

# CARE, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE AGENDA

Tuesday, 14 May 2024 at 1.30 pm in the Bridges Room - Civic Centre

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From the Chief Executive, Sheena Ramsey

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Item	Business
1	<b>Apologies for absence</b>
2	<b>Minutes of last meeting</b> (Pages 3 - 6)
3	<b>Declarations of Interest</b>  Committee members to declare an interest in any particular agenda item where applicable.
4	<b>Stakeholder briefing - Proposed merger of Teams Medical Practice and Glenpark Medical Centre</b> (Pages 7 - 16)  Presenter to be confirmed.
5	<b>Quality Accounts 2023-24</b> (Pages 17 - 18)
5a	<b>Cumbria, Northumberland, Tyne &amp; Wear NHS Foundation Trust</b> (Pages 19 - 34) Presentation of Paul Sams, Feedback and Outcomes Lead, CNTW NHS
5b	<b>Gateshead Trust</b> (Pages 35 - 52) Presentation of Wendy McFadden, Strategic Lead Clinical Effectiveness, Gateshead Trust
6	<b>Any Other Business</b>

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# Public Document Pack Agenda Item 2

## GATESHEAD METROPOLITAN BOROUGH COUNCIL

### CARE, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE MEETING

Tuesday, 16 April 2024

**PRESENT:** Councillor S Green (Chair)

Councillor(s): J Green, W Dick, P Diston, J Gibson,  
B Goldsworthy, M Goldsworthy, G Kasfikis, J McCoid,  
S Potts, D Robson, J Wallace and D Weatherley

**APOLOGIES:** Councillor(s): M Hall, I Patterson and A Wintcher

#### **CHW33 MINUTES OF LAST MEETING**

The minutes of the meeting held on 12 March 2024 were approved as an accurate record with no matters arising.

#### **CHW34 DECLARATIONS OF INTEREST**

No declarations of interest were made.

#### **CHW35 HEALTH AND WELLBEING BOARD UPDATE**

The Committee received a presentation giving overview of the work of the Gateshead Health and Wellbeing Board over the six-month period of October 2023 to March 2024.

The update given was categorised by:

- Strategic and Annual Reports
- Partner Organisation Plans
- Service areas, including their roles in supporting health and wellbeing
- Health and Wellbeing themes
- Compacts/Agreements
- Gateshead Cares System Board
- Health and Wellbeing Board Developing Together Session

The Strategic and Annual Reports received by Health and Wellbeing Board included the following:

- Cumbria, Northumberland, Tyne & Wear NHS (CNTW) Strategy
- Director of Public Health Annual Report

The Partner Organisation Plans received by Health and Wellbeing Board included the following:

- Healthwatch Gateshead Annual Report 2023/24

- Gateshead Health NHS FT Plans and Focus on Women's Health, including the securement of a grant to take this work forward.

The themes/topics prioritised by the Health and Wellbeing Board included the following:

1. Community Physical Activity
2. Consultation on creating a smokefree generation and tackling youth vaping
3. Asylum and Migration

All work by the Health and Wellbeing Board was outlined in detail in an accompanying report.

The Committee particularly highlighted community pharmacies selling non-pharmaceutical items that promote an unhealthy lifestyle, Gateshead's work on women's health, and the Walk and Wheel initiative.

## **RESOLVED**

- i. The Committee gave their views on the work of Gateshead Health and Wellbeing Board for the second six months of 2023/24.
- ii. The Board will be updated when the Gateshead Women's Health Conference has more firm plans.

## **CHW36 CO PRODUCTION FRAMEWORK**

The Committee received a report outlining the rationale behind the development of a Co Production Framework, and the work being undertaken to develop this.

The recent Peer Review of Adult Social Care recognised that at an operational level Co Production was well embedded across the service. In a self-assessment, the service recognised that the work at a tactical and strategic level is in development and making progress.

A Co Production group has been developed; 50 people who have used care services were directly contacted to ask if they would like to be involved and 5 people/families came forward. The process has taken time and has needed to consider the accessibility needs of the individuals involved.

Adult Social Care continues to work with VCSE partners and people who use their services to understand people's lived experiences, including working with the Healthwatch. A series of 'People's Voice' sessions have been set up across the Borough to shape the offer going forward. This will include sessions aimed at engaging hard to reach groups.

The North East Branch of the Association of Directors of Adult Social Services (ADASS) has a Co Production and Lived Experience Sector Led Improvement Group which Gateshead is actively involved with. The group has developed a regional guide to best practice in Co Production and is exploring the opportunity to commission a regional programme of Co Production activities.

A case study of Co Production was highlighted which involved the creation of a tool to support residents with alcohol and dependency issues to assess their needs and interventions that they want support with by an Apprentice in the service.

**RESOLVED**

- i. The Committee noted the content of the report and provided scrutiny in respect of the Co Production work being undertaken.
- ii. The Committee passed on their thanks to the Apprentice highlighted in the Co Production case study.

**CHW37 2024/25 WORK PROGRAMME**

The Committee received a report detailing the Overview and Scrutiny work programme setting process for 2024-25 and a list of suggested topics for inclusion in the work programme, relevant to the remit of the Care, Health and Wellbeing Overview and Scrutiny Committee (OSC).

Elected Members and relevant officers were invited to submit suggestions for inclusion in the work programme between 20th February 2024 and 5th March 2024.

Ideas for topics for scrutiny to consider can be gathered from a wide range of sources including:

- Elected Members
- Senior Officers
- Partner Organisations
- Corporate Plans and Strategies
- Complaints system and Ombudsman
- Evidence from Councillors on issues affecting neighbourhoods

Appendix 1 detailed the suggestions put forward for the 2024/25 Work Programme.

**RESOLVED**

- i. The Committee noted the emerging issues for the 2024/25 Work Programme.

**CHW38 ANY OTHER BUSINESS**

No other business was raised.

**Chair.....**





## **Proposed merger of Glenpark Medical Practice and Teams Medical Practice**

### **Overview**

Glenpark Medical Practice and Teams Medical Practice are applying for a full merger to become one GP practice.

A **6-week period of engagement will commence on 30<sup>th</sup> April 2024** to seek the views of patients, carers, stakeholders, and the local community on the proposed merger.

In the proposed merger, the partners at Glenpark Medical Practice and Teams Medical Practice would continue to provide services from existing sites, with no changes planned to opening hours. Once clinical systems are unified, patients will have access to more choice of appointments, locations, and clinicians.

We are currently inviting all patients registered at both practices who are aged 16 years and over, carers of registered patients, local stakeholders, and the wider community to provide feedback on the proposed merger.

### **How local people can have their say**

Patients aged 16 and over registered at both practices will today be sent a text message with a link to a website article that replicates the content of the letter and FAQs and allows them to give feedback via an online form.

Paper copies of these correspondences will be available at all practice sites and are included for your reference.

### **How you can take part**

As a local stakeholder, we would like to hear whether you think what is being proposed will increase patient choice and improve the services patients receive, whilst also giving you the opportunity to raise any questions or concerns you may have.

Stakeholders are invited to share their views on the proposed merger via our survey (insert link) from today.

### **Attend a drop-in session**

Patients and stakeholders are invited to come along to one of our drop-in sessions to ask questions and provide feedback on the proposed merger.

All patients, carers and stakeholders are welcome to attend any of these sessions.

<b>Date</b>	<b>Time</b>	<b>Location</b>
Tuesday 7 <sup>th</sup> May 2024	12:00pm-1:30pm	Teams Medical Practice
Wednesday 8 <sup>th</sup> May 2024	6:30pm-8:00pm	Glenpark Medical Practice
Monday 13 <sup>th</sup> May 2024	6:00pm-7:30pm	Teams Life Centre, Askew Road
Tuesday 14 <sup>th</sup> May 2024	1:00pm-3:00pm	Dunston Activity Centre, Ellison Road

If you would prefer to feedback via a written submission, please email by 1.6.2024.

Thank you for any support in sharing details of the engagement across your organisations and networks.

Yours sincerely

Dr Mark Dornan, Dr Becky Haines, Dr Jonathan Harness, Dr Chris Jewitt, Dr James Kane and Dr Stephanie Zamoyski

The Partners of Glenpark Medical Practice and Teams Medical Practice



# **Glenpark and Teams Medical Practice**

## **Frequently Asked Questions for Patients**

**Q. Will there still be the same number of appointments available at my usual practice?**

**A.** Yes. In the short-term, appointments at both sites will remain the same to provide stability for both practices, their patients and their teams.

However, we will be reviewing the ways we work over the coming months to best understand how we provide care to patients in the future. We expect the ways of working to be similar for all patients registered across the combined practice eventually.

Being larger may allow us to develop new services and enable us to manage the demand for appointments across both practices more effectively.

**Q. Will I still be able to get an appointment at my usual practice?**

**A.** Yes. The plan is to provide routine care from both sites. However, in the future you could be offered an appointment at either site if this was more convenient or suitable for you. Sometimes a service requires specialist equipment, so some additional services may be offered at one site.

We will update patients regarding any new services in due course.

**Q. Will I still contact my practice on the usual telephone number?**

**A.** Yes. Until otherwise notified, the existing practice telephone numbers will remain the same.

**Q. Can I still speak to my regular GP or Nurse Practitioner?**

**A.** Yes. There are no planned staff changes due to this merger, and you should still be able to see or speak to your usual GP or member of our nursing teams. One of the drivers behind this merger is to secure the long-term viability of the practices in Dunston and Teams.

**Q. Will all current services continue?**

**A.** Yes. There are no plans to stop any services that either practice provides due to the merger.

**Q. What additional benefits will I see?**

**A.** Over the coming months we will identify areas across both practices that could be improved to benefit our patients. Where there is a difference in the care provided we will work to develop a consistent service for all our patients in the future based on best practice.

We aim to eventually share resources across both sites, be more resilient to the challenges all practices face, and hopefully expand the services that we can provide. The one larger practice would offer a wider range of clinicians for patients to see, some clinicians have additional clinical interests and expertise. The times of appointments may also be more convenient for some patients.

**Q. Will the practice opening hours remain the same?**

**A.** There are no immediate plans to change practice opening hours.

**Q. Will the proposed merger affect the care of patients who are housebound?**

**A.** No. We will continue to work closely with our community teams as we do now.

**Q. Will there be any change to the service we receive from community midwives or health visitors?**

**A.** We are not anticipating any changes. The midwives and health visitors are not employed directly by the practices, but we will engage with them to ensure that usual care continues to be provided.

**Q. Will I still be able to use my usual pharmacy for my prescriptions?**

**A.** Yes. Prescriptions will continue to be managed in the same way and you will still be able to use your preferred pharmacy or dispensary service.

**Q. Will the practice boundaries change, and what will happen to patients living outside those boundaries?**

**A.** The two practices have similar but not identical boundaries. This may be reviewed over time, and we would communicate directly with any patients who live outside the newly defined area.

**Q. Do I have the option to change to a different practice if I wish?**

**A.** We very much hope that all our patients will continue to use the combined practice for their healthcare in future. If you do prefer to consider other options, a list of other practices near you can be found below, or by visiting this website

<https://www.nhs.uk/service-search/find-a-gp>

Practice	Address	Tel
Chainbridge Medical Partnership	Shibdon Road, Blaydon on Tyne NE21 5AE	0191 499 0965
Whickham Cottage Medical Centre	Rectory Lane, Whickham NE16 4PD	0191 488 5555
Sunniside Surgery	8 Dewhurst Terrace, Sunniside NE16 5LP	0191 488 3200
Second Street Surgery	Second Street, Gateshead NE8 2UR	0191 477 2430

Oxford Terrace & Rawling Road Medical Group	1 Oxford Terrace, Gateshead NE8 1RQ	0191 477 2169
	1 Rawling Road, Gateshead NE8 4QR	0191 477 2169
Bensham Family Practice	Sidney Grove, Gateshead NE8 2XB	0191 477 6955
Oxford Terrace & Rawling Road Medical Group	1 Oxford Terrace, Bensham, Gateshead NE8 1RQ	0191 477 2169
Millennium Family Practice	Trinity Square Health Centre, Gateshead NE8 1AD	0191 478 3678
The Bridges Medical Practice	Trinity Square Health Centre, Gateshead NE8 1AD	0191 300 9889

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Dr Mark Dornan  
Dr Stephanie Zamoyski  
Dr Alison Heaton  
Dr Abigail Thompson  
Dr Maria Catterall  
Dr Daniel Lai

Practice Manager: Lesley Gooding

Watson Street  
Gateshead  
NE8 2PQ

**Tel: 0191 460 4239**

nencicb-ng.a85023@nhs.net

Website: [www.teamsmedicalpractice.nhs.uk](http://www.teamsmedicalpractice.nhs.uk)

<https://www.facebook.com/teamsmedicalpracticegateshead/>

Rated Outstanding by the Care Quality Commission

Teams Medical Practice is research active

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MD/SZ/TMP

30<sup>th</sup> April 2024

## To All Patients of Glenpark and Teams Medical Practices

**Glenpark Medical Practice and Teams Medical Practice** propose joining together to form one larger practice.

This will ensure that both practices are secure and can continue providing high-quality services to the local community. We hope this merger will take place on 1<sup>st</sup> July 2024.

### **Why are we merging?**

The NHS, in particular General Practice, is under increasing pressure. In these difficult times we need to look at innovative ways to provide high quality care for our patients and new ways of working at scale in order to be sustainable and able to adapt to funding constraints. The partners at Glenpark Medical Practice and Teams Medical Practice share similar values and are geographically very close, with overlapping practice boundaries. After several months of careful consideration, we are excited to announce that we have decided to merge, to be one partnership whilst still retaining the two surgery sites. This is an exciting opportunity which will help to create a stable partnership and sustainable, long-term primary health care.

Subject to approval from [North East and North Cumbria Integrated Care Board \(ICB\)](#), the new Partnership would run services from both existing sites.

### **Business as usual for patients**

Our top priority is to provide high-quality primary care services to patients. We intend to continue to provide medical services from both sites, with no current plans to change opening times at either location.

Naturally, there will be lots of work behind the scenes, particularly combining and improving the systems and services operating at both practices. This will include looking at how patients contact both practices.

We will work closely with our practice patient participation groups and health champions to ensure that any changes meet the needs of all our patients. We will let patients know of any changes before they take place.

## What are the benefits?

### 1. More choice for patients

The long-term goal would be that patients can choose any site for their convenience.

### 2. More GPs and Nurses available to patients

All our GPs and nurses have special interests and additional skills. A bigger clinical team means more options for patients.

### 3. Modern ways of working

NHS England's priority over the next 18 months is for all GP practices to move to 'modern ways of working', which means simpler access to healthcare online and over the phone.

### 4. A sustainable, integrated Practice

Some of the challenges of General Practice become easier as part of a bigger practice – that's why we've seen the size of GP practices increase in recent years.

## Listening to Patients

We are clear that a merger is the best way forward, and we want to ensure patients at both practices are fully informed and can have their questions or concerns answered.

**Today, we are launching a 6-week public engagement programme where patients and local stakeholders can ask questions or share their views about the proposed merger.**

The easiest way to feedback is to use the online survey:

<https://eu.surveymonkey.com/r/glenparkteamsmerger>. A QR code with a link is at the end of this letter.

We would welcome your attendance at our drop-in events to learn more about the plans, share your thoughts or ask any questions. The drop in details are:

Date	Time	Location
Tuesday 7 <sup>th</sup> May 2024	12:00 pm – 1:30 pm	Teams Medical Practice
Monday 13 <sup>th</sup> May 2024	6:00 pm – 7:30 pm	Teams Life Centre, Askew Road

A frequently asked questions (FAQs) section is included for your information, along with a feedback form. Patients and stakeholders have until 14<sup>th</sup> June 2024 to participate, with submissions forming part of our merger application to North East and North Cumbria ICB.

We will regularly update the FAQs on [www.glenparkteamsmerger.co.uk](http://www.glenparkteamsmerger.co.uk) based on feedback we receive.

If you prefer, you can complete a feedback form on paper in either of the locations and place it in the collection box, or return it by post to:

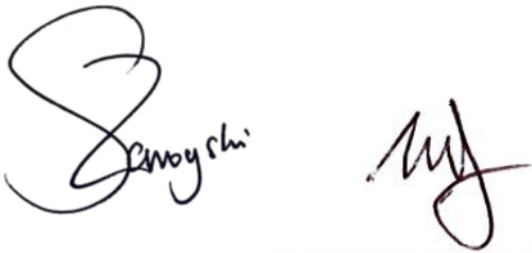
**Teams Medical Practice, Watson Street, Gateshead NE8 2PQ**

**We would appreciate it if patients could please use the feedback methods mentioned above to share their views rather than booking appointments or calling the practices to discuss the merger.**

Alternatively, you can discuss this with an independent organisation. Healthwatch Gateshead listens to, advises, and speaks up for health and social care service users. You can contact them on 0800 038 5116 or at [info@healthwatchgateshead.co.uk](mailto:info@healthwatchgateshead.co.uk).

We hope this information is helpful. We want to take this opportunity to reassure all our patients that the proposed merger will ensure that high-quality medical services continue to be provided for local people into the future.

Yours sincerely

Two handwritten signatures in black ink. The first signature is 'S Zamoyski' and the second is 'M Dornan'.

Dr Mark Dornan, Dr Becky Haines, Dr Jonathan Harness, Dr Chris Jewitt,  
Dr James Kane and Dr Stephanie Zamoyski  
**The Partners at Glenpark Medical Practice and Teams Medical Practice**

To complete the online survey, scan the QR code below



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**TITLE OF REPORT:** Quality Accounts 2023 – 24

**REPORT OF:** Sheena Ramsey, Chief Executive and Alice Wiseman, Director of Public Health

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## Summary

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

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## Background

1. High Quality Care for All, published in June 2008, proposed that all providers of NHS Care should produce Quality Accounts to provide the public with information on the quality of care they provide with a view to enhancing public accountability and ensuring a focus on improving quality.
2. Subsequently, the Department of Health produced legislation which places a legal duty on providers of NHS Services to publish Quality Accounts as part of a new Quality Framework which was brought into force in April 2010.
3. The accounts are to be published annually in June and they cover healthcare services for the previous financial year. The accounts outline:
  - what an organisation is doing well
  - where improvements in service quality are required
  - what an organisation's priorities for improvement are for the coming year
  - what actions an organisation intends to take to secure these improvements
  - how the organisation has involved people who use their services, staff and others with an interest in their organisation in determining their priorities for improvement
4. The requirement to produce Quality Accounts initially only applied to those NHS providers who deliver acute, mental health, learning disability and ambulance services. It did not apply to primary care services and community healthcare services. Providers of primary care and community services were brought into the process during 2011.
5. Commissioners are required to provide a corroborative statement in provider Quality Accounts as to whether they consider the document contains accurate information. The ICB is expected to check accuracy of data in so far as it relates to information supplied to it as part of its contractual obligations – but not any other data.

## Role of OSCs and Healthwatch

6. As part of the Quality Accounts process, providers are required through regulations to send a draft of their Quality Account to the appropriate Overview and Scrutiny Committee. Regulations currently specify that the “appropriate” Overview and Scrutiny Committee means the Overview and Scrutiny Committee of the local authority in whose area the provider has its registered or principal office located.
7. 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.
8. Draft Quality Accounts for Gateshead Hospitals NHS Foundation Trust and Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust are attached at Appendices 1 and 2.
9. Taking 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 believe that there are significant omissions of issues of concern that had previously been discussed with providers in relation to Quality Accounts.
10. Providers are required to include any statement supplied in their published Quality Account and any narrative provided should be published verbatim (subject to maximum word limits). Providers are required to give OSCs at least 30 working days to prepare their comments on the Quality Account and send back to the provider, prior to publication.

## Recommendations

11. The Committee is asked to comment on the respective Quality accounts of Gateshead NHS Hospitals Trust and Cumbria, Northumberland, Tyne, and Wear NHS Foundation Trust.

# **Quality Priority Update**

**2023/2024 delivery**

**Priority setting for 2024/25**

**What were our Quality Priorities during 2023-24, how do they fit with our Quality Domains and how did we do?**

# Quality Priority 1: Reducing restrictive practice

## What we set out to achieve?

Reduce the use of restrictive interventions.

Reduce the use of Prone Restraint.

Reduce the use of Long-Term Segregation.

Improve training and education of all relevant staff around  
Trauma Informed Care  
Human Rights  
HOPEs Clinical Model.

## Progress

The Trust has reduced its segregation by on average 50- 75 % in the last 2 years.

Prone restraint has reduced during 23/24.

Training has been delivered across the Trust including:

- Human rights train the trainer sessions

- awareness sessions (3 hours- 792)

Trauma informed care lead appointed. Launch event held with Trust leaders and managers during March 24.

## Quality Priority 2: Therapeutic Engagement and Observation

### What we set out to achieve

Improve training and education for all relevant staff who undertake engagement and observation.

Improve the quality of therapeutic engagement.

Review approach to engagement and observations.

### Progress

Engagement and observation policy reviewed and updated.

on target to achieve 95%.

Audit tool and techniques improved and compliance arrangements in place across all CBUs where improvements are required.

Engagement and observation discussed as part of clinical supervision.

## Quality Priority 3: (Mental Health and Neuro developmental)

### What we set out to achieve

Develop Neurodevelopmental Pathway waiting times improvement proposals.

Neurodevelopmental Pathway waiting times proposals review / sign off.

ICB Neurodevelopmental waiting time Proposals to reduce longest waiters.

Developing referral form based on need not diagnosis with clear criteria of moderate to severe to avoid inappropriate admissions.

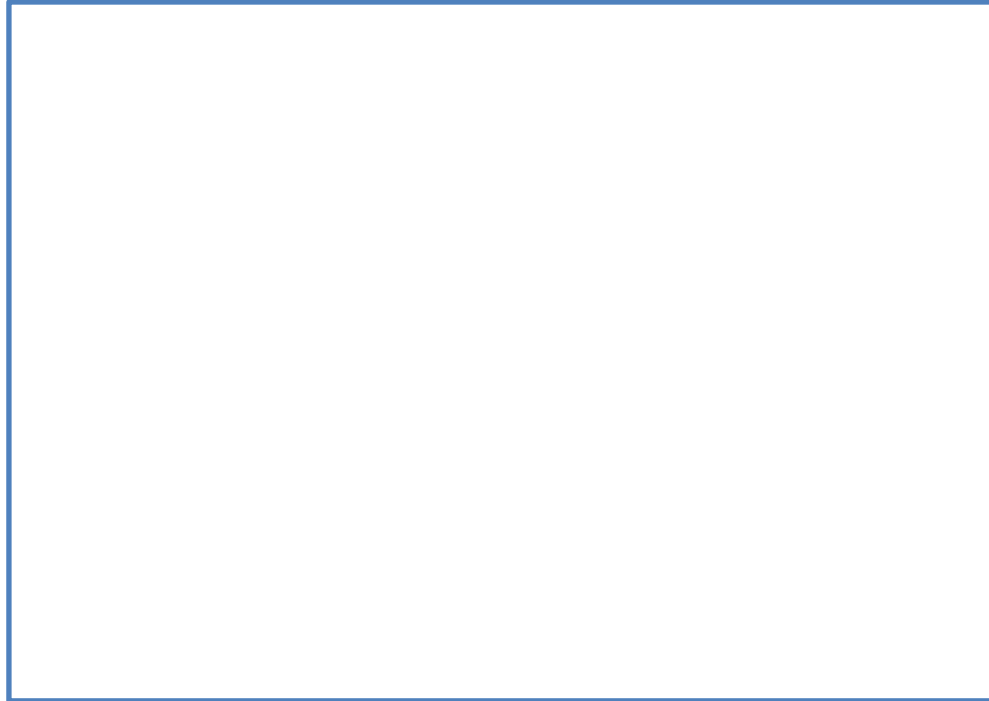
### Progress

Pathway redesign complete and endorsed by Executive Management Group. This will be implemented with partners during 2024/25 to ensure a standardised approach for CNTW.

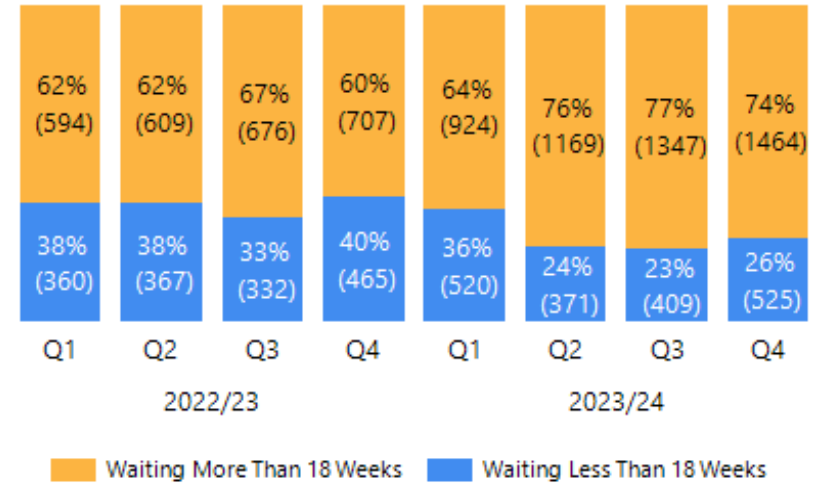
Ongoing investment secured to support third sector and support for improvement access and waiting times.

In Progress, agreeing across pathways and linking with Place based commissioners and partners.

# Waiting times within CYPS



GATESHEAD CYPS % and number waiting more and less than 18 weeks at financial quarter end





## What we set out to achieve

Implement the new PSIRF in accordance with national timeframes.

Compassionate engagement and involvement of those affected by patient safety incidents

Application of a range of system-based approaches to learning from patient safety incidents

Considered and proportionate responses to patient safety incidents

Supportive oversight focussed on strengthening response system functioning and improvement

## Progress

Core team & 6 workstreams established

Staff, service user and carer workshops / engagement events held

PSIRF Plan & Policy approved Nov 23 (Board/ICB)

Go Live 22<sup>nd</sup> January 2024.

600+ staff trained in new approaches to investigation

## What we set out to achieve

warning triggers across inpatient services.

Increase visibility and leadership visits out of hours and at weekends.

Establish the healthcare assistant development programme.

Review the response to the Edenfield recommendations to ensure they are embedded.

## Progress

Open culture dashboard developed and soft launch for testing before full roll out in 24/25.

Leadership visit programme in place, this will continue to focus on out of hours and weekends.

Healthcare assistant programme developed and will be launched Q1 24/25.

Full response to Edenfield learning produced.

Follow up on areas identified for improvement covering four domains of leadership, patient carer voice, values and behaviours in clinical practice and intelligent data progress completed March 2024.



## What we set out to achieve

Achieve national agency cap standard

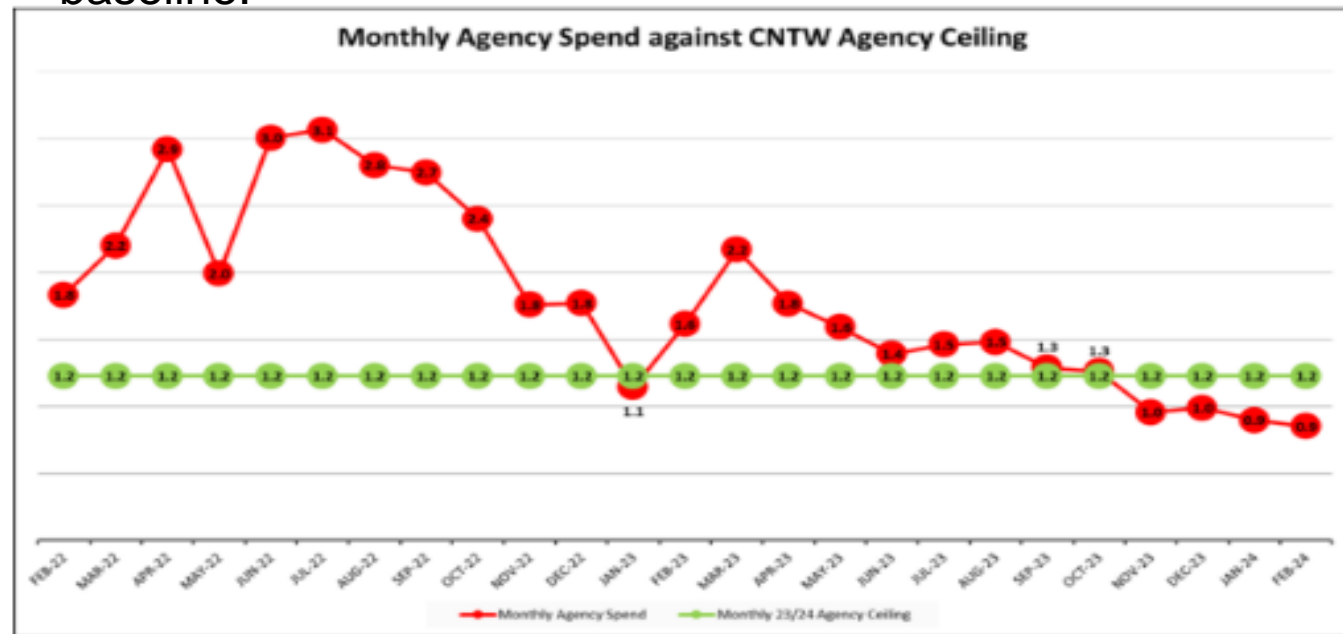
Delivery a revised bank staffing system.

Deliver revised inpatient staffing baseline.

## Progress

Agency trajectory delivered.

Improvements to bank system achieved but will remain a focus for 24-25 as part of the financial plan for the Trust along with delivering the inpatient staffing baseline.



**What are our Quality Priorities for 2024-25?**

# Quality Priorities for 2024-25

We have developed the Quality Priorities as an integral part of the Annual Planning process underpinning delivery of the Trust Strategy - With YOU in mind.

The trust strategy sets out our 5 Strategic Ambitions:

Quality care, every day

Person-led care, when and where it is needed

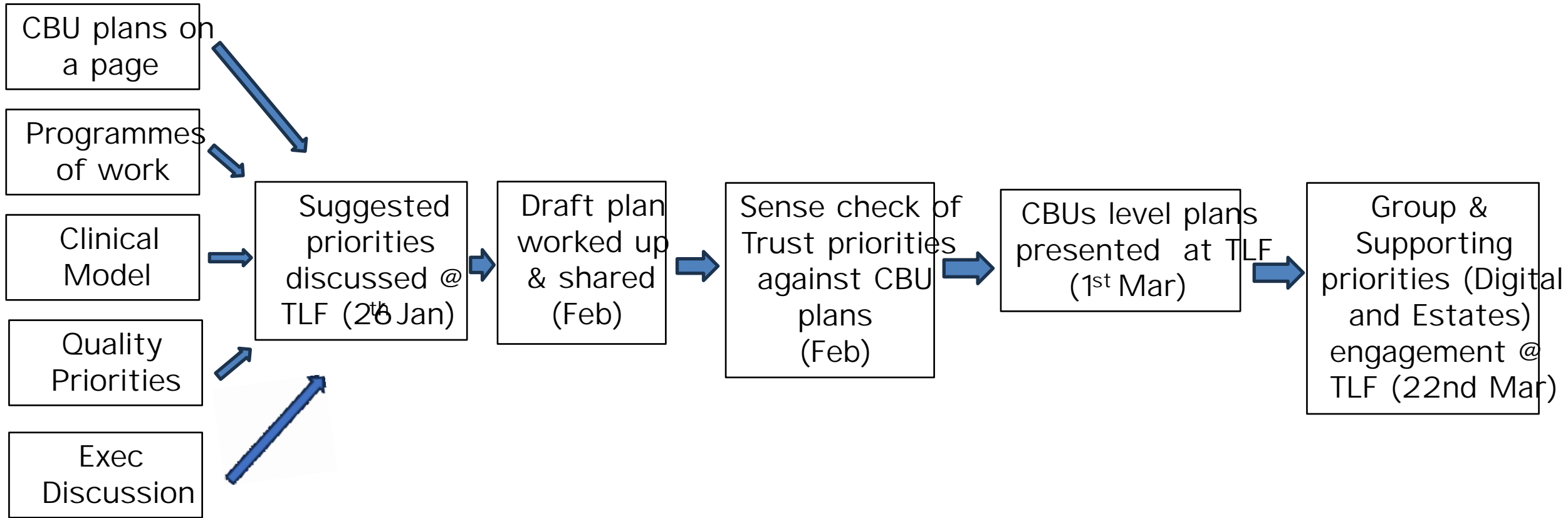
A great place to work

Sustainable for the long term, innovating every day

Working with and for our communities

The development of the deliverables and measures will be developed through Q1.

# Trust Planning



# Ambition 1 | Quality of Care Every Day

## Quality Priorities

Delivering on the key learning from key safety improvement themes;

- Reduce violence

- Improve Physical Healthcare

- Reduction in Suicides

- Reduce restrictive practice

Ensure that the six principles of the Triangle of Care are fully embedded throughout the organisation.

Embed learning through research and informing improvements in care delivery.

Embed a culture of Trauma Informed Care and its approaches across the organisation.



ANY  
QUESTIONS?



# Quality Account 2023/24

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Presented to Council of Governors, Integrated  
Care Board, Healthwatch and Overview and  
Scrutiny Committee

April and May 2024

# Quality Priorities 2023/24

## Clinical Effectiveness

Embed a culture of research in the Trust

Strengthen how we learn from deaths

Improve the experiences of people with a learning disability, mental health or autism

## Patient Safety

Reduce length of stay

Implement the Patient Safety Incident Response Framework with further workstreams on falls and civility

Undertake improvement work around the safe processing of clinical results

Implement a maternity and neonatal improvement plan

## Patient Experience

Work with our Volunteer Service to develop new roles

Improve the way we learn and make improvements following complaints

Strengthen our partnership working with collaborative patient forums to enhance patient engagement and involvement

## Staff Experience

Improve the way we listen, act upon and learn from concerns

Listen to staff experience in relation to waste and duplication

Focus on safe staffing including reducing the movement of staff between clinical areas

# Develop new volunteer roles

## What will we do?

Develop new volunteer roles

## How will we do it?

Review existing volunteer programmes  
Introduce a volunteer task & finish group to develop role profiles and associated training requirements

## Progress in 2023/24

Worked with palliative care team to support volunteer grant to fund volunteer co-ordinator post  
Initial conversations with People at the Heart to appoint volunteers with lived experience  
Recruitment of volunteers is ongoing and associated training continues

# Improve the way we learn and make improvements from complaints

## What will we do?

Demonstrate learning and improvements made as a result of feedback and complaints

## How will we do it?

Implement InPhase  
Develop section on learning library  
Work with Transformation Team to identify opportunities for service and quality improvements

## Progress in 2023/24

Feedback module now live on InPhase  
Complaints policy reviewed and updated  
PALS reinvigorated and reset as a rapid response service for patients and/or families

# Strengthen collaborative working to enhance patient engagement and involvement

## What will we do?

Develop and introduce new patient forums in collaboration with the NENC ICS

## How will we do it?

Seek patient and service line feedback and collaborate with NENC ICS to identify where patient forums could be introduced

## Progress in 2023/24

Re-engaged with Gateshead Carers Partnership, Gateshead Council and Gateshead Carers and invited to Patient Experience Group  
PPCIEG relaunched and rebranded as Patient Experience Group  
15 steps challenge relaunched

# Improve the way we listen, act upon and learn from concerns

## What will we do?

- Develop FTSU leaflets
- Update FTSU policy
- Refresh approach to reporting FTSU across the organisation
- Develop communications strategy for FTSU

## How will we do it?

- Consider timing for further campaigns to recruit more FTSU champions

## Progress in 2023/24

- Increased number of concerns reported in Q3 & 4
- Changes to Trust policies
- Training and education packages
- Comms plan in place
- Introduction of feedback for users to ensure continuous improvement of service
- Changed data collection process to identify key themes and trends
- Introduction of Trust Culture Board Programme



# Listen to staff experience around waste and duplication

## What will we do?

Listen to staff experience around waste and duplication

## How will we do it?

Director led monthly events in The Hub dedicated to focussing on reducing waste and duplication

## Progress in 2023/24

Carried out a number of RPIWs and service improvement events  
Well Organised Hospital Programme up and running  
Increased the number of staff trained in improvement and Lean approaches  
Held staff engagement events

# Focus on safe staffing, including reducing movement of staff between clinical areas

## What will we do?

Use approved tools in line with national requirements for assessment of staffing i.e. birthrate plus, SNCT, Mental Health Optimal Staffing Tool

## How will we do it?

Understand our staffing data  
Recruit to posts where a staffing gap is identified  
Manage staffing in accordance with Trust policy

## Progress in 2023/24

Improved overall vacancy position  
Recruited 171 international nurses  
Introduced 4 year apprenticeship programme  
Current over recruitment of registered band 5 nurses across acute areas  
Reduction in annual agency spend

# Reduce length of stay

## What will we do?

Reduce length of stay

## How will we do it?

Understand our data and metrics associated  
Set up task & finish group  
Develop a robust monitoring and reporting structure

## Progress in 2023/24

Seen a marked improvement to improve length of stay  
Ongoing work across the trust to ensure timely discharge  
Throughout winter worked alongside Local Authority to ensure increased capacity and patients to be cared for in the right place

# Implement the Patient Safety Incident Response Framework

## What will we do?

Create project board and working group  
Strengthen our existing falls prevention group workstreams  
Understand the organisations current position with regards to civility and its impact on patient safety and staff wellbeing

## How will we do it?

Workstreams will have leads with a weekly report  
Oversight and liaison with ICB to agree PSIRP  
Review current falls prevention capacity  
Culture survey  
Thematic analysis of incident reporting related to incivility  
Restorative conversations

## Progress in 2023/24

Formally transitioned from the Serious Incident Framework to PSIRF on 1<sup>st</sup> November 2023  
Work to embed and develop safety improvement priorities underway with quarterly updates to Learning Panel  
Patient Safety Lead involvement in discussions and plans for Culture Transformation Programme including Civility Saves Lives initiative

# Undertake improvement work around the safe processing of clinical results

## What will we do?

Building on workshop held in Q4, hold a RPIW to review processes for managing all results on the ICE system with view to developing SOP

## How will we do it?

Hold RPIW with key stakeholders in Q2  
Map current processes  
Develop standard operating procedures  
Communication strategy to raise awareness of new procedure

## Progress in 2023/24

Improvement workshop held in December 23  
Representatives from general surgery, acute medicine, general medicine, systems leads for RIS, PACS and ICE.  
Trust level SOP was developing for requesting and reviewing tests on ICE, with departments asked to develop their own SOPs  
Guidance produced on system gaps  
Engagement and communication framework developed  
Consultation took place in January at Clinical Strategy Group.

# Implement a maternity and neonatal improvement plan

## What will we do?

Continue to provide assurance around compliance with Immediate and Essential Ockenden actions  
Review current work with a review to streamlining into an overarching maternity and neonatal action plan including maternity and neonatal delivery plan

## How will we do it?

Audits of 7 Immediate and Essential Ockenden actions  
Implementation of a delivery plan steering group

## Progress in 2023/24

Monthly reporting of agreed data  
Midwifery Strategy in final stages  
Individual compliance plans embedded in governance processes

# Embed a culture of research within the Trust

## What will we do?

Offer every patient and member of staff

## How will we do it?

Make research more visible and accessible to our staff and patients and highlight we are a research active trust  
Attract and host more commercial studies

## Progress in 2023/24

Promoted research through a number of forums;  
#Red4Research, International Clinical Trials Day, newsletters, E-learning  
Increase of hosted research studies  
Welcomed 7 new principal investigators  
Patient Research Experience Survey results demonstrated 98% of participant would consider taking part again

# Strengthen how we learn from deaths

## What will we do?

Expand the medical examiner system to non coronial deaths outside of the Acute Trust

## How will we do it?

Expand the medical examiner system to non coronial deaths outside of the Acute Trust by April 2024

## Progress in 2023/24

All 28 GP practices in Gateshead contacted  
20 practices referring deaths into ME service on a regular basis  
Three further practices agreed in principle  
Seven practices

! confirmed as 9<sup>th</sup> September 2024



# Improve the experiences of people with a learning disability, mental health or autism

## What will we do?

Raise awareness of learning disabilities and autism to improve the healthcare outcomes and reduce health inequalities for this group of patients

## How will we do it?

In line with Diamond Standards roll out of the mandatory level 1 learning disability and autism training from April 2023  
Encourage patient facing staff to complete level 2 learning disability and autism prior to becoming mandatory  
Promote the roll of the learning disability nurse  
Share good practice stories

## Progress in 2023/24

Raising awareness for learning disabilities and autism will continually be a key priority for the trust. Although throughout 2023/24 we have made substantial progress through training and education, further work is required. Diamond care standards training is provided across the trust for all clinical areas

# Quality Priorities 2024/25

## Clinical Effectiveness

We will undertake improvement work around the safe processing of clinical results

We will reduce the duplication of GP discharge letters

Continue to improve the use of quality metrics to drive improvements in patient care

## Patient Safety

We will focus on safe staffing including reducing the movement of staff between clinical areas

We will implement our Patient Safety Incident Response Plan

We will improve the safety of patients with mental ill health in the acute setting

## Patient Experience

We will reduce the waiting times for patients

We will improve the experiences of people with a learning disability, mental health or autism

We will strengthen the carers passport within the Trust

## Staff Experience

We will improve the way we listen, act upon and learn from concerns

We will implement the Just Culture programme

We will increase staff engagement

Thank you

Any questions?

