

HEALTH OVERVIEW AND SCRUTINY COMMITTEE

9 APRIL 2019

QUALITY OF ACUTE HOSPITAL SERVICES – UPDATE

QUALITY PRIORITIES FOR 2019-2020

Summary

1. This is an update for members of the Health Overview and Scrutiny Committee (HOSC) on recent improvements to the quality and safety of patient care provided by Worcestershire Acute Hospitals NHS Trust.
2. We remain committed to continuously improving the quality and safety of our services and our patients' experience of all aspects of their care.
3. Over the past 12 months we have achieved significant improvements in quality through the roll-out and delivery of priorities set out in our Quality Improvement (QI) Strategy. Further improvements have been identified for the coming year and will be set out as priorities as we refresh our QI strategy to ensure we maintain a focus on what is important for patients, their carers and our community we serve.
4. The actions put into place to address our QI improvements have been, and will continue to be, externally reviewed by the Care Quality Commission (CQC), England's Independent Regulator of Health and Social Care in an expected forthcoming unannounced inspection within 2019.

Background

5. The Trust launched its "Quality Improvement Strategy 2018-2021" on 8 June 2018. The Quality Improvement Strategy, and the plans which underpin it: Care that is safe, Care that is clinically effective and Care that is a positive experience for patients and their carers, marked an important step forward for the Trust. The plans which were developed with input from staff, patients, carers and other key stakeholders reflect much of what matters most to those important groups.

The Quality Improvement Strategy Plans are being refreshed for Year 2, following a series of engagement events held with patients, carers and visitors in November 2018. These sessions provided valuable information on those quality priorities that either continued to be important to our service users or were new and in addition to previous priorities. We heard that the majority of people we spoke with confirmed they had received **good care** and **safe care**.

Good Care: 99% of the people consulted confirmed they had experienced "good care" and of these all wanted to share solutions and welcomed the opportunity to discuss their experiences. They defined good care as:

- Being treated with dignity and respect as an equal.
- Determining what is wrong in order to remedy it/so it can be fixed

Safe Care: The majority of people felt that the care they had received was safe. In particular on the Worcester site, a comment received that supported this was – "It's really picked up here in the last year, in every sense". Comments such as these particularly reflected the fact that they could see and feel a positive difference in the attitudes and care

provided by staff, which in turn made them feel safe. Comments taken as direct quotes were “friendly and person centred” care was provided promptly and professional service”

A&E was reported by many as delivering “safe care under difficult circumstances”.

However, this was not in line with their preconceived expectations of the Trust. Many reported expecting a poor experience of care depending on the hospital you receive your care in. These understandings of what their experience would be like, they stated had been formed from the negative local media reports.

The Trust prioritises gaining feedback from patients and their carers. This data is captured through a number of approaches which feeds the Friend and Family quality metric. This allows us to focus on improving what is important to patients and carers in “real time”: “You said and therefore we did” for you while you are in our care as well as reflecting on themes from Friends and Family Test following a patient’s in-patient discharge or out-patient appointment.

The below table provides a view of our quality priorities for 2018-19 and those planned for 2019-20.

Quality Improvement Plan	2018/19	2019/20
Care that is Safe	<ol style="list-style-type: none"> 1. We will reduce the number of avoidable hospital acquired pressure ulcers (HAPU). 2. We will reduce the number of patients who have a fall whilst under our care. 3. We will improve identification and escalation of sepsis screening. 4. We will reduce the percentage of medicine incidents causing harm across the trust 	<ol style="list-style-type: none"> 1. We will reduce avoidable harm to patients through: <ol style="list-style-type: none"> a. reduce the percentage of medicine incidents causing harm across the Trust; b. reduce the number of patients who have a fall whilst under our care; c. continue to improve on progress achieved in reducing the number of avoidable hospital acquired pressure ulcers (HAPU); d. improve permanent staffing levels; e. implement and achieve key standards to prevent infection. This will include hand hygiene compliance, care of indwelling devices for example urinary catheter peripheral cannulas and cleanliness; f. reducing the most commonly occurring serious incidents that potentially cause patient harm <ul style="list-style-type: none"> • Falls • Recognition of the deteriorating patient including sepsis) • Reducing treatment delays • Infection control

		<ol style="list-style-type: none"> 2. We will ensure all our equipment is maintained in a planned and timely way. 3. We will ensure our staff are up to date with the mandatory skills to do their jobs and receive an annual appraisal.
Care that is clinically effective	<ol style="list-style-type: none"> 1. We will monitor and seek to reduce mortality rates for patients whilst under our care. 2. We will improve our time to theatre for patients with fractured neck of femur. 3. We will Implement clinical standards for seven day hospital services. 4. We will complete an annual programme of local clinical audits. 	<ol style="list-style-type: none"> 1. We will monitor and seek to reduce mortality rates for patients whilst under our care. 2. We will Implement clinical standards for seven day hospital services. 3. We will complete an annual programme of local clinical audits. 4. We will improve access across the trust through a focus on increasing capacity. 5. We will improve emergency flow through the hospital access. 6. We will improve waiting times for elective outpatient appointments.
Care that is a positive experience for patient and their carers	<ol style="list-style-type: none"> 1. We will respond to complaints within 25 days of receipt. 2. We will ensure maximise and maintain patient's privacy and dignity throughout their time with us. 3. We will ensure patients and their families are fully involved and aware of their discharge so that they are confident they have everything they need to continue their treatment or recovery including rehabilitation. 4. We will ensure patients understand their condition, treatment and pain management options 	<ol style="list-style-type: none"> 1. We will reduce the numbers of complaints from patients and carers 2. We will ensure patients and their families are fully involved and aware of plans for their discharge from hospitals so that they are confident they have everything they need to continue their treatment or recovery including rehabilitation. 3. We will ensure patients understand their condition, treatment and pain management options 4. We will ensure we maximize and maintain privacy and dignity throughout the patients' time with us. 5. We will support patient and carers to feel more involved and supported in taking ownership of the decisions about their care to ensure there is a positive co-productions and involvement approach

Progress on Quality Improvement

6. CQC inspects services by asking five key questions:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive?
- Is it well-led?

The table below provides an overview of the areas inspected by site as of June 2018. Although the Trust has improved its rating from 2017 in the “well led domain” from inadequate to “requires improvement”, the overall Trust rating remains as inadequate.

In addition to the improvement rating for Trust-wide “Well-Led” and following the publication of the June 2018 CQC Inspection Report, we are pleased to inform the committee that all Conditions and Warning notices have been removed.

7. During the recent “Is It Safe” Inspection of Urgent Care services conducted on 14 January 2019 at both Worcestershire Royal Hospital and the Alexandra Hospital, the CQC Inspection Report published on 1 March 2019, we are pleased to share that the CQC identified that:

- Staff cared for patients with compassion at all times during the inspection. Staff were friendly, professional and caring at all times even when under extreme pressure due to overcrowding in the department. Staff did everything within their capacity to maintain patient privacy and dignity in times of overcrowding.
- Feedback from parents and relatives confirmed staff treated them well and with kindness. Staff involved patients and those close to them in decisions about their care and treatment.
- Patients received a comprehensive assessment in line with clinical pathways and protocols. Risk assessments were completed accurately and actions taken to address any concerns.
- The Service had managers at all levels with the right skills and abilities to run a service providing high-quality sustainable care.
- The Service had a systematic approach to continually monitor the quality of its services. The service monitored activity and performance and used data to identify areas for improvement.
- Staff and managers across the service promoted a positive culture that supported and valued one and other. Staff were respectful of each other and demonstrated an understanding of the pressures and a common goal.

The CQC also identified areas that Urgent Care needs to continue to improve on delays in hand over of patients, reviews by specialty doctors and patients being cared for in the Emergency Department corridors. Our detailed “Home First Worcestershire” Action Plan has been provided to the CQC which outlines the improvements and actions that we be implementing to support the requirements requested in the “Is it Safe” Inspection Report.

Ratings tables

Key to tables					
Ratings	Not rated	Inadequate	Requires improvement	Good	Outstanding
Rating change since last inspection	Same	Up one rating	Up two ratings	Down one rating	Down two ratings
Symbol *	↔	↑	↑↑	↓	↓↓
Month Year = Date last rating published					

* Where there is no symbol showing how a rating has changed, it means either that:

- we have not inspected this aspect of the service before or
- we have not inspected it this time or
- changes to how we inspect make comparisons with a previous inspection unreliable.

Ratings for the whole trust

Safe	Effective	Caring	Responsive	Well-led	Overall
Inadequate ↔ Jun 2018	Requires improvement ↔ Jun 2018	Good ↔ Jun 2018	Inadequate ↔ Jun 2018	Requires improvement ↑ Jun 2018	Inadequate ↔ Jun 2018

The rating for well-led is based on our inspection at trust level, taking into account what we found in individual services. Ratings for other key questions are from combining ratings for services and using our professional judgement.

Rating for acute services/acute trust

	Safe	Effective	Caring	Responsive	Well-led	Overall
Worcestershire Royal Hospital	Inadequate ↔ Jun 2018	Requires improvement ↔ Jun 2018	Good ↔ Jun 2018	Inadequate ↔ Jun 2018	Inadequate ↔ Jun 2018	Inadequate ↔ Jun 2018
Alexandra Hospital	Inadequate ↔ Jun 2018	Requires improvement ↔ Jun 2018	Good ↔ Jun 2018	Inadequate ↓ Jun 2018	Inadequate ↔ Jun 2018	Inadequate ↔ Jun 2018
Kidderminster Hospital and Treatment Centre	Inadequate ↓ Jun 2018	Requires improvement ↔ Jun 2018	Good ↔ Jun 2018	Inadequate ↓ Jun 2018	Inadequate ↔ Jun 2018	Inadequate ↔ Jun 2018
Evesham Community Hospital	Good Dec 2015	Good Dec 2015	Good Dec 2015	Good Dec 2015	Good Dec 2015	Good Dec 2015
Overall trust	Inadequate ↔ Jun 2018	Requires improvement ↔ Jun 2018	Good ↔ Jun 2018	Inadequate ↔ Jun 2018	Requires improvement ↑ Jun 2018	Inadequate ↔ Jun 2018

Ratings for the trust are from combining ratings for hospitals. Our decisions on overall ratings take into account the relative size of services. We use our professional judgement to reach fair and balanced ratings.

Further Unannounced CQC inspections are anticipated throughout 2019 of both Urgent Care and other Core Services which will include all domains; Safe, Effective, Caring, Responsive and Well-Led.

Scrutiny to Date

8. HOSC members have received regular updates on the Quality of Acute Hospital Services, as part of their role to monitor the impact of ongoing pressures experienced by the Hospital Trust, such as increased activity, greater complexity of patient needs and financial constraints.
9. Our updates to the HOSC have focused on the inspection findings and progress to date, priority work streams and plans, as well as the negative impact of the on-going delay to the reconfiguration of Acute Hospital Services in Worcestershire, which were finally approved in July 2017.

Purpose of Meeting

10. HOSC members are invited to consider whether any further information is required and identify any specific elements for potential future scrutiny at this stage and to comment on:
 - Progress being made to date;
 - Quality priorities for 2019-20.

Specific Contact Points for this Report

Worcestershire Acute Hospitals NHS Trust
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County Council Scrutiny Officers
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Background Papers

In the opinion of the proper officer (in this case the Head of Legal and Democratic Services) the following are the background papers relating to the subject matter of this report:

- Agenda and Minutes of the Health Overview and Scrutiny Committee on 5 July and 29 January 2018, 19 July and 17 October 2017, 27 April, 19 July and 26 September 2016, 16 September and 9 December 2015, 27 April and 16 November 2016
<http://worcestershire.moderngov.co.uk/ieListMeetings.aspx?Committeeld=141>
- Care Quality Commission reports:

(Urgent Care 'Is It Safe Reports March 2019)
[https://www.cqc.org.uk/location/RWP01-Alexandra General Hospital](https://www.cqc.org.uk/location/RWP01-Alexandra%20General%20Hospital)
[https://www.cqc.org.uk/location/RWP50-Worcestershire Royal Hospital](https://www.cqc.org.uk/location/RWP50-Worcestershire%20Royal%20Hospital)

(June 2018)
http://www.cqc.org.uk/sites/default/files/new_reports/AAAH2451.pdf

(January 2018)

http://www.cqc.org.uk/sites/default/files/new_reports/AAAH0798.pdf

(June 2017)

http://www.cqc.org.uk/sites/default/files/new_reports/AAAG5822.pdf

(December 2015)

http://www.cqc.org.uk/sites/default/files/new_reports/AAAD7712.pdf