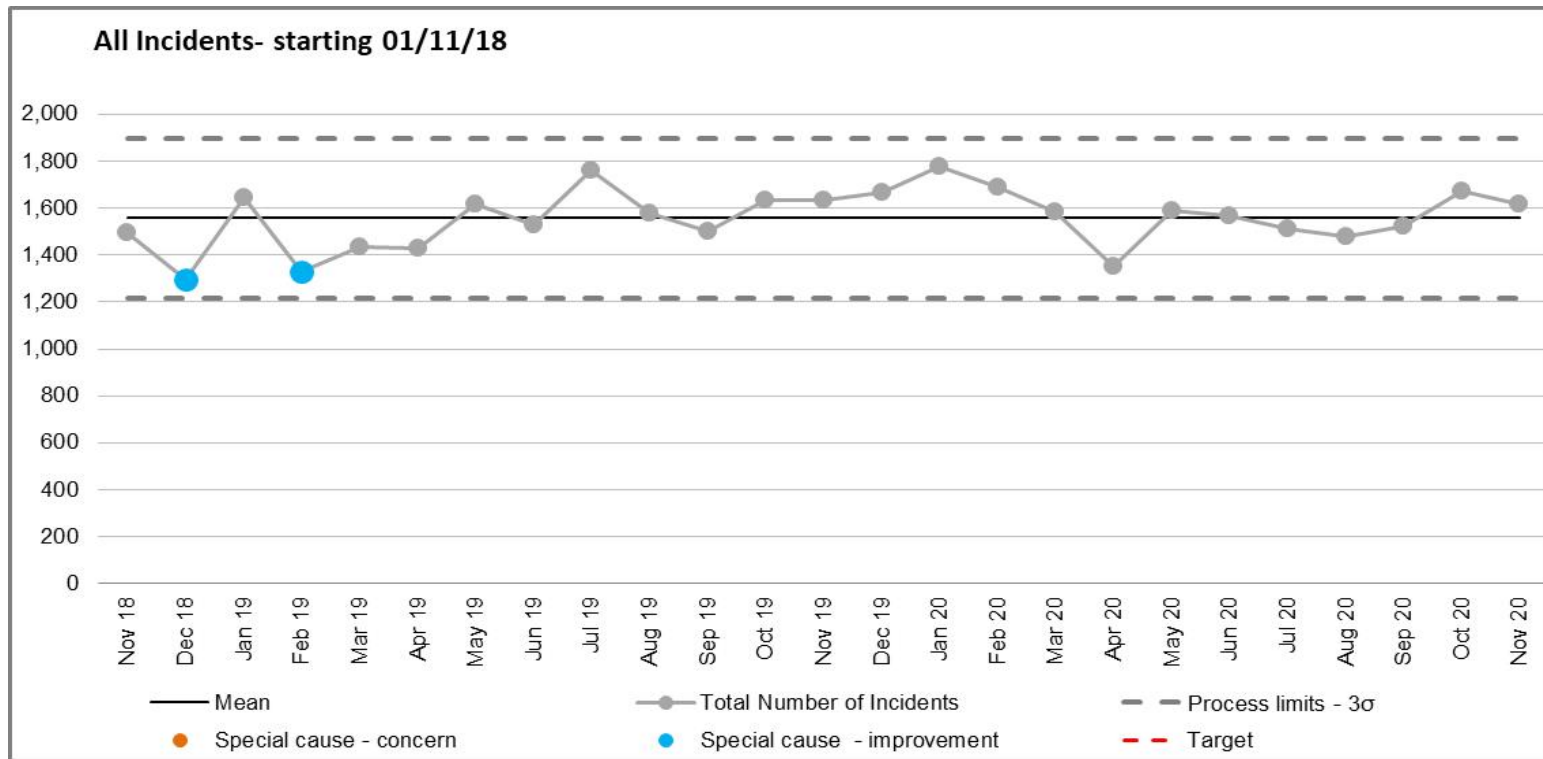# Appendix 1

The following slides show Statistical Process Charts of incidents that have been reported by our staff during October & November 2020

Any detail that requires further clarity please contact the Corporate Patient Safety Team
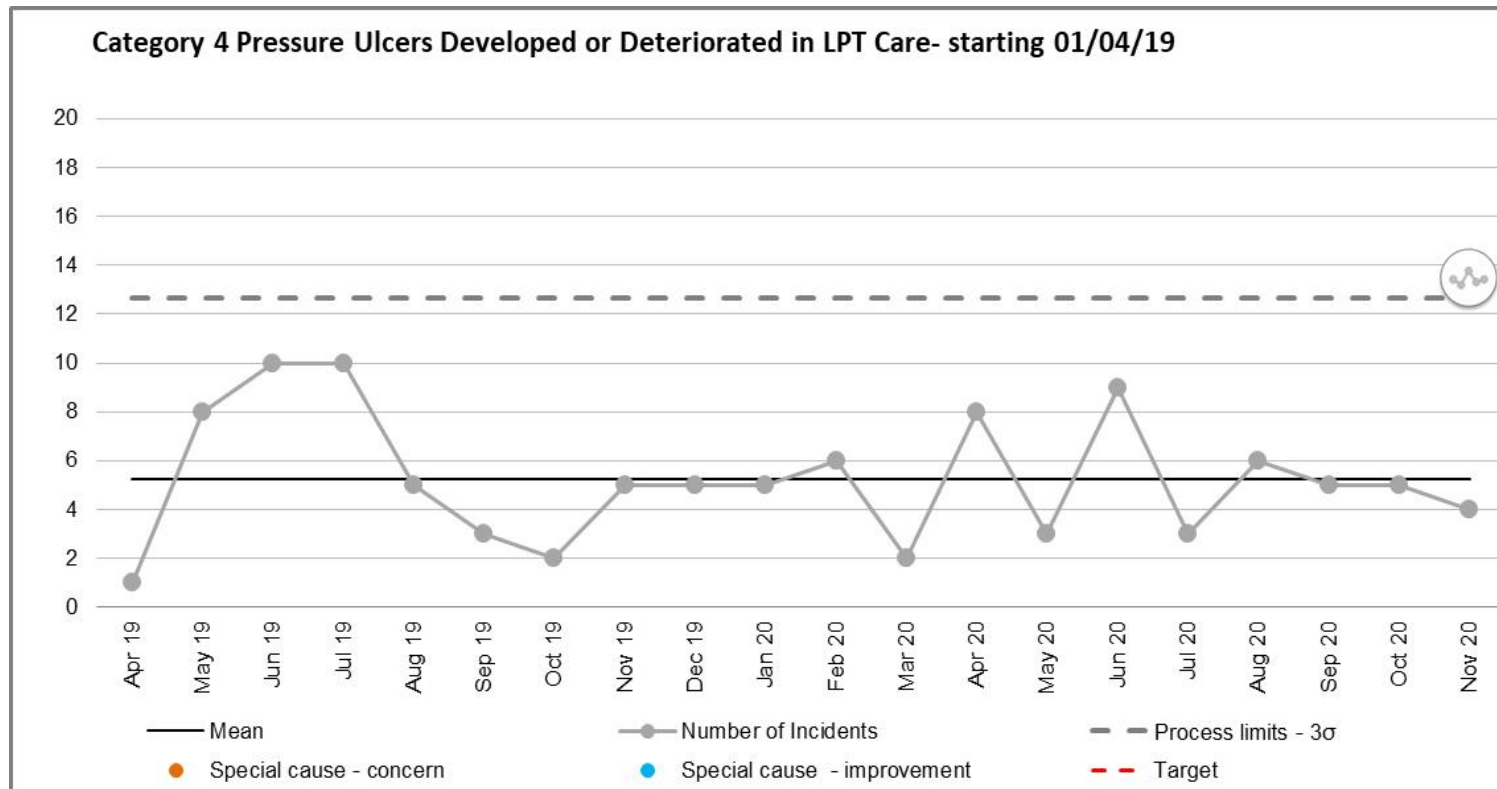
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1. All incidents

2. Category 2 Pressure Ulcers developed or deteriorated in LPT Care

Category 2 Pressure Ulcers Developed or Deteriorated in LPT Care- starting 01/04/19
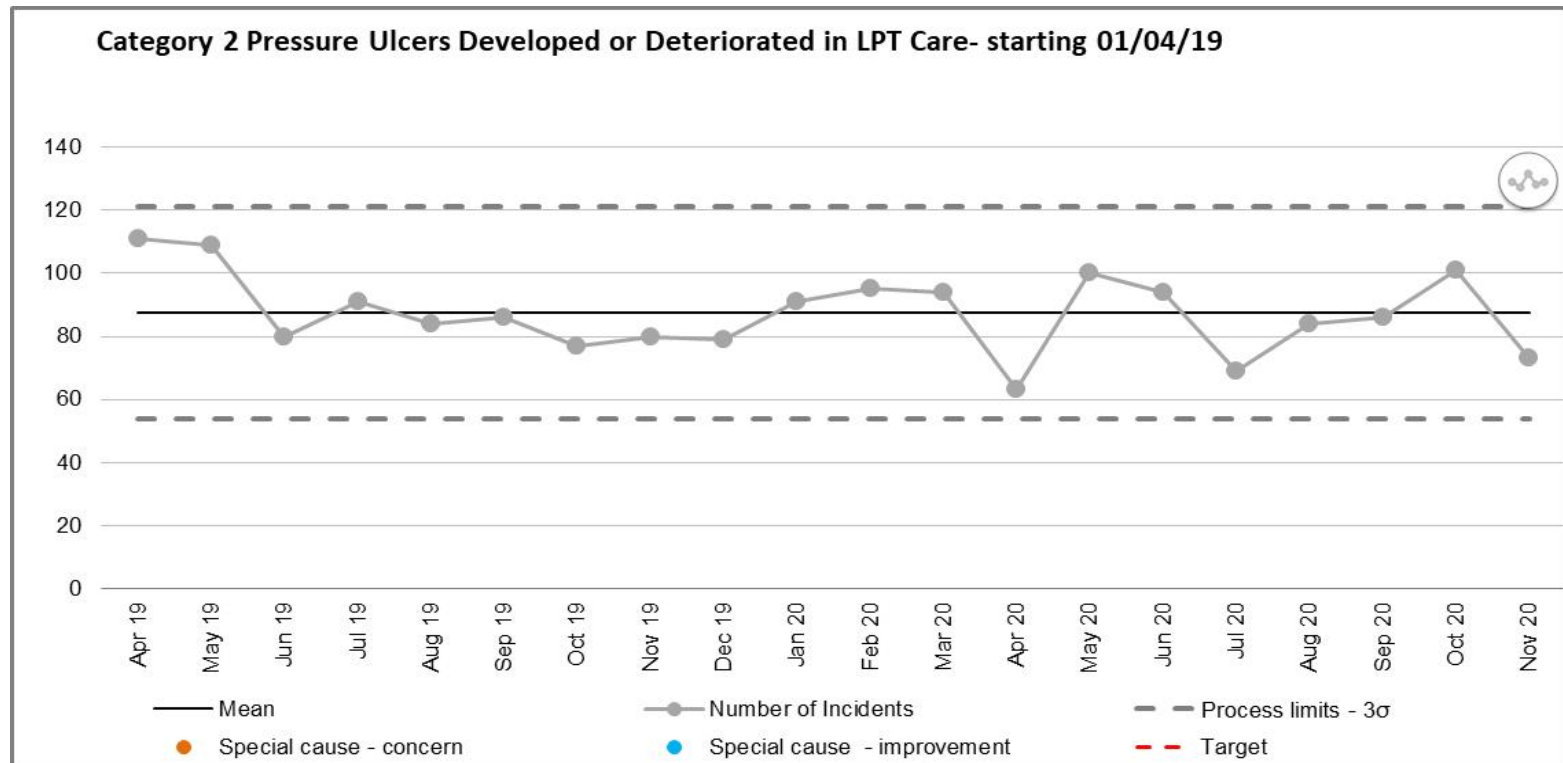
3. Category 4 Pressure Ulcers Developed or deteriorated in LPT Care

4. All falls incidents reported

All Falls Incidents- starting 01/11/18
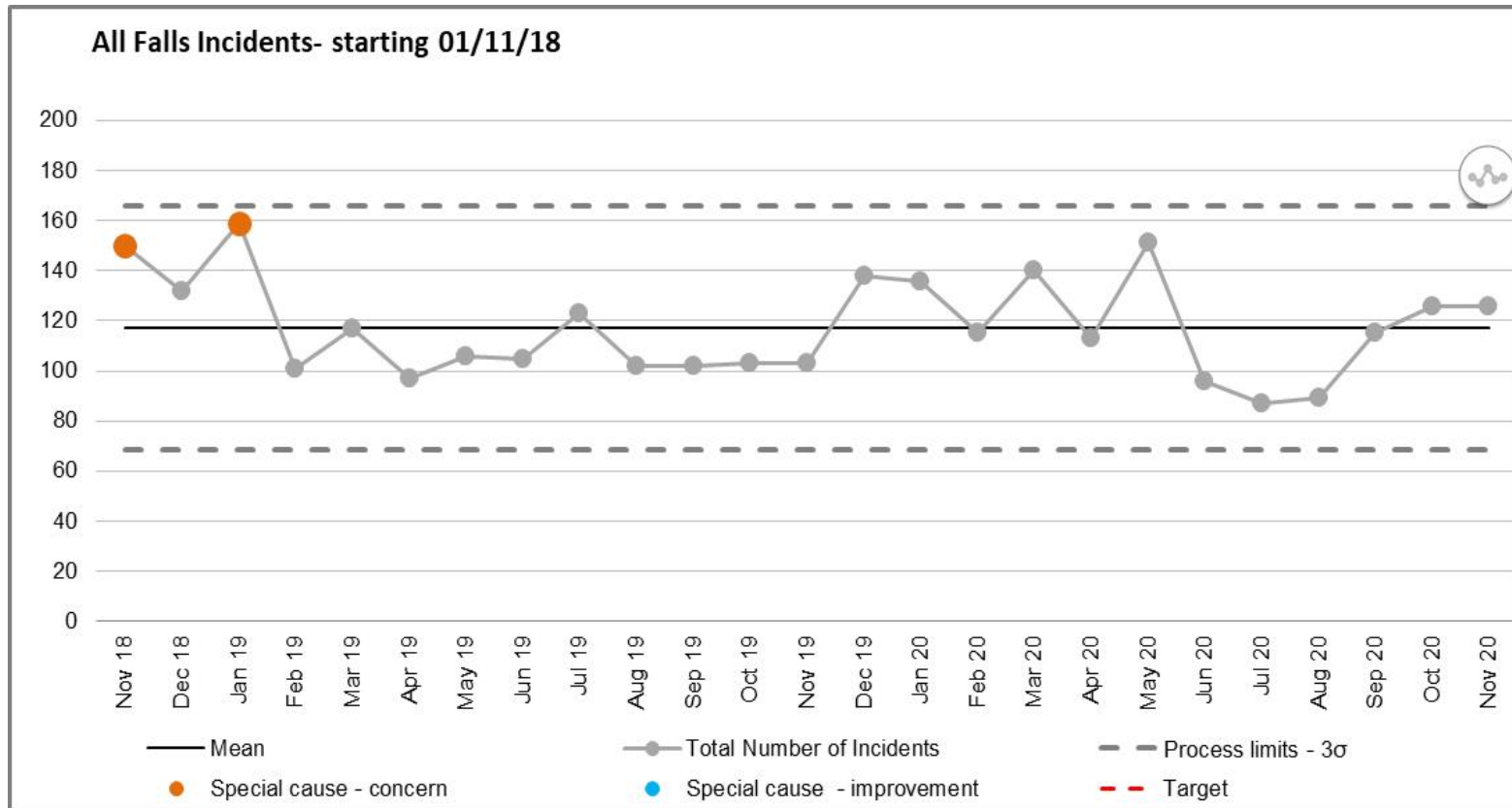
5. Falls incidents reported – MHSOP and Community Inpatients

Falls Incidents - MHSOP and Community Hospital Inpatients- starting 01/11/18

6. All reported Suicides

Suicides SPC Chart- starting 01/11/18
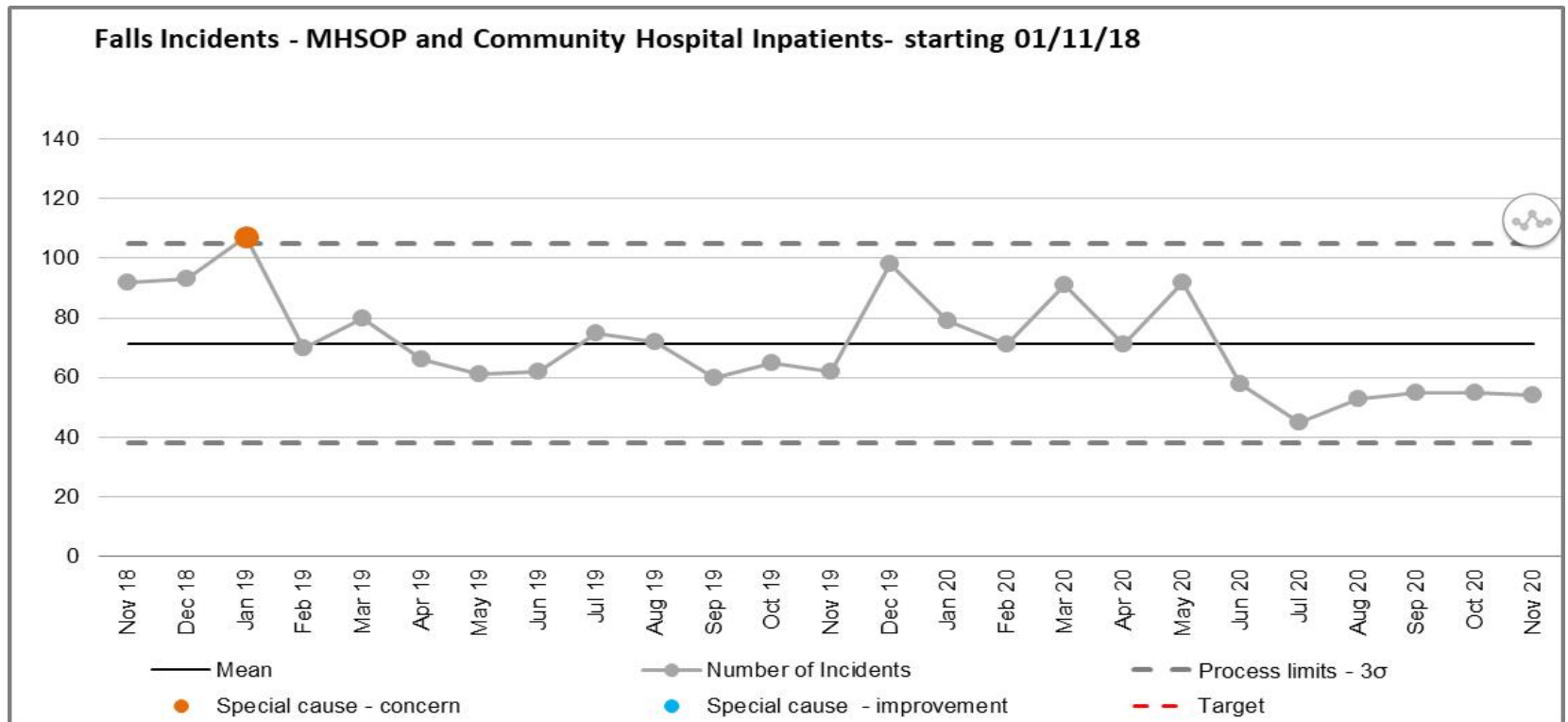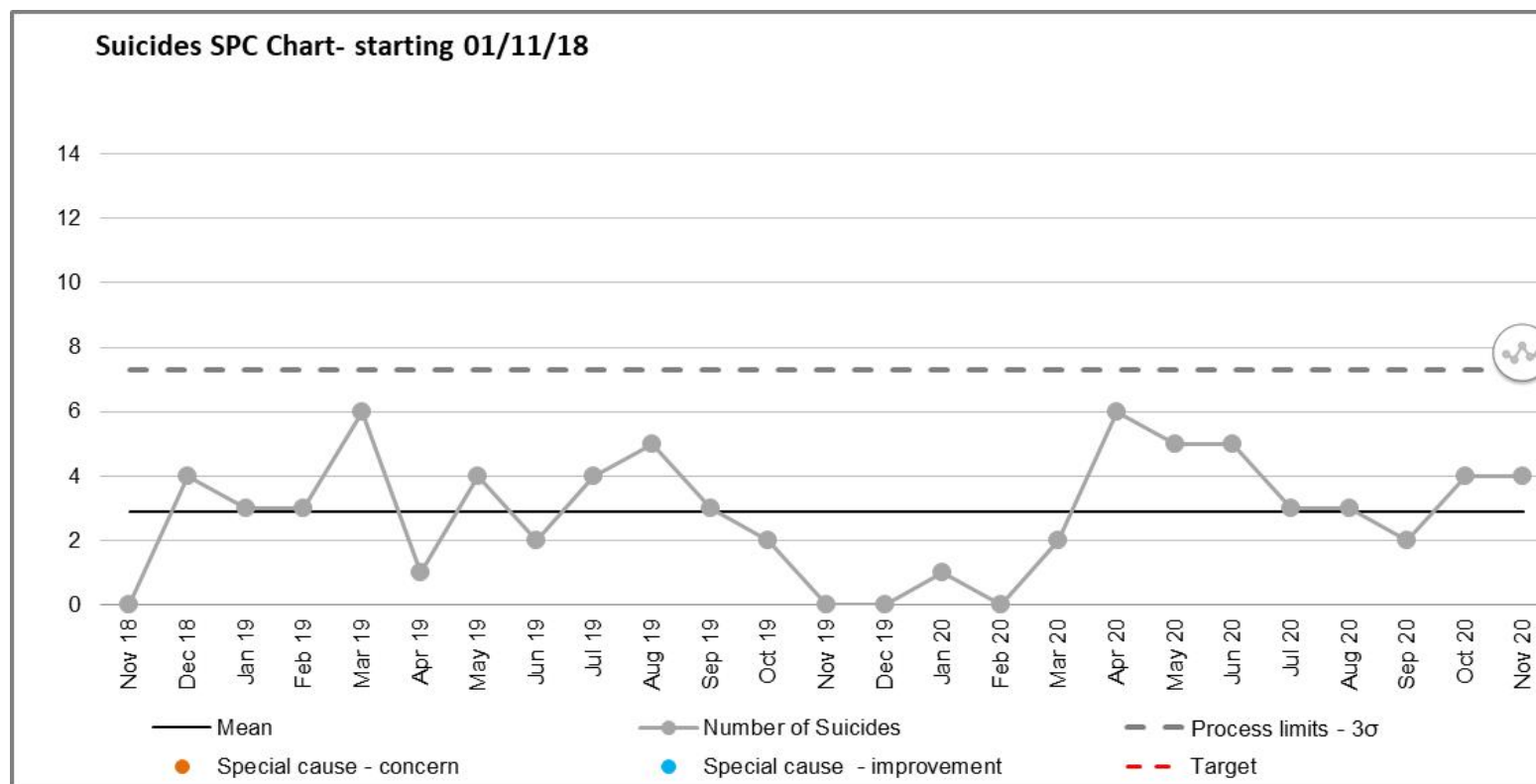
7. Self Harm reported Incidents
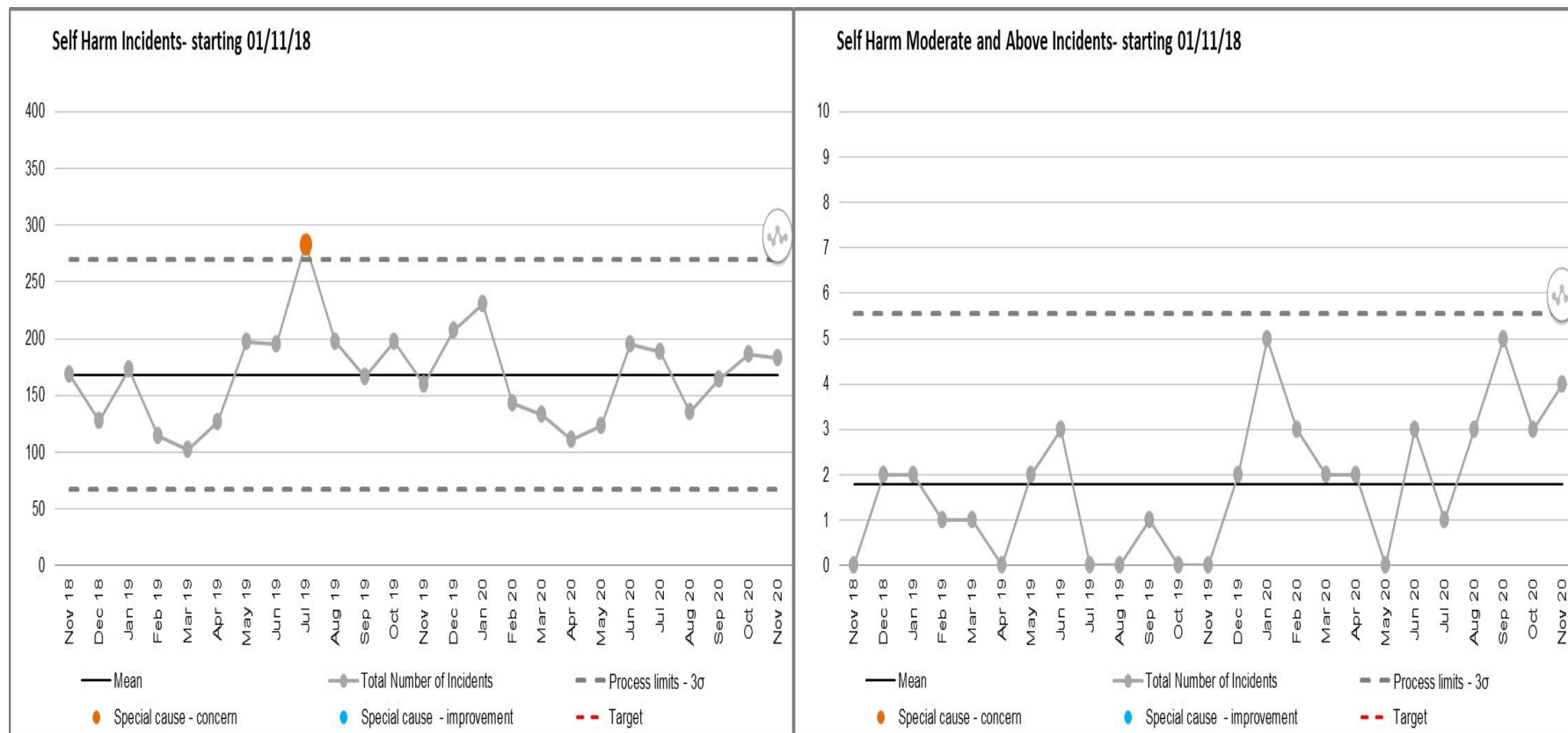
8. All Violence & Assaults reported Incidents
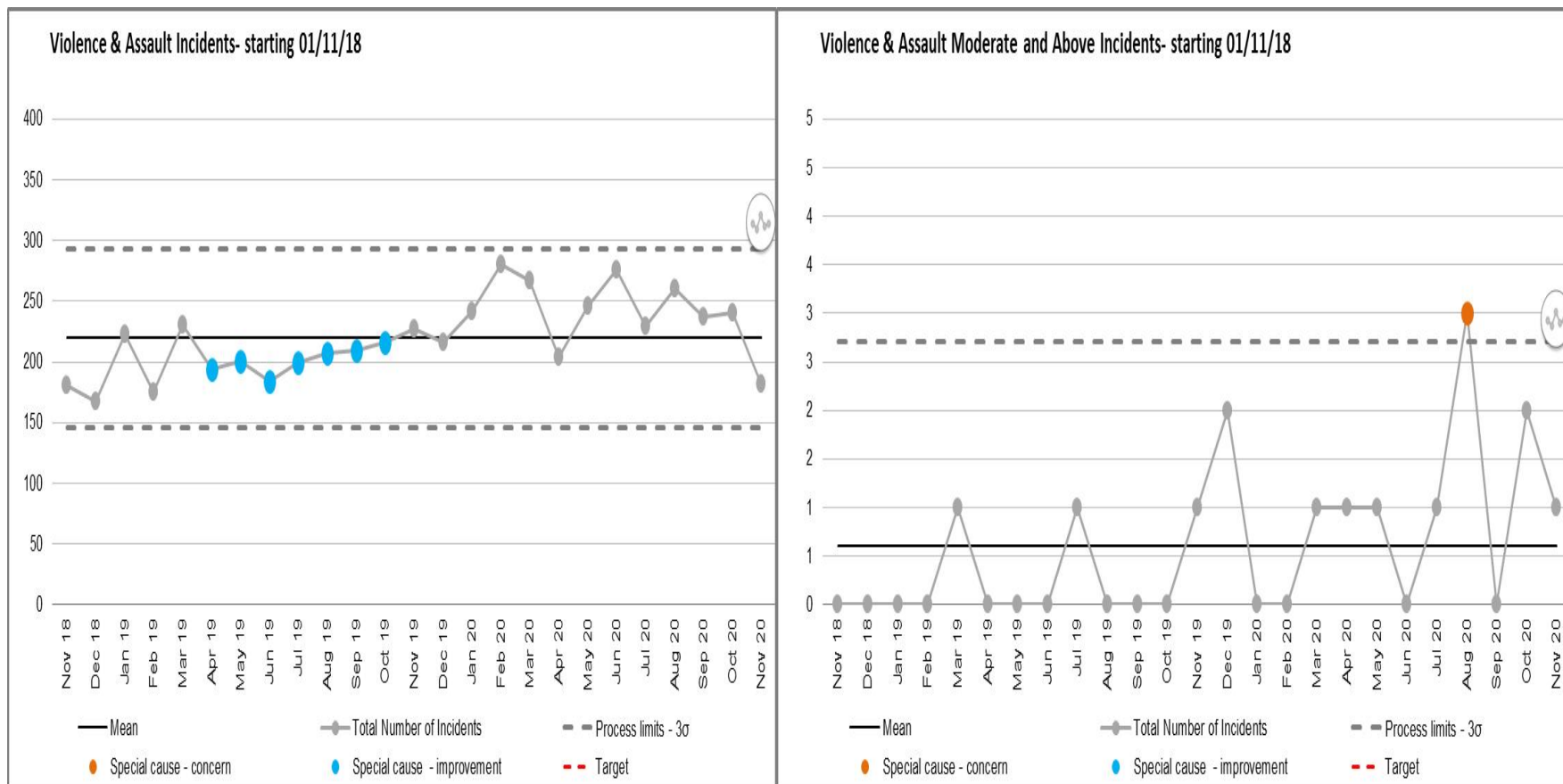
9. All Medication Incidents reported
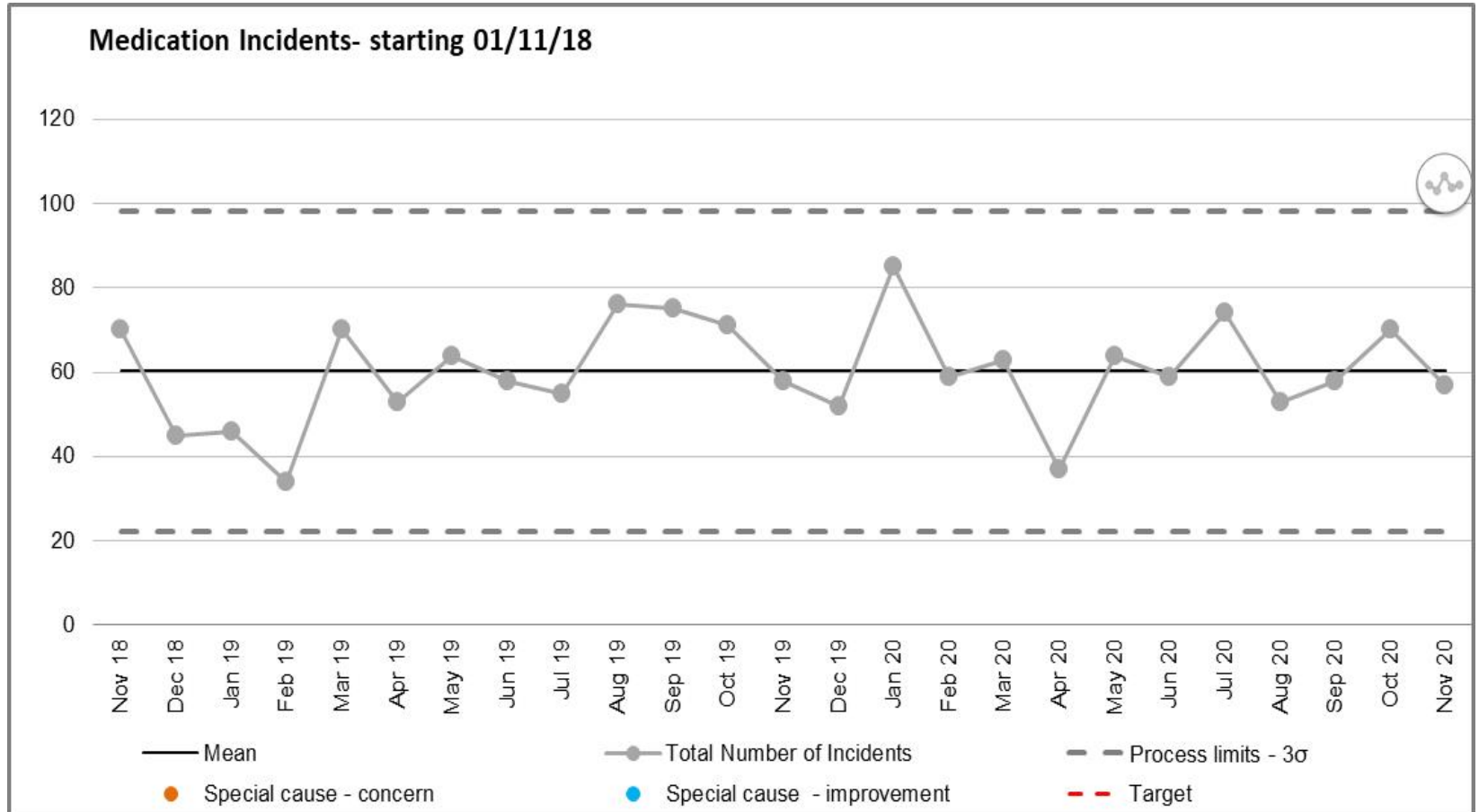
10. Directorate Specialities describing Top 5 Incidents

Table 1: Mental Health: Inpatients

Oct-20	Violence/Assault	132
Oct-20	Patient Falls, Slips, And Trips	64
Oct-20	Self Harm	37
Oct-20	Infection Control	22
Oct-20	Missing Patient	22
Oct-20	Security	22
Nov-20	Violence/Assault	100
Nov-20	Self Harm	68
Nov-20	Patient Falls, Slips, And Trips	57
Nov-20	Missing Patient	18
Nov-20	Security	15

Table 2: Mental Health Community

|		
Oct-20	Self Harm	41
Oct-20	Violence/Assault	24
Oct-20	Infection Control	10
Oct-20	Patient Death	8
Oct-20	Safeguarding (Adults)	8
Nov-20	Self Harm	54
Nov-20	Violence/Assault	29
Nov-20	Infection Control	10
Nov-20	Patient Death	10
Nov-20	Clinical Condition	5
Nov-20	Confidentiality	5
Nov-20	Safeguarding (Adults)	5

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Directorate Specialities describing Top 5 Incidents

Table 3: MHSOP – Inpatients

Oct-20	Patient Falls, Slips, And Trips	18
Oct-20	Violence/Assault	16
Oct-20	Medication	8
Oct-20	Clinical Condition	6
Oct-20	Infection Control	4

Nov-20	Patient Falls, Slips, And Trips	28
Nov-20	Violence/Assault	16
Nov-20	Clinical Condition	7
Nov-20	Infection Control	6
Nov-20	Fire	4

Table 4: MHSOP – Community

Oct-20	Patient Death	11
Oct-20	Safeguarding (Adults)	2
Oct-20	Clinical Condition	1
Oct-20	Communication	1
Oct-20	IT Equipment / Systems	1
Oct-20	Safeguarding (Children)	1
Oct-20	Self Harm	1
Oct-20	Staffing	1
Nov-20	Patient Death	11
Nov-20	Safeguarding (Adults)	3
Nov-20	Infection Control	2
Nov-20	IT Equipment / Systems	1
Nov-20	Self Harm	1

Directorate Specialities describing Top 5 Incidents

Table 5: Learning Disability – In-Patient

Oct-20	Violence/Assault	67
Oct-20	Hate/PREVENT Incident	6
Oct-20	Accident	2
Oct-20	Patient Falls, Slips, And Trips	2
Oct-20	Communication	1
Oct-20	Confidentiality	1
Oct-20	Infection Control	1
Nov-20	Violence/Assault	44
Nov-20	Hate/PREVENT Incident	15
Nov-20	Infection Control	3
Nov-20	Non-Medical Equipment	3
Nov-20	Access, Admission, Appts, Xfer, Discharge	2
Nov-20	Clinical Condition	2
Nov-20	Patient Falls, Slips, And Trips	2
Nov-20	Self Harm	2

Table 6: Learning Disability - Community

Oct-20	Infection Control	5
Oct-20	Self Harm	4
Oct-20	Violence/Assault	4
Oct-20	Safeguarding (Adults)	3
Oct-20	Unsafe Environment	3
Nov-20	Infection Control	7
Nov-20	Self Harm	3
Nov-20	Confidentiality	2
Nov-20	Medication	2
Nov-20	Missing Patient	2
Nov-20	Patient Falls, Slips, And Trips	2
Nov-20	Safeguarding (Adults)	2
Nov-20	Violence/Assault	2

Directorate Specialities describing Top 5 Incidents

Table 7: FYPC CAMHS

Oct-20	Self Harm	108
Oct-20	Violence/Assault	5
Oct-20	Missing Patient	3
Oct-20	Infection Control	1
Oct-20	Mental Health Act	1
Oct-20	Staffing	1
Oct-20	Unsafe Environment	1
Nov-20	Self Harm	73
Nov-20	Missing Patient	5
Nov-20	Violence/Assault	3
Nov-20	Access, Admission, Appts, Xfer, Discharge	1
Nov-20	Sharps / Needlestick	1

Table 8: FYPC CAMHS Community

Oct-20	Communication	3
Oct-20	Violence/Assault	3
Oct-20	IT Equipment / Systems	2
Oct-20	Safeguarding (Children)	2
Oct-20	Case Notes & Records	1
Nov-20	Infection Control	7
Nov-20	Violence/Assault	3
Nov-20	Self Harm	2
Nov-20	Staff Falls, Slips, And Trips	2
Nov-20	Access, Admission, Appts, Xfer, Discharge	1

Directorate Specialities describing Top 5 Incidents

Table 9 : FYPC

Oct-20	Communication	10
Oct-20	Infection Control	10
Oct-20	Case Notes & Records	9
Oct-20	Medication	9
Oct-20	Confidentiality	6
Oct-20	Self Harm	6

Nov-20	Self Harm	32
Nov-20	Case Notes & Records	14
Nov-20	Infection Control	13
Nov-20	Communication	11
Nov-20	Staffing	8

Directorate Specialities describing Top 5 Incidents

Table 10: CHS In-Patient

Oct-20	Patient Falls, Slips, And Trips	37
Oct-20	Tissue Viability	32
Oct-20	Case Notes & Records	18
Oct-20	Medication	10
Oct-20	Patient Death	7
Oct-20	Violence/Assault	7
Nov-20	Tissue Viability	44
Nov-20	Patient Falls, Slips, And Trips	26
Nov-20	Infection Control	25
Nov-20	Medication	10
Nov-20	Patient Death	9

Table 11: CHS Community

Oct-20	Tissue Viability	398
Oct-20	Medication	23
Oct-20	Infection Control	18
Oct-20	Communication	9
Oct-20	Safeguarding (Adults)	7
Nov-20	Tissue Viability	398
Nov-20	Infection Control	39
Nov-20	Medication	23
Nov-20	Case Notes & Records	10
Nov-20	Communication	8
Nov-20	Patient Falls, Slips, And Trips	8

11a. StEIS Reported Serious Incidents (SI's)

		StEIS Notificatio	SI INVESTIGATIONS							Internal Root Cause Analysis Investigations				
		Downgrade & removal requests	SIs declared AMH/LD	SIs declared FYPC	SIs declared CHS	Signed off within month	Within original deadline	SI Downgrade requests	Confirmed DoC breaches	AMH/LD	FYPC	CHS	Signed off within month	Within original deadline
2019/20 Q1	April	0	3	0	0	3	*	0	0	9	4	1	*	*
	May	0	7	2	4	3		0	0	2	4	0		
	June	0	3	1	10	3		0	0	4	2	0		
2019/20 Q2	July	0	6	0	11	2		0	0					
	August	0	2	0	4	7		0	0					
	September	0	3	1	22			2	0					
							31%							
2019/20 Q3	October	0	2	2	4	5		0	0	0	0	0		
	November	1	10	1	4	9		1	0	0	0	0		
	December	1	4	4	1	9		1	0	1	0	1		
							32%							
2019/20 Q4	January	0	3	2	10	8		0	0	2	2	1		
	February	0	5	2	10	2		0	0	0	1	1		
	March	6	3	0	5	27		0	0	2	0	2		
YTD		8	51	15	85	78		4	0	20	13	6	0	#DIV/0!
2020/21 Q1	April	7	6	3	0	0		0	0	6	0	2		
	May	0	8	3	9	7		0	0	3	1	2		
	June	1	5	4	4	2		0	0	9	0	2		
2020/21 Q2	July	0	5	2	16	9		1	0	9	3	0		
	August	0	4	0	3	13		0	2	2	2	0		
	September	1	8	2	2	17		1	14	0	0	0		
2020/21 Q3	October	1	5	1	3	4		0	6	2	2	2		
	November	0	9	1	1	4		0	5	1	1	3		
	December													
	January													

11b. Directorate SI Action Plan Compliance Status 2020/21 to date

	ADULT MENTAL HEALTH & LEARNING DISABILITIES SI ACTION PLAN TOTALS						
	Total SI (Other) Action Plans due to be Implemented	Total SI (Other) Action Plans Implemented	Total SI (Pressure Ulcer) Action plans due to be Implemented	Total SI (Pressure Ulcer) Action plans Implemented	% Total SI Action Plans Implemented by Month	% Total SI Action Plans Implemented YTD	% Quarterly
Apr-20	7	1	0	0	14.29%	14.29%	
May-20	7	1	0	0	14.29%	14.29%	20.83%
Jun-20	10	3	0	0	30.00%	20.83%	
Jul-20	6	3	0	0	50.00%	26.67%	
Aug-20	2	1	0	0	50.00%	28.13%	39.47%
Sep-20	30	11	0	0	36.67%	32.26%	
Oct-20	15	2	0	0	13.33%	28.57%	
Nov-20	20	6	0	0	30.00%	28.87%	22.86%
Dec-20	0	0	0	0	-	28.87%	
Jan-21	0	0	0	0	-	28.87%	
Feb-21	0	0	0	0	-	28.87%	#DIV/0!
Mar-21	0	0	0	0	-	28.87%	
Total YTD:	97	28	0	0	28.87%	28.87%	

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11b. Directorate SI Action Plan Compliance Status 2020/21 to date

	COMMUNITY HEALTH SERVICES SI ACTION PLAN TOTALS					
	Total SI (Other) Action Plans due to be Implemented	Total SI (Other) Action Plans Implemented	Total SI (Pressure Ulcer) Action plans due to be Implemented	Total SI (Pressure Ulcer) Action plans Implemented	% Total SI Action Plans Implemented by Month	% Total SI Action Plans Implemented YTD
Apr-19	1	1			100.00%	100.00%
May-19	1	1			100.00%	100.00%
Jun-19	5	3			60.00%	71.43%
Jul-19	3	2			66.67%	70.00%
Aug-19	1	0			0.00%	63.64%
Sep-19	12	9			75.00%	69.57%
Oct-19	6	2			33.33%	62.07%
Nov-19	13	5			38.46%	54.76%
Dec-19					-	54.76%
Jan-20					-	54.76%
Feb-20					-	54.76%
Mar-20					-	54.76%
Total YTD:	42	23	0	0	54.76%	54.76%

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12. Lessons Learned/Learning

Continuing themes in the investigation of category 4 Pressure Ulcers reported (these meet SI criteria):

- **Inconsistent approach to correct Skin assessment**
- **Lack of timely holistic patient assessments**
- **Consideration for mental capacity assessments on initial admission to caseloads and when patient's conditions change**

Continuing themes in the investigation of Falls that meet SI criteria:

- **Poor compliance in undertaking falls risk assessments in a timely way**
- **Lack of compliance of undertaking lying & standing blood pressure**
- **Inconsistent application of the findings of the falls risk assessments i.e. supervision of the patients**
- **Use of bed rails assessment/falls risk**

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12. continued – Lessons Learned/Learning

Violence & aggression

- The level of Violence & Aggression across Mental Health, CAMHS & Learning Disability Inpatients continues to be of concern

Infection Control

- Is represented in all the directorates in the top 5 incidents reported either in one or both months; this is related to the high Covid19 reporting related to staff and less so for patients

Self-Harm

- Reduction high number of reported CAMHS inpatients self-harm incidents in November is related to patient movement and mix; the trend is still high equal to September 2020 proving challenging on resources and an indication the acuity of the patient group

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