

**A&E Services at Sheffield Teaching Hospitals NHS Foundation Trust –
 Review of Quality Indicators**

Governing Body meeting

M

7 November 2013

Author(s)/Presenter and title	Idris Griffiths, Chief Operating Officer
Sponsor	Idris Griffiths, Chief Operating Officer
Key messages	
<p>High level assessment report of STHFT A&E services, suggesting that:</p> <ul style="list-style-type: none"> • The service continues to provide high quality, timely and appropriate care and a positive experience for patients • Increase in complaints regarding A&E in October-December 2012 in comparison to October-December 2011 is likely to be linked to the increases in A&E attendances and emergency admissions that are known to have happened nationally • No significant concerns regarding patient experience 	
Assurance Framework (AF)	
<p>Assurance Framework Number:</p> <p>1.3 System wide or specific provider capacity problems emerge to prevent delivery of NHS Constitution and/or NHS E required pledges</p> <p>2.1 Providers delivering poor quality care and not meeting quality targets</p> <p>Paper provides the CCG Governing Body with a high level assessment of the quality, timeliness and appropriateness of care and patient experience with respect to A&E services at Sheffield Teaching Hospitals.</p> <p>Is this an existing or additional control: Existing controls</p>	
Equality/Diversity Impact	
Not applicable	
Public and Patient Engagement	
Patient experience, feedback and complaints contained within this paper.	
Recommendations	
The Governing Body is asked to note the contents of this report.	



A&E Services at Sheffield Teaching Hospitals NHS Foundation Trust – Review of Quality Indicators

Governing Body meeting

7 November 2013

1. Purpose of this paper

To provide CCG Commissioning Executive and Governing Body with a high level assessment of the quality, timeliness and appropriateness of care and patient experience with respect to A&E services at Sheffield Teaching Hospitals.

2. Background

In last quarter of 2012/13 and first quarter of 2013/14 (Apr – June) Sheffield Teaching Hospitals were experiencing difficulties in meeting the 4 hour operational standard (95% of patients seen and discharged within 4 hours).

Whilst this reflected the wider picture of a national deterioration in A&E performance and increased pressure on A&E services, it was important that Sheffield CCG as the responsible commissioner, sought assurance that, in the face of this increased pressure, the quality of A&E services at STHFT was being maintained.

The 4 hour operational standard, to ensure patients are seen and treated quickly, represents just one element of a wider range of quality considerations and too narrow a focus by trusts on achieving the standard may itself detract from overall quality of care and patient experience.

Consequently, the CCG Chief Operating Officer requested an assessment be undertaken of a range of factors relating to the quality of A&E services at STHFT, to include Patient Experience and Clinical Quality Indicators in addition to the 4 hour operational standard.

3. Approach

The assessment drew on a number of sources of intelligence relating to the quality of A&E services. These were a combination of existing national and local sources, along with an on-site visit and review of A&E services by a CCG GP Clinical Lead. The on-site visit report is attached at Appendix A.

4. Findings

4.1 Patient Experience, Feedback and Complaints

- *National A&E Survey 2012*

In comparison to 2008 survey, 2012 results were equivalent or better in all areas except “*Leaving: not told who to contact if worried*” which were significantly worse.

STH were equivalent or better than the ‘all trust average’ for all questions except “Care: not enough privacy when discussing condition or treatment” which were significantly worse than the ‘all trust average’. Overall the patient experience, as indicated by the national A&E survey, has improved between the two surveys and is better than the majority of A&E services nationally. The two areas that have been highlighted are being addressed.

- *STH Patient Experience Report*

The most recent report (Oct – Dec 2012) states that STH experienced an increase in complaints during Oct – Dec 2012 as below. However, the total number of complaints remains small compared to the activity that takes place.

There were 38 complaints received regarding A&E between October and December 2012. During this period, the A&E Department treated 36592 patients, and therefore the proportion who made a complaint is 0.1%.

<http://www.sth.nhs.uk/clientfiles/File/Patient%20Experience%20Report%20-%20Oct-Dec%202012.pdf>

In comparison, the trust reported 21 complaints received regarding A&E between October - December 2011, and 20 complaints April – June 2012.

<http://www.sth.nhs.uk/clientfiles/File/Patient%20Experience%20Report%20-%20Jan%20-%20Mar%202012.pdf>

No figures were included for the number of complaints in the period July – Sept 2012.

Patient feedback is also available via the Friends and Family test – see below.

- *Friends and Family Test (FFT)*

This commenced in April 2013 and asks patients if they would recommend the NHS service they have received to friends and family who need similar treatment or care. Quarter 1 results of FFT for patients discharged from A&E were published by NHS England on 30 July, and results for the month of July published during September. Whilst the proportion of patients completing the FFT return is low the results are as follows:

<p>NGH site (Type 1) A&E services</p>	<p>For Q1 2013/14 - 94.5% of respondents were “extremely likely” or “likely” to recommend the service.</p> <p>Response rate (average for Q1) was 3% (494 responses of a possible 16,707).</p> <p>Results for July – 88% of respondents were “extremely likely” or “likely” to recommend the service.</p> <p>Response rate for July – 2.5% (151 Of 6,027)</p>
---	--

RHH site (Type 2) A&E services	<p>For Q1 2013/14 - 95.7% were “extremely likely” or “likely” to recommend the service.</p> <p>Response rate (average for Q1) was 27% (748 responses of a possible 2709).</p> <p>Results for July – 98% of respondents were “extremely likely” or “likely” to recommend the service.</p> <p>Response rate for July – 23.2% (259 Of 1,114)</p>
--------------------------------	---

- *CCG GP on-site visit and review*

This report is included in appendix A. The GP spoke to 27 patients. All patients spoken to during the review visit were positive about their experience of the service, with a number of specific references made to excellent care, respect, and dignity. No negative comments were made by patients. Patient feedback and the observations of care being delivered in the course of the review demonstrated that despite the levels of demand on A&E, the drive to achieve the A&E 4 hour target and associated pressures, adult A&E services at Sheffield Teaching Hospitals continue to provide high quality, timely and appropriate care and a positive experience for patients.

4.2 Trust level Clinical Quality Indicators

Performance on the following trust level clinical quality indicators of has been consistently better than the required standards over the last 6 months of available data (Dec – May):-

- Time from arrival to initial assessment
- Time from arrival to treatment
- Time in department – for patients NOT requiring admission
- Patients leaving department without being seen

Performance with respect to *Time in the A&E Dept for those requiring admission* has been below the required standard, but based on the last 6 months of available data (Dec – May) has been improving month on month.

4.3 National 4 hour operational standard

Since the end of Quarter 1, 2013/14, Sheffield Teaching Hospitals have been performing above the standard for 95% of patients (cumulatively over the year) to be seen and treated within 4 hours. Q2 saw performance above 95%. Q3 year to date is proving more challenging and will be kept under daily review.

5. Conclusion

Clearly, the demand on A&E services continues to present challenges locally and nationally and requires on-going attention at whole system level via the Sheffield Urgent Care Board.

Overall, the findings described in this report, against a range of quality related measures, suggest that, even with the current pressures on adult A&E at Sheffield Teaching Hospitals, the service continues to provide high quality, timely and appropriate care and a positive experience for patients.

The increase in complaints regarding A&E in Oct-Dec 2012 in comparison to Oct-Dec 2011 is likely to be linked to the increases in A&E attendances and emergency admissions that are known to have happened nationally.

Moreover, the findings of the on-site CCG GP visit during June 2013 identified no significant concerns regarding patient experience and reported specific references made to excellent care, respect, dignity and understanding which patients felt they had received from the A&E staff.

6. Recommendations

The Governing Body is asked to note the contents of this report.

Paper prepared by Julie Glossop, Senior Commissioning and Performance Manager

On behalf of Idris Griffiths, Chief Operating Officer

October 2013

**CCG GP REVIEW OF A&E SERVICES
AT SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST
17 JUNE 2013**

Introduction

As part of the work involving all Sheffield trusts and partner organisations, on A&E Recovery and Improvement, it is recognised that there is a need to gather intelligence relating to the quality of A&E services, not just the achievement of the 4 hour A&E Target. Therefore, review of a sample of patients attending A&E, by a Sheffield CCG GP Clinical Lead, was arranged between the CCG and STHFT.

The purpose of the review was to seek assurance that despite high levels of demand on A&E, the drive to achieve the A&E 4 hour target and the associated pressures, adult A&E services at Sheffield Teaching Hospitals continue to demonstrate desired levels of quality, timeliness and appropriateness of care, and of positive patient experience.

To enable the review to focus on the quality and timeliness of services for patients with an identified need for urgent care services, the site visit was limited to the section of A&E for arrivals by Ambulance, GP referrals and patients already triaged through from A&E 'reception'.

Details of the Review

Date, time of location: Monday 17 June 2013, 10.30am – 2.30pm, STHFT A&E Dept, Northern Site.

Reviewer: Dr Marion Sloan, Sloan Medical Centre – CCG Governing Body GP

At the time of the review the A&E Dept was experiencing a steady stream of activity on what is typically a busy day (Monday). The A&E Daily report for Monday 17 June 2013 shows 498 attendances of which 97.99% were within the 4 hour target. There were no instances of major trauma during the period of the review

27 patients were reviewed. The selection of patients for review was random in as much as it included any patient in the department who was free to be spoken.

A breakdown of the 27 by age range and other relevant categories is set out in the table below:-

	Age 80+	Age 60-79	Age < 60	Age not known	Total	%
Arrivals by Ambulance	7	2	5	1	15	56%
<i>Of which Urgent Care Need</i>	5	2	2	0	9	33%
'Walk-ins' / own transport	3	3	6	0	12	44%
<i>Of which Urgent Care Need</i>	1	0	2	0	3	11%
Total	10	5	11	1	27	

Findings

All 27 patients were seen and treated, including completion of appropriate tests, in a timely manner and the 'flow' through to admission or discharge was good with no apparent avoidable delays.

All patients were positive about their experience of the service, with a number of specific references made to excellent care, respect, dignity and understanding which patients felt they had received from the A&E staff. No negative comments were made by patients, and just one family member/carer commented that they might have been kept better informed and kept updated on how long they would be waiting and what for.

Other comments / observations

The absence of any major trauma patients and the fact that this review took place during the Summer meant that the levels of activity / demand was manageable through the use of what were observed to be slick processes for handling the flow of patients from arrival to being seen, treated and discharged/admitted. It is recognised however that the addition of a major trauma or Winter pressures into the mix would be likely to require additional clinical resource to maintain the process and flow.

Conclusion

Patient feedback and the observations of care being delivered in the course of the review demonstrate that despite the levels of demand on A&E, the drive to achieve the A&E 4 hour target and associated pressures, adult A&E services at Sheffield Teaching Hospitals continue to provide high quality, timely and appropriate care and a positive experience for patients.

Dr Marion Sloan

Sheffield CCG Governing Body

20 June 2013