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22nd November 2011

Mr P Irving
Chairman
County Durham LINK
Pioneering Care Centre
Carers way
Newton Aycliffe
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RECEIVED

23 NOV 2011

Dear Mr Irving,

**JOINT INFORMATION GATHERING GROUP REPORT – UNIVERSITY HOSPITAL
NORTH DURHAM**

On behalf of Mr Stephen Eames, Chief Executive, I would like to thank you for your report received 21st September 2011 and subsequent meeting on 31st October 2011, with yourself, Alesha Aljeffri, Liz Greer, Maureen Grieveson and Jill Salkeld.

The JIGG report has been reviewed by senior members of County Durham and Darlington Foundation Trust and a response to the report is as follows:

- The National Outpatient Survey referenced in the JIGG report was carried out in 2009, results are received to the Trust in 2010 and the National Inpatient Survey was carried out in 2010 and reported to the Trust in 2011. We are currently waiting for the outcome of the 2011 National Outpatient Survey, and the Inpatient Survey is currently taking place.

All National Surveys are summarised and reported at the Quality & Healthcare Governance Committee chaired by the Director of Nursing and attended by Senior Care Group leads. Action plans are developed and monitored as a result of survey results in order to improve areas that are identified.

I am aware that Marion Dille, Associate Director of Nursing, attended the JIGG Meeting of 18th July 2011 and explained that the Trust uses the National Surveys to identify where more in depth work is required. The outcomes of the National

surveys provide trust wide data and Marion explained to the JIGG that access to the ward performance framework was available which provides site related data rather than trust wide data.

The Post Discharge Survey (discussed with Marion on 18th July 2011) allows the Trust to shadow the national survey outcomes giving the Trust Board assurance that feedback from patients are taken seriously. Issues are identified and actioned in real time, rather than waiting for the results of national surveys. This provides the Trust with up to date feedback from patients who have recently been discharged, allowing actions to be carried out to improve the service in real time. Qualitative data received from this survey provides the Trust with ward based information. A copy of the post discharge survey quarter 2 is attached for your information.

- In terms of the staff survey results, Marion suggested that the JIGG committee contact the Associate Director of Learning and Development to discuss concerns regarding apparent levels of stress within the workplace and the JIGG Committee was informed of the workshops being developed for staff teams.

Following the 2009 staff survey results, a great deal of effort was placed on two key areas ahead of the 2010 survey. These were: Improving levels of staff engagement and improving the uptake of staff appraisal and Personal Development Plans.

Both of these actions were aimed at improving how staff feels about working in County Durham and Darlington Foundation Trust and therefore improving our response rate around reputation, recommending the Trust as a place to work and receive care, and reducing staffs intention to leave the Trust.

We acknowledge that we have not made the level of improvement we might have liked but we equally accept that during times of such large scale complex change that this will take time and we are continuing to work with staff to address these issues.

Throughout 2010 we improved our internal communications processes introducing the Chief Executive blog and executive level road shows and we placed great emphasis on our Quality Challenge programme – all of which were intended to engage staff more in the decisions that affect them, their patients and the Trust. Quality Challenge events were really well received and we were able to share staff views, ideas and where they made changes that improved the care and quality of service, we have been able to share Trust wide.

We made huge inroads ensuring all staff have the opportunity to discuss how they do their job and what knowledge and skill they need to do their job well via an annual appraisal and we improved uptake by 38% from the previous year. This year 2011/12 and next year 2012/13 however we will concentrate on the quality of the appraisal experience as again this supports how staff feel about working within the Trust and how they can contribute and indeed do contribute to the delivery of excellent services to our patients and clients.

Additionally work will continue in to next year on our behaviours framework – setting the desired behaviours and attitudes required of staff working in this Trust. We will

continue to embed this into our appraisal process and into everyday practice as this is fundamental to the way in which we want to live up to our values.

- Issues pertaining to the discharge process were discussed with the JIGG committee and I understand the Committee have been provided with the Discharge Policy. A significant piece of work is taking place in relation to discharge planning following a Rapid Process Improvement Workshop (RPIW). This is a multi disciplinary project identifying ways to deliver a smooth transition from hospital. Over 20 recommendations are being progressed focussing on what information is provided to GPs on discharge. A copy of the RPIW progress report is provided.

A six month project is ongoing, requesting information from Nursing and Care Home managers regarding their experiences of the discharge process and will result in a joint event to discuss and move forward with this work. This work was the result of an initial combined piece of work with the Care Home Forum, County Hall and the Trust to improve discharge communication and has been rolled out across the whole Trust to include Warren Tweed and the Darlington Care Home Forum. We have communicated with District Nursing Teams, TEWV and ward teams to improve this document.

- A great deal of work is also taking place in terms of quality of care, staff attitude and communication.

In terms of Quality of care, a number of wards have the dignity action card comment forms in use, and collect patient feedback against the 10 points of the dignity challenge.

Matrons and volunteers ask five patients on every ward every month to complete a care audit as part of the ward performance framework with the results for UHND being 95% or more (August data). Some of our volunteers are also members of Durham LINK and we are very grateful for their input to the service.

Staff attitude and communication - UHND has 81 registered Dignity Champions with 10 more in the surrounding areas. The Trust includes dignity awareness in different ways. Within mandatory training sessions every member of staff observed the RCN *Dignity at the Heart of Everything We Do* presentation, the *Lets Respect* presentation and the *What Do You See* presentation. It was included in conference presentations, NVQ training, Student Nurse Induction etc and is celebrated every year through Dignity Action Day on 25th Feb.

- In terms of patient safety, the Trust is implementing an approach to prevent and reduce falls across the Trust. The approach will use a methodology (Rapid Spread Solutions©) for the rapid spread of evidenced-based falls care interventions. Rapid Spread Solutions© utilises the learning from large scale change programmes and combines it with proven improvement techniques and principles of mobilising and organising. The approach requires that the interventions/care bundles to be rapidly spread have been tried, tested and evidenced and are therefore in a state of readiness for successful rapid spread. The project is supported by Stephen Eames and is sponsored by myself as Director of Nursing, with clinical leadership provided by Eileen Aylott, Clinical Standards Matron, Older People and Dignity. The Trust is

taking the lead on Falls as part of Safety Express and is already making improvements in this area and is sharing best practice across the North East.

Near misses are being recorded and handled when they are running at a reported 25%. Issues are identified before they have caused harm, and actions are developed to prevent a harm incident. All issues are discussed at the Patient Safety Committee and with senior staff in each division.

- The Trust acknowledges the importance of same sex accommodation - All wards adhere to the national good practice standard with all bays being same sex. Any breach of this standard requires the incident to be reported and this is followed up promptly. Information is available to inpatients to clarify same sex accommodation expectations. Wards may include both male and female occupants; it is the bay which should include either all male or all female patients.

County Durham and Darlington Foundation Trust have had a very constructive relationship with LINKs for the previous two years, and are working closely with the Enter & View Group in a number of service areas. As you are aware Mr Irving, you have received responses to all of the enter and view reports as requested. A number of positive outcomes were identified as well as suggested areas for improvement. An action plan has been provided to LINKs supporting the findings. Actions provided to the LINKs have been instigated in order to improve practice within Emergency Departments and Outpatient Departments to date.

Many patient experience measures are adopted in order to gain an eclectic view of patient feedback in both real time and right time. As well as the quarterly post discharge survey (which is sent to patients after discharge, but includes all aspects of their hospital experience), feedback is analysed from comments and compliments (of which we have received over 4000 throughout July - Sept 2011). We have introduced on a number of wards, comment cards that are completed on the day of discharge. Feedback is provided to the ward team swiftly in order that actions can be put in place immediately. This will be rolled out across the Trust shortly. We also plan to introduce patient interviews across sites. We also consider the complaints and concerns that are raised and identify themes that emerge. This data is provided within the CLIPs report provided on a quarterly basis.

NHS Choices data is also analysed. The JIGG report has highlighted that at 27th June, 51% of respondents would recommend UHND to a friend. This data however takes into account data from 2007 and therefore would not be considered to be a reliable measure in 2011. Data supplied for July – September 2011 however is much more relevant and highlights that 78% would recommend UHND to a friend. Issues that are reported at NHS Choices are, of course taken seriously, and issues progressed.

Please find enclosed the quarter 2 post discharge survey which has been received at the Quality & Health Care Governance Committee in November 2011. The RPIW progress report re: Hospital Discharge and details of dignity champions is also included for your information.

If you require further information, please contact Jill Salkeld, Patient Experience Manager jill.salkeld@cddft.nhs.uk who will refer you to the most appropriate member of staff to help you with your request.

We look forward to discussing this further with you at our meeting on Friday 25th November 2011.

Yours sincerely,



LAURA ROBSON
Executive Director of Nursing and Service Transformation

Cc Jean Pegg Care Quality Commission
Mel Campbell Durham County Council
Feisal Jassat Overview and Scrutiny Committee.
Stephen Eames Chief Executive