



University Hospitals  
of Leicester  
NHS Trust

# UHL Quality Care Standards

Dawn Angliss- Deputy Chief Nurse

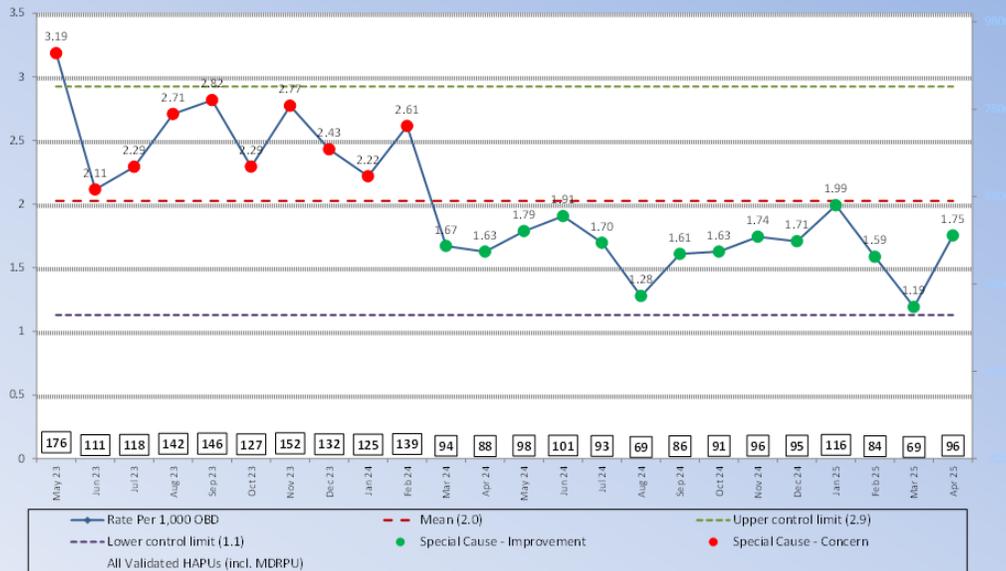


Number of HAPU's		HAPU's by 1,000 OBD	
<b>96</b>	<b>↑</b>	<b>1.75</b>	<b>↑</b>
Current Month	Previous Month	Current Month	Previous Month

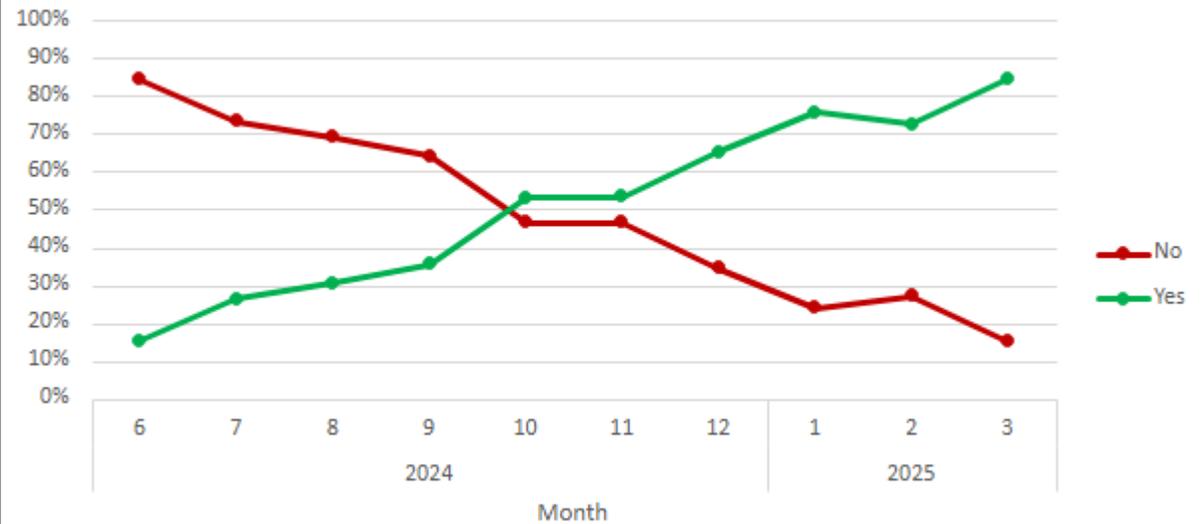
### Key Points

- Total of 96 HAPU's were confirmed in April, affecting 78 people.
- 5 of the 8 CMG's have seen an increase in the number of HAPU's in April compared to March
- 16 DTI's resolved this month. These numbers have remained stable for the last 3 months

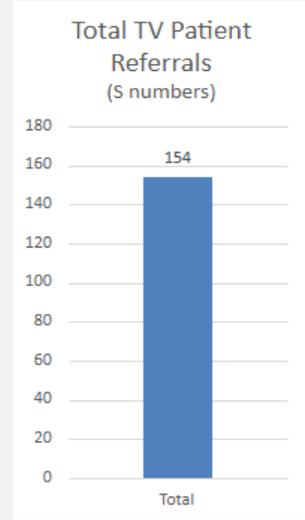
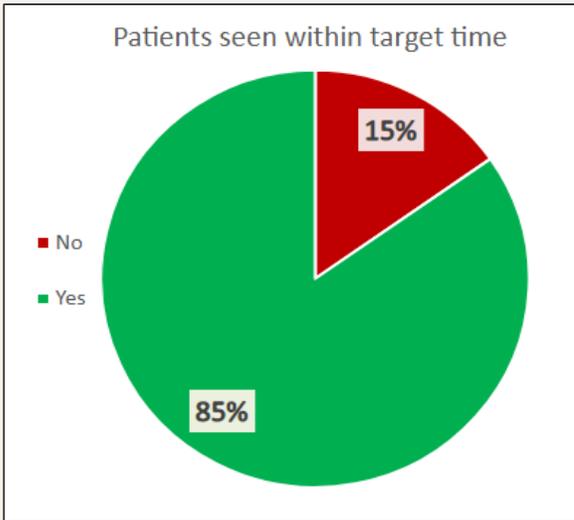
All Validated HAPUs by Month (incl. MDRPU) Rate per 1,000 bed days



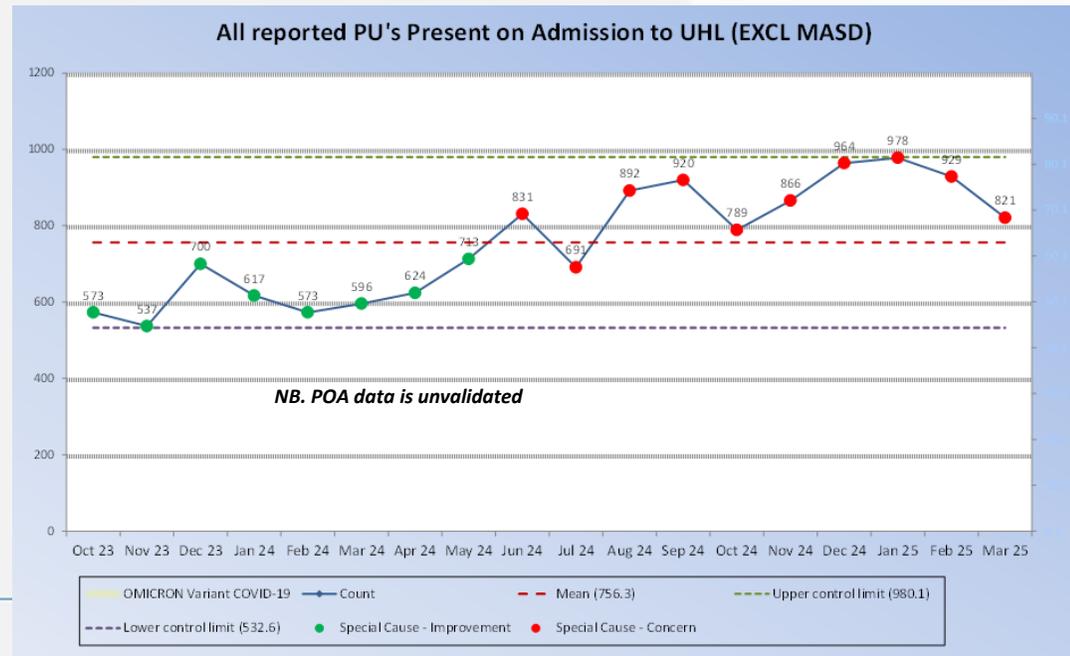
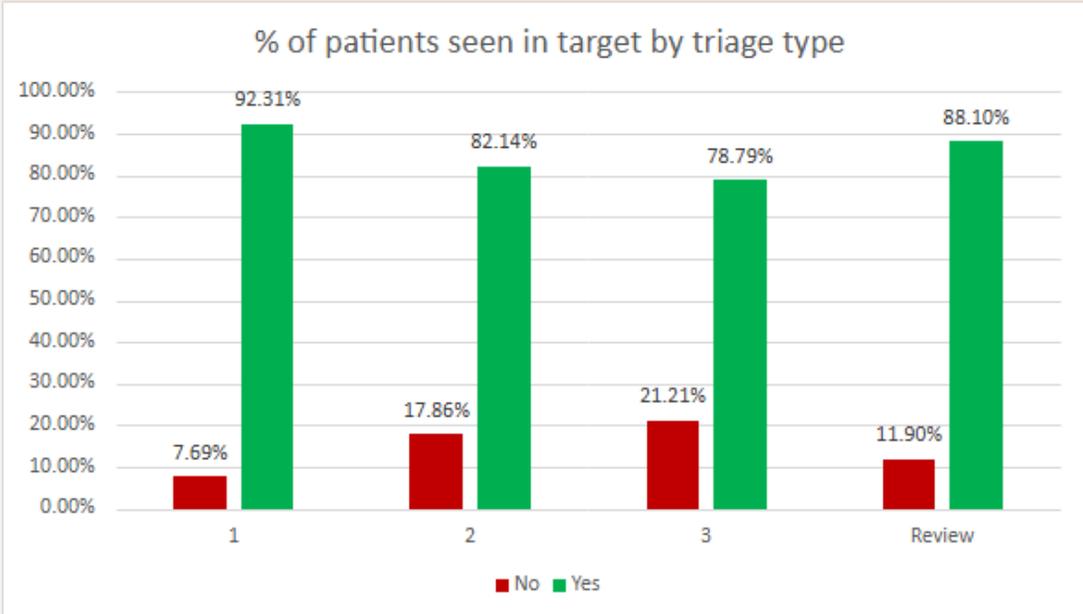
TV referral seen within target

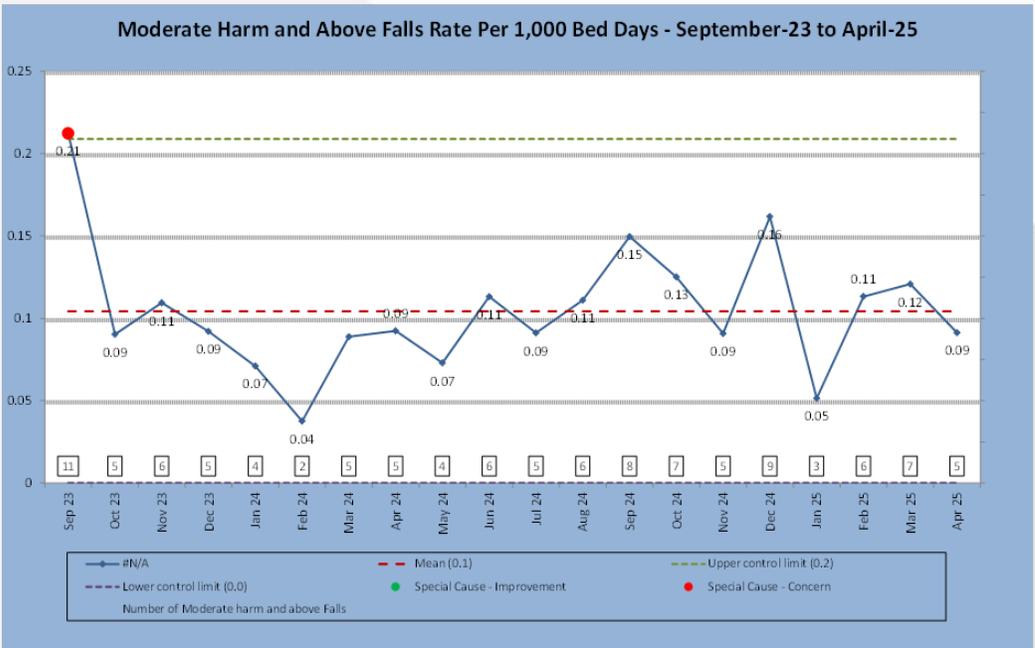
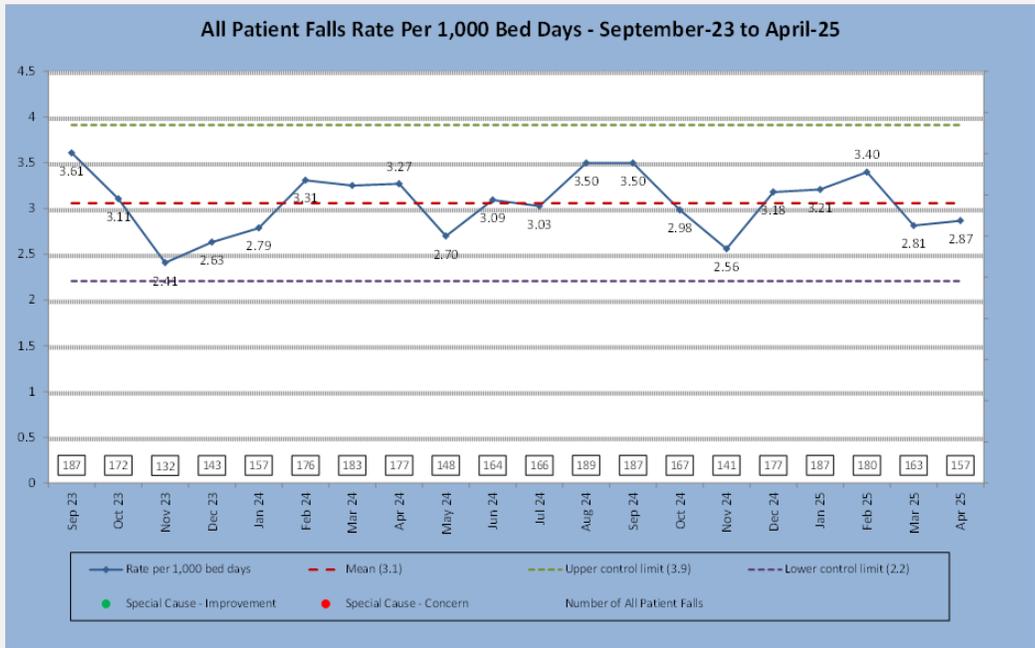
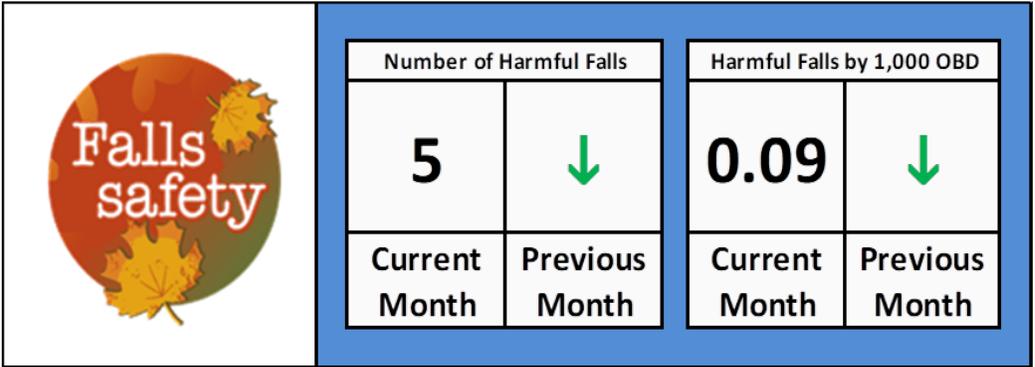
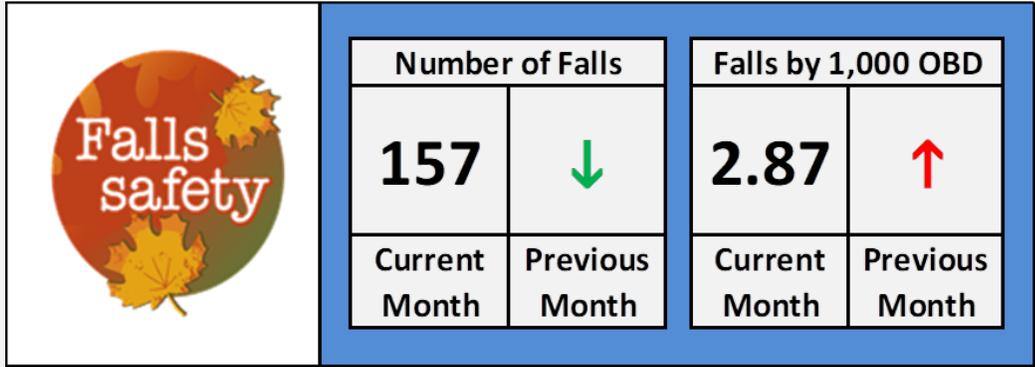


# TVN Data Analysis (March 2025)



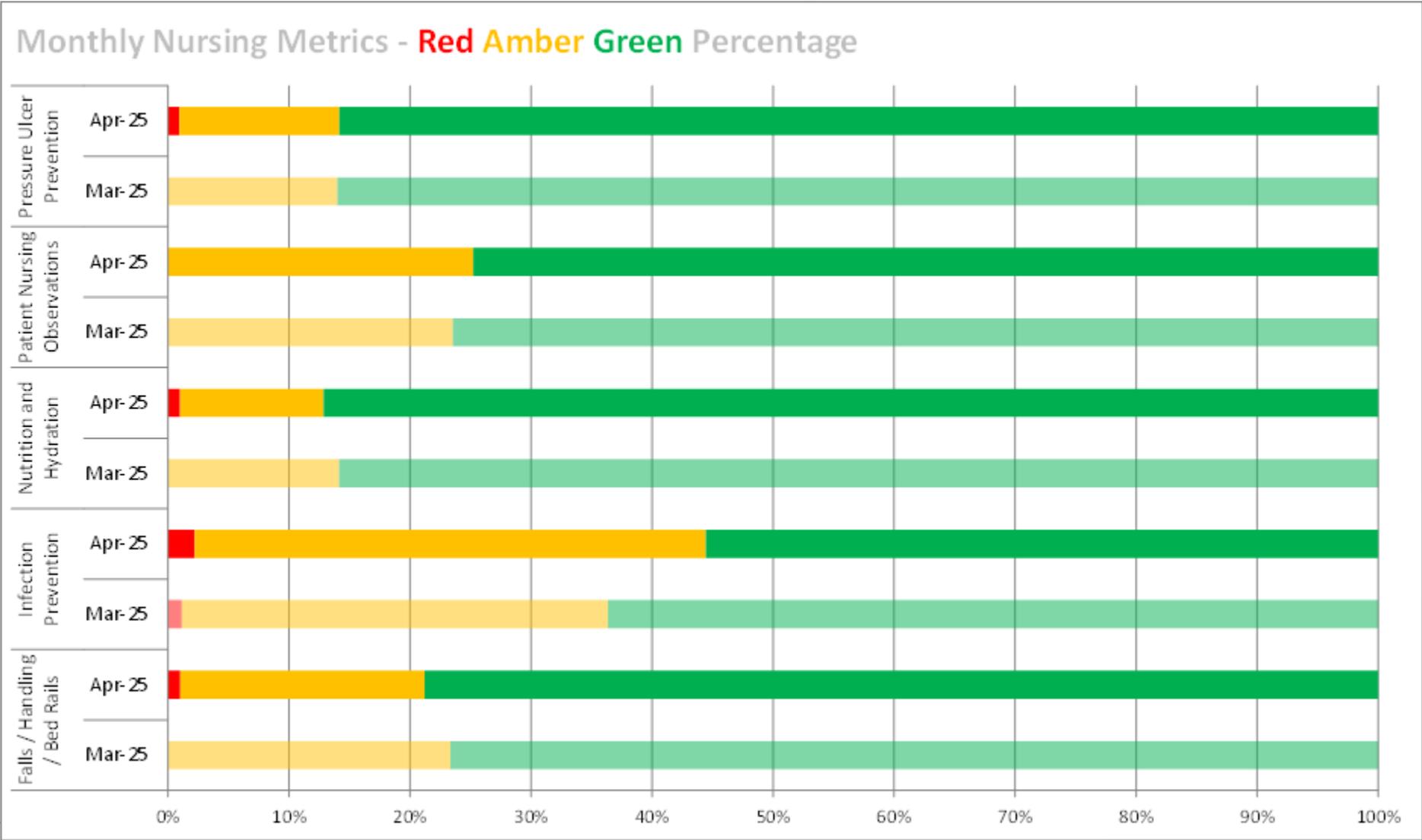
- 85% of patients were seen within the expected target times, this has increase from 73% in February
- In March, the Tissue Viability Team received 154 referrals and completed 415 patient visits.
- The percentage of Priority 1 patients seen within the triage time has been consistently 92-93% for the last 4 months
- The percentage of P2 patients seen within target has increased, reaching 82% compared to 63% in the previous month.





- Key Points :**
- Sensor Devices Staff training planned at the LRI and LGH for CHUGGs, MSS and SM. Ramblerd Sensor devices will be available in clinical areas from early May.
  - A revised Patient leaflet: Reducing your risk of falls during your hospital stay is now available on YourHealth. A QR code will be produced to improve accessibility for patients and relatives.

# Combined Nursing Metrics per Domain (Matron audits via MEG) – April 2025 (Current Month)



# The LEAF Approach: Our Quality Improvement Framework

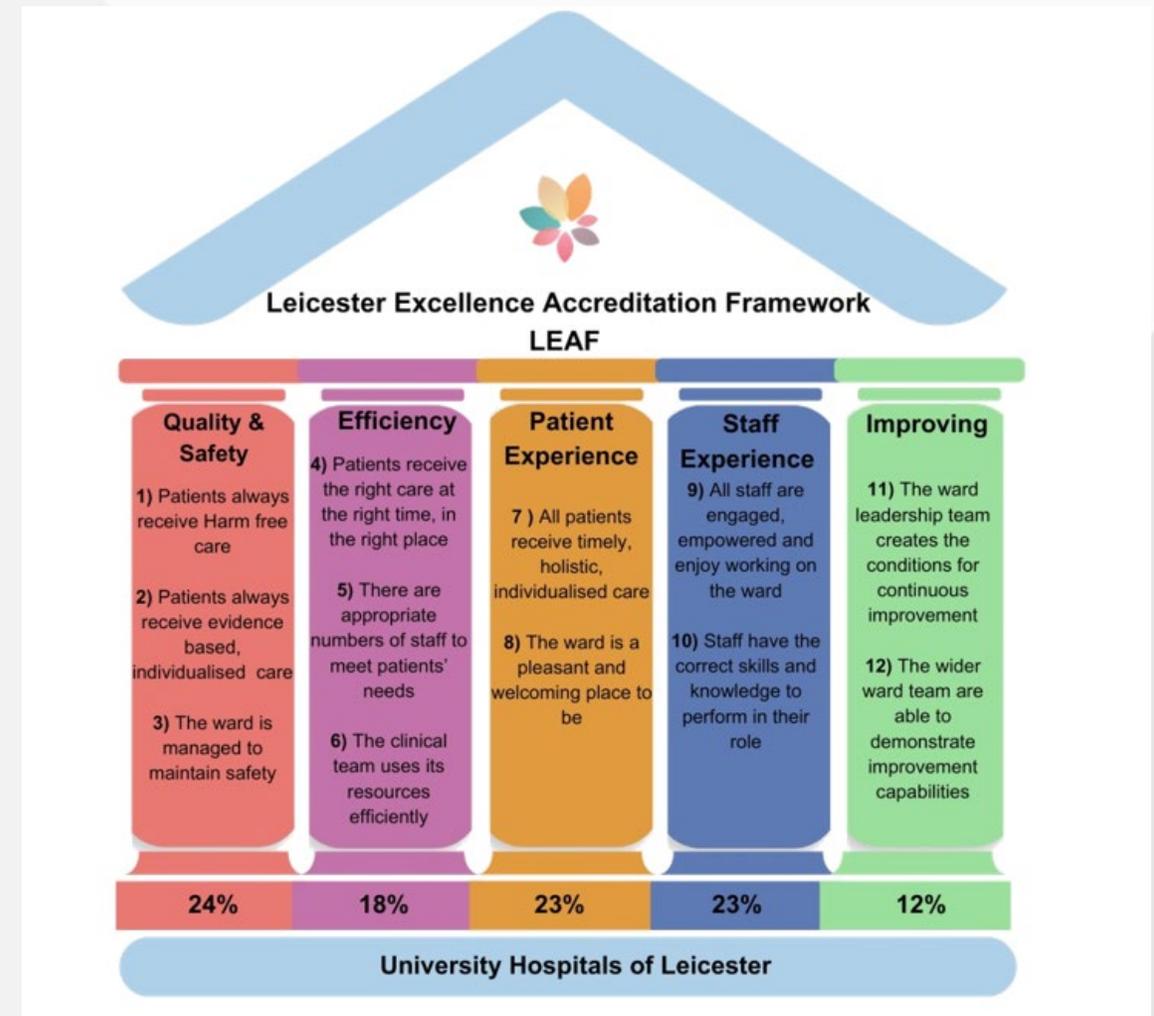
- UHL's new system of accreditation
  - The programme uses data, metrics and audits to measure a ward's performance
  - Clinical teams are supported to complete a Quality Improvement Project each year
  - The LEAF programme for adult inpatient wards is being accelerated to complete by August 2025.
  - 53 adult inpatient wards have currently been onboarded onto LEAF
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# The 5 Pillars of LEAF

LEAF is structured around 5 key pillars:

- Quality & Safety
- Efficiency
- Patient Experience
- Staff Experience
- Improving

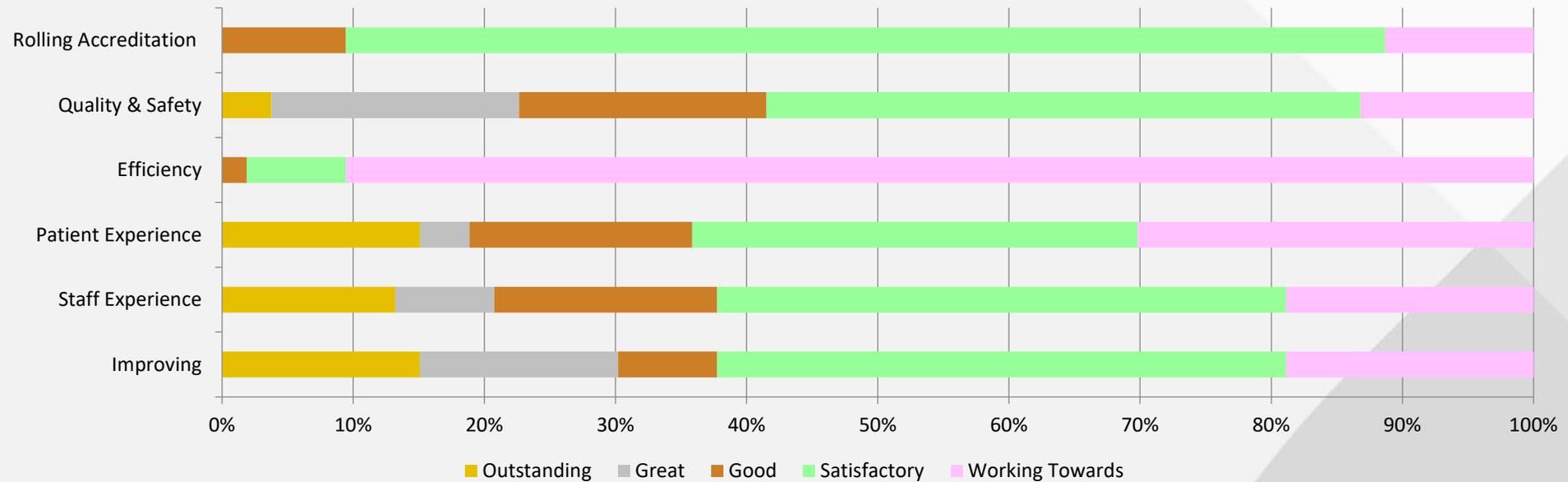
These pillars are further defined by 12 standards and underpinned by 69 measureable metrics



# LEAF Dashboard Overview

- This slide presents an overview of the LEAF dashboard results for the 53 wards onboarded.
- The chart displays the distribution of wards across different accreditation levels and LEAF pillars

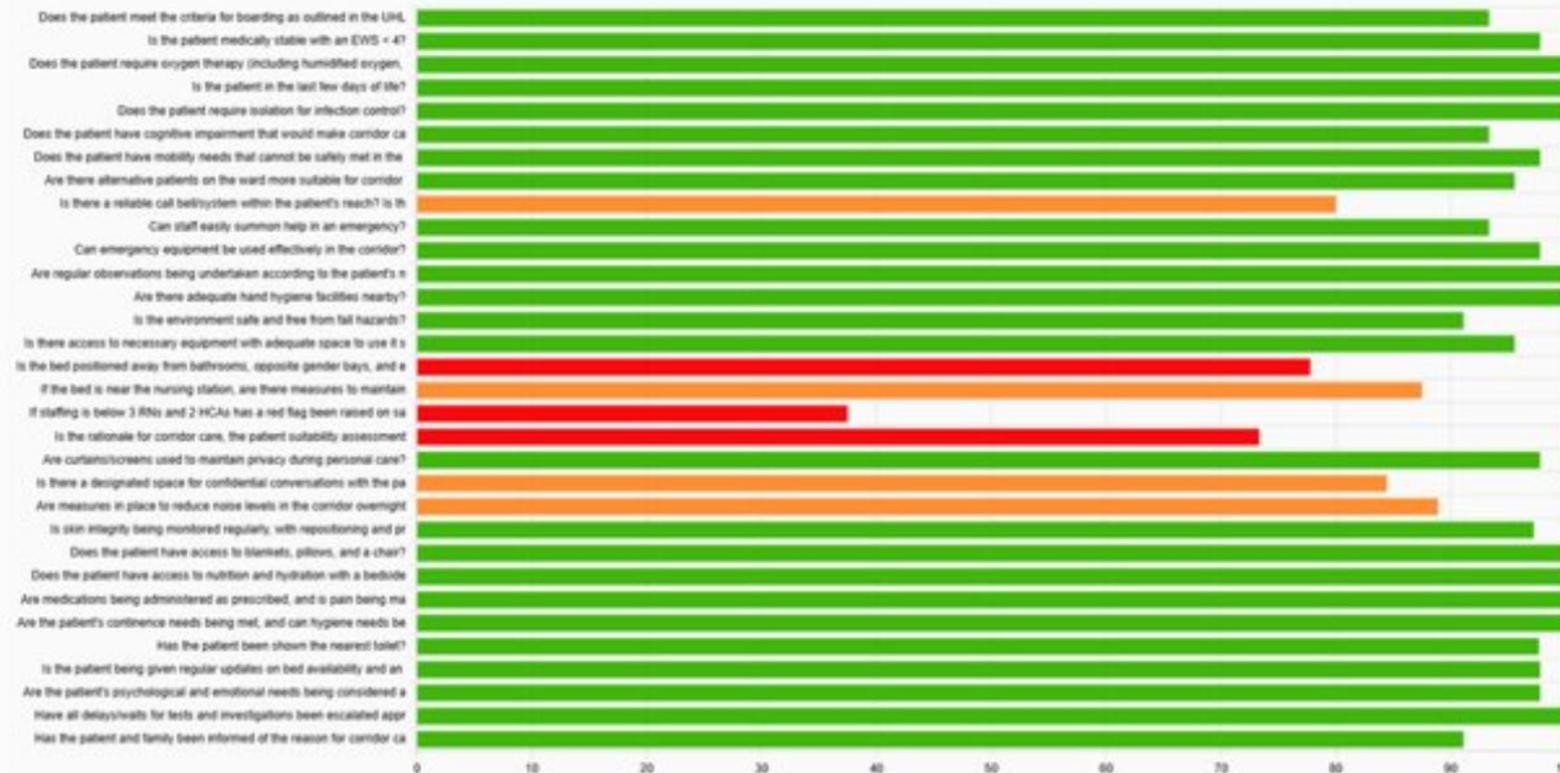
**LEAF Dashboard Overview- 53 Wards Onboarded**



# Temporary Escalations: Audit Findings and Actions

- **Purpose of the Audits:** To assess compliance with standards for patients in temporary escalation spaces and identify areas for improvement.

Compliance by Question



Overall Compliance



94.1%

45 observations

From April 1, 2025 to April 30, 2025

# Our Focus for the Future

## **LEAF - Phase 2:**

- Phase 2 of LEAF implementation will focus on specialist areas
- Scoping sessions will be set up with representatives from the Emergency Department and Critical Care to agree on the specific metrics to be included in their LEAF dashboards

## **Quality Improvement:**

- Continued focus on embedding LEAF principles and driving quality improvement across all areas.

## **Harm Reduction:**

- Ongoing work to address key areas identified in the Temporary Escalations Audits and other harm reduction initiatives.
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