

Report to:	Public Board of Directors	Agenda item:	7
Date of Meeting:	25 September 2019		

Title of Report:	Improving Patient and Carer Experience Report – Quarter 1
Status:	For information
Board Sponsor:	Lisa Cheek, Director of Nursing and Midwifery
Author:	Sharon Manhi, Lead for Patient and Carer Experience Laura Davies, Patient Experience Manager Gilly Butler, Patient Feedback Co-ordinator Rachel Scott, Complaints Manager Natalie Escott, PALS and Reception Manager
Appendices	

1.	Executive Summary of the Report
<p>The Patient and Carer Experience report for Quarter 1 (April to June 2019) provides an update on patient and carer experience. The report provides a Trust wide overview. More detailed analysis by Division and outpatients is provided to the Divisional Governance Leads for information and action.</p> <p>1. Friends and Family Test (FFT) –the Trust received 10,152 Friends and Family Test responses. This is an increase of 30% compared to Q4 (7803). Overall, inpatient wards achieved a 43.8% response rate which is above the Trust target of 30%. The Emergency department (including Medical Assessment Unit and Surgical Assessment Unit) achieved 15.7%, achieving the Trust target of 15% target. A dedicated focus on FFT was achieved by the Emergency department, with a response rate of 20.1%. However, the numbers of FFT responses in MAU and SAU remains low around 8%.</p> <p>96% (9790) 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.</p> <p>Facilities and timeliness continue to have the highest number of negative comments. The top 3 most commented on facility areas are – bathroom/toilet facilities, parking and noise. Timeliness areas are general waiting and waiting in clinic. Furthermore, a number of comments have been received in Q1 about the lack of communication/information.</p> <p>The Patient Experience team are working with wards and departments to focus on learning from FFT feedback and this is included on page 4 of the report.</p> <p>2. Carers Week – during Carers week in June, the Trust launched the new Carers Charter and Unpaid Carers Policy. These are available on the Carers Support pages of the Intranet.</p>	

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3. **Patient Advice and Liaison Service (PALS) – There were 928 enquiries received this quarter** compared to 984 in Q4. The **‘top 3 subjects’ requiring resolution were appointments, communication and clinical care and concerns**. A monthly detailed PALS report is sent to Divisional leads and work is ongoing to ensure that the issues highlighted and any themes identified are used to support improvements.
4. **Complaints received – 72 formal complaints were received** this quarter. (Medicine 39, Surgery 22, Women and Children’s 5 and Corporate/Estates and Facilities 6). **There was a 44% increase in the number of complaints received in Q1**. The numbers increased in Medicine, Women and Children and Corporate.

2 complaints were re-opened this quarter. Learning and service improvement as a result of patient feedback is also included in the report. **One complaint was opened for investigation by the Parliamentary Health Service Ombudsman (PHSO)**.
5. **NHS Choices – 11 patients** provided feedback about their experience of the hospital. The posts have been categorised into 17 separate comments: **13 positive and 4 negative**.
6. **The Patient Experience section** includes a summary of patient stories to the Board of Directors this quarter and patient experience projects in the 3 Divisions. It also includes feedback from the **‘See it my Way – losing a loved one’** event in May.
7. A more **in-depth report by Division and Outpatients** is shared at Quality Board and at each Divisional Governance meeting.

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 impacted by nurse staffing levels and the capacity of the Patient Experience team to support the teams going through the Bath Improvement System.

6. Equality and Diversity

Ensures compliance with the Equality Delivery System (EDS).

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7.	References to previous reports
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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.
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8.	Freedom of Information
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Public.

Improving Patient and Carer Experience

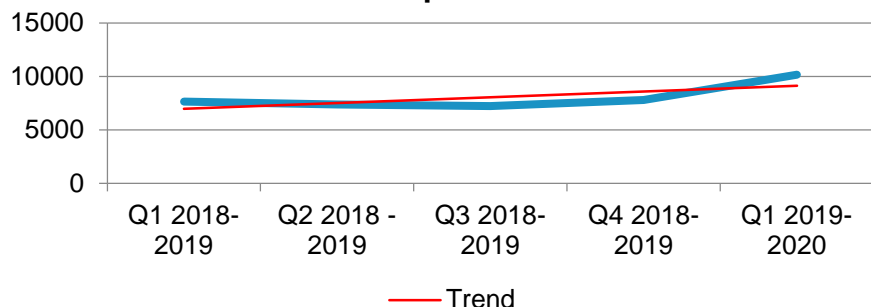
Quarter 1 Report
April to June 2019

Everyone
Working Matters
Together
Making a
Difference

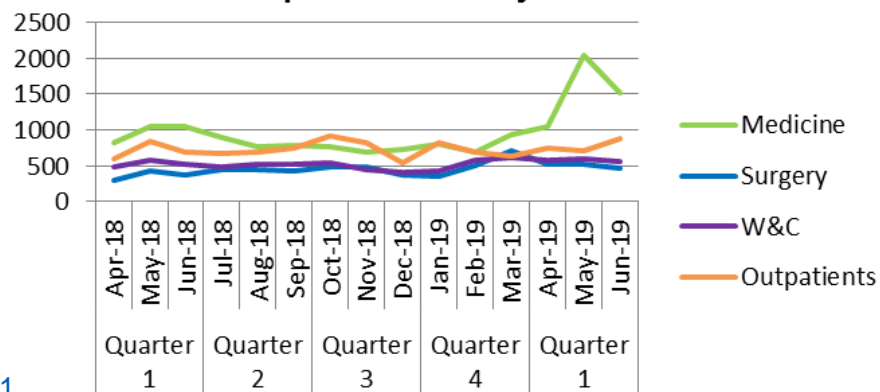
Response totals for all services

During Quarter 1, the Trust received 10,152 Friends and Family Test (FFT) responses. This represents an increase of 30% (2349 responses) from Quarter 4 (18/19) where the total was 7803, and a 33% increase on the same quarter in 2017/18. **96%** (9790) of patients that completed an FFT card in quarter 1 said that they would be **Extremely Likely/Likely** to recommend the Trust to Friends and Family if they needed similar care or treatment.

Trust Response Totals



Response Totals by Division



Recommendation	Totals	%
Extremely Likely	8435	83.04%
Likely	1355	13.34%
Neither likely nor unlikely	195	1.92%
Unlikely	51	0.50%
Extremely Unlikely	59	0.58%
Do Not Know	63	0.62%

Service	Quarter 1 Response Totals	Increase/Decrease in Responses from Quarter 4	Distribution of Quarter 1 Trust Response Total
Medicine division	4601	2163 ↑	45%
Surgery Division	1502	79 ↓	15%
Women & Children's Division	1729	104 ↑	17%
Outpatients	2320	161 ↑	23%

Response Rates

The **response rate targets for the Trust** are: Inpatient wards **30%**, Emergency Department (includes SAU and MAU) **15%**. The Emergency Department as a whole has not achieved the 15% target in 18/19. There is no Trust target for outpatients

Service	April		May		June		Q1 Summary 19/20	
	No of Responses	Response Rate	No of Responses	Response Rate	No of Responses	Response Rate	No of Responses	Response Rate
Emergency Department	580	8.7%	1386	22.3%	954	16.9%	2920	15.7%
Inpatient Wards	1243	40.7%	1476	46.9%	1288	43.6%	4007	43.8%
Day Case Ward	59	2.4%	74	2.8%	51	2.1%	184	2.5%
Inpatient and Daycase Total	1302	23.7%	1550	26.7%	1339	25.1%	4191	25.2%
Outpatient	739	2.4%	708	2.2%	873	2.7%	2320	2.4%
FFT Maternity (Antenatal)	55	15.2%	37	9.7%	59	17.1%	151	13.9%
FFT Maternity (Labour)	57	14.1%	73	19.3%	51	13.1%	181	15.4%
FFT Maternity (Postnatal)	93	27.5%	63	20.5%	66	20.2%	222	22.8%
FFT Maternity (Postnatal Community Service)	46	12.3%	58	15.5%	63	17.5%	167	15.1%
Maternity Total	251	17.0%	231	16.0%	239	16.8%	721	16.6%

Service	Q1 19/20						Q1 Summary 19/20	
	Apr		May		June			
	No of Responses	Response Rate	No of Responses	Response Rate	No of Responses	Response Rate	No of Responses	Response Rate
A&E	488	9.6%	1353	29.7%	910	22.5%	2751	20.1%
Medical Assessment Unit	47	27.6%	8	3.2%	0	N/A	55	8.0%
Surgical Admissions Unit	35	10.1%	14	5.0%	32	9.9%	81	8.5%
UTC	10	.9%	11	1.0%	12	1.2%	33	1.0%
Emergency Dept Total	580	8.7%	1386	22.3%	954	16.9%	2920	15.7%

Trust 'Free-text' Categories and Sentiments

Figures do not represent individual cards; a comment may be broken down into more than one category and / or sentiment, this applies to all 'free-text' reports.

Category	Sentiment			
	Positive	Neutral	Negative	Grand Total
Attitudes and behaviour	4868	4	52	4924
Care and Treatment	385	2	10	397
Cleanliness	100	1	23	124
Communication	583	6	170	759
Facilities	186	49	274	509
Food	234	8	96	338
Resources	1650	17	66	1733
Timeliness	775	11	392	1178
Overall Experience	625		2	627
Grand Total	9406	98	1085	10589

Positive attitudes and behaviour :

'Kind service. Willing to have a conversation with patients' (Medical Assessment Unit)

'Attention to detail with bed making or just generally helping with queries, making me feel comfortable' (Pulteney Ward)

'Staff were great, informative and friendly' (Children's PAU)

'Lovely, calm, gentle consultant who made me feel very at ease and explained everything' (ENT – Chippenham Community Hospital)

The number of 'free-text' comments has increased overall in line with the Trust response total. **Facilities, timeliness and communication** have the highest number of negative comments this quarter; the top 3 most commented on **Facility areas across the Trust: bathroom/ toilets, noise and parking**: bathroom/ toilets and noise comments refer to wards / areas across all divisions, with no area receiving significantly more than any other. Parking – highest number of comments relate to Outpatients. The top 3 most commented on **Timeliness areas** are: general waiting, waiting in clinic, waiting for appointment. The most commented on **Communication** areas are: not being kept informed / updated, lack of communication / information.

Learning and Improving from FFT

We asked staff to tell us about what they have learnt from patients and what they have done to improve patient experience as a result. Below are some examples of what staff told us.



Amanda Pacey - Matron - Violet Prince Ward (Friends and Family Test)

Key points of learning	<ul style="list-style-type: none"> Patients were not happy with the food at the RNHRD. 12 FFT responses were received in April, 4 had comments on food, of these 3 were very negative regarding food sent that had not been ordered, quantity and type of food. Verbal complaints from patients regarding type, amount and quality of food.
Actions	<ul style="list-style-type: none"> Catering manager, ward sister and lead nurse from BCPS met to discuss patient comments. Chef at the RNHRD to review the menus so they match the food. Encouraged patients to write comments in the food book in the RNHRD day room for the chef to see and respond to.

Kerry Perkins - Sister - Mary Ward (Friends and Family Test)

Key points of learning	<ul style="list-style-type: none"> Better sleeping arrangement for partners Longer visiting hours
Actions	<ul style="list-style-type: none"> Fundraising thermometer to highlight need to raise £35,000 to replace all chairs with sleeper chairs for partners. Visiting policy currently under review with a proposal for longer visiting.

Carers Week

In June 2019 we took part in Carers Week, an annual campaign to raise awareness of caring.

During this week we launched our **Carers Charter** and new **Unpaid Carers Policy**, which can be found on our new Carer Support pages on the intranet:

https://webserver.ruh-bath.nhs.uk/staff_resources/governance/patient_experience/carers_support.asp

Things staff can do:

- **Identify** patients' carers, particularly those who may benefit from support.
- Assist unpaid carers to access **support** and have the opportunity for their own needs to be assessed.
- **Communicate** fully with unpaid carers; providing information and advice.
- Fully **involve** unpaid carers; enabling them to support the patient with care needs, care planning and decision making, recognising them as an expert in the care of their loved one.

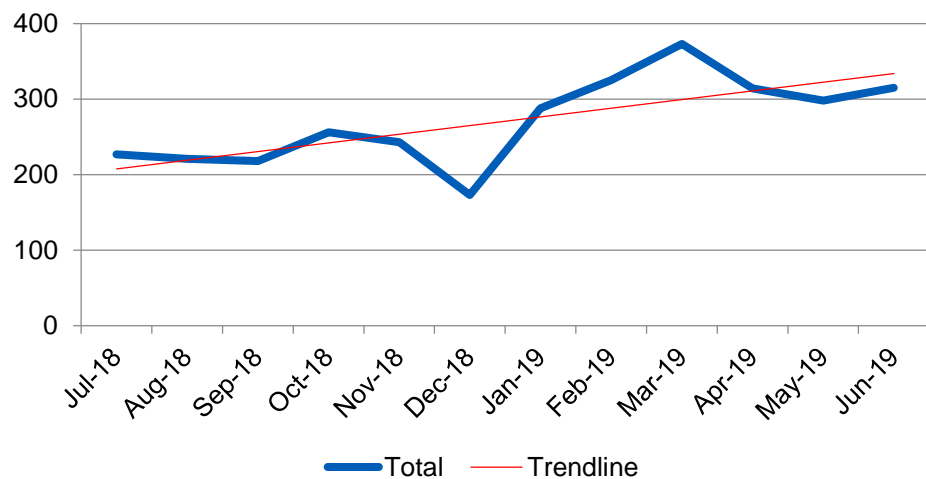
Places staff can signpost carers:

- The carers pages on the website
- The carers information boards on all wards
- The Carers Hub in the Atrium.

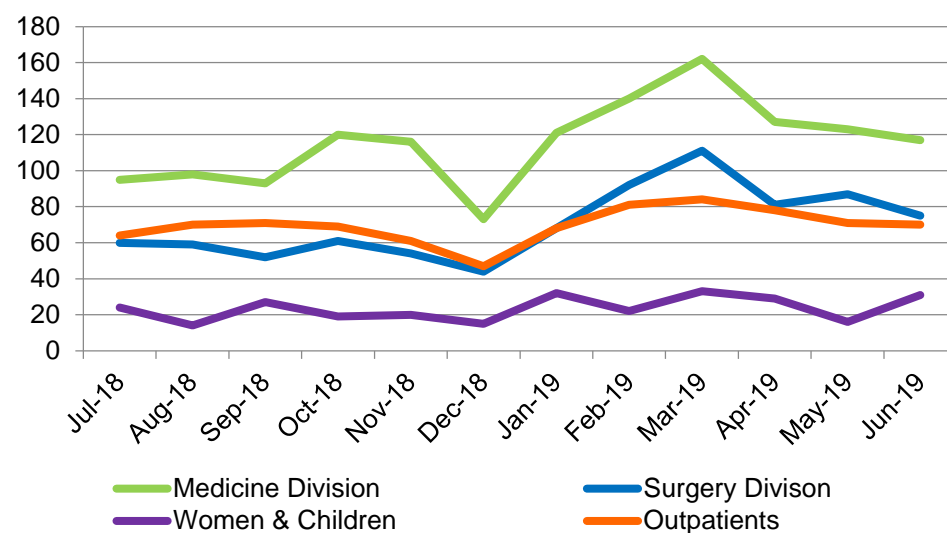
Carer Experience matters at the RUH and feedback is very important if we are to provide a quality service which meets the needs of patients and their carers. We welcome carers comments about their experiences of the services provided by the RUH. There are questionnaires for carers to complete on our webpages www.ruh.nhs.uk/carers



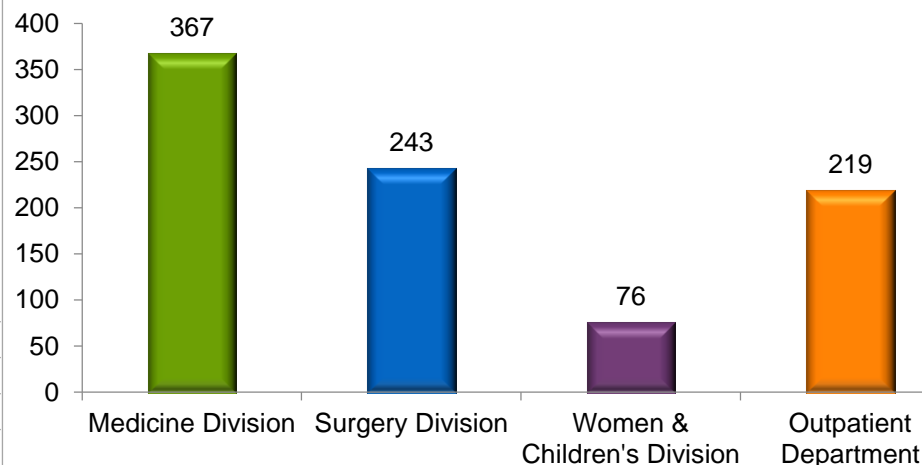
PALS Enquiries 2019



PALS Enquiries by Division 2019



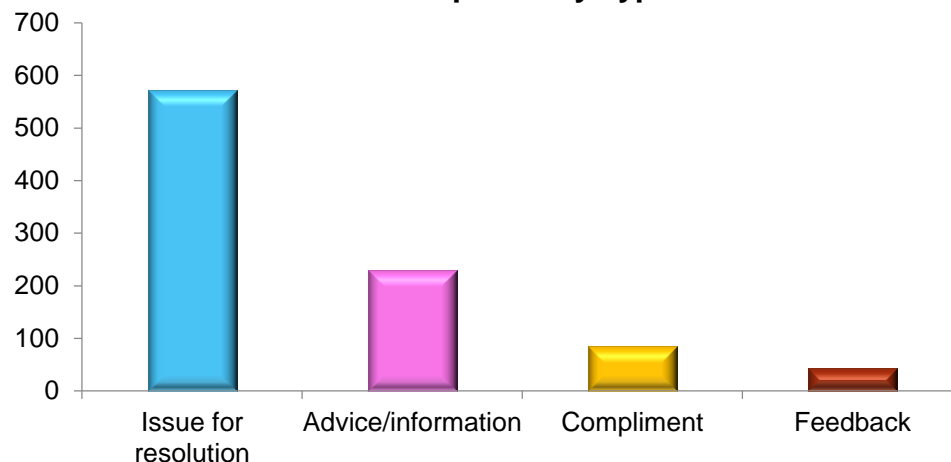
Q4 Total PALS Enquiries



There has been a slight **decrease** in the number of PALS enquiries in **Q1** compared to Q4. The highest number of contacts for the quarter were received in June.

There has been a **decrease** in the number of contacts received across the divisions for **Q1** from Q4. Medicine division received the highest number of contacts for the quarter.

PALS Enquiries by Type



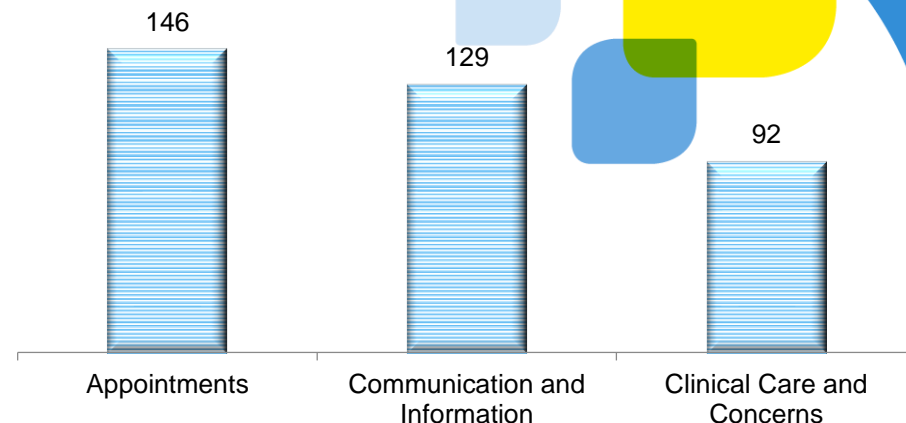
The PALS office received **928 enquiries in Q1**. This is a decrease of **(56)** compared to 984 in Q4.

The number of **issues requiring resolution** has **increased** by 3%, from 553 in Q4 to **572 in Q1**.

There was a 7% **decrease** in the number of contacts requiring **advice and information** this quarter, from 247 in Q4 to **229 in Q1**.

The number of **compliments** received by PALS in relation to the care that patients received in the hospital has **decreased** by 36% from 132 in Q4 to **84 Q1**.

There has been a **decrease** of 17% in **feedback** from 52 in Q4 to **43 in Q1**.



Appointments

45 contacts related to appointment changes by patient; 36 – length of time for new appointment, 23 – length of time for follow up, 15 – cancellation of appointment, 11 – appointment information date/time/location, 3 – follow up not given, 3 – telephone not answered. The remaining 10 contacts related to appointments in general.

Communication and Information

42 contacts related to telephone issues (phone not answered); 38 – were general enquiries/Communication, 16 – telephones not working; 6 – test results not acted upon, 4 – clinic letter not received, 3 – data protection breach. The remaining 20 contacts were general communication issues.

Clinical Care & Concerns

26 contacts were general enquires/Clinical Care; 11 – quality concerns regarding medical care, 7 – lack of information, 5 – wrong diagnosis, 5 – medication error/timing/availability, 4 – wait for treatment. The remaining 34 contacts were general concerns.

Formal Complaints received

In Q1 the Trust received **72 formal complaints**: Medicine Division **39**, Surgical Division **22**, Women and Children's Division **5** and Corporate/ Estates and Facilities **6**.

Complaints by Quarter | Year

Year	Q1	Q2	Q3	Q4	Total
2015/16	100	82	55	66	303
2016/17	56	46	50	62	214
2017/18	57	49	34	39	179
2018/19	66	68	31	50	215
2019/20	72				

There was a 44% increase in the number of complaints received in Q1 compared to the previous quarter. The increase in Q1 is similar to the increase in Q1 2018/19.

There were **2 complaints re-opened** this quarter, this compares to 4 re-opened complaints in Q4 2018/19.

There was 1 complaint opened for investigation with the **Parliamentary Health Service Ombudsman (PHSO)** with the Medical Division.

Complaints closed in Q1

Upheld	Partially upheld	Not upheld
14	24	21

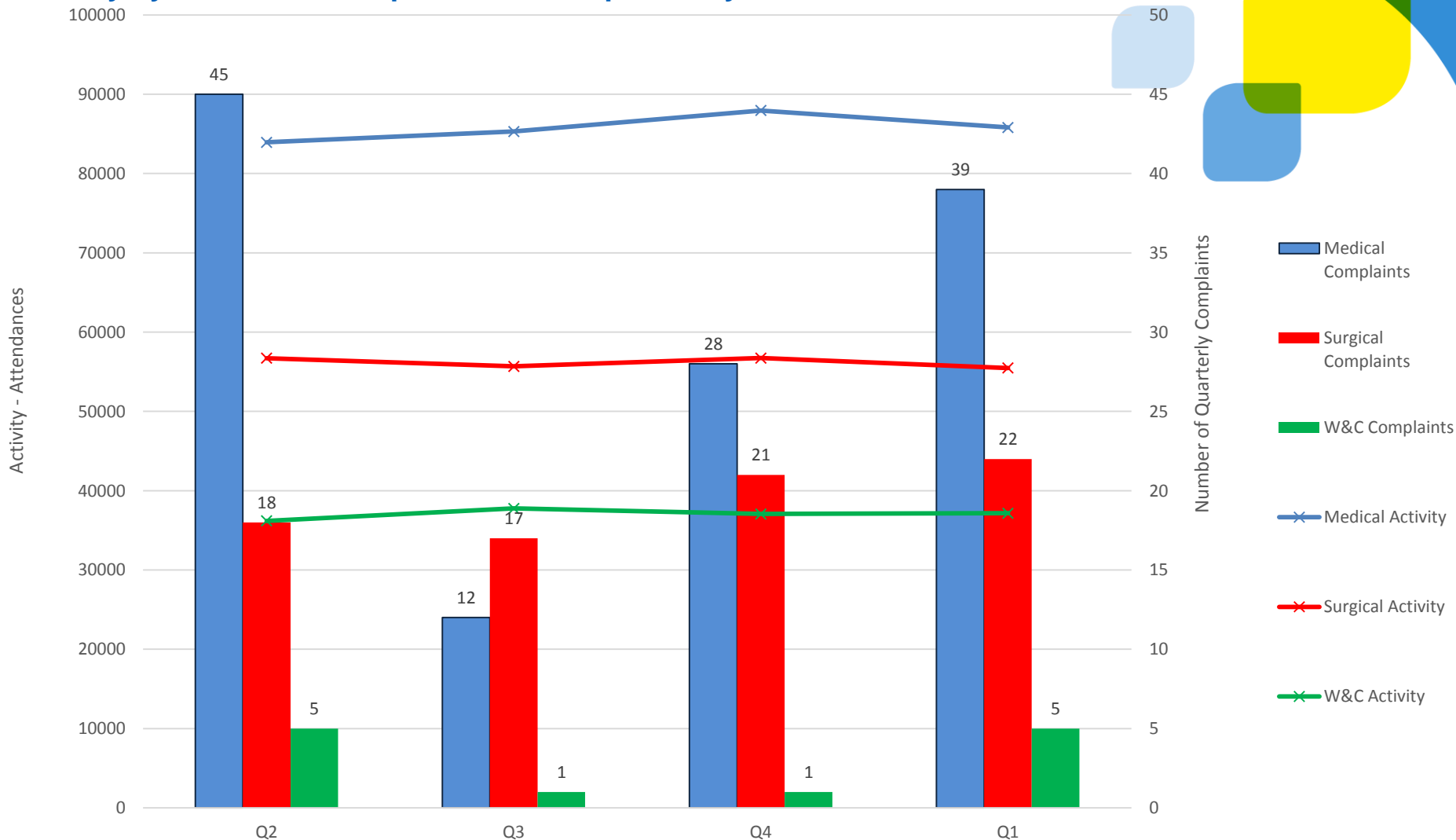
Complaints by Category:

Subject of Complaint	Total
Admission (Pre-admission)	1
Admissions/transfers/discharge procedure (In Patients/ED)	6
Appointments	6
Clinical Care and Concerns	37
Communication and Information	11
Premises/Environment/Parking	2
Staff Attitude and Behaviour	9
Total	72

'Clinical Care and Concerns' complaints by sub category:

Sub category of Clinical Care and Concerns	Total
Competence/knowledge of staff	2
Co-ordination of medical treatment	7
End of Life Care Concerns	2
Error in performing a procedure on patient	4
General Enquiry - Clinical Care	3
Inappropriate care and treatment	4
Patient Slip/Trip/Fall	1
Quality of Nursing care/ Aftercare	3
Quality/concerns regarding Medical Care	4
Wait for Treatment	1
Wrong diagnosis	4
Wrong treatment given	2
Total	37

Activity by Division in comparison to Complaints by Division



Activity for the Medical Division decreased however their complaints increased.

Activity for the Surgical Division decreased and their complaints remained consistent.

Activity in the W&C Division remained consistent however the level of complaints increased in comparison to previous quarters.

NHS Website reviews from patients and their carers

(Patient Opinion cover the same reviews as posted on NHS Website)



Based on 142 ratings for this hospital (snapshot as of 15/07/2019)

Cleanliness



(138 ratings)

Staff co-operation



(141 ratings)

Dignity and respect



(140 ratings)

Involvement in decisions



(138 ratings)

Same-sex accommodation



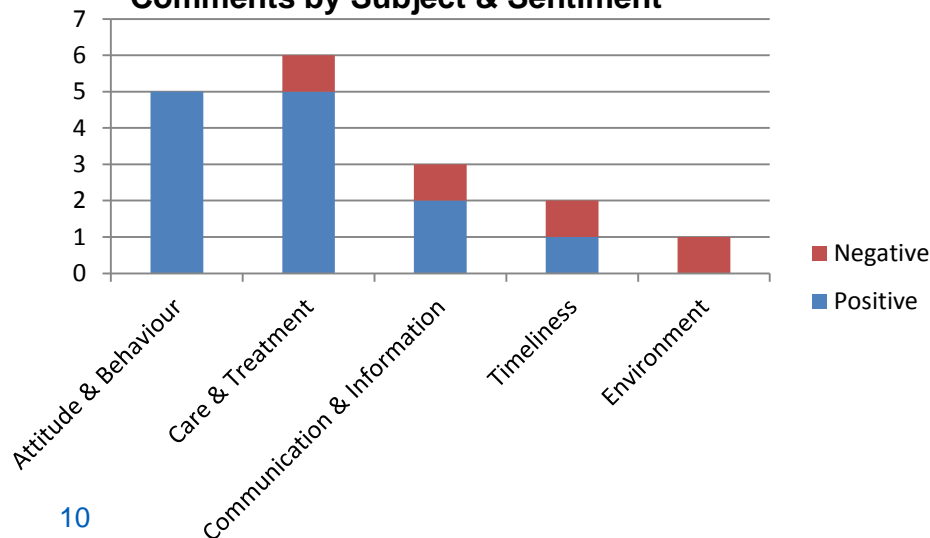
(113 ratings)

11 patients and their families posted feedback about their experiences of services provided by the RUH during quarter 1.

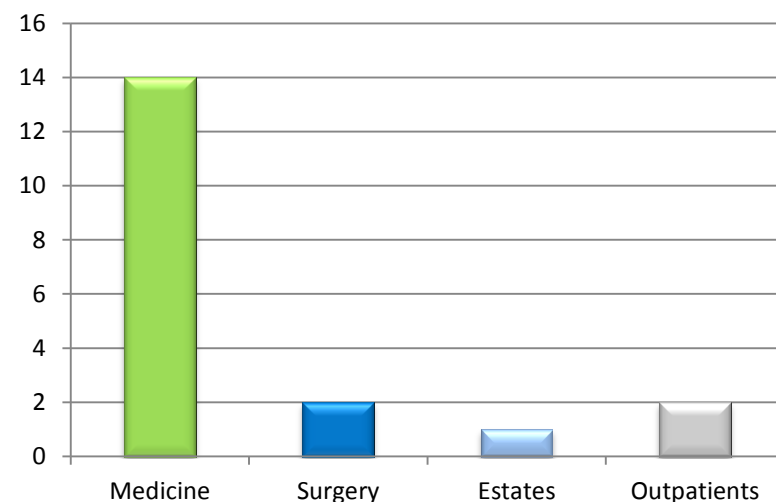
10 posts included a star rating: of these 7 rated the RUH with five-stars, 1 rated 4-stars, 1 rated 2-stars and 1 with a one-star rating.

The 11 posts have been categorised into 17 separate comments: 13 positive and 4 negative. The comments have also been categorised by Division, in addition relevant comments are identified by Outpatient Department. The comment categorised as Estates related to cigarette ends left on the floor around the site. Further information about the comments are found in each Divisional report.

Comments by Subject & Sentiment



Comments by Division & Outpatients



Patient Stories

Each month a patient story is presented to the Board of Directors. The stories are available on the Intranet for staff to listen to and use in training.

In **April**, Ros shared her experience of attending the Medical Therapies Unit (MTU) every 4 weeks for her infusion. Ros has Multiple Sclerosis and in this story Ros shared with the Board the experience of having to walk through the cardiac ward to get to the unit; being on MTU when it's in use during escalation and the difficulties of managing changes to appointments when there are inpatients in the unit.

As a result of Ros' story, a review is being undertaken of other options to access MTU. However, due to the challenges around bed capacity, MTU does continue to be open in escalation.

In **May**, Christine, her husband Peter and daughter Josie came the Board to share their experience of the Intensive Care Unit (ICU). Christine was suffering with severe stomach pains in December 2018 and was brought to the Emergency department. Following investigations, Christine had emergency surgery and was subsequently admitted to ICU. Christine was diagnosed with cancer and spent 18 days on ICU. This was an extremely worrying time for her family and in this story the family shared their experience of Christine's path to recovery.

A business case for a Psychologist to support patients following ICU admission is being developed. It is anticipated that this will help to manage the physiological and psychological stress for patients and their families following ICU admission.



In **June**, Feonnie, a international nurse from the Philippines shared her experience of coming to work at the RUH. Feonnie talked about the recruitment process, arriving at the hospital and some of the benefits of working in the UK and some of the challenges.

Part of the induction and training process is for international nurses to undertake an '**Objective structured clinical examination**' or OSCE which tests clinical skills and competencies in a 'hands-on' approach to learning and assessment. Feonnie felt that at the time, she didn't have sufficient support and dedicated time and space in which to complete the assessment. With an increased focus on international recruitment, the Trust is working to identify a dedicated space for the OSCE assessment to take place with dedicated mentor support from the Nursing and Midwifery Workforce and Education team.

Feonnie also spoke about the different meanings of words in English and the 'American' language that she has been taught and how this took time to understand.

A short 'handbook' of 'useful phrases' will be developed and used for international nurses in future.

See it My Way – Loss of a loved one 13th May 2019

In May during Dying Matters Awareness Week over 50 staff attended the 'See it My Way' event to listen to 3 families share their experiences of losing a loved one. The feedback from staff is shown in the graphs on this page. There is now a short film available for staff to view from the 'See It My Way.' The film can be accessed on the Patient Experience and End of Life Care intranet pages: https://webserver.ruh-bath.nhs.uk/staff_resources/governance/patient_experience/see_it_my_way/coping_with_loss.asp?menu_id=6d

Some of the comments from the staff are shown below:

'The importance a single comment / act can have on families'

'The session reinforced the message that relatives always remember kindness and compassion'

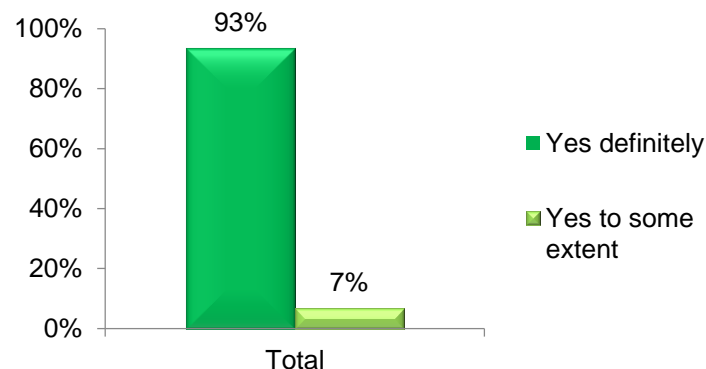
'Ensuring families leave the ward with staff in attendance, ensuring team knows as much about the dying person as possible to ensure wishes and preferences are met'

'Think more about the setting in which I give bad news'

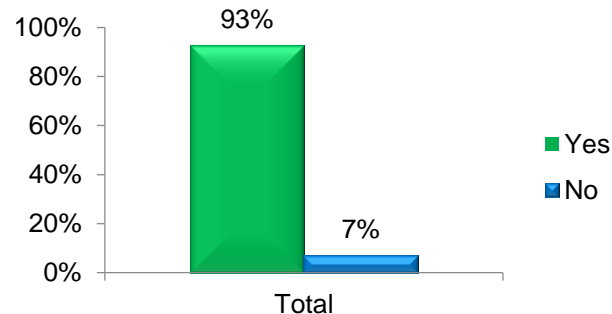
'The little things matter most'



Have the speakers stories increased your understanding?



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



Learning and actions from some of the projects supported by the Patient Experience Team in Quarter 1



PE045 Theatres transformation (Chair-port)

Key points of learning	<ul style="list-style-type: none"> Patients were receiving information but not necessarily understanding it. Patients had little understanding regarding the admission process and waiting times whilst in the hospital.
Actions	<ul style="list-style-type: none"> The electronically generated admission letter now contains information about the length of stay, long waiting times and the need to bring in reading materials to occupy self. There is information on the electronic screens in the Admission Suite addressing the wait prior to theatre and advising patients to liaise with the nursing staff regarding their place on the theatre list.

PE046 Review of Patient Experience when having Lucentis and Eylea Injections

Key points of learning	<ul style="list-style-type: none"> Patients are generally happy with the service and complementary about staff. It would be beneficial to reduce patient movement within the clinic.
Actions	<ul style="list-style-type: none"> Aim to move to one area and one waiting area. An Eye clinic liaison officer has been appointed in conjunction with the RNIB for the patients in the clinic.

PE051 Community Non - clinic Warfarin patients

Key points of learning	<ul style="list-style-type: none"> Some patients experienced difficulties contacting the team.
Actions	<ul style="list-style-type: none"> We have now given patients two telephone numbers to contact, so if they struggle getting through on one line they can try the other line. Patients have been contacting the office regarding convenience for their appointments, a lot of patients did not know they could book an appointment for any day in the week rather than the exact date given. We expressed patients had the freedom to book an appointment for when was convenient for them. Compiling an information sheet for patients regarding contact details, attending the blood room, attending clinics, attending non-clinic appointments.

Learning and actions from some of the projects supported by the Patient Experience Team in Quarter 1



PE068 Review of Patient Experience in Gastroenterology

Key points of learning	<ul style="list-style-type: none"> Patients would like to receive as much information as possible prior to the procedure. Patients would like to sit and wait in a relaxing, clean, clutter free environment.
Actions	<ul style="list-style-type: none"> Photo board of staff. Use TV in waiting room to update patients regarding running times in endoscopy, patient friendly gastro slides on TV for patients to read Bid to League of Friends to purchase recycling bins, soft closing bin, take down redundant white board, a larger TV screen and reposition, and new furniture for quiet/consent rooms.

PE080 Just Test Clinic event - Review of clinic service - Riverside Sexual Health QIP

Key points of learning	<ul style="list-style-type: none"> 100% said it met their needs and that they would recommend it to a friend. Patients were less certain of what to expect during clinic appointment.
Actions	<ul style="list-style-type: none"> Shared patient experience results with whole team and discussed next steps. Information about Just Tests on website improved to make it clearer who the clinic is for and what to expect. Collect further patient experience - pilot of 'testing event' : 'Sun, sea & STI free' .

PE084 IBS & the Low Fermentable Oligosaccharides, Disaccharides, Monosaccharides and Polyols (FODMAP) diet Questionnaires

Key points of learning	<ul style="list-style-type: none"> Patients found the advice and information provided clear and easy to understand and 100% reported that the advice and information given enabled them to follow the low FODMAP diet. Patients would prefer to attend a group in the morning. There is room to improve patient reported confidence in being able to manage their IBS symptoms/condition.
Actions	<ul style="list-style-type: none"> Plan running group sessions in the morning. New patients will now be directed to an (optional) webinar which provides first line advice and information on IBS as a condition.

Experience of Care Week – during Experience of Care week we asked staff to tell us about what they have learnt from patients and carers and what they have done to improve patient experience as a result. Below are some examples of what staff told us.

Gastroenterology

Key points of learning

- Patients experienced difficulties getting through to the Endoscopy booking line.

Actions

- Purchased an additional phone
- Propose to set up an automated telephone answer service (i.e.: Press 1 if you need to cancel your endoscopy Press 2 if you need urgent advice etc) this way we can prioritise the calls if they can't be answered in real time.

Surgical Admissions Unit

Key points of learning

- Food trolley cleared away too early by kitchen porters & cleaners. Staff having to order more food from kitchens. Too much waste, cost implications.
- Patient meals arriving cold.

Actions

- Kitchen contacted and poster put up by food trolleys.
- Meals now served in multiple bays at the same time rather than starting in one bay.

Robin Smith

Key points of learning

- Patients dislike of laxative mediation.

Actions

- Ward now provides prunes as an alternative.

Mary Ward

Key points of learning

- Women would like better facilities for partners.

Actions

- Shower facilities for partners.
- Fundraising for sleeper chairs.