

Post Scrutiny - Executive Response

In Respect of: Scrutiny Review of Tameside Hospital

Date: 4th July 2012

Cabinet Deputy: Councillor Lynn Travis (Adult Services)
Partnership: Health and Well-Being Board

Recommendations	Accepted/ Rejected	Executive Response	Officer Responsible	Action By (Date)
1. The Tameside Foundation Trust must put in to place measures to ensure correct annotation of notes and must ensure risks are recorded and escalated appropriately.	Accepted	Tameside Hospital Foundation Trust (FT) recognises the importance of this recommendation and continues to be vigilant in respect of this area. Regular reviews take place to ensure that patient assessment is documented correctly and appropriately and any patient risks identified and followed through properly.	Director of Nursing , Medical Director	Ongoing

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2. That the Hospital should look at the CQC concerns around staffing levels within the Hospital and address these concerns accordingly.	Not applicable	The Trust has a programme of improvement plans in place. Since the Scrutiny review was produced, the CQC have completed a follow up visit to Tameside Hospital FT on April 20 th . The CQC judged that the Trust was compliant with outcome 13, which relates to staffing, and found that there were enough qualified, skilled and experienced staff to meet people's needs	Director of Nursing	April 2012 and Ongoing
3. The Hospital must ensure medical records and documentation is secured appropriately and in line with data protection legislation.	Accepted	<p>The Trust recognises the importance of security of medical records and has strengthened its arrangements for their safekeeping. Following its most recent assessment of the Trust (20 April,2012) the CQC stated that "We found that medical records were stored securely in all of the areas we visited.</p> <p>The CQC identified a minor impact on outcome 21, which relates to records, on their visit of 20 April. However this related to the completeness of records, not their secure storage..</p>	Director of Nursing	April 2012 and Ongoing

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4. The Hospital reviews the areas of concern raised by LINK and through working in conjunction with LINK is able to improve the areas of concern identified within their report.	Accepted	<p>The Trust remains to working collaboratively with LINK, including committing to responding to LINK findings as a priority in their 2012/13 Quality Account. The Trust welcomes the opportunity to work more closely with LINK to agree appropriate assessment methods and the development of these where there has previously been some debate.</p> <p>Since the Scrutiny Review LINK have returned to the Hospital and positive progress has been made, with the 10 green ratings made following the winter 2010/11 visits increasing to 21, following the winter 2011/12 vists. from a possible 31.</p>	Director of Nursing	Ongoing
5. Increased accountability is necessary at the Hospital amongst staff and a change in culture is required.	Accepted	The Trust recognises and acknowledges the importance of this recommendation. Any action plan developed will ensure that accountability and responsibility are located at an appropriate level within the organisation.	, Director of Nursing	Ongoing
6. That money provided to the Hospital is delivered on a consistent basis to ensure the Hospital can strategically plan for longevity.	Accepted	The Trust is committed to proactive planning working closely with its strategic partners.	Director of Finance , Chief Executive	Ongoing

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7. Hospital staff who are not conforming to the required procedures are monitored and dealt with appropriately.	Accepted	The Trust will ensure that any staff who are not conforming to the required procedures are monitored and dealt with appropriately. Staff must conform to all relevant policies and guidelines.	Director of Human Resources	Ongoing
8. The Hospital continues to work in partnership with other Hospitals and colleague organisations to share best practice, peer discussions and knowledge sharing.	Accepted	<p>The Trust recognises the importance of peer support and shared learning. The Trust will maintain appropriate levels of networking.</p> <p>The PCT also facilitate monthly joint Quality and Performance meetings with commissioners, and the Trust meets with members of the CCG via the Clinical Congress.</p>	Chief Executive	Ongoing
9. That public authorities work together to find a solution for the appropriate discharge of medically fit patients.	Accepted	This is recognised by all partners as a whole health economy issue and the Trust is working collaboratively with key partners.	Director of Clinical Services	Ongoing

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10. Following the NHS reforms, that the Hospital, PCT, CCG and LA review how the money provided to the Tameside Health Economy is used and allocated.	Accepted	<p>All key partners across the Health Economy are working collaboratively on this issue, holding a recent 'Health Summit' to look at promotion of integrated commissioning and delivery models.</p> <p>A review is underway commissioned and led by the Chief Executives of the three partner organisations.</p> <p>The Tameside Health and Wellbeing Board will drive this agenda through the JSNA and Joint Health and Wellbeing Strategy.</p>	<p>All key organisations</p> <p>Tameside HWBB</p>	Ongoing
11. The Hospital review the previous recommendations made by this panel in February 2011 to ensure long term adherence and improvements in standards of care.	Accepted	The Trust is committed to reviewing all previous recommendations to ensure these have been action planned appropriately and monitored.	Director of Nursing	Ongoing

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<p>12. The Hospital continues to work to address the recommendations and issues raised by LINK, the CQC and the Personal and Health Services Scrutiny Panel of Tameside MBC.</p>	<p>Accepted</p>	<p>The Trust will continue to work to address these issues and has made progress following the most recent visits by CQC and LINK. The CQC no longer have any concerns regarding:</p> <ul style="list-style-type: none"> • Outcome 4, people getting safe and appropriate care that meets their needs and rights, • Outcome 5, food and drink should meet people's individual dietary needs • Outcome 13, enough members of staff to keep people safe and meet their health and welfare needs. <p>The Trust continues to work to address the three minor impacts the CQC identified regarding medicines management, quality checking systems and records.</p> <p>The CQC judge that minor impacts are not significant and could be resolved quickly.</p> <p>A recent unannounced visit by Commissioners including the Chair of the CCG concluded 'no negative findings' as an outcome of the visit and specifically that they did not find the issues identified by the CQC or LINK Findings feed into the PCT/sCCGs Quality Committee</p>	<p>Director of Nursing</p>	<p>Ongoing</p>

