

**CENTRAL LONDON COMMUNITY HEALTHCARE NHS TRUST (CLCH)
UPDATE RE THE 2019-2020 QUALITY ACCOUNT.**

As committee members will of course be aware this year has been one of the most extraordinary in the life of the NHS. Therefore in most cases because of the many changes we have had to make to our services to respond to the pandemic I am unable to respond directly to the points raised in the minutes. However I have tried to respond to the points made where I can and hope the committee finds this useful.

Firstly though, and aside from the quality account, I am pleased to confirm to the committee that following a CQC inspection held in March, the CQC confirmed that we were rated as **GOOD**.

The full report can be found here: <https://www.cqc.org.uk/provider/RYX?referer=widget3>

It is to the huge credit of our staff that, despite being inspected during the onset of the pandemic, we were assessed as being good.

The Committee was disappointed that most patients had rated the quality of the food and presentation as 'poor' but understand that there will be more information on improving food for patients next year and look forward to hearing about these developments

I will aim to include more information about this in the next quality account.

The Committee noted that the percentage of patients' valid NHS number was only 93.9% at the Trust's Walk In Centres and asked that the Trust work to improve on this figure

Due to the pandemic staff in all of our walk in centres were redeployed. Therefore we have had no opportunity to review this.

The Committee was disappointed that the outcome of the Sentinel Stroke National Audit Programme had commented that 'many patients are still left without specialist psychological support' and that 'a focus is required on assessments and outcomes six months after a stroke to highlight the needs of patients, their families and carers over the longer term

Unfortunately the outbreak of the pandemic had a significant impact on the normal operations of the clinical audit programme. In mid-March, further to guidance by NHS England and the Trust's Medical Director, the Trust's clinical audit activities, including non-COVID related local, mandatory, Trust-wide and national audits, were suspended in order to allocate resources where needed. This included the sentinel stroke national audit programme so there are therefore there no current updates

The Trust is currently looking to see services' viability regarding undertaking and following-up clinical audit work during this phase of the pandemic.

Under the UNICEF Baby Friendly Initiative Staff Audit, the action recommended that all staff be trained on a mandatory two-day Breastfeeding Management course and that 'greater awareness was required on breastfeeding positioning, attachment and hand expressing and the importance of not advertising formula milk'.

In October 2020 we designed and started to deliver a virtual infant feeding training for staff as an interim training package for our face-to-face two day training. (Nearly all Trust training is now online).

We will restart the staff audit in the upcoming months. The aim of this audit is to meet the standards for staff knowledge, skills and training for the UNICEF Baby Friendly Initiative (BFI) to achieve Level 3 Baby Friendly Accreditation.

Actions from the previous audit included:

- All staff to be trained on the interim one day virtual infant feeding training, by June 2021 to ensure full compliance.
- Infant feeding lead to follow up all virtual training with a one to one practical skills review
- Infant feeding to include relevant updates in staff weekly newsletter and attend staff meetings where appropriate to keep staff informed of overall progress and plans of BFI.
- Staff audits have commenced from November 2020.
- Maternal audits to commence March 2021.

The Committee expressed great concern that under the Commissioning for Quality and Innovation (CQUIN) and Local Incentive Scheme Payment Frameworks, CLCH failed in the CQUIN 'Staff Flu Vaccinations' to achieve 80% uptake of flu vaccinations by CLCH frontline clinical staff working in Barnet and also failed in the CQUIN 'Local Wound Care' to increase improvement in the number of 'assessed' wounds which have failed to heal after four weeks. These two failures resulted in a loss of income of £204,873.04 from Barnet CCG.

This year due to the Covid pandemic there has been an increased effort to get all staff to get the flu vaccine. Flu clinics were made available across the Trust (both at our London and Hertfordshire sites and an extra day's carry over leave was offered to staff who took the jab. Additionally staff who accessed their jab from a community pharmacy or their GP were offered this incentive. The Trust also produced a weekly flu bulletin encouraging staff to have their jab and explaining the importance of this particularly in the light of Covid.

Staff who did not want the jab were requested to complete a dissent form so that their reasons for refusing could be better understood and analysed. Where possible managers followed up with staff who did not want the vaccine to encourage them to reconsider.

The Committee noted that between April 2019 and February 2020 two deaths of patients were subjected to both a case record review and an investigation.

I can't comment provide details on individual patients but I can confirm that at CLCH. we complete a case record review for every patient who dies in a CLCH bed whether that death is expected or unexpected, and whether there were any concerns expressed or not. We are able to do this as we only have, on average, 10 - 15 deaths in our beds per year.

The reason that we review all deaths is so that we can review the care we provided to the patient during their inpatient stay. If there was a concern about the patient's care expressed by either a family member or member of staff, or there was a complaint made, then we also investigate the circumstances around the complaint. The two deaths in question would in any case have had case record reviews as is standard for all deaths in CLCH bedded units. Additionally they were also investigated as there were complaints/ concerns expressed regarding an aspect of their care.

The Committee commented that CLCH's remit was over a wide geographical area and it was unclear which parts of the report were relevant to Barnet.

In accordance with the regulations the quality account is a Trust wide account. Given this we amalgamate performance information in the account. Barnet specific information is shared at local performance meetings.

The Committee commented that not all the targets were Specific, Measurable, Achievable, Relevant and Time-bound (SMART) targets.

It is not a requirement that *all* targets should be SMART. However we always include a RAG rated performance scorecard clearly showing progress against our quality priorities. The scorecard also provides a comparison with our performance of the previous year.

The Committee was concerned that the target of 8% for Staff Vacancy and Turnover rates was not achieved again this year and that the Sickness/Absence rate was even higher than the previous year.

Obviously this year the sickness absence rates are going to be skewed because of the need for self-isolation and the number of staff off sick with potential or actual covid. Furthermore due to the pandemic all Trusts are competing for a limited amount of available staff. However the Trust has worked hard to support its existing staff and has provided increased employee health support with several health and wellbeing seminars as well as virtual Schwartz rounds. It has also provided a wealth of guidance around mental health and wellbeing and there is a dedicated support webpage.

The Trust has again been successful recruiting staff from overseas. As of the end of quarter 2 CLCH successfully recruited 132 International nurses with the first two starters arriving in September. 10 more nurses arrived in October and 11 in November. Following a period of quarantine, these staff will be placed in inpatient units, community nursing and children's services.

Kate Wilkins – 23 November 20.