

# Quality Account 2016-17

Developing high quality services in the community

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## Chair statement – Raoul Pinnell



I have come to the conclusion that quality is not finite but infinite. By this I mean that quality is not a static ambition, but an ever moving, and hopefully improving one. The strive to achieve the highest possible level of quality is therefore, in itself, a moving target.

The public, rightly, expect us to have Quality at the heart of everything we do. But defining a 'quality outcome' for a wide range of different services is challenging. Is quality in the eye of the beholder of the clinical professional or in the eye of the receiver of care i.e. a patient?

The answer to me is we have to understand and seek the highest levels of achievement on both. As an example, we already know a lot about the credit we are given for 'healing' when we apply professional knowledge and experience, but also how much patients value our work being done in a 'caring and compassionate' way.

One of the ways in which the Board achieves a focus on Quality is through one of our main Board Committees: a Quality Committee. This is supported by a number of sub committees and groups. The main Quality Committee meets six times a year and reports to the main Board.

As a society, we are exercised about the value and return we achieve from the public services that we as citizens receive. And our expectations continue to increase. Many are concerned about what we can afford and the impact that different levels of funding might have on Quality. However, I don't see that the issue is a 'straight line one' i.e. that all increases in quality can only be achieved with an increase in resources. The role of technology and doing things in a different way should not be underestimated.

I hope that our belief in the importance of Quality is manifest in the way that we continue to seek to 'do better.'

## CEO's Statement – Jacqueline Scott



Welcome to our sixth quality account which tells you about our achievements in 2016/17 and outlines the areas of focus for the next 12 months.

2016/17 has been our most challenging year yet with 96% of our services being subject to a procurement process. Despite this unprecedented level of uncertainty, Bromley Healthcare has performed consistently well with patient satisfaction scores (measured through the national Friends and Family Test) often being the highest across London and nationally in the top four.

The Care Quality Commission (CQC) has undertaken three inspection visits and there is much to celebrate. All services inspected were rated 'good' overall and in every domain. In our Community Health Services for Adults we were particularly pleased with the 'outstanding' that we received for caring. An Ofsted inspection has also been undertaken at Hollybank and a rating of 'good' was received in the three categories assessed.

As your local community provider our paramount priority continues to be to deliver high quality, safe and effective services to all of our patients and carers. In 2016/17 we set ourselves a number of quality objectives. Some of our achievements that we are particularly proud of are:

- 10% of our feedback received from 'harder to hear' communities
- A comprehensive geriatric assessment incorporating, a person's medical, social and psychological and functional abilities was developed and implemented
- Achieved full Baby Friendly Accreditation
- Introduced the Therapy Outcomes Measures into services to understand the changes in a person's condition, impact on daily life, their psycho-social gain and their wellbeing.
- Developed and commenced implementing a new Health and Well-being strategy
- Introduced 'near live' dashboards enabling key performance indicators to be monitored on a daily basis which was commended as outstanding practice by the CQC.

So as we enter into 2017/18 I would like to take this opportunity to thank all of our team for their continued commitment to deliver the best care possible for all of our patients and carers within the community.

## Part 1 Bromley Healthcare - an overview

Bromley Healthcare was established in April 2011 as an employee owned social enterprise, with over 877 staff including Nurses, Therapists, Doctors and Dentists. The community health services that Bromley Healthcare provide include health visiting, district nursing, school nursing and specialist nursing. Bromley Healthcare's services range from helping new parents to care for new born children to supporting the elderly to continue living at home as long as they can.

In 2016/17 we were successful in winning tenders for Improving Access to Psychological Therapies (IAPT), expanding our dental services to Bexley and Greenwich and in the Borough of Bexley winning health visiting and dietetics services.

### Understanding the population that we serve

With increasing demands on healthcare funds it is more essential than ever that Bromley Healthcare work to ensure that the services they provide are both cost-effective but also relevant to the population that we serve.

The population of Bromley continues to grow, to a size of over 326,000 in 2016, and is predicted to expand still further over the next ten years. The number of 0 to 4 year olds is projected to decrease by the year 2021 to 20,754 and then to 20,169 by 2026.

The proportion of older people in Bromley (aged 65 and over) is expected to increase gradually from 17.7% of the population in 2016 to 18.2% by 2021 and 19.1% by 2026.

The prevalence of dementia is predicted to rise, and although recording of dementia has increased in Bromley over the last two years, it is likely that there are still many cases not known to clinical services (JSNA2016).

Where conditions are identified and managed early, people are less likely to progress onto more severe cardiovascular disease of stroke, heart attack or vascular dementia. Of particular importance is the need to maintain and continue improvements in the identification of people who have Pre-Diabetes (non-diabetic hyperglycaemia) and ensure they are offered intensive programmes of lifestyle intervention to prevent the progression onto development of diabetes.

The need to identify people with undiagnosed hypertension and atrial fibrillation and for these to be managed effectively to prevent stroke are of high importance

The latest (2016) GLA population projection estimates show that 19% of the population is made up of Black and minority ethnic (BME) groups. The BME group experiencing the greatest increase within Bromley's population is the Black African community, from 4.5% of the population in 2016 to 6.6% of the population in 2031. The North West of the Borough has the highest proportion of ethnic minorities, and the Cray Valley area which houses the Gypsy Traveller population both groups are known to experience poor health outcomes.

Mortality in Bromley is chiefly caused by circulatory disease (29.1%) and cancer (29.0%) with higher mortality rates for both conditions in the more deprived areas of the borough. Thus, there is a need for continued action to address health inequalities associated with deprivation as inequalities between areas in Bromley continue to increase.

Mental health problems affect a large proportion of the population, with approximately 10.7% of people completing the GP patient survey reporting that they feel moderately or extremely anxious or depressed. At the more severe end of the spectrum, over 2,500 people in Bromley (0.81% of the adult population) have been identified by GPs as suffering from serious mental illness.

Where conditions are identified and managed early, people are less likely to progress onto more severe cardiovascular disease of stroke, heart attack or vascular dementia. Of particular importance is the need to maintain and continue improvements in the identification of people who have Pre-Diabetes (non-diabetic hyperglycaemia) and ensure they are offered intensive programmes of lifestyle intervention to prevent the progression onto development of diabetes.

The need to identify people with undiagnosed hypertension and atrial fibrillation and for these to be managed effectively to prevent stroke are of high importance.

(Reference: Bromley Joint Strategic Needs Assessment 2016)

## CQC Compliance Statement

Bromley Healthcare is registered with the Care Quality Commission (CQC) for the regulated Health care services that we provide. The organisation has a nominated individual and Registered Manager who work with the CQC to ensure that services are compliant with the five essential standards of care:

Safe, Caring, Responsive, Caring and Well Led.

## CQC Lauriston Rehabilitation Unit inspection result

In November 2016, the service achieved an overall rating of **Good**

Safe: **Good**

Caring: **Good**

Responsive: **Good**

Caring: **Good**

Well-Led: **Good**

The inspectors stated that:

- 'Staff provided kind and compassionate care '
- 'Patients privacy and dignity was maintained'
- 'Staff were aware of patients individual needs'
- 'Patients and their relatives reported that they were involved in their care'
- 'Staff provided emotional support to patients'

## CQC Global House Unit inspection result

In November 2016, the service achieved an overall rating of **Good**

Safe: **Good**

Caring: **Good**

Responsive: **Good**

Caring: **Good**

Well-Led: **Good**

The inspectors stated that:

- Patient records were comprehensive
- Appropriate risk assessments completed.
- The service had effective systems for identifying, reporting and investigating incidents
- Patients told the inspectors that their confidentiality, dignity and privacy were respected by the staff.

## Ofsted inspections at Hollybank Children's Respite Service

Hollybank Ofsted inspection took place in 2016.

They received a **good** rating in the 3 assessed categories:

Leadership and Management: **Good**

Safeguarding - Protection of Children: **Good**

Quality of Care including the overall experience of children: **Good**

A further unannounced Ofsted inspection was carried out at Hollybank in March 2017 and the service maintained their '**good**' rating.

The Inspectors stated that the unit 'was well run with staff that cares'.

## We offer a full range of community services, including:

- Children's services current or last year
  - Audiology
  - Community paediatrics
  - Children's Dietetics Service
  - Hollybank (short term break service for children with disabilities)
  - Children's community nursing team
  - Occupational therapy
  - Physiotherapy
  - Speech and language therapy
- Nursing:
  - Bladder and bowel management
  - District nursing including phlebotomy
  - Community Matrons
  - Health visiting
  - Breast feeding Drop in Groups
  - School nursing
  - Specialist HIV nursing
  - Tissue viability
  - Leg Club
  - Respiratory Service and Home Oxygen Supply
  - Integrated Community Teams
  - Family Nurse Partnership
- Rehabilitation services for adults
  - Community Home pathway service
  - Bedded rehabilitation unit
  - Falls and Fracture service
  - Occupational therapy
  - Physiotherapy
  - Speech and language therapy for adults



- Health and well being
  - Contraception and reproductive health
  - National Child Measurement Programme
  - Diabetes-walking away from diabetes
  - Adult dietetics service
  - Health improvement services
  - Henry
  - Live Well
  - Man2man
  - MEND
  - Specialist HIV nursing
  - Smokefree Bromley
  - Bromley Working for Wellbeing
- Other services
  - Medical Response Team
  - Lewisham winter assessment team
  - Minor oral surgery
  - Special care dental
  - Safeguarding Adults And Children
  - Wheelchair and special seating



## Part 2 Our on-going quality priorities for 2016-2020

### Our aims

We aim to be the best community care provider that strives for the provision and delivery of caring, safe and effective services to local people, either within peoples home or close to their home and their community.

We know that staff who join us are passionate about caring for people and their community, and that it is important to support them so that they can continue to be compassionate; they take pride in their clinical expertise and be innovative we also understand that healthcare delivery is constantly changing to improve people's experiences of care. We are committed to working in partnership with patients and carers, other health and social care colleagues and voluntary services to ensure that our local community receives the best.

We believe that our community deserves to receive to the best possible care for themselves and their families. We have developed three commitments that we will strive to continue to deliver over the following three years. The commitments are to our patients, carers and staff and are underpinned by our business plan and tenets. Improvements in the quality of care are only achieved through our greatest resource our staff and our aspirations have been developed with their involvement.

### Our Commitments

Our commitments to patients and staff are as follows:

- We will know your story and what matters to you
- Your care is delivered by the right staff with the right skills at the right place at the right time
- We will meet the health needs of the community at the greatest possible value

## "We will always know your story and what matters to you"

| How will we improve  | How would we know we were successful against in hitting our target?   |
|--|---|
| We will ensure that patients have a brief risk assessment within 24 hours or triaged safely within one working day                                       | 100% of carers /parents needs are considered within the assessment 90% of patients/children have a brief risk assessment or triaged safely within one working day |
| Develop one patient record   | All staff know their patients story   |
| For people to have one care plan that incorporates all those that care for them  | 100% of patients /children have a person centred care plan  |
| Work with families and carers and focus on what is achievable, by introducing patient person centred goal planning and by recording what matters to them | 80% of patients have their wellbeing assessed   |
| Standardised, evidenced-based approach to treatment ensuring that all patients consistently receive the best possible care.                              | 30% of patients have had their medication reconciled on admission to our services to reduce our medication errors   |
| Implement our action plans for reducing avoidable harms  | Zero grade 3 and 4 avoidable pressure ulcers<br>50% reduction of falls  |
| Be respectful in all of our communication to ensure that people feel valued  | 100% of patients have had their capacity to consent recorded  |
| Ensure that we are meeting patients and staff differences and respond accordingly.   | year on year increase staff survey, staff feel valued and able to do their jobs effectively   |
| Work in partnership with others health, social care and voluntary services to meet your needs  |   |

**“We will deliver care by the right staff, with the right skills in the right place at the right time”**

| How will we improve  | How would we know if we were successful at hitting our targets   |
|--|--|
| <p>Implement safer staffing tools that identify staffing needs to patient acuity</p> <p>Making sure that we have the right staff with the right skills to meet the patient’s needs</p> <p>Recruit staff who hold community care values and reflect our communities diversity</p> <p>Benchmark the education attainment of our workforce to ensure they are developed for future roles</p> <p>Develop an education and training programme that ensures people have the essential clinical skills to work along patient pathways from band 2-8</p> <p>To be a host provider for undergraduate clinical training Introduce a rotational preceptorship</p> <p>Commence a leadership programme for band 7 and 8</p> <p>programme for newly qualified staff</p> <p>Introduce our apprenticeship scheme</p> <p>Embed our professional values and professionalism within the workplace</p> | <p>Values based recruitment</p> <p>80% of staff have their essential competencies signed off within 3 months of commencing employment and then every two years</p> <p>85% of care is delivered by our substantive staff Build the size and competencies of our bank so that we can be responsive to fluctuating patient demand</p> <p>50% increase in our hosted community and pre-registration nursing and AHP degrees</p> <p>50% of band 5 &amp;6 have a degree qualification</p> <p>85% of staff achieve their mandatory training</p> <p>80% of band 7 &amp; 8 have completed a leadership programme</p> <p>An apprentice in 20 of our departments</p> <p>85% staff receive regular 1:1 and an annual appraisal</p> |

## "We will meet the health needs of our community at the greatest possible value"

| How will we improve   | How would we know if we were successful at hitting our targets  |
|---|---|
| <p>All services to identify a public health outcome measure</p> <p>Listen and involve children and young people in shaping our services</p> <p>Ensure we are a dementia friendly provider and a mindful employer</p> <p>Listen to needs of hard to hear groups</p> <p>Patients access to services at the right time identifying communication gaps and review Waiting times and DNA to demonstrate good engagement</p> <p>Develop teams to ensure that they are embedded into the integrated care networks</p> <p>Work with both GPs, social care, the voluntary sector and pastoral care colleagues to ensure collaborative and integrated working</p> <p>Ensure we have access to service user groups for carers and patients across our specialties</p> <p>Only invest our resources in activity that demonstrates value and to stop doing those things that add no value to our patients</p> <p>Identify where there are gaps and work with commissioners and other partners to ensure that these needs are met</p> | <p>All services show improvements in public health measures</p> <p>70% of patients show an improvement in one measurable clinical outcome</p> <p>Ensure 10% of feedback is from hard to hear communities</p> <p>Services demonstrate improvements in health and value for money across pathways</p> <p>100% of services have access to local service user engagement groups</p> |

**Board**

**Quality / clinical governance committee  
(exec and board membership)**

Reports from quality groups,  
CQC essential standards,  
Services presentations  
Strategic risk register

**Workforce development  
group**

Attendance:

Chaired by Director of  
Human Resources

Heads of service

Operations Manager

Invited external  
stakeholders ad hoc

**Patient experience group**

Attendance:

Chaired by Director of  
Nursing Therapies and  
Quality Assurance.

Heads of service

Profession representation

Healthwatch Bromley and  
Lewisham

**Clinical effectiveness  
group**

Attendance:

Chaired by the director of  
Nursing, therapies and  
Quality assurance

Operations Manager

Profession representation

External educational  
representation

**Safer care group**

Attendance:

Chaired by the director of  
Nursing, therapies and  
Quality assurance

Heads of service

Profession representation

Operations Manager

CCG



## Part 3 our achievements for 2016-17

### 3.1 Patient Experience

‘We will always know your story and what matters to you’

| Patient experience quality standards  | Results |
|---|---------|
| <b>Family and Friends Test</b> Our patients and carers would recommend us   | 98%     |
| <b>Organisational</b> % of positive feedback arising from compliments, concerns and complaints  | 92%     |
| <b>Organisational</b> 10% of hard to hear of feedback is from hard to hear communities  | 10%     |
| <b>Organisational</b> % of patients who have ethnicity recorded   | 89.3%   |
| <b>Falls and fracture prevention balanced lifestyle group.</b> Patients feel confident that they would continue with the home exercise programme and would consider joining a community based exercise group. | 99%     |
| <b>Adult Speech and Language</b><br>Ensure that patients and carers feel that they are being listened to and that members of staff understand them and their problems   | 100%    |
| <b>Respiratory</b> Patients have an agreed personalised care plan which includes a self-management plan within 2 months of the first contact  | 86%     |
| <b>Bladder and Bowel service</b> All patients are treated with dignity and given time to describe their symptoms and anxieties.   | 99%     |
| <b>Stage 3 Baby Friendly initiative</b> Mums felt that they valued their health visiting staff and that they were kind and considerate  | 100%    |
| <b>National Child Measurement Programme</b><br>Number of schools satisfied or very satisfied with how the measuring of children was carried out.  | 99%     |



## What does the community tell us about our services?

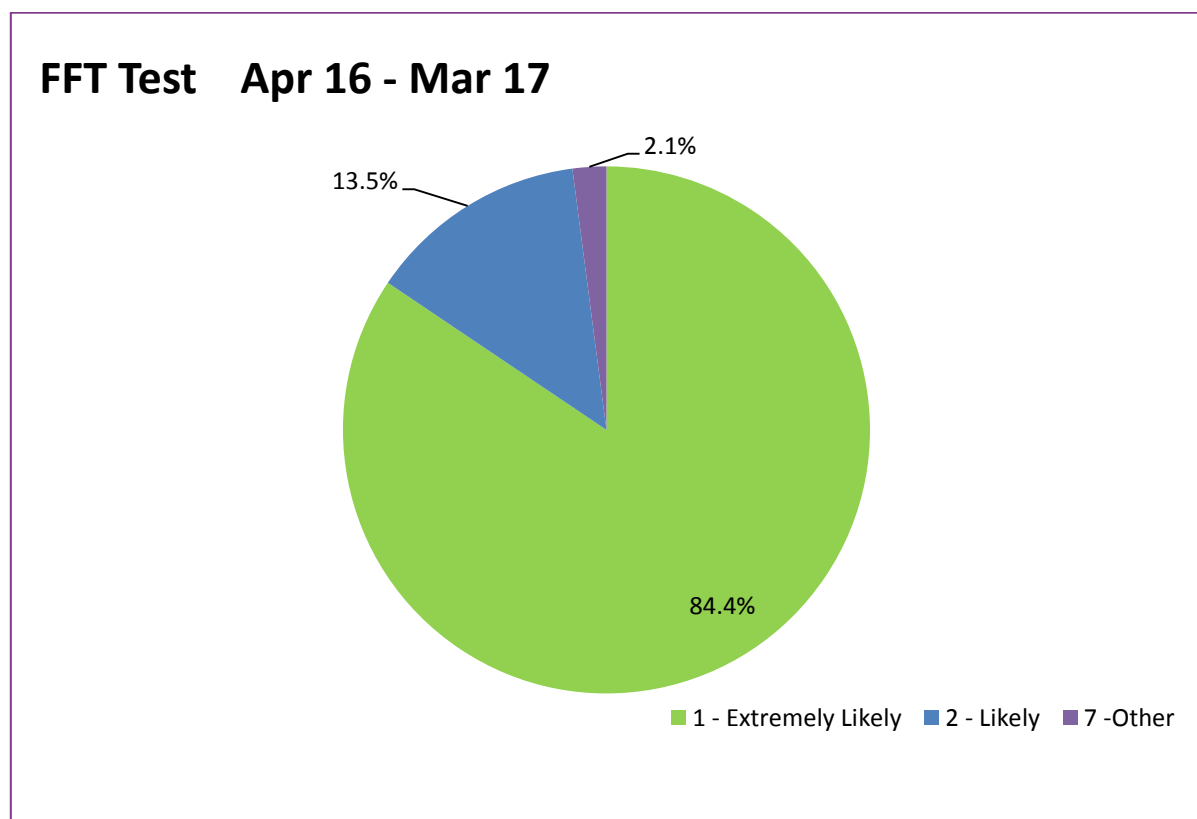
### The Family and Friends Test (FFT)

The Family and Friends Patient feedback survey has been a mandatory requirement by NHS England since January 2015. The survey provides patients with a simply and quick opportunity to feedback on their experience of using Bromley Healthcare services at any stage of their treatment. Bromley Healthcare have performed consistently well as an organisation often coming first in London and in the top 4 Nationally.

Bromley Healthcare continues to use Patient Opinion. Patients, carers and the public are encouraged to tell their story and experiences of care provided and share comments about our services to the wider public.

The Patient Reference Group meets quarterly enabling local residents and service users to share their experiences and offer support and advice on a variety of topics relevant to local community health services and provision. All participants work in Bromley; have experience of local community services and have a positive commitment in helping to improve these services

### FFT result for Bromley Healthcare – All services



## Bromley Rehabilitation Bedded Unit Action plan

| You told us this                             | As a result   |
|--|---|
| That you would like more therapy             | Weekend and Group therapy sessions have been implemented  |
| That you would like a delivery of newspapers | All patients now have the option to buy a daily newspaper   |
| That it was noisy at night                   | Staff are now rotated through both day and night shifts, introduced night lights and soft close bins. Staff have been made aware of the need to be quiet at night |
| Additional hot drinks                        | Hot drinks trolley on order to allow for more availability of hot drinks during the day   |

## Feedback from CCG survey



## Listening and working with hard to hear communities

In 2016/7 BHC focused on listening to the voice of children and young people across our services, particularly those with communication difficulties. Monthly questionnaires that use visual counters encourage these children looked after by Hollybank to comment and feedback on the service. 93.5% of comments were positive; these included the following questions below. The service are reviewing their day trips and furniture at the unit.

| Question  | Yes   |
|---|-------|
| Do you like the food at Hollybank?                          | 81.2% |
| Are the staff kind to you at Hollybank?                     | 94.1% |
| Do the staff listen to you at Hollybank?                    | 90.4% |
| Do you like you bedroom at Hollybank                        | 82%   |
| Do you get enough arts and crafts at Hollybank?             | 87%   |
| Do you get to go on trips often when you stay at Hollybank? | 61%   |
| Do you like the furniture at Hollybank                      | 75%   |

## Bromley Working for Working for Wellbeing Associates programme

The [Associates programme](#) invites people who have accessed psychological therapies to ensure that the service is shaped to reflect the ongoing needs of those who experience symptoms such as anxiety and depression. The nature of these conditions can impact all areas of a person's life, from confidence in oneself to maintaining affective employment. The recruitment of associates supports the ongoing recovery of these patients. This is achieved by their attendance at all recruitment panels for staff in our mental health services. Associates play an equal role on the panel and bring a valuable perspective on the suitability of our future workforce. Service users and carers are also supported to be involved in the induction and other training for staff and volunteers. The associates have helped redesign the website that now reflects a more inclusive IAPT service that is suitable and reflects people's diverse needs.

## Working with Carers Bromley and the Dementia Hub

Throughout the year a valued relationship has been forged with staff at the Dementia Hub and Bromley Carers. Training has been provided to ensure that staff are able to identify and signpost carers of any age to either Carers Bromley or the Bromley Dementia Hub both of which offer comprehensive information, guidance and support.

## ‘Know your patients story and what matters to you ’

The 5th October 2016 saw Bromley Healthcare Quality Conference at The Warren, with over 70 staff in attendance from a wide variety of services. We were honoured to hear from Tommy Whitelaw a national campaigner who talks openly and passionately about the experiences of carers. Tommy himself returned home to Glasgow in 2010 to his mother, Joan and discovered that she had vascular dementia. His presentation was emotional and thought provoking as we learned about his journey of his caring role and the value professionals play in making a difference to carers and their families. Tommy challenged the audience to consider asking changing the questions such as “what is the matter with you” to “What matters to you” and “who matters to you”.

## Comprehensive assessment and development of an integrated person-centred plan

Bromley Healthcare is committed to staff fully understanding what matters to them. We have included the question within our patient record system.

As well as designing an integrated person centred plan, an interdisciplinary assessment in the format of a comprehensive geriatric assessment incorporates, a person’s medical, social and psychological and functional abilities as assessed by all those that care for them. Compiling a single care summary that reflects achievement of shared goals as well as patients and carers aspirations.

## An example of a personalised care plan

| Personalised Care Plan |  |                 |               |             |    |
|------------------------|--|-----------------|---------------|-------------|----|
| <b>Name:</b>           | <b>Adam Jones (fictitious patient)</b> | <b>Address:</b> | 9 high street |             |    |
| <b>DOB:</b>            | 08.4.1967                              | <b>NHS No:</b>  | 000 000       | <b>Age:</b> | 49 |

| <b>Patient's wishes:</b> | To get out to church  |   |                                      |  |  |
|--------------------------|---|---|--------------------------------------|--|--|
| <b>Carers wishes:</b>    | For Mr Jones to be safe outdoors.   |   |                                      |  |  |
| <b>Goals:</b>            | Within 3 weeks Mr Jones will be able to climb 2 steps and walk to his wife's car and attend church. His leg wound will be infection free and show signs of healing. |   |                                      |  |  |
| Date                     | Problem to Address  | Action  | Responsible Team Member              |  |  |
| 02.12.16                 | Mobility/transfers  | Mobilise in home with a walking stick.  | Jo Henry - Physiotherapist           |  |  |
| 02.12.16                 | Physiotherapy   | Outdoor mobility practice with Rehabilitation Assistant<br>Physiotherapist to provide passive stretching exercise regime and strengthening exercises.<br>Mr Jones to complete exercise sheet provided at kitchen worktop. | Jo Henry - Physiotherapist           |  |  |
| 02.12.16                 | Occupational therapy treatment planning   | Dressing practice with Rehabilitation assistant.<br>To provide bed lever<br>Mr Jones to make a hot drink and toast for him and his wife each morning.   | Karen Smith – Occupational Therapist |  |  |
| 02.12.16                 | Falls prevention plan   | To practice walking outdoors with an aid and supervision<br>To drink 6 cups of tea daily to prevent blood pressure dropping which leads to falls.   | Jo Henry - Physiotherapist           |  |  |
| 02.12.16                 | Personal care   | Occupational Therapist to educate regarding dressing and washing techniques   | Karen Smith – Occupational Therapist |  |  |
| 02.12.16                 | Pain management   | Referred to Consultant for review   | Olu Okeke - Nurse                    |  |  |
| 02.12.16                 | Wound care  | Nurse to visit 3 times a week to dress leg wound.<br>Mr Jones to follow guidance on wound care leaflet regarding eating, drinking, moving, sleep, etc.  | Olu Okeke - Nurse                    |  |  |

|                               |                           |                                  |                           |
|-------------------------------|---------------------------|----------------------------------|---------------------------|
| <b>Further review due by:</b> | 24 <sup>th</sup> Dec 2016 | <b>Estimated Discharge Date:</b> | 24 <sup>th</sup> Dec 2016 |
|-------------------------------|---------------------------|----------------------------------|---------------------------|

## Achieving Baby Friendly Award

Bromley Healthcare has been awarded the prestigious Baby Friendly Award. We decided to join forces with Unicef UK's Baby Friendly Initiative to increase breastfeeding rates and to improve care for mothers.

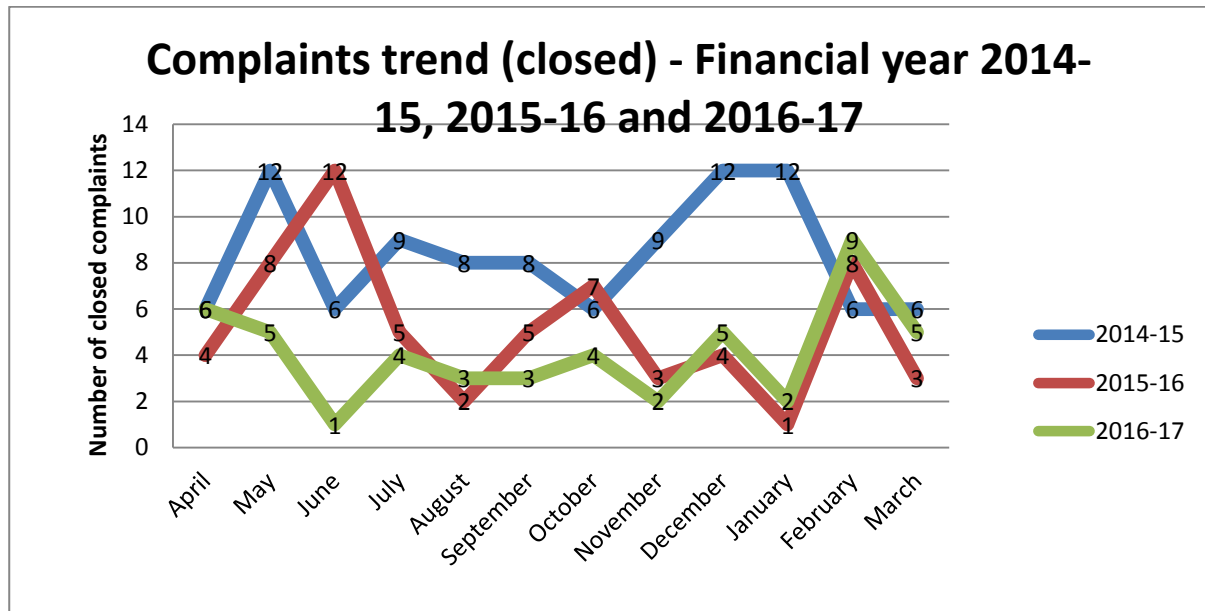
Breastfeeding protects babies against a wide range of serious illnesses including gastroenteritis and respiratory infections in infancy as well as asthma, cardiovascular disease and diabetes in later life. We also know that breastfeeding reduces the mother's risk of some cancers – although mums might be more interested in hearing that it is easier, cheaper and simply less hassle than bottle feeding.

However a mother chooses to feed her baby, she can be sure that she will be supported to form a strong loving relationship with her new-born – through having maximum skin to skin contact and understanding how her baby communicates with her and needs her to respond.

Friendly Initiative Programme Director, Sue Ashmore says "we are delighted that Bromley Healthcare has achieved full Baby Friendly status," She went on to say "surveys show us that most mothers want to breastfeed but don't always get the support they need. Mothers at Bromley Healthcare can be confident that their health visitors will provide high standards of care."

## Complaints

The overall number of complaints and concerns has reduced throughout 2016/17 by 25% from previous years. This has been despite challenges in working with local Bromley patients where there have been changes to service criteria.



## Examples where services have shown learning from complaints

|   |  |
|---|--|
| <b>Delayed referral</b>                               | Following a delay in a referral being processed and an appointment being offered processes around receiving referrals and typing reports have been reviewed and updated. |
| <b>Improve the quality of Respiratory assessments</b> | All qualified staff has been issued with oximeters (blood oxygen saturation measure) to improve the assessment of patients.  |
| <b>Improved communication</b>                         | The card given to patients regarding ringing for their next appointment had been amended to give clearer instructions.   |
| <b>Medication administered by the incorrect route</b> | A MAR chart has was introduced into the patients home which enabled much clearer guidance as to the route of administration  |



## 3.2 Clinical effectiveness – to develop and strengthen care

|   | Service                                     | Target | Achievement |
|---|---|--------|-------------|
| A referral has moved to recovery if the client was defined as a clinical case at the start of their treatment and not as a clinical case at the end of treatment. | IAPT  | 50%    | 51.8%       |
| Patients receive urgent appointments within two weeks   | S&LT  | 75%    | 90%         |
| Children with faltering growth or poor weight gain demonstrate improvements in weight gain  | Children's dietetics                        | 85%    | 100%        |
| Screening mothers at 6-8 weeks for maternal mood  | Health visiting                             | 85%    | 88.4%       |
| Patients starting HAART who have an adherence assessment  | HIV   | 85%    | 94.7%       |
| Maintain ulcer healing rates in <12 weeks striving for an average healing rate of 5.7 weeks   | Tissue viability                            | 95%    | 87%         |
| 20% average improvement in Tinetti scores of patients discharged from the Balanced Lifestyle Group  | Falls                                       | 20%    | 29.2%       |
| Venous Thrombo Embolism assessment on admission to the unit since June 2016   | Rehab beds                                  | 95%    | 100%        |
| Bromley state primary schools participate in the programme to measure heights and weights of reception and year 6 children  | National Child Measurement Programme (NCMP) | 100%   | 100%        |
| Number of eligible reception and year 6 children screened in the previous academic year   | NCMP  | 95%    | 97%         |
| Initial EQ5D assessment within 72 hrs of admission average compliance over 12 months.   | Home pathway beds                           | 95%    | 99%         |

## We will meet the health needs of our community at the greatest possible value

### Health Visitors Ages and Stages Questionnaires

The National assessment tool used for the measure, Ages and Stages Questionnaires, Third Edition, and (ASQ-3™): supports health visitors to identify any early problems in individual children's development leading to effective early intervention, helping to support children to be ready for school and learning, and feed into the child's two year review.

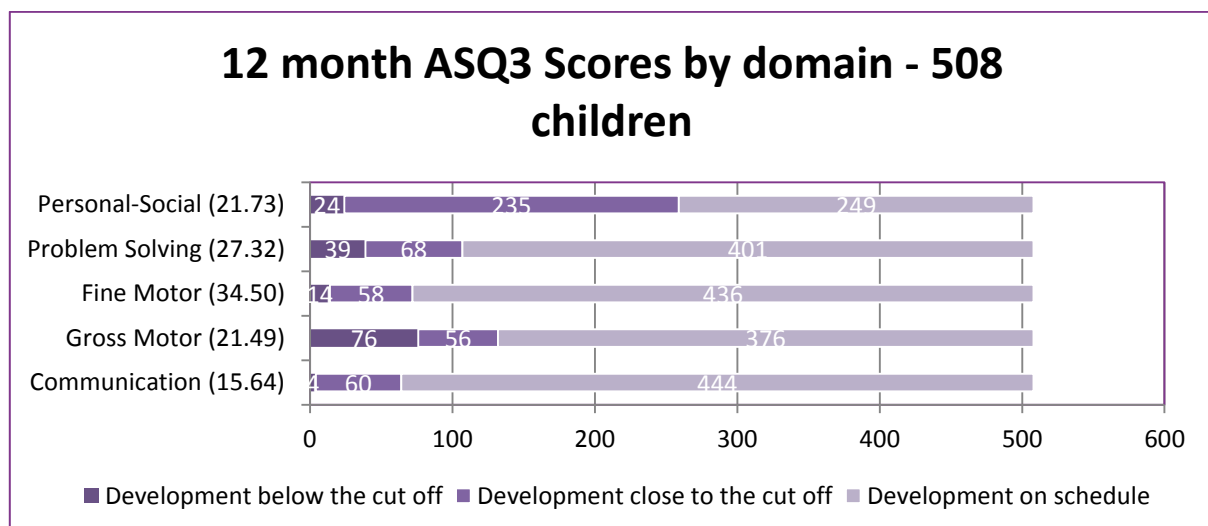
The appropriate questionnaire for the child's age can be posted or given to parents in person, Each questionnaire has 30 questions about the child's development divided into five areas with response options of 'yes', 'sometimes' 'not yet'.

- Communication
- Gross motor
- Fine motor
- Problem solving
- Personal social

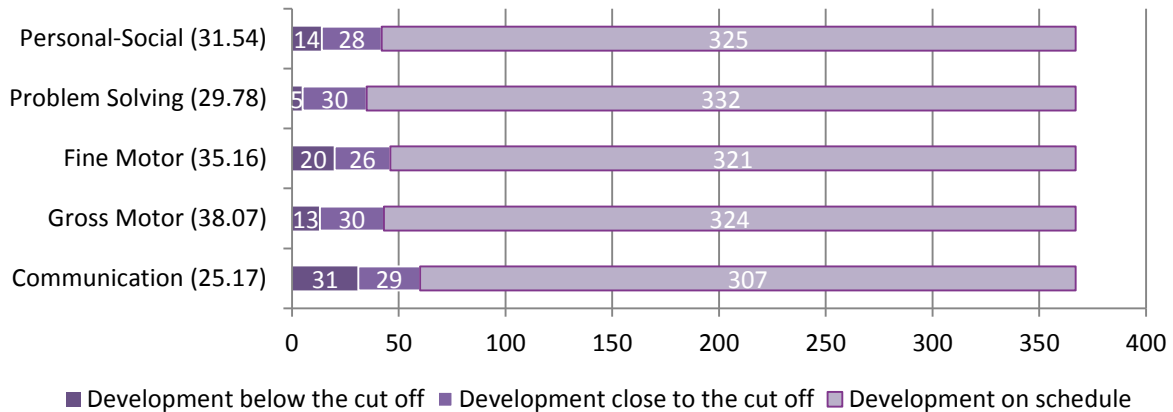
The ASQ-3 results in a score (out of 60) for each area (communication, gross motor, fine motor, problem solving and personal-social) and these are compared to cut-off points on a scoring sheet.

Scores beneath the some cut-off points indicate a need for further assessment; scores above the cut-off suggest the child is on track developmentally

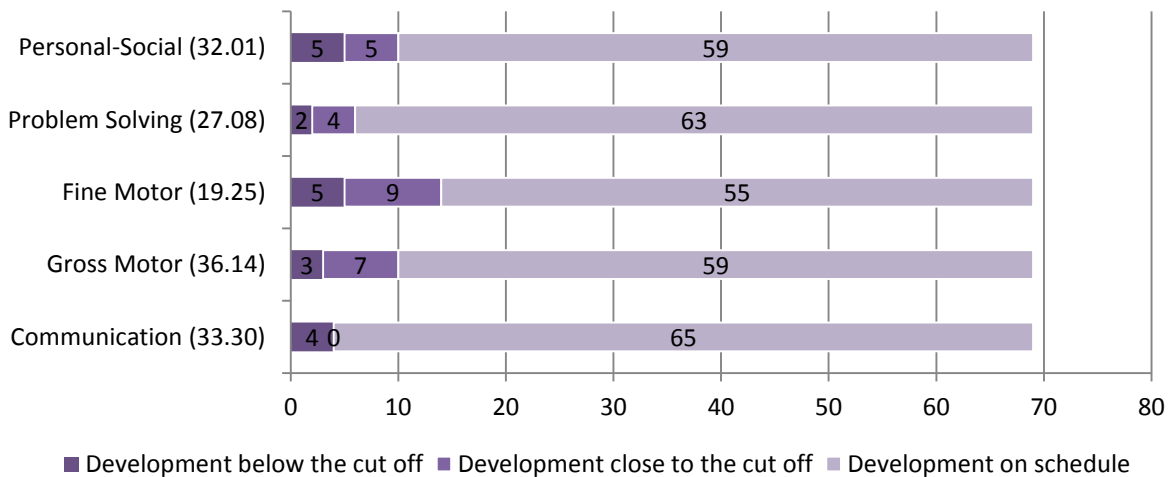
The tables below show that at 12 months of age over 75% amount of children assessed showed that they were achieving their development miles stones. For 24 months this was 87.6% and at 30 months this was 85%



## 24 month ASQ3 Scores by domain - 367 children



## 30 month ASQ3 Scores by domain - 69 children



## Bromley Diabetes service

| Bromley Diabetes Key Performance Indicators      |        |              |
|--|--------|--------------|
|  | Target | Year to date |
| % Urgent same day GP phone call response -wk day | >=95%  | 100%         |
| % Routine 48 hrs phone call response -wk day     | >=85%  | 100%         |
| All BHC patients who have HbA1c recorded,        | 80%    | 87%          |
| All BHC patients who have BP recorded,           | 80%    | 84%          |
| All BHC patients who have Cholesterol recorded,  | 80%    | 76%          |
| Total patients repatriated to GP (APCP)          | n/a    | 135          |
| No. of Patients Completing Desmond Course        | 530    | 565          |
| Patient course completed %                       | 90%    | 96%          |

## Therapy Outcome measure (TOMS)

The TOMS is a standardised tool that measures the impact of a person's condition across four areas:

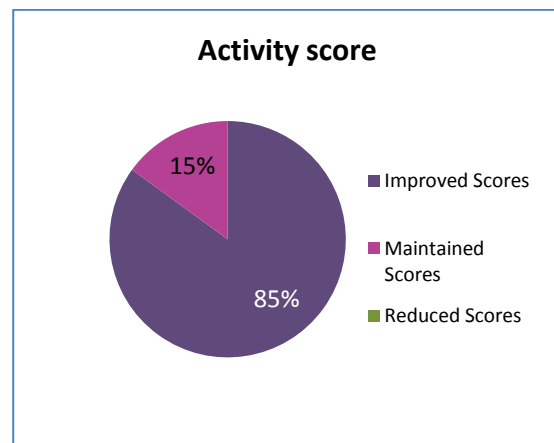
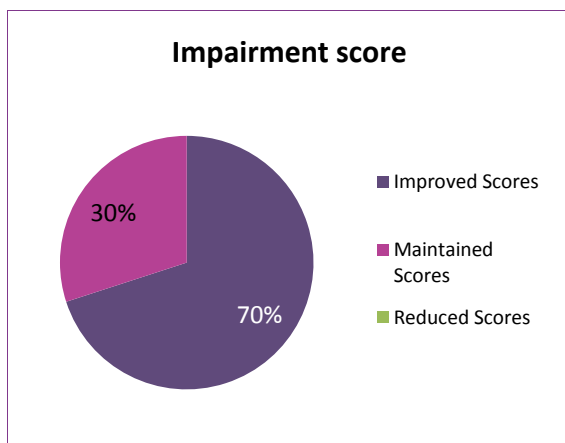
|                      |  |
|----------------------|--|
| <b>Impairment</b>    | (problems in body structure or function)               |
| <b>Activity</b>      | (performance of activities)                            |
| <b>Participation</b> | (impact on daily life roles/interpersonal interaction) |
| <b>Wellbeing</b>     | (emotional level of upset or distress)                 |

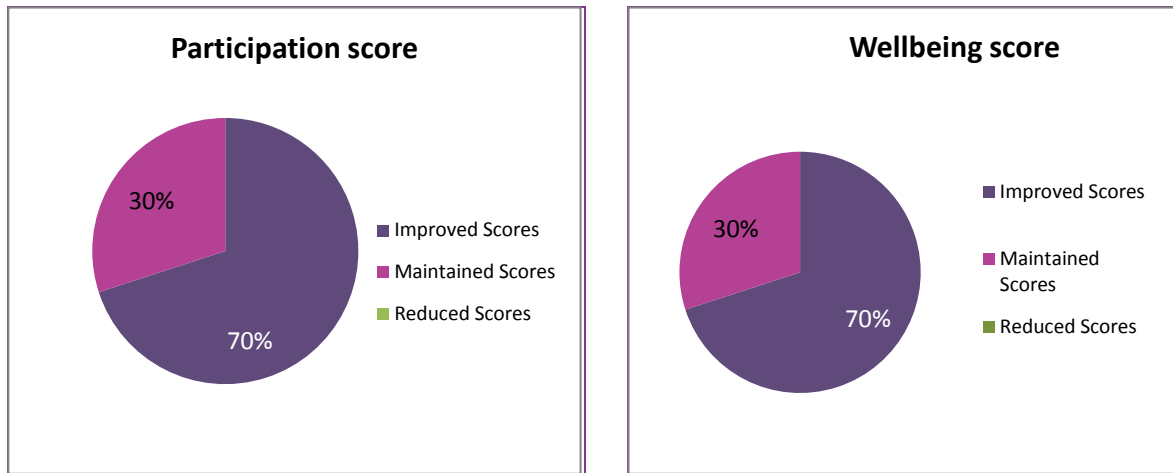
The TOMS tool allows the healthcare provider to measure not only the changes in the person's condition, but how this impacts their daily life, their psycho-social gain and their wellbeing. The tool can also measure the impact the care has on the carer's wellbeing. The holistic tool measures the effect of care on individuals where there may not be a change in the individuals long term or progressive impairment, but demonstrates the Psycho social gain for the individual and their carer through the support, education and care.

Bromley Healthcare staff have worked with the creator of the outcome measure Pam Enderby, to train staff to use the standardised tool. Bromley healthcare have Darzi fellow in post with a focused approach to the development of outcomes used. To date there are 104 clinicians trained in TOMS and nine services piloting the outcome measure.

## Community Adult Physiotherapy service

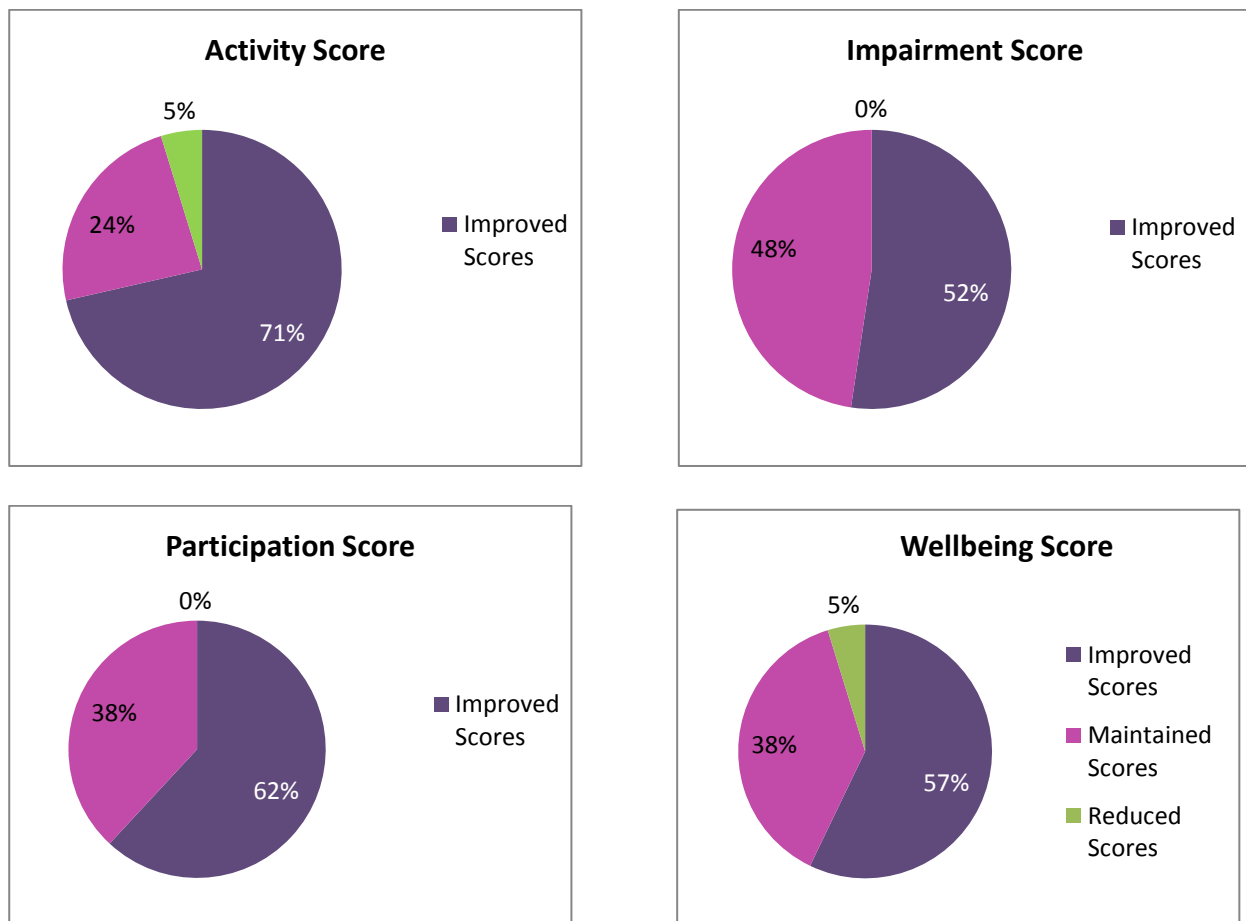
The data below shows TOMs scores recorded by the Adult Physiotherapy service on initial assessment and discharge. This table below demonstrates the number and percentage of patients who had improved scores, maintained scores or reduced scores. This data is derived from 20 patients discharged between Jan to March 2017. Overall improvement shows that 95% of patients improved in at least in 2 or more scores, below shows the breakdown of patient improvement in the individual domains.





## Adult Speech and language Therapy Therapy Outcome measure data

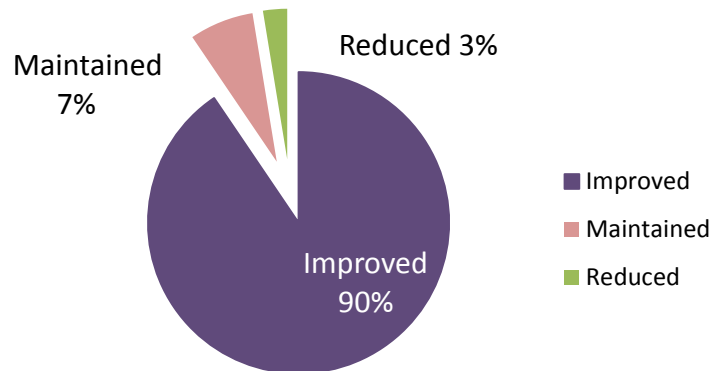
The data below shows the change in TOMs scores for patients with speech Impairment from initial assessment and discharge as recorded by the Adult Speech and Language Therapy service. The final table below demonstrates that 82% of patients improved across at least two domains, with 23% of patients improving across all 4 TOMS domains. Predominantly the TOMS scales used within ASLT are showing that they are scoring patients who have dysphonia, dysphasia and dysarthria. Patients with swallow impairment use a different outcome measure.



## Explanation of EQ5D

The EQ5D VAS score demonstrates the change in the patient's rating of their overall health from the beginning of clinical intervention (assessment) to the end of their episode of care (discharge). The chart below shows where patients improved, maintained and decrease on EQ5D score from admissions to discharges for data collated from April 2016 to February 2017 in Bromley Healthcare's Rehabilitation bedded service.

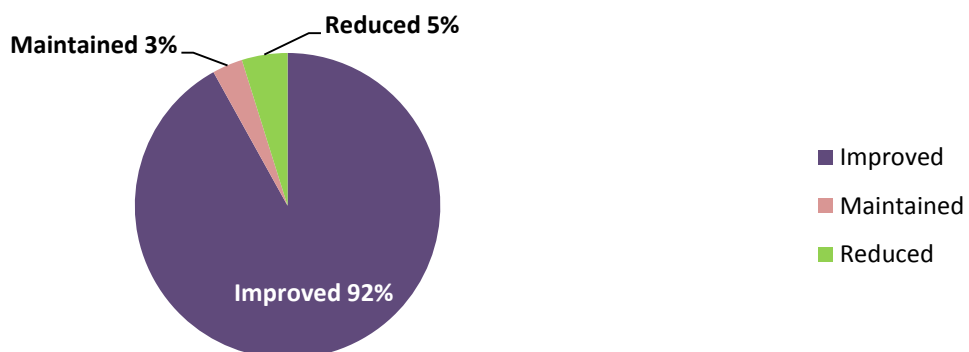
### Rehabilitation Service – Beds EQ5D Visual Analogue Scale



## Modified Barthel Index and Barthel Index

The Modified Barthel Index (MBI) and the Barthel Index (BI) are ordinal scales used to measure performance in activities of daily living (ADL). The Index scales have 10 activities (including mobility, washing, feeding, and continence) which are rated in the scale. The clinician records the patient's performance in the 10 activities of daily living at the beginning and end of intervention. The score of all 10 areas of ADL are collated to give a final score out of 100 (MBI) or 20 (BI). A higher number is associated with a greater likelihood of being able to live at home with a degree of independence. The following chart shows where patients improved, maintained and decreased on the bartel index score. From admissions between September 2016 to February 2017. 92% of patients demonstrated an overall improvement.

### Rehabilitation service – Beds Bartel Index Score



## Community continence team

On 1 October 2017, the new community continence team started transferring the continence care from the District nursing team to the Bladder and Bowel Service. The team look after housebound patients who need a bladder or bowel assessment and, or treatment. Two nurses and a HCA were recruited to this team to provide a more standardised service and increased the quality of assessments. The team provide a dedicated nurse to each integrated HUB so that referrals and communication with the community teams can be more effective and timely. Continence assessments are now performed more quickly and complaints about waiting times for an assessment have decreased considerably since the new team started.

## End of Life Care

A large proportion of Bromley healthcare patients are frail and within the last year of life. We recognise the importance of co-ordinated care between ourselves and hospice colleagues and have been working to develop a shared guidance between ourselves and St. Christopher's. In Bromley 72% of patients, compared to 29% of the national average end their life in their preferred place of care.

Our community teams achieve this by supporting care agencies and carers as well as providing effective care and pain relief to people who are in the last few days of life.

## Integrated care networks- working with GP's

Bromley Healthcare works closely with GPs by engaging with them through the GP link programme. Bromley Healthcare has designated Executive Directors for each GP practice; this enables GPs to have a contact into the organisation at a senior level to ensure that patient care is considered as part of any service change. Additionally Bromley Healthcare has established a GP Reference Group working closely with the Local Medical Committee. This group consists of local GPs and ensure the voice of the GP and local practices is heard in any developments and innovations to Bromley Healthcare services. Dr James Heathcote, a well-established and highly respected local GP has been to serve on the Board as Medical Director. This ensures that the GP voice is integral to our planning and decision making and clinical quality.

Our services work closely with GPs and practices on a day to day basis. For example each practice has a named District Nurse, Community Matron and Health Visitor ensuring close working relationships and continuity of care for patients. Bromley's three Integrated Care Networks (ICN's) brings together a range of health and care services to work in a more joined up way to provide care for patients.

Bromley Healthcare are active participants in this development. Most recently we have been working with Bromley CCG, Bromley GP Alliance, Kings College Hospital Foundation Trust, Oxleas Foundation Trust, Bromley Third Sector Enterprise and St Christopher's on the development and implementation of the ICN's. The first two work streams have been the Proactive and Frailty Care Pathways. Both these pathways are now operational.

## Working with Care Homes - Making Mealtimes Matter

BHC was awarded a health innovation grant in 2016 from the Health Innovation Network for a project involving training in care homes from a Dietitian and Speech and Language Therapist.

We called the project "Making Mealtimes Matter" and the aim was to provide joint training with an integrated approach, empowering care home staff to confidently manage the swallowing and nutrition needs of the residents within their care. In total we trained over 300 staff in 21 nursing homes across Bromley over 6 months.

The results have shown a significant increase (from 15-25% increase) in staff confidence levels across four key areas pre and post training: 1. Feeding someone with swallowing problems, 2. thickening resident's fluids, 3. managing someone who is choking, and 4. completing the MUST tool.

The overall feedback has been really positive and the training has resulted in Bromley nursing home staff improving their skills to be able to manage residents at risk of malnutrition.

## Audit of theoretical understanding of the Mental Capacity Act 2005

Report Author: Deborah Reading (Matrix Training Associates LTD)

Date of Audit: 05.09.2015 – 07.12.2015

Reported to: Claire Lewin – Designated Nurse Safeguarding Adult Bromley Clinical Commissioning Group

The audit was commissioned by Bromley Clinical Commissioning Group (CCG) to evaluate the level of understanding of a provider of community health services commissioned by the CCG. The remit of the audit was in relation to Bromley Healthcare staff's theoretical understanding of The Mental Capacity Act 2005.

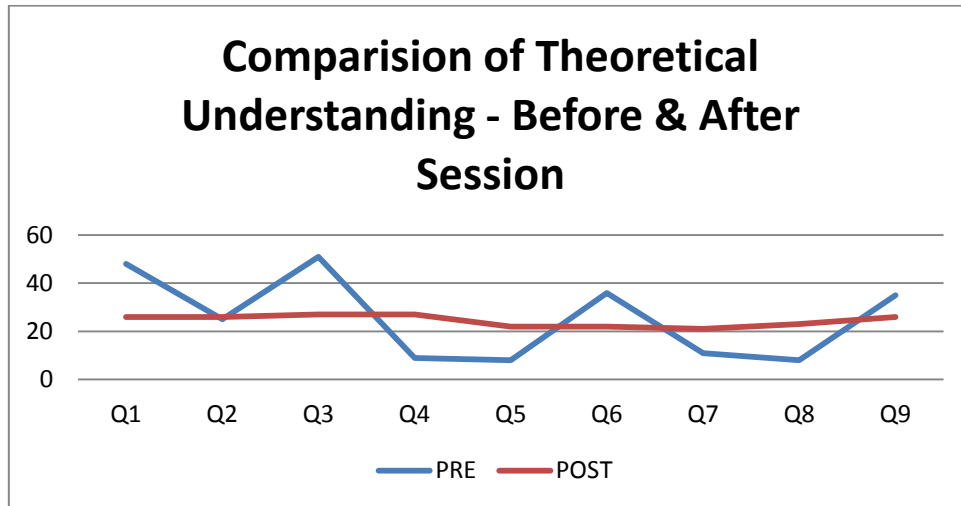
A fundamental element of the commissioning process is that providers understand the Act, apply it to daily practice, have mechanisms in place to monitor their compliance and can demonstrate that the Act is embedded throughout the organization.

An audit was conducted through the completion of pre and post training questionnaires. Post-training questionnaires were sent to participants, following completion of the Mental Capacity Act 2005 Overview session.



## Audit findings

A summary of the findings from this audit are shown in the table below. All questionnaires were audited in relation to the number of correct answers per question, in relation to The Mental Capacity Code of Practice.



| Knowledge baseline | Q1  | Q2  | Q3   | Q4   | Q5  | Q6  | Q7  | Q8  | Q9  | Q10                              |
|--------------------|-----|-----|------|------|-----|-----|-----|-----|-----|----------------------------------|
| Prior to training  | 83% | 42% | 87%  | 0%   | 2%  | 62% | 10% | 14% | 60% | a.21%<br>b.52%<br>c.24%<br>d.11% |
| Post training      | 97% | 97% | 100% | 100% | 82% | 82% | 78% | 86% | 97% | a.60%<br>b.100%<br>c.85%         |
| Total increase     | 14% | 55% | 13%  | 100% | 80% | 20% | 68% | 72% | 37% | a.39%<br>b&c.24%<br>d.74%        |

## Conclusion:

When comparing the level of basic theoretical understanding pre and post training there is a clear increase of understanding across the training session learning outcomes.

### 3.3 Safety – Improve patient safety and reduce harm

Providing safe care to our patients is a priority for Bromley healthcare we recognise that the communities that we work with are all vulnerable, therefore it is essential that from that initial encounter we protect them by having robust ways of working in place as well as having the skills and competencies to recognise quickly when further help is required. To improve safety all staff carry key cards that re-enforce our safety initiatives and how to report incidents.

#### Service-specific patient safety goals 2016-17

| Quality indicator  | Service                              | Target    | Achievement |
|--|--------------------------------------|-----------|-------------|
| Venous Thromboembolism assessment on admission   | Lauriston Rehabilitation Bedded unit | 95%       | 100%        |
| Patients seen for a swallowing problem in the community will be given an eating and drinking plan to reduce the risk of aspiration | Adult Speech and Language therapy    | 70%       | 80%         |
| All clients under 16 have a Fraser competency assessment at each visit   | C&RH                                 | 85%       | 100%        |
| Child protection Medical for suspected physical abuse seen within 2 working days   | Community paediatricians             | 100%      | 100%        |
| Face to face consultations will be completed within 120 minutes  | Medical response team                | 85%       | 95%         |
| Feedback indicates a reduction in the fear of falling.   | Balanced Lifestyle Group             | No target | 75%         |

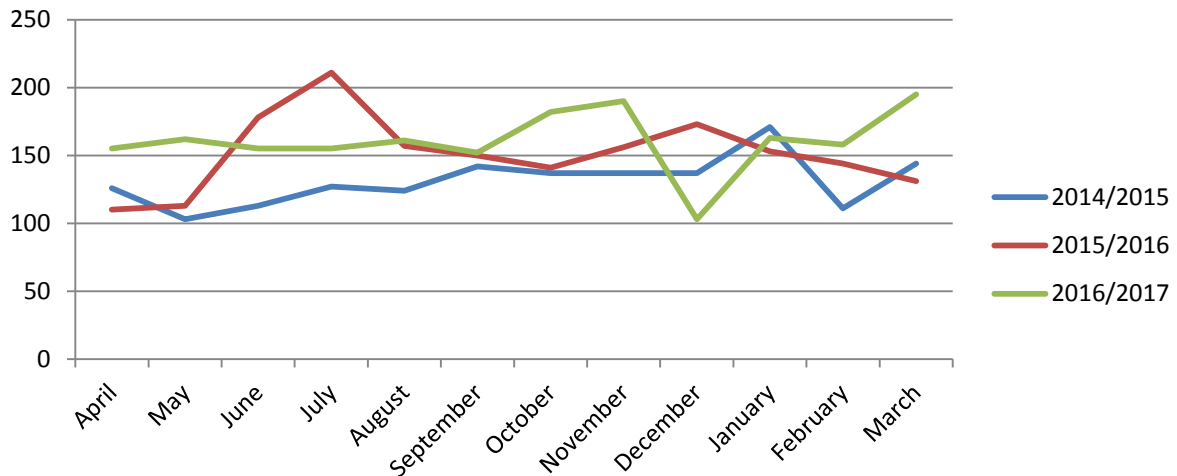
## Patient safety goals for 2016-17

| Quality indicator  | Target | Achievement 2016/17 |
|--|--------|---------------------|
| Zero tolerance for MRSA bacteraemia  | 0      | 0                   |
| Zero tolerance for Clostridium difficile                                   | 0      | 0                   |
| Percentage of patients in Bromley requiring talking therapies intervention | 15%    | 17.3%               |
| Mandatory training   | 90%    | 91%                 |
| Staff are trained in Level 1 safeguarding children                         | 90%    | 99%                 |
| Staff are trained in level 2 safeguarding children                         | 80%    | 87%                 |
| Staff are trained in level 3 safeguarding children                         | 80%    | 98%                 |
| Staff are trained in level 4 safeguarding children                         | 100%   | 100%                |
| Staff up to date with Safeguarding Supervision                             | 90%    | 100%                |
| Staff are trained in Level 1 safeguarding adults                           | 90%    | 98%                 |
| Staff are trained in level 2 safeguarding adults                           | 80%    | 92%                 |
| Appraisal 85%  | 85%    | 87%                 |
| Disclosure and Barring checks  | 100%   | 100%                |

## Incident Reporting – Total number of Bromley Healthcare incidents

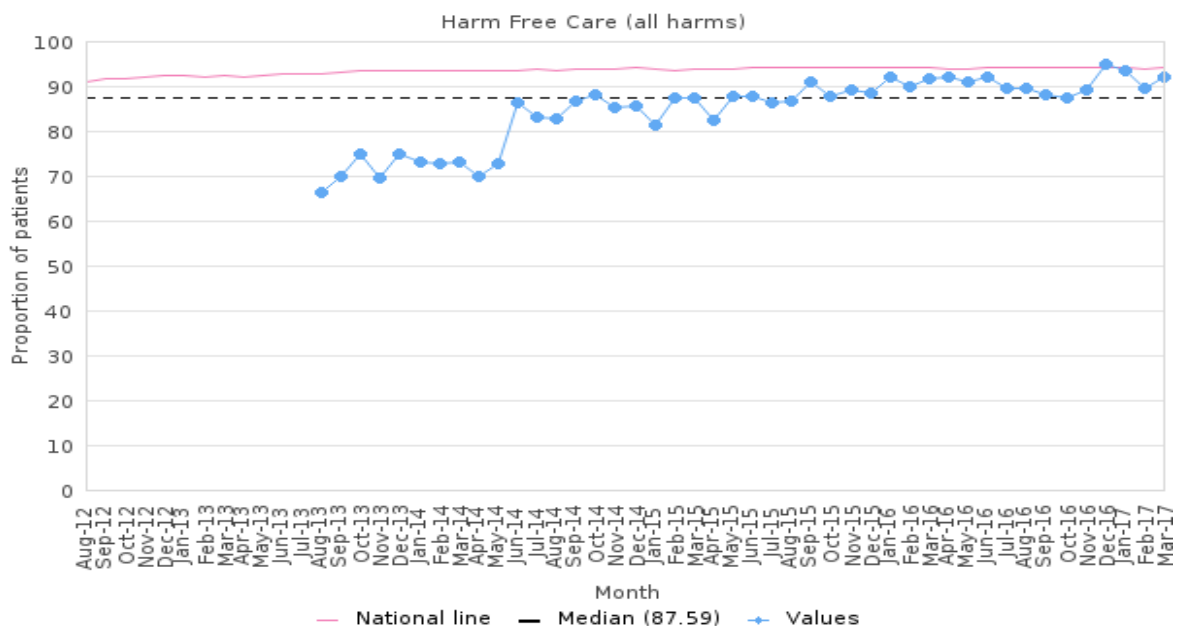
The total number of incidents and safeguarding concerns are monitored through the improving safer care group. There is a trend towards a higher number of reported incidents that continues to rise each year. We believe that this is due to a positive no blame culture and a commitment to share and learn when things go wrong. In 2016/7 Bromley Healthcare had a total of 195 incidents.

### Total Number of BHC Incidents – 01 April 2014–31 March 2017



## National Safety Thermometer results

Bromley Healthcare contributes to the National Safety Thermometer. All organisations are expected to achieve 95% harm free care. This is determined by benchmarks against pressure ulcers, falls, catheter acquired urinary tract infections and VTE incidents across the country. We continue to improve our performance month on month in achieving the 95% target.



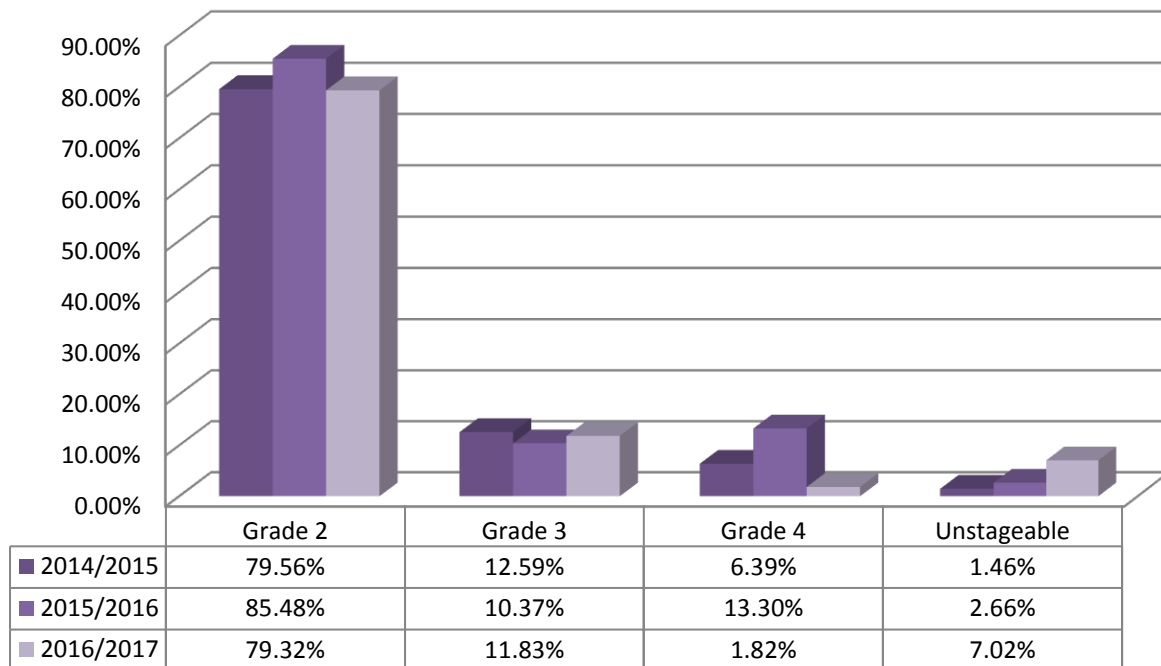
## Achieving zero grade three, four and unstageable pressure ulcers

There is a continued increase in the total number of pressure ulcers reported over the past 3 years which is encouraging as nurses are continuing to be open and honest in their reporting.

The increase has been reflected by the number of unstageable pressure ulcers which is a new category however Bromley healthcare has improved in reducing grade 4 pressure ulcers from 13.3% to 1.82%. We have invested in a pressure ulcer improvement post that has provided additional training and support to staff in grading of ulcers as well as the implementation and embedding of the SSKIN care bundle.

To make further improvements we are working with the CCG and LBB to improve quicker access to equipment and earlier recognition of those who are in their last six months of life. We believe this will also begin to impact on reducing the number of grade two pressure ulcers.

### Percentage of patients with Grade 2, 3, 4 and unstageable pressure ulcers

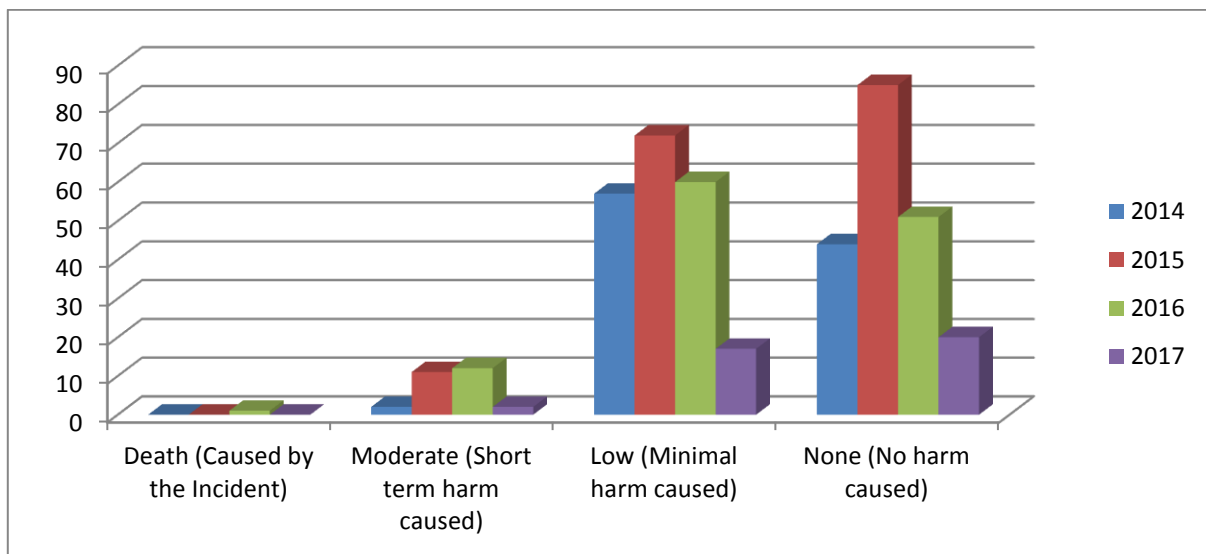


## Implementing actions to reduce avoidable harm

### Falls and Fracture Prevention Service

Bromley healthcare has a commitment to reduce its number of harmful falls by 50% (moderate, severe and death) the total for 2015/6 was 8. There have been 0 severe or death related falls this year. The no harm and low harm falls incidents have also declined over the past year.

#### Falls by degree of harm<sup>1</sup> April 2014 – 31 March 2017



### Balanced Lifestyle Group (BLG)

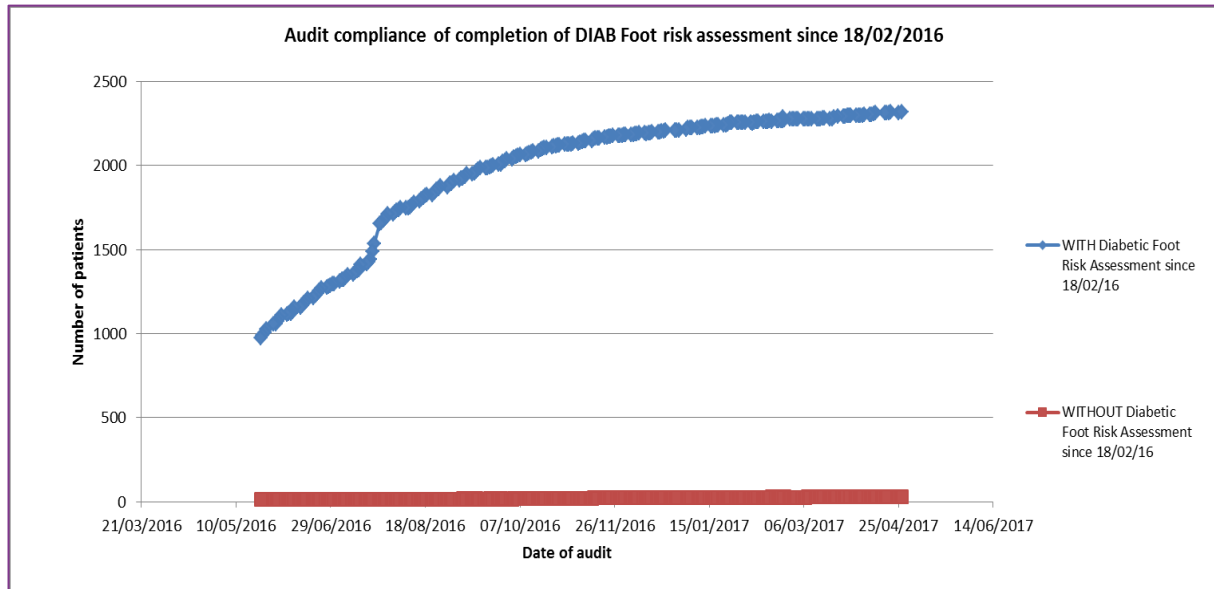
The BLG is therapy led and provides evidence based, safe, effective, life related exercises tailored to individual health, function and fall specific needs, personal goals and interests and to inform how to make positive health and active lifestyle choices that reduce falls risk, improve function and quality of life.

- Improve balance and stability through the provision of a 12 week exercise programme. Plus a supplementary home exercise programme which can be incorporated into everyday tasks and routines.
- Inform and educate participants about falls prevention.
- Reduce fear of falling.
- Assist in adoption of a strategy should a fall occur to reduce the risk of injury or a long lie.
- Reduce falls and the risk of falls.
- Make a long-term commitment to increased levels of physical activity.

Over 200 people have complete the programme to date .The Group provides an enjoyable, social and welcoming atmosphere with a strong group allegiance and sense of ownership.

## Podiatry

The podiatry service has developed an assessment of the diabetic foot assessment tool that reflects the recommendations of NICE Guideline (NG19). The podiatry service receives daily reports on their completion of the assessment and this has improved safety performance. In 2015/6 the department had 3 serious incidents in 2016/17 there have been 0. Compliance in completion of initial diabetic foot assessments was 98.8%.



## Perinatal pathway health visiting

Mental health problems in the perinatal period are very common, affecting up to 20% of women. Examples of these illnesses include antenatal and postnatal depression, anxiety, obsessive compulsive disorder, post-traumatic stress disorder (PTSD) and postpartum psychosis. Without early identification and treatment such problems can affect the mental health and development of infants and children. Whilst suicide in mothers is rare it is important to continue to reduce the likelihood of this occurring by ensuring early recognition and integration in mental health services.

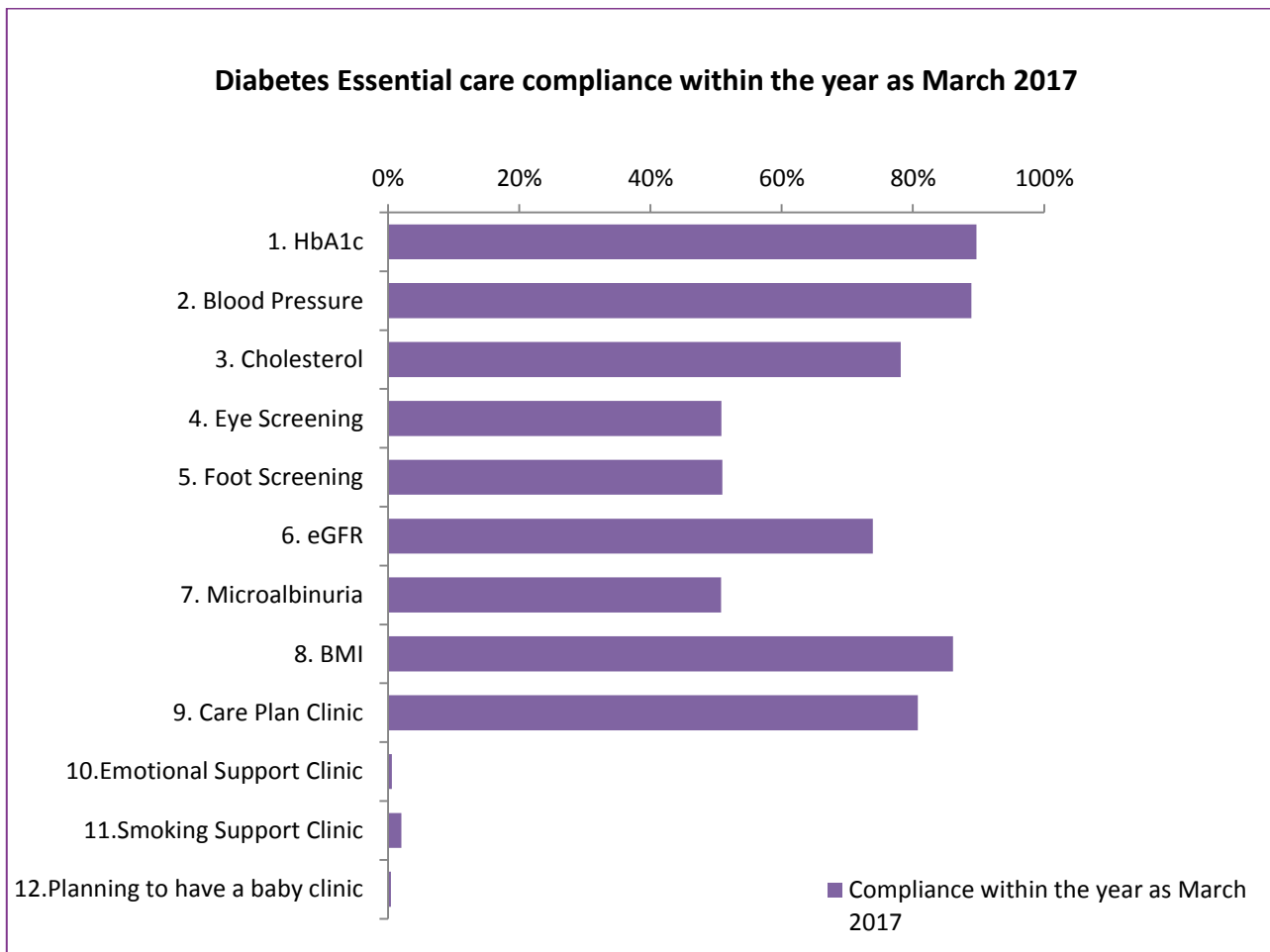
Health visitors working alongside midwifery colleagues are ideally placed to identify women with mental health needs through delivery of the universal Healthy Child Programme which offers routine contacts with clients in the antenatal period; 10-14 days and 6-8 weeks post natal.

To increase identification of perinatal mental illness, NICE Guidance [QS115] Antenatal and Postnatal mental health has been incorporated into local Health Visiting Guidelines as part of a general discussion about mental health and wellbeing.

Health Visitors in Bromley work closely with the Bromley Perinatal service which launched in July 2016; this is an integrated service providing joint clinics within midwifery services as well as working closely with Bromley and Lewisham Mind.

The service provides support for women with mental health needs planning a pregnancy, pregnant or in the post natal period. Health visitors attend a weekly multi professional meeting where new referrals are discussed.

Between September 16 and February 17 Bromley CCG funded additional training for health visitors and midwives to improve skills and confidence in the assessment, recognition and management of mental health disorders in the perinatal period. The service now has a number of '**Perinatal Champions**' acting as advocates and linking women up with specialist services.





## Part 4 Bromley Healthcare - a great place to work

'We will deliver care by the right staff, with the right skills in the right place at the right time '

### Staff and patient representation at Board level

The Staff Governors' play a key role in ensuring staff opinions and insight are heard at Executive and Board level. Any member of staff, who is a shareholder, can be a staff Governor.

Staff Governors meet regularly with the Chairman and Chief Executive, so there is a chance to really share the feelings and thoughts of the staff that we work with.

As a staff shareholder governor it has given me an opportunity to bring the voice of staff to the committee meetings that we attend. This is done on a rota and includes the Board meeting, the Clinical Governance Committee, Commercial Committee and the Audit and Risk Committee. The members of the committee are friendly, welcoming input if you wish but equally happy for you to act as an observer; ensuring that committee members are fair and consider the best interests of the staff and the patients that we see.

### Develop and educational training programme that ensures people have the essential clinical skills to work along patient pathways

#### Apprenticeship Scheme

The recruitment team and other members of staff attended the Greenwich University Student Nurse Recruitment Open day 27 January 2017. The event gave us a chance to showcase the opportunities that Bromley Healthcare has on offer for student nurses. Robert Phillips, Recruitment Manager said;

"We received positive feedback from candidates and organisers and that the event was busy throughout the day with many candidates' engaging and discussing our services."

A dedicated member of staff has been appointed to specifically oversee and support Band 1-4 Development and also to take the lead for the Apprenticeship Project.

#### Careers insight day

The Learning and Development team hosted a clinical careers insight day for local schools on 3 February 2017 at Beckenham Beacon.

Students were welcomed by members of the team, along with a work experience project lead from Health Education England. Bonnie Hutson (HCA) and Ade Okuboyejo (student district nurse) spoke about a day-in-the-life of their roles and gave some practical demonstrations of their skills.

There were also presentations from Allied Health Professionals on their roles and career pathways, along with talks from Natalie Warman and Paul Drury on the benefits (and challenges!) of working in community. The learning and Development team have supported the Health and social care programme by providing a Bromley college student placement.

Staff from Bromley Healthcare manned a stall at Ravenswood School Careers Fair on Wednesday 1st March. The school's head teacher thanked the staff, saying: *"The fair was a huge success, with over 500 students visiting who received advice and guidance ... the calibre of information and the enthusiasm of those presenting made this event both inspiring and motivational and will help [the students] to make informed choices for life after school or university."*

## Work Experience

Since August 2015 Bromley Healthcare has been involved in providing more than 20 students with work experience within various services. These range from school students, people looking into a change of career to those seeking work in the area. We would like to express our thanks to all those who have been involved in providing these opportunities.

## Bromley Healthcare 2016 Health and Wellbeing Survey Results

Bromley Healthcare are working to look after staff health and wellbeing.

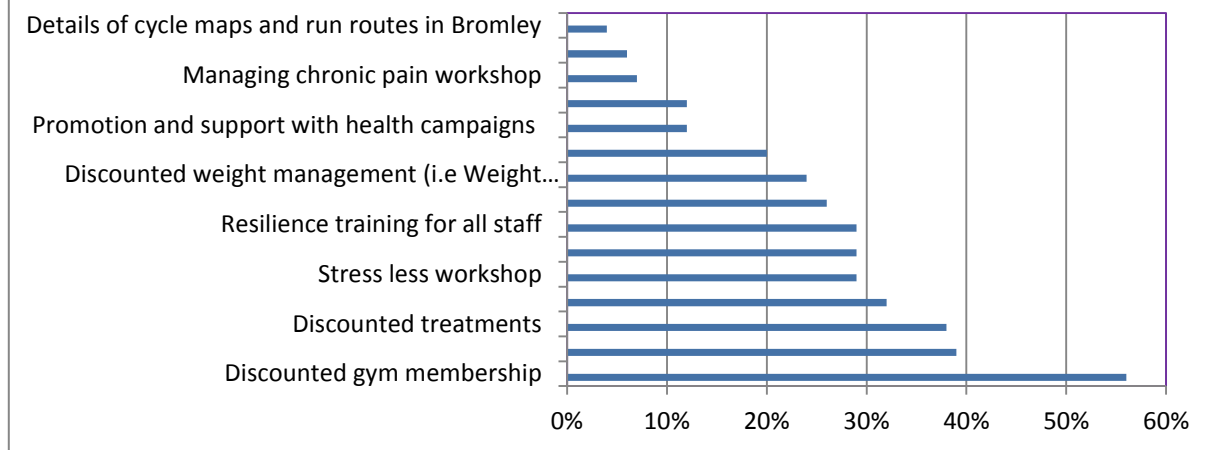
The NHS Health and Wellbeing review found that organisations that prioritise staff health and wellbeing perform better, with improved patient satisfaction, stronger quality scores, better outcomes, and higher levels of staff retention and lower rates of sickness absence.

Our 2015/16 sickness rate figures averaged 4.14%, with anxiety/ stress, gastrointestinal problems, cold/ flu and back problems being the main contributory factors to staff absence.

In order to make Bromley Healthcare a "great place to work", staff were asked to complete a health and wellbeing survey. There were 10 questions.

We are in the process of implementing the top three choices

## Well being Survey Results



| Choices                   | Responses | Staff numbers |
|---------------------------|-----------|---------------|
| Discounted gym membership | 56%       | 91/163        |
| Mindfulness               | 39%       | 64/163        |
| Discounted treatments     | 38%       | 63/163        |

## Workout@Work

The Workout@Work was organised by local community physiotherapists as part of the Chartered Society of Physiotherapy's (CSP) nationwide campaign, it aims to encourage employees to avoid poor work habits and take more exercise. The programme describes how simple changes can lead to a fitter and healthier lifestyle. The Physiotherapy team distributed hand-outs and visited staff with healthy tips and exercises.



## Star of the Month

Nominations for the star and team of the month awards show staff are recognised by their colleagues for the great work they do.

## Awards

### Hollybank - Short-listed for Innovation in Care Award

The unit was short-listed at the L&B Independent Health Sector Awards for their 'My Plan' initiative. 'My Plan' is an individually tailored care plan developed with each young person, their families, carers and healthcare professionals at Hollybank. Each individual has their own 'My Plan' written as if by the young person themselves, using their own words to describe their needs, desires and aspirations, with the help of their Keyworker. These awards receive hundreds of entries so to be short-listed is a very significant achievement. Whilst being piped at the post by the Royal college of Physicians on this occasion well done to everyone at Hollybank.

### Best Social Enterprise

Bromley Healthcare received the **Best Social Enterprise Award** at the annual Bromley Business awards ceremony in November 2016. This award was given in recognition of the pride we take in customer service and the fact that we have one of the highest patient satisfaction scores of any London or national healthcare provider.

The Bromley Business Awards are part of the prestigious London Business Awards celebrating business success and bringing together best practice within the communities.





## Bromley Healthcare Charity

The objectives of the charity are based around providing supportive environments to enable people to learn new skills, build their confidence and feel more positive. The charity currently support five different areas and are doing this in partnership with a range of specialist charities and with the help of volunteers.

Attendance at the clubs and groups is free although a referral from a clinician is required in some instances. This year our plan is for the charity to support local groups to make at least 13,000 connections with local people

### Staff Ball

The Bromley Healthcare charity supports the annual Staff Ball at which a number of staff awards are presented in recognition of the hard work that is carried out by staff throughout the year.

### Sue Chadwick Memorial Award

recognises a commitment and excellence in nursing and it went to Paul Drury, Matron, Lauriston Rehab.



### The Massey Healthcare Assistant Award

This award recognises healthcare assistants who have gone above and beyond their duties, and went to Michelle Samuels - Medical Response Team.

### The Charlotte Hails Unsung Hero Award

This award recognises non clinical colleague's commitment for their part in the smooth running of the organisation, the award went to Julie Miller - Clinical Quality Team Manager.

### The New Technology Award

This award recognises a team or colleague who had made advances in their part of the organisation by implementing the use of new technology that has been introduced. The award went to the EMIS team.





## Charity initiatives

### The Leg Club 4<sup>th</sup> Anniversary

The Leg Club celebrated its 4th anniversary this year and regularly treats up to 25 members every Wednesday afternoon at Mottingham. Our team of permanent and bank staff work together and show a back breaking commitment to great holistic leg care. Each and every clinician cares about each and every member. Because of the close relationships engendered by the social Leg Club approach, members know they can ask for and receive advice on any medical concern they may have. This isn't to say the clinicians can always help, but they're always willing to listen. Raoul Pinnell, Chair of the Trustees of the Bromley Healthcare Charity said "we are delighted to have secured a £5,000 donation from Synapse Electroceutical Limited, a local company who have developed an innovative leg ulcer treatment—Accel-Heal®."

### Charity supports the All Ability Cycling Club

"Having worked with children for the last 16 years I identified that parents under Children's Physiotherapy care sometimes bought expensive trikes or adapted bikes with charity funding, after being encouraged and helped by therapy staff. Once home they found that it was difficult to store and transport these, often mas-sive, pieces of equipment, and they sat idle not being used. Parents also had problems with confidence teaching their children how to ride. So the idea of a club where families could come and use bikes without these difficulties was born. The club has been a huge success and we are hoping to build on this success for future sessions. Watch this space and thank you Bromley Healthcare Charity because without you this would not have happened."



## Statements from Stakeholders

### NHS Bromley CCG

Clinical Chair: Dr Andrew Parson Chief/Accountable Officer: Dr Angela Bhan

#### **Bromley Healthcare Quality Account 2016/17**

Thank you for the opportunity to comment on Bromley Healthcare's quality account for 2016/17. Bromley CCG is committed to working closely with Bromley Healthcare CIC to ensure the ongoing delivery of high quality services for our population. Bromley Healthcare provides a range of community services to the population of Bromley for adults and children in addition to Out of Hours care and rehabilitation services.

#### **Clinical Quality Review Group (CQRG)**

Bromley Healthcare has participated fully in the monthly Clinical Quality Review Group meetings where performance against key quality indicators is measured and reported. In 2016/17 the CQRG received Deep Dive presentations from a number of services including Podiatry, Speech and Language Therapy, Bladder and Bowel Service and the Wheelchair Service.

#### **Achievements and Challenges**

Bromley CCG congratulates Bromley Healthcare on the Unicef Baby friendly Award and the results of external inspections in 2016. The CQC inspection at Lauriston Rehabilitation Unit rated all indicators were rated as 'Good' highlighting the compassionate care provided by the staff. In addition, an Ofsted inspection of Hollybank was also rated 'Good'. The CCG recognises the improvements that have been put into place since 2015/16. The CCG acknowledges that this has been an unsettling year for Bromley Healthcare with the impending re-procurement of community services. It is therefore even more notable that the organisation has continued to improve the quality of care and maintained very positive patient experience scores. Bromley Healthcare has a clear commitment to value and develop its staff and this is reflected in the positive feedback in relation to the commitment of staff. Of note this year is the significant work around reduction of falls and avoidable pressure ulcers. The CCG recognises the culture of listening to patients and learning from feedback and incidents as an example the organisation undertook a major service re-design of the Podiatry service as a direct result of learning from an incident. The organisation has demonstrated a strong commitment to working in Partnership with healthcare providers across Bromley and with the CCG to include a strong voice in the development of Integrated Care Networks and End of Life Care initiatives. We congratulate Bromley Healthcare on a successful year.

**Sonia Colwill**

**Director of Quality, Governance and Patient Safety**

**June 2017**





## **Bromley Healthcare Quality Account 2016-17 Healthwatch Bromley Feedback**

This report is a response from Healthwatch Bromley reflecting on the work and achievements of Bromley Healthcare during 2016-2017. Healthwatch Bromley appreciates the opportunity to comment on the services delivered by Bromley Healthcare within the London Borough of Bromley.

From a Healthwatch Bromley perspective this is a report with a focus throughout on staff, patients and service development. The breadth shows a wide range of work, as well as particular attention on learning from patients and service users in order to innovate and improve the range and quality of services provided by Bromley Healthcare. However, for a lay person, the layout, terminology and order of the quality account may be slightly confusing. Further Healthwatch observations include:

### **Areas of success**

- The inclusion of a personalised care plan is helpful and clear indication for the reader, as well as a useful tool for reference.
- The 'Making Mealtimes Matter' is an excellent initiative in the support to those residents living in care homes.
- Charity initiatives, such as the All Ability Cycling Club, are an excellent example of Bromley Healthcare's work in the community. Healthwatch further welcomes the outreach in local schools and work with children and young people. Healthwatch supports the goal of connecting with at least 13,000 local people.
- Improvements in podiatry services and high levels of compliance with regards to initial diabetic foot assessment are to be applauded.
- With regards to the Friends and Family Test, a 98% positive recommendation figure is a good achievement.

### **Requires improvement**

- Further work around patient satisfaction would be welcomed. Healthwatch would have welcomed a fuller understanding of patient opinion responses to review. It is hard to comment when the statistical data is unavailable or not included to evidence statements. Qualitative data would further help to gauge patient sentiment.

- Further information on the Bromley Healthcare Associates Programme would be useful, as well as a distinction between these public members and the members of the Bromley Healthcare Patient Reference Group.
- Some of the charts, especially those in relation to children and young people are unclear and could do with further clarification and explanation.
- With regards to the Community Continence Team, the quality account states that “assessments are now performed more quickly and complaints about waiting times for an assessment have decreased considerably since the new team started.” This needs to be expanded, with the inclusion of statistical data, e.g. numbers and length of time waited.
- The quality account states that there were a total of 195 incidents reported in the Community Interest Company over the last financial year. For learning purposes, it would be useful for these to be broken down thematically and any subsequent learning demonstrated, similar to the complaints analysis earlier in the account.
- With the ‘how we will improve’ and ‘hitting our targets chart’, the alignment is not always accurate in the two columns and it is difficult to see the correlation between key points.
- 12% seems like a low target for the percentage of patients in Bromley requiring talking therapies intervention. Furthermore, a 50% recovery target for IAPT could perhaps be more ambitious.

#### **Further clarification**

- Recruitment numbers from outreach initiatives would be useful, especially as the vacancy target for the coming year has been left blank.
- Last year there was an emphasis on innovative methods to engage with the service users and obtain constructive feedback, particularly in the creation of a mobile app. However, for this quality account there appears to be a lack of follow up information or detail around numbers engaged. Further clarity around the uptake and public use of the app would be helpful.
- Healthwatch commends the Bromley Healthcare awards for staff members, as a tool for reward recognition. Further information, around staff experience and satisfaction would be helpful. Last year, Healthwatch noted that only 76% of staff agreed that they would feel secure raising concerns about unsafe clinical

practice. It would be useful to compare this to this year's figures, if possible, to mark any improvements.

- Healthwatch would welcome further information around the equalities data of the organisation and any particular work in the community around vulnerable or hard to reach communities. The quality account states that 89.3% of patient's demographic data is captured, yet this is not included in the document.

**June 2017**



# Statement from the London Borough of Bromley Scrutiny Committee

The Scrutiny Committee is responsible for scrutinising health services. Following a presentation of this Quality Account to the Committee by the Director of Nursing, Therapies and Quality Assurance, Natalie Warman on 13<sup>th</sup> June 2017 at the civic centre Bromley, the following statement was issued:

## **HEALTH SCRUTINY SUB-COMMITTEE**

Extract from minutes of the meeting held at 4.00 pm on 13 June 2017

### **Present:**

Councillor Mary Cooke (Chairman)  
Councillor Pauline Tunnicliffe (Vice-Chairman)  
Councillors Ruth Bennett, Ian Dunn, Judi Ellis and  
Terence Nathan

Linda Gabriel and Lynn Sellwood

### **Also Present:**

Councillor Diane Smith, Portfolio Holder for Care Services  
Councillor Angela Page, Executive Support Assistant to the Portfolio  
Holder for Care Services  
Councillor Robert Evans

## **6 BROMLEY HEALTHCARE QUALITY ACCOUNT**

Natalie Warman, Director of Nursing, Therapies and Quality, Bromley Healthcare and Julie Miller, Clinical Quality Team Manager, Bromley Healthcare presented the Bromley Healthcare Quality Account 2016/17 to the Sub-Committee, which outlined the provision delivered by Bromley Healthcare across the Borough during 2016/17 and quality priorities for 2017-2020. There was a statutory requirement for all NHS public funded bodies to provide their Annual Quality accounts to NHS England for publication by 30<sup>th</sup> June 2017, and for this to contain a supporting statement from the Health Scrutiny Sub-Committee.

The Director of Nursing, Therapies and Quality advised Members that there had been three Care Quality Commission Inspections of Bromley Healthcare's provision during 2016/17, all of which been rated as 'Good'. Feedback on customer experience had generally been very positive and there had been a 25% reduction in the number of complaints made to Bromley Healthcare in the past year. For 2016/17, Bromley

Healthcare had made a commitment to listen to the hard-to-hear community and particularly focused on the views of children with communications difficulties. This commitment would be carried forward into 2017/18, when it was planned to focus on the views of patients with dementia or lack of capacity. Bromley Healthcare had continued to work across all key partners throughout the year. A staff survey had not been undertaken, but a number of measures were in place to support staff including a focus on workplace safety and a debt management initiative.

In considering the update, Members generally agreed that the Bromley Healthcare Quality Account 2016/17 was an accurate account of service provision. A Co-opted Member congratulated the Director of Nursing, Therapies and Quality, Bromley Healthcare and Clinical Quality Team Manager for an excellent report.

A Co-opted Member queried what progress Bromley Healthcare had made in becoming 'Dementia Friendly'. The Director of Nursing, Therapies and Quality underlined that becoming 'Dementia Friendly' remained an ongoing priority for Bromley Healthcare, and that 80% of Bromley Healthcare staff had now completed Dementia Awareness Training. An emphasis had been placed on the early recognition of dementia to ensure that patients were signposted to the appropriate treatment, and work was also being undertaken to ensure that patients with end-stage dementia received the support they needed, such as the development of life story resources. Consideration had been given to how the Bromley Healthcare estate environment could be managed to be more accessible to people with dementia, and resources that raised awareness of dementia had been made available on-site including the short film, 'Barbara's Story'. Bromley Healthcare had worked with a range of key partners on the development of the draft Dementia Strategy for Bromley including the Dementia Hub.

In response to a question from a Member, the Director of Nursing, Therapies and Quality confirmed that GPs were able to refer patients with pressure ulcers in the lower extremities for assessment. Following assessment, patients were directed to the most appropriate treatment for their needs which could include the Community Nursing Team or Podiatry Service.

**RESOLVED that the Bromley Healthcare Quality Account 2016/17 be supported by the Health Scrutiny Sub-Committee.**

## Information Governance Toolkit statement 2016-17

We take patient information security very seriously at Bromley Healthcare.

The Information Governance toolkit, which is required to be completed by all organisations working with the NHS, requires us to self-audit thirty nine requirements which are then scored from 0 to 3. These requirements are grouped into one of five categories: Information Governance Management, Confidentiality and Data Protection Assurance, Information Security Assurance, Clinical Information Assurance, Secondary Use Assurance and Corporate Information Assurance. In order to be compliant with the Toolkit, we must be at Level 2, as a minimum, for ALL our requirements. This year, our overall compliance score was 89%, which was down 1% from the previous score of 90%.

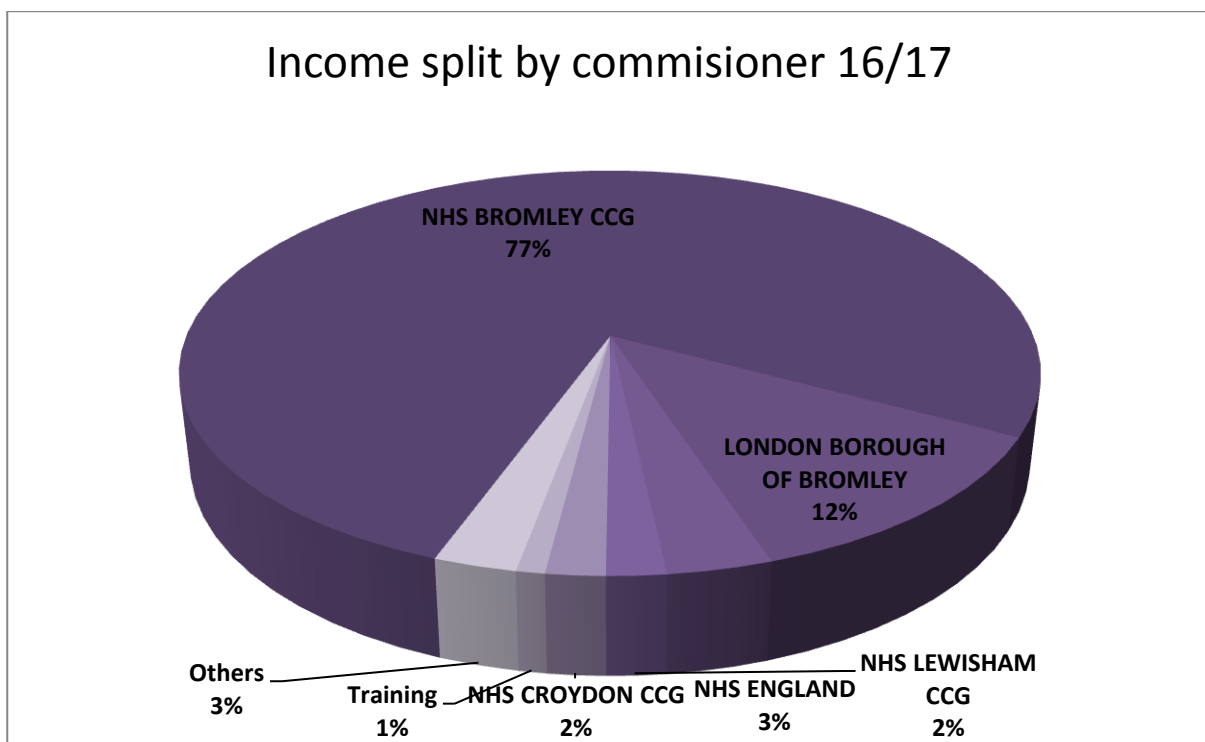
Two categories: Secondary Use Assurance and Clinical Information Assurance both scored **100%** for the second year running.

## Statement of Income

Bromley Healthcare was established as a Social Enterprise on the 1st April 2011 providing high quality NHS care. Since inception, Bromley Healthcare has reinvested over **[£1.75m]** back into its front line services.

At the end of the financial year 2016/17 Bromley Healthcare delivered its financial plan, additional community activity over its contracted baseline and a predominantly green balance scorecard (demonstrating strong financial performance and KPI achievement across services).

Bromley Healthcare received income from the following organisations during 2016/17:



26<sup>th</sup> June 2017

**Statement by a senior employee in respect of the Quality Account 2016-17**

The directors are required under the Health Act 2009 to prepare a Quality Account for each financial year.

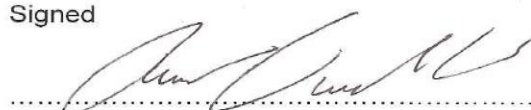
The Department of Health has issued guidance on the form and content of the Annual Quality Account (in line with the Quality Accounts legislation). In preparing their Quality Account, directors should take steps to assure themselves that:-

- The Quality Account presents a balanced picture of the trusts performance over the reporting period.
- The performance information reported in the Quality Account is reliable and accurate.
- There are proper internal controls over the collection and reporting of the measures of performance included in the Quality Account and these controls are subject to review to confirm that they are working effectively in Practice.
- The data underpinning the measure of performance reported in the Quality Account is robust and reliable, conforms to specified data quality standards and prescribed definitions, and is subject to the appropriate scrutiny and review.
- The Quality Account has been prepared in accordance with any Department of Health guidance.

The directors confirm to the best of their knowledge and belief that they have complied with the above requirements in preparing the Quality Account.

By Order of the Board

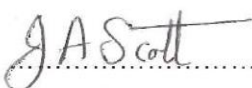
Signed



Date 28.6.2017

Raoul Pinnell

Chairman



Date 28.6.2017

Jacqueline Scott

Chief Executive