

**Report to:** Staffordshire County Council Joint Health Scrutiny Accountability Session – 28 November 2016

**Report of:** Paula Clark, Chief Executive, University Hospitals of North Midlands NHS Trust

**Report date:** 9 November 2016

**Subject:** University Hospitals of North Midlands NHS Trust

**Purpose of the report:** To provide Members of the Joint Health Accountability Session an assessment of University Hospitals of North Midlands NHS Trust

## 1. Brief Summary of Provision

University Hospitals of North Midlands NHS Trust is a large acute hospital that provides a full range of general acute hospital services for approximately 860,000 people locally in Staffordshire, South Cheshire and Shropshire. The Trust was created on 2 November 2014, bringing together University Hospital of North Staffordshire NHS Trust and the majority of Mid Staffordshire NHS Foundation Trust. A substantial investment of over a quarter of a billion pounds into NHS services in Staffordshire is enabling the Trust to expand and develop our hospitals to the very real benefit of local people.

The Trust also provides specialised services for three million people in a wider area, including neighbouring counties and North Wales. Our specialised services include major trauma, cancer diagnosis and treatment, cardiothoracic surgery, neurosurgery, renal and dialysis services, neonatal intensive care, paediatric intensive care, paediatric gastroenterology, paediatric respiratory, respiratory conditions, spinal surgery, upper gastrointestinal surgery, complex orthopaedic surgery, laparoscopic surgery, endometriosis, complex obstetrics, nutrition and complex gastroenterology and the management of liver conditions.

More than 200,000 patients attend our A&E departments each year. Many emergency patients are brought to us from a wide area by both helicopter and land ambulance because of our Major Trauma Centre status. We are one of the largest hospitals in the West Midlands and have one of the busiest emergency departments in the country. As a university hospital, UHNM works with Keele University and Staffordshire University, and has strong links with local colleges and schools.

Royal Stoke University Hospital, one of our two sites, is a large acute teaching hospital on the border of Stoke-on-Trent and Newcastle-under-Lyme in Staffordshire. Our other site is County Hospital in Stafford. The Trust's hospitals have more than 1,500 inpatient beds and the Trust operates community hospital beds, in addition to County Hospital and Royal Stoke University Hospital.

Royal Stoke University Hospital was rebuilt between 2009 and 2015 following a £370m private finance initiative (PFI) and the refurbishment of existing buildings and it has 1,350 beds. County Hospital is currently undergoing a £52m refurbishment as part of the integration of the two hospitals and it has 185 beds. It is anticipated that this work will last until late 2017, with complete refurbishment of 5 medical wards, A&E, a new renal unit, a new chemotherapy unit, outpatient refurbishment and a new women's centre.

Our services are organised into four clinical divisions, each of which is made up of a number of individual directorates or departments. Our clinical divisions are Specialised, Surgery, Medicine and Children's, Women's and Diagnostics. The Trust is becoming a clinically led organisation where we are an organisation which sees involvement of clinicians as a fundamental prerequisite in everything we do. The Trust appointed its first four Divisional Chairs in 2014, who lead the four Clinical Divisions. The management of services is now fully integrated across county and RSUH for clinical services and this was completed in January 2016.

The Trust is the regional specialist hospital within the North Midlands. It works in partnership with other acute hospitals in the region, such as Royal Wolverhampton NHS Trust, Burton Hospitals NHS Foundation Trust, Shrewsbury and Telford Hospital NHS Trust and Mid Cheshire Hospitals NHS

Foundation Trust. The Trust is also part of a health sector in Staffordshire and the surrounding areas, and works with the community provider Staffordshire and Stoke-on-Trent Partnership Trust and mental health provider Combined Healthcare NHS Trust. The Trust also works closely with West Midlands Ambulance Service and Midlands Air Ambulance.

Given the Trust's wide geographical reach, it works with a large number of clinical commissioning groups, but most notably Stoke-on-Trent CCG, North Staffordshire CCG and Stafford and Surrounds CCG. The Trust, as a specialist hospital, works closely with the commissioners of specialised services, NHS England. The Trust is also scrutinised by a number of local government bodies, namely Stoke-on-Trent City Council, Newcastle Borough Council, Staffordshire Moorlands District Council, Staffordshire County Council and Stafford Borough Council.

## **2. Safety of Services**

The Trust Board regularly monitors a wide range of measures of patient safety, where relevant comparing our performance with peers or with national performance. Indicators tracked include:

- Complaints
- Healthcare acquired infections
- Venous Thromboembolism
- Patient Safety Incidents
- Harm Free Care
- Pressure Ulcers
- Medication Incidents
- Patient Falls
- Serious Incidents & Never Events
- Mortality
- Patient Related Outcome Measures (PROMS)
- Clinical Audit
- Information Governance

We continue to operate high safety services, which have good patient experience, and excellent clinical outcomes.

Please see attached (*appendix 1*) Month 6 Integrated Performance Report (Quality Care).

## **3. Care Quality Commission**

The Trust has continued to progress the recommendations following the CQC Inspection in 2014 and to seek further assurance regarding improvement. Specifically the Trust has developed its own internal style CQC and internal accreditation methodology called the Care Excellence Framework, conducted its own internal CQC style review and has and sought the opinion of our Internal Auditors.

### The Care Excellence Framework

The Trust has developed and implemented a unique, integrated Care Excellence Framework (CEF) of measurement, clinical observations, patient and staff interviews, benchmarking and improvement. It provides an internal accreditation system providing assurance from ward to board around the CQC domains of caring, safety, effectiveness, responsive and well led. It also reflects CQC standards and provides the Trust with a vehicle to progress from requires improvement to good/outstanding. The framework includes a rating system for each domain and an overall rating for the ward/department based on evidence. The rating ranges through bronze, silver, gold and platinum.

The CEF is supported by a bespoke IT system, acting as a data warehouse to store a suite of measures, with the ability to triangulate and present high level and granular information at ward/departmental level therefore ensuring that ward visits are intelligence driven and tailored. Managers are able to interrogate the system and benchmark themselves against others. The measures provide robust information to

identify areas for improvement and areas of good practice. The clinical area is supported to develop and deliver a bespoke improvement plan and spread good practice.

Every ward will have at least one CEF visit per year reviewing all domains and will receive ad hoc visits throughout the year to seek assurance with regards to individual domains. The CEF is delivered in a supportive style fostering a culture of learning, sharing and improving, and reward and recognition for achievement. The IT system demonstrates improvements and trends over time and helps to benchmark and spread excellence across the organisation.

#### A Full Internal CQC Style Review

The organisation was informed in mid-September that the review using the Care Excellence Framework was to take place. The review was led by the Director of Nursing – Quality and Safety and supported by over 30 reviewers, including nurses, junior doctors, infection prevention, dieticians, governance team, commissioners, Healthwatch and PwC. Three teams were established, led by senior nurses from within the Quality Team. Each team had a lead for Safety, Caring, Effective, Responsive, Well Led, patient interviews and staff interviews. Team members were informed of the key lines of enquiry for their visits based on the findings of the CQC inspection in 2014 and internal measures and intelligence.

The review was conducted throughout the week of 17<sup>th</sup> October 2016, across all hospital sites and additional unannounced visits were conducted week commencing 24<sup>th</sup> October 2016. Over 30 areas were visited including adult, children and maternity inpatient wards, adult and children critical care units, outpatient clinics, radiology, theatres and accident and emergency departments. Each visit commenced and finished with a corroboration meeting. The post visit corroboration meetings included robust comprehensive challenge and allocation of an initial award of bronze, silver, gold or platinum for each domain and the area overall. (NB It must be noted that whilst the Care Excellence Framework (CEF) uses the CQC standards and key lines of enquiry the CEF Awards do not align to CQC rating)

Areas receiving a Platinum Award will be invited to a Trust Board and presented with a certificate. Every area will be required to complete an improvement plan which will be monitored through the continuation of the Care Excellence Framework methodology and Quality Walkabouts. Areas receiving a Bronze Award will be “adopted” by a Quality Improvement Facilitator to provide support.

#### Internal Audit

In October KPMG were commissioned to undertake a review of the areas CQC rated as inadequate in 2014, i.e. accident and emergency, critical care and end of life. KPMG made 17 recommendations and made an overall assessment of significant assurance with minor improvement opportunities.

#### CQC Action Plan

To date 50% of the actions are complete (green) and 50% are partially complete (amber). We have no reds left for the must and should dos.

Following the implementation of Medway there will be another significant number of actions identified as Green.

## **4. Sustaining Services**

#### Winter Plan Arrangements

A verbal update will be provided at the meeting due to arrangements continually evolving and being developed.

#### Children’s Emergency Centre – County Hospital

The Royal College of Paediatrics and Child Health are to visit the Trust as part of their independent review into Children’s Emergency Services at County Hospital. The first visit took place on Thursday 3 November and these will continue throughout the month.

There have been over 240 responses to the RCPCH's public survey regarding Children's Emergency Services at County Hospital. The Trust has encouraged the Staffordshire and Stoke-on-Trent community to provide their views by completing the survey.

The Minor Injuries Unit for Children at County Hospital is operating well with over 350 patients now having been seen on the Unit since it opened. The staff are continuing to benefit from their rotation between Royal Stoke University Hospital and County Hospital, with wider exposure to different situations helping maintain and develop their clinical skills.

The MIU at County Hospital is for under 16s with a range of minor injuries only, including head and limb injuries, wounds, sprains, bruises and fractures. Sixteen and seventeen year-olds can now be seen in the main Accident & Emergency Department at County Hospital.

Accident and Emergency services at County Hospital in Stafford continue to be temporarily suspended for children and people under the age of 16 due to concerns about safety and the Royal College of Paediatrics and Child Health review is scheduled to conclude in January 2017.

The Trust continues to keep the local community informed throughout this process via weekly updates.

### **Staffing**

Please see attached (appendix 1) Month 6 Integrated Performance Report (Workforce).

### **Finance**

Please see attached (appendix 1) Month 6 Integrated Performance Report (Finance).

## **5. Patient Safety and Quality of Care**

Please see attached (appendix 1) Month 6 Integrated Performance Report (Quality Care).

## **6. Complaints**

Please see attached (appendix 1) Month 6 Integrated Performance Report (Quality Care).

## **7. Serious Incidents**

Please see attached (appendix 1) Month 6 Integrated Performance Report (Quality Care).

## **8. Mortality Rates**

Please see attached (appendix 1) Month 6 Integrated Performance Report (Quality Care).

## **9. Performance**

Please see attached (appendix 1) Month 6 Integrated Performance Report (Operational Delivery).

## **10. Workforce**

Please see attached (appendix 1) Month 6 Integrated Performance Report (Workforce).

## **11. Finance**

Please see attached (appendix 1) Month 6 Integrated Performance Report (Finance).

## **12. Public Engagement**

The Shadow Council of Governors is the main engagement group. The shadow governors are responsible for representing the interests of members and stakeholder organisations in the governance of UHNM. They act in the best interests of the Trust and adhere to its values and code of conduct. The

Shadow Council of Governors represent the people the Trust serves, the staff who provide our services and the partners we work with in the local community. It comprises of three groups - elected members from their own area, elected staff members and those appointed by key organisations who work closely with the Trust. The majority of Shadow Governors are publicly elected from the following areas served by the Trust:

- Stoke-on-Trent – 4 (1 vacancy)
- Newcastle-under-Lyme – 2
- Stafford – 2
- Staffordshire and Surrounds – 1
- South Cheshire – 1 (Vacancy)
- Shropshire – 1 (Vacancy)
- Staffordshire Moorlands – 1

There are nine Staff Governors elected from the following professional areas:

- Medical and Dental – 2 (1 vacancy)
- Nursing and Midwifery – 2
- County Hospital – 2
- Other Healthcare Professional – 1
- Non-clinical (admin) – 1
- Non-clinical (facilities) – 1

There is also one appointed Patient Representative, who form the Shadow Council of Governors, which is chaired by the Chair of the Trust Board. The Shadow Council of Governors has no statutory powers within an NHS Trust. However, the intention is to provide our Governors with the opportunity to fulfil the statutory responsibilities that Governors of Foundation Trusts are required to undertake, so far as appropriate. The Governors undertake development via the four workshops which take place during the year, in addition to the four formal meetings.

In addition, the Trust holds a number of public engagement events. The main events each year are the Trust's AGM and UHNM Charity's AGM, in addition, the Trust holds monthly Board Meetings in public. There are engagement events throughout the calendar that include the public on the redesign of clinical services and on-going development of services.