



Improving Healthcare

Quality account 2022-2023



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Introduction

“ As the NHS celebrates its 75th anniversary, it faces its toughest challenges in history with performance and staffing issues magnified by the pandemic. Demand on services and patient waiting times have increased dramatically with over 7 million patients awaiting a first appointment for assessment.

During this period, everyone at Totally has worked tirelessly to support the NHS through our elective and urgent care services.

This year we embarked on a reorganisation of Totally to ensure it is fit for purpose for the challenges ahead. With the reorganisation, we have made the service delivery robust at site level with the emphasis on accountability rather than shared responsibility. A single operational delivery unit will oversee delivery of the services across the two new service delivery models, urgent care and elective care. A central governance hub will provide the necessary patient safety and quality assurances required across our services, all of which will be supported by central corporate functions.

In the last year there have been a number of achievements which we take great pride in, including:

Urgent Care:

- Totally was successfully appointed by NHS England to support the national resilience of NHS 111 and the feedback on the service from NHSE has been excellent.
- We were the first provider in England to implement NHS England's Single Virtual Contact Centre (SVCC).
- Successful mobilisation of the Bromley UTC contract (at the Princess Royal University Hospital and Beckenham Beacon UTC) from 1 April 2023.
- Extension of contracts across England.

Elective Care:

- Totally has successfully applied for and is now a recognised provider on DMAS (Digital Mutual Aid Service), the Dynamic Purchasing System (DPS) and the Increasing Capacity Framework.
- Extension on the Insourcing Provider Framework for four years in England and on the Insourcing Framework for Wales.
- New contracts with the Northern Care Alliance (Greater Manchester) and extension of services provided with the West Yorkshire ICB with increased activity levels.

I would like to thank the team at Totally as well as our industry partners for their contribution in enabling us to continue to provide high quality patient care and continued support of the NHS.

Statement from the Medical Director

“ Our goal is to always provide the very best possible care in all sites and settings, ensuring we get it right first time, every time. At Totally, our focus is on delivering high quality care, putting the patient at the centre of our approach and maintaining clinical excellence with verified high quality outcomes.

It is widely recognised that healthcare in the UK is currently under considerable pressure. Improving patient access to care while continuing to provide good value for money to the NHS is a key focus of ours. Improving access to care is not just about a focus on waiting times or waiting lists, but also through better online and telephone support. Our ability to provide good access to high quality care depends on a relentless attention to improving recruitment, improving care pathways, ensuring best use of staff to provide efficient and safe care.

The high quality of our work is underpinned by a clear focus on performance supported by robust reporting structures within the group, patient feedback, audit and service review. We have shared learning processes across the whole organisation, and clear accountability including senior team members.

We have achieved a number of significant milestones this year, including:

- Two regulatory inspections during the year with 100% of inspected services maintaining their “Good” rating by the Care Quality Commission.
- Feedback mechanisms for patients’ experiences migrated online and centralised, enabling a holistic view of care provided by the organisation for 2023/24.
- Fully rolled out a new single instance of Datix incident reporting with a web-based system allowing central visualisations of all events and single approach to risk analysis.
- Fully rolled out single web-based policy library with all policies accessible through the Totally intranet, My Totally, enabling a consistent model of care across the organisation.



Statement from the Director of Nursing & Quality

“ When I visit our sites, I see first-hand the energy and passion that exudes from our staff. The national workforce challenges continue to put pressure on healthcare workers, but they face the adversity head-on with a continuing focus on person-centred care.

During this year we have continued to diversify our workforce with a Care Navigator role, sitting within our urgent treatment centres. Our Care Navigators are patient champions, ensuring patients see the right person, in the right place. This role also sits within the scope of link worker and is becoming an important part of our developing social values programme, enabling those living with health inequalities to have improved access to care.

We strive to provide high quality care and this can only be achieved by investing in our staff. During the year we focused on increasing access to the Apprenticeship Levy. Colleagues have undertaken apprenticeships at all levels from level 3 to level 7 degree apprenticeships, in areas such as Team Leader, Operational Departmental Manager and Senior Leader, as well as Clinical Apprenticeships as Health Care Assistant Practitioners, Enhanced Clinical Practitioners and Advanced Clinical Practitioners. We have also partnered with professional training providers delivering NHS Leadership Awards which run alongside the apprenticeship and we have colleagues currently completing the Edward Jenner, Mary Seacole and Rosalind Franklin awards in order to reach their full leadership potential and achieve the highest standards in health and care.

Our focus on quality was reflected in our two CQC inspections in South London, both of which were rated GOOD. We are also continuing with the three-year Quality Improvement Programme which is delivering a company-wide approach to clinical quality, as we bring our clinicians together from all areas to share best practices and learning, and ensure we remain focused on delivering patient-centred, high-quality care.

Kathryn Dalby-Welsh, Director of Nursing & Quality



Our Quality Improvement Goals – 2022/23

Strategic Objectives	Quality Improvement Priority	What we will deliver	How we will deliver
<p>Business</p>	<p>We will design and assure our business models of care to ensure clarity and reductions in variation across the organisation. We will ensure that we have systems and processes in place to manage business continuity and resilience issues</p>	<p>New Models of Care</p>	<ol style="list-style-type: none"> 1. We will assess any implementation of new models of care against a standard template. 2. We will establish tools and appropriate clinical expertise to evaluate bids. 3. We will quality assure any new models of care based on a standard process. 4. We will ensure bid processes are standardised to maintain quality and performance assurance in line with financial allocation.
		<p>Pandemic Controls</p>	<ol style="list-style-type: none"> 1. We will arrange an incident wash up and identify learning from the COVID-19 pandemic. 2. We will embed IPC practices and walk about audits into business as usual. 3. We will ensure clear lines of communication for information of associated high risk groups to allow timely implementation of specific plans. 4. We will revise our practices and policies to ensure early implementation of escalation plans to manage disease outbreaks.
		<p>Reduce unnecessary variation</p>	<ol style="list-style-type: none"> 1. We will review and revise practices and processes, to align where possible to one version. 2. We will share best practice and learning to ensure a consistent approach to business delivery. 3. We will identify performance metrics for all staff to ensure effective delivery of key performance indicators, reducing variation in performance across services.

Our Quality Improvement Goals – 2022/23 (cont.)

Strategic Objectives	Quality Improvement Priority	What we will deliver	How we will deliver
<p>Services</p>	<p>We will deliver quality services, ensuring accurate validated data is used to inform decisions and deliver assurance in line with corporate assurance and regulatory activity.</p>	<p>Develop, assess and deliver a quality dashboard.</p>	<ol style="list-style-type: none"> 1. We will measure quality of outputs through a validation process via the data warehouse. 2. We will ensure all I-Auditor data is linked into the quality dashboard, to measure quality data once. 3. Monitoring via the Quality Committee and the Area Assurance Meetings
		<p>Restructure and implement governance systems.</p>	<ol style="list-style-type: none"> 1. Continue with the restructure and mapping of roles, to ensure clarity during change. 2. Realign quality responsibilities to lead roles within the organisation. 3. Ensure regular monitoring and reporting of quality visits within the organisation. 4. Refocus Quality Committee reporting on the “so what” to ensure actions are identified, allocated, monitored and presented back on completion.
		<p>Develop readiness for the corporate approach to regulation.</p>	<ol style="list-style-type: none"> 1. Ensure we have clear lines of accountability aligned to statutory responsibilities. 2. Ensure we are compliant with changing approaches to regulation and inspections via statutory bodies.

Our Quality Improvement Goals – 2022/23 (cont.)

Strategic Objectives	Quality Improvement Priority	What we will deliver	How we will deliver
<p>People</p>	<p>We will ensure that our staff understand "recruit, retain, develop and train" model of team development.</p>	<p>Clarity and feedback for employees</p>	<ol style="list-style-type: none"> 1. Implement PADR and 1:1 in line with standard process, aligned to provider promises and behaviours. 2. Deliver clarity on each role in line with job descriptions and expectations and hold to account. 3. Praise staff for achievement against their objectives.
		<p>Workforce development and planning</p>	<ol style="list-style-type: none"> 1. Understand the workforce, aligning roles to competency framework. 2. Align pay structures to qualifications and job roles. 3. Develop a training needs analysis to support staff development.
		<p>Learning into practice</p>	<ol style="list-style-type: none"> 1. Continue to develop PeDS and implement across the organisation. 2. Identify suitable training and clinical supervision plan. 3. Identify staff for apprenticeship schemes to ensure a developing workforce.

Our improvements: Progress so far

Quality Business

Innovation and new models of care are piloted using a PDSA principle and aligned to our development standards.

All new models of care go through rigorous sign off processes including clinical, quality and operational touchpoints. One example piloted during the year was NHS 999 clinical validation for category 3, 4 and 5 calls.

Implementation of a new standard process and robust sign-off procedure incorporating all key stakeholders e.g. finance, clinical, operational and commercial.

During the year we incorporated a risk rating 'go' or 'no go' based the combination of the available financial envelope, clinical outcomes and sustainability.

Implementation of a new Incident Management System which includes managing our policies, audits and feedback.

Monthly Clinical Guidelines review meetings share best practice across the all sites and ensuring one version of the truth.

Availability of intranet access to all our colleagues with specific team areas to support staff depending on their location of work.

We are continuing to develop our intranet, My Totally, and ensure all colleagues can access the relevant information.

Sharing learning from incidents, patients and healthcare feedback via newsletters

As part of our PSIRF innovation work we have piloted the 'PUSH - Patient Urgent Safety Huddle' process to ensure our meetings are efficient and information is gathered in a cohesive way with minimal impact on the business. We have also implemented rapid learning sessions with evening learning to ensure services are not impacted.

Business intelligence tool development in all parts of the business

This year we have created a productivity dashboard to help us analyse productivity and to identify opportunities for further improvements to improve patient experience.

Our improvements: Progress so far (cont.)

Quality Services

Support our partners in a new audit regime

This activity has generated very positive feedback from the sites we offer services to. Clinical audits carried out via the Audit Safety Culture Tool online system between April 2022 and March 2023 have average compliance score of 90%. These audits have also highlighted opportunities for improvement leading to prompts for safeguarding in documentation, considerations added to systems and improved documentation in episodes of care.

Audits have provided ongoing assurance on quality and standards of care delivered, demonstrating excellent history taking, excellent management plans, and safeguarding concerns appropriately considered within the case notes and good safety netting (Safety Netting is information given to the patient and their carer about any action to take or may need to be taken next).

Carry out SERCLE reviews at our urgent treatment centres.

Overall engagement and compliance for these sites are good. Staff are actively involved in making improvements with implementation of action plans and feedback from staff during the reviews highlighted a good team ethos. The new approach by CQC is providing the organisation with an opportunity to review these visits, setting personal plans whilst promoting a continuous improvement culture.

Quality and Governance case reviews and shared learning around the “so what”. Themes and trends are reviewed and learning sessions are opportunities to share across the whole organisation.

We are working in partnership with our Mental Health First Aiders on knowledge and signposting for, and engaging with, our patients to encourage feedback. We have implemented a new patient engagement tool resulting in a significant increase in responses, along with improvements to our written communication to our patients and their GPs which has been positively received from both patients and partners, improving the patient experience. A focus on patient's attendance has resulted in reduction in non-attends from 14% to 7.5% in one area of the organisation.

Governance team engagement with colleagues across all parts of the organisation is also embedding the learning and improvements from incidents and feedback.

Our improvements: Progress so far (cont.)

Quality People

PDAR

At Totally we are committed to investing in our workforce to become a great place to work and an employer of choice. To do this we:

- Develop and support the growth of transformational leadership and management.
- Attract, identify, develop and retain high performing talent across the organisation.
- Developed a total reward approach to recognise and reward good performance.
- Enabled the development of a high-performance culture in which colleagues' performance can be supported, rewarded, enhanced and managed effectively.
- Fostered a values-based culture focused on diversity, inclusivity, wellbeing and positive colleague engagement.
- Offer all employed staff access to a benefits package on a dedicated platform 'My Totally Rewards'.

Competency Framework

During the year we developed a new competency framework for all registered non-medical staff.

Programme of internal and external training sessions organised on various topics for urgent care workforce (NMP update, imaging interpretation, paediatric assessment).

During the year we updated our training needs analysis and new Clinical Supervision Policy to keep our staff up to date on their roles and responsibilities. An additional learning / education programme was also created from patient incidents outcomes.

Our Quality Priorities for 2023/2024

Quality Business

- We will use our quality dashboard to ensure that we can adapt and implement learning.
- Centralise and coordinate recording of risk registers for every service, accessible centrally and addressed in a timely manner, ensuring that staff are trained and manage risk appropriately.

Quality Services

- We will engage with the people we care for, through feedback and involvement in pathway design, learning and aligning care with their needs in a meaningful and measurable approach.
- We will address unwarranted variation and showcase good examples of care.
- Through the implementation of the Patient Safety Incident Response Framework, we will support the people we care for safely and effectively.
- We will ensure that all workstreams feed into quality improvement, always learning and improving.
- We will strive to support the whole population through understanding and acting on the diversity of the people we care for.
- We will be clinically curious about how to deliver care which will always seek to innovate and adopt.
- We will celebrate success and learning.

Quality people

- We will focus on the systematic appraisal of our staff – creating professional development plans that will ensure that all our staff are confident and competent to fulfil and enjoy their role.
- We will continue to diversify our workforce and employment model to ensure that the people we care for access the right care first time.
- We will listen to staff feedback and act on it.



Quality Services 2022/23

Location	Overall rating	Safe	Effective	Caring	Responsive	Well-led
Northwick Park UTC	Good	Requires Improvement	Good	Good	Good	Good
Queen Elizabeth UTC	Good	Requires Improvement	Good	Good	Good	Good

Infection Prevention and Control (IPC)

Totally annual IPC report – April 2022 to March 2023.

Currently, and throughout the reporting period, each department is required to provide assurance to the Group Clinical Governance Board via their Safety & Quality or Clinical Governance Committees that there are effective governance systems in place to reduce and manage the risk of infections. This assurance is provided in a number of ways:

- IPC policies, procedures and guideline development.
- Monitoring themes/trends including potential outbreaks and reporting of communicable diseases.
- Investigating safety incidents, sharing learning from incidents, including complaints, and creating additional education sessions from shared learning.
- Audit programme/schedule including environmental cleanliness, hand hygiene and other audits as required.
- Compliance with induction and mandatory refresher training of all staff.
- Implementing, reporting and maintaining Quality Improvement Programmes.
- Developing and monitoring progress on improvements plans through feedback and site visits.
- Produce an IPC Annual report/statement.
- Produce an IPC Annual Work Plan.



Patient Experience

Improving experience of care – 2022-23 highlights

Friends and Family Test (FFT)

Patients using Totally's services are able to access our FFT system by:

- Completing an FFT card by hand which is given to our staff at any of our centres or when they receive a home visit. Receptionists and drivers assisting with this process has made a huge difference to the number of returns in the Midlands area: 6,572 respondents with 96% satisfaction rate during 2022-23.
- Direct access to our online form via a QR code that is displayed on the hard copy FFT cards and on posters at all of our centres.
- Direct access to our online FFT form via the Totally Group website.
- Text messaging following use of our 111 services: 5,239 respondents with 79% satisfaction rate during 2022-23. Text messaging post contact will expand to all services during 2023-24.

In response to our FFT feedback:

- Centres produce a monthly information poster demonstrating their results and highlighting any issues raised in 'You Said: We Did' format.
- We know that the majority of our feedback during 2022-23 is for the age group of 0 to 15yrs – it is our intention to design and implement child friendly resources to directly capture their thoughts and feelings during 2023-24.
- We shared updates with all staff via newsletters, the patient experience section on My Totally and information boards at all centres.
- We consider themes and trends for further investigation and shared learning.
- We raise staff morale by highlighting good feedback: the majority of people are very happy with the service that they receive from us.

Historically individual regions delivering services have utilised separate platforms, methods and reporting for patient feedback data. During 2023 we achieved our objective to move to a robust single platform in readiness for the next reporting year. This also enables the generation of reports from our business intelligence team at all levels of the organisation for our quality reporting requirements.

Plans are already in place to re-invigorate site leadership to increase our FFT returns supported by an organisational FFT network for greater patient feedback.

During the forthcoming year, our FFT questionnaire will be enhanced to include permission for the responder to be contacted (if necessary) so that we can understand any concerns in more detail and to ask if the person would like to be more involved with the monitoring and design of our services.

Shared learning:

- Our 111 service holds regular end-to-end reviews with local partners and patient volunteers in response to an incident or complaint.
- Shared learning events based upon the themes and trends from patient feedback are held regularly with good staff attendance.

Patient stories

Since January 2023, there has been more of an emphasis on the collection of patient stories as a powerful vehicle to demonstrate quality assurance at all levels of the organisation.

We learn about when things have not gone well but also celebrate when exceptional care has been delivered.

Over the last few months, we have been able to share excellent examples that have led to an improvement in care and stronger partnerships:

- Improvement in the palliative care pathway in the Midlands GPOOHs.
- Urgent redirection of a patient at risk of sepsis in Yorkshire UTC.
- Safe adaption to remote assessment to ensure inclusion within NHS 111.

Public Engagement – Patient Reference Group

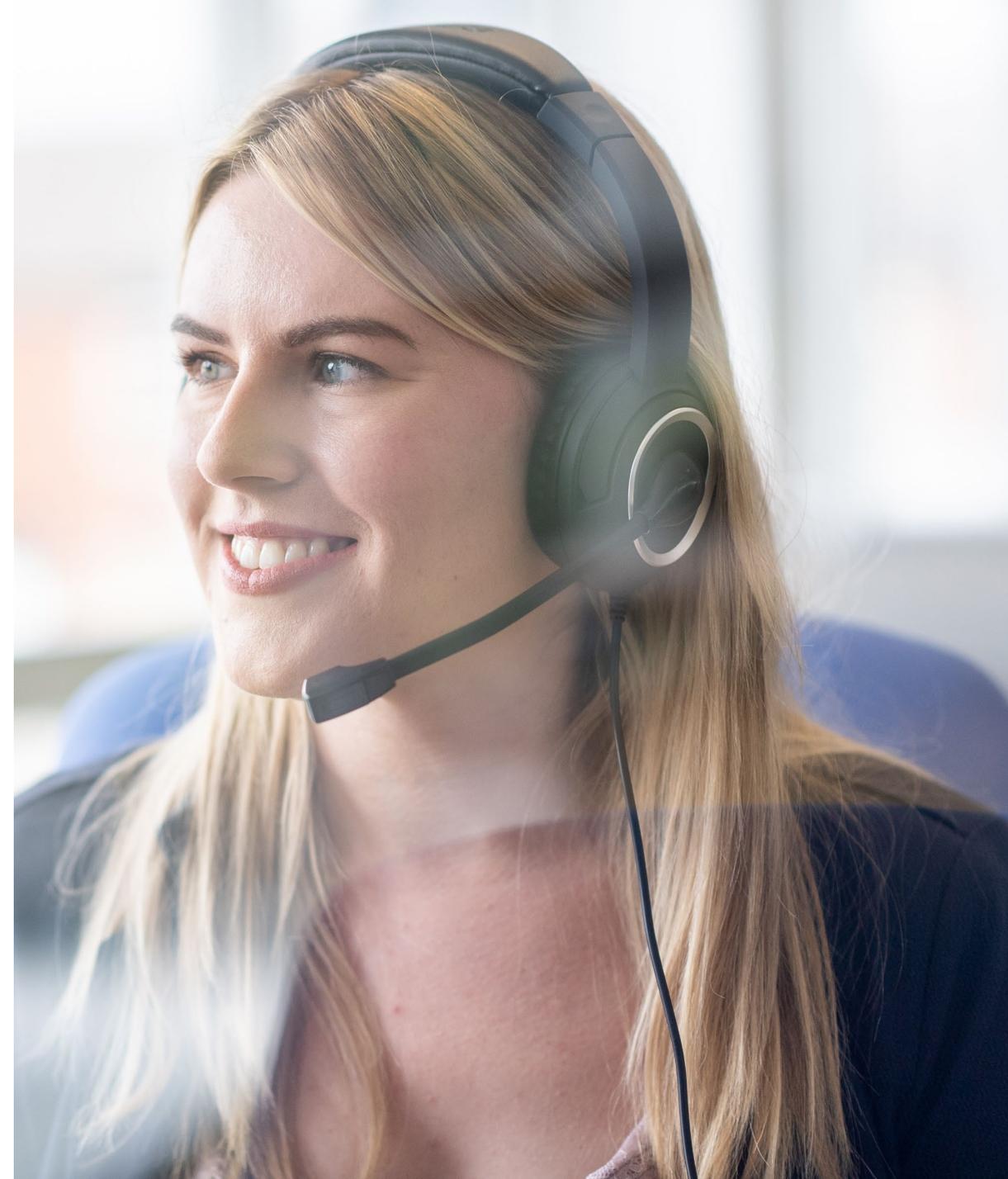
The establishment of a patient reference group was commenced before the COVID-19 pandemic, however it was paused during the pandemic due to changing priorities to maintain effective care. A virtual patient reference group is to be established in the forthcoming year with the NHS 111 National Resilience Service with the intention that this will be widened to include representation for all services. We have chosen two very important care pathways that we would initially like to focus on and have made contact with associated local and national organisations, Palliative Care and UK veterans, for support going forward.



Staff Health and Wellbeing

All Totally employees (and their immediate family members) can access services such as:

- 24/7 GP consultation.
- Healthy diet at work support.
- Legal and financial guidance.
- Life events counselling.
- Mental health support.
- Get fit programme.



Employee Assistance Programme

Our Employee Assistance Programme (EAP) is completely free and is designed to help employees deal with any personal or professional problems. The EAP is provided by Health Assured, an independent external organisation who work to a robust, professional code of conduct.

Dependent on the nature of the issue, counselling or advice can be provided by fully qualified professionals. All calls are treated in the strictest of confidence and in-line with the British Association of Counselling and Psychotherapy (BACP) code of ethics.

Staff Development

Colleagues across the organisation have enrolled into an NCFE short course since launch in February to support them in their current roles and personal development. The course includes modules focused on:

- Principles of team leading.
- Lean organisation management techniques.
- Awareness of mental health problems.
- Understanding common childhood illnesses.
- Principles of end-of-life care.
- Principles of business administration.

Along with the apprenticeships offered through our links with universities across the country, employees can also participate in NHS Leadership Awards including:

- Edward Jenner Award
- Mary Seacole Award
- Elizabeth Garrett Anderson Award
- Rosalind Franklin Award

Staff are able to access all the related information via our intranet, My Totally.



Mental Health First Aiders

We have a network of 34 Mental Health First Aiders (MHFA) across the organisation which meets monthly.

Our MHFAs:

- Provide support, knowledge and signposting.
- Lead and facilitate discussion on specific relevant topics.
- Share best practice.
- Own a dedicated email address and communication channel to share MHFA news and information with staff.
- Monitor a dedicated email address for staff to contact if they need support.
- Provide information on various MHFA events throughout the year.

Mental Health First Aiders have a dedicated area within our intranet, My Totally, to share information with staff about how to seek support.



Urgent Care

Our Urgent Care services have continued to help healthcare commissioners ensure patients have access to the right care, at the right time, in the right place, both in hours and out of hours. We supported ICBs with the delivery of NHS 111, urgent treatment centres, GP out-of-hours and acute visiting services and are NHS England's chosen partner for NHS 111 resilience.

Highlights this year include:

- NHS 111 call answered every 36 seconds.
- 96% of urgent treatment centre and GP out-of-hours services rated as "Good" or "Very Good" by patients.
- 100% of services continue to be rated "Good" by CQC, following inspections this year.
- We are the first and only provider to have fully mobilised NHS England's new, flexible platform for delivering NHS 111 services. The Single Virtual Contact Centre (SVCC) solution has been adopted alongside a new contract for the delivery of NHS 111 resilience services nationally.
- Our NHS 111 service has also hosted medical students in collaboration with Newcastle University with a view to co-authoring a qualitative research study about the phenomenological aspects of medical education from the perspective of students and mentors. Following the success of this initial programme, we are about to engage the next cohort of students to continue this through 2023.



Elective Care

Our Elective Care services have continued to support the NHS to reduce waiting lists within a number of specialties. We have built on our already strong relationships with NHS Trusts and ICBs to continue ensuring safe, quality, patient-focused care.

Progress this year includes:

- Regular on-site clinical auditing using I-auditor which was introduced in 2022. Ensuring all national and local safety standards are monitored and, when required, improvements and learning implemented.
- Elective Care services integrated into a central quality and governance system, with robust reporting and triangulation of incidents, complaints, patient surveys and risks. Supported by the introduction of a new Datix Cloud IQ system in November 2022.
- Supported HCAs through the first year of assistant practitioner higher degree apprenticeship programme in collaboration with University of Central Lancashire (UCLAN) as part of our recruitment and retention strategy.
- First Contact Practitioners now signed off at Level 2 on the HEE FCP roadmap with more to follow in the coming months.
- We continue to support our GP trainee programme from local communities, in particular supporting their dermatology secondment.



Medicines Management

Totally's Medicines Management department has continued to provide proactive and detailed support to all clinicians and practitioners within the organisation. Currently and throughout the reporting period they have continued to provide assurance to Group Clinical Governance Board via the quarterly Medicines Management meeting, the dissemination of the Medicines Management bulletin and immediate safety alerts when required.

Additional assurances have been provided in a number of ways:

- Standardisation and implementation of uniformed PGDs across Urgent Care services.
- Detailed review of medicines management incidents across Urgent Care to determine themes and trends with shared learning (e.g., management of CDs, storage of Entonox, wider medication room conditions).
- Induction and implementation of new audits across Urgent Care (drug room temperature, medication expiry, drug room standards).
- Utilisation of CQC visit standards and learning from regional visits across the group.



Key quality standards – Urgent Care

Year	No. of Incidents	No. of contacts	Incidents per 1000
2017/18	4956	1,702,555	2.91
2018/19	4700	2,189,738	2.15
2019/20	4737	1,521,313	3.11
2020/21	5596	1,600,832	2.80
2021/22	3849	2,273,992	1.67
2022/23	3101	1,879,723	1.65
Year	No. of Serious Incidents	No. of contacts	Incidents per 1000
2017/18	76	1,702,555	0.04
2018/19	35	2,189,738	0.02
2019/20	31	1,521,313	0.01
2020/21	9	1,600,832	0.005
2021/22	25	2,273,992	0.009
2022/23	14	1,879,723	0.007
Year	No. of complaints	No. of contacts	Incidents per 1000
2017/18	662	1,702,555	0.39
2018/19	610	2,189,738	0.27
2019/20	496	1,521,313	0.33
2020/21	355	1,600,832	0.22
2021/22	816	2,273,992	0.35
2022/23	813	1,879,723	0.43

Key quality standards – Urgent Care FFT results

	Total Received					Total likely to recommend					Percentage likely to recommend				
Year	2018/19	2019/20	2020/21	2021/22	2022/23	2018/19	2019/20	2020/21	2021/22	2022/23	2018/19	2019/20	2020/21	2021/22	2022/23
Central	25075	24057	9564	14332	10164	23235	22136	8603	12172	8542	93%	92%	90%	85%	84%
North	1416	377	13	625	6637	1353	370	12	587	6305	96%	98%	92%	94%	95%
South	1280	1412	2191	697	-	1028	1107	1805	587	-	80%	78%	82%	84%	-
Total	27771	25846	11768	15654	16801	25616	23613	10420	13346	14847	90%	89%	88%	88%	90%

Key quality standards – Elective Care

Year	Service	No. of Incidents	No. of Contacts	incidents per 1000
2022/2023	Insourcing/Outsourcing	95	-	-
	Community Dermatology	46	61808	0.74
	Physiotherapy and podiatry	25	16074	1.56
Total		166	77882	2.13

Year	Service	No. of Incidents	No. of Contacts	incidents per 1000
2022/2023	Insourcing/Outsourcing	3	-	-
	Community Dermatology	1	61808	0.02
	Physiotherapy and podiatry	0	16074	0.00
Total		4	77882	0.05

Year	Service	No. of Incidents	No. of Contacts	incidents per 1000
2022/2023	Insourcing/Outsourcing	48	-	-
	Community Dermatology	58	61808	0.94
	Physiotherapy and podiatry	41	16074	2.55
Total		147	77882	1.89

Key quality standards – Elective Care FFT results

Year	Service	Total Responses Received	Number likely to recommend	Percentage likely to recommend
2022/2023	Insourcing/Outsourcing	649	616	95%
	Community Dermatology	627	447	71%
	Physiotherapy and podiatry	297	289	97%
Total		1573	1352	86%