Leicestershire Partnership NHS Trust

Quality Account 2025/26 Summary

Our Quality Account explains how we make sure our services are safe and high quality. It also describes some of the challenges we face as well as the improvements we are making. This is a summary version – much more detail can be found in our full Quality Account 2025/26 on the 'What we do' page of our website. You may also be interested to read our Annual Report 2025/26 which can be found in the same place.

If you would like this information in another format or need help understanding it, please contact us at: lpt.feedback@nhs.net

Highlights of 2025/26

- **Our THRIVE strategy:** This year saw the first full rollout of THRIVE - our plan for improving care and services - focusing on technology, healthy communities, responsive care, inclusion, supporting our staff, and working efficiently.
- **Care rated 'Good':** Our mental health crisis services and health-based places of safety were rated *'Good'* by the Care Quality Commission (CQC), recognising compassionate care, strong leadership, and effective teamwork.
- **Improving access to care:** We reduced the average wait for a first assessment in our community mental health services to 51 days, helping people get support sooner.
- **Clean and high-quality environments:** We achieved 100% for cleanliness in national assessments, alongside excellent scores for privacy, and dignity.
- **Supporting carers:** We achieved the first two stages of the Carers Trust Triangle of Care accreditation, recognising our strong commitment to involving and supporting carers in people's care.
- **Innovation and digital progress:** We expanded digital tools such as ChatHealth (a confidential text messaging service for advice and support) and introduced new technologies, including wound care apps and brain stimulation therapy, to improve care and outcomes.
- **National recognition:** Our work was recognised through several national awards, including a Health Service Journal Patient Safety Award for Waterlily (our digital programme supporting people with eating disorders).
- **Positive staff experience:** Staff survey results improved, ranking 5th among similar trusts, with high levels of staff recommending our Trust as both a place to work and receive care.
- **Reducing inequalities:** We continued to tackle health inequalities and promote inclusion through targeted programmes and partnership working.

- **Working in partnership:** We strengthened collaboration with patients, carers, communities, and partner organisations, increasing co-production to help design and improve services together.

Progress against our priorities in 2025/26

Priority one: Roll out of Triangle of Care
Carers play a vital role in supporting people who use our services. The Triangle of Care (TOC) is a national programme that helps services work in partnership with carers, so they feel informed, involved and supported.

Over the past year, we have made strong progress in delivering TOC. We've now achieved the first two levels of accreditation, recognising our commitment to involving carers, and expanded the programme across more services. We introduced a new carer dashboard to help us monitor how well we support carers, trained more staff in carer awareness, and developed new resources and support for carers. Together, these improvements are helping carers feel more valued, informed and better supported in their caring role.

Priority two: Implementation of the Patient and Carer Race Equality Framework (PCREF) through Together Against Racism work
The Patient and Carer Race Equality Framework (PCREF) helps us make care fairer by working with patients, carers and communities to reduce inequalities and improve experiences and outcomes.

Over the past year, we have worked closely with people from diverse communities, including recruiting Lived Experience Partners to help design and guide our programmes, ensuring their voices shape real change. We improved how we collect and use information about our patients to better understand inequalities and introduced community programmes to raise awareness and build trust. On our wards, improvements include creating calmer, more welcoming spaces - such as sensory rooms and redesigned environments - and offering more meaningful and culturally relevant activities shaped by patient feedback. Together, this is helping us provide more inclusive, personalised and culturally responsive care.

Priority three: Improving assessment and prevention of moisture associated skin damage (MASD) for patients in community hospitals
Moisture associated skin damage (MASD) can be painful, distressing, and slow to heal, so preventing and managing it is important for patient comfort and recovery.

Over the past year, we have made good progress in improving care. We set up a community of practice bringing together continence, tissue viability and ward teams to share learning and improve consistency. We reintroduced continence link nurses and increased specialist support for wards. We also listened to staff and patients, improving training, guidance, and access to the right equipment. These changes are helping staff feel more confident and supporting safer, more effective care to reduce skin damage.

Priorities for improvement next year (2026/27)

We chose our quality account priorities for 2026/27 following a review of information about quality. This included listening to what the people who use our services said about the care and support that we provide.

Priority one: Personalised care planning

We want every person staying in our inpatient services to have a care plan that is clear, personalised, and developed with them. This matters because feedback and inspections have shown that care planning is not always consistent, which can affect how involved patients feel in their own care.

Over the next year, we will improve the quality and consistency of care plans by introducing clear standards across all wards, providing better staff training, and developing a more user-friendly, patient-accessible template. We will also use simple measures to check how well care plans meet these standards.

By March 2027, we expect patients to have care plans that reflect their individual needs and preferences, helping them feel more involved and supported. Staff will feel more confident in creating high-quality care plans, and audits and feedback will show improvements in consistency, patient experience, and safety.

Priority two: Continuation of Triangle of Care

Over the past two years, the Triangle of Care (TOC) programme has helped us improve how we identify and support carers across many services.

Next year, we will build on this by completing the final stage - Star 3 accreditation - across all remaining services. This means making sure carers are identified early, involved in care where appropriate, and given the right information and support, with staff fully trained.

By the end of the year, we expect carer involvement to be consistent across the Trust and clearly recorded in our systems, showing it is embedded in everyday care.

Priority three: Reasonable adjustments digital flag to support access and experience and support

Everyone has the right to fair and equal access to healthcare, and some people need reasonable adjustments - such as longer appointments or accessible information - to use services safely and comfortably. The Reasonable Adjustment Digital Flag (RADF) helps staff record and meet these needs consistently and supports our legal duties under the Equality Act 2010.

Over the next year, we will make RADF a routine part of care by improving staff training, providing clear guidance, and introducing a dashboard to monitor use. We will also make it easier to record when adjustments are offered and used.
By doing this, staff will feel more confident, and we will ensure patients' needs are recognised, recorded, and acted on consistently across all services.

Driving quality improvement

Our work to monitor standards and drive forward improvement in LPT is carried out in many ways.

Quality, compliance, and regulation

We welcome scrutiny from external organisations such as the Care Quality Commission (CQC), which inspects and rates our services. This year, we maintained our registration and supported several unannounced inspections.

Our community mental health services for working age adults showed improvement, with ratings for *safe* and *effective* upgraded to 'Good'. Inspectors praised caring staff, strong teamwork, and a positive learning culture, but identified ongoing challenges with waiting times. In response, we reduced the average wait for first assessments to 51 days through service redesign, improved data quality, and strengthened staffing.

Ratings for our mental health crisis services and health-based places of safety improved significantly, achieving an overall *'Good'* rating across all areas, with no regulatory breaches. They were recognised for safe, high-quality care, strong leadership, and positive patient experiences.

We also welcomed Mental Health Act reviewers from the CQC, who found good practice and highlighted areas for improvement, such as the need to get better at consistently personalising care plans and ensuring good access to outdoor spaces.

Alongside inspections, our internal quality team continues to support services through training, mock inspections, and visits involving staff and patients, and Board members continue to regularly visit services to speak with staff. This helps identify improvements quickly and ensures we continue to provide safe, high-quality care.

WeImproveQ

Quality improvement (QI) is part of everyday practice at LPT, helping staff identify opportunities to improve care and make meaningful changes. Through our *WeImproveQ* programme, staff have continued to build skills, confidence, and a strong culture of continuous improvement.

This year, over 120 staff took part in training and workshops, including national programmes and our internal QI sessions. We also introduced a new *WeImproveQ Fundamentals* programme to help staff start and lead improvement projects.
We strengthened how we monitor quality through our Audit Management and Tracking system (AMaT), with 225 regular audits and over 200 staff trained to use the system. This has improved how teams track safety, record keeping, and action planning.

Staff led a wide range of improvement projects, including promoting smoking cessation in mental health rehabilitation wards and developing more sensory-friendly environments for patients with autism or sensory needs.

QI remains embedded in training and everyday work, supported by idea-sharing sessions, collaboration with partners, and clear storytelling through project summaries, helping spread learning and improve care across the Trust.

Participation, coproduction and patient and carer experience

This year, we made strong progress in working more closely with people who use our services, their families, and communities.

More people with lived experience took on leadership roles, helping to shape how services are designed and improved. Across the Trust, co-production became more embedded, with teams increasingly working *with* patients and carers, not just for them.

Service user engagement and coproduction has led to many improvements, including improving Recovery College courses, redesigning Mental Health Central Access Point (MHCAP) communications, and updating patient information to make it clearer and more accessible. Over 20 people with lived experience took part in PLACE (Patient-Led Assessments of the Care Environment) assessments, helping review ward environments, while services such as the Community Integrated Neurology and Stroke Service used patient feedback to improve guidance and support materials.

Lived experience partners played a key role in quality improvement, training, and decision-making, supported by a growing network of over 300 members. Their involvement helped shape strategy, influence education, and strengthen governance. The Youth Advisory Board ensured young people's voices improved digital information, care pathways, and support for young carers. The People's Council also provided important challenge and insight, helping improve communication, involvement, and how feedback is used.

Our research

Research plays a vital role in improving the care we provide, helping us develop safer, more effective, and more responsive services. At LPT, we are working to make research part of everyday practice, building a strong culture where staff, patients, carers, and communities can take part in studies that matter to them.

We continue to work with partners such as the University of Leicester and Northamptonshire Healthcare NHS Foundation Trust, with the aim of becoming a University Hospital Association Trust, supporting innovation, education, and recruitment of research-active staff.

During 2025/26, 387 people took part in research studies, including 266 in national NIHR portfolio studies. We supported 27 active studies and completed 12 major multi-centre projects. Our work covers a wide range of areas, including improving care for people with learning disabilities, stroke rehabilitation, medicines management for older people, and support for long-term conditions.

We also strengthened research delivery by becoming a Category A organisation in the NIHR (National Institute for Health and Care Research) Research Delivery Network and securing a mobile research unit to bring studies closer to communities. Alongside this, we continue to develop staff skills through training programmes and research career pathways.

Freedom to speak up
Patient and staff safety remains our highest priority at LPT, supported by a culture where staff feel confident to speak up. Our vision, *"Together we thrive; building compassionate care and wellbeing for all,"* emphasises the importance of listening, learning, and acting on concerns.

Over 2025/26, we strengthened our Freedom to Speak Up (FTSU) approach by developing a new reporting tool, improving how concerns are recorded and used to drive change. 'Speak Up' training was introduced for all staff, with 98% compliance, helping build confidence across the organisation.

We continued to promote psychological safety through our *Our Future, Our Way* programme, ensuring staff feel safe to share ideas and raise concerns. Engagement activities, including *Speak Up Month* visits to 29 sites and a leadership conference, increased awareness and visibility of support.

During the year, 178 concerns were raised, reflecting growing trust in the process. Themes included staff wellbeing, leadership, and patient safety. Listening and acting on feedback led to improvements, such as a new standard process for requesting additional staffing. This work shows our commitment to creating an open, supportive culture where every voice matters.

Recruitment and workforce wellbeing

During 2025/26, we continued to focus on recruiting and retaining a skilled workforce. Around 850 new staff joined LPT, vacancy rates reduced, and staff turnover improved. This has helped reduce reliance on agency workers, providing more consistent care for patients and better use of resources. We maintained clinical support staffing, increased our registered nursing workforce by 85 full-time equivalent roles, and strengthened medical staffing by recruiting more permanent doctors. Recruitment times remained efficient at around four weeks, and improvements to induction have helped new staff settle into roles more quickly.

Supporting staff wellbeing remains a key priority. Our Workforce Health and Wellbeing Service offers a wide range of support covering mental, physical, emotional, social, and financial wellbeing. Through communications, events, and targeted support, we are making it easier for staff to access help when needed.

We have strengthened peer support through a growing network of over 50 Health and Wellbeing Champions, 300 Mental Health First Aiders, and other specialist roles. Initiatives such as Team Time Out sessions, Schwartz Rounds, wellbeing roadshows, and online workshops have supported staff to connect, reflect, and build resilience.

We are proud to be recognised as a Mindful Employer and Healthy Workplace Committed Employer. Staff survey results remain strong, with LPT scoring above the

national average across all NHS People Promise indicators, showing staff feel supported, valued, and able to provide high-quality care.

Service improvement examples

In our full quality account, we have presented lots of examples of ways in which we have developed services over the last year. A small selection are included below.

Improving physical health care for people with learning disabilities

This year, we launched a new Physical Health Competency Framework to improve the quality and consistency of physical healthcare for people with learning disabilities. The framework strengthens staff skills to identify health issues early, respond confidently, and provide personalised, proactive care.
As a result, patients can benefit from earlier support, better monitoring, and prevention of avoidable health problems. This work helps reduce health inequalities and supports more holistic care, improving long-term health and wellbeing outcomes.

Improving efficiency in phlebotomy

Our phlebotomy services (the dedicated team who take blood samples from people) who visit patients in their own homes worked with the Health Informatics Service to introduce a new system for labelling blood sample bottles. Previously these were handwritten but staff are now able to print labels, saving time, improving accuracy and reducing rejections from the pathology service when labels are difficult to read.

New hearing testing facility at Beaumont Leys

We opened a new diagnostic hearing testing facility at Beaumont Leys Health Centre to replace outdated spaces and ensure children and young people can receive safe, accurate hearing tests in a specialist environment. The fully soundproofed room and separate observation suite now provide a gold standard testing setting, while our audiology staff also gained a significantly improved place to work.

Transforming access to community mental health support

Our transformation programme is improving how people access adult community mental health services, making it quicker, simpler, and more consistent. A single “front door” means people no longer need to move between different services. Instead, a team of professionals works together from the start to identify the right support.

Community Connectors provide early contact, helping people understand their options, access local support, and move smoothly into clinical care if needed.

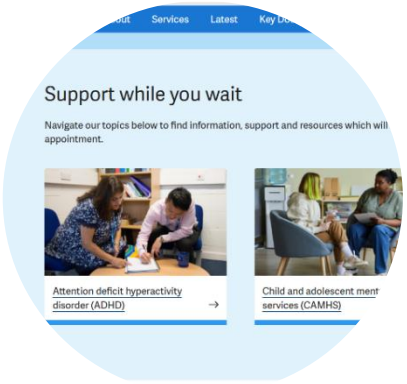
Alongside daily team meetings, reduced caseloads, and improved systems, this approach reduces delays and repetition. Overall, it is helping people receive more personalised, joined-up care, with shorter waiting times and better support to stay well while waiting or after discharge.

New frenotomy service for local families

We launched a new pilot service offering frenotomy, a simple procedure that cuts the small tight piece of skin under a baby's tongue to help it move more freely. This can make feeding easier, improve weight gain, and reduce pain and stress for parents. The service provides local, specialist support for babies aged 8 days to 18 weeks, helping families avoid long waits or the need to seek private treatment. Each family receives guidance after the procedure, such as tongue exercises and breastfeeding support, to help feeding improve safely and comfortably.

Helping people stay well while they wait

To support people waiting for assessments or treatment, we launched a new *"While You Wait"* section on our website. It provides clear, clinically approved information and practical advice to help people manage their wellbeing while waiting for care. Focusing on areas with longer waits - such as ADHD, children and young people's mental health, and adult mental health - the pages offer guidance on symptoms, daily coping strategies, and sources of support.



Although it does not replace a full assessment, it helps people feel more informed and supported. The resource will continue to develop, with plans for videos, Easy Read, and translated information to improve accessibility.

More accurate medication documentation

We introduced a new digital system for recording depot (long-acting medication given by injection) medications in SystmOne, replacing paper charts. This helps reduce errors by ensuring information is clear, complete, and recorded in one place. Staff can access up-to-date details quickly, supporting safer decisions and better monitoring of treatment. It also improves communication between teams by making sure everyone involved in a patient's care has access to the same accurate information.

Summary

Thank you for reading our 2025/26 Quality Account Summary. This year we focused on providing safe, compassionate and effective care, while listening to patients and staff. We improved access to services, strengthened our safety culture, and worked to reduce health inequalities through closer community partnerships. Together with patients, carers and staff, we have made meaningful improvements. While challenges remain, we are proud of our progress and remain committed to learning, improving, and delivering high quality care for all.

Further information

If you would like to find out more about anything included in this Quality Account Summary, or you have ideas about how to make the document better in future, please don't hesitate to get in touch on LPT.feedback@nhs.net or telephone: **0116 295 1350.**