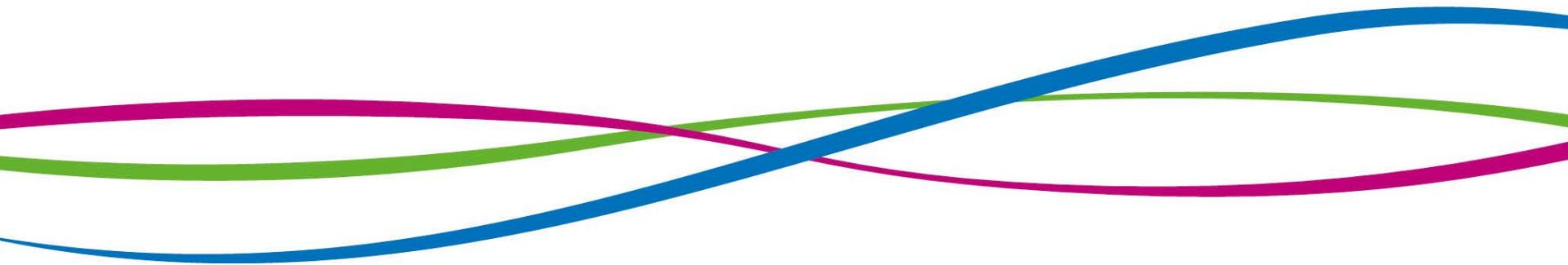


Quality Account 2019-2020

Annual General Meeting

6 October 2020



Priority 1: Workforce

Overarching statement:

We aim to deliver safe patient care and good patient experience. Our wards and departments need to have the right levels of staff and skill mix for the acuity of the patients for which they are caring.

Priority 2: Safe Care

Overarching statement:

We aim to be the safest NHS Trust by “always providing safe & effective care, being kind & caring and exceeding expectation”, by making safe quality care a whole-system approach for every patient that accesses the Trust and its services.

Priority 3: Patient Experience

Overarching statement:

We are committed to providing high quality clinical care and aim to provide an excellent experience for patients, their relatives and carers.



Priority 1: Workforce

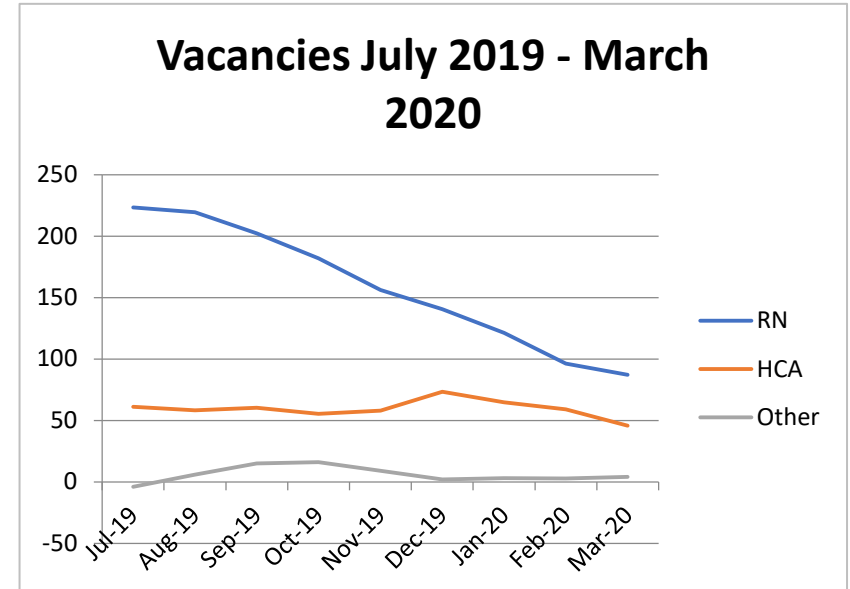


The Royal Wolverhampton
NHS Trust

Key achievements included:

Nursing, midwifery and health visiting

- A significant reduction in the registered nursing, midwifery and health visiting vacancies from 223.34 whole time equivalent (wte) in July 2019 to 87.13 wte at the end of March 2020
- Investment into 6 additional Practice Education Facilitator posts to provide pastoral and educational support to our new recruits and the existing staff
- 60% increase in student placements offered at the Trust to students from the Staffordshire, Wolverhampton and Birmingham universities
- Development of a retention strategy
- The Trust won a national award for the Best Workplace for Learning and Development at the Nursing Times Awards



Medical

Senior (consultant) medical staff

Identification of areas where consultant staffing is nationally challenged and development of links with other organisations/networks (e.g. oncology) and also planned development of fellows through Certificate of Eligibility for Specialist Registration (CESR) to consultant level in these specialties (oncology, radiology, ED)

Robust job planning is being implemented and plan to introduce rostering to maximise efficiency of consultant workforce

Priority 1: Workforce continued

Junior medical staff

Deanery trainees – focus on maintaining high satisfaction levels in Job Evaluation Survey Tool (JEST) surveys, which are recognised as important in attracting trainees to work at the Trust as consultants in the future

Fellowship programme – this award winning programme has increased in size with >140 fellows now employed at the Trust. The Trust has liaised with Health Education England (HEE) and the programme has now been approved as a HEE recognised training programme

Allied Health Professionals

The Standard Operating Procedure (SOP) for Registered Health Care Professionals (non-nursing/medical) – Ensuring Safe Staffing Levels in Departments/Services was developed

NHS Staff Survey

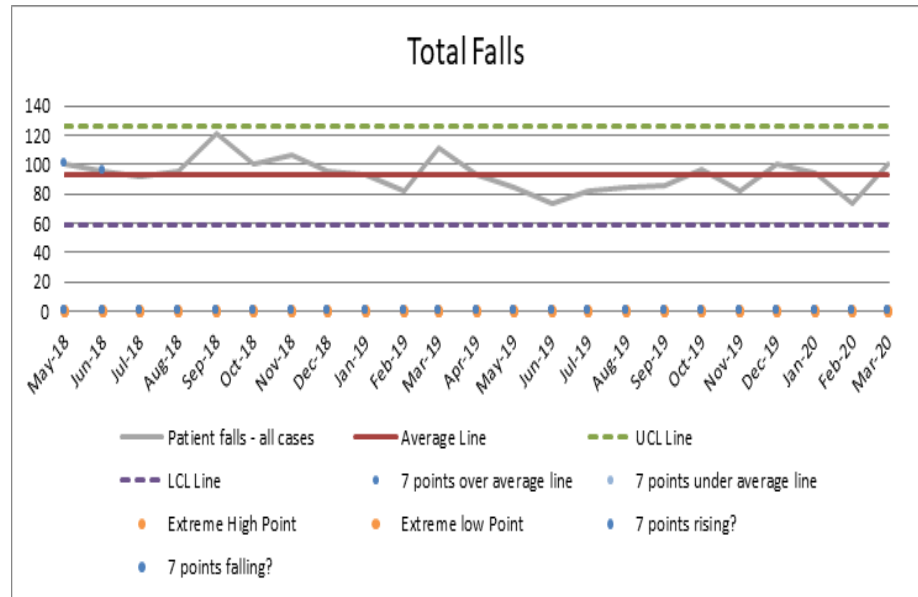
In 2019/20, there had been statistically significant improvements in scores for five of the eleven themes, which include: health & wellbeing, immediate managers, quality of care, safety culture and team working. In relation to the remaining six themes, five have seen an improvement, including: equality, diversity and inclusion, morale, quality of appraisals, safe environment – bullying and harassment, safe environment – violence, albeit not such that it can be regarded as statistically significant



Priority 2: Safe Care

Key achievements included:

- A reduction in the number of reported serious incidents (13 less than the previous year) and never events
- The rate of falls per 1000 occupied bed days remained below 5.6 (green), ranging between 2.19 to 3.84. In addition, there was a 50% reduction in the number of falls resulting in serious harm from 10 reported in 2018/19 to 5 in 2019/20
- Zero MRSA Bacteraemias were attributed to the Trust
- Continued to focus efforts on further strengthening sepsis recognition and management.
- The Trust has seen a reduction of SHMI to within the expected range (1.097 - October 2018 - September 2019 reporting period).
- The Trust has continued to move forward reporting VTE risk assessments completed within 24 hours of admission achieving 95% for 5 months of this year.
- The Trust has participated in 23 Getting it Right First Time (GIRFT) visits to date across all 3 clinical divisions with each visit resulting in a subsequent action plan that is owned and developed with the individual directorates and specialities



Priority 2: Safe Care continued...

Key achievements included:

A variety of projects and actions associated with preventing infection:

- Zero MRSA Bacteraemias were attributed to the Trust
- Influenza preparedness and prevention for patients and staff, achieving 64% uptake of vaccine for frontline staff
- Increased awareness of antimicrobial resistance through delivery of an Antimicrobial Stewardship Programme
- Proactive latent tuberculosis (TB) case find has continued through contact screening and through collaborative working with the City of Wolverhampton Council and the Refugee and Migrant Centre
- Significant planning and efforts made to deal with the challenges of the coronavirus (Covid-19) pandemic

Sepsis recognition and treatment:

- Ongoing provision of a dedicated Sepsis Team to provide organisational steer and oversight of sepsis matters. This team has been further strengthened during 2019/20 by appointing an additional sepsis nurse.
- Increasing sepsis awareness across the Trust by:
 - (a) introduction of sepsis ward rounds by the Sepsis Team
 - (b) strengthening the education and training aspects
 - (c) provision and delivery of specific Continuous Quality Improvement projects to support improvement;
 - (d) introduction of a more comprehensive audit programme and development of a patient information leaflet

Venous thromboembolism (VTE):

- The introduction of the anti-coagulation in-reach service to facilitate safe use of anti-coagulants, support safe discharges, and provide assurance around appropriate follow-up in key areas
- Trust guidance on VTE prevention and management has been updated in line with NICE
- The VTE group has worked to standardise guidance for use of DOACs (directly acting oral anticoagulants) including its use in primary care.
- Increased training to facilitate use of VTE prevention measures and equipment. The VTE group has monitored incidents and themes to ensure learning and provide assurance and support.



Priority 2: Safe Care continued...

Key achievements included:

- **Pressure ulcers update:**
 - Average rate of pressure ulcers per 1000 inpatient bed days increased from 0.56 reported during 2018/19 to 0.76 reported during 2019/20, which represents a 35% increase, but remain lower than 2017/18. This rise occurred during the onset of Covid
 - Average rate of pressure ulcers per 10000 community population increased from 0.46 reported during 2018/19 to 0.68 reported during 2019/20, which represents a 48% increase
- **Medication safety:**
 - The ratification and publication of the Cold Chain Policy - providing comprehensive detail in relation to receipt, storage and temperature monitoring of medicines which require refrigerated storage
 - During worldwide 'Medication Week' in November 2019, the Trust promoted the reporting of side effects of medicines using the MHRA Yellow Card Reporting Scheme



Priority 3: Patient Experience

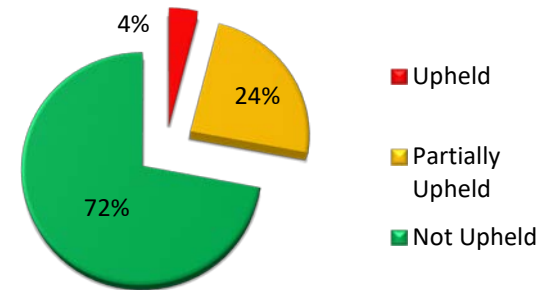


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Key achievements included:

- Implementation of the Patient Experience, Engagement and Public Involvement Strategy with good progress made with regards to the year one milestones.
- PALS concerns reduced from n= 1011 to n=770. This represents a 24% reduction when compared with the previous year.
- 10 cases considered by the Parliamentary Health Service Ombudsman (PHSO) compared to 23 in 2018/19. No complaint cases were fully upheld with a reduction in safeguarding complaints to 51 in 2019/20 from 72 in 2018/19
- Improvements associated with the adult inpatients survey – 10 questions were in top 20% as opposed to 5 in 2018; 48 questions in middle 60% as opposed to 51 in 2018 and 2 questions in bottom 20% as opposed to 4 in 2018
- Recruitment of volunteers and specifically during the Covid-19 period (350 volunteer applications were received)
- Patient Led Assessments of the Care Environment (PLACE) assessment results - all areas, across all sites, scored higher than the national average
- The NHS England Initiative of 'Always Events' was piloted within Paediatrics and key always events designed as part of a co-production approach with patients – Following consultation a new signage system was introduced including footprints on floor to navigate through the ward
- In collaboration with Compton Hospice, the introduction of a bereavement hub on site at New Cross Hospital. This invaluable service is run by volunteers with support from both stakeholders to offer support to those who have lost their loved ones.

Trust Investigated and Closed Formal Complaint Outcomes



Priority 3: Patient Experience continued...



The Royal Wolverhampton
NHS Trust

National Adult Inpatient Survey results (2019 survey published in July 2020):

Group	Count of National Comparison 2018 (60 questions)	Count of National Comparison 2019 (62 questions)
Top 20%	5	10
Middle 60%	51	48
Bottom 20%	4	2
No Comparison	0	2

About our strengths

- Information giving about condition or treatment pre-and post operatively
- The hospital and ward – facilities, including cleanliness
- Confidence – in nurses and decisions made
- Care and Treatment – involvement in decision making, privacy, confidence in decision making, support and information giving

About our weaknesses

- Leaving hospital – discharge information including support and advice, and notice of discharge
- Change of admission date
- The Hospital and the Ward – noise disturbance at night by other patients



Priority 3: Patient Experience – Primary Care

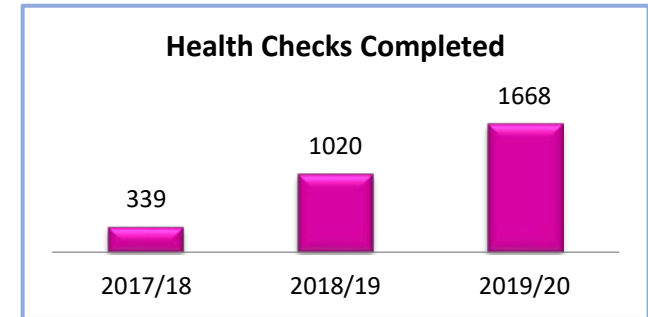


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Key achievements included:

Notable achievements during 2019/20 include:

- An improvement in the national score regarding Health Checks completed
- Governance structures implemented for all practices
- The engagement of the practices with regards to the carers' register
- Positive recognition from the CQC with respect of the:



- (a) scorecard and the information it provides to the practices – indicating performance information relating to each individual practice within the PCN, and an overview of performance for the PCN as a whole
- (b) links between the Trust and practices and the making it better alerts which the practices receive - A lead GP who co-ordinates and reviews the making it better alerts
- (c) safeguarding alert processes - An alert pops-up in the Emis clinical system, which alerts clinicians who may have concerns regarding a child. The alert is call voice of a child, clinicians can click on this alert within the system and there are a series of questions for clinicians to answer regarding the safety of that child. This alert has been rolled out across of the PCN practices, which also standardises coding for safeguarding across all of the practices.
- (d) medicines management and associated Standard Operating Procedures – applicable to all practices for consistency
- (e) International Normalised Ratio (INR) process - all practices now have access to the INR Star software for processing their INR results

Priorities for 2020-2021


Priority 1: Workforce

- Continue to build upon our successful recruitment programme into the nursing, midwifery and health visiting posts, through the Clinical Fellowship Programme and United Kingdom and international recruitment
- Continue to work with universities to offer an increased number of placements
- Further strengthen our focus on retaining our nursing, midwifery and health visiting workforce
- Continue to strengthen our governance arrangements, by further embedding our daily oversight reports via the Safe Care Module and other governance reports
- Expand our apprenticeship offer to the diverse population and continue to work with the Prince's Trust
- Continue to develop internally trained consultant staff from fellowship programme.
- Integrate Aston Medical School students into the Trust and recognise this will be an important future source of junior and senior medical staff

Priority 2: Safer Care

- Falls - Identify further continuous quality improvement projects
- VTE - Work on consistently meeting and exceeding the Key Performance Indicators (KPIs) for VTE assessments.
- Pressure Ulcers - To agree and launch an ambulatory wound services for patients with complex wounds such as leg ulcers and non-healing wounds
- Preventing Infection – Continue to manage the significant challenges and impact of COVID-19 (coronavirus) pandemic
- Strengthening the provision of mental health care for patients attending our Emergency Department and those admitted to inpatient wards
- Driving forward priorities set out in the Trust's Quality and Safety Strategy 2019-2022.

Priority 3: Patient Experience

- Driving forward the Patient Experience, Engagement and Public Involvement Strategy 2019-2022, which includes key milestones and outcome measures.
 - Review themes from Friends and Family Test pertaining to groups with protected characteristics to identify potential improvements
 - Co-Production and collaborative working
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The Royal Wolverhampton
NHS Trust

Thank You

