Our 2019-20 Quality Priorities

For 2019-20 the trust has set eight priorities for improvement; divided into the three areas that constitute quality, these are **patient safety, patient experience** and **clinical effectiveness**.

Our priorities have been developed and chosen based on:
- Identified risks to quality, which includes feedback such as complaints and learning from investigations into serious incidents.
- What is important to people who access our services, people who deliver our services and stakeholders such as commissioners.
- STP and National priorities.

Who has been involved in setting our 2019-20 priorities?

During 2018-19 KMPT has continued to involve a range of staff, people who use services and our partners in the non-statutory sector to help set our priorities for the coming year. The sustained monitoring of our Community Engagement Strategy has provided valuable assistance in producing an in-depth report regarding elements of mental health provision and in commenting on the format of this Quality Account as well as undertaking their formal review of the document.

Our Patient and Carer Consultative Committees and Community Engagement Strategy Monitoring and Implementation Group (CESMIG) have identified issues through their involvement with the organisation which they wished the Board to include in the Account.

The Trust Board has continued to receive presentations from service users and carers throughout 2018-19. As a result, the experience of service users and carers has helped the Board to establish its quality priorities by providing a real insight into the experience of people using the services.

Staff from across all areas of the organization, both clinical and non-clinical play a key role in priority setting. Our Quality Committee and its sub-groups, including the Patient Safety and Mortality Group, Patient and Carer Experience Group and Clinical Effectiveness and Outcomes Group, have discussed and approved the priorities. Our four Care Groups contributed to the selection of priorities and, most importantly for all staff, have played a key role by continuing to report and record day-to-day incidents, taking part in audits and supporting investigations that helps the organisation to learn.

Patient Safety

1. *To enhance 7 day follow up by implementing plans for Samaritans 24/48 hour contact.* This priority was proposed to ensure the collaborative work in 2018-19 is consolidated into practice. It also aligns with national Suicide Prevention initiatives.

2. *To increase the incident reporting of low harm incidents, and associated learning.* The Trust has been aware that its benchmarked position on incident reporting is low and CQC also noted the Trust performance on low harm incident reporting. Opportunities for learning and quality improvement are missed by not routinely reporting all incidents.

Patient Experience

1. *To improve experience of KMPT care for BAME service users.* This priority aims to improve Equality and Diversity from a patient and carer perspective and will be Expert by Experience led.

2. *To increase carer and service user attendance at, involvement in and satisfaction with CPA reviews.* Carer and service user involvement is fundamental to the effectiveness of CPA reviews.

3. *To improve service user experience of Discharge planning and process*. This priority was proposed by our Carer and Service User forums and reinforced by the Trust thematic complaints reviews. The evidence of successful improvement would be a reduction in complaints that relate to discharge.

Clinical Effectiveness

1. *To improve the use of HoNoS as the Trust's primary Clinical Outcomes recording and monitoring (CROM)*

2. *To improve the quality of Clinical Supervision for nurses – year 2.* This is a continuation of the 2018-19 priority focussing on evidencing the effectiveness of the revised Supervision policy developed and agreed in year 1.

3. *To submit 3 research project bids (oriented to service delivery) which have been proposed and initiated by KMPT staff*.