

Your quality improvement partner

East Midlands Patient Safety Collaborative



We play an essential role in identifying and spreading safer care initiatives from within the NHS and industry, ensuring these are shared and implemented throughout the health and care system.

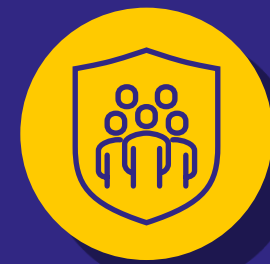
We work alongside acute hospital trusts, community services, primary care, Integrated Care Systems (ICSs), care homes, and local authorities in the region on projects designed to improve patient safety. This includes national safety improvement programmes commissioned by NHS England through our Patient Safety Collaborative.

The East Midlands Patient Safety Collaborative (EMPSC) was established in 2014, as one of fifteen across England. Collectively, Patient Safety Collaboratives (PSCs) form the largest safety initiative in the history of the NHS.

Our role is to provide support to bring systematic and sustainable improvements that can help improve safety for people receiving health and care services, and to build quality improvement capacity and capability.



1,474
premature babies
have benefited
from the preterm
perinatal
optimisation care
pathway (April
2020 – March 2023)



**Over
900**
care homes have
worked with us to
support safe care
for their residents

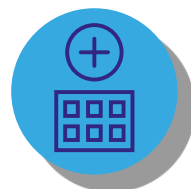


1,077
fewer people are
taking opioids for
non-cancer pain in
Derbyshire, which
could avoid
17 deaths

Our region

East Midlands Academic Health Science Network

Igniting **Innovation** since 2013



Acute providers

8 NHS hospital trusts
1 ambulance trust



Primary care

93 Primary Care Networks
536 GP practices



Local health and care systems

5 Integrated Care Systems (ICS)
10 county/unitary local authorities



Community and social care

Approx **1,550** care homes
5 NHS mental health trusts
2 NHS community trusts
Third sector organisations



Research

9 universities
National Institute for Health Research (NIHR)
Applied Research Collaboration East Midlands
NIHR Clinical Research Network East Midlands



A decade of learning

East Midlands AHSN is celebrating its tenth anniversary in 2023. The Patient Safety Collaborative has contributed to our positive impact in the region. Here are some of the highlights.

Quality improvement in care homes

65 care homes in the East Midlands took part in a care home quality improvement project called **LPZ**. The project benefited **1,617** residents by reducing incidences of pressure ulcers and improving hydration and nutrition. The project won the Health Service Journal (HSJ) **Patient Safety Award** for education and training.



Improving medicines safety



PINCER was an evidenced-based intervention to improve the safety of how medicines are prescribed. Our programme facilitated the training of more than 250 pharmacy staff and identified **21,617** cases of potentially hazardous prescribing from over 2.9million patient records. This led to a reduction in the number of at-risk patients by **552**.



Using collaborative methodology



All **8 acute hospital trusts** were part of our **Emergency Laparotomy Collaborative (ELC)**.

The aim of this initiative was to reduce mortality rates, complications and hospital length of stay for patients undergoing an emergency laparotomy, by sharing good practice and implementing an evidence-based care bundle.

Using a breakthrough series collaborative methodology the ELC care bundle (six elements) was rolled out across three AHSNs, demonstrated reduced mortality and lives saved. The impact of the original work showed **a reduction in crude 30-day mortality from 9.8 per cent to 8.2 per cent** and a **length of stay reduction of 1.3 days, from 20.2 days to 18.9 days**. Based on data from the Kent Surrey and Sussex area, we estimate that national spread between 2018



and 2020 could result in **85,000 fewer bed days** representing a net **benefit to the NHS of £9.8m**.





Covid oximetry @home

During the pandemic, reduced oxygen saturation levels were shown to be a key identifier of deterioration in patients with confirmed or suspected COVID-19. The national **Covid Oximetry @home and virtual wards** programme used pulse oximeters for patients to safely self-monitor their condition at home, providing an opportunity to detect a decline in their condition earlier, that might require review and hospital admission. From a starting point of 20% of Clinical Commissioning Groups in November 2020, **100% of CCGs** had established a fully operational COVID Oximetry @home pathway by early February 2021.



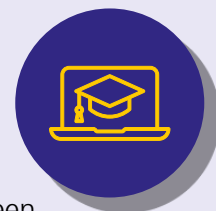
This national programme won the **HSJ Award for Patient Safety** in 2021.

With the increased number of patients requiring a tracheostomy during the Covid pandemic, we supported **12 out of 13** eligible sites to **adopt three safety interventions to improve their care**, as part of a national programme.



Supporting social care

The 'React To' model is already well-known and used by social care staff from across the UK. It is made up of a **series of videos and supporting resources**, which have been specifically designed for the social care sector. We received funding from the Health Foundation to support the development of care home specific **React To Quality Improvement** module as part of this series produced by Crocodile House. We also worked with a local care home to produce a **React To Deterioration** module, helping staff spot the early signs of someone becoming unwell.



52,483

page views in 2020 - 2021,
demonstrating the model's
acceptability to end users.



To date:

229 React to Quality
Improvement courses

286 React to
Deterioration courses

Supporting social care

A joint project on the **Early Detection of Deterioration in Home Care** between Fosse Healthcare, Nottinghamshire County Council, software provider birdie and EMAHSN was shortlisted for the **Community Care Initiative of the Year** at the HSJ Patient Safety Awards.

The collaboration used digital tools to help social care, primary care and support staff, to identify health deterioration in people who receive home care services quickly so that they can be treated earlier.



“This project demonstrates how collaboration, integration, technology and innovation can make a huge positive impact on people’s lives. The project showcased place-based delivery in action, through multi-disciplinary partnerships across domiciliary care and primary care.”

**Volt Sacco, CEO,
Fosse Healthcare**



14

GP Practices
were involved in
the programme

The East and West Midlands Academic Health Science Networks, with the East and West Midlands Associations of Adult Social Care (ADASS), worked collaboratively on a **pilot programme** commissioned by NHS England in response to the **LeDeR (Learning Disability Mortality Review)** report.

The pilot worked with **91** people with learning disabilities and **100** support workers at **13** supported living providers to understand the challenges they and their families have in identifying and preventing health problems. They tested and trialled new tools, technology and processes. The pilot was shortlisted for HSJ **Patient Safety Pilot Project of the Year**.



“We absolutely will support this. It is an area of great importance to our Council and CCG”

Director of Adult Social Services

“I want to support reduction of health inequalities; it is important to explore options/improvements in both my roles within the GP practice and the PCN.”

GP Partner

“We are so excited to be part of this pilot – our staff are already good at picking up soft signs, but these tools help in formalising their concerns and we can share this with health professionals.”

Support provider

Supporting your quality improvement activities

Talk to us about how we can work together to help tackle your health and care challenges through a quality improvement approach.



Using the Institute for Healthcare Improvement's **Model for Improvement**, we help quality improvement collaboratives to form. These involve groups of professionals coming together, either from within an organisation or across multiple organisations, to learn from and motivate each other to improve the quality of health services. They often use a structured approach, setting targets and undertaking rapid cycles of change.

Many of our team are also actively engaged as members of the Health Foundation Q community and the AHSN is recognised as a **Q community** delivery partner.



We can offer expert advice and support relating to our national and locally commissioned programmes, as well as take on bespoke projects. Get in touch via

 emahsn@nottingham.ac.uk

Addressing inequalities: understanding and responding to local health inequalities.

Appreciative inquiry: a structured approach to engage people in a shared vision.

Safety culture: insights to improve the safety of patients and care providers.

Improvement leadership: identifying and growing leaders in safety.

Measurement and evaluation: understanding how to track relevant processes and outcome metrics.

Patient and carer co-design: learning from the lived experiences of patients, carers and service users.

Human factors: understanding how behaviour influences processes and systems.

Networks for improvement: bringing together communities of practice with broad participation.

Building QI capacity and capability: tailored approaches to support learning in quality improvement.

Innovation pipeline: horizon-scanning and needs analysis to inform future planning.

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National safety improvement programmes

PSCs are funded and nationally coordinated by NHS England. Collectively, they deliver the National Patient Safety Improvement Programmes (NatPatSIP), which are a key element of the NHS Patient Safety Strategy.



The programme's aim is to reduce error, harm, and death as a result of failures in the system, and to enhance safe, quality care so the NHS becomes comparable with the safest health care services in the world by 2025.

We do this by working with all health and care systems and providers to reduce avoidable harm and variations in the delivery of safer care:

- Creating **safer systems of care** that reflect continuous learning and improvement, complementing activities within individual organisations.
- Fostering the conditions for a **culture of safety** to flourish across the system and organisations we work with.
- Enabling greater **patient and carer involvement** in the co-design of our work.
- Maximising **learning**.
- Sharing **improvement learning** from both positive and negative events to inform future programmes.
- Collaborating with local and regional NHS teams and other PSCs to support the national ambition through **effective networks and collaboration**.
- Convening regional **Patient Safety Networks** as the 'engine room' to drive safety improvements.

Recent impacts



Working with over **900 care homes** to support the safe care of residents

Managing deterioration



17 lives saved through opioid reduction

Medicines safety



Saved up to **34 lives** and prevented up to **19 babies** developing cerebral palsy since April 2020

Maternity and neonatal



Working with **29 in-patient wards** to reduce restrictive practice

Mental health



Supporting the implementation of the **Patient Safety Incident Response Framework** (PSIRF) in all NHS provider organisations in England

System safety



Managing Deterioration



This programme has been working with care homes to reduce deterioration-associated harm by improving the planning, identification, escalation and response (PIER) to a resident's physical deterioration.

Impacts: 2022 – 2023

- Held quarterly 'Connecting Together' webinars with care homes reaching hundreds of staff and culminating in an in-person learning and sharing event in March 2023.
- Celebrated good practice through our popular Care Home Awards.
- Delivered training to over 900 care homes across all five East Midlands Integrated Care Systems.



Maternity and Neonatal



We work with maternity and neonatal units across the East Midlands to improve safety for mothers during pregnancy and ensure preterm babies get the best start in life. One way we do this is by promoting the effective optimisation and stabilisation of the preterm infant through a care pathway of seven evidence-based interventions.

Impacts from April 2020



721 women giving birth at less than 30 weeks of gestation received magnesium sulphate within the 24 hours prior to birth. This potentially means that **19 babies** will not develop cerebral palsy.

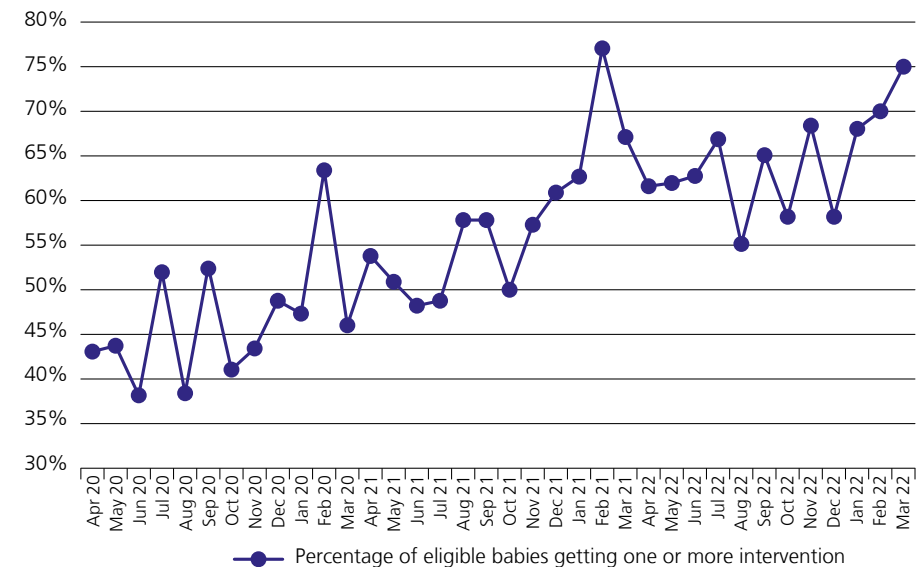


37 women in preterm labour at less than 34 weeks of gestation received intravenous intrapartum antibiotic prophylaxis to prevent early onset neonatal Group B Streptococcal (GBS) infection irrespective of whether they have ruptured amniotic membranes. This potentially means that **3 babies** were born without group B strep.



Between 20 and 24 babies born at less than 34 weeks gestational age potentially survived because their umbilical cord was clamped at or after one minute after birth.

East Midlands – Optimisation bundle



There were **over 4,000 total interventions** between April 2020 to March 2023, an **increase from 25.5% of babies to 45.5%**, compared to a national average of 33.3%.



[Find out more.](#)





Mental Health

We are working with the East Midlands Mental Health Alliance and mental health providers across the region to reduce restrictive practices at in-patient services, by testing and scaling a change package to help staff implement improvements that can lead to a better experience for patients with mental illness.

Impacts

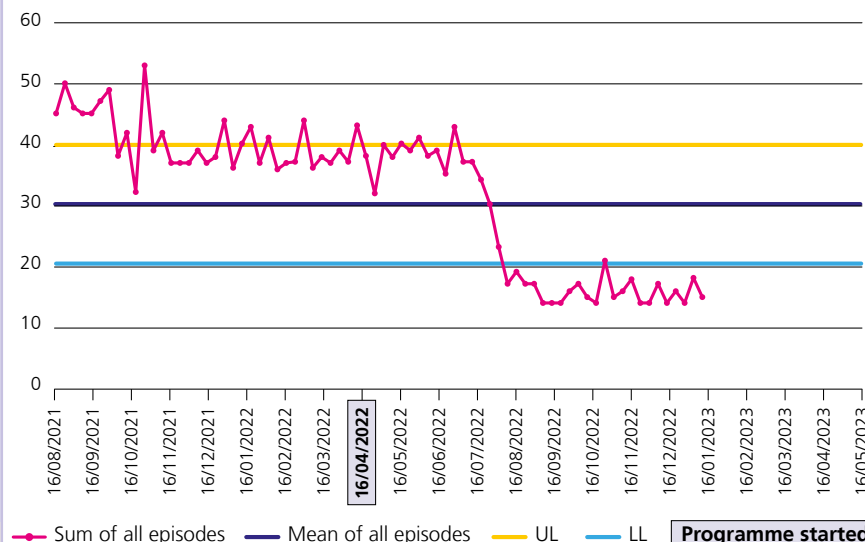
- Engagement with **29 wards across 7 providers** (including two private providers) across **13 specialities**.
- A self-assessment by providers showed that after two years, the average percentage of improvement approaches being fully embedded into everyday working practice, values and culture rose from **41% to 59%**.

[Read the full report.](#)

CASE STUDY

In Nottinghamshire, a national high secure learning disability service reduced the need for long term segregation through quality improvement planning. They created an autism friendly environment to reduce sounds on the ward – such as doorbells and the fire alarm, daily activity planning and communication aids and tools. The number of episodes of restrictive practice reduced over time – (See page 21).

The total number of episodes of restrictive practices (all interventions together) over time



“Being part of the East Midlands Patient Safety Collaborative has been a very positive experience for me. It brings together so many like-minded people, both professionals and patients, all committed to better understanding the challenges around restrictive practices and how we can all work together to reduce them.”

Expert by experience



[Listen](#) to a service user talk about her experience of restraint



Medicines

This programme aims to halve severe avoidable medication-related harm by 2024, by focusing on high-risk drugs, avoidable situations, and vulnerable patients. We are working with Joined Up Care Derbyshire ICS (JUCD) to implement a whole system approach to deliver the vision:

'To support people to live well with chronic non-cancer pain whilst minimising the harm from opioids'

Impacts

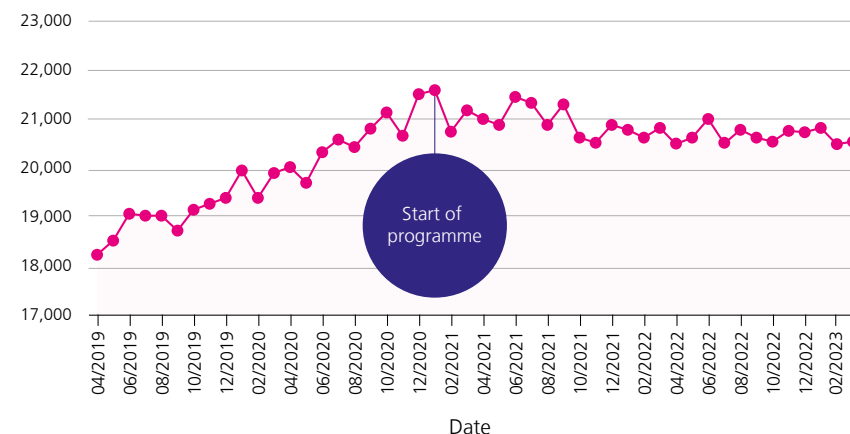
- Prior to the programme starting, there had been a year-on-year increase in patients prescribed opioids from **18,278 in April 2019 to 21,625 in January 2021**.
- The whole system approach has reversed the increase and reduced opioid prescribing so that **1,077 fewer patients** were being prescribed long-term opioids by March 2023.
- This equates to up to **17 deaths avoided**.



Watch patient stories and case studies

Improving management of patients with chronic non-cancer pain, by reducing harm from opioids in Derby and Derbyshire

Number of patients who have been prescribed an oral or transdermal opioid in the specified month and the three preceding months



Date

3,347

more patients were prescribed opioids from Apr 2019 to Jan 2021

Since **Jan '21**

this increase is reversing

By March 2023, **1,077** fewer patients were being prescribed opioids

This equates to **17** deaths avoided

Joined Up Care
Derbyshire

Find out more

To discuss your quality improvement projects or to get involved with any of our patient safety work, contact us at **emahsn@nottingham.ac.uk**



For the most up-to-date information on the East Midlands PSC improvement programmes, visit: **www.emahsn.org.uk/patientsafety** or scan the QR code.



For updates, sign up to our newsletters at: **www.emahsn.org.uk/updates** or scan the QR code.



W: **www.emahsn.org.uk**

X (formerly Twitter): **[@EM_AHSN](https://twitter.com/EM_AHSN)**