

Requires
Improvement

Accident and Emergency

- People are treated with dignity and respect
- Examples of good leadership
- Responsive to patient needs
- Staff and junior doctors feel well supported
- Clean and safe environment
- Excellence for induction and training packages

Headline Feedback

- Equipment maintenance
- Medicine security
- Performance
- Documentation completeness
- Assessing and monitoring the quality of the services
- Staffing - nursing and medical

Improvement Plan

- Re-benchmark staffing levels with similar units
- Strengthen governance in relation to feedback / assurance – adherence to policies
- Enhanced spot check feedback/assurance process on adherence to policies started
- Refresh training of equipment management process
- Emergency transformation programme commenced
- Clearer safeguarding documentation stating expected levels of completeness

Requires
Improvement

Medical care

- Patients were complimentary of staff and the care they received
- Wards were clean and well maintained
- Staff were caring, kind and respectful
- Patients were treated with dignity
- Wards were well led
- Ward performance boards were positive and well received
- Staff felt supported at ward level

Headline Feedback

- Medicine management, storage/documentation
- Recognise and escalation of deteriorating patients
- Staffing - medical and nursing
- Accurate record keeping in relation to hydration and observations

Improvement Plan

- Continue to drive seven day working and extend ANP model to support
- Medicine safety project commenced
- Increase Critical Care Outreach cover to high acuity areas
- Enforce standards for documentation with mandatory audits
- Implement Practice Development Matrons
- Continue with the hydration and fluid balance chart project

Requires
Improvement

Surgery

- Staff were knowledgeable about incident reporting processes
- Positive feedback from patients
- Staff felt well supported by their managers
- WHO checklist well embedded
- Accountability handover implemented successful on all surgical wards
- Innovative new approach to managing complaints

Headline Feedback

- Full medical support for all specialties - vascular services
- Mandatory training and appraisals
- Actions taken and lessons learnt – feedback to all levels
- Implement team briefing before and after surgery
- Delays in recovery
- Challenges in meeting the 18 week wait timelines
- Pharmacy cover for the Day Surgery Unit

Improvement Plan

- Action plan for Vascular Services, including consultant cover, agreed and in place from June 2014
- Appraisal and mandatory training monitoring system in place
- Investment in nursing (recruitment plan) underway - to support mandatory training (35 new starters for Sept 14)
- Elective Pathway Transformation programme agreed and in progress from June
- Comprehensive pathway review for three surgical specialties underway (Urology, Ophthalmology, T&O)
- Mandatory team briefings before and after surgery
- Review of pharmacy cover underway with Lead Pharmacist

Good

Critical care

- Outstanding practice with use of patient diaries
- Good MDT working across all grades and roles
- Patients are treated with dignity, compassion and empathy
- Care and treatment achieved good patient outcomes
- The service was well-led with clear and effective management and governance structures
- Staff spoke positively and with pride about working in critical care

Headline Feedback

- Support for patients during admission processes (new patients and existing patients)
- Delays in discharging patients

Improvement Plan

- Use of patient and relatives' stories to raise staff awareness during admission of new patients
- Improved planning for actual/potential discharges from ICCU

Children and young people

- Effective and supportive MDT team working
- Effective links with regional networks and neighbouring trusts
- Professional and compassionate care delivered to patients
- Staff are proud to work here
- Safeguarding is well understood and effectively managed
- Excellent response to and learning from 'never event'

Headline Feedback

- Availability and management of resuscitation equipment
- Mandatory training and appraisals
- Reception staff at weekends
- Pain management guidelines
- Nurse staffing on ward 25 – leadership and ward round presence

Improvement Plan

- Review of resuscitation equipment across all paediatric areas completed.
- Recruitment plan for additional nursing staff well underway (9 appointed for Sept 14).
- Nurse leadership plan agreed
- Consultant Nurse for Pain Management to work with Paediatric Guidelines group to develop in-house pain management guidelines for children (work commenced)
- New appraisal monitoring system insitu

Maternity and Family Planning

- Extremely effective MDT– mutual respect between all grades
- Delivery rates much better than the national average, indicating effective delivery practices
- Transparent reporting culture
- Smoking reduction and cessation – very good results in an area of high SE deprivation
- Strong gynaecology ward leadership - ward passionate and caring ethos
- Care and Comfort

Headline Feedback

- Availability and management of resuscitation equipment
- Midwifery recruitment

Improvement Plan

- Full review of availability and management resuscitation equipment across all maternity areas underway (completion date – end of July 2014)
- New appraisal monitoring system now in place
- Recruitment plan for additional midwifery staff to fill all remaining vacancies now completed
- Succession planning in place, supported by team and individual development plans

Requires
Improvement

Outpatients

- Outpatient areas were clean and well maintained
- Patients received compassionate care and were treated with dignity and respect.
- Multi disciplinary working was evident
- Care and comfort rounds were undertaken, ensuring patients had food, drink and transport arrangements.
- Good leadership

Headline Feedback

- Long waiting times to obtain an appointment.
- Difficulties in recruitment of Radiologists.
- Waiting times in clinics.
- Non availability of case notes, especially across site working.

Improvement Plan

- Trust wide action being undertaken to reduce RTT, waiting times & patient follow up appointments.
- 3 year radiology strategy working with local Trusts to secure joint radiologist appointments.
- Action plan; to improve notes availability e.g. centralisation of notes preparation.

Requires
Improvement

End of life

- Care and Comfort Rounds carried out regularly
- Patients had chosen to stay at our Trust
- Staff no longer use the Liverpool Care Pathway

Headline Feedback

- Communication with relatives was not always clear.
- No specific system for Trust Wide learning about end of life from feedback

Improvement Plan

- Develop and implement an End of Life Strategy
- Continue to implement the Gold Standards Framework and Amber Care Bundle
- Develop a system for specifically learning from end of life experiences
- Continue MDT training
- CCG end of life plan for every nursing home resident

Requires
Improvement

Newark Hospital

- Surgery services were provided in a clean and hygienic environment
- Clinical management guidelines were reviewed
- Patients felt that they received good quality care
- Staff were responsive to people's individual needs
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- Good leadership

Headline Feedback

- Staff identified a lack of effective leadership and link with KMH
- Patients identified difficulties in accessing the services
- Lack of joint training with KMH
- Medical staffing

Improvement Plan

- Improved cross site working – Clinical Summit (25 July)
- Access to training
- Close working with the local CCGs
- Clarity around leadership and accountability for all aspects of Newark Hospital provision