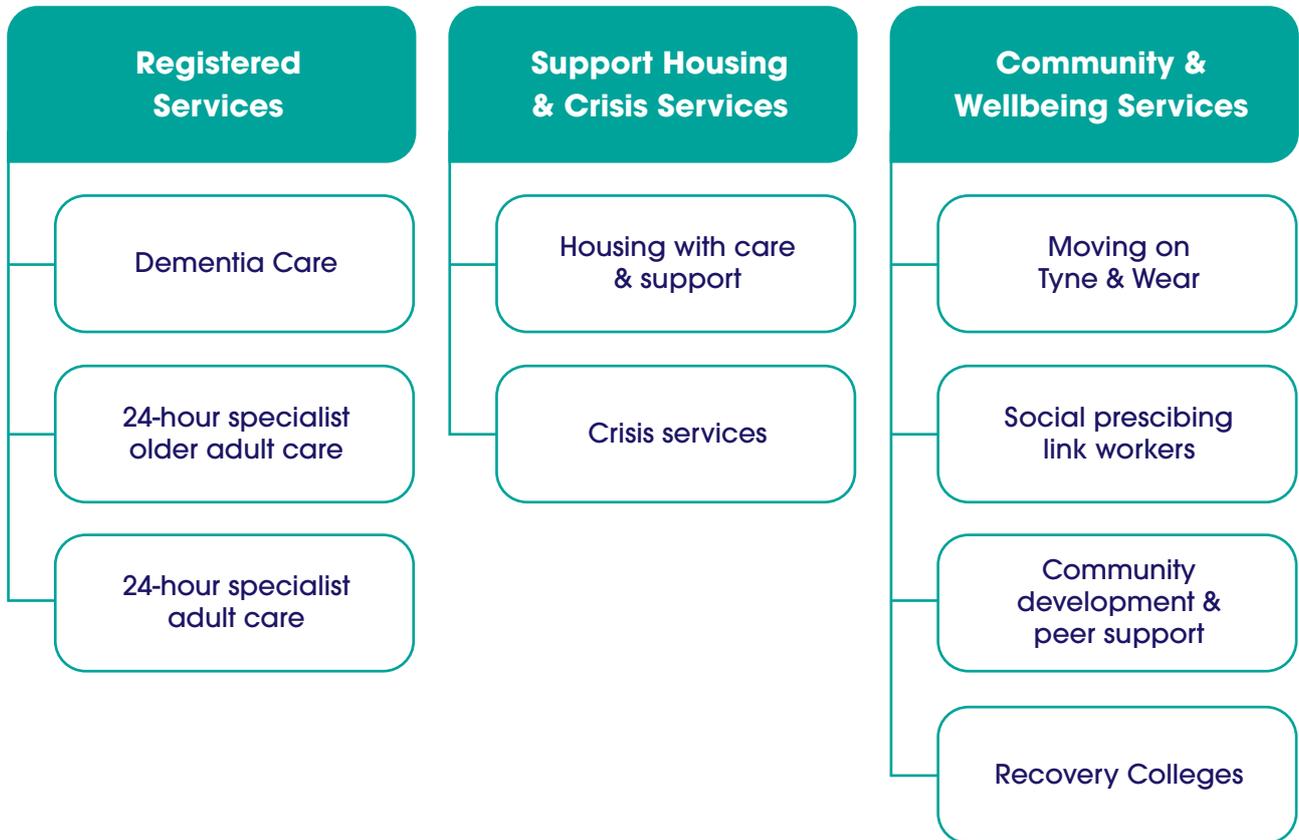
The new supervision arrangements are now in place. The main differences between the old and the new system are that in the new system:

- All nursing staff now receive restorative and formative supervision from a person external to the service they work in.
- Each supervision session has an advance agenda which the supervisor, supervisee and line manager can contribute to.
- Trust should build in the supervisory relationship, such that supervisees are more likely to disclose negative feelings and clinical errors, according to the evidence base.
- Reflective tasks are agreed in supervision sessions, to be completed between sessions, bridging into the next.

Evaluation of our new supervision system shows that we have successfully uncoupled managerial supervision from emotional support with no disruption to the overall support staff received. Qualified staff used to have 1 formal supportive relationship with their manager and they now have 2 - their line manager and their supervisor. Sharing staff support in this way creates the capacity we need amongst staff to enable sustainable trauma informed relationships with people who have multiple complex needs.

Over the next year we will be trialling a similar system amongst support workers in the same services.

Profile of the Organisation



We are a charity providing high quality integrated mental health and wellbeing services based in the North East of England. We are predominantly commissioned by the NHS and local authorities and are proud to provide high-quality, person centred services for people with a wide range of mental health-related needs, including:

- People taking their final steps away from specialist mental health services and striving to get into work, education, or training.
- People recovering from severe mental ill-health, who require support over long periods of time.
- People with severe dementia and complex, challenging needs.

Dementia Care

We believe passionately in providing good care to people with dementia and their families. We also believe that it is entirely possible for a person with dementia to live a good quality and meaningful life. We have provided specialist dementia services for over 30 years. All of our dementia services and staff work to a strong set of values that have a clear person-centred focus.

Sometimes we care for people who, because of their dementia, behave in ways that can be challenging or hard to understand. Our main focus is on getting to know the person as well as we can, so that we can meet their needs in ways that improve wellbeing. This is because we know that a person with dementia is just that – a person. In Gateshead, we provide four types of dementia services:

- 24-hour specialist nursing care
- Respite care
- Short-term assessment (as an alternative to hospital admission)
- Community challenging behaviour support (working with families who are caring for a relative at home and nursing home staff)

24 hour Specialist Older Adult Care

The people who use our specialist older adult service are generally aged 65 or over, but we look at each person's case individually based on need, not age, so we sometimes support people under 65.

Our main purpose is to help older adults with complex mental health issues to live well and independently in the community. We work with people to understand and manage their mental health condition, as well as to develop and practice the skills which are important to live independently. We focus on 'recovery', wellbeing, and good physical health.

24 hour Specialist Adult Care

In our specialist Adult Services, we work with working age adults who may have spent long periods in specialist hospital secure units and have multiple, complex needs. Our services are mostly commissioned by the NHS, which means that we can provide high levels of 24-hour specialist support and can help those people that many other organisations are unable to.

We work responsively and flexibly to support people to transition into a community setting.

Housing Services

Our housing services support people with complex mental health issues to take up tenancies in the community. Our focus is helping people to have



independence and to take control over their own lives and we provide a wide range of help, from really quite intensive bespoke packages, right through to low-level, day-to-day support and advice.

We have four specific services which focus on promoting relapse prevention, employment and increased employability, access to education, living skills, conditions management and positive move on within one to three years:

- Newcastle Supported Housing
- Gateshead Supported Housing
- Early Intervention in Psychosis (EIP) Supported Housing
- Step Ahead Housing

Community Wellbeing Services

We provide a range of services across the North East region and we help people to rebuild their social support networks and develop friendships. We stick by them to navigate through the sometimes-complex health and social care system, using our knowledge of what's out there to link people in.

Together in a Crisis

We work in close collaboration with the Newcastle, Gateshead, South Tyneside, Sunderland, Northumberland, North Tyneside and Tees NHS Crisis services, providing practical and emotional support through the specific issues or problems that are causing distress.

We support adults who are in distress but do not meet the threshold for a medical intervention from NHS mental health crisis services. Amongst the support we provide are:

- A listening ear
- Short-term support, tailored to the issues the individual is facing.
- Support to make informed decisions.
- Links to other support and services.

Initial support is over the telephone and can be followed up face-to-face, depending on the individual's needs.

Moving Forward South Tyneside

Our Moving Forward service in South Tyneside can be accessed by anyone who has experienced mental health issues.

The service focuses on recovery and linking people up with activities, groups and community resources, with the aim for them to:

- Rediscover self-confidence.
- Learn new skills or rediscover old interests.
- Build a stronger social network and have more people to do things with.
- Get back into education or training.
- Find paid or voluntary work.



Northumberland Recovery College and South Tyneside Recovery College

Our recovery colleges in South Tyneside and Northumberland are based on the IMROC (Implementing Recovery Through Organisational Change) principles which focus on helping people rebuild their lives through education and meaningful activity. Students take an active role in creating the curriculum and the delivery of college activities.

Northumberland VCSE (Voluntary, Community and Social Enterprise) Alliance

In order to meet the gaps identified in the new co-produced model and asset mapping in the mental health transformation, MHC are inviting VCSE providers through the Alliance to come together to deliver existing and new offers of support. To work effectively the VCSE organisations have committed to a shared vision and ethos, to co-production and to working together to achieve transformation over and above individual organisational ambition. In most places larger charities operate as commercial rivals and smaller community organisations are not set up to undertake statutory

work. Providing funding via longer term joint CCG local authority contracting through an alliance model has the significant benefit of removing or lessening competition for funds, generating a more efficient use of the public pound and encouraging collaboration and sustainability. This is particularly crucial in ensuring the sustainability and survival of smaller / micro grassroots and community organisations, many of whom have been significantly adversely affected by the current pandemic yet who remain vital to supporting some of the most disadvantaged and disconnected groups of citizens. Alliances are key to building a diverse and thriving local VCSE sector, particularly at a time when so many organisations are facing extreme pressures.

Carer Support Service

In South Tyneside, we provide support to people who have caring responsibilities for people with mental health problems.

We know that caring for someone experiencing mental ill-health can sometimes be tough and we provide free emotional and practical support to carers, helping them to cope with these demands and also be able to 'have a life of their own'.

Ways to Wellness

Ways to Wellness is a social prescribing service for people with long-term health conditions across Newcastle. The service is for patients who are aged 30-74 and any of the following long-term conditions:

- COPD and asthma
- Diabetes type 1 or 2
- Coronary heart disease
- Heart failure
- Epilepsy
- Osteoporosis

Ways to Wellness compliments the medical support that people receive, which helps them to feel more confident in managing their long-term conditions and making positive lifestyle choices enabling them to lead healthier lives and better manage their conditions.

Chain Reaction

Chain Reaction is commissioned by Newcastle City Council and is designed to support older people (55+) to live independently in the community and we are one of three partner organisations that delivery the chair reaction programme.

We offer a variety of support, from sorting out financial worries to organising outings, and responds to the person's unique needs.

Moving On Tyne & Wear

Moving On Tyne & Wear (MOTW) is joint funded by the National Lottery Community Fund and the European Social Fund, as part of their Building Better Opportunities programme, which invests in local projects that tackle the root causes of poverty and promote social inclusion.

Mental Health Concern is the lead organisation for the programme, supported by 17 well-respected local organisations as delivery partners. MOTW supports people in Tyne and Wear who are aged 18+ and out of work due to complex health issues and other barriers, such as long-term unemployment, debt, low skills, or housing issues.

MOTW's team of Navigators gives one-to-one, tailored support to the participants, supporting them to take advantage of existing voluntary or employment possibilities, and work with local employers to create new opportunities.

Our Strategy for 2021 – 2024

We launched our new three year strategy – **Shaping Our Future** – in 2021. The strategy was created in collaboration with our staff and service users and ensures the organisation will be best placed to work within the new integrated health and social care system, not only within the North East but across England.

Purpose We are here so nobody struggles alone

Mission We provide high-quality integrated health and wellbeing services, placing people and communities at the heart of everything we do

Strategy

Integration	Reach	Outcomes	Social Value
<p>Joining together the things that matter</p> <p>We will join up the services across our organisation, creating seamless pathways for all.</p> <p>We will be fully integrated into healthcare systems, offering a seamless service.</p> <p>We will use data and insights to improve joined-up decision-making.</p>	<p>Understanding the needs of our communities and being there for people</p> <p>We will champion equality, diversity, and inclusion for the benefit of all.</p> <p>We will innovate and design new services that reach more people.</p> <p>We will co-create with service users, putting them at the heart of everything we do.</p>	<p>Positively impacting the lives of those we support</p> <p>We will be recognised as delivering the highest standards of clinical and operational excellence across all our services.</p> <p>We will simplify our organisation and become more efficient in what we do.</p> <p>We will invest in our people to create a high-performing organisation.</p>	<p>Delivering a measurable impact to society</p> <p>We will collaborate with local partners in our communities to deliver impact.</p> <p>We will deliver the maximum from the local pound in the local area.</p> <p>We will become carbon neutral by 2030.</p>

We deliver our purpose by ensuring we are financially sustainable

Values Innovation Compassion Accountability Respect Excellence

Our Values

Our mission is to provide high-quality integrated mental health and wellbeing services, placing people and communities at the heart of everything we do. We're here so no one has to struggle alone.

Our values ensure that we will strive to provide the best care, delivered by the best people, to achieve the best outcomes. Our concerns are quality and safety and we will ensure that our values are reflected in all we do:

We are also guided by the things that people have told us are important to them. We have found that the following aspirations are reasonable expectations for any of us to have in life, regardless of whether we are experiencing mental ill-health or not.

Those aspirations are to:

- Develop a sense of meaning and purpose in life.
- Improve personal relationships and social networks.
- Promote hope and self-esteem.
- Develop independence, choice and control.
- Feel in touch with local communities, and be active citizens.
- Increase the stability and consistency in life.

Innovation

- We think creatively and dynamically to give opportunities and the right support to people and our colleagues.
- We work collaboratively to create new ideas and ways of working.
- We challenge norms and always look to improve the way we deliver the best social values.

Compassion

- We act with humility and kindness.
- We are hopeful for people even when they struggle to be hopeful for themselves.
- We show empathy to our colleagues and those we support, to ensure we understand and meet their needs.

Accountability

- We deliver on our promises.
- We hold ourselves and our partners to account in all that we do.
- We listen and act upon what the people we support tell us is important to them.

Respect

- We act with consideration towards others.
- We are open, approachable, and fair.
- We act in a way that is inclusive of others and respectful of their dignity.

Excellence

- We use our experience and expertise to deliver a measurable impact for our communities.
- We go the extra mile to deliver the right outcomes for people and we're proud of what we do.
- We work together to ensure we deliver joined up services where there is no 'wrong door' to getting help.

Registration with the Care Quality Commission (CQC)

Our 24hour residential services are required to register with the CQC. The CQC has not taken any enforcement action against the organisation during 2021/22 and we have not participated in any investigations or special reviews.

The table below provides a summary of the ratings received from the CQC from our last inspections.

Service	Date last full inspected	Overall rating
Jubilee Mews	July 2018	Good
Coalway Lane	November 2018	Good
Alderwood	March 2017	Good
Briarwood	March 2017	Good
Pinetree Lodge	March 2017	Good



In response to the Coronavirus pandemic the CQC carried out infection, prevention and control (IPC) inspections to our Older peoples Services. These were amended to inspections for care homes with outbreaks of Covid-19 to ensure that the Infection prevention and control practice was safe and that services remained compliant with IPC measures. The table below lists the services which received unannounced IPC inspections.

Service	Date	Good practice found
Alderwood	February 2022	<ul style="list-style-type: none"> • Systems were in place to help prevent people, staff and visitors from catching and spreading infection. • Staff and people were tested regularly for COVID-19. A COVID-19 vaccination programme had been implemented. • Visitors to the home underwent the appropriate checks to reduce the risk of spreading COVID-19 to others.
Coalway Lane	February 2022	<ul style="list-style-type: none"> • Systems were in place to help prevent people, staff and visitors from catching or spreading infection. • The environment was clean. Additional cleaning was taking place, including of frequently touched surfaces. • Staff wore appropriate PPE and there were sufficient supplies. The registered manager carried out weekly checks to ensure the service always had enough PPE for staff to access. • Staff had undertaken training in putting on and taking off PPE and other COVID-19 related training. • People and their relatives were supported to keep in contact using a range of technology as well as visits to the home and the homes of people’s relatives. • People and staff participated in a regular testing programme. • Appropriate vaccination status checks were in place.

Clinical audit

Despite some interruptions to our quality review and audit programme for 2021/22 (due to the continued Coronavirus pandemic restrictions), our central governance and quality team were able to undertake a high level of audit activity. Our service user records audits measure compliance and quality against standards to support service user safety and quality of care, professional best practice and information governance.

Over 300 audits took place across our older peoples, adults, and housing with care and support services. Audit standards included:

- Assessment and Risk Assessment
- Needs and Nursing Support Plans
- Medicines Management
- Mental capacity and Restrictive Interventions

Quality and Service Reviews are whole service on site audits which review a range of activity and practice which measures if services are safe, effective, caring, responsive and well led. Standards include :

- Health, safety and risk
- Staff training and Development
- Governance and Leadership
- Financial Handling and controls
- Clinical practice
- Medicines Management
- Safeguarding
- Information Governance

During the year we were able to complete six of these.

Completed Quality and Service Reviews	
Adult Services	Jubilee Mews
Older Peoples Services	Pinetree Lodge
	Alderwood Assessment and Respite
	Community Challenging Behaviour Service
	Briarwood Mill View
	Briarwood Meadows

Learning and Improvement from Audits

Our audit programme provide assurance to our senior managers and trustees of compliance with clinical standards. It is also a quality improvement process which helps us identify where improvement or development are needed. Learning and improvements to practice which occurred following completion of audits during 2021/22 included:

- Using a scale to monitor risks identified as required in the risk assessment policy.
- Recording service user consent and implementing a newly introduced service user agreements
- The assessment and recording of capacity in relation to medication administration.
- Recording of Ministry of Justice and Community Treatment Order restrictions and section17 leave. Recording standards were developed to capture this information and to measure its recording.
- Requirement to differentiate between performance coaching or restorative supervision.
- Checking and recording of expiry dates for as required and boxed medications on a monthly basis.
- Recording of the systems of ordering, receiving and storing medication in individuals records.
- A standard related to the timescales for completing medication support plans was introduced.

Feedback, Complaints and Compliments

Complaints received 2020/21

Seven complaints from Mental Health Concern services were received during 2021/22. This is similar to the previous years 6 and includes complaints resolved informally at service level. Three complaints were upheld, 2 partly upheld and 2 not upheld.

Communication was the main theme found within MHC complaints and these related to service user's within our community services receiving clear information from referral through to discharge.

Within MHC Adult services concern from members of the public was raised in relation to some service users displaying anti-social behaviour and damage to property.

Outcome of complaints and our learning

As part of our Service User Engagement strategy, Learning was identified from all our complaints, regardless of if they were upheld or not. The following improvement actions were carried out:

- Improvements in practice regarding ensuring clarity with action planning and communication given to service users when they first start using services.
- Amendment to process to ensure any lapses in contact with service users in the community were swiftly picked up.
- Additional training regarding information governance and managing service user information.
- Learning and improvement for record keeping and clinical oversight.

During 2021/22, no complaints were referred to the Parliamentary Health Service Ombudsman (PHSO).

Compliments

The recording of compliments and positive feedback from service users, families and other organisations is actively encouraged as they provide valuable insights into the things the organisation does well and identifies good practice from which lessons can be learnt and shared.

Although nearly 70 compliments were recorded over the year we are not confident that all our compliments and positive feedback is being captured. We intend to improve on this next year as acknowledgment of compliments are integral to staff morale.

Selection of comments from our community service users

“

You are so reliable with calls and its better than talking to somebody random every time who doesn't care. You have already helped more than anybody before you. You should be proud of yourself and the work you do

”

“

I've been attending these sessions for the last 2 weeks. The positive impact they are having, in starting the journey to connect and feel safe in my own body, is incredible.

“

I am so grateful that we have caring people like the staff at Pinetree Lodge who work tirelessly every day to look after our loved ones. What would we do without people like yourselves? I really can't praise you all enough. You don't get the credit you deserve. You are my heroes - on behalf of my family, I cannot thank you enough - you are amazing human beings.

On behalf of my family and the Borough of Gateshead, I'd like to say a huge heartfelt thank you to you all.

”

“

I can't believe how reassuring just knowing there's someone there and a service like yours out there is. You were so fast in getting in touch, no long waiting lists and absolutely no judgement at all. It's so nice to have that there and I've recommended it.

”

“

You stepped up when no one else would. I think if it wasn't for your help I would of gave up by now.

“

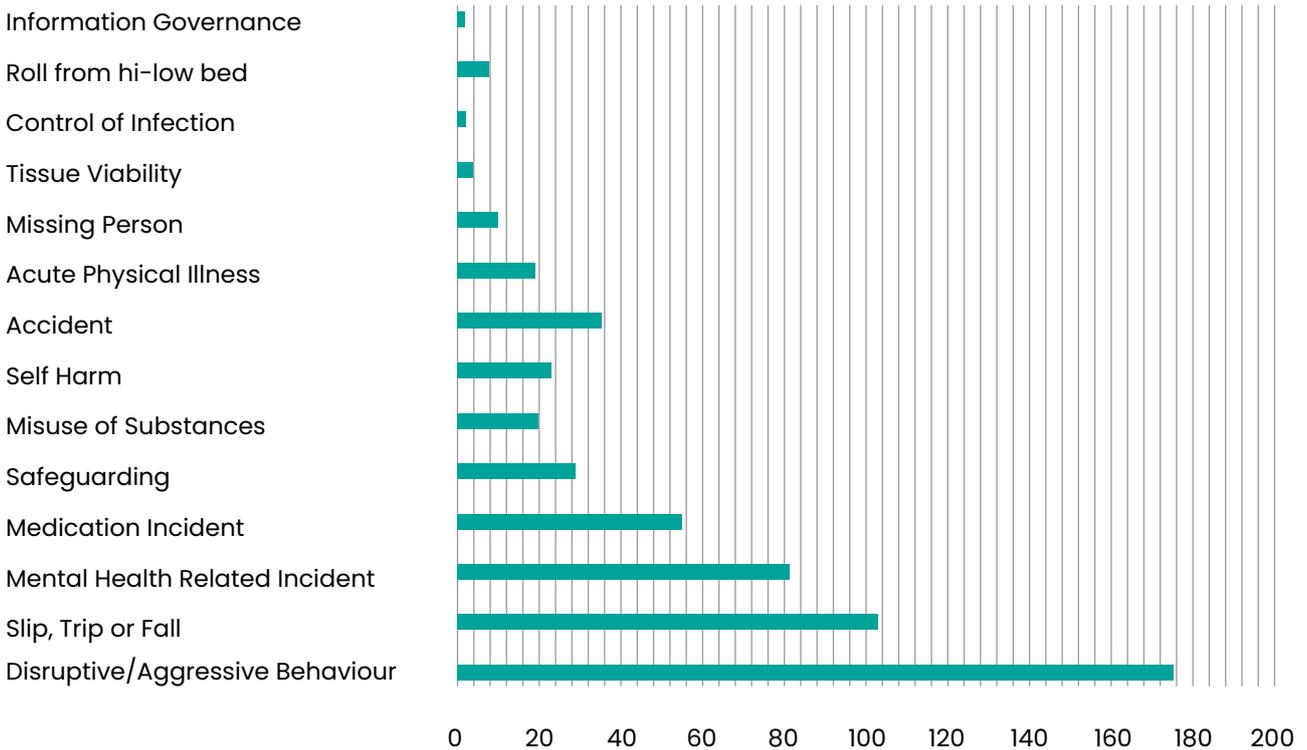
I don't think I could do this without your help, I was alone and it's nice to have someone to listen, understand and not judge. I just need someone to speak to and encourage me to get back on my feet.

Service user incidents

Recording safety events, whether they result in harm or not, provides vital insight into what can go wrong in health and social care and the reasons why. Mental Health Concern is committed to continually improving the quality of service delivery, through the consistent monitoring and review of incidents that result, or have the potential to result in injury, damage or other loss. During 2021/22, 573 incidents were reported across our residential and community services.

The most common themes reported were disruption, aggressive behaviour and slips, trips and falls.

All MHC Incident



When measuring if service users experienced any harm from incidents the organisation uses the national reporting and learning categories

- **no harm** – a situation where no harm occurred: either a prevented patient safety incident or a no harm incident
- **low harm** – any unexpected or unintended incident that required extra observation or minor treatment and caused minimal harm to one or more person
- **moderate harm** – any unexpected or unintended incident that resulted in further treatment, possible surgical intervention, cancelling of treatment or transfer to another area, and which caused short-term harm to one or more persons
- **severe harm** – any unexpected or unintended incident that caused permanent or long-term harm to one or more persons
- **death** – any unexpected or unintended event that caused the death of one or more person

The vast majority of our reported incidents were no harm or low harm events. Moderate harm was experienced in a small number of cases where service users required treatment or additional monitoring. No incidents resulted in serious harm or required reporting as a serious incident as per the NHS serious incident reporting framework.

Our incident reporting reflects a proactive improvement culture and over the year we have made improvements to enable a consistent approach to categorising and grading incidents. Our Quality and Service Delivery Committee review analysed service user safety incidents and we now have a Learning and Sharing Newsletter as part of our robust and effective systems for sharing learning and ensuring actions identified through incidents prevent similar events occurring.

Duty of Candour

Duty of candour is the act of being open and honest

with service users and their families when avoidable harm has happened in our care. It underpins a safety culture which exonerates blame and focuses on learning, leading to improved outcomes and experiences for people. The governance and quality team ensure that every aspect of duty of candour is applied to all notifiable safety incidents which includes starting with saying sorry. The organisation extends this to all adverse events.

Learning and improvements from incidents

The identification of learning themes from incidents helps organisations to identify key areas of improvement. As a learning organisation we aim to ensure that we use all available opportunities to identify and embed improvements as a means of providing the safest possible care and support for our service users. Lessons learnt from incidents are disseminated across services with the aim of improving the quality of care. We have had a Good Practice Notice process in place since 2018 as a way of communicating and implementing change following incidents and complaints. This, together with our learning newsletter, help ensure we share the learning widely across all services.

A number of reviews into incidents identified the following learning which was action planned and shared across services:

- Lack of service user engagement should not affect completion of risk assessments within adult services
- Improvements in administration and management of prescribed covert medications within older peoples services
- Improvements in support plans for service users subject to Mental Health Act restrictions within adults services
- Impact of environmental factors on falls
- Guidance and training regarding risk rating of incidents

Infection prevention and control

The Covid-19 pandemic continued in 2021/22 and despite our excellent record of staff vaccinations, strict adherence to infection, prevention and control measures and compliance with guidance for visitors to our residential services we experienced three Covid-19 outbreaks within our older peoples units.

Pinetree Lodge experienced a Covid-19 outbreak in Dec/21-Jan/22. The first case was a staff member, displaying symptoms and later confirmed a positive result on the 26.12.21. A total of 10 residents tested positive between 15.01.21 and 18.01.22. All residents were isolated as per government guidance.

Alderwood had two Covid-19 outbreaks. The first included staff and residents (Dec 21/Jan22 and in the second outbreak only a small number of staff were effected during March. All effected residents and staff recovered well with no lasting long term effects.

Covid has challenged all our services in different ways, receiving support from our commissioners, local authorities and Public Health England helped greatly in terms of confirming our handling of the pandemic was correct and consistent across all services.

Control of infection and environmental audits

Our programme of service led, quarterly infection prevention and control audits continued throughout the year with 18 audits completed across our 24hr services throughout the year. Audits were carried out by our Control of Infection Link Nurses and findings in relation to ongoing maintenance and renovations of fixtures and fittings within some of our older peoples units have led to estates action plans with improvement working taking place.

An ongoing theme within our adult services was supporting service users to maintain their own environments, especially bedrooms. Steps including introduction of a rota for assisted thorough cleans have been set up.



Internal Audit

Our Internal Auditors, Audit One, finalised five risk based audits during 2021/22. This objective assurance has supported us to improve, develop and maintain sound systems of internal control.

Audits included:

- Contract Management
- Corporate and Local Induction
- Pre-employment Check
- Accounts Payable

Information governance and the Data Security and Protection Toolkit

Good information governance means keeping the information we hold about our service users and staff safe. The 'Data Security and Protection Toolkit' (DSPT) is the way we demonstrate our compliance with national data protection standards. All organisations which provide NHS services are required to make an annual submission in order to assure compliance with data protection and security requirements.

Mental Health Concern has an Information Governance Committee which ensures appropriate controls are in place to safeguard people's personal and sensitive information and monitor assessment against standards. We have consistently achieved compliance with all mandatory standards within the toolkit and expect to achieve compliance again for 2021/22 when we submit our self-assessment by the end of June 2022.

Our toolkit submission for 2020/21 was made on 28 June 2021. We met all required standards.

Responding to safety alerts

Patient safety alerts are issued by NHS England/Improvement (NHSE/I) to warn the healthcare system of risks and provide guidance on preventing incidents that may lead to harm or death. The Governance and Quality Team co-ordinate and monitor the safety alert process. When alerts are received via the central alerting system, they are disseminated to appropriate clinical teams which ensure that we are already compliant, or actions are taken to ensure we become so.

Our Performance and Outcomes

24-hour Adult Services

Recovery-focused outcomes

Recovery-focused outcomes (RFOs) form the core of our approach to practice in our specialist adult services. The approach uses six domains which define recovery:

- Meaning and purpose.
- Relationships and interdependence.
- Hope and self-esteem.
- Independence, choice, and control.
- Citizenship.
- Stability and consistency.

We support our service users to achieve greater meaning and purpose in their lives and capture this to help chart their recovery, we capture this as an outcome with a score on the recovery star and narrative, using it as evidence of our effectiveness. Below is the number of outcomes achieved within our Jubilee Mews and Coalway Lane service.

Recovery-focused outcome domain	Number of service users supported to achieve outcome
Employment/employability	6
Education/educational	7
Interests, creativity & expression	30
Moving on to more independent living	13
Develop or improve independent living skills	27

Sample recovery-focused outcomes

Below are anonymised examples of positive recovery outcomes.

Hope & Self Esteem

A service user (F) said that they would like to learn to cook some new recipes. Staff agreed, the normal range of food the service user prepared was limited and they organised a cooking session. During this, the service user watched, while another more experienced peer cooked a meal. F expressed belief in themselves that they would be able to learn to make this dish and other recipes. Cookery sessions are now ongoing.

Meaning & Purpose

A service user completed their math's course at college, achieving top marks in their class and they have since approached staff to discuss moving on to more independent living.

Independence Choice & Control

A service user was drinking alcohol regularly before rising and using illicit substances quite heavily off the premises. They was not taking self-administered medication and staff intervened temporarily. Self-administration has been re-established with

regular spot checks. Alcohol and illicit substance use have reduced markedly, and the service user is recovering their life skills such as shopping, cooking, exercise, and socialising.

Relationships & Interdependence

A service user had significant behaviours that challenge since they started living in one of our services. They are described by psychologists as being in a constant 'threat mode' in relation to anyone with a helping role towards them, or people they live with. This is consistent with the service user's early trauma. Taking a trauma informed approach, staff have consistently applied boundaries and sought to collaborate and build trust with the service user. More recently this service user is noted to be engaging well with an expanding number of staff, showing the respect to them that until recently, they reserved only for peers the service user does not live with. Behaviours that people find challenging, are markedly reduced.

Citizenship

A service user has been doing voluntary work at the local shop, unloading the van, stacking shelves, and pricing items. They have built up friendships within the local community and has made good friends with the owner. The shop owner invited the service user to a restaurant in Newcastle for a meal.



Community and Wellbeing Services

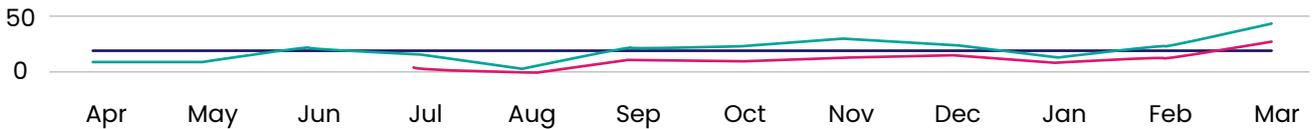
Our Community and Wellbeing Services help over 1,000 people each year to get back into work, education, or to increase meaningful activity.

Together in a Crisis (TiaC) Referrals

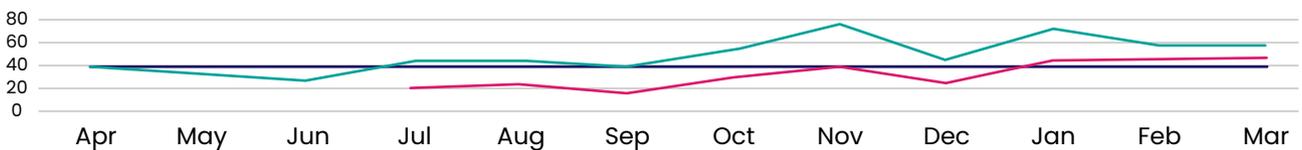
Demand for our TiaC services has continued to be high throughout the year across all of our services. Our newest TiaC service in Teesside accepted its first referrals in February 2022 and we have seen this steadily grow.

Together in a Crisis (TiaC) Referrals

South Tyneside



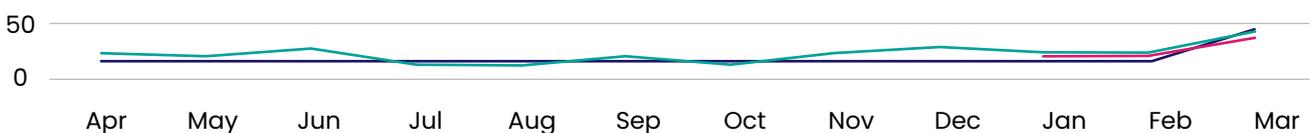
Sunderland



North Tyneside



Northumberland



█ Referrals
 █ Target
 █ Engagement

Older Peoples Services

Dementia care and Body Mass Index

Body weight is very important to monitor for people living with dementia.

We are pleased to report that most people who live in our dementia services have a healthy BMI. Older and frail people can benefit from having a slightly higher BMI than the general population, and we worked closely with our dietetic and other physical health colleagues to extend the range of what we consider to be a healthy BMI to 29.

Service	Overweight	OK	Underweight	n
Pinetree Lodge	4	18	2	24
Briarwood Meadows	1	5	2	8
Alderwood Assessment	4	6	1	11
Totals	9	29	5	43

Dementia and tissue viability

Tissue viability incidents across the year have been very low, with no category 3 or above pressure damage occurring. The table below shows how many people have been assessed as being low, high, or very high risk of sustaining pressure damage against the number of actual tissue viability incidents reported.

Service	risk (- 10)	No. of IR	high risk (10- 15)	No. of IR	very high risk (15+)	No. of IR
Pinetree Lodge	0	0	15	0	9	0
Briarwood Meadows	0	0	1	0	7	0
Alderwood Assessment	1	0	6	0	4	0
Totals	1	0	22	0	20	0

Service user satisfaction and experience

Carer / Family Survey Older Peoples Services

In November 2021 we invited relatives and carers of residents within our older people's homes to complete a survey to tell us of their experience and their views about the care and quality of the service provided to their relative.

We received 22 completed surveys which was 61% response rate.

Question	Agree	Question	Agree
I am involved in decisions about my family member's care.	100%	Staff look out for my family member	91%
Staff manage my family member's risks to increase their choice and control	96%	My views as a carer are listened to	81%
My family member's key worker is open minded.	86%	If I wanted to complain, I'm confident that I would be taken seriously.	90%
Staff treat my family member with kindness and respect	96%	I feel my family member and their belongings are safe	96%
Staff believe in my family member and know that they have potential.	95%	Staff follow through on commitments they make to me	90%
My family member's key worker and I always discuss their needs together	76%	Broken items in the house are repaired promptly	87%
Staff have helped me to understand the type of support my family member needs	86%	The home is well decorated	64%
The home is in good condition and comfortable	80%	Staff are creative and resourceful when they support my family member	90%
The home is clean and hygienic	90%	My family member's key worker is skilful and knows how best to support them	89%
My family member's key worker is open and honest	90%	My family member's key worker is knowledgeable	89%
My family member's key worker keeps me informed of any changes in their care	81%	My family member's quality of life has improved since moving here	84%
Staff accept my family member for who they are	91%	Staff put a lot of effort into supporting my family member.	95%
I feel listened to	96%	Staff know my family member well.	96%

The learnings from this feedback have been incorporated into our strategic priorities.

Our lowest scores are consistently around the quality of our estates where there has been a lack of investment. This also has an impact on slips, trips and falls as our environments are sometimes less than ideal. Together with our learning from incidents and service user / carer feedback we are investing over £1m of our charitable funds into our estates. This work will be completed in 2022.

*Nigel's Story

Nigel lives at Alderwood and during a visit to a bird of prey experience day staff observed how much Nigel enjoyed interacting with the different birds. He appeared to have a real love for birds so the team came up with a plan to encourage him to spend some time outside of his room and enjoy some fresh air in the garden, to boost his wellbeing. They arranged for a bird feeder to be installed in the garden to encourage more birds to visit the area and to provide Nigel with a project he could enjoy getting stuck into. They got him a bird-watching book, so he could identify the different birds and keep track of them in a log

Nigel also helped the team to build a bird box and fix it to one of the trees in the garden, in the hopes of attracting some feathery residents!

On colder days, Nigel can also keep track of the birds that visit the garden from the comfort of his bedroom, as the feeder is conveniently placed just outside his window.



*Edith's Story

Edith lives at Briarwood and is a keen artist. With support from the staff team Edith was encouraged to express herself through artwork and the effects this has had on her wellbeing has been amazing. Edith now enjoys socialising with other residents and baking. She has created fantastic artwork for our buildings and has brought real joy to her fellow residents. Her wellbeing improved so much that she set up a 'Green Group' at Briarwood as she cares a great deal about our planet. The group have already set up a recycling scheme system and it is all thanks to Edith.



*names changed

Staffing and staff wellbeing

Our wellbeing strategy was launched towards the end of 2020/21 and a summary of initiatives to support our staff are:

Embedding of our organisational values in all that we do, for example celebrating through our Values awards and putting at the heart of our recruitment process.

A fully relaunched benefits package to support our staff including:

- 30 days annual leave plus buy and sell, volunteering programme offering everyone 2 days per year, salary sacrifice (car lease and technology), life assurance x 3 salary
- New wellbeing programme including access for all to Vitality at Work which includes an Employee Assistant Programme (including Counselling and CBT), virtual GP, unlimited physiotherapy, Headspace app, virtual health checks and wellbeing incentives including activity challenges with prizes. This is coupled with internal programmes e.g. Mindfulness sessions.

Enhancements to our learning offer including annual CPD calendars tailored to role, access to a suit of newly enhanced learning via the Learning Hub, a relaunched induction programme and fully funded apprenticeships including PWP, Support Worker and Leadership.

A leadership academy including a new leadership programme in design and access to fully funded leadership apprenticeships.

An open and honest culture based around two-way dialogue and colleague voice – this includes a Colleague Forum, Wellbeing Champions, network groups (LGBTQ+, Neurodiversity and BAME), an innovation fund through which our people can submit ideas for service improvement, and a visible Executive team who host welcome sessions with all new starters and host listening sessions with our workforce together with a bi-monthly 'stand up' for all.

Statutory and Mandatory training

We ensure our staff receive appropriate support, training and professional development to enable them to carry out the duties of their role.

During 2021/22 we improved our training portfolio to make it easier for colleagues to know what training they needed to complete. Changes to our Learning Hub has enabled managers and team leads to more easily monitor compliance with all mandatory training modules.

During 2022 we have focussed on aligning our statutory and mandatory training with Health Education England's (HEE) elearning for healthcare system. This will enable our colleagues to have access to high quality training based on up to date national guidance and best practice.

Freedom to Speak Up

Our Freedom to Speak Up Guardian has supported ten colleagues across the organisation in speaking up of their concerns. Six of the people speaking up wished to remain anonymous and the guardians role is, to ensure that all people receive feedback on how their concerns are being address. We are committed to creating an open and transparent culture where every member of staff can speak out safely. Over the next year we will continue to raise the profile of the Freedom to Speak Up Guardian and triangulate the information we have with other sources to ensure that best and safe care is delivered to our service users.



Our quality priorities for 2022/23

In line with our new organisational strategy the board have agreed five quality priorities for 2022/23. These priorities will deliver further developments to our services, enabling us to deliver high-quality outcomes.

Priority 1	Further investment in our estates portfolio and registered services
Priority 2	Integration of our community services with IAPT creating seamless pathways to improve outcomes
Priority 3	Investing in our people to create high performing teams
Priority 4	Fully develop our crisis offer to deliver sub-acute crisis care in conjunction with our local mental health trusts
Priority 5	Launch “journey to outstanding” programme across all registered services with the aim to achieve outstanding CQC ratings

Our quality priorities for 2022/23

Priority 1 Further investment in our estates portfolio and registered services

Large scale investment across Housing with Care and Support, Older Person's and Adult services

Development of a large sub-acute centre of excellence on the Briarwood site

Re-align our supported housing offer in conjunction with CNTW to match the needs of their patients

Priority 2 Integration of our community services with IAPT creating seamless pathways to improve outcomes

Create meaningful pathways in and out of our community services for IAPT users, including extension of Recovery Colleges

Expand Peer Support programme in all services, particularly IAPT

Expand employment services in IAPT and integrate MOTW services fully into all community services

Priority 3 Investing in our people to create high-performing teams

Large investment in Learning & Development across all services

Launch funded nurse training placements (working in conjunction with CNTW academy)

Expand our non-clinical support roles in registered services (e.g. Nurse Support Practitioners)

Priority 4 Fully develop our crisis offer to deliver sub-acute crisis care in conjunction with CNTW and TEWV

Develop TIAC model into a new sub-acute crisis service

Development of a step-care model for crisis including triage, virtual support, and face to face

Create seamless integrated pathways with primary & secondary care and community providers

Priority 5 Launch "journey to outstanding" programme across all registered services with the aim to achieve outstanding CQC ratings

Launch new audits based on CQC outstanding criteria

Further develop our incident reporting based on the new system and implementation of learning

Invest in our digital infrastructure to implement a new clinical management system & further develop data/insights

The logo for Mental Health Concern is centered in a white circle. It features the text "MENTAL HEALTH CONCERN" in a bold, sans-serif font, stacked in three lines. To the right of the text is a teal circular icon containing a white stylized letter 'C' with a small teal dot above it.

MENTAL
HEALTH
CONCERN