



**County Durham and Darlington NHS Foundation Trust – Draft Quality Account**  
**2013/14**

The Health and Partnerships Scrutiny Committee remit covers the Governance arrangements of the Trust and it has the responsibility to comment on the quality Accounts, in line with its Health Scrutiny Powers. The Members of the Scrutiny Committee are committed to being involved, at an early stage with the Foundation Trusts Quality Accounts and received regular updates on performance information from the Trust.

Members of the Health and Partnerships Scrutiny Committee have considered the draft Quality Accounts 2013/14 for County Durham and Darlington NHS Foundation Trust and have attended Stakeholder events over the past year.

Members believe this has enabled them to have a better understanding and more detailed knowledge of performance to evidence their commentary on this year's Quality Accounts. Members maintain that this process has been successful and are certain that it has also benefited the Foundation Trust. Members wish to place on record their thanks to the Associate Director of Nursing (Patient Safety and Governance) for attendance at the meetings.

In respect of the Quality Improvement Priorities for 2013/14 Members have the following comments to make:-

**Patient falls** – Scrutiny Committee welcomed the inclusion of this priority for 2013/14 and the continued monitoring and in doing so noted that this was a top priority for the Trust which was benchmarking against other Hospital Trusts in the Country to exchange good practice and consider new ways of reducing the target. Members were pleased that the Falls Policy had been updated and a Falls Care Bundle Booklet had been developed which encompassed Individualised Care Round for High Risk Patients where up to hourly checks were carried out and patients actively assessed in relation to Pain, Position, Patient Needs and Possessions. Scrutiny Committee were pleased that the Clinical Standards Matron and Falls Lead attended a meeting to provide a more in depth analysis of falls and the steps being taken to alleviate them.

**Care of Patients with dementia** – Scrutiny Committee noted that the Trust is still learning about what helps dementia patients and more work had been done to develop a dementia pathway. Members were supportive of GP involvement in the development of a Dementia pathway and suggested it was important to involve patients and carers also.

**Healthcare Associated Infections** – Scrutiny Committee noted that the Trust had had one unavoidable case of MRSA due to the need for a clinical intervention but were

pleased that the Trust had a zero tolerance for MRSA. Members were pleased that there was a reduction in Clostridium Difficile (C-Dif) figures from last year and noted that an updated stool sampling guideline had been introduced which staff had reported was effective.

**Venous Thromboembolism** – Members welcomed the continuing monitoring of this priority which had been achieved and its inclusion in the priorities for 2013/14.

**Pressure Ulcers** – Members were pleased to note that there had been an improvement on last year's target and that the Trust were striving for zero tolerance. They welcomed the approach of a full review for each case to ensure lessons identified are cascaded and monitored.

**Discharge Summaries** – Members were pleased that considerable progress had been achieved in the 24 hour electronic discharge letter target but expressed disappointment that the Trust were below target of 95 per cent. Concerns were also expressed that inappropriate discharges, such as vulnerable patients at night, were still occurring. Members welcomed the opportunity of a meeting with the Clinical Standards Matron and Falls Lead who provided a more in depth analysis of the Going Home Policy and Going Home Guarantee which had been achieved. Members were also delighted to learn of the introduction of the 'Nurse to Nurse Handover Report on Patient Discharge and Transfer' which it was envisaged would improve communications between nurses and departments

**Patient Safety** – Members accepted that work was being undertaken in respect of patient safety and believe that all patient safety incidents should be reported and staff should be actively encouraged to do so. Members were pleased that this is a high priority for the Trust and look forward to receiving regular reports on how this is progressing.

**Patient Experience** – Members welcomed the inclusion of patient experience and hope it continues to be at the fore front of the Trusts mind.

**Nutrition and Hydration** – Members were pleased that Healthwatch had undertaken eight visits to two wards throughout the summer to talk to patients at meal times and noted that weekly live records checks undertaken with real time feedback to staff and compliance indicators continue to be monitored monthly. However Members expressed concerns that targets for weekly screening for under nutrition, provision of an appropriate care plan and a completed fluid balance chart had not been achieved and requested that they be kept informed of progress.

**End of Life Care** – Members welcomed the development of a workstream to consider end of life care and the crucial involvement of Palliative Care Consultants. Members understand that a National Audit had been undertaken and await the results.

**Review Education and Knowledge around the Use of 'Do Not Attempt Resuscitation' Document (DNACPR)** - Members noted that the appropriate communication and decision making of DNACPR remained a high priority and that the Trust had taken strong steps to provide assurance to patients that clinical staff are supportive in their decision making. Members welcomed the development of a

DNACPR e-learning programme which provided scenario based education for clinical staff around the complex decisions of DNACPR.

**Development of a Learning Disabilities Guarantee** – Members were pleased that this had been achieved and that representative from vulnerable groups had suggested a similar tool would be useful for dementia patients. Members also noted the use of patient passports and how successful and positively they have been received. It was noted that the Mental Health Network have also discussed the use of patient passports.

**Responsiveness to Patient Personal Needs** – Members were delighted that the patient experience questions had shown improvement in four of the five indicators since the previous quarter and an improvement from quarter one.

**Percentage of Staff who Would Recommend the Trust to Family and Friends Needing Care** – Members were concerned that comments from staff, collected at recent listening events, included work pressures, increased volumes of patients and little time available to spend with them. Concerns were also expressed that staff had had difficulty in adjusting to the electronic incident reporting form recently introduced but Members were pleased to learn that a change in the system had been introduced which would improve the situation.

**Reduction in risk adjusted mortality** – Members were pleased to note that there are limited numbers of deaths in the community and that the majority occur in acute settings. It was noted that the North East Observatory System was developing a standardised audit tool which the Trust would look to access.

**Compliance with stroke pathways** – Following the centralisation of the Hyper Acute Stroke Unit at University Hospital North Durham Members believe that centralising the service has benefited the residents of Darlington. Members are delighted that this priority has been achieved and welcome the continuing monitoring of this priority and its inclusion in the priorities for 2013/14.

**Reduction in avoidable emergency readmissions to hospital** – Members acknowledged that this was a difficult target and that work continues to review the admission rate. Members were pleased to note that improvements would continue to monitor patient experience and appropriate pathways of care and that the Trust still experiences pressures in relation to maintaining 95 per cent of patients being seen within four hours and a 60 minute review target.

**Reduction of the length of time to assess and treat patients in Accident and Emergency Departments** – Members were pleased that the Trust were working towards achieving this priority and were confident that the co-location of Urgent Care Services within Darlington Memorial Hospital would assist in reducing all waiting times. Members will continue to monitor this priority closely.

**To increase patient satisfaction as measured Patient Reported Outcome Measures** – Members welcome the collection of patient data and information and are pleased that the Trust are encouraging patient participation in all areas.

## **Quality Priorities for 2014/15**

Members are pleased with the number of Priorities being carried over from 2013/14 and note the introduction of different methods for monitoring where the priority has changed or the service objectives have changed. Members particularly welcomed the newly included Friends and Family Test, which had arisen following recent Stakeholder Events, and the reduction of length of time for ambulance services to hand over patients in Accident and Emergency departments to improve patient experience and current performance.

## **Conclusion**

Overall, Members welcome the Quality Accounts and are pleased with the Trusts progress against the chosen priorities, in a challenging year for all NHS organisations. Moving forward, Members are particularly interested in

Having gained a detailed understanding of the process of the Quality Accounts this year, Members would like to receive six monthly reports to monitor progress being made against the priorities during 2014/16.

Councillor Wendy Newall  
Chair, Health and Partnerships Scrutiny Committee