

Improvement plan – Better, Best, Brilliant – progress report

1. EXECUTIVE SUMMARY

- 1.1. At the HASC meeting in August we provided a comprehensive report and presentation on the Care Quality Commission report published in March 2017, which followed their inspection of Medway NHS Foundation Trust in November 2016.
- 1.2. The overall rating for the Trust had moved from 'inadequate' to 'requires improvement', and there was a reduction in the number of 'must do' actions – 16 instead of 46 identified in the 2015 report. There were also 27 'should do' actions, whereas there had been 25 in the earlier report.
- 1.3. The report gave many areas a 'good' rating, and for maternity and gynaecology there was an 'outstanding' in the 'caring' domain.
- 1.4. As a result of the improved report, NHS Improvement removed the Trust from special measures.
- 1.5. Since the report was published we have implemented a CQC improvement plan to address the areas identified in the report as requiring more attention and are also eight months into our Better, Best, Brilliant programme, which aims to enhance and transform services across the Trust.
- 1.6. This report provides a current overview of the implementation of the plan.

2 PROGRESS AGAINST THE CQC IMPROVEMENT PLAN 'MUST DO' ACTIONS

- 2.1 As reported at the last committee, the CQC Improvement Plan is monitored and quality assured at the Trust Quality Improvement Group.
- 2.2 Of the 16 'must dos', only three remain rated as red.
- 2.3 One of these relates to consultant cover in the emergency department meeting the minimum requirements of 16 hours per day. This is currently under review.
- 2.4 Another concerns the importance of patients having face-to-face access to End of Life or palliative care services seven days a week, and this is the subject of a business case.
- 2.5 The third 'red' refers to all staff receiving an annual achievement review, for which we have a 95 per cent target. This has improved greatly over the year and currently stands at 80 per cent.

2.6 All of the other ‘must dos’, and almost all the ‘should dos’ have now been addressed or are on track to do so.

3 TRUST-WIDE IMPROVEMENT PROGRAMME – BETTER, BEST, BRILLIANT

3.1 Within our Better, Best, Brilliant programme, 13 workstreams sit beneath our four strategic objectives:

- Integrated healthcare
- Innovation
- People
- Financial stability.



3.2 Work is taking place under each of these, but there has been particular focus on patient flow and financial recovery over recent months, and both of these are now seeing progress throughout the Trust and significant improvements.

4 PATIENT FLOW

- 4.1 Under our patient flow programme we have sought to improve the number of patients being seen, treated and admitted or discharged from our Emergency Department. The national target for this is 95 per cent.
- 4.2 We have improved on our past performance, but we are not yet consistently meeting the target. Performance has been in the high 80s and early 90s over the past weeks, however, the figure isn't yet stable or consistent.
- 4.3 We have implemented a series of actions to standardise procedures so that flow is maintained and the four-hour performance within ED can be sustained.
- 4.4 Reduction in performance is often due to lack of internal flow from the main bed base to discharge, so we have instigated improvements in areas known to slow down the discharge process, such as by having a mobile pharmacy in the discharge lounge, and ensuring more patients are identified for discharge earlier in the day.
- 4.5 We have also seen a small increase in the total attendances at our ED, as we would expect at this time of year.
- 4.6 Over recent weeks we have held daily teleconferences with system partners – CCG, local government, community providers – to review the patients who are considered to be 'delayed transfers of care' (DTOCs).
- 4.7 This has provided greater visibility and focus and as a result we have seen a dramatic reduction in the numbers, and, importantly patients being transferred to where they will receive appropriate care.
- 4.8 At the end of November we had just two DTOCs, compared to 47 this time last year.
- 4.9 We have also conducted an audit of stranded patients with system partners (ie patients who have been in hospital for more than seven days where there is not a plan of ongoing care). The purpose of the audit was to review these patients, understand what the plan is for treatment and determine what they are waiting for – and then make it happen.
- 4.10 These actions have enabled us to close the escalation ward that had been open since December 2014. Having escalation space is a critical aspect of our winter planning.

5 EMERGENCY DEPARTMENT AND WINTER RESILIENCE

- 5.1 During the construction phase the operational plans for the ED extension have continued to evolve, in conjunction with our commissioners, to reflect the clinical pathways being developed across the Sustainability and Transformation Partnership.
- 5.2 Progress on the development of the ED has, however, been hampered by a number of issues that have been identified over recent weeks. The Trust is working closely with the building contractor to ensure that the building is of the necessary standard and specification.
- 5.3 Some identified defects have required repair or replacement which has led to delay in the planned completion of Phase 1. We anticipate the building of the new ED will complete early in the New Year.
- 5.4 In the meantime the Trust will continue to deliver ED services from the current department. The Trust believes that it is in the best interests of our community to accept a delay now in order to deliver a high quality ED that will serve our patients for many years to come.
- 5.5 In addition to the new development, we have also moved to establish the initial phase of an Urgent Care Centre.
- 5.6 This will provide additional support for our community through the winter months, with enhanced GP-led services for those with non-Emergency conditions and a new streaming model providing additional focus on ensuring our attendees are getting the most appropriate care as quickly as possible.
- 5.7 In the approach to winter, there has been a major emphasis across the NHS on being prepared for increased demand. This is a priority at a national level and a priority for the Trust.
- 5.8 We know that it is likely to be a long, hard winter with a potentially serious flu outbreak. Teams have been working hard to ensure we have resilience plans in place.
- 5.9 A pan-Kent exercise to test the system under pressure has been hosted by NHS England and NHS Improvement as part of the focus on winter planning. This exercise successfully tested the efficiency of our winter planning and resilience across the system to ensure that the actions we take to mitigate the potential seasonal risks are robust and effective.
- 5.10 One important element of preparing for winter is the flu vaccination campaign, and at Medway we have offered many clinics, and group vaccination sessions for clinical areas, as well as making it available on wards through our peer vaccinators, with a clear message that all staff, especially those caring for patients, are expected to have the vaccination.
- 5.11 We have also increased messaging about hand hygiene to reduce the risk of infection during the winter period.

6 WORKFORCE AND VACANCIES

- 6.1 Historically the Trust has struggled to recruit, resulting in a higher number of agency staff than we would like.
- 6.2 Staffing levels and use of temporary/agency workers had been identified as areas needing improvement by the Trust and the CQC.
- 6.3 Since the Trust has been seen to be improving, and particularly since we exited special measures, we have begun to recruit more permanent staff. We also have a very healthy nursing bank, meaning our reliance on agency staff has reduced and continues to do so.
- 6.4 The Trust's recruitment campaigns launched earlier this year, including national, local and international, have secured 86 staff to date from international recruitment. Our Philippines recruitment plan for nursing also continues with a total of 197 nurses being processed for posts. The first cohort of Filipino nurses will arrive by 8 January 2018. We have recruited successfully from within the UK, with a number of staff who had previously chosen to work in London now taking roles at Medway.
- 6.5 We regularly hold recruitment open days and have piloted other ways to engage potential candidates, such as social media and stands at events including the Kent County Show.

7 FINANCIAL RECOVERY

- 7.1 The Trust's financial position remains very challenging and is being addressed through our Financial Recovery Plan.
- 7.2 This year we have a planned deficit of £37.8million. This is an improvement on last year's deficit which was £42.9million and 2015/16 when it was £52.5million.
- 7.3 Although we are reducing the deficit year on year, we need to do more to bring the Trust to a position of financial sustainability.
- 7.4 Financial recovery forms an important part of our Better, Best, Brilliant programme. To bring focus and impetus to our financial improvement we have introduced four-week financial sprints. Initially we concentrated on 15 projects we considered would deliver significant savings reasonably quickly. We have since introduced a further 15 projects.
- 7.5 We have continued to engage staff in our financial improvements by keeping them informed and by seeking their ideas for further cost efficiencies, which will then be scoped and where appropriate, pursued.
- 7.6 We have recruited two new senior leads to support some of the programmes; this includes using the Model Hospital and other benchmark data to identify where we have variation.

- 7.7 We are also looking ahead to 2018/19 and carrying out business planning which will help us to identify and deliver efficiency savings next year to support our recovery.
- 7.8 It is important to note that cost efficiencies will only be considered where they do not have an adverse impact on patient care.
- 7.9 In fact, it is recognised that efficient services are better for patients. For example, one area of focus has been theatres utilisation. The BBC recently highlighted the lost efficiency in operating theatres across the country due to poor organisation of operating theatre schedules. We had already commenced a theatre efficiency programme and are making improvements in theatre start times, increasing capacity.
- 7.10 The focus will now be on reducing patient cancellations on the day of surgery, reducing the number of patients not attending their scheduled appointments and improving the scheduling of theatre lists.

8 FIRE SAFETY

- 8.1 In 2016 the Trust commissioned a fire safety report from Kent Fire and Rescue Service which identified a number of risks and actions required.
- 8.2 Following the report we produced a detailed action plan, and immediately set about addressing the concerns raised.
- 8.3 Since the tragic fire at Grenfell Tower, we have continued to review our fire safety plans and implement remediation works. We work in close liaison with Kent Fire and Rescue Service.

9 CONCLUSION AND NEXT STEPS

- 9.1 The Trust is in a very different position to this time last year, when we had just been through our CQC inspection.
- 9.2 We have been keen to maintain momentum in our improvement and ensure that the successes in key areas are maintained and spread throughout the hospital.
- 9.3 It is vital that our staff remain connected with our Better, Best, Brilliant programme, and we have an enhanced staff engagement plan to harness their good ideas.
- 9.4 Improving healthcare for the people of Medway is not just the remit of the hospital – we are working closely with local partners as well as through the STP to deliver the best of care for our population.