

Humber & North Yorkshire SeQuIn Tool Summary- Quarter 1: Involvement

HNY Summary

- Humber Centre and Clifton House scored an average of 3.3 & 2.2 out of 5 respectively
- Clifton House's average score has halved from 2021 to 2022
- Stockton Hall did not submit involvement standards in Q1
- The HNY average for involvement has decreased in 2022 after an increase from 2020 to 2021
- Standard 2 was the lowest scoring standard with 1.5/5 across HNY- this standard relates to policy and procedure
- There is opportunity in HNY for creative and innovative approaches to involvement within providers, as well as working together as a region

Context

The SeQuIn Tool was coproduced with service users, staff and commissioners from the Yorkshire and Humber Region over a 3+ year period. Input was also given by SALT, Widget software, UCLan and a Website Design Company to create an interactive platform that can benchmark data across services and regions. The aim of the Tool is to upkeep old CQUINs and drive quality improvements in services with the service user and staff voice. The Tool has 12 areas each with 10 to 12 standards. The Tool was piloted in 2020 with some disruption from the Covid-19 Pandemic. Each year standards are chosen that help support services to think creatively where solutions are most needed. One standard is chosen per Quarter, the 2022/23 schedule is as follows:

Quarter 1: Involvement (to support systems and processes and involvement strategy in West Yorkshire, drawing on 3 years of data)

Quarter2: Meaningful Activity (to support services moving through covid restrictions to mixing of wards, to ensure activity is contemporary and meaningful)

Quarter 3: Recruitment (to support conversations and dynamic thinking around recruitment and retention of staff in a period of National crisis)

Quarter 4: Progress against actions from Q1, 2 & 3 (a co-produced slide to show quality improvement and share good practice)

Data Collection

The Involvement Standards for completion can be found here: [Involvement – Yorkshire And Humber Involvement Network](#)

Data is captured in a variety of ways from small focus groups, 1:1 paper survey or asking people to score and action plan on tablets. We have encouraged services to collect data in any way that is meaningful and achievable during covid restrictions and staffing pressures, we do acknowledge this is a variable in the data and may have limitations on representation. We are working with services in

2022 to focus on action planning collaboratively and having discussions around quality improvement, as well as capturing the quantitative scores.

Further information on the SeQuIn Tool and its intended implementation can be found here:



SeQuIn Tool
Slides.pdf

2022 Involvement Data

Two out of the three Humber and North Yorkshire Adult Secure Providers completed the Tool in Quarter 1, all standards were scored for Involvement leading to an average as follows:

Overall provider scores:

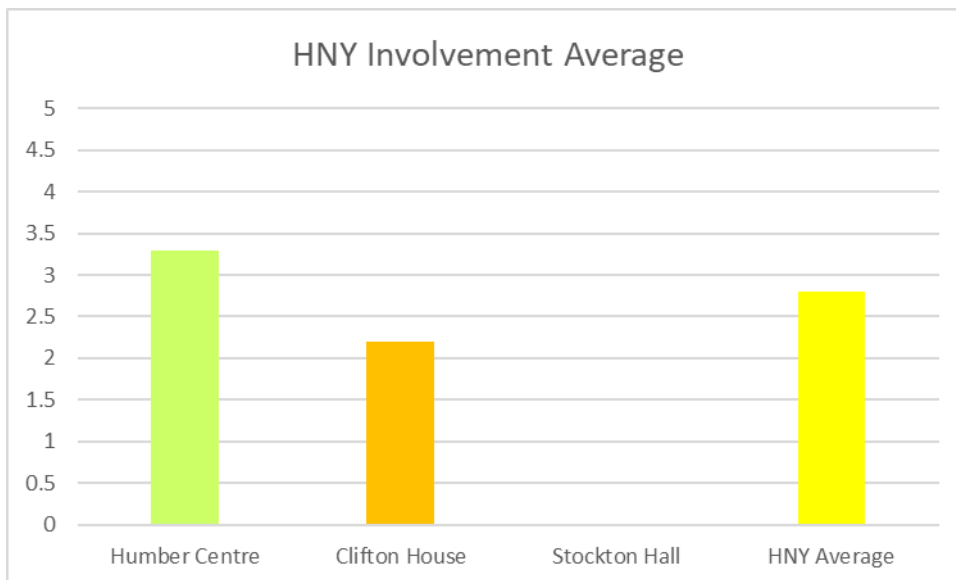
Humber Centre	3.3
Stockton Hall	0
Clifton House	2.2

(Table Q1101)

Stockton Hall did not return any Involvement standards in Q1, resulting in a zero score.

*Averages for HNY are taken only from the services who returned scores, nil returns would have lowered the overall average if included the HNY score would be an Average of 1.8 rather than 2.7.

2022 Involvement Bar Chart



(Chart Q1102)

Service scores broken down into standards:

	INVOLVEMENT STANDARDS	Humber Centre	Stockton Hall	Clifton House
1	There is understandable information available on the wards about ways to be involved on an individual and ward level	3		3
2	Policies and procedures are written and reviewed with the involvement of patients, carers and staff members and are accessible	2		1
3	There is an admission process that helps service users feel welcome and involved	3		3
4	There is a service Involvement and co production strategy covering all areas of service delivery including how the service is: Provided – Developed - Reviewed	3		1
5	There is a named person who takes a lead for involvement in the service	4		1
6	There are regular involvement meetings where the agenda is agreed by everyone involved	3		3
7	Service users have access to a choice of different ways to feedback about the service including making complaints. This feedback is used to improve the service.	4		3
8	There is an independent advocate known by name to service users, and where requested raises issues on their behalf and feeds back actions or outcomes	5		3
9	Service users and staff are informed so that they feel prepared to have a voice at different involvement events	3		3
10	Involvement meetings are attended by different members of staff including the ward manager or someone who can make decisions and come up with a plan	3		3
11	The service actively encourages people to be involved in a range of involvement groups both within and outside of the service	3		1
12	There is a way for family and carers to feedback about their experience of the service and this is used to improve the service	3		1
Service Average		3.3	0	2.2

(Table Q1103)

Standard 2 is the lowest scoring standard in HNY with an average of 1.5 and red rating.

Standard 2 asks if *'Policies and procedures are written and reviewed with the involvement of service users, carers and staff members and are accessible to all.'* This standard has scored lowest over the 3-year collection of data, services acknowledge that a lot of policies are written at trust/ corporate level and often without expert by experience input, this has not changed over that time period. This is an area to be considered by the Provider Collaborative in its workstreams and processes. We will also ask the 'SeQuIn Tool Committee' to review these standards to ensure they are achievable and if any problem solving can be done as a region.

Standards 4, 11 & 12 were the next low scoring standards with an average of 2 each, a dark amber rating.

These standards relate to co-production strategy, carer involvement and external involvement opportunities.

The Amber ratings in HNY speak to functionality, with much room for improvement around these standards and for creative and innovative opportunities around involvement and co-production to take place.

Standard 8 was the highest scoring standard in HNY at 4 out of 5. This is a green rating and reassuring figure for the standard that states, *'There is an independent advocate known by name to service users, and where requested raises issues on their behalf and feeds back actions or outcomes.'*

The only other green rating in HNY was Standard 7 highlighting that multiple opportunities to feedback or complain are given across providers.

Provider Collaborative Involvement Overall Average:

WEST AVG	3.9
HUMBER AVG	2.7
SOUTH AVG	4.1
Y&H AVG	3.4

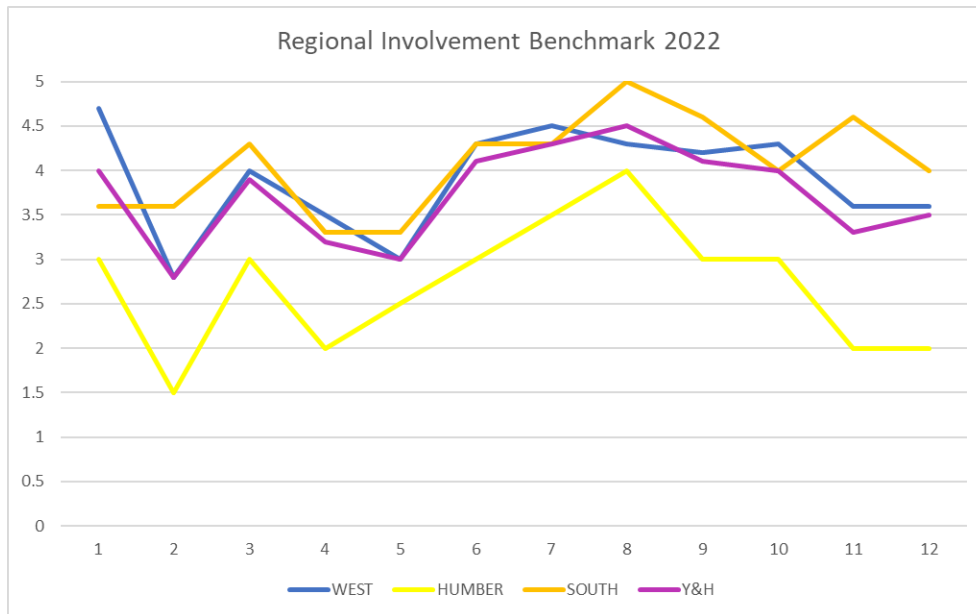
(Table Q1104)

Provider Collaborative scores broken down to standards:

	INVOLVEMENT STANDARDS	WEST	HUMBER	SOUTH	Y&H
1	There is understandable information available on the wards about ways to be involved on an individual and ward level	4.7	3	3.6	4
2	Policies and procedures are written and reviewed with the involvement of patients, carers and staff members and are accessible	2.8	1.5	3.6	2.8
3	There is an admission process that helps service users feel welcome and involved	4	3	4.3	3.9
4	There is a service Involvement and co production strategy covering all areas of service delivery including how the service is: Provided – Developed - Reviewed	3.5	2	3.3	3.2
5	There is a named person who takes a lead for involvement in the service	3	2.5	3.3	3
6	There are regular involvement meetings where the agenda is agreed by everyone involved	4.3	3	4.3	4.1
7	Service users have access to a choice of different ways to feedback about the service including making complaints. This feedback is used to improve the service.	4.5	3.5	4.3	4.3
8	There is an independent advocate known by name to service users, and where requested raises issues on their behalf and feeds back actions or outcomes	4.3	4	5	4.5
9	Service users and staff are informed so that they feel prepared to have a voice at different involvement events	4.2	3	4.6	4.1
10	Involvement meetings are attended by different members of staff including the ward manager or someone who can make decisions and come up with a plan	4.3	3	4	4
11	The service actively encourages people to be involved in a range of involvement groups both within and outside of the service	3.6	2	4.6	3.3
12	There is a way for family and carers to feedback about their experience of the service and this is used to improve the service	3.6	2	4	3.5
Service Average		3.9	2.7	4.1	3.4

(Table Q1105)

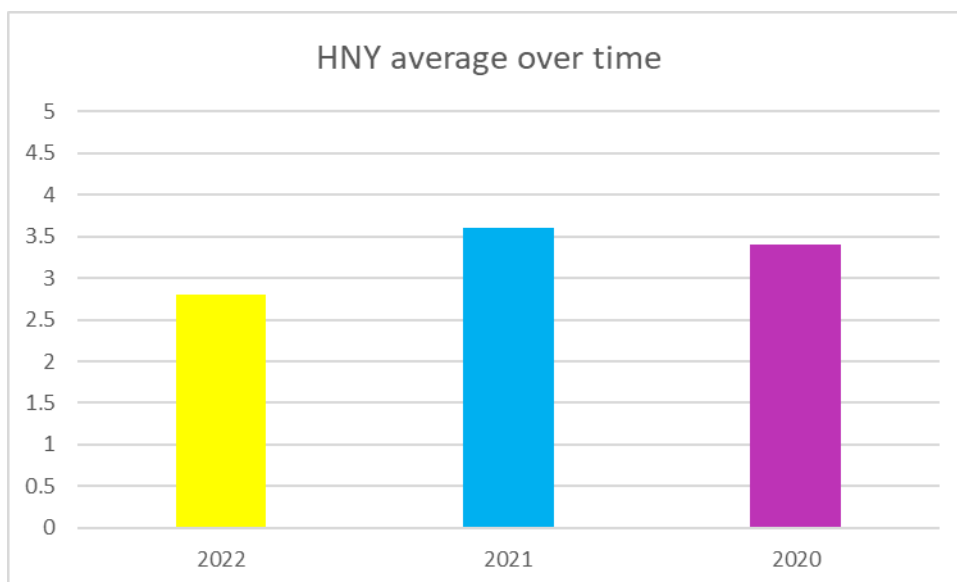
Regional Involvement Benchmark 2022:



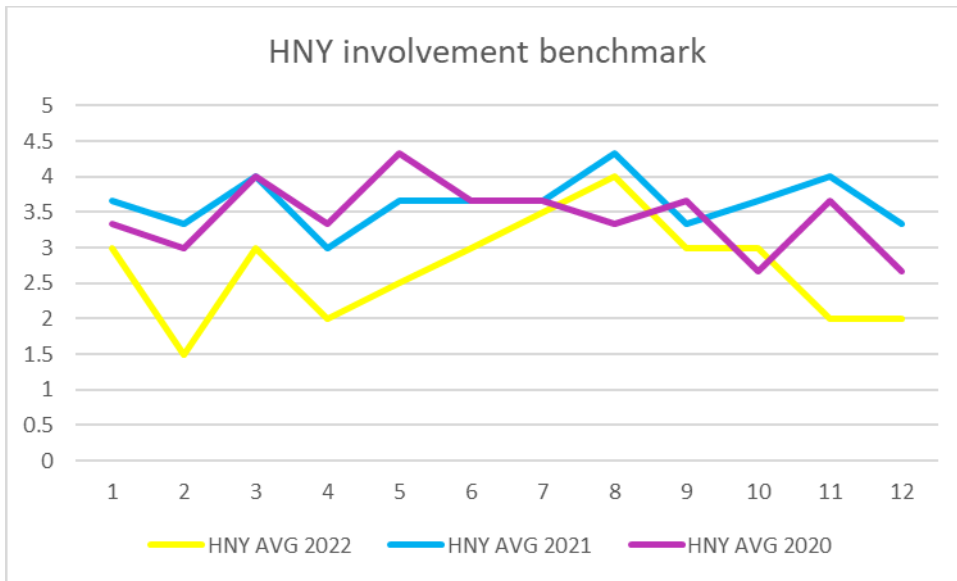
(Chart Q1106)

Humber & North Yorkshire are benchmarked against West Yorkshire and South Yorkshire in Chart Q11006. The average Yorkshire and Humber score is also shown for comparison. HNY scored lowest of the 3 provider Collaboratives on Involvement, with an overall amber RAG score and average of 2.7/5.

HNY Involvement Benchmark 2020 to 2022



(Chart Q1107)

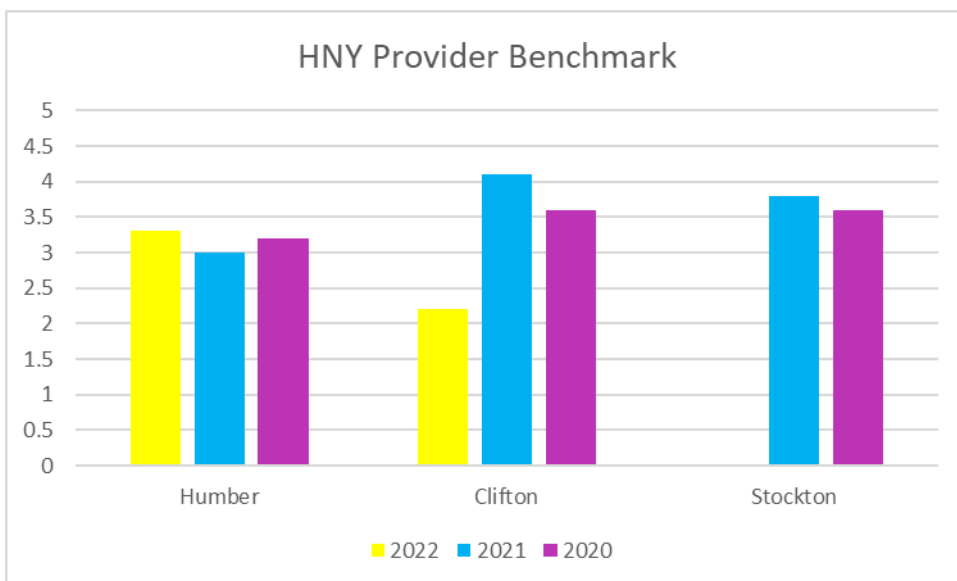


(Chart Q1108)

3-years of involvement standards data has been collected in HNY, average involvement standards have reduced in 2022 to below the 2021 and 2020 average. Covid and staffing resource implications offers some context and is highlighted in standard 11 where external opportunities are limited. Stockton Hall data could also have improved the average overall.

A significant reduction can be seen in standard 2, as previously mentioned and reflected across Y&H, showing that involvement in policy and procedure is at an all-time low. Standard 5 has reduced over time, with less named individuals/ dedicated resource for involvement identified, as has standard 4 pertaining to co-production strategy.

Dedicated resource and shared processes across the PC would give equity in approach to involvement and to ensure drive towards high standards. Involvement can help quality improvements, make sure that care delivery experience is high; by giving a voice to those who receive care, and problem-solving opportunities to those who work on the wards and implement care.



(Chart Q1109)



Clifton House has a reduced average involvement score in 2022, almost half of what it was from 2021. The wider narrative explains a change in leadership through this time and a difficult covid recovery period; standing down of some involvement processes to maintain safety and care.

Humber have maintained an amber/green RAG throughout the 3-year period, involvement is shown to be functional, but could strive to fabulous, again with more dedicated resource. A new champion model is being piloted to offer more opportunity.

Stockton Hall continues to have a dedicated lead and resource for involvement and recovery college, although standards were not submitted in Q1 of 2022 an above average score is seen in 2020 and 2021, reports of good involvement practice through the round robins and NSUA win are evident this year.

Action Plan

We suggest that each service chooses one or two Involvement standards to focus on as a quality improvement initiative in that year, again in collaboration with service users.

The services have chosen the following standards to action:

Humber Centre	4	Patient council will deliver on new strategy ‘actions speak louder than words’. Ward Managers will upkeep notice boards and ensure involvement communications are shared
Stockton Hall	-	No Action Plan Submitted
Clifton House	6 & 7	Create Agenda Boards for involvement. Photos of key people. Patients council to re-instate.

(Table Q1110)

The Yorkshire and Humber Network will also track scoring and actions through individual engagement plans and support improvements to be made.

For Q4 the Provider Collaborative have asked to see a presentation from services showing their progress on actions chosen in Q1, 2 & 3.

Recommendations/ Observations

- Involvement standards in 2022 are mainly scored amber in HNY, context can be given through a difficult three-year period owing to covid and staffing pressures
- Stockton Hall not submitting scores limits the picture given across HNY of involvement
- Clifton House’s score has fallen into dark amber highlighting the need for support and dedicated involvement resource
- There is scope within providers for creative and innovative approaches to involvement
- There are opportunities for working across providers to support involvement and co-production at a regional level
- SeQuIn Tool Review Committee to collaboratively review Involvement standards before next 3 year roll out – opportunity for HNY services to take part
- Services to review progress against actions in Q4 and collaboratively present to the PC



Quarter 2

The 'standards review committee' worked on the Meaningful Activity standards in Q1 to ensure that they were relevant and easy to read. The standards have updated to include Technology, Carers, Inclusion & Diversity.

The momentum of the 'Big Get Together' and a shift with IPC risk assessment has allowed more creative thinking around activity post covid. We hope the standards and action plan discussion will ensure this continues.

Improvements have also been made to the website following service feedback, to try and make the uploading of SeQuIn Tool scores and action plans easier.

Thank you for your continued support of the SeQuIn Tool. Please get in touch for further information.

Report produced by the Involvement Network- October 2022