

INEL Joint Health Overview and Scrutiny Committee Update from Barts Health

20 November 2014





Agenda

- Our finances
- Operational performance
 - 18 weeks performance
 - Friends and Family Test results
 - Cancer performance and patient survey results
- Managing serious incidents and Never Events
- Our patient transport service
- Cerner Millennium at Whipps Cross
- Improving our administrative support
 - Letters to GPs and patients
 - Reducing appointment errors
- CQC follow up inspections





Our finances

- At the end of Month 6:
 - Year to date deficit was £53.1 million, £13.3 million worse than plan
 - In month deficit was £11.8m - £7.0m worse than plan
- This reflects underachievement of CIPs and partly deductions in income for fines and challenges, and expenditure on agency staff
- As a result, we have revised the year end forecast outturn from a deficit of £44.8 million to a deficit of £64.1 million
- To achieve, or better, our year end deficit plan, we are focusing on:
 - Strengthening controls, particularly on agency spend and consultancy
 - Bridging forecast deficits through further cost improvement schemes properly assured for quality and safety, and avoiding attrition through slippage of approved schemes
 - Eliminating agency spend via our Drive 95 recruitment program
 - Addressing our emergency pressures overspend with





Operational performance

A&E four hour access standard

- Overall Trust performance in September was 94.29%
- Year to date performance is 94.22%
- Increased length of stay is biggest factor affecting performance
- Mitigating measures include:
 - £10.2m support for winter, including increased staffing, better patient flow and increased admission avoidance/community support
 - Developing neuro-rehabilitation service with the Homerton

Infection control

- Clostridium Difficile – six (post 72-hour) cases reported in September; year to date total 40 against a target of 71
- MRSA bacteraemias – two reported in September; year to date total is seven against a target of zero





18 weeks referral to treatment

The target is for 90% of admitted patients and 95% of non-admitted patients to be treated within 18 weeks.

Actions we are taking to achieve the standard:

- Clinical harm process is in place
- Established a programme management office (PMO) structure to lead the work
- Focus on data quality
- Training programme and standard operating policies
- Development of a single, reliable patient tracking list (PTL)
- Clinical engagement
- Capacity/demand and recovery plans
- Working with NHS IMAS Intensive Support Team





Friends and Family Test

- The national Friends and Family Test (FFT) is now being used across the NHS to gauge how likely patients are to recommend local hospital services
- The survey is currently in use for inpatients, A&E and maternity
- Barts Health data for September (latest available) shows:
 - Return rate for inpatients and A&Es is 31.65%
 - 83.75% of these respondents were “extremely likely” or “likely” to recommend our services, slightly lower than August
- We are now rolling the FFT out in outpatient departments, day case treatment centres and community services



Cancer services – our performance

Target	Latest position - for September, some figures provisional
14 days from urgent GP referral to date first seen	91.6% against 93% target
14 days from urgent GP referral to date first seen – Breast symptomatic	93.4% against 93% target
31 days from decision to treat to first treatment	91.2% against 96% target
31 days from decision to treat to subsequent treatment (drugs)	100%
31 days from decision to treat to subsequent treatment (surgery)	92.6% against 94% target.
31 days from decision to treat to subsequent treatment (radiotherapy and other treatments)	95.5% against 94% target
62 days from urgent GP referral to first treatment	68.0% against 85% target
62 days from consultant upgrade to first treatment	77.8% against 85% target.
62 days from screening programme to first treatment	84.2% against 90% target.



Cancer services – patient survey results

2014 national cancer patient survey results

- We were disappointed by the recent results for Barts Health.
- Over past year, begun range of improvements in partnership with Macmillan:
 - Holistic needs assessment
 - Clinical nurse specialist forums
 - Schwartz Rounds
 - Bowel cancer pilot at Whipps Cross
 - Improved patient information
- Will continue to build on national best practice, focusing on patient experience, early diagnosis and improving the quality of life
- Also welcome recent approval of the application by the Maggie's charity to build a facility at St Bartholomew's

London Cancer 2013 radiotherapy patient satisfaction survey

- 100% of patients would recommend our service
- Over 95% rated their care as very good or excellent
- Also showed reduction in waiting times for treatment





Managing and reporting incidents

- Our staff reported 21,662 patient safety incidents in 2013/14, compared to 19,493 in 2012/13
- We reported 407 serious incidents to our commissioners and NHS England in 2013/14
- We actively encourage all staff to report incidents – higher numbers reported does not mean an unsafe environment
- It is important for staff to report incidents so that everyone can learn from them. Remedial action can be put in place at a local level and across the wider organisation before any serious harm occurs
- We have now eliminated overdue serious incidents as a result of collaboration with all our local CCGs



Managing and reporting never events

- All NHS trusts report against a nationally mandated list of never events – events that should not occur in a modern healthcare setting
- It is good practice to report all potential never events and to review each one again after thorough investigation
- We reported **eight** events in our 2013/14 Quality Account, but this reduced to **six** after full investigation with commissioners
- We have reported **four** so far in 2014/15, but expect **two** of these to be downgraded
- We launched a campaign on learning from all never events in April 2014, based on eight key messages
- We have significantly improved patient safety during surgical procedures in the last year, including implementing recommendations from an external review of theatre systems
- All our hospitals now use the SurgiNet electronic tracking system to help staff monitor use of WHO safer surgery checklist



Our patient transport service

- We introduced a new, single transport provider on 1 June, replacing 14 individual previous contracts
- Moving to a single supplier was an important step in improving quality of service
- Initial changeover caused delays and cancellations
- Any patient who missed an appointment had both their appointment and transport rebooked
- Real-time performance monitoring of service by hospital directors and senior managers
- Dedicated 24/7 helpline established for GPs
- Working group identified long term solutions. Over the past four months the performance has significantly improved to levels that were seen at pre-mobilisation.
- Call waiting times and numbers of complaints have fallen consistently month on month
- A few areas where issues are still being resolved



Cerner Millennium at Whipps Cross

- Implemented the Cerner Millennium electronic patient record at Whipps Cross in May 2014 - provides a single patient record across Barts Health
- Problems experienced with entering information from clinics and tracking patient records
- Immediate response put in place, including:
 - Additional staff and training to support Whipps Cross teams
 - Prioritising patients needing urgent treatment
 - Daily assurance meetings with key staff and leaders
 - Dedicated team in place to manage paper records
 - Improvements made to outpatients telephone service
- Full investigation carried out, including an independent external review
- Situation now resolving and moving to “business as usual” activity levels and standards
- Urgent two week wait referrals are now registered or booked within three days of receipt, and all routine referrals are registered and digitally scanned within a five day turnaround



Letters to GPs and patients

Postal service

- Review of service and function across all sites undertaken – plan to move to new provider in February 2015
- New escalation processes and procedures now in place to ensure issues are identified and rectified swiftly
- Admin and clinical teams reminded of the need to ensure adequate notice and time allowed for letters to be delivered. Monitored regularly. Additional work at Whipps Cross to avoid short notice cancellations

Letter typing

- Function is managed within each clinical service
- Standards currently monitored via the outpatient transformation board
- Will be monitored through a new outpatient performance dashboard – to be in place by January 2015





Reducing appointment errors

Actions already taken and complete

- Review of staffing structure to align best practice and resources
- New process in place for reinforcement of the minimum rule for clinic cancellations
- Standard operating processes now in place in all outpatient areas

Actions still in train and ongoing

- Development of Dashboard with revised set of KPIs to monitor performance – to be completed by December 2014
- Many staff already trained to reduce error rate. Training is ongoing according to need
- Outpatient turnaround work will centralise all booking functions to ensure standardised and consistent approach to booking and performance . Focus upon three main areas – access to services, environment and experience, and patient outcomes (to be completed by March 2015)





CQC follow up inspections

- As part of the new inspection model, and following the intensive review in November 2013, CQC are now undertaking a series of follow-up inspections across all our sites.
- These are an opportunity for us to confirm and celebrate improvements and excellence in care, and to highlight where we need to further improve.
- CQC carried out first follow up inspection at Whipps Cross during w/c 10 November – 40 to 45 inspectors on site, split into nine groups focusing on our core services.
- A full report of the inspectors' findings will be published by the CQC later in the year
- Dates of other site inspections yet to be confirmed but will be shared once available.
- Inspections will form part of the rating we are given in 2015.

