



Learning together

Fostering a culture of collaboration for better patient care



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“Future health and social care will ensure that patients and their families are supported to make informed decisions about how to stay healthy or receive treatments to help them recover from ill-health. This ‘Learning Together’ document shows how effective collaboration between staff across the health and social care system is already making this a reality today.”



Nigel Acheson
Regional Medical Director – South
NHS England

“I am delighted to read about what has been achieved for patients through the partnership between Health Education England in Thames Valley and the Oxford Academic Health Science Network. Affiliations like these – building stronger collaborations based on our individual strengths – are the best way to achieve our goals in an increasingly complex and crowded world.”



Patrick Mitchell
Regional Director – South
Health Education England

Fostering a culture of collaboration for better patient care

We need to find smarter ways of working to meet pressing challenges in the provision of health and social care.

A key component in this is recognising the value of sharing what works best.

This document illustrates some ways in which Health Education England, the Thames Valley Strategic Clinical Network and the Oxford Academic Health Science Network are collaborating to deliver better health and social care in line with national and local priorities.

Wherever we can we are pooling our experience, expertise, skills and knowledge – and making use of the best data and evidence – to strengthen the NHS workforce and improve efficiency and effectiveness,

harnessing technology and working differently to improve outcomes, safety and user experience.

This approach is building up an extensive range of education and training resources giving frontline staff greater access to the tools and support they need. If you can, do take advantage of these opportunities – and let us know of other ways we can improve care by learning together.



*Ruth Monger,
Local Director,
Health Education England
(HEE)*



*Dr Shahed Ahmad,
Medical Director,
Thames Valley Strategic
Clinical Network (TVSCN)*



*Prof Gary Ford CBE,
Chief Executive,
Oxford Academic Health
Science Network
(Oxford AHSN)*

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Improving safety for mothers and babies

A number of local, regional and national partnerships are improving care for pregnant women and their babies.

Sharing learning for better care

Traditionally, learning and service change resulting from clinical incidents and challenging or unusual cases tends to remain within the trust in which they occurred. However, a key element of improving patient safety and reducing risk is removing boundaries and bringing together multiple disciplines in a non-confrontational environment to share experiences. The Oxford AHSN Patient Safety Collaborative, TVSCN and HEE have worked together to make this happen in maternity services.



Further information: katherine.edwards@oxfordahsn.org



Reducing avoidable admissions at full term

An interactive multi-professional e-learning tool was developed with the Thames Valley & Wessex Neonatal Operational Delivery Network to help to avoid full-term babies being unnecessarily separated from their mothers and admitted to neonatal units. The tool can be accessed via HEE's eLearning for Healthcare and other platforms.



Further information: jaswant.bance@hee.nhs.uk
bit.ly/eLearnRATA

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Improving patient safety in primary and community care

New partnerships with GPs, pharmacists and other health professionals working in the community are supporting better patient outcomes in key areas including reducing prescribing errors and identifying more people at risk of stroke.

Audit tool reduces prescribing errors

Prescribing errors in general practices are not common – but when they happen they are an expensive cause of safety incidents, illness, hospitalisation and even deaths.

Errors happen for a number of reasons but main causes include ‘contraindications’ (different drugs used together), failure to take action on computer warnings, lack of monitoring and breakdown of safety systems.

General practice prescribing error rates are estimated to be 5%, with serious errors affecting 1 in 500 of all prescription items.

PINCER (Pharmacist-led INformation technology intervention for reducing Clinically important ERrors) is an audit tool that searches the GP practice computer system and identifies patients who are being prescribed medicines that are commonly and consistently associated with medication errors.

PINCER is being implemented in GP practices across the Oxford AHSN region. Health Education England is funding training for healthcare professionals in primary care covering how to avoid prescribing errors and reduce hospital admissions and patient harm.



Further information: james.rose@oxfordahsn.org
bit.ly/p1ncer



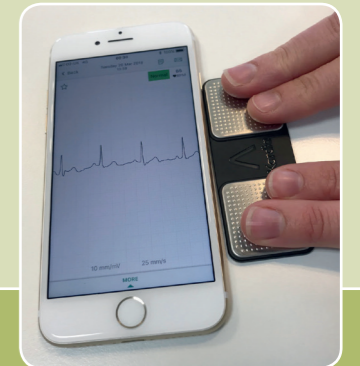
Reducing stroke risk

Atrial fibrillation (AF) is the most common type of irregular heart rhythm but around a third of people with AF are unaware that they have the condition. AF is a major cause of stroke and strokes caused by AF tend to be more severe. If the condition is detected, patients can be offered anticoagulation therapy which reduces the risk of stroke by two-thirds. The Oxford AHSN is distributing dozens of devices including mobile electrocardiogram (ECG) units to GP and community-based healthcare professionals. This technology detects irregular heart rhythms quickly and easily, enabling more patients to get the right follow-up and treatment.

A training package is being developed for practice-based pharmacists covering anticoagulation initiation and reviews, including enhanced counselling. The aim is to improve confidence and capability around anticoagulation within the primary care workforce, leading to improved patient outcomes including fewer strokes.



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bit.ly/AFstroke



“ The Oxford AHSN has been instrumental in delivering a number of key projects in Buckinghamshire and beyond. Innovation, coordination, leadership and support by the AHSN has led to change and significant improvement in patient outcomes. ”

Raj Thakkar, GP and Oxford AHSN Cardiac Clinical Lead



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Improving care in hospital

The Health Education England e-Learning for Healthcare online resource is helping growing numbers of health and social care staff to get the training they need. The examples highlighted here were established in partnership with Oxford AHSN.

Better management of children with pneumonia

A collaborative e-learning project between HEE and the Oxford AHSN is helping accident and emergency doctors and paediatricians establish consistently high standards in care for children admitted to hospital with pneumonia. The module covers assessment, investigation and management of this common condition.



Further information: jaswant.bance@hee.nhs.uk
bit.ly/ChildPneu

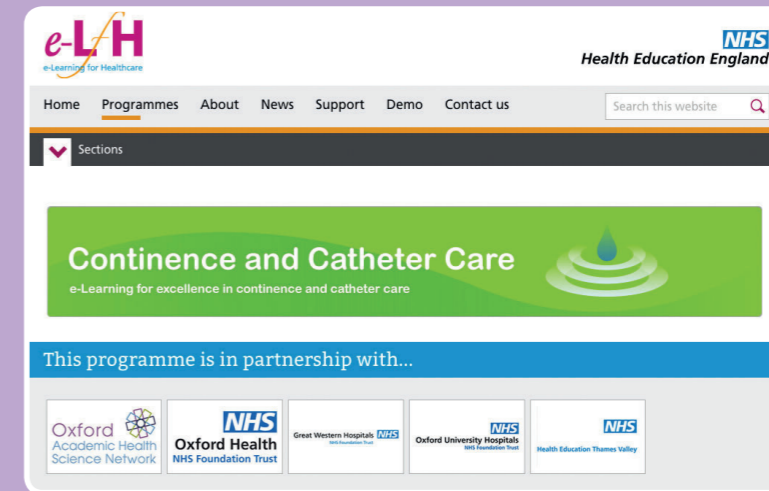


Reducing infections caused by catheters

Three Trusts are working with the Oxford AHSN to reduce catheter acquired urinary tract infections (CAUTI) by promoting best practice in continence and catheter care, including creating a comprehensive online training package through HEE and introducing bladder scans into the clinical pathway to reduce unnecessary catheterisations. The e-learning tool is unique because it sets the infection control considerations around catheter insertion and management within the broader context of continence care and the requirement to only use a catheter where absolutely essential and for the shortest possible time. The training package can be accessed via HEE's eLearning for Healthcare and other platforms.



Further information: Hannah.oatley@oxfordahsn.org
bit.ly/eLearnCAUTI



“ This project is much needed and it is good to hear that it is taking a whole health economy approach – in general practice we frequently see patients with infections and ongoing complications caused by catheterisation. ”

General Practitioner

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Improving safety in social care

The Oxford AHSN is at the heart of developments sharing best practice to improve safety and quality in care homes. The initiatives featured on these pages are funded by Health Education England.

Improving hydration in care homes

Fewer residents are suffering urinary tract infections (UTIs) following the introduction of a hydration programme in care homes, led by the Oxford AHSN Patient Safety Collaborative.

UTIs are closely associated with dehydration. The project encouraged residents to drink more fluids with the aim that this would lead to fewer UTIs requiring medication or hospital admission. This approach involved introducing structured drinks rounds seven times a day, designed and delivered by care home staff. A key feature is the use of brightly coloured-themed drinks trolleys.

The initial focus was on four care homes which had higher than average UTI admission to hospital rates. It has now extended to 13 care homes in the Oxford AHSN region with hundreds of staff receiving hydration training. Hospital admissions due to a UTI have fallen by 66%. UTIs requiring antibiotics have also reduced from an average of one every 9 days to one every 51 days.

The initiative has won five national awards – including NICE Shared Learning and HSJ Patient Safety quality improvement initiative of the year – and interest is spreading further afield. HEE has funded a series of animated videos designed to enhance the training of care home staff.



Further information: katie.lean@oxfordahsn.org
bit.ly/good-hydration



Sharing best practice for care home residents with dementia

The Oxford AHSN has established a forum for reflecting on, developing and evaluating good practice for in-reach teams working with people with dementia in care homes. A number of workshops have taken place to enable teams to share and learn from each other. Topics covered include introducing dementia champions, improving oral care, managing diabetes and better hydration (see page 10).



Further information: fran.butler@oxfordahsn.org
bit.ly/demenshare

“ This project shows how seemingly simple interventions and a consistent, collaborative approach can make a real difference to patient outcomes and experience of care. ”
Celia Ingham Clark, Interim NHS National Director of Patient Safety, NHS Improvement

“ The training has given us an understanding of why it’s important to ensure that residents have enough fluids. It’s looking at the whole system, not just a drink. ”

Care home member of staff



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Supporting better mental health

Innovative approaches are helping to meet the needs of mental health clinicians and service users.

Meeting training needs of early intervention teams

Education and training for staff delivering early intervention in psychosis (EIP) services is being delivered by a higher education institution. This was commissioned by HEE and builds on the Oxford AHSN's successful EIP work. This is an ongoing partnership to meet the needs and expectations of EIP staff and patients.



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Perinatal mental health matrix

The Thames Valley Strategic Clinical Network launched a perinatal mental health matrix in September 2017, modelled on the EIP matrix developed by the Oxford AHSN. It has been designed to evaluate the quality of perinatal mental healthcare provided by maternity, health visiting, specialist perinatal mental health (PMH), secondary care mental health and primary care psychology (IAPT) services. It measures services against NICE Quality Standards (QS115) and Royal College of Obstetricians and Gynaecologists' workforce standards (CR197). The PMH matrix tool has received NICE endorsement.

HEE works with Thames Valley SCN perinatal mental health services and NHS England and has led on the development of a national competency framework. HEE also commissioned a mapping exercise to better understand the availability of suitable perinatal mental health training across England. This has helped identify gaps and target resources. HEE also commissioned additional training to raise awareness of the framework with staff groups which has been delivered by the TVSCN PMH Network in 2017/18.



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Better cancer care

The Oxford AHSN and Thames Valley Cancer Alliance are exploring opportunities for alignment presented by two initiatives: the Cancer Health Information Exchange (HIE) and Local Health and Care Record Exemplar (LHCRE). Cancer was one of the three clinical priority areas identified in the LHCRE model with common challenges across all care settings. These include record sharing, interoperability, population health management and apps to support engagement. Both these programmes can develop together to ensure systems fully utilise resources from NHS England and universities to supplement work at NHS and care and health system levels.



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“ We have been successful in securing funding for a Thames Valley and Surrey Local Health and Care Record Exemplar and a Cancer Health Information Exchange. These are major digital programmes supporting cancer pathways by providing the right information to healthcare professionals. This is our opportunity to unlock the power of information currently held in silos and empower transformation along a pathway that crosses many boundaries.

Nigel Foster, SRO, Thames Valley Cancer Alliance Health Information Exchange project



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Growing future leaders

We're working together to give tomorrow's health leaders the skills they need, sharing expertise through new networks and in new ways.

Supporting frontline innovators

Almost 100 frontline NHS staff have been part of the 'Adopting innovation and managing change in healthcare settings' programme since its launch in 2016. It was created by the Oxford AHSN, funded by HEE and delivered with Bucks New University. It aims to lead to better patient care and improved cost-effectiveness for the NHS. The programme will continue in 2019.



Further information: ferdinand.manansala@oxfordahsn.org
bit.ly/AIMCHS



Sharing learning for better patient care

Q is an initiative connecting people with health and care improvement expertise. It is led by the Health Foundation and supported and co-funded by NHS Improvement. The Oxford AHSN Patient Safety Collaborative led the creation of a regional Q community in 2018. There are currently around 80 members with more joining all the time.



Further information: jo.murray@oxfordahsn.org
bit.ly/Q-Oxford

Webinars support improvements in dementia care

A pioneering webinar programme aims to build a culture of collaborative working and reduce variation in diagnostic and prescribing practice following initial referral to memory services. The webinars last about an hour and take place about once a month. They can be watched live or on 'catch up'. Set up in 2014 by the Oxford AHSN, the programme is now well established with almost 50 webinars attracting over 1,000 live views. Topics covered include 'getting lost', diabetes and dementia, post-diagnostic support services. HEE has part-funded this initiative.



Further information: fran.butler@oxfordahsn.org
bit.ly/Demweb

“ The programme gave me the tools to plan and measure the effectiveness of implementations to clinical practice. It has allowed me to do my job as a lead nurse. If you want change to make a difference, then I recommend the programme. ”

Anne May, Lead Nurse, Oxford University Hospitals



“ Encouraging and developing first line and future leaders is vital to ensure we continue to attract great staff into health and care roles and give them the support they need to be at their best and reach their full potential. ”

*Will Hancock, Chief Executive, South Central Ambulance Service NHS Trust
Co-chair, Thames Valley Local Workforce Action Board*





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