NHS
East Cheshire
NHS Trust

Quality Account 2016/17

Year at a glance 2016/17

April 2016
Revalidation for all nurses and midwives in the UK came into effect. Every registered nurse must demonstrate (every 3 years) that they are able to deliver care in a safe, effective and professional way.

May 2016
Launch of Cheshire Care Record, an IT system that allows hospitals, GPs and community staff to have access to a single record of patient information.

June 2016
To celebrate National Volunteer Week the trust ran various events to promote the volunteer service and to thank all volunteers for their invaluable work.

July 2016
Abigail Peterson, Associate Specialist Practitioner - Infection Prevention and Control Team completed her Postgraduate Certificate in Infection Prevention and Control.

August 2016
A traditional-style record player proved a hit with patients on Ward 9. The donation together with a selection of records from different eras has had a strong and positive impact on patients.

September 2016
Maternity services the trust became the first in Cheshire to sign up to the Royal College of Midwives Caring for You Charter.

October 2016
Respiratory medicine ranked number one in the country by the General Medical Council (GMC).

November 2016
Paediatric research nurse Natalie Keenan came runner-up in the 'Best Newcomer to Research' category of the Greater Manchester Clinical Research Awards 2016.

December 2016
Congleton War Memorial Hospital (CWMH) introduces personalised zimmer frames. Proved to have decreased falls these 'pimped' frames pass infection control standards and have been embraced by all patients.

January 2017
Year 9 students from local schools came to the trust as part of a funded skills club programme to learn about values and behaviours, the 6c's of nursing, alcohol awareness, first aid and dementia.

February 2017
Our health visiting team from Dene Drive in Winsford took part in Winsford Wellbeing Week promoting healthy eating through the early years from breastfeeding to weaning.

March 2017
The SAFER patient flow bundle is a standardised way of managing patient flow through hospitals. One aim for the trust was to reduce length of stay by 0.5 days. The pilot wards achieved a reduction of 1.5 days.

Achievements against priorities

Domain	Action focus	Progress
Harm Free Care (Evidence of significant improvement)	Prevention of avoidable pressure ulcers	• Reduction in stage 2 pressure ulcers from 754 in 15/16 to 589 in 16/17; Increase in avoidable stage 3&4 from 14 in 15/16 to 23 in 16/17 • Improved recognition & staging of ulcers through 'react to red' programme, SSKIN bundle and E-learning, reducing unstageable ulcers from 185 in 15/16 to 98 in 16/17 • Strengthened investigation & RCA processes
	Falls with harm	• Revised falls policy, strengthened risk assessment, implemented post-falls protocol • 10% reduction in overall falls; Increase in patient falls with harm inked to increased frailty, confusion & complexity. Risk assessments & care plans compliant with policy.
	CDI	• No incidence of CDI since October 2016 • Reported 17 cases against annual trajectory of 14 (six were associated with one outbreak)
	Acutely unwell patient	• Strengthened clinical mandatory training for acute kidney injury • Reduction in unplanned admissions to ICU
	Acute ward skill mix	• New roles identified including Activity Co-ordinator on dementia ward • Introduced trainee Nursing Associates programme • Rolled out care certificate for HCA staff
	Infant mortality	• Implementation of gap & grow to identify changes in foetal movement • Improvements in booking documentation process and CTG recognition
Improving Outcomes (Evidence of significant improvement)	Clinical competences	• Completed & implemented 19 core clinical competences for B2-7 staff, including portfolio for newly qualified and overseas nurses
	Dementia & sepsis care bundle	• Agreed & implemented Dementia Care Bundle including enhanced care needs & therapeutic activities • Implemented sepsis screening in ED and inpatient areas with antibiotic stewardship
	Community outcome KPIs	• Commenced work on goal attainment score for therapies • Monitoring acute Visiting Service impact on ED and admission avoidance
	Implement 7 day working	• Contributing to national audit of compliance with standards for time to consultant review, access to diagnostics, access to consultant directed interventions, and ongoing review. Targeting weekend ultrasound, weekend discharge, increasing acute physician establishment and frequency of consultant reviews

Achievements against priorities

Domain	Action focus	Progress
Listening & Responding (Evidence of significant improvement)	Discharge process	• Development of 'Planning your Discharge' patient information • Development of Discharge Hub to support families and carers in choosing care home • Improved working with nursing homes with development of 'meet & greet'
	Carer engagement	• Sign up to Johns Campaign • Development of Welcome Policy with flexible visiting times • Patient name boards over beds detailing 'what matters to me'
	Patient surveys	• 98% always feel treated with dignity & respect • Inpatient FFT 95% positive experience • Introduction of 'sleeping packs' to reduce noise at night • Health watch enter & view overall positive with minimal targeted action as required
Integrated Care (Evidence of significant improvement)	Community partnership working	• Developed new pathways to support joint assessment in patients homes • Development of a local services directory for health & social care professionals
	Single Assessment Process Frailty	• Developed generic comprehensive geriatric assessment documentation for health & social care staff
	Roll out of Cheshire Care Record	• IT system enabling hospital, community and primary care staff to (read only) access of the patient record • In excess of 1000 staff who can now use the system
	Delayed Transfers of Care	• Reduced number of acute bed days as a result of delayed transfer of care from 947 days in April 2016 to 662 days in March 2017
	Third Sector	• Engaged with Red Cross in developing flexible approaches to support patient on return to their own home, including visiting and supporting with every day activities such as shopping

Commissioning for Quality and innovation (CQUIN)*

Acute	Achieved
NHS staff health and wellbeing – a: Introduction of wellbeing initiatives	🟩
NHS staff health and wellbeing – b: Development of an implementation plan and implementation of a healthy food and drink offer	🟩
Sepsis – Screening: Timely identification and treatment for sepsis in ED	🟨
Sepsis – Timely identification and treatment for sepsis in inpatient setting	🟨
AMR: Reduction in antibiotic consumption per 1,000 admissions	🟩
National AMR: Empiric review of prescriptions	🟨
Cancer Survivorship –a: End of treatment summery and Care plan for primary cancer	🟩
Cancer survivorship – b: Risk stratification	🟩
Cancer survivorship – c: Communication	🟩
Cancer survivorship – d: Follow up Pathways	🟩

Acute	Achieved
Coordinated EOL care: Preferred place of care	🟩
Safe and Timely Discharge: Effective discharge using EDD	🟩
Safe and Timely discharge - Improved quality of eDNF	🟩
Alcohol Assessment - Alcohol brief intervention at ED	🟩

Community	Achieved
Pressure Ulcer Prevention	🟨
NHS staff health and wellbeing – b Development of an implementation plan and implementation of a healthy food and drink offer	🟩
NHS staff health and wellbeing – a Introduction of wellbeing initiatives	🟩

"I cannot praise the staff here enough. There is a calm and welcoming atmosphere and I did not feel that I was annoying anyone with my concerns. The manner in which my child has been treated and spoken to has been outstanding and the people who work here have inspired me."

- Children's Ward

Improving Patient Care

- Macmillan Quality Information & Support Standards
- Children's Ward - High Flow Oxygen (Optiflow)
- Community Rehabilitation - East Cheshire
- Outpatient booking service
- Pre-operative pharmacist
- Improving hospital ambulance turnaround times
  - Holistic care in ICU
  - Integrated care
  - React to Red champion

You said…
"I feel that the 7pm till 8pm visiting hours are not long enough. You're sat on the ward all day and you look forward to seeing friends and family and it flies by."
– Inpatients

We have…
…implemented open visiting on wards

Surveys, audits and research

- Local Surveys
  - Inpatients
  - Outpatients
  - Community nursing
- National
  - Inpatient
  - A&E
  - Cancer patient experience
- National clinical audits
- NCEPOD audits
- Local clinical audits
- Clinical research

"The whole team of nurses who treat me are caring and considerate and if they think that I have any other health problems they inform the doctor and arrange a visit. One of the nicest things about them is that they treat me as a person and not just an 84 year old woman."

- Community Nursing

2017/18 Priorities

1. **Harm free care** – Reduce pressure ulcers, falls with harm, medication errors and near misses

2. **Integrated care** – Embed the use of the Cheshire Care Record across all teams and the role of case manager in community teams

3. **Improving outcomes** – Embed SAFER flow principles, the dementia care strategy and the Mortality Governance Process

4. **Listening and responding** – Implement patient Six Steps and WiFi across the MDGH site

You said…
"When night staff talk, they should realise that they have slept during the day and the patient hasn't. Try to be conscious of the fact."
– Inpatients

We have…
Rolled out 'sleep packs' to all areas