

Welcome!

As the fourth quarterly Round Up for IHPN Share and Learn we hope you find this update useful, please feel free to share with your colleagues!

New Share & Learn updates this quarter

Find enclosed recent learnings identified at the meeting held in September 2023.

Dates for your diary

Remaining 2023 dates of the Share & Learn CoP have been shared with CoP members.

Extending the invite across all sectors

If you would like to be invited to the CoP please contact Linda.Jones@ihpn.org.uk.

Medical Colleagues

The CoP would welcome to hear from any medical colleagues that would be interested in joining or presenting a case study during the meetings. Please contact Linda.Jones@ihpn.org.uk.

Feedback to IHPN

IHPN would be very keen to hear about any changes you have made to practice since receiving these share and learn updates. We would be delighted to be able to demonstrate that the group is contributing to turning the dial on patient safety. Please get in touch with Linda.Jones@ihpn.org.uk if you would like to share any changes you have made following to outcomes of the Share & Learn Community of Practice.

To learn more about the Share & Learn CoP please email info@ihpn.org.uk.

Welcome

Welcome to the fourth quarterly IHPN Share & Learn Community of Practice Round Up which intends to keep you up to date with learning outcomes following the IHPN Share & Learn meetings .

IHPN Share & Learn CoP

The IHPN Share & Learn Community of practice consists of a small number of representatives from the Independent Sector who come together to discuss an incident in a safe environment, sharing ideas, best practice and learnings right across the sector. The meetings are scheduled to take place every quarter and aims to improve patient safety by sharing learnings widely.

Share & Learn Report

IHPN plan to create a '12 months on' report before the end of the year to evaluate if the CoP is beneficial to the sector and to establish if there has been any impact on patient safety across the sector. 1 to 1 discussions are currently taking place and a survey for all providers has been created to gather your thoughts and feedback on how we can improve the Share & Learn CoP going forwards in to 2024. We would be very grateful for your feedback. **Please complete survey [here](#).**

Communities of practice are groups of people who share a concern or a passion for something they do and learn how to do it better as they interact regularly.

Shared Learning from incident

The case study related to a patient who rang 111 services and died the following day.

27th December 2022 @ 21.46pm

Call was placed to 111 for earache

Triaged and given a 2-hour disposition (to be called back by a clinician)

655 patients in the queue



27th December 2022 @ 23.28pm

Patient Safety call made by call handler

No worsening symptoms at the time

657 patients in the queue



28th December 2022 @ 17.44pm

Case was escalated as next case to be triaged by clinician due to length of time in the queue.



28th December 2022 @ 18.35pm

Clinician advised by daughter that patient had sadly died that morning in the local hospital.

Patient reported ear pain which was a “red herring”

Patient called 111 with a complaint of ear ache but during course of day had developed sepsis and Strep A symptoms.

- Learning: Ensure any additional signs and symptoms are explored during triage assessment or calls to the patient.

Winter pressures, “nationally” and the Strep A, Covid and Influenza outbreak created additional pressures

Despite planning for winter pressures, “nationally” were unprepared for the Strep A, Covid and Influenza outbreak.

Media coverage stating “call 111” and “Strep A child deaths” impacted on the surge demand.

Planned rota coverage was for an expected total of 745 cases, but the final total was 1145 cases.

The incident demonstrated how all OOH services were struggling with demand and the impact this had on patients and families accessing healthcare.

- Learning: National winter pressures planning to be done as early as possible.
- Learning: A contingency plan to be in place for the event of a National outbreak.
- Learning: Joint meetings to be held with Urgent Treatment Centre and trust to improve planning measures.
- Learning: Clinical Navigator now in place to improve processes for escalation and de-escalation of calls.

Family engagement

Daughter was naturally upset when clinician called that day. Initial phone call was challenging.

- Learning: Held fortnightly calls which helped develop a rapport and kept family involved during the investigation.
- Learning: Invited daughter and son into the office to share findings and to bring a picture of their mother. Showed them around the services to meet staff and managers. Helped the family to understand the complexities once shown visual representations on the screen.
- Learning: Family asked that their mother's case be highlighted as far as possible to share learnings so shared sector wide via IHPN Share & Learn group.