

Annual Public Meeting 2015

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Welcome

Sir Hugh Taylor
Chairman

#GSTTAPM

showing
we **care**

Guy's and St Thomas' **NHS**
NHS Foundation Trust



To mark the 75th anniversary of the first bombs landing on Guy's and St Thomas' hospitals in the Blitz, we remember the 10 members of staff who were killed at St Thomas' in World War II

Review of the last year and our future plans

Sir Ron Kerr
Chief Executive

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

We had more than 2 million patient contacts in 2014/15:

- 1,072,000 outpatients and 88,000 day cases
- 859,000 in our community services in Lambeth and Southwark
- 85,000 inpatients
- 192,000 emergency attendances
- 6,865 babies delivered in our Maternity Unit
- 95.3% of A&E patients treated within 4 hours
- 8% increase in demand for planned inpatient treatment

Fit for the Future

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

- Low mortality – our Hospital Standardised Mortality Ratio (a key measure of safe, high quality care) is one of the lowest in the NHS
- Preventing hospital acquired infections – only 4 MRSA cases in 2014/15
- 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 £18.9 million (before technical adjustments) means we can invest in improvements to our services and facilities
 - our staff made £64.1 million of efficiency savings in 2014/15

Building the future for our patients

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

At Guy's

- Our new Cancer Centre is due to open in Autumn 2016
- The Bermondsey Centre is a new hub for dermatology, allergy and other specialist outpatient clinics

At St Thomas'

- The Emergency Floor project is well underway – our new Admissions Ward is now open
- Redevelopment of East Wing is due to be completed in Autumn 2015

Building the future for our patients

In the community

- The Amputee Rehabilitation Unit in Kennington has treated more than 200 patients since opening in 2013
- The new Lane Fox Remeo Centre at East Surrey Hospital in Redhill for patients with complex respiratory disorders opened in 2014
- Our new Cancer Centre and Kidney Treatment Centre at Queen Mary's Hospital in Sidcup will open in 2016

Working with our partners

- South London Genomic Medicine Centre – we host this partnership which was a successful bidder in the Government’s 100,000 Genome project in December 2014
- King’s Health Partners – a 5-year plan published in July 2014 set out our plans to achieve excellence through the integration of world-leading research, education and patient care
- 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

Looking forward

We aim to get the basics right to provide excellent care for patients while investing in improvements to our services – in an increasingly tough financial climate.

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

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Members' vote on a proposed change to the Foundation Trust constitution

Resolution

That the members of Guy's and St Thomas' NHS Foundation Trust approve the adoption of the election rules presented to the Annual Public Meeting held on 10 September 2015 such that they are incorporated at Annex 3 of the Trust's Constitution, replacing the rules previously included there.

Acute Older Persons' Unit

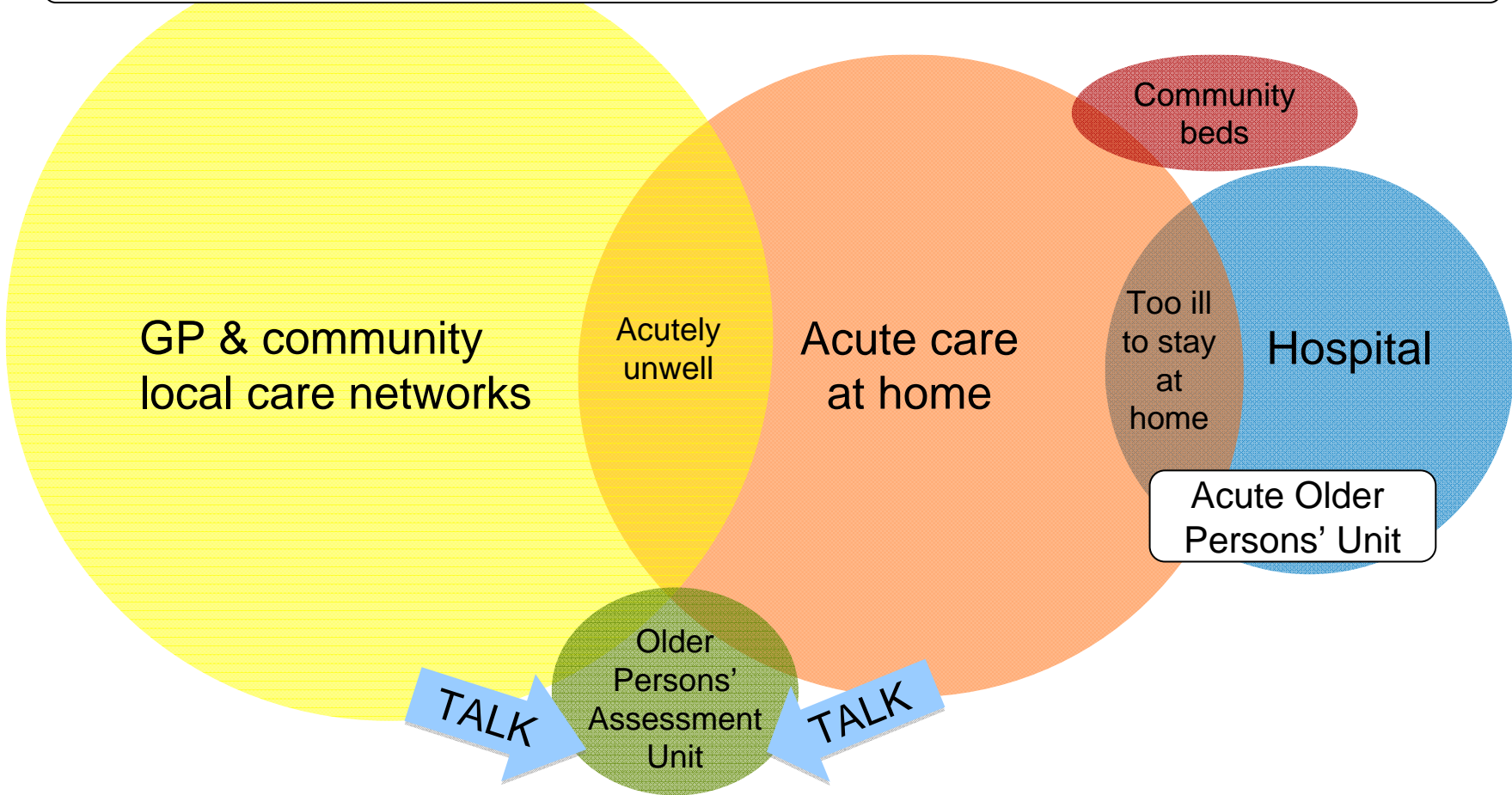
Improving emergency care for older
people within the integrated care pathway
across community and hospital

Dr Rebekah Schiff
Clinical Lead for Ageing and Health

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Integrating care across community and hospital

Locality Geriatricians



Background

What is the usual experience of older people coming to A&E?

- Older people spend on average 3 hours 49 minutes in A&E
- 15% of older people spend more than 4 hours in A&E
- Older people attending A&E are more likely to be admitted to hospital
- Once admitted, older people stay in hospital longer
- Older people admitted to hospital can be affected by delirium, hospital acquired infections, pressure sores, loss of independence etc



Nurse Triage

A&E Majors

Acute Older
Persons' Unit

A&E Minors

Specialist assessment

Home
appropriate specialist
ongoing care

Admitted
appropriate ward

Outcomes

- Around 90% of patients not admitted to hospital from A&E
 - Utilisation of appropriate community and outpatient services to provide health and social care instead
 - Readmission rate similar to those with inpatient stay
- Older people spent less time in A&E
 - More capacity in A&E to see other patient groups
 - More capacity in medical wards and older people's wards

Conclusions

A new model of care that utilises new community services to ensure that older people who can be cared for at home are no longer admitted to hospital and still receive specialist care.

@home

Bringing care closer to home – the @home service

Karen Titchener

Deputy Head of Nursing, @home service

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Introduction

- @home was launched in January 2014
- We now care for around 300 patients every month
- Our patients are people living in Lambeth and Southwark over the age of 18 who would otherwise be at risk of a hospital admission
- Provides **acute healthcare** at home
- Supports **early discharge** from hospital
- **Prevents** avoidable **admissions and readmissions to hospital**

Bringing care closer to home

- Patient-centred acute care in their place of residence
- Referrals by other medical professionals (eg GP)
- Urgent medical assessment within 2 hours of referral
- Team operates 365 days of the year 8am-11pm – soon to be 24/7
- Home visits by consultant
- Daily visits up to 4 times a day for up to 7 days
- Intensive nursing, physiotherapy, occupational therapy

Our patients

We care for patients with conditions including:

- Chronic Obstructive Pulmonary Disease (COPD)
- Heart failure
- Intravenous antibiotics for wound infections, chest infections, cellulitis, urinary tract infections
- Complex falls
- Abnormal blood results eg dehydration
- Recovery after surgery
- Palliative care in partnership with specialist services

Our services

- High intensity clinical monitoring, with short-term intervention in an acute episode of ill health in a safe and timely manner
- Urgent clinical assessment for acutely unwell patients, for example ECG
- Treatment and ongoing monitoring, for example nebulisers
- Physiotherapy and occupational therapy intervention
- Home review

Benefits to patients and the NHS

Most people prefer to stay at home if they can because:

- Most people are happier in their own social environment
- There is a reduction in pain, anxiety and confusion
- They are more likely to retain mobility and independence

Care closer to home contributes to making the NHS more sustainable

#hellomynameis

Dame Eileen Sills
Chief Nurse

hello my name is...

I pledge to wear my badge and I agree to:

- . Always introduce myself to patients and visitors
- . Treat them as I would a member of my own family
- . Always see the person behind the condition
- . Treat people with respect and dignity

What do our patients think?

“My eyes were drawn to the yellow badge and the very visible name which helped me focus. It was so reassuring to know the name of the person caring for me when I felt at my most vulnerable.”



“I really like knowing who is looking after me, it makes me feel safe.”



“You see the name, and if they talk to you a wee bit then they’re a friend, and that’s how it should be I think.”

What do our staff think?

“For the first time in the eight years that I have worked here, I am being called by my name when the staff on the ward talk to me – I really like that.”



“I really enjoy knowing who people are, and being able to naturally mention people by name when we are talking, it feels far friendlier to me.”



Questions and answers