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25 June 2021

Mr Noel Scalon
Executive Director of Nursing and Patient Experience
County Durham and Darlington NHS Foundation Trust
Darlington Memorial Hospital
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Re: County Durham and Darlington NHS Foundation Trust (CDDFT) Quality Account 2020/21

Dear Mr Scanlon

Statement from NHS County Durham Clinical Commissioning Group (CCG) and on behalf of NHS Tees Valley CCG for County Durham and Darlington NHS Foundation Trust (CDDFT) Quality Account 2020/21.

NHS County Durham CCG commissions healthcare services for the population of County Durham. The CCG take seriously their responsibility to ensure that the needs of patients are met by the provision of safe, high quality services and therefore welcome the opportunity to submit a statement on the Annual Quality Account for County Durham and Darlington NHS Foundation Trust (CDDFT).

The Commissioners feel that the Quality Account prepared is an accurate representation of the services provided during 2020/21 within the Trust.

First and foremost, the Commissioners would like to applaud the work the Trust has achieved during one of the most significant and challenging times within the history of the NHS. This Quality report provides a comprehensive description of the quality priorities which have been the Trust focus in 2020/21 during the pandemic. The report provides an open account of where improvements have been made, the challenges, and those priorities that have not been met.

The Commissioners would like to congratulate the Trust in achieving seven of the thirteen priorities set from the previous year. A further three were partially met, which included 'to be comparable to the national average and lower than regional peers for mortality rates' and 'monitor and maintain performance against key indicators for 12 week bookings, breast feeding at delivery and reducing smoking during maternity'. The third indicator relates to staffing: reducing the percentage of staff experiencing harassment, bullying or abuse from other staff in the last 12 months with the aim to maintain or improve the Trust's position relative to the national average scores in the NHS Staff Survey 2020.

Due to the pandemic the Trust has not been able to engage with stakeholders to the usual standard therefore the Commissioners are supportive that the priorities from 2020/21 would be carried forward into 2021/22. The Trust proposes to revive the Quality Strategy with a completion date by the end of October 2021. This will involve full consultation with external and internal stakeholders and from this the quality priorities for 2022/23 will be identified for the Quality Account 2022/23. The Commissioners fully support this proposal and look forward to the outcome.

Unfortunately, the Trust has identified that there have been two cases of MRSA bacteraemia during 2020/21 with a further 58 Trust apportioned Clostridium Difficile cases. Encouragingly, the Trust have identified lessons learnt and aim to ensure that these are embedded in practice in the coming year. Delays such as sampling, isolation, and prescribing and diarrhoea assessment are common themes that the Trust have acknowledged and will be concentrated upon in the work planned for the coming year. It should be noted that, relative to levels of activity and when considered in the national context, the Trust continues to have lower than average rates of Clostridium Difficile per 1,000 bed days.

The Commissioners are delighted with the continued success of the End of Life and Palliative care objective to date. The Trust was awarded 'Outstanding' from the last CQC visit and the Trust has built upon this by introducing a seven-day, twenty-four hour service across the whole of the locality. The Quality Account demonstrates that the Trust has the highest proportion of deaths with palliative care coding within the region, this reflects the input from the specialist palliative care team nurses which is an improvement from March 2019. The Commissioners anticipate the future work identified within this priority including working with Stakeholders to develop a new palliative care strategy for 2020 to 2025.

The Commissioners acknowledge that the Trust reported two Never Events within the year but are confident that following investigation, learning has taken place which has also been communicated to the Quality Assurance Committee. Notably, the Trust has changed one of the checking processes within theatres – the 'Counting Board' as direct result of one of the incidents, which the Commissioners are encouraged by.



The Trust is to be commended on the work they have undertaken in relation to the reporting and investigation of Serious Incidents. The latest NRLS benchmarking report show that the Trust has a reporting rate of 50.14 incidents per 1000 bed days against a national average of 50.7 per 1000 bed days. In addition to this, 1% of incidents reported were moderate harm or above compared to 2% nationally. The Trust are required to report Serious Incidents as defined within the National Patient Safety Framework and in 2020/21 reported 62 such incidents; this is a decrease on the 68 reported in 2019/20. All of these incidents have had a full root cause analysis review and themes for learning have been identified and disseminated.

Falls resulting in harm remain the highest reported incidents and this continues as a quality priority for 2021/22. The Trust continues to promote a culture that supports staff to report incidents, with particular emphasis on near misses to ensure a holistic approach to patient safety is embedded.

The Quality Account includes the Trust's update in respect of previous CQC inspections (with specific reference to University Hospital of North Durham emergency care services) and the relevant action plans. The Commissioners are encouraged by the Trust's commitment to improving the services which is evident within the report with a particular focus upon providing critical care outreach and increased pharmacy support – all of which has already been fully implemented, but the rating will not be reviewed until the service is re-inspected.

Commissioners recognise the Trust's involvement in numerous clinical audits and National Confidential Enquiries and encourage these contributions in improving the quality of healthcare services at both a local and national level.

The Trust is committed to Local Patient Safety Initiatives, which is welcomed by the Commissioners. Reassuringly, during 2020/21 the Patient Safety Team continued the "learning from near misses" campaign. From which an internal audit was undertaken to review the campaign successes in 2019/20 and in 2020/21 and the recommendations from the audit have been incorporated into the near miss work stream. Furthermore, the Trust has relaunched the 'Patient Safety Champion' role with significant support from the wider workforce.

The Commissioners welcome the Trust's commitment to the new National Patient Safety Developments in relation to Patient Safety framework. This includes, notably, the future development of the Patient Safety Incident Management System (PSIMS) and the Patient Safety Incident Response Framework (PSIRF).

County Durham and Darlington Foundation Trust has demonstrated essential clinical audit work but recognises it is limited due to the impact of Covid-19. The Commissioners are pleased to acknowledge that the Trust participated in 98% national clinical audits and 100% national confidential enquiries of the national clinical audits and national confidential enquiries which it was eligible to contribute in. Future clinical audit work is welcomed and the Commissioners look forward to seeing those outcomes.

County Durham and Tees Valley Clinical Commissioning Groups welcome the specific quality priorities for 2021/22 highlighted within the Quality Account. They are appropriate areas to target for continued improvement and link well with CCG commissioning priorities. Commissioners would expect to see an increased focus on learning from serious incidents / 'never events', as well as a reduction in falls and pressure ulcers within the organisation in line with Trust priorities.

The CCGs can confirm that to the best of their ability, the information provided within the Annual Quality Account is an accurate and fair reflection of the Trust's performance for 2020/21. It is clearly presented in the format required and contains information that accurately represents the Trust's quality profile and is reflective of quality activity and aspirations across the organisation for the forthcoming year.

The Commissioners look forward to continuing to work in partnership with the Trust to assure the quality of services commissioned in 2021/22.

Yours sincerely



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