



Manchester University
NHS Foundation Trust

WELCOME TO THE COUNCIL OF GOVERNORS

Wednesday, 31st July 2019



Toli Onon

Joint Group Medical Director

Manchester University NHS Foundation Trust

What is a Never Event?

“Never Events are defined as Serious Incidents that are wholly preventable because guidance or safety recommendations that provide **strong systemic protective barriers** are available at a national level and should have been implemented by all healthcare providers. Strong systemic protective barriers are defined as barriers that must be successful, reliable and comprehensive safeguards or remedies – for example, a uniquely designed connector that stops a medicine being given by the wrong route.”

https://improvement.nhs.uk/documents/2265/Revised_Never_Events_policy_and_framework_FINAL.pdf

NEVER EVENTS



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Never Events List

Surgical

1. Wrong site surgery
2. Wrong implant/prosthesis
3. Retained foreign object post procedure

Medication

4. Mis-selection of a strong potassium solution
5. Administration of medication by the wrong route
6. Overdose of insulin due to abbreviations or incorrect device
7. Overdose of methotrexate for non-cancer treatment
8. Mis-selection of high strength midazolam during conscious sedation

Mental Health

9. Failure to install functional collapsible shower or curtain rails

General

10. Falls from poorly restricted windows
11. Chest or neck entrapment in bed rails
12. Transfusion or transplantation of ABO-incompatible blood components or organs
13. Misplaced naso- or oro-gastric tubes
14. Scalding of patients
15. Unintentional connection of a patient requiring oxygen to an air flowmeter

NEVER EVENTS



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**Never Events continue to happen:
there were 468 incidents
provisionally classified as Never
Events between 1st April 2017 and
31st March 2018***

* Opening the door to change. NHS Safety culture and the need for transformation. CQC. December 2018

NEVER EVENTS

Never Events at MFT

NEVER EVENTS	WRONG SITE SURGERY	WRONG IMPLANT	RETAINED OBJECT	POTASSIUM	WRONG ROUTE MEDICATION	INSULIN	METHOTREXATE	MDASOLAM	SHOWER RAILS	WINDOWS	BED RAILS	ABO BLOOD	NG TUBES	O2 / AIR	SCALDING	TOTAL
2018/19	1	1											2	1		5*
2019/20			1													1

*Highest Shelford Trust for 2018/19 = 12 Lowest = 0

What Happens When a Never Event is Reported?

- Board Report prepared
- External reporting requirements met
- Immediate investigation
- Duty of candour
- Staff support
- Root causes identified
- Lessons acted upon
- Learning shared

What is in place to prevent Never Events?

- Development of safety procedures and related training
- Freedom to Speak Up (F2SU) programme and personnel
- Quality and Safety Strategy and related policies
- Trust Governance structure – including Quality and Performance Scrutiny Committee
- AOF monitoring
- Patient Safety (Human Factors) Training Programme (PST)
- Root Cause Analysis (RCA) Training Programme
- Trust alert circulation process
- Trust incident investigation process
- Shelford Safety Leads forum for sharing learning

What are we doing to eliminate Never Events?

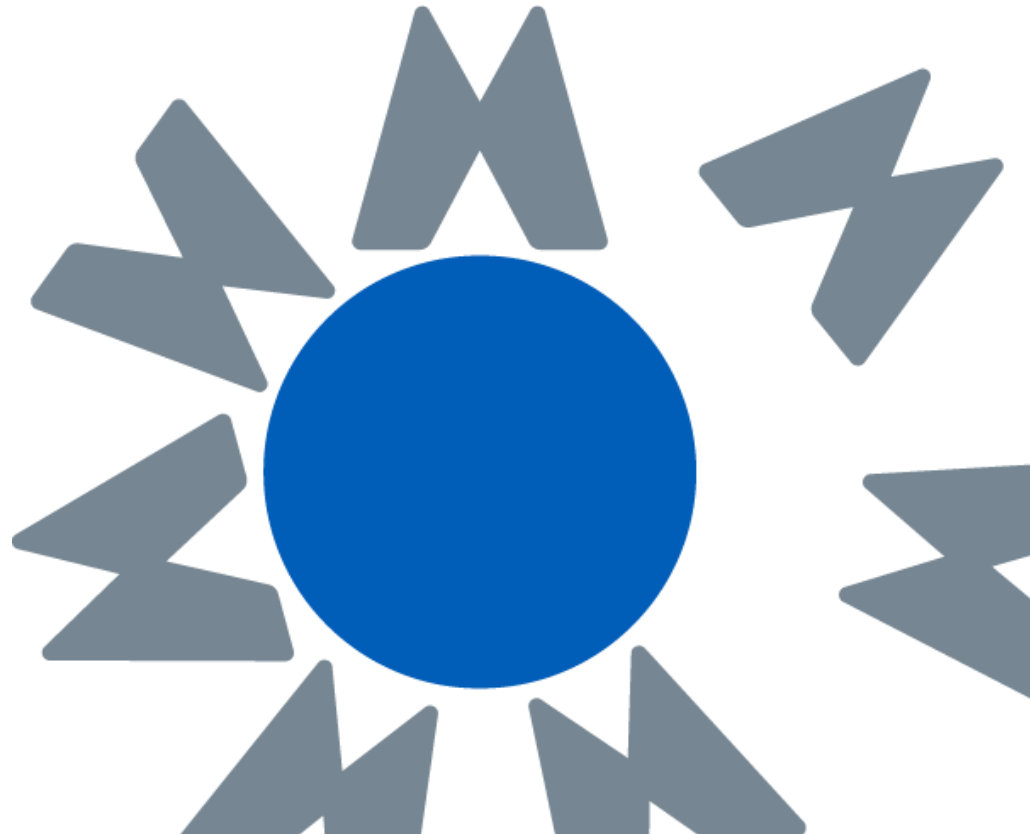
- Work to understand organisational Patient Safety Culture Survey and defining processes for on-going evaluation
- Development of an in-house Patient Safety Champion qualification – PST / RCA + Patient Safety Project
- Building the requirements for training into the mandatory training framework
- Building understanding of patient safety into the appraisal and revalidation processes
- Including statement on commitment to patient safety in all Trust contracts
- Developing post-investigation feedback questionnaire for staff and patients
- Developing further the clear aims in relation to reduction of harm aligned with NHS Patient Safety Strategy – Deterioration, Sepsis, NEWS, medication safety, IPC, maternity, falls pressure ulcers, nutrition and mental health
- Appointment Trust Compliance Officer to oversee alert circulation, response, review and follow-up
- Define CSG/CAC/CGC roles in standardisation of clinical practice

Questions?



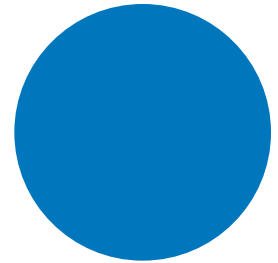
Hospital Pharmacy and Medicines Optimisation

Richard Hey
Joint Chief Pharmacist
July 2019



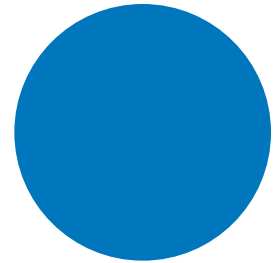
Group Chief Pharmacist.

- Accountable to the Group Board of Directors for pharmacy services.
- Accountable to the Group Board of Directors for all medicines activities.
- Systems Leadership role across local & GM health economy.
- National Leadership role.



Medicines

- ❑ The most common therapeutic intervention in healthcare.
- ❑ Play a crucial role in maintaining health, preventing illness, managing chronic conditions and curing disease.
- ❑ Every one of our patients is likely to be given a medicine as part of their treatment or care with MFT.
- ❑ NHS spends £18bn each year
- ❑ MFT spends £150m each year

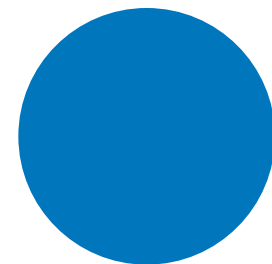


Medicines Optimisation

The right patients get the right choice of medicine, at the right time.

1. Aim to understand the patient experience.
2. Evidence based choice of medicines
3. Ensure medicines use is as safe as possible
4. Make medicines optimisation part of routine practice

Multidisciplinary but pharmacy provide the leadership and support.

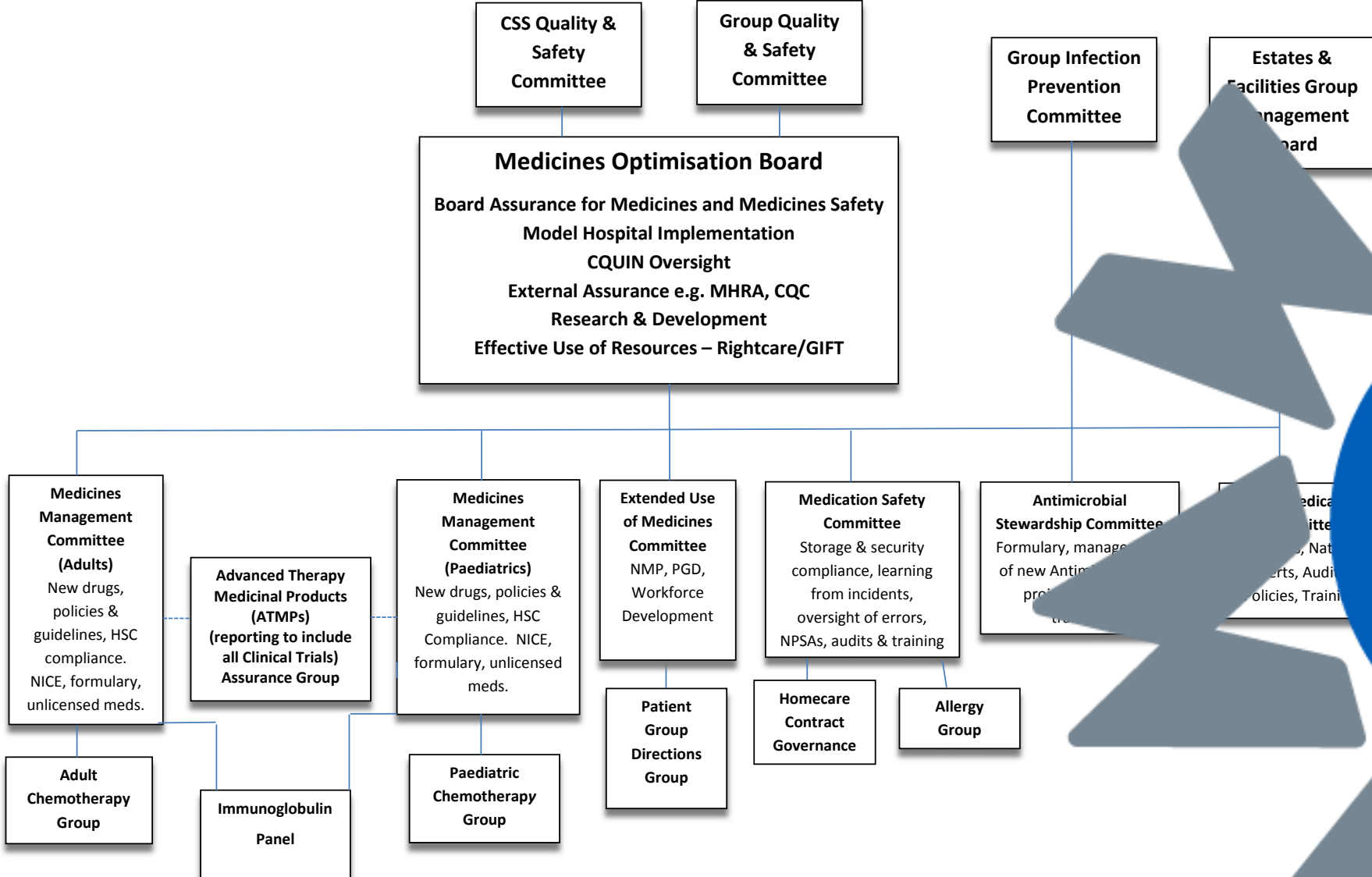


MFT Medicines Optimisation Agenda

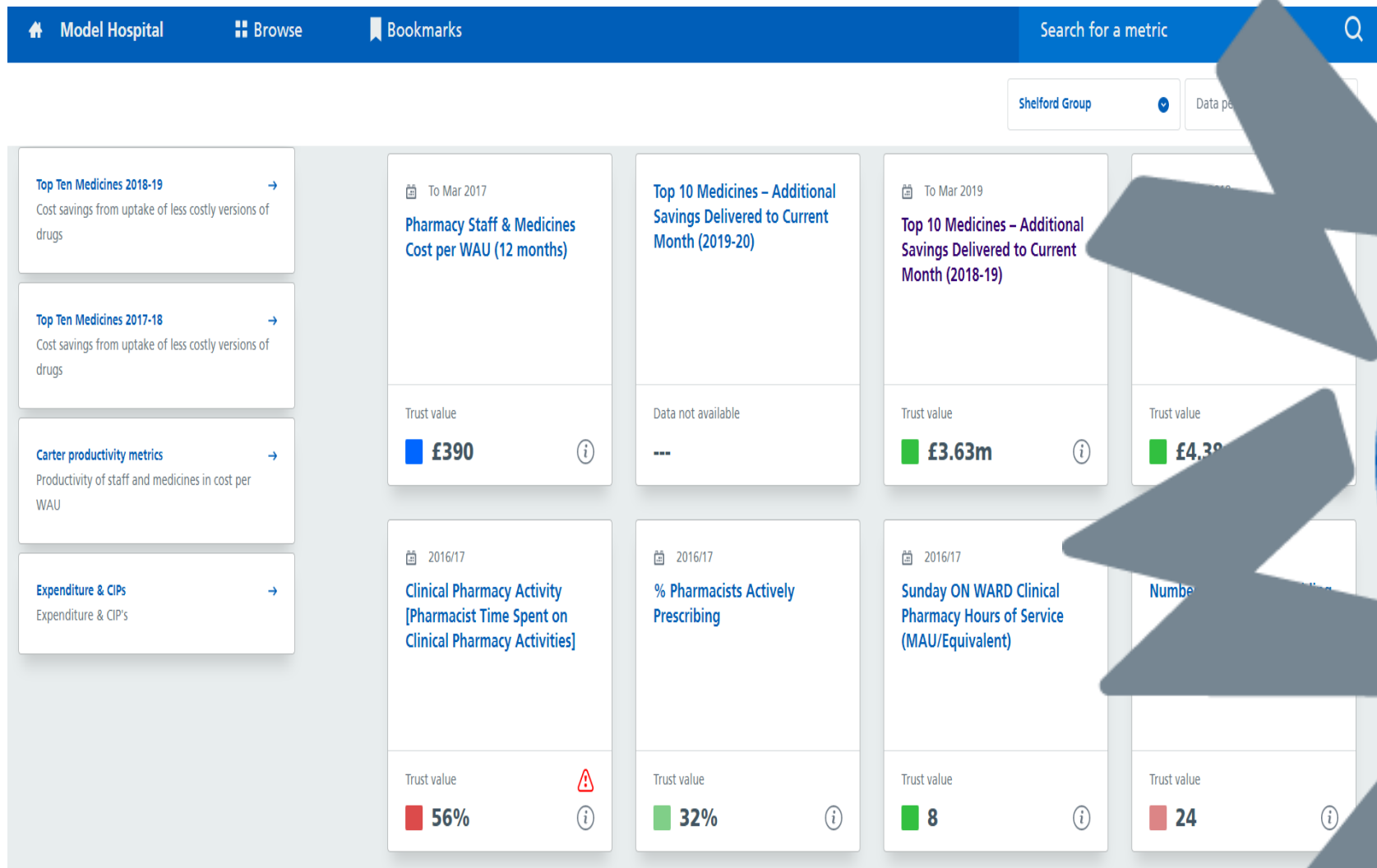


Objective	Progress
Implementation of Medicines Optimisation Governance structure	<ul style="list-style-type: none">• Medicines optimisation board established• Chaired by Group Medical Director
Delivery of robust financial efficiencies	<ul style="list-style-type: none">• Identification of £2.5m cost improvements• Biosimilar switch programme• Delivery of MO CQUIN
Implement robust processes across MFT for the safe & secure storage of medicines.	<ul style="list-style-type: none">• Harmonised audit program• Overseen by Medicines Safety Committee
Pharmacy Transformation	<ul style="list-style-type: none">• Role out of PharmAssist to support Patient Flow• Rationalisation of Aseptic Services• Harmonisation of Procurement processes (including support to manage shortages)
Support Research and Innovation agenda	<ul style="list-style-type: none">• Establishment of Consultant Pharmacist for ATMPs and Clinical Trials• ATMPs committee being established to oversee Governance

Medicines Governance Committee Structure



MO – Model Hospital Metrics



MFT Pharmacy Services



MFT Pharmacy

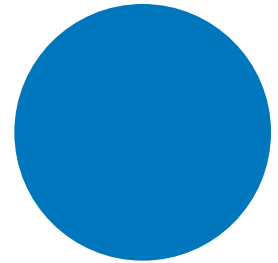
□ 6 Pharmacy Departments.

- Inpatient Dispensary (ORC)
- Inpatient Dispensary (Wythenshawe)
- In and Outpatient Dispensary (TGH)
- Adult Outpatient Dispensary (ORC) - Lloydspharmacy
- Paediatric Outpatient Dispensary (ORC) - Lloyds
- Outpatient Dispensary (Wythenshawe) - Rowlands

□ 450+ staff.

- Pharmacists
- Pharmacy technicians
- Pharmacy Assistants
- Support staff

□ 24/7 & 365 day availability.

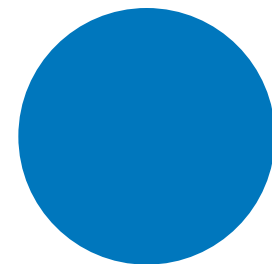


Pharmacy Service Availability

Service	Day	Oxford Road Campus	Wythenshawe Hospital	Trafford Hospital
In-patient Dispensary Opening Hours	Mon-Fri	9am-7pm	9 am-6.30pm	9am-5pm
	Sat-Sun	10am-1 pm	9 am-4.30pm	9am-12
	Bank Hol	10am-1 pm	9 am-4.30pm	10am-1pm
	Christmas Day	10am-1 pm	1 0am-2.30pm	Closed
Out of hours Services	24/7	Shift working pharmacist available on site 24/7	On call pharmacist available from home	On call pharmacist available from home
Aseptic Service	Mon-Fri	Chemotherapy preparation (Mon – Sat) PN preparation / dispensing	Chemotherapy, monoclonal antibodies, adult and neonatal TPN, Licensed batch production, CIVAs and clinical trials	Chemotherapy and monoclonal antibodies
AMU Clinical ward Service	Mon-Fri	7 am-8pm	7 am-6.15pm	9am to 5pm
	Sat-Sun	9.30am-4pm (limited service – 2 pharmacists)	9 am-5pm (limited service – 1 pharmacist)	9am to 12 (limited service – 1 pharmacist) Sun No service
	Bank Hol	9.30am-4pm (limited service – 2 pharmacists)	9 am-5pm (limited service – 1 pharmacist)	10am to 1pm (limited service – 1 pharmacist)
	Christmas Day	9.30-4pm (limited service – 2 pharmacists)	1 0am-2.30pm (limited service – 1 pharmacist)	No service
Ward based Pharmacy Clinical and Technical Service to other areas	Mon-Fri	9am-5pm		
Community Services	Mon-Fri	9am-5pm Provision of clinical pharmacist and technician service to Intermediate Care Units, Dermot Murphy Close, Discharge to access, IV service , Learning disability		

Thank you.

Questions?



Darren Banks

Group Executive Director of Strategy

Manchester University NHS Foundation Trust

Trafford Community Services



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- MFT designated preferred provider for Trafford Community Services in January 2019 (current provider is Pennine Care)
- Given the footprint of the organisation there is a natural fit with our current service portfolio and patient flows.
- Established a programme of due diligence to transfer services by 1 October 2019 – c650 staff.
- Services will be managed using some of our (Manchester) Local Care Organisation infrastructure, but critically will retain a Trafford identity.
- We are working on a programme of service transformation with Commissioners and Local Authority – building on the current integrated management arrangements.

Questions?





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MFT Annual Plan 2019/20

Darren Banks

Group Executive Director of Strategy

Manchester University NHS Foundation Trust

MFT Annual Plan for 2019/20

- Brings together Hospitals / MCSs and corporate team key plans for 2019/20
- Based on our strategic aims - demonstrates how our ***strategic aims are the golden thread*** that we are all working towards
- Hold ourselves to account

Informed by:

- Members and public survey
- Planning session in December
- Comments from CoG members

Content..

- Who we are
- Challenges and opportunities – short and longer term
- Our values
- Key plans of Hospitals / MCSs against each of our ***strategic aims***
- How we will manage risks and monitor delivery



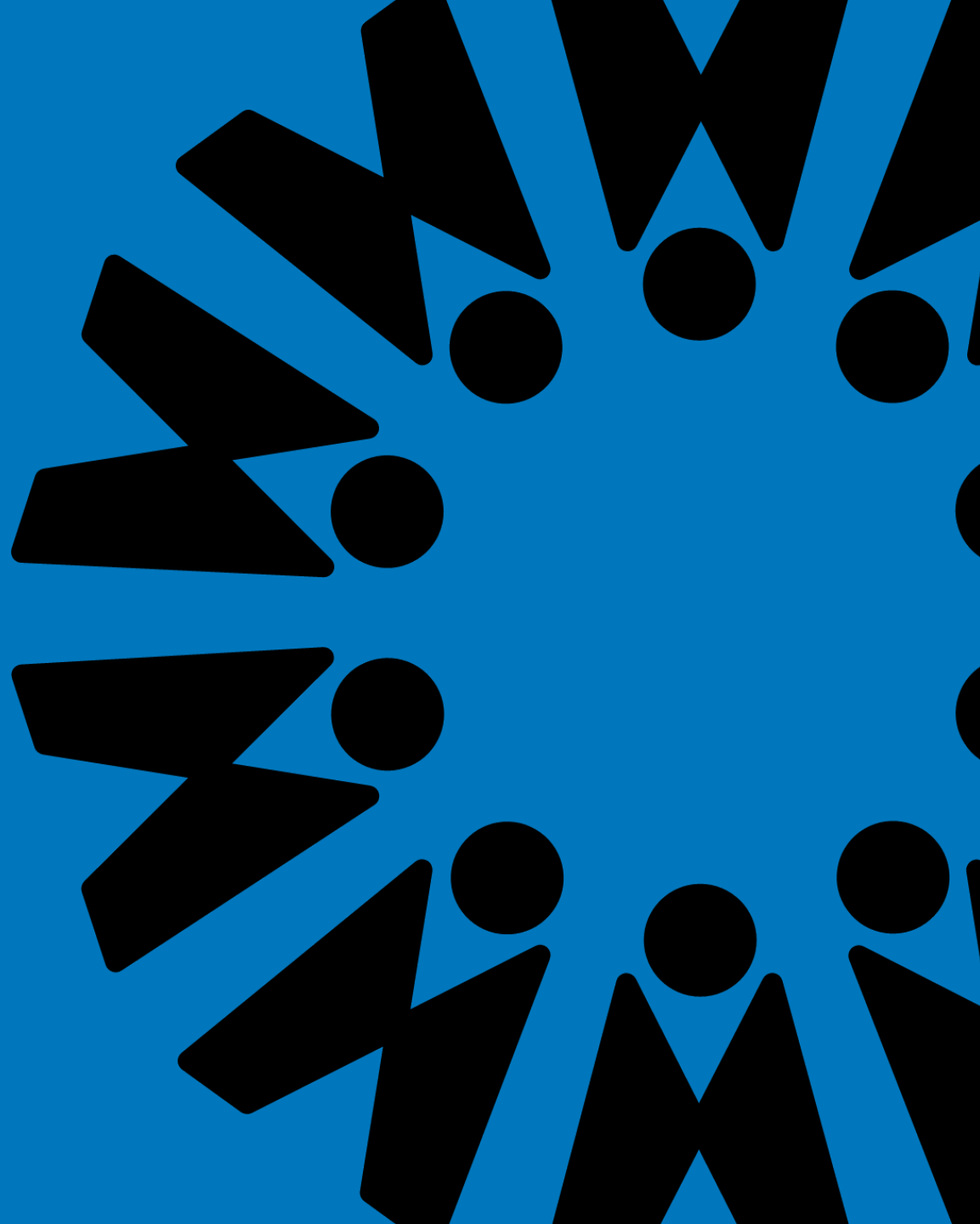
Strategic Aims

- To complete the creation of a Single Hospital Service for Manchester/ MFT with minimal disruption whilst ensuring that the planned benefits are realised in a timely manner
- To improve patient safety, clinical quality and outcomes
- To improve the experience of patients, carers and their families
- To develop single services that build on the best from across all our hospitals
- To develop our research portfolio and deliver cutting edge care to patients
- To develop our workforce enabling each member of staff to reach their full potential
- To achieve financial sustainability

Next steps

- Publish on MFT web site
- Develop monitoring framework
- Review delivery in December in preparation for 2020/21

Questions?





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