

QUALITY AND PERFORMANCE STANDARDS FOR THE CCG

Bolton Hospice





January – March 2019





























Bolton Hospice
caring from the heart
















QUALITY PERFORMANCE INDICATOR		APR – JUN 2018		JUL – SEP 2018		OCT – DEC 2018		JAN – MAR 2019				
Activity Inputs and Outcomes												
Number of Referrals received per quarter/year		203		202		183		196				
Referral broken down by referral source												
GP Practice		Dr. Ariff	2		Dr. Coleman	1		Dr. Barua	1		Dr. Ariff	1
		Dr. Barua	1		Dr. Birkinshaw	1		Dr. Hill	6		Dr. Barua	1
		Dr. Bhatiani	1		Dr. Brown	1		Dr. Hague	2		Dr. Bax	1
		Dr. Chan	1		Dr. Fiske	1		Dr. Malhotra	1		Dr. Bradford	1
		Dr. Coleman	1		Dr. Dysart	1		Dr. Mercer	1		Dr. Coleman	1
		Dr. Cross	2		Dr. Hill	1		Dr. Mistry	1		Dr. Douglas	1
		Dr. Dysart	1		Dr. Hague	2		Dr. Page	1		Dr. Fiske	1
		Dr. Faulkner	1		Dr. Jain	2		Dr. Tran	1		Dr. Green	2
		Dr. Hall	1		Dr. Kirby	1		Dr. Shaw	2		Dr. M. Hall	2
		Dr. Hill	2		Dr. Mercer	2		Dr. Silvert	1		Dr. S. Hall	1
		Dr. Mercer	2		Dr. Ogden	1		Dr. Webster	2		Dr. Hill	1
		Dr. Mirza	1		Dr. Rafferty	1		Dr. Tabor	1		Dr. Hendy	1
		Dr. Tabor	1		Dr. Tran	1		Dr. Wright	1		Dr. Jain	1
		Dr. Tran	2	22	Dr. Tomkinson	2	21			35	Dr. Jeena	1
		Dr. Tomkinson	1		Dr. Uddin	1					Dr. Khan	1
		Dr. Van Spelde	1		Dr. Whittaker	3					Dr. Malhotra	2
		Dr. Webster	2								Dr. Mercer	1
											Dr. Mirza	1
											Dr. Perry	2
											Dr. Pillon	2
											Dr. Saunders	3
											Dr. Selvarajan	1
											Dr. Webster	1
										Dr. Tabor	1	
										Dr. Whittaker	2	
										Dr. Wright	2	
Number of referrals by District Nurse Team for Hospice at Home		Hub 1	3		Hub 1	5		Hub 1	11		Hub 1	6
		Lisa Cheetham	1		Julie Derbyshire	3		Victoria Avison	3		Rizwana Adia	1
		Julie Derbyshire	2		Julie Bentham	2		Elaine Berry	2		Victoria Avison	2
								Julia Derbyshire	3		Julie Derbyshire	3
								Lisa Cheetham	2			
								Joanne Simpson	1			
		Hub 2	5		Hub 2	4		Hub 2	1		Hub 2	4
		Donna Richardson	5		Rushanara Khanom	2		Rushanara Khanom	1		Janet Hailwood	2
					Rizwana Adia	1					Julie Bentham	1
					Donna Richardson	1					Rushanara Khanom	1
		Hub 3	3	28	Hub 3	10	32	Hub 3	9	39	Hub 3	13
		Julie D'Attore	2		Julie D'Attore	3		J Corbett	1		Julie D'Attore	1
		Carole MacDonald	1		Tracey Hayes	3		Tracey Hayes	2		Tracey Hayes	4
					Simone Scholes	1		Victoria Pytlasinski	3		Carole Macdonald	1
					Carole MacDonald	3		Emma	2		Victoria Pytlasinski	1
								Carole MacDonald	1		Natalie Whelan	5
										Simone Scholes	1	
	Hub 4	5		Hub 4	6		Hub 4	6		Hub 4	2	
	Melissa Barker	1		Melissa Barker	2		Cheryl Taylor	1		Joanne Simpson	1	
	Joanne Simpson	1		Joanne Simpson	2		Joanne Simpson	1		Nicola Walsh	1	
	Rachel George	3		Natalie Whalen	1		Natalie Whelan	1				
				Rachel George	1		Rachel George	3				

- Hub 1 – Horwich/Avondale
- Hub 2 – Waters Meeting/Egerton
- Hub 3 – Brightmet/Crompton
- Hub 4 – Pikes Lane/Westhoughton
- Hub 5 – Great Lever/Little Lever/Farnworth

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Number of referrals by District Nurse Team for Hospice at Home (Cont'd ...)	Hub 5	5	Hub 5	7	Hub 5	5	Hub 5	8
	Lynn Harding	1	Christine Beswick	2	Dawn Magee	1	Julie Jones	2
	Kirsty Holden	1	Dawn Magee	1	Angie McEwing	2	Dawn Magee	1
	Julie Jones	2	Angie McEwing	1	Vicky Fletcher-Sim	1	Kevyn Massey	3
	Kevin Massey	1	Vicky Fletcher-Simm	1	Kelly	1	Vicky Fletcher-Simm	2
			Kirsty Holden	1				
			Kevin Massey	1				
	Unidentified	7	Unidentified	6	Unidentified	0	Unidentified	6
Hospital	28		33		26		35	
Other	5		2		5		3	
Macmillan	112		94		85		79	
Physio	5		3		10		3	
Occupational Health	2		10		4		2	
Activity broken down by service	Professionals	Carers	Professionals	Carers	Professionals	Carers	Professionals	Carers
• 24 hour advice line	41	45	32	27	27	28	22	30
<i>Patient known to the Hospice</i>								
<i>Patient not known to the Hospice</i>	14	4	16	14	16	10	9	11
• Inpatient								
• Day Unit	Copy of 1st Quarter - April - June 2018.xl		Copy of 2nd Quarter - July - Sept		Copy of 3rd Quarter - October - Decemb		Copy of Final Quarter - January - M	
• Outpatients								
• Hospice at Home								
Activity Inputs and Outcomes								
Unplanned admissions and number of deaths in hospital from onward referral from the Hospice <i>The intention is to contribute to Health Economy high level target 35% of deaths at home.</i>	2 unplanned admissions 1 x Sepsis 1 x required EMI/Bed		0 unplanned admissions		0 unplanned admissions		1 unplanned admission - obstruction.	
Percentage of HaH Patients died in PPC.	100%		100%		100%		100%	
Advance Care Planning	30/30 had ACP/PPC		26/26 had ACP/PPC		15/25 had ACP/PPC		13/16 had ACP/PPC	
Resuscitation Status	30/30 had resuscitation status		26/26 had resuscitation status		21/25 had resuscitation status		15/16 had resuscitation status	
Preferred Place of Death	-		17/26 had PPD		11/25 had PPD		12/16 had PPD	
NHS Safety Thermometer (Report includes all reportable Harms throughout whole quarter)								
• Number Falls	No Harm	6	No Harm	1	No Harm	2	No Harm	3
	Low Harm	3	Low Harm	4	Low Harm	2	Low Harm	3
	Moderate Harm	0	Moderate Harm	0	Moderate Harm	0	Moderate Harm	0
	Severe Harm	0	Severe Harm	0	Severe Harm	0	Severe Harm	0
	Death	0	Death	0	Death	0	Death	0
• Number Pressure Ulcers	Grade 1	0	Grade 1	0	Grade 1	0	Grade 1	0
	Grade 2	0	Grade 2	4	Grade 2	2	Grade 2	4
	Grade 3	0	Grade 3	0	Grade 3	0	Grade 3	0
	Grade 4	0	Grade 4	0	Grade 4	0	Grade 4	0
		1		0		1	Ungradable	1
• Number UTIs	3		4		0		1	
• Number of VTE Risk Assessments	100%		100%		100%		100%	

QUALITY PERFORMANCE INDICATOR	APR – JUN 2018	JUL – SEP 2018	OCT – DEC 2018	JAN – MAR 2019
Number Health Care Acquired Infections				
MRSA	0	0	0	0
CDiff	0	0	0	0
Safeguarding Referrals	1	4	3	2
Deprivation of Liberty Applications	0	1	1	2
Sharps Injury	1	0	0	0
Service User Experience / Patient Satisfaction Surveys	 IWGC - April 2018.pdf  IWGC - May 2018.pdf  IWGC - June 2018.pdf  Survey Comments - Apr-Jun 2018.docx	 IWGC - July 2018.pdf  IWGC - August 2018.pdf  IWGC - September 2018.pdf  Survey Comments - Jul-Sep 2018.docx	 IWGC - October 2018.pdf  IWGC - November 2018.pdf  IWGC - December 2018.pdf  Survey Comments - Oct-Dec 2018.docx	 January 2019.pdf  February 2019.pdf  March 2019.pdf  Survey Comments - Jan-Mar 2019.docx
Relatives' Satisfaction Survey 'on End of Life Care' received on IPU	Due end of September 2018	 Care at the End of Life Survey of Relativ  Comments - Care at the End of Life Surve  End of Life Care Relatives Survey - IPI	Due end of March 2019	 Care at the End of Life Survey of Relativ  End of Life Care Relatives' Survey IPU
Relatives' Satisfaction Survey 'on End of Life Care' received from Hospice at Home	Due end of September 2018	 Care at the End of Life Survey of Relativ  Comments - Care at the End of Life Surve  End of Life Care Relatives Survey - H/	Due end of March 2019	 Care at the End of Life Survey of Relativ  End of Life Care Relatives' Survey Hal
Complaints and Compliments				
• Number of complaints/ concerns	Formal - 0 / Informal - 0	Formal - 1 / Informal – 6 1. Family sent email following verbal concerns to CND. They feel that the care of their mum was inadequate and her final day was undignified. 1. A relative verbally complained about the attitude of night porter who asked her to leave the family space as this required cleaning and was available to other relatives. She felt he came across very rude and abrupt. 2. Patient stated syringe driver site was not changed and was painful to touch. 3. Family of recently deceased patient raised concerns about missing property and volunteers' behaviour outside the patient's room during the end of life stage and after death. 4. Staff member contacted CND on a Saturday evening in relation to a patient's husband making accusations to members of staff regarding the care of his wife.	Formal - 1 / Informal – 0 Family (as per previous quarter) have now sent in a formal complaint as per Hospice protocol. Requested further information on lessons learned.	Formal - / Informal – 2 1. Daughter requested Analgesia and Lorazepam for patient. When SN attended, patient appeared settled and asleep. Daughter insistent patient should have medication. Nurses utilised Abbey Pain Score and verbally asked patient if he had pain, which he denied. Daughter became very angry at this point, accusing nurses of calling her a liar. 2. Formal letter received 27.02.19., in relation to care received by a deceased patient and husband.

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Complaints and Compliments				
Number of complaints/concerns (cont'd ...)		<ol style="list-style-type: none"> 5. Family member made a complaint against a member of the Porter team. Felt he was abrupt when asking to take the dogs out of the Hospice as they were disturbing other patients. 6. When family came to collect death certificate they expressed their thanks for the care received however, mentioned that at times noise from the kitchen area from volunteers was at times inappropriate, loud and occasionally discussing confidential issues. 		
<ul style="list-style-type: none"> • Subsequent Resolutions/Actions Undertaken 		<ol style="list-style-type: none"> 1. CND wrote a formal letter of apology for any distress caused with a copy of the Complaints Procedure. No formal complaint received at time of report 02/10/18. 1. A verbal apology was given and advised of our formal complaints procedure. Senior Nurses and porter made a verbal apology to the relative. He had interpreted an email sent out by the CEO that the family space should be made available to everyone. 2. Nurse apologised to patient for any distress/harm caused. Reinforced syringe driver sites must be checked and recorded and re-siting is required as soon as site becomes red and inflamed. 3. Advised full investigation would take place. Missing property located. Notices put up in volunteers' kitchen areas explaining the need for sensitivity. Husband of patient to discuss issues with the Medical Director and the Spiritual Bereavement Lead. 4. CND arrived on site at 6.30am the following morning and spoke to both night and day staff and listened to all concerns raised. Full apologies given and a consistent approach to patient care discussed with wider team. 5. Porter seen by Line Manager, made aware that he can come across abruptly at times. Even though this is not his intention, advised in future to report all issues to nurse in charge. 6. Apologised and asked if he wanted to make a formal complaint but he said no. Notices placed in kitchen areas and volunteers emailed directly and updated about the complaint. 	<p>CEO has written letter of apology answering all concerns raised in written report as requested by complainant. We await further correspondence from family and will keep the CCG up to date.</p>	<ol style="list-style-type: none"> 1. Relative was seen by senior staff. At this stage she stated she wanted to make a formal complaint against the nurses, however, she later declined and we treated it as an informal complaint. Spoke with Service Lead following patient's death some days later and she was still upset about the event. Reassured her that both nurses were seen and apologised for any upset this incident has caused. 2. Letter given to CND who read through and spoke with the Macmillan Team as the concern was in relation to the attitude of a Macmillan Nurse. Scanned letter and sent to RBH for their attention. Courtesy phone call and letter sent informing the husband that it will be dealt with by the Macmillan Nurse's Manager.
<ul style="list-style-type: none"> • Number of Compliments 	64 Thank You Cards/Social Media	93 Thank You Cards / Social Media	133 Thank You Cards / Social Media	95 Thank You Cards / Social Media

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Activity Inputs and Outcomes								
Serious Incidents (SIs)	Total No. of Incidents reported	34	TOTAL NO. OF INCIDENTS REPORTED	66	TOTAL NO. OF INCIDENTS REPORTED	46	TOTAL NO. OF INCIDENTS REPORTED	60
	Clinical Incidents	19	Clinical Incidents	30	Clinical Incidents	30	Clinical Incidents	31
	Non-clinical Incidents	15	Non-clinical Incidents	36	Non-clinical Incidents	16	Non-clinical Incidents	29
	Total No. of Serious Untowards Incidents	0	Total No. of Serious Untowards Incidents	0	Total No. of Serious Untowards Incidents	0	Total No. of Serious Untowards Incidents	0
	Reportable CD Errors to NHS England Local Intelligent Network	3	Reportable CD Errors to NHS England Local Intelligent Network	6	Reportable CD Errors to NHS England Local Intelligent Network	0	Reportable CD Errors to NHS England Local Intelligent Network	1
Clinical Governance Newsletter	 Clinical Governance Newsletter - Apr - Jun		 Clinical Governance Newsletter Q2 2018.		 Clinical Governance Newsletter Q3 2018.		 Clinical Governance Newsletter Q4 2018-	
Improving Productivity (will include activity for quarter 2 and quarter 3)	 Database - Apr - Jun 2018.xlsx		 Database - July - September 2018.xlsx		 Database - Oct-Dec 2018.xlsx		 Database - Jan - Mar 2019.xlsx	
CQC Inspection Registration Certificate and Inspection Reports	Provider Visit taken place 26.06.18.		 Provider Visit Report - 26.06.18. in  STAFF OPINION SURVEY RESULTS inc		 Our 2018 Achievements.pdf		<ul style="list-style-type: none"> • Provider Visit - 09.04.19. Report next quarter. • Met with future CQC Inspectors – evidence produced. 	
Future Developments Plans	<ul style="list-style-type: none"> • Piloting covert medication best interest form. • Attended education session on End of Life Care in Prisons and for homelessness. • Dr. Neil Pender started in post. • Plans to upgrade staff welfare facilities. • Re-branding Day Therapy. 		<ul style="list-style-type: none"> • Schwartz round implemented – excellent attendance and feedback • Audited Special Patient Palliative Care notes on Adastra - fed back results to CCG. To pilot prompting GP for HaH patients. • KPIs set for workforce strategy • Exploring role of ANP in the hospice. • Advertising 3 day consultant post to take BHSS forwards. • Appointed into speciality doctor posts 		<ul style="list-style-type: none"> • CND retiring at the end of May 2019. Interviews being undertaken. • Appointed Hospice Consultant. • Daily hub wins NHS Bolton Collaboration Award. • MCISS won Macmillan Excellence Award for integration. • Bolton Hospice Education Team won Dying Matters Award for Childhood Bereavement Courses. • ACP Training to 200 staff in Bolton, more planned in 2019. 		<ul style="list-style-type: none"> • New CND commencing on 15.04.19. • Child Family Bereavement Support Group ran at the weekend. • Hub person-centred celebration launch event. • Care Home Launch. • Presented collaborative working of Pal Care Strategy to the Exec Board, CCG. • Potential chemotherapy - Christies. • Masonic funding for adolescence bereavement. • Bolton Hospice Educators guest speakers at the Dying Matters 2019 Conference. 	
Promotion of Service Targeted BME Population	Held session at the Hospice to celebrate and learn about Ramadan and Eid. Iman provided education and training on EoLC for Islamic patients and their families.		Mandatory Equality, Diversity and Inclusion training commenced for staff. Held Pride Event in the Hospice. LGBT training session on EoLC developed and delivered within the Hospice - well attended.  Feedback from LGBTQ 28.09.18..xlsx		<ul style="list-style-type: none"> • Mandatory Equality, Diversity and Inclusion Training underway. • Raising awareness of challenges faced by transgender people – session held for staff and volunteers. 		<ul style="list-style-type: none"> • Mandatory Equality Diversity and Inclusion Training underway. • Under-represented groups training session Learning Disabilities. 	
Quality Accounts	Quality Accounts 2018-2019		 Progress Report on Quality Account - 20		 Progress Report on Quality Account - 20		 Progress Report on Quality Account - 20	