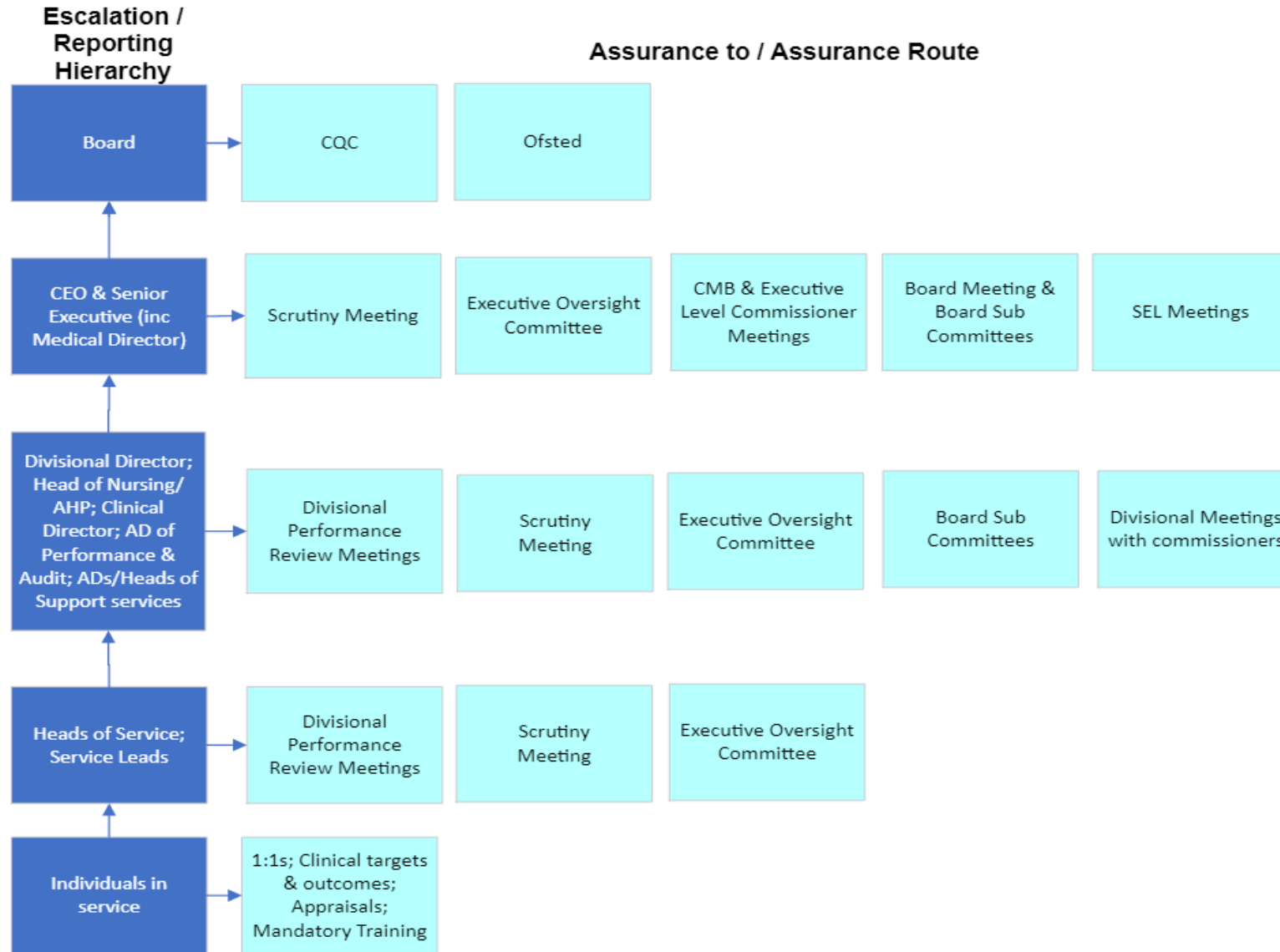




Bromley Healthcare Update

CQC Improvement Plan - July 2022

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



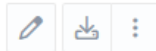
Three Divisions have been established: Adults, Children & Young People and Urgent Community Response.

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



| <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 | |

Refresh of our Values



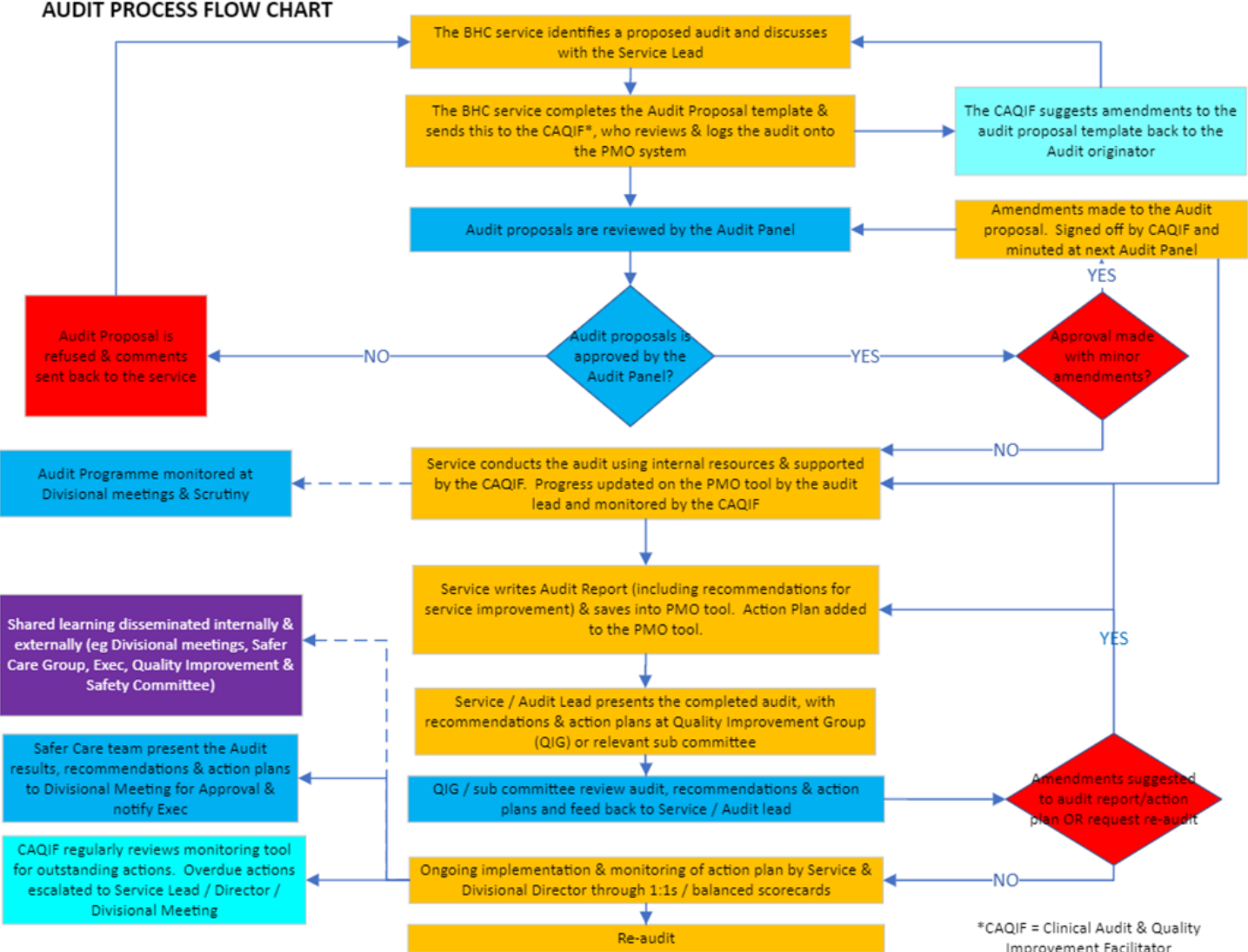
Values Journey

- 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 12th 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

| | Pilot project 1 | Pilot project 2 |
|----------|---|---|
| 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">• Creation of priority categorisation system• Assigned allocator to schedule on Malinko• Daily senior triager | <ul style="list-style-type: none">• Optimised RATT Ax template to include HPW essential elements• Eliminated repeat Ax by therapist in HPW team• HPW daily capacity utilised to step up from RATT |
| Duration | May 1st 2021- Oct 31st 2021 (6 months) | May 1 st 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

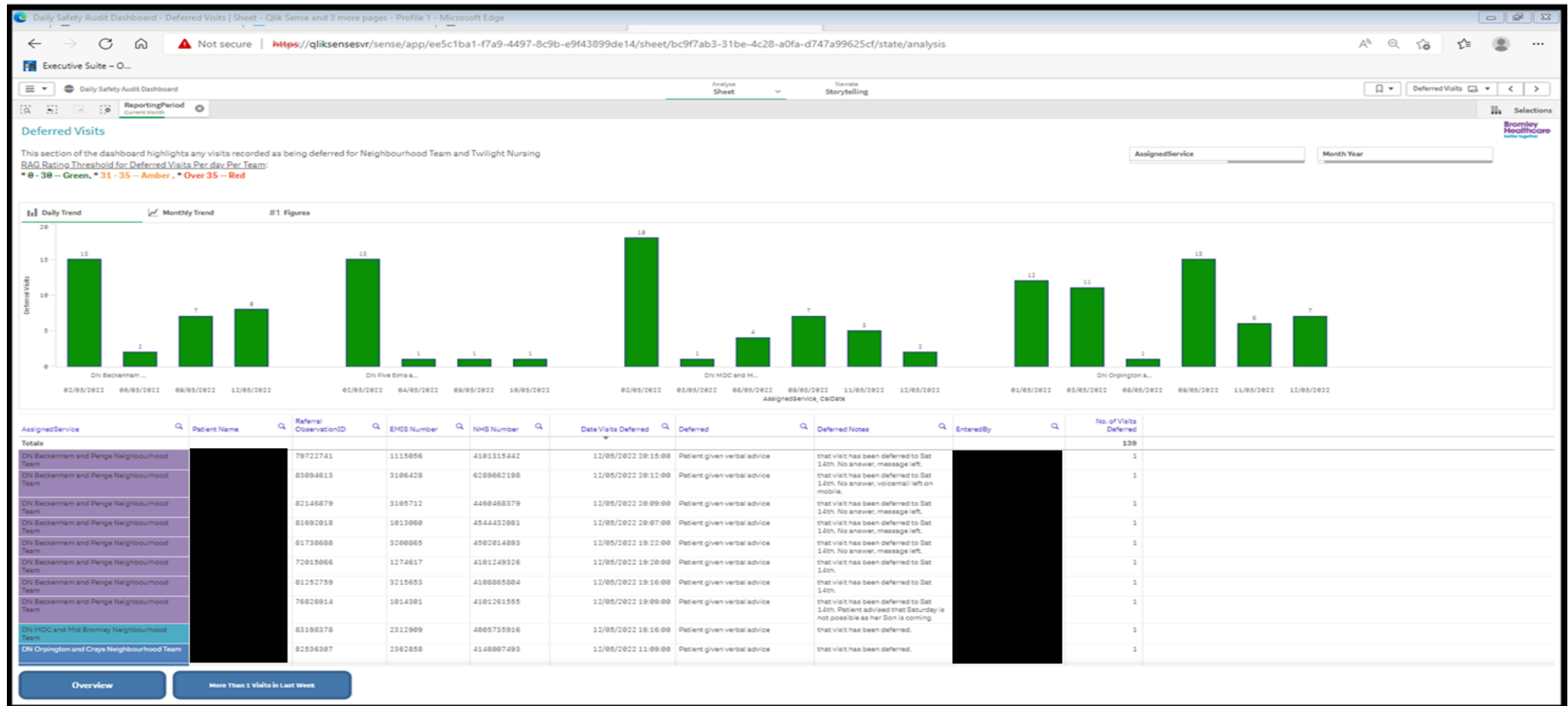
Supporting colleagues to continuously learn

Progress to date

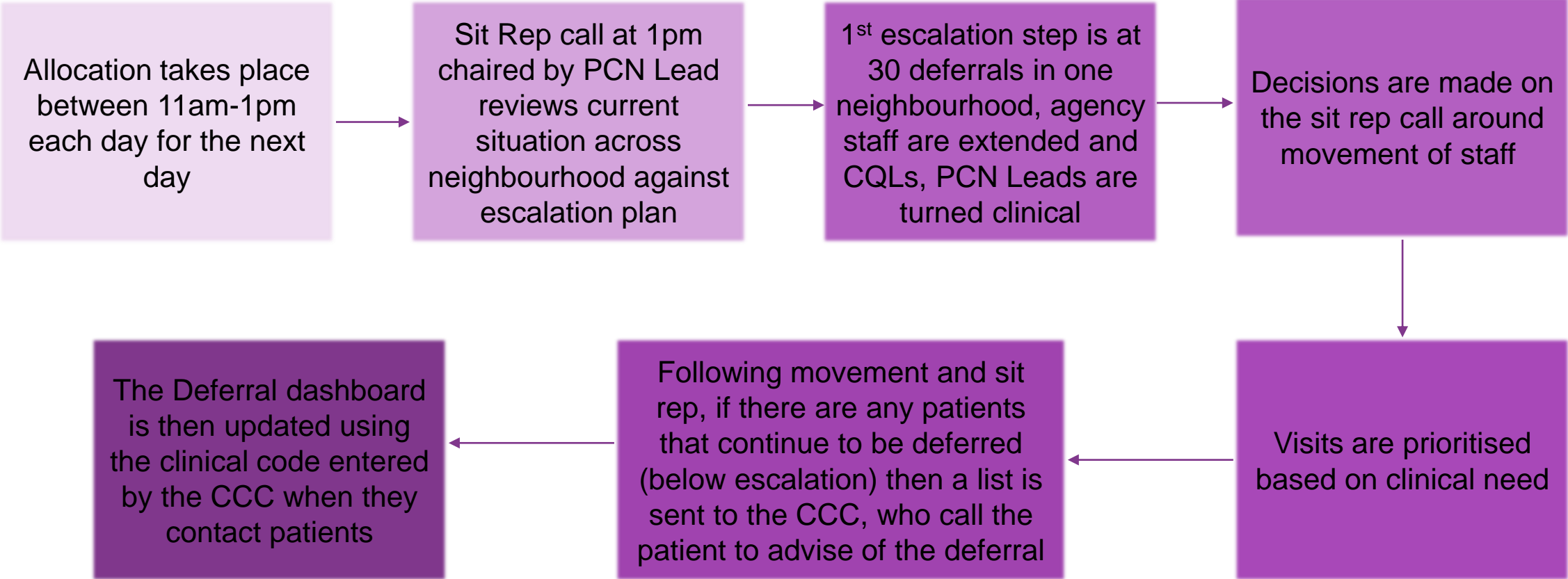
- Implementing a new career pathway. Clinical quality leads are in place supporting each of the four Neighbourhood Teams with professional accountability into the Head of Nursing. New caseload holder posts recognise the increasing complexity of patients and will enable full ownership and accountability 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



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

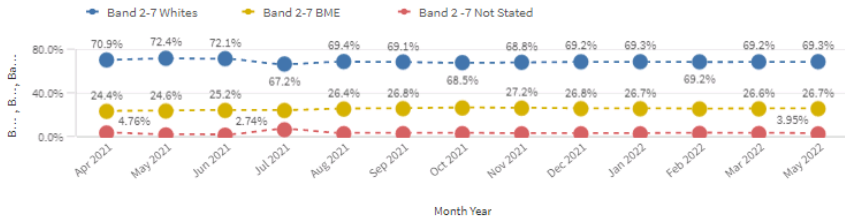
% of Current Employees Band 2 - 7 by Ethnicity Category

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

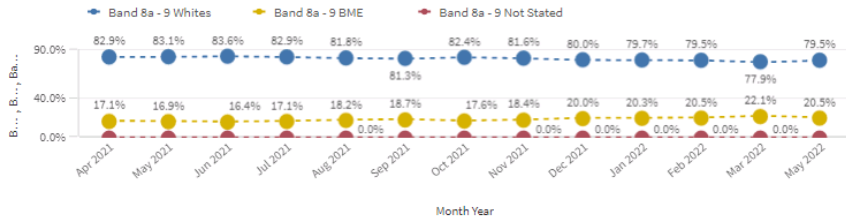
Band 8a-9 Whites: 79.5%
Band 8a-9 BME: 20.5%
Band 8a-9 Not Stated: 0.00%

% of Current Employees Band 2 - 7 by Ethnicity Category



ONLY Band 2 - 7 Representation

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

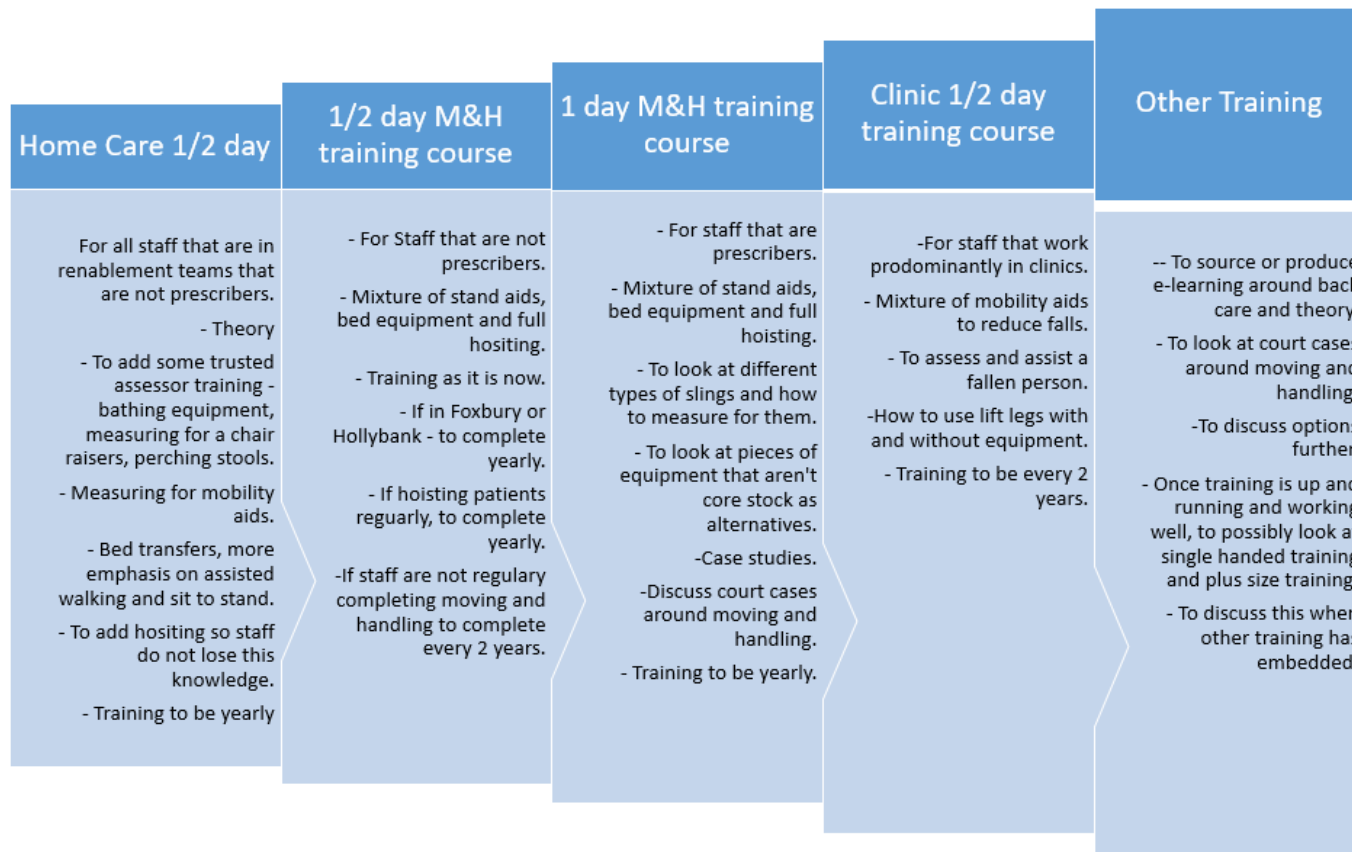


ONLY Band 8a - 9 Representation

- Detailed
- Promotions
- Complaints & Grievances
- Access to Training
- New Starter

Ethnicity Group Month Year

Moving and Handling Update



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 27th 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.

