

ITEM: 09/105
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MEETING:

Trust Board 15th July 2009

TITLE:

Chief Executive's Report

SUMMARY:

The CEO report updates the Board on key issues that do not warrant at this stage a full board paper.

ACTION:

Information

REPORT FROM:

David Sloman, Chief Executive

1. Annual Patient Environmental Action Team

Every year the NHS carries out a national survey into the patient environment, patient food, and patient privacy and dignity. The survey is carried out by teams drawn from trust staff, external auditors from other trusts, and patient representatives. It takes place over an eight hour period and records what is seen on the day from a patient's perspective. The results from the National survey are as follows;

	Excellent	Good	Acceptable	Poor	Unacceptable
Environment	302 (24%)	761 (60%)	190 (15%)	9 (1%)	3 (< 1%)
Food	688 (58%)	437 (37%)	62 (5%)	2 (<1%)	1 (< 1%)
Privacy and Dignity	551 (44%)	634 (50%)	77 (6%)	1 (< 1%)	2 (< 1%)

For the financial year 2008/9 we achieved a "good" rating in each of the categories.

For food, the trust failed to achieve an excellent rating by only one mark. This was because the menu packs on the wards were not laminated, were not printed in more than one language and did not detail the choice of ethnic meals on offer. This has now been addressed, and all other things being equal, it should be possible to achieve an excellent score in the 2009/10 audit.

For privacy and dignity, the trust was close to achieving an excellent rating. The work currently underway to improve privacy and single sex accommodation within the Great Northern Building, and the introduction of patient kimonos should enable the trust to achieve an excellent score in the 2009/10 audit.

For the environment, the trust achieved a 'good' rating. The view of the PEAT auditors was that where there is good leadership and ownership there is a demonstrable difference in the feel of the environment, compared with those areas where leadership is lacking. It was noticeable in some outpatient clinics that there was an air of weariness and clutter that had not been dealt with. To address this the Director of Nursing and Clinical Development and the Director of Facilities undertake regular monthly audits with the leadership community in outpatients in order to raise awareness and promote a positive impact on the environment. Capital has been earmarked to improve functional suitability and quality of the environment in order to support managers in more effectively organising these areas. It is judged that it should be possible to move to an excellent rating in this category within 2 years.

For further information contact Philip Ient, Director of Facilities, on 020 7288 5560.

2. Ofsted inspection of progress into the provision of safeguarding services in Haringey

Haringey Social Services were reinspected by Ofsted at the beginning of June, as a six month follow-up from the inspection in 2008 in response to the death of baby Peter. The report was published on 3 July, and noted that limited progress had been made since the first inspection. The overall judgement states:

“It is only six months since the last inspection and although progress can be seen in some areas, the council and its partners have made limited progress overall in addressing the areas of weakness identified in the November 2008 joint area review. Progress is evident in some important areas, such as in developing strategic partnerships. However, overall this progress is limited particularly in relation to improving key aspects of front-line social work practice and management oversight. The timeliness and quality of decision making at the referral and initial assessment stages and the quality assurance processes in place to support those taking these decisions remain inconsistent and insufficiently robust. These concerns are exacerbated by the serious capacity issues of the council and some of its partners.”

Senior staff from the Whittington are working with health and social care colleagues in Haringey to support delivery of the action plan that was put in place after the first inspection.

For further information contact Deborah Wheeler, Director of Nursing and Clinical Development on 020 7288 3589.

3. Universal checking of child protection plans

Board members will recall that NHS London had required all trusts to check every child attending an Emergency Department against the list of children subject to child protection plans.

The trust's named doctor for child protection does not support this approach. Neither does the designated doctor of child protection in Islington, nor the Islington Safeguarding Children Board, both of whom have now written to NHS London asking for further clarification of the purpose of this policy.

The Whittington has not introduced universal checking of children attending the Emergency Department. Copies of the lists of child protection plans are held for the London Boroughs of Islington, Haringey and Camden. Of the 20,000 children who attend the Whittington ED annually, approximately 70 are on the lists of children subject to a child protection plan. 25% of the children who attend the ED are resident in London boroughs other than the three for whom copies of the lists are held.

For further information contact Deborah Wheeler, Director of Nursing and Clinical Development on 020 7288 3589.

4. Swine flu

On 11 June, the World Health Organisation (WHO) raised its alert level to 6, recognising that swine flu (influenza A H1N1) has spread to pandemic levels. The virus is increasingly widespread in the UK and is expected to continue to spread rapidly.

The Department of Health has written to all trusts outlining the requirements for every board to ensure that organisational focus and resources devoted to this work are sufficient, given the prospect of a sustained second wave of cases of up to five months duration. In this context all NHS Boards are required to:

1. Appoint a full time director level lead dedicated to flu preparedness and resilience with immediate effect. For the Whittington, this will be Deborah Wheeler, Director of Nursing & Clinical Development, supported by Dr Julie Andrews, Director of Infection Prevention & Control.
2. Stress-test pandemic preparedness plans to ensure that the provision of high quality care can be maintained
3. Understand and test capacity constraints that may be caused through increased demand and workforce sickness absence
4. Engage in discussion with trade unions about a staff vaccination programme and wider communications to and support for staff
5. Build on existing relationships with local partner agencies to ensure that their role, channels of communication and ways of working during any second, sustained wave are clear
6. Support the sentinel surveillance system on patients hospitalised with swine flu which will be used to provide advice on clinical management.

A working group to oversee this programme of work will be established within the next two weeks, chaired by the director of nursing & clinical development. The trust already has flu pandemic plans in place, and these will form the basis of the work programme.

For further information contact Deborah Wheeler, Director of Nursing and Clinical Development on 020 7288 3589.

5. Care Quality Commission assessment and registration in 2009/10

New registration standards for all health and adult social care providers are being introduced from April 2010 and will apply to NHS trusts for the first time. The existing core standards are being replaced by new registration requirements.

CQC has begun a consultation on the draft guidance for compliance with the new registration requirements which runs until 24 August. The document can be found at www.cqc.org.uk

As part for the submission against the new registration requirements, the core standards assessment for 2009/10 will be based on a mid-year declaration in November 2009, for which detailed guidance will be published in August. This will be followed by the registration submission in January 2010. CQC will undertake checking of the submissions in February, with selected inspections of trusts in February/March. Confirmation of registration, or any conditions imposed on a trust's practice will be published at the end of March.

For further information contact Deborah Wheeler, Director of Nursing and Clinical Development on 020 7288 3589.