



Improving the Quality of Healthcare

NCEPOD@30

Failure to Function

The report on acute heart failure was published in November 2018. It highlights the process of care for patients aged 16 years or older who died in hospital following an admission with acute heart failure. The report takes a look at areas where the care of patients might have been improved. Recommendations include increased use of serum natriuretic peptide measurements, echocardiography and palliative care teams.

The full report, executive summary, infographics and a suite of support tools are available on our website:

www.ncepod.org.uk/2018ahf.html



NCEPOD @30 Conference

Colleagues joined us at the Royal College of Physicians in December 2018 to celebrate 30 years of NCEPOD. Speakers included people involved in NCEPOD studies, some since the very beginning, and people who have used our reports to improve patient care. If you were not able to attend you can watch most of the presentations and see the posters on our website

<https://www.ncepod.org.uk/events.html>

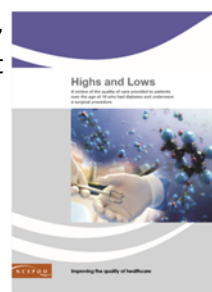


Highs and Lows

In December 2018 we published Highs and Lows report which looks at the quality of diabetes care for patients aged 16 years or older who underwent a surgical procedure. It highlights a lack of clinical continuity of diabetes management across the different specialties in the perioperative pathway. 1 in 5 patients were not prioritised appropriately, which resulted in prolonged fasting, putting them at increased risk of complications. Better blood glucose monitoring would have helped facilitate the assessment of patient status.

The full report, executive summary, infographics and a suite of support tools are available on our website:

www.ncepod.org.uk/2018pd.html



On The Right Course?

December 2018 also saw the publication of a report into care delivered to children and young adults who either died or had an unexpected admission to critical care within 60 days of receiving systemic anti-cancer therapy (SACT). Overall 58% of patients received good care but in 22% of this high risk group the SACT was directly responsible for death or admission to critical care or had a major role in the outcome. In a further 25% of patients substantial toxicity was observed. Discussions in multidisciplinary meetings and with patients and carers should be increased and improved.

The full report, executive summary, infographics and a suite of support tools are available on our website:

www.ncepod.org.uk/2018cictya.html



Study Updates

Acute Bowel Obstruction

bowelobstruction@ncepod.org.uk

NCEPOD are looking to identify remediable factors in the process of care of patients who were admitted to hospital between Monday 16th April - Sunday 13th May 2018 and who had an obstructed bowel. For this study we are collecting data via a clinician questionnaire, case note review and organisational questionnaire. We have disseminated up to 10 clinician questionnaires per hospital via our online system. The first deadline for the return of these questionnaires has passed but we have extended it for a further 4 weeks so we can continue to accept completed clinician questionnaires.

We have also requested 2 sets of case note extracts per hospital for peer review, however the final deadline for the return of case notes has now passed (5th April) and we cannot now accept any further returns.

We have sent out links to the organisational questionnaire via the online system. The aim of this questionnaire is to collect data on organisational structures surrounding the care of patients with acute bowel obstruction. One questionnaire should be completed per hospital. The deadline is the 19th April.

Long Term Ventilation

ltv@ncepod.org.uk

This study aims to identify remediable factors in the care of patients who are receiving, or have received, long-term ventilation (LTV) before their 25th birthday. A number of different data sources are being used to collect data for this study:

Online health and social care professional questionnaire and interviews: This online survey is being used to collect the views of health and social care professionals involved in the care of children and young people who are receiving long-term ventilation. In addition to this we are undertaking a smaller number of interviews where respondents have indicated they are happy to be contacted. This survey is currently open and can be accessed via the NCEPOD website or through this link:

www.surveymonkey.co.uk/r/NCEPODLTVHSCPSurvey

Online patient and parent carer questionnaires: This survey is being used to collect patient and parent carer's views on the LTV services available to them. This survey is currently open and can be accessed via the NCEPOD website:

www.surveymonkey.co.uk/r/NCEPOD_LTV_Survey

Clinical questionnaire data and case note review: We are aiming to review the care of 500 patients; 250 who were admitted to hospital and 250 patients who were not admitted to hospital during the study period. **Admission questionnaires** have been sent out for all selected cases and the associated case notes have been requested. Prior to photocopying the case notes, please ensure the admission selected is not the one during which LTV was initiated.

The dissemination of **lead clinician questionnaires** has also started. This will be done in three stages; the first to be sent will be those associated with an acute admission; the second will be for those patients who did not have an acute admission during the study period; questionnaires will then be sent out for those cases where we have been unable to identify the lead site until the associated admission questionnaire has been returned. The questionnaires for stages 1 and 2 have now all been sent. The questionnaires associated with stage 3 will happen on a rolling basis for the remainder of the study.

The last questionnaires will be the **community team questionnaires**, which will be sent as the community team details are identified to us (either via the data collection spreadsheet or as admission or lead clinician questionnaires are returned). These have started to be disseminated.

The initiation of long-term ventilation

This study will also be reviewing the care of patients who underwent a tracheostomy insertion during the study period. This will be limited to a maximum of 5 cases per site and will be questionnaire-based data collection only. The tracheostomy insertion questionnaires have all been disseminated.

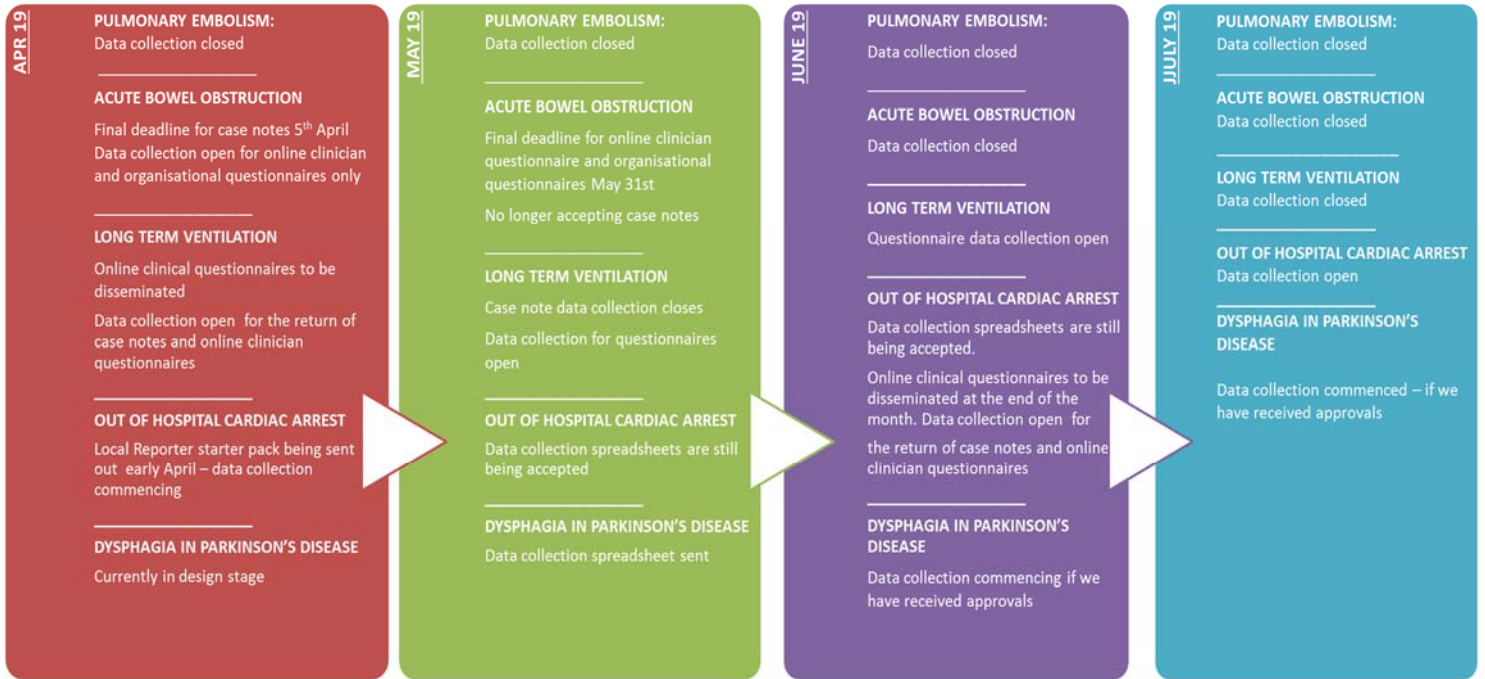
www.ncepod.org.uk/ltv.html

Pulmonary embolism

pe@ncepod.org.uk

The Pulmonary Embolism report is currently being drafted and is due for publication this summer. We can still accept outstanding organisational questionnaires if they are submitted by the 12th April 2019. www.ncepod.org.uk/pe.html

What's coming up...studies at a glance



Dysphagia in people with Parkinson's Disease

dysphagia@ncepod.org.uk

The aim of this study is to examine the pathway of care of patients with Parkinson's Disease (PD) who are admitted to hospital when acutely unwell.

This study is currently in the early stages of development and the protocol has recently been finalised and sent for approval. The study will collect data on all patients admitted to hospital over an 8-week period (Monday 7th January – Sunday 3rd March 2019) with an ICD10 code for Parkinson's Disease (G20 & G21) recorded in any position. All hospitals have recently been contacted and we are updating the study database with participation. The case identification spreadsheet will be disseminated in May, and we will ask for this to be returned to us once the data collection approvals have been granted. Questionnaires are due to be disseminated later this summer.

www.ncepod.org.uk/Dysphagia.html

In Hospital Management of Out of Hospital Cardiac Arrests

ohca@ncepod.org.uk

We have commenced work on a study reviewing the in-hospital management of patients that have suffered an OHCA with return of spontaneous circulation (ROSC). The study will address a number of key areas including; consistency of management, agreed management protocol and whether this was adhered to, method and frequency of temperature control, length of ICU stay, length of ward stay, specialty admitted to, whether survivors are assessed by a heart rhythm specialist and availability of rehabilitation support.

The data collection spreadsheet has now been disseminated and questionnaires are being finalised. We are recruiting Case Reviewers for the study. Please visit the study webpage www.ncepod.org.uk/Ohca.html for more information.

Young People's Mental Health study

The young people's mental health report has not yet been published. We will inform people as soon as we have a publication date.

Summary of participation in NCEPOD studies for Quality Accounts have now be sent. Please contact us if you did not receive your copy.

Next Local Reporter & Ambassador Day

If you are interested in attending an NCEPOD training day, please send your interest to: Dolores Jarman djarman@ncepod.org.uk

If you are interested in becoming an Ambassador contact us at info@ncepod.org.uk and we can tell you whether your hospital, or Trust/Health Board has someone already.

Online Questionnaire System

Going forward all questionnaires (both clinical and organisational) will be sent out through our online questionnaire system. Clinical and Organisational questionnaires are currently available on our online system for the pulmonary embolism, acute bowel obstruction and long-term ventilation studies. The online system will allow all Local Reporters to have real-time access to questionnaire returns.

If you have any feedback regarding our online system (both positive and negative) please send us an email at – info@ncepod.org.uk

Returning case notes to NCEPOD

By email - our preferred method of delivery

- ◆ Scan the notes as a PDF or save PDFs from your electronic patient record
- ◆ Always password-protect the files (do not use easy-to-guess passwords, such as the hospital or study name, and don't put the password in the email with the attached files)
- ◆ Email them to us (in a logical order) at ncepod@nhs.net, not one of the study or personal email addresses
- ◆ Phone us to inform us when they have been sent and to let us know the password—you can speak to any staff member who answers the phone.

By post

If you are unable to email the notes to us they should be packaged securely and sent via our freepost address. Plastic envelopes can be obtained from us.

The freepost licence number is **RTBS - XCXG - RGLA** . Use this licence number, along with our full address below to send any correspondence to us. We recommend that all case notes are sent via recorded delivery. To use Royal Mail recorded delivery, you need to add £1.10 onto the freepost envelope.

On receipt of case notes you should receive an email notifying you that they have been logged on our database. Clinicians completing questionnaires who provide an email will also receive a similar email when they submit a questionnaire so that they can record the activity for their CPD.

Information Governance

NCEPOD is registered with the Information Commissioner's Office for the purpose of data protection: number **Z5442652**

In March 2019 we completed and submitted our Data Security and Protection Toolkit to NHS Digital. Information about our data security and protection arrangements is on our website. We have approval to collect patient data under Section 251 of the NHS Act (2006) and from the Public Benefit and Privacy Panel for Health and Social Care for NHS Scotland.

For all our approvals, data security and confidentiality information please [click here](#) or contact the office.

NCEPOD Green Policy

In our effort to reducing our carbon footprint we have recycled/shredded, since January 2019:

- Mixed paper - 310kg
- Confidential and white paper - 180kg
- Cans and plastics - 26kg

Saving a total of 4 trees and 740kg of CO2 emission savings

