

Council of Governors Meeting

29th April 2015

(CG/15/10)

Council of Governors Report: Quality and Engagement Working Group Report Meeting held on 10th February 2015

Status: *A paper for Information*

History: *Regular report*

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Governor

Council of Governors' Meeting

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A paper prepared by Mark Tsagli, Patient Experience Facilitator, and presented by Sue Gallagher.

Quality and Engagement Working Group Report

1.0 INTRODUCTION

This report details the meeting of the Quality and Engagement Working Group, which took place on the **10th February** at the Education Centre, York Road.

2.0 ATTENDANCE

The meeting was attended by: Sarah Allen (Patient Experience Manager), John Burns, Andrea Carney (Trust Patient & Public Engagement Manager), Yvonne Craig Inskip, Sue Gallagher (Lead), Sue Hardy, Tom Hoffman, Jamie Keddie (Patient & Public Engagement Specialist), Amanda Millard (Director of Patient and Carer Experience), Elizabeth Palmer (Deputy Director of Assurance), John Porter, Barry Silverman, Devon Allison, Jenny Stiles, Ken Hayes, Mark Tsagli (Patient Experience Facilitator), Brynn Williams and Paula Young

Also in attendance were: Beth Wilcox (Head of Complaints), Mairead Griffin (Deputy Chief Nurse, Cancer and End of Life Care)

Apologies were received from: Gail Thompson

3.0 NOTES OF THE LAST MEETING

The notes were approved as an accurate record of the last meeting.

4.0 MATTERS ARISING

Fracture Clinic:

4.1 Governor representatives updated colleagues with the Trust's response following their concerns about the interaction of the Fracture Clinic and the Emergency X- ray facility within the New Emergency Unit:

- Progress on building work is far advanced. Response received indicates the X-ray department cannot be moved at this late stage.
- Governors recognised there is an issue with the layout, however, hope that this can be revisited once the A&E redevelopment is completed.
- Governors noted that patients' experience of navigating their way to the Fracture Clinic will be affected by the ongoing works, but felt remedial measures can be put in place, such as getting porters to help patients as much as possible and perhaps repositioning the reception desk in the fracture clinic so that it was not between the waiting area and consultation rooms.

- 4.2 Director of Patient and Carer Experience informed the group 20 Volunteers are due to start helping in the A&E Department soon. Part of their remit will be to assist patients with way-finding.

Call Handling:

- 4.3 The Director of Patient and Carer Experience provided an update regarding call handling and length of time of unanswered calls for clinics. Governors noted:
- Survey of call logging carried out: noted waiting times of between 6 to 24 minutes before calls were answered.-24 minutes for the pain clinic – but there was a difficulty in monitoring call times on telephones that were not linked to a call centre.
 - There are a number challenges in retrieving information and the service lead was considering a survey of where all the extension numbers linked to. It had been found that the fracture clinic was not linked to the orthopaedic call centre and that two of the extension numbers were constantly engaged and one was unmanned.
 - This exercise is still work in progress and the telephone team are in discussions about how this can be resolved. In the meantime, they are applying for more call centre licences to get more evidence on the length of time patients have to wait on phone.

Action: Director of Patient and Carer Experience will provide within one month a date when the Trust anticipates the issue of ensuring the phones in the Fracture Clinic are answered will be resolved. The Director will also investigate how data can be made available regarding telephone call handling and the longest unanswered call times in individual clinics and services and report back to the next Governors meeting.

5.0 REPORTS FROM COMMITTEES

5.1 Adult Local Services Committee (ALSC)

Governor Representatives in attendance at the meeting noted the following:

- Partnership with community and services – the increasing joint working between hospital medical and community health and social services was noted and welcomed
- Challenges with regard to shortages of community nurses continued, but progress was being made to address this

5.2 Evelina London Development Committee

Governor Representatives in attendance at the meeting noted:

- Evelina website still under development and now available to Governors. Call to Governors to visit the website, review and feedback
- Revised draft terms of reference going forward to renaming the Board as Children's Services Committee and extend remit to overall operational and quality performance
- Discussions ongoing with the Charity on Children's and Young People's programme
- Relationship with KHP and Trust partners being taken forward by Chairman - research policy still requires clarification
- Capital Programme to allow for expansion of Evelina £3m donation received for Cardiac Ward – split into 2- Evelina 1 (Keep up with the short term plan) and Evelina 2 (Increase capacity for the Tertiary Side)

5.3 Nutrition Steering Group

Report from steering group made available to Governors before meeting. No additional concerns discussed. Key highlights of the summary report are:

- AMT to confirm offer regarding night food service
- New Tom's at Guy's retail unit opened
- Patient satisfaction scores in patient surveys were increasing
- Food service assistants having problems regarding protected meal times. Amanda Millard is looking into this.
- New Food and Nutrition Standards- meeting in February when Nutrition strategy will be re-written
- New dieticians for staff and visitors recruited
- GSTT one of the top ranking trusts for patient catering
- Nutritional Strategy to be re-written. New initiative 'Sign to Safety' – safety improvement plan. Scott Pendleton has written and submitted a plan for nutrition as part of this

5.4 Quality Committee

Report from steering group made available to Governors ahead of meeting. No additional concerns discussed. Key highlights of the summary report are:

- The Committee to add performance to its name and function.
- In the 7 weeks prior to the meeting there had been 198 flu admissions, new ward allocated as a result. 54% of staff have had the flu vaccine.
- Recruitment remained an enormous challenge. Neonatal had the lowest vacancy rate ever. 4 new consultants in A & E would allow Consultant cover for 16 hours daily. District nurses continued to be a major recruitment challenge due to 70 vacancies. Theatre staff had been responding to demand by working 6.5 days per week but could not sustain this without recruiting 100 more staff
- An investigation being undertaken following Jimmy Saville visiting the hospital at night time
- Very good A&E performance despite enormous pressure and upgrading work. Urgent care centre phase one was complete, phase 2 on track.
- Demand for care at GSTT is increasing and the targets associated with admissions were in danger. The capacity to respond to this demand was limited by recruitment problems –particularly in paediatrics and theatres. Problems responding to additional referrals for Upper GI cancer might lead to having to restrict referrals on clinical criteria - after discussions with commissioners.
- The Trust continued to fail to meet timescales for referrals of cancer from outlying hospitals due to these being late, particularly from the Princess Royal University Hospital (PRU) and Queen Elizabeth Hospital (QE) at Woolwich. There was some confidence that the problems with the PRU would be resolved but much less so with QE despite much effort.
- Concerns remained over the speed and adequacy of complaint responses in general and the patient experience in cancer services.

5.5 Cancer Patient Experience

Governors received an update from Mairead Griffin, Deputy Chief Nurse Cancer and End of Life Care, regarding the Trusts performance in the National Cancer Patient Experience Survey and noted the following:

5.5.1 Progress being made: 4th year of participating in the National Cancer Patient Survey. The Trust has ranked 2nd in terms of Multi-specialty hospitals in London on Patient Satisfaction. Overall, 128th in the UK.

5.5.2 It was acknowledged that there are areas where performance could be improved. In order to do this a number of major initiatives embarked upon ahead of move to new Cancer Centre:

- Development of Cancer Centre website with Clinical Nurse Specialists (CNS) and consultant profiles will be included on the website
- A dedicated telephone line for CNS has gone live with two tumour groups and has been very well received. This will be rolled out across the remaining tumour groups over the coming weeks and months.
- Training on advanced communication skills: 15 communication skills courses introduced, 150 staff trained in the last 24 months
- Working with GP practices to improve communication and working across the community and hospital interface. Clinical Nurses Specialists and practice Nurses will be working more closely together.
- The reception role within the Cancer Day Unit has been split into a Reception function and back office function. This will enable staff in the back office to respond to telephone calls more promptly and staff at Reception to focus on greeting and checking patients on arrival.
- Cancer ethos – the team wanted to build upon the patient centred care work that they have done and tie this in with the Trust values and behaviours framework prior to moving into the new cancer centre.

5.5.3 Governors commented upon:

- The Kate Granger Campaign as a legacy project the Trust can learn from, essentially to bring compassion to the care patients receive from the NHS.
- Whether the dedicated number for Cancer Services at King's College Hospital can be emulated at GSTT
- Governors disappointed to read that the cancer waiting times are being adversely affected by referrals from other hospitals

5.5.4 The Deputy Chief Nurse for Cancer and End of Life Care responded that:

- The dedicated CNS phone line being rolled out at GSTT was the same as the King's single number
- The Trust is working with other local Trusts to help them manage the process of referral to GSTT. It was also brought to the attention of Governors that there were lots of tertiary referrals from other sectors as well

5.5.5 The Director of Patient Experience and Care updated Governors with progress on the GSTT version of "Hello my name is". 48 Volunteers will be helping with this and it will be happening within the next 6-8 months. Governors welcomed the plans for this.

5.5.6 Governors noted the absence of an on line general directory of consultants by department /specialty and asked this to be prioritised by the Trust as a crucial way of improving communication between GPs and consultants and for patients and carers.

Action: Amanda Millard to discuss with Anita Knowles and update Governors

6.0 QUALITY AND PATIENT SAFETY SUMMARY REPORT (INTEGRATED QUALITY & PERFORMANCE REPORT)

The report is now sent to all Governors when published with Board papers, so it was not re-circulated for this meeting.

- Governors noted that the key issues flagged in the report had already been discussed in detail following the Governor Representative's report.

7.0 PATIENT EXPERIENCE AND PATIENT AND PUBLIC ENGAGEMENT UPDATE

7.1 The Patient Experience Manager and Trust Patient and Public Engagement Manager summarised the key points from the quarterly patient experience report which include:

- Improved FFT test score
- Improving A& E response rate to FFT and Benchmark scores
- Inpatient response rate reaching 40%

7.2 The Patient Experience Lead mentioned that the Friends and Family Test CQUIN targets are quite challenging but we hope these will be met. It was also drawn to the attention of Governors that the method for calculating the FFT has changed. Encouragingly, the Trust scores are largely positive.

7.3 Additional highlights of high and low performance were mentioned to Governors:

- Inpatient survey - food section scores are the lowest scores in the survey, although among the best nationally.
- Outpatient Survey- although performance in relation to questions about choice of appointment, waiting times and appointment waits is lower, small improvements are being made month on month which are reflected in the scores.
- Evelina Detectives' initiative whereby young patients looking at the environment from the patient perspective to identify potential improvements and insights
- Commencement of the Health visiting teams patient satisfaction survey

7.4 Governors responded by seeking further details on the breakdown of the key information presented in the next report, i.e. a breakdown of the data not only at the overall level but by Speciality/ Directorate to also help with the comprehensiveness of the report. Action: Sarah Allen said she would look at providing this information.

7.5 The Trust Patient and Public Engagement Manager also updated Governors with progress on current Engagement initiatives being undertaken:

- The GIST membership survey to be circulated to 10,000 members from next week
- 15 foundation trust members trained to help with recruiting staff in patient facing roles
- Plans for public to be involved/ sit on recruitment panels when recruiting certain staff
- Embedding Patient Involvement in the Corporate Induction
- Exploring possibility for the Call assessor programme to be extended Trust wide. Extend licences across the trust for similar telephone audits to be run

7.6 Governors raised a few concerns particularly on admission and appointments letters not being received as highlighted in the PALS figures. They wanted to understand how grave the issue is - how many patients affected and a profile of the Directorates concerned. The Patient Experience Manager informed governors that this issue was being addressed as part of the Fit for the Future's Improving the Outpatient Experience Programme.

Action: Sarah Allen said she would look into this and bring more detailed information to the next meeting

8.0 COMPLAINTS

- 8.1 The Deputy Director of Assurance provided an update to Governors. Governors noted:
- A Complaints Improvement Programme had been developed in September 2014 to address a number of issues including:
 - Establishing a new team with the right levels of expertise,
 - Improving response times and the quality of responses given.
 - The Deputy Director of Assurance introduced Beth Wilcox as the new Complaints Lead for the Trust. A new Complaints officer would be joining the team in March 2015 to bring it up to full capacity
- 8.2 Governors expressed concern regarding the key issue of timeliness of written responses, responding to the Complaints telephone line and ensuring responses were not defensive. One governor had had a personal experience very recently of trying to get the Complaints telephone number answered and had tried 20 times unsuccessfully. Not only was this unsatisfactory but the answer phone message on the line was inadequate. Governors would also like to understand more about the role of the Patient Advice and Liaison Service (PALS).
- 8.3 The Deputy Director of Assurance responded that the team are reviewing the whole service and looking to reduce median response time to 35 days. This target was achieved in November, but slipped to 39 days in December.
- 8.4 The Complaints Lead outlined some of her plans for the newly recruited team:
- The aims of the new Central Complaints team is to support the organisation to investigate and respond appropriately.
 - Make sure investigations are thorough and that the tone of response is appropriate
 - Beth Wilcox is putting an improvement plan together following meetings with Directorates, visits to other Trusts, talking to Complainants etc.
 - Complaints process to be streamlined. Those that can be dealt with quickly will be.
- 8.5 Governors expressed their interest in hearing more about the Complaints Improvement Plan and highlights/views from the new Lead's discovery rounds at a future meeting.

9.0 ANY OTHER BUSINESS

9.1 QEWG Work plan for 2015-2016

The lead invited the group to suggest topics for discussion in forthcoming meetings. It was felt that a balance should be found between revisiting existing areas of interest and new topics. Governors noted the following could be new topics/areas of interest to explore in the year ahead.

- The next steps in progress with problem areas known to need improvement such as outpatients, discharge, and communications (by telephone, letter and face to face).

- Explore other internal Trust patient/public Engagement initiatives and the impact of these, such as mystery shopping and PLACE
- Review how patients physically access the hospital
- Interface between the hospital and GPs, integrated care, social care and the community services
- Explore patient experience in the community eg with the at home service and health Visitors
- Explore the inviting feedback process - How to make people feel welcome to make suggestions and how to ensure a public response to some of these.
- No Smoking policy due to be introduced in June – impact and effectiveness
- Review some of the patient facing technology available to the Trust and how it is used and its implications for patient experience
- Review the availability, profile and function of patient and carer support groups.

9.2 Governors requested that a process of logging topics and issues raised and progress of action in response be set up for the meeting. The Trust Patient and Public Engagement Manager reminded governors that the membership office held a similar log for queries from all governor committees and that if a separate sheet was set up for QEWG it should link into the central system to ensure effective tracking of issues across all working groups.

10.0 DATE OF NEXT MEETING

Tuesday, 12th May 2015 5.30pm to 7pm
Education Centre York Road, 75 – 79 York Road, London SE1 7NJ

SUE GALLAGHER

FEBRUARY 2015