

Quality Report and Quality Objectives

Council of Governors – 10 September 2024

**PROUD
TO MAKE A
DIFFERENCE**



2023/24 Context



- Exceptionally busy with several periods of industrial action.



- Significantly reduced longest waits & reduced overall waiting times



- Worked with YAS to reduce ambulance turnaround and improve flow



- Continued to improve maternity care



- Implemented National Patient Safety Incident Response Framework



- Invested £52.6m in facilities and equipment.



- New People Strategy “A Brilliant Place to Work”, launched March 2023, with focus on Attract, Grow and Retain.



2023/24 Quality Objectives

Improve the management of medicines to ensure patient safety (SAFETY)

Achievements :

- Monthly Medicines Management Checklist target consistently met.
- Daily fridge monitoring on QUEST improved to 85% in March 2024 (target 95%).
- Daily ambient monitoring improved to 88% in March 2024 (target 95%).
- Nurse Educators :
 - delivered training to over 240 nurses
 - ran breakfast clubs
 - produced a newsletter
 - developed a medicine management training package on PALMS.



2023/24 Quality Objectives

Improve the quality of Accessible information for patients (PATIENT EXPERIENCE)

Achievements :

- All Booking Hub staff trained to record patient's communication preferences.
- Accessible information standard (AIS) e-learning package implemented.
- AIS data collection commenced. At 15 March 2024:
 - 346 of 1,040 patients asked described communication preferences
- Developing pilot in MyPathway to collect communication preferences.
- Icon-led letter templates on Lorenzo praised by local disability groups and will transfer to Connect 24 EPR.
- Regular meetings with Disability Sheffield, Sheffield Royal Society for the Blind and Citizen's Advice Deaf link workers.



2023/24 Quality Objectives

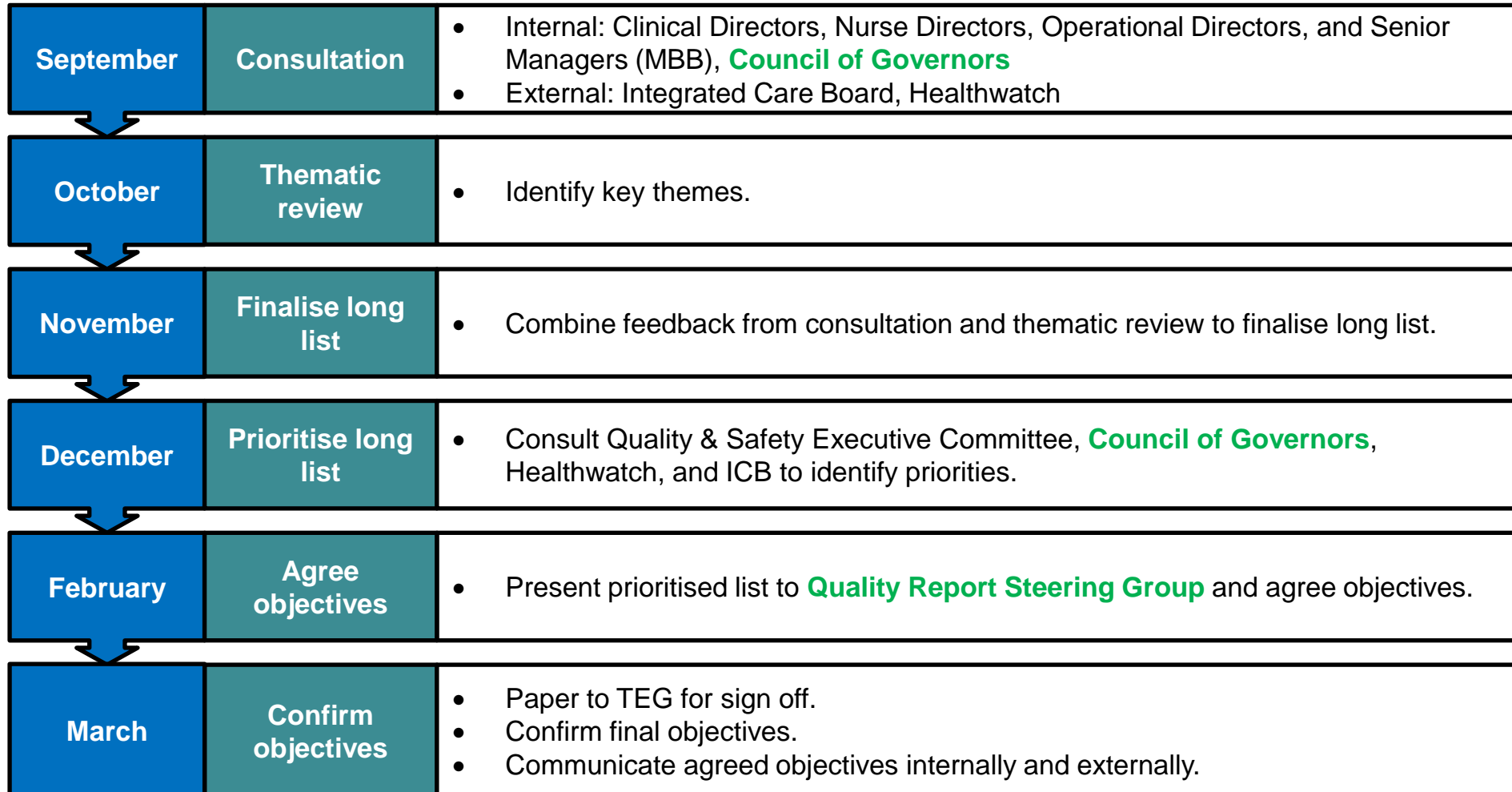
Improve individualised care of patients with dementia - Year 2 (EFFECTIVENESS)

Achievements :

- Job Specific Essential Training compliance at 84% (target 90%)
- First round of Dementia Care Mapping completed.
- Engagement with Connect 24 team to move to NICE recommended 4AT cognitive test.
- Draft dementia dashboard developed.
- Funding secured for two Admiral (Specialist Dementia) Nurses for two years.



Process for agreeing Quality Objectives



2024/25 Quality Objective - SAFE



To improve the assessment and management of **Pressure Ulcer** risk to ensure patient safety.

Executive Lead

Chief Nurse

Operational Lead

Lead CNS Tissue Viability

Objective Timescale

1 Year



2024/25 Quality Objective – PATIENT EXPERIENCE



Improve the experience of people who are **blind or visually impaired**, with a focus on communications.

Executive Lead

Chief Nurse

Operational Lead

Head of Quality Governance

Objective Timescale

1 Year



2024/25 Quality Objective – EFFECTIVENESS



Improvement the **management of pain** for patients.

Executive Lead

Chief Nurse

Operational Lead

Quality Director / Lead Clinical Nurse Specialist in Acute Pain

Objective Timescale

1 Year



2023/24 Quality Report – Key Findings

Complaints:

- 1,139 formal complaints received (7% decrease from previous year).
- 56% formal complaints upheld or partially upheld by the Trust.
- 94% of complaints responded to on time (target 90%).

Delivering same-sex accommodation:

- No breaches of same-sex accommodation standard.

Never Events:

- 4 never events (8 previous year).
- 2 NEs - 'wrong site surgery', 1 'wrong implant/prosthesis' and 1 'selection of strong potassium solution'.

Learning from Deaths:

- All 2,785 deaths reviewed by a Medical Examiner.
- 175 cases referred for a Structured Judgement Review (SJR) case record review.



2023/24 Quality Report

Clinical Audit:

- 45 national clinical audits and 270 local clinical audit projects reviewed.
- An example of one clinical audit:



Trust-wide audit on the assessment and management of pain.

Pain assessment and documentation were well evidenced, but resulting analgesia administration did not always match WHO pain ladder. Areas for improvement included:

- Increasing staff education and awareness around pain assessment and appropriate management
- Reinforcing importance of care plan documentation to include functional pain scores.
- Development of acute pain management patient information leaflet.
- Completion of Patient Experience Survey and Junior Doctor Survey to triangulate data and build on audit results.

2023/24 Quality Report







Three Coroners' Prevention of future death reports:

1. Incorrect due date in Mother's records resulting in baby not being offered lifesaving support at birth.
2. Patient admitted in sickle cell disease crisis whose individualised care plan was not reviewed and observations not completed at appropriate intervals.
3. Patient admitted for elective surgery related to complications of spina bifida who developed a clot in the shunt to his brain after surgery. Concerns about transition from children's to adult services.

The Trust provided responses and action plans to demonstrate learning to prevent recurrence of the issues in each case.



2023/24 Quality Report

Survey	Trust Performance
 <p data-bbox="307 294 662 334">NHS Staff Survey</p>	<ul data-bbox="813 294 1804 386" style="list-style-type: none"> • Improvement in majority of questions • Average for 1 and below average for 8 themes.
 <p data-bbox="307 486 716 629">National Urgent and Emergency Care Survey</p>	<ul data-bbox="813 486 1850 629" style="list-style-type: none"> • ‘about the same’ as other trusts for most questions • ‘better than’ other trusts on 1 question. • ‘worse than’ other trust on 1 question.
 <p data-bbox="307 669 672 762">National Inpatient Survey</p>	<ul data-bbox="813 669 1850 762" style="list-style-type: none"> • ‘about the same’ as other trusts for most questions • ‘better than’ other trusts on 2 questions.
 <p data-bbox="307 855 639 948">National Cancer Survey:</p>	<ul data-bbox="813 855 1850 998" style="list-style-type: none"> • ‘about the same’ as other trusts for most questions • ‘better than’ other trusts on 1 question. • ‘worse than’ other trust on 2 questions.
 <p data-bbox="307 1038 681 1130">National Maternity Survey:</p>	<ul data-bbox="813 1038 1850 1180" style="list-style-type: none"> • ‘about the same’ as other trusts for most questions • ‘better than’ other trusts on one question. • ‘worse than’ other trust on one question.
 <p data-bbox="307 1220 701 1310">Friends and Family Test:</p>	<ul data-bbox="813 1220 1866 1310" style="list-style-type: none"> • Overall positive score across all services was 92%. • (91% previous year; national score 92%).

