

**UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST**

**BOARD OF DIRECTORS**

**THURSDAY 25 APRIL 2019**

<b>Title:</b>	<b>QUALITY PERFORMANCE REPORT</b>
<b>Responsible Director:</b>	Mark Garrick, Director of Quality Development
<b>Contact:</b>	Ann Keogh, Head of Clinical Quality Benchmarking, 13684 Imogen Acton, Head of Quality Development, 13687 Samantha Baker, Quality Development Manager, 13646

<b>Purpose:</b>	To provide assurance to the Board of Directors on clinical quality and detail the actions being taken to improve performance.	
<b>Confidentiality Level &amp; Reason:</b>	None	
<b>Annual Plan Ref:</b>	<p align="center">CORE PURPOSE 1: CLINICAL QUALITY</p> <p>Strategic Aim: To deliver and be recognised for the highest levels of quality of care through the use of technology, information, and benchmarking.</p>	
<b>Key Issues Summary:</b>	<p>Updates provided on the following areas:</p> <ul style="list-style-type: none"> <li>• Staff investigations currently underway</li> <li>• Adverse inquest conclusions and upcoming inquests</li> <li>• Number of Serious Incidents / Internal Serious Incidents / Never Events</li> <li>• Clinical quality indicators</li> <li>• Board of Directors' Unannounced Governance Visits</li> </ul>	
<b>Recommendations:</b>	<p>The Board of Directors is requested to:</p> <p><b>Accept</b> the report on quality performance and associated actions.</p>	
<b>Approved by:</b>	Mark Garrick	Date: 12/04/2019

# UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST

BOARD OF DIRECTORS  
THURSDAY 25 APRIL 2019

## QUALITY PERFORMANCE REPORT PRESENTED BY DIRECTOR OF QUALITY DEVELOPMENT

### 1. Introduction

To provide assurance on clinical quality to the Board of Directors and detail the actions being taken to improve performance. The Board of Directors is requested to accept the report on quality performance and associated actions.

### 2. Investigations into Staff Performance

There are currently 18 investigations underway in relation to clinical staff. There is also one investigation into a non-clinical member of staff underway with a patient wellbeing component.

Staff group	Total currently underway	Percentage of total staff numbers	New since previous report (March)	Closed since previous report (March)
Consultants	3	0.28%	0	0
Junior Doctors	4	0.30%	0	0
Nurses and Midwives	6	0.10%	1	0
Nursing Auxiliaries / HCAs	4	0.15%	1	2
Allied Health Professionals	0	0.00%	0	1
Non-clinical staff	2	0.03%	1	0
<b>Total</b>	<b>19</b>	<b>0.09%</b>	<b>3</b>	<b>3</b>

*Data sources:*

*Number of investigations: from report provided to CaPRI meetings, as of 11/04/19.*

*Percentages calculated using staff groupings on ESR (Electronic Staff Record).*

### 3. Inquest Update

#### 3.1 Adverse Inquest Conclusions, 01/03/2019-11/04/2019

Theme	Inquest Date	Divisions & Specialties	Location	Conclusion
Patient had severe disability which occurred following neurosurgery in October 2017. Death resulted from aspiration pneumonia within a care home setting	21/03/2019	Division D – Neurosurgery	QEHB	Narrative conclusion – the patient died as a result of aspiration pneumonia with a history of severe brain injury. The hypoxic ischemic brain injury occurred at the time of an operation performed on 3rd October 2017 but the cause of which is unknown.
Missed opportunities and delay in diagnosing multiple pulmonary emboli following knee replacement surgery.	02/04/2019	Divisions 1, 5 - Trauma & Orthopaedics	GHH	<p>Narrative conclusion – the patient died following a delay in treatment and complications of elective surgery.</p> <p>The Coroner also issued a report to prevent future deaths (Regulation 28) as she has concerns surrounding the training provided to radiographers based at Heartlands, Solihull and Good Hope and what audit/monitoring is in place to ensure all staff receive all training and are aware of all standard operating procedures relevant to their role.</p>

### 3.2 Future Inquests associated with an internal investigation or complaint, April–June 2019

Theme	Inquest Date	Directorate & Specialties	Location	Investigation	Status
Discharge following Second fracture without DVT prophylaxis and discrepancy as to whether patient should be weight bearing.	21/06/2019	Division 5 Trauma & Orthopaedics	BHH	SI	Complete. This case was part-heard by the Coroner on 28 March 2019 however he adjourned the hearing until 21 June 2019 to allow the Trust to provide additional information in relation to VTE assessments/NICE guidance as the Coroner was concerned about the assessment process and whether this was in line with NICE guidance.
Insertion of tracheostomy tube which was most likely in false passage.	24/04/2019	Division D	QEHB	SI	Awaited – due 15/04/2019
Misplaced NG tube in lung	23/05/2019	Division D	QEHB	SI	Awaited – due 08/05/2019
Migration of web device causing brainstem stroke	29/05/2019	Division A	QEHB	SI	Awaited – due 17/05/2019
Recall to ED for inconclusive x-ray. Agitated patient who fell in unit following involvement of security and Police.	03/06/2019 – 06/06/2019	Division C	QEHB	SI	Awaited – due 19/04/2019
Delay in review of patient in ED corridor and concerns regarding empty oxygen cylinder.	13/06/2019	Division C	QEHB	SI	Awaited – due 01/05/2019.

Theme	Inquest Date	Directorate & Specialties	Location	Investigation	Status
Several falls on ward – last fall resulting in head injury.	18/06/2019	Division 3	GHH	Falls RCA	Final report to Nursing Incident Quality Assurance Group (NIQAG) for approval on 03/05/2019
Complications following insertion of PEG.	20/06/2019	Division 5	SHH	SI	Awaited – due 29/05/2019
Possible delay in diagnosing intestinal obstruction and deterioration in condition.	Not yet set	Division 4	BHH	SI	Awaited – due 27/06/2019

#### 4. Update on Serious Incidents (SIs) and Internal Serious Incidents (ISIs)

The table below provides an update on the number of confirmed SIs, ISIs and Never Events for the period 1–31 March 2019:

	Heartlands	Good Hope	Solihull	QEHB	Other	Total
Never Events	0	0	0	0	0	0
Serious Incidents	5	0	0	1	0	6
Internal Serious Incidents	1	1	0	0	0	2
<b>Total</b>	<b>6</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>8</b>

#### 5. Clinical Quality Indicators: assessment areas

- 5.1 The Quality Development team presented the findings from the staff focus groups on assessment area indicators to the UHB Clinical Quality Monitoring Group (CQMG) in March 2019. The group suggested that blood glucose measurement could be an additional indicator for assessment areas.
- 5.2 The Quality Development team is working with the Deputy Chief Nurse for Quality and Safety, Lead Nurse for Clinical IT and Health Informatics to develop a detailed programme for the development of indicators for different types of assessment areas. This will be presented to the Chief Executive's Advisory Group in due course.

#### 6. Board of Directors' Unannounced Governance Visits

##### 6.1 Summary following February 2019 Visits

Five wards / areas were visited at Solihull Hospital on Thursday 28<sup>th</sup> February 2019. A summary of these visits is provided in Appendix A below.

##### 6.2 Summary following March 2019 Visits

Five wards / areas were visited at Queen Elizabeth Hospital Birmingham (QEHB) on Thursday 28<sup>th</sup> March 2019. A summary of these visits is provided in Appendix B.

##### 6.3 Verbal update following April 2019 Visits

Five wards / areas are due to be visited at Heartlands Hospital on Thursday 25<sup>th</sup> April 2019. A verbal update will be provided to the Board of Directors by the Non-Executive Directors on the visits which have taken place on the morning of the meeting.

#### 7. Recommendations

The Board of Directors is requested to:

**Accept** the report on quality performance and associated actions.

Mark Garrick  
Director of Quality Development

**Appendix A: Summary of Board of Directors' Unannounced Governance Visits, Solihull Hospital, Thursday 28<sup>th</sup> February 2019**

<b>Ward/Area</b>	<b>Specialty</b>	<b>Visit team</b>	<b>Summary</b>
<b>AMU</b>	Acute medicine	<ul style="list-style-type: none"> <li>• Jacqui Smith, Chair</li> <li>• Simon Ball, Executive Medical Director</li> <li>• Fiona Alexander, Director of Communications</li> <li>• James Bentley, Medical Directors' Service Manager</li> <li>• Ben Khela, Medical Directors' Service Administrator</li> </ul>	A positive visit to a small unit during a quiet period, it was generally well organised and tidy. Feedback from patients and staff was positive, although there were some environmental issues to address.
<b>Ward 16/15</b>	Trauma + Orthopaedics	<ul style="list-style-type: none"> <li>• Michael Sheppard, Non-Executive Director</li> <li>• Jon Glasby, Non-Executive Director</li> <li>• David Burbridge, Director of Corporate Affairs</li> <li>• Margaret Garbett, Director of Nursing</li> <li>• Ayne Ahmed, Quality Development Graduate Trainee</li> <li>• Catriona Hampton, Quality Development Graduate Trainee</li> </ul>	This was a positive visit to Ward 16 - an orthopaedics admissions unit, used for day cases and surgical recovery, and Ward 15 - an orthopaedic surgical ward under the same nursing management. It was found to be highly organised and well managed, the ward was clean and tidy, though somewhat dishevelled which let the environment down. Feedback from patients was very positive, saying that staff were all friendly, professional and provide excellent care.
<b>Ward 17</b>	Cardiology	<ul style="list-style-type: none"> <li>• Harry Reilly, Non-Executive Director</li> <li>• Mike Hallissey, Deputy Medical Director</li> <li>• Cherry West, Executive Chief Operating Officer</li> <li>• Samantha Baker, Quality Development Manager</li> </ul>	Feedback from patients was very positive, saying that staff were friendly and professional. There was a good team spirit. The ward environment was a little cluttered and there are some spaces that could be better utilised. At the time of the visit there were 9 medical patients, out of a total of 25 beds.

Ward/Area	Specialty	Visit team	Summary
<b>Ward 20a</b>	Elderly Medicine	<ul style="list-style-type: none"> <li>• Catriona McMahon, Non-Executive Director</li> <li>• Jackie Hendley, Non-Executive Director</li> <li>• Lisa Stalley Green, Executive Chief Nurse</li> <li>• Kevin Bolger, Executive Director Strategic Operations (and External Affairs)</li> <li>• Imogen Acton, Head of Quality Development</li> </ul>	A very positive visit to a busy ward dealing with a complex patient cohort. Excellent teamwork across disciplines and very good feedback from patients and relatives. Some environmental issues need to be addressed.
<b>Ward 20b</b>	Medicine	<ul style="list-style-type: none"> <li>• Karen Kneller, Non-Executive Director</li> <li>• Mehrunnisa Lalani, Non-Executive Director</li> <li>• Tim Jones, Executive Director of Workforce and Innovation</li> <li>• Hayley Flavell, Deputy Chief Nurse</li> <li>• Ann Keogh, Head of Clinical Quality Benchmarking</li> </ul>	A very positive visit to a ward where patients reported being happy with care and all gave very complimentary feedback except one patient where concern was raised about sitting out more frequently. However they were otherwise happy with the rest of the care There were issues with both high nursing vacancies and medical staffing resource concerns. The ward sister was very enthusiastic and morale was very good and compassion obvious. This was on a background of a very cramped cluttered working environment.

**Appendix B: Summary of Board of Directors' Unannounced Governance Visits, Queen Elizabeth Hospital Birmingham, Thursday 28<sup>th</sup> March 2019**

<b>Ward/Area</b>	<b>Specialty</b>	<b>Visit team</b>	<b>Summary</b>
Outpatients Area 2	Various (Renal Medicine, ENT, Maxillofacial Surgery, Colorectal Surgery, Liver Surgery, Vascular Surgery and Urology)	<ul style="list-style-type: none"> <li>• Jacqui Smith, Chair</li> <li>• Michael Sheppard, Non-Executive Director</li> <li>• Lisa Stalley Green, Executive Chief Nurse</li> <li>• Tim Jones, Executive Director of Workforce &amp; Innovation</li> <li>• Imogen Acton, Head of Quality Development</li> </ul>	A positive visit to a very busy area covering multiple specialties. Excellent teamwork and good feedback from patients. There is an issue with delays and patient flow through Area 2.
Ward 301	Renal dialysis unit	<ul style="list-style-type: none"> <li>• Jon Glasby, Non-Executive Director</li> <li>• Kevin Bolger, Director of Strategic Operations</li> <li>• Richard Steyn, Deputy Medical Director</li> <li>• Ann Keogh, Head of Clinical Quality Benchmarking</li> </ul>	Overall a positive visit. There was good staff morale and the ward appeared calm, despite being very busy, and well led. There was a good relationship between staff and patients summarised by one patient as they are "my other family". The environment was shabby with limited storage room. There were some issues identified with fridge and resus trolley checks and locked doors to storage cupboards and kitchen areas.
Ward 625	Haematology and BMT (bone marrow transplant)	<ul style="list-style-type: none"> <li>• Harry Reilly, Non-Executive Director</li> <li>• Jackie Hendley, Non-Executive Director</li> <li>• Mike Hallissey, Deputy Medical Director</li> <li>• Fiona Alexander, Director of Communications</li> <li>• Julian Miller, Director of Finance</li> <li>• Ayne Ahmed, Quality Development Graduate Trainee</li> </ul>	Overall this was a positive visit to a well maintained ward; patients provided good feedback and were very happy with their overall care and treatment. Staff were friendly and professional, and when asked said that they enjoyed working on the ward. Good information governance was observed, however some concerns were raised around the call bells and doors were left unlocked to drug rooms, storage and kitchen areas. Some environmental issues need to be addressed.

Ward/Area	Specialty	Visit team	Summary
Ward 726	Liver Surgery	<ul style="list-style-type: none"> <li>• Jason Wouhra, Non-Executive Director</li> <li>• Catriona McMahon, Non-Executive Director</li> <li>• Simon Ball, Executive Medical Director</li> <li>• Mark Garrick, Director of Quality Development</li> <li>• Mariola Smallman, Head of Medical Directors' Services</li> <li>• Ben Khela, Medical Directorate Administrator</li> </ul>	<p>A very positive visit to a busy ward which cares for patients with complex needs. The ward was very clean, tidy and well maintained. Patients and relatives were extremely complimentary and positive about the ward providing the best possible care. Ward staff highlighted that they felt that the ward has good multi-disciplinary working and that they feel very well supported.</p>
West 1	Healthcare for older people (Female)	<ul style="list-style-type: none"> <li>• Jane Garvey, Non-Executive Director</li> <li>• David Burbridge, Director of Corporate Affairs</li> <li>• Margaret Garbett, Director of Nursing</li> <li>• Lawrence Tallon, Director of Corporate Strategy, Planning &amp; Performance</li> <li>• Hayley Flavell, Deputy Chief Nurse</li> <li>• Catriona Hampton, Quality Development Graduate Trainee</li> </ul>	<p>A very positive visit to a friendly and efficient ward. Staff appeared to enjoy working together on the ward and displayed excellent care and compassion to patients. Whilst the ward is currently experiencing staffing issues, it appears to still be operating very well.</p>