

Annual Public Meeting 2014



Welcome

Sir Hugh Taylor
Chairman



Review of the last year and future plans

Sir Ron Kerr
Chief Executive

We've been busier than ever this year . . .

We had more than 2 million patient contacts in 2013/14:

- 1,033,000 outpatients and 82,500 day cases
- 866,000 in our community services in Lambeth and Southwark
- 83,000 inpatients
- 138,000 emergency attendances in A&E at St Thomas'
- 6,847 babies delivered in our Maternity Unit
- 96% of A&E patients treated within 4 hours
- 96% of outpatients and 91% of inpatients treated within 18 weeks of GP referral

Fit for the Future

Our *Fit for the Future* programme aims to improve quality, safety and efficiency:

- Low mortality – named ‘Trust of the year for London’ by the Dr Foster Hospital Guide
- Small numbers of hospital acquired infections – only 3 MRSA cases in 2013/14
- High quality facilities – positive patient feedback about food and cleanliness in the Patient-Led Assessments of the Care Environment (PLACE) inspections
- Financial stability - our surplus of £15.4 million (before technical adjustments) means we can invest in improvements to our services and facilities

Building the future for our patients

One of the most complex capital development programmes in the NHS:

At Guy's

- Construction of a new Cancer Centre (opening 2016) is underway – you can help add the finishing touches by supporting Guy's Cancer Centre Appeal
- A major project to reclad Guy's Tower has been completed

At St Thomas'

- Work has started on the Emergency Floor project – you will hear more about this later
- Redevelopment of East Wing is due to be completed in early 2015

Building the future for our patients

In the community

- The new Lane Fox Remeo Centre at East Surrey Hospital in Redhill for patients with complex respiratory disorders
- We are developing a new Cancer Centre and a new Kidney Treatment Centre at Queen Mary's Hospital in Sidcup (both opening 2016)
- Our staff are providing services in the new West Norwood Health and Leisure Centre

Working with our partners

- Clinical Commissioning Groups – we work closely with GPs who now commission ('buy') health services for their local communities
- Out of hospital care – through Southwark and Lambeth Integrated Care, funded by Guy's and St Thomas' Charity, we are working with social services, GPs and patients to deliver the right care for older people in the right place at the right time
- King's Health Partners – a new 5-year plan published in July sets out our plans to join up physical and mental health, achieve better public health, and integrate services for patients in south east London in all care settings

Co-ordinating care in our hospitals and local community

Evelina London

- On 1 April 2014 Evelina London Children's Hospital joined together with community health services for children in Lambeth and Southwark
- Working with GPs, schools and social services to provide the right care in the right place at the right time
- One team across hospital and community services caring for children with long-term conditions who need regular help
- Care closer to home for children with less serious conditions to avoid a hospital stay

Co-ordinating care in our hospitals and local community

Adult Local Services

- Bringing together staff to provide the best care for adult patients whether they are in hospital or at home
- Improving the continuity of care that patients receive wherever they are treated
- Enabling people to stay in their own homes and improving their discharge home from hospital if they need to be admitted through the @home service and Enhanced Rapid Response Service

Looking forward

We aim to get the basics right to provide excellent care for patients while investing in improvements to our services.

Our 5-year strategic plan is to continue to be a leading provider of **local**, **emergency**, **elective** (planned /routine) and **specialist** health services

- Integrating **local** services for children and adults
- Continuing to be a major **emergency** centre at St Thomas'
- Guy's as the focal point for **elective** and ambulatory care (eg planned surgery and day care)
- Co-location of **specialist** services with research and teaching

Council of Governors' report

Professor John Porter
Lead Governor

Project WoW (ways of working)

Jim Domingo, Ward Manager, Albert Ward

Karen Jackson, Ward Manager, William Gull Ward

Joyce Kakala, Ward Manager, Alexandra Ward



Bringing nursing back
to the bedside

Project WoW

- Launched on 3 wards at St Thomas' in April 2014 to increase efficiency and effectiveness of ward nursing while delivering compassionate care 24/7
- We aim to provide more patient centred care and better continuity of care
- Part of the Trust's *Fit for the Future* programme to improve quality, safety and efficiency

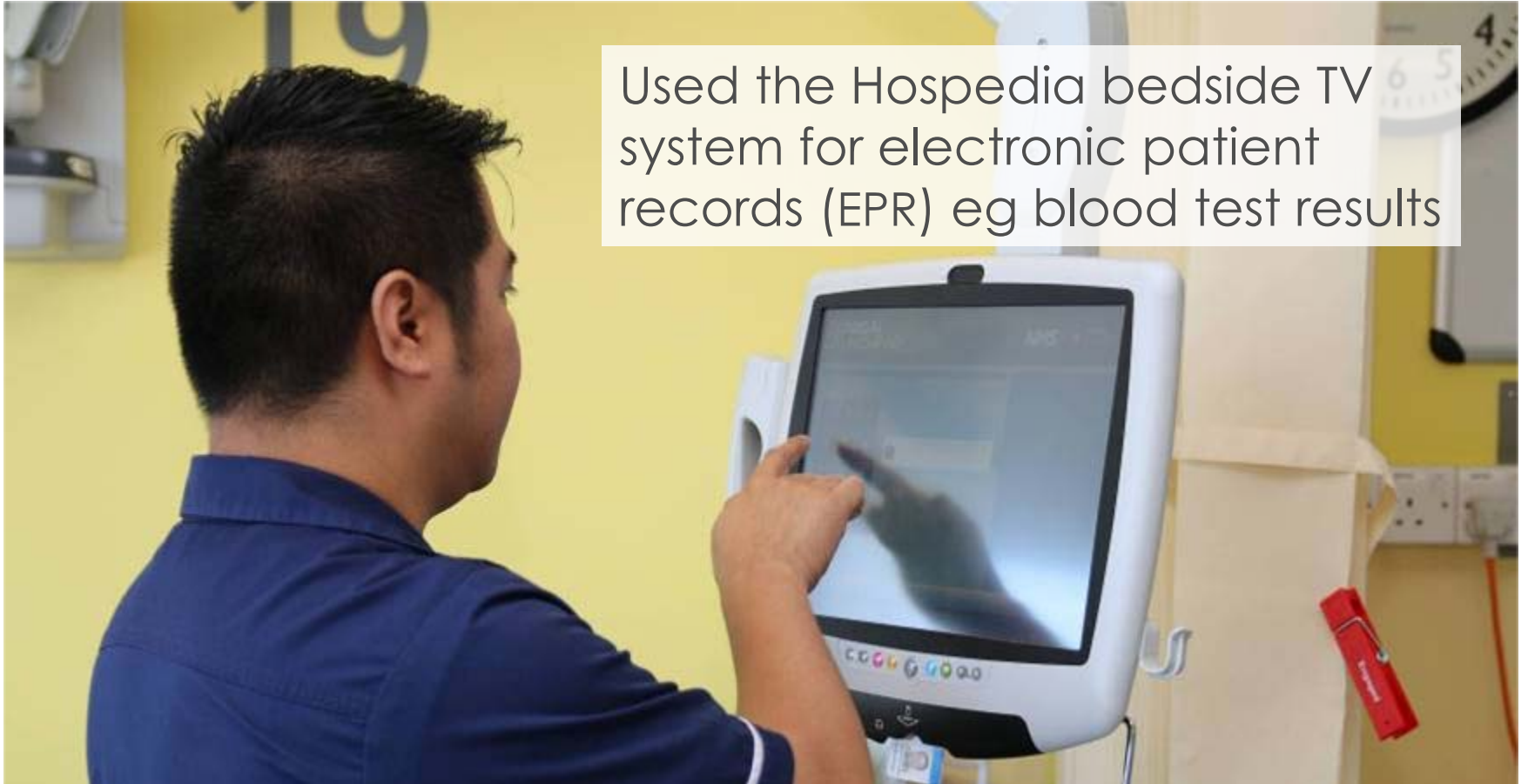
Bay Based Nursing

- Ensure our patients feel safe by increasing the visibility of nurses
- Maintain communication with our patients and families
- Reduce falls
- Improve continuity of care
- Maintain hourly ward rounds by nurses

Bay Based Nursing

What have we done to increase nurses' time with patients?

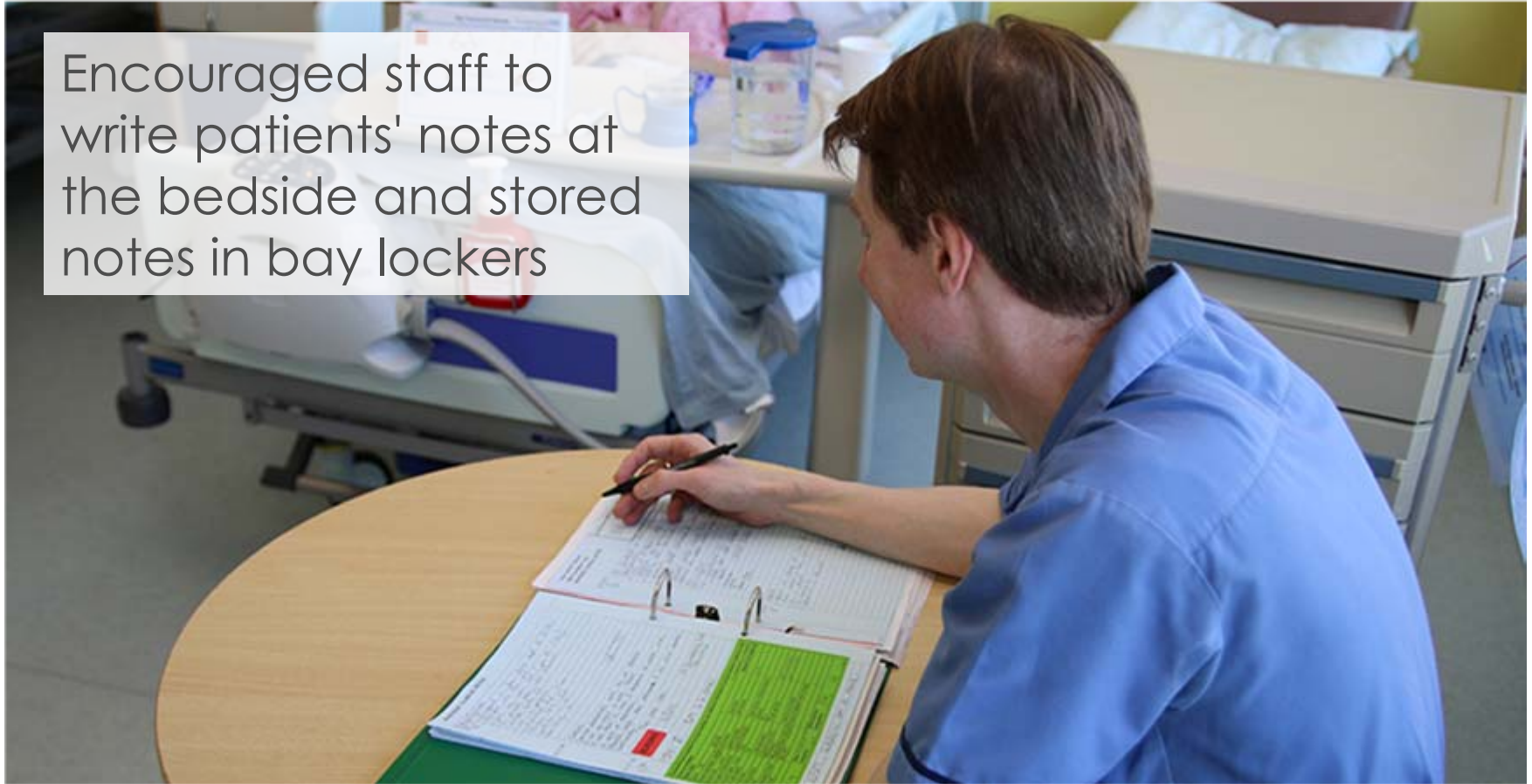
Used the Hospedia bedside TV system for electronic patient records (EPR) eg blood test results



Trialled
phones
in bays
so staff
don't
have to
leave
the
bedside



Encouraged staff to
write patients' notes at
the bedside and stored
notes in bay lockers



Ward Discharge Nurse - aims

- Improve continuity of care and communication with patients and their loved ones
- Highlight possible complex discharges earlier
- Increase the involvement of patients and their loved ones in planning their discharge
- Reduce the length of time patients have to stay in hospital
- Help patients leave hospital earlier in the day

Ward Discharge Nurse – better care

- Better continuity of care because a ward has the same discharge nurse for 1 week
- Improved communication with patients and their families so they know who to speak to about when they will be going home
- Improved communication with all staff on the ward about planning for patients to go home
- More patients are able to leave hospital earlier in the day (before 12 noon) than before

What have we achieved so far?

- The amount of time that nurses spend with patients has increased from 40% to 70% in 3 months on the 3 wards
- Patient satisfaction with care on the 3 wards remains high – as measured by the Friends and Family Test questionnaire
- Nurses' satisfaction with the quality of care they provide has increased significantly

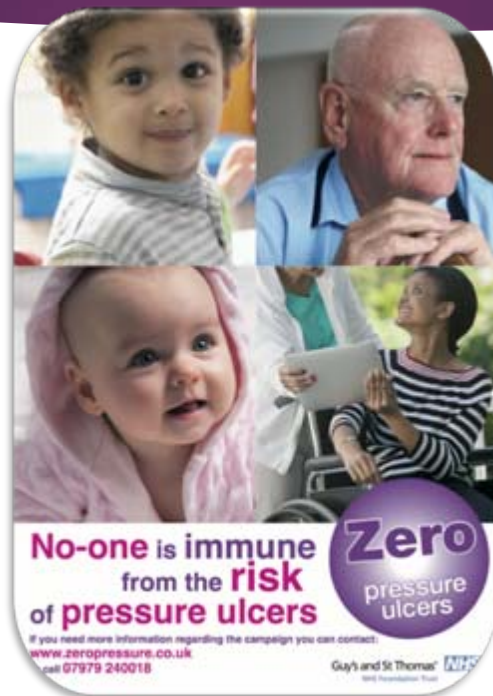
Zero Pressure

Claire Acton - tissue viability manager

Sara Nelson – clinical project lead



Pressure ulcers can affect anybody





How big is the problem?

In the UK

Every year 700,000 people are reported as having a pressure ulcer - up to 80% are unavoidable

In Lambeth and Southwark

1% of the total number of recorded pressure ulcers in the UK - 5,600 are potentially avoidable





What is Zero Pressure?

A knowledge and education programme in Lambeth and Southwark:

Phase 1 – Community nursing homes, residential homes and care agencies

Phase 2 – GP surgeries, pharmacies, school nurses, carers' groups



Information for patients



Zero
pressure ulcers

pressure ulcers.
prevention is better than cure.

Anybody who sits or lies down for long periods of time is increasing their risk of getting pressure ulcers. Your Turn is designed to help people understand the causes of pressure ulcers and, therefore, prevent them in the first place.

There is a website to help answer some of the questions you might have about pressure ulcers, whether you or somebody you know might be at risk. Visit www.zeropressure.co.uk

For specific questions about your personal circumstances please seek advice from your healthcare professional.

For further information on the prevention of pressure ulcers visit www.zeropressure.co.uk

Guy's and St Thomas' 
NHS Foundation Trust

Helping community staff to provide safer care

pressure ulcers safety cross.



Month : _____

Team: _____

Days since last pressure ulcer: _____

		1	2		
		3	4		
		5	6		
7	8	9	10	11	12
13	14	15	16	17	18
19	20	21	22	23	24
		25	26		
		27	28		
		29	30	31	

For further information on the prevention of pressure sores visit www.zero-pressure.co.uk

Guy's and St Thomas NHS
NHS Foundation Trust

Pressure Ulcer Triggers

Guy's and St Thomas NHS
NHS Foundation Trust



Does the person you are looking after have any or a combination of the following:

	Mon	Tues	Wed	Thur	Fri	Sat	Sun
I Does the person you are looking after have any incontinence problems which are new or there is no care plan for?							
S Soreness or redness of the skin is one of the first indicators the person you are looking after may be developing a pressure ulcer, especially if it is over a pressure point such as heels, buttocks and base of the back.							
U Being unwell often leads to an increased likelihood of developing a pressure ulcer. Has the person you are looking after had a recent visit from the GP or need to see the GP?							
R Reduced mobility is one of the key contributing factors to developing a pressure ulcer. Is the person you are looking after spending more time in the chair, not going to bed?							
F Adequate food and drink is essential to keep people healthy. Reduced intake of either/both will increase the risk of developing pressure ulcers. Is the person you are looking after leaving food and drink that is being offered?							

If 4 or more areas are ticked on 3 or more days or Skin is ticked on 2 consecutive days please refer to a nurse/GP.



Celebrating the success of 100 days without an acquired pressure ulcer in our local nursing homes





Who are we working with?

- ▶ Hospital staff: senior nurses, ward teams, discharge team and transport areas, security, communications team
- ▶ Externally: pharmacies, GPs, Clinical Commissioning Groups, Southwark carers, community nursing teams, school nurses





What have we achieved so far?

- ▶ Database of contacts
- ▶ Lambeth and Lewisham Pharmaceutical Committee
- ▶ Southwark carers
- ▶ Nursing homes
- ▶ Residential homes
- ▶ Website
- ▶ Mobile phone app
- ▶ Better, more timely care for our patients



Creating the new Emergency Floor at St Thomas' Hospital

Dr Katherine Henderson

Dr John Criddle



A&E always in the news



Ambulances 'face long delays at A&E' - BBC figures reveal

By Nick Triggle
Health correspondent, BBC News



Long handover delays stop crews responding to other urgent calls, as Branwen Jefferys reports



Fresh 'perfect storm' concern over Aberdeen A&E staffing

NHS Scotland said waiting times were improving.



Ambulances were stuck last week. The NHS in England narrowly missed its four-hour A&E waiting time target last week, official figures show. Key NHS operation 'being rationed' Hospitals: A system under pressure

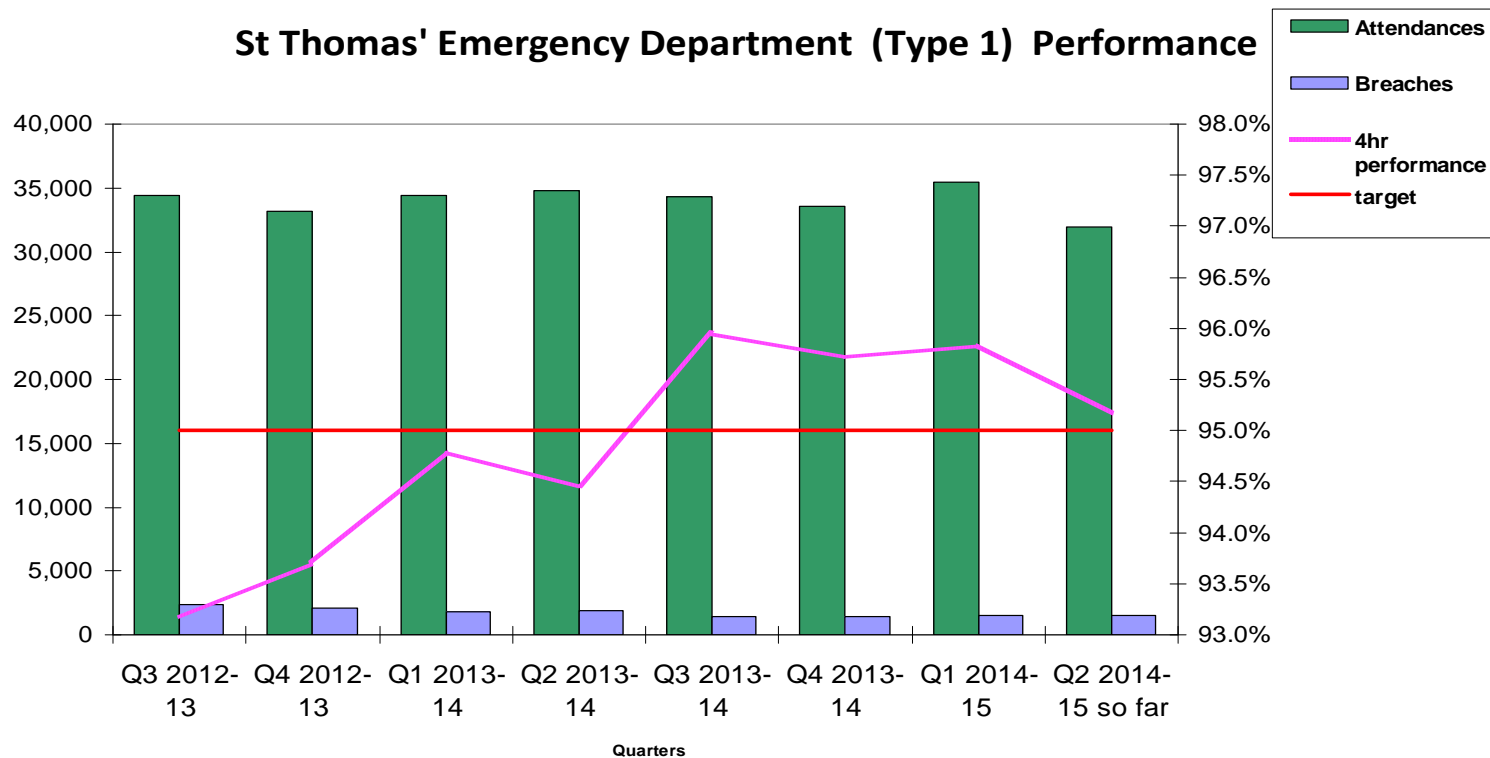
How are we doing?

- We saw 138,000 patients last year – so we are a big department
- That is 380-450 a day, admitting 18-20%
- 185 adult Majors type patients and 65 children
- 130 seen in Urgent Care – minor injuries and illness area staffed by GPs, A&E doctors and Emergency Nurse Practitioners
- The Urgent Care Centre at Guy's sees an additional 70-100 patients a day

Our performance

- The 4 hour access target
 - Patients should be seen, assessed and treated and either discharged home or admitted to a ward within 4 hours of booking in to the Emergency Department
- The target is that 95% of patients should receive this standard of care
 - The majority of the remaining 5% should have clinical reasons for needing a longer stay in the Emergency Department
- Easy to measure and a good proxy for measuring how well the Emergency Department functions and how well the hospital manages inpatient pathways
 - Also a proxy for overcrowding (we know this is bad for patient care)
- The 4 hour target is often in the news

St Thomas' Emergency Department (Type 1) Performance



Are we safe and effective?

- Safety
 - Senior staff available
 - Guidelines and policies
 - Governance meetings to discuss risk, incidents and complaints
- Effective
 - Meeting local needs (older people, homeless, party drug users)
 - Working with the community

Are we adequately staffed?

- There is a national problem with recruitment of Emergency Medicine doctors and nurses
- We take every opportunity we can to find excellent staff because motivated, happy staff provide the best and safest patient care
- We are increasing the number of Consultants
- Nursing recruitment
- Building loyalty

The Emergency Care Pathway transformation project

Be a world-class Emergency Department

- Deliver the rebuilt 'Emergency Floor' including acute admission wards and Urgent Care
- Maintain safe, high quality services during the rebuild
- Be a specialist emergency centre

Improve our care pathways for patients

- Provide excellent care led by senior staff within and beyond the Emergency Department
- Provide a seamless journey for patients who need admission to hospital
- Ensure safe discharge from hospital with appropriate, co-ordinated follow-up care

Emergency Floor rebuild: Delivering excellence in patient safety and care

- 2 year project, completes 2016
- Transform environment for emergency and urgent care
- Better patient experience
- More efficient, consistently high quality patient care
- Patient involvement from the outset



How will it be better?

- Optimal co-location of departments
- Increased space
- Privacy and dignity
- Same sex accommodation
- Best infection control
- Better environment for vulnerable patients
- Better support facilities





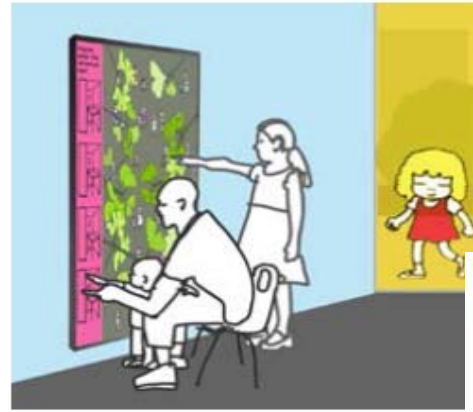


3

Art and design

Children's Emergency Department and short stay ward

- Dedicated waiting and registration area
- 6-bed short stay ward
- Child and young person friendly environment
- Needs of vulnerable patients



What have we achieved so far?

- New Hand and Plastics Department open
- Admission Ward beds opening May 2015
- Business as usual but...
 - Expect changes to the whole St Thomas' site
 - Departments will be in different areas
 - Watch out for signs
 - Volunteers
- Completion 2016



Questions and answers