

## 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:

**Salford Royal NHS Foundation  
Trust**

August 2014

# Open and Honest Care at Salford Royal NHS Foundation Trust : August 2014

This report is based on information from August 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

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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.

**97.3% 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)

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HCAIs are infections acquired as a result of healthcare interventions. Clostridium difficile (C.difficile) and methicillin-resistant staphylococcus aureus (MRSA) bacteremia 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
<b>This month</b>	3	0
<b>Improvement target (year to date)</b>	21	0
<b>Actual to date</b>	8	0

For more information please visit:

<http://www.srft.nhs.uk/for-patients/infection-prevention/>

## Pressure ulcers

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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:0.04
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## Falls

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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 3 fall(s) that caused at least 'moderate' harm.

Severity	Number of falls
Moderate	2
Severe	1
Death	0

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Rate per 1,000 bed days:	0.14
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## 2. EXPERIENCE

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

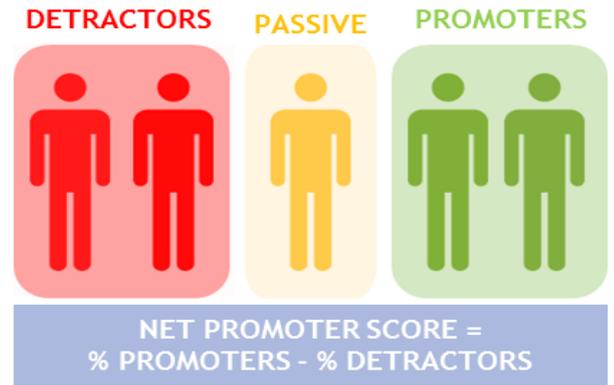
The idea is simple: if you like using a certain product or doing business with a particular company you like to share this experience with others.

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 **75** for the Friends and Family test\*. This is based on 663 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 807 patients the following questions about their care:

	% recommend	
	Yes always	Yes to some extent
When you have important questions to ask a doctor, do you get answers that you understand?	69	27
Do you have confidence and trust in the doctors treating you?	81	17
When you have important questions to ask a nurse, do you get answers that you could understand?	77	21
Do you have confidence and trust in nurses treating you?	84	14
Are you involved as much as you want to be in decisions about your care and treatment?	68	26
Did we deliver what matters most to you during your stay?	78	19
Overall, how would you rate the care received on this ward?	72	19

## A patient's story

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This month's patient story focuses on a patient who fell at home and fractured her neck of femur. The lady was the sole carer for her husband who had developed dementia.

The patient explains "my daughter is a nurse who works at Salford so I contacted her and she took me to A&E. From there I was taken to B4. I had surgery on my fractured neck of femur the day after being admitted. The surgeon was pulling my leg that I was coming in for a matching set as I had fractured my other hip 5 years previous.

I cannot complain about the care I received on either A&E or ward B4. In fact, upon leaving B4, I sent them a note thanking them for what they had done for me, I remember including the line 'not all the angels are in heaven'. From the surgeons to the domestics and the ladies who brought you a cup of tea everyone was so loving and caring.

Whilst on B4, the only issue I had was with the medication I was on. I was being given quite a lot of medication to assist my bowel and I felt this was unnecessary, I had a couple of accidents because of this and it was very distressing for me. In addition, I have suffered from Meniere's disease since the late 1970's and have always had medication for this. It is a condition which affects the middle ear and impacts my balance. Whilst under the care of Salford Royal my medication has been reduced and this meant that when I did get up on my feet my balance felt off and so I couldn't do a lot.

I was transferred to the orthopaedic ward B5 and they were equally caring and considerate. I had the ongoing issue with my medication but this did not stop me realising just what a good job the ward team were doing.

I was transferred to Heartly Green (residential home) on the 30th Sept 2014 and my time here has been absolutely brilliant – from cleaners to physiotherapists to nurses everyone is so caring. The issues with my medication have continued since I came here and this has meant that I haven't been able to challenge going downstairs. However, in the last week, my daughter has spoken with the doctor who had changed my medication and this has been changed.

My husband has been at home during my stay and is being care for by the family who are ensuring he gets his meals and medication. They regularly bring him in to visit me and the first thing he says is 'when are you coming home?'"

## Staff experience

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We asked staff the following questions:

I would recommend this ward/unit as a place to work	96%
I would recommend the standard of care on this ward/unit to a friend or relative if they needed treatment	98%
I am satisfied with the quality of care I give to the patients, carers and their families	94%

# 3. IMPROVEMENT

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

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Salford Royal NHS Foundation is one of 12 organisations who have joined the 'Sign up to Safety' campaign. At the launch of the campaign the Trust will commit to five 'Sign up to Safety' pledges:

The 'Sign up to Safety' campaign is designed to help realise the ambition of making the NHS the safest healthcare system in the world by creating a system devoted to continuous learning and improvement. This ambition is bigger than any individual or organisation and achieving it requires us all to unite behind this common purpose. We need to give patients confidence that we are doing all we can to ensure that the care they receive will be safe and effective at all times. The Trust intends to fully commit to this campaign and play its part in ensuring the ambition is realised.

We will of course continue to update and publish our pledges at the official launch of the campaign.

## Supporting information

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### Pressure ulcers

The pressure ulcer we have reported this month developed under medical equipment being used to support the patient during a stay in the Intensive Care Unit. We are pleased to report that this damage has now completely healed.

### Further information

Board Papers:

<http://www.srft.nhs.uk/about-us/board-meetings/>

Council of Governors' (CoG) Papers:

<http://www.srft.nhs.uk/for-members/council-of-governors/governors-meetings/>

Membership Engagement Events:

<http://www.srft.nhs.uk/for-members/membership-news-events/upcoming->

Our Values:

<http://www.srft.nhs.uk/about-us/values/>

Videos / Films:

<http://www.srft.nhs.uk/media-centre/films/>

Friends and Family Test Overview:

<http://www.srft.nhs.uk/for-patients/fft/>

Friends and Family Test Reporting:

<http://www.srft.nhs.uk/media-centre/publications/fft/>