APPENDIX 2

DURHAM COUNTY COUNCIL ADULTS WELLBEING AND HEALTH OVERVIEW AND SCRUTINY COMMITTEE

COMMENTS ON COUNTY DURHAM AND DARLINGTON NHS FOUNDATION TRUST QUALITY ACCOUNT FOR 2022/23

The Adults Wellbeing and Health Overview and Scrutiny Committee welcomes County Durham and Darlington NHS Foundation Trust's Quality Account 2022/23 and the opportunity to provide comment on it. The Committee are mindful of their statutory health scrutiny role and the need to demonstrate a robust mechanism for providing assurance to the residents of County Durham that health service provision is efficient and effective. The quality account process provides the Committee with one such mechanism.

During the past year the Committee has specifically engaged with the Trust in respect of Shotley Bridge Community Hospital; winter planning/preparedness and the work of the Local Accident and Emergency Delivery Board and a review of service pressures during the winter period.

In terms of performance against the 2022/23 priorities the Committee notes the RAG reporting system adopted by the Trust and that whilst it is pleasing to see no Red ratings in any priority areas, all but two fall into the amber category. Members specifically were concerned that performance was amber in those areas where the Trust adopts a Zero tolerance namely pressure ulcers and MRSA. In responding to the Trust's 2021/22 Quality Account priorities concern was expressed about the Trust's performance in respect of Sepsis and its ability to provide antibiotics within one hour at A&E. Members continue to have concerns around this issue and would seek clarity from the Trust in respect of this performance and the steps taken to ensure that, where appropriate, antibiotics are administered within this timeframe.

The Committee acknowledges the ongoing pressures being placed on the health and social care system generally and specifically within the Trust which continue to impact on performance in key service areas such as A&E waiting times, discharge planning and patients with additional needs including dementia, learning disabilities and mental health needs.

Specific questions raised by members in respect of the Quality Account report include:-

- Considering the national shortage of midwives how will the mentors be monitored as well as the students to ensure the standard is of a high enough quality during their educational programme?

- Recognising, again, the current shortage of nurses and other health professionals and carers. How can improving the care with additional

needs, Mental Health, Dementia and other conditions be achieved? People with physical and mixed mental health issues can put tremendous strain on a workforce and can be a challenge which also impacts on patients who are physically unwell.

- Fabulous system using colour coded jugs but how will it be monitored accurately to ensure this doesn't just become another task rather than an essential need for hydration and nutrition?

- Is there a correlation between Sepsis and C.Diff? Is there close monitoring of antibiotic use following transfer from ED to ward areas and is there a potential risk to patients from overuse of antibiotics.

- Are urethral catheters removed as quickly as possible if not essential?

- In respect of the management of patients with Sepsis. Are there any plans for specialist practitioners/prescribers for this assessment and management process. NICE Patient Group Directions (Aug 2013, updated March 2017) suggest "Consider investing in the training of additional non-medical prescribers to enable redesign of services if necessary, as part of a wider development or review of local medicines policy."

- A specific query was raised regarding how the Trust makes arrangements for pain management for children who are discharged from hospital and need appropriate medication.

Finally, in order to ensure that it continues to provide a robust Health scrutiny function and assurances in this respect to the residents of County Durham, the Committee will continue to engage with the Trust in terms of performance. As in previous years, the Committee would request a progress report on delivery of 2023/24 priorities and performance targets within the Quality Account.

APPENDIX 2

DURHAM COUNTY COUNCIL ADULTS WELLBEING AND HEALTH OVERVIEW AND SCRUTINY COMMITTEE

COMMENTS ON TEES ESK AND WEAR VALLEYS NHS FOUNDATION TRUST QUALITY ACCOUNT FOR 2022/23

The Adults Wellbeing and Health Overview and Scrutiny Committee welcomes Tees, Esk and Wear Valleys (TEWV) NHS Foundation Trust's draft Quality Account 2022/23 and the opportunity to provide comment on it. The Committee are mindful of their statutory health scrutiny role and the need to demonstrate a robust mechanism for providing assurance to the residents of County Durham that health service provision is efficient and effective. The Quality Account process provides the Committee with one such mechanism.

Members have continued to engage with the Trust in respect of the specific impact of the COVID-19 pandemic on the services provided by TEWV particularly regarding the time for referral into services as well as accessing initial and follow up treatments. Additional engagement with the Trust has taken place in respect of the CQC Report into Adult Learning Disability Services across Durham Tees Valley and the associated improvement plan and, in conjunction with the Children and Young People's OSC, Children and Adolescent Mental Health Services (CAMHS) waiting times and the i-Thrive framework of care.

The Committee considers that the Quality Account is clearly set out and that progress made against 2021/22 priorities is clearly identified. Reflecting on the Trust's work in respect of personalised care planning, whilst members welcome the planned introduction of the DIALOG care planning system they note that this will be paper based with the electronic version expected in July 2023. They also believe that the Trust should ensure that the system includes a robust system of metrics to assess the effectiveness of care plans and goals.

In examining performance in respect of how safe patients feel on the wards, the Committee are disappointed that on average 59% of patients feel safe within inpatient wards compared with a target of 88%. Members would welcome further information from the trust as to how they plan to improve ward environments and foster a safer environment for patients. They also noted that staff consider that insufficient staff numbers or suitably trained staff can lead to patients feeling unsafe. Members would like the Trust to explain how it will be possible to maintain patient safety if using high numbers of agency staff for cover?

The Committee note the work being done by the Trust in respect of learning from deaths which they consider to be a vital importance in view of recent issues reported in the media around deaths of patients within the care of the Trust. Whilst the report highlights the use of safety briefings following patient

deaths, questions have been raised as to whether safety briefings are an effective solution? These issues appear to need much more than this when some of the issues involve communication between TEWV and other agencies; record keeping; the need to consider physical problems as well as mental health concerns and the whole approach to medication, including side effects, contraindications and toxicity amongst others. It is difficult to determine whether this is related to poor skill mix, poor practice, overuse of agency, management issues and what appears to be a lack of knowledge relating to physical assessment and not seeing the whole person. Perhaps a skills review needs to take place and work needs to be done on a recognised programme of education for all levels of staff which could also be used as a recruitment and retention tool.

The Committee welcomes the improved engagement of patient's families and carers when discussing serious incidents but feel that this should be firmly embedded within the Trust and also that patient/family/service user surveys should employ questions that are more open and likely to produce more informed responses.

In respect of the proposed Quality Account priorities for 2023/24, the Committee notes that all of the 2022/23 are to be carried over and they support this approach.

Finally, in order to ensure that it continues to provide a robust health scrutiny function and to provide assurances in this respect to the residents of County Durham, the Committee would request a progress report on delivery of 2023/24 priorities and performance targets.

APPENDIX 2

DURHAM COUNTY COUNCIL ADULTS WELLBEING AND HEALTH OVERVIEW AND SCRUTINY COMMITTEE

COMMENTS ON NORTH EAST AMBULANCE SERVICE NHS FOUNDATION TRUST QUALITY ACCOUNT FOR 2022/23

The Committee welcomes North East Ambulance Service (NEAS) NHS Foundation Trust's Quality Account 2022/23 and the opportunity to provide comment on it. The Committee are mindful of their statutory health scrutiny role and the need to demonstrate a robust mechanism for providing assurance to the residents of County Durham that health service provision is efficient and effective. The quality account process provides the Committee with one such mechanism.

In considering the performance information provided by the trust, members noted that NEAS continues to be the best performing ambulance trust across England and Wales in respect of responsiveness for category 1 and 4 calls whilst second best for category 3. However, members remain concerned that performance was outside the national targets for all categories. Members also note that the performance reported are for mean ambulance response times across the NEAS footprint and there remains concern about performance specifically across County Durham.

In considering performance against 2022/23 priorities, members welcomed the work undertaken in reviewing handover delays and the development of a comprehensive report for the healthcare system in respect of handovers. The reduction in handover delays with the average time of handover of around 26 minutes against the regional commitment to a zero-tolerance approach to handovers over 60 minutes is welcomed. However, this still remains above the national standard target of 15 minutes for handovers.

The importance placed on learning from incidents by the trust is supported and the principle of putting patients and families at the heart of any patient safety incidents and associated learning also welcomed. In respect of the "efficient use of resources" priority, the committee noted the development of first contact practitioner roles within the workforce and the utilisation of these roles within the emergency operations centre; deployment into rapid response vehicles and their work in supporting primary care. Members also supported the recognition placed by the trust on the need to increase mental health expertise within emergency operation centres.

Members are pleased to see an increase in the engagement of patients and communities in service improvement. The recognition by the trust of the need to increase public involvement in service change, service delivery and design as well as patient representation on the trust's assurance committees is acknowledged.

APPENDIX 2

In considering the trust's proposed priorities for 2023/24, members support the continued work proposed regarding reduction of handover delays; continued involvement of patients and families in learning from patient safety incidents to ensure future service improvements and the increased service user involvement in patient safety and patient satisfaction activities. The Committee also welcomed the proposals to improve access to mental healthcare advice, support and services within the trust.

Finally, in order to ensure that it continues to provide a robust health scrutiny function and assurances in this respect to the residents of County Durham, the Committee will continue to receive and consider performance overview information. As in previous years, the Committee would request a progress report on delivery of the 2023/24 priorities and performance targets within the Quality Account.