

Whittington Health NHS Trust Quality Account 2020/21: *An Overview*



CEO statement



Welcome to the 2020/21 Quality Account for Whittington Health NHS Trust. The quality of our services is measured by looking at patient safety, the effectiveness of treatments patients receive and patient feedback about the care provided — while the challenges of the pandemic have been our major focus over the last year, I am pleased to report that we made good progress against the priorities we set. This is thanks to enormous and tireless effort from every one of my staff who have worked unimaginably hard over the past year to continue to provide high quality, effective and compassionate care to our patients despite very difficult circumstances, so I want to thank them for their incredible work and achievements.

Some highlights of the year include:

- The introduction of an in-situ simulation programme, with observation from airline pilots for human factors expertise. This programme has been shortlisted for a Health Service Journal award.
- An outpatients' letter Quality Improvement project commenced to improve the accessibility of clinic letters for patients. There have been successful outcomes against the quality criteria, and the project is now being rolled out more widely across the Trust.
- A blood transfusion awareness campaign was launched in October 2020 and the emergency and integrated medicine ICSU trained 100% of nursing staff on our care of older people wards for blood transfusion.
- A baseline exercise around mobility was completed as part of the hospital deconditioning project, to identify areas for targeted improvement in 2021/22.

Throughout the pandemic we have continued to participate in several clinical studies, including recruiting 13% of participants into the national RECOVERY trial looking at potential treatments for people hospitalised with COVID-19.

Our community work has gone from strength to strength. In March 2020, we were the first trust in North Central London to establish and run Covid-19 monitoring via our virtual ward to keep patients safe at home. We successfully and rapidly implemented virtual appointments across all adult community services since the first Covid-19 surge and we ran very successful virtual groups for areas such as weight management and the expert patient programme. In September 2020 Simmons House Adolescent Unit was fully accredited by the Royal College of Psychiatrists' Quality Network of Inpatient Children and Adolescent Mental Health Service units.

In the National Cancer Patient Experience Survey, patients rated their care as a nine out of ten. This excellent outcome is above the national average and ranks us second in London for our cancer services.

Despite the additional pressure and changes that we were forced to make to our services due to COVID-19, we have made good progress against our Quality priorities and we will continue to work on these areas in 2021/22.

I confirm that this Quality Account will be discussed at the Trust Board, and I declare that to the best of my knowledge the information contained in this Quality Account is accurate.

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

Progress against our priorities

Priority 1: Improving communication between clinicians, patients and carers

Building on the 'Hello My Name Is' badge campaign, introduced in 2019, and the learning from the first wave of the pandemic about communication difficulties in full personal protective equipment (PPE), the Trust launched an initiative to make the 'face behind the mask' visible to patients using photo stickers. The aim was to improve both patient experience and patient safety, through better communication and increased visibility of staff roles. Over 100 staff – from consultants, to dental nurses to housekeeping staff – requested and received sticker packs. The project was shared in the Islington Tribune and the Royal College of Nursing's Nursing Standard.

The Trust has also worked with Project Wingmen colleagues to develop patient-focused communication workshops, building on aviation customer service training to support our staff to better communicate with patients and carers, including developing de-escalation skills.



At the start of the first wave, the Trust recognised the significant impact inpatient visitor restrictions would have not only on patient experience, but on communication channels for friends and family. The Trust provided additional ward clerk support through redeployed staff and volunteers, as well as keeping the Patient Advice and Liaison Service (PALS) phonenumber open, in recognition of the increased volume of calls and the pressure on clinical staff.

While this was somewhat effective, the learning from the first wave was that we needed to do more to keep open the lines of communication, and before the second wave a Family Liaison role was created as part of the 'Stay Connected' initiative to keep families and loved ones in touch with inpatients throughout the visitor restrictions.



The 'Stay Connected' project involved: Thinking of You postcards, virtual visiting, WithYou audio messaging and a patient property delivery and finding service. We have now delivered over 650 postcards to patients who were staying in hospital.

In addition to COVID-19 measures we continued our work against priority one with a 'Dear patient' letter pilot. This project started with clinicians in the Haematology and Respiratory Departments writing directly to patients. Regular audits monitored progress and show regular improvements against the quality targets set. In addition to writing to patients, the aim is to use clear language, identify the next steps, be clear on follow up arrangements and provide safety netting information. Positive feedback has been received from a local GP and another hospital.

The project has been progressing throughout the pandemic and has expanded to letters being written directly to the patient in 13 different specialties. As well as encourage more clinicians and specialties to write in this way, the plan is to roll out to registrar grade level doctors and to the community specialties in 2021/22. The project was accepted for the European forum on Quality and Safety in Healthcare, led by the BMJ (British Medical Journal) and Institute for Healthcare Improvement.

Priority 2: Improving safety education in relation to human factors

The pilot sim project at Whittington Health is a novel approach to human factors education: a multi-disciplinary model that brings practical aviation human factors training directly into clinical practice through airline pilot observation of in-situ simulations.

Multi-disciplinary in-situ simulations take place twice weekly as part of the Wingfactors pilot sim project, rotating between departments including emergency medicine, acute medicine, anaesthetics, intensive care, surgery, and paediatrics.

Simulation scenarios are developed by the study champions with pre-specified objectives and key technical learning points, often incorporating



patient safety learning from serious incidents.

Feedback after each simulation is split into technical and human factor components, with a short verbal de-brief followed by a detailed write-up which is shared across the Department to spread the learning more widely.

Feedback from staff involved has been overwhelmingly positive and has re-invigorated simulation as a teaching mechanism across the Trust.

In addition, the in-situ simulation programme has helped to identify latent safety threats (LSTs: hazards or conditions that risk patient safety but are not readily apparent without system stress) providing an opportunity to proactively mitigate these threats and improve patient safety.

The project won highly commended in the Health Service Journal (HSJ) Partnership awards, and has been accepted to the NHS Providers showcase for Quality and Safety, and poster presentations accepted at several clinical conferences.



Priority 3: Reducing harm from hospital acquired de-conditioning

The Trust aimed to complete a baseline assessment and develop a process for monitoring mobility and physical activity on the wards. An initial baseline exercise review 19 patient records from Cavell older people's ward. Results were surprising, showing patients are being admitted further off their mobility baseline than previously thought. A marked improvement in mobility was noticed once patient admitted to a ward, and by discharge. Mobility is not being consistently recorded in patient records using the Rockwood clinical frailty score.

Due to the COVID-19 pandemic and restrictions during the second wave, further base line exercises were unable to be conducted and much of the planned work to improve staff understanding and use of frailty scores was paused. However, routine mobilisation continued during the pandemic for all ward patients. Year two priorities will have a renewed focus on the above,

as well as improving compliance with manual handling training, and falls training for ward staff.

Priority 4: Improving blood transfusion care and treatment

The blood transfusion e-learning module was reviewed and added to the Trust mandatory training matrix.

Previously there was an e-learning package, but this was not a mandatory training requirement for staff. It is now part of the mandatory e-learning matrix, which will make compliance monitoring easier. All mandatory training is monitored monthly via reports from the Learning and Development Team, and compliance rates are included as part of quarterly performance reviews.

An extensive communication campaign has been run throughout 2020/21 including a Grand Round on Blood transfusion safety, library drop-in sessions for face to face assistance while staff complete the e-learning; screen savers, posters, and regular discussions with matrons, managers promoting blood transfusion safety and its importance for patient safety. This has really helped to drive the improvements in compliance with the e-learning training for the year and will be continued and expanded going forward.

Clinical research

Research at Whittington Health had an unparalleled year in 2020/21. The Director of Research and Innovation along with the Research Portfolio Manager led the Trust's COVID-19 research activities in response to the pandemic.

The top three recruiting COVID-19 studies were:

- ISARIC CCP UK: Clinical Characterisation Protocol for Severe Emerging Infection: 489. This was an observational study collecting clinical data for inpatients including disease severity, treatment and outcomes
- SARS-COV2 immunity and reinfection evaluation (SIREN) 257 - an observational study looking at the incidence of COVID-19 infections among healthcare staff
- Randomised Evaluation of COVID-19 Therapy (RECOVERY) 184 - an interventional study offering treatments to inpatients.

The top three recruiting non-COVID-19 studies were:

- Understanding the Attitudes and Opinions of Staff Working Across NHS Sites in England to the Change in Law Regarding Organ Donation (#OPTIONS) 56
- Turning the immune response in TB (HIRV-TB): 25



In 2020/21 1079 of our patients participated in research studies adopted to the NIHR portfolio.



- National Evaluation of the Integrated Care and Support Pioneers Program: 15

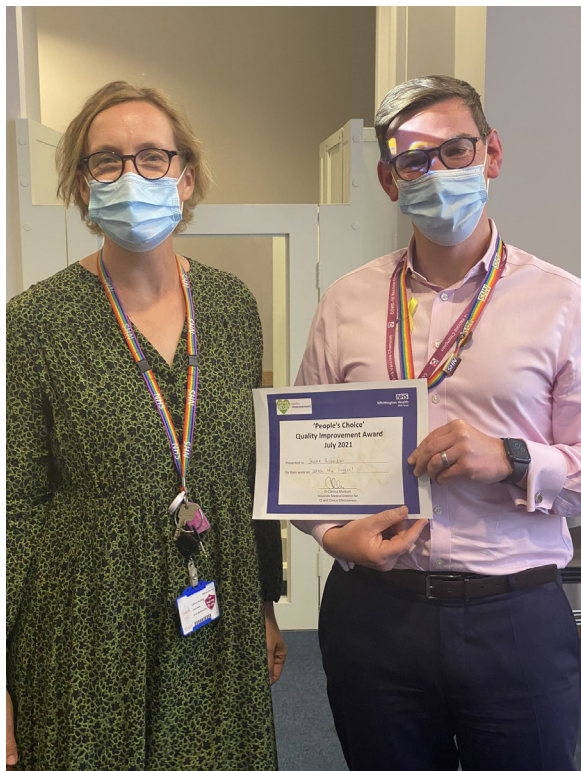
The change of study profile in response to the pandemic has meant comparison of the growth of research across Trust would be inequitable, but it is reasonable to assert that Emergency and Integrated Medicine has seen the bulk of research activity.

This year has raised the profile of research not only within the Trust but nationwide and there has been progress in research being part of patient pathways locally. There is an appetite to continue this beyond COVID-19 and the Research Oversight Group had its inaugural meeting in February 2021. The Group is identifying opportunities to broaden the reach, capacity and capability for research and deliver on our commitment to offer patients the opportunity to participate in research and for the Trust to contribute to meaningful studies that benefit local people as well as the broader population.

Quality Improvement Celebration

Driven by its vision of 'Helping local people live longer, healthier lives', Whittington Health, is committed to continually improve the care it provides to its patients. Whittington Health believes that 'Better Never Stops' and this attitude is embedded within the Trust's two-way approach to Quality Improvement. A bottom-up approach encourages grass roots development and top-down actions use performance and outcome data to drive improvement.

In July 2021 we celebrated QI projects from the last year. The Colorectal Team won best overall project for their 5-year cancer follow-up remote surveillance programme. This project introduced a successful pathway that enabled patients with colorectal cancer to be monitored remotely. Patients have investigations at set times in the five years after their initial surgery; but they are not required to return to the colorectal outpatient clinic. The patient experience feedback was excellent; showing that this remote surveillance suits our patients. Additionally, the success of this project has meant that more colorectal clinic capacity has been freed up for those patients who need to be reviewed in person.



The colleagues' choice award went to the Watch the Oxygen! project, led by Pharmacy but with many other teams involved. The aim was to determine and maximise our oxygen flow capacity across the organisation during the COVID-19 pandemic and to develop as close to real-time monitoring. Oxygen delivered at high flows through various devices is the main therapy for patients admitted with COVID-19. The level of oxygen flow required during the pandemic has been far greater than ever experienced and over and above the expectations of most organisations existing infrastructures. It became crucial to be able to accurately determine our capacity at any time for oxygen use and to use this to guide admission capacity, bed configuration and escalation and de-escalation of patients. We now have good visibility over oxygen usage and recognise that we were very close to our limits. Works have now begun to increase diameter of gas pipelines to increase flow capacity and to implement a more accurate assessment of position. We now have good visibility over oxygen usage.

The other projects that were presented were varied, with examples including improving medical education; administrative staff running test video appointments for patients in Physiotherapy; increasing knowledge of domestic violence in the Emergency Department by asking 'do you feel safe at home?', and the design of a pathway to treat achilles tendon ruptures.

Care Quality Commission Report

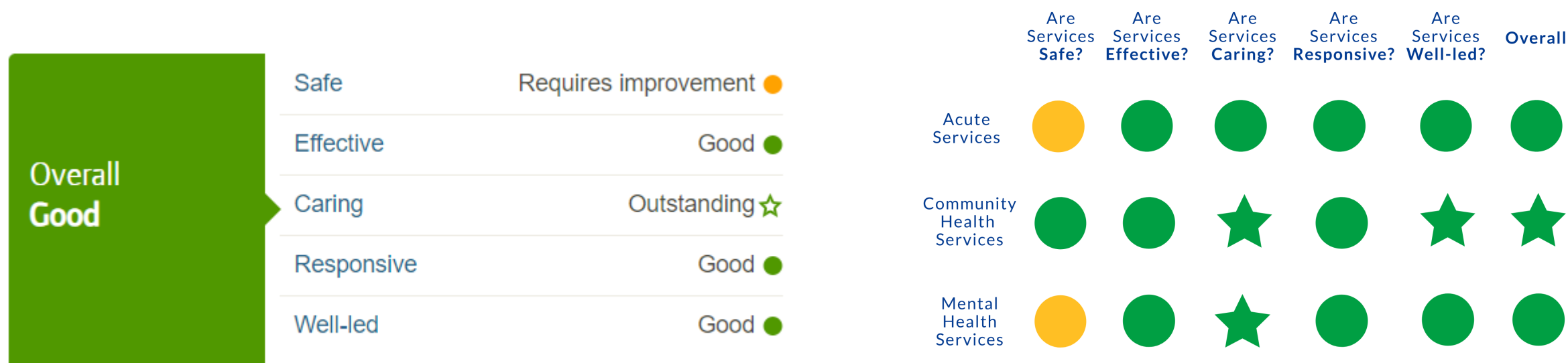
The Care Quality Commission (CQC) published their full inspection report in March 2020 following our full inspection across the Trust in December 2019 (Urgent and Emergency Care, Surgery, Critical Care, Community Children's Health Services and Community Child and Adolescent Mental Health Services). Overall 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.

During 2020/21, the CQC approach to inspection and monitoring has adapted to meet the challenges of the pandemic, and support Trusts. Regular meetings have been held with our CQC Relationship manager during 2020/2021 addressing staff wellbeing and support, restarting elective services, serious incident investigations and CQC enquiries, and infection prevention control and personal protective equipment.

A COVID-19 vaccination monitoring assessment call took place on 5 March 2021 in relation to the vaccination hub, where Whittington Health NHS Trust is the provider. This went very well and significant assurance was given by the CQC in relation to this.



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.

Staff reported improvements in bullying and harassment and health and wellbeing (2020 NHS Staff Survey)

51% of staff responded to the NHS Staff Survey. (This is higher than the national average of 45% for similar Trusts.)

Patients who received treatment for cancer rated us 9 out of 10 for our care (2019 National Cancer Patient Experience Survey)

98% of inpatients felt that they were treated with dignity and respect (2019 Inpatient 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

1. To trial a new enhanced Health Care Support Workers (HCSW) model which will include a training programme for mobilising patients.
2. To recruit five enhanced HCSWs for the hospital wards during 2021/22.

Improving communication between clinicians and patients

Project 1:

1. To improve the number of consultant-written sampled letters addressed to patients by a further 10% on 2020 baseline
2. To increase the number of letters that use clear language by a further 10% on the 2020 baseline
3. Expand the project to non-consultants and HCPs who write letters to patients.

Project 2:

By the end of 2021/22, we will have introduced Zesty in all outpatient clinics. Success of the programme in improving communication with patients will be measured by patient feedback, patient usage of the Zesty portal and improved timeliness of patient appointment correspondence, which in turn may reduce the DNA rate.

Improving patient safety education in relation to human factors

Following the success of the 'pilot sim programme' in 2020/21, in year 2, the focus will be on sustainability and expansion.

1. To continue delivering the pilot sim programme across the hospital, using HF champions (as the pilots return to flying). Success of the programme will be measured through staff feedback and identification and action of LSTs.
2. To expand human factors education into community settings.

Improving blood transfusion care and treatment

1. Increase training by 30% on the overall trust baseline for 2020.
2. Increase nursing compliance by 20% on the 2020 baseline.
3. To continue the communication campaign around the importance of completing blood transfusion training for patient safety.

Reducing health inequalities in our local population

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

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