

**Report to Governance Committee**

**Division of Medicine for Older People**

**November 2008**

**1. SAFETY**

**C1**

- a) The Division has four SUIs currently open. Two have been to panel and are final reports are being circulated. Panels for the remaining two are planned for December.

**C2**

Child protection training has not been attended by Divisional staff as we are prioritising other essential more relevant to our speciality

**C3**

NICE interventional procedures guidance is considered at the Divisional Management and Governance meeting and acted on if relevant

**C4**

- a) The Division is well within its trajectory with one MRSA bacteraemia so far this year. We are also achieving below trajectory for numbers of cases of C Difficile. The latest had hygiene audits indicate that the Division has performed badly. We do however, believe that some of our audits are not being captured in this data and are following this up.

All actions following the Healthcare Commission visit this year have been completed

- b), c), d), e) No particular issues with medical devices, reusable medical devices, medicines or waste to report

**2. CLINICAL AND COST EFFECTIVENESS**

**C5**

- a) NICE technology appraisals are considered at the Divisional Management and Governance meeting and acted on if appropriate. Nil of note from recent releases.
- b) No particular issues with supervision of clinical staff.
- c) The ability to update clinical skills is hampered by difficulties in releasing staff. The Division is prioritising essential training, but this does not include some areas that are crucial to safety for our patients (eg falls, dementia care). The Division does provide training for falls and dementia care but attendance is variable and is directly related to staff shortages and operational pressures

**C6**

Divisional links with local Social Services, primary care Trusts and Mental Health facilities are well established. The Division has representation on groups examining the emergency care pathway.

### 3. GOVERNANCE

#### C7

No issues regarding governance to report.

#### C8

- a) The Division has just been part of an investigation under the whistle-blowing policy (allegations related to low morale and lack of staff). Meeting to discuss the investigation is being arranged
- b) Individual development plans are in place for a minority of staff. Line managers find the current process for appraisal and setting PDPs onerous and over-complex. (Exacerbated by difficulties in finding time for the process) We are awaiting the work of the group set up by HR which we hope will provide a more user-friendly document and process. The Division has had representation on this group  
The Division is on target with its Divisional Business and performance plan

#### C9

There are no issues to report regarding records management.

#### C10

There are no issues to report regarding employment checks and monitoring of staff against codes of practice

#### C11

- a) And b) The Division is actively recruiting to vacant posts within its budget. There are targets for essential training which the Division is working towards with some success. The Division has made use of the e-mot's for essential training. Other specialist training is provided by the Division for its staff according to its clinical risks (currently falls and dementia care) has had sporadic attendance due to problems releasing staff from the wards.
- c) The Division does not have a practice educator which makes it difficult to monitor essential, specialist and professional learning and development. The Learning and Development Department has committed to giving some extra support.

#### C12

The Division is shortly to be part of a research project related to C Diff vaccine. Dr Jonathan Hewitt is leading this

### 4. PATIENT FOCUS

#### C13

There are no issues to report regarding confidentiality or consent

#### C14

- a) Following a continuous rise in the number of complaints in the Division since Q3 2007, there has been a drop in the last quarter. Some focussed work with a ward who had experienced large numbers of complaints has been successful with a big reduction for this ward. The work consisted of multi-disciplinary staff meetings with the team identifying areas it wanted to improve and setting its own action. The content of the complaints has not altered with communication and basic care featuring largely. There have been no complaints about mixed sex accommodation
- b) and c) There are no issues to report regarding access to complaints process, discrimination or acting on concerns.



DMOP complaints  
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The Division has produced an action plan in response to the Privacy and Dignity audit undertaken this summer.

#### **C15**

The introduction of cook-chill is causing some concern for the Division as we are not sure that it will meet the needs of our patients, many of whom have problems with eating and drinking. We are however, ready to start this system

#### **C16**

No issues to report regarding access to information

### **5. ACCESSIBLE AND RESPOSIVE CARE**

#### **C17**

The Division has piloted a patient feedback questionnaire as part of its SLM work. We have produced an action plan in response to the National in-patient Survey

#### **C18**

No issues to report regarding equality of access

#### **C19**

The Division is struggling to meet its target for admissions from MAU. This is partly due to problems that our external partners are experiencing There is ongoing work being undertaken to try and address the pertinent issues

### **6. CARE ENVIRONMENT AND AMENITIES**

#### **C20**

- a) The Stroke Unit was set up on F3 on November 4<sup>th</sup> and G2 have moved into South Block
- b) Moves associated with the new hospital are currently being planned. There are ongoing concerns about the SMH site post month 42. There will need to be a special environment set up for the Challenging Behaviour Unit which is currently being discussed with estates. There is financial support from charitable and project funds for this

#### **C21**

Moving into new premises will provide opportunities and challenges for the Division that are currently being discussed and planned for

### **7. PUBLIC HEALTH**

#### **C22**

No relevant issues to report regarding inter-organisational working

#### **C23**

No disease prevention programmes in progress

#### **C24**

The Division is actively engaged with Pandemic Flu planning.