Lincolnshire COUNTY COUNCIL Working for a better future		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE	
Boston Borough	East Lindsey District	City of Lincoln	Lincolnshire County
Council	Council	Council	Council
North Kesteven	South Holland	South Kesteven	West Lindsey District
District Council	District Council	District Council	Council

Open Report on behalf of Richard Wills, the Director Responsible for Democratic Services

Report to	Health Scrutiny Committee for Lincolnshire	
Date:	23 July 2014	
Subject:	Quality Accounts 2014	

Summary:

Every year each provider of NHS-funded services is required to prepare a *Quality Account*, which includes the provider's priorities for the coming year; progress with priorities for the previous year; and other prescribed information. The Health Scrutiny Committee is one of the organisations entitled to submit a statement on the draft *Quality Account* of each local provider. This report provides the Committee with information on the Quality Account statements, which were prepared on the Committee's behalf during April, May and June 2014. In four instances, joint statements were prepared with Healthwatch Lincolnshire, with a further four statements prepared on behalf of the Health Scrutiny Committee alone.

Actions Required:

(1) To note the statements on eight Quality Accounts, relating to providers of local NHS-funded services.

1. Quality Accounts 2014

<u>Legislative Requirements</u>

Since 2010, each provider of NHS-funded services has been required to prepare an annual document entitled the *Quality Account*, which has to include:

- three or more **priorities for improvement** for the coming year;
- an account of the progress with the priorities for improvement in the previous year; and

- details of:
 - the types of NHS funded services provided;
 - any Care Quality Commission inspections;
 - any national clinical audits;
 - any Commissioning for Quality and Innovation (CQUIN) activities;
 - general performance and the number of complaints; and
 - mortality-indicator information.

Each provider also has to share their draft Quality Account with: -

- their local Health Overview and Scrutiny Committee;
- their local Healthwatch Organisation; and
- their relevant Clinical Commissioning Group (defined as the Clinical Commissioning Group with "the largest number of persons to whom the provider has provided relevant health services during the reporting period").

Each one of the above is entitled to prepare a statement of up to 1,000 words in length, which has to be included in the final published version of the *Quality Account*.

Arrangements for 2014

On 19 March 2014, the Health Scrutiny Committee agreed that it would make statements on the following eight *Quality Accounts* for 2013-2014 from local providers:

- Boston West Hospital (Ramsay Healthcare)
- East Midlands Ambulance Service NHS Trust
- Lincolnshire Community Health Services NHS Trust
- Lincolnshire Partnership NHS Foundation Trust
- Northern Lincolnshire and Goole NHS Foundation Trust
- Peterborough and Stamford Hospitals NHS Foundation Trust
- St Barnabas Hospice
- United Lincolnshire Hospitals NHS Trust

The Committee established a joint working group with Healthwatch Lincolnshire to prepare joint statements on each Quality Account. The joint working group prepared four of the eight statements. The remaining four statements were submitted on behalf of the Health Scrutiny Committee alone.

The eight Quality Accounts listed above totalled 540 pages in length, and contained approximately 150,000 words. Owing to national requirements on what should be included, the Quality Accounts were generally longer this year than in previous years, and providers were generally requesting statements on their Quality Accounts in a shorter time period. For this reason, it was not always possible for the working group to meet and compile a joint statement.

Final Version of the Quality Accounts

The final versions of the full Quality Account documents are available at the following website links:

Boston West Hospital (Ramsay Healthcare) http://www.bostonwesthospital.co.uk/pdf/QA%2013%2014%20BWH%20Fin

al.pdf.

East Midlands Ambulance Service NHS Trust http://www.nhs.uk/Services/Trusts/Overview/DefaultView.aspx?id=29233

Lincolnshire Community Health Services NHS Trust http://www.nhs.uk/Services/Trusts/Overview/DefaultView.aspx?id=29671

Lincolnshire Partnership NHS Foundation Trust http://www.nhs.uk/Services/Trusts/Overview/DefaultView.aspx?id=2730

Northern Lincolnshire and Goole NHS Foundation Trust http://www.nhs.uk/Services/Trusts/Overview/DefaultView.aspx?id=1726

Peterborough and Stamford Hospitals NHS Foundation Trust http://www.nhs.uk/Services/Trusts/Overview/DefaultView.aspx?id=2008

St Barnabas Hospice

http://www.nhs.uk/aboutNHSChoices/professionals/healthandcareprofessionals/quality-accounts/Pages/quality-accounts-2013-2014.aspx

United Lincolnshire Hospitals NHS Trust http://www.nhs.uk/Services/Trusts/Overview/DefaultView.aspx?id=1990

2. Conclusion

The Committee is invited to note the statements on the eight Quality Accounts from local providers of NHS-funded services.

3. Consultation

The Health Scrutiny Committee is one of the three statutory organisations (as cited in the *National Health Service (Quality Accounts) Regulations 2010*, as amended), to whom providers of NHS-funded services are required to submit their draft Quality Account.

4. Appendices – These are listed below and attached at the end of the report.

Appendix A	Boston West Hospital – Statement by the Health Scrutiny Committee for Lincolnshire on Quality Account.
Appendix B	East Midlands Ambulance Service NHS Trust - Statement by the Health Scrutiny Committee for Lincolnshire on Quality Account.
Appendix C	Lincolnshire Community Health Services NHS Trust – Joint Statement the Health Scrutiny Committee for Lincolnshire and Healthwatch Lincolnshire on Quality Account
Appendix D	Lincolnshire Partnership NHS Foundation Trust - Joint Statement the Health Scrutiny Committee for Lincolnshire and Healthwatch Lincolnshire on Quality Account
Appendix E	Northern Lincolnshire and Goole NHS Foundation Trust - Joint Statement the Health Scrutiny Committee for Lincolnshire and Healthwatch Lincolnshire on Quality Account
Appendix F	Peterborough and Stamford Hospitals NHS Foundation Trust - Statement by the Health Scrutiny Committee for Lincolnshire on Quality Account.
Appendix G	St Barnabas Hospice Trust - Statement by the Health Scrutiny Committee for Lincolnshire on Quality Account.
Appendix H	United Lincolnshire Hospitals NHS Trust - Joint Statement the Health Scrutiny Committee for Lincolnshire and Healthwatch Lincolnshire on Quality Account

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

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Statement on Boston West Hospital's *Quality Account* for 2013/14

This statement has been prepared by the Health Scrutiny Committee for Lincolnshire.

Progress on Priorities for 2013-14

We are pleased with the progress by Boston West Hospital on its priorities for 2013-14, in particular its participation in the dementia screening programme and the outcomes of the Patient-Led Assessment of the Care Environment.

Priorities for 2014-15

We support Boston West Hospital's priorities for 2014-15, and look forward to progress on these priorities leading to improvements in the patient experience and patient safety.

Engagement with the Health Scrutiny Committee

Three members of Health Scrutiny Committee visited Boston West Hospital in 20 January 2014. They found the visit a positive experience and the member of the Committee who wrote the report of the visit said: "The hospital is a happy, clean, well run environment where I would feel very happy to receive treatment."

The report is set out below:

"Sue Harvey, the Matron, and Heather Emmerson, the Liaison Officer, gave us a guided tour of the hospital and explained that Ramsay Health Care had taken over the hospital from Capio, and changed the name last year to Boston West Hospital.

- Ramsay Health Care have hospitals in Australia, France and a sister hospital (The Fitzwilliam) in Peterborough, with others across England.
- They offer NHS-funded and private health care.
- Day Case only services are commissioned by the CCGs and NHS, 95% by the 'Choose and Book' system.
- They offer consultant-delivered care, short waiting times (4 6 weeks), and a choice of time and date.
- All patients are assessed to make sure they are suitable for day case surgery.
 Not all patients are suitable.
- If necessary a patient could be transferred to Pilgrim Hospital for critical care one case in the past five years.
- Boston West mainly performs orthopaedic and ophthalmic surgery, but also offers some urology, gynaecology and pain management services. Boston West also provides General Surgery and Gastroenterology Services.
- MRI diagnostic imaging is on a Friday.

Consulting Rooms

- Hand sanitisers are available and are used by staff and patients, outside every door.
- There are five outpatient consulting rooms and one nurse in attendance.
- Nurses room at end of corridor.
- Reasonably bright and comfortable, two of the five rooms have a window.
- The consultant and staff on duty seemed happy with the system.

Autoclave (Sterilising Unit)

- Surgical items from both the Fitzwilliam and Boston West are sterilised on site.
- All items are scanned in and can be tracked from source.
- All items are sterilised, packed and then steamed at high temperature.
- Distributed back to source and good for up to a year if unopened.

<u>Surgery</u>

- 200 250 patients per month receive services from the day hospital.
- Two admission bays.
- Surgery is on a rolling basis, patients arriving every half hour or so.
- Patient lockers accessible from two sides.
- There is one operating theatre, with full time anaesthetist in attendance.
- All procedures follow the NICE and day surgery guide lines.
- 2 bed recovery bay with one to one nursing.
- 45 minutes 1 hour in recovery bay, then into a recliner prior to leaving.
- 24 hour help line available once a patient has been discharged.
- A knee surgery patient: in by 7.30am, in theatre by 8am, home before 11am.

Staffing

- Staff are recruited from the area.
- Staff are able to gain wide experience and progress within Ramsay Health.
- They have a customer excellence award system, Bronze, Silver and Gold,
- Assessment forms are given to patients, to help assess the patient journey.

General Comments

- The hospital is a happy, clean, well run environment where I would feel very happy to receive treatment.
- There are well qualified experienced surgeons and staff."

Achievements

We congratulate Boston West Hospital on the following achievements during the last year:

- the high cleanliness rating from Patient-Led Assessments of the Care Environment;
- the absence of any MRSA infection (making a total of three years without MRSA);
- the introduction of a new procedure in colo-rectal surgery; and
- the 99% patient satisfaction score.

Conclusion

We are grateful for the opportunity to make a statement on Boston West Hospital's Quality Account. We congratulate the Hospital on its improvements and achievements during the last year. The Committee would like to continue maintaining links with the Hospital during the coming year.



Statement on East Midland Ambulance Service Trust's *Quality Account* for 2013/14

This statement has been prepared by the Health Scrutiny Committee for Lincolnshire, which scrutinises and reviews NHS-funded health services in the administrative county of Lincolnshire.

Performance During 2013-14

The Health Scrutiny Committee for Lincolnshire notes the improvements arising from the Trust's priorities for 2013-14. In relation to Priority 1 (Improving Cardiac Arrest Outcomes), the Committee notes that a number of actions have taken place, but would like to see the results of these actions quantified in actual improvements in the number of patients who experienced a 'Return of Spontaneous Circulation' following a cardiac arrest.

Priorities for 2014-15

The Health Scrutiny Committee for Lincolnshire strongly supports the inclusion of Priority 4 (Improving Ambulance Response Times) and the proposed measures to bring about these improvements. However, we would request clarity whether national response times will be delivered at Trust, Divisional or Clinical Commissioning Group level. We are pleased that this priority includes working with Clinical Commissioning Groups to reduce the number of instances elderly patients in care homes may be conveyed to hospital unnecessarily. The importance of working with Clinical Commissioning Groups is also reflected in Priority 1 (Equity of Access to Stroke Care and Reducing Unplanned Admissions), which we also support.

Clinical Commissioning Groups

We are pleased that the Lincolnshire Division of the Ambulance Service has worked closely with the four Clinical Commissioning Groups in Lincolnshire to improve its services and we commend the Trust for its initiatives such as the emergency care practitioner assessment unit; the cycle response unit in Skegness; and dedicated crews to convey patients referred by GPs.

Engagement with the Health Scrutiny Committee for Lincolnshire

We are pleased that senior managers from the East Midlands Ambulance Service prepare reports for and regularly attend meetings of the Health Scrutiny Committee for Lincolnshire. During the current year, the Committee will be holding four-monthly performance monitoring sessions, which will enable the Committee to seek reassurance that the Ambulance Service is seeking to improve its services to Lincolnshire residents.

The Committee recognises the efforts made by the Trust to engage with the wider public and the staff. The Committee supports these efforts, and looks forward to this continuing during 2014/15, throughout all parts of the EMAS area.

Being the Best

In August 2013, the Secretary of State for Health accepted the advice of the Independent Reconfiguration Panel and decided not to proceed to a full review of the Ambulance Service's *Being the Best* initiative, which had been the subject of a referral to the Secretary of State by the Health Scrutiny Committee for Lincolnshire. The *Being the Best* initiative related to the proposed reconfiguration of ambulance stations. The Health Scrutiny Committee did not accept the premise that *Being the Best* would lead to improved ambulance response times. For this reason, the Committee is pleased that the Trust is now changing its emphasis from delivering an estates strategy to improving services for patients, including ambulance response times, as part of its *Better Patient Care* programme.

Care Quality Commission Inspection

We are disappointed that the Care Quality Commission (CQC) found that the Trust was not compliant in four areas inspected in January 2014. We look forward to the Trust using its action plan to meet the requirements set by the CQC, so that it is compliant as soon as possible.

Conclusion

We look forward to continued engagement with the East Midlands Ambulance Service and note that response time improvements have been made in most of Lincolnshire. We also look forward to improvements in the South Lincolnshire Clinical Commissioning Group area.



FOR LINCOLNSHIRE





HEALTHWATCH LINCOLNSHIRE

Statement on Lincolnshire Community Health Services NHS Trust Trust's *Quality Account* for 2013/14

This statement has been prepared jointly by the Health Scrutiny Committee for Lincolnshire and Healthwatch Lincolnshire.

Priorities for 2014-15

The Health Scrutiny Committee for Lincolnshire and Healthwatch Lincolnshire support the Trust's seven priorities for 2014-2015. We understand that these priorities have been selected from a longer list and represent the areas on which the Trust would like to focus in the coming year.

We congratulate the Trust in presenting its targets for each of these priorities in the form of actual numbers, as well as percentage figures. This provides clear information to members of the public on what the Trust is aiming to achieve. We would like to suggest that the Quality Account make clear whether the each priority applies to community hospitals or staff working in the community, or both.

The priority to *Increase Patient Facing Time Through "Time to Care"* is welcomed, but we recognise that travelling around a rural county such as Lincolnshire presents a challenge to staff in terms of maximising patient contact time. We look forward to progress on this priority. We would like to stress the importance of meaningful patient contact time, with staff giving each patient as much attention as possible.

We strongly support the priority to *Reduce Harm from Falls in Community Hospitals*. We note the work in hand to address the causes of harmful falls.

We note that the target for *Reducing Medication Errors Resulting in Harm in Community Hospitals* is 10% for all medication errors, compared to a target of 25% for medication errors causing harm. We note that most medication errors do not cause harm to patients. However, we would like the 10% reduction target to be set higher, if this is possible. We would like to emphasise that the inappropriate use of abbreviations, poor handwriting and the need for translation, are all areas that could help reduce errors in medication.

We understand that the priority for the *Reduction of Pressure Ulcers* applies to patients in both community hospitals and under the care of the Trust's staff in the community. We are pleased to see the 50% target being applied to Grade 3 and Grade 4 pressure ulcers. Achieving this target will lead to significantly improved outcomes for patients and we look forward to the Trust making progress in this area.

For the *Friends and Family (Net Promoter)* priority, we made a comment on the draft Quality Account that we would like to see the targets for a 15% sample size from service

users and a 75% positive rating for the Trust also expressed in the actual number of patients. We also suggested that consideration be given to a larger sample size than 15%.

We note that the *Safe Staffing Levels* priority for community hospitals will be based on Royal College of Nursing guidelines and the Trust was devising a formula for determining the number of staff in the community.

Progress on Priorities for 2013-14

We would like to compliment the Trust with its progress on its 2013-2014 priorities, which has included progress with the delivery of outcome measures for core community services; and improvements to clinical record keeping.

In relation to the priority on the *Elimination of Pressure Ulcers*, we accept that there has been a 25% reduction overall, but this had not been as good as intended. As stated above, we support the 50% target for a reduction in Grade 3 and Grade 4 pressure ulcers during the coming year. We also note that the Trust has been providing training to residential and care homes on how to reduce the incidence of pressure ulcers.

We are saddened to hear that there was one death as a result of a fall in one of the wards at Johnson Hospital during the last year. We have been advised of the action taken by the Trust in response to this, for example reviewing the staffing levels and practices on the ward in question.

Engagement

The Health Scrutiny Committee has received information from the Trust during the last on its contribution to End of Life Care in Lincolnshire. For the coming year, the Committee would like to engage with the Trust, in particular on its contribution to the Lincolnshire Health and Care programme.

Healthwatch Lincolnshire has established communication channels with the Trust and plans to carry out 'Enter and View' visits to the Minor Injury Units at Skegness Hospital and John Coupland Hospital, Gainsborough in the coming year.

Conclusion

We are grateful for the opportunity to make a statement on the Trust's draft Quality Account. Both the Health Scrutiny Committee for Lincolnshire and Healthwatch Lincolnshire will be seeking more engagement with the Trust during the coming year on the progress with its priorities.





Statement on Lincolnshire Partnership Foundation Trust *Quality Report* for 2013/14

This statement has been prepared jointly by the Health Scrutiny Committee for Lincolnshire and Healthwatch Lincolnshire.

Priorities for 2014-15

The Health Scrutiny Committee for Lincolnshire and Healthwatch Lincolnshire support the Trust's nine priorities for 2014-15 and the rationale for their inclusion, which builds on the Trust's Quality Principles. In delivering these priorities, the Trust will need to balance the declining availability of NHS resources, which is being addressed in part by the Lincolnshire Health and Care Programme, with the need for continuing high quality patient services.

We also acknowledge the involvement of patients and carers in the development of these priorities, as well as Healthwatch Lincolnshire.

As the Trust delivers these priorities in the coming year, we would like to emphasise that their application to both functional and organic patients. We also appreciate that proposals should be brought forward in the coming year, to address the issue of older adult organic and functional inpatients being treated on the same wards.

Priorities for 2013-14

We welcome the Trust's progress with its priorities for 2013-14. In particular, we would like to highlight the Trust's launch of a new Hospital Intensive Psychiatric Service at Lincoln County Hospital, and the county wide implementation of the Single Point of Access, as well as the reorganisation of the adult community mental health teams.

We would also like to highlight the "Safety Thermometer, which includes initiatives to reduce the number of falls of frail patients, as well as aiming to reduce the number of pressure ulcers.

Commissioning – Lincolnshire Health and Care Programme

The Lincolnshire Health and Care Programme will be aiming to ensure that the anticipated funding gap of £105 million in 2018 across health and social care in Lincolnshire will be addressed. We would like to see the continued involvement of the Trust with the commissioners of NHS funded services on the development and implementation of the Programme. We cite the proposed introduction of neighbourhood teams as one key element in the Programme, which we support.

Friends and Family Test

We note that the Friends and Family Test is of growing importance in measuring patient satisfaction, and that the Trust's performance is detailed in sections 2b.7, 2b.8 and 2b.9 of the Quality Report. We emphasise the importance of seeking higher levels of Friends and Family Test comments from patients and the inclusion of information on the number of patients responding to the FFT, in the context of the overall number of patients treated.

Francis Report

In 2013, we highlighted the importance of the Francis Report and asked providers how they were going to respond to the recommendations from the Francis Report We are therefore pleased to note that the Trust has completed 90 of the recommendations from the Francis Report, with a further 18 being implemented.

Awards and Achievements

We commend the Trust on its awards and achievements during the last year, which are detailed in section 3.8 of the report, which included the Trust being compliant with all Care Quality Commission inspections. We note that the Trust is benchmarked with other mental health trusts and that this benefits the Trust in seeking to learn and improve its services.

Conclusion

In terms of the overall content of the Quality Report, we recognise that the Trust has to balance the requirements in the regulations and guidance, with the need to make the document accessible to the public. In this regards, we suggest that there is an executive summary of the key elements, such as the Trust's priorities, and how they directly benefit patients, their families and carers.

The Health Scrutiny Committee and Healthwatch Lincolnshire look forward to continuing engagement with the Trust, and its continued improvement in the services provided to patients. The Health Scrutiny Committee will be considering how to focus on the priorities for the coming year as part of its work programme.





HEALTHWATCH LINCOLNSHIRE

Statement on North Lincolnshire and Goole NHS Foundation Trust Quality Account for 2013/14

This statement has been jointly prepared by the Health Scrutiny Committee for Lincolnshire and Healthwatch Lincolnshire.

The Health Scrutiny Committee for Lincolnshire and Healthwatch Lincolnshire welcome the opportunity to make a statement on the Quality Account for Northern Lincolnshire and Goole NHS Foundation Trust. It is the first time that each body has made a statement on the Trust.

Progress on Priorities for 2013-14

We commend the Trust where it has met its targets for last year's priorities, for example, the National Early Warning Score, reducing falls, and reducing pressure ulcers. We also note the Trust's progress in reducing the levels of mortality to within the 'expected range'.

Priorities for 2014-15

We support the Trust's 22 priorities for improvement in the coming year, and recognise that in most instances these priorities build on the previous year's progress, with more onerous target being set by the Trust, which we commend. We also note that the priorities and the relevant targets have been developed in discussion and agreement with patient focus groups, professionals and governors. We are pleased that that routine monthly monitoring of the priorities takes place and information on progress is accessible via the internet.

We would like to highlight the following priorities in particular:

- elimination of all repeat falls We acknowledge the Trust's progress in this
 area to date, and feel that this is very important for patients.
- a 50% reduction in pressure ulcers We recognise that some patients are admitted with pressure ulcers, but we strongly believe that pressure ulcers should not be acquired while a patient is in hospital.

Presentation and Content

We acknowledge that the regulations and guidance make the Quality Accounts far too onerous for a lay person to read. For this reason, we suggest an 'at a glance summary' to help members of the public. We also suggest that where possible actual numbers are used, rather than percentages, as this would also make the document more accessible.

Francis Report

We welcome the Trust's commitment to taking forward the recommendations in the Francis Report and suggest that the Quality Account makes reference to the actions already implemented, in particular those directly affecting patient care and experience, as well those actions where further work is required.

Keogh Review and Care Quality Commission

We acknowledge the Trust's progress in meeting all the actions arising from the 'Keogh' inspection in June 2013. Furthermore, we also acknowledge that the Trust, as of December 2013, was compliant with all the actions requested by the Care Quality Commission.

Conclusion

The Health Scrutiny Committee for Lincolnshire and Lincolnshire Healthwatch are pleased to have had an opportunity to make a statement on the Quality Account, and congratulate the Trust on the progress and achievements in the last year. We strongly support the strengthening of priorities across all the three areas of clinical effectiveness, patient safety and patient experience.

We look forward to working more closely with Northern Lincolnshire and Goole NHS Foundation Trust in the future and seeing how their new priorities are realised in 2014-15. This is with specific recognition to the growing patient numbers from Lincolnshire Clinical Commissioning Groups accessing services at the Trust, which results in funds in excess of £24 million being invested in the Trust.



Statement on Peterborough and Stamford Hospitals NHS Foundation Trust

Quality Account for 2013/14

This statement has been prepared by the Health Scrutiny Committee for Lincolnshire.

During the last year, the Health Scrutiny Committee has engaged with Peterborough and Stamford Hospitals NHS Foundation Trust on the following three dates:

- 10 July 2013
- 23 October 2013
- 19 March 2014

In addition on 10 July 2013, members of the Committee visited Stamford and Rutland Hospital and were impressed by the quality of the provision there and the commitment of staff at the Hospital.

The Committee welcomed the invitation to attend the stakeholder event held by the Trust on 8 May 2014 to consider the first draft of the Quality Account. The Committee was duly represented at this event by one of its members. However, in view of the short time available to submit comments on the final draft of the Quality Account, it has not been possible for the Committee to consider the report in any detail. For example, the Committee cannot make any comment on whether it would support the Trust's priorities for 2014-2015.

The Health Scrutiny Committee for Lincolnshire would like to continue engaging with the Trust, particularly in relation to the quality of services provided to Lincolnshire patients. This is pertinent following the Care Quality Commission report on Peterborough City Hospital, published on 16 May 2014. The Committee would also like to be involved further on the plans for the development of services at Stamford and Rutland Hospital, which the Committee supports on the basis that they will lead to increased healthcare provision at the Hospital.

Finally, the Committee would like to emphasise that maintaining high quality services to patients remains its paramount concern and that this should not be overlooked at a time when the Trust is seeking to deliver on Cost Improvement Programme commitments to reduce its structural deficit.



Statement on St Barnabas's Quality Account for 2013/14

This statement has been prepared by the Health Scrutiny Committee for Lincolnshire.

Priorities for 2013-14

The Committee welcomes the Trust's progress with its three priorities for 2013/14. In particular, the Committee is pleased with the development of a six bed Hospice within a Hospital at Grantham and District Hospital, which we believe will be essential for the people in the surrounding area. We look forward to the Hospice within a Hospital opening in the coming year.

Priorities for 2014-15

We support St Barnabas's three priorities for improvement in 2014-15. We would like to emphasise our support for the development of specific measures to reduce pressure damage for palliative care patients. Achievement of this priority will clearly benefit patients and reflects one of the key themes for health care.

Engagement with the Health Scrutiny Committee for Lincolnshire

On 21 March 2014, four members of the Health Scrutiny Committee visited the St Barnabas Hospice In-patient Unit in Lincoln. The members of the Committee concluded that the visit was a very positive and encouraging experience, reinforced by open and honest conversations with staff, patients and relatives.

Here is the report of the visit:

"The St. Barnabas In-Patient unit is located in Lincoln and offers the following services:-

- Palliative Care Inpatient Unit
- Welfare Benefit Support and Advisory service
- Physiotherapy
- Occupational Therapy
- Lymphoedema Clinic
- Bereavement Support

"The Mission Statement is "St Barnabas provides specialist palliative and end of life care so that everyone can access and receive the support they need to live well and ease the process of dying."

"The unit is an 11 bed unit with two rooms of four beds (one for male patients and one for female patients) and three separate one bed rooms. The unit has a conservatory which includes a children's play area and has a television. There is a separate lounge from the main ward area. There is also a large balcony area overlooking the gardens.

"Admission to the unit is normally for a relatively short period of time, typically ten or eleven days during which time the patient is 'stabilised' before returning home. Care is integrated with an outreach team when the patient is at home, called 'Hospice at Home', which embraces physical needs, emotional needs, social support and spiritual support. This is supported by the Palliative Care Co-ordination Centre (PCCC), which is open 365 days a year at the Nettleham Road unit, 9am to 6pm Monday to Friday and 9am to 5pm Saturday and Sunday and Bank Holidays.

"Food is prepared from scratch in a kitchen on the premises. The range of choices is very wide, with the patient being served nutritious and tasty food.

"The hospice was very clean and staff were obviously happy in their work. Each shift has a nursing sister in charge wearing a navy blue uniform. It was said sight of this uniform was reassuring for patients and visitors.

"Visiting times are open with a recommended 'quiet time' of 14.20-15.30, as much to give visitors respite as patients.

"In terms of quality and governance St Barnabas are inspected by the Care Quality Commission (CQC) and as a charity is regulated by the Charity Commission. The most recent CQC report states that St Barnabas met all of the required criteria with many very positive comments from patients, relatives, staff and volunteers."

A representative from St Barnabas also attended the Health Scrutiny Committee in October 2013, as part of an item on palliative and end of life care.

We look forward to continuing engagement with the Committee in the coming year.

Presentation and Accessibility of Information to the Public

We believe that the Quality Account is well-presented and accessible to members of the public and provides a clear guide on the activities of the St Barnabas.

Care Quality Commission

We note that St Barnabas received an unannounced inspection from the Care Quality Commission on 10 January 2014 and we are pleased that St Barnabas was compliant with all the standards inspected. We congratulate St Barnabas on this achievement.

Conclusion

We would like to congratulate St Barnabas Hospice on its achievements over the last year, in particular the developments at Grantham and District Hospital and we look forwards to further achievements in the coming year.





HEALTHWATCH LINCOLNSHIRE

Statement on United Lincolnshire Hospitals NHS Trust's *Quality Account* for 2013/14

This statement has been jointly prepared by the Health Scrutiny Committee for Lincolnshire and Healthwatch Lincolnshire.

Priorities for 2014-15

The Health Scrutiny Committee for Lincolnshire and Lincolnshire Healthwatch support the Trust's five priorities for 2014-15 and accept the rationale and process for their selection. We would like to see targets for these priorities expressed in actual numbers, in addition to the percentage figures, as this would be clearer for the general public. For example, we would like the Trust to set a figure for the number of Friends and Family responses it would like to receive in the coming year.

On priority 1 (Learning from Feedback and Complaints), we urge the Trust to issue as many Friends and Family forms as possible, to increase the actual number of responses. We urge that that forms are always made available to patients in Accident and Emergency as well as to patients receiving elective care. We would also like the Trust to compare its response rate with other hospital trusts, as well as the answer to the question.

On priority 3 (*Reducing Errors in Medication*), we would like to emphasise that the inappropriate use of abbreviations, poor handwriting and the need for translation, are all areas that could help reduce errors in medication. The most important measure is to reduce the number of medication errors that cause harm or delay an improvement in the patient's health.

We note that by limiting the number of priorities to five, previous priorities, such as *Improving Safe Discharge* and *Reducing Healthcare Associated Infections*, have had to be omitted. We firmly believe that *Improving Safe Discharge*, including liaison with other NHS and community bodies, should remain as a key priority, as this will support the delivery of key elements in the Lincolnshire Health and Care programme.

Whilst we have been reassured by the Trust that it is not going to lose sight of *Improving Safe Discharge* and *Reducing Healthcare Associated Infections*, we would like to emphasise our view that these two initiatives should remain priorities for the Trust.

Review of Progress on Priorities for 2013-14

The Health Scrutiny Committee for Lincolnshire and Lincolnshire Healthwatch strongly supported the priorities for 2013-14. In relation to the *Reducing the Hospital Standardised Mortality Rate* priority, we are pleased that Trust has made good progress in reducing its mortality rate towards the national average figure and will no longer be considered a statistical outlier.

We are pleased the progress made with priority 4 (*Improving Safe Discharge*), with initiatives such as the planning for the discharge of the patient within 24 hours of admission; and piloting revised social worker arrangements at Pilgrim Hospital. We believe these initiatives will support the delivery of the Lincolnshire Health and Care Programme. As started above, we would like work on this priority to be carried forward into the coming year.

The targets for the priority to *Reduce Healthcare Associated Infections* have not been met, owing to 76 Clostridium Difficile and four MRSA infections being recorded. As stated above, we would not like the importance of reducing healthcare associated infections being lost.

CQUIN

The Health Scrutiny Committee for Lincolnshire and Lincolnshire Healthwatch are grateful to the Trust for presenting a draft version of the Quality Account to them. At the draft stage, we suggested that more detail should be included in the CQUIN [Commissioning for Quality and Innovation] section of the Quality Account.

Keogh Review

The Health Scrutiny Committee for Lincolnshire and Lincolnshire Healthwatch recognise that Trust has been focused during the last year in delivering its action plan in response to the Keogh Review, published in June 2013.

Engagement with the Health Scrutiny Committee and Healthwatch Lincolnshire

Senior managers from the Trust have attended the Health scrutiny Committee on a number of occasions during 2013-14, covering topics such as Nurse Recruitment;

In addition, in November and December 2013 members of the Committee visited Accident and Emergency and two wards at Lincoln County Hospital, and Pilgrim Hospital, Boston. A report of each of these two visits was passed to the Trust.

In February 2014, members of the Committee visited Grantham and District Hospital, to see the potential developments arising from the *Shaping Health for Mid-Kesteven* programme.

Healthwatch Lincolnshire undertook a programme of Enter and View visits during January 2014 at Accident and Emergency Departments at Grantham and District Hospital; Lincoln County Hospital; and Pilgrim Hospital, Boston. The outcomes of these visits were compiled into a report which made ten recommendations to the Trust. The Trust's full response will be available soon.

Conclusion

The Health Scrutiny Committee for Lincolnshire and Lincolnshire Healthwatch are pleased to have had an opportunity to make a statement on the Quality Account, and congratulate the Trust on its progress and achievements in the last year.