



Public Document Pack
**Health in Dacorum
Agenda**

Wednesday 7 March 2018 at 7.30 pm

Conference 2, The Forum

Scrutiny making a positive difference: Member led and independent, Overview & Scrutiny Committee promote service improvements, influence policy development & hold Executive to account for the benefit of the Community of Dacorum.

The Councillors listed below are requested to attend the above meeting, on the day and at the time and place stated, to consider the business set out in this agenda.

Membership

Councillor Birnie
Councillor Brown
Councillor England
Councillor Guest (Chairman)
Councillor Hicks

Councillor Maddern
Councillor Taylor (Vice-Chairman)
Councillor Timmis
Councillor W Wyatt-Lowe

For further information, please contact Rebecca.twidle@dacorum.gov.uk

AGENDA

1. APOLOGIES FOR ABSENCE

To receive any apologies for absence

2. MINUTES

To confirm the minutes from the previous meeting

3. DECLARATIONS OF INTEREST

To receive any declarations of interest

A member with a disclosable pecuniary interest or a personal interest in a matter who attends a meeting of the authority at which the matter is considered -

- (i) must disclose the interest at the start of the meeting or when the interest becomes apparent

and, if the interest is a disclosable pecuniary interest, or a personal interest which is also prejudicial

- (ii) may not participate in any discussion or vote on the matter (and must withdraw to the public seating area) unless they have been granted a dispensation.

A member who discloses at a meeting a disclosable pecuniary interest which is not registered in the Members' Register of Interests, or is not the subject of a pending notification, must notify the Monitoring Officer of the interest within 28 days of the disclosure.

Disclosable pecuniary interests, personal and prejudicial interests are defined in Part 2 of the Code of Conduct For Members

[If a member is in any doubt as to whether they have an interest which should be declared they should seek the advice of the Monitoring Officer before the start of the meeting]

4. PUBLIC PARTICIPATION

An opportunity for members of the public to make statements or ask questions in accordance with the rules as to public participation

5. ACTION POINTS (Pages 4 - 5)

6. WARD ISSUES FROM OTHER COUNCILLORS

7. CQC INSPECTION REPORT (Pages 6 - 39)

An opportunity for Councillors to ask Helen Brown and Esther Moors (WHHT) questions about the presentation delivered to the Membership on 25 January 2018. (presentation slides are included in pack for reference)

8. DELAYED TRANSFERS (Pages 40 - 41)

Collaborative presentation between WHHT, HVCCG and HCC

9. HVCCG UPDATE

10. PUBLIC HEALTH & PREVENTION

11. HCC HEALTH SCRUTINY UPDATE

12. HCC'S ADULT CARE SERVICES

13. WORK PROGRAMME (Pages 42 - 46)

Health Scrutiny in Dacorum Action Point List 2017/2018

13/09/2017 & 13/12/2017	I MacBeath to send R Twidle a copy of the report outlining DToC due to social care and the patient's home area.	I MacBeath	Received 18.12.17 – included within March agenda	OSC/037/17 - Pg 8
13/09/17	K Magson to provide Committee with an update on Let's Talk Two within 'HVCCG' item of March 2018	HVCCG	Request sent to D Evans for update on March 2018 - D Evans confirmed on 15.02.2018 that HVCCG "had not developed a 'Let's Talk ' yet so there will no update to provide the committee however we will as soon as it has been planned".	OSC/038/17 - Pg 10
13/12/17	R Twidle to advise M Graver that, instead of a pre -opening tour in March 2018, the Committee would like to visit The Marlowes Health & Well Being Centre once it has opened for a period of time.	R Twidle	Completed - M Graver has asked the Committee to confirm when they would like to visit The Marlowes Health & Well Being Centre	OSC/059/17 pg 2
13/12/17	H Brown to provide a presentation on flexi care/wrap around housing at a future Committee meeting.	H Brown	Added to work plan - proposed date of Sept 2018	OSC/062/17 pg 5

Action Point: I MacBeath to send R Twidle a copy of the report outlining DToC due to social care and the patient's home area.

The table below shows the number of people who are waiting for homecare packages by area. Some areas appear to have two rows because we have a 'rural' as well as an 'urban' contract for homecare providers. The 'East' and 'West' rows at the bottom of the table total the east and west providers from above. There are three columns showing the last twelve months. In June, the numbers of people waiting were reducing.

In November and December, three homecare agencies centred around Hemel Hempstead have failed (two for financial reasons and one for managerial reasons) and the council is now looking to secure new providers for those people, which inflates the numbers temporarily. Please do assure members that those people continue to receive homecare from the old provider, supported by the County Council, until a new one can be found. I think this draws out my point at the last group that this care market is very fragile, is subject to labour market flows and we continue to step in minimise delays for people leaving hospital.

Kind regards

Iain

Unmet Need

UNCOVERED SERVICE REQUESTS (TOTAL VOLUME)	Dec 2016 Total	June 2017 Total	Dec 2017 Total
North Herts Area 1	9	10	6
East Herts Area 1	10	10	20
East and North Herts Area 2	5	3	7
Stevenage	4	1	6
Broxbourne	3	1	4
WelHat	16	9	15
Dacorum Area 1	13	11	48
Dacorum Area 2	9	7	13
Hertsmere	31	37	28
St Albans	29	15	43
Three Rivers	12	7	22
Watford	17	17	10
East	47	34	58
West	111	103	164
TOTAL	158	137	222



NEWS RELEASE

10 January 2018

Embargoed until 00:01hrs: Wednesday, 10 January 2018

Sustained improvements mean hospital trust has moved out of special measures

Inspiring leadership, sustained improvements and the hard work of dedicated staff has resulted in West Hertfordshire Hospitals NHS Trust moving out of special measures.

Inspectors from the Care Quality Commission (CQC) made this recommendation following a full inspection of the trust's three hospitals this summer.

The decision to take the trust out of special measures was made by NHS Improvement, the regulator of hospital trusts.

CQC inspectors also commented on the "strong, supportive and visible" leadership and noted "a positive culture" where staff are "proud to work at the trust".

The CQC assesses five aspects of a site or service – safe, caring, responsive, effective and well-led – and awards them ratings: inadequate, requires improvement, good or outstanding. The full ratings can be found in the summary below.

As well as leaving the status of special measures behind, the trust – which manages Watford General Hospital, Hemel Hempstead Hospital and St Albans City Hospital – has seen a positive and dramatic change in the ratings for its sites and services, despite the overall rating remaining 'requires improvement'.

Trust chair Professor Steve Barnett said: "These results tell a story of commitment, care and high quality services. Even the quickest glance makes it clear that we have come a long, long way since being placed in special measures in 2015.

"Events in recent weeks only emphasise the kind of workforce we're so lucky to have; we won a national award from the Health Service Journal; our medical director was invited to present nationally about our low mortality rates; and staff struggled through snow and ice to keep our services going and our patients safe.

"I am immensely proud of our staff. They never stop wanting to improve, to learn and to deliver the very best care for every patient, every day. Our leadership teams, from the Board to the wards, have been growing in strength over the last few years and this has played a big part in our move out of special measures.

"I would also like to pay tribute to our wonderful volunteers. I was thrilled to see that the volunteer-run Carer Support Team was praised by the CCQ for the support they give to the parents and friends of unwell babies and children."

He added: "It's great news that the overall rating for Hemel Hempstead Hospital has moved from 'inadequate' to 'requires improvement'. In fact, there is not a single aspect of any service at Hemel Hempstead that has an inadequate rating – a massive change from nine red ratings last year to none this year. We will continue to build on this improvement as we consider the range of services to be provided in Hemel Hempstead."

"St Albans City Hospital also now has no inadequate ratings. Multi-site trusts are often criticised for focusing on their main campus to the detriment of smaller sites but today's results show that our team ethos is shared by all. The inspectors noted the changes we have made to some key leadership posts and that we are working more closely across our three hospitals."

Chief executive Katie Fisher said: "The improvement is across the board, with three services now being rated as good against all five aspects – safe, effective, responsive, caring and well-led. Achieving this level of consistency has not been easy but it has been done with pride. I congratulate staff in maternity services and in children and young people's services at Watford, and the surgery team at St Albans for their sea of green!

"This is the second year running where the overwhelming trend is an increasing number of 'good' ratings. This reflects our commitment to quality and the fact that we are becoming a more clinically-led organisation, something that is easy to say but far harder to achieve. Having senior clinical staff around the table when key decisions are being made is good news for our ratings and even better news for our patients."

She added: "It has been a great achievement to reduce the number of services with an overall rating of inadequate to just one – urgent and emergency care at Watford General. However, we have recently recruited additional consultants and made a small increase to capacity to alleviate pressure in this busy service. Looking further ahead, we will need a new or substantially enlarged emergency department big enough to manage the number of patients who come through its doors."

"Nationally, 55% of hospitals' core services are rated good so our 61.5% of core services rated 'good' puts us comfortably above the national average. But it's not just the numbers and ratings that I want to shout about – our local communities should be reassured to know that staff at their local hospitals are driven by wanting to work well in their teams, to learn and improve and most of all, to give great care."

"Finally, I must say that it's great to shake off the special measures tag for our services. My view, since joining the trust in 2016, is that the only thing that deserves to be called special is our wonderful staff."

Ends

1. The CQC inspection report is available here: www.cqc.org.uk
2. For highlights of the report, including ratings tables, see below.

3. For more information, please contact:
 - West Hertfordshire Hospitals NHS Trust communications team on: 01923 436280 or email: communications@whht.nhs.uk. Out of hours: 07900 228031.
 - CQC press office: Helen Gildersleeve on 0191 233 3379 or 07825 939328 or email: helen.gildersleeve@cqc.org.uk. Out of hours: 07789 876 508.
 - NHS Improvement press office: Michelle Smith, 020 3747 0988 or 07769 314870 or email: michelle.smith80@nhs.net. Out of hours: 07795 962 933.
4. West Hertfordshire Hospitals NHS Trust serves people from across Hertfordshire, north London and further afield. It operates from three hospitals; Watford General, St Albans City and Hemel Hempstead. The trust sees around 600,000 patients a year and is one of the largest employers locally, with around 5,000 staff and volunteers.
5. For more information about our hospitals, visit www.westhertshospitals.nhs.uk. You can also join our followers on Twitter (twitter.com/westhertsNHS) and find us on Facebook (facebook.com/westhertsNHS).

Highlights of the Care Quality Commission report on West Hertfordshire Hospitals NHS Trust published 10 January 2018

Background

This was the third comprehensive inspection of the trust; the first took place in April and May 2015. It was rated 'inadequate' overall and went into special measures.

The trust was inspected again in September 2016 and was rated 'requires improvement' overall. It remained in special measures.

The latest inspection took place between 30 August and 1 September 2017 when Watford Hospital, St Albans Hospital and Hemel Hempstead Hospital were all inspected. Unannounced inspections of all three hospitals took place on 12 September 2017.

Results

Overall, the trust was rated as 'requires improvement' for safe, effective, responsive and well led and 'good' for caring.

Four services were rated as requiring improvement overall and eight rated as good. One was rated inadequate.

This was an improvement on the inspection carried out in September 2016, where five services were rated as requiring improvement, five rated as good and two were rated inadequate, although one of these services is no longer run by the trust.

Comparison of the proportion of 'inadequate' and 'good' ratings showing the progression over the three inspections:

	Inadequate	Good
2015	15	20
2016	8	32
2017	3	45

Overview of ratings

	Safe	Effective	Caring	Responsive	Well-led	Overall
Trust Overall	Requires improvement	Requires improvement	Good	Requires improvement	Requires improvement	Requires improvement

Watford General Hospital

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent & emergency	Inadequate	Good	Good	Inadequate	Inadequate	Inadequate
Medical care	Requires improvement	Good	Good	Requires improvement	Good	Requires improvement
Surgery	Requires improvement	Good	Good	Requires improvement	Good	Requires improvement
Critical care	Good	Good	Good	Requires improvement	Good	Good
Maternity & family planning	Good	Good	Good	Good	Good	Good
Children & young people	Good	Good	Good	Good	Good	Good
End of life care	Good	Requires improvement	Good	Good	Good	Good
Outpatients & diagnostic imaging	Requires improvement	Inspected but not rated ¹	Good	Good	Good	Good
Overall	Requires improvement	Good	Good	Requires improvement	Requires improvement	Requires improvement

St Albans City Hospital

	Safe	Effective	Caring	Responsive	Well-led	Overall
Minor injuries Unit	Requires improvement	Requires improvement	Good	Good	Requires improvement	Requires improvement
Surgery	Good	Good	Good	Good	Good	Good
Outpatients & diagnostic imaging	Requires improvement	Inspected but not rated ¹	Good	Good	Good	Good
Overall	Requires improvement	Requires improvement	Good	Good	Requires improvement	Requires improvement

Hemel Hempstead Hospital

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent Care centre	Good	Requires improvement	Good	Good	Requires improvement	Requires improvement
Outpatients & diagnostic imaging	Requires improvement	Inspected but not rated ¹	Good	Good	Good	Good
Overall	Requires improvement	Requires improvement	Good	Good	Requires improvement	Requires improvement

CQC notes:

1. We are currently not confident that we are collecting sufficient evidence to rate effectiveness for Outpatients & Diagnostic Imaging.

**Results of our
Care Quality
Commission
inspection**

Published January 2018





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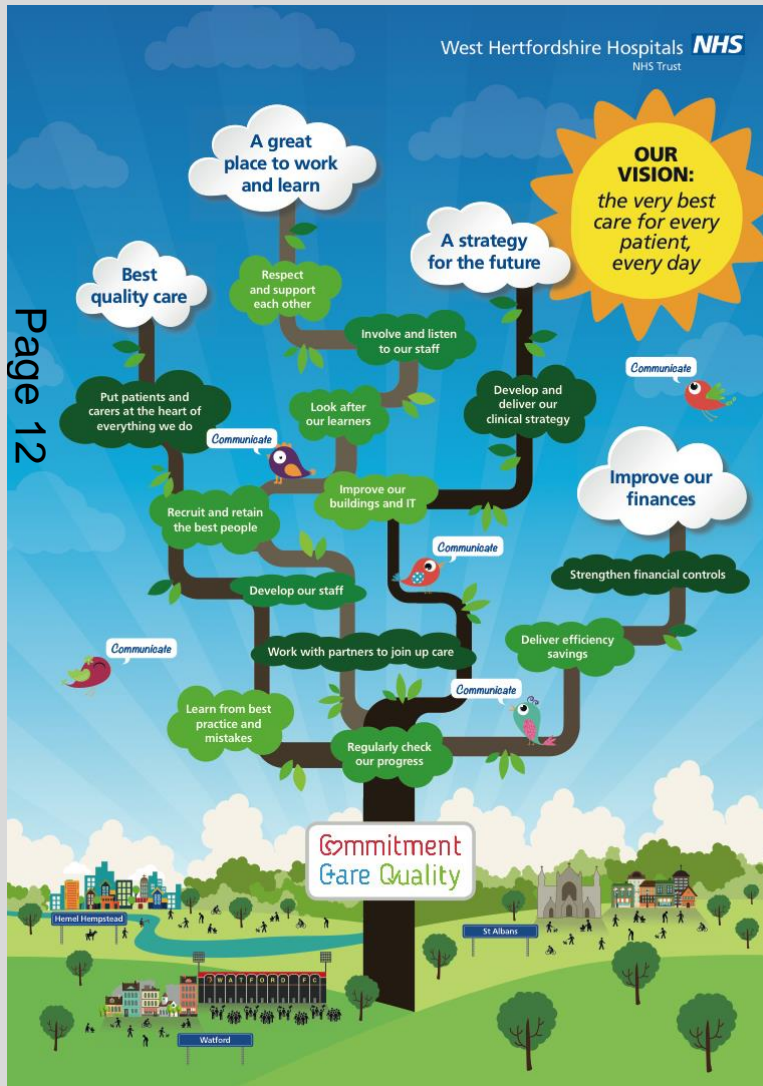
Our vision

Our aims are:

- To deliver the best quality care for our patients
- To be a great place to work and learn
- To improve our financial sustainability
- To develop a strategy for the future

Our values:

- Commitment, Care, Quality



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Watford General Hospital

- Inpatient emergency and intensive care
- Elective care for higher risk patients
- Outpatient and diagnostic services
- 600 beds and 9 theatres
- Women's and children's services

Hemel Hempstead Hospital

- UTC open seven days a week, 8am-10pm
- Diagnostic services, incl. MRI and pathology
- Outpatient services
- Endoscopy and bowel cancer screening services
- Herts Community Trust operates intermediate care beds on site

St Albans City Hospital

- Elective care (inpatient low risk and day case)
- Outpatient and diagnostic services
- 40 beds and 6 theatres
- Minor Injuries Unit open 7 days a week, 9am-8pm,





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About us...



Our local hospitals at Watford, Hemel Hempstead and St Albans cover a catchment area of

over **500,000** people

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140,000 emergency patients treated

460,000 outpatient attendances

47,000 planned operations



5,000
babies
delivered



with **4,800**
staff and **340**
volunteers



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The inspection

- The Care Quality Commission (CQC) assesses five aspects of a site or service – safe, caring, responsive, effective and well led – and awards them ratings: inadequate, requires improvement, good or outstanding

Page 15. Each hospital is given an overall rating and the trust is given an overall rating

- In 2015 we were rated ‘inadequate’ overall and went into special measures
- In 2016 we were rated ‘requires improvement’ overall and remained in special measures.
- Our latest inspection took place 31 August to 1 September 2017. The CQC inspectors visited all three West Herts hospitals and also made unannounced visits to all three sites on 12 September
- They interviewed frontline staff and the leadership team, spoke to patients and relatives and took soundings from key stakeholders. They reviewed nearly 1,000 documents: policies, data and additional information in relation to specific questions



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The headlines

West Hertfordshire Hospitals NHS Trust is out of special measures!

- We have demonstrated sustained improvements across the board
- We were rated as 'requires improvement' for safe, effective, responsive and well led and we were rated 'good' for caring
- Our overall rating remains 'requires improvement' but we have achieved a significant increase in the number of services rated as 'good'
- Eight services were rated 'good' (compared to five in 2016)
- Four services were rated as 'requires improvement' (five in 2016); one was rated as 'inadequate' (two in 2016, although one is no longer run by us)
- 45 individual quality ratings of 'good' compared to 32 in 2015
- Only three individual ratings of 'inadequate' compared to eight in 2016



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What the inspectors observed

- All staff treat patients in a respectful and considerate manner
- A positive culture, focused on improving patient outcomes and experience
- Patients and relatives are included decisions about their treatment and care making about treatment and care
- Staff are proud to work at the trust
- Leadership is strong, supportive and visible
- Women are positive about the care they receive on maternity and gynaecology wards. One woman and her partner said their experience had “amazing, really impressed”
- Parents and children said the service was “wonderful”. Staff treat children with kindness, dignity and respect and always go the extra mile
- Family members are happy with the end of life care their relatives receive



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Where did we do well?

- Three services achieved 'GOOD' across ALL FIVE ELEMENTS: maternity; children and young people; surgery at St Albans
- Outpatients and diagnostic imaging at Watford significantly improved their ratings
- Hemel Hempstead Hospital overall has moved from 'inadequate' to 'requires improvement'. There is a NOT A SINGLE ASPECT of any service at Hemel Hempstead that has an inadequate rating – a massive change from nine red ratings last year to none this year
- St Albans City Hospital also now has NO inadequate ratings
- Nationally, 55% of hospitals' core services are rated 'good' – we achieved 61.5% so we are ABOVE THE NATIONAL AVERAGE



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Good practice – many examples

- Staff knowledge of the duty of candour (openness and transparency) is evident
- The emergency department has significantly improved the management and treatment of sepsis
- Staff understand their responsibilities to raise concerns, record and report safety incidents and near misses
- Staff are confident about reporting safeguarding concerns to protect adults and children from harm, abuse and neglect



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Good practice – many examples

- There is shared learning from complaints through ward meetings, teaching sessions, huddles and newsletters

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Significant progress with governance – a new committee structure enables the board to operate strategically

- Equality and diversity is promoted within the trust
- The trust board and executive team are focused on patient safety and quality of care



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Outstanding practice – many examples

- Innovations in the children’s emergency department to tackle mental health and suicide awareness. The design and space of this department enables quick interventions and is unique for a district general hospital

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- The “iSeeU” initiative enabling women to use face-time technology to see their baby receiving care and treatment on the neonatal care unit
- Focused recruitment and career development programme for band 5 nurses
- At Hemel Hempstead and St Albans, the phlebotomy service engages with people in vulnerable circumstances, for example home visiting



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Outstanding practice – many examples

- At Hemel Hempstead staff take photos of X-rays, dressings etc to help people with cognitive impairment understand their treatment

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At St Albans the enhanced recovery care pathways are effective in helping patients recover more quickly after surgery

- The diagnostic imaging service audited best practice – staff embraced the importance of changing practice, especially in difficult casualty situations
- Electronic referrals for infants with prolonged neonatal jaundice resulting in quicker referrals and results



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Areas for improvement

- Urgent and emergency services – rated ‘good’ for effective and caring but ‘inadequate’ overall:
 - We have restructured and strengthened clinical leadership in our emergency department, and opened a new, expanded clinical decision making unit
 - We will improve reporting of incidents, identification of risk and management of risk registers to provide assurance that the service always runs safely and effectively
- Learning from incidents – strengthen how we share learning across the trust
- Mental capacity – where a patient lacks capacity to make an informed decision or give consent, make a formal decision-specific mental capacity assessment
- Minor Injuries Unit at St Albans – ensure there are effective triage and streaming systems
- Quality – our new Quality Commitment describes how the organisation can make it easier for our staff to deliver great service and care, and support collaboration between departments so they can work and learn from one another



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Our strengths

- Mortality rates consistently lower (better) than expected for over two years
- Stroke service consistently achieving the highest rating AA star
- Performance on cancer waiting times remains strong
- A new MRI/CT scanner means we now offer both modalities of cardiac imaging – one of very few district general hospitals to do so
- Referral to treatment times have improved since the last inspection and are similar to the England average
- Staff engagement is good – we scored highly in the 2016 annual staff survey



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Our ratings

- Ratings for each site – Watford General Hospital, Hemel Hempstead Hospital, St Albans City Hospital

Page 25 Ratings for the trust overall

- Comparison of ratings in 2015, 2016, 2017



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Watford General Hospital

Our 2015 overall rating was 'inadequate'

	Safe	Effective	Caring	Responsive	Well-led	Overall	Key
Overall	Red	Yellow	Yellow	Yellow	Yellow	Red	Inadequate
Urgent and emergency services	Red	Red	Green	Red	Yellow	Red	Inadequate
Medical care	Red	Yellow	Green	Yellow	Red	Red	Requires improvement
Surgery	Yellow	Green	Green	Yellow	Yellow	Yellow	Good
Critical care	Red	Green	Green	Yellow	Red	Red	Outstanding
Maternity and gynaecology	Red	Yellow	Yellow	Yellow	Red	Red	Not rated
Services for children and young people	Green	Green	Blue	Green	Green	Green	Not rated
End of life care	Yellow	Yellow	Green	Yellow	Yellow	Yellow	Not rated
Outpatients and diagnostic imaging	Red	Grey	Yellow	Yellow	Red	Red	Not rated

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Watford General Hospital

Our **2016** overall rating was 'requires improvement'

Overall						Requires improvement	
	Safe	Effective	Caring	Responsive	Well-led	Overall	Key
Urgent and emergency services							Inadequate
Medical care							Requires improvement
Surgery							Good
Critical care							Outstanding
Maternity and family planning							Not rated
Services for children and young people							Not rated
End of life care							Not rated
Outpatients and diagnostic imaging							Not rated

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Watford General Hospital

Our **2017** overall rating is 'requires improvement'

Overall							
	Safe	Effective	Caring	Responsive	Well-led	Overall	Key
Urgent and emergency services							
Medical care							
Surgery							
Critical care							
Maternity and family planning							
Services for children and young people							
End of life care							
Outpatients and diagnostic imaging							

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Hemel Hempstead Hospital

Our **2015** overall rating was 'requires improvement'

	Safe	Effective	Caring	Responsive	Well-led	Overall	Key
Overall	Yellow	Grey	Green	Yellow	Red	Yellow	Requires improvement
Urgent and emergency services	Yellow	Grey	Green	Green	Yellow	Yellow	Inadequate
Medical care	Grey	Grey	Grey	Grey	Grey	Grey	Requires improvement
End of life care	Grey	Grey	Grey	Grey	Grey	Grey	Good
Outpatients and diagnostic imaging	Yellow	Grey	Green	Yellow	Red	Yellow	Outstanding
							Not rated

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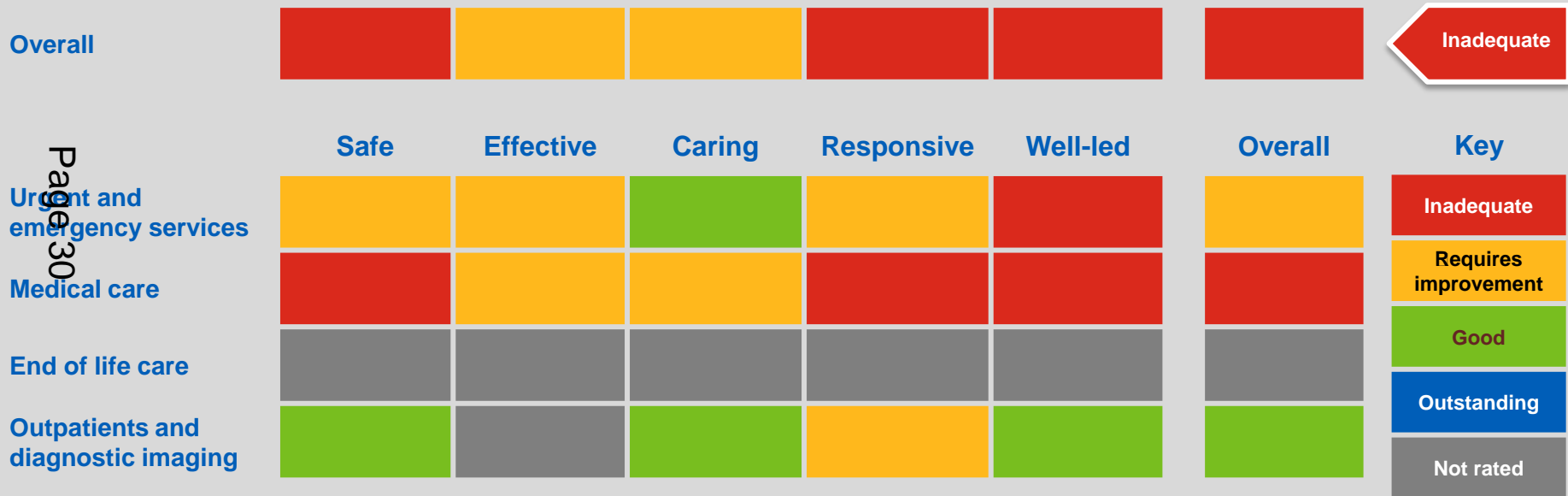
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Hemel Hempstead Hospital

Our 2016 overall rating was 'inadequate'



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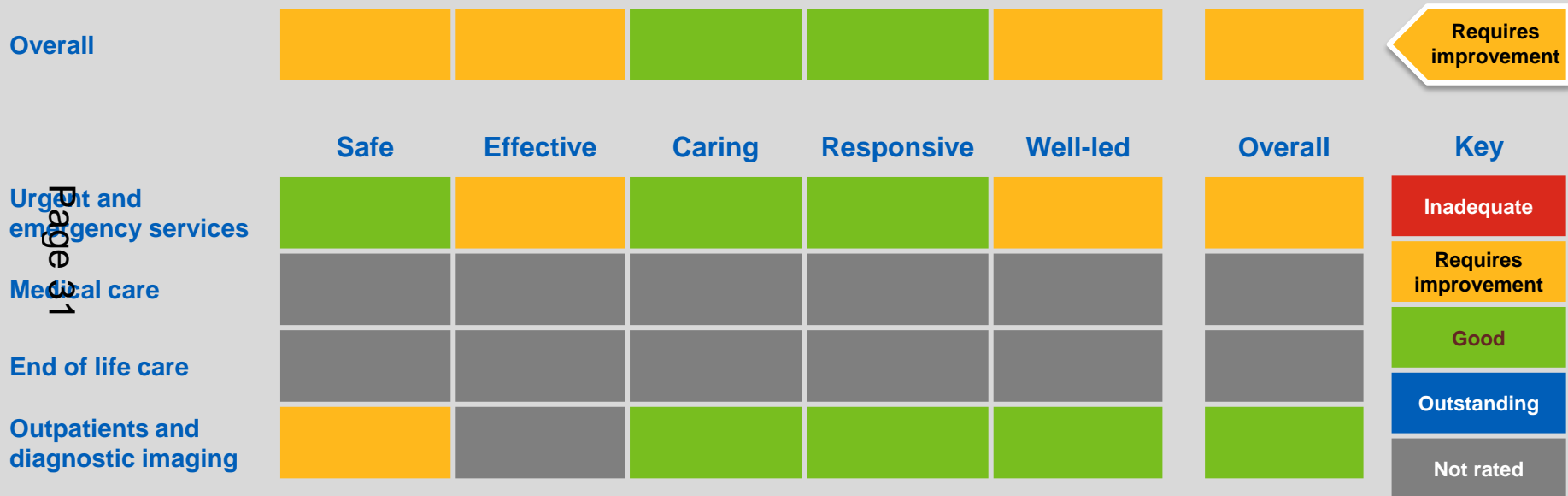
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Hemel Hempstead Hospital

Our **2017** overall rating is 'requires improvement'



Urgent and emergency services

Medical care

End of life care

Outpatients and diagnostic imaging

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St Albans City Hospital

Our 2015 overall rating was 'inadequate'

	Safe	Effective	Caring	Responsive	Well-led	Overall	Key
Overall							
Minor injuries unit							
Surgery							
Outpatients and diagnostic imaging							

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St Albans City Hospital

Our **2016** overall rating was 'requires improvement'

	Safe	Effective	Caring	Responsive	Well-led	Overall	Key
Overall	Requires improvement	Requires improvement	Good	Requires improvement	Requires improvement	Requires improvement	Requires improvement
Minor injuries unit	Requires improvement	Requires improvement	Good	Good	Requires improvement	Requires improvement	Inadequate
Surgery	Requires improvement	Good	Good	Requires improvement	Requires improvement	Requires improvement	Requires improvement
Outpatients and diagnostic imaging	Good	Not rated	Good	Requires improvement	Good	Good	Good

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St Albans City Hospital

Our **2017** overall rating is 'requires improvement'

	Safe	Effective	Caring	Responsive	Well-led	Overall	Key
Overall	Requires improvement	Requires improvement	Good	Good	Requires improvement	Requires improvement	Requires improvement
Minor injuries unit	Requires improvement	Requires improvement	Good	Good	Requires improvement	Requires improvement	Inadequate
Surgery	Good	Good	Good	Good	Good	Good	Requires improvement
Outpatients and diagnostic imaging	Requires improvement	Not rated	Good	Good	Good	Good	Good

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Overall trust rating

2017

2016

2015

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	Safe	Effective	Caring	Responsive	Well-led	Overall	
2017	Yellow	Yellow	Green	Yellow	Yellow	Yellow	Requires improvement
2016	Yellow	Yellow	Green	Yellow	Yellow	Yellow	Requires improvement
2015	Red	Yellow	Yellow	Yellow	Red	Red	Inadequate



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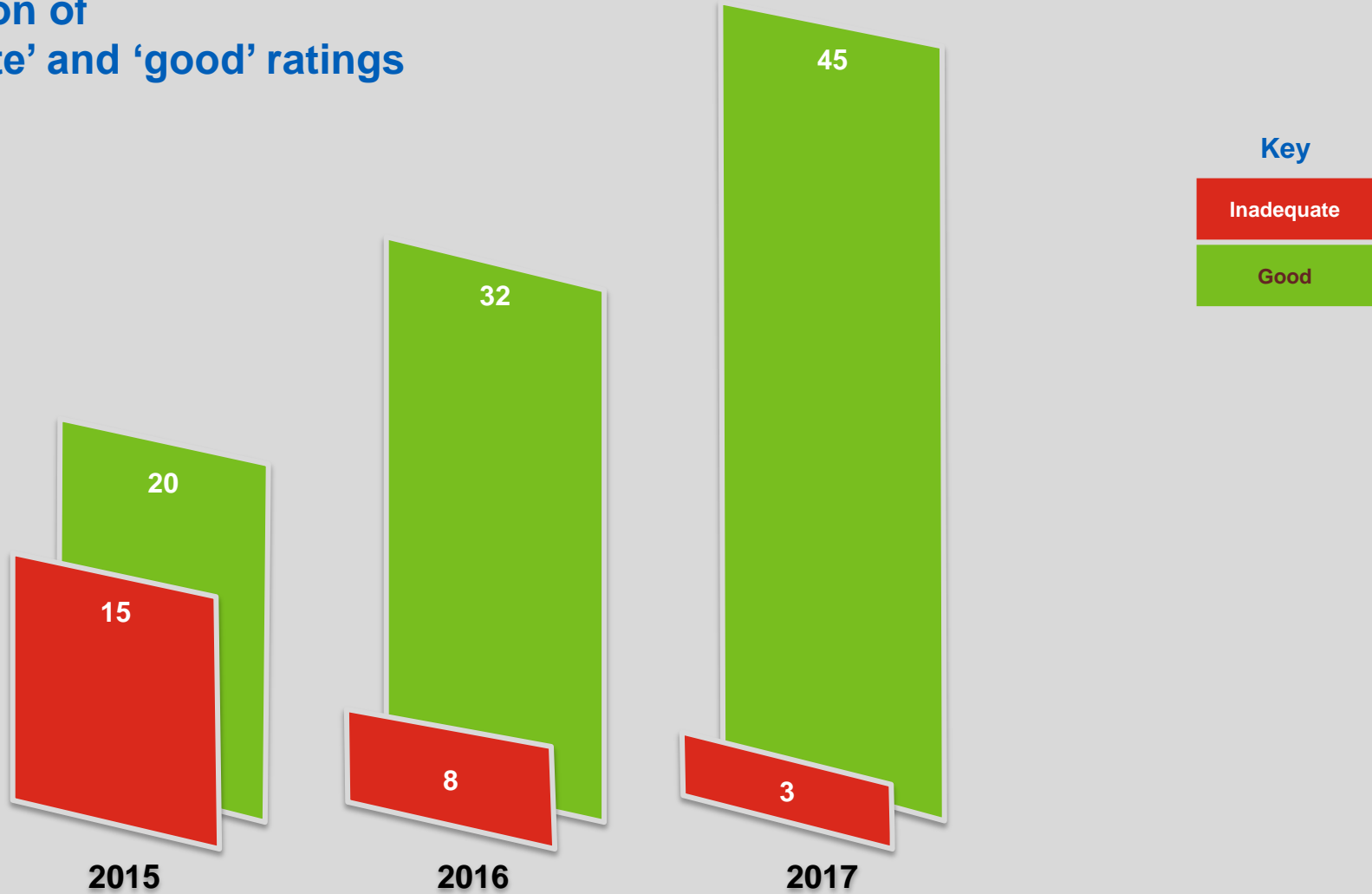
NHS

**West Hertfordshire
Hospitals**
NHS Trust

70
YEARS
OF THE NHS
1948 - 2018

Comparison of 'inadequate' and 'good' ratings

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the very best care for every patient, every day

NHS

**West Hertfordshire
Hospitals**
NHS Trust

70
YEARS
OF THE NHS
1948 - 2018

In conclusion

- We are no longer in special measures
 - We are rated 'good' for caring
 - We've made significant improvements across the board
- There is a positive culture
Staff are proud to work at the trust
We know where we need to improve
- Leadership is strong, supportive and visible
 - Our Quality Commitment will help us to deliver great service and care, and support collaboration between departments
 - Patient safety at the heart of everything we do

Thank you to all our staff!



the very best care for every patient, every day

NHS

**West Hertfordshire
Hospitals**
NHS Trust

70
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1948 - 2018

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OUR VALUES

Commitment
Care Quality

Briefing Note for Health in Dacorum Committee Meeting Wednesday, 7th March 2018

Delayed Discharges from Hospital

**Author: Iain MacBeath, Director of Adult Care Services
Hertfordshire County Council
February 2018**

Further to the update presented to this Committee in September 2017, continued progress has been made to reduce the numbers of people being delayed in hospital because of lack of onward health and social care services.

The chart attached, sets out three rows of information on total delays (top), delays attributable to the NHS (middle) and delays attributable to social care (bottom). From left to right, the charts show the overall number of delays per 100,000 people versus the challenging NHS target set for areas last summer, total delays split by NHS Trust serving Hertfordshire patients, the main reasons for delays and Hertfordshire ranking when compared with other Health and Wellbeing Board areas.

All show an improving picture, with social care meeting the NHS target for social care delays in December 2017. The new monies announced by the Chancellor for social care in March 2017 - £2bn nationally – has been used to buy new services and provide more pay for front-line care practitioners. This does appear to have had a positive effect on delayed discharges. Other schemes relating to avoiding admission to hospital altogether started in November 2017 and should impact during this year.

Hertfordshire County Council remains committed to working collaboratively with West Herts Hospitals Trust and Hertfordshire Community Trust to improve processes and systems to expedite people's discharge from hospital.

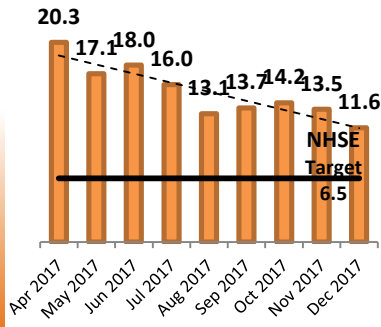
The greatest wait for people now is for packages of care to start at home and we have a number of schemes operating to provide interim beds, increase capacity in home-based services and recruit and retain workers in the homecare sector.

A Green Paper on future funding of social care will be published by the Government in the summer and Hertfordshire County Council will make a full submission to invest more in adult social care to keep older people at home, including better pay and conditions for the workforce.

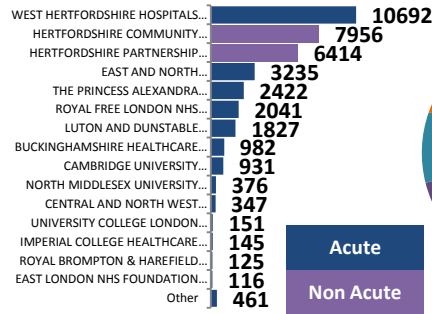
This publication is based on UNIFY published data up to the end of December 2017. This analysis has been produced to support Hertfordshire's quarterly delayed transfers of care performance for 2017-18.

Total Delays

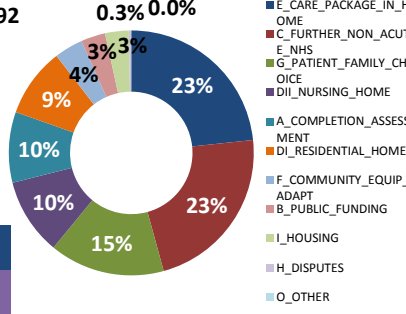
Total Delays Per 100k Monthly Trend Vs NHSE Target



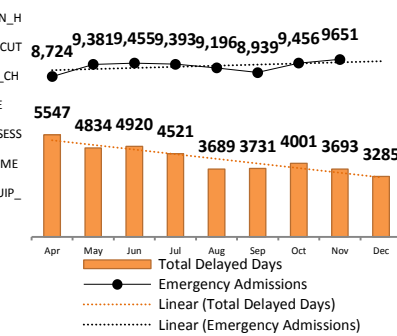
Total Delays Split by Trust (actual delayed days) for the year to date



Total Delays Split By Reason (Actual Delayed Days) for the year to Date



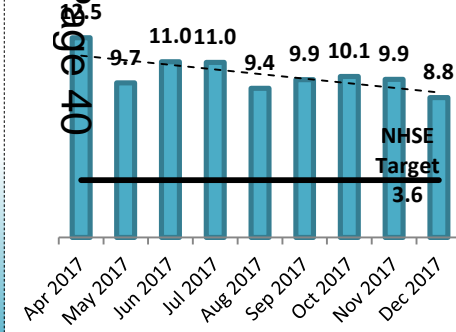
Hertfordshire Emergency Admissions (65+) Vs Delayed Transfers of care



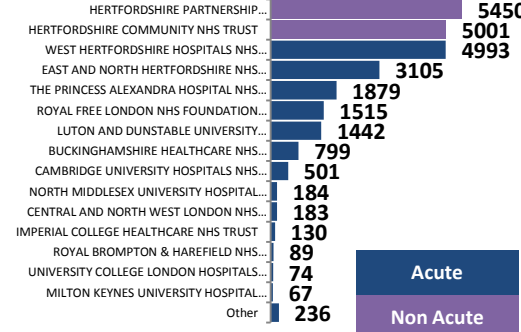
Total Delays	Hertfordshire DTOC Ranking (Change over time)		
	Hertfordshire National Ranking (Out of 151)	Hertfordshire CIPFA Ranking (Out of 15)	Hertfordshire Eastern Ranking (Out of 11)
April	137	11	11
May	129	9	11
June	128	9	11
July	121	7	10
August	95	5	8
September	102	5	8
October	110	7	8
November	109	8	8
December	104	5	8
Rank Year to Date	118	6	10

NHS Delays (67% of all Delays)

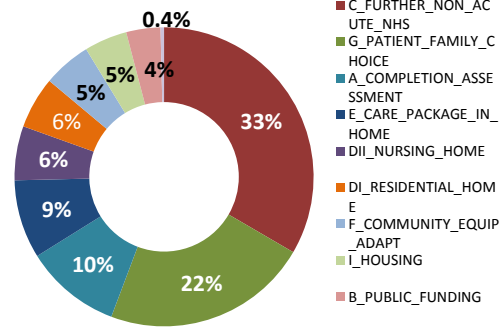
NHS Delays Per 100k Monthly Trend Vs NHSE Target



NHS Delays Split by Trust (actual delayed days) for the year to date



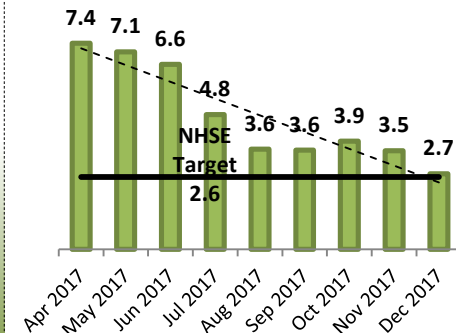
NHS Delays Split By Reason (Actual Delayed Days) for the year to Date



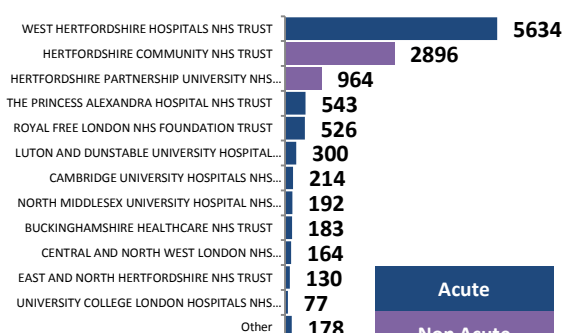
NHS Delays	Hertfordshire DTOC Ranking (Change over time)		
	Hertfordshire National Ranking (Out of 151)	Hertfordshire CIPFA Ranking (Out of 15)	Hertfordshire Eastern Ranking (Out of 11)
April	140	12	10
May	126	11	10
June	129	13	10
July	129	11	10
August	119	10	9
September	122	11	8
October	127	12	10
November	131	10	9
December	127	11	8
Rank Year to Date	126	9	9

Social Care (31% of all Delays)

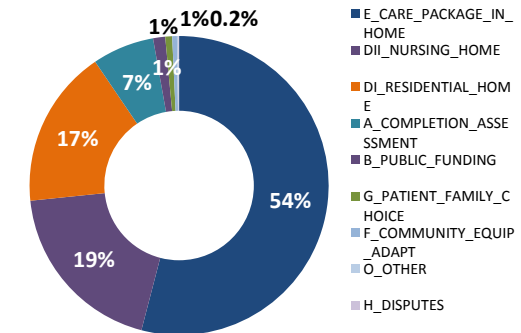
Social Care Delays Per 100k Monthly Trend Vs NHSE Target



Social Care Delays Split by Trust (actual delayed days) for the year to date



Social Care Delays Split By Reason (Actual Delayed Days) for the year to Date



Social Care Delays	Hertfordshire DTOC Ranking (Change over time)		
	Hertfordshire National Ranking (Out of 151)	Hertfordshire CIPFA Ranking (Out of 15)	Hertfordshire Eastern Ranking (Out of 11)
April	122	10	11
May	129	11	11
June	116	9	11
July	99	5	7
August	77	2	7
September	84	3	8
October	94	7	8
November	94	5	7
December	85	6	7
Rank Year to Date	107	7	8

HEALTH IN DACORUM COMMITTEE: Work Programme 2017/18

Scrutiny making a positive difference: Member led and independent; Overview & Scrutiny Committee promote service improvements, influence policy development & hold Executive to account for the benefit of the Community of Dacorum.

Date:	Items:	Contact details:	Background information	Outcome of Discussion
	<ul style="list-style-type: none"> Flexi care/wraparound housing 	Helen Brown, Deputy CEO, WHHT	To provide a presentation	
	<ul style="list-style-type: none"> 			
** September 2017	<ul style="list-style-type: none"> Health & Localism / Health & Wellbeing Board Update 	Councillor W Wyatt – Lowe	To provide an update since the last meeting.	
	<ul style="list-style-type: none"> HCC Health Scrutiny Update 	Councillor Guest	To provide an update since the last meeting.	
	<ul style="list-style-type: none"> Hemel Urgent Care Centre 	Kathryn Magson, NHS Herts Valleys CCG, Chief Executive Officer	To provide an update since the last meeting – inc figures of overnight use	
	<ul style="list-style-type: none"> Delayed Discharges 	Iain MacBeath, Director of Adult Care Services, HCC C/Clr C Wyatt-Lowe	To provide an update on this subject	
October 2017	<ul style="list-style-type: none"> Health & Localism / Health & Wellbeing Board Update 	Councillor W Wyatt – Lowe	To provide an update since the last meeting.	

HEALTH IN DACORUM COMMITTEE: Work Programme 2017/18

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	<ul style="list-style-type: none"> HCC Health Scrutiny Update 	Councillor Guest	To provide an update since the last meeting.	
	<ul style="list-style-type: none"> Gossoms End 	David Laws, Hertfordshire Community NHS Trust, Chief Executive Officer	To provide an update	
	<ul style="list-style-type: none"> “Prevention and working with the third sector” 	C/Clr Richard Roberts	To provide an update on this subject	
** December 2017	<ul style="list-style-type: none"> Get, Set, Go Dacorum 	Ben Russell	To provide an update since the last meeting.	
	<ul style="list-style-type: none"> HVCCG Update 	Helen Brown & David Evans.	To provide an update since the last meeting, including; <ul style="list-style-type: none"> a further update on the Hemel UCC, following presentation of 13 September. 	
	<ul style="list-style-type: none"> West Hertfordshire Strategic Review of Health 	Helen Brown	To provide an update since the last meeting.	

HEALTH IN DACORUM COMMITTEE: Work Programme 2017/18

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March 2018	<ul style="list-style-type: none"> Public Health & Prevention 	Councillor W Wyatt – Lowe	To provide an update since the last meeting, including an update on the outcome of County Council Audit regarding the recruitment of Homecare workers in Hertfordshire.	
	<ul style="list-style-type: none"> HCC Health Scrutiny Update 	Councillor Birnie	To provide an update since the last meeting.	
	<ul style="list-style-type: none"> HCC’s Adult Care Services 	Councillor Guest	To provide an update	
	<ul style="list-style-type: none"> WHHT CQC inspection report. 	Esther Moors , Deputy Directors West Hertfordshire Hospitals NHS Trust	To provide an update on the Care Quality Commission Inspection report; including update on the equipment in use at Hemel	
	<ul style="list-style-type: none"> Delayed Discharges - update 	Iain MacBeath, Director of Adult Care Services, HCC C/Clr C Wyatt-Lowe	<ul style="list-style-type: none"> To provide a further update on this subject, following presentation of 13 September. 	
	<ul style="list-style-type: none"> HVCCG Update 	NHS Hertfordshire – D Evans/HVCCG Representative	To provide an update since the last meeting.	

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<ul style="list-style-type: none"> Public Health & Prevention 	Councillor W Wyatt – Lowe	To provide an update since the last meeting.	
<ul style="list-style-type: none"> HCC Health Scrutiny Update 	Councillor Birnie	To provide an update since the last meeting.	
<ul style="list-style-type: none"> HCC's Adult Care Services 	Councillor Guest	To provide an update	

Consideration for Future Items/Meetings:

June 2018	The Marlowes Health and Wellbeing Centre	Marion Dunstone	To provide a report on the new premises at 41, The Marlowes, (after the establishment has had time to settle down)	
	Gossoms End – update	Phil Bradley, Hertfordshire Community NHS Trust, Acting Dep Chief Executive Officer	To provide a further update on this subject, following presentation of 31 October 2017.	
September 2018	Flexi care/wraparound housing	Helen Brown, Deputy CEO, WHHT	To provide a presentation	
	The 'waiting times of new out of hours for the UCC and the 111 service'	HVCCG Representative	To provide presentation	

HEALTH IN DACORUM COMMITTEE: Work Programme 2017/18

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Regular Invitees