

## Appendix 4 – Final Comments made by the Health Overview and Scrutiny Committee to NHS Trust for Quality Accounts 2013-14

### Royal Free London NHS Foundation Trust:

The Committee scrutinised the Royal Free London NHS Foundation Trust Quality Account and wished to put on record the following comments:

- The Committee noted the high quality of care provided by the Royal Free London NHS Foundation Trust.
- The Committee welcomed the fact that the Royal Free London NHS Foundation Trust had met all of their targets, except the target on *C. Difficile*.
- The Committee welcomed the action that the Trust was taking in relation to working with partners to increase dementia awareness, and welcomed the fact that the Trust had a dementia lead.
- The Committee welcomed the actions being taken to improve quality in relation to dementia as a result of the National Clinical Auditor in 2013/14.
- The Committee noted that approximately a quarter of inpatients at the Royal Free London NHS Foundation Trust have diabetes, and welcomed the innovative work that the Trust is undertaking in relation to care of patients with diabetes.
- The Committee welcomed that there were zero attributable cases of MRSA at the Royal Free London NHS Foundation Trust during 2013/14, and are pleased to note that the various methods used to achieve the zero rate are being passed on to other Trusts as examples of best practice.
- The Committee welcomed that the percentage of staff employed by or under contract to the trust who would recommend the trust as a provider to their family or friends had increased from 72.6% in 2012 to 76.2% in 2013.
- The Committee noted that the Performance Indicator for the percentage of patients readmitted to the trust within 28 days of discharge for patients aged (i) 0 to 15 and (ii) 16 or over used old data, and requested that the final version of the Quality Account be updated with any available data from years 2012/13 onwards where possible.
- The Committee noted that other NHS Trusts tend to include references to complaints, and whilst noting that the Royal Free London NHS Foundation Trust would be limited by the regulator, advised that they would welcome a section on complaints in the Quality Accounts.

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

- The Committee noted that the rate per 100,000 bed days of cases of *C. Difficile* infection that have occurred among patients aged two and over had risen from 19.3 in 2011/12 to 30.5 in 2012/13, compared to the National Average Performance 2012/2013 of 16.3. The Committee were told that the Royal Free London NHS Foundation Trust had seen an improvement of those results over the last six months.

The Committee note the Independent auditor's limited assurance report to the Council of Governors of the Royal Free London NHS Foundation Trust on the

annual quality report and expressed concern over the reporting that a significant proportion of the staff themselves felt bullied, under stress or discriminated against.

- That the number and rate of patient safety incidents that occurred during the reporting period October 2011 – March 2012 and October 2012 – March 2013 had increased from 451 to 2,528. The Committee noted that the data submitted between October 2011 and March 2012 was incomplete due to technical issues with exporting data, and that the Trust had taken actions to improve its reporting rate.

## **Barnet, Enfield and Haringey Mental Health NHS Trust Quality Account 2013/14**

The Committee scrutinised the Barnet, Enfield and Haringey Mental Health NHS Trust Quality Account and wished to put on record the following comments:

- The Committee noted that although the Trust had worked to strengthen communication with GPs through the GP Advice Line and the Primary Care Academy, communication with GPs as a whole was still needing improvement.
- The Committee noted that the “Carer Strategy” will be launched after 2<sup>nd</sup> June 2014.
- The Committee noted the survey undertaken by the Trust in relation to GPs’ satisfaction with communication and commented that it would be helpful to see the satisfaction statistics broken down by Borough.

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

- The Committee had expected to receive a more complete version of the report. The Committee noted that in advance of the Health Overview and Scrutiny Committee meeting, the London Borough of Barnet had been informed that updates made to the issued draft were not substantial enough to require the re-issuing of the draft provided for publication. The Committee expressed concern that when the report was presented at the meeting, the changes appeared to be much more substantial than had been initially implied. The Committee noted that if they had been aware of the magnitude of the changes, then the Committee would have wanted to have had the latest version of the document published and circulated in advance of the meeting. The Committee also wished to express their dissatisfaction that, on the evening, they were not made aware of the changes that had been made to the document.
- The Committee expressed concern that the priority for 2013-2014, “Safety - Improve communication with GPs” had not been met, and were further concerned to note that this priority would not be taken forward for 2014-2015.
- The Committee was told that the CQC had revisited The Oaks Ward on 10 April and that the Trust was now compliant. The Committee were informed that the enforcement notice had been lifted regarding the seclusion rooms.

## North London Hospice Quality Account 2013/14

The Committee scrutinised the North London Hospice Quality Account 2013/14 and wished to put on record the following comments:

- The Committee welcomed the continuing improvements to the quality of care provided by the North London Hospice.
- The Committee noted the removal of the Liverpool Care Pathway and welcomed the examples of best practice undertaken by the North London Practice in end of life care following the Pathway's removal.
- The Committee welcomed the fact that the Hospice had invested in a day services Clinical Nurse.
- The Committee welcomed the action taken by the Hospice in seeking ideas for social activities and were pleased to note that activities such as musical performances in open spaces, reading and playing cards with people took place.
- The Committee welcomed the dementia facilities provided by the hospice.
- The Committee welcomed the refurbishment of bedrooms and inpatient units to improve dementia care.
- The Committee commented that the statistic for falls per occupied bed days per 1000 in 2013-14 was 13.2, compared to the national benchmark of 6.5 falls per 1000 bed days. The Committee noted that this national benchmark included hospitals and commented, that by the nature of being a hospice, a higher falls rate would be expected because of the frailty of its patients.
- The Committee welcomed the Clinical Effectiveness Project One: Dementia Care. The Committee welcomed the variety of dementia training that the Hospice would be undertaking, particularly, offering to train staff of external care homes and district nurses.
- The Committee noted that in 2012/13, the Hospice began working within a local five hospice consortium to benchmark performance. The Committee were pleased to note that the Hospice would be working with a group of 99 hospices in order to conduct benchmarking and were pleased to note that this data could be available in next year's Quality Account.
- The Committee welcome the 0-0 rate of avoidable pressure sores reported in April 2013 – March 2014.
- The Committee asked to be informed of the attendance figures of Barnet patients attending the day centre when it was located at the North Finchley site, compared to the current figures of Barnet patients attending the day centre at new Enfield site.

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

- The Committee noted that the Audit Steering Group Chair had highlighted the need to increase competence and the quality of audits.
- The Committee noted that there had been an increase in closed bed days in 2013/14 due to plumbing problems, deep cleaning requirements in rooms which patients with MRSA had been cared for, staff sickness and maternity cover.

## **Central London Community Healthcare NHS Trust**

The Committee Scrutinised the Central London Community Healthcare NHS Trust Quality Account 2013/14 and wished to put on record the following comments:

- The Committee welcomed the fact that the addition on the annual complaints report.

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

- The Committee expressed concern that the milestone, "Reduction in paperwork for front line staff (by a third), creating time to care by introducing electronic / digital solutions to reduce paperwork" had not been achieved
- The Committee expressed concern that the milestone, "Audit of recruitment processes to demonstrate values questions asked and staff survey to show high levels of understanding and commitment to Trust values" target had not been achieved.
- The Committee expressed concern that the outstanding milestone of "Audit of dementia, mental health and learning disability and care of vulnerable adults policy" had not been achieved.
- The Committee noted that the Risk Management Strategy showed that 90% of services are using their risk registers and that service improvements can be clearly demonstrated. The Committee expressed concern that some services were unable to identify risks.
- The Committee expressed concern that there was no proof of dentistry provision in Barnet being provided by the Trust.

## **Barnet and Chase Farm Hospitals NHS Trust:**

The Committee scrutinised the Barnet and Chase Farm Hospitals NHS Trust 2013/14 Quality Accounts and wished to put on record the following comments:

- The Committee welcomed the very recent improvement that the Trust had made in Accident and Emergency waiting times.
- The Committee welcomed the fact that following an upgrade of the telephone and call centre technology, Patient Services were handling 80% of calls within 30 seconds.
- The Committee welcomed the fact that additional staff resources had been made available to deal with complaints
- The Committee noted that it was a legal requirement of the Trust to have a "Limited Assurance" report.
- The Committee welcomed the "Home for Lunch" initiative.
- The Committee welcomed the use of the "Forget-me-Not" scheme to assist patients with dementia.
- The Committee welcomed Priority Two for 2014/15, which is to reduce the "Did Not Attend" rate. The Committee questioned what further actions were

being taken to reduce the rate of cancellations and were told that the Trust was using text reminders, reminder phone calls and were working to improve communication skills so that patients felt more able to inform the Trust that they would not be attending an appointment. The Committee requested that this be expanded upon within the Quality Accounts.

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

- The Committee noted that 56.1% of formal complaints were acknowledged within the first three days and suggested it would be helpful for patients to be given an estimated response time within the acknowledgement.
- The data from the last three months in the “Monthly Cardiac Arrest Run Chart” was not included. The Committee requested that this be inserted if the data is available before publishing the Quality Accounts.