Nottingham University Hospitals Trust Quality Account 2022/23

Comment from Nottingham City Council Health and Adult Social Care Scrutiny Committee

The Nottingham City Health and Adult Social Care Scrutiny Committee welcomed the opportunity to discuss the Trust's Quality Account 2022/23 with colleagues from Nottingham University Hospitals NHS Trust and is pleased to be able to comment on it. The Committee's comments focus on areas in which it has engaged with the Trust in 2022/23.

The Committee has been concerned about the Care Quality Commission's assessment of how the Trust is led because that impacts on the quality and safety of care provided by the Trust as a whole. Given the importance of credible leadership in leading and embedding the necessary change, the Committee welcomed the changes at senior leadership level during the last 12-18 months and the impact that has appeared to have. During the course of this year, the Committee has sought reassurance about the level and quality of system oversight and support in place for the Trust, and feedback to the Committee has been that the Trust is engaging positively with regulators and oversight organisations. The Ockenden Review in relation to maternity services is ongoing and the Trust will also need to respond to its findings as they emerge. However, it is nevertheless still concerning that it is necessary for the Trust to be subject to such external scrutiny arrangements. In last year's comment on the Trust's Quality Account, the Committee highlighted its particular concern about the CQC's findings in relation to bullying and discrimination, specifically allegations attributed to racial discrimination. The Committee is pleased to note more specific acknowledgement of these issues and work to address them in this year's Quality Account document, which is important for both staff experience and its implications for patient safety and experience. The Committee welcomes the development of an Inclusion Strategy and encourages this to have an explicit focus on practical implementation to ensure that good intentions result in embedded change.

In recent years the Committee has had concern about the pace of change in improvement, but the Committee recognises activity over the last year to strength programme management office support and install appropriate application of a project management approach to improvement. While the Committee feels that the Trust has begun to improve its listening to staff, it is important that a listening culture is truly embedded and information provided to the Committee indicates that there is more to do. The Committee suggests that this should include engaging with staff on the Inclusion Strategy and developing plans to listen to staff at all levels about if, and how they feel it has resulted in change. The Committee also acknowledges the work that has been done to address concerns about incident recognition, reporting and investigation. The Committee believes that a high reporting culture is positive, but the number of Never Events over the last year is a concern. It is important that the Trust not only improves its processes for reporting but is also able to demonstrate to patients that it is learning from incidents and embedding real changes as a result to avoid similar incidents being repeated. The Committee supports the application of Just Culture principles that focus on system improvements. It is positive that the backlog of incident work in maternity services has now been largely completed and that there are plans for a more sustainable approach to incident management. It is also positive to hear from the Trust that its learning from these incidents is consistent with initial feedback from the Ockenden Review.

The Committee welcomes the commitment to improving maternity services and the work streams that the Trust has in place to address issues such as staff recruitment and retention in that service. However, issues across the Trust with workforce recruitment, and the impact

of this on quality and safety remain a concern for the Committee. The Committee recognises that recruitment is a national issue and that more needs to be done to invest in training at a national level. However, there are local challenges with retention, such as workforce experience and culture and the Committee is concerned about the impact of workforce pressures on patient safety with the potential increased risk of unintended mistakes, with people distracted and risk of insufficient attention to detail.

While it is important that providers do all that they can to maximise efficient use of their own resources, many of the challenges facing providers are system-wide issues that require a system-wide response. The Committee supports the Trust's continued approach of engaging with partners across the health and social care system, and beyond to develop solutions to these challenges. The Committee has heard examples of how the system has come together to support each other in response to particular pressures, such as industrial action, and while these one-off collaborations require additional investment, the Committee encourages all partners to review the lessons learnt from this and whether elements of such approaches can be used on a more regular basis if decisions are taken as a system rather than as individual organisations. As an example, when the Committee looked at changes that the Trust made to the triaging of referrals to the neurology service it felt that the Trust could have had stronger engagement with stakeholders, such as GPs, primary care partners and patients, when developing the proposals for change. The Committee suggests that this could be an area for improvement in the future.

The Committee is supportive of a continued focus by the Trust on the same improvement priorities for 2023/24. While the report details the progress that has been made there is clearly opportunity to do more and there will be benefits of maintaining momentum on these issues. However, the Committee feels that it would be preferable for a two year programme to have been set out in plans at the outset, and would like assurance for the future that programmes for improvement are based on a robust understanding of the nature and scale of the issues and are realistic and achievable within available time and resources.