



## Bromley Healthcare at a glance

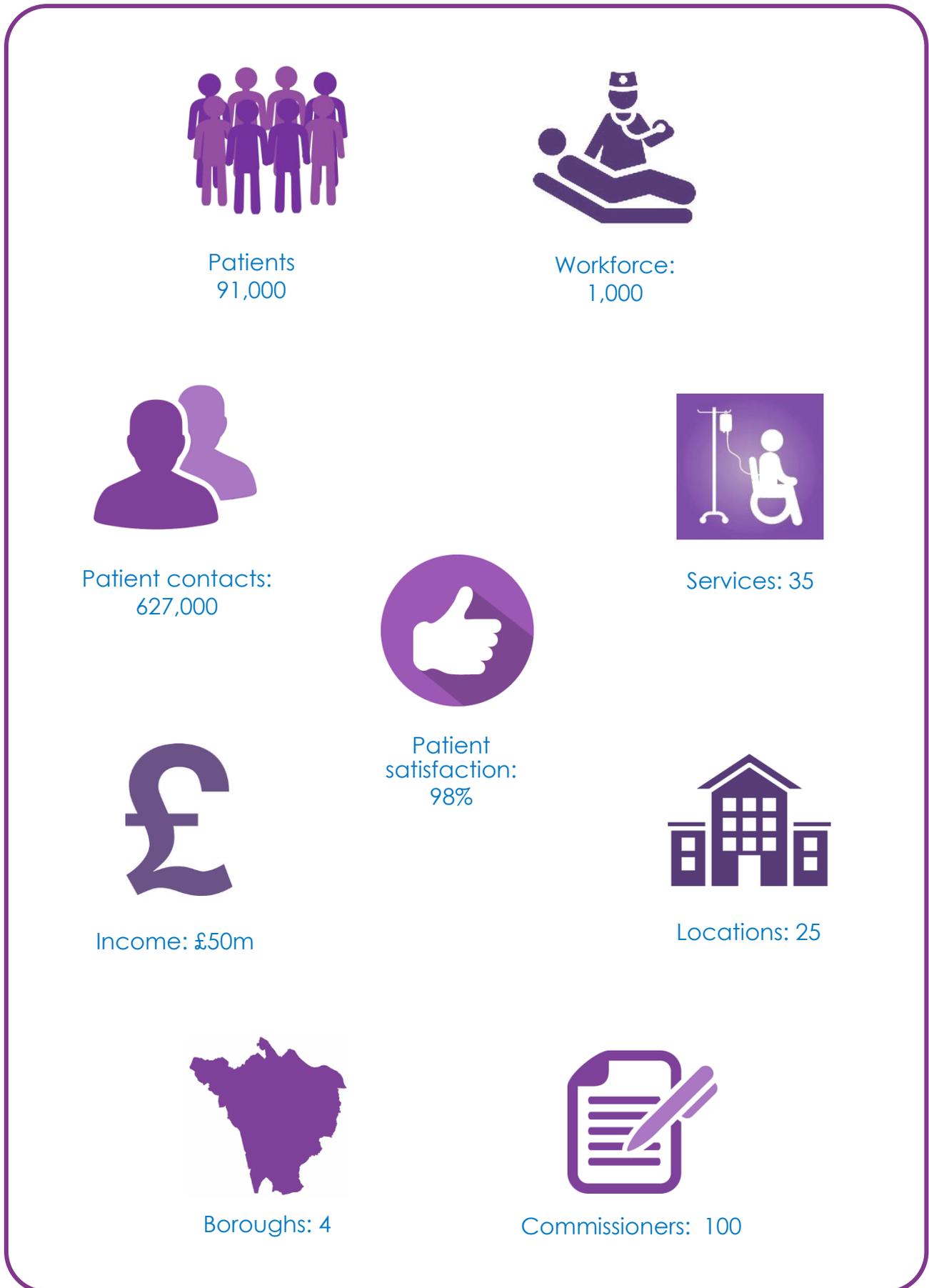
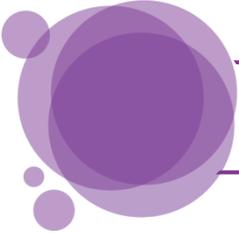
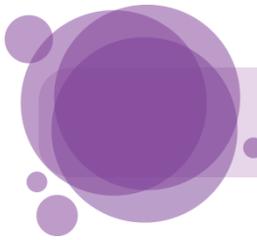


Figure 1.0: Bromley Healthcare at a glance

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## Introduction

Welcome to Bromley Healthcare's 10th Quality Account.

Bromley Healthcare was established in April 2011 as an employee owned social enterprise; we have now grown to employ over 1,000 staff including Nurses, Therapists, Doctors and Dentists. Bromley Healthcare's community healthcare work ranges from helping new parents to care for new born children to supporting the elderly to continue living at home as long as they can, with services including therapy services, health visiting, district nursing, school nursing and specialist nursing.

Bromley Healthcare 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; 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 sector services to ensure that our local community receives the best care for themselves and their families. We are an active partner in the One Bromley partnership where health and social care services are working together with the voluntary sector to provide more joined up and improved care for people who live in Bromley.

### Why are we producing a Quality Account?

All NHS healthcare providers have been required to produce an annual Quality Account since 2010. This requirement was set out in the NHS Next Stage Review in 2008. Although a Social Enterprise the activities Bromley Healthcare undertake are directly commissioned NHS services, therefore we are also obliged and pleased to produce an annual Quality Account.

Our Quality Account is a report about the quality of services provided and is available to the public. Quality Accounts aim to enhance accountability to the public and engage the leaders and clinicians of an organisation in their quality improvement agenda.

The Quality account looks forward to 2020/21 as well as looking back on 2019/20. We are keen to share information with service users, patients and their carers about the current quality of all our services and our plans to improve even further.

### What are the required elements of a Quality Account?

The National Health Service (Quality Accounts) Regulations 2010 specify the requirements for all Quality Accounts. We have used the requirements as a template around which our account has been built.

The Quality Account is laid out as follows:

1

## Part one

Statements from the Chairman and Chief Executive about the Quality Account

2

## Part two

Priorities for improvement – this forward looking section identifies our four priority areas for improving the quality of our services for 2020/21, why we have chosen these priorities and how we are going to develop the capacity and capability to achieve them.

Mandatory statements relating to the quality of our services, as set out in the Quality Accounts Regulations 2010.

3

## Part three

Review of our quality priorities and performance in 2019/20, and examples to illustrate ongoing improvement in our services.

4

## Part four

Statements from our Commissioners, local Healthwatch and our Patient Reference Group.

### How can I get involved now and in the future?

We would like to know your views of our quality account including your thoughts on what we could improve on and positive experiences you have had. If you would like to join our Patient Reference Group or send us any feedback please contact our Patient Experience Lead, Sharon Cranfield at [s.cranfield1@nhs.net](mailto:s.cranfield1@nhs.net)



**District Nursing** – photograph taken prior to the coronavirus pandemic and the introduction of social distancing rules.

## 1

## Statements from our Chairman and Chief Executive

## Chairman's statement – Michael Nutt

As the new Chair of Bromley Healthcare I am delighted to introduce our Quality Account for the year 2019-20. As for all providers of NHS services, this year's Quality Account publication was delayed due to the COVID-19 pandemic.

I joined Bromley Healthcare in August 2020 and have spent much of my first 2 months meeting virtually staff and partners. During these meetings I have been repeatedly struck with the evident enthusiasm and passion with which so many of our colleagues speak of their work – and notably the pride with which they have spoken of their contributions and achievements this year, many of which are detailed in this document. I have been left with no doubt of their engagement with their work, or their motivation to do more.

Though there is so much to be proud about there is no room for complacency. This document notes that quality is not an isolated activity; it is central to all we aspire to achieve. I am delighted to see that our quality improvement objectives for 2020-21 build on the steps taken last year to reduce avoidable pressure sores, reducing the numbers of falls occurring whilst in our care, continuing to drive improvements in record keeping, and further reducing medicine incidents. Fundamental to the successful achievement of these objectives are our clinical dashboards referred to in this document. I have seen many organisations in both the private and public sectors attempt to introduce new management tools such as "real-time dashboards". In healthcare I have not seen better than ours and this is testament to the efforts to design and build it, and of course to the colleagues who have learned to support the system diligently.

During the last year we have achieved much. I would specifically applaud the achievement of introducing the Malinko scheduling system which is now delivering significant benefit to our community nursing teams and further supporting and improving our patient safety dashboard approach. I would also like to acknowledge the work that has taken place to improve our disappointing "requires improvement to be good rating" from Ofsted for our Hollybank children's respite service. I am confident these improvements will be recognised when our next assurance visit can be scheduled.

As a social enterprise Bromley Healthcare encourages innovation. The success and development of the case management pilot and our patient safety dashboards could not have been achieved without the ideas and commitment of colleagues. This innovation at all levels of the organisation is integral to our aim to constantly improve our services

Next year's Quality Account will of course have a strong focus on our ongoing response to the COVID-19 pandemic but it is only right and proper that I take this opportunity to acknowledge how proud I am of the way our organisation has responded to the huge challenge of COVID-19 and I would like to thank all my colleagues for working tirelessly and with such professionalism in these unprecedented times to continue to support our patients.

**Michael Nutt**  
Chairman



## CEO's statement – Jacqui Scott

As we move into our tenth anniversary year, I have great pleasure in introducing our 2019/20 quality account. Our quality account details our quality initiatives and achievements in support of our aspiration to provide the best care possible to our patients, carers and families in the community.



With the unprecedented COVID-19 pandemic, 2020 has proved to be our most challenging time yet as an organisation. Our fantastic Bromley Healthcare team truly rose to the challenge of the pandemic using their skills in the best way possible; almost overnight providing care and support that I am sure they would never have imagined. The good feedback is the cross training between clinicians and the real insight gained into understanding other services as well as the strengthened comradery and bonds across teams. A number of colleagues are retraining following their redeployment during the pandemic.

There have been so many stories of colleagues going the extra mile I have been absolutely over-whelmed by what I have seen and heard. Even though we are unable to host our annual ball and awards ceremony I am pleased that we will still have the opportunity to recognise the hard work and commitment of colleagues albeit through a virtual awards ceremony this year. Some of the key highlights over the last year are:

- The Bromley Covid Monitoring Service was established, within two days, to support suspect Covid 19 Bromley residents. The service provided a 2 hour clinical management response where possible for patients referred from 'NHS 111', a daily support call and a 24 hour hotline. This is an excellent example of devolved leadership working at its best and enabling the clinicians (Community matrons, respiratory nurses, consultant paediatricians and local GPs) develop their service by using video conferencing, oxymeters, rapid response to avoid unnecessary hospital admission and the Talk Together service to support patients who were anxious. The service supported over 3,000 patients during the pandemic and patient satisfaction for the service was over 95%.
- The Single point of access for discharge was built on the foundations of the 24/7 Care Coordination Centre. All hospital discharges requiring community and social care support were phoned directly from the hospital ward to the community clinical triager who was responsible for organising the 'wraparound' community care.
- There has been continued evolution of our 'near live safety dashboards' to support adherence to best practice pathways and quality assurance to proactively promote safety and prevent incidents; the NEWS2 dashboard to support clinicians in the Rapid Response service and the Education Health and Care plan dashboard to co-ordinate and track progress of completion.
- The Biggin Hill case management pilot delivered nurse-led, targeted case management for patients with frailty and multi-morbidity. Initial evaluation demonstrated a reduction in GP consultations, hospital admissions and high levels of patient satisfaction.

Finally and most importantly, I wish to thank our amazing Bromley Healthcare team who continually demonstrate their resilience, compassion and passion in the care and support they provide.

**Jacqui Scott**  
**CEO**

*The information provided in this report is, to the best of our knowledge, accurate and a reasonable reflection of our commitment to quality.*



**Adult Speech and language therapy** – photograph taken prior to the coronavirus pandemic and the introduction of social distancing rules.

## 2

## Our quality priorities for 2020-21

In this part of the report we will focus on 2020-21. Our priorities for improvement reflect our new Quality Strategy 2020 - 2023 and are underpinned by defining quality against the 5 Care Quality Commission (CQC) core standards for a healthcare organisation:

- **Safe**
- **Caring**
- **Responsive**
- **Effective**
- **Well led**

Bromley Healthcare is committed to ensuring and improving the quality and safety of the care we provide. We recognise there is always more we can do which is why we continue to pursue improvements to achieve our key values:

- **We will treat others as we would like to be treated**
- **We will continually improve our services**
- **We will hit our targets**

Our Quality Strategy defines the annual priorities for the Quality Account and the overall aim of it is to ensure we provide high quality community healthcare of which staff are proud and are recognised for.

Our strategy will ensure that patients and their families receive an experience that meets their expectations sustaining Bromley Healthcare's reputation and increasing public confidence. The strategy supports or aims to listen and respond to the views of patients, families and the local community to drive service improvements.

Our priorities for improvement have been developed through engagement with and learning from patients, carers and staff. We have looked at the feedback and learning we have identified over the past year to understand where we need to focus our quality improvement activity.

We have used the domains of quality to ensure we provide:

- **Clinically effective care**
- **Safe care**
- **Services that are caring**

Quality is not an isolated activity; it is central to all we aspire to achieve and to assure and improve the care that is delivered to service users and their families. As such, quality is linked to a number of wider frameworks and initiatives.

The areas of quality improvement Bromley Healthcare is committed to focusing on in 2020-2021 are outlined below with clear outcomes defined and reflecting how we know we have improved.

## Quality Improvement Objective 1:

### **Reduction of avoidable acquired pressure ulcers**

#### Why?

Pressure ulcers are the highest number of incidents that are reported and whilst we know through thorough investigation that we did not contribute to the majority developing we cannot be complacent.

A pressure ulcer working group will be formed to ensure that any areas of improvement are identified and that we have the assurance that we are following best practice guidance.

For year 1 we have agreed the following measures of success:

- Category 4: zero occurrence of avoidable acquired pressure ulcers (PU)
- Emerging themes collated and categorised and actions finalised into PU action plan
- Heel awareness campaign launched
- Care pathways clear and finalised
- Evidence that templates and documentation completed via PU weekly meeting
- Pressure Ulcer audit shows improvement
- Bromley Healthcare forums used as vehicle for dissemination
- Evidence at team meetings
- 100% RCA completed on time
- Review of identified staff
- 90% compliance of patients

## Quality Improvement Objective 2:

### **Reduce the number of patients who fall whilst under our care and ensure the appropriate interventions have been completed**

#### Why?

We have a high number of incidents reported that relate to falls – often these are not witnessed as they have occurred in patients homes but we need to make sure that we are ensuring that we put things in place to prevent it happening again if possible.

For year 1 we have agreed the following measures of success:

- Clear improvement actions defined and systems to measure in place
- Falls Lead can evidence progress against role objectives and all services are aware of who this is
- Falls policy ratified
- Fall Audit undertaken and outcomes reflected in actions
- Report reflecting Bromley Healthcare position vs best practice shared at Falls Group
- Intelligence from local and national networks shared -training compliance has clear trajectory plan
- Clinical documentation fit for purpose
- Demonstrable reduction in number of patients who fall or evidence not avoidable
- Falls care pathways clearly defined

### Quality Improvement Objective 3:

#### **To Improve the standard of clinical record keeping**

##### Why?

Sometimes when we investigate incidents or near misses or through audits the clinical records need improving. We need to understand what is preventing clinicians from completing them so this requires a system wide review

For year 1 we have agreed the following measures of success:

- Improvement actions defined and shared
- Record Keeping Lead progress against objectives
- Monitoring systems evidenced
- Improvement in Record Keeping standards demonstrable
- Record keeping monitored at 1:1s

### Quality Improvement Objective 4:

#### **Reduce the number of Medicines incidents causing harm**

##### Why?

Between April 2019 and March 2020 6% of all Bromley Healthcare reported incidents related to medicines. The key areas of concern relate to either the wrong dosage or medications not being administered however this is more prevalent when patients are discharged home from hospital into our care and Bromley Healthcare colleagues then highlight the errors.

We still need to ensure that all staff are following best practice and work with partners to reduce the number of incidents.

For year 1 we have agreed the following measures of success:

- Clear improvement actions defined and systems in place to monitor
- Head of Prescribing and Medicines Management thematic report available that ensure links to action plan
- Audit plan underway and outcomes shared
- Staff competence 100%
- Medicines reconciled and process of reporting in place
- Incidents reduced by 50%
- All staff aware of lessons learned

## Statements relating to quality of NHS services provided

In this section of the report we will make several statements relating to the quality of the services we provide. This allows direct comparison with similar organisations and service users and commissioners can be assured that we are a quality focussed organisation who are engaged in many activities linked to quality improvement.

### Review of services

During 2019/20 Bromley Healthcare provided a range of community health services across Bromley, Bexley, Lewisham, Greenwich and Croydon providing some 600,000 patient contacts.

During 2019/20 Bromley Healthcare provided 35 NHS services. Bromley Healthcare has reviewed all the data available on the quality of care in all of these NHS services. The income generated by the NHS services reviewed represents 100 per cent of the total income generated from the provision of NHS services by Bromley Healthcare for 2019/20.

## Participation in clinical audits

### Local audits

Local audits are important in measuring and benchmarking a range of activities against agreed markers of good professional practice, stimulating changes to improve practice and re-measuring to determine any service improvements. Robust audit also contributes to assuring both our commissioners and regulators of the quality of services being provided. Clinical audit is just one quality improvement tool. An audit programme should reflect priorities for services and organisations and should be informed by various intelligence such as complaints and incident data and the patient experience. Therefore, our audit programme can be added to at any point throughout the year and not all audits will be completed within a financial year.

Bromley Healthcare services completed 61 clinical audits in 2019-2020 (which include our annual record keeping audits).

Examples of clinical audits during 2019-20 can be found in the table overleaf.

Audit title and aim of the audit	Key findings	Action Plan / Recommendation
<p><b>Controlled Drugs Audit</b></p> <p>The audit aims to ensure the safe and legal ordering, administration, record keeping storage and disposal of Controlled Drugs (CDs) within rehabilitation bedded unit, in line with legislation and national guidelines.</p>	<p>Full compliance (100%) was achieved in the following areas:</p> <ul style="list-style-type: none"> <li>• Standard operating procedures – accessible on intranet</li> <li>• Storage of CDs – double locked in cabinet in treatment room – cupboard small and cramped lead nurse to look into purchasing a larger internal cabinet</li> <li>• Recording and investigating concerns – all on DATIX and fed back to staff at meetings.</li> <li>• Destruction of CDs – medication returned to Pharmacy with signature of driver and nurse against each item returned.</li> <li>• There are specimen signatures for all nursing staff who sign in the CD book.</li> </ul>	<p>1. Staff informed of the outcome of the audit and them keeping up good standards.</p>
<p><b>An audit of adherence to the new criteria for discharge/ follow up for Community Paediatric services</b></p> <p>To assess the rate of adherence to new discharge/follow up criteria and to identify any areas of non-adherence which may indicate required alterations to the criteria.</p>	<p>216 patients included:</p> <ul style="list-style-type: none"> <li>• 30% of patients seen were discharged</li> <li>• 9% were placed on SOS list</li> <li>• 79% of consultation outcomes were concordant with criteria                             <ul style="list-style-type: none"> <li>– Of the 42 cases that were not concordant, 13 (32%) were placed on SOS list and 28 (66%) were not discharged when the criteria indicated discharge. In 17 (40%) of these cases, there was a clear reason documented.</li> <li>– Common reasons for non-discharge were new diagnoses of ADHD, patients considering melatonin, and those repeating or awaiting questionnaires,</li> <li>– Of the 19 CCDS feedback meetings, 9 children were discharged, 1 was placed on the SOS list, and 9 were not discharged. Of these, 6 were not concordant with criteria, with 2 having clearly documented reasons.</li> <li>– 20 patients were discharged to SOS. 13 of these were not concordant with criteria, for a variety of reasons.</li> <li>– There was wide variation between doctors in discharge rates (0-47%) and concordance with the criteria (71-100%). Low discharge rates were not due to low concordance, but low concordance may be associated with lower discharge rates.</li> </ul> </li> </ul>	<p>1. Discharge criteria were amended as per the audit findings and discussion in departmental meeting.</p>
<p><b>Prescribing of broad spectrum antibiotics in Out of Hours GP Service</b></p> <p>- To promote and evaluate adherence to antibiotic prescribing in accordance with existing NICE and Bromley Clinical Commissioning Group Antimicrobial Guidelines.</p>	<ul style="list-style-type: none"> <li>• The Prescribing data for the months of April-September 2019 showed that 480 prescriptions for antimicrobials were issued that quarter, of which 53 were a fluoroquinolone, cephalosporin or co-amoxiclav (11%). This is above the 10% target and above the 8.7% Bromley CCG average (as of August 2019). This may reflect more complex cases seen in care homes etc. that are more frequently seen by the out of hour's service in comparison.</li> <li>• Broad spectrum antimicrobials were prescribed in 53 cases. See table below. The indication was not clear in 3 prescriptions on review on documentation of the consultation (5.7%).</li> </ul>	<p>1. Report shared with all the prescribers to remind them of examinations and records that need to be recorded with respect to antibiotic prescribing as well as recommendation in Bromley CCG prescribing guidelines.</p>

<p>- To support clinicians in promoting quality improvement by reviewing antimicrobial prescribing by Out of Hours GPs.</p>	<ul style="list-style-type: none"> <li>• Appropriateness - Prescribing in UTI: Broad spectrum antibiotics were prescribed for UTI only in 23 cases of which 11 had a previous trial of another antibiotic. None of the entries made reference to consideration of previous MSU.</li> </ul>	<p>2. To ensure all prescribers complete the target toolkit antibiotic stewardship training.</p>
<p><b>Quality Improvement Project of follow up times in ADHD Medication clinic in Bromley Community Paediatrics</b></p> <p>The aim of this project was to compare the achieved follow up times in the old and new clinic format.</p>	<ul style="list-style-type: none"> <li>• The proportion of new patient's in the Neurodevelopmental clinics were high at 50%, so the follow up data was calculated excluding this group as they were not relevant to the analysis.</li> <li>• Analysis showed that the percentage of children having their follow up appointment within 1 month of the proposed date was 12.9% in the old format ND clinics. This increased to 44% in the new ND clinic and was 30% in the new format ADHD clinics. This is a significant increase in achievement of desired follow up times in both clinics once the format was changed.</li> <li>• Similarly, the percentage of children waiting more than 4 months after the proposed date for their follow up was 58% in the old format ND clinic. This dropped to 15% in the new format ND clinics and was only 11% in the new ADHD clinics.</li> </ul>	<p>1. ADHD clinic attendees will receive an additional reminder the day before their appointment.</p> <p>Recommendations:</p> <ul style="list-style-type: none"> <li>- To reassess the data in 12-18 months times after the additional clinic has been started, to monitor change in follow up achievement rates and to include data on WNB/ cancelations/ unfilled clinic slots.</li> <li>- To initiate more new format medication clinics in order further reduce waiting times.</li> </ul>
<p><b>Parental feedback on telephonic consultations (Community Paediatrics)</b></p> <p>To obtain parental feedback on telephonic consultations.</p>	<p>Feedback was received from 61 parents.</p> <ul style="list-style-type: none"> <li>• A total of 84% parents found the consultations either useful or very useful.</li> <li>• 51% of them wanted us to use those consultations definitely in future.</li> <li>• 31% were unsure.</li> <li>• 18% did not want telephonic consultations to be used in future.</li> </ul> <p>Use of video consultations and good quality phone signal were the most commonly made comments to improve the quality of those consultations. A number of parents also commented that a combination of face-to-face consultations and telephonic consultation should be used in future.</p>	<p>1. Service to continue to use telephonic consultations in future, when clinically appropriate.</p> <p>2. Each doctor will be given their individual data for their own reflection.</p>

## Statements from the Care Quality Commission (CQC) and Ofsted

Bromley Healthcare is required to register with the Care Quality Commission and its current registration status is full and unconditional.

The Care Quality Commission (CQC) has not taken enforcement action against Bromley Healthcare during 2019/20. The organisation has a Nominated Individual and Registered Manager who works with the CQC to ensure that services are compliant with the five essential standards of care: Safe, Caring, Responsive, Effective and Well Led.

The CQC have been invited to attend some of our governance meetings including our Board meeting as well as regularly meeting with the Chief Executive Officer, Director of Nursing and Safer Care and Operations Director. During our most recent visit in 2016/17, the CQC published reports on the following services we provide:

### CQC Beckenham Beacon inspection result

In November 2016 (our last inspection date), the service achieved an overall rating of **Good**:

Safe	Good
Caring	Good
Responsive	Good
Effective	Outstanding ☆
Well Led	Good

The inspectors stated that:

**‘Staff continually sought to exceed the expectations of patients and their relatives by providing individualised care that improved their social wellbeing as well as meeting their physical needs.’**

**‘Staff provided a caring; kind, and compassionate service and we received positive comments from patients.’**

**‘We saw positive local leadership within the service and staff reflected this in their conversations with us. Staff were supported in their role and had opportunities for training and development. There was a positive culture in the service and members of staff said they could raise concerns with the leadership team.’**

### Ofsted inspections at Hollybank Children’s Respite Service

Hollybank, our short break service for children and young people with complex needs had a full Ofsted inspection in August 2019. Disappointingly the service received a requires improvement to be good rating in the 3 assessed categories:

Overall experiences and progress of children and young people	Requires Improvement to be good
How well children and young people are helped and protected	Requires Improvement to be good
The effectiveness of leaders and managers	Requires Improvement to be good

The Inspector noted that there are no serious or widespread failures that result in the children's welfare not being safeguarded or promoted. The Inspector made 11 recommendations of actions to be taken which were all completed within the defined timeframe. The main theme of the inspection was around the format of the monthly Regulation 44 report to Ofsted which includes sections on team working, staffing levels and child experience. This has now been amended. Hollybank did not have its expected follow up inspection as a result of the COVID-19 pandemic. Assurance visits commenced nationally from 1<sup>st</sup> September with visits being prioritised on the most recent inspection judgement.

Since our last inspection in August 2019, we have appointed a new Independent Visitor who visited 3 times before lockdown. Her summary has been that the home is very positive, and that staff are caring and well trained. We have also recently appointed a new Deputy Manager post and new Registered Manager starting in October 2020.

Hollybank routinely receives positive feedback from parents and service users. Some examples of feedback received during 2019/20 are detailed below:

**“Hollybank staff are like Angels, thanks to the whole team”**

**“I have seen a lot of positive changes in behaviour, since returning back home from Hollybank”**

**“I really appreciate everything Hollybank have done for my son”**

**“Thank you so much for your help regarding extra nights at Hollybank to enable me to work. I was so stressed about this; I really appreciate you and the team. I would be lost without you. Much appreciated indeed, a bit emotional, happy for the way you have supported us during this difficult time. It makes life a bit better; please pass my appreciation to all the team at Hollybank. I can't thank you enough”**

**“Thanks to the team for the fabulous care and support provided by Hollybank the team have gone over and above what was expected to support this young person”**

**“Thank you for all your support and looking after my young person. I know at times this impacted on the team and you all went that extra mile to ensure that he felt cared for during what was a difficult time for him. You're a fab team and your efforts are much appreciated”**

## Data Quality

We accept responsibility for providing good quality information to support effective patient care. We comply with NHS information governance processes and are supported by our Medical Director who is our designated Caldicott Guardian and the Commercial Director who is the Senior Information Risk Officer (SIRO).

The majority of our services continue to use electronic record keeping through EMIS which provides a single information system and significantly reduces the number of times a patient is required to give personal information because relevant data can be shared electronically between the clinicians involved in their care. All of our clinical systems are brought together in our Business Intelligence reporting suite. This suite uses Alteryx to mine, standardise and blend the data from all sources, which enables our informatics team to report seamlessly across all systems and for all services

### Data Security and Protection Toolkit attainment levels

The year 2019/20 was the second year of use for the new version of the Information Governance Toolkit. The Data and Security Protection (DSPT) Toolkit is based on the National Data Guardian's 10 Data Standards. This toolkit focuses heavily on Information and Cyber security.

Unlike the previous toolkit, which had 3 levels of achievement, the new DSPT toolkit simply has Mandatory or Non-Mandatory requirements, with organisations being required to meet ALL the mandatory requirements in order to pass. Therefore, unlike previous years, there is no scoring to compare against. Bromley Healthcare met all the mandatory requirements including training which was fully compliant against the 95% requirement.

The DSPT was reviewed by the Commercial Director (Senior Information Risk Owner) and signed off by the Chief Executive prior to submission.

### Clinical coding error rate

It is a requirement of Quality Accounts to report on Clinical coding error rates. Clinical coding is a process which translates the medical language of patient's records into an internationally recognised code describing the diagnosis and treatment of a patient. Bromley Healthcare is not currently subject to the Payments by Results clinical code audit.

## Participation in CQUIN

The Commissioning for Quality and Innovation (CQUIN) programme for 2019-20 was developed and agreed by Bromley Healthcare and our commissioners, Bromley Clinical Commissioning Group, based on data intelligence from varying sources and stakeholders.

The indicator goals for the local programme were agreed with the Commissioners to address areas identified for improvement or development. Progress against CQUIN's is shared internally with the Executive and Quality and Performance Committees. All CQUINs are reported to local commissioners on a quarterly basis as part of CQUIN monitoring.

Further summary information on each CQUIN indicator can be found below.

## CQUIN: Falls

### Summary

This CQUIN focussed on improving the information recorded with our Emis clinical information system of patients at risk of falling to support patient safety.

### Results

Amendments have been made to the clinical assessment templates to capture a more holistic and robust therapy assessment. E-Learning platforms are currently under investigation and development, with a view to increasing the knowledge and understanding of falls risk across all staff within Bromley Healthcare. This includes recording risk of falls to encourage earlier identification across the organisation

## CQUIN: Development of a live safety dashboard for Education Health and Care Plans (EHCP)

### Summary

An EHC plan is a legal document that describes a child or young person's special educational, health and social care needs, explains the extra help that will be given to meet those needs and how that help will support the child or young person to achieve what they want to in their life. The EHCP dashboard provides a snap shot of the progress of EHCPs and is a key part of the processes enabling daily review of those reports that are coming up to the deadline for completion and ensuring these are completed on time.

### Results

The dashboard has been fully implemented and is broken down into reports due within 3 weeks, 2-3 weeks and then 2 weeks. The Care Coordination Centre (CCC) team coordinate ECHP completion across children's services and this dashboard enables them to track progress and to send reminders to the relevant services that the report is due.

The dashboard also identifies the number of reports outstanding for each service and is used by our services to monitor in real time, EHCP requirements and to ensure completion of plans to time. The dashboard also provides a safety net for data quality ensuring that completed reports are discharged following submission. Most importantly this process ensures timely submission of reports which are key to ensuring that each child gets the support that they require.

## CQUIN: Development of a live safety dashboard for National Early Warning Score 2 (NEWS2)

### Summary

NEWS2 is a tool developed by the Royal College of Physicians which uses the basic parameters of vital signs to score and support a response from a clinician when recognising a patient who may have a deteriorating condition. Calculating and recording a NEWS2 score in itself is a step in the process and an appropriate action should also be taken and documented.

The calculation of a NEWS2 score at every visit will alert the practitioner as to whether further action should be taken and ensure patient safety especially to assure patients are safe to remain at home. The safety dashboard was developed collecting information drawn from individual patient records in year for a staged roll out to nursing and therapy teams.

## Results

The dashboard has initially been rolled out to our Rapid Response service (a team of advanced nurse and clinical practitioners who assess unwell patients in their own home). Following this the use of the dashboard is being rolled out to community nursing and rehabilitation services during 2021 with some adjustments to tailor the dashboard to meet individual service requirements.

## CQUIN: Supporting the One Bromley Sustainability and Transformation Partnership and Integrated Care System

### Summary

Health and social care services are working together with the voluntary sector to provide more joined up and improved care for people who live in Bromley. The name of this joined up care partnership is One Bromley. One Bromley brings together local health providers such as King's College Hospital NHS Foundation Trust, Oxleas NHS Foundation Trust, Bromley Healthcare, Bromley GP Alliance, St Christopher's, Bromley Council, Bromley CCG and Bromley Third Sector Enterprise to more formally join forces and deliver seamless, personalised and joined up care for individuals. It is about improving outcomes, independence and quality of life for the people of Bromley.

Bromley Healthcare's CQUIN is based on our active participation in the partnership.

### Results

During the year 2019-20 Bromley Healthcare have been active participants in all relevant One Bromley initiatives including range of outpatient transformation workshops, the development of the Proactive Care Pathway and are represented on the One Bromley Executive

## CQUIN: Implementation of Anxiety Disorder Specific Measures in the Talk together Bromley (IAPT) service

### Summary

The CQUIN required the achievement of 65% of referrals with a specific anxiety disorder problem descriptor finishing a course of treatment having paired scores recorded on the specified Anxiety Disorder Specific Measure (ADSM).

Any new patient referred to the Talk together Bromley service undergoes a standard initial screening process. At this point where a specific issue is identified such as Post Traumatic Stress Disorder, a more detailed condition-specific questionnaire is completed.

This same questionnaire is completed at the end of treatment and this enables both the patient and the clinician to see the improvement delivered as a result of treatment.

## Results

The service has implemented this way of working and a monitoring process is in place to ensure the paired scoring (before and after treatment) is completed. During 2019-20 progress has been made with service completing 47% of pre/post treatment scores. As not all clients elect to complete a full treatment programme this results in the second ADSM score being unavailable.

## CQUIN: Diabetes - rethinking conversations towards open, compassionate, enabling care of patients with long term conditions

### Summary

Enabling patients with pre-diabetes and diabetes to have the capability, opportunity and motivation to proactively manage their health and wellbeing including making appropriate lifestyle changes. The CQUIN involved the identification of expert patients, training clinicians and expert patients to ensure that they have the skills to undertake the conversations.

### Results

Training of clinical staff within the service has been completed. Expert patient training has been delayed due to the COVID-19 pandemic. One of the expert patients joined a Bromley Healthcare Board meeting as part of a focussed discussion on Diabetes services. Expert patient and further staff training will be re started during the year 2020-21.

## CQUIN: Prevention of Ill Health: Staff Flu Vaccinations

### Summary

Every year the influenza vaccination is offered nationally to NHS staff as a way to reduce the risk of staff contracting the flu virus and transmitting it to patients or their family members. Healthcare workers may transmit the illness to patients even if they are mildly or sub-clinically infected. The CQUIN aim was to achieve an improved uptake of flu vaccinations by frontline clinical staff.

### Results

For the last year Bromley Healthcare's uptake of the staff flu vaccination increased by 12.2%.

For the year 2020-21, learning from last year and in the context of the COVID-19 pandemic, we have a detailed operational plan to achieve a significantly higher staff uptake of the vaccination which includes peer to peer vaccination, targeted support for any shielding staff to ensure they have access to the vaccination supported by an active in-house campaign to promote the vaccination and ease of access to via our occupational health team.



**Treatment of the diabetic foot** – photograph taken prior to the coronavirus pandemic and the introduction of social distancing rules.

## 3

## Our achievements for 2019-20

This section reflects on our performance against the quality priorities set in 2017-18. These priorities were set in line with our commitments to defining quality against the 5 CQC core standards:

- **Safe**
- **Caring**
- **Responsive**
- **Effective**
- **Well Led**

## Effective and Responsive

### Patient Care will be delivered at best value

Our Aim	Achievement
<b>Phase two development of our care co-ordination centre (CCC)</b> <b>Introduction of Malinko scheduling system</b>	<b>Complete</b>

### Development of the Care Co-ordination Centre

The Care Coordination Centre (CCC) was launched in January 2018, following a pilot in 2017. Services were migrated across during the rest of that year. Currently the CCC provides the first point of contact to patients across 35 services. The drivers for change were based around 'doing things in the right way'.

As well as patient/carer communications, the CCC team's focus is to manage waiting lists, 'Did Not Attends'/'Unable to Attends' and adherence to patient pathways through the use of live dashboards to provide a consistent patient journey. The aim is to use this process to innovate to ensure that Bromley Healthcare, as part of the wider health economy is 'doing the right things' with proactive care coordination and development of patient pathways that reflect best practice and positive outcomes. The CCC ensures that our patients receive our services in the right place at the right time.

During 2019/20 within Bromley, work has continued to integrate care systems at borough level as part of 'Our Healthier South East London Partnership' and the new "One Bromley" initiative.

We have worked closely with the third sector as well as health organisation colleagues to investigate the potential to integrate and simplify processes for people in Bromley wishing to access services.

Bromley Healthcare and the Bromley Third Sector Enterprise (BTSE) have now promoted closer working between the Bromley Healthcare Care Coordination Centre (CCC) and the Bromley Well Single Point of Access (SPA).

In the last year, Bromley Healthcare and the BTSE (specifically Bromley Well) scoped the potential for integration of the SPA within the CCC. Scoping work was undertaken by a joint working group to explore the benefits of integrating the Bromley Well SPA and the Bromley Healthcare CCC.

Initial steps have been taken to develop closer working which saw the Bromley Well SPA co-locate with the CCC in November 2019. However further developments have been impacted by the COVID-19 pandemic.

## Introduction of Malinko Scheduling system

The Malinko system is a clinically safe intelligent scheduling management system which automates patient care scheduling, ensuring home visits are appointed in an optimal way. This is based on location of patients to minimise staff travelling time, prioritisation of urgency and ensuring staff have the correct clinical competencies for the patient's needs.

Live data and location of staff information is collected from all colleagues in the community. A Mobile app is used by all staff which enables service reporting. The use of this system means colleagues feel safer due to its enhanced lone worker protection.

The Malinko system provides enhanced information in real time which supports our existing patient safety dashboard.

### Key Features of Malinko

- Clinically safe intelligent scheduling and service management system
- Unique clinical scheduling algorithm to optimally schedule patients care (including reduction in travel time)
- Automated caseload scheduling and visit booking and mileage reclaim (ensure the member of staff with the right competencies is scheduled to see the patient)
- Open and published APIs: Enables interoperability between our IT systems
- Intuitive design with real-time service capacity and demand view
- Set of service management reports including 'Sit Rep' reports
- Real-time staff location view and lone worker delayed visit alerts improves staff safety
- SMS and voice text patient visit reminder service improving our communication with patients about their appointments

## Benefits of Malinko

- By optimising the scheduling of care releases 'time to care'
- Improves the quality and safety of the community nursing service
- Reduces clinical risk, improve productivity, service delivery and patient care
- Reduces costs and unwarranted variation by standardising service delivery
- Safer and more equitable caseload allocations to staff
- Eliminates missed visits and scheduling errors
- Improves caseload management and workforce management
- Helps staff will feel safer through enhanced lone worker safeguarding arrangements
- Improves staff satisfaction and improved recruitment and retention of staff
- Reduces travel costs, patient complaints and enquiries

Malinko has been successfully rolled out for use to our District Nursing, Adult Occupational Therapy services alongside colleagues in the Care Coordination Centre (CCC). A full roll out of Malinko to all relevant clinical services will continue during 2020-21. Malinko scheduling has enabled services to;

- Improve visibility of all visits for our CCC colleagues mean patients calling in querying visits can be told of date and anticipated time to expect visit
- Improve continuity of care - Malinko will schedule visits to staff that have previously seen the patient where possible

Our Aim	Achievement
<b>Extension of the Proactive Care Pathway – introducing case management</b>	<b>Complete</b>

During 2019-20 Bromley Healthcare established a Frailty Case Management pilot scheme to deliver nurse-led targeted case management for patients with frailty and multi-morbidity. This was a truly integrated cross-provider community pilot with a view to wider roll out during 2020-21.

The case management pathway was a development which builds on the existing multiagency Proactive Care Pathway work which has used integrated data across providers to show the impact across the health/social care economy. The service was designed to manage the growing demands on GPs, reduce hospital admissions, decrease prescribing and improve patient experience through a highly skilled practitioner (Community Matron) working along-side General Practice.

For the pilot we worked closely with Stock Hill General Practice in Biggin Hill to design the model and agree the data to be used. The pilot provided additional intensive, proactive management to a practices complex patients ensuring that:

- The patients were selected by a truly integrated team comprising the GP, community matron and district nurse utilising numerical evidence of frailty/multi-morbidity and healthcare resource utilisation as a prerequisite for entry into this pilot
- The pilot utilised coded electronic records shared across providers to document and monitor patient progress (using quantitative data where feasible). Data recording was carried out in a methodical way via a templated electronic clinical system
- Cost analysis was developed across the entire health and social care economy for the first time ever
- The pilot delivered upskilling of District Nurses

## Project Outcomes

- Reduced hospital admissions and reduced GP consultations:

GP feedback survey has shown that patients on the project caseload have had a decrease in the number of GP appointments and has decreased the GP workload, in some cases up to 50% for particular patients.

Using data from 13 weeks pre and post the service involvement indicated a reduction of 71% in emergency attendances and non-elective hospital admission were reduce by 69%. This gave an overall financial saving of 65%.

- Positive patient feedback:

All patient satisfaction questionnaires have reported they felt they were treated with dignity, kindness, compassion, courtesy, respect, understanding and honesty.

Patients felt they could recommend the service to friends and family and that they felt supported and integrated within their care.

On the basis of assessment questionnaires patients reported a reduction in the levels of depression and anxiety and as a result of the support put in place report they now have a more positive outlook on life.

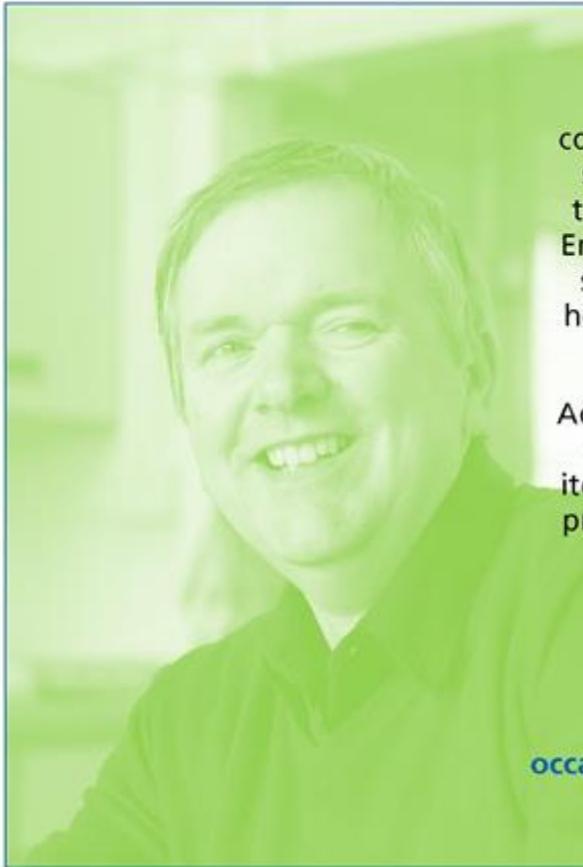
- Improved medicines management:

Medications were reviewed for all patients alongside the patient's own GP / Geriatrician and using the STOPPSTART tool – a screening tool used to review older patient's prescriptions has resulted in timely and efficient medicines management.

- Named single point of contact:

The community matron provided a single point of contact for queries and support between appointments.

The case study below provides an illustration of the impact of the pathway:



**CASE STUDY 1: "SG"**

"SG" is a 59 year old male known to the community mental health team. He has had a series of emergency calls to 111 and visits to the Princess Royal University Hospital (PRUH) Emergency Department. A visit to the patient showed that home hygiene is compromised, he is struggling to survive on benefits and his home was cold through lack of heating.

Advice was given on benefits and the need to maintain provisions e.g. buy non-perishable items. Contact was made with a food bank to provide assistance, EDF energy to place credit on his meter and credit was added to his Oyster card to enable him to travel to planned medical appointments.

**In the six weeks before the MDT intervention, SG had called 111 on 16 occasions and visiting A&E 4 times. Six weeks after there have been no emergency calls to 111 or visits to the PRUH ED**

Our Aim	Achievement
<b>Introduction of Telehealth technology</b>	<b>Complete</b>

During 2019-20 we set up a pilot to test the use of real time vital signs monitoring for patients in the community. The Remote Patient Review Service provided equipment that is worn on the arm of a patient.

The device allows health care professionals to monitor vital signs whilst the patient remains comfortable in their own home, health care professionals can access the patient's data remotely via a secure server on the intranet, where they can review the data as part of the patient's ongoing care needs.

The pilot was designed to monitor the following vital signs:

- oxygen saturation
- respiratory rate
- pulse rate
- skin temperature
- motion
- blood pressure

The scheme looked at 2 cohorts of patients:

- Patients identified as using unscheduled care 4 or more times in the last 3 months identified with either COPD, respiratory disease, AF, heart failure, anxiety, and excluding alcohol issues, dementia, AMTS<7, limited dexterity
  - Patients that meet admission avoidance criteria below with the aim to avoid hospital admission;
    - Sufficiently stable to be safely cared for at home
- Or
- Declining admission with full documented capacity to make this decision, including relevant declaration signed
    - Treatable exacerbation of respiratory disease.
    - Other Acute infection without Sepsis.
    - Patient recovering from a fall related to postural hypotension
    - Antihypertensive or heart failure drug titration.

The pilot scheme was launched but regrettably due to the COVID-19 pandemic we were unable to complete the pilot and this will be reinstated and continue in 2020-21.

## Safe and Caring

### Patient at the centre of care

Our Aim	Achievement
<b>Utilise patient feedback to drive service improvements</b>	<b>Complete</b>

### Patient Reference Group

The Bromley Healthcare Patient Reference Group (PRG) is integral to ensuring the patient voice is heard within the organisation. The group meets quarterly, and is led in partnership and supported by Bromley Healthwatch and chaired by our Chief Executive.

The group enables local residents and service users to share their experiences and offer positive support in ensuring public and patient involvement is at the heart of our services and business functions. The members provide feedback and engagement on our services, activities, communication tools and plans that Bromley Healthcare presents. These include suggestions on changes that we should make and on areas for further development.

Following the groups review of our website, a range of changes were instigated including improved signposting for the Wheelchair service, improved information on Safeguarding and improved feedback routes for patients and the public.

The year 2020-21 sees us progressing with the development of a new website and PRG members have volunteered and will be involved in the procurement and subsequent design process for the new website.

The group has received range of presentations on our services allowing the group to ask questions and provide input to how services could improve for patients and their families. The services who have presented include Neuro Rehabilitation, Diabetes, Bladder and Bowel, Wheelchair and Children's Speech and Language Therapy.

The PRG have also received regular updates and contributed to discussions on the Nurse Associates programme, the Proactive Case Management Pathway and approaches to managing non-attenders of appointments.

The group receives a regular update in the form of a "You Said, We Did" document which ensure the PRG members are kept fully up to date on the impact of their suggestions.

## Monitoring patient experience

Bromley Healthcare monitors and measures patient experience through the Friends and Family Test, Care Opinion feedback, and the 4Cs (compliments, comments, concerns and complaints). Information is used to drive improvements in our services. The following provides a summary of these elements for the year.

### The Family and Friends Test (FFT)

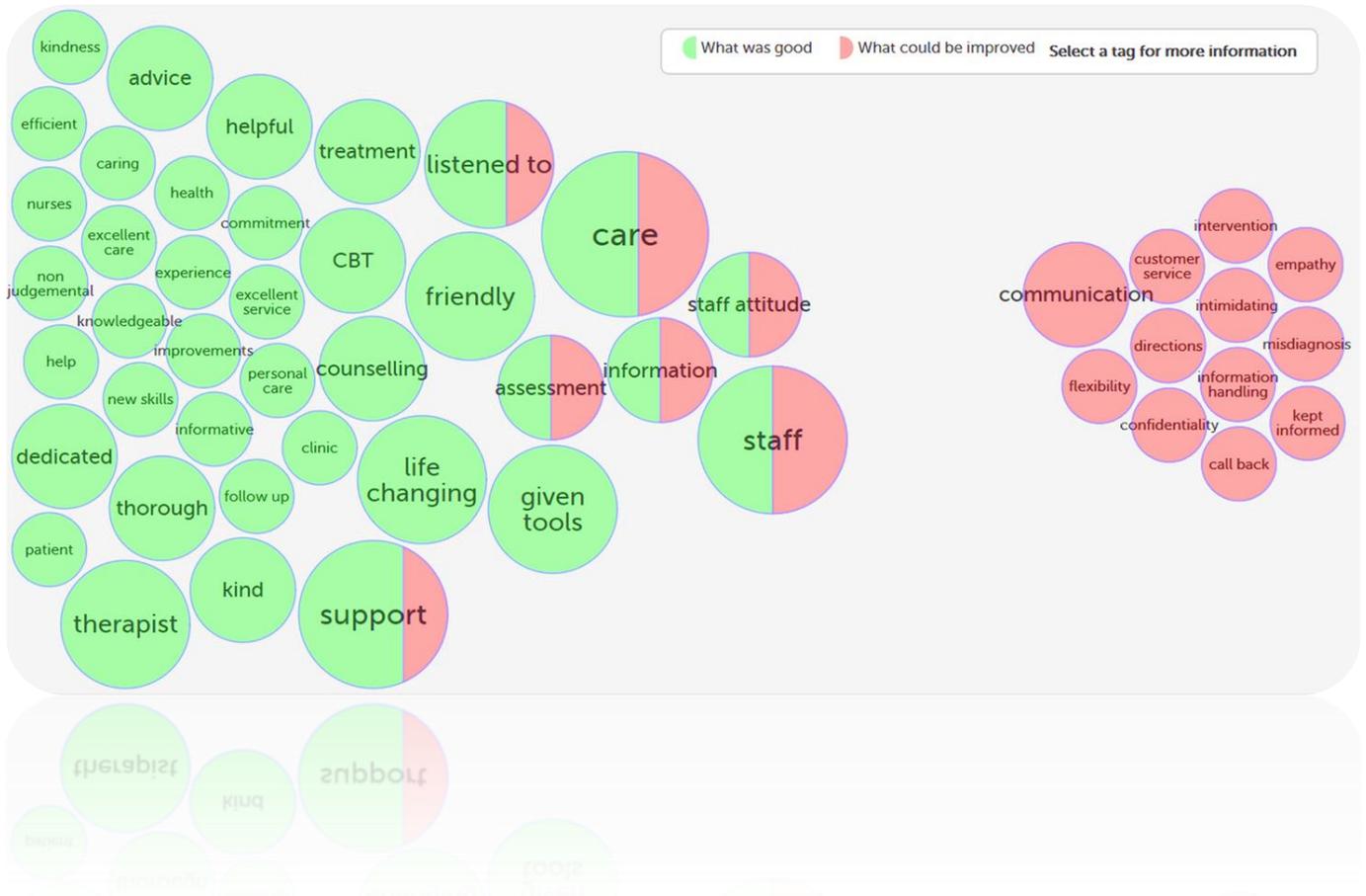
The NHS Friends and Family Test (FFT) was created to help service providers and commissioners understand whether their patients are happy with the service provided, or where improvements are needed. The FFT asks people if they would recommend the services they have used and offers a range of responses.

There were a total of 5264 FFT responses in 2019/20 of which 5159 were either extremely likely or likely to recommend to family and friends which means 98.0% of the responses were positive which was very similar to that of 2018/19 (97.7%). The response rate across the whole organisation to the FFT was 3.1% in 2019-20.

### Care Opinion

Bromley Healthcare continues to use the web based Care Opinion. Patients, carers and the public have the opportunity to tell their story and experiences of care provided. An option of using pictures as feedback is available to those clients who have communication difficulties including clients with Dementia.

Bromley Healthcare responds to all feedback on Care opinion and is currently the only organisation with a 100% response rate. A summary of feedback received during the year 2019-20 is detailed below:



Care Opinion Feedback Summary 2019-20

A sample of individual feedback taken from Care Opinion posts includes:

### About Bromley Healthcare - Tissue Viability nursing

Posted by Jonanddot (as the patient), 8 months ago (circa Jan 2020)

#### "The Fantastic Viability Nurse for Leg Ulcers"

After months of depression due to the pain caused by the ulcer on my leg, I am writing to commend and thank the viability nurse, Frank at Beckenham Beacon Hospital for his time and treatment. Before I was referred to Frank, although my treatment was to second to none, I had no faith that my ulcer would ever heal. I was quite depressed and not eating properly. Once I saw Frank, he was so positive and motivational that he could heal my ulcer by a set date. This gave me the determination and positivity to take in adequate protein and calories to help my body heal. I truly believe that his treatment needs to be nationalised so more people can benefit from his amazing work.

## About Bromley Healthcare – Bladder and bowel management (continence)

Posted by vegaxc54 (as a service user), 12 months ago (circa Sep 2019)

### **"Excellent service"**

**Just to thank the bladder and bowel department at Beckenham. It was an excellent service and we are delighted with the care received.**

## About Bromley Healthcare – Talk together Bromley (IAPT)

Posted by Dibley (as the patient), 16 months ago (circa May 2019)

### **"Now I have all the tools needed to cope"**

**I have always suffered from OCD and anxiety but never got the right help and tried to deal with it myself. Since having my son it got really bad. I was haunted with worries that my son had been swapped at birth and it took over my life. With help initially of the midwives I referred myself to Bromley mental health Talk Together Bromley. It was very easy and I had a few assessment phone calls and within a couple of weeks was able to start a 12 week course with a CBT therapist. This was very helpful and I would have struggled to pay for it privately. I was treated one to one for 1 hour a week and had a great therapist who really helped me to understand my OCD and how to tackle it. I was very lucky as I was on a priority list as my son was under 1 year old. I then referred again after 4 or 5 months and was given another CBT course for 12 weeks. Now I have all the tools needed to cope and continue to improve and finally enjoy my Son and family life.**

## About Bromley Healthcare – Podiatry

Posted by Brian1956 (as the patient), (circa April 2019)

### **"Long may this service be well funded"**

**I've been going to the Podiatry Service at The Beckenham Beacon for 6 years this year post surgery complications to my foot. I must applaud and praise the excellent service under the leadership of podiatry manager Mehmet and ably assisted by Sarah both very experienced podiatrists who offer a superb service to the community with administering their great skills treating us patients with kindness, care and dignity. Long may this service be well funded and be there to help all in the community with problems with their feet. (an appreciative patient!)**

## Compliments, complaints, comments and concerns (4Cs)

The following table provides a summary of the 4Cs received by services this year:

2019-20	Q1	Q2	Q3	Q4	Total
complaint	23	17	19	20	80
concern	57	44	51	62	214
comment	8	6	8	14	36
compliment	146	162	218	149	675

### Complaints

Whilst we strive to ensure our patients don't have reason to complain, complaints do provide an invaluable opportunity to review patient care, our services and the way in which we interact and provide information to patients and their carers. Lessons learnt from complaints help to drive service improvement.

Once the complaint has been investigated we write to the complainant and inform them of the results of the investigation. We provide details of the learning and actions that have been taken. This year our service user involvement group helped to develop a dedicated leaflet to enable people who use our services to know how to make a complaint if required.

The number of complaints that have been dealt with in the period 2019/20 remains steady. However there has been a significant increase in the number of concerns. This is due to the fact that staff have been better at contacting clients directly and dealing with issues at an early stage thus preventing escalation to a formal complaint.

The number of compliments received in 2019-20 far outweighs the number of complaints about the services we provide with a ratio of 9 compliments per complaint. The number of reported compliments does not reflect the true figure however as many staff find it hard to accept that they should document personal positive feedback. We continue to actively encourage our staff to record all compliments.

A total of 80 complaints were received by Bromley Healthcare during 2019-20. The total figure represents 19 fewer complaints received than the previous year. A total of 68 complaints were closed during this time.

The number of closed complaints that were reviewed in 2019-20 has decreased by 26.09% since the previous year, this is due to a drive to manage complaints as concerns (informal complaints) by listening closely to what the complainant is expressing and working with them to explain the reasons decisions were made and or apologising when mistakes have been made. The number of upheld complaints has reduced by 6.46% since 2018-19 and is detailed in the table below:

	<b>Total Complaints</b>	<b>Upheld</b>	<b>Partially Upheld</b>	<b>Not Upheld</b>
2017/18	96	42 (43.75%)	23 (23.95%)	31 (32.29%)
2018/19	92	33 (35.87%)	28 (30.43%)	36 (39.13%)
2019/20	68	20 (29.41%)	17 (25%)	31 (45.59%)

The top three themes for closed complaints for 2019-20 were clinical treatment, staff attitude and assessment. Emerging trends and themes are monitored regularly and discussed at a 'weekly incident and feedback meeting'.

This meeting is chaired by the Chief Executive and attendees include the Medical Director, the Director of Nursing and Safer Care and Head of Safer Care. Wherever there is learning for concerns, comments and complaints, actions are set and then monitored to ensure that the learning is embedded to prevent issues reoccurring.

#### **Examples where services have shown learning from complaints**

A client was unhappy that she had an assessment over the telephone after explaining that privacy was an issue as her husband is always present	The individual circumstances were fully investigated and responded to. All staff have been reminded to ask whether it is convenient to talk prior to any conversation
A patient's daughter complained that diabetes nurse who visited was concerned about the patient reusing needles, hadn't informed daughter immediately and found out via patient's GP a month later. Daughter was concerned patient at risk of infection/contamination and had not been informed by the service as previously agreed. A month's delay in GP receiving patient's care plan following visit	Apology given by nurse that she had not contacted the daughter as agreed and the service has put in place an action whereby when a care plan is delayed for any reason after a clinic/home visit a, holding letter will be sent to the GP and patient
A service failed to respond to message requesting call back	The individual circumstances were fully investigated and responded to. Following this staff have been advised to make sure it is clear who will be responding to messages and have plans in place for responding when staff are absent from work

## Safety dashboards

Our Aim	Achievement
<b>Introduction of a preventative (near live) patient safety dashboard</b>	<b>Complete</b>

Bromley Healthcare has developed a range of near live service and organisation performance dashboards during 2018/19. As our commissioners Bromley CCG benefit from the improved level of data collection through routine contract reporting and the ability to support deep dives. This work has expanded its remit to place a specific focus on the development of safety dashboards. In the first instance, during 2019-20 this has focussed on the completion of insulin injections by the District Nursing (DN) service.

We have invested significant time, expertise and resource to develop its existing near live dashboards. Our first step towards a live safety dashboard was in the form of a pilot with one of the DN teams to establish one aspect of a safety dashboard focusing on the provision of housebound insulin injections. This pilot allowed us to identify in near real time the completion of the insulin injections and ensure any potentially missed injections were picked up and completed on the same day through a clear escalation process.

The dashboard is now being used on a daily basis. The insulin audit is run daily at 2.15pm. If the report highlights any injections which have not been given these are followed up through the Care Coordination Centre. If necessary the twilight nursing team will pick up any outstanding injections ensuring on a daily basis that all patients receive their required insulin injection. During the year 2019-20 our community nursing team administered 67,252 insulin injections and as a result of the patient safety dashboard there were no missed insulins.

## Never Events

Bromley Healthcare recognises that learning from what goes wrong in healthcare is crucial to preventing future harm, and provides a culture of openness and honesty to ensure staff, patients, families and carers feel supported to speak up in a constructive way. Never Events are incidents that require investigation under the Serious Incident framework. During 2019-20 there were no never events reported.

## Caring and Well Led

### Culture for Growth

Our Aim	Achievement
<b>Expansion of our health and well-being offer</b>	<b>Complete</b>

Bromley Healthcare has focussed in 2019-20 on the expansion of our health and wellbeing offer to staff. Colleagues can access all of our health and wellbeing offers through the Wellbeing Hub on the Intranet. This offer now includes:

## Access to counselling and Talking Therapies

We realise that at times colleagues may experience difficulties at work or at home or both and would find it useful to speak with a counsellor. We work with Westmeria Counselling to provide a safe, confidential space to individuals experiencing difficulties in resolving life's issues. The service offers an initial consultation appointment, which provides the opportunity for colleagues and the counsellor to discuss any difficulties, think together about the most appropriate support. In some cases an initial consultation is all that is needed – or perhaps a referral to another agency or practitioner may be more appropriate.

This service is available to anyone who is finding life really difficult and looking for help to gain an understanding as to why. These problems may include: incidents at work, stress, low confidence/self-esteem, traumatic experiences, organisation change, confusion, anxiety, panic attacks, abuse, phobias, impact from cancer and health related issues, loss and bereavement, depression and low mood, feelings of isolation and marriage or relationship difficulties. The list is not exhaustive.

There is also counselling support available (EAP Level 1): Staff are able to access expert help and support for life's ups and downs 24/7, 365 days a year – this is a phone based service. There are also self-help CBT workbooks available through our Wellbeing Hub.

Our Talk together Bromley service is a free NHS evidence-based talking therapy service for people aged 18 years and over, who are anxious, stressed, have low mood or suffer from depression. The service provide a range of treatment programmes including one-to-one therapy, counselling and group work. At least one in four of us will experience mental health problems at some stage in our lives. Problems such as anxiety, low mood, stress and worry can happen for many reasons. The service offer regular Wellbeing workshops for staff as well as access to the full range of services.

## Occupational Health Services

Bromley Healthcare offers a fully inclusive Occupational Health service delivered by a specialist work related health advisory service which supports staff and managers in relation to workplace health matters.

## Staff benefit scheme

Additionally we offer our staff a range of benefits delivered in partnership with Vivup who support employee benefit schemes. This offer includes:

**Home Electronics** – a huge range of tech and must have home appliances, supplied direct from the UK's leading electronics retailer (Curry's PC World/Argos)

**Gym membership** – available at over 3000 participating clubs across the UK

**Cycle to work** – the scheme offers a huge discount and helps employees stay fit and healthy

**Bike shop** – offers adult bikes, children's bikes, components and accessories for the whole family

**Affordable loans** – through Neyber– secured loans at a better rate than high street banks paid from salary as salary sacrifice and access to financial education resources, calculators and tools.

**Travel and Leisure** – offers access to over 90 providers of holidays, flights, days out, theatre and more.

There are also Lifestyle savings (discounts) available such as: High street shops, supermarkets, dining out, mobile, broadband and fuel, home and garden. Staff also have access to the national Blue Light Card scheme.

## Staff Forum

Our Chief Executive along with a clinician from our Talk together Bromley service, co-chairs our Staff Forum which meets bi-monthly. The forum has representation from all services (clinical and non-clinical) and allows staff to raise ideas and issues to improve working lives in Bromley Healthcare. In the last year the Staff Forum has instigated a range of changes including all patient facing staff having dementia friendly name badges.

Our Aim	Achievement
Delivery of staff survey action plan	Complete

Bromley Healthcare's staff survey action plan has been reviewed and progress monitored across the year by our Staff Forum. During 2019-20 the following actions have been put in place to address issues raised in the staff survey.

Priority Area for improvement from survey feedback	What have we achieved
Staffing levels – reduce vacancies in hard to recruit areas and ensure staffing models based on demand and capacity model	<ul style="list-style-type: none"> <li>• Routine community nurse readiness programmes in place</li> <li>• Nursing Associate Scheme launched</li> <li>• Expanded apprenticeship scheme</li> <li>• Demand and capacity exercise completed with all services.</li> <li>• Implementation of external review of demand and capacity for therapy services</li> </ul>
Staff involvement in decision making and able to make changes within own area	<ul style="list-style-type: none"> <li>• Devolved decision making to service leads underway</li> <li>• Bi-annual programme of service strategy reviews in place</li> <li>• Staff Forum fully established</li> </ul>
Recognition of good work	<ul style="list-style-type: none"> <li>• A new and improved appraisal scheme was developed and launched during 2019-20</li> <li>• Star of the month and team of the quarter awards were presented.</li> <li>• All staff received £200 to thank them and acknowledge their positive response and hard work during Stage 1 COVID-19 pandemic</li> <li>• Annual awards ceremony with expanded award categories held and the highest ever attendance</li> </ul>

More Flexible working opportunities	<ul style="list-style-type: none"> <li>• Flexi working arrangements in place from October 2019</li> </ul>
Visibility of senior managers and communication	<ul style="list-style-type: none"> <li>• Regular visits from executive team to all bases in place</li> <li>• CEO and Executive team surgeries established</li> <li>• 6 monthly service strategy review meetings in place for all services including service lead and team members</li> <li>• Online "blog" for staff to raise ideas for improvements, concerns and share good news</li> <li>• Intranet communications increased and expanded</li> <li>• "Together" in house community magazine expanded and issued a minimum of 4 times a year</li> </ul>
Team working	<ul style="list-style-type: none"> <li>• Team away days supported</li> <li>• Team development programme for the Care Coordination Centre implemented</li> </ul>
Improvement in IT systems function and access to equipment	<ul style="list-style-type: none"> <li>• External review of IT function and additional posts appointed to meet demand</li> <li>• HSCN lines installed and Windows 10 upgrade underway across the whole organisation</li> <li>• IT equipment provided to all new starters on Welcome Morning</li> </ul>
Probation period for new starters (a request from our staff forum)	<ul style="list-style-type: none"> <li>• Introduced from December 2019</li> </ul>

Our Aim	Achievement
<b>Delivery of bespoke community nursing programme</b>	<b>Complete</b>

District Nursing is the largest workforce group employed by Bromley Healthcare. The nature of nursing in community healthcare requires staff to work remotely with limited supervision compared to other healthcare environments. This can be particularly challenging for less experienced nurses and can have a negative impact on both recruitment and staff retention.

Our organisation is also challenged with ensuring a District Nursing workforce, providing the wide range of skills and competencies required with staff able to operate independently, where possible. To address these issues, during 2018-19 Marie-Louise Muir Community Clinical Educator (Nursing) with her team, developed an intensive course that would revolutionise the way Bromley Healthcare train nursing staff.

The Band 5 Development Programme (10 weeks duration) was designed for newly registered nurses and provided focussed targeting of clinical skills, immediately followed by clinical practice with tailored lists of patient's e.g. practical application of catheterisation within 3 days of training in the competency.

The course ensured that by the end of the 10 week period community nursing staff were fully competent in the essential skills for their roles. Great care was then taken to seamlessly transition the nurses into the preceptorship programme.

Marie-Louise sourced experienced supernumerary clinical supervisors/trainers, employed on bank, to provide intensive support, without affecting service delivery for patients.

By working in partnership with universities, local organisations i.e. St Christopher's Hospice and Bromley Healthcare teams, Marie-Louise ensured that these new Band 5 nurses had a seamless initiation into the organisation and aligned services from all aspects. This included basics from uniform and equipment right the way through to individual clinical supervision and activity allocation.

In 2019-20 this programme has become fully embedded and we delivered three community readiness programmes to 18 newly qualified nurses. This has supported our key aim to ensure the best possible induction to our new clinical workforce, but also providing the required clinical skills and competencies to support their transition into their new careers.

In May 2020, we had 13 Extended Nursing Students volunteer to work with Bromley Healthcare as part of the national response to COVID 19.

To support their induction into Bromley Healthcare, the Learning and Development team developed a bespoke community readiness training programme to prepare the students for their new operational roles.

To reward their amazing contribution, in addition to the excellent standards they delivered, all have been offered permanent contracts to remain with Bromley Healthcare once they have completed their studies.

Our Aim	Achievement
<b>Talent Management Programme in place</b>	<b>Complete</b>

In 2019-20 we have introduced a People and Development plan with Talent Management as a key focus area. To support this, we have produced an action plan which will concentrate on:

- Listening to our workforce
- Health and Wellbeing
- Development of fulfilling Careers (including a new appraisal process and apprenticeship expansion)
- Leadership and Management
- Workforce Planning
- Recruitment and Retention
- Student Placements and work experience

In January 2020, we introduced a new appraisal process which was the first step in our Talent Development strategy (People and Development Plan). As a result of this change, we have focused the appraisal process on regular conversations throughout the year, building relationships, providing feedback, valuing, recognising, and developing our staff.

Managers are responsible for ensuring that all staff have an end of year appraisal meeting every year between 1 April to 30 June and receive regular and ongoing feedback.

Throughout the year, we have continued to build on our apprenticeship offer. This is a key priority in our People and Development Plan. As such, we have focussed on enhancing our current apprenticeship schemes - this includes profession-oriented apprenticeships:

- Recruited 2x school leavers for the Registered Nurse Apprenticeship (September 2019)
- Recruited 2x IT Infrastructure Technicians
- Recruited 1x Recruitment Resourcer
- Recruited 1x Learning and Development Administrator
- Recruited 2x Customer Service Practitioners
- 10 x Apprenticeship completions (Inc. Business Administration, Customer Service, Communication and Accounting)

Offering our current workforce increased opportunities to upskill

- Accountancy Level 7
- HR Business Partner Level 5
- Advanced Clinical Practitioner
- Improvement Practitioner
- Leadership and Management
- Nursing Associates

Although our numbers are strong, we know we can build on this further. We are currently exploring some joint initiatives with partner providers as well as offering further apprenticeships for registered nurses, nurse associates, return to practice students, Allied Health Professions within the organisation.

## Success Stories

This section highlights any particular successes delivered in 2019-20 which are not covered in prior sections.

### National Accelerator Bid Success

Bromley Healthcare alongside other providers of community healthcare services in South East London were successful in their bid to become one of only seven national accelerator sites. These sites are chosen because of their ability support the uptake and spread of proven impactful innovations benefitting patients, populations and staff.

The focus of these sites was to introduce a 2 hour access standard to crisis support and 2 day's access for intermediate care. Funding was secured alongside access to a tailored support package from NHS England.

The objectives of the programme are to:

- Determine a national operating model
- Codify the data detail behind the national standards
- Develop a workforce model
- Share good practice across England
- Buddy with a non-accelerator site

The Bromley and South East London focus has been to map the existing urgent community response models across the 6 boroughs. Modelling of demand and capacity requirements for services is being undertaken to enable the creation of a live capacity planner. The impact of these changes is being modelled along with the creation of a system wide dashboard to support timely and efficient delivery of urgent community services to all patients.

### **Working more closely with the Third Sector**

To promote closer working within the Proactive Care Pathway, Bromley Healthcare has worked with Age UK Bromley and Greenwich to scope how a single informatics system would significantly improve access to patient/service user information making the service pathway more effective, streamlined and enabling care to be more coordinated.

We have explored the use of EMIS as the clinical information system of choice to enable the provision of more integrated care. This development will allow Age UK Care navigators who are an integral part of the proactive Care Pathway to record coded information into a discreet Age UK EMIS template which can be both shared with other professionals (with patient consent) and demonstrate the outcomes and effectiveness of the service.

The development work was completed in 2019-20 and following a delay due to the COVID-19 pandemic will be going live in November 2020.

We are excited to be working in the innovative way to improve the quality and outcomes for our service users. The system will be easier to access and navigate. Staff will be able to have a clearer view of the patient/service user's holistic needs, enabling them to provide a better, more personalised service with improved management of long term conditions and an increased focus on prevention to help manage demand across health and the voluntary sector. Efficiency will also be improved by reducing duplication of data entry.

## Bromley Healthcare Charity Ball and Awards Ceremony

On Friday 4<sup>th</sup> October 2019, 220 staff and volunteers (a full house) gathered at The Warren to celebrate the work of Bromley Healthcare and its Charity.

The event is our annual opportunity to recognise some of the incredible work undertaken by colleagues and teams and celebrate this success. Winners of our staff awards 2019 are detailed below:

### **The A Team award 2019**

Beckenham Beacon Community team

### **The A Team award 2019 (runner up)**

The 'Move' team

### **The CCC Superstar award 2019**

Tom Hearn

### **The CCC Superstar award 2019 (runner up)**

CCC Pod 4

### **The Charlotte Hails Unsung Hero award 2019**

Julie Miller

### **The Charlotte Hails Unsung Hero award 2019 (runner up)**

Maria Coello

### **The Commitment to Excellence award 2019**

Mehmet Hussein

### **The Commitment to Excellence award 2019 (runner up)**

Community Paediatrics

### **The Massey Health Care Assistant award 2019**

Deborah Mitchell

### **The New Technology award (2019)**

Information team

### **The Pioneer award (2019)**

Bexley 0 to 19 Locality Leads

### **Sue Chadwick Memorial award (2019)**

Mary Andrew

### **Sue Chadwick Memorial award 2019 (runner up)**

Farah Mohedeen

### **Sue Chadwick Memorial award 2019 (runner up)**

Lynn Lockwood

### **The Temporary Worker award 2019**

Debby Rucci

### **The Temporary Worker award 2019 (runner up)**

Katy Burns

Some of the winners of the 2019 Bromley Healthcare Staff Awards:





**Our award-winning Rehabilitation service** – photograph taken prior to the coronavirus pandemic and the introduction of social distancing rules.

## 4

## Statements from stakeholders

The following section provides statements from various stakeholder organisations with their view on Bromley Healthcare.

## South East London CCG

South East London Clinical Commissioning Group statement on Bromley Healthcare's Quality Account 2019/2020.

South East London Clinical Commissioning Group was formed in April 2020 from a merger of the six borough based Clinical Commissioning Groups in Bexley, Bromley, Greenwich, Lambeth, Lewisham and Southwark and is grateful to Bromley Healthcare for the opportunity to comment on its 2019/2020 Quality Account. The Quality Account has been produced in unprecedented circumstances and the CCG wishes to acknowledge the enormous amount of work undertaken and the speed to streamline services at the commencement of the pandemic and would like to thank staff for their continued endurance, compassion and commitment shown by all the staff at Bromley Healthcare.

Throughout 2019/2020 the local CCG worked closely with Bromley Healthcare to seek assurance of the quality of the services it provided and appreciated the robust and frank discussions that were had, including where there were challenges.

We congratulate Bromley Healthcare on the work that they have achieved in delivering safeguarding training for staff and the closer working between the Care Coordination Centre (CCC) and the Single Point of Access (SPA) resulting in improved outcomes for patients and release of beds within the Princess Royal University Hospital (PRUH).

We recognise the response Bromley Healthcare has had to the Black Lives Matter movement in the convening of a Black and Minority Ethnic (BAME) network given that BAME staff make up 23% of their overall workforce.

The Quality Account demonstrates that a lot of work has been undertaken during the year to deliver services that the local people deserve and identifies areas where work is continuing. We commend the work undertaken to date in achieving their quality improvement objectives for the year and look forward to their continued determination in providing a quality service to the local community and endorse the new quality priorities for 2020/2021. We look forward to continuing our collaborative approach to quality improvement in the year ahead.

**Sonia Colwill**  
**Director of Quality and Governance**

**October 2020**

**Clinical Chair: Dr Andrew Parson**

**Accountable Officer: Andrew Bland**

**Managing Director: Dr Angela Bhan**

## Healthwatch Bromley

Healthwatch Bromley is pleased to note that there are clear objectives directly linked to quality improvement that have clear and defined outcomes that reflect a commitment to CQC priorities but that also acknowledge health concerns regularly reported within healthcare services. Healthwatch Bromley particularly recognizes the following quality improvement objectives:

**Reduction of avoidable acquired pressure ulcers** – key target of zero occurrences of avoidable acquired pressure ulcers is welcome.

**Reduce the number of patients who fall whilst under our care and ensure the appropriate interventions have been completed** – key target of a demonstrable reduction is welcome.

**Reduce the number of Medicines incidents causing harm** – key target of incidents reduced by 50% or a reduction to 3% of all Bromley Healthcare reported incidents is welcome.

Healthwatch Bromley notes the positive CQC inspection outcomes for Beckenham Beacon but clearly Hollybank Children's respite service report was disappointing and we look forward to seeing the results of the follow up inspection.

Implementation of the Commissioning for Quality and Innovation (CQUIN) programme for 2019-20 developed and agreed by Bromley Healthcare with Bromley commissioners and Bromley Clinical Commissioning Group, based on data intelligence from varying sources and stakeholders is recognized as a valuable step towards quality improvement.

The programme of having indicator goals in place and agreed with Bromley Commissioners to address areas identified for improvement or development demonstrates a commitment to service improvement. That Progress against CQUIN's is reported to local commissioners on a quarterly basis, as part of CQUIN monitoring is a very positive way forward.

Looking at the achievements of Bromley Healthcare for the period it is noted that the phase two development of the care co-ordination centre (CCC) Introduction of Malinko scheduling system is complete.

Extension of the Proactive Care Pathway – introducing case management has been completed and that a key outcome of this programme is to reduce hospital admissions and GP consultations. It is noted that on early data there appears to be a reduction of 71% in emergency attendances and that GP appointments has decreased. Whilst we welcome a reduction in caseload for surgeries we would want to be reassured that appropriate appointments are not being signposted elsewhere.

Introduction of Telehealth technology as a pilot is a very welcome and positive initiative to treat people more and more in their own homes. It is a shame that the pilot could not be continued during the pandemic period, as this seems an opportune time to imbed such a programme. Hopefully this will be picked up again soon.

Healthwatch Bromley notes that utilising patient feedback to drive service improvements as a key aim has been implemented with the support of a Patient Reference Group. While this commitment to patient feedback is a welcome aim to be implemented across Bromley Healthcare, we hope that the patient feedback collected by Healthwatch Bromley is utilized in improving service provision.

The initiatives set out under the Expansion of our health and well-being offer aim are very welcome and it is positive to see a organization taking positive steps to support its workforce.

Finally the implementation of a bespoke community-nursing programme that has led to significant positive outcomes is very positive and this is a welcome initiative and successful aim achieved.

**Mina Kakaiya, Operations Manager Healthwatch Bromley**

**November 2020**

## London Borough of Bromley Scrutiny Committee

**A statement from the Health Scrutiny Sub-Committee will be added to this Quality Account following their next committee meeting in January 2021.**