



October 2015

# Newsletter

National Confidential Enquiry into  
Patient Outcome and Death  
*'Improving the quality of healthcare'*



## ***'Just Say Sepsis!' on Tuesday 24th November 2015***

This report reviews the care provided to adult patients with a diagnosis of sepsis, identified by the Critical Care Outreach Team or equivalent, or who were admitted directly to critical care during the study period.

The report will provide comment on the following:

- \* Organisational structures, processes, protocols and care pathways for sepsis recognition and management
- \* Remediable factors in the management of the care of patients with sepsis, from presentation in primary care (if applicable) and throughout secondary care to discharge or death. Looking specifically at:
  - \* timely identification of sepsis
  - \* escalation and appropriate treatment of the infection
  - \* examining the recognition of sepsis and early signs of septic shock
  - \* use of a multidisciplinary team approach
  - \* the adequacy of communication with families and carers, as could be ascertained from the case notes



### **The Programme**

9.30 - 10.30 Tea/coffee and registration

Chair: Mr Bertie Leigh

10.30 Opening Session  
Ron Daniels - *UK Sepsis Trust*  
Alison Tavaré - *General Practitioner*

11.00 Report findings presented by:  
Dr Alex Goodwin  
Dr Vivek Srivastava  
Dr Hannah Shotton

12.30 Questions and Answers

13.00 Lunch and posters

14.00 Speakers to comment and discuss report findings

Dr Celia Ingham Clark  
*NHS Perspective*

Dr Mark Holland  
*Society for Acute Medicine*  
Dr Manu Shankar-Hari  
*International Definition of Sepsis*

Dr Chris Hancock  
*Public Health Wales*

*More speakers to be confirmed*

15.40 Panel questions

16:00 Tea/coffee and close

Thanks to the Royal College of Surgeons of England for sponsoring this event

Accredited 4 CPD points by the Royal College of Surgeons of England

Places are limited for this event, if you would like to reserve a place please email us at [reportlaunch@ncepod.org.uk](mailto:reportlaunch@ncepod.org.uk) and put SEPSIS in the subject line.

### **Poster Display**

As part of all report launches we invite abstracts to be submitted allowing you to showcase audits that you have undertaken on published NCEPOD reports or work related to the topic of the report being published.

To submit an abstract for a future launch download the abstract form at [www.ncepod.org.uk/events.htm](http://www.ncepod.org.uk/events.htm) and submit it by email to [poster@ncepod.org.uk](mailto:poster@ncepod.org.uk)

# Study updates

## Acute pancreatitis study

[ap@ncepod.org.uk](mailto:ap@ncepod.org.uk)

The aim of this study is to explore remediable factors in the processes of care of patients, aged 16 or over, who are admitted to hospital with a diagnosis of acute pancreatitis. The peer review meetings will continue until early November so we can therefore continue to accept completed questionnaires and photocopied case note extracts until the end of October. The findings of the study will be published in June 2016. Please see the Acute Pancreatitis study page <http://www.ncepod.org.uk/ap.htm> for further details and documents related to the study.

## Non-invasive ventilation study

[niv@ncepod.org.uk](mailto:niv@ncepod.org.uk)

NCEPOD are undertaking a study to explore remediable factors in the processes of care of patients, aged 16 or over, treated with non-invasive ventilation (NIV).

Hospital episode statistics data suggest that over 100,000 patients are treated with NIV per year (note that this figure includes patients treated with continuous positive airways pressure which will be excluded). The British Thoracic Society (BTS) has conducted an annual NIV audit since 2010. Patients with chronic obstructive pulmonary disease (COPD) account for more than 2/3 patients treated with NIV. Overall mortality rates have increased rather than improved in the last three audit periods. The audit data and other studies raise a number of important questions about both the care delivered and the organisation of NIV services. Peer review will help to describe reasons for treatment failure, high mortality rates and to assess the overall quality of care where this cannot be assessed based on the national audit results.

The Study Advisory Group met in September and we are currently drafting the questionnaires and study protocol. We will shortly be looking for volunteers to pilot the data collection method and also recruiting case reviewers. A starter pack for the full study will be sent out in late November.

## The care of patients with mental health conditions in acute hospitals

[mentalhealth@ncepod.org.uk](mailto:mentalhealth@ncepod.org.uk)

Concern has been expressed that for a number of reasons, mental health patients may receive poorer quality of care in acute general hospitals than those without a mental health disorder. This study was proposed to explore remediable factors in the care of patients with a mental health condition, who are admitted to an acute general hospital for their physical health needs. The Study Advisory Group responsible for designing and steering met twice earlier this year and have worked up the main themes for the study and designed the data collection materials. Case identification spreadsheets have been disseminated and we have had a very good return. We are currently piloting the data collection questionnaires, which will be disseminated in a few weeks time. We have recruited a multidisciplinary panel of Case Note Reviewers for this study. But we do still have room for any interested liaison psychiatrists, who would like to join the group. We are also currently asking our Local Reporters to identify a consultant liaison psychiatrist (where they haven't already done so) to be the local lead for this study.

## Cancer in children and young people

Cancer is the leading cause of death amongst children, teenagers & young adults aged (age 0-25) in the UK. Each year 3700 cases of cancer diagnosed in this age group, with over 600 deaths. For children and young people childhood cancer remains the biggest contributor to potential years of life lost from causes considered amenable to healthcare. This new study is in the very early stages of development. The Study Advisory Group who will advise on the themes to be explored and the methodology is being put together. More information will be available on the study page of the website very soon.



## NCEPOD Local Reporter & Ambassador Days

If you are interested in attending an NCEPOD training day, please send your interest to the below email address:

[DJarman@ncepod.org.uk](mailto:DJarman@ncepod.org.uk)

If you are interested in becoming an Ambassador contact us at [info@ncepod.org.uk](mailto:info@ncepod.org.uk) and we can tell you whether your Trust has someone already.

## Contact details

Ground Floor  
74-76 St John Street  
London  
EC1M 4DZ

Telephone: 020 7251 9060  
Fax: 020 7250 0020

Freepost licence number is RTBS - XCXG - RGLA

Please use this licence number, along with our full address 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 will need to add £1.10 onto the freepost envelope.

Please ensure envelopes are security sealed when sending case notes by post or with courier.

**Alternatively...scan your case notes to us!**

NCEPOD can accept scanned case notes rather than you returning them in the post.

Email them to us (in a sensible order please) at:

[ncepod@nhs.net](mailto:ncepod@nhs.net)

**and don't forget to password protect the file!**

Please inform us when they have been sent.

On receipt of questionnaires we will email Consultants to acknowledge receipt and that it was completed fully so that they can record the activity for their CPD.

We will also automatically acknowledge case notes as soon as they are logged on our system so that Local Reporters know we have received them.

### Non-Clinical Staff

Marisa Mason, Chief Executive  
[mmason@ncepod.org.uk](mailto:mmason@ncepod.org.uk)

Neil Smith, Clinical Researcher  
Deputy Chief Executive  
[nsmith@ncepod.org.uk](mailto:nsmith@ncepod.org.uk)

Robert Alleway, IT Manager  
[ralleway@ncepod.org.uk](mailto:ralleway@ncepod.org.uk)

Heather Freeth,  
Clinical Researcher  
[hfreeth@ncepod.org.uk](mailto:hfreeth@ncepod.org.uk)

Hannah Shotton,  
Clinical Researcher  
[hshotton@ncepod.org.uk](mailto:hshotton@ncepod.org.uk)

Kirsty MacLean Steel,  
Project Manager Child Health  
[kmacleansteel@ncepod.org.uk](mailto:kmacleansteel@ncepod.org.uk)

Karen Protopapa, Researcher  
[kprotopapa@ncepod.org.uk](mailto:kprotopapa@ncepod.org.uk)

Kathryn Kelly, Researcher  
[kkelly@ncepod.org.uk](mailto:kkelly@ncepod.org.uk)

Aysha Butt, Research Assistant  
[abutt@ncepod.org.uk](mailto:abutt@ncepod.org.uk)

Dolores Jarman,  
Administrative Officer  
[djarman@ncepod.org.uk](mailto:djarman@ncepod.org.uk)

Eva Nwosu, Admin Officer  
[enwosu@ncepod.org.uk](mailto:enwosu@ncepod.org.uk)

Donna Ellis, Admin Officer  
[dellis@ncepod.org.uk](mailto:dellis@ncepod.org.uk)

Anisa Warsame  
Office Co-ordinator  
[awarsame@ncepod.org.uk](mailto:awarsame@ncepod.org.uk)

Nick Mahoney, Admin Officer  
[nmahoney@ncepod.org.uk](mailto:nmahoney@ncepod.org.uk)

### Clinical Staff

Dr Mark Juniper  
Consultant Physician  
[mjuniper@ncepod.org.uk](mailto:mjuniper@ncepod.org.uk)

Dr Vivek Srivastava  
Consultant Physician  
[vsrivastava@ncepod.org.uk](mailto:vsrivastava@ncepod.org.uk)

Mr Martin Sinclair  
Consultant Surgeon  
[msinclair@ncepod.org.uk](mailto:msinclair@ncepod.org.uk)

Mr Derek O'Reilly  
Consultant Surgeon  
[doreilly@ncepod.org.uk](mailto:doreilly@ncepod.org.uk)

Dr Kathy Wilkinson  
Consultant Paediatric  
Anaesthetist  
[kwilkinson@ncepod.org.uk](mailto:kwilkinson@ncepod.org.uk)

Dr Alex Goodwin  
Consultant Anaesthetist  
[agoodwin@ncepod.org.uk](mailto:agoodwin@ncepod.org.uk)

Dr Simon McPherson  
Consultant Interventional  
Radiologist  
[smcpherson@ncepod.org.uk](mailto:smcpherson@ncepod.org.uk)

Dr Sean Cross  
Consultant Liaison Psychiatrist  
[scross@ncepod.org.uk](mailto:scross@ncepod.org.uk)

Dr Mark Allsopp  
Consultant Adolescent  
Psychiatrist  
[mallsopp@ncepod.org.uk](mailto:mallsopp@ncepod.org.uk)

Dr Karen Horridge  
Consultant Paediatrician  
[khorridge@ncepod.org.uk](mailto:khorridge@ncepod.org.uk)

Ms Gemma Ellis  
Nurse Consultant  
[gellis@ncepod.org.uk](mailto:gellis@ncepod.org.uk)

## NCEPOD Green Policy

We are always and will continue to be committed in helping to reduce our carbon footprints and do our best to help save the environment. Since June 2015, NCEPOD has recycled/shredded; 418kg of mixed paper, 255kg of confidential and white paper, 36kg of cans and plastics.. Saving a total of 6 trees and 1,016kg of CO<sub>2</sub> emission savings.

