

**GHA BOARD MEETING AGENDA**

**Venue: Lecture Theatre, School of Health Studies, St Bernard's  
Hospital**

**Wednesday 31<sup>st</sup> July 2019 at 11.00am**

1. Matters arising

2. Matters for the report

2.1 Report: Medical Director and Executive Summary

2.2 Report: Director of Public Health

2.3 Report: Head of Estates and Clinical Engineering

2.4 Report: Director of Nursing Services

2.5 Report: Human Resources Manager

2.6 Report: Hospital Services – General Manager

2.7 Report: Primary Care Services – Deputy Medical Director

2.8 Report: Mental Health – General Manager

2.9 Report: Director of Information Management and Technology

2.10 Report: School of Health Studies

2.11 Report: Clinical Governance

3. In-Camera session

## 2.1 Executive Summary – Medical Director

Mr Chairman, Board Members, this Executive Summary Report covers the 1<sup>st</sup> Quarter of 2019.

I will summarise the report highlights according to our GHA Strategic Objectives

### **1. Sustained bed availability, effective Bed Management and improved patient access.**

Bed availability had been sustained over the first quarter of 2019 and the average availability has been excellent with an average of 60 beds available daily over the quarter. Bed availability has now been maintained consistently for almost 2 years.

The GHA has continued with all planned surgery without the need to cancel patients due to non-availability of beds.

Access to Primary Care appointments via the myGHA telephone service has been extended to 60% of all booked appointments. The average number of unused GP appointments is approximately 50 every day, approximately 10% of all GP appointments.

The new Theatre 5 is almost complete and will allow the capacity to carry out trauma surgery on a daily basis, thereby reducing the time to surgery for trauma patients, which is associated with improved outcomes and reduced length of stay.

### **2 Improvement and expansion of services available at the GHA including Repatriation of Services**

The Mental Health service has seen an expansion in the number of services.

A Nurse Liaison Service in A&E to improve the interface between Mental Health services and other areas of the GHA and external agencies.

The Gibraltar Young Minds service (GYM) was launched incorporating two child and adolescent psychologists and a consultant in child and adolescent psychiatry. They are working closely with other GHA departments including Primary Care and Paediatrics and other agencies such as the Department of Education and Care Agency.

The GHA has engaged with Her Majesty's Government with Brexit contingency planning. This has included ensuring continuity of essential supplies. This has led to a number of changes including a review of how we source oxygen supplies and a change in how we collect and

store Platelets, which is an essential blood product for transfusion and closer cooperation with the NHS in sourcing essential supplies.

### **3 Establish and embed Clinical Governance structures and systems**

The Clinical Governance and Informatics department was bolstered by the addition of two full time Clinical Informatics Officer posts. The department was established in July 2018 and is currently run by a team of 5 full time members of staff.

### **4 Improve the patient experience and increase community participation in formal GHA structures.**

Work on establishing effective GHA clinical pathways for cancers including Prostate and Breast cancer are progressing well with participation of the relevant patient representative groups in the design of the pathways.

Dr D Cassaglia

Medical Director

## 2.2 Director of Public Health

### Screening Programmes

#### Colorectal Cancer Screening Programme

During this period, a total of 786 invitations were mailed to eligible participants inviting them to take part in the Colorectal Cancer Screening Programme. 311 samples were returned to the hospital laboratory for analysis. The breakdown of the results is as follows:

- 267 Negative for occult blood results
- 21 Inconclusive for occult blood results
- 10 Spoilt / Technical fail
- 13 Positive for occult blood results

During this time frame, a number of initiatives have commenced with the hope that these could elevate the current level of participation. These measures include:

- The Screening Administrator continues to invite actual participants, who have gone through the screening process to submit testimonials to champion and promote the Bowel Screening Programme. These testimonials as they are received are uploaded onto the Public Health Website for dissemination purposes.
- In addition to the above a total of 5 invited individuals submitted photographs of themselves which would then be displayed in a Bowel Screening recruitment poster. It is hoped that the positive peer pressure exerted by those willing participants might sway more invitees in participating in the programme. Attempts were made to seek cooperation from the General Practitioners at the PCC to take part in the poster campaign but the response has been weak where only 2 GP's showed interest in taking part.
- The Screening Administrator continues to affix inspirational testimonials to the outer surface of the test-kits as a means of enticing invitees to participate in the programme.
- In order to further entice invitees to take part in the programme, small segments of 2 different inspirational testimonials were included into the footer of every invitation letter. In addition, a link to the Public Health Website was included so that the invitees could read these and other testimonials.

***“The Bowel Screening Programme saved my life!” William Parnell***

***“I’ve taken part in the Bowel Screening Programme... take these programmes seriously, they’re there to help YOU, stay healthy!” Richard Cartwright***

The Response Rate of the programme for this period stands at 38.7%.

During the Months of February and March, the Screening Administrator has been involved in several exploratory meetings in the dual capacity of participant and co-organiser under the auspices of the Screening Programmes Modernisation Initiative, where steps are being taken to review and modernise each of the 5 screening programmes offered by the GHA.

### **Abdominal Aortic Aneurysm Screening Programme**

During the period of January – March, 71 invitation letters were mailed to eligible participants and 17 accepted their invitations. In addition, 18 gentlemen accepted their invitation after receiving reminder correspondence over a 6 month period (The addition of both figures provides a 49.3% response for this quarter). All these participants were issued with ultrasound appointments.

A total of 55 reconsider letters were issued to participants who did not reply.

1 request was received from individuals aged 66-74+ years (outside the invitation range) to take part in this initiative as elective cases.

During this period, 56 men were screened and 53 Normal Aorta results were issued. 2 known small aneurysms were re-tested and 1 gentleman who was last year diagnosed through the screening programme to have a small AAA, the aneurysm was not detected 1 year later. Following policy the gentleman will be screened 2 more times at yearly intervals and then be discharged if no further detections are made.

Following protocol the gentlemen who were retested for a small aneurysm will be issued with an appointment to be tested once again in 12 months’ time.

In order to boost participation rates, champion requests continue to be issued to all participants that are currently taking part in the programme. In addition testimonials are now included with the initial invitation letter as well as any reconsider letters issued.

## **Health Promotion**

<b>Main Public Health Events of this Quarter</b>
<b>Anti-Microbial Resistance campaign</b>
<b>No Smoking Day</b>
<b>CHAMP prep</b>

### **Public Events**

After procuring budget for a short-term AMR campaign, the Health Promotion Officers (HPOs) worked with GBC to produce a radio edit of the PHE antibiotic campaign jingle and a “talking heads” infomercial (including Nick Cortes, Sandra Netto, both Ministers, Krish Rawal and Sandie Gracia). Longer versions of the radio ad/ infomercial ran for 2 weeks followed by 18 weeks of the shortened versions, all in prime time slots. 4 separate advertorials were written for the Chronicle which featured over 4 weeks alongside a bi-weekly front page exert. Ministerial support was gratefully acknowledged.

World Kidney Day was held at Westside School on 13<sup>th</sup> February; HPOs supported the Gibraltar Dialysis Patients and Friends charity for the morning providing health education alongside the GHA dietician.

HPOs met with the dermatology team to prepare for the Skin Cancer Awareness event (April 13<sup>th</sup>).

HPOs attended a Safety for Senior Citizens evening organized by CAB; topics covered included sun safety, diet, exercise and antibiotic awareness.

The HPOs met with Leila Read and Ian Walker from PHE to discuss HP views on current Mental Health status and resources available in Gibraltar. This was part of a bigger project which involved the team from PHE meeting with several government

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and NG-agencies. Their findings were briefly disseminated March 1<sup>st</sup> and they have committed to sending an in-depth report in the next 3 months.

No Smoking Day was held at the ICC on 13<sup>th</sup> March 2019. HPOs ran the pitch, supported by Elizabeth Borges, 2 environmental officers, Naomi Gross/ Laura Netto from the well person unit, and Audrey Maclean from the MOD. More than 40 people came to the stand, 7 people signed up for smoke cessation appointments, and FB postings reached more 600 people. Coverage of a successful smoke cessation patient was also highlighted during Newswatch.

Health topics covered on GBC Radio & Gibraltar Chronicle included:

- Antibiotic Awareness
- Sun Safety
- No Smoking Day
- Kidney Awareness

**Infection Prevention and Control**

- Commenced 2018-2019 '**Influenza Vaccination Campaign**' for staff and long stay patients on going- Total vaccines administered- **494** - Influenza isolated for this period;
  - Jan- 8 Influenza A – (7 of these H1N1)
  - Feb- 4 Influenza A – (2 of these H1N1)
  - Mar- 1 Influenza A
  
- **Training:**
  - **POCT-** Training given to both A&E & CCU staff on Influenza point of care testing to facilitate bed allocation on admission.
  
  - Hydrogen Peroxide training (HPV)- undertaken by IC and Estates team- same given by Bioquell representative.
  
  - Mandatory Training for GHA Physiotherapy staff & Radiotherapy.
    - **24<sup>th</sup>** March- Physiotherapy
    - **28<sup>th</sup>** March –Radiology
  
- Dialysis Refurbishment (on going) - Initial measure to minimise risk of transmission put in place. Positive pressure (within current Dialysis unit) and negative pressure (within demolition area) set up. Area sealed off by Minor works department and access to unit restricted to **authorised personnel Only** via patient lift- Communication sent to all by General Manager. Dialysis Manager to keep log of cleaning regime and linen and waste disposal, plus MRSA screen.
  
- **Mumps case:** Notified positive mumps case

## 2.3 Estates and Clinical Engineering

### Projects and Departmental Developments

- Installation of New Theatre 1 surgical lamp LED with camera.
- Installation of new Mammography machine in Radiology.

### Mechanical Engineering

#### Projects –

The following projects were undertaken within this quarter:

- Installation of new Theatre No1. Surgical lamp LED with camera.
- Re arranging Fan coil and ductwork for latest MIU conversions
- Relocation of infection control Drugs fridge to new temporary location.
- Assisting in achieving a -12 Pascal negative pressure at the Dialysis project
- As part of the theatre 5 enabling works the installation of 2 new dx air conditioners for the Theatre Managers and Clerks office

**Projects Completed and On-Going –** (main projects – this does not include strategic reactive projects)

A huge amount of time is currently taken up by managing three significant primary care projects; including a new Children’s Centre at building 9 ground floor, a new 3 level extension to block 4 (south) to house adult primary and community care, and a new 2 level extension to the north of block 4 to enable a separate entrance to the new Primary Care Centre.



**New PCCC Entrance –** Over the period, we continued working closely with the developer’s contractors and consultants in order to ensure that the building specifications meet both our legal and health technical requirements. We have also been working hard to develop plans and

specifications for the new PCCC extension to accommodate the new entrance; this has since been accepted by planning, and we have engaged CASAIS on the construction phase of the extension.

### **New Front of House Disabled Lifts –**

St Bernard's Hospital: This project has involved the installation of two disabled lifts to



be located on the West ramp. The project will enable disabled and patients with mobility issues to arrive unaided to the front entrance podium level of the hospital. These lifts will also be essential to assist access to the new Primary Care Centre planned to come on line in the latter part of this year. This initiative will ensure that the hospital continues to works to improve access in line with the Gibraltar Disability Act 2017. The lifts are now complete and ready to be opened by ministry.

2.4 Director of Nursing Services

**AMBULANCE**

**Emergency Ambulance Deployments:**

Month	Total	Average per day
Jan	536	17
Feb	491	18
Mar	430	14

**Main Zone Deployments:**

	Jan	Feb	Mar	Total
Gib Port	1	1	0	2
North Area	58	62	63	183
Eastside Area	9	7	13	29
Westside Area	220	172	139	531
South District	113	112	92	317
Upper Town	38	43	40	121
Town Area	115	114	91	320
Frontier/Airport	11	7	8	26
Nature Reserve	2	4	1	7
Gib Dock	0	1	0	1
Maritime	1	0	1	2

**Summary of Patient taken for scans and/or transfers to Spain:**

Destination	Jan	Feb	Mar
Algeciras	71	63	54
Benalmadena (Xanit)	3	1	2
Cadiz	0	0	0
Gibraltar	35	24	22
La Linea	1	2	7
Malaga	25	85	82
Seville	1	0	0
Airport	0	4	0
Marbella	2	1	10
Platelets	9	0	7
<b>Total</b>	<b>147</b>	<b>180</b>	<b>184</b>

**Summary of Local Patient Transfers:**

Month	Total	Average per day
Jan	428	19
Feb	430	22

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Mar	432	21
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### **Resuscitation:**

Attempts	5
ROSC (80%)	4 (3 [60%] good outcome)
PCI transfers by paramedics	10
Verification of deaths	9
Maritime retrievals	2

### **BREAST CARE**

#### **Clinical / Patient Care:**

- 7 new patients diagnosed with primary breast cancer.

#### **Innovations:**

- GHA Breast Clinic discharge information booklet completed and introduced as a trial.
- BCNs visit to new Radiotherapy facility in Malaga (Genesis Care).

### **PALLIATIVE CARE**

- There was an official opening of the department, named the Mark Dellipiani Palliative Care Unit.
- We have set up a monthly Joint Service Development meeting, with the Palliative Care Community MDT.

#### **Statistics:**

New Referrals to GHA Palliative team: 35

End of life care supported by GHA palliative care team: 29

Hospital deaths: 36

Home deaths: 4

### **MATRONS**

In January 2019, 28 members of staff within St Bernard's Hospital completed their training and qualified as Safeguarding Adult Lead Managers. The aim of Adult Safeguarding Training is to prevent harm and to reduce the risk of abuse or neglect towards adults with care and support needs. Adult Safeguarding also aims to raise public awareness so that our community as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect.

Monthly Ward Accreditation Audits have been conducted to ensure Core Nursing Standards on all Wards are being met. With this nursing assessment and accreditation system, we aim to bring together nursing involvement and delivering positive clinical outcomes which reflect the essence of ward management and leadership.

This performance assessment framework approach to service delivery incorporates the underpinning work of Practice Reviews (majoring on observations of care), Essence of Care, NHSLA standards and key clinical indicators. The framework is designed around 10 standards with each standard subdivided into environment, clinical care and nursing leadership. The 10 standards are: Leadership of the ward, Pain Management, Safety, Nutrition and Hydration, End of Life Care, Medicines Management, Patient Centred Care, Pressure Ulcers, Communication and Infection Control.

Medication Competency have also been carried out on the Ward Managers at Ocean Views. The aim of this exercise was to ensure competence and safe practice in Medication Management and Administration. These assessments will be circulated to the entire nursing workforce at Ocean Views.

A meeting was held with the Antibiotic Stewardship Committee. Data collected from several audits were scrutinised and action plans were set. Matrons and Pharmacists are to conduct another antibiotic audit and report back to Committee. Safeguarding patients from antibiotics misuse has been identified as one of the key contributors to antibiotic resistance thus it is the organisations responsibility that we mitigate these

risks to our patients.

Matrons met with the Clinical Governance Team and the Practice Development Sister to devise a 'Training Needs Analysis' across the whole Organisation. The Mandatory Training policy was then ratified and deemed appropriate. Liaison will shortly begin with the NHS to establish a link with their on-line training packages. The plan is to introduce an induction package and mandatory training across the whole organisation for both clinical and non-clinical staff.

Monthly training sessions have been held for the GHA staff on basic Safeguarding Awareness. These are run in conjunction with the Care Agency and have proved to be well received by staff.

## **PEADIATRIC DIABETES SERVICES**

A 3 month period of 0% hospital admission of paediatric diabetes patients is very likely a reflection of the success of regular contact with children/parents of children with diabetes either via face-to-face consultations, telephone or via email. Most families have installed software at home which allows them to download data from the children's blood glucose monitors, send the data via email, the PDSN analyses the data, replies the family with recommendations of which time of the day the child's insulin regimen needs tweaking. This has been helpful not only in keeping children out of hospital, but more so to empower parents in making safe adjustments to their child's diabetes regimen. Knowledge of effective diabetes management is promoted by not merely through telling the parents what to do, but by actively getting them involved in the decision-making.

Prevention of childhood Type 2 diabetes continues to be a priority as the numbers of children with Type 2 diabetes in UK and USA is creeping up. Apart from CHAMP, Health Promotion Nurses have teamed up with Dietetic and PDSN to strategize how to reach out to our children in promoting a healthy lifestyle within the school setting. General health promotion without mentioning Type 2 diabetes will inadvertently tackle that very real potential of childhood T2DM in Gibraltar.

### **Accident & Emergency**

**Attendances = 7319**

**SBH Admissions via A&E: 707**

Gynae = 16

Ortho = 45

General Surgery = 138

ENT = 9

Medical = 366

Paediatrics = 93

**Trauma Clinic Referrals = 219**

**Referrals to Mental Health = 40**

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### Rainbow Ward

	Jan	Feb	Mar	Totals
Paed Medical	83	59	51	193
HDU 1:1	3	1	2	6
ENT	2	5	6	13
Dental	8	17	18	43
Ortho	5	4	2	11
Eye	0	0	0	0
Surgical	10	5	5	20
Adult Patients 16+	0	0	0	0
<b>Total Admissions</b>	<b>111</b>	<b>91</b>	<b>84</b>	<b>286</b>
<b>Ward Attenders **</b>	<b>77</b>	<b>40</b>	<b>44</b>	<b>161</b>

### Critical Care Unit

	Jan	Feb	Mar
Admissions	85	75	99
RIP	2	3	5
Renal Placement	0	2	1
Ventilated	6	5	6
Non-Invasive Vent	9	10	18

### Maternity

There have been two admissions to the EPAU: both early miscarriages delivered by medical management.

### **Maternal Statistics January 2019:**

	Jan 2019	Feb 2018	March 2019	Q1 2019
Total births	30	37	38	105
Male	10	20	21	51
Female	20	17	17	54

### **Community Midwives Clinic Statistics:**

	Jan	Feb	Mar	Q1 2019
Booking	47	49	45	141
Antenatal	215	228	226	669
Postnatal	56	59	75	190
BCG vaccines	0	9	34	43

## **SURGICAL DIRECTORATE**

### **Dudley Toomey Ward:**

There continues to be no cancellations of elective surgery as a result of our bed management practices which continue to have a positive impact on scheduled elective surgery, patient-flow and the discharge process.

### **Day Surgery Unit:**

The DSU continues to undertake on average 90% of all elective patients requiring surgical procedures of all sub specialities with even more complex surgical procedures.

Below are the statistics for DSU throughput for the past three months:

	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>
Total surgical patients	174	293	285
DSU patients	155	263	254
Percentage	89.08%	89.76%	89.12%

### **Stoma Care Nurse Specialist:**

Our Stoma Nurse Specialist has filled a much needed gap in the service provisions for our patients with stomas. A database has been created for up to date information on all patients requiring stoma management. Standardisation of stoma care for nurses is in progress with teaching sessions scheduled for all nurses across the organisation. As well as providing patient support, they will also be involved in the coordination of treatment including liaising with the surgical team and other members of the multidisciplinary team.

## **BED MANAGEMENT**

Average of 60 available beds per night.

## **PCC**

### **Child Health Nurses:**

The child Health team initiated the BCG catch up programme on 10<sup>th</sup> February 2019 as per Public Health strategy to continue with the immunisation programme.

### 2.5 Human Resources

#### EXECUTIVE SUMMARY

January 2019 marked the establishment of the Healthcare Service Commission (HSC); an independent committee, commissioned to provide the Chairman of the GHA Board, with endorsement recommendations on a wide range of human resource matters, in respect of GHA members of staff, who possess final salary pension status. The constituting of the HSC has already facilitated the conclusive resolution of numerous long-standing claims, which has successfully regularised specialist roles, improved employee engagement and further strengthened industrial relations.

Within Medical Grades, successful Consultant interviews have taken place in Ophthalmology and Cardiology.

The GHA's continued investment in Clinical Governance has seen the appointment of two Clinical Informatics Officers, aimed to further develop clinical information systems inductions; systems administration; clinical data analysis and evidence based risk management practices.

The continuous development of Mental Health Services has also seen the appointment of two experienced Child and Adolescent Clinical Psychologists. Their expertise aims to develop a professionally integrated Child & Adolescent Mental Health Service. February 2019 also saw the commencement the GHA's new Matron in Mental Health, which has added structure and increased support to Clinical Nursing Management in Mental Health.

### **2.6 Hospital Services**

This board report covers the 1<sup>st</sup> Quarter period of the 2019 from January to March and the 4<sup>th</sup> Quarter of the Financial Year 2018-2019.

During this first quarter of 2019 we have continued with on-going improvements and refurbishment programs within St. Bernard's Hospital and worked on contingency plans for Brexit.

Following on from the completion of the projects in 2018 the teams have been working on the refurbishment of the General Stores Department and the creation of satellite stores in the main wards as part of wider stock management programme in conjunction with Guys & St.Thomas's NHS Trust.

The ambitious waterproofing project for SBH is 95% complete and has addressed the historic water ingress issues faced during periods of heavy rains. Completion of this project will be during the 2<sup>nd</sup> Quarter of 2019.

Major works at the main entrance of the hospital to waterproof the landing where completed in this quarter. Other improvements and infrastructure developments for clinical services that are currently being undertaken include the complete refurbishment and expansion of the Dialysis Unit.

### **2.7 Primary Care Services**

#### **1. Executive summary**

This quarter has been notable by the winter ‘flu’ season and seasonal demand on all primary care services. Keeping pace with demand has been the main focus; however, the Well Person Unit has been enhanced with the employment of a part time Sexual Health Nurse who runs the Sexual Health element of the Unit. Managerially, the focus has been on preparation for the move to the new Primary Care Centre and Paediatric Community Health Centre later this year.

#### **a. MyGHA Automated Telephone System**

The MyGHA automated telephone system has been further adjusted to meet the increasing popularity of the system. An additional appointment slot per GP clinic was converted to the MyGHA system in January, making the number of appointments bookable through the system close to 60% of all bookable appointments. To continue supporting this initiative, leaflets are continuously being given out to patients to inform them of the service and to provide a take-home navigation aid to make using the system quick, efficient and easy.

#### **b. Note Scanning Project**

Micro Business Systems (MBS) continue to scan the primary care paper notes and to provide a member of MBS staff to the PCC, dedicated solely to uploading files. To date 62000 pdf files have been uploaded on to EMIS.

#### **c. GPs with an Expressed Interest in Paediatrics**

In February 2019 Dr Daniela Martyn assumed the role of coordinator for the pending opening and move to the Children’s Centre. A series of meetings were then held with all stakeholders to prepare for the new services.

#### **d. GP with Special Interest in Substance Misuse**

Dr Chimene Taylor increased her community substance misuse and detox clinics in the PCC to two afternoon sessions due to a significant increase in demand for her services.

**e. Primary Care services for the Deaf and Hearing Impaired**

Every day a double daily appointment slot is reserved for patients with hearing difficulties with a GP who is familiar with the use of the online SignVideo British Sign Language Interpreting Service. These appointments are booked via the allocated mobile telephone. After 9am these appointments, if not used, are released for general booking.

**f. Palliative Care**

In February after a brief review of palliative care, the service has now become largely nurse-led, allowing Dr Robles more time to focus on those patients who require greater input.

**2. Sub Departments and Key Activities Statistics**

**(a) Training**

Training for staff in the PCC has covered the following topics:

- Datix Incident Reporting Training
- Safeguarding Children
- Understanding Autism
- Managing Challenging Behaviour in Individuals with Autism
- Rebound Therapy for Children with Complex Needs.
- Occupational Health

**(b) Key Activities Statistics**

<b>Services</b>	<b>Jan 19</b>	<b>Feb 19</b>	<b>Mar 19</b>	<b>Totals</b>
<b>Calls to 20052441</b>				
Offered	12457	9661	11596	33714
Answered	5661	4590	4856	15107
Terminated	1344	1002	1258	3604
Abandoned	5452	4069	5482	15003
<b>Administration</b>				
Repeat Prescription	666	521	538	1725
Results phone calls	149	193	333	675
<b>Audiology</b>				
Attended	150	112	145	407
Did Not Attend	26	13	15	54 (13%)
<b>Dermatology Cons</b>				
Attended	0	81	0	81
Did Not Attend	0	20	0	20 (25%)
<b>Dermatology GP</b>				
Attended	493	421	408	1322

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Did Not Attend	29	45	21	95 (7%)
<b>Dermatology Nurse</b>				
Attended	706	623	579	1908
Did Not Attend	140	81	96	317 (16%)
<b>Diabetic Nurse</b>				
Attended	1398	1040	1225	3663
Did Not Attend	158	149	154	461 (12%)
<b>Dieticians</b>				
Attended	233	142	173	548
Did Not Attend	44	29	41	114 (21%)

<b>General Practitioners</b>				
Attended	11347	10040	9210	30597
Did Not Attend	335	343	394	1072 (3.5%)
Advance Appointments	826	654	518	1998
Evening Clinic	275	277	316	868
See and Treat Clinic 1	602	562	614	1778
See and Treat Clinic 2	616	656	661	1933
Under 16's	1517	1381	1301	4199
Home Visits	359	264	244	867
Avge Wait Time (mins)	10.49	13.93	14.04	12.82
Telephone Sick Notes	439	348	326	1113
<b>Nurse Practitioners</b>				
Attended	988	820	780	2588
Did Not Attend	100	85	124	309 (12%)
<b>Nursing Clinics</b>				
Attended	3153	3070	3112	9335
Did Not Attend	356	358	403	1117 (12%)
<b>Occupational Therapy</b>				
Attended	49	58	53	160
Did Not Attend	2	4	1	7 (4%)
<b>Comm Physiotherapy</b>				
Attended	177	204	235	616
Did Not Attend	16	7	17	40 (6%)
<b>Speech &amp; Language</b>				
Attended	358	280	346	984
Did Not Attend	64	72	52	188 (19%)
<b>Women Health</b>				
Attended	407	323	392	1122
Did Not Attend	47	33	51	131 (12%)
<b>Well Person Unit</b>				
Attended	113	131	116	360
Did Not Attend	8	18	13	39 (11%)

## 2.8 Mental Health Services

### Introduction

During the first quarter of this year, Mental Health Services continue to develop four main aspects of service delivery, these are;

- Nurse led liaison service
- Mental health modern matron
- Review of psychological and counselling services offered in Gibraltar
- Child and Adolescence services (GYM)

### Psychology therapy offered with the mental health services.

The changes to the psychological and counselling services have seen an increase in counselling personnel with increased hours for our then current team, plus the recruitment of two more part-time counsellors in March 2019.

Waiting time for counsellors on average is 4-6 weeks.

The service has also recruited a 3<sup>rd</sup> psychologist, who is due to start at the end of July, this again will have a huge impact on referrals, which currently stand at 4-6 weeks waiting times.

### In-patient data and activities

Horizon - Sky / Dawn - Flats / Sunshine / ARC

### Horizon Ward

The ward saw a total 41 admissions to Horizon / Sky, psychosis and mood disorders being the primary presenting issues.

### Sections, Appeals and outcomes

31 patients were admitted under the mental health act.

Below is a summary of the appeals and outcomes.

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Section / appeals / outcomes Q1 2019 Horizon / SKY				
Month	Number of patients admitted on section	Number of appeals each month	Gender	Outcome
January 2019	8	4	M - 2	1 x Unsuccessful 1 x Withdrew appeal
			F - 2	2 x Unsuccessful
February 2019	14	3	M	2 x Unsuccessful 1 x Repatriated therefore appeal cancelled.
March 2019	9	7	M – 3	1 x Unsuccessful
			F - 4	1 x Made informal 5 x Awaiting appeal date

### Implementation of Mental Health Modern Matron

The successful introduction of a modern matron in February 2019 has seen a number of positive improvements to service delivery and care.

A visible presence on each ward every morning has enabled staff to raise and discuss not only, clinic concerns, but more importantly find solutions with minimal delay. Alongside this, service users and their families are actively encouraged to meet and discuss aspects of the service, promoting transparency, openness, and accountability within the service that we provide.

The matron is also tasked with attending weekly bed management meetings in SBH, thus enabling access to ERS and social services in a timely manner, ensuring minimal delays in transfers for those requiring long term residential care or packages of care (POC) for those service users appropriate for discharge back to their community residence. Another part of the role during this period has been to review and address

some of the clinical incidents datix through clinical governance; this has meant addressing a number of issues, which are being monitored through twice weekly audits on each ward.

### **Nurse Led liaison**

This service was introduced on 3<sup>rd</sup> March 2019 and is led by senior mental health staff. Currently, the liaison team provides assessment, support, reassurance and signposting for service users and their family in times of crisis. Service users traditionally attending A&E can now access mental health services through the liaison nurse, who will be the first point of contact. They also provide support and guidance to the 4 main wards in SBH for not only service users, but also for health care colleagues. Assessments therefore can be carried out in A&E, OV, CMHT, SBH wards or departments, providing assessments on suicidal ideation, psychosis and anxiety, following which the liaison nurse can if required provide follow up sessions for the individual.

### **Child and Adolescence services – To be known as GYM – Gibraltar Young Minds**

This service was formalised in January/February 2019, with the initial appointment of 2 child and adolescence psychologist, shortly followed by a Consultant in Child and Adolescent psychiatry. This is a new and welcome service for Gibraltar, previously provided by non-specialist staff and visiting consultant.

## **2.9 Information, Management and Technology**

### **Information Technology**

#### **Island Games Clinic**

A clinic with two PCs and three printers has been setup at the University of Gibraltar. The clinic will be used to treat athletes during their participation in the Gibraltar Island Games. IM&T have setup the PCs and printers and configured a site-to-site VPN with the University of Gibraltar. This allows them to have access to the GHA network and therefore to our resources.

### **Information Systems Projects**

#### **Operating Theatre List Management System**

New electronic Theatre system launched within HIS on 17th December. Elective waiting lists, emergency list, theatre bookings, pre-assessment results and in-theatre timings are now all fully electronic within the system. Follows 6 months of development work by the IS team. Feedback from users has been good and several additions / improvements to the system have been put in place since going live, following requests from users. Further improvements are also planned. The system produces various reports and these are already being used by Theatre management in order to examine / improve theatre usage.

#### **Occupational Therapy Stores Request**

OT had requested a system to manage the requests they receive for OT equipment, many of which are for delivery to patient's homes. This was developed by the IS team as a module within HIS and was launched in January 2019. Allows authorised users to submit a request for OT stores items, together with details on who the patient is, where the items are to be delivered, etc. Admin users within the system can mark the requests with planned delivery dates, mark them completed, etc. Feedback from OT has been very good and they say they have noticed a significant improvement to their workflows as a result of the introduction of the system.

### **2.10 School of Health Studies**

The SHS are working closely with the Chief Ambulance Officer and Director of Nursing to develop further training and education opportunities for the service.

Four staff from the operating theatre, have completed the second work based learning module Surgical First Assistance (II), this second module enhances learning from the first module and helps in ensuring that patients who require surgery are receiving safe and patient centred care.

The current BSc (Hons) Operating Department Practitioners students are all progressing well as they undertake their first clinical placement.

The ten Non-Medical Prescriber students (nurses) are coming to the end of the first part of this intensive programme all are continuing and are due to sit their first summative examinations. The second part of the programme addresses the complex competencies associated with prescribing and is predominantly practice based.

The SHS continue to host the BA (Hons) Social Work programme and are in close liaison with St George's University of London and Kingston University London and the Chief Executive Officer of the Care Agency, there are ten students. The Head of School (SHS) was invited to present to Social Workers and key stakeholders at the Work Social Work Day celebration.

The undergraduate nursing programmes are running as planned with all students moving successfully through the various portals associated with theory and practice. A number of meetings of the GHA-SHS-UoG Working Group, convened to oversee the transition of the 2020 Nursing Degree programme into the University of Gibraltar, have taken place.

In January 2019 the MSc Leadership and Health had its final face to face teaching block; the 9 students on this programme are now focussing on the dissertation stage of the programme.

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The SHS in conjunction with University of Salford are offering six master classes in leadership and management; these are all full day non-credit bearing sessions. The master classes are open to all GHA employees and have been very well subscribed to.

## 2.11 Clinical Governance

### Clinical Governance team

Clinical Governance are progressing with the capacity/demands/standards work streams for all specialities.

The functionality to capture start times for new referrals to OPD is now available and will be trialled prior to rolling out clinic by clinic. This has been a key area of work by the Clinical Informatics team. The team has also been working on the upgrading and restructure of Frontdesk, and planning the implementation of a patient check in-service, and secondary care appointment SMS reminders. Work has continued on Symphony ensuring the information being recorded is accurate, reliable and of a high standard, in order to provide reliable statistics.

The Clinical Governance team continue to have weekly operational meetings with Medical Director (extending to other senior management). The remit of these meetings has expanded to include areas such as the management of concerns and complaints, to review and update streams of work, actions and future projects.

Tasks which have continued from Q4 and are new to Q1 are as follows:

- Brexit contingency planning;
- Complaints and claims; and
- Internal investigations.

### 3. In-Camera Session