

SUMMARY OF EMERGENCY DEPARTMENT OVERSIGHT MEETING FOR PERFORMANCE AND QUALITY & SAFETY COMMITTEES

Tuesday 10th September 2019

Attendance

The Chair recognised the difficulties of members attending this meeting and a regular schedule of meetings will be set up to suit the availability of the care group to support maximum attendance.

Terms of Reference

The meeting reviewed the Terms of Reference and were informed that the ED Oversight Group will report to the Performance Committee. Any issues relating to CQC and safety will also be reported to the Quality and Safety Committee. It was agreed to amend the quoracy requirements to ensure that each meeting had a member of the care group medical staff, operational team and nursing team present.

Further discussions will be held by the Executive Team to finalise the measures and assurance metrics and these will be updated in due course.

Emergency Department KPIs

The meeting reviewed the ED KPIs and recognised the risks around clinical coding, this is on the operational risk registers and the Medical Director stated he would address this with the team.

The meeting was informed that the department is achieving the 15-minute streaming target which was an issue highlighted by the CQC and demonstrates that improvements have been made. However, the 4 hours wait target is only being achieved for 60% of patients

Emergency Department Workforce Report

This was discussed in detail, and risks and challenges highlighted. The department has seen progress since November 2018; however it still remains fragile especially regarding middle grade doctor coverage. The recruitment visit to India and Dubai is now seeing some of the doctors arriving in the UK, but they will have several months of supernumery shifts. It will be late spring 2020 before the department is up to strength for mid-grade doctors. In the meantime, the department is still relying heavily on locum doctors. Assurances were given that we have secured some long-term locum bookings which provide some stability to the workforce.

The meeting was informed that ED are anticipating the loss of 10-12 Consultant clinical sessions for a range of issues including the pension position. An additional Consultant will be required to fill these gaps.

The meeting noted and recognised the recent increase in patients arriving in ED - 20% at PRH and 17% at RSH over the last 4 months, and the resultant impact on the department and workforce.

Improvement

There was recognition of the importance of having the appropriate reports, with the accurate information available to this meeting and further work is continuing to ensure the correct data and narrative is presented.

Matters for escalation to Performance Committee

- Current workforce position and continual reliance on agency especially for next 6 (winter) months, working to secure longer term temporary cover.
- Consultants dropping shifts and pension impact resulting in the need for one more consultant to cover these gaps.
- Challenges securing long term middle tier through winter which impacts on finances. In addition, we will not be up to establishment for middle grades until spring next year.
- Increase in ED activity seen by 17% in RSH and 20% at PRH over the last 4 months
- The 4 hours wait at 60% achievement is still well short of target.
- Streaming within 15 minutes is being achieved by the departments.
- NHSI requirement to achieve a 70:30 ratio by December 2019 of substantive and bank staff to agency staff. The current position is around 50% PRH -60% RSH. Efforts are continuing.

Tony Carroll
10-09-19