

Open and Honest Care in your Local Hospital



The *Open and Honest Care: Driving Improvement* programme aims to support organisations to become more transparent and consistent in publishing safety, experience and improvement data; with the overall aim of improving care, practice and culture.

Report for:

**St Helens & Knowsley
Teaching Hospitals Trust**

May 2014

Open and Honest Care at St Helens & Knowsley Teaching Hospitals NHS Trust : May 2014

This report is based on information from May 2014. The information is presented in three key categories: safety, experience and improvement. This report will also signpost you towards additional information about the Trust's performance.

1. SAFETY

Safety Thermometer

On one day each month we check to see how many of our patients suffered certain types of harm whilst in our care. We call this the safety thermometer. The safety thermometer looks at four harms: pressure ulcers, falls, blood clots and urine infections for those patients who have a urinary catheter in place. This helps us to understand where we need to make improvements. The score below shows the percentage of patients who did not experience any new harms.

98.0% of patients did not experience any of the four harms in this trust.

For more information, including a breakdown by category, please visit:

<http://www.safetythermometer.nhs.uk/>

Health Care Associated Infections (HCAIs)

HCAIs are infections acquired as a result of healthcare interventions. Clostridium difficile (C.difficile) and methicillin-resistant staphylococcus aureus (MRSA) bacteraemia are the most common. C.difficile is a type of bacterial infection that can affect the digestive system, causing diarrhoea, fever and painful abdominal cramps - and sometimes more serious complications. The bacteria does not normally affect healthy people, but because some antibiotics remove the 'good bacteria' in the gut that protect against C.difficile, people on these antibiotics are at greater risk.

The MRSA bacteria is often carried on the skin and inside the nose and throat. It is a particular problem in hospitals because if it gets into a break in the skin it can cause serious infections and blood poisoning. It is also more difficult to treat than other bacterial infections as it is resistant to a number of widely-used antibiotics.

We have a Zero Tolerance Policy to infections and are working towards eradicating them; part of this process is to set improvement targets. If the number of actual cases is greater than the target then we have not improved enough. The table below shows the number of infections we have had this month, plus the improvement target and results for the year to date.

	C.difficile	MRSA
This month	5	0
Actual to date	8	0

For more information please visit:

<http://www.sthk.nhs.uk/pages/Departments.aspx?iPagelId=3508>

Pressure Ulcers

Pressure ulcers are localised injuries to the skin and/or underlying tissue as a result of pressure. They are sometimes known as bedsores. They can be classified into four grades, with one being the least severe and four being the most severe.

This month 1 Grade 2 - Grade 4 pressure ulcers were acquired during hospital stays.

Severity	Number of pressure ulcers
Grade 2	1
Grade 3	0
Grade 4	0

So we can know if we are improving even if the number of patients we are caring for goes up or down, we also calculate an average called 'rate per 1,000 occupied bed days'. This allows us to compare our improvement over time, but cannot be used to compare us with other hospitals, as their staff may report pressure ulcers in different ways, and their patients may be more or less vulnerable to developing pressure ulcers than our patients. For example, other hospitals may have younger or older patient populations, who are more or less mobile, or are undergoing treatment for different illnesses.

Rate per 1000 bed days:	0.05
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Falls

This measure includes all falls in the hospital that resulted in injury, categorised as moderate, severe or death, regardless of cause.

This month we reported 2 fall(s) that caused at least 'moderate' harm.

Severity	Number of falls
Moderate	2
Severe	0
Death	0

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Rate per 1,000 bed days:	0.11
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2. EXPERIENCE

To measure patient and staff experience we use a Net Promoter Score.

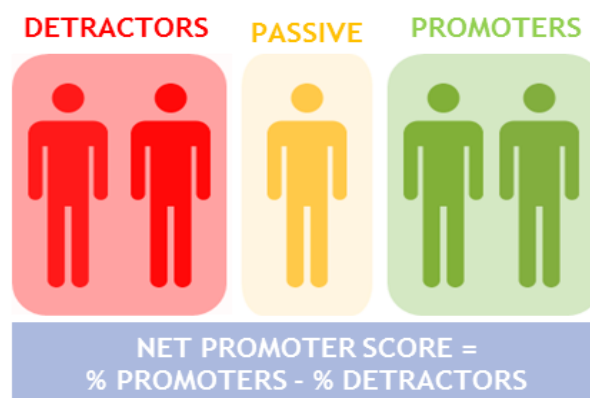
The idea is simple: if you like using a certain product or doing business with a particular company you like to share this experience with others.

From the answers given 3 groups of people can be distinguished:

Detractors - people who would probably not recommend you based on their experience, or couldn't say .

Passive - people who may recommend you but not strongly.

Promoters - people who have had an experience which they would definitely recommend to others.



This gives a score of between -100 and +100, with +100 being the best possible result.

Patient experience

The Friends and Family Test

The Friends and Family Test requires all patients, after discharge, to be asked: *How likely are you to recommend our ward to friends and family if they needed similar care or treatment?*

The hospital had a score of **79** for the Friends and Family test*. This is based on 1174 responses.

*This result may have changed since publication, for the latest score please visit:

<http://www.england.nhs.uk/statistics/statistical-work-areas/friends-and-family-test/friends-and-family-test-data/>

We also asked 230 patients the following questions about their care:

	Net Promoter Score
Were you involved as much as you wanted to be in the decisions about your care and treatment?	40
If you were concerned or anxious about anything while you were in hospital, did you find a member of staff to talk to?	48
Were you given enough privacy when discussing your condition or treatment?	55
During your stay were you treated with compassion by hospital staff?	66
Did you always have access to the call bell when you needed it?	63
Did you get the care you felt you required when you needed it most?	54
How likely are you to recommend our ward/unit to friends and family if they needed similar care or treatment?	62

Can you say why?

I am pleased with the care I received, thank you all. I would like to thank all who work on ward 1A for their care and friendliness which all help to make your stay happier.

I didn't want to come here by myself as I was scared I wouldn't be able to manage but all the staff, nurses, cleaners and doctors have all been very friendly and happy, it has been a breath of fresh air and I would like to thank you all. All staff have been really friendly and helpful. Thank you for helping to put my mind at rest and reassure me. The staff in this hospital are extremely knowledgeable, totally professional and compassionate 10/10

A patient's story

I wanted to drop you an email regarding my treatment I have received so far from St Helens & Knowsley Teaching Hospital NHS Trust.

I would like to express my thanks to the teams that have been involved in my treatment so far, from the lady who has telephoned me from your admissions team, to the pre-op team at St Helens Hospital who were lovely and friendly.

Could you please pass on my thanks to Mr Gudena and the theatre team who made me feel at ease. I am sorry I cannot remember the name of the anaesthetist. Also the recovery team, especially the man who I owe an apology to as when I came round from the anaesthetic I looked at him and told him he wasn't Brad Pitt and I started to get upset.

The team on 3E especially Stacey Mooney, Pam Fildes and Emma (Student Nurse) who were fantastic and a credit to their profession.

Too many people are quick to knock the NHS but I felt very passionate about it and feel it is about time you received recognition for the extremely hard work you do.

Many thanks

Staff experience

We asked 166 staff the following questions:

	Net Promoter Score
I would recommend this ward/unit as a place to work	49
I would recommend the standard of care on this ward/unit to a friend or relative if they needed treatment	57
I am satisfied with the quality of care I give to the patients, carers and their families	58

in order to make it even better I would suggest....

"It would be nice to have more time to talk to the patients but as it is a busy ward it is not always possible"

"Nothing, staff are lovely and work well as a team!"

"As long as the ward is fully staffed at all times I believe we can deliver the care which is needed"

3. IMPROVEMENT

Improvement story: we are listening to our patients and making changes

At our recent Patient Power event on 16th June 2014, the patients and staff present were given a rare look into what happens in the laboratory by one of the senior bio-medical scientists. The lady also brought a microscope and showed everyone who wanted to get involved what is being looked for when examining samples. There was a lot of conversation regarding when patients have a biopsy and why there is a delay waiting for the results. As a patient you are unable to function or think of anything else until you receive some news. As a result of this event a patient information leaflet is being designed, so all patients in the future will have information that explains how long it takes to do numerous tests and obtain results, and who to ring if they need to speak to someone about their concerns. The power of patient feedback is so important to the Trust so that we can listen and act.
