

## Borders NHS Board



Meeting Date: 3 October 2019

<b>Approved by:</b>	Cliff Sharp, Medical Director
<b>Author:</b>	Laura Jones, Head of Quality & Clinical Governance
<b>QUALITY &amp; CLINICAL GOVERNANCE EXCEPTION REPORT OCTOBER 2019</b>	
<b>Purpose of Report:</b>	
<p>The purpose of this report is to provide the NHS Borders Board with an exception report on activities and progress across areas of:-</p> <ul style="list-style-type: none"> <li>• Patient safety</li> <li>• Clinical effectiveness</li> <li>• Person centred health and care</li> <li>• Research governance</li> </ul>	
<b>Recommendations:</b>	
The Board is asked to <b>note</b> this report	
<b>Approval Pathways:</b>	
This report has been reviewed by the Board Executive Team.	
<b>Executive Summary:</b>	
<p>This exception report highlights the following areas across the Quality and Clinical Governance portfolio:-</p> <ul style="list-style-type: none"> <li>• Patient safety           <ul style="list-style-type: none"> <li>○ Adverse events</li> <li>○ Scottish Patient Safety Programme</li> </ul> </li> <li>• Clinical effectiveness           <ul style="list-style-type: none"> <li>○ Joint Inspection Adult Health and Social Care Services</li> </ul> </li> <li>• Person-centred health and care           <ul style="list-style-type: none"> <li>○ Feedback and complaints</li> <li>○ Public involvement</li> <li>○ Volunteering</li> </ul> </li> </ul>	
<b>Impact of item/issues on:</b>	
<b>Strategic Context</b>	The NHS Scotland Healthcare Strategy (2010) and NHS Borders Corporate Objectives guide this report
<b>Patient Safety/Clinical Impact</b>	Patient safety, person-centred care, clinical effectiveness, research and innovation, and quality improvement sit within the Quality & Clinical

	Governance portfolio
<b>Staffing/Workforce</b>	Service and activities are provided within agreed resources and staffing parameters
<b>Finance/Resources</b>	None
<b>Risk Implications</b>	In compliance as required
<b>Equality and Diversity</b>	Compliant
<b>Consultation</b>	The content of this paper is reported to Clinical Boards, Clinical Governance Groups, the Clinical Executive Operational Group and to the Board Clinical and Public Governance Committees
<b>Glossary</b>	SPSP- Scottish Patient Safety Programme HIS - Healthcare improvement Scotland BGH - Borders General Hospital PCS - Primary and Community Services

## **PATIENT SAFETY**

### ***Adverse Events***

NHS Boards completed an evaluation of their management of adverse events earlier this year. The findings from this evaluation are being published in a combined report from Healthcare Improvement Scotland (HIS) this month. The report examines the current status of adverse event management processes in all NHS Boards across Scotland looking at gaps and inconsistencies. The report will now be used to carry out a local gap analysis and to further develop local systems and processes for adverse event management incorporating the new requirements around duty of candour. The outcomes of this work will be considered at the Board Clinical Governance Committee.

### ***Scottish Patient Safety Programme***

NHS Borders recently completed a self assessment of progress against the Scottish Patient Safety Programme (SPSP) Adult Acute workstream priorities of medicines, deteriorating patients, falls, pressure ulcers and catheter associated urinary tract infections. HIS have provided feedback to direct future priorities for these workstreams which will now be built into our local improvement plans.

An event to mark World Patient Safety Day took place on 17 September which provided patients, visitors and staff across NHS Borders with an opportunity to provide feedback. Two simple questions were asked, "what makes you feel safe in hospital?" and "what makes you feel unsafe in hospital?"; a large number of people participated. The feedback will be collated and shared widely with a number of groups across the organisation and will be used to inform future quality improvement work.

## **CLINICAL EFFECTIVENESS**

### ***Inspection***

From 25 November 2019 the Care Inspectorate are undertaking a Joint Inspection of Adult Health and Social Care Services: Progress Review. This is a follow-up of the 2017 inspection, reviewing the progress made by the Health and Social Care Partnership against the 13 recommendations made at that time.

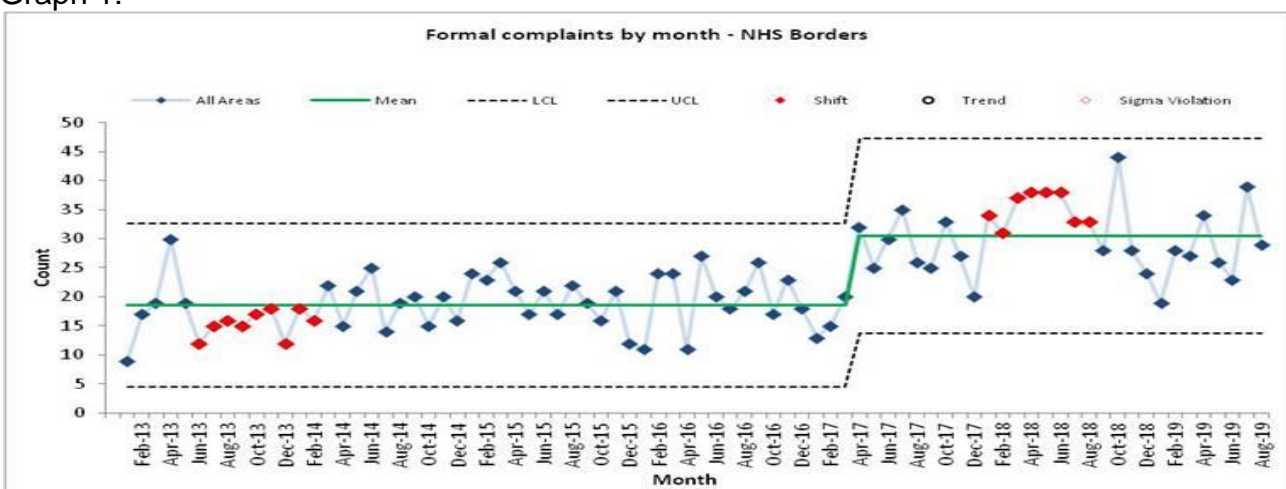
**PERSON-CENTRED HEALTH AND CARE**

***Feedback and complaints***

In addition to formal complaints, feedback is obtained through multiple routes including Care Opinion, the 2 minutes of your time feedback questions placed across NHS Borders sites, through patient feedback volunteers who visit services and talk to patients and their families, through specific service questionnaires and through the Scottish Public Service Ombudsman.

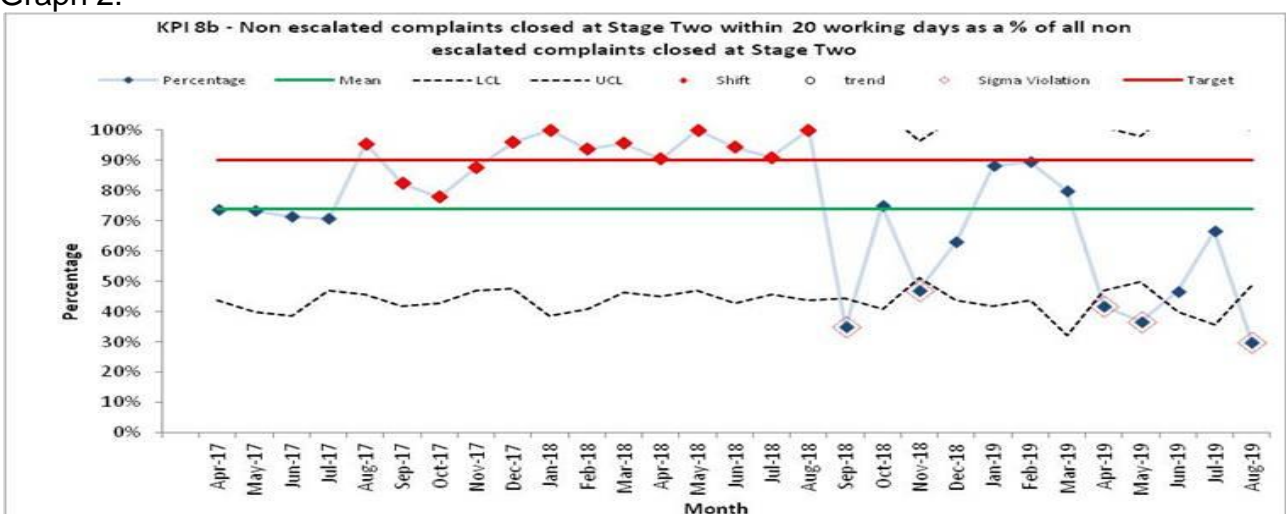
NHS Borders have continued to observe an increased level of formal complaints since the introduction of the new complaints handling system. Graph 1 highlights the number of formal complaints received by month, now averaging around 30 per month, an increase of 64% since the new system was introduced:

Graph 1:



Performance against the 20 working day target for Stage 2 non escalated complaints continues to be variable and below target. The Patient Experience Team are now struggling to manage the volume of patient feedback within the timescales expected. This is being reviewed as part of an assessment of workload within the clinical governance and quality function and solutions will be sought through this process to address capacity to meet demands from the multiple sources of patient feedback provided by NHS Borders. Graph 2 highlights the performance against the 20 working day target:

Graph 2:



Graph 3 shows the number of days taken to respond to complaints received between September 2018 and August 2019. The average response time was 22 days for stage 2 non-escalated complaints:

Graph 3:

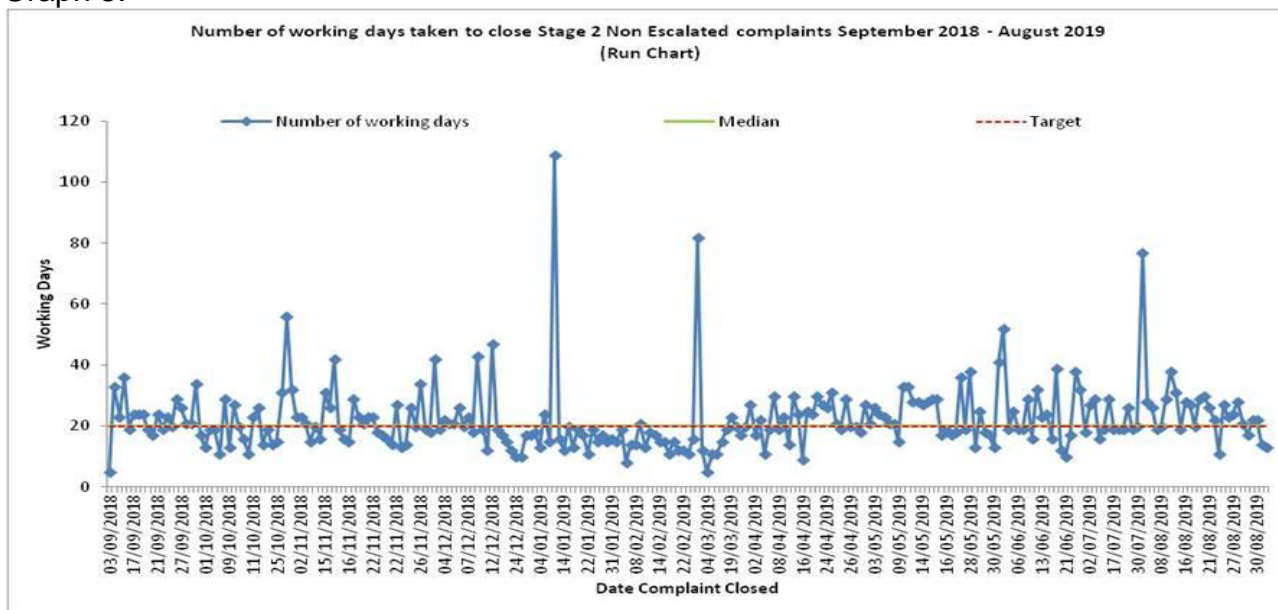


Table 1 provides a summary of Care Opinion feedback for 1-18 September 2019:

Story Title	Criticality	Clinical Board	Service
An accident on our son's wedding day	Positive	BGH	Accident & Emergency
4.5 hours for 40 minutes of health care practitioner contact	Negative	BGH	Acute Assessment Unit
Urine infection while holidaying in Jedburgh	Positive	BGH	Urology
Long live the NHS	Positive	BGH	Endoscopy
SCBU 10/10!	Positive	BGH	Maternity care (Ward 17)
Everyone was great	Positive	PCS	Hospital to home service
Hearing clinic	Negative	BGH	Audiology
Recent hip replacement surgery	Positive	BGH	Trauma & orthopaedics (Ward 9)
The treatment I have received was very good	Positive	BGH/PCS	Trauma & orthopaedics (Ward 9), Hospital to home service
Colonoscopy	Positive	BGH	Endoscopy
The birthday of my baby boy	Positive	BGH	Maternity care (Ward 17)
Stroke care	Positive	BGH	Day Hospital, Stroke Unit
Helped my mum	Positive	BGH/PCS	Accident & Emergency, Occupational Therapy, Borders General Practices

***Public Involvement***

Work is underway to develop public involvement plans to support key transformation priorities of NHS Borders and strands of the financial turnaround programme. NHS Borders is working alongside the Scottish Health Council to develop these plans. This work will be reported to the Board's Public Governance Committee as it is progressed.

***Volunteering***

NHS Borders Voluntary Services Manager together with the Volunteering Lead for 'Space to Grow' project and Breastfeeding Peer Supporters are attending a volunteering networking event on 25 September 2019 initiated by the Three Borders Lord-Lieutenants and Scottish Borders Council. The event provides an opportunity for volunteering groups to learn and share experiences, discuss opportunities and identify gaps. The afternoon will include a Volunteering Fair for organisation to showcase to members of the public, it is hoped that this will be an opportunity to recruit new volunteers to work within NHS Borders.

Helpforce, who work in partnership with NHS Hospital Trusts to help fund and transform volunteering in and around hospital settings have secured funding with Marie Curie focusing on volunteering initiatives in End of Life Care. NHS Borders have submitted an application form for the 'Companion Volunteers' model. If successful, volunteers will engage with the Palliative Care team in supporting families and carers in end of life care within NHS settings.

A new role has been developed to support Type 1 Diabetes patients. Volunteer Lead, Jill Little, Lead Diabetes Specialist Nurse will support volunteers in carrying out their role to provide support for patients and their families.