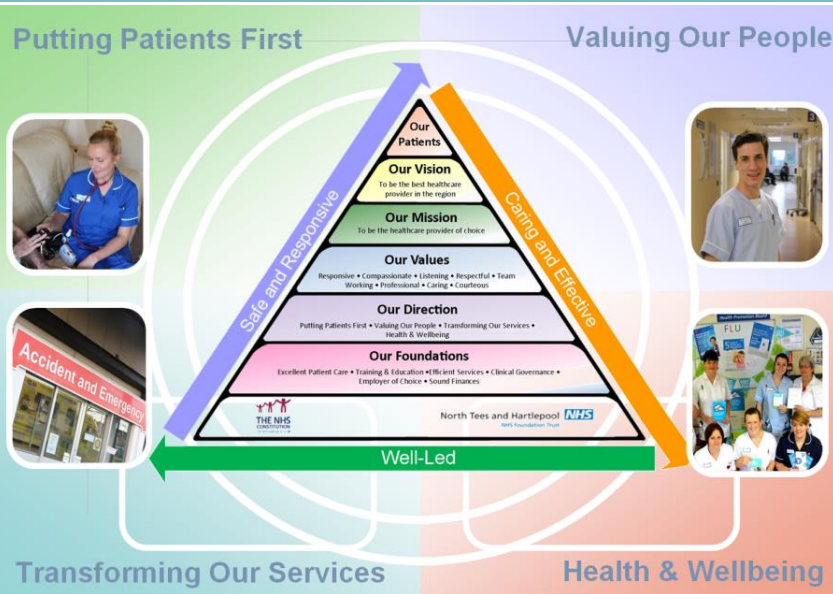




## Quality Accounts 2017-18



**Lindsey Robertson**  
Deputy Director of Nursing,  
Patient Safety and Quality

**Keith Wheldon**  
Safety & Quality Performance  
Manager

We're Passionate About

Putting patients first  
Quality, safety and patient experience  
Transforming services to meet the health needs of future generations



## Quality Accounts 2017-18

- 3 key priorities
- Patient Safety
- Effectiveness of Care
- Patient Experience



# Key priorities for 2017-18

1. Patient safety	2. Effectiveness of care	3. Patient experience
<ul style="list-style-type: none"> <li>• Mortality</li> </ul>	<ul style="list-style-type: none"> <li>• Safety Thermometer</li> </ul>	<ul style="list-style-type: none"> <li>• Palliative Care &amp; Care for the Dying Patient</li> </ul>
<ul style="list-style-type: none"> <li>• Dementia care</li> </ul>	<ul style="list-style-type: none"> <li>• Discharge processes</li> </ul>	<ul style="list-style-type: none"> <li>• Is our care good (patient experience surveys)</li> </ul>
<ul style="list-style-type: none"> <li>• Safeguarding (Adults &amp; Children)</li> </ul>	<ul style="list-style-type: none"> <li>• Safety, Quality and Infections Dashboard</li> </ul>	<ul style="list-style-type: none"> <li>• Friends and Family recommendation</li> </ul>
<ul style="list-style-type: none"> <li>• Infections</li> </ul>	<ul style="list-style-type: none"> <li>• Learning from Deaths</li> </ul>	This cell is intentionally left blank in the original image

## Mortality Indicators (HSMR & SHMI)

### **Hospital Standardised Mortality Ratio (HSMR) – In Hospital mortalities**

- **HSMR – 100.01** (August 2016 to July 2017)  
HSMR reporting in 2016/2017 QA **104.55** (March 2016 to February 2017)  
Reduction of **4.54 points**

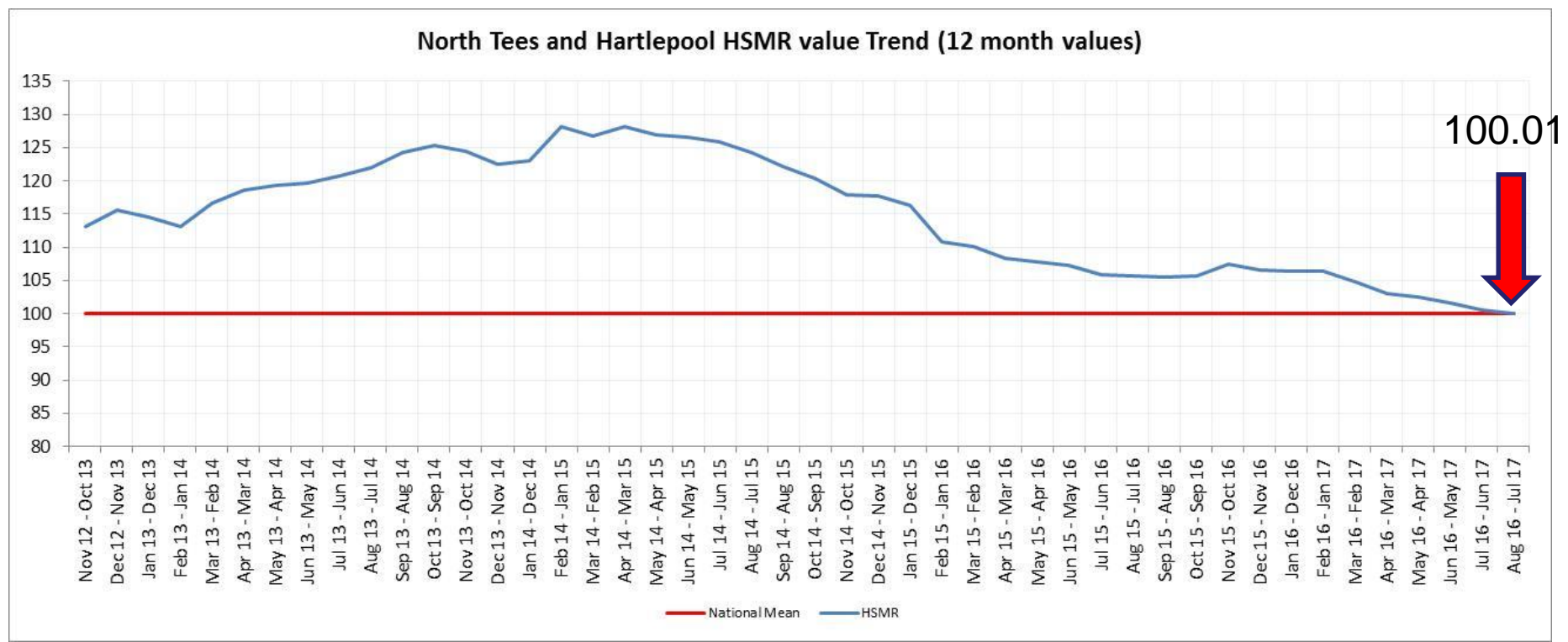
### **Summary level Hospital Mortality Indicator (SHMI) –**

In Hospital Deaths and those up to 30 days post Acute Trust discharge

- **SHMI – 109.42** (April 2016 to March 2017)  
SHMI reporting in 2016/2017 QA **111.95** (October 2015 to September 2016)  
Reduction of **2.53 points**

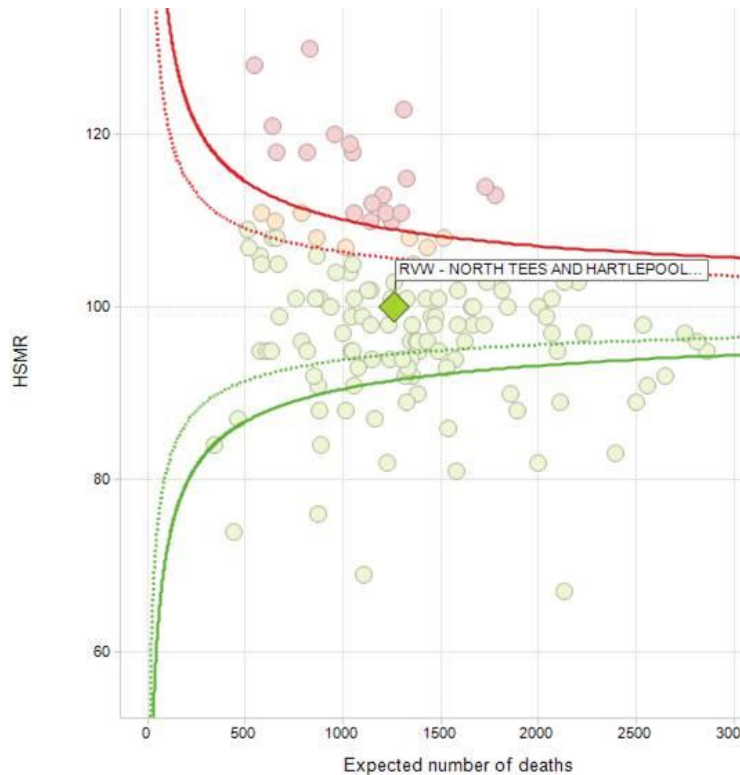


## Hospital Standardised Mortality Ratio (HSMR) - Trend





# Hospital Standardised Mortality Ratio (HSMR) – National Position



The Trust continues to reside within the **'As Expected'** 95% Confidence Interval. And is not level with the National Mean of 100

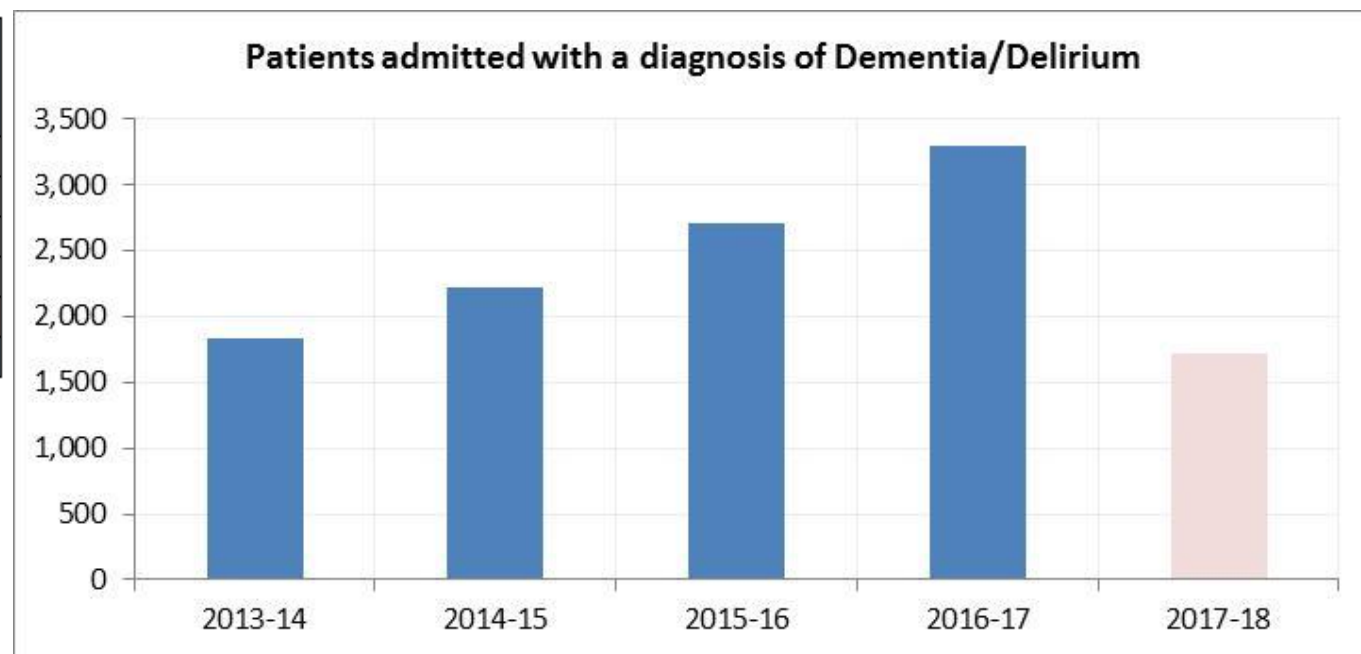


# Dementia

## Patients admitted with a diagnosis of Dementia/Delirium

Since April 2013 the Trust has admitted **11,779** patients with a diagnosis of Dementia/Delirium.

Financial Year	Patients admitted with a diagnosis of Dementia/Delirium
2013-14	1,833
2014-15	2,217
2015-16	2,711
2016-17	3,298
<b>2017-18</b>	<b>1,720</b>
<b>Total</b>	<b>11,779</b>



*2017-18 data is for April 2017 to September 2017*

## Infection Control (all data as at 30 September 2017)

### C diff (Clostridium Difficile)

- 2016-2017 total was 39, during this financial year the Trust has had 19 with the Monitor Breach target remaining at 13.

### MRSA (Methicillin-resistant Staphylococcus Aureus)

- The Trust has had 2 case of Hospital Acquired MRSA during this financial year, compared with 1 during 2016-17

### E. coli (Escherichia coli)

- The Trust has had 23 cases of Hospital Acquired E.coli during this financial, compared with 49 during 2016-17

### MSSA (Meticillin Sensitive Staphylococcus Aureus)

- The Trust has had 10 case of Hospital Acquired MSSA during this financial year, compared with 21 during 2016-17



### Klebsiella Species (Kleb sp)

- The Trust has had 15 hospital acquired cases this financial year

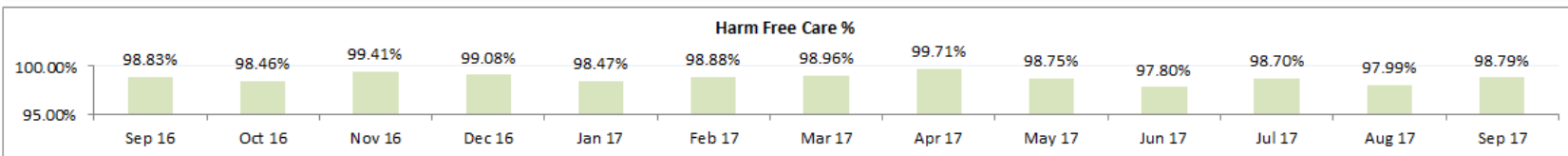
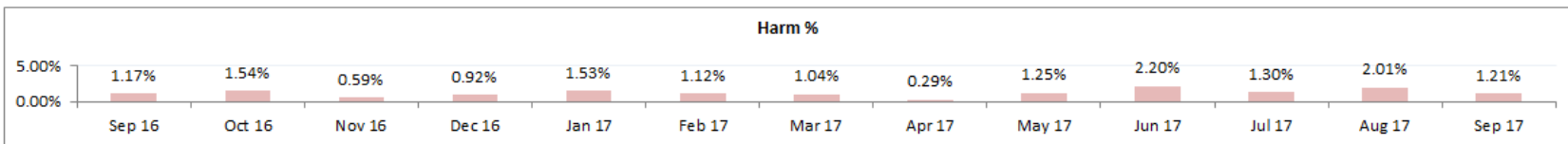
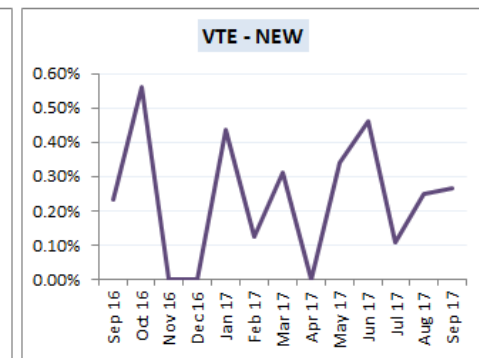
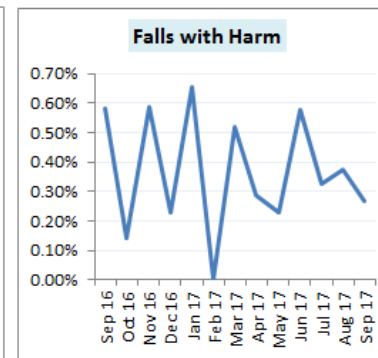
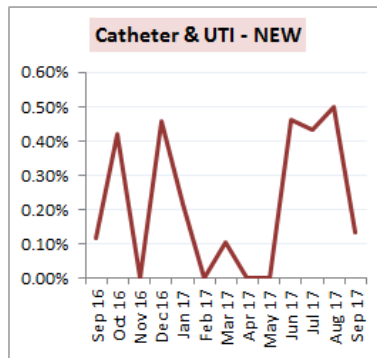
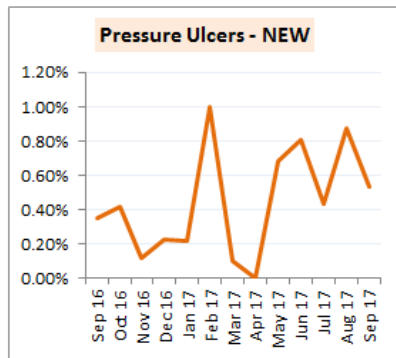
### Pseudomonas aeruginosa (Ps a)

- The Trust has had 4 case of hospital acquired cases this financial year



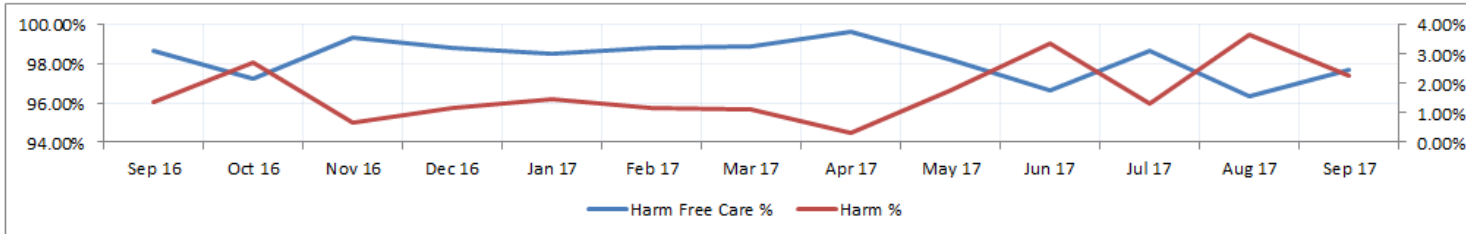
# Safety Thermometer

% of New Harm	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17	Apr 17	May 17	Jun 17	Jul 17	Aug 17	Sep 17
<b>Pressure Ulcers - NEW</b>	0.35%	0.42%	0.12%	0.23%	0.22%	1.00%	0.10%	0.00%	0.68%	0.81%	0.43%	0.88%	0.54%
<b>Catheter &amp; UTI - NEW</b>	0.12%	0.42%	0.00%	0.46%	0.22%	0.00%	0.10%	0.00%	0.00%	0.46%	0.43%	0.50%	0.13%
<b>Falls with Harm</b>	0.58%	0.14%	0.59%	0.23%	0.65%	0.00%	0.52%	0.29%	0.23%	0.58%	0.33%	0.38%	0.27%
<b>VTE - NEW</b>	0.23%	0.56%	0.00%	0.00%	0.44%	0.12%	0.31%	0.00%	0.34%	0.46%	0.11%	0.25%	0.27%
<b>Harm Free Care %</b>	98.83%	98.46%	99.41%	99.08%	98.47%	98.88%	98.96%	99.71%	98.75%	97.80%	98.70%	97.99%	98.79%
<b>Harm %</b>	1.17%	1.54%	0.59%	0.92%	1.53%	1.12%	1.04%	0.29%	1.25%	2.20%	1.30%	2.01%	1.21%

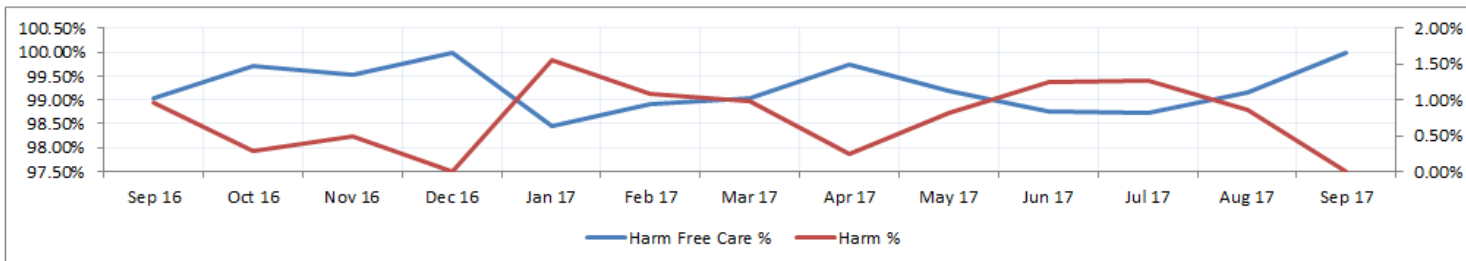


## Safety Thermometer

Acute Hospital Ward													
% of New Harm	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17	Apr 17	May 17	Jun 17	Jul 17	Aug 17	Sep 17
Harm Free %	438	359	436	332	462	334	442	286	385	374	442	317	386
Number of Surveys	444	369	439	336	469	338	447	287	392	387	448	329	395
Harm Free Care %	98.65%	97.29%	99.32%	98.81%	98.51%	98.82%	98.88%	99.65%	98.21%	96.64%	98.66%	96.35%	97.72%
Harm %	1.35%	2.71%	0.68%	1.19%	1.49%	1.18%	1.12%	0.35%	1.79%	3.36%	1.34%	3.65%	2.28%



Community													
% of New Harm	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17	Apr 17	May 17	Jun 17	Jul 17	Aug 17	Sep 17
Harm Free %	410	342	410	99	441	460	508	408	487	472	466	465	350
Number of Surveys	414	343	412	99	448	465	513	409	491	478	472	469	350
Harm Free Care %	99.03%	99.71%	99.51%	100.00%	98.44%	98.92%	99.03%	99.76%	99.19%	98.74%	98.73%	99.15%	100.00%
Harm %	0.97%	0.29%	0.49%	0.00%	1.56%	1.08%	0.97%	0.24%	0.81%	1.26%	1.27%	0.85%	0.00%

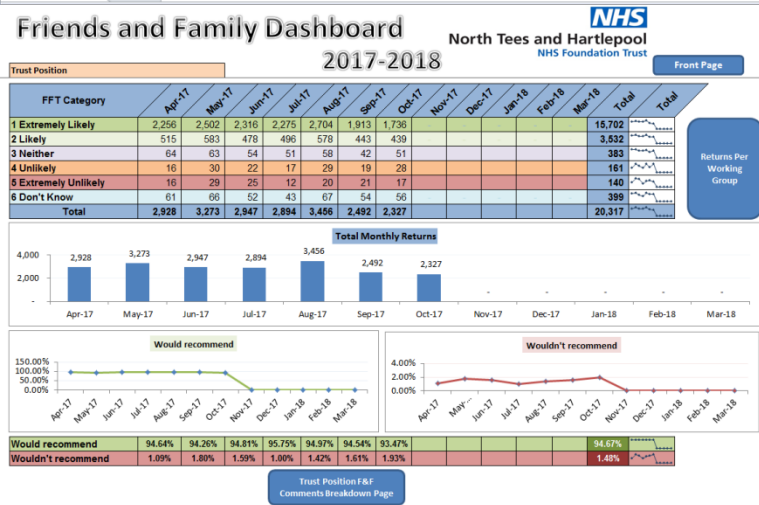
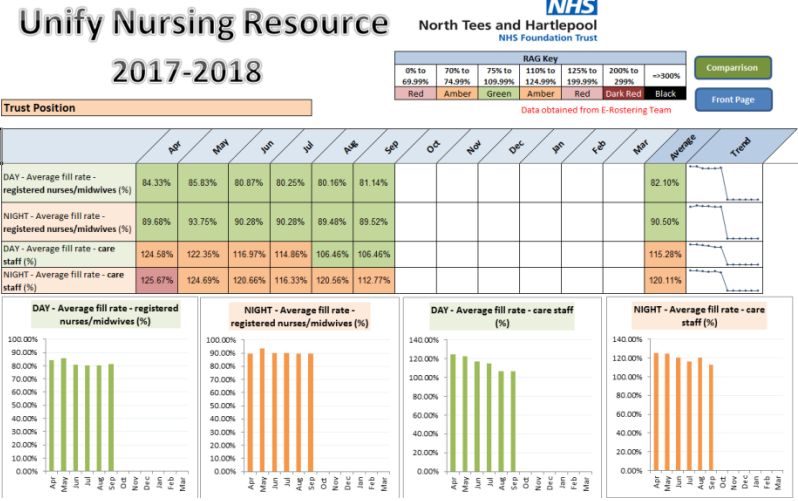


## Safety, Quality and Infections Dashboard

**Safety, Quality and Infections Dashboard 2017-2018**

Trust Position: North Tees and Hartlepool NHS Foundation Trust

ID	Measure	Previous Period	Latest Value	2017-2018 Total	Trend
1	Fill Rate - RN Day	Aug 17 80.16%	Sep 17 81.14%	82.19%	↑
2	Fill Rate - RN Night	Aug 17 89.48%	Sep 17 89.52%	90.50%	↑
3	Fill Rate - HCA Day	Aug 17 106.46%	Sep 17 106.46%	115.28%	↑
4	Fill Rate - HCA Night	Aug 17 120.56%	Sep 17 112.77%	120.11%	↓
5	Sickness % - Nurses	Aug 17 4.27%	Sep 17 4.12%	4.22%	↓
6	Sickness % - Additional Clinical Services	Aug 17 11.56%	Sep 17 7.57%	8.21%	↓
7	<b>Total Sickness %</b>	<b>Aug 17 7.21%</b>	<b>Sep 17 5.50%</b>	<b>5.78%</b>	<b>↓</b>
8	Stage 1 Complaint - Concave	Oct 17 80	Nov 17 7	511	↓
9	Stage 2 Complaint - Formal Meeting	Oct 17 7	Nov 17 0	61	↓
10	Stage 3 Complaint - Formal Letter	Oct 17 12	Nov 17 1	109	↓
11	<b>Total Complaints</b>	<b>Oct 17 99</b>	<b>Nov 17 8</b>	<b>681</b>	<b>↓</b>
12	Trust Pressure Ulcer Grade 1	Oct 17 32	Nov 17 7	107	↓
13	Trust Pressure Ulcer Grade 2	Oct 17 72	Nov 17 16	312	↓
14	Trust Pressure Ulcer Grade 3	Oct 17 17	Nov 17 7	74	↓
15	Trust Pressure Ulcer Grade 4	Oct 17 6	Nov 17 4	16	↓
16	<b>Total Trust Pressure Ulcers</b>	<b>Oct 17 127</b>	<b>Nov 17 34</b>	<b>509</b>	<b>↓</b>
17	Trust Fall No Injury	Oct 17 80	Nov 17 14	603	↓
18	Trust Fall Injury, No Fracture	Oct 17 33	Nov 17 4	195	↓
19	Trust Fall Fracture	Oct 17 1	Nov 17 0	14	↓
20	<b>Trust Total Falls</b>	<b>Oct 17 114</b>	<b>Nov 17 18</b>	<b>812</b>	<b>↓</b>
21	Safety Thermometer - NEW Pressure Ulcers	Aug 17 0.86%	Sep 17 0.54%	0.45%	↓
22	Safety Thermometer - Catheter & UTI - NEW	Aug 17 0.50%	Sep 17 0.13%	0.00%	↓
23	Safety Thermometer - Falls with Harm	Aug 17 0.38%	Sep 17 0.27%	0.38%	↓
24	Safety Thermometer - VTE - NEW	Aug 17 0.25%	Sep 17 0.27%	0.25%	↓
25	<b>Safety Thermometer - Harm Free Care %</b>	<b>Aug 17 97.99%</b>	<b>Sep 17 98.79%</b>	<b>98.74%</b>	<b>↑</b>
26	<b>Safety Thermometer - New Harm %</b>	<b>Aug 17 2.01%</b>	<b>Sep 17 1.21%</b>	<b>1.26%</b>	<b>↓</b>
27	UA Hand Hygiene Nurses	Oct 17 93.33%	Nov 17 94.11%	92.94%	↑
28	UA Hand Hygiene Doctors	Oct 17 78.38%	Nov 17 75.50%	84.57%	↑
29	UA Hand Hygiene HCAs	Oct 17 88.40%	Nov 17 90.63%	93.75%	↑
30	UA Hand Hygiene Professionals Doctors	Oct 17 100.00%	Nov 17 100.00%	97.92%	↓
31	UA Hand Hygiene Others	Oct 17 93.06%	Nov 17 86.11%	93.35%	↓
32	<b>UA Hand Hygiene Compliance Avg</b>	<b>Oct 17 90.77%</b>	<b>Nov 17 87.10%</b>	<b>91.86%</b>	<b>↓</b>
33	Infection Control - C diff	Sep 17 0	Oct 17 1	20	↑
34	Infection Control - MRSA	Sep 17 0	Oct 17 1	3	↑
35	Infection Control - MSSA	Sep 17 2	Oct 17 3	13	↑
36	Infection Control - E.coli	Sep 17 1	Oct 17 4	27	↑
37	Infection Control - Kleb sp	Sep 17 3	Oct 17 2	17	↓
38	Infection Control - Ps a	Sep 17 0	Oct 17 0	4	↓
39	<b>Friends &amp; Family - Would Recommend %</b>	<b>Sep 17 94.54%</b>	<b>Oct 17 93.47%</b>	<b>94.67%</b>	<b>↓</b>
40	<b>Friends &amp; Family - Wouldn't Recommend %</b>	<b>Sep 17 1.61%</b>	<b>Oct 17 1.93%</b>	<b>1.48%</b>	<b>↓</b>
41	<b>Friends &amp; Family - Positive Comments</b>	<b>Sep 17 3,681</b>	<b>Oct 17 0</b>	<b>26,427</b>	<b>↓</b>
42	<b>Friends &amp; Family - Negative Comments</b>	<b>Sep 17 47</b>	<b>Oct 17 0</b>	<b>438</b>	<b>↓</b>
43	SPEGS - Safe	Oct 17 95.90%	Nov 17 100.00%	93.51%	↑
44	SPEGS - Effective	Oct 17 90.91%	Nov 17 100.00%	96.49%	↑
45	SPEGS - Caring	Oct 17 98.85%	Nov 17 100.00%	96.83%	↑
46	SPEGS - Responsive	Oct 17 96.96%	Nov 17 100.00%	98.95%	↑
47	SPEGS - Well-Led	Oct 17 83.61%	Nov 17 100.00%	88.06%	↑
48	<b>SPEGS - Avg Total</b>	<b>Oct 17 92.58%</b>	<b>Nov 17 100.00%</b>	<b>91.73%</b>	<b>↑</b>
49	Medication Errors	Oct 17 59	Nov 17 9	384	↓
50	Adult Safeguarding Alerts Raised	Oct 17 1	Nov 17 0	34	↓
51	Family's Voice Diary Completed	Sep 17 4	Oct 17 6	44	↑
52	Family's Voice Diary Blank	Sep 17 8	Oct 17 4	34	↓
53	Score of 24 (Maximum)	Sep 17 1	Oct 17 2	21	↑
54	Score between 19 to 23	Sep 17 5	Oct 17 12	69	↑
55	Score below 19	Sep 17 1	Oct 17 0	30	↓
56	<b>Average Daily Score</b>	<b>Sep 17 20.29</b>	<b>Oct 17 21.21</b>	<b>20.06</b>	<b>↑</b>



# Specialist Palliative Care (SPC)

The changes instigated by the Specialist Palliative Care team within the Trust during 2016-17 have now been fully embedded into everyday working practice.

The new practice improves patients experiences, quality of care given and ensures accurate data capture and recording of visits to patients.

The following table demonstrates a year-on-Year comparison of visits made by the SPC team

	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Total</b>
2014-15	131	129	163	181	<b>604</b>
2015-16	229	288	303	220	<b>1,040</b>
2016-17	362	385	339	350	<b>1,436</b>
<b>2017-18</b>	<b>329</b>	<b>330</b>			<b>659</b>










*2017-18 data is for April 2017 to September 2017*





# Friends and Family Test

The Trust has collected **17,990** forms, of which **17,059** stated Extremely Likely or likely (94.82%) and **256** stated Extremely Unlikely or Unlikely (1.42%)

FFT Category	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Total	Total
1 Extremely Likely	2,256	2,502	2,316	2,275	2,704	1,913	-	-	-	-	-	-	13,966	
2 Likely	515	583	478	496	578	443	-	-	-	-	-	-	3,093	
3 Neither	64	63	54	51	58	42	-	-	-	-	-	-	332	
4 Unlikely	16	30	22	17	29	19	-	-	-	-	-	-	133	
5 Extremely Unlikely	16	29	25	12	20	21	-	-	-	-	-	-	123	
6 Don't Know	61	66	52	43	67	54	-	-	-	-	-	-	343	
<b>Total</b>	<b>2,928</b>	<b>3,273</b>	<b>2,947</b>	<b>2,894</b>	<b>3,456</b>	<b>2,492</b>							<b>17,990</b>	
<b>Would recommend</b>	<b>94.64%</b>	<b>94.26%</b>	<b>94.81%</b>	<b>95.75%</b>	<b>94.97%</b>	<b>94.54%</b>							<b>94.82%</b>	
<b>Wouldn't recommend</b>	<b>1.09%</b>	<b>1.80%</b>	<b>1.59%</b>	<b>1.00%</b>	<b>1.42%</b>	<b>1.61%</b>							<b>1.42%</b>	

The Trust received **26,427** positive comments and **438** negative during this reporting year.



## Complaints (as of 30 September 2017)

During this financial year the Trust received **574** complaints, of which **96 (16.72%)** reached a Stage 3 (Formal Chief Exec Letter)

	Stage 1	Stage 2	Stage 3	Total
2015-16	945	74	295	<b>1,314</b>
2016-17	880	70	270	<b>1,220</b>
<b>2017-18</b>	<b>424</b>	<b>54</b>	<b>96</b>	<b>574</b>

# CQC

- New Inspection Regime
- Unannounced & Well-Led
- Focus on Core Services
- Inspection 2015 - active operational group which continuously reviews progress and improvements
- Trust regularly engagement with the CQC
- Web page dedicated to CQC includes updates against the domains and actions



# Quality Accounts Marketplace

- The 2016-17 Market place event was held on Wednesday 14th December 2016 at the North Tees site
- 2017-18 event is scheduled for **Wednesday 10 January 2018** at the North Tees site



## Consultation Visits

- The Trust will commence the stakeholder visits in November 2017, concluding them by the end of March 2018.
- A draft version of the 2017-18 Quality Accounts will be made available to all stakeholders in March 2018 for review and comments





## PWC Audit

- The 2017-18 Quality Accounts were given a clean bill of health by the independent auditors PriceWaterhouseCoopers (PWC)





## Quality Accounts 2016-17

- These priorities were delivered in the 2016-2017 Quality Accounts that were published in June 2017 on the NHS Choices website.
- [North Tees and Hartlepool 2016-2017 Quality Accounts](#)



## 2017-18 timescales

- Engagement process commences November 2017
- Draft QA March 2018 to all Stakeholders
- 3rd party declarations –April 2018
- Finalised document May 2018
- Publication onto NHS Choices June 2018

