

Whittington Health NHS Trust Quality Account 2019/20: *An Overview*



CEO statement



Welcome to the 2019/20 Quality Account for Whittington Health NHS Trust. All of our priorities are produced in consultation with staff, managers, patients and external stakeholders and I would like to thank them for taking the time to contribute to this process — especially in what has been an unprecedented year.

I am pleased to report that we successfully met 33 out of the 38 priorities we set ourselves for 2019/20. We managed this despite the changes that we were forced to make to our services due to COVID-19.

Other highlights of the year include:

- The 2020 CQC report gave the Trust a rating of 'Good' overall, with our services rated as 'Outstanding' for caring. Our community health services were also rated as 'Outstanding'. This is a tremendous achievement by our staff.
- A significant improvement in the post-operative geriatric care provided to elderly patients undergoing emergency laparotomy rose from 11 patients to 36.
- We are ranked first out of all hospitals in the country for undertaking care processes for patients with type one and type two diabetes.
- We had the third highest uptake of the flu vaccine by our staff across London at 83.4%.
- Being the first Trust in London to sign up to the NHS Workforce Race Equality Standard Cultural Change Programme. Over 75% of staff said they believe the Trust provides equal opportunities for career progression compared to 70.6% in

2018. Similarly in 2019 there has been a positive increase of 7% black, Asian and minority ethnic staff believing there are equal opportunities, moving up to 65.3% from 58.3%.

- Listening to more of our staff than ever before through the NHS Staff Survey. Last year we had a response rate of 56%, which is the highest response the Trust has received to date and an increase of 8% from last year's 48% response rate.

Ensuring Whittington Health is a welcoming place to work continues to be a priority. We now have over 30 Speak Up advocates, who staff can raise concerns to about any matter. From September 2018 to September 2019, 66 concerns had been raised, 30 were anonymous. Since September 2019, the rate of reporting had increased but the number of anonymous complaints had decreased showing that more people feel safe to approach the Guardian to raise their concerns.

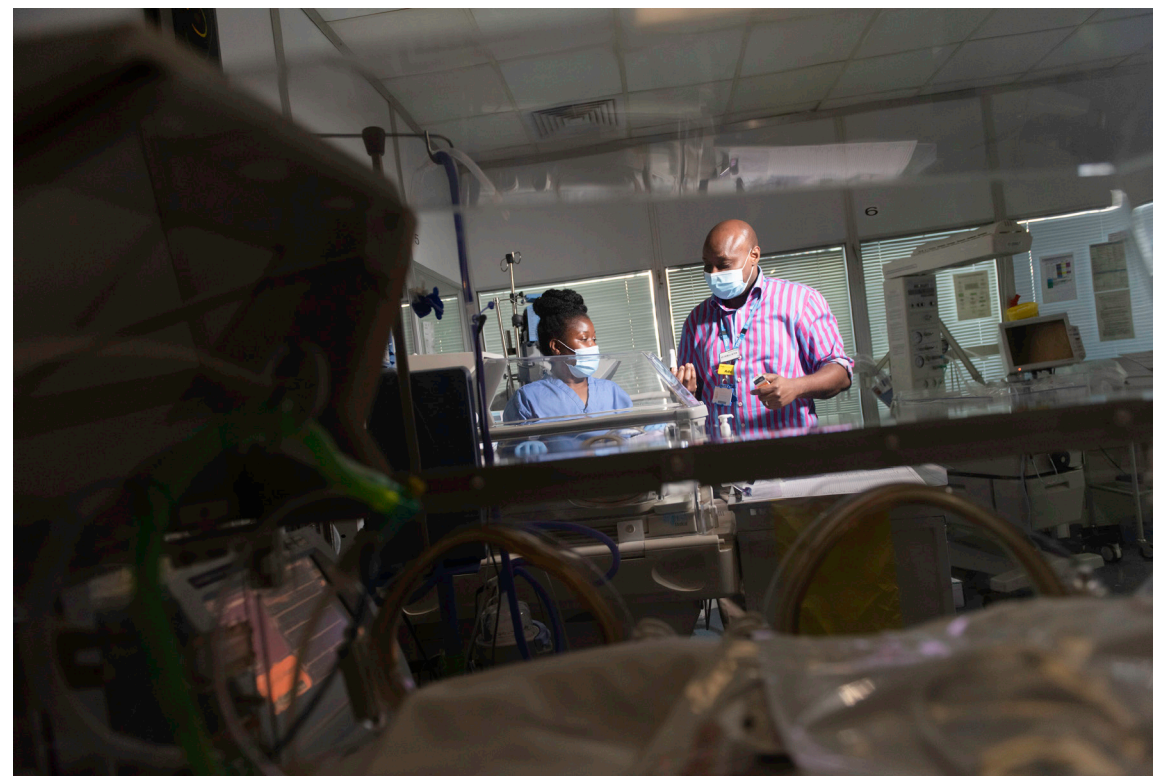
Our priorities for 2020/21 have been chosen after lots of engagement with internal and external stakeholders. They reflect on previous learning and on our ambition to be an outstanding health care Trust, each of the four new priorities align with our vision of Helping People Live Longer Healthier Lives.

A handwritten signature in purple ink that reads "Sarah Tansley".

Progress against our priorities

[Improving the quality of information available to patients](#). An area highlighted to us by local Healthwatch and through learning from complaints and concerns raised through our Patient Advice and Liaison Service (PALS). We launched a new autism friendly map for the hospital site, reviewed 228 leaflets and have started work on reviewing our signage with our Patient Experience team.

[Keeping patient experience at the heart of Trust wide decision making](#). Nine of our Trust Board meetings featured a patient story. This varied between in-person and by video – the use of video allowed the story to be shared wider and their impact persists beyond the actual presentation. We hope to use these stories at further sub board committees and Integrated Clinical Service Unit (ICSU) Boards too.



[Volunteer support at community site and in patient homes](#). Our new Volunteer Strategy was launched in December 2019 and a year one implementation plan started in January. During the initial stages of the COVID-19 pandemic the service has co-ordinated the support of 10 volunteers involved in the distribution of personal protective equipment (PPE). These volunteers have outlined processes that include risk assessing the roles they support with, and having key contact links within the services they support.

[Reducing falls resulting in severe harm or death](#) has been a continuous goal for the Trust since 2014/15. The trend in the number of avoidable falls resulting in serious harm has shown sustained improvement from 11 incidents in 2014/15 to six in both 2015/16 and 2016/17, and four in 2017/18. There were no serious harm falls in 2018/19 and one declared in 2019/20.

[Reducing falls per 1000 bed days](#). We started the year with 3.5 falls per 1000 bed days, but saw a fairly gradual decline in our figures until October (where we reached 1.8); in the remaining months the figures remained close to the average line, fluctuating between 2.1 and 2.6.

The quality and quantity of [patient safety incidents](#) reported has improved. There was an increase of 10%, from 2018/19, in the reporting of Near Misses (Good Catches) and an increase of 18.5% in the overall number of incidents being reported.

[Medical safety reviews for grade 3 acute kidney injuries](#) (AKI) within 24 hours. This has reached a monthly average of 95% and has been audited monthly by the Pharmacy team.

Reducing avoidable grade 3 and grade 4 [pressure ulcers](#) and ensuring appropriate investigations take place into any pressure ulcers. Grade 3 pressure ulcers have reduced from 130 in the previous year to 24. Grade 4 pressure ulcers have also reduced, but changes to the reporting criteria have required retraining to ensure the data is captured accurately.

[Care of older people](#) was highlighted as an area for focus by local Healthwatch, national audit data, a national campaign and learning from incidents. The Trust has appointed a dementia specialist practitioner and all new staff receive training in dementia awareness – featuring John's campaign. In October 2019 a frailty consultant has been in post – introducing multifactorial interventions that resulted in a significant increase in the number of Comprehensive Geriatric Assessments being completed on admission.

The Trust is committed to improving the experiences of [autistic people and people with learning disabilities](#) and increasing staff awareness. We met our target of seeing at least 75% of autistic patients or patients with a learning disability in under two hours in the Emergency Department.

During 2019/20 Camden and Islington NHS Foundation Trust



introduced a place of safety in their Highgate Wing, which has reduced the number of [mental health](#) patients in our Emergency Department. Adults who are experiencing a crisis are now streamlined to the dedicated mental health service at St Pancras Hospital, which is improving patient experience.

A [nursing associate](#) is a new support role that delivers hands on care for patients. We have continued to provide an adequate number of positions for nursing associate graduates to apply for. This has been enhanced by the appointment of a practice development nurse who supports this role.

Strengthening our [leadership](#) and focussing on the development of staff from a black, Asian and minority ethnic background has been prioritised. This has included taking in a second cohort of our reverse mentoring programme and participation in an 18 month initiative that aims to embed a culture of compassionate and inclusive leadership.



Research participation dropped slightly to 810 participants due to a different study mix but this number is still well in excess of the Clinical Research Network target of 618. There has been a focus on developing a greater paediatric research portfolio with initial progress made in two epilepsy studies.

Raising the profile of research so that it can become embedded in patient care has been achieved through participation in studies that require multi-disciplinary clinical teams – helping to develop new treatments and knowledge for better health and care.

Reducing 28-day readmissions means that patients are treated appropriately prior to discharge and requires safety net procedures to be in place. Through the increased use of our Hospital At Home service and Virtual Ward we have been able to remain in the top three Trusts in London for managing length of stay over 21 days.

Discharge summaries have been improved through a QI project

that involved several stakeholders working together to design a new template. The new discharge summaries are clear to patients, GPs and do not contain unnecessary information.

Staff experience at work and **staff wellbeing** is being supported and improved through staff networks and social engagements. The reinvigoration of our staff networks has helped to engage staff, these include: the Black, Asian and Minority Ethnic network, the LGBTQ+ network and Whitability (disability focused).

Ensuring our **Caring For Those Who Care** programme aims to bring all work related to staff experience together, ultimately improving the **culture** at work. This has included regular social events organised by Trust departments and staff networks and more participation in the NHS Improvement Culture and Leadership Collaborative, which aims to ensure leaders and senior managers adopt a more robust and purposeful leadership style to support colleagues and tackle issues in timely and well-ordered fashion.

Increasing medical, allied health professional, nursing and midwifery **student placements** and focusing on the quality of the experience for both the students and the practice area. We have worked with Health Education England on a pilot project to increase pre-registration student nurse placement numbers. Feedback from students remains excellent, with many moving onto full-time employment with the Trust. The student survey feedback was predominantly positive and we continue to develop individualised learning experiences for our undergraduate workforce.

Preceptorship programme is being rebranded as the 'Early year's career development' and this has been designed to **support newly**

[qualified nurses](#) and nursing associates in the first two years since qualifying. 68% of attendees completed the three study day programme.

The roll out of the [Learning from Excellence](#) project across the Trust has seen 140 people being nominated for a STAR Award, allowing staff to receive positive feedback in relation to excellence in work.

In order to improve learning from [national audits and compliance with NICE guidelines](#) the Trust's Management Group agreed a new executive governance committee structure which came into effect from 1 April 2020. This includes a new Clinical Effectiveness Group with responsibility for national audits, NICE guidance, and national benchmarking data and the new Quality Governance Committee, a sub-group of the Quality Assurance Committee.

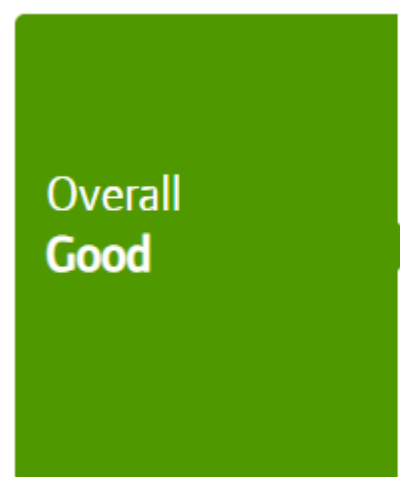


Care Quality Commission Report

The Care Quality Commission (CQC) published their full inspection report in March 2020 following our full inspection across the Trust in December 2019 (Urgent and Emergency Care, Surgery, Critical Care, Community Children's Health Services and Community Child and Adolescent Mental Health Services). Overall we have been once again rated as Good and as Outstanding for caring.

Since our last CQC inspection in 2017 we have dealt with increasing challenges and demands for all of our services, it is a testament to all of the hard work and dedication that despite this, overall, all of our services maintained or improved their rating.

We are especially pleased that our community health services are now rated as Outstanding. Across all domains of care, the CQC found our community health services to be Good or Outstanding. This is thanks to a huge amount of patient focussed hard work from a number of colleagues, well done to them.



Safe	Requires improvement ●
Effective	Good ●
Caring	Outstanding ☆
Responsive	Good ●
Well-led	Good ●

	Are Services Safe?	Are Services Effective?	Are Services Caring?	Are Services Responsive?	Are Services Well-led?	Overall
Acute Services	●	●	●	●	●	●
Community Health Services	●	●	☆	●	☆	☆
Mental Health Services	●	●	☆	●	●	●

Clinical research



Our research and development department continues to adapt and develop to provide highly-skilled and dedicated staffing to support the major areas of clinical research which include:

- Anaesthetics
- Bariatrics
- CAMHS
- Community services
- Dermatology
- Emergency medicine
- Gastroenterology
- Haematology
- Infectious diseases
- Intensive care
- Obstetrics and gynaecology
- Oncology
- Orthopaedics
- Paediatrics
- Surgery



In 2019/20 803 of our patients participated in 29 research studies adopted to the NIHR portfolio.



There were 49 National Institute for Health Research portfolio studies recruiting and in follow-up at Whittington Health.

Portfolio adopted studies are mainly, but not solely, consultant led and are supported by the Trust's growing Research Delivery team to facilitate patient recruitment.

We are currently rated as good by the CQC and health research plays a part in the day-to-day activity across many of our clinical and speciality areas. A refreshed research strategy has been delayed by covid but looking ahead, we aim to become a national leader in integrated care, covering all facets of district general hospital and community health research, and how they relate.

Key aims are:

- We will encourage all grades and disciplines of staff to engage in the Trust's Research and Innovation agenda.
- We will work with expert clinical groups and voluntary sector partners to increase public and patient involvement in our research.
- We will develop and expand research relationships with academia
- We shall increase engagement with industry
- We will focus on our areas of unique strength

Quality Improvement

Over the last year over 120 Quality Improvement (QI) projects have been taking place across the Trust by staff in a range of roles.

In the 2019/20 we ran a large scale QI project to improve inpatient discharges. This included changing the focus of the documents to be useful information for the patient, and to provide a safe and concise handover of care.

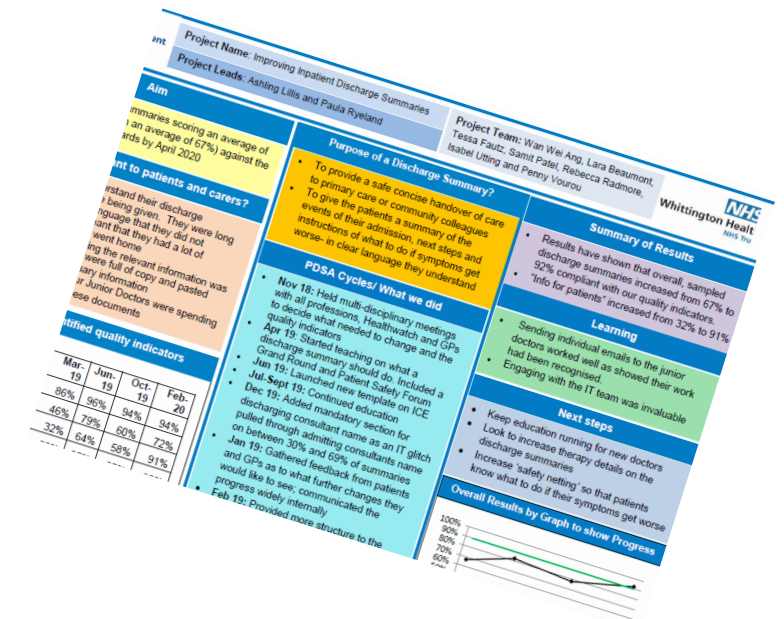
We decided to work on these because patients did not understand the discharge summaries they were being given. They were long and full of medical language that many patients found difficult to understand. This meant that they had a lot of questions when they went home. GPs also told us that finding the relevant information was difficult. Summaries were full of copy and pasted results and unnecessary information and we also knew that our junior doctors were spending too long writing these documents.

Our aim was to see discharge summaries scoring an average of 90% (increasing from an average of 67%) against the agreed quality standards by April 2020.

As well as new templates and education, we devised six things that we were looking for these documents to do and we went through and measured different summaries from each specialty on these each quarter:

- **Including co-morbidities** (which helped with coding and therefore income).
- **Investigations** — whether they only included the significant ones and results were summarised and not copy and pasted.
- **Information for patients** — information for the patient that was to be written in simple jargon-free language.
- **GP actions** — to be clear what the GP needed to do. The actions had to be relevant and appropriate; and not ask GPs to ‘chase’ anything. We also said anything needed within 10 days had to be arranged before the patient was discharged (to help with this, we got GP surgery bypass numbers to enable our staff to contact surgeries easily).
- **Medications** — highlighting medication changes or additions, indications, durations and/or review dates.
- **Named consultant** — this was important so that the GP/ patient knew who had looked after them.

The results were fantastic — by Feb 2020 sampled discharge summaries increased from 67% to 92% compliance with our quality indicators. “Info for patients” increased from 32% to 91%.



Listening to Patients and Staff

The Trust is committed to using patient and staff feedback as part of its Better Never Stops work. Each year staff are invited to feedback anonymously through the NHS Staff Survey and patients are given the opportunity to share their experiences through the National Cancer Patient Experience Survey, the National Inpatient Experience Survey and Friends and Family Tests.

81% of staff
felt that care
of patients
is the Trust's
top priority

(2019 NHS Staff Survey)

56% of staff
responded
to the
NHS Staff
Survey, our
highest ever
response.

Patients who
received
treatment for
cancer rated
us 9 out of 10
for our care (2019

National Cancer Patient
Experience Survey)

100% of patients
had all the
information
needed about their
operation before it
happened (2019 National

Cancer Patient Experience
Survey).

Looking forward

Our quality priorities have been developed following consultation with staff, people who use our services and stakeholders and are based on both national and local priority areas. We have also considered the impact of the COVID-19 pandemic at a Trust level as well as the global changes to healthcare.

Our priorities for 2020/21

Reducing harm from hospital acquired de-conditioning

Improving communication between clinicians and patients

Improving patient safety education in relation to human factors

Improving blood transfusion care and treatment

As part of our consultation process, external stakeholders, patients, and staff have been invited to share their views on our proposed quality priorities. We held a stall in the hospital Atrium in January 2020 to gather opinions of patients and staff about improvements they would like to see in the coming year. A meeting was held with Healthwatch Islington and Haringey, and representation from Islington Clinical Commissioning Group (CCG) in February 2020 to review and hear feedback of our services and quality areas for development.

Further to this, each priority has been refined and agreed by clinicians and managers who will have direct ownership and approved at the relevant Trust committees. The quality account, including the 2020/21 priorities, have been shared with our commissioners and external auditors. Whittington Health recognises that to achieve sustainable improvement, projects need to be long-term, monitoring progress over a three year period.



If you would like to comment on our Quality Account or have suggestions for future content, please contact us either:

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