



QUALITY ACCOUNT 2017/18

Frances Blackburn, Deputy Director of Nursing and Patient Services Freeman

Jackie Moon, Head of Patient Safety and Risk

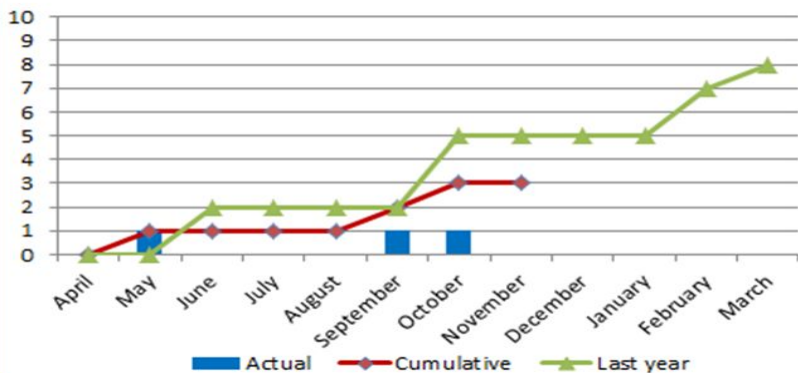
Andy Pike, Head of Quality Assurance and Clinical Effectiveness

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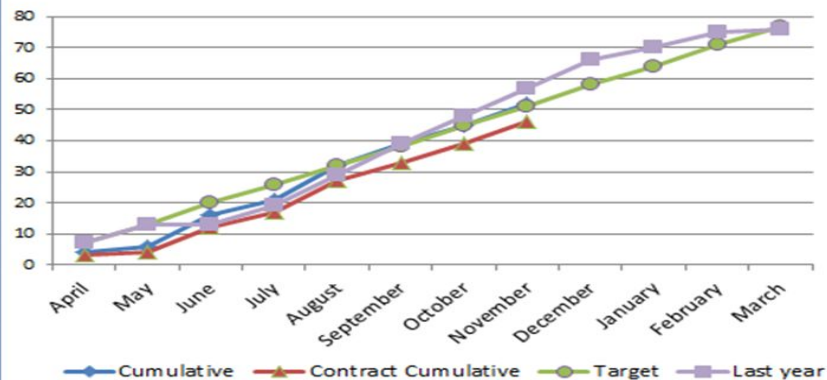


Priority 1: To reduce all forms of healthcare associated infection (HCAI)

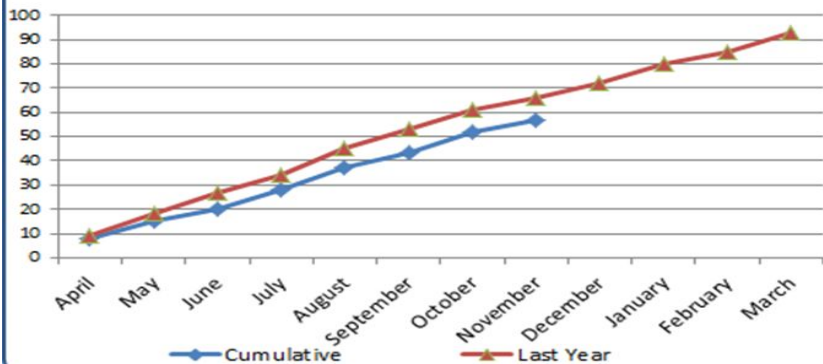
MRSA Bacteraemia 2017 - 2018



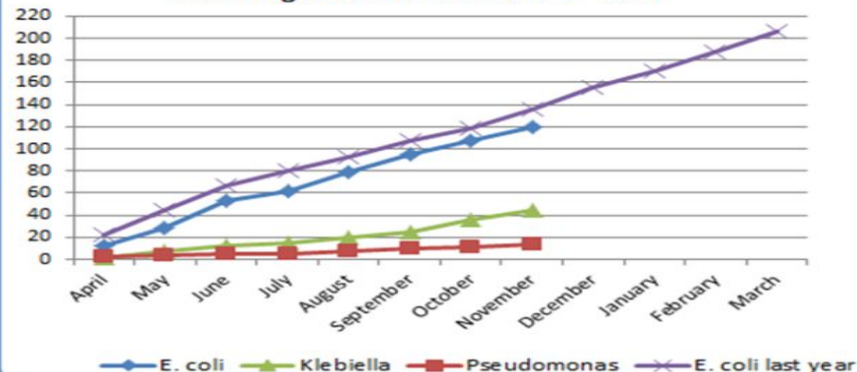
C. difficile 2017 - 2018



MSSA Bacteraemia 2017 - 2018



Gram Negative Bacteraemia 2017 - 2018

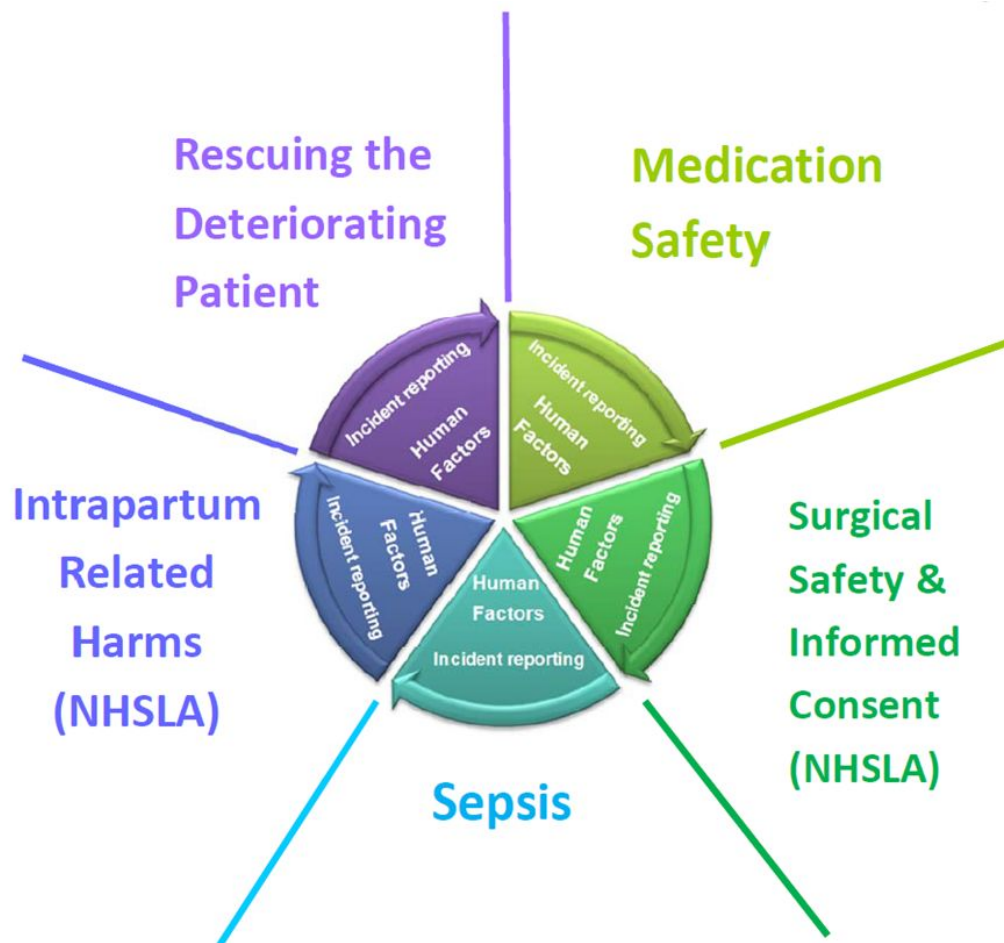


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Priority 2

Sign up to
.....
SAFETY
LISTEN LEARN ACT



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Priority 3 - The Delivery of Harm Free Care

•Pressure Ulcers

- Reducing pressure ulcers remains challenging but 21 wards are achieving their target reduction.
- Work is ongoing with support in the three key areas of leadership, team building and staff training.
- New clinical developments being piloted including using silicone dressing on the Trauma-orthopaedic ward (RVI)

• Supporting patients against catheter associated urinary tract infections

- “No Catheter no CAUTI” challenging decisions to catheterise patients, prompting decisions to remove catheters via new Care Plan.
- Use of intermittent catheterisation rather than indwelling Catheter.

• Falls

- Sustaining the reduction in the total number of falls, falls/1000 bed days and falls resulting in serious harm has been a challenge for 2017/18 to date.
- However, the average rate of falls/1000 bed days remains at 5.9 (equal to the same period last year) and the total number of falls is slightly lower than the same period last year.
- Practice areas – Lying and Standing Blood Pressure.
- Post fall manual handling.

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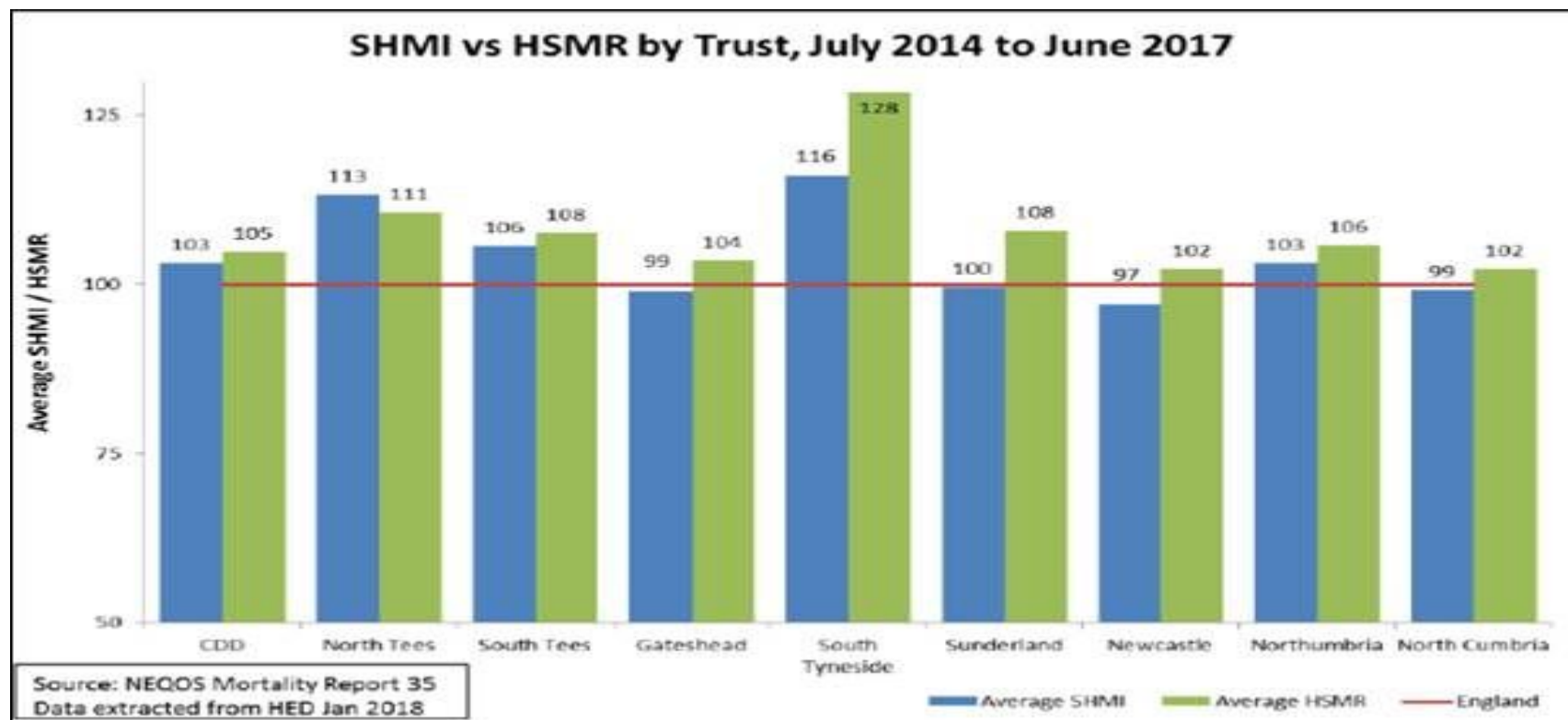
Priority 4: Safeguarding



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Priority 5: To monitor mortality indicators with the aim of reducing avoidable deaths

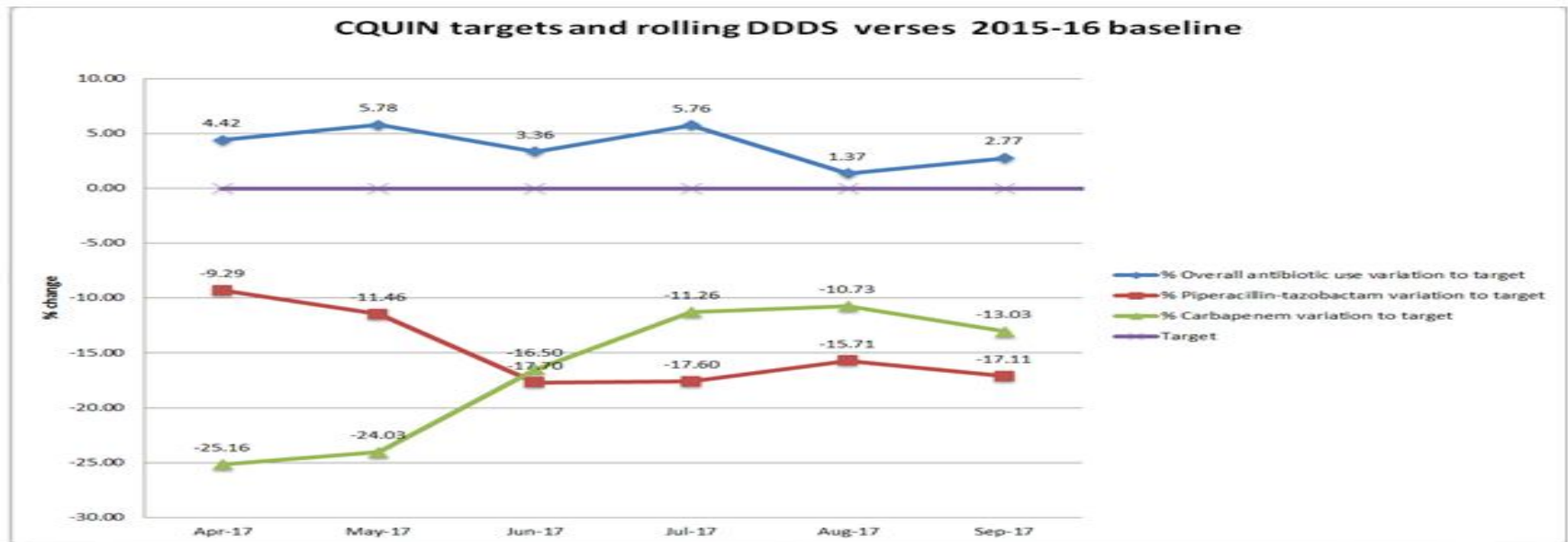


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Priority 6: Antimicrobial Stewardship

- 'High risk antibiotics' good progress
- Overall consumption slow progress
- Challenges: Antibiotic shortages and Clinical activity
- Forward plans: Education, Audit and feedback and Intervention work



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Priority 7: Ill Health Prevention



North East
Better Health
at Work Award
Gold Award

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Priority 8: Palliative & End of Life Care

- The regional Caring for the Dying Patient documentation is used on **all** relevant wards and community.
- Preferred place of death is explored 85% of the time compared to 44% 6 months ago
- End of Life Rapid discharges now supported by the Specialist Palliative Care 7 days a week.
- A pilot of 7 day working has reduced length of care episode down from 7.3 to 6.21 days.
- Partnership working with 22 care homes across Newcastle

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Priority 9: Safe & Effective Discharge

Admission avoidance and early safe discharge from hospital to patient's own home

- **Delayed Discharges**

- Discharge Awareness Month September 2017

- Board Round Masterclasses
- Board Round Video
- LOS4 day audit

- **Introduction of Expected Date of Discharge (EDD)**

- **Discharge to Care Homes**

- **Continuing Health Care (CHC)**

- **Repatriation**

- Regional policy currently being developed
- Regional task and finish group to ensure patients get to the right place first time

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Priority 10: Enhancing the quality of care through participation in research

- Patient involvement & Advisory Groups (contribute to design, planning & delivery of clinical trials)
- Patient satisfaction surveys
- Engagement and involvement events

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Priority 11: Patient Participation in research (Q2. Data cut)

Partner Organisation	16/17 Q2	17/18 Q2
City Hospitals Sunderland NHS Foundation Trust	83	96
County Durham and Darlington NHS Foundation Trust	65	66
Cumbria Partnership NHS Foundation Trust	13	28
Gateshead Health NHS Foundation Trust	36	40
North Cumbria University Hospitals NHS Trust	38	24
North East Ambulance Service NHS Foundation Trust	4	2
North Tees and Hartlepool NHS Foundation Trust	45	54
Northumberland, Tyne and Wear NHS Foundation Trust	27	39
Northumbria Healthcare NHS Foundation Trust	65	76
Primary Care Location	110	118
South Tees Hospitals NHS Foundation Trust	152	139
South Tyneside NHS Foundation Trust	33	27
Tees, Esk and Wear Valleys NHS Foundation Trust	19	20
The Newcastle Upon Tyne Hospitals NHS Foundation Trust	377	376
Non-NHS Activity in North East and North Cumbria	2	7
Grand Total	1069	1112

Table 1: Number of research studies

Partner Organisation	2015/16 Q2	2016/17 Q2	2017/18 Q2
City Hospitals Sunderland NHS Foundation Trust	919	922	1,286
County Durham and Darlington NHS Foundation Trust	480	410	838
Cumbria Partnership NHS Foundation Trust	262	264	448
Gateshead Health NHS Foundation Trust	454	326	645
North Cumbria University Hospitals NHS Trust	855	326	327
North East Ambulance Service NHS Foundation Trust	145	290	278
North Tees and Hartlepool NHS Foundation Trust	588	224	681
Northumberland, Tyne and Wear NHS Foundation Trust	665	383	1,291
Northumbria Healthcare NHS Foundation Trust	1,853	881	1,850
Primary Care Location	2,273	2,132	2,257
South Tees Hospitals NHS Foundation Trust	1,223	1,433	1,853
South Tyneside NHS Foundation Trust	552	174	649
Tees, Esk and Wear Valleys NHS Foundation Trust	161	518	1,064
The Newcastle Upon Tyne Hospitals NHS Foundation Trust	6,143	6,194	8,375
Non-NHS Activity in North East and North Cumbria	73	48	151
Grand Total	16,646	14,525	21,993

Table 2: Number of research participants

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Priority 12: Improving the Patient Experience – key updates

Meeting the Accessible Information Standard:

Work completed with 3rd sector and charitable organisations to design and launch ‘nutshell’ cards to help patients communicate their needs.

Completing work with carers:

Packs now available on all Wards and audits being completed.

Launch Accessibility Guides for disabled patients and visitors:

Launched May 2017 with over 3,000 hits in the first 3 months. Excellent feedback from staff, patients and Visitors.

Improving communication with Deaf/deaf or hard of hearing patients:

24/7 BSL interpreting now available at the Freeman and RVI sites via remote interpreters. Video Relay Systems in place to allow BSL users to contact staff from home using online interpreter relays. Digital listening devices on all Wards and Outpatient areas to aid communication with hard of hearing patients.

NGT Lite App links on website enabling Deaf/deaf patients to contact staff by text via a relay system.

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Priority 13: Dementia

MDT clinic supporting patients at the point of diagnosis and providing ongoing review and support.

Flexible visiting in line with John's campaign

Memory Cafes once a month at Melville day unit



"Forget me not" Bags

'Sustaining and improving use of "forget me not cards".

Training delivery for all Trust staff.

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2018/19 Proposed Quality Priorities:

Patient Safety

- Reducing Infection
- Pressure Ulcer Reduction
- Management of Abnormal Results
- Local Safety Standards for Invasive Procedures (LocSSIPs)
- Human Factors Training

Clinical Effectiveness

- Digital enhancements to care
- Alignment of Quality Assurance & Clinical Effectiveness processes

Patient experience

- Deciding Right
- Enhancing Patient & Public Involvement in QI
- Improving experience of vulnerable patients