

# Quality Improvement News

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## Category: 13 (1 November 2023)

[Critical to care: the role of community interest companies in health and care](#)

[NOVEMBER 13, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT"CRITICAL TO CARE: THE ROLE OF COMMUNITY INTEREST COMPANIES IN HEALTH AND CARE"](#)

NHS Confederation – 9th November 2023

This briefing provides an overview of their role and contribution to health and care. It is based on research and interviews with a range of CIC leaders delivering community health, mental health and primary care services.

Read the Briefing – [Critical to care: the role of community interest companies in health and care](#)

[Chief Medical Officer's annual report 2023: health in an ageing society](#)

[NOVEMBER 10, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT"CHIEF MEDICAL OFFICER'S ANNUAL REPORT 2023: HEALTH IN AN AGEING SOCIETY"](#)

[Department of Health and Social Care](#) – 10th November 2023

The focus of this report by Chief Medical Officer (CMO) Professor Chris Whitty is on how to maximise the independence, and minimise the time in ill health, between people in England reaching older age and the end of their life. It is aimed at policymakers (government and professional bodies), healthcare professionals, medical scientists and the general public.

People are living longer; this is a triumph of medicine and public health. It is something to celebrate, but alongside this we have a responsibility in medicine, government and wider society to plan to ensure that older age is as healthy, independent and enjoyable as possible into the future.

We can maintain people's independence via 2 broad approaches, which are complementary. The first is to reduce disease, including degenerative disease, to prevent, delay or minimise disability and

frailty. The second is to change the environment so that, for a given level of disability, people can maintain their independence longer. We must do both.

The geography of older age in England is already highly skewed away from large urban areas towards more rural, coastal and other peripheral areas, and will become more so. Efforts to achieve shorter periods in ill health and an easier environment for those with disabilities, should concentrate on areas of the country where the need is going to be greatest. Expansion of medical and NHS services need to be in these areas.

Many people in older age live with multiple conditions (multimorbidity). Medical training, NHS services and research need to respond to this reality.

This is an optimistic report; there are many things we can do to improve health and independence of older citizens if we are systematic about it. This will however require active decisions and actions by individuals, government and health professionals.

Report chapters:

Chapter 1: introduction

Chapter 2: understanding health in an ageing society

Chapter 3: local authority context

Chapter 4: enabling older adults to live free from disease for longer

Chapter 5: supporting older adults to live well with disease

Chapter 6: physical environments that enable independence

Chapter 7: research to improve health in an ageing society

Read the Report – [Chief Medical Officer's annual report 2023: health in an ageing society](#)

[Understanding and reducing tensions between clinical and non-clinical staff in the NHS, in relation to agile working](#)

[NOVEMBER 10, 2023 ~ LEAVE A COMMENT ~ EDIT"UNDERSTANDING AND REDUCING TENSIONS BETWEEN CLINICAL AND NON-CLINICAL STAFF IN THE NHS, IN RELATION TO AGILE WORKING"](#)

NHS Employers

Increasing the level of flexibility offered to employees at work has become a key priority for NHS organisations. However, organisations have reported signs of rising tensions between clinical and non-clinical workers with respect to their different agile working opportunities. This research report explores interpersonal tensions between clinical and non-clinical staff in the NHS in relation to flexible working.

[Understanding and reducing tensions between clinical and non-clinical staff in the NHS, in relation to agile working](#)

[Raising the Barriers: An Action Plan to Tackle Regional Variation in Dementia Diagnosis in England](#)

[NOVEMBER 10, 2023 ~ LEAVE A COMMENT ~ EDIT"RAISING THE BARRIERS: AN ACTION PLAN TO TACKLE REGIONAL VARIATION IN DEMENTIA DIAGNOSIS IN ENGLAND"](#)

All-Party Parliamentary Group on Dementia – Oct 2023

During this inquiry, we have been struck by the number of examples of good practice going on in pockets all over the country. Good work is being done and it needs to be scaled up and shared across the NHS – this is the central recommendation of this report. We see this as a key part of the Government’s Levelling Up agenda. Health outcomes should not be so disparate between local authorities, and urgent work needs to be done to ensure equitable access to dementia diagnosis

[Raising the Barriers: An Action Plan to Tackle Regional Variation in Dementia Diagnosis in England](#)

[Stroke: SSNAP State of the Nation 2023 report](#)

[NOVEMBER 9, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT"STROKE: SSNAP STATE OF THE NATION 2023 REPORT"](#)

HQIP – 9th November 2023

The Sentinel Stroke National Audit Programme (SSNAP) has published a 2023 State of the Nation report. It presents data from more than 91,000 patients admitted to hospitals between April 2022 and March 2023 and submitted to the audit, representing over 90% of all admitted strokes in England, Wales and Northern Ireland. The data is summarised in key messages for both those who provide and those who commission stroke care in hospitals and the community, and is presented in both tables and charts.

Read the full report: – [Stroke: SSNAP State of the Nation 2023 report](#)

[Child Death Review Data Release: Year ending 31 March 2023](#)

[NOVEMBER 9, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT"CHILD DEATH REVIEW DATA RELEASE: YEAR ENDING 31 MARCH 2023"](#)

HQIP – 9th Nov 23

The National Child Mortality Database (NCMD) has published the Child Death Review Data Release for the year ending 31 March 2023. The data in this report summarise the number of child deaths up to 31 March 2023 and the number of reviews of children whose death was reviewed by a Child Death Overview Panel (CDOP) before that date. It should be read in conjunction with data tables, where more detail is provided.

Read the full report – [Child Death Review Data Release: Year ending 31 March 2023](#)

[Inpatient falls and fractures – 2023 NAIF report on 2022 clinical data](#)

[NOVEMBER 9, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT"INPATIENT FALLS AND FRACTURES – 2023 NAIF REPORT ON 2022 CLINICAL DATA"](#)

HQIP – 9th November 2023

The Falls and Fragility Fracture Audit Programme (FFFAP) has published Inpatient falls and fractures – one chance to get it right, the 2023 National Audit of Inpatient Falls (NAIF) report on 2022 clinical data. In 2022, 2,033 people sustained a femoral fracture as an inpatient; 1,669 were due to a fall and included as cases in the National Audit of Inpatient Falls (NAIF). This report includes information on multi-factorial risk assessments and post fall management, and contains five recommendations as well as resources to support improvement.

Read the Report – [Inpatient falls and fractures – 2023 NAIF report on 2022 clinical data](#)

## [National Vascular Registry State of the Nation report 2023](#)

[NOVEMBER 9, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT" NATIONAL VASCULAR REGISTRY STATE OF THE NATION REPORT 2023"](#)

HQIP – Published: 09 Nov 2023

The National Vascular Registry (NVR) has published a 2023 State of the Nation report. With results for patients who had vascular procedures during 2022 in NHS hospitals in England, Wales, Scotland and Northern Ireland, it contains information on emergency (non-elective) and elective procedures for the following patient groups:

patients with peripheral arterial disease (PAD) who undergo either (a) lower limb angioplasty/stent, (b) lower limb bypass surgery, or (c) lower limb amputation

patients who have a repair procedure for abdominal aortic aneurysm (AAA)

patients who undergo carotid endarterectomy or carotid stenting.

Read the Report – [National Vascular Registry State of the Nation report 2023](#)

[Tackling health inequalities on NHS waiting lists: learning from local case studies](#)

[NOVEMBER 9, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT" TACKLING HEALTH INEQUALITIES ON NHS WAITING LISTS: LEARNING FROM LOCAL CASE STUDIES"](#)

Kings Fund 8th November 2023

Structural, economic and social factors can lead to inequalities in the length of time people wait for NHS planned hospital care – such as hip or knee operations – and their experience while they wait. In 2020, after the first wave of the Covid-19 pandemic, NHS England asked NHS trusts and systems to take an inclusive approach to tackling waiting lists by disaggregating waiting times by ethnicity and deprivation to identify inequalities and to take action in response. This was an important change to how NHS organisations were asked to manage waiting lists – embedding work to tackle [health inequalities](#) into the process.

Between December 2022 and June 2023, The King's Fund undertook qualitative case studies about the implementation of this policy in three NHS trusts and their main integrated care boards (ICBs), and interviewed a range of other people about using artificial intelligence (AI) to help prioritise care. We also reviewed literature, NHS board papers and national waiting times data. Our aim was to understand how the policy was being interpreted and implemented locally, and to extract learning from this. We found work was at an early stage, although there were examples of effective interventions that made appointments easier to attend, and prioritised treatment and support while waiting. Reasons for the lack of progress included a lack of clarity about the case for change, operational challenges such as poor data, cultural issues including different views about a fair approach, and a lack of accountability for the inclusive part of elective recovery.

Taking an inclusive approach to tackling waiting lists should be a core part of effective waiting list management and can contribute to a more equitable health system and healthier communities. Tackling inequalities on waiting lists is also an important part of the NHS's wider ambitions to address persistent health inequalities. But to improve the slow progress to date, NHS England, ICBs and trusts need to work with partners to make the case for change, take action and hold each other to account.

Further information – [Tackling health inequalities on NHS waiting lists: learning from local case studies](#)

[Health: the choices](#)

[NOVEMBER 9, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT"HEALTH: THE CHOICES"](#)

Nesta – November 2024

The [UK 2040 Options](#) project, run by a team based at Nesta, will convene a range of experts and thinkers on some of the defining issues facing the country. This report sets out nine fundamental facts about the challenges facing the NHS, social care and public health services.

Read the Report – [Health: the choices](#)

[RCEM National Quality Improvement Programme 2021/22 Infection Prevention and Control](#)

[NOVEMBER 7, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT"RCEM NATIONAL QUALITY IMPROVEMENT PROGRAMME 2021/22 INFECTION PREVENTION AND CONTROL"](#)

RCEM – April 2023

This Quality Improvement Project (QIP) builds on previous Infection Prevention and Control QIP done in 2020/21 by the College and allows us to see that performance has remained stable with no significant improvement from 20/21 nor across 21/22. The results also show that the average time to movement into a side room has significantly increased from 18 minutes in 20/21 to 61 minutes in 21/22

Further information – [RCEM National Quality Improvement Programme 2021/22 Infection Prevention and Control](#)

[Nine major challenges facing health and care in England](#)

[NOVEMBER 7, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT"NINE MAJOR CHALLENGES FACING HEALTH AND CARE IN ENGLAND"](#)

Health Foundation – 3rd November 2023

We highlight nine trends that represent some of the major challenges facing any new government on health and care – focusing primarily on the NHS, social care and public health services in England. We then draw together some of the implications for policymakers. We produced this work for [Nesta's UK 2040 Options project](#), which is looking at the defining issues facing the country ahead of the next general election.<sup>6</sup> Other briefings are being produced on related policy challenges – for instance, by the Institute for Fiscal Studies on tax and public finances. The next stage of work will set out policy options to address these challenges, including our priorities for a new government on health and care.

Further information – [Nine major challenges facing health and care in England](#)

[Acting on the social determinants of health to reduce health inequalities: innovative approaches by provider trusts](#)

[NOVEMBER 7, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT"ACTING ON THE SOCIAL DETERMINANTS OF HEALTH TO REDUCE HEALTH INEQUALITIES: INNOVATIVE APPROACHES BY PROVIDER TRUSTS "](#)

UCLPartners – October 2023

This report outlines how four London trusts (Barts Health NHS Trust, East London NHS Foundation Trust, Great Ormond Street Hospital and Mid and South Essex NHS Foundation Trust) are taking action to improve employment, increase income, improve education, and reduce air pollution. The report includes 13 lessons on adopting an innovative approach to tackling the social determinants of health, based on 22 interviews with people leading and implementing these approaches in these organisations. The lessons set out how this work can be implemented, summarising common drivers and incentives, considering how data and expertise can be used, sharing some common conditions for change, and looking ahead to greater scale and impact.

Read the Report – [Acting on the social determinants of health to reduce health inequalities: innovative approaches by provider trusts](#)

[Working better across teams to improve health and care for all](#)

[NOVEMBER 6, 2023 ~ LEAVE A COMMENT ~ EDIT"WORKING BETTER ACROSS TEAMS TO IMPROVE HEALTH AND CARE FOR ALL"](#)

Healthwatch November 2023

This briefing analyses patient experiences to support the development of a longterm vision for the NHS to work better, through collaboration and partnership working, to improve health and care for all.

Our evidence tells us that people expect and want collaborative working, not just between the NHS and external partners, but between people, departments and services within the NHS too.

To understand the impact partnership work has had on patients, and what ‘better’ could look like, we have analysed our evidence for insights into how the NHS is currently working to meet people’s needs. This includes:

How well different services join up and communicate with each other throughout the patient journey.

How proactive different services are in offering people help, including signposting to other services. Many of these themes were evaluated and addressed by the 2019 Long Term Plan, particularly the importance of service integration. This focus has since been accelerated by the introduction of Integrated Care Systems (ICS), which work to deliver the vision of meaningful partnerships between organisations, and service users.

[Working better across teams to improve health and care for all](#)

[State of the Nation: A comprehensive, retrospective review of NHS data.](#)

[NOVEMBER 6, 2023 ~ LEAVE A COMMENT ~ EDIT"STATE OF THE NATION: A COMPREHENSIVE, RETROSPECTIVE REVIEW OF NHS DATA."](#)

Wilmington Healthcare – OCTOBER 2023

This report provides a health check for the NHS. The report looks at: hospital episode statistics, including waiting times and length of stay; demographics and disease prevalence – including health inequalities; key statistics on what outcomes the NHS is achieving in major therapy areas; assessment of the NHS on its own KPIs; prescribing insights, nationally and regionally, including the most-prescribed drugs; workforce data – including vacancies and recruitment; regional insights, including performance and challenges of ICSs. Please note that free registration is required to download the report.

Read the report – [State of the nation 2023](#)

[Investigation report: Caring for adults with a learning disability in acute hospitals](#)

[NOVEMBER 6, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT"INVESTIGATION REPORT: CARING FOR ADULTS WITH A LEARNING DISABILITY IN ACUTE HOSPITALS"](#)

HSSIB – 31st Oct 2023

Despite national efforts to address inequity, the health and care system is not always meeting the needs of people with a learning disability when they are cared for in hospital, says our latest report.

This conclusion was drawn from a comprehensive national investigation examining the inpatient care of adults with a known learning disability.

The [report](#) says that there is a commitment across the NHS to improve the experience of care for those with a learning disability but that, ‘persistent and widespread’ safety risks remain. The report also points to multiple studies and reports which continue to evidence poorer outcomes, avoidable illness and premature death for those with a learning disability.

The report reveals that current systems and processes within the NHS are not always designed to enable staff to deliver effective care to people with a learning disability.

Read the Report – [Caring for adults with a learning disability in acute hospitals](#)

[A guide to making the case for improvement](#)

[NOVEMBER 6, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT"A GUIDE TO MAKING THE CASE FOR IMPROVEMENT"](#)

Health Foundation 2023

This guide is divided into four broad areas improvement approaches can benefit:

the health and care workforce

patients, service users and society

organisations

and system-level bodies.

Specific examples are given for each area, illustrating the diverse and multi-faceted benefits that can flow from improvement approaches. This guide can be used to make the case for improvement to policy, executive, operational and front-line audiences, and to initiate and support conversations about the benefits of improvement approaches among key stakeholders.

Further information – [A guide to making the case for improvement](#)

[Nursing care needs standard](#)

[NOVEMBER 3, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT"NURSING CARE NEEDS STANDARD"](#)

Professional Record Standards Body – Oct 2023

It is estimated that nurses spend more than 25 per cent of their time on administration and looking for documentation to inform care. This standard reflects best practice and standardises documentation across different nursing settings, helping free nurses from the administrative burden

of repetitive data entry and giving them more time to provide care. It also helps people and their families avoid having to 'tell their story' repeatedly. It standardises information that a nurse in a care home or community setting can access and share in the same way as a mental health or hospital nurse, with a focus on the person's overall wellbeing.

[Nursing care needs standard](#)

[A review of advocacy for people with a learning disability and autistic people who are inpatients in mental health, learning disability or autism specialist hospitals](#)

[NOVEMBER 3, 2023 ~ LEAVE A COMMENT ~ EDIT"A REVIEW OF ADVOCACY FOR PEOPLE WITH A LEARNING DISABILITY AND AUTISTIC PEOPLE WHO ARE INPATIENTS IN MENTAL HEALTH, LEARNING DISABILITY OR AUTISM SPECIALIST HOSPITALS"](#)

National Development Team for Inclusion – Oct 2023

This report covers in-depth research about people's views and experiences of accessing, commissioning, working alongside and delivering a range of types of independent advocacy for people with a learning disability and autistic people who are inpatients in mental health, learning disability or autism specialist hospitals. It highlights the systemic, legislative, cultural, service level and human issues that impact on people's experiences of independent advocacy while they are in hospital, as well as sharing ideas about how these can be improved

[A review of advocacy for people with a learning disability and autistic people who are inpatients in mental health, learning disability or autism specialist hospitals](#)

[Reducing health inequalities faced by children and young people](#)

[NOVEMBER 3, 2023 ~ LEAVE A COMMENT ~ EDIT"REDUCING HEALTH INEQUALITIES FACED BY CHILDREN AND YOUNG PEOPLE"](#)

NHS Providers – October 2023

This report sets out the data and evidence of the health inequalities experienced by children and young people. It outlines the rationale for shifting attention towards this age group to prevent health inequalities later in life. It also considers the role that trusts can play in targeting interventions towards improving the health and wellbeing of children and young people who are more likely to experience inequalities. The report also highlights the existing work of trusts to reduce children and young people's health inequalities within case studies from Barts Health NHS Trust and Gateshead Health NHS Foundation Trust.

[Reducing health inequalities faced by children and young people](#)

[Hiding in plain sight: tackling malnutrition as part of the prevention agenda](#)

[NOVEMBER 3, 2023 ~ LEAVE A COMMENT ~ EDIT"HIDING IN PLAIN SIGHT: TACKLING MALNUTRITION AS PART OF THE PREVENTION AGENDA"](#)

Future Health – October 2023

This report reveals that an estimated 464,000 people who are admitted to hospital have disease-related malnutrition each year in England. This is the equivalent to more than 50 people admitted to hospital every hour. People with malnutrition are more likely to visit their GP, be admitted to hospital and recover from treatment more slowly. The research estimates that the additional cost of



a person with malnutrition is £7,775 per person per year at a total cost to the health care system in England of £22.6 billion. The report sets out a series of recommendations to tackle the issue of disease-related malnutrition.

Read the Report – [Hiding in plain sight: tackling malnutrition as part of the prevention agenda](#)

[Net Zero travel and transport strategy](#)

[NOVEMBER 3, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT"NET ZERO TRAVEL AND TRANSPORT STRATEGY"](#)

NHS England – 31st October 2023

This strategy describes the interventions and modelling underpinning the commitments that the NHS will have fully decarbonised its fleet by 2035, with its ambulances following in 2040, walking through each of the major components of the NHS fleet and outlining the benefits to patients and staff.

[Net Zero travel and transport strategy](#)

[Musculoskeletal orthopaedic approach to referral optimisation](#)

[NOVEMBER 3, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT"MUSCULOSKELETAL ORTHOPAEDIC APPROACH TO REFERRAL OPTIMISATION"](#)

NHS England – 31st October 2023

This guidance describes the benefits of referral optimisation in adult services managing musculoskeletal conditions, focusing on the use of specialist advice to enable people to be seen by the right person, at the right time and in the right place.

[Musculoskeletal orthopaedic approach to referral optimisation](#)

[The Learn from Patient Safety Events \(LFPSE\) Service – patient and family discovery report: summary](#)

[NOVEMBER 3, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT"THE LEARN FROM PATIENT SAFETY EVENTS \(LFPSE\) SERVICE – PATIENT AND FAMILY DISCOVERY REPORT: SUMMARY"](#)

NHSE – 13th October 2023

This report summarises our research into how we can learn from patients' experiences relating to patient safety. It is written in plain English, to make it as accessible as possible. If you would like more detail, you can also read our [full report](#), but this necessarily uses more complicated language.

We have produced this report as NHS England remains committed to involving people and communities at every stage and telling you how you have influenced our activities and decisions. You can read about this commitment on our [Working in partnership with people and communities webpage](#).

Read the Report – [The Learn from Patient Safety Events \(LFPSE\) Service – patient and family discovery report: summary](#)

[The hidden waitlist: the growing follow-up backlog](#)

[NOVEMBER 3, 2023](#) ~ [LEAVE A COMMENT](#) ~ [EDIT"THE HIDDEN WAITLIST: THE GROWING FOLLOW-UP BACKLOG"](#)

Reform

This briefing paper uses data obtained via a Freedom of Information request sent to 119 acute trusts to estimate that the total number of people currently waiting for follow-up appointments stands at more than 11 million. That number has grown by 50 per cent since May 2019. Forty-seven per cent of acute trusts (56 out of the 119) claim either not to hold information about their follow-up waitlists, are unable to present it in an accessible format, or failed to respond to the FOI request within 10 weeks of receiving it (the statutory requirement is 20 days). This suggests that trusts do not see follow-up waitlist management as an organisational priority.

Further information – [The hidden waitlist: the growing follow-up backlog](#)