Scrutiny Health & Social Care Sub-Committee

Meeting of held on Monday, 23 April 2018 at 10.30 am in F4 - Town Hall

MINUTES

Present: Councillor Carole Bonner (Chair);

Councillor Andy Stranack (Vice-Chair);

Councillors Patsy Cummings, Sean Fitzsimons, Margaret Mead and

Andrew Pelling

Also Michael Fanning (Director of Nursing) CHS NHS Trust

Present: Wendy Frost (Quality Manager) CHS NHS Trust

Janet Coninx (Head of Patient Safety & Risk) CHS NHS Trust

Amanda Pithouse (Director of Nursing) SLAM Godfried Attafua (Service Director) SLAM

Rachel Flowers (Director of Public Health) Croydon Council

Apologies: John Goulston (Chief Executive) Croydon Health Service NHS Trust

PART A

20/18 **Disclosure of Interests**

There were none.

21/18 Urgent Business (if any)

There were no items of urgent business.

22/18 Draft Annual Quality Account - Croydon Health Service NHS Trust

The draft annual quality account was presented to the Sub-Committee for comment.

Members were informed of some of the highlights of 2017/18 which included the following:

- •Infection Control- There were a number of areas where the trajectory around infection control such as MRSA and C Deficile came under recommended level; and performance was very good.
- •Winter Pressure There was a huge demand for service which was managed very well. The local outbreaks of norovirus was well contained.
- •Cancer performance and reaction to treatment had seen some improvements.
- •CQC Inspection The Trust was rated good in all core services, there was however further work to be done to improve across services.

The priorities for 2018/19 included the following:

- •Improvement of patient experience though on going work identified through the friends and family feedback and annual survey response.
- •Appointment of a senior practitioner from SLaM to collaborate on issues identified in the care pathway.
- •Mental health identified as a national priority and in particular Croydon will look at its acute pathway.

In response to a Member query on what was meant by 'enhancement to the critical care unit', officers stated that it was recognised that the environment in terms of capacity, size and facilities were in need of expansion. The CQC highlighted issues with the physical environment and a business case had been logged to expand the unit.

Members raised concerns on care pathways for patients that presented with mental health issues or crisis and the facilities and provision in place.

Officers responded that this remained a priority. They were aware that there was currently limited facilities in the department for their care and treatment at present due to the constraints of the temporary emergency department, when the new facility opens this will improve. They were currently working with partners on a review of pathways and were working with SLaM to ensure the appropriate level of staff were available to respond to demand.

Members requested clarification of the CQC rating which showed that critical care was rated as 'required improvement' and three other services rated as good. The overall rating was 'required improvement'.

Officers responded that the CQC had made changes to the assessment criteria, they had not reviewed core services and this would happen later in the year, the rating would then be amended to reflect that review.

In response to a Member question on the challenges of recruitment, officers stated that recruitment remained a challenge, in particular in retaining senior level staff and specialists. Flexible working also had an impact on staffing levels during core hours. The Members praised John Goulston, Chief Executive, Croydon Health Services NHS Trust on the work done in transformation of recruitment and noted the progress made in this area to date.

In response to a Member question on the process of determination of priorities for each year, officers responded that whilst national guidance was received and considered there was local flexibility on the priorities selected. A list of priorities were drawn each year from which a selection was made following a thorough process of consultation with external stakeholders.

A Member requested further data on the Department of Health (DoH) mandatory indicators. Officers stated that data was still being collected and this could be reported to the Sub-Committee at a future meeting. Officers were able to inform the Sub-Committee that incident reporting figures had improved, data on mortality instances were lower than expected. Patient safety incident reporting had increased but these were no harm incidences which was encouraging.

A Member raised concerns that staff uptake of the Flu vaccine remained moderate for an acute hospital and queried how this would be managed in the next year. Officers responded that uptake of vaccine by staff remained a personal choice and the evidence gathered by the Trust each year was used to change tactics on encouragement. Staff had varying reasons for lack of uptake including cultural reasons and management had spent time with staff to address myths associated with vaccines.

The Director of Public Health stated that immunisation was very complex and although the uptake was moderate it was better that in some boroughs. There was still extensive work to be done and staff in all services would be worked with closely to encourage increase in take up of vaccines.

The chair thanked all officers for attending, the openness to working with Scrutiny over the years and wished all officers moving on all the best for the future.

The Sub-Committee response to the Quality Accounts

Members of the Health and Social Care Scrutiny Sub-Committee welcomed the opportunity to provide comment on the draft quality account.

The Sub-Committee agreed in the first instance that the information presented in the draft quality account did not include sufficient information to enable robust comments to be made, in particular in relation to data which was still being collected. This was an issue that occurs every election year due to the variance in timetables for the National Health Service and that of Local Government.

The Sub-Committee Members did however acknowledge that there had been notable improvement in services over the years and welcomed the hard work that the retiring Chief Executive John Goulston had done on the transformation of the service. Many of the priorities set were improving well with many fully achieved already.

The Sub-Committee welcomed the actions that were being undertaken to improve quality and standards across the whole service and recognised that there was still more to be done to improve and sustain customer satisfaction whilst improving standards of care.

The Sub-Committee was encouraged to hear of the successes of 2017/2018 which saw good performance trajectories around infection control. They were also pleased with the amount of work that had been carried out on engagement with staff, specifically the 'Listening into Action' programme to promote inclusion, address staff morale and areas requiring quality improvement.

Whilst the Sub-Committee remained encouraged with achievements of the Trust to date, there were still areas of significant concern. In particular, the

care pathway of patients presenting with Mental Health needs. The Sub-Committee felt that senior management were lacking in the ability to provide detailed information on this important area when questioned or data on the experience of individuals. The Sub-Committee was however reassured to learn that this was one of the priorities for 2018/19, with the physical environment for patients upon initial attendance to the emergency department identified as one of the fundamental areas that required immediate attention. Further evidence of the impacts of the measures that will be put in place and the patient experience would be required as part of the scrutiny of Croydon Health Services over the next year. It was of paramount importance that stakeholders and partners continue to be proactive in working together to ensure investment, improve quality and influence improved outcomes in this area.

It was also highlighted that the staff take up of the Flu vaccination was moderate for an acute hospital and whilst it was recognised that the uptake of vaccinations was sometimes controversial and that the reasons for lack of uptake in general is complex, more work was required in this area.

The Sub-Committee was encouraged to learn that changes had been made to contracts of employment that now included a mandatory requirement for staff to be immunised. Further robust work was needed to encourage and influence all staff, practitioners, and partners to take up vaccines to protect themselves and the members of the public that they serve.

The Sub-Committee thanked CHS for all the work that had been completed to date, and looked forward to continually building on the working relationship.

23/18 Draft Annual Quality Account - South London and Maudsley NHS Foundation Trust

The draft annual quality account was presented to the Sub-Committee for comment.

The Sub-Committee learnt that they were the most improved NHS trust in the last year.

Over the last year feedback had been sought and received from stakeholders and CQC feedback had been reviewed in order to assist with the formulation of top priority areas of focus for the coming year.

As a result the four areas of focus for 2018/19 would be the following:

- Reduction in violence
- Accessibility of care
- Patient and Family involvement in care
- Staff morale and experience

In response to a Member question on processes and challenges, officers stated that there were still challenges with access to beds. This was particularly challenging for acute colleagues with access to beds not always readily available. Staff were encouraged to report any delay, in order for

investigations to be carried out and for opportunities to work with partners on addressing the issues presented.

Members were encouraged to learn that the Place of Safety was well staff and working well.

A Member commented that there was a lack of Croydon content in the report and it would be of benefit in future for the report to include an explicit section on issues for Croydon focus. A Borough breakdown of strengths and weaknesses.

A Member commented that SLaM was world leading in its field but there was a distinct lack of BME representation at senior level. There was some comment on this in the report but more reflection was required on issues of staff satisfaction and representation of BME. Officers stated that discussion had been taking place to ensure that more on this issue was structured into next year's quality accounts.

The Sub-Committee was encouraged to learn that a workforce and equalities committee had been set up to address the issues of BME representation at senior level. There would be more information and data available on the work that was being completed on improving diversity in the next year.

In response to a Member comment on improvement of engagement with staff, morale and what could be learned from the CUH listening into action programme, officers stated that they were working on system wide changes. They had been working with and learning from partners on quality improvement methodology.

In response to a member comment of staff reporting at 57% of harassment and working in a hostile environment, officers said that unfortunately this was part of working in a Mental Health setting and they had been looking at ways of addressing issues raised.

The Trust stated that there was a good degree of openness regardless of difficulties and there had been improvements for Croydon residents in the last 4 years.

Members thanked officers for their continued participation with Scrutiny and for all their work in the last year.

The Sub-Committee's response to the Quality Accounts

The Health and Social Care Scrutiny Sub-Committee welcomed the opportunity to provide comment on the draft quality account.

The Sub-Committee agreed in the first instance that the information presented in the draft quality account did not include sufficient information to enable robust comments to be made, primarily because data was still being collected and analysed. It is acknowledged that this is an issue that occurs every

election year due to the variance in timetables for the National Health Service and that of Local Government.

The Sub-Committee was encouraged to learn that SLaM was one of the most improved NHS trusts in the last year, and the degree of openness regardless of difficulties faced was appreciated. There had also been noticeable improvement for Croydon residents accessing services in the last few years and overall the trust was performing well. The changes made to the overall structure of the Trust was also welcomed. In particular the move to a structure that enables the performance by borough to be measured which will assist in the scrutiny process going forward. The Sub-Committee looks forward to being able to scrutinise the priority areas in a more meaningful way for Croydon residents in 2018/19.

The Quality Accounts that were provided had a distinct lack of Croydon specific content in the report and in future the Sub-Committee would benefit from an explicit section on issues or difficulties for Croydon focus. A borough breakdown of strengths and weaknesses would be beneficial for the next year's quality account.

It was also expected that the quality account would include more information on staff satisfaction, diversity and in particular what was being done to address the lack of representation at senior level of Black and Minority Ethnic groups.

The data provided on the staff working environment raised concerns, in particular the large percentage of staff who expressed concerns about harassment and physical violence and information on what was being done to address this would be welcomed in future reports.

The Sub-Committee thanked SLaM for all the work that had been carried out over the last year and looked forward to the continued good working partnership.

The Sub-Committee Members thanked the Chair for all her work and expertise in the last for years and wished her well in the future. There was still a long journey ahead for Health and Social care Scrutiny and the Chair had been instrumental in building relationships with partners in order to promote transparency.

The Chair and Vice Chair also proposed a formal vote of thanks to Councillor Margaret Mead for her contribution to Scrutiny as well as her Political Party. It was acknowledged that the experience she brought was vital and her legacy would be taken forward.

24/18 Exclusion of the Press and Public

This was not required

	The meeting ended at 12.21 pm
Signed: Date:	