Health Innovation East Midlands

Local change, national impact

East Midlands Patient Safety Collaborative (PSC) Progress Report

2024-25

May 2025 K Khan

INTRODUCTION

This report provides an overview of the four PSC programmes (Managing Deterioration and Martha's Rule, Maternity and Neonatal (MatNeo), Medicines Safety and Safer Systems) across the East Midlands; their impacts and key achievements as well as national, regional or local feedback on progress.

ROLE OF THE HIEM TEAM

HIEM has been instrumental in the successful implementation of patient safety programmes across the East Midlands, working alongside partners to promote continuous improvement, enhance safety culture, and deliver measurable outcomes in healthcare settings. This approach embodies the principles of the NHS shifts, emphasising integrated care, outcome-focused strategies, and proactive, sustained improvements.

Alignment with the sickness to prevention shift

The team breaks down silos to enable system-wide collaboration, focusing on prevention, shared goals, and data-driven decisions. HIEM supports a shift away from reactive care to proactive strategies that target early intervention, population health, and long-term wellbeing.

Part of the Health Innovation Network
Local change, national impact

Accelerated Access Collaborative

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NHS

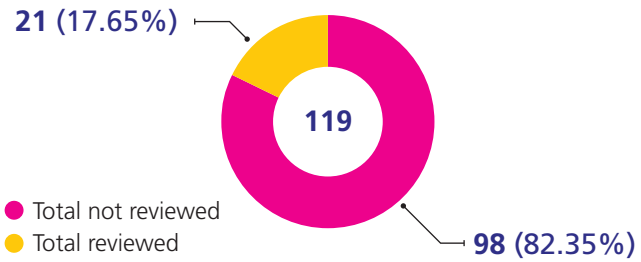
Managing Deterioration and Martha's Rule Programme

- Martha's rule launched across phase 1 and 2 sites and two paediatric departments **119** calls were made between Jan-Mar 2025 (see figure 1).
- Established and facilitate the Martha's Rule Midlands Community of Practice (CoP), which has grown in scope and impact, as a sustained platform for collaboration and sharing.
- Regular meetings with HIEM, Health Innovation West Midlands (HIWM), and East and West Midlands Critical Care and Paediatric Operational Delivery Networks (ODNs).
- Developed the Midlands Data Dashboard, tracking progress with national measures, identifying emerging themes and allowing sites to learn and share at CoP meetings (figure 1).
- Developed a principles document to provide a standardised guide for implementation of Component 1 (daily patient and family condition updates) for Midlands sites.
- All seven pilot sites completed case studies for Martha's Rule implementation to share learning and next steps.

NATIONAL / LOCAL FEEDBACK

- The Martha's Rule data dashboard is recognised as exemplary, providing evidence of a local measurement plan.
- Fabulous presentations - and a lot of wonderful reflective practice around testing and learning and just getting on with it rather than seeking perfection.
- Incredibly helpful in achieving a more consistent approach to Martha's Rule, which will help our patients who access a range of services.

Call For Concern Data Overview: Jan-Mar



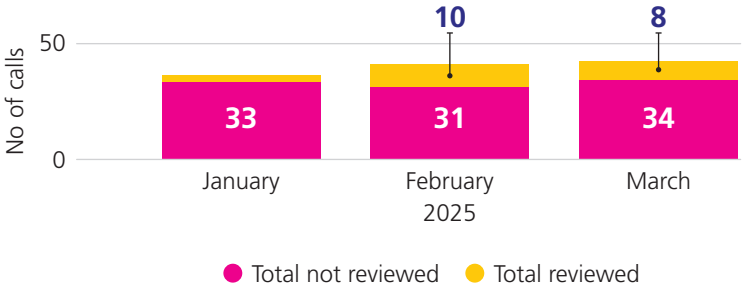


Figure 1: Overview of calls in Jan-Mar 2025

Maternity and Neonatal Optimisation and Stabilisation of the Preterm Infant (since April 2021)

- Significant improvements in EMPSC optimisation rates for key interventions, marking the highest levels to date: Intrapartum antibiotics 66.7% and Total interventions at 56%.
- Key improvements also noted in mortality rates (figure 2) and complications of prematurity avoided (figure 3).

Mortality rates for infants born between 28-29 weeks gestation

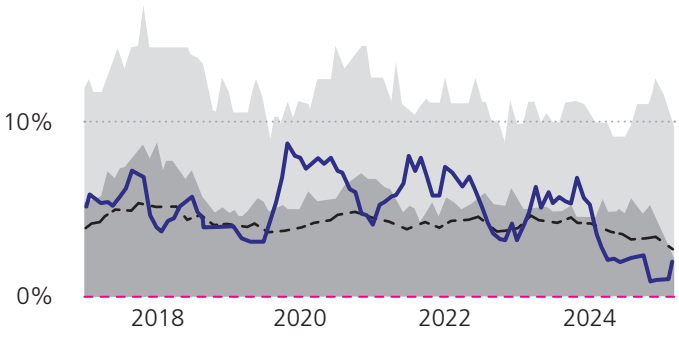


Figure 2 — East Midlands — National

28-29 Weeks Gestation
Average mortality rate in Q4 23/24 - **3.83%**
Average mortality rate in Q3 24/25 - **1.33%**

Reduction of 2.5% ↓

Complications of Prematurity Avoided for infants born between 28-29 weeks gestation

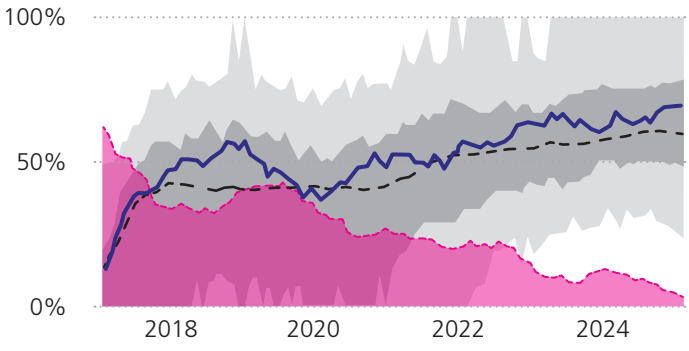


Figure 3 — East Midlands — National

28-29 Weeks Gestation
Complications of prematurity rates at end Q3 24/25:
East Midlands - **67.8%**
National - **60.41%**

Positive difference of +7.39% ↑

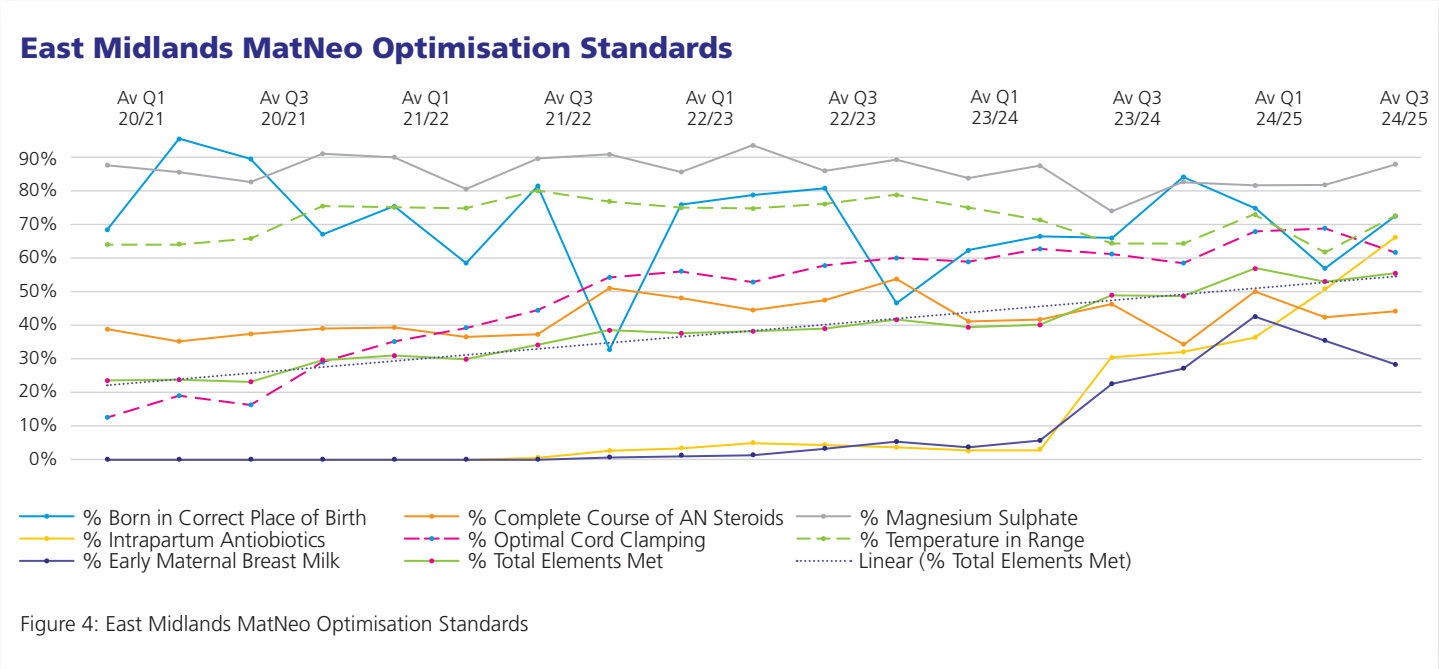


Figure 4: East Midlands MatNeo Optimisation Standards

Early Recognition and Management of Deterioration of Women and Babies

- A Midlands-wide survey was circulated to inform future digital development planning, identify potential risks, and support the ongoing digital transition.
- All Trusts in HIEM footprint now have firm plans to either implement paper NEWTT2 or MEWS and have started that process or made the final decision to await digital implementation.
- Learning and insights from East Midlands early implementation sites have been utilised during individual support discussions/meetings with NHS Trusts going through their implementation process.
- Supported Pathfinder sites, including UHDB and UHL, in implementing paper-based MEWS and NEWTT2 across all maternity and neonatal units, improving early detection and response to clinical deterioration.
- Expanded NEWTT2 adoption implementation in five Trusts, reinforcing regional standardisation and care quality.

Perinatal Culture and Leadership Programme (PCLP)

- HIEM PCLP leads delivered MOMENTS Train the Trainer programme to three Trusts, training 25 colleagues, with plans to scale to all Trusts to support safety and well-being projects.
- Created a PCLP MSTeams channel to streamline communication, share resources, and promote best practice collaboration, the channel has 53 members.
- Providing UHDB with leadership support for their 'second QUAD'. We developed a survey to gather insights to ensure we create relevant, effective, tailored workshops.
- Working with NUH to create a shared decision-making tool to support with intra-uterine transfers and contribute to babies being born in the right place.
- Regional Quadrumvirate (QUAD) meetings to define the PSC role, foster collaboration, identify coaching needs, and share information from Trusts who have noted improvements in perinatal working.
- Facilitated a workshop for 30 staff at the Nottingham and Nottinghamshire ICS PSIRF event focused on improving After Action Reviews.

NATIONAL / LOCAL FEEDBACK

- Several optimisation measures for preterm infants are demonstrating significant improvement with a number achieving the highest levels of improvement to date, impact slide demonstrating local outcomes of the work undertaken, and learning for other regions.
- Praise from the system for the data and charts and highlighting where further work is needed.
- MOMENTS training is a useful tool and mirrors the A-EQIP model using reflective and restorative conversation to support continuous improvement.

Medicines Safety Improvement Programme – Opioids

Ended March 2025

- Supported Joined Up Care Derbyshire JUCD (3 years) and Lincolnshire ICB (2 years) to adopt whole-system change by engaging cross-sector stakeholders.
- From March 2022, Derby and Derbyshire data shows a declining trend in chronic opioid prescribing, equating to five lives saved (figure 5).
- Insights from 21 chronic pain support groups in Derby and Derbyshire shared in a summary report.
- Developed opioid prescribing guidelines with Lincolnshire ICS; Derby and Derbyshire already implemented.
- Increased number of practitioners trained in LLWWP and published SOP to scale support groups across both ICSs.
- Improvement work set to continue locally beyond the national programme's end in March 2025.

FEEDBACK

- *I'm not sure I'd still be alive if it wasn't for this (pain) group. I didn't previously go out and (I) struggled with mental health, but this group made me realise I am worthy – it saved me. The group of people showed me I'm not alone and have no judgement towards me." (Pain group attendee)*
- *"HIEM have been important members of the project team and have been critical to ensuring the project progresses and improvements are identified, embedded and having a positive impact. It has been an absolute pleasure working with the HIEM PSC team – they have provided energy, support, drive and challenge to deliver measurable improvements for our patients. Thank you."*

Chronic opioid use in (ICB) - Derby and Derbyshire

SPC chart (XmR) for Jan-21 to Nov-24

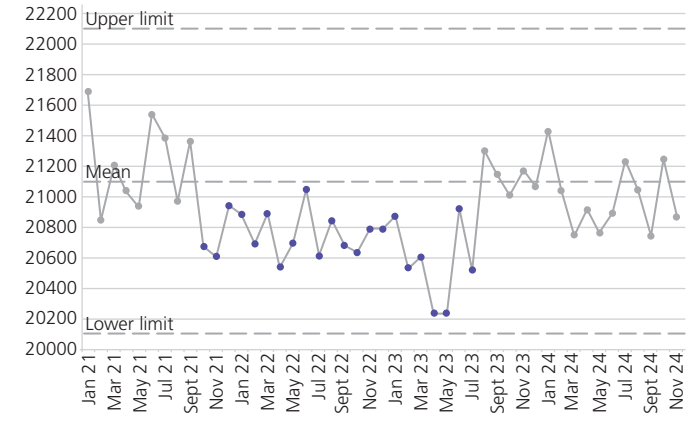


Figure 5: Prescribing data for Derby and Derbyshire for Chronic Opioid use (>6months).

High-dose opioid intake in (ICB) - Derby and Derbyshire

SPC chart (XmR) for Jan-21 to Nov-24

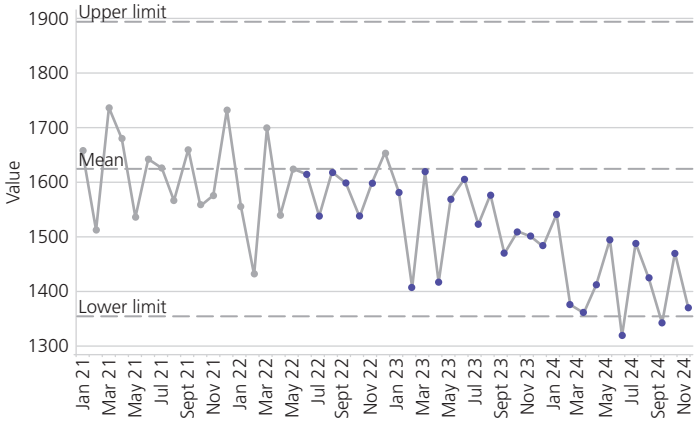


Figure 6: Prescribing data for Derby and Derbyshire for high dose opioids (>120mg)

Systems Safety

- Collaborated with all five ICBs to host webinars on key challenges, fostering regional learning and momentum in patient safety initiatives.
- Worked with HIWM to identify PSIRF-related skills gaps and enable system-wide skill sharing.
- Helped systems implement and sustain PSIRF through tailored sessions and gap analysis.
- Developed an induction booklet to support recruitment of patient safety partners.

NATIONAL FEEDBACK

- We (LLR) are almost blown away by the level of support we are now getting from HIEM. It has far exceeded our expectations and has led to real impact for our team.
- Praised the way in which the programme delivery has pivoted and adapted to better meet local needs.

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