

Appx 3A, Minute Extract, North London Hospice Quality Account 2020-21

The Committee put on record its thanks to all NLH staff who had continued to provide wonderful care throughout the pandemic. The Committee also put on record the following comments on the Draft Quality Account: The Committee congratulated and complimented NLH on the following:

- for including the interesting and positive patient story at the start of the Quality Account.
- for coping so well in extreme circumstances during the pandemic and also making good progress on its priorities for 2021 particularly further developing their database, Egton Medical Information Services (EMIS), which improved efficiencies across services.
- that the training for non-medical prescribers was impressive.
- that support for patients had been offered virtually during the pandemic, with virtual assessments and consultations.
- for exceeding most of its objectives in providing virtual support for the Health and Wellbeing Service, particularly as this was helpful for patients who were too ill or fatigued to travel.
- its aim to work with the Health Information Exchange (HIE) which enabled the Hospice to access Primary Care patients' records and for continuing to work towards implementing technology to enable it to share its records with other Trusts.
- achieving their ambition of becoming a research centre.
- that some visitors for patients at the very end of life had been allowed access throughout the year.
- Gaining funding from Health Education England which enabled palliative and end-of-life training to be delivered to 36 London Ambulance Service paramedics and technicians and that ten had successfully completed the Level 5 accredited course.

However, the Committee expressed its concerns regarding the following:

- that there were some areas of non-compliance in the Infection, Prevention and Control Audits including the need for improved stock rotation of clinical equipment, improved labelling of sharps bins, ensuring carpets are in a good state of repair and ensuring that urine jugs are only being allocated to a single service user.
- that the Hand Hygiene Audit which took place in IPU only had an 84% compliance level.
- that the Audit of Preferred Place of Death seemed haphazard.
- that the Audit of Community Non-Medical Prescribing identified that communication with GPs could be improved and that FP10 handwritten prescriptions are not always accepted by pharmacists.
- that there had been some transdermal patch incidents, with the wrong dose being given in some cases and omissions of doses in other cases.
- that the number of volunteers was down to 620 from 830 the previous year (2019-20) and from 950 two years ago (2018-19).
- that there had been 141 closed bed days during the year compared with 160 in 2019-20, which was largely due to fire and safety work in the bedrooms, and only 12 in 2018-19. However, it was noted that this had not prevented any admissions.
- that the highest category of medication incidents are administration errors followed by dose omissions, although action is being taken and there is a quality improvement project on medication safety being developed.

- that the number of patient falls had increased over the last quarter of 2020/21 though these had not resulted in serious harm.
- that the number of staff being recruited to the Hospice had gone down from 71 the previous year to 39 this year.
- that there were some areas needing improvement in the Staff Satisfaction Survey, specifically in relation to processes and procedures to support effective working, communication, leadership and engagement, career development and the environment. However, the Committee noted that the Hospice had appointed an Interim Head of Communications, Marketing and Digital who will help in reviewing the Trust's internal and external communications