



EAST RIDING OF YORKSHIRE
Local Involvement Network

Your Voice on Health & Social Care

Acute Hospital Sub Group

17th May 2010

Present: Ruth Marsden, Chair
Ron Hart
Maggie Whitlock
Sylvia Whitton
Sharon Terry
Diana Sandy

Host team: Susan Oliver

In attendance: (Sharon Terry's PA)

1. Apologies: Pam Child
Jean Turner
Lesley Saunders

Ruth welcomed Sharon and Maggie to the Sub Group, they both gave a brief description of their experience and areas of interest.

2. Minutes of previous meeting

Addition to item 7 – A protocol cedes the autonomy of LINK

Action: Susan to send copies of the Governance to Maggie and Sharon.

3. Matters Arising:

4.1 The Sub Group notes Margaret Parrotts request and wherever possible the 10 days notice request would be adhered to.

Need to identify a 'back up' ward in case of ward closures to ensure a visit can still take place.

Action: Susan to resend information from Margaret Parrott to sub group
Susan to write to Margaret Parrott to remind her that there is the possibility of unannounced visits

'Quarterly Integrated Governance Report' from the Business Units is due next week, discussion took place regarding the size and content of the document.

Infection control information included in the Business Report.

Ruth receives information from the COIC meeting.

Discussion regarding the wearing of outdoor clothes on the ward, nurses changing to go home, the availability of changing facilities and the wearing of 'scrubs'.

The root cause analysis identifies that the vast majority of infection in HEYHT is community acquired from the patient and visitor.

Is infection control mandatory training for all staff?

Action: Ruth to pass her information to Maggie to interpret for the groups understanding.
Susan to add 'level of infection' onto Enter and View documentation.

4. Memorandum of Understanding (MOU)

The MOU had been forwarded to the Executive Management Team at Hull and East Yorkshire Hospitals Trust (HEYHT) following the previous meeting. No specific response had been received to date. The Trust was out of time for receiving a response.

Action: Susan to write to HEYHT including the 20 day statement

5. Quality Accounts

Ruth gave a brief description of the role and function of Quality Accounts. ERYLINK are invited to respond to the statements in 500 words.

Hull and East Yorkshire Hospital Trust (HEYHT):

Draft Quality Account received from HEYHT, Ruth was disappointed that a request for further information had led to a response that this information would not be available until the document was completed.

With little proactive work with HEYHT last year it may be limited in what ERYLINK can respond to. Ruth's comments had been circulated and two Lead Group Members had accepted her statements.

Deadline for return of comment: **28th May 2010**

Scarborough and North East Yorkshire Healthcare NHS Trust:

Copies received. Comments made by staff at the hospital raised concerns. Discussion took place regarding the routes that staff have to resolve concerns over work practices etc. Do staff have access to ERYLINK to express concerns? Ruth indicated that a new induction was being made available for all staff to understand role of ERYLINK.

There is a need for local knowledge to complete the comment.

Deadline for return of comment: **28th May 2010**

Action: Susan to circulate to Members in the northern area of the county for comment.
Susan to provide copies to Maggie and Sharon
Susan to speak to Alison Rowlands (North Yorkshire LINK) regarding the possibility of a joint response.

North Lincolnshire and Goole (NLAG):

Same principle as Scarborough above.

Action: Susan to circulate to Members in the western area of the county for comment.

Susan to provide copies to Maggie and Sharon

Susan to speak to Kristian Reed (North Lincolnshire LINK) regarding the possibility of a joint response.

Action: Susan to discuss with Julia whether it is possible to collate 'track changes' into a word document or identify a presentable format for comments.

6. Quality Accounts – stance of Overview and Scrutiny Committee (OSC)

OSC are not due to meet until 1st June therefore missing the deadline to respond. They suggest ERYLINK produces its own response.

7. Foundation Trust status, new situation

Steven Greep, Chief Executive is leaving. Due to the General Election they have not been able to advertise his post.

Ruth sent a message of thanks to Steven from ERYLINK.

It is not know whether HEYHT will continue to pursue Foundation Trust status. Added to this is the change of Government and therefore a possible policy change for Foundation Trusts.

8. Quarterly Integrated Governance Reports

The document provides an overview of the ongoing life of the Trust, it is possible to see themes emerging over a period of time. The document contains a lot of information and may be better digested electronically.

Action: Susan to enquire about the cost of electronic presentation equipment to take to ERYLINK meetings.

9. Business cards

To be used as a general business card the following was requested to be changed: Legislation added, logo and contact details, details larger, card half size.

Action: Susan to make alterations

10. Enter and View consolidation

Maggie and Sharon both interested in undertaking Enter and View training. Enter and View Training Provided by Ruth, Safeguarding by Alison Rowlands, East Riding Safeguarding by East Riding of Yorkshire Council. CRB checks. Dates identified in late June.

Action: Susan to add Maggie and Sharon to the list

Susan to send out CRB forms to Maggie and Sharon

11. Monitoring visits schedule

Ron provided feedback on the visit to Ward 2 CHH undertaken with Lesley. Draft report had previously been circulated.

Points to note:

- Although up to full staffing, the staff on duty did not appear to be able to give the level of care required.
- Longest stay patient is 10 months
- Diversional therapy appears to be nonexistent.
- Appeared to be little rehabilitation
- Identified a need for more mental stimulation
- Possible use of electronic equipment/Wii etc?
- Physiotherapy available
- Preparing people for home living.
- Ward had come a long way from the previous visit
- Décor improved
- Outcome for patients had improved
- Use of space improved ie conservatory

There was to be an imminent change in the criteria for the ward, stroke patients were to go to Ward 11 HRI however Ward 2 had staff specifically trained to work with people who have had strokes. In the new regime, medical and neurological patients would be mixed on the ward, Ward 2 would receive the overspill from medical admissions. This shift in strategy had not been discussed with the ward management.

Currently there were 10 stroke patients on the ward but as they are discharged they will not be replaced.

Ward management did not understand the rationale behind this decision.

Discharge procedures were discussed and the need to be discharged home as soon as possible with day care/social care/medical back up.

Ward 11, as the ward which will now take stroke patients should be the next Enter and View visit to identify the benefits of this strategic change.

Action: Susan to send report through to Ward 2 for accuracy checking.

All Comments and recommendations from Ward 2 visit to be completed and forwarded to Susan

Ward 2 visit report to be forwarded to Margaret Parrott and Steven Greep for comment requiring 20 day response.

Future Enter and View visits identified (see attached schedule)

Ward 12 Neurology Ward identified by Ann Wordingham and MS Society/Carers group. Ann to forward concerns to Susan.

Action: Susan to set up Enter and View visits as per schedule
Susan to request reports for Wards 11, 12, Acute Assessment Unit
and Accident and Emergency from HRI.

12. Any other Business

Discharge information received by Ruth – Standard National Contract.

Action: Ruth to raise at ERYLINK/ERYNHS quarterly meeting.

Discharge and transfer arrangements were discussed particularly the wait for prescriptions.

Sharon questioned whether there was information available regarding re-admission rates within a short period of time. This should be available from the Quarterly Integrated Governance Reports.

Next meeting: Friday 25th June 2010, 10am