

# ELCAS Journey to Best Practice

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## Background

- Early 2017, IAPT Phase 7
- Ethos of Training and Quality Improvement
- Long established CORC member
- Clinician reported outcome measures
- Consultant Psychiatrist IAPT Service Lead
- Visits to other CAMHS Services
- ROMS Representatives

### Staff Survey & CORC Best Practice Framework

- High Quality care
- Complex care Needs
- Aim to become CORC Accredited
- Support from Service Lead, Senior Managers
  Results how it informed next steps

### Staff Survey

- How Measures are being used
- Training, Knowledge & Skills
- Technology & Information Management
- Leadership & Management
- Attitudes to implementation of ROMS

### Staff Survey

- 42% never received training
- 79% wanted to know more BUT confident in working with ROMS
- Mixed views re. ease of access to ROMS in sessionsLess than a quarter felt there was a shared vision

### Staff Survey – Action Points

#### • Vision

- Sharing data with CYP
- Strengthen feedback loop with staff
- Training and Development Interests
- Review systems for recording outcomes: supervision, team MDT discussions
- Explore a variety of measures

## Best Practice Framework

#### 2017

 Focus on Staff development
 Leadership and management
 Infrastructure

#### 2018

 Supervision Policy Peer Training IAPTUS – directly inputting ROMS • Need for a ROMS lead CORC Training Service User Participation Reports

## Liaison with CORC

- CORC Regional Advisors helped reflection on current practice, e.g. via Staff surveys
- Training
- Quality Assurance in action planning

## Establishing a ROMS working Group

- ROMS Representatives
- Supported by Service Leads
- Meet every 2 weeks for an hour
- Links to Sector Teams & Service User Participation Group



### Achievements

- Vision Statements
- Quality Standard
- Engagement Day
- Staff Training: peer-led & CORC led re. specific measures
- ROMS and IAPTUS
- Recruitment of ROMS Lead (administration)
- Addition to Service Supervision policy
- Use of ROMS in MDT meetingsNotice Board
- Positive Attitude towards ROMS



### Vision Statement

- At ELCAS we care about the views of children, young people, and their families. We value feedback on the care they are receiving, and are keen to learn more from service users.
- Children and young people describe completing regular measures of outcome and experience as helpful. Using questionnaires to measure the effectiveness of the care we provide can help us improve the quality and safety of our clinical practice.

• We are committed to developing a culture across ELCAS of the regular use of patient-reported outcome and experience measures (alongside clinician-reported measures), to ensure we are providing personal and effective care.

# Quality Standard

Assessment	6 months after Assessment	End of Treatment Episode
Current View CGAS	CGAS	Current View CGAS
SDQ RCADS	SDQ RCADS	SDQ RCADS
Set Goal on IAPTUS	Track Goal on IAPTUS	Track Goal on IAPTUS
		CHI-ESQ

### First Summary Report

Summary Report regarding Outcomes Monitoring
Range 34-39% paired measures on open cases
Range 39 - 58% paired measures at discharge

## Remaining Challenges

- Moving towards session by session measures
- Use of technology e.g. webforms
- Service User Involvement
- Live Reporting
- Outcomes driving provision of care