

6 December 2011		ITEM 6
Health and Well-being Overview & Scrutiny Committee		
Update from North East London Foundation Trust		
Report of: North East London Foundation Trust		
Wards and communities affected: All	Key Decision: Non-key	
Accountable Head of Service: Roger Harris, Head of Commissioning		
Accountable Director: Jo Olsson, Corporate Director of Peoples' Services		
This report is Public		
Purpose of Report: To provide the committee with a progress report relating specifically to the NELFT Quality Account (10/11) submitted to HOSC in June 2011, referring particularly to Community Health Services provided to the residents of Thurrock and the remainder of South West Essex.		

Comment [sj]: PLEASE CLICK THIS BOX ONCE and enter the date of the meeting (in font 16, not capitals)

Comment [sj]: Please leave this for completion by Democratic Services

Comment [sj]: PLEASE CLICK THIS BOX ONCE and enter the name of the Committee you are reporting to (in font 16, not capitals)

Comment [sj]: PLEASE CLICK THIS BOX ONCE and enter the title of your report (in font 16)

Comment [a j]: Please enter the name and job title of the person who will be presenting the report

Comment [sj]: Please enter details of any Wards and Communities affected by the

Comment [sj]: Yes/No/Not Applicable – a 'Key Decision' is generally one affecting more

Comment [sj]: Please state the Head of Service's name and job title

Comment [sj]: Please state Director's name and job title

Comment [sj]: State whether your report is Public or Exempt. If Exempt (i.e. not to be given to

Comment [sj]: Briefly set out the purpose of your report

Comment [sj]: Please provide a summary of the key points in your report

Comment [sj]: The recommendations should be set out in bold in the form of the

Comment [sj]: You should briefly explain why the report is on the agenda - See para. 5.3 and 5.4

EXECUTIVE SUMMARY

North East London Foundation Trust is the NHS organisation which, since being awarded a contract in April 2011, provides a range of community health services to the population of Thurrock and South West Essex.

NELFT submitted its published Quality Account to Thurrock OSC in June 2011. This paper provides a report to members outlining progress made against the key objectives identified within the Account to date.

1. RECOMMENDATIONS:

1.1 To accept and note the contents of the report

2. INTRODUCTION AND BACKGROUND:

2.1 Healthcare providers publishing Quality Accounts have a legal duty to send their Quality Account to the OSC in the local authority area in which the provider has its registered office, inviting comments on the report from the OSC prior to publication. NELFT, as a multi site provider, also submitted its

Quality Account to Thurrock. A response statement was duly returned and is attached at Appendix 1 for reference.

2.2 NELFT identified its 5 main objectives for improvement in South West Essex within the Account : these are noted below;

- Improving Discharge Planning
- Improving Nutritional Assessment
- Improving Tissue Viability Assessment
- Reduce Harm from omitted and delayed medicines
- Compliance to NICE guidance in relation to prevention of Venous Thromboembolism (VTE)

The development plans that have been put in place and any progress made regarding the above is reported within appendices 2-6

3. **CONSULTATION (including Overview and Scrutiny, if applicable)**

3.1 Not applicable

4. **IMPACT ON CORPORATE POLICIES, PRIORITIES, PERFORMANCE AND COMMUNITY IMPACT**

4.1 The intention is to improve services to Thurrock residents receiving care related to the reported objectives

5. **CONCLUSION**

5.1 It is evident from the papers submitted that a systematic approach has been adopted in regard to these service improvements, with clear objectives and outcome measures noted, as well as accountable leadership identified for each priority. Progress made is indicated by completed actions and generally offers a qualitative narrative.

5.2 A review of the 5 priority reports has noted the following;

- 1 Compliance to NICE guidance in relation to prevention of VenousThromboembolism (VTE). Good progress indicated
- 2 It is reported that appropriate assessments and protocols have been developed and published on the intranet: It would be useful to know what mechanisms were used to launch these important tools
- 3 Awareness sessions have been delivered to community inpatient units: It would be useful to know the number, and percentage, of staff who have attended.
- 4 Improving Tissue Viability Assessment. Good progress indicated

Comment [jj]: This should include any consultation with Ward Members and Shadow Portfolio Holders, as well as any public or statutory consultation

Comment [aj]: Please refer to Section 5.7 of the Report Writing Guidelines

Comment [sjj]: This should inform the recommendations in the report

- 5 The tools to measure compliance with key criteria have been developed and these guidelines will be monitored in due course; the results should be included in any further reports to HOSC
- 6 Staff training has been set up but there is no indication of the number or percentage of staff who have completed this education.
- 7 A review of serious incidents relating to avoidable grade 3 and 4 pressure ulcers is undertaken weekly but no statistical evidence is presented.
- 8 It should be noted that NO complaints or concerns have been noted in the last 6 months, which is commendable.
- 9 Improving Discharge Planning. Good progress
- 10 It would be It is reported that the Average Length of Stay is has been significantly reduced. However, it would be useful to have a comparator from the last 12months in order to give context.
- 11 Improving Nutritional Assessment. Good progress
- 12 No incidents or complaints noted which is to be commended
- 13 It is reported that staff training has been delivered. It would be useful to know the number and percentage to give context.
- 14 Reduce Harm from omitted and delayed medicines

APPENDICES TO THIS REPORT:

- Appendix 1 Response letter to Quality Account
- Appendix 2 Improving Discharge Planning
- Appendix 3 Improving Nutritional Assessment
- Appendix 4 Improving Tissue Viability Assessment
- Appendix 5 Reduce Harm from omitted and delayed medicines
- Appendix 6 Compliance to NICE guidance in relation to prevention of Venous Thromboembolism (VTE)

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Comment [sj]: List the Appendices referred to in the Report

Comment [sj]: Insert the full contact details of the author of the report