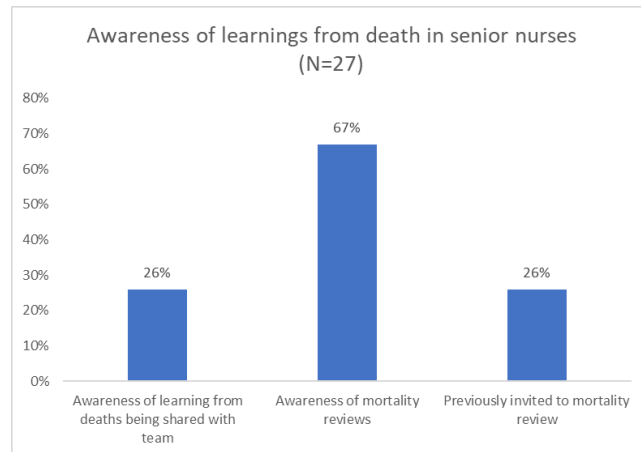


Step 1: Understanding the problem

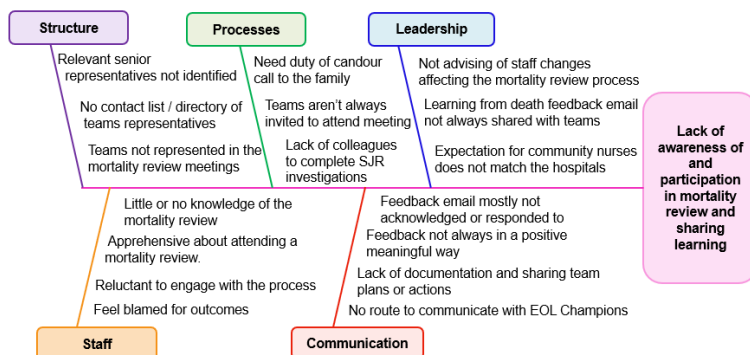
Senior community nursing colleagues do not always receive the learning that comes following mortality reviews. Only 26 per cent of those who responded to a survey reported receiving learning from the reviews and teams were often not represented within review meetings when related to one of their patients.

Relevancy: Better patient experience

Baseline colleague survey data, July 2023:



Causes:



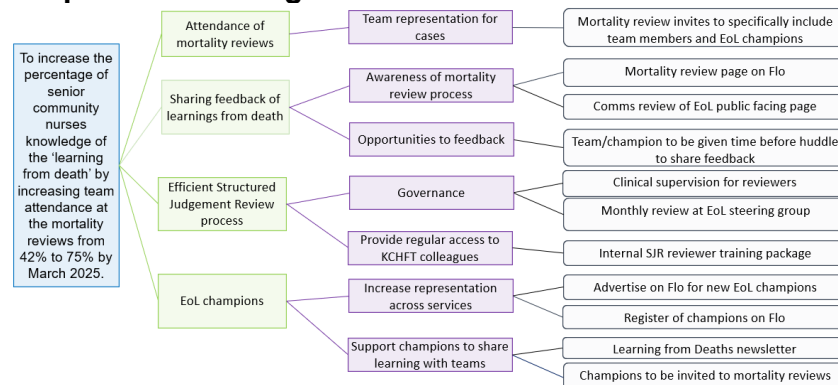
Step 2: What are we aiming to achieve?

To increase the percentage of senior community nurse knowledge of the 'learning from death' mortality review procedure and learnings from death from 26 per cent to 75 per cent by March 2025.

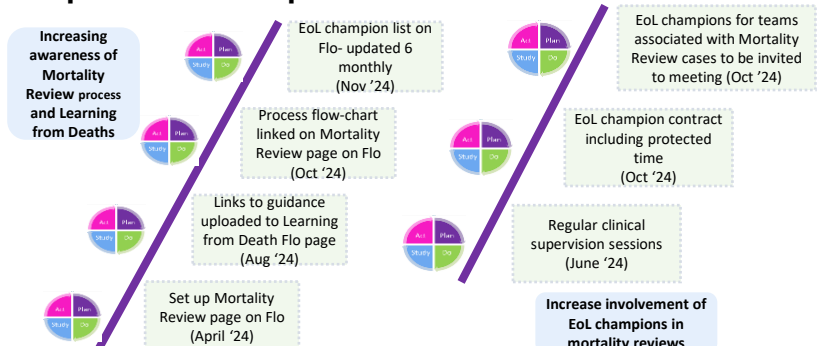
Step 3: What other measures do we need to think about?

- Percentage of cases discussed at mortality review with team representation.
- Number of end of life (EOL) champions attending mortality reviews.
- Colleague feedback.

Step 4: What changes can we make to achieve the aim?

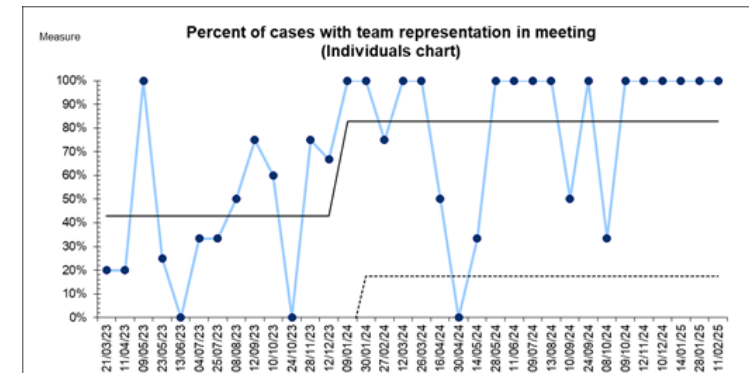


Step 5: PDSA ramp

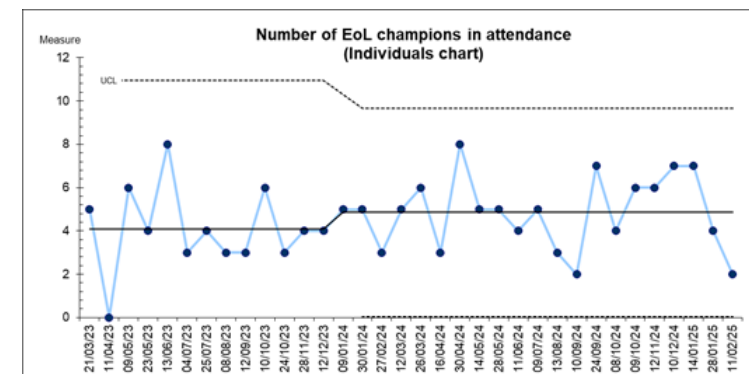


Step 6: Results and learning

The team has been unable to re-survey the same colleagues. However, average team representation for cases at mortality reviews has increased from 42 per cent to 80 per cent.



Average EOL champion representation at mortality reviews has increased from four to five.



This shows improved engagement, and it is recognised that awareness of senior nurses has increased as a result with the project team confirming they hear this in the clinical teams.

What's next?

The project team is continuing to look at ways to increase the sharing of learning from death to the wider trust and to system partners.