

Open and Honest Care in your Local Hospital



Report for:

**Blackpool
Teaching Hospitals
NHS Foundation
Trust**

October 2013

Open and honest care at Blackpool Teaching Hospitals NHS Foundation Trust : October 2013

This report is based on information from October 2013. The information is presented in three key categories: safety, experience and improvement. This report will also signpost you towards additional information about Blackpool Teaching Hospitals NHS Foundation Trust's performance.

1. SAFETY

Safety Thermometer

On one day each month we check to see how many of our patients suffered harm whilst in our care. We call this the safety thermometer. The safety thermometer look at four harms in particular: 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.

96% of patients received harm free care in the hospital.

For more information, including a breakdown by category, please visit:

<http://www.safetythermometer.nhs.uk/>

Health care associated infections (HCAs)

HCAs are infections acquired as a result of healthcare interventions. Clostridium difficile (C.difficile) and methicillin-resistant staphylococcus aureus (MRSA) bacteraemia 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
This month	4	0
Improvement target (year to date)	18	0
Actual to date	18	0

For more information please visit: www.bfwh.nhs.uk

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 grades, with one being the least severe and four being the most severe. We also record whether the pressure ulcer developed within 72 hours of being in hospital, or anytime after 72 hours in hospital.

Pressure ulcers that develop within the first 72 hours of being in hospital can be attributed to tissue damage that developed in the previous healthcare or home environment and are therefore not classified as hospital acquired pressure ulcers (as per the Safety Thermometer guidelines).

This month 21 patients admitted to hospital suffered a Grade 2 - Grade 4 pressure ulcer. 6 of these patients suffered a pressure ulcer whilst in hospital. We investigate all reported incidents where a pressure ulcer occurs to learn lessons and improve patient care.

	Pre 72 hours	Post 72 hours	Total
Grade 2	10	5	15
Grade 3	5	1	6
Grade 4	0	0	0

Because larger hospitals are more likely to have higher numbers of harms, we also calculate an average called 'rate per occupied bed day'. This allows us to compare hospitals of different sizes fairly.

Rate per 1000 bed days:	0.9
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Falls

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

This month 1 of our patients suffered a fall resulting in a moderate harm. The patient had been left safely seated and there had been no previous issues of mobility. The patient had his call bell. All safety measures were adhered to and the patient was able to make an informed decision. The fall resulted in the patient suffering a broken nose. There were no other injuries noted on examination.

Severity	Number of falls
Moderate	1
Severe	0
Death	0

Rate per 1,000 bed days:	0.0
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2. EXPERIENCE

To measure patient experience we use a Net Promoter Score.

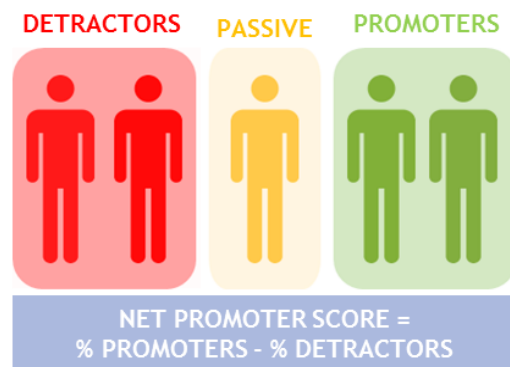
The idea is simple: if you like using a certain product or doing business with a particular company you like to share this experience with others.

From the answers given 3 groups of people can be distinguished:

Detractors - people who would probably not recommend you based on their experience

Passive - people who couldn't really say one way or another

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.

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 **74%** for the Friends and Family test. This is based on 1128 responses

*This result may have changed since publication, for the latest score please visit:

www.bfwh.nhs.uk

Patient and Staff Experience

Patient experience

We asked 52 patients the following questions about their care:

	Score(%)
Were you involved as much as you wanted to be in the decisions about your care and treatment?	87
If you were concerned or anxious about anything while you were in hospital, did you find a member of staff to talk to?	98
Were you given enough privacy when discussing your condition or treatment?	100
During your stay were you treated with compassion by hospital staff?	100
Did you always have access to the call bell when you needed it?	100
Did you get the care you felt you required when you needed it most?	100
How likely are you to recommend our ward/unit to friends and family if they needed similar care or treatment?	96

Staff experience

We asked staff the following questions:

	Score(%)
I would recommend this ward/unit as a place to work	100
I would recommend the standard of care on this ward/unit to a friend or relative if they needed treatment	100
I am satisfied with the quality of care I give to the patients, carers and their families	90

A patient's story

Robert Derbyshire

During a stay in hospital, Robert developed pressure ulcers to the back of his heels. In this video, he explains the treatment and monitoring he received to ensure the ulcers did not deteriorate.

[Click here to watch the video](#)

3. IMPROVEMENT

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

To promote partnership working and patient education with regards pressure ulcer prevention, we have reviewed and printed a pressure ulcer prevention leaflet that incorporates the needs of patients being cared for in either a hospital setting or their own home. The leaflet clearly shows how patients can help themselves to relieve pressure and prevent a harm occurring.