University Hospitals Bristol and Weston NHS Foundation Trust

Freedom of Information Request Ref: 24-484

4 July 2024

By Email

Dear Sir/Madam

Thank you for your request for information under the Freedom of Information Act 2000. The Trust's response is as follows:

- We can confirm that we do hold the information you are requesting

Background:
Due to various issues experienced or witnessed within the anaesthetic department when securing an airway I am working to define how patient safety is delineated around securing an airway and how standardisation can be improved to ensure the reduction of current incidents of failure and infection to patients.

When securing an airway an optimal endotracheal tube (ETT) securing device should provide maximum stability to prevent inadvertent movement or extubation, optimal ventilation, whilst maintaining patient comfort.

My aim is to build a picture of current practice aligned to patient harm and the cost to the NHS as a result of any poor practices by individual trusts.

I believe that the information I am requesting should be easily available through your Datix reporting system or similar if you don't use Datix.

Information request:
I would like to understand the number of reported incidences from January 2020 to December 2023, within the Trust of patient harm or even death because of poor airway management.
We have listed the number of ETT accidental extubations over the required time period in the table below. Accidental extubation is a recognised risk of oral ETT tube intubation and most incidents reported of accidental extubation were not related to poor airway management.

ETT Tube Extubation		
Level of harm	**Minor**	**None**
Number of incidents	*	69

Please note: Where the figures are between 1 and 5, this has been denoted by *. Due to the low numbers, we have considered that there is the potential for individuals to be identified from the information provided, when considered with other information that may also be in the public domain. In our view disclosure of these low figures would breach one of the Data Protection Principles set out in Schedule 1 of the Data Protection Act, namely Principle 1. The Trust therefore finds that the Section 40(2) exemption contained within the Freedom of information Act 2000 is engaged. This follows NHS Digital (formerly HSCIC) analysis guidance (2014) which states that small numbers within local authorities, wards, postcode districts, providers and Trusts may allow identification of patients and should not be published.

• Damage to a patient's skin when removing the surgical tape used to hold the airway device in place (if tape is used).

Surgical tape to secure an ETT tube is not Trust policy, cotton ties, anchofast and neobar devices are used for securing ETT tubes in the Trust. Elastoplast strapping is used for nasal intubated babies. There have been * incidents recording skin damage on removal.

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• Skin damage i.e. pressure sores as a result of using cotton ties to secure the airway.

Tissue viability incidents are listed in the table below recorded for all securing devices, 15 incidents directly related to pressure damage to the mouth and neck due to cotton ties.

Tissue Viability incident involving ETT Tubes				
Level of Harm	**Minor**	**Moderate**	**Negligible**	**None**
Number of incidents	26	*	10	10

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• Death of a patient as a result of inadvertent movement or extubation whilst maintaining patient comfort.
Nil deaths recorded due to accidental ETT tube extubation.

• Death or cardiac arrests of patients due to undetected oesophageal intubation.
None recorded as the arrest team/ anesthethetists use end tidal CO2 measurement to confirm correct position of ET tube,

• Hospital acquired infection as a result of using tapes that are non-sterile.
The use of sterile ET tapes is not Trust policy, the mouth contains a large amount of bacteria which would contaminate ties very quickly if they were sterile.

This concludes our response. We trust that you find this helpful, but please do not hesitate to contact us directly if we can be of any further assistance.

If, after that, you are dissatisfied with the handling of your request, you have the right to ask for an internal review. Internal review requests should be submitted within two months of the date of receipt of the response to your original letter and should be addressed to:

Data Protection Officer
University Hospitals Bristol and Weston NHS Foundation Trust
Trust Headquarters
Marlborough Street
Bristol
BS1 3NU

Please remember to quote the reference number above in any future communications.

If you are not content with the outcome of the internal review, you have the right to apply directly to the Information Commissioner for a decision. The Information Commissioner can be contacted at: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF

Publication

Please note that this letter and the information included/attached will be published on our website as part of the Trust's Freedom of Information Publication Log. This is because information disclosed in accordance with the Freedom of Information Act is disclosed to the public, not just to the individual making the request. We will remove any personal information (such as your name, email and so on) from any information we make public to protect your personal information.

To view the Freedom of Information Act in full please click here.

Yours sincerely

Freedom of Information Team
University Hospitals Bristol and Weston NHS Foundation Trust