



Hywel Dda University Health Board

Risk of Harm & Poor
Patient Experience due
to Operational
Pressures



This report considers available quality & safety metrics and assesses the extent to which operational pressures experienced through the Autumn / Winter period have impacted on the risk of harm and poor patient experience.

Given the depth and breadth of data available relating to individual services and locations, this report provides a high level assessment at Health Board level only. Further analysis will be required at service / specific level.













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Operational Pressures Overview

UEC

Planned Care

Workforce











Urgent & Emergency Care (UEC)











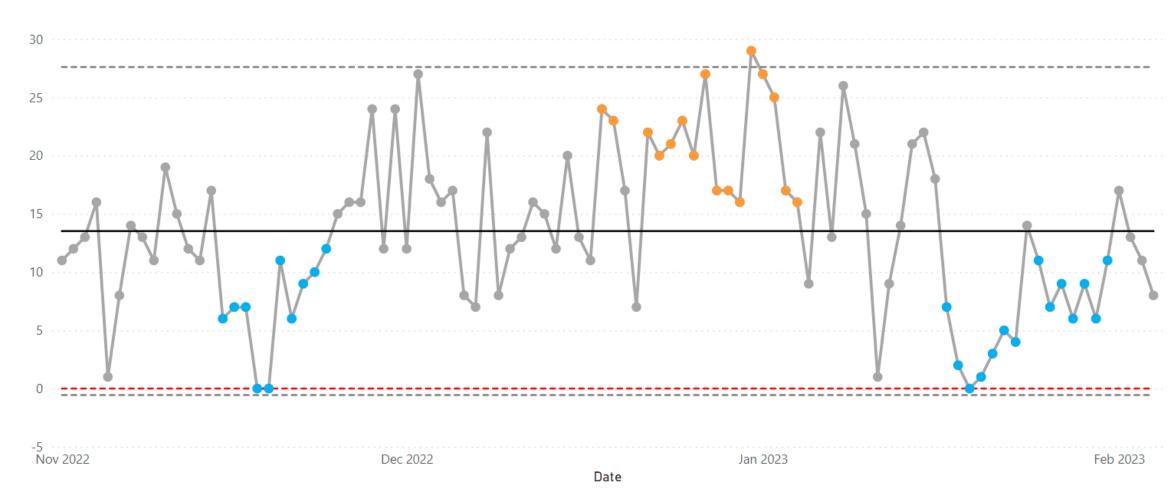


Metrics from Harm Dashboard - as at 4 February 2023



Hywel Dda Health Board Total

Ambulance handovers > 4 hours





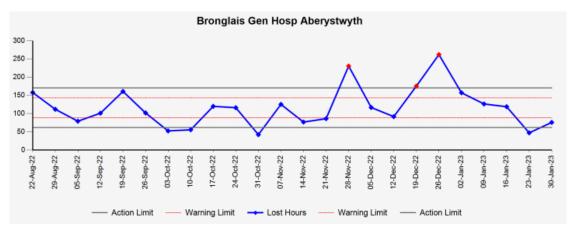


Transforming Urgent and Emergency Care (TUEC)

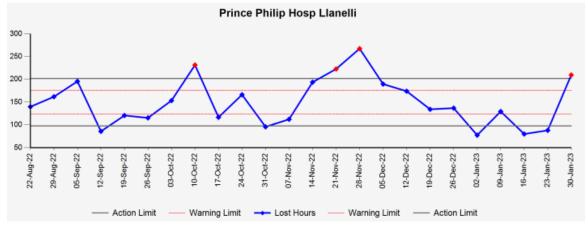
Ambulance handover - WAST 6 month Statistical Process Control Chart (SPC) - notification to handover -

time lost at 30 January

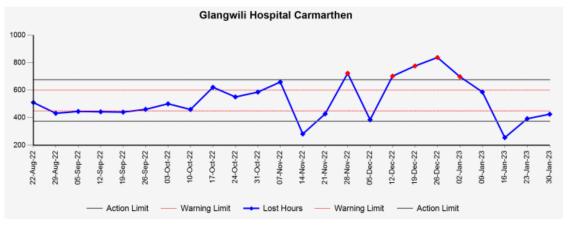
BGH



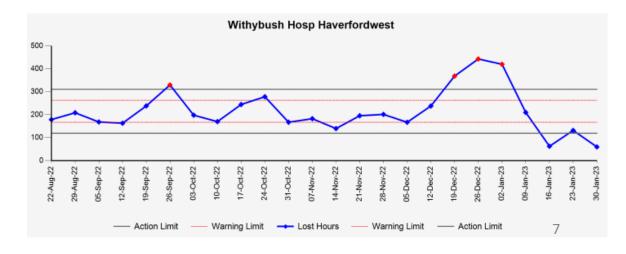




GGH



WGH

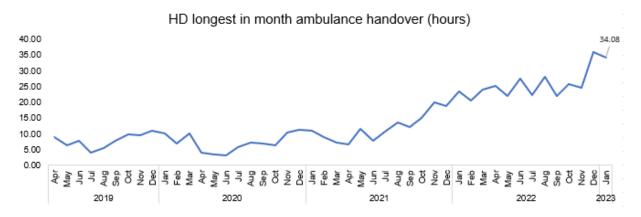






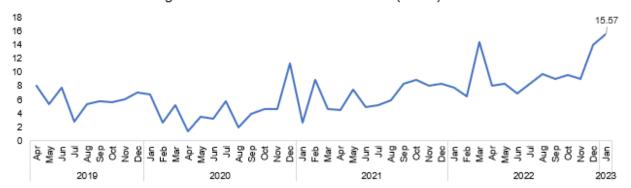
Ambulance handover – longest in month handover

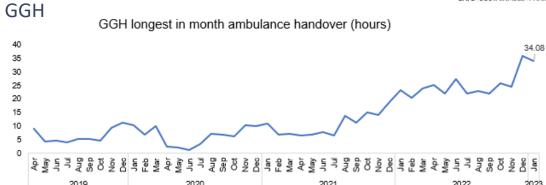
HDUHB

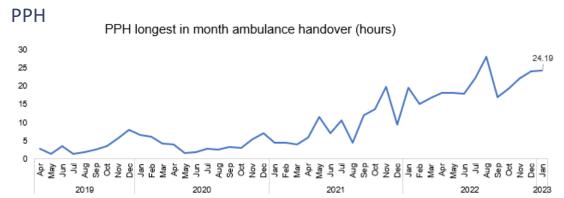


BGH

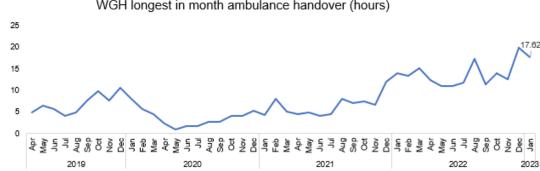
BGH longest in month ambulance handover (hours)











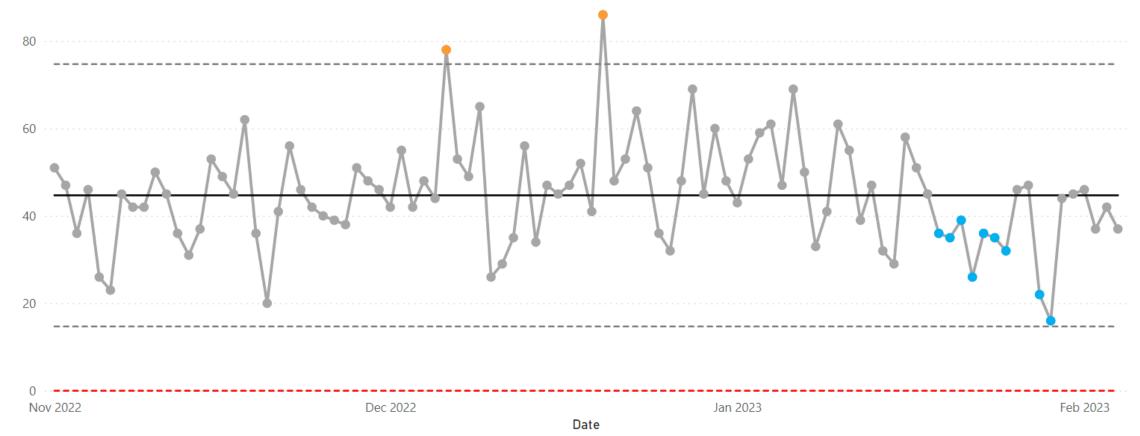


Metrics from Harm dashboard - as at 4 February 2023



Hywel Dda University Health Board Total

Patients waiting > 12 hours in A&E/MIU







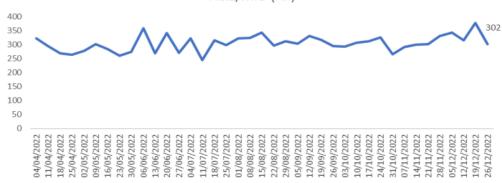


GGH

>12 hour performance

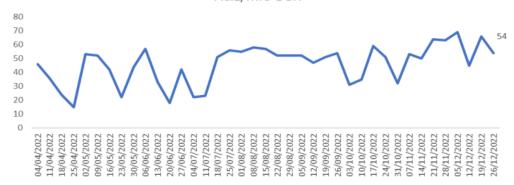
HDUHB



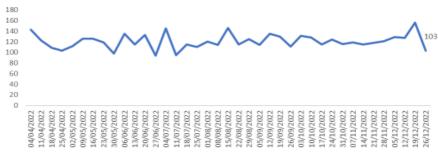


BGH

Weekly (Mon-Sun) number of patients waiting 12 hours or over in A&E/MIU BGH

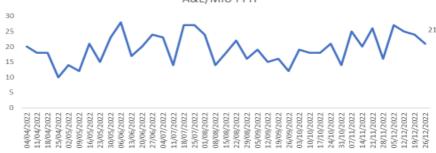


Weekly (Mon-Sun) number of patients waiting 12 hours or over in A&E/MIU GGH



PPH

Weekly (Mon-Sun) number of patients waiting 12 hours or over in A&E/MIU PPH



WGH

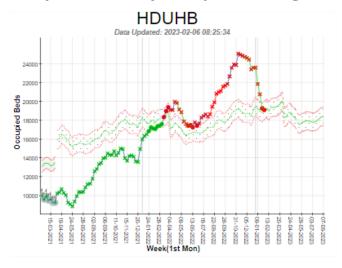
Weekly (Mon-Sun) number of patients waiting 12 hours or over in A&E/MIU WGH

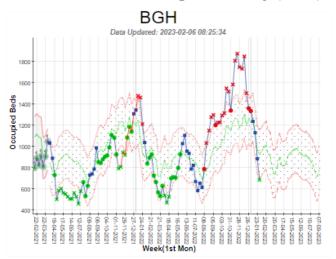


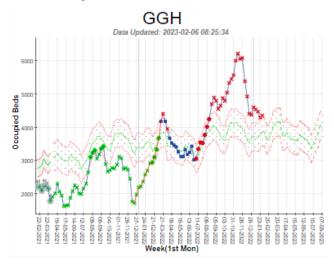


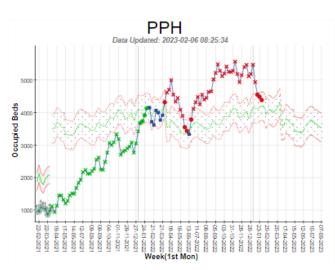


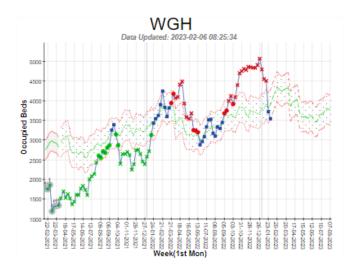
Occupied bed days for patients aged 75 and over with a length of stay (LOS) over 21 days











This data includes emergency admissions currently in hospital with a LOS >21 days as at the last day of the month

Note: this differs to the WG definition which also includes people discharged in the given month with a LOS >21 days

Urgent & Emergency Care (Overview)

- Hugely challenging period with 'unprecedented' pressures at times (particularly November / December 2022) with significant Infection Prevention and Control impact pre Christmas 2022
- Some indications of improvement through January 2023 despite difficult start to the month (reduced longer handover delays and > 12hr Emergency Department (ED) waits)
- Challenges remain with continuing pressures within ED environments, ward areas and community capacity
- TUEC focus continues











Planned Care









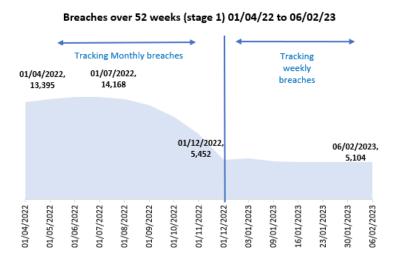


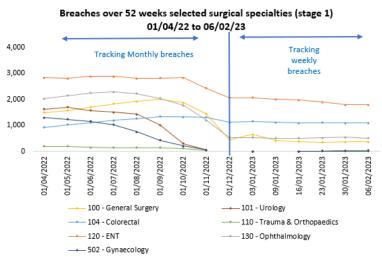




Planned Care

52+ weeks waits for a new outpatient appointment – Following our final landing position of 5,452 breaches over 52 weeks at the end of December 2022, we are now tracking the weekly breach position





Stage 1 > 52 weeks	Date 1 ^T						
Main specialty	Dec-22	03/01/2023	09/01/2023	16/01/2023	23/01/2023	30/01/2023	06/02/2023
120 - ENT	2,071	2,073	2,003	1,971	1,901	1,797	1,794
104 - Colorectal	1,120	1,155	1,117	1,097	1,111	1,089	1,089
107 - Vascular	598	598	564	555	551	529	523
130 - Ophthalmology	538	538	511	514	520	549	518
301 - Gastroenterology	506	503	502	476	486	471	452
100 - General Surgery	454	656	418	384	356	373	369
410 - Rheumatology	165	164	168	173	182	196	198
110 - Trauma & Orthopaedics				6	15	34	43
101 - Urology		2		10	14	36	41
330 - Dermatology				4	7	14	22
303 - Clinical Haematology				2	5	11	18
502 - Gynaecology		1		3	13	18	15
191 - Pain Management				5	11	12	14
400 - Neurology				2	3	5	8
320 - Cardiology				1	1	1	
430 - Geriatric Medicine			1	1	1		
300 - General Medicine			1			1	
Grand Total	5,452	5,690	5,285	5,204	5,177	5,136	5,104

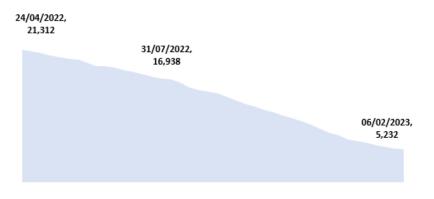




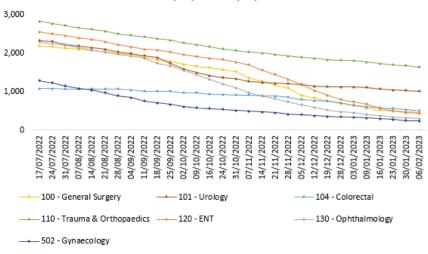
Planned Care

104+ weeks waits for Referral to Treatment (RTT)– 31 March 2023 cohort volumes

RTT cohort 104+ weeks @ Mar '23: 24/04/22 to 06/02/23



RTT cohort 104+ weeks @ Mar '23 (selected surgical specialties): 17/07/22 to 06/02/23



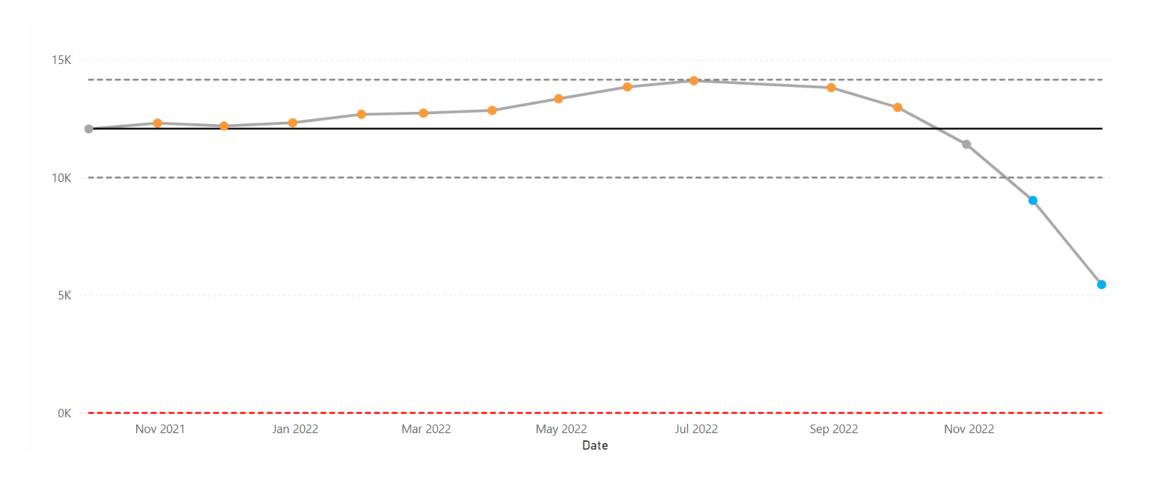
RTT cohort 104+ weeks @ Mar		Latest 4 weeks					
'23	Benchmark date						
Main Specialty	31/03/2022	16/01/2023	23/01/2023	30/01/2023	06/02/2023		
110 - Trauma & Orthopaedics	3,491	1,724	1,702	1,680	1,641		
101 - Urology	2,722	1,068	1,044	1,032	1,016		
104 - Colorectal	1,168	568	559	534	508		
100 - General Surgery	2,465	528	489	473	454		
120 - ENT	3,204	583	506	459	431		
107 - Vascular	495	331	340	321	315		
130 - Ophthalmology	2,969	376	334	315	295		
502 - Gynaecology	1,966	302	276	251	240		
191 - Pain Management	739	258	246	236	222		
300 - General Medicine	190	47	42	42	38		
330 - Dermatology	343	36	32	32	31		
410 - Rheumatology	714	29	28	23	18		
301 - Gastroenterology	573	25	24	22	14		
430 - Geriatric Medicine	534	10	10	7	7		
103 - Breast	188	4	2	2	2		
400 - Neurology	13						
420 - Paediatrics	48						
361 - Nephrology	2						
320 - Cardiology	39						
321 - Paediatric Cardiology	3						
340 - Respiratory Medicine	73						
713 - Psychotherapy	37						
328 - Stroke Medicine	4						
303 - Clinical Haematology	6	1	1				
Grand Total	21,986	5,890	5,635	5,429	5,232		





Hywel Dda University Health Board Total

Outpatients waiting > 52 weeks

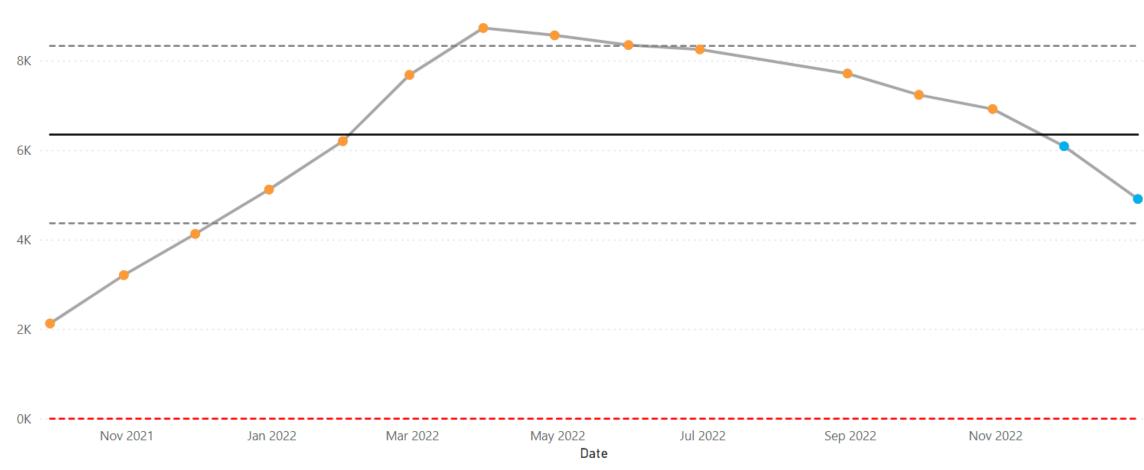




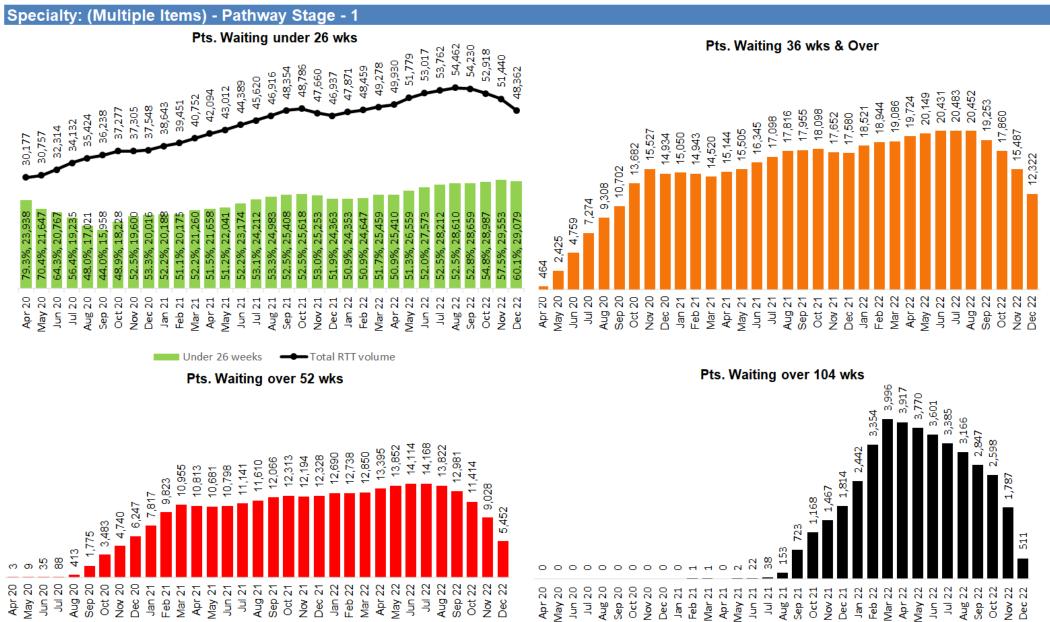


Hywel Dda Health Board Total

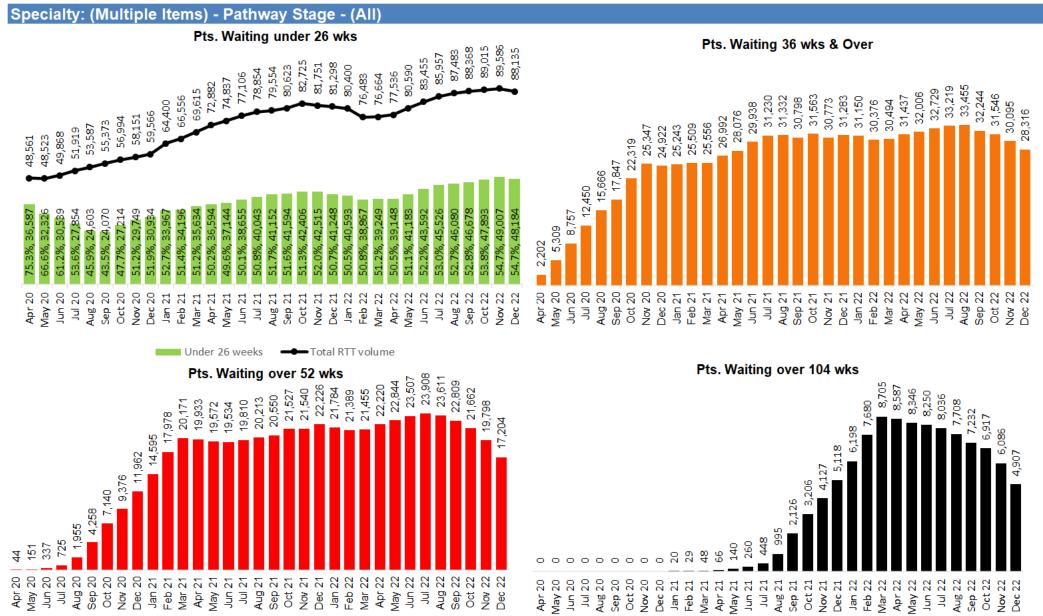
Patients waiting > 104 weeks



Waiting List: Patients at Stage 1



Waiting List: Patients at all stages



Planned Care (Overview)

- Steady improvement in waiting times / numbers but remains far from pre-COVID-19 pandemic experience
- Stage 1 > 52 weeks cohort reduction:
 - Ophthalmology (86%)
 - Urology (100%)
 - Orthopaedics (100%)
- Total Pathway > 104 weeks cohort reduction:
 - Ophthalmology (90%)
 - Urology (63%)
 - Orthopaedics (52%)
- Steady improvements in numbers of patients waiting > 26/36/52/104 weeks











Key Workforce Metrics









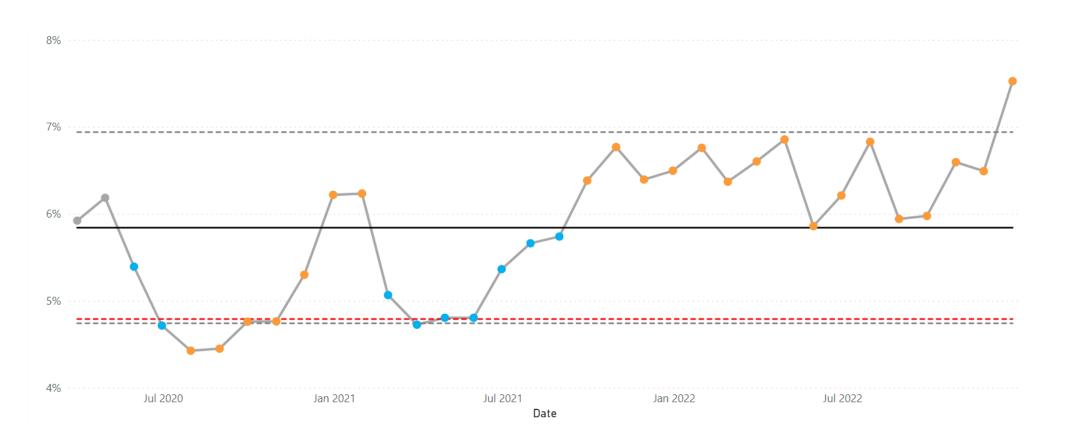






Hywel Dda Health Board Total

Staff sickness



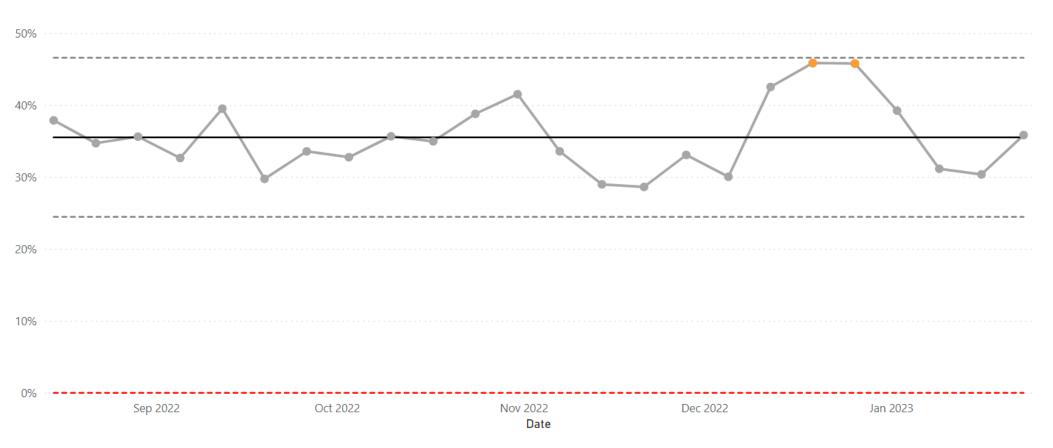


Metrics from Harm dashboard - as at 23rd January 2023



Hywel Dda Health Board Total

Nurse Staffing Level (NSL) not met, not appropriate - Night



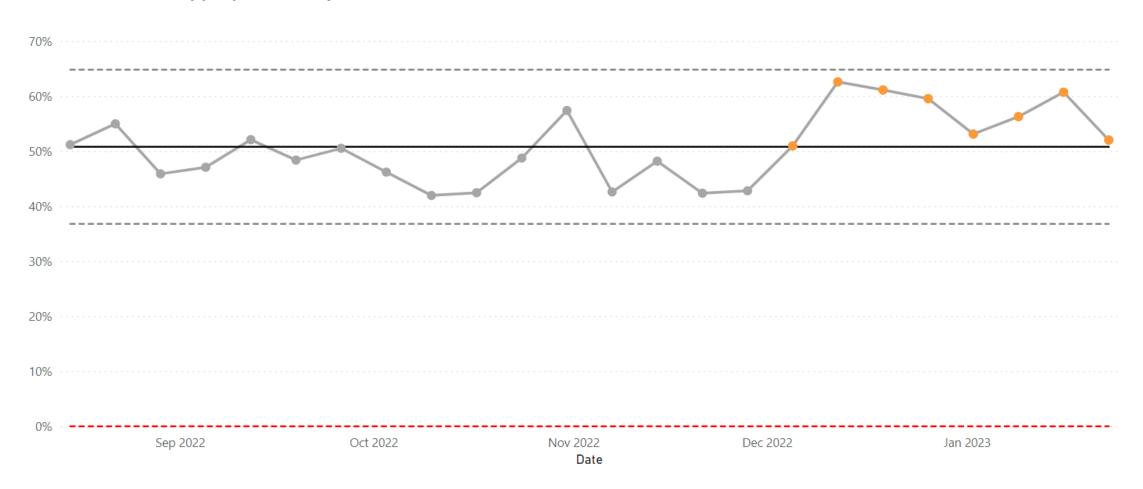


Metrics from Harm dashboard - as at 23 January 2023



Hywel Dda Health Board Total

NSL not met, not appropriate - Day



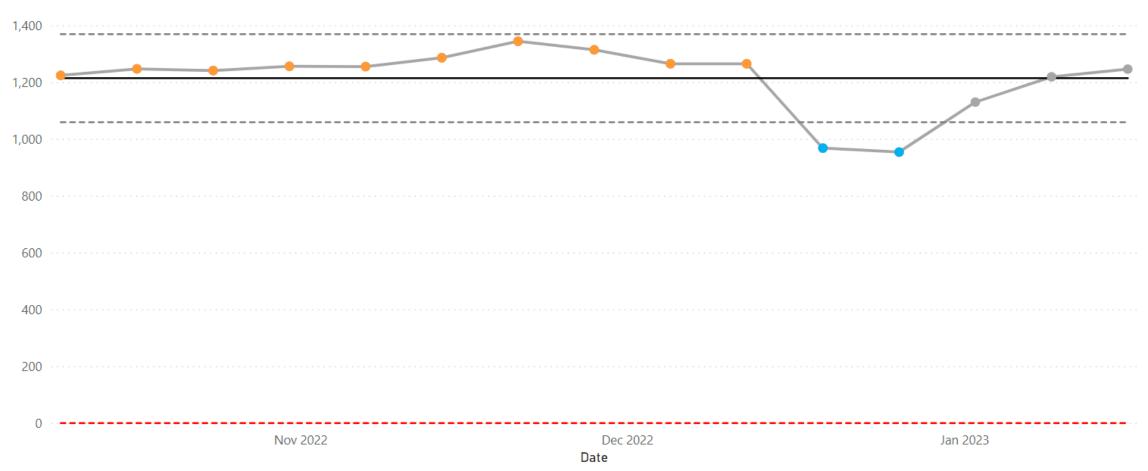


Metrics from Harm dashboard - as at 16 January 2023



Hywel Dda Health Board Total

Instances of Registered Nurse (RN) agency usage



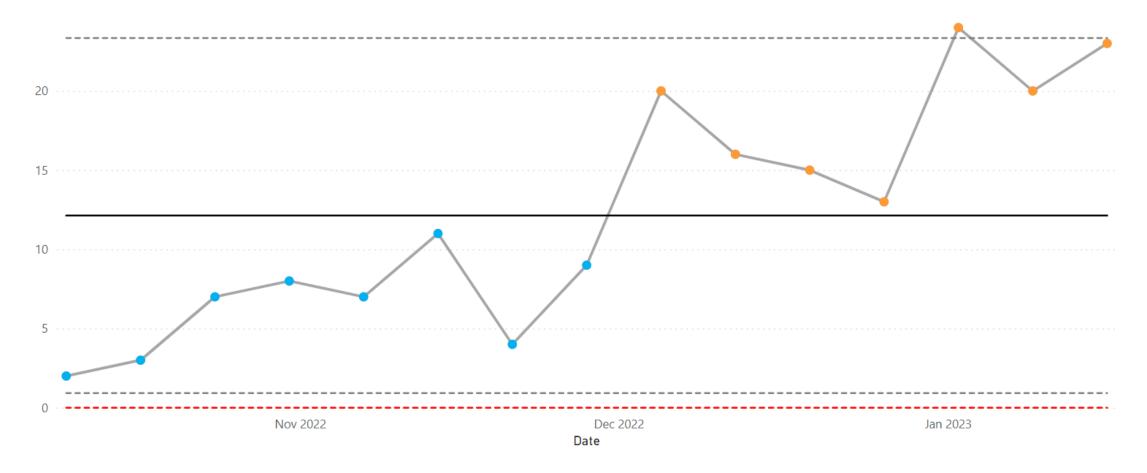


Metrics from Harm dashboard - as at 16 January 2023



Hywel Dda Health Board Total

Instances of Health Care Support Worker (HCSW) agency usage



Workforce Metrics (Overview)

- Significant increase in reported staff sickness through Autumn / Winter above upper control levels - Additional impact from COVID-19 & Flu
- NSL not met (night) significant peak December 2022 into January 2023 although improvement in latter part of January 2023
- NSL not met (day) consistently above 'normal' level December 2022 and January 2023.
- RN Agency usage above 'normal' levels November/December 2022 with brief reduction end December 2022.
- HCSW Agency usage significant increase December 2022/January 2023











Risks of Harm & Poor Patient Experience

So what is our Safety Dashboard telling us?















Hywel Dda Health Board Total

Reported incidents: Total Patient Safety Incidents

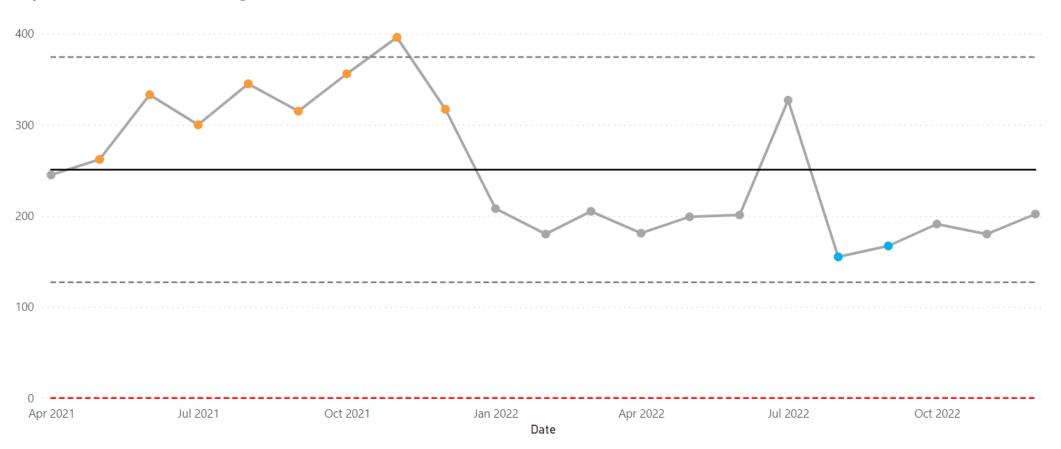






Hywel Dda Health Board Total

Reported incidents causing moderate or worse harm

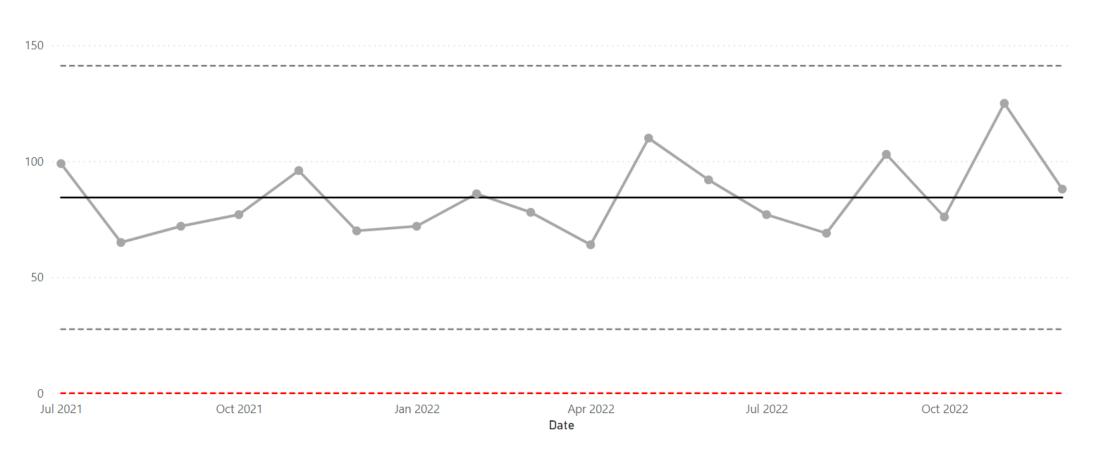






Hywel Dda Health Board Total

Investigated incidents causing moderate or worse harm

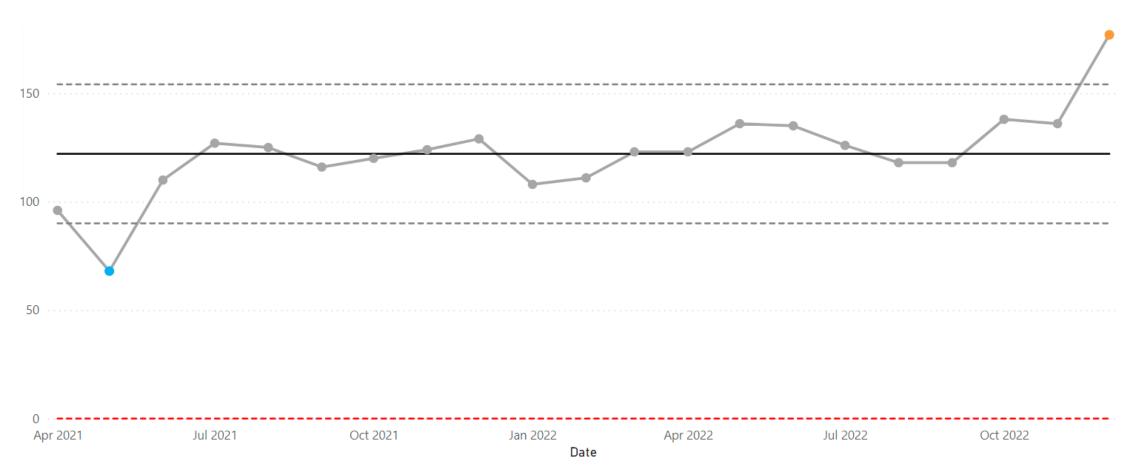






Hywel Dda Health Board Total

Pressure damage developing or worsening during care







Hywel Dda Health Board Total

Medication errors

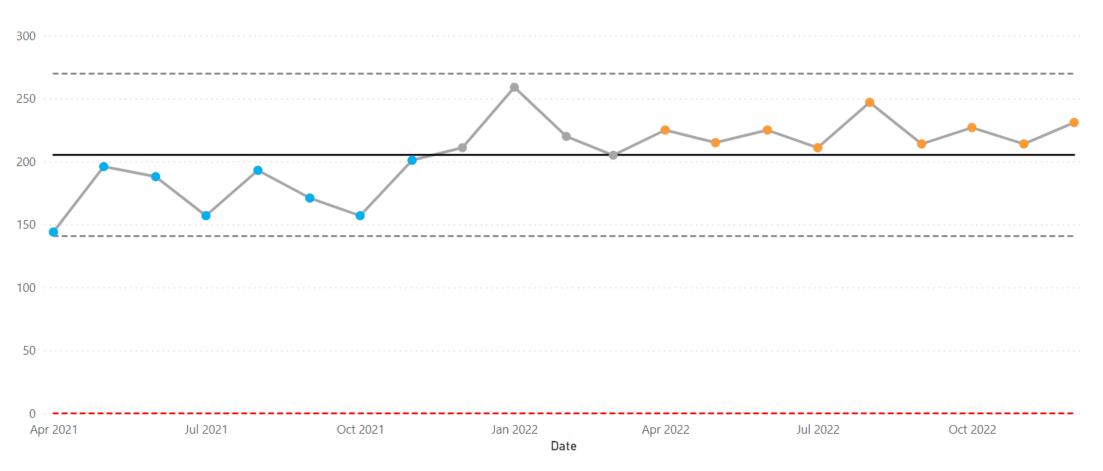






Hywel Dda Health Board Total

Patient falls

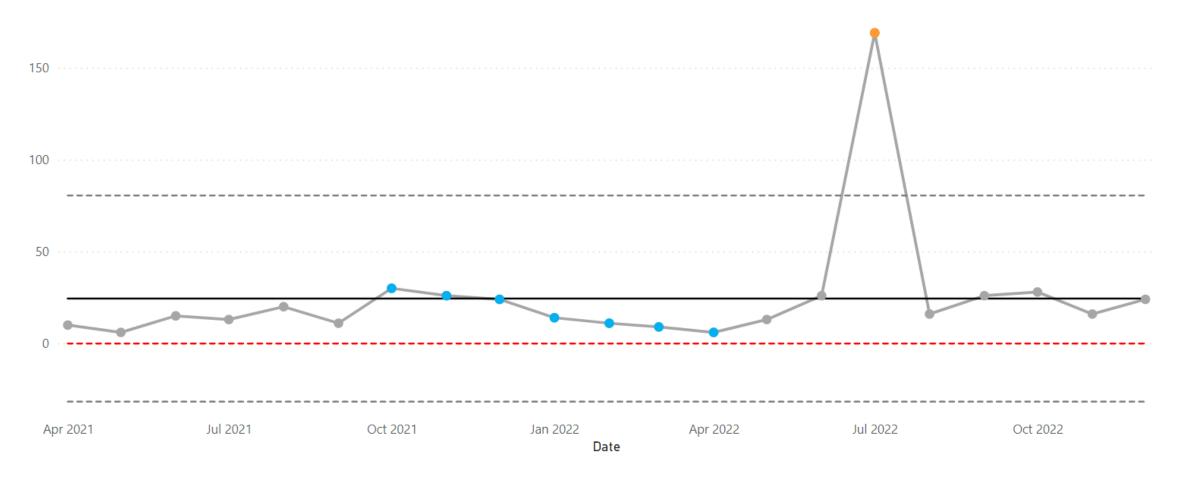






Hywel Dda Health Board Total

Infection control incidents



Safety Dashboard (Overview)

- Increase in reported patient safety incidents through Autumn / Winter with lesser but steady increase in incidents causing 'moderate or worse' harm (although below 2021 levels)
- Sharp increase in reported incidence of pressure damage
- Sharp increase in reported medication errors November 2022/December 2022
- No discernible trend in reported patient falls through 2022 but step increase over 2021
- No discernible trend in reported infection control incidents since summer 2022 (despite impact of COVID-19 & Flu in December 22)









Risks of Harm & Poor Patient Experience

So what is our Concerns data telling us?













Services receiving most 'Putting Things Right' (PTR) complaints Jan 2022 –

Ja	<u>n 2022 </u>																
											■2023 Grand Total						
ı	Row Labels	ĮΤ	Jan		Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	
ı	■ Managed through PTR		1:	14	114	120	140	156	151	158	192	159	180	185	113	125	1907
ı	Accident & Emergenc	ΣУ	,	12	4	22	21	16	16	28	28	18	13	23	20	18	239
ı	Ophthalmology			2	9	7	10	10	16	11	17	10	14	19	5	7	137
ı	Urology			7	4	6	14	10	10	13	11	12	16	18	5	4	130
ı	Orthopaedics			14	11	8	8	12	14	15	6	10	11	14	3	3	129

'Unexpected' reduction in reported concerns via PTR through Dec & Jan

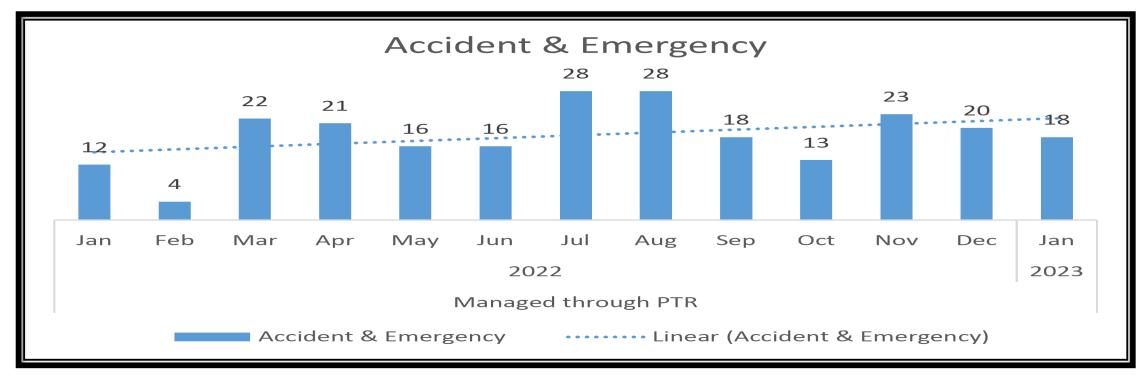








A&E 'Putting Things Right' complaints Jan 2022 – Jan 2023



 Reduction in reported concerns via PTR through December 2022 & January 2023

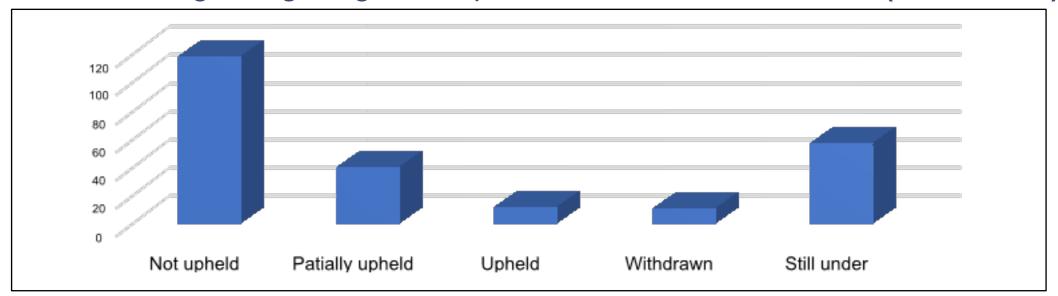








A&E 'Putting Things Right' complaints Jan 2022 – Jan 2023 (Outcomes)



 Complaints are graded at point of receipt based on the severity of harm being reported, then regraded following investigation. Ten complaints were upheld but felt to represent no harm or low harm. A further two complaints were felt to demonstrate moderate harm

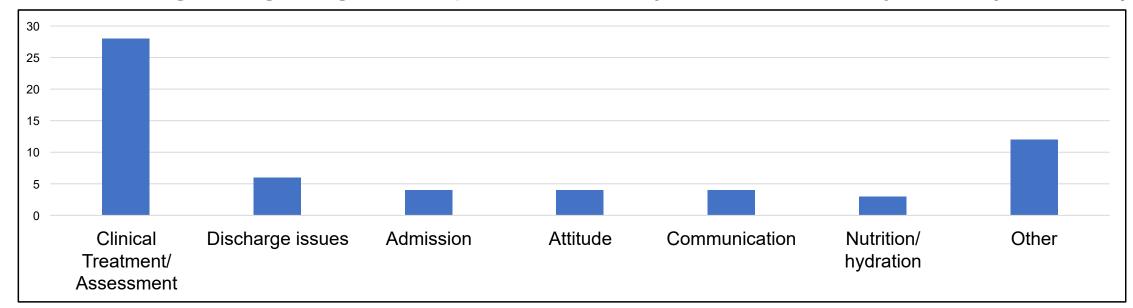








A&E 'Putting Things Right' complaints January 2022 – January 2023 (Themes)



 Of 61 complaints received in November and December 2022, most complaints had concerns about clinical treatment or assessment as their primary issue (table reports primary issue of concern only)



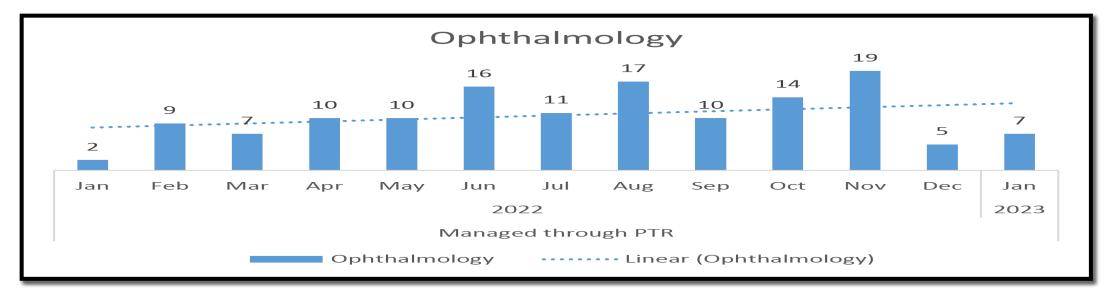








Ophthalmology 'Putting Things Right' complaints January 2022 – January 2023



- 137 complaints received, 11 are still being investigated. 24 were fully upheld, although with no or low levels of risk.
- Common themes: waiting times for treatments and appointments (cancellation and delays)
- Significant reduction in concerns received December 2022/Jan 2023
- Is there a correlation between improved waiting times and reduction in reported concerns

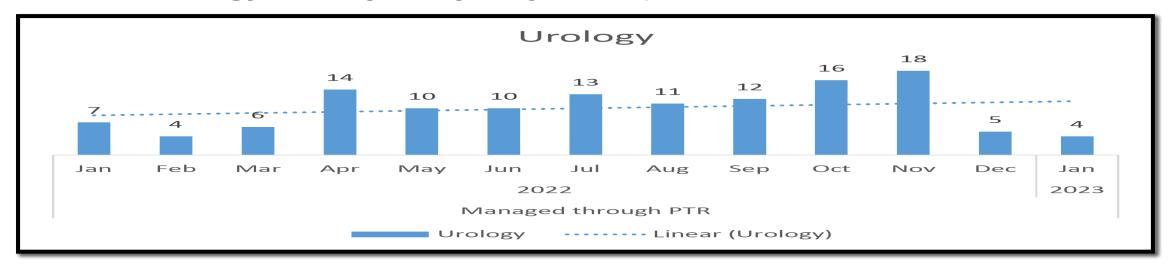








Urology 'Putting Things Right' complaints Jan 2022 – Jan 2023



- 130 urology complaints received, 16 are still being investigated. 19 were fully upheld, although no serious harm has been identified.
- Through November 2022, the overriding theme continued to be delays in receiving outpatient appointments, with a noticeable reduction of complaints in December and January 2023:
- Is there a correlation between improved waiting times and reduction in reported concerns?





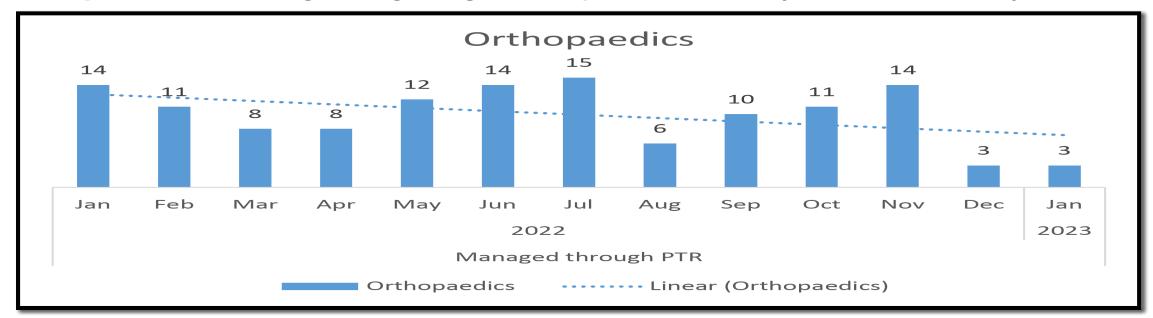








Orthopaedics 'Putting Things Right' complaints January 2022 – January 2023



- 129 orthopaedic complaints, 11 were upheld although no serious harm identified
- Common themes (delays, communication and staff attitude)
- Notable reduction in concerns received during December 2022 /January 2023
- Is there a correlation between improved waiting times and reduction in reported concerns?











Concerns (Overview)

- 'Surprising' reduction in concerns received December 2022 and January 2023 in 'top 4' areas
- A&E / ED concerns reduced to early Autumn levels with majority 'not upheld' and limited 'moderate' harm (to date)
- Majority of A&E / ED concerns relate to clinical assessment / treatment
- Significant reduction in planned care specialty concerns received December 2022 to January 2023
- No new cases of planned care specialty serious harm identified with majority of concerns relating to delays
- Possible correlation with waiting times/numbers improvements and/or Waiting List Support Service (WLSS) impact.











Risks of Harm & Poor Patient Experience

So what is our Patient Experience data telling us?











Overall Patient Experience Performance Over Period

Positive Patient Experience





















Patient Experience Performance

% Positive Patient Type	Oct-22	Nov-22	Dec-22	Jan-23	Total Positive Responses	Total Responses	Very good	Good	Neither good nor poor	Poor	Very poor	Don't Know
Total	92.5%	94.0%	94.1%	95.3%	93.9%	8876	6346	1486	443	252	253	96
Day Case	97.9%	100.0%	97.4%	100.0%	98.8%	256	219	31	3	2	1	0
Emergency Patient	88.4%	90.9%	89.9%	93.8%	90.8%	2479	1599	481	166	100	112	21
Inpatient	92.0%	93.4%	91.8%	94.6%	92.8%	748	536	123	31	26	25	7
Maternity Inpatient	100.0%	100.0%	100.0%	66.7%	95.7%	26	19	3	3	1	0	0
Maternity Outpatient	91.7%	87.5%	100.0%	94.4%	92.2%	94	62	21	4	3	4	0
Mental Health Inpatient	100.0%	100.0%	100.0%	80.0%	100.0%	3	1	2	0	0	0	0
Mental Health Outpatient	77.8%	100.0%	100.0%		85.0%	22	12	5	2	1	2	0
Outpatient	93.8%	95.0%	96.7%	96.1%	95.2%	4444	3303	702	188	105	95	51
Paediatric Inpatient	88.9%	88.9%	100.0%	88.9%	94.4%	38	28	6	1	1	1	1
Unmapped	95.4%	95.4%	96.0%	95.4%	96.0%	765	566	112	45	13	13	16











Emotional Sentiment Analysis of Feedback

well done superb at ease was kind well done brilliant exceptional awful amazing cheerful pleasant anxiety compassion complaint rude friendly kindness anxious thanks fabulous pleased excellent impressed pleased excellent impressed disappointed appalling delay lovely happy terrible reassured fantastic outstanding eventually reassuring appreciate stressful compassionate "my concerns" compassionate











Emotional Sentiment Analysis of Feedback

"failed to" challenging pointless "waste of time" confusing Confusion
useless
"didnt listen" difficulties trouble "not listen" awkward frustrateddelay difficulty delayed COnfuse dignored bored agitated stressful annoyed eventually ridiculous nuisance disappointed barrier gripe bothered disappointed barrier gripe inadequate demanding frustrating unhelpful "the stress" unnecessary stressed impossible disappointing annoying "only problem" "was bored" "the only problem'











Patient Experience(Overview)

- The overall Patient Experience performance across the health board (measured by Friends and Family Testing survey) has marginally improved over the period (increased by 2.8% between October 2022 and January 2023)
- To what extent does this reflect the incredible efforts of our staff despite significant operational challenges and/or a 'stoic' / tolerant patient population whose expectations are being tempered by increasing 'acceptance' of nationwide NHS challenges?
- The main driver of negative feedback reflects delays in the provision of elective procedures (particularly in Urology and Ophthalmology) - contrast with concerns data.











Summary

- Increase in reported patient safety incidents through Autumn / Winter with lesser but steady increase in incidents causing 'moderate or worse' harm (although below 2021 levels)
- Notable increases in pressure damage and medication errors in particular
- In contrast, reduction in concerns received noted in December 2022 and January 2023 in 'top 4' areas
- Similarly, reported patient experience appears to be improving (at least by patients who have accessed our services)
- Safety Dashboard Phase 2 will include patient experience and concerns, thus supporting triangulation of data
- Quality metrics emerging from the TUEC work streams need to be incorporated.
- NB: Care required in terms of consistency of reporting periods when assessing available data
- UEC & Planned Care improvement programmes are showing early signs of reducing the extent and impact of operational pressures

Recommendation

For QSEC to note the update provided and receive assurance from:

- the developing quality and safety metrics and systems evolving to assess risks of harm and poor patient experience
- the early impact of the UEC and Planned Care improvement programmes in reducing the extent of operational pressures which drive risks of harm and poor patient experience









