

Quality Accounts Data Sets – Bedford Hospital NHS Trust

Quality Account 2015/16		
Priority	Targets	RAG
Patient Safety Priority: continued reduction of the incidence of avoidable harm experienced by our patients whilst receiving care and treatment at the trust	Zero MRSA blood infections	One MRSA blood infection reported in April 2015
	Less than ten hospital-apportioned <i>Clostridium difficile</i> infections	23 cases hospital-apportioned <i>Clostridium difficile</i> infections
	Less than 17 hospital acquired avoidable grade 2 pressure ulcers and nine hospital acquired grade 3 pressure ulcers	10 hospital acquired avoidable grade 2 pressure ulcers 6 hospital acquired grade 3 pressure ulcers
	95 percent venous thromboembolism (VTE) assessment rate	95.16%
Patient experience priority: improve the information the trust provides to patients and their relatives when they leave hospital.	Implement the 'Helping You Plan to Leave Hospital' information booklet for all inpatients.	The trust has partially achieved this target. All patients on elderly frail wards receive the booklet with a covering letter explaining how the discharge team can help patients and their families. The trust discharge planning team is responsible for ensuring patients on the elderly frail wards receive the booklet and appropriate support. This is monitored by the trust's lead matron for discharge. The trust plans to roll out the use of the booklet to all wards in 2016/17.
	Implement a discharge information pack (the Place of Discharge Toolkit) tailored to meet the needs of patients with more complex discharge requirements will be implemented across the Trust.	The trust provide patients and their carers and relatives with an information pack that guides them through the complex process of finding new nursing and residential homes. This pack is due to be updated in 2106/17 to be compliant with the new requirements of the Care Act 2015 and new social care charges. We also include a leaflet for the Bedford Hospital carers lounge which provides free and independent support and advice.
Clinical Effectiveness Priority: introduce the Hospital at Home service to help reduce the length of stay of patients who do not need to be in hospital to receive their care and treatment.	Recruit two whole time equivalent (WTE) band 6 nurses to the Hospital at Home Service	The trust were unable to achieve the additional funding required for the posts in 2015/16, however we were able to flex the service based on patient demand and we were often able to increase the virtual ward to 10 or more beds. The trust has introduced a 'patient tracker' system for patients under the complex discharge team. This allows the team to support patients as they move through the hospital until discharge. The system also provides greater transparency for our partners as this provides a daily picture of patients who are fit for discharge yet remain in hospital.

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Quality Account 2016/17		
Priority	Targets	Measurement
<p>Patient Safety Priority: Improve learning following never events, incidents and complaints to prevent avoidable harm</p>	<p>Develop and implement the trust's learning framework and demonstrate improved learning from incidents, never events and complaints across all staff groups</p>	<p>This improvement priority links directly with a CQC requirement notice. Progress against the detailed action plan will be monitored by the Governance work stream and reported to the trust's Quality Board on a monthly basis.</p>
<p>Patient Experience Priority: Build on good practice in maintaining privacy and respecting outpatient areas and to further improve the range of patient information in languages other than English.</p>	<p>To ensure patients have their outpatients and emergency consultation provided with privacy and respect by ensuring that measures are taken to ensure private conversations are not overheard.</p>	<p>The trust will develop a performance metric (e.g. percentage of information leaflets available in translation) and report quarterly via established quality monitoring framework to the Quality Board.</p>
	<p>To further extend access to patient information that meets their language needs.</p>	<p>The trust will develop a performance metric (e.g. percentage of information leaflets available in translation) and report quarterly via established quality monitoring framework to the Quality Board.</p>
<p>Clinical Effectiveness Priority: Benchmark clinical outcomes of care to drive improvement for patients</p>	<p>For all national audits where patient outcomes are below average, the trust will develop and implement action plans to improve patient outcomes</p>	<p>Each division will receive a monthly report (contained with the Clinical Quality Portfolio) detailing annual reports received, due date for action plans, clinical lead and progress in implementing actions</p> <p>Divisions will report upwards to the trust's Quality Board</p>