

**PEOPLE SCRUTINY PANEL**

A meeting of the People Scrutiny Panel was held on Monday, 10 June 2024.

**PRESENT:** Councillors E Clynch (Chair), J Walker (Vice-Chair), J Banks, D Jackson, M McClintock, M Nugent, S Tranter and G Wilson

**ALSO IN ATTENDANCE:** I Bennett, Deputy Director of Quality & Safety, South Tees Hospitals NHS Foundation Trust  
N Corrigan, Local Democracy Reporter, Evening Gazette  
H Lloyd, Chief Nurse, South Tees Hospital NHS Foundation Trust  
R Scrimgour, Compliance Manager, South Tees Hospital NHS Foundation Trust

**OFFICERS:** D Alaszewski, S Bonner and C Lunn

**APOLOGIES FOR ABSENCE:** Councillors L Hurst, J McConnell, J Nicholson, S Platt and J Ryles.

24/1 **DECLARATIONS OF INTEREST**

There were no declarations of interest received at this point in the meeting.

24/2 **SOUTH TEES NHS FOUNDATION TRUST - QUALITY ACCOUNT FOR 2023/2024**

The People Scrutiny Panel welcomed the opportunity to consider the South Tees NHS Foundation Trust's draft Quality Account for 2023/2024.

A formal written response, detailing the scrutiny panel's comments and feedback, needed to be submitted to the Trust by Friday, 14 June 2024.

The Trust's Chief Nurse, Compliance Manager and Deputy Director of Quality were in attendance to deliver a presentation, which outlined the priorities for improvement and the quality of services at the Trust. The presentation focused on the following matters:

- University Hospitals Tees.
- Mental Health Strategy.
- Maternity Care Quality Commission (CQC).
- Implementing Patient Safety Incident Response Framework (PSIRF) and Family Liaison Officers (FLO).
- Digital Journey - Electronic Prescribing and Medicine Administration (EPMA) and MIYA.
- South Tees Quality Priorities Update 2023/2024.
- Drafting and agreeing Quality Priorities for the year as a group.

Members were provided with background information regarding the Quality Account. It was explained that this was an annual undertaking that every Hospital Trust was required to do. The document reviewed performance over the last 12 months, focusing on areas such as:

- Patient safety.
- Progress made and impact on patients.
- The challenges faced and how these were addressed.

The document also set out the plans for the next 12 months and the priorities that would be looked at. The draft document was circulated to partners for comment/ feedback before it was finalised and shared with Parliament - this would take place at the end of June 2024.

Regarding group developments, Members heard that the last 12 months had been a busy period across the Tees Valley. The new group Chief Executive Officer was appointed in January 2024, with a wider group Executive Team being appointed in February/March 2024. The team would cover both South Tees and North Tees going forward. Group clinical boards had been established to deliver a clinical strategy across the Tees Valley (entitled 'Caring Better Together'), and a new group name and identity announced, i.e., University Hospitals

Tees. It was highlighted that the existing names of the statutory organisations, i.e., University Hospital of North Tees, The James Cook University Hospital and Friarage Hospital, would remain in use.

Details regarding the South Tees Hospitals Mental Health Strategy 2024 were provided to the panel. Members were informed that the strategy had been developed last year as part of a three-year approach. Some of the elements had already been delivered in their entirety, whereas others continued into years two and three. The strategy had been developed, approved and published on the Trust intranet. The focus was to develop, improve, learn from, and enhance the provision of mental health care for patients, alongside their physical health needs. Next steps pertaining to the Mental Health Strategy were outlined, which included:

- Commencing development of a Mental Health dashboard.
- Reviewing tools used within the Emergency Department during triage to deliver safe and effective care.
- Improve mental health training compliance across the Trust.
- Review mental health strategies across the group.

In terms of regulated activity carried out by the CQC, Members were advised that, overall, the rating for the Trust remained 'Good', although Maternity Services at James Cook University Hospital were rated as 'Requires Improvement' for Safe and Well-Led. At the Friarage Hospital, Maternity Services were rated as 'Good' for Safe and 'Requires Improvement' for Well-Led. This gave an overall rating for Maternity Services as 'Requires Improvement'.

Information regarding PSIRF was provided to Members. It was explained that the Trust had successfully transitioned to PSIRF on 29 January 2024, which had changed the way the NHS investigated, reported and learnt from incidents. The Trust went live with the national Learning From Patient Safety Events (LFPSE) reporting platform on 20 November 2023 and incident reporting levels had remained consistent. Training had been delivered in line with the National Patient Safety Syllabus (NPSS). The Family Liaison Officer (FLO) role had been embedded across the Trust, with 70 FLOs trained to date and further training cohorts planned in 2024.

Reference was made to the Trust's digital journey and implementation of the Electronic Prescribing and Medicine Administration (EPMA) and MIYA systems. It was indicated that implementation of EPMA in the Trust had commenced in June 2022 to improve clinical effectiveness and patient safety. The systems for monitoring compliance had been heavily facilitated and were immediately available. EPMA was currently live using the Better Meds system on 51 inpatient wards and clinical areas, with plans to roll out Trust wide. Several benefits had been achieved to date, which included:

- A reduction in medication errors and omitted doses.
- A 100% compliance rate in respect of clinical screening questions and patient medication allergy status.
- A reduction in drug interactions interventions.

Members were provided with an update regarding the South Tees Quality Priorities 2023/2024, which focused on Patient Safety, Clinical Effectiveness and Patient Experience. There had been eight Quality Priorities identified for 2023/2024, three of which had been fully implemented. As the priorities were part of a three-year strategy, work would continue in respect of the areas that had been part implemented, which had been carried forward into the University Hospitals Tees 2024/2025 Quality Priorities.

In terms of the University Hospitals Tees Quality Priorities for the year ahead, it was indicated that these had been developed with clinical colleagues and shared with the Council of Governors at both North Tees and Hartlepool and South Tees Hospitals NHS Foundation Trusts. The importance of continuous learning, working effectively with partners and sharing best practice was highlighted to the panel.

The Chair thanked the representatives for the information conveyed and invited questions from Members.

A Member made reference to the outcome of the CQC inspection and raised concerns regarding Maternity Services, which despite the overall 'Good' rating of the Trust, was a

significant issue. It was felt that the report reported this as a minority issue. In response, the representatives affirmed that the findings of the CQC were taken very seriously, which the reporting style of the Quality Account may have underplayed. It was explained that seven 'must do' actions had arisen from the focused inspection. One of the main focuses referred to the lack of facilities around birthing pool provision, which had now been resolved. Another area of national focus for the CQC was around the triaging of support for mothers seeking help and advice. It was explained that the Trust had been very responsive in addressing this issue, being one of the first to implement a robust system that provided a 24-hour triage/support line. In addition to this work, two Maternity Safety Boards had been established. An action plan had been put in place and where objectives had not yet been completed, it was indicated that all were on track to being completed over the coming months. In terms of this information being overlooked in the report, it was acknowledged that these comments would be taken on board.

A Member commented that statistics around the workforce and the current number of vacancies were absent from the report. In response, Members were advised that there was a related statement from the CEO, Chief Nurse and Medical Lead at the beginning of the report, and appendices detailing feedback from system partners could also be found in the report. The Member acknowledged this, but felt that further work to include visual tables and statistics was required for the finalised version of the report. The representatives welcomed this feedback; it was indicated that the Trust performed very well in terms of the recruitment and retention of staff. At present, there were currently no vacancies in nursing at South Tees Hospitals; Nurses and Midwives currently studying at Teesside University and due to graduate this year had been recruited and were expected to commence in post in September 2024.

A Member referenced Accident and Emergency waiting times, which were a national issue, and commented that it would be helpful to include these in the report. The representatives welcomed this feedback; mention was made of the support provided by the Integrated Care System (ICS) in the Trust establishing a brand-new Urgent Treatment Centre (UTC).

A Member made reference to mental health and treating the whole person; it was commented that a particularly stressful element of attending hospital was locating a car park space. It was indicated that patients may not have been able to navigate public transport easily, and that this needed to be considered and referred to in the Quality Account report. In response, representatives acknowledged this point. It was indicated that although there was no immediate solution in terms of remedying car park issues, discussions around this were taking place.

A Member referred to mental health and commented that related issues could be experienced at any age across the lifespan. It was queried how many outside bodies were available to support all those affected by mental health issues. In replying, representatives advised that the query would be forwarded to Tees, Esk and Wear Valleys (TEWV) NHS Foundation Trust for a response, but indicated that it was about linking primary and secondary care providers and the Voluntary and Community Sector (VCS) to provide a range of support services.

A Member referred to suicide rates among young men and commented that several years ago, Middlesbrough's rate was significantly higher than other areas of the country. It was felt that this situation seemed to be repeating itself again; clarification was sought as to whether this was the case. It was agreed that this enquiry would also be forwarded to TEWV for a response.

An officer referred to the Mental Health Strategy and queried whether any patient input had been incorporated into that. In response, representatives explained that work had been undertaken with Healthwatch and organisations across Redcar and Cleveland and the Tees Valley. Eight focus groups had been held with individuals with lived experience, to look at the design and priorities of the strategy; patient involvement had been key. Implementation of the strategy would be reviewed in due course.

A Member referred to page 28 of the Quality Account and commented on the metrics used in terms of exceeding targets; it was indicated that nothing had been used to identify any targets for the following year. It was queried whether local targets were set against national targets. In response, representatives made reference to the national patient survey as a performance measurement tool; further consideration would be given towards a benchmarking approach.

A Member referred to Maternity Services and the CQC inspections and queried whether any follow-up visits would be scheduled in. In response, representatives explained that the CQC set out to undertake inspections nationally. It was unsure as to what the next steps would be; a report would be produced prior to a decision being taken in this regard. It was reiterated that progress had been achieved and a new regime was now in place. A return by the CQC would be both expected and welcomed. The CQC assessed on a risk basis and could therefore return at any point if a risk or concern had been identified. Regular engagement work was carried out between the Trust and the CQC.

A Member referred to the joining up of North Tees and South Tees and queried the impact to date. In response, representatives explained that this had been very positive. Bringing supplies together had been challenging, but the impact very positive. There was a strong appetite to deliver things together; occasionally the language was different, but the same messages were shared by both.

A Member referred to the CQC inspection work and queried whether a statement was placed on the Trust website in this regard. In response, it was explained that details were placed on the website and displayed around the organisation.

The Chair thanked the representatives for their attendance and contributions to the meeting. It was agreed that the feedback from the meeting would be forwarded to the Deputy Director of Quality by 14 June 2024.

#### **AGREED**

1. **That the South Tees Hospitals NHS Foundation Trust's 2023/2024 draft Quality Account document be noted.**
2. **That a letter containing the comments made by the People Scrutiny Panel, in respect of the 2023/2024 draft Quality Account, be sent to the Trust by 14 June 2024.**
3. **That the two queries raised in relation to mental health (provision of support for those experiencing mental health issues; and male suicide rates in Middlesbrough) would be forwarded to TEWV NHS Foundation Trust for a response.**
4. **That the information, as provided, be noted.**

24/3

#### **TEES, ESK AND WEAR VALLEYS (TEWV) NHS FOUNDATION TRUST - QUALITY ACCOUNT FOR 2023/2024**

The People Scrutiny Panel welcomed the opportunity to consider the TEWV NHS Foundation Trust's draft Quality Account for 2023/2024.

A copy of the Quality Account document had been provided to Members in advance of the meeting.

A Member raised concerns that there were no representatives from TEWV in attendance at the meeting, given that representatives from South Tees Hospitals NHS Foundation Trust had been in attendance to present the information and answer questions. It was commented that concerns about the TEWV report were more serious than those relating to the South Tees report. In response, the Democratic Services Officer explained that, unfortunately, a late scheduling conflict had been presented and was unavoidable. The Chair commented that, as the People Scrutiny Panel was one of several bodies reviewing the draft Quality Account, it was hoped that as the process continued, any questions would be asked. The Democratic Services Officer explained that if Members had any further questions or comments, these could be emailed to the Democratic Services Officers for forwarding to the Trust.

#### **AGREED**

1. **That the TEWV NHS Foundation Trust's 2023/2024 draft Quality Account document be noted.**
2. **That Members forward any questions or comments to the Democratic Services Officers, for responses to be obtained from TEWV NHS Foundation Trust.**
3. **That the information, as provided, be noted.**

24/4

**ANY OTHER URGENT ITEMS WHICH IN THE OPINION OF THE CHAIR, MAY BE CONSIDERED.**

None.