

# Annual Quality Statement

1st April 2017 to 31st March 2018



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Where is the information you want to know?

"The different colours represent the 7 areas of the Health Care Standards."



## **About this report**

The Annual Quality Statement is an opportunity for us to share what we have been doing to improve the quality of our services over the last vear. This report follows the format of the Health and Care Standards<sup>1</sup> themes:

Staying Healthy - you are well informed and supported to manage your own physical and mental health.

Safe Care - you are protected from harm and protect yourself from known harm.

Effective Care - you receive the right care and support as locally as possible and contribute to making that care successful.

Dignified Care - you are treated with dignity and respect and treat others the same.

Individual Care - you are treated as an individual with your own needs and responsibilities.

Staffing and Resources — we have enough staff with the right knowledge and skills available at the right time to meet vour need

Thank you for taking the time to read this report.

Put patients first

Work together • Value and respect each other

Learn and innovate

Communicate openly and honestly

<sup>&</sup>lt;sup>1</sup> Published by the Welsh Government on the 1<sup>st</sup> April 2015. For further information about the standards please use the following link: http://www.wales.nhs.uk/sitesplus/documents/1064/24729 Health%20Standards%20Framework 2015 E1.pdf

#### **Introduction and Welcome**

The purpose of our Board is to govern the organisation effectively. We aim to build confidence in the quality and safety of the care that we provide. For more information about BCIHB Board Members, please find us on our Website www.bcu.wales.nhs.uk



#### Statement from Mr Gary Doherty, Chief Executive & Dr Peter Higson OBE, Chairman

It is our pleasure to introduce the Annual Quality Statement for Betsi Cadwaladr University Health Board for the year ended 31st March 2018. Throughout this document, you will see examples of where our staff have delivered improvements in quality, safety, research and learning, all of which go to support a better experience for those people who access our services. We are extremely proud of our staff and grateful for their hard work and would like to offer our thanks to every one of them for the contribution they make to improve the quality of care across BCUHB. However, whilst there has been so much good work over the last 12 months, it has been a challenging year for us. We remain in Special Measures due to concerns over in a number of areas of service delivery, governance, finance and performance. We are very clear on the improvements that need to be made at pace and the further work required to tackle the range of challenges facing the Health Board. We have confidence in the willingness and commitment of all staff within the organisation to strive to overcome the many challenges faced by the Health Board, in order to deliver success that translates into better performance and outcomes for patients.





#### Statement from Mrs Margaret Hanson, Chair of Quality and Safety Committee & Mrs Gill Harris, Executive **Director of Nursing & Midwifery**

Improving health and providing excellent care is a responsibility we take very seriously. Patients, families and their carers who access and use our services have a right to expect care and treatment that is of the highest quality. They deserve to be treated with dignity and compassion. We always strive to meet these expectations. However, on occasions when we fail to do so, it is important that we are open, honest and can demonstrate learning from patients' experiences and the feedback you provide. This report illustrates the improvements and developments in services we have taken forward over the last year to continuously improve the quality of the care we provide. Over the last year we have been proud to launch our Safe Clean Care Campaign which seeks to engage with our staff and encourage them to pledge their support to the campaign and implement essential actions which are required to significantly reduce our patient infection rates.





## **Betsi Cadwaladr University Health Board (BCUHB)**

The purpose of the Board is to govern the organisation effectively. We aim to build confidence in the quality and safety of care that we provide. For more information about Board members, please use the following link: http://www.wales.nhs.uk/sitesplus/861/page/40836

This document forms part of our annual reporting. In addition to this report, our Annual Report and Annual Governance Statement can be found at the following link:

www.wales.nhs.uk/sitesplus/861/page/40903.

This report and supporting documents can be made available in other languages or formats on request from the Corporate Communications Team:

Email: bcuhbpressdesk@wales.nhs.uk

Telephone: 01248 384776

Address: Communications Team

Block 5

**Carlton Court** 

St. Asaph Business Park

St. Asaph **LL17 0JG** 

There are many opportunities to get involved and share your ideas about how we can improve health in North Wales.

We are keen to hear from you, whether as a member of the public, patient or carer, or if you have a compliment or a suggestion.

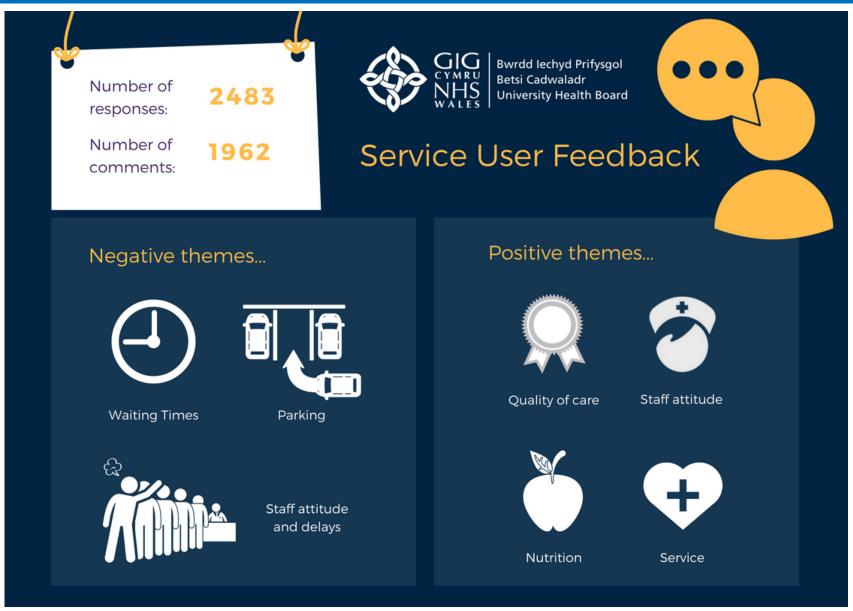
> It is your local health services. Help us to help you!

You can also sign up to our involvement scheme. By registering, (please use the link below) you will get our newsletter, hear about how you can share your views and ideas and get updates on activities and events. We want to involve everyone irrespective of age, disability, gender, gender identity, race, religion or belief or sexual orientation. http://www.bcugetinvolved.wales/register

# **About BCUHB**



# Your Comments about BCUHB over the last year



# **Progress since last year**

| What we said last year   | What we did   | What we will do this year (2018/19)   |
|--|---|---|
| Avoidable Deaths - by reducing our mortality rate and using mortality reviews to focus areas for learning and improvement. | <ul> <li>The Crude Mortality rate remains the same as last year.</li> <li>The development of a focused review template for each death has been implemented.</li> <li>A 'Learning from Deaths Policy' has been developed, and is to be roll out across the Health Board.</li> </ul>              | <ul> <li>Reducing our mortality rate will remain a priority for the coming year.</li> <li>We will implement the Learning from Death's Policy across the Health Board.</li> </ul>  |
| Harm Free Care - by delivering care in the right place, by the right member of staff at the right time.                    | The Harm dashboard was sucessfully launched in October 2017. This is now used by staff across the Health Board to drive improvements, highlights areas of good practice and shines the spotlight on areas of concern by ward level.   | <ul> <li>This will remain a priority for the coming year.</li> <li>Continued devlopment of the ward level dashboard to increase staff access to accurate information for improvement.</li> </ul>  |
|  | <ul> <li>The dashboard supports the right member of staff to give the right care in the right place.</li> <li>Health Board wide action on Infection Prevention through the Safe Clean Care campaign has created a Health Board commitment to agreed standards with positive results.</li> </ul> | <ul> <li>To continue to focus on the aim of harm free care for the coming year by taking Health Board wide action on reducing: Healthcare Acquired Pressure Ulcers and inpatient Falls.</li> <li>We will implement the improvements across the Health Board.</li> </ul> |

| What we said last year  | What we did   | What we will do this year (2018/19)  |
|---|---|--|
|   | <ul> <li>Hosptal Acquired Thrombosis (Blood<br/>clots). There has been focused<br/>changes in Ysbyty Glan Clwyd which<br/>has resulted in improvements with the<br/>way we are assessing patients on<br/>admission for risks of devloping a<br/>blood clot and the appropriate<br/>treatment then prescribed.</li> </ul>  |  |
| Achieve the highest level of reliability in clinical care by Strengthening our clinical pathways.  Develop and introduce an accreditation programme for wards, departments and the community.   | <ul> <li>Clinical pathways such as for patients following a heart attack, stroke and fracture hip have been improved.</li> <li>Ward accreditation scoping exercise completed.</li> </ul>  | <ul> <li>Continue to focus on clinical pathways in line with national guidance, results of national audits and findings from mortality reviews.</li> <li>Continue to develop a ward accreditation programme and implement across the Health Board in the coming year .</li> </ul>                                    |
| Deliver "What Matters" work in partnership with patients, carers and families to meet their needs and actively improve their health - by moving towards open visiting times and act on results from patient feedback in real time. Include patients, carers and families in the delivery of care. Introduce a Patient Advisory and Support Service to manage (in a timely manner) local resolutions | <ul> <li>Open Visiting sucessfully rolled out across all inpatient areas in June 2017.</li> <li>Viewpoint is a realtime feedback system which has been rolled out across all areas of the Health Board providing opportunity for staff to act on feedback quickly.</li> <li>Patient Advisory and Support Service successfully introduced to Ysbyty Glan Clwyd in July 2017 and currently</li> </ul> | <ul> <li>Continue with open visiting across the Health Board.</li> <li>Patient feedback via Viewpoint to be evaluated and used locally for improvement. Viewpoint data displayed on ward information Boards outside ward entrances.</li> <li>Patient Advisory and Support Service will be implemented and</li> </ul> |

| What we said last year   | What we did  | What we will do this year (2018/19)   |
|--|--|---|
|  | recruiting staff for the service for the Wrexham Maelor and Ysbyty Gwynedd.  | evaluated in three main hospitals across the Health Board.  |
| Deliver innovative and integrated care closer to home which supports and improves health, wellbeing and independent living - Track performance through the development of a Business Intelligence Community Dashboard.  Receive patient feedback (and act on it) from surveys in the community and intermediate settings | <ul> <li>Development and implementation through our Information Reporting Intelligence System (IRIS) enables staff to access reports and Community dashboards to support our improvements.</li> <li>Viewpoint real time feedback system is available and is promoted in all of our Community Hospitals.</li> </ul> | Continue to promote the use of information for improvements and devlop the Community dashboard further. |

# Staying Healthy

Our ambition as a Health Board is to support you to Live Healthier and Stay Well.

## **Well North Wales Programme**

The "Well North Wales" programme means working with local people in small geographical areas to identify new and different opportunities for improving health. This has led to collaborative working with our partners across North Wales to reduce health inequalities and, where possible, provide care closer to your home.



## **Public Health Wales Update**





- Breastfeeding support: A new easy-read Breastfeeding Guide has been published in both Welsh and English for adults with learning disabilities and can be accessed via the BCUHB Breastfeeding pages: <a href="http://www.wales.nhs.uk/sitesplus/861/page/85316">http://www.wales.nhs.uk/sitesplus/861/page/85316</a>.
- Making every contact count: The 'Make Every Contact Count' (MECC) campaign aims to motivate young people to improve their own health and wellbeing at every contact with a healthcare professional. So far we have trained approximately 450 School Nurses and Health Visitors across North Wales.
- **Supporting health and wellbeing:** The introduction of the Five Ways to Wellbeing toolkit has helped healthcare professionals to ensure consistent messages are delivered in relation physical and mental health and wellbeing.
- Supporting the new mental health strategy: Specialist public health advice and information around suicide formed part of the development and implementation of a new North Wales Mental Health Strategy.

## **Action on Childhood Obesity**

Reducing rates of childhood obesity is a recognised challenge across Wales. Our Dietetics Team has successfully launched the Tiny Tums Programme in Anglesey in partnership with the Healthy Sustainable Pre-school Scheme programme. This provides inspiration, motivation, focussed training and awareness sessions for staff and families about healthy eating for early years' groups (nurseries or pre-school groups). The success of Tiny Tums has led to it being rolled out across all local authorities in North Wales.

For more information, please visit http://everychildwales.co.uk/parents/

#### **Childhood Immunisations**

We have achieved our key targets of 95% of children in North Wales receiving their scheduled vaccinations by age 1, and 95% of children receiving 2 doses of MMR (Mumps, Measles and Rubella) by age 2. As a Health Board, we have had the highest uptake of immunisations in Wales.

| 96.5% of children have had their 5 in 1 vaccination by the age of 1                         |           |
|---|-----------|
| 96.1% of children have had one dose of MMR (Mumps, Measles & Rubella) by their 2nd birthday |           |
| 91% of children have had two doses of MMR (Mumps, Measles & Rubella) by their 5th birthday  | <u>••</u> |

## **Flu Immunisations**

We improved the uptake of flu vaccinations across North Wales in the last flu season as 8,900 people took the offer of the vaccination. We vaccinated the most people in Wales and this led to us winning the Most Improved Vaccination Campaign for 2017/18.

The table below shows the amount of flu vaccinations given:

| 70.6% of people over 65 had their flu vaccination* (Target 75%)                | 4,519 more people than last year.           |   |
|--|---|---|
| <b>51.3%</b> of those under 65 at clinical risk have had their flu vaccination | 2,230 more people than last year but        | • |
| (Target 75%)*  | still not achieving target.                 |   |
| 75% of pregnant women have had the flu vaccination                             | 320 more women that are pregnant vaccinated | • |
| (Target 75%)   | vaccinated.                                 |   |
| 54.7% of our staff have had the flu vaccination                                | An improvement on last year 1,247           | • |
| (Target 62.5%)   | more staff vaccinated                       |   |

<sup>\*</sup> Data source: http://nww.immunisation.wales.nhs.uk/ivor

Our community pharmacies are an essential to our campaign and last flu season gave 6,681 flu vaccinations.

## **Smoking Cessation**

In 2017/18, we helped 3.5% of the smoking population to attempt to guit smoking. Of those who started our smoking cessation programme, 30% were successful in stopping. You can get more information on the advice and support available if you want to stop smoking from your GP.

Other programmes you can access include 'Help Me Quit for Baby', a smoking cessation programme for pregnant ladies, and the 'Quit for them' campaign for adult smokers with children living in the household.

#### **Exercise**

Over the past year, we have been developing and promoting exercise programmes through joint working with our partners across North Wales.

- The Lifestyle programme is jointly run by BCUHB and The National Exercise Referral Scheme (NERS). It supports and delivers a weight management and exercise programme for people who may require hip or knee replacements.
- Our award-winning programme, Fitness4Motion, transforms the lives of people with a range of disabilities through the power of sport.
- We have worked with Crossroads to develop a programme that offers a sports, therapeutic and leisure service to improve the lives of people with profound and multiple learning disabilities.

# **Community Developments: Addressing Inequalities in Men's health in a Rural Community**



Dolgellau Outpatient Department has developed a Health Promotion Hub, ensuring that health education is central to all care and provides the resources to support self-care for the local community. Recently, staff have focussed on encouraging men to report symptoms of illness as early as possible and provided advice and support.

The Outpatient Department team won the RCN Nurse of the Year award 2017 for their work in reducing inequalities in men's health.



## **Improvements in our Mental Health Services**

Over the past year our Mental Health and Learning Disabilities Services using arts, relaxation therapies, exercise and healthy eating programmes to support the health and wellbeing of service users. We have also promoted a number of existing helplines to support patients, their carers or family members:

- Community Advice and Listening Line <a href="https://www.callhelpline.org.uk">www.callhelpline.org.uk</a>
- DAN 24/7 www.247.org.uk for help and advice relating to drugs and alcohol
- Wales Dementia helpline www.dementiahelpline.org.uk for support or signposting for anyone who has diagnosis of Dementia or living with someone with Dementia.

## **Macmillan Health and Wellbeing Events**

We have helped Macmillan Cancer Support to run a new series of free Health and Well-Being Events, offering information and support to anyone affected by cancer. The events offer information and support on:

- Diet, physical activity and lifestyle;
- The possible long-term effects of treatment;
- Fatigue management and emotional support;
- Welfare Benefits advice:
- Access to a wide range of local support in your area.

The feedback so far has been positive.

# Safe Care

## **Safety Huddles**

In 2017/18 we introduced new Safety Huddles at our three main hospitals. Every morning staff come together for a 20-minute meeting to discuss any issues related to safety. A senior nurse or senior doctor leads the huddle to ensure that any issues, such as short staffing or long waiting times in the Emergency Department are resolved. The Huddle is a place where staff can communicate and raise concerns that affect patient care and safety.



#### **Sepsis**

Early detection of Sepsis with prompt treatment is important to improve survival rates. In Wales, as part of the 1000 Lives campaign, we have put in place evidence-based treatment known as the 'Sepsis 6 pathway'. This is a package of tests and treatments, which when used together with our patients within a set time limit will make a difference. To ensure our staff can easily access the pathway we have rolled out the Sepsis 6 pathway in a box. Here all the elements are together to ensure patients are receiving the right test, the right treatment at the right time.



The Health Board currently has the lowest mortality rate as result of sepsis across Wales.

## **Learning from Mortality Reviews**

We aim to reduce avoidable deaths and closely monitor this by using an agreed reporting measure, which is reported on a rolling 12-month basis. At the end of 2017/18, the rate remains at 1.83%, which is the same as the previous year.

## **Harm Free Care: Healthcare Acquired Pressure Ulcers**

Delivering harm free care and reducing pressure ulcers has been a priority for the Health Board over the past 12 months. By sharing best practice and supporting campaigns such as STOP Pressure Ulcers and END PJ Paralysis, we have seen a reduction in severe pressure ulcers being reported towards the end of last year. This will remain a priority for the coming year.

## **Hospital Acquired Thrombosis (Blood Clots)**

We have been working to reduce the amount of Hospital Acquired Thrombosis, or blood clots, recorded in our hospitals. On admission, a patient should be assessed as to their level of risk of developing a blood clot and compliance with this has increased to 74%, while treatment prescribed increased to 92% following the focussed improvement work.



We encourage patients to ask about the risks of developing blood clots and if safe to do so, we encourage them to keep mobile.

## **Improving our Buildings**

Over the past 12 months, we have continued to improve our buildings to ensure they are fit for purpose for both our patients and staff. Our programme of improvement has also allowed us to meet our wider social responsibility by incorporating sustainable and environmentally friendly design, which will reduce the impact on the environment. We are proud to say we have:

- Competed the extension to the Alaw Day Unit and outpatient area;
- Almost completed the Sub-Regional Neonatal Intensive Care Centre (SuRNICC) at Ysbyty Glan Clwyd;
- Opened new health centres for Blaenau Ffestiniog and Flint;
- Continued redeveloping the Emergency Department at Ysbyty Gwynedd:
- Continued with the Ysbyty Glan Clwyd Redevelopment Project.

## **Improving the Experience of Patients with Learning Disabilities**

In September 2017, we saw the launch of the Learning Disabilities logo as supported by the Paul Ridd Foundation <a href="http://paulriddfoundation.org/">http://paulriddfoundation.org/</a> The logo is a visual reminder to help healthcare staff easily identify patients and families who will / may require extra support in line with patient's wishes and the recognised best practice care bundles. The logo is a visual alert that will only be used when patients and families have given permission to be used on medical notes or in bed areas.

If you would like to speak to a member of the Learning Disabilities team for advice please call the Acute Liaison Nurses:

Ysbyty Gwynedd 07833634492 Glan Clwyd 07900052095 Wrexham Maelor 0776660247

#### **Infection Prevention and Control-Safe Clean Care**

The prevention of infection is a key priority for us as Health Board we are committed to reducing our rates of Clostridium Difficle (C Diff) and Staphylococcus aureus (MRSA and MSSA) infections found in the bloodstream. However, we did not achieve our reduction target for these

infections during the past year. The total number of patient infections with C-Diff for 2017/18 has increased by six more incidents of C-Diff compared to last year.

To help tackle the number of healthcare associated infections in our hospitals we launched our Safe Clean Care campaign at the start of 2018. This focuses on how staff, patients and visitors can all help to prevent the spread of infections and you can find out more CADWCH

about this on our website: http://www.wales.nhs.uk/sitesplus/861/page/94747

Another tactic we have used to help tackle infections is reducing the unnecessary use of antibiotics. We were one of the first Health Boards in Wales to support a project that uses blood tests to identify an infection in GP practices. This gives GPs the ability to quickly check blood results to decide whether someone needs antibiotics.



## **Falls Management**

Preventing falls remains a top priority for us. Any fall can have a significant impact on you as patient and your family. To help promote good practice our staff are required to complete training on Falls Management. The Stand up Together conference last autumn brought together our staff and partners across North Wales to share best practice.

## **Practical Obstetric Multi-Professional Training-PROMPT**



Multi-professional training in obstetric emergencies is widely recommended for safe care. We are the first Health Board in Wales to roll out this training and our aim is to reducing preventable harm to our mothers and babies. The PROMPT course is an evidence-based training package developed by the North Bristol NHS Trust.

To enable the provision of PROMPT on all three maternity units, additional in-house "train the trainer" days have since been provided to create a faculty on each site, which includes midwives, obstetricians and anaesthetists. PROMPT was fully implemented in September with a course be on each site monthly since.

## **Incident Management**

We are continuing to focus our approach to managing incidents in a timely manner and early identification of learning and sharing of lessons learned. All reported incidents are reviewed by the Corporate Teams, with a formal review undertaken within 72 hours to ensure an appropriate level of scrutiny and investigation.

**939** serious incidents reported to Welsh Government (April 2017 to March 2018)

358 serious incidents closed by Welsh Government (April 2017 to March 2018)

# **Effective Care**

## **Research and Development**



Research is a key part of improving the health and wellbeing of the people of North Wales. We are always looking for new ways to prevent, manage and treat disease and of bringing hope to people living with illness. The researchers making these breakthroughs need



help from members of the public to take part in clinical research studies. HealthWise Wales is your unique opportunity to be part of shaping the health and help plan for the future. Analysis of the data from the first 10,000 participants' to take part in this programme has produced five key findings, which can be seen in the image opposite. You can register through <a href="https://www.healthwisewales.gov.wales/about/">www.healthwisewales.gov.wales/about/</a>

Another creative example of innovation at the Health Board came from an Infection Prevention and Control Nurse who is

passionate about using non-traditional teaching methods to help healthcare professionals to learn, and has a zero-tolerance, has created 'Game of Stools' to educate staff in a fun, alternative way. The game encourages discussion between players about prevention and management of infection, and increases knowledge and confidence, ensuring patients are cared for promptly and safely.



## **Learning from Clinical Audit and Service Evaluation**

Clinical Audit and Service Evaluation continue to be tools that play a part in our Quality Improvement and to measure practice against agreed standards that are based upon the best available evidence, which may be national guidance, clinical expertise or research findings. A continuing priority for us has been the Welsh Government's *NHS Wales National Clinical Audit and Outcome Review Plan:* 2017/18. Here clinical audit projects and outcome reviews enable learning and comparison against other Healthcare organisations in England and Wales. Examples of where a National Clinical Audit and Service Evaluation has led to Quality Improvements include:

• The National Audit of Dementia, where identification of local priorities has been set by patient and carer forums as opposed to the Healthcare professionals;

• Service Evaluation of End of Life Care in our hospitals has led to the development and implementation of the Six Steps to Success education programme for Palliative and End of Life Care. The programme is for staff guiding and supporting them in caring for patients that are reaching a palliative stage at the end of their life. This has led to improved communication and guicker discharge home for end of life care where patients have expressed their individual needs and wishes for their care.

## **Using Real Time Data to Improve Quality**

The HARM Dashboard launched in October 2017, providing ward teams with real-time data on key quality indicators. This enables our Ward Sisters/Managers and Matrons to focus their improvement work on the areas that are most in need and means that essential information is at their fingertips. "This is saving me hours of time" (Ward Sister).



## **Improving Mental Health and Learning Disabilities**

The past year has seen many developments, achievements and the launch of key strategies that support and inform the direction of our care and services within Mental Health and Learning Disabilities, including:

- The launch of our Mental Health Strategy;
- The launch of Dementia Strategy;
- The launch of the Suicide Awareness Strategy.

#### New Ways of Working include:

- Taliesin Psychiatric Intensive Care Unit have adopted joint medical and nursing assessments to reduce the amount of information sharing expected of our service-users;
- Substance misuse recovery groups are running throughout North Wales, using an innovative approach where successful service-users graduating from the programme go on to deliver programmes themselves;
- Taliesin Unit from January 2018 are offering a system whereby a dedicated time or appointment is allocated to patients, carers, family and involved professionals as a Tuesday ward review;
- The Moving On In My Recovery (MOIMR) group programme is now running throughout North Wales for service users with substance misuse problems;
- Joint working with North Wales Police has led to a full time Registered Mental Health Nurse reviewing and assessing patients' needs.

## **Learning from External Inspections – Healthcare Inspectorate Wales (HIW)**

HIW provide the public with independent and objective assurance of the quality, safety and effectiveness of healthcare services, making recommendations to us as a Health Board to promote improvements.

During 2017-2018 Healthcare Inspectorate Wales undertook 13 inspections across the Health Board including five in Mental Health / Learning Disabilities, two in Community Hospitals, three in our main hospitals and three in our GP Managed Practices.

#### What we did well ...

- Multidisciplinary team working.
- √ Staff treating patients with respect and Kindness.
- √ Patients had a good experience of care
- Evidence of strong leadership in many

#### What we need to improve ...

- Estates issues (e.g. such as lighting in come garden areas & trip hazards).
- Staffing numbers.
- Medicines Management.
- Our documentation.

We monitor all actions via a monthly Board meeting to ensure we have plans in place to address the things that we need to improve.

HIW also published both their annual report for BCUHB specifically and an All Wales annual report, which can be accessed using the following link: http://hiw.org.uk/reports/localhealthboardstrusts/betsireports/?lang=en

## **Community Health Council**

The North Wales Community Health Council (NWCHC) is the independent health watchdog for North Wales. It represents the interests of patients and the public who use our health services in North Wales. The NWCHC monitors and scrutinises our health services to ensure safety and quality. They also work with our service planners to improve the patient experience within these services; one of the many ways the NWCHC does this is by visiting health premises using the following methods (undertaken by volunteer NWCHC members):



BugWatch - is a snapshot of infection prevention practice in our hospital settings. The BugWatch survey has been designed by the NWCHC with input from infection prevention professionals. The results of these surveys give an indicator of the patient experience relating to infection prevention and hygiene practice. Throughout the year, NWCHC undertook 67 BugWatch surveys across all of our hospital sites.

CareWatch - has been designed by the NWCHC to highlight and encourage high standards or patient care, respect and dignity, to identify poorly performing wards/ hospitals and to monitor progress towards improvement. The surveys are undertaken on an unannounced basis across all of our hospitals with some of these being carried out at night or at weekends. Throughout the year, 120 CareWatch surveys were completed.

**FoodWatch** – its primary focus is to monitor patient nutrition and hydration practices as well as visits to ward kitchens (including fridges). FoodWatch helps to ensure a regular NWCHC presence in our hospital wards. Throughout the year, 20 FoodWatch surveys were completed.

During the year, new SiteWatch (internal) and SiteWatch external survey methods were completed and as a result 36 surveys were undertaken looking at issues such as access to sites, car parking and the review of external and internal common areas within hospital settings.

Further surveys have been undertaken in Mental Health and Learning Disability Settings and Emergency Departments as well as specific projects in relation to issues such as staffing, hospital food, older peoples mental health.

In addition to the above, the NWCHC has worked closely with the BCUHB Transforming Care team to review the questions posed in the various 'Watch' style forms. This collaborative approach has allowed for a greater scrutiny of current standards and practices and has accounted for the integration of Equality Diversity and Human Rights considerations into the NWCHC survey monitoring visit forms. The NWCHC has also worked in partnership with us on a range of activities with a focus on equality impact assessments and surveys. This work will continue to be built upon in the coming year.

When reports are received from the NWCHC we ensure that they are sent to the local managers. The Local Manages then review the reports and develop action plans to ensure the findings of the surveys are acted upon. Our completed action plans are then returned to the CHC to provide assurance that the NWCHC findings have been received by the correct team(s) with lessons learnt and improvements made.

To find out more about the work of the NWCHC please contact:

Unit 11 Chestnut Court Unit1B and 1D Wilkinson Business Park

Ffordd y Parc Clywedog Road South

Wrexham Industrial Estate Parc Menai

Wrexham Bangor

LL57 4FH LL11 3AE

# **Dignified Care**

## **Patient Advice Support Service**

The Patient Advice and Support Service (PASS) launched at Ysbyty Glan Clwyd in July 2017 and offers confidential and impartial information and advice to patients, relatives and carers who encounter issues with health care at BCUHB.

Our objective is to ensure issues are resolved promptly and efficiently to the satisfaction of all parties concerned. The team address an average of 25 On-the-Spot (OTS) concerns per week and resolves them within 48 hours. The service wi

Spot (OTS) concerns per week and resolves them within 48 hours. The service will be implemented across all acute hospitals.



## **Improving Dementia Care in our hospitals**

The Dementia Strategic Action Plan was developed following engagement and consultation with people who are living with dementia, their carers, healthcare professionals and other organisations. We wanted to know what matters and what we as a Health Board needed to change.

This action plan emphasises the importance of bringing about change to ensure that we become a more dementia friendly organisation. We learnt that people with dementia do not always feel that they are being heard, and that carers do not always feel supported.

By making small changes we can make a big difference. I'd like you to think about the changes that you can make to be more dementia friendly. Together we can create places where people like me are understood, accepted and where we can feel involved and supported. **Dementia Ambassador**.



We as a Health Board

pledge that we will become a dementia friendly organisation. We will do this by ensuring that safeguarding is at the heart of everything we do valuing every individual through person centred approaches to care. Care will be compassionate safe and effective. Carers will feel welcome, valued and supported. We will engage with people and ensure that our care environments are enabling. Every person will be offered support and signposting.

During 2017, all ward environments were assessed using the recognised tool from the King's Fund in terms of the ward being Dementia friendly. Following this assessment improvements are under way with many of our wards particularly our community hospitals aiming for Dementia friendly status as seen in Llandudno Hospital earlier this year and the refurbishment of units such as Bryn Hesketh in Colwyn Bay.

Many of our teams have undertaken improvements to make the experience better for patients' their families and carers. The 'Who Am I' project is using the life experiences of patients with dementia to improve the way they are cared for in hospital, piloted in the Wrexham Maelor Hospital's Heddfan Older Person's Mental Health Unit has been credited with improving the mood of patients with dementia

Board and other Health Boards in Wales are keen to use it.

"At the heart of every person is a story, a history of their life and their personal identity. As people develop impairments and illness this does not mean that they forget their experiences or achievements. We can understand a patient's current treatment from their medical case notes, but there is nothing in there to tell us who they are or why they might behave in a certain way. We need to know the person behind the impairment to engage effectively"

and reducing their anxiety and agitation during their hospital stay. This is about to be implemented across the Heath



## **Improving Continence Care**

Providing care closer to home is essential. The recruitment of the Community Continence Nurses and the Community Stoma Nurse has had a positive impact on patient care. These roles provide additional support as an advisor, and educational support for care home staff. It has also had a positive impact on patients in their own homes as the specialist advice and support has reduced the amount of other healthcare staff visiting.

## **Improving Nutrition and Hydration**

We held our annual Nutrition and Hydration week in March 2018. We were able to introduce new ways of working, and raise awareness with our patients, visitors and staff. The week included:

- Reviews and audits how we assess your nutrition on admission to hospital and during your stay with us;
- Diabetes and salt awareness sessions:
- Afternoon 'tea party' as part of the Global Tea Party;
- Introduction of the Hydr8 and how well hydrated are you that includes posters that will around our hospitals in the toilets for you to check how hydrated you are.







# Timely Care

#### **Your Care Closer to Home**

We aim to provide as much care as close to home as possible. We aim to prevent, detect early and manage physical and mental health needs as outlined in our Strategy document "Living Healthier Staying Well". This has led to innovative projects and the rollout of essential services in our communities, such as:

- Heart failure Services and Angina clinics in many community Hospitals;
- Virtual clinics, where appropriate, to complete consultations without having to go to hospital;
- The development of a community Dietetic service for the care of diabetes in the community;
- The development of community services for Oncology and Haematology Patients (2,941 treatment events have been delivered in community settings during 2017).

## **First Point of Care with Hearing Difficulties**

Over the past 18 months, a new and innovative scheme for adult patients with hearing difficulties, tinnitus and specific balance conditions has commenced. The scheme is where an appointment can be directly made with an Advanced Nurse Practitioner as the first point of care, instead of making appointment with the GP. This is freeing up GP capacity and means patients can access specialist information, advice and management sooner and closer to their home. To date, this scheme has seen more than 6,000 patients in 31 GP Practices. Feedback so far has shown:

- 98% of patients reporting that their needs had been met;
- 97% rating the service as either "very good" or "excellent";
- 98% saying they would recommend the Audiology Service to others.

## Welsh Flying Medics or Emergency Medical Retrieval & Transfer Service (EMRTS)

Last year The Welsh Flying Medics, or Emergency Medical Retrieval & Transfer Service (EMRTS) Cymru, started operating from a new base in Caernarfon. This now means that airborne critical care and resuscitation facilities are within 20 minutes flying time of a patient anywhere in Wales. BCUHB is proud to support two out of three of the EMRTS airbases (Welshpool and Caernarfon).

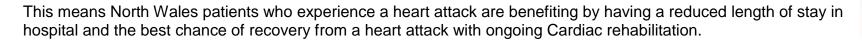


## **Trialling Advanced Paramedic Practitioners (APPs) – North Wales**

Between November 2017 and March 2018 we worked closely with the Welsh Ambulance Service to trial a new scheme provide care and support for people in their own home and prevent avoidable admissions to hospital. Advanced Paramedic Practitioners (APP) in rapid response vehicles were sent to assess patients with conditions not considered to be life-threatening with the aim of being able to treat them at home or refer them to alternative care providers. The pilot is now being evaluation, but some early signs of success were that 98% of patients rated the service as **excellent** and our Advanced Paramedic Practitioner, Berwyn Jones, won the Health Boards People's Choice Award.

## **Emergency Care following a Heart Attack**

A 24-hour cardiac response team is saving the lives of heart attack patients and giving them a better chance of making a full recovery. Since April 2017, the North Wales Cardiac Catherisation Lab has been providing state of art interventions 24/7 for patients following a diagnosed heart attack with an on call team always ready to go.





#### **Emergency Admissions**

Emergency Departments across Wales struggled with the increase in demand and the nature of the cases attending during the past winter. In the first half of the year our performance against the national 4-hour target was steadily improving, however the past winter has had a negative impact on this. At the end of March 2018, only 67.8% of patients waited less than 4 hours for treatment. Please access our waiting times app available for smart phones that can provide up to date information on waiting times for our minor injuries units and emergency departments across north Wales.

#### **GP Out of Hours Service**

Our GP out of Hours service provides urgent medical help and advice for patients who are unable to wait for a GP appointment. Last year the service dealt with more than 140,000 calls, which has been a steady rise year on year in number of calls. The service is available between 6.30pm and 8am, Monday to Friday, and all day and night at weekends and bank holidays. If you need to see a doctor during these times phone 0300 123 55 66.

# **Individual Care**

## **Patient Stories and Experience**

Receiving feedback on the care and services we provide is very important to us. Patient stories enable us to gain an insight into the quality of services provided through the voice of the service users.

For example, we have been working with the Centre of Sign-Sight-Sound (COS) to gather the stories of Deaf and Hearing Impaired service users. As a result, we have been able to improve understanding amongst managers and staff of the needs of people with sensory



impairments and access to British Sign Language (BSL) interpreter services. These improvements have led to improved access to our services for BSL users.

**Viewpoint** is our newly introduced **Real Time Patient Feedback** System which has been rolled out across BCUHB over the last 12 months. Support continues from the Patient Experience Team to promote the system and strengthen and encourage the use the data to drive improvement in a timely way. To give your feedback please access: <a href="https://secure.crtviewpoint.com/Online/Survey/37396626-2934-42b1-85ae-ee8600f7d8e8">https://secure.crtviewpoint.com/Online/Survey/37396626-2934-42b1-85ae-ee8600f7d8e8</a>

## **Human Rights and Equality**



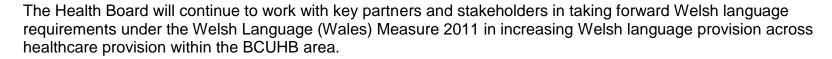
We continue raise awareness of Human Rights within our mandatory training and we have built upon this, this year as part of our Human Rights Day campaign. Our Executive Medical Director, Dr Evan Moore, sponsored this work Let's Stand up for Equality, Justice and Human Dignity, Human Rights Day, 10th December 2017 and during Equality Week 2017 our annual flag raising celebrations shows the Health Board's commitment to equality of opportunity for the LGBT+ community – both service users and staff. This year, we were delighted again, that representatives of both groups joined us at each of the main District General Hospital sites across North Wales as we raised the rainbow flag.

As well as this, we also took part in the annual Stonewall Workplace Equality Index (WEI), which is a benchmarking survey for employers around LGBT+ equality, this year for the first time fully inclusive of Trans measures. We are delighted to have reached 51<sup>st</sup> place in the index out of a total of 434 organisations taking part (up 44 places from our 2017 ranking).

## **Our Commitment to Welsh Language**

As part of our commitment to ensuring bilingual care for patients and the public, key improvements have been made during the year to increase awareness of the importance of providing services to our Welsh speaking population. A Language Choice Scheme, which identifies the language of patients by placing 'Welsh Speaking' magnets above patients' beds, has been rolled out across the Health Board ensuring patients are actively offered services in their preferred language. Feedback from staff, patients and families has been positive, with many patients saying how much more comfortable they feel being able to discuss their care needs in Welsh.

A new campaign 'Defnyddiwch eich Cymraeg / Use your Welsh' launched in February 2018 to encourage our staff to use their Welsh, whatever their level of ability. Patient feedback emphasises that patients appreciate any effort made to converse in Welsh. This campaign has raised awareness of the Welsh language and its importance within the healthcare, increasing the opportunities patients have to use the language.





## **Open Visiting**

Last June, we launched Open Visiting across our hospitals. This means you are able to visit at a time that is convenient for you and the patient, but we ask that the numbers of visitors at one time be restricted to two visitors with a patient whilst on the ward. This will help maintain the privacy and dignity of other patients on the ward.

Open visiting is key part of supporting John's Campaign, which allows a carer to stay with a patient with a diagnosis of dementia whilst they are in hospital. For someone with dementia, having a loved one by their side during their stay in hospital can be reassuring and comforting and involving a family carer from admission to discharge is proven to give better quality of care and improved outcomes.

#### **Active Birth**

In response to a survey of women's views of midwife-led care in Wales, a small group of midwives across BCU were trained to deliver Active Birth classes. Active Birth classes are designed to prepare the body and mind to activate the natural ability to give birth physiologically, celebrate pregnancy and birth, and empower women to choose how and where they deliver their baby. So far the response has been overwhelmingly positive and demand is growing quickly.

## **Maternity Voices**

"Patient involvement means more than simply engaging people in a discussion about Services. Involvement means having the patient voice heard at every level of the service, even when that voice is a whisper."



Our Maternity Services want all women and their partners to feel included in the planning and delivery of their maternity care by staff that they trust to give them the best care possible.

'Maternity Voices' was set up in summer 2017. It is a multi-professional group, which brings together those who use, and provide maternity services in BCUHB. The purpose of Maternity Voices is to contribute to the development and provision of quality services, which meet the physical, mental, social and emotional health of those who use our services in North Wales by ensuring that women and their families are at the centre of everything we do.

## **Putting Things Right**

There has been significant improvement in the number of open complaints and the timeliness of responses over the last year. Whilst this remains challenging this has been improved and sustained over the last year. We have seen a reduction of overall complaints open from 372 in March 2017 to 226 in March 2018 (complaints however peaked in September 2017 at 445). By March 2018, there were 121 (53%) cases open over 30 days, out of a total of 226 active cases.

**93%** of Complaints were **acknowledged** within 2 working days

**33%** of Complaints **responded** to within 30 working days

New complaints are now being managed on an "On the Spot" (OTS) basis where appropriate and if managed to the satisfaction of the complainant, the complaint can be closed. However if it is not appropriate to close on the spot, the complaint will be investigated in line with the Putting things Right framework. Between April & March 2018, 2,798 OTS concerns have been opened with 2,804 OTS concerns being resolved in total.

# Staffing and Resources

#### **Our Staff**

Our Staff are the key to providing safe, dignified, compassionate and effective care. It is essential our staff are skilled and well trained and supported to develop. We support our staff to undertake mandatory training, support their personal development and support specialised development by undertaking regular Personal Appraisal and Development Reviews (PADR) with our staff. The past year 61.6% of our staff had a PADR.



## **Leadership and Engagement**

Building on the results of the Staff Survey in 2016, we have implemented the role of Engagement Ambassadors. The role is about giving staff a voice regardless of what they do at the Health Board by providing open forums to offer solutions, share from each other and to support the solutions that can bring big changes for our staff and patients. This role compliments our Listening Leads. Ambassadors in Ysbyty Glan Clwyd hosted three events earlier this year that were well attended covering topics of Staff Resilience, Communication and Recruitment and Retention. We have come up with a "You said we did approach"







During the summer of 2017, we introduced the **Senior Leadership Walkarounds** across the Health Board, where a member of the Executive Leadership Team, often with an Independent Member of the Board, will visit clinical areas to meet staff and patients. This gives staff a chance to discuss their achievements and challenges with members of the Board.

At the start of 2018 we also launched our **Bright Ideas** initative, which encourages staff to share ideas of how we can improve efficiency, reduce waste or add value for our patients and staff. Suggestions are presented to a panel of judges who then support the best 5 suggestions to a trial of the idea.

## **Nurse Staffing Levels**

We have been busy recruiting all types of staff in the past year with a strong emphasis on recruiting nurses. We have delivered a series of recruitment days resulting in over **250 nursing staff** successfully being recruited. In addition, we have recruited **44** Return to Practice Nurses following completion of the Return to Practice course with Bangor and Glyndwr Universities.

Please check the web site for details of events and posts coming up for all roles across BCUHB https://www.trainworklivenorthwales.co.uk/

## **Professional Regulation - Nursing and Midwifery Council (NMC)**

As a registered Nurse and/or Midwife, it is a statutory requirement to undertake regular study and register as a professional on a yearly basis to ensure they are safe to practice and care for patients. It is essential that we have assurance that our registered Nurses and Midwives meet statutory NMC requirements. Thanks to strengthened reporting processes, there were only 11 total registration/revalidation lapses across BCUHB during 2017. This represents 0.22% of the total registered nursing workforce and is a significant reduction on previous years.

## **Work Experience**

We are committed to supporting work placements across BCUHB to give people a chance to enhance their knowledge and skills and gain an insight into the work and careers, which are may be available to them in the future. Last year, 152 applicants have been supported to undertake nursing work experience with 54 applicants being supported by other areas such as Pharmacy, Pathology and Radiology.

## Time to Change pledge/Staff mental Health Well-being

As part of the Time to Change Wales pledge and Staff Mental Wellbeing roadshows, the Counselling Team has signed up more than 200 Champions who are interested in challenging the stigma around mental health in the workplace and promoting mental wellbeing initiatives.



The purpose of the champion role is to help and support the Staff Mental Wellbeing and Counselling Team to raise awareness of support information and activities across BCUHB, promoting healthy lifestyles and positive mental health. Encouraging colleagues to access relevant health and wellbeing opportunities, collating feedback/ evaluation and statistical data, sharing best practice and staff stories of success.

#### **Awards and Achievements**

In the past year, many of our staff were award winners and many of our services gained accreditation for the services they provide. We would like to say a thank you to all our staff for their achievements over the past year there are so many to mention below are just a few of the many award winners and services who have successfully achieved accreditation:

- Hafod Community Mental Health Team received accreditation from the Royal College of Psychiatrists (Only the fourth in the UK to gain this prestigious level);
- Conwy and Denbighshire memory services maintained their accreditation;
- Trewerwyn Psychiatric Intensive Care Unit and North Wales ECT department have been awarded accreditations by their national bodies;
- Jean Morgan from our Enhanced Community Residential Service was named the winner of the Paul Ridd Foundation's Primary Care and Community Support Award at a glittering ceremony which celebrated the achievements of people involved in learning disability care across Wales;
- **Dr Alice Cole-King** first person in the UK to be awarded the Ringel Service Award from the International Association of Suicide3 Awareness:
- Cemlyn Roberts RCN Healthcare assistant of the year award from the Mental Health Liaison Team;
- **Beryl Roberts** Excellence in Leadership Award;
- Siwan Owen Welsh Language Award;
- **Sharon Manning** New Ways of Working Award;
- **Dr Jill Bishop** Consultant Oncologist was awarded the Royal College of Radiologists Trainer Award;
- Pam Wedley Macmillan Senior Information Facilitator has received a Betsi Star Award for not only providing help, support and information to patients with cancer but learning Welsh and sign language to help her communicate more effectively with patients and their families;
- Eirian Owen & Barry Walkden both Dementia Support Workers received a Betsi Seren Awards for their dedication to the role of supporting patients living with Dementia and their relatives / carers;
- Myra Sutton District Nurse received a Betsi Seren Award for her dedication to support her team and patients in December 2017 when snow made it difficult for our District Nursing Teams to reach their patients. Myra was there to support (digging through snow!) to ensure her patients received the vital medication needed;
- Amanda Durber Osteoporosis Specialist Nurse received a Betsi Seren Award for her passion for education and driving forward innovative ideas for the North Wales Bone Unit;
- All three Psychiatric Liaison Teams are accredited by the Psychiatric Liaison Accreditation Network (PLAN) via the Royal College of Psychiatrists, which is a huge achievement as BCUHB is the only health board in Wales to achieve this level of accreditation;
- **Stanley Eye Unit** national award from the Macular Society;
- **Alaw Unit** Awarded Internal Accreditation.







## **Special Measures**

Due to increasing concerns about the organisation's governance, the Health Board was placed in special measures in June 2015. Since then, as part of the three-phase Improvement Framework set by Welsh Government, an ongoing organisation-wide programme of work has been in place.

Following review of the End of Phase Three in January 2018, the Cabinet Secretary for Health and Social Services recognised that the Health Board had made some improvements across each of the special measures areas and in the case of Maternity Services de-escalated as an area of concern.

However, the Cabinet Secretary also identified several areas for improvement and he set the Health Board a number of new milestones to be progressed:-

- Leadership and Governance;
- Strategic and Service Planning;
- Mental Health:
- Primary Care including GP out of hours.

The Health Board remains committed to working to achieve further improvements in line with Welsh Government expectations.

## Looking Forward. 2018-2019

We want to deliver a "Safe, Effective and Compassionate" approach to care and to do no harm. We will accomplish this by putting the needs of our patients, their families and carers first. This will help us to give our patients, families and carers safe, effective and compassionate care every time in line with our Quality Improvement Strategy and the areas highlighted at the beginning of this report.