

GATESHEAD METROPOLITAN BOROUGH COUNCIL
CARE, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE
MEETING

Thursday, 18 May 2017

PRESENT: Councillor S Green (Chair)

Councillor(s): M Charlton, C Bradley, W Dick, K Ferdinand,
B Goldsworthy, M Goldsworthy, M Hood, I Patterson,
A Wheeler, D Bradford, J Lee and N Weatherley

APOLOGIES: Councillor(s): R Mullen and J Simpson

CHW42 QUALITY ACCOUNTS 2016-17

The OSC were invited to comment on the Quality Accounts for Gateshead Health NHS Foundation Trust, and Northumberland Tyne and Wear NHS Foundation Trust.

Overview and Scrutiny Committees, along with Healthwatch, are invited, on a voluntary basis, to review the Quality Accounts of relevant providers and supply a statement commenting on the Account – based on the knowledge they have of the provider.

The Committee considered the Draft Quality Accounts for Gateshead Hospitals NHS Foundation Trust and Northumberland Tyne and Wear NHS Foundation Trust.

Taking into account of the OSC's work during the previous year the OSC may wish to comment on the following for each respective account:-

- The Quality Account
- whether they believe that the Account is representative
- whether it gives comprehensive coverage of the provider services
- whether they believed that there are significant omissions of issues of concern that had previously been discussed with providers in relation to Quality Accounts.

The OSC is asked to note that Northumberland Tyne and Wear NHS Foundation Trust is currently only obliged statutorily to consult with Newcastle Health Overview and Scrutiny Committee as its head office is based in Newcastle. However, the Trust is adopting a partnership approach to this issue and has widened its consultation process to other local authority Overview and Scrutiny Committees in areas which receive the Trust's services.

RESOLVED – that the information be noted.

CHW43 QE QUALITY ACCOUNT 2016/2017

The Committee received the Gateshead Health NHS Foundation Trust Quality Account for 2016/17 and received the following update.

In 2016, the Care Quality Commission (CQC) inspected the services in the Trust and rated the trust as 'Good' overall with 'Outstanding' for caring. The Maternity Unit at Gateshead Health NHS Foundation Trust was also rated as 'Outstanding' by the CQC which places it amongst the very best in the country.

In 2016 the trust faced significant growth as it became an integrated acute and community provider, delivering high quality community services to the population of Gateshead alongside the hospital based services. This has enabled the trust to work more closely, and in partnership with Primary Care and Local Authority colleagues through the Gateshead Care Partnership, to deliver high quality and seamless care to the most vulnerable and frail patients.

Feedback from patients show that the Trust continues to provide a positive patient experience with an average of 96% of inpatients saying that they would definitely recommend the hospital to friends and family. 83% of patients that completed to 2016 NHS inpatient survey would rate the care provided at 7/10 or above (Picker Institute, 2016) and over 96% of inpatients in the local Trust survey say that the staff are caring and compassionate.

The Trust has consistently performed within the top three Emergency departments in the country for the Friends and Family Test and we have provided advice and guidance to other Trusts.

The new Patient Experience and Information Centre opened in 2016 and has gone from strength to strength as the trust increases contact with the public who visit the hospital and community facilities. The Centre is also supported by a growing number of volunteers who give invaluable support to patients.

Improvement plans during 2016/17 have been regularly monitored through the Quality Governance Committee and the Trust Board. In addition to the above, the Quality Account for 2016/17 reflects the excellent progress that has been made against the priorities:

- Reduction in avoidable hospital deaths from sepsis through timely recognition and management
- Target reached of zero preventable stillbirths through the 'Saving Babies Lives' campaign
- Improve patient safety by reducing three key common medication errors
- Implementation of the 'ThinkSAFE' project
- Continue to reduce harmful 'in hospital' falls
- Qualitative analysis of complaints (including responses and actions) to improve the patient's (and family's or carer's) experience of the process. Production of an improvement plan and reinvigoration of the complaints service and processes in line with best practice.

The trust recognised that improvements can always be made and will therefore continue to develop a focus on quality improvement through the implementation of a new Quality Strategy 2017/2020 that sets out how to continue to deliver improvements over the next three years, alongside the five key priorities reflected below:-

Clinical Effectiveness

- Continue to implement the improvement plan in relation to Patient Reported Outcome Measures (PROMS) for hip and knee replacements
- Standardise and increase the number of mortality reviews undertaken in line with national guidance

Patient Safety

- Improve our patient safety culture
- Implement National Safety Standards for Invasive Procedures (NatSSIPS) and Local Safety Standards for Invasive Procedures (LocSSIPS)

Patient Experience

- Review of complaints investigations and actions

The Committee thanked the Trust for a comprehensive report and wished to place on record their thanks for the work done so far, on sepsis, three key common medication errors, the zero target achieved through the 'Saving Babies Lives' campaign and the work already undertaken on reduction in harmful 'in hospital' falls.

The representative from Healthwatch also thanked the Trust for a most informative report and agreed to have further discussions outside of the meeting around falls strategy and use of dementia nurses.

RESOLVED – that the information be noted.

CHW44 NTW QUALITY ACCOUNT 2016/17

The Committee received the Northumberland Tyne and Wear NHS Foundation Trust Quality Account during 2016/17 and received the following update:

The Chief Executive of the Trust reported that the trust has been rated as 'outstanding' by the Care Quality Commission, becoming one of only two mental health and disability providers in the country to have received this accolade.

The trust has made progress towards the quality priorities which are:

- To embed suicide risk training for staff
- To improve transitions between young people's services and adulthood
- To improve transitions between inpatient and community services
- To improve waiting times for referrals to multidisciplinary teams

- To adopt Triangle of Care principles to improve engagement with carers
- To improve the recording and use of Outcome Measures
- To develop staff skills in preventing and responding to aggression

The Committee made the following observations:-

2016-17 Quality Priority – to embed suicide risk training for staff

The OSC previously noted that the Trust has still not met this target which had commenced in 2014-15 and been advised that there had been a 31% increase in the numbers of staff trained in 2015-2016 compared to the previous year. The OSC had received assurances that the matter was a priority for 2016-17. The OSC was pleased to note that the trust has now met this target and 87% of staff had now been trained and that there will be refresher training every three years.

Waiting Times

The OSC previously raised concerns about the waiting times for Children and Young People's community services and was pleased to note that there have been improvements in the proportion of children and young people waiting less than 9 and 12 weeks treatment. However, the OSC still considered that waiting times of 12 weeks were too long. The OSC was also pleased to note that the trust had taken on board its earlier comments in relation to clarifying the wording in relation to these targets.

The OSC is supportive of the Quality Account overall and is pleased to note that there are no compliance issues in regard to the Trust.

The representative from Healthwatch thanked the Trust for their report and welcomed the opportunity to work together outside of this meeting.

RESOLVED – that the information be noted

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