

**ED CLINICAL GOVERNANCE MEETING**

**20 MAY 2016 @ 11:00am**

**ED REGISTRARS’ ROOM**

**Present:**

**Darren Hiller (Chair) Steve Haig Charlotte Forsyth Ian Kendall Gareth Clark**

**Rana Nag Atif Latif Samantha Burke Annette Baskerville Bethan Whitehead**

**Nick Blundell Patricia Monteiro Su Berry Nick Lythell**

**Apologies: Leighton Day, Chris Bull, David Warren, Liz Barneby, Ben Aslam, Kash Aujla, Amanda Vittles**

|  |  |  |
| --- | --- | --- |
| **Item** | **Details** | **Action** |
| **1** | **Apologies and Welcome** |  |
| **2** | **Previous Minutes and Action Tracker Review**  The minutes of 01.02.16 have been uploaded to the Intranet. The red ring binder in the ED staff room contains minutes of the CG meetings and a list for staff to initial to confirm they have read the minutes. | IN/CG |
| **3** | **Review of Department / Speciality Quality Goals & Measures**   1. **Sepsis 6 – Nick Lythell**   Sepsis 6 – All very good – 98%. Delays in treatment post triage a problem  Screening of Medical and Surgical patients not very good - EDA teaching required.  Ciprofloxacin – Oral or IV? Discussion held on which is more appropriate? Oral intake slower into blood system, IV quicker into blood system. Query re interaction in pts with complex allergies. Need agreement on what should be given! Nick Blundell (NB) to take to Pharmacy for discussion & report back.  Overall doing very well, with the exception of when department very busy.  Sepsis 6 – need to check Other triggers, not just Lactate!  Need to be “Slicker” with more complex patients!  GP referrals – On “Triage” need to do Full History!!  Nick (NL) to check who triaged pt. on “breaches” and pass to Annette to review with Nurses ?? query further teaching required!  “poor reception from Medics” for sepsis patients! Refer to NL for investigation!   1. **VTE Risk Assessment – Gareth Clark**   Target is 95%! We are consistently falling just below target.  All patients being admitted to Obs **MUST** have an Obs Chart and VTE Risk assessment MUST be completed for All Obs Patients!  With DSP/DSH patients it is assumed that all will stay in ED Obs for Less than 24 Hours, which is not always the case!  Assessment can be signed off by any ED Staff – only three ticks! Should be done when Drugs chart being completed!   1. **WHO Checklist – Saif Al-Nahhas (SA)**   Check list is very time “heavy”! **This Must be done!** Can be completed either on paper Or electronically. The Target is 100%. Last “review” only 39 were recorded out of 67 eligible patients! Only 10 need to be audited! Must be compliant!  ? less noticeable in Resus | NB  NL  NL/AB  NL  GC  SA |
| **4** | **Clinical Effectiveness**   1. **Clinical Audit**   Mario currently preparing Audit – to be ready for next meeting – 24th June 2016 at 12h30!   1. **Feedback from Mortality & Morbidity Meetings – Patricia Monteiro (PM)**   Audit will be ready for next meeting 24th June 2016 @ 14h00.  Collation of Monthly figures – loss of support staff.  Demographic data collated but causes lost – coroners do not record due to confidentiality. ED Send the list to the Coroners who then send it back and only then can we update our own paperwork.  Received March / Aprils paperwork last week (week of 9th May)!  Cause of deaths only recorded when post mortems have been performed, cause of death’s on patients who do not have post mortems exist on paper, but there is no-where for this information to be updated on Medway.  Getting updated information is very time consuming!  Pat to discuss with Constantin Jabarin (CJ) re “adding” this info to Medway.  Duty of candour should be included on M&M’s – Only about ± 25% - 40% is currently included.  ?? SHO to be allocated to assist PM with the collation and prep of feedback   1. **NICE Guidance**   2 in February   * Spinal Injury – standard practice * Complex Fracture Management – Long bone – open fracture, plus pelvic fracture   Clinical Governance file/folder to be put into staff room and NICE Guidance updated Monthly   1. **CAS Alerts relevant to department – Darren Hiller**   Not aware of any currently   1. **CQUIN’s**   Sepsis target is currently 90% which is not achievable! Will be reduced to 80%  COPD – no CQUIN known  Paeds – Atif Latif – None known | PM  PM/ |
| **5** | **Research and Development**  To be Updated at next meeting. |  |

|  |  |  |
| --- | --- | --- |
| **6** | **Openness**  **i) Complaints and Concerns**  Annette Baskerville  136/1928 – Young boy tripped – appropriate review area  136/8828 – White Lodge care lodger – Cannula not removed  118/0028 – patient said no-one was listening to her re IV steroids  160/0228 – no-one notified next of kin  150/6528 – Complained about volume of attendees  151/1728 – Minors waiting area – very cold, smoking – get elderly to warmer room  153/4428 – FAST type symptoms, not dealt with “immediately” – time of assessment!  133/2528 - ?very large patient – assigned nurse “not caring”. Query as pt. a “serial complainer”  140/9429 – Allergic reaction – patient sent to Sequol – ? normal pathway?  Need to change our “terminology” to something more appropriate, i.e. *transferring pt. to a more appropriate area for treatment, etc.*  Samantha Burke  Pt. – 5 month history of headaches, pt. re-directed to Seqol. Pt. returned to ED for Medical review. Pt. had had a CT 5 months earlier which was clear. A 2nd CT was then done and a tumour was noted!  Darren Hiller  Pt. attended with facial injuries, lost teeth, damaged dental area. Had recently had eye surgery for glaucoma. No eye review was done during patient’s attendance, even though pt. had trauma to the eye.  *Issues: Medway not updated correctly!*  *Need to make sure all surgery, etc., treatments, etc. are picked up on Medway!* NB – ensure examination of patient is thorough, get full history from patient re injuries, surgery, etc. Must ensure documentation is completed properly and correctly.  **ii) Compliments**  1. Tim Slade – Sincere thanks from mum for looking after daughter, mum said everyone worked well together.  2. Sally-Ann – Son – Shoulder dislocation  **iii) Friends & Family**  Return of Friends and Family forms – score = 4.47  All staff to ensure they hand out the Friends & Family cards.  **iv) Duty of Candour**  1 case – Missed FAST Positive |  |
| **7** | **Risk Management & Patient Safety**  **i) Incident Themes and Learning**  IR1 Themes  - 89071 – BIPAP not available – a lot of time is wasted looking for one – escalated to Site Team – Annette to take forward  - Transfer – 89318 transfer pt. to LAMU by ED Nurse – No handover paperwork, ? bear hugger not in use, Nurse doing the transfer did not know anything about pt.  - Pt. Self-Discharged – against medical advice. Police involved, partner abusive, 3 children – social care, need to follow up the following day – domestic violence – reinforce – Lucy Avenell to be informed for further training.  - Drug Errors – 89423; 89108; 819325, etc.  a) Two lots of antibiotics prescribed to patient who has penicillin allergy!  b) Pt. confused, could not give answers! No Checks done, no alerts checked.  c) Ibuprofen given to a patient on Warfarin – Flagged up by Pharmacy  d) 1 dose of IV Frusemide Not given to patient!!! Must get medicines plan from Dr’s – Is difficult, but Medications must be written or typed, either:  - Write Treatment and Plan in the Antibiotics, etc. section  - Put in Bloods section on the white board  - Gareth to discuss with Constantin Jabarin if a tick box “other” can be added to Medway for this?  e) Shelby Myerscroft – Pt. is a regular attender! Several IR1’s re restraining & being sectioned!! Patient has a very Clear Plan – she is Not to be Restrained or Sectioned!! Need to de-escalate - NOTE: Don’t admit to Obs, try not to escalate!  - 89369 – Information Governance – Patient sent to x-ray with a blue form which had another pts.’ details on the back of the form!  - Image of an x-ray’d photograph was put on Facebook  - 89116 & 89402 – Venflon removals – Must be removed before pt. is discharged!  - 89255; 89615; 89683; etc. – A lot of Obs Patients display violent & aggressive behaviour!! All Obs staff need extra training – Need to have the knowledge and the capacity of what we can do, and thus avoid escalation issues.  - ELPAS badges are currently being issued to all ED Staff  Atif Latif  - Paeds IR1’s – AL  Any Concerns – Call EDS & Social Services – form on internet – e-mail and print for ED scanned notes  Patient’s label to go in red book – Safeguarding Checklist & complete Sharing Form!!!  **ii) Overdue Incident Investigations**  - hypothermic patient transferred to LAMU– Darren & Annette  - 89071 – BIPAP not available – discussed with Annette to escalate to Site Team  **iii) Serious Incidents & Internal Root Cause Analyses Investigation**  2 On-going investigations but no reports as yet.  **iv) Risk Register Review**  - 1321 – Training on Mental Health Patients. Annette to action  - 1464 – Safe and secure home environment - ? ED/Paeds/SAU Meeting - ? 09/06/16  - 1455 – Increased stay in ED – 12 hour stay – locum training  - 1471 – Observations not completed → Annette – NEWS Audit  - 1477 – Nursing levels  - 1492 – Ward patients being admitted to Obs  - 1513 – Cleaning – don’t have 24 hour cleaning – No money!!  - 1518 – Contaminated Blood Culture Rated – Must write FULL Name on Label!!!  **v) Risk Register Review**  ED Checklist – Introduced on 3rd June – for the whole of the South West – is a new collaborative.  **vi) Trust Wide and Department Quality Improvement Initiatives**  QUALITY  ED Patient Safety Checklist  Amanda – Nurse lead – funded for 2 days/week  Suzanne – Audit Nurse – funded for 1 day/week  Darren - Consultant Lead  Bushra and two SHO’s to carry out benchmarking audit.  10% Resus and Majors Patients audited per month  Teaching – Nursing & Doctors  Can change checklist to suit department!!! | AB  GC/CJ  DH/  AB  AB |
| **8** | **Human Resources, Education and Training**  ED work-streams are looking at staffing, practices and needs of the department.  HR – Rota’s – Dr’s and Nurses of All Levels |  |
| **9** | **AOB**  Mental Health Referrals – must print out and put a copy with the patient’s notes!! |  |
|  | **Date of Next Meeting: 24th June 2016**  **Time of Next Meeting: 12h30 – ED Reg Room** |  |