

Commentary on Kingston Hospital NHS Foundation Trust Quality Accounts 2015-2016

Healthwatch Richmond considers the Trust's Quality Account (QA) for 2015/16 to be an accurate reflection of Kingston Hospital's achievements. Although the report is lengthy, it covers a good range of topics, all interesting and relevant. The QA is well laid out and easy to read, and the definitions of the unavoidable technical or medical terms are helpful. The use of tables with clear explanations is accommodating to the reader. The QA gives an encouraging picture of ongoing improvements and clearly details the areas where there is continued room for improvement. As a consequence, an encouraging picture of the hospital's excellent work emerges.

Considerable effort appears to have gone into nurse recruitment and commensurate reduction in the use of agency nurses. This is a priority the Trust has pledged to continue, in order to further improve services and achieve the London Quality Standards, including the delivery of 7-day services. We particularly welcome the on-going commitment by the Trust to ensure a consultant is available for ward reviews 7 days a week, and increase the numbers of pharmacists and therapists working at the weekends.

This action will allow a 7 day a week multi disciplinary review of patients. The local population will be reassured to learn of the recruitment drive and enhanced consultant cover, which will permit 24/7 access to a consultant in specialities such as paediatrics, obstetrics and emergency surgery. The Trust indicates that the full effect of these changes will be realised in 2016/17. We look forward to seeing evidence of improvements in patient service.

Healthwatch Richmond is impressed with the Trust's approach and the progress in increasing patient involvement, engaging volunteers and the wider stakeholder community, including Healthwatch. The Trust recognises the valuable role volunteers can play, and demonstrates this with initiatives such as *Dining Champions* and *Dementia Volunteers*. It is encouraging to read that volunteers have improved the mood and wellbeing of patients with dementia by 42%. With a high proportion of Kingston residents over the age of 65 years, this will provide reassurance. ^[1]_[SEP]

The Trust has been candid in admitting failures to meet some targets and has provided clear reasons why this occurred and what action is being taken to continue improvement. Some of the CQUIN scores were well below 100%; this could have been explained in more depth.

The inclusion of statements of assurance about audits, information management and data quality is helpful. In each priority area, there is evidence of clear internal arrangements for managing and delivering the planned improvements with identified lead roles. The addition of information on how and why priorities were chosen is useful and further demonstrates the Trust's commitment to inclusion.

There appears to be some way to go in achieving the targets for prevention of sepsis over a 3-year period. This is concerning, given that this is a treatable condition if recognised promptly. We welcome the inclusion of this as a priority for 2016/17 and note the range of improvement measures being put in place by the Trust.

Similarly, the Trust has been open about partly achieving the target to identify and monitor harm to patients with dementia, as the monitoring systems were not put in place until August. Nevertheless there appears to be a system for recording incidents to identify dementia and track specific harms.



Monitoring of data shows that patient falls is a significant issue. We welcome the inclusion of reducing patient falls as a priority for 2016/17.

The Trust has achieved three targets in relation to the working conditions for staff. Significant for patients is the use of electronic recording of vital signs, freeing staff to spend more time with patients. This will also be a priority for 2016/17, as systems are rolled-out to A and E and other areas, subject to funding.

The Trust has performed better than planned in the area of staff appraisal and mandatory training. This is to be welcomed, given the implications for improved care. It is perhaps disappointing that this is not a priority next year, but the Trust has a corporate objective to improve staff experience during 2016/17.

It is concerning that the Trust has only partly achieved targets around improving patient experience. However, the new telephone system has helped improve the response to calls and this is welcome.

There seem to be no hard data about complaints, but the Trust says there is a trend to reduction over the year. We are pleased this is a priority for 2016/17.

There is evidence of achieving the target relating to improving end of life care for patients and their relatives, using an external survey technique. In some cases (care from doctors and nurses), the Trust has performed better than national averages. It is reassuring that this area remains a priority for next year and that the Trust has an action plan in place.

We are pleased the Trust has achieved the target for improving discharge planning and processes. Some more detailed figures would be welcome, but the tracking and reporting systems now in place should facilitate close management. It is pleasing that this is again a priority for next year.

Healthwatch Richmond welcomes the Trust's pledge in its Patient Public Involvement Strategy to reach marginalised and hard to reach groups, in order to improve outcomes for the public.

Overall we think the Trust has achieved much over the past year, with a number of key areas being taken forward for further action, accompanied by a commitment to improving quality and patient outcomes in 2016/17.

