Essex Child and Family Wellbeing Service Quality Account 2018/19

Services delivered in Essex by Virgin Care Services Limited
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processes which are standardised across the business
Priority 3: Continue to be recognised as an outstanding employer

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How Virgin Care identified its priorities for 2019-20

Priority 1: Ensuring service quality, safety and enhancing user experience:
Providing excellent clinical outcomes, meeting and exceeding relevant
standards and regulatory requirements
Priority 2: Robust governance: fostering safeguarding and quality assurance
processes which are standardised across the business
Priority 3: Continue to be recognised as an outstanding employer
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Important note about this document

This document aims to meet our requirements as a provider to deliver a Quality Account relating to the services we directly deliver in Essex. Virgin Care Services Limited, as a prime provider, directly provides services to people across the county and sub-contracts some services to other providers.

On the request of our commissioner, this document seeks to provide an overview of our achievements as a provider and covers the achievements we have made in partnership with other providers whose work we oversee. This style of partnership working – with providers working together to deliver improved services – has produced strong, tangible results.

Virgin Care would not have been able to deliver many of the improvements mentioned in this document without the hard work and dedication of our partners who deliver many services directly to patients on our behalf across Essex.
Part one
Executive Summary

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

Virgin Care delivers services on behalf of Essex County Council (ECC) and West Essex Clinical Commissioning Group (CCG) in Essex, and is one of a number of providers of health and care services locally.

This document is a demonstration of Virgin Care’s commitment to providing the best quality community healthcare services to citizens in Essex. Quality Accounts are an opportunity for an organisation to take stock of what has been achieved and to look ahead at what is planned for the coming year. They also act as a catalyst for our dedicated, hard-working colleagues who deliver services every day, guiding them and helping them focus on continuing to improve services.

This document contains a great deal of information on the quality of Virgin Care services, and the information has been arranged into the three areas of quality defined by the Department of Health and Social Care: safety, clinical effectiveness and patient experience.

Virgin Care has used this information to examine its performance and set priorities for the coming year. It also helps make sure our priorities reflect the needs of the people who use our services and the local community. To help complete this report, Virgin Care has involved a range of people including those who use services, community representatives, commissioners and frontline colleagues.

If you would like:

- A hard copy of this quality account, or a copy in another language please contact our Customer Experience Team on 0300 303 9509* or email customerservices@virgincare.co.uk
- To talk to someone about your experience of our services or to find out how to access specific Virgin Care services you can speak with our Customer Experience team in confidence on 0300 303 9509* or by email: customerservices@virgincare.co.uk
- To give us feedback on any aspect of this document – please email communications@virgincare.co.uk, or speak to the Customer Experience Team on 0300 303 9509*

*030 numbers are charged at the same rate as 01 and 02 numbers and are usually included in free minute’s bundles.
Review of the services provided

The majority of services provided by Virgin Care Services Limited in partnership with Barnardo’s and named locally as the Essex Child and Family Wellbeing Service (ECFWS) are commissioned by Essex County Council (ECC). In addition, some children’s services in the West Essex area are commissioned by West Essex Clinical Commissioning Group (WECCG).

Barnardo’s is the principal partner organisation, with additional sub-contracts with Youth Enquiry Service (YES), Castlepoint Association of Volunteers (CAVS), Home-Start Essex and Home-Start North Essex (Colchester and Harwich). See below for the model of the contract.

The ECFWS contract

ECFWS, ECC and WECCG have together over the last two years demonstrated a strong belief and commitment that both commissioner and provider can, and will, work together with a common purpose. This is encapsulated in collaborative efforts to hone the newly introduced Outcome Measures and to work together to solve issues as they have arisen, for example in staffing, through being mutually supportive whilst being held to account to honour contractual responsibilities.
This is summed up in the ECFWS Motto, Vision Statement and Mission Statement:

**ECFWS MOTTO**

"Striving to improve health and wellbeing outcomes for children and families in the community, for the community, with the community."

**ECFWS VISION STATEMENT**

We strive to continue to improve, build and develop; aiming to give the very best of ourselves to the families and communities we serve and to enable them to thrive.

We will do this by providing joined up services that are ‘without walls’. Our core approach is:

- Holistic and inclusive
- Kind and compassionate
- Outcome focussed and evidence based
- Innovative and creative
- Courageous and proactive
- Professional and dedicated

**ECFWS VISION STATEMENT**

Our mission is to provide first class universal public health and care and specialist community health services to the children, young people and families of Essex.

Through a unique partnership between Virgin Care and Barnardo’s, two nationally renowned providers in their respective fields, we aim to deliver a range of high quality community and family focussed health and wellbeing services. These include health visiting, school nursing and family support for families and children from pre-birth to 19 years.

In West Essex we are also commissioned to provide specialist community children’s healthcare, including community paediatrics, community children’s nursing, and paediatric therapies and dietetics.

We are dedicated to delivering safe, accessible, effective, and professional child and family health and wellbeing services with integrity and accountability using outcome focussed, evidence based care.

Our aim is to work wherever needed to improve the lives of children, young people and families and the communities in which they live by helping to enable them to:

- Promote their own and their family’s physical and mental health and wellbeing
- Create home and community environments where children, young people and their families are safe and can learn, grow and thrive
- Be resourceful, self-supportive and supportive of others in order to build resilience and be future proof
Essex County Council (ECC) commissioned services

The contract for services provided by the ECFWS, which is co-commissioned by ECC and WECCG commenced on 1st April 2017. The ECC-commissioned component includes the delivery of pre-birth to 19 years integrated child and family services which are made up of services previously known as: 0-5 Healthy Child Programme, Healthy Schools Programme, 5-19 Healthy Child Programme and management of Children’s Centres (now known as district Family Hubs and satellite Healthy Family Delivery Sites).

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

The services are delivered and managed within four geographical Essex Quadrants that encapsulate local government districts:
- Mid (Braintree, Chelmsford, Maldon)
- North (Colchester, Tendring)
- South (Basildon, Brentwood, Rochford, Castle Point)
- West (Epping Forest, Harlow, Uttlesford)

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

All face-to-face services are provided by 29 integrated, geographically based Healthy Family Teams (HFTs) which include colleagues from both Virgin Care and Barnardo’s.

All services and activities are outcome focussed and are designed to meet one or more of the 22 outcome measures commissioned by ECC.
Essex Healthy Family Team Service Delivery Model

Illustration One

Healthy Family Teams & Partner Agencies incl. GPs

Family Hub & Satellite Delivery Sites

Secondary schools, feeder primary schools & nurseries

Local communities and neighbourhoods

Children & Families
## Review of the services provided

The services Virgin Care provides in Essex include:

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Brief Description</th>
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| **Health Visiting**   | • Largely home based or Family Hubs and satellite Healthy Family Delivery Sites based, undertaking mandated checks e.g. antenatal contact, new birth visit, six to eight week assessment, under one year and two and a half year checks  
                        • Health Visitors work with children and families from notification of antenatal from 28 weeks (or earlier if vulnerable) through to 8 years of age  
                        • Additional care may include support around, for example, Sudden Unexplained Death of Infant (SUDI), the maternal mental mood assessment and school readiness to support development  
                        • Providing care and support from antenatal to eight years of age, including advice and signposting for issues including Safeguarding |
| **School Nursing**    | • Largely school-based support, advice and signposting for children and young people aged eight to 19 years, including around Safeguarding issues, mental health and PSHE (personal, social and health education).  
                        • Continued support to young people up to 25 years who have Special Educational Needs and Disabilities (SEND), ensuring a smooth transition to adult services  
                        • Chat Health on-line support and signposting forum |
### Family Support Interventions
- Family support delivered from district-based Family Hubs and satellite Healthy Family Delivery Sites as well as in families’ homes
- Available to all families but with a particular focus on vulnerable children and families (priority groups), including those under five years who need early support and help to be ‘school ready’ as well as non-working households, Traveller families and those with other vulnerabilities that can result in inequalities facing children
- Largely delivered by Healthy Family Support Workers and colleagues from partner agencies who are hosted to deliver services from Family Hubs and Healthy Family Delivery Sites
- Includes a range of activities including one-to-one and child and/or parent-centred groups

### Safeguarding Children Team
- Work within a stand-alone team which is embedded in each of the four quadrants providing specialist support, advice, training and supervision to colleagues in Essex CFWS in relation to Safeguarding and child and family protection
- The team oversee the attainment and maintaining of improved quality in service provision in relation to Safeguarding from assessment of findings in serious case reviews and local investigations

### Looked After Children Team
- Work within a stand-alone team that is embedded in each of the four quadrants and provide pathways of care for Looked-after Children, Young People, and Care Leavers up to 19 years of age
- Activities include conducting Looked After Children Initial Health Assessments (IHAs)
Healthy Family Teams

All of the above services and colleagues sit within quadrant and locality based Healthy Family Teams and will offer outcome focussed support to families, including working with them on, for example:

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

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

A key focus going forward for ECC will be realising whole systems benefit by joining up different agencies and commissioning responsibilities in a single contract with the aim of ensuring a better user journey.

All services and activities are outcome focussed and many are designed to meet one or more of the 5 outcome measures commissioned by WECCG.

<table>
<thead>
<tr>
<th>ECC Commissioned ECFWS Services</th>
<th>Brief Description</th>
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<tbody>
<tr>
<td><strong>Service Type</strong></td>
<td><strong>Description</strong></td>
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</tbody>
</table>
| Community Paediatrics | - Community developmental medical advice delivered by Consultant Paediatricians, Specialty Doctors and a Clinical Psychologist  
- Primary focus is on developmental diagnostics, advice and treatment, including those related to Autistic Spectrum Disorders (ASD) and Attention Deficit Hyperactivity Disorder (ADHD).  
- Service includes:  
  - The ECFWS SEND Designated Medical Officer  
  - The ECFWS Named Doctor for Safeguarding |
<p>| Community Paediatric Speech &amp; Language Therapy and Dysphagia | - The Paediatric Speech and Language Therapy service provides assessment, diagnosis, treatment, support and advice for children and young people with speech, language, communication and feeding/swallowing difficulties |
| Community Paediatric Physiotherapy and Occupational Therapy | - The Community Paediatric Physiotherapy and Occupational Therapy services provide assessment, diagnosis, treatment, support and advice for children and young people with physical, neurological, perceptual or sensory difficulties |</p>
<table>
<thead>
<tr>
<th>Service</th>
<th>Description</th>
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| **Children’s Community Nursing**| The Children’s Community Nursing service provides community paediatric nursing support to children, young people and their families who have a range of health and medical needs, including providing:  
  - Domiciliary nursing procedures to children with acute or long-term health conditions or end of life care being managed at home |
| **Specialist Paediatric A&E Liaison** | Specialist Paediatric Accident and Emergency (A&E) Liaison nurses collect and analyse information regarding children, young people and their families who have had an attendance at A&E for a medical health need. This information is shared with the relevant health professionals in ECFWS to offer additional support and care where needed |
| **Specialist School Nursing**    | Specialist school nursing delivered to children with health or medical needs attending the three special schools in West Essex                                                                                   |
| **Children’s Community Continence** | The Paediatric Continence Advisory Service provides assessment, support and advice for children and young people with health related continence issues                                                              |
| **Children’s Community Dietetics** | The Paediatric Dietetics Service provides assessment, treatment, support and advice for children and young people with a range of eating, drinking, nutrition and dietary related health needs |
| **Children’s Community Allergy Clinic** | The Paediatric Allergy Advice Clinic is a service which was newly commissioned in 2017/18 and provides assessment, treatment, support and advice for children and young people with a range of needs relating to allergy |
Managing Director’s Introduction

Virgin Care, in partnership with Barnardo’s, began providing health and wellbeing services to children, young people and their families in April 2017 and we have worked hard since then to deliver a caring and responsive service that meets the needs of local people.

We have already achieved much in the short time we’ve been providing these services and in this document we will present projects we’ve worked on so far. Primarily, though, we will tell you about what we’ll be working on in the year to come.

Over the past year, I am particularly proud of the achievements we’ve made in providing universal antenatal support, promoting the Healthy Schools agenda, introducing the Adverse Childhood Experiences framework, Increasing activities in Family Hubs and seeing our staff reach their full potential, especially in the new multidisciplinary Healthy Family Teams.

Over the next 12 months, we will be focussing our attention on achieving specific Outcome Measures that are designed to make a meaningful difference to children and families in need of our help. We will also be executing projects specific to West Essex that maximise the benefits of a co-commissioned service whereby our Essex County Council-commissioned pre-birth to 19 services and our West Essex CCG-commissioned services are delivered collaboratively. Examples include our Journey to Autism Diagnosis and Early Support (JADES) pathway, allergy, continence, developmental delay and speech and language support.

I would like to take this opportunity to sincerely thank our colleagues who have demonstrated in this document the incredible work they’ve done and for the work they will do over the coming year.

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

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

Richard Comerford
Managing Director – Essex Child and Family Wellbeing Service
Virgin Care Services Limited
Clinical Director’s Introduction

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

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

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

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

Peter Taylor
Clinical Director
Virgin Care Limited
About Virgin Care

Virgin Care has been on a journey to improve health and care services in England since 2006. We are focused on delivering high quality care, good value and the fantastic customer service you’d expect from Virgin.

In fact, we only provide services where we believe we can make a difference, with the all of our services funded by the tax payer and free-to-use for local people.

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

Part of the Virgin Group and ultimately owned by Sir Richard Branson, Virgin Care has saved the NHS over 60 million pounds and improved services throughout the UK. Ninety three per cent of people rating our services say they’d recommend them to someone else needing a similar service.

In January 2018 Sir Richard Branson confirmed that, as and when Virgin Care makes a profit (over and above his original investment), it will be re-invested back into NHS and Local Authority health and care services.

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

Which part of Virgin Care does this document cover?

Throughout this document the term ‘Virgin Care’ refers to services operated by Virgin Care Services Limited or a subsidiary company in Essex. As a national company, Virgin Care operates services in many areas and each area produces its own Quality Account. National achievements, where relevant, are included within the Quality Account for each area.

Find out more about Virgin Care at www.virgincare.co.uk.
Key successes and innovations delivered in 2018-19

Virgin Care has achieved much over the past 12 months and we are proud of what has been achieved.

This section of the document includes national highlights identified by Virgin Care’s Quality Team as well as specific highlights from Essex that were identified by colleagues working in the Essex Child and Family Wellbeing Service. These items have been split into the three key areas recommended by the Department of Health and Social Care for all providers to focus on.

<table>
<thead>
<tr>
<th>Safety/Ensuring consistency in care</th>
<th>The introduction of the Journey to Autism Diagnosis and Early Support (JADES) pathway in West Essex, which combines West Essex CCG-commissioned children’s community health provision (e.g. Speech and Language Therapists, Paediatricians and Neurodevelopment Nurses) with Essex County Council-commissioned children and family provision (e.g. Health Visitors, School Nurses) to support children and their families.</th>
</tr>
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<tbody>
<tr>
<td>Clinical Effectiveness</td>
<td>The introduction of a training programme, underpinned by robust standard operating procedures and a competency framework, to enable Healthy Family Support Workers to undertake under 1 and 2-3 year checks to a consistently high standard.</td>
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<tr>
<td>Experience of people who use services</td>
<td>The introduction of CHAT Health texting service for school-aged children to enable them to get support and advice in a discreet, private and confidential manner from qualified school nurses.</td>
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Part two
Achievement of priorities for improvement in 2018-19

Virgin Care’s core objective is to be the best community-based provider of health and social care in England, with its stated purpose being “everyone feels the difference.”

Each year, Virgin Care identifies areas for development and improvement, and sets objectives for services. The achievements cited below reflect the work Virgin Care has completed against both its local objectives identified in last year’s Quality Account and the work towards Virgin Care’s company-wide objectives.

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

Nationally:

- Robust capacity plans have been developed for all our business units and we have been working hard to plan training programmes further in advance supporting our colleagues to plan to attend training.
- New e-learning has been introduced into the organisation to increase compliance: Deprivation of liberty, mental capacity act training, data security awareness, food hygiene awareness to meet /exceed regulatory compliance.
- We strive to continually improve our clinical and care services and respond to feedback from those who use our services and our You Said We Did scores show consistent improvements being implemented as a result.
- We have greatly exceeded our expectations of more than 65,000 individual pieces of feedback using the Friends and Family Test question.
- We have introduced five further questions to understand our customers experience and over 36,000 people have provided this additional feedback.
- Safeguarding ‘train the trainer’ and supervision skills programme delivered to Safeguarding Leads and Champions across the organisation to support clinicians and to enhance Safeguarding practice.
- Overall upwards trajectory on safeguarding training compliance.
- Safeguarding audit peer review process established to review quality of safeguarding audits undertaken with positive outcome.
- Ability for service users and colleagues to apply online for access to records requests via websites or other means.

NB The items listed above reflect developments that have taken place across Virgin Care as a whole. Several have translated into related actions and improvements in ECFWS who have benefited from these national developments (e.g. introduction of new training).

In relation to point 5 above, the five additional questions on the FFT are not yet being used consistently in ECFWS as the additional questions are not always relevant to the services we provide (e.g. one question relates to experience around the provision of medicines), however, we are in the process of rolling these out where appropriate.


Essex Child and Family Wellbeing Service (ECFWS)

What we said we’d do in last year’s Quality Accounts

- Introduction of Outcome Measures pilots prior to reporting from April 2019
- Embed newly launched safeguarding supervision process and start reviewing gathered data to influence training requirements
- Train all Healthy Family Support Workers (HFSWs) to enable them to deliver the Ages and Stages Questionnaire (ASQ) which is linked to Outcome Measures
- Introduce the Journey to Autism Diagnosis and Early Support (JADES) pathway
- School Nursing will develop and implement the texting support service for school aged children called ‘Chat Health’
- Implement a ‘second round’ of workforce consolidation following the major changes made in 2017/18
- Further development of Citizen’s Panels
- West Essex to extend the continence service
- Work with libraries – joint activities and greater integration

The ECFWS are delighted to report that almost all of the above actions have been achieved and further details of progress with the 2017-18 objectives appear below, in addition to many new developments and innovations that were implemented during the course of the year.

The two exceptions from the items above that were not achieved were:

- **The extension of the West Essex continence service.**
  This action was delayed because the business case presented by ECFWS was not approved and signed off by West Essex CCG until April 2019. The action has therefore been carried forward into 2019/20 following discussion with West Essex CCG.

- **Working with Essex libraries for greater integration of services**
  This piece of work was put on hold as a result of the announcement by the Local Authority of an Essex-wide consultation on the future of the libraries. ECFWS will look to pick up this piece of work once the consultation has concluded and the way forward is clear.

NB Progress with all items mentioned in this report including, where appropriate, data and details of measuring, monitoring and reporting are shared with commissioners and partners though regular contract monitoring, partnership board and organisational governance mechanisms and are not detailed here.

Progress with items referenced in the 2017-18 Quality Accounts includes:

- **Outcome Measures**
  An intense programme of work has continued throughout the year to ensure the services’ readiness for the introduction of the 27 commissioned Outcome Measures (OM) as reportable KPIs in April 2019 (22 commissioned by ECC and 5 by West Essex CCG). This has included:
  
  - The creation of a new post of Outcome Measure Quality and Performance Lead in May 2018 to help keep the focus on the OMs and to drive the programme forward
  - Introduction of new methodology for recording OMs on SystmOne
  - Devising new reporting mechanisms in agreement with commissioners
- Creating a training programme to support colleagues in recording outcomes
- Revising local programmes of interventions to ensure all activity with families is purposeful, recordable and outcome focussed
- Devised tips and reminders, including an outcome focussed reminder screen saver for all ECFWS colleagues
- The creation of an Outcome Measures User Guide

- Further recruitment to Quadrant based Outcome Measures Co-ordinators (newly created temporary posts) to support the rollout of OMs in 2019
- Creation of CCG Outcome measures introduced for Specialist Services – Questionnaires now live on SystmOne

Please see Appendix Three for further details of the ECFWS Outcome Measures

**Supervision in Safeguarding to Influence training**
ECFWS pledged to embed the newly launched safeguarding supervision process and start reviewing gathered data to influence training requirements in 2018/19. The influence of safeguarding supervision to inform training has been successful. Supervision queries alongside findings from both internal and external investigations have added to an overall improved suite of awareness-raising packages that, where appropriate, have been assessed against the intercollegiate document to assure that they are at Level 3.

**Train all Healthy Family Support Workers to deliver ASQs**
In 2017/18 a need was identified to introduce a training package to enable all Healthy Family Support Workers (HFSWs) to deliver the Ages and Stages Questionnaire (ASQ), which is linked to Outcome Measures. This target was achieved during the course of 2018/19 and has resulted in good progress in delivering consistent support to families and the achievement of related Key Performance Indicators (KPIs). Further references to HFSW and skill mix are made at various points in this document.

**JADES pathway launched in West Essex (CCG Commissioned Services)**
In March 2019 after many months of planning, the Journey for Autism Diagnosis and Early Support (JADES) pathway was launched. The pathway takes a multi-disciplinary approach to ASD diagnosis. The original pathway was designed and developed by Virgin Care in consultation with paediatricians, families and independent pathway design consultants. It is already used in other Virgin Care services across England. The development of the pathway in West Essex includes:
- A new referral form and process, open to schools /education professionals
- Care plans with advice and support sent on receipt of referral
- Individualised assessment pathways, which may include multi-disciplinary assessment and decision making with a Clinical Psychologist, Speech and Language Therapist and Community Paediatrician
- Development of JADES area on website
- Increased the skill mix of the JADES team to incorporate Specialist ASD, Specialist Neurodevelopmental Nurse and ADHD Nurse in order to best meet the range of needs of children and carers
The introduction of the JADES pathway in conjunction with the joint ECC and West Essex CCG commissioning model has enabled greater integration of the specialist and PB19 services in West Essex, with early referral and support for families throughout the assessment pathway.

**ChatHealth**

ChatHealth is a free messaging interaction service to provide young people aged 11-19 with access to confidential advice, and support from School Nurses through anonymous SMS text messages. ChatHealth provides children and young people an opportunity to ask questions they could have been embarrassed to ask face to face. October 2018 saw the introduction of ChatHealth Essex to the ECFWS School Nursing Services. This began with an 'Introduction to ChatHealth Essex' and training session which was attended by many colleagues across Essex.

A School Nurse from Mid Essex said, “I think it will be a really good service for our young people to access health support and advice.”

ChatHealth has been used in 20 School Nursing services, and by two other Virgin Care Business Units, Wiltshire and Bath & North East Somerset. Positive feedback from young people from past services has included “non-judgemental” and “quick and easy to use.”

The Introduction was led by Caroline Palmer, Clinical Lead for ChatHealth which gave School Nursing colleagues an opportunity to ask questions about the new service. Thousands of posters and credit card sized resources were handed out for staff to disseminate and promote. Ms Palmer said, “Young people are now getting professional health advice from a trusted source.”

There are four contact numbers, one for each Quadrant run by five School Nurses. The lines are open between 9.00 am to 5:00 pm and at weekends young people will receive an out of hours automated reply that will signpost them to other professional support services.

**ECFWS ChatHealth total contacts September 2018 – March 2019**

<table>
<thead>
<tr>
<th></th>
<th>Messages Received</th>
<th>Messages Sent</th>
<th>Conversations Opened</th>
<th>Conversations Closed</th>
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<td>130</td>
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</tr>
</tbody>
</table>
Implement a ‘second round’ of workforce consolidation

Significant effort was made to bring greater clarity to individual roles within Healthy Family Teams by developing and reviewing standard operating procedures and underpinning it with role-specific training and reviews of clinical templates held on the electronic patient recording system. A particular focus was on training Healthy Family Support Workers to undertake 1-year and 2-2.5 year universal checks and training Health Family Support Assistants to carry out National Child Measuring Programme activities, both of which are linked to the Outcome Measures.

Citizens’ Panels

Over the last year several Citizens’ Panel events have taken place in each of the four quadrants within the Essex Child and Family Wellbeing Service.

The number of people attending specific events has been low in the majority of cases, and quadrants are currently looking at different ways to engage people in forthcoming Citizens’ Panels, engaging with people who use the services face to face in sessions and out in the community, completing surveys and the use of social media such as Facebook.

Themes for previous events included an introduction to the ECFWS, Baby Friendly, School Readiness and Healthy Schools.

In the South Essex Quadrant, 116 people were surveyed in October and just fewer than half the respondents were not aware of the Essex Child and Family Wellbeing Service. However, around two thirds were aware of the self-weigh service in Hubs and Delivery Sites.

Responses from one session in the North Quadrant in which 7 people were questioned included:

- ‘Would like more services, with outside play and an opportunity for a cuppa’
- Several parents commented they would value information about other groups in the area, not just our centres.

Although numbers of attendees have so far been small, their feedback provides a valuable insight into the public’s knowledge of ECFWS and how best to meet the needs and wants of those who use the services.

Further developments not referenced in the 2017-18 Quality Accounts include:

Identification of priority groups

The importance of the identification of priority groups has been recognised in order to provide targeted help to those who may need it most. ECFWS provides services to all children and families across Essex, however there are some who have particular personal demographics, characteristics or requirements that may make them more vulnerable and in need of greater care and attention than others. Each of these characteristics or requirements is known as a ‘priority group’.
Colleagues are required to identify and record each individual’s priority grouping on SystmOne and focus or tailor attention to their needs accordingly. A priority group questionnaire is now live on SystmOne and colleagues have been urged to review, record and update this at each and every contact with people who use the ECFWS. Families who belong to three or more priority groups ordinarily require long-term interventions and should be regularly reached for support.

ECFWS routinely audit the number of people belonging to priority groups to know what the predominant areas of need are, so that effective interventions and supportive activities in and around the Family Hubs and Family Hub Delivery Sites can be put in place. For example, if a population served by a particular Healthy Family Team has a greater incidence of domestic violence or drug and alcohol abuse, that team would look to cater for this need. At a strategic level, ECFWS provide this information to Essex County Council and partners who attend the Family Hub Advisory Board meetings so that agencies can collectively own issues in local communities and put in place services to meet the specific needs. (Please see illustration two above in section on ECFWS model that illustrates the relationship of the Family Hub Advisory Board to ECFWS and the wider system).

FEEE2 (targeted process)
The Free Early Education Entitlement for two year olds (FEEE2) process has been streamlined because the inherited way of doing it was ineffective. We recognise the importance of assessment of all family’s support needs as part of this process as it is just as critical to ensure the family get support to enable the child to be school ready alongside the developing positive aspirations for the parents to have around their child’s outcomes.

As an example of the changes we have made, Lizzy Kingsford, North Essex Quadrant Manager reported:

“We realised that the current process was not fit for purpose after the contact we made to eligible families was not increasing the number of children benefiting from attending a preschool setting. We redesigned our process with help of our Community Engagement Lead, Deputy Quadrant Manager and Quadrant Manager. We looked at what was needed, reassessed our workforce and looked at new pathways. After only three months of the new process we have already seen a significant increase in families taking up the FEEE2 in early years settings which is superb. We will continue to push this to increase the figures further still. It’s a great achievement, which we’re really proud of.”

Similarly, one of the Hub Coordinator’s from the West Essex Quadrant, Kim O’Sullivan, reported:

“We have developed a new working practice for managing the FEEE2 process and continue to develop and improve by involving staff in the process, decision making and feeding back.” This process has also been similarly revised in South and Mid Essex Quadrants.
The Integrated two-year review process has also changed due to the new FEEE2 process and in the first two months of its use the service has more than doubled the number of children being seen in an integrated way in nurseries. This review now integrates ASQ and EYFS Progress check for 2 year olds accessing a funded FEEE place with the intention of earlier identification of those children assessed at this stage at risk of not being ready to start school ready to learn.

School Readiness
School Readiness is a critical area of work / early intervention for ECFWS and is linked closely with our local child care settings and the work being training in the North on school transition’. This links with the FEEE2 work described above, ECFWS have analysed the Good Level of Development outcomes and used these to identify the right interventions to design and / or implement to support children’s school readiness including the support to parents to help them to help their children learn.

There have been a number of new School Readiness projects initiated in different areas across Essex. For example:

- **Targeted Ready Steady** for 1’s and 2’s. These are both 4-week programmes to support children who are not quite reaching all their milestones as well as would be expected. They are short courses that cover varied aspects and can be directed at specific issues, and are a great way of giving families the knowledge and the confidence to promote their child’s development.

- **Universal and targeted Stay Play and Learn and Baby Beginnings**; these are both 10-week rolling sessions that incorporate feeding support in the first year. Both sessions are universal but fit with targeted families as well. They look at all aspects of attachment, relationships, growth and development and give an all-round experience and learning intervention for all families to improve long term goals for children and their families. They are also a great way for families to create friendships and reduce isolation.

UNICEF Baby Friendly Initiative
At the end of 2018 and after a great deal of hard work and dedication, the North Essex Quadrant achieved UNICEF’s Baby Friendly Initiative (BFI) re-accreditation with only a small number of recommended actions. The scores and results were outstanding and the service received some very positive feedback, including the following report from Dionne Wilson, ECFWS’s Public Health Specialist in Breastfeeding:

The assessors were very complimentary with regards to the ECFWS and all staff within. Assessor Feedback included:

- Warm, friendly and inviting environments at the family hubs, assisted self-weigh and community groups
- ECFWS team members were always professional and compassionate to parents
- The Healthy Family Support Workers were exemplary with regards to the care and respect shown to parents attending community resources
- Outstanding leadership skills to inspire and motivate from the Infant Feeding Lead with regards to implementing the standards
Mothers’ Feedback included:

- 100% of mothers stated the service met their needs
- 100% of mothers voiced overall satisfaction of the service (very happy (82%), fairly happy (18%). No mothers reported being unhappy.
- 100% of mothers were positive in their comments about staff being always or mostly kind and considerate - (‘always’: 95%; ‘mostly’: 5%); no mothers felt staff were either ‘sometimes’ or ‘not at all’ kind and considerate

The assessment found that mothers appreciate the antenatal contact, especially the consistency of seeing the same Health Visitor on a postnatal new-birth visit where this was possible. It also found that breastfeeding support is of a high standard, with some mothers commenting on how it helped them breastfeed for a longer period.

The sample of 25 colleagues interviewed and observed, displayed a sound knowledge base and excellent communication skills. Some of the highlights include:

- The commitment to providing antenatal visits, with currently 82.3% of mothers receiving this visit.
- The provision of well-evaluated antenatal and postnatal programmes such as Preparation for Parenthood.
- The 48-hour post new-birth referral phone call by Health Visitors to all mothers including a feeding assessment. Breastfeeding support visits or texts/phone calls are offered weekly for six weeks as needed.
- A well-co-ordinated Essex-wide breastfeeding welcome scheme
- Breast feeding volunteers who can support mothers at home or by phone.

UNICEF’s Baby Friendly Initiative assessor was particularly impressed with the 48-hour contact and felt it was gold-standard, in fact the assessors voiced they have assessed many infant feeding services countrywide and the Essex model is unparalleled.

Impact of the Duty Health Visitor process

In last year’s Quality Accounts it was reported that ECFWS had introduced single points of contact within quadrants and the availability of duty Health Visitors. The duty Health Visitor role has been consolidated and strengthened this year. As an example, the Mid Essex Quadrant Manager Zoe Oddy reported: “The implementation of a visible and accessible duty Health Visitor being available 50-hours per week in all 3 Family Hubs in Mid Essex has made a great difference to families. The feedback from mums in particular has been fantastic and it has enabled us to stop Baby Weighing clinics as parents have the confidence to manage their own concerns know they can see a Health Visitor between 8:00 am and 6:00 pm any day of the week in the local area.”

School Nurse Conference

On 11 July Essex held its first county wide School Nurse Conference. Speakers updated the workforce on local providers and on how to support understanding of the model for school nursing in Essex. There was an opportunity for school nurses to come together from across the county so that a consistent approach can be adopted for the service moving forward.
Throughout the day colleagues listened to speakers from Kooth, PSHE and Mind Fresh. Provide was also in attendance to deliver a talk on sexual health and there were presentations from Dr Amin Band on Autism and Colleen Rowley-Smith from BEAT, the UK’s eating disorder charity.

This is an exciting time for School Nursing in Essex with several new initiatives such as Chat Health being unveiled and being implemented in the autumn term.

The conference was very well attended and well received by colleagues. ECFWS are looking forward to rolling out the ideas and models discussed and making this an annual event for the workforce.

Other School Nursing developments

- School Nurse Drop-Ins have been made available once per week in every secondary school, however not every school across Essex have taken up this offer
- Family Hubs and Delivery Sites became C-Card outlets on 1st March 2019, a scheme which enables young people to access free condoms
- A new monthly county-wide Public Health Campaign Bulletin is issued to all schools and partner agencies and provides resources, ideas and guidance to professionals and parents
- 77% of Schools in Essex now have Healthy Schools status and 94% are engaged in the process
- Annual Healthy Schools Awards were held on the 19 and 20 March 2019 at Chelmsford Racecourse

Further Developments in Safeguarding and for Looked After Children

- The Looked After Children’s (LAC) Team have developed an E-Learning pack for the core training, related to the LAC Intercollegiate Document, that has been utilised for all of Virgin Care due to its high calibre. This makes the ability to access the training more efficient for all staff that are required to undertake this training. There has been excellent informal feedback from the users of this training and it will be further rolled out in the coming year.
- Audits play a key part in the Safeguarding and Looked After Children’s teams. The National Virgin Care Safeguarding Audit this year was analysed in more detail than last, showing the areas where staff struggled to meet certain outcomes, or understand what evidence that they could supply. As a result an additional result paper was shared with the teams showing the themed areas that teams struggled to complete, sharing the training and education in that area.
- The full suite of SystmOne templates for both safeguarding and LAC have been reviewed and have been launched in all ECFWS Units. The output from this is that there has been an improvement in record keeping for safeguarding incidents (Informal feedback from safeguarding supervisors).
- ECFWS has been proactive in looking at how it best interfaces with the rest of the children’s safeguarding system, and with the support of commissioners and representatives across Essex has established the Safeguarding Peer Review Sub-group. This includes CCG safeguarding representatives to ensure peer review and challenge and examine any key themes which need sharing across the safeguarding system
Well Organised Working (WOW) week
In May 2018 the ECFWS launched its first Well Organised Working (WOW) week. It is recognised that a well organised environment helps to ensure the workplace space is efficient and contributes to good service delivery by making things easier to find, use, keep clean and manage consistently. All colleagues were encouraged to take part and to clear out anything no longer fit for purpose and rid desks, workspaces and group/play rooms of clutter. After the initial ‘WOW Week’ this work has been ongoing throughout the year with the aim of creating a clean, minimalistic approach in all hubs and sites across Essex. This supports the ECFWS in compliance with CQC, OFSTED standards and data protection in line with General Data Protection Regulation guidelines, as well as creating a harmonised working environment for all colleagues, and a safe and welcoming environment for the families who use the services. See below before and after pictures.

Walkthrough inspections
As a follow-up to the WOW work above, in the autumn 2018 a series of internal environmental walkthrough inspections was instigated, which included checklists around overall appearance and impressions of a selection of Family Hubs and Delivery Sites, health and safety measures and interviews with colleagues. A ‘RAG’ rating dashboard was created and action plans drawn up to address any issues. This work is now on a rolling programme to ensure all sites meet the required standards of safety, cleanliness and effective use of space.
ECFWS website
In March 2018 ECFWS launched its new website which can be accessed by service users and the general public. It was an immediate success and within a few weeks the number of people accessing it was such that the original bandwidth was exceeded and an unlimited bandwidth package needed to be purchased to accommodate the number of ‘hits’ it was getting. The website has been further developed over the course of the year and is a valuable resource for families in Essex, enabling parents to:

- Get help and advice to manage any worries about their or their child’s health at home
- Search using their postcode to find their nearest Family Hubs and Healthy Family Teams
- Get contact details of services
- Access information on events, news and updates
- View Family Hub activity calendars
- Find local businesses which are ‘breastfeeding welcome’
- See referral information for NHS services
- Sign up to and see details of events and engagement from the Citizens’ Panels

Bookstart Scheme – working with libraries
Several Family Hubs are working in partnership with the registered charity BookTrust and Essex Library Service to ensure that Bookstart materials are distributed to children within the local community. A baby pack is given to parents at their 6-to-8 week check by their Health Visitor which includes information for parents about the importance of sharing a book, even at a very young age. Local childcare providers pick up book boxes and are offered a Healthy Family Worker to share a book within a group session to encourage nurseries and parents to promote reading. There are also specific packs which focus on supporting children with additional needs, such as the Booktouch pack for children with visual impairment. Partnership working is in place between Healthy Family Teams and local childcare providers to ensure children gain access to good quality books to share. Some Family Hubs and the Library service also run Rhyme Time Sessions, with weekly groups for parents to attend focusing on early communication. These groups bring in a significant number of families into the library where the borrowing of books is encouraged. The Bookstart Project is working within the Family Hub agenda, Library Service and local childcare providers to ensure children access good quality books that they can enjoy.
Allergy Service
The West Essex Children’s Community Allergy service was set up in November 2017 to improve the management of children with non-IgE allergies to cow’s milk protein which can lead to reflux, eczema, and gastrointestinal issues. This can cause distress to both the baby and the family. The service is run by a paediatric dietician, and an allergy nurse. Over 210 families have been supported since the service commenced. New initiatives this year in this service have included:

- Rolling teaching program for GP’s and health visitors to improve early recognition and referral to the service
- Teaching sessions for parents to cover more detail on weaning, recipe adaptation, reflux management, and reintroduction of milk when appropriate
- Hotline for advice for GP’s and health visitors
- Improved links with a local hospital and direct referral pathway so it doesn’t need to go via a GP

<table>
<thead>
<tr>
<th>Number of individual patients seen by allergy in 2018/19</th>
<th>240</th>
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</thead>
<tbody>
<tr>
<td>Referrals accepted</td>
<td>285</td>
</tr>
<tr>
<td>Discharges</td>
<td>296</td>
</tr>
<tr>
<td>Caseload March 2019</td>
<td>53</td>
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<tr>
<td>Total first contacts</td>
<td>213</td>
</tr>
<tr>
<td>Total follow up contacts</td>
<td>78</td>
</tr>
</tbody>
</table>

Developments in West Essex Paediatric Therapies

- Introduced “Talk Together” groups for families with children who are showing signs of speech and language delay. Designed by speech and language therapy service and delivered through joint working with the Healthy Family Team
- Provided training to the Healthy Family Team in ASD
- Members of the JADES team attending PACT autism support group to offer advice and support
- Joint visits by OT, Physiotherapist and Speech and Language Therapist at ‘Upward with Down’s’ Group in Harlow to provide MDT assessments and support, easily accessible for families of children with Down Syndrome
- Regular programme of training introduced for education staff in speech and language support

Maximising the benefits from skill mixing the ECFWS workforce
There have been some difficulties in staffing over the last year, in particular with the employment of Health Visitors, where there is a national shortage. This has had an impact in performance in some key areas. To mitigate this, in 2018/19 ECFWS trained 10 new Health Visitors and in 2019/20 has nine Health Visitors trainees and 5 Student Nurse trainees funded by Health Education England (in partnership with Anglia Ruskin University). Virgin Care is also self-funding an additional 3 health Visitor trainees.
In both the South Essex and West Essex Quadrants, shortages of staffing in Health Visiting has been a particularly long standing issue which has proved difficult to resolve in spite of much hard work on the part of the managers and recruiters. This has led to the use of the business continuity plan and the introduction of prioritisation protocols. To mitigate the impact of this there has been the introduction of an alternative skill mix within the Health Visitor Teams as well as the use of long-term agency colleagues. The changes have been risk assessed and the services have introduced a new role of Band 5 Child and Family Wellbeing Nurses. The services are developing competencies for this role and this will help support staff shortages while delivering a safe and effective service to families who might otherwise have to wait longer to be seen. As a result of these measures the turnaround and improvement in the achievement of related KPIs in both West and South Quadrants has been significant and credit is due to the hard work of all involved.

Community Fridges
Several ECFWS Family Delivery Hubs have become involved in the Community Fridges Project. These are communal places where surplus food is received by people in the local community, by local businesses and individuals and shared with others who need it. The average UK family wastes £470 a year by throwing away food and drink and £3 billion is wasted by the food industry. Despite growing awareness of food waste, there are few easy ways for individuals or businesses to share food near its 'sell by' date to those who need it. So far Community Fridges has helped thousands across the country to connect to their communities, access nutritious food, save money and reduce waste. Several community fridges have been set up in ECFWS Family Hubs and Delivery sites and have proved to be very popular with many families.

Cookery Classes
Partly linked to the fridges project, some areas have launched cookery and healthy eating classes or groups, in some cases when it emerged that people did not know what to do with some of the fresh produce that had been donated to the fridges. For more details on the initiative, see below in the Feel the Difference funding section.

Essex Breastfeeding Welcome Initiative
In partnership with local borough councils across Essex and their environmental Health Officers, ECFWS launched the ‘Essex Breastfeeding Welcome Initiative’ in conjunction with World Breastfeeding Week. World Breastfeeding Week 2018 ran between 1 - 7 August to raise awareness of the relationship between good nutrition, food security, poverty reduction, and breastfeeding (UNICEF, 2018).

At least 250 public venues and businesses across Essex have signed up to the Breastfeeding Welcome scheme. These include restaurants, libraries, cafes and cinemas. The scheme was promoted on ECFWS Facebook page and asked breastfeeding support groups for their feedback on the impact of the support they received. One parent said, “Lovely ladies and great venue. Support is absolutely key and support groups like this can make or break a breastfeeding journey.”
All ECFWS community engagement workers received training to support the Breastfeeding Welcome initiative and created an atmosphere where breastfeeding is accepted and welcome by wearing “breastfeeding welcome” stickers.

A number of community peer support volunteers’ and colleagues’ achievements were celebrated for going ‘the extra mile.’ In recognition of ECFWS users valuing community breastfeeding support, ECFWS will commit to ongoing recruitment and training of community breastfeeding peer supporter volunteers, to ensure these groups continue to grow and flourish.

**Engaging with local Traveller communities**

In Mid Essex, following concerns raised about increasingly threatening behaviour on one of the local traveller sites, a CEW and Health Visitor linked up with the Youth Service, Police and Traveller Education Service and as a result ECFWS now offer a weekly partnership outreach service.

**Fledglings**

The children who use the West Essex Community Therapies Team (Occupational Therapy, Physiotherapy and Speech and Language Therapy) benefitted from a donation of £1000 worth of equipment and toys from “Fledglings”.

“Fledglings” is a national charity that provides practical advice and support when living with children with additional needs. “Fledglings” finds and sells products that improve the lives of children with additional needs and their families. It also signposts people to other organisations for any further advice they may need.

Funding was generated through the “Tesco Groundwork Bags of Help” scheme where money raised from the sale of carrier bags is used to fund local community projects. “Fledglings” approached the West Essex Community Therapies team to distribute their products to local families who would benefit. As a result, a number of families have received donations of useful equipment or toys. The Occupational and Speech and Language Therapy services have also acquired some additional resources to use in therapy sessions, for example liquid floor tiles.
New Groups and Family Support Initiatives

Over the course of the year and in various Quadrants, new groups and family support initiatives have been set up as a result of seeing a need in the local community and being linked to the newly introduced Outcome Measures. Examples of these include:

- In the North Essex Quadrant, breakfast club is now underway during holidays for local schools in the Family Hub vicinity. ECFWS are going to be rolling these out further as they have been very well attended, with teenagers even coming on their own which is fantastic.
- Also in North Essex, the ‘first time parents’ group has been updated and is now well attended
- Community drop ins – ECFWS still need to develop more of these but the ones running have been well received and well used
- In West Essex, Adult Community Learning ran Conversation Café courses in Epping Forest, First Aid in Uttlesford and parenting in Harlow. Meetings are being set up for courses in 2019/20.
- West Essex Quadrant reports that they now have consistent and well regarded parenting programmes running across the quadrant, which will move to different delivery sites at the start of each course to ensure accessibility for families.
- Consultation with families in West Essex has generated some new groups – including Baby Group in Meadows, and from May 2019 a new autism drop-in in Waltham Abbey.
- In West Essex an isolated community was identified in Ongar, so a group has been organised, Budworth Hall, for the local families.

Summer Play-schemes

- During the summer the North Quadrant offered a weekly themed event for families across the region. They proved very popular, especially as they also cater for school aged children. Themes have included Sound Explorers, Recycling Fun, Messy Play, Sensory Science & Mad Science and each are based on learning and exploring through play.
- The community events in Harlow in the West Essex Quadrant are also very well regarded – over 1000 families attended last summer’s National Play Day event, with 100 at half term events
The Winter Resilience Project
The Winter Resilience project in Tendring district is an annual project to help keep Tendring families warm during the winter months. The Tendring area has received £100,000 from the NHS and is coordinated by Community Voluntary Services Tendring (CVST) and supported by a number of other organisations in partnership.

This year the ECFWS launched the project with an event at Sydney House Family Hub Clacton, so that the whole community could become involved. The event was a tremendous success and we distributed over 50 Winter Warmer Packs to families in need. Also distributed were heaters, blankets and sleeping bags to the most vulnerable. The ECFWS integrated service has enabled these packs to reach the most vulnerable families in our communities because ECFWS colleagues visiting these families are best placed to distribute the packs directly to them. Some of the feedback from communities has included:

“I am so thankful, this will help me get warm”
“I struggle to keep the kids warm because my house is always so cold and we didn’t qualify for ‘The Warm Home Discount’”
“Thank you, what a great scheme!”

Other Essex Quadrants supported similar schemes which have benefited some of the most vulnerable people across the county.
**Christmas parties for local families**

Several Family Hubs provided Christmas parties for their service users. An example of one of these, The Harlow-based Meadow Delivery Site held its Christmas party on Wednesday 19 December 4.00pm-6.00pm and had 150 children and adults in attendance.

The party went down a treat with a special visit from Santa and his reindeers. Food was donated by Tesco and each child received a small gift that had been donated to the Harvey centre throughout the year.

Feedback from a Mum after the party: “I’ve been going to the Meadows since my daughter was born 18 months ago, firstly for the weigh in clinic and then found bosom buddies (what an amazing support group!). As well as lots of other great baby groups we went on to attend, I just want to say how fantastic the centre has been and still is, including all the staff there! We had the Christmas party yesterday and it was honestly the best!!! My little girl danced the whole party, met Santa and his reindeer and the party food was an added bonus! We brought snacks along with us and walked in to find a whole table full of food which was really unexpected as the tickets were free – so fab for the kids! I honestly cannot praise the amount of effort that was put into the Christmas party, just amazing. We both had a great evening dancing away! Thank you all so much! ”

See picture below of the food pick-up for the children and families’ Christmas Party.

**Improvements to Family Hubs and Delivery Sites**

There have been several improvements to delivery sites in addition to those already mentioned elsewhere in this document, for example:

- The sensory room at Berechurch Family Hub has been completely updated and is now a lovely useable space for children with special needs. Overall, this site required investment as it was very run-down. A lot of painting and decorating has been completed and a new fully functional kitchen has been installed so the team can now start to offer cooking courses for local families.
Working with partners
Over the course of 2018/19 all Quadrants have worked hard to develop relationships with local partner agencies and organisations, building on the work instigated in the first year of the contract. For example:

- **West Quadrant:** In West Essex we are working with over forty partners in a range of different ways – from supporting on advisory boards, developing and co-facilitating community events, providing free venues, adding value to a families experience by working together e.g. FISH project, winter warmer project, school holiday projects, consultation events. We have provided venues and Service Level Agreement’s (SLA) for Home-Start, Open Road and Safer Places to work with the more vulnerable families. All can receive additional support available on-site such as foodbank, clothing and toiletries (when need is signposted to us).

- Also in West, we are working with Princess Alexandra Hospital and Hertfordshire Family Service to develop the Family and Baby project in the neonatal unit providing support to parents through coffee mornings and information sessions.

- **North Quadrant:** Partnership working – this has been a real valuable challenge this year; we have made contact with many different partners and charities. We offer free use of space and find out ways we can work together to reduce duplication for families. This will always be an on-going piece of work and we will build on the good start we have made.

Other significant events for the ECFWS 2018-19

**Farewell to the CADU**
The ECFWS re-started this service in October 2017, when there was a gap in provider and commissioners requested support from the ECFWS to keep it running on a temporary basis. At the time there was a large waiting list where some clients had been waiting over 18-months for an appointment. Through careful planning and good practitioners the service was able to bring the waiting list down to less than 20 weeks. The service transferred to the local acute hospital trust in January 2019 following a thorough and safe exit process aimed at giving families who use the service as much continuity of support as possible.

**Visit to 10 Downing Street**
In June 2018 the ECFWS was delighted that one of its leaders (Lisa Farrell Interim Quadrant Manager West Essex) was given the rare privilege to attend 10 Downing Street to share experiences in delivering the ECFWS’s exciting and innovative Family Hub model for supporting local children and families. The roundtable discussion held by Nero Ughwujabo, Special Adviser to the Prime Minister, and Chaired by David Burrowes was attended by representatives from parliament including Lord Michael Farmer and Dr Samantha Callan along with Children’s Commissioner Anne Longfield and Barnardo’s Chief Executive Javed Khan.

It was an opportunity to share good practice and begin composing recommendations for service development country-wide. Lisa Farrell was invited to attend to represent the Essex Child and Family Wellbeing service, with a particular focus on the Chelmsford Family Hub, which is considered an exemplar site in Essex.
Lisa said: “The unique redesign and integration of the Chelmsford Family Hub with the city library provides pregnant women, children and families with a wonderfully wide-ranging combination of education and support opportunities. It was a fantastic opportunity to showcase what we have done in Essex and to highlight how our strength-based, whole system approach to people’s care needs means that the right type of support is given at the right time in the right place, whether this be in the Family Hub, at home or elsewhere in the community. I shared the benefits from there being a single point of contact for families and the concept of a ‘service without walls’. New partnerships in the Chelmsford Family Hub has resulted in a unique opportunity where library employees, Healthy Family Team members (Health Visitors and Support Workers), community groups and volunteers come together to deliver a range of services. We recognise how important it is for communities, families, children and young people we serve to help shape the support offered. A main aim of our service is to build on community capacity to support themselves and each other, and to build resilience whilst focusing on positive outcomes and impact.”

“Lord Farmer along with Council officials and dignitaries attended the grand opening of the new development within Chelmsford Family Hub and library on 27 March 2018 and it was because of this experience that he invited me onto the roundtable event at Number 10. We are very proud of what we have achieved in Essex. The innovative co-production of commissioning that has been happening in Essex means we can look forward to taking part in future opportunities to feed into government policies about family hubs.”

Lisa Farrell outside Number Ten
VIP Visitors
Baroness Harding, Chair of NHS Improvement and Bart Johnson, former Virgin Care CEO, visited ECFWS on 5th October 2018 and witnessed first-hand the value of the service to local people.

The day began with a visit to the West Quadrant with introductions to the senior management and executive team. The guests received a presentation on the ECFWS service delivery model from clinical leaders and clinicians, and were very impressed by the system-wide health, social and economic benefits from the West Essex model. The visitors also dropped in on the Chelmsford Central Healthy Family Team and met commissioners from Essex County Council. Baroness Harding reported that she was inspired by what could be achieved when Commissioners unite to commission an integrated service delivered by a private sector provider, in partnership with a charitable organisation. The Chelmsford Central Family Hub and library were in full swing with an assortment of activities. The Healthy Family Team gave great examples of the outstanding work they do in building community assets, and serving our most vulnerable families. Both visitors were incredibly impressed by the service’s achievements in the last 18 months and provided great feedback at the end of the day.

More VIP Visitors
The Treehouse Family Hub in Harlow received a visit from a trio of dignitaries on the 29 November to learn about and discuss the unique integrated services that are delivered by Essex Child and Family Wellbeing Service. Nadhim Zahawi, Parliamentary Under-Secretary of State for Children and Families, Robert Halfon, MP for Harlow and Javed Khan, CEO for Barnardo’s visited the Treehouse Family Hub to hear first-hand from ECFWS colleagues about our service.

Mr Zahawi said, “Successful services are the most innovative. I’m here to really understand how this concept of a Family Hub is working in Harlow. I’m very pleased to be here to see for myself the work that’s being done and see whether we can take the learnings from here to spread them to other parts of the country.”

Robert Halfon, MP said: “I was very pleased to welcome the Minister to Harlow today to see the Tree House Family Hub with its dedicated and committed staff. I thank Virgin Care, Barnardo’s, Essex County Council and West Essex CCG for all the work that they are doing. They are ground-breaking with their Family Hub - integrating every possible support, a one-stop shop for parents and children to make sure children in Harlow have the best possible chance at climbing the ladder of opportunity.”

Richard Comerford, ECFWS Managing Director said: “It was clear to me that Mr Zahawi was both impressed and energised by our ambitions for the children and families of Essex and I was enthused by his parting reflection on how he could ensure our model is ‘scaled-up’ nationally. As I accompanied Mr Halfon out of the building he said to me that we should be proud of what we are doing and that he was struck by the ‘high calibre and passionate’ leaders we had in the room.”

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**Family Hub Conference in Westminster**

On 14th February 2019 Representatives from ECFWS and Essex County Council attended a Family Hubs Conference at Dean’s Yard, Westminster. The event provided a great opportunity for participants to meet MPs, policy makers and leading Family Hub practitioners to share good practice and discuss delivery models and opportunities for improved integration and service design. It was a good opportunity to discuss innovative ways to maximise the ‘early support offer’ available to families.

Rt Hon. Nadim Zahawi, who visited ECFWS in November opened the event and spoke of his admiration for the Essex integrated Family Hub model. From that point forward the ECFWS exhibition stand became a hive of activity with interested commissioners and providers from all over the country, keen to hear about what the ECFWS is doing and what it has achieved.

The event was funded by Lord Farmer and co-hosted by Government and Westminster City Council, who themselves have recently launched their own Beesborough Family Hub. The Government, with considerable input from Rt Hon (Leader of the House), Andrea Leadsom, and Nadhim Zahawi have published their ‘Manifesto to Strengthen Families’, which has been signed by over 60 MPs and Peers recommending that the Government:

- ‘Encourage every Local Authority to work with voluntary and private sector partners to deliver Family Hubs, local ‘one stop shops’ offering families with children and young people, aged 0-19, early help to overcome difficulties and build stronger relationships... and put in place a transformation fund and national task force to encourage Local Authorities to move towards this model.’

Many colleagues worked tirelessly to prepare the ECFWS highly sought-after ‘Everyone feels the difference’ brochure, which provides case study examples of how our ECFWS has delivered services that have improved outcomes and positively transformed the lives of children and families by offering them integrated intervention and support.

Further details of projects that were recipients of the Virgin Care Feel the Difference funds are detailed in part three of this document.

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

**Nationally:** (NB these items also apply to/have been implemented in ECFWS where applicable to the Essex children’s services)

- 100% of our services have taken action as a result of feedback each month through ‘You said we did’
- 100% of all formal complaints have been acknowledged with the person within three days
- Safeguarding adults and children Strive For Better network meetings set up to drive forward safeguarding best practice and share learning - current focus on Safeguarding training in line with (looked After Children (LAC) and Safeguarding Adults Intercollegiate Guidelines)
- New Self-Neglect policy and training package developed in response to learning from case reviews
- Embedding of General Data Protection Regulation/Data Protection Act 18 across the organisation
- Refresh of policies and procedures
- Implementation and roll out of new Privacy Management System which includes modules for Data Protection Impact Assessments, Supplier Due Diligence, Data Flow Mapping (Records of Processing Activities), Information Asset management and Data Subject Access Requests
- Submission of Data Security & Protection Toolkit mandatory requirements by end March 2019.

**Essex Child and Family Wellbeing Service (ECFWS)**

**Shared electronic records**
In April 2018 the remaining Barnardo’s employees who were not already set up to do so started using SystmOne. The use of a shared record for children and parents has helped to bring teams and professionals closer together and provides a safer and more robust integrated record keeping protocol. It also helps the ECFWS to demonstrate achievement against the commissioned key performance targets and Outcome Measures.

**SystmOne developments**
During the course of the year further changes have been made to the electronic records system ‘SystmOne’. A SystmOne Project group was set up led by senior members of the Virgin care Clinical Systems Team who oversaw a complete overhaul of the ECFWS clinical templates so they are now in keeping with current ECFWS care and clinical practice, and are more intuitive and user-friendly. Many colleagues made helpful suggestions to update and upgrade our clinical reporting templates and helped in the process to simplify the templates, remove duplication, and apply the functionality of the system to best support working practices. The SystmOne project group held a series of workshops focusing on each step of a family’s journey from antenatal care through to transition to adulthood, and included experts both on SystmOne and clinical practice, bringing in those with specialist local knowledge about each stage, as required. This exciting project formed part of a wider programme of transformation work on SystmOne in Essex, including the capture of the new outcomes measures and aimed to reduce the number of SystmOne recording units that exist. It has proved to be extremely helpful that the system changes have been designed by Essex practitioners for Essex practitioners and all colleagues were encouraged to have their say on how they would like to be able to use the system or any improvements they would like to see.

**Improved Systems / KPI Reporting**
As well as changing the ‘front end’ of the system, a great deal of work has gone into supporting the informatics and reporting team to streamline reporting at the ‘back end’ functions of the system. Initially there were many discrepancies in reporting depending on from which part of the system the figures were drawn, but after 18 months of working together the reports (both front end and back end) now have minimal differences between them. This means that the services can now be assured that correct data is being presented to commissioners, and commissioners can have greater confidence in what they are seeing.
Standard Operating Procedures
The work on developing robust ECFWS Standard Operating Procedures (SOPs) that was started during the first year of the contract has continued throughout the year. Further new or revised SOPs that have been ratified and made available to all colleagues this year include:

- New Birth Contact
- Health Needs Assessment
- Statutory Review
- CAS Alerts
- DNA
- Family Partnership Model MECSH policy for supervision
- Health Needs Assessment
- Responding to Domestic Abuse
- West Essex Paediatricians Second Opinions
- The New Birth Contact
- Medicines IV referral
- Medicines Storage and Destruction
- Medicines Transporting
- Safeguarding Children, Young People and Adults
- Self-Weigh
- Dress Code
- Looked After Children Health Assessments
- Looked After Children Statutory Review Procedure
- Allergy Clinic
- Infant Feeding
- Transfer In and Transfer Out
- Under 1 Year Review
- West Essex Paediatrician Waiting Times and 18 Week RTT
- Infant Massage
- Safeguarding
- Management of Prescription Pads
- West Essex Paediatricians Amusement Park Quick-Pass Application
- West Essex Paediatricians Education Health and Care Plan
- West Essex Paediatricians Housing Application
- Medicines Management Administration of Medication

MECSH relaunched
In the first half of the year there was a re-launch of the Maternal Early Childhood Sustained Home-visiting (MECSH) programme, which is the evidence based programme for identifying and working with the most vulnerable young families. The new Essex-wide leaders of MECSH received an inspiring two days training with Professor Lynn Kemp the designer of the MECSH programme. Over the course of 2018 all clinical colleagues across Essex and some of our partners were upskilled in the process and ethos of this programme.
ECFWS Newsletter Used to Share Learning
The ECFWS monthly newsletter has gone from strength to strength in terms of the value to ECFWS colleagues. As well as being the source of much information on ECFWS colleague news, safeguarding information, a medicines management update and general quality and governance, the newsletter during 2018 has included items on learning from incidents and safeguarding reviews in order to better share this vital information so that preventative action is more likely to be taken.

Community Practitioner Prescribers
In October around 60 Health Visitors and School Nurses gathered together to attend the first Community Practitioner Prescribers update in Essex.

The day was organised and led by Louise Crowley, Lead Pharmacist and Karen Wilson, Local Education Lead providing colleagues with information and support on current issues with prescribing. Several renowned speakers joined the event including Julie Thornton, Essex Immunisation Service, and Clare Kyffin, Allergy Nurse Specialist, covering the latest vaccination programme and current research on asthma and allergy in children.

Practitioners will now be able to offer timely information and support for families across Essex, and contribute to positive outcomes for children and families and a reduction in GP appointments and hospital admissions.

Healthy Family Support Workers competencies framework
ECFWS introduced a training programme, underpinned by robust standard operating procedures and a competency framework, to enable Healthy Family Support Workers to undertake under 1 and 2-3 year checks to a consistently high standard.
All Healthy Family Support workers have been updated in all aspects of their daily role following the significant changes that were made in 2017/18 as a result of the integration of the service. The ECFWS created and delivered a full days’ update in January 2019 to keep the continuity and quality of service. All Healthy Family Support Workers have completed a competency document to support their practice.

Supervision and peer review
Work has continued throughout the year in improving the track record of clinical supervision and peer review among teams, with the aim of it being regular ‘business as usual practice’ at the earliest opportunity. A new audit/supervision process has been designed and piloted in the North Quadrant and is about to be rolled out across Essex. All supervision forms, peer review forms and the referral forms were redesigned for the service to make them suitable for the newly developed integrated services and in line with national recommendations. This work will continue in the forthcoming financial year.

Volunteers’ governance and a celebration (see also Volunteers’ week in priority three)
During the course of the year it emerged that that monitoring and governance of the many volunteers who had come from previous (pre-contract) organisations was not as robust as it should be and a need area identified this year was the tracking and assurance processes for volunteers. This was especially related to the delivery of the appropriate level of training due to the Virgin Care and Barnardo’s organisations having differing expectations of frequency and level of training.
This was addressed by the joint agreement of the Training Standard Operating Procedure that specified that all training was to be ‘graded’ at a level linked to the Intercollegiate Documents. As a result of this a new paper workbook was developed and is now marked by the Safeguarding team and tracked for attainment by all volunteers.

There was a review of all processes and risks around volunteers, including ensuring all had up to date DBSs, were appropriately trained and knowledgeable about ECFWS quality and safety procedures, including and particularly around safeguarding, information governance and health and safety. All volunteers were then issued with their own updated ID and lanyard.

In January over 40 volunteers from across ECFWS attended the annual Volunteer Celebration event at which all volunteers were welcomed and thanked for their commitment and support. The volunteers were encouraged to stand up and share their volunteering experience and what it means to them. Volunteers were quick to jump up and share their stories about their efforts and many spoke of the immense pride in the good work they do in helping children and families alongside their ECFWS colleagues. The event was attended by volunteers who have been providing invaluable assistance across the ECFWS in roles such as: ‘meet and greet’, breastfeeding peer support, ‘stay and play’ session support, crèche, and admin support.

**Training Passport and Safeguarding training**

Last year the ECFWS pledged to develop and introduce the ‘training passport’ to assure the attainment of the mandated 16 hours of safeguarding training for all Level 3 staff in a 3 year period, and to implement joint training for all staff (both Virgin Care and Barnardo’s employees), including the level 3 safeguarding training delivered by The Learning Enterprise (TLE).

The ECFWS have developed their own Safeguarding Children and Looked after Children training Standard Operating Procedure that details the exact requirements that each staff group requires in line with the Associated Intercollegiate Documents for Safeguarding Children and Looked After Children. This sits alongside the Virgin Care Safeguarding Training policy and Barnardo’s policies, allowing a joint agreement and approach to Safeguarding and LAC training requirements and incorporates the training passports that are being rolled out.

The Core Level 3 Safeguarding Children training continues to be delivered by the Safeguarding Practitioners within ECFWS and this is now delivered to all of the integrated ECFWS team. TLE are in the process of developing a suite of Level 3 training packages that will be available via e-learning. It is recognised that Face to Face training and Safeguarding expertise is required for Level 3 Safeguarding children training hence TLE will not be taking on this role.
Domestic Abuse Training
The ECFWS Safeguarding Team has developed an Essex-wide programme of training related to Domestic Abuse, bespoke to ECFWS. The training refreshes on the impact of and importance in managing cases, assessed using the Vulnerability and Resilience framework and ties in training on the new Domestic Abuse SystmOne Template, all of which allows staff to be more informed and efficient.

Safeguarding Investigations
The Safeguarding Team are particularly proud of the high calibre of Safeguarding Investigations that they have undertaken through the year, utilising the training that was commissioned by Virgin Care on Root Cause Analysis. To ensure that the calibre remains at a high quality we have undertaken a Peer Review of two full investigations which have had major learning benefits for those completing them.

In consultation with the Multi-Agency Referral and Assessment Team (MARAT), ECFWS have developed a new process allowing the safe electronic sharing of our pertinent health information in a more timely fashion, to inform the Multi-Agency Risk Assessment Conference (MARAC). The Health information Form (HIF) has been redesigned in the last 3 months to better reflect the assessment processes already used within ECFWS following staff feedback. HIF completion (both timeliness and quality) is regularly audited by the safeguarding team. Results have informed additional training required by ECFWS.

Looked After Children Support
A very comprehensive audit was undertaken by the Looked After Children Team this year on the Referral for Support process (this is how to refer to social care). The results showed that a number of colleagues are struggling with this process. As a result there has been direct feedback to the staff involved and there is a planned basket of additional support that will be rolled out in 2019 to up-skill all practitioners.

Data Cleansing
Data Cleansing is of great importance when working with the clients in safeguarding and Looked After Children, and as part of our twice yearly cleanse for the ECFWS units in SystmOne, new errors/old data has been uncovered. It has been a long exercise this year as these discoveries in reporting that are historical mean that the cleansing process will need to go back many years prior to ECFWS inception. This long process continues to be undertaken and we have highlighted the need to be given correct data by partner agency colleagues to enable this to be as effective as possible.

Improvements to Central Alert System (CAS) alerts process
ECFWS had pledged to improve the process of logging, cascading and recording responses to CAS alerts. As a result a new process has been set-up for CAS Alert cascade for Patient Safety Alerts, Drug Alerts, MDAs etc.
Responses from services are now recorded via Smartsheet – (a live, web based spreadsheet), with an audit and sharing of responses reported at the monthly ECFWS Care, Quality and Safety Meetings.
West Essex (CCG) Services Record Keeping Training
Informal training took place within teams to ensure data is captured appropriately, specifically to ensure all contacts (face-to-face and telephone that are clinically relevant) are captured in reporting by retrieving child’s records through appointment on SystmOne ledger.

Priority 3: Continue to be recognised as an outstanding employer

Nationally:
- The Feel the Difference Awards continued this year which celebrate the achievements of our colleagues through ongoing recognition.
- This year we ran a critical project with two aims, to identify how we could support staff to return to work quickly and with more support and to create a culture of support and wellbeing enabling colleagues to bring their best selves to work. We have supported managers by simplifying our processes and by coaching them to understand and use their data so they can proactively identify and support their colleagues earlier. Following colleague feedback we have made it easier for them to find support with a Wellbeing Hub on our internal website for colleagues with self-help material on our My Wellness site with clear details of what our occupational health service offers.
- Poor emotional health and wellbeing alongside musculoskeletal problems are our highest reasons for sickness absence. Therefore, we have increased information we provide about wellness, support and wellbeing through local newsletters and our intranet. We have also rolled out Mindcoach training for colleagues, ensuring that all staff have a Health and Wellbeing objective set at their appraisal and there is fast access to Physiotherapy when indicated either through our own services or through our Occupational Health provider.
- We have embedded our apprenticeship development and two per cent of our workforce are on apprenticeships as part of our commitment to continue to develop our staff for the future.
- We have worked to increase the number of colleagues receiving an appraisal and we have increased our performance in our mid-year to eighty six per cent.
- Subject Access training to over 300 DSAR champions
- Our ninety five per cent Information Governance (IG) training target has been achieved
- IG support to services’ projects to support patient care such as SPA’s and integrated care initiatives

Essex Child and Family Wellbeing Service

The Essex Colleagues Partnership Forum
The Essex Colleagues Partnership Forum was set up and is run jointly by HR leads from Virgin Care and Barnardo’s. The Essex colleagues Partnership Forum is a great opportunity for colleagues’ representatives to meet with senior managers to share experiences and to raise and discuss local issues, as well as to hear about any future plans management might have for the service. Items submitted by colleagues (not individual/personal issues) can be heard in the meetings and then feedback to the wider workforce through the ECFWS monthly newsletter.
**Newsletter**
The ECFWS monthly newsletter now contains nominations for ECFWS ‘Stars of the Month’. This has enabled people to recognise and celebrate the achievements, hard work and dedication of individual colleagues and teams, which helps them to feel valued and provides inspiration to all across the Essex services.

**Quadrant Away-days**
There have been several quadrant away-days held over the course of the year, which have been well attended and well received. These provide an opportunity for all colleagues to reflect on the past year and spend time looking at how together the services can be developed further in future. Where possible these have included input from the ECFWS commissioners and other partner agencies. Colleagues really valued the opportunity to network with each other and were able to relax and enjoy each other’s company in settings outside their usual workplaces during breaks. There were several award ceremonies across the quadrants where the invaluable contributions of colleagues could be recognised and celebrated.

![Image of people receiving awards](image)

**One Year of Integrated Services**
In addition to the away-days mentioned above there were several celebratory events in the autumn to mark the first full year of the integrated ECFWS from 1st October 2017. These sometimes included awards, for example Mid Essex celebrated their first integrated anniversary at Warren Golf and Country Club on 27 September to honour colleagues for their outstanding contributions and commitment to the service.

The evening began with a barbeque and photography, followed by the awards categories and a few speeches from the winners. For the ‘You Made a Difference Award’ category, the public was asked to nominate a colleague who they believe went above and beyond, and truly made a difference. An overwhelming number of nominations were submitted for this category with parents appreciating staff for their commitment and efforts.

![Image of people receiving awards](image)
**Love Your Lunch**

ECFWS colleagues have been encouraged to take up the Virgin Care ‘Love Your Lunch’ initiative. Virgin Care create and distribute free wellness campaign packs every other month to encourage colleagues to sit down as a team to share lunch and learn something new about supporting each other’s wellbeing. Love your Lunch packs always have a specific topic that will be linked with either an objective for the business or an external health campaign. These can be focussed on anything from stopping smoking to supporting colleagues in feeling good about themselves. For example, the April 2018 Love your Lunch focused on stress awareness and that month in Chelmsford Family Hub the ECFWS People and Business Partner presented some quick exercises on how to manage stress in the workplace.

**Volunteer Week (see also Volunteer Governance in Priority Two)**

In June the ECFWS celebrated Volunteer Week by thanking the many volunteers who regularly help out in various ways in the Healthy Family teams. There were several events, for example the North Quadrant celebrated by hosting ‘Thank You’ afternoon tea events at some of their hubs and delivery sites.

All volunteers within the North were invited to attend to show them the service’s thanks for all the commitment and dedication they have shown to supporting colleagues, families and the service over the last year. Volunteers enjoyed some lovely food and were given awards celebrating their length of service. Special thanks was given to three volunteers who received their five year award for volunteering with ECFWS and either Barnardo’s or one of the ECFWS previous providers.
**NHS 70th Birthday**
Several events took place in 2018 to honour the NHS’ 70th Birthday. This included a party in the South Quadrant where colleagues celebrated the NHS with a slice of cake and coffee. The team had a great laugh and was lovely to hear the colleagues reminisce of their time providing NHS services over the years.

![Image of colleagues at a party]

**Personal Development**
ECFWS colleagues have been given opportunities to attend workshops aimed at supporting their understanding of personality types and positive psychology. Several workshops took place in Essex with overall very positive feedback:

- **TypeCoach** is a method of looking at your personality preferences and those of your colleagues, families and friends, to help facilitate a greater understanding of how we make decisions, influence others, and complete actions. This understanding can help us improve our communication and working relationships with those around us. It uses the principles on the Myers Briggs Type Indicator making personality preferences come to life in a practical way that everyone can use.

- **MindCoach** workshops are part of the ‘feel the difference’ development programme. Using the science behind positive psychology, MindCoach looks at the mind-set and resilience you need to bring your best self to work every day. A healthy mind-set includes optimism, flexibility, and believing that you have control over your own actions and responses to events. Resilience involves the ability to bounce back following setbacks, with a view to a better future ahead. MindCoach offers information on these topics, along with the chance to practise using different types of activities in groups or in pairs.

**Priorities going forward in 2019-20**
Continuing to demonstrate service quality and safety remains a top priority for Virgin Care over the coming year. However, Virgin Care has also identified other areas where improvements can be made to the services it delivers to ensure everyone feels the difference.

**How Virgin Care identified its priorities for 2019-20**
Virgin Care’s national priorities were identified by its board as part of an annual process, having reflected upon the feedback provided by people who use services and other stakeholders throughout the year in a variety of methods.
Individual business units, including the Essex Child and Family Wellbeing Service were then able to set their own priorities.

The Essex Child and Family Wellbeing service is continually listening to and noting feedback from people who use the service (based on Friends and Family Test comments, evaluations following interventions, Citizens’ Panels, complaints and compliments), as well as commissioners and colleagues who work within the service and have ideas for improvements or innovations. The ECFWS priorities going forward are therefore based at least in part to this feedback as well as paying heed to a continuing drive towards excellence and a desire to provide a good quality service that meets the needs of the community it serves, as well as complying with best practice and regulation/ guidelines from CQC, OFSTED, NHS/Social Care Innovations, NICE and professional bodies.

NB Progress with all items mentioned as priorities for ECFWS going forward (2019-20) will be appropriately measured, monitored and reported on, and progress will be shared with commissioners and partners though the regular contract monitoring, partnership board and organisational governance mechanisms as appropriate.

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

**Nationally:**
- Implementing the revised Friends and Family test feedback question in line with guidance from NHSE.
- Embedding Customer Service into our Quality Strategy using the follow key themes: Experience, Efficiency and Effectiveness.
- Revision of Safe guarding Training Strategy to incorporate recommendations from new intercollegiate guidelines (Looked After Children & Adults).
- To make this more widely available through leaflet updates etc.

**Essex Child and Family Wellbeing Service (ECFWS)**

**Launch the Reporting of Commissioned Outcome Measures**
The ECFWS Outcome Measures as already mentioned above are due to start to be reported as KPIs to commissioners from April 2019. This is a major change for which two years of groundwork preparation has taken place and which will aim to record and report meaningful contacts with children, young people and families and provide evidence of positive change as a result of the ECFWS involvement and intervention.

**UNICEF Baby Friendly Initiative (BFI)**
Having successfully achieved re-accreditation to Stage Three of the UNICEF BFI in the North Quadrant, the ECFWS will work towards achieving the same level of competence and assurance in the other three Quadrants. This will involve a large scale programme of work and is likely to take many months to achieve, but it is the ECFWS’s ambition to strive to meet the highest standards in its field consistently across all the geographical areas it serves.
Non-Medical Prescribing
Non-medical prescribing is to be reintroduced across Essex during 2019/20 with the support of the local Clinical Commissioning Groups. All of the Specialist Community Public Health Nurse (SCPHN) trained colleagues already have a prescribing qualification and the expectation is that these colleagues will receive refresher training and be updated so that they will be able to progress to prescribing during the year. This is an invaluable way of supporting families while reducing unnecessary GP appointments.

Footfall and Reach
There are plans to redesign the way ‘Footfall’ and ‘Reach’ are recorded, including introducing a privacy notice to ensure recording is correct and ethical.

West Essex Continence Service
The West Essex Continence Service will be extended and further developed following recent sign off of the related business case. During 2019 a second specialist children’s continence nurse will be recruited in order to increase the capacity of the service.

Adverse Childhood Experiences
The ECFWS will aim to raise awareness among the workforce of the impact of Adverse Childhood Experiences and toxic stress on the developing brain through a series of awareness workshops be completed over a 10 month period. In addition there are plans to train the frontline workforce in Mindful Emotion Coaching to provide our practitioners with the skills and resources to build resilience and core life skills in young people affected by toxic stress. This will be implemented using a ‘train the trainer’ approach. All colleagues will complete the training within a 12 month window.

Report Writing Training
The safeguarding team will be delivering a suite of training on safeguarding including improvement in report writing following the Referral to Social Care audit. This will include the development of training on how to complete a Referral for Support of high quality alongside a repeat of the audit to ascertain if training delivered on capturing the voice of the child has had the desired impact.

SUDI Training
The safeguarding team have arranged Lullaby Trust training due to the increase in Sudden Unexplained Deaths in Infants (SUDI). The training will be carried out throughout 2019/20. Due to demand we are also developing awareness training on the same subject matter to support staff in a move to a more coach based approach when dealing with families who may have made decisions that increase the likelihood of SUDI, such as co-sleeping.

Unplanned emergency care notifications
Unplanned emergency care notifications are shared with the service without consideration of purposeful referral and this year the ECFWS will develop clear pathways and expectations of what information we will accept and share with partner agencies. This follows discussion and agreement received from the National Safeguarding Children’s Lead for Virgin Care that this is a positive decision.
**Brief Solution Focused therapy**
The ECFWS will offer Brief Solution Focused therapy training for all School Nurses and Children and Young People practitioners to underpin practice when working with young people to address health and wellbeing needs. The first cohort of training is planned to be delivered in May 2019.

**Healthy Lifestyles Support**
Brief family centred Healthy Lifestyles support to be offered to families, living in a deprived quintile, with a reception aged child identified as overweight through the National Child Measurement programme. This will commence with a targeted telephone intervention, individualised support package and annual follow-up until the year 6 NCMP review.

**National Conference**
There is a plan for a National Conference to be delivered and hosted in partnership with ECC to demonstrate and promote the Essex Model and to learn from other innovate models being delivered elsewhere in the country.

Many of the projects from 2018 are wide-ranging and complex and will continue to evolve during 2019/20. There will be substantial learning from these from which the ECFWS can continue to improve the service and which will need to be embedded into practice.

There are likely to be other projects commencing in 2019-20 that are not detailed here. The ECFWS is mindful of the wholesale change that has already been undertaken over the first two years of the contract and that colleagues need a period of consolidation and to be given time to evaluate the results effectively.

A key focus going forward for ECC will be realising whole systems benefit by joining up different agencies and commissioning responsibilities in a single contract with the aim of ensuring a better user journey.

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

**Nationally:** (NB these items also apply to/have been implemented in ECFWS where applicable to the Essex children’s services)
- Safeguarding in the MyLearning system to support colleagues to undertake and record all related CPD activities around the safeguarding agenda
- New Safeguarding Strategy mapped to organisational values, VC Health and Care Practitioner’s Strategy and Customer Services Better Map
- Working further to standardise record keeping processes across the organisation with the support of clinical leads, safeguarding teams and operational colleagues
- Further develop the corporate reporting on General Data Protection Regulation/Data Protection Act 18 compliance using our privacy management tool
- Enhance the data subject access provisions
Standard Operating Procedures (SOPs)
As listed in the section above, many SOPs were introduced during the course of 2018/19. It is important that all SOPs are reviewed during 2019/20 as processes change and develop. It is also important that some of the SOPs are audited over the coming year to ensure that colleagues understand and adhere to them in order to maintain the safety, quality and continuity of all services.

Review 2018/19 projects
Due to shortages of staff in some areas, programmes such as MECSH, Interacted 2 year review did not have the focus of attention that was originally intended. As staffing issues resolve these initiatives will to be reviewed to ensure full progression throughout the services. The ECFWS plan to focus on these projects across all Quadrants at the same time in order to get the full benefit for all service users and practitioners.

Peer Review and Supervision
A continuation of the peer review and supervision work as mentioned above including to embed this in all colleagues practice and to include the introduction of Restorative Supervision in the process.

Governance Structures
To review and revise the Care Governance Structure for Family Hubs to be in line with the new service offer

ECC Annual Reviews
To work with ECC to redesign the Annual Review process undertaken by ECC to be more in line with the OFSTED and CQC framework

Virgin Care Internal Service Reviews (ISRs)
ECFWS to work towards having one internal service review that represents the Essex Wide Contract rather than it being split into quadrants, in order to encourage consistency of practice and iron out inequalities in quality and governance, and provide mutual support and learning.

Quality assurance and progress tracking
The ECFWS will continue the implementation of quality assurance and progress tracking for Early Years Foundation Stage in family hub and delivery sites. Standardisation of planning and resources are currently underway for completion April 2019, with Early Years Foundation Stage (EYFS) progress tracking to be implemented June 2019.

Safeguarding and Looked After Children
- The Safeguarding team will carry out an audit of the transfer in/out process to ascertain if the learning that has been identified from investigations to date regarding transfers has been addressed.
- The safeguarding team is developing an aide memoir for school nurse colleagues as there are challenges at times to address the ‘cold-call’ that is required in relation to Domestic Abuse Notifications.
• To assure calibre in Subject Access Requests we have developed a competency in this process that will be completed in 2019/2020. This was following an incident in 2018/19.

Audit of CAS Alerts
Following the further development of the process of CAS Alerts in the last year, the ECFWS will aim to audit the timeliness and effectiveness of response to and implementation of national CAS Alerts

Nationally:
We will be planning to move our organisational appraisal to ninety per cent next year and continue improving our support to achieve this through making further improvements to our system.

Essex Child and Family Wellbeing Service (ECFWS)

Colleague Health and Wellbeing
There are some ambitious projects planned in the ECFWS over the coming year aimed at improving the overall health and wellbeing of colleagues who work for the services. For example, Lizzy Kingsford, Quadrant Manager in the North Essex writes:

“Health and wellbeing of colleagues – Feel the Difference – this is going to be a huge one year project during which we intend to improve the emotional and physical health of the entire North workforce. We have applied for a discounted Leisure World corporate card, possible corporate entry to Beth Chatto (local gardens and garden centre), a ‘daily mile’ from all bases, competitions regarding the amount of miles a team can do, possibly walking desks, desk cycles, volunteers to do mindfulness and massage, new chairs for bases, new work spaces at bases to create better work environment, fruit at all bases for colleagues. The awards ceremony this year will be a sports day, with the aim for all colleagues to get involved with the schools’ daily mile, and lots of other ideas to be discussed, all starting in April 2019.”

Similarly Zoe Oddy, Mid Essex Quadrant Manager writes:

“Our aim is to create a culture of kindness through mindful emotion coaching and restorative supervision.
• 30 Supervisors identified for training
• Training to be delivered May 2019
• June onwards, every staff member to have access to monthly restorative supervision on a voluntary basis.
• Focus on staff wellbeing
• Mindful walking – organised walks taking place from sites across Mid Essex
• Fruit Baskets in office basis to encourage healthy snacking
• My Weight Matters – Self weigh facility on family hubs, online weight management support, recipe swapping and peer support
• Standing desks and meetings to improve posture and reduce time spent sitting.
All Quadrants and all colleagues will have local initiatives similar to the ones mentioned above and will encourage people to be using the Virgin Care ‘My Wellness’ platform or other widely available Apps to monitor progress with their health and wellbeing.

Apprenticeships
ECFWS have a number of staff who are about to start apprenticeship programmes, including the level 5 Leadership and Management Apprenticeship and others will be encouraged to come on board to develop the ECFWS nursing workforce.

Priority 4: Delivering quality health and social care as efficiently as possible

Nationally:
- Developing a national engagement programme for our Citizens Panels to help us design efficient and effective services
- Ensuring You said we did actions accurately reflect the feedback given and improve quality (experience, effectiveness, efficiency)

Essex Child and Family Wellbeing Service (ECFWS)

Further new groups and interventions planned across Essex
Rolling out across Essex from April:
- ‘Ready Steady 1s and 2s’
- Baby Beginnings
- Play, Stay Learn
- School readiness workshops running throughout 2019 – this is a large scale project currently in the design stage, which uses a questionnaire sent to all families of children starting school to improve their school readiness. School readiness projects continue to evolve and once evaluated properly will be rolled out across Essex for continuity of information and service delivery in relation to outcomes
- Adverse Childhood Events (‘ACES’) training is to be rolled out across Essex led by Mid quadrant
- Launch of other outcome based evidenced practise services such as Parenting programmes, Solution Focussed Therapy and Emotion Coaches which will demonstrate work contributing to the families’ outcomes
- Implementation and establishment of Healthy Family Drop ins which provide assisted Self Weigh in family hubs, delivery sites and communities

The ECFWS PB19 services will also aim to do the following:
- To increase the Duty Team by including School Nurse Duty (South)
- Increase the number of families who benefit from the MECSH programme (All)
- Introduce the Community Larder/Fridge Scheme (South)
- Aim to move out of Billericay Health Centre and relocate both Billericay and Brentwood teams in a new office between both areas. This will build better working relationships, reduce isolation and reduce traveling times (South)
- To maintain Family Hubs and Delivery sites in line with all CQC/OFSTED inspection criteria (all)
- To reopen Highcliffe Delivery Site following closure earlier this year due to the building becoming unsafe (South)
The West Essex CCG Commissioned Services plan to:

- Roll out “Talk Together” targeted intervention package across Essex
- Set up Signing workshops every two months for parents/carers in West Essex
- Deliver “Gym Trail” training by Physiotherapy and Occupational Therapy for education staff so schools can support children to develop co-ordination and motor skills
- Provide support for families of young children with ASD through ASD groups in Loughton and Waltham Abbey

The Safeguarding Team plan to:

- Work with Social Care to improve the Initial Health Assessment process and the role of ECFWS.

Brexit

As an organisation we are working on an action plan for Brexit to ensure we are as prepared as possible. A Virgin Care EU Exit Group has been established to oversee and provide assurance to the Executive, Board and Government. As more information becomes available we are ensuring that we communicate this to our colleagues and that we mitigate against any Brexit risks our organisation, and the health and social care sector, as a whole, may face in line with Government guidance issued to the NHS and our sector. Managing Directors are established as Local Accountable Officers for Emergency Preparedness, Resilience and Response (EPRR). Nationally the EU Exit Group includes representatives from Workforce, Procurement, Medicines, Management, IT and Information Governance to ensure that we have plans in place across our organisation and that people are fully informed about what they need to do in preparation for Brexit and the potential of a ‘no deal’ Brexit.

Taking part in national, local and clinical audits

National Clinical Audit Participation: Community Services

Over the course of the year, Virgin Care took part in a number of national clinical audits including:

National Safeguarding Audit

- The National Safeguarding audit is based on a combined Children’s Section 11 and Adult Safeguarding Self- Assessment Tool
- Ninety eight per cent of all audits and action plans were completed, an increase of ten per cent from the preceding year
- Red/amber actions had decreased from last year
- New safe guarding audit peer review system undertaken across the organisation- with no risks identified
- New audit currently being designed to enable access on our MyApps platform next year
**Other clinical audit programmes**

Across all its services Virgin Care runs a core audit programme, including the following core audit programmes which the Essex Child and Family Wellbeing Service took part in:

- Medicines Safety Audit (see Part 3)
- Annual Record Keeping Audits
- Annual Data Flow Mapping Audit
- Quarterly Confidentiality Audits
- Annual Infection Prevention and Control audit
- Health and Safety of premises audits are on a rolling programme – in ECFWS these are conducted with liaison between the Barnardo’s and local Virgin Care Health and Safety Leads

In addition the ECFWS conducted several local audits during the course of the year, including the following, which focussed on Safeguarding Children:

- Audit review of restricted records. We have reviewed all restricted records to check whether they are appropriately restricted due to the risks that are implicit.
- Audit accuracy of Child Protection Plan (CPP) icon and Caseloads – ECFWS are regularly checking the accuracy of this data and remain in consultation with the Local Authority to have this information supplied. This is led by the safeguarding teams across Essex.
- Audit Supervision 1 - Supervisor Observation – ECFWS have regularly assessed and continue to assess those who deliver supervision to assure the appropriate calibre of this vital work.
- Audit of Supervision 2 - Themes – ECFWS utilise and report the themes of what is bought to supervision. This information can be used to influence training requirements.
- Audit MARAT – ECFWS have audited whether correct procedures have been followed in submitting the MARAT HIF and the calibre of the submissions. As a result the ECFWS is raising awareness and training. The audit will be repeated – and this will allow more in-depth exploration of any issues arising.
- Peer Review – the safeguarding and LAC teams undertake peer review of their own practice.
- Audit Level 3 Safeguarding Children training delivery – This is an audit of the quality of training delivered within the ECFWS.
- Audit of Prescribing in West Essex Community Paediatric Service (to be repeated annually)

Additional audits focussing on Looked After Children (LAC) include:

- Audit SDQ - The Looked after Children Team completed the Strengths and Difficulties Questionnaire Audit in this year. The aim was to determine the impact of this local authority completed assessment in informing the Looked After Children’s Nurses assessment at annual review health assessments. The audit has shown that fewer than 50% of LAC have their SDQ submitted/completed from their social worker. The identified poor return by social care has resulted in some changes in recording practice in one quadrant. The results are to be shared with the Children in Care partnership to raise awareness in this area.
- Audit Review Health Assessments (RHA) visit venue – The ECFWS have clearly identified that the majority of LAC would prefer to have their RHA undertaken at home. As a result we are looking at how we best enable this to happen.
• Initial Health Assessments (IHA) Process Tracker – We submit the timeliness of IHAs as there has been a change in process
• The safeguarding team will be delivering a suite of training on safeguarding including improvement in report writing following the Referral for Support (RFS) Social Care audit. This will include the development of training on how to complete an RFS of high quality. Additionally repeating the audit will assist in ascertaining if training delivered on capturing the voice of the child has had the desired impact.
• In the West Essex PB19 services they now operate a clear desk policy. A Clear Desk Audit has been completed for every family hub, base and delivery site to help to monitor and ensure compliance

Research Statement

We continue to participate in a number of research, service evaluation and service development projects, which are overseen and governed by our Striving for Better speciality networks.

Virgin Care supports participation in research to help improve the care off people who use NHS and local authority services and we will continue to develop and promote this area over the coming year.

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

There are currently no formal research projects in progress in the Essex Child and Family Wellbeing Service.

Publications
Essex Child and Family Wellbeing Service
The Essex Child and Family Wellbeing Service were not represented in any publication in 2018/19

Learning from deaths

Essex Child and Family Wellbeing Service – Learning From Deaths

In 2018–19 there were no child deaths directly attributable to ECFWS. Where deaths occurred that linked to other agencies we have provided support as and where required.

An ECFWS 2018-19 annual review of incidents included information regarding incidents linked to child deaths and reported:
There appear to be a relatively high number of child deaths over the course of the twelve months. On analysing the data, the following details emerge. It should be noted that Sudden Unexpected Death of an Infant (SUDI) may not have been an identified cause at the time that the incident was entered onto CIRIS. For this reason, deaths in other categories such as Unexplained Death or Unexpected Death may be subsequently identified as SUDI though the CIRIS category is not updated. To help future analysis it is recommended that colleagues make a note of updated information about an incident on CIRIS as it arises.

<table>
<thead>
<tr>
<th>Incident Type (category on CIRIS)</th>
<th>SUDI</th>
<th>Suicide</th>
<th>Un-explained death</th>
<th>Illness</th>
<th>Un-expected death</th>
<th>Gestational death (pre-maturity)</th>
<th>Still Birth</th>
<th>Homicide</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Safeguarding</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Child Deaths</td>
<td>2</td>
<td>0</td>
<td>3</td>
<td>9</td>
<td>6</td>
<td>9</td>
<td>15</td>
<td>1</td>
</tr>
<tr>
<td>Total:</td>
<td>4</td>
<td>2</td>
<td>6</td>
<td>11</td>
<td>8</td>
<td>9</td>
<td>15</td>
<td>1</td>
</tr>
</tbody>
</table>

- As a result of the number of Sudden Unexplained Death of Infant (SUDI)– (formally known as Sudden Infant Death Syndrome- SIDS), ECFWS have identified and developed an awareness raising of SUDI teaching programme that is being delivered Essex wide. The safeguarding team have also arranged for training from the Lullaby Trust that is occurring in September 2019 for all colleagues. Leaflets have been purchased from the Lullaby Trust to tackle the causes of SIDS and the ECFWS are arranging for these to be handed out at all contacts. Articles have been written regarding raising awareness in the Newsletter. There is now a SUDI conversation incorporated into Healthy Family Support Worker away days. Colleagues attended Colchester Hospital Rapid response / SIDS / SUDI Training.
- As a result of the thematic analysis of causes of suicide in Young People in Essex we contributed to the Stay Safe conferences across Essex. The ECFWS funded approximately 100 spaces for ECFWS colleagues to raise awareness on this vitally important issue.
- Local serious case review – Non-accidental death – now used in Safeguarding level 3 training for learning.

**Statements from CQC**

Some services operated by Virgin Care are required to register with the Care Quality Commission (CQC).

As part of this document, it can be confirmed that Virgin Care Services Limited is registered with the CQC and has no conditions attached to its registration. Virgin Care Service Limited services has not participated in any special reviews or investigations by the CQC during the reporting period.

Full copies of CQC reports are available on the CQC’s website at [www.cqc.org.uk](http://www.cqc.org.uk)
Children’s and Social Care services may also be the subject of inspections or reviews by OFSTED.

**Overview of CQC inspections this year**
The Essex Child and Family Wellbeing Service was not the subject of either a CQC or OFSTED inspection during 2018/19.

Throughout the year the ECFWS have worked on improving the awareness of and preparedness for the CQC and OFSTED inspection processes by means of CQC/OSTED workshops, ‘mock’ inspections (see walkthrough inspections in section two above), and use of the Virgin Care Internal Service Review (ISR) process and the OFSTED Self Evaluation Forms (SEFs).

**Independent Service Reviews (ISR)**

Virgin Care operates a programme of ‘Independent Service Reviews’ (ISR), with each of its clinical services required to complete this type of assessment twice during each calendar year, with no longer than six months between reviews.

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

The ISR programme covers the same areas as a CQC inspection and produces a rating based on the same scale as the CQC’s reports.

In ECFWS, Virgin Care undertook a number of ISRs and the self-assessment findings are outlined below.

<table>
<thead>
<tr>
<th>Service Name</th>
<th>Outcome of ISR</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mid Quadrant</td>
<td>Good</td>
<td>Action Plan in place</td>
</tr>
<tr>
<td>North Quadrant</td>
<td>Good</td>
<td>Action Plan in place</td>
</tr>
<tr>
<td>South Quadrant</td>
<td>Requires Improvement</td>
<td>Action Plan in place</td>
</tr>
<tr>
<td>West Quadrant</td>
<td>Requires Improvement</td>
<td>Action Plan in place</td>
</tr>
</tbody>
</table>

**Safeguarding Statement**

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

- National Safeguarding Assurance function working across localities and partnership boundaries to respond to national developments, legislative changes leading to continuous improvement and learning across the organisation.
- Our clinical governance and safeguarding committees provide board assurance that our services meet statutory requirements.
- Named professionals are clear about their roles and have sufficient time and support to undertake them.
• Where appropriate, services have submitted a Section 11 Review report and/or safeguarding adult self-assessment audit tool.
• Action plans are monitored across the organisation at committee and board level.
• Safeguarding policies and systems for children and vulnerable adults at risk are up to date and robust.
• Safeguarding training is included in induction and integral to the organisation’s training policy.

Review of Safeguarding Children in ECFWS 2018-19

Rosie McHearne, ECFWS Safeguarding and Looked After Children Manager reports:

This year has been very busy for the ECFWS and it is important to reflect on some of the key messages and learnings that came out over the last year.

The Looked After Children (LAC) and Safeguarding teams have worked alongside ECFWS teams throughout the year to address a number of improvements that we can undertake to help improve the safety of the children, young people and families in Essex.

We have explored a number of difficult cases with ECFWS colleagues and hope that this year the learnings we have identified will improve all colleagues’ abilities to intervene more swiftly and with positive outcomes.

Early in 2018, Essex reflected that there had been a significant increase in the number of tragic suicides for the under-19 age group and as a result there has been an investment in raising awareness on how to support those who may be considering this action. There is a conference planned in 2019 and we are trying to secure spots for all our School Nurses to help develop the skills required to identify and support this very high-risk group.

We also had cases where families with known significant vulnerabilities were transferred between practitioners and some significant history was not shared. As a result of this, we have a more robust transfer in/out standard operating procedure available on our intranet that gives clear guidance on what actions should be taken by each team member. The ECFWS’s function in safeguarding is a vital one and requires precise and accurate record keeping, assessment and communication. This will help us identify those in need of support and enable the required interventions.

There was one Non-Accidental Injuries (NAI) case where we identified the need to undertake a set of baseline measurements; in particular, this was the head circumference at the new birth and 6 week check. This has resulted in changes to our standard operating procedures and supplying of training for colleagues that may have lost this skill in previous organisations where this measurement was stopped.

The Safeguarding Palette was also flagged as an underused SystmOne tool and improving its use has been a theme throughout the year, with more training to come.
A child presenting with significantly poor weight gain this year has resulted in the development of a faltering growth standard operating procedure that is expected to be launched by June 2019. We believe that this will give greater clarity on actions to take when young children appear underweight. To support this, we will be supplying all colleagues that work with assessing development of the 0-5 age group with the Sheridan birth to 5 book as a paper reference guide.

To bring further consistency in practice to all of ECFWS there have been changes in how to collate Universal, Universal Plus (UP) or Universal Partnership Plus (UPP) cases with new guidance circulated to all colleagues on the new defined caseload guidance. This makes it clear that it is imperative to show how decisions have been reached and the assessments that have been undertaken to reach the decisions. In addition, we have revamped the Safeguarding and LAC templates with more positive feedback on how they assist all practitioners and flow from training into practice.

In addition there has been information and training for colleagues on Safe Sleep following an increase of SUDI (Sudden Unexplained Death in Infants) in Essex.

We have offered and delivered training across Essex around the Domestic Abuse SOP. We ended our newsflashes this year with a return to a set of learning from a case that shows the importance of assessments, recording and communication.

**Statement on the accuracy of our patient data**

**Nationally:**
Virgin Care submitted information during the year to the Secondary Uses Service (SUS) for inclusion in the Hospital Episodic Statistics, which are included in the latest published data. Community service outpatient data for SUS submissions is being validated to ensure ongoing submissions are confirmed as being successful.

The percentage of records in the published data which included the patient’s valid NHS number was:

- 97.7% for admitted patient care;
- 99.9% for outpatient care; and
- 96.5% for accident and emergency care

The percentage of records in the published data which included the patient’s valid General Practice Registration Code was:

- 97.1% for admitted patient care; and
- 99.9% for outpatient care
Essex Child and Family Wellbeing Service

2018-19 dip-test record keeping audits  

<table>
<thead>
<tr>
<th>Description</th>
<th>Average %</th>
</tr>
</thead>
<tbody>
<tr>
<td>The client’s NHS number is recorded.</td>
<td>100%</td>
</tr>
<tr>
<td>It is possible to follow the care of the client from beginning of episode</td>
<td>75%</td>
</tr>
<tr>
<td>to current day or discharge from the service within the record.</td>
<td></td>
</tr>
<tr>
<td>There is evidence to show that all medical investigations/reports files in</td>
<td>100%</td>
</tr>
<tr>
<td>the client's record have been authorised/signed/viewed by a clinician.</td>
<td></td>
</tr>
<tr>
<td>All health records have reports filed in appropriate sections in</td>
<td>100%</td>
</tr>
<tr>
<td>chronological order.</td>
<td></td>
</tr>
<tr>
<td>In this record, all health entries are recorded electronically or hand</td>
<td>100% (all electronic)</td>
</tr>
<tr>
<td>written using black ink.</td>
<td></td>
</tr>
<tr>
<td>All entries include the date</td>
<td>100%</td>
</tr>
<tr>
<td>All entries include the TIME (24 hour clock) of each intervention</td>
<td>100%</td>
</tr>
<tr>
<td>All entries can be clearly attributed to the individual making the entry</td>
<td>100%</td>
</tr>
<tr>
<td>(name and role).</td>
<td></td>
</tr>
<tr>
<td>Any abbreviations have been defined previously in the health record</td>
<td>100%</td>
</tr>
<tr>
<td>Health records entries are written in the first person where appropriate</td>
<td>77.5%</td>
</tr>
<tr>
<td>The record of the current interaction is linked with any previous records</td>
<td>100%</td>
</tr>
<tr>
<td>that exist for that service user or there is reference to where those</td>
<td></td>
</tr>
<tr>
<td>records exist.</td>
<td></td>
</tr>
</tbody>
</table>

Errors introduced into patient notes

Essex Child and Family Wellbeing Service

From April 2018 there were three requests for data entries to be removed from children’s electronic records, in each case because the data had been incorrectly entered onto the wrong child’s record. The authorisation of the Deputy Caldicott Guardian was sought and the notes were amended by the clinical systems team. The errors were logged and reported to the Virgin Care Caldicott Guardian.

Local initiatives to improve data quality

Centrally we have moved our TLE data into tableau to improve access for the whole business in reviewing their compliance in regards to training with the aim of increasing transparency. The customer service team have developed dashboards for reporting on a range of quality indicators enabling a snapshot to be seen and trends across the organisation. The training database takes its data from ITrent, which needs some improvements on how the information transfers from one system to another to improve our data quality and reporting. We are developing a new way to evaluate reopened complaints and learning from these. We are also looking at developing monthly updates for quality leads to learn from all feedback across the organisation.

Only projects linked with NHS Number/GMC Practice are required here and are not applicable to the Essex Child and Family Wellbeing Service.
Information Governance Toolkit Attainment Levels

Data Security & Protection Toolkit (DSPT)
The IG Toolkit was replaced by the Data Security and Protection Toolkit, which was submitted by Virgin Care Services Limited in March 2019.

VCSL completed all mandatory assertions under the 10 National Data Guardian’s standards plus some of the voluntary ones. Workshops have progressed with stakeholders across the organisation to gather evidence towards meeting the new requirements within the new DSPT for FY19/20. This includes moving from Cyber Essentials to Cyber Essentials Plus.

Current workplans within the service include the role out of our new “Good to Share” workshops aimed at improving understanding of safe sharing principles for direct care, safeguarding, regulators whilst ensuring privacy by design and default.

Development in IG which were reported which specifically related to ECFWS include:

- Records of data processing activities mapped across the service including Barnardo’s activities
- Privacy notices developed and a further iteration being produced with ECC and Barnardos
- Information sharing agreements updated
- Training target of 95% compliance met within FY18/19
- Information asset reviews completed
- Data Protection Impact assessments online introduced
- Subject Access training including phase 2 of detailed redaction training

It is noted that the ECFWS achieved 95% compliance with IG training in March 2019.

Community Hospital PLACE Reviews
Patient-led assessments of the care environment (PLACE) assessments put the views of people who use services at the centre of the assessment process and use information gleaned directly from assessors who have used Virgin Care services to report how well a hospital is performing in the areas assessed. These areas included privacy and dignity, cleanliness, food and general building maintenance. The reviews focus on the care environment and do not cover the clinical care provision or staff behaviours.

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Cleanliness</th>
<th>Food</th>
<th>Privacy, Dignity &amp; Wellbeing</th>
<th>Condition, Appearance and maintenance</th>
<th>Site average</th>
</tr>
</thead>
</table>

This section is not applicable to the Essex Child and Family Wellbeing Service
**Duty of Candour Statement**

Virgin Care is committed to being open and transparent with those who use our services and (taking into account confidentiality) their representatives. The organisation encourages its colleagues to be open and honest with all patients at all times.

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

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

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

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

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

**NHS Staff Survey**

Virgin Care runs its colleague survey ‘Have your say’ on a bi-annual basis with regular ‘pulse checks’ covering a random sample of colleagues. This year sixty two per cent of our colleagues across England took part and we saw significant improvements in feedback from colleagues based on tracking data from previous years. Examples of improvements made as a direct result of feedback received through the survey include:

- Having actively promoted our wellness hub throughout the organisation so that colleagues are aware of where to find materials to support their wellbeing.
- Due to some people saying that their appraisals could have been better structured we have been offering management conversation workshops to help improve annual appraisals.

**The Essex Child and Family Wellbeing Service Response to the Have Your Say Survey**

Colleague surveys are completed annually for Virgin Care around May each year. Within Barnardo’s their survey is conducted every other year and supported by People insight.
Both survey’s capture a variety of questions, and are collated under different headings. The ECFWS action plan pulls together those key themes from both sets of results to produce an action plan for the Essex Child and Family Wellbeing Service as a whole that is meaningful and based on the priorities of the people who completed the surveys. The action plan was circulated to all colleagues for comment before being ratified.

Themes of the surveys included:

- Pay, recognition and reward
- Engagement
- Culture and values (systems)
- Recruitment and retention
- Workloads and work-life balance
- Leadership and Managing Change
- Countering bullying, harassment and discrimination
- Wellbeing and attendance project

Several of the items listed have been addressed through developments listed elsewhere in this report and further plans are underway through a continuing cycle of improvements and innovations.

**Delivering high quality services**

- Centrally we have transformed our care certificate programme with the aim of bringing new health and care colleagues through their probation with an enhanced level of understanding of how they can contribute to the patient experience. We have focused on completing complaints within 30 days by enhancing support of the earlier part of the complaint process and encouraging colleagues to contact with the complainant early to try and reach a resolution. We have provided an independent team to help resolve any concerns and have helped more than 1,500 people get a better experience.
- Listening and learning from customer feedback will be included in our leadership and management development programmes. Managers will have access to a bespoke e-learning module for customer experience. We are going to develop a method of collecting people stories to listen and learn from feedback.
- Establishment of a People Shared Service Centre by merging central support people transactional teams’ functions and housing all teams together will lead to better process efficiency, reduced flows of data transfer and shared learning to achieve our goal of one trusted source of people data.
- Further to this we continue to embed Establishment Management principles across our business allowing increased rigour over our establishment and greater data output.
- Virgin Care’s teams and its services are recognised for their hard work and excellence throughout the year, both internally and externally. This is a summary of some of those awards.

Locally in Essex, to ensure that we are providing the highest quality services to the children, young people and family who use our service we are eager for feedback. See below examples of some very positive feedback we have received from service users.
Family voice – example of feedback about the ECFWS
A group is run in a local village school for pre–school children. A satisfied user of the ECFWS wrote in after her son attended a group, and had told colleagues that it had helped her cope with her anxiety. The mother wrote:

“While it’s great for my son on a social level and everything else the class brings in terms of ideas for sensory and developmental play it has also been really helpful to me.

The reassurance gained by meeting with people who are able to offer advice and support has been important to me. From breastfeeding to development, the group offers the opportunity for informal advice without any pressure or feelings of judgement. It isn’t always necessary to have professional help, but knowing you are seeing professionals every week, like we do, gives peace of mind that if I need help, I can obtain it easily and that in itself eases the anxiety. So thank you all for that help, long may it continue and help other mothers in my situation.”

Community – example of the ECFWS working with partners to support for the local community
Below is an article featured in the Colchester Gazette highlighting the amazing work and sense of community at Berechurch Family Hub.

Clean-up team happened upon old art project
A Community project has been launched to create an outdoor haven for everyone to enjoy. The Berechurch Child and Family Wellbeing Hub, in Colchester has just started the Garden Project. The building offers children’s services as part of the Essex Child and Family Wellbeing Service run by Virgin Care, alongside children's charity Barnardo’s. The Garden Project will include a sensory area, which will help children's development and encourage families to come together. It has been set up and will be maintained through voluntary donations such as flowers, plants and garden forks, with some local organisations and businesses kindly offering their services to help complete the project. Once it is finished, it will be open to all families and the wider community to enjoy.

Dave Harris (Lab), Colchester borough and Essex county councillor for the area, is part of the new service’s steering group. He said: "The staff there do a lot of work for families, they look after new mums and offer pre- and post-natal support for people up to 19 years old. They have a garden which is overgrown. We had a meeting with the manager and they had a designer come in for free and design a peaceful, enclosed garden we can use for the community. We are going to retain some of the original features and plant some trees, and include some sensory equipment. We think the work is going to take a few months; we can only work on Sundays as the building is used every day in the week. We have another day planned for early May and we will do some painting, put in some garden features and some lawn.”
While clearing the garden the team uncovered part of a 1996 art project. It included beams from the St Mary Magdalene Church and illustrated a physical path, which represented the metaphorical path to the children’s futures. Mr Harris said the feature would be retained as part of the new garden. Anyone in the community can donate plant bulbs or small trees to brighten up the garden.

**Above and beyond – example of a colleague going the extra mile to support a vulnerable person**

One of the administrators had worked for nine years within a district’s Health Visiting and School Nursing teams and since the integration of services is now the Administrator for one of the Healthy Family Teams based in a Family Hub. There she has face to face contact with ECFWS clients and her experience, knowledge and skills within the services has helped to support better outcomes for our children and families.

This administrator was recently able to identify a vulnerable pregnant lady who dropped in to the centre to enquire about groups. The colleague exercised professional curiosity, immediately reviewing the records and in discussion with the lady she signposted her to the duty health visitor who was immediately able to undertake a health needs assessment and book follow-up care. This mother is now being seen in line with the Maternal Early Childhood Sustained Home-visiting (MECSH) programme and without the administrator’s forward thinking and intervention she may have missed or had delayed access to the support she needed.

**Star of the Year awards**

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

**Feel the Difference Awards**

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

Colleagues and the public can nominate Virgin Care staff for an award online at any point throughout the year online, with monthly winners and a yearly award ceremony.
Essex Child and Family Wellbeing Service
There have been several successful nominations for Feel the Difference Awards over the past year in the ECFWS, including:

Jackie Gardener - nominated by Wendy Lea who wrote: Jackie works within the Epping hub team as a Healthy Family Support Worker. She has been working tirelessly for the NHS as a Nursery Nurse for many years prior to this role. Jackie is probably the most conscientious team member I have ever worked with. She has repeatedly demonstrated her ability to provide an outstanding service to our families in very challenging situations. Jackie is meticulous and innovative. If she sees a more effective way of working she will never hold back from trying it out and then discussing and sharing with the team. Due to resourcing restrictions Jackie has had to adjust ways of working to streamline services whilst offering an inclusive and personal service to all. I simply have not seen her sit still for the last year as she has worked relentlessly in achieving KPIs in our area. Jackie is known within the team to go that extra mile. I have just come out of a discussion with Wendy about a difficult service user and throughout she was able to place the child’s needs above all, in all areas of her work. This is an attribute we should be so proud of. She is compassionate and demonstrates professional empathy for all clients she comes into contact with. It is a pleasure to work with her and I would be delighted if her hard work was recognised with this award.

Natalie Groom – nominated by Rebecca Scott-Williams who wrote: Natalie joined the Braintree Central Team as a Health Visitor in April this year. Joining the team with others this year, they’ve really supported some positive changes within the Braintree Central team. Natalie has recently had some fantastic feedback from one of her service users detailing just some of the things she addressed in one visit. Feedback like this, acknowledging the work we do is integral to keeping the workforce motivated. Always striving for better, there’s no doubt that Natalie has done a fantastic job working with this family. ‘I would like to praise the wonderful support and care my young family and I have received from our amazing Health Visitor, Natalie Groom. She has gone out of her way to visit us frequently, supported me through my post-natal anxiety, provided a listening ear and she strives to solve any problems we have encountered along the way following the birth of our second son in April. She is caring, approachable, completely professional and always comes equipped with everything we could possibly need during her visit. She is absolutely one in a million and has made the transition into having two children so much easier for me. I am beyond thankful for her, and just wanted to express my thanks and appreciation.’

Sarah Bullen – nominated by Teresa Bell who wrote: Sarah is a valued member of the Looked after children, LAC team whose positive, can-do attitude is an infectious ray of sunshine within our service. Sarah is supportive to her team members whilst working diligently to make a difference and improve the service provided to our vulnerable young people. Sarah has engaged with various projects contributing towards the development of the LAC website and the LAC Health Passport. Since our team formed in October, Sarah has been enthusiastic to advance her knowledge and skills therefore enhancing service provision. Sarah was awarded an a grade and 15 credits following the completion of a university course on contraception and sexual health. Sarah’s ability to engage and work with complex and vulnerable clients has been recognized and praised by other services.
During a learning experience Sarah shadowed a Paediatrician completing an initial health assessment with an aggressive young person. Sarah’s ability and skill to help diffuse and manage the situation was recognized and highly praised. The LAC team are currently working to identify the health needs for the vulnerable leaving and after care young people who reside in local semi-independent accommodation. Through this, Sarah successfully set up a drop in session in liaison with the young people. This work was recognized by the young people who praised Sarah to the Clinical Commissioning Group, CCG LAC designate nurse during a recent visit to the premises. Sarah is a STAR whose hard work, dedication, passion and commitment makes a difference to others on every level and therefore deserves to be rewarded and celebrated.

**Sally Edwards – nominated by Kylie Holloway who wrote:** Sally has recently been featured in an NHS 90th birthday celebration article on Jam. She has been a nurse since the 1980’s for school nursing and qualifying as a health visitor in 1999. She has dedicated her time to ensuring that those families that she sees all feel the difference from her visits, and she will always go out of her way to ensure that those families are treated equally and to the best of her capabilities, often going above and beyond. She works in a difficult, challenging area and is always able to go about her day, doing her best for those on her caseload. Thank you Sally, you are an important part of our health visiting team, and thanks for all your hard work and effort throughout the recent and ever changing work that we do.

**Sally Edwards – nominated by Joanne Alexander who wrote:** I would like to nominate Sally Edwards for the long service / special recognition award to celebrate 70 years of the NHS. Having retired and returned, Sally currently works as a health visitor providing support and guidance to families in a deprived area of Basildon. Sally’s career spans many years from working in London as a student and general nurse, to moving into school nursing and health visiting. Sally has helped change the lives of many people. Sally has seen so many changes within the NHS during her career and has adapted to these changes and the challenges they bring, but has always ensured that the families she works with are at the heart of everything she does. Sally is also a qualified practice teacher and has supported and coached numerous health visiting students through their most challenging year. Often tenacious, always caring and certainly ensuring her clients always ‘feel the difference,’ I feel that Sally truly deserves this recognition.

More information about the awards is at [www.virgincare.co.uk/awards/](http://www.virgincare.co.uk/awards/)
External awards

Essex Child and Family Wellbeing Service

- Mona Singh, a Community Engagement Worker for Harlow, was nominated and selected to attend the Royal Garden Party for her contribution to Children’s Services.
- Anecke Van Staden (OT) and Gemma Murray (Physiotherapist) – nominated for an award by West Essex Commissioner for their role in assessing and supporting a family of a child with complex needs and in assisting CCG to plan /provide child’s care.
- Tracy Lanham, who works as a volunteer for ECFWS at the Sydney House Family Hub in Clacton, was crowned Volunteer of the Year for the South East at the Marsh Trust Awards. The Marsh Trust recognises people who go above and beyond to make a difference in the community. Kim Hamber, Barnardo’s UK volunteering and community engagement advisor said, “Tracy thoroughly deserves to have won this award and is a true star. We wouldn’t be able to do half as much as we do without her reliable, consistent support for our services.”

Training and Development by The Learning Enterprise

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

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

During the past year, The Learning Enterprise has:

- Developed robust capacity plans for all our business units and we have been working hard to plan training programmes and supporting our colleagues to plan to attend.
- New eLearning has been introduced into the organisation to increase compliance: Deprivation of liberty, mental capacity act training, data security awareness, food hygiene awareness to meet /exceed regulatory compliance.
- We strive to continually improve our clinical and care services and respond to feedback from those who use our services and our You Said We Did scores show consistent improvements being implemented as a result.
- Embedded a robust training needs analysis system in all the business units which has been reinforced through the appraisal and mid-year review process. This is enabling us to build our training and development programmes more precisely to meet the needs of the organisation to support us meeting the service quality, standards.

Over the coming year, The Learning Enterprise will:

- Safeguarding location into the MyLearning system to support colleagues to undertake and record all related CPD activities around the safeguarding agenda
The Essex Child and Family Wellbeing Service

Learning and development report

**Developments**

- Induction platform for new starters to Virgin Care – all new starters to be sent a link in their new area of work
- SCPHN Preceptorship Package developed – all newly qualified HV’s/SN’s will undertake a year’s preceptorship
- Leadership Hub – instant access to information, reading and tools to develop leadership capability
- NHS Graduate Management Trainee Scheme – Virgin Care has been approached by the NHS Leadership Academy to support Graduate Management Trainees

**Apprenticeships in Progress**

<table>
<thead>
<tr>
<th>Apprenticeship</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assistant Practitioner Foundation Degree</td>
<td>11</td>
</tr>
<tr>
<td>commenced in conjunction with Derby University</td>
<td></td>
</tr>
<tr>
<td>Team Leader Apprenticeship/Supervisor</td>
<td>6</td>
</tr>
<tr>
<td>from March 2019</td>
<td></td>
</tr>
<tr>
<td>Customer Service Practitioner</td>
<td>1</td>
</tr>
<tr>
<td>Business Administration</td>
<td>4</td>
</tr>
<tr>
<td>Operational Manager</td>
<td>4</td>
</tr>
<tr>
<td>TLE participation in SCPHN Trailblazer Apprenticeship. Ready for Sept 2020 subject to approval</td>
<td></td>
</tr>
</tbody>
</table>

We are currently in the process of recruiting 15 Health Visitors and 5 School Nurses.

**Training Completed/Underway/Planned**

<table>
<thead>
<tr>
<th>Training</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appraisal Workshops for managers</td>
<td>Brief Solution Focused Therapy</td>
</tr>
<tr>
<td>ACE’s Training</td>
<td>Smoking Cessation</td>
</tr>
<tr>
<td>5-8 HV Transformation Training</td>
<td>Consolidated Practice Module – dual train HV/SN</td>
</tr>
<tr>
<td>Karitaine Training</td>
<td>Consolidated Practice Module – dual train HV/SN</td>
</tr>
<tr>
<td>Youth First Aid Mental Health</td>
<td>Introduction of all registrants to the new NMC SSSA Guidelines</td>
</tr>
<tr>
<td>Non- Medical Prescribing Update</td>
<td>Mentorship Training</td>
</tr>
<tr>
<td>Epilepsy Train-the-Trainer</td>
<td>Variety of individual CPD courses supported</td>
</tr>
</tbody>
</table>

**Other Training Supported EFA**

<table>
<thead>
<tr>
<th>Course</th>
<th>ECFWS Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>School Nurse Annual Conference</td>
<td>3</td>
</tr>
<tr>
<td>Baby Friendly Annual Conference</td>
<td>2</td>
</tr>
<tr>
<td>Selective Mutism two day course</td>
<td>1</td>
</tr>
<tr>
<td>CSE Advanced Level training</td>
<td>1</td>
</tr>
<tr>
<td>British Association of Community Child Health Annual Conference</td>
<td>1</td>
</tr>
</tbody>
</table>
Evidence Based Assessment and Treatment approaches for people of all ages with developmental co-ordination disorder 1

Bobath training for paediatric therapies 1

Autistic Spectrum Disorder training for paediatric therapies 1

3Di training - Paediatricians 1

### Highlights of initiatives to improve the experience of using services

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

<table>
<thead>
<tr>
<th>You Said</th>
<th>We Did</th>
</tr>
</thead>
<tbody>
<tr>
<td>GP’s are saying they do not know who their Health Visitor (HV) or School Nurse (SN) is since ECFWS has moved out of the GP surgeries, or how to contact them.</td>
<td>A HV &amp; SN GP Link has been identified for all GP practices. This informs the GP of the team generic email, local HV &amp; SN names and their contact telephone numbers.</td>
</tr>
<tr>
<td>Parents using the Little Diggers Group running at Acorn Delivery Site wanted the group to start later as they struggled getting there from pre-school drop off.</td>
<td>We changed the start time to suit the families better.</td>
</tr>
<tr>
<td>The parents attending Family Drop-In Clinic in the Maldon Hub said that it was very busy with a long wait time, and that the timing was not always convenient if their baby was asleep.</td>
<td>After negotiation with Library Supervisors, we have set up a self-weigh station in the Library which went live at the beginning of May.</td>
</tr>
<tr>
<td>A group to reduce isolation and increasing confidence was organised following a parent request saying that she had noted on social media that some women were feeling isolated and she wanted to run a group co-hosted by our service.</td>
<td>This went ahead supported by our CDW and has been very successful and previously difficult to reach women attended.</td>
</tr>
<tr>
<td>We would like to be given some guidance about the length of wait when we come to the Speech and Language Therapy drop-in.</td>
<td>The drop-in register is divided in to time slots, based on the number of children presenting. Parents/carers are therefore given an indication of the length of wait and can go away and return nearer the time.</td>
</tr>
</tbody>
</table>
Clients who attended a baby beginnings group over a few weeks felt they wanted to move onto a group that was not as boisterous as a 2 year group but there was nothing at that time.

We provided a safe space and toys so the parents could set up their own group which is now running on a weekly basis and is very successful and the clients are happy.

We cannot attend physiotherapy and occupational therapy sessions at Herts & Essex Hospital due to issues with travel sickness for our child, related to brain injury, also due to the impact of the time that would need to be taken out of rehab rota.

We set up a fortnightly clinic at Saffron Walden Hospital for children in the Uttlesford area to make clinic appointments more accessible and to reduce travel time.

We are finding it difficult to order specialist toys and communication aids for our child using the Inclusive Communication Essex website.

We created an easy user guide to help parents know how to access the on-line catalogue and order helpful resources.

Clients attended a 6 week RRR domestic abuse course, the clients made friends during the course and wanted to continue their peer support sessions.

We provide a safe environment and they now meet in one of hubs weekly many weeks after their course has finished.

Schools have reported high numbers of low level anxiety of school age children in primary school and asked for some support with this.

Staff working with school age children have worked in collaboration with EWMHs to provide anxiety workshops for the children and parents to attend.

You told us you were trying to talk to us at the SPOC team (Single Point of Access) before 9.00 am, before starting work yourselves, but only getting through to voicemail.

We listened to your comments and have re-structured the start times in the team so we now cover the phones from 8:30 to 17:00.

We would like a better understanding of our child’s view about how independent they see themselves, performing every day activities in school.

The OT delivered a joint session with the specialist teacher shadowing, demonstrating how to undertake PEGS (Perceived Efficacy & Goal Setting System). The specialist teacher then shared their learning about the PEGS tool with colleagues during their meeting.

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

**The Booking**
- Will I get through?
- Will I have to explain everything twice?
- Will my needs be met?
- Will I be listened to?
- Have we removed barriers to help you?
- Will I know if I can't turn up to an appointment?
- We'll make you feel like we're here to help you and to listen to you
- We'll give options on how to book

**The Environment/setting**
- Can I park?
- Will I be able to use the toilet?
- Will I need to complete any forms?
- Will I hear my name called?
- Will I find my house?
- We'll make it easy to access the service
- We'll make it easy to identify us as a service

**The Welcome**
- You are informed
- You are in the right place
- We're working together as one team
- If we are running late we will let you know
- We'll check with you what you like to happen
- We will say hello with a smile, introduce ourselves and let you know what to expect

**The Consultation/your stay**
- You are a person and not a number
- We're committed to you
- You understand what the problem might be
- You feel prepared and better able to cope
- You are in good hands
- You would recommend the service
- We'll keep you safe
- We'll tell you the results when we promise we will
- We will give you contact details if you are worried
- We'll listen to your feedback and take onboard suggestions

**The Goodbye**
- Your needs are being met
- You are being listened to
- We've removed barriers to help you
- You let us know if there is anyone we need to involve and if you are worried and don't understand anything
- We'll check you have understood everything
- We'll explain what will happen next and any literature to help you remember
- We'll be open about the ongoing support available to you
- We'll give you a timescale when we can and can't be done
- You let us know if you're worried
- We'll give you a contact if you are worried
- We'll respect your home environment
- We will check with you what you like to happen
- We will say hello with a smile, introduce ourselves and let you know what to expect

**The Result/follow up**
- What do I have to do next?
- Will they do it?
- Will I have to explain everything twice?
- Will I need to come back again?
- What will it take to recover?
- Is it serious?
- Will there be too many people?
- Will I find you OK?
- Can I park?
- How long will it take to recover?
- How will they know I am here?
- Will I need to complete any forms?
- What if I need the loo?
- Will I have to explain everything twice?
- Will I get through?
- Will they do it?
- Will I hear back?
- What if I don't hear back - who can I talk to?
- What if it gets worse?
- What if I can't get an appointment?
- What if I can't get an appointment?
- What if I can't get an appointment?
- What if I can't get an appointment?
- What if I can't get an appointment?
- What if I can't get an appointment?
- What if I can't get an appointment?
**Feel the difference**
Aligned with our purpose, we are giving all of our colleagues in the organisation the opportunity to pledge how they will support people using services to feel the difference. The ‘Feel the Difference fund is a £100,000 centrally-held ring fenced fund dedicated to supporting projects which improve the experience of people who use services.

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

**Holiday Activities**
The ECFWS partnered with a holiday activity club in Chelmsford, Essex over the school holidays to provide activities for young people in the local community and gain skills in food preparation for simple and healthy recipes. The North Avenue Youth Centre opened its doors to school children of all ages, many of whom are in receipt of free school meals and are at risk of “holiday hunger” during the school holidays. The initiative was funded by the Feel the Difference fund which provided food for the children’s lunches whilst the youth centre organised, and staffed the sessions with support from colleagues from the Essex Child and Family Wellbeing Service. North Avenue Youth Centre ran four weekly sessions during the summer holidays which were attended by around 60 local children, and young people aged between 8-19 years old. The aims of the activity club included; helping children gain skills in preparing simple and healthy food recipes, as well as providing sports activities and games within the Youth Centre and in the local park. The holiday activity club proved to be a success with the young people that attended as it provided an opportunity to interact with each other. It also led to new friendships being formed, whilst allowing them to gain news skills such as tolerance and co-operation.

Kirsty Roberts, Community Engagement Worker for ECFWS said: “The holiday lunch club not only helped with those children who are at risk of holiday hunger but also helped children and young people in the local community feel less isolated during the school holiday. The Youth Centre team were able to engage meaningfully with over 60 children at these sessions, which gave us the ability to develop stronger links between local families and Essex.”

**Community Cookery Classes**
The ECFWS Mid Essex Quadrant partnered with the Community Café in St Peter’s Hospital, to distribute surplus food hampers to vulnerable families in Maldon. The Community Café located within St Peters Hospital contacted us as they had previously linked with Tesco and wanted to distribute surplus food. One of our fantastic Health Visitors identified eight vulnerable and socially isolated families in the Maldon District. Working together with the café, we created weekly fruit and vegetable hampers and hand delivered them to families in need across the district. The food tended to be items such as bread, potatoes, and vegetables that were at their ‘sell by’ date.

We created simple recipes to support families in using these ingredients and hoped they would be able to ‘batch’ cook them in order to reduce waste. However, we soon realised that families didn’t have the basic cooking skills and were accustomed to ready-made meals.
We applied for the ‘Feel the Difference’ funding and received a massive sum of £3,000. We found a local chef willing to take on the challenge, and we worked closely with him over the following weeks to pull together a series of four-week cookery courses for families, young carers and Looked After Children, LAC.

We soon had families and young people booking onto the courses, excited at the prospect of learning how to cook and to be able to take the food home with them afterwards. The courses were delivered by the Chef and supported by two members of staff, one Healthy Family Support Worker, HFSW and one Healthy Family Support Assistant, HFSA.

Each week, we had a different theme i.e. one week was beef, another was fish etc. On beef week, the families made a bolognaisce sauce, lasagne, chilli con carne and cottage pies and all for under £5 per family!

The courses were free to families and we also provided transport to families who needed it.

The plan is to continue this great initiative in supporting families in Essex. To do this, we will:

- Continue building on our relationships with partner agencies such as local food banks, supermarkets, Love Food Hate Waste and the Fare Share scheme
- Provide a basic understanding of food safety as part of the six-week training for all HFSW’s
- Ensure at least one HFSW and HFSA in each hub hold a basic Food Safety qualification
- Develop recipe cards, in partnership with the marketing team, for all families

In the South Quadrant, the project on ‘Why Try’ which is a brief intervention for accessing resources to support school age population benefitted from Feel The Difference funding.
Customer Experience Team
Since 2014-15, Virgin Care has operated a central Customer Experience Team working with people who use services across England and handling all queries, concerns and formal complaints on behalf of all services. This year, Virgin Care embedded the new complaints policy and process to enhance the experience of those who wish to complain and seek an early resolution.

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

Across the organisation, everyone with internet access is able to see reporting on the number of complaints, their current status, and the emerging themes. The team manage the collection and analysis of the Friends and Family Test and Patient Reported Experience Measures to ensure we are listening and learning from our customers. This year, Virgin Care improved its Tableau reporting of You Said We Did actions allowing colleagues to demonstrate how they relate to the stages of the customer journey (according to the BETTER Map) and where the feedback has come from.

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

The Customer Experience Team promotes and supports face-to-face meetings between complainants and operational managers and ensures that complaints are handled in line with the NHS constitution and best practice.

Improvements in 2019-20
During the coming year, Virgin Care will:
- Implement the revised Friends and Family test feedback question in line with guidance from NHSE.
- Look at embedding Customer Service into our Quality Strategy using the follow key themes: Experience, Efficiency and Effectiveness.

Essex Child and Family Wellbeing Service
During the 2018-19 financial year the ECFWS received 17 complaints relating to the ECC commissioned PB19 services and 20 complaints relating to the West Essex CCG-commissioned services.

Services are required to respond to complaints in a timely and sympathetic manner and the cause of the complaint is always taken seriously and investigated. The majority of complaints are resolved satisfactorily after the investigation when an explanation and apology is offered to the complainant and wherever possible matters are put right.
The ECFWS has undertaken a thorough review of all complaints, including looking for trends in the services to which they refer, the nature of the complaint, the ECFWS response, the outcome and an analysis of any learning. The 2018/19 review will be completed and circulated to colleagues in order to share learning from complaints as widely as possible.

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

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

Virgin Care’s teams can access information about their service using our in-house data reporting system powered by Tableau. This powerful reporting tool allows actionable insights for managers.

Virgin Care encourages staff to discuss their FFT and other feedback, accessible through Tableau, at team meetings and to make actionable change in response to the feedback provided by the people who use services.
Feedback response to main question

<table>
<thead>
<tr>
<th>Response</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extremely likely</td>
<td>8295</td>
</tr>
<tr>
<td>Likely</td>
<td>1498</td>
</tr>
<tr>
<td>Neither likely or unlikely</td>
<td>94</td>
</tr>
<tr>
<td>Unlikely</td>
<td>25</td>
</tr>
<tr>
<td>Extremely unlikely</td>
<td>37</td>
</tr>
<tr>
<td>Don’t know</td>
<td>38</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Prescribed information</th>
<th>Not Applicable to ECFWS (ECC and WECCG commissioned) services</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>12.</strong> (a) The value and banding of the summary hospital-level mortality indicator (&quot;SHMI&quot;) for the trust for the reporting period; and (b) The percentage of patient deaths with palliative care coded at either diagnosis or specialty level for the trust for the reporting period.</td>
<td>Not Applicable to ECFWS (ECC and WECCG commissioned) services</td>
</tr>
<tr>
<td><strong>13.</strong> The percentage of patients on Care Programme Approach who were followed up within 7 days after discharge from psychiatric in-patient care during the reporting period.</td>
<td>Not Applicable to ECFWS (ECC and WECCG commissioned) services</td>
</tr>
<tr>
<td><strong>14.</strong> The percentage of Category A telephone calls (Red 1 and Red 2 calls) resulting in an emergency response by the trust at the scene of the emergency within 8 minutes of receipt of that call during the reporting period.</td>
<td>Not Applicable to ECFWS (ECC and WECCG commissioned) services</td>
</tr>
<tr>
<td><strong>14.1</strong> The percentage of Category A telephone calls resulting in an ambulance response by the trust at the scene of the emergency within 19 minutes of receipt of that call during the reporting period.</td>
<td>Not Applicable to ECFWS (ECC and WECCG commissioned) services</td>
</tr>
<tr>
<td><strong>15.</strong> The percentage of patients with a pre-existing diagnosis of suspected ST elevation myocardial infarction who received an appropriate care bundle from the trust during the reporting period.</td>
<td>Not Applicable to ECFWS (ECC and WECCG commissioned) services</td>
</tr>
<tr>
<td></td>
<td>The percentage of patients with suspected stroke assessed face to face who received an appropriate care bundle from the trust during the reporting period.</td>
</tr>
<tr>
<td>---</td>
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</tr>
<tr>
<td>17.</td>
<td>The percentage of admissions to acute wards for which the Crisis Resolution Home Treatment Team acted as a gatekeeper during the reporting period.</td>
</tr>
</tbody>
</table>
| 18. | The trust’s patient reported outcome measures scores for—
   (i) groin hernia surgery,
   (ii) varicose vein surgery,
   (iii) hip replacement surgery, and
   (iv) knee replacement surgery, during the reporting period. | Not Applicable to ECFWS (ECC and WECCG commissioned) services |
| 19. | The percentage of patients aged—
   (i) 0 to 14; and
   (ii) 15 or over, readmitted to a hospital which forms part of the trust within 28 days of being discharged from a hospital which forms part of the trust during the reporting period. | Not Applicable to ECFWS (ECC and WECCG commissioned) services |
| 20. | The trust’s responsiveness to the personal needs of its patients during the reporting period. | Not Applicable to ECFWS (ECC and WECCG commissioned) services |
| 21. | The percentage of staff employed by, or under contract to, the trust during the reporting period who would recommend the trust as a provider of care to their family or friends. | Not Applicable to ECFWS (ECC and WECCG commissioned) services |
21.1 This indicator is not a statutory requirement. The trust’s score from a single question survey which asks patients whether they would recommend the NHS service they have received to friends and family who need similar treatment or care. Average over year for ECFWS is approximately 98%.

22. The trust’s "Patient experience of community mental health services" indicator score with regard to a patient’s experience of contact with a health or social care worker during the reporting period. Not Applicable to ECFWS (ECC and WECCG commissioned) services.

23. The percentage of patients who were admitted to hospital and who were risk assessed for venous thromboembolism during the reporting period. Not Applicable to ECFWS (ECC and WECCG commissioned) services.

24. The rate per 100,000 bed days of cases of C.difficile infection reported within the trust amongst patients aged 2 or over during the reporting period. Not Applicable to ECFWS (ECC and WECCG commissioned) services.

25. The number and, where available, rate of patient safety incidents reported within the trust during the reporting period, and the number and percentage of such patient safety incidents that resulted in severe harm or death. Of the 849 incidents reported during 2018/19 there were 66 patient safety incidents; none of these resulted in severe harm or death.’

Virgin Care works with its commissioners and other local providers to support the delivery of CQUINN targets.

In 2018/19 Virgin Care community hospitals in Essex reported: Not Applicable to ECFWS.
Patients readmitted to hospital within 28 days

During the past year, the following number of people who use services were re-admitted within 28 days of being discharged from a hospital operated by Virgin Care Services Limited.

Community Services Performance Report

Essex Child and Family Wellbeing Service KPIs

<table>
<thead>
<tr>
<th>Age</th>
<th>% Re-admitted within 28 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 to 15</td>
<td>Not applicable</td>
</tr>
<tr>
<td>16 or over</td>
<td>Not applicable</td>
</tr>
</tbody>
</table>

Over the course of 2018-19 there have been some significant challenges with staff shortages in some quadrants and teams, which have led to a fluctuation in meeting some performance targets. There has been the introduction of a staffing business continuity plan in two areas where a prioritisation protocol has been in place. This aims to ensure continuity of care for the most vulnerable families and a continuation of the more significant developmental checks, while those assessed as being at less risk have received, for example telephone rather than face-to-face contacts.

Early in the financial year it was reported that there had been a steady and sustained improvement in our performance in the affected areas. In West Essex the community children’s health team were hitting the waiting time targets and in most Healthy Family Teams there were solid improvements in the five main mandated checks. It was acknowledged at that time that there was still work to do, particularly in relation to universal antenatal checks and for integrated 2-3 year checks and in supporting families take up Free Early Education Entitlement for two-year olds (FEEE2) funding, however these have all improved during the course of the year. Performance data for FEEE2: there has been a real improvement for the final month of the FEEE2 reporting for Autumn term see below (Quarter three figures – latest available at time of writing).
NB the reason there are some above 100% is due to the SEND figures not being included in Local Authority reports to ECFWS but being counted by the service.

<table>
<thead>
<tr>
<th>Authority</th>
<th>Baseline</th>
<th>No Reached Dec</th>
<th>% Reach</th>
<th>Exceptions</th>
<th>Baseline with exception</th>
<th>% reach with exceptions</th>
<th>Target on children to reach Autumn term</th>
<th>Target % to reach to achieve 100% KPI</th>
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<td>4</td>
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<td>5</td>
<td>400</td>
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<td>76</td>
<td>19%</td>
</tr>
<tr>
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<td>1</td>
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<td>4%</td>
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<tr>
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<td>20</td>
<td>112</td>
<td>83%</td>
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<td>17%</td>
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<td>8</td>
<td>125</td>
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<tr>
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</tr>
<tr>
<td>Harlow</td>
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</tr>
<tr>
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<td>44%</td>
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<tr>
<td>Essex</td>
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<td>82%</td>
<td>364</td>
<td>3596</td>
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There has also been good progress with Reach Data over the last six months as detailed in the table below with the RAG status transforming from Red to Green.

<table>
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<tr>
<th>Mid Quadrant</th>
<th>Sep 18</th>
<th>Sep 18 %</th>
<th>Oct 18</th>
<th>Oct 18 %</th>
<th>Nov 18</th>
<th>Nov 18 %</th>
<th>Dec 18</th>
<th>Dec 18 %</th>
<th>Jan 19</th>
<th>Jan 19 %</th>
<th>Feb 19</th>
<th>Feb 19 %</th>
<th>Mar 19</th>
<th>Mar 19 %</th>
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<tbody>
<tr>
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<td>5204</td>
<td>56%</td>
<td>5818</td>
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<td>6638</td>
<td>66%</td>
<td>7019</td>
<td>70%</td>
</tr>
<tr>
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<td>44%</td>
<td>1466</td>
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<td>54%</td>
<td>1798</td>
<td>60%</td>
<td>1964</td>
<td>65%</td>
<td>1995</td>
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<tr>
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<tr>
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</tr>
</tbody>
</table>
In relation to outcome measures, early indications of performance for some of the outcomes were shared with commissioners prior to them officially going live in April 2019. One example of this:

**ECC Outcome Measure One, Children and Young People (CYP) Feel Safe:**

**Denominator:** CYP identified as not feeling safe
- 70% continue support and remain on an active caseload
- 28% of the active cumulative caseload completed support.
- 3% abandoned support – moved away, disengaged or chose not to continue support

**Numerator:** CYP who feel safe after support
- 70% feel *very* safe after support
- 25% feel *quite* safe after support
- 5% feel not very safe after support

**Overall:** 95% of CYP felt safe after support
Medicines Optimisation Statement

Within Virgin Care we have a Medicines Optimisation Strategy. This is a 5 year forward view to improve medicines optimisation across six principles. This year we have focused on improving data collection resulting in an improvement in data analysis, supporting principle 3 – safe use and handling of medicines.

A new Medicines Incident real time dashboard report has been developed on Tableau. Tableau is a data visualization tool that connects several data sources and allows for rapid insight. The dashboard allows a greater review depth into the data at all levels from service to corporate.

In 2017, we planned to migrate the annual Medicines Safety Audit from a web based model to an app. This was successfully implemented resulting in enhanced functionality and better data analysis and monitoring.

Essex Child and Family Wellbeing Service

In addition to the audits related to medicines and prescribing ambitions mentioned elsewhere in this document, the ECFWS is planning the following local initiatives:

- The ECFWS Lead Pharmacist and operational colleagues are working on the development of condition-specific templates which include a review of medicines prescribed for the condition. ADHD is the first to be rolled out and is currently being trialled.
- ECFWS is also looking at the utilisation of the existing SystmOne Medication Review facility to identify if it will satisfy the need to capture the medication review activity
Comments by co-ordinating Clinical Commissioning Group

Statement from Adrian Coggins, Head of Public Health and Wellbeing Commissioning, Essex County Council

As commissioners we are interested in the transformation and innovation described in this Quality Account. I think that ECFWS have done a good job of describing the set-up of both the partnership/lead contractor model, as well as the importance of new outcome measures and priority-group targeting which are key to being able to answer what difference we’re making to the children and families in Essex.

In relation to each of the three priorities in the Quality Account:

- The descriptions of the national politicians visits provides strong corroborating evidence for our field leading innovation to progress priority 1
- The description of the integrated systems and SOPs (Standard Operating Procedures) to embed the new model working practices and culture really adds strength to priority 2
- Priority 3 shows a lot of activity by ECFWS to look after staff

I believe this document describes how use of a broader workforce, for example volunteers is supported by appropriate governance and enhances many new developments in the service.

In addition, the introduction of a range of outcome measures as KPIs is key to recording the difference we are making to families more sensitively than numerical measures of practitioners’ activity alone.

We need agencies such as CQC and OFSTED to recognise that good service delivery depends on partnership/sub contracts which embrace the associated complexity of needs. As mentioned in the document, a key focus going forward for ECC will be realising whole systems benefit by joining up different agencies and commissioning responsibilities in a single contract with the aim of ensuring a better service user journey.

Statement from West Essex Clinical Commissioning Group

West Essex Clinical Commissioning Group is responsible for commissioning specialist community children’s healthcare including community paediatricians, community children’s nursing and therapies from Virgin Care for the children and families of west Essex.

West Essex CCG is collaborating with Essex County Council who commission all pre-birth to 19 child and family services from Virgin Care. The Virgin service that delivers care for WECCG and ECC is the Essex Child and Family Wellbeing Service (ECFWS).

The draft Quality Account 2018/19 provides a combination of data from Virgin Care nationally and the locally commissioned ECFWS service. The document records activities, progress, awards and sharing of regional practice within ECFWS during 2018/19.
ECFWS quality priorities for 2018/19 were articulated in last year’s Quality Account, they did not all contain details of how progress to achieve the priorities would be monitored and measured by the ECFWS or how progress to achieve the priorities would be reported. Both of these elements are a requirement of a Quality Account.

Consequently in this year’s Account it is challenging for the reader to identify how achievement of the priorities has been measured. Virgin has stated that all priorities have been achieved (with the acknowledged exception of the development of the continence service – it is stated that this priority will be carried forward into 2019/20, however it is currently not listed in the section detailing the coming years priorities).

Not all the priorities set out in the 2018 account have been reported on in the 2019 account for example; plans for joint training (for Virgin and Barnardo’s staff) for common skills and work with libraries.

The structure of the document does not lend itself to a streamlined read, we are confident this will be resolved in the final version of the quality account.

There are other required elements of a Quality Account which have, at this time, not been included; number of patient safety incidents in the reporting period, learning from deaths – there is a section with this heading, but the required information has not been included, the information included in the section relating to data accuracy is unclear and includes references to admitted patients care and accident and emergency care, which are not provided by this service.

We are confident that these elements will be clarified and that the required statement regarding information governance toolkit attainment will be added.

The identified priorities for 2019/20 require detail to be added to demonstrate how they will be monitored, measured and reported.

The account would benefit from a more detailed glossary.

Jane Kinniburgh  
Director of Nursing and Quality  
West Essex Clinical Commissioning Group.  
May 2019
Appendices
### APPENDIX ONE: Glossary of terms

<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical audit</td>
<td>Quality improvement tool, comparing current care with evidence-based practice to identify areas with potential to be improved.</td>
</tr>
<tr>
<td>Clinical Commissioning Group</td>
<td>Local organisations which seek and buy healthcare on behalf of local populations, led by GPs.</td>
</tr>
<tr>
<td>Commissioning for Quality and Innovation (CQUIN)</td>
<td>System to make a proportion of healthcare providers’ income conditional on demonstrating improvements in quality and innovation in specified areas of care.</td>
</tr>
<tr>
<td>Community Services</td>
<td>Health services provided in the community (not in an acute hospital)</td>
</tr>
<tr>
<td>Did Not Attend (DNA)</td>
<td>An appointment which is not attended without prior warning by people who use services</td>
</tr>
<tr>
<td>Healthcare</td>
<td>Care relating to physical or mental health.</td>
</tr>
<tr>
<td>Healthcare Quality Improvement Partnership</td>
<td>Also known as HQIP. Organisation responsible for enhancing the effectiveness of clinical audits, and engaging clinicians in reflective practice.</td>
</tr>
<tr>
<td>National Institute for Health and Clinical Excellence</td>
<td>Independent organisation responsible for providing national guidance on promoting good health and preventing and treating ill health.</td>
</tr>
<tr>
<td>Net Promoter Score</td>
<td>Also known as NPS. A customer loyalty metric often used for customer experience. Records a score for each respondent between 0 and 10, and returns an overall score in the range -100 to +100.</td>
</tr>
<tr>
<td><strong>NHS Outcomes Framework</strong></td>
<td>Document setting the outcomes and indicators used to hold providers of healthcare to account, providing financial planning and business rules to support the delivery of NHS priorities.</td>
</tr>
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<td>--------------------------</td>
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</tr>
<tr>
<td><strong>Patient-reported outcome measures (PROMS)</strong></td>
<td>Self-reporting by patients on outcomes following treatment and satisfaction with treatment received</td>
</tr>
<tr>
<td><strong>Here to help/PALS</strong></td>
<td>Informal complaint, concern and query service which gives advice and helps patients with problems relating to the access to healthcare services.</td>
</tr>
<tr>
<td><strong>You Said, We did</strong></td>
<td>Feedback system used for making changes to services directly in relation to feedback from patients.</td>
</tr>
<tr>
<td><strong>Tableau</strong></td>
<td>Tableau is an online platform where colleagues can access performance reports relating to contracts and corporate objectives.</td>
</tr>
</tbody>
</table>
APPENDIX TWO: Virgin Care Governance Structure and ECFWS meetings structure

Virgin Care Governance Structures

Clinical Directorate
- Quality
- Medicines
- Professional standards and regulation
- CQC and Ofsted
- Safeguarding
- Infection Prevention and Control
- Incident Management (CIIRS)
- Caldicott Guardian/Function
- Medical Revalidation
- Responsible Officer
- Information Governance
- Health and Safety

Legal Directorate
- Corporate Governance

ORGANISATIONAL ASSURANCE

Systems & Process

Training & Coaching

Expertise
VCSSL -> Essex Child and Wellbeing Service -> Barnardos

Executive Board (Monthly) <-> Service Delivery & Transformation Programme Board (Monthly)

Executive Ops Board (Monthly) <-> Business Management Team Meeting (Fortnightly)

The VC Clinical Governance Committee Meeting (Quarterly) <-> Care Quality and Safety Meeting (Monthly)

Child Safeguarding Committee Meeting (Quarterly) <-> Child Safeguarding Meeting (Monthly)

Barnardos SEA Region SMT - Twice (Monthly) -> 3hr TCON 1 week after CSMT Quarterly

Quality Effectiveness Meeting (Quarterly) <-> Health and Safety Meeting (Quarterly)

Safeguarding Leads Meeting (Quarterly FTF6 weekly TCON) -> 1 days 1 week in advance of CMST
## APPENDIX THREE: ECFWS Outcome Measures

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Outcome Measure Description</th>
<th>Cohort (Mandated Cohort *)</th>
<th>Assessment tool</th>
<th>Review date</th>
</tr>
</thead>
</table>
| Outcome 1 | CYP Feel Safe  
The CYP requires additional support in order to feel safe. For example: at home, risk taking behaviour, unhealthy relationships, internet, walking to school etc. | CYP who contact the service or attend SN drop in and/or referred by school | Holistic/meaningful conversation and/or Loneliness Questionnaire | 6 weeks (Park goal to extend the review date for a further 6 weeks) |
| Outcome 2 | Parents feel their CYP are safe  
The parent/carer requires additional support in order to feel their CYP are safe. For example: at home, risk taking behaviour, unhealthy relationships, walking to school etc. | Parents/Carers who contact the service and/or referred by school | Holistic/meaningful conversation | 6 weeks (Park goal to extend the review date for a further 6 weeks) |
| Outcome 3 | CYP who do not hit the threshold for CIN or CP bought to safeguarding supervision  
The CYP requires additional support in order to remove/mitigate risks to safety | All cases taken to safeguarding supervision | Safeguarding Supervision | 3 months (Park goal to extend the review date for a further 3 months) |
| Outcome 4 | Parenting Support  
The family with children under 5 years old require evidence based parenting support to improve parenting behaviour. For example: sleep, continence, breastfeeding, behaviour, managing complex needs, communication, mealtimes, school readiness etc. | Families who contact the service and/or referred in | Holistic/meaningful conversation | 3 months (Park goal to extend the review date for a further 3 months) |
| **Outcome 5** | Supporting children to be school ready and achieving the best transition into school  
The child requires additional support to help them achieve an age appropriate level of development in advance of starting school  
For example: communication, toileting, getting dressed, mealtimes, bedtime etc. | All children who receive 2.5yr review * | 27, 30 & 33 month ASQ & ASQ SE | 3 months (Park to extend the review date for a further 3 months) |
| **Outcome 6** | Supporting children to be school ready and achieving the best transition into school  
The FEEE2 child requires additional support to help them achieve an age appropriate level of development in advance of starting school  
For example: communication, toileting, getting dressed, mealtimes, bedtimes etc. | All FEEE2 children who receive 2.5 year integrated review * | 27, 30 & 33 month ASQ & ASQ SE | 3 months (Park goal to extend the review date for a further 3 months) |
| **Outcome 7** | All mothers have good emotional well-being in the perinatal period  
The mother requires additional support to improve emotional wellbeing | All pregnant women identified by the service at the antenatal contact * or who are referred to the service | EPDS >10 and/or Whooley/GAD2 >0 and/or Holistic & Meaningful conversation | 6 weeks (Park goal to extend the review date for a further 6 weeks) |
<table>
<thead>
<tr>
<th><strong>Outcome 8</strong></th>
<th>Primary care givers with children on a CP plan have good emotional well-being in the perinatal period. The primary care giver with children on a Child Protection Plan requires additional support to improve emotional wellbeing</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Outcome 9</strong></td>
<td>CYP make positive lifestyle choices. The CYP requires additional support to make more positive lifestyle choices. For example: gambling, internet use, gaming, smoking, alcohol, risk taking behaviour etc.</td>
</tr>
<tr>
<td><strong>Outcome 10</strong></td>
<td>Reception age children who are overweight or very overweight at Year R NCMP. The child is requires additional support to improve health and wellbeing and healthy weight measure by year 6</td>
</tr>
</tbody>
</table>

**Outcome 8**
- All primary care givers with a child/unborn on a CP plan who receive an antenatal, NBV and 6-8 review contact * or who are referred by the MV or who identified during the perinatal period.
- EPDS >10 and/or Whooley/GAD2 >0 and/or Holistic & Meaningful conversation.
- 6 weeks (Park goal to extend the review date for a further 6 weeks).

**Outcome 9**
- All CYP who contact the service or attend SN drop and/or referred by school.
- Holistic/meaningful conversation.
- 6 weeks (Park goal to extend the review date for a further 6 weeks).

**Outcome 10**
- All children seen at year R NCMP *.
- NCMP above 91st centile.
- Annual review during the summer holiday (Outcome remains active until after year 6 NCMP).
| Outcome 11 | Pregnant teenagers aged 13 – 19 years not making positive lifestyle choices. The pregnant teenager requires additional support to make more positive lifestyle choices. For example: gambling, internet use, gaming, smoking, alcohol, risk taking behaviour etc. | All pregnant teenagers living in most deprived quintile wards in Essex who receive antenatal contact. | EPDS and/or Whooley/GAD2 and/or Holistic, Next Stage of Life Questionnaire & Meaningful conversation. | 7 months (Park goal is not an option for this outcome) |
| Outcome 12 | MONITORING KPI No and % of schools that retain or achieve enhanced healthy school status. | Healthy Schools | Health Schools Manual | Ongoing |
| Outcome 13 | Young people aged 14 – 18 years are supported to be ready for the next stage of life in advance of turning 19. The young person requires additional support to help them become more ready for the next stage of life in advance of turning 19. | Young people aged 14 - 18 who attend SN drop in and/or referred by school. | Holistic/meaningful conversation and/or Next Stage of Life Questionnaire. | 3 months (Park goal to extend the review date for a further 3 months) |
| Outcome 14 | Young people identified as SEND aged 14 years are supported to be ready for the next stage of life in advance of turning 19. The young person who is SEND requires additional support to help them become more ready for the next stage of life in advance of turning 19. | Young people who are SEND aged 14 who attend SN drop in and/or referred by school. 14 - 18 when other risk factors are identified. | Holistic/meaningful conversation and/or Next Stage of Life Questionnaire. | 3 months (Park goal to extend the review date for a further 3 months) |
| **Outcome 15** | Young people who are LAC aged 14 – 18 are supported to be ready for the next stage of life in advance of turning 19. The young person requires additional support to help them become more ready for the next stage of life in advance of turning 19. |
| **Outcome 16** | CYP have good emotional well-being. The CYP requires support to improve their emotional well-being. |
| **Outcome 17** | CYP identified as young carers have good emotional well-being. The CYP identified as a young carer requires support to improve their emotional well-being. |
| **Outcome 18/20** | Primary carers with CYP pre-birth – 19 years are less lonely, isolated and more resilient. The primary carer requires support to help them become less lonely and/or isolated and more resilient. |
| **Outcome 19** (Outcome 19 and 23 should be linked) | CYP feel less lonely. The CYP requires support to help them feel less lonely. |

**Support Required:**
- Holistic/meaningful conversation
- Next Stage of Life Questionnaire

**Timeframes:**
- 3 months (Park goal to extend the review date for a further 3 months)
- 6 weeks (Park goal to extend the review date for a further 6 weeks)
- 6 months (Park goal is not an option for this outcome)
- 6 weeks (Park goal to extend the review date for a further 6 weeks)
<table>
<thead>
<tr>
<th><strong>Outcome</strong></th>
<th><strong>Primary care givers have a close and loving relationship with their baby</strong>&lt;br&gt;The primary care giver requires additional support at 14 days to improve a close and loving relationship with their baby at 6 months post intervention</th>
<th><strong>All primary care givers who receive a NBV contact</strong></th>
<th><strong>EPDS and/or Whooley/GAD2 and/or Karitane and Professional judgement, Holistic &amp; meaningful conversation</strong></th>
<th><strong>6 months</strong>&lt;br&gt;(Park goal is not an option for this outcome)</th>
</tr>
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<tbody>
<tr>
<td><strong>Outcome 22</strong></td>
<td>Children have strong attachment to at least one adult or other person in their life&lt;br&gt;The under 2 year old requires support to improve attachment with their primary care giver</td>
<td><strong>All primary carers with a child under 2 years identified by the service or who contact the service</strong></td>
<td><strong>EPDS and/or Whooley/GAD2 and/or Karitane and Professional judgement, Holistic &amp; meaningful conversation</strong></td>
<td><strong>6 weeks</strong>&lt;br&gt;(Park goal to extend the review date for a further 6 weeks)</td>
</tr>
<tr>
<td><strong>Outcome 23</strong>&lt;br&gt;(<strong>Outcome 1 and 23 must be linked</strong>)</td>
<td>CYP has an attachment to at least one adult or other person in their life&lt;br&gt;The CYP requires additional support to feel attached to a consistent and appropriate adult</td>
<td><strong>CYP who contact the service or attend SN drop in and/or referred by school</strong></td>
<td><strong>Holistic/meaningful conversation</strong></td>
<td><strong>6 weeks</strong>&lt;br&gt;(Park goal to extend the review date for a further 6 weeks)</td>
</tr>
<tr>
<td><strong>West Essex CCG Outcome 1</strong></td>
<td>Children and young people avoid hospital for their healthcare</td>
<td><strong>CCN Service only; Children known to CCN service via direct referral</strong></td>
<td><strong>Referral into the service and completion of any one of the relevant assessment tools (eg asthma exacerbation, bronchiolitis etc)</strong></td>
<td><strong>On discharge from the service the impact statement will auto activate to capture impact after support</strong></td>
</tr>
<tr>
<td>West Essex CCG Outcome 2</td>
<td>Children and young people feel confident and competent to manage their health condition at home</td>
<td>Children and young people completing a period/full course of support/intervention.</td>
<td>West Essex Outcome 2 Questionnaire</td>
<td>On discharge from the service the impact statement will auto activate to capture impact after support</td>
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</tr>
<tr>
<td>West Essex CCG Outcome 3</td>
<td>Parents and carers feel confident and competent to manage their child/young person's health condition in the community</td>
<td>Parents/carers/families completing a period/full course of support/intervention</td>
<td>West Essex Outcome 3 Questionnaire</td>
<td>On discharge from the service the impact statement will auto activate to capture impact after support</td>
</tr>
<tr>
<td>West Essex CCG Outcome 4</td>
<td>Multi-disciplinary assessments and planning reduce duplication, improve communication and family experience</td>
<td>ALL children using WE services; Focus on children/young people requiring an MDT assessment</td>
<td>West Essex Outcome 4 Questionnaire</td>
<td>On discharge from the service the impact statement will auto activate to capture impact after support</td>
</tr>
<tr>
<td>West Essex CCG</td>
<td>Outcome 5</td>
<td>Young people and their families experience a safe and high quality transition to adult services</td>
<td>ALL Excluding SLT Young people enter the period of transition at varying ages appropriate to their needs and the criteria of the receiving adult service.</td>
<td>Referral into the service and completion of any one of the relevant assessment tools related to outcome 5.</td>
</tr>
</tbody>
</table>