The Dudley Group NHS Foundation Trust - Quality Priorities 2019/20

Priority 1: Patient experience

- a) Achieve monthly response rates in Friends and Family Test (FFT) for all areas (inpatients, outpatients, maternity, Emergency Department and community) that are equal to or better than the national average.
- b) Achieve monthly scores in Friends and Family Test (FFT) for all areas (inpatients, outpatients, maternity, Emergency Department and community) that are equal to or better than the national average.
- c) Improve the overall year score from 2018/19 to 2019/20 for the following question used in our local real-time survey: Were you involved as much as you wanted to be in decisions about your care?
- d) Improve the overall year score from 2018/19 to 2019/20 for the following question used in our local real-time survey: When you reached the ward, were you given a 'Welcome to Russells Hall Hospital' booklet?

Priority 2: Pressure ulcers

Hospital

a) Ensure that there are no avoidable category 4 hospital acquired pressure ulcers throughout the year. b) Ensure that the number of avoidable category 3 hospital acquired pressure ulcers in 2019/20 reduces from the number in 2018/19 by at least 10 per cent.

Community

a) Ensure that there are no avoidable category 4 pressure ulcers acquired on the district nurse caseload throughout the year. b) Ensure that the number of avoidable category 3 pressure ulcers acquired on the district nurse caseload in 2019/20 reduces from the number in 2018/19 by at least 10 per cent.

Priority 3: Infection control

Maintain or reduce our MRSA and Clostridium difficile (C. diff) rates in line with national and local priorities. All cases will undergo a root cause analysis, the results of which will be discussed jointly by the Trust and Dudley CCG to agree on any avoidability/lapses in care.

MRSA	Clostridium difficile
MRSA bacteraemia (blood stream infections).	Have no more than 49 hospital onset healthcare associated cases detected three or more days after admission or community onset healthcare associate cases that occur in the community when the patient has been an inpatient in the Trust in the previous 4 weeks.

Priority 4: Nutrition and Hydration

- a) At least 95% of acute patients will receive a nutritional assessment within 24 hours of admission to the hospital using the nationally recognised MUST (Malnutrition Universal Screening Tool).
- b) With regards to supported mealtimes, 95% of all of the monthly audits will have a positive response to the following three questions:
- 1) Has all non-essential activity stopped? 2) Is there a nominated qualified nurse overseeing the mealtime? 3) Is there a nominated person to support all patients identified as requiring assistance?

Priority 5: Medications

- a) All patients who have a known potential to have an adverse reaction or have an allergy or sensitivity to a product/medication are clearly identified by having a red identification band in place.
- b) Achieve a 50% reduction in the number of-patients who are not prescribed analgesia for breakthrough pain when they are prescribed regular opioids for pain management

Priority 6: Discharge Management

The state of the s		
Hospital	Community	
a) All patients will have an Expected Discharge D (EDD) determined by assuming ideal recovery ar assuming no unnecessary waiting.b) All wards will achieve their individually set targ the number of discharges per day.	capture a baseline in Q1 b) The percentage of patients with an advanced care	

Priority 7: Incident Management

- a) The Trust's reporting rate will increase every quarter, culminating in a 5% increase for the whole year and its comparative position on the reporting rate of incidents will improve every six months.
- b) To reduce the number of breached incident investigations by 30%.