

Appendix 6
Barnet Health Overview and Scrutiny Committee
NHS Quality Accounts Submission 2012/13

NORTH LONDON HOSPICE

The Committee scrutinised the North London Hospice Quality Account 2012/13 and wishes to place on record the following comments:

- The Committee noted the high quality of care provided by the Hospice and welcomed the patient focus.
- The Committee supported the use of volunteers and the training that the Hospice provided for them.
- The Committee noted that a large proportion of the Hospices' income was derived from fundraising activity and commended this.
- The Committee welcomed the participation of the Hospice on the End of Life Care Board and Frail Elderly Group
- The Committee supported the introduction of a target of a 75 – 80% bed occupancy rate for 2013/14.
- The Committee welcomed the decrease in the number of closed bed days from 156 in 2011/12 to 85 in 2012/13.
- The Committee welcomed the Hospice beginning to work within a local five hospice consortium to benchmark performance.
- With reference to Information Governance Assessment, the Committee noted that the Hospice had achieved an overall score of 60% and had been graded 'not satisfactory'. Hospice staff reported that this had been due to issues regarding connecting IT systems to the NHS Intranet which had very high security requirements. Members were advised that was an action plan in place to ensure that the required score of 66% was achieved for 2013/14. The Committee noted the response and supported the actions taken to improve performance.
- The Committee noted that staff had been considering recommendations made in the Francis Report and how the Hospice would respond to these.
- The Committee highlighted the increase in pressure sores (an increase from one in 2011/12 to four in 2012/13) and noted that these were attributable to an increased number of patient days in the hospice and the medical conditions suffered by the patients which made regular movements painful.

ROYAL FREE LONDON NHS FOUNDATION TRUST

The Committee scrutinised the Royal Free London NHS Foundation Trust Quality Account 2012/13 and wishes to place on record the following comments:

- The Committee welcomed that all targets, with the exception of C.difficile infection cases, had been met for 2012/13. The Committee noted that the Infection Control Team had been undertaking detailed analysis of cases and steps were being taken to address this increase.
- The Committee welcomed the move towards patient rather than clinician defined performance metrics.

- The Committee noted that the hospital had been found to be non-compliant with one outcome relating to medicine management following a CQC inspection in October 2012 and that an action plan was being implemented to address this area of improvement.
- The Committee noted work being undertaken by the Trust to ensure there was sufficient capacity for emergency operations.

CENTRAL LONDON COMMUNITY HEALTHCARE NHS TRUST

The Committee scrutinised the Central London Community Healthcare NHS Trust Quality Account 2012/13 and wishes to place on record the following comments:

- The Committee welcomed the continuing involvement of the Quality Stakeholder Group.
- The Committee commended the award winning work of the Central London Community Healthcare NHS Trust staff.
- The Committee supported work of the Trust to introduce technology to improve clinical record keeping and increase the amount of staff to patient time.

However, the Committee wished to express concern in relation to the following:-

- The Committee commented that the Patient Survey Results indicated a lower performance for Barnet than in other boroughs and sought assurance that Barnet residents were not receiving a lower standard of service.
- The ideal of having interdisciplinary meetings for individual patients' treatment is splendid. However, there is no mention in the Quality Account of how this will happen.

BARNET AND CHASE FARM HOSPITALS NHS TRUST

The Committee scrutinised the Barnet and Chase Farm Hospital NHS Trust Quality Account 2012/13 and wishes to place on record the following comments:-

- The Committee welcomed the positive developments set out in the Quality Accounts and were encouraged by the Trust's improved performance on Priority Three: Pressure Ulcers.
- The Committee were pleased to note the improvements that had been made in respect of Priority Five: Liverpool Care Pathway and the emphasis on dignity, respect and compassion.
- The Committee noted the Trust's intention to improve record keeping.
- The Committee congratulated the Trust in relation to their work on Priority One: Dementia Services.

However, the Committee wished to express concern in relation to the following:-

- The Committee questioned why the Trust had not contributed to this year's National Diabetes Audit and expressed concern that the data held on the Trust's existing system was not adequate or specific to the audit. The Committee were reassured to hear that the software required to contribute to this audit had been purchased and that the Trust intended to contribute to next year's audit.

- The Committee noted the number of large scale projects on-going at the Trust (including the response to the Francis Report, the business case for the acquisition of the Trust by the Royal Free London NHS Foundation Trust and delivering the objectives set out in the Quality Accounts) and expressed concern at the ability of the Trust to manage and prioritise these projects. The Committee noted that the Trust were aware of the risks in balancing a number of projects and received assurance that they would monitor Key Performance Indicators closely.
- The Committee expressed concern at the Clinical Coding Error Rate and questioned what action would be taken to improve these figures.
- The Committee raised concern over the performance for MRSA instances in 2012/13 and noted that the target of four cases had been breached, with seven MRSA cases occurring within the period. The committee noted that root cause analysis of the cases had shown that the cases had not been a result of cross-contamination.
- The Committee raised concerns that five “never” events had taken place during 2012/13, and sought assurance that appropriate action would be taken.
- The Committee expressed great concern that the target to see patients at Accident and Emergency within four hours had been breached in five months out of 12 during 2012/2013, especially in light of the changes due to be implemented in November 2013 as part of the Barnet, Enfield and Haringey Clinical Strategy.

BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST

Note: The submission below reflects a joint submission agreed by Members of Barnet, Enfield and Haringey Health Overview and Scrutiny Committees who met on 28 May 2013. The Barnet, Enfield and Haringey Members considered the draft submission of the Barnet Health Overview and Scrutiny Committee from the 9 May 2013 meeting and agreed a combined response for submission to the Trust:

Clara Wessinger and Maria Green from Barnet, Enfield and Haringey Mental Health Trust introduced its draft Quality Account 2012/13.

Members scrutinised the Quality Account, and wishes to place on record the following comments:

- The Committee welcomed that the statistics for the rate of Emergency Readmissions within 28 days of discharge was below the national average.
- The Committee welcome the addition of the achievements of staff within the Quality Account.
- The Committee were pleased to note that there had been no enforcement action from the Care Quality Commission.
- The Committee welcomed the objectivity of the comments made within the Quality Account about the lack of Communication with GPs, but were concerned that the target had not been met in 2012/13. The Committee request that the BEH MHT consider this as an official priority for 2013/14.

However, the Committee also wishes to place on record the following comments:

- The Committee expressed concern that, under the category of GP Communications, the Care Plan Review Update sent to GPs (within two weeks) was 54%, below the national benchmark of 95%.

- The Committee were disappointed to note that one of the priorities for 2012/13, "Safety – Improve Communications with GPs" had only been partially met.
- The Committee expressed concern over the poor GP involvement in Mental Health issues, and requested to be advised of GP attendance statistics to organised training academies.
- The Committee noted that concerns had been raised regarding the reported functionality of the patient "crisis line" and the "GP line". The Committee were advised that reports on both of these telephone lines were currently being prepared, and would be provided to the Committee.

The Committee also made the following requests:

- The Committee noted that the Trust is currently conducting a piece of work on The Francis Report, and requests that a link to that document is placed in the final paragraph of the Chief Executive Statement in the final version of the Quality Account.
- That the Committee are advised whether or not Magnolia Ward, at St. Michael's Hospital in Enfield, is included within the statistics for Emergency Readmissions within 28 days of discharge.
- The Committee have also requested that the Trust provide Barnet, Enfield and Haringey with an update on the following topics:
 - 1) Primary Care Academies
 - 2) GP Link Workers
 - 3) GP Line
 - 4) Crisis Line
 - 5) Training Updates (The Committee requested that when this information is provided, where possible, it is broken down to Borough level for clarity)
- The Committee noted the importance of reporting Patient Safety Incidents and requested that an explanatory note is added to the Quality Account to outline what follow-up action is taken on' the reports of Patient Safety Incidents once they have been received.
- Barnet, Enfield and Haringey request that the Trust provide an update on their progress against the comments made herein at a meeting to be held in six months' time. In particular, this is to include an update on the Care Plan.

RESOLVED that:-

1. **That the above mentioned comments by the Committee be noted by the North London Hospice and individual Trusts and incorporated into the final versions of their Quality Accounts for 2012/13.**
2. **The Royal Free Hospital NHS Foundation Trust be requested to provide the Committee with details of changes to the National Patient Survey and the impact on measuring performance against key quality objectives.**
3. **NHS partners be requested to present a six month update to the Committee on actions taken to respond to the comments by the Committee when considering the Quality Accounts.**

4. Barnet and Chase Farm Hospitals NHS Trust be requested to provide details to the Committee on actions taken to address performance issues in relation to the Clinical Coding Error Rate.

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