

Working with people to provide a positive experience of care using 'Special Measures' -Audits

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Deputy Director of Nursing

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Context

- **We own and run 4 hospitals:**

Epsom Hospital

Sutton Hospital

St Helier Hospital

Queen Mary's Hospital for children

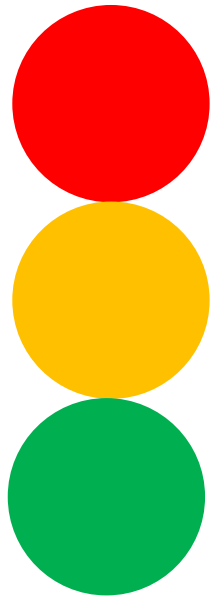
We also have nine renal centres throughout the area, as well as the Elective Orthopaedic Centre (EOC)

Background

- Continued high number of C.difficile across the Trust in 2011 / 2012
- Risk of breach of annual target
- All assurances in use at time not making significant impact
- Our Chief Nurse introduced special measures tool

Special Measures Audit Tool

- Measuring ward based clinical practice
- Commenced with wards who had either C.difficile case or bacteremia then as quality audit
- Strong leadership
- Clear feedback to staff
- Sharing and agreeing actions



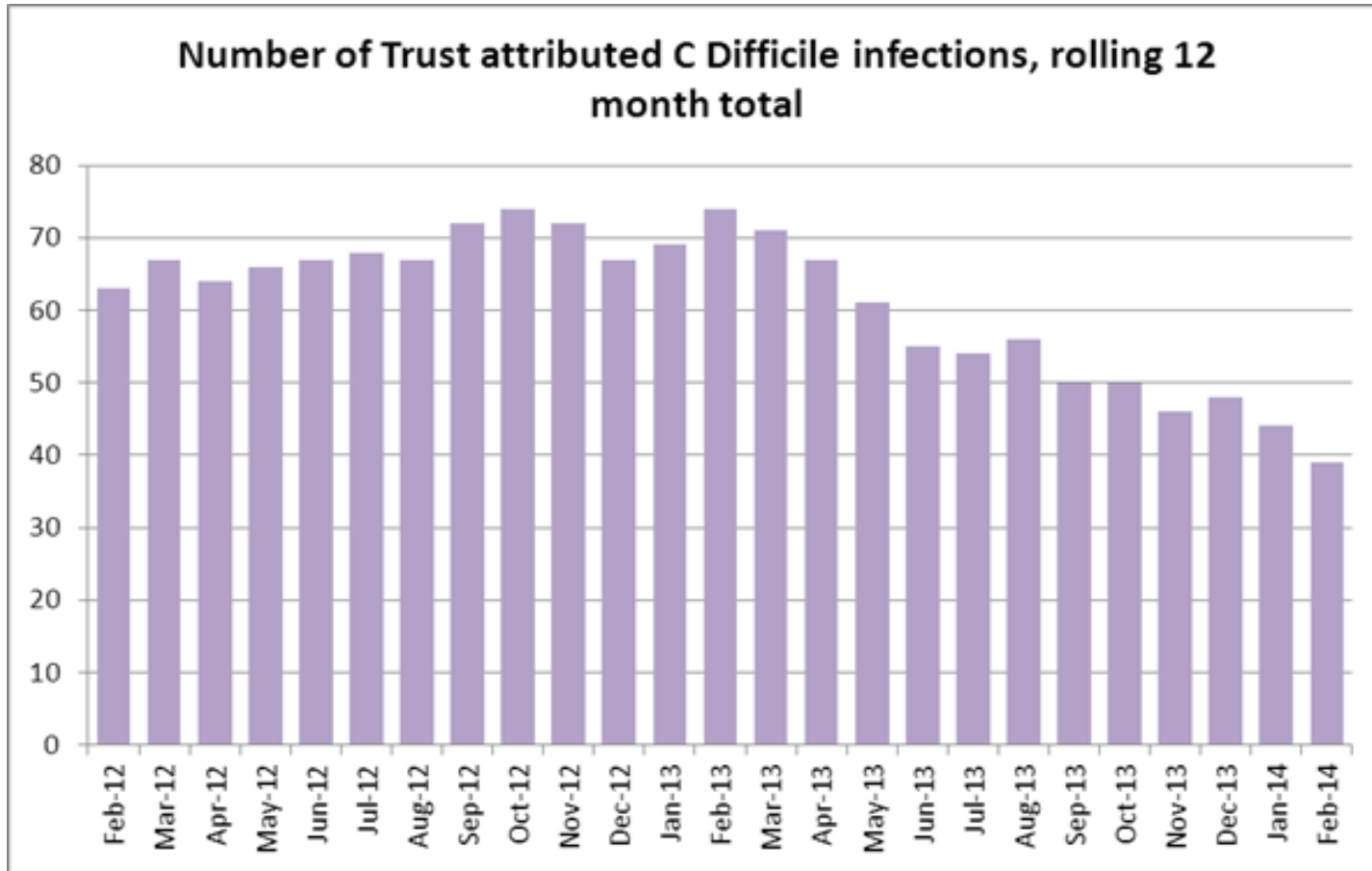
Infection Control

AUDIT SCORES FOR WARDS IN INFECTION CONTROL SPECIAL MEASURES

> 85%	Compliant
76% to 84%	Partial Compliance
< 75%	Minimal Compliance

Week	Date Special Measures undertaken	Reason for special measures	Date Special Measures stopped	Management of pts with diarrhoea	Number of patients with diarrhoea and number compliant with all 8 standards	Commode Cleanliness	Bedpan cleanliness	Other equipment cleanliness	Daily documentation n: Equip cleaning book Chlorclean record Bedpan washer record	Peripheral Cannulae	Number of patients with peripheral cannulae and number compliant with all 6 standards	Urinary Catheter Care	Number of patients with urinary catheters and number compliant with all 3 standards	Patient hand hygiene wipes	Staff hand hygiene undertaken	Staff hand hygiene correct technique used	Overall% compliance	For wards in special measures date of last confirmed Cdff infection
1	27/11/2012			0%		0%	100%	100%	100%	60%		33%		80%	30%	30%	53%	03/12/2012
1	04/12/2012			0%		100%	100%	60%	0.0%	20%		33%		0%	80%	60%	45%	05/12/2012
2	04/12/2012			40%		75%	100%	50%	100%	60%		33%		60%	50%	40.0%	61%	
2	11/12/2012			0%		100%	100%	100%	66%	40%		33%		10%	40%	10%	50%	
3	11/12/2012			75%		100%	100%	90%	100%	0%		100%		10%	70%	50%	76%	
1	18/12/2012			40%		0%	89%	50%	66%	0%		100%		100%	40%	30%	52%	18/12/2012
4	18/12/2012			0%		100%	100%	80%	100%	40%		100%		80%	60%	20%	68%	
3	19/12/2012			0%		100%	75%	60%	66%	60%		100%		70%	40%	40%	61%	
2	24/12/2012			0%		60%	100%	60%	0%	75%		0%		90%	80%	70%	54%	
5	27/12/2012			20%		100%	100%	100%	100%	40%		75%		70%	100%	80%	79%	
4	28/12/2012			50%		75%	100%	70%	66%	60%		33%		100%	80%	80%	71%	
3	02/01/2013			n/a		66%	77%	60%	66%	0%		75%		90%	70%	50%	62%	
5	03/01/2013			25%		100%	85%	40%	66%	55%		80%		70%	80%	50%	65%	
6	04/01/2013		04/01/2013	100%		100%	100%	90%	100%	50%		100%		70%	80%	70%	86%	
Compliant score altered from > 90% to > 85% (see key above)																		
6	08/01/2013			0%		100%	100%	100%	66%	100%		100%		100%	50%	50%	77%	
4	08/01/2013			n/a		60%	100%	90%	100%	100%		100%		100%	90%	80%	91%	
1	15/01/2013			50%		60%	100%	60%	100%	0%		66%		90%	80%	60%	67%	05/01/2013
1	15/01/2013			n/a		75%	100%	60%	100%	50%		100%		20%	50%	30%	65%	14/01/2013
1	16/01/2012			0%		0%	88%	90%	0%	0%		50%		60%	50%	20%	36%	15/01/2013
7	17/01/2013			44%		100%	100%	80%	66%	80%		100%		80%	60%	40%	75%	
1	18/01/2013			20%		100%	100%	90%	100%	33%		n/a		100%	63%	38%	71%	15/01/2013
2	22/01/2013			0%		100%	100%	100%	33%	33%		100%		100%	80%	70%	72%	
1 (again)	22/01/2013			n/a		100%	100%	40%	100%	33%		100%		80%	80%	80%	76%	20/01/2013
2	22/01/2013			66%		100%	100%	50%	100%	0%		100%		70%	60%	50%	70%	
2	23/01/2013		23/01/2013	80%		100%	100%	80%	100%	75%		100%		100%	90%	80%	91%	
2	24/01/2013			0%		100%	100%	90%	100%	0%		100%		90%	90%	70%	74%	
3	29/01/2013			50%		100%	100%	80%	100%	25%		0%		50%	70%	60%	64%	
3	29/01/2013			25%		100%	100%	90%	100%	33%		75%		100%	60%	50%	73%	
3	31/01/2013		31/01/2013	100%		75%	100%	40%	66%	75%		100%		100%	90%	70%	82%	
4	05/02/2013			50%		100%	86%	70%	100%	40%		100%		100%	70%	70%	79%	
4	05/02/2013		05/02/2013	50%		100%	100%	100%	100%	20%		100%		100%	70%	70%	81%	
10 post action plan	07/02/2013			0%		25%	100%	80%	66%	60%		100%		100%	90%	90%	71%	
11 post action plan	12/02/2013			100%		25%	100%	80%	66%	33%		80%		100%	80%	70%	73%	

Our Progress





Communicating progress-our audience

- Our staff
- Trust executive committee
- Trust board
- Patients, carers and loved ones
- External stake holders
 - Healthwatch
 - Local Representatives Panel

Communicating progress

- Trust Executive board members undertook special measures audit
- Trust executive board monthly paper
- Senior team brief
- E-update
- Trust website
- Matron /Ward Manager meeting

Way forward

- Embed tissue viability special measures audit
- Embed nutrition special measures audit
- Implement and embed documentation special measures audit



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