

Hertfordshire Community NHS Trust Quality Account 2016-2017 Summary

TEN KEY ACHIEVEMENTS

We are 'Good'

1. The **Care Quality Commission** (CQC) carried out a focussed inspection to Hertfordshire Community Trust (HCT) in April 2016, during which a formal review of areas previously reported as requiring improvement was undertaken. HCT's **overall rating of 'Good'** was confirmed in the CQC's final report in October 2016. Whilst the CQC recognised the work being undertaken to improve end of life care, this element continues to require improvement, and a formal action plan has been developed to ensure that all recommendations made are implemented. HCT was also assessed as achieving **Level 1** against the **NHS Improvement Single Oversight Framework** in October 2016, indicating that NHS Improvement did not identify any concerns or potential support needs for our Trust.

Safe

2. We reported five cases of **C difficile infection** experienced by patients in our community hospital wards. Four of the five cases were in different units or wards and root cause analysis demonstrated no transmission of infection on those wards. Two cases were excluded from our contracted reporting by our commissioners, who found that no lapse in care had occurred. Therefore the revised year-end total is three cases against the ceiling of six that was set for 2016/17. We also had zero cases of **MRSA bacteraemia** (blood-borne infection) assigned to our services for the fifth consecutive year.
3. We ran a **Flu campaign** to vaccinate frontline staff to **protect** them and vulnerable patients. 75.7% of eligible staff were vaccinated, making HCT the second best performing community NHS trust in England.

Effective

4. We participated in 100% of **National Clinical Audits** and **National Clinical Outcome Reviews** for which the Trust was eligible during 2016/17. We also reviewed 135 of the 153 sets of **national clinical guidance** and 32 of the 38 **quality standards** released during 2016/17. We undertook self-assessments of compliance with the 57 clinical guidelines and the 26 quality standards applicable to our services, and took action where needed to ensure that our staff provide evidence-based care.

Caring

5. Our average Friends and Family Test (FFT) score demonstrated that 97% of our patients told us they would **recommend our services** to friends and family should they need similar treatment or care.
6. In March 2017 we achieved full accreditation for Level 3 of the **UNICEF Baby Friendly award**, demonstrating that parents receive the **support** they need from our Health Visitors to enable them to continue with the feeding method of their choice (including breast feeding) and to have a close and loving relationship with their baby.
7. We further revised our **Mortality Review** process to provide assurance that every patient's last illness was managed in the best way possible, with **care** and **dignity**. Review of the 29 patient deaths that occurred in our community hospitals wards were assessed by our Medical Director as being unavoidable, and demonstrated that a good standard of palliative care was delivered to patients.

Responsive

8. We worked with our partners in healthcare and residents in Hertfordshire to develop a plan to deliver the **right care**, at the **right time**, and in the **right place**, to promote good health and wellbeing, and support our patients to manage their own care as far as possible.

Well-led

9. Staff told us in the 2016 national staff survey that our **engagement** with them has continued, and 60% of our staff would recommend the organisation as a place to work, against a national average for community trusts of 55%
10. We set up a Professional Clinical Leaders Group to develop **strong professional clinical leadership** within HCT that influences the delivery of safe, effective and improved care for patients.

PROGRESS AGAINST OUR QUALITY PRIORITIES IN 2016/17

- 1. To improve the patient experience of mothers and families using our services through achievement of Stage 2 accreditation for the UNICEF Baby Friendly Programme and progression towards Stage 3.**
 - We achieved Stage 3 accreditation in March 2017.
 - 100% of families we asked told us they feel supported in an environment that is baby friendly.
 - 84% of families told us they feel supported to continue with their chosen feeding method.
 - 100% of HCT Health Visitors have completed the two-day 'UNICEF breastfeeding and relationship building: a new approach' training, with newly appointed Health Visitors completing the training within six months of commencing with the Trust.

- 2. To develop a culture where staff value feedback and implement changes as required to improve the experience of service users.**
 - The overall number of FFT responses received from our patients increased by 16%. However, the average percentage of FFT responses received per service, per number of unique patient contacts, was 6% compared to 6.6% in 2015/16.
 - 84% of services were able to show that feedback they received from their patients was shared in their service.
 - 89% of services demonstrated improvements had been made where required in response to user feedback.
 - Our FFT comment cards were revised to include further questions to gain additional patient feedback, asking our patients whether they feel safe, are treated with care and kindness, and are involved in decisions about their care. We also increased the ways in which patients could give feedback, including completing the FFT question online, and developing an easy read comment card for services to use where appropriate.

- 3. To improve early identification of all vulnerable and at risk children who are Not Brought In (NBI) for planned appointments with HCT's Children's Services.**
 - A joint Children and Adult Not Brought In policy was ratified in December 2016, setting out a robust standardised process to ensure that all children NBI for planned appointments are followed up and appropriate actions are taken.
 - The key points of the NBI policy were circulated to Children's Services via the staff newsletter, and were also communicated to staff during Children's Universal Services business unit meetings. The key points of the policy are now included in HCT's safeguarding training.
 - An audit of Children's Services demonstrated that 93% of services had taken appropriate action to safeguard children NBI for a planned appointment.
 - A spot-check of 10 records from two Children's Services showed that all children NBI had been accurately recorded as such, and appropriate actions taken in line with the policy. This spot-check also demonstrated that 100% of records for vulnerable children had the appropriate icon attached to identify them as such.

- 4. To sustain and improve levels of reduction in harm due to medication incidents as part of the Trust's 'Sign Up To Safety' campaign.**
 - A review of all medication-related incidents reported during 2016/17 demonstrated that, of those incidents attributed to HCT, 6.8% resulted in harm, a reduction when compared to 2015/16.
 - The number of patient incidents reported relating to medicines management increased, demonstrating an increase in staff awareness. This increase enables us to better understanding why and how these incidents happen and implement safeguards to reduce the likelihood of similar incidents happening again.
 - We did not meet the target that we set this year to increase the percentage of staff in our community hospitals, ICTs and Children's Services who are trained and assessed as competent to deliver insulin or IV therapy in year. However, service developments in the Integrated Community Teams (ICTs) and Rapid Response Service, and upskilling of HCAs to administer insulin, has resulting in limited training sessions available being targeted to ensure the right staff have the right skills.
 - 77% of patients in our community hospitals were told about possible medication side-effects when they went home, an increase compared to 67% in 2015/16.

LEARNING FROM OURSELVES AND LEARNING FROM OTHERS

Key actions to support quality assurance:

- Assurance against 19 key performance indicators in the categories of Quality, Performance, Learning & Development, and Workforce & Finance, is provided to our Board and commissioners via the monthly Integrated Board Performance Report. Performance at service level continues to be monitored through monthly Business Unit Performance Reviews.
- An in-depth programme of peer reviews, carrying out a comprehensive assessment of the standards of quality, patient safety and effective medicines management, was undertaken in all of our community hospital wards.
- An on-going programme of staff engagement, including Keeping in Touch visits, Director Listening and Afternoon Tea events, was carried out by Board members (Executive and Non-Executive Directors) to support individual teams and services across HCT.

Our Commissioners

Teams from East & North Hertfordshire CCG, Herts Valleys CCG and NHS England undertook quality assurance visits into a number of our services. Where recommendations were made, action plans were developed and implemented to support improvement of services.

HMP The Mount Healthcare Service

A Health and Justice Clinical Quality Visit, undertaken in January 2017, confirmed that all recommendations made by the CQC and Her Majesty's Inspectorate of Prisons following previous inspections have been implemented.

SERVICE DEVELOPMENTS

FIRST Home Care Service

The aim of HCT's FIRST (Facilitating Integrated Re-enablement to Support Transition) Service is to support the timely transfer of patients out of the hospital environment (Watford General Hospital) to their usual place of residence, by providing them with immediate social and personal home care support, and support to re-learn the skills necessary for daily living.

Locality Working

In Stort Valley and the Villages we have successfully co-located all community services delivered by HCT, Hertfordshire Partnership Foundation Trust and Adult Social Care, at Herts & Essex Hospital, to support greater integration and a joined-up approach to delivering care in the community.

Patient self-management

We are working on a programme to improve our patients' confidence and ability to manage their own health and wellbeing. Patients will be supported by staff who have been trained in 'health coaching', which enables them to hold conversations with their patients and encourage them to set goals and self-manage.

INFORMATION TECHNOLOGY INNOVATIONS

During 2016/17 we have:

- Launched our 'Health for Teens' and 'Health for Kids' websites, which will deliver topical health messages and advice to children and young people through interactive tools.
- Introduced an Electronic Clinical Record system in six of our nine community hospital wards; this system supports records which are fully integrated with HCT community services and some local GP practices.
- Rolled out the mobile working module to our ICTs to enable staff to view and type up patient notes without the need to be online.
- Piloted the 'MediPi' telehealth device, which allows patients living with long-term conditions to take simple health measurements, such as their blood pressure, and send the information to a clinician for review. It is expected that this will improve patient experience and reduce the number of visits by our staff.
- Used the 'GoTo' video-conference system for webinars, meetings and the monthly Chief Executive updates, saving time and money through a reduction in travel time and mileage.

COMMISSIONING FOR QUALITY AND INNOVATION SCHEMES (CQUIN) PERFORMANCE

2016/17 CQUIN Scheme - HCT	
HCT overall achievement 2016/17	98%

2016/17 CQUIN Scheme – Herts Valleys CCG			
	Goals	Weighted value	Year-end position
1	Health and Wellbeing		
1.1	Introduce health and wellbeing initiatives covering physical activity, mental health and improving access to physiotherapy for people with musculoskeletal (MSK) issues	10%	10%
1.2	Healthy food for NHS staff, visitors and patients – reducing salt and sugar content where appropriate	10%	10%
1.3	Improve uptake of Flu vaccination for frontline clinical staff to above 75% of staff	10%	10%
2	Adult Urinary Catheter Care	10%	10%
3	Managing Long-term Conditions - Diabetes	20%	17%
4	End of Life Care (EoLC)	20%	20%
5	Stroke Care – Year 2	20%	20%
Overall achievement			97%

2016/17 CQUIN Scheme – East & North Herts CCG			
	Goals	Weighted value	Year-end position
1	Health and Wellbeing		
1.1	Introduce health and wellbeing initiatives covering physical activity, mental health and improving access to physiotherapy for people with MSK issues	10%	10%
1.2	Healthy food for NHS staff, visitors and patients – reducing salt and sugar content where appropriate	10%	10%
1.3	Improve uptake of Flu vaccination for frontline clinical staff to above 75% of staff	10%	10%
2	Integrated working with care homes on hydration, reduction of urinary tract infections (UTIs) and catheter care	25%	25%
3	End of Life Care (EoLC)	25%	24%
4	Urgent and emergency care	20%	20%
Overall achievement			99%

2016/17 CQUIN Scheme – West Essex CCG			
	Goals	Weighted value	Year-end position
1	Autistic Spectrum Disorder: Improving Autism Service for Children and Young People	40%	40%
2	Integrated Workforce	20%	20%
3	Health & Wellbeing	40%	40%
Overall achievement			100%