



Inspiring Change

Publication of the acute non-invasive ventilation report

The report launch was held at the Royal College of Anaesthetists on 13th July 2017 - a fantastic day - thank you to all who attended, especially the presenters below, exhibitors and supporters to the right and all the people who displayed their posters!

Dr Michael Davies, Clinical Lead for the NIV Audit at the British Thoracic Society

Mr Roy M Dudley, Southern MBE - A patient's perspective

Dr Nick Scriven, President Elect, the Society for Acute Medicine

Mrs Ema Swingwood, Representing the Association of Chartered Physiotherapists in Respiratory Care

Dr Anna Batchelor, Representing the Faculty of Intensive Care Medicine

Mrs Liz Walker, Representing the Association of Respiratory Nurse Specialists

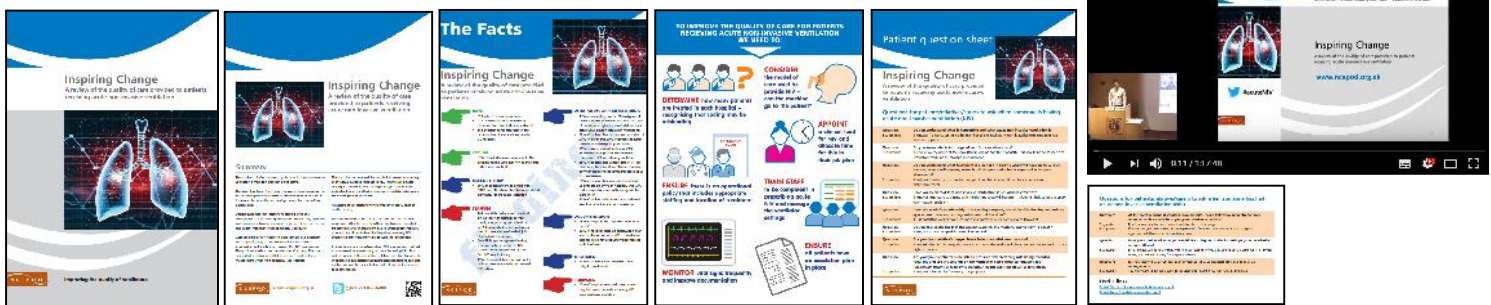
Dr Stephen Bourke, Consultant Respiratory Physician, North Tyneside General Hospital

Professor Mike Morgan, National Clinical Director for Respiratory Services for NHSE



The report and other resources are available to download from our website www.ncepod.org.uk/2017niv.html

The video of the report presentation is also available on the [NCEPOD YouTube channel](#)



CHANGES AHEAD!

We are reviewing our processes to help minimise (as much as we can) the data collection burden on hospitals due to NCEPOD studies. As we have taken on extra work we are aware of the impact this has had, particularly on NCEPOD Local Reporters. Some of the changes, which will become apparent with each new study, include the roll out of a new online questionnaire system to replace the paper ones. This has already started with the organisational questionnaire for the heart failure study and will be used again for the pulmonary embolism organisational questionnaire, with the aim to include clinical questionnaires in the system starting with acute bowel obstruction. Where we still have paper questionnaires, the length has been capped. We will only be starting one new topic for the child health programme rather than two and furthermore we are looking at our methods to try to reduce the number of case notes required during each year.

NEW STUDIES

Medical & Surgical programme
Pulmonary embolism has just started to be developed.

Acute bowel obstruction will be developed over the next few months.

Child Health programme

Long term ventilation will start to be developed in January 2018.

Study Updates

Chronic neurodisability

cp@ncepod.org.uk

The data collection period for this study has now come to an end. Thank you to everyone who has submitted data. The case note review meetings have also finished and the report is in the process of being compiled. The patient and parent carer questionnaires are still available for people to complete on our website.

This report will be launched at the Royal College of Nursing on Thursday 8th March 2018

LAUNCH BOOKINGS NOW OPEN!!

To reserve your place please email - ReportLaunch@ncepod.org.uk

Young people's mental health

ypmh@ncepod.org.uk

We have recently sent out final reminders for all aspects of the study. The deadline for the return of organisational questionnaires and inpatient clinician questionnaires was 11th October. The deadline for community questionnaires and mental health services in the general hospital (including psychiatric liaison) questionnaires and case notes is **10th November**. Thank you to everyone who has submitted data. The service user questionnaire is still available to complete on our website.

This report will be launched at the Royal College of Psychiatrists on Thursday 12th April 2018.

Cancer in children, teens and young adults

cictya@ncepod.org.uk

This study aims to explore the process of care of children, teenagers and young adults who died and/or had an unplanned admission to critical care within 60 days of receiving systemic anti-cancer therapy.

The publication for this study has been moved to September 2018 to allow more time for data to be returned to NCEPOD. We are aware that there is a concentration of cases at the principal treatment centres for paediatric oncology and we have tried to limit the number of questionnaires per clinician, however due to the overall small sample size of the study we have been unable to limit the numbers per hospital, as we would normally do. If you are struggling with the return of case notes please contact NCEPOD and we will do our best to help.

The final deadline for returning cases is **31st January 2018** so there is still time to return data to us, however as we are very low on case notes for review at the moment any notes that can be sent to us now would be very much appreciated. If you would like a summary of your outstanding data please contact cictya@ncepod.org.uk

Acute heart failure

heart@ncepod.org.uk

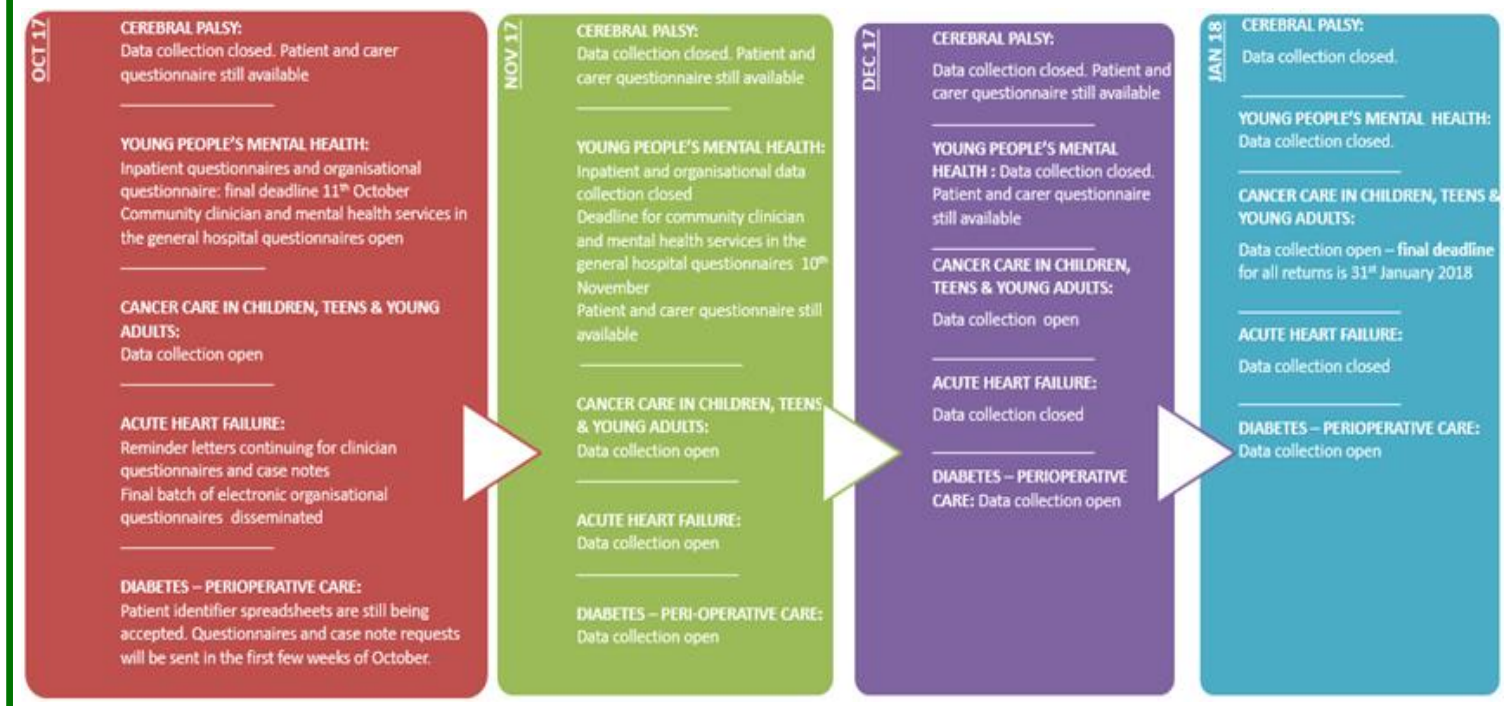
This study aims to explore remediable factors in the processes of care of patients treated for acute heart failure.

Data collection for this study is well underway and will remain open through to the end of November.

Local Reporters with one or more hospital participating in the study should now have received an email inviting them to activate an account for our online questionnaire system which is being used for the acute heart failure organisational questionnaire. Please refer to the acute heart failure study page for more details.

Quarterly updates will be sent at the end of October

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



Peri-operative diabetes

pd@ncepod.org.uk

This study aims to explore the process of care in the peri-operative management of surgical patients with diabetes across the patient pathway from referral to surgery for elective patients, and admission to hospital for emergency patients, to discharge from hospital. This study is looking at all adult patients (aged 16 and over) who have a diagnosis of Type 1 or Type 2 diabetes and who underwent a major surgical procedure between 1st February 2017 – 31st March 2017 (minor procedure codes are available on the study webpage).

Patient identifier spreadsheets were disseminated in May to all hospitals which undertake surgical procedures and are still being accepted; if you are unsure whether or not your hospital is participating or should be completing a spreadsheet please contact pd@ncepod.org.uk. If you have submitted your patient identifier spreadsheet but we have contacted you regarding missing information without which we cannot process your spreadsheet please contact us as soon as possible.

Questionnaire and case note requests are due to start in early October.

Pulmonary embolism

pe@ncepod.org.uk

NCEPOD has begun work on a new study that will look at the avoidable and remediable factors in the pathway of care of patients with pulmonary embolism, including management after patients leave hospital. Pulmonary embolism (PE) forms the extreme end of the spectrum of conditions grouped together as venous thrombo-embolism (VTE). VTE is more common in hospitalised patients, malignancy and other procoagulant states, pregnancy and IV drug abuse. It affects patients across the adult age range. So far we have recruited a study advisory group that had an initial meeting in September and is scheduled to meet again in late October. We are working on the study protocol and will have more information available in early November.

**Visit us at the Patient First Conference at the London Excel on 21st and 22nd November 2017
Stand M41**

PATIENTFIRST

PREVENTING HARM | IMPROVING CARE
21-22 NOVEMBER 2017, EXCEL LONDON

TREAT AS ONE

A new short video available on our mental health in general hospitals report. Watch the authors, Sean Cross and Vivek Srivastava discuss the findings in 11½ minutes!



Next Local Reporter & Ambassador Day

To be confirmed - Contact Dolores Jarman djarman@ncepod.org.uk to express your interest and we will notify you when the next date is confirmed.

Review of common themes from NCEPOD reports

Over the last 15 years NCEPOD has undertaken studies focused on particular areas of healthcare. Over time we have noticed that common themes/recommendations have emerged that would apply whether it is a review of sepsis or gastrointestinal bleeding. Later this year we will publish our findings in a 'living' report on our website that will be updated as themes appear or disappear - keep an eye on our website for more information.

Returning case notes to NCEPOD

By email - our preferred method of delivery

Scan the case notes rather returning them in the post, which is safer and cheaper for your hospital:

- ◆ Scan the notes as a PDF or save PDFs from your electronic patient record
- ◆ Always password protect the files (do not use simple passwords or the hospital name and don't put the password in the email with the attached files)
- ◆ Email them to us (in a sensible order) to ncepod@nhs.net
- ◆ 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.

The freepost licence number is **RTBS - XCXG - RGLA** Just use this licence number, along with our full address below to send any correspondence to us.

As always, 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. In addition, 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**

We have currently completed **version 14** of the **NHS IG Toolkit** with a score of **98%**

For all our approvals please click [here](#)

For information on how patients can opt out of their data being used by us then please click [here](#)

NCEPOD Green Policy

In our effort to reducing our carbon footprint we have recycled/ shredded, since February 2017:

Mixed paper - 851kg

Confidential and white paper - 1476kg

Cans and plastics - 70kg

Saving a total of 27 trees and 3410kg of CO2 emission savings



Breakdown of materials

