



Issue No.28 Summer 2018



The Dudley Group
NHS Foundation Trust



YOUR **trust**



Healthy Fabulous Fruit
R.I.T.A. Therapy
Dudley goes digital
Excellence Winners



ALSO IN THIS ISSUE... ANNUAL SUMMARY / QUALITY PRIORITIES /
LONG SERVICE AWARDS / CHARITY FUNDRAISING UPDATES

Welcome from the Chair and Chief Executive



Jenni Ord, Chairman



Diane Wake CEO

Welcome to Your Trust magazine; find out just some of our highlights throughout the year. The issue includes our 2017/18 Annual Summary – an overview of our performance and achievements during the year. On pages 8 to 21 you will find a summary of performance against our quality priorities and national targets, our end-of-year financial position and some of the 2017/18 key highlights.

It is important we say thank you to everyone who has been involved in the Dudley Group over the last 12 months. It has been a year of

ups and downs and we want you to know we are committed to the delivery of excellent care in all our services, fostering and maintaining excellence where it exists and driving substantial improvements where it is necessary.

The NHS faced unprecedented demands last year, especially throughout winter. The emergency department at Russells Hall Hospital has seen a 9.4% increase in attendances over the last five years. Within this is a 41.3% increase in attendances for patients aged 85 and older. This is very significant as these patients are often seriously ill, with multiple health problems, requiring various diagnostic tests, longer stays in hospital and substantial support in the community to be discharged from hospital safely.

We continue to redesign how we see and treat emergency patients. The brand new £2.6m Emergency Treatment Centre was completed this year providing new

“The emergency department at Russells Hall Hospital has seen a 9.4% increase in attendances over the last five years.”

facilities for the Urgent Treatment Centre, run by Malling Health, and our Emergency Department waiting area. Through this new build, we took the opportunity to relocate our minor injuries and ambulance triage area to help with better patient flow.

Further investments have been made at the Guest Outpatient Centre for a new £3.5 million imaging suite including a new MRI scanner and refurbishment of our renal satellite centres in Tipton and Kidderminster. The new facilities at the Guest will be able to handle almost 20,000 extra scans a year and reduce waiting times for patients. All patients sent for an MRI or CT scan by their GP will no longer have to visit Russells Hall Hospital or Corbett Outpatient Centre but will, instead, go to Guest.

Care Quality Commission (CQC) Inspection

The CQC team visited us in December 2017 and January 2018. They inspected five core services at Russells Hall Hospital and also community adult services including sexual health services.

We were pleased that the inspectors found our services to be caring overall, rating the care given as good. However, we are hugely disappointed that our overall Trust rating remains Requires Improvement.

We are particularly disappointed that our Emergency Department has been rated inadequate, as staff have faced challenging demands for services, especially in the winter period.

The emergency department has a service improvement plan in place to deliver the safe, effective and responsive care that patients can expect and our staff aspire to. Key areas for improvement include timely triage of patients to direct them to appropriate services, consistent safeguarding practices for all patients and more effective monitoring of deteriorating patients.

Medical care, including how we care for older people, maintained a good rating, this

includes a Stroke Service which is one of the best in the region. Also pleasing was the recognition of improvements in Maternity Services, which also attracted a good rating.

We are proud that community services were rated good, and the CQC found examples of outstanding practice, in particular, the innovative multi-disciplinary working to provide good care to patients. Compassionate care was noted and the feedback from patients confirmed this.

All staff are committed to making the improvements required, arising from our internal investigations or external assessments. Inspectors commented favourably on our incident reporting. They also received excellent feedback about how the team have tailored services to meet the needs of individuals.

We launched the monthly Healthcare Heroes awards this year to recognise individuals and teams who go above and beyond every day to improve patient care. We have been really impressed by the quality of all the nominations making it a tough job to choose the winners.

Trust volunteers continue to provide an amazing service supporting staff and patients. The team of over 450 volunteers provide a variety of roles from emergency department hosts, to wayfinding.

We received national recognition from the Secretary of State for Health Jeremy Hunt for our improvement to the proportion of cancer patients who received treatment within 62 days of referral in the period of August 2017 to October 2017 in comparison with May 2017 to July 2017.

We continued to raise awareness of dementia, a condition that affects 850,000 people a year in the UK. Staff were able to take advantage of a mobile virtual dementia tour bus and experience the fear and frustration people with dementia go through on a daily basis. Some of our staff who took the tour experienced a range of simulative distortion which robbed them of their senses to recreate the isolation and fear that people with dementia may experience every day.

Changes to the Board of Directors and Council of Governors

Several changes have occurred this year including the post of chief executive. We welcomed Siobhan Jordan, chief nurse in April 2017, Julian Hobbs, acting medical director in October 2017 and Karen Kelly, chief operating officer in January 2018. Natalie Younes joined us as director of strategy and business development in September 2017 and finally

Tom Jackson took the vacant finance director post in 2018.

We said goodbye to a number of long serving colleagues in our Council of Governors including Rob Johnson, lead governor who was succeeded by Fred Allen.

Looking forward we have much to do and we do not underestimate what is expected of the Trust. We will be embracing keener and more consistent quality improvement activities in

partnership with our regulators and through other facilitated support. We also know we have to deliver within our financial plan and to also secure the best possible workforce to support patients.

Jenni Ord, Chairman
Diane Wake CEO

Secret garden declared open

A bare piece of land next to the children's outpatients department has been transformed and features a slide, swings and sensory toys to provide children with a relaxing outdoor environment.

Former Mayor of Dudley, Cllr Tyler declared the garden open at an event attended by parents and children who will benefit from the new garden. He said he was bowled over by the results of such hard work.

The secret garden was an idea suggested by parents at a listening event to improve the experience for children with additional needs. This idea also formed part of an award entry shortlisted for the Nursing Times Awards 2017.

Learning disabilities liaison nurse Jacqui Howells wanted to transform the bare, unused area for the benefit of children and thanked all those who donated to the project.

“It is amazing because we know what a difference this secret garden will make not only to our children but also to their families and our staff,” said Jacqui.

“I would like to thank our PFI partners Interserve for funding the garden and also Tesco and Rosscamm for their generous donations.”

Trust staff and members of Arise Church in Kingswinford also held fundraising events in aid of the secret garden.



Before After

“we know what a difference this secret garden will make not only to our children but also to their families and our staff”



The fruit stall at night



The Trust has welcomed Brierley Hill's Young's Fresh Fruit stall which is located directly outside the hospital's main entrance, to give staff, patients and visitors the opportunity to buy fresh fruit and vegetables and help get Dudley healthy.

The stall is open from 8am until 4pm Monday to Friday and sells everything from bananas to blueberries and peaches to potatoes.

Chief Executive Diane Wake, said, “We want to make it as easy as possible for the people of Dudley to lead healthy lives and make good choices, whether they visit the stall for a tasty treat or as part of their weekly shop.

“We really hope that the addition of this new stall is invaluable for our patients, visitors and the local community.”



Join our team of volunteers

Volunteering with us can make such a difference to patients and visitors. We are currently recruiting volunteers to join our fabulous team. If you are aged 16 or over, and you can spare a few hours a week, why not get in touch? We'd love to hear from you!

We have a variety of volunteering roles with vacancies at the moment, from assisting patients at mealtimes to helping visitors find their way around our hospitals. If you are interested in becoming a volunteer, please telephone our volunteers' coordinator on **(01384) 456111 ext. 1887** or email dgft.volunteering@nhs.net



What our volunteers say...

“It means the world to me if I can make just one person smile.”

Tony, Rowley Regis

Get social with us!

Want to stay up-to-date with all the latest Trust news and info? Check out our Facebook and Twitter pages for our latest job vacancies, volunteering opportunities, press releases, Trust events, photos and announcements.

If you don't already, like or follow us and invite your friends to do the same! Find us on both Facebook and Twitter by searching for 'DudleyGroupNHS'



Like



R.I.T.A. brightens up the day for dementia patients

The Dudley Group has introduced new digital reminiscence therapy software to areas across Russells Hall Hospital to offer extra support to patients with dementia.

The Reminiscence Interactive Therapy and Activities (RITA) software is a form of cognitive therapy which helps to calm, stimulate and reduce agitation in patients with dementia. The therapy has been proven to positively engage patients, who have a cognitive decline in mental abilities such as memory and thinking.

The software, in the form of a tablet device, helps patients to relax, recall memories and encourage interaction between them and their families.

Matron Rachel Tomkins has been involved in training staff on how to use the software across the hospital.

“The reminiscence software has already made a massive difference to our patients in such a short space of time.

“I really believe that this fantastic piece of technology is helping to make our patients feel more comfortable during their stay and that it is also contributing to a reduction in falls.”

The Trust has purchased ten tablets which hold a wide range of interactive activities for patients to access, such as a library of music from every generation, old and new films to watch and an app for families to create personalised life albums by uploading photos with their loved ones.



▲ Rachel Tomkins showcasing the new software

“This fantastic piece of technology is helping to make our patients feel more comfortable during their stay and that it is also contributing to a reduction in falls”

Dudley Group goes Digital

digital trust 

The first phase of our multi million pound investment in IT was launched across the Trust in May 2108. The launch saw the first part of a staged roll out with electronic observations or eObs to all wards and departments.

The new electronic patient record will make a huge difference to patient care, it helps staff to make the best decisions for our patients, because all the information is in one place, all of the time.

Clinicians will have access to relevant information 24 hours a day, seven days a week.

There will be no need for us to repeatedly take demographic information on each piece of paper and data will only have to be inputted once, saving time!

Being digital will allow early recognition and escalation for all of our deteriorating patients, allowing the right people to get to the right place at the right time, to prevent further deterioration. This will improve patient safety.

We are investing £32 million over the next 10 years in a Digital Trust programme to develop a full electronic patient record (EPR).

We signed a 10 year contract with Allscripts to deliver 'Sunrise Clinicals', a complete digital clinical solution, across the Trust, including the capability to share records with patients.



“We are investing £32 million over the next 10 years in a Digital Trust programme to develop a full electronic patient record”

committed to excellence 2018

Committed to Excellence 2018 recognised staff for going the extra mile to provide outstanding care and support. The winners were announced at an awards ceremony at The Venue in Dudley with host Nick Owen from BBC Midlands Today. The awards are made possible by the generosity of our sponsors and we would like to say a special thank you to them: Interserve, Allscripts and Four Eyes Insight Ltd. (main event sponsors); Summit Healthcare (category sponsor); Zicam Security, Geoff Hill Charitable Trust, Healthcare Staff benefits and Hill Dickinson.



Ward C8
Stroke
Healthcare
Hero Team
Award



Site Team Chief
Operating Officer
Award



GI Zenkers Team
Medical Director
Award



Emma Long
Excellence in
Patient Care



Sepsis Team Chief Nurse Award



Sara Davis Chief Executive Award



Digital Trust Team Excellence in Business Development



Contraception
& Sexual Health
Team Excellence



Michelle Pinto
Outstanding
Achievement
Award Individual



Peter Bisbey
Volunteer Award



Cardiac Assessment Team Medicine
& Integrated Care Award



C4 Georgina
Unit Patient
Choice Award



Karen Lewis
Healthcare Hero
Individual Award



Pharmacy management
Team Clinical Support
Services Award



Megan Jane Fleetwood Chairman Award



Becky Field Surgery Women & Children Award



Andrew Rigby Unsung Hero Non-clinical



Maternity
Department
Outstanding
Achievement
Award Team



Kate O'Connor Unsung Hero Clinical



Governance Team
Corporate Services Award

DudleyGroupNHS

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WITH THANKS TO OUR SPONSORS...

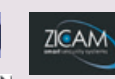
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SILVER CATEGORY SPONSOR



BRONZE CATEGORY SPONSORS



HILL DICKINSON
LAWYERS

This year in summary



Annual Summary 2017/18

Every year we publish our Annual Report, Accounts and Quality Report which gives a detailed account of our performance throughout the year in key quality, financial and national priority areas.

Over the coming pages you will find an overview of the year's achievements, details of our performance against our five quality priorities and a summary of our financial statements.

The full Annual Report, Accounts and Quality Report is available on our website at www.dudleygroup.nhs.uk

OUR VISION

Trusted to provide safe, caring and effective services because people matter.
Delivered through our six strategic objectives:



Summary of Key Achievements 2017/18



We continue to be pleased with the hard work and professionalism of our staff who have responded to the needs of very high numbers of patients, whilst striving for care excellence.

Many staff took the opportunity to receive their flu jab protecting themselves, their families and their patients over the winter period. At 75% of staff this was the highest number vaccinated at the Trust.

Award recognition

- ▶ We achieved a hat trick for Dudley in the Nursing Times Awards shortlist. Shortlisted in three categories: Continence Promotion and Care, Nursing in the Community and Child and Adolescent Services.
- ▶ The Trust's learning disability simulation pathway was also shortlisted in the category of Student Experience in the Student Nursing Times awards 2017.
- ▶ We were finalist's at the Patient Experience Network National Awards for improving the experience of patients with a learning disability.
- ▶ Oncology prescribing pharmacist Manesh Patel was shortlisted in the Medicines Optimisation category of the West Midlands Academic Health Science Network (WMAHSN)'s second annual Celebration of Innovation awards.
- ▶ We once again received a CHKS top hospital award for being one of the best performing trusts in the UK.

We also held a new-style Long Service Awards event which celebrated over 1,000 years of service for our hardworking staff who have reached the milestones of 10, 25 and 40 years' service working for the Trust. The event was a great success and many staff attended.

Key national targets

We continue to perform well against the standards for key national performance indicators in particular relating to referral to treatment times and urgent cancer referrals. The four-hour emergency access target continues to be a challenge and this is mirrored across the country. Page 18 gives more information about these nationally-set standards.

In our planned services, we have continued to improve key performance areas and invested in services such as ophthalmology and paediatrics where additional staffing has supported plans to reduce waiting times for services.

Infection prevention and control

We fully met our quality priority targets for both MRSA and clostridium difficile, with 0 cases of MRSA since September 2015 and just 18 cases of C. diff (against a target of 30) attributed to the Trust due to a lapse of care. Full details about this target can be found on page 14.

Long Service Awards 2017/18 celebrating some of this year's longest serving staff



On pages 11-18 we describe our key quality priorities for last year and look forward to those for 2018/19

Priority 1 Patient Experience

Friends and Family Test

We set out to achieve monthly scores in the Friends and Family Test (FFT) for all areas (inpatients, outpatients, maternity, Emergency Department and community) that are equal to or better than the national average.

When monthly national figures have been available (92) we achieved the target on 56 occasions. Both maternity birth and postnatal achieved the target every month with maternity postnatal community missing the target in just one month.

% FFT Scores		APR '17	MAY '17	JUN '17	JULY '17	AUG '17	SEP '17	OCT '17	NOV '17	DEC '17	JAN '18	FEB '18	MAR '18
MATERNITY	Inpatient	✓	✗	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗
	A & E	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
	Maternity Antenatal	✓	✓	✗	✓	✓	✓	✓	*	✓	✗	✗	✓
	Maternity Birth	✓	✓	✓	✓	✓	✓	✓	*	✓	✓	✓	✓
	Maternity Postnatal Ward	✓	✓	✓	✓	✓	✓	✓	*	✓	✓	✓	✓
	Maternity Postnatal Community	✓	✓	✓	✓	✗	✓	✓	*	✓	✓	✓	✓
	Community	✗	✓	✓	✓	✓	✓	✓	✗	✗	✓	✓	✓
Outpatients		✓	✓	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗

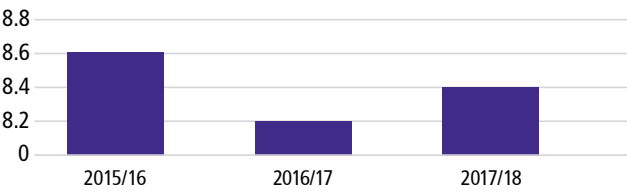
Items marked * Please note that NHS England has not supplied the national results for Maternity services in November 2017. Advice given is that every effort is being made to produce this as soon as possible, subject to data quality considerations.

Local Survey

Improve the overall year score from 2016/17 to 2017/18 for the following question used in our local real-time patient survey: Were you involved as much as you wanted to be in decisions about your care?

The score at the end of 2017/18 was 8.4 compared to the 2016/17 full year score of 8.2. This priority is achieved.

Were you involved as much as you wanted to be in decisions about your care and treatment



Pain Management

Ensure that in 95% or more cases, a patient's pain score is recorded at least every four hours (unless otherwise indicated in the exception box)

Although this target was achieved for four individual months, it can be seen that it has not been achieved consistently throughout the year, and so this target has been retained for 2018/19.

General Inpatients	2016/2017	Q1 2017/2017	Q2 2017/2017	Q3 2017/2017	Q4 2017/2017	2017/2018
Pain score recorded	90%	95%	88%	94%	93%	93%

New priority 1 for 2018/19: Patient Experience

- ▶ Achieve monthly response rates in Friends and Family Test for all areas that are equal to or better than the national average.
- ▶ Achieve monthly scores in Friends and Family Test for all areas that are equal to or better than the national average.
- ▶ Improve the overall year score from 2017/18 to 2018/19 for the following question used in our local real-time survey: Were you involved as much as you wanted to be in decisions about your care?
- ▶ Ensure that in 95 per cent or more cases, a patient's pain score is recorded at least every four hours (unless otherwise indicated in the exception box).

Developments planned for 2018/19

- ▶ Hold 'Feedback Fridays' weekly to encourage responses to the survey.
- ▶ Ensure that all areas have a champion for FFT.
- ▶ Ensure that all areas where participation is low have action plans in place.
- ▶ Complete the roll out of SMS messaging.
- ▶ Ensure delivery of improvement actions identified using FFT feedback to support an improved percentage recommended score.
- ▶ Ensure study days occur in May so that all staff are re-educated on the importance of pain management and its correct documentation.
- ▶ Clarify the audit question so that it covers all documents where pain relief may be recorded.

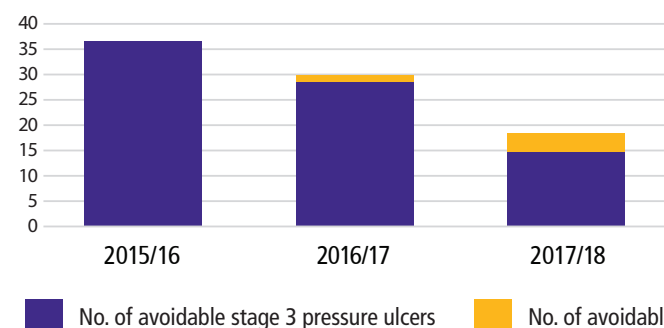
Priority 2 Pressure Ulcers

Hospital

- a) Ensure that there are no avoidable stage 4 hospital acquired pressure ulcers throughout the year.
- b) Ensure that the number of avoidable stage 3 hospital acquired pressure ulcers in 2017/18 reduces from the number in 2016/17.

The graph below shows the total number of avoidable stage 3 and 4 pressure ulcers that have developed in the hospital from 2015/16 to the present. It gives an indication of the fall in numbers due to the hard work of all staff involved. While there were 30 stage 3 and 4 ulcers in 2016/17, these have been reduced to 18 this year. The target for avoidable stage 3 pressure ulcers has been achieved with a reduction from last year from 29 to 15. For avoidable stage 4 hospital acquired pressure ulcers, the target set was that there would not be any. Unfortunately, we have not achieved this target as we have had three this year.

Total number of avoidable stage 3 and 4 pressure ulcers developed in the hospital



New priority 2 for 2018/19: Pressure ulcers

Hospital

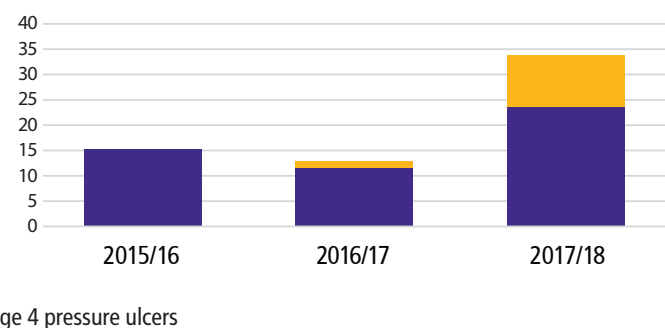
- ▶ Ensure that there are no avoidable stage 4 hospital acquired pressure ulcers throughout the year.
- ▶ Ensure that the number of avoidable stage 3 hospital acquired pressure ulcers in 2018/19 reduces from the number in 2017/18 by at least 10 per cent.

Community

- a) Ensure that there are no avoidable stage 4 pressure ulcers acquired on the district nurse caseload throughout the year.
- b) Ensure that the number of avoidable stage 3 pressure ulcers acquired on the district nurse caseload in 2017/18 reduces from the number in 2016/17.

The target of there being no avoidable stage 4 pressure ulcers acquired throughout the year on the district nurse caseload has not been achieved as there have been 10 cases this year. The target to reduce the number of avoidable stage 3 acquired from 2016/17 to 2017/18 has not been achieved with there being 24 cases compared to 12 the year before (see graph below).

Total number of avoidable stage 3 and 4 pressure ulcers developed on the district nursing caseload



Community

- ▶ Ensure that there are no avoidable stage 4 pressure ulcers acquired on the district nurse caseload throughout the year.
- ▶ Ensure that the number of avoidable stage 3 pressure ulcers acquired on the district nurse caseload in 2018/19 reduces from the number in 2017/18 by at least 10 per cent.



Developments that occurred in 2017/18

- ▶ The Trust-wide pressure ulcer prevention and management documentation (SKIN bundle) was reviewed to ensure accuracy of recording and the ability to provide evidence of care delivered. This work was undertaken as part of the NHS England Collaborative Pressure Ulcer Improvement Program, which is an initiative involving 24 trusts across England.
- ▶ The current Root Cause Analysis (RCA) investigation process was reviewed to ensure that it is completed in agreed timeframes and the RCA documentation is more robust with action plans developed that are monitored to ensure shared learning is undertaken.
- ▶ The supply and use of pressure relieving devices was audited to ensure they are effective and appropriate so that patients receive the right device for their need.
- ▶ The number of device related pressure ulcers due to an oxygen mask and nasal cannula has been addressed with the use of an alternative device. There have been no further incidents since the change occurred but monitoring will continue.
- ▶ Photographic images are now made to support the verification process.

Developments planned for 2018/19

- ▶ Develop robust education and training programmes for staff.
- ▶ Plan and deliver three educational study days to address key priority topics, pressure ulceration, lower limb ulceration and complex wound management.
- ▶ Work with the patient safety team to develop robust reporting processes to ensure data collected is accurate.
- ▶ Explore the 'Risk Assessment' tool for the Emergency Department to ensure it is specific to the clinical area for patient assessment.
- ▶ Deliver the 'React to Risk' and '50 day pressure ulcer challenge' with an aim to reduce the incidence of avoidable stage 2, 3 and 4 pressure ulceration.
- ▶ Deliver the International 'Stop the Pressure' campaign to the Trust.



Priority 3 Infection control

We strive to protect our patients from infections.

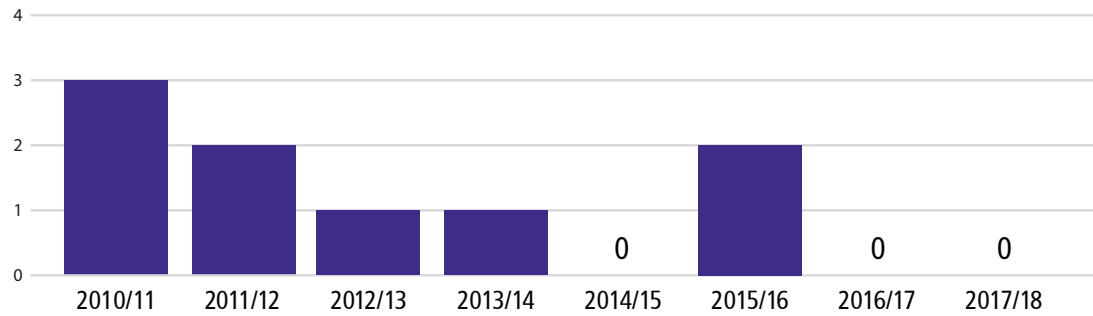
Maintain or reduce our MRSA and Clostridium difficile (C. diff) rates in line with national and local priorities. All cases will undergo a root cause analysis, the results of which will be discussed jointly by the Trust and Dudley CCG to agree on any avoidability/lapses in care.

MRSA

a) Have 0 post 48 hour cases of MRSA bacteraemia (blood-stream infections).

NHS England has set a zero tolerance approach to MRSA bacteraemia. There have been zero post-48 hour cases reported in the year and so the target has been achieved.

Total MRSA cases per year

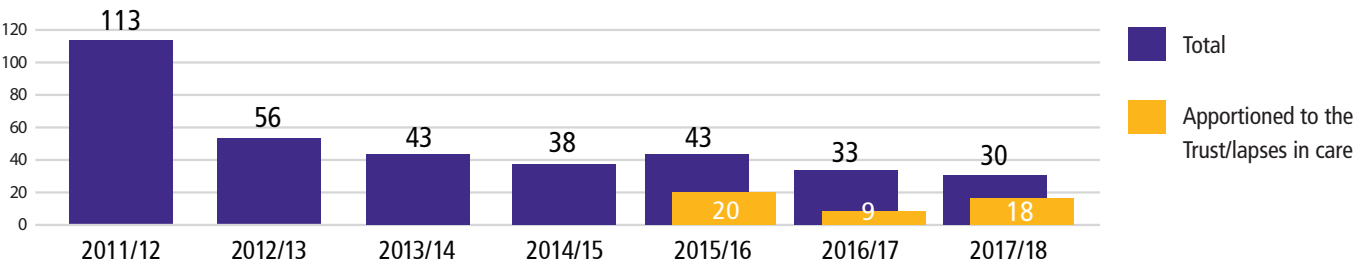


Clostridium difficile

b) Have no more than 29 post 48 hour cases of Clostridium difficile with a lapse in care identified.

In the year, we have reported a total of 30 cases of C. difficile of which 18 have been recognised as being due to a lapse of care and attributed to the Trust. The other cases are related to external factors.

Total C. difficile cases per year



New priority 2 for 2018/19: Infection Control

MRSA

- Have 0 post 48 hour cases of MRSA bacteraemia (blood stream infections).

Clostridium difficile

- Have no more than 28 post 48 hour cases of Clostridium difficile with a lapse in care identified.

Developments that occurred in 2017/18

- Developed current ward dashboard to include saving lives audit data.
- Held a cannula awareness day.
- Implemented new Clostridium difficile RCA investigation tool and assessment form.
- Developed a Glycopeptide Resistant Enterococcus (GRE) patient information leaflet.
- Undertook Infection Prevention and Control Awareness sessions in the main reception at Russells Hall Hospital.
- Participated in the annual World Antibiotic Awareness Week and European Antibiotic Awareness day in order to raise awareness of appropriate antibiotic use amongst staff, patients and visitors.

Developments planned for 2018/19

- Trust-wide mattress audit in conjunction with Tissue Viability.
- Participate in National Infection Prevention and Control week.
- Participate in W.H.O campaign – Clean Your Hands Campaign.
- Review process for Gram negative surveillance.
- Antimicrobial Stewardship awareness week.
- Review Antimicrobial prescribing and referrals from wards.
- Recruitment of governors as ‘infection control secret shoppers’.
- Review MRSA Screening Policies and data collection.
- Continue ongoing work with the wider health economy through the HCAI Partnership Group.
- Implement the revised mandatory training programme for infection control.
- Adopt the catheter ‘passport’ to improve catheter care across the health economy after final ratification.



Priority 4 Nutrition & Hydration

a) Ensure that the overall score of the monthly nutrition and hydration audit (made up of 24 items) is 95% or above in each of the first three quarters for the Trust as a whole and has a 'Green' rating (95% or above) in the final quarter for every ward in the hospital.

Nutrition audit Hospital

2016/2017	Qtr1 2017/2018	Qtr2 2017/2018	Qtr3 2017/2018	Qtr4 2017/2018	2017/2018
96%	95%	95%	94%	93%	94%

The target was met in the first two quarters (and in eight of the 12 months) but it was narrowly missed in the second two quarters (see chart below). For the target that every ward would achieve 95 per cent or above in the last quarter, 14 of the 20 areas had scores 95 per cent or above, with six wards not achieving the target.

Wards Qtr 4	95% and above	94 to 85%	84% and less
	14	4	2

b) At least 95% of hospital patients will receive a nutritional assessment using the nationally recognised MUST (Malnutrition Universal Screening Tool).

The MUST target for the hospital has not been met, although improvements were made throughout the year. It has been agreed to retain this target next year and make an extra effort to achieve this in the future.

MUST assessment Hospital

2016/2017	Qtr1 2017/2018	Qtr2 2017/2018	Qtr3 2017/2018	Qtr4 2017/2018	2017/2018
85%	91%	92%	93%	94%	93%

c) At least 95% of community patients will receive a nutritional assessment on initial contact with the community health nursing team using the nationally recognised MUST (Malnutrition Universal Screening Tool).

The MUST target for the community services has been met as the figures below indicate.

MUST assessment Community

2016/2017	Qtr1 2017/2018	Qtr2 2017/2018	Qtr3 2017/2018	Qtr4 2017/2018	2017/2018
96%	97%	96%	93%	98%	96%

Developments that occurred in 2017/18

- Evaluated progress of weekly patient weighing.
- Implemented updated fluid balance charts, underpinned with clear instructions on their use.
- Updated teaching package and placed on intranet.
- Reviewed dietetic team referral criteria guidance which includes an amended nutrition bundle.
- Ensured patients' nutritional needs were met by appropriate ordering of meals. Nutrition group worked with catering assistants.
- Had active publicity campaign as part of the National Nutrition week.
- Re-launched Nutrition Steering Group.
- Joined National Nutritional Collaborative working with other trusts on this topic.
- Nursing representation now in place at the Combined Services Group.
- Started Nutritional Observation Audit.

Developments planned for 2018/19

- Continue nutritional collaborative work by implementation of a more systematic approach to supported mealtimes.
- Revise protected meal policy as supported mealtime policy.
- Ensure nutrition link nurse group meets on a monthly basis and nutrition steering group on a three monthly basis.
- When new Electronic Patient Record is implemented, MUST assessment will be mandatory.
- Review the menus available in the Trust.
- Review food supplier.
- Implement a screensaver which will stress the importance of good nutrition.
- Organise a structured training programme on MUST for all staff across the Trust.
- Implement food hygiene training for all nursing staff that handle food (mandatory requirement).

New priority 4 for 2018/19: Nutrition and hydration

Ensure that the overall score of the monthly nutrition and hydration audit (made up of 24 items):

- is 95% or above in each of the first three quarters for the Trust as a whole.
- has a 'Green' rating (95% or above) in the final quarter for every ward in the hospital.

Nutrition assessments – hospital

- At least 95% of acute patients will receive a nutritional assessment within 24 hours of admission using the nationally recognised MUST (Malnutrition Universal Screening Tool).

Nutrition assessments – community

- At least 95% of patients will receive a nutritional assessment on initial contact with the community health nursing team using the nationally recognised MUST (Malnutrition Universal Screening Tool).

Priority 5 Medication

We recognise the importance of patients receiving their medications appropriately.

Ensure that in 95% or more cases, all prescribed medications will either be: a) signed and dated as administered or b) have an omission code recorded.

It can be seen from the chart opposite that even though there was an improvement later in the year the target for the whole 12 months has not been met and so this is retained for 2018/19.

Medications signed and dated/omission code recorded

End of year results 2016/2017	Qtr1 2017/2018	Qtr2 2017/2018	Qtr3 2017/2018	Qtr4 2017/2018	2017/2018
88-92%	94%	92%	93%	96%	93%

New priority 5 for 2018/19: Medications

- Ensure that in 95% or more cases, all prescribed medications will either be: a) signed and dated as administered or b) have an omission code recorded.
- All patients who have a known potential to have an adverse reaction or have an allergy or sensitivity to a product/medication are clearly identified by having a red identification band in place.

Developments that occurred in 2017/18

- Refocus of priorities for link workers for 2017/18 and shared action plan with senior team.
- Posters relating to missed dosage and efficacy of analgesia displayed in all medication trolleys and treatment rooms and kept up to date by link workers.
- Trust intranet for medicines management developed to become more user friendly for nursing/medical staff.
- Matron and pharmacy lead nominated.

Developments planned for 2018/19

- Collaborative work to be undertaken with the West Midland Medicines Safety Officer Group to benchmark trusts with omitted doses. Regular audit and action plans for the region will also commence.
- Electronic EPMA system to be launched in June 2018 which will alert nursing staff to doses due, reducing the risk of omitted doses. Following implementation monitoring and audit of omitted doses will become easier.
- Include missed doses in September 2017 Medicines Link Newsletter to re-educate all staff.
- Datix trends to be reviewed by Safer Medicines Group (SMP).
- Red wrist band policy to be written and agreed
- Red wrist band policy to be launched Trust-wide via the intranet

Priority 6 Discharge Management

- All patients will have an Expected Discharge Date (EDD) determined by assuming ideal recovery and assuming no unnecessary waiting.
- Early discharge. All medical and surgical wards will discharge the following number of patients before midday: In Q1, at least one patient. In Q2 at least two patients, which will be maintained in Q3 and Q4.
- Delays in discharge. The total number of days that patients due for discharge are delayed will reduce by the following compared to the same quarter in 2017/18: Q1 by 10%, Q2 by 15%, which will be maintained in Q3 and Q4.

Developments planned for 2018/19

- Ensure that daily ward rounds occur moving to twice daily ward rounds by the end of the year.
- Ensure that daily/twice daily ward rounds are included in consultant job planning.
- Implement the 'Red 2 Green' process.
- Reinstate 'stranded patient'/length of stay meetings.
- Ensure that the Estimated Discharge Date is a mandatory field on the patient administration system and the Estimated Discharge date is retained in the system.

Priority 7 Incident Management

Developments planned for 2018/19

- Expand the corporate incident management team to provide enhanced divisional support through a dedicated incident business partner.
- Enhance reporting on learning from past incidents to encourage future reporting.
- Development of the reporting of positive practice to encourage best practice.

- The Trust's reporting rate will increase every quarter, culminating in a 5% increase for the whole year and its comparative position on the reporting rate of incidents will improve every six months.
- In 2018/19, for the full year reduce the number of Serious Incidents (non-pressure ulcers) by 5% compared to the numbers in 2017/18.

Our performance against the thresholds set out in NHS Improvement’s Risk Assessment and Single Oversight Framework

National targets and regulatory requirements	Trust 2013/14	Trust 2014/15	Trust 2015/16	Trust 2016/17	Target 2017/18	National 2017/18	Trust 2017/18	Target Achieved?
1. Access								
Maximum time of 18 weeks from point of referral to treatment (RTT) in aggregate – patients on an incomplete pathway †	96.74%	95.43%	95.06%	95.43%	92%	89.1%	94.0%	😊
A&E: maximum waiting time of 4 hours from arrival to admission, transfer, discharge †	93.74%	94.68%	98.1%	94.16%	95%	88.36%	86.56%	😞
All cancers: 62 day wait for first treatment from urgent GP referral for suspected cancer	89%	85.6%	84.3%	85.3%	85%	82.2%	86.3%	😊
All cancers: 62 day wait for first treatment from NHS Cancer Screening Service referral	99.6%	97.3%	96.2%	98.2%	90%	90.9%	98.3%	😊
Maximum 6 weeks wait for diagnostic procedures	99.25%	97.75%	98.8%	97.41%	99%	99.03%	97.86%	😞
Venous Thrombolism (VTE) Risk Assessment	95.16%	95.33%	95.96%	94.75%	95%	95.25%	93.38%	😞

😊 = Target achieved 😞 = Target not achieved

† Data quality tested by external auditors.

2017/18 National Figures taken from NHS Statistics and Cancer WaitingTimes Database (quarterly figures averaged)



How we spent the money in 2017/18

If more detailed information about our financial performance is required, please see the full Annual Report and Accounts on our website www.dudleygroup.nhs.uk

OPERATING EXPENSES 2017/18 Total Spend £346.3m

Staff costs: £213.4M 62%

Other spend: £50M 14% includes £22.5M in relation to payments to the Trust's PFI partner for services provided

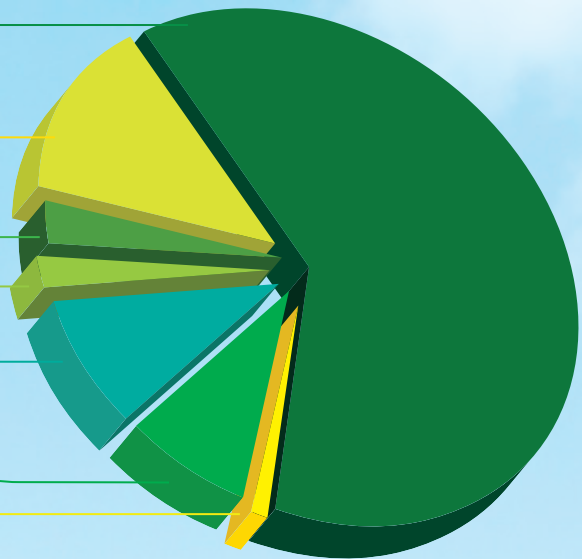
Depreciation, amortisation and impairments: £10.6M 3%

Establishment, transport and premises: £7.9M 2%

Drug costs: £32.7M 10%

Supplies and services: £29.1M 8%

Services from other NHS bodies: £2.6M 1%



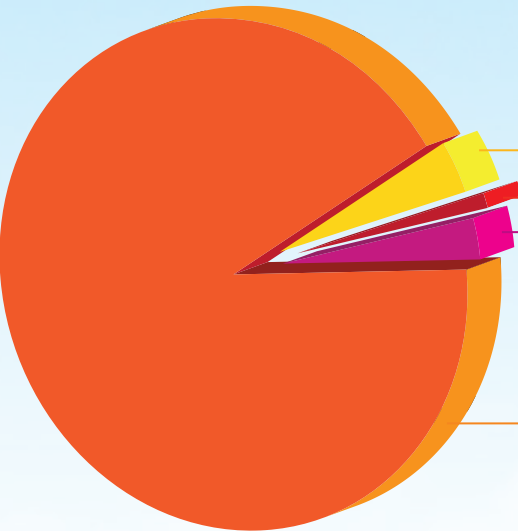
INCOME FROM ACTIVITIES 2017/18 Total Income £352.8m

Income received from education, training and research: £12.7M 4%

Income received from Sustainability and Transformation Fund (STF)*: £4.7M 1%

Income received from other sources: £12.3M 3%

Patient income received from Clinical Commissioning Groups, Local Authorities, other Trusts and Health Bodies, and Department of Health: £323.1M 92%



The Trust has received £4.728m of the Sustainability and Transformation Fund (STF) in 2017/18. £2.487m of this amount related to a core element of the fund which the Trust received for achieving both its financial and performance targets in quarter 1 and quarter 2 of the year. In addition the Trust received £2.241m incentive general distribution STF based on the balance of unearned STF after the core, incentive and bonus scheme payments, to all providers that signed up to a control total in 2017/18. This was on a sliding scale based on distance from the control total weighted by initial STF allocations set by NHS Improvement.

The £4.728m is recognised in other operating income within the statement of comprehensive income. The Trust was paid £2.487 during 2017/18 with the remaining £2.241m stated as accrued income within trade and other receivables on the statement of financial position.

Consolidated & Foundation Trust Statements of Comprehensive Income

For the year ended 31 March 2018

		Group		Foundation Trust	
	Note#	Year Ended 31 March 2018 £'000	Year Ended 31 March 2017 £'000	Year Ended 31 March 2018 £'000	Year Ended 31 March 2017 £'000
Operating Income from patient care activities	3	323,187	315,280	323,187	315,280
Other Operating Income	4	29,652	36,862	29,554	36,796
Total Operating Income from continuing operations		352,839	352,142	352,741	325,076
Operating Expenses of continuing operations	5	(346,316)	(326,788)	(345,972)	(326,634)
Operating Surplus / (Deficit)		6,523	25,354	6,769	25,442
Finance costs					
Finance income	9	117	122	66	72
Finance expense - financial liabilities	10	(11,039)	(11,089)	(11,039)	(11,089)
PDC Dividends payable		(3,129)	(2,976)	(3,129)	(2,976)
Net Finance costs		(14,051)	(13,943)	(14,102)	(13,993)
Gain/(loss) of disposal of assets	13	56	0	56	0
Corporation tax expense	11	(37)	(34)	0	0
Surplus/(Deficit) for the year from continuing operations		(7,509)	11,377	(7,277)	11,449
SURPLUS/(DEFICIT) FOR THE YEAR		(7,509)	11,377	(7,277)	11,449
Other comprehensive income					
Will not be reclassified to income and expenditure:					
Impairments	13	(505)	(23,294)	(505)	(23,294)
Revaluations	13	22,543	0	22,543	0
May be reclassified to income and expenditure where certain conditions are met:					
Fair Value gains/(losses) on Available-for-sale financial instruments	14	5	175	0	0
TOTAL COMPREHENSIVE INCOME/(EXPENSE) FOR THE YEAR		14,534	(11,742)	14,761	(11,845)

See full Annual Report and Accounts (pages 5 to 39) for notes at www.dudleygroup.nhs.uk

All income and expenditure is derived from continuing operations.

There are no Non-Controlling Interests in the Group, therefore the deficit for the year of £7,509,000 (2016/17 surplus of £11,377,000) and the Total Comprehensive Income of £14,534,000 (2016/17 Total Comprehensive Expense of £11,742,000) is wholly attributable to the Trust.

Consolidated & Foundation Trust Statements of Financial Position

As at 31 March 2018

		Group		Foundation Trust	
	Note#	31 March 2018 £'000	31 March 2017 £'000	31 March 2018 £'000	31 March 2017 £'000
Non-current assets					
Intangible assets	12	3,292	2,677	3,292	2,677
Property, plant and equipment	13	236,373	208,482	236,373	208,482
Other Investments	14	1,316	1,311	0	0
Trade and other receivables	17	12,026	10,388	12,026	10,338
Total non-current assets		253,007	222,808	251,691	221,497
Current assets					
Inventories	16	2,991	2,897	2,847	2,730
Trade and other receivables	17	12,926	21,802	12,754	21,982
Other financial assets	15	500	1,028	0	0
Cash and cash equivalents	24	14,113	18,026	13,496	17,367
Total current assets		30,530	43,753	29,097	42,079
Current liabilities					
Trade and other payables	18	(23,567)	(18,144)	(23,345)	(17,913)
Borrowings	23	(6,255)	(5,156)	(6,255)	(5,156)
Provisions	21	(147)	(140)	(147)	(140)
Other financial liabilities	19	(1,639)	(1,788)	(1,639)	(1,788)
Total current liabilities		(31,608)	(25,228)	(31,386)	(24,997)
Total assets less current liabilities		251,929	241,333	249,402	238,579
Non-current liabilities					
Trade and other payables	18	(40)	(80)	(40)	(80)
Borrowings	23	(122,236)	(127,432)	(122,236)	(127,432)
Total non-current liabilities		(122,276)	(127,512)	(122,276)	(127,512)
Total assets employed		129,653	113,821	127,126	111,067
Financed by					
Taxpayers' equity					
Public Dividend Capital		25,951	24,653	25,951	24,653
Revaluation reserve		81,286	59,249	81,286	59,249
Income and expenditure reserve		20,411	27,531	19,889	27,165
Others' equity					
Charitable Fund reserves		2,005	2,388	0	0
Total Taxpayers' and Others' equity		129,653	113,821	127,126	111,067

The financial statements were approved by the Board of Directors and authorised for issue on their behalf by Diane Wake, Chief Executive on 22nd May 2018.

Governors & Members

The foundation trust membership comprises local people and staff who are directly employed by us or our partner organisations. To be eligible for membership you must be over 14 years of age – there is no upper age limit. Full details of who is eligible to register as a member of the Trust are in the Trust Constitution which is available on our website. Any public members wishing to come forward as a governor when vacancies arise or vote in governor elections must reside in one of the Trust's constituencies.

During 2017/18, we continued to promote membership to local communities and the importance of having a voice. We encouraged them to share their experiences and have continued to maintain a public membership of more than 13,000. As at the 31st March 2018 the Trust had a total of 13,888 public members.

The Trust has a total of 25 Governors with 13 elected from public constituencies, eight elected from staff constituencies and four appointed by local organisations. The Council held elections during 2017/18 to fill posts as they became vacant and welcomed some new faces to the Council of Governors. See tables below for those who were elected or appointed and those that resigned or reached their end of term of office during 2017/18.

LIST OF GOVERNORS

PUBLIC ELECTED GOVERNORS	CONSTITUENCY	STAFF ELECTED GOVERNORS	STAFF GROUP
Mr Darren Adams (end of term Dec '17)	Stourbridge	Mr Sohail Butt (resigned Dec '17)	Medical & Dental
Mr Fred Allen	Central Dudley	Mr Bill Dainty	Nursing & Midwifery
Mr Terry Brearley (elected Dec '17)	Brierley Hill	Miss Jenny Glynn (resigned June '17)	Allied Health Professionals & Healthcare Scientists
Mr Richard Brookes (end of term Dec '17)	Brierley Hill	Mrs Michelle Lawrence	Nursing & Midwifery
Mr Authur Brown (elected Dec '17)	Stourbridge	Mrs Ann Marsh (elected Mar '18)	Allied Health Professionals & Healthcare Scientists
Mrs Lydia Ellis	Stourbridge	Mrs Margaret Parker (elected Mar '18)	Nursing & Midwifery
Ms Sandra Harris (elected Dec '17)	Central Dudley	Mrs Karen Phillips	Non-clinical
Mr Rob Johnson (end of term Dec '17)	Halesowen	Mrs Edith Rollinson (elected Mar '18)	Allied Health Professionals & Healthcare Scientists
Mrs Diane Jones (end of term Dec '17)	South Staffordshire	Mrs Jacky Snowdon (end of term Dec '17)	Nursing & Midwifery
Mrs Viv Kerry	Halesowen	Mr Alan Walker (re-elected Mar '18)	Partner Organisations
Mrs Joan Morgan (end of term Dec '17)	Central Dudley		
Mrs Natalie Neale (elected Dec '17)	Brierley Hill		
Mr Rex Parmley (elected Dec '17)	Halesowen		
Mr James Pearson-Jenkins (resigned Sept '17)	Tipton & Rowley Regis		
Mrs Yvonne Peers (re-elected May '17)	North Dudley		
Mrs Nicola Piggott	North Dudley		
Mrs Pat Price	Rest of the West Midlands		
Mr Peter Siviter (elected Dec '17)	South Staffordshire		
Mrs Farzana Zaidi (elected Dec '17)	Tipton & Rowley Regis		



Have you thought about being a Trust governor?

Elections will start in September 2018 to return governors for posts becoming vacant in both public and staff constituencies later this year. There are many ways to find out more:

- Meet our existing governors at the Annual Members Meeting and find out more about the role
- Visit the Trust website www.dudleygroup.nhs.uk and search 'governor elections'

Trust Board meetings are held in public. Visit the Trust website for details of the venue, dates and times at www.dudleygroup.nhs.uk or call (01384) 456111 extension 1012

Reminder
2018
Board
Meetings

Dates for your diary in 2017

All of the events are held at Russells Hall Hospital unless otherwise indicated. To reserve your place call (01384) 321124 or email foundationmembers@dgh.nhs.uk

Thursday 6th September: 5.45pm
Full Council of Governors Meeting

Thursday 6th December: 5.45pm
Full Council of Governors Meeting

Keeping in contact with our patients

We have been working on developing more ways of communicating easily and efficiently with our patients and using digital technology to do that. We now have a new two-way text and voice messaging service, which reminds patients about their appointments and allows them to confirm, cancel or reschedule all via their mobile phone.

All patients with a mobile number recorded with us receive a text message **seven days and 48 hours** before their appointment. The message will remind them of the location, time and date, and ask them to confirm, cancel or request an alternative appointment.

We already have mobile numbers for lots of our patients but if you would like to use this service then please contact our bookings team who can update our records. Call 01384 365100.

Please give the receptionist your most up-to-date mobile phone number

My Letters

This year has also seen the launch of 'my letters' which is an online system for patients to receive their appointment letters by email instead of post.

To register:

- Visit www.dudleygroup.nhs.uk
- Click on the 'Patient & visitors' tab
- Select how 'How you receive your appointments' on the left hand side
- Click on 'Appointment letters (My Letters)' and follow the instructions on that page
- You will need your NHS number to sign up



This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

الحصول على هذه النشرة بحجم أكبر، وعلى شكل إصدار صوتي و بلغات أخرى، الرجاء الاتصال بالرقم 08000730510.

此宣传单可提供大字版本、音频版本和其它语言版本，请拨打电话：0800 073 0510。

Ulotka dostępna jest również w dużym druku, wersji audio lub w innym języku. W tym celu zadzwoń pod numer 0800 073 0510.

ਇਹ ਪਰਚਾ ਵੱਡੇ ਅੱਖਰਾਂ, ਬੋਲ ਕੇ ਰੀਕਾਰਡ ਕੀਤਾ ਹੋਇਆ ਅਤੇ ਦੂਸਰੀਆਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਵੀ ਪ੍ਰਾਪਤ ਹੋ ਸਕਦਾ ਹੈ, 0800 073 0510 ਤੇ ਫੋਨ ਕਰੋ ਜੀ।

Aceasta broșura poate fi pusă la dispoziție tipărită cu caractere mari, versiune audio sau în alte limbi, pentru acest lucru va rugăm sunați la 0800 073 0510.

یہ کتابچہ آپ کو بڑے حروف کی لکھائی، سمعی صورت اور دیگر زبانوں میں مہیا کیا جا سکتا ہے۔ برائے مہربانی فون نمبر 08000730510 پر رابطہ کریں۔



70

YEARS

OF THE NHS

1948 - 2018

We celebrated the 70th birthday of the NHS in style on Thursday 5th July with cake, quizzes and a choir adding to the fun.

Colleagues, patients and visitors alike shared memories of the NHS in general and the Trust in particular at our history display, featuring old photos, equipment and brochures.

Allied Health Professionals tested our knowledge with a series of quizzes. Plenty of people also posed in the photo booth, helped by a variety of props, while videos sharing what you think is so special about the NHS were shown throughout the afternoon.

The Tea and Chat Service provided tea and specially decorated cup cakes, raising just over £140 for the Trust charity.

Our community teams had visits from Andrew McMenemy, Director of Workforce and Mark Stanton, Chief Information Officer bearing fruit and cake for staff to enjoy.



Our Appeals



CANCER

Caring for the patient
and their family



CHILDREN

Making it better for
our younger patients



DEMENTIA

Moving forward with
dignity and respect



REHABILITATION

Supporting our
patients' journey
back to recovery

For more information about our appeals
and how they are improving the experience
of our patients have a look at our website:
dudleygroup.nhs.uk/our-charity

Will Fortnight

The 2017 campaign was our most
successful year to date, raising over £5,000.
Waldrons Solicitors reported a record
number of people making appointments
during the campaign. Will week is Monday
8th – Friday 19th October 2018 check out
the website for more info.



50 new wheelchairs for Russells Hall Hospital

The wheelchairs are used by many
patients; people in pain, patients on
wards, pregnant women - any patient
unable to walk comfortably.

The charity campaign, which was supported
by the Dudley News, hit its £30,000 target
in just seven months. It raised enough cash
to buy 50 new wheelchairs for Russells Hall
Hospital, thanks to generous donations from
readers, fundraisers, schools and businesses.

Diane Wake, chief executive of the Dudley
Group NHS Foundation Trust wished
to thank everyone who has made the
campaign a success.

She said: "It is fantastic and heart-warming
that so many local people have donated
money to support The Big Push campaign
helping us to achieve our target. The new
wheelchairs will make a massive difference
and really help improve patient experience."



External Grant Applications

The Trust charity was awarded over £48,000
as a result of various applications to external
charitable foundations. Most notable was
a grant of £37,000 from the Goodyear
Benevolent Fund for the purchase of a
Bioquell Isolation Pod and to renovate the
Stroke Unit Reminiscence Room.



2019 Neon Dash

Plans are already underway for
a 2019 Neon Dash. The 2018
Neon Dash at Himley Hall
was a great triumph; nearly
300 took part and we
raised over £13,000 for
the Neonatal Unit at
Russells Hall Hospital.



Staff Fundraising Events

Trust Directors threw down the gauntlet to hospital staff to
participate in two challenges – a Santa Cycle Dash and the
Easter Bunny Boat Race. Both static races were held in the main
reception at Russells Hall Hospital and raised £1,200 for the Trust End
of Life campaign. Visit here if you wish to find out more about our
End of Life campaign:

justgiving.com/campaigns/charity/dghc/endoflifecare



Moving Forward

Help us raise £50,000 for a new Baby Bereavement Suite

We have launched this campaign to create a dedicated bereavement
suite to enable families to spend precious time with their baby to
say goodbye with dignity. We are aiming to create a space which is
calming, comfortable and private with access to specialist equipment
in a less clinical setting.

It is crucial that bereaved parents receive the best care possible
during their stay in hospital. These experiences will be remembered
for the rest of their lives.

Please support the campaign by making a donation or fundraising.
Have a look at our JustGiving campaign page:

justgiving.com/campaigns/charity/dghc/babybereavement



**NHS**

The Dudley Group
NHS Foundation Trust

THE DUDLEY GROUP NEEDS YOU JOIN US!



WORK WITH US

You can see all our latest vacancies on the NHS Jobs website www.jobs.nhs.uk
or go to www.dudleygroup.nhs.uk/latest-vacancies

BECOME A VOLUNTEER

We're always on the lookout for volunteers. Go to www.dudleygroup.nhs.uk/volunteering

BECOME A FOUNDATION TRUST MEMBER

Sign up on our website today! www.dudleygroup.nhs.uk/become-a-member



If you would like this information in an alternative language or format, for example in large print or easy read, please call us on **0800 073 0510**, email PALS@dgh.nhs.uk or write to:
Patient Advice and Liaison Service, Russells Hall Hospital, DY1 2HQ.