

NHS Safety Thermometer

Mini Case Studies and Contacts

Go online to www.harmfreecare.org to view the [NHS Safety Thermometer 10 Steps to Success](#) and read [more case studies](#)

Birmingham Community Health Care NHS Trust worked with the QIPP Safe Care team to test the NHS Safety Thermometer throughout its pilot. Nurses collect data across their community hospitals, intermediate care units, district nursing case loads and learning disability providers. They understand the importance of using the data for improvement and triangulating it with other data sources. Staff have found great benefit to printing the graphical data out for more detailed analysis. Contact Julie Jones, Patient Safety Lead, with any questions about this approach: Julie.j.jones@bhamcommunity.nhs.uk (0121 4667061)



At **Lancashire Teaching Hospitals NHS Foundation Trust** the flag and tag options on the NHS Safety Thermometer are being used innovatively on each ward to engage staff from different specialties with collecting data on the four harms. The flag and tag options allow you to collect extra local data in addition to the information already collected on pressure ulcers, falls, urine infection (in patients with a catheter) and new VTE. Staff have found that collecting the data on one day each month has highlighted areas for improvement and simultaneously raised awareness of the harms. For more information contact Paula Nuttall, Clinical Risk Coordinator: paula.nuttall@lthtr.nhs.uk (01772 522725)

The Rotherham NHS Foundation Trust (*NHS QUEST member*) has adopted an innovative and effective way of collecting the data. They collect the data on a paper form at the point of care via their 'Community to Board' assessment process. On the 2nd Tuesday of every month, all wards complete the preformatted data collection form that includes NHS Safety Thermometer and also other quality indicators. From April 2012, the aim is for all community staff to complete the form for every patient seen by community teams on the same day. The form is then scanned into an automatic download system. Reports are then formulated via an SQL server programme to allow same-day 'real time' feedback to staff. All staff have the ability to drill down to raw data levels and compare their progress with each other and against Trust wide averages. The data is then upload directly to the NHS Safety Thermometer central database at the NHS Information Centre. The process really focuses nursing staff on their key safety issues and identifies areas for action almost 'real-time'. If you would like to find out more about this contact Patricia Bain, Director of Quality, patricia.bain@rothgen.nhs.uk (01709 307389)



Since first piloting the NHS Safety Thermometer in November 2011 **Suffolk Community Healthcare** have now implemented the tool within four in-patient community hospitals and in over 30 community nursing teams. Despite some initial IT challenges, staff are now engaging very positively with the tool, enabling collection of data on 100% of patients every month. Data collection was achieved most effectively when it was collected by frontline nursing staff and then entered and submitted by administrative staff experienced with IT. Training of staff is on-going to ensure continued timely and accurate data collection, input and submission. Over the next year, work is continuing to further rollout the implementation of the tool and triangulate it with other audit data. Details of this approach are available from Sarah Miller: sarah.smiller@suffolkpct.nhs.uk (01449 776617/ 07940 443973)



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West Middlesex University Hospital NHS Trust are another organisation who have been collecting data on 100% of patients for some time. When wards were asked to find the best way of incorporating data collection in to the daily work flow, surgical wards decided to collect the data at handover. This was found to be an effective way to collect data and was spread across the Trust. West Middlesex have also been committed to working together with their community providers to measure and improve services. For more information on collecting data during handover and working with your community teams contact Shan Jones, Director of Quality Improvement shan.jones@wmuh.nhs.uk, (0208 321 2507) or Judith Kay, Locality Manager **Hounslow and Richmond Community Healthcare** Judith.Kay@hrch.nhs.uk (0203 299 1619)



South Essex Partnership Trust implemented the NHS Safety Thermometer during the pilot across community services including community district nursing, community hospitals and mental health services for elderly care. The majority of these teams submitted via use of the Safety Thermometer excel platform, but a few teams used the paper system. The Trust has a brilliant proactive approach to collecting the data and understands why this is important. They have been successful in engaging community staff and have worked closely with their audit department to ensure that the data is valid, understood and useful for the organisation. If you want to talk to a team with a proactive approach to using the NHS Safety Thermometer in the community contact Sarah Browne, associate director of clinical governance and quality sarah.browne@sept.nhs.uk (0300 123 0808) or Jodie O'Regan, performance assistant Jodie.O'regan@sept.nhs.uk (0300 123 0808).

There is also a case study available at <http://www.harmfreecare.org/resources/nhsst-10steps/>

North East London Community Services are one of our most experienced community organisations with using the NHS Safety Thermometer. They are experienced at engaging community staff in the data collection through various community services. Contact Beth Maryon, Practice Development Manager, Beth.Maryon@nelft.nhs.uk (01708 465781) if you would like tips on implementing the tool in the community.

There is also a case study available at <http://www.harmfreecare.org/resources/nhsst-10steps/>



East Lancashire Hospitals NHS Trust were one of the first organisations to use the NHS Safety Thermometer on 100% of patients each month. They have a fantastic approach to measuring harm and understand the utility in front line nurses collecting data at the point of care. The senior nursing team have a great relationship with the analytics team which has helped them understand and make the most of the data collected. For more information contact John Goodenough, Deputy Director of Nursing, john.goodenough@elht.nhs.uk (01254 733698) or Peter Weller - Associate Director Patient Safety & Governance, peter.weller@elht.nhs.uk (01254 263555)

At **Salford Royal NHS Foundation Trust** (*NHS QUEST member*) data is collected by nurses at the point of care. The survey is carried out at the same time as the senior nurse walk round which gives an added element of senior leadership support to the data collection. Nurses have said that time taken to collect the data is value added and an important part of patient care. Contact John Bellerby, quality improvement lead, John.Bellerby@srft.nhs.uk (0161 206 2248) if you would like to learn more about Salford Royal's approach to using the NHS Safety Thermometer.



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Ward managers at **South Tees Hospital NHS Foundation Trust** (*NHS QUEST member*) have all found different ways of making the NHS Safety Thermometer data collection part of the daily work flow, staff development and patient care. Some wards collect data as part of an intentional round whilst others use the tool for education and development; time is spent with nurses as they collect the data, discussing the care they are giving and the four harms. The Trust has reached 95% 'harm free' care on pilot wards. They present their data regularly to their board and have started work to understand different measurement systems and triangulate their data. Contact David Charlesworth, senior practice development nurse, to discuss the approach South Tees have taken in more detail david.charlesworth@stees.nhs.uk (01642 850850)



At **Wrightington, Wigan and Leigh NHS Foundation Trust** (*NHS QUEST member*), data was initially collected by members of the corporate nursing team (Quality & Safety Matrons etc). This is an approach many organisations may be tempted to take in the beginning. However, they found that in order to use the tool to collect data on one day on 100% of patients it was much more effective to ask nurses to collect data at the point of care.



This approach made measurement part of the daily work flow and allowed immediate improvements in patient care to be made. Contact Linda Smyth, linda.smyth@wwl.nhs.uk, (0194 277 3338) to find out how they made the transition.



Nottingham University Hospitals found a way of engaging with the medical school students by asking them to use the NHS Safety Thermometer, via Open School Nottingham (an IHI Patient Safety Chapter). A team of students were recruited to undertake the monthly data collection. They were provided with an opportunity to shadow the ward nurses to understand how the data collection and tool were used. The relationship with the Safety Chapter is reciprocal and there is also a patient safety evening for students with a talk from the Deputy Medical Director and consultants. If you would like to know more about how to approach working with safety chapters contact Wayne Robson, Patient Safety Programme Lead, wayne.robson@nuh.nhs.uk (0115 969 1169)

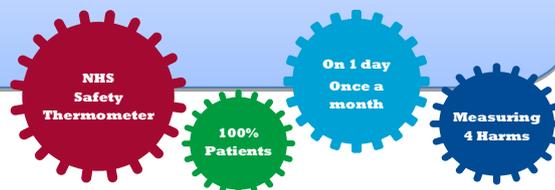
At the **Luton & Dunstable University Hospital** senior ward staff understand the importance of collecting this data and have recognised its relevance to other initiatives used to drive improvements to patient care and experience.



The data is collected at the point of care. To support the rollout to all wards a Senior Nurse was seconded for two days a week to ensure staff understood the collection guidelines and were familiar with the tool. This has been very well received by all. For further information contact matt.borg@ldh.nhs.uk (0845 127 0 127) or marion.collict@ldh.nhs.uk (07980941612)



At **Derbyshire Health Care NHS Foundation Trust** data is collected by a senior nurse with engagement of the ward staff. This approach has enabled more awareness raising for mental health staff in relation to physical health care. The flag and tag option is being used with the extra information collected highlighting areas for improvement. For more information Contact Bev Green, Releasing Time to Care Lead Nurse, bev.green@derbyshcft.nhs.uk



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Derbyshire Community Health Services NHS Trust (DCHS) introduced the NHS Safety Thermometer systematically into 12 Community Hospitals during 2011. By July 2011 all inpatient wards and one community based team were undertaking the survey. DCHS is set to implement the NHS Safety Thermometer into all District Nurse Teams by April 2012. To achieve this short training sessions have been conducted across a large geographical area. This will be followed up by 'Safety Express' sessions to set the NHS Safety Thermometer into the wider context. Collecting the data via the tool has assisted DCHS in developing Key Performance Indicators for the 4 harms. The NHS Safety Thermometer is currently being integrated into DCHS Business Intelligence System and will contribute to the overall reporting structure, with the emphasis being on the teams owning their data, analysing and taking action where clear action is required to improve patient outcome. More information is available from: Karen Sherlock karen.sherlock@dchs.nhs.uk (01629 812525) or Adam Short adam.short@dchs.nhs.uk (01773 525099)



Milton Keynes Community Health Services

Milton Keynes Community Health Services started collecting the NHS Safety Thermometer data in February 2012 on a small group of services and rolled out fully in March 2012 to the Intermediate care inpatient unit, the older people's mental health unit and across district nursing services. Data are collected on a clear, simple paper tool and returned to a central point where returns are checked for completeness and entered onto the electronic NHS Safety Thermometer. This approach ensures that clinical team's time is not redirected away from front line care. Information from the NHS Safety Thermometer will be used in conjunction with a range of other existing clinical information to continue to focus on and improve clinical outcomes and experience for individuals using our services. For further information contact Sheila Begley, Deputy Director of Nursing and Adult Health Services, (01908 243933).

sheila.begley@mkchs.nhs.uk

Peterborough and Stamford Hospitals took part in piloting the NHS Safety Thermometer with members of the Practice Development Team undertaking the surveys on four wards each quarter in 2011. 'The small amount of data entered meant we were unable to get data useful to change practice and it is only since expanding the NHS Safety Thermometer from January this year to 100% of relevant inpatients that we realised just how beneficial it will be for our patients.'

The Trust held a workshop for all ward managers, senior nurses, clinicians, audit staff and contract managers to discuss the theory that supported the tool and how it could be implemented in practice. The Chief Nurse leading the workshop assured board level support and a good attendance. The senior nurse on each ward collects the information at the bedside on the given day supported by the Practice Development Teams and colleagues.

The first in house report has been produced and clearly shows where the improvements are needed both from the overall percentage of patients harmed and by individual harms such as falls and pressure ulcers. Each ward receives the report and can see their variance with Trust averages and other wards. An action plans to ensure 95% (or more) 'harm free' care is delivered are now being developed. Workshops are held each month to allow more staff to understand the NHS Safety Thermometer and how to collect the data. Our learning has been to check the data as it is received from each ward. In the early days there was some confusion, particularly around the VTE questions, which went unnoticed until the data had been submitted electronically and therefore affected the overall harm results. We have assurance that voluntary reporting system is being used as NHS Safety Thermometer matches our current data collection. Undertaking the NHS Safety Thermometer for 100% of patients for three months has been a real achievement for the Nursing and Midwifery staff at the Trust. Gillian Clark on behalf of Peterborough and Stamford Hospital NHS Foundation Trust Gillian.Clark@pbh-tr.nhs.uk (01733 678498)

Peterborough and Stamford Hospitals NHS Foundation Trust



NHS Foundation Trust



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Ealing Hospital NHS Trust



Integrated Care Organisation

Incorporating the Community Services of Brent, Ealing and Harrow

Ealing, Harrow & Brent Community Services collected data consistently over the pilot and have successfully embedded the NHS Safety Thermometer in to district nursing roles in the community. If you want to discuss how to do this with someone with experience contact Jennifer Roye, Assistant Director of Clinical Governance , Jennifer.roye@eht.nhs.uk (0203 313 9641)

At **Kings College Hospital NHS Foundation Trust** data are collected by a senior nurse with engagement of the ward staff across eight areas.

The approach taken has enabled a consistent form of data collection

and reduced ambiguity relating to VTE assessment and appropriate prophylactic treatment. It has also led to a number of initiatives being introduced across the Trust based on the data and assisted in measurement of effectiveness of interventions. For more information Contact Liam Edwards, senior nurse Preceptor-ship and Energise for Excellence, (0203 299 1619) liamedwards@nhs.net

King's College Hospital



NHS Foundation Trust

University College London Hospitals



NHS Foundation Trust

University College London Hospitals started for the first time with a 100% survey on one day using the NHS Safety Thermometer and have been continuing this model every month since. As

staff become familiar with the collection tool this has reduced the time required for data collection leaving more time to provide feedback of results to staff in the clinical areas. The easy merging function allows their data to be viewed alongside data from their partner organisations and comparisons to the national averages. If you want to know more about the approach UCLH is taking please contact Duncan Burton, Deputy Chief Nurse, duncan.burton@uclh.nhs.uk (020 3447 9084)

The team at **United Lincolnshire Hospitals NHS Trust** incorporated the data from the NHS Safety Thermometer with a number of reliability measures to ensure quality of care is reliable. It encouraged staff to

consider: Are we carrying out risk assessments for all patients? Are we re-assessing where needed? Are we using that risk assessment to develop a good plan of care? And are we implemented that plan for each patient? ULH also ensured that the data collected using the NHS Safety Thermometer was seen and widely understood as data for improvement. Every month, on every ward, the data generated by the NHS Safety Thermometer over time is pinned on a graphical display, including both the ward data and the average data for their site so staff can check on their monthly improvements and see how their colleagues are getting on too. If you would like to find out more contact Dr Stephen Cross, Patient Safety Manager, Stephen.Cross@ULH.nhs.uk (01522 573031)

United Lincolnshire Hospitals



NHS Trust

Hertfordshire Partnership



NHS Foundation Trust

Hertfordshire Partnership NHS Foundation Trust has been piloting the NHS Safety Thermometer in it's mental health inpatient units for older people. The positive feedback is showing staff they are delivering high levels of 'harm free' care and has been well received by the nursing

teams. It gives teams a measure of success that they can build on from month to month, and a focus for defining the basics of good physical healthcare. The Trust is now looking to rollout the NHS Safety Thermometer to capture data from Community Mental Health Nurses in Older People's Services & Community Learning Disability Nurses in Hertfordshire and Essex. If you're interested in how the NHS Safety Thermometer is working in a Mental Health Trust feel free to contact Marion Harvey-Stoneham

marion.harvey-stoneham@hertspartsft.nhs.uk

