

**Commentary on Hounslow and Richmond Community Healthcare NHS Trust's Draft Quality
Accounts 2016-2017**

The Quality Account for Hounslow and Richmond Community Healthcare NHS Trust (HRCH) clearly and candidly presents performance and priorities within the limitations of the mandated structure for Quality Accounts.

A key detail within the report that readers should be aware of is that during the year the Trust received CQC inspections resulting in a rating of “requires improvement”. The Trust have since made significant improvements, and continue to do so with some services now rated as “Good”, but remain rated at this level.

The CQC criticised the model of inpatient care at Teddington Memorial Hospital as leading to patients not always having the care that they needed. Further details of why this rating was given would be welcomed in the report. The Trust has taken significant and positive steps detailed in the Account to improve the care on its ward and have since received a rating of “Good” from the CQC as a result.

The CQC report also referenced high staff vacancy rates which have been an issue for the Trust for some time. The Account details some improvements in reducing vacancy rates which is positive and explains some of the steps taken to achieve these. Staffing appears to be a contributing factor in reported performance over the period. Referencing the impact of staffing overtly within the report in terms of impact on performance would therefore be welcomed. It is also unclear why staffing priorities are not set for the coming year in terms of recruitment, retention and overall vacancies.

We welcomed the Trust's commitment to decreasing avoidable harm in the previous year's Quality Account. The targets for the year were ambitious and their successful achievement is a testament to the work of the trust in these areas.

Decreasing the number of avoidable falls by 50% in inpatient settings is an excellent improvement and we hope that recent improvements at the Trust see further reductions. Similarly ensuring that no medication incidents resulted in harm is an excellent performance as is the reduction of grade 3 pressure ulcers by 84%. The zero tolerance nature of the target for grade 4 pressure made achievement very challenging and whilst it is of course disappointing that this was not met, the Trust's actions to learn from these are welcomed. It is worth noting that the Trust has demonstrated continued improvements in these areas over several years.

Unfortunately the Trust's performance in relation to its targets for End of Life Care do not demonstrate positive progress. Staff training levels are significantly below target and whilst recording of patient's choices in relation to their deaths has improved, substantially in some areas, there is still much for the Trust to do. We anticipate that staffing problems may have impacted on performance in these areas and would encourage the Trust to discuss the impact of staffing in the Quality Account. The inclusion of End of Life Care as an area in which “Always Events” will be implemented is welcomed. We would encourage the Trust to consider its performance in relation to understanding people's preferences in relation to end of life within this priority.

We note improvements in the numbers of people engaged by the Trust and have received an increase in the number of requests from the Trust for our involvement. The Trust is to be commended on this and our experience of the trust is of one that values patient experience as a positive part of its learning and quality assurance. This is evidenced through selection of priorities

as well as through improvements made over the past year such as including patients sharing their experiences directly with the Trust during Board meetings.

The Trust has missed its target in relation to patient's reporting that they have a care plan. HRCH suggest that some patients may not understand the term "care plan" and our work in this area would support this, however it is also an issue picked up by the CQC during their inspection: *"...we did not see any evidence of patients or their relatives' involvement in planning their care. There was little information available to support patients and their carers in understanding their care and treatment during their stay in hospital"*. We hope that improvements in this area are being made and have asked for further details of these to be presented in the Account.

We welcome the Trust's priority to improve referrals management as it reflects a general trend that we see in patient experience. The targets here seem to reflect problems with the quality of referrals received by HRCH and this reflects issues that have been conveyed to us by staff. Whilst these may be major issues that the Trust faces, the extent to which the Trust can control the referrals it receives is unclear.

The priorities for implementing early warning systems for deteriorating patients seem reasonable based on its success in inpatient settings. It is not clear to the reader however which services this will be extended to and it is difficult to anticipate how meaningfully the proposed measurements will be.

The inclusion of priorities for implementing Always Events is a positive and flexible inclusion. It is entirely right that patients should be involved in the design of these and we encourage this. However consideration should be given to extending the programme to include areas where performance in previous years has not met targets. This may make a positive contribution to continuing improvement in these areas.

