

SIGN UP TO SAFETY CAMPAIGN

Q1 REPORT (APRIL– JUNE 2017)



1.0 Participation in the campaign

Staff engagement

We have continued to hold kitchen tables as a way of hosting safety conversations, listening to our staff and encouraging them to talk about what they know about keeping patients and staff safe. Holding kitchen tables at our skills blitz days and conference. We have developed a way, in the means of kitchen table kits, to try and ensure the sustainability of kitchen tables and holding safety conversations for the future. These kits can be used by any area to host their own kitchen table. They are located in the Sign Up to Safety office for staff to use. From the feedback we have been hearing at our kitchen tables we have developed a tool, an outcomes and actions table, to utilise what we have learnt and to help direct staff to what support is available, relating to the topic/concern that is raised. We will be presenting this along with the kitchen table kits at the next senior sisters meeting to reach and inform all staff.

Public engagement

We continue to attend the Trusts health events, where we have an opportunity to engage with the public and discuss what makes them feel safe in hospital as well as inform them about our specific improvement projects. We have received very positive comments particularly about Wexham Park Hospital's improvements since becoming part of Frimley Health.

2.0 Events

On Thursday 18th May we held our first patient safety conference at Frimley Health. Let's Talk 2017 was based at Wexham Park Hospital in the post graduate medical centre and was open to all Frimley Health staff, healthcare students and Sign up to Safety members from other organisations. The day included 13 presentations that ranged from updates on the project work streams, good news stories from Frimley Health, freedom to speak up guardians, learning from incidents and human factor experts from other industries. Delegates each received a Let's Talk magazine that included case studies, personal reflections and further information about the Sign up to Safety projects. There was also a poster zone, wellbeing area and of course, a kitchen table. In total we had 60 delegates and received unanimously positive feedback.

"It was a wonderful conference. All speakers were great and it was one of the best conferences I have ever attended. Thanks to all the team for your hard work"

Due to the great success of Let's Talk 2017 we have arranged an abridged version of the event, called Let's Talk – Reloaded, as a half day at Frimley Park Hospital on Wednesday 6th September. Tickets can be booked via eventbrite <https://www.eventbrite.co.uk/e/lets-talk-reloaded-tickets-35375369683?ref=estw>

3.0 Clinical handover

Summary of planned actions

- Further work on engagement and by-in from ICU for Hospital at Night meeting at Frimley Park
- ✓ Focus on key wards/departments to support the complete implementation on Safety SBAR handover including satellite wards such as Bourne Ward at Farnham hospital.
- Present completed internal transfer policy to Nursing and Midwifery Board for ratification in May 2017
- ✓ Develop a selection of Matrons and Senior Sisters to deliver handover training for preceptorship groups and Nurse in Charge master-classes as part of the long term sustainable solution to improve handover
- Support the IM&T and EDMS teams in selecting a unified electronic solution for specialist referrals including acceptable time limits and confirmation of transfer of care

Update on Actions

In most wards Safety SBAR handover is now business as usual. The Sign Up to Safety team continue to be involved in supporting wards that have been identified by their ward leaders as needing a boost or refresher. Shift handover is also reviewed after serious incidents with ad hoc ward based training provided where necessary.

The internal transfer policy was taken to NMB in May but further changes and considerations were requested by the group. The guidance will go back for ratification in July with a training and implementation programme to commence in September.

The hospital at night improvements are being led by the chief registrar with input and support from the handover matron when required. Further improvements are still required but senior engagement remains low.

Next Steps

- Ratify and launch new internal transfer policy cross site (September 2017)
- Work with Fleet community nurses to develop amended Safety SBAR handovers
- Support doctors at Wexham to implement Safety SBAR on the labour ward.
- Continue to work with identified wards to ensure Safety SBAR is sustained (e.g. ward 9 at Wexham Park)

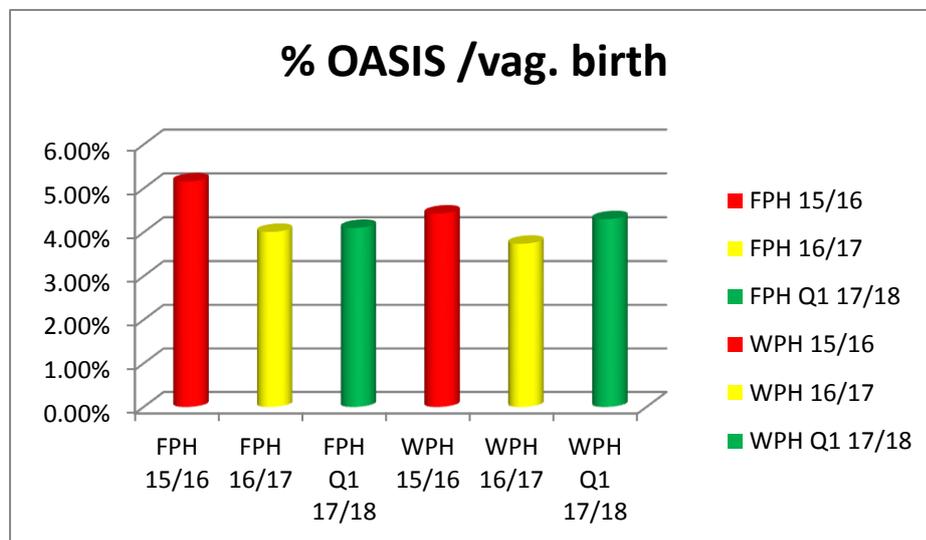
4.0 Management of the perineum during labour

Summary of planned actions

- Complete patient literature in relevant languages for WPH site
- Re-audit FPH site OASIS
- ✓ Continue teaching cross site and all universities who have students within our organisation
- ✓ Continue roll out programme for RCOG/RCM

Update on actions

There is a slight increase on both sites, in the % of 3rd/4th degree tears per vaginal births for Q1, compared to last year's whole year figures. This may reflect a more robust approach to diagnosis particularly on the WPH site.



Work is almost complete on written information for the women who sustain 3rd/4th degree tears for the WPH site, including translations to appropriate languages.

Ensuring that all follow up appointments are offered, remains a work in progress at WPH site, as does the establishment of a dedicated post-natal OASIS clinic.

A re-audit of all 3rd/4th degree tear cases at FPH site has begun (compared to year 1 of project).

Next steps

- Complete patient literature in relevant languages for WPH site
- Re-audit FPH site OASIS

5.0 Consent*Summary of planned actions*

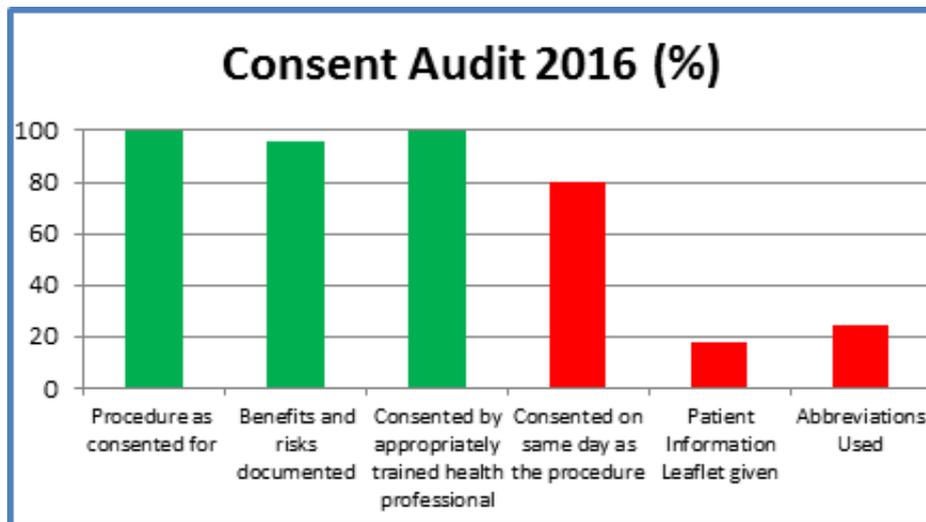
- Consent leads to collate learning from Never Events, claims and serious incidents to be presented at Clinical Governance meetings for high risk areas.
- ✓ Obs & Gynae Procedure specific consent forms to be ratified.
- ✓ Obs & Gynae Patient information leaflets to be ratified.
- ✓ Planning to commence for Phase Two: Orthopaedics.
- ✓ Review claims and serious incidents for orthopaedics.
- Meet with orthopaedic clinicians to identify top five procedures.
- Work to commence with the EDMS team about safe practices for electronic consent documents

Update on actions

- Consent Audit shared with consent committee.

The Trust wide consent audit is a retrospective look back at the consent process for procedures carried out in October & November 2016. 301 case notes, across 14 specialities were reviewed by

Patient safety and quality team nurses and junior doctors with an interest in consent. This is a change from previous years where non-clinical staff in the Audit department had gathered the data. Areas in need of improvement such as Patient Information and the use of abbreviations are being addressed through the work being done on procedure specific consent forms. Consenting on the same day has been picked up by the Consent Committee as a key area for improvement. Communications at a senior level, across all specialities have been sent, to encourage areas to review their own consent practices.



- Phase One, Obs & Gynae

Procedure specific consent forms are with the printers, awaiting quotes for printing costs.

The Gynae team have set up a Patient Information Group and are now tracking all of their leaflets to ensure they are up-to-date, ratified and reviewed. Obstetric Patient information leaflets have also been updated. The success of this phase has been highly influenced by great engagement from the ward leaders including the gynaecology clinical matron and Consultants.

- Phase two, Orthopaedics

This phase has now commenced, with an introductory presentation at the Audit half day which included orthopaedic specific consent audit, the audit themes correlated with the Trust results.

- The existing consent policy is currently under review and formatting to the new Trust standards.

Summary of planned actions

- Agree the 5 Orthopaedic procedures
- Review the orthopaedic Patient Information Leaflets associated with identified procedures
- In light of poor Consent related results of the National In-patient survey, assist the Consent Committee with a re-education/communication programme around the consent process
- Foster links with Wexham Obs & Gynae and Orthopaedics
- Phase three speciality to be confirmed
- Continue to work with the wider patient safety team, consent committee and the EDMS team to identify and facilitate a move towards electronic consent
- Provide ad-hoc support to specialities with consent related queries

6.0 Local Safety Standards for Invasive Procedures (LocSSIPs)

Summary of planned actions

- ✓ Cardiology and Respiratory to have completed/ratified LocSSIPs by March 17
- ✓ Continue to develop the speciality LocSSIPs with the planned roll out with Paediatrics, Emergency Department and Intensive Care ready to present their LocSSIPs at the June meeting
- Implementation of routine pregnancy testing cross site led by the heads of theatres in conjunction with the paediatric and pre-operative matrons, to be in place by the end of May
- ✓ Bring intentionally retained product pathway to the nursing and midwifery board in April.
- ✓ Roll out updated WHO forms by the end of April with a three month review date.

Update on actions

The LocSSIP agenda is progressing well with on-going multidisciplinary engagement in each speciality. Some of the key achievements have been:

- Theatres LocSSIPs have been ratified and the new who forms will be in place the week beginning the 24th July
- Radiology LocSSIPs are coming back for final ratification at the next meeting, their redesigned checklist is already in use
- The design for the resuscitation team LocSSIP flashcard has been sent to medical imaging before being brought to the group and wider resuscitation team
- Regional anaesthesia LocSSIP are under way with a major focus on stop before you block, the national campaign posters have already been put up cross site
- Vascular access LocSSIP have been put out for comment and alterations are being made
- Work is currently in process for ICU, ED, antenatal, regional anaesthesia blocks, spinals/epidurals and blood patches, chronic pain list procedures and paediatrics/neonatal LocSSIPs
- The intentionally retained product pathway was presented to nursing and midwifery board and agreed that it was needed in practice, logistical meetings are in pace to discuss how best to record the pathway in the patient notes.



Next steps

- Work with parent focus groups to ensure that paediatric urine tests for pregnancy is approached in the correct manner
- Support each speciality in completing their LocSSIPs by December 2017
- Ensure there is a sustainable plan for amended, adapting and monitoring LocSSIPs once initial project is completed