

# Winter 2021 Newsletter

## NIHR Yorkshire and Humber Patient Safety Translational Research Centre

### Welcome to our Winter 2021 Newsletter

In this edition we highlight some of the activities led by our Centre for World Patient Safety Day 2021, which focussed on 'Safe maternal and newborn care'. We have project updates from our themes about patient safety for people with learning disabilities, how doctors and patients in the Emergency Department can be supported to cope with uncertainty, overprescribing and problematic polypharmacy for older people living with frailty, and the impact of the Command Centre in Bradford Royal Infirmary on patient flow and patient safety. We also hear how our Lay Leaders have been involved in these projects. You can find out more about our Lay Leaders [here](#).

**We would like to say a huge thank you to our Lay Leaders for their continued enthusiasm and support.**

We hope you enjoy reading about our work. To find out more about us you can visit our website at [www.yhpstrc.org](http://www.yhpstrc.org) or get in touch with us via email at [pstrc@bthft.nhs.uk](mailto:pstrc@bthft.nhs.uk) or Twitter @YH\_PSTRC.

### World Patient Safety Day 2021

The third annual **World Patient Safety Day** took place on the 17th September. Each year, the World Health Organization selects a 'theme' to highlight a priority area for action. This year's theme was 'Safe maternal and newborn care'. Every day, 810 women and 6700 newborns lose their lives. While the greatest burden of these deaths is in low and middle income countries, confidential enquiry reports in the UK highlight that maternal mortality is higher in older women, those living in the most deprived areas and amongst women from ethnic minority groups. Most of these deaths are preventable through the provision of safe, effective and high quality care. Although coverage of evidence-based interventions such as antenatal care and skilled birth attendance have increased rapidly, the quality and safety of care provided to mothers and babies is often lacking. Reducing the safety risks during pregnancy and around the time of birth is critical for maternal and newborn survival.

In support of **World Patient Safety Day**, our Research Fellows; Dr Helen Smith and Dr Siobhan McHugh visited the labour ward, birth centre and the neonatal unit at Bradford Teaching Hospitals NHS Foundation Trust to gather feedback and ideas from staff and patients around how quality and safety can be improved in maternity. Suggestion boxes were placed in the neonatal and labour wards to encourage feedback from staff and patients to identify common, recurring and preventable problems. To learn more about the work carried out by the Yorkshire Quality and Safety Research Group (YQSR), which contributes to our understanding, and implementation, of safe maternal and newborn health care and services, please click [here](#) to read our **World Patient Safety Day** blog.



*Dr Siobhan McHugh &  
Dr Helen Smith*



# Research Theme updates

Read about how we have involved our Lay Leaders in projects across our themes: Patient Involvement in Patient Safety, Workforce Engagement and Wellbeing, Safe Use of Medicines and Digital Innovation.

## Patient Involvement in Patient Safety Theme

Over the last two years, a key aim of the Patient Involvement in Patient Safety theme has been to understand patient safety for people with learning disabilities. People with learning disabilities die at a rate far greater than the general population and from conditions which could be prevented or treated with good quality care. Mortality reviews of those with learning disabilities show three common themes regularly occurring:

- The need for healthcare coordination for people with complex or multiple health conditions.
- Assurance that effective reasonable adjustments are being provided for people with learning disabilities and their families.
- Mandatory learning disability awareness training for all staff supporting people with learning disabilities.

There is clear evidence that people with learning disabilities may be more at risk in terms of patient safety in hospital as well as known challenges around recognising and reporting patient safety incidents in this population.

We have explored patient safety for people with learning disabilities in three ways:

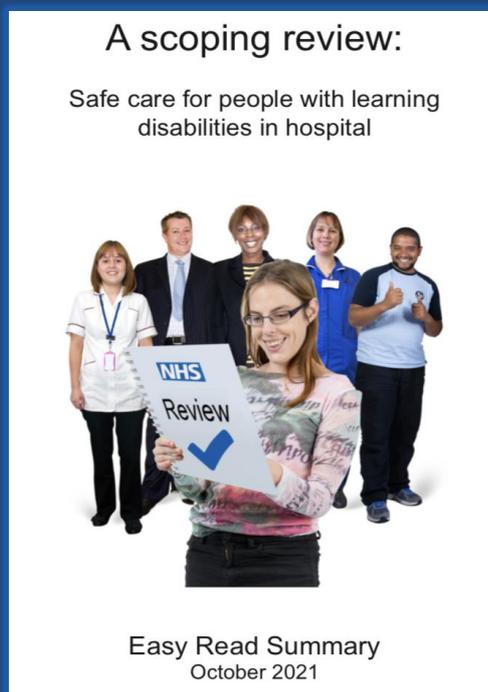
- 1) A scoping review focusing on patient safety outcomes for people with learning disabilities in an acute hospital setting.
- 2) Focus groups to ask those with learning disabilities and their carers and advocates what they want from their healthcare professionals.
- 3) Examination of **Care Opinion** narratives.

Our **scoping review** was recently published in BMJ Open, and we produced an Easy Read Summary of the scoping review findings which you can read [here](#).

### Lay Leader involvement

Our theme's Lay Leader; Kate Smyth is an author on the scoping review publication and had a significant, positive impact on the project by:

- Working with the research team to shape the focus of the scoping review;
- Suggesting search terms and potential websites/organisations for grey literature materials;
- Helping to develop a guidance document that was sent to stakeholders to facilitate contributions to search terms and potential websites/organisations for grey literature.



# Workforce Engagement and Wellbeing Theme

A third year student Emily Parker's PhD aims to identify how doctors and patients in the Emergency Department can be supported to cope with uncertainty. Where the uncertainty associated with discharging patients creates anxiety for doctors, liberal approaches to admission take place. Although such decisions are made with good intent, they can have a negative impact on patient safety, exposing patients to risks of unnecessary hospitalisation and placing the health service under increasing strain. So far, Emily's PhD has considered the uncertainty faced by staff and patients and identified potential areas for interventions through a review of the literature, interviewing doctors and surveying patients. Emily's final study draws upon existing findings and alongside patients and clinicians, will design an intervention to improve the experience of uncertainty for both staff and patients.

## Lay Leader involvement

**Hilary Thompson**, the Lay Leader for the Workforce Engagement and Wellbeing theme, has contributed hugely to Emily's research and skill development, particularly around communication of the findings. Hilary's involvement in Emily's PhD began in the first few months of the research for the study and the impact the research could have on patients. This motivated Emily to produce impactful research, informed by her expertise with older patients. Since then, Hilary has offered invaluable input at all stages of Emily's research, from considering research questions, to developing interview schedules and producing outputs. Hilary particularly enjoyed assisting Emily with analysing the interviews conducted with Doctors; collaborating with Emily to consider the complexities of discharging patients with social care needs.

This experience brought social care pathways to Emily's fore having had no prior knowledge of this particular health care sector.

Hilary's practical approach to improving healthcare along with Emily's theoretical approach made for an excellent team when creating outputs of research.

Emily produced a short video summarising the findings of the interview study to a Lay Leader as a result of drawing on Hilary's expertise. The video can be viewed [here](#).



*Emily Parker, PhD student*



*Hilary Thompson, Lay Leader*



# Safe Use of Medicines Theme

Since our inception, a core aim of the Safe Use of Medicines theme has been to tackle overprescribing and problematic polypharmacy for older people living with frailty, through supporting the safe practice of reducing or stopping medicines (deprescribing) in the primary care setting. Whilst medicines safety for everyone is important, it is particularly important for patients living with frailty, who are more likely to experience adverse drug events or side effects because of their medicines. Through a combination of research approaches with different groups including patients living with frailty, their informal carers, and healthcare professionals, we have developed a suite of tools that aim to support safe deprescribing practice in the primary care setting specifically for patients living with frailty. To understand the impact of our suite of tools on staff, patient, and carer experience of deprescribing, we developed a small-scale feasibility study. Having recently obtained research ethical approval to commence the study, we are currently liaising with GP practices to work with us to undertake the study. Primary care continues to be impacted by the COVID-19 pandemic, with many understandably focused on the delivery of the vaccine programme. As such, early engagement with GP practices suggests that we will begin the study at the start of 2022.

## Lay Leader involvement

Since our Lay Leader **Nazreen Butt** joined our theme, she has worked closely with us to develop studies across our theme, including our deprescribing study. Nazreen's own knowledge and experiences have been instrumental in supporting the development of patient-facing recruitment materials for the study. In addition, Nazreen has also supported the development of patient interview guides to ensure that we appropriately capture the patient's experience. Going forward, Nazreen will continue to be integral to the study, participating in the analysis of patient interview data, and supporting the appropriate dissemination of study findings.



## Blogs

For the Centre's current and previous blogs, please click [here](#).

## Digital Innovation Theme

The Digital Innovation theme is evaluating the impact of the Command Centre in Bradford Royal Infirmary on patient flow and patient safety. This research is funded through the NIHR HSDR funding stream. The Command Centre comprises clinical site teams and a Wall of Analytics – 8 tiles displaying real-time performance, operational and safety data. To date, the theme has developed an understanding of how the Command Centre supports operational planning through observing clinical site teams and interviewing key staff. An additional qualitative Research Fellow has recently joined the team who will contribute to a review of command centres in other industries, e.g. aviation, nuclear, oil and gas. In its evaluative work, the theme has gained access to the hospital data as it partners with Connected Yorkshire to map the many datasets describing how the hospital runs. The analysis plan will describe how measures of data quality, patient flow and patient safety have changed during the Command Centre's implementation and the COVID-19 pandemic.

### Lay Leader involvement

The theme's Lay Leader, **Naeem Sheikh**, has been integral to the Command Centre evaluation. As co-applicant, Naeem has been involved in the conception, drafting and delivery of the £456k project. Naeem now leads the work-stream dedicated to patient and public involvement and engagement. Activities have included supporting a workshop to gather patient and public perspectives on the how Command Centres might be beneficial and how we might measure their performance.



*Naeem Sheikh, Lay Leader*



*Command Centre, Bradford Royal Infirmary*



# Publications

The following papers have been recently published by members of the NIHR Yorkshire and Humber PSTRC:

Albutt A, Berzins K, Louch G, Baker J. (2021). Health professionals' perspectives of safety issues in mental health services: A qualitative study. *International Journal of Mental Health Nursing*. *International Journal of Mental Health Nursing*. ISSN 1445-8330 [doi.org/10.1111/inm.12838](https://doi.org/10.1111/inm.12838)

Louch G, Albutt A, Harlow-Trigg J, Moore S, Smyth K, Ramsey L, O'Hara JK. (2021). Exploring patient safety outcomes for people with learning disabilities in acute hospital settings: a scoping review. *BMJ open* [doi:10.1136/bmjopen-2020-047102](https://doi.org/10.1136/bmjopen-2020-047102)

Wilson, C., Janes, G., Lawton, R. and Benn, J. (2021). The types and effects of feedback received by emergency ambulance staff: protocol for a systematic mixed studies review with narrative synthesis. *International Journal of Emergency Services*. Vol. 10 No. 2, pp. 247-265. [doi.org/10.1108/IJES-09-2020-0057](https://doi.org/10.1108/IJES-09-2020-0057).

McInerney, C. Benn, J., Dowding, D., Habli, I., Jenkins, D.A., McCrorie, C., Peek, N., Randell, R., Williams, R. and Johnson, O.A. (2021). Patient Safety Informatics: Meeting the challenges of emerging digital health. *MedInfo 18* [in press].

Muhammad, F., Mohammed A.M., Richardson, D., Steyerberg, E.W., Fiori, M., and Beatson, K. (2021). Predictive accuracy of enhanced versions of the on-admission National Early Warning Score in estimating the risk of COVID-19 for unplanned admission to hospital: a retrospective development and validation study. *BMC Health Serv Res* **21(1)**, 957. [doi: 10.1186/s12913-021-06951-x](https://doi.org/10.1186/s12913-021-06951-x).

Mehdizadeh D, Hale M, Todd O, Zaman H, Marques I, Petty D, Alldred DP, Johnson O, Faisal M, Gardner P, Clegg A. (2021). Associations Between Anticholinergic Medication Exposure and Adverse Health Outcomes in Older People with Frailty: A Systematic Review and Meta-analysis. *Drugs Real World Outcomes*. Dec;8(4):431-458. [doi:10.1007/s40801-021-00256-5](https://doi.org/10.1007/s40801-021-00256-5).

David V, Fylan B, Bryant E, Smith H, Sagoo GS, Rattray M. (2021). An analysis of pharmacogenomic-guided pathways and their effect on medication changes and hospital admissions: A systematic review and meta-analysis. *Front. Genet.* 12:698148. [doi: 10.3389/fgene.2021.698148](https://doi.org/10.3389/fgene.2021.698148)

Fylan B, Tomlinson J, Raynor DK, Silcock J. (2021) Using experience-based co-design with patients, carers and healthcare professionals to develop theory-based interventions for safer medicines use. *Research in social & administrative pharmacy* [DOI: 10.1016/j.sapharm.2021.06.004](https://doi.org/10.1016/j.sapharm.2021.06.004)

Jameson A, Fylan B, Bristow GC, Sagoo GS, Dalton C, Cardno A, Sohal J and McLean SL (2021). What Are the Barriers and Enablers to the Implementation of Pharmacogenetic Testing in Mental Health Care Settings? *Front. Genet.* 12:740216. [doi:10.3389/fgene.2021.740216](https://doi.org/10.3389/fgene.2021.740216)

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