



BROMLEY CIVIC CENTRE, STOCKWELL CLOSE, BROMLEY BRI 3UH

TELEPHONE: 020 8464 3333

CONTACT: Jo Partridge  
*Joanne.Partridge@bromley.gov.uk*

DIRECT LINE: 020 8461 7694

FAX: 020 8290 0608

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## **INFORMAL HEALTH SCRUTINY SUB-COMMITTEE**

**Meeting to be held on Tuesday 5 July 2022**

**Please see the attached report marked “to follow” on the agenda.**

**6 UPDATE ON THE BROMLEY HEALTHCARE CQC ACTION PLAN (Pages 3 - 20)**

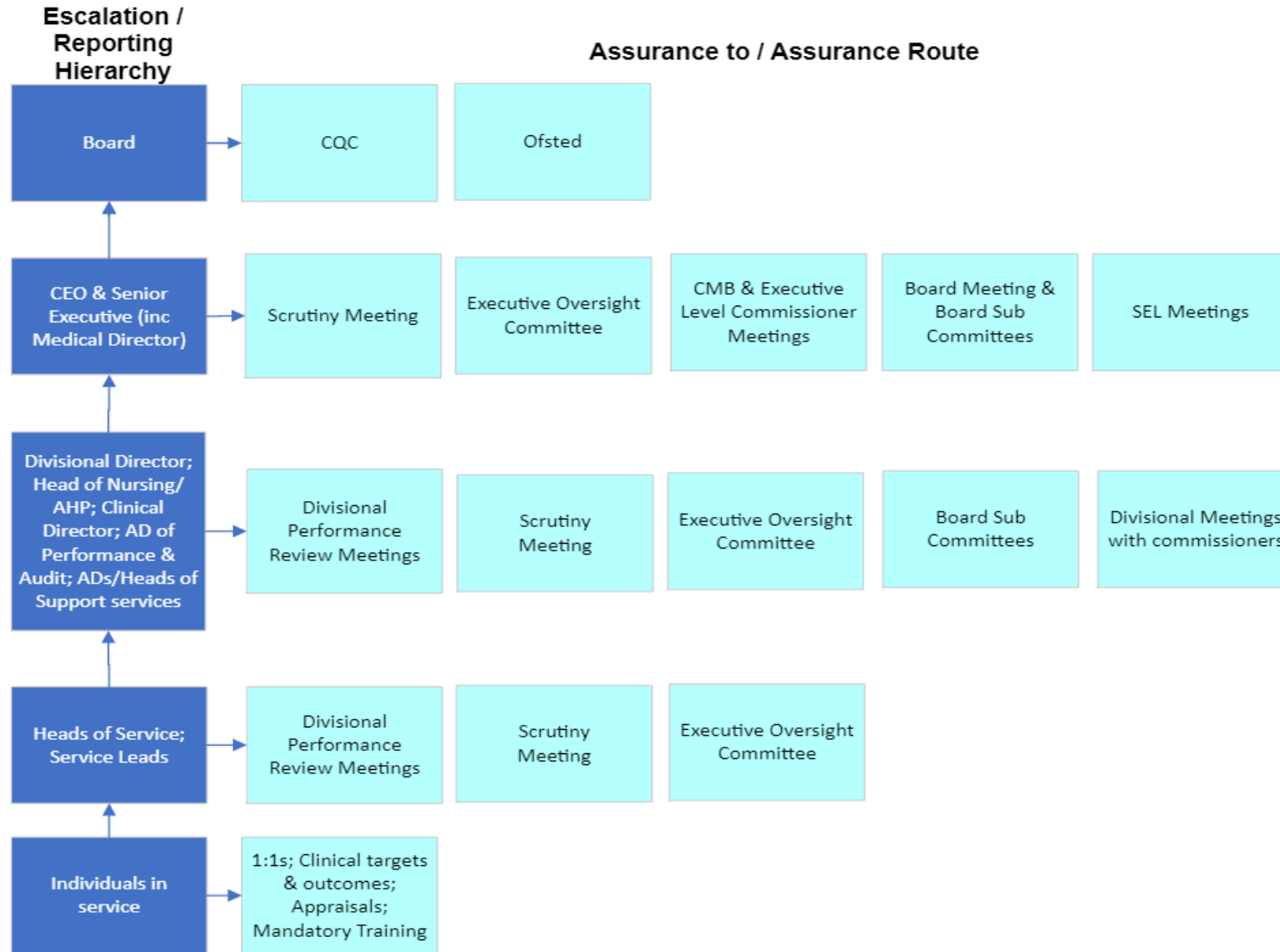
*Copies of the documents referred to above can be obtained from*  
<http://cbs.bromley.gov.uk/>

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# Bromley Healthcare Update CQC Improvement Plan - July 2022

# CQC Response - Strengthened scrutiny and challenge: Performance Framework & Assurance



Three Divisions have been established: Adults, Children & Young People and Urgent Community Response.

Within each Division, the Divisional Directors are accountable for delivering performance targets, whilst the triumvirate of the Divisional Directors, Clinical Directors & Head of Nursing / Head of AHP are responsible for Divisional Governance.

# CQC Response : Programme Management Office (PMO)

The Bromley Healthcare PMO system is the central repository for all projects and programmes within the organisation. All CQC related projects are identified within the tool and monitored weekly internally and monthly via the CQC sub committee. Progress at a programme, project and task level is visible and transparent, along with all project risks and issues. The tool works on a linear basis, tracking % completion vs target deadlines at a task level, so flags very early any tasks potentially at risk, so that remedial action can be taken if required.

☆ All CQC projects 🔍 @ 🔔 + ST

<input checked="" type="checkbox"/>	Type	Name	Planned Start	Deadline	% Comp	Schedule Health	State	Manager	Workspace	Priority ↑	
<input type="checkbox"/>	Priority 1 - Workin...	Exemplar Record Keeping	3-Jan-2022	31-Mar-2023	36%	At Risk	Active	Sharon Smith	Quality & Safer Care	Very High	
<input type="checkbox"/>	Priority 1 - Workin...	CQC Mock programme	1-Aug-2022	31-Mar-2023	22%	Future	Active	Kate Stoneman	Quality & Safer Care	Very High	
<input type="checkbox"/>	Priority 1 - Workin...	CQC Tactical Project	1-Oct-2021	23-Nov-2023	80%	At Risk	Active	Wendy Wyvern	Quality & Safer Care	Very High	
<input type="checkbox"/>	Priority 1 - Workin...	Patient Public Engagement Experience & c...	3-Jan-2022	29-Sep-2022	89%	On Track	Active	Andrew Hardman	Commercial	High	
<input type="checkbox"/>	Priority 1 - Workin...	Governance balancing oversight and strat...	1-Mar-2022	30-Sep-2022	90%	At Risk	Active	Jacqui Scott	Default	High	
<input type="checkbox"/>	Priority 2 - Build b...	Clinical Competencies	1-Oct-2021	31-Mar-2023	0%	Not Active	On Hold	Sharon Smith	Quality & Safer Care	High	
<input type="checkbox"/>	Priority 2 - Build b...	Lone Working	3-Jan-2022	19-Aug-2022	82%	At Risk	Active	Heather Wragg	People & Develop...	High	
<input type="checkbox"/>	Priority 1 - Workin...	Audit Programme	1-Apr-2022	31-Mar-2023	88%	On Track	Active	Samantha Tomlinson	Performance & Au...	High	
<input type="checkbox"/>	Priority 2 - Build b...	Development and delivery of belonging s...	1-Apr-2022	31-Mar-2023	45%	On Track	Active	Sarah Patmore	People & Develop...	High	
<input type="checkbox"/>	Priority 1 - Workin...	Development of Strategy 2022+	12-Apr-2022	31-Mar-2023	39%	On Track	Active	Jacqui Scott	Default	Normal	
<input type="checkbox"/>	Priority 1 - Workin...	BHC CQC Audit Programme	6-May-2022		11%	Not Active	Draft	Samantha Tomlinson	Performance & Au...	Normal	

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# Refresh of our Values



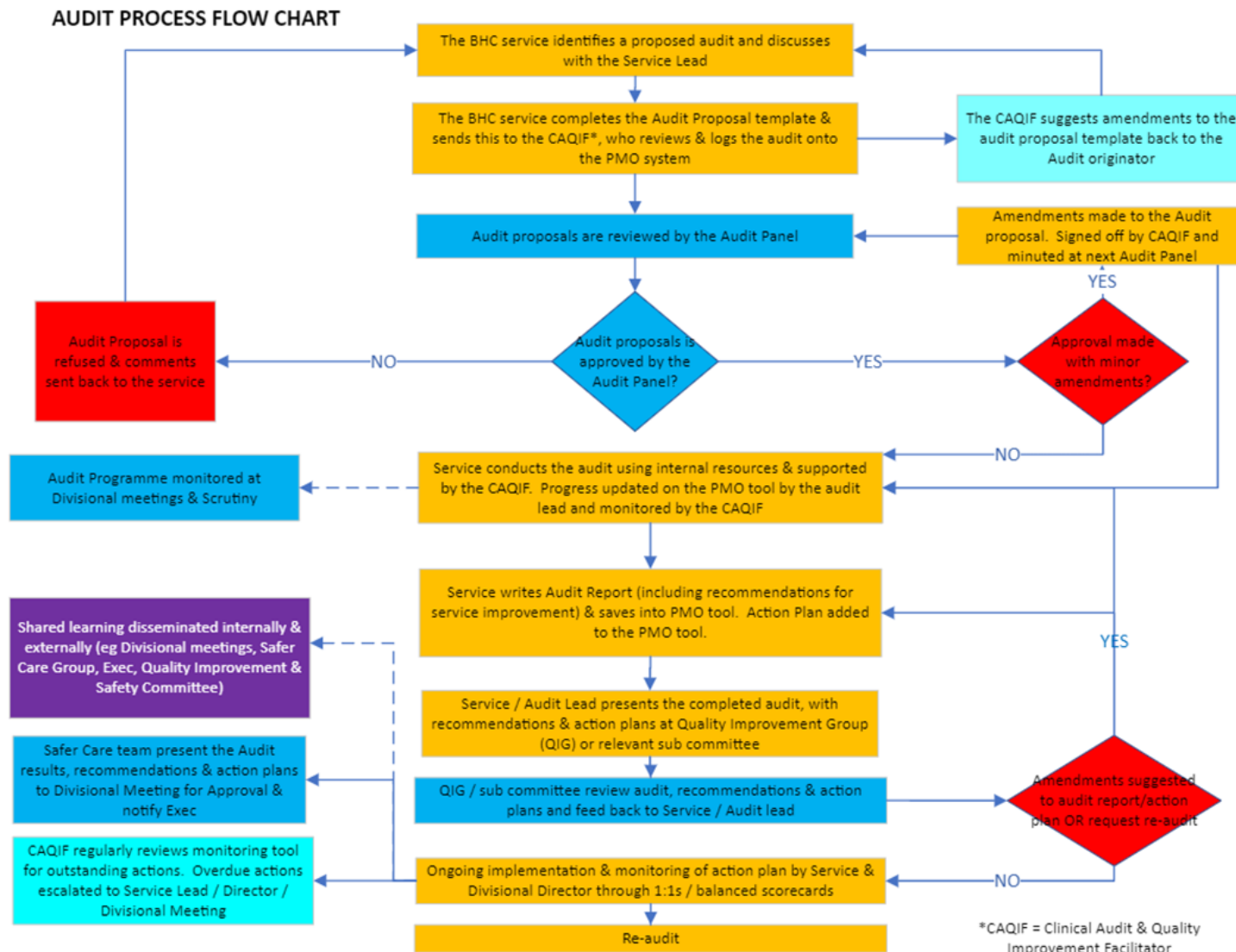
## Values Journey

- All staff survey
- Values focus groups
- Employee Experience Collaboration Group
- Team meetings
- Leadership team meeting

# Audit Programme Summary

- In 2021/22 the following KPMG audits were completed:
  - Learning from COVID, presented to ARC July 21 rated as Significant Assurance with minor opportunities for improvement
  - Strategic Risk Management was presented to ARC in Feb 22, rated as Significant Assurance with minor opportunities for improvement
  - HR business Processes was presented to ARC in Feb 22, rated as Significant Assurance with minor opportunities for improvement
  - Estates Health & Safety audit was presented to ARC in May 22, rated as Significant Assurance
  - Data Quality is due to be presented to ARC in July 22
  - 27 additional clinical audits were completed across BHC services in 2021/22
- The audit programme across the organisation for 22/23 has been established and review of progress is taking place at Divisional meetings. The programme is currently being migrated to the PMO platform to streamline the process & provide greater visibility across the programme.
- For 22/23 the following KPMG audits are planned:
  - Accessible Information Standards
  - Record Keeping Audit Hotspots
  - Previous recommendations reaudit
  - Review of governance & divisional structure
  - Deferred visit audit

# Strengthened audit process





# Record keeping

- The Annual Record Keeping Audit was completed for all clinical services in 2021/22. Output is being used to inform template review, additional staff training & a further series of audits in 22/23.
- A Record Keeping Working Group has been established, with representation across all clinical professions and Safer Care. To date, they have worked on:
  - Reviewing and updating the Record Keeping Policy and associated organisational abbreviations. This is due to complete by 8/7/22 and has been updated with learning from recent incidents across the local health economy
  - Establishing a programme of work to review and amend (as required), clinical templates, which incorporates DNAR alerts and recording across clinical services
  - A District Nursing specific task-and-finish record keeping subgroup was set up in November 2021, chaired by the Head of Adult Nursing. 55 DN staff were surveyed to identify the root causes of problems with record keeping. To date the following actions have been undertaken:
    - A series of meetings scheduled June/July to review and suggest changes to existing DN templates. Representation from District Nursing, Transformation & Information teams attending.
    - A Clinical Quality Lead has trialled EMIS voice-recognition software for smart phones and reviewed positively. This will now be trialled with specified DN staff.
    - Ongoing work as part of the IT strategy to improve connection problems
    - Block booking agency staff to be provided with devices (e.g. ipads) to enter records directly into EMIS
    - Training in the new templates to be provided by the EMIS team, once the templates are ready for roll-out.
    - Wider record keeping training to be developed with L&D with input from Community Nurses to inform content
    - Recruitment is ongoing as part of the workforce strategy for District Nursing
- A second task-and-finish subgroup has been set up for Health Visiting
- Daily huddles to review record keeping issues, the causes & solutions of these are in place. Output will feed into staff training & template changes.

# Health Visiting Skill Mix

## Strategy

- Creation of Health Visitor Development Nurses (HVDNs)
- Creation of B7 Specialist roles
- Leadership development of B6s upwards
- Upskilling of the Community Nursery Nurses
- Creation of B2/3 HCAs who will deliver universal 1 and 2 year reviews
- Professional forums

## Progress so far

- 11 recruited so far – 5 in Bromley, 4 in Greenwich and 3 in Bexley
- Further interviews to recruit a further 4 HVDNs
- Internal training programme on 12<sup>th</sup> July – delivered by PDNs and HVs
- 15 places secured with Canterbury University
- 15 mentors identified
- 6 additional assessors will be trained in September 2022 to support the HVDNs when then start their Specialist Community Public health Nurses in September 2023

# Therapy Innovation

	<b>Pilot project 1</b>	<b>Pilot project 2</b>
Scope	RATT, HPW, Adult Physio teams only	RATT, HPW, Adult Physio teams only
Aim	Identify possibility to use RATT capacity to reduce wait time for routine patients	Create an accessible pathway from RATT to HPW for patients who require intense rehab after initial assessment
Method	<ul style="list-style-type: none"> <li>• Creation of priority categorisation system</li> <li>• Assigned allocator to schedule on Malinko</li> <li>• Daily senior triager</li> </ul>	<ul style="list-style-type: none"> <li>• Optimised RATT Ax template to include HPW essential elements</li> <li>• Eliminated repeat Ax by therapist in HPW team</li> <li>• HPW daily capacity utilised to step up from RATT</li> </ul>
Duration	May 1st 2021- Oct 31st 2021 (6 months)	May 1 <sup>st</sup> 2021- Oct 31st 2021 (6 months)
Result	All routine patients seen within 8 days of referral	Intense rehab delivered in a shorter period of time with minimal to no delays to starting rehabilitation

# Continue to recruit to District Nursing

## Strategy

Retaining our own workforce

Growing our own workforce

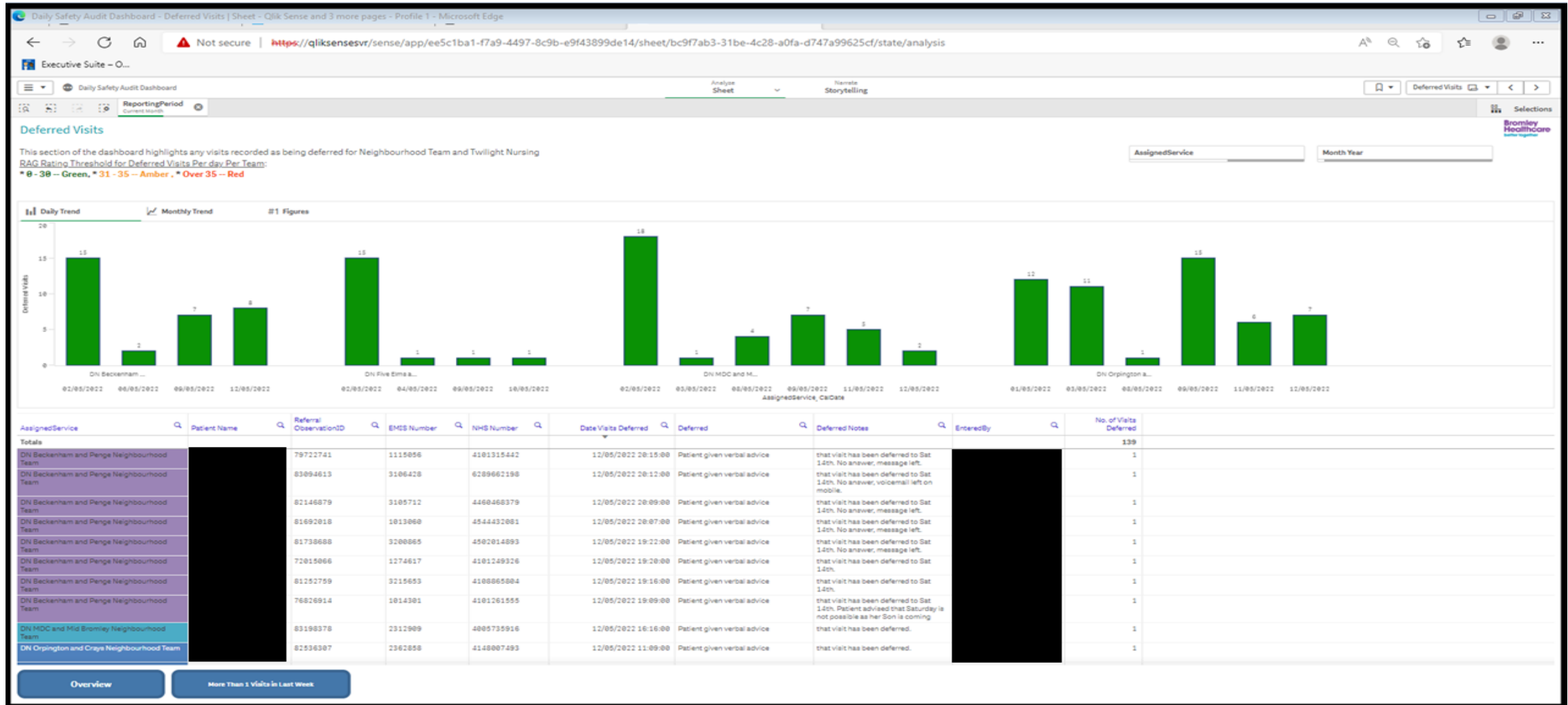
Supporting colleagues to continuously learn

## Progress to date

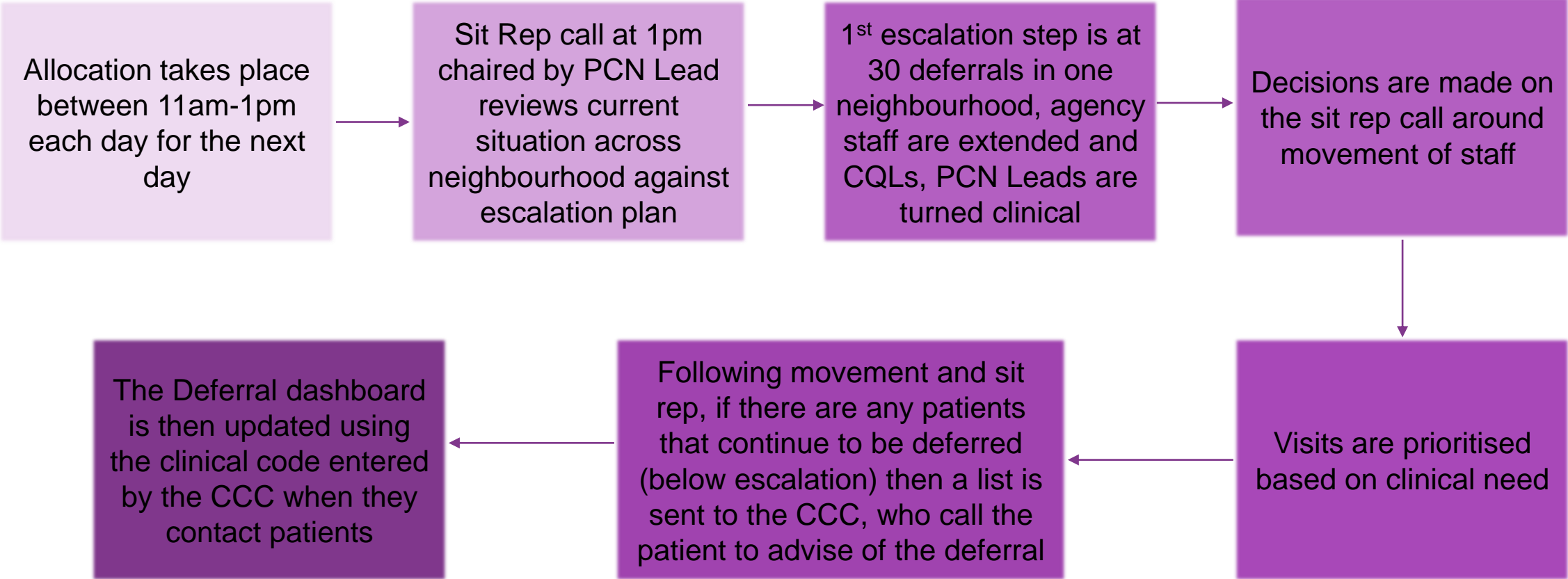
- Implementing a new career pathway. Clinical quality leads are in place supporting each of the four Neighbourhood Teams with professional accountability into the Head of Nursing. New caseload holder posts recognise the increasing complexity of patients and will enable full ownership and accountability of caseloads as well as providing development opportunities for colleagues who previously may have moved to specialist nursing roles.
- Next Band 5 readiness programme running from Sep. Care agency to provide pipeline into other roles.
- Leadership course in place : Stepping into management, Great Leader and Refinement.

# CQC Response : DN Deferred Visits Dashboard

Demonstrating oversight from the nurse to the Board.



# DN oversight of deferred visits



# Lone Working Update

- Lone working task and finish group has been established- with representatives from support and clinical services
- The lone working policy is now ratified and a standardised approach to lone working has been written, which is being added to SOPs in addition to service specific lone working information.
- Additional devices are being procured and Peoplesafe devices are now being issued to all staff who need one. A process is being put in place for onboarding, to ensure that staff who lone work have a device.



# CQC Response : E&I initiatives



BHC Equality & Inclusion network



BAME Lived Experience videos created in partnership with Bromley health & social care partners



BAME Mentoring programme established with One Bromley partners.

**Bromley Healthcare Mentoring:**

- Participants trained: 17  
Participants booked: 4
- 21 Mentors across One Bromley have volunteered and provided mentor bios.
  - 17 Mentors and Mentees matched across One Bromley in the first phase.



LGBTQ+ Collective established and monthly meetings commenced



Together Magazine; CEO Update; Staff Forum; Screen savers- celebration of events & progress over the year



Flexible working taking many different forms including: part time; job sharing; staggered hours; fixed shifts; home working; term time working

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Implementation of online unconscious bias training



Freedom to Speak up Guardians (x2) appointed in Feb 2021



Job Evaluation nominees trained & have commenced evaluations



E&I Induction video produced



Live EQ&I dashboard: Q1 22/23



E&I virtual conference held Nov 2021 – a week of events featuring internal & external speakers across a range of topics



# Equality and Inclusion Dashboard

Overview

Bromley Healthcare  
better together



Bromley Healthcare - Equality & Inclusion Dashboard

BHC Current Employees

1,097

Number of Employees by Grade

Band 2 - 7

936

Band 8a - 9

78

Medical

17

Executive

9

Apprentice & Other

54

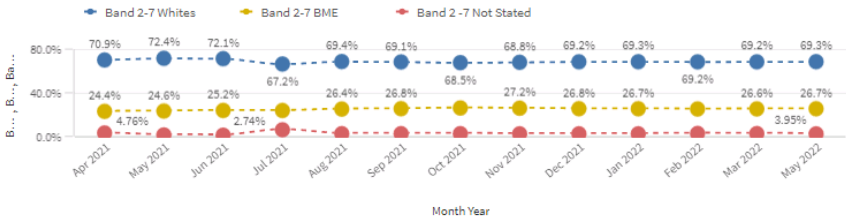
% of Current Employees Band 2 - 7 by Ethnicity Category

Band 2-7 Whites: 69.3%  
Band 2-7 BME: 26.7%  
Band 2 - 7 Not Stated: 3.95%

% of Current Employees Band 8a - 9 by Ethnicity Category

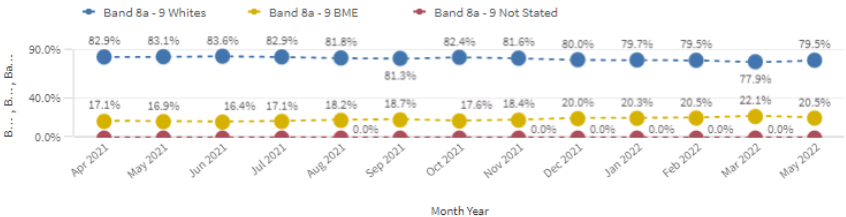
Band 8a-9 Whites: 79.5%  
Band 8a-9 BME: 20.5%  
Band 8a-9 Not Stated: 0.00%

% of Current Employees Band 2 - 7 by Ethnicity Category



\*\*\*ONLY Band 2 - 7 Representation\*\*\*

% of Current Employees Band 8a - 9 by Ethnicity Category



\*\*\*ONLY Band 8a - 9 Representation\*\*\*

Detailed

Promotions

Complaints & Grievances

Access to Training

New Starter

Ethnicity Group

Month Year

# Moving and Handling Update

Home Care 1/2 day	1/2 day M&H training course	1 day M&H training course	Clinic 1/2 day training course	Other Training
<p>For all staff that are in renablement teams that are not prescribers.</p> <ul style="list-style-type: none"> <li>- Theory</li> <li>- To add some trusted assessor training - bathing equipment, measuring for a chair raisers, perching stools.</li> <li>- Measuring for mobility aids.</li> <li>- Bed transfers, more emphasis on assisted walking and sit to stand.</li> <li>- To add hoisting so staff do not lose this knowledge.</li> <li>- Training to be yearly</li> </ul>	<ul style="list-style-type: none"> <li>- For Staff that are not prescribers.</li> <li>- Mixture of stand aids, bed equipment and full hoisting.</li> <li>- Training as it is now.                             <ul style="list-style-type: none"> <li>- If in Foxbury or Hollybank - to complete yearly.</li> <li>- If hoisting patients reguarly, to complete yearly.</li> </ul> </li> <li>-If staff are not regulary completing moving and handling to complete every 2 years.</li> </ul>	<ul style="list-style-type: none"> <li>- For staff that are prescribers.</li> <li>- Mixture of stand aids, bed equipment and full hoisting.</li> <li>- To look at different types of slings and how to measure for them.</li> <li>- To look at pieces of equipment that aren't core stock as alternatives.</li> <li>-Case studies.</li> <li>-Discuss court cases around moving and handling.</li> <li>- Training to be yearly.</li> </ul>	<ul style="list-style-type: none"> <li>-For staff that work prodominantly in clinics.</li> <li>- Mixture of mobility aids to reduce falls.</li> <li>- To assess and assist a fallen person.</li> <li>-How to use lift legs with and without equipment.</li> <li>- Training to be every 2 years.</li> </ul>	<ul style="list-style-type: none"> <li>-- To source or produce e-learning around back care and theory.</li> <li>- To look at court cases around moving and handling.</li> <li>-To discuss options further.</li> <li>- Once training is up and running and working well, to possibly look at single handed training and plus size training.</li> <li>- To discuss this when other training has embedded.</li> </ul>

## Expected Outcomes

- Training will be service lead
- Increase training sessions from 8 to 12
- Trusted Assessors to assist
- Care Agency training

# Public and Patient Engagement

On 27<sup>th</sup> May we were fortunate enough to be joined by Matthew and Deidre from our Patient reference group, for a visit to the new purpose-built wheelchair service clinics at Maidstone Road.

The creation of the clinics, office space and storage facility are the culmination of two years collaborative working between Bromley Healthcare and Inspire, to create a centre of excellence for Bromley's wheelchair users.

Matthew and Deidre were able to provide invaluable insights into the patient experience of the new facility and offered suggestions for further developments and improvements – most of which we have been able to implement, ahead of opening the clinics.

In recent months the service has expanded to include an additional clinical specialist Occupational Therapist, administrator, rehab technician and therapy assistant. With a focus on clinic-based activity to provide improved patient experience and reduced waiting times, the new facility marks the start of a fresh, exciting chapter for the wheelchair service team.





# Public and Patient Engagement

## Celebrating the Jubilee on Foxbury



On Saturday 18th June, the Community Children's Nursing Team arranged the first face to face Sickle Cell Support Event since the pandemic. The 19th June is World Sickle Cell Day so this was a great day to bring families and children together for a picnic.

