

HEALTH SCRUTINY SUB-COMMITTEE

Minutes of the meeting held at 4.00 pm on 13 June 2017

Present:

Councillor Mary Cooke (Chairman)
Councillor Pauline Tunnicliffe (Vice-Chairman)
Councillors Ruth Bennett, Ian Dunn, Judi Ellis and
Terence Nathan

Linda Gabriel and Lynn Sellwood

Also Present:

Councillor Diane Smith, Portfolio Holder for Care Services
Councillor Angela Page, Executive Support Assistant to the Portfolio
Holder for Care Services
Councillor Robert Evans

1 APOLOGIES FOR ABSENCE AND NOTIFICATION OF SUBSTITUTE MEMBERS

Apologies for absence were received from Councillor Will Harmer, Councillor David Jefferys and Councillor Charles Rideout QPM CVO.

Apologies were received from Justine Godbeer and Rosalind Luff.

The Chairman was pleased to welcome Councillor Robert Evans who was attending the meeting by invitation and had been nominated to fill the remaining vacancy on the Sub-Committee membership.

2 DECLARATIONS OF INTEREST

Councillor Mary Cooke declared that she had worked for Bromley Healthcare until 2012.

Councillor Judi Ellis declared that her daughter worked for Oxleas NHS Foundation Trust.

Councillor Diane Smith declared that her daughter worked for St Christopher's Hospice.

Councillor Pauline Tunnicliffe declared that she was a foster carer for the London Borough of Bromley and supported a young person through the 'Staying Put' scheme.

Linda Gabriel declared that she was the Chairman of Bromley and Lewisham Mind.

3 QUESTIONS FROM COUNCILLORS AND MEMBERS OF THE PUBLIC ATTENDING THE MEETING

No questions had been received.

4 MINUTES OF THE MEETING OF HEALTH SCRUTINY SUB-COMMITTEE HELD ON 16TH MARCH 2017 AND MATTERS ARISING

RESOLVED that the minutes of the meeting held on 16th March 2017 be agreed.

5 PRUH IMPROVEMENT PLAN UPDATE

The Sub-Committee received a presentation from Matthew Trainer, Managing Director for the Princess Royal University Hospital (PRUH) and South Sites and Sarah Middleton, Stakeholder Relations Manager, King's College Hospital NHS Foundation Trust providing an update on the progress of the Trust and the PRUH Improvement Plan.

Although it continued to be extremely challenging to meet emergency performance targets, there had been significant improvement in the performance of the Emergency Department during April and May 2017. Referral to Treatment times remained an area for improvement, but overall it had been identified that the quality of care at the PRUH remained very high and that the Trust continued to perform well against key outcomes and safety measures. Patient experience across the Trust had been reported as being good for 2016/17, and the King's Way Programme which aimed to increase the quality of services and make them more efficient and productive continued to be implemented. The review of the Outpatients' Service was also ongoing and it was planned to improve patient experience, efficiency and productivity through a range of measures including digital transformation. Six major areas of work had been developed in response to the annual staff survey results which comprised strengthening relationships between staff and senior leaderships, improving support for managers, value and recognition, diversity and inclusion, career and talent development, and health and wellbeing. Priorities for the coming year included improving access, finance, recruitment, quality and safety and end of life care. The Trust had delivered a £49m full year deficit in line with the mid-year forecast and had a target of a full-year deficit of £39m for 2017/18.

In considering the update, a Member was pleased to note the significant improvement in Emergency Department performance in April and May 2017 and underlined the need for this to be sustained. The Managing Director for the PRUH confirmed that work to manage the usage of the Emergency Department would continue. Inpatient admissions and bed management remained an area of key focus including regular meetings to review bed availability, and a London Borough of Bexley social worker had been placed in the Transfer of Care Bureau to support Bexley residents to move into more appropriate provision when hospital care was no longer required.

With regard to a query from a Member about the significant cost of agency staff, the Managing Director for the PRUH advised that there continued to be a significant shortage of skilled staff in some specialist areas, such as dermatology and that this made it difficult to recruit permanent staff. A range of measures would be used to support recruitment and retention including the block-hiring of housing and relocation packages for doctors where this was cost effective. The PRUH was working with other hospital trusts across London to set standard agency rates for staff in particular specialisms to help contain agency spend.

Members generally discussed the importance of ensuring that patients received appropriate end-of-life care, particularly in relation to nursing and care homes. In response to this, the Managing Director for the PRUH confirmed that a pilot scheme had been introduced which placed experienced Geriatricians in the Emergency Department between 8.00am-4.00pm to identify patients requiring end-of-life care and ensure they received the necessary care and support. A representative from St Christopher's Hospice was also located at the PRUH and was able to provide advice to ward staff. There was a need for a wider conversation to be undertaken across all key partners to ensure an holistic approach to end-of-life care and for nursing and care homes to be included in these discussions.

In reporting other issues, the Managing Director for the PRUH was pleased to announce that one of the hospital's two CT scanners had recently been replaced and that the backlog of CT scans had now been cleared. The King's College Hospital NHS Foundation Trust had not been amongst the hospitals affected in the global cyber-attack in May 2017, and the PRUH remained on track to move to the new cross-site Electronic Patient Record system in October 2017. In response to concerns raised around the capacity of the PRUH car park, the Managing Director for the PRUH advised Members that this had been identified as a priority and that he would be writing to the Local Authority in June 2017 setting out the PRUH's plans to phase in additional parking on site.

The Chairman led Members in thanking Matthew Trainer and Sarah Middleton for their presentation which is attached at Appendix A.

RESOLVED that the update be noted.

6 BROMLEY HEALTHCARE QUALITY ACCOUNT

Natalie Warman, Director of Nursing, Therapies and Quality, Bromley Healthcare and Julie Miller, Clinical Quality Team Manager, Bromley Healthcare presented the Bromley Healthcare Quality Account 2016/17 to the Sub-Committee, which outlined the provision delivered by Bromley Healthcare across the Borough during 2016/17 and quality priorities for 2017-2020. There was a statutory requirement for all NHS public funded bodies to provide their Annual Quality accounts to NHS England for publication by 30th June 2017, and for this to contain a supporting statement from the Health Scrutiny Sub-Committee.

The Director of Nursing, Therapies and Quality advised Members that there had been three Care Quality Commission Inspections of Bromley Healthcare's provision during 2016/17, all of which been rated as 'Good'. Feedback on customer experience had generally been very positive and there had been a 25% reduction in the number of complaints made to Bromley Healthcare in the past year. For 2016/17, Bromley Healthcare had made a commitment to listen to the hard-to-hear community and particularly focused on the views of children with communications difficulties. This commitment would be carried forward into 2017/18, when it was planned to focus on the views of patients with dementia or lack of capacity. Bromley Healthcare had continued to work across all key partners throughout the year. A staff survey had not been undertaken, but a number of measures were in place to support staff including a focus on workplace safety and a debt management initiative.

In considering the update, Members generally agreed that the Bromley Healthcare Quality Account 2016/17 was an accurate account of service provision. A Co-opted Member congratulated the Director of Nursing, Therapies and Quality, Bromley Healthcare and Clinical Quality Team Manager for an excellent report.

A Co-opted Member queried what progress Bromley Healthcare had made in becoming 'Dementia Friendly'. The Director of Nursing, Therapies and Quality underlined that becoming 'Dementia Friendly' remained an ongoing priority for Bromley Healthcare, and that 80% of Bromley Healthcare staff had now completed Dementia Awareness Training. An emphasis had been placed on the early recognition of dementia to ensure that patients were signposted to the appropriate treatment, and work was also being undertaken to ensure that patients with end-stage dementia received the support they needed, such as the development of life story resources. Consideration had been given to how the Bromley Healthcare estate environment could be managed to be more accessible to people with dementia, and resources that raised awareness of dementia had been made available on-site including the short film, 'Barbara's Story'. Bromley Healthcare had worked with a range of key partners on the development of the draft Dementia Strategy for Bromley including the Dementia Hub.

In response to a question from a Member, the Director of Nursing, Therapies and Quality confirmed that GPs were able to refer patients with pressure ulcers in the lower extremities for assessment. Following assessment, patients were directed to the most appropriate treatment for their needs which could include the Community Nursing Team or Podiatry Service.

RESOLVED that the Bromley Healthcare Quality Account 2016/17 be supported by the Health Scrutiny Sub-Committee.

7 URGENT CARE: UPDATE AND EVALUATION OF WINTER SCHEMES

The Sub-Committee considered an update on the Bromley Urgent Care system performance and the evaluation of the schemes commissioned by the Bromley Clinical Commissioning Group (BCCG) during Winter 2016/17.

The winter period 2016/17 had been very challenging with a much higher demand for urgent and emergency care services than in recent years. A range of winter resilience schemes had been put in place by the BCCG to contribute to the management of pressures. The BCCG met with all health partners on a regular basis to review the performance of these schemes, and a formal review had been undertaken during Spring 2017, which identified a number of schemes that had been particularly successful. This included the in-reach (Medical Response) Scheme that had been extended to help manage surges through Easter and the May Bank Holidays and continued to see 5-7 patients a day, and for which a full review had been commissioned to identify further opportunities for the scheme. The Patient Champion and GP in the PRUH schemes which redirected patients towards primary care and community services had also been extended, and the GP Access Hubs had successfully provided 120 additional primary care appointments per day and would continue to be utilised going forward. The major contribution of the Transfer of Care Bureau to the success of the winter schemes as an access point and host had been recognised as part of the evaluation process, and a full review had been commissioned to identify further benefits that could be realised through the Transfer of Care Bureau.

The Chief Officer, Bromley Clinical Commissioning Group advised Members that a key area for development in 2017/18 would be the development of a multi-disciplinary approach towards care provision in nursing and care homes, including end-of-life care. The 'Red Bag' scheme had recently been introduced to improve the continuity of care for care home residents during their hospital stays. There were also plans to build on an existing scheme through which a representative of St Christopher's Hospice visited nursing and care homes.

In response to a question from a Member, the Chief Officer, Bromley Clinical Commissioning Group confirmed that the additional primary care appointments available through the GP Access Hubs were allocated on a proportional basis to all Bromley GP Practices based on patient numbers.

RESOLVED that the progress be noted.

8 INTEGRATED CARE NETWORKS - EARLY IMPACT REPORT

The Sub-Committee considered a report providing an update on the early impact of Integrated Care Networks.

In May 2016, a Memorandum of Understanding was signed between Bromley Clinical Commissioning Group (BCCG) and a range of health providers to commit to working together to establish a new model of care within the Borough in the form of three Integrated Care Networks, and to co-design, mobilise and agree delivery trajectories for new pathways within these networks. The first pathway to be mobilised was the Proactive Care Pathway which had been supported by multi-disciplinary meetings of key health professionals including GPs, the Community Matron and mental health professionals, with over 250 patients supported through this pathway since

October 2016. The BCCG had monitored the progress and impact of the Proactive Care Pathway across the three Integrated Care Networks which demonstrated there had been a positive trend of month-on-month increases in the number of patients identified by their GPs as suitable for the pathway. Work was being undertaken to capture feedback and case studies from these patients to ensure that the pathway maintained a patient outcomes-focused approach. Priorities for the next phase of Integrated Care Networks Pathways were being developed through the Bromley System Leaders Programme and four new workstreams were being explored comprising care homes (with a focus on reducing emergency admissions), acute admissions at end of life, integrated therapy services, and integrated heart failure services.

In response to a question from the Chairman, the Chief Officer, Bromley Clinical Commissioning Group confirmed that patients who could benefit from the Proactive Care Pathway were identified by their GPs and referred to the Community Matrons for assessment. Work to evaluate the outcomes of the Pathway and how patients had benefitted was ongoing and to support this, an information sharing agreement had been put in place across all partners.

The Chairman requested that a further update on the Integrated Care Networks be reported to a future meeting of the Health Scrutiny Sub-Committee.

RESOLVED that the progress made with Integrated Care Networks be noted.

9 BROMLEY HEALTH AND WELLBEING CENTRE PROJECT: UPDATE AND PROGRESS REPORT

The Sub-Committee considered a report providing an update on developments in the planning and approval of the Bromley Health and Wellbeing Centre project.

The establishment of a third Health Centre within the Borough to complement the Beckenham Beacon and the Orpington Health and Wellbeing Centre was one of the key proposals of the 'Bromley Out of Hospital Transformation Strategy', which had been developed jointly by the Bromley Clinical Commissioning Group (BCCG) and the Local Authority. It was planned that the Bromley Health and Wellbeing Centre would be one of the three 'hubs' underpinning the new Integrated Care Networks and would play a key role in providing coordinated care to approximately 100,000 people via integrated services. It would also offer significant primary care services for Bromley residents, including a Primary Care Access Hub and the relocation of the Dysart Medical Practice.

Members were advised that funding had been secured for the centre from the NHS Executive's Estates and Technology Transformation Fund in October 2016, following which the Strategic Outline Case had been approved. The Project Initiation Document was expected to receive formal approval by the NHS Executive shortly and work had started on the next formal project stage

of the Post-PID Full Options Appraisal which would identify potential sites for the scheme. A Multi-Disciplinary Project Board had been established to steer the project which included representation by the Local Authority, and Ward Councillors would also be included in the discussions around the site of the proposed centre. It was hoped that services would commence at the Bromley Health and Wellbeing Centre following the build and 'fit-out' of the centre which had an estimated completion date of 24th March 2020.

In response to a question from a Member, the Project Lead, Bromley Health and Wellbeing Centre confirmed that lessons had been learned from the Orpington Health and Wellbeing Centre project and would help ensure the project was delivered efficiently.

RESOLVED that the update be noted and a further update be provided to the Sub-Committee in due course.

10 WORK PROGRAMME 2017/18

Report CSD17068

Members considered the forward rolling work programme for the Health Scrutiny Sub-Committee.

The Chairman proposed that the Task and Finish Group established at the meeting of Health Scrutiny Sub-Committee on 16th March 2017 to review Bromley's care offer for people with dementia and their families and carers be reconvened for 2017/18. This was supported by the Health Scrutiny Sub-Committee and Member nominations were confirmed as Councillor Mary Cooke as Chairman, Councillors Ruth Bennett, Judi Ellis and David Jefferys, and Co-opted Members, Linda Gabriel and Lynn Sellwood. The Chairman noted that Bromley Healthcare had undertaken a range of work on dementia during 2016/17, and requested that the Task and Finish Group link up with Julie Miller, Clinical Quality Team Manager who was the Dementia Lead for Bromley Healthcare.

The need to appoint two Local Authority representatives to the Our Healthier South East London Joint Health Overview and Scrutiny Committee for the 2017/18 municipal year was discussed by Members and it was agreed to recommend the Care Services PDS Committee appoint Councillor Judi Ellis and Councillor Ian Dunn to the Joint Health Overview and Scrutiny Committee.

A Member requested that an update on how reablement provision across the Borough linked up with mental health services be provided to the next meeting of Health Scrutiny Sub-Committee on 7th November 2017.

RESOLVED that:

- 1) The work programme be noted;**

- 2) **The Task and Finish Group for Dementia Services be reconvened for 2017/18, and for membership to comprise Councillor Mary Cooke as Chairman, Councillors Ruth Bennett, Judi Ellis and David Jefferys, and Co-opted Members, Linda Gabriel, and Lynn Sellwood; and,**
- 3) **The Care Services PDS Committee be recommended to appoint Councillor Judi Ellis and Councillor Ian Dunn as Local Authority representatives to the Our Healthier South East London Joint Health Overview and Scrutiny Committee for the 2017/18 municipal year.**

11 ANY OTHER BUSINESS

There was no other business.

12 FUTURE MEETING DATES

The next meeting of Health Scrutiny Sub-Committee would be held at 4.00pm on Tuesday 7th November 2017.

The Meeting ended at 5.29 pm

Chairman

King's King's College Hospital **NHS**
NHS Foundation Trust

**Bromley Health Scrutiny
Sub-Committee
Update
13 June 2017**

**Matthew Trainer
Managing Director, PRUH and
South Sites**



King's **Contents**

Overview of the year

- Finance and performance,
- Quality incl. Patient Experience
- Transformation

PRUH focus

- Performance – Emergency, Diagnostics and Cancer

Annual staff survey results

- Response to annual staff survey results – Trust wide
- Progress since annual staff survey results – PRUH, Orpington, Beckenham Beacon

Priorities for the coming year

2

Kings

Overview of the year: Finance and Performance

A challenging and demanding year for the Trust but we are making progress

- We have delivered a £49m full year deficit in line with the forecast we set at mid-year. We are now mobilising to deliver a full year deficit for FY 17-18 of £39m
- Meeting emergency performance targets has been extremely challenging for the Trust. However detailed plans in place working with our system partners to address this.
- Encouraging signs of improvement in emergency performance have been seen moving through April and May
- RTT performance remains a challenging area for us, but progress being made on developing a recovery plan

Kings

Overview of the year: Quality

The overall quality of the care we deliver remains very high, the Trust has continued to perform well against key outcomes and safety measures

- Mortality rates and relative risk of readmission across sites including PRUH continue to be low – we remain in the best performing quartile nationally.
- Good progress has been made in addressing findings and recommendations of the 2015 CQC inspection
- We launched our clinical transformation programme and this is now gathering pace
- The National Emergency Laparotomy audit team has identified the PRUH and KCH as two of the most improved hospitals for emergency laparotomy patient care.

Kings

Overview of the year: Quality – Patient Experience

We maintain a good level of patient experience and have seen improvements, however more work to be done

CQC National Inpatient Survey results - overall we have maintained similar levels of patient satisfaction compared to the 2015 survey

- Some improvement seen in experience for patients in our EDs feeling they have enough privacy and receiving appropriate
- Fall in satisfaction seen with bed allocation waiting time as an unplanned admission. 62% of patients who responded to the survey had an unplanned admission.
- Patients treated at Orpington Hospital continue to report the best patient experience – rating overall care at 9/10

Friends and Family Test - a number of inpatient wards continue to provide patients with an outstanding experience

- Hyper Acute Stroke Unit and Medical 1 and 2 at the PRUH - 100% of patients would recommend the ward to their friends and family if they needed similar care and treatment.

Kings

Overview of the year: Transformation

The King's Way was launched in June 2016 to support the Trust's continued commitment to improving patient care, by finding ways to increase the quality of its services and increase both efficiency and productivity.

The programme has already made significant impact in the following key areas:

Bariatrics – implemented a new pre-operative pathway that will improve access to treatment, and work has begun at the PRUH to expand services on this site

Hepato-biliary – a model of early discharge was implemented in December 2016, which has improved capacity to admit patients waiting for surgery – new elements of the project will launch throughout 2017

Elective Orthopaedics – teams are already increasing the number of operations. The clinical team have agreed a new model for the service for implementation in 2017/18

Radiology – priorities for improvement have been identified



Kings

Overview of the year: Transformation

Theatres – improvements to productivity are underway with a focus on Day Surgery and Orthopaedics

Patient Flow – changes have been made at both Denmark Hill and the PRUH to increase morning discharges and support complex discharges

Outpatients – improvements in pathways, estate and patient experience began in 2017

Dental – productivity opportunities have been identified across acute and community services

Emergency Department - improvement in pathways have been delivered, supported by the flow programme

Medical Productivity – discussions have been held with teams about job plan changes. We are linking the programme to both Theatres and Outpatient transformation



Kings

Outpatient transformation

Purpose: Reviewing the service across the Trust to improve patient experience, efficiency and productivity

Initial review identified what key groups desired from the service:

Patients – *more information on waiting times and better communication*

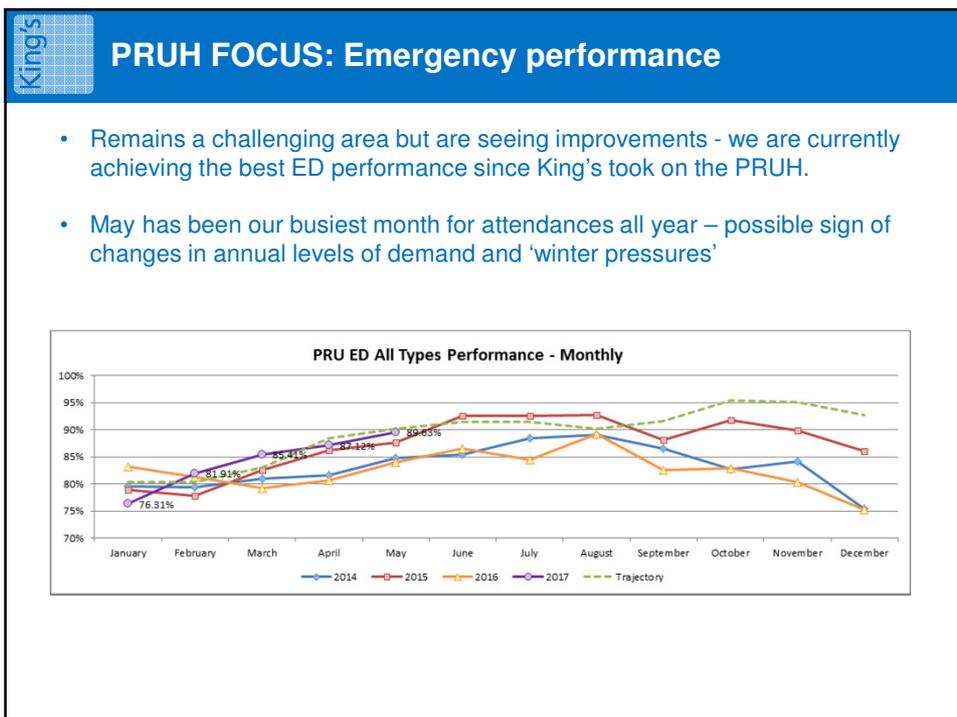
Staff – *more consistent processes across clinics*

GPs – *central booking and information point for appointments*



Vision for Outpatients – delivering an improved service for patients and staff

- Pathways will be supported –with standardised and centralised processes
- Pathways will be built around patients and clinicians so that they can focus on providing world-class care
- Improved use of space and the environment - well designed and fit for purpose facilities
- Digital transformation – explore how this can help to support clinicians in the diagnosis and treatment of patients, as well as create a more efficient and easier way to manage appointments.



Response to annual staff survey results – Trust wide

Detailed plans have been developed in response to the annual staff survey results

E.g. Modernising approach to appraisals

E.g. Focus on improving staff engagement and morale

Our Values
Understanding you • Confidence in our care • Working together • Always aiming higher
Making a difference in our communities

Six major areas of work have been identified

Strengthening relationships between staff and senior leadership

Improving support for managers

Value and recognition

Diversity and inclusion

Career and talent development

Health and wellbeing

Kings Progress since annual staff survey results – PRUH, Orpington, BB

Improvement in staff sickness rates

We have achieved our lowest staff sickness rate of the year across Bromley sites:

- **3.52% in May 2016**
- **2.94% in April 2017**

Positive progress on recruitment

New Consultant hires and offers made in:

- **ED**
- **Post-Acute**
- **Surgery – incl. breast surgery**
- **Anaesthetics**
- **Cardiology**

Kings Priorities for the coming year

- **Improving access:** Continued focus on improving our performance against key performance indicators – e.g. ED, RTT, Cancer
- **Finance:** Identifying significant savings to help the Trust with its financial recovery plan including reducing our reliance on expensive agency staff
- **Recruitment:** Recruiting permanent posts at the PRUH and Orpington – better for continuity of care, sustainable working and Trust finances
- **Quality and safety:** Extend further integrated care approaches across the Bromley health and care system - continuing to work in partnership with the CCG, GPs, community healthcare and social care to do this.
- **End of life care:** Improve care for those in the last year or two of life, ensuring they are in the best place and there is good communication with their families.

