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PART

1

About Us

About Elysium Healthcare

We are an independent sector provider of specialist health and care services which are commissioned by the NHS and Local Government authorities across England and Wales.

Our hospitals and care homes provide a range of services to enable people with complex and often long-term conditions to access the expert care they need. We work as a true partner with our colleagues in the health and social care sector to identify needs and deliver local services to local people through Integrated Care Boards. Our partnership working provides specialist and niche services for both adults and young people. In addition, we provide beds to support the NHS's acute mental health and Psychiatric Intensive Care Unit national capacity.

Elysium is owned by Ramsay Health Care, a global healthcare operator employing more than 89,000 people at sites across Australia, Europe, and the UK.

Ramsay opened their first site in 1964 which was a psychiatric clinic in Sydney, Australia. Their business has since grown to include more than 70 mental health facilities and community services in Australia, France, and Sweden. Elysium provides the specialist care provision in the UK.

The Ramsay Health Care motto "People Caring for People" was developed over 25 years ago and has become synonymous with Ramsay Health Care and the way it operates its business. Ramsay's values are closely aligned with our own and are a critical part of the way we must go about our daily operations to meet the expectations of all our stakeholders.

Our values

Our values were created in partnership with those we support, their families, and our people. We all voted and decided together which values we hold most dear and which ones unite us all. Our values are standards which we will uphold each and every day.

Kindness -

in everything we say and do

Integrity -

being honest and doing the right thing

Teamwork -

working together to deliver great care and outcomes

Excellence -

being outstanding at what we do



Board statement on quality 2024-2025

Our Quality Account for 2024/2025 demonstrates our continued drive and commitment to provide compassionate, safe and evidence-based care. We also continue to further develop our pathway of services so that people can access the right care, at the right time, in the right place.

The quality of the care we deliver is based on the strength and openness of our leadership and the skill and commitment of our people. We are proud of our workforce and remain dedicated to caring for their health and wellbeing and investing in them as individuals, so they stay with us for their entire career.

As we close our Quality Account statement, we would like to express our continued commitment to the delivery of safe, effective, and well-led care. We believe that everyone has the right to be treated with respect and dignity. Compassionate care is central to everything we do.

The Board is satisfied that the data presented here is of a high quality and that it evidences our eighth full year of operation.

Professor Quazi Haque *Chief Medical Officer, Elysium Healthcare*



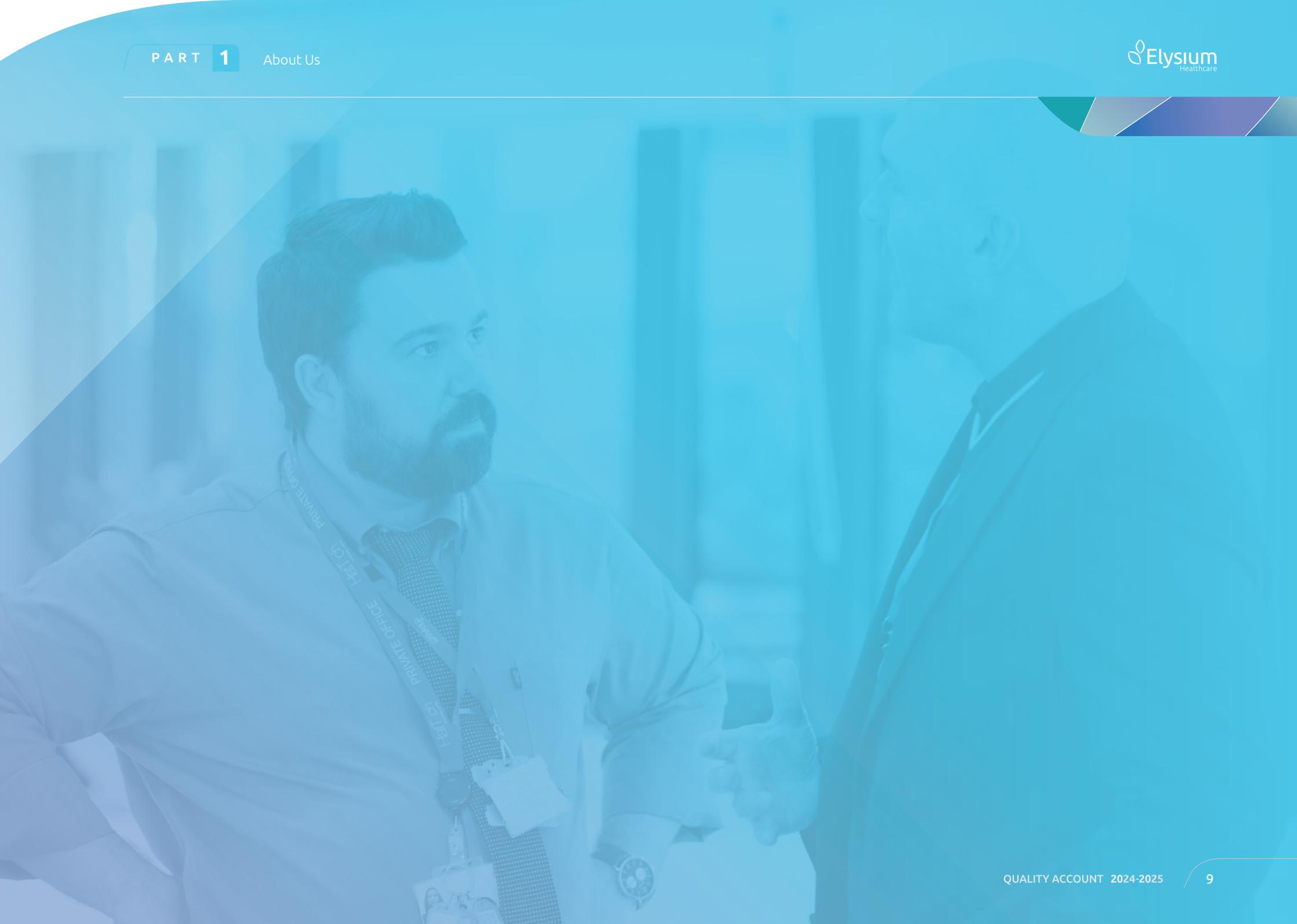
Professor Quazi Haque

*Chief Medical Officer
Elysium Healthcare*



Nick Costa

*Interim Chief Executive Officer
Elysium Healthcare*



Our objectives

Our strategic priorities are laid out in the Elysium Strategy 2023 – 2028 and are supported by corporate and local operational implementation plans. They will be reviewed annually to ensure they are still relevant and a priority.



Best CARE

- 1 To improve service user safety, including:**
 - ▶ Deploying temporary staff safely and effectively
 - ▶ Improving connections between services and the local health system
 - ▶ Effective safeguarding practice
 - ▶ Effective use of safe and supportive observations
 - ▶ Development of PSIRF (Patient Safety Incident Response Framework)
- 2 To ensure that service users have a voice:**
 - ▶ to speak up
 - ▶ to work in partnership across the organisation ensuring decision making and service design take account of the needs and views of the people using services and their families
- 3 To enhance personalisation (individualisation) of care for our service users.**
- 4 To celebrate diversity, to improve inclusion and to ensure equity in all that we do for the people we care for.**
- 5 To collaborate with our stakeholders so that we contribute towards the whole pathway of care providing integrated services which meet the needs of the population.**

Best PEOPLE

- 1 To recruit and retain our people we will provide exceptional induction, training, and development so they can excel in their role, progress, and maximise their potential whilst delivering outstanding care.
- 2 To celebrate diversity, to improve inclusion and to ensure equity in all that we do as we are better together – *We Are Elysium*.
- 3 To ensure that our people have a voice and are confident to speak up.
- 4 To enhance the wellbeing of our people so that they want to stay with us for the long term.
- 5 To ensure that people understand the corporate, regional, and local structures, including their role, the accountability they hold, and the competencies expected of them to deliver the best care.

Best PLACE

- 1 To deliver partnership services in the right place, in community settings, which are aligned with the commissioning intentions of the Integrated Care Boards and the local population needs.
- 2 To improve the personalisation of environments to meet the needs of the people we care for.
- 3 To ensure our environments are well maintained, clean and fit for purpose.
- 4 To future proof facilities so they can flex to meet emerging population needs whilst supporting best practice environmentally.
- 5 To achieve net zero by 2040 in line with our Ramsay Health Care strategy and in line with Greener NHS – Delivering a net zero NHS (sustainability).

Measuring our success

In setting our strategic priorities we have a responsibility to ensure that we act on them and measure our achievements. All implementation plans are reviewed on a quarterly basis by the Board.

Our Divisions

Mental Health and Wellbeing



Our Mental Health and Wellbeing division has a strategic network of hospitals and community houses across England and Wales. Each service is unique with a well-defined clinical service specification giving staff, service users and our partners total clarity on the provision, how we deliver care and how we measure outcomes and improvements. Our service users play a very active role in shaping services which is supported by our group wide Service User Network.

Services

- Acute services for men and women
- Psychiatric intensive care services (PICU) for men and women
- Specialist rehabilitation services for men and women Levels 1 and 2
- Secure services for men and women
- Services for men and women who are Deaf
- Community houses for men and women
- Specialist adult eating disorder services

Our key qualities

- Established co-production
- Pathway choices and models
- Maximising potential for all our service users in the workforce
- Positive risk taking
- Expert clinical teams
- Accessible Board
- RRN/BILD (ACT) Certification status
- Member of the Royal College of Psychiatrists Quality Network
- Member of International Association of Forensic Mental Health Services (IAFMHS)

Learning Disability and Autism



Elysium offers a range of specialist hospitals, complex care services, community, and individual apartments for people with a learning disability or autism and additional complex needs. We are truly passionate about the Transforming Care Agenda and ensuring people have the choice to lead independent, meaningful lives as active members of the community. We have focused our service development and our investment on community-based models of care which grow from a true partnership of working with stakeholders from the earliest point.

Services

- Community based living services
- Single apartment services
- Hospitals transitioning people to the community
- Complex care services

Our key qualities

- Partnership based community living services
- Established co-production
- Maximising potential for all our service users in the workforce
- Positive risk taking
- Expert clinical teams
- Accessible Board
- RRN/BILD (ACT) Certification status
- Strongly established community links
- Using digital innovation to enable service users
- Group wide neurodevelopmental expert forum

1. Clients, patients, residents, and young people are usually collectively referred to as service users throughout to simplify the reading of this report. Each of our services choose the terminology they wish to use along with those in our care.

Children and Education



We continue to develop a wide range of services, across health, education, and care, to support and enable young people who need additional help. Our clinicians are renowned experts in their field and in a time of scarce resources in this speciality we are proud of the teams we have. We strive to give those in our care the right help at the right time in the right place and prevent children and young people from entering retracted adult mental health services. We want those in our care to be healthy, confident, and happy in their community lives.

Services

- Schools
- CYPMHS Tier 4 (GAU, Low Secure, Eating Disorders, Transitional)
- Day patient service (Eating Disorders)

Our key qualities

- Specialist CYPMHS trained workforce
- CYPMHS Consultants and Psychologists
- CYPMHS Quality Nurse Specialists
- Specialist education teams
- Established co-production
- Accessible Board
- Services co-designed by young people

Neurological (Hospitals and Specialist Care Homes)



Elysium provides a broad range of specialised neurological services for men and women across several locations in the UK. We work with adults who have a brain injury or other neurological conditions requiring a multidisciplinary service. We care for people who come to us directly from acute services for active rehabilitation. We also provide continuing healthcare packages of rehabilitation, discharge-to-assess, longer-term care and treatment, behaviour management, respite stays and palliative care. We offer a range of care and rehabilitation pathways designed to meet the individual needs of those accessing our specialised services:

Services

- Neurorehabilitation
- Neurobehavioural rehabilitation
- Neuroprogressive conditions
- Complex Dementias
- Complex Physical Care

Our key qualities

- iCare electronic records to monitor care quality
- Renowned clinical experts in the field
- Nationally recognised services of excellence
- Accessible Board
- Established family integration into services
- Pathways across England

Elysium Healthcare in Wales

Elysium works in partnership with clinicians, commissioners, and regulators in Wales. The regulators for Elysium’s Welsh services are Healthcare Inspectorate Wales (HIW) and Care Inspectorate Wales (CIW).

We have developed adult care pathways which range from acute, medium, and low secure services, locked and open rehabilitation services, 24-hour supervised step-down placements and residential care.

High Secure, Medium secure, Specialist Adult Eating Disorder, CYPMHS Inpatient, Neuropsychiatric and Perinatal Mental Health beds are commissioned by the Joint Commissioning Committee (JCC) and other beds by the seven local health boards in Wales.

Elysium Welsh services are all on the NHS Wales Quality Framework for Mental Health/Learning Disability Services which is organised through the Joint Commissioning Committee (JCC) – NHS Wales and each have obtained three Qs from latest inspections.

Elysium use the electronic patient record software CareNotes, which is fully compatible with the Welsh measure. We have Care and Treatment Plans (CTPs) for each patient and care planning is based on the eight life domains in Wales which differs from the English system of Care Programme Approaches (CPAs) and care plans based on “My Shared Pathway”. Elysium are a member of the Independent Healthcare Provider Network (IHPN) in Wales.

Provider Collaboratives

All our specialised services are partners within their local provider collaborative. Provider collaboratives have enabled our services to provide care as part of the whole NHS system and meet the needs of service users. They offer assurance that the whole system quality of care, the integration of the clinical pathway and access to local services is supported by our partnership colleagues. The collaborative model continued to be a success.

Our collaborative colleagues continue to plan for the changes in local governance and oversight roles, as part of the ongoing NHS England changes, by linking with their integrated commissioning boards. We continue to support the strategic development plans and focus on developing services to meet population need. We remain committed to supporting and strengthening of the collaborative models for all specialised services.

Provider Collaboratives we work with:

South West Secure Provider Collaborative

ForMe – Secure Provider collaborative

IMPACT Provider Collaborative

Prospect Provider Collaborative

Surrey and Borders Partnership NHS Foundation Trust

Lancashire Provider Collaborative

South East KSS Secure Collaborative

South East KS CAMHS Collaborative

South Coast CAMHS Collaborative

West Midlands Adult Eating Disorders Collaborative

West Midlands CAMHS Collaborative

East of England Provider Collaborative

Our locations

1 Lichfield Lane
 13 Alexandra Gardens
 185 Arabella Drive
 187 Nursery Road
 1a Upper Brighton Road
 21b Upper Brighton Road
 39 Castle Road
 78 Park Road
 89 Ewell Road
 Aberbeeg
 Adderley Green
 Aderyn
 All Saints Hospital
 Ann House
 Arbury Court
 Asher House
 Avonfield Neurological Centre
 Badby Park
 Ballington House
 Barnet Lane Clinic
 Beech Grove
 Bere Clinic
 Bradfield House
 Bradley Apartments
 Bradley Complex Care

Braeburn House
 Brighton and Hove Clinic
 Bromley Road
 Brook House
 Castleholme Lodge
 Cefn Carnau
 Chadwick Lodge & Eaglestone View
 Chesterfield House
 Clipstone House
 Cotswold Spa Hospital
 Crossley Place
 Dane House
 Dunnock View
 Ellenbrook House
 Emerald Place Clinic
 Fairmead House
 Farmfield
 Felbrigg House
 Field House
 Gardens and Jacobs
 Gateway Recovery Centre
 Ghyllside
 Greenhill
 Gregory House
 Gresham House

Healthlinc Apartments
 Holkham House
 Hope House
 Hurstfield
 Jubilee House
 Kingswood House
 Lakefields Neurological Centre
 Martham House
 Middlewood Clinic
 Moorlands Neurological Centre
 Ormesby House
 Pinhoe View
 Potters Bar CAMHS Service
 Potters Bar Clinic
 Ranworth House
 Reene House
 Rhodes Wood Hospital
 Rosebank House
 School House
 Spring House
 Spring Wood Lodge
 St Mary's Hospital
 St Neots Neurological Centre
 Stanley House & Bowley Court
 Stockwood House

Sturt House
 Talbot House
 The Aster and Darcy Wards
 The Avalon Centre
 The Bridge
 The Chimneys Clinic
 The Copse
 The Cottage
 The Dean
 The Farndon Unit
 The Limes
 The Spinney
 The Woodmill
 The Woodlands
 Thornford Park
 Three Valleys Hospital
 Tottle Brook House
 Ty Glyn Ebwy
 Ty Grosvenor
 Tydfil House
 Ty Gwyn Hall
 Victoria Gardens
 Walcott House
 Wellesley



New services and developments

Lakefields Neurological Centre

Middlewood Clinic

Dunnock View

Spring Wood Lodge PICU

Barnet Lane Clinic Acute

Acquisitions

Talbot House

Ellenbrook House

Stockwood House

Sustainability

As part of Ramsay Health Care, Elysium shares the global commitment to near-term and long-term targets to achieve net zero emissions across the Ramsay value chain by 2040. Each business in the Ramsay Health Care Group is responsible for implementing our approach and improving our environmental and sustainability performance.

The Group Sustainability Officer and Global Sustainability Committee, including Regional Sustainability Leads, provide support and guidance to the Global Executive and Global Risk Management Committee on our approach and monitoring progress towards our goals. During this reporting period Elysium has:

- Undertaken a baseline of appropriate facilities where solar electricity panels, also known as photovoltaics (PV) panels will make a demonstrable difference and will begin in 2024 and continue throughout 2025. The next stage of design, supply and install will be tendered in Summer 2025 with rollout starting later in the year.
- We continue to work with our facilities staff and external lighting companies to transition all services to be 100% LED.
- Working with a third-party global provider of sustainability ratings and intelligence for businesses. The company provides detailed insights for compliance, improvement, and acceleration on the Elysium sustainability journey to help manage our Environmental, Social and Governance (ESG) impacts. We can measure risk and compliance, meet corporate sustainability goals and drive impact. This helps Elysium guide the sustainability performance improvement and our value chain.

- Ensured suppliers undertake a sustainability assessment to obtain a rating which is an evaluation of how well a company has integrated sustainability and Corporate Social Responsibility (CSR) principles into their organisation. The methodology is built on international sustainability standards, including the Global Reporting Initiative, the United Nations Global Compact and ISO 26000.
- Continuing to develop sustainability minded environmental building standards and in 2025 will open our 7th all-electric care facility.
- We have commenced introducing electric vehicle chargers across several services to support the change to electric vehicles.

Elysium at the vanguard of sustainability education

- We're incredibly proud that a group of colleagues are currently undertaking the *LDN Sustainable Healthcare Academy* Level 4 Corporate Responsibility and Sustainability Practitioner apprenticeship.
- Elysium are one of the first independent healthcare providers in the UK to enrol their team in this apprenticeship course.
- Six people are currently taking part, with more due to enrol in September. Interest has been very high, with many colleagues asking to enrol.



6 Elysium colleagues undertaking an **apprenticeship in sustainability**



Sustainability assessment process implemented for suppliers



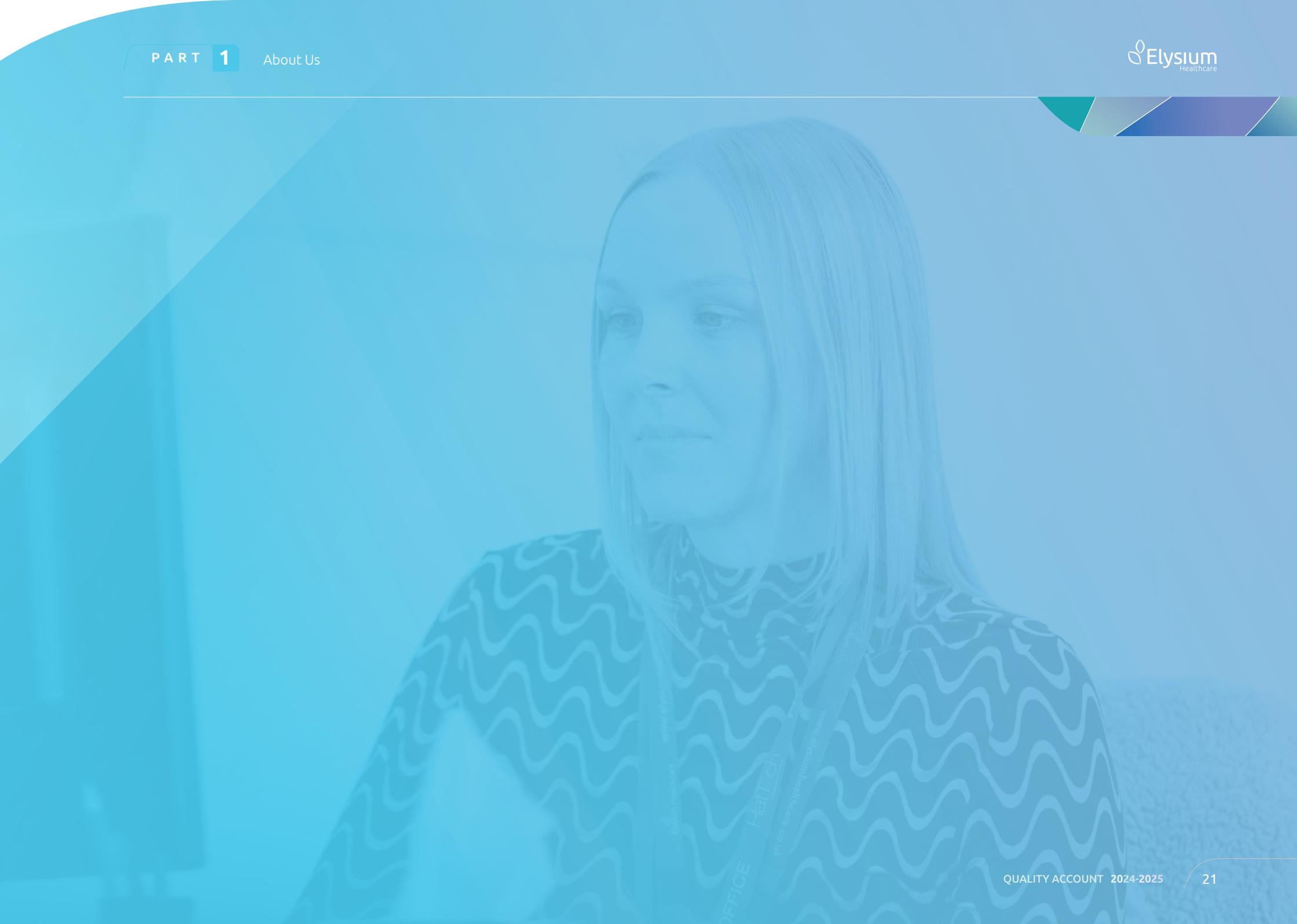
Transitioning all services to be **100% LED**



Programme of fitting **photovoltaics (PV) panels** continues

Statement of assurance from the Board

During the year ending 31 March 2025 Elysium provided services on behalf of the NHS. Elysium has reviewed all the data available to us on the quality of care in all these NHS services. The income generated by the NHS services reviewed in the year ending 31 March 2025 represents 100 per cent of the total income generated from the provision of NHS services by Elysium for the year ending 31 March 2025.



No signal



PART 2

Culture and Workforce

Diversity, Equity and Inclusion (DEI)

Our three-year strategy remains the foundation of our approach to ensure we are providing services that are accessible, inclusive and non-discriminatory through promoting equity and leveraging the skills, experience, and knowledge of our diverse workforce.

We have six Employee Resource Groups (ERGs). These are:

- Beyond Differences: Race and Ethnicity
- United by Pride: LGBTQ+IA
- Hide and Seek: Disability
- Women's Initiative Network (WIN)
- Working Families and Caregivers
- Neurodiversity



Race & Ethnicity



LGBTQ+IA



Disability



Women



Working families and Caregivers



Neurodiversity

The ERGs provide a network for support and as a collective voice, raise awareness and develop initiatives that will lead to greater inclusion for all our staff to positively impact recruitment, retention, development and progression. During this period they have helped develop or had input into policies such as menopause, preventing sexual harassment, flexible working and are regularly sourced for input and feedback.

We achieved level 2 as a Disability Confident employer and embarked on a campaign to collect staff demographic information in order to analyse whether any groups are disproportionately affected by any of our policies or processes. As of March 2025, our declaration rates were between 50% and 79% for most categories and we continue to work towards achieving a minimum of 60% across all categories.

During 2024-2025 we have been working towards implementing the Patient and Carer Race Equality Framework and are striving to be an anti-racist organisation.

In terms of governance, our DEI committee with representation from all our regions and functions meets bi-monthly to track progress against our strategy, share good practice and highlight issues making recommendations that go through our People Committee for approval.

DEI is a standing agenda item at most Operational Governance meetings, we have a quarterly DEI newsletter, DEI sessions at conferences and have piloted inclusive leadership which will be integrated into management training. From an audit of our recruitment and on boarding process to evaluate how inclusive they are, an action plan is being implemented in response to recommendations.



Supporting diversity
equity & inclusion
for everyone



Health & wellbeing of our people 2024-2025

We recognise that the wellbeing of the people who work for Elysium is essential to the delivery of safe, effective, caring, timely, and well-led interventions for those we support. Taking the wellbeing of our employees seriously demonstrates our values of Kindness, Integrity, Teamwork and Excellence (KITE).

Our aim is to create a workforce that will optimise opportunities to improve their own health and wellbeing. We aim to increase connectivity across the organisation to improve staff engagement. We offer staff benefits, competitions, therapies, perks, and other engagement initiatives.





Our **My Wellbeing** initiative is split into five areas that cover different aspects of wellbeing which include workplace, mental, physical, financial and social wellbeing. Within these different areas will be relevant resources and benefits that you will all have access to. We call these the five pillars of wellbeing, within Elysium they will be known as:



Emotional - how am I feeling:

Your mental and emotional wellbeing that enables you to cope with the stresses of life, realise your abilities, learn well, work well, and contribute to our community.



Social - my sense of belonging:

Your feeling of inclusion or acceptance into a group of people. A sense of belonging is linked to your overall wellbeing and positive health.



Physical - how my body feels:

Your ability to maintain a healthy quality of life that allows you to get the most out of your daily activities, without excessive fatigue or physical stress.



Financial - making my money work for me:

Making you feel secure and in control of your finances, both now and in the future.



Workplace - my working life at Elysium:

Healthy workplaces help you to flourish and reach your potential. We want everyone to feel valued, supported and encouraged to develop a lifelong career with us.

As part of a strategy review the Wellbeing offering at Elysium was relaunched in February 2024 as My Wellbeing.

The initiative is split into five areas, each covering different aspects of wellbeing: workplace, mental, physical, financial, and social wellbeing. For each area there are relevant resources and benefits all staff have access to.

All staff have free access to our Employee Assistance Programme (EAP), 24 hours a day, seven days a week, 365 days a year for support with mental health, trauma, critical incident, resilience, legal and financial issues.

As part of our relaunch, we realigned our staff Star Awards with our values, creating the KITE awards. These staff recognition awards, invite members of a staff to nominate a colleague, who is demonstrating our values in their work, to a level that they believe is deserving of recognition.

Each site has a Wellbeing Champion and sites are given a wellbeing budget to spend on initiatives which will benefit their staff team.

Freedom to Speak Up

We want staff to carry out their roles to the best of their ability and ensure that those we care for receive the best possible care. Service user and staff safety, and wellbeing is at the heart of everything we do. It is very important to us that any concerns relating to the safety or wellbeing of staff or service users are raised. There are six different ways people can raise concerns, each offering a different route depending on what is most comfortable for the person raising the concern.

At Elysium staff must speak up by raising a concern with any of the following:

- 1 their **Line Manager**
- 2 their **Registered Manager**
- 3 their **Operational Director**
- 4 the **Elysium Board**
(direct access to the Board by email)
- 5 the nominated company
Freedom to Speak Up Guardian
- 6 our **Staff Concern Line**
which is operated by an independent company

The logo features the words "Speak Up" in a bold, sans-serif font. "Speak" is in teal and "Up" is in dark grey. To the right of the text is a circular graphic composed of several concentric, curved lines in shades of orange, yellow, and red, resembling a stylized sun or a signal.

For Deaf staff a British Sign Language translation service is available for contacting both the Speak Up Guardian and the anonymous Staff Concern line.

Investment in and developing our workforce

Our people are our greatest asset, their training, health, and wellbeing are very important to us. The settings in which our teams work are highly specialist and we have developed our training matrix to support this. We continue to invest in our induction programme to help better prepare new staff for their roles in the care sector.



Preceptorship Programme and Preceptorship Academy

Elysium is committed to the development of newly registered Nurses and supports this with a fully structured and researched Preceptorship Programme, completed within the services of the organisation. In addition to the Preceptorship Programme, Elysium also provide a Preceptorship Academy for all newly qualified Nurses to gain extra support and training over a 12-month period.

Apprenticeships

- **Assistant Practitioner Apprenticeship**

The Assistant Practitioner apprenticeship prepares Healthcare Workers to become Assistant Practitioners and they qualify with a Level 5 Foundation degree (or diploma). The Assistant Practitioner is a highly trained Senior Support Worker who takes on extra responsibility in the care of the service user group and they gain many new skills including those associated with physical health.

- **Nursing Associate Apprenticeship**

The Nursing Associate apprenticeship is a Level 5 Foundation degree, which prepares the trainee to become a Registered Nursing Associate. The Nursing Associate role is registered with the Nursing and Midwifery Council (NMC).

- **Shortened Nursing degree apprenticeship**

This apprenticeship allows those who have completed either the Assistant Practitioner or Nursing Associate apprenticeships to go on and train to become a Registered Nurse, they join the nurse degree in the second year of study.

Preceptorship Nurses through Preceptorship Academy	96
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Apprenticeship figures April 2024 – March 2025

Shortened Nursing Degree Apprentices in training	8
Nursing degree apprentices qualified between 31 st March 2024 & 1 st April 2025	1
Nursing Associate Apprentices in training	8
Nursing Associate Apprentices who completed their training	1
Assistant Practitioner Apprentices in training	11
Assistant Practitioner apprentices who completed their training between 31 st March 2024 & 1 st April 2025	1
Assistant Practitioner Apprentice applications for next cohort	7

Management training is soon to be launched, there are many support materials online with skills-based courses on offer through our learning management system. To support the roles, we have the following apprenticeships available.

Leadership Apprenticeships

Team leader Apprenticeship

The Team Leader is the ideal programme for those in front-line Team Leader roles with operational or project responsibilities. Apprentices will learn the essential management skills needed to successfully fulfil their role as a Team Leader and be able to cope and respond to everyday business challenges with confidence and clarity. Learning phases include self-awareness and management, communication and building relationships.

Operational Manager Apprenticeship

The Operational Manager is for those who have management experience and are in a day-to-day senior management and leadership role. Apprentices will be provided with the tools, knowledge, and

support to master new management and leadership skills so that they are able to flourish in their role. Learning phases include personal development and managing teams.

Senior Leader Apprenticeship

The Senior Leader is for those working at strategic leadership level, Senior Leaders are a key component of all types of business model where there is a workforce lead, manage and Support.

Coaching Professional Apprenticeship

This is a practical, evidence-based course designed for individuals who wish to develop their coaching and mentoring skills to advance performance. It is suitable for current or aspiring coaches who provide one-to-one coaching in a professional environment.

Apprenticeship figures April 2024 – March 2025

Team Leader in training	2
Team Leaders who completed their training between 31 st March 2024 & 1 st April 2025	1
Operational Manager in training	4
Operational Managers who completed their training between 31 st March 2024 & 1 st April 2025	6
Senior Leader in training	3
Senior Leader who completed their training between 31 st March 2024 & 1 st April 2025	5
Coaching professional in training	6

Skills Development Programme (SDP) for Healthcare Workers

The Senior Healthcare Worker (HCSW) Skills Development Programme (SDP) aims to develop reflexivity, sharing of good practice and encouraging the HCSW to develop and improve practice areas within their own sphere. The programme is generic in nature as brings together people from across all service types.

The workshops are not just knowledge based but also about exploring and sharing good practice ideas with each other and then asking the question – how can I take this learning back to site and develop my own practice and that of others?

The idea is to move the cohort of learners through the programme in preparation for the final three months which is the Royal College of Nursing (RCN) Introduction to Leadership Programme (ILP). The RCN ILP asks delegates to consider a practice improvement project and their own leadership and development journey.

Figures April 2024 – March 2025

Completed programme July 2024	14
Commenced Programme Sept 2024	23

Registered Nurse Seminars and Journal Club

Short seminars on topics that may not be routinely delivered. The sessions aim to be interactive and therefore numbers attending are usually kept to a maximum of 25 delegates. Delivered virtually to ensure easy access for all Registered Nurses (RNs) from across the company. The Journal Club aims to offer RNs an opportunity to discuss selected articles with colleagues, reflect on practice and share insights and ideas in a relaxed setting.

Topics and registration figures April 2024 – March 2025



International Nurses

As part of the ongoing recruitment of International Nurses we welcomed 103 in this 12 month period, making a total of 765 since we began this work. We continue with our four-week induction programme at our training centre, Ty Solomon in Welshpool and include the Nurses taking their Objective Structured Clinical Examination (OSCE) in this period. To prepare Nurses to go in to services additional training days have been added which cover subjects such as Mental Health Act (MHA), Mental Capacity Act (MCA), CQC inspections, cultural intelligence training, report writing and professional meeting standards.

In 2024, Elysium were once again awarded the Princess Royal Training Award.



In this accounting period there were 118 nurses who renewed their sponsorship at the end of their three years and 57 who successful obtained indefinite leave to remain after being in the UK for five years.

International Support Workers

Elysium proudly sponsors Healthcare, Recovery and Support Workers based in the UK who require support to work in the health and care sector. Our offering has also expanded to various roles, including Doctors and other Allied Health Professionals. During this reporting period Elysium offered 714 Certificates of Sponsorship to both existing staff and new employees.

This approach has allowed us to continue to attract and retain the talent we need to best support the people in our care. Services have fed back that this project has helped with increasing our workforce, staff retention and diversity.

Graduate Programme

As part of Ramsay Health Care's Graduate Programme, Elysium has been able to offer unique opportunities for graduates to start and build their careers in healthcare. With a long and strong history in clinical graduate programmes, Ramsay has supported many thousands to start and build their careers in healthcare. The 24-month programme is made up of rotational placements that include both corporate and operations.

Elysium have supported five graduates across Operations, Human Resources, Legal and Commercial departments, each with an executive sponsor and buddy to support them on their structured learning programme. After completion of the Graduate Programme most of our graduates stay with us and are supported for continuing growth and development.



Revalidation for Nurses

Introduced by the Nursing and Midwifery Council (NMC) in April 2016, revalidation is the process that all Registered Nurses and Midwives in the UK need to follow to maintain their registration with the NMC. Alongside the regular clinical and managerial supervision provided revalidation helps our Nurses demonstrate their practice is safe and effective. It encourages Nurses to reflect on the role of the NMC Code of Practice (The Code) in their own clinical practice.

All Nurses need to revalidate every three years to maintain their NMC registration in addition to paying an annual registration fee. The documentation for revalidation can be found on the Elysium learning platform and professional support is offered on an individual or service level by Lead Nurses and the Chief Nurse. The HR department run annual checks to ensure all Nurses are up to date with their registration and therefore have an active PIN to allow them to practice.

Revalidation for Doctors

Revalidation for Doctors is a requirement of the General Medical Council (GMC). It supports Doctors to develop their practice, drives improvements in clinical governance and gives service users confidence Doctors are up to date with practice. The following measures are in place to support this process:

- Implementation of national policy and reporting requirements
- Adherence to the annual appraisal system
- Nominated Responsible Person
- Oversight of Clinical Governance
- Completion of revalidation recommendation submissions
- A culture of support for Doctors with their personal development and appraisal needs

"My son was a patient for two weeks and I just wanted to thank you all for everything you have done to help him on his journey through this difficult time. He has a long way to go, but it wasn't until he was in your care that he realised he did need help. He is happy to be home and gradually trying to get back to normal. Thank you again."

*Mother of service user, August 2023 -
Farmfield Hospital*



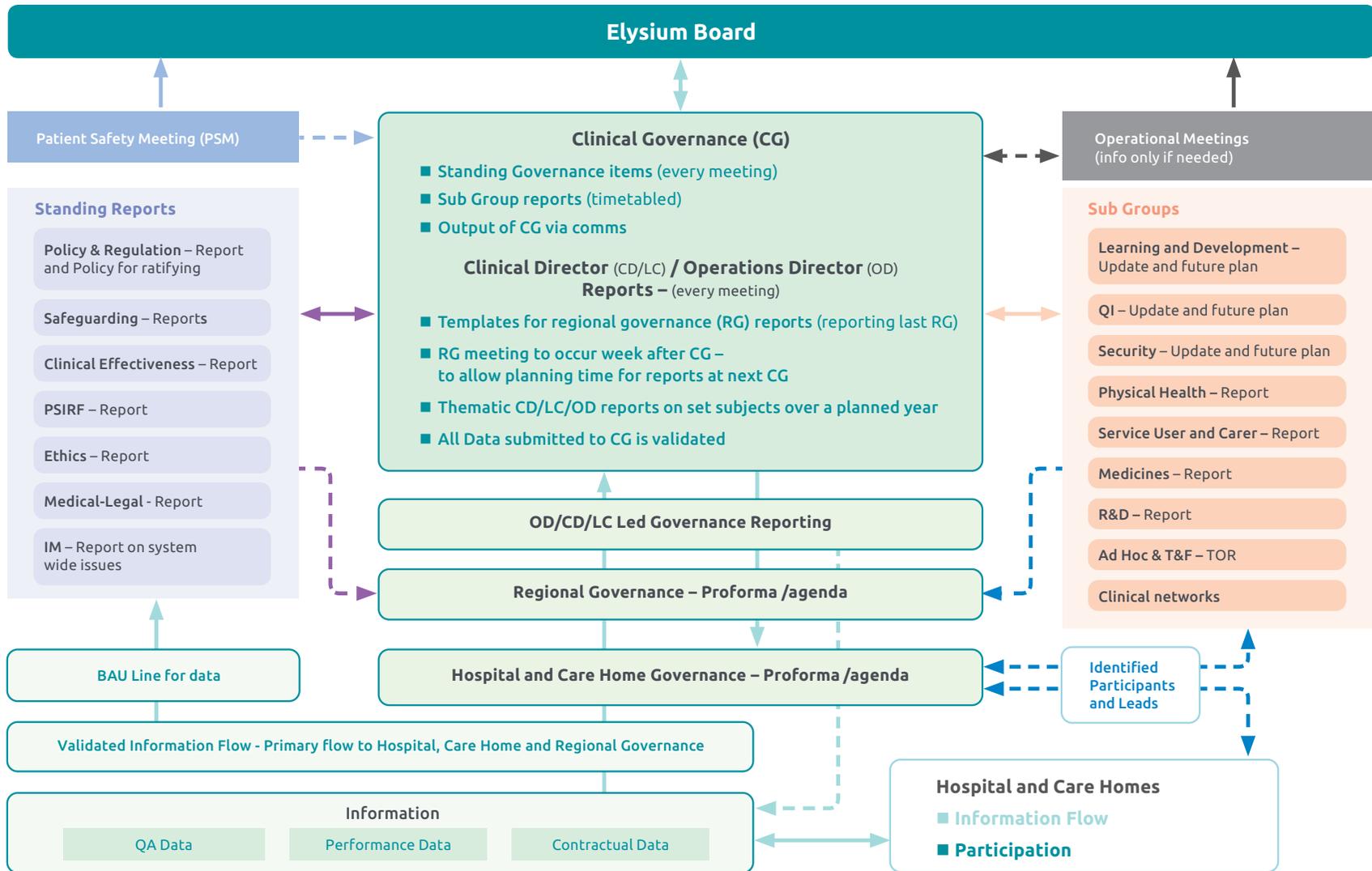


PART 3

Quality

Our Quality Framework

The Elysium Quality Governance Framework enables us to deliver transparent, effective, and responsive care and clarity of reporting throughout our services. The Corporate Clinical Governance and Corporate Management Committees meet monthly and are chaired by Dr Quazi Haque, Chief Medical Officer and Paul McPartlan, Chief Operating Officer respectively. The meetings are attended by the Operations and Regional Directors and the operational and clinical leads of all our service. At the meetings, monthly quality reporting information from each site or service is reviewed.



Governance

Elysium's Clinical Governance (CG) is supported by accurate, effective, and timely communications which enables ward to Board reporting. This allows us to focus on achieving good clinical care and is an essential part of a well-led organisation.

CG ensures that Clinical Directors (CDs), clinical leaders, Lead Clinicians (LCs) and Operation Directors (ODs) lead regional governance feedback from agreed proforma, sharing planning and local and regional actions. The Corporate Clinical Governance Meeting (CCG) also receives reports from standing subgroups, and key safety and compliance performance reports that are part of the core CCG function to ensure oversight and effectiveness of quality and safety assurance as part of the overarching clinical governance function.

Quality Governance combines evidence-based care, professionalism, effective compliance, and assurance to ensure that service users receive high quality care. This is achieved in partnership with service users, their friends and family, regulators, commissioners, and experts by experience.

Everybody has a part to play in quality governance. Our Quality Governance Guide for staff clearly outlines our expectations from staff and from the company in supporting staff.



Ways in which we monitor our services:

- Audits
- Policy and procedure
- Proven clinical treatments
- Incident management process including reporting and investigating patient safety events oversight through the Patient Safety Meeting
- Safeguarding reports
- Executive team visits to sites
- Attendance at community meetings by executives
- Service to Board/Board to service reports
- Internal and external inspections
- Risk registers
- Complaints and whistleblowing
- Listening and responding to feedback
- Continuous learning and development
- Ward quality monitoring by staff and service users
- Staff appraisals
- Staff forums
- Service User Network forums
- Service user/staff community meetings
- Patient Experience Lead visits
- Expert by Experience visits

Clinical Governance Subgroups

Quality across Elysium relies on the expertise across our workforce, working in partnership with our services users and their families. We have the following sub-groups in place with multidisciplinary representation across our portfolio:

- Physical Healthcare and Wellbeing Committee
- Policy and Procedure Committee
- Quality Improvement (QI) Committee
- Reducing Restrictive Interventions Group
- Research Network
- Security Group
- Clinical Ethics Committee
- Health and Safety Committee
- Infection Prevention Control Group
- Mortality Surveillance and Prevention Group
- Neurodevelopment Group
- Clinical Networks

Review of performance

Our objective is to provide the best care, delivered by the best people in the best place. We will achieve this through the implementation of our strategic priorities which have been developed with input from our people, those we care for, their families and carers, Experts by Experience, and many of our partners.

We have considered key learnings from a number of recent events which include:



Recommendations from the Independent Review of Greater Manchester Mental Health NHS Foundation Trust (Shanley Report) into the care offered at GMMH NHS Trust and the Edenfield Centre, ensuring all our services users are well cared for and safe



Patient Safety Incident Response Framework (PSIRF) to continue to embed and ensure patient safety is core to our clinical governance processes, practice, and service provision



Ensuring effective Infection Prevention and Control to keep people safe from infection including accessing national vaccination programmes

Our priorities are completely aligned throughout the organisation, with every site and support function championing their development. This is underpinned by an overarching corporate implementation plan.

Mortality surveillance and prevention

During 2024, 101 service users in the care of Elysium died which is inclusive of expected and unexpected deaths. The majority of deaths at Elysium, 75 in 2024, arise at our neurological sites which provide specialist care for patients who have complex neurological conditions including acquired brain injury, spinal injury as well as neuro-progressive conditions.

In Quartile 1 of **2024** (1st January to 31st March 2024), there were 23 deaths, 17 were neuro deaths and 6 were non-neuro deaths. 19 deaths were expected, and 4 were unexpected.

In Quartile 1 of **2025**, there were 22 deaths, 19 were neuro deaths and 3 were non-neuro deaths. 16 deaths were expected, and 6 were unexpected.

Elysium implemented the PSIRF system on 11 September 2023. Elysium's *Incidents and Patient Safety Events (PSIRF)* policy highlights to staff that all deaths should be reported through the Elysium Incident Reporting and Investigation System (IRIS) and a P1. PSIRF Escalation Form should be completed. All deaths are reviewed by the weekly Patient Safety Meeting.

An investigation is undertaken for all unexpected deaths and also for those expected deaths where care concerns have been identified by the service during the service user's end of life pathway. Where a completed investigation has indicated care delivery concerns and areas for learning, an action plan will be implemented.

Elysium's Mortality Surveillance and Prevention Group, chaired by the Chief Medical Officer, ensures that there is a robust approach towards the investigation of all deaths. This group also identifies trends and ensures that learning is shared across the organisation.

Patient safety incident statistics and PSIRF

Elysium has an inhouse Incident Recording and Informatic System (IRIS) which feeds through directly into the electronic patient record system and into live dashboards giving real time information into incidents which is invaluable for clinical teams. In September 2023 Elysium introduced The Patient Safety Incident Response Framework (PSIRF) a national initiative which all providers are required to implement, this replaced the Serious Incident Framework (SIF).

During this reporting period Elysium have continued to acquire and develop new services across all four of Elysium's divisions. We focus and promote a culture of 'openness and transparency' and actively encourage staff to report all incidents through IRIS.

Our overall results for the Quality Account detail service user incidents for the entire group and should not be looked at in isolation due to the nature of the services.

Total service user incidents for the Group per 1000 days	118.4
Patient safety incidents per 1000 days	35.3

Extract from incident reporting

Service user incidents within Elysium are reported based on the level of harm ranging from **level 1** – no harm, through to **level 5** – severe harm. It is expected and evidenced that the majority of incidents are either no, or low harm as illustrated by the table below which shows that 95.21% of incidents reported are low harm or lower.

Unit	Per 1000 bed days	%
Level 1 - No harm	79.7	67.30%
Level 2 - Low harm	33.0	27.91%
Level 3 - Moderate harm	4.7	3.98%
Level 4 - High harm	0.8	0.70%
Level 5 - Severe harm	0.1	0.12%

Violence and aggression represents the highest number of reported service user incidents representing 35.5% of all service user related incidents, followed by self-harm with 26%, combined, these account for 61.6% of all service user incidents recorded.

PSIRF

Patient Safety Incident Response Framework (PSIRF)

PSIRF is an NHS England national initiative which all providers are required under the NHS standard contract to implement, and in September 2023 Elysium went live. We have implemented PSIRF as our primary patient safety response system in all services provided. 2024/25 was Elysium's first full year of using PSIRF as our patient safety incident response system.

As part of our commitment to good practice we have shared our tools and policies which we have developed with colleagues at other independent sector providers. By sharing our learning and development we have helped support them in developing their own PSIRF approach.

We have run multiple learning and stakeholder events for our NHS commissioning colleagues and have also shared audit and developmental processes as we have embedded PSIRF into our practice. With the introduction of PSIRF we have a more detailed view of all incidents rated level 3 or above and can report all specific patient safety events that fall within our reporting process to our weekly Patient Safety Meeting. We can identify learning and system issues more robustly and this has enabled us to develop our learning responses to themes as they emerge.

Data quality

Elysium have continued their ongoing successful monthly submission of the Mental Health Services Data Set (MHSDS). Throughout this reporting period Elysium have focussed on the protected characteristics dataset within the MHSDS, focusing not only on improving the completeness of the data but also the quality of the data being submitted. During this time there has been further progress in submission completeness.

Data security and protection toolkit

Elysium Healthcare has successfully submitted all mandatory evidence for assessment and was graded as "approaching standard" for the 2023/24 Data Security and Protection Toolkit (DSPT). Elysium is proactively addressing the identified gaps to ensure mandatory standards are met for the 2024/25 DSPT submission. Elysium is well-positioned to achieve and maintain the highest standards of data security and protection.

Clinical specifications

We continue to challenge ourselves to develop models of care which are co-produced, recovery-oriented, and evidence-based which place the people we support at the centre of all that we do.

Clinicians from all professional backgrounds have worked together with Experts by Experience to produce models of care and service specifications for each of our service directorates.

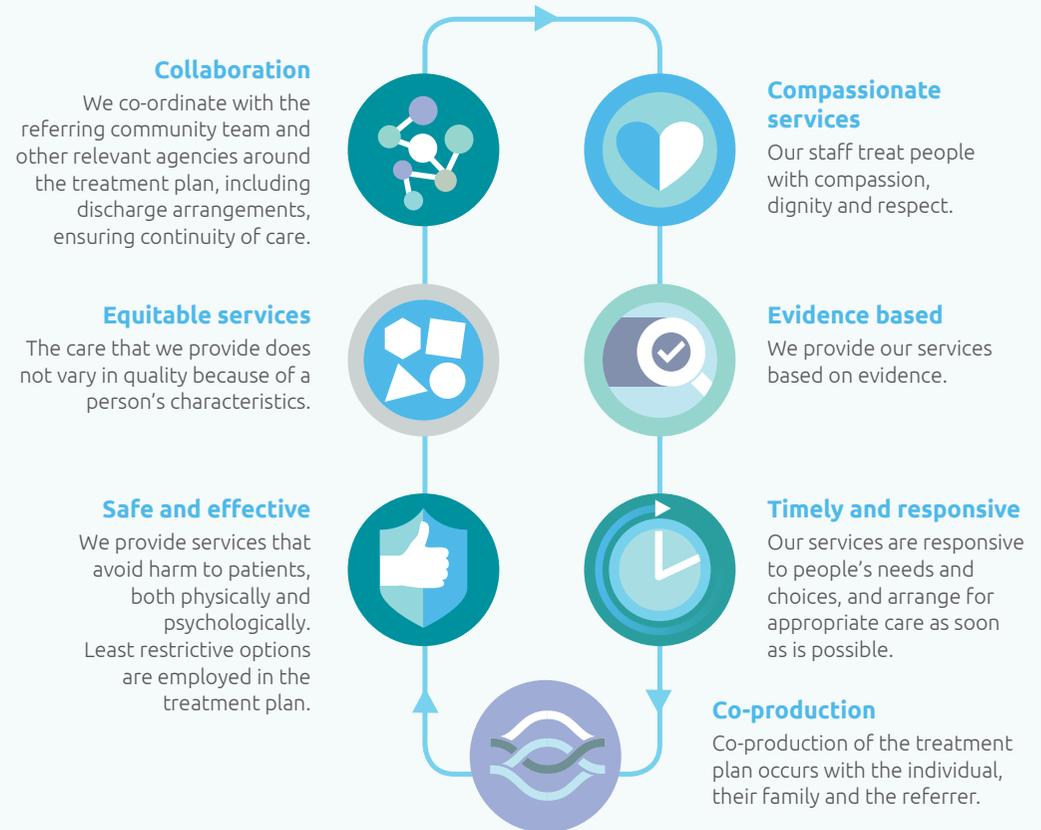
These documents set out principles of treatment, specific treatment protocols, clearly defined purpose of admission, identified risk management protocols and tools, evidence-based best practice according to research and clinical diagnostic tools and practices. Elysium use a range of tools to measure and monitor services and treatment. These tools also evidence our outcomes.

Our shared goal is to make our services, centres of excellence that are trauma-informed, humane, culturally responsive, collaborative, and effective in addressing mental health, learning disabilities and autism and complex social care needs. We are committed to ensuring our services celebrate diversity, remove inequitable care and the models of care we use are regularly re-evaluated in partnership with all stakeholders, especially those with lived experience.

We endeavour to improve knowledge and awareness of learning disabilities and autism and make necessary adaptations to care and risk management to optimise the safety and day-to-day functioning of these individuals and to promote equitable access to high quality health and care services that meet their needs.

Our Guiding Principles

Our model of care is guided by the following principles in striving to achieve these standards:



In addition to the tools used to measure individual progress and monitor the quality of our services and outcomes, we fully engage with external professionals, community services, families, carers, and services users. This is through informal engagement, developing a collaborative and holistic approach to care and through the formal infrastructure of Care Programme Approach (CPA) in England and Care Treatment Planning (CTP) in Wales as well as Care (Education) and Treatment Reviews (CETRs).

Elysium continually monitors and reviews key areas of service provision for opportunities for learning and improvement, at service, regional and corporate level. This includes monitoring activity such as length of stay, responsiveness to referrals, monitoring and reducing the use of restrictive interventions and robust review of all incidents in line with Patient Safety Incident Response Framework (PSIRF) arrangements.

Across all services a programme is in place to improve physical health outcomes by reducing rates of obesity and diabetes, improving fitness and health screening and access to primary healthcare services. There is a corporate physical healthcare group to promote best

practice and monitor outcomes, informed by National Institute for Health and Care Excellence (NICE) guidance. We review and agree quality activities in consultation with our NHS-led provider collaboratives.

We support and observe the STOMP principles (stopping over medication of people with a learning disability, autism, or both, with psychotropic medicines). We ensure our medical and nursing staff keep up to date with professional competencies through annual Basic Life Support (BLS) or Immediate Life Support (ILS) training and regular emergency medical simulations. All services use National Early Warning Score (NEWS2) parameters to monitor health.

Elysium is committed to suicide prevention and our suicide prevention strategy is underpinned by national policies and frameworks and guided by the organisation's suicide prevention group. Our objectives are aligned to the National Suicide Prevention Strategy for England (NSPS).

Our models of care support a positive and therapeutic culture across the whole organisation.

Following the publication of the commissioner guidance for adult mental health rehabilitation inpatient services by NHS England in January 2024, we have undertaken a comprehensive review of our mental health rehabilitation services. Working collaboratively with clinical teams and experts by experience, we have developed new service specifications and for our mental health Level 1 and Level 2 rehabilitation services.

The rehabilitation clinical networks have supported operationalisation of the redefined models. Standardisation of outcome measures used in our L1 and L2 services have been introduced, staff skill sets and training needs have been reviewed and an awareness and engagement campaign on rehabilitation principles across our services has been rolled out.

We have appointed a Corporate Specialist Advisor to oversee the development and delivery of Trauma-Informed Care, which is an essential part of care provision. We are proud to report that 90% of staff working in L1 and L2 services have undertaken awareness level trauma training. We have a workforce plan to develop and deliver further trauma training at the skilled, enhanced and specialist levels during 2025-2026 and to have 100% of staff trained at awareness level.

Participation in National Clinical Audits (NCAs)

During the year ending 31st March 2025, we participated in the following Prescribing Observatory for Mental Health (POMH-UK) audits:

- ▶ **Topic 16c:** *Rapid Tranquilisation*
- ▶ **Topic 21b:** *The use of melatonin*
- ▶ **Topic 24a:** *Opioid medications in mental health services*
- ▶ **Topic 18a:** *Use of Clozapine*

Participation in national and contractual data collections

Elysium participated in the following national/contractual data collections:

National Data Collections
NHS England DCF Portal (Data Collection Framework): QCRS SSQD data collections
MHSDS
Patient Related Outcome Measures
CAMHS Experience Surveys on Admission, My Care and Treatment (annual), and Discharge
Family, Friends and Carer Experience Survey
Adult Service User Survey on Admission, My Care and Treatment (annual), and Discharge
Friends and Family Test (as per Discharge survey)
The Complaints Satisfaction survey

Between January and December 2024, services participated in the following Elysium audits:

Audit
Seclusion
Long Term Segregation
Therapeutic Segregation
Security
Safeguarding Assurance
Complaints Assurance and Service User Experience
STOMP and STAMP
Reducing Restrictive Practice
Controlled Drugs
Physical Health Care: management of the deteriorating patient
Health and Safety

Elysium is compliant with all mandatory requirements of Mental Health Services Data Set.

Improving our services through peer-review

Our services participate in peer review networks organised by the Royal College of Psychiatrists, including:

- Quality Network for Forensic Mental Health Services (QNFMHS)
- Quality Network for Psychiatric Intensive Care Units (QNPICU)
- Quality Network for Inpatient CAMHS (QNIC)
- Quality Network for Working Age Services (QNWA)
- Prescribing Observatory for Mental Health (POMH)

Not all membership options provide a rating of overall performance, but a review summary. The following table details the date of last review and the outcome of the review process for each participating service.

Service	Date of last review	Outcome
QED		
Meadow Ward, Tŷ Glyn Ebwy	April 2025	Developmental report only
QNFMHS		
All Saints	May 2024	Developmental report only
Arbury Court	February 2025	Open discussion only – no report
Chadwick Lodge	January 2025	MSU: 65%; LSU 66%
Farmfield	March 2025	Developmental report only (awaiting report)
The Farndon Unit	October 2024	62%
Gateway Recovery Centre	May 2024	80%
St Mary's Hospital	February 2025	Developmental report only
The Spinney	March 2025	Developmental report only
Thornford Park	March 2025	Developmental report only (awaiting report)
Wellesley	February 2025	Developmental report only (awaiting report)
QNPICU		
Hulton Ward	October 2024	Developmental report only

Service	Date of last review	Outcome
QNIC		
Bere Clinic	May 2025	Developmental report only
Brighton and Hove Clinic	November 2024	Developmental report only
Cheshunt Ward, Rhodes Wood Hospital	March 2025	Developmental report only (awaiting report)
Cotswold Spa Hospital	March 2025	Developmental report only (awaiting report)
Emerald Place Clinic	Not yet reviewed	Not yet reviewed
Opal and Jasper Wards, Potters Bar Clinic	April 2025	Developmental report only (awaiting report)
Rainbow Ward, Rhodes Wood Hospital	December 2024	Developmental report only
Shepherd Ward, Rhodes Wood Hospital	March 2024	Developmental report only (awaiting report)

Service	Date of last review	Outcome
QNWA		
Clyst Ward, Pinhoe View	May 2025	Accreditation (awaiting report)
Crystal Ward, Potters Bar Clinic	June 2024	Developmental report only
Kenn Ward, Pinhoe View	May 2025	Developmental report only (awaiting report)
Ruby Ward, Potters Bar Clinic	September 2024	Developmental report only
POMH		
Elysium Healthcare	June-July 2024	Topic 21b: The use of melatonin

Fostering a culture of continuous improvement and innovation

Elysium Healthcare is committed to embedding a quality improvement (QI) ethos - that is, using methods and tools that support continuous improvement and empowering staff and service users to make meaningful change - into organisational culture.

Recognising the potential benefits of a consistent and systematic approach to improving safety, effectiveness and experience, we partnered early in our QI journey with the Institute of Healthcare Improvement (IHI) to ensure we applied a well-tested and recognised framework for change.

Driving Improvements through the sharing of good practice

Elysium has formed a Quality Forum for Regional Quality Leads to support sharing and learning between different parts of the organisation. Each member provides an update on topics in their region and any good practice they wish to share. It is an opportunity to identify key themes, discuss common issues, and consider potential solutions.

Quality initiative for LD&A 2024-2025

A Person-Centred Approach

Our community-based services provide small, supportive homes and apartments for individuals with learning disabilities or autism. These environments are designed to promote independence, inclusion, and meaningful engagement in the community, while ensuring access to the specialist care each person needs.

We are committed to a person-centred approach. Every aspect of support is tailored—from personal care routines and cultural preferences to daily activities and communication methods. Our teams are trained to think creatively and proactively, focusing on how to enable rather than restrict, always seeking ways to support individual choices.

Recognising that communication is key to autonomy and wellbeing, we use a variety of tools based on each person's needs and preferences. These include:

- Makaton
- Communication tablets with customisable features that help individuals express feelings, preferences, and choices
- Visual daily planners for those who benefit from structured routines



This ensures that everyone, including those with limited verbal communication, can have their voice heard and their needs met.

We support individuals to do as much as they can independently or with assistance—whether that’s making breakfast, baking, or participating in household tasks. Staff are careful not to “de-skill” individuals, instead encouraging growth and confidence.

There are no average days in our services.

Activities are chosen by the people we support and may include:

- Cycling, swimming, hydrotherapy, or walking
- Attending college or community events
- Enjoying meals out or quiet time in nature

When something isn’t working, we adapt—ensuring that each person’s experience remains positive.

We celebrate life together with monthly events like Christmas, Halloween, or Valentine’s Day. These are thoughtfully planned to reflect the strengths and sensitivities of each individual—offering both lively and quiet spaces so everyone can enjoy in their own way.

“It’s all about the person and understanding what they will enjoy – and making sure everyone can take part, if they want to, and how they want to.”

*Mark Obligacion,
Registered Manager, School House*

Quality initiative for CYPMHS 2024-2025

Co-produced Care and Treatment Standards for CYPMHS

During this reporting period Elysium's Child and Young People Mental Health (CYPMHS) division launched two sets of care and treatment standards which were fully co-produced with young people and their families and carers.

The development of the standards really began back in 2023 when we launched co-production across our CYPMHS and other services. Part of this process involved getting parents and carers, service users, experts by experience, staff and NHS commissioners and family together to discuss what areas were important to them, where good practice could be shared and what we needed to improve on

We found that for young people and their families and carers, there were themes about communication, understanding the service and what a care and

treatment pathway looks like. They wanted to know more about what it means to be admitted to a service, what happens at each stage and where they can get support.

Working together, we developed a project to create Care and Treatment Standards for Service Users and the Treatment Standards for Families and Carers.

To create the standards, we held a range of workshops and sessions virtually with young people which looked at the pathway of care and treatment from pre admission through to discharge and what was good and what could be improved. We also held workshops for parents and carers and family ambassadors as well as social workers on site. They bridge the gap between families and the services and were fundamental in advocating for families and carers.

We also gathered data from surveys to make sure we had input from as wide a group as possible. We worked alongside Our Corporate Expert By Experience to make sure that we were considering everything from a person-centred perspective and not being clinically led. The Family Ambassadors were our clinical friends in developing the family and carer standards.

As part of the Standards we have developed a range of accessible resources to guide families and carers through what they can expect at each stage and the Standards they can expect. Accessible and interesting resources such as posters and animations have been developed to communicate those standards.

“Throughout the process we have learned that less is more; people can often feel overloaded with information when they or their loved one is being admitted to hospital, and they have shared it’s not very helpful to them. Visual resources and information is better, they have told us. And what we think is important isn’t necessarily what a patient or their family feels is important. The Standards recognise that.”

*Colleen Fahy and Priya Thakar,
Regional CAMHS Quality Managers*

When the standards launched, we asked young people and the services which support them, along with families and carers to mark the occasion with a celebration event of their choosing. We also developed a pledge which our senior team members signed as a mark of our commitment to achieving these Standards.




“We will continue to review the Standards and how each of our CYPMHS services is meeting them. We will be working with sites through 2025 to review and support reaching the standards being launched which we collectively as an organisation pledge to strive to meet at all times”.

Dean Swire, Regional Services Director CYPMHS

Quality initiative for mental health & wellbeing services 2024/2025

The Limes: The Triangle of Care

The Limes in Mansfield Nottinghamshire, has gained the Triangle of Care accreditation from the Carers Trust.

There are six key standards to work towards and The Limes received accreditation for their ongoing work with carers in March 2025.

Receiving the accreditation recognises the many different ways in which the service encourages patient engagement, and engagement with families and carers. Everyone's voice, ideas and viewpoints are really valuable when supporting people.

Further work is underway with an implementation plan and further plans to

link with external organisations and collaborate with families, carers and the people we support with training, events or workshops.

The Triangle of Care is a national initiative developed with the Carers Trust. It is a therapeutic alliance between carers, service users and health professionals. It aims to promote safety and recovery and to sustain mental wellbeing by including and supporting carers.

This approach recognises that carers often possess valuable insights into the person they care for and can contribute significantly to their well-being.

At The Limes, we have a strong ethos of co-production. Elysium's Corporate Expert by Experience, works closely with us and we hold co-production meetings. There is a Co-Production Patient Champion and I am the Co-Production Champion from the staff team.

*Claire Langley,
Patient Engagement Lead/Carer Lead*

Quality initiative for neurological services 2024/2025

A Clinician's Perspective on Assessing and Supporting Emergence from PDOC

This case study highlights the importance of multidisciplinary approaches and the persistence, creativity, and collaboration strategies of the team at The Bridge.

Background

LW sustained a Diffuse Axonal Injury (DAI) and severe brain trauma following a car accident. He was placed in an induced coma and ventilated via tracheostomy. Early clinical indicators suggested he was in a Prolonged Disorder of Consciousness (PDOC).

After seven months in hospital care he transferred to a specialist neurological care centre and underwent a Sensory Modality Assessment and Rehabilitation Technique (SMART)

assessment. This indicated minimal consciousness, though prognosis was unclear with complex presentation.

Complicating Factors

- Optic nerve damage in the left eye, with unclear visual capacity
- Increased physical care needs
- Development of Type 2 diabetes, requiring insulin
- Use of a PEP mask, PEG feeding tube, and a Phoenix postural chair

LW returned to live in a specially adapted annexe at the family home, supported by 24-hour care.

His family, particularly his mother, observed encouraging signs of improvement:

- Responses to verbal commands and humour
- Occasional meaningful conversation content
- Use of a custom communication device created by his father

Motivated by these signs of progress, LW's family requested a referral to The Bridge Neurological Centre

Quality initiative for neurological services 2024/2025 - continued

Each therapy discipline within the specialist Multidisciplinary Team (MDT) conducted initial assessments, with the objective to determine whether LW met the emergence criteria from a Prolonged Disorder of Consciousness (PDOC). With a clear diagnosis the team could then design a holistic sensory programme to build on the strengths observed.

Kirsty Allison, Senior Neuro Occupational Therapist, led LW's initial assessments. She emphasized the complexity of accurately evaluating LW's abilities due to his unique presentation:

"The emergence criteria for PDOC are very specific—repeated success at certain tests under controlled conditions. My first challenge was to understand how to assess LW in a way that accounted for his specific abilities."

LW demonstrated limited arm movement and some visual capacity. However, coordinating these abilities to elicit reliable functional responses proved difficult. Early observations revealed misaligned pupils and nystagmus (involuntary eye movements), which ruled out eye-gaze communication. Even simple tools like 'yes' and 'no' cards were unreliable due to potential placement in non-visible areas of his visual field.

Understanding LW's visual capabilities became a priority. Kirsty focused on the visual elements of the Coma Recovery Scale-Revised (CRS-R), repeating assessments to gather incremental insights.

"Initially, we noticed consistent inattention to the left-hand side—both visually and auditorily. We used light-up balls and eye-catching objects to test tracking and scanning."

Through weeks of structured observation and testing, LW's visual field was manually mapped. This led to a breakthrough:

"It was like putting together a jigsaw. Eventually, I realized he had hemianopia—loss of vision in the right visual field of both eyes—combined with a deviated gaze and left-sided inattention."

This understanding allowed the team to adapt assessments to LW's functional visual field, significantly improving the accuracy of responses.

Kirsty collaborated closely with Mira Bour Akbar, Speech and Language Therapist (SLT), conducting joint sessions that proved pivotal.

"We discovered that LW's independent arm movement occurred in a part of his visual field he couldn't see. Once we facilitated his arm into his visible field, he could respond accurately."

This adaptation led to consistent responses to familiar stimuli, such as photographs of family members. LW demonstrated discriminatory choice-making, a key indicator of emergence.

To formally assess emergence, the team presented LW with 12 images in pairs, positioned in his strongest line of vision (left side of the right eye). His left eye was patched to reduce double vision, and his arm was supported to ensure visibility.

“He successfully completed six out of six trials. The next day, during a session on the tilt table, we repeated the test—and he scored another six out of six. That confirmed his emergence. It was a wonderful moment for him and his family.”

Following this milestone, LW’s rehabilitation was tailored to his strengths. Custom ‘yes’ and

‘no’ cards were created to fit within his visual field. He progressed from following simple commands to answering personal questions with approximately 90% accuracy.

To support daily interactions, the team provided visual field diagrams to LW’s family and care team, ensuring consistent positioning during communication and activities like watching TV.

The team continues to explore communication methods that are both effective and energy-efficient for LW. The goal is to identify techniques that can be easily replicated by staff and family members.





Building capacity and capability for QI

Elysium Healthcare has an established framework for QI which has been designed to support engagement across a wide range of service types and by all staff and service users. With around 700 people trained to date in QI methods and tools and 70 active projects, QI has proven to be a valuable opportunity for individuals to be involved in leading and delivering meaningful change.

Although our QI portfolio is fairly immature in comparison to some of our NHS partners, we are already boasting excellent outcomes from several projects.

CASE STUDY 1

A QI project on improving therapeutic engagement on an inpatient ward for service users with a learning disability observed a 29% reduction in the number of incidents of violence and aggression and a 25% reduction in the number of incidents of self-harm over a 12-month period.

The team introduced two changes: first, they introduced safety huddles to improve communication practices and patient engagement in their care; second, they co-designed a programme of activities with patients to ensure engagement opportunities were individualised and aligned to patients' recovery goals. The benefits of such improvements are vast, including cost savings from improved staff wellbeing and retention and reduced agency usage. The achievements of the ward were recognised at an external learning event and the findings are currently being written up for publication in a highly respected journal.

CASE STUDY 2

Elysium Healthcare has committed to participating in NHS England's Quality Transformation Programme. This consists of several strands of work delivered by various NHS partners to improve culture of care within inpatient services, with 13 of our wards benefitting from the offer.

The work is guided by 12 overarching core standards and QI methods and tools are used as the framework for change. Winsford Ward, Wellesley Hospital has participated in the strand aiming to improve equity of experience for people detained under the Mental Health Act, focusing primarily on inequalities faced by people with a learning disability and autistic people. The ward has demonstrated excellent patient involvement from the start of this project; they worked hard to adapt the sessions

to align with the communication needs of the patients and ensure they were able to get the most out of the discussions.

The change ideas being tested (improvement in ICR processes, noise reduction and family involvement) have already had a substantial impact on patient experience and outcomes, reducing the number of incidents occurring per month by 29.5% and the number of hours patients are spending in seclusion per month by 66% in just six months. The achievements of the ward have been recognised by the organising agency, the Virginia Mason Institute (VMI), and they are one of only three wards that have been invited to showcase their story at the final national learning event of the programme.

Alongside this work, we are working with the VMI to use QI to implement the Patient and Carer

Race Equality Framework (PCREF) to improve the experiences of people from racialised communities organisation wide.

Using QI methods and tools as a vehicle for change has demonstrated the benefits of empowering staff and service users to make meaningful change and allow for a wider culture shift towards services that are trauma-informed, autism informed and culturally competent. As the programme continues, we will monitor progress against a set of measures to evidence the impact of this work.

As with all our QI activity, the learning from engaging in such programmes will be applied beyond the initial pilot sites to benefit wider practice in terms of reducing variation, improving quality and delivering better value.



Driving improvements through the sharing of good practice

The Good Practice Hub is a platform to support learning and sharing across the organisation.

The site offers the following features:

- Library of resources, housing good practice guidance, audit findings and practical information to support service improvements
- Good practice video library, including short informative videos and webinars
- Good practice quick links (external sites)
- Elysium quick links (internal sister sites e.g., research, quality improvement, governance, and safeguarding, policy consultation etc.)
- Ideas and suggestions, to ensure the site is meeting the needs of all users

At the time of reporting, we have published ten editions of the Good Practice Bulletin. These bulletins cover governance updates for the whole organisation and include contributions from sites to showcase good practice in relation to each edition's theme. The Good Practice Bulletin is designed to drive improvements by sharing news, knowledge, and learning. Themes have included: **well-led, effective, experience, teamwork, safety, physical health, quality improvement, compassionate leadership, trauma informed care, co-production and life support skills.**

Research

Elysium are part of Ramsay Health Care who encourage a positive culture of research that can explore ideas, communicate best practice, and contribute to outstanding healthcare around the world. The Ramsay Global Community of Practice for research leaders and experts enables them to share knowledge, experience, tools, and approaches across our network of facilities and services.

At Elysium staff members across the organisation actively participate in research to stay at the forefront of innovative healthcare delivery. Our research outputs inform the way we work and actively flow through to care delivery. The breadth and depth of the knowledge and experience of clinical colleagues across Elysium is, we believe, unmatched in our sector. As well as leading and conducting, or collaborating on, important research projects, we have among our team celebrated authors and sought-after speakers in their individual fields.

Honorary posts mean we are working and informing the delivery of best practice externally with reputable universities. Elysium Healthcare is committed to improving the quality of care we provide, achieving better outcomes through research and the implementation of evidence-based interventions. All research involving service users receiving care within Elysium is subject to approval, as described in the Conducting, Hosting or Collaborating in Research policy. The policy provides details on ethical approval and data security.

The following principles guide our research activity:

- 1 Focusing on what matters most**
Our research activity is aligned to the needs of the people we support and our colleagues, as well as our clinical, operational, and commercial needs. We strive to evaluate and advance our models of care, ensuring we focus on priority areas that will have the greatest impact.
- 2 Championing co-production and involvement**
We recognise the importance of lived experience and champion coproduction and involvement of people and their carers in our research wherever possible.
- 3 Promoting diversity, equity, and inclusion**
We seek to promote a diverse, equitable and inclusive environment that encourages participation in research from everyone.
- 4 Working in active partnership**
We have built strategic links and partnerships with academic institutions, health institutions and other external organisations.
- 5 Dissemination and promotion**
We will promote our research outputs and support advancements in the field more widely through publications and conference presentations.

Adult Mental Health Services

Research Publications

Sen, P., & Kumari, V. (2024). Objective and measurable predictors of violence risk and outcome among forensic patients with psychosis. *Frontiers in psychiatry*, 15, <https://doi.org/10.3389/fpsyt.2024.1359586>

Basu, M., Taylor, A. J., Georgiou, M., Kageha, D., Myers, N., Wojdylak, A., Haque, Q., & Sen, P. (2025). Development of a tool for the evaluation of cultural competence of staff members at a secure forensic unit in the UK: A feasibility study. *Medicine, Science and the Law*, <https://doi.org/10.1177/00258024251329208>.

Conferences

Halder, N. Evidenced based approaches to enhance productivity and wellbeing. RCPsych National ID Trainees Conference, Liverpool, 29 November 2024. [Conference]

Halder, N. and Balakrishna, J. Coaching and Mentoring. RCPsych NW Spring Conference, Manchester, 9 May 2025. [Conference]

Contributions to national guidance

Royal College of Psychiatrists (2024) College Report CR242 – Protecting the mental health of people seeking sanctuary in the UK’s evolving legislative landscape. [https://www.rcpsych.ac.uk/improving-care/campaigning-for-better-mental-health-policy/college-reports/2024-college-reports/protecting-the-mental-health-of-people-seeking-sanctuary-in-the-uk-s-evolving-legislative-landscape-\(cr242\)](https://www.rcpsych.ac.uk/improving-care/campaigning-for-better-mental-health-policy/college-reports/2024-college-reports/protecting-the-mental-health-of-people-seeking-sanctuary-in-the-uk-s-evolving-legislative-landscape-(cr242))

Neurological Services

Edited Book

Alderman, N. and Worthington, A. (2024) *Managing challenging behaviour following acquired brain injury; assessment, intervention and measuring outcomes*. Abingdon: Routledge.

Conferences

Alderman, N., Mooney, P. and Box, F. A brief overview of neurobehavioural rehabilitation. CPD session for neurorehabilitation clinicians from the Royal Stoke Hospital and Haywood Hospital. Haywood Hospital, Bursle, Stoke-on-Trent, 10th February 2025. [Conference]

Teager, A., Handy, T., Lee, A., Watts, K., Burgon, R., Methley, A., and Alderman, N. (2024). Ascertaining the acceptability and feasibility of using digital health technologies to assess and understand challenging to manage behaviours in neurorehabilitation. Paper presented at the 2nd International Digital mental Health and Wellbeing Conference, Ulster University, Belfast, 19-21st June 2024. [Conference]

Handy, T., Lee, A., Watts, K., Burgon, R., Methley, A., Alderman, N. and Teager, A.J. (2024). Ascertaining the acceptability and feasibility of using digital health technologies to assess and understand challenging to manage behaviours in neurorehabilitation. *Poster* exhibited at the Greater Manchester Neurorehabilitation & Integrated Stroke Delivery Network Annual Conference, AJ Bell Stadium, Eccles, Manchester, 20th March 2024. [Poster]

Lee, A., Watts, K., Burgon, R., Handy, T., Methley, A., Alderman, N. and Teager, A.J. Assessing challenging to manage behaviours in neurorehabilitation: a survey of current practice in the United Kingdom. *Poster* exhibited at the Greater Manchester Neurorehabilitation & Integrated Stroke Delivery Network Annual Conference, AJ Bell Stadium, Eccles, Manchester, 20th March 2024. [Poster]

Teager, A., Lee, A., Watts, K., Burgon, R., Handy, T., and Alderman, N. (2024). Ascertaining the acceptability and feasibility of using digital health technologies to assess and understand challenging to manage behaviours in neurorehabilitation. *Poster* exhibited at the Global Neuropsychology Congress, Porto, Portugal, 3-5th July 2024. [Poster]

Neurological Services

Webinars

Desperles-Hughes, D. and Scratchley, R. Tipping the scales: balancing cognitive limitations and functional demands to facilitate successful outcomes for discharge. ABI Solutions Webinar, 1st May 2024. [Webinar]

Lectures

Alderman, N. Neurobehavioural Disability. Lecture given as part of the MSc Applied Neuropsychology / PG Diploma Clinical Neuropsychology (conveners M.Bunnage & Aida Moses), University of Bristol, Lecture delivered online, 28th January 2025.

Alderman, N. Neurobehavioural Disability. Lecture given as part of the MSc Applied Neuropsychology / PG Diploma Clinical Neuropsychology (conveners M.Bunnage & Aida Moses), University of Bristol, Lecture delivered online, 16th April 2024.

Mooney, P. Clinical Formulation Skills. Invited lecture for the Msc Forensic Psychology & Professional Doctorate in Applied Forensic Psychology, University of Nottingham. 17th October 2024.

CYPMHS

Publications

Giombini, L and Ball, K. (2024) Oltre le pratiche di micro-coercizione: un approccio esistenziale alla relazione terapeutica in un servizio residenziale nel Regno Unito, in Sciollo, G. (eds) Cure che costringono Costrizioni che curano Il ruolo della coercizione nella cura per i disturbi del comportamento alimentare. Edizioni: Roma.

Regulator statement

All our services in England are registered with the Care Quality Commission and our services in Wales are registered with either Healthcare Inspectorate Wales (hospitals) or Care Inspectorate Wales (care homes). Each of the schools within our Children and Education division are Ofsted registered.

Regulation and inspection

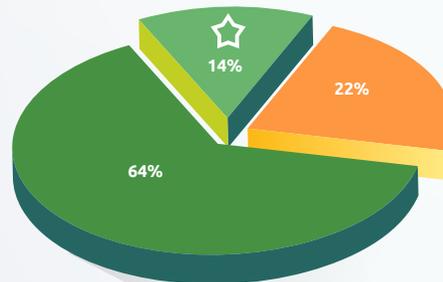
We welcome regulatory inspection from the Care Quality Commission (CQC), Healthcare Inspectorate Wales (HIW), Care Inspectorate Wales (CIW) and OFSTED. In addition to inspection by these bodies many of our services undergo external peer reviews. We also report to the NHS and the GMC with respect to the revalidation of all our Doctors and to the NMC in respect of our Nurses.

Our Hospital Directors, Managers, Care Centre Directors, and clinical teams also work closely at local level to liaise with safeguarding teams, community teams, police, and medical health organisations.

Care Quality Commission Inspections

At the end of this reporting period Elysium had 88 services registered with the Care Quality Commission. 14 services were inspected during the year.

CQC Ratings - overall



-  **Outstanding**
-  **Good**
-  **Requires Improvement**
-  **Inadequate (none)**

Outstanding services

-  **1a Upper Brighton Road** Elysium Care Partnerships
-  **21b Upper Brighton Road** Elysium Care Partnerships
-  **Alexandra Gardens** Elysium Care Partnerships
-  **Ewell Road** Elysium Care Partnerships
-  **Gresham House** Elysium Care Partnerships
-  **Holkham House** Elysium Care Partnerships
-  **Martham House** Elysium Care Partnerships
-  **Ranworth House** Elysium Care Partnerships
-  **School House** Elysium Care Partnerships
-  **Stockwood House** Elysium Care Partnerships
-  **The Chimneys** Elysium Healthcare



Healthcare Inspectorate Wales and the Care Inspectorate Wales

Elysium has six services registered with Healthcare Inspectorate Wales, four of which were inspected during the reporting year. There are two services registered with the Care Inspectorate Wales, both were inspected during the reporting year. Although there is no comparable rating system all our services deliver good care. We also work very closely with the Local Health Boards to ensure that we meet quality standards on the core framework agreements.

Ensuring that people have a positive experience of care: staff survey

The Elysium annual staff survey took place in this reporting period with a very good response rate of **69%**. Staff feedback is anonymous so colleagues can openly highlight negative and positive issues in the workplace. Demographic questions were included which has enabled more in-depth analyses.

Our engagement score was **78%**, wellbeing was **80%** and Inclusion was **72%**





PART 4

Experience

Service User Experience

Some of the people we support want to tell their stories about their achievements, their hopes, moving on, or their goals. At Elysium we collaborate with service users, families, carers, and staff to allow people who want to, to make a film which talks about their journey with Elysium.

We work with the individual and their families and discuss what they would like to say, where they would like to be filmed and the title of their film. Service users who can give consent, still have their identities protected and can change their minds at any time.

> The Care in Focus series of films can be viewed on the Elysium website here:
elysiumhealthcare.co.uk/care-in-focus/



Sharing experiences
by Elysium service users and their carers.



Evaluating care

One of the most important measures in evaluating care is the feedback from our service users. Here is the main feedback from our surveys:

Service User Satisfaction Surveys 2024

Adult

Key strengths	Areas for us to develop
People supported by us stated that they are able to attend regular community meetings in their service	More work to be done to ensure that service users are confident and reassured that feedback they give is used to improve services
Service users know how to make a complaint and are also aware of the advocacy services available to them and how to contact them	Provide more information about people’s illness, including physical health conditions and better information about their medications
Service users felt involved in discussions about their care and treatment	Ensure that service users have enough time with their team to discuss their care and treatment
People stated they are treated with compassion, dignity, and respect	Offer an improved choice and variety of food including healthy options

Reporting period 2nd May – 28th June 2024

CYPMHS

Key strengths	Areas for us to develop
Young people highly rated the information and support given highly and felt welcomed	Ensure that young people arriving have a “buddy” assigned to them who can help them settle in to the ward
Before arriving at the service: young people said they relevant received information about what to expect and they knew why they were admitted	Ensure young people know who their key worker is within 48 hours of arriving with reminders as necessary.
On admission most young people said were given an information pack and were made aware of their rights	Make sure young people understand how much one-to-one time they will have each week with their Doctors to discuss their care
When young people arrived at a service, they felt supported and welcomed by staff and other young people and were shown round	More work to be done to provide information about the service and what to expect before arriving at the service.

Period of reporting 1st June 2023 to 31st May 2024

Service User Satisfaction Surveys 2024

Learning Disability & Autism & Easy Read responses

Key strengths	Areas for us to develop
Service users said they felt safe at their service	Improve the variety and choice of food options, review the portion sizes and quality.
Service users said they feel listened to by staff at their service and felt supported to stay in contact with family and friends.	Encourage staff to be more responsive to service user's needs and ensuring there are enough staff to carry out activities
Respondents said that staff made sure to ask them what they like to do	Find more activities available both in the service and in the community
Service users said that staff involve them in discussions and help them understand information about their care	Encourage service users to become involved with service development and improvement.

Reporting period: 2nd May – 28th June 2024

Neurological

Key strengths	Areas for us to develop
Service users felt safe at their service, and they knew how to ask for help	Offer an improved choice and variety of food including more cultural and healthier options
Service users were happy they have choices in the clothes they wear, meals and activities.	Improve ways in which we communicate information about and therapies changes to therapy timetables
Service users said they thought the staff listened to them and were kind.	Explore more activity options both in service and in the community
Some Service users felt they were supported well to stay in contact with family and friends	Ensure ways to support people to understand and agree their care plans with the team

Reporting period 2nd May – 28th June 2024

Overall
experience
of care

69%

69% of service users stated 'strongly agree' or 'agree' to the statement '**I receive high quality care that meets my individual needs**'.

Adult Mental Health and
Neurological Services 2024

Patient Reported Outcome Measures (PROMs)

During this reporting period Elysium's Experts by Experience have been working together with service users to refresh the questionnaires used for their Care Programme Approach (CPA) in England and their Care and Treatment Plan (CTP) in Wales.

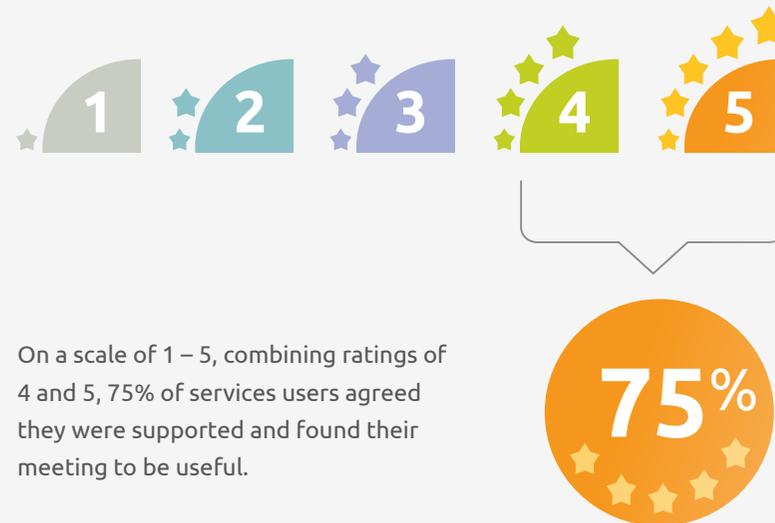
This has meant the process and the wording have been agreed in collaboration with the people we support and are therefore more meaningful to them resulting in an increase of completed questionnaires.

The purpose of the Post CPA/CTP Questionnaire is to gain a service user's feedback on how valuable their CPA/CTP was to them in assisting their pathway forward. It also identifies any elements that were helpful to enable them and their clinical team to continue to do what was helpful, and to discuss the areas that were not helpful and how to address these in the future.

The feedback from the service user is added as an item for discussion at their next individual care review (ICR) meeting following their CPA/CTP meeting.

Here it can be agreed what to continue doing that worked well for the service user, and how to address areas which were felt to not work as well.

The Post CPA Questionnaire information is also reported within each service's Monthly Quality Account.



Family friends and carers survey

A total of 392 ‘Experience survey: Family, friends and carer’ surveys were returned from 80 services, ranging from 1 to 23 responses. There were 54 refusals, and 3 services completed only refusal surveys. As a result, all 82 services were represented either by a completed survey or a refusal survey. There continues to be an improvement in the completion rate of this survey.

- The survey was reviewed and updated in March 2024, following consultation with the Carers Group. There were some minor changes made to the wording, a comments section added for some questions, and some questions were amended to reflect that some service users cannot verbally communicate.
- The following statements combine the ‘strongly agree’ or ‘agree’ responses provided by family, friends, and carers. These have nearly all improved this year including how family, friends, and carers are treated by staff.

From the survey the following highlights have emerged.

Key strengths	Areas for us to develop
Family carers stated that they feel welcomed and treated with respect by staff members	More work to be done to improve ways that family carers can be more involved in service development opportunities, such as reviewing service policies or supporting the design/delivery of staff training
Visiting arrangements, how to book a visit, and how to get to the service were explained well	Offer more information to family carers around issues of consent, confidentiality, and information sharing
Respondents stated that with their consent they are supported to be involved in discussions about their loved one’s care.	Offer more information to be able to signpost family carers to alternative forms of support for practical and emotional needs
Respondents believe that staff members communicate sensitively about issues relating to their loved one and their care	Improve communication to family carers about the service, how to provide feedback and how to raise a concern, complaint, or compliment

The audit period was May 2024 – June 2024.

Role of families and carers

Families and carers along with the people we care for are supported to have active participation in all aspects of care and treatment planning and decision-making. We recognise this may be more effective in some areas more than others and are working to promote this consistently across all sites. We promote family and community connections, acknowledging their experiences and skills to support learning and improvement. This ethos of involvement is proactively promoted at site level, and it features at all levels of the organisation.

Elysium have a Carers Charter and Family, Friends and Carers handbook to align with the standards as laid out in the NHS 'Carer support and involvement in secure mental health services: A Toolkit'.



Experts by Experience

Elysium Healthcare employs a Corporate Expert by Experience, and a Regional Expert by Experience, to work with Elysium staff and service users to help improve their lives and experiences of living and working in our services. Both Experts by Experience have personal experience of using services and are therefore in the best possible place to be able to offer help, advice and support.

Service User Advisory Group

Over the last year, Elysium's Service User Advisory Group has continued to meet bi-monthly to discuss and review different policies pertaining to service users, for example care planning.

The group has also talked about important issues such as sustainability and how Elysium can be 'greener' by recycling waste and batteries. The 'Mission Fit' programme lead talked to the group about the 'Mission Fit Fitness' programme, and how sites can get involved, plus the group have revisited Reducing Restricted Interventions (RRI), and assessed what restrictions take place on their own wards and reported back to the RRI lead.

Service User Involvement and Co-production

Co-production continues to be high on the agenda for Elysium. During this reporting period the Corporate Expert by Experience has continued to deliver co-production training to staff and supports sites with monthly co-production champions meetings.

Complaints

Elysium healthcare has continued its harmonisation of complaint management systems and policies across services, as services have been acquired and added to the Elysium portfolio. Complaints are monitored monthly through Clinical Governance frameworks.

We promoted our staff, service users and our stakeholders to feel confident and comfortable to raise concerns or complaints with us at any time.

Key facts: for 2024 - 2025 include:

- 523 complaints were received
- 87% of complaints were acknowledged in writing within two working days of receipt
- 68 % of complaints were resolved within 20 working days
- 53% of complaints had an element upheld or partially upheld
- 39% of complaints came directly from current service users

"We would like to recognise the great care and patience given to our family member during his stay at The Bridge. We are so grateful and reassured. We are impressed with the patience and time taken not to rush him and always being so kind and gentle. Keep up the great work."

Family of resident at The Bridge - October 2023



*We welcome
feedback on our
Quality Account.*





Get in touch

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