Ms Heather Lawrence  
Chief Executive  
Chelsea and Westminster Hospital  
369 Fulham Road  
London  
SW10 9NH  
23 April 2008

Dear Ms Lawrence

We welcome the opportunity given to comment on Chelsea and Westminster NHS Foundation Trust’s draft declarations. OSCs are the only democratically elected bodies to comment on the Trust’s developments.

We have received the Trust's draft declarations, but we are not in a position to verify all the responses; however, where we have evidence to verify comments, we do so.

The amount of information to be provided to OSCs is still very unclear, and Kensington and Chelsea OSC and Chelsea and Westminster NHS Foundation Trust have not satisfactorily resolved what would be appropriate for us to carry out our duties in this respect.

Our comments are based on the evidence we have collected over the previous year based on:

1. A survey of Kensington and Chelsea Residents’ Panel on local health services. The panel comprises of 1063 residents and the there were 511 completed returns to this survey. 40% of the respondents said that they had visited their local hospital in the past year. Of these, 99 had visited Chelsea & Westminster Hospital.
2. A review of Health Inequalities in the borough carried out by the Health OSC between November 2006 and December (to be published) 2007*.
3. A review of the PCT’s Commissioning Priorities (to be published).

* http://www.rbkc.gov.uk/Content/HTTPSQLA_HNHDS/d7efb128/f25d7476f0d14b81002573df004b78d8/822a31f40c074402002573df004b78e1/23654.pdf
Core Standard C6: Healthcare organizations cooperate with each other and social care organizations to ensure that patients’ individual needs are properly managed and met

The OSC and Council both have good working relationships with the Chelsea and Westminster. For example, the hospital has been involved in the joint working mechanism the Health and Well-being Partnership Board.

We are concerned that we remain unclear as to how the Chelsea and Westminster hospital fit with the long term plans of Imperial College NHS Trust. We hope the Foundation Trust and Imperial College NHS Trust will work towards some type of charter for collaboration.

The OSC’s Health Inequalities Review found that hospital protocols sometimes inhibited staff understanding of the needs of people with learning disabilities – for instance information from support workers on the particular needs of individuals (such as support mechanisms for helping them eat) did not always get through to clinicians and nurses.

The Review found that when patients with learning disabilities are referred to hospital for treatment by GPs there is no system for flagging up their learning disabilities and associated needs. This means that the hospital is not always adequately prepared to deliver the service in an appropriate way. Given the effort that many carers say that they have to put into preparing people for the hospital visit, a bad experience at a hospital can set things back.

The Review found that from a parent’s or carer’s perspective, there was too much reliance on the parent or carer to organise or contact all the different people that can be involved in providing care or treatment, particularly around general anaesthetics and dental surgery. As one carer commented “I want people to know their job and do it”.

The OSC Survey of the Borough’s Residents Panel on local health services found that 71% of the respondents who were referred to Chelsea & Westminster Hospital said that the person they were referred to had all the information about their condition.

Core Standard C13: Healthcare organisations have systems in place to ensure that staff treat patients, their relatives and carers with dignity and respect
The OSC Survey of the Borough’s Residents Panel on local health services found that 82% said that they had been treated with dignity and respect.

**Core Standard C15:** Where food is provided healthcare organisations have systems in place to ensure that (a) patients are provided with choice and that it is prepared safely and provides a balanced diet, (b) patients’ individual nutritional, personal and clinical dietary requirements are met, including where necessary help with feeding and access to food 24 hours a day.

The OSC Survey of the Borough’s Residents Panel on local health services found that only 20% of those respondents who had visited Chelsea & Westminster hospital said that the quality of food and catering provided by the Chelsea and Westminster hospital was good.

The OSC’s Health Inequalities Review found that hospital protocols sometimes inhibited staff understanding of the needs of people with learning disabilities – for instance information from support workers on the particular needs of individuals (such as support mechanisms for helping them eat) did not always get through to clinicians and nurses.

**Core Standard C16:** Healthcare organisations make information available to patients and the public on their services, provide patients with suitable and accessible information on the care and treatment they receive and, where appropriate, inform patients on what to expect during treatment, care and aftercare.

The OSC Survey of the Borough’s Residents Panel on local health services found that 82% of those respondents who had visited Chelsea and Westminster Hospital said that the information they were given was easy to understand.

**Core Standard C17:** The views of patients, their carers and others are sought and taken into account in designing, planning, delivering and improving healthcare services.

The OSC Survey of the Borough’s Residents Panel on local health services received the following comments on Chelsea & Westminster Hospital:

*I was told to go to the warfarin clinic where nurse told me to take what I now know was a serious overdose. I became very ill and decided I could not trust the hospital so have been treated by a private specialist.*
Hospitals need to be more clean.
Now signed off but did have c.dificille as an in-patient (0-4 years back)
There is a tendency for patients to be kept waiting after their appointment time with zero explanation.
Great use of unsatisfactory agency nurses.
Make the appointment more easy.
Cleaning staff are not trained well and/or shown the respect they deserve - they should have real pride in their work.
Once referred to a consultant appointments were made quickly. Reports provided to GPs very much delayed.
I had excellent treatment and care
Most excellent care especially when staying in 2 or 3 weeks
The arrangements of medical appointments to facilitate less time waiting for the appointment once in the hospital
My experience was very good as long as the ward was not full.
I am having further tests (MRI & bone scan) for further investigation of my prostate cancer problem - but even having had the tests it takes a further month to be seen by the doctor at the hospital - it should be sooner - or explained
Administration staff have no idea how to deal with the public. Attitude problems are abundant.
Food a horrible disgrace. Bring back matrons - remove middle management & review cleaning - bins overflowing - inadequate infrequent cleaning no proper accountability - food and ward arrangements
I was in a mixed ward for 4 nights and found the Saturday night experience difficult
In-patients food is of rather a low standard.
Night nurse unable to give me basic medication.
Excessively long waits in A & E.
The wait was too long for an appointment
Both myself and my wife have visited Chelsea and Westminster hospital over the previous years... Her experience has been with the pain dept; and this has been fine to date.
Excellent service provided by pleasant; helpful and hard working staff.
Cavalier treatment from dermatology, complaints never taken up; went for successful treatment abroad
In the orthopaedics I have requested a copy of the letters sent to my GP but have never received one.
Outpatient facilities need improving; delays; cancelled appointments; different Dr each visit.

The locum Consultant I was referred to was not very helpful or encouraging. Luckily the Consultant I was eventually referred to was a lot more friendly.

Same comment about the quality of the training of the receptionist staff.

Staff put their feet on chairs where members of the public have to sit. The nurse did not wash her hands before her consultation with me even after all the attention devoted to MRSA in the news.

The staff were outstanding and my baby's delivery was excellent - I could not fault the level of health care for me or my baby, but I think cleanliness could be improved and it could be easier to book appointments.

An excellent hospital with committed and caring cosmopolitan staff.

Staff were constantly in a muddle. Appalling communication from one member of staff to the next/no handover even though they were treating the same problem.

The staff were very kind. I felt that it was difficult to keep clean as patients allowed too much clutter and bathrooms not checked often enough.

Hydrotherapy pool at Chelsea & Westminster is dirty and has poor facilities.

If you lie for 10 hours in A & E and no one comes near you; you might worry.

High quality hospital.

I have no complaints re the hospitals in my area.

I only wish to be treated at the Chelsea and Westminster.

Having been given an appointment time it is unacceptable to have to wait in excess of 2 hours to be seen.

I was not an inpatient so did encounter the food/catering.

I contracted a strain of MRSA at the hospital following a simple procedure!!! The hospital is not clean and doctors, nurses don't seem to wash hands...or put on gloves.

Had heart tests also at Chelsea and Westminster though because of excessive delays went privately.

Kensington and Chelsea LINk.
We encourage the Chelsea and Westminster to have an excellent working relationship with the Kensington and Chelsea Local Involvement Network after 1st April 2008.

**Better governance**

A particular concern at the moment is the evidence that some London Foundation Trusts have withdrawn from the public (e.g. Board papers not being available). It was surely never the intention when granting greater freedom to Trusts that they should exercise this freedom with less transparency and accountability. This makes the job of OSCs more difficult.

**Core Standard C18:** *Healthcare organisations enable all members of the population to access services equally and offer choice in access to services and treatment equally*

The OSC Survey of the Borough’s Residents Panel on local health services found that only 31% of those respondents who had visited Chelsea and Westminster hospital said that they did get a choice about which hospital they were referred to.

**Core Standard C20:** *Healthcare services are provided in environments which promote effective care and optimise health outcomes by being: (a) a safe and secure environment which protects patients, staff, visitors and their property, and the physical assets of the organisation; (b) supportive of patient privacy and confidentiality*

The OSC’s Health Inequalities Review found that some people with learning disabilities were not able to make use of specialist surgery based GP services because of behavioural issues. Parents of children with complex disabilities highlighted the need for care providers to take simple, practical steps such as having a flexible appointments system (allowing for double appointments or early or late appointments), providing individual cubicles in hospitals etc which would make their life easier. It should be noted that this comment was also made last year.

**Core Standard C21:** *Healthcare services are provided in environments which promote effective care and optimise health outcomes by being well designed and well maintained, with cleanliness levels in clinical and non-clinical areas that meet the national specification for clean NHS premises*
The OSC Survey of the Borough’s Residents Panel on local health services found that only 51% of those respondents who had visited Chelsea & Westminster hospital were satisfied with the standard of cleanliness and hygiene at the hospital.

Core Standard C22: Healthcare organisations promote, protect and demonstrably improve the health of the community served and narrow health inequalities by (a) cooperating with each other and with local authorities and organisations; (b) making an appropriate and effective contribution to local partnership arrangements including local strategic partnerships and crime and disorder reduction partnerships.

The OSC’s Health Inequalities Review found that there was further scope for better co-ordination between the PCT and the Acute Trusts to give a clear set of healthy living and disease prevention messages to disadvantaged and vulnerable groups in the community

Core Standard C23: Healthcare organisations have systematic and managed disease prevention and health promotion programmes which meet the requirements of the national service frameworks and national plans with regard to reducing obesity through action on nutrition and exercise, smoking, substance misuse and sexually transmitted infections.

We would encourage Chelsea and Westminster NHS Foundation Trust to be fully involved in the borough-wide health promoting strategies in the Royal Borough of Kensington and Chelsea. For example, the public health strategy “Choosing Good Health – Together” and the Community Strategy.

Kensington and Chelsea PCT has produced a Sustainability Protocol. We would hope that Chelsea and Westminster NHS Foundation Trust is going to sign up to this.

Other comments:

Maternity services
We are concerned about the provision of maternity services for our residents. In the Healthcare Commission's comprehensive review of maternity services Chelsea and Westminster scored "least well performing".1

We are also concerned at the high level of surgical deliveries at the Chelsea and Westminster - one in three deliveries is carried out surgically. The recent study published on 1st November 2007 in the British Medical Journal found that women who had a planned caesarean section put themselves and their babies at increased risk of serious complications.

**Conclusion**: The Royal Borough of Kensington and Chelsea’s OSC on Health is pleased to be able to take up this opportunity to participate in the Annual Health Check process 2007/08.

Yours sincerely

Cllr Christopher Buckmaster  
Chairman, Overview and Scrutiny Committee on Health  
Royal Borough of Kensington and Chelsea