

# October 2022

# Welcome to the Patient Safety Newsletter...

This month's shout out goes to Alison and Fran (The Dementia Team) and the ICUs for implementing the Reminiscence Interactive Therapeutic Activities RITA systems, which arrived on 08/09/2022! RITA technology aims to support patients living with dementia and acute brain injuries, for example, by providing stimulation through a range of activities which are meaningful for that patient. More information can be found <u>here</u>. There will be onboarding sessions for managers and senior operations team members from RITA manufacturers, My Improvement Network, and one off training sessions for staff, which can be booked via ESR (more information available <u>here</u>).

This is a fantastic addition to our ICUs for patients, so a really big thank-you to all involved!

Best Wishes,

Debbie, Charlotte, Hannah and Mary Jo

### **Pressure ulcers on heels**

Patien

What makes heels vulnerable? Resting blood perfusion levels, calcaneus has small surface with a large weight bearing bony prominence. The result is higher than normal pressures. What to look for when examining the heel? How does the area feel when you palpate it? Is it warm? Is it cold? What colour is the skin? Does the patient report pain? Can you palpate foot pulses? What this means?

Soggy or boggy? Tissue damage is occurring. Hot and red = erythema and early damage. Cold skin = possible ischemic changes. Patients with darker skin may present with blue/purple skin colour. Pain is an early indicator of pressure ulcer development. May need a doppler assessment to check for arterial insufficiency.



How to correctly offload heels with pillows.



Correct use of heelpro boots.

### Patient Safety News Flash!

The Patient Safety Team are launching new investigation training this month, which will aim to support staff with completing both patient safety incident and complaints investigation, and is designed to fit with the aims of the Patient Safety Strategy, Patient Safety Incident Response Standards and NHS Complaints Investigation Standards. This is the first cohort, with future cohorts running twice a year. If you have any questions please contact the Patient Safety Team: sc-tr.patientsafetyteam@nhs.net



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#### **New Post Falls Checklist!**

Patient

Despite our best intentions, patient's may fall while in our presence. It is important that we clearly and accurately document what happened, our assessment of the patient and whether or not we are able to assist them up from the floor using backward chaining and verbal prompts or using equipment such as hoists, mangers or raizers.

To improve documentation we have created a single, standardised Post Falls Checklist Template, which has gone live across all SystmOne units! Please ensure all team members are aware of the new template and its location on the clinical tree. This template should be completed in addition to a DATIX.

#### Importance of carers care plans

A key element of caring for our patients is ensuring that there is a detailed and clear plan in place for those who may also be involved in the patient's care, for example a care agency. It ensures that the patients get the correct care at the right time, when our staff are not present.

Therefore writing carer's care plans is a key element of care when that care is shared, and it needs to be accessible by all those providing the care to the patient.

### Mascot of the month— Nube talks Datix

Hello, my name is Nube, and my human is the Project and Support Senior Advisor in the Quality and Safety Department, and from my understanding it means she has a lot to do with Datix! When I over hear conservations I understand that Datix is the system the trust uses to report incidents and record learning from these. My human, and the other humans she works with, upload all the incidents that have affected patients to the National Learning and Reporting System (NRLS) and all the learning is shared across the country—pretty cool if you ask me!

The other day I heard another acronym, and as I am always a bit curious, my ears pricked up! My hu-

man called it "Learning from patient safety events" or LFPSE. Apparently, this LFPSE will replace the current NRLS with more advanced technology. With LFPSE incidents will be sent in real time from Datix, and it will promote collaboration across the systems by sharing incidents.

This means my human has a lot of work to do alongside the Patient Safety Team to change Datix ready for the transition to LFPSE. There will also be changes for staff using Datix, so my human and the Patient Safety Team will make sure that staff are kept up to date, trained and supported with these changes too!

Exciting! I hope my human isn't too busy to play ball with me!



For further information on all things Patient Safety please visit our team page on <u>The Pulse</u>, or follow us on twitter at @scft\_quality. You can also the contact the team on: sc-tr.patientsafetyteam@nhs.net