

Virgin Care

Devon Quality Account

*Services delivered in Devon by
Virgin Care Services Limited*

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Part one

Executive Summary

A Quality Account is an annual report which providers of NHS healthcare services must publish about the quality of services they provide. This quality account covers the Integrated Children's Services we provide in Devon.

The services we run in Devon are delivered on behalf of Northern, Eastern and Western Clinical Commissioning Group (NEW Devon CCG), who co-ordinates on behalf of a number of commissioners in the area.

As well as showing we are committed to providing the best quality community healthcare services to children, young people and their families and carers in Devon the Quality Account is also an opportunity for us to take stock, to review what we have achieved in the year and to help us to focus our minds on how we will continue to make improvements.

We have collected a great deal of information on the quality of our services within the three areas of quality defined by the Department of Health: safety, clinical effectiveness and patient experience. We have used this information to examine how well we performed and to allow us to set priorities for the coming year.

To make sure our priorities reflect the needs of people who use services, the public generally and the community we serve we have involved different groups to help us compile this report including people who use services and community representatives, our commissioners and our colleagues.

If you would like:

- A hard copy of this quality account, or a copy in another language please contact our Customer Experience Team on **0300 303 9509*** or email **customerservices@virginicare.co.uk**
- To talk to someone about your experience of our services or would like to know how to find one of our services, our 'Here to help' team will speak with you in confidence on **0300 303 9509*** or by email: **customerservices@virginicare.co.uk**
- To give us feedback on any aspect of this document – please email **customerservices@virginicare.co.uk**, or speak to our Customer Experience Team on **0300 303 9509***

*030 numbers are charged at the same rate as 01 and 02 numbers and are usually included in free minutes bundles. If you would prefer, please send us an email or a text and we will call you back.

Service profiles

The services we provide in East Staffordshire include:

Mental Health and Well Being Services (MHWB)

Child and Adolescent Mental Health (CAMHS)
Assertive Outreach
Devon Early Help 4 Mental Health (EH4MH)
Journey After Child Abuse Trauma (JACAT)
CAMHS Children in Care
Autism Spectrum Disorder (ASD)

Children with Additional Needs (CAN)

Occupational Therapy (OT)
Portage
Rehabilitation Officers for Visually Impaired Children (ROVIC)
0 – 5 Service
Speech and Language Therapy (SLT)

Specialist Children Community Services (SCCS)

Community Children's Nursing (CCN)
Learning Disability (LD)
Palliative Care Nursing
Special School Nursing (SSN)
Complex Healthcare Team

Family Support Services (FSS)

Children's Homes – Barnes, Hillcrest, Meadowpark, Welland
Enabling Service
Multi-Sensory Impairment Service (MSI)

Public Health Nursing (PHN)

PHN Health Visiting and School Nursing (HV & SN)
PHN Children in Care
Immunisation Team – Devon
Newborn Hearing Screening

Access

Single Point of Access (SPA)

Please refer to Service description in appendix 2

Chief Executive's Introduction

Each year I am impressed at the great deal that we have achieved across our services, not only since we began delivering them but just over the last 12 months. Our colleagues work very hard every single day to deliver high quality care, but they also deliver significant improvements each year – acting not only to ensure services are running the best way they can clinically, but also taking on board more than 1,000 suggestions each year from people who use our services.

It is simply impossible for us to mention every single innovation, change or development which we have worked with our teams to deliver over the last year, but I hope you will join me in thanking everyone who has been involved in improving the services whether their project has now come to a close or continues today and beyond.

Our team, just like colleagues across the NHS, work very hard to meet patients' needs, and this year we have continued that focus on ensuring the changes we make are directly influenced by the people who deliver services and those who use them.

Our 'Feel the Difference' fund, built around our new purpose of ensuring that everyone who uses our services feels the difference, is a pot of money dedicated to implementing the good ideas our colleagues have. Quite often, we have found, the changes which can make the biggest difference are not the biggest nor the most complex.

Over the coming year, our dedicated and newly appointed Head of Transformation will lead the continued improvement of services and many of their plans are laid out in this document.

I would like to thank every single one of our colleagues for their hard work in delivering the improvements we have detailed in this report.

In putting together this publication we have sought feedback from staff and service users and I would like to take this opportunity to thank them for their input into the process. I can confirm that, to the best of my knowledge, the data and information in Parts two and three of this report reflect both success and the areas that we have identified for improvement over the next 12 months.

Bart Johnson

Chief Executive, Virgin Care.

Clinical Director's introduction

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

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

I would like to thank members of my Clinical Directorate, the local Clinical and Quality Leads and the Heads of Services for their involvement in providing the information which makes up this report. It contains many examples which show how we place an emphasis on quality and safe care, and react to patient and customer feedback.

We continue to work closely with our partners, the Care Quality Commission and other health organisations including NHS providers and the third sector to demonstrate high standards.

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

Peter Taylor

Clinical Director, Virgin Care

Regional Director of Operations' Introduction

It's been another busy year for our Devon Integrated Children's Services, with teams continuing to improve the services we provide for children and young people and their families.

We are proud to present in this Quality Account service development our colleagues have worked on in the last year and the projects to come for the year ahead.

My highlights from the past year include the continuation of our Eating Disorder Pathway and Assertive Outreach, helping more children and young people to stay at home as they receive support from our teams; the introduction of new technology to our public health nursing service and the introduction of our Single Point of Access.

This year we have continued to build relationships with other professionals who work with children and young people who use our services to ensure that we provide consistent care. We are very proud that our teams have been nominated for internal and external awards for their hard work ensuring people in Devon feel the difference.

We have also run two Stakeholder Engagement surveys and events with key partners (GP and education colleagues) .We acted on their feedback which they positively recognised within their responses to the second survey.

Thank you to all colleagues who have contributed to the work we list here in our Quality Account; we are looking forward to the exciting developments we'll be working on in the next twelve months as we enter our fifth year of delivering these services.

Jayne Carroll

Regional Operations Director – Devon Integrated Children's Services, Virgin Care

Key successes and innovations delivered in 2016-17

We are very proud of what we have achieved over the last 12 months and we would like to draw to your attention the key aspects of what we have achieved in three key areas of quality as defined by the Department of Health.

Safety/Ensuring consistency in care

The Single Point of Access (SPA) has processed more than 10,000 requests for services and processing times have been significantly improved with an average of 15 days from receipt to being accepted for a service now being achieved. The SPA has a single view of the child across all our systems including the 'Child at Risk' system, where alerts received daily from the Police are now uploaded into clinical systems and appropriate workers notified automatically.

In ROVIC, we introduced a new CVI (Certificate of Vision Impairment) registration card in plastic 'credit card' format and these are now issued to all visually impaired and deafblind children in Devon to enable

In our Children's Community Nursing Service we completed the development of an Oxygen Weaning pathway and piloted it successfully in the community. We are now introducing the new pathway over the next 12 months.

In our Learning Disability Team we have begun a campaign among local health and care services to raise awareness of the Mental Capacity Act, ensuring children and young people have the same rights and values as others.

In Speech and Language Therapy, we now have access to mobile working devices, with one member of each team trained as a 'power user' to handle colleagues' queries. This has greatly increased our efficiency and aided information sharing.

To help provide a consistent service in Occupational Therapy, we have begun triaging referrals centrally with our 2 band 7 clinicians working together to ensure they are always consistent and we provide written guidance when a referral is rejected. The guidance on the prioritisation of referrals has been reviewed, based on feedback, to ensure the whole service across Devon has a shared view of who should have the highest priority.

In our CAMHS service, we have expanded the Crisis Response Service from 5pm until 9am weekdays and on public holidays and weekends. The service now has consultant medical staff available throughout the day and night for mental health act assessments and to provide support to young people who have self-harmed during the week by assessing them in paediatric wards and, where safe to do so, discharging them to a safe environment.

In our Public Health Nursing Service we have fully implemented mobile working through a mobile working platform and iPad digital tablets, allowing health visitors and school nurses to better keep records and release more clinical time.

Clinical Effectiveness

The SPA enables a holistic view of children and young people using the services by checking all elements of a case at the point of referral – to allow a more informed decision to be made about children at the point of accepting a referral.

In our Children's Community Nursing Service we have introduced a geographical service delivery model increasing the effectiveness of our use of clinical resources and improving local knowledge of colleagues delivering services. We have also introduced a 'duty' system allowing families to speak to a nurse between 9am and 3pm for urgent issues, facilitating fast access to nursing support for families/professionals and provide consistent cover for the service caseload.

In our Learning Disability Team, we have had increased demand for placements from the University of the West Of England for Learning Disability Nursing students.

In Speech and Language Therapy, we have offered training to all schools and delivered it to most. This includes training in Vocabulary Development, Narrative Therapy and concept development. Schools also continue to receive training on supporting children and young people with speech sound difficulties.

In our Occupational Therapy Service, we have reduced the delay to access assessment and reduced our waiting list numbers. We achieved 92% of referrals being seen within 18 weeks by the end of March 2017.

In our CAMHS service, we have continued development of the eating disorder pathway. The pathway is used as an exemplar by NHS England and NICE since it was introduced in 2015, in keeping children and young people at home, reducing mental health bed use and improving outcomes.

In our Children in Care team, we are now using secure electronic record keeping for writing up clinical work. This ensures children and young people's health records are accessible to other health professionals seeing the same child.

In our Enabling Service, we have introduced ASDAN (Award Scheme Development and Accreditation Network) programmes to help children and young people to be enrolled on and work towards various short courses and awards in a range of subjects.

In our ASD diagnostic service, we have introduced an electronic tracking system for all cases sent to our service allowing an effective monitoring of the Child's Journey through the service and allowing oversight of performance at each stage. We have also improved the pathway from referral to outcome, and introduced a new system to ensure urgent cases were prioritised.

Experience of people who use services

In our services for 0 – 5 children with additional needs, we have reviewed the service model to bring services into the community and increase the number of children we have capacity to assess. We have also added new facilities, like water coolers, to our assessment venues to make services more comfortable for people who use them.

In ROVIC, we introduced skills development training sessions for children and young people which had been requested by families. These sessions help at the point of diagnosis to support parents and maximise visual potential.

In our Learning Disability Team, we have continued to develop our materials to ensure they comply with 'easy read' rules, and reflect the voice of the child and young person.

Toolkits are now available through our SPA website for parents, carers and other professionals to access early help support and implementing strategies and recommendations suggested with their children before a referral, or while they wait to be seen providing children with support earlier.

In our Occupational Therapy Service, all teams now offer workshops to support parents and school staff of children with sensory needs and parents are made aware of the service being offered prior to attending their assessment to help manage expectations.

In our CAMHS service, the 'Early Help 4 Mental Health' service continues to support schools to help their students with early help mental health input. Our colleagues deliver high quality supervision and training for school staff so they can support young people to access support.

Our Special School Nursing Service have developed and introduced a standardised and accredited programme of training for special school staff and their partner agencies in delivering medical intervention.

Our Children in Care Team (PHN) have developed and introduced a third version of the Health Passport, a small handheld booklet recording immunisation history and birth details as well as providing crucial health information.

Following a positive trial of the breastfeeding support groups at Lloyds Pharmacy branches in Exeter, we have expanded this to 4 clinics across Devon. Devon achieved the highest level of breastfeeding (54.5%) at 6-8 weeks in the South West region during quarter 2 of 16-17.

In our Multi-Sensory Impairment Service we supported a young person to complete their Duke of Edinburgh award, developed our colleagues to expand the service we can offer and delivered a 'family day' in December 2016, offering people who use our services the chance to give us feedback and network with one another.

In our Enabling service, we have introduced a newsletter for our families so they know more about how the service runs and the support on offer. This was responding to a request from families for improved communication.

In our ASD diagnostic service, we have introduced care co-ordinators who can provide direct support and advice to families on the phone, in the home or by attending Team Around the Child meetings.

In our Children's Homes, we decorated young peoples' bedrooms to make them more homely and comfortable, provided scrap books for children and young people to give us feedback on the service, and improved our outdoor equipment and resources.

In one of our homes, we introduced child's voice meetings this year for children and young people to feedback on the service using their preferred method of communication, providing thoughts and feelings about subjects on an agenda they set themselves.

Part two

Achievement of priorities for improvement in 2016-17

Achievement of priorities for improvement in 2016-17

Our core objective is to be the best community-based provider of care, ensuring that everyone feels the difference – but each year we also identify themes and goals for specific improvements across our services in Devon.

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

- We have achieved month-on-month increases in compliance with safeguarding training, launched a new Safeguarding Adults Level 2 and Safeguarding Children Level 1 eLearning modules via our online learning platform MyLearning, introduced a safeguarding network, launched the 'Safeguarding Information Pack' for new services or colleagues new to the safeguarding role and updated our incident reporting system to enable easy tracking, learning from and closure of safeguarding incidents. The team also began (and continue) a review of national reports and their implications for Virgin Care Limited, this includes: Savile, CIIPOLD, Francis and Winterbourne reports. This is in addition to new information sharing tools made available through Jam (our Intranet) which launched this year and easier-to-use guides for colleagues on safeguarding.
- Our Single Point of Access Team (SPA) have improved the quality of referrals received into the service by providing better information for referrers, improving responsiveness in the decision making process and in the services accessed following a referral being received. We have produced and distributed a 'good referral guide' for GPs and other referrers to advise on the options they have, and this is available both online and via GP clinical systems. In addition, the SPA means we are able to better monitor incoming contacts – telephone calls are recorded and regularly reviewed to ensure quality, and all calls are recorded on our system allowing better oversight of the types of calls we receive. An analysis in January 2017 showed 87% of calls were being answered within 30 seconds.
- In our service 0 – 5 Service for children with additional needs, we have reviewed our service and how it works with our service users. We have listened to feedback, incorporated the things we have learnt into our processes and introduced two work-streams to review and implement more robust and clearer versions of our policies. A change to the way our service works also means we now work with families in their homes, which parents say make them feel more like they're being listened to.
- In our Children's Community Nursing Service we have re-designed the service geographically, and introduced a new 'duty' system allowing families more consistent, easier access to services. The geographical model allows for local knowledge of nurses providing services to be used to make the service more efficient and effective.

- In our Learning Disability Team, we attended the Positive Behaviour Support 'train the trainer' day so that all of our nurses are trained in 'what good looks like' and can inform the Learning Disability Service Development Plan for 17-18. All of our colleagues have also qualified in 'Team Teach' (a strategy to de-escalate challenging behaviour) and were signed off as competent by us, achieving extra knowledge, skills and understanding. The service is also working with Child and Adolescent Mental Health Services (CAMHS) colleagues to improve the Mental Health Pathway; the team are also supporting the local acute hospital with admissions, assisting medical care and have identified an opportunity to up-skill acute hospital colleagues to do some of this work themselves and more effectively meet the needs of children and young people with learning disabilities.
- In our Palliative Care Nursing Service we have reviewed the Devon Palliative Care Pathway to ensure it complies with national recommendations. Our 'Feel the Difference' target of increasing access to nursing services has been achieved through re-designing our service geographically, providing more efficient services and introducing a 'duty nurse' system.
- In our Speech and Language Therapy Service (SALT), we have completed introducing robust evidence-based pathways for language, speech, stammering, voice difficulties meaning a consistent service across Devon. This has been supported by the introduction of a comprehensive induction specific to SALT in addition to the company-wide induction: this makes sure colleagues are familiar with training in Parent-Child interaction, awareness of the Let's Talk More programme for 2 year olds and shadowing of specialist colleagues to develop further skills.
- In the Occupational Therapy Service, we have implemented outcome measures and from April 2017, we will seek feedback from parents and children consistently on the impact that the service's input has had; we have rolled out our Sensory Workshop and Sensory Pathway across all of our teams in the area and parents are made aware of the service prior to attending their assessment to help manage their expectations.
- Our CAMHS service has continued to promote Improving Access to Psychological Therapies (IAPT), using routine outcome monitoring of clinical work and working with CORC (Child Research Outcomes Consortia), the CAMHS research consortia and other CAMHS services in England, to find ways to increase and sustain the use of these measures while making them meaningful to clients. We are one of few providers of CAMHS nationally to align our pathways to evidence-based practice.
- In Special School Nursing, we have introduced a geographically-based delivery model which has allowed more effective use of nursing resource across Devon and allowed patients to have access to a Children's Community Nurse during school holidays. Closer working between nursing teams has also improved continuity of care.
- Our Children in Care Team have developed and introduced a third version of the Health Passport, a small handheld booklet recording immunisation history and birth details as well as providing crucial health information. The service has also recruited four new Children in Care nurses, supporting the existing team to see all over the age of five for annual health reviews. This change ensures services are more consistent, and allows time to build a trusting relationship between children and the nurses they see.
- In our Public Health Nursing Service, we worked in partnership with Action for Children to build on existing relationships and enable some reduction in processes to provide better care for children and young people. We also introduced sleep clinics in South Devon, to

achieve significant success for families and we'll roll out this model across Devon in the future, following an evidence-based training programme.

- In our Enabling service, we have introduced an ASDAN (Award Scheme Development and Accreditation Network) programme to allow young people to work towards programme which are nationally recognised and work towards clear outcomes and achievements which can then be celebrated. This ensures the activities are planned ore clearly structured to meet the young person's needs.
- In our ASD diagnostic service we have benefited from the introduction of the Single Point of Access, giving a direct point of contact for families. We have also introduced more face to face engagement with families, increased our attendance at 'Team around the Child' (TAC) meetings and revised our assessments to ensure they comply with the most up to date NICE guidance. We have used feedback from people who have used the services to inform how we develop the service, and we have managed our waiting list by ensuring only those appropriate for the service, and who will benefit from an assessment, are accepted.
- In our Children's Homes, we introduced an accessible interactive sensory garden, built relationships with other providers to ensure the team around the children who use our service are at the centre of our thoughts and introduced focus groups for children and young people to develop skills like moving and handling, sensory needs, communication and diet. We also improved our planning for holiday time, giving a more structured opportunity for children staying with us during school holidays. We had a 'major push' on using feedback from young people, families and carers this year, and on implementing the changes they suggest. The feedback has enabled us to see where the service we provide can be improved and enhanced, and means we have more information about how each stay went from the perspective of our guests.
- During 2016/17 our Children's Services were inspected by NHSE for adherence to the national Emergency Planning Resilience and Response Core Standards. As part of this process we provided evidence to demonstrate the areas where we are compliant and outlined the work that we are doing towards maintaining and improving our resilience and achieving full compliance. We were pleased to be judged as substantially compliant with the core standards.

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

- Jam (our Intranet) launched during 2016-17 and has grown from strength-to-strength since as a crucial part of our governance, safeguarding and assurance process. The platform has had 6,500 unique users since launch, with 1,100 unique visits each week day. More than 700,000 documents have been downloaded from the platform – which acts as a central point for policies and procedures, as well as offering local standard operating procedures for colleagues. The Jam Panel, made up of a variety of stakeholders from the organisation, oversees the governance of the platform and sets the direction for improvements and changes – and includes governance reviews in the day-to-day running of the system.
- In our Single Point of Access service, our clinical team is now in placing triaging referrals for risk, prioritising for specialist clinical screening and liaising with referrers where the quality or information being supplied in a referral is insufficient for effective decision making.

- In our Learning Disability Team we have reviewed our processes against NICE guidance for 'Mental health problems in people with learning disabilities: prevention, assessment and management'.
- In our Speech and Language Therapy Service, we have linked with other Virgin Care services providing similar solutions to identify ways of working together to improve services and benchmark performance, and improved safeguarding supervision as part of our operational and team meetings.
- In Occupational Therapy Service, we have introduced a 'consistent' referral process by centralising the process and ensuring our two referral processing colleagues work together wherever possible; we have also introduced a review of restrictive practice where our OT professional Leads attend the monthly committee to review how equipment which requires risk assessment, and we have drafted a new policy for working with this type of equipment.
- Our Children in Care team have continued to scrutinize the monthly exception report to identify why any individual health review has not been completed, and issues are being raised at the multi-agency, Devon-wide Children in Care Operational Group, action plans produced and implemented by all relevant providers. We have also introduced an update health assessment – this is a short review of their health in the three months after a child's statutory review and to monitor if actions have been completed.
- In our Public Health Nursing Service, our Immunisation team have worked in partnership with users to improve the uptake of school-aged immunisations and to improve the experience of children and young people. The team have also introduced an iPad to immunisation sessions, allowing people who have used the immunisation service to give feedback through the Friends and Family Test. We have also completed a number of 'deep dive' research projects to identify differences in services between areas of Devon. This work will feed into commissioners' work to re-procure the service in the future.
- In our ASD diagnostic service we have improved our risk assessment at referral, and now attend more multi-agency meetings which better informs our decisions.

Priority 3: Continue to be recognised as an outstanding employer

- At our training arm The Learning Enterprise, we launched our new learning and development platform to help our colleagues in Devon access first class e-learning training using their day-to-day computer logon and support our colleagues to be their very best.
- We launched Management Foundations – a programme designed to help our new or inexperienced managers become great managers. We helped managers get off to a great start and overcome new-manager challenges by giving them the essential skills they need to balance relationships with results and understand how things are done in Devon.
- We launched Mind Coach - the two part training programme uses the science behind positive psychology to look at mind set and resilience and what colleagues need to bring their best selves to work. The module is delivered via a 30 minute e-learning course and followed up by a face to face half day event. The first events were delivered to approximately 75 colleagues in early 2017 in Devon, Midlands and Surrey and will be rolled out further in 2017 following train the trainer events scheduled for March 2017.

- We continued our Type Coach courses - this learning and development module forms part of our customer service training and uses the foundations of Myers Briggs (MBTI) to give colleagues insight into their personality type preferences. The module aims to help colleagues understand the person in front of them so they can tailor their communication style to that person's needs. More than 2,000 colleagues have been through Type Coach already.
- We introduced the My Wellness platform giving colleagues access to a wealth of support and advice to help keep them well. Launched in January 2017, within a month the platform had 10% take up among our national colleague cohort. My Wellness is part of Virgin Care's commitment to improving colleagues' health and wellbeing. Designed over the last six months, Virgin Care has worked alongside 200 colleagues to co-design the programme to help keep more than 7,000 colleagues happy and healthy. In the first two weeks after launch more than 400 new users had joined the 200 testers on the platform. More than three quarters (76%) of people surveyed said MyWellness would make Virgin Care a better place to work.
- We launched our 'Arrivals Packs' which welcome new colleagues to the business with all of the information they need. We were shortlisted for the Brand of the Year at the Employee Engagement Awards 2016 for the packs.
- Arrival Events launched alongside the arrival packs this year, after a trial during 2015-16 noted in last year's QA. The events give a warm welcome to new starters, inform, equip and inspire new joiners to the Virgin Care way. The events take place throughout the year with extras during April and May when we on-board thousands of new colleagues in new services.
- In our Speech and Language Therapy Service, we have introduced a rotational post where community therapists spend six months shadowing highly specialist colleagues, this increases job satisfaction and ensures succession planning is in place.
- Our Big Thanks events were a huge success with more than 1,800 colleagues attending this year (our biggest ever) and making up around 37% of eligible employees. 82% said the events made them feel more part of Virgin Care.
- Our Little Big Thanks party pack helped more of our colleagues hold local events. Each pack included a £25 Tesco voucher for food, a selfie-kit and seasonal quiz. More than 500 packs were sent out with around 4,500 colleagues taking part in a Little Big Thanks.
- We began rolling out our purpose-designed uniform for colleagues and name badges having consulted with hundreds of our colleagues across the country. The uniform will be rolled out over the coming year.
- In our Single Point of Access Service, all of our colleagues have received additional training in Positive Psychology and Emotional Resilience; colleagues have also had the opportunity to take up secondment opportunities in other services, while working in the SPA to enhance their knowledge.
- In our Occupational Therapy Service, we have developed our colleagues' skills by facilitating co-working in assessment clinics, supporting the cascade of knowledge and skills and building confidence among our team; we have also ensured all of our teams have had the chance to run a team building day each year and where it is identified that our colleagues require specialist equipment to do their job, we are supplying it quickly.
- In CAMHS, we are proud that our turnover of colleagues is very low and people stay with us for a long time, providing us with good feedback as an employer through our staff survey. We have clear, consistent and centralised approaches to recruiting and a senior manager with a clinical background in delivering the services he manages.

- In the Children in Care Team, we have introduced a specialised service-specific induction to help continue our low turnover of colleagues.
- All new staff within Family Support Services & Complex Health Care receive an extensive Induction over 3 days which is part of their mandatory training before they start supporting young people and their families.

Priorities going forward in 2017/18

Continuing to demonstrate service quality and safety remains a top priority over the coming year but we have also identified other areas where we can make improvements to the services we deliver to ensure that everyone who uses them and works to provide them feels the difference.

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

- We will finish our roll out of Child Protection-Information Sharing (CP-IS) as our implementation group continues to work with NHS Digital to ensure all of our unscheduled care settings are live by the national deadline of March 2018. We will achieve full implementation ahead of the deadline.
- We'll deliver the recommendations in the action plan from the CQC Not Seen, Not heard report (July 2016) and introduce an anonymised safeguarding activity log for our Sexual Health Services which accurately report the volume of safeguarding work our colleagues complete in these services and assist colleagues in identifying when an adult is at risk of harm and may need referring to an external agency.
- In our Single Point of Access Service, we'll further develop our links with Devon County Council to ensure seamless continuation of care for children and young people no matter who is providing the individual services.
- In our 0 – 5 Service for children with additional needs we will complete our re-alignment to work in the community and with children in their own homes. We'll continually update our stakeholders as we work through this process.
- In our Children's Community Nursing Service we'll work on developing a new model of supervision to enhance the clinical development of our teams and to better assure ourselves of clinical standards.
- In our Learning Disability Team we will develop a pathway with Positive Behaviour Support at its core, including work with colleagues in social care services and in the children's homes which Virgin Care Limited delivers.
- In our Speech and Language Therapy Service, we will change the service delivery to ensure waiting lists are reduced and children are all seen within 18 weeks of their referral being accepted. This will include developing the early help offer, continuing to deliver core training programmes for schools, introducing flexible working across teams to allow us to move capacity from one area to another to better meet demand as it changes and continuing to robustly triage cases to ensure those children and young people with the most complex need are seen first.

- In Occupational Therapy, we'll review our sensory pathway and our adaption pathway to ensure they are working in the most efficient, effective ways and minimising re-referrals into the services; we'll update our website with more detailed information on how these pathways work and how people can access support.
- In our CAMHS service, we'll continue to embed consistency in how 'routine outcome measures' are used in the service, develop new CAMHS roles to enhance our workforce and continue to introduce changes as a result of learning from inspection, internal reviews and feedback from people who use our services.
- Our Special School Nursing Service will review all of our Standard Operating Procedures to develop new clinical guidelines and ensure all practice is based on the latest, most up-to-date evidence base. This will include training materials and competency assessment documents for registered and unregistered practitioners and carers.
- The Children in Care team will deliver an electronic version of the health passport, as requested by care leavers in Devon. This would allow young people to have access to their health information, whilst also retaining confidentiality. We are working with Virgin Care Services Limited's Children in Care team in Wiltshire to deliver this improvement.
- Over the coming year, the Public Health Nursing Service will develop 4 business support and management hubs which will process all of the service's administrative work. This will include scheduling using the mobile working platform to ensure nurses follow efficient routes, and allowing more efficient running of the service. This will enable the development of clearer pathways and provide contact points for GPs and other professionals to access the Public Health Nursing Service.
- In our Enabling Service, we'll continue to roll out the ASDAN (Award Scheme Development and Accreditation Network) programme and introduce celebrating evenings for young people and their families.
- In our ASD diagnostic service we'll introduce a new model – known as JADES (Journey of Autism Diagnosis and Early Support) which has been co-designed by Virgin Care nationally with families who have used similar services, to improve ASD diagnosis services and improve the user experience.
- In our Children's Homes we will involve young people more in improving the transition to adult services at age 18.
- In our Multi-Sensory Impairment Service we will develop opportunities for young people with a range of needs to have more opportunities to mix with their peers and develop relationships with others. We will ensure our colleagues have the appropriate training to meet the needs of individual children and young people they are supporting and we'll continue to request feedback so we can continue to improve the service.

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

- Our Medicines Optimisation Team will launch their five year optimisation strategy for 2017-2021, and continue to refine their annual audit so that it includes the latest principles of medicines optimisation strategy.
- In our Single Point of Access Service, we'll begin to flag on clinical systems when a child

protection plan is in place for a child meaning our clinicians are better informed and able to support one another. We'll also introduce co-ordinated screening of referrals across multiple services, where a need is not immediately pointing to a particular service as being most appropriate.

- In our Children's Community Nursing Service we'll review our Standard Operating Procedures (SOPs) to ensure new guidance has been accounted for. This includes reviewing all training materials and competency assessment documents for both our registered and non-registered practitioners.
- In our Learning Disability Team we'll develop a pathway for children with a learning disability and Mental Health needs to ensure that the mental health needs of young people with a learning disability are supported within a multidisciplinary arena.
- In our Speech and Language Therapy Service, team leads and those who supervise colleagues will attend Level Six Safeguarding Training and share their learning and we'll implement a multi-disciplinary triage/screening system to ensure children and young people are getting the help that is most appropriate for them.
- In our CAMHS service, we will move towards using clinical pathways aligning services with evidence-bases and enabling detailed audit of outcomes. This is a significant and complex undertaking, but we are confident that our pilots with Eating Disorder Services and Managing Mood in Eastern CAMHS will have positive results across Devon.
- Our Special School Nursing Service will run a rolling programme of training across the county alongside our Public Health Nursing colleagues for education colleagues to access all level of training relating to children's health needs in schools.
- In our Children in Care service, we'll introduce an updated version of the Adoption Standard Operating Procedure ensuring electronic records are used, and appropriately secured.
- In our Public Health Nursing Service, we'll work to improve secondary schools and to change the delivery model to ensure that it is appropriate and targeted at achieving the best outcomes. We'll also introduce 'Chat Health' – a text messaging service to allow children and young people to contact a public health nurse – increasing access to school nursing advice. We will also be reviewing our 0-5 years healthy child clinics and we'll engage with our customers to refresh the current model again with the aim of increasing access and improving health outcomes.

Priority 3: Continue to be recognised as an outstanding employer

During 2017-18 we have got plenty more to do to continue to be recognised as an outstanding employer.

- During 2017-18 we'll extend our Feel the difference awards (see part 3) by encouraging nominations from people who use services. We'll launch the initiative in Spring 2017 in all of our services, encouraging people who use services to highlight and feedback on occasions where they've seen exceptional service and our senior leadership team will hand out the award monthly.
- We'll hold further Big Thanks parties for colleagues in December, and a revised Little Big

Thanks will once again ensure more colleagues can celebrate the good work they've done together locally.

- We'll roll out our purpose-designed uniform covering every type of service we operate and ensuring our colleagues are proud of what they wear.
- In our 0 – 5 Service for children with additional needs we'll continue our policy of reviewing our staffing as a whole when someone leaves, rather than simply replacing one person doing one job with another – this creates opportunity for development for our existing colleagues.
- In ROVIC, we'll promote the 'Good Referral Guide' to ensure appropriate referrals into the ROVIC Service.
- In our Learning Disability Team we'll introduce a Parent/Young Person forum which will input into the continued development of the service, ensuring the voice of the young person with learning disabilities is heard and is part of the development of outcome frameworks.
- In our Speech and Language Therapy Service, we'll continue our in-house CPD programme including Share and Learn Sessions through which specialists share their knowledge, skills and updated practice with their colleagues. Planned sessions include a focus on autism in girls, and supporting pre-school children with complex needs.
- In Occupational Therapy, we'll review our workforce and ensure we create opportunities for development and complete succession planning and we'll develop a training plan for the service, ensuring the whole service will have an appropriate skill mix and create new opportunities for colleagues to attend local and national training.
- In our CAMHS service, we continue to build Virgin Care's reputation as an employer and provider of CAMHS services in order to attract new talent. This is being achieved through a combination of methods, including a comprehensive CPD (Continuing Professional Development) programme and reacting to feedback from our annual staff survey.
- As we continue to develop the Devon Health Visiting in Partnership (DHViP) programme and continue to publish and promote our service through this. Further work is needed to improve how we measure outcomes and all health visitors will be required to engage with a minimum of one family on the programme and details will need to be entered into the new Right for Children multi-agency database to support the early help agenda.

Over the next year we'll also introduce the BETTER Map Experience based on analysis of complaints, feedback from people who use services and best practice. We have designed a clear proposition for how people who use services should experience them.

The BETTER map looks at six key stages of the experience of people who use services, from booking an appointment to receiving results or attending a follow-up appointment and identifies the worries people may have before each interaction, what they need from us at each stage and how they want to feel if we do it right.

Initial consultation sessions are running as this report goes to print, but the BETTER programme will be launched through a series of tools and resources in 2017-18.

National Clinical Audit Participation: Community Services

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

- Mental Health Clinical Outcome Review – National Confidential Inquiry into Suicide and Homicide (NCISH) – University of Manchester

National Safeguarding Audit

Virgin Care completed a safeguarding audit across all of its services in 2016-17 based on the Children's Section 11 and Adult Safeguarding Self -Assessment Tool (Best Practice).

The audit focused on seven areas relating to safeguarding governance:

- Safer recruitment and selection of colleagues
- Management of complaints, allegations and whistleblowing
- Leadership and accountability
- Staff induction, training and development
- Information sharing, communication and confidentiality
- Listening to children, young people and adults
- Equality of opportunity

The safeguarding audit did not identify any significant concerns or risks across the organisation and:

- 100% of services completed the safeguarding audit
- 76% of safeguarding audit action plans completed
- 93% of safeguarding actions RAG rated green (closed)

Local audit programmes

Across all of our services we also ran a core audit programme internally, which included: In ROVIC, we completed an audit of CVI and deafblind registrations and record cards to demonstrate compliance with our statutory duties and commissioning.

In our Speech and Language Therapy Service, we have completed audits to confirm the appropriateness of videofluoroscopy referrals, response times, clinical outcomes and parental views of the effectiveness of the investigation. We have also submitted data to the audit of effectiveness of the use of Complexity in Phonology approach to supporting children with speech sound difficulties.

In our Single Point of Access Service, we audited the locality pathway meetings to establish how many referrals are discussed at the multi-agency meeting have an outcome of signposting to a partner organisation.

In Occupational Therapy, we completed an audit of whether children and parents felt involved with setting goals in the service, whether they had been achieved and whether parents and children felt the service had contributed. 68% said their views were listened to, only 1% thought their goals had not been met and 84% said the OT service had a positive impact.

In CAMHS, we also took part in the DAWBA National Study.

Our Special School Nursing Service has completed an audit of medication administration in special schools, allowing us to build a baseline for targeting medication training and completing competency assessments.

Research Statement

Robust research governance is essential to ensure that customers, colleagues and members of the public can have confidence in, and benefit from, quality research in health and social care. We support high scientific, ethical and financial standards, transparent decision-making processes, clear allocation of responsibilities and robust monitoring arrangements. The dignity, rights, safety and wellbeing of participants must be the primary consideration in any research study.

A core standard for health care organisations is that they have systems to ensure the principles and requirements of the research governance framework are consistently applied. At Virgin care we achieve this through our Research Governance Committee that meets quarterly and has a membership made up of clinical expertise.

Current research activity in Devon

We currently have the following programmes on our Research Database which are either in progress or due to commence shortly:

- Mindfulness for young people with recurrent ruminations (Jerry Fox)
- Olanzapine Study in Children with Anorexia Nervosa (Randomised Trial, OSCAR Trial) – Dr Vicky Hill.
- Catch-us (Children and adolescents with ADHD in transition between Children’s Services and Adult Services. The primary outcomes for the qualitative study are facilitators and barriers to good transitioning. It is believed that the findings of this study will have the potential to inform policy and practice via local commissioning decisions / guidelines, local practice/service delivery as well as national and international guidance.
- Evaluation of a small scale pilot project of brief parent-young child psychotherapy with 2-5 year-olds. To be better informed as to how Eastern Devon CAMHS service could support local young children and their families where there are concerns around the child’s mental health. Specifically, to know whether it would be worthwhile further investigating the feasibility of a parent-young child psychotherapy service within Eastern Devon CAMHS.

We also have a number of staff engaged in research projects of various types, as part of postgraduate studies. Our partners in these studies include University of East London and the University of Exeter.

Publications

Structured Supported Feeding Admission for restrictive eating disorders on Paediatric Wards (BMJ May 11th 2016).

Raising the bar - Devon Health Visiting In Partnership Programme (DHVIP) (Community Practitioner’s & Health Association Journal May 2017).

Statements from Regulatory Bodies

Care Quality Commission (CQC)

Many of our services are required to register with the Care Quality Commission (CQC) and our current registration status is registered with the CQC with no conditions attached to our registration.

Our services have not participated in any special reviews or investigations by the CQC during the reporting period.

Full copies of CQC reports are available on the CQC’s website at www.cqc.org.uk.

Registered provider	Service Name	Full Compliance	Action plan and Status
Devon Integrated Children's Services – Virgin Care (January 2017)	All Services	Overall rating 'Good'	Action Plan under development

Registered provider	Service name	Type of # inspection	Overall effectiveness	Outcomes for CYP	Safeguarding	Leadership and management
Virgin Care Limited	Children's Home Welland House (26 Aug 16)	Full	Good	Good	Good	Good
Virgin Care Limited	Children's Home Meadow Park (26 Aug 16)	Full	Good	Good	Good	Good
Virgin Care Limited	Children's Home Barnes (13 May 16)	Full	Requires improvement	Requires improvement	Requires improvement	Requires improvement
Virgin Care Limited	Children's Home Hillcrest (13 May 16)	Full	Good	Good	Good	Good
Virgin Care Limited	Children's Home Welland House (12 Jan 17)	Interim	Sustained effectiveness			
Virgin Care Limited	Children's Home Meadow Park (16 Feb 17)	Interim	Sustained effectiveness			

Virgin Care Limited	Children's Home Barnes (9 Feb 17)	Interim	Sustained effectiveness			
Virgin Care Limited	Children's Home Hillcrest (15 Feb 17)	Interim	Sustained effectiveness			

Independent Service Reviews (ISR)

Each of our services is required to complete an 'independent service review' twice a year, with no longer than 6 months between reviews. Each ISR is completed by a manager of another of our services and results logged using our internal platform.

The reviews are designed to cover the same areas as a CQC inspection, and produce a rating based on the same scale as the CQC use. In Devon the following ISRs took place, and we have outlined their findings.

Service name	Outcome of ISR	Action plan
June 2016		
Children with Additional Need	Well led – Requires improvement Safe – Requires improvement Caring – Good Responsive – Requires improvement Effective – Good Overall – Requires improvement	Yes – Fully complete
Family Support Services	Well led – Good Safe – Requires improvement Caring – Outstanding Responsive – Good Effective – Good Overall – Good	Yes – Fully complete
Public Health Nursing	Well led – Good Safe – Good Caring – Good Responsive – Good Effective – Good Overall – Good	Yes – Fully complete

Specialist Community Children's Services	Well led – Good Safe – Requires improvement Caring –Good Responsive – Good Effective – Requires improvement Overall – Good	Yes – Fully complete
Child and Adolescent Mental Health Services	Well led – Requires improvement Safe – Good Caring –Good Responsive – Requires improvement Effective – Good Overall – Requires improvement	Yes – Fully complete
November 2016		
A format of self-assessment was used for the November 16 Internal Service Review. All services developed an action plan based on a review of their findings for local review.		

In addition to this programme we work in partnership with our commissioners. This included their visit to our Single Point of Access service in September 2016 to provide an external review of quality and their recommendations which we included in our action plan.

Safeguarding Statement

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

- National Safeguarding Assurance function working across localities and partnership boundaries to respond to national developments, legislative changes leading to continuous improvement and learning across the organisation
- Our Clinical Governance and Safeguarding Committees provide Board assurance that our services meet statutory requirements
- Named professionals are clear about their roles and have sufficient time and support to undertake them
- Where appropriate, services have submitted a Section 11 Review
- Action plans are monitored across the organisation at committee and board level
- Safeguarding policies and systems for children at risk are up to date and robust
- Safeguarding training is included in induction and integral to the organisation's training policy

Within Devon Integrated Children's Services (Devon ICS) there is a dedicated Safeguarding

Children team .The team comprises of a Named Nurse, Associate Named Nurse and a team of specialist safeguarding nurses and business support. The Health in MASH team is staffed through our team and sits within the MASH (Multi-Agency Safeguarding Hub).

The Safeguarding team provides supervision, advice and support for all ICS clinical teams and staff and offers bespoke packages of supervision, support and training to practitioners. Clinical services and practitioners are supported to provide professional information to the courts.

There are safeguarding champions within each service who provide additional support to colleagues and appropriate sign posting.

Champions meetings are held on a quarterly basis, providing updates and training on both local and national safeguarding agendas. The Safeguarding champions cascade this information via their individual team meetings.

The Safeguarding team within Devon supports the golden thread of safeguarding through all our services.

Local initiatives to improve data quality

Across our services in Devon, we have also made local changes to improve data quality, including:

- In our Single Point of Access Service, we introduced checklists when entering referrals to ensure demographic information is correct and is updated where it needs to be, this helps to reduce potential for error when sending letters.
- In our service for children under five with additional needs we have allocated two colleagues to co-ordinate our waiting list, helping us keep on target and manage referrals efficiently and accurately.
- In our Learning Disability Team we have completed training to ensure our teams provide appropriate information to our safeguarding teams
- In our Palliative Care Nursing Service, we have introduced a database to track patients with advanced care plans and changed our documentation to improve quality of data, as well as increasing the use of our electronic system – CarePlus.
- In our Speech and Language Therapy Service, our Let's Talk More project is ensuring children's language and communicating screening results are recorded both prior to and after intervention. This will ensure outcomes for children are screened and help to determine the effectiveness of the Let's Talk More project.
- We have increased access to technology in the Occupational Therapy service, ensuring all colleagues have access to directly input their notes into the clinical records; we have also introduced an outcome forms which encourages friends and family feedback and identifies whether goals have been achieved.
- Our Special School Nursing Service has made more use of electronic note keeping, directly inputting notes into the clinical system to improve data quality.
- Our Children in Care Team have redesigned their monthly child in care exception reporting, making it more accurate and providing more information.

- In Public Health Nursing, the implementation of our mobile working solution and the scanning of paper records have led us to review our housekeeping and recordkeeping which will improve the quality of data.
- In our ASD diagnostic service we now use an electronic tracking system to monitor performance

Information Governance Toolkit Attainment Levels

Our Information Governance Assessment report for this year was graded satisfactory. We have an action plan in place to improve compliance and toolkit scores during 2015/16 and further our IG agenda.

Implementing the Duty of Candour

Virgin Care is committed to being open and transparent with service users and (taking into account confidentiality) with their representatives. The organisation encourages its colleagues to being open and honest from the first time the service user comes into contact with services. Where a notifiable safety incident is recognised, staff members are advised to report this on the Organisation's incident reporting system (CIRIS) and follow the Duty of Candour policy. This includes following the Staff Guide on Duty of Candour. Template letters have been designed to assist the staff to write to the service user or their representative to apologise and to advise that an investigation into the incident is underway within 10 days of the notifiable safety incident occurring. An appropriate colleague will conduct an investigation to establish the facts of the notifiable safety incident in line with the Management of Incidents Policy, including timescales for external reporting e.g. STEIS. For incidents relating to safeguarding, the relevant Safeguarding Policy and safeguarding lead will also be consulted before any disclosure is made to the service user or their representative. Once the investigation has been concluded, a further letter is sent to the service user advising of the outcome, lessons learnt and how the Organisation will share such lessons and knowledge to reduce the likelihood of a similar incident occurring in the future. A meeting will also be offered as well as any other support that may be required.

Sign up to safety

Virgin Care Ltd is considering signing up to 'Sign up to Safety' in 2017. Improvement plans progressed under this scheme would be agreed and monitored by our Clinical Governance Committee, and add to its existing programme of quality and safety initiatives. Steps already agreed include expanding Clinical Governance Committee meetings to facilitate more detailed incident review and shared learning, and to improve engagement with Patient Experience, Communication, Learning/Training and other teams across the organisation.

Have Your Say Staff Survey

Virgin Care runs its colleague survey 'Have your say' on a bi-annual basis with regular 'pulse checks' covering a random sample of colleagues. This year, 51% of our colleagues across England took part and we saw significant improvements in feedback from colleagues based on tracking data from previous years. Devon reached a compliance of 62% participation.

Award winning services

Our teams and services are recognised for their hard work and excellence throughout the year, both internally and externally.

Star of the Year awards

Star of the year awards are the primary recognition programme for colleagues with national and regional winners nominated by their peers and the winner selected by our Chief Executive, Bart Johnson, and the wider Executive team.

This year we had more than 700 nominations, with two national winners and regional winners in each of our localities.

Jo Scammell, Commercial Manager and Lucy Wright, Community Nursing Clinical Lead for South West Surrey were our national winners, attending a gala dinner at the Roof Gardens in Kensington, London with Sir Richard Branson.

The Regional Stars of the Year for the South West

Strive for better – Sarah Lewis

Sarah received five nominations from her peers, her team and her line manager. She is noted as a kind, inspiring and knowledgeable clinician and manager who entirely fosters a team spirit.

She was commended for her astonishing dedication to setting up our flagship Early Help for Mental Health service for children and young people in Devon schools, and for improving the experience of people using our Single Point of Access. Another key strength is her willingness to share her own knowledge for the benefit of others and also to bring in external experts when they can offer useful insights.

Heartfelt service – Becky Rumens

Becky was described in her nominations as an 'outstanding clinician' who has fully embraced and developed in their role this year.

Managers continually receive excellent feedback from parents and colleagues regarding her heartfelt care of children within the service, particularly at end of life. She is highly supportive of all members of the team and her enthusiasm for working with children with life limiting conditions is truly inspiring.

Team spirit – Business Support – North Devon CAMHS

We received an incredible 13 nominations for the Business Support – North Devon CAMHS Team and they could have been shortlisted for all our values.

They are viewed as the 'spine' of their service as their positivity, professionalism and efficiency ensures that clinicians are supported to deliver outstanding care and, critically, that young people and families are treated with empathy and understanding when they make contact with the service.

They constantly strive for improvement, implementing new ways of working and multiskilling to enhance the experiences, not only of the team, but for young people, families and other professional teams. They also show great resilience under pressure and when faced with changes within the service.

Feel the difference awards

Created as an additional level to our reward and recognition strategy, in September 2016 our Feel the difference awards launched as our 'every month' award.

The awards were designed to celebrate colleagues who demonstrate our values and go above and beyond to improve the customer experience for their service users. These monthly awards are peer nominated with colleagues receiving a certificate presented to them by a member of the Senior Leadership Team. Ten awards have been handed out within the first five months of the awards launching.

External awards

- The SEM scanner project won the Enhancing Innovation through Collaboration Award Category at the Kent Surrey Sussex Leadership & Innovation Awards.
- Simon Littlefield won the BMJ Nurse of the Year for Pressure Ulcers for his work implementing the SEM Scanner and pressure ulcer pack for use across our hospitals.
- One colleague has been asked to attend the House of Lords in June 2017 for her work with a parent and child with severe epilepsy.
- The Assertive Outreach Team have been shortlisted for HSJ Value and BMJ awards in the categories of Mental Health services for their work establishing the service.

Highlights in training and development

The Learning Enterprise is our learning and development arm, awarded the Skills for Health Quality Mark in 2016 for delivery of face-to-face training and education to the health sector.

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

During the past year, The Learning Enterprise has:

- Continually reviewed training materials against business objectives to ensure TLE provides learning outcomes aligned to the requirements of the organisation, legislation and best practice.
- Continued to attend Safeguarding Committee Meetings to remain abreast of changes to legislation and best practice, and ensure training case studies are updated appropriately.

Over the coming year, The Learning Enterprise will:

- Become responsible for design and delivery of apprenticeships nationally for Virgin Care, including in Devon.

Locally:

- Across all of our services we have provided Educational and Health Care Plan (EHCP) training to ensure robust contribution to the new Special Educational Needs and Disability (SEND) process and continued a programme of Continuous Professional Development.
- In our service for children under five with additional needs, we have completed ASD training for all our colleagues in Portage and nursery nurses; nursery nurses also undertook a two day course in solution focus; our physiotherapist has recently been to a conference in London on a new way of delivering care; our service manager has completed a Masters through the leadership academy; one of our nursery nurses is due to start her Masters in psychology and another nursery nurse is undertaking a level 5 leadership course at Exeter College.
- In ROVIC, our colleagues completed the MSI (Multi-Sensory Impairment) course at Birmingham University, we provided training at Level 1 in British Sign Language and Solution Focused Brief Therapy.
- In Children's Continuing Nursing Service, we have continued our internal programme of professional development to update our clinical skills; all of our colleagues have been trained in our new home oxygen ordering system (HOOF) process.
- In Occupational Therapy, all colleagues had the opportunity to attend a day focused on 'Positions for play', and all colleagues had the opportunity to attend an update day for Specialist Child Manual Handling. Individuals in the service have also been able to attend national courses on Development Co-ordination disorder, Sensory Integration level 3, Sensory Integration level 1 and adaptations for children with challenging behaviours.

- In CAMHS, we continued our commitment to IAPT and recruited 11 colleagues into IAPT roles and many of our colleagues are linked to Exeter University, undertaking post graduate courses in evidence-based training, and we continue to support CPD for our colleagues which is specific and helps us to support the people who use our services. A national shortage of CAMHS practitioners means we place a great value on training and development to 'grow our own' clinical teams.
- Our Children in Care team are delivering training for New Foster Carers and newly qualified Public Health Nurses as well as continuing to receive high level training on safeguarding, Children's sexually harmful behaviour and safeguarding supervision for managers.
- In our Public Health Nursing Service, 3 nurses have undertaken national leadership training programmes designed to improve their leadership skills and support them to raise the profile of this important service locally. Public Health Nursing also has a core programme of training for all its colleagues, which is reviewed regularly and most recently was changed to add sexual health skills and to add further learning around mental health. The CAMHS team have supported the latter, providing core training for Public Health Nurses in mental health.

Highlights of initiatives to improve the experience of using services

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

Each service has also set a 'feel the difference goal' to improve one further aspect of service. In the past year, 100% of services had an audited, valid 'feel the difference goal' in place. Examples of improvements made as a result of these initiatives include:

- In our service for children under five with additional needs, we have introduced 'Step By Step' groups in North Devon for parents to continue to have support from our colleagues but also access peer support.
- In Children's Continuing Nursing, the acute hospital management team have told us they have had a speedy response from us throughout the year and regular attendance by the team at discharge planning meetings is helping facilitate a safe discharge due to the model of service delivery and the duty system. The service has also seen more people this year than it did last.
- In our Learning Disability Team, we have changed clinic venues to better meet the needs of working parents throughout the year, we have begun running review clinics for parents who find it difficult when we close an episode of care, providing a safety net of support and a way to quickly access support again, and we now offer consultations directly to other Virgin Care Limited services colleagues allowing them to make inter-service referrals and access support quickly.

- In our Palliative Care Nursing Service we completed a parent satisfaction survey with bereaved families in October 2016. 30% of families returned the survey, and all respondents reported the service was 'excellent'. In addition, a young person who was in need of a feeding device to increase their weight was anxious about the process and requested that it was carried out at home rather than at hospital. One of our team facilitated this, using her relationship with the young person to make the process simpler and reduce anxieties.
- In our Speech and Language Therapy service, parents and children and young people asked for earlier and later appointments which are easier to fit in with work, for siblings to be seen at the same time by different therapists and that times of appointments take children's needs into account. We have been flexible in what has been offered to meet these requirements, helping maintain attendance rates and increase satisfaction.
- In our Occupational Therapy service, parents expressed concern that the information and strategies shared within the Sensory Workshop was not being implemented within schools so we now encourage parents to request one member of school staff to attend the workshop with the parent. We have also received feedback that the OT toolkit online is not user friendly and has too much text, so we are currently reviewing all information and amending it to make it more user-friendly. Parents have asked for information about car seats, so we also organised a car seat workshop and manufacturers attended.
- In CAMHS, our participation worker is working across the whole of ICS to share learning and our Head of Service has presented findings from 2 suicide reviews to our local safeguarding board, who is working with us to increase awareness of the increased risk of suicide which young males face. We are also working closely with the national team to continually improve our online content; the ICS website is the 3rd busiest in Virgin Care's national organisation and CAMHS is the busiest section of the site.
- Our Special School Nursing service has identified areas where health information was not being shared effectively between the school, respite service and family and promoted better information sharing to improve the experience of the people who use our services. Parents are now more confident in the transfer of information, and the care of the children is improved as a result of everyone being better-informed.
- Our Children in Care Team have listened to Care Leavers in Devon and updated our Health Passport. They did not want lots of health information, but wanted signposting to where they could find it – so the current version follows this methodology. Young people also told us they wanted more flexibility in when they could have appointments, so we now offer a wider range of times.
- In our Public Health Nursing service, we have been asking our customers what they want from us when we start working with them and we use this in order to guide the service we provide.
- In our Multi-sensory impairment Service, parents told us that young people would like to be involved in Physical Education sessions at school, but due to MSI needs this was challenging. We have supported this young person to become involved in PE lessons, and the young person has given fantastic feedback on this work and the difference it has made.
- In our ASD diagnostic service, we have responded to feedback from parents and young people who said that there was not an easy way to contact the service and improved our pro-active communication.

Feel the difference

Aligned with our purpose, we are giving all of our colleagues in Devon the opportunity to pledge how they will support their patients to feel the difference. The Feel the difference fund is a £100,000 centrally-held ring fenced fund dedicated to supporting projects which improve the experience of service users.

Applications can be made by all colleagues and submissions are considered by a monthly peer panel each with funding being made immediately after approval. Since launching in September 2016, 50 applications have been reviewed, 23 projects supported with £44,130 of funding handed out.

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

Service	Summary of improvement project
Speech and Language Therapy	Let's talk more everywhere. This project shares the Let's Talk More strategies with parents in different places across Devon. It is aimed at ensuring health visitors, child minders, libraries, children's centre staff will share the same strategies each month and parents and children and young people will feel better supported through the consistent approach.
CAMHS	We have been awarded funding to produce new printed material for Children in Care accessing CAMHS services. The leaflets will explain what to expect in CAMHS and how to provide feedback.
Children and Young People Participation Leads	The team has received funding to celebrate the launch of the Children and Young People Strategy by putting on an event for children and young people who use the services. The team plan to provide a fun interactive day with tailored activities for the young people whilst providing the team with an opportunity to gather feedback from service users on how they would like the service to develop in future.

Part three

Review of quality performance

We continue to work with our commissioners and local providers to support the delivery of Commissioning for Quality and Innovation (CQUIN) targets and have successfully met our agreed milestones.

Last year we developed the Single Point of Access (SPA) for referrals and this year we have focused on expanding the remit of the SPA by adding additional safeguarding functions, improved patient experience by reducing referral processing times and developed pathway coordination meetings for complex cases. As part of our statutory obligations we have worked with partner organisations to embed the SEND agenda across Devon and utilising the SPA to support the transition of statements to Education Health and Care Plans. We have engaged with stakeholders to increase awareness and understanding of the services we provide and ensuring service thresholds are available to referrers and families. To ensure we maximise efficiencies and effectiveness we introduced additional outcome measures across our children with additional needs services and improved uptake in our child and adolescent mental health services. We have also ensured the wellness of our colleagues by encouraging flu vaccination uptake and launching a health and lifestyle wellness platform.

Medicines Optimisation Statement

To ensure the safe use and handling of medicines within all our services there is an up to date, evidence based suite of Medicine Policies which have been reviewed and refreshed this year. The implementation of these policies within the services is supported by locally service standard operating procedures.

Each service site has undertaken an annual Medicines Safety Audit comprising of 240 questions as a result each service site has received their own improvement plan for 2017-18. This ensures that each service site is continually monitoring and improving adherence to our Medicines Policies year on year. Each service has access to a pharmacist who can give advice and support on all medicine management matters.

The competency of staff handling and using medicines is paramount and to achieve this goal we have a medicines management training programme which is a work based blended programme and is accredited by the Royal Pharmaceutical Society and the University of Surrey. Colleagues are required to take a test on completion of each training module. All medicine incidents across the organisation are reviewed at service level, business unit level and corporate level. The lessons learnt are shared with the each service and shared across services at a national level.

Customer Experience Team

Since 2014-15, Virgin Care has operated a central Customer Experience Team working with people who use services across England and handling all queries, concerns and formal complaints on behalf of all services across England.

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

Across the organisation, everyone with internet access is able to see reporting on the number of complaints, their current status, and the themes they cover – as well as viewing whether an action plan is yet to be completed or where improvements have got to.

Our approach is to encourage patients and colleagues to attempt to resolve complaints 'on the spot' but offer our 'Here to help' service as service-independent option to resolve concerns and as a signposting service for the fastest and most appropriate resolution of issues.

The Customer Experience Team also regularly manages face to face meetings between complainants and operational managers and ensures that complaints are handled in line with the NHS constitution.

Devon Integrated Children's Services Customer Experience

Locally the Care Effectiveness team and Care Experience Manager support the coordination of complaint and investigation closure. Lessons learnt from complaints are regularly shared at local team meetings via a standing governance agenda item.

Friends and Family Test

The Friends and Family Test (FFT) is mandated by NHS England for all providers of NHS services and is now fully in place across all of our services. All patients who use our services have the opportunity to provide anonymous feedback on their experience and a chance to provide comments on how their experience could've been improved.

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

FFT statistics for Devon Integrated Children's Service

Integrated Children's Services, Devon received 6879 Friends and Family questionnaire responses, of which 6445 (94%) were likely or extremely likely to recommend our services to their family and friends.

The three main themes from the feedback were:

- Professional, friendly and very knowledgeable staff
- Helpful and clear and informative information and advice given
- Supportive and well run services

Submission of FFT data to NHS England

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

Comments by co-ordinating Clinical Commissioning Group

The draft quality account was submitted to the NHS Northern Eastern and Western Devon Clinical Commissioning Group (NEW Devon CCG) & South Devon and Torbay Clinical Commissioning Group (SDT CCG) on 13.08.2017 and their comments were used to improve the document prior to publication:

NHS Northern Eastern and Western Devon Clinical Commissioning Group (NEW Devon CCG) & South Devon and Torbay Clinical Commissioning Group (SDT CCG) would like to thank Virgin Care Limited (VCL) for the opportunity to comment on its Quality Account for 2016/17. It is right that the services aspire to make improvements in standards of care as reflected by the quality account.

VCL is commissioned by NEW Devon CCG & SDT CCG to provide integrated children's services across Northern, Eastern and Southern Devon. It is worth noting that a range of VCL services are also commissioned by Devon County Council (DCC).

In all cases, NEW Devon CCG & SDT CCG monitor progress and seek appropriate assurance from the provider that the key principles of quality are met throughout the year across the range of patient safety and quality related issues through a process of formal and direct communication and information sharing with the provider.

We seek assurance that care provided is safe and of high quality, that care is effective and that the experience of that care is a positive one for the patient.

As Commissioners we have taken reasonable steps to review the accuracy of data provided within this Quality Account and consider it contains accurate information in relation to the services provided and reflects the information shared with the Commissioner over the 2016/17 period.

The Quality Account highlights a number of positive results against key objectives for last year. These include:

- The implementation of the Single Point of Access has improved processing times and the quality of referrals and has allowed VCL to engage well with GPs and other services using the system.
- The development of the out of hours system has progressed well and within the CAMHs service the Crisis Response Team have increased their hours of service and having out of hours medical cover.
- Also within the CAMHs service it is pleasing to see the embedding of the eating disorder pathway and note its use by NICE as an exemplar pathway.
- It is positive to see the progression of technology to improve the effectiveness of the service and the release of clinical time.
- We are also pleased to see use of people's experience across all services and engagement with children, young people and families to influence service design.

During 2016/17 there have been some challenging key measures for VCL which we know are being progressed within key work streams for 2017/18 such as delayed waiting times. We are also expecting to see an improvement in complaint timeframes as the centralised team embeds.

Care Quality Commission (CQC) involvement:

We welcome and support the provider's continued open and transparent communication of their involvement with the CQC during 2016/17 in this Quality Account and note the openness of the issues highlighted by the CQC and the level of action taken by the provider to address those issues.

We can confirm that as a Commissioner, we have worked closely with the provider during 2016/17 and will continue to do so in respect to all Care Quality Commission reviews undertaken in order to receive the necessary assurances that actions have been taken to support continued, high quality patient care.

We congratulate and commend VCL on their CQC rating of "Good" and will monitor progress against action plans over the next year within the Quality Sub-Group.

The CCG agrees with the identified priority areas for improvement for 2017/18 and looks forward to working with VCL in the coming year in continuing to make improvements to the quality of the services provided for children in Devon.

Lorna Collingwood-Burke

Chief Nursing Officer/Caldicott Guardian

Northern, Eastern and Western Devon Clinical Commissioning Group

Appendices

1: Glossary of terms

Care Quality Commission

Also known as CQC

Independent regulator of health and social care in England.

Replaced the Healthcare Commission, Mental Health Act Commission and the Commission for Social Care Inspection in April 2009.

Clinical audit

Quality improvement tool, comparing current care with evidence-based practice to identify areas with potential to be improved.

Clinical Commissioning Group

Local organisations which seek and buy healthcare on behalf of local populations, led by GPs.

Commissioning for Quality and innovation

Also known as CQUIN

System to make a proportion of healthcare providers' income conditional on demonstrating improvements in quality and innovation in specified areas of care.

Community Services

Health services provided in the community (not in an acute hospital)

Includes health visiting, school nursing, district nursing, special dental services and others

CP-IS

Child Protection Information System

A computerised way of sharing data about child protection securely between organisations.

Did Not Attend

Also known as DNA

An appointment which is not attended without prior warning by a patient

Healthcare

Care relating to physical or mental health

Healthcare Quality Improvement Partnership

Also known as HQIP

Organisation responsible for enhancing the effectiveness of clinical audits, and engaging clinicians in reflective practice

National Institute for Health and Clinical Excellence

Independent organisation responsible for providing national guidance on promoting good health and preventing and treating ill health

Net Promoter Score	Also known as NPS A customer loyalty metric often used for customer experience. Records a score for each respondent between 0 and 10, and returns an overall score in the range -100 to +100.
NHS Outcomes Framework	Document setting the outcomes and indicators used to hold providers of healthcare to account, providing financial planning and business rules to support the delivery of NHS priorities.
Patient-reported outcome measures	Self-reporting by patients on outcomes following treatment and satisfaction with treatment received
Here to help/PALS	Informal complaint, concern and query service which gives advice and helps patients with problems relating to the access to healthcare services
You Said, We did	Feedback system used for making changes to services directly in relation to feedback from patients.
Emotion Gym	Workshop intended to appeal predominantly to males, run anonymously and without registration by First Steps in Surrey

2: Service Description

Mental Health and Well Being Services (MHWB)

Child and Adolescent Mental Health (CAMHS)

The CAMHS service provides mental health services for children until the age of 18 across Devon, providing early help, pathway-specific and acute services. Where needed twenty four hours a day, seven days a week can be accessed via the Assertive Outreach Team.

Assertive Outreach

The Devon Assertive Outreach team aim to support and engage children and young people with severe mental illness whose needs could not be met by the current CAMHS provision, by means of individualised home and community packages, in order to prevent or minimise admission to out-of-area placements.

Devon Early Help 4 Mental Health (EH4MH)

Devon's EH4MH service aims to improve access to mental health support. This improvement is targeted in two distinct ways. Firstly, the aim is to improve access to direct support for young people. Secondly, the aim is to provide DCC school staff with regular access to psychoeducation in various forms, including mental health consultation, clinical supervision and training. The Early Help for Mental Health (EH4MH) service funding has been secured by Devon County Council and Public Health for the next 5 years. EH4MH is being delivered by 3 partner agencies working together which are Virgin Care, Kooth and Young Devon.

Journey After Child Abuse Trauma (JACAT)

JACAT provides therapeutic work for children and young people under the age of 18 years who are showing distress after experiencing sexual abuse. This may include individual therapeutic work and/or therapeutic work with parents, carers and families aimed at helping them to support the child or young person.

CAMHS Children in Care

CAMHS Children in Care is a specialist service and serves Devon children county wide. Referrals are accepted from Devon County Council social care for 0 – 18 year olds.

The service supports young people in the care of the local authority, specifically where placements are in danger of breakdown. Children in Care works with local authority social workers, with WRAPAROUND support workers, with foster carers and young people, offering consultation, family work, group work and individual work according to need.

The service offers a short term intervention and works closely with all locality CAMHS teams as appropriate. Children in Care liaise with all involved agencies in a young person's life to support them in their placement.

Autism Spectrum Disorder (ASD) The Autism Spectrum Disorder Service provides diagnosis and help for children and young people up to 18 years of age suspected of being on the Autism Spectrum. Autism Spectrum Disorder (ASD) is a condition that affects social interaction, communication, interests and behaviour and the team helps to identify the difficulties children and young people and their families and carers face.

Children with Additional Needs (CAN)

Occupational Therapy (OT) This service helps children and young people and their families adapt to the challenges of everyday life which might result from a child or young person's difficulty or disability. The child or young person's activities can be considered in three areas: self-care, school and play work. Our team endeavours to help children maintain their skills, recover previously learnt skills and – where possible – develop new skills.

Portage Portage is a term time only home visiting service for children 0-5 years with significant and complex additional needs. Portage is based at Honeylands Specialist Child Assessment Centre (SCAC). All Portage referrals are processed through the Single Point of Access Pathway.

Rehabilitation Officers for Visually Impaired Children (ROVIC) This service provides statutory services for children and young people with sign loss, dual sensory loss and multi-sensory impairment. The service offers advice, information, assessment and skills development training to promote independence, access, inclusion, awareness and safety and undertakes duties on behalf of the local authority relating to registering visual impairment and maintaining the deaf-blind record.

0 – 5 Service This service provides an assessment for children under five where developmental delays have been identified from two centres covering the Eastern and Northern areas of Devon. Following assessment, children will then be provided with a bespoke plan to support their on-going development which is delivered in the child's home, or community locations. The service also provides a Devon-wide Portage service, managed by qualified teachers.

Speech and Language Therapy (SLT) Speech and Language Therapy (SLT) Services are provided for children and include preventative work at a universal level, input for specific speech and language problems e.g. dysfluency (stammering), speech sound difficulties (delays/disorders), language difficulties (delays/disorders) and input for speech and language problems associated with another primary disability that requires SLT involvement as part of a multidisciplinary team. The speech and language therapy service also provides a comprehensive range of training to parents, carers and professionals at all levels. This underpins the targeted and specialist levels of therapeutic work.

Family Support Services (FSS)

Children's Homes – Barnes, Hillcrest, Meadowpark, Welland

We provide short breaks for children and young people from four years of age until their 18th birthday at four children's homes across Devon. The service provides breaks for children and young people with learning disabilities, physical disabilities, complex medical needs and additional needs.

Enabling Service

The enabling service works with children and young people to engage them in accessing activities in the community which they may not otherwise be able to do. The service helps children and young people become independent and overcome barriers to inclusion.

Multi-Sensory Impairment Service (MSI)

This service supports deaf-blind children and young people within their home, community and in educational settings to understand the information they receive so they can interact with others and make informed choices. The team encourage the development of new skills to compliment, support and maintain independence, safety and confidence.

Public Health Nursing (PHN)

PHN Health Visiting and School Nursing (HV & SN)

This service delivers the 0-19 healthy child programme through the Health Visitor and School Nursing service. The service focuses on improving outcomes and helping families to achieve positive outcomes.

PHN Children in Care

This service provides nurses to help children and young people in care to achieve their potential, and to improve their health and wellbeing. This service provides statutory annual health assessments and formulates a holistic health plan to address individual needs and support foster placements.

Immunisation Team – Devon

The Immunisation Team are part of the Public Health Nursing Service. The service is commissioned directly by Public Health England to deliver 3 different vaccination programmes:

1. The Human Papilloma Virus (HPV) vaccination programme. This is a school based programme commencing in Year 8 for girls aged 12 – 13 years.
2. The 'school leavers booster' (Diphtheria, Tetanus & Polio (combined) and Meningitis ACWY). This programme is delivered in schools for male and female pupils in Year 10 (aged 14-15 years old).
3. A selective BCG programme for children identified as meeting the NICE guidance on Tuberculosis (NG33, January 2016, and Immunisation Against Infectious Diseases (Green Book), Chapter 32, April 2013).

Newborn Hearing Screening

This service aims to identify permanent moderate, severe and profound deafness and hearing impairment in newborn babies. The programme automatically offers all parents in England the opportunity to have their baby's hearing tested shortly after birth. Early identification gives babies a better 'life chance' of developing speech and language skills and of making the most of social and emotional interaction from an early age.

Specialist Children Community Services (SCCS)

Community Children's Nursing (CCN)

This service supports children with a wide range of conditions who require expert nursing, advice and support. A skilled team of Community Children's Nurses have specialist knowledge to improve independence and minimise the hospital visits, stays and interventions. The service also contributes to the palliative care service for children and young people, facilitating the provision of appropriate care to meet families' needs.

Learning Disability (LD)

This service provides support for children and young people in Devon who have a diagnosis of profound, severe or moderate learning disabilities.

Palliative Care Nursing

This service provides a responsive and high standard of nursing care and support for children, young people with life limiting and life threatening conditions. The service provides nursing care, support and advice to empower children, young people and their families to be the centre of care and make informed decisions about their care.

Special School Nursing (SSN)

The service supports children who attend local authority run special schools in Devon. Specialist school nurses with expert knowledge deliver high skilled nursing care as well as health care training and advice for schools to ensure that children with complex needs can access the full curriculum.

Complex Healthcare

The Children's Complex Healthcare service delivers care at home and in the wider community to Children and Young People in Devon who meet the criteria for continuing healthcare funding due to significant health needs and/or complex disability and require a bespoke care package. The care is provided by Health Care Assistants (HCA) who are specifically trained and competent to meet the individual's assessed nursing needs. The HCA's are supported and monitored by a team of nurses who oversee the packages of care delivered.

Family Support Services (FSS)

Single Point of Access (SPA)

The SPA service provides children, young people, their families and professionals working with them a single front door to the ICS services. Built around one single contact email address and telephone number through which all enquiries and requests for services are managed, delivering a consistent service across the county and improving the experience of people who use services.

Virgin Care delivers more than 400 NHS and social care services with a difference across England. For more information on our services or to find out more about the difference we've made visit www.virginicare.co.uk.

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