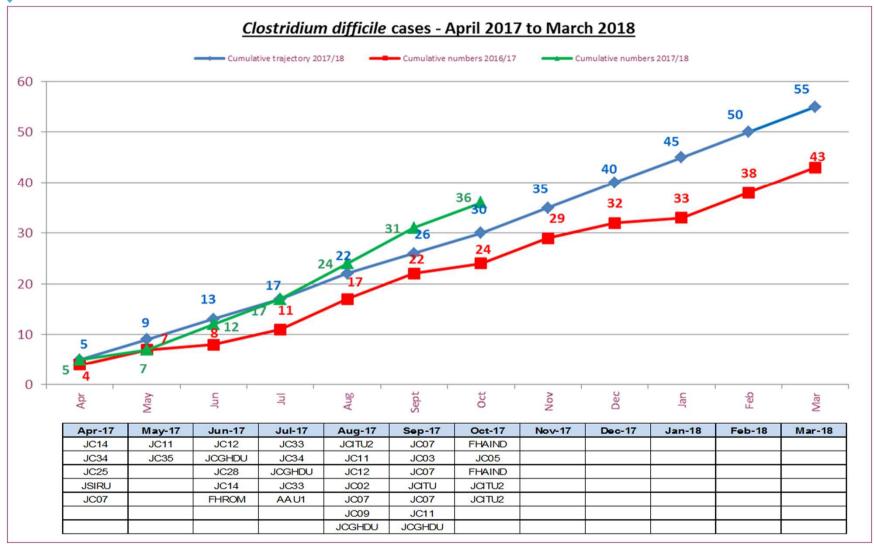


Healthcare Associated Infection

Middlesbrough Council Health Scrutiny Panel 28 November 2017
Gill Hunt Director of Nursing / DIPC



Clostridium difficile (Trust apportioned)





Clostridium difficile

- Current performance concerns:
 - Over trajectory by 6 in terms of total number of trust apportioned cases
 - Enhanced actions implemented and monitored at weekly director led performance wall. Focus on compliance with infection prevention and control policy and process
- HCAI delivery plan and C. difficile action tracker monitored at Infection Prevention Action Group reporting to Quality Assurance Committee
- Monthly report to the Board of Directors
- Cleaning standards monitored via Director led monthly meeting



Clostridium difficile

Meeting took place 15 September with NHSI / CCG / N.Tees FT to review collective actions associated with C. difficile reduction plans, the outputs were:

- Acknowledgement that rates both in and out of hospital are high
- HCAI Collaborative established, first meeting 27 October
- The national team to provide comment on all action plans and advise on any gaps



MRSA bacteraemia



out of every

100,000 persons
accquired an MRSA bacteraemia in
October-December 2015



out of every
100,000 persons
accquired an MRSA bacteraemia in
October-December 2016

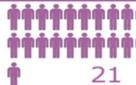


MSSA bacteraemia



19

out of every
100,000 persons
accquired an MSSA bacteraemia in
October-December 2015



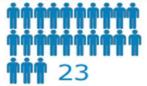
out of every
100,000 persons
accquired an MSSA bacteraemia in
October-December 2016

C. difficile infection



out of every 100,000 persons

accquired a *C. difficile* infection in October-December 2015



out of every 100,000 persons

accquired a *C. difficile* infection in October-December 2016

E. coli bacteraemia



69

out of every 100,000 persons

accquired an *E. coli* bacteraemia in October-December 2015 73

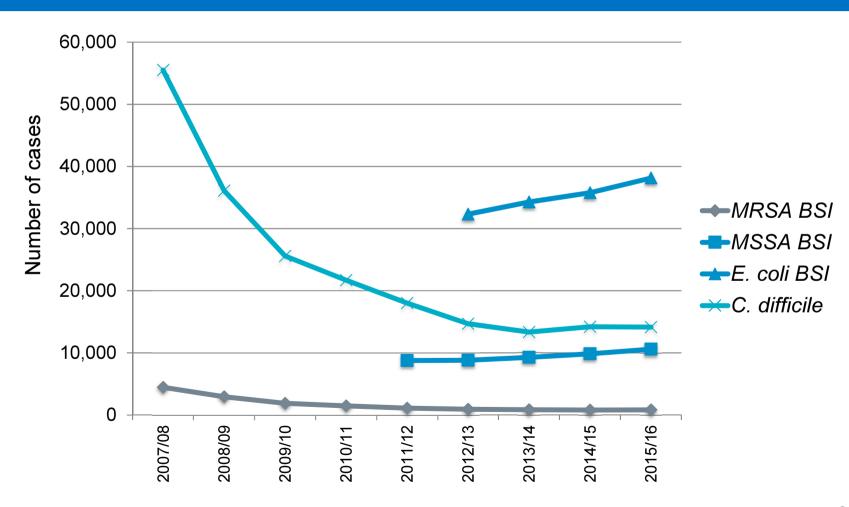
out of every 100,000 persons

accquired an E. coli bacteraemia in October-December 2016





National HCAI challenges





E-Coli bacteraemia

- South Tees trust apportioned rate higher than the national average, 16/17 29.77 per 100,000 bed days compared to 22.5 per 100,000 bed days nationally
- Around 80% of these infections have a community onset, most common source urinary tract
- 17/18 quality premium in Primary Care (10% reduction) and a stated objective to reduce gram negative bacteraemia by 50% by 2020
- From April 17 more detailed information required to PHE data capture system
- Requirement to redirect IPCN time to focus on this area
- Health economy action plan developed in conjunction with both CCG's

MRSA / MSSA bacteraemia

On track to deliver a 15% reduction objective 17/18 (locally set)





- Thank You
- Questions?





Finance

Middlesbrough Council Health Scrutiny Panel 28 November 2017
Gary Macdonald, Deputy Director of Finance

Finance – FINANCIAL OVERVIEW - YTD

		Year to Date	
Summary Financials	Plan	Actual	Variance
	£'000	£'000	£'000
NHS Clinical Income	234,625.8	232,723.5	(1,902.3)
NHS Clinical Income (CQUIN)	4,644.5	3,911.9	(732.6)
Clinical Income Sub-Total	239,270.2	236,635.4	(2,634.8)
Other Income	25,306.4	25,435.2	128.8
Total Operating Income	264,576.6	262,070.6	(2,506.0)
Pay	(181,246.6)	(179,066.8)	2,179.8
Non Pay	(78,705.3)	(79,815.4)	(1,110.1)
Total Expenditure	(259,951.9)	(258,882.2)	1,069.7
Non PBR Drugs and Devices Inc	24,407.1	29,688.6	5,281.5
Non PBR Drugs and Devices Exp	(23,061.2)	(28,376.0)	(5,314.7)
EBITDA	5,970.5	4,501.0	(1,469.5)
EBITDA %	2.26%	1.72%	
Depreciation and Interest	(12,396.5)	(12,787.0)	(390.5)
Other non-operating expenses	(2,960.0)	(2,910.0)	50.0
Restructuring Costs	(2,000.0)	(134.6)	1,865.4
Control Total	(11,386.0)	(11,330.6)	55.4

Finance – FINANCIAL OVERVIEW YTD

Key Summary points for Month 6 are set out below: -

•		YTD	
•	EBITDA	(£1.50m) behind plan	
•	Control Total	£0.05m ahead plan	
•	Income	YTD	
•	Clinical	(£2.63m) behind plan	(1.0%)
•	Non Clinical	£0.13m ahead plan	0.5%
•	Income	(£2.50m) behind plan	(1.0%)
•	<u>Expenditure</u>		
•	Pay	£2.2m ahead plan	1.2%
•	Non Pay	(£1.1m) behind plan	(1.4%)
•	Exc. Drugs Devices	(£0.1m) behind plan	(2.5%)
•	Expenditure	£1.0m ahead plan	(0.4%



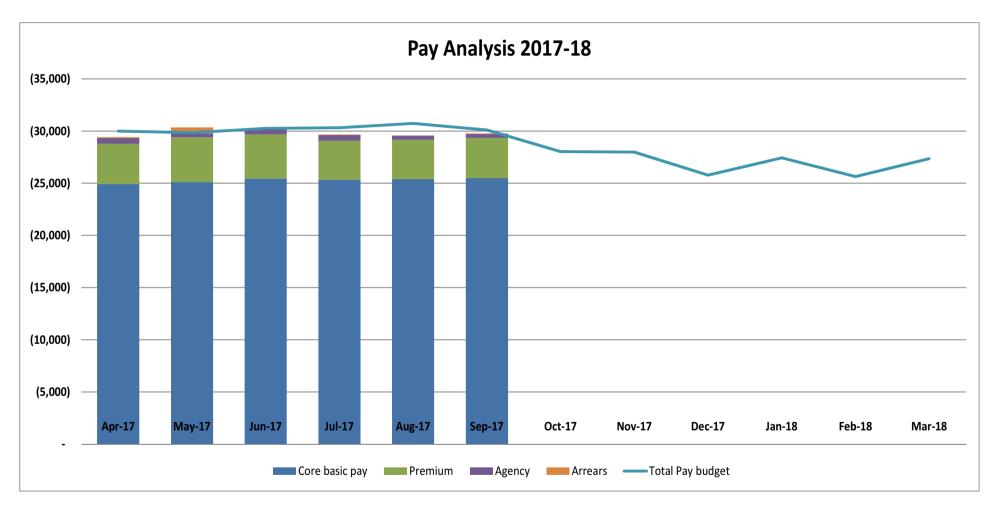


Finance – Key Budget areas - Income





Finance – Key budget areas - Pay







Finance – Pressures and Challenges

- £30.2m Productivity and Efficiency savings schemes with majority scheduled for delivery Month 7-12
- Operational pressures through winter period
- Enhanced financial controls and strategic oversight of key expenditure headings in place
- External support received as part of Finance Improvement Programme Wave 2 (FIP2)
- FIP2 programme of activity developed with support from PwC with further work required to ensure operational delivery of schemes
- Cash position challenging whilst managing the productivity and efficiency programme





Thank You Questions?





Car Parking

Middlesbrough Council Health Scrutiny Panel 28 November 2017
Kevin Oxley, Director of Estates,
Procurement & ICT



Car Parking Improvements

On the JCUH site we are going to:

- Install new barriers, pay on foot and pay & display machines
- Increase blue badge accessible spaces
- Create more drop off spaces closer to A&E
- Create a front and back of house model for car parks
- Create parent and child spaces

We have already:

• Invested in the Prissick car park – 1100 spaces which has allowed us to reconfigure car parking spaces to allow for an additional 130 visitor spaces in our V2 car park



Prissick

New Prissick car park 1100 spaces opened for staff at a cost of £1m





Charges

New charges:

• (0-20	minutes	free
-----	------	---------	------

• 20 minutes - 2 hours £3.0

 Neighbouring Trusts charges range from £2.50 -£6.00 for up to 24 hours parking



Blue Badge Charges

In 2014 the Trust announced that it would start charging for blue badge holder parking, in line with other Trusts - but held off introducing this charge to enable special pay machines to be installed.

Blue badge parking will be a pay and display ticket at a reduced fee of £3 for 24 hours and will be implemented.



Regular visitor charges

Current:

- 1 month £ 9.70
- 3 months £20.20
- With a £10.00 refundable deposit on return of the barrier card

Proposed:

- Weekly £10.00
- Monthly £25.00
- No deposit will be needed

Details on car parking charge notices and the appeals process

Car parking charge notices are issued for parking offences such as:

- Blocking blue light entrance routes
- Blocking of entrances / exits
- Parked on double yellow or red lines
- Not parked in a designated car parking space
- Parked in a disability space without displaying the correct permit
- Parked on dropped kerbs
- Parked on yellow hatched areas
- Parked in a red zone area
- Blocking a Fire exit
- Blocking loading or unloading areas
- Not displaying a valid ticket or staff permit
- Parked in a way which seriously impairs the safe passage of pedestrians and vehicles around the site(s)

 Excellence in Patient Outcome and Experience

TI

The appeals process is:

- Appeals against this Parking Charge Notice should be submitted within 30 days from the date of issue.
- All correspondence must include name, address, reference number and vehicle registration, evidence as to why the driver was parked in violation of the parking terms and conditions as displayed on the contractual warning signs. A panel meet monthly and a decision to accept or reject an appeal is based on evidence supplied.
- All Parking Charge cases are placed on hold upon receipt of a written appeal.
- Any driver appealing against a Parking Charge Notice within 30 days from the date of issue will be given the opportunity to provide payment at the reduced amount in the event that their appeal is unsuccessful.
- A written response will be given once the appeals panel has met and reviewed the appeal.



Information on the income generated from fees in 2016/17 and future car park investment plans

Income from car parking for 16/17 was £2.7m

We charge for car parking and use the money raised to fund security and traffic management services, CCTV, lighting, environment upkeep, general maintenance and winter maintenance. Any additional money raised goes back into frontline services.

Our Investment plans include:

- New barriers and pay machines for all public car parks
- DDA compliant pay and display machines
- Additional blue badge spaces at the South of the site location South Entrance and Maternity Entrance
- Spaces designated for parent and children close to children's out patients
- An electronic sign at the main entrance to show where spaces are available in the main visitor car parks
- Updated signage
- Front and back of house car parking model







Thank You Questions?

