

# **Quality Accounts 2022-23**

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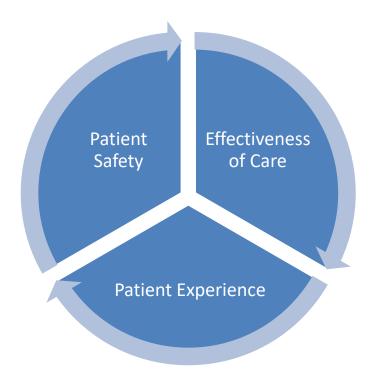
Associate Director of Nursing, Effectiveness and Clinical standards







# Quality Accounts 2022-23 Three Key Priorities





# Quality Accounts Priorities 2022-23



Mortality

Dementia

Mental Health

Safeguarding (Adult & Children's)

Infections

# Effectiveness of Care

Learning from Deaths

Discharge Processes

Accessibility

Violent Incidents

Safety and Quality Dashboard

# Patient Experience

Palliative Care & Care For the Dying Patient (CFDP)

Is our care good? (Patient Experience Surveys)

Friends and Family Test



## **Patient Safety**



#### **Mortality Indicators (HSMR & SHMI)**

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

**HSMR** – **93.53** (December 2021 to November 2022) HSMR reporting for December 2020 to November 2021 was **87.82** an increase of **5.71** points.

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

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

SHMI – 98.11 (September 2021 to August 2022) SHMI reporting for September 2020 to August 2021 was 99.00 an increase of 0.89 points.

#### **COVID-19 activity in the SHMI**

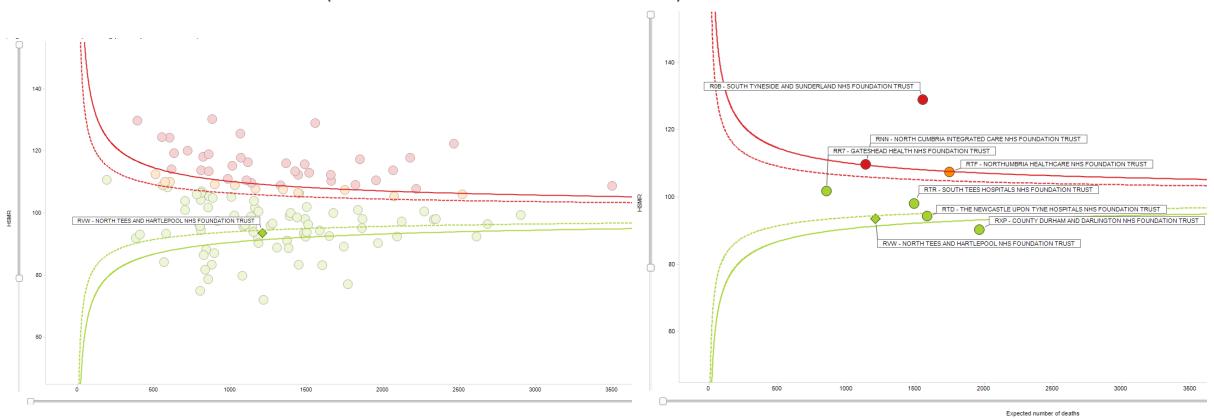
From the July 2020 publication, COVID-19 activity has been excluded from the SHMI. The SHMI is not designed for this type of pandemic activity and the statistical modelling used to calculate the SHMI may not be as robust if such activity were included.



#### **HSMR** Indicator

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

**HSMR** – **93.53** (December 2021 to November 2022)



**National Range – 72.01 to 130.33** 

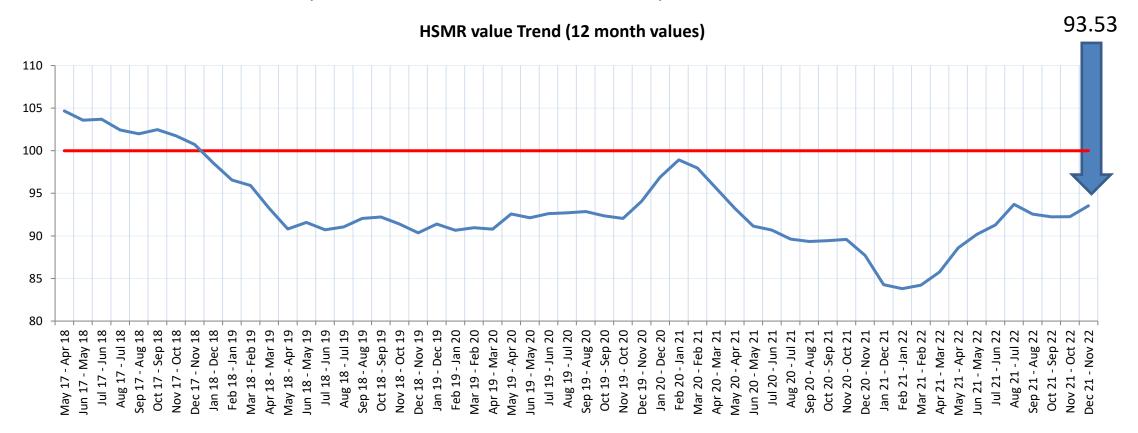
**Regional Range – 90.30 to 128.90** 



#### **HSMR Indicator**

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

**HSMR** – **93.53** (December 2021 to November 2022)

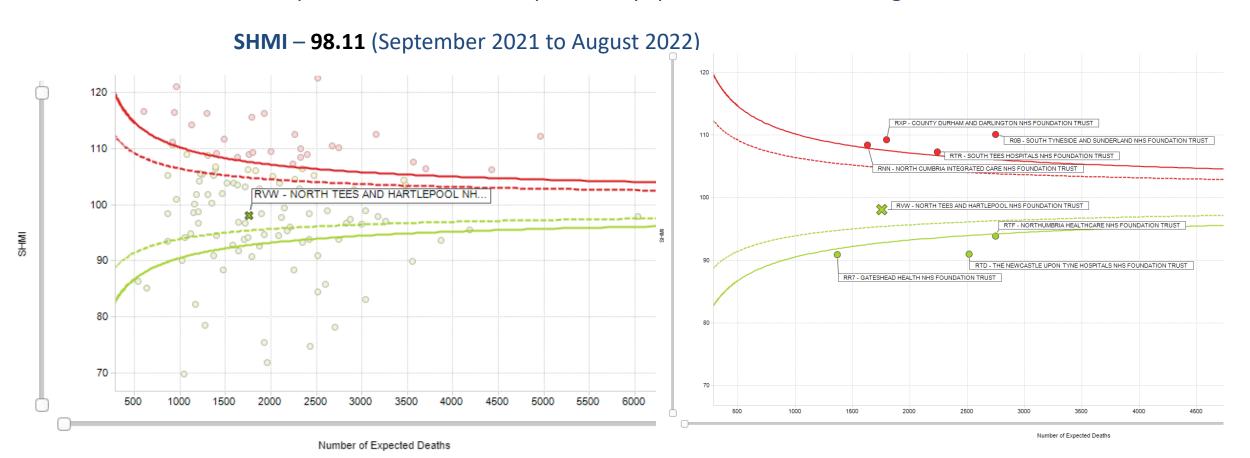




#### **SHMI Indicator**

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

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



**National Range - 69.79 to 122.46** 

**Regional Range – 90.92 to 110.04** 



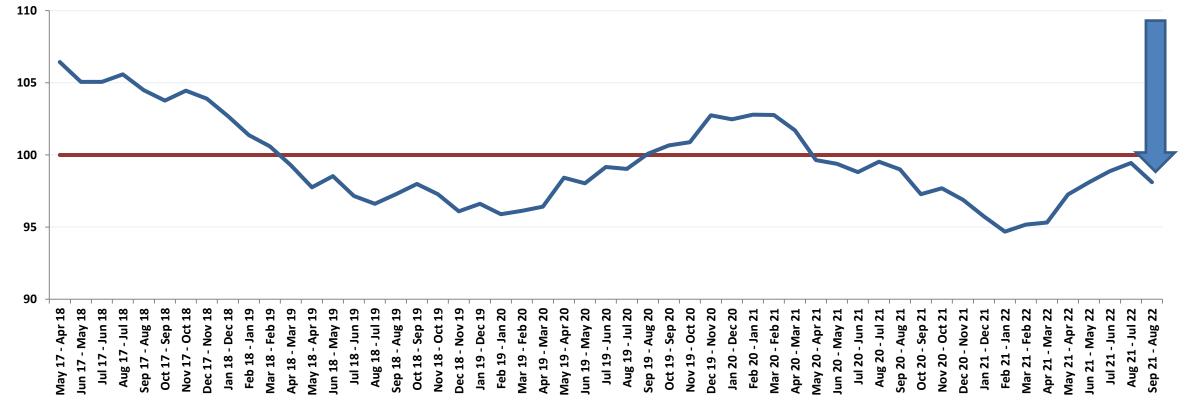
#### **SHMI Indicator**

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

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



98.11





#### **Trust Raw Mortality**

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2015/16	119	124	103	92	99	119	95	124	134	134	135	142
2016/17	142	131	123	119	107	97	132	119	144	155	136	136
2017/18	126	128	103	104	105	120	121	129	182	194	138	163
2018/19	135	104	102	114	92	108	139	134	132	149	132	113
2019/20	106	142	90	118	117	124	126	125	157	146	116	118
2020/21	152	113	101	93	102	106	120	154	206	207	110	83
2021/22	95	87	84	100	113	112	120	113	151	151	120	110
2022/23	153	117	111	134	95	115	112	134	167			

	Apr to Dec
2015/16	1,009
2016/17	1,114
2017/18	1,118
2018/19	1,060
2019/20	1,105
2020/21	1,147
2021/22	976
2022/23	1,138

#### Raw Inpatient Mortality Trend since Apr 17





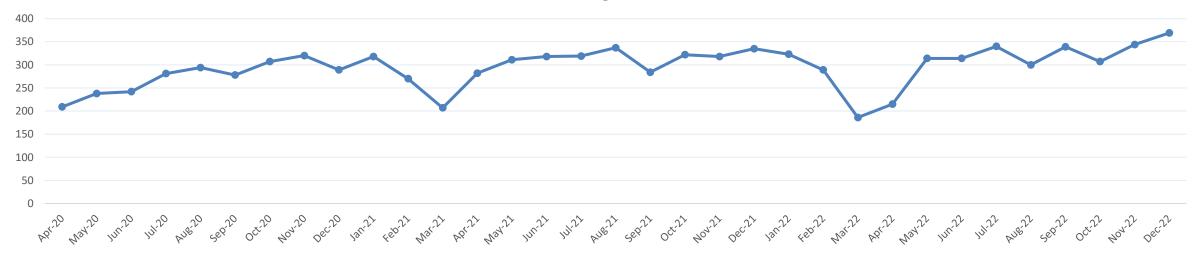
#### **Dementia**

The challenges the Trust faces regarding patients admitted with a diagnosis of Dementia/Delirium.

	April	May	June	July	August	September	October	November	December	January	February	March	Total
2020-21	209	238	242	281	294	278	307	320	289	318	270	207	3,253
2021-22	282	311	318	319	337	284	322	318	335	323	289	186	3,624
2022-23	215	314	314	340	300	339	307	344	369				2,842



Patients admitted with a diagnosis of Dementia/Delirium





#### Infection Control – C diff

The following demonstrates the total number of *Healthcare Associated* infections during 2022-2023 compared with 2021-2022.

- Hospital onset healthcare associated (HOHA): cases that are detected in the hospital two or more days after admission
- Community onset healthcare associated (COHA): cases that occur in the community (or within two days of admission) when the patient has been an inpatient in the trust reporting the case in the previous four weeks.

Infection Type	2021-22	2022-23	Year on Year
*Clostridium difficile (C Difficile) HOHA – Hospital onset Healthcare Associated	26	25	-1
*Clostridium difficile (C Difficile) COHA – Community onset Healthcare Associated	18	13	-5

Data is for April to January for both financial years



#### **Infection Control**

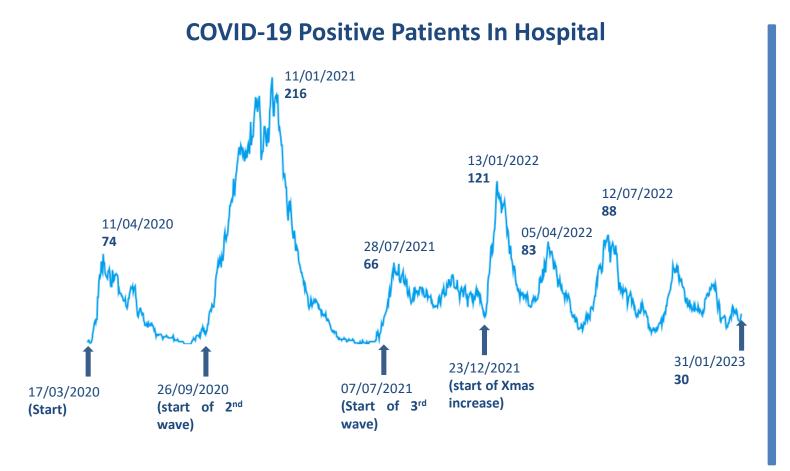
The following demonstrates the total number of *Healthcare Associated* infections during 2022-2023 compared with 2021-2022.

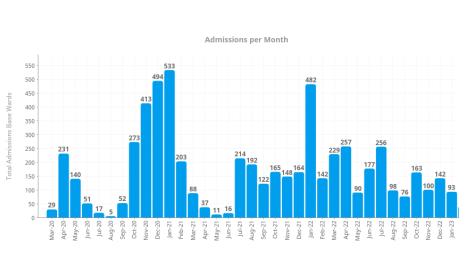
Infection Type	2021- 22	2022- 23	Year on Year
Methicillin-Resistant Staphylococcus Aureus (MRSA) bacteraemia	0	1	+1
Methicillin-Sensitive Staphylococcus Aureus (MSSA)	20	33	+13
Escherichia coli (E.coli)	61	70	+9
Klebsiella species (Kleb sp) bacteraemia	14	22	+8
Pseudomonas aeruginosa (Ps a) bacteraemia	9	10	+1
CAUTI	227	180	-47

<sup>\*</sup>Data is for April to January for both financial years



#### **COVID-19 Infections**

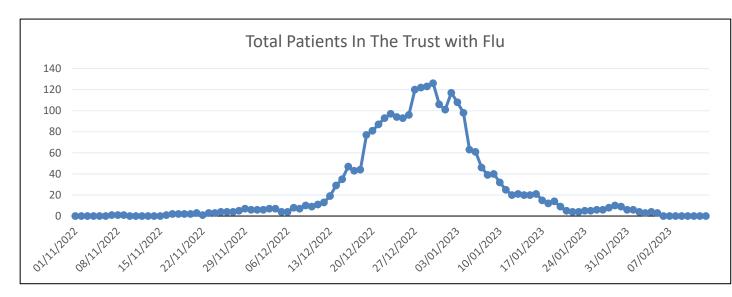




As of this presentation (15 Feb 2023), there are 24 cases in the Trust.



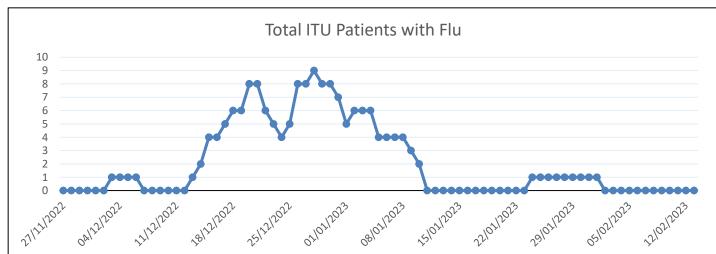
#### **2022-2023 Flu Cases**



On the 30 December 2022 there were **126** patients in the Trust with Flu.

The single day with the highest number of Flu admissions was the 27 December 2022 with 37.

As of this presentation, there are **Zero** cases in the Trust.



On the 28 December 2022 there were **9** patients in ITU with Flu.



### **Effectiveness of Care**



#### **Emergency Activity**

	A&E Attendance	A&E Admissions	<b>UC Attendance</b>	<b>UC Admissions</b>	Total Attendance	<b>Total Admissions</b>
2019/20	45,264	18,216	127,856	7,285	173,120	25,501
2020/21	34,361	14,069	86,455	3,888	120,816	17,957
2021/22	42,637	16,664	12,1233	6,132	163,870	22,796
2022 - 14/2/23	41,361	15726	118,070	5,967	159,431	21,693
2022/23 Predicted	47177	17937	134674	6806	181851	24744

#### Attendances to A&E/ UC

Attendances saw a significant increase overall of 45% (year on Year) including those patients going through Resus (increasing by 41%) suggesting higher acuity. Increases in overall admissions can also be seen across the Trust.

Attendances	Dec'21	Dec'22	Diff	% Diff
Type 1 A&E	3,611	4,603	992	27%
Type 3 UC	9139	13,824	4,685	51%
Total	12,750	18,427	5,677	45%

Type 1 Breakdown	Dec'21	Dec'22	Diff	% Diff
Resus	725	1022	297	41%
Majors	2337	2689	352	15%
Paeds	547	920	373	68%

Emergency Admissions	Dec'21	Dec'22	Diff	% Diff
Trust (excl Ambulatory)	3562	4269	707	17%
Type 1 Admissions	1443	1820	377	21%
Type 3 Admissions	351	388	37	10%



#### **Accessibility**

#### Developments and improvements 2022/2023:

- Trust webpage and accessibility
- The Trust contracted language service provider has recommenced training to Trust staff to provide guidance on best practice when working with an interpreter. Virtual training sessions have taken place and face to face training is due to commence with Ward Matrons.
- 18 Accessibility Champions have been introduced to raise awareness around accessibility and reasonable adjustments. The Champions will have received training around the Accessible Information Standards by the end of March 2023.
- The Terms of Reference for the Accessibility Meeting are being refreshed. The meeting is now Chaired by Associate Director of Nursing, Experience and Improvement. The refresh will ensure enhanced senior representation and wider representation from our stakeholders in the community.



#### Accessibility continued....

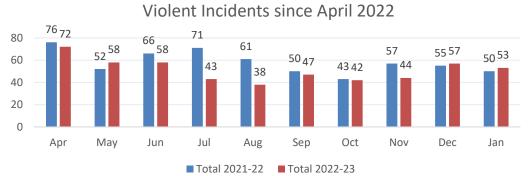
- The Trust engaged the services of an external contractor who undertook a DDA access audit on North Tees, Hartlepool and Peterlee Hospital sites. The audit followed the journey of a patient from the car park/bus stop through to wards and departments. The recommendations from the audit have been graded according to priority level and risk level and remedial work will commence in the first quarter of 2023-24.
- The DDA access report and findings are now factored into any development work to ensure they are addressed whilst undertaking the development work.
- PLACE (patient-led assessment of the care environment) audits have recommenced. The most recent took place in December 2022 and includes external areas, communal areas within the Trust as well as a number of inpatient areas. The findings were fed into the DDA access report for remedial work.
- A review of the Trust complaint process is underway in line with the Parliamentary and Health Service Ombudsman's Complain
  Standard Framework. The revised process ensures equal access when raising a concern, complaint or providing feedback as
  well as a more streamlined and efficient service for all.
- A Patient, Public and People with Lived Experience Steering Group (PPPLE) has been set up to review and refresh the Trust's
  approach to engagement from full co-production of services to soft touch information giving. The Steering Group will include
  representation from PPPLE who require reasonable adjustments to access our services.

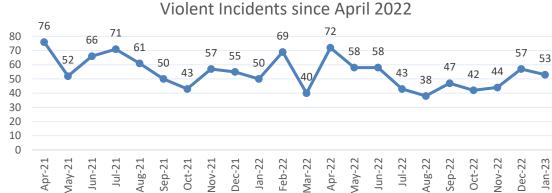


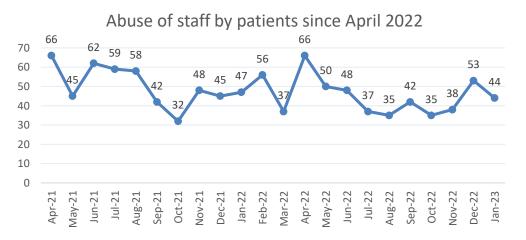
#### **Violent Incidents**

The following demonstrates the total number of *Violent Incidents* the Trust received during 2022-2023 compared with 2021-2022.

	Total	Abuse of staff by patients	Abuse of staff by other person
Apr - Jan 2021-22	581	504	77
Apr - Jan 2022-23	512	448	64









Data is for Apr to Jan for both financial years



#### **Violent Incidents - Events**

Adverse event	2021-22	2022-23	Difference
Assault etc with a weapon	6	4	-2
Concerns to do with personal safety	78	40	-38
Disruptive, aggressive behaviour - other	87	50	-37
Inappropriate behaviour and/or personal comments	22	20	-2
Need for use of control and restraint with patient	50	20	-30
Physical abuse, assault or violence - Malicious	9	11	2
Physical Abuse, assault or violence - unintentional	108	115	7
Racial	13	5	-8
Sexual	1	0	-1
Verbal abuse or disruption	207	247	40
Total	581	512	-69

Data is for Apr to Jan for both financial years



## **Patient Experience**





#### Friends and Family Test (FFT)



Data from April 2022 to January 2023

Total Responses							Month			
FFT Response	Apr 22	May 22	Jun 22	Jul 22	Aug 22	Sep 22	Oct 22	Nov 22	Dec 22	Jan 23
Very Good	1,137	1,265	1,280	1,284	1,410	1,191	1,469	1,223	1,057	1,395
Good	182	259	229	218	231	177	236	201	200	210
Neither Good nor Poor	30	51	51	43	58	45	53	47	32	51
Poor	24	38	37	31	31	31	24	31	31	26
Very Poor	23	36	37	51	35	34	53	36	53	34
Don't know	3	3	5	5	2	4	3	7	6	5
Total	1,399	1,652	1,639	1,632	1,767	1,482	1,838	1,545	1,379	1,721

April 2022 to January 2023

Very Good/Good %	92.53%
Very Poor/Poor %	4.34%



#### **Complaints**

The following demonstrates the total number of *Complaints* the Trust received during 2022-2023 compared with 2022-2022 and 2020-2021.

Complaint Type	*2020- 21	*2021- 22	*2022- 23	2021-22 v 2022-23
Stage 1 - Informal	823	1,006	1,161	+155
Stage 2 - Formal (meeting)	17	67	68	+1
Stage 3 - Formal Response Letter	111	85	82	-3

**Total** 1,158 1,311 951

Data is for April to January for all financial years



#### **Complaints**

# The following demonstrates the top 10 number of *Complaints* types so far for April to January.

#### All Complaints – Top 10 Subjects

Sub-subject (primary)	Apr- 21	May- 21	Jun- 21	Jul- 21	Aug- 21	Sep- 21	Oct- 21	Nov- 21	Dec- 21	Jan- 22	Total
Attitude of staff	12	15	25	33	18	25	13	26	11	16	194
Communication - verbal / non verbal	17	24	10	12	10	22	17	22	15	17	166
Treatment and procedure delays	14	6	4	5	11	13	12	7	8	10	90
Care and compassion	9	5	7	6	7	16	10	7	9	4	80
Competence of staff member	4	8	6	7	5	7	6	5	5	4	57
Length of time to be given apt	2	9	2	6	13	5	0	6	2	8	53
Discharge arrangements	7	3	5	2	6	7	5	0	4	5	44
Outpatient cancellation	6	4	5	1	4	2	4	4	7	2	39
Delay to diagnosis	6	3	7	4	1	1	10	1	1	2	36
Receptionist/administration staff incl attitude and communication	5	4	2	4	3	4	3	4	3	3	35

Sub-subject (primary)	Apr- 22	May- 22	Jun- 22	Jul-22	Aug- 22	Sep- 22	Oct- 22	Nov- 22	Dec- 22	Jan- 23	Total
Attitude of staff	5	18	13	9	12	15	7	12	8	23	122
Length of time to be given apt	5	9	11	9	14	12	20	8	13	7	108
Treatment and procedure delays	9	8	12	13	13	14	7	12	7	8	103
Care and compassion	4	7	2	7	9	6	12	6	9	14	76
Delay to diagnosis	4	2	5	10	12	12	8	6	6	9	74
Communication - Verbal	0	2	1	0	8	8	6	17	6	13	61
Communication - verbal / non verbal	27	18	4	4	0	0	0	0	0	0	53
Competence of staff member	3	6	3	10	9	5	5	4	2	3	50
Outpatient cancellation	6	7	8	8	3	1	7	6	1	3	50
Failure to monitor	5	3	4	4	10	3	5	5	2	6	47



#### **Compliments**

The following demonstrates the total *Compliments* received so far for April 2021 to January 2022 compared to the same period for 2020-21.

Total Apr to Jan

2021-22 3,503

2022-23 3,766





#### **2022-23 Timeline**

- Engagement process between February 2023 to March 2023
- 2022-2023 document finalised end of April 2023
- Document sent to Stakeholders to produce their 3<sup>rd</sup> party statements on.
- 3<sup>rd</sup> Party Statements back by end of May 2023
- The 2022-23 Quality Accounts to be published on the Trust website by 30 June 2023 deadline

