

# DonnaOckenden

**Date:** 2017

**Region:** A number of South East CCGs

**Overview:** To review the existing set up, specifically regarding communications, referral process, right skills and right care provision in the right place and funding within a specific children's and adolescent inpatient service.

**The details:** Donna Ockenden was approached by a lead CCG representing a number of other CCGs to carry out an in depth review of this service and to make recommendations to ensure effective communications, assess service efficiency and provide assurance regarding processes. Donna undertook a site visit, reviewed a range of services, provided evidence and conducted many interviews with staff throughout the service. She discovered communication lines were blurred regarding referrals in particular and that feelings were running high with clinicians describing high levels of frustration and anxiety. There was said to be a lack of clarity around KPIs between commissioners and provider; and commissioners considered KPIs they stated, were in place they were not being met or adhered to.

There was much anxiety, frustration and concern found throughout the service. In addition, funding delays caused confusion and the provider described that on occasion referrals were declined which resulted in these being challenged and further delays to treatment and difficulty in planning clinical schedules. A panel approach had been set up to review referrals, however other issues had arisen since then around panel expertise and availability and therefore this new approach had not helped significantly.

Positive aspects of the service were around the provision of education where attendance and engagement was consistently at a high level. The service was found to be an opportunity for patients who have often reached the end of standard pathways without resolution. Evidence was provided which showed 70% of patients maintained or improved their recovery post discharge from the service.

Donna recommended that an immediate improvement needed to occur in the dialogue between commissioners and providers. A complex needs coordinator role should be considered and the seamless provision of a county wide enuresis service would be vital. At the end of the review it was noted there was much common ground and a willingness to work together from all involved.

**Outcome:** Donna made a range of recommendations, all of which were accepted by the lead commissioning CCG.