

Report of the Quality and Patient Safety Committee 18th November 2011

- 1.0 Introduction
- 2.0 Quality and safety Priorities
- 3.0 Quality and Patient Safety Performance Management
 - 2.1 Quality and Safety Dashboard
- 4.0 Women, Children & Families Divisional Quality and Safety Bi-Annual Report
 - 4.1 Quality and Safety
 - 4.2 Patient Experience
 - 4.3 Child Protection Committee report
- 5.0 Serious Incident Trend Report
- 6.0 Deteriorating Patient Report
- 7.0 NHSLA
- 8.0 CQC Visit
- 9.0 Patient Complaint – Radiology Department
- 10.0 Policies Approved

1.0 Introduction

1.1 The Quality and Patient Safety Committee met for the third time on Friday 18th November 2011. This report provides a summary of key items discussed and decisions made. It also provides a summary of key indicators and narrative on development of the Quality Dashboard.

2.0 Quality and Patient Safety Committee Work areas

2.1 The Quality and Patient Safety Committee covers three main domains, Safety, Clinical Effectiveness and Patient Experience. The Committee's programme of work is appended at (**Appendix 1**). Each of these quality dimensions will be explored in depth through a cycle of reporting and bi-annual in depth quality meetings with each Division.

2.2 The Committee has identified the following hotspot areas as areas where there is concern about quality, patient safety and patient experience – derived from reports to the committee since its inaugural meeting in September 2011: These include:

2.2.1 Maternity Services: in particular the consequences of a sub-optimal care environment

2.2.2 District Nursing: reflected particularly in the incidence of Grade 3 and 4 pressure ulcers in Haringey and pointing to concerns around management arrangements and ways of working in this service

2.2.3 HMP Pentonville Healthcare: inherent in the high risk population served

2.2.4 Emergency Department: reflected in poor performance against targets, low staff morale following a review of staffing levels, trends of poor performance in nursing audits and a high number of complaints

2.2.5 Children's Services, to include Health Visiting, School Nursing and Child Protection: recent high turnover of medical staff in Haringey and a number of Islington cases are being heard in the High Court in October, November and December.

2.3 The November 2011 meeting identified the following issues which have been highlighted across a number of service areas from audit reports, score cards and dashboards

2.3.1 Achievement of NHSLA Level 1 where progress is encouraging but the risks of failure to achieve are significant

2.3.2 Falls – noting the committee's appreciation of work done in this area

2.3.3 Mandatory training – raised more than once in this forum and being monitored by Audit Committee and managed by Executive Committee.

The following reports were presented to the Committee at its meeting on Friday 18th November 2011.

3.0 The Quality and Safety Dash Board (Appendix 2)

3.1 The Assistant Director of Program and Planning presented a progress report of the Trust dashboard. The committee was assured that work is currently in hand to ensure that by the December meeting:

- All the cells in the dashboard would be populated
- Divisions would provide narrative to explain performance and provide assurance on actions where appropriate

- data would be presented to reflect the quality performance of community services in the key domains .

3.2 The Medical Director commended staff on achieving lowest the Summary Hospital Mortality Indicator (SHMI) in the country.

3.3 The dashboard and ward dashboards highlighted issues in relation to the rate of falls being experienced by patients across a number of wards in the hospital and it was agreed that the working group established to devise an action plan focusing on reducing falls would be invited to report on progress at a future meeting of the Committee.

4.0 Divisional Report - Women, Children & Families

4.1 The November 2011 committee was attended the Deputy Director of the Division and the Head of Midwifery from the Division of Women, Children & Families. The committee noted that the Division highlighted the difficulty in obtaining comprehensive and up-to-date data.

4.2 The key areas discussed were as follows:

4.2.1 Quality and Safety

- The Maternity service has recently received a visit by the London Supervisory Authority (LSA). The feedback from the audit, which included interviews with staff, mothers and partners was on the whole very positive. With a few areas highlighted for improvement.
- Maternity services will be assessed for CNST Level 2 in March 2012 and the committee was assured that the service was on track to achieve the standard.
- Whilst the service has a significant number of post partum hemorrhages the Head of Midwifery confirmed that the Trust was not an outlier and that the recent improvement in the quality of investigations had been noted by NHS London. It was noted that a report analyzing and benchmarking the number of Serious Incidents in Maternity services across hospitals in North Central London is imminent
- The committee was informed of the forthcoming closure of the obstetric theatre in late November to enable ventilation work to take place and that this would require use of one of the main hospital theatres for a period of approximately three months. The lack of labour ward capacity and the imminent work has been placed on the Division's risk register.

4.2.2 Challenges

The committee noted that the Division is currently dealing with the following challenges

- a recent increase in turnover of Medical staff within Haringey children's services
- vacancies in Health Visitor services – Difficulties being experienced in recruiting to vacant posts
- the impossibility of predicting demand and consequent capacity pressures in maternity

- the lack of data for the division due to ESR not currently reflecting the new division
- the forthcoming closure of the obstetric theatre.

4.2.3 Patient Experience

- The Head of Midwifery (HOM) informed the committee that improvements had been made to wards within the labour unit and that this was reflected in the increase in the number of compliments received.
- The number of complaints about maternity services has reduced and the improvement in meeting the responses deadlines is evident in Q2 PALs and Complaints data to be presented to the Committee in December 2011. The HOM reported that this has been achieved in part by the introduction of a local tracker system and senior clinicians 'walking the floor' on a daily basis.
- The committee agreed that the key to improving the experience of mothers and partners was ensuring getting the basics right including privacy, dignity and ensuring courtesy and friendliness.

4.3 Child Protection Committee report Appendix 3

- 4.3.1** The Lead Nurse for Child Protection presented the Child protection Committee report which consists of three parts (Whittington Hospital, Islington Community Services and Haringey Community Services) and explained that the ICO would be required to continue to produce the report in this format. Committee members asked to advise if any additional information they felt should be provided.
- 4.3.2** The committee noted that two of members of the Child Protection team had recently provided notice of their intention to retire in March 2012. it was noted that recruitment to these posts had been successful with the new recruits commencing in post in early march 2012.
- 4.3.3** The Lead Nurse for Child Protection advised the committee that currently there are problems in receiving information to populate the Child Protection Assurance Score Card. This means that the Trust cannot provide assurance that key performance indicators such as the number of staff trained in the different levels of Child Protection Training are being met. If this problem is not resolved the Trust will not be able to provide a declaration of compliance to NHSL as required in January 2012. If this issue is not resolved in the coming weeks it will be placed on the Divisional Risk Register, the Child Protection Risk register and the Corporate Risk Register.
- 4.3.4** It was noted that there are two inspections of Child Protection services expected in the immediate future:
- (i) The Announced OFSTED/CQC Inspection of Islington Child Protection Services
 - (ii) An Unannounced inspection of Child Protection Services in Islington Borough

4.4 Future Reports/Presentations

- 4.4.1** The committee thanked the Division for the very comprehensive and open presentation and suggested that the next bi-annual report gives more focus to

community services and reflects both on the overall current position in relation to quality and articulates the vision and strategy for quality improvement.

5.0 Serious Incident Trend Report (Appendix 4)

- 5.1** The committee was alerted to the fact that the organisation has been failing to meet deadlines for completion of investigations. Investigations and action plans had been held back in order to improve the quality of the investigations. NHS London has given formal feedback that the quality of the reports has improved significantly and the Governance team are confident that by the end of December 2011 the deadlines would be met. A number of intensive training courses have been provided for Divisional staff in Root Cause Analysis Methodology with the subsequent improvement in the quality of investigations being noted.
- 5.2** The Committee noted that all serious incidents needed to have action plans, and whilst it was not felt necessary to bring them all to this Committee (they do go to the Patient Safety Committee), members did need assurance they were all in place and being acted upon. This assurance was given. The Medical Director advised that for the next number of months she will be chairing the patient safety Committee and will be focusing on the completion of action plans and holding divisions to account for this.
- 5.3** The committee agreed that a patient safety report from each division to include evidence of the learning would be helpful as part of the future presentations to the Committee.
- 5.4** The committee noted that the rate of hospital and community acquired pressure ulcers was being monitored by the Patient Safety Committee and Executive Serious Incident Review Panel.

6.0 Deteriorating Patient Report

- 6.1** The committee was updated on the positive progress that had been made with the Deteriorating patient Work stream. It was felt that its success was at least in part attributable to the wholesale commitment of staff (led by ward 'champions'). The committee congratulated the staff involved and agreed with the suggestion that it was cited in the public board report as an excellent piece of work. The Medical Director added that it should also be included in the organisation's Quality Accounts.

7.0 NHSLA

- 7.1** The committee was informed that the NHSLA Inspector had paid an informal visit to Whittington Health on 11 November 2011. Good progress towards updating and scrutinising all policies was being made, and it looks at present as though the deadlines will be met albeit with a very concerted effort. The committee noted that clarification is required in relation to the 'transfer of patients' policy in the context of an ICO. However, the project team are working with the NHSLA to resolve this.
- 7.2** The NHSLA Project Board chaired by the Director of Nursing and Patient Experience continues to closely monitor progress and reports to the Executive Committee weekly on progress.

8.0 CQC Visit

- 8.1** The Assistant Director of Nursing and Patient Experience reported on the CQC visit which had taken place on 20th and 21st October. The committee were informed that the verbal feedback delivered had been largely positive, albeit with some areas for improvement being identified (mainly environmental). She advised that further information on some areas had been requested. One altercation had occurred whilst the visit took place, but it had been recognised that this was an isolated case and not indicative of any underlying long-term problem. The committee noted that the Trust had been informed by CQC that written feedback would be received within the next couple of weeks