

## NORTH YORKSHIRE COUNTY COUNCIL

## SCRUTINY OF HEALTH COMMITTEE

7 NOVEMBER 2014

## South Tees Hospitals NHS Foundation Trust

**Purpose of Report**

1. To update the Committee on the work which Monitor, the external regulator of NHS foundation trusts, is carrying out in the South Tees Hospitals NHS Foundation Trust (STHFT).

**Introduction**

2. In October 2013 Monitor, the external regulator of NHS foundation trusts began an investigation into the STHFT's:
  - Failure to achieve the referral to treatment 18 week target for admitted patients;
  - Rate of Clostridium difficile infection;
  - Mortality rate;
  - Never events.
3. Earlier this year the investigation was widened to include the Trust's financial deficit for 2013-14.
4. On 2 July 2014 Monitor announced that it had decided to take no further action on:
  - Referral to treatment – as the Trust has been compliant with this target since April 2014;
  - Never events – as the Trust has a much lower rate than the national average;
  - Mortality - as the Trust is not an “outlier” compared to others in the North East.
5. However, Monitor remained concerned about the Trust's financial position and the rate of clostridium difficile infections. It required the Trust to take a number of actions to address both issues.
6. Professor Tricia Hart (Chief Executive, STHFT) will be attending the Committee to summarise work which is now being undertaken across the Trust. The presentation which Professor Hart will give to the Committee is attached as APPENDIX 1. A short video will also be played at the meeting.

## **Recommendations**

7. That Members offer comment and advice to Professor Hart on the Trust's plans for:
  - a) reducing the rate of clostridium difficile infections;
  - b) transforming healthcare services and achieving a sustainable long term financial position.

**Bryon Hunter**  
**Scrutiny Team Leader**

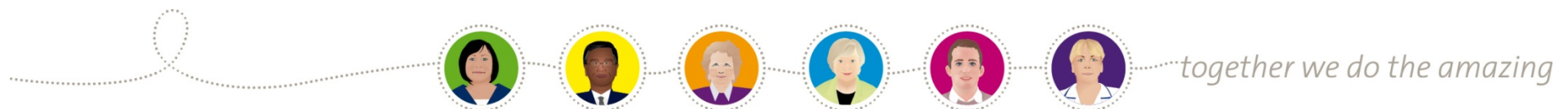
**County Hall**  
**NORTHALLERTON**

**20 October 2014**

**Background Documents: None**


# NORTH YORKSHIRE SCRUTINY OF HEALTH COMMITTEE

Professor Tricia Hart  
Chief Executive



# C. difficile

- Continued reduction in deaths associated with *C.difficile* infection
- 2 external reviews (Prof. Mark Wilcox and Martin Kiernan Dec 2013).
- Follow up external review By Prof Mark Wilcox taking place 21<sup>st</sup> July 2014. – verbal Feedback to be provide
- **Actions taken**
  - Over 1,000 staff attended face to face director-led awareness sessions
  - Antibiotic stewardship - increased antibiotic audits, antibiotic prescribing campaign for medics and non-medical prescribers and nurses commenced 2<sup>nd</sup> June 14.
  - Cleaning – trust wide review including terminal cleaning, patient equipment and assurance around monitoring
  - Hand hygiene – staff and patients, refresh of current hand hygiene audit
  - Performance - director-led clinical incident review panels

ATTENTION DOCTORS AND PRESCRIBERS South Tees Hospitals  NHS Foundation Trust

**Antibiotics and patients SPARED**  
If we improve antibiotic prescribing patients will be SPARED from HCAIs and antibiotics will be saved for a new ERA.

**S**amples Have you sent relevant **SAMPLES** for microbiology tests before starting antibiotics? Have you checked previous microbiology results?

**P**olicy Have you followed the trust's antibiotic **POLICY** or looked at specialist directorate guidelines? If you deviate from recommendations, document why in the notes.

**A**llergy Are you considering drug **ALLERGIES** whilst prescribing antibiotics? **NB:** Co-amoxiclav (Augmentin®) and piperacillin / tazobactam (Tazocin®) are penicillins.

**R**eason Have you documented the **REASON / INDICATION** for antibiotics in the notes and on the drug chart?

**E**nd date Have you specified an **END / STOP DATE** for antibiotic courses in the notes and on the drug chart? If not, write a **REVIEW DATE**.

**D**aily review Review antibiotic courses **DAILY** to check: 1) they are still needed; 2) whether IVs can switch to oral; 3) if microbiology results are available; and 4) whether the antibiotic should change.

Debbie Lockwood, Advanced Clinical Pharmacist – Antimicrobials, 28th March 2014

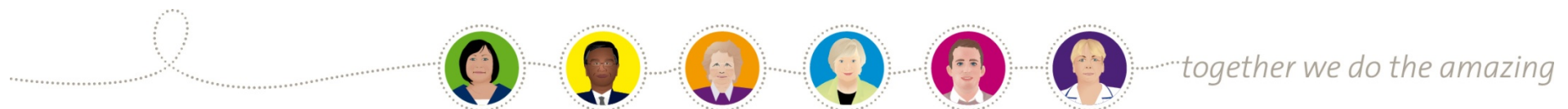
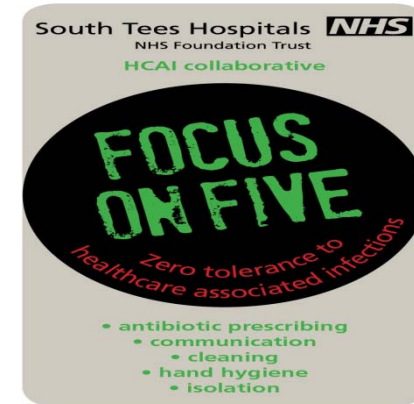
together we do the amazing

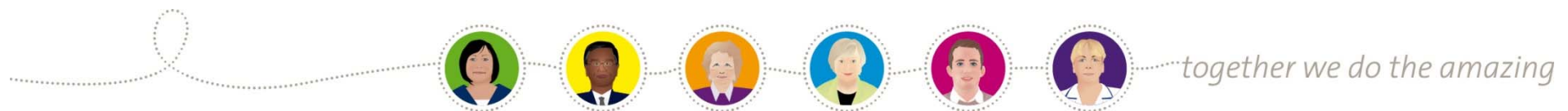
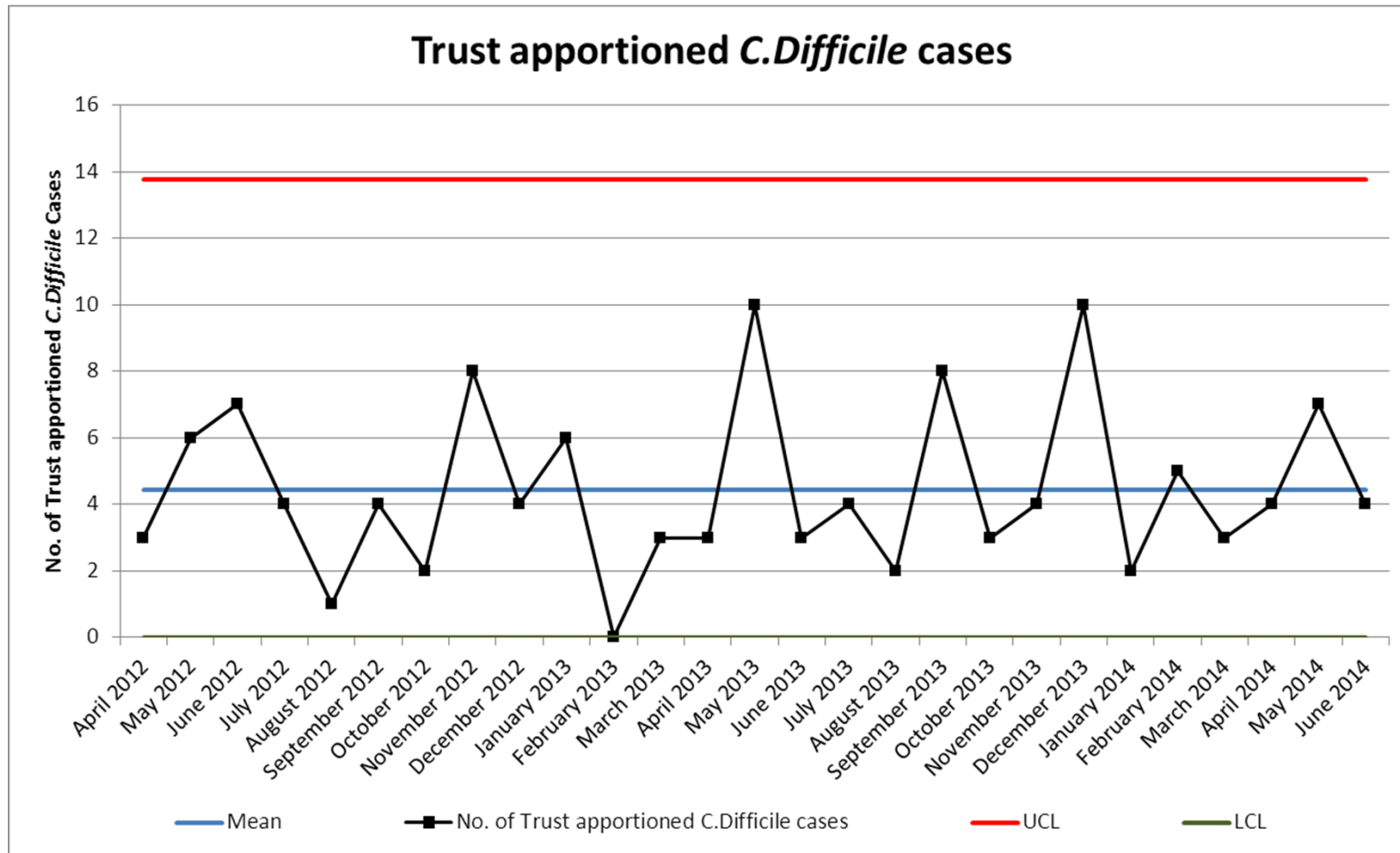


together we do the amazing

# *C. difficile*

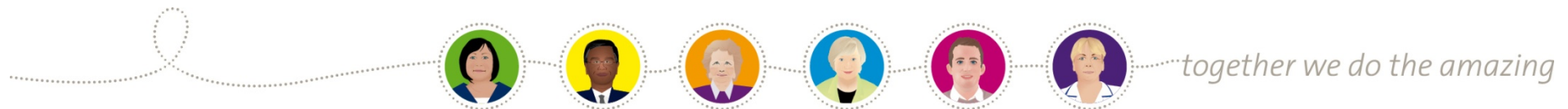
- **Actions taken (continued)**
- C.difficile focus - assistant director of nursing /deputy DIPC solely working on the HCAI agenda for the next three months.
- Commenced and HCAI collaborative with the first priority on the control of *C.difficile* including a 'focus on five' campaign – antibiotic prescribing, communication, cleaning, hand hygiene and isolation.
- Developed a weekly focus on five newsletter for clinical teams and managers to cascade to all frontline and support staff.





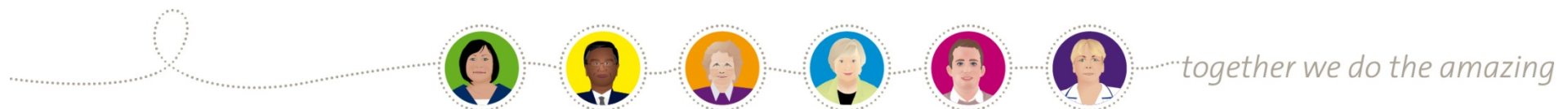
# The Financial Challenge

- 2014/15 plan deficit £29.4m
- 2015/16 deficit £48.3m
- £60m CIPs delivered over 3 years, £12m p.a. in plan
- Radical and transformational change initiated
- Interim support required from DH to fund operations, finance change programme underpin Capex programme



# 'Continuing the Journey' supported by McKinsey

- Identified 3 year cost escalation
- Benchmarked with peers and best in class
- 6 workstreams in £350m of cost base:
  - corporate / procurement / outpatients / non-ward nursing / surgery / theatres
- Root cause analysis
- Clinical engagement
- Detailed plans produced with cash release, timing, accountability, cost to deliver





# Monitor

The Trust has agreed the following actions:

- Develop and implement an action plan to help us comply with our 2014/2015 target of no more than 49 cases of Clostridium difficile
- Obtain assurance from an external advisor that we have fully implemented the Clostridium difficile action plan and report on progress monthly to Monitor
- Develop and implement a financial recovery action plan that returns us to a sustainable position within three years
- Appoint a transformation director to support the delivery of the financial recovery plan and report progress monthly to Monitor
- Commission a board governance and leadership review from an external advisor
- Develop and implement a board governance and leadership action plan to implement all recommendations from the review



*together we do the amazing*