

REPORT TO: COUNCIL OF GOVERNORS – 8 MAY 2015

SUBJECT: PATIENT & STAFF EXPERIENCE COMMITTEE REPORT

PURPOSE: INFORMATION/DISCUSSION

The CoG P&SE Sub Committee met on 10th. April 2015. At this meeting the annual review of Chair took place and it was proposed and seconded that Eunice Lyons-Backhouse continue in this role for the next twelve months.

We also welcomed Jane Burnett as a new member to the P&SE. Jane was elected as a Public Governor (Ashford) from 1st. March 2015.

The Deputy Divisional Director for Surgical Services attended to give the Committee an update upon the progress of improvements to the Colorectal Pathway. In February 2014 we received a presentation outlining the considerable difficulties being experienced with total achievement of national standards. East Kent has an extremely high rate of referral for endoscopic examination. Presently there is an 85% compliance rate within a Pathway which has a turnaround for endoscopy of ten days; previously this had been 24 days and at one point was 39 days The multidisciplinary team are working toward more effective use of capacity and improvement to patient experience. Triage at first appointment, as well as telephone call assessment to avoid repeat outpatient appointments and completion of CCG GP proformas, whereby flexible sigmoidoscopy may sometimes be deemed appropriate. However, there continues to be a substantial increase in referral rates, necessitating the arrangement of additional outpatient clinics..

The appointment of three new Colorectal Consultants within the Trust is proving beneficial and dialogue between the Trust and CCG's and GP;'s is supportive of the Trust's wish to achieve continuing, permanent improvement to our Colorectal Pathway.

The P&SE Committee will receive a further update in the near future.

The Associate Chief Nurse detailed the Report, following a recent Ward Establishment Review . Recruitment from Overseas has been extremely successful and had provided some relief; continued recruitment from both within the UK and Overseas will be ongoing. Generally the situation regarding Ward establishments is improving with more appropriate levels of establishment and skill mix. There is difficulty in recruitment to Band 6 posts. Expectations relating to this Grade are numerous. The e-Rostering system was improved and operating at a 74% effectiveness rate. Patient/nurse ratios were discussed . Evidence suggests that an excess of eight patients per nurse, increases mortality rates. However, night duty does generally require fewer nurses to be on duty. The Associate Chief Nurse will report back to the Committee upon patient/nurse ratios, in relation to mortality rates.

We are commencing our Patient Experience Project in the Outpatient Department at the William Harvey Hospital on Tuesday 19th. May 2015. We will be using the Emotional Touchpoints System and the Deputy Chief Nurse/Deputy Director of Quality will be ensuring that the two member of P&SE Committee involved are comfortable with the system. Following, review of this first Patient Experience visit, arrangements will be put in hand to continue with the Project.

The Deputy Chief Nurse/Deputy Director of Quality reviewed with us the Clinical Quality and Patient Safety Report. Harm free care was higher for the month of February at 95%

(January 90.1%) The percentage of patients receiving harm free care, which we are able to influence, was 98.7%.

There was an increase in the number of complaints received during February. One formal complaint for every 1099 recorded spells of care, in comparison with one formal complaint for every 1371 recorded spells of care for January. The ratio of compliments to formal complaints was 36.1. The PET Team, although fully staffed, are presently experiencing problems due to long term sick leave.

Our HR Committee member was unable to attend this meeting, when he was to discuss the recent Staff Survey results, particularly bullying and harassment scores and the application of the Trust's Whistle Blowing policy. He has agreed to attend our next meeting in early May.

The Patient & Staff Experience Committee seeks full CoG approval for its Terms of Reference for the forthcoming year.