

# THE HILLINGDON HOSPITALS NHS FOUNDATION TRUST UPDATE

<b>Relevant Board Member(s)</b>	Councillor Philip Corthorne
<b>Organisation</b>	London Borough of Hillingdon
<b>Report author</b>	Sarah Tedford and James Ross, THH
<b>Papers with report</b>	None.

## 1. HEADLINE INFORMATION

<b>Summary</b>	To consider the Board's business for the forthcoming cycle of meetings.
<b>Contribution to plans and strategies</b>	The items above relate to the Trust's: <ul style="list-style-type: none"><li>• Recovery and Improvement plans,</li><li>• Quality and Safety strategy</li></ul>
<b>Financial Cost</b>	None
<b>Relevant Policy Overview &amp; Scrutiny Committee</b>	N/A
<b>Ward(s) affected</b>	N/A

## 2. RECOMMENDATION

That the Health and Wellbeing Board notes the up.

## 3. INFORMATION

### Supporting Information

#### CQC Recovery & Hospital Improvement Plan

The Trust has fully reviewed and revised its CQC recovery plan. The immediate plan put in place following the July CQC report tackled the requirement notices, and the must and should do recommendations of the report. However, the Trust recognises that the improvements needed to address the underlying issues leading to the CQC conclusions are more wide ranging than the specific issues identified within the report, and that a more systematic approach is required in order to fully embed changes in practice and culture to ensure that improvements are not only achieved, but are sustained.

To enable this more fundamental change in depth across the organisation, the Trust is creating a comprehensive improvement plan, addressing not only areas of quality and safety, but also performance against constitutional standards (including emergency access, elective access and

cancer care), organisational development and culture, and urgent estates issues. This comprehensive plan is structured to enable the organisation to deliver significant improvement against these key areas in the immediate future, in order to ensure that not only is progress evident by the next CQC visit (expected in the middle of 2019), but that this progress is maintained and built upon further going forwards, in order that the organisation may reasonably expect to achieve a “Good” rating, and then in due time an “Outstanding” rating.

Much of the comprehensive plan is already in place, and further elements are being developed at speed. Once complete, the comprehensive plan will form the blueprint for improvement across the Trust, enabling all staff to engage with the Trust’s direction for improvement and providing a consistent and clear focus for the organisation.

The Trust has sought the support of the CQC, Hillingdon CCG, and Hillingdon Healthwatch, and bimonthly meetings have been convened to enable a shared oversight of progress against the plan. This direct involvement of key external bodies is crucial in ensuring that the organisation is moving in the right direction, and that the improvement is aligned to the whole system strategic path.

The Trust has elicited further direct support from NHS London in the development, formation and achievement of the key milestones within the comprehensive improvement plan. Again, this support will be key to ensuring that the Trust is achieving the required improvement at pace and in a sustainable manner.

The Trust is also working directly with NHS Improvement (NHSI) in regard to the condition of its estate, and is aiming to put forward an immediate remedial plan (as part of the comprehensive plan) in the near future, based on a shared understanding with NHSI of the priorities to be addressed across the two Trust sites.

### **Seven Day Services**

The Trust has undertaken a review of the seven day provision of clinical services. The Trust recognises that the provision of seven day services is a key issue in ensuring that patient pathways work at an optimal level, improving the patient’s experience of healthcare, maximising the opportunity for timely discharge, and consequently the best use of hospital beds. The review focussed on the provision of seven day services in therapies and in pharmacy, and on inpatient care. A further stage of the review will examine the provision of services in radiology, and in outpatients.

The review identified that there is already significant weekend provision within the Trust, but that there is further work to be done to maximise the benefits of the current provision, as well as the opportunity to consider further investment in some areas.

Currently, therapy services were seen to be appropriate in emergency care and assessment areas, including frailty, and AMU. This is also the position in orthopaedics, respiratory and high acuity care including ITU. However, the review concluded that consideration should be given to the services available to the general and rehabilitation areas, including stroke rehab and medicine, surgery and elderly care inpatient wards. Some areas of requirement can be potentially met by reconfiguration of existing services, whilst other areas will require additional investment. Pharmacy services in relation to dispensing and discharge medications were found to be appropriate, whilst the medicines reconciliation service scheduled to begin in March is

seen as good, and will address the current gap in this area.

### **The Hillingdon Improvement Practice (HIP)**

The Trust was successful in 2018 in being accepted as one of seven phase one provider organisations to be part of the NHSI Vital Signs programme. Vital signs is building on the NHS experience of using systems thinking and lean principles to deliver a continuous improvement culture and practice within organisations. This experience includes Trusts and systems such as Western Sussex, The Royal Bolton, and the North East Transformation system, as well as the five Trusts partnered with the Virginia Mason organisation.

The THH implementation of Vital Signs is branded the Hillingdon Improvement Practice (HIP). The use of the word practice is significant – this is designed to be an ongoing process of improvement and to involve all staff, clinical and non-clinical, working in a fully integrated manner with all aspects of clinical practice across the organisation.

The HIP team were appointed in late 2018 and commenced in post at the beginning of this year. The team is supported by consultant input from NHSI and by working in a collaborative manner with the other six vital signs Trusts. The senior leadership of the organisation is also supported in leading the practice by input from experienced Chief Executives who have successfully led similar programmes.

The HIP process is specifically designed to be an in-depth and cultural development across the organisation and is a long-term investment for the organisation. Some benefits are expected in year, and more in 2020, but the greater part of the benefit of the practice is expected in years three to five. However, the overall potential benefits of the programme are evident from the recent CQC evaluation of the Virginia Mason associated Surrey and Sussex Healthcare NHS Trust (SASH). SASH was assessed as Outstanding in January 2019, and its improvement practice, SASH+, was identified by the inspectors and by the organisation's chief executive as a primary reason for the achievement of the rating. It is the ambition of the HIP to achieve a similar level of improvement and systematic development for THH.

### **Tuberculosis (TB) Screening**

Following discussion at the last Health and Wellbeing Board, a question was raised to THH regarding TB vaccination and top up vaccinations. Investigations within the organisation indicate that THH has not been specifically involved in providing vaccinations as part of the catch up in vaccinating babies that had not previously been given the vaccination. The Trust does provide vaccination as part of the screening process for TB contacts, but understands that the wider vaccination programme sits with community services.

## **4. BACKGROUND PAPERS**

NIL.