

NOTES OF THE MINUTES OF STAFFORDSHIRE HEALTH SCRUTINY
COMMITTEE HELD ON 25TH JULY

1 Mid Staffordshire NHS Foundation Trust

Accountability

The following representatives from the Foundation Trust were present for the session:

Lyn Hill – Tout	Chief Executive
Colin Ovington	Director of Nursing and Midwifery
Julie Hendry	Director of Quality and Patient Experience

Lyn Hill – Tout reported there is still inconsistency in performance between departments. Improvement needed to be systemised and embedded so that any patient had the right standard of care whichever department they were in.

6 areas were the focus:-

- Patient safety
- Clinical effectiveness
- Patient experience
- Quality management systems
- Culture and behaviours
- Measurement

It was important to benchmark against national best practice. The Trust must not just get better but make continuous improvement. Mr Ovington said that there were a higher number of cases of Clostridium Difficile in the year to date than anticipated and this was a cause for concern. In exploring the situation, it was found that there was a range of different types of infection, with few connected (ie related to cross infection). There had been no new cases in the past 28 days. Measures to control the infection had been antibiotics and the cleaning regime, including good hand hygiene.

The Hospital Standardised Mortality Rates was lower than expected with the Trust lower than average.

Julie Hendry stated that the patient experience was a real priority now, while actively listening to the patients, carers and communities there were mystery patient reviews and unexpected inspections.

At the end of the year, there were 611 complaints with a large proportion being historical with complaints going back a number of years and often about multiple episodes of care. Last year, the Trust had not responded quickly enough or their response had been too superficial which the Trust was working hard to put right. The first quarter of 11/12 showed there were 180 complaints with themes similar to the rest of the country: medical care, communication and staff attitude. 15% of complaints were historical, 33% were about care the last month and 46% were about care in the last 6 months.

Nationally, there was a push not to admit people to hospital unless they needed to be and get them back home as soon as possible (and towards specialist care rather than generalist provision). The Clinical Services Review

was about how care should be provided. Lyn Hill – Tout could not see either Mid Staffs or Cannock Hospitals closing despite reports in newspapers. but what was provided there needed to change.

There is a planned deficit of £18 million in the Trust's budget for 2011/12. There is an efficiency programme underway e.g. treating people as day cases rather than inpatients where safe to do so. There is scope to make some productivity efficiencies by changing how care was delivered. Some savings were dependent on other services working effectively such as community health and social care.

2. Focus on nutrition and Single Sex Accommodation

The Red Tray System had now been implemented across the Trust to ensure that help with eating was given to those patients who required it. Volunteers were also being used to help with eating requirements. Supplementary food together with fresh fruit cut into bite size pieces were on offer throughout the day. Food was placed within easy reach of patient. It was important that patients had enough to drink with thicker drinks being provided to those patients with swallowing difficulties. Regular 'comfort' checks were carried out to check patients' fluid level intake. Others checking on food and drink for patients included: unannounced visits by Governors, visits by Staffordshire Local Involvement Network and unannounced visits by the Care Quality Commission (CQC). In May 2011, CQC had carried out an unannounced visit to Cannock Hospital to review dignity and nutrition for older people and had reported that "Cannock Chase Hospital was meeting this essential standard".

The Mid Staffordshire Trust aims to be compliant by 31st August 2011 on mixed single sexed accommodation. Those experiencing most issues with maintaining this: acute medical unit, endoscopy, surgical assessment unit and the observation area of Accident and Emergency.

Brenda Constable

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