

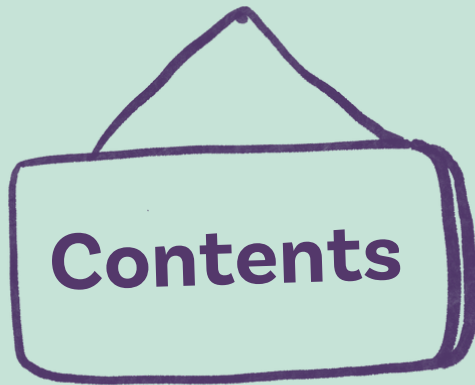


Our quality account

2024/25

everyturn.org





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Quality statement

It's a pleasure to present Everyturn's 2024/25 quality account. We're proud to have achieved a number of key milestones in line with our strategic objectives.

The cost of living crisis, increases to employer National Insurance contributions, and demand outpacing funding for workforce were just a few of the pressures facing health and social care this year. But despite these challenges, we've been able to continue growing and investing in our services.



Heather Benjamin
(she/her)
Chair of Trustees



Adam Crampsie
(he/him)
Chief Executive

A key achievement was our merger with Streetwise, an award-winning charity providing mental health support to children and young people in Newcastle. We also opened two Safe Havens in Newcastle and Northumberland, offering walk-in support on the high street to adults in crisis.

As part of our commitment to keeping quality at the heart of our strategy, this year we welcomed Niloufar Hajilou, our Executive Director of Quality Governance & Risk, to drive Everyturn's quality agenda at Everyturn. As a learning organisation, we also want to make sure that the views of the people we support lead to change. To do this, we've launched 'Project Learning Organisation', to develop a framework for meaningfully engaging with the people we're here to support.

In this quality account, we outline our progress against our 24/25 quality priorities and also the launch of Everyturn's first quality and safety framework. These have had a significant positive impact on how we deliver our services. We'd like to give our enormous thanks, as ever, to our wonderful teams across Everyturn, who have brought this to life through the care they provide.

In 2025/26, we look forward to continuing to innovate and improve our outcomes, with the implementation of our Quality & Safety Framework firmly at the heart of delivering high-quality mental health services.

We can confirm that, to the best of our knowledge, the information in this account is accurate.

Heather Benjamin 

Commissioner statement from NHS North East and North Cumbria Integrated Care Board

NHS North East and North Cumbria Integrated Care Board (NENC ICB) is committed to commissioning high quality services from Everyturn Mental Health. NENC ICB is responsible for ensuring that the healthcare needs of patients that they represent are safe, effective and that the experiences of patients are reflected and acted upon. The ICB welcomes the opportunity to review and provide comment on this 2024/25 Quality Account.

Overview

The ICB would like to thank Everyturn for the openness and transparency reflected in this year's Quality Account. The ICB would like to commend all staff for their commitment and dedication demonstrated throughout these challenging times and for striving to ensure that patient care continues to be delivered to a high standard.

Achievements

The ICB would like to congratulate Everyturn and its staff on the achievements made during this period.

Achievements

The ICB would like to congratulate Everyturn and its staff on the achievements made during this period. The ICB recognises the attainments detailed within the quality account, which include:

- The successful roll out of the Patient Safety Incident Reporting Framework, by establishing:
 - The Quality and Safety Directorate to drive the safety and learning culture focussing on continuous improvement,
 - The Patient Safety Incident Learning Group to share best practice, and
 - Project Voice enabling families/carers/service users and those with lived experience to co-design services/patient safety initiatives.
- Implementing their Patient and Carer Race Equality Framework (PCREF) promoting inclusivity and equity through accessible, culturally competent, responsive services. The goal is to embed anti-racism, create a culture that values diversity and is committed to eliminating racial disparities in outcomes. Unity, the PCREF implementation project, improved policies addressing racism, implemented new reporting mechanisms for racial incidents, conducted cultural awareness and anti-racism training to all staff.

- Continuing their ‘Good to Outstanding’ journey for Care Quality Commission (CQC) registered services. Through service assessment Everyturn developed an improvement plan, held regular workshops for colleagues to share ideas and learn from best practices and receive feedback from service users/family/carers/external professionals. Improvements include the introduction of a ‘hospital passport’ to share residents’ information, ‘You said, we did’ and health promotion display boards, monthly clinics for residents to discuss issues/areas for improvement.
- Influencing system development and future provision of health and social care services using Everyturn’s system leadership approach and working alongside partners, e.g., NHS; local authorities; and taking on several system leadership roles, including:
 - Representing voluntary, community, and social enterprises (VCSEs) on the ICB’s Mental Health and Learning Disabilities Board sub-group.
 - Leading on VCSE solutions to inpatient transformation with the ICB, at the 2024 NHS Confederation Expo.
 - Presenting Everyturn’s approach to digital innovation to improve patient journeys at the Royal College of Psychiatrists ‘AI in Psychiatry’ and the National Talking Therapies ‘Implementing digital products’ training events.
 - Co-producing and presenting integrated approaches to mental health (MH) transformation at forums, including the Association of Directors of Adult Social Services, NHS Wales MH Knowledge Exchange, and the Department of Health and Social Care’s 24/7 Neighbourhood MH Centre Associates events.
 - Working with national policy influencers, e.g., the Association of MH Providers and NHS Confederation, to influence national health and social care policy.
- Implementing Everyturn’s Quality and Safety Framework and Health and Safety Improvement Plan, ensuring the highest standards of care and safety.
- The Complex Transition Support Service providing support for 12 weeks after hospital discharge which started in June 2024 and is working with 163 service users.
- Launching the MH First Response Service for North Yorkshire, York, and Selby with Tees, Esk and Wear Valleys NHS Trust in April 2024. This went live with the national model of NHS 111 Option 2 in May 2024, gaining national recognition by consistently outperforming key performance indicators.
- Launching the North East’s first two Safe Havens in Northumberland and Newcastle offering support to 1,294 service users. The third Safe Haven, in North Tyneside, will open Summer 2025.
- Made the 2024 ‘Best Workplaces for Wellbeing’ list based on Great Place to Work survey.

Areas for further development

- The ICB recognises the additional work required which has been identified within the quality account. In particular, the work to:
- Embed the organisational philosophy of care. This was paused to develop Project Voice which aims to engage and receive feedback from service users, fundamental to Everyturn's philosophy of care. This will continue as priority 4 in 2025/26.

Future priorities

The ICB is fully supportive of the identified Quality Priorities for 2025/26. The ICB welcomes:

- Priority 1 - Improving safety. Through robust risk management processes, increasing access to data, improving audit capabilities and achieving health and safety recommendations Everyturn aims to reduce risk.
- Priority 2 - Effective, accountable and engaged leadership. To ensure accountable and compassionate leadership Everyturn will review Freedom to Speak Up/whistleblowing processes, share themes/trends and implement robust risk management processes, governance structures and reporting arrangements.
- Priority 3 - Greater clinical effectiveness. To give the right care at the right time and in the right place Everyturn will develop clear clinical effectiveness and governance arrangements, integrate systems with NHS partners, align all policies/guidelines with national standards and develop a clinical strategy.

- Priority 4: Positive experiences. Ensuring service user/carer experiences inform Everyturn's work, by listening to service users via engagement forums and enhancing incident reporting systems.
- Priority 5: Children and Young People's (CYP) services. To better understand and enhance delivery of services to CYP Everyturn will review their policies, learn from CYP-related events, enable CYP to shape services, and align safeguarding policies/procedures to best practice.

The ICB can confirm that to the best of its ability the information provided within the annual Quality Account is an accurate and fair reflection of the provider's performance for 2024/25. It is clearly presented in the required format, contains information that accurately represents Everyturn's quality profile and aspirations for the forthcoming year. NENC ICB remains committed to working in partnership with Everyturn to assure the quality of commissioned services in 2025/26.



Richard Scott
Director of Nursing (North)
NHS North East and North Cumbria Integrated Care Board

About Everyturn

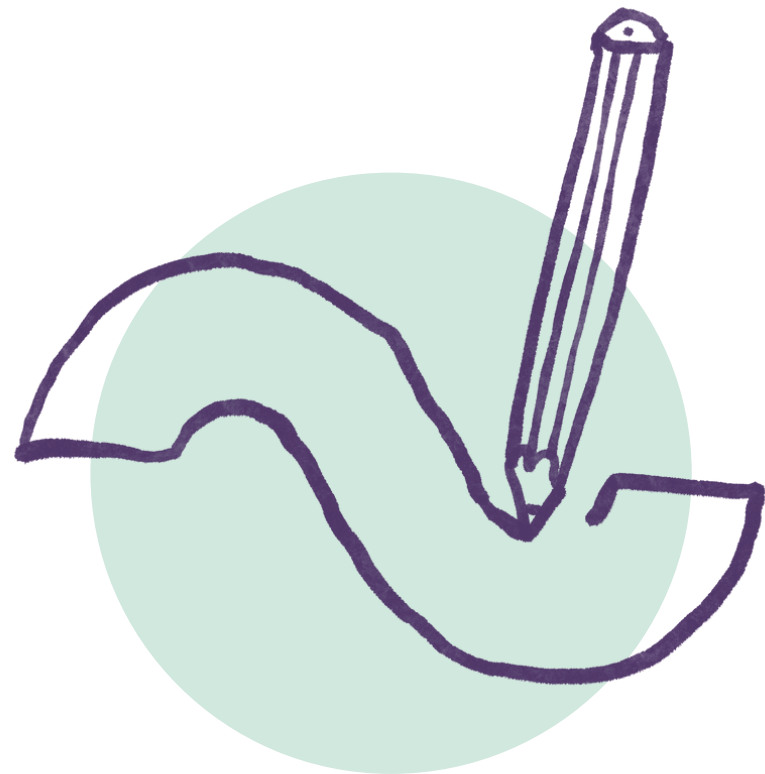
Everyturn is a proud charity partner to the NHS, with nearly 40 years' experience of supporting people with complex mental health needs. We're here so no one has to struggle alone.

Our mission is to provide high-quality, integrated mental health and wellbeing services across the country, predominantly on behalf of the NHS and local authorities.

Our services include a wide range of community teams supporting primary care and secondary care, including crisis support, 24/7 specialist nursing units for people with serious functional mental health needs or complex dementia, clinical case management to help people transition from hospital into the community, services for children and young people, and NHS Talking Therapies.

As a charity, we continuously invest in our frontline services to make them as effective as possible. We're committed to delivering high-quality care, to support the needs of our local population and our partners.

Underpinning everything we do are our organisational values of innovation, compassion, accountability, respect, and excellence.



A photograph of two women sitting on a dark green couch in a living room. The woman on the left has long brown hair and is wearing a maroon turtleneck, smiling broadly while holding a white coffee cup. The woman on the right has long, curly red hair and is wearing a dark grey sweater, holding a small green coffee cup. In the background, there is a white shelf with various items including a brass bowl, a pink box, and a blue mug. A window with white curtains is visible behind the shelf. The overall atmosphere is warm and friendly.

Updates on our 2024/25 quality priorities

Priority 1: Patient Safety Incident Reporting Framework (PSIRF) – next steps

We successfully rolled out the PSIRF framework across Everyturn, which was a significant shift in how we respond to patient safety incidents. Key developments included:

- The governance team was reformed into the new quality & safety directorate, including the new roles of Executive Director of Quality Governance & Risk and Head of Quality & Safety, to drive our safety and learning culture with a focus on outcomes and continuous improvement.
- We launched the Patient Safety Incident Learning Group, as a forum for gathering learning and sharing best practice across Everyturn.
- We began 'Project Voice', as part of our wider Learning Organisation programme. Project Voice will involve families, carers, and the people we support in the co-design of services. We will also learn from their lived experience in shaping our patient safety initiatives.
- In March 2024, we implemented our Patient Safety Incident Response Plan (PSIRP) in collaboration with colleagues in NENC ICB. We identified top incident priorities such as falls, self-harm, and disruptive behaviour using data-driven decision-making.

- PSIRF shifted our focus to systemic learning, rather than individual accountability for incident investigations. We introduced new processes for reviewing incidents, including rapid reviews, thematic analysis, patient safety incident investigation, and the use of the Systems Engineering Initiative for Patient Safety model.
- We made Patient Safety Syllabus mandatory training across the organisation, with level 1 compulsory for all colleagues and level 2 essential for all managers, directors, and trustees.
- Our incident management system, Ulysses, now connects electronically to the NHS learn from patient safety events database, allowing automatic uploads of relevant details.
- We launched our quality and safety framework, with continuous implementation of PSIRF as a key objective.

The next steps for 2025/26:

- Implement our Quality & Safety Framework.
- Improve our quality management system, Ulysses, to improve access and triangulation of information.
- Use our patient engagement framework to keep the voice of the people we support at the heart of decision-making.
- Onboard and implement quality improvement, leading to improved services.

Priority 2: Patient and Carer Race Equality Framework (PCREF) implementation

PCREF is designed to improve racial equality across healthcare organisations. The framework focuses on promoting inclusivity and equity, to make sure that services are accessible, culturally competent, and responsive to our communities' diverse needs.

Our goal is to embed anti-racism into everything we do, from governance to frontline care. We want to create a culture that values diversity and is committed to eliminating racial disparities in outcomes. Our project to implement PCREF is called Unity and its achievements this year have included:

- Policy development: We reviewed and improved policies on addressing racism, incorporating feedback from delivery groups and our people team. We also added new reporting mechanisms for racial incidents in our internal systems, such as Ulysses.
- Cultural awareness and anti-racism training: We made these sessions available to colleagues through our online Everyturn Academy, and we plan to expand these offerings. A comprehensive in-house anti-racism training programme is also in progress.
- We also ran in-person anti-racism training for the board of trustees and executive team.

Next steps

- Expand our Community Champion roles: We plan to expand these roles across different areas of the organisation to make sure that racial equality runs through every level of our service delivery.
- Improve data monitoring: We're working to improve our use of data in monitoring the effectiveness of our PCREF initiatives. We're particularly focusing on improving data collection for racial and ethnic diversity across all services, to make sure we're serving the wider population at each place.
- Strengthen partnerships: We'll continue to work closely with local authority partners and advocacy services to improve services for racially and ethnically diverse communities.

Through our ongoing commitment to PCREF, Everyturn is making significant strides toward creating an equitable and inclusive environment that meets the diverse needs of all people we support, their carers, and our colleagues.

Priority 3: Our 'Good to Outstanding' journey for our CQC-registered services

We're committed to providing excellent care to people who use our services. To help us understand where we can improve, we completed a baseline assessment using the Care Quality Commission (CQC) quality statements to assess effectiveness of our registered services. Using these results, we developed an improvement plan to work towards an outstanding rating.

To support our continuous development we hold regular workshops where our colleagues share ideas and learn from best practices across all services. The initiative is a standing agenda item in our team meetings, helping us to maintain the highest possible standards.

We also hold collaborative workshops where we receive ideas, experiences, and knowledge from the people we support, their family carers, and external professionals.

We've embedded our 'Good to Outstanding' goal into Everyturn's culture through strong communication, training and recognition via supervisions and appraisals, and integrating the goal into daily routines and processes.

Some of the changes and improvements made as a result of our improvement plans are:

- Introduced a 'hospital passport' to share residents' information with medical teams during stressful times.
- Introduced 'You said, we did' and health promotion display boards in our services.
- Held monthly clinics where managers/clinical leads are available for residents to discuss issues and areas for improvement. This is in addition to the open door policy we already have in place.

We're proud that all our services are rated 'Good', with every standard backed by solid evidence.

Further assurance is provided through ICB visits to Pinetree Lodge and Briarwood, as well as our internal quality service reviews on our care homes.

Our focus over the coming year will be to give our support services (such as HR, finance, and communications) an understanding of the quality and standards expected by the CQC in residential services. This will encourage meaningful collaboration with our colleagues in their specialties at Everyturn, helping us to support each other in our shared goals.

Priority 4: Organisational philosophy of care

Last year, our priority of embedding an organisational philosophy of care was paused as we developed our project to engage the people we support, which we now call Project Voice.

This initiative is aiming to improve the ways we engage with the people we support and receive their feedback, which will be fundamental to our philosophy of care.

Project Voice is deeply intertwined with our philosophy of care, improving co-production and centring the experiences of the people we support. We've committed to:

- Developing a unified organisational philosophy that underpins all our services.
- Reviewing and updating all our standard operating procedures.
- Co-producing our philosophy with the people we support, experts by experience, carers, and families.

This year, our organisational philosophy of care and Project Voice will combine into our priority regarding positive experiences.

We will continue to build on our philosophy of care through Project Voice by:

- Publishing a strategy to engage the people we support.
- Expanding engagement activities to include more diverse groups of people we support.
- Assessing how we currently receive feedback.

By actively involving the people we support and incorporating their feedback, we'll create a more responsive and effective organisation.

Our achievements and commitment to continuous improvement show our dedication to providing high-quality, person-centred care.



Priority 5: System leadership approach

Everyturn has influenced system development and future provision of health and social care services, by working alongside our partners in the NHS; local authorities; and voluntary, community, and social enterprise (VCSE) sector.

Over the past year, we've taken a number of system leadership roles, including:

- Our Chief Executive represents VCSEs on the ICB's Mental Health and Learning Disabilities Board sub-group.
- Alongside the ICB, our Head of Development presented our partnership approach to delivering complex system solutions, and leading on VCSE solutions to inpatient transformation challenges with the ICB, at the 2024 NHS Confederation Expo.
- Our Principal Clinical Lead led and presented our approach to digital innovation to improve patient journeys at a recent Royal college of Psychiatrists 'AI in Psychiatry' event and at a National Talking Therapies 'Implementing digital products' training event for SBK.
- Our Director of Relationships co-produced and presented on integrated approaches to mental health transformation at forums such as NHS England, the Association of Directors of Adult Social Services, NHS Wales Mental Health Knowledge Exchange, and the Department of Health and Social Care's 24/7 Neighbourhood Mental Health Centre Associates information-sharing events.

Everyturn continues to pioneer approaches to support the NHS's three big shifts: from hospital to community, from illness to prevention, and from analogue to digital.

We work closely with national policy influencers, such as the Association of Mental Health Providers and NHS Confederation, to provide thought leadership to inform campaigning work and to influence national health and social care policy.

In 2025/26, we'll promote our approach to:

- Delivering community-based support for people with complex needs.
- Creating a health and care workforce for the future.
- Changing the healthcare system to better meet people's needs.
- Acknowledging the social factors impacting people's mental health.
- Using data and stories to show the positive impact of system development.
- Using technology and digital interventions to give people more choice about their care.

Clinical and quality governance



Our governance structure

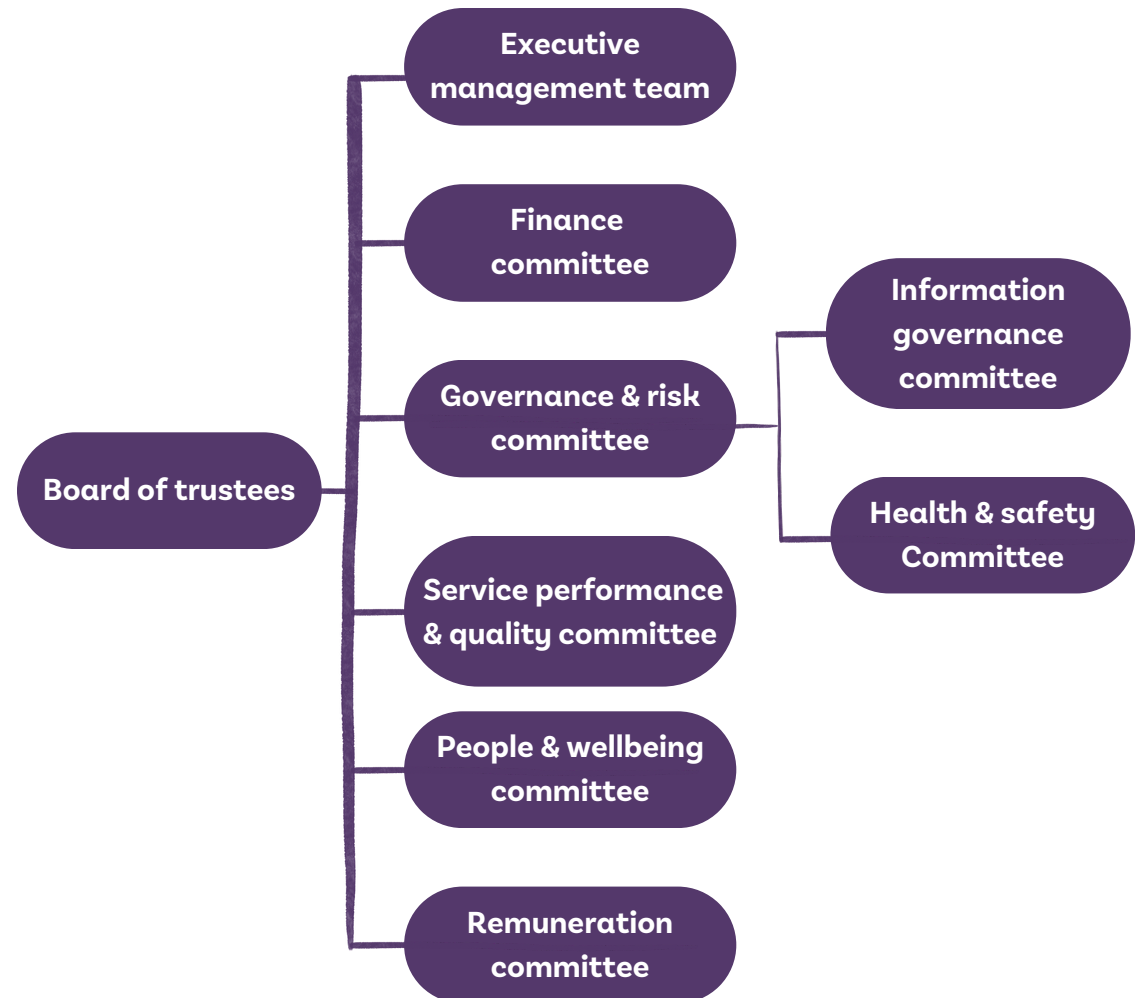
We're governed by our board of trustees, whose members have a wide range of experience and diverse backgrounds. They meet formally bi-monthly. Our governance structure is aligned with the Charity Governance Code.

Our five board subcommittees are:

- Governance and risk
- Service quality and performance
- People and wellbeing
- Finance
- Remuneration

The chairs of the subcommittees are experienced trustees and terms of reference are reviewed annually. To improve board assurance and efficiency of the subcommittees, our board approved a new governance structure, to be implemented in April 2025. The new subcommittees will be:

- Finance, audit & risk
- People, wellbeing & remuneration
- Quality & governance
- Everyturn services board



Our approach to quality governance

A significant area of work this year has been developing Everyturn's first quality & safety framework, to give clear guidance for delivering high-quality and safe services.

We developed our framework in consultation and alignment with North East North Cumbria (NENC) ICB, along with national initiatives and policies. These are testament to our commitment to continuously improving and keeping excellent standards of care.

This year we've also significantly redesigned the structure of our governance teams, to emphasise collective responsibility and accountability in providing leadership in all areas of quality.

Our governance teams are responsible for implementing quality strategies and promoting safety across all services. These teams also create an environment where concerns can be raised and addressed effectively.

We continue to improve our business information infrastructure, so we can effectively track and visualise quality indicators, reporting them to executive management and the board of trustees. This includes:

- Patient experience questionnaires
- Quality service reviews
- Health and safety and infection control inspections

We've also launched our first patient safety and incident learning group forum (PSILG) to strengthen the process for sharing learning from safety events across the organisation.



Freedom to Speak Up

We now have a new Freedom to Speak Up (FTSU) Guardian. Our new Head of Quality & Safety has taken on the role and continues to serve as an independent and impartial contact, providing support and guidance to all colleagues raising concerns.

We still offer an external confidential telephone reporting service, which gives colleagues access to 24/7 whistleblowing services.

We ran an internal communication campaign for FTSU Month in October 2024, which increased our network of Freedom to Speak Up Champions.

We're developing introductory and refresher training for all our FTSU Champions. These sessions will ensure that our champions are well-equipped to support colleagues across our services.

We've also launched a new 'Speaking Up Hub' on our intranet, to give easy access to speaking up information and contacts.

Our FTSU initiatives this year included:

- "In conversation with" video shared, showing Executive Director of Quality Governance & Risk and a new FTSU Guardian.
- Freedom to Speak Up Month.
- Launch of the Speaking Up Hub.
- FTSU Champions Workshop.



Clinical audits

Audits are key to making sure we continuously improve, take accountability, and provide the highest standards of care. Our audits include:

- Supervision audits, assessing whether our colleagues receive the right support.
- Monthly clinical case note audits, reviewing the accuracy, completeness, and compliance of patient documentation. This promotes consistent and reliable record-keeping.
- Safeguarding audits, evaluating how well we identify and respond to concerns about patient safety and wellbeing.
- Medication audits, ensuring the safe, accurate, and effective administration of medications.
- Local clinical audits, addressing service-specific issues and helping us target challenges or gaps.



Outcome example

An audit on supervision led to a project across Everyturn to make sure all frontline colleagues have regular supervision as protected time. We also rolled out monthly reflective supervision in all services.

Learning from incidents and Duty of Candour

This year, over 2,400 reports were made through our incident reporting system, Ulysses. This was a significant increase from the previous year, reflecting our positive reporting culture. This has helped us track incident trends across services and take appropriate responses, focused on learning and continuous improvement.

Most of the incidents reported caused no or low harm, but any causing moderate harm needed duty of candour to be logged on Ulysses. This allows us to be open and transparent, and apologise when things go wrong.

Learnings are summarised and shared with all services. We distribute detailed reports outlining the findings from investigations, emphasising preventive measures and improvements. We also send new monthly newsletters on topics like quality service reviews, audit findings, and Ulysses updates. These newsletters also include real case studies where we successfully mitigated risks. These are designed to give practical understanding and show the application of Everyturn's safety protocols.

The quality & safety team also organises ad hoc training sessions, often featuring guest speakers who share insights on best practices in quality and safety management. This forms part of colleague engagement and their continuous professional development.

Learning from complaints and feedback

We gather feedback and complaints via emails and patient experience questionnaires. In 2024/25, there were 18 complaints for registered services and community & crisis services, an increase on the previous year; and 93 for NHS Talking Therapies services, which was a decrease.


We implemented and shared the learnings across relevant services. Most complaints were managed directly by the services, with support from the quality & safety team when needed.

We conducted an audit in December 2024, which confirmed that all complaints were addressed within the NHS standard of 25 days, with changes made to improve services where necessary.


We record complaints in the Ulysses incident reporting system, to be reviewed by the quality & safety team.

Compliments

This year we received an impressive 275 compliments from the people we support, their families, colleagues, and external professionals!



**I had a great experience
with the service, I feel I
have the skills to stay on
track and take my life back**



**Thank you!
You made me see
reason and make
sense of things**

Information governance

Alongside creating robust protocols to protect data integrity and privacy, we're also developing an information asset register to secure data assets and comply with regulations. Together, this will improve Everyturn's operational resilience.

Our data breaches have reduced by 45% through meticulous colleague training, comprehensive service visits, and rigorous data audits. This significant reduction shows our commitment to safeguarding sensitive information and creating a secure digital environment.

We've also streamlined information requests across various channels, including subject access, police and coroner, court orders, and CCTV enquiries. Our new processes are consistent and efficient, allowing us to report and audit effectively.

To strengthen our data security measures, we consistently submit to the Data Security and Protection Toolkit, which is a requirement from NHS Digital. This comprehensive framework means that we meet key principles of data protection and security.

Achieving ISO27001 certification will reinforce our commitment to these standards. As an international standard for managing information security, it will increase our ability to protect against unauthorised access, data breaches, and other security threats.

Achieving ISO27001 will show that Everyturn keeps the highest standards of data security and protection, and manages information securely and reliably.



Health & safety

This year, we've made significant health and safety (H&S) improvements, helping us to create safe and healthy environments for everyone. We have:

- Recruited a H&S Manager, who brings valuable expertise to Everyturn.
- Conducted a thorough gap analysis and created an improvement plan.

The gap analysis led to the launch of our H&S improvement plan, which includes:

- New fire safety key performance indicators.
- A thorough review and gap analysis of responsible people.
- Starting the process to gain the ISO45001 standard for H&S management systems.

Strengthening our H&S subcommittee

We revised the committee's terms of reference and expanded its membership to include more diverse representatives. The subcommittee now reports directly to our executive team, which gives prompt attention to H&S issues.



Project Learning Organisation



Project Learning Organisation is a transformative programme designed to create a culture of continuous learning, adaptability, and innovation across Everyturn. Through this three-year project, we aim to embed the principles of a learning organisation in our operations, helping us to continue to be effective, responsive, and innovative in a rapidly changing landscape.

Why this project?

The healthcare sector is always evolving, so Everyturn needs to adapt, continuously improve practices, and embrace new opportunities. Project Learning Organisation is our strategic response to this need. By promoting and supporting learning at all levels, we want to empower our colleagues to adapt, innovate, and ultimately improve the quality of care we provide to the people we support.

Sharing information and learning

A key part of the project is developing robust processes to share information and learning. Our patient safety incident learning group (PSILG) plays a pivotal role in this effort, as its members give clinical expertise and oversight of serious patient safety incidents and responses. This helps us to report, investigate, and respond to incidents, in line with our patient safety incident response plan. The group meets monthly to review incidents, identify lessons learned, and share relevant learnings.

Project workstreams

The project includes three workstreams:

- Unity (implementation of PCREF): Ensuring equitable access and outcomes for all service users, particularly those from ethnically diverse backgrounds.
- Voice: Engaging and involving the people we support and their carers in decisions surrounding safety and the design of our services.
- Quality Improvement Framework: Improving Everyturn's organisational efficiency and effectiveness through continuous quality improvement initiatives.

What's next?

Over the next three years, we'll continue to refine our Learning Organisation programme. This will include:

- Adding new courses to support colleagues in managing racially-motivated incidents.
- Creating engagement groups of people we support, to co-design our services.
- Reviewing recruitment data to address gaps in our processes.

Our Quality & Safety Framework



Implementing our Quality & Safety Framework

Over the past year, we've implemented a comprehensive Quality & Safety Framework to ensure the highest standards of care and safety. This framework offers a structured, risk-based approach to improve quality and safety capacity, capability, leadership, and infrastructure across the organisation.

How will this impact our services?

Our Quality & Safety Framework will significantly improve the quality and safety of our services. It ensures high-quality, coordinated care that is safe, effective, and responsive to the needs of the people we serve. The framework also promotes fairness and reduces health inequalities.

Foundations of the framework

Our framework is built on four key pillars:



Our quality & safety outcomes by 2027



Safety

Delivering care in a way that reduces the risk of things going wrong

Some of the outcomes we're looking for:

- Safety is important to us and we're constantly improving.
- Our systems promote honesty and learning.
- We celebrate outstanding health and care.
- We find risks and put things right.
- We think about how inequality impacts on safety.
- Colleagues know they can raise concerns.
- Concerns are looked into and we learn from them.



Leadership

Accountable and compassionate with shared vision, values, and learning

Some of the outcomes we're looking for:

- All colleagues understand their role in delivering high-quality care.
- Our leaders are inclusive and know the context of our services.
- Our leaders involve other care professionals in our decisions.
- We recruit leaders in an open, fair, and inclusive way.
- We have leadership strategies and development opportunities across Everyturn.



Clinical effectiveness

Giving the right care, at the right time, in the right place

Some of the outcomes we're looking for:

- We analyse data and information to make sure quality of care is high.
- Measurable quality outcomes inform our decisions.
- We think about the things that affect health inequalities, which often lead to poorer outcomes.
- Our policies are robust and in line with national standards.
- Our risk management processes improve our risk escalation and oversight.



Positive experiences

The people we support and their carers inform all of our work

Some of the outcomes we're looking for:

- We make it easy for people to feed back about their care.
- We involve people in decisions about their care.
- We empower people to make informed choices.
- We work with people who have lived experience to design our services.
- We listen to people who are most likely to have poorer experiences, outcomes, or results.

We'll do this by...

Developing robust risk management processes and developing our quality systems and processes to improve access to data and information for colleagues.

Embedding clear clinical effectiveness policies to set Everyturn's standards for best practice, and developing a quality strategy to continuously improve our services.

Co-producing a 'just and learning culture' that's safe, compassionate, and developing training to improve communication and the skills of our people.

Reviewing our Quality Governance Framework to improve oversight, monitoring, and accountability, and we'll continuously improve our standards to include external regulators.

Infection prevention and control



Our Infection Prevention & Control (IPC) Lead oversees all IPC incidents to make sure that correct procedures are followed and provides support when necessary.

This year, 9 IPC incidents were reported. These included a scabies outbreak, MRSA in wounds, needlestick injuries, pseudomonas in a site water supply, and a norovirus outbreak.

Our teams managed each case with care and speed to manage risks and protect the wellbeing of anyone who was affected.

The proactive approach and effective interventions by the IPC Lead helped control these situations efficiently, showcasing our commitment to maintaining high standards of infection prevention and control.

Audits

We completed 18 IPC quarterly audits across our registered services and shared a new template, to be completed by March 2025, which is aligned with NHS standards. We'll collate and review the feedback we receive.

We also completed annual IPC audits of our registered services and each service now has an action plan to complete for their areas of improvement by the end of April 2025. We'll revisit each service to monitor improvement by the end of June 2025.

IPC forums

We had great attendance at these quarterly meetings this year, with representatives from all services. In the second quarter, we were particularly pleased that members of our community & crisis and NHS Talking Therapies services helped to share IPC information across Everyturn.

At these meetings, we discussed topics including guidance on hot desking and updates on seasonal viruses, to inform and prepare everyone who attended. The minutes of these meetings are shared with the health & safety committee, providing oversight and assurance.

This collaborative effort underscores our commitment to maintaining a safe and informed workplace environment.

Training

Training compliance is monitored during the IPC meetings and at the end of March 2025, compliance had reached an impressive 99%.

An overarching IPC policy is currently being developed and will be shared across the organisation once approved.



**Performance outcomes
at our specialist
residential services**

Care Quality Commission (CQC)

The CQC regulates health and social care services in England. Everyturn is registered with the CQC to provide nursing care at:

- Pinetree Lodge
- Alderwood
- Briarwood
- Jubilee Mews
- Coalway Lane

Our 'Good to Outstanding' working group has been instrumental in our journey to improving our CQC ratings. The members request feedback from the people we support and our colleagues, to find learning opportunities and improve processes. This includes a thorough review of rapid reviews and serious incidents, so we can be sure that processes are followed and that valuable lessons are shared across all levels of our organisation.

Our improved governance of CQC reportable incidents increases colleagues' ownership and accountability, and shares knowledge across services. It has also led to collaboration between operational and central support services to address challenges and improve services. For example, following a thorough review of falls incidents, we adapted our admission process to introduce eyesight tests.

Photo by Southern Green



Goals of our 24-hour specialist residential nursing services

One of the key measures of success of our specialist services is avoiding the need for people to be admitted to an acute hospital, or enabling people to move out of hospital.

We work with people who have complex organic and functional mental health needs, often with related behaviours that others may find challenging.

We work with people to achieve their goals, improve their wellbeing and increase or maintain their independence. Our aim is to help people to move back to living in their communities, or a less intensive environment.

We measure key milestones using recognised evidence-based tools and our support needs assessment (SNA).

The SNA consolidates multiple tools into one, simplifying our referral and admission process. It's a dynamic assessment tool which gathers the data previously collected by three separate assessments.

The SNA improves a resident's journey from referral to discharge, and promotes a speedy admission process. Our residents and, where appropriate, their families have full involvement in the process.



Complex transition support service

NENC ICB identified a number of people who were in inpatient services but were ready to move back to their own homes. Our complex transition support service (CTSS) was created to case manage and support people through this transition, which frees up capacity for the ICB and reduces the person's risk of being readmitted.

Through this service, we particularly focus on addressing the barriers to someone being discharged. The barriers can vary, from clinical complications and funding barriers, to more practical issues like housing repairs.

Our CTSS team members also make oversight hospital visits on behalf of the ICB for people who are autistic or have a learning disability. This is a very important part of the role, as it ensures that people are safeguarded and being well looked after.

Building relationships is a significant part of what we do. We make sure the new support team has time to get to know the person and that they have the right skills to support them. Our CTSS case managers and support practitioners talk with the person and their family or carers, as well as the wider teams, to think about where they'd like to live and the things that are important to them.

We continue to support the person for 12 weeks after they're discharged from hospital, to make sure any issues are quickly identified and resolved, and they have the right support.

We're now working with 163 people in our complex transition support service. Since the service started in mid-June 2024, there have been:

- 10 people successfully transitioned from hospital and discharged from CTSS.
- 19 people discharged from hospital and in 12-week transition.
- 42 new referrals into the service.

Scan to hear from James (left), who we supported out of hospital and into Alderwood, one of Everyturn's residential nursing services



Older adult specialist nursing services

This year we've supported 94 people in our older adult nursing services, with 32 people successfully returning home or moving to the place they call home.

Our community behaviour support service (CBSS) works alongside our specialist nursing services on a bespoke, individual needs basis. Through this service, we give 12 weeks of support, advice, and bespoke strategies to people living with dementia, their families and loved ones in their home. We also provide this service to a wide variety of health care professionals in other residential care homes.

The CBSS received 194 referrals this year. Our support and strategies meant that 96% of people referred were able to enjoy a significantly longer period in the place where they're most comfortable and happy: their home.

Adult specialist nursing services

We're particularly proud that, this year, 10 out of 37 people admitted to us with complex mental health needs were able to step down from our services to move home, or to more independent living accommodation.

The crisis beds we provide for people who need short-term intensive support during a difficult time in their lives have helped prevent 30 admissions to hospital. The crisis support is provided through a close working partnership with Cumbria, Northumberland, Tyne and Wear NHS Trust.





Performance outcomes of community & crisis services

Together in a Crisis and Distress Brief Intervention services

Everyturn continues to be recognised for our specialist, non-clinical crisis care. We're proud that our services improve outcomes for people who are facing mental health crisis. By continuing to work in partnership with clinical and emergency services, we've kept the highest standards of care, supporting people through some of the most difficult times of their lives.

Our referrals

Our Together in a Crisis (TIAC) and Distress Brief Intervention (DBI) referrals remained high throughout 2024/25. Our NENC ICB services received 3,856 referrals and made 56,043 contacts with people in mental health crisis.

We triaged and assessed 99% of our referrals within 48 hours of referral, and 100% of people began support within five working days. 88% of people who completed treatment with us reported a significant improvement in their mental health.

It's important to us that our services provide high-quality care and are inclusive. Our data tells us that people aged 35-44 were most likely to access our services in 24/25. More women (57.2%) than men (41.2%) accessed our crisis services. 0.4% of the people we supported identified as transgender.

Area	Service	People supported in 24/25
Northumberland & North Tyneside	TIAC	1,201
South Tyneside & Sunderland	TIAC	927
Newcastle upon Tyne	TIAC	585
Tees	TIAC	394
Durham & Derwentside	DBI	749

Mental health first response service

We're extremely proud to lead this service, which supports people who are experiencing mental health crisis and call NHS 111 from North Yorkshire, York, or Selby.

Working with Tees, Esk and Wear Valleys NHS Trust (TEWV), we've pioneered this innovative national model via NHS England. Patients receive safe and effective advice and onward referral for support and guidance.

We launched the service in April 2024, going live with the national model of NHS 111 Option 2 for mental health in May 2024. Since our launch we have seen many positive outcomes including:

- Supporting nearly 20,000 people.
- Maintaining a positive referral rate into our partnering TEWV crisis teams.
- Gaining national recognition through NHS England's published national performance data, showing that we've consistently out-performed the national average for all contractual key performance indicators of NHS 111 option 2 providers.

Our team, made up of Mental Health Advisors and Senior Mental Health Advisors, have a rich and diverse skillset with decades of combined experience in supporting people in mental health distress and/or crisis.



Safe Havens

This year we launched the North East's first two Safe Havens on high streets in Northumberland and Newcastle.

Our Safe Havens provide a non-clinical, same day crisis response to people who need urgent support with their mental health, but don't meet the criteria for a clinical response. We give support for immediate needs and also signpost/refer for ongoing support in the community.

The Safe Havens are open 2pm-10pm, 365 days a year and are accessible to those living in Northumberland or Newcastle who are aged 18+. The offer of support can be in person, virtual or via telephone to best meet the needs of our service users.

Each Safe Haven has a dedicated team who offer a non-judgmental, compassionate, and empathic welcome. Our Safe Havens are safe, warm, and calm spaces, improving people's wellbeing and preventing hospital admissions.

The Bothy in Northumberland launched in April 2024 and the Newcastle Safe Haven in November 2024; together they've been visited 1,294 times to date.

In the summer of 2025, our third Safe Haven will launch in Wallsend, North Tyneside.



Community mental health 1:1 services

We deliver our specialist non-clinical mental health services because we know that life can be really hard for people, and we want to make sure they don't have to go through those tough times alone.

We understand the pressures that statutory services are under, so we work in partnership with specialist teams, acute hospitals, and GPs to get people the right treatment at the right time.

Our community services continue to support people with a wide range of complex mental health needs. Our services have remained diverse to meet those needs, including:

- Delivering community mental health support services.
- Annual health check support for people with serious mental illness.
- Social prescribing and mental health support in primary care.



6,675

people were supported this year through our 1:1 sessions and group work

87%

of people received a 1:1 appointment with a mental health worker within 5 days



74%

of people who had mental health support reported improved mental health

Recovery colleges

Northumberland Recovery College and Kind Mind Community in South Tyneside have continued to thrive this year. They continue to deliver outstanding provision, with 3,134 students enrolled to date.

We continue to work in partnership with our local communities to provide engaging, accessible, group-based support that improves mental health and wellbeing.

Our colleges provided 2,450 sessions, courses, and drop-ins, providing social connections, support, and friendships. By providing sessions focused on mental health and wellbeing, people are able to stay well for longer and have less need for clinical support or hospital re-admission.

Each person who joins a recovery college completes a Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS), a mental wellbeing scoring tool, at the end of their journey with us.



57%

of students felt able to manage
their problems after attending
Northumberland Recovery
College sessions

compared to 21% before sessions



VCSE Mental Health Alliance

We're proud to continue to lead Northumberland's VCSE Mental Health Alliance. The Alliance is a strong, community-based partnership of 21 formal partners and a wider network of 85 voluntary, community, and social enterprise organisations. It provides a direct link between community mental health transformation and the community.

We created a strong governance framework to allow the Alliance to allocate funds to community mental health projects in 24/25. To date, Alliance small grants have funded 20 projects across Northumberland, supporting clinical provision by providing wraparound care for people with complex mental health conditions.

By harnessing the knowledge and skills of local community providers through contracts and grants, the Alliance funds support to help people with complex mental health in Northumberland to live fulfilling lives.

This year, the Alliance also supported the development of Northumberland's 'Speak Their Name' Initiative, which brought together families who have lost loved ones to suicide. Together, they created a memorial quilt, which was launched at The Alnwick Garden before being displayed at community venues across the county to raise awareness of suicide prevention.



Andrea Balmer (left), Lead Officer for the Alliance; with Adam Crampsie, our Chief Executive, at the Speak Their Name launch in Northumberland



Experiences of the people we support

All names in this section have been changed for privacy



Adult nursing services - Harry's story

Harry is in his early 40s and he first became known to mental health services in 2009, when he was diagnosed with paranoid schizophrenia.

As a child, Harry had been the victim of emotional, physical, and sexual abuse, while living with his family and in children's homes. Harry also reported being sexually assaulted on more than one occasion by patients when he was staying on secure wards and also when living on the streets.

Harry's had several inpatient admissions to hospitals, community inpatient placements, and has lived in hostels since his diagnosis. He'd also been evicted from hostels after behaving violently or aggressively.

Harry was referred to Everyturn's services in 2019 from an acute mental health hospital, where he was detained under section 3 of the Mental Health Act.

Harry's multidisciplinary team had referred to him as 'feral' and held little hope that he'd stay with Everyturn, as they believed he'd go back to living on the streets. Prior to his referral to Everyturn, Harry had lived on the streets in Newcastle, where he slept in a cemetery for a number of years.

Our team worked with Harry for a number of years, gaining his trust and respect, with Harry eventually engaging with the rehabilitation program. Harry didn't go back to living on the streets, instead he moved into his own flat in the community in 2024. His new life is going well and he calls his flat his 'home'.



Dementia services - Bob and June's story

Bob was living at home with his wife, June, but had become very distressed because he was having hallucinations and delusions as a symptom of his newly-diagnosed dementia, which he preferred to describe as 'memory difficulties'.

Bob was struggling to cope with his emotions, which sometimes meant he was disorientated or aggressive towards June. Bob would also experience 'imposter syndrome', which he found very distressing because he would not always recognise or be aware of June, which could cause confrontation.

Our community behaviour support service (CBSS) team has worked alongside Bob and June to create a plan which has helped to improve their home life. The plan includes redirecting Bob if he's becoming agitated, removing visual prompts that he finds distressing, and avoiding using negative language like 'no' and 'you can't'.

As Bob's physical health was also impacting his dementia and his mental health, we've supported June to feel confident in recognising and getting treatment for issues that can make it look like Bob's dementia is declining. This includes pain, constipation, and underlying developing infections.

The help from our team allowed Bob to stay at home for 18 months, supported by June.

We've recently received a new referral for Bob, as his dementia has progressed and June is now looking for more support.

Our CBSS team will continue to support Bob and June with their new referral, with the aim to work alongside the other agencies supporting Bob to help him stay at home for as long as possible.



Waiting List Initiative - Leon's story

Leon was referred to us for help with managing his emotions. He'd struggled with depression, anxiety, and self-harm for a long time.

Leon's mental health worker helped him to make a plan, which focused on daily goals, dialectical behavior therapy skills to help his emotional regulation, and safety planning for self-harm.

During sessions, they focused on Leon's strengths and how they could be built into his daily structure. They chatted through daily maintenance plans, including speaking with his parents and scheduling breathing exercises for afterwards, doing some form of exercise, and maintaining his hygiene.

These daily maintenance goals progressed and, after five months, Leon was able to return to his working role as a manager. Leon said he felt really proud of seeing how he'd progressed from a target of personal hygiene to the much larger goal of getting back to work.

Interactions with other people had previously made Leon feel anxious and burnt-out. Together, Leon and his Mental Health Worker talked through how he could recognise when something might be over-stimulating. This was really helpful with daily and weekly plans, and he ended up attending his friend's birthday party - a huge goal!

Leon's feedback

"I want to acknowledge, compliment, and thank you for the calls and the difference you have made. I have learned so much, and now I am able to recognise signs of beginning to lose control, and prevent it (I have not hurt myself in the past few months). I didn't find the calls hard to attend - in fact I looked forward to them and found your calls calm, soothing, and 'tapped into what I need/do'".

Our team member's perspective

Hearing the pride and positivity increase in Leon's voice, and the shift in the way he reflected about himself each appointment, is exactly why I love this job. No matter the size of the goal, the acknowledgment of his achievements and listening to him come to this conclusion himself has me coming away from work at the end of the day feeling so happy. I feel like we as a team are making a difference and helping people.'

Community mental health support service - Helen's story

I went into crisis, and I couldn't cope, function, or work. I was in a really bad place. I was aware of Everyturn's services, but I wasn't aware of how they could give me wraparound support.

When meeting for the first time, I liked that I was able to meet in a venue I was familiar with, so I felt comfortable. The 1:1 support has been exactly what I needed. I found it very helpful to have the same worker, rather than speaking to different people. My support worker made me feel safe, so I could share things with them. I was able to tell my story without the need to go over and over it. There were no endless wellbeing scales, it was simply constructive and consistent support.

I enjoyed the constructive tools that were given during the appointment; it gave me direction and enabled me to get better. It felt like a self-improvement programme, I liked the structure it gave me. My support worker gave advice and tools around anxiety, low mood and self-esteem. We shared positive affirmations, and they helped me to make a wellbeing first aid kit; a box of things that keep me well when I am finding things difficult.

The fact that they have kept me well, whilst I have waited so long for an appointment for treatment elsewhere, is exactly what I needed. I can see from my wellness scales, that I have improved with all of the information and support provided. I have been able to get back into work and they have shown me options for support.

They have made a really positive impact. Having good practitioners that know what they are doing allows for this. Before this support, I was sinking into patterns of punishing myself. But I now feel better about myself. They have held my hand through a difficult time and now I am being kind to myself and my self-confidence has increased.

“

She made me feel so safe and comfortable that I shared everything going on and, after that, I was reassured that I would be able to get the help I needed.

I have learnt that I am worth a lot more than what I have been treated in the past and I am worthy of feeling happiness.

”

Our colleagues and their wellbeing



This year we've really focused on supporting our colleagues' wellbeing, with mental health at the heart of our efforts. We've reviewed our wellbeing offer to make sure it meets the evolving needs of our teams and we've strengthened the mental health support available to all colleagues.

We've improved our overall benefits package, offering more meaningful and supportive options that reflect what matters most to our colleagues. We've also expanded our learning and development offer, creating more opportunities for personal and professional growth.

These improvements are part of our ongoing commitment to making Everyturn a place where people can thrive, feel empowered in their roles, and continue to grow in a supportive and inclusive environment.

Colleague engagement highlights

- We introduced our Workplace Experience Group, which is a forum of colleagues from across the organisation, ensuring they have a voice and a space to share feedback and ideas to make Everyturn a great place to work.
- We launched colleague 'Listening Sessions', which are regular group meetings between colleagues, executive management, strategic leaders, and trustees, to do a 'deep dive' into themes such as psychological safety and change.

Colleague wellbeing highlights

- Following feedback from our colleagues, we launched a new partnership with Smart Clinic to improve our occupational health and wellbeing offer
- We designed and rolled out a 'Wellbeing Hub' on our intranet, to give easy access to support tools.
- We made the 2024 'Best Workplaces for Wellbeing' list based on Great Place to Work survey external benchmarking
- Formed a 'mental health in the workplace' task and finish group, which led to multiple meaningful changes such as the development of a Mental Health at Work Policy, a 'safe exit' process for departing colleagues, and a wellbeing calendar of events scheduled for 2025.

Learning highlights

Using insights from our teams, we developed our range of 300 courses for professional and personal growth, covering:

- Leadership development for current and future leaders.
- Training in suicide prevention, restraint, and breakaway techniques building confidence in challenging circumstances.
- Peer-to-peer knowledge sharing and collaborative projects through our Champion roles.
- CPD initiatives on self-care and career advancement.

Our quality priorities for 2025/26



To allow us to achieve our quality and safety outcomes by 2027 (see page 23), these are our 25/25 priorities:

Priority 1: Improving safety

Delivering care in a way that reduces the risk of things going wrong.

We will build on our safety culture by:

- Developing our robust risk management processes.
- Improving our reporting systems to increase access to data, including developing a quality and safety dashboard on Tableau.
- Improving our audit capabilities by introducing IT systems to support auditing processes.
- Develop a robust plan for achieving ISO 45001 recommendations for health and safety.

Priority 2: Effective, accountable and engaged leadership

Accountable and compassionate with shared vision, values and learning.

We'll do this by:

- Reviewing Freedom to Speak Up, whistleblowing processes, and improving local awareness of how to raise concerns locally.
- Sharing themes and trends from listening sessions across the organisation, including themes from quality service reviews.
- Developing robust risk management processes to improve risk escalation and oversight.
- Improving oversight and assurance by developing and implementing governance structures and reporting arrangements.

Priority 3: Greater clinical effectiveness

Giving the right care, at the right time, in the right place.

We will improve this by:

- Developing a clear clinical effectiveness programme and governance arrangements.
- Integration of systems with our NHS partners to improve quality of care through implementing RIO/PCMIS patient recording systems
- Aligning all policies and guidelines with national standards.
- Developing a clinical strategy, including supervision arrangements for clinical and non-clinical colleagues.

Priority 4: Positive experiences

The people we support and their carers inform all of our work.

We'll do this by:

- Further develop KPIs to ensure the experiences of the people we support are visible and leads to change.
- Implement and embed the learning organisation work streams including implementing our first service user engagement framework.
- We will listen to people who are most likely to have poorer experiences, outcomes or results by developing service user engagement forums.
- We will enhance our reporting systems to capture racial and sexual harassment incidents to improve experience of our colleagues.

Priority 5: Children and young people's services

We will better understand and enhance delivery of services to children and young people (CYP).

We'll do this by:

- Reviewing our policies to make sure they're relevant to CYP.
- Reviewing and developing our quality management systems to capture and learn from CYP-related events.
- Developing a process for listening and including CYP in shaping future services to meet their needs.
- Reviewing and improving our safeguarding policies and procedures to align with best practice advice.



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