

Patient Safety



Sussex Community
NHS Foundation Trust

January 2023

Welcome to the Patient Safety Newsletter...

This month's shout out goes to Kathryn and the staff on Don Baines who really work hard to ensure that the ward is dementia friendly. Alison Keizer (Trust Dementia Lead) has said how dementia friendly Kathryn and her team are. She commented that Kathryn leads from the front providing good person-centred care for her patients. And that she is also keen to engage in dementia training including having dementia champions on the ward and wanted to extend her thank-you for all of this.

Well done to Kathryn and the ward team on Don Baines, it is really lovely to hear about the brilliant work you are doing!

Best Wishes,
Debbie, Charlotte, Hannah and Mary Jo

National Audit for Inpatient Falls (NAIF)

As an organisation we participate in the NAIF. The audit reviews patients that sustain a femoral fracture while in hospital. An annual report is published with the findings to support local quality improvement projects around pre-fall multifactorial falls risk assessment (MFRA) and post falls management.

Key findings/recommendations:

- 80% of hip fractures occur after the first inpatient fall – we get one chance to get it right!
- MFRA and care plan should be in place ASAP and within first 24 hours.
- Walking aids needs to be provided as soon as the patient arrives on the ward. Not after the therapist assessment which may be 3 days later. We should be guided by the therapy assessment in the acute trust.

A high quality MFRA should include lying and standing BP, vision, mobility, delirium, continence, and medication review.

Post falls management – check for injury before moving the patient, FLAT lifting equipment (hoverjack), and a medical assessment within 30 minutes. Analgesia should be given immediately if a femoral fracture is suspected.

Report at a glance – key messages

Femoral fractures sustained in inpatient settings result in poorer patient experience and worse outcomes compared with fractures that occur outside of hospital.

Femoral fractures can occur on any ward – not just on older people's wards. There is only one chance to get things right – most (80%) femoral fractures occur on the first inpatient fall.

The records of inpatients who had a femoral fracture as a result of a fall were audited for the presence of multifactorial falls risk assessment (MFRA) prior to the fracture and post-fall management immediately afterwards.



There have been improvements in the proportion of patients receiving MFRA component assessments, the exception being delirium assessment. However, completion of lying and standing blood pressure assessment remains below 50%. Two-thirds of MFRA included fewer than five of these six component assessments.

Post-fall management KPIs continue to gradually improve, but only one-third of patients with a femoral fracture are moved from the floor using flat lifting equipment. Using flat lifting equipment reduces the risk of pain and distress for patients who have sustained a femoral fracture.

Next steps for trusts/LHBCs:

- review local data on webtool and in the trust report
- identify areas for action in your organisation
- use quality improvement methods to find out why it is a problem, design an improvement intervention to address the problem, measure the impact of the intervention and ensure changes are sustained.

Patient Safety News Flash!

The Patient Safety Team have launched new investigation training which will aim to support staff with completing both patient safety incident and complaints investigations, and is designed to fit with the aims of the Patient Safety Strategy, Patient Safety Incident Response Standards and NHS Complaints Investigation Standards. The next cohort is going to be next month during February so please do sign up! If you have any questions or are interested in the training please contact the Patient Safety Team: sc-tr.patientsafetyteam@nhs.net

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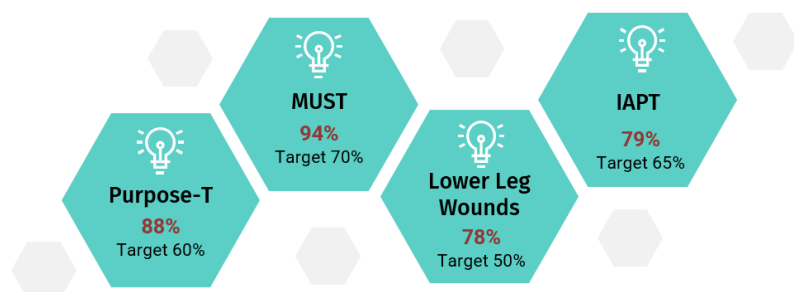


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Commissioning for Quality and Innovation Audits (CQUINs)

Targets were exceeded in all the CQUINs in quarter 2, so well done to all staff across the trust who are involved! All the CQUIN schemes represent the high service standards that SCFT want to achieve and reflect our learning from incidents and complaints locally.



ePMA

Following the successful roll out of ePMA, ward staff reviewed the process and highlighted some practical issues identified by users across the ICUs, which affect patient safety. These include:

- Names are not always added to record when using a TAC.
- Discharge summaries are not always being sent in a timely way with some being missed completely.
- Patients are not always given a wristband, and medication is given based on patients saying their name and DOB.

Please do share this learning with staff using ePMA.

Mascot of the month - Britney's New Additions!

Hello wonderful humans! I had four gorgeous, healthy puppies on 1st December 2022. My human helped me prepare for their arrival and supports me to be the best Mum I can be. She weighs my pups to make sure they are thriving and checks them over. She checks on my health and makes sure I get the nourishment I need to stay healthy and feed my pups. It's so reassuring for me.

I hear that our Health Visitors support human Mum's to ensure that baby humans get the best start in life too! What a wonderful thing to do for new Mums!

Being a new Mum is so tiring, physically and emotionally, my four can be quite a pawful and have me awake half the night, I can tell you! So, compassionate and knowledgeable support is so valuable. That's why I have chosen to shout out to the Health Visitor teams, who do this fantastic job, as we enter 2023!

Wishing you all a Happy New Year! Love Britney



For further information on all things Patient Safety please visit our team page on [The Pulse](#), or follow us on twitter at @scft_quality. You can also the contact the team on: sc-tr.patientsafetyteam@nhs.net