Quality Account
2023 / 2024

An Overview

See the full document at:
www.whittington.nhs.uk/QualityAccount.

NHS
Whittington Health
NHS Trust

What is a Quality Account?

Quality Accounts are annual reports to the public from providers of NHS healthcare that detail information about the quality of services they deliver. They are designed to assure patients, service users, carers, the public and commissioners (purchasers of healthcare), that healthcare providers are regularly scrutinising each and every one of the services they provide to local communities and are concentrating on those areas that require the most improvement or attention.

They look back on the previous year's information regarding quality of service, explaining where an organisation is doing well and where improvement is needed. They also look forward, explaining the areas that have been identified as priorities for improvement over the coming financial year.

This document is a lite version of the complete Quality account available on our website.

Welcome from our CEO

Welcome to Whittington Health NHS Trust's 2023/24 Quality Account. It is a pleasure to sign off this year's report for the first time as Acting Chief Executive. Over the past twelve months, our focus on clinical excellence, patient safety, and continuous improvement has only strengthened, and I have been privileged to witness our staff's unwavering dedication to delivering compassionate, high-quality care.

Collaboration, learning, and improving efficiency in our systems and processes have been crucial in guiding our focus and shaping our efforts and outcomes this year. We introduced the Patient Safety Incident Response Framework (PSIRF) to prioritise meaningful learning and patient safety, with a focus on human factors and systems thinking. Digital transformation efforts, including the launch of the Zesty patient portal, have improved patient experience by allowing independent booking. The Wood Green Community Diagnostic Centre (CDC) expansion has increased access to diagnostic services, especially for underserved Haringey communities. We also mandated Oliver McGowan training across the Trust to enhance staff understanding of Learning Disabilities and Autism, fostering more inclusive, patient-centred care.

Looking ahead, I am filled with optimism for the future and our commitment to overcoming challenges as they present. Each of you - staff, patients, carers, and community members - contributes to our shared mission of improving lives and delivering the highest quality, accessible care. Thank you.

I confirm that this Quality Account has been reviewed by the Trust Board and verify that, to the best of my knowledge, the information here is accurate.

Dr Clare Dollery
MBBS BSc PhD FRCP FFFMLM
Acting Chief Executive Officer
Whittington Health NHS Trust

2023/2024 Highlights

Digital Solutions and Accessibility
Whittington Health has embraced digital tools and platforms that streamline appointment management and improve communication. The introduction of the Zesty platform has empowered patients to book, reschedule, and manage appointments independently, leading to an 80% reduction in missed appointments.

Training and Workforce Development
In 2023, Whittington Health mandated the Oliver McGowan training for all staff, focusing on understanding learning disabilities and autism. This training builds staff sensitivity toward these conditions and equips them to provide informed, compassionate care.

Clinical Audits and Research Participation
During 2023/24, Whittington Health participated in 60 national clinical audits and several confidential inquiries. The Trust has further supported clinical research initiatives, contributing to over 50 National Institute for Health and Care Research (NIHR) portfolio studies.

Data Security and Governance
The Trust has made considerable progress in data governance and security, achieving key milestones in compliance with the Data Security and Protection (DSP) Toolkit. With data quality dashboards and regular audits, Whittington Health ensures data accuracy and protects patient information.

Care Quality Commission (CQC) Compliance
Whittington Health remains compliant with CQC standards, maintaining a "Good" rating overall, with "Outstanding" in specific service areas. Annual CQC meetings have provided valuable feedback on the Trust's strengths, including medicines management, patient safety, and maintaining patient dignity.

Our 2023/24 Priorities

We set ourselves three quality priorities for the year, these were:

- Reducing harm from hospital acquired deconditioning.

- Improving access and attendance for appointments.

- Reducing Health Inequalities in our local population.

Reducing harm from hospital acquired deconditioning.
Project 1: Pressure Care

Goal: Ensure all patients have a pressure ulcer risk assessment within 6 hours of admission and a care plan within 24 hours. Challenges with equipment provider NRS delayed full achievement.

An improvement workshop was held in May 2023 to identify enhancements in care quality, documentation, training, and equipment. In response to this, 'Pressure care' was the theme for the month of June at Back to the Floor sessions where senior nursing leaders directly supporting frontline staff offered education, training and support for junior staff with key pressure care topics, including assessment, documentation, escalation, and equipment use.

To further awareness and education "Stop the Pressure" Day in November included a conference on skin assessment, nutrition, and other care topics; the event featured a patient story on pressure ulcer impact.

Electronic nursing documentation was reviewed and updated to include a Pressure Care Assessment. An electronic documentation template for Pressure Ulcer Plan was also drafted and is currently under review.

Achievements:
- Reduction in pressure damage cases at Whittington Health.
- Acute equipment delivery service expanded to six days, including bank holidays.
- Over 90% of clinical areas now have trained skin care ambassadors.
- Certain wards achieved over 120 days without pressure ulcers.

Reducing harm from hospital acquired deconditioning. Project 2: Discharge & Reducing Admissions

Goals	Outcomes
To manage 4 patients per month (2 from Islington borough, 2 from Haringey borough) via the delirium discharge pathway.	The pathway has been underutilised. Acute consultant geriatricians are working to raise awareness ahead of plans to increase Haringey's delirium bed capacity in 2024/25.
To reduce medically optimised patients that are unable to be discharged by 50% daily.	Despite efforts with local partners this target was not reached. Virtual ward pathways improved non-medically optimised patient discharge, with shorter length of stay for these patients.
To utilise up to 28 Virtual Ward beds daily, including 8 technology enabled virtual ward patients and those on the delirium pathway.	This target was achieved. Virtual ward bed utilisation for 2023/24 was a total average of 95%. Remote monitoring beds ranged between 80% - 140%.
For Urgent Response and Recovery Care Group to ensure patients are seen within the national guidance of 2 to 24 hours for >80% of referrals.	Patients in Haringey consistently met the response timeframes of 2, 4, and 24 hours. In Islington, response times varied: 24-hour targets were achieved consistently, but 2- and 4-hour targets were less consistent due to higher referral volumes.
To implement pathway for 'Trial without Catheter' (TWOC) at home, reducing the length of stay by at least one day.	This pathway received very low referral numbers. Initiatives are now underway to increase awareness of the pathway, including reminders and staff training.

Reducing harm from hospital acquired deconditioning.
Project 3: Nutrition

Throughout 2023-2024, work on improving nutrition and hydration for vulnerable patients, including those with Dementia and/or Learning Disabilities has been carried out.

An online learning package on nutrition and hydration was created for all staff involved in support patients with eating and drinking, and health care support workers received in-person training. Nursing staff were designated as Nutrition Champions to reinforce focus on patient nutrition.

Speech and Language Therapy, Dietetics, and nursing documentation has been updated to now include dietary preferences, cultural needs, and allergies.

The trust aimed for all patients with Dementia and/or a Learning Disability admitted to hospital to have eating and drinking preferences and information about the support they require available within 24 hours of their admission. In order for this to be possible 100% of this cohort needed to have accurate and up-to-date next of kin and emergency contacts to supply this information.

100% of Dementia patients had next of kin details recorded; 64% had their next of kin contacted within 24 hours, averaging 0.63 days to contact.

Hospital passports were made available to guide staff on the each individual's care needs.

Improving access and attendance for appointments. Project 1: Zesty

Zesty is a digital patient engagement platform. It allows patients to access their appointment details, view medical records, receive electronic letters, and, when fully implemented, adjust bookings.

The Trust aimed for 60% of outpatients to be using Zesty by end of March 2024.

This target was exceeded, with 86% of outpatients now using Zesty, however this was not achieved by March 2024. It was towards the end of the year that the platform received a marked increase in users as a result of a second reminder being sent to those patients who had not signed up after receiving their first invite to Zesty.

The trust also intended to utilise Zesty to reduce our DNA (did not attend) rate via its booking amendments functionality. This priority was not achieved as the functionality for amending bookings has not passed the testing stage due to IT issues. It is hoped it will be piloted in early 2024/2025.

Improving access and attendance for appointments. Project 2: Patient letters

During 2023, work was undertaken by IT and Quality Improvement teams to assess letters sent out for outpatient appointments. The aim of this work was to ensure outpatient letters accurately reflect hospital signage for clear wayfinding.

IT and Quality Improvement teams reviewed 1008 letter templates, confirming that 48 letter locations correctly matched hospital signage. One outdated location was identified and removed.

A new map and wayfinder guide was created and distributed to volunteers, with 25 new volunteers recruited to assist patients in finding appointment locations.

Outdated COVID signage was reviewed and removed to reduce patient confusion about navigation.

Improving access and attendance for appointments. Project 3: Wood Green Community Diagnostic Centre (CDC)

Goals:

- Improve attendance and access by offering multilingual and multi-format patient information and better wayfinding to the CDC.
- Enhance appointment booking accessibility with an electronic self-booking system by March 2024.

This year attendance and access was improved at Wood Green CDC for both walk-in and booked appointments and wayfinding signage was improved and increased throughout the shopping centre and high street.

The new lower-ground floor of the CDC opened in November 2023, providing MRI and CT diagnostic services. Since August 2022, the CDC has served 55,000 people. Clear mall signage now guides patients, with banners and multiple format information available. Community outreach increased diagnostic access, with 72% of CDC usage coming from the most deprived areas of north central London.

Swiftqueue, the digital patient booking system, now allows 60% of phlebotomy appointments to be booked online. Walk-in phlebotomy was discontinued, reducing appointment delays and eliminating overbooking complaints. Walk-in options remain for X-rays.

Improving access and attendance for appointments.
Project 4: Accessible information for patients with learning difficulties.

This project aimed to provide easy-to-understand information for patients with Learning Disabilities in leaflet and video form for various services and departments (e.g., outpatients, emergency, surgery, and discharge) across Whittington Health.

So far, several materials, including leaflets and videos designed specifically for patients with Learning Disabilities and Autism, have been created and made available. Although the videos are live, usage remains low, and further efforts are needed to improve accessibility for service users.

Progress:
- "Grab bags" are now available in the Emergency Department for patients with Learning Disabilities.
- Easy read letters are under review and in development. However, challenges have arisen in IT letter systems being unable to store the picture content due to file size.
- A Patient Information Group, with LD nurse specialists and other experts, ensures materials are clear and useful. New readability checklist has been introduced as part of the review and approval process for patient information leaflets.

Improving access and attendance for appointments.
Project 5: Transport

Aims:
- For patients to be able to complete a single eligibility assessment for multiple transport requests by the end of March 2024.
- For clear communication and guidelines on how to access Transport to be developed in conjunction with the transport provider, demonstrating an impact of reducing the number of patient complaints relating to Transport being received by March 2024.

The project to improve patient transport services aimed to streamline eligibility criteria and enhance communication about transport access.

Since March 2024, a single eligibility assessment now covers multiple transport requests for up to 12 weeks. A new Transport Service Group was established in the third quarter of the year to improve engagement with clinical users, and patients with transport concerns are directed to PALS.

Clear guidelines for accessing transport were developed with the transport provider DHL, reducing complaints. Complaints dropped from 12 in 2022/2023 to 7 by March 2024. Some complaints persisted about restrictions on family escorts for patients, as DHL policy allows only registered carers as escorts. While this remains a concern for some families, the Trust cannot influence this policy.

Reducing Health Inequalities in our local population. Project 1: Sickle Cell

Goals:
- Train 60% of Emergency Department (ED) staff on managing sickle cell anaemia, with an emphasis on preventing unconscious bias by March 2024.
- Ensure 80% of sickle cell patients receive pain relief within 30 minutes of arrival by March 2024.

In 2023-2024, training sessions were developed with input from service users. Initial training included a third of ED staff, by the second quarter of the year 23 nursing staff were trained, and another 25 received training in February 2024. ED and Ambulatory Care departments have introduced Sickle Cell Nursing Advocates to support ongoing training and share resources, and a planned e-learning module will be available Trust-wide for staff.

Timely pain relief provision varied, with rates fluctuating from around 54% to 77% throughout the year. A new data tool was introduced to track time-to-analgesia (pain relief) more accurately, reducing errors and duplications. Although achieving the 80% target remains challenging, patients have reported perceiving faster pain relief times.

Reducing Health Inequalities in our local population. Project 2: Learning Disabilities and Autism

The project to enhance training for clinical staff on treating and supporting individuals with Learning Disabilities (LD) and Autism by March 2024 has been partially achieved, with the following initiatives:

Learning Disabilities Training: Introduced as part of staff induction, offering quarter-day training sessions, which have received positive feedback.

Autism and Learning Disabilities Videos: The LD Clinical Nurse Specialist (CNS) secured funding to create a targeted video for Autism and LD patients.

Oliver McGowan Training: Implemented to provide specialised Autism and LD support training. While an online version is available on the Elev8 platform, there is a need for more in-person sessions, especially for staff who may not access the electronic system.

Care Bags in ED: Following the success of LD care bags in the Emergency Department, resources are now being ordered to provide similar support for Dementia patients in the Emergency Department.

Overall, training initiatives are underway, with further efforts needed to expand access and increase face-to-face sessions.

Reducing Health Inequalities in our local population.
Project 3: Prostate Cancer

This project's objective was to increase cancer support events aimed to build on past successes with prostate cancer support and expand offerings for all cancer patients by March 2024. This priority has been achieved through the following initiatives:

Prostate Cancer Support Group: A new quarterly support group for prostate cancer patients.

C Factor Course: An 8-week course using theatre and storytelling for group support open to all cancer patients.

HOPE Course: Two 6-week courses were offered to help patients finishing treatment with the transition to recovery.

New Diagnosis Sessions: Regular Zoom sessions for newly diagnosed cancer patients.

Patient Focus Group: Held in June to gather feedback for updating the Macmillan pages on the Hospital website.

Special Events: A July workshop focused on intimacy for prostate cancer patients, which led to patients sharing feedback with the urology team to shape service improvement.

Cognitive Behavioural Therapy: A 6-week course began in July to help prostate cancer patients manage side effects from hormone therapy.

Tree of Life Workshops: Two half-day sessions in July were open to all cancer patients, with further workshops and support groups held later in the year.

Looking ahead
Our 2024/25 Priorities

We set ourselves four quality priorities for the year ahead, these are:

- Ensuring patients are seen by the right person in the right place at the right time and deliver outstanding safe and compassionate care in partnership with patients.

- Reducing health inequalities in our local population.

- Improving access and attendance for appointments & Improving communication with patients.

- Improving the Trust Environment to Improve Patient Experience.

NHS
Whittington Health
NHS Trust

🌐 www.whittington.nhs.uk

✖ @WhitHealth

f WhittingtonHealth