

HEALTH SCRUTINY PANEL

A meeting of the Health Scrutiny Panel was held on Monday 19 June 2023.

PRESENT: Councillors J Banks (Chair), M Storey (Vice-Chair), C Cooper, P Gavigan, D Jackson, J Kabuye, J Walker and L Mason (Substitute) (Substitute for D Coupe)

ALSO IN ATTENDANCE: C Blair (Director) (North East & North Cumbria Integrated Care Board), E Craigie (Teesside Live), M Graham (South Tees Hospitals NHS Foundation Trust), M Lal (Associate Medical Director) (South Tees Hospitals NHS Foundation Trust) and H Lloyd (Chief Nurse) (South Tees Hospital NHS Foundation Trust)

OFFICERS: G Moore

APOLOGIES FOR ABSENCE: Councillors D Coupe and D Jones

21/2 **DECLARATIONS OF INTEREST**

Name of Member	Type of Interest	Item/Nature of Interest
Councillor J Banks	Non-Pecuniary	Agenda Item 4 (South Tees NHS Foundation Trust - Quality Account for 2022/2023) - Family member is employed by the Trust.
Councillor C Cooper	Non-Pecuniary	Agenda Item 4 (South Tees NHS Foundation Trust - Quality Account for 2022/2023) - Member is a Community Nurse and on occasion has visited the Trust to provide advice on her patients.

21/3 **MINUTES - HEALTH SCRUTINY PANEL - 21 MARCH 2023**

The minutes of the Health Scrutiny Panel meeting held on 21 March 2023 were submitted and approved as a correct record.

21/4 **SOUTH TEES NHS FOUNDATION TRUST - QUALITY ACCOUNT FOR 2022/2023**

The Health Scrutiny Panel welcomed the opportunity to consider the South Tees NHS Foundation Trust's draft Quality Account for 2022/2023.

A formal written response, detailing the scrutiny panel's comments and feedback, needed to be submitted to the Trust by Monday, 26 June 2023.

At the meeting, the Trust's Chief Nurse and Associate Medical Director were in attendance to provide an outline of the priorities for improvement and the quality of services at the Trust.

The Associate Medical Director advised that, in 2019, an inspection had been conducted by the Care Quality Commission (CQC) to review whether the services provided by the Trust were safe, caring, effective and responsive to people's needs. Following the 2019 inspection, the CQC had rated the Trust as 'Requires Improvement'. However, the scrutiny panel was advised that a more recent inspection had been undertaken in November 2022, whereby the CQC had upgraded the Trust's rating to 'Good'. The scrutiny panel congratulated the Trust on that significant achievement and commended the hard work, commitment and dedication of its staff.

In terms of the 2019 inspection, the Chief Nurse explained that three areas had been rated as 'Requires Improvement', i.e. ensuring services were 'Safe', 'Effective' and 'Well Led'. The scrutiny panel heard that a significant amount of improvement work had been undertaken to ensure those areas were now judged as 'Good'. Members heard that a new distribution leadership model had been implemented, which aimed to empower staff members and involve

them in decision-making in respect of the management of resources and the delivery of care in the hospitals and communities. The scrutiny panel welcomed those practices that had been adopted to promote a positive culture that supported and valued staff.

The Associate Medical Director advised that more doctors, nurses and midwives had joined the Trust and recruitment remained a key focus. It was also commented that the Trust had experienced the largest national increase in the number of staff members who would recommend the organisation as a place to work.

The scrutiny panel was advised that there was a continued commitment of staff members in ensuring access to services and care. Members heard that, since 2019:

- over 2 million outpatient appointments had taken place;
- over a million diagnostic scans had been undertaken;
- 110,000 surgical procedures had been performed;
- care had been delivered closer to home for more than 3 million patients; and
- more than 0.5 million had accessed accident and emergency care facilities.

The Chief Nurse advised that the Trust's staff teams had worked incredibly hard to improve the quality of care for all patients and the Trust was delighted that it had been upgraded to 'Good'. It was highlighted that the Trust had become one of the first acute hospital trusts in England, since the start of the COVID-19 pandemic in 2020, to achieve a rating improvement to 'Good' from the CQC for the care delivered to patients and service users. It was commented that the staff at the Trust should feel immensely proud of that achievement.

Members heard that the Trust continued to focus on promoting the safety and wellbeing of staff members, patients, and service users. It was acknowledged that improvement work would continue, to enable the Trust to recover from the detrimental impact of the pandemic. The Trust's Quality Priorities for 2023/24 were outlined to the scrutiny panel:

In terms of Safety:

- The Trust would continue to develop a positive safety culture, in which openness, fairness and accountability was the norm.
- The Trust would continue to optimise its ability to learn from incidents, claims and inquests to improve outcomes for its patients.
- The Trust would increase medication safety and optimise the benefits of Electronic Prescribing and Medicines Administration (ePMA).

In terms of Clinical Effectiveness:

- The Trust would ensure continuous learning and improved patient care from Getting It Right First Time (GIRFT), a national programme that undertook clinically-led reviews, and clinical audits.
- The Trust would strengthen the mortality review processes, ensuring learning from deaths was triangulated and shared.

In terms of Patient Experience:

- The Trust would implement the Patient Experience Strategy that had been developed in collaboration with its patients, carers and HealthWatch.
- The Trust would develop and implement a Mental Health Strategy to improve care and share learning for its patients who had mental ill health.
- The Trust would develop and implement shared decision making and goals of care.

The Associate Medical Director advised that the Trust's Digital Safety and Quality First Programme 2022-24 planned to introduce digital systems, including:

- Electronic Patient Records - A digital based notes record system, which would replace a paper-based recording system and allow easier storage, retrieval and modifications to patient records.
- Electronic Prescribing and Medicines Administration (EPMA) - a system, which would allow prescriptions to be transmitted and populated electronically, replacing paper and

faxed prescriptions.

Members heard that the implementation of a record system planned to allow access to a single on-line patient record, which would integrate with other electronic systems, such as GP records. It was commented that the introduction of the system would undoubtedly improve the coordination and delivery of care. In addition, the implementation of the EPMA planned to reduce the number of prescribing errors.

In response to a Member's query regarding challenges faced by the Trust, the Associate Medical Director explained that the COVID-19 pandemic had been an extremely challenging time and there had been capacity issues, particularly in respect of intensive care services. To cope with increased demand, many non-urgent appointments had been put on hold and many services reduced, which had resulted in a major backlog for the Trust. In addition, workforce issues had been encountered by the Trust, with high staff sickness levels being reported, which were often due to COVID-19 related sickness.

In response to a Member's query regarding the amalgamation of the trusts, the Chief Nurse advised that a decision had been made for South Tees NHS Foundation Trust to come together with North Tees and Hartlepool NHS Foundation Trust to form a hospital group. It was commented that the move planned to support shared goals by formalising the way in which the Trusts worked together in the interests of the people and communities across the Tees Valley. By forming one hospital group, the Trusts could learn rapidly from one another and the professional knowledge of senior clinicians (across both organisations) could be accessed to facilitate effective learning, secure improvements and support change. It was highlighted that effective planning of the merger would be of critical importance, to ensure that high-quality patient-centred services across the Trusts were developed and maintained. The Director of the North East and North Cumbria ICB advised that the Trusts had previously worked well together to determine new concepts and models in respect of the delivery of urgent care, which focussed on learning opportunities identified at the Urgent Treatment Centre based at North Tees. It was envisaged that joint working would enable the Trusts to share best practice and resources and enable the development of new improved models and pathways for delivering care across the Tees Valley. The importance of joint working in relation to health outcomes, to promote good health and prevent ill health, was also highlighted. The Director of the ICB advised that the Health Inequalities Board, a partnership group (involving public health colleagues, the ICB and the Trust), regularly discussed the factors that influenced and impacted on health outcomes for people across South Tees to ensure timely access to targeted support, care and treatment.

A Member raised a query regarding the pressures faced by urgent and emergency services. In response, the Director of the ICB advised that discussions were being held regarding the potential future development of an Urgent Treatment Centre (UTC) on the site of James Cook University Hospital, which planned to manage and mitigate the current demand. Furthermore, the Chief Nurse advised that work was being undertaken to reduce avoidable emergency admissions. That work included signposting to the right services.

In response to a Member's query regarding patient experiences, the Chief Nurse advised that a Mental Health Strategy and a Patient Experience Strategy were being implemented. It was commented that those strategies demonstrated a positive commitment, from the Trust, to ensure:

- staff members were able to recognise and respond to patients with mental health needs; and
- patients felt respected, supported and valued and were able to raise concerns without fear.

A Member raised a query in respect of *Clostridioides difficile* (*C. difficile*). In response, the Chief Nurse advised that the rates of incidence associated with *Clostridioides difficile* (*C. difficile*) infections had increased nationally, however, infection control remained a key priority and an ongoing focus for the Trust. It was highlighted that high standards of infection control practice were promoted to minimise the risk of occurrence. It was also advised that the pandemic had resulted in an increase in health care associated infections.

A Member queried the reasons for the Trust not completing some of the national audits, such as the National Obesity Audit. In response, the Chief Nurse explained that difficulties had

been encountered in responding to some audits, as patient records were currently paper-based. It was commented, however, that once the digital system was implemented, patient records and associated data would become more easily accessible.

A Member expressed concern in respect of the Trust's performance against national priorities. The Chief Nurse advised that the Trust had faced many challenges since the pandemic and it was working hard to address those areas and improve performance outcomes.

A discussion ensued and the scrutiny panel was supportive of the 2023/24 priorities and looked forward to continuing to receive updates on progress during the year ahead. The scrutiny panel wished to place on record its gratitude for the significant and widespread improvements that had taken place over the last year by staff across the Trust. It was commented that the Trust was truly committed to ensuring that its specialist, acute and community services provided people with safe, effective, compassionate and high-quality care. That had been evidenced, not only by the recent results of CQC inspection, but also by the Trust's future priorities and its continued commitment to improvement, promoting best practice standards and developing responsive and receptive patient centred services.

AGREED

- 1. That the South Tees Hospitals NHS Foundation Trust's 2022/2023 Quality Account document be noted.**
- 2. That a letter containing the comments made by the Health Scrutiny Panel, in respect of the 2022/23 Quality Account, be sent to the Trust by 26 June 2023.**