

Report to:	Board of Directors	Agenda item:	8
Date of Meeting:	27 September 2017		

Title of Report:	Patient and Carer Experience Report – Quarter 1
Status:	For information
Board Sponsor:	Helen Blanchard, Director of Nursing and Midwifery
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Appendices	Appendix A: Patient and Carer Experience Report – Quarter 1

1. Executive Summary of the Report

The Patient and Carer Experience report for **Quarter 1 (April to June 2017)** provides an update on patient and carer experience. The key themes are:

1. **Complaints received – 58 formal complaints were received** this quarter. This compares to **62 in the previous quarter**. The majority of complaints refer to ‘clinical care and concerns (46), communication and information (4) and staff attitude/behaviour (5). **Performance against the 35 day working target response rate is included in the report on page 4**. This is continuing to show improvement. 11 complaints were re-opened this quarter. Learning and service improvement as a result of patient feedback is also included in the report. **Three cases were referred to the Parliamentary Health Service Ombudsman** in this quarter.
2. **Friends and Family Test (FFT) – During quarter 1, the Trust received 9730 Friends and Family Test responses**. This represents an increase of 20% (1644 responses) from quarter 4 where the total was 8086. 97% (9472) of patients that completed an FFT card said that they would be **Extremely Likely/Likely** to recommend the Trust to Friends and Family if they needed similar care or treatment. The **Extremely Likely/Likely** percentage recommendation has remained stable, between **95% - 97%** since quarter 2 2015. The majority of inpatient and Day case comments are **Compliments** referring to the **attitudes and behaviour of ward and support staff**. The areas to improve are **‘timeliness’** and the wait to be seen in the Emergency Department and Outpatients. Following on from the previous quarter, the **Areas to Improve are Facilities**, the comments mainly relate to bathroom and toilet facilities and the lack of Wi-Fi/televisions. **In Maternity the majority of negative comments relate to the temperature (too hot) on Mary ward**.
3. **NHS Choices – during quarter 1, 30 patients provided feedback about RUH services**. 27 comments included a star rating and of these 22 rated the RUH with five stars.

- 4. An update on Patient Experience activities** including feedback from ‘See it My Way – losing a loved one’; Patient and Carer Experience group visits and the Patient and Carer Strategy launch.
- 5. Patient Advice and Liaison Service (PALS)** – There were **740 enquiries during this quarter. This is a 17% reduction compared to quarter 4.** During this quarter, there were **93 contacts about outpatient appointments.** Further detail is included in the report on pages 6-8.

2. Recommendations (Note, Approve, Discuss)

To note progress to improve patient and carer experience at the RUH.

3. Legal / Regulatory Implications

Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

4. Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc.)

A failure to demonstrate sustained quality improvement could risk the Trust’s registration with the Care Quality Commission (CQC) and the reputation of the Trust.

5. Resources Implications (Financial / staffing)

Improving patient and carer experience is dependent on meeting the agreed nurse staffing levels across the Trust and sufficient IT resource to continue to develop and refine e-Quest – the Trust’s patient feedback system.

6. Equality and Diversity

Ensures compliance with the Equality Delivery System (EDS).

7. References to previous reports

Monthly Quality Reports to Management Board and the Board of Directors and the Patient Experience Quarterly reports to Quality Board and the Board of Directors.

8. Freedom of Information

Public.

Patient and Carer Experience report

Quarter 1 April – June 2017

Patient Experience Matters...



Quarter 1: Complaints received/reopened complaints/Parliamentary and Health Service Ombudsman (PHSO) cases

Formal complaints received in Q1 2017/18

In Q1 the Trust received **58 formal complaints**:

- Medical Division 25
- Surgical Division 24
- Women and Children's Division 9

Number of complaints by Quarter/Year

Year	Q1	Q2	Q3	Q4	Total
2014/15	86	81	75	68	310
2015/16	100	82	55	66	303
2016/17	56	46	50	62	214
2017/18	58				

The table above shows that the complaint rate for Q1 complaints received in Q1 is similar to that in the same quarter in 2016/17.

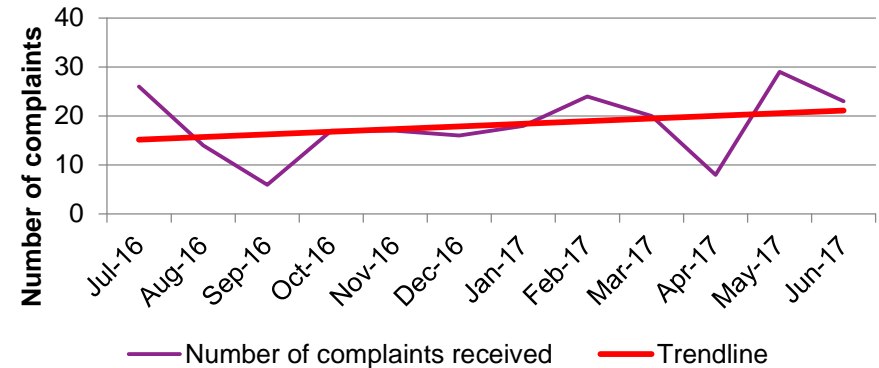
Reopened Complaints in Q1 2017/18

11 complaints were re-opened in Q1 2017/2018, 7 for the Medical Division and 4 for the Surgical Division. This compares to 8 in Q4 and 10 in Q3.

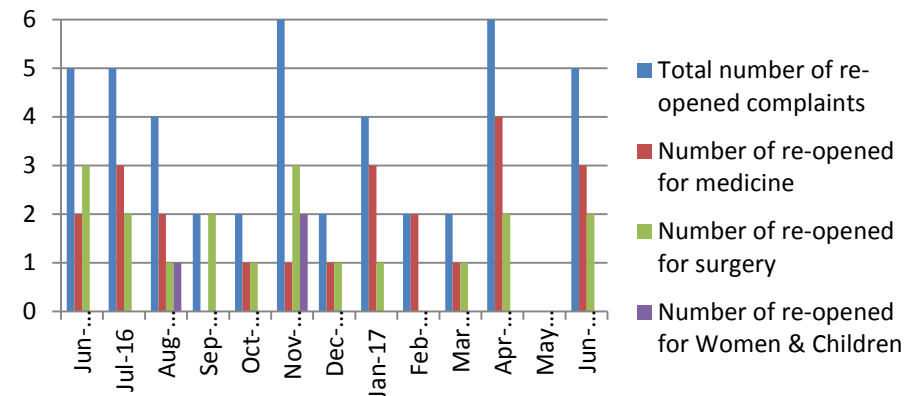
Investigations by the Parliamentary and Health Service Ombudsman (PHSO)

Three cases were referred to the PHSO in Q1, and are currently being investigated. At the time of writing this report, the PHSO are still to complete 2 investigations from Q4 2016/17.

Total number of complaints received



Re-opened complaints for the past 12 months



Complaints are reopened for the following reasons. This information is recorded on DATIX:

- Client has further questions
- Client unhappy with Trust response
- Client has requested a meeting and raised further questions

Quarter 1: Complaints by subject

Complaints by subject

The table below details the subject's of formal complaints in Q4.

Complaints- Subjects	Number
Clinical care and concerns	46
Staff Attitude & Behaviour	5
Communication & Information	4
Hotel Services	1
Admission/Discharge Procedure/Transfer(inpatient/ED)	1
Admission (Pre-Admission)	1
Total	58

Clinical Care and Concerns	Number
Inappropriate care and treatment	15
General Enquiry	13
End of Life care concerns	4
Invasive procedure carried out	5
Lack of continuity	2
Lack of Pain Management	2
Medication Error/ Timing/Availability	2
Patient slip/ Trip/Fall	1
Quality of Nursing Care	1
Wrong Diagnosis	1
Total	46

Quarter 1 Complaints by ward/area.

Ward Area	Subject	Number
Ace Ward	Clinical Care (1) and Concerns (2)	2
Cardiac Ward	Clinical Care	1
Charlotte Ward	Admission (Pre-Admission)	1
Children's Ward	Clinical Care	1
Haygarth Ward	Clinical Care	1
Medical Short Stay	Clinical Care	1
Parry Ward	Clinical Care	2
Phillip Yeoman	Clinical Care and Staff Attitude	2
Forrester Brown Ward B	Clinical Care	1
Respiratory Ward	Staff Attitude	1
Robin Smith Ward	Clinical Care	3
Surgical Admissions Unit	Clinical Care and Concerns	2
Surgical Short Stay	Clinical Care	1
Waterhouse Ward	Staff Attitude (1) and Clinical Care (2)	3
William Budd Ward	Clinical Care and Concerns	1
Total		23

Quarter 1: Inappropriate Care and Treatment & Response times for complaints

Inappropriate Care & Treatment/General enquiries – further analysis

15 of the complaints received in Q1 relate to inappropriate care and treatment. Further analysis of this has identified the following examples:

- Delays in treatment/concerns around care/earlier or missed diagnosis
- Conflicting information given in particular around care and treatment, use of medication, signs/symptoms following treatment
- Care of the dying patient/questions from bereaved families after death of a family member
- Expectations not met/not explained fully
- Staff not listening to patient/family/carer concerns
- Explanations to patients in relation to clinical decision-making/what to expect following procedures
- Communication/attitude of staff

Complaints are discussed at specialty governance meetings and actions and learning from complaints is included on the following pages.

Response times for complaints

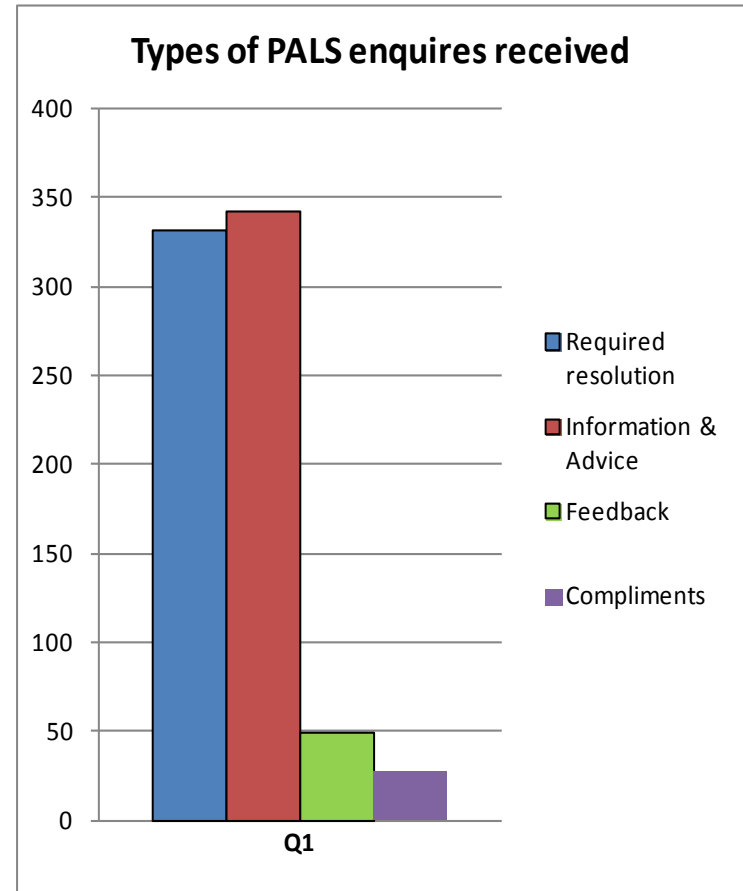
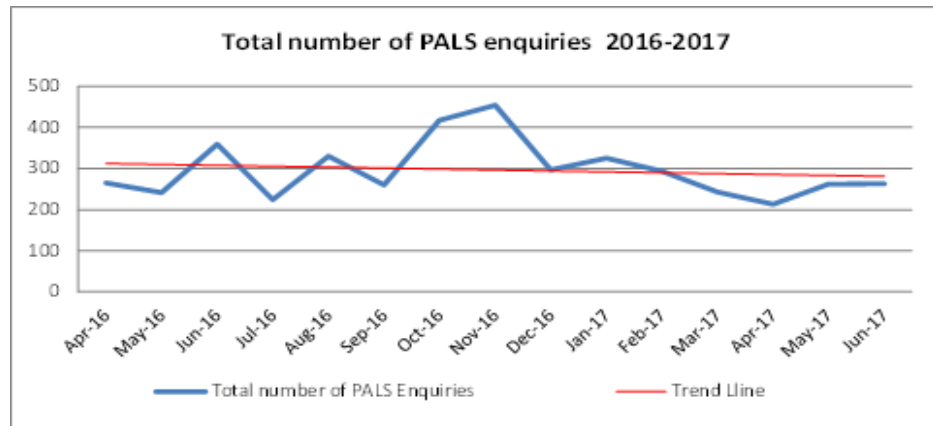
	Medicine	Surgery	Women & Children	Total
Closed within 35 days	22 (81%)	15 (75%)	5 (63%)	43
Breached 35 days	5 (19%)	5 (25%)	3 (37%)	12
Total	27	20	8	55

- The shortest response time for a complaint response in this period was 9 days, this was in the Women and Children's Division. The longest response times for a complaint was 51 days (Surgery), 45 days (Medicine) and 43 days (Women and Children's).
- 6 complaint responses took longer than 40 days, 4 of these were in Medicine and 2 in Surgery.
- 11 complaint responses were responded to within 25 days, 7 for Medicine, 2 for Women's & Children's and 2 for Surgery.

Quarter 1: Learning and service improvement from complaints

Issue	Division	Lessons learned
Patient complained that the Trust failed to diagnose his condition when he was admitted to the Emergency Department. He also had concerns with his epilepsy medication.	Medicine	A specialist epilepsy nurse is now in post who is able to respond to patient's concerns, for example a medication increase/co-ordination of appointments. The case was discussed at the Neurology Department Governance Meeting.
Patient's husband complained that no x-rays were taken of her husband's back on his admission to the Emergency Department following a fall at home. The GP later requested an x-ray which confirmed a fracture.	Medicine	The complaint was discussed at the Emergency Department Governance Meeting and shared with staff, in particular to discuss ' <i>signs to look out for</i> ' with patients if their symptoms change and document this accordingly.
Patient complained that they received an incorrect report following a CT scan.	Medicine	The complaint was shared with staff who have been reminded to check correspondence to patients and possible errors on transcription before sending the information to patients.
Client wrote a letter following her son's admission to the Emergency Department. Client was unhappy with the letter stating there were inaccuracies in the detail.	Surgery	The Consultant contacted the paediatric safeguarding nurse who will liaise with other specialties to improve the awareness of documentation used in ED as a safeguarding checklist.
Patient had 4 ultrasound scans however was not informed that her bowel could not be seen until the 4 th scan. The patient would like to know why they were not informed this beforehand.	Women & Children's	Complex cases need to be discussed with the radiology team.
Patient complained of the attitude of a midwife at one of the Birthing Centres.	Women & Children's	Additional training and support given to staff member to address communication and behaviours when dealing with patients and their families.

Quarter 1: Patient Advice and Liaison Service (PALS) Report



The number and type of PALS enquiries received in Quarter 1:

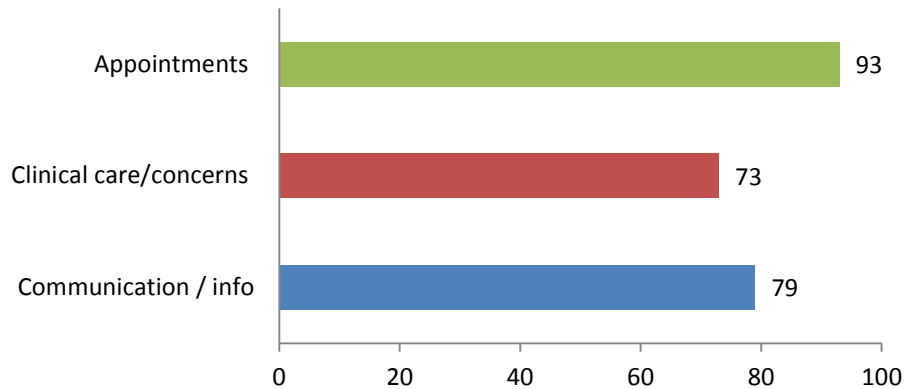
The PALS service received 740 enquiries during Quarter 1. This is a 17% reduction in the number of cases compared to Quarter 4 (852). This is also a decrease of 125 contacts compared to Q1 in 2015/16.

The number of issues requiring resolution remains stable. The main areas requiring resolution were clinical care and treatment, communication and information and appointments.

During this quarter there have been 93 contacts about appointments. The PALS Manager will be working with members of the outpatient steering group to review the main issues are and work with specialties to put into place improvements, e.g. exploring other means of communication, such as e-mail when patients are trying to contact outpatient departments.

Quarter 1: Patient Advice and Liaison Service (PALS) Report

Top three subjects requiring resolution



Appointments

33 of the 93 contacts related to waiting times for new appointments, 8 about the cancellation of planned surgery, 12 regarding delays in follow-ups, 27 general enquires and 13 were people asking for information & advice about existing appointments.

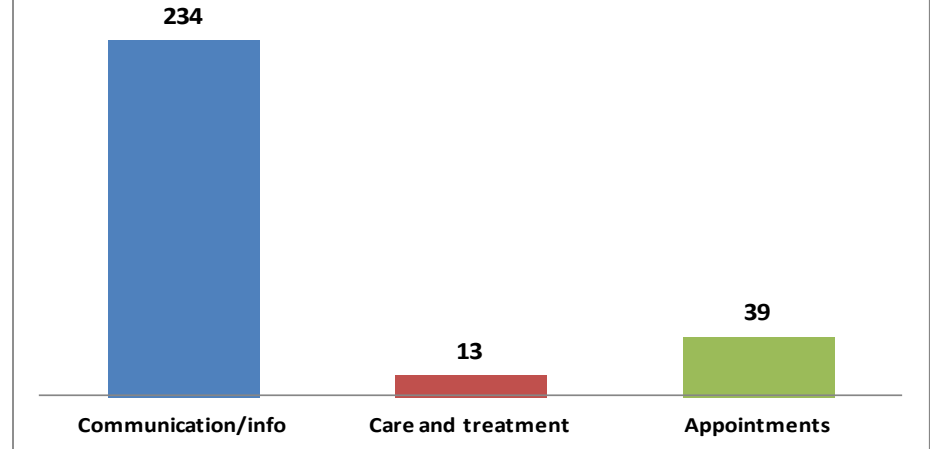
Communication and information

59 of these contacts were general enquiries, 8 related to a lack of clear explanation and 5 about inappropriate/inaccurate info. The remaining 7 were split between other subject areas with no clear trend.

Care and treatment

52 of the contacts were general enquiries about clinical care, 4 regarding end of life concerns, 4 about waiting times for treatment and 3 related to competence of staff. The remaining 10 were split evenly across other subject areas with no identifiable trends.

Top three themes requiring information & advice



Communication and information

219 were general enquiries, 5 about a lack of clear explanation provided, 3 queries about overseas/private patients and the remaining 7 were split between different subject areas.

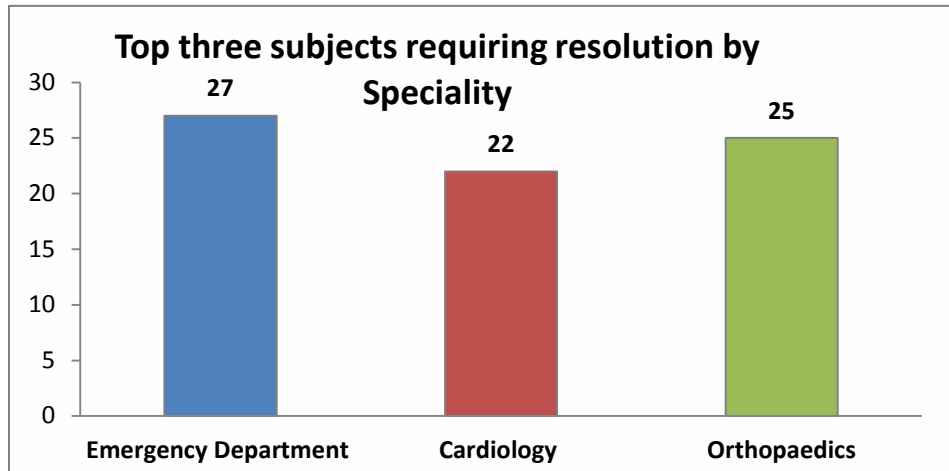
Appointments

Of the 39 contacts about appointments, 13 related to questions about the waiting times for new appointments, 12 requiring information, such as time/location of planned appointments, 9 about follow-ups, 3 about cancellations and 2 from people wanted to change their appointments.

Care and treatment

11 contacts were general enquiries about clinical care, 1 related to inappropriate care and 1 about the length of time waiting to be seen in different departments.

Quarter 1: Patient Advice and Liaison Service (PALS) Report



Emergency Department

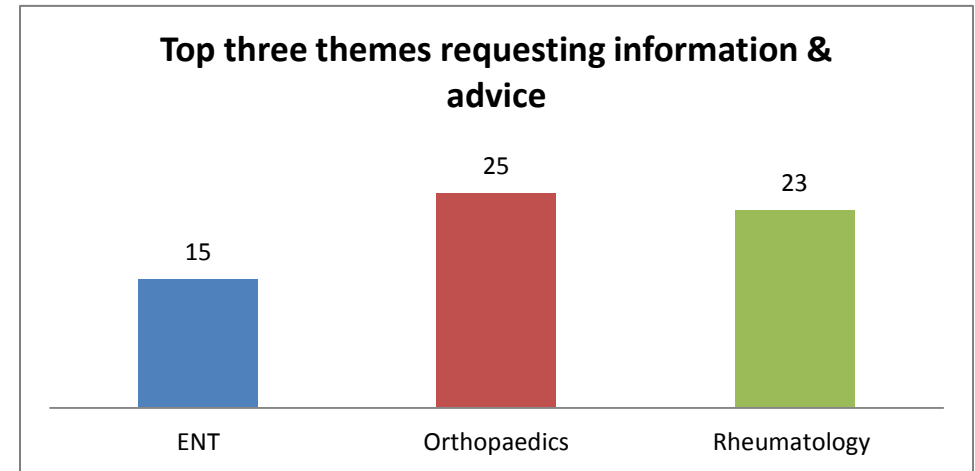
PALS received 27 contacts about ED. 10 related to clinical care/concerns, 4 related to staff attitude, 4 related to concerns about admissions/discharge/transfers, 5 regarding patient property, 3 about communication and 1 about appointments.

Cardiology

7 of 22 contacts related to outpatient appointment delays, 6 related to clinical care/concerns, 7 regarding communication/information, 1 about a referral to another organisations and 1 about patient property.

Orthopaedics

6 of the 22 contacts related to appointments, 5 were about clinical care/concerns, 5 about communication/information, 4 related to pre-admission, 2 about admission/transfers/discharge and 3 regarding patient property.



Ear, Nose and throat (ENT)

Of the 15 contacts requesting information and advice about ENT, 9 related to communication and information, 3 regarding appointments, 2 admission (pre-admission and 1 about clinical care.

Orthopaedics

9 of 25 contacts related to communication and information, 6 regarding appointments, 5 admission (pre-admission), 1 about admissions/transfers/discharge, 2 related to clinical care/concerns, and 2 related to patient property.

Rheumatology

17 of the 23 contacts about Rheumatology related to communication and information, 5 regarding appointments and one about clinical care.

Quarter 1: Friends and Family Test (FFT) Responses

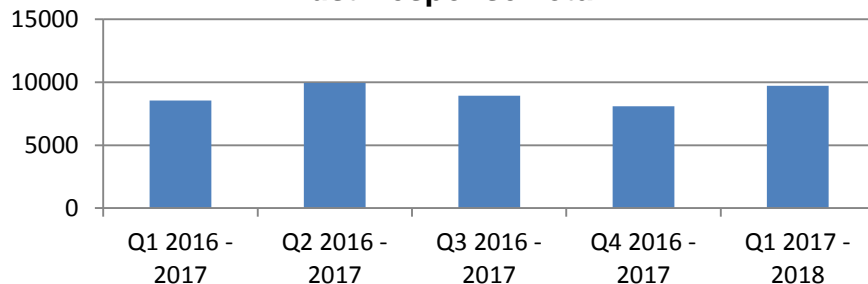
Response total for all services

During Quarter 1, the Trust received **9730** Friends and Family Test responses. This represents an **increase of 20%** (1644 responses) on Quarter 4 where the total was 8086, and a 14% increase on the same Quarter 2016/17.

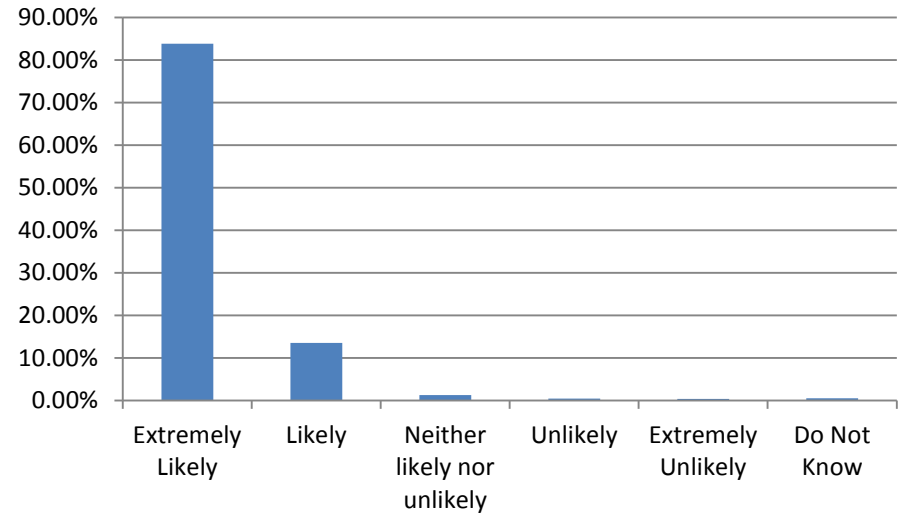
Distribution for Quarter 1 across Trust services

Service	Quarter 1 Response Totals	Increase/Decrease in Responses from Quarter 4	Distribution of Quarter 1 Trust Response Total
Emergency Department	2540	↑ 861	26%
Inpatient / day case	3991	↑ 715	41%
Maternity services	827	↑ 59	8%
Outpatients	2372	↑ 9	24%

Trust Response Total



Distribution of Recommendation Responses



In Quarter 1 2017/18, **97% (9472)** of patients that completed an FFT card said that they would be **Extremely Likely/Likely** to recommend the Trust to Friends and Family if they needed similar care or treatment.

The **Extremely Likely/Likely** percentage recommendation has remained stable, between **95% - 97%** since Quarter 2, 2015.

Quarter 1: Friends and Family Test (FFT) Responses – Inpatient & Day case

Inpatient and Day Case Experience

The majority of inpatient and day case comments are **Compliments** (3806) 36% of these refer to the **Attitudes and Behaviour of ward and support staff** e.g.

‘Staff are always very welcoming and make me feel at ease’

‘Staff were all compassionate and caring’

Analysis of inpatient comments shows the overall themes for **Areas to Improve** as (including neutral suggestions) **Facilities**. The comments mainly relate to bathroom /toilet facilities on the ward and T.V/ Wi-Fi provision e.g.

‘Lack of toilets and showers’

‘The shower is a disgrace and dangerous with continual wet floor’

‘Would be nice to have a TV’

‘Ward lacks day room, TV and library’

Cheselden Ward has the largest number of comments regarding TV’s.

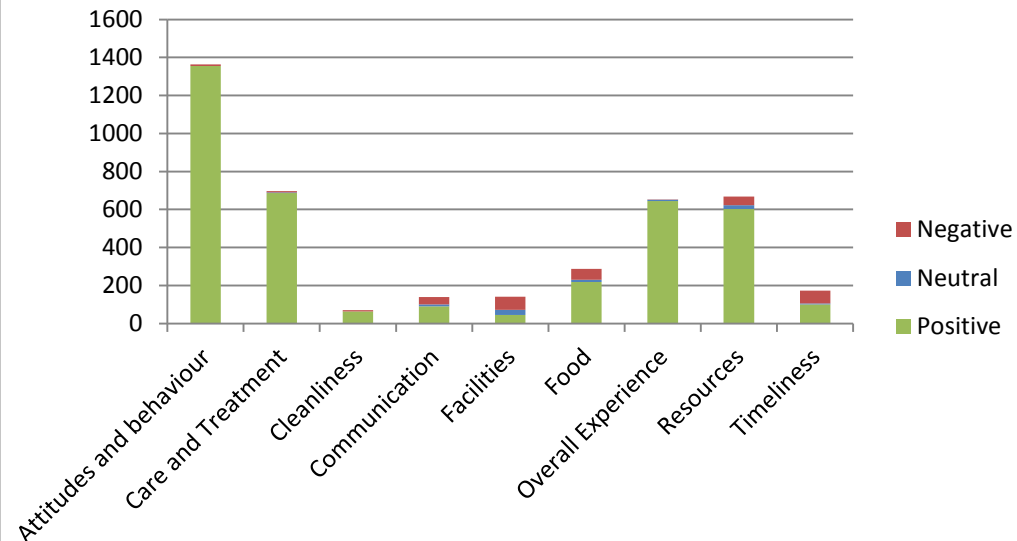
Timeliness is the second most negative area, comments refer mainly to waiting for discharge/ Pharmacy and waiting for calls bells/ assistance e.g.

‘Super staff, shame about wait for discharge papers’

‘General care was good, only criticism is the long wait for drugs to take home once discharged’

‘Delays in answering the bell for the toilet’

Quarter 1, Inpatient & Day case Theme Totals



A review of toilet and bathroom facilities on wards was undertaken in August by the Lead for Patient and Carer Experience and the Hotel Services Manager. A contractor has been assigned to complete improvement work on the following wards - Cardiac, Charlotte, Cheselden, Helena, Medical Assessment Unit and the Children’s ward. The upgrades include installing blue toilet seats and hand rails.

The existing contract with Hospedia (for TV’s) will come to an end next year and the Patient Experience team will be involved in the tendering process.

Quarter 1: Friends and Family Test (FFT) Responses – Emergency Department

Emergency Department (inc MAU & SAU) Experience

The majority of ED patient comments are **Compliments** (2420) 37% of these refer to the **Attitudes and Behaviour of staff** e.g.

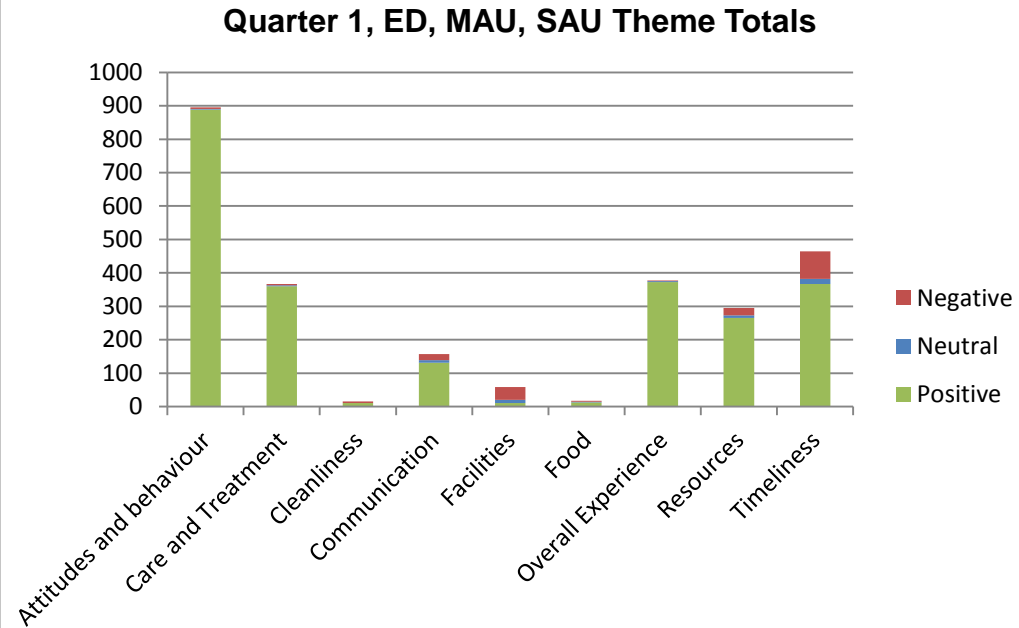
‘Really efficient and courteous receptionist’

‘Staff were very kind, considerate and sensitive to my needs. Things explained well’

Analysis of ED (not including MAU & SAU, due to minimal amount of comments referring to timeliness) comments shows the overall theme for **Areas to Improve** as **Timeliness** - these mainly refer to **waiting to be seen**, this continues from quarter 3 and 4; however as in quarter 4 2016 - 2017, positive comments outweigh negative comments, e.g.

‘Nurses very attentive and efficient, waiting time to see doctor and decision making is too long’

‘Staff were friendly but too long a wait to get seen’



Quarter 1: Friends and Family Test (FFT) Responses – Maternity

Maternity Services Experience

The majority of Maternity comments are **Compliments** (827) 44% of these refer to the **Attitudes and Behaviour of staff** e.g.

‘They were very encouraging, supportive and made me feel at ease’

‘Very polite and attentive staff’

‘Friendly, supportive, considerate and caring staff’

Analysis of comments show the overall theme for **Areas to Improve** as **Facilities**, the majority of the comments refer to Ward temperature/ suggestions for Air conditioning (Mary Ward) e.g.

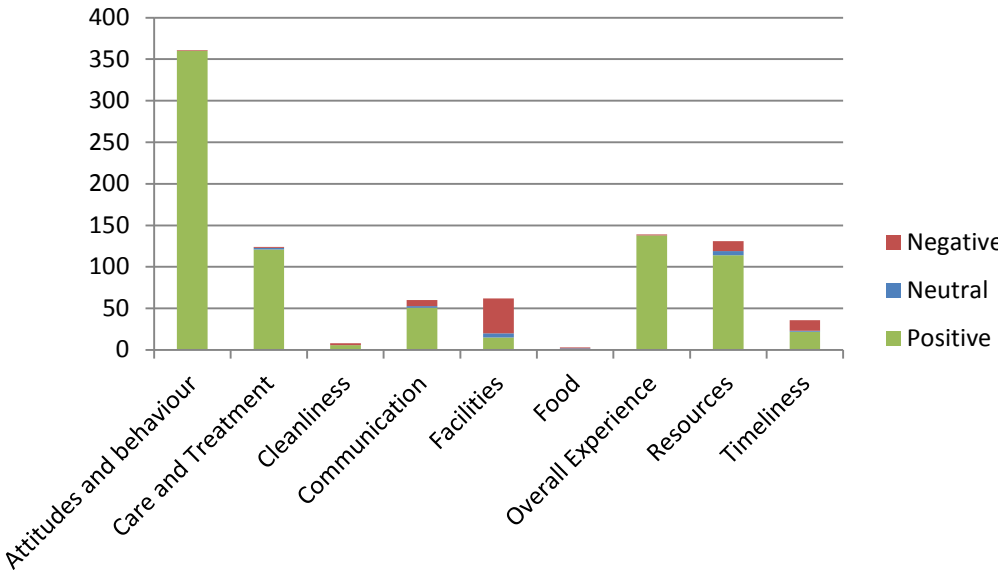
‘The heat in Mary Ward is quite extreme’

‘Heat is a real issue, we have used this ward winter and summer and it’s always too hot’

‘Extremely warm in room, made me feel faint, air conditioning would be beneficial’

The hot weather in June did have an impact on the experience of new mothers on Mary ward. Fans were made available but this did not adequately cool the temperature on the ward.

Quarter 1, Maternity Theme Totals



Quarter 1: Friends and Family Test (FFT) Responses - Outpatients

Outpatient Experience

The majority of outpatient comments are **compliments**, 36% referring to **Attitudes and Behaviour of staff** e.g.

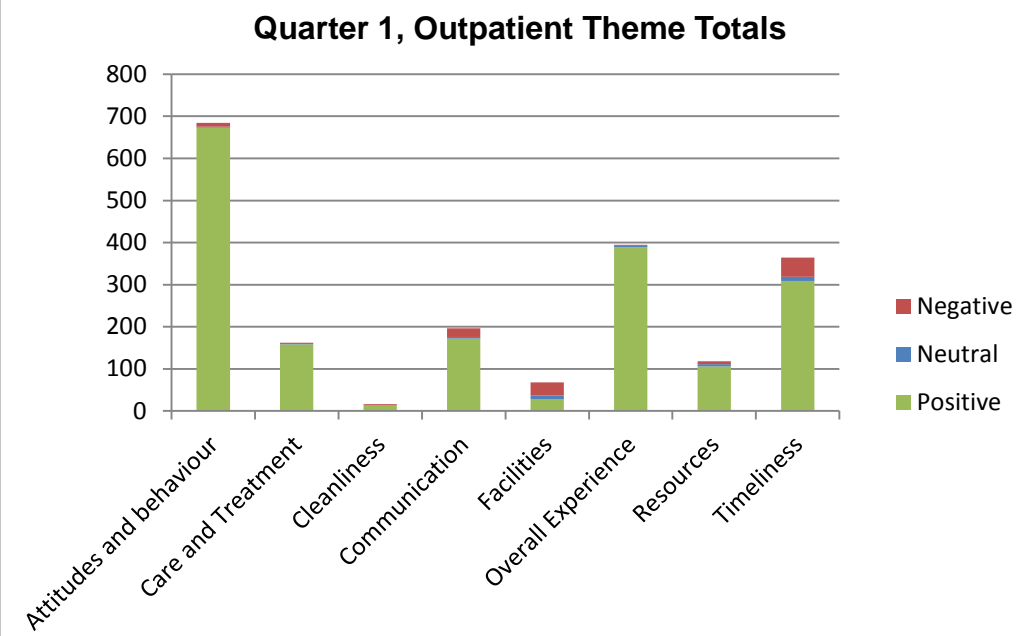
- 'Friendly, professional and very reassuring staff'*
- 'Treated with respect and dealt with quickly'*
- 'Dr very engaging, polite, caring and informative'*

Analysis of comments shows the overall theme for **Areas to Improve** as **Timeliness**, comments refer to waiting for an appointment/follow up appointments given late/ waiting in clinic areas e.g.

- 'Appointment system could be better, long waiting list'*
- '9 months late for appointment'*
- 'Over a hour wait because running behind'*

'Time keeping 3 o'clock appointment, still not in at 4:50 pm everyone else gone including reception'

This continues from Apr 2016 – Mar 2017, however positive comments related to 'Timeliness' outweigh negative comments. The themes from outpatients will be discussed at the Outpatient Steering group together with a timeframe for the installation of the screens in waiting areas.



Quarter 1: Patient and Carer Experience Report – NHS Choices and Patient Opinion Websites

NHS Choices website reviews from patients and their carers (Patient Opinion covers the same reviews as posted on NHS Choices)

 Based on 181 ratings for this hospital (snapshot as of 24/07/2017)

Cleanliness


(185 ratings)

Staff co-operation

(185 ratings)

Dignity and respect

(186 ratings)

Involvement in decisions

(186 ratings)

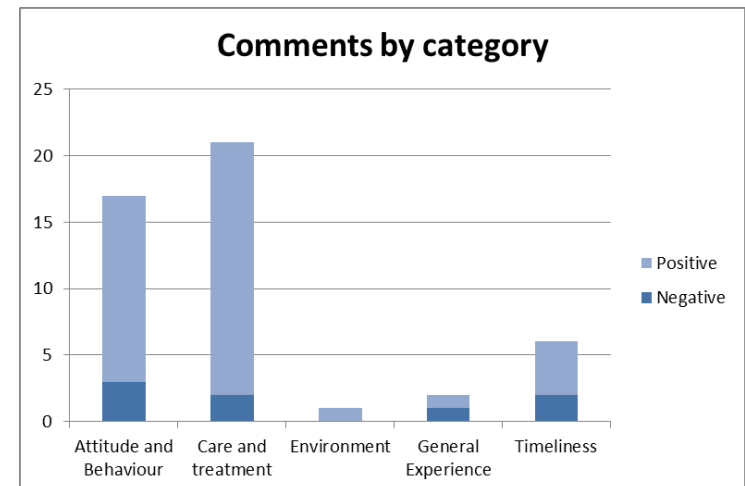
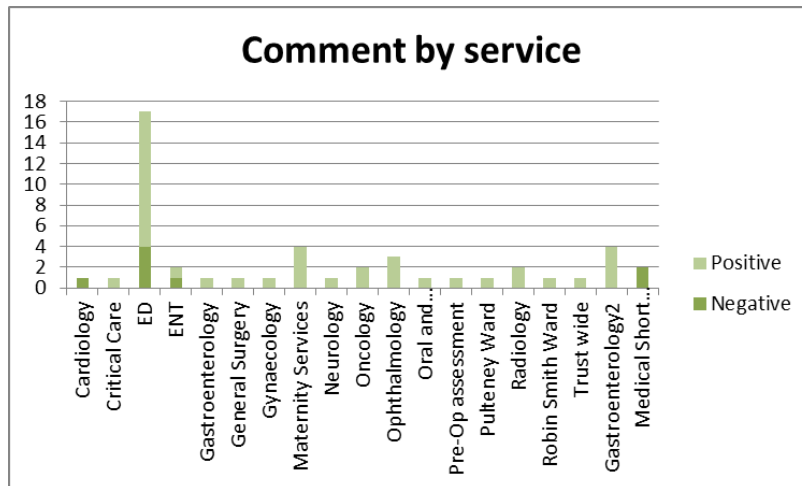
Same-sex accommodation

(144 ratings)

30 patients or their carers posted feedback about 18 RUH services:

- 27 posts included a star rating: of these 22 rated the RUH with five-stars, two with four-stars and one with a two-star rating.
- The 30 posts have been categorised into 47 separate comments: 39 positive and 8 negative.

Comments



Examples of the comments received:

"For the first time since the beginning of this illness my husband felt he was being listened to and acknowledged. Blood tests were sorted quickly and the diagnosis was good. Throughout we were treated with respect, care and compassion and cannot thank them enough for the professional and caring way we were treated." (Emergency Department)

"The team at the RUH for labour were amazing - they were professional, calm and knowledgeable ensuring they were presenting options and decisions in a way that were easy to understand." (Maternity)

Quarter 1: See it My Way – 12th May 2017

‘See it my way - loss of a loved one’ 12th May 2017

Over 50 staff attended the above event to hear carer/family member stories about losing a loved one whilst they were a patient at the RUH. The message from the speakers was that ‘small acts of kindness, being empathetic and caring made a real difference to their experience.’

What one thing have your learnt?

‘Allow time for relatives to ask questions, time to absorb information first’

‘That nursing care at end of life can be deeply compassionate, everyone is different in terms of what they need to manage the experience, including staff’

‘To consider more about the families - a comfort box’

Below are some of the comments from staff who attended the event regarding what they will do differently:

‘Aware of patient ‘belonging to hospital’ and how awful this can be for family, more family involvement in care where appropriate’

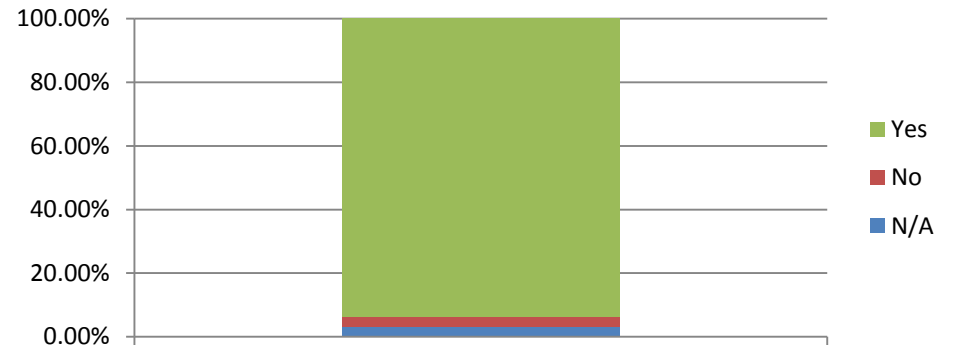
‘Include family more in comfort care’

‘Give family or patients time to process information’

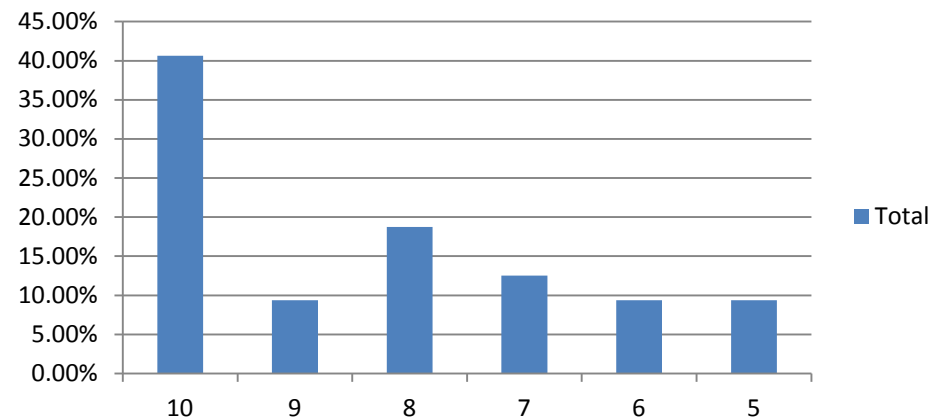
‘Remember how much is unknown for the families and remember to keep asking/ offering help’

Make sure that bedrails are down when family present at the final stage - end of life; for better contact

Has the session caused you to think about changing/improving the way you do things?



Rating of Increase in knowledge & Understanding Response Percentage



The event was recorded and a short training film will be available for all staff to use. This will be added to the Patient Experience web pages together with the monthly Board of Directors patient stories. 15

Quarter 1: Patient and Carer Experience Report – Patient Experience Activities

- Patient and Carer Experience Group (PCEG) visit – car park payment machine review**
 Qualitative information, collected from visitors to the RUH site between 1st September 2016 and 4th July 2017, via Friends and Family Test cards, Patient Advice and Liaison Service (PALS), and during a visit on 4th July 2017 to the RUH site by PCEG members, regarding their experiences of the parking payment machines, was analysed and collated and provided to the Head of Estates and Facilities and Head of Security and Safety to inform decisions regarding the upgrade of parking payment machines on the RUH site. Further to this there will be an opportunity for patients and their representatives to test the machines at the RUH site in the next few weeks.
- Strategy launch on 4th May 2017** – The Patient and Carer Experience Strategy sets out how our staff, patients, families, carers and stakeholder groups work together to ensure that patients have the best possible experience whilst using our services. The 3 key messages for all staff when engaging with patients/carers is to **‘listen, communicate, involve’**
- Guidelines to help staff collect, understand and use patient, carer and public experience** – Tools and guidelines are now available on the Patient Experience web pages to support staff to undertake a range of activities to capture feedback from patients, carers and wider communities and use the information gained to reshape services.
- Support for staff conducting patient and carer experience activities** – During Quarter 1, the Patient Experience team worked with 17 departments and clinical services to support patient experience activities and analyse the feedback received. For example, in developing and creating questionnaires, facilitating patient focus groups, and conducting semi-structured telephone interviews.
- Intranet and website pages update** – The Patient Experience Matters pages were reviewed, in particular **‘What patients and carers are telling us’** pages which now include the patient stories that are heard by the Board of Directors every month, FFT monthly reports, quarterly patient experience questionnaire results and the quarterly patient and carer experience reports.
- Review of patient information printed and posted by Synertec** – There has been a review of the patient information leaflets and forms that are included with appointment letters. Each service has been provided with the opportunity to review the information received by their patients to ensure it is correct and up to date. In addition, there has been a review of a new template patient appointment letter by the Trust’s Readers Panel.
- Patient Experience Training** – The Patient Experience Team delivered a training session to staff attending the FLOW programme in April. The focus was ‘patient involvement’ and the different ways in which the project teams could do this. The group also heard a patient story.