

## Minutes

of the Meeting of the

### Quality Accounts Sub-Committee

Monday, 20th April 2015

held at the Town Hall, Weston-super-Mare, Somerset.

Meeting Commenced: 10.00 a.m.

Meeting Concluded: 13:00 p.m.

#### Councillors:

P Robert Cleland

P Jill Iles

P Tom Leimdorfer

P Roz Willis

A Deborah Yamanaka

P Catherine Gibbons (Substitute for Deborah Yamanaka)

#### Co-opted Member:

A Georgie Bigg

P: Present

A: Apologies for absence submitted

**Health Colleagues in attendance:** Suzanna Howell, Anita Hutson (Avon and Wiltshire Mental Health Partnership NHS Trust); Sue James, Paul Cresswell (North Bristol NHS Trust); Gillian Hoskins (Weston Area Health NHS Trust); Helen Lockett, Rob Nichols (North Somerset Community Partnership); Martin Callow (South Western Ambulance Service NHS Foundation Trust)

**NSC Officers in attendance:** Leo Taylor (Corporate Services).

#### QAS Election of Chairman for the meeting (Agenda Item 1)

1

**Resolved:** that Councillor Roz Willis be elected as Chairman for the meeting.

#### QAS Declarations of Interest by Members (Agenda Item 4)

2

None

#### QAS Minutes of the Meeting held on 19<sup>th</sup> May 2014 (Agenda Item 5)

3

**Resolved:** that the minutes of the meeting be approved as a correct record.

#### QAS Avon and Wiltshire Mental Health Partnership NHS Trust – presentation (Agenda Item 6.1)

4

Representatives of the Trust gave a powerpoint presentation highlighting the key points of the Trust's Quality Account (QA). A copy of the presentation has been placed in the signed minute book.

In discussion, Members commented on the QA as follows:

- (1) the worst of the problems and challenges facing the trust appeared to be outside North Somerset;
- (2) the increased emphasis on early intervention and high accessibility was welcome;
- (3) Members were encouraged by the Trust's "whole system approach", working in partnership with services users, carers and other agencies to deliver integrated care in the best place at the best time – including the implementation of the "triangle of care" and the liaison with NSCP on care homes;
- (4) there appeared to be a very good understanding of what North Somerset communities needed;
- (5) the excellent Friends and Family survey results were very welcome as was the evidence that action at ward and team level was taken in response to this feedback; and
- (6) the Juniper Ward refurbishment was welcome as was the greater emphasis on the physical wellbeing of patients.

**Concluded:** that the Panel's comments be reviewed under Item 7 (Minute QAS 9 below) and form the basis of the formal response to the Trust.

## **QAS 5 North Bristol NHS Trust – presentation (Agenda Item 6.2)**

Representatives of the Trust gave a PowerPoint presentation highlighting the key points of the Trust's Quality Account (QA). A copy of the presentation has been placed in the signed minute book.

In discussion, Members commented on the QA as follows:

- (1) the large numbers of single bed wards were especially welcomed by Members. There were still concerns about the specialing of patients in the new ward layouts but Members noted the work being undertaken by the Trust to improve monitoring;
- (2) although Joint Scrutiny had flagged up many of the problems encountered in the move to the new hospital, there was a need to recognise the vast scale of this challenge and the considerable progress made;
- (3) Members felt that the stage had now been reached where the clinical experience was generally good but North Somerset patients were still encountering problems with accessing and discharge from the hospital;
- (4) Members welcomed the Trust's recruitment of a Director of Engagement and the positive approach to working with Council staff on improving disabled access to the Hospital foyer. However Members noted concerns raised by Healthwatch North Somerset that the Trust could be more proactive in its engagement with patient groups and representatives;
- (5) Members noted the clinical risks associated with the Sterile Services Department (operation packs);
- (6) Members noted that the Trust was liaising more effectively with GPs in North Somerset but wanted assurance that 24 hour summary discharge letters were being sent electronically and that information was being shared in a coordinated and IT systems compatible manner; and
- (7) the range and quality of Centres of Excellence at the trust were encouraging.

**Concluded:** that the Panel's comments be reviewed under Item 7 (Minute QAS 9 below) and form the basis of the formal response to the Trust.

**QAS 6 Weston Area Health NHS Trust – oral report**

A representative of the Trust gave a verbal update highlighting the key points of the QA.

In discussion, Members commented on the QA as follows:

- (1) Members acknowledged the significant challenges faced by the Trust with staff under significant work pressures together with the on-going uncertainties associated with the merger/acquisition. It was felt that the Hospital should be commended for the continuing high standards of care in these circumstances;
- (2) Members were encouraged by the Trust's patient experience priorities including the emphasis on improving mechanisms to engage more effectively with the experience of vulnerable and seldom heard groups and improving the hospital environment to support patients with dementia;
- (3) despite the significant pressures, the Friends and Families survey results were encouraging and it was evident that staff were presenting a caring attitude to patients;
- (4) some concerns about discharge were raised including the (Churchill Unit) discharge lounge and the pharmacy;
- (5) Members welcomed the Trust's patient safety priorities including pressure sore reductions, reducing falls and infection control. They noted with concern that the infection control target had been missed last year;
- (6) they noted that specialist clinical staff continued to be very stretched and that there was a high reliance on agency staff, particularly at night; and
- (7) there were also concerns about elements of the staff survey results, particularly comparative statistics relating to the numbers of staff witnessing potentially harmful errors and experiencing physical violence and the indication that some staff would not recommend the Trust as a place to work or receive treatment. However Members were encouraged by excellent scores elsewhere such as for effective team working and training.

**Concluded:** that the Panel's comments be reviewed under Item 7 (Minute QAS 9 below) and form the basis of the formal response to the Trust.

**QAS 7 North Somerset Community Partnership - presentation**

Representatives of the Trust gave a PowerPoint presentation highlighting the key points of the Trust's QA. A copy of the presentation has been placed in the signed minute book.

In discussion, Members commented on the QA as follows:

- (1) Members were impressed by the extremely high 98% "recommend" rate for responses to the Friends and Families survey. They speculated, however, that the few that would not recommend probably reflected issues associated with staff capacity;

- (2) Members expressed some concern about staff capacity noting that demand on services was significantly increasing year on year. They were particularly concerned about out-of-hours pressures;
- (3) they noted the partnership's achievement milestone for data sharing with GP practices. They felt, however, that further improvement was needed in respect of GP liaison and welcomed the inclusion of information sharing within the priorities for 2015/16; and
- (4) the new "hard to reach" group outreach priority was encouraging.

**Concluded:** that the Panel's comments be reviewed under Item 7 (Minute QAS 9 below) and form the basis of the formal response to the Trust.

## **QAS 8 South West Ambulance Service NHS Foundation Trust - presentation**

A representative of the Trust gave an audio-visual supported presentation on the key points of the QA.

In discussion, Members commented on the QA as follows:

- (1) the excellent Friends and Families survey results were very encouraging as were the Trust's performance in the following key areas: patient safety, demand management, hospital turnarounds and improved partnership working. Members also welcomed the investment in its fleet such that it was now the newest and most reliable to date;
- (2) whilst the Panel was concerned by the Trust's performance against some of the key indicators (Red 1 and Red 2), Members acknowledged the challenges facing the trust and the promising initiatives being implemented to address these, including the "Right Care" scheme and the Dispatch and Disposition trial;
- (3) Members also welcomed achievements against the 2014/15 priority of improving identification and management of paediatric sepsis together with its "sing up to safety" priority for 2015/16 – developing a clear and measurable programme of safety improvement;
- (4) the challenges faced by the trust in recruiting clinical staff were considerable but Members were impressed by the innovative measures being put in place to mitigate these impacts by improving and better prioritising the allocation of clinical resources;
- (5) the greater emphasis in the QA on improving partnership working was welcomed;
- (6) Members noted the 2014/15 priority of implementing the Electronic Care system was still work in progress but were encouraged by early indications that it was delivering better clinical outcomes; and
- (7) Members welcomed the 2015/16 priority of promoting the assessment and management of unwell children and young people accessing ambulance services.

## **QAS 9 Panel Discussion**

Members reviewed the quality accounts presentations in more detail and agreed outline responses.

**Resolved:**

- (1) that, on the basis of the outline responses agreed by the Sub-Committee, draft formal responses be prepared by the Scrutiny Officer; and
- (2) that the draft responses be circulated to Sub-Committee members for agreement prior to being issued to the respective Trusts/Healthcare providers in compliance with the notified deadlines.

The finalised QA responses are attached at appendix 1.

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Chairman

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