

HARINGEY COUNCIL OVERVIEW AND SCRUTINY COMMITTEE – COMMENTS ON FINAL ANNUAL HEALTH CHECK DECLARATION BY THE WHITTINGTON HOSPITAL TRUST

The comments made by the Overview and Scrutiny Committee in relation to core standards have come from all health scrutiny work that has been undertaken during the year. This includes specific feedback from the stakeholder conference that was held on 22 March and focussed reviews on specific topics. The Committee welcomed the positive and pro-active approach taken by Trust and the level of information provided and recognises the need and importance of working together to improve the health and well being of residents.

Core Standard	Comment
<p>C6: “Healthcare organisations cooperate with each other and social care organisations to ensure that patient’s individual needs are properly managed and met.”</p>	<p>The Committee is of the view that there should be a seamless provision of care for patients. It noted the response from the Trust this should, in theory, already be taking place. The Trust has a discharge liaison team which works closely with Haringey Council’s Adult, Culture and Community Services Directorate and families. However, it was noted from evidence from the Trust that this does not always happen, particularly for patients with relatively minor ailments. In addition, the Committee also noted from evidence from patient representatives from the Trust’s PPI Forum that patients are routinely told, on discharge, to visit their GP if they feel unwell rather than having specific follow-up from the hospital. It was their view that this could sometimes lead to a lack of continuity in care. In response to this, the Trust stated that they were sometimes not able to follow up because they are told not to do so by the TPCT. The Committee is of the view that the Trust should work closely with the TPCT to develop systems that ensure that patients are always provided with the follow up necessary to facilitate their full recovery and minimise the risk of relapse.</p> <p>The Committee noted that both of the main local acute trusts for the area (the North Middlesex Hospital and the Whittington) have initiated some innovative approaches to practice. However, it is of the view that these could be better shared so that best practice and innovative ideas could be adopted more quickly and widely.</p> <p>The Committee’s recent scrutiny review on improving the health of people with profound and multiple learning disabilities received evidence that there is a lack of</p>

	<p>clarity on the who should fund additional support required for people with learning disabilities when they hospitalised. This can result in a lack of such support being provided, resulting in additional burdens being placed on carers. The review has recommended that this issue should be clarified in discussions between health and social care partners, including the Whittington Hospital, as part of the commissioning process.</p>
<p>C13; “Healthcare organisations have systems in place to ensure that: a) staff treat patients, their relatives and carers with dignity and respect; b) appropriate consent is obtained when required, for all contacts with patients and for the use of any confidential patient information; c) staff treat patient information confidentially, except where authorised by legislation to the contrary.”</p>	<p>The Committee noted evidence from stakeholders at the Health Scrutiny Conference that there could sometimes be issues concerning the management of visiting hours. Whilst it is of the view that visits are of great benefit to patients, a balance needs to be struck to ensure that they do not detract from their recovery or put them at risk from infection. The Committee welcomes the response from the Trust that they have put an ‘experience review group’ in place to look at this issue and feels that visiting hours should be managed sensitively but effectively.</p> <p>The Committee notes that the Trust has considered outsourcing transcription services but has not yet made a final decision. It is strongly of the view that any decision to outsource should not compromise patient confidentiality.</p>
<p>C15; “Where food is provided, healthcare organisations have systems in place to ensure that: a) patients are provided with a choice and that it is prepared safely and provides a balanced diet b) patients’ individual nutritional, personal and clinical dietary requirements are met, including any necessary help with feeding and access to food 24 hours a day”</p>	<p>The Committee noted evidence from stakeholders regarding the issue of ‘choice’ for vegetarians. There are a large and increasing number of people who are vegetarians in the locality. A particular reason for this is the diverse nature of the local community which includes a significant number who are vegetarian for religious or cultural reasons. There is currently only one vegetarian option on menus, which only provides a limited a choice for them. The Committee is therefore of the view that choice for vegetarians should be extended.</p> <p>The Committee welcomes the fact that the Trust monitors the amount that people eat to ensure that they are getting proper nourishment.</p> <p>It notes the fact that many hospitals, such as the North Middlesex Hospital, now use a coloured tray system to denote those with who need assistance when eating and that these have proven to be of assistance. It therefore welcomes the fact that the Trust is piloting a similar scheme and looking to expand the programme.</p>

<p>C16; “Healthcare organisations make information available to patients and the public on their services, provide patients with suitable and accessible information on the care and treatment they receive and, where appropriate, inform patients on what to expect during treatment, care and after care”</p>	<p>The Committee undertook a scrutiny review that the Committee on improving the health of people with profound and multiple learning disabilities. As part of this, the Committee commissioned independent in-depth consultation with a representative group of local carers and received evidence that local hospitals, including the Whittington, did not always communicate effectively with people with learning disabilities and their carers. The Committee is therefore of the view that the trust could benefit from an increased awareness of the communication needs of people with learning disabilities and the challenges that there can be in meeting them..</p>
<p>C17; “The views of patients, their carers and others are sought and taken into account in designing, planning, delivering and improving healthcare services”</p>	<p>The Trust has engaged effectively with the Committee when requested and links have been further developed. This has included assistance with the setting up of the annual Health Scrutiny Conference to which a wide range of stakeholder organisations were invited, and assistance with the creation of local protocols for the consideration of “substantial variations”, as defined by Section 7 of the Health and Social Care Act.</p>
<p>C18: “Healthcare organisations enable all members of the population to access services equally and offer choice in access to services and treatment equitably”</p>	<p>The Committee notes that times when diagnostic appointments are available are generally during office hours. This can make it difficult for a range of people to attend, including people with childcare responsibilities and in full time employment. It welcomes the fact that the Trust now runs some early morning [7am] sessions and a drop in x-ray facility. However, it feels that there needs to greater flexibility in the availability of appointment times.</p> <p>Evidence obtained as part of the scrutiny review on improving the health of people with learning disabilities that both outpatient and inpatient departments are not geared up to effectively accommodate people who have specialised needs. People with a learning disability may have difficulty waiting for long periods of time, not understand why they are at the hospital and may find medical procedures alarming. This can manifest itself in behaviour that could be interpreted as challenging. In addition, there may also be communication difficulties which can make it more difficult for health professionals to reach a diagnosis. The view of carers that were interviewed was that local hospitals, including the Whittington, could assist by considering more flexible arrangements in order to accommodate their needs more</p>

	<p>effectively. In addition, carers felt that staff did not always fully appreciate the challenges of meeting the needs of people with learning disabilities when they were hospitalised. This could mean that insufficient support was available and, in particular, signs and signals of distress were missed or misinterpreted. As a result of this, carers often did not feel confident to leave whilst they were an in patient.</p> <p>However, the same scrutiny review also received welcome evidence on good practice by the Trust in its neurology department in responding sympathetically and effectively to a carer’s concerns about her daughter’s possible seizures. The carer was greatly assisted by a nurse who had been on a training placement in local day centre for people with learning disabilities and therefore understood about learning disability and her daughter’s difficulty with waiting around. Due to this, the patient was fast tracked her daughter through the system. The Committee is of the view that such good practice should be shared and promoted and, in particular, appropriate training on learning disability should be provided routinely for staff.</p>
<p>C21: “Healthcare services are provided in environments which promote effective care and optimise health outcomes by being well designed and well maintained with cleanliness levels in clinical and non clinical areas that meet the national specification for clean NHS premises”</p>	<p>The Committee noted the view of a range of stakeholders at the Health Scrutiny Conference that the environment in Accident and Emergency needs to be improved. The Service is under extremely heavy demand and a better designed, brighter and more welcoming environment would be more conducive to patient care. It was further noted that it would also be of benefit and more conducive to the care of paediatric patients if a separate area within Accident and Emergency was created for them and their accompanying families. The Committee welcomes the Trust’s commitment to these same proposals.</p>