



Brook Wirral Quality Account 2011/12

Part One Introduction

What is a quality account?

Quality accounts are our annual accounts to the public about the quality of services we offer. The Health Act 2009 and supporting regulations place a legal obligation on all providers of NHS healthcare to publish annual quality accounts.

Our quality accounts are published electronically on NHS Choices website and a copy is sent to the Secretary of State.

Quality accounts aim to:

- improve accountability to the public
- engage trustees in quality improvement
- enable providers to review services and decide where improvement is needed
- demonstrate improvement plans
- provide information on the quality of services to the public.

A quality account must include a statement from the Board summarising the quality of NHS services provided, the organisation's priorities for quality for the forthcoming year, a series of statements from the Board which are set out in the regulations and a review of the quality of services provided during the year.

In developing a quality account and setting priorities for the future there is an expectation that providers of NHS healthcare will engage with their staff, trustees, clients and commissioners.

Who are we?

Brook is the leading UK voluntary sector provider of contraception and sexual health services to young people under 25. The charity has over 45 years' experience working with young people and has centres across the UK.

Brook provides free and confidential sexual health information, contraception, pregnancy testing, advice and counselling, screening and treatment for sexually transmitted infections and outreach and education work from 19 clinical delivery centres in the UK and Jersey (see below for map).

In 2011/12 Brook had contact with 294,763 young people through clinics, education work and Ask Brook, the national information service.

Ask Brook offers a confidential helpline, an online enquiry service and an interactive text message service. Ask Brook is available free and in confidence to young people on 0808 802 1234, by text on 07717 989 0236 (standard SMS rates apply) or by secure online message at www.brook.org.uk

Brook's mission is to ensure that all children and young people have access to high quality, free and confidential sexual health services, as well as education and support that enables them to make informed, active choices about their personal and sexual relationships so they can enjoy their sexuality without harm.

On 1 April 2011 Brook changed from a Network of 16 independently constituted Brook charities to one nationwide organisation. In becoming 'One Brook' the organisation committed to achieving excellent quality, the best clinical governance framework and highest standards for all our services.

Since opening in 1992, Brook Wirral has grown significantly and provides free and confidential sexual health information, advice, sexually transmitted Infection testing, counselling, and education services, reaching more than 15,000 young people every year. Locally and nationally, the organisation is highly regarded for its innovative and effective approach. We are a trusted and recognised brand amongst many thousands of young people, and we work successfully in partnership with other organisations to improve young people's lives. Brook Wirral is commissioned by NHS Wirral with some additional financial support from the Rank Foundation.

Brook Wirral's education team work within most of the secondary schools in Wirral delivering our unique 'BiteSize Brook' events, 'All Different, All Beautiful' and 'Greater Expectations' personal development programmes. The team also delivers outreach work with young men and young women and runs a weekly lesbian, gay and bisexual group.

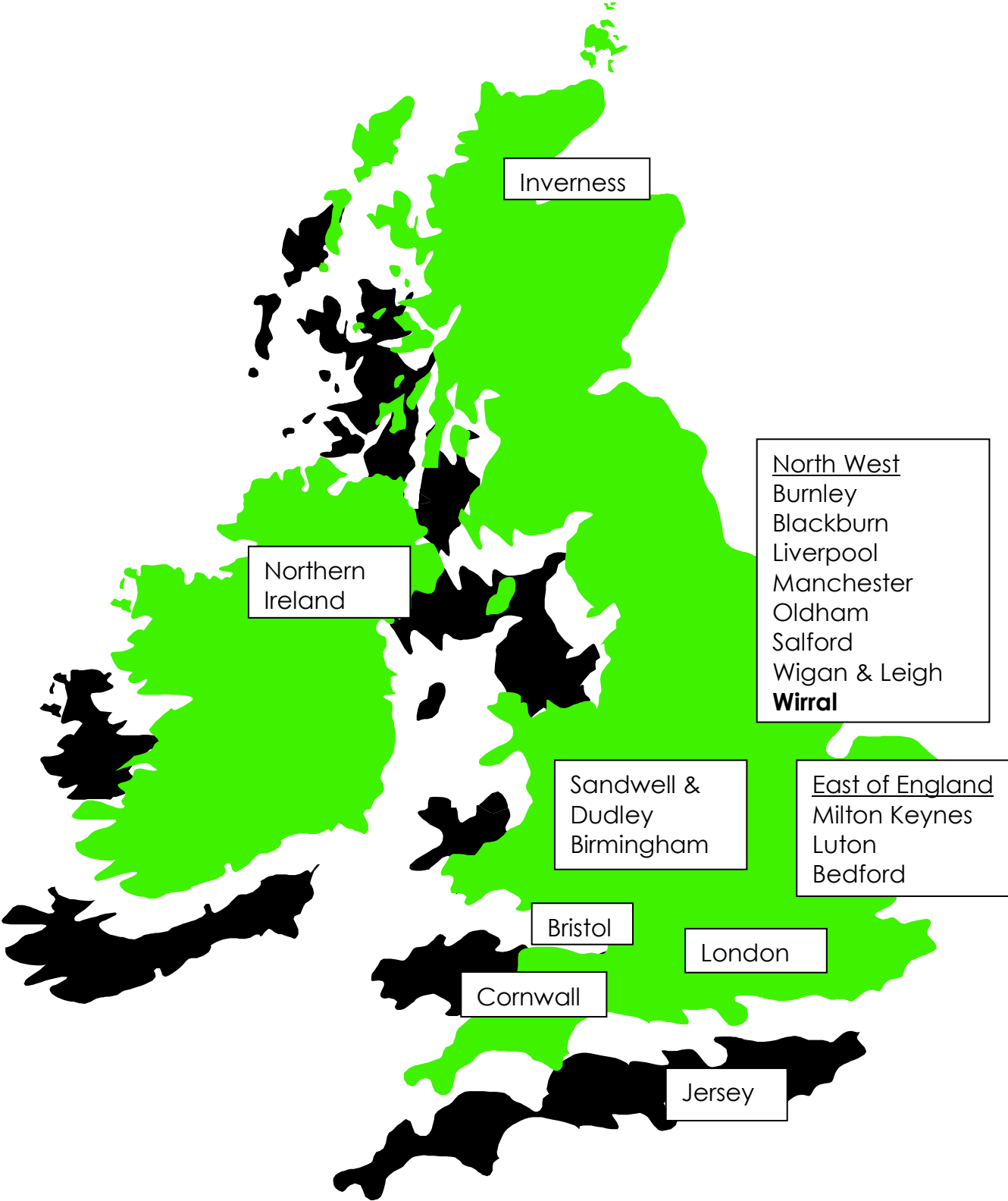
The centre is open 6 days a week as a drop-in service, offering young people contraception, condoms, emergency contraception, pregnancy testing and referral for pregnancy advice and abortion.

In 2011-12 Brook Wirral had contact with 15,064 young people at 22,101 contacts (10,807, clinical, including counseling and 11,294 education).

Brook Wirral is part of a network of services providing a range of additional health services in Wirral schools as part of a two year pilot programme. Specifically, Brook Wirral delivers additional contraceptive clinics in schools and youth settings across the Borough, we are responsible for the governance of the mental health training and for the development of a classroom resource and training for teachers on mental health and resilience.

Brook's services are delivered by nurses, counsellors, education workers and receptionists.

Brook Centres



Quality Statement

Statement from the board of trustees and chief executive

We are very pleased to introduce the first set of quality accounts for Brook Wirral as part of the Brook national organisation and welcome the opportunity to demonstrate our commitment to continuously improving the quality of our services for young people.

Brook is committed to delivering high quality, young person centred services which are welcoming to all young people and where possible accessible in their own communities.

We are committed to supporting our staff through training and development to ensure that they are equipped to deliver continuously high standards of service to young people, and that they understand and respect their needs as they move from childhood through to adolescence and into adulthood.

We have encouraged and welcomed our staff, clients, partners and commissioners to look at our quality accounts to see what we do well, what we intend to improve and what we will be reviewing in the coming 12 months. To provide further assurance the service commissioner for each contract, the local authority overview and scrutiny committee (OSC) and the Local Involvement Network (LINK) have been offered an opportunity to comment on the account ahead of publication.

We are looking forward to supporting the continued quality improvement of Brook services and ensuring that all our services remain accessible to young people and are of the highest standard.

The board of trustees is accountable for ensuring the accuracy of the information within this quality account. The Centre Manager is responsible for the preparation of this report and its contents. To the best of our knowledge, the information reported in this quality account is accurate and a fair representation of the quality of healthcare services provided by Brook Wirral.



Eve Martin
Chair of the board of trustees



Simon Blake
Chief Executive



Helen Corteen
Centre Manager

Part Two

1 Priorities for improvement 2012/13

Brook's national priorities for improvement in 2012/13 are:

Clinical Effectiveness

Clinical audit

Clinical audit is a quality improvement process that seeks to improve client care and outcomes through the systematic review of care delivery. It attempts to establish if things are being done correctly and asks 'are we following best practice'.

During 2012/13 all Brook clinical delivery services will take part in a national programme of four clinical audits. The objective will be to ensure that clinical standards are upheld across the audit areas and that practise across the organisation is consistent. A benchmark will be established against which to set continuous improvement objectives.

A report will be prepared within a month of each audit and learning will be shared across the organisation. Where adverse trends or variations are identified an action plan will be developed and implemented to support compliance.

We will be working to achieve 100% compliance with all four national audits. Each clinical delivery location will select a minimum of 40 sets of client notes for each audit.

In addition to sharing the audit report the outcomes will be discussed at the annual Brook clinical leaders' conference. Progress will be reported and monitored at meetings of the board clinical governance sub-committee.

Clinic support workers

During 2012/13 a standard induction, training and development programme will be developed for Clinic Support Workers (CSWs) and implemented by all centres with CSWs in their staffing team. The objective is to ensure consistent competencies across the organisation and the optimum use of staff skills.

We aim to ensure that 100% of newly appointed CSWs have access to a standard induction programme and that 100% of existing CSWs have access to a standard training and professional development programme.

Progress will be reported and monitored through the senior management team and at quarterly meetings of the quality expert working group and the board clinical governance sub-committee.

Client Safety

Incident reporting

During 2011/12 inconsistencies were identified in the reporting and risk rating of clinical incidents. During 2012/13 we will review the organisation's incident reporting procedures to ensure that a consistent approach to the management of serious incidents is embedded in the organisation and that risks can be scale rated, trends identified and action plans developed and implemented to mitigate risks and improve client safety.

All 19 clinical delivery locations will work to a standard reporting procedure and all staff will be clear what incidents should be reported and how.

Progress will be reported and monitored at quarterly meetings of the quality expert working group and the board clinical governance sub-committee.

Client Experience

Client experience questionnaire

A client experience questionnaire will be developed and introduced to all locations to specifically evaluate clients' experience and satisfaction with the clinical consultation and the quality of care provided. This will complement existing mechanisms which measure general satisfaction with the service experienced. This will enable us to strengthen the planning and organisation of clinical care as well as support clinical appraisal and the revalidation of doctors.

All locations will use a standard client experience questionnaire and have carried out surveys covering at least 50% of clinicians by the end of the year completed by a minimum of 40 clients per clinician.

Progress will be reported and monitored at quarterly meetings of the measuring impact expert working group and the board clinical governance sub-committee.

Brook Wirral's local priorities for improvement in 2012/13 are:

Clinical and Educational Effectiveness

Motivational Interviewing Techniques

During 2011/12 we highlighted the need to address the needs of young people who are repeating the same patterns of behaviour which have unintended and unwanted outcomes e.g. repeat use of emergency contraception with no regular contraceptive method and declining condoms, regularly engaging in unprotected sex, having second terminations with no regular contraceptive method. These are just a few specific examples of a wide range of issues regarding young people's motivation. We recognise that the underlying reasons can be complex and are specific to each individual. During 2012/13 we have commissioned bespoke training for all our staff who work directly with young people to develop skills in motivational interviewing and brief solution focussed therapy to enhance individual professional skills and to enable a more coherent whole organisation response to address these issues with young people. Staff from all disciplines within Brook are attending the training; nurses, counsellors, education staff and clinic advisers. The training will be supported throughout the year by a series of planned review meetings and one to one reflective supervision for the staff taking part. In order to understand and measure impact for young people, we will be following the progress of a number of individual young people through the first six months of the programme. We will use the Outcome Star model and qualitative evaluations to measure young people's progress and learning.

We will explore the possibility of adding 'MI intervention' to our clinical and educational databases in order to be able to report more accurately on numbers as well as the qualitative data.

Sexual Bullying and Social Media

During 2011/12, we developed and piloted 'Great Expectations' a new programme which offers groups of around 10-14 young people the opportunity to think critically about the messages they receive about gender and sexual expectations and explore the impact this has on their lives and the choices they make. The programme specifically explores the use of social media and the use of mobile phones to record and distribute images and the potential and actual negative impacts on those who record and distribute the images. The programme has evaluated extremely well and has enabled us to extend the range of organisations that we work with. During 2012 we will extend our provision of this programme alongside our 'All Different All Beautiful' and 'Bitesize' programmes.

Wirral Wide Implant Audit

It has been identified within Wirral that young people move between sexual health services to have implants fitted and removed, making it very difficult to understand and address the reasons for early removal of implants. During 2012/13 Brook Wirral will be taking part in an NHS Wirral lead Wirral wide audit and analysis of implant fitting and removals in order to identify any issues which impact on young people retaining their implant. Patient confidentiality will be maintained during the audit and analysis process. Results will be analysed in our contract meetings, at the Teenage Pregnancy Steering Group and at Being Healthy meetings.

Health Services in Schools

The pilot health services in schools programme is due to be externally evaluated during 2012/3. Brook Wirral will be fully engaged with the research and evaluation programme and will be undertaking our own service specific evaluation of the impact of each of the three elements for which we are directly responsible. We will use qualitative and quantitative data and will report our findings to the HSIS network, commissioners and relevant local strategy groups.

Client Safety

Local Audits

In addition to compliance with the four national Brook audits we agreed with our Commissioner to undertake an audit for each quarter of 2012/13:

- Quarter 1 Audit of all safeguarding issues, concerns and actions
- Quarter 2 Audit of contraceptive method pre and post termination referral
- Quarter 3 Audit of contraceptive method used prior to transfer to long acting reversible contraceptive method
- Quarter 4 Audit of Chlamydia positives tested in outreach programmes and treated in clinic

The outcomes of these audits will be analysed by Brook Wirral senior management team (SMT), (Centre Director, Education Manager and Clinical Lead) and reported to our commissioners.

The actions indicated by these audits and the four nationally directed audits will be addressed through an Improvement Plan monitored and implemented by SMT.

Client Experience

Feedback from young people not attending Brook

We undertake quarterly Exit Surveys with young people and regularly report the results via our 'You said, we did' notice board in the waiting room. During 2011/12 we commissioned a piece of research with young people who do not usually attend Brook, the results of this project were extremely beneficial and led to significant changes to our reception area and our procedure for booking clients in. We are keen to build on this and during 2012/13 we will commission a further piece of research, led by a group of peer mentors which will seek out the views and experiences of young people who are harder to reach, more vulnerable or who have more complex needs e.g. young people with a range of disabilities, children who are looked after by the local authority, LGBT young people and young people from the BME communities.

We will analyse the findings and incorporate the indicated actions in our Improvement Plan. Progress will be monitored by Brook Wirral SMT and reported to the Commissioner at our contract meetings. Relevant and interesting findings will be tabled as agenda items at relevant local strategy groups.

2 Statement of assurance from the Board

The following are a series of statements that all providers must include in their quality account. Many of these statements are not directly applicable to providers of community sexual health services.

2.1 Review of services

During 2011/12 Brook Wirral provided and/or sub/contracted four NHS services.

Brook Wirral has reviewed all the data available to them on the quality of care in all four of these NHS services.

The income generated by the NHS services reviewed in 2011/12 represents 100% of the total income generated from the provision of NHS services by Brook Wirral for 2011/12.

2.2 Participation in clinical audits

During 2011/12, no national clinical audits and no national confidential enquiries covered NHS services that Brook Wirral provides.

During that period Brook Wirral was not eligible to participate in any national clinical audits or any national confidential enquiries of the national clinical audits.

As Brook Wirral was ineligible to participate in any national clinical audits and national confidential enquiries, no data collection was completed during 2011/12 and it is not possible to list the number of cases submitted to each audit or enquiry as a percentage of the number of registered cases required by the terms of the audit or enquiry.

As no national clinical audits covered the services provided by Brook Wirral no reports of national clinical audits were able to be reviewed by the provider in 2011/12 and no actions to improve the quality of healthcare provided could be identified.

The reports of for local clinical audits were reviewed by the provider in 2011/12 and Brook Wirral intends to take the following actions to improve the quality of healthcare provided.

- Self audits for all clinical staff against routine record keeping issues, which will be reviewed at supervision.
- Improved follow up for lower level safeguarding concerns.
- Take part in Wirral wide implant audit and implement indicated improvements in counselling and support.

2.3 Participation in clinical research

The number of patients receiving NHS services provided or sub/contracted by Brook Wirral in 2011/12 that were recruited during that period to participate in research approved by a research ethics committee was zero.

2.4 Use of the CQUIN payment framework

Brook Wirral income in 2011/12 was not conditional on achieving quality improvement and innovation goals through the Commissioning for Quality and Innovation payment framework because the CQUIN payment framework was not available.

2.5 Statements from the CQC

Brook Wirral is required to register with the Care Quality Commission and is currently fully registered to provide diagnostic and screening procedures, family planning and treatment of disease. Brook Wirral has no conditions on its registration.

The Care Quality Commission has not taken enforcement action against Brook Wirral during 2011/12.

Brook Wirral has not participated in any special reviews or investigations by the CQC during the reporting period.

2.6 Data quality

Statement on relevance of Data Quality and your actions to improve your Data Quality

Brook Wirral will be taking the following actions to improve data quality.

- As a result of our participation in the Northwest pilot for the Sexual Health Tariff we are reviewing all data input at reception to ensure accuracy.
- From the first quarter of 2012/12 we will be reporting our statistics under the Sexual and Reproductive Health Activity Dataset.
- During 2012/13 we intend to implement computerised medical records in clinic.

NHS Number and General Medical Practice Code Validity

Brook Wirral did not submit records during 2011/12 to the Secondary Uses service for inclusion in the Hospital Episode Statistics which are included in the latest published data.

Information Governance Toolkit attainment levels

Brook Wirral's Information Governance Assessment Report score overall for 2011/12 was 50% and was graded red.

Clinical coding error rate

Brook Wirral was not subject to the Payment by Results clinical coding audit during 2011/12 by the Audit Commission.

Part Three

Review of quality assurance

1 Review of performance 2011/12

Clinical effectiveness

An Interim Executive Director of Quality was appointed to provide strategic leadership on quality assurance and clinical governance. This appointment was not only a very visual commitment to the importance of quality and clinical excellence within Brook but has enabled a dedicated team to work on the quality agenda for the organisation. The priority for the team during 2011/12 was to establish baseline data and information about practice from which to make recommendations for quality improvements in the coming year.

The quality team has been integral to setting the priority areas for 2012/13, based on the baseline findings during 2011/12, working in conjunction with clinical leaders and senior managers across the organisation.

A new Clinical Director was employed with increased hours to lead improvements to clinical governance. This has also enabled the clinical leads across the organisation to be better supported in their day to day role due to improved access to the national Clinical Director and better networking opportunities. Two regional meetings for clinical leads were held during 2011/12 in addition to the annual clinical leaders' conference.

A national review of the clinical audits undertaken by local centres was carried out by the Clinical Director and as a result of analysing these individual audits a national clinical audit schedule has been developed for 2012/13.

The fourth annual Clinical Leaders' Conference was held in March 2012 to facilitate sharing of best practice and quality improvement.

We continued to facilitate expert working groups on measuring impact, quality, clinical and support services, and children and young people's participation. These groups lead the work on reviewing practice across the organisation and contribute to the setting of quality improvement priorities for the organisation as a whole.

We continue to use the Practical Quality Assurance System for Small Organisations (PQASSO) to assess the efficiency and effectiveness of all our activities. This generic quality assurance model for voluntary sector

organisations has been supplemented by the development of specific Brook standards, including a standard for clinical governance, against which all centres assess their progress.

Client safety

We introduced a quarterly quality and risk report completed by all centres with a risk-rated summary presented to the board of trustees. This has enabled us to identify organisation-wide issues which may need addressing, such as inconsistent reporting of serious untoward incidents.

We developed and implemented a national Infection Control Audit Tool which was completed by all clinical delivery locations to ensure compliance with infection control standards.

A national audit of note-taking was completed and provided assurance that all locations were compliant with note-taking standards.

A standard training schedule has been developed to ensure that mandatory and statutory training requirements are being met. This sets out timescales for initial and refresher training in line with good practice recommendations and aims to ensure that all staff receive appropriate training to equip them to deliver a quality service to our clients.

An information sharing protocol has been developed and implemented across the organisation. With a new organisational structure in place there was a requirement for a standard protocol for sharing information with the senior management team on a range of issues which could impact on client safety and experience. For example if a delivery location experienced a flood which meant the service could not open, this needs to be shared within a specific timeframe so that information on the website can be updated and the Ask Brook service informed so that correct information is available to young people.

Client experience

An interim national impact lead was appointed to lead work across the organisation on demonstrating the impact of the services provided.

A pilot of a new system – 'Counter Measures' – has been undertaken to assess the effectiveness of measuring client satisfaction in a simple and fun way which provides immediate feedback. Counter Measures will be rolled out across the organisation in 2012/13.

We continued to pilot development of a sexual health outcomes star and will introduce this across the organisation in 2012/13. The star will enable us to

measure the extent of the change that Brook services make in enabling young people to enjoy their sexuality without harm.

2 Supporting statements

No supporting statements were received from commissioning Primary Care Trusts, Local Improvement Networks or Overview and Scrutiny Committee by the time of publication.

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Brook is a trading name of the charities in the Brook Advisory Group