



St John's Hospital Stakeholder Group

West Lothian Civic Centre
Howden South Road
LIVINGSTON
EH54 6FF

9 February 2017

A meeting of St John's Hospital Stakeholder Group will be held within the **Board Room 1, St John's Hospital, Livingston** on **Wednesday 15 February 2017** at **2:30pm**.

BUSINESS

Public Session

1. Apologies for Absence
2. Declarations of Interest - Members should declare any financial and non-financial interests they have in the items of business for consideration at the meeting, identifying the relevant agenda item and the nature of their interest.
3. Order of Business, including notice of urgent business
4. Confirm Draft Minutes of Meeting of St John's Hospital Stakeholder Group held on Wednesday 18 January 2017 (herewith).
5. Paediatric Services/Paediatric Outpatient Clinic Waiting Times - Update by Fiona Mitchell, Director of Women's and Children's Services, NHS Lothian.
6. St John's Hospital Quality Dashboard - November 2016 - Report by Agnes Ritchie, Associate Nurse Director (herewith)
7. Workplan (herewith)
8. Date of Next Meeting - 15 March 2017

DATA LABEL: Public

NOTE **For further information please contact Val Johnston, Tel No.01506 281594 or email val.johnston@westlothian.gov.uk**

MINUTE of MEETING of the ST JOHN'S HOSPITAL STAKEHOLDER GROUP of WEST Lothian COUNCIL held within BOARD ROOM 1, ST JOHN'S HOSPITAL, LIVINGSTON , on 18 JANUARY 2017.

Present

Councillor John McGinty, Leader of West Lothian Council (Chair)
Councillor Dave King, Appointed Representative, West Lothian Council
Councillor Anne McMillan, Appointed Representative, West Lothian Council
Martin Hill, Non-Executive member, NHS Lothian
Alex Joyce, Non-Executive member, NHS Lothian
Jacqui Campbell, Interim Chief Officer, Acute, NHS Lothian (by video link)
Fiona Mitchell, Director of Women's and Children's Services, NHS Lothian
Andrew Jackson, Associate Director: Information Services, Strategic Planning
Caroline McDowall, Partnership Lead St John's Hospital.
Aris Tyrothoulakis, St John's Hospital Interim Site Director, NHS Lothian
Maureen Anderson, Patient Representative

Apologies

Lynsay Williams, Non-Executive member, NHS Lothian

In attendance

Lorraine McGrorty, Committee Officer, West Lothian Council

1. DECLARATIONS OF INTEREST

Agenda Item 5 – Paediatric Services/Paediatric Outpatient Clinic Waiting Times

Martin Hill declared an interest due to him being a member of the Paediatric Programme Board.

2. MINUTE

The group confirmed the minute of the meeting held on 21 December 2016 as being a correct record subject to noting that Linda Rumbles had attended the meeting as Depute for Caroline McDowall, Partnership Lead St John's Hospital and that pool bikes were not yet available although a funding had been submitted, the outcome of which was awaited.

3. PAEDIATRIC SERVICES/PAEDIATRIC OUTPATIENT CLINIC WAITING TIMES

The Stakeholder Group noted the update provided by Fiona Mitchell, Director of Women's and Children's Services, on the current position within the paediatric service at St John's Hospital.

The Group heard that the six new Paediatric Consultants were on track to take up their positions from February 2017 onwards. In accordance with NHS procedures, an external adviser from outwith NHS Lothian had been appointed to oversee the selection of the two outstanding Paediatric

Consultant posts. It was hoped that issues raised by the external adviser around supporting professional activity would shortly be resolved and the posts could be advertised in February. A date for interviews had been set aside in March.

Ms Mitchell then explained that Paediatric Consultants who were due to graduate in August 2017 were eligible to apply for consultant posts no more than 6 months prior their graduation. It was therefore hoped that some of the Lothian's trainees would express an interest in the vacant posts.

Ms Mitchell reported that paediatric staff continued to support the rota within the Children's Ward at St John's Hospital which continued to have a slight impact on the Paediatric Outpatient Clinic waiting times. Details of the number of paediatric outpatient appointment waiting times for December 2016 were provided. It was noted that the number of children referred to St John's Hospital waiting for an appointment for more than 12 weeks had increased slightly in December when compared to November. Overall however, 93% of children had been seen within 12 weeks and around 97% within 16 weeks. Ms Mitchell was confident that once all of the new consultants were in place, the number of children waiting more than 12 weeks for an outpatient appointment would back revert to levels last seen in April 2016 when only 3 children had waited more than 12 weeks for an appointment.

Ms Mitchell then responded to questions from members of the Group.

Decision

Noted the update provided.

4. CARDIOLOGY SERVICES ST. JOHN'S HOSPITAL

The Stakeholder Group received a very interesting presentation (copies of which were tabled) by Aris Tyrothoulakis on cardiology services at St. John's Hospital.

The presentation provided the Group with an overview of the cardiology services provided at St. John's Hospital which provided an inpatient and outpatient service for people with heart disease from across West Lothian. He also provided the group with an overview of the current staffing compliment of the cardiology team and an understanding of the levels and methods of services delivered to inpatients and outpatients.

A relatively new Heart Failure Service had been introduced which was being led by a Consultant Cardiologist and supported by a heart failure nurse. The service was primarily an outpatient service involving close working with GPs and medical teams within St. John's Hospital as required. The significant success of the service had been recognised and ways to expand the service were currently being explored. The report then moved on to provide a summary of the Lothian wide cardiac rehabilitation service.

Mr Tyrothoulakis' presentation then provided the group with a list of the challenges to providing cardiology services on site and concluded with information on the planned future direction of cardiology services across NHS Lothian. He explained that a review of Acute Medical Services was currently being undertaken by Brian Cook, Acute Medical Director which he expected cardiology to be part of. Ms Campbell confirmed that the review being undertaken by Mr Cook was the start of an extensive piece of work that would be the driver of ensuring the correct models were in place for a sustainable NHS workforce in the future.

In response to questions from members of the Group, Mr Tyrothoulakis agreed to include the potential requirement for additional consultant cover in the future direction of the service. He took on board that there was a growing elderly population who required services to be provided in the right place to serve the needs of the population.

Decision

Noted the contents of the presentation and the update provided.

5. ACTIVITY AND PERFORMANCE UPDATE

The Stakeholder Group considered the terms of an informative presentation (copies of which were tabled) by Andrew Jackson, Associate Director, Information Services Strategic Planning, on the activity review for Accident and Emergency, Outpatients and Inpatients/Day cases at St. John's Hospital for the period April-December 2016.

At the outset of his presentation, Mr Jackson stressed to the Group that data contained within his report was provisional and would not feature in national data for a number of months.

Mr Jackson spoke the Group through the variety of graphs within the presentation. In relation to A&E, he noted that the number of patients being seen within the department within 4 hours had been relatively stable in 2016, with around 95% receiving treatment within 4 hours. Likewise, outpatient activity had been remarkable stable in the past 18 months, with only a very slight rise in return outpatient waiting times in the past couple of months.

Despite stability in the A&E and outpatients, the next graph within Mr Jackson's presentation revealed that there had nevertheless been an increase in the number of outpatients waiting over 12 weeks for an appointment. The proceeding slide gave the Group a breakdown of figures for December 2016, from which the key specialist areas impacting on the delay could clearly be identified. The Group heard from Mr Jackson that the position was the similar across all of Lothian.

Mr Jackson's presentation then moved on to provide graphical details on the inpatient and daycare activity, including the number of inpatient and daycare cases who had waited more than 12 weeks for an appointment. Mr Jackson explained that these figures had also grown since March

2016 and again, the position was reflected across all of Lothian. The final slide in the presentation provided information on the areas of speciality where patients had waited more than 12 weeks for an appointment.

Arising from discussion, Ms Campbell confirmed that there were a few key areas impacting on the figures. She explained that demand was outstripping capacity and that urgent demand was impacting on routine appointments. The picture was the same across Scotland with around 82,000 patients waiting more than 12 weeks for an appointment. The NHS would have to ensure that future capacity was as appropriate and as efficient as possible.

In responding to a question about waiting times at St. John's A&E, Ms Campbell explained that whilst the number of cases at St. John's had not risen greatly in recent months, on the ground the staff had experienced noticeable peaks on certain days. She explained that the frailty and complexity of cases presenting at A&E meant staff were dealing with a sicker cohort of patients and gave credit to the clinical and management team for their excellent handling of the situation.

Decision

Noted the contents of the presentation and the update provided.

6. WORKPLAN

The group considered the contents of the workplan (copies of which had been circulated).

Decision

Noted the workplan.

7. DATE OF NEXT MEETING

The group noted the date of the next meeting scheduled to be held on 15 February 2017.

8.. URGENT BUSINESS - WARD 20, ST. JOHN'S HOSPITAL

In response to a suggestion from Ms Campbell, the chair allowed a verbal update to be provided to the Group by Mr Tyrothoulakis on Ward 20.

Mr Tyrothoulakis explained that works had commenced earlier in the week to extend Ward 20 which would see the ward expanded to provide 2 operating theatres and the creation of a new day surgery unit for hand trauma surgery, hand elective surgery and ophthalmology surgery patients. The expanded ward would support pre and post-operative care for patients. The refurbishment would provide additional capacity and reduce the need for overnight stays for patients from throughout Lothian. The works were a major investment in the hospital with the expanded

ward was expected to be completed by the end of June.

Decision

Noted the verbal update and welcomed the additional investment in St. John's Hospital.

St. John's Hospital Quality Dashboard – January 2017 **(dates for each data item stated in background charts)**

This table shows a monthly summary of process and outcome quality measures. Trend graphs are shown on the pages following. Reviewers should look for process measures to increase or remain stable and for outcome measures to decrease or remain stable. As many of the measures below are intended for improvement, it is important that background trend charts are also scrutinised as focussing on one data point (as below) may be misleading. Data below which has been updated since the last Quality Report is asterisked. Links to each measure chart have been embedded in the headings below.

QUALITY AMBITION

PERSON-CENTRED - Outcome Measures

[Patient Experience – Tell us Ten Things](#)

[Patient Experience – Inpatient Survey Ward Participation](#)

[Number of Complaints](#) *

[Staff Absence Levels](#) *

SAFE – Outcome Measures

[Hospital Standardised Mortality Ratios](#)

[Unadjusted Mortality](#) *

[C. Difficile Numbers – Count](#) *

[C. Difficile Numbers – Rate](#) *

[Staph. Aureus Bacteraemia Numbers – Count](#) *

[Staph. Aureus Bacteraemia Numbers – Rate](#) *

[Number of Cardiac Arrests](#) *

[Rate of Cardiac Arrests](#) *

[Adverse Events with harm](#) *

[Inpatient Falls with Harm](#) *

[Inpatient Pressure Ulcers Grade 2 or above](#) *

EFFECTIVE – Process Measures

[A&E 4 Hour Wait](#) *

[Admission to stroke unit on day or day after admission](#) *

[Stroke Treatment Measure: Swallow Screen](#) *

[Stroke Treatment Measure: CT Scan](#) *

[Hospital Scorecards for Medical & Surgical Readmission Rates](#) *

Additional Quality Measures (for context)

Hospital Scorecard: April to June 2016 for St. John's Hospital *

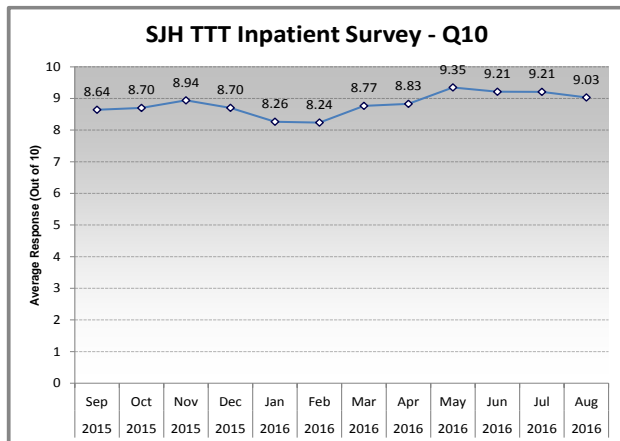
Indicator	SJH Rate (Per 1000 admissions)	Scottish Rate
Standardised Surgical Readmission rate within 7 days	25.50	23.28
Standardised Surgical Readmission rate within 28 days	41.82	43.43
Standardised Medical Readmission rate within 7 days	81.82	56.55
Standardised Medical Readmission rate within 28 days	155.21	120.85
	SJH	Scotland
Average Surgical Length of Stay – Adjusted	0.89	1.00
Average Medical Length of Stay – Adjusted	1.26	1.00

Person-Centred

“Mutually beneficial partnerships between patients, their families and those delivering healthcare services that respect individual needs and values and which demonstrate compassion, continuity, clear communication and shared decision-making.”

Title:	Tell us Ten Things (TTT) Inpatient Survey Question 10
Numerator:	Average of inpatient responses (out of 10) to Question 10: Overall Experience
Goal:	9.5 (out of 10)

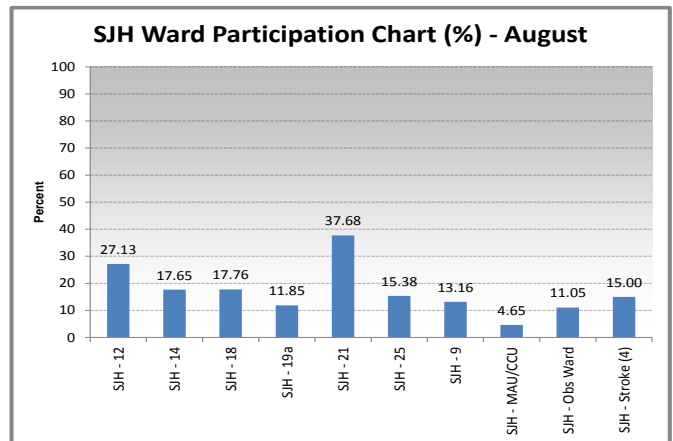
Outcome Measure



Data Source: TTT Database Exec Lead: Alex McMahon

Title:	Tell us ten things (TTT) – Inpatient Survey Ward Participation
Numerator:	Number of surveys completed by patients
Denominator:	Number of patients discharged from each ward
Goal:	TBC

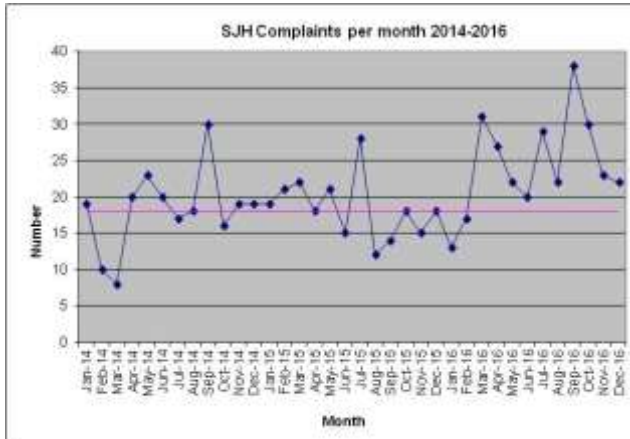
Outcome Measure



Data Source: TTT Database Exec Lead: Alex McMahon

Title:	Number of Complaints
Numerator:	Total number of complaints
Goal:	Reduction in number of formal complaints

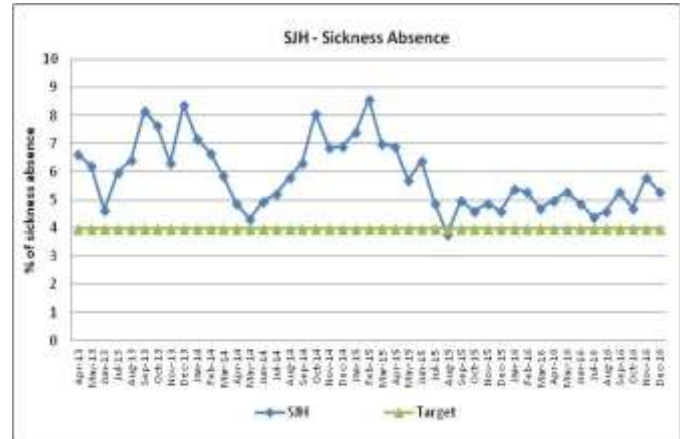
Outcome Measure



Data Source: Datix Exec Lead: Alex McMahon

Title:	Staff Absence Levels for St. Johns
Numerator:	Total staff hours lost
Denominator:	Total staff hours available
Goal:	4% or less

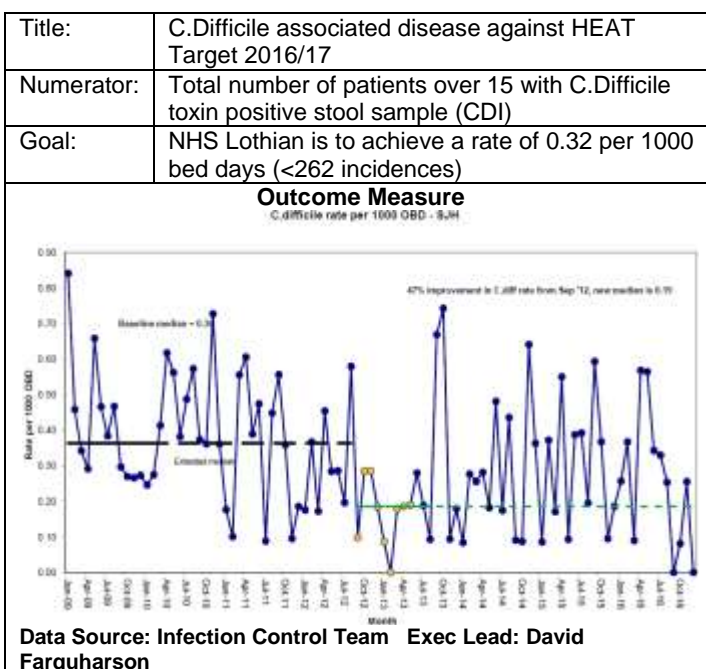
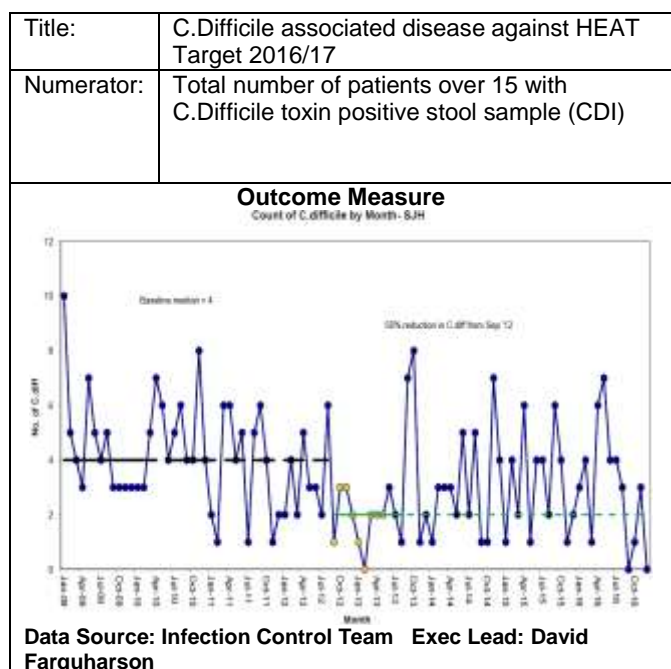
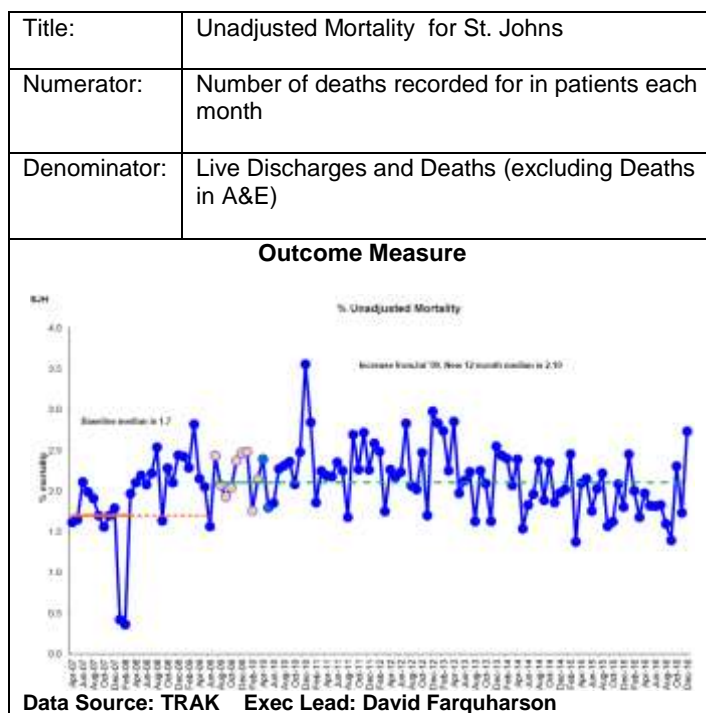
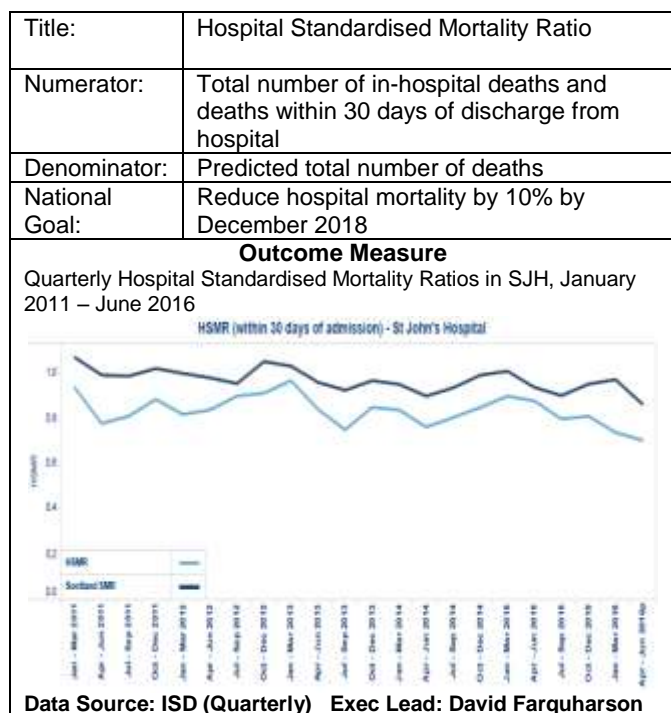
Outcome Measure



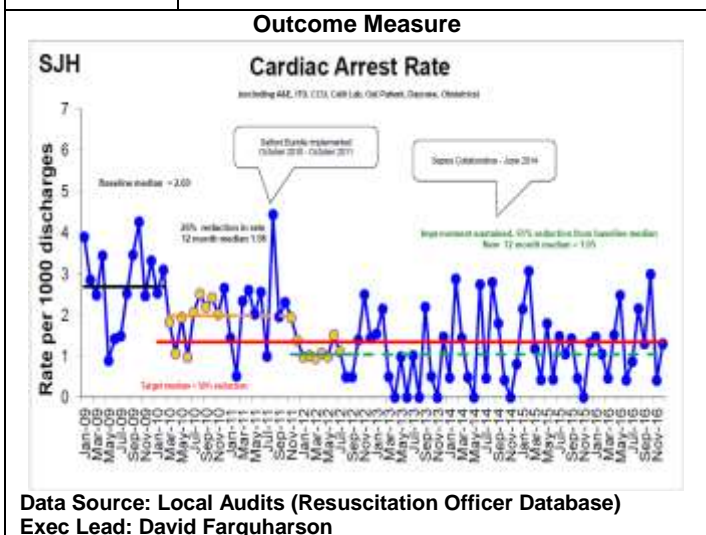
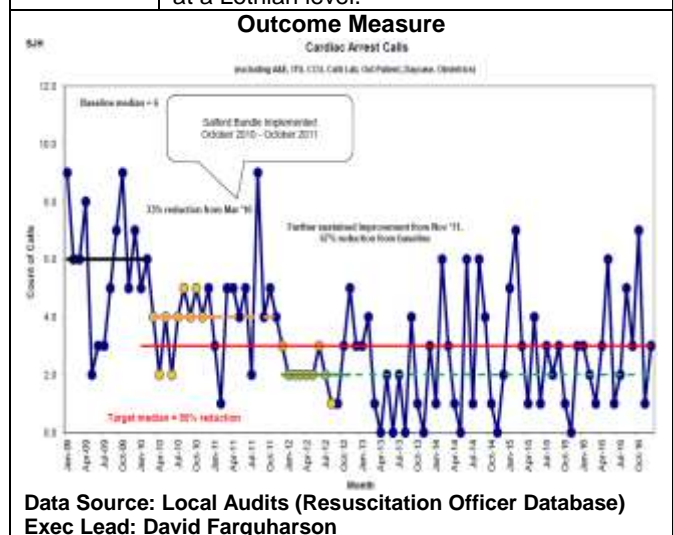
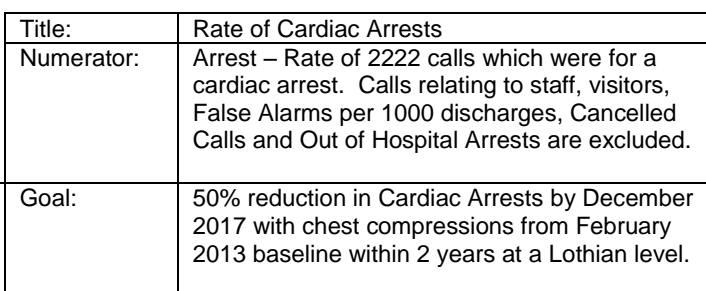
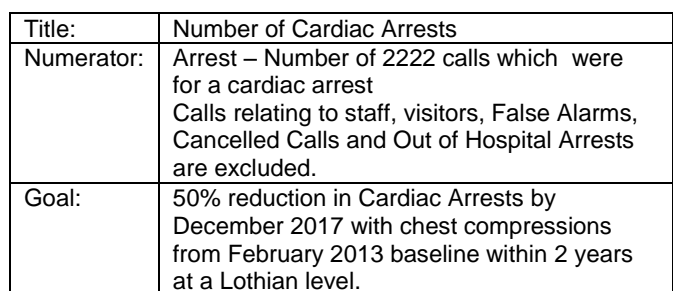
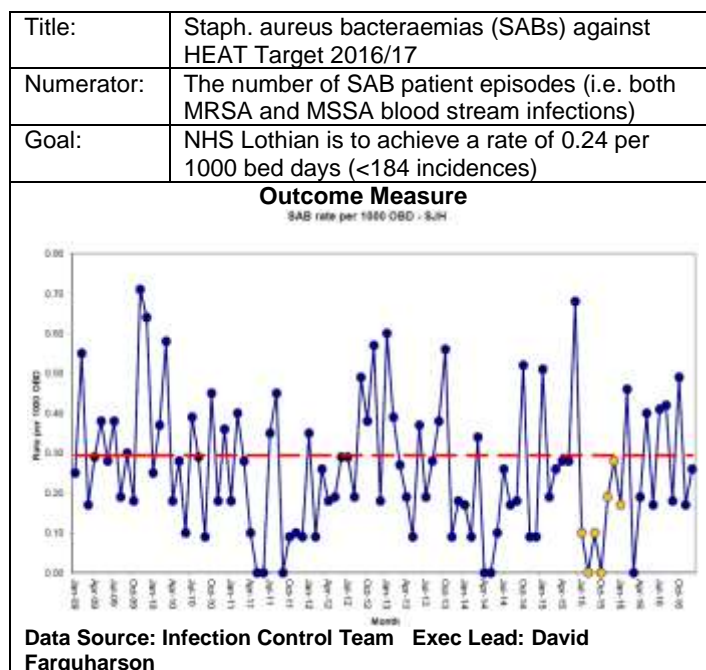
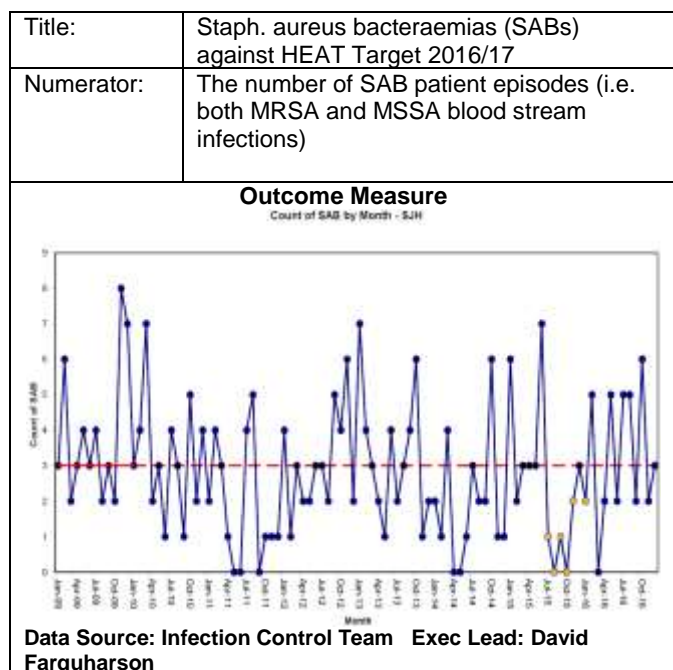
Data Source: Empower Exec Lead: Janis Butler

Safe

“There will be no avoidable injury or harm to people from healthcare they receive, and an appropriate, clean and safe environment will be provided for the delivery of healthcare services at all times.” Progress on this ambition is measured through standardised hospital mortality ratios, incidents with harm, adverse event rate, key performance indicators for incident management and HAI indicators.



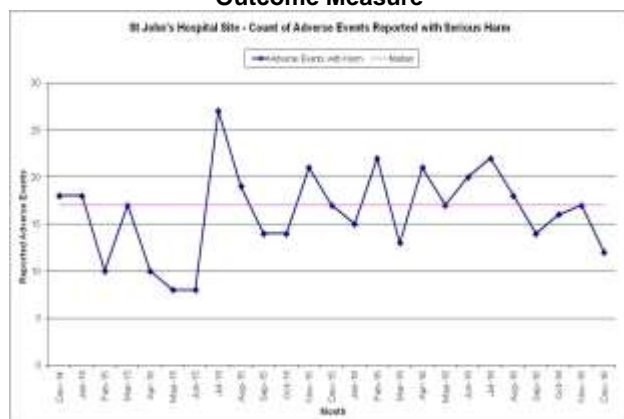
Safe (cont'd)



Safe (cont'd)

Title:	Adverse Events with harm
Numerator:	Number of adverse events associated with major harm/death reported per month
Goal:	There are specific goals for reductions in Falls

Outcome Measure



Data Source: Datix Exec Lead: David Farquharson

Title:	Patient Falls with Harm
Numerator:	Number of falls reported with harm, moderate, major/ death.
Goal:	20% reduction in inpatients falls and associated harm by December 2015

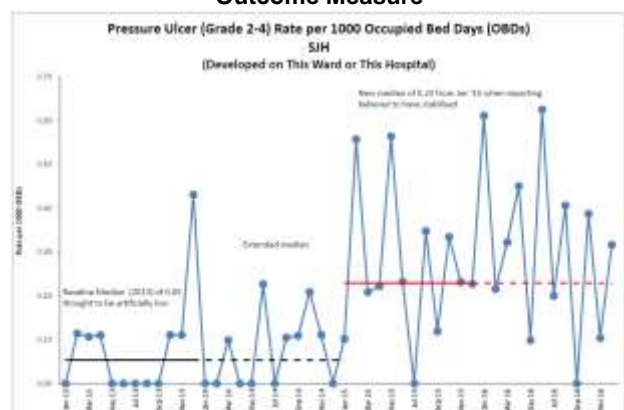
Outcome Measure



Data Source: Datix Exec Lead: Alex McMahon

Title:	Number of Pressure Ulcers per month
Numerator:	Number of Grade 2 or above pressure ulcers
Goal:	To reduce pressure ulcers in hospitals by 50% by December 2017 (SPSP goal)

Outcome Measure



Data Source: Datix Exec Lead: Alex McMahon

Effective

“The most appropriate treatments, interventions, support and services will be provided at the right time to everyone who will benefit, and wasteful or harmful variation will be eradicated.” Progress on this ambition is measured through clinical quality indicators, stroke care, medicine reconciliation and cost effective prescribing in primary care.

Title:	A&E 4 Hour Wait for St. Johns
Numerator:	Number of patients waiting less than 4 hours from arrival to admission
Denominator:	Number of patients attending
Goal:	95% of patients waiting less than 4 hours from arrival to admission or discharge

Process Measure

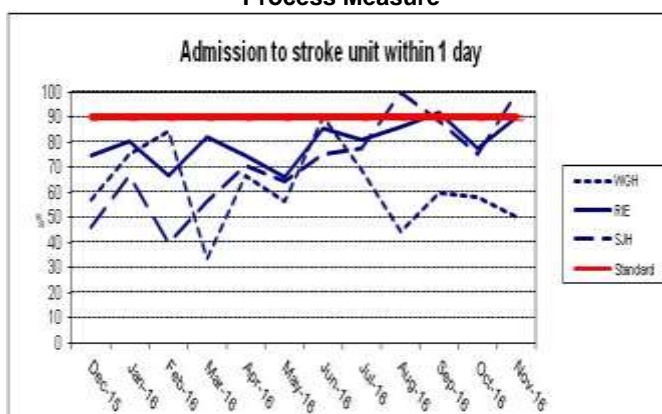


Data Source: TRAK

Exec Lead: Alex McMahon

Title:	Admission to Stroke Unit within 1 day of admission
Numerator:	Number of patients with initial diagnosis of stroke admitted to an acute or integrated stroke unit within 1 day of admission
Denominator:	Number of patients admitted with initial diagnosis of stroke excluding in-hospital strokes, patients discharged within 1 day and transfers in from another health board
Goal:	90% of patients admitted with acute stroke should be in a Stroke Unit by the day after hospital admission

Process Measure

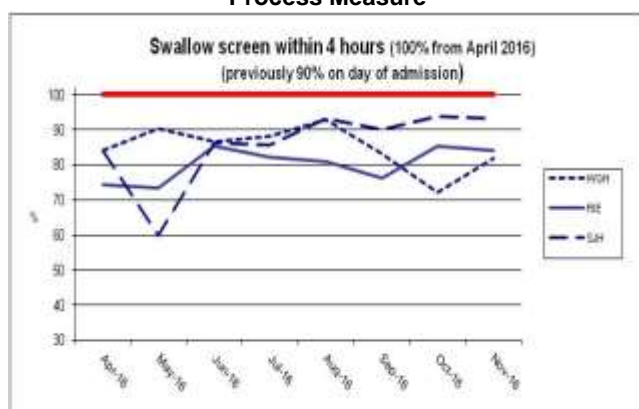


Note: 2015 data is not validated and should be treated as provisional

Data Source: ISD Exec Lead: Jim Crombie

Title:	Stroke Treatment Measures
Numerator:	Number of admitted patients with initial diagnosis of stroke that have a swallow screen on the day of admission
Denominator:	Number of patients admitted with initial diagnosis of stroke
Goal:	100% of patients with initial diagnosis of stroke should receive a swallow screen on day of admission

Process Measure

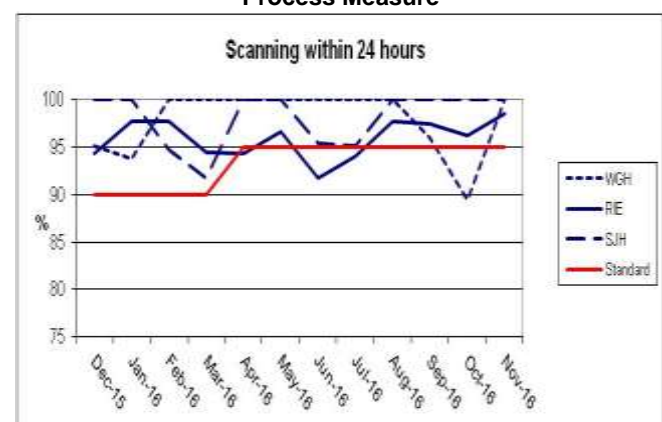


Note: 2015 data is not validated and should be treated as provisional

Data Source: ISD Exec Lead: Jim Crombie

Title:	Stroke Treatment Measures
Numerator:	Number of admitted patients with initial diagnosis stroke that have a brain scan within 24 hours of arrival
Denominator:	Number of patients admitted with initial diagnosis of stroke
Goal:	90% of patients with initial diagnosis of stroke should receive a brain scan within 24 hours of admission

Process Measure

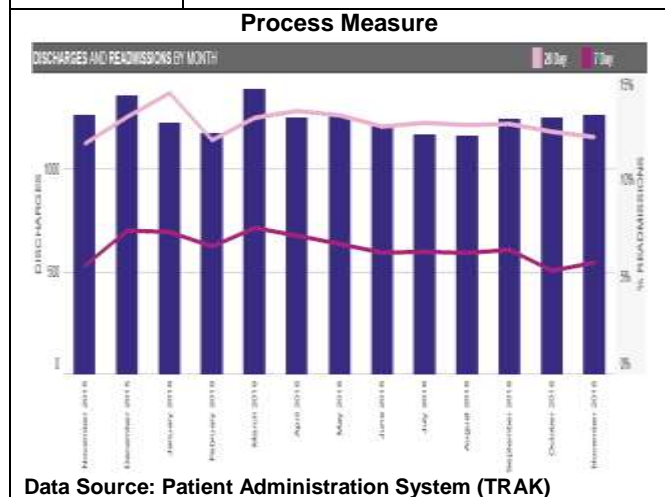


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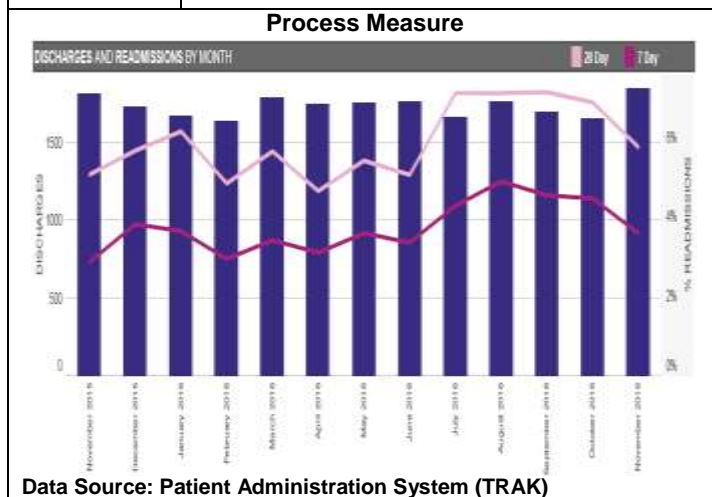
Data Source: ISD Exec Lead: Jim Crombie

Effective (cont'd)

Title:	Medical Readmission Rates
Numerator:	Number of patients being re-admitted within 7 and 28 days of admission
Denominator:	Number of patients admitted
Goal:	To be confirmed.



Title:	Surgical Readmission Rates
Numerator:	Number of patients being re-admitted within 7 and 28 days of admission
Denominator:	Number of patients admitted
Goal:	To be confirmed.



**ST JOHN'S HOSPITAL STAKEHOLDER GROUP
Work Plan 15 February 2017**

SUBJECT	OFFICER
2017	
15 February Meeting	
Paediatric Services/Paediatric Outpatient Clinic Waiting Times Update	Fiona Mitchell
St John's Hospital Quality Dashboard	Agnes Ritchie
Hospital Weekend Working and Staffing Requirements	Aris Tyrothoulakis
15 March Meeting	
Paediatric Services/Paediatric Outpatient Clinic Waiting Times Update	Fiona Mitchell
Hospital services in relation to treating and managing diabetes	Joan Donnelly & Nicola Zammit
Identifying ways to reduce pressure ulcers in hospital patients	Agnes Ritchie
19 April Meeting	
Paediatric Services Update	Fiona Mitchell
17 May Meeting	
Paediatric Services Update	Fiona Mitchell
21 June Meeting	
Paediatric Services Update	Fiona Mitchell
West Lothian Childhood Obesity Project Update	Dr Rajeeb Rashid

Items to be scheduled	
Delivery of services for stroke patients	Aris Tyrothoulakis/Jacquie Campbell