



*Improving lives together*

# Quality Account

**1<sup>st</sup> April 2024 to 31<sup>st</sup> March 2025**

# Contents

1.1	Statement from the Chief Executive Officer	3
1.2	About Cygnet	4
1.3	History and Acquisitions	4
1.4	Site Developments	5
1.5	Divisions	6
1.6	Service Lines	7
1.7	Corporate Strategic Priorities	8
1.8	Values	9
1.9	Site Location Map	10
2.1	Statement of Assurance from the Board	11
2.2	Nursing Strategy	13
2.3	Midpoint Reflections: Year Three of Our Clinical Strategy	16
2.4	National Clinical Audits	19
2.5	NHS England Audits	21
2.6	Customer Survey	22
2.7	Research	23
2.8	Mortality Surveillance and Prevention	26
2.9	Data Quality	27
2.10	Governance	27
2.11	Freedom to Speak Up (FTSU)	29
3.1	Clinical Systems	31
3.3	Co-Production	32
3.4	Service User Experience	34
3.5	Educational Facilities	42
3.6	Staff Surveys	44
3.7	Staff Experience	45
3.8	Revalidation and Appraisals for Doctors	46
3.9	Regulation and Inspection	47
3.10	Positive and Safe Care	49
3.11	Patient Safety Incident Statistics	50
3.12	Complaints and Compliments	51
3.13	Mandatory Indicators	52
3.14	Quality Improvement	54

## 1.1 Statement from the Chief Executive Officer

As part of the 2024 / 25 annual quality account, I am required to reflect on the achievements of the organisation during this period. I can say that we have achieved our goals and ambitions for the 12 months and are already embarking on the next round of objectives.

During 2024 / 25 we have seen an expansion of our services, we have seen an improvement in our regulatory ratings across Health and Social Care. At the time of writing this we don't have any sites rated as inadequate and over 83% of our sites are rated Good or Outstanding, this is an industry leading standard.

We have seen a few initiatives that have been a first for the sector of mental health and learning disability, these include introduction of carer ambassadors, introduction of the Triangle of Care and Carer Advocacy.

During this period, we have seen several key developments across our digital footprint and this year will see the introduction of electronic prescribing and we also achieved full implementation of the Datix incident management system.

We have also seen growth this year in our number of beds within our Health Care and Social Care divisions. This has enabled us to have a good patient and resident pathway available within Cygnet to ensure we can care for patients for all their care pathway needs.

I celebrate the achievements within this quality account, and I recommend this to you on behalf of the Board of Cygnet.



**Dr Tony Romero**

Chief Executive Officer,  
Cygnet Group

On behalf of the Executive  
Management Board





## 1.2 About Cygnet

We are a leading provider of Health and Social Care, complex mental health, learning disability and autism services in the UK. Established in 1988, our 37-year history has seen us build a reputation for delivering pioneering services and outstanding outcomes for children, young people, adults and older people.

Through our values of Integrity, Trust, Empower, Respect and Care we take pride in the services we offer and the outcomes we enable individuals in our care to achieve.

Our expert and highly dedicated care team of almost 13,000 employees support more than 8,300 individuals across 150 services to consistently make a positive difference to their lives.

We provide a broad coverage of the behavioural health spectrum from Secure, PICU / Acute, Mental Health Rehabilitation and Recovery, Personality Disorder, Children and Adolescents, Eating Disorder, Learning Disabilities, Autism Spectrum Disorder, Neuropsychiatric, Older Adults, Deafness and Mental Health.

## 1.3 History and Acquisitions

Cygnet was established in 1988, with the opening of Tupwood Gate and Tabley House Nursing Homes. Whilst admiring the cast iron drain pipes at Tabley House, the founders discovered a pattern on the pipes – baby swans namely Cygnets. The name Cygnet was born.

The following year we opened our first mental health hospitals; Cygnet Hospital Harrogate and Cygnet Hospital Godden Green. Over the years, the company grew our specialist mental health division, hospital by hospital, developing new facilities organically.

Since then we have developed a wide range of behavioural health services for young people and adults within the UK.

In 2014, we announced our acquisition by Universal Health Services Inc., one of the largest and most respected Health Care providers in the USA. Since then, we have grown further, following the acquisitions of Orchard Portman in 2015, the Alpha Hospitals Group in 2016, CAS Behavioural Health (formerly the Adult Services Division of the Cambian Group) in 2017 and the Danshell Group in 2018.

In February 2025 we were delighted to welcome Cygnet Newton House into the Cygnet family, further strengthening our commitment to providing high-quality mental health services across the UK.



## 1.4 Site Developments

April 2024 - March 2025

Service	Service Line	Location	Beds	Gender	Open date
Cygnets Hospital Wolverhampton	PICU / Acute	Wolverhampton, West Midlands	29	Male	July 24
Cygnets Hospital Oldbury	PICU / Acute	Oldbury, West Midlands	27	Female	July 24
Cygnets Paddocks	Neuropsychiatric	Widnes, Cheshire	28	Male	August 24
Chestnut Court, Cygnets Hospital Colchester	Autism Spectrum Disorder	Colchester, Essex	5	Male	May 24
Palm Court, Cygnets Churchill	PICU / Acute	London	17	Male	September 24
Tiffany Ward, Cygnets Hospital Stevenage	PICU / Acute	Stevenage, Hertfordshire	14	Female	July 24
Upper Redwood, Cygnets Hospital Taunton	Learning Disabilities	Taunton, Somerset	3	Male	September 24
Cygnets Joyce Parker Hospital	PICU / Acute	Coventry, West Midlands	39	Male	October 24
Kingfisher Ward, Cygnets Hospital Wyke	PICU / Acute	Bradford, West Yorkshire	16	Male	November 24
Roxeth Ward, Cygnets Hospital Harrow	PICU / Acute	Harrow, London	12	Male	January 25
West Ward, Cygnets Hospital Harrow	PICU / Acute	Harrow, London	18	Male	October 24



## 1.5 Divisions

### Cygnets Group has a Total of 3,056 Beds Split into Health Care and Social Care.

> Health Care has a total of 2,240 beds

> Social Care has a total of 816 beds

#### Health Care Sites:

- > 1 Vincent Court
- > 12 Woodcross Street
- > 15 The Sycamores
- > 20A and 20B Turls Hill Road
- > 4, 5 & 7 Sycamores
- > Adele Cottages
- > Cygnets Adarna House
- > Cygnets Acer Clinic
- > Cygnets Alders Clinic
- > Cygnets Appletree
- > Cygnets Aspen Clinic
- > Cygnets Aspen House
- > Cygnets Bostall House
- > Cygnets Brunel
- > Cygnets Cedars
- > Cygnets Churchill
- > Cygnets Delfryn House
- > Cygnets Delfryn Lodge
- > Cygnets Elms
- > Cygnets Fountains
- > Cygnets Grange
- > Cygnets Heathers
- > Cygnets Hospital Beckton
- > Cygnets Hospital Bierley
- > Cygnets Hospital Blackheath
- > Cygnets Bury Dunes
- > Cygnets Bury Forestwood
- > Cygnets Bury Hudson
- > Cygnets Hospital Clifton
- > Cygnets Hospital Colchester
- > Cygnets Hospital Derby
- > Cygnets Hospital Ealing
- > Cygnets Hospital Godden Green
- > Cygnets Hospital Harrogate
- > Cygnets Hospital Harrow
- > Cygnets Hospital Hexham
- > Cygnets Hospital Kewstoke
- > Cygnets Hospital Maidstone
- > Cygnets Hospital Oldham
- > Cygnets Hospital Sheffield
- > Cygnets Hospital Sherwood
- > Cygnets Hospital Stevenage
- > Cygnets Hospital Taunton
- > Cygnets Hospital Woking
- > Cygnets Hospital Wolverhampton
- > Cygnets Hospital Wyke
- > Cygnets Joyce Parker Hospital
- > Cygnets Lodge
- > Cygnets Lodge Brighouse
- > Cygnets Lodge Kenton
- > Cygnets Lodge Lewisham
- > Cygnets Lodge Salford
- > Cygnets Lodge Woking
- > Cygnets Manor
- > Cygnets Maple House
- > Cygnets Newham House
- > Cygnets Newton House
- > Cygnets Nield House
- > Cygnets Oaks
- > Cygnets Pindar House
- > Cygnets Paddocks
- > Cygnets Raglan House
- > Cygnets Sedgley House
- > Cygnets Sedgley Lodge
- > Cygnets Sherwood House
- > Cygnets Sherwood Lodge
- > Cygnets St Augustine's
- > Cygnets St Teilo House
- > Cygnets St William's
- > Cygnets Storthfield House
- > Cygnets Victoria House
- > Cygnets Views
- > Cygnets Wallace Hospital
- > Cygnets West Hills
- > Gledholt
- > Gledholt Mews and Coach House
- > Malborn & Teroan
- > Meadows Mews
- > River View
- > Rhyd Alyn
- > Ty Alarch

## Social Care Sites:

- > Amberwood Lodge
- > Beacon House
- > Beckly House
- > Beeches
- > Birches
- > Broughton House
- > Broughton Lodge
- > Bryn Y Wawr
- > Chaseways
- > Cherry Tree House
- > Clynsaer
- > Conifers
- > Dene Brook
- > Devon Lodge
- > Dove Valley Mews
- > Ducks Halt
- > Ellen Mhor
- > Elston House
- > Fairways
- > Gables
- > Glyn House
- > Hansa Lodge
- > Hawkstone
- > Hollyhurst
- > Hope House
- > Kirkside House
- > Kirkside Lodge
- > Langdale House
- > Lindsay House
- > Long Eaton Day Services
- > Longfield House
- > Lowry House
- > Marion House
- > Nightingale
- > Norcott House
- > Norcott Lodge
- > North East Supported Living
- > North West Supported Living
- > Oakhurst Lodge
- > Oaklands
- > Old Leigh House
- > Outwood
- > Oxley Woodhouse
- > Pines
- > Ranaich House
- > Redlands
- > Shear Meadow
- > Sheffield Day Services
- > Squirrels
- > Staffordshire Supported Living
- > Tabley House Nursing Home
- > The Fields
- > The Old Vicarage
- > The Orchards
- > Thistle House
- > Thornfield Grange
- > Thornfield House
- > Toller Road
- > Trinity House
- > Trinity Lodge
- > Tupwood Gate Nursing Home
- > Walkern Lodge
- > Willow House
- > Woodrow House
- > Yorkshire Supported Living

## 1.6 Service Lines

**Our services across our Health Care and Social Care Divisions are categorised under 12 service lines**

- > Secure
- > PICU / Acute
- > Mental Health Rehabilitation and Recovery
- > Personality Disorder
- > CAMHS
- > Eating Disorder
- > Learning Disabilities
- > Autism Spectrum Disorder
- > Supported Living
- > Neuropsychiatric
- > Mental Health and Specialist Deaf
- > Nursing Homes



## 1.7 Corporate Strategic Priorities

1



### Service users first

Putting individuals at the heart of all we do in the delivery of safe, high quality care.

2



### Support & help more people

Providing the right care, at the right time in settings that best meet individual needs.

3



### Deliver service excellence

To be seen as a provider of choice for the delivery of high quality, evidence-based, specialist care.

4



### Value & develop our staff

To recruit and retain talented people who exemplify our values and feel proud to work in a culture that promotes excellence, delivers person-centred care and provides opportunities for everyone to be their best.

5



### Innovation for the future

Showcase innovation and vision. Harness technology. Deliver our sustainability targets. Be a force for good in the communities we serve.

## 1.8 Values

Our **purpose** is to make a positive difference to the lives of the individuals we care for, their loved ones and all those who work with us.

Our **vision** is to provide high quality, sustainable specialist services that: Ensure service users and residents feel safe and supported, staff are proud of, commissioners and service users select, and stakeholders trust.

Our **mission** is to work together in a positive culture of openness, honesty and inclusivity, where we deliver safe, compassionate, quality care for our service users and staff enjoy a fulfilling, rewarding environment in which to work.

Our **values** are to care for our service users, staff and visitors, to respect them, to ensure a bond of trust is built among us, to at all times empower those we look after as well as our staff, to deliver quality services with integrity.



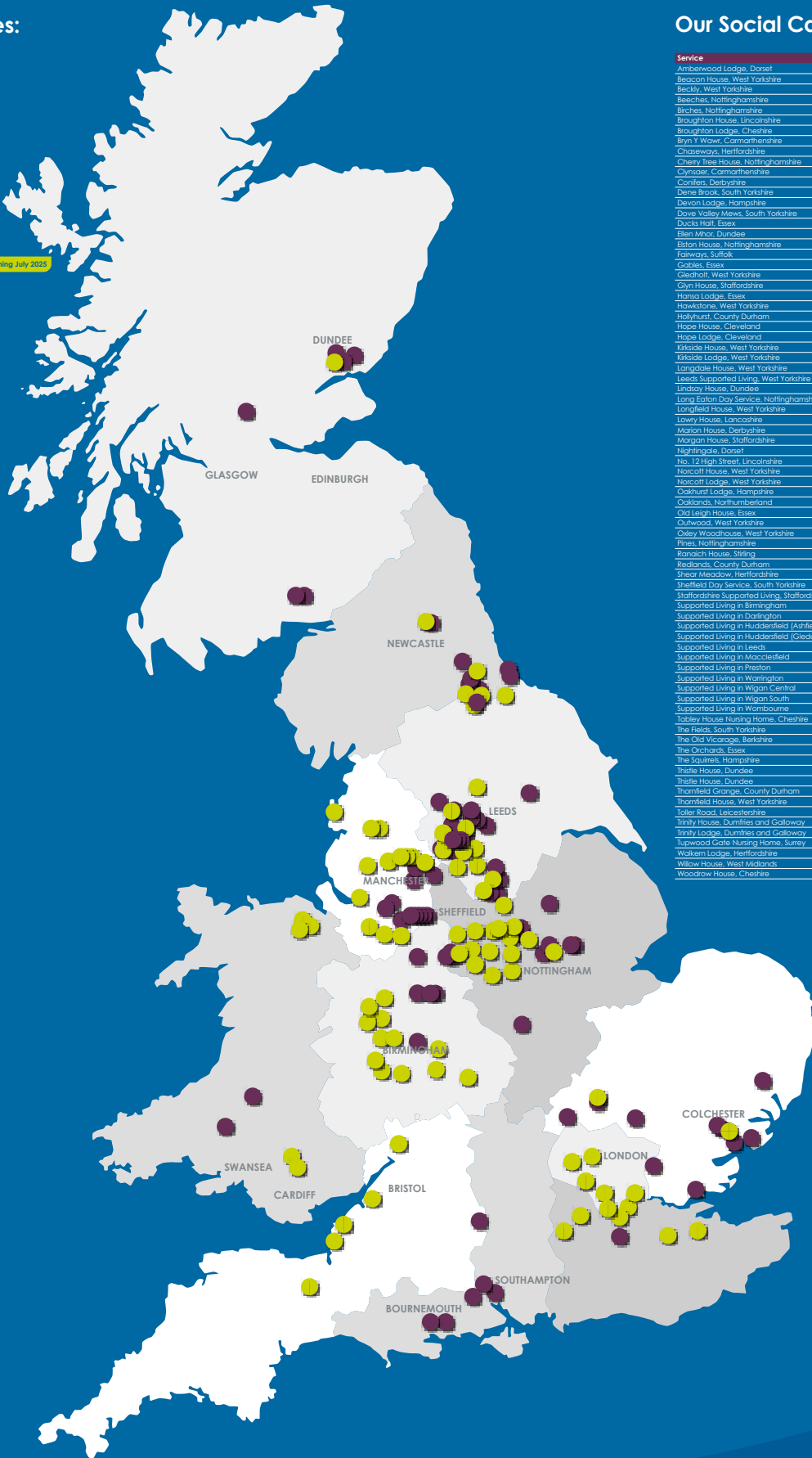
*Improving lives together*

1.9 Site Location Map

Our Health Care Services:

Service	Postcode
1 Vincent Court, Lancashire	B82 4LD
12 Woodcote Street, Wolverhampton	WV14 9RT
15 The Sycamores, Derbyshire	DE55 3BU
20A & 20B Turk Hill Road, Dudley	DY9 1HG
4 & 7 The Sycamores, Derbyshire	DE55 3BU
Adele Cottages, Nottinghamshire	NG21 0HR
Cygnnet Acer Clinic, Chesterfield	S43 3DN
Cygnnet Adama House, West Yorkshire	BD6 3DG
Cygnnet Alder Clinic, Gloucestershire	GL1 5JA
Cygnnet Appletree, County Durham	DH1 8HT
Cygnnet Aspen Clinic, Doncaster	S64 9EX
Cygnnet Aspen House, Doncaster	S64 9EX
Cygnnet Baital House, London	SE2 0AT
Cygnnet Banall, Telford	ST10 7DP
Cygnnet Cedars, Birmingham	B9 5LY
Cygnnet Churchill, London	SE1 7PW
Cygnnet Delfryn House, North Wales	CH7 6FQ
Cygnnet Delfryn Lodge, North Wales	CH7 6FQ
Cygnnet Bms, Birmingham	B23 7BD
Cygnnet Bowen Hospital, Derbyshire	DE75 7JH
Cygnnet Fountains, Lancashire	B82 1TU
Cygnnet Grange, Nottinghamshire	NG17 4HQ
Cygnnet Hoptons, West Bromwich	B70 0XD
Cygnnet Hospital Beckton, London	E6 4JB
Cygnnet Hospital Berley, West Yorkshire	BD4 6AD
Cygnnet Hospital Blackheath, London	SE10 8AD
Cygnnet Bury Dunes, Lancashire	B18 2BS
Cygnnet Bury Forestwood, Lancashire	B18 2BS
Cygnnet Bury Hudson, Lancashire	B18 2BS
Cygnnet Hospital Clifton, Nottingham	NG11 8NB
Cygnnet Hospital Colchester, Essex	CO4 5HF
Cygnnet Hospital Darby, Derbyshire	DE24 6WZ
Cygnnet Hospital Edling, London	W5 2AT
Cygnnet Hospital Godden Green, Kent	TN15 0JR
Cygnnet Hospital Harrogate, North Yorkshire	HG1 2JL
Cygnnet Hospital Harrow, London	HA1 3TL
Cygnnet Hospital Hawthorn, Northumberland	NE46 4JR
Cygnnet Hospital Kewstoke, Somerset	BS22 9JZ
Cygnnet Hospital Kidsgrove, Staffordshire	ST7 4JA
Cygnnet Hospital Maidstone, Kent	ME14 5FY
Cygnnet Hospital Oakbury, Birmingham	B48 9AG
Cygnnet Hospital Sheffield, South Yorkshire	S2 9PX
Cygnnet Hospital Sherwood, Nottinghamshire	NG21 0HR
Cygnnet Hospital Stevenage, Hertfordshire	SG1 4YS
Cygnnet Hospital Taunton, Somerset	TA3 7BQ
Cygnnet Hospital Woking, Surrey	GU21 2GS
Cygnnet Hospital Wolverhampton, West Midlands	WV11 1UH
Cygnnet Hospital Wyke, West Yorkshire	BD12 8LR
Cygnnet Joyce Parker Hospital, Coventry	CV2 4BF
Cygnnet Kenney House, Oldham	OL8 2QH
Cygnnet Lodge Brighouse, West Yorkshire	HD15 3EL
Cygnnet Lodge Kenton, London	HA3 8AE
Cygnnet Lodge Kewstoke, Somerset	BS22 9JZ
Cygnnet Lodge Lewisham, London	SE13 6DZ
Cygnnet Lodge Salford, Lancashire	M6 7WQ
Cygnnet Lodge Welwyn, Surrey	GU21 2PD
Cygnnet Lodge, Nottinghamshire	NG17 4LW
Cygnnet Manor, Nottinghamshire	NG20 8BA
Cygnnet Maple House, Nottinghamshire	NG13 6PJ
Cygnnet Newham House, North Yorkshire	YO8 9DE
Cygnnet Newton House, Bedford	PK9 8NU
Cygnnet Nield House, Cheshire	CW1 4QW
Cygnnet Oaks, South Yorkshire	S70 4PX
Cygnnet Padlocks, Wiltshire	WAS 5UY
Cygnnet Pindar House, South Yorkshire	S70 4PX
Cygnnet Raglan House, Birmingham	B46 3KD
Cygnnet Sedgley House & Lodge, Wolverhampton	WV14 9RT
Cygnnet Sherwood House, Nottinghamshire	NG21 0HR
Cygnnet Sherwood Lodge, Nottinghamshire	NG21 0HR
Cygnnet St. Augustine's, Shropshire	ST11 5JY
Cygnnet St. Tello House, South Wales	NP22 5NF
Cygnnet St. Wilton's, County Durham	DL1 2LJ
Cygnnet Stortfield House, Derbyshire	DE55 3AA
Cygnnet Victoria House, County Durham	DL1 2JN
Cygnnet Views, Derbyshire	DE4 3JP
Cygnnet Wallace Hospital, Dundee	DD3 9AG
Cygnnet West Hills, Birmingham	B38 9ET
Gledhill Mews and Coach House, West Yorkshire	HD1 4EZ
Malcolm & Taran House, Nottinghamshire	NG23 9EN
Meadows Mews, Lipton	DY4 7JA
Rhyd Alyn, North Wales	CH7 6FQ
River View, County Durham	DL1 5JR
Ty Alarch, South Wales	CF4 8UY

Opening July 2025



Our Social Care Services:

Service	Postcode
Amberwood Lodge, Dorset	BH14 9JN
Beacon House, West Yorkshire	BD4 3DQ
Becky, West Yorkshire	HX3 7RG
Beckley, Nottinghamshire	DN22 8BT
Beches, Nottinghamshire	NG24 4JD
Broughton House, Lincolnshire	LNS 0SL
Broughton Lodge, Cheshire	SK11 0JG
Byn Y Wawr, Carmarthenshire	SA19 4DB
Cheseway, Hertfordshire	CA21 0AS
Cherry Tree House, Nottinghamshire	NG19 8QX
Clynsaer, Carmarthenshire	SA20 0LP
Conifers, Derbyshire	DE27 3JZ
Darne Brook, South Yorkshire	S65 3QG
Dawson Lodge, Hampshire	SO30 9RT
Dove Valley Mews, South Yorkshire	S73 0HL
Ducks Hall, Essex	CO13 0DU
Elan Mhor, Dundee	DD1 2QH
Elton House, Nottinghamshire	NG23 5NP
Fairways, Suffolk	IP8 9AX
Gables, Essex	CO4 0ER
Gledhill, West Yorkshire	HD1 4EZ
Glyn House, Staffordshire	ST11 9JG
Holmes Lodge, Essex	RM13 8RG
Hawthorne, West Yorkshire	BD20 6NA
Hollyhurst, County Durham	DL3 9LN
Hope House, Cleveland	TS26 9FW
Hope Lodge, Cleveland	TS26 9FW
Kirkdale House, West Yorkshire	LS5 3ET
Kirkdale Lodge, West Yorkshire	LS3 3EJ
Langdale House, West Yorkshire	HD1 4HR
Leeds Supported Living, West Yorkshire	LS3 3EJ
Lincoln House, Dundee	DD3 9AG
Long Eaton Day Service, Nottinghamshire	NG10 1DS
Longfield House, West Yorkshire	BD14 6NP
Lowry House, Lancashire	SK14 3BS
Marion House, Derbyshire	DE27 3JZ
Morgan House, Staffordshire	ST11 9JG
Nightingale, Dorset	BH6 3PX
No. 12 High Street, Lincolnshire	LNS 0SL
Norcott House, West Yorkshire	WF15 6JA
Norcott Lodge, West Yorkshire	WF15 6JA
Oakmont Lodge, Hampshire	SO40 7AW
Oaklands, Northumberland	NE46 4JR
Old Leigh House, Essex	SS9 1LB
Outwood, West Yorkshire	LS18 4JA
Olney Woodhouse, West Yorkshire	HQ2 1DH
Pines, Nottinghamshire	NG19 8QX
Ranach House, Stirling	FK15 0DR
Redlands, County Durham	DL3 9LP
Shear Meadow, Hertfordshire	HP1 2RJ
Sheffield Day Service, South Yorkshire	S13 7PG
Staffordshire Supported Living, Staffordshire	ST16 2AD
Supported Living in Birmingham	ST16 2AD
Supported Living in Huddersfield (Ashted)	HD2 1DN
Supported Living in Huddersfield (Gleascliffe)	HD2 1DN
Supported Living in Leeds	HD2 1DH
Supported Living in Macclesfield	SK11 0JG
Supported Living in Preston	SK11 0JG
Supported Living in Warrington	SK11 0JG
Supported Living in Wigan Central	SK11 0JG
Supported Living in Wigan South	SK11 0JG
Supported Living in Wombourne	ST16 2AD
Tabby House Nursing Home, Cheshire	WA16 0HB
The Fields, South Yorkshire	S13 7PG
The Old Vicarage, Berkshire	RG17 0JB
The Orchards, Essex	CO7 8JA
The Squirrels, Hampshire	SO16 7JE
Thistle House, Dundee	DD3 9AG
Thistle House, Dundee	DD3 9AG
Thornfield Grange, County Durham	DL14 7QZ
Thornfield House, West Yorkshire	BD10 8QY
Toller Road, Leicestershire	LE2 3HP
Tinny House, Dumfries and Galloway	DG11 2DS
Tinny Lodge, Dumfries and Galloway	DG11 2AG
Tupwood Gate Nursing Home, Surrey	CR3 6YE
Walkers Lodge, Hertfordshire	SG1 3QX
Willow House, West Midlands	B17 8ES
Woodrow House, Cheshire	SK4 4FE



## 2.1 Statement of Assurance from the Board

### Board Assurance Mechanisms

Cygnnet has robust governance and assurance systems and processes to ensure our services are safe, effective, and sustainable and have the individuals we care for and support at the heart of all we do. We are committed to providing high quality care through a robust governance framework that is transparent, accountable and inclusive. Clinical excellence and governance are the foundations of our organisation to ensure fairness, responsibility, accountability and transparency.

### How Does it Work?

Each service has its own local governance arrangements and local risk registers that report into a regional and corporate framework to ensure transparency and provide a clear line of sight from Board to ward / service and vice versa.

Services are organised into either our Health Care or Social Care Divisions. Within these Divisions, services are clustered into geographical regions which are overseen by Chief Executive Officers for Health Care and Social Care respectively, and supported by Regional Clinical Directors, Regional Quality Managers, Regional Nurse Directors, Regional Psychology and Regional Occupational Therapy support. The services within our Social Care and Health Care directorates are overseen by two Chief Executive Officers who report to the Group Chief Executive Officer.

Our central service functions provide support to our operational and clinical colleagues and provide the organisation with external mechanisms to gain assurance and identify where further support is required. People's Councils remain a key feature of our governance framework to ensure the voice of the people who use our services is heard.

Our regional and local structures report into Executive Committees that enable us to hear and respond to issues directly and work more collaboratively across our teams. They are:

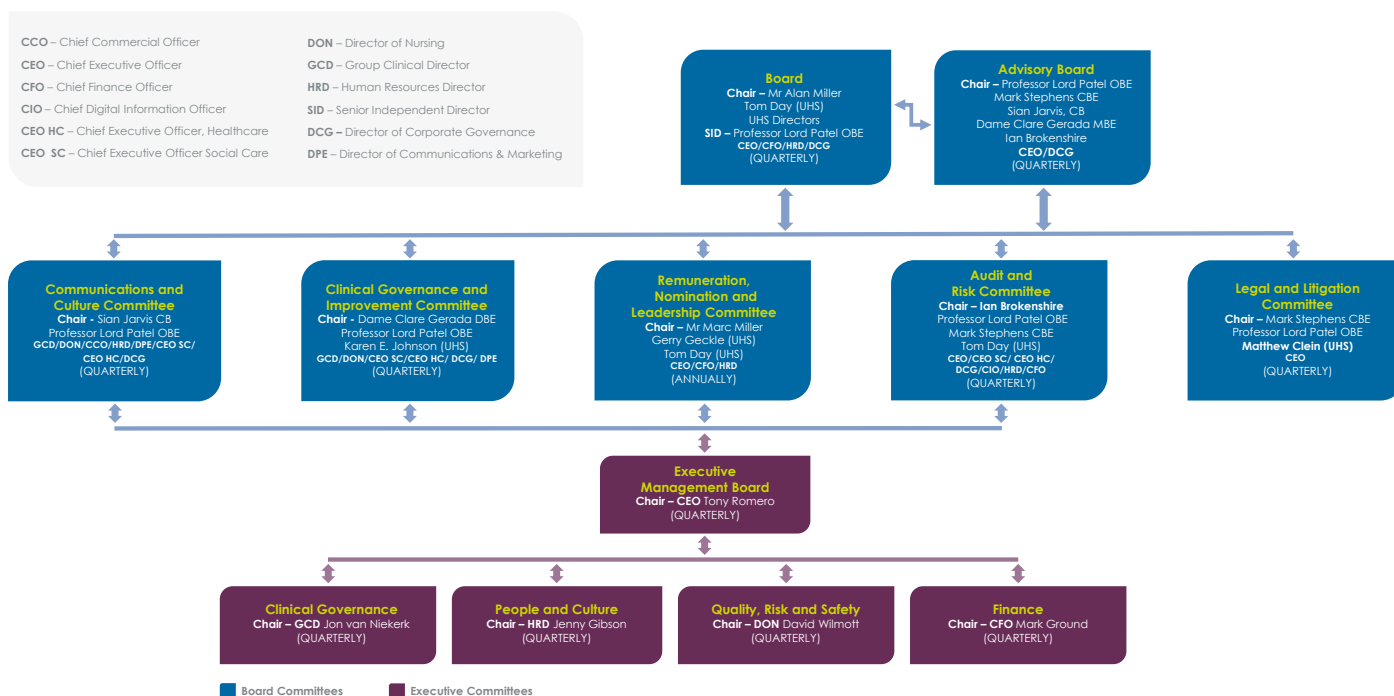
- > Group Clinical Governance Committee  
(Chaired by the Group Clinical Director)
- > People and Culture Committee  
(Chaired by the Director of Human Resources)
- > Quality, Risk and Safety Committee  
(Chaired by the Director of Nursing)
- > Finance Committee  
(Chaired by the Chief Financial Officer)
- > Health Care Operational Board  
(Chaired by CEO of Health Care)
- > Social Care Operational Board  
(Chaired by CEO of Social Care)



## Corporate Governance Structure 2025

The Board Committees report into the Main Board which is chaired by the UHS Chairman, Mr Alan B. Miller.

The Executive structures have also been reviewed during 2025 and the current governance structure is detailed below:



Ultimately, Cygnet's Board through its Board sub-committees and supported by the Advisory Board and its members, is responsible for the quality of care delivered across all services that Cygnet provides. Quality is achieved through robust governance arrangements, which delegate responsibility down to individual units. All staff within the company are committed to working in a professional manner and have a shared responsibility for quality and accountability.

Corporately, Cygnet's Director of Nursing is the Lead Executive for Quality and Safety. This means that although individuals, clinical and care teams at the frontline are responsible for delivering quality care, it is the responsibility of the Executive Management Board to create a culture within the organisation that enables clinicians, clinical and social care teams to work at their best, and to have in place arrangements for measuring and monitoring quality and for escalating issues including, where needed, to the Executive Management Board. It is important that, as an organisation, we encourage a culture where services are improved by learning lessons, and staff and service users are encouraged to identify areas for improvement.



## 2.2 Nursing Strategy

It gives me great pleasure to commend this Quality Account to you, this year has seen many achievements taken forward on behalf of the organisation. This year has seen the launch of the new Nursing Strategy that will take us through until 2027 and really takes a pro-active approach to Nursing and Social Care ensuring it is at the forefront of developments.

For the first time it really felt appropriate to have a Health Care and Social Care section within the overarching strategy. This has enabled us to ensure we have a clear objective for both divisions recognising the unique needs of each division.

As part of this year's objectives and strategy we have taken a proactive approach under the strategic umbrella of Safety Transformation Programme. This Programme was designed by the Nursing Directorate team recognising the new Patient Safety Incident Response Framework (PSIRF). This enabled us to look at our information and align it to our patient safety priorities ensuring a systematic programme is in place to enhance and develop the quality and safety within the organisation.

The quality and safety of our services is reliant on the strong clinical and professional leadership we have in place. This year has seen several initiatives that support this, we have taken an active role in the Culture of Care Programme and the National Quality Improvement Project for Mental Health Law. Within Cygnet we have also continued to roll out the Ward Manager Development Programme and also added in a Clinical Leader's Forum that really supports Clinical Managers to deliver strong clinical leadership throughout our services.



**David Wilmott**

Director of Nursing,  
Cygnet Group

### Health Care Objectives and Actions

#### Objective 1 - Patient Safety

Objective	Actions
<b>Implementation of National Safety Transformation Programme</b>	<ul style="list-style-type: none"> <li>&gt; Workstreams on enhanced care implementation of national guidance - December 2025</li> <li>&gt; Management of deteriorating patients - Ensure all sites score minimum of 85% on NEWS2 audits</li> <li>&gt; AWOL - 10% year-on-year reduction on AWOL incidents</li> <li>&gt; Medication safety - Ensuring all sites have above 90% competency scores in place</li> <li>&gt; Social Care Improvement Group - work plan in place</li> </ul>
<b>Development and Implementation of Service User Safety</b>	<ul style="list-style-type: none"> <li>&gt; Full implementation of Patient Safety Incident Response Framework (PSIRF) - September 2025</li> <li>&gt; Devise and implement National Patient Safety Strategy - October 2025</li> <li>&gt; Implementation of safety huddles - August 2025</li> </ul>
<b>Implement Learning from Quality Improvement Across the Group</b>	<ul style="list-style-type: none"> <li>&gt; Implementation of Diamond Framework on appropriate sites - April 2026</li> <li>&gt; Developing QI Spotlight learning videos to share learning - September 2025</li> </ul>



## Objective 2 - Effectiveness

Objective	Actions
Implementation of Restorative Supervision	<ul style="list-style-type: none"> <li>&gt; Identify appropriate supervision model in Cygnet - September 2025</li> <li>&gt; Revise training programme on supervision - December 2025</li> <li>&gt; Evaluation of supervision on staff outcomes - July 2026</li> </ul>
Development of Two Pieces of Nursing Research	<ul style="list-style-type: none"> <li>&gt; Two pieces of nursing research linked to quality and safety of care - December 2026</li> <li>&gt; Publish piece of nursing research - By December 2027</li> <li>&gt; Present both pieces of research at national conferences - By December 2027</li> </ul>
Implementation of Change Model in Relation to Clinical Audit	<ul style="list-style-type: none"> <li>&gt; Identify process around clinical audit in nursing</li> <li>&gt; Learning response in relation to clinical audit</li> </ul>

## Objective 3 - Patient Experience

Objective	Actions
Implementation of Social Optic Digital Tool	<ul style="list-style-type: none"> <li>&gt; Implement the electronic patient experience tool across Health Care - June 2025</li> <li>&gt; Service User Experience Group to monitor outcomes and themes - July 2025</li> <li>&gt; Improvements in patient experience across the organisation - December 2025</li> <li>&gt; Increase survey uptake by 10% year-on-year by 2027</li> </ul>
Implementation of Patient and Carer Race Equality Framework (PCREF)	<ul style="list-style-type: none"> <li>&gt; Full rollout of programme across organisation - March 2025 onwards</li> <li>&gt; Quarterly progress reporting - July 2025</li> </ul>
Full Implementation of Cygnet Advice and Liaison Service (CALS) Model	<ul style="list-style-type: none"> <li>&gt; Full evaluation July 2025</li> <li>&gt; Phased rollout and monitoring activity levels</li> <li>&gt; Annual review of progress</li> <li>&gt; Reporting of themes and trends to demonstrate improvement</li> </ul>



## Social Care Objectives and Actions

### Objective 1 - Resident Safety

Objective	Actions
Improvement in Reducing Restrictive Practice (RRP)	<ul style="list-style-type: none"> <li>&gt; A year-on-year 5% reduction in RRP across Social Care sites - Baseline May 2025</li> <li>&gt; A 10% reduction in violence and aggression year-on-year - Baseline May 2025</li> </ul>
Improvements in Management of Epilepsy and Associated Harm / Injury	<ul style="list-style-type: none"> <li>&gt; Implementation of a standardised epilepsy risk management and support plan template</li> <li>&gt; A 10% reduction in harm levels associated with seizures year-on-year - Baseline September 2025</li> </ul>
Reduction in Falls and Injuries	<ul style="list-style-type: none"> <li>&gt; A 5% reduction in falls year-on-year - Baseline May 2025</li> <li>&gt; 10% reduction in harm levels associated with falls - Baseline May 2025</li> <li>&gt; Implementation of post-falls assessment and monitoring - October 2025</li> </ul>

### Objective 2: Effectiveness

Objective	Actions
Implementation of Digital Record Management System in Social Care	<ul style="list-style-type: none"> <li>&gt; Implementation April 2026 following procurement exercise</li> </ul>
Develop Dedicated Physical Health Policies for Social Care	<ul style="list-style-type: none"> <li>&gt; Physical Health overarching policy to be developed, recognising the variable service lines and health needs in Social Care, by September 2025</li> <li>&gt; 10 Core Social Care physical health procedures to be developed, to support the health needs of our service users, by October 2025</li> </ul>
Enhancement of Positive Behaviour Support (PBS) Provision	<ul style="list-style-type: none"> <li>&gt; Recruitment of an additional four PBS team members to support the PBS team and strategy in Social Care by September 2025</li> <li>&gt; Development of PBS information leaflets aimed at showcasing PBS teams remit by September 2025</li> <li>&gt; Introduction and delivery of additional PBS modules to enhance the current provision by January 2026</li> </ul>

### Objective 3: Resident Experience

Objective	Actions
Trial of Triangle of Care	<ul style="list-style-type: none"> <li>&gt; Six pilot sites commenced April 2025</li> <li>&gt; Evaluation September 2025</li> </ul>
Implementation of Social Optic	<ul style="list-style-type: none"> <li>&gt; Implementation across Social Care - May 2025</li> <li>&gt; Reporting baseline reports from July 2025</li> </ul>
Increasing attendance of Carers at Social Care Forums	<ul style="list-style-type: none"> <li>&gt; A core group of carers to be identified to support social care in identified work streams by August 2025</li> </ul>

## 2.3 Midpoint Reflections: Year Three of Our Clinical Strategy

As we mark the third year of Cygnet's five-year Clinical Strategy, I am proud to reflect on the progress we have made – and energised by the road ahead. This strategy, launched in 2022, continues to guide how we deliver high-quality, person-centred, and compassionate care across all our services. It represents our collective commitment to clinical excellence, continuous learning, and meaningful co-production with those we support.

Since its inception, the Clinical Strategy has helped shape a culture where safety, transparency, and recovery-focused care are at the forefront. We have embedded our core models of care, strengthened our approach to co-production, and made real progress in creating an open, learning-focused environment that supports our colleagues to thrive. We've invested in our workforce, enhanced clinical leadership, and continued to drive improvement through innovation and shared learning.

Our progress sits within a wider national context. We remain aligned with the NHS Long Term Plan, and are actively preparing for the future direction of mental health services outlined in the forthcoming 10-Year Plan for the NHS. Both NHS England and the Royal College of Psychiatrists have called for bold, integrated, and person-led approaches to care — and we are proud that our strategy anticipates and reflects these priorities. We continue to work collaboratively across health and social care systems to ensure the services we provide are safe, effective, and tailored to individual needs.

As we look to the final two years of this strategy, our focus will be on consolidating the progress we've made and addressing the challenges that remain. We will deepen our commitment to recovery-oriented practice, strengthen our clinical pathways, and further embed co-production at every level. Above all, we will ensure that everything we do is grounded in the belief that people – whether those we care for or those we work alongside – deserve dignity, respect, and the very highest standard of care.

This Clinical Strategy is designed to work in harmony with the Cygnet Strategic Plan 2022–2027, ensuring our clinical ambitions are aligned with our broader organisational goals. Together, they represent our shared vision for a future where care is not only clinically robust, but truly transformative.



**Dr Jon Van Niekerk**

Group Clinical Director,  
Cygnet Group

### Objectives and Actions

#### Objective 1 - Service Users First

Objective	Actions
Putting individuals at the heart of all we do in the delivery of safe, high-quality care	<ul style="list-style-type: none"> <li>&gt; Establish, pilot, and embed meaningful Patient Reported Outcome and Experience Measures (PROEMs) across the service lines, including DIALOG</li> <li>&gt; Services will be person-centred and delivered according to the needs, and preferences, of people, families and carers who access our services and with a focus on the triangle of care between professionals, service users or residents and carers</li> <li>&gt; Implement new Patient Safety Incident Response Framework (PSIRF) with compassionate engagement and involvement of those affected and a system-based approach to learning</li> <li>&gt; Co-produce care plans and care decisions that are informed by individuals' preferences, needs and values</li> <li>&gt; Utilise our clinical dashboard and trend analysis to proactively provide support to site, accordingly</li> </ul>



## Objective 2 - Support and Help More People

Objective	Actions
<p><b>Providing the right care, at the right time in settings that best meet individual needs</b></p>	<ul style="list-style-type: none"> <li>&gt; Work in partnership with other departments to ensure the repurposing of services is clinically informed, in line with our overall strategy and meet the requirements of our commissioners and system partners (Cygnet Clinical Service Change Model adherence, including staffing matrix)</li> <li>&gt; Co-design new builds / repurposing of old / new acquisitions for each service in line with individuals' needs</li> <li>&gt; Expand our provision of Specialist Services according to the standards of our Clinical Models of Care and Service Level Operating Frameworks, implementing external accreditation standards as appropriate</li> <li>&gt; Ensure continuity of care and high quality discharge processes are followed, including regular audit of compliance with same-day discharge notification, discharge summaries according to discharge checklists</li> <li>&gt; Streamline referral processes with Commercial Department to ensure a clinically-informed and responsive service for referrers, with audit of response times and with a focus on commissioner feedback to further refine</li> <li>&gt; Work with sector partners, individuals in our care and their families to safely transition those in our care to onward placements that suit their own individual requirements</li> </ul>

## Objective 3 - Deliver Service Excellence

Objective	Actions
<p><b>To be seen as a provider of choice for the delivery of high quality, evidence-based, specialist care</b></p>	<ul style="list-style-type: none"> <li>&gt; Actively contribute and support Quality Improvement projects and support services to enable a Continuous Improvement culture</li> <li>&gt; Develop further focus on improving physical health outcomes through:</li> <li>&gt; Enhanced training, including diabetes, asthma, epilepsy, and healthy living (diet and exercise)</li> <li>&gt; Fulfil our commitment to STOMP (regular audits)</li> <li>&gt; Support sites who are aiming for an "outstanding" rating by regulators through Corporate Improvement projects (Project Excelsior)</li> <li>&gt; Measure, monitor and improve the quality of all services through standardised clinical outcome measures</li> <li>&gt; HONOS, HONESCA and GAP progression and Patient Reported Outcome Measures (PROMs)</li> <li>&gt; Work towards accreditation and benchmarking of services by external agencies, including participation in:</li> <li>&gt; National RCPsych POMH Audits</li> <li>&gt; CCQI RCPsych accreditation, AIMS, QNIC, QNLD and Headway</li> <li>&gt; NHS Benchmarking</li> </ul>

## Objective 4 - Value & Develop Our Staff

Objective	Actions
<b>To recruit and retain talented people who exemplify our values and feel proud to work in a culture of openness and fairness, that promotes excellence, delivers person-centred care and provides opportunities for staff to be their best</b>	<ul style="list-style-type: none"> <li>&gt; Recruit clinical staff with standardised interview processes based on Cygnet values</li> <li>&gt; Regular salary and terms and condition benchmarking to ensure Cygnet remains competitive</li> <li>&gt; Promote visible, accountable and compassionate leadership and ensure all healthcare leaders have regular supervision and 360 leadership appraisals to support further development</li> <li>&gt; Ensure managers conduct regular supervision and weekly 1:1 catch-ups for all qualified clinicians. Supervision of managers to include talent mapping and succession planning</li> <li>&gt; Launch a new Doctors in Difficulty policy to ensure a compassionate response to doctors needing extra support during investigations</li> <li>&gt; Commitment to developing career pathways and train staff to become clinicians, achieving professional registration in their respective disciplines</li> </ul>

## Objective 5 - Innovation for the Future

Objective	Actions
<b>Showcase innovation and vision, harness technology, deliver our sustainability targets and be a force for good in the communities we serve</b>	<ul style="list-style-type: none"> <li>&gt; Clinical leaders to work closely with all stakeholders (including IT, Operations, Nursing and Learning and Development departments) in the development, testing, implementation, and support of new Digital Transformation projects to enable more integrated clinical systems:</li> <li>&gt; Roll out of new Incident Management System (DATIX)</li> <li>&gt; Update to Electronic Health Record system (MyPath2), including patient and carer access</li> <li>&gt; Electronic Prescribing system</li> <li>&gt; Develop a digital service line specific performance report for qualified clinical staff to support appraisal / supervision processes</li> <li>&gt; Evaluate reducing restrictive practices, including:</li> <li>&gt; Cygnet 7 Cs to reduce Enhanced Observations</li> <li>&gt; Co-production principles in Personality Disorder services</li> <li>&gt; Continue to develop Clinical Dashboard to ensure proactive monitoring of clinical performance through trend analysis and predictive risk monitoring</li> <li>&gt; Ensure a robust Research and Development team and R&amp;D strategy with a commitment to support Academic publications and innovative practice</li> </ul>

## 2.4 National Clinical Audits

### National POMH Lithium Monitoring Audit for Cygnet 2025

Dr Arokia Antony samy RMD, London and South

The Prescribing Observatory for Mental Health (POMH) team at RCPsych conducts national clinical audits every year that focus on discrete areas of prescribing practice. The aim of these audits is to guide mental health organisations improve prescribing practice by providing benchmarked information on their performance against evidence based practice standards including NICE, BAP and RCPsych guidelines.

This audit looked into prescribing practices in the context of managing acute behavioural disturbances in Acute, PICU and secure services.

#### The following practice standards were used:

##### I. Following an episode of rapid tranquillisation (RT):

1. There should be a prompt post-incident debrief, involving, as a minimum, a nurse and a doctor, to identify and address physical harm to patients or staff, ongoing risks and the emotional impact on patients and staff, including witnesses
2. Patients to be offered the opportunity to discuss the incident in a supportive environment, with a member of staff, an advocate, or a carer
3. Care plan should identify triggers and / or early warning signs for any disturbed behaviour and acknowledge his / her preferences and wishes should they become behaviourally disturbed again

II. Intramuscular haloperidol should not be used as part of rapid tranquillisation in the absence of a recent ECG

##### III. Monitoring after rapid tranquillisation:

- a. Following rapid tranquillisation, the patient should be monitored at least every hour on the following measures, until there are no further concerns:
  - Mental and behavioural state (i.e. behaviourally disturbed / agitated, asleep or awake, impairment of consciousness)
  - Physical observations (i.e. pulse rate, blood pressure, respiratory rate, temperature, level of hydration)
- b. Such monitoring should occur every 15 minutes if any of the following apply:
  - BNF maximum daily dose of antipsychotic medication has been exceeded
  - The patient:
    - Appears to be asleep or sedated
    - Has taken illicit drugs or alcohol
    - Has a pre-existing physical health problem
    - Has experienced any harm as a result of any restrictive intervention

IV. Offer oral medication before administering IM / IV Medication for behavioural disturbance, as far as possible

\*For the purpose of this audit, monitoring of patients during maintenance phase looked at data in the past year.



#### Results:

62 NHS Trusts/IP healthcare organisations participated in this audit, submitting data for 3640 patients under the care of 510 clinical teams. Of the 62 participating organisations, **Cygnet contributed to a high response rate with 74 responses, continuing to remain in the top 10%.**

## Audit results Nov 2024:

Practice Standards	National Average	Cygnnet
Proportion of patients administered IM meds	52%	72%
Proportion of episodes with debriefs documented within 72hrs	Acute / PICU - 48% Secure – 42%	Acute / PICU - 79% Secure – 76%
Proportion of RT episodes where pts were offered the opportunity to discuss the incident	42%	62%
Proportion of RT episodes where triggers or early warning signs documented	Acute / PICU - 37% Secure – 58%	Acute / PICU - 81% Secure – 86%
Acknowledgement of patient preferences to manage future episodes	Acute / PICU - 25% Secure – 45%	Acute / PICU - 53% Secure – 67%
ECG done within the 3 months prior to administering Haloperidol	Acute / PICU - 51% Secure – 46%	Acute / PICU - 75% Secure – 100%
Hourly monitoring of mental and behavioural state post RT until no concerns	Acute / PICU - 50% Secure – 61%	Acute/PICU - 50% Secure – 71%
Hourly monitoring of vital signs post RT until no concerns (every 15 mts for pts at risk*)	Pulse BP Temp – 25% Respiration rate – 40%	Pulse BP Temp – 41% Respiration rate – 62%

\*Asleep or sedated, suspected/known substance use, pre-existing physical health problem, BNF maximum dose of antipsychotic medication exceeded

## Positive Practices Identified

Cygnnet is performing above the national average in adhering to prescribing and monitoring standards in the pharmacological management of acute behavioural disturbances in psychiatric inpatient units. Particular areas of progress includes debrief documentation and identification of triggers and early warning signs.



### Areas to improve:

- > **Frequent Physical Health Monitoring:** For at-risk patients post-Rapid Tranquilisation (RT), physical health observations should be documented every 15 minutes. Integrating the NEWS chart into EPR systems could enhance data capture and auditing
- > **Hourly Mental and Behavioural State Monitoring:** Patients should be monitored for their mental and behavioural state hourly after RT until no further concerns are identified
- > **Enhanced Clinical Supervision:** While staff are trained in verbal de-escalation, increased clinical supervision of nursing and support workers is necessary to ensure these techniques are consistently applied in practice
- > **Documenting Patient Preferences:** Patient preferences regarding the management of behavioural disturbances should be documented and communicated to the wider team
- > **PRN use data:** More specific data is needed regarding the proportion of episodes, where oral psychotropic medication was offered prior to IM administration



## 2.5 NHS England Audits

### Specialised Services Audits

Quality Dashboards Specialised Services Quality Dashboards (SSQD) are designed to provide assurance on the quality of care by collecting information about outcomes from Health Care providers. SSQDs are a key tool in monitoring the quality of services, enabling comparison between service providers and supporting improvements over time in the outcomes of services commissioned by NHS England.

For each SSQD, there is a list of agreed measures for which data is to be collected. These measures are included in a 'Metric Definition Set'.

Healthcare providers, including NHS Trusts, NHS Foundation Trusts and independent providers, submit data for each of the agreed measures. Each SSQD is 'refreshed' with up-to-date outcomes submitted from national data sources, and where necessary Health Care providers, on a quarterly basis.

The information provided by the SSQDs is used by Lead Provider Collaboratives and NHS England specialised services commissioners to understand the quality and outcomes of services and reasons for excellent performance. Health Care providers can use the information to provide an overview of service quality compared with other providers of the same service.

During 2024 / 2025, All Specialised Services Quality Dashboard data and Mental Health and Restrictive Practice quarterly reports were submitted and within the required timeframes.

### Service Quality Reporting

Cygnnet has long partnered with NHS England and continues to for some service lines, along with now partnering with Lead Provider Collaboratives in the provision of the majority of its prescribed services.

#### These are:

- > Secure services – Medium (including deafness and mental health), Low (including deafness and mental health and PD)
- > CAMHS services – including low secure, PICU and Acute / GAU
- > Tier 4 PD services
- > Tier 4 Eating Disorders services

A vital part of Cygnnet delivering quality services to its Lead Provider Collaborative / NHS England-funded patients is robust contract monitoring.

Cygnnet reports to Lead Provider Collaboratives and NHS England quarterly via a Service Quality Report (SQR) covering Schedules 4 and 6 of the NHS Standard Contract.

### These SQRs also include the following Annual Reports:

- > Staff survey
- > Service user survey
- > Green Plan
- > Workforce Race Equality Standard
- > Workforce Disability Equality Standard

The Service Quality Report, details performance against Operational Standards, National Quality Requirements, Local Quality Requirements, including never events and duty of candour. Other elements that form the SQR are, but not limited to:

- > Serious incidents and non-notifiable incidents
- > Safeguarding
- > Never Events
- > Complaints and Compliments
- > Clinical / Staff issues
- > Safer Staffing and Staffing Establishment; Workforce Information including:
  - Agency and Bank worker percentages per month
- > Duty of Candour
- > Delayed Discharges
- > KPI Requirements

In addition to these reports, Cygnnet services meet with LPC and NHS England commissioners for an organisation-wide review of prescribed services (with NHS England) and local services review of prescribed services (LPCs) at a minimum of quarterly. Some LPCs also have local reporting requirements which Cygnnet services report on in order to enable the LPC to perform their quality and governance responsibilities.

Cygnnet reviews contract(s) annually and ensures that reporting continues to mirror the requirements there in.

## 2.6 Customer Survey

At Cygnet we believe in a collaborative approach to service improvement. The safety of the people that we support is our priority, and we are continuously looking for ways to ensure our services meet and exceed the expectations of customers, families and everyone that we support.

We take feedback from our customers and key stakeholders seriously and in the summer of 2024 we asked our customers to complete a survey.

The feedback from the survey is very important to us and is used alongside our service user and carer surveys to shape the future of our services and drive quality improvement across the board.

### Results from the Customer Survey Are

The first 5 questions are following the standard 5 star rating system, where 5 stars represent excellent or outstanding:



### The Next 2 Questions Are Yes or No:

Is Cygnet a provider you can trust?

99% Yes

1% No



Do you feel you have an allocated person should the need arise to raise an issue?

92% Yes

8% No



### Comments:

- > There are outstanding elements in all our services with Cygnet
- > A particular strength is that service user participation and engagement in the development of services is evident
- > I have established relationships with Cygnet services which provides the assurances I require to place patients in their care. This is due to the excellent communication, transparency and candour of their leadership teams and service managers
- > Generally I really rate Cygnet, from the numerous quality visits and all of the interaction with staff I have been impressed



## 2.7 Research

Our R&D team continue to meet on a monthly basis to review proposals and on a weekly basis the 3 permanent part time members support researchers with their studies. We have representatives from most clinical professional backgrounds within the company and consultant members from other areas such as education & data protection who offer input when required. We have an Expert by experience (EbE) member of the team who has joined this year, is an active member of the team and whose advice has led to a number of amendments to studies to improve their accessibility and consideration of patient participants.

The Cygnet Journal falls under the Research & Development team with the research lead being the editorial lead for this. The other members of the editorial board include another Psychologist and Cygnets' EbE lead. During the last year the first edition was published and there are plans for a second edition which it is hoped will have a carer and EbE focus. A number of potential care and EbE authors have been approached about writing for the journal.

In terms of research studies, over the past year, the team has supported 42 studies and has had meetings and offered support to many other prospective researchers and those who have completed studies and are hoping to publish.

There has been a move towards coproduction in the planning stages of studies with any patient studies being requested to incorporate PPI input into the design of documents.

This year as part of the strategy there has been a significant focus on expanding our remit to fostering partnerships with many of the universities and this has led to a number of university teams approaching us about Cygnet becoming participants in their existing studies. This includes Professor Langdon (Warwick university) and Professor Murphy (HaSB-IDD study). Another study this year which has a strong coproduction focus is the EMERALD study: Empowering, Enabling Resilience and Living with Dignity: New Model of Care for patients with borderline personality disorder on a Closed ward Environment.

The study is led by researcher Professor Ramon (professor of exclusion and wellbeing at the university of Herfordshire) and includes the involvement of the LEAP (Lived Experience Advisory Panel) which comprises service users who have "considerable experience of living with a mental ill health condition, as well as research experience."





## Publications 24-25:

Over the year from April 24 to date the R&D team have been notified of 12 publications and a further 3 internal conference presentations. The publications include those which were published in the Cygnet Journal and are listed below;

1. Akintomide,G.,(2024). 7 Cs enhanced observation review protocol. Psychiatry The Northern and Yorkshire Divisional eNewsletter. Summer 2024 (3) Pp 16.
2. Clare.C. and Catterill.K.(2024).Evaluating the Use of Positive Behaviour Support Plans in a High Support Rehabilitation Unit for Adult Males. The Cygnet Journal Oct 2024 (1).
3. Coleman.G.,& Turnbull.L.B.(2024) . Staff perceptions of patient-peer relationships in a female inpatient neuropsychiatric rehabilitation setting. Clinical Psychology forum.June 2024.
4. Crew-Gee.C. and Wolfe.Y. (2024). My Rights Project" A Service Evaluation of Individual Understanding of Legal Rights at Cygnet Brunel. The Cygnet Journal. Oct 2024 (1)
5. De Lange.E.,Gill.M.,Keagan.S.(2024). Psychology Staff Support During the COVID-19 Pandemic. Oct 2024 (1)
6. Hague.L.and Sebley.A. (2024). Support Workers' Experiences of Compassion Fatigue and Coping During COVID-19. The Cygnet Journal. Oct 2024 (1).
7. Hussain.M.,& Keadly.C.(2024) Relaxation to increase engagement in therapy OT news April 2024. Pp 36-37.
8. Saunders.N & Stephenson.Z (13 Feb 2025): Exploring the Lived Experiences of Becoming a Christian: A Study of Formerly Imprisoned Men in the United Kingdom, Journal of Forensic Psychology Research and Practice, DOI: 10.1080/24732850.2025.2465278
9. Saunders.N.& Stephenson.Z.(2025). Reviewing the use of the Brief Religious Coping Scale (Brief RCOPE) across diverse cultures and populations ers1 · Zoe Stephenson1 Accepted: 25 August 2024 / Published online: 6 September 2024 Journal of Religion and Health (2024) 63:3926–3941 <https://doi.org/10.1007/s10943-024-02119-z>
10. Turnbull.L.B.,& Green.E. (2024) the admission nd integration model: first hand experiences of staff admitted to a mental health ward. The British journal of mental helath nursing . pp1-9.
11. Marriott.S.(2024). My Time at Wallace Hospital. The Cygnet Journal. Oct 2024 (1).
12. Turnbull.L.B.(2024).The Use of Eye Movement Desensitisation and Reprocessing (EMDR) Therapy Within Cygnet Services. The Cygnet Journal.Oct 2024(1)

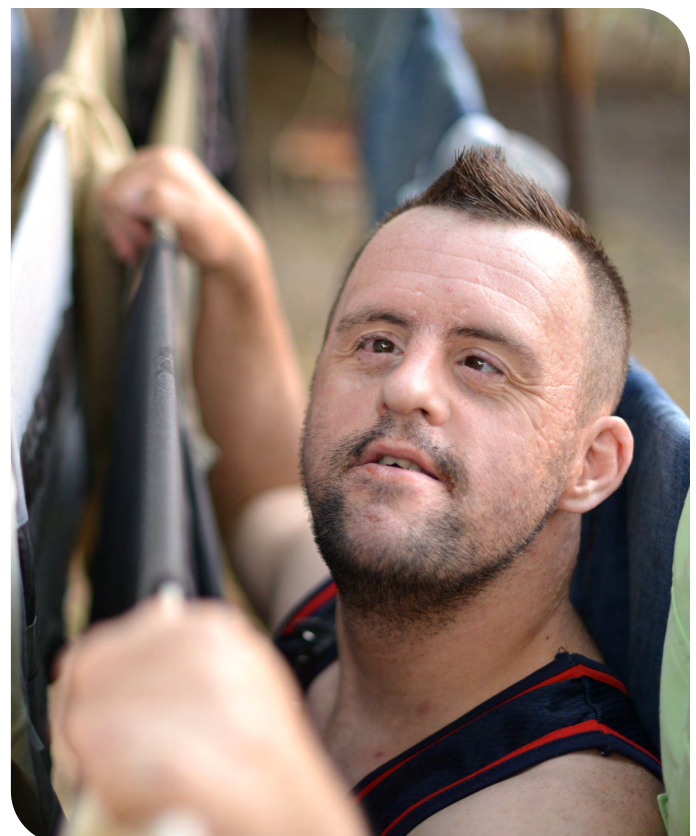
## Conference Presentations 24-25

### Poster Presentations -

Coleman,G.,& Turnbull,L.B. "staff perceptions of patient-peer relationships in a female inpatient neuropsychiatric rehabilitation setting" (poster presentation)at the 10.10.2024 Cygnet "what the F code" neuropsychiatry conference

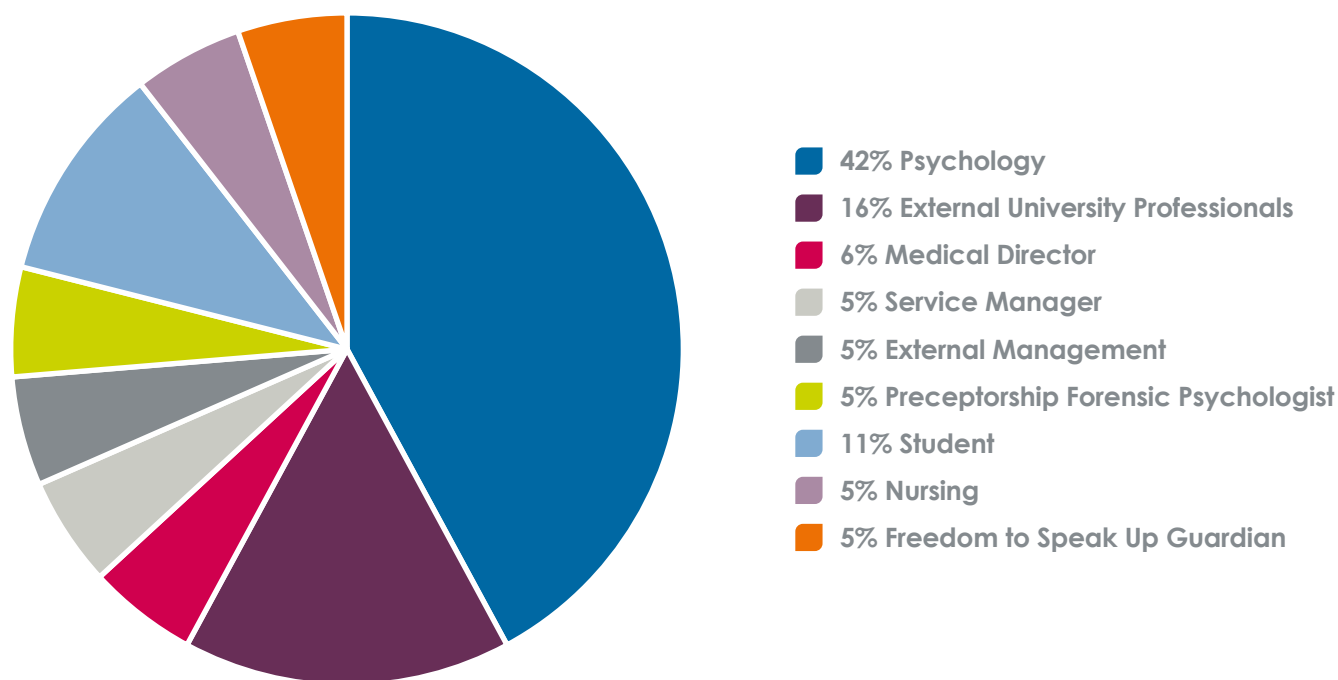
Swanepoel,H.J. et al (2024). Correlation study between the Addenbrooke's Cognitive Examination (ACE-III) and Free Cog within Acquired Brain Injury (ABI) patients. Poster presentation at "what the f word: Cygnet healthcare's neuropsychiatric conference."

Tibbles. J. et al "Mental Capacity Assessments: How Professional Background Influences Approach" at the 10.10.2024 Cygnet "what the F code: Cygnet's neuropsychiatry conference.

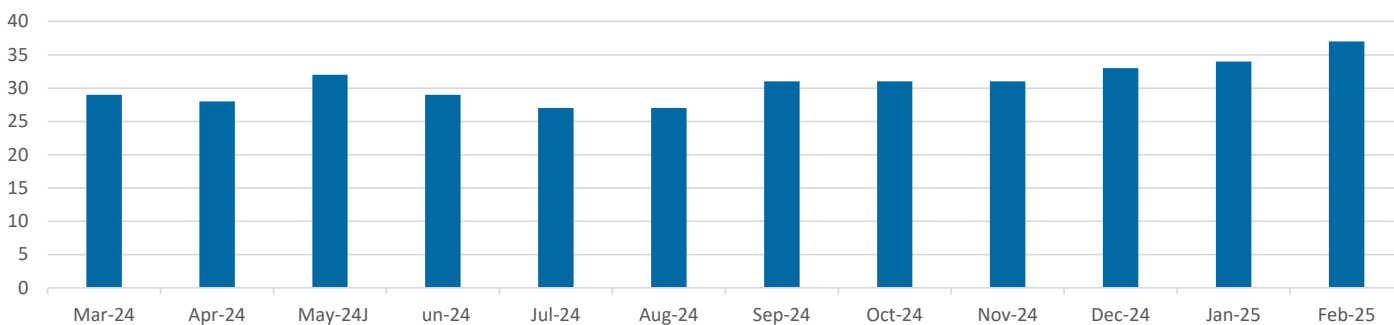




## Number of Proposals by Discipline



## Total Number of Studies Overseen By the R&D Team



## Summary of Activities:

- > **21** New proposals have been received for review over the year (24-25)
- > **12** publications over the year (24-25)
- > **3** internal conference presentations (24-25)
- > The first edition of the Cygnet Journal has been published and the second commenced
- > Over the past year there have been;
  - Links established with universities and a programme of studies that can be offered to university students is being put in place

## 2.8 Mortality Surveillance and Prevention

During 1st April 2024 to 31st March 2025 **45** service users in the care of Cygnet died which is inclusive of expected and unexpected deaths **(22% decrease)**.

The decrease is apparent in the decrease of unexpected and expected deaths in Q1 (down 8), Q2 (down 6) and Q3 (down 5).

There was a 34% reduction in the number of expected deaths overall, with a 27% increase in unexpected deaths from previous year. This increase is evident in Q2 (up 1) and Q4 (up 4).

Quarter 2024 / 2025	Unexpected Deaths	Expected Deaths	Total
Q1	3	9	12
Q2	3	4	7
Q3	3	10	13
Q4	5	8	13
<b>Total</b>	<b>14</b>	<b>31</b>	<b>45</b>



## 2.9 Data Quality

Cygnet embeds Data Protection and Security at the heart of everything we do. Each year, as part of the NHS contracts, we complete the Data Security and Protection Toolkit (DSPT). The submission for 2023/2024 was graded as Standards Exceeded. We are now well into a Digitisation project where all paper records have been collected from across the business and are being scanned. By the end of 2026, Cygnet will be fully digital with their records and will no longer hold paper records.

We comply with all Data Protection and Security legislation as fully as possible. In addition to complying with DSPT, we are also compliant with Cyber Essentials Plus. All policies and guidance are regularly reviewed and updated to ensure we capture any updates or changes to legislation.

Over the next 3 years, we are planning and delivering a Digital Transformation. We will be examining our digital footprint, aligning systems, and improving access and storage of digital equipment and information across both staff and service user domains. Throughout 2024, we started to implement some of these proposed changes to enhance data storage and flow across the organisation.

Our commitment to upholding the highest standards in data protection and security is unwavering. We believe that these efforts will not only streamline our operations but also ensure that we remain at the forefront of digital innovation and compliance.

## 2.10 Governance

### **Our Governance structures are underpinned by the following key principles:**

- > We work collaboratively and openly to provide services that are effective, safe and person centred where risks are managed appropriately
- > Our teams feels able to speak up and share information in a prompt way that allows us to identify risks, agree next steps and assess our performance - Our Freedom to Speak Up Guardian has established a network of Speak up Ambassadors around the organisation to further embed an open culture
- > Our governance framework focuses on providing quality care and positive outcomes for those we look after and support
- > Our service user voice is integral to our governance processes - Our People's Councils Experts by Experience and advocacy provision allow us to hear directly from those we support so that we can listen and act in a way that is relevant to their needs and views
- > We are committed to sharing feedback from our Governance Structures and genuinely want staff to be able to contribute to the processes, from the floor to the Board

Quality and safety are at the forefront of everything we do and we constantly monitor and review our services through our internal Quality Assurance, Safeguarding, Compliance, Quality Improvement, Risk and specialist teams.

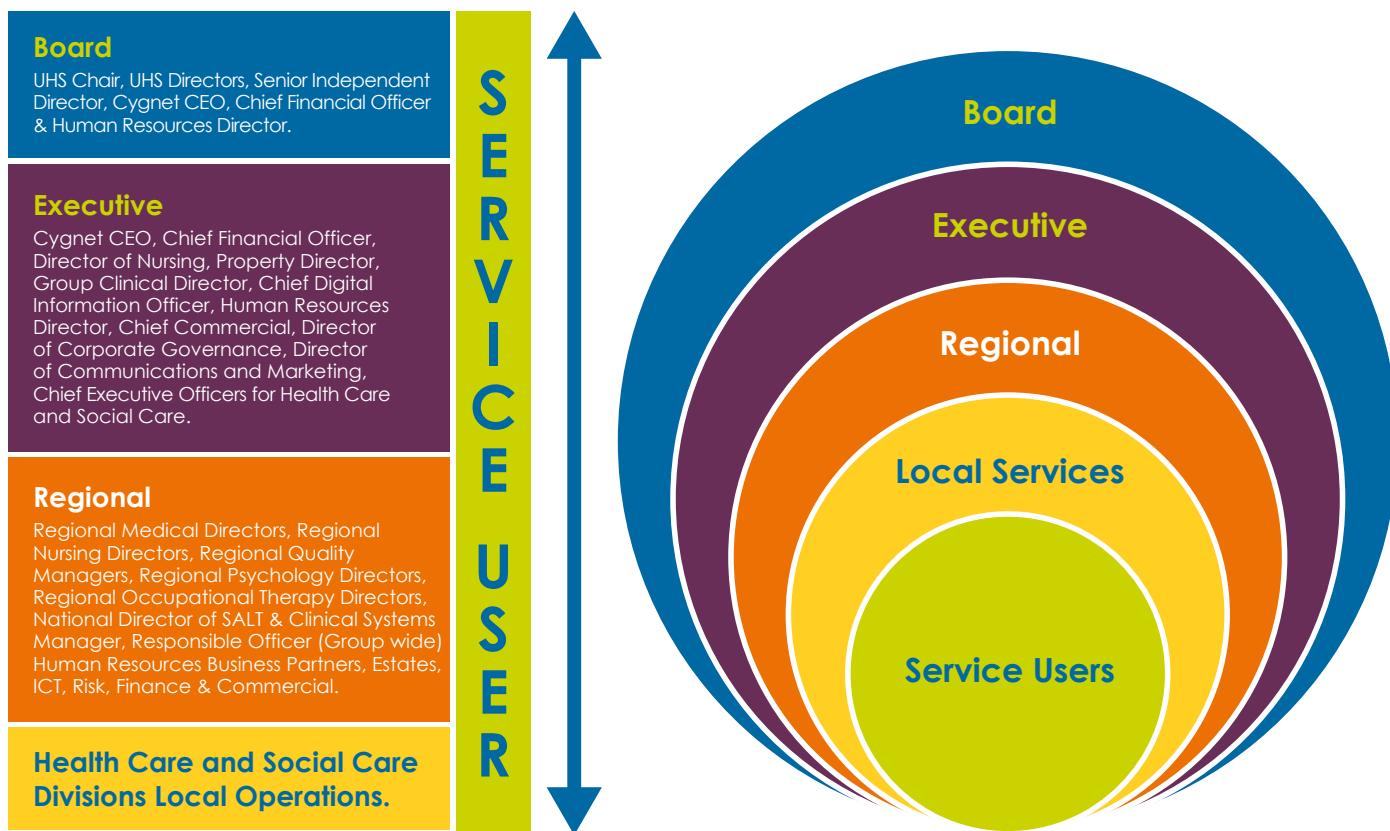
Our processes and systems give us visibility to manage performance, hear feedback and regulate the quality of care provided. We also operate openly and transparently with our external regulators and stakeholders to constantly improve, progress and innovate. This drive for service excellence sets us apart as sector-leaders, attaining high standards that are reflected in our regulatory ratings, accreditations and outcomes for individuals who use our services.

We use data to measure our progress and assess our quality. We listen to service user and staff experiences to inform our practice and constantly strive to achieve the best possible outcomes for those in our care. Our governance framework and the principles that guide us mean our staff have a clear road map to providing the best possible care.

We remain solution-focused and our governance arrangements enable issues to be heard locally, regionally and corporately with a focus on clear communication and a spirit of speaking up and participation.



## Governance Structure





## 2.11 Freedom to Speak Up (FTSU)

At Cygnet, speaking up is viewed as a positive action, and one that is encouraged and supported. It is vitally important that all staff feel able to speak up about any concerns. To ensure this can happen, we appointed our first dedicated Freedom to Speak Up Guardian (FTSUG) in 2020 who established a network of Speak up Ambassadors around the organisation to further embed an open culture. To date the FTSU team now includes a full-time Deputy Freedom to Speak up Guardian and a network of 246 ambassadors.

In addition to the 'Amber Button' on our intranet where our staff can submit concerns anonymously if they wish, via the online form, we have also developed more materials that promote speaking up in the workplace. We have a short information video used during local induction and as a refresher at team gatherings. More recently, our FTSU team developed a Speaking Up Managers Handbook, which has helped further clarify the importance of speaking up within the organisation.

The role of the FTSU Guardian is to help improve staff experience of raising concerns and speaking up, to protect service user safety and quality of care, as well as ensure the promotion of learning and improvement.

Whether it's related to quality of care, or about something affecting service user or staff safety, all concerns are addressed by our FTSU Guardian team.

### The Freedom to Speak Up Guardian:

- > Operates independently, impartially and objectively whilst also working in partnership alongside individuals and groups throughout the organisation
- > Will seek guidance and where appropriate escalate matters to bodies outside of the organisation
- > Have open, honest conversations with leaders in Cygnet to promote change
- > Support staff who speak up and agree next steps with them collaboratively
- > Work closely with freedom to Speak Up Ambassadors at sites, supporting them to influence change
- > Support the right to confidentiality wherever possible whilst also taking concerns forward

### Colleague Engagement and Wellbeing Lead

Caring for others is at the heart of what we do at Cygnet - but looking after our own wellbeing is just as important. We prioritise colleagues' health and wellbeing through a range of engagement and wellbeing initiatives. These include:



**Staff Relations Group (SRG)** – The SRG is recognised as the nominated group of colleagues who formally represent staff views in the management of their service or department. SRGs across Cygnet continue to drive local improvements and positively influence corporate decisions that affect colleagues' working lives.

Each service should have an SRG in place to ensure that every colleague has a voice. To maintain authenticity and independence, SRGs are ideally composed of peers who are not part of the site or service leadership team, so the group can clearly reflect the experiences and perspectives of the wider workforce. SRG Leads receive SRG Masterclass training and ongoing support.



**Trauma Risk Management (TRiM)** – We are committed to supporting staff wellbeing, particularly during difficult times. One way we do this is through TRiM (Trauma Risk Management), a peer-support model designed to assist colleagues who have experienced a traumatic or potentially traumatic incident at work. From March 2024 to January 2025, TRiM support was provided to 104 colleagues.

TRiM practitioners are non-clinical members of Cygnet staff who receive specialist training to help them understand how trauma can impact individuals. They offer early support in the immediate aftermath of an event and continue to provide follow-up support around four weeks later.



**Mental Health First Aiders (MHFA)** – At Cygnet, we recognise that supporting the mental health and wellbeing of our colleagues is just as vital as the care we provide to the people who use our services. That's why we've invested in training Mental Health First Aiders (MHFA) across the organisation. We currently have 157 MHFA-trained colleagues, with more training planned this year.

MHFA training does not prepare people to become therapists, but it does equip them with essential skills to recognise when someone may be in distress, listen non-judgementally, provide reassurance, and respond appropriately. These skills can be vital in preventing crises before they escalate.

The Colleague Engagement and Wellbeing Lead plays a key role in shaping a workplace culture where health and wellbeing are valued. Through a wide range of initiatives, the Lead ensures that colleague's feel heard, supported, and appreciated throughout Cygnet.





## 3.1 Clinical Systems

### Reflections on 2024 / 2025

#### 2024

2024 saw the go live of myPath Apollo (Electronic Care record) at 8 sites across Cygnet. Whilst the 8 sites have now returned to using myPath v1, myPath Apollo proved itself to be a beneficial proof of concept, we learnt many lessons which will inform the myPath 365 project. This includes ensuring we utilise a scalable system to handle increased workloads, users, or data without compromising performance or requiring major modifications, enabling Cygnet to grow and the system to adapt efficiently alongside.

Cygnet's electronic care record transformation project, has been titled "myPath 365". This doesn't refer to a specific product as yet, which could be an "off the shelf" Electronic care record, or something requiring more development.

#### 2025

##### Digital Programme Management Office (PMO)

2025 saw the creation of Cygnet's Digital programme management office (PMO).

The Programme Management Office (PMO) will ensure the smooth delivery of digital solutions that improve efficiency, reduce complexity, and free up colleagues to focus on what matters most - delivering excellent care and service.

The Programme Management Office (PMO) will support with:

- > **Strategic Oversight** – Aligning projects with business priorities to maximise impact
- > **Collaboration** – Bringing teams together to share knowledge and drive innovation
- > **Governance and Structure** – Providing the right frameworks to keep projects on track

##### myPath 365 Analysis Phase

We have embarked on the analysis phase for myPath 365. This involves understanding the different personas and processes within Cygnet. It includes identifying our current pain points (This can be areas of frustration, duplication or ineffective use of resource) and the opportunities we have to improve, enabled by a new clinical system. The end result of the analysis phase will be a blueprint, summarising this learning, which will feed into discussions regarding the next steps.

##### myPath v1 Improvements

Staff will continue to use myPath v1 in the interim,

until myPath 365 is rolled out. We have therefore embarked on an improvement project, to provide some short term benefits to users around safety and usability in this interim period. Feedback on the changes thus far have been positive.

##### ePMA

Our pharmacy provider Speeds will be working with us to rollout an ePMA (electronic prescribing and medication administration system) across Cygnet sites.

Electronic Prescribing and Medicines Administration (ePMA) systems offer numerous benefits, including improved patient safety, reduced medication errors, increased efficiency, and better access to information, ultimately leading to better patient care alongside cost savings.

### Looking forward to 2025 / 2026

##### ePMA Rollout to Pilot Sites

2025 will see our pilot sites commence their ePMA journey. Lessons will be learnt and taken forward to support with the wider implementation across all Cygnet Healthcare sites.

##### myPath 365

Following the analysis phase, both Health and Social Care services will take the next steps in their journey towards new electronic care records.

The procurement process will commence, resulting in preferred providers being identified and the design and build (if appropriate) and rollout of new systems will be planned and supported by the digital PMO.

## 3.3 Co-Production



### Co-Production at Cygnet

Co-Production continued to operate at the heart of the organisation as we began to embed the 2024 – 2027 Co-Production Strategy. The period saw an increase in recruitment of Experts by Experience as we strive to represent all service lines. The role has also broadened through participation in national opportunities such as the Culture of Care programme and studying for Level 3 Peer Support accreditation with ImROC.

### Social Hubs

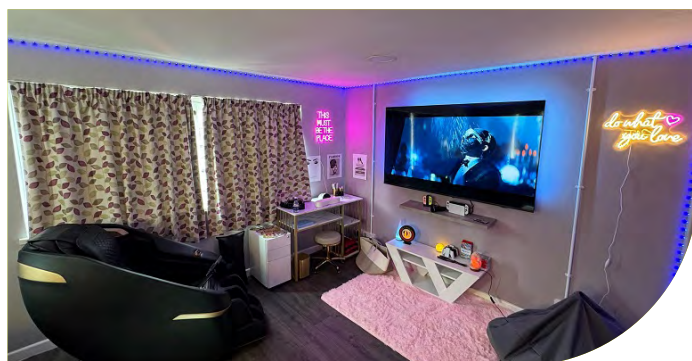
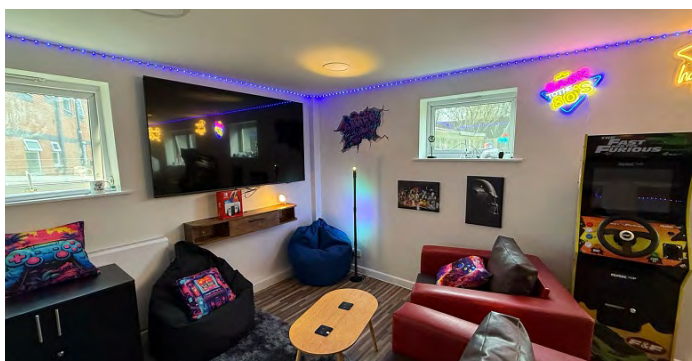
During this period Cygnet co-produced 13 new Social Hubs across health and social care, working collaboratively with Experts by Experience, Service Users and staff, bringing this to a total of over 30 hubs now in Cygnet sites.

Social hubs are more than a nice space but an opportunity to rethink how to facilitate interactions between patients and staff, and how to shift to a more modern way of providing support.

Their aim is to change what enhanced observations historically look like, enhance patient engagement whilst they are hospitalised, and also provide more meaningful activities for people during evenings and weekends. Over a 6 month period, the introduction of social hubs led to a 25 – 35% reduction in incidents across multiple Cygnet sites.

They are proving to be an invaluable resource for service users and staff alike, as noted by the Hospital Manager at Ealing on the opening of their new hub:

"The social hub is a fantastic addition to our hospital and I know it will result in a huge transformation in how patients engage with both one another, and with staff. "It will be a space where service users and staff can connect, engage, and truly feel a sense of community. This new addition will not only improve wellbeing, but will foster stronger relationships and a more positive environment for everyone"





## Experts by Experience

The team has grown significantly during this period and we now have 30 Experts by Experience regularly visiting services across 54 sites, in this period they carried out over 1000 hospital visits. A further 34 Experts by Experience have carried out a wider range of activities, including attending numerous management and governance meetings, co-producing the design and build of new hospitals and services, participating in recruitment interview panels and speaking at conferences about the importance and value of their role. This brings our total to 64 Experts by Experience.

They continue to ensure that the voices and opinions of service users are heard and considered across the organisation and that feedback is actioned to make improvements. Their role is valued by staff and service users alike and are now very much embedded in the day to day operations of the sites they visit.



## People's Council

Over 500 People's Council meetings took place during the period, across all Health and Social Care sites.

The meetings enable staff, service users, residents and family carers to discuss what matters most to them and put plans in place for any new ideas or improvements.

The meetings are a useful space to share feedback and co-produce new ideas, such as increasing the frequency and range of activities available to service users or improving the quality of food. One great example from this period is participation in the Chef Development Days, where as a result of People's council feedback a group of Experts by Experience and Service users joined one of these days to develop healthy 'fakeaway' recipes alongside the chefs which could then be enjoyed in the hospitals.



## 3.4 Service User Experience

At Cygnet, our patients, service users, and carers are at the centre of everything we do. There's no more impactful way to enhance our services than by understanding their unique perspectives, feelings, and experiences at every stage of their care.

We are committed to involving them in all that we do – from shaping the services we provide, to influencing how they are delivered, and guiding our future improvements.

### Patient and Carer Stories at Cygnet

Since 2022, Cygnet has actively invited service users and carers to our Board meetings. This allows them to share their firsthand experiences of our services.

Hearing these stories is crucial; it provides a real-world view of what it's like to be in our care, helping us identify areas for improvement and share best practices across Cygnet. We truly value the insights gained from patients and carers across all our services.

### Board Meetings



### Cygnet Carers Network

Since its launch in November 2021, the Cygnet Carer Network has become a cornerstone of support. We've steadily built our team of Cygnet Carer Ambassadors, starting with two in 2022 and growing to four today, with plans for a fifth in 2025. These Ambassadors are integral to the Cygnet Group, offering invaluable lived experience, insights, and a challenging perspective that shapes our strategic decisions.

The Cygnet Carers Network is dedicated to supporting unpaid carers nationwide through a consistent schedule of events. These gatherings are designed to celebrate carers' vital contributions, provide essential support, and raise awareness of the challenges they navigate daily. Our events offer a crucial space for carers to connect, share their stories, access resources, and gain practical advice, ultimately improving their well-being and ensuring they feel valued and cared for. We also actively encourage joint events with local carers and carer centres, strengthening our community connections.

The Cygnet Carers Network is excited to host its fourth National Carers Event during Carers Week in June 2025.

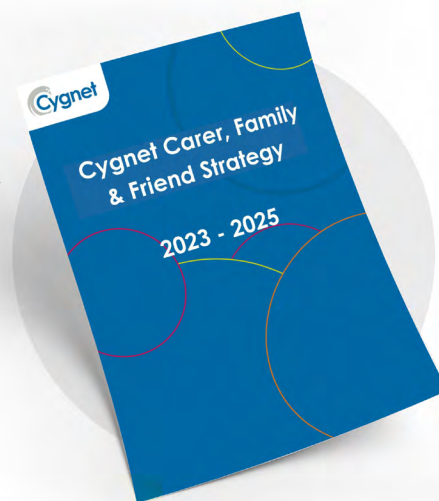




## Cygnnet Carer, Family & Friends

Cygnnet launched its first Carer, Family & Friends Strategy in 2022, followed by the second during Carers Week in 2023. We're now developing the third strategy, with working groups already gathering input on its content.

## Strategy



### Carer, Family and Friends Charter

Cygnnet's purpose is to make a positive difference in the lives of the individuals we care for, their loved ones and all those who work with us. Our pledge is to:



#### Identify Carers

- > Identify you as a carer as early as possible. Keep you **informed, respected and included** by health and social care professionals.
- > Ensure you are **visible** throughout your loved one's journey with us.
- > Support our staff to **identify and engage** with you.



#### Recognise Carers

- > **Embrace** the diversity of carers and **value difference** through inclusion for all.
- > Ensure your essential role and expertise **are recognised, respected and encouraged**.
- > **Encourage** you to **consider your needs**, interests, relationships and any other commitments.



#### Inform & Involve Carers

- > Keep you informed by sharing **relevant** and **meaningful** information.
- > Ask you for your **feedback** on our services.
- > We are going to provide **clear, accurate and understandable** information.



#### Guide & Support Carers

- > Connect you to local and national **support groups**.
- > Recognise the **well-being needs** of carers and the wider family.
- > We will **welcome you** to the **Cygnnet Carers Network** which is Regional and National.

Contact us on: [Family&Friends@cygnnethealth.co.uk](mailto:Family&Friends@cygnnethealth.co.uk)

*Dr Tony Romero*

Dr Tony Romero  
Group CEO, Cygnnet

*David Wilmott*

David Wilmott  
Group Executive Director of  
Nursing, Cygnnet

## Triangle of Care

In August 2022, six Cygnnet Hospitals began their journey to become the first independent hospitals to undertake the Triangle of Care One Star accreditation from the Carers Trust. The Triangle of Care is a national initiative that promotes a partnership between service users, their carers, and health professionals.

Cygnnet successfully became the first independent provider of health and social care to achieve this accreditation in 2023. Currently, 16 Cygnnet hospitals hold this prestigious one-star accreditation, which means the hospitals have successfully demonstrated their commitment to making a difference in the lives of carers. Cygnnet is committed to rolling the accreditation out to all its hospitals.





## Cygnets 16 Triangle of Care Accredited Hospitals



Cygnets Appletree



Cygnets Aspen Clinic



Cygnets Brunel



Cygnets Bury Dunes



Cygnets Bury Forestwood



Cygnets Bury Hudson



Cygnets Churchill



Cygnets Fountains



Cygnets Hospital Beckton



Cygnets Hospital Colchester



Cygnets Hospital Hexham



Cygnets Hospital Maidstone



Cygnets Hospital Sheffield



Cygnets Hospital Stevenage



Cygnets Newham House



Cygnets St Williams



## Young Carers

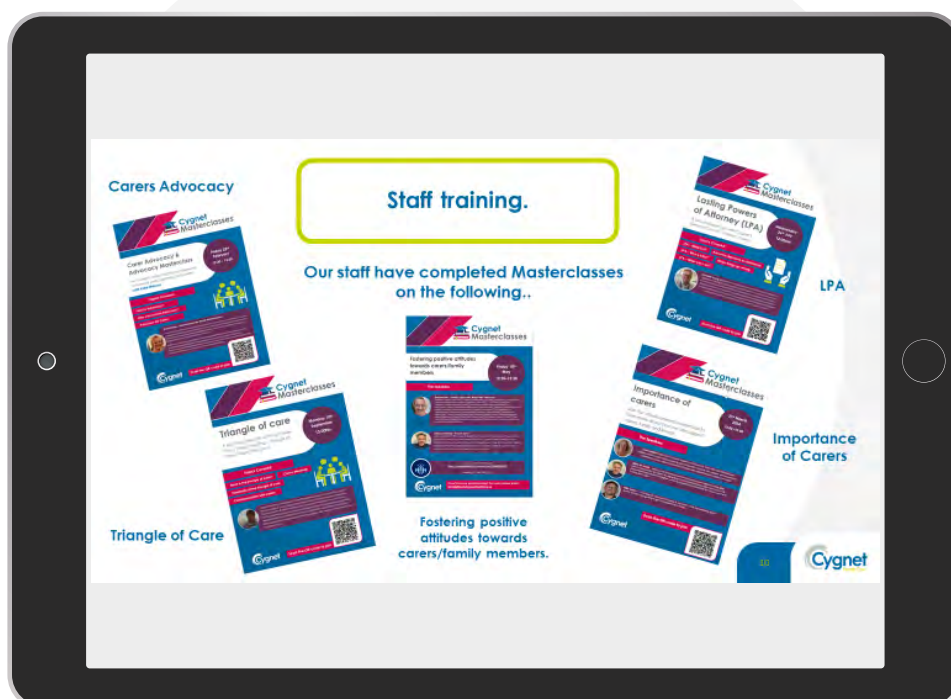
On Young Carers Day, 13<sup>th</sup> March 2024, Cygnet signed The Carers Trust Memorandum of Understanding (MoU) called "No Wrong Doors for Young Carers." Cygnet is committed to improving collaboration between adult and children's social care services, integrated care boards, and other relevant organisations to support young carers and their families.

The MoU aims to ensure a more coordinated and effective system for identifying and supporting young carers, particularly in areas like transitioning to adulthood and realising their statutory rights.



## Masterclasses for Carers

The Cygnet Carers Network has hosted nine master classes during this period. Cygnet is embracing carer experiences by using their insights to continually improve and working in close partnership with everyone to provide the best possible experience and outcomes.

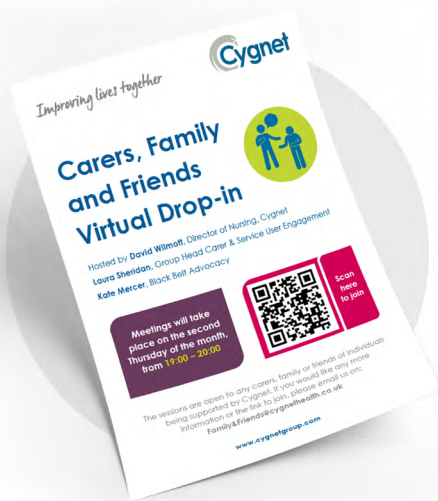


## Lived Experience Advisory Board

Carers have also been in attendance at the Lived Experience Advisory board, chaired by Dr Tony Romero (CEO Cygnet) and David Wilmott (Director of Nursing), since 2023. The meetings discussed Patient and Carer survey results, and give patients and carers the opportunity to ensure Cygnet doesn't miss any significant opportunities to involve people in Cygnet's work and strategic direction. The advisory board ensure the voice of service users, patients and carers are heard, their views are expressed, and their needs are always at the centre of all that Cygnet does.

Carers' Rights Day, 21st November 2024, saw the launch of the Cygnet Advice and Liaison Service (CALS). CALS provides a point of contact for Cygnet relatives, carers, and friends who require non-clinical advice or assistance regarding Cygnet Services. CALS will liaise with the appropriate staff or service to ensure carers' suggestions, feedback, or queries are addressed.

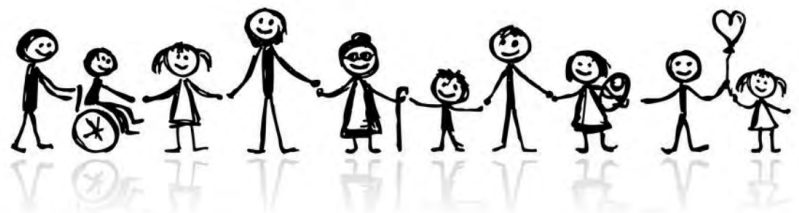
During this period, we have also maintained holding monthly Carer drops in. The drops in so carers, family and friends are able to speak with a member of the senior team here at Cygnet.



## Carer Advocacy

During this period, Cygnet partnered with Black Belt Advocacy to provide a new innovative service to support carers by providing them with access to independent advocates. This is available to any carer with a loved one staying in a Cygnet mental health hospital, specifically those within Cygnet's Health Care division.

Cygnet understands that having a loved one admitted to the hospital can be stressful, and we recognise that it is a difficult time for carers, so we are providing this advocacy support.

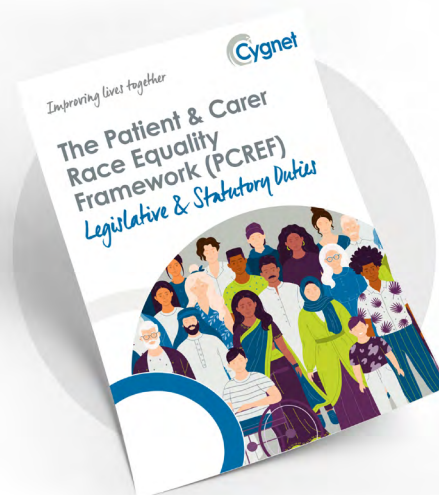


## Carer's Advocacy Service

## Patient and Carer Race Equality Framework (PCREF)

On March 19, 2025, colleagues from Cygnet attended the launch webinar of the Patient and Carer Race Equality Framework (PCREF), the first-ever anti-racism framework for mental health trusts and NHS service providers across England.

The PCREF was one of the key recommendations of the independent review of the Mental Health Act agreed by the government.



## Surveys

Cygnet has continued to utilise the Satisfaction Surveys, which were reviewed and redesigned in December 2021. At the start of January 2022, a survey policy was published for Cygnet staff to provide clear guidance for surveys across the business. In April 2022, the survey questions changed from actual questions to affirmative statements. In October 2022, new surveys for CAMHs, Neuropsychiatric, Supported Living, and Older Persons service lines were co-designed with individuals who use the services, and these were launched in April 2023. In April 2024, further service line surveys were launched for service users, carers, family, and friends. Surveys run from April 2024 – March 2025.

The surveys are not just a means for us to gather feedback; they are a testament to our commitment to continuous improvement. They enable individuals to provide feedback on areas that matter most to them, encouraging responses and offering us a greater opportunity to enhance our services based on this invaluable feedback. In 2025, a working party will be established to review the survey questions in alignment with the Patient and Carer Race Equality Framework (PCREF). Reviewing the survey questions according to the PCREF will help capture the experiences and perspectives of diverse communities. We must ask the right questions to identify and address disparities in access, experience, and outcomes for different racial groups.



1

**1 star** means it is **very bad** or it makes you very **unhappy**



2

**2 stars** means it is **bad** or it makes you **unhappy**



3

**3 stars** means it is **alright** or it **does not really matter to you**



4

**4 stars** means it is **good** or it makes you **happy**



5

**5 stars** means it is **very good** or it makes you **really happy**





## Acute / PICU Hospitals Carer, family and Friends Survey Results Rated out of 5 stars

**Rated 4.4 Stars** "How satisfied are you that you were identified as a relevant person with an important caring role for your friend or family member?"

**Rated 4.4 Stars** "How likely are you to recommend the service to others who need this type of care."

### Highlights from the Carer, Family and Friends Acute / PICU Survey 2024 - 2025

**Rated 4.5 Stars** "How satisfied are you that staff are polite and approachable when you phone or visit?"

**Rated 4.4 Stars** "How was your experience of our service?"



## Inpatient Hospitals Carer, Family and Friend Survey Results Rated out of 5 stars

**Rated 4.6 Stars** "How satisfied are you that staff are polite and approachable when you phone or visit?"

**Rated 4.4 Stars** "How satisfied are you that you know who to contact in order to express concerns about your friend or family member?"

### Highlights from the Carer, Family and Friends Inpatient Hospitals Survey 2024 - 2025

**Rated 4.4 Stars** "How satisfied are you that you were identified as a relevant person with an important caring role for your friend or family member?"

**Rated 4.2 Stars** "How satisfied are you that staff at the service have catered to any specific needs you may have as a carer? These may include cultural, religious or various practical needs."



## Acute / PICU Survey Results Rated out of 5 stars

**Rated 4.5 Stars** "Staff are caring and supportive."

**Rated 4.4 Stars** "Cygnnet has helped me feel better, and that I have improved."

### Highlights from the Acute / PICU Patient Hospital Survey 2024 - 2025

**Rated 4.4 Stars** "I feel enough care is taken of any physical health problems such as diabetes, asthma and heart disease."

**Rated 4.4 Stars** "How was your experience of our service?"



### Inpatient Survey Results Rated out of 5 stars

**Rated 4.2 Stars** "I am satisfied with the accommodation."

**Rated 4.3 Stars** "I am aware of the advocacy service."

#### Highlights from the Inpatient Hospital Survey 2024 - 2025

**Rated 4.3 Stars** "Staff are caring and supportive."

**Rated 4.4 Stars** "(If you have used the advocacy service) | am happy with the support provided."

### Plans for 2025 - 2026

- > Survey feedback will continue to be analysed and used to shape the company's continuous improvement
- > Cygnet will implement the Triangle of Care across all healthcare locations
- > Cygnet will pilot the Triangle of Care accreditation in several social care homes
- > Cygnet will launch the third Carer, Family, and Friend Strategy
- > Cygnet will introduce new Carer Awareness training for staff
- > Cygnet will also implement new Confidentiality training for staff



## 3.5 Educational Facilities

### Cygnets Schools:



All Cygnets CAMHS services have an Ofsted registered, co-located specialist school within the hospital building. These are currently The Phoenix School of Therapeutic Education (Sheffield), The Forestwood School (Bury). The provision of access to education for a school age inpatient is a both a requirement of the NHSE service specification, and a duty imposed by the Mental Health Act. Where young people are admitted to hospital for treatment of mental disorder, it is essential that they are provided with "a routine which allows them to continue their social, personal and educational development...with equal access to educational opportunities as their peers". As registered independent specialist schools, each education provision is assessed and regulated by OFSTED against a national framework used to assess the quality of all schools in England. Currently both Cygnets schools are rated as 'Good' (or better) by OFSTED.

#### All Cygnets Schools have:

- > A head teacher
- > Specialist subject teachers, an exams officer and an education officer
- > A designated safeguarding lead (DSL) and designated teacher for children who looked after by their local authority (CLA)
- > A National Special Educational Needs Coordinator, who works across both schools

All of our schools are able to facilitate external examinations e.g. GCSE / A-level as well as other accredited courses including, but not limited to, functional skills; Arts awards; King's trust; and AQA Unit Awards.

will meet with each young person and complete a welcome and induction process. This involves collecting information about their current study package; areas of interest and career aspirations; discussion of any additional needs; and a tour of the school premises. The Education Officer will then make contact with the home school or college (if a student is enrolled), requesting current academic information through completion of an 'information passport'. Finally, the Education Officer will contact parents to ensure they are aware of our commitment to ensure their child's education will be continued in line with our purposeful vision.

### Our Vision:



**Learning to be  
all that you  
can be**

ways: Cygnets hospital schools and develop current educational pathways and / or promote future re-engagement with education, employment or training. In doing so, we believe that young people leaving our provision will stand the best chance of reintegration with community life and therefore a successful recovery journey.

Explicit pathways for each student will vary according to their personal goals and needs. This might mean mirroring a current educational pathway or choosing from a range of courses offered at our schools (or a combination of both). Qualification type, level, tier etc. will be planned on an individual basis, and with reference to the overarching curriculum intent. Other factors such as predicted length of stay and examination plans may also need to be considered.

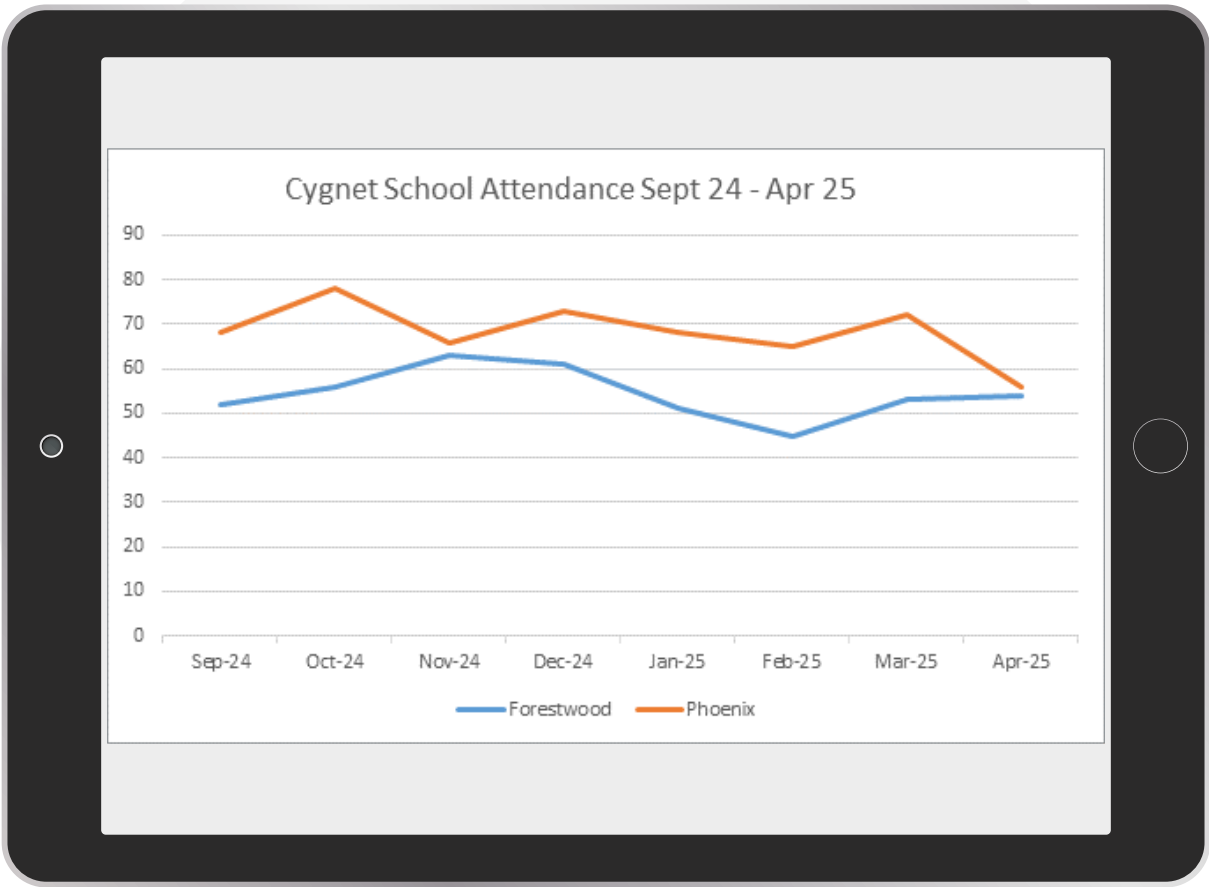
Due to the fluctuating nature of mental health conditions, a flexible curriculum approach is required. During particularly acute periods of presentation it may be appropriate to instead focus on stabilisation and engagement. In this situation, activities will be planned as a vehicle to improve mental health functioning in education (MHFE) with the intention to re-establish readiness for learning.



Progress and Outcomes:

Progress and outcome measures are recorded and tracked through a QNIC sponsored information management system. Staff from Cygnet schools were involved in the development of this system through a working party with other similar schools nationally.

Attendance:



Quality Ratings:

School	Last Inspection:	Next Inspection:	Rating			
			Overall	Quality of Education	Behaviour	Personal Development
Phoenix	June 2024	Before June 2028	Outstanding	Outstanding	Outstanding	Outstanding
Forestwood	March 2025	Before March 2029	Good	Good	Good	Good

## 3.6 Staff Surveys

Cygnet's staff survey ran from 19<sup>th</sup> February to 15<sup>th</sup> April 2024. **76% of employees responded to the survey.**

The overall picture is encouraging, with every single question receiving responses of increased positive sentiment (answers 'agree' and 'strongly agree').

### Engagement and wellbeing

Cygnet's **engagement score** (79%) and **wellbeing score** (77%) were taken positively. While wellbeing remained consistently high, Cygnet's engagement score saw a 3% positive increase.

Cygnet's psychological safety score (83%) and culture score (81%) were considered positive. This is the first year Cygnet have produced scores specifically against these categories and we will use them as a baseline to see if there is any movement in future years as a result on any interventions we make.

Comparison to similar organisations to Cygnet's are based on different questions, but if we were to compare, it would be fair to suggest that Cygnet are achieving good engagement scores.

The key drivers for these scores in Cygnet's overall survey - engagement particularly - were having a positive relationship with the line manager (supportive, motivating, open, honest, treats people with respect, and values their work) and colleagues (mutual respect, team spirit). Key drivers can differ by site / department.

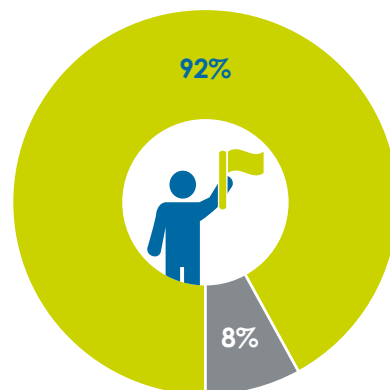
### Role, manager and workplace

Positive sentiment in the areas of my role, my manager, my workplace and our services users all improved from the previous year's survey. The most improved question was related to staffing (up 7%), and my role and **Proud to work for Cygnet** (up 5%).

Focus on increasing permanent staffing over recent years is showing very positive outcomes. In 2024 **there are enough staff to do my job properly** had a 46% positive sentiment, this year there the score is 77% positive sentiment.

### Care of Service Users

Staff perception of how service users are treated at Cygnet remains high and has improved from the previous year's survey - care of service users increased a further 4% up to 90% (in 2022 this was 80%) and **Cygnet acts on concerns raised by service users is one of the strongest scoring questions (92%).**



## 3.7 Staff Experience

We have launched a number of benefits over the year focusing on Health and Wellbeing, daily savings as well as helping employees plan for their future and finding work life balance.



### Napthens

We have launched a discounted conveyancing service for all staff. This is an online service and will cover property completions UK wide.



### Tickets for Good

We are now offering free and discounted tickets for events from the likes of Theatre, comedy, festivals and much more through 'Tickets for Good'. Employees must register with their work email and use <https://cygnethealth.ticketsforgood.co.uk/> to redeem the offers.



### Will Service

We have launched a discounted Will service through "WSL Will Writing". Employees can get up to 34% discount on their will. A single will usually costs £160 but employees can get it for £105 and a mirror will (perfect for couples) costs £140 instead of £215.



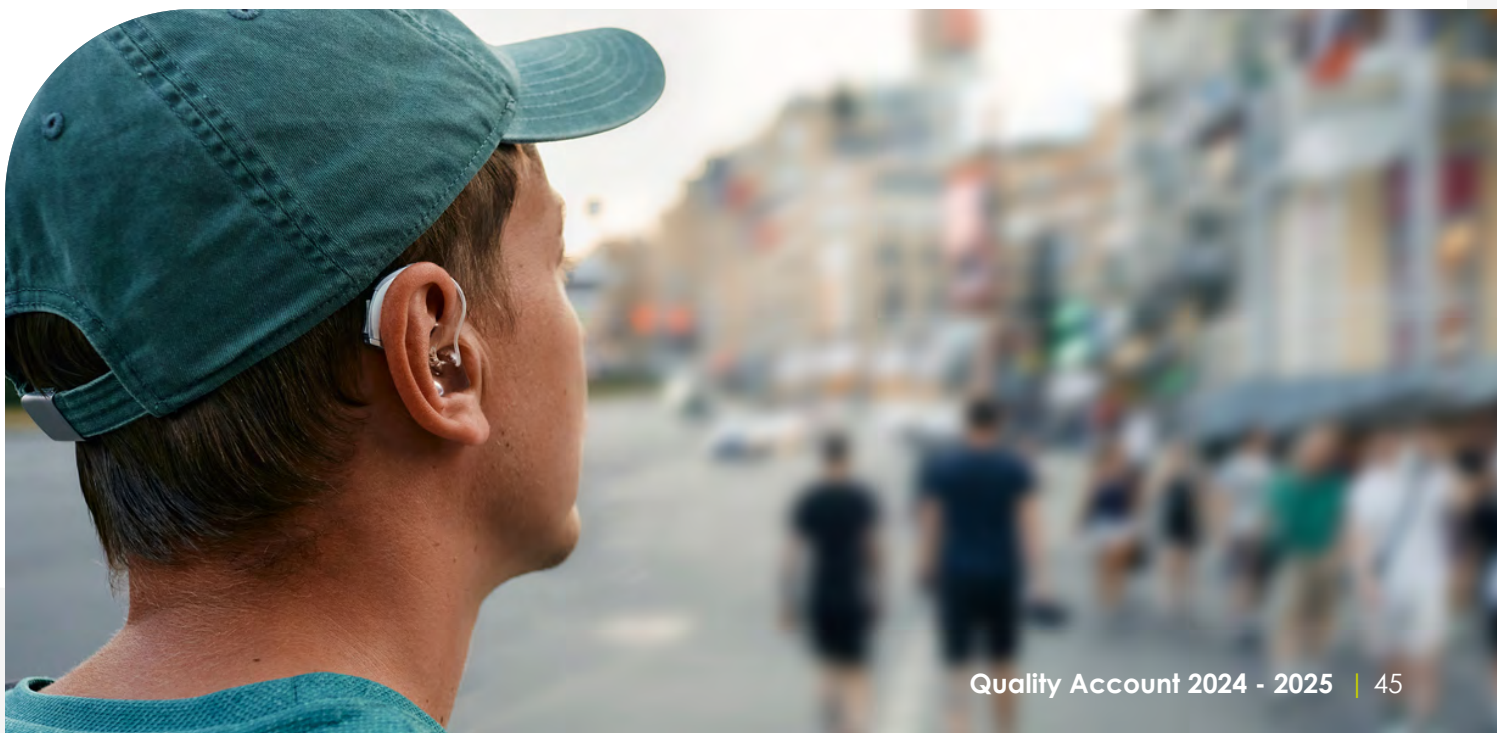
### Pensions

We currently have a number of Pension schemes across the business. We have started the harmonisation project and appointed AON as our new Pension IFA to support salary sacrifice Pension scheme as well as moving towards a harmonised Pension scheme. We expect this to be completed for Year End.



### Connect+

We have launched a new app through Reward Gateway ("Connect+"). The app has all cygnet benefits and can be used as the hub/ one place to go to for the employees.





## 3.8 Revalidation and Appraisals for Doctors

Revalidation for doctors is a requirement of the General Medical Council. It supports doctors to develop their practice, drives improvements in clinical governance and gives patients and service users' confidence that doctors are up to date with practice.

Cygnnet had 277 doctors who had a prescribed connection with Cygnnet as their designated body on 31<sup>st</sup> March 2025.

During the period, 1<sup>st</sup> April 2024 – 31<sup>st</sup> March 2025, 271 doctors (98%) of the doctors completed an appraisal.

There were 6 missed appraisals. There were 5 international doctors who were a new starter within 3 month of appraisal due date and 1 doctor was on maternity leave during the majority of the appraisal due window.

The Annual Organisation Audit (AOA) has not yet been submitted to NHSE for 2024-2025, it is due to be submitted in October 2025.

		Completed Appraisal (1)	Completed Appraisal (1a)	Completed Appraisal (1b)	Approved Incomplete or missed appraisal (2)	Unapproved Incomplete or missed appraisal (3)	Total
2024 to 2025	Consultant	136	94	42	0	0	136
	Staff grade, associate specialist, speciality doctor	135	104	31	6	0	141
	<b>Total</b>	271 (98%)	198 (73%)	73 (27%)	6 (2%)	0	277

### Revalidation

There were 61 recommendations for revalidations made to the GMC between April 2024 and March 2025. 52 of these were positive recommendations. There was 9 deferral request. There was one late recommendation (2 days late).



## 3.9 Regulation and Inspection

The Care Quality Commission (CQC) for England, Healthcare Inspectorate Wales (HIW), Care Inspectorate Wales (CIW), Care Inspectorate (Scotland) (CI) and Healthcare Improvement Scotland (HIS) are the national regulators of health and social care who inspect and regulate our services.

Below are the ratings of all our regulated services across England, Scotland and Wales as at 31st March 2025, though please note that HIW, CIW, CI and HIS do not provide ratings for registered services in the same way as the CQC. HIW and CI do not provide overall ratings for the services they regulate; rather, they provide outcomes for individual assessment domains as detailed below. We have therefore added details below for services registered per regulator.

### CQC

**Total Registered Sites** 124

**Total Rated Sites** 119

The following table is calculated on rated sites

Ratings	Number	Percentage
Total Outstanding	7	5.88%
Total Good	90	75.63%
Total Requires Improvement	22	18.48%
Total Inadequate	0	0
Total Not Yet Inspected	5	NA

NB: The above figures include Morgan House as, although dormant and not operational, is still registered with the CQC.

The above figures do not include the following services as they have either not yet been inspected or registered:

- > Not yet inspected: Cygnet Hospital Oldbury, Cygnet Hospital Wolverhampton, Cygnet Paddocks, Riverview, The Old Vicarage
- > Not registered: 4,5,7,15 Sycamores, Cygnet Hospital Sherwood, Long Eaton Day Service, North West Supported Living, Sheffield Day Services and Vincent Court (Step Down House - Fountains)

### HIW

We have two sites registered with HIW and three site registered with CIW. HIW and CIW do not rate services they inspect.

### HIS

**Total Registered Sites** 1

**Total Rated Sites** 1

HIS do not currently provide overall ratings for the sites they regulate; below are ratings by assessment domain from the latest inspection report:

	HIS - Direction	HIS - Implementation and Delivery	HIS - Results
Service 1	Good	Good	Satisfactory



## CI

Total Registered Sites 4

Total Rated Sites 4

CI will display ratings from their current inspection assessments; previous ratings are not carried forward if not reviewed at the latest inspection. Below are ratings by assessment domain from the latest inspections, where assessed:

Registered Locations	How well do we support people's wellbeing?	How good is our leadership?	How good is our staff team?	How good is our setting?	How well is care and support planned?
Service 1	Good	Good	Not Assessed	Not Assessed	Not Assessed
Service 2	Excellent	Not Assessed	Excellent	Not Assessed	Not Assessed
Service 3	Good	Good	Good	Good	Good
Service 4	Good	Very Good	Not Assessed	Not Assessed	Not Assessed





### 3.10 Positive and Safe Care

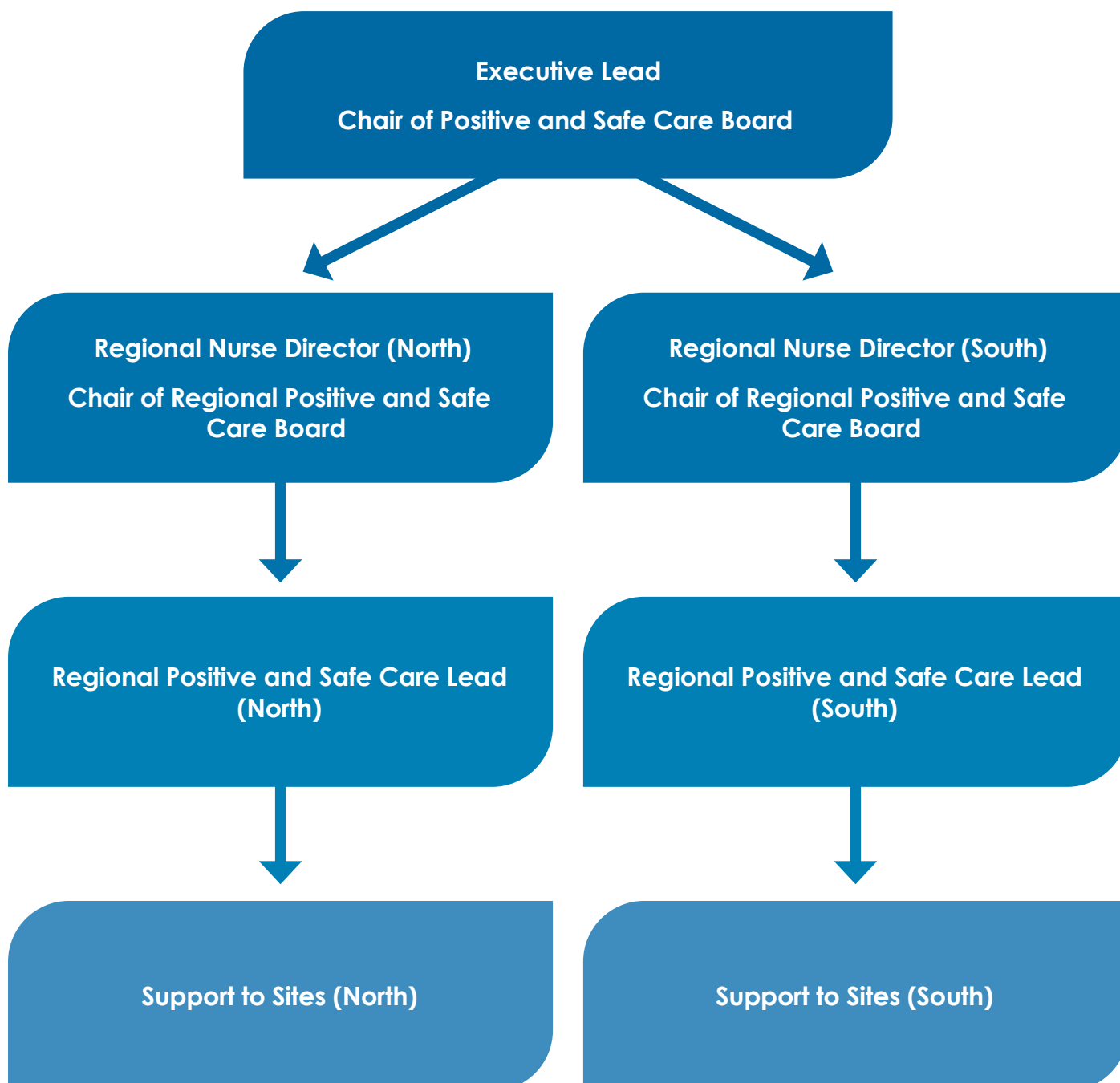
During 2024 / 25 the Positive and Safe Care Board has continued to meet and we have completed our Restraint Reduction Network, Organisational Risk Assessment. This is around 95% compliant against the standards, there is some further work to undertake around having service users as part of the training team, delivering the physical intervention at our sites.

There has been an opportunity this year to look at the structure within the Positive and Safe Care Team structure that supports our divisions. During 2024 the organisation aligned to the operational structure that meant we moved to two geographical areas.

In the re-design of the Positive and Safe Care structure we were able to have one post reporting to each of the Regional Nurse Directors, this ensured joined up working as the Regional Nurse Directors chair the regional Positive and Safe Care groups.

The one area for further development during 2025/26 is the reporting of ethnicity and ensuring all of our service users have a category so that we can report on this more effectively.

The structure given below shows the governance arrangements in place for positive and safe care.



### 3.11 Patient Safety Incident Statistics

Patient Safety Incidents which are no harm incidents	Incident data	82190	94182	14.5% increase
Patient Safety Incidents which are no harm incidents – Group Reporting rate per 1000 occupied bed days	Incident data Bed days data	90.9	98.6 incidents of no harm by 1k bed days	8.5% increase
Percentage of Patient Safety Incidents which are no harm incidents – Group	Incident data	85.2%	79.1%	6.1% decrease



## 3.12 Complaints and Compliments

Cygnets' central Complaints department work with all services organisation wide to support them to achieve the best possible outcomes for people who have cause to raise a concern or complaint. Our focus this year has been on resolving complaints quickly and to the complainant's satisfaction, where possible. We have updated our Complaints Policy to align with this approach.

We have refined the terminology used to describe the stages of our complaints handling process to enhance clarity and consistency. Informal complaints are now referred to as Early Resolution, while Formal complaints will be identified as Investigation.

Additionally, we have established clear timeframes to ensure efficient resolution and appeals:

- > Early Resolution complaints must be addressed within five working days from the date of receipt
- > The timeframe for submitting an appeal has been clarified and must now be made within 28 calendar days

These updates reflect our commitment to a transparent and effective complaints handling process.

We have also updated our external facing website to make it easier to access our Complaints Policy, and to give feedback or compliment us.

### Key facts

We received 1220 formal complaints in the year 1st April 2024 - 31st March 2025 across 85 services.

Of the 1220 formal complaints received:

- > 14% were Upheld (173).
- > 31% were Partially Upheld (379).
- > 98% were resolved at Stage 1 (1194).
- > 2% were resolved at Stage 2 (20).
- > 0.4% were resolved at Stage 3 (5).

We received 2103 compliments from people who use our services and a further 3268 from people who have had other types of contact with Cygnets, for example, visitors, relatives and members of the public from 1st April 2024 - 31st March 2025.





## 3.13 Mandatory Indicators

### Continuous Learning Development

Cygnnet is committed to ensuring regular learning and development opportunities for all our staff, whereby our workforce remain up-to-date with best practice to provide the best care and support. 2024 / 2025 saw an overall increase in compliance for our mandatory training across the group, with over 15,000 more attendees on face-face / live training events compared to 2023 / 2024.

Our blended approach allows us to use teaching, which integrates technology and digital media with traditional instructor-led classroom activities, giving staff more flexibility to customise their learning experiences and develop their knowledge and skills.

Cygnnet Achieve delivered...



### Training & Development Opportunities

- > Over the past 12 months, we have delivered **375** face-to-face level 2 learning disability and autism workshops, training over **3,700** staff
- > We have updated improved our online learning for safeguarding, falls management, observation & engagement, choking and dysphagia (DESCF) and physiological observations (including NEWS 2)
- > From July 2024, we commenced the rollout of Positive Behaviour Support across our Social Care division. To date, **571** staff have completed level 1
- > We commenced **28** new instructors to support the delivery of our physical intervention programmes
- > We continued to update and improve our medication training for both our Health and Social Care divisions for both registered and non-registered staff
- > Supporting the health and wellbeing of our staff remains a high priority. We have increased the number of Mental Health First Aiders trained across the group to **159**

As part of our ongoing commitment to growing our own, we are sponsoring a numbers of groups with their studies:

- > Assistant Psychologists to support them through their Qualification in Forensic Psychology training
- > Bursaries for staff training to become nurses
- > Nurse Medical Prescribers
- > Clinical Neuropsychology
- > Trainee Family Therapist

**Our Leadership and Management Programmes continue to go from strength to strength.**

- > Our Foundations of Management Programme has over **300** staff enrolled
- > We continue to offer leadership and management qualification opportunities up to Level 7. Currently there are **57** staff undertaking qualifications

### Specialist Training

As well as structured development paths, a huge variety of specialist training is available for all professions, whether it's a module about a specific topic relating to their specialism.

Some of the specialist training in 2024 / 2025 included Eye Movement Desensitization & Reprocessing (EMDR), Autism Diagnostic Observation Schedule (ADOS), Autism Diagnostic Interview - Revised (ADI-R), Model of Creative Ability (VdTMoCA), Sensory Modulation, Case Formulation and Goal Setting, Dialectical Behaviour Therapy (DBT) and Schema therapy.

### Masterclasses

Cygnnet's Masterclasses have been an integral part of our blended learning approach, applying

current and emerging innovative technologies whilst attracting a wider range of staff who may have to balance study with other commitments such as having a young family, a caring role, or based remotely. They support the growth of an adaptive, expert and professional workforce that is prepared for the demands of 21st Century patient care.

**Below are some of the classes staff have undertaken:**

- > Compassionate leadership
- > Female Genital Mutilation
- > The Bystander Effect
- > Aphantasia - I can't see images in my mind, can you?
- > Why care about carers? - a manager's perspective on supporting carers
- > Gender Identity in CAMHS services
- > CAMHS - working with trauma
- > Maintaining professional boundaries
- > Personality Disorder - an OT perspective

### Apprenticeships

In 2024 / 25 we expanded the range of apprenticeships and we continue to be in a strong position to spend our apprenticeship levy. Staff

across the organisation continue to undertake apprenticeships at all levels and in a wide range of subjects.

We have expanded our range of training providers, developing new partnerships, to ensure that new apprenticeship standards are offered to meet the specialist needs of our staff. There are 300 staff on our range of programmes with over 80 completing their qualifications in 2024 / 2025.

**New qualifications include:**

- > Social worker
- > Solicitor
- > Regulatory compliance officer
- > Maintenance operative

Our Nursing Pathway Apprentice Programme is helping to address an industry-wide shortage of nurses, as recruitment and retention of staff remains a challenge. In summary, the Cygnet apprenticeship programme is a strategic investment in people, designed to build a skilled, stable, and motivated workforce.

By combining quality training, real-world experience, and progression opportunities, it supports both individual growth and organizational excellence.

For our apprentices, the programme offers a structured, supportive pathway into fulfilling careers within Health and Social Care.



## 3.14 Quality Improvement

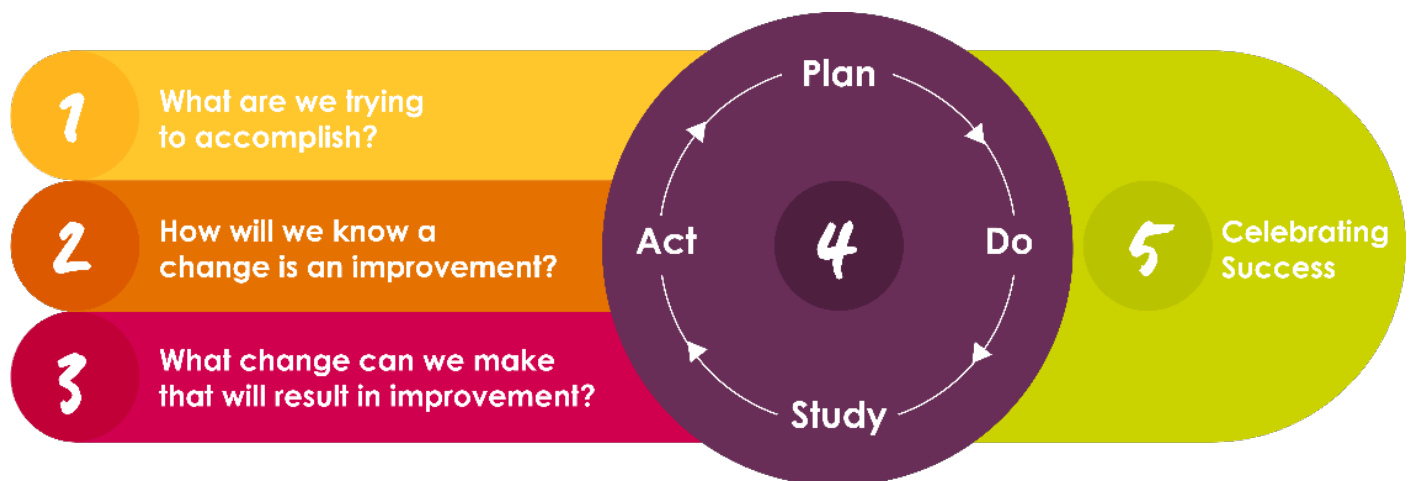
### Our Commitment to Quality Improvement

At Cygnet, Quality Improvement (QI) remains a cornerstone of our commitment to delivering safe, effective and compassionate care. We continue to embed a culture of continuous improvement across our services, empowering staff at all levels to identify opportunities for change, test ideas and share learning to drive better outcomes for our service users.

Our QI approach is rooted in Co-production, robust governance and evidence-based methodology. During 2024 - 2025, we strengthened our infrastructure, expanded our improvement networks, and launched key initiatives aligned with our organisational priorities: improving safety, experiences, outcomes, learning and environments.

### Embedding a Culture of Continuous Improvement

This year, we expanded our Quality Improvement team to increase capacity and support at site, regional and group level. Our revised QI framework now guides projects through five structured phases:



Staff are supported to lead local projects through coaching, training, and participation in monthly improvement huddles, which have become an established part of our governance and innovation culture.





## Achievements in 2024 - 2025

Over the past year, 72 active QI projects were supported across our services, addressing a wide range of priorities including reducing restrictive practices, improving physical health checks, enhancing therapeutic engagement and reducing self-harm incidents.

### Some Notable Examples Include:

- > A project aimed at creating a psychologically informed environment through the development of "The Diamond Framework" resulted in a 72% reduction in self harm incidents, along with an 85% reduction in restraints
- > A project focused on reducing self-harm through structured activity and improved risk formulation, which led to a 26% reduction in incidents on one ward
- > The rollout of a "Positive Handovers" model in several services, which improved staff morale and service user satisfaction with transitions of care
- > A collaborative project to increase the uptake of annual physical health checks, resulting in over 90% compliance across participating services

A full listing of completed projects and outcomes can be found on the Cygnet Group website.

## Measurement and Evaluation

All QI projects are measured using Key Performance Indicators (KPIs) tailored to the aims of each initiative. These include both process and outcome measures to ensure impact is tracked in real time. We also introduced a grading matrix this year to assess the improvement and learning value of each project post-PDSA cycle, supporting decisions about scalability and replication across services. In 2024 - 2025, 85% of completed projects showed measurable improvement in at least one primary outcome.

## Co-Production and Service User Involvement

Service user involvement is a key principle of QI at Cygnet. This year, we enhanced our co-production model, ensuring that service users are represented in QI planning groups, involved in decision-making and supported to lead or contribute to projects. Feedback from those with lived experience has directly influenced improvement efforts, particularly in areas such as reducing restrictive interventions and improving ward environments.

We are also in the process of co-producing a Service User training package for QI in partnership with our service users. This important piece of work will ensure that Service Users are fully supported to participate in the Quality Improvement process.

## Training and Capacity Building

Our QI training programme reached over 100 staff members in 2024–2025, bringing our total of trained QI practitioners to 524 at the end of 2024. This included:

- > Introductory QI training for frontline staff
- > Advanced QI training for project leads and managers
- > Bespoke training workshops delivered across clinical and corporate teams

Training evaluations showed a 92% satisfaction rate, with many participants reporting increased confidence in using improvement tools and leading change.

## Governance and Strategic Alignment

QI projects are governed through our Quality Improvement Steering Group, with alignment to our clinical governance structures and divisional improvement priorities. Quarterly reporting ensures that progress, risks and impact are monitored and escalated where needed.


We also aligned our QI work with the Cygnet Strategic Quality Priorities, ensuring that all projects contribute meaningfully to our broader goals of improving the quality of care and patient experience.

## Looking Ahead: Priorities for 2025 - 2026

**As we look to the year ahead, our focus will be on:**

- > Scaling proven QI interventions across more services
- > Enhancing digital tools for QI project tracking and learning dissemination
- > Continuing to build capability through expanded training and leadership development
- > Deepening service user involvement in the design and delivery of QI

Our aim is to ensure that every Cygnet service has access to the tools, skills and support needed to drive sustainable improvement and that our collective learning shapes the future of care delivery across the organisation.

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