## **ELFT's QI Projects**

No. of Active Projects

## 188

| Record<br>Number | Title   | Aim   | Location  |
|------------------|---|---|---|
| 121608           | Improving the efficiency for the uptake of recommended medication for persistent pain patients, between the community chronic pain service and the patients general practitioner. | To have Increased the Uptake of Medication for Patients in our Pain Service as well as Reducing the Delay in Recommended Medication being prescribed by the GP by at least 50% with an ideal delay of under 7 days. | I-health chronic pain<br>community<br>services/MSK/Physiotherapy    |
| 122757           | Enjoying Work -<br>SPoA Team  | To increase enjoyment at work by 20% by March 2020  | SPoA, Single Point of<br>Access - Queensborough<br>House, Dunstable |
| 124236           | John Howard<br>Centre Unit - Sexual<br>Safety Collaborative   | To increase the percentage of service users and staff who feel safe from sexual harm within mental health and learning disabilities services  | John Howard Centre  |
| 124255           | Ruby/Ivory Wards -<br>Sexual Safety<br>Collaborative  | To increase the percentage of service users and staff who feel safe from sexual harm within mental health and learning disabilities services  | Newham Centre for Mental<br>Health                                  |
| 127250           | Pressure ulcer<br>reduction Project   | To improve the quality of life by reducing the number of patients with pressure ulcers by 10% by June 2022 across ELFT $$   | ELFT Community Health<br>Services, ELFT CHS                         |
| 130002           | Service User<br>Involvement with<br>Staff Interviews  | Increase Service User/Carer overall satisfaction with the process of involvement in staff interviews from 30% to 75% by 31 March 2023 (Operational definition of very satisfied and somewhat satisfied)             | People Participation<br>Newham                                      |
| 130193           | Increasing the Co-<br>production of<br>Improvement  | To increase co-production of improvement across ELFT  |   |
| 130319           | Time to Hire  | 'To reduce the time it takes to hire (from advertising a role to offering an unconditional offer of employment) from 73 days to 45 days for chosen directorates/services by 31st December 2021                      | People & Culture  |
| 132143           | Improving<br>responsiveness of<br>ad hoc information<br>requests  | To ensure no information request waits over 14 days unless agreed by requestor and informatics by March 2021  | The Green   |
| 134076           | Increasing the<br>uptake of group<br>therapy at Tower<br>Hamlets Talking<br>Therapies   | Increase group uptake (% patients moving into groups stage in therapy) by 50% by January 2022   | Tower Hamlets Talking<br>Therapies                                  |
| 134538           | Increasing<br>Awareness of<br>Stakeholders to<br>Newham Telehealth<br>Service   | To increase referrals to Newham EPCT Telehealth Service by 30% in six months from the start of the project (July to Dec 2021)   | Telehealth Team, East Ham<br>Care Center                            |
| 134792           | Quality<br>Improvement Team<br>Welcome Project  | All staff joining the QI Team to feel well equipped and prepared in their first two weeks by receiving the induction process (i.e. scoring their experience 4/5 or above)   | ELFT QI Team  |
| 135972           | Armed Forces<br>Community at ELFT:<br>meeting the<br>required standards<br>of the Veterans<br>Healthcare Alliance   | We commit to work together in partnership to build health and social opportunities for<br>Veterans and their families to ensure acceptance and adding value to the Veterans<br>community                            | Veterans Healthcare Alliance  |
| 136992           | Improving access to preconception   | AIM: To increase the number of referrals for Perinatal preconception counselling to 3 per month by August 2023  | City and Hackney - Perinatal<br>Mental Health Service               |

|        | counselling for<br>women with serious<br>mental illness (SMI)   | . •  |  |
|--------|---|--|--|
| 137714 | Return to workplace<br>- Quality<br>Improvement Team  | for all staff in the QI department to have a positive or very positive experience* of returning to office-based working by end of March 2022   | QI Team                                    |
| 139514 | Improving access to<br>DeanCross  | -To improve access to Service Users to DeanCross by Sept 2022 to represent the population of Tower Hamlets -To increase access of BAME Service Users by 30% by Sept 2022   | Dean Cross Personality<br>Disorder Service |
| 139542 | START   | To improve physical health and well-being of services users by 20% (by improving self-worth, self-care and activity levels) by Nov 2022  | Butterfield Ward - Wolfson<br>House        |
| 139860 | Trust Wide New<br>Starter Project<br>(Smart Card /IT)   | To improve the time that staff are equipped with systems access and digital within 5 days by March 2022  | QI Team                                    |
| 139978 | Improving access to self-service analytics across the trust   | To increase the average number of people using self-service PowerBI analytics on a weekly basis from an average of 40 per week (0.5% of permanent staff) to an average of 400 per week (5% of permanent staff) by September 2023   | Informatics department, The Green          |
| 139985 | Reducing Agency<br>Spend  | To reduce Agency spend by 25% by Dec 2022  | Trust-wide                                 |
| 140053 | Extra Care  | To improve the effectiveness and quality of observation practice at NCFMH to 95% by April 2023. Operational Definitions: Good quality extra care practice = Service user involvement, clear rationale for observations, clear escalation process, specifies how often checks should be done, what actions the observer should take when carrying out checks. Effective extra Care = There should be a care plan on Rio and on the observation folder, reviews should be done as per policy (24 hour nursing / 72 hour MDT), where observations are terminated, there should be a clear reason for this on the progress notes and it should be clear who is making the decision. Checks should be done timely and clearly documented. | Newham Centre For Mental<br>Health         |
| 140288 | Reducing Health<br>Inequalities in<br>Primary Care at East<br>London NHS<br>Foundation Trust  | To increase cervical screening uptake amongst the 25-64yrs age group at Cauldwell Medical Centre from 54% to 80% by March 2023   | Across Primary Care                        |
| 140547 | Crisis Line/UAT QI<br>Project   | To improve staff experience to 50% reporting enjoying work by August 2022.   | City and Hackney Crisis<br>Team            |
| 140950 | To effectively gather service user feedback in order to better understand and improve a service users experience as they enter TH CAMHS | To increase the percentage of surveys completed by service users of the TH CAMHS Front Door from an average of to by September 2023  | Tower Hamlets CAMHS -<br>Triage            |
| 140980 | CAMHS Provider<br>Collaborative SHNA<br>Action Plan   | To plan and drive improvement actions following SHNA   | NCEL Provider Collaborative                |
| 141938 | Inequalities in South<br>Luton Project  | Purpose Statement: To improve mental health for children and young people living in the diverse communities of South Luton. Population Level Drivers: - Meeting MH Community Needs - Developing Community MH Assets  | South Luton                                |
| 141939 | Equality QI project   | To increase Newham Talking Therapies referrals from black males aged 18-25 years old from 15.5% to 18% percentage by December 2023   | Newham Talking Therapies                   |
| 142102 | Increasing access to<br>brief interventions<br>and support for<br>people who are<br>presenting to CMHT<br>with increasing<br>distress   | The Project Group aims to develop clinical offers for service users whose needs increase but who do not need level of intensity of service provided by Crisis Resolution and Home Treatment Service but for whom planned, prompt, targeted short term intervention is likely to reduce distress, promote solutions and prevent further deterioration or relapse in mental state. The SMART aim will be developed as soon as we have some detailed baseline data/measures worked up. It is likely to relate to decreased use of CRHT/Out of Hours/Duty for repeat calls, and increased service user satisfaction (focus group)  | Bedford CMHTs                              |
| 142144 | Reduce Secure<br>Ambulance Spend<br>by x% in City &<br>Hackney by 30-Apr-<br>22   | To improve the value for money offered by service user transport in the City & Hackney Mental Health Directorate, by 30 June 2022. The improvement will be two-fold: to increase service user satisfaction with the service by x% and to reduce the cost associated with the service by £x.  | City and Hackney Homerton<br>East Wing     |
| 142430 | Getting the right<br>support at the right<br>time for people with<br>learning disabilities  | To reduce the waiting times for all disciplines and make sure people with learning disabilities get the right support at the right time, whilst also improving staff and service user satisfaction.  | City and Hackney, ILDS                     |

in Hackney 142587 Chronic Kidney To improve the percentage of patients who have CKD being correctly coded with CKD Cauldwell Medical Centre disease (Cauldwell) from 44 % of expected to 60% of expected in 6 months. Achieve a 5% reduction in median baseline body weight amongst Broadgate inpatients 142888 Improving the Broadgate Ward Cardiometabolic over the next 4 months. Health of service users on Broadgate Ward 142999 To reduce the non-attendance /DNA rates for routine appointments at P2R (by ?% by ? Main LEAD members are How can we improve the routine date) QI project? to reduce DNA rate at all clinical and keyworker appts Background P2R based at Bedford P2R Drug is a drug and alcohol service with main hubs in Bedford and Dunstable, providing drug attendance rates at & Alcohol Services - 21 The P2R? and alcohol recovery services to people living in Bedford Borough and Central Crescent, Bedford, MK40 Bedfordshire. ELFT has held the contract for services since 2015. The service provides support through recovery work sessions (psychosocial interventions), needle exchange services, group work, physical health assessments and medical assessments for prescribed medication initiation and review. At the point of the first national lockdown for Covid in March 2020, the service operated a face to face service for clients for all their appointments, in common with most community services. After the lockdown, almost all interactions became remote using a combination of telephone and video calls. The lockdown also led to a rapid change in other functions of the service, including the administration of prescriptions. Prior to lockdown, clients would almost always collect their own prescriptions during a ?key working? session with their ?keyworker?; after lockdown, clients were no longer seen for key working sessions face to face and prescriptions were couriered in bulk to pharmacies. While this allowed continuity of treatment, it introduced a break in the normal cycle of client engagement with the service. As the first lockdown went on for so long, it led to a fundamental change in normal ways of working. It became clear over the first six to twelve months that clients were not answering phone calls to keyworkers. When clients had previously been seen face to face, their prescription would have been held back at the treatment hub if they did not attend a booked appointment; this allowed for close monitoring of compliance with treatment and early intervention by the keyworker if the client did not attend. It also ensured that clients who may have been engaging in riskier practice and not collecting or taking their medication as prescribed, were identified quickly and additional contact could be attempted in a timely way. As prescriptions were sent out in bulk, it became more difficult to stop or hold prescriptions in a timely way when someone did not attend an appointment or answer their phone. It could be two or three weeks between a missed appointment and a prescription being held back at the hub, as prescriptions were typically sent out at least 2 weeks in advance of the start date. This was to ensure there was continuity of treatment and that our pharmacy colleagues, also under enormous workload pressure in the community, were able to plan ahead for observed consumption or daily dispensing work. In the initial weeks after lockdown, most clients engaged very well and many had more contact than they may have done if they had only been seen face to face. However, there was a small contingent, around 10% of our population, who were very difficult to engage. This group was those who were homeless or already engaging in risky drug use behaviour prior to lockdown. They became harder to contact and engage with, and many of these clients remained on a supervised consumption regime. Over the following 6 months, there was a gradual rise in the number of other, less risky,

clients not engaging well with treatment. In turn, over the next 3-6 months this led to a steep rise in non-attendance at prescriber appointments. On some days this was 100% of appointments, but regularly ran at 50% by mid 2021. This resulted in significant wasted time and resources, including time spent by keyworkers then following up clients who had missed appts, re-bookings and further non-attendance at rebooked appts. In late 2021, prompted by prescribers reporting a very high demand for appointments together with a very high non-attendance rate, a review of how appointments were used was carried out. This revealed that clients were not attending appointments or not answering phone calls with keyworkers up to three months prior to an appointment being booked with a prescriber for a review of their medical treatment. It became clear that an appointment with a prescriber was being used as a final effort to engage a client in treatment, with medication regime review or change being given as a consequence for non-attendance at the medical appointment. The main point that emerged was that medication regime change was only introduced as an idea by many keyworkers once non-attendance had been established for many months. The service operational policy allows for prescriptions to be withheld at much earlier points when a client is disengaged from treatment, but does require the keyworker to ensure the currentlyrunning prescription is proactively stopped. Interventions tried to remedy poor

143407

Reducing wait times on the over 13's ASC assessment pathway

Reduce the number of days it takes between someone having their first autism assessment to recieving the outcome of their assessment from an average of 108 days to 60 days by December 2023.

engagement 1. Holding prescription at hub? generally successful if carried out but could force clients to ?drop off? treatment, so best not to do this at end of the week. Also requires keyworker to proactively stop a current prescription to avoid a further 2-3 weeks of medication being dispensed on current regime. 2. Text / phone reminders? less successful, clients would ignore calls on day of appt if did not want to attend. This was a v good indicator that client would DNA. 3. Sending reminders via pharmacy, similar success to (2) Because of the high workload of keyworkers chasing up clients for prescriber appointments, repeat non-attendance at keyworker appointments prior to non-attendance at prescriber appointments and failure of current service interventions to improve attendance, we decided to use QI approaches to find root causes of all the

Bedfordshire

| 143654 | WARDS - Working<br>across wards, a<br>review and<br>development of<br>solutions                           | Improved staff experience (insert measure?) of daily redeployment, through staff engagement and instigating change initiatives (time frame?)   | Bedford Hospital NHS<br>Foundation Trust             |
|--------|---|--|--|
| 143995 | Reducing Staff<br>Vacancies In The<br>Primary Care<br>Directorate   | To reduce Vacancy rate from 16.4% to 10% and Turnover rate from 19% to 15% in Primary Care Directorate by June 2023  |  |
| 144507 | To Improve<br>Communication<br>between GP Teams<br>and ELFT Tower<br>Hamlets Community<br>Health Services | To reduce the percentage of rejected GP referrals out of total GP referrals into Foot Health and Continence Services to less than 20% by May 2024  | Beaumont House Mile End<br>Hospital                  |
| 144674 | LGBTQ Network: to<br>increase the<br>membership from<br>273 to 373 by 30<br>November 2023                 | to increase the LGBTQ Network membership from 273 to 373 by 30 November 2023   | Corporate  |
| 144781 | Reduction of<br>mileage claims and<br>reduction in carbon<br>footprint                                    | Reduce costs, reduce Co2   | Trustwide  |
| 144842 | Gerkenwell ward wellbeing project   | We aim to improve the wellbeing measures of patient and staff on Clerkenwell Ward by June 2023.  | Clerkenwell Ward                                     |
| 144924 | PATHWAYS - A new app supporting service-users and staff to visualise the recovery journey.                | To improve the tracking, centralisation and digitisation of service-users' progress through their recovery pathway, from admission to discharge by 15% within 12 months.   | John Howard Centre                                   |
| 145415 | Increasing Equity<br>for BAME Service<br>Users in Forensic<br>Services                                    | To improve BAME service users engagement, experience and outcome in relation to East London Community Forensic Service   | East London Community<br>Forensic Service            |
| 145686 | SPS C&H<br>Assessment QI<br>Project   | To provide timely, holistic assessments by reducing waiting time to assessment by X% and improve quality of assessment (as agreed by our quality criteria) so that X% assessments meet criteria by ? 2024.                       | Specialist Psychotherapy<br>Services C&H             |
| 145943 | Reducing Gender<br>Pay Gap in Doctors<br>at ELFT  | To increase the number of interventions within ELFT that specifically target the gender pay gap in medicine  |  |
| 145991 | Walking aid reuse   | To reuse an average of 16 walking aids per month in the Newham MSK department by March 2023  | Physiotherapy Service,<br>Community Health Newham    |
| 146020 | Tower Hamlets<br>Extended Primary<br>Care Team - Adult<br>Community Therapy<br>Waiting Times              | All new service users accepted to the EPCT therapy waiting list to receive an initial therapy assessment within 6 weeks of referral acceptance   | Virtual via MS Teams                                 |
| 146053 | Improving referrals for BAME detainees  | We aim to see our BAME detainees referred into our service at a proportionate rate as compared to the indigenous population.   | Liaison and Diversion<br>Service                     |
| 146547 | Reducing waiting<br>times for adult<br>autism services in<br>Tower Hamlets                                | To reduce the time people wait from point of referral to starting their autism assessment by 50% in 12 months.   | Tower Hamlets Autism<br>Service, 51 Three Colts Lane |
| 146830 | Trauma Informed<br>Care on Limehouse<br>Ward  | To improve staff and service user satisfaction through adopting trauma informed care approach  | Limehouse Ward, John<br>Howard Centre                |
| 147021 | Access and Flow -<br>CAMHS Newham   | Reduce the time Young People in Newham CAMHS wait from referral to assessment to 9 weeks   | York House, 411 Barking Rd<br>London, E13 8AL        |
| 147184 | Ruby Ward<br>Optimizing Flow  | Improve transfers Ruby Ward to the acute wards in NCfMH by reducing the length of time on the Triage ward from 13 days to 10 days by August 2023. Improve patient and staff experience of the transfer process by December 2023. | Virtual  |
| 147344 | To improve quality of care for patients by increasing the   | To increase the proportion of posts that are substantively filled by 30%   | ELFT Luton and<br>Bedfordshire Mental Health         |
|        |   |  |  |

|        | substantive/fixed-<br>term medical<br>workforce in Luton<br>and Bedfordshire by<br>30% in one year.  |   |  |
|--------|--|---|--|
| 147413 | Improve patient experience of transition to adulthood for SCYPS transition caseload.   | Improve reported experience of transition from a mean score of 2.2 out of 5 to 4 out of 5 by April 2023.  | West Ham Lane Health<br>Centre   |
| 147446 | Enjoying Work at<br>Tower Hamlets<br>Talking Therapies   | By end of June 2024, we aim to increase how much our staff agree with the statement ?I enjoy my work? to 5.5 on a 7 point Likert scale  | Tower Hamlets Talking<br>Therapies   |
| 148126 | Observations and<br>Therapeutic<br>Engagement  | To make observations safe, effective, meaningful and collaborative in the Forensic Service from XXX to XXX by May 2024.   | Forensic Directorate   |
| 148128 | Let's Talk: Improving the Experience of Community Mental Health Services for Black, Asian and Minority Ethnic People in Tower Hamlets, Newham and City and Hackney | To improve the experience of community mental health services for Black, Asian, Minority Ethnic People in Tower Hamlets, Newham and City & Hackney  |  |
| 148148 | Increasing ?Big I?<br>People Participation<br>in the Cancer and<br>Palliative Care<br>Psychology Service.  | We aim to have increased the incidences of ?Big I? Service User/Carer involvement in the Cancer and Palliative Care Psychology Service (by end of 2023).  | Cancer and Palliative Care<br>Psychology Service,<br>(Mountbatten House,<br>Dunstable) |
| 148567 | Happy Staff Happy<br>Outcomes  | We, the staff of the acute crisis settings in Newham, aim to implement 3 (or more) well-being initiatives which become normal workplace culture, to improve staff satisfaction at work by December 2023 because happy staff equals happy outcomes for service users.  | Newham University Hospital<br>and Newham Acute Day<br>Hospital                         |
| 148625 | Improving the<br>support offered to<br>informal carers<br>(Tower Hamlets<br>Community Health<br>Services)  | To increase the number of informal carer's details recorded on EMS by 50%. For 90% of all identified carers to be offered an opportunity to discuss their own support needs.  | Tower Hamlets Community<br>Health Services   |
| 148707 | Improve experience<br>of young people at<br>Coborn who identify<br>as LGBTQIA+   | For 80% OF YOUNG PEOPLE admitted at the have the experience of appropriate pronouon use at the Coburn.  | The Coborn Center for<br>Adolescent Mental Health                                      |
| 148810 | Improving Referral<br>Flow in Admission<br>Avoidance Team  | 1. To reduce length of stay in acute hospital 2. To streamline referral process from ED/CDU to the community Intermediate Care Pathway within the team 3. To improve patient experience and satisfaction 4. To provide timely intermediate nursing input 5. To coordinate appropriate nursing follow up within DN locality 6. To increase capacity of the number of patients seen in ED and CDU | ED/CDU RLH   |
| 148839 | Reducing the<br>amount of<br>indwelling catheter's<br>in Community<br>services.  | To reduce the number of long term indwelling urethral catheters on the community nursing caseloads within BCHS by 10% in the next 6 months. This will improve patient experience by reducing the risk of infection and quality of life.   | BCHS   |
| 148851 | Promoting suitable<br>referrals to CRHTT<br>from PLS Bedford   | By December 2023, Increase the number of referrals taken on for home treatment by the CRHTT following referral from PLS by 20%.   | Bedford Hospital   |
| 148865 | Improving staff<br>well-being  | Increasing sense of well-being and connection for Tower Hamlets CAMHS staff. We hope to increase staff sense of connection to self, to colleagues and to the purpose of the work and the workplace by 1 star by the end of 2023. We also hope to decrease the sense of burnout to indication of no sense of burnout in majority of staff.   |  |
| 148925 | Access to perinatal mental health team   | All woman in Beds and Luton are able to access the right care at the right time in the right place from the perinatal mental health team - We aim to increase the number of referrals to the team to an average of 100 per month, by October 2024.  | Bedfordshire and Luton   |
| 149007 | Reducing DNAs<br>across BCHS   | Reduce the amount of DNAs recorded across BCHS  | Bedfordshire Clinics   |

| 149018 | Reducing the Adult<br>Speech & Language<br>Therapy Service<br>community swallow<br>waiting list from 37<br>weeks to 18 weeks              | The Adult Speech & Language Therapy Service will reduce the community swallow waiting list from 37 weeks to 18 weeks by December 2023  |   |
|--------|---|--|---|
| 149147 | Engagement Project  | To reduce gaps in observation practice: For 100% of observations to be carried out including documented reasons for omissions by December 2023   | City and Hackney Centre for<br>Mental Health  |
| 149156 | Therapeutic<br>engagement &<br>observations in<br>Tower Hamlets   | For all our therapeutic engagement & observations to promote safety & well being across our inpatient wards by December 2023   | Tower Hamlets Inpatient<br>Wards - Burdett House  |
| 149187 | To reduce inappropriate non sterile glove use across the Luton and Bedford inpatients wards by March 2023.                                | To decrease inappropriate glove usage amongst ELFT staff on the Luton & Bedfordshire Inpatient wards Crystal and Fountains Court by December 2023.   | Luton & Bedford In patient<br>Wards Orystal/Fountains<br>Court  |
| 149196 | Increase the racial<br>diversity of service<br>user participation<br>for co-production in<br>Bedford and Central<br>Bedfordshire          | To have more service users within BCHS People Participation from a racially diverse background   | Bedford   |
| 149262 | Service User<br>Qualitative<br>Feedback   | By May 2023, we the Steps to Wellness team will receive qualitative service user feedback of 50% of all service users who attend the first and/or last group therapy session in Steps to Wellness.   |   |
| 149281 | Improving the experience of transitions for young adults  | By May 2024, we will ensure that the standards for transition are being met for young people transitioning from CAMHS to Adult services (NMHT) as documented in the transition policy. This will ensure an improved experience of transition for the young person and their carers | Tower Hamlets   |
| 149468 | Ensure all palliative<br>and end of life<br>patients have<br>advanced care plans<br>that include<br>preferred place of<br>care and death. | Increase the number of palliative patients on BCHS community nurse caseload who have a recorded Preferred place of care and preferred place of death within their SystmOne record to 60% or over by June 2023  | Bedfordshire community<br>health services trust wide  |
| 149471 | Improving<br>Connectivity of the<br>Team  | We want to increase how connected BTT staff feel to other members of the team, to increase wellbeing and knowledge sharing by Dec 2023.  | Bedfordshire Talking<br>Therapies   |
| 149589 | Improve carer involvement and satisfaction in Luton CMHTs   | Improved methods for recording carer data Greater satisfaction by staff and carers in support for carers/involvement with carers   | Luton CMHTs   |
| 149597 | Safeguarding<br>Pathways in Primary<br>Care Directorate   | We at the primary care directorate will codesign with our trust, staff and service users a safeguarding pathway to reduce potential harm due to delay in completing the safeguarding tasks across the sites in the directorate by June 2023 by 50%                                 | Primary Care Directorate  |
| 149625 | Police Response   | Increase the number of investigations by the police. Actions taken by the police on incidents reported.  | Oakley court - Ash ward -<br>Luton  |
| 149666 | Improving<br>Functionality of<br>Oracle   | To ensure 90% corporate requisitions are paid within one month by 31 May 2024  | Trust HQ, Alie Street   |
| 149677 | Improving Therapeutic Observations and Engagement in Luton and Bedfordshire MH Inpatient Wards  | Improve the Completion of Therapeutic Observations and Engagement on the Ward to 100%  | Luton and Bedfordshire MH<br>Inpatient Wards - Townsend<br>Court, Onyx Ward, Crystal<br>Ward, Coral Ward and<br>Fountains Court |
| 149840 | Service User<br>Feedback at<br>Leighton Buzzard<br>CMHT   | To increase the amount of service user feedback received via the RateMyNHS website at the Leighton Buzzard CMHT Service to 15-20 responses a month within 6 months.  | Orombie House Leighton<br>Buzzard CMHT  |
| 150191 | Patient Flow in<br>Forensic Services  | Maintaining Flow; Tackling Stuckness: To ensure our patients are in the minimally restrictive Forensic setting to maximise their quality of life, whilst ensuring services and individuals are safe  | Forensic Services   |

| 150298 Central Bedfordshire   Medication Flow and Communications Project   Central Bedfordshire community mental health services by September 2024.  |
|--|
| efficiency of referral to diagnosis pathway for Bedfordshire Chronic Fatigue patients  To improve patient attendance at the podiatry clinic within the John Howard Centre  To reduce the number of patients not attending their podiatry appointments by 12.5% ( 2 out of 16 patients DNAs) by the end of November 2023.  To reduce the number of patients not attending their podiatry appointments by 12.5% ( 2 out of 16 patients DNAs) by the end of November 2023.  To reduce forensic services expenditure on transport by 10 percent by end of March 2024  John Howard Centre  To reduce forensic services expenditure on transport by 10 percent by end of March 2024  John Howard centre evergencen  Reducing high frequency use of emergency services by mental health services by mental health services by the end of 2024. The QI project is to reduce mental health high intensity users' self-presentations via Homerton Hospital emergency department by 30% of total attendances by the end of 2024. The QI Project relates to improving the crisis pathway for high intensity users with mental health difficulties. The aim is to support service users by identifying more appropriate pathways for mental health needs as an alternative to emergency department. Objectives: -To support service users by identifying appropriate pathways for mental health needs as an alternative to emergency department -To understand gaps in current pathways. To identify current reasons for recurrent attendances. All community mental health services to make clear service users by identifying appropriate pathways for mental health services to make clear service percovicions -To empower service users to users to user available resources in the community.  To achieve 50% recovery rate with Bangladeshi patients accessing Tower Hamlets Talking Therapies Talking Therapies Tower Hamlets Talking Therapies   |
| attendance at the podiatry clinic within the John Howard Centre  150408 U of Transport To reduce forensic services expenditure on transport by 10 percent by end of March 2024 John Howard centre  150454 Admissions Optimisation - Evergreen  Reduce length of stay at inpatient unit  The aim of the QI project is to reduce mental health high intensity users' self-presentations via Homerton Hospital emergency department by 30% of total attendances by the end of 2024. The QI Project relates to improving the crisis pathway for high intensity users with mental health difficulties. The aim is to support service users by identifying more appropriate pathways for mental health needs as an alternative to emergency department. To understand gaps in current pathway -To identify current reasons for recurrent attendances -All community mental health services to make clear service provisions -To empower service users to use available resources in the community.  To achieve 50% recovery rate with Bangladeshi patients accessing Tower Hamlets Talking Therapies  To achieve 50% recovery rate with Bangladeshi patients accessing Tower Hamlets Talking Therapies  To achieve 50% recovery rate with Bangladeshi patients accessing Tower Hamlets Talking Therapies   |
| 150454 Admissions Optimisation - Evergreen  Reduce length of stay at inpatient unit  The aim of the QI project is to reduce mental health high intensity users' self- presentations via Homerton Hospital emergency department by 30% of total attendances by the end of 2024. The QI Project relates to improving the crisis pathway for high intensity users with mental health difficulties. The aim is to support service users by identifying more appropriate pathways for mental health needs as an alternative to emergency department. Objectives: -To support service users by identifying appropriate pathways for mental health needs as alternative to emergency department -To understand gaps in current pathway -To identify current reasons for recurrent attendances -All community mental health services to make clear service provisions -To empower service users to use available resources in the community.  To achieve 50% recovery rate with Bangladeshi patients accessing Tower Hamlets Talking Therapies  To achieve 50% recovery rate with Bangladeshi patients accessing Tower Hamlets Talking Therapies  Tower Hamlets  |
| Optimisation - Evergreen  Reducing high frequency use of emergency services by mental health service users who self-present.  The aim of the QI project is to reduce mental health high intensity users' self-presentations via Homerton Hospital emergency department by 30% of total attendances by the end of 2024. The QI Project relates to improving the crisis pathway for high intensity users with mental health difficulties. The aim is to support service users by identifying appropriate pathways for mental health needs as an alternative to emergency department -To understand gaps in current pathway -To identify current reasons for recurrent attendances -All community mental health services to make clear service provisions -To empower service users to use available resources in the community.  To achieve 50% recovery rate with Bangladeshi patients accessing Tower Hamlets Talking Therapies  To achieve 50% recovery rate with Bangladeshi patients accessing Tower Hamlets Talking Therapies by 2024  |
| frequency use of emergency services by mental health service users who self-present.  Tower Hamlets Talking Therapies  presentations via Homerton Hospital emergency department by 30% of total attendances by the end of 2024. The QI Project relates to improving the crisis pathway for high intensity users with mental health difficulties. The aim is to support service users by identifying more appropriate pathways for mental health needs as an alternative to emergency department. Objectives: -To support service users by identifying appropriate pathways for mental health needs as alternative to emergency department -To understand gaps in current pathway -To identify current reasons for recurrent attendances -All community mental health services to make clear service provisions -To empower service users to use available resources in the community.  To achieve 50% recovery rate with Bangladeshi patients accessing Tower Hamlets Talking Therapies  Tower Hamlets Talking Therapies   |
| Talking Therapies Talking Therapies by 2024  |
|  |
| Understanding and removing barriers for underrepresented groups, to match the borough population as indicated by census data, with respect to those offered an assessment at PTS, i.e.: over 65s 6%, people of BAME heritage 61% and men 50%.  By January 2024 we aim to improve access for underrepresented groups, to match the borough population as indicated by census data, with respect to those offered an assessment at PTS, i.e.: over 65s 6%, people of BAME heritage 61% and men 50%.  |
| TH Pharmacy discharge discharge medication service and project Increase Discharge Medication Service referrals from 0% to 20% of all discharges from Mile End Hospital Mile En |
| To improve the waiting list connected to our service whilst waiting or have other services or activities we can signpost them to.  |
| Reducing the delayed discharges thereby improve case management   Oity and Hackney delayed discharges from 70% to 30 % in CH HTT   |
| 151306 Improving the recording of fridge temperatures  Improve Record Keeping of Fridge Temperature develop system of daily Resetting of Morrison and Ludga Morrison and Mor |
| To Improve Young People & Staff Experience of Therapeutic Engagement in CAMHS Inpatient Units  Our Aim Is For 100% Of Therapeutic Observations To Be Completed Including Documented Reasons For Omissions, By December 2024. Outcome measure - % of engagement completed per 24hrs No. of intermittent engagement / 1:1 engagement per 24hrs No. of incidents per 24hrs  |
| SMI (Severe Mental Illness) Engagement Project within Primary Care Mental Health.  Identify BAME clients on Hatters Health PCN SMI register who have not engaged with primary care mental health service for the last 2 years and improve on engagement and uptake of biopsychosocial intervention from 20% to 80%.  Luton Primary Care (Hatters Health and Number of the last 2 years) Health and Number of the last 2 years and improve on engagement and uptake of biopsychosocial intervention from 20% to 80%.  |
| 151551 Addressing resid Deducing resid and others disposition in second to Nauham CDC Nauham   |

| 131331 | and ethnic<br>inequalities in<br>Newham Specialist<br>Psychotherapy<br>Service   | reducing radai and edinic dispantes in access to Newnant SFS.  | rvevvitatri  |
|--------|--|--|--|
| 151561 | Improving early<br>detection rates of<br>dysphagia in<br>forensic services.  | To stabilize referral trends for dysphagia: from up to 90% being in response to severe needs or incidents, to 50% being in response to early signs of need, by June 2024 To increase non-urgent referrals from X% to Y% by June 2024                     | East London Foundation<br>Trust, Forensic inpatient<br>secure wards. Westferry,<br>Bow and Clerkenwell wards |
| 151571 | Increasing Psychology Case Consultation Provision To 100% Of The Early Intervention Service Caseload Within 8 Weeks of Acceptance Into The Service | Increase psychology case consultation provision to 100% of the Early Intervention Service (EIS) caseload within 8 weeks of acceptance into the service.  | Bedfordshire and Luton<br>Early Intervention Service   |
| 151599 | The Identity and<br>Intersectionality<br>Project   | We want to improve service user experience of care and treatment by ensuring staff are informed of how someone's mental health difficulties can look like with different identities (and intersectionalities).   | Newham   |
| 151623 | Increasing Quality<br>of Feedback from<br>Clinicians to Young<br>People  | Enhancing feedback quality from clinicians to young people and reducing timespan of feedback received to within a month  |  |
| 151683 | Improving Service<br>Users' participation<br>into service<br>development.  | To improve number of activities with SUs' involvement for our practice to be better informed by SUs' experience.   | Bedfordshire and Luton<br>Community Eating<br>Disorders Service for<br>Children and Young People             |
| 151727 | SMI Health Checks<br>in Primary Care   | Increase uptake of SMI health checks, identify barriers - including training for staff to ensure that checks can be completed in a one stop shop model, ensure effective coding. To be implemented, tested and reviewed for full roll out by March 2024. | Bedfordshire Primary Care  |
| 151803 | Reducing the use of single cutlery   | To reduce the use of disposable cutlery by 80%   | JHC  |
| 151909 | SCYPs NDC<br>Optimising Flow<br>2023   | To have NDC initials seen within 18 weeks and NDC Reviews seen once a year   | West Ham Lane  |
| 151940 | 72 Hour Follow-Up  | To provide focused recommendations to improve the completion rate of the 72 hour follow-up plan on discharge.  | ELFT, Luton  |
| 151942 | Reduce the number<br>of incidents<br>reported for quality<br>issues relating to<br>discharge from<br>Royal London<br>Hospital                      | To reduce the number of reported discharge quality issues by 50% by 03/2024  | Mile End   |
| 151987 | Improving the patient experience of the sickle cell clinics post Covid   | Optimising flow in clinics that benefits patient experience  | Sickle Cell and<br>Thalaessaemia Service, 19-<br>21 High St South  |
| 152086 | Smoking Cessation<br>post discharge 6<br>week community<br>clinic follow up  | Effectiveness of 6 week post discharge Community smoking clinic started February 2023 and by October want to increase the number of uptake of follow up patients   | Luton and Bedford  |
| 152093 | Improving shared<br>learning from safety<br>incidents  | To increase staff's exposure to patient safety learning, as measured by number of staff accessing safety learning material, and number of forums that include safety case material - by the end of Aug 2024  |  |
| 152113 | Reducing DNA Rates<br>and Improving<br>Health Equity in a<br>Specialist CAMHS<br>Neurodevelopmental<br>Service                                     | To reduce the number of DNAs overall & reduce the number of DNAs from those living in neighbourhoods falling within the top 3 deciles of most deprived areas in England.   | City & Hackney Specialist<br>CAMHS (Homerton Row)  |
| 152117 | To Improve the<br>Physical Health of<br>THEIS Service Users  | To improve the Physical Health of THEIS Service Users by improving Assessment & Interventions of Physical Health Checks and Healthy Lifestyles and achieve >90% PASS on Physical Health Checks aligned to CQUIN Data                                     | THEIS & Tower Hamlets  |



|                                      | by improving<br>Assessment &<br>Interventions of<br>Physical Health and<br>Lifestyle   |   |   |
|--------------------------------------|--|---|---|
| 152261                               | Improve anti-<br>coagulation control<br>for heart valve<br>patients  | 6 months after implementing the changes 20% of our patients with mechanical heart valves will have LMWH if their INR is below their range.  | Twinwoods   |
| 152560                               | Cultural<br>Neuropsychology  | To be make our neuropsychological practice more culturally inclusive.   | Luton and Bedfordshire<br>MAS   |
| 152597                               | Improving access to<br>Eating Disorder<br>Support for<br>residents of<br>Newham  | We are aiming to improve access to Eating Disorder Support for residents of Newham by 100% by December 2023   | Mile End Hospital   |
| 152840                               | Reducing falls on<br>Sally Sherman ward  | To reduce falls rate on Sally Sherman ward by 30% (from 5.4 to 3.7 per 1,000 occupied bed days) by April 2024 $$  | East Ham Community<br>Centre  |
| 152861                               | Triple Aim - People with learning disabilities who present with behaviours that challenge living in the London borough of Newham   | Improving the quality of life for people with learning disabilities living in Newham  | 29 Romford Road, E15 4LY  |
| 152899                               | Reduction of<br>admission to A&E<br>from Poplars Ward  | We staff at poplars ward (Older people inpatient ward) together with few of our service users and under the guidance of our QI coaches aim to reduce the Number of readmission to General Hospital by 20% by June 2024 from inpatient elderly ward  | Houghton Regis  |
| 152916                               | Improving referrals<br>of patients on<br>clozapine to Luton<br>Psychiatric Liaison<br>Service (PLS)  | For 100% of patients on clozapine to be referred to PLS, within 24 hrs of their admission to hospital, by August 2024.  | The Luton & Dunstable<br>Hospital   |
| 152975                               | Learning<br>Disabilities- Breast   | To improve the uptake of breast screening for women with learning disabilities  | Newham Health Team for  |
|                                      | screening  |   | Adults with Learning<br>Disabilities  |
| 152991                               |  | To increase the proportion of referrals from those of Asian/South Asian Background to be representative of the local population (representative of the W5 school populations) by October 2023   |   |
| 152991<br>152997                     | Improving accessibility of MHST services for South Asian children and young people within Wave   | be representative of the local population (representative of the W5 school populations) by  | Disabilities  |
|                                      | Improving accessibility of M-IST services for South Asian children and young people within Wave 5 schools  Making our Tower Hamlets C-IS staff   | be representative of the local population (representative of the W5 school populations) by October 2023  Our project team will work together to help our Tower Hamlets CHS teams feels safer at work with a 10% increase in the safer score and over 80% of staff reporting they feel safer   | Disabilities  Luton CAMHS   |
| 152997                               | Improving accessibility of MHST services for South Asian children and young people within Wave 5 schools  Making our Tower Hamlets CHS staff feel safer at work  Improving Primary Care Clinical Systems Data  | Dur project team will work together to help our Tower Hamlets CHS teams feels safer at work with a 10% increase in the safer score and over 80% of staff reporting they feel safer at work by December 2023   | Disabilities  Luton CAMHS   |
| 152997<br>153001                     | Improving accessibility of M-HST services for South Asian children and young people within Wave 5 schools  Making our Tower Hamlets CHS staff feel safer at work  Improving Primary Care Clinical Systems Data Quality & Accuracy  Hospital and Community Carers   | Dur project team will work together to help our Tower Hamlets CHS teams feels safer at work with a 10% increase in the safer score and over 80% of staff reporting they feel safer at work by December 2023  Improve quality of data held in clinical systems by end of quarter one 2024.  By December 2023 a minimum of 90% friends, family and carers of a service user admitted to a C&H mental health ward, will have a positive experience of admission, stay,   | Disabilities  Luton CAMHS  Tower Hamlets  City and Hackney Center for                           |
| 152997<br>153001<br>153150           | Improving accessibility of MHST services for South Asian children and young people within Wave 5 schools  Making our Tower Hamlets CHS staff feel safer at work  Improving Primary Care Clinical Systems Data Quality & Accuracy  Hospital and Community Carers Service  CAMHS Crisis Team Improving Staff                           | Dur project team will work together to help our Tower Hamlets CHS teams feels safer at work with a 10% increase in the safer score and over 80% of staff reporting they feel safer at work by December 2023  Improve quality of data held in clinical systems by end of quarter one 2024.  By December 2023 a minimum of 90% friends, family and carers of a service user admitted to a C&H mental health ward, will have a positive experience of admission, stay, discharge and community support  To improve staff experience and morale at work by increasing current Star rating of 2 to   | Disabilities  Luton CAMHS  Tower Hamlets  City and Hackney Center for Mental Health             |
| 152997<br>153001<br>153150<br>153526 | Improving accessibility of MHST services for South Asian children and young people within Wave 5 schools  Making our Tower Hamlets CHS staff feel safer at work  Improving Primary Care Clinical Systems Data Quality & Accuracy  Hospital and Community Carers Service  CAMHS Crisis Team Improving Staff experience  Improving SpR | Dur project team will work together to help our Tower Hamlets CHS teams feels safer at work with a 10% increase in the safer score and over 80% of staff reporting they feel safer at work by December 2023  Improve quality of data held in clinical systems by end of quarter one 2024.  By December 2023 a minimum of 90% friends, family and carers of a service user admitted to a C&H mental health ward, will have a positive experience of admission, stay, discharge and community support  To improve staff experience and morale at work by increasing current Star rating of 2 to an average of 10 by Dec 2023.  Improve SpR cohesiveness and morale by 50% before the next changeover date (August | Disabilities  Luton CAMHS  Tower Hamlets  City and Hackney Center for Mental Health  Trust wide |

| 154845 | Improving the uptake of family intervention (FI) within Newham Early Intervention for Psychosis Service (NEIS)   | To increase uptake of FI from 9 to 16% in 12 months?   | Newham Early Intervention<br>Service, Appleby Health<br>Centre, 63 Appleby Road,<br>Canning Town, London, E16<br>1LQ |
|--------|--|--|--|
| 155082 | Staff on Staff<br>Racism, Forensic<br>Directorate  | Improve Staff Knowledge, Awareness and Reporting Racism by 20% by June 2024  | Forensic   |
| 155125 | Improving Physical<br>Health Monitoring<br>in the Newham<br>Home Treatment<br>Team   | We improve the physical health monitoring for all service users being cared for by the Newham Home Treatment Team. For 80% of service users under HTT to have their vital signs, BM, blood sugar, routine bloods, ECG and lifestyle assessment completed by the end of May 2024. | Newham Home Treatment<br>Team  |
| 155281 | The identification of<br>a non-healthy Body<br>Mass Index from an<br>inclusive Equity<br>perspective   | To increase identification of non-healthy BMIs (obesity) and increase offering of appropriate interventions as defined by NICE guidelines on Jade ward PICU, by 10 % by June 2024.   | Jade Ward  |
| 155437 | To reduce afternoon<br>handover while<br>ensuring relelvant<br>informationis<br>discussed  | To reduce afternoon handover time, to effectively handover relevant information on clients.  | beech close  |
| 155515 | Prevention and<br>Management of<br>Contractures in Care<br>Homes   | To reduce the number of referrals for management of severe contractures by 50% in one year.  | Primary Care at Home South   |
| 155981 | Improve service user experience of communication on Aldgate Ward, a service for people with autism.  | Improve communication to patients with autism  | John Howard Centre,<br>Medium Secure Forensic<br>Psychiatric Hospital, Aldgate<br>Ward - Autism Specialty<br>Ward    |
| 156135 | Improving trauma-<br>informed support<br>during pregnancy to<br>women from Black,<br>Asian and other<br>minority ethnic<br>backgrounds with<br>moderate to severe<br>fear of birth<br>(tokophobia) | To increase identification and support of moderate to severe tokophobia in birthing people from Black, Asian and other minority ethnic backgrounds by increasing tokophobia referrals from the Luton area to Ocean by 25% by October 2024  | Bedfordshire & Luton Ocean<br>service, Luton & Dunstable<br>Hospital   |
| 156142 | Catheter Project<br>Newham   |  | Newham   |
| 156146 | Improving Wound<br>Assessment  | To increase the number of fully completed wound assessments for patients with pressure ulcers, documented by District Nurses by 30% over the next 12 months (October 2024)   | Tower Hamlets  |
| 156189 | Management and<br>Reduction of<br>Catheter call outs in<br>RR  | To reduce No of frequent catheter call outs by 60% by End of September 2024  | Rapid Response THCHS   |
| 156206 | Increasing<br>Motivation Through<br>Activities   | We want a minimum of 3 Groups and Activities established weekly on Autistic ward by February 2024  | Aldgate Ward   |
| 156325 | Reducing<br>inequalities at End<br>of life care for<br>Bangladeshi and<br>other ethnic<br>minorities?<br>community in<br>Tower Hamlets   | 1. To improve End of life care and services for the Bangladeshi community from ?? to ?? by July 2024 2. To improve quality of life for the patients  | Tower Hamlets  |
| 156333 | Inpatient Quality<br>and Safety - Safety<br>Bundle   |  |  |
| 156345 | Increasing referrals   | Increasing referral of Newham and Tower hamlets Long covid Patients and Newham   |  |

|        | to Long Čovid and<br>Pulmonary<br>Rehabilitation<br>services   | Pulmonary Rehabilitation service by 5 % by March 2023.  |   |
|--------|--|---|---|
| 156470 | Delivering an online<br>Parkinsons teaching<br>programme to care<br>home staff, within<br>Bedfordshire   | To deliver a structured online teaching programme of 5 weekly sessions to care home staff within Bedfordshire   | Bedfordshire  |
| 156894 | Improving<br>Management of<br>Diabetes at<br>Cauldwell Medical<br>Centre   | Reduce number of patients with HbA1c 58 or more by 25% by April 2024  | Cauldwell Medical Centre  |
| 157030 | Improving access to<br>menopause<br>management and<br>support at<br>Cauldwell Medical<br>Centre  | Improve menopause management at Cauldwell Medical Centre by increasing service user satisfaction from XX to XX by December 2024   | Cauldwell Medical Centre  |
| 157053 | Improving the<br>experience of<br>informal carers as<br>part of hospital<br>discharge  | To ensure carers are identified, recognised, supported and made an integral part of the discharge planning process during acute hospital discharge.   | Royal London Hospital   |
| 157169 | To improve the whole staff experience to feel satisfied from offer of employment through to becoming an experienced member of admin staff in order to give our service users reassurance and confidence when communicating with our services | To improve the whole staff experience to feel satisfied from offer of employment through to becoming an experienced member of admin staff in order to give our service users reassurance and confidence when communicating with our services.   | Bedfordshire and Luton  |
| 157198 | C&H<br>Neighbourhoods<br>Waiting Times<br>Project  | To achieve target of 95% of first appointments being seen within 28 days in two Neighbourhoods.   | City and Hackney  |
| 157260 | Overweight and obesity management at ELFT Forensic Directorate   | What - We, the primary care team in the Forensic Directorate, want to provide structured weight management support, developed in collaboration with service users, supporters and the MDT, for those who live with overweight or obesity. Why - This is to improve service user satisfaction with available weight management support How good - by X% satisfaction score By when - by December 2024. Optimize and structure obesity management in the Forensic directorate | ELFT Forensic Directorate<br>(John Howard Center,<br>Wolfson House) |
| 157393 | Moving Forward-<br>improving<br>knowledge for<br>discharge on<br>Loxford ward  | To improve the understanding of and readiness for discharge of services users on Loxford ward by August 2024  | Loxford ward, Wolfson<br>House, Forensics- Low<br>Secure Services   |
| 157411 | Pharmacy Discharge<br>Medication Service   | To increase the number of patient referrals from all L+B inpatient wards to the discharge medication service (DMS)  | Luton   |
| 157417 | Optimising Flow on<br>Fothergill Ward  | To reduce average length of stay on Fothergill ward from xx to xx days by November 2024.  | Fothergill Ward   |
| 157478 | Reducing unplanned<br>hospital admissions<br>for End of Life/<br>Palliative patients<br>through integrated<br>working between<br>Community Health<br>and Home Care.  | To reduce the number of unplanned / avoidable hospital admissions for the residents of Tower Hamlets in the last months of life.  | ELFT Tower Hamlets<br>Community Health Services                     |
| 157500 | Strategic<br>recruitment   | Increase the number of delegates who attend our trainings (Master Classes & PQI) by $\rm X\%$ by $\rm X$ .  |   |
| 157525 | Improving the  | To improve the quality of the referral's made to Complex Care.  | Grove View Health Hub   |

|        | quality of referrals<br>into Complex Care  |  |  |
|--------|--|--|--|
| 157561 | Bridging The Gap:<br>Transition Project<br>for Children and<br>Young People  | We, will co-design a transition pathway for children and young people with epilepsy alongside our coach, sponsors, staff and service users. By developing and implementing this pathway, we will aim to reduce the number of young people transitioned from the children's community epilepsy service re attendance to the emergency department for prolonged seizures by 50% by December 2024.      |  |
| 157664 | Improving recovery<br>scores within<br>Talking Therapies<br>for clients aged 16-<br>21   | We at Bedfordshire Talking Therapies want to improve the recovery scores of clients aged 16-21 by 10% by December 2024.  |  |
| 157706 | CLDS Weight<br>Management  | Improving access to weight management services for CLDS service users  | Tower Hamlets                                  |
| 157743 | Improving<br>communication and<br>information sharing<br>regarding<br>medication.  | We aim to have 80% of our service users in the perinatal mental health service who are satisfied or very satisfied with the communication they received when starting or restarting medication by April 2024.  | John Bunyan House                              |
| 157762 | Improving the experience of admin staff answering telephone calls at the Bow and Poplar NMHT   | Improving the working experience for the Bow and Poplar NMHT admin staff answering telephone calls   |  |
| 157783 | Increase Community<br>referrals to Newham<br>Tobacco<br>Dependency Team<br>by working in<br>partnership &<br>collaboratively with<br>Newham Recovery<br>College                                    | Increase Referrals to Newham Tobacco Dependency Team   | Newham Directorate                             |
| 157794 | Combating the workforce crisis in the Trust by tapping into the SAS Doctors potential.   | To increase by 100% the number of SAS doctors gaining a internal promotion, And: To create a Community of Practice to initiate, measure and demonstrate improvements in the effective use of SAS doctors' expertise in ELFT.   | NE London                                      |
| 157809 | Children's Physio<br>Team QI Project -<br>PAC DNAs   | Understand and implement simple solutions to reducing DNA in our PAC clinic  | West Ham Lane and<br>Appleby Health Centre     |
| 157826 | Reducing waiting<br>lists for EPCT<br>Therapy teams in<br>Newham   | To reduce waiting lists from xx to xx within EPCT therapy workforce by April 2024, with a view to improving efficiency and enhancing patient and staff experience.   | CHS Newham Adult<br>Therapies EPCT             |
| 157840 | To increase the reach of Personal Health Budgets in City and Hackney to the target 34 referrals per month by end of March 2024, with referrals submitted from across ELFT teams in City & Hackney. | To increase the reach of Personal Health Budgets (PHB) in City and Hackney to target 34 referrals per month by end of March 2024, with referrals submitted from across ELFT.   | City & Hackney                                 |
| 157855 | Improving Access to<br>Community Services<br>for the Homeless<br>Population in Tower<br>Hamlets  | With the current provision of foot health service for homeless service users within Tower Hamlets, it is aimed that through this scheme, we are able to introduce other community health service input (i.e physiotherapy and district nursing) to support homeless people in accessing community health services. To achieve system wide cost savings to primary and secondary health care services |  |
| 157894 | Improving<br>attendance at<br>Havering CLDT<br>psychiatry<br>outpatient clinic   | Reduce the number of DNAs within psychiatry outpatient clinic by 10% by March 24   | Havering Community<br>Learning Disability Team |
| 157901 | Improving Analyst<br>access in the<br>integrated Data  | We aim to co-develop a data environment to improve Analyst access to a full range of data sets from 40% to 90% and Analyst accuracy responding to a full range of information requests from 17% to 75% by the end of Q4 2023.  | The Green                                      |

|        | Warehouse (iDW)  |  |   |
|--------|--|--|---|
| 157909 | Improve<br>accessibility of<br>MHST services for<br>South Asian<br>children and young<br>people within Wave<br>5                                       | Improving accessibility of MHST services for South Asian children and young people within Wave 5   |   |
| 157951 | MBU Baby<br>Observation  | "To improve the quality of observations with service users and staff reporting a positive experience by August 2024"   | City and Hackney MBU                              |
| 157979 | Establishing a comprehensive care community  | Purpose statement: to establish a comprehensive care community across the Tower Hamlets directorate  | Tower Hamlets Mental<br>Health Directorate        |
| 157987 | (draft) Improve<br>effectiveness of<br>Luton CRHTT<br>performance  | Improve acceptance rate to Home treatment Team.  | Townsend court                                    |
| 157996 | Pursuing Equity in<br>Comms: Optimising<br>Engagement of<br>Users with<br>Accessibility Needs<br>across ELFT   | By December 2024, ELFT commits to achieving 100% accessibility in all newly produced communication materials, ensuring that every staff member, service user, and stakeholder, regardless of their abilities, can fully access and engage with our information.  | Corporate Comms                                   |
| 158027 | Improving Number of Units (Teams/buildings) with reported compliance with Standard Facilities Inspections from 65% a month to 95% a month by June 2024 | Improve the number of units (teams/buildings) with reported compliance with Standard Facilities Inspections from 65% a month to 95% a month by June 2024   | Alie Street                                       |
| 158040 | Forensic Violence<br>Reduction<br>Collaborative -<br>Stratford   |  |   |
| 158061 | Moving Beyond<br>Care Programme<br>Approach  | To establish processes whereby 75% of the North Hub caseload has an identified key worker and a shift away from the generic term care coordinator This may involve: A clear multidisciplinary team approach involving all health professionals on the service user's journey. High-quality co-produced, personalised care and support planning Better support for and involvement of carers to provide safer and more effective care.  | Luton North Hub CMH<br>Charter House              |
| 158099 | Right Dressing Right<br>Time   | Our Aim is to improve wound care management by using the right treatment at the right time, reducing waste, improving healing and improving patient outcomes   | Community Health Newham                           |
| 158236 | Sexual Safety Crystal<br>Ward  | By December 2024 we will reduce sexual safety related incidents by? and we   | Newham Center for Mental<br>Health - Crystal Ward |
| 158415 | Total Bowel<br>Management in<br>ELFT Learning<br>Disability Services   | Identify service users known to Learning Disability services psychiatry caseload in ELFT who are prescribed laxatives, and provide appropriate constipation advice by June 2024  | Trustwide   |
| 158418 | Eliminating single<br>use cups on<br>Fountains Court   | To eliminate the use of all single use cups by the end of March 2024.  | Fountains Court                                   |
| 158503 | Engendering a<br>research culture as<br>part of business as<br>usual   | To increase the number of meaningful indicators of "having an engendered research culture as part of business as usual", which, at present, may include indicators such as: - Number of staff who know the R&I Department (including what we do and don't do); - Number of staff who self-report as research-active; - Number of staff who are research-active by an objective measure; - The organisational infrastructure encouraging research; - The personal skills and aptitude towards research; - Number of Research Champions or percentage of teams across ELFT with an identified Research Champions |   |
| 158507 | Befriending:<br>Increasing<br>Attendance of<br>Service Users to<br>Befriending Groups  | To Increase the number of Service Users attending the Brefriending-related groups from 2 attendees to 15 attendees per session by July 2024  |   |
| 158508 | Complaints:<br>Improving the<br>Quality of FLFT  | For ELFT to increase the monthly average of complaints completed within timescales agreed with the complainant by 20% - by the 31st January 2025   | Corporate   |

|        | Responses   |   |                                  |
|--------|---|---|----------------------------------|
| 158542 | Modernise<br>psychosis treatment<br>on Clissold Ward  | To review, assess and optimise psychosis treatment on Clissold ward   | Clissold Ward, Wolfson<br>House  |
| 158559 | CLDS Transition-<br>improving the<br>assessment process   | Reduce assessment duration from referral to eligibility decisions   |                                  |
| 158589 | Community Treatment Order (CTO) Recent evidence suggests that there is a disproportionate number of black Adults in Newham Mental Health Service on CTO | By December 2024 we will ensure that all black and Afro- Caribbean patients under EIS, CRT North and CRT South who are on CTO between 1st Jan 2024 to 30th December 2024 will have a meaningful completed DIALOG+ and care plan to evidence coproduction and good practice. To bring the number of these patients in proportion to others. We will be looking at quantitative as well as qualitative mental health interventions to improve experience among this group | Community Mental Health<br>Teams |
| 158720 | Forensics Violence<br>Reduction<br>Collaborative-<br>Clissold   |   |                                  |
| 158733 | Reducing Nursing<br>Vacancies to 10% at<br>ELFT by January<br>2025  | Reducing nursing vacancies to 10% across ELFT by January 2025 through improving recruitment and retention   | Trust-wide                       |