



Quality Account Summary 2012-13



Living our values *everyday*



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1. Statement from the Chief Executive



I am delighted to introduce the fourth Quality Account for Kingston Hospital NHS Foundation Trust. The Quality Account provides information on quality achievements in the last year and identifies our quality priorities for the year ahead.

Here at Kingston we provide a full range of diagnostic and treatment services to the people living in South West London and North Surrey who use our hospital. Kingston is a popular local hospital and we continue to develop our services to meet the needs of our local population. Last year, we agreed three priorities for 2012-13 with our stakeholders:

- Recognise when a patient's condition is deteriorating and take swift clinical action.
- Ensure we maintain consistently high standards of care out of hours, such as evenings and weekends.
- Improve communications between the hospital and patients.

We developed four priorities for 2013-14 with the help of patients and staff. These are:

- Reduce the number of C-Diff cases in the hospital.
- Reduce the number of patient falls.
- Improve staff involvement.
- Improve waiting times.

I hope you find this short summary version of our full Quality Account useful and easy to read. We do have a fuller version if you want more detail. You can get a copy from our Communications Department on 020 8934 3614.

With very best wishes,

A handwritten signature in black ink that reads "Kate Grimes".

Kate Grimes, Chief Executive

2. What is the Quality Account?

All providers of NHS services in England have a statutory duty to produce an annual report to the public about the quality of services they deliver. This is called the Quality Account. Quality Accounts aim to increase public accountability and drive quality improvement within NHS organisations. They do this by getting organisations to review their performance over the previous year, identify areas for improvement and publish that information, along with a commitment to you about how those improvements will be made and monitored over the next year.

Kingston Hospital focuses on three areas that help us to deliver high quality services:

- Patient safety
- How well the care provided works (clinical effectiveness)
- How patients experience the care they receive (patient experience)

Some of the information in a Quality Account is mandatory but more is decided by patients and carers, Foundation Trust Governors, staff, commissioners, regulators and our partner organisations.

3. Looking back at 2011-12

At Kingston Hospital, we strive to ensure we put patients at the centre of everything we do and our priorities for 2012-2013 reflected this:

Domain	Priority	Outcome
Patient Safety	Recognise when a patient's condition is deteriorating and take swift clinical action	Achieved
Clinical Effectiveness	Reduction in variations in care out of hours.	Achieved
Patient Experience	Improving communication with our patients	Achieved

Patient Safety:

We attempt to resuscitate all patients who are not expected to die whose hearts suddenly stop beating (cardiac arrest). Nationally the chance of surviving a cardiac arrest is 13.7%. This year at Kingston Hospital 16.7% of patients who had a cardiac arrest in the hospital survived and were able to be discharged. We are proud of the fact that the outcome for our patients is better than the national average.

Clinical Effectiveness:

We reviewed the mortality rates, lengths of stay and emergency readmission rates for patients comparing the week days and weekends. We compared patient care at weekends and weekdays to ensure that our previous good performance continued.

We changed how 'handover' (communication of patient details/diagnosis/clinical tasks required) is carried out and we now use a more standardised approach.

Patient experience:

As part of the national inpatient survey there are five questions which ask about different elements of patient experience in Hospital and the latest results show that we have improved in four of the five questions that patients said were really important to them.

These results mean that we achieved our CQUIN target around improving patient experience. The one area where we did not achieve a major improvement (talking about your worries or fears) forms part of our patient experience action plan. We have fed this back to staff and we will continue to work on ward level improvements in this area with the senior nurses.

Other Quality Achievements in the past year

Whilst focussing on the priority areas identified in the Quality Account, the Trust also routinely monitors performance against a much broader range of measures. In the course of selecting our priorities each year, we focus on areas where there is improvement required, but in this section we want to highlight some of our areas of high performance during 2012/13.

MRSA Infections (Methicillin- resistant Staphylococcus Aureus)

Each year, several hundred people in the UK die from MRSA, but fortunately numbers are falling. The Government, the NHS and Kingston Hospital have been focussing on reducing the levels of infections acquired in hospital and we are pleased to report that there have been zero hospital acquired MRSA cases since May 2012.

Eliminating Mixed Sex Accommodation

We are pleased to confirm that we are compliant with the Government's requirement to eliminate mixed sex accommodation, except when it is the patient's overall best interest or reflects their personal choice. We are pleased to report that there have been no mixed sex accommodation breaches since May 2011.

Hospital Acquired Pressure Ulcers

For the second year running, we have reduced the rate of patients developing stage two pressure ulcers by more than 40%.

Malnutrition Universal Screening Tool (MUST) Assessments

Malnutrition Universal Screening Tool (MUST) is a five-step screening tool to identify adults who are malnourished, at risk of malnutrition or obese. At Kingston Hospital, 90% of patient are assessed using the MUST assessment process- We will continue to focus on this to increase this further.

Releasing Time to Care (RTtC)

Releasing Time to Care (RTtC) aims to increase the proportion of time nurses spend delivering direct patient care, thereby improving patient experience and increasing job satisfaction. The programme focuses on simple ideas, such as altering patient handover times, reorganising storage facilities and making better use of data. Over the past year we have implemented several initiatives and changed the way we do things as a direct result of this programme which has significantly increased the amount of time nurses spend delivering direct care to patients.

Dementia Champions.

In April 2013, we launched our Dementia Champions initiative to help raise awareness of the needs of our patients with dementia. To support this, we have launched the "Forget me Not" scheme, which helps to easily identify our patients with dementia and given identity badges to staff who sign up to our pledges for dementia patients.

4. Care Quality Commission (CQC) Inspections

We are registered with an organisation called the Care Quality Commission (CQC) - every Hospital has to be. This means that we are doing everything we should to keep patients safe and to provide good care.

The CQC carries out regular checks to make sure that Hospitals are meeting important government standards. Over the past year (2012-2013), there was one inspection into the care we provide. This is how we did:

Full Unannounced Inspection:

A full unannounced inspection was carried out in October 2012 and the Trust met 100% of the 16 standards that the government says patients have the right to expect. After speaking with patients, staff and stakeholders and observing the running of the hospital for two days, the team of inspectors agreed that Kingston Hospital NHS Foundation Trust met all the essential standards reviewed including:

- Treating people with respect and involving them in their care
- Providing care, treatment and support that meets peoples need.
- Providing safe and coordinated care when patients move between different services.
- Caring for people safely and protecting them from harm.
- Providing care in a clean environment, protected from the risk of infection.
- Staffing
- Risk management systems to assure the health, welfare and safety of patients
- Record keeping

This shows that we are continuously working to provide patients with high quality services and that patients treated at our Hospital receive the safest and the most appropriate care for their needs.

5. Our Priorities for Improvement in 2013-14

After detailed discussions and consultations with our patients, staff and partner organisations, we have decided to focus on four areas:

- **Patient Safety-** Reducing the number of clostridium difficile (C Diff) infections
- **Patient Safety-** Reduce the number of patient falls
- **Effectiveness of Care-** Improving staff engagement
- **Patient Experience-** Improving waiting times.

Who we involved in agreeing our priorities for 2013- 2014

We involved our patients, staff and partner organisations, such as the local LINKS and Healthwatch groups, to find out from them what they thought we should focus on.

4. Our Priorities for the Year Ahead Explained (2013/2014)

Priority 1 - Patient Safety: Reduce the number of patient falls.

Why did we choose this?

Patient falls are among the most common incidents reported in hospitals and are a leading cause of death in people aged 65 years and older. Of those who fall, as many as half may suffer moderate to severe injuries that reduce mobility and independence and increase the risk of premature death.

What are we going to do?

- Use the new incident reporting system to analyse specific fall information, including location and time of fall to identify any trends.
- Regular benchmarking of performance at ward level
- Provide additional training for ward areas identified with the highest fall rates
- Purchase extra fall alarm devices for the Acute Assessment Unit
- Review ward sizes as part of a review of medical wards

How will progress be reported?

- Monthly performance will be reported through the Trust Executive Management Committee and the Patient Safety Committee.
- Performance will be reported to the public and the Trust Board through the Clinical Quality Report.

Priority 2 – Patient Safety: Reduce the number of Clostridium Difficile cases

Why did we choose this?

Clostridium Difficile, or C Diff, is a bacteria that is present naturally in the gut of around 3% of adults and 66% of children. It does not cause any problems in healthy people, but when taking certain antibiotics for other health conditions, these can interfere with the balance of good bacteria. When this happens, C Diff can multiply and cause symptoms such as diarrhoea and fever.

The feedback from staff and public surveys made this their highest priority (of the patient safety priorities proposed) and the Trust has decided to include it as an additional patient safety improvement priority for this year.

What have we done so far?

A review in Nov 2012 by external consultants was commissioned by the Trust. The review team found many examples of good practice in the care they observed our team providing but also suggested some areas where we could do better.

What are we going to do?

We need to strengthen our practices around isolation procedures (making sure we do this in a timely way) and ensure our cleaning standards are as good as possible. There will also be a focus on prudent antibiotic prescribing and stewardship.

- Establish an antibiotic management group, which focuses on treatment policy and audit programmes.
- Review the current Trust Antibiotic policy.
- Monitor compliance with isolation on suspicion of C Diff diarrhoea within 2 hours and timely sampling for patients on admission.
- Complete implementation of cleaning standards.
- Review latest National Cleaning Specification.

How will progress be reported?

Monthly performance will be reported through the Trust Executive Management Committee and the Infection Control committee.

Performance will be reported to the public and the Trust Board through the Clinical Quality Report.

Monthly data will be submitted to Public Health England.

Priority 3- Effectiveness- Improve Outcomes: Improve staff engagement (involvement)

Why did we choose this?

Staff engagement is a measure of staff satisfaction, involvement and motivation at work. Research shows that there is a clear link between satisfied and involved staff and the quality of patient care they deliver. Not only does the evidence tell us that highly involved and empowered staff generate better outcomes for patients but that there are further benefits such as: improved quality of services, reduced patient mortality, improved staff health and well-being, lower levels of sickness absence and greater financial effectiveness.

What are we going to do?

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What have we done so far?

In 2011, we developed a set of four core values “Caring, Safe, Responsible and Valuing Each Other” which have been agreed with staff and patients, to underpin everything we do at the Trust. We have described the behaviours that reflect these values in everyday practice so that our approach is consistent across the Trust and patients and our staff know what to expect. We have been working to embed these values through appraisal, training and development and improved people management (how staff are managed and teams developed). As a result, the Trust saw improvements in staff satisfaction in the 2012 NHS staff survey.

What are we going to be doing?

1. Ensure all our staff have clear objectives, an appraisal and a personal development plan reflecting the Trust’s objectives and values
2. As part of the appraisal process, we will be implementing a system that measures every manager and supervisor’s people management skills and enables improvement where necessary. Also, the provision of management and leadership training.
3. Clarifying the role of team working in delivering safe, effective high quality care- identifying the membership of teams and the importance of providing mechanisms and times for them to meet to reflect on performance and improvement.

Priority 3 (continued) - Effectiveness- Improve Outcomes: Improve staff engagement (involvement)

How will progress be reported?

Internal appraisal rates, the staff survey action plan and progress on translating the Trusts values into everyday behaviours will be reported through the Trust Executive Management Committee and the Workforce Committee.

Performance will be reported to the public and the Trust Board through the Trusts Quarterly Workforce report.

Priority 4- Patient Experience: Listen and respond to patient feedback

Why did we choose this?

To improve waiting times for patients in the Outpatient Department (waiting to be seen/waiting for results of tests)

What have we done so far?

We already have a wide ranging action plan of activities to improve patient experience. The Outpatients Improvement Group has met on six occasions and the meeting is chaired by the Ambulatory Care Divisional Manager, supported by the productivity team and Patient Experience Improvement Manager. The nursing staff within Outpatients also held a workshop to identify rapid ways of improving patient experience.

What are we going to be doing?

We will implement the action plan that the Improvement team have been developing. We will also implement the Friends and Family Test (ahead of the national timetable) and review the results of patient feedback- with a specific focus on experience of waiting times. We will use this feedback to shape our actions in the coming year.

How will we track progress?

We will report and publish our monthly FFT score on our website and on the NHS Choices website. We will publish the feedback from our FFT responses on the patient information boards in all the areas where the FFT is implemented.

How will progress be reported?

At the Patient Experience Committee and bi- monthly at the Trust Board.

Thank you for taking the time to read our Quality Account Summary. If you are interested in reading in more detail about how we deliver quality services at Kingston Hospital NHS Foundation trust, you can find the full version here: <http://bit.ly/1c6e0Rm>

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