

Patient Experience Report

October– December 2022

The RUH, where you matter



People we care for | Executive Summary

Executive Summary

Formal Complaints

63 complaints were received in Q3 (compared to 91 in Q2). The number of complaints received in October and December was particularly low.

The primary themes of complaints across all departments is clinical care and concerns – this includes, the co-ordination of medical treatment, inappropriate care and treatment, knowledge and competence of staff and the wait for treatment. Concerns relating to communication and information are apparent throughout most complaints but is not always the primary subject of the complaint. There was an increase in Q3 in the number of complaints relating to inappropriate discharge and subsequently patients being readmitted to the hospital.

There continues to be an improvement in the 35 working day target response to formal complaints – this was 77% in December.

PALS

1055 contacts in Q3 (compared to 1327 in Q2). The top 3 issues for resolution remain the same however there was an increase in the number of patients asking about appointments and with clinical care and concerns.

1. Appointments – top contributors are General Surgery, Orthopaedics, Cardiology, Oral & Max Fax Surgery, Radiology and Gastroenterology.
2. Clinical care and concerns – top contributors were General Surgery, Emergency Department and Maternity. The reason why patients are contacting PALS was to ask about the results of tests and concerns about inappropriate care and treatment.
3. Communication and information – top contributors are Orthopaedics, General Surgery, Cardiology and the Emergency department. Communication with patients and telephones not being answered were an issue in Orthopaedics and Cardiology.

Friends and Family Test (FFT)

There has been a decrease in the overall patient experience scores this quarter from 96.4% in Q2 to 95.1% in Q3. This is mainly due to the negative experiences of patients in the Emergency department.

The number of FFT responses remains low – these are received by card and online. A review is underway with Salisbury and Great Western Hospitals to pilot a text service which has proven to promote an improved response rate in other Trusts. A bid will be made to the Innovation Panel to run a 12 month pilot to collect more patient feedback particularly from the Emergency Department.

Patient Engagement

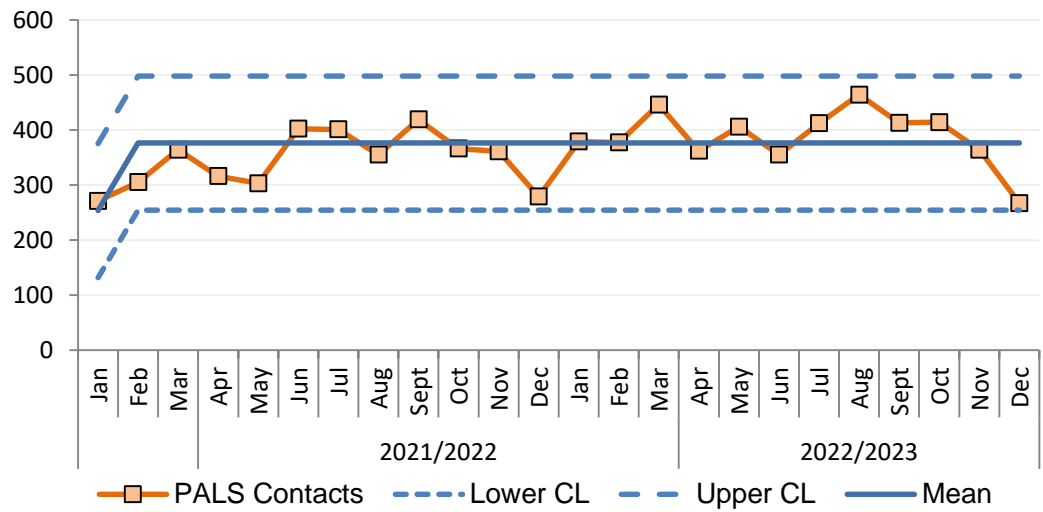
The Patient Experience Team advises and supports clinicians and specialty teams to involve and engage with patients and families. This includes supporting them to create questionnaires, run focus groups, conduct telephone interviews, review patient information leaflets and co-designing services. Examples of activities are included on slides 12 and 13 of this report.

There has been an increase in the number of activities in Medicine and Family and Specialist Services in Q3

PALS – performance/issues requiring resolution

Historic Performance

Number of PALS Contacts – January 2021 to December 2022



Performance in Q3

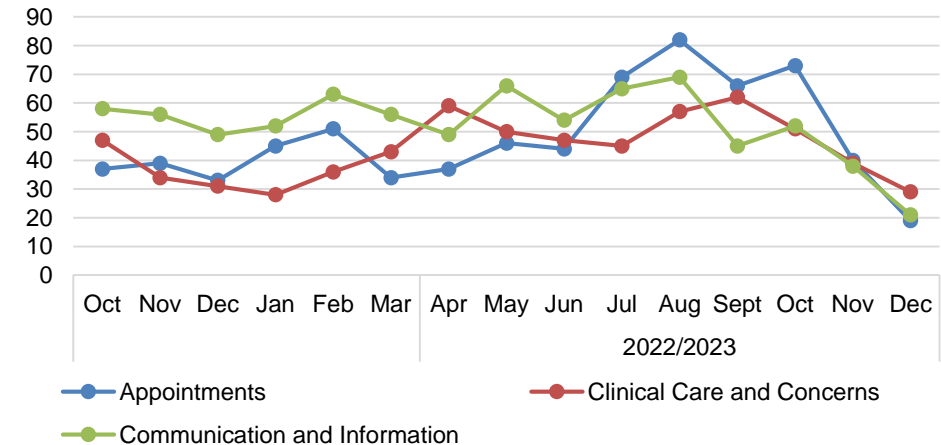
There were **1055** PALS contacts (this compares to 1327 in Q2) **536 issues for resolution**. There was a decrease in contacts in December over the holiday period. In that month, 49% of contacts were for advice and information and 37% were issues for resolution. Top 3 issues were:

1. **Appointments = 132**
2. **Clinical Care and Concerns = 119**
3. **Communication and Information = 111**

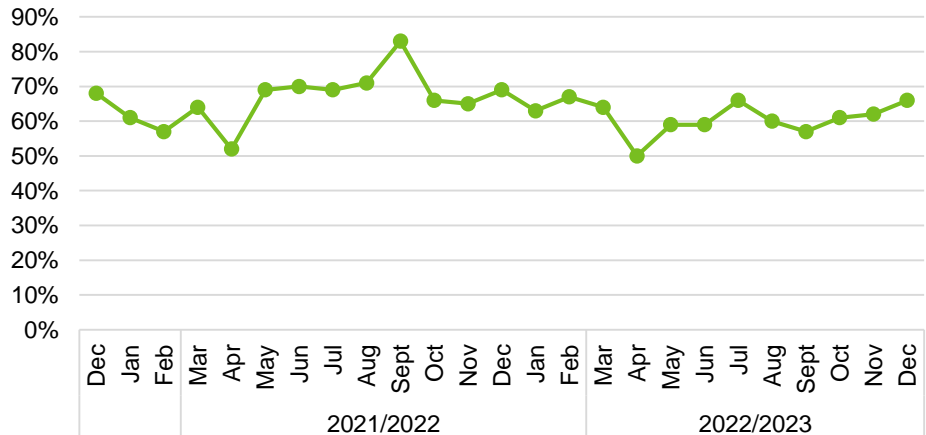
Closure of the **536** PALS issues for resolution within the 48 hour target fluctuates, due to the complexity of some cases which require more than 48 hours to investigate and the capacity/availability of clinical staff to respond to enquiries.

The number of PALS cases has continued to remain high in Q3 impacting on the Trust response times. However this remains at between 60-70% and has improved since August 2022.

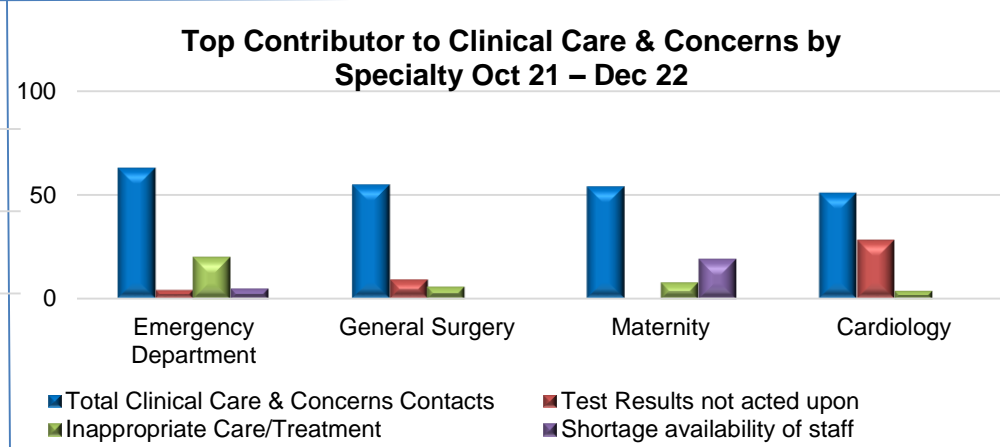
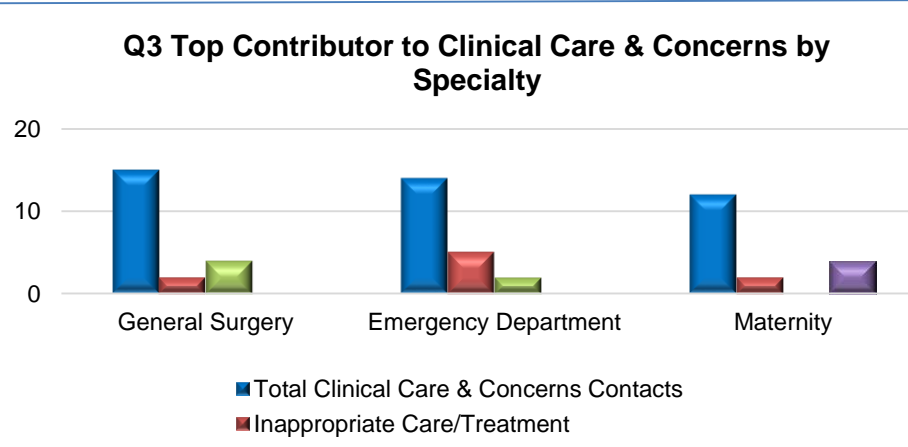
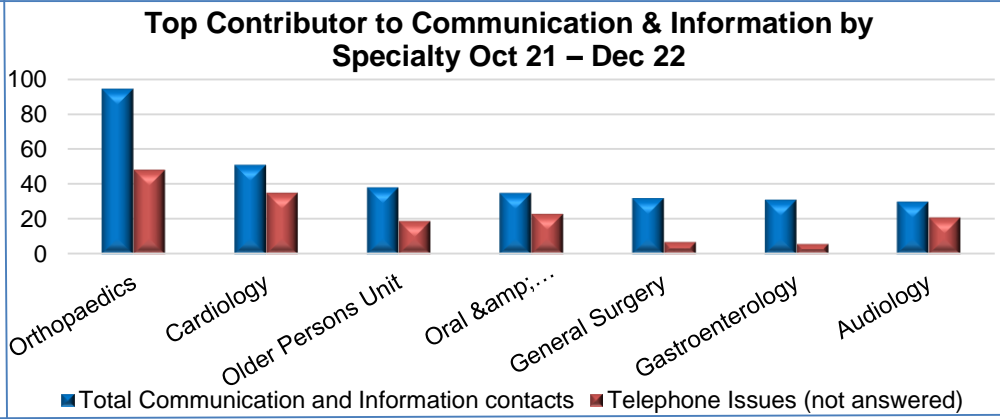
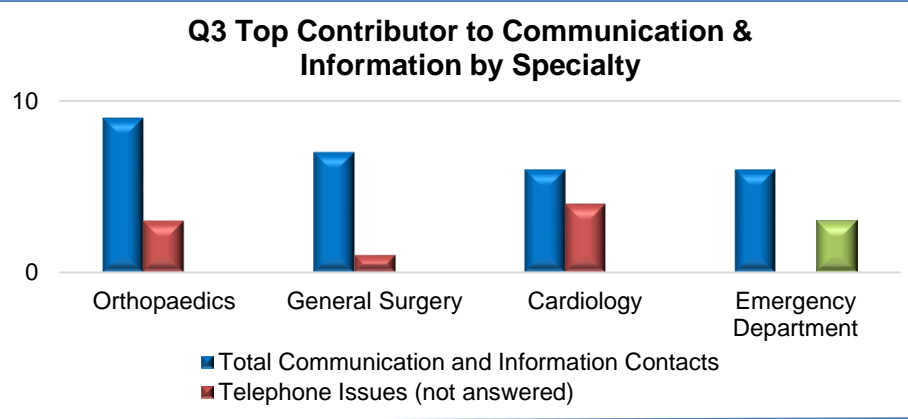
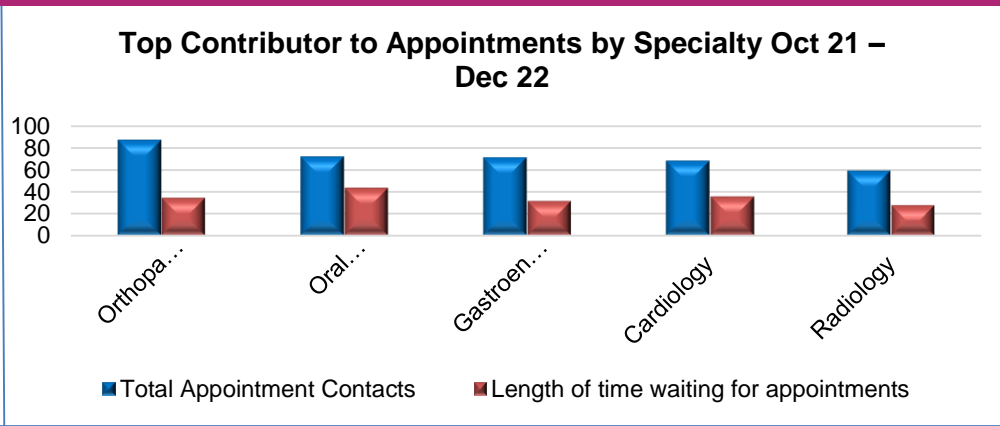
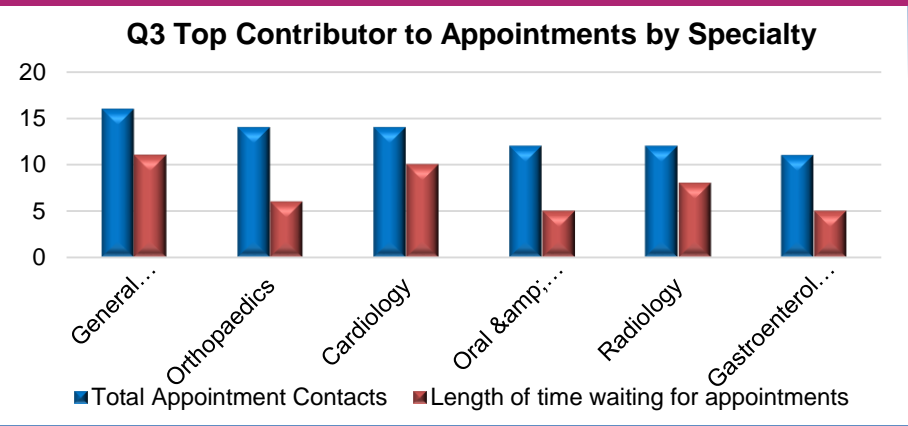
PALS top contributors to Issues for Resolution
October 2021 – December 2022



PALS Percentage of Issues for Resolution closed
within 48 hour target

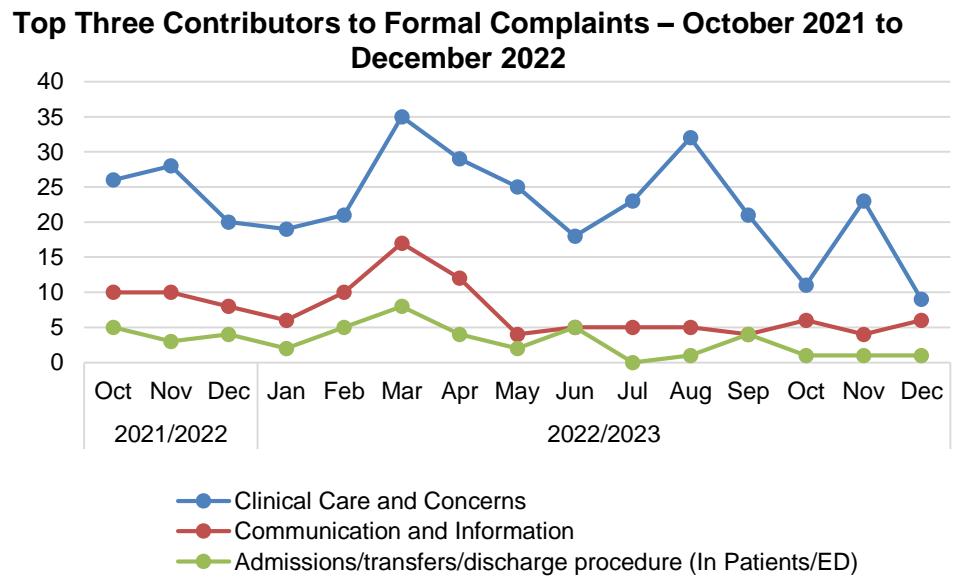
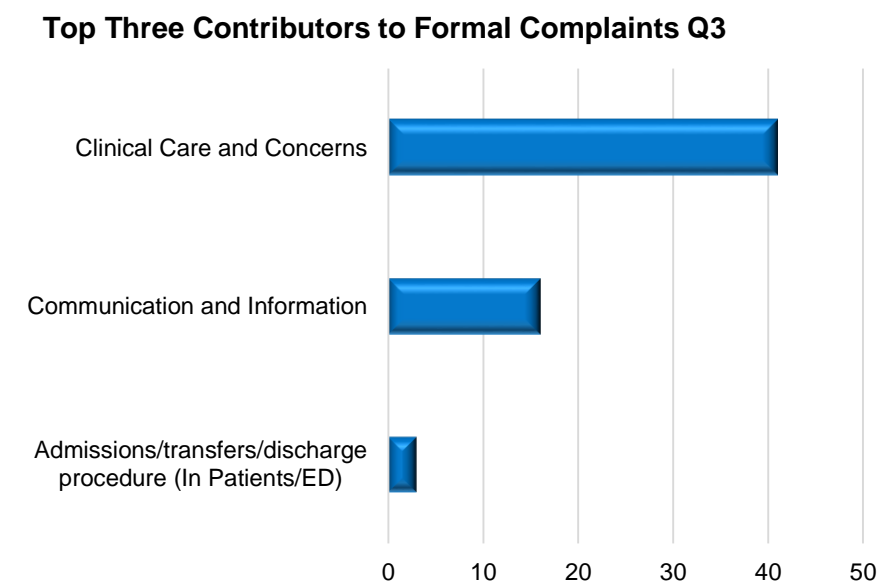
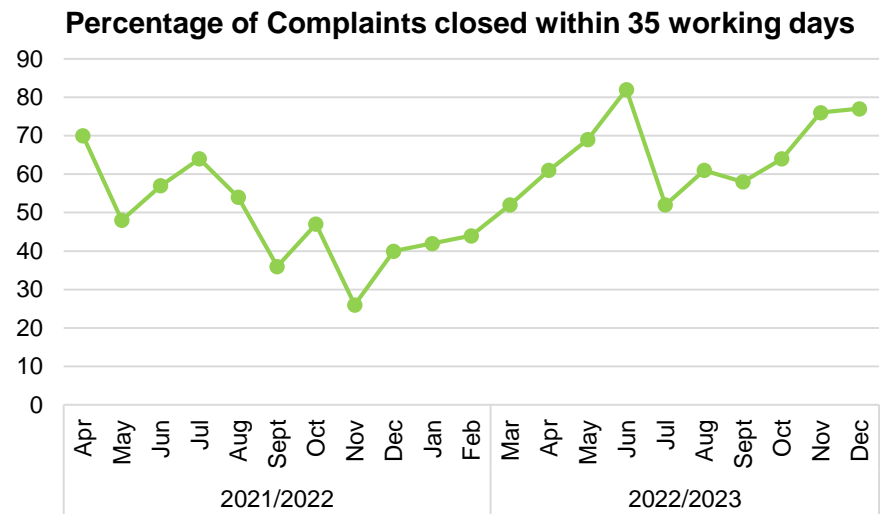
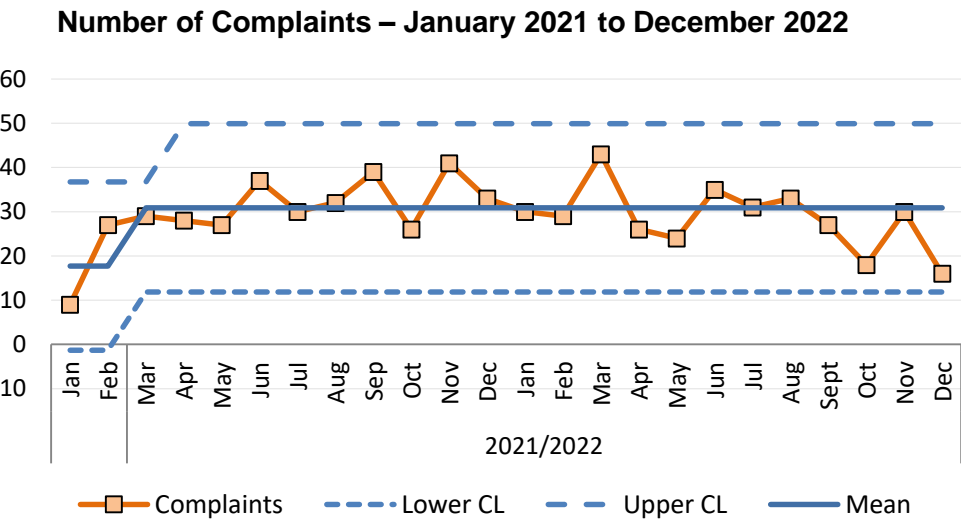


PALS - issues requiring resolution

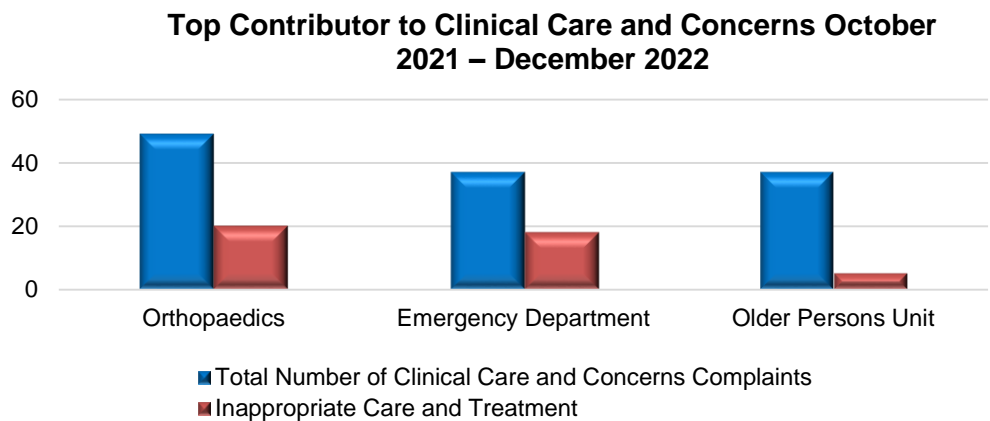
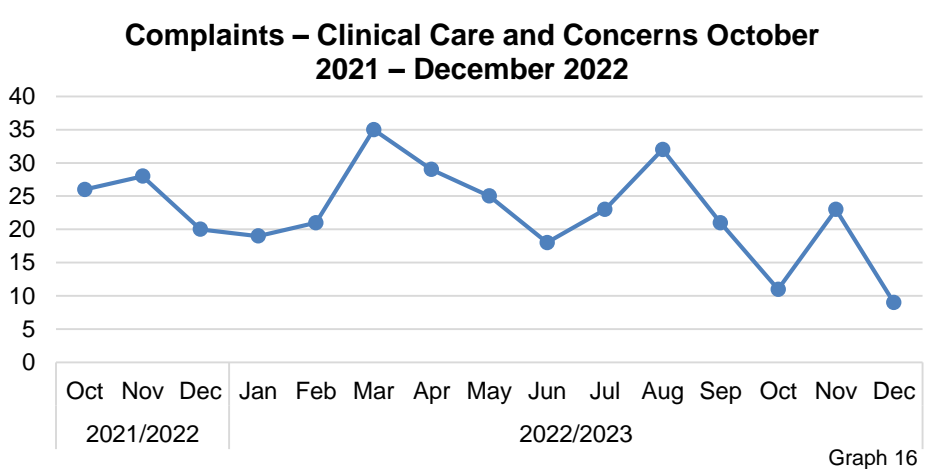
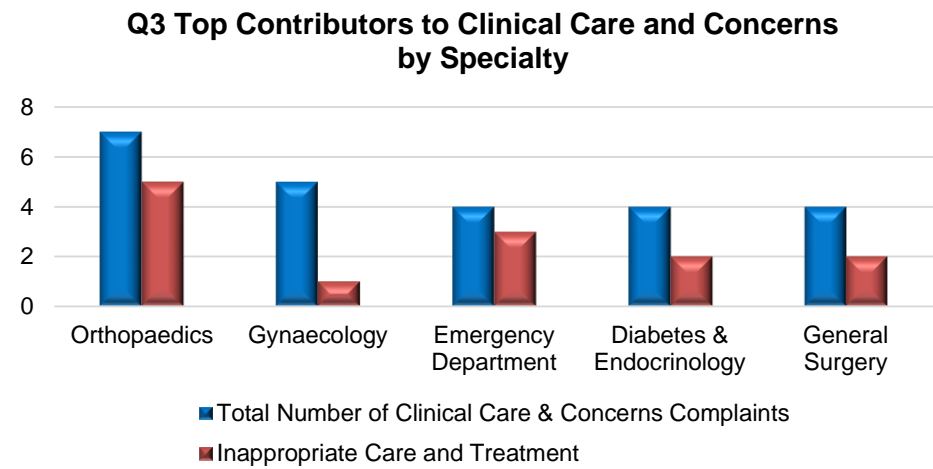


Complaints – performance/top contributors

Performance in Q3
There were **63 complaints received in Q3** (this compares to 91 in Q2). Surgery 23, Medicine 17, F&SS 15, Corporate (includes ED) 8.

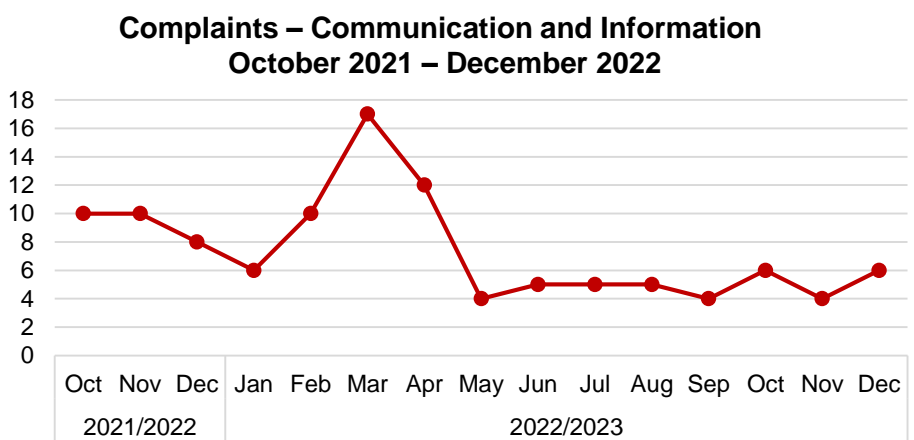
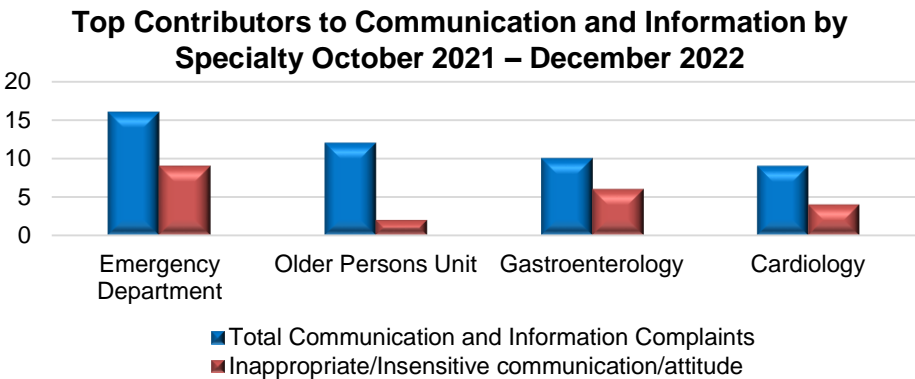
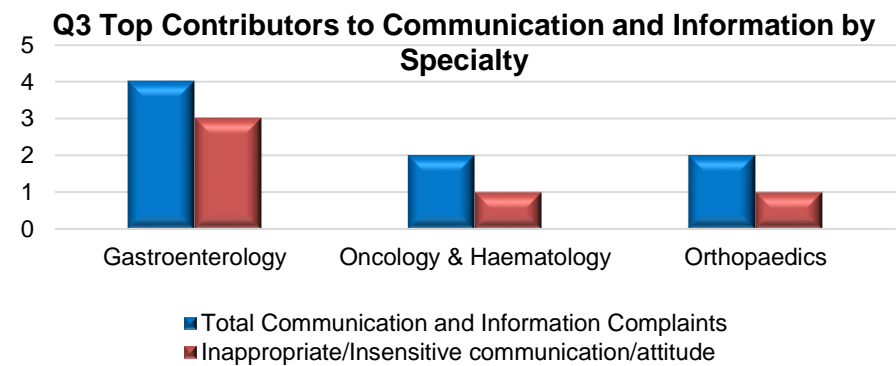


Complaints – Clinical Care and Concerns



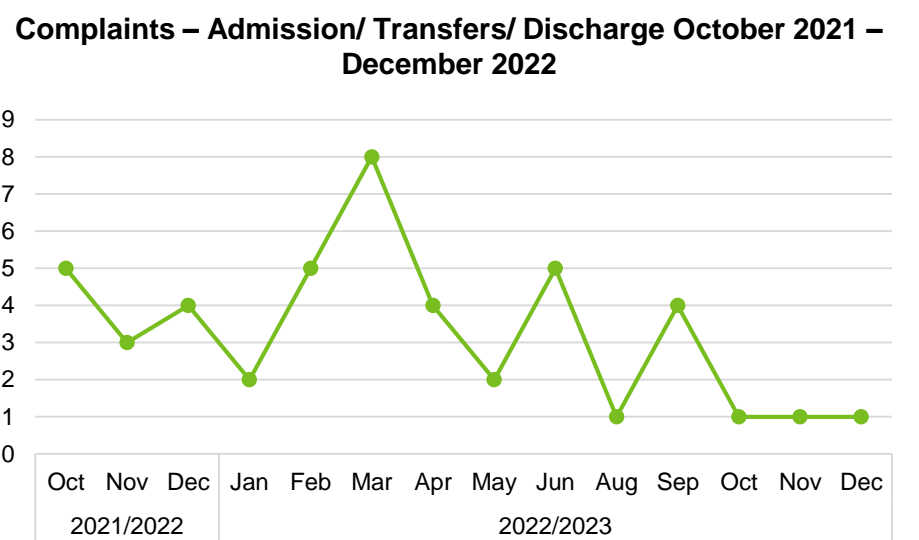
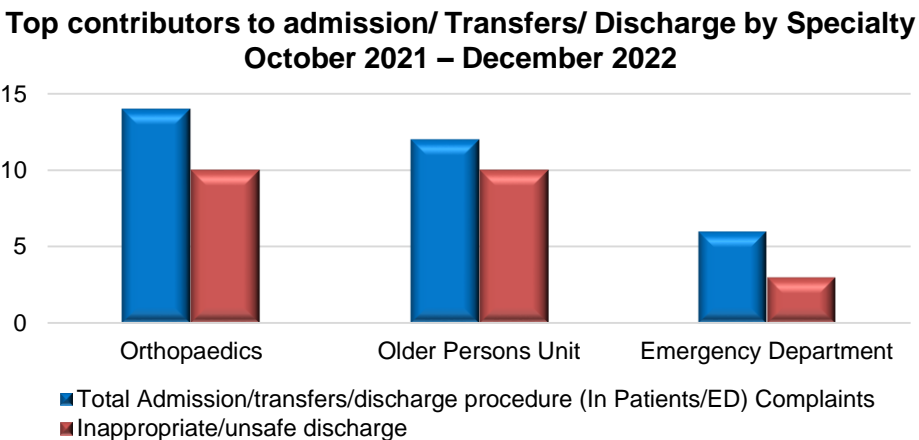
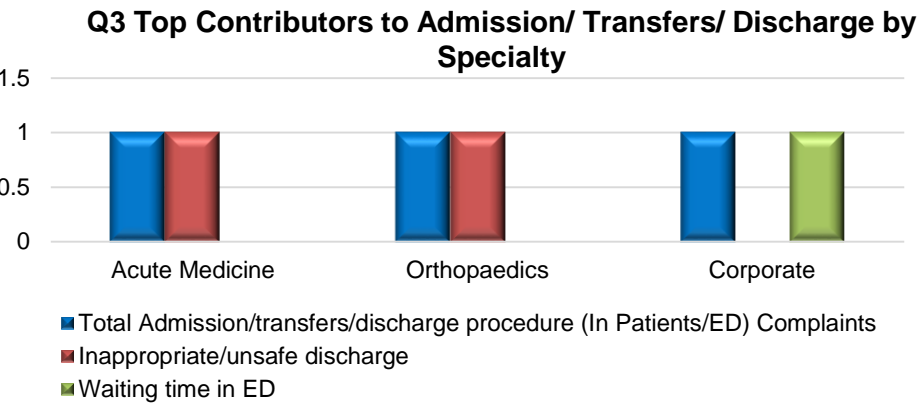
Division	Actions taken/countermeasures
Medicine	Concerns raised about the development of a wound to the patients leg after unsuccessful attempts to obtain a lower limb blood pressure. Outcome/action - new Trust Guideline has been developed for the completion of lower limb blood pressure measurement. (awaiting ratification).
Surgery	Patient did not feel listened to by staff before surgery regarding an existing hip problem and the importance of positioning on the operating table. As a result the patient sustained a hip injury. There were also concerns raised about the lack of nursing care/food/pain relief/physio input on ward from nursing staff on ward. Outcome: Anaesthetic department staff have discussed the case and the learning from this will be included as part of individual appraisal and assessment. Review whether previous joint or mobility problems should be included in the WHO theatre checklist.

Complaints – Communication and Information



Division	Actions taken/countermeasures
Medicine	<p>Patient unhappy with long delay in typing cardiology clinic letter (over 3 weeks) which delayed the start of his medication change. Feels there should be something in place to prioritize the typing of letters that need GP action.</p> <p>Outcome/Actions Specialty Manager closely monitoring backlog of typing within the Cardiology Department. Weekend working has been offered to the team. Actively recruiting an additional typist to support the secretarial team. Plan to implement 'Nuance' voice to text recognition software in Cardiology by the end of March 2023.</p>
F&SS	<p>Concerns about the booking and scan referral process between Chippenham Birthing Centre (CBC), the RUH and Great Western Hospital (GWH) leading to a delay in an antenatal scan.</p> <p>Outcome/Actions Transformation Midwife currently reviewing how referrals between Trusts can be included in the integrated electronic maternity care system.</p>
Surgery	<p>Patient presented to the Emergency Department and was advised that she would be contacted afterwards by ENT. Was told that there was no referral to GP and no notes in discharge summary regarding referral.</p> <p>Outcomes/Actions Review of handover processes and telephone follow up calls with the Doctor in Training team. Feedback provided to ENT Doctor in Training team to ensure clear communication with patients about treatment plans and further follow up.</p>

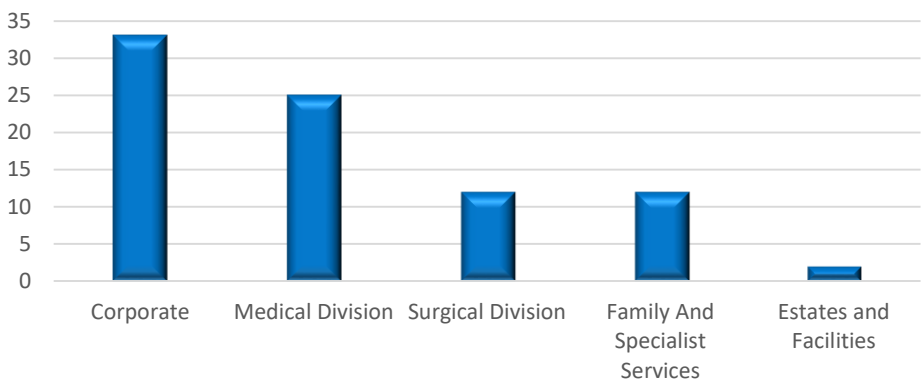
Complaints – Admission/ Transfers/Discharge



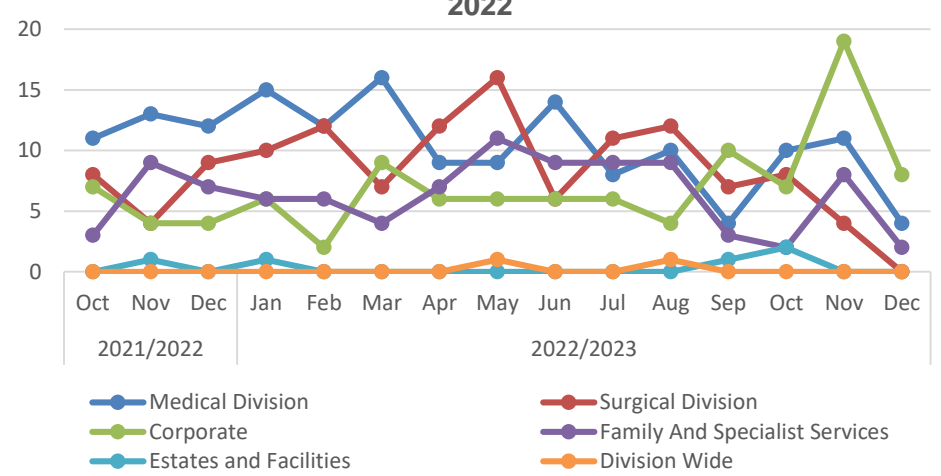
Subject area	Actions taken/countermeasures
Surgery	<p>Concerns about lack of care and support on discharge and lack of communication from the therapy team following admission for a neck fracture after a fall at home.</p> <p>Outcome. Shared with orthopaedic therapy team re importance of explaining Home First service and communicating clear discharge plans. Communication with patients and families on discharge is one of the work streams of the Discharge group.</p>
Medicine	<p>Patient was discharged home in a taxi when his wife could have collected him if there had been any communication about discharge from the ward. No Discharge summary sent home with patient. Patient has Dementia.</p> <p>Outcome Taxi fare refunded. Family Liaison Facilitators are now working again and will support the Emergency Department, MAU/OPAU and older persons wards focussing on maintaining communication with the family particularly if they are being discharged home.</p>

Compliments

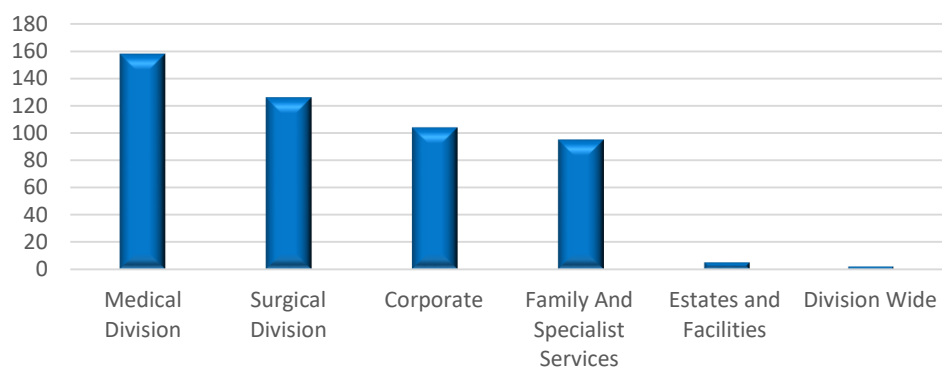
Compliments by Division Q3



Compliments by Division October 2021 – December 2022



Total Compliments by Division October 2021 – December 2022



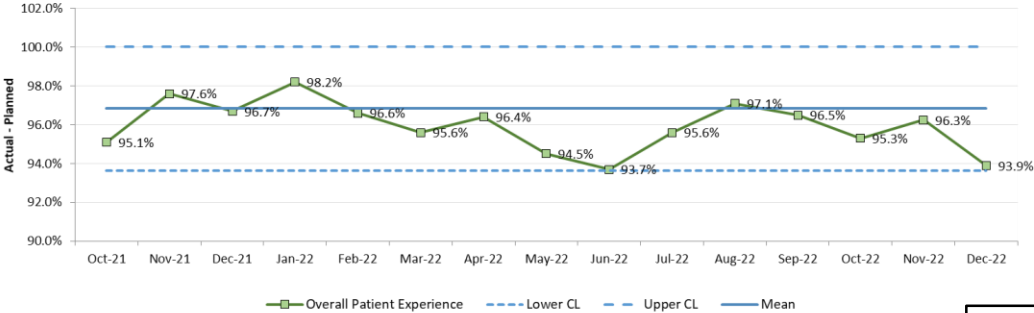
84 compliments were received by PALS and the Directors Offices in **Q3**.

Themes	Caring and kind staff, empathetic and supportive, compassionate and understanding, felt listened to.
Examples	<ul style="list-style-type: none">• Patient couldn't thank staff enough for their patience, professionalism and clear advice – Urology.• Patient wanted to pass on thanks to staff for always smiling and taking care of them and making them feel like they mattered - Forrester Brown.• Physiotherapist was warm gentle and caring.• Thanks to staff in Ambulatory Care who were efficient, effective and respectful.• Relative thanking staff on Parry ward for their amazing care, the change in the patient is unbelievable.• Heartfelt thanks to OPAU and Combe ward who looked after the patient making the end of her life comfortable.

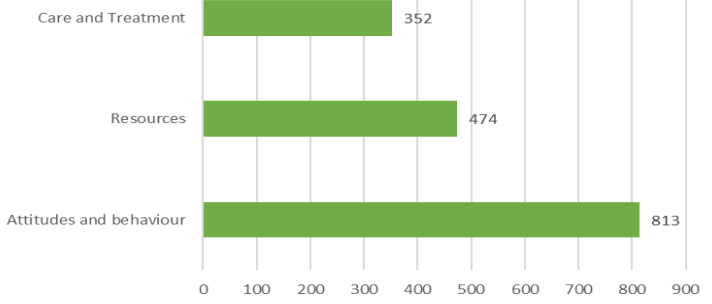
Friends and Family Test

Historic Performance

Royal United Hospital
1st October 2021 - 31st December 2022
SPC Overall Patient Experience
Source: eQuest (as 12th January 2023)



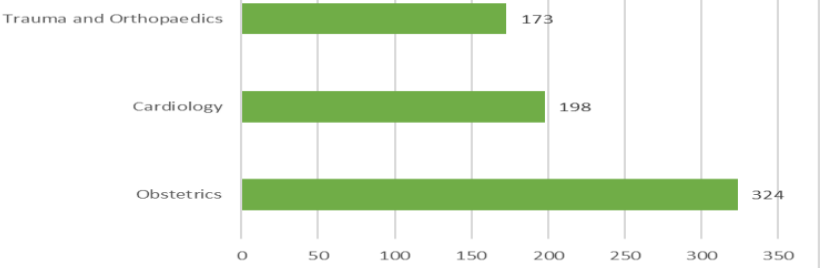
Top three positive themes in Q3



Friends and Family Test question responses



Top contributors for positive feedback in Q3

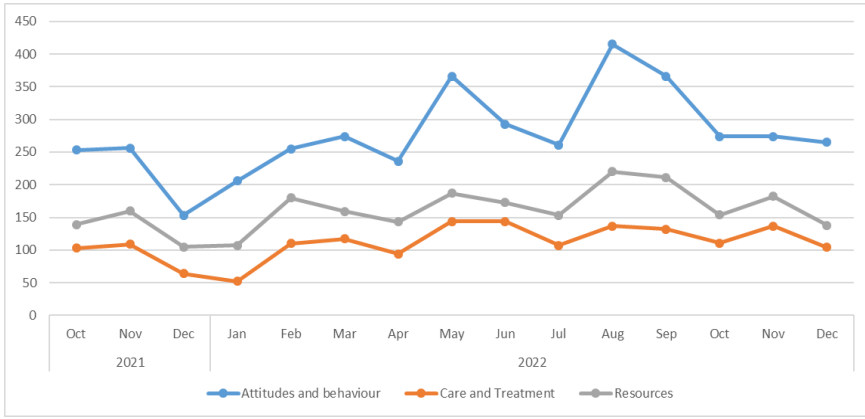


Is standard being delivered?

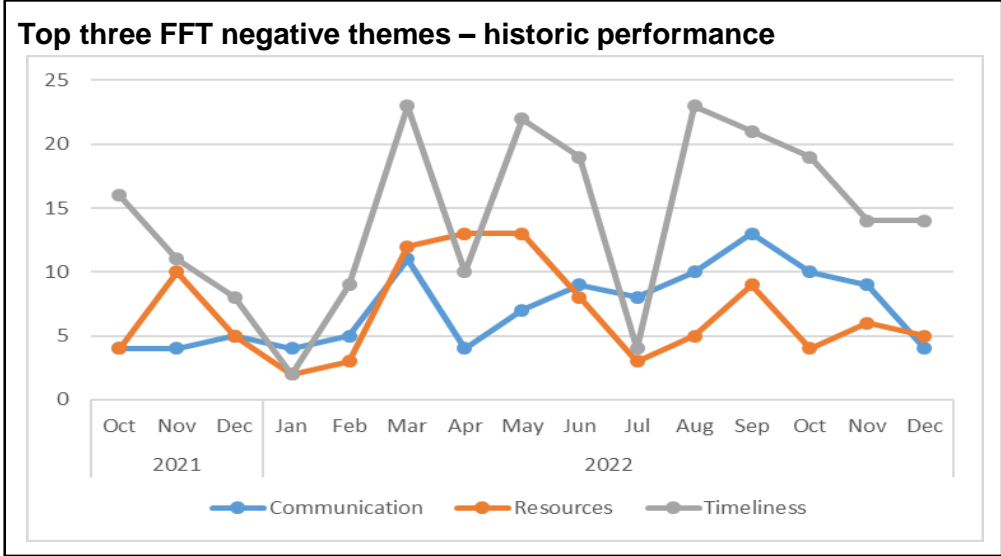
In Q3 2022 the proportion of patients across the Trust that responded positively (**very good or good**) about their overall experience was 95.1%. This is a reduction from 96.4% in Q2 2022.

FFT responses Q3 2022	Overall Patient Experience numbers			
	Medicine Division	Surgery Division	F&SS	Corporate (ED)
Very good/ good	96.1% (892)	96.8% (606)	96.5% (411)	69.5% (59)
Poor/ very poor	1% (9)	1.8% (11)	1.9% (8)	23.5% (20)
Neither good nor poor	2.9% (27)	1.4% (9)	1.64% (7)	7% (6)

Top three FFT positive themes – historic performance



Friends and Family Test



Top three negative themes in Q3 and top contributors

Timeliness (47) patients reported very long waits in the Emergency Department with a lack of information about what is happening next and access to pain relief.

Communication (23) patients have stated their concerns regarding a lack of information being communicated to them whilst in the hospital about what is happening next.

Resources (15) patients told us that they see a lack of staff which is impacting on their experience whilst in hospital. This theme is found across 13 wards during Q3.

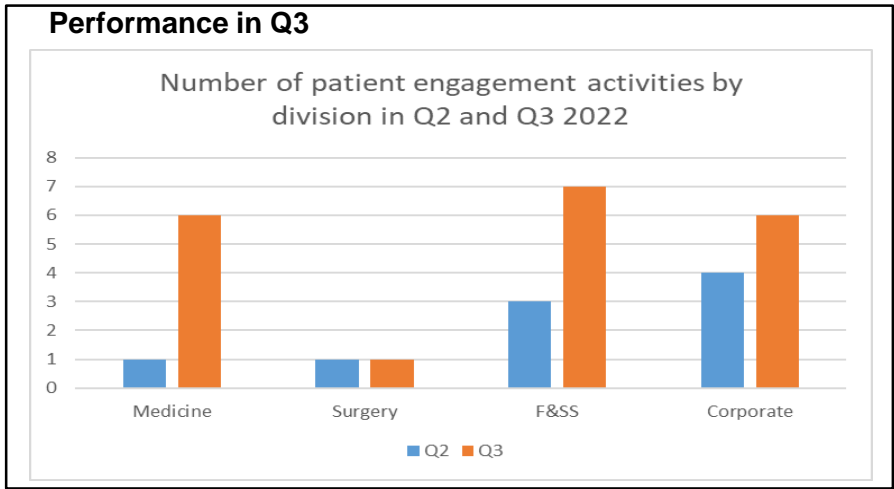
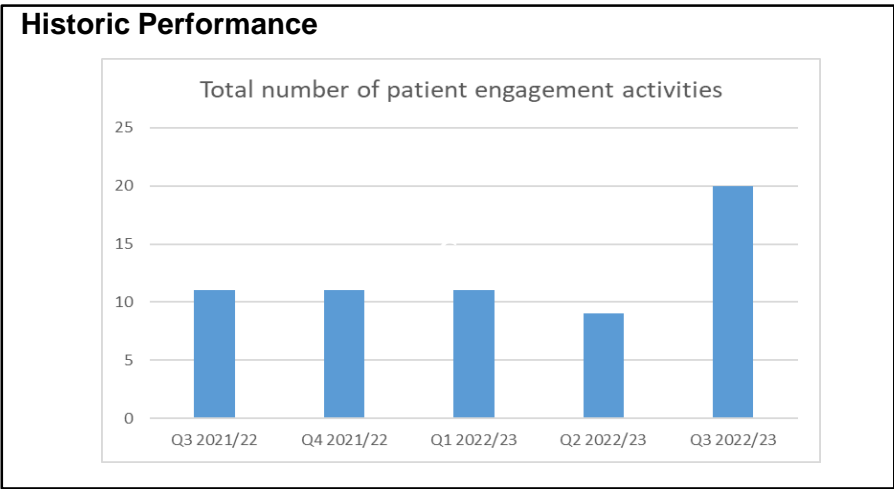
178 comments about timeliness
129 of the 178 comments were positive - for example, no waiting in hospital, seen quickly and on time, quick and efficient staff.
From the moment I walked in I was very impressed. Friendly reception team and great nurses and doctors. I ended up in Resus but was treated so quickly and professionally - ED patient.

2 neutral and 47 negative comments – as detailed in the top three negative themes section above.

310 comments about communication
287 of the 310 comments were positive – for example, helpful explanations given, informative, given advice, information and care.
I felt like I was looked after very well and understood everything that was happening - Phillip Yeoman.
23 negative – as detailed in the top three negative themes section above.

FFT feedback	Actions as a result of patient feedback	Lead
Children's Ward shower flooded the room right into the corridor. Mary Ward – mouldy shower door opposite to ward 10 needs replacing with something that can be wiped down. Oncology – no heating in the changing room.	Shire dockets raised. During December, the hospital experienced several issues with heating. This is now resolved. Portable heaters were sourced through the Shire System following an assessment by the Estates team to check the electrical load and the environment where the heaters were placed.	Nicky Bonner, Estates Officer Operations, Estates and Facilities

Patient engagement



Engagement activity	Learning	Actions taken as a result of patient feedback	Lead
Use of virtual appointments and 6 session model in the Specialist Paediatric Fatigue Service	Patients found that a review at six sessions was appropriate – clinicians will continue to introduce this model in a patients' first session, and keep a log of the number of appointments they have had on their millennium notes. A review will be routinely carried out with patients at session 6.	The questionnaire findings and recommendations were shared at a team meeting. Resources to support with this model, including a six session blueprint, are already available to the team.	Dr Zoe Engledew, Clinical Psychologist
	Patients found that virtual appointments were mostly accessible and helpful - patients will continue to be offered their choice of face-to-face or virtual appointments.	The questionnaire findings were shared at a team meeting. Implications relating to privacy and confidentiality of virtual appointments, particularly for psychology colleagues, were discussed.	Dr Zoe Engledew, Clinical Psychologist
	Patients sometimes encountered technical difficulties when accessing online appointments.	Guidance on how to join the Teams meetings will be sent to patients prior to their first appointment.	

Patient engagement

Engagement activity	Learning	Actions taken as a result of patient feedback	Lead
CT Colonography Patient Experience Questionnaire	<p>Some patients were unsure about contacting the department prior to their scan.</p> <p>All patients were positive about staff attitude and professionalism.</p> <p>No obvious changing room.</p> <p>No mention of taking painkillers prior to the test.</p>	<p>New admin staff being appointed who will call patients prior to their scan to check that they have received their prep. This could be addressed with a new appointment, or making sure patients are spoken to by experienced staff.</p> <p>The changing room is around the corner, patients are often advised to use the toilet, but staff will now direct patients to the dedicated changing room.</p> <p>Reviewed the preparation letters and added in about the use of pain killers prior to the test.</p>	Julie Punter, Radiographer
Patient and Parent/Carer experience survey of Paediatric Oncology Service	<p>When directly compared with NHS England U16 Patient Cancer Experience survey we outperformed on all measures for both oncology team and ward staff.</p> <p>Although better than national results facilities for overnight stays need improvement and Wi-Fi access on the Children's centre needs improvement.</p> <p>The suspected shortfall in care out of hours has pleasingly proved unfounded.</p>	<p>Disseminate positive feedback to ward and oncology staff.</p> <p>Meeting with ward Matron and Friends of the RUH to update ward side rooms. Action agreed to source large sofa beds for cubicles using legacy money.</p> <p>Present survey methodology and findings at Regional Oncology study day.</p>	Dr Polly Bates, Associate Specialist Paediatric Oncology