

Report to:	Public Board of Directors	Agenda item:	8
Date of Meeting:	26 September 2018		

Title of Report:	Patient and Carer Experience Report – Quarter 1
Status:	For information
Board Sponsor:	Lisa Cheek, Acting Director of Nursing and Midwifery
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Appendices	

## 1. Executive Summary of the Report

The Patient and Carer Experience report for **Quarter 1 (April to June 2018)** provides an update on patient and carer experience. The layout of the report has been changed following feedback from the Divisions to include an initial Trust wide overview and then more **detailed analysis for each Division and a section on outpatients.**

**1. Patient Advice and Liaison Service (PALS) – There were 773 enquiries during this quarter.** This is a **12% decrease** on the previous quarter (882). The report includes information on the **‘top 3 subjects’ requiring resolution by specialty.** The report also has a section specifically **focussing on outpatients.** 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.

**2. Complaints received – 66 formal complaints were received** this quarter. This compares to **39 in the previous quarter.** This represents a substantial **increase of 69%.** This is the highest number of complaints since Q4 2015/16. The Medicine Division has seen the largest increase in complaints. The majority of complaints refer to ‘clinical care and concerns.

Further detailed information about complaints in the Divisions **(including performance against the 35 day working target)** is in the **Divisional section of the report.**

**2 complaints were re-opened this quarter which is the same as Q4.** Learning and service improvement as a result of patient feedback is also included in the report. **One case is currently being investigated by the Parliamentary Health Service Ombudsman (PHSO)** in this quarter.

**3. Friends and Family Test (FFT) –the Trust received 7661 Friends and Family Test responses.** This is an **increase of 21%** compared to Q4 (6331). **97% (7444)** 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.

**Timeliness and Facilities** had the **highest number of negative comments** in Quarter 1 18/19; the top 3 most commented on areas for **Timeliness** were: waiting to be seen in the Emergency Department (ED), waiting to be seen in clinics and waiting for an outpatient appointment. The top 3 most commented on areas in **Facilities** were - ward temperature, parking and noise at night.

4. **NHS Choices** – 32 patients provided feedback about their experience of the hospital. All posts included a star rating and of these 24 rated the RUH with five stars. The posts have been categorised into separate comments: **32 positive and 11 negative**.
5. **The Patient Experience section** includes a summary of patient stories to the Board of Directors this quarter; patient experience projects in the 3 Divisions;
6. Feedback from the ‘**See it my Way – living with a life limiting condition**’ event on 15<sup>th</sup> May.

<b>2. Recommendations (Note, Approve, Discuss)</b>
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To note progress to improve patient and carer experience at the RUH.
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<b>3. Legal / Regulatory Implications</b>
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Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.
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<b>4. Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc.)</b>
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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.
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<b>5. Resources Implications (Financial / staffing)</b>
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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 e-Quest – the Trust’s patient feedback system to allow patients/carers to feedback online.
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<b>6. Equality and Diversity</b>
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Ensures compliance with the Equality Delivery System (EDS).
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<b>7. References to previous reports</b>
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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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<b>8. Freedom of Information</b>
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Public.
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# Patient and Carer Experience report

Quarter 1 April – June 2018

Everyone  
Working Matters  
Together  
Making a  
Difference



## Quarter 1 April – June 2018

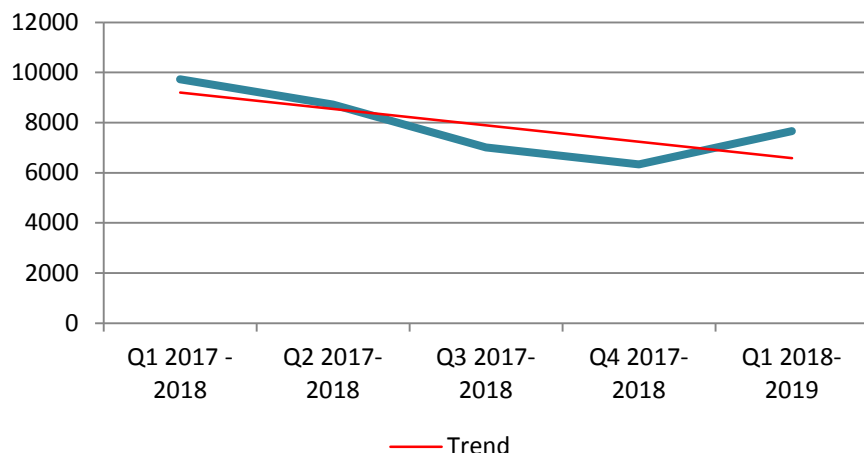
Section	Page
Trust overview	3
Medicine Division	15
Surgery Division	23
Women & Children's Division	32
Outpatient Departments	41

## Response totals for all services

During Quarter 1, the Trust received **7661** Friends and Family Test (FFT) responses. This represents an **increase of 21%** (1330 responses) on Quarter 4 (17/18) where the total was 6331, and a 21% decrease on the same Quarter 17/18.

**97%** (7444) 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



Recommendation	Total Responses	%
Extremely Likely	6512	85.00%
Likely	932	12.17%
Neither likely nor unlikely	96	1.25%
Unlikely	30	0.39%
Extremely Unlikely	31	0.40%
Do Not Know	60	0.78%

Service	Quarter 1 Response Totals	Increase/ Decrease in Responses from Quarter 4	Distribution of Quarter 1 Trust Response Total
Medicine division	2918	↑ 662	38.1%
Surgery Division	1107	↑ 15	14.4%
Women & Children's Division	1512	↑ 240	19.7%
Outpatients	2124	↑ 321	27.7%
<b>Total</b>	<b>7661</b>		<b>100%</b>

Outpatient Data in this report has been presented separately from the Divisions.

## Response Rates

From the 1<sup>st</sup> July 2018 the board agreed changes to the response rate targets within the trust,  
35% - Inpatients (was 40%) 15% - Emergency Department (was 20%)

	April		May		June		Q1 Summary	
	No of Responses	Response Rate	No of Responses	Response Rate	No of Responses	Response Rate	No of Responses	Response Rate
Emergency Department	296	6.7%	488	8.6%	414	7.3%	1198	7.6%
Inpatient Wards	901	32.9%	1083	36.8%	1020	34.8%	3004	34.9%
Day Case Ward	44	1.7%	54	2.2%	111	4.5%	209	2.8%
Inpatient and Day case Total	945	17.8%	1137	20.9%	1131	21.0%	3213	19.9%
Outpatient	598	1.9%	837	2.6%	689	2.2%	2124	2.2%
Maternity (Antenatal)	103	26.1%	108	28.1%	116	31.0%	327	28.4%
Maternity (Labour)	54	15.3%	90	21.8%	97	25.7%	241	21.1%
Maternity (Postnatal)	95	33.2%	124	36.7%	95	30.2%	314	33.4%
Maternity (Postnatal Community Service)	78	18.8%	88	17.7%	78	17.4%	244	17.9%
Maternity Total	330	22.8%	410	25.1%	386	25.5%	1126	24.5%

	April		May		June		Q1 Summary	
	No of Responses	Response Rate	No of Responses	Response Rate	No of Responses	Response Rate	No of Responses	Response Rate
A&E	235	6.0%	380	9.0%	323	7.5%	938	7.5%
Medical Assessment Unit	34	16.1%	43	21.8%	34	21.0%	111	19.5%
Surgical Admissions Unit	27	11.2%	63	23.6%	49	15.8%	139	17.0%
UTC			2	.2%	8	.9%	10	.5%
Emergency Dept. Total	296	6.7%	488	8.6%	414	7.3%	1198	7.6%

## Trust 'Free-text' Categories and Sentiments

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

Category	Sentiment			Grand Total
	Positive	Neutral	Negative	
Attitudes and behaviour	3804	23	44	3871
Care and Treatment	561	4	13	578
Communication	447	61	80	588
Cleanliness	106	3	5	114
Facilities	178	103	135	416
Food	248	48	50	346
Resources	1323	69	50	1442
Timeliness	523	47	200	770
Overall Experience	880	4	5	889
<b>Grand Total</b>	<b>8070</b>	<b>362</b>	<b>582</b>	<b>9014</b>

**Positive attitudes and behaviour** – *'The staff were brilliant, made me feel comfortable and asked frequently if I was okay.'*

**Anaesthetics patient**

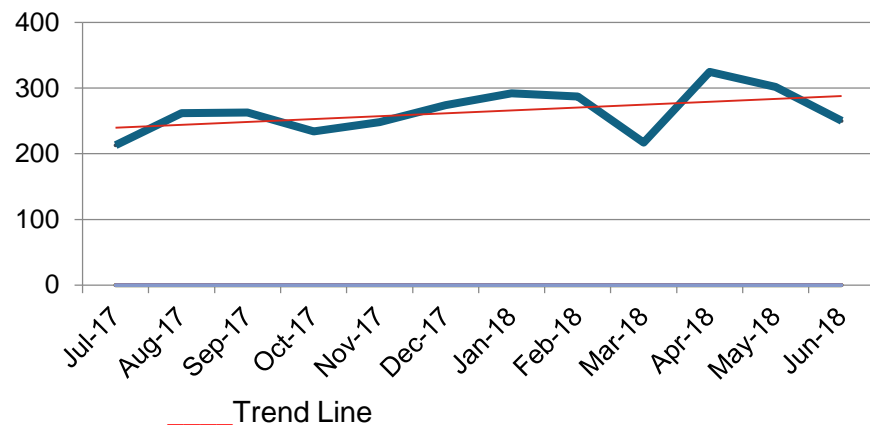
*'Great staff, really felt they listened and gave good feedback on ways to help our lives.'* **Bath Centre for Pain Services patient**

*'Couldn't be any better. Staff absolutely lovely and very informative. I felt very confident and in very good hands.'* **Breast Unit patient**

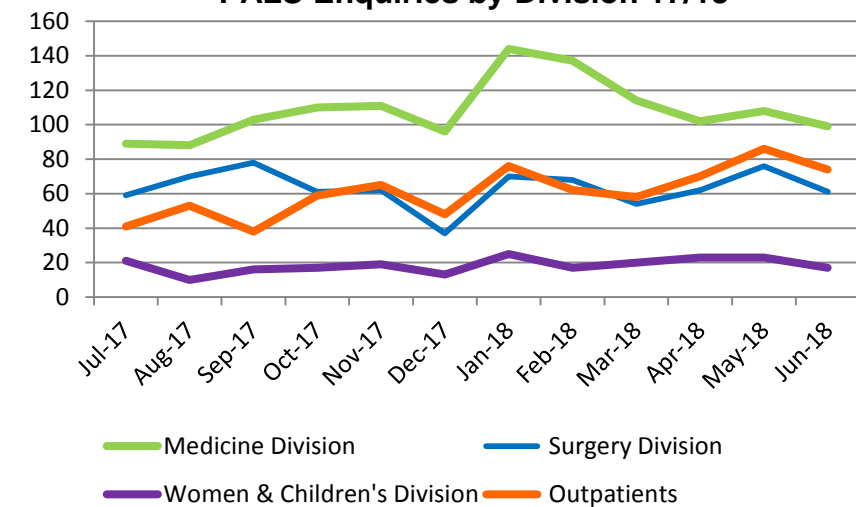
*'Nothing needs to be any better. Staff, Doctors and nurses are lovely and professional.'* **Urology Patient**

**Facilities** and **timeliness** had the highest number of negative comments in Quarter 1 18/19; the top 3 most commented on **facility areas** are - Ward temperature, Parking, noise at night,. Top 3 most commented on **Timeliness areas** are: waiting to be seen in ED, waiting to be seen in clinic, waiting for an appointment.

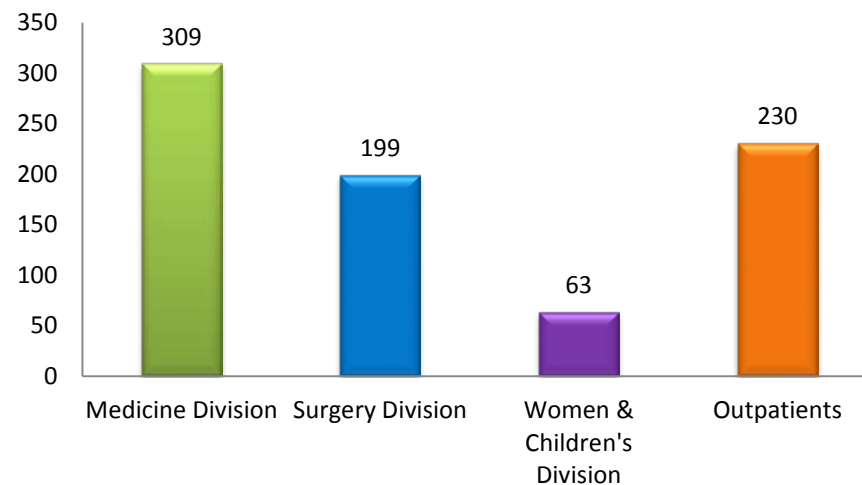
## PALS Enquiries 17/18



## PALS Enquiries by Division 17/18



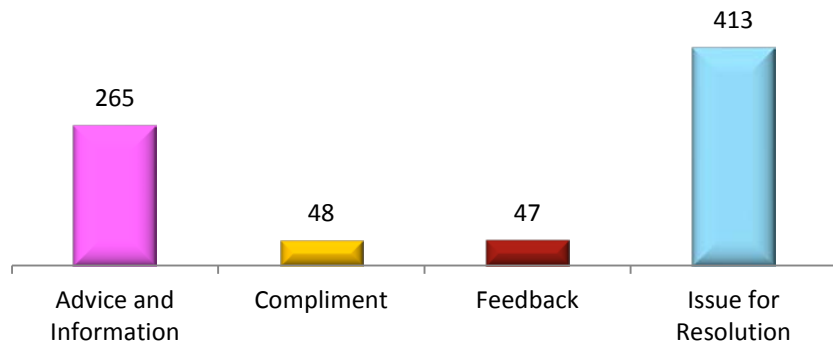
## Q1 Total PALS Enquiries



The decrease in May/June 2018 across all divisions reflects the overall decrease in PALS contacts compared to Q4 and the decrease in the number of issues for resolution.



## Q1 PALS Enquiries by Type



The PALS office received **773 enquiries in Q1**. This is a **decrease of 12%** (109) compared to Q4 (882).

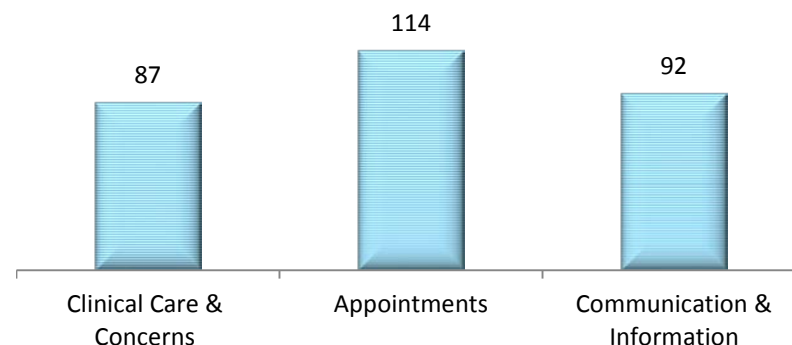
The number of **issues requiring resolution** has **decreased** from 526 in Q4 to **413 in Q1**, this is a **decrease of 21%** (113)

There has been a **small increase of 2%** in the number of contacts requiring **information and advice** this quarter from 260 in Q4 to **265 in Q1**.

There has been an **increase of 7% in feedback from Q4** (39) to Q1 (47). Examples of feedback might be that a department has run out of leaflets or the radiators were on in the department and it's too hot.

The number of **compliments** received by PALS in relation to the care that patients received in the hospital has **decreased** slightly by **16%**, from 57 in Q4 to 48 **Q1**.

## Q1 Top Three Subjects Requiring Resolution



### Appointments

27 of the contacts related to appointment information; 24 – length of time for a new appointment, 18 – cancelled appointment, 18 – appointment change by patient, 17 – length of time for follow up appointment. The remaining 10 were split between different subject areas.

### Clinical Care & Concerns

78 of the contacts were general enquiries, 5 – regarding disinterested and uncaring staff. The remaining 4 were split between different subject areas.

### Communication & Information

51 of the contacts were general enquiries / communication, 28 - telephone issues. The remaining 13 were split between different subject areas.

## Formal Complaints received

In Q1 the Trust received 66 formal complaints: Medicine Division **34**, Corporate **1**, Surgical Division **28**, Women and Children's Division **3**.

### Trust Complaints by Quarter | Year

Year	Q1	Q2	Q3	Q4	Total
2014/15	86	81	75	68	<b>310</b>
2015/16	100	82	55	66	<b>303</b>
2016/17	56	46	50	62	<b>214</b>
2017/18	57	49	34	39	<b>179</b>
2018/19	66				<b>66</b>

**2018/19 Q1 complaints** have **increased** to levels last seen in 2015/16 (Q4). This represents a **69% increase** from the last quarter. The Medicine Division has seen the largest increase in complaints. Further information is included in the Medicine Division section of this report. This is being monitored to check for trends in Q2 2018/19.

There were 2 complaints re-opened in Q1, these are both Surgical Division complaints.

One complaint has been opened for investigation with the Parliamentary Health Service Ombudsman (PHSO), this was a Surgical Division complaint.

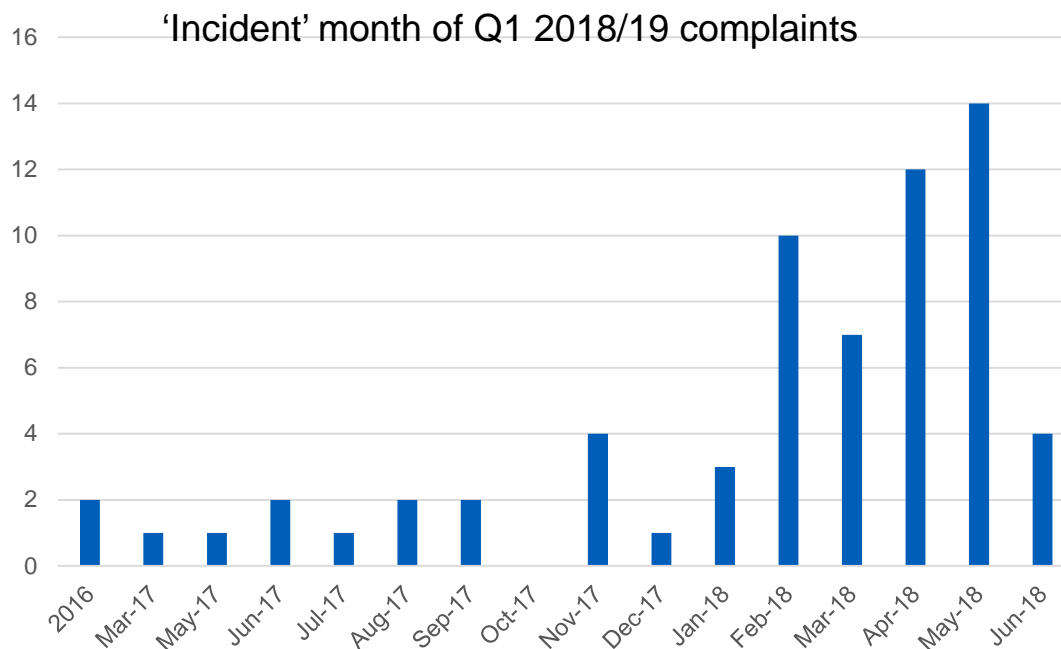
### Trust Complaints by Category

Category of complaint	Total
Clinical Care and Concerns	52
Communication and Information	6
Admissions/transfers/discharge procedure (In Patients/ED)	4
Staff Attitude and Behaviour	2
Appointments	1
Complaint Handling	1
<b>Grand Total</b>	<b>66</b>

### Trust 'Clinical Care and Concerns' complaints by sub category

Sub Category of Clinical Care	Category Totals
Concerns regarding medical care	22
General Enquiry - Clinical Care	12
Staff related concerns	5
Wrong Diagnosis	4
Medication error/timing/availability	3
Lack of pain management	3
End of Life Care Concerns	1
Inappropriate care and treatment	1
Treatment didn't have expected outcome	1
<b>Grand Total</b>	<b>52</b>

### Incident dates for Q1 complaints



- Of the 66 complaints received in Q1 2018/19, 30 (45%) incidents occurred within the period (April- June).
- 20 relate to incidents that occurred in Quarter 4 2017/18 with February showing the highest number.
- The remaining 16 incidents are distributed over 2017 to late 2016.

## Further analyses of areas with high numbers of complaints

### Older Person Unit

There has been a growth of 5.4% of patients discharged from the Older Person Unit from Q1 in 2017/18 to Q1 this year. However, this does not equate to the increase in the number of complaints received in Q1, 2018/19.

Discharge Year	Discharge Quarter	Total OPU
2017/2018	1	1,338
	2	1,434
	3	1,338
	4	1,369
2018/2019	1	1,410

#### Themes from the 10 OPU complaints:

- Medication: Over prescribing of medication/lack of medication
- Lack of Care: Nursing
- Discharge to wrong address
- Care plan not followed
- Missed diagnosis
- Patient fell on the ward

### Emergency Department

In Q1 2018/19 there were 14,737 attendances in ED (not admitted)  
In Q4 2017/18 there were 12,885, an **increase of 14.37%**.

Admissions to the Emergency Department have increased by 13.8% from Q1 last year.

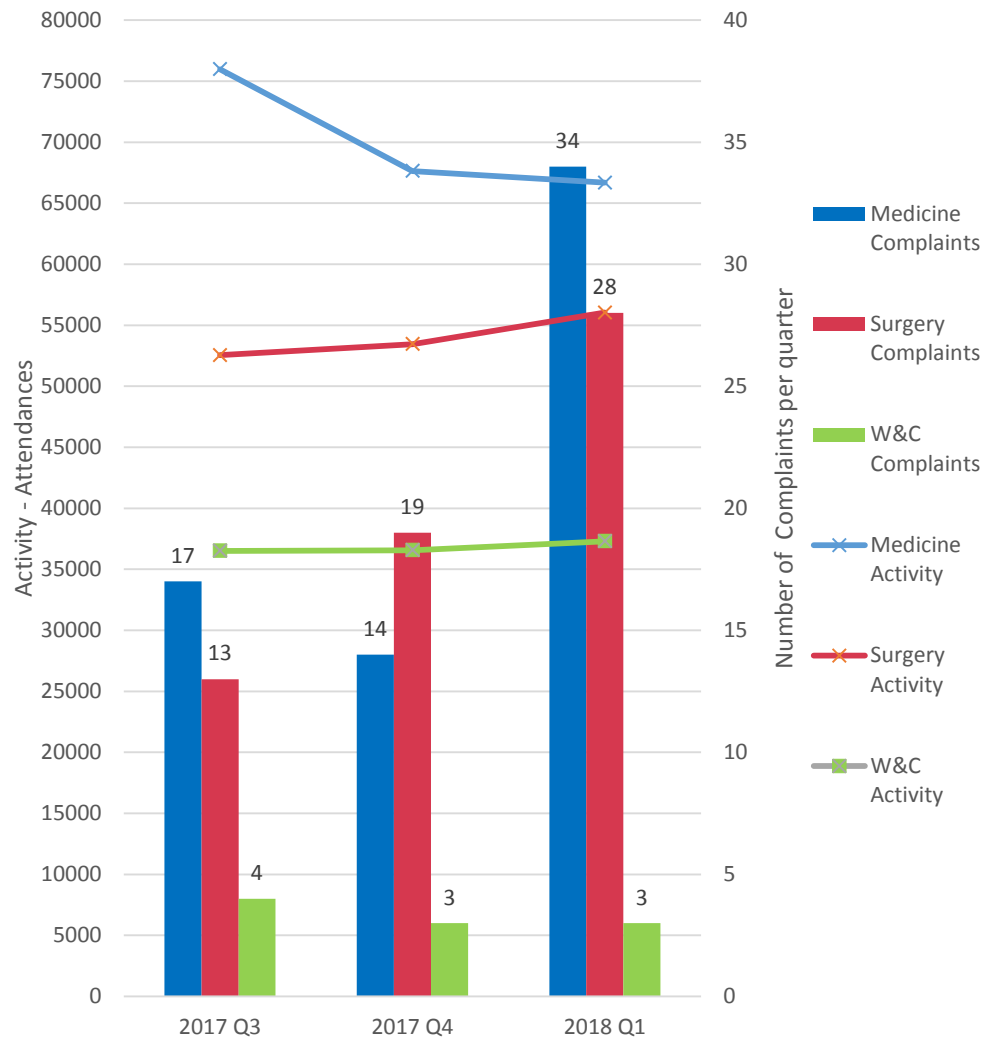
Financial Year	Financial Qtr	Admissions via ED
2017/2018	1	6,377
	2	6,347
	3	7,197
	4	7,413
2018/2019	1	7,256

Looking at admissions and non admissions from ED, there has been an increase in activity which may explain some of the increase in the number of complaints.

#### Themes from ED complaints:

- Discharge – with no care plan in place (one complaint)
- Lack of nursing care leading to a fall
- There were four complaints that related to the perceived behaviour/attitude of staff in ED.
- Clinical Care including lack of follow-up care, decision not to admit, 'plan for patient care' not being following and decision to discharge.

## Division activity in comparison to Divisional Complaints



- Activity in the Women and Children's Division has remained consistent as has the Divisions low number of complaints.
- Activity in the Surgical Division increased in Q1 as did the number of complaints within the period.
- The Medicine Division saw a slight decrease in activity from Q4 2017/18 to Q1 2018/19 however there was a sharp increase in the number of complaints.

### Learning to improve the Trust responds to patient and carer concerns

In conjunction with staff in the Divisions, the Complaints Manager will be focusing on training for staff in the Emergency Department and on the Older Person's Unit in order to enable staff to feel confident in the management of concerns and be pro-active in dealing with concerns before they become formal complaints.

## NHS Choices website reviews from patients and their carers

(Patient Opinion covers the same reviews as posted on NHS Choices)



Based on 199 ratings for this hospital (snapshot as of 30/07/2018)

Cleanliness



(203 ratings)

Staff co-operation



(202 ratings)

Dignity and respect



(201 ratings)

Involvement in decisions



(201 ratings)

Same-sex accommodation



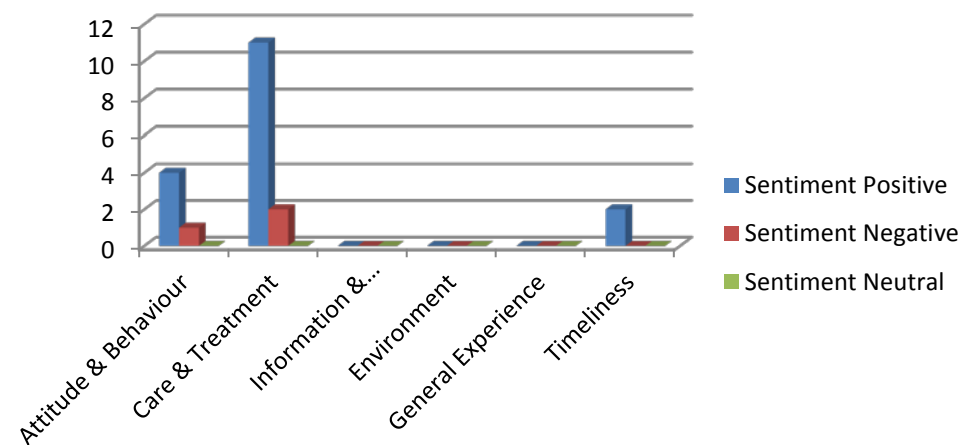
(162 ratings)

32 patients and their families posted feedback about their experiences of 45 services provided by the RUH during quarter 1.

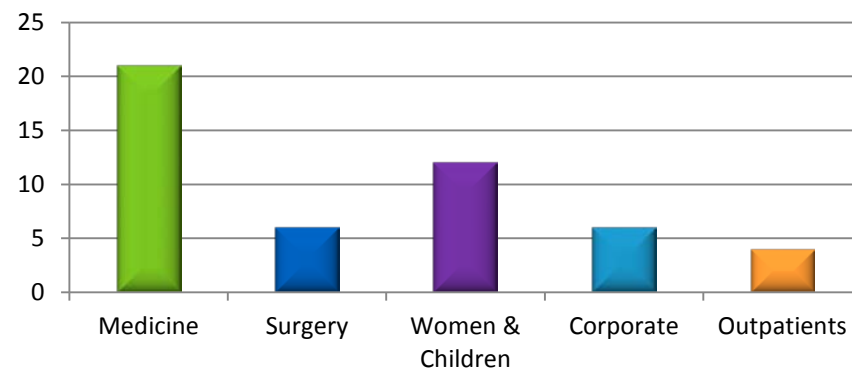
All posts included a star rating: of these 24 rated the RUH with five-stars, one with four-stars, none with three-stars, and seven with a one-star rating.

The 32 posts have been categorised into 45 separate comments: 32 positive, two neutral and 11 negative. The comments have also been categorised by Division, in addition relevant comments are identified by Outpatient Department

Comments by Subject & Sentiment



Comment Total by Division/Outpatient Department



### 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.

In **April** Clare and Steven shared their separate experiences of the Urgent Care Centre in the Emergency Department. With effect from the beginning of May, the Trust will be managing the Urgent Care Treatment Centre. This will allow for a more streamlined service for patients and their families. Patients will have a more immediate, effective and thorough assessment on arrival by a nurse based team. In addition, from 1<sup>st</sup> October 2018 a seven day primary care service is being mandated nationally. The objective will be to ensure that patients can access appropriate health care services more readily.

In **May** Josie and her baby Ivy attended the board meeting and shared her story. Ivy spent the first few months of her life in the Neonatal Intensive Care Unit (NICU). As a result of Josie's story:

- **Mobile phone was purchased** so that parents are called if their baby has moved to another bay.
- **Overnight beds** have been purchased for NICU parents to stay when the flats are full.
- **Training for all staff on breastfeeding premature babies** – the department was awarded money from the Burdett Fund to work with UNICEF to become BFI Neonatal Accredited. NICU has achieved stage one and are currently working towards stages two and three.



In **June**, Jade a member of the therapies team shared her story. Jade spoke about her experience of working in an unfamiliar environment during the extreme winter pressures of 2017/18. Jade who works at the RNHRD site spoke about the impact of this on outpatient clinics that had to be cancelled and the difficult conversations with patients. Jade's experience will be used to inform winter planning for 2018/19 and will also inform the plans for the transfer of the RNHRD staff to the RUH site recognising the emotional and cultural impact for staff moving to the RUH site in 2019.

### Main reception

From 1st April, the main reception staff are now part of the Patient Experience team and no longer managed by Estates and Facilities. This is a great opportunity to review how the Trust provides its 'front of house' services which includes PALS.

### Recruitment

Rachel Scott and Natalie Escott started in their respective roles of Complaints Manager and PALS and main reception manager in June.



## ‘See it my way - living with a life limiting condition’

Over 50 staff attended the ‘**See it my Way – Living with a life limiting health condition**’ event on 14<sup>th</sup> May. This was a joint event in partnership with Dorothy House Hospice.

Comments regarding **increased understanding** were:

*‘How people are made to feel is what stays with them, be compassionate, but be flexible and always individual’*

*‘Small things make a difference, be open and honest’*

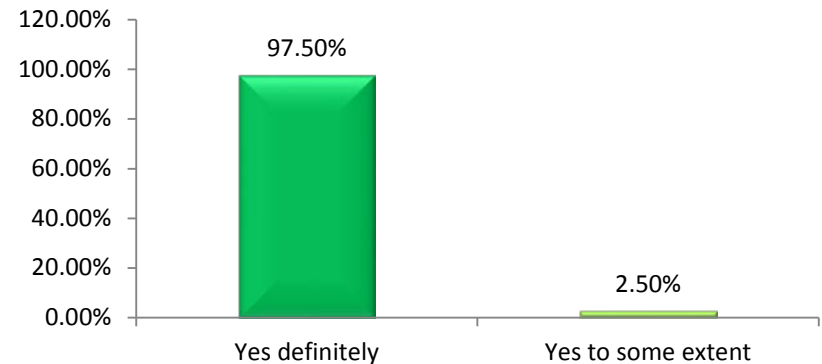
Comments regarding **‘what will you do differently’**:

*‘Approach patients I have met before, even just to say hello, as I understand the benefits of seeing a familiar face’*

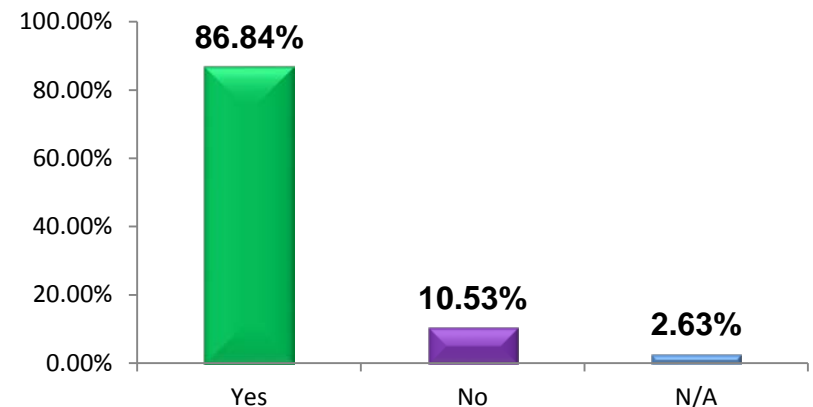
*‘Try to be as flexible as possible in providing nursing care to patients with life limiting conditions’*

*‘Keep in mind what the individual can do for themselves and support when asked’*

### Increase in Knowledge & Understanding Total



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





# Patient and Carer Experience report

## Medicine Division

Quarter 1 April – June 2018

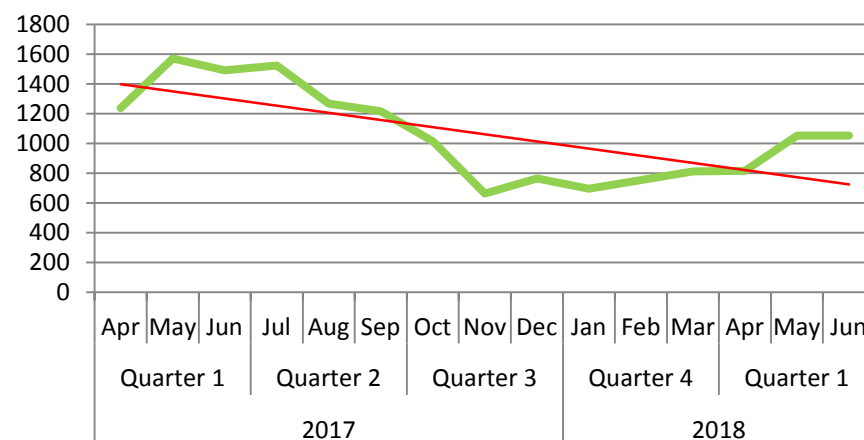
## Medicine Division Response Totals

During Quarter 1 Medicine Division received **2918** Friends and Family Test (FFT) **responses**. This represents an **increase of 29%** (662 responses) on quarter 4 17/18, where the total was 2256.

**97%** (2833) of patients that completed an FFT card this quarter in Medicine Division said that they would be **Extremely Likely/Likely** to recommend the Trust to Friends and Family if they needed similar care or treatment.

Recommendation	Total	%
Extremely Likely	2481	85.02%
Likely	352	12.06%
Neither likely nor unlikely	36	1.23%
Unlikely	11	0.38%
Extremely Unlikely	12	0.41%
Do Not Know	26	0.89%

Medicine Division Response Totals



## Medicine Division 'free-text' Categories and Sentiments

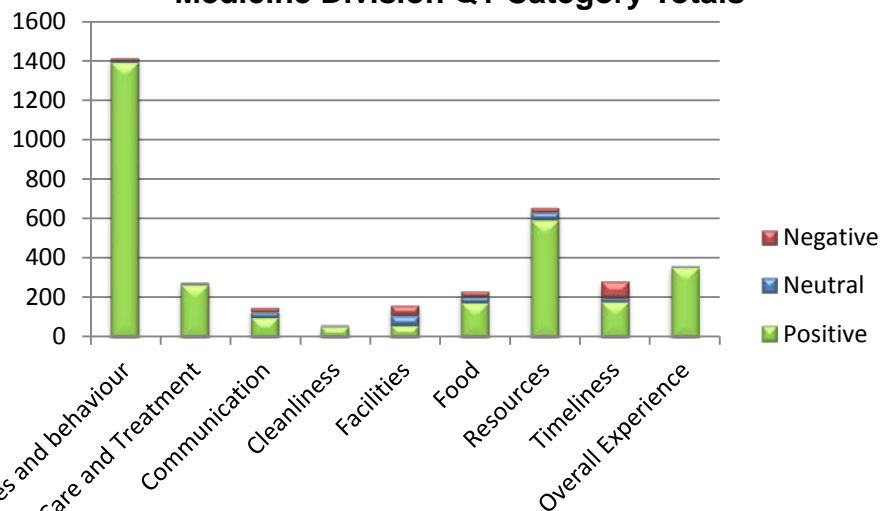
The majority of Medicine Division comments are **Compliments 89%** (3208) **43.3%** of these refer to the **Attitudes and behaviour of ward and support staff** e.g.

*'The care and compassion was tremendous. Everybody was so kind, I hope you appreciate your wonderful staff'*  
(Helena Ward Patient)

*'Excellent staff and service. Such commitment to the customers wellbeing'* (Cardiac Cath Lab Patient)

*'As always an excellent session I was cared for with kindness and consideration. I always felt safe. Everything was explained well, the team worked well together'*  
(Biologics Patient)

**Medicine Division Q1 Category Totals**



**6.2%** (226) of the total number of comments (3602) for Medicine Division were **Negative**, **4.6%** (168) **Neutral** (neutral comments include suggestions for improvement) Analysis shows the main **Areas to improve are Timeliness and Facilities**. **37.1%** (84) of the negative comments relate to **Timeliness**, the majority refer to - waiting in ED e.g.

*'Treated well and kindly. Wait is too long but I know this is not your fault'*

*'Long waits between each stage of treatment. Constant repetition of medical history by each nurse or Doctor - each not given full details of treatment so far'*

The remaining timeliness comments are a mixture referring to waiting for assistance/ call bell to be answered on the wards, waiting for medicine to go home, waiting for discharge, waiting for procedure and non specific waiting e.g.

*'Not so good - waiting, e.g. when staff say - I'll be back in a minute'*

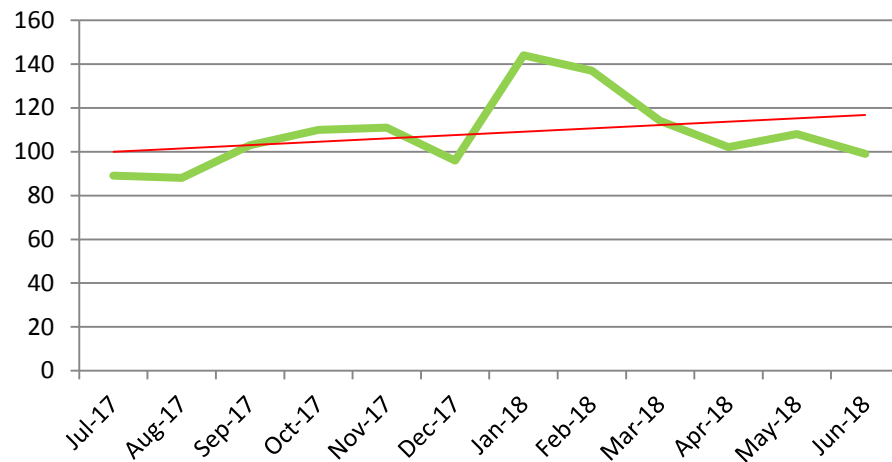
*'Do improve the medication when you leave the hospital, the waiting time you have for it is terrible'*

**21.6%** (49) of the negative comments relate to **Facilities**, the majority refer to noise/ noise at night, temperature e.g.

*'Very friendly staff but found the ward noisy overnight'*  
*'Too hot'*

The remaining facilities comments refer to:- no T.V or radio, general décor, parking, lack of beds, bathrooms and showers.

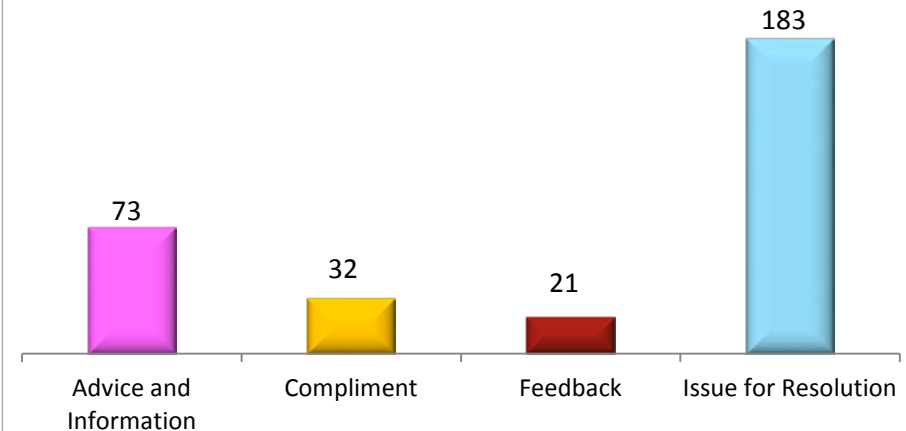
**Total PALS Enquiries Medicine Division**



The Total number of enquiries for the Medicine Division over **Q1** is **309** this is down on the previous Q4 **395** with a **decrease** of **22%** (86).

The spike over December/January reflects the overall increase in numbers and issues requiring resolution.

**Q1 Enquiries by type – Medicine Division**

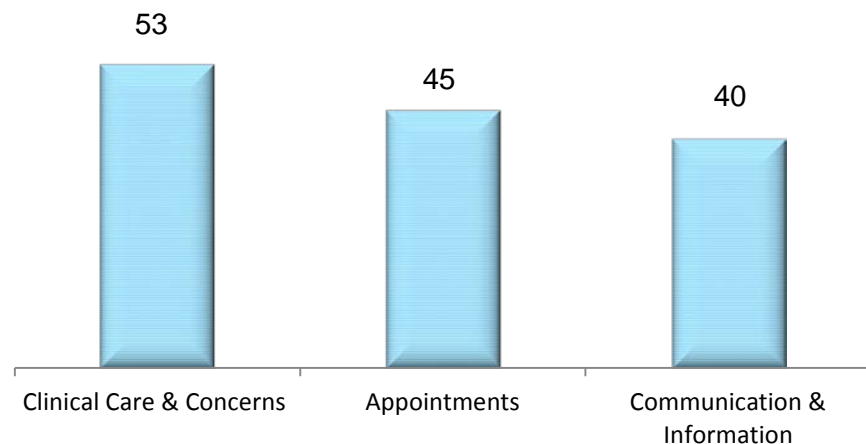


The number of **issues requiring resolution** has **decreased** from 264 in Q4 to **183** in **Q1**, this is a **decrease** of **31%** (81)

There has been a **10% decrease** in the number of contacts requiring **advice and information** this quarter, from 81 in Q4 to **73** in **Q1**.

The number of **compliments** received for the Medical Division in relation to the care that patients have received in the hospital has **increased 3%** from (31) Q4 to (32) **Q1**. There has been an **increase** of **10%** in patient **feedback** from Q4 (19) to Q1 (21).

### Top Three Subjects Requiring Resolution - Medicine Division



#### Clinical Care & Concerns

46 of the contacts were general enquiries / clinical care, 5 – regarding staff attitude. The remaining 2 were split between different subject areas.

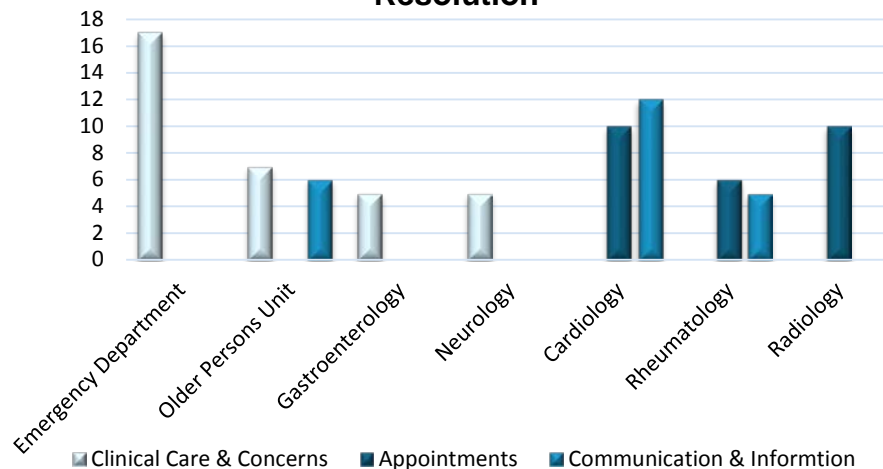
#### Appointments

14 of the contacts related to the length of time for a new appointment, 12 - related to appointment information, 7 – cancelled appointment, 6 – appointment change by patient, 6 – length of time for follow up appointment.

#### Communication & Information

23 of the contacts were general enquiries / communication, 8 - incorrect/missing/delayed discharge summaries, 4 – telephone issues, 3 – test results not acted on. The remaining 2 were split between different subject areas.

### Specialties with highest number of Issues for Resolution



#### Clinical Care & Concerns

17 contacts related to the Emergency Department, 6 - of these were concerns regarding staff attitude and missed symptoms within the Urgent Care Centre.

#### Appointments

10 contacts related to the Radiology department, 7 - of these were issues with delays and the amount of time taken before receiving a follow up or new MRI appointment.

#### Communication & Information

12 contacts relate to the Cardiology department, 6 - of these were chasing up test results.

## Medicine Division received 34 formal complaints in Q1

Year	Q1	Q2	Q3	Q4
2017/18	24	22	17	14
2018/19	34			

### Complaints by subject

Category of Complaint	Total
Clinical Care and Concerns	26
Communication and Information	3
Staff Attitude and Behaviour	2
Admissions/transfers/discharge procedure (In Patients/ED)	2
Appointments	1
<b>Grand Total</b>	<b>34</b>

Complaints for **Medicine Division** in Q1 have **increased** by **142%** (20) since the previous quarter. The majority of the increase is in the Emergency Department and Older Persons Unit. Medicine Division did not have any **re-opened** complaints or any complaints opened for investigation by the **PHSO** within Q1. The Medicine Division were due to make **24 responses to complaints** in this quarter, 7 were responded to within the 35 work day target, however 17 responses were in breach of the target.

**Learning points:** Throughout the divisions there needs to be improved identification of learning points. Those that were recorded centred around communication with patients and families. One learning point identified considering possible associated chest injuries in patients with a fractured clavicle. Learning needs to be recorded on Datix for an audit trail and included in the response to the patient/family. This will be a priority in 2018/19.

### Complaints by Specialty and Subject

Specialty   Subject	Total
<b>Acute Medicine</b>	<b>4</b>
Clinical Care and Concerns	4
<b>Cardiology</b>	<b>4</b>
Clinical Care and Concerns	4
<b>Emergency Department</b>	<b>10</b>
Admissions/transfers/discharge procedure (In Patients/ED)	1
Appointments	1
Clinical Care and Concerns	5
Communication and Information	2
Staff Attitude and Behaviour	1
<b>Neurology</b>	<b>1</b>
Clinical Care and Concerns	1
<b>Older Persons Unit</b>	<b>10</b>
Admissions/transfers/discharge procedure (In Patients/ED)	1
Clinical Care and Concerns	7
Communication and Information	1
Staff Attitude and Behaviour	1
<b>Oncology</b>	<b>1</b>
Clinical Care and Concerns	1
<b>Radiology</b>	<b>1</b>
Clinical Care and Concerns	1
<b>Respiratory Medicine</b>	<b>1</b>
Clinical Care and Concerns	1
<b>Rheumatology</b>	<b>2</b>
Clinical Care and Concerns	2
<b>Grand Total</b>	<b>34</b>

## NHS Choices website reviews from patients and their carers

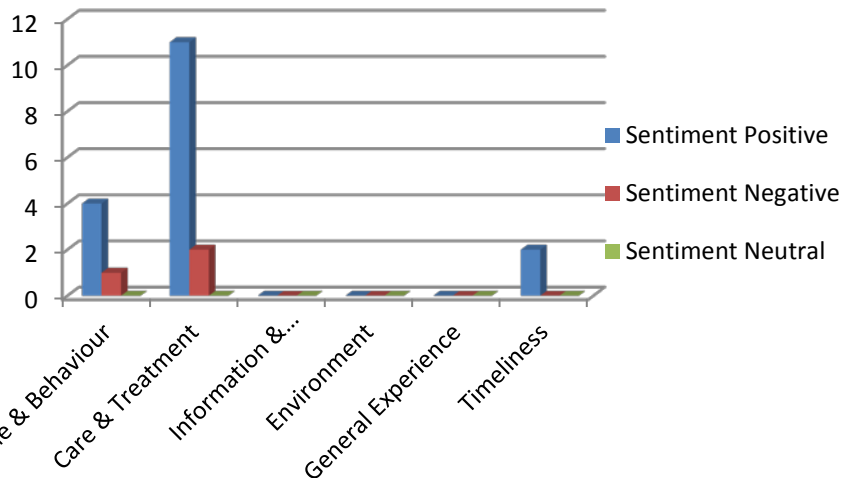
(Patient Opinion covers the same reviews as posted on NHS Choices)

### 14 patients and their families commented on 8 services provided by Medicine Division:

These posts have been divided in to 21 separate comments which are categorised by subject and sentiments and by department.

Number of comments split into subject and sentiment:

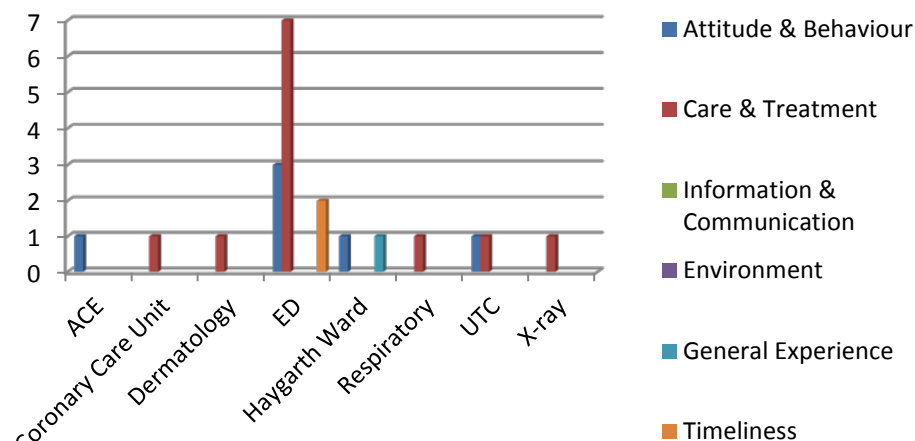
**Comments by Subject & Sentiment**



There were four negative comments regarding the Medicine Division – two in the Emergency Department, one in X-ray and one in Haygarth Ward. There were no trends in experience.

Number of comments split by department and subject:

**Comments by Department and Subject**



ED received two positive comments regarding waiting to be seen: *"I had my details taken within 10 mins and told to sit and wait to be called in. I had a book to read whilst waiting. I didn't even have time to get it out of my pocket. I was examined and diagnosed swiftly and left with a clear understanding of my injury and how to treat it. Back out in the car park in 25 minutes! You can't complain about service like that - well done, and thank you very much."*

### Patient Experience Activities in Medicine Division

#### Project Title

#### Improving information and communication about medication on discharge

#### Department / Specialty

Older Peoples Unit/ Midford Ward.

#### Project Leads

Scott Buxton, Senior Physiotherapist/ Rachael Whiteley, Pharmacy Service Manager

#### Activity

To collect staff and patient/ carers views regarding the communication between ward staff and pharmacy and ward staff and patients/ carers. Collection of patient/carers experience through patient shadowing, questionnaires and telephone interviews (post discharge).

#### Status

This activity is in the planning and initial collection stage – Details of the resulting learning outcome and actions to improve will follow.

#### Project Title

#### Improving communication with patients and carers in ED Majors

#### Department / Specialty

Emergency Department

#### Project Leads

Rosie Furse, ED Consultant/ Mandy Rumble, ED Matron and Dan Scutt (Work Experience Student)

#### Activity

A questionnaire in ED Majors to review verbal and written communication (not including – resus/ambulatory) Part 1: Patient & carers/family Part 2: Staff (Doctors).

#### Status

The questionnaire was created and patient/ carer and doctor experience feedback was collected in July. Data is being collated and analysed. Details of the resulting learning outcome and actions to improve will follow.



# Patient and Carer Experience report

## Surgery Division

Quarter 1 April – June 2018

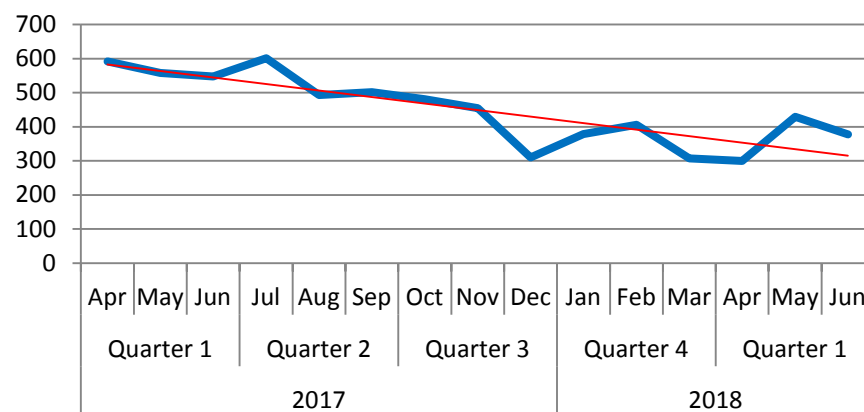
## Surgery Division Response Totals

During Quarter 1 Surgery Division received **1107** Friends and Family Test (FFT) **responses**. This represents an **increase of 1%** (15 responses) on quarter 4 17/18, where the total was 1092.

**97%** (1073) of patients that completed an FFT card this quarter in Surgery Division said that they would be **Extremely Likely/Likely** to recommend the Trust to Friends and Family if they needed similar care or treatment.

Recommendation	Total	%
Extremely Likely	916	82.75%
Likely	157	14.18%
Neither likely nor unlikely	15	1.36%
Unlikely	4	0.36%
Extremely Unlikely	9	0.81%
Do Not Know	6	0.54%

## Surgery Division Response Totals



## Surgery Division 'free-text' Categories and Sentiments

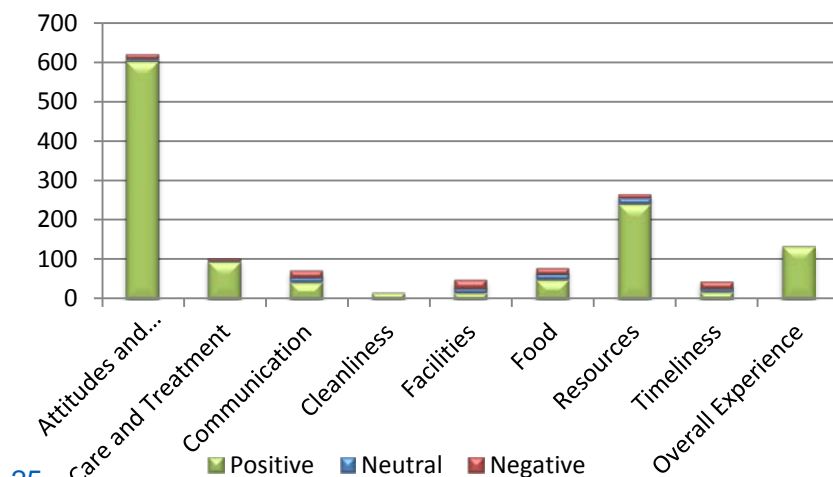
The majority of Surgery Division comments are **Compliments** **87.4%** (1221) **49.3%** of these refer to the **Attitudes and behaviour of ward and support staff** e.g.

*'The nursing teams and health care assistants were wonderful - caring, cheerful, helpful, efficient and extremely professional. Nothing to improve! A well organised ward'*  
(Surgical Short Stay Unit Patient)

*'It was evident it was a happy team working together. Friendly, professional and effective. Thank you'*  
(Pulteney Ward Patient)

*'I was extremely impressed by all staff. Friendly, kind and understanding'* (Phillip Yeoman Patient)

Surgery Division Q1 Category Totals



**7.8%** (109) of the total number of comments (1397) for Surgery Division were **Negative**, **4.8%** (67) **Neutral** (neutral comments include suggestions for improvement) Analysis shows the main **Areas for improvement** are **Facilities**, **Communication** and **Timeliness**. **22%** (24) of the negative comments relate to **Facilities**; mainly referring to Noise / noise at night (other patients), ward temperature and bathroom facilities e.g.

*'Noisy patients at night'*

*'Nurses station could be enclosed to cut down on the noise at night - whispering and paper shuffling is distracting when trying to sleep'*

*'Room much too hot!'*

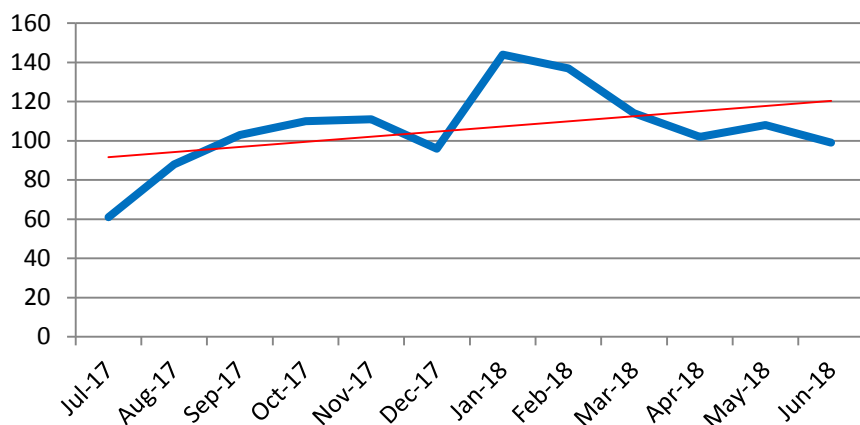
**17.4%** (19) **Communication**:- Staff communication with patient and other staff, lack of information. **17.4%** (19)

**Timeliness**:- waiting for results, waiting for medication / discharge, waiting for pain relief e.g.

*'Better communication between shifts needed - was told one thing and different on another'*

*'More regular pain relief instead of having to remind or ask for pain killers'*

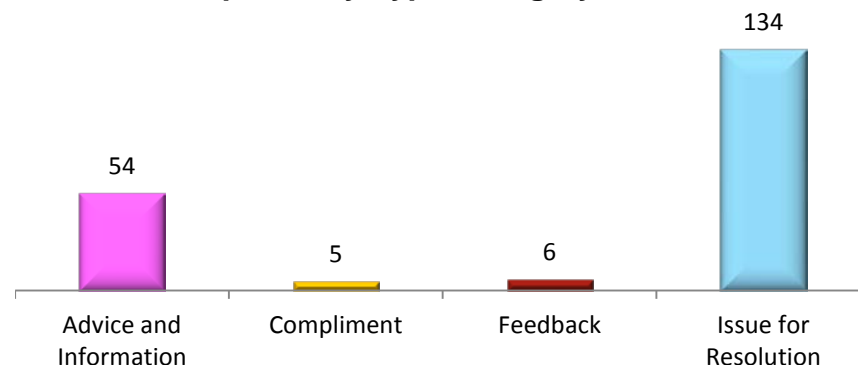
**Total PALS Enquiries for Surgery Division**



The Total number of enquiries for the Surgery Division over **Q1** was **199**. There is a slight increase from Q4 which totalled **192** responses. This is an increase of 4% (**7**).

The spike over December/January reflects the overall increase in numbers and issues requiring resolution.

**Q1 Enquiries by Type - Surgery Division**



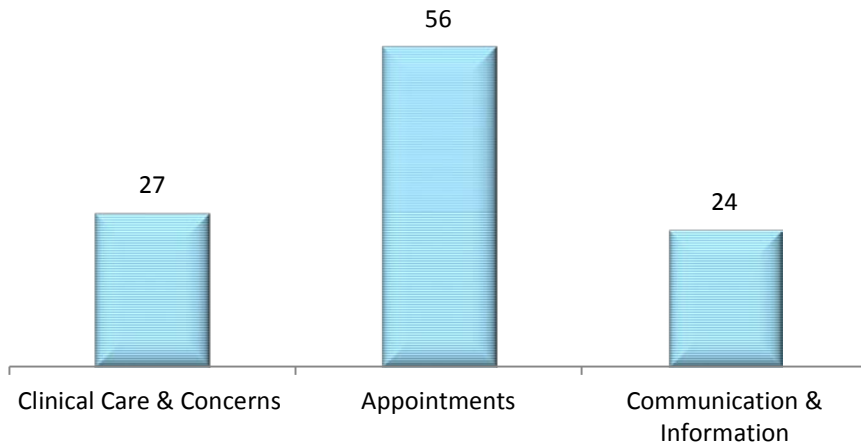
The number of **issues requiring resolution** has **increased** from 127 in Q4 to **134** in **Q1**, this is an increase of 6%.

There has been a 17% **increase** in the number of contacts requiring **advice and information** this quarter, from 46 in Q4 to **54** in **Q1**.

The number of **compliments** received for the Surgery Division in relation to the care that patients have received in the hospital has **decreased** 60% from (13) Q4 to (**5**) **Q1**.

There has been no change in the contacts providing patient **feedback** from Q4 (6) to **Q1** (**6**).

### Top Three Subjects Requiring Resolution – Surgery Division



#### Appointments

13 of the contacts related to appointment information, 11 – length of time for a follow up appointment, 9 – cancelled appointment, 7 – the length of time for a new appointment, 6 – appointment change by patient. The remaining 10 were split between different subject areas.

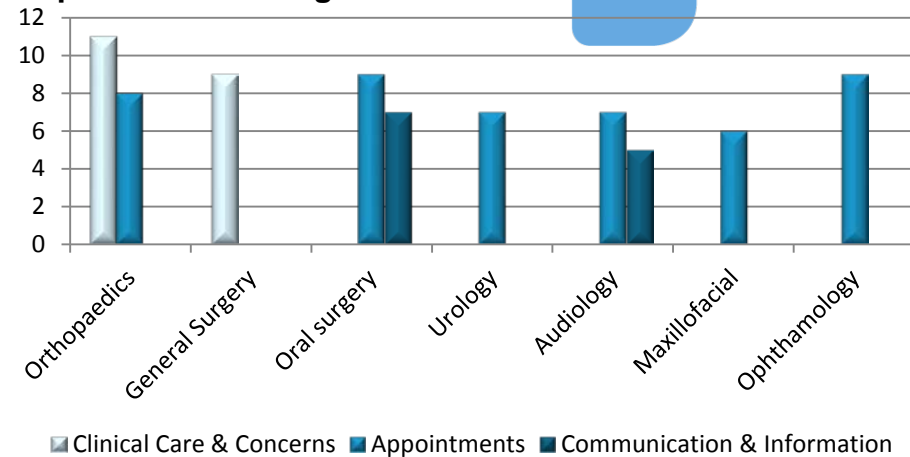
#### Clinical Care & Concerns

25 of the contacts were general enquiries / clinical care, 2 - were regarding staff attitude.

#### Communication & Information

11 of the contacts were general enquiries / communication, 9 – related to telephone issues. The remaining 4 were split between different subject areas.

### Specialties with highest number of Issues for Resolution



#### Clinical Care & Concerns

11 of the contacts related to the Orthopaedic department, 6 – of these were concerns with regards to patients being unhappy with the level of care they received, 3 – of these wanted second opinions.

#### Appointments

6 of the contacts related to the Maxillofacial department, 4 – of these were telephone issues. 9 of the contacts related to Oral Surgery, 4 – of these were the length of time taken to receive an appointment.

#### Communication & Information

7 of the contacts related to Oral Surgery, 5 – of these were telephone issues.

In Q1 the Surgery Division received **28 formal complaints**  
Complaints in **comparison** to previous quarters:

Year	Q1	Q2	Q3	Q4
2017/18	24	21	13	19
2018/19	28			

Complaints by **subject**:

Category of complaint	Total
Clinical Care and Concerns	23
Communication and Information	3
Complaint Handling	1
Admissions/transfers/discharge procedure (In Patients/ED)	1
<b>Grand Total</b>	<b>28</b>

Complaints received in 2018/19 Q1 have increased by 47% since the previous quarter. The majority increase is in Ear Nose and Throat and General Surgery Specialities – both for inpatients and outpatients.

The Surgery Division had 2 **re-opened** complaints, both complainants had further questions and meetings have been arranged. One complaint was opened for investigation by the **PHSO** in Q1.

The Surgical Division were due to make **14 responses to complaints** in this quarter, 8 were responded to within the 35 work day target, however 6 responses breach the target.

**Learning points:** Throughout the divisions there needs to be improved identification of learning points. Of those recorded there was learning around communication, staff keeping the noise down at night and the reviewing of patient pre-operatively.

Complaints split by **Specialty** and **Subject**

Speciality   Subject	Total
Anaesthesia	1
Communication and Information	1
Ear Nose and Throat	5
Admissions/transfers/discharge procedure (In Patients/ED)	1
Clinical Care and Concerns	2
Communication and Information	1
Complaint Handling	1
General Surgery	12
Clinical Care and Concerns	12
Ophthalmology	1
Communication and Information	1
Oral Surgery	1
Clinical Care and Concerns	1
Orthopaedics	4
Clinical Care and Concerns	4
Urology	4
Clinical Care and Concerns	4
<b>Grand Total</b>	<b>28</b>

## NHS Choices website reviews from patients and their carers

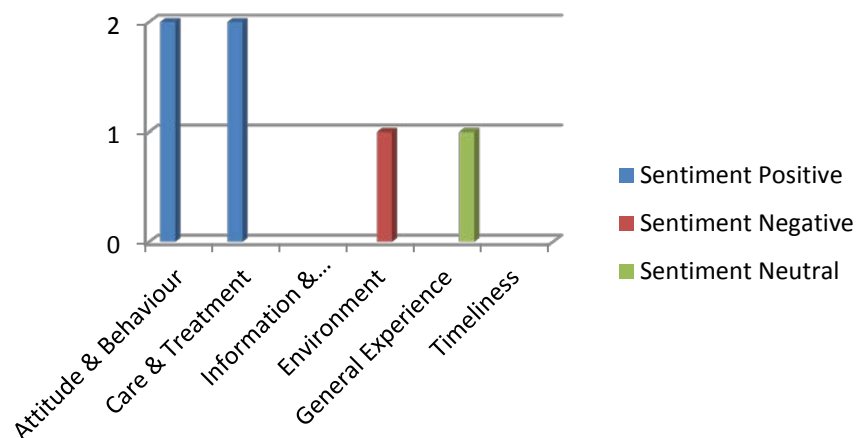
(Patient Opinion covers the same reviews as posted on NHS Choices)

### 4 patients and their families commented on 4 services provided by Surgery Division:

These posts have been divided in to 6 separate comments which are categorised by subject and sentiments and by department.

Number of comments split into subject and sentiment:

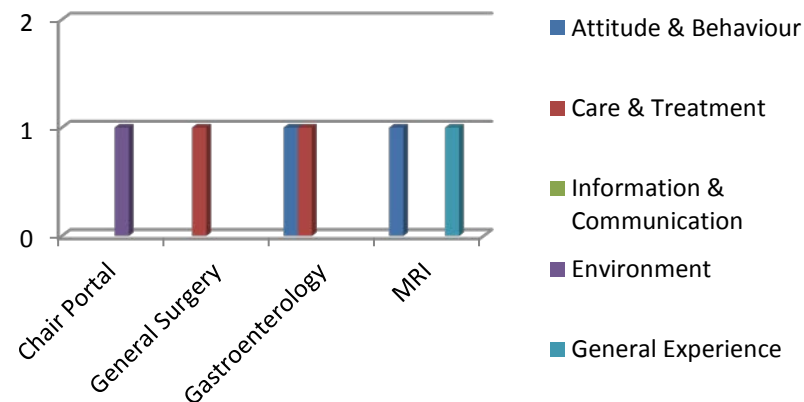
**Comments by Subject & Sentiment**



There was one negative comment regarding the environment in the 'Chair Port' where the patient would have preferred a bed to recover in.

Number of comments split into department and subject:

**Comments by Department & Subject**



Example of a positive comment: *"The nursing staff were very attentive, professional and incredibly hard working."*  
Gastroenterology Patient

### Patient Experience Activities in Surgery Division

#### Project Title

**Theatres Transformation project - patient engagement**

#### Department / Specialty

Theatres

#### Project Leads

Lynda Handley, Anaesthetics Services Manager and Ali Norbury, Theatre Project Manager.

#### Activity

To collect patient feedback regarding their experience of their surgery pathway; from admission/ pre-op, transfer to theatres, anaesthetic room, recovery and chairport discharge. Collection of patient/carer experience through questionnaires to be completed when in chairport.

#### Status

The questionnaire has been agreed and collection of patient feedback will commence in August – Details of the resulting learning outcome and actions to improve will follow.

#### Project Title

**Review of Patient Experience when having Lucentis and Eylea Injections**

#### Department / Specialty

Ophthalmology

#### Project Leads

Linda Ellis, Sister

#### Activity

To collect patient experience about their journey through the outpatient department and how this makes them feel. Collection of patient/carer experience through patient shadowing and questionnaires.

#### Status

Shadowing complete and questionnaire is awaiting approval. - Details of the resulting learning outcome and actions to improve will follow.



## Patient Experience Activities in Surgery Division

### Project Title

**Improving the environment in Robin Smith / SSSU waiting area**

### Department / Specialty

General Surgery

### Project Leads

Kenny Gale, Matron

### Activity

To collect patient/ carer/ family feedback regarding their experience of waiting in the Robin Smith/ SSSU waiting areas and their ideas for improvement. Collection of patient/carers experience through questionnaires completed by those waiting in this area during June and July.

### Status

The questionnaire responses have been collated, analysed and results sent to the project lead. – Details of the resulting learning outcome and actions to improve will follow.



# Patient and Carer Experience report

## Women and Children's Division

Quarter 1 April – June 2018

Everyone  
Working Matters  
**Together**  
Making a  
Difference

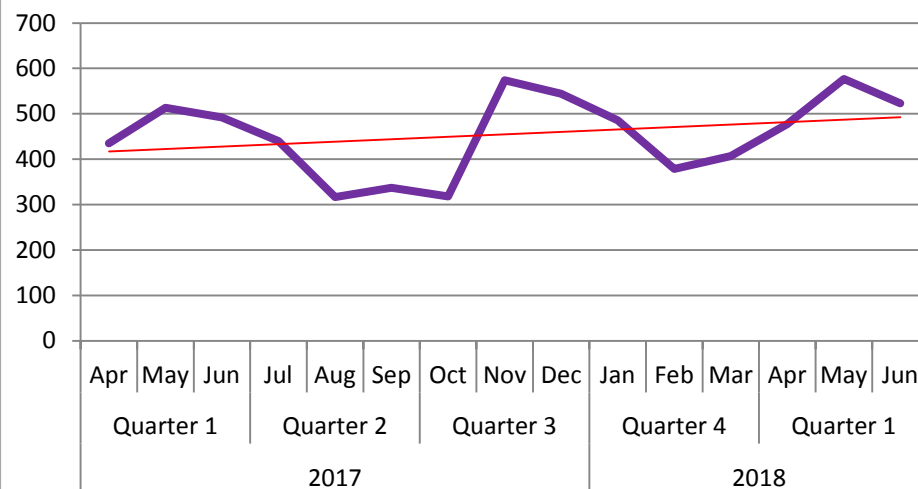
## Women and Children's Division Response Totals

During Quarter 1 Women and Children's Division received **1512 Friends** and Family Test (FFT) responses. This represents an **increase of 18%** (240 responses) on quarter 4 17/18, where the total was 1272.

**99%** (1491) of Patients that completed an FFT card this quarter in Women and Children's Division said that they would be **Extremely Likely/Likely** to recommend the Trust to Friends and Family if they needed similar care or treatment.

Recommendation	Total	%
Extremely Likely	1337	88.43%
Likely	154	10.19%
Neither likely nor unlikely	5	0.33%
Unlikely	7	0.46%
Extremely Unlikely	2	0.13%
Do Not Know	7	0.46%

Women & Children's Division Response Totals



## Women and Children's Division 'free-text' Categories and Sentiments

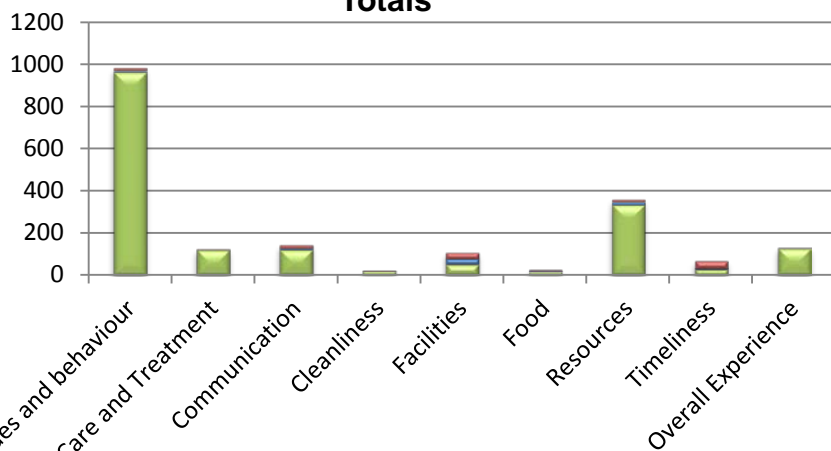
The majority of Women and Children's Division comments are **Compliments 90.8%** (1798) **53.6%** of these refer to the **Attitudes and behaviour of ward and support staff** e.g.

*'The staff were amazing - so attentive and caring, it really made a difference to me'* (Charlotte Ward patient)

*'Very personal care. I've felt listened to and supported all along and felt very able to trust the midwives opinions'* (Frome – Antenatal)

*'Student nurse is a credit to the department - kind, caring and compassionate. Will make a wonderful nurse. Also thank you to the HCA, you made things feel a lot less scary when I arrived'* (Children's Ward)

**Women & Children's Division Q1 Category Totals**



**5.7%** (114) of the total number of comments (1979) for the Women and Children's Division were **Negative**, **3.3%** (67) **Neutral** (neutral comments include suggestions for improvement) Analysis shows **Areas for improvement** are **Timeliness** and **Facilities**. **31.5%** (36) of negative comments relate to **Timeliness**; comments refer to waiting to be seen in clinic, waiting for pain relief, waiting for assistance / call bell, non-specific waiting e.g.

*'Need a speedier response when asking for pain relief'*

*'Nurses do their best but there is not enough of them. Sometimes have to wait for commode'*

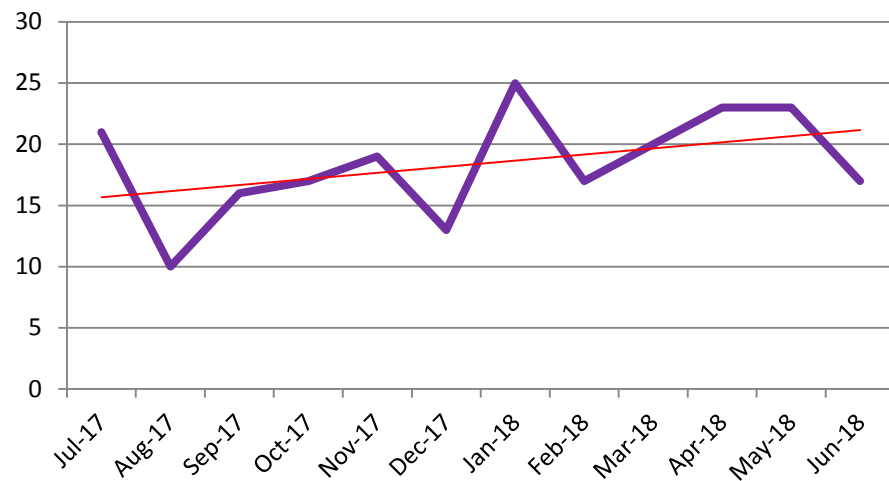
*'Very good care and thorough information. Can experience very long waits beyond appointment times'*

**24.5%** (28) negative **Facilities** comments mainly relate to ward/ room temperature, parking, facility comfort/ décor e.g.

*'Good - staff, beds. Poor - parking, too hot and not enough air movement'*

*'Parking payment is confusing'*

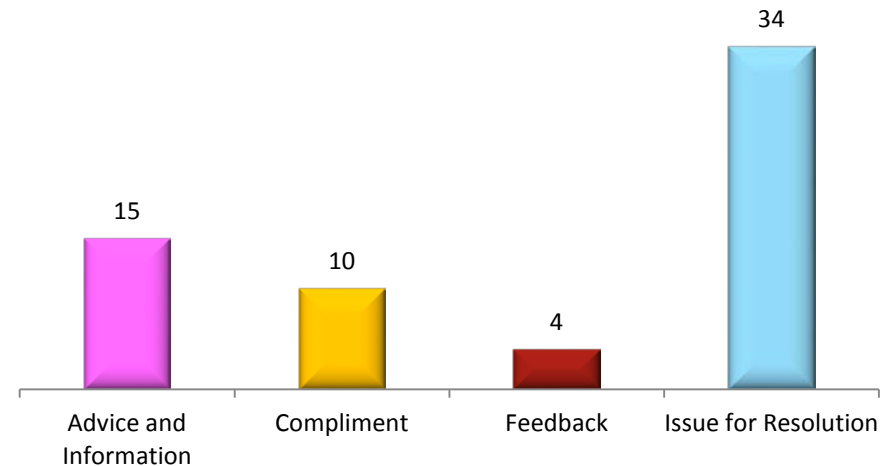
**Total PALS Enquires for Women & Children's Division**



The Total number of enquiries for the Women & Children's Division over **Q1** was **63**. There is an increase of 1 enquiry from Q4 which totalled **62** responses. This is an Increase of **2% (1)**.

The spike over December/January reflects the overall increase in numbers and issues requiring resolution.

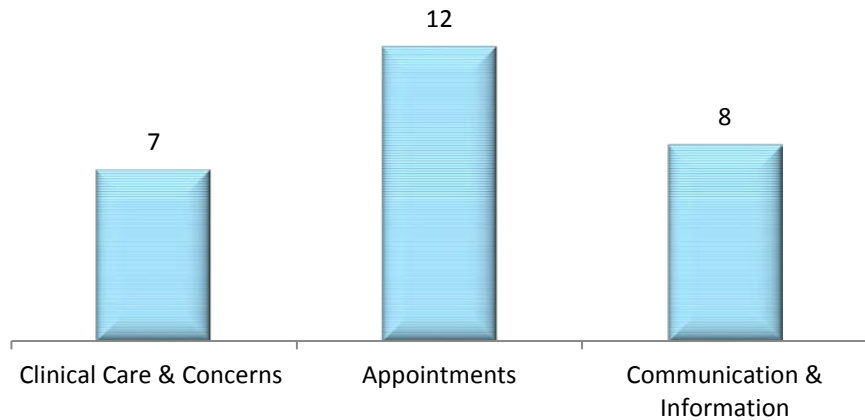
**Q1 Enquiries by Type - Women & Children's Division**



The number of **issues requiring resolution** has slightly **increased** from 32 in Q4 to **34** in **Q1**, this is an increase of 6% (2). There has been a 7% **increase** in the number of contacts requiring **advice and information** this quarter, from 14 in Q4 to **15** in **Q1**.

The number of **compliments** received for the Women & Children's Division in relation to the care that patients have received in the hospital has **increased 11%** from (9) Q4 to **(10) Q1**. There has been a decrease 43% in the contacts providing patient **feedback** from Q4 (7) to **Q1 (4)**.

### Top Three Subjects Requiring Resolution - Women & Children's Division



#### Appointments

5 of the contacts related to appointment changes by patients, 3 – length of time for a new appointment, 2 – appointment information, 2 – cancelled appointments.

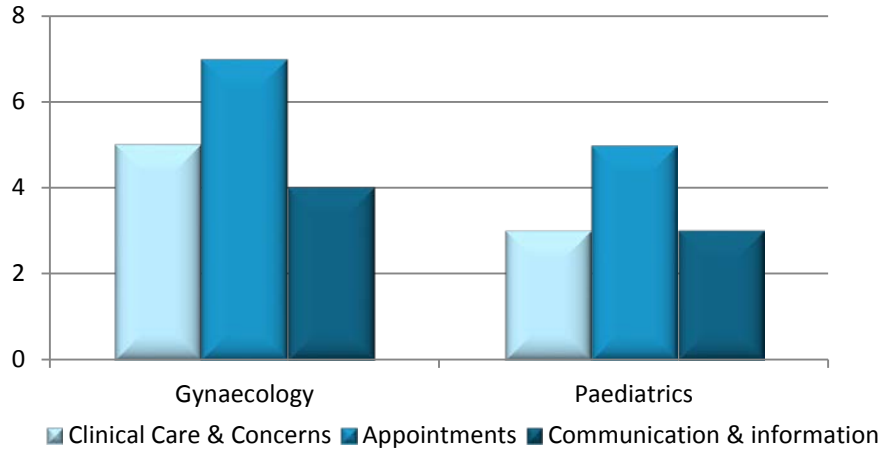
#### Clinical Care & Concerns

7 of the contacts were general enquiries / clinical care.

#### Communication & Information

4 of the contacts related to staff attitude, 2 – related to telephone issues. The remaining 2 were split between different subject areas.

### Specialties with highest number of Issues for Resolution



There were no trends across the specialties.

In Q1 the Women and Children's Division received **3 formal complaints**.

**Total** number of complaints for the quarter

Year	Q1	Q2	Q3	Q4
2017/18	9	6	4	3
2018/19	3			

Complaints by **subject**:

Category of complaint	Total
Clinical Care and Concerns	3
<b>Grand Total</b>	<b>3</b>

Complaints received in 2018/19 Q1 have remained consistent to volumes of the previous quarter.

The Women and Children Division did not have any **re-opened** complaints or complaint opened for investigation by the **PHSO** in Q1.

The Women and Children's Division were due to make **4 responses to complaints** in this quarter, 2 were responded to within the 35 work day target, however 2 responses breached the target.

**Learning points:** The Women and Children's Division are keen to take a proactive approach to resolving concerns identified by families. Learning from patient feedback is identified however this needs to be routinely recorded on Datix.

## Complaints by Specialty and Subject

Due to low data, sub category is included for additional analysis

Speciality   Subject	Total
Gynaecology	2
Clinical Care and Concerns	2
Quality/concerns regarding Medical Care	1
Wrong diagnosis	1
Maternity	1
Clinical Care and Concerns	1
Quality/concerns regarding Medical Care	1
<b>Grand Total</b>	<b>3</b>

## NHS Choices website reviews from patients and their carers

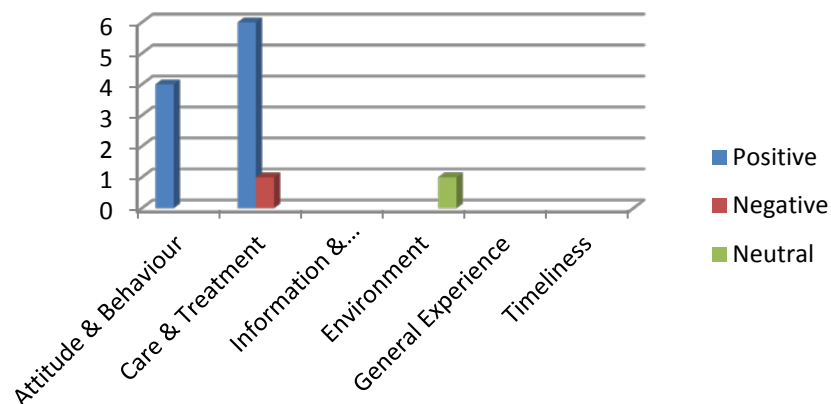
(Patient Opinion covers the same reviews as posted on NHS Choices)

### 10 patients and their families commented on 6 services provided by Women & Children's Division:

These posts have been divided in to 12 separate comments which are categorised by subject and sentiments and by department.

Number of comments split into subject and sentiment:

**Comments by Subject & Sentiment**

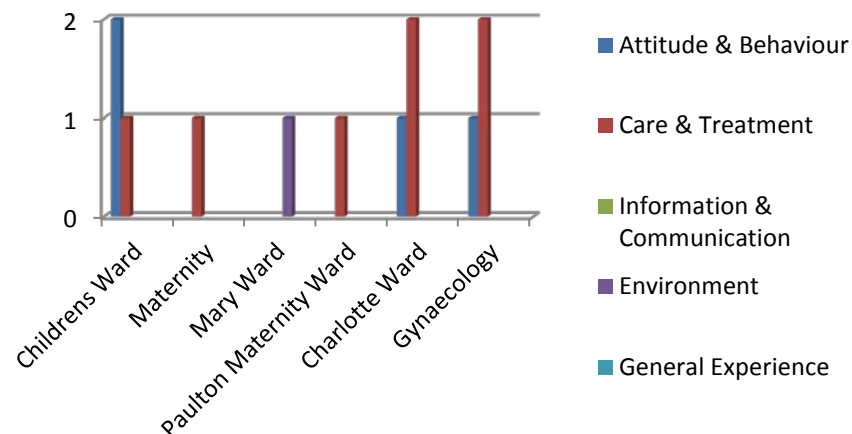


There was one neutral comment suggesting that men staying on the Maternity Ward could compromise the privacy of other women on the ward.

There was one negative comment about care and treatment in Maternity regarding a difference of opinion in treatment between the patient and doctors.

Number of comments split into department and subject:

**Comments by Department & Subject**



Example of a positive comment: “....Would like to say thankyou so much to the amazing staff, they was so caring and informed me in everything that was happening so put my mind at ease, couldn't thank them enough, such lovely doctors and nurses, well all the staff was amazing .. if I have to go in again I would not worry at all as they are amazing.”

Parent of a Child on Children's Ward



### Patient Experience Activities in Women & Children's Division

#### Project Title

#### Improving the Riverside Health Clinic Service

#### Department / Specialty

Sexual Health.

#### Project Leads

Amanda Gell, Matron.

#### Activity

To collect patient experience feedback from patients attending both drop-in and booked appointments to understand their views of the information received prior to the appointment, waiting to be seen in clinic, communication when attending the clinic, the clinic environment and their preferences if requiring future appointments.

#### Status

Currently collecting through questionnaires. Details of the resulting learning outcome and actions to improve will follow.

#### Project Title

#### Understanding Patient Experience of the Supraregional Tuberous Sclerosis Complex Service

#### Department / Specialty

Bath Supraregional Tuberous Sclerosis Complex Service.

#### Project Leads

Amanda Blyth, Secretary to Dr Zurick.

#### Activity

To collect patient experience feedback from patients attending appointments to understand their views of the information received prior to and during the appointment, waiting to be seen in clinic, communication when attending the clinic, the clinic environment and their ideas for improvements.

#### Status

Currently collecting through questionnaires. Details of the resulting learning outcome and actions to improve will follow.

### Patient Experience Activities in Women & Children's Division

#### Maternity Family Experience Report

**'In your Shoes' event** – a focus group to listen to the voices of families from the whole community. Individual comments were captured and full analysis of the themes identified from the family experience feedback is currently being evaluated.

**Family Experience Matters questionnaire** – 21 questionnaires completed. Feedback from parents after the birth of their baby is also captured through the **Bath Maternity Facebook page**.

- Family feedback was that families on Mary ward wanted 'more for siblings to do' when visiting their new baby. The ward are trialing new colouring packs for children to help keep them entertained.
- New mums on Mary ward asked for better facilities for partners and as a result, the ward has made shower facilities available for partners when staying overnight.
- Mums with babies being cared for on the neonatal unit fed back that they sometimes felt they weren't getting enough information. Postcards have been designed to help support families and provide further information about the Neonatal Intensive Care Unit (NICU).

**Feedback from families following the death of their baby** – 'what matters to me' cards introduced in the 'Butterfly room' and 'Forget me not' suite for parents to complete if they would like to provide feedback about the care that they have received.

# Patient and Carer Experience report

## Outpatients

Quarter 1 April – June 2018

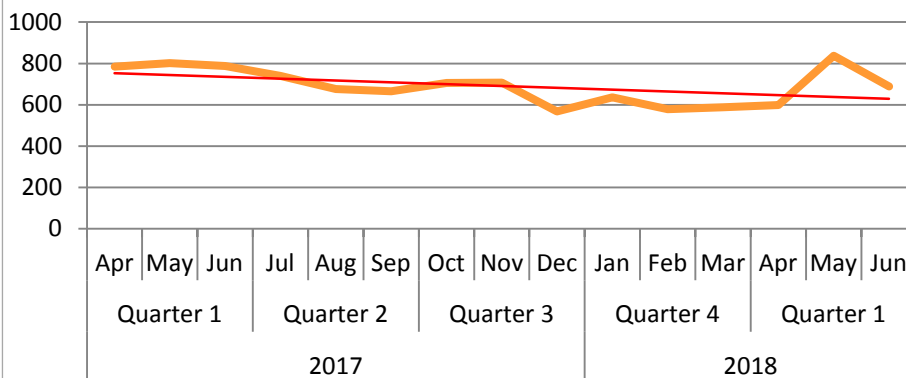
## Outpatient Response Totals

During Quarter 1 Outpatient departments received **2124** Friends and Family Test (FFT) **responses**. This represents an **increase of 17%** (321 responses) on quarter 4 17/18, where the total was 1803.

**96%** (2047) of patients that completed an FFT card this quarter in Outpatients said that they would be **Extremely Likely/Likely** to recommend the Trust to Friends and Family if they needed similar care or treatment.

Recommendation	Total	%
Extremely Likely	1778	83.71%
Likely	269	12.66%
Neither likely nor unlikely	40	1.88%
Unlikely	8	0.38%
Extremely Unlikely	8	0.38%
Do Not Know	21	0.99%

Outpatient Response Totals



## Outpatient 'free-text' Categories and Sentiments

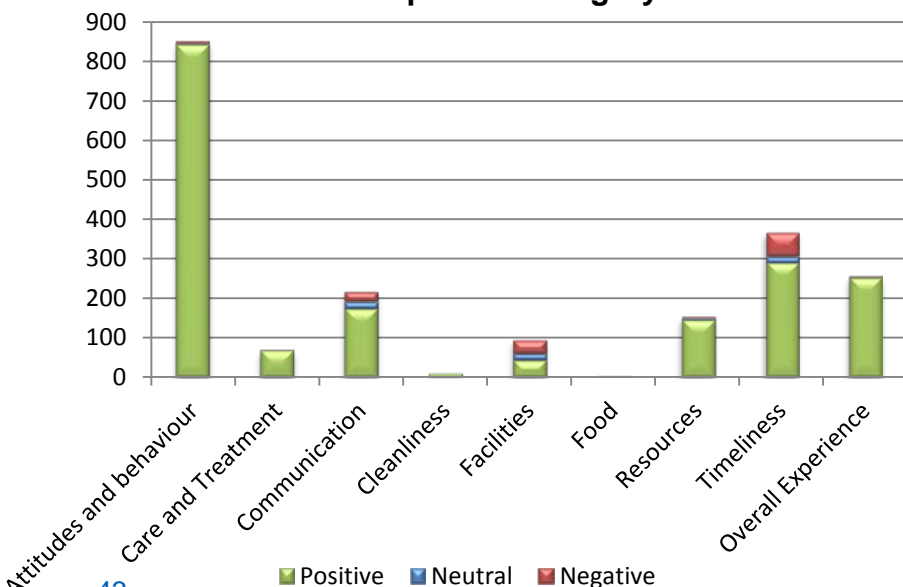
The majority of Outpatient comments are **Compliments 90.5%** (1837) **45.8%** of these refer to the **Attitudes and behaviour of ward and support staff** e.g.

*'Explanation during surgery, after-care advice, cup of tea, smile and cheerful attitude from all the staff'*  
(Vascular Studies Patient)

*'Kind Doctor was reassuring and patient'*  
(Haematology Patient)

*'The staff were kind, respectful and sensitive to needs'*  
(Gynaecology Patient)

Outpatient Category Totals



**6.4%** (131) of the total number of comments (2028) for Outpatients were **Negative**, **2.9%** (60) **Neutral** (neutral comments include suggestions for improvement) Analysis shows **Areas for improvement** are **Timeliness** and **Facilities**. **45.8%** (60) of negative comments relate to **Timeliness**; comments refer to waiting in clinic past appointment time and waiting for an initial / follow up appointment e.g.

*'Very long wait for appointment date. All staff helpful'*

*'Waiting 2 hours plus for my appointment'*

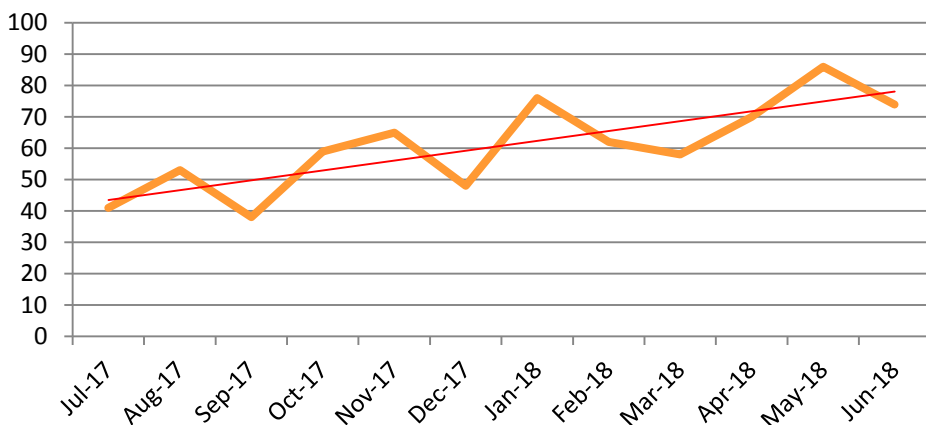
This continues as a theme from quarter 4.

**25.9%** (34) negative **Facilities** comments relate mainly to parking at the RUH main site.

*'Disabled parking often very full'*

*'Parking instructions not clear'*

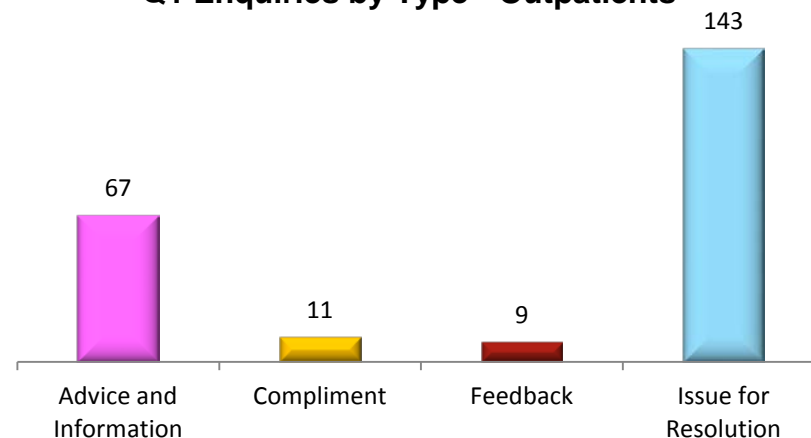
Total PALS Enquiries - Outpatients



The Total number of enquiries for Outpatients over Q1 was **230**. There is an **increase** of enquiries from Q4 which totalled 196 responses. This is an Increase of **17% (30)**.

The spike over December/January reflects the overall increase in numbers and issues requiring resolution.

Q1 Enquiries by Type - Outpatients

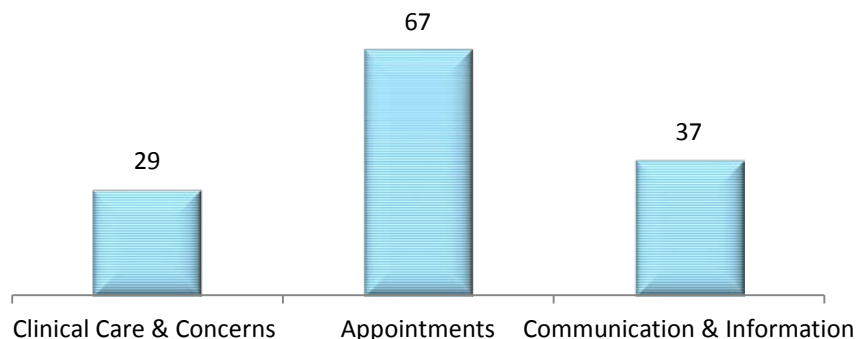


The number of **issues requiring resolution** has **increased** from 138 in Q4 to **143** in **Q1**, this is a **decrease of 4% (5)**

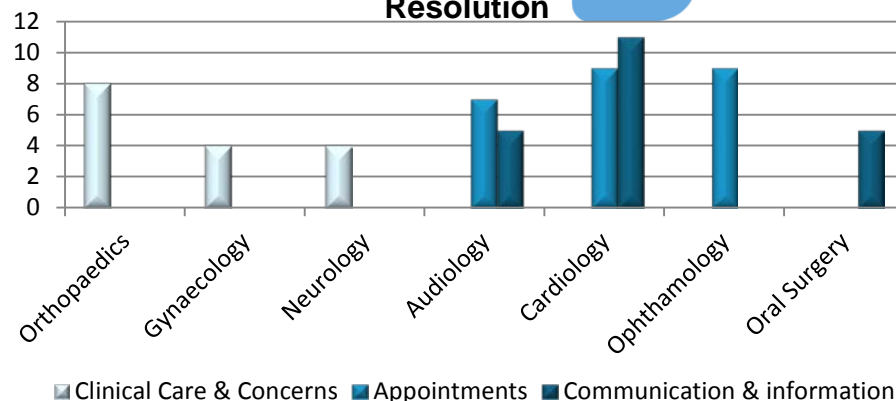
There has been a **109% increase** in the number of contacts requiring **advice and information** this quarter, from 32 in Q4 to **67** in **Q1**. The number of **compliments** received for Outpatients in relation to the care that patients have received in the hospital has **decreased 21%** from (14) Q4 to (11) Q1.

There has been a **decrease of 33%** in patient feedback from Q4 (12) to Q1 (9).

### Top Three Subjects Requiring Resolution - Outpatients



### Specialties with highest number of Issues for Resolution



#### Appointments

13 of the contacts related to appointment changes by patients, 13 – length of time for a new appointment, 13 – appointment information, 13 – length of time for a follow up appointment, 13 – cancelled appointments. The remaining 2 were split between different subject areas.

#### Clinical Care & Concerns

18 of the contacts were general enquiries / clinical care, 14 – telephone issues. The remaining 5 were split between different subject areas.

#### Communication & Information

27 of the contacts related to general enquiries / communication. The remaining 2 were split between different subject areas.

#### Clinical Care & Concerns

8 of the contacts related to the Orthopaedic department, 6 – of these were concerns with regards to patients being unhappy with the level of care they received.

#### Appointments

7 of the contacts related to the Audiology department, 5 – of these were concerns about the length of time taken to receive an appointment. 9 of the contacts related to the Cardiology department, 4 – of these were concerns about the length of time taken to receive an appointment.

#### Communication & Information

11 of the contacts related to the Cardiology department, 4 – of these were regarding lost/not acted upon test results. 5 contacts related to the Cardiology department, 5 – of these were telephone issues.

**Complaints for outpatients** are recorded within the separate divisions. Within the total number of complaints 14 were related to outpatient departments and can be broken down into the following departments:

Department	No. of complaints
ENT	4
RNHRD	2
Neurology	1
Gynaecology	1
Urology	2
Oral Surgery	1
Orthopaedics	2

The complaints for ENT all relate to concerns regarding the treatment received. One complaint also raised concerns regarding the attitude they perceived of a member of staff.





## NHS Choices website reviews from patients and their carers

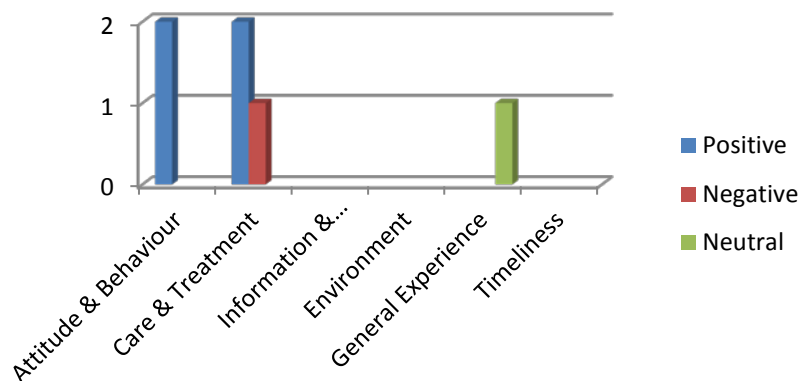
(Patient Opinion covers the same reviews as posted on NHS Choices)

### 5 patients and their families commented on 6 services provided by Outpatients across all clinical Divisions:

These posts have been divided in to 6 separate comments which are categorised by subject and sentiments and by department.

Number of comments split into subject and sentiment:

**Comments by Subject & Sentiment**

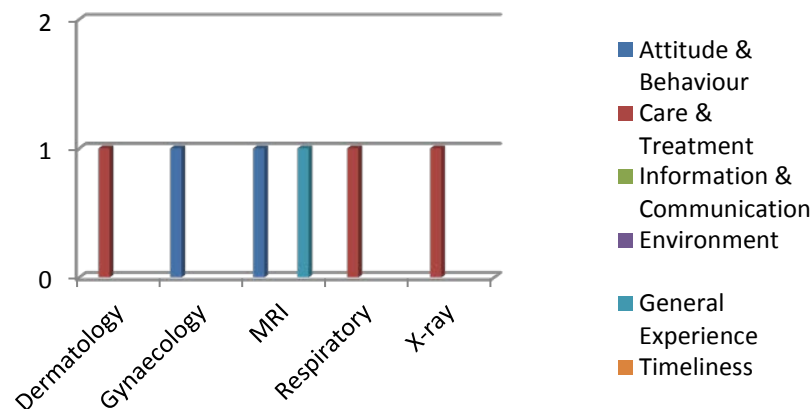


There was one neutral comment suggesting that suggest the appointment letter “could be a little clearer, i.e. it says “please arrive 45 mins before your appointment time”, it would be clearer to give the time I was asked to arrive as the actual appointment time, as could be “lost” in the letter.”

There was one negative comment about care and treatment in X-ray when a patient was unable to be seen even though they had been referred by their GP.

Number of comments split into department and subject:

**Comments by Department & Subject**



Example of a positive comment: “I live in Devon and have been referred to the Pulmonary Hypertension team at Bath. My experience to date has been nothing short of excellent. The team are efficient and helpful. Information has reached me in a timely manner and they are quick to deal with any questions that I have had. A fantastic team that are highly recommended. Other hospitals could learn a lesson from this well run department.”

Respiratory Medicine Patient

### Patient Experience Activities in Outpatient Departments

#### Project Title

**Appointment Reminder Service Review - Patient and Carer Engagement**

#### Department / Specialty

IT

#### Project Leads

Kate Hicken, IT Project Manager and Ceri Lloyd, PA to the Operational Improvement Team

#### Activity

One thing that patients and their carers tell us impacts most negatively on them is trying to communicate with the hospital about their outpatient appointments - this may be to make or change an appointment or to find out more information about a planned appointment. The hospital is reviewing the systems we use to communicate with patients about their appointments; letter, telephone, email, text, etc. To begin we want to know what patients are experiencing now when communicating with the hospital and what communication methods they would prefer in the future.

#### Status

Currently collecting through questionnaires.- Details of the resulting learning outcome and actions to improve will follow.

The Gynaecology Outpatients clinic team were voted **team of the month in May. The nomination was for the successful** introduction of a new service for the management of miscarriage which avoids separation from families/partner during a very upsetting time. The procedure is completed quickly and efficiently in an outpatient department negating the need for a hospital overnight bed and the risk of cancellation in times of peak activity.