

# **QUALITY IMPROVEMENT PLAN (QIP) TARGETS QUARTERLY TRUST BOARD REPORT**

***VTE***

***5 May 2022***

## PROGRESS TO DATE

VTE is an important cause of death in hospital patients, and treatment of non-fatal symptomatic VTE and related long-term morbidities is associated with considerable cost to the health service. NICE guidance has been endorsed by Department of Health (DoH) and implemented in Northern Ireland. Assessing the risks of VTE and bleeding is a key priority for implementation of the guidelines.

All adult inpatient wards are required to provide patients with a regionally developed VTE patient information leaflet and usage is monitored by the Trust VTE Working Group. A memo was issued to ward managers and consultants in February 2022 as a reminder.

Compliance with completion of the VTE Risk Assessment within 24hrs of admission is a Commissioning Priority and Trust compliance is reported quarterly to the PHA via a SharePoint site. The target is to sustain improvement with VTE risk assessment across all adult inpatient hospital wards to achieve 95% compliance throughout 2021/22. Compliance reported to the PHA for 2021/22 is as follows:-

Year	Quarter	No. of records audited which achieve compliance with completed VTE risk assessment	Number of records audited	Percentage Compliance
2021/22	Apr-21	122	126	96.8%
	May-21	115	119	96.6%
	Jun-21	136	140	97.1%
	Jul-21	145	148	98.0%
	Aug-21	103	108	95.4%
	Sep-21	125	129	96.9%
	Oct-21	83	88	94.3%
	Nov-21	150	158	94.9%
	Dec-21	135	140	96.4%
	Jan-22	139	143	97.2%
	Feb-22	130	134	97.0%
	Mar-22	144	148	97.3%
	YTD	1527	1581	96.6%

*NB. Figures highlighted in red in the table above are provisional as Quarter 4 is not due to be reported to the PHA until end of May 2022. Whilst monthly percentage compliance appears high, these figures reflect compliance in relation to the number of audits actually submitted each month and does not represent the total number of adult inpatient wards within the Trust.*

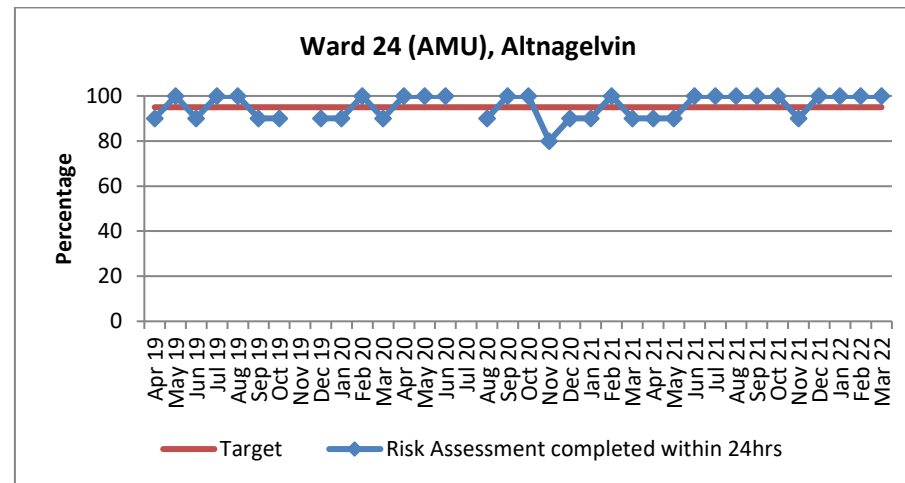
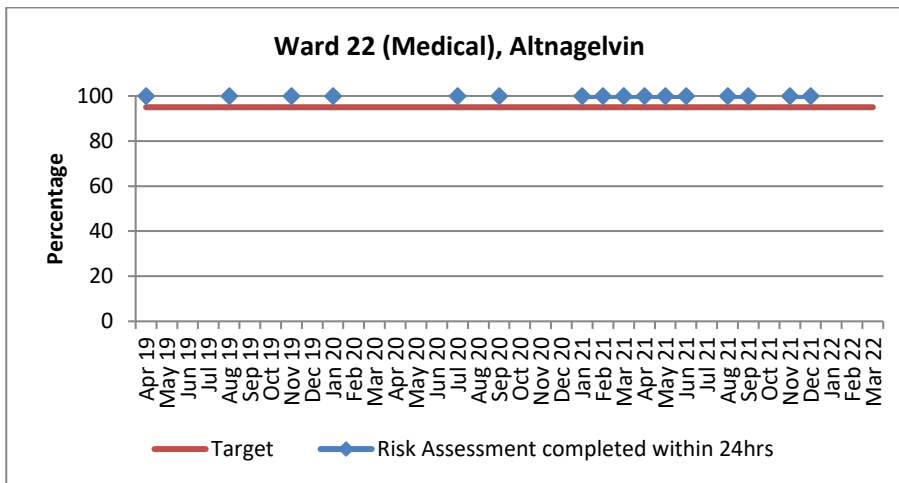
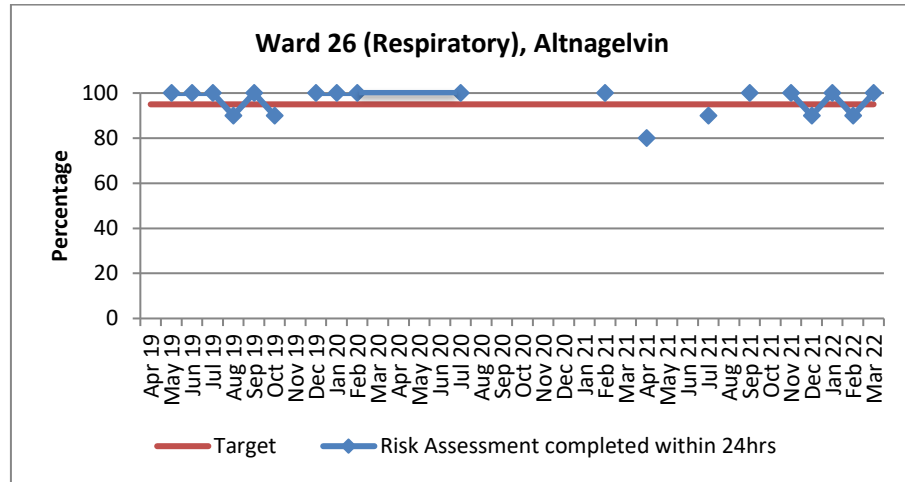
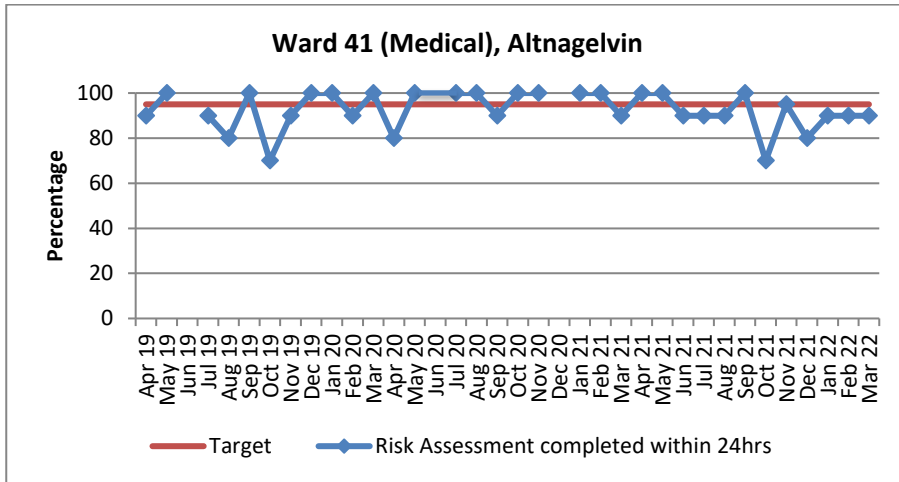
Compliance with completion of monthly VTE audits remains a challenge for some wards and the number of monthly audits submitted continues to be equal to or lower than 50% of the adult inpatient wards. Monthly reminder emails continue to be issued to the VTE Leads for all adult inpatient wards and compliance continues to be monitored as a standing agenda item by the Trust VTE Group. The VTE Group agreed that this issue should be escalated to the Clinical & Social Care Governance Sub-Committee and to establish a Task & Finish Group commencing March 2022 to review and improve the completion of monthly VTE audits for all relevant adult inpatient wards. A Risk (1389) has also been raised on the Medical Directorate Risk Register for a period of 6 months to successfully manage this risk, with a view to creating sustainability in all areas within VTE. This will continue to be monitored through the VTE Group and through the Clinical & Social Care Governance Sub-Committee.

From April 2021, a new format VTE report is included within the Clinical Quality & Safety Directorate Reports which are shared quarterly with Directorate Governance Groups. These reports highlight percentage compliance with the VTE audit bundle by ward and division as well as any areas where improvement is required with the regular submission of monthly VTE audits.

Monthly compliance by ward is recorded in the run charts below:-

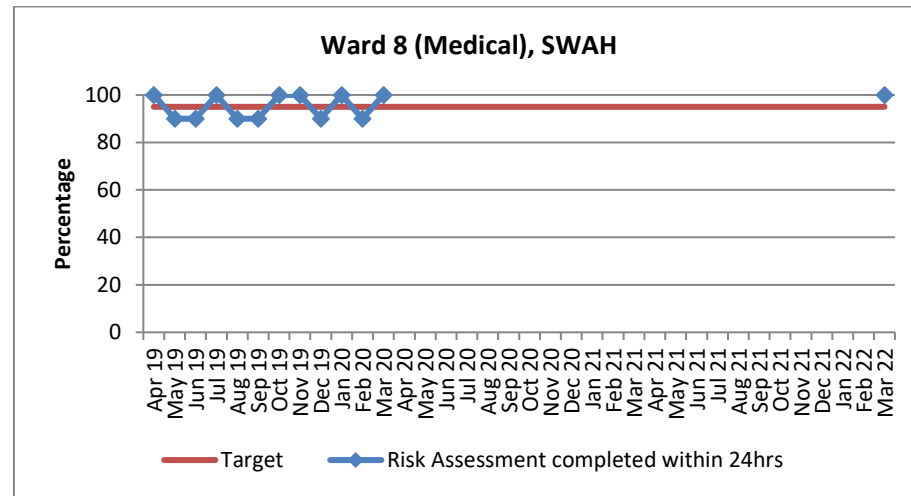
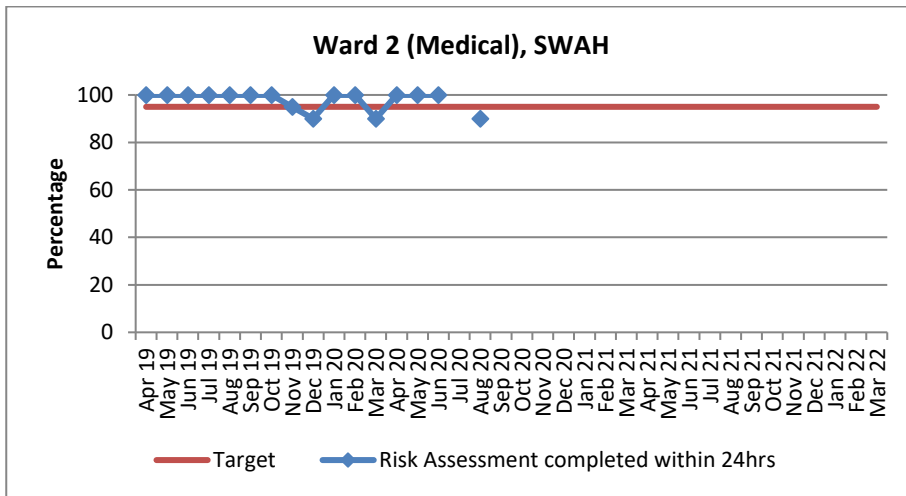
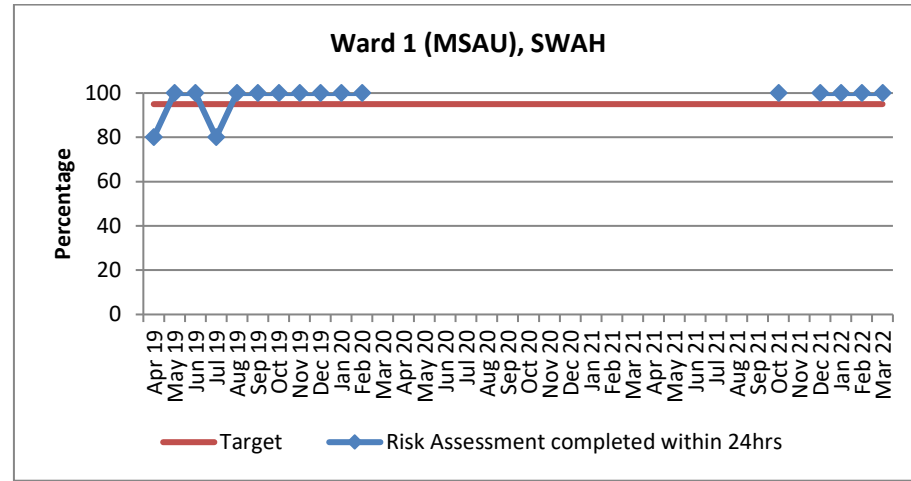
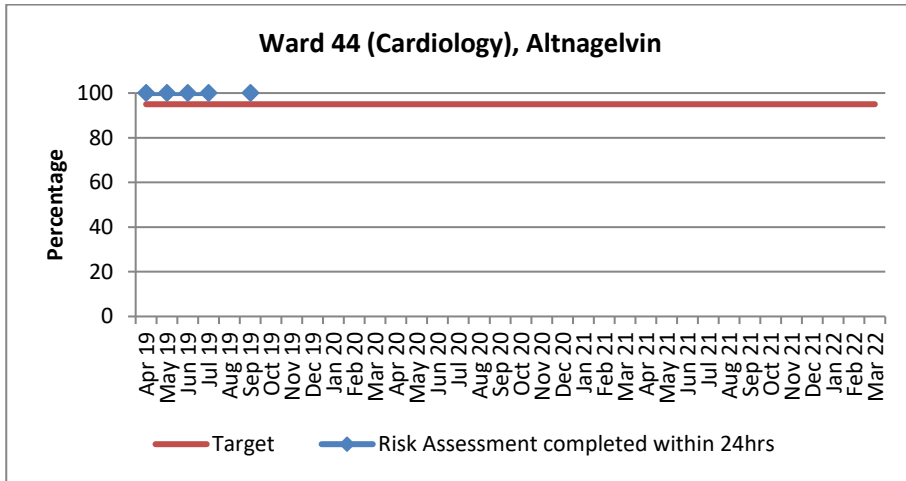
# VTE

**Target: To sustain improvement with VTE risk assessment across all adult inpatient hospital wards to achieve 95% compliance throughout 2021/22.**



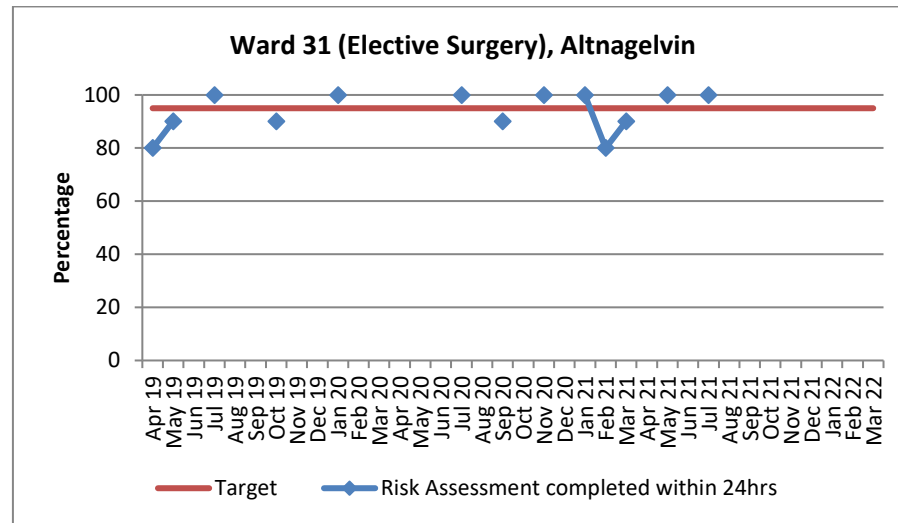
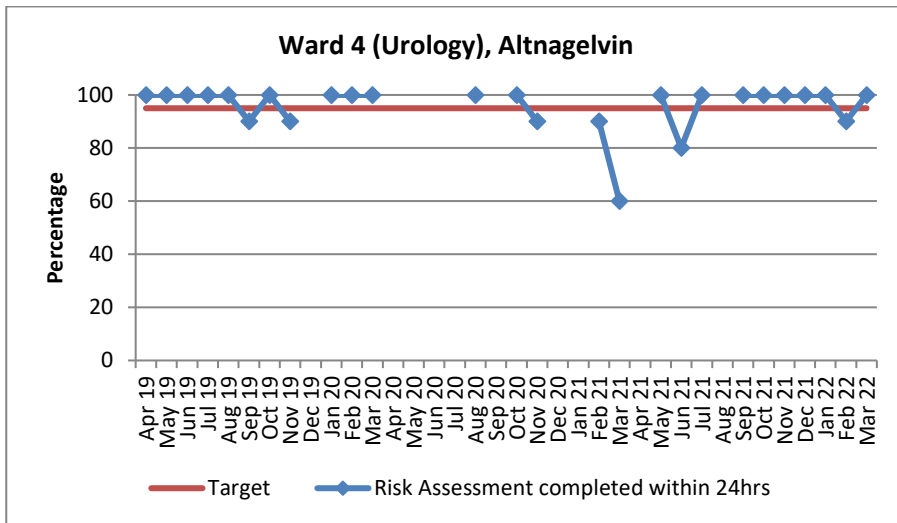
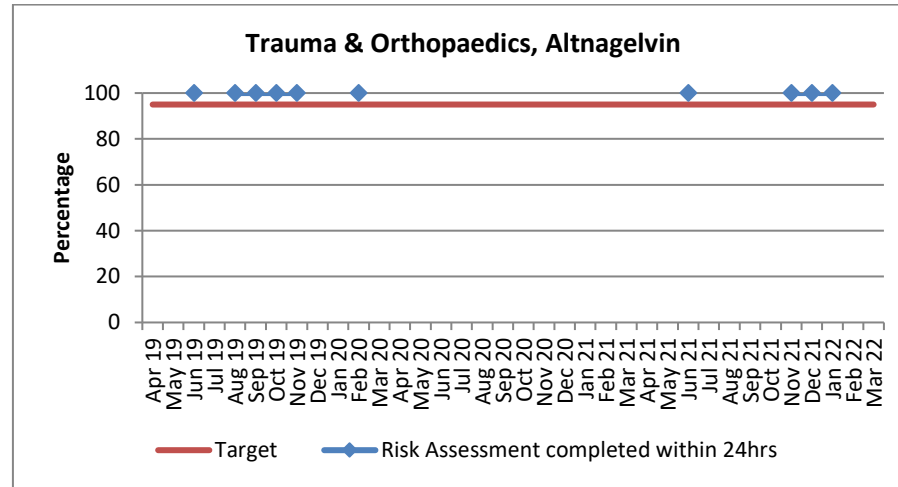
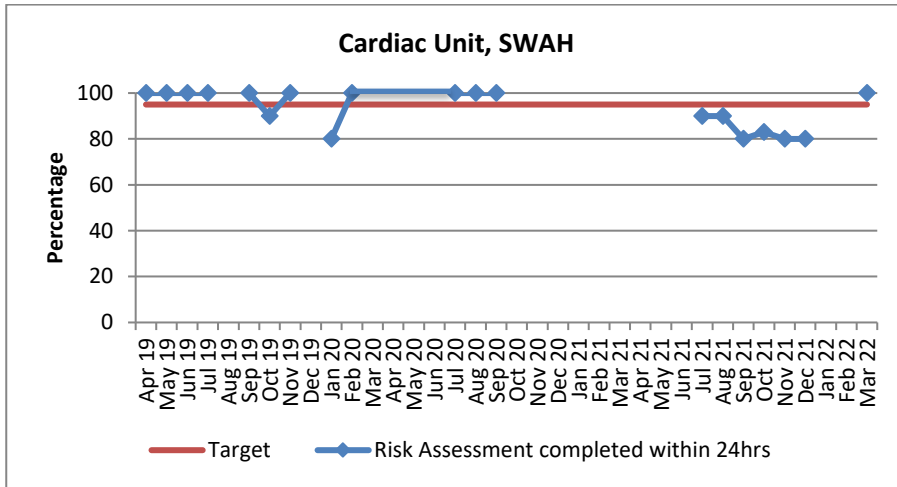
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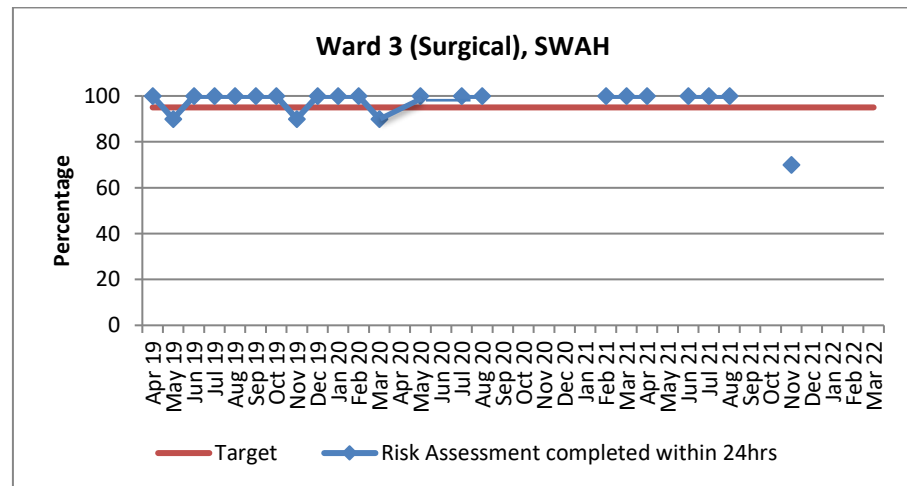
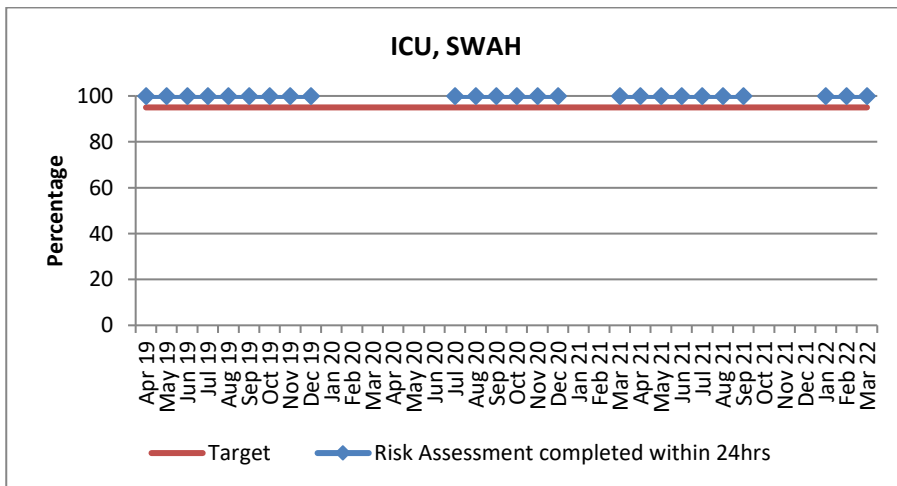
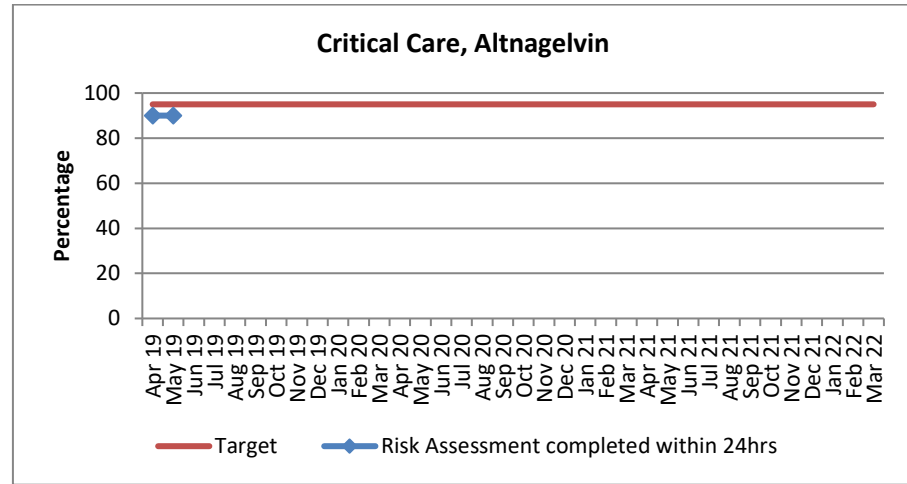
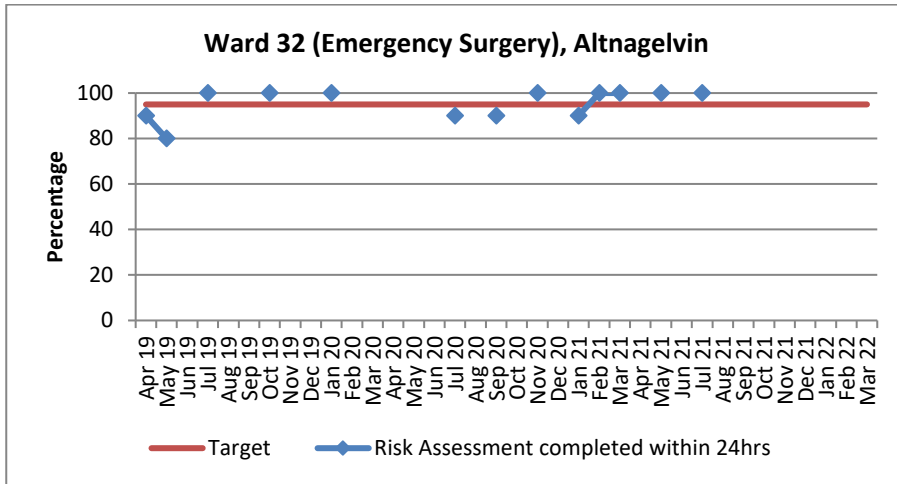
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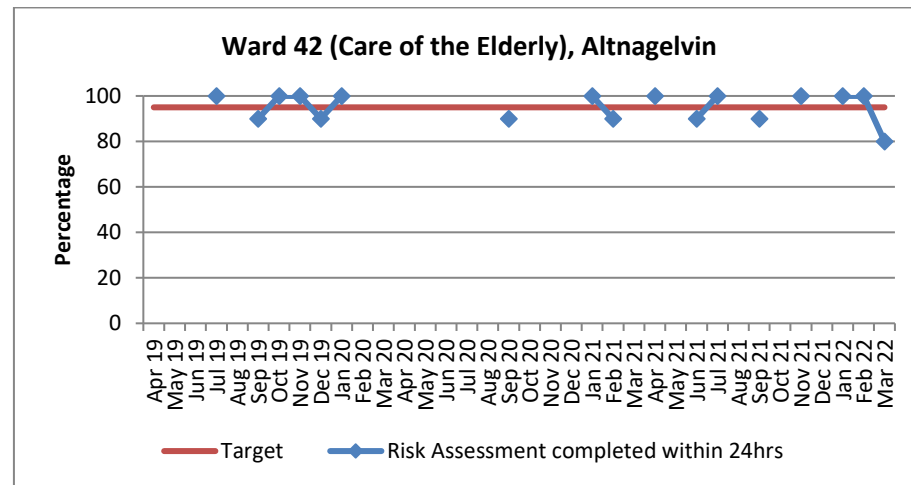
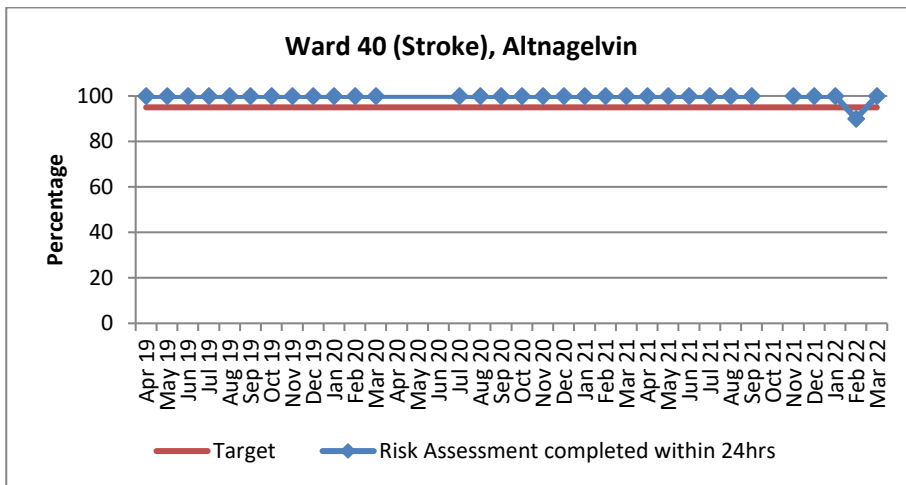
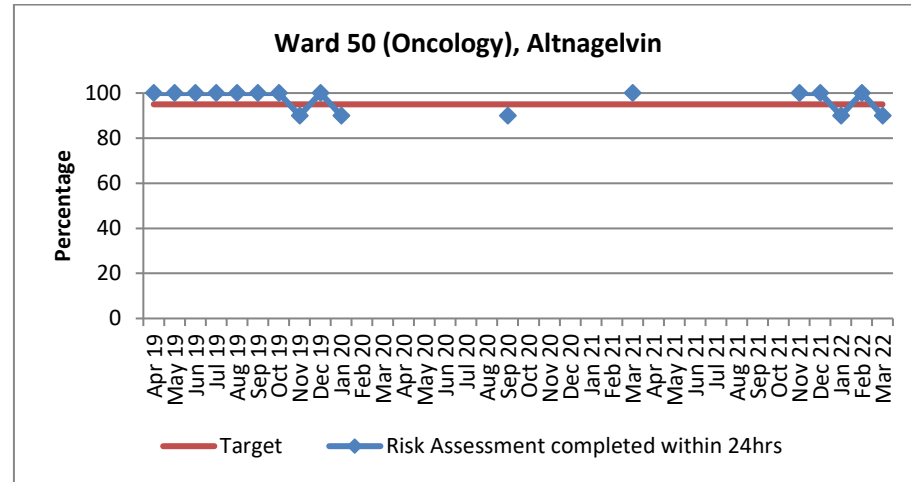
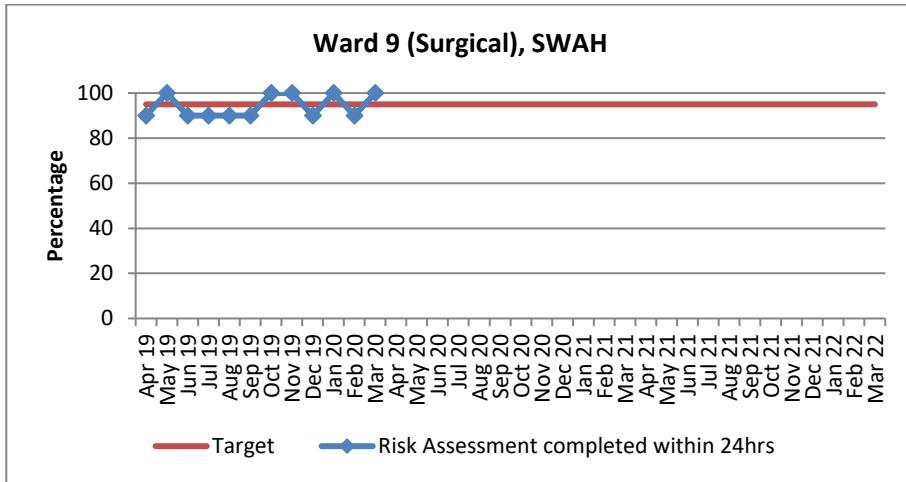
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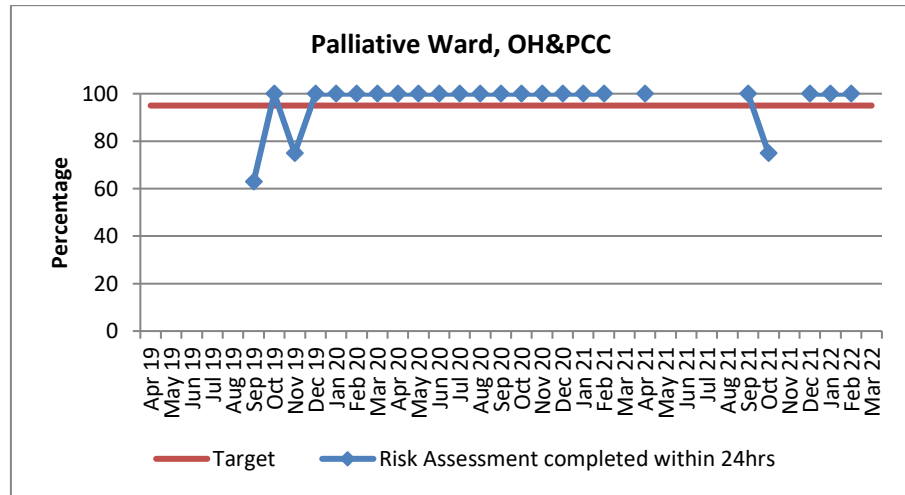
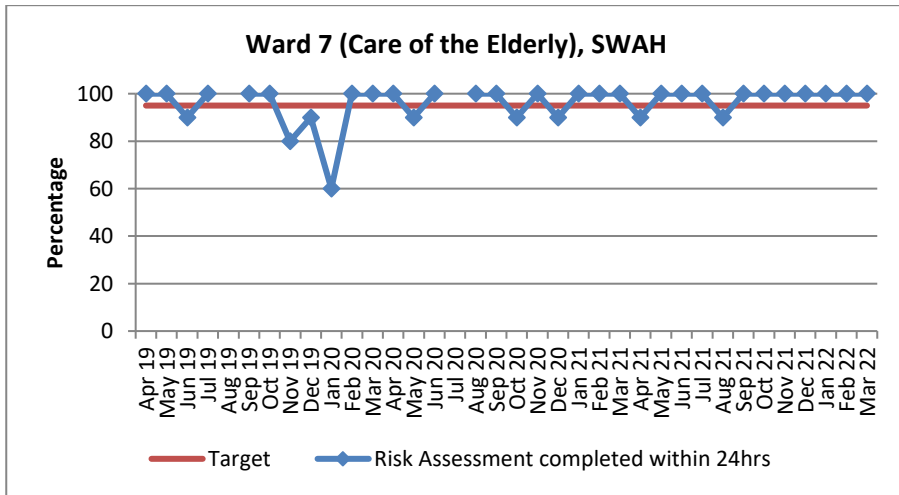
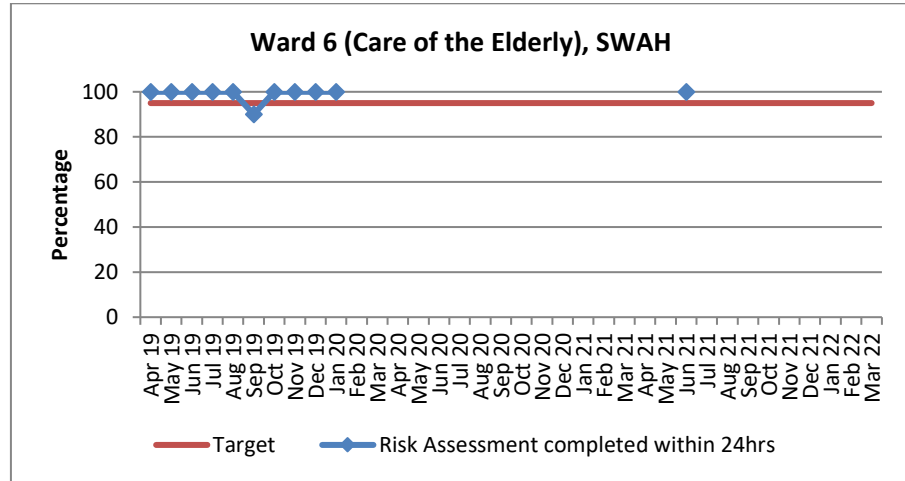
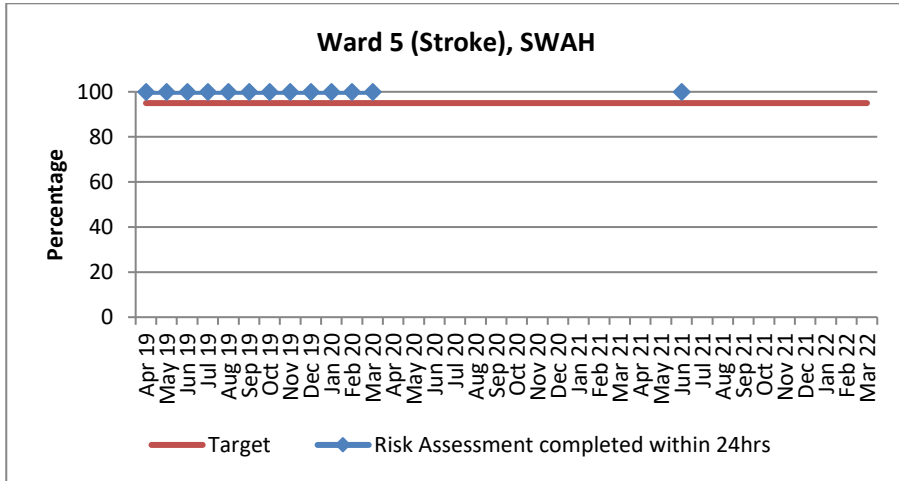
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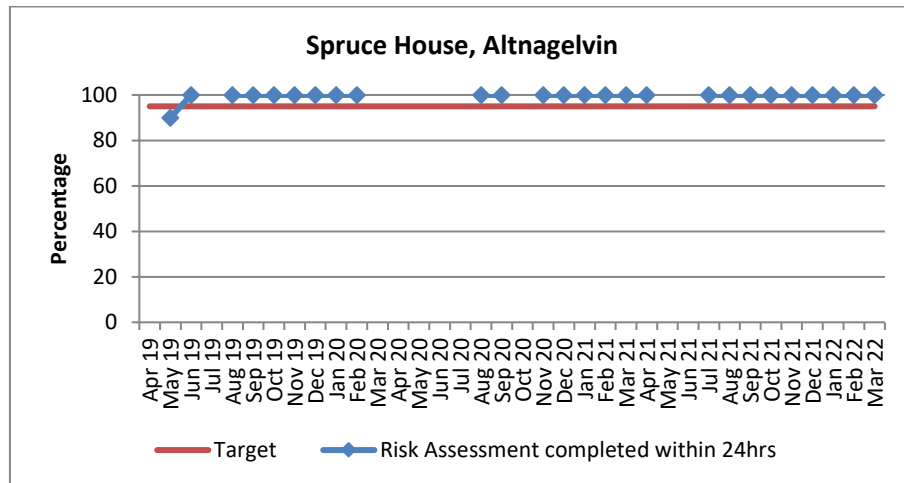
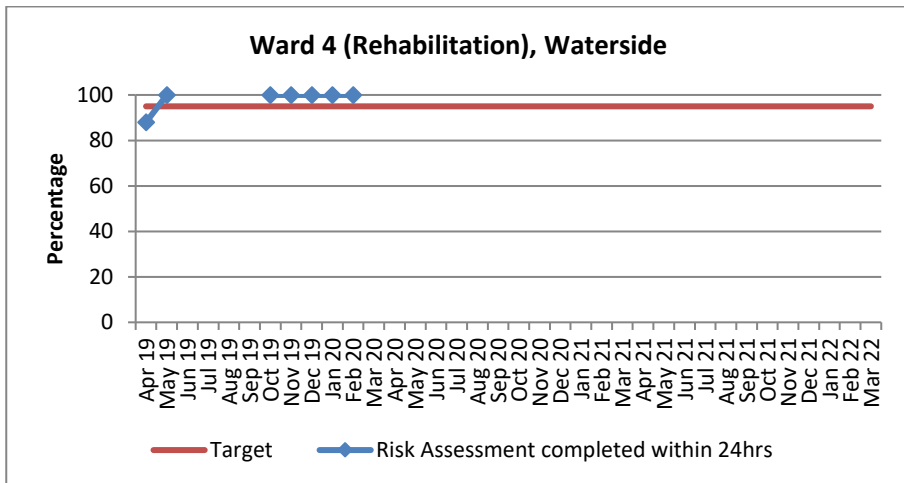
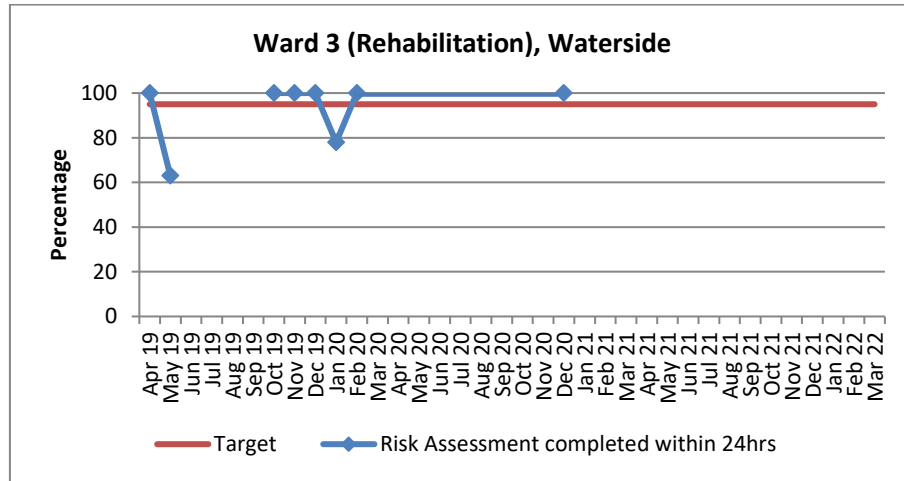
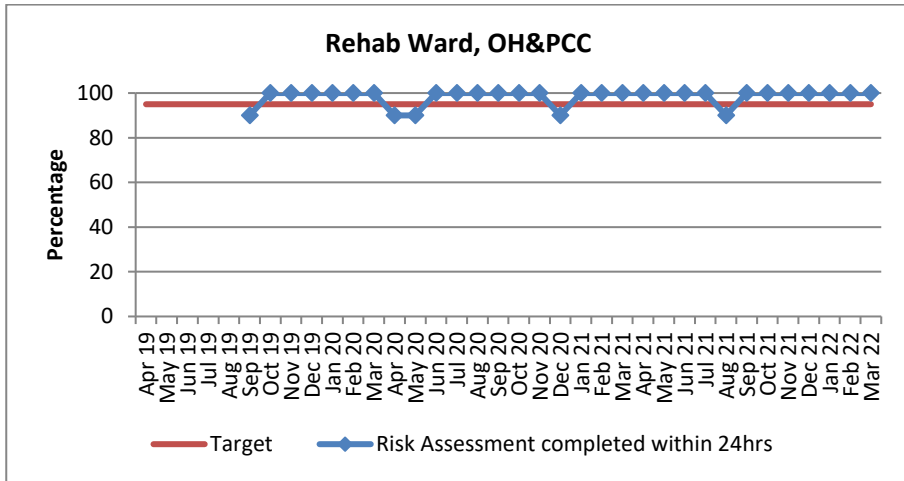
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