

Quality Account

2018-19



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Inspected and rated

Good



In this Quality Account we detail the progress we have made in the year to April 2019 in terms of the three Quality Domains of **Clinical Effectiveness**, **Patient Safety** and **Patient Experience**.

We also describe our priorities for improvement over the next 12 months and why we have chosen them.

A draft version of this Quality Account was shared with NHS Great Yarmouth and Waveney Clinical Commissioning Group, Healthwatch Norfolk and Healthwatch Suffolk for their review and comments.

The responses we received are printed at the back of the document.



Part 1 - Statement on Quality

We are proud to introduce our Quality Account for 2018-19 on behalf of the Board and Executive of East Coast Community Healthcare.

This document reflects the excellent work undertaken by our staff in providing and developing community health services across Norfolk and Waveney. It also reflects our aim as a social enterprise to deliver high quality, innovative and sustainable services for the benefit and well-being of our local communities.

During the year we have completed the first third of our cultural development programme which we call Evolve. The programme has challenged everyone throughout the organisation to consider their behaviours and reflect upon how well we are doing in adhering to our four key behaviours:

- **We Listen, We Learn, We Lead**
- **Work Together, Achieve Together**
- **My Accountability, My Responsibility**
- **Be Cost Conscious, Respect Our Resources**

For the second year of the Evolve programme we have concentrated upon building our 'strategy on a page' with each director leading a strategic theme, all of which dovetail together to form a collective drive.

Most importantly the strategy has come about following extensive consultation with staff who have worked together to capture our aims as a vibrant, community focussed social enterprise.

The four strategic themes:

- **Excelling** - innovative, resourceful, flexible and engaging, we want to build upon our reputation for high quality services aiming to be outstanding in the service of our communities
- **Growing** - working to ensure our business grows in a sustainable and responsible way. We will look to straddle the divide between commercial drive and social cohesion, encouraging social entrepreneurship and championing social value
- **People** - at the core of our work is the interface between our staff and the communities we serve. We will continue our aims to empower individuals, coaching and supporting all aspects of health and wellbeing
- **Partnering** - at ECCH we understand that collaboration and partnership is essential to succeeding as a health and wellbeing organisation. We will learn together with our stakeholders to achieve the common goals that will deliver success.

The strategy is also designed to provide the platform that enables ECCH to deliver the requirements of our new five year community services contract. We are absolutely delighted that, after a lengthy procurement process, we have been awarded the opportunity to take forward our vision for integrated community services across the Great Yarmouth and Waveney locality.

Everyone at ECCH, working alongside our partner organisations, pulled together to co-create a model that challenges us all to keep the best interests of our people and communities at its heart. Our collective determination will be the key to success and we are confident in our ability to make the coming year a great success.



Tony Osmanski
Chairman



Jonathan Williams
Chief Executive Officer





We listen, we learn, we lead - Work together, achieve together
 Be cost conscious and respect our resources - My accountability, my responsibility



Excelling

outstanding service delivery
 resourceful and innovative
 communicating and engaging
 strong reputation and engaging
 safe and responsive
 improving health

Growing

commercially / ethically / responsibly
 sound financial base / reserves
 creating and sustaining
 social value / entrepreneurs
 understanding risk
 anticipating the future

People

social focus / responsible
 engaged and happy
 empowered / self managing
 skilled and resourceful
 future focussed
 intentional culture
 resilient workforce



Partnering

sharing / learning / growing together
 understanding and empathising
 enabling community action
 connecting and networking
 managing risks together
 partner of choice



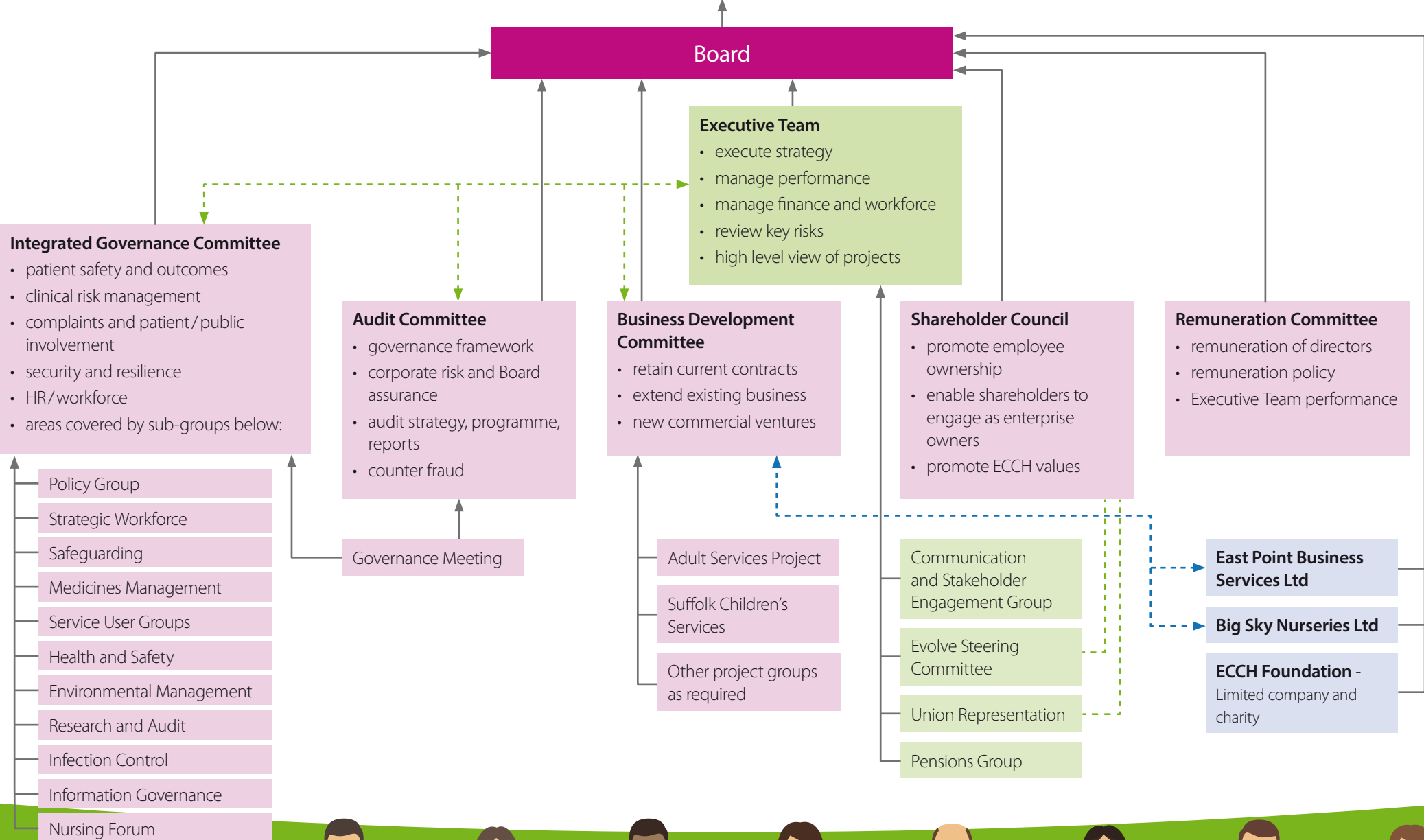
east coast
 community healthcare

Building Healthy Communities
Social Value through Employee Ownership

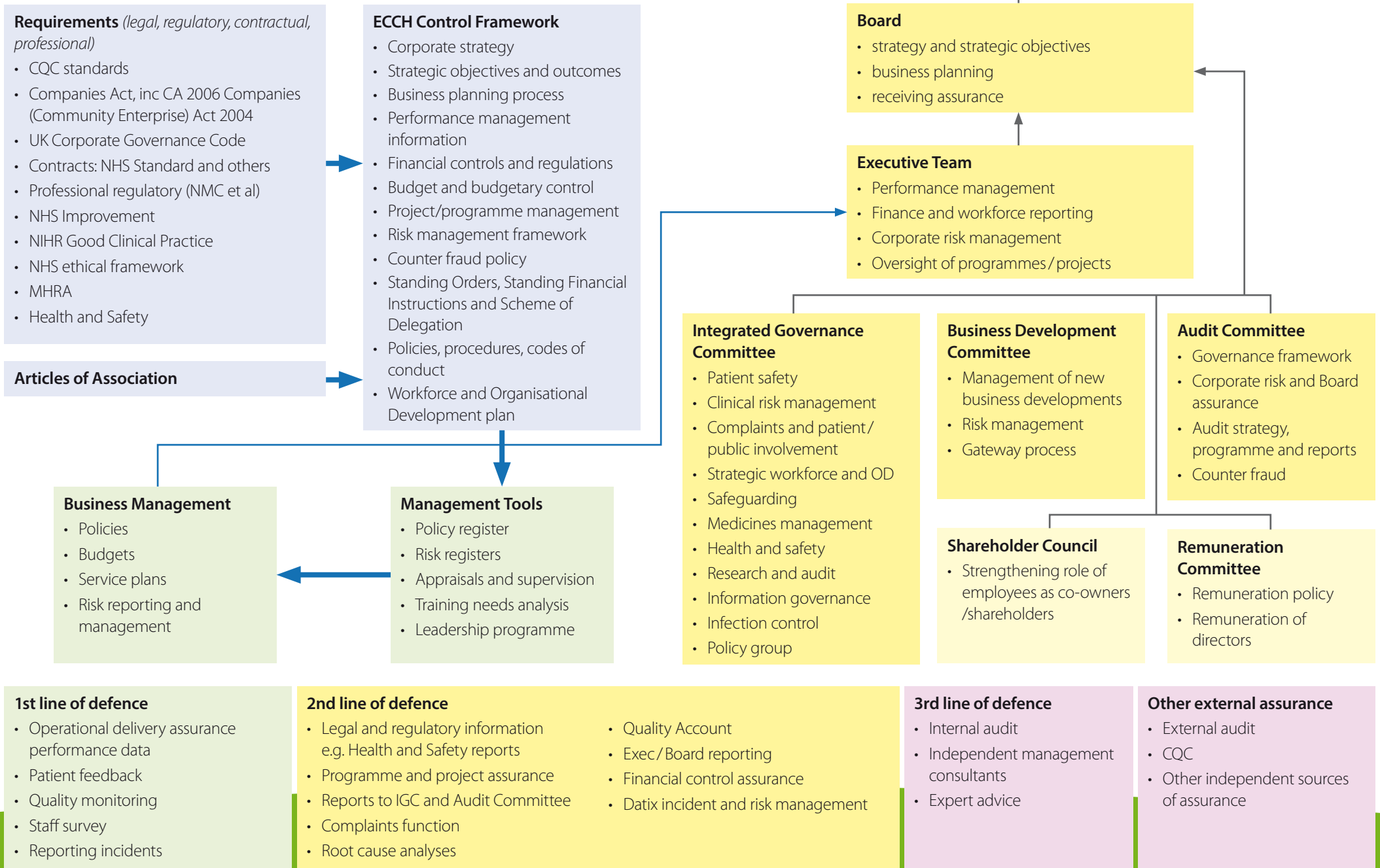
Our Governance Structure

All areas relating to quality are monitored by our Integrated Governance Committee and reported to our Board and our Commissioners.

Shareholders = Employee Owners



Our Assurance Framework



Part 2 - Priorities for Improvement 2019/20

East Coast Community Healthcare aspires to deliver first class services for our communities and strives for constant improvement. As a Community Interest Company, we have the flexibility to do things differently as we work with our Commissioners and other partners towards more integrated, joined-up care for our patients and clients.

In 2017/18 we offered 27 services for the NHS, public health and social care to communities in Norfolk and Suffolk (detailed in Appendix 1).

Our priorities for 2018-19 include a number of Commissioning for Quality and Innovation (CQUIN) schemes. The key aim of these is to continue to raise the quality of services and provide better outcomes for patients.

All areas relating to quality are monitored by our Integrated Governance Committee and reported to our Board and our Commissioners.

Clinical Effectiveness

Specialist Palliative Care services

The ambition of ECCH and its partners is to lead the transformation of Specialist Palliative Care in the community for the population of Great Yarmouth and Waveney. The service that has been procured is a medical consultant led service offering access to six specialist palliative care beds at Beccles Hospital and a 24/7 advice line for professionals, patients and their carers.

Day Services will also be provided at Beccles Hospital from June for a maximum of ten patients offering palliative rehabilitation, symptom control, emotional wellbeing appointments plus social integration.



Patients will have pre-planned activities booked and all will attend a symptom management class.

The medical team will in-reach into the James Paget University Hospital to give support and guidance to the hospital team in managing patients who have specialist palliative care needs, whilst ensuring robust discharge planning is undertaken to enable patients to receive care in a community setting wherever possible.

Improvements to diabetic foot care

Diabetes continues to be a key priority for our Podiatry Service and we are currently taking part in a pilot using 3D photography in the management of diabetic foot ulcers. The pilot commenced in February this year and benefits are already being seen with detailed information available for clinicians to assess and treat foot ulcers more accurately than ever before.

Patient Safety

Syringe pump management

In collaboration with St Elizabeth Hospice (SEH) we will introduce a system wide programme to educate all staff within the four Primary Care Networks about syringe pump prescribing and management. St Elizabeth Hospice will be working collaboratively with James Paget University Hospital regarding their annual training programme as well as with Coastal Health - Great Yarmouth and Waveney's General Practice Provider Organisation (GPPO) - to offer training to GPs and Practice and Community Nurses on syringe pump prescribing and management.

Enhanced Safeguarding Training

Following the recent publication of the intercollegiate document for safeguarding adults, we will introduce an enhanced programme for safeguarding training so that all ECCH staff will have a greater understanding of their responsibility and accountability relating to the updated safeguarding legislation.

Gosport Report

We will continue to implement and evaluate our action plan relating to the Gosport Independent Panel Report into the use of opioid analgesics at Gosport War Memorial Hospital. The report concluded that the lives of four hundred and fifty patients were shortened by clinically inappropriate use of opioid analgesics.



Points from the report were highlighted at ECCH's mortality review meetings and an action plan was developed relating to the lessons learnt. It will be closely monitored via our governance processes in order that we are compliant with the recommendations.

Patient Experience

Growing our volunteer base

ECCH has long understood the importance of working with charities and voluntary groups to harness their expertise in specialist areas such as when we worked with Access Community Trust to set up clinics for the homeless at Kirkley Mill Health Centre. We are currently working with Voluntary Norfolk to fund two Volunteer Coordinators to help us further our patient experience and encourage connected communities.

We are also looking to recruit End of Life Champions in each Primary Care Network locality to support patients to receive holistic care in the community.

Increased patient engagement

Within our four Primary Care Networks we will work in collaboration with our GP colleagues and Patient Participation Groups (PPG) to enhance the patient experience. We will link with the Great Yarmouth and Waveney PPG Forum so that they are aware of developments in our services as well as increasing our engagement activities with disease specific groups.

We will also roll out our 'Patients as Teachers' programme across the Primary Care Networks to enable patients to influence service evolution.



Part 3 - Review of Quality Performance

Review of Quality Improvement Plans

ECCH has reviewed all the data available on the quality of care in each of the NHS services it provided or sub-contracted over the period covered by this report when 77% of our income came from NHS Great Yarmouth and Waveney Clinical Commissioning Group (CCG).

The table below details the Priorities for Improvement we set ourselves for 2018/19, what we have achieved and what work remains ongoing.

AREA	UPDATE	RAG STATUS
Obesity management research	<p>With obesity a major and growing public health concern in the UK, ECCH has been carrying out research to understand the attitudes of our health care professionals towards obesity management. A task and finish group developed a questionnaire to establish the confidence and competence of health care professionals in addressing obesity management with people. There were 87 responses (35%) received from across Adult and Children's services. Thematic analysis of the data identified four common themes:</p> <ul style="list-style-type: none">• Organisational responsibility• Coaching/communication skills• Underpinning knowledge of weight management and nutrition• Knowledge of local services <p>Results from the survey have been shared within the organisation and an action plan developed to use these results to inform education and training needs of health care</p>	Ongoing



AREA	UPDATE	RAG STATUS
Extend competency training programme	The implementation of our competency training programme in the use and provision of community equipment is now established as core 'business as usual'. This ensures that clinicians from all services are able to assess, prescribe and use a catalogue of items to support and improve patient care in their home environment. ECCH has continued to build on links with partner organisations to support and improve the quality of patient discharge through appropriate equipment provision. The Medical Devices Management Group continues to meet bimonthly, attended by senior clinical staff and facilitated by the Equipment Team providing robust governance to all legislation pertaining to equipment used in the care of patients.	Ongoing
Diabetes Focus	Following on from our successful Diabetes Conference for health and care professionals in November 2017, we co-produced a patient conference on diabetes in partnership with the Norfolk and Suffolk Foundation Trust and Carers Matter Norfolk which took place in November 2018. The conference covered a wide variety of issues including improving management of medicines for diabetes and promotion of self-management through health coaching, with excellent support from other health and wellbeing partner organisations. Our Podiatry Service is currently taking part in a pilot using 3D photography in the management of diabetic foot ulcers.	Completed
Rehabilitation and reablement	Rehabilitation and reablement is central to the Intermediate Care model that we are delivering on Minsmere Ward at Beccles Hospital. We have gym space on the ward that enables patients to use the gym equipment and/or undertake group activities. We have updated the patient welcome pack so it is clear what we expect of rehabilitation patients and what they can expect from our staff. We have increased our stock of books/puzzles/games to give patients a wider choice of activities that support them to improve their memory, manual dexterity and social interaction. We set goals with patients that are meaningful and realistic and we have seen a reduction in their length of stay. In preparation for the six specialist palliative care beds we are providing in partnership with St Elizabeth Hospice, staff underwent additional training to broaden their skill set to include draining ascites and more complex pain control regimes. We are working closely with St Elizabeth Hospice to provide specialist day care which will include therapies, counselling and symptom control.	Ongoing
Clinical Incident Investigation Training	ECCH provides a full day session on Clinical Incident Investigation Training delivered by staff members from a variety of backgrounds such as Business Intelligence, Training, Quality, Human Resources and Nursing teams. The group has developed a fictional incident covering various specialties and this is now being further developed by the team members, who are producing a fictional patient medical record that can be used for the training. The training will not only cover the clinical investigation process but also the HR aspect of investigation and will focus on the importance of developing and implementing good systems. We are currently benchmarking what we do to involve patients and families in the incident investigation process, to assess whether further actions can be implemented to ensure a more patient centred process. The aim is to incorporate this into the training later this year.	Ongoing



AREA	UPDATE	RAG STATUS
<p>Patient Safety Culture</p>	<p>A Patient Safety Culture Audit was carried out in February 2018 to evidence our commitment to ensuring our patients are cared for safely. The main themes included assessing:</p> <ul style="list-style-type: none"> • how confident staff are at using the Datix reporting system to escalate concerns and report incidents in relation to patient care and safety. • staff understanding of the importance of accurate incident reporting. • staff understanding of the need for an open culture when reporting and receiving incident feedback to enable everyone to learn from mistakes. <p>Staff scores from this audit were between 70% and 80%. The Executive Director of Quality committed to frequent department walk rounds to ensure compliance. This schedule of visits has been completed, with reports compiled and disseminated for learning. This is an ongoing programme and continues to be monitored via our Quality Assurance meeting.</p>	<p>Ongoing</p>
<p>Support for Isolated Patients</p>	<p>Many of ECCH's services deliver care to patients who are socially isolated, lonely and not aware of the support available to them. ECCH continues to work to improve these patients' safety and wellbeing, having recognised that if we do not take action they may well present with further issues. ECCH has been working in collaboration with voluntary groups so that ECCH's staff are now better placed to signpost to services that can reduce the impact of isolation and promote socialisation. These groups include:</p> <ul style="list-style-type: none"> • Great Yarmouth Early Help Hub • Lowestoft Rising • Halesworth Volunteers • Red Cross • Healthwatch - Norfolk and Suffolk • Citizens Advice Bureau • OneLife Suffolk • Active Norfolk <p>The issue of loneliness has also been identified within the integrated care system and raised at STP working groups to facilitate shared visions.</p>	<p>Completed</p>



AREA	UPDATE	RAG STATUS
Equipment Safety	Last year we committed to developing a series of information leaflets to help improve patients' safety by providing support and advice to them whilst using equipment in the community. This included a leaflet which is now given to patients when a stick and/or crutch is issued which highlights the two year life of the item. This safety initiative was disseminated to all staff within ECCH through our governance structure, including at team meetings, Health and Safety committee and our Integrated Governance Committee.	Completed
Patients with Learning Disabilities	In early 2018 we established a working group to ensure we provide appropriate care to patients with learning disabilities. A review of our internal reporting systems was undertaken which established that this group of patients is not easily identified. Therefore, we committed to undertaking a baseline assessment of patients across all ECCH services. The results of this assessment were to inform the organisation of any gaps in care in order that appropriate action could be taken to address these. Due to staff changes, this programme of work has not been completed. However, it is now being taken forward.	Ongoing
Health Coaching	ECCH has continued to champion Health Coaching locally and nationally. We have trained more than 360 of our staff and nearly 100 from partner organisations. We were awarded the CAKE People Development Best Coaching and Mentoring Initiative award in November 2018. We are also presenting our coaching approach at two national nursing conferences in Oxford and Manchester in May and July 2019.	Ongoing
Patient Engagement	In 2018-19 we continued our programme of engaging with patients to inform service development across a range of disciplines. For example, we issued questionnaires relating to the new Phlebotomy service which ECCH began operating in April 2018. Following analysis of the responses, several changes have been made to the service which resulted in improved patient satisfaction.	Ongoing
Integrated Respiratory Service	In February 2018, we brought patients with respiratory long term conditions into the Community Matron's caseload to reduce hospital admission and attendance. This provides patients with access to clinical support and guidance and is proving successful. Patients are now benefitting from the health coaching approach which empowers and enables them to take control of their condition and live as full a life as possible.	Completed
Dementia Care	Understanding mental health issues, predominantly dementia, continues to be an area for development. During their initial assessment, staff can now evaluate the capacity of a patient with a diagnosis of dementia with the aid of simplified tools and improved access to the Mental Capacity Act assessment, supporting family and carers by working to understand the patient's likes, dislikes, wishes and feelings.	Ongoing



CQUIN (Commissioning for Quality and Innovation) Results

A proportion of East Coast Community Healthcare's income in 2017/18 was conditional on achieving quality improvement and innovation goals agreed with NHS Great Yarmouth and Waveney Clinical Commissioning Group (GYWCCG) through the CQUIN payment framework.

AREA	UPDATE	RAG STATUS
Prevent ill health by risky behaviours (alcohol and tobacco)	ECCH continues to ask patients who are admitted to either Beccles Hospital Inpatient Unit or community 'beds with care' if they smoke and what their regular alcohol intake is. Patients are then offered 'Very Brief Advice' which staff have been trained to give. They can offer support and onward referral to, for example, Stop Smoking services. ECCH met all the targets for this CQUIN this year.	Completed
Improve the assessment of wounds	In 2017/18 ECCH introduced a detailed online assessment tool to help staff assess all wounds that have not healed within four weeks to avoid the potential continuation of ineffective treatment. In 2018-19 84% of wounds which have not healed within four weeks have had a full wound assessment completed.	Completed
Introduce additional methods to ensure personalised care and support planning	During the year of this CQUIN ECCH has seen a cohort of patients receive a Patient Activation Measure (PAM) score which identifies the individual's own assessment of the support they have received from the organisation and subsequently their own ability to understand and contribute to the management of their own condition. This is then followed up by a series of interventions using a Health Coaching approach and, after a number of months, a further PAM score is taken. By the end of the year, 84% of the identified cohort had received a level of health coaching with 71% of patients showing an improved PAM score - an excellent achievement for our patients and acknowledgement of the benefits of using the health coaching approach as a standard every day tool in clinical practice.	Completed
Introduce staff health and wellbeing initiatives	This CQUIN required a percentage improvement in two of ECCH's annual staff survey questions, scored against the baseline survey results from 2016/7. The first question related to health and wellbeing and the level of support provided by ECCH to staff members. The second question looked at levels of work related stress. ECCH achieved a good result in both of these questions achieving a significant increase, in particular, in staff feeling supported by the organisation. Whilst stress levels showed a further improvement on the previous year, the increase was not quite enough to achieve the level required to meet the CQUIN target for 2018-19. In addition, we continue to promote healthy eating on our premises, ensuring that healthy options are always available including for those staff working night shifts. We began this process in 2016 and have continued to achieve the targets set by further reducing the fat, salt and sugar content in food available at our sites. Finally, we aimed to achieve a target of 75% in the uptake of flu vaccinations by frontline clinical staff. This year we achieved 84.1%, a further increase on the result achieved in 2017/18 and one of the highest in the country.	Completed
Care Home Training	ECCH has continued to deliver a comprehensive training package for local care homes covering a number of subjects including diabetes, falls and urinary tract infections. During 2018-19 training sessions were provided and offered to carers from local residential care homes. Since the inception of training in 2017, a total of 145 carers have attended these sessions with excellent feedback received.	Completed



Patient Safety

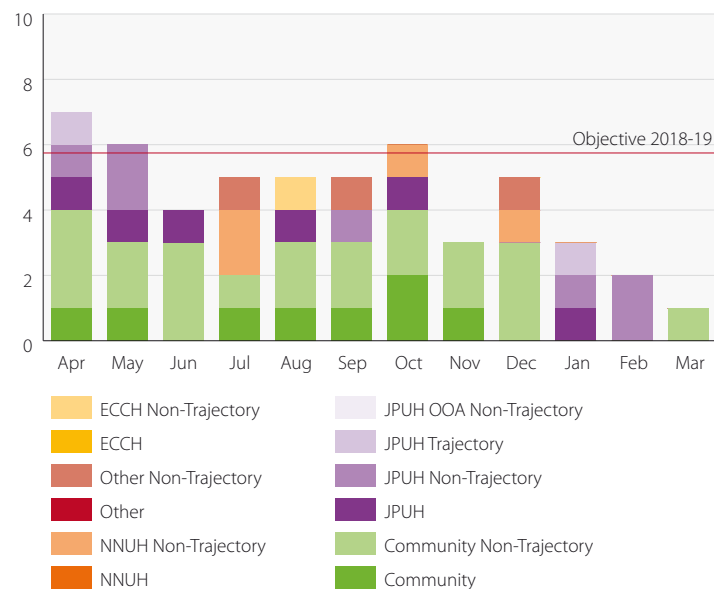
Infection control

In 2018-19 the healthcare system had a maximum permitted ceiling of 69 C.diff (Clostridium Difficile) cases. The actual number of cases was 52. Of the 52 cases, 35 demonstrated best practice and were adjudicated as non-trajectory. ECCH had one non-trajectory (out of area) case.

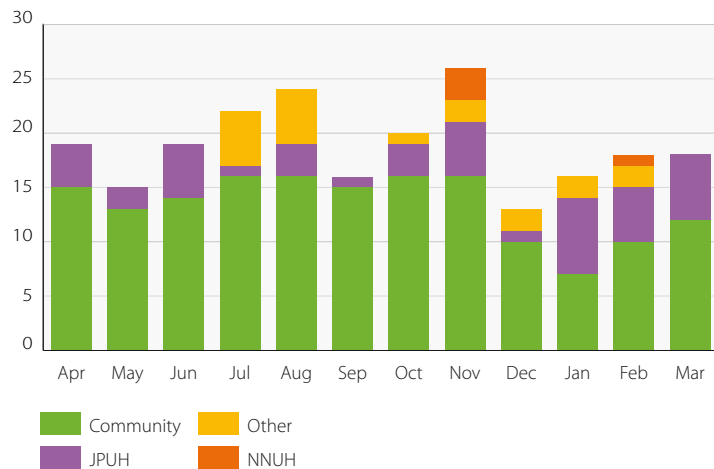
There were no ECCH cases of blood borne Methicillin-sensitive Staphylococcus Aureus (bMSSA) or E.coli bacteraemia. However, ECCH staff were involved in the care of some other cases. There were two cases of blood borne Methicillin-Resistant Staphylococcus (bMRSA). There was an isolated case of Norovirus in ECCH inpatients transferred from another hospital and one outbreak that was appropriately managed.

The ECCH Infection Prevention and Control Team (IPCT) has the administrative function for the C-diff Root Cause Analysis (RCA) meeting and completes all the non-acute RCA's. The team also completes RCA's for E.coli bacteraemia in the community and analysed the data in order to detect a pattern in this area for the high number of cases occurring.

Clostridium Difficile cases 2018-19



E.coli Bacteraemia cases 2018-19



ECCH's Assistant Director of Infection Prevention and Control, Teresa Lewis, writes the plan for GYWCCG and the IPCT have undertaken a considerable amount of work around urinary tract infections, as many cases of E.coli bacteraemia have a urinary source of infection.

In 2018 the IPCT were called upon to respond to a meningitis B outbreak in Suffolk, treating over 500 adults and children. This was carried out over two weeks with catch-up clinics. The initial response was immunisation and medication to eradicate nasopharyngeal carriage, with the immunisation requiring a second dose four weeks after the initial dose. This was a significant piece of work for the team and their prompt response was highly commended by Public Health England (PHE) and other associated agencies.

The IPCT also has the contract to attend to flu outbreaks in residential care homes across Great Yarmouth and Waveney, administering treatment as advised by PHE. During winter 2018-19 they were called to five nursing/care homes and, on the advice of PHE, issued antiviral treatment to all residents of three of these homes.



Seasonal influenza programme for ECCH staff

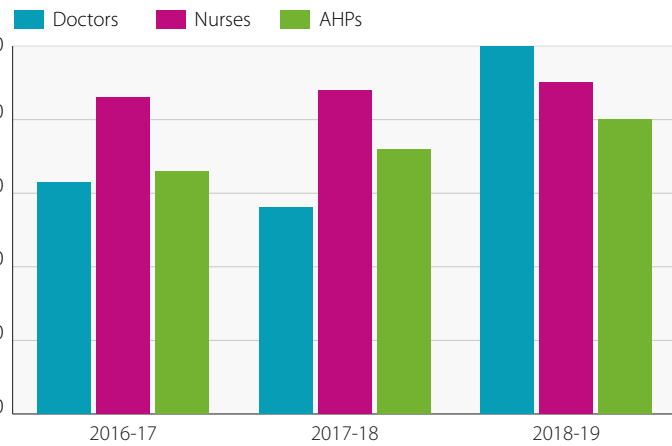
ECCH was the highest performing community health organisation in the country for staff flu vaccinations, and also the highest performing healthcare organisation in the eastern region for the third year running.

A total of 84.1% of front line ECCH staff were vaccinated during our annual in-house immunisation programme, protecting themselves, their patients and their families from the potentially deadly virus. All staff were offered the immunisation and our aim was to vaccinate at least 75%. The national average was 68.6%.

Last year we recorded 80.1% of staff receiving the vaccination.

Year	Uptake of front line clinical staff
2018-19	84.1% (National average 70.3 %)
2017-18	80.1%
2016-17	76.2%

ECCH seasonal influenza immunisation uptake 2018-19





Incidents and how we respond

As an open and learning organisation, we commend our staff for their reporting of incidents as this enables greater understanding and practice change to occur.

An incident means any accident, event or circumstance, including a near miss, resulting in no harm, minor to severe harm, loss or damage to personal belongings or property. Incidents can be raised concerning patients, staff, visitors, ECCH and other providers. ECCH encourages incident reporting at all levels.

The incidents that are reported range from poor discharge information, medication incidents, treatment issues, missed visits, abuse of staff and estates issues. The highest category of incidents raised is pressure ulcers of all grades, in and out of ECCH's care.

We utilise the Datix incident and risk management system to manage clinical incidents. The system incorporates a complete risk management and learning cycle through an investigative process, which is managed by team leaders within the services.

The team leaders ensure that action plans are instigated to facilitate learning based around the issues that are identified. The action plans and learning are shared with staff at team meetings and any trends are highlighted in order to review practice and implement improved systems.

The incidents reported can also relate to issues affecting patients that may have occurred outside of ECCH care. These incidents are raised with those providers in order to ensure learning across all organisations and an improvements in patient care.

The total number of incidents for the year was 3,111 which equates to an average of 259 per month.



Incidents by business unit

Adult	2719
Children Services	208
Corporate Services	149
Nursery Service	3
Primary Care and Prevention Services	32
Total	3111

Incidents by type

Incidents affecting Patients	2638
Incidents affecting the staff	279
Incidents affecting the Trust	145
Incidents affecting visitors, contractors or the public	49
Total	3111

Incidents involving other providers

ECCH is required to report all incidents including those resulting from the actions of other providers e.g. acute trusts, GPs, other healthcare organisations, care agencies, residential homes etc.

Incidents affecting Patients	1350
Incidents affecting the staff	54
Incidents affecting the Trust	31
Incidents affecting visitors, contractors or the public	18
Totals:	1453

ECCH makes every effort to make it as easy as possible for our staff to report any issues. This includes having a direct link to our Datix incident reporting system on all staff laptops and computers. All clinicians working in the community have mobile working equipment which enables them to access ECCH reporting systems wherever they are located as long as they have a mobile signal. This ensures incidents can be reported in a timely manner.

Serious Incidents

A Serious Incident Requiring Investigation (SIRI) is an incident where one or more patients, staff members, visitors or members of the public experience serious or permanent harm or alleged abuse, or where a service provision is threatened.

21 serious incidents were reported to commissioners in 2018/19.

Pressure Ulcers

In 2018-19 ECCH treated 1,208 patients for pressure ulcers category 1-4 (compared to 1,110 in 2017/18), 217 of which were category 3 and above. From that total, 630 developed after admission to ECCH, (434 in 2017/18) and 821 pressure ulcers were present on admission.

Of the 217 pressure ulcers category 3 or above, 95 developed after admission to ECCH and 122 were present on admission. Of the patients who developed category 3-4 pressure ulcers after admission to ECCH, 15 cases were reported as a serious incident and investigated fully.

Duty of Candour

The professional duty of candour means that every healthcare professional must be open and honest with patients when something goes wrong with their treatment or care, or has the potential to cause harm or distress and must apologise to the patient or, where appropriate, the patient's advocate, carer or family.

Within ECCH we follow the Duty of Candour national process and will notify all patients of any moderate harm or above caused to them by any ECCH staff. This is done verbally and in writing. To date, all such patients have been notified.

By following the Duty of Candour process, ECCH has identified issues such as avoidable pressure ulcers (bed sores) of grade 2 and above which caused moderate harm to the patient, falls which have led to injury such as a cut to the skin and medication errors such as a wrong dose of insulin.

As part of this process a senior clinician is allocated to undertake a thorough investigation of the event and the patient/patient's advocate or carer will receive a copy of the investigation.



Any duty of candour incidents are also documented in our monthly quality report to our commissioners and are discussed at our monthly meeting with them. This report also goes to our Integrated Governance Committee where these events are highlighted and discussed internally and lessons learnt are shared. This process helps us to improve the patient care we deliver.

2018/2019	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
On admission	69	63	57	65	73	61	58	91	75	71	73	65
After admission	32	50	61	57	62	49	56	53	53	59	49	49

	No of patient incidents reported	No of incidents that triggered Duty of Candour	Percentage	% of patients informed of their harm
April 18	196	2	1.02%	100%
May 18	228	2	0.87%	100%
June 18	219	1	0.45%	100%
July 18	250	2	0.80%	100%
Aug 18	224	4	1.78%	100%
Sept 18	208	6	2.88%	100%
Oct 18	206	3	1.45%	100%
Nov 18	244	2	0.81%	100%
Dec 18	205	2	0.97%	100%
Jan 19	220	1	0.45%	100%
Feb 19	205	1	0.48%	100%
Mar 19	233	9	3.86%	100%
Total	2,638	35		



Whistleblowing

ECCH has a robust Freedom to Speak Up policy to enable staff to report any concerns over quality of care, patient safety or bullying and harassment within the organisation. All employees of ECCH and other individuals performing functions in relation to the organisation such as agency workers, students, volunteers and stakeholders are encouraged to use this policy and procedure.

In the first instance, any concerns should be raised with their line manager who will arrange an investigation into the matter. We have a confidential helpline operated by the Clinical Quality Manager on weekdays during the hours of 9:00am to 5:00pm, with a secure voicemail facility for all times when they are not available. In the absence of the Clinical Quality Manager, the voicemail may be accessed only by the Deputy Director of Quality. We also have whistleblowing forms which can be filled out and submitted confidentially.





If staff believe their manager is involved in the wrongdoing or if, for any other reason, they do not wish to approach their line manager, they can use the helpline or speak to a Freedom to Speak Up Guardian.

Two of ECCH's Board members are trained Freedom to Speak Up Guardians. We also have three Freedom to Speak Up Champions who play an important role in supporting the work of the Guardians by increasing the availability and reach of the Freedom to Speak Up network across the organisation. Throughout the process the whistleblower's identity will remain confidential unless required by law.

Any matter raised under this procedure will be investigated thoroughly, promptly and confidentially, and the outcome of the investigation reported back to the person who raised the issue. If no action is to be taken, the reason for this will be explained. If, on conclusion of the process, the whistleblower reasonably believes that the appropriate action has not been taken, they are advised to report the matter to the proper authority.

Continued employment and opportunities for future promotion or training will not be prejudiced because a worker has raised a legitimate concern. Victimisation of a worker for raising a qualified disclosure is a disciplinary offence.

Mortality Review

A named Executive Director and Medical Director lead on identifying, reporting, investigating and learning from deaths. An organisation wide policy on how ECCH responds to, and learns from, the deaths of patients who die under its management and care was implemented in September 2017 and a summary of data and learning was presented in the Quality Account 2017/18.

ECCH's multi-disciplinary Mortality Surveillance Group is well established and reports to the Integrated Governance Committee via the Clinical Quality Report and annual reports. The Mortality Surveillance Group is chaired by the Executive Director of Quality or a designated Deputy. Membership includes ECCH's Medical Director.

ECCH's Safeguarding Children service commenced a structured process for reviewing the deaths of children/young people. The safeguarding office is informed of a child death by the Local Authority/Child Health. A record is kept, records are reviewed and, if any issues/concerns are identified, this is escalated to the Designated Safeguarding Children Team. ECCH's Safeguarding team attend the Suffolk Child Death Overview Panel where all deaths across the county are reviewed. If concerns are identified regarding a child's death this may be referred to the county Serious Case Review Panel.

Case record reviews:

- 36 case record reviews have taken place
- One has been investigated in the Serious Incident framework

Each death in ECCH care is subject to one of three levels of scrutiny:

- Death certification
- Structured case record review
- Investigation as per the Serious Incident Framework

Bereavement - how do ECCH capture feedback?

A condolence letter to bereaved families has been produced and reviewed by our quality forums and a patient reading group from Healthwatch. This feedback resulted in some changes being made and the letter was used in a pilot on Minsmere Ward at Beccles Hospital for three months, from October to December 2018. On evaluation it was agreed that the letter may not be the best way of collecting feedback and ECCH have decided to consult more widely and look at national advice and guidance. A task and finish group has been set up and a bereavement gap analysis will take place.

Deceased patients with open ECCH referrals at time of death

Community Inpatients

Of the 374 patients discharged from Beccles Hospital's inpatient unit between 02/03/2018 and 01/03/2019, 65 died whilst in the care of the community hospital and 24 died within 30 days of being discharged from the community hospital.

Beds with Care

During 2018/19 we provided 'beds with care' which means that patients were admitted from their homes into a care home where their care was overseen by our Out of Hospital Team instead of being admitted to an acute hospital bed.

Of the 152 inpatients discharged from a 'bed with care' (160 admissions) between 02/03/2018 and 01/03/2019, 7 died while receiving 'beds with care' support, and 14 died within 30 days of being discharged from a 'bed with care'.

Community Outpatients

There are 1,958 patients who died between 01/04/2018 and 31/03/2019 while having an open ECCH referral on SystemOne to an ECCH Community Outpatient service.





GY&W System

Primary Care Home Locality

GP Practice

GP Practice

Primary Care Home Locality

GY&W System

Clinical Effectiveness

New Contract Means Extra Services

ECCH secured a new contract in January 2019 to provide extra community services and specialist palliative care to adults across Great Yarmouth and Waveney.

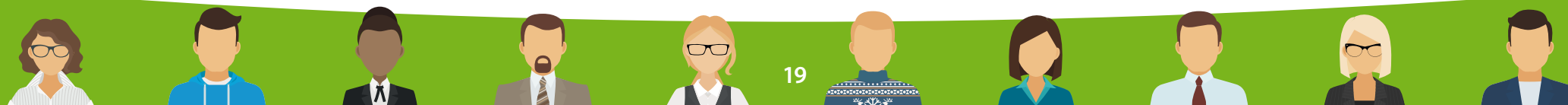
The £207m contract, awarded by NHS Great Yarmouth and Waveney Clinical Commissioning Group (CCG), will see a range of new community health services phased in from April 2019 to improve care for local people and prevent them from having to travel further afield or to an acute hospital for treatment. They include:

- a new specialist palliative care service, delivered in partnership with St Elizabeth Hospice. The consultant-led service gives patients access to consistent palliative and end of life care as well as a helpline, OneCall, which is available 24 hours a day, 7 days a week to offer advice and support for patients, families, carers and health professionals. Up to six new specialist palliative care beds are being provided at Beccles Hospital, with specialist palliative daycare introduced in June 2019.

- An improved diabetes service which provides a one-stop shop for assessment and checks to improve care for patients with diabetes.
- A new IV service at Beccles Hospital which will allow people to receive intravenous treatments, such as antibiotics, in the community rather than at an acute hospital
- Several specialist services will become more community focussed by basing them in the community, such as dietetics, stoma nurses and pulmonary and cardiac rehabilitation teams, including some heart failure nurses. This means that patients will be able to get more support to manage their own health and wellbeing within the community.
- Four Primary Care Networks based around GP practices in South Waveney, Gorleston, Lowestoft and Great Yarmouth and the northern villages will enable closer working between community teams, GP surgeries and other health and care providers so that patients and their families can receive joined-up, seamless services.
- Increased patient input into service provision through public engagement activities and ongoing dialogue with Patient Participation Groups.

2018-19 KPIs achieved by ECCH Health Visiting services compared with national average and East of England figures

Key Performance Indicator	Q1 Data 2018-19 April - June 2018			Q2 Data 2018-19 July - September 2018		
	England	EoE	ECCH	England	EoE	ECCH
% of births that receive a face to face New Born Visit within 14 days	88.3	91.1	93.3	89.6	91.6	95.3
% of infants that received a 6-8 week review by the time they were 8 weeks	85.5	92.6	96.4	85.4	91.9	96.5
% of children that received a 12 month review by 12 months	77.0	83.5	89.3	76.8	81.4	94.1
% of children that received a 12 month review by 15 months	81.9	88.1	98.7	82.4	88.4	98.5
% of children that received a 2-2.5 year review	76.5	81.7	94.1	78.2	84.4	97.7
% 2-2.5 year reviews completed using ASQ -3	89.2	92.5	91.4	89.8	91.5	98.0



Health Visiting

From April to September 2018 ECCH Health Visitors and Family Nurses once again significantly outperformed the rest of the region - and indeed the country - in all their targets (see tables). National and regional figures beyond September have not yet been released but ECCH has maintained its excellent results. In March the team attended the Journal of Health Visiting Awards having been chosen as finalists in the Team of the Year category.

Our Health Visiting Team operates as one team with School Nurses, with one point of contact for families across the whole locality.

This allows parents/carers to get a prompt response to their initial request for support. The Family Nurse Partnership team also works seamlessly with Health Visitors, ensuring the safe transfer to universal services as each child reaches the age

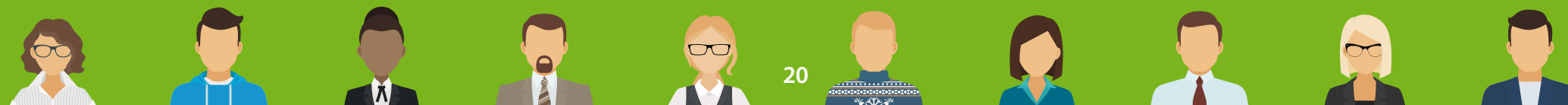
of two. Integrating these teams has increased efficiency and ensures resources are targeted to those in most need.

For instance, with 20.6% of Waveney Year 6 children classified as obese (the highest figure in East Anglia) Health Visitors set up Tiny Tummies in July 2018. This drop-in clinic informed parents/carers about healthy food options and portion sizes. It addressed concerns like fussy eating and feeding difficulties and has been well received by parents within the locality.

The Health Visiting Team also set up Tiny Tots in conjunction with Lowestoft Library to enable the families of premature babies to meet, share experiences and ask questions. They also ran popular baby weaning classes for new parents combining healthy eating advice with CPR training for parents, to assist them in the event that a baby should start to choke.

The Health Visiting Team have been delivering Pregnancy, Birth and Beyond classes for parents-to-be, to help them understand the impact of life choices on their unborn baby with a close focus on parent/child interaction and emotional development of their child.

Key Performance Indicator (national comparator data not yet available)	ECCH Q3 Data 18/19 Oct to Dec 2018	ECCH Q4 Data 18/19 Jan to March 19
% of births that receive a face to face NBV within 14 days	93.0	92.7
% of infants that received a 6-8 week review by the time they were 8 weeks	98.0	93.6
% of children that received a 12 month review by 12 months	94.0	92.1
% of children that received a 12 month review by 15 months	98.0	98.3
% of children that received a 2-2.5 year review	95.0	95.0
% 2 to 2.5 year reviews completed using ASQ -3	96.0	95.0



Smoking Cessation Service

ECCH provides the smoking cessation service Smokefree Norfolk which offers support to clients from as young as 12 to those in their 80's. Between 1st April 2018 and 31st March 2019, our team helped over 1,550 clients to stop smoking. Of those who attended and completed the Friends and Family Test over that period, 100% reported that they were satisfied with the service.

We run clinics in a variety of settings such as GP practices, libraries and community centres. For those people who would be unable to attend a clinic due to work or family commitments, our specialist advice and support can be delivered through telephone appointments. Our stop smoking advisors provide support over a 4 to 12 week period from the time the client sets a date to stop smoking. They offer a combination of behavioural support and medication. We also deliver stop smoking services to workplaces, offering group interventions during the working day with the support of employers.

Our senior advisors take a lead in specialist areas such as mental health, e-cigarettes and training development. These advisors also provide training for health professionals who want to support clients to stop smoking such as practice nurses and community pharmacists.

In 2018 we developed a new way of engaging with pregnant women who smoke. We identified that over 80% of pregnant women who smoke did not attend their first appointment to receive support to stop smoking and that this was mostly due to an unfounded fear of being judged by others and by service staff. To help overcome this concern, all first appointments are now conducted over the telephone. Once a relationship has been established with the advisor, either face to face or further phone support is offered. Working this way has produced an increase in both quit dates set and successful quits compared to 2017/18.



This year has seen much closer working with the all the midwifery teams in Norfolk with the development and provision of mandatory training packages and a Master Class training package, for upskilling midwives with the most current research. Smokefree Norfolk has also been involved with supporting the local mental health trust, Norfolk and Suffolk NHS Foundation Trust, to go Smokefree.

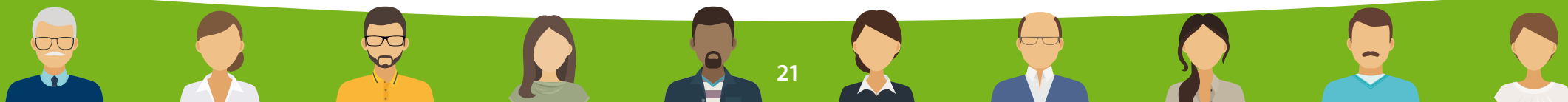
Our focus from April 2019 is to support the move towards a Smokefree NHS. This includes supporting ECCH to meet the obligations of the NHS Smokefree Pledge.

In 2018 we joined forces with Cambridge Community Services, the provider of the Healthy Child Programme in Norfolk, to help

develop a service to support young people (aged under 18) in East and West Norfolk. These advisors make contacts with services, schools and colleges to run support groups for those young smokers who want to quit. They also attend events and provide educational training packages for staff and young people. Forming and maintaining working relationships with those services has been challenging. However we have worked hard to build these links and quit groups are now being run.

Tel: 0800 0854 113

Website: smokefreenorfolk.nhs.uk



Tissue Viability

Following the success in 2017/18 of our pilot to introduce a new pathway for the treatment of skin tears in care homes, the pathway is being introduced in 90 care homes across Great Yarmouth and Waveney with the assistance of our community nursing colleagues. The Norfolk and Waveney Sustainability and Transformation Partnership (STP) has also expressed an interest in rolling it out across all residential homes in the STP footprint.

The Early Intervention Vehicle team is now trained in using the skin tear pathway and this has been the catalyst for the East of England Ambulance Service NHS Trust to review their management for skin tears.

The skin tear pathway gained national recognition in 2018 when NHS Improvement made a short film about our work which can be found on their website alongside details of the pathway: www.england.nhs.uk/atlas_case_study/preventing-and-managing-skin-tears-in-residential-homes

Education and the maintenance of care home residents' skin integrity remains the focus for the Tissue Viability Team, alongside safety when using pressure relieving equipment. The team works closely with ECCH's equipment team to complete pressure ulcer equipment audits in care homes. These have resulted in the retrieval of significant amounts of equipment from cupboards, attics and storerooms.

The implementation of the NHS Improvement document 'Pressure Ulcers: revised definition and measurement (June 2018)' has been completed. We have worked closely with ECCH's Quality Team on this and to update our education and training, changes for staff documentation, categorisation of pressure ulcers and reporting. This will continue for the next year to embed all the changes into practice.



Very positive feedback was received on the launch of the Wound Care Formulary, which enabled partnership working with ECCH nursing staff, practice nurses and nursing home registered staff.

As a result of the attention surrounding the new pathway, referrals to the Tissue Viability Team have increased significantly in the past year from Primary Care Networks, specialist nurses, community matrons, allied health professionals, practice nurses and nursing homes.

District Nursing

Two nurses have completed the Specialist Practitioner Qualification in District Nursing in 2018-19 and taken up positions as District Nurses. At the present time there are five nurses completing this qualification, two part time and three full time. Areas of innovation developed by nurses completing the course include:

- an after care leaflet to support patients to look after their legs after a leg ulcer has healed
- an information pack for carers in residential homes to prevent leg ulceration, which covers skin care, activity, dietary and smoking advice and support
- the redesign and delivery of verification of expected death training sessions
- exploration of specific needs of people with learning disabilities at end of life.

This year the District Nursing Service has implemented daily 'safety huddles'. This is a 15 minute focussed exchange of information on patient and team safety issues for the day. Nurses have reported an increased feeling of support since implementation.





Out of Hospital Teams

ECCH launched its third Out of Hospital team in April 2018 for the south Waveney area, building on the success of its two existing teams in Lowestoft and Great Yarmouth and the northern villages.

We worked with NHS Great Yarmouth and Waveney Clinical Commissioning Group (CCG) to develop the new service to support five GP surgeries and provide care to people in their own homes, where possible, avoiding admissions to an acute hospital.

In 2019 we introduced paramedics to the teams which already comprised community nurses, occupational therapists, physiotherapists, assistant practitioners, rehabilitation support workers and social workers. This meant we could deliver even more care to people at home.

During the winter months we were in a position to support some additional beds with care. This meant that some patients who did not need to be in an acute hospital or a community hospital could be admitted to a residential care home with the Out of Hospital Team managing their care plan.



Early Intervention Vehicle

Following a successful trial and the investment of more than half a million pounds a year by NHS Great Yarmouth and Waveney CCG, the Early Intervention Vehicle (EIV) service was expanded in July 2018 to operate between 7am and 7pm 365 days a year.

ECCH has worked with the East of England Ambulance Service NHS Trust (EEAST) to develop the service and now permanently employs three Occupational Therapists to work on the EIV vehicle with emergency medical technicians from EEAST.

We have also developed a bank of therapists, including occupational therapists and physiotherapists, from among ECCH staff and from partner organisations such as the James Paget University Hospital and Norfolk County Council.

The changes have enabled the EIV team to deliver early intervention rather than primarily dealing with falls, which was the initial focus during the pilot. This has led to an increase in crew to crew referrals within the ambulance service and builds on the understanding of the wider Allied Health Professional role. Joint training has occurred between EEAST and the therapists with further training planned to enhance the role and skills of the therapists on the vehicle.

The equipment store now sits within the Waveney ambulance depot, which means a more cost effective service delivery.

Less than a quarter of those visited by the EIV team have subsequently had to be taken to hospital. 100% of service users who completed the Friends and Family test said they were extremely satisfied with the EIV service.

Podiatry

The podiatry team has introduced an Insight 3D imaging system to enable more accurate record keeping and allow closer multidisciplinary working through the sharing of records.



We are currently working to establish a local multidisciplinary diabetes foot care team with podiatrists, endocrinologists from James Paget University Hospital (JPUH) and vascular surgeons from Norfolk and Norwich University Hospital to be held weekly at JPUH.

School Nurses

Our School Nursing team has been delivering NSPCC PANTS sessions in Lowestoft and Waveney schools. This programme is delivered to raise awareness of staying safe from sexual abuse, and speaking out.

Anxiety workshops have continued to be offered to support children and young people who have been identified by their school as struggling with anxiety on a daily basis. One to one appointments and drop-ins were offered within Primary and High schools as well as Lowestoft 6th Form. These sessions offered children and young people the time and space to talk confidentially about any concerns they may have.

Last summer the service worked with Sentinel Leisure and other agencies for a day offering sun safe sessions on Lowestoft beach for school children to raise awareness of the dangers of not wearing adequate sun screen and/or protective clothing.

National Child Measurement Programme

ECCH once again exceeded its targets for delivering the national programme to monitor children's weight.

Specially trained staff measured 98.5% of pupils in Reception and 96.9% in Year 6 from 36 state schools in the Waveney area. The target is 95%.

There were 1,236 Reception children eligible to be measured and 1,217 were actually measured. In Year 6 the number of eligible children was 1,189 with a total of 1,152 measured.

All families received 100% feedback of those children who were measured.



Children's Speech and Language Therapy

ECCH has been providing a Children's Speech and Language Therapy (SLT) Service across Norfolk and Waveney for 3 years. The service is jointly commissioned by Norfolk County Council and the Clinical Commissioning Groups for Norwich, North, South and West Norfolk. We also provide SLT for children in the Waveney area, funded by NHS Great Yarmouth and Waveney Clinical Commissioning Group. Over the year 2018/2019 the service saw a total of 6,272 children.

Throughout the year the service has been involved in several new initiatives which aim to support and develop provision for children with speech, language and communication needs (SLCN).

Making Communication Count

In April 2018 the team started the 'Making Communication Count' Project in partnership with Norfolk County Council's Early Years Team. This project provided focused training and support regarding the development of communication friendly environments in a group of Early Years settings in Yarmouth. This included:

- Developing an audit tool based on the Better Communication Research Project
- Completing communication audits in all identified settings
- Analysing audit data to enable the development of a bespoke one day training package



- Early Years training staff attending one of the training days
- Repeating the communication audit in each setting and providing feedback and support to maximise communication opportunities for the children attending.

This approach has since been rolled out in the Watton area, and a third Making Communication Count project is in the planning with a big part of the training focussing on settings carrying out their own audits and developing their ability to improve practice independently, using the knowledge and insight gained.

The project was positively received with shared good practice, trouble shooting, and staff electing to take up further additional training.

Complex Needs School Pilot

In January 2019 the service started a pilot project with complex needs schools in south Norfolk, providing a different approach to the provision of Speech and Language support. Observing a young person in their everyday environment and talking with key people is the most effective form of assessment. Therefore, this forms the basis of Speech and Language Therapy involvement, including assessment of the communication environment. Our speech and language therapists are enabling child centred best practice within the classroom context by looking at Means, Reasons and Opportunities they have for communication (Kelly, 2002). Should additional individual assessments need to take place outside the classroom, this is supported by school staff as they are an integral part of these assessments and it is important to ensure they are then able to follow any recommendations that result from them.

SENCO Survival Course

In February and March 2019 'Speak East', the ECCH speech and language therapy training team, hosted two 'SENCo Survival Days', one in Aylsham and one in Wymondham. Nearly 80 Special Educational Needs Co-ordinators from across Norfolk and Waveney attended across the two days. The days were developed as an opportunity to share information about the incidence, identification and importance of speech, language and communication needs (SLCN) for children in primary schools and to share ideas for how settings can support these children in their schools. It was also an opportunity to develop our working relationships with staff in education.

In the morning session we explored the impact of SLCN, to set the scene for how important it is that we identify and support these children. In the afternoon we welcomed guest speakers from various schools, who came to talk about interventions that they use in their schools and how this is supporting children with SLCN. They spoke with enthusiasm and passion, giving examples of how the children in their schools have benefited from their interventions.

The Norfolk SLCN stakeholder group

ECCH is part of the Norfolk SLCN stakeholder group which brings together system-wide stakeholders including SENCO networks, School Associations, CCG and LA commissioners, Education High Needs SEND Service, Virtual School SEND, Virtual School Sensory Support, families organisations (Family Voice Norfolk and SENSational Families), SENDIASS, Cambridgeshire Community Services NHS Trust and Public Health. This network aims to improve outcomes for children and young people across Norfolk, recognising that all services delivering support for SLCN must be aligned and underpinned by effective partnerships.

New MSK Triage Service

A new ECCH service for patients in Great Yarmouth and Waveney, which assesses and treats conditions affecting joints, bones and muscles, was launched in June 2018 and has reduced hospital waiting times and received praise from service users.

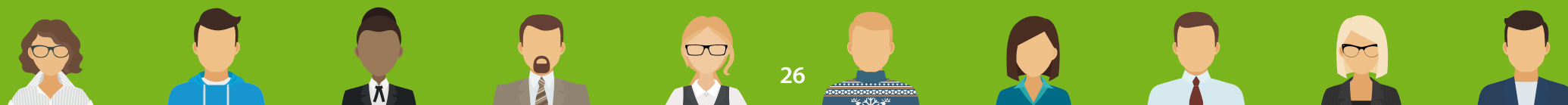
In the last five months of 2018 99% of people who took part in an NHS Friends and Family Test said they would recommend the Great Yarmouth and Waveney Musculoskeletal (MSK) Triage service which provides fast access to appropriate treatment for adults with an MSK condition requiring specialist management. The service was commissioned by NHS Great Yarmouth and Waveney Clinical Commissioning Group who worked closely with ECCH clinicians to design the service which is made up of specialist physiotherapists who have completed advanced practice training.

Patients are referred to the triage service by their GP and the specialist team then decides the appropriate care pathway for them, which may include self-management or a referral to community services such as ECCH's physiotherapists or to the James Paget University Hospital or Norfolk and Norwich University Hospital if a consultant-led intervention such as surgery may be necessary.

Figures indicate that less than half of the patients referred for triage to date have been referred on to secondary care, reducing the orthopaedic waiting times at the James Paget University Hospital to an average of four to six weeks.

Single Point of Triage

A new Single Point of Triage (SPoT) team has been formed to support the Out of Hospital and Community Nursing teams. They triage calls made to our East Coast Community Access call centre and identify the most suitable pathway for patients and referrers who call in requesting support.



The team is made up of staff from the former Out of Hospital triage team and from the Falls and Community Nursing teams.

The new system was set up to support clinical staff by gaining information which may be crucial when determining the importance of the call and to ensure that each patient is cared for by the most appropriate clinician.

New Phlebotomy Service

ECCH began providing phlebotomy drop-in clinics in April 2018. It was part of a new service commissioned by NHS Great Yarmouth and Waveney aimed at ensuring all patients in Great Yarmouth and Waveney can get their blood tested at their own GP practice.

The changes were introduced because the current contract for blood testing in Waveney, provided by the James Paget University Hospital, had come to an end.

ECCH now runs drop-in clinics at GP practices in Beccles, Halesworth, Kessingland, Bungay and Sole Bay near Southwold. The drop-in blood testing services at the James Paget University Hospital, Norfolk and Norwich University Hospital, Ipswich Hospital, West Suffolk Hospital are now for hospital blood testing only.

Clinical Research

In 2018/2019 ECCH's Research Team continued to work on building the teams' infrastructure and on increasing the study portfolio. The team supported studies run by the National Institute of Health Research and student studies from local educational institutes. The team employed two research practitioners, an occupational therapist and a registered nurse.

This has enabled us to look at expanding our research capacity across Primary and Community Care.

In April 2018, ECCH signed up to a Research Site Initiative (RSI) scheme with the Clinical Research Network. This model of funding, support and collaboration, allowed ECCH to apply and deliver research studies across GP surgeries and community services as a cluster.

In 2018/19 East Coast Community Healthcare recruited 79 patients into 9 research studies.

Our Research Forum continues to meet bi-monthly with representatives from all internal services with regular guests including local higher educational institutes, the clinical research network and study representatives.

Examples of studies include:

Community Services Studies

WORK PROMS – Adapting and testing work assessments for people with arthritis or musculoskeletal conditions.

Working people with rheumatoid or inflammatory arthritis, osteoarthritis, ankylosing spondylitis or fibromyalgia can find that they have difficulties doing their job because of their arthritis/ musculoskeletal condition. This study is testing a range of work assessments to identify what problems people may be having at work. Both ECCH's research team and physiotherapy department are working on this study which is sponsored by the University of Salford.

Autoimmunity in Myalgic Encephalomyelitis/Chronic Fatigue Syndrome

This study is sponsored by the University of East Anglia (UEA), and is being supported by our ECCH ME/CFS service. The aim is to determine whether there is the presence of an immune response directed against gut microbes in patients diagnosed with severe ME/CFS and whether this changes over time.

Developing content for a nicotine replacement therapy adherence intervention

This study is being sponsored by the University of Nottingham and UEA, and is supported by ECCH's Smokefree Norfolk service. The aim of this study is to derive content (messages) for an intervention to improve pregnant smokers' adherence to nicotine replacement therapy (NRT).

Primary Care Studies

Glucose Lowering through Weight Management Study

This study is looking to evaluate the clinical and cost effectiveness of a tailored diabetes education and behavioural weight management programme versus diabetes education, in adults with obesity and a recent diagnosis of type 2 diabetes. This study is being led by the University of Cambridge.

AF-GEN-UK Study - Long-term Registry of Patients with Atrial Fibrillation UK Extension study

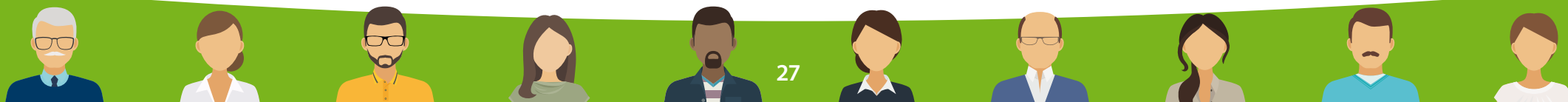
This study is designed to compare how patients with atrial fibrillation are managed by heart specialists (cardiologists) and other doctors (non-heart specialists), including General Practitioners. This study is being led by the University of Birmingham and the Institute of Cardiovascular Sciences.

Fluenz Tetra Safety Surveillance

This is a surveillance study following nasal seasonal flu vaccinations which records any side effects following the vaccine. This study was led by the Southampton Drug Safety Research Unit.

CLAHRC Fellowship research into pain and dementia

One of ECCH's Primary Care Network Locality Leads, Kate Spence, has been awarded a Collaboration for Leadership in Applied Health Research & Care (CLAHRC) Fellowship to enable her to research the issues around pain and dementia.



With estimates that up to 80% of care home residents may have a diagnosis of dementia, pain assessment and management in this population presents a specific challenge.

Kate will work with local care homes and ECCH's district nurses with the aim of identifying:

- the experience of carers in local residential care homes with pain assessment and management
- what district nurses see as important in pain assessment and management.

Kate began her year-long Fellowship in January and has day release each week to carry out CLAHRC activities.

Safeguarding Children and Adults Service

All ECCH staff have a responsibility to raise concerns regarding children, young people and adults who are experiencing or at risk of abuse or neglect, or who are deemed vulnerable. The ECCH safeguarding team provides support and guidance, training and supervision for all staff within ECCH.

Safeguarding, Domestic Abuse and Neglect Champion roles have been established within the organisation in the past year and are working well as a means of disseminating safeguarding learning to ECCH teams.

Following the success of the Primary Care Safeguarding Training event, which took place in May 2017, ECCH hosted another event in May 2018 which was attended by GPs and other primary care staff. The event was held to support staff in understanding their roles and responsibilities in safeguarding and included talks by guest speakers on subjects including child sexual abuse.

In the last year we have also provided safeguarding training to Norfolk District Council for their housing staff. This was well received.

The team continues to undertake audits in both adults' and children's safeguarding. This ensures that the organisation is complying with both national and local guidance and that the safeguarding team continues to meet staff expectations and safeguarding requirements.

The team works alongside many external agencies to promote best practice and build robust relationships. This has improved our understanding of good communication in cases of concern, as well as the importance of maintaining strong working relationships with Children's and Adult Social Care.

The team continues to work collaboratively with the Safeguarding Adult and Children Boards across both Suffolk and Norfolk to protect and safeguard our client group in both counties.

Looked After Children

The Looked After Children (LAC) Team is made up of three nurses, an administrator and an administration assistant who work to ensure the statutory Health Assessments are completed within timescales and meet the health needs for the child/young person.

Last year we joined with the other LAC teams across both Norfolk and Suffolk to hold quarterly meetings in order to offer a consistent approach, and develop best practice and learning. These meetings continue to prove popular, with the venues and the team leading each meeting being rotated.

The LAC team endeavours to empower children and young people with their health needs and to support them to ensure their voice is heard. We request feedback from carers, the child or young person. Their comments enable the team to adapt to meet their needs.

Here is a selection of the feedback we have received from carers:

"The nurse was lovely. So patient and friendly with the children, they seemed totally at ease"

"The nurse is understanding of the child's needs and ability and the child was happy to take part in the assessment when necessary. She was very thorough"

The young people have also commented:

"Makes it easier having the same LAC nurse every year"

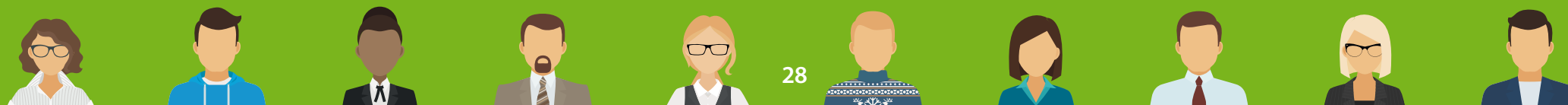
"She listened to what I had to say. We talked alone whilst the carer went in the other room. I felt comfortable telling her about things."

Estates and Facilities

ECCH retains status for environmental management

ECCH is one of only a handful of healthcare providers in the country to have been recognised by the British Standards Institute for reducing its environmental impact.

ECCH was granted ISO14001:2015 status in 2017 and, following a rigorous inspection by BSI auditors in 2018, retained the required standard, confirming our commitment to cutting the organisation's carbon footprint and energy consumption and to recycling waste as part of an environmental management system.





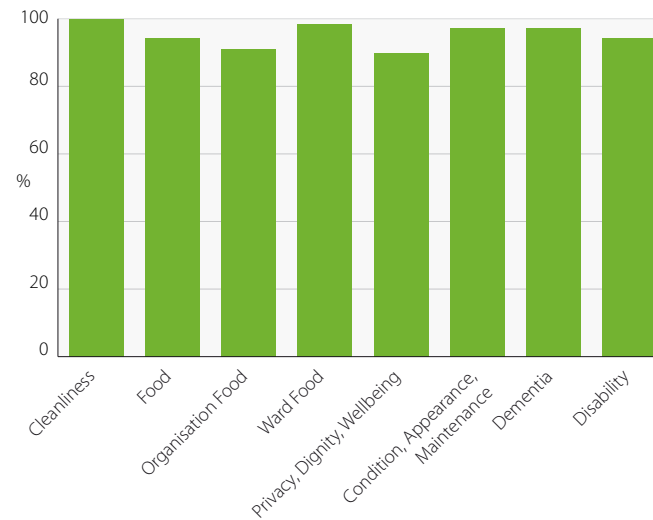
PLACE Audit

Patient Led Assessment of Care Environment (PLACE) audits were carried out at Beccles Hospital in August 2018. They included inspections of the fabric and décor of the building, privacy and dignity, and disabled access. Beccles Hospital scored highly in all areas with 100% for cleanliness, 98.5% for ward food and 97% for dementia friendly facilities.

Some of the changes implemented this year include:

- Providing individual plated portion-controlled lunches for Minsmere Ward rather than the previous system where portions were decided by the individual serving. All meals are now calorie controlled making it easier for patients and staff when monitoring food intake. The PLACE team were able to try a variety of these meals and responded enthusiastically.
- Supplying meals that meet the International Dysphagia Diet Standardisation (IDDSI). This is the standard for modified textured foods and thickened liquids required by patients with dysphagia.

Beccles Hospital PLACE Audit



New Bases for Staff

ECCH established a new office at Rosebery Court in Norwich and, in doing so, was able to successfully relocate Children's Speech and Language Therapy staff from three sites into one building, enabling them to work together more easily. There was considerable planning involved in ensuring that the new site would be fully compliant to meet the needs of all staff. Once the teams had moved, two of the vacated sites were reconditioned before being handed back to the landlords.

The Estates and Facilities team also made major alterations to the former Minor Injuries Unit at the Beccles Hospital site. This enabled the new south Waveney Out Of Hospital Team to move into this area.

Some of the environmentally friendly initiatives that have been implemented include additional thermal insulation, dual flush toilets, LED sensor lighting and streamlined recycling processes in our headquarters Hamilton House, plus virtual training and video conferencing facilities to save attendees travelling to the building.

ECCH now purchases printer paper from sustainable sources, recycles ink and toner cartridges, and sources the most fuel efficient work vehicles. Procurement occurs locally, wherever possible, to support the local economy and ECCH is incentivising staff to use greener transport including offering subsidised cycle purchase schemes.

With ISO14001 in mind, the costs of household waste were investigated in 2018. This resulted in a change of contractor and significant savings across multiple sites.



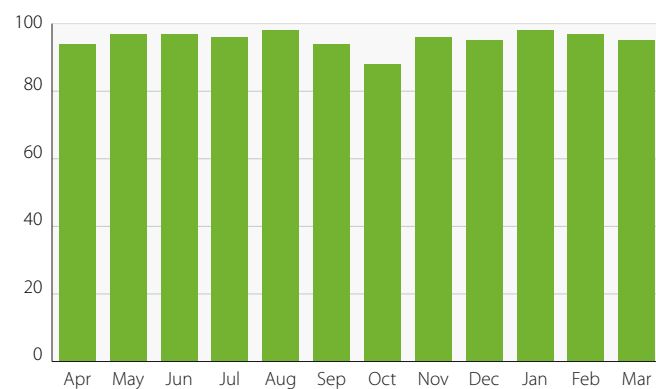
Patient and Service User Experience

Friends and Family Test

The Friends and Family Test (FFT) is a national mandatory initiative by NHS England asking patients if they would recommend a NHS service to their friends and family. We have consistently gained an excellent score across the organisation with results showing 95% of patients would recommend East Coast Community Healthcare (ECCH) to their friends and family.

Crucially, when we receive negative feedback we look into the issues raised to identify any failures or shortcomings and we address these. If patients choose to provide their contact details, we telephone or write to them to discuss their concerns and to provide our response. If a clinician is named on the form by a patient and receives positive comments, we log this as a compliment and send a copy to the clinician for their re-accreditation or revalidation of professional registration.

Proportion of Patients that would Recommend ECCH Services to Family and Friends



Friends and Family Test 2018-19 - feedback for all ECCH services

How likely are you to recommend our services to your friends and family if they needed similar care or treatment?

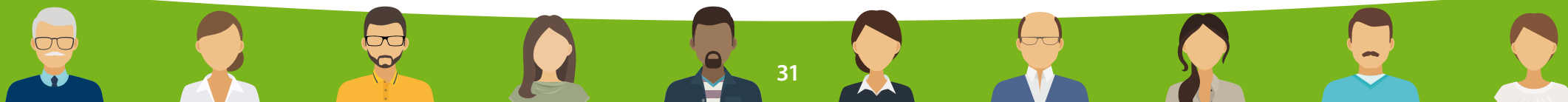
Date	Extremely likely (%)	Likely (%)	Neutral (%)	Unlikely (%)	Not at all likely (%)	Don't know (%)	Total	% Positive
Apr 18	267	40	1	2	3		313	98
May 18	294	48	6	4	2	2	356	97
Jun 18	197	30	5	3	4		239	95
Jul 18	91	20	5	1	1		118	94
Aug 18	326	54	8	5		3	396	97
Sep 18	278	38	1	5	3	2	327	97
Oct 18	281	53	7	1	5	2	349	96
Nov 18	224	49	2	3	1		279	98
Dec 18	184	29	8	1	5	1	228	94
Jan 19	193	34	4	7	21		259	88
Feb 19	226	34	7	1	2		270	96
Mar 19	174	29	7	3			213	95
Overall average								95%



Friends and Family Test 2018-19 - percentage positive

2017/2018	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
Beccles Hospital	100%	100%	100%	100%	100%	100%	100%	100%	86%	100%	100%	100%
Beccles OPD	N/R	N/R	100%	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	100%
Children and Families	100%	100%	100%	94%	100%	100%	95%	100%	100%	100%	100%	92%
Community Matrons	100%	100%	N/R	100%	100%	N/R	100%	100%	100%	75%	100%	100%
Continence	100%	100%	50%	N/R	100%	95%	100%	100%	100%	100%	100%	N/R
District Nursing	95%	100%	100%	100%	97%	100%	100%	100%	100%	100%	100%	100%
Early Intervention Vehicle								100%	100%	100%	100%	100%
ECCH General	100%	89%	92%	100%	95%	100%	93%	100%	100%	100%	100%	100%
Falls Service	100%	N/R	N/R	N/R	94%	100%	100%	97%	100%	100%	96%	88%
Infection Control Team	N/R	N/R	N/R	100%	100%	100%	N/R	100%	N/R	N/R	N/R	100%
ME/CFS	100%	100%	100%	100%	100%	100%	100%	88%	100%	100%	100%	100%
MSK Triage						100%	100%	100%	93%	100%	100%	100%
Neurology	100%	100%	100%	86%	100%	100%	100%	100%	100%	100%	88%	100%
Occupational Therapists	95%	95%	93%	100%	100%	100%	97%	93%	97%	90%	100%	94%
Out of Hospital Teams	100%	97%	100%	89%	100%	96%	91%	100%	95%	100%	94%	100%
Phlebotomy	100%	100%	100%	N/R	100%	N/R	N/R	N/R	25%	14%	N/R	N/R
Physiotherapy	98%	99%	97%	95%	97%	98%	95%	98%	94%	98%	95%	96%
Podiatry	100%	100%	100%	N/R	100%	96%	100%	98%	100%	100%	100%	100%
SALT Adults	100%	100%	100%	N/R	100%	100%	N/R	N/R	N/R	N/R	N/R	N/R
SALT Paed	88%	81%	80%	75%	81%	81%	87%	94%	83%	90%	94%	75%
Smokefree	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	93%	100%
TB Service	100%	100%	N/R	100%	N/R	100%	N/R	N/R	N/R	N/R	100%	0%
Wheel chair service	N/R	N/R	N/R	N/R	N/R	100%	100%	100%	100%	100%	100%	100%
Average % positive	98%	97%	95%	94%	97%	97%	96%	98%	94%	88%	96%	95%

N/R = no forms returned



Patient Advice and Liaison Service

In addition to the FFT questionnaires, our patient liaison leaflets and posters are prominently displayed at all our sites. Our website gives details of the Patient Advice and Liaison (PALS) team and it is our clear intention that easy access for patients to contact us is always maintained. We strive to ensure that our patients can give compliments, ask questions, raise concerns or make formal complaints easily and with complete confidence.

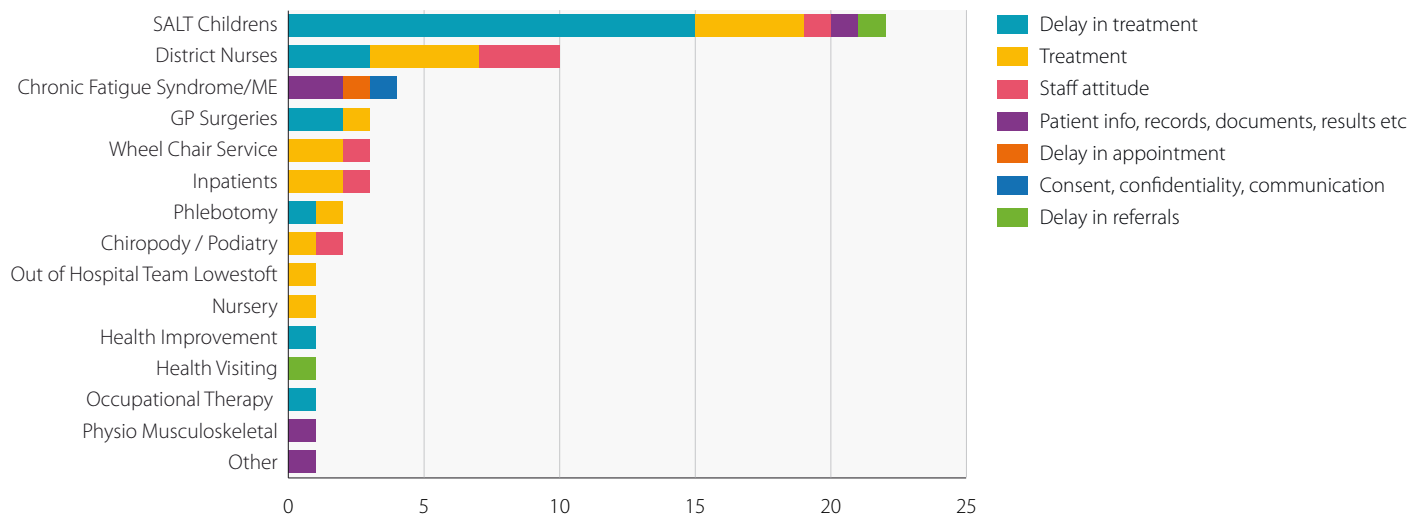
The PALS team closely follow their goals which are to listen carefully to patients, to offer to visit complainants when necessary, to resolve issues as quickly as possible and to respond in a fair, open and honest manner.

Learning from Complaints and PALS Concerns

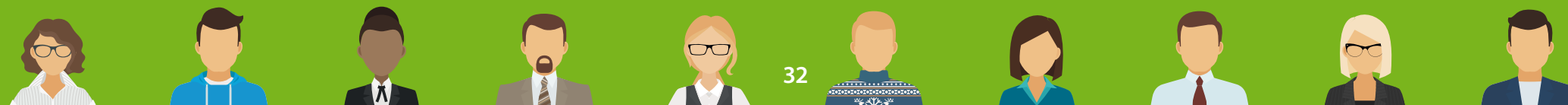
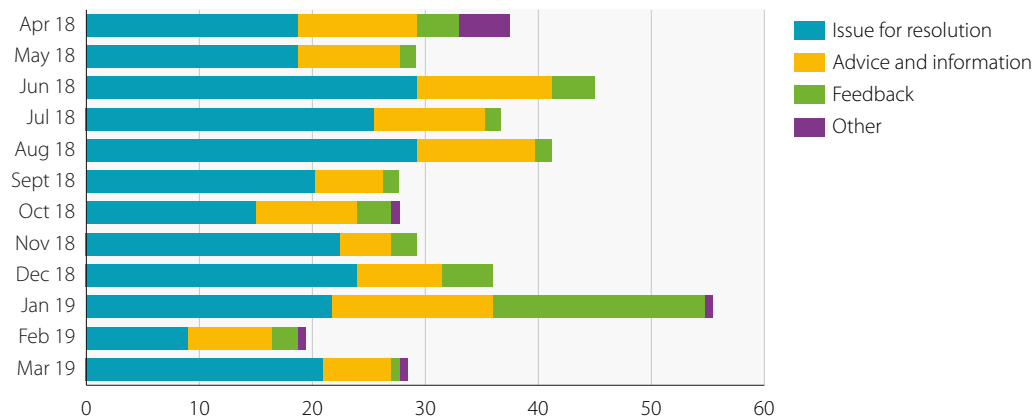
As a learning organisation, complaints are a vital source of information shared across our services to inform and improve what we do. Whenever potential service improvements are identified, complainants are informed by letter that any resulting action plans have been completed. When doing this, we also ask our complainants to complete a short questionnaire on how their complaint was handled. This again provides us with feedback and any suggested improvements can then be taken forward where possible. Monthly results are uploaded on ECCH's website (www.ecch.org).

The graphs below provide details of the complaints received during the year 1 April 2018 to 31 March 2019.

Complaints received April 2018 – March 2019



PALS Enquiries April 2018 – March 2019





Health Coaching Award

ECCH has won an award for introducing coaching techniques into consultations with patients and clients in order to improve their care and health outcomes.

Director of Quality Dr. Noreen Cushen-Brewster was presented with the award for Best Coaching and Mentoring Initiative at the CAKE People Development Conference at Newmarket in November 2018.

For the past four years ECCH has been training its clinicians in health coaching techniques believing this can help patients to make healthier choices, motivate them to self-manage and improve their results. Health coaching is about having different conversations with patients, promoting health, independence and preventing the onset of acute illnesses.

ECCH has trained more than 360 of its staff and nearly 100 from partner organisations in health coaching, and has six accredited coaches.

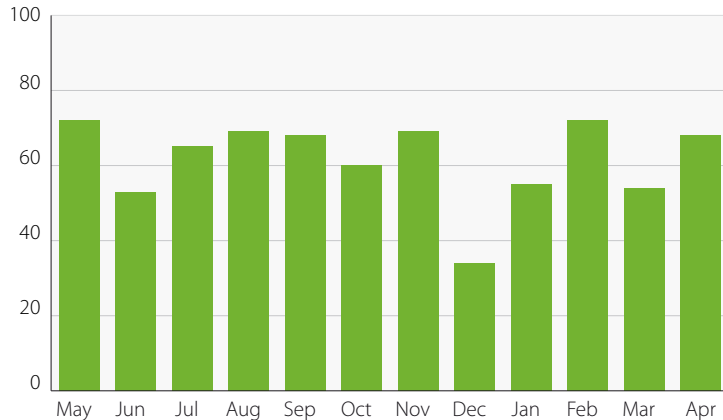
The initiative has also benefitted ECCH staff who have reported feeling more confident that patients are happy with their care, feeling a greater sense of achievement and reduced pressure.

In 2016 Dr Cushen-Brewster led a group from across Norfolk's health organisations to develop a Coaching Conversations programme and accompanying book with the University of East Anglia. The following year Health Education England and the Norfolk and Waveney Sustainability and Transformation Partnership backed this coaching programme and declared its ambition to equip the health and social care workforce across Norfolk, Suffolk and Essex with coaching skills to use in their everyday conversations.



ECCH has also appointed its first "Behavioural Coach" within a local GP Surgery, focusing on improving the health behaviours of patients with chronic conditions. An evaluation of this post showed that, as well as being popular with patients, it resulted in consistent improvements in weight management and levels of hypertension.

Compliments received May 2018 – April 2019



Patricia Hewitt Praises Teams

Former Secretary of State for Health Patricia Hewitt praised the passion of staff at ECCH when she visited us in June 2018 in her role as independent chair of the Norfolk and Waveney Sustainability and Transformation Partnership.

Patricia Hewitt met with teams from across the organisation including therapists, district nurses, health visitors, school nurses and family nurses. She had asked to visit us to learn about how we operate as she works on plans for reforming the local health service. During her time as a Minister in Tony Blair's Cabinet, Mrs Hewitt championed the creation of social enterprises to provide health and social care services.

Mrs Hewitt told ECCH staff:

"You're absolutely right to be proud of the team here. I think what you are doing here is absolutely terrific. I just love this sense that you are all so passionate about it and you're all owning it. We're all in this together and you've absolutely conveyed that sense rather than sitting here and saying 'What are you going to do to fix this?'"



You said - we did

The new phlebotomy walk-in clinics in Bungay are too crowded and the wait too long.



We trialled a combined walk-in and appointment session. It was still unpopular so we changed to appointment only.

I'm having problems booking a place on your pain management course.



We took over the booking and appointments system ourselves to make this work better.

I've been told I'm not eligible for a new wheelchair until I have more accessible accommodation.



Wheelchair Services reviewed the patient's home environment and found it suitable for the wheelchair she needed. Rather than relying on client reported problems and the assumption that something is not suitable, the service will endeavour to review the home environment as part of the initial assessment.

I'm pregnant and I want to give up smoking but I don't want to attend a clinic because I'm worried people will judge me.



All first appointments are now conducted over the telephone. Once a relationship has been established with the advisor, face to face or further phone support is offered. Working this way has produced an increase in successful quits compared to 2017/18.



Patient Feedback

A very helpful session, very informative and supportive.

Adult Speech and Language Therapy

The District Nurses were very kind, thoughtful and immediately put me at ease.

The Out of Hospital Team has been a brilliant service and I am most impressed with everyone. They have been very kind, caring and cheerful and are certainly helping with my recovery.

They were extremely helpful, nothing was too much trouble, an absolute credit to the NHS!

Early Intervention Vehicle

Thank you for the care and consideration. Your support was very much appreciated by our family.

Minsmere Ward, Beccles Hospital

I received a great service from the Physio. They were friendly and professional. I really appreciated having follow-up appointments to check on my progress.

The young nurse who visited was very professional and above all had a lovely approach. Thank you.

Falls Service

My Podiatrist was very nice to me. I could talk to him about anything and he treated me with respect.

I was made to feel very comfortable and relaxed. My improvement has been amazing.

Occupational Therapy

The service was amazing and I was treated as an individual. I would not have given up smoking without the help of the service!

Smoking Cessation Service

I felt understood, encouraged and very positive with the useful advice given to me on managing my illness. I felt their understanding of M.E. was excellent!

ME/CFS Service



Health and Safety, Security and Resilience

ECCH is proud of its reputation for Health and Safety, Security and Resilience and committed to ensuring the health, safety and welfare of everyone associated with our business. We employ a small, specialist team who manage, support and advise our directors, executives and operational personnel on these essential issues.

Assurance and governance for Health & Safety, Security and Resilience functions is managed through the ECCH Health and Safety Management Committee and its Integrated Governance Committee.

Health and Safety

During 2018 two non-patient incidents required further reporting to regulators (Health and Safety Executive/Care Quality Commission). These were genuine unforeseeable incidents and did not result in further involvement of the regulators. ECCH maintained a 94% compliance rate across its services and premises. This will be re-assessed in 2019 following the implementation of our new contract for Adult Community Services and Specialist Palliative Care which came into effect on 1st April 2019.

Emergency Preparedness Resilience and Response

ECCH is committed to its duties under the Civil Contingencies Act. Like any NHS organisation, we are an active partner and responder within the local health sector resilience arena. We work collaboratively with our health and social care partners, NHS England and local authorities to ensure cohesive health care support in the event of an emergency or major incident affecting our community.

ECCH operates a unique yet effective system for business continuity management and planning processes based on five key corporate plans supported by individual plans for premises we use for delivering our services. These have been independently audited, tested and acknowledged as fully compliant and fit for purpose.

Our performance in the resilience arena, set against the national NHS England: Emergency Preparedness Resilience and Response Core Standards, saw us achieving a rating of full compliance by the year end.

Security Management

From 1st April 2018 the national support to health organisations from NHS Protect was withdrawn. However, ECCH is required to maintain accredited security management specialist services and therefore directly employs an Accredited Local Security Management Specialist (ALSMS) who works with all personnel within ECCH, other local healthcare ALSMS Specialists and police to promote and support the safety of staff and to tackle violence, harassment and abuse against our staff, patients and carers. Our self-assessment against the national security management standards for this period provided ECCH with an outcome of full compliance.

Workforce Quality

In 2018/2019, ECCH's average number of staff employed was 781. This is a decrease from last year (where the average headcount for the period was 822). This reduction is mainly attributable to the Nelson Medical Centre contract ending in November 2018 with the staff working at the practice transferring to a new service provider.

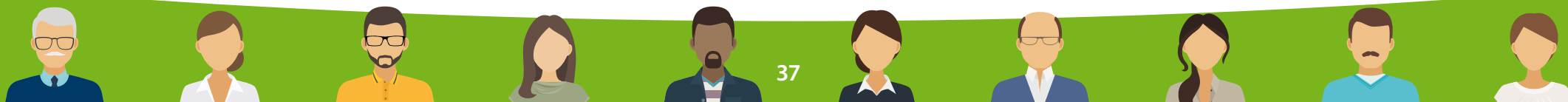
The average turnover rate during 2018/2019 was 19.86%. However in the last quarter (January – March 2019) this rate was significantly lower at 1.54%.

Highly Commended by the Employee Ownership Association

ECCH was voted runner-up Public Service Mutual of the Year in the prestigious UK Employee Ownership Association (EOA) awards in November 2018 and was also highly commended in the category of Employee Ownership Culture Award.

The awards, which are run by the EOA and sponsored by Baxendale, celebrate the significant contribution employee owned businesses make to the UK economy.

ECCH was also a finalist in the UK Social Enterprise Awards for the categories of Health and Social Care Enterprise of the Year and Employee Engagement.



Cultural Development Programme

In 2018 we embarked on a three year cultural development programme which we have called Evolve. The aim of the Evolve programme is for all staff to feel a sense of connection across ECCH and share in the collective achievement of our goals.

The Evolve programme is based on a set of four 'signature behaviours' that underpin how we do things at ECCH:



We Listen, We Learn, We Lead



Work Together, Achieve Together



**My Accountability,
My Responsibility**



**Be Cost Conscious,
Respect Our Resources**

Four 'pulse checks' are carried out each year in which staff and the Executive team assess their own and their colleagues' performance at demonstrating these behaviours. The results of 'pulse checks' are drilled down by department and enable us to see areas within the organisation where staff are more comfortable and confident with the Evolve behaviours than others.



In February 2019 the fourth 'pulse check' was carried out and 57% of staff participated, a 9% increase on the previous check. The Net Culture Score showed a decline of 10% to 40% which indicates there is an opportunity for senior managers to emphasize the importance of regularly applying the signature behaviours. As a result of this we held a number of Evolve events in March 2019 at which senior management have reiterated the importance of the Evolve programme for the organisation to achieve its strategic goals. These events have been well attended and received by staff.

The programme has two internal and two external indicators of success – resilience, engagement, customer satisfaction and social impact. Resilience is measured by our staff attendance rate which has improved in the past year and engagement by the Evolve survey participation rate.

Customer satisfaction is reflected in the results of our NHS Friends and Family Test and social impact through the Social Value Index.

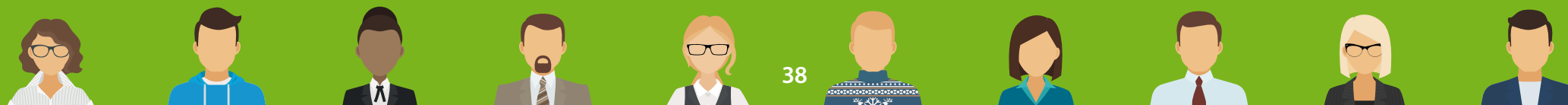
Staff Survey

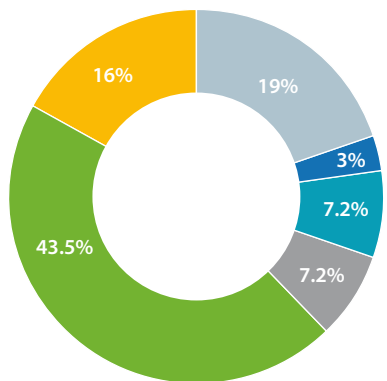
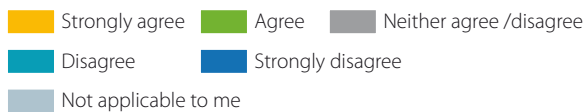
In January/February 2019 we carried out our annual staff survey. This year, for the first time, we worked with the professional development consultants ERAS, adapting our previous survey questions in order that they could then analyse the results and benchmark ECCH against other similar organisations in the area. Changes to the wording of many questions makes it difficult to compare the responses with last year's results.

Only 30% of staff responded to the survey, compared to 53% in 2017. We believe this may have been influenced by the fact that the quarterly 'pulse check' for our Evolve programme was run at the same time.

Result Highlights

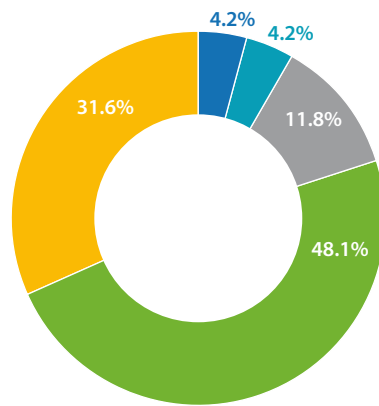
Last year 94% of staff said they believed ECCH provides quality services and care all/most of the time. This year staff were asked a slightly different question - whether they were satisfied with the quality of care they give to patients/service users. 10.2% disagreed or strongly disagreed with this statement. The question was not applicable to 19% of staff.





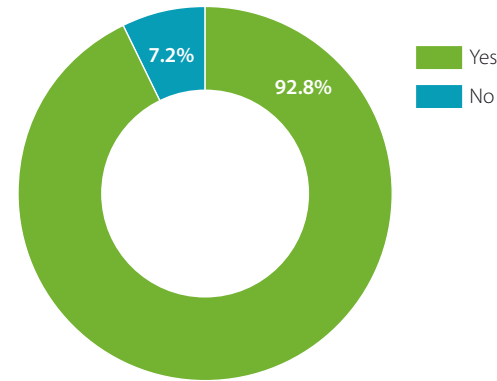
I am satisfied with the quality of care I give to patients/service users.

79.7% said they would be happy with the standard of care if a friend or relative needed treatment.



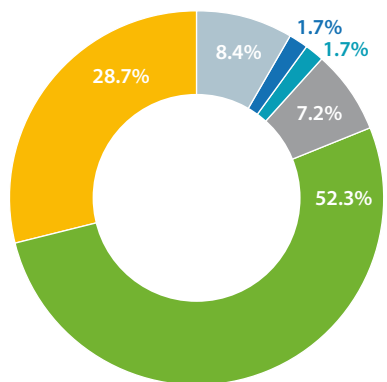
If a friend or relative needed treatment I would be happy with the standard of care provided by this organisation.

92.8% of staff said ECCH was committed to ensuring staff, patients and visitors are treated with dignity and respect.



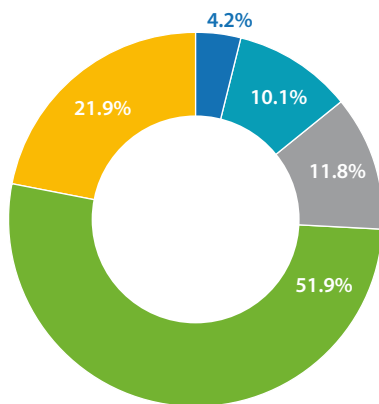
From my experience I believe that ECCH is committed to ensuring all staff, patients and visitors are treated with equal dignity and respect.

81% said they felt their role made a difference to patients/service users.



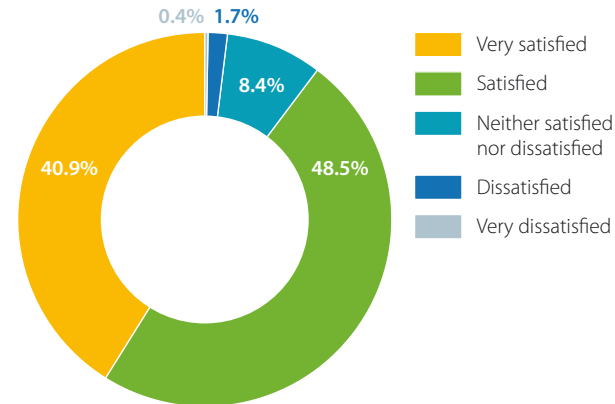
I feel that my role makes a difference to patients/service users.

74% agreed or strongly agreed that their team met frequently to discuss the team's effectiveness.

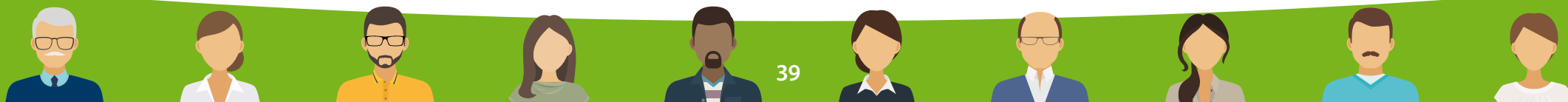


The team I work in often meets to discuss the team's effectiveness

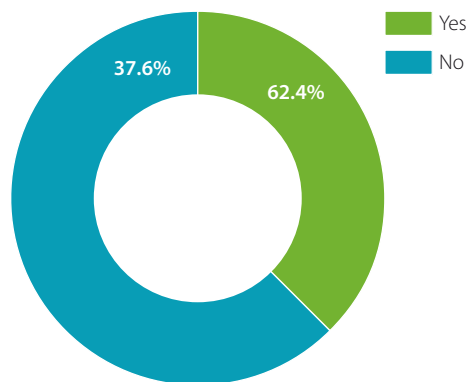
89.4% of staff said they felt supported by their colleagues



The support I get from work colleagues

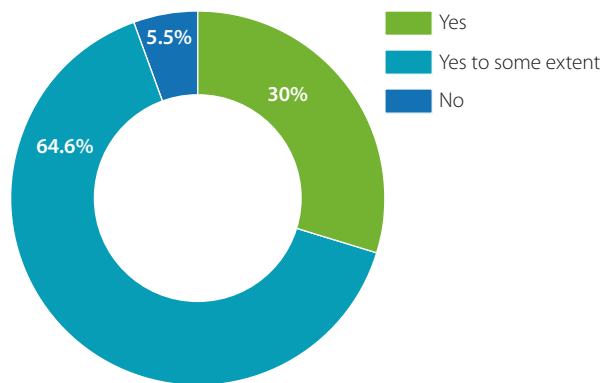


The percentage of staff who said they felt unwell from work-related stress has fallen from 48% last year to 37.6%.



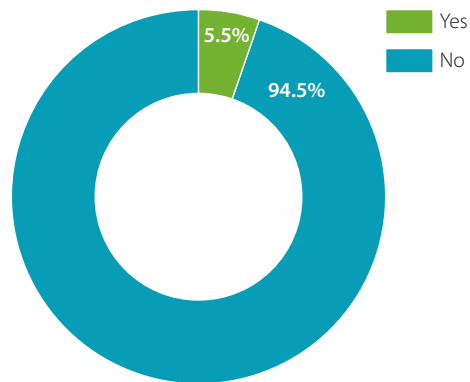
During the last 12 months have you felt unwell as a result of work related stress?

94.6% said ECCH took positive action to promote health and wellbeing.



Does your organisation take positive action on health and well being?

Asked whether they have experienced discrimination at work from a team leader or colleague 94.5% said they had not.

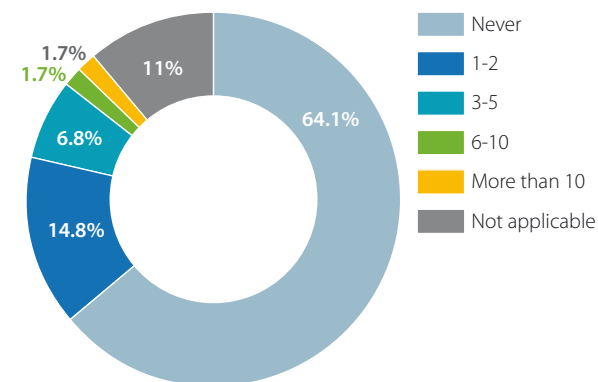


In the last 12 months have you personally experienced discrimination at work from your manager / team leader or other colleagues?

ERAS' analysis of both the survey results and feedback questions led them to conclude that ECCH staff "work very well as a team and have a clear awareness about the direction and the priorities of the organisation. People are clear about long-term goals and see how their individual objectives relate to what the organisation is trying to achieve. There is plenty of support for new ideas and creativity, and improvement is continually sought."

The report said that ECCH employees "have a very clear sense of how their own performance contributes to the overall success of the organisation. They feel that they get very good feedback about this and thus have no difficulty equating their own efforts with the organisation's success."

Staff were asked how many times in the preceding 12 months they had experienced harassment, bullying, abuse or violence.



In the last 12 months have you personally experienced harrassment, bullying or abuse at work from patients/ service users, their relatives or other members of the public?

ERAS also found that "a lot of emphasis is placed on standards and procedures, which should result in continuous improvements. Effort is spent on building and maintaining customer relationships and identifying customer needs and concerns. Opportunities to develop in new ways are likely to increase with even more customer insight."

The Shareholder Council is currently drawing up an Action Plan as a result of the Staff Survey and analysis, looking to see where we can make changes and improvements to the way we work.



Staff Absence and Wellbeing

ECCH's cumulative absence rate for the period was 4.30% which is a decrease on last year's figure of 4.94%. This continues the positive downward trend over the past 2 years and is due to the ongoing collaborative working between the Human Resources (HR) and Occupational Health departments, with line managers and supervisors providing support and advice to staff.

Our online absence system ePay has enabled our line managers to have more control with regard to absence management and allows enhanced accuracy and timely reporting of absences. All service leads and employees with line management responsibility receive a monthly management dashboard report which allows HR and managers to drill down on the absence rates to enable them to support and advise in areas where absence rates peak.

During 2018/2019 work has taken place to develop and implement the seven core interventions in our Health and Wellbeing Strategy. This will help to ensure that our employees are adequately supported, motivated and engaged. We now have 20 trained mental health first aiders who we are developing into peer supporters and we are continuing to offer cognitive behavioural therapy and physiotherapy services to all employees as well as traditional occupational health services.

Workforce Development

ECCH works in partnership with local and regional health and social care organisations to identify and plan workforce priorities across our Sustainability and Transformation Partnership (STP) footprint. Planning workforce priorities to address recruitment, development and the retention of health and social care staff is key to the future sustainability of our organisation and our local health and social care services.

Workforce planning themes in ECCH are increasingly concerned with the development of health roles that can work effectively across different organisations. Increasing career opportunities for integrated working practices and rotation will create excellent development opportunities that will, in time, support the local system's resourcing challenges.

ECCH's HR and Learning and Development Leads are key partners in the Local Workforce Action Boards and STP Organisational Development Networks. Active participation in Talent Management Development (Communities of Practice), Health and Career Coaching Development and networking with regional senior HR colleagues ensures ECCH is at the forefront of workforce planning and support for the local health system.

ECCH's Director of Human Resources is in the process of finalising a People Strategy to replace all the workforce strategies currently in place. The People Strategy identifies ECCH's workforce priorities for the next 5 years to support the delivery of our vision and objectives. It focusses on five themes – culture, health and wellbeing, management and leadership, staffing and workforce transformation. Key stakeholders will be engaged in the finalisation of the strategy over the next few months to ensure that we have a truly comprehensive plan.

Clinical Education

We have sustained the quality of our learning environment against the National Quality Standards and were not selected for a visit by Health Education England this year. We believe this is a reflection of the high standard that we have maintained for five years and we are committed to continuous progress through the annual improvement plan.

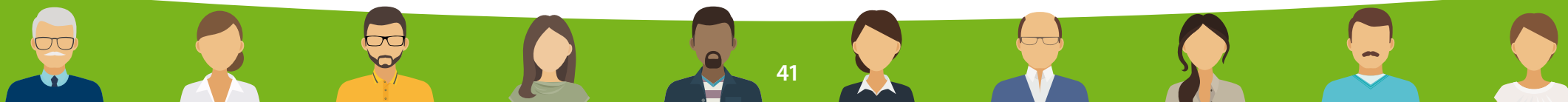
Feedback from the learners we have supported in placement shows a 90% satisfaction level. In addition, more than 90% of our learners have expressed the desire to work with us when they qualify. This high level of satisfaction and engagement with our potential workforce reflects the hard work and support our clinical teams put into supporting learners whilst on placement.

We have a number of staff currently undertaking the Nurse Associate Apprenticeship, which is a new role and utilises a different pathway for training our healthcare professionals. It builds on the fantastic achievement of our work-based learning 'Pathway to Nursing' students who both qualified in the Autumn and have gone on to take up registered nurse posts.

75% of our eligible workforce has achieved the Care Certificate.

Our Preceptorship program is well established and our newly qualified professionals have engaged really well with the program.

We have successfully tightened up our feedback cycle with learners by introducing an end of placement debrief session. This has enabled us to respond to feedback forms earlier in the placement in a 'you said, we did' style, as well to ensure that the learner has been supported to reflect on their placement experience and achievements.



Training and Education

As a staff owned organisation we value our staff and invest in their development to ensure they are competent and confident to deliver high quality services. The mandatory training compliance rate for ECCH has consistently exceeded the target rate of 90% throughout this reporting period.

We deliver a range of training across the whole organisation including Cavendish Care Certificate, Clinical Skills training, Work and Life Skills and People Management Training. Our trainers and educators all work in the field of practice for which they deliver training. As well as training ECCH staff, our clients have so far included NHS Great Yarmouth & Waveney Clinical Commissioning Group, JPUH, Norwich City Council, UEA, The Prince's Trust and several GP practices and care homes.

For all employees who have line management and supervisor responsibilities we offer a range of People Matters training sessions to develop and enhance management skills. These include Engagement, Leadership, Attendance, Performance, Appraisal, Recruitment and Leadership and Workforce.

In addition to our in-house People Matter Management Skills Training Programme there are opportunities to achieve qualifications such as Institute of Leadership and Management (ILM) Levels 3 or 5 in Leadership and Management and Chartered Management Institute Level 7 in Strategic Management and Leadership. We have also introduced a new in-house programme called 'Focus on Managers'. This involves four study days covering communication, forward thinking, resource management and team motivation. Both these and the People Matter courses have been very well attended and received, with managers taking away personal improvement plans.

Training and development highlights:

- Mandatory Training compliance is just below 95%.
- Health Coaching continues to support clinical staff in having a different type of conversation with patients. We are now running Coaching Conversations, a slightly shorter course open to all staff, clinical and non-clinical.
- We have a growing number of apprenticeships running within the organisation including Business Administration, Senior Healthcare Support Worker and Human Resources Support.
- St Elizabeth Hospice continues to support us with delivering End of Life Care Training

Clinical Supervision

ECCH uses a range of techniques to facilitate clinical supervision in order to support and enhance the quality and safety of the services we provide and support staff in their ongoing professional development.

We have an ongoing training programme and monitoring processes, with clear expectations regarding the drivers for, and regularity of, supervision. A supervisor register is available via the organisation's intranet. Under our criteria, the supervisor should be the most appropriate person to meet the needs of the supervisee which does not necessarily mean their line manager.

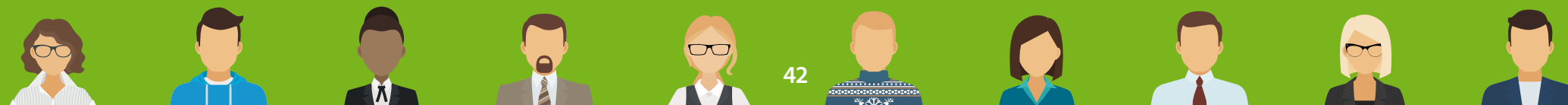
Our Clinical Supervision Policy has been reviewed and is clearly aligned to CQC guidance and recommendations. We continue to work with our teams to ensure that robust monitoring of clinical supervision activity is documented centrally.

The revised policy focusses on our clinical staff and the process of clinical supervision whilst recognising that non clinical staff benefit and should have access to supervision too.

Action Learning Sets continue to be a method that is adopted across teams and roles.

Graduate Event

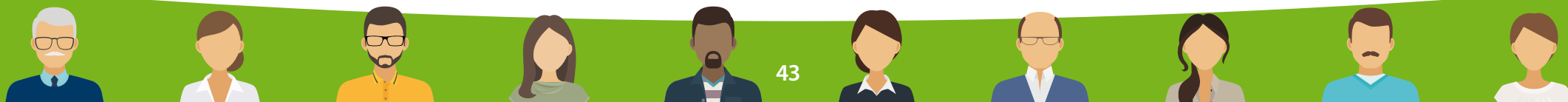
The success of ECCH's first Graduate Event organised by the Adult Services directorate in 2017 led to ECCH's Children's Services hosting the 2018 event in October. The aim was to bring together professionals from all business units who had recently graduated to celebrate their success, share findings from their dissertations with senior managers and offer support from the ECCH Research and Development Team and Project Management Team for individuals who wished to translate their study into practice.



Talent for Care

Talent for Care is a national strategic framework to develop the healthcare workforce. The table below outlines the Strategic Intentions and the work ECCH is doing in response.

Talent for Care Strategic Intention	ECCH Response
Broaden the ways into training and employment in the NHS, especially to attract more young people and improve diversity within the workforce.	<ul style="list-style-type: none"> • We continue to provide the opportunity to place bands 1-4 on Apprenticeship standards for their role.
Increase the chances for people to try new experiences of working in the NHS .	<ul style="list-style-type: none"> • We work with local schools and education providers to develop a work experience programme for young people to gain an understanding of the diverse career opportunities within the health and social care sector. This is implemented with a rotational work experience programme which includes a range of observations in all healthcare services ECCH provides (clinical and non-clinical)
Engage more staff to act as NHS Ambassadors who can promote NHS careers to schools, colleges and local communities .	<ul style="list-style-type: none"> • We continue to identifying and expand the number of health ambassadors within our organisation, including Apprentices. • We support The Prince's Trust Programme annually providing clinical placements and an opportunity to complete the Care Certificate.
Challenge and support every NHS employer and contractor to implement a development programme for all support staff that is over and above annual appraisals and training.	<ul style="list-style-type: none"> • We have rolled out the Care Certificate as part of our induction programme and have been supporting in post staff to achieve the Care Certificate within their roles/service areas.
All new healthcare support staff to achieve the new Care Certificate, which will be introduced in March 2015 and, for those who want it, a universally recognised Higher Care Certificate .	<ul style="list-style-type: none"> • We continue to provide the opportunity for staff to complete an Apprenticeship standard relating to their current role. • We receive ongoing interest and seek to support Higher Apprenticeships including Nursing Apprenticeships and Occupational Therapy Apprenticeships.
Double the numbers of Health Education England funded or supported apprenticeships by March 2016 and establish an NHS Apprenticeship Scheme to rival the best in the country .	<ul style="list-style-type: none"> • We have recruited to three Nursing Associate Apprenticeships and seek to continue supporting this. This allows staff to gain a professional position and will become registered with the Nursing & Midwifery Council.



Talent for Care Strategic Intention	ECCH Response
<p>Simplify career progression for those who want it with innovative new roles and pathways to promotion, including more part-time higher education as a route into nursing and other registered professions.</p>	<ul style="list-style-type: none"> • Two members of staff have qualified as registered Nurses through the work based learning route and have moved into full time nursing posts. We continue to support this via higher Apprenticeships. • We seek to provide 'step up' Apprenticeships for those who would like to develop into professional Health Care roles. • We are part of the working party with the local workforce partnership to develop transferability of the care certificate as part of a system wide agreement. • A range of strategies such as integrated care skills have been implemented to support, develop, identify and nurture existing talent to support progression and succession planning.
<p>Agree with employers and education providers a universal acceptance of prior learning, vocational training and qualifications.</p>	
<p>Support talent development that identifies and nurtures people with the potential to go further, especially for those wanting to move into professional and registered roles.</p>	
<p>The national Talent for Care programme partnership will support this strategic framework with a national campaign. We will publish information, support pilot projects and spread good practice.</p>	



Audits & Care Quality Commission Inspections

ECCH is required to register with the Care Quality Commission (CQC) and its current registration status is unconditional. ECCH was rated as 'Good' following an overall inspection of its services in March 2017.

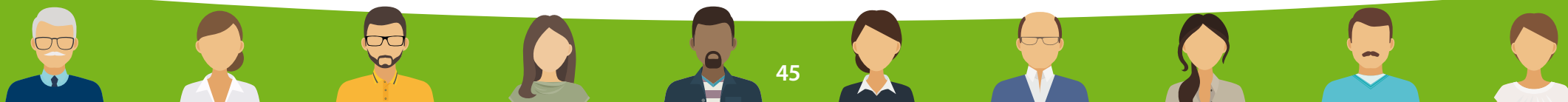
National and Local Clinical Audits

ECCH was eligible and took part in one National Audit in 2018-19. This was the National Audit of Intermediate Care. National audits are part of the National Clinical Audit Programme commissioned by the Healthcare Quality Improvement Partnership (HQIP).

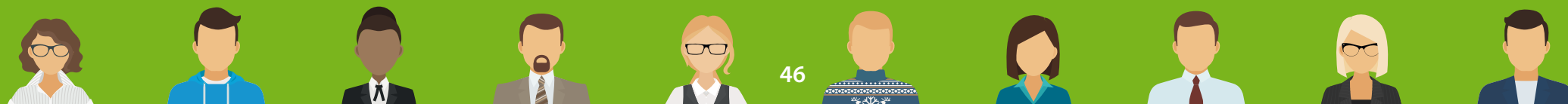
In 2018-19 ECCH ran 22 clinical audits and 4 service evaluations. The audits on page 46 are a selection of those which were completed in the period covered by this report.

Inspected and rated

Good



Service/ Department	Audit Topic	Aims (what)	Objectives (why)	Results / Recommendations
Health Visiting	Unicef Baby Friendly Initiative	The aim of this audit was to increase breastfeeding initiation and prevalence, and support mothers and families to establish close relationships with their baby.	Evidence suggests that effective services to increase and sustain breastfeeding, would make significant contribution to reducing health inequalities.	This audit highlighted that 100% of mothers asked were very happy with the care they received. Staff have been commended for their work within the service.
Physiotherapy MSK	Hip Sprint audit against national average.	The aim of this audit was to benchmark ECCH's community orthopaedic service against the national average for community services.	This audit would indicate how the service is performing against the national average.	This audit highlighted that although the service offers community rehabilitation, and has a close working relationship with acute trusts, patients need to be seen quicker on discharge and they require more physio input. An action plan is in place to achieve this.
Medicines Management	Allergy Audit in the Community Hospital	The aim of this audit was to ensure a patient's allergy status is documented in drug charts and medical notes.	To assess whether ECCH was complying with Department of Health and Nursing & Midwifery Council guidance.	This audit highlighted that 100% of patients admitted to our community hospital had their allergy documented on their drug chart.
District Nursing	Prevention of Pressure Ulcers in Adults	The aim of this audit was to establish if a Risk of Pressure Ulcer assessment was completed on initial contact.	To ensure that the Risk of Pressure Ulcer template is completed which will reduce the risk of patients developing pressure ulcers.	There was a good response rate from the clinical teams for this audit. The audit highlighted that there was a need to increase awareness of the importance of completing the Risk of Pressure Ulcers assessment tool. An action plan to increase compliance has been completed and the service will carry out a re-audit next year.



Data Quality

ECCH continues with our extensive programme of activity to review critical metrics and the data that underpins them and this has resulted in increasing levels of confidence in core data quality, both within the organisation and among our commissioners and stakeholders. Our Business Intelligence team continues to develop the suite of dashboards and strengthen the underpinning architecture, making it more resilient.

We recognise the rigorous governance processes required and we have been working to ensure that we are compliant with the requirements of General Data Protection Regulation (GDPR). Reporting on incidents and compliance is a standing agenda item for our Information Governance Committee. ECCH has its own Data Protection Officer who is active within the wider STP Information Governance arena.

ECCH's Information Governance Assessment Report was completed with all mandatory areas reflecting a green compliance status.

Corporate Social Responsibility

As a Community Interest Company (CIC) we are always looking for ways to benefit the community. Here are some of the things we have done in the past year.

The ECCH Foundation

In April 2018 ECCH set up a charity - the ECCH Foundation - in order to take positive action to help tackle the issue of social exclusion in the Great Yarmouth and Waveney area.

Aware that within the geographical area ECCH covers there are areas of high unemployment, poor education attendance and financial hardship, ECCH's Board decided that the best approach was to focus this work in a separate charity and to establish the charity with some initial funding as part of ECCH's core goal to deliver social value.

The Charity will operate independently of ECCH. The long term ambition is to develop a package of support for people who are socially excluded, to access education and training opportunities. In the short term the focus will be on providing these opportunities to younger people who would benefit from increased life choices.



Prince's Trust

Twelve young people joined ECCH for our third training course in partnership with The Prince's Trust.

The trainees from Lowestoft and Great Yarmouth spent six weeks attending a 'Get into Healthcare' programme which found them undertaking clinical placements with different ECCH teams as well as classroom sessions covering employability skills and mock job interviews.

They all obtained a Care Certificate at the end of the course which can be used to help them find work in the healthcare sector. All NHS health and social care support workers require a Care Certificate to prove they are equipped with the knowledge and skills to provide safe, compassionate care.

During their placements the delegates spent time with ECCH's physiotherapy, podiatry, occupational therapy, health visiting and community nursing teams as well as with staff on the in-patient ward at Beccles Hospital.



Non-clinical placements were provided by the James Paget University Hospitals NHS Foundation Trust and social care placements with the social enterprise Independence Matters.

Following the course the students will also be able to apply for apprenticeships, permanent and temporary (bank) positions at ECCH. Many of the students who have attended the course in previous years have since gone on to successfully obtain jobs.

Free Defibrillator Training

ECCH provided free advice and training so residents of Somerleyton will be better equipped to cope if someone in the village suffers a heart attack.

Claire Diggins, a member of ECCH's Out of Hospital team in Lowestoft, suggested that a defibrillator would benefit the rural community and spoke to Somerleyton Parish Council about its potential benefits in the event of someone suffering a cardiac arrest. As a result, the Somerleyton Award charity bought a defibrillator which has been installed outside the village hall.

Claire then enlisted ECCH's training team to provide some training for villagers free of charge. They were taught to operate the defibrillator and also to give CPR in the event that someone stops breathing. Claire has since set up a telephone support group of volunteers who attended the training and who are willing to be contacted by anyone requiring help to use the defibrillator in the future.



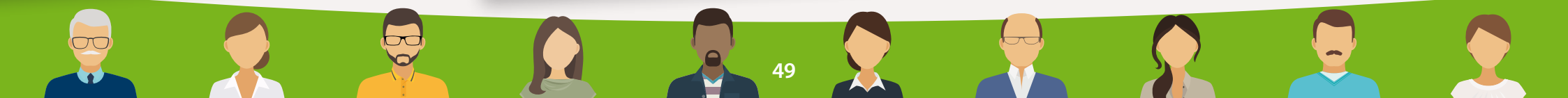
Additional Fundraising

Our teams and individual staff members, have donated thousands of pounds and many hours of their own time to support charities over the period covered by this report. Here are just some of the ways this has been achieved:

- Seven health visitors and two members of the Family Nurse Partnership team successfully completed the Yorkshire Three Peaks Challenge raising more than £2,300 for Baby Basics, a volunteer-led project that provides essentials to mothers and families who are struggling financially.
- Staff wrapped shoppers' Christmas gifts in the Britten Centre, Lowestoft, to raise money for the Thin Ice Project, an incentive run by the charity Access Community Trust to support homeless and vulnerable people with food and toiletry parcels, and give them somewhere to access hot food during the winter season.
- Staff at Beccles Hospital baked cakes for a tea party for inpatients of Minsmere Ward in order to mark Silver Sunday which celebrates the value and knowledge older people contribute to communities. It also aims to combat loneliness and isolation.
- Foodbank donation points have been set up across ECCH sites and a list of the most needed items is posted in the weekly staff newsletter with the Estates and Facilities team organising regular collections and distribution to local charities.

The organisation has supported various national events such as Christmas Jumper Day, Red Nose Day and the World's Biggest Coffee Morning for Macmillan Cancer Support.





Appendix 1 - Services Provided in 2018-19

From April 2018 to March 2019 ECCH provided and/or sub-contracted 27 services for the NHS, public health and social care:

Adult Services	Children and Family Services	Health Improvement Services	Primary Care
Community Nursing	Health Visiting	Smoking Cessation	Nelson Medical Practice
Community Matrons – intensive case management (including Chronic Obstructive Pulmonary Disease Specialist Nursing)	School Nursing	TB Control Team	
Occupational Therapy	Family Nurse Partnership		
Infection Prevention and Control	National Child Measurement Programme		
Falls Service	Children's Speech and Language Therapy (Waveney)		
Inpatient Services	Children's Speech and Language Therapy (Norfolk)		
Physiotherapy	Safeguarding Adults and Children		
Adult Speech and Language Therapy	Looked After Children		
Continence & Lower Urinary Tract Service			
Pharmacy & Medicines Management			
Neurological Specialist Nursing			
Podiatry			
ME/Chronic Fatigue Syndrome Service (Norfolk & Suffolk)			
Out of Hospital Team South Waveney			
Out of Hospital Team North			
Out of Hospital Team South			



Appendix 2 - Letters from our Stakeholders

A draft version of this Quality Account was shared with NHS Great Yarmouth and Waveney Clinical Commissioning Group, Healthwatch Norfolk and Healthwatch Suffolk for their review and comments.

The responses we received are shown on the following pages.



Your Ref:
Our Ref: ECCHQA/RAH
14 June 2019

Noreen Cushen-Brewster
Executive Director of Quality
East Coast Community Healthcare
Hamilton House
Battery Green Road
Lowestoft
NR35 1DE

Beccles House
1 Common Lane North
Beccles
Suffolk
NR34 9BN

Tel: 01502 719561
Fax: 01502 719874

Web: www.greatyarmouthandwaveneyccg.nhs.uk

Dear Noreen,

Great Yarmouth & Waveney Clinical Commissioning Group as a commissioner of East Coast Community Healthcare (ECCH) supports the organisation in its publication of a Quality Account for 2018/19. We are satisfied that the Quality Account incorporates the mandated elements required based on available data. The information contained within the Quality Account is reflective of the organisation over the previous 12 month period.

In our review, we have taken account of the clinical quality and safety improvement priorities identified for 2019/20 and support the identified improvement objectives in the quality and safety of care provided to Great Yarmouth & Waveney residents. ECCH will do this by:

- **Improving clinical effectiveness;**

Leading the transformation of Specialist Palliative Care in the community for the population of Great Yarmouth and Waveney. This will be a medical consultant led service offering access to six specialist palliative care beds at Beccles Hospital and a twenty-four hour, seven days per week, advice line for professionals, patients and their carers. From June 2019, day services will also be provided for patients offering palliative rehabilitation, symptom control, emotional wellbeing and social integration support. The team will in-reach into the James Paget University Hospital for patients with specialist palliative care needs and to ensure robust discharge planning enables patients to receive care in the community wherever possible.

Continuing to take part in the 3D photography pilot for patients with diabetic foot ulcers to ensure diabetes is a key priority for the podiatry service.

- **Improving patient safety;**

Introducing a system wide training programme to educate all staff within the four Primary Care Networks about syringe pump prescribing and management, in collaboration with St Elizabeth Hospice. Training will also be offered to general practitioners and community nurses via Coastal Health, Great Yarmouth and Waveney's General Practice Provider Organisation.

Chair: Dr Liam Stevens, Chief Officer: Melanie Craig

Introducing an enhanced programme for safeguarding training to ensure all staff have a greater understanding of their responsibility and accountability relating to the recently updated safeguarding legislation.

Continuing to implement and evaluate the recommendations contained within the organisation's action plan following publication of the Gosport Independent Panel into the use of opioid analgesics at Gosport War Memorial Hospital.

- **Improving patient experience and engagement;**

Growing the organisation's volunteer workforce to harness expertise in specialist areas, to increase patient engagement and to encourage connected communities.

Recruiting End of Life Champions in each Primary Care Network to support patients to receive holistic care in the community.

Collaborating with GP colleagues and Patient Participation Groups to enhance patient experience by informing them of service developments and to increase engagement activities with disease specific groups.

Rolling out the 'Patients as Teachers' programme across the Primary Care Networks to enable patients to influence service evolution.

The CCG notes the progress and achievements made against the quality priorities identified for 2018/19, including ongoing work identified as required for many of these priorities, aligned with the new five year adult community services and specialist palliative care contract awarded to ECCH in January 2019.

The CCG commends the organisation's Infection Prevention and Control Team for its positive contribution in Great Yarmouth and Waveney, notably no cases of blood borne Methicillin-Resistant Staphylococcus and only one non-trajectory Clostridium Difficile case during 2018/19. The CCG is grateful to the team for their response to a Meningitis B outbreak in Suffolk, in conjunction with the CCG, which was highly commended by Public Health England and other associated agencies. The CCG wishes to congratulate the organisation on their staff flu vaccination rate of 84.1%, the highest performing community healthcare organisation in the country for 2018/19.

The CCG commends the organisation's Tissue Viability Team on the successful introduction of the new skin tear pathway across Great Yarmouth and Waveney care homes, the subsequent training provided to the Early Intervention Vehicle staff and the national recognition by NHS Improvement in 2018/19.

Following a successful trial and CCG investment, the Early Intervention Vehicle service was expanded in July 2018 to operate between the hours of 7am and 7pm, 365 days per year. This has enabled the service to deliver early intervention, rather than responding to people who had fallen, with the result that less than 25% of people visited were subsequently taken to hospital.

NHS Great Yarmouth and Waveney Clinical Commissioning Group commends East Coast Community Healthcare for this Quality Account and believes the report provides an opportunity to share with patients, families and carers the ongoing work of the organisation in maintaining and developing quality. We look forward to working with ECCH during 2019/20.

Yours sincerely



Rebecca Hulme
Chief Nurse
NHS Great Yarmouth and Waveney CCG



Review of Quality Accounts 2018/19

Healthwatch Norfolk appreciates the opportunity to make comments on the ECCH Quality Account for 2018/19. The organisation was rated Good by the Care Quality Commission at its last inspection in 2017.

The document is fairly easy to read, well laid out and well-illustrated. The priorities for the forthcoming year have been clearly identified but have taken precedence over what may or may not have been achieved in 2018/19. Where it has been decided to roll a previous year's priority forward, it has not been cross referenced. For example, ECCH committed to undertaking a baseline assessment of all patients with learning disabilities to inform the organisation of any gaps in care but, due to staff shortages, this was not completed and it has been decided to roll this over into 2019/20.

Healthwatch is pleased to note that patient safety remains of paramount importance as does clinical effectiveness and quality of care and there are a number of initiatives sited which provide good examples to the reader. It was particularly pleasing to see that ECCH Health Visitors and Family Nurses outperformed the region and the country in all their targets.

The Friends and Family Test continues to get a good response with EECH achieving an overall average of 95%. However, it would be prudent to see some additional patient/carer satisfaction methodologies tried out to provide assurance to the Board as to the validity of the FFT.

Healthwatch Norfolk would like to commend ECCH on securing a new 5-year contract to provide services across Yarmouth and Waveney and welcomes the opportunities for the development of new services as the organisation moves forward. It is also worthy of mention that this will enable EECH to work across boundaries and integrate into the future planning of workforce across Norfolk and Waveney.

The sample table providing information into the 22 clinical audits and 4 service evaluations provides an insight as to why work has been undertaken along with associated recommendations but does not provide the reader as to how any recommendations will be monitored and evaluated. It would also be useful to provide details as to how the reader may obtain more information on all areas of investigation.

Healthwatch Norfolk remains totally committed to work with ECCH to ensure that the views of patients, their families and carers are taken into account and to make recommendation for change, where appropriate.

Alex Stewart

Chief Executive – June 2019

Jonathan Williams
East Coast Community Healthcare CIC
Hamilton House
Battery Green Road
Lowestoft
Suffolk
NR32 1DE



Tuesday 25th June

Dear Jonathan,

Quality Accounts 2018/19

Healthwatch Suffolk thanks East Coast Community Healthcare for the opportunity to comment on its Quality Account for the year 2018/19.

We have considered your draft document and produced a response statement (enclosed) for inclusion in the appendix of the published report.

If you have any questions regarding this response, please do not hesitate to contact Michael Ogden on 01449 703 949 or by email to michael.ogden@healthwatchesuffolk.co.uk.

We all look forward to working with East Coast Community Healthcare in the year ahead and to hearing of progress made to improve services and outcomes for patients and service users in Suffolk.

Yours sincerely,

Andy Yacoub
Chief Executive
Healthwatch Suffolk

Response to the East Coast Community Healthcare Quality Account 2018/2019

Having reviewed the Quality Account provided by East Coast Community Healthcare (ECCH), as well as the patient and carer feedback provided to Healthwatch Suffolk, we can see that ECCH is providing good healthcare which is appreciated by patients.

Data received by Healthwatch Suffolk reveals that positive patient feedback has improved from some 30% to 51%. ECCH is to be commended for this substantial improvement in the feedback from its patients. The most positive feedback praised staff attitudes, patient experience, and involvement in treatment. The negative feedback drew attention to patient access to services, and the commissioning and provision of services. The CQC have rated ECCH as 'Good' - the staff of ECCH and its management deserve praise for its achievements and should be congratulated on the outcome of its inspection.

ECCH is now in the second year of its cultural development programme and has set out new strategies to take the initiative forward. These are:

- Excelling** - Aiming to enhance its reputation for high quality.
- Growing** - Working to grow its business in a sustainable way.
- People** - The interface between its staff and the community.
- Partnering** - ECCH recognises the value of collaboration and partnership.

This cultural programme may well be the reason for the improvement in its feedback from patients, and we look forward to hearing that it has continued this momentum.

ECCH also sets out priorities for improvement where the healthcare is delivered. These are important for ECCH and should bring solid improvements in the services that patients are receiving. ECCH provides a comprehensive review of its priorities for the preceding year. It also commissioned a review of the quality improvement and innovation goals that were set by its commissioners, concluding that all goals were achieved.

Infection control (as in any healthcare provision) is important as a contributor to patient safety, and ECCH's infection and control team have been highly commended for its work by Public Health England.

Address: 14 Hill View Business Park, Claydon, Suffolk, IP6 0AJ
Telephone: 01449 703949 **Email:** info@healthwatchesuffolk.co.uk



@HWSuffolk

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@HWSuffolk

Looking through the Quality Account written by ECCH, the reader gains the impression that this is a well-managed and well-functioning organisation, whose patients receive good services delivered by staff who are enthusiastic about their work. Healthwatch Suffolk looks forward to seeing the continuing improvement of the services provided by ECCH to its patients.

Address: 14 Hill View Business Park, Claydon, Suffolk, IP6 0AJ
Telephone: 01449 703949 **Email:** info@healthwatchsuffolk.co.uk



 @HWSuffolk

Glossary

AHP	Allied Health Professional	JICC	Joint Infection Control Committee
BBVs	Blood Borne Virus	JPUH	James Paget University Hospital
bMRSA	Bacteraemia Meticillin Resistant Staphylococcus Aureus	MRSA	Meticillin Resistant Staphylococcus Aureus
C difficile	Clostridium Difficile	MSSA	Meticillin Sensitive Staphylococcus Aureus
CCDC	Consultant in Communicable Disease	NED	Non-Executive Director
DH	Department of Health	NIHR	National Institute of Health Research
ECCH	East Coast Community Healthcare	NNUH	Norfolk and Norwich University Hospital
EoE	East of England	PCN	Primary Care Network
EPA	Eastern Pathology Alliance	PGD	Patient Group Direction
ESSCC	Essential Steps to Safe Clean Care	PHE	Public Health England
GP	General Practitioner	PIR	Post Infection Review
GYWCCG	NHS Great Yarmouth and Waveney Clinical Commissioning Group	PTL	Protected Time for Learning
IPACC	Infection Prevention and Control Committee	RCA	Root Cause Analysis
IPC	Infection Prevention and Control	SLA	Service Level Agreement
IPCT	Infection Prevention and Control Team	UTI	Urinary Tract Infection



We welcome your views

We welcome and value your comments on our Quality Account. Please feel free to write to us at the address below:

If you would like this leaflet in large print, audio cassette, Braille or in a different language please contact Taylor-Jade Gardiner on 01502 445356.

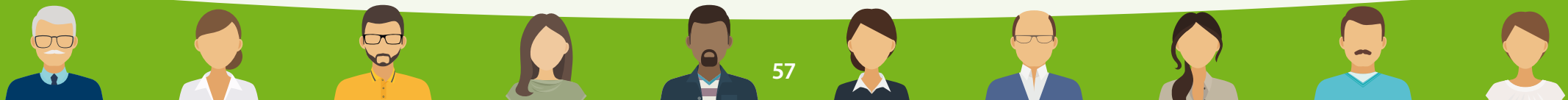
Jonathan Williams

Chief Executive
Hamilton House
Battery Green Road
Lowestoft
NR32 1DE

Email: ecch.enquiry@nhs.net

Website: www.ecch.org

Twitter: [@eastcoastch](https://twitter.com/eastcoastch)





East Coast Community Healthcare

Hamilton House
Battery Green Road
Lowestoft
NR32 1DE

Tel: 01502 445 445
Email: ecch.enquiry@nhs.net
Web: www.ecch.org
Twitter: [@eastcoastch](https://twitter.com/eastcoastch)



east coast
community healthcare