



## TRUST BOARD

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Title:	<b>Clinical Operational Boards - Key Issues &amp; Escalation Points</b>
Action:	<b>FOR DISCUSSION</b>
Meeting:	<b>09 January 2019</b>

### **Purpose:**

This report contains a summary of the key issues discussed and escalation points for the Trust Board to either be informed about, or act upon based on the Clinical Operational Boards terms of reference.

The structure of the report has now been revised to specifically identify emerging risks and significant issues as well as highlight examples of outstanding practice or innovation.

The table in [Annex A](#) summarises the overall monthly contractual Key Performance Indicator (KPI) position as at the end of November 2018, by Commissioner, that are calculated and known monthly.

### **Recommendation:**

1. The Board is asked to discuss and note the content of this report. No action is required by the Trust Board.

	Name	Title
Authors:	Mark Robbins Dr David Vickers Anita Pisani Taff Gidi	Director of Finance and Resources Medical Director Deputy Chief Executive Assistant Director of Corporate Governance
Executive sponsor:	Gill Thomas	Director of Governance

## Trust Objectives

Objective	How the report supports achievement of the Trust objectives:
Provide outstanding care	Each Clinical Operational Board considers the impact of quality effectiveness and patient feedback in the holistic analyses of performance. This report includes an update on the quality site visits from Luton Clinical Commissioning Group.
Collaborate with other organisations	The inter-relationships with a host of other NHS and local government organisations are key to the performance of every service line.
Be an excellent employer	The achievement of recruitment targets, training and appraisal rates and staff welfare are key discussion point in every Clinical Operational Board. The report includes an update on mandatory training rates and a thematic review of risks in Luton identified recruitment and retention as a key challenge.
Be a sustainable organisation	Report includes an update on the financial performance of different services. Report also includes an update on 2018/19 Cost Improvement Plans and agency usage.

### Trust risk register

Each Clinical Operations Board considers all unit risks rated 12 or above. Risks scoring 15 or higher are escalated to the Trust Board.

### Legal and Regulatory requirements:

N/A

### Previous Papers:

Title:	Date Presented:
Clinical Operational Boards - Key Issues & Escalation Points	September 2018

### Equality and Diversity implications:

Objective	How the report supports achievement of objectives:
Achieve an improvement in the percentage of service users who report that they are able to access the Trust services that they require.	Not covered in this feedback, but would be central to the efficient running of any service.
To introduce people participation in our diversity and inclusion initiatives to capture the experience of hard to reach/seldom heard/varied community groups.	Not covered in this report
To introduce wider diversity on recruitment selection panels.	Not covered in this report
To deliver customised training and development for staff to further improve awareness of diversity and inclusion.	Not covered in this report
Are any of the following protected characteristics impacted by items covered in the paper	
Age <input type="checkbox"/>	Disability <input type="checkbox"/>
Gender Reassignment <input type="checkbox"/>	Marriage and Civil Partnership <input type="checkbox"/>
Pregnancy and Maternity <input type="checkbox"/>	Race <input type="checkbox"/>
Religion and Belief <input type="checkbox"/>	Sex <input type="checkbox"/>
Sexual Orientation <input type="checkbox"/>	

**Name of Committee:** Ambulatory Clinical Operational Board  
**Committee Chair:** Richard Cooper  
**Meeting Date:** 4 December 2018

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#### Summary of key messages:

- The Division continues to deliver good financial performance with a year to date variance of £30k with CIP being delivered to plan.
- Friends and Family Test is embedded across the Division and the Board receives examples of actions taken as a result of patient feedback.

#### Escalation Points:

1. Cambridgeshire and Peterborough CCG have given notice of their intention to fund Oliver Zangwill Centre differently from April 2019 and cease funding the Evelyn Community Head Injury Service (ECHIS) from October 2019.
2. A Never Event occurred in iCaSH Suffolk (wrong type of intrauterine device inserted). A full RCA is being undertaken and the Never Event has been appropriately reported externally.

#### Emerging Risks/Issues:

- There are pressures in the Dental Service leadership due to sickness absence compounded by the mobilisation of the minor oral surgery contract and the retendering process for special needs dentistry. The service is putting in place arrangements to address this.
- iCaSH won “top community trust for recruitment” at the Clinical Research Network Infection and Immunology Symposium.

#### Examples of Outstanding Practice or Innovation:

- MSK services relocated into their new premises in North Cambs Hospital
- The division has an overall compliance rate with mandatory training of 97%.
- Staff from Cambridgeshire and Bedfordshire Acquired Brain Injury Services held their first joint away day in October resulting in ideas for more joint working across the Trust’s geography.

Author:	<b>Dr David Vickers</b>
Job Title:	<b>Medical Director</b>
Date:	<b>19 December 2018</b>

**Name of Committee:** Children's Clinical Operational Board  
**Committee Chair:** Oliver Judges  
**Meeting Date:** 4 December 2018

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### Summary of key messages:

- The Trust successfully launched its digital platform - 'Just One Norfolk' in October 2018.
- The joint 0 - 19 Healthy Child Programme management and leadership structure went live across Cambridgeshire and Peterborough on 8 October 2018.
- There are 8 risks across the directorate recorded on Datix with a score of 12 or above. Safeguarding in Cambridgeshire (ID: 2834) continues to have a risk score of 16. One new risk has been recorded – Special School provision in Cambridgeshire (ID: 2888 – risk score 12). All risks have been reviewed.
- Four teams have a QEWT score of 15 or above. These are Special School Nursing and Children's Continuing Care in Cambridgeshire; the City Locality in the Norfolk HCP; and the Cambridge City AND East HCP team.

### Escalation Points:

- The risk around safeguarding in Cambridgeshire remains on Datix with a risk score of 16. Whilst identified actions have been undertaken to mitigate risk, these are short-term measures and the underlying issues around capacity remain.
- The QEWT score for Special School nursing is 16. The service manager is meeting all the Heads regularly and an audit has been undertaken to ensure all the high needs children have everything in place to meet their needs whilst at school.
- The QEWT score for Children's Continuing Care in Cambridgeshire have a score of 16. Staff are working additional paid hours and increased bank and agency are utilised so that short breaks cancellations are kept to a minimum.
- The QEWT score for the City Locality in Norfolk has a QEWT score of 16. This is due to short-term sickness resulting in cancellation of appointments and some service disruption. This is monitored and it is hoped will decrease in the next reporting period.
- The QEWT score for the Cambridge City and East locality is 19 with staff sickness and vacancies contributing to cancellations and service disruptions. Additional Saturday clinics have been provided in order to improve performance.
- Performance with a number of the mandated contacts in the Norfolk HCP is off target for this report. There have been particular issues in the City Locality around the delivery of the antenatal contact, which will be resolved for the next report.
- The year-to-date overspend for the Trust's acute services is £460k.

### Emerging Risks/Issues:

- There are emerging pressures in the clinical and medical workforce supporting Holly Ward Acute. The clinical service has 2wte RCN's on maternity leave, a 1wte RCN who has returned from maternity leave, but in a part time capacity, and 2 resignations were received in October. In the medical workforce, a senior consultant left at the end of December 2018, the service is down 1.5 registrars due to maternity leave and long-term sickness, and the service is one Junior Doctor down from December for 4 months. The mitigation of these shortfalls in staffing includes recruiting for a 10 PA's Locum and increased use of Agency Staffing.
- Risk ID 2784 is being maintained for monitoring and reporting the clinical workforce risk.

## Examples of Outstanding Practice or Innovation:

The Emotional Health and Wellbeing Service was launched in January 2018 in collaboration with Cambridge and Peterborough NHS Foundation Trust, who provide support to professionals to improve the emotional health and wellbeing of children and young people across Cambridgeshire and Peterborough. The team provide one to one support to children and young people (and their parents), with mild to moderate mental health difficulties, including drawing together agencies and other support networks.

There have been practical challenges with working in collaboration with another Trust, but the service is seen as vital in supporting children and young people at the earliest opportunity to try and reduce the impact in later life of their condition.

Author:	<b>Mark Robbins</b>
Job Title:	<b>Director Of Finance And Resources</b>
Date:	<b>27 December 2018</b>

**Name of Committee:** BEDFORDSHIRE AND LUTON CHILDREN AND ADULTS CLINICAL OPERATIONAL BOARD

**Committee Chair:** Geoff Lambert

**Meeting Date:** 5 December 2018

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#### Summary of key messages:

- Agreement has been reached with Bedfordshire Commissioners on the new 0-19 service model and consultation with staff on this new model is now underway.
- Both units are on track to deliver their financial plans for 17/18.
- Speech and Language Therapy services within Bedfordshire have been successful in appointing to their vacancies. This should mean that by end January 2019 the service will be able to meet 18 weeks referral to treatment.
- Capacity pressures continue within Bedfordshire Continuing Care service which continues to pose a risk to performance in this area. All vacancies have been recruited to, however, individuals will not join the service until January 2019 and then they will require training on the packages of care to ensure all competencies are in place.
- Luton 0-19 services achieved 95% compliance within their 2-2.5 year review for the second month running which is a significant improvement in their performance. The team were congratulated on this achievement.
- Luton Adult teams continue to work with acute and social care partners on the delivery of our enhance models of care proof of concept programme.

#### Escalation Points:

##### Luton Services:

- Harm Free Care indicator – reporting 80% against target of 96%. New harm free care level was 86.67% against a standard of 98.5%. 60 patients included in the survey. No submission for Harm Free Care indicator for September 2018 due to administration error. The Board was briefed on the further analysis that the teams had undertaken in relation to these results and the improvements that have been put in place to ensure that the survey does take place every month.
- Sickness levels – continue to rise across the unit. Currently reporting rolling sickness levels of between 5.46% - 6.53%. The Board received a detailed analysis of this and were assured that all cases were being appropriately managed and no specific trends/themes identified.
- Stability Index – Adult services reporting 86.45% and Specialist Children's reporting 74.60% against 87% target. The Board are aware of the reasons for the low percentage within specialist children's.
- Community Paediatrics – continues to breach 18 weeks referral to treatment – 65.9% against target of 92%. System wide redesign work is currently taking place on this pathway with East London Foundation Trust with the aim of presenting updated pathway to Commissioners by latest February 2019. Additional resources are being sourced as a short term measure to meet this demand and improve performance in this area. 18 week performance is expected to be met by end of January 2019 with these short-term actions being delivered.
- Community Paediatrics - % of GP letters following 1<sup>st</sup> outpatient appointment being sent within 5 working days (25.2% against target of 90%). This is due to clinical capacity and the complexity of the reports. % of follow-up reports sent (90.1% against target of 95%). Improvements in these measures will be addressed as part of the overall service redesign

work programme.

- Luton Healthy Child Programme – 3 out of the 6 mandated checks continue to be red rated for more than 2 months. However, as detailed above the 2-2.5 year review is now reporting compliance.
- Children’s BCG – 79% compliance against 90% target. Backlog programme has been delivered and the Trust continues to immunise new born babies at the Hospital.
- Diabetes Adult Services – 87.7% against 98% target. Staffing absences led to a small backlog in waiting breaches in September and October 2018.
- One QWETT score of 16 and above for October 2018. Safeguarding Children due to staff absences. Mitigating actions in place to cover service needs.
- One Risk scored at 15. Pressures within Community Paediatric Services. Various mitigating actions in place to improve performance in this area.

#### Bedfordshire Services:

- Mandatory training compliance – continues to be under performing. Overall compliance 87% in October against 92%. However, compliance levels steadily improving month on month.
- Appraisal compliance – 87.69% against 92% target. Compliance expected to be achieved by end December 2018.
- Two risks scoring 15 and above – Single Point of Access and Children’s Continuing Care staffing.
- Speech and Language Therapy services – breaching 18 weeks for over two months. Compliance expected by end January 2019.
- Paediatric Specialist Services – Continence – 18 weeks breached over two months. Plan in place and full recovery expected by end December 2018.

#### Emerging Risks/Issues:

- Bedfordshire services continue to work with Commissioners on the KPI and Outcome framework. The teams have submitted their updates and believe that they are meeting what is expected of them. The Board noted however the potential risk in this area due to 10% of the contract value being linked to the delivery of the Outcomes framework.
- Compliance with the 6 week diagnostic target for Children’s Audiology services across Bedfordshire and Luton continues to be met but remains a challenge as the service continues to have vacancies. Work is underway with Bedford Hospital to appoint a joint clinical lead role for our services.

#### Examples of Outstanding Practice or Innovation:

- Karen Patchett, Youth Offending Nurse shared her experiences of working with the Trust. She gave many examples of service user focussed compassionate care that she delivers on a daily basis. Excellent example of ‘outstanding’ services being delivered.
- Bedfordshire’s Baby Friendly team attended the National Baby Friendly Conference in Liverpool in November and submitted a poster presentation which detailed the study undertaken in mid Bedfordshire to increase sustained breastfeeding rates at 6-8 weeks.

- Luton Children's Specialist Nursing teams are to be commended on two quality reviews by Luton Clinical Commissioning Group and our internal quality peer review team. For the internal peer review the team was rating 'good' overall with 'outstanding' for the caring domain.
- Luton Children's and Adult Services have achieved 96-97% overall compliance with mandatory training and between 94-99% appraisal compliance.
- Luton Tissue Viability team led workshops for all staff on the national 'Stop the Pressure' day to raise awareness of this important issue.
- Luton School Nursing team will be launching 'Chathealth' to children aged between 12-19 during January 2019.

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Job Title:	<b>Deputy Chief Executive/Director of Workforce &amp; Service Redesign</b>
Date:	<b>31 December 2018</b>



Annex A - Summary of monthly-reported and tracked indicators

Contract	Rating	2017/18												2018/19								2018/19 year end forecast	Notes/Implications
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov		
Cambridgeshire and Peterborough CCG	GREEN	11	10	18	18	18	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	
	RED	1	2	5	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	% GREEN	92%	83%	78%	78%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
Cambridgeshire County Council (iCaSH)	GREEN	4	4	4	4	4	4	4	4	4	4	4	4	4	4	2	3	4	4	4	4	4	
	RED	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	3	2	1	1	1	1	
	% GREEN	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	80%	80%	80%	40%	60%	80%	80%	80%	80%	
Cambridgeshire County Council (Healthy Child Programme)	GREEN	8	8	8	5	6	5	8	9	9	9	7	7	5	3	4	7	8	7	9	9	9	Commissioning have supported prioritisation of service delivery due to staffing and pathway reviews. This has resulted in reduced performance against agreed KPIs.
	RED	4	4	4	7	6	7	4	3	3	3	5	5	6	8	7	4	3	4	2	2	2	
	% GREEN	67%	67%	67%	42%	50%	42%	67%	75%	75%	75%	58%	58%	45%	27%	36%	64%	73%	64%	82%	82%	82%	
Peterborough City Council (iCaSH, also included in quarterly results table)	GREEN	16	16	17	15	15	14	17	18	16	16	16	16	16	15	15	16	15	15	15	15	15	Demand is currently in excess of capacity. Commissioners are aware and understand that the service cannot meet the KPIs and performance notices will not apply. The Trust has written to the commissioner to confirm the ongoing pressures and impacts on the service requesting that KPIs are suspended until resolved, which was agreed.
	RED	3	3	2	4	4	5	4	3	5	5	5	5	5	6	1	1	2	2	2	2	2	
	% GREEN	84%	84%	89%	79%	79%	74%	81%	86%	76%	76%	76%	76%	76%	71%	94%	94%	88%	88%	88%	88%	88%	
NHS England (Community Dental Service)	GREEN	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	
	RED	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	% GREEN	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
Luton CCG (Luton CHS)	GREEN	39	45	46	43	38	42	37	38	40	36	36	39	34	35	37	34	33	36	35	34	34	
	RED	6	1	4	5	8	5	6	5	5	5	5	5	7	6	6	6	7	10	6	7	7	
	% GREEN	87%	98%	92%	90%	83%	89%	86%	88%	89%	88%	88%	89%	83%	85%	86%	85%	83%	78%	85%	83%	83%	
Luton CCG (new ambulatory services transferred from EPUT)	GREEN													22	22	22	22	22	22	22	22		
	RED													0	0	0	0	0	0	0	0		0
	% GREEN													100%	100%	100%	100%	100%	100%	100%	100%		100%
Suffolk County Council (iCaSH)	GREEN	4	4	3	4	4	4	4	4	4	4	4	4	4	4	4	4	3	3	3	3	3	
	RED	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	
	% GREEN	100%	100%	75%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	75%	75%	75%	75%	
Norfolk County Council (iCaSH)	GREEN	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	
	RED	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	% GREEN	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
Norfolk County Council (Health Child Programme)	GREEN	23	22	21	19	24	34	29	29	30	31	28	28	22	22	21	21	21	21	21	21	21	
	RED	10	10	10	13	9	3	3	3	2	1	4	4	5	5	6	6	6	6	6	6	6	
	% GREEN	70%	69%	68%	59%	73%	92%	91%	91%	94%	97%	88%	88%	81%	81%	78%	78%	78%	78%	78%	78%	78%	
Bedfordshire LAs (iCaSH)	GREEN	19	19	21	21	21	23	23	24	24	22	23	23	24	25	26	25	28	24	25	26	26	
	RED	7	7	5	5	5	4	4	3	3	5	4	4	5	4	5	6	3	7	6	5	5	
	% GREEN	73%	73%	81%	81%	81%	85%	85%	89%	89%	81%	85%	85%	83%	86%	84%	81%	90%	77%	81%	84%	84%	
Bedfordshire LAs (Healthy Child Programme and oral health promotion)	GREEN																	13	14	14	14		
	RED																	7	6	6	6		
	% GREEN																	65%	70%	70%	70%		
Bedfordshire CCG (ambulatory services)	GREEN																	3	3	4	4		
	RED																	0	0	0	0		
	% GREEN																	100%	100%	100%	100%		
Bedfordshire CCG (children's Services)	GREEN																	13	13	11	13		
	RED																	3	3	3	3		
	% GREEN																	81%	81%	79%	81%		
TRUSTWIDE	GREEN	134	138	148	139	140	152	148	152	153	148	144	147	157	156	159	157	160	187	190	189	164	
	RED	31	27	31	39	32	24	21	17	18	19	23	23	29	30	26	26	23	41	33	33	24	
	% GREEN	81%	84%	83%	78%	81%	86%	88%	90%	89%	89%	86%	86%	84%	84%	86%	86%	87%	82%	85%	85%	87%	