

Report to:	Public Board of Directors	Agenda item:	7
Date of Meeting:	28 November 2018		

Title of Report:	Patient and Carer Experience Report – Quarter 2
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, Patient Advice and Liaison Service (PALS) and Main Reception Manager
Appendices	None

## 1. Executive Summary of the Report

The Patient and Carer Experience report for **Quarter 2 (July to September 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 662 enquiries during this quarter.** This is a **14% decrease** on the previous quarter (773). 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 – 68 formal complaints were received** this quarter. This compares to **66 in the previous quarter.** This is similar to the numbers received in Q1. This is the highest number of complaints since Q4 2015/16. **The Medicine Division has seen the largest increase in complaints – 45 received in Q2.** 15 of the complaints refer to care and treatment in the Emergency Department.

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

**8 complaints were re-opened this quarter which is an increase on Q1 (6 cases).** Learning and service improvement as a result of patient feedback is also included in the report. **Two cases are currently being investigated by the Parliamentary Health Service Ombudsman (PHSO).**

**3. Friends and Family Test (FFT) –the Trust received 7391 Friends and Family Test responses.** This is a **slight decrease of 3.5%** compared to Q1 (7661). **97% (7177)** of patients that completed an FFT card said that they would be

Author: Sharon Manhi, Lead for Patient and Carer Experience Document Approved by: Lisa Cheek, Director of Nursing and Midwifery	Date: 6 November 2018 Version: Final
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**Extremely Likely/Likely** to recommend the Trust to Friends and Family if they needed similar care or treatment.

There has been an **increase in the number of negative comments in Q2** with the top most commented areas being **Timeliness and Facilities**. Waiting to be seen, waiting for discharge/ medications and waiting for assistance. In **Facilities** the concerns were - ward temperature, parking and noise at night.

4. **NHS Choices** – 15 patients provided feedback about their experience of the hospital. All posts included a star rating and of these 12 rated the RUH with five stars and two with a one star rating. The posts have been categorised into separate comments: **23 positive and 2 negative**.
5. **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 a brief overview of the national patient survey programme and the change from Picker to Patient Perspective to administer the programme on behalf of the Trust.

<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 2 July–September 2018

Everyone  
Working Matters  
Together  
Making a  
Difference



## Quarter July – Sept 2018

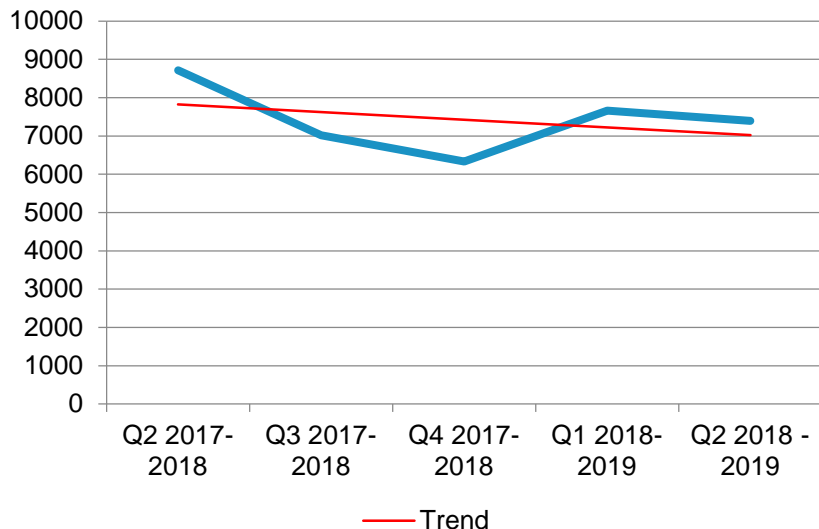
<b>Section</b>	<b>Page</b>
Trust overview	2-12
Medicine Division	13-22
Surgery Division	23-30
Women & Children's Division	31-38
Outpatient Departments	39-45

## Response totals for all services

During Quarter 2, the Trust received **7391** Friends and Family Test (FFT) responses. This represents a **decrease of 3.5%** (270 responses) on Quarter 1 (18/19) where the total was 7661, and a 24% decrease on the same Quarter 17/18.

**97%** (7177) of patients that completed an FFT card in quarter 2 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	%
Extremely Likely	6254	84.62%
Likely	923	12.49%
Neither likely nor unlikely	89	1.20%
Unlikely	20	0.27%
Extremely Unlikely	35	0.47%
Do Not Know	70	0.95%

Service	Quarter 2 Response Totals	Increase/ Decrease in Responses from Quarter 1	Distribution of Quarter 2 Trust Response Total
Medicine division	2453	↓ 465	33.2%
Surgery Division	1329	↑ 222	18.0%
Women & Children's Division	1519	↑ 7	20.6%
Outpatients	2090	↓ 34	28.3%
<b>Total</b>	<b>7391</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%)

Service	July		Aug		Sept		Q2 Summary 18/19	
	No of Responses	Response Rate	No of Responses	Response Rate	No of Responses	Response Rate	No of Responses	Response Rate
Emergency Department	302	5.0%	124	2.3%	172	3.1%	598	3.5%
Inpatient Wards	1051	35.6%	1206	42.7%	1153	40.5%	3410	39.5%
Day Case Ward	83	3.2%	82	3.2%	66	2.7%	231	3.0%
<b>Inpatient and Daycase Total</b>	<b>1134</b>	<b>20.5%</b>	<b>1288</b>	<b>23.8%</b>	<b>1219</b>	<b>22.9%</b>	<b>3641</b>	<b>22.4%</b>
Outpatient	665	2.1%	684	2.2%	741	2.5%	2090	2.3%
FFT Maternity (Antenatal)	139	37.1%	120	29.3%	86	21.2%	345	29.0%
FFT Maternity (Labour)	66	17.6%	53	13.6%	110	28.6%	229	19.9%
FFT Maternity (Postnatal)	81	25.5%	70	21.3%	83	27.4%	234	24.6%
FFT Maternity (Postnatal Community Service)	102	23.1%	74	15.6%	78	17.3%	254	18.6%
<b>Maternity Total</b>	<b>388</b>	<b>25.7%</b>	<b>317</b>	<b>19.8%</b>	<b>357</b>	<b>23.1%</b>	<b>1062</b>	<b>22.8%</b>

Department	July		Aug		Sept		Q2 Summary	
	No of Responses	Response Rate	No of Responses	Response Rate	No of Responses	Response Rate	No of Responses	Response Rate
A&E	231	5.2%	93	2.3%	123	2.9%	447	3.5%
Medical Assessment Unit	19	10.9%	9	4.5%	13	8.0%	41	7.6%
Surgical Admissions Unit	48	16.8%	20	6.5%	32	10.1%	100	11.0%
UTC	4	0.3%	2	0.2%	4	0.5%	10	0.4%
<b>Emergency Dept Total</b>	<b>302</b>	<b>5.0%</b>	<b>124</b>	<b>2.3%</b>	<b>172</b>	<b>3.1%</b>	<b>598</b>	<b>3.5%</b>

## 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.

Categories	Sentiments			
	Positive	Neutral	Negative	Grand Total
Attitudes and behaviour	3779	7	76	3862
Care and Treatment	402	5	14	421
Cleanliness	103	2	11	116
Communication	491	28	131	650
Facilities	169	63	176	408
Food	288	20	97	405
Resources	1394	53	42	1489
Timeliness	384	19	189	592
Overall Experience	677	1	4	682
<b>Grand Total</b>	<b>7687</b>	<b>198</b>	<b>740</b>	<b>8625</b>

**Positive attitudes and behaviour** – *The staff went out of their way to make my stay here very comfortable and secure and I thank them very much’ (Acute Stroke Unit Patient).*

*‘Staff are wonderful, kind and caring’ (Forrester Brown Ward Patient).*

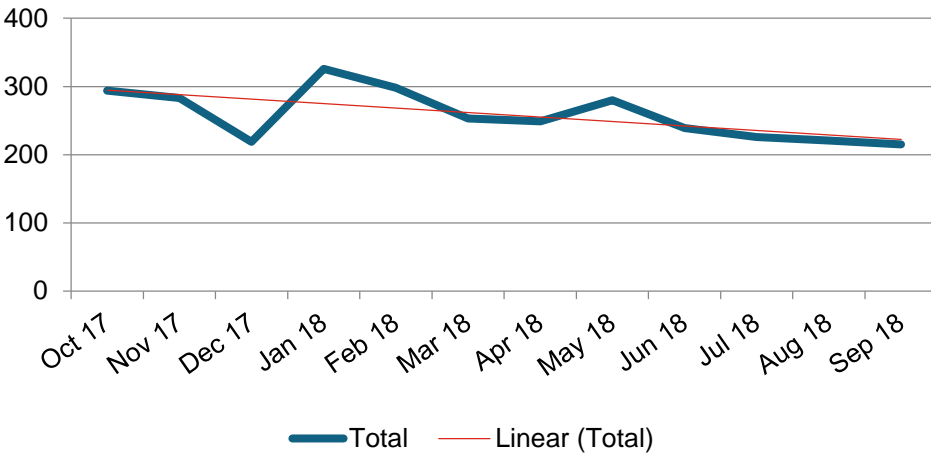
*‘Exceptional staff, making everyone feel comfortable. A unit to be very proud of’ (Neonatal Intensive Care – Parent)*

*‘Staff treat you as an individual rather than as a number. Always helpful, cheerful and make sure you understand what’s been said during consultation’ (Urology Patient).*

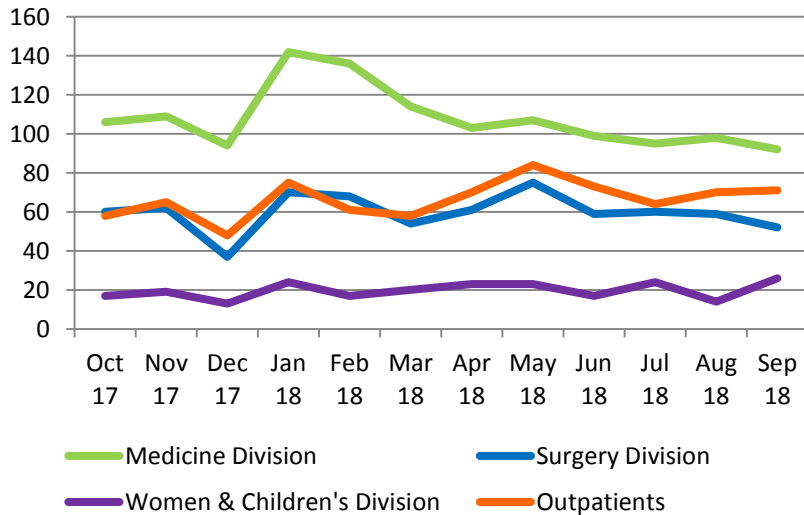
Whilst there was a decrease in the Trust response rate and the number of ‘free-text’ comments made for Q2, the number of comments categorised as negative shows an increase of 27% (Particularly - communication, facilities, food and attitudes and behaviour).

**Facilities** and **timeliness** had the highest number of negative comments in Quarter 2 18/19; the top 3 most commented on **Facility areas** are – Noise / noise at night, Ward temperature and parking . Top 3 most commented on **Timeliness areas** are: waiting to be seen, waiting for discharge/meds and waiting for assistance.

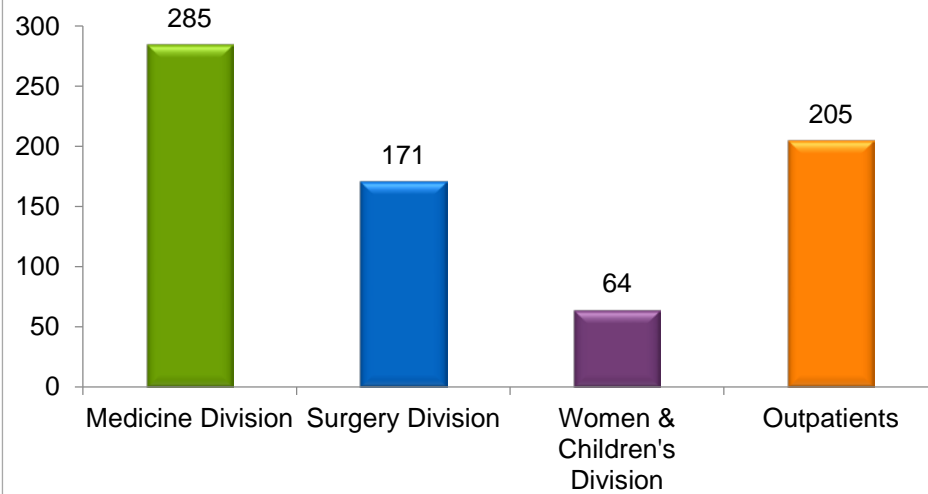
**PALS Enquiries 17/18**



**PALS Enquiries by Division 17/18**

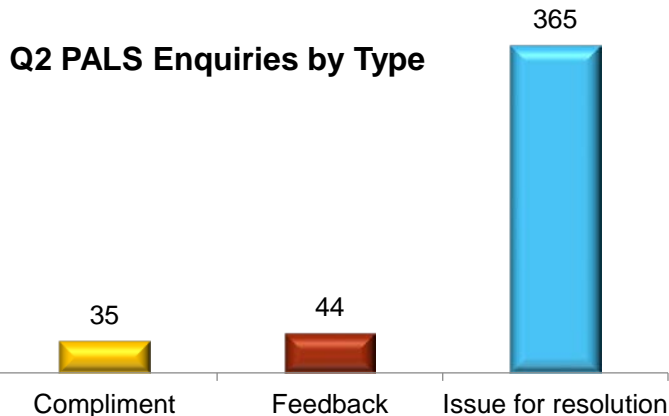


**Q2 Total PALS Enquiries**



The decrease in May/June 2018 across all Divisions reflects the overall decrease in PALS contacts. Since the decrease in Q1 the amount of PALS enquiries has remained steady with no significant fluctuations in Q2.





The PALS office received **662 enquiries in Q2**. This is a **decrease** of (113) compared to Q1 (773).

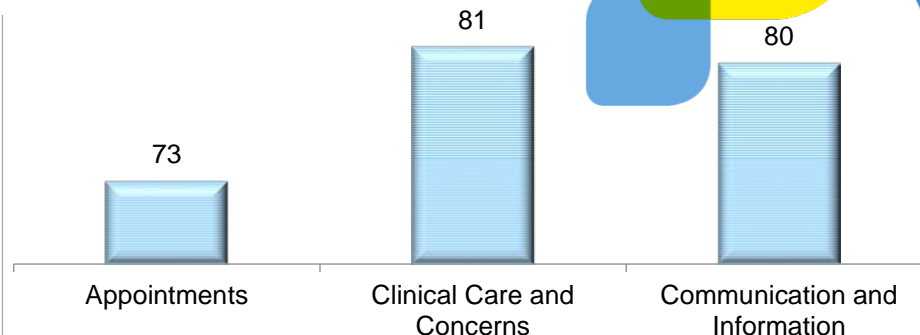
The number of **issues requiring resolution** has **decreased** from 413 in Q1 to **365 in Q2**, this is a **decrease** of 12% (48).

There has been an 18% **decrease** in the number of contacts requiring **advice and information** this quarter from 265 in Q1 to **218 in Q2**.

The number of **compliments** received by PALS in relation to the care that patients received in the hospital has **decreased** from 48 in Q1 to **35 Q2** (27%).

There has been a slight **decrease** of 6% in **feedback** from 47 in Q1 to **44 in Q2**.

### Q2 Top Three Subjects Requiring Resolution



#### Appointments

14 of the contacts related to appointment information; 13 – cancelled appointments, 10 – length of time for follow up appointment, 10 – length of time for new appointment, 8 – appointment changes by patient, 6 – follow up appointment not given. The remaining 12 were split between different subject areas with no trends.

#### Clinical Care & Concerns

32 of the contacts related to general enquiry/clinical care; 9 – quality/concerns regarding medical care, 8 – medication wait/error/availability, 5 – inappropriate unsafe discharge. The remaining 27 were split between different subject areas with no trends.

#### Communication & Information

26 of the contacts related to general enquiries/communication; 26 – telephone issues (phone not answered), 5 – discharge summary incorrect/missing/delayed, 5 – clinic letter not received. The remaining 18 were spread between different subject areas with no trend.

## Formal Complaints received

In Q2 the Trust received 68 formal complaints: Medicine Division **45**, Surgical Division **18**, and Women and Children's Division received **5**.

### 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	68			<b>134</b>

**Complaints** have **increased** slightly in Q2 2018/19. The Surgical Division has seen a significant decrease in complaints received this quarter whereas the Medicine Division has seen a large increase. Further information is included in the Surgery and Medicine Division section of this report.

There were 8 complaints **re-opened** in Q2, there were 6 for Surgical Division and 2 for the Medical Division. This compares to 2 re-opened complaints in Q1.

2 complaints were opened for investigation with the **Parliamentary Health Service Ombudsman (PHSO)**, one for Medicine and one for Surgery.

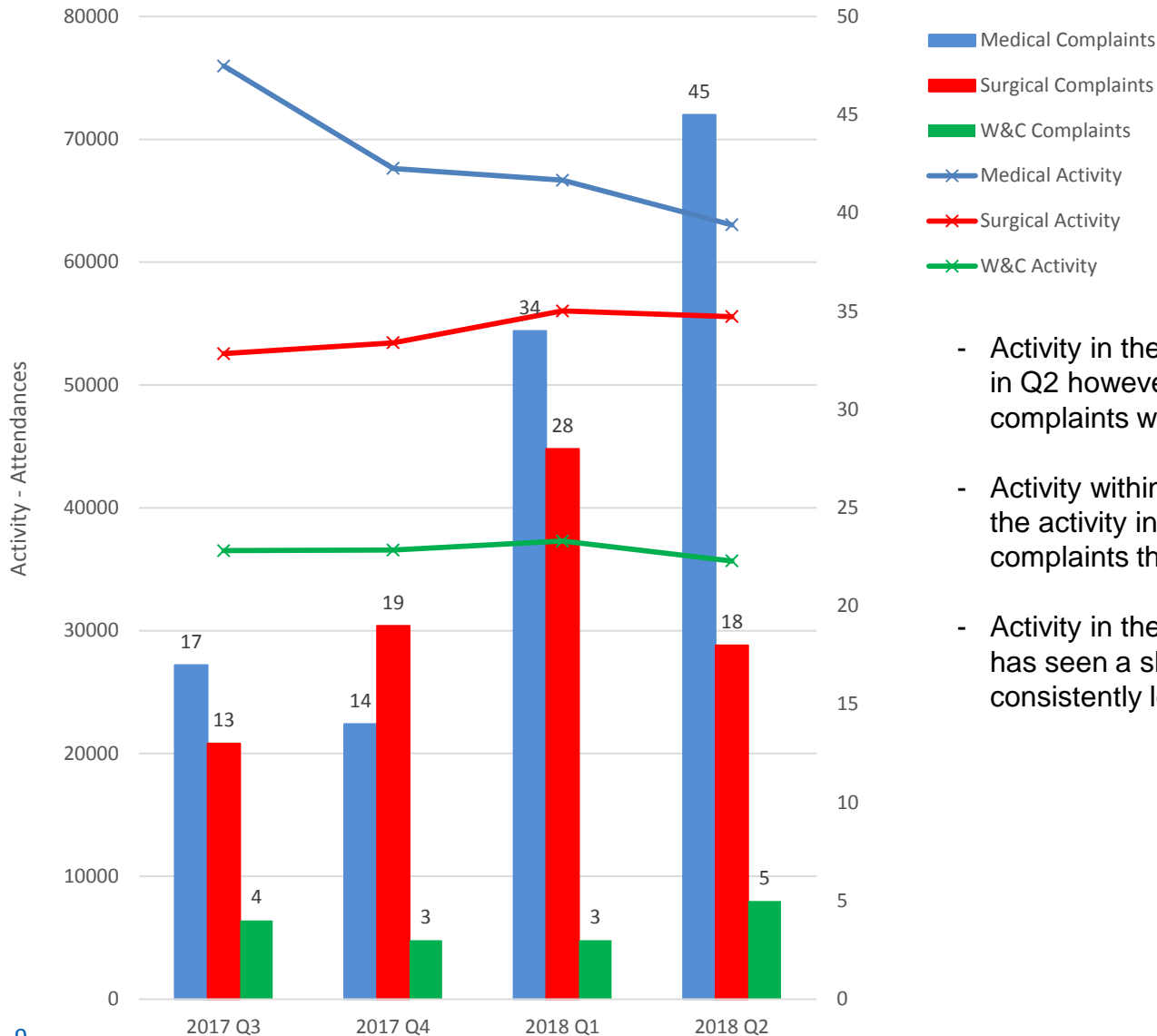
### Complaints by Category

Category of complaint	Total
Clinical Care and Concerns	41
Communication and Information	10
Admissions/transfers/discharge	3
Staff Attitude and Behaviour	2
Appointments	10
Discrimination and Safeguarding	2
<b>Grand Total</b>	<b>68</b>

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

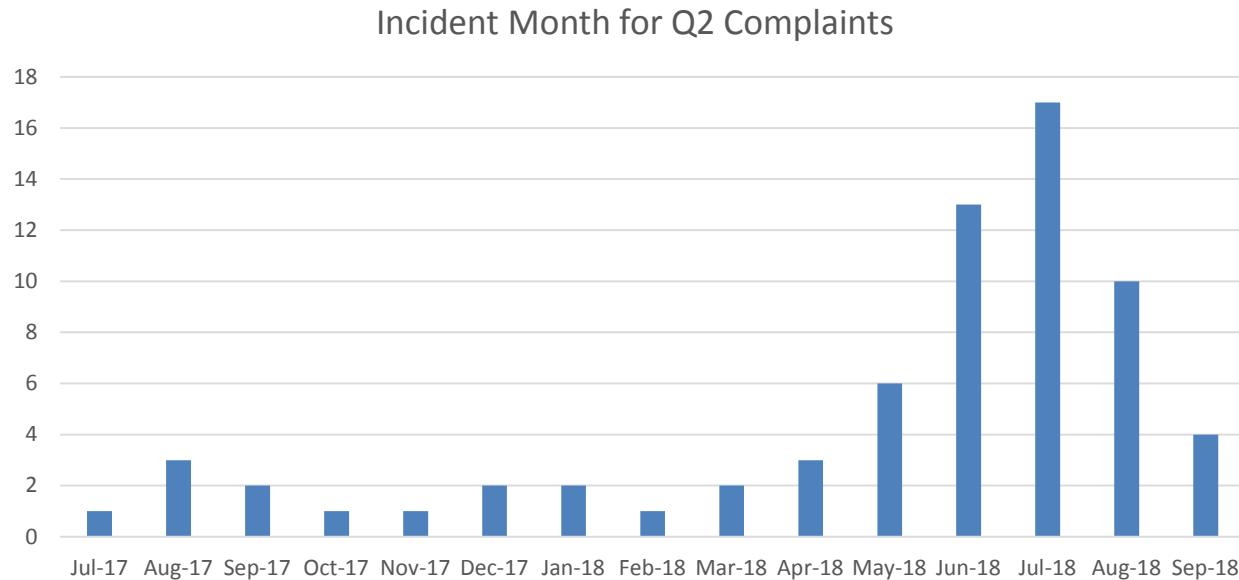
Sub Category of Clinical Care	Category Totals
Concerns regarding medical care	18
General Enquiry - clinical Care	2
Test results not acted upon	3
Wrong Diagnosis	2
Co-ordination of medical treatment	3
Competence/knowledge of staff	6
Wait for Treatment/ Treatment cancelled/ Treatment against will	3
Inappropriate care and treatment/ Error in medication	3
Shortage/Availability of staff	1
<b>Grand Total</b>	<b>41</b>

## Division activity in comparison to Divisional Complaints



- Activity in the Medical Division decreased further in Q2 however this was not reflected in complaints which saw a substantial increase.
- Activity within the Surgical Division was similar to the activity in Q1. The Division received fewer complaints this quarter.
- Activity in the Women and Children's Division has seen a slight dip. The Division has a consistently low level of complaints.

## Incident dates for Q2 complaints

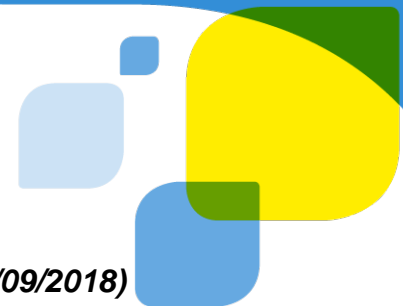


- Of the 68 complaints received in Q2 2018/19, 31 (45%) incidents occurred within the quarter (July- Sept).
- 22 (32%) related to incidents that occurred in Q1 2018/19 with June showing the highest number.
- The remaining 15 incidents covered the period from July 2017 to March 2018.

## NHS Website reviews from patients and their carers

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

**Please note:** At the beginning of quarter 2, as part of a programme of work to improve their services, NHS Digital removed the 'NHS Choices' logo from the NHS website [www.nhs.uk](http://www.nhs.uk). During quarter 2 we have seen a 50% reduction in the number of people leaving experience reviews for the RUH.

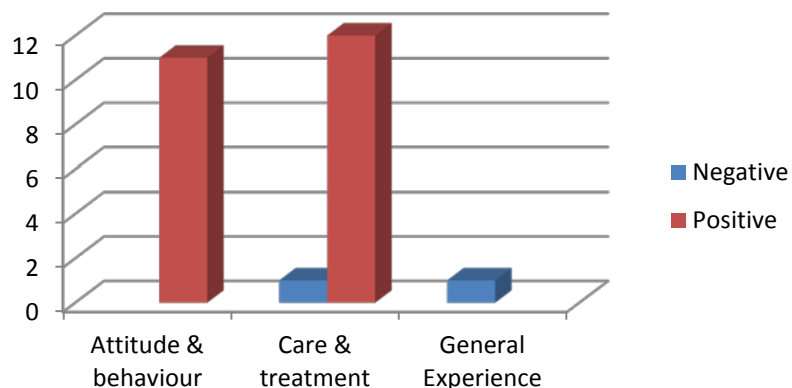


Based on 199 ratings for this hospital (snapshot as of 30/09/2018)

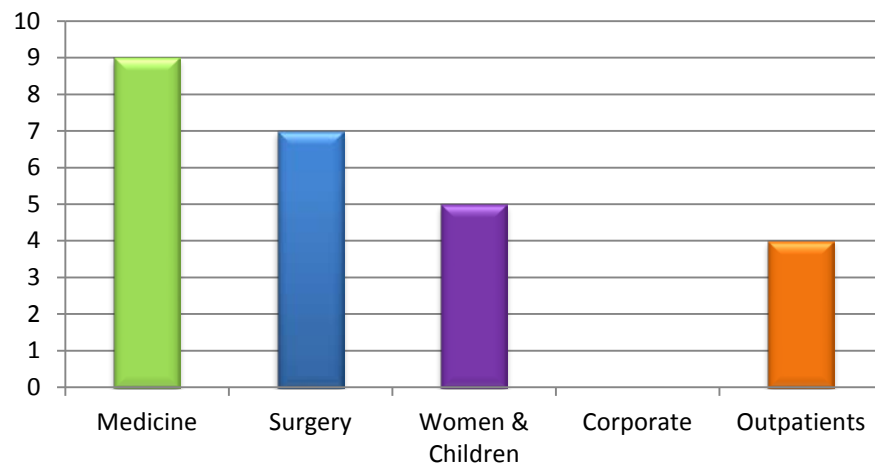
Cleanliness ★★★★★ (183 ratings)	Staff co-operation ★★★★★ (181 ratings)	Dignity and respect ★★★★★ (181 ratings)	Involvement in decisions ★★★★★ (180 ratings)	Same-sex accommodation ★★★★★ (145 ratings)
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15 patients and their families posted feedback about their experiences of 15 services provided by the RUH during quarter 2. All posts included a star rating: of these 12 rated the RUH with five-stars; one with four-stars and two with a one-star rating. The 15 posts have been categorised into 25 separate comments: 23 positive and 2 negative. The comments have also been categorised by Division, in addition relevant comments are identified by Outpatient Department.

Comments by subject & Sentiment



Comments 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 **July** Pat shared her experience of being a patient and a volunteer at the hospital. She reflected on the changes that she has seen over the 70 years of the NHS saying that it's the little things that staff do that make a difference to patient experience.

There was **no Board meeting in August.**

In **September** Peter, a patient on Parry ward shared his experience of having Type 1 Diabetes and managing his insulin medication whilst in hospital. The Diabetes specialist team are piloting the self-administration of insulin in Type 1 Diabetes patients across 6 wards in the Trust. This includes a risk assessment completed by the patient and member of staff; a yellow patient drug chart (completed by the patient). The aim of this project is to improve insulin safety by reducing the number of insulin errors and patients having 'hypo's' caused by low sugar levels.



### National Patient Survey programme

In Q2 the results of two National Surveys were received – Maternity and Cancer Patient Experience Surveys.

These will be presented to the Board in November and December.

The NHS Urgent and Emergency Care Survey 2018 is starting on 1<sup>st</sup> October with the fieldwork taking place between October and March 2019. The survey name has been changed from *Emergency Department Survey* to *Urgent and Emergency Care Survey*, to reflect the introduction of two separate questionnaires.

The next survey on the National Patient Survey programme to be carried out is the Children and Young People's Survey which was last undertaken in 2016. The fieldwork for this survey is due to start in February 2019.

From next year, the Trust has **negotiated a new 3 year contract in partnership Great Western Hospital, Swindon to work with Patient Perspective to administer the national survey programme.** Patient Perspective are a CQC approved contractor. This has resulted in savings for the Trust of approximately £10k per year.

# Patient and Carer Experience report

## Medicine Division

Quarter 2 July – September  
2018

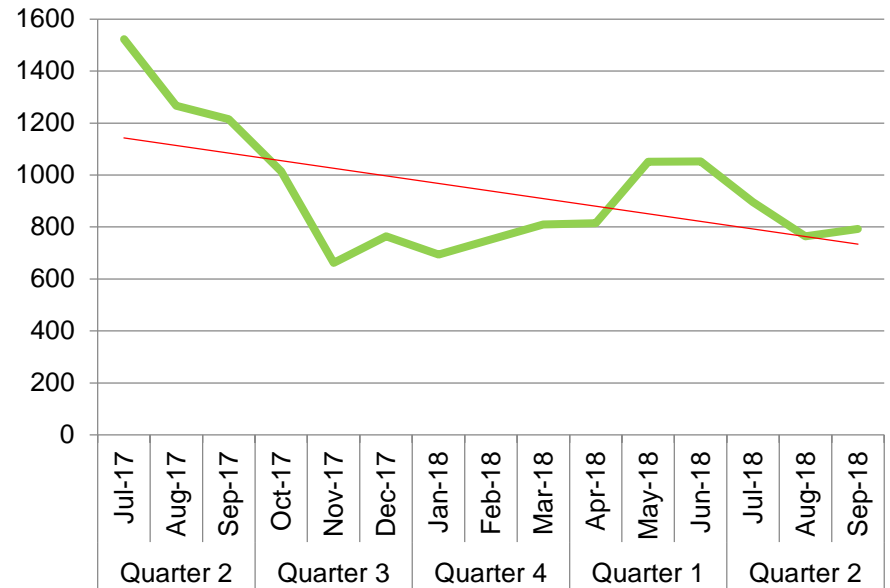
## Medicine Division Response Totals

During Quarter 2 Medicine Division received **2453** Friends and Family Test (FFT) **responses**. This represents a **decrease of 15.94%** (465 responses) on quarter 2 18/19, where the total was 2918.

**96%** (2360) 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	2038	83.08%
Likely	322	13.13%
Neither likely nor unlikely	34	1.39%
Unlikely	9	0.37%
Extremely Unlikely	15	0.61%
Do Not Know	35	1.43%

Medicine Division Response Totals





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

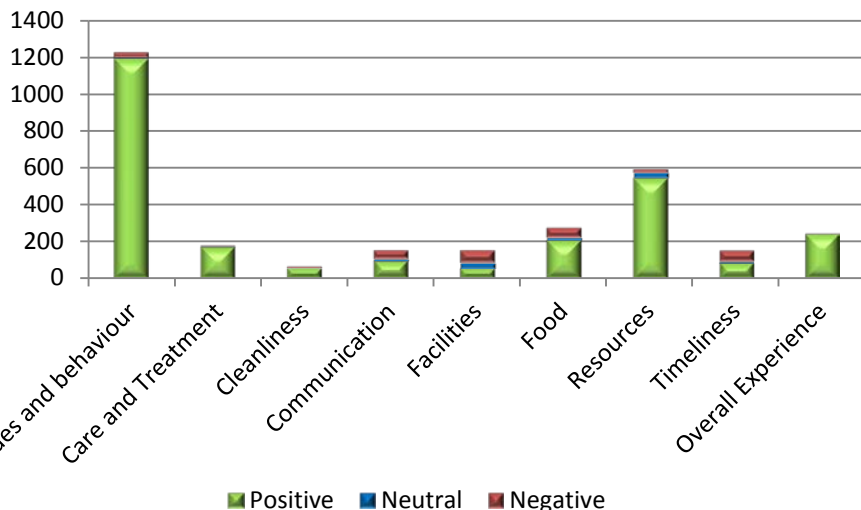
The majority of Medicine Division comments are **Compliments 88%** (2670) **45%** of these refer to the **Attitudes and behaviour** of ward and support staff e.g.

*'The staff went out of their way to make my stay here very comfortable and secure and I thank them very much'*  
(Acute Stroke Unit Patient)

*'Doctor made sure everything was done consecutively to save going backwards and forwards. Very thorough, professional and kind'* (Emergency Department Patient)

*'All the staff were very attentive and caring and could not do enough for you'* (William Budd Day case patient)

Medicine Division Q2 Category Totals



**9%** (288) of the total number of comments (3049) for Medicine Division were **Negative**, **3%** (91) **Neutral** (neutral comments include suggestions for improvement) Analysis shows the main **Areas to improve are Facilities and Timeliness. 24%** (68) of the **negative** comments relate to **Facilities**, the majority refer to being disturbed by noise and lights and temperature e.g.

*'Night time - lights on and off all night. Noisy too'*

*'Noise levels intolerable - often nurses in bay who don't realise how loud they are'*

*'Ward was too hot - unbearable at times'*

The remaining facilities comments refer to:- general décor, parking, bathrooms and showers.

**20%** (58) of the **negative** comments relate to **Timeliness**, the majority relate to general waiting / waiting to be seen, waiting for assistance / call bell to be answered / being forgotten, waiting for discharge / medication and waiting to see a Doctor e.g.

*'Waiting times not good'*

*'Medication delay on discharge'*

*'Would have been nice to see the Doctor sooner'*

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

Whilst there was a decrease in the overall response rate for Medicine division, there was an increase **27%** (62) in the number of comments categorised as negative. The main areas to improve remain the same as Q1. Analysis shows that there are some wards which have the highest number of comments categorised as negative in Q1 and Q2 for facilities and timeliness.

Consideration should be given to the fact that they are small numbers, however these wards also show an increase in negative comments for these categories i.e.

### Facilities:

Ace ward  
 Cardiac Ward  
 Parry Ward  
 Respiratory Ward

Noise at night is a common negative facilities theme across these wards in particular for Q1 and Q2.

### Timeliness

ACE Ward  
 Cheselden

Call bells/ assistance and discharge / meds is a theme that continues from Q1.



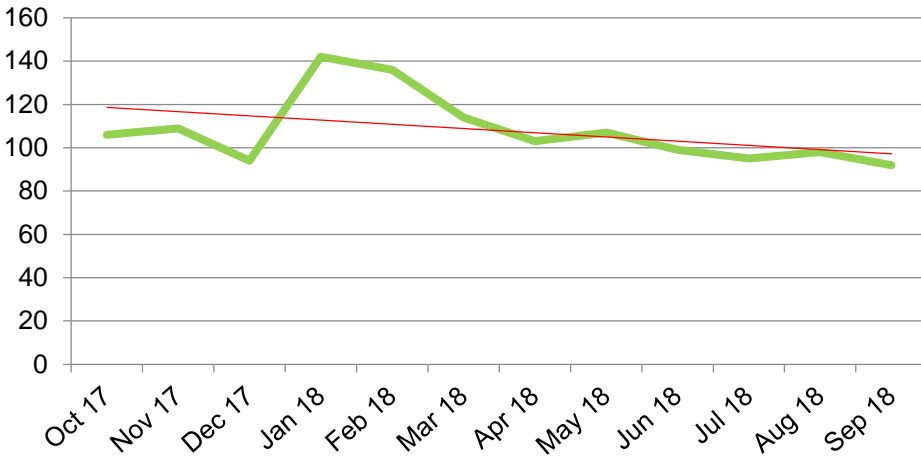
*'Everybody here has been so kind and overworked. Nights were noisy though (staff were very patient). Marvellous.'* ACE patient

*'The care and attention from all nursing staff and clinicians was second to none! Ward was stuffy at times - more ventilation would have been useful.'* Cardiac Ward patient

*'Very caring staff. Quicker response time to buzzers needed.'* Parry Ward patient

*'The nurses were very good. Lights could have been turned down earlier. All in all a nice ward.'* Respiratory Ward patient

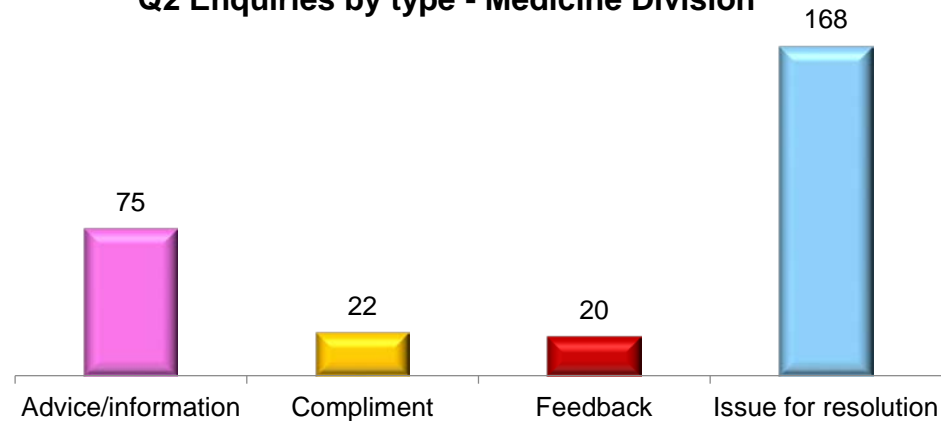
### Total PALS Enquiries Medicine Division



The Total number of enquiries for the Medicine Division over **Q2** was **285**. There is a decrease of 24 enquiries from Q1 which totalled 309 enquiries. This is a **decrease** of **8%**.

Over Q1 and Q2 the number of PALS enquiries for the medicine division have remained stable with no significant fluctuations. The spike over December/January reflects the overall increase in numbers and issues requiring resolution.

### Q2 Enquiries by type - Medicine Division

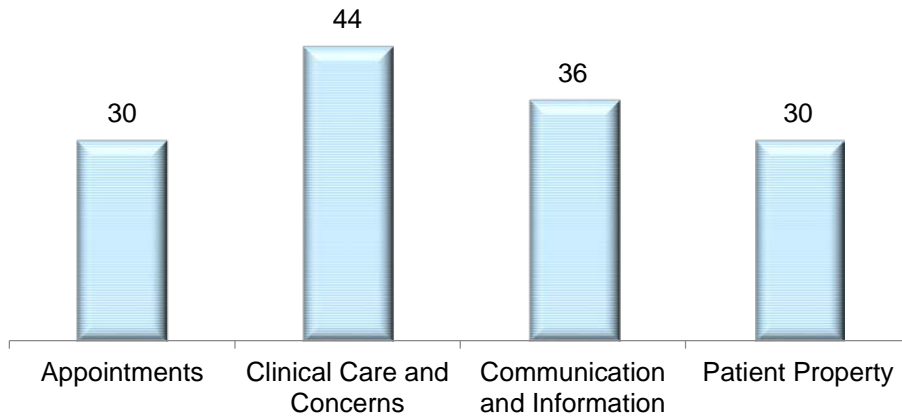


The number of **issues requiring resolution** has **decreased** from 183 in Q1 to **168** in **Q2**, this is a **decrease of 8%** (15).

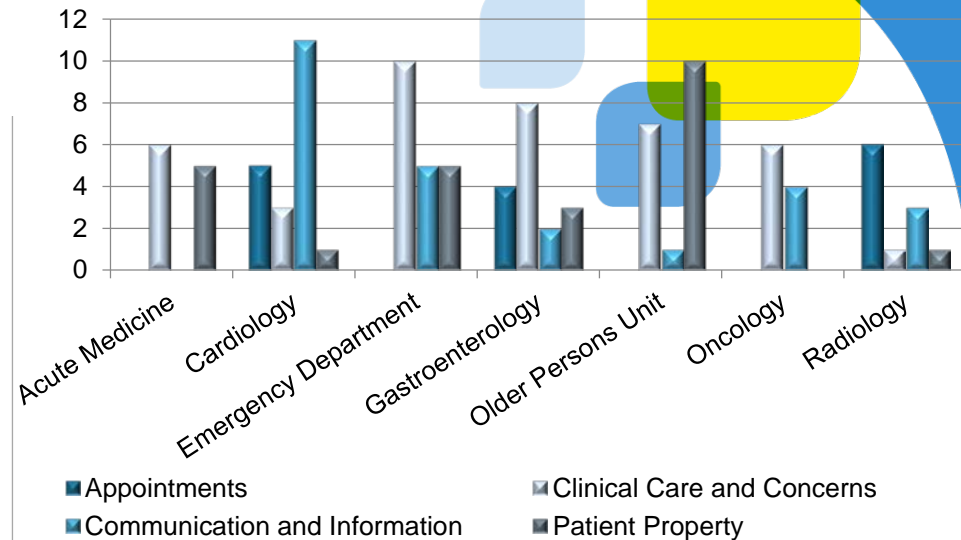
There has been a **3% increase** in the number of contacts requiring **advice and information** this quarter, from 73 in Q1 to **75** in **Q2**.

The number of **compliments** received for the Medicine Division in relation to the care that patients have received in the hospital has **decreased** 31% from 32 in Q1 to **22** in **Q2**. There has been a **decrease** of **5%** in patient **feedback** from 21 Q1 to **20** in **Q2**.

### Top Four Subjects Requiring Resolution - Medicine Division



### Specialities with highest number of issues for Resolution



#### Clinical Care & Concerns

11 of the contacts related to general enquiries clinical/care; 6 – medication error/timing/availability, 4 – inappropriate/unsafe discharge, 4 – quality/concerns regarding medical care, 3 – end of life concerns. The remaining 16 were spread across different subject areas with no trend.

#### Appointments

6 of the contacts related to the cancellation of appointments; 7 – appointment information, 4 – length of time for a new appointment, 3 – length of time for follow up appointment, 3 – appointment cancelled by patient. The remaining 10 were split across different subject areas with no trends.

#### Communication & Information

13 of the contacts related to telephone issues (phone not answered); 10 – general enquiries communication, 3 – discharge summary incorrect/missing/delayed, 3 – clinic letter not received. The remaining 7 were spread across different subject areas with no trend.

#### Patient Property

29 of the contacts related to loss of patient property/valuables with the patient and 1 contact related to stolen patient property/valuables with the patient.

#### Trends

#### Appointments

3 contacts related to the Cardiology department – appointment information. 3 related to the Radiology department - cancelled appointments.

#### Clinical Care & Concerns

3 related to the Oncology department – medication wait/availability.

#### Communication & Information

7 contacts related to Cardiology – telephone issues (phone not answered).

#### Patient Property

10 contacts related to Older Persons Unit – lost property/valuables with patient. 5 related to the Emergency department – lost property/valuables with patient. 5 related to Acute Medicine – lost property/valuables with patient.

**Medicine Division** received **45 formal complaints in Q2**

Year	Q1	Q2	Q3	Q4
2017/18	24	22	17	14
2018/19	34	45		

Complaints for the **Medicine Division** in Q2 **increased** by **32%** (9) since the previous quarter. 33% (15) were made in relation to the Emergency Department. This compares to 10 for the Emergency Department in Q1.

Medicine Division had 2 **re-opened** complaints in Q2 with complainants requesting to meet with Clinicians to discuss the complaint response in more detail. One complaint was opened for investigation by the **PHSO** in Q2.

Medicine Division Complaint response performance:

	No. of complaint
Closed within 35 day target	19 (45%)
Breached 35 Day target	23 (55%)
<b>Total</b>	<b>42</b>

**Learning points:**

- Listening to relatives and carers who know the patient the best.
- Case shared with junior medical staff to ensure correct prescribing of insulin.
- Patients should be kept informed when there is a delay in being seen for their appointment or procedure.
- Learning around how staff meet the needs of patients who have experienced trauma.
- Raise staff awareness in working with patients with learning difficulties.

Location and Category of Complaint	Total
<b>Acute Medicine</b>	<b>5</b>
Clinical Care and Concerns	3
Communication and Information	1
Discrimination and Safeguarding	1
<b>Cardiology</b>	<b>5</b>
Appointments	2
Clinical Care and Concerns	2
Communication and Information	1
<b>Dermatology</b>	<b>1</b>
Appointments	1
<b>Diabetes</b>	<b>2</b>
Admissions/transfers/discharge procedure (In Patients/ED)	1
Clinical Care and Concerns	1
<b>Emergency Department</b>	<b>15</b>
Appointments	1
Clinical Care and Concerns	11
Communication and Information	2
Staff Attitude and Behaviour	1
<b>Gastroenterology</b>	<b>3</b>
Appointments	3
<b>Neurology</b>	<b>2</b>
Clinical Care and Concerns	2
<b>Older Persons Unit</b>	<b>3</b>
Admissions/transfers/discharge procedure	1
Communication and Information	2
<b>Radiology</b>	<b>4</b>
Clinical Care and Concerns	4
<b>Respiratory Medicine</b>	<b>4</b>
Clinical Care and Concerns	3
Communication and Information	1
<b>Stroke</b>	<b>1</b>
Clinical Care and Concerns	1
<b>Grand Total</b>	<b>45</b>

## Further analysis of Emergency Department Complaints

The Emergency Department (ED) received 15 complaints in Q2. This is an increase of 5 from the previous quarter. Activity for the ED department for both admitted and not admitted patients remained consistent in Q2 in comparison to Q1. However, Q1 and Q2 saw a 9% increase in activity compared to Q4 in 2017/18.

ED Activity	Q3	Q4	Q1	Q2
Admitted	7142	7200	7038	7149
Not Admitted	11135	10414	12344	12238
Total	18277	17614	19382	19387

### Themes from Emergency Department Complaints:

- Delays in assessment and treatment.
- Attitude of the staff (nursing/reception/doctors identified)
- Patient feeling that they were not properly examined and then discharged without proper diagnosis or treatment.
- Inappropriate discharge
- 2 x missed diagnosis.
- Unsafe discharge of patient who was a risk of harm to self.
- Incorrect treatment given.
- Patient feeling there was a lack of care.



At the time of writing this report (5<sup>th</sup> November) there have been no complaints for the Emergency Department since the end of September 2018.



## NHS Website reviews from patients and their carers

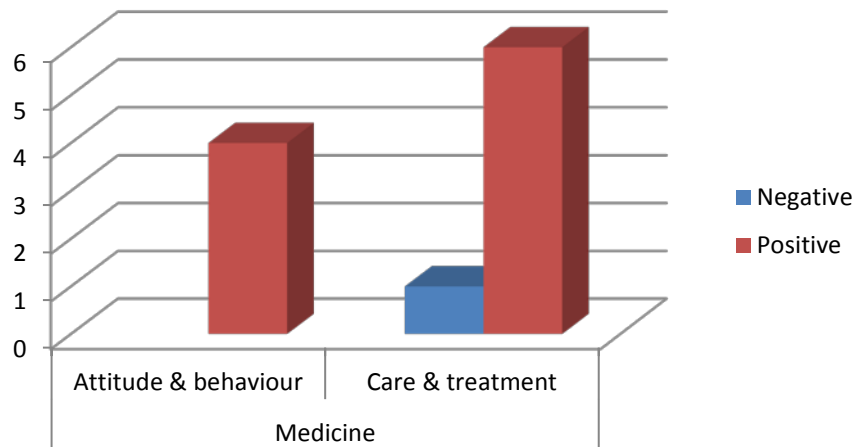
(Patient Opinion covers the same reviews as posted on NHS Website)

### 8 patients and their families commented on 5 services provided by Medicine Division:

These posts have been divided into 11 separate comments which are categorised by subject and sentiments and by department.

Number of comments split into subject and sentiment:

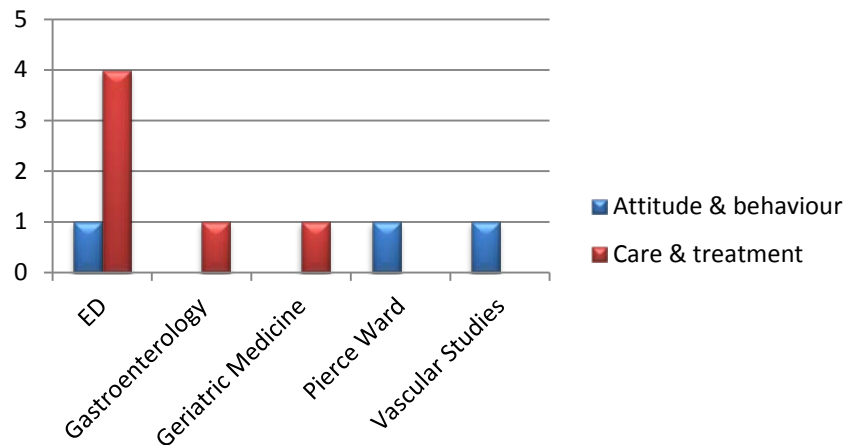
Comments by Subject & Sentiment



There was one negative comment regarding the Medicine Division this related to inpatient care and treatment in Geriatric Medicine.

Number of comments split by department and subject:

Comments by Department & Subject



ED received seven positive comments five of these in regard to the care & treatment delivered by staff in the department: *“I was attacked by wasps after disturbing their nest and was stung in the eyes, arms, legs and feet. I was unable to open my eyes. When we arrived at around 21.00hrs I was taken immediately for treatment. The reception, nurse and doctor were excellent and treated me well. I would like to thank all involved for the way I was treated and looked after.”*

ED Patient

## Patient Experience Activities in Medicine Division

### Project Title

#### **Dementia Care at the RUH**

#### Department / Specialty

Dementia Coordinators

#### Project lead/s

Dee Scruton, Theresa Hegarty, Maggie Depledge, Astrid Siddorn

#### Activity

To collect carer/ family/ friend experience feedback of dementia care provided for the patient and whether in their experience it meets the patient's needs.

#### Status

A questionnaire is currently being run as a pilot and the responses will be analysed before finalising the questionnaire.

### Project Title

#### **Ongoing review of patient experience of the new Oncology Therapy Service**

#### Department / Specialty

Physiotherapy / Occupational Therapy

#### Project lead/s

Regitse Lewis Macmillan Specialist Physiotherapist, Kirsty Hastie Specialist Occupational Therapist, Katie Young Physiotherapist

#### Activity

Using a questionnaire and telephone interviews to collect patient experience of this new service to understand the impact of the service on patients and how this changes over time.

#### Status

The questionnaire has been developed and collection is being planned.



# Patient and Carer Experience report

## Surgery Division

Quarter 2 July – September  
2018

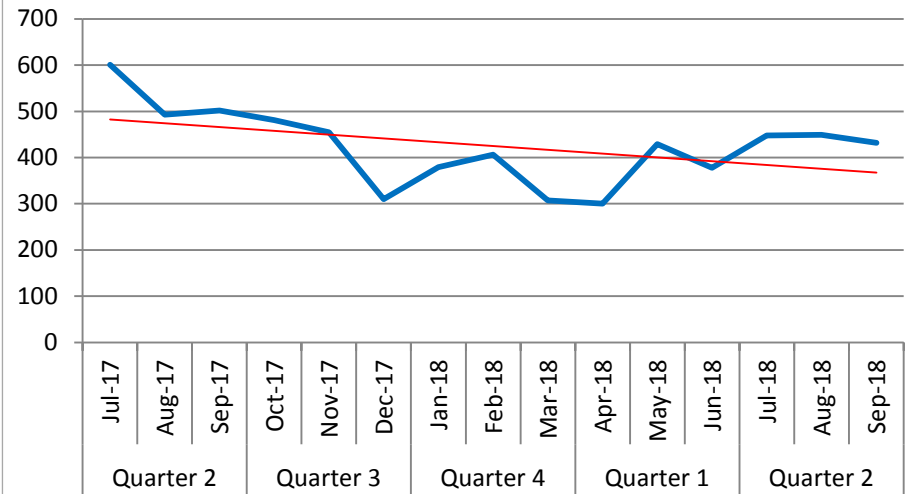
## Surgery Division Response Totals

During Quarter 2 Surgery Division received **1329** Friends and Family Test (FFT) **responses**. This represents an **increase of 20.05%** (222 responses) on quarter 1 18/19, where the total was 1107.

**97%** (1288) 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	1116	83.97%
Likely	172	12.94%
Neither likely nor unlikely	17	1.28%
Unlikely	3	0.23%
Extremely Unlikely	6	0.45%
Do Not Know	15	1.13%

Surgery Division Response Totals



## Surgery Division ‘free-text’ Categories and Sentiments

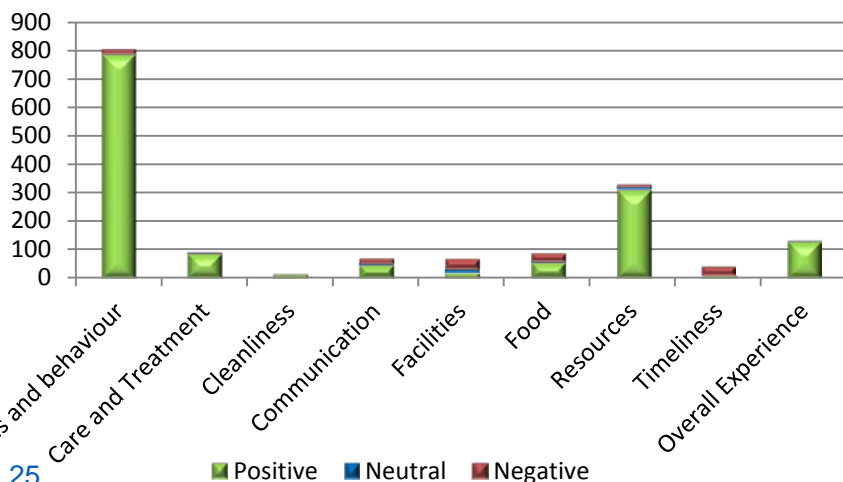
The majority of Surgery Division comments are **Compliments 89%** (1467) 54% of these refer to the **Attitudes and behaviour of ward and support staff** e.g.

*‘Very friendly, helpful staff. Always happy to help and polite. Attentive and very happy to listen and advise. Keep up the good work!’* (Robin Smith Ward patient)

*‘Staff are wonderful, kind and caring’*  
(Forrester Brown Ward Patient)

*‘Very efficient staff and so friendly with positive attitudes. Nothing too much trouble for them’*  
(Surgical admissions Unit)

### Surgery Division Q2 Category Totals



**9%** (152) of the total number of comments (1657) for Surgery Division were **Negative**, **2%** (38) **Neutral** (neutral comments include suggestions for improvement) Analysis shows the main **Areas for improvement** are **Facilities, Timeliness and Food 25%** (38) of the negative comments relate to **Facilities**; mainly referring to noise at night (other patients, staff, bins), the remaining facilities comments are a mixture of décor/space, temperature and toilets e.g.

*‘Noise control at night would be nice’*

*‘A very busy and noisy ward - no night of undisturbed sleep’*

**22%** (33) **Timeliness, negative** comments are a mixture of:- general waiting, waiting for surgery/ medication / discharge, waiting for pain relief, waiting for assistance / answer to call bell, being woken up/ timing of food / medication e.g.

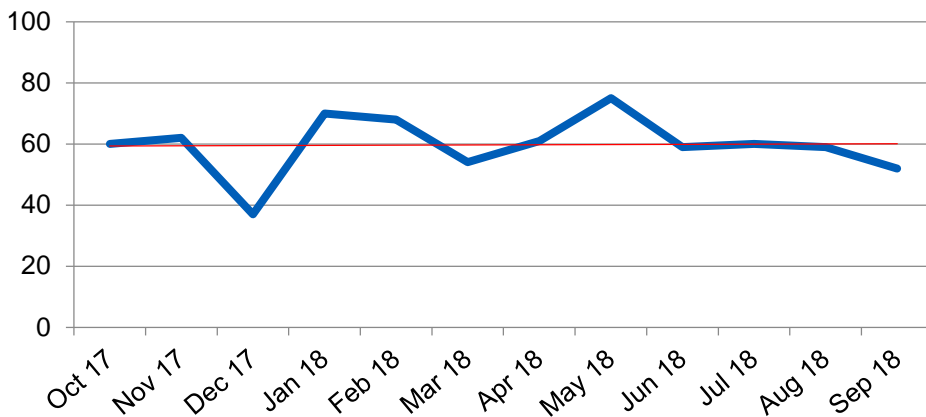
*‘The wait for surgery was very long but this was understandable’*

*‘had to wait a very long time for medication’*

**20%** (30) **Food, negative** comments are mainly general, the remaining comments are a mixture relating to choice, quality, temperature, e.g.

*‘Food is dreadful, probably delays healing’*

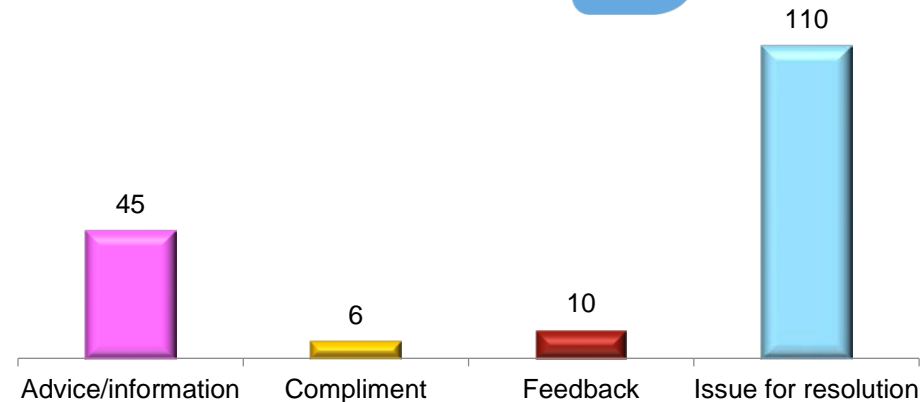
**Total PALS Enquiries Surgery Division**



The Total number of enquiries for the Surgery Division over **Q2** was **171**. There is a decrease of 28 enquiries from Q1 which totalled 199 responses. This is a decrease of 14%.

Since Q1 the number of PALS Enquiries in Q2 has decreased and remained stable. The spike over December/January reflects the overall increase in numbers and issues requiring resolution.

**Q2 Enquiries by Type - Surgery Division**



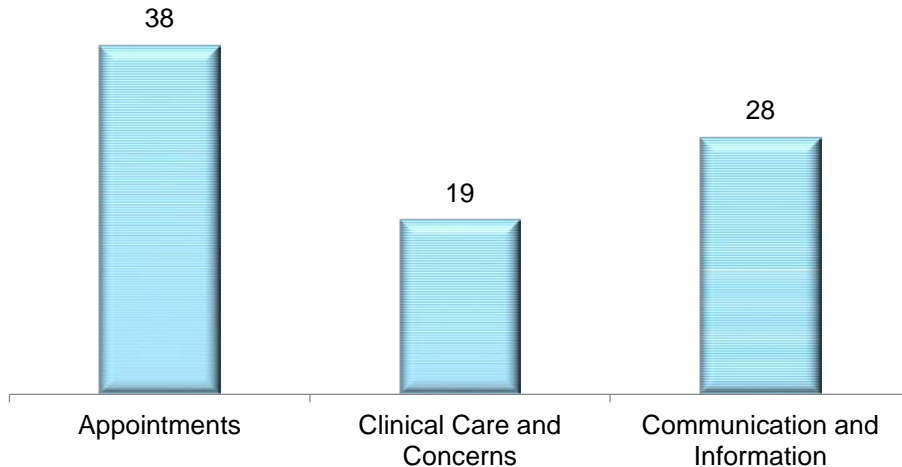
The number of **issues requiring resolution** has **decreased** from 134 Q1 to **110** in **Q2**, this is a decrease of 18%.

There has been a 16% **decrease** in the number of contacts requiring **advice and information** this quarter, from 54 in Q1 to **45** in **Q2**.

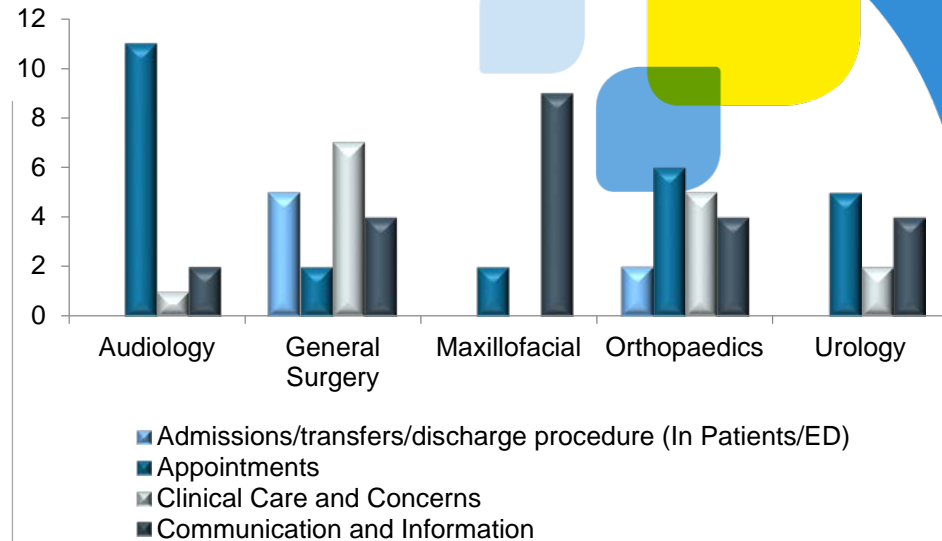
The number of **compliments** received for the Surgery Division in relation to the care that patients have received in the hospital has **increased** 20% from 5 in Q1 to **6** in **Q2**.

There has been a 67% decrease in the contacts providing **feedback** from 6 in Q1 to **10** in **Q2**.

**Top Three Subjects Requiring Resolution - Surgery Division**



**Specialities with the highest number of Issues for Resolution**



**Appointments**

7 of the contacts related to cancellations of appointments; 6 – length of time for follow up appointment, 6 – appointment information, 5 – appointment change by patient, 4 – follow up appointment not given, 4 – length of time for new appointment. The remaining 6 were spread across different subject areas with no trend.

**Clinical Care & Concerns**

11 of the contacts were general enquiries clinical care. The remaining 8 were spread across different subject areas with no trend.

**Communication & Information**

7 of the contacts were general enquiries communication, 12 – telephone issues (phone not answered), 9 – spread across different subject areas with no trend.

**Trends**

**Admissions/transfers/discharge procedure (In Patients/ED)**

3 of the contacts related to General Surgery – discharge summary incorrect/missing/delayed.

**Appointments**

3 of the contacts related to the Audiology department – length of time for new appointment.

**Clinical Care & Concerns**

No trends across the Specialities.

**Communication & Information**

9 of the contacts related to Maxillofacial – telephone issues (phone not answered).

## QUARTER 2: PATIENT AND CARER EXPERIENCE REPORT - COMPLAINTS

In Q2 the Surgery Division received **18 formal complaints**.  
Complaints in **comparison** to previous quarters:

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

Complaints received in 2018/19 Q2 decreased by 32% from the previous quarter. Orthopaedics received 5 complaints (28%) of complaints for the Division.

The Surgery Division had **6 re-opened** complaints. Complainants were either dissatisfied with the Trust's response or had further questions. One complaint was opened for investigation by the **PHSO** in Q2.

Surgery Division Complaint response performance:

	No. of complaints
Closed within 35 day target	9 (32%)
Breached 35 Day target	19 (68%)
<b>Total</b>	<b>28</b>

### Learning points:

- Safety of the drugs trolley
- Staff reminded of need to confirm bed requirements with the community hospital.
- It is important for nursing and clinical staff to listen to family members as they know the patient better than anyone, especially when they are not 'as they would normally be.'
- Patient's discharge from outpatients could have been reinstated without referral from GP.

Location and category of complaint	Total
<b>CRPS (Chronic Regional Pain Syndrome Service)</b>	<b>1</b>
<b>Clinical Care and Concerns</b> Quality/concerns regarding Medical Care	<b>1</b>
<b>Day Surgery</b>	<b>1</b>
<b>Staff Attitude and Behaviour</b> Inappropriate/insensitive information/diagnosis	<b>1</b>
<b>General Surgery</b>	<b>3</b>
<b>Clinical Care and Concerns</b> Competence/knowledge of staff Co-ordination of medical treatment Treatment against will	<b>3</b>
<b>Ophthalmology</b>	<b>3</b>
<b>Appointments</b> Appointment information, date, time, location	<b>1</b>
<b>Clinical Care and Concerns</b> General Enquiry - Clinical Care Quality/concerns regarding Medical Care	<b>2</b>
<b>Oral Surgery</b>	<b>1</b>
<b>Appointments</b> Length of time for new appointment	<b>1</b>
<b>Orthopaedics</b>	<b>5</b>
<b>Admissions/transfers/discharge procedure</b> Inappropriate/unsafe Discharge	<b>1</b>
<b>Clinical Care and Concerns</b> Competence/knowledge of staff Quality/concerns regarding Medical Care Shortage/Availability of staff	<b>4</b> 1 2 1
<b>Pain Clinic</b>	<b>1</b>
<b>Communication and Information</b> Inappropriate/Insensitive communication/attitude	<b>1</b>
<b>Urology</b>	<b>3</b>
<b>Appointments</b> Unacceptable time to wait for appointment	<b>1</b>
<b>Clinical Care and Concerns</b> Competence/knowledge of staff Quality/concerns regarding Medical Care	<b>2</b> 1 1
<b>Grand Total</b>	<b>18</b>



## NHS Website reviews from patients and their carers

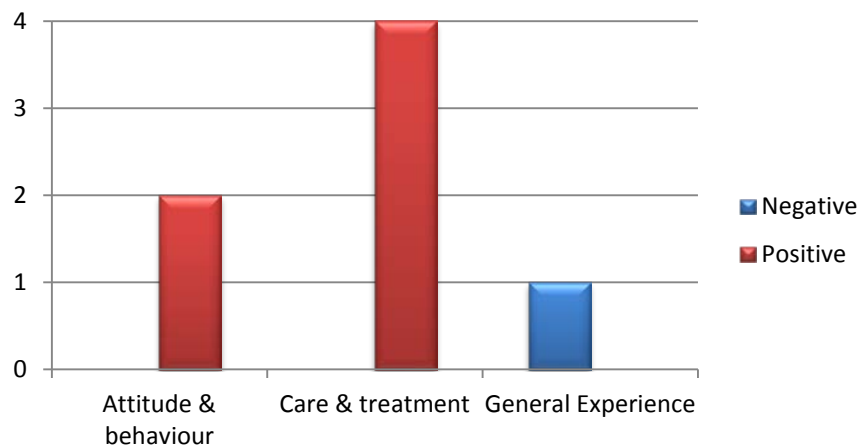
(Patient Opinion covers the same reviews as posted on NHS Choices)

### 4 patients and their families commented on 6 services provided by Surgery Division:

These posts have been divided into 7 separate comments which are categorised by subject and sentiments and by department.

Number of comments split into subject and sentiment:

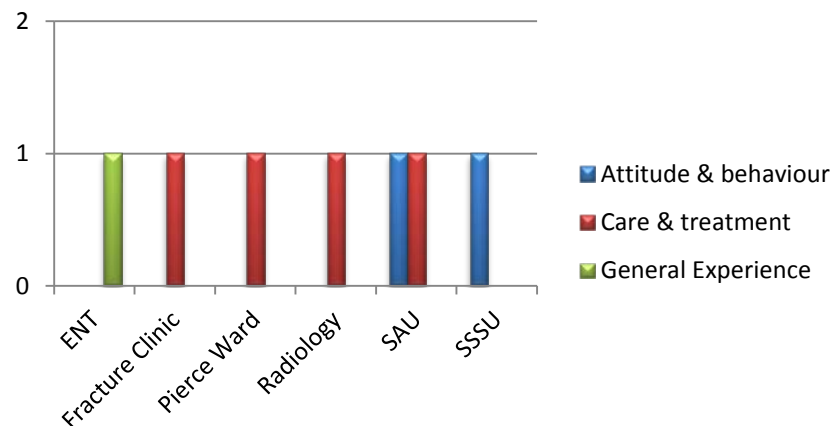
**Comments by Subject & Sentiment**



There was one negative comment regarding the general experience of an outpatient ENT appointments over the past two years.

Number of comments split into department and subject:

**Comments by Department & Subject**



Example of a positive comment: *“Following a recent 24 hour stay in surgical assessment my wife attended as an outpatient for a colonoscopy [ ] my wife could not have received better treatment . All the staff on surgical assessment, radiology, and gastroenterology were excellent and provided all their help in a much appreciated friendly manner thank you all so much.”*

## Patient Experience Activities in Surgery Division

### Project Title

#### Patient Experience of the Glaucoma Clinic

##### Department / Specialty

Ophthalmology

##### Project Leads

Helen Broadbent – Lead for Optometry

##### Activity

To collect patient/carer experience feedback of the Glaucoma Clinic, to identify any potential issues that impact on patients as a result of changes to the clinic.

##### Status

Currently collecting feedback via a questionnaire.

### Project Title

#### Review of Patient Experience of the Surgical Triage Area environment

##### Department / Specialty

Surgical Triage Area (Surgical Admissions Unit)

##### Project Leads

Bea Buckley, Kenny Gale

##### Activity

To collect patient/ carer experience feedback about the Surgical Triage Area Environment. The feedback will be used to inform the planned refurbishment of the area.

##### Status

Currently collecting feedback via a questionnaire.



# Patient and Carer Experience report

## Women and Children's Division

Quarter 2 July - September  
2018

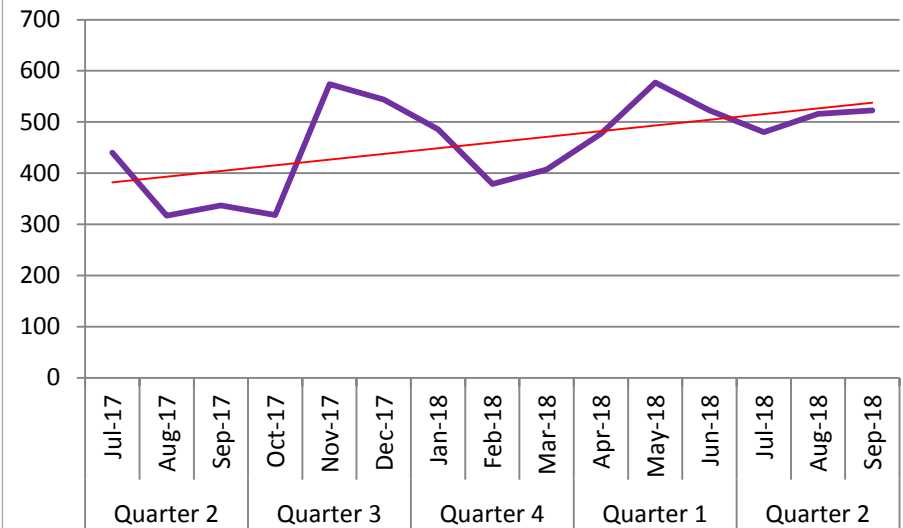
## Women and Children’s Division Response Totals

During Quarter 2 Women and Children’s Division received **1519 Friends and Family Test (FFT)** responses. This represents an **increase of 0.46%** (7 responses) on quarter 1 18/19, where the total was 1512.

**99%** (1498) 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	1357	89.34%
Likely	141	9.28%
Neither likely nor unlikely	10	0.66%
Unlikely	3	0.20%
Extremely Unlikely	4	0.26%
Do Not Know	4	0.26%

Women & Children's Division Response Totals



## Women and Children’s Division ‘free-text’ Categories and Sentiments

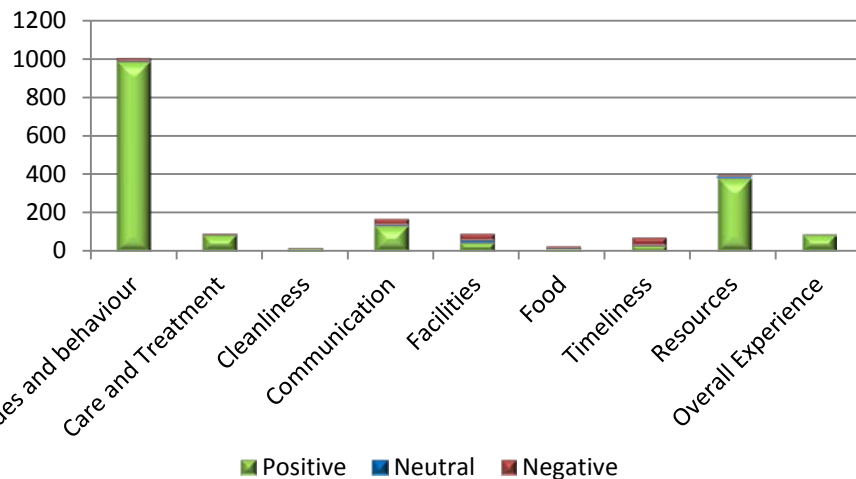
The majority of Women and Children’s Division comments are **Compliments 90%** (1794) **55%** of these refer to the **Attitudes and behaviour of ward and support staff** e.g.

*‘The midwives go above and beyond to offer assistance. The service is personalised and friendly’* (Chippenham Community Hospital – Labour ward)

*‘Calm and kind midwife, very open and supportive’* (Trowbridge Community Hospital - Postnatal Community Service)

*‘Exceptional staff, making everyone feel comfortable. A unit to be very proud of’* (Neonatal Intensive Care – Parent)

**Women & Children's Division Q2 Response Totals**



**8%** (155) of the total number of comments (1983) for the Women and Children’s Division were **Negative**, **2%** (34) **Neutral** (neutral comments include suggestions for improvement) Analysis shows **Areas for improvement are Timeliness and Facilities, this continues from Q1. 27%** (42) of negative comments relate to **Timeliness**; comments refer to waiting to be seen in clinic, waiting for assistance / call bell, waiting for doctor, waiting for medication, non-specific waiting e.g.

*‘Long waiting times at actual appointments’*

*‘Call bells needed to be answered quicker - more staff needed’*

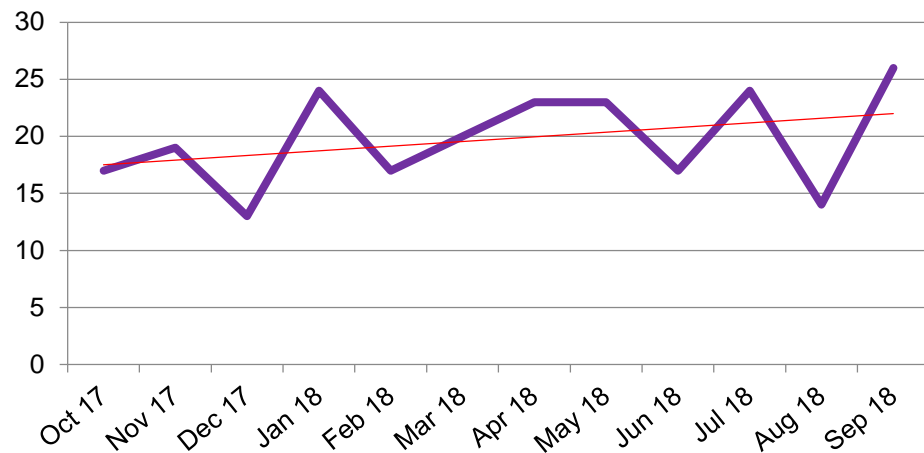
*‘Shortage of Doctors was poor - long wait occurred’*

**23%** (36) negative **Facilities** comments mainly relate to ward/ room temperature, parking, comfort of chairs/beds décor e.g.

*‘Side room - far too hot, needs air con. Unbearable for Mum and baby’*

*‘Parking is atrocious and the meter didn’t work’*

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



The Total number of enquiries for the Women & Children's Division over **Q2** was **64**. There is an increase of 1 enquiry from Q1 which totalled 63 responses. This is an Increase of **2%**.

Q2 has seen an increase in enquiries during September, however the total amount of enquires for the quarter has remained stable. The spike over December/January reflects the overall increase in numbers and issues requiring resolution.

**Q2 Enquiries by Type - Women & Children's Division**

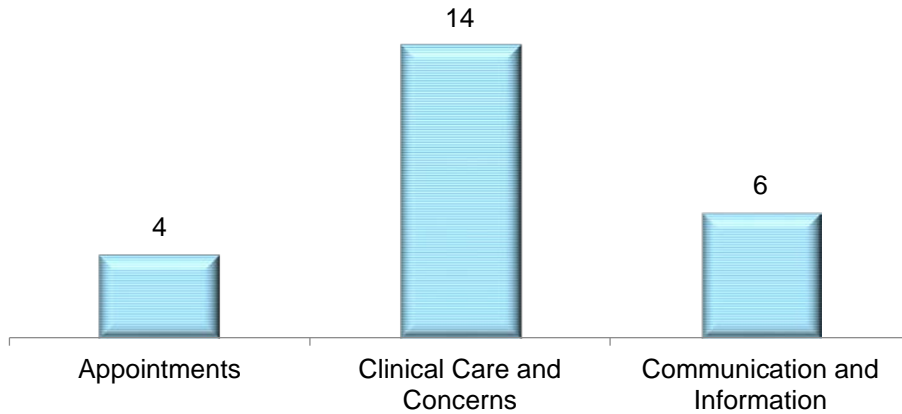


The number of **issues requiring resolution** has **decreased** from 34 in Q1 to **29** in **Q2**, this is a decrease of 15% (5).

There has been a **53% increase** in the number of contacts requiring **advice and information** this quarter, from 15 in Q1 to **23** in **Q2**.

The number of **compliments** received for the Women & Children's Division in relation to the care that patients have received in the hospital has **decreased** 30% from 10 in Q1 to **7** in **Q2**. There has been a slight **increase** of 25% in the contacts providing **feedback** from 4 in Q1 to **5** in **Q2**.

**Top Three Subjects Requiring Resolution – Women & Children’s Division**



**Appointments**

2 of the contacts related to length of time for new appointment. The remaining 2 were spread across different subject areas with no trends.

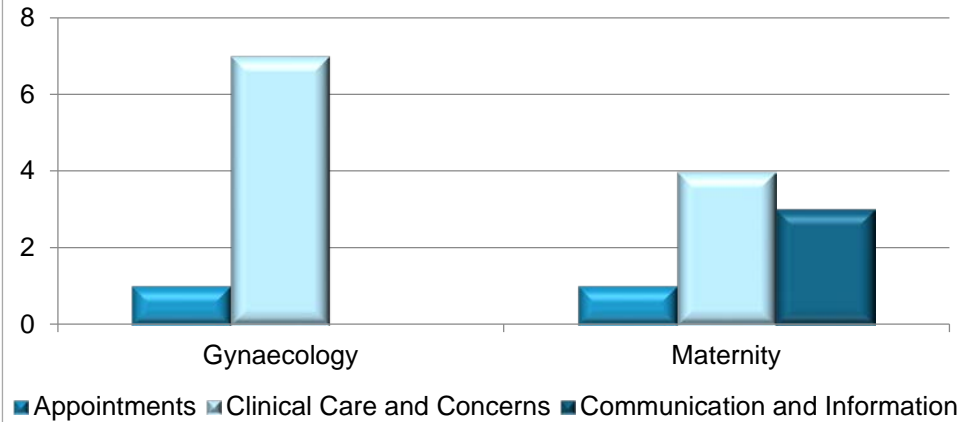
**Communication & Information**

6 of the contacts were spread across different subject areas with no trends.

**Clinical Care & Concerns**

8 of the contacts related to general enquiries clinical care; 3 – quality/concerns regarding medical care. The remaining 3 were spread across different subject areas with no trend.

**Specialities with the highest number of Issues for Resolution**



No trends across the Specialities

In Q2 the Women and Children’s Division received **5 formal complaints**.

**Total** number of complaints for the quarter

Year	Q1	Q2	Q3	Q4
2017/18	9	6	4	3
2018/19	3	5		

Q2 saw a slight increase in complaints however the overall complaint rate for the Division is very low.

The Women and Children’s Division did not have any **re-opened** complaints or complaints opened for investigation by the **PHSO** in Q2.

Women and Children’s Division Complaint response performance:

	No. of complaint
Closed within 35 day target	2 (33%)
Breached 35 Day target	4 (67%)
<b>Total</b>	<b>6</b>

**Learning points:**

- New text service provider being considered to prevent any future breaches in Data Protection.
- Matron fed back details of complaint to Charlotte Ward to use as a case study in staff training regarding the care and dignity of patients.
- Ensuring that patients who have a diagnosis of cancer in the Breast Care department have adequate and quick access to support.



**Complaints by Specialty and Subject:**

Speciality / Subject	Total
<b>Breast Care</b>	<b>1</b>
Clinical Care and Concerns General Enquiry - Clinical Care	1
<b>Gynaecology</b>	<b>3</b>
Clinical Care and Concerns (Medical Care) Quality/concerns regarding Medical Care	1
Communication and Information	1
Discrimination and Safeguarding (age)	1
<b>Paediatrics</b>	<b>1</b>
Communication and Information Data Protection Breach/Confidentiality breach	1
<b>Grand Total</b>	<b>5</b>

## NHS Website reviews from patients and their carers

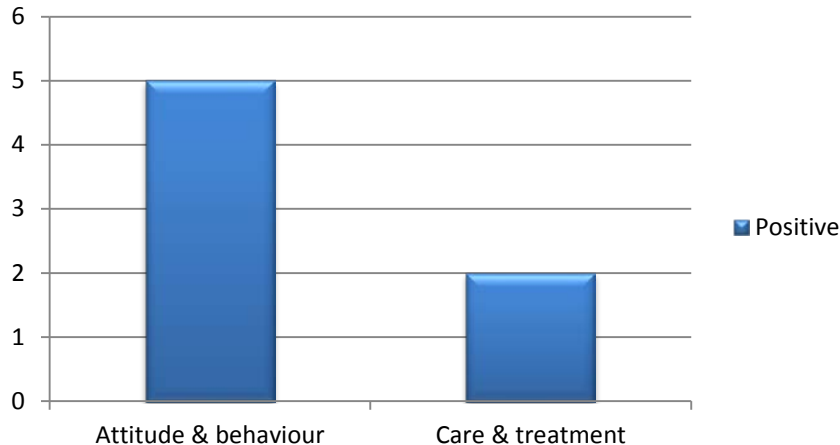
(Patient Opinion covers the same reviews as posted on NHS website)

### 4 patients and their families commented on 4 services provided by Women & Children’s Division:

These posts have been divided in to 7 separate comments which are categorised by subject and sentiments and by department.

Number of comments split into subject and sentiment:

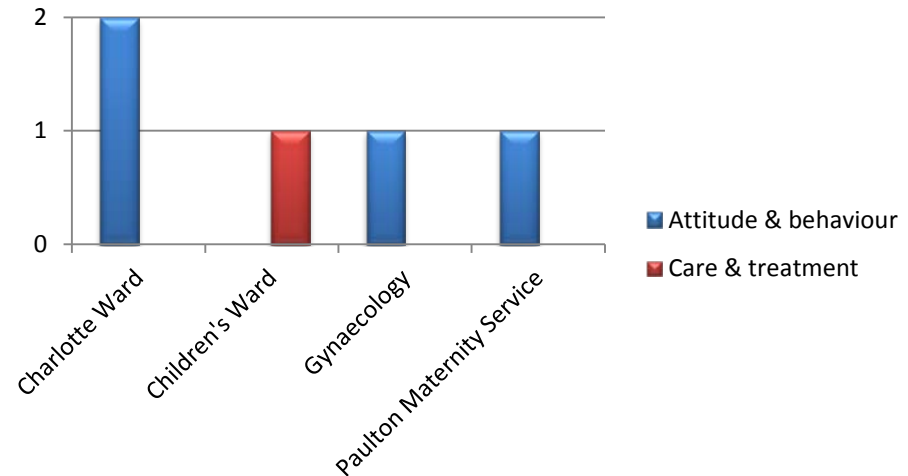
Comments by Subject & Sentiment



There were seven positive comment about Women & Children’s Division and no negative comments. Staff were described as “fabulous”, “caring”, “friendly, knowledgeable and extremely professional”.

Number of comments split into department and subject:

Comments by Department & Subject



Example of a positive comment: *“I stayed on surgical short stay and on Charlotte ward and I am so grateful and thankful . I was very poorly and an anxious mess , the nurses and the nursing assistant’s were Fabulous and Very caring . Everyone I met was professional and hard working. So very grateful.*

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

### Project Title

#### Review of Paediatric Physiotherapy and Occupational Therapy Service

#### Department / Specialty

Children's Therapies

#### Project Leads

Emily Graham, Specialist Paediatric Orthopaedic Physiotherapist.

#### Activity

To collect patient(child)/ carer/parent experience feedback of the Paediatric Physiotherapy and Occupational Therapy Service.

#### Status

Collection complete. Data sent to the project lead for analysis.

### Project Title

#### Review of NICU developmental Clinic

#### Department / Specialty

Children's Therapies

#### Project Leads

Alison Steene, Senior Physiotherapist and Kate Whiting, Occupational Therapist.

#### Activity

To collect parent experience feedback of the NICU Developmental Clinic to determine how to improve service provision and provide evidence of parent experience to the innovation panel who funded play packs.

#### Status

Collecting parent experience through questionnaires.





# Patient and Carer Experience report

## Outpatients

Quarter 2 July - September  
2018

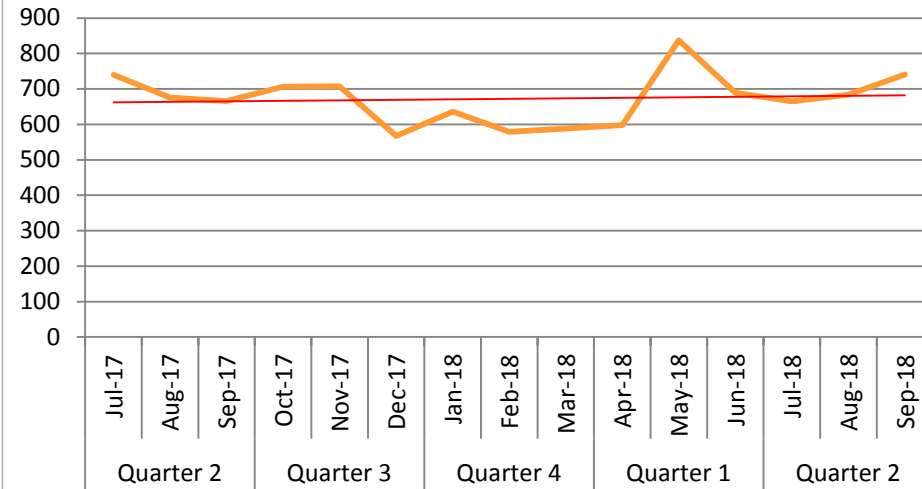
## Outpatient Response Totals

During Quarter 2 Outpatient departments received **2090** Friends and Family Test (FFT) responses. This represents a **decrease of 1.6%** (34 responses) on quarter 1 18/19, where the total was 2124.

**97%** (2031) 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	1743	83.40%
Likely	288	13.78%
Neither likely nor unlikely	28	1.34%
Unlikely	5	0.24%
Extremely Unlikely	10	0.48%
Do Not Know	16	0.77%

Outpatient Response Totals



## Outpatient ‘free-text’ Categories and Sentiments

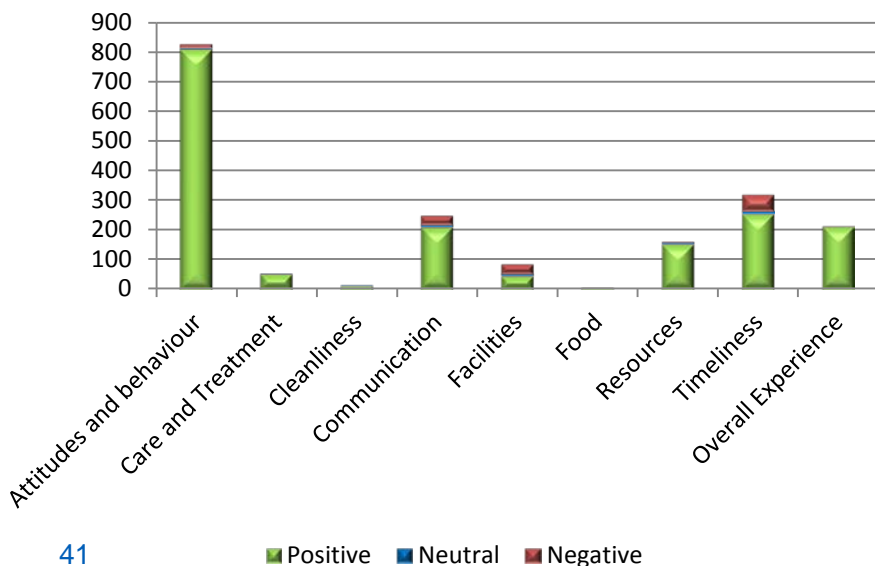
The majority of Outpatient comments are **Compliments 91%** (1756) **46%** of these refer to the **Attitudes and behaviour of ward and support staff** e.g.

*‘Staff treat you as an individual rather than as a number. Always helpful, cheerful and make sure you understand what’s been said during consultation’* (Urology Patient)

*‘Doctor was very understanding, kind, gentle and friendly’* (Trauma & Orthopaedic Patient)

*‘Empathy is good. No concerns - everything is helpful and considered’* (Rheumatology Patient)

**Outpatient Q2 Category Totals**



**7%** (145) of the total number of comments (1936) for Outpatients were **Negative**, **2%** (35) **Neutral** (neutral comments include suggestions for improvement) Analysis shows **Areas for improvement** are **Timeliness, Facilities and communication. 39%** (56) of negative comments relate to **Timeliness, this continues as a theme from Q4 17/18 & Q1 18/19**; the majority of comments refer to waiting in clinic past appointment time e.g.

*‘Arrived early but had to wait for a while to be seen with no explanation – poor’*

*‘Friendly service but could run on time’*

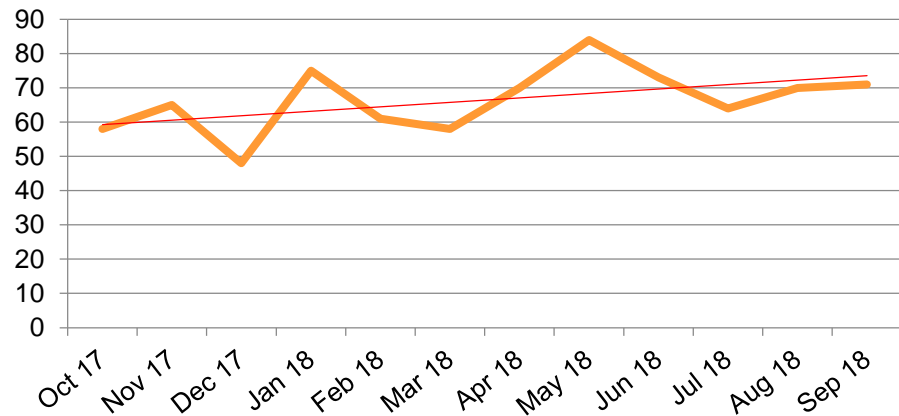
**23%** (34) negative **Facilities comments** relate mainly to parking at the RUH and at community hospitals e.g.

*‘Keeping to timetable was a headache. Need more parking spaces’*

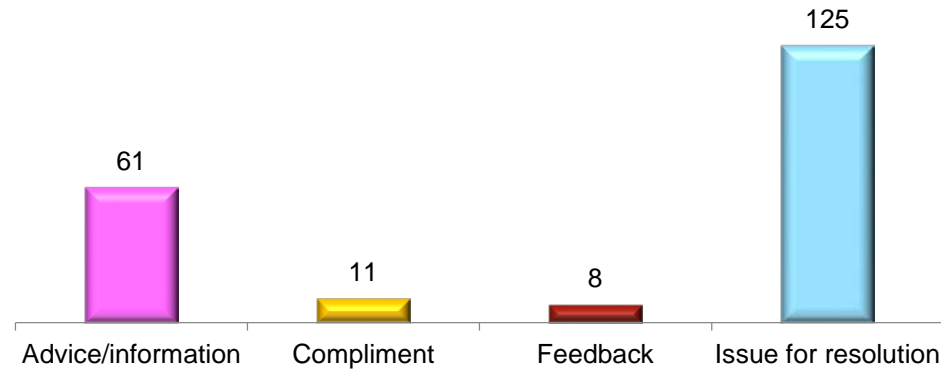
**22%** (32) Negative **communication comments** are a mixture relating to appointments/ letters/ changes / cancellation, not being updated in clinic, signage, lack of information e.g.

*‘Within reason, keep to appointment times or at least inform patient if there is a delay’*

**Total PALS Enquiries - Outpatients**



**Q2 Enquiries by Type - Outpatients**



The Total number of enquiries for Outpatients over **Q2** was **205**. There is a decrease of 25 enquiries from Q1 which totalled 230 responses. This is an decrease of 11%.

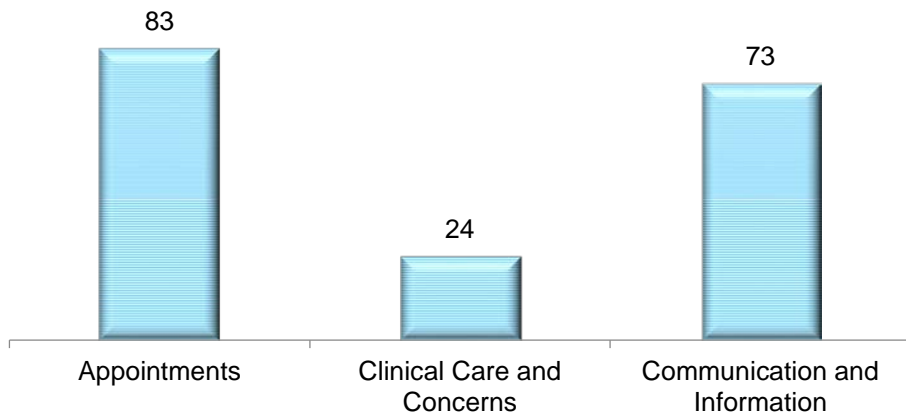
The amount of PALS enquiries for outpatients decreased over Q1 and has remained stable over Q2. The spike over December/January reflects the overall increase in numbers and issues requiring resolution.

The number of **issues requiring resolution** has **decreased** from 143 in Q1 to **125** in **Q2**. This is a **decrease of 13%** (18). There has been a **9% decrease** in the number of contacts requiring **advice and information** this quarter, from 67 in Q1 to **61** in **Q2**.

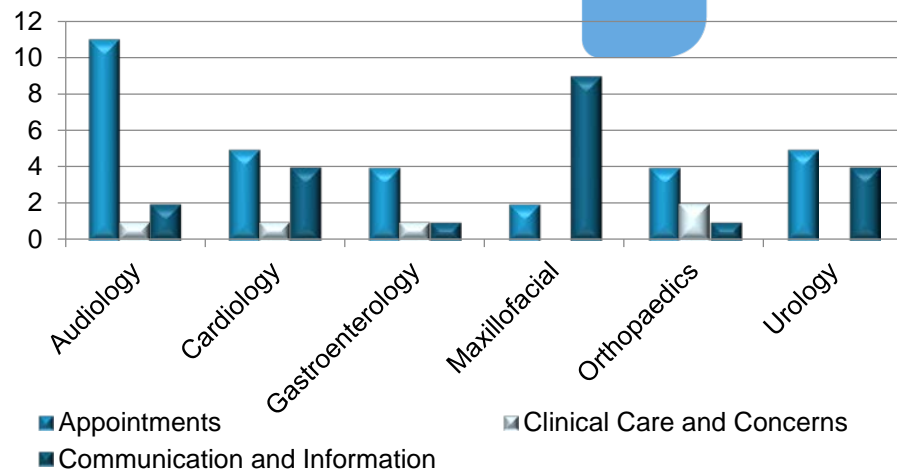
The number of **compliments** received for Outpatients in relation to the care that patients have received in the hospital has remained the same, 12 in Q1 and **12** in **Q2**.

There has been a **decrease** of 11% in feedback from 9 Q1 to **8** in **Q2**.

### Top Three Subjects Requiring Resolution - Outpatients



### Specialities with the highest number of Issues for Resolution



### Trends

#### Clinical Care & Concerns

No trends across the Specialities.

#### Appointments

3 of the contacts related to the Audiology department – length of time for new appointment.

#### Communication & Information

2 of the contacts related to the Cardiology department – telephone issues (phones not answered). 9 related to the Maxillofacial department – telephone issues (phone not answered).

#### Appointments

21 of the contacts related to appointment information; 13 – length of time for new appointment, 12 – cancellation of appointment, 12 – length of time for follow up appointment, 8 – appointment change by patient, 5 – follow up appointment not given, 5 – appointment date continues to be rescheduled. The remaining 7 were spread across different subject areas with no trend.

#### Clinical Care & Concerns

15 of the contacts related to general enquiries clinical care. The remaining 9 were spread across different subject areas with no trend.

#### Communication & Information

33 of the contacts related to general enquiries communication; 19 – telephone issues ( phone not answered), 6 – general enquiries clinical care, 4 – test results not acted on. The remaining 11 were spread across different subject areas with no trend.

**Complaints for outpatients** are recorded within the separate divisions. Within the total number of complaints this quarter, 18 were related to outpatient departments and can be broken down into the following specialties:

Department	No. of complaints
Cardiology	2
Paediatrics	1
Ophthalmology	3
Gastroenterology	2
Neurology	2
Oral Surgery	1
Oncology	1
Breast Care	1
Orthopaedics	1
CRPS (Chronic Regional Pain Syndrome Service)	1
Urology	1
Radiology	2

The complaints for Ophthalmology related to:

- Concerns regarding medical care
- Being discharged following failing to attend an appointment.
- Lack of support following a procedure.



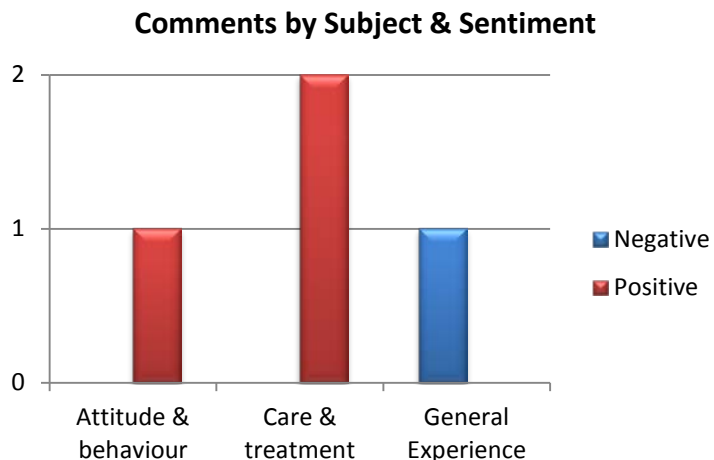
## NHS Website reviews from patients and their carers

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

### 3 patients and their families commented on 3 services provided by Outpatients across all clinical Divisions:

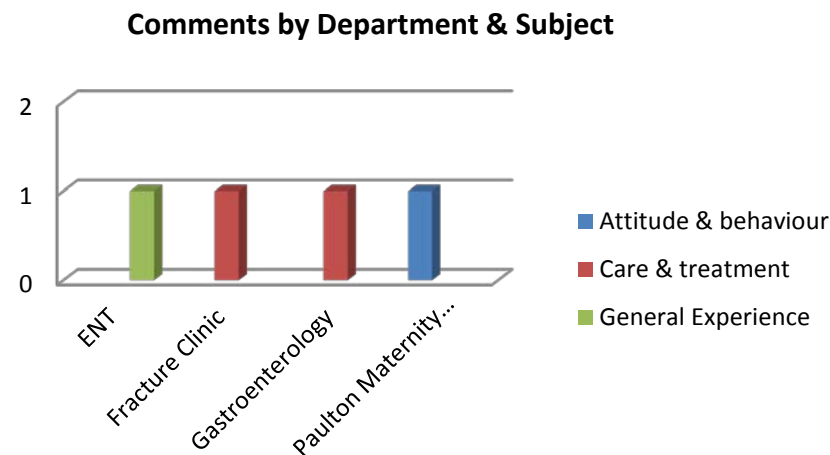
These posts have been divided in to 3 separate comments which are categorised by subject and sentiments and by department.

Number of comments split into subject and sentiment:



There was one negative comment about an ENT patient’s general experience of the outpatient clinic over two years relating to care & treatment, information and communication and timeliness of appointments. The patient was asked to contact PALS so the team could investigate the patient’s concerns.

Number of comments split into department and subject:



Example of a positive comment: *“I had my 28/40 midwife review yesterday morning and I would like to praise the lovely midwife who took my appointment. She was friendly, knowledgeable and extremely professional. I was impressed with her high standards of infection control and she seemed to tailor the appointment to my needs specifically. She doesn’t normally work here, but I would like her to gain some nice feedback. Thank you!”*

Woman receiving Maternity Services