

Healthwatch Worcestershire's response to the Quality Account of the Worcestershire Acute Hospitals NHS Trust for the financial year 2024/25.

Healthwatch Worcestershire (HWW) has a statutory role as the champion for those who use publicly funded health and care services in the county and therefore, we welcome the opportunity to comment on the Worcestershire Acute Hospitals NHS Trust Quality Account for 2024/25.

As is our normal practice we have used Healthwatch England guidance to form our response as follows:

1. Do the priorities of the provider reflect the priorities of the local population?

Yes. The most common feedback Healthwatch regularly receives from service users is that communication needs to be improved. This has been captured by the Trust in the quality priorities for 2025/26 - for example, a brief summary:

- We will ensure patients, relative and carers feel listened to... including patients with health inequalities and/or sensory needs.
- We will learn from patient feedback

Waiting times for assessment and treatment are also patient priorities. This is also captured in the quality priorities for 2025/26 – summarised as:

- We will reduce waiting times for treatment
- We will ensure patients experience safe and timely discharge

Where there are complaints the local population can expect to have these dealt with in a timely manner and therefore we welcome the internal complaints audit process and associated learning processes. The results from the annual Big Quality Conversation survey also bring to the attention of the Trust how the local population feel about how they have been treated and the quality of their care. We also look forward to hearing more about the patient voice and involvement strategy.

Healthwatch also receives regular feedback on time spent in ambulances, waiting times in A&E and hospital discharge. This is addressed by the Trust as patient flow and much work continues to be taken by the Trust to improve flow through the system with examples being the ambulance pit-stop, single points of access and same day emergency care services (SDEC). Innovative solutions like the discharge response

volunteers are making a difference by speeding up the delivery of medications to patients waiting to go home.

Healthwatch welcomes the introduction of new methods of raising a complaint, an on-line form via the Trust Web pages and through the use of QR codes.

2. Are there any important issues missed?

Healthwatch Worcestershire would like to acknowledge the addition of the narrative on sepsis in this year's Quality Accounts. Last year we noted that in the draft we had received this was missing- it was subsequently added. We are reassured that even though the recording of sepsis and the use of the new electronic screening tool has faced some challenges this year, the clinical outcome for sepsis is within expected ranges. There is a clear focus on the effective use of the Sepsis Six Bundle which has been noted by the Trust is a critical challenge.

We have also seen, for example, in the maternity team, that a fully staffed team can provide high quality care and be a source of pride for those involved, in this case attracting a waiting list of staff who wish to join the unit. And much is made of the Care Excellence Accreditation, which is about empowering staff to improve standards, resulting in 12 wards achieving a level of accreditation of 'Good' and 22 wards achieving 'Outstanding', led by the nursing teams. The regular Quality Governance Committee meetings, which we attend as observers, regularly review the nursing levels across the Trust. What is missing, certainly at these meetings, is the same level of scrutiny on the impact of medical and surgical vacancies of senior clinicians. A clear example of where this leads to problems are seen in the issues managing the different Dermatology providers and convoluted pathways that are in place due to senior vacancies. Can we therefore have a focus the impact of senior workforce vacancies, especially with respect to fragile services, and an update on reducing these vacancies included in the Quality Accounts?

Looking at both the summary of the quality accounts 2024/2025 document and the full document there has been a target set for completion of the Oliver McGowen mandatory e-learning training. However, there has been no target set for completion of face to face tier 2 training, this is aimed at staff who may be providing care/support for someone with a Learning Disability/Autism. As it will not always be obvious if a patient has autism (as opposed to LD) tier 2 training is for all patient facing staff. Has the Trust identified who requires Tier 2 training?

3. Has the provider demonstrated that they have involved patients and the public in the production of the Quality Account?

The trust has delivered on much of the Quality Road Map it set out in last year's quality accounts, in particular, of note are the regular inpatient ward surveys, the fundamentals

of care framework, the care excellence accreditation and the Big Quality Conversation which demonstrate a learning organisation and a desire for continual improvement. These have all contributed to the quality priorities for 2025/26.

4. Is the Quality Account clearly presented for patients and the public?

In our response to last year's WAHT Quality Accounts, we recommended that the Trust should produce a summary of the Quality Accounts in an accessible format, selecting important information for the public and to complement this with an Easy Read version.

We were therefore pleased to see the Summary Quality Accounts 2024/25 document which is a slimmed down version of the 91 pages of the full WAHT Quality Accounts 2024/25. The layout (still in draft form) is easier to follow: setting out the Trust's commitment to quality; looking back at progress against last year's priorities and setting out the priorities for 2025/26. The graphic 'about our trust' is clear and helpful and a page has been left blank for the Trust's year in numbers – hopefully a suitable story on a page graphic will be inserted here similar to last year's.

In conclusion, the Trust has many challenges due to the numbers presenting at their front door and the associated quality challenges. The Trust has a range of systems in place to handle these challenges, and it is clear they are building a learning culture to support the delivery of safe and effective care. Healthwatch will continue to work with the Trust to ensure that patients receive a positive experience.

Chris Byrne

Director – Healthwatch Worcestershire