Joint Task Group quality account commentary

The Quality Account Task Group consists of Healthwatch Coventry, Healthwatch Warwickshire, and Coventry City Council Scrutiny (HOSC). The Group held a meeting with Trust to discuss progress on last year's quality priorities and potential priorities for 2018-19 and members found updates on work undertaken very helpful. The Task Group provided input into the quality priorities for the coming year and was pleased that a suggestion from Healthwatch Coventry was included.

We look forward to continuing to work with the trust in the coming year and hearing about progress on the 2019-20 quality priorities.

After receipt of the draft quality account document we fed back suggestions for editing and changing the text to make it easier to understand. We also asked for missing information about complaints data and staff survey information. UHCW responded to these suggestions and requests.

The Trust is planning a summary public facing document but one of the aims the full quality account is to provide information for a public audience. It is possible to produce a document which is both easy to read and meets the requirements of the content which is specified by the regulations.

Last year's priorities

For the hand hygiene priority it is difficult to interpret what the Trust is saying within the document about how much has been achieved and the impact on patient care.

The Trust has partly achieved its priority of reducing avoidable infections which is disappointing. The Trust reports progress on staff training and compliance.

The clinical effectiveness priority of improving compliance with national guidance has not been achieved; with 77% of NICE guidelines fully implemented against a target of 90%. Some next steps around this would be helpful.

The patient experience priority of putting in place mini patient environment inspections on wards involving volunteers has been achieved. This is piece of work which Healthwatch Coventry has advocated following involvement in the national patient environment inspections known as PLACE. The next step will be reporting on outcomes/changes arising as a result.

Priorities for 2019-20

Approved: Chair Scrutiny Board 5; Healthwatch Coventry; Healthwatch Warwickshire

Two of the three priorities relate directly to patient experience. For the first time the trust held a workshop to enable patients/partners to discuss potential quality account priorities. This is indicative of a willingness to listen to patients and is welcomed.

Inclusion of a priority regarding supporting patients to take own medication on wards is a positive step as Healthwatch Coventry has received feedback from patients regarding management of their own/existing medication.

It is also important that patient information is reviewed and made as accessible as possible and existing information leaflets are not always easy to read/understand. Appointment letters are another area where work should be done around accessibility.

Other quality information

CQC rating showed improvement in individual service areas whilst the overall Trust rating remained 'requires improvement'.

The management of Parkinson's disease for in-patients has been identified an issue through an audit and there is synergy with feedback to Healthwatch here.

The Trust's work to address priorities set by its commissioners (CQUINs) would have benefited from more information to show what had or had not been achieved in the way the other trusts include this information.

The trust reports 76 serious incidents but no trend information was supplied. They report a drop in Never Events i.e. things that should never happen.

The Trust included information aimed at showing progress on expanding to 7 day services/working. This shows work to do regarding 7 day working and time to first consultant review and weekend availability of clinical review.

The learning disability section shows there are gaps with regards to how the trust is able to track care for patients with learning disability. Some actions are identified but there are other areas where actions should be developed for example around involvement.

UHCW is missing national targets for A&E treatment and referral to treatment times; for pressure ulcers and for readmission within 28 days.

Staff survey data shows improvement for many indicators and the trust highlights work to do regarding health and wellbeing and bullying and harassment.

The document describes how the Trust is seeking to build a culture of innovation.

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Involvement of patients and public

Initiatives such as the Patient Partners Programme recruiting 35 volunteers, 'We Care Events' and the creation of the Involvement Hub show that the issue of Patient Involvement is being taken seriously. The Trust also describes how patient public involvement in research has been expanded.

The 5 year delivery Plan, Friends and Family Test, and the Patient Survey are further indications that UHCW is proactively seeking out patient voice. It is a shame roll out of new values based FFT survey has not happened for inpatients.

However, patients and public are not very evident in the quality account document. The document would benefit from more examples of where patient voice has actually changed things.

Patient stories to the Trust board described 4 positive experiences, one negative experience and one neutral. A balance would be an improvement.

The Trust dealt with around 66% of complaints within its target 25 day response time a drop from previous years. Healthwatch Coventry has also raised concerns regarding the responsiveness of the PALS service.

Missing information

There is little more than passing reference to equalities in the document. Healthwatch Warwickshire are engaged conversations with the Trust about cultural sensitivity in some of their activities, this should be reflected.

[End]

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