



# Open and Honest Care in your local Trust

Open and Honest Report for

**Black Country Partnership NHS Foundation Trust**

**August 2015**

# OFFICIAL

## NHS England INFORMATION READER BOX

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### Document Status

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## 1 Safety

### 1.1 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 NHS 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 harms.

**98.85%** 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/>

### 1.2 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 nationally monitored as we are trying reduce the incidence of these infections. 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.

Healthcare Acquired Infection	Inpatient Services	Community Services
MRSA Bacteraemia	<b>0</b>	<b>0</b>
C Difficile	<b>0</b>	<b>0</b>

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 MRSA bacteraemia infections and are working towards reducing C Difficile infections; 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.

### 1.3 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 categories, with one being the least severe and four being the most severe. **The pressure ulcers reported include all validated avoidable/unavoidable pressure ulcers that were obtained at any time during a hospital admission that were not present on initial assessment.**

Severity	Inpatient Services	Community Services
Category 2	0	0
Category 3	0	0
Category 4	1	0

The Grade 4 pressure ulcer reported related to a pressure ulcer identified on a patient's finger.

### 1.4 Falls

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

**This includes avoidable and unavoidable falls sustained at any time during the hospital admission.**

Severity	Inpatient Services	Community Services
Moderate	3	0
Severe	0	0
Death	0	0

### 1.5 Safe Staffing

Guidelines recently produced by the National Institute for Health & Care Excellence (NICE) make recommendations that focus on safe nursing for adult wards in acute hospitals and maternity settings. As part of the guidance we are required to publish monthly reports showing the registered nurses/midwives and unregistered nurses we have working in each area. The information included in the report shows the monthly planned staffing hours in comparison with the monthly actual staffing hours worked on each ward and/or the percentage of shifts meeting the safe staffing guidelines.

In order to view our reports please visit: <https://www.england.nhs.uk/ourwork/safe-staffing/>

## 2 Experience

To measure patient and staff experience we ask a number of questions. 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.

The answers given are used to give a score which is the percentage of patients who responded that they would recommend our service to their friends and family.

### 2.1 Patient Experience

#### 2.1.1 The Friends and Family Test

The Friends and Family Test (FFT) requires all patients to be asked, at periodic points or following discharge, ***‘How likely are you to recommend our ward/A&E/service/organisation to friends and family if they needed similar care or treatment?’***

The trust has a score of **91.6%** recommended for the Friends and Family test based on **48** 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/>

#### 2.1.2 A patient's story

My Father was originally sectioned, under Section 2 of the Mental Health Act, very late on Thursday 12th March and admitted to Edward Street Hospital, West Bromwich. He was becoming too aggressive and violent to cope with and action had to be taken. Sadly, things did not go well. Something catastrophic happened on Saturday 14th March, when my Father fell (planked) outside the main office, no fault of the staff, I might add. Frankly he was never the same again, his decline was rapid. Adding to that, travelling to and from Wolverhampton became very difficult, so we pushed for a transfer as soon as possible to Penn Hospital, purely and simply because it was much closer to home. These days, people are quick to complain, (I too, have had cause in the past) so I think it only right to praise, where praise is so obviously due.

#### Experiences

To compare Edward Street and Penn Hospital would be grossly unfair, the Meadow Ward is new and in my opinion is one of the best I have seen around the UK (in my role as a health & social care training provider to the NHS and Residential Care Home Groups alike). The internal environment in Penn is superb, Edward Street was due to be redecorated after my Father left, and has a superior garden for the patients to enjoy. The staff in both hospitals were excellent, their tolerance for behaviours that challenged them as carers was admirable, with verbal abuse (including racism), physical abuse, repetition and “walking with purpose.” I know from personal experience that you need to be a very special type of person to cope in such

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circumstances; you have many such special people amongst your staff in both hospitals.

Specifically with my Father, he seemed to warm to most of the staff, raising a smile for them on many occasions, certainly more smiles than family members received! Even towards the end as it became obvious that he was entering the “End of Life” phase, his care did not falter, even though this is outside the parameters of what the Meadow Ward can offer. When he eventually died on Friday 22nd May, the emotion that the staff displayed when we met with them, showed genuine concern and sadness for his passing. For this, we wholeheartedly thank you all.

We have nothing but praise for you, thank you, and please keep up the fantastic work.

## 2.2 Staff Experience

### 2.2.1 The Friends and Family Test

The Friends and Family Test (FFT) requires staff to be asked, at periodic points: ***‘How likely are you to recommend our organisation to friends and family if they needed care or treatment?’*** and ***‘How likely are you to recommend our organisation to friends and family as a place to work?’***

We had **72** responses from Staff  
**72%** of staff would recommend the Trust to friends and family if they needed treatment  
**48%** of staff would recommend the Trust as a place to work.

\*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/>

## 3 Improvement

### 3.1.1 Improvement Story

#### **Dudley Health Visiting Services – BEST in the West Midlands!**

Joyce Fletcher, Deputy Director of Nursing and Professional Practice writes: As some of you may know the commissioning of health visiting services will be moving from Dudley Clinical Commissioning Group (CCG) to Dudley Metropolitan Borough Council (MBC) from October 2015. As part of this journey we have had regular meetings with Public Health and NHS England at the 0 to 5 Programme Board.

In the last meeting it was fantastic to hear Public Health and NHS England say that our Dudley health visiting services were the No.1 best in the West Midlands. This came after the workforce plan – ‘looking to the future’ and the health visiting KPIs, throughout the region, were presented. Better still It was not only high praise for our exceptional target hitting, but also for our consistent achievements and our dedication and enthusiasm for safeguarding and delivering high quality services to families in Dudley .

I am so proud of our health visiting team, and want to say special thanks and well done to all our health visitors, our FNP team, our team leaders, matron, pathways leads, service manager, senior management team, and our corporate support teams. For me the key message is ‘we all have a part to play’ and it just shows how excellent team working, dedication and passion all pays off.