

Patient
Experience
Report

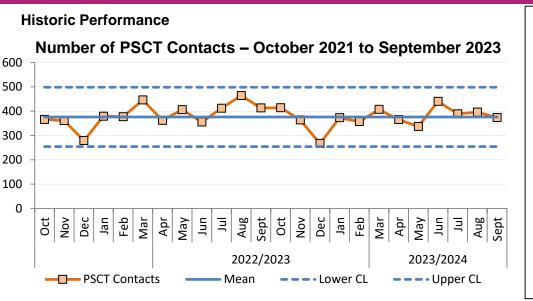
July – September 2023



The RUH, where you matter

	NHS Foundation Trust	
Executive Summary		
Complaints	57 complaints were received in Q2 (compared to 59 in Q1).	
	The primary themes of complaints across all departments was clinical care and concerns (39) – this includes, general enquiries, co-ordination of medical treatment, inappropriate care and treatment, wrong diagnosis/treatment, quality concerns regarding medical care, error performing a procedure and competence/knowledge of staff. Concerns relating to communication and information are included in a number of complaints but is not always the primary subject of the complaint. There continues to be an improvement in the 35 working day target response to complaints – this was 88% in September.	
Defices		
Patient Support & Complaints Team (PSCT)	 1174 contacts in Q2 (compared to 1179 in Q1). The top 3 issues for resolution remain the same however there was an increase in the number of patients asking about appointments and communication and information issues. Communication and information – top contributors are Gastroenterology, Orthopaedics, Audiology, Gynaecology and Cardiology. The majority of contacts related to telephone issues (phones not answered/not working). Appointments – top contributors are Cardiology, Gastroenterology, and Gynaecology. Patients were contacting about the length of time they are waiting for appointments. Clinical care and concerns – top contributors were Radiology, General Surgery, Emergency Department and Orthopaedics. The majority of contacts related to patients chasing test results in addition to inappropriate care/treatment. 	
Friends and Family Test (FFT)	There has slight decrease in the overall patient experience scores this quarter from 97.5% in Q1 to 97.3% in Q2. The Trust has signed a years contract with Healthcare Communications. This will support real-time feedback to wards and outpatient departments via a text messaging service and staff access to a dashboard with analysis of themes and patient comments. This will be introduced into the Trust in October 2023.	
Family Liaison Facilitator Service (FLF)	Information about the FLF service is included on slide 14 of this report. 264 family calls and 237 discharge calls were made in Q2. The service is currently funded for 30 hours over 4 days.	
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 slide 13 of this report.	

PSCT – Performance/Issues Requiring Resolution



Performance in Q2

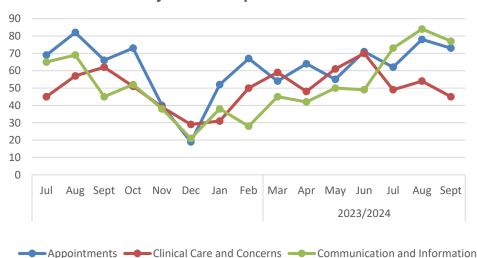
There were **1174** PSCT contacts (this compares to 1179 in Q1) There were **766** issues for resolution. Top 3 issues were:

- 1. Communication and Information = 234
- 2. Appointments = 213
- 3. Clinical Care and Concerns = 148

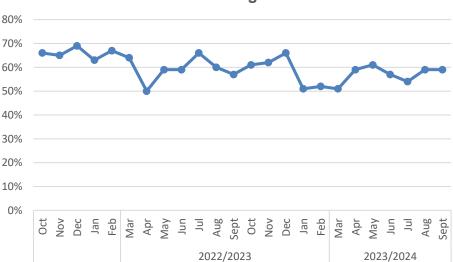
Closure of the **766** PSCT issues for resolution within the 48 hour target fluctuates, due to the complexity of some cases which require more than 48 hours to investigate and the capacity/availability of clinical staff to respond to enquiries.

The number of PSCT cases has continued to remain high which is impacting on the Trust response times.

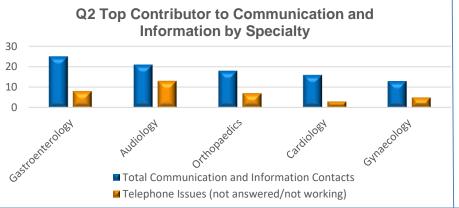
PSCT top contributors to Issues for Resolution July 2022 - September 2023

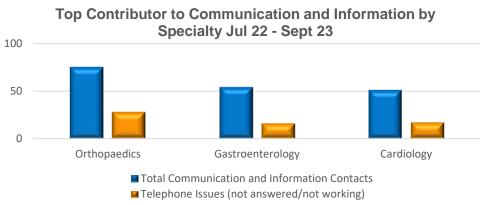


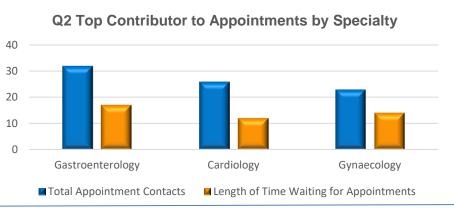
PSCT percentage of enquiries closed within 48 hour target



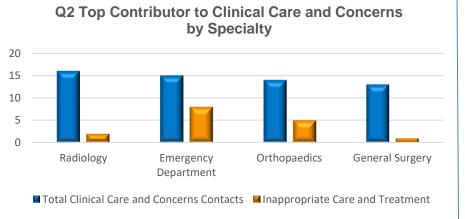
PSCT - Issues Requiring Resolution

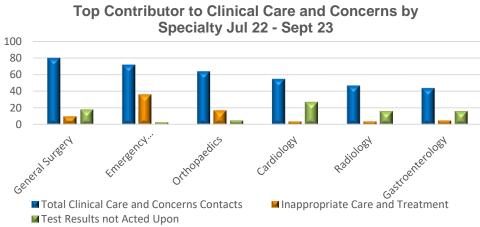








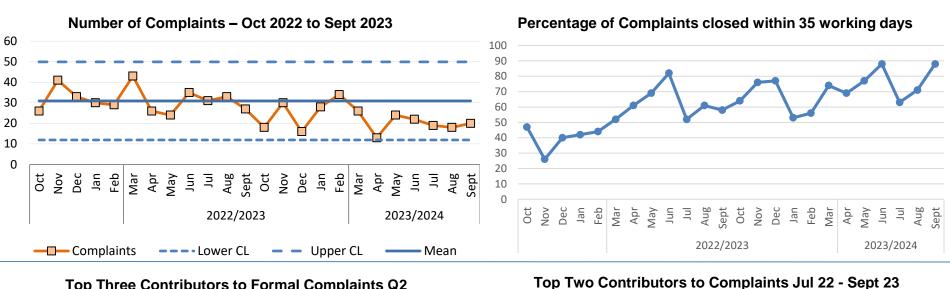


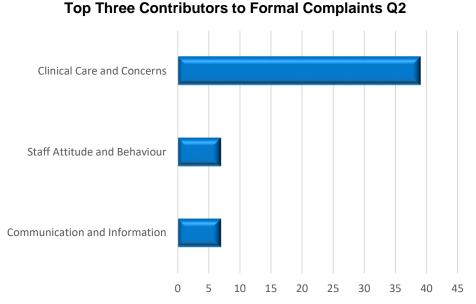


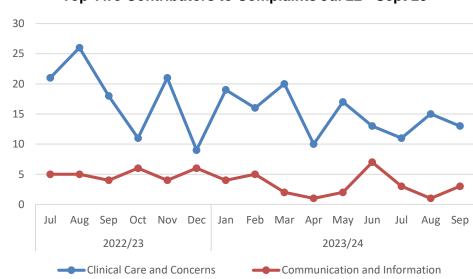
Complaints – performance/top contributors

Performance in Q2

There were **57 complaints received in Q2** (this compares to 59 in Q1). Medical Division (31) this includes ED, Surgery Division (11), F&SS (13), Corporate (1), Estates and Facilities (1)

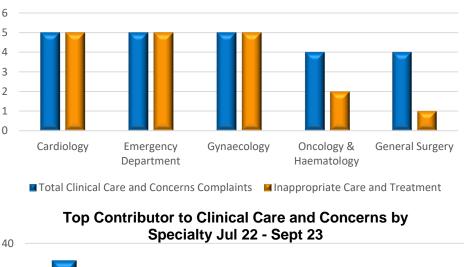


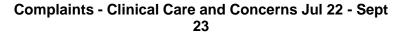


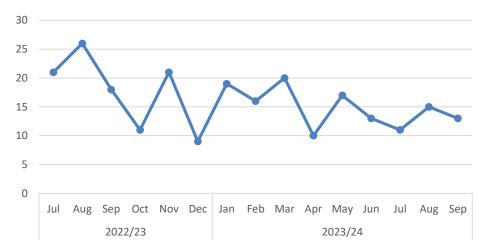


Complaints – Clinical Care and Concerns





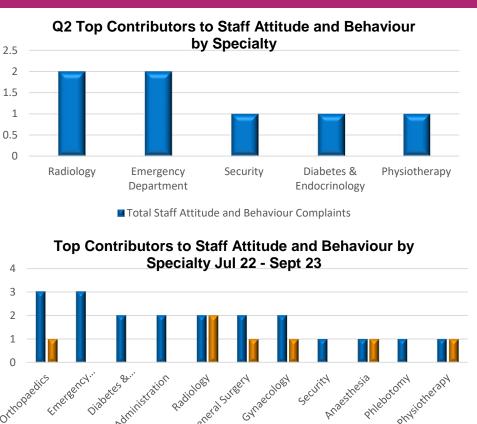




30				
20				
10				
0	Emergency Department	Orthopaedics	General Surgery	Oncology & Haematology
	■ Total Clinical Care a	and Concerns Complain	ts ■Inappropriate Ca	are and Treatment

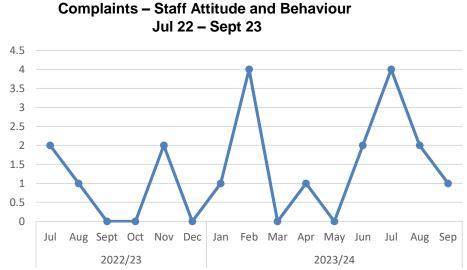
Division	Actions taken/countermeasures	
	Concerns about clinical and nursing care and communication and updates for family. Outcome Staff reminded to complete information on next of kin contact details and documenting the next of kin full nam notes. Pressure relief and comfort when patients are transferred to external providers or in hospital transport training to be delivered to staff.	
F&SS	Concerns about cancer care and treatment, specific questions raised by family through the Medical Examiner Office. Outcome Detailed explanation of care and treatment provided to family. Meeting with Specialist Nurse and consultant offered.	

Complaints – Staff Attitude and Behaviour



■ Total Staff Attitude and Behaviour Complaints

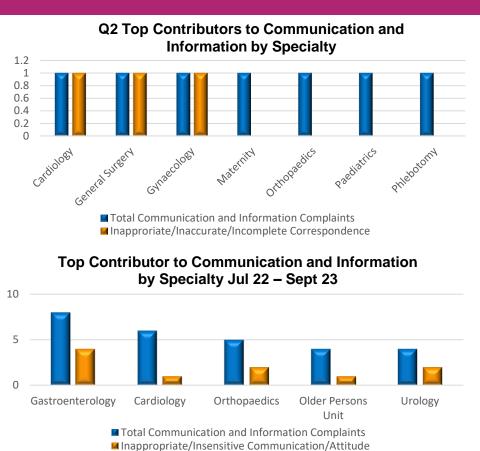
leadership support.

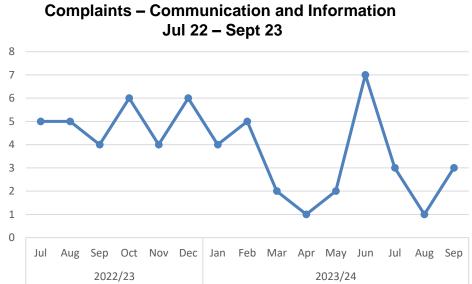


Division	Actions taken/countermeasures
Medicine	Wife believes late husband's thromboembolism was not diagnosed whilst an inpatient /general concerns re nursing care and catheter insertion.
	Outcome Patient experience of having a catheter inserted within a context of Delirium is considered and shared with all staff for reflection in relation to the fear this could cause and solutions to make the experience better for this group of patients. Provision of additional training and support to the ward on supporting patients that are deteriorating and nearing end of life and also around listening to concerns raised by families.
	Concerns about rudeness, arrogance and unprofessional behaviour during a consultation Outcome Team leader shared importance of clinicians introducing themselves with all interactions. Reflection of clinician involved with

■ Disinterested/Uncaring

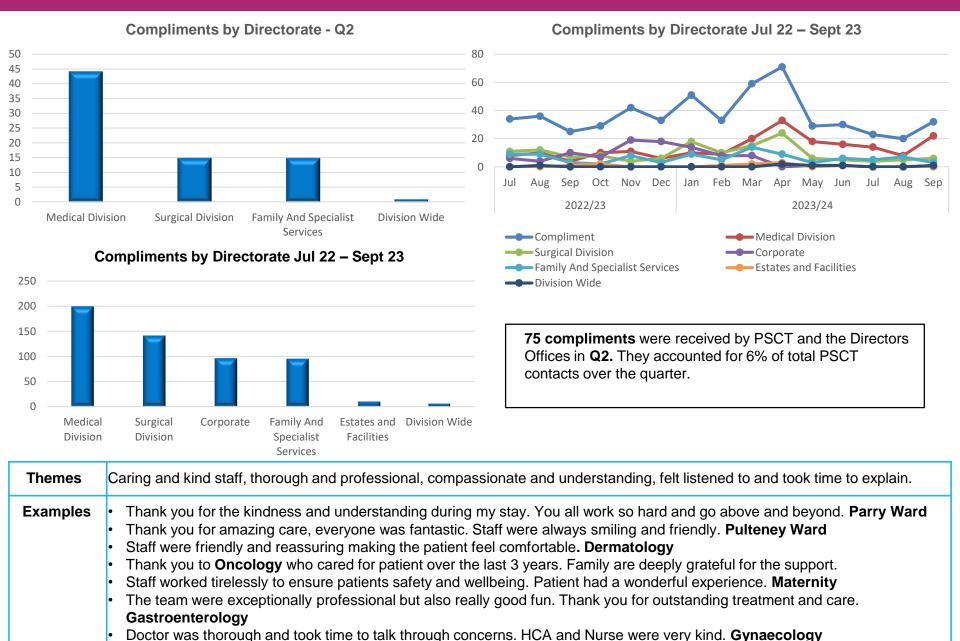
Complaints – Communication and Information





Division	Actions taken/countermeasures
Medicine	Concerns about delayed result and late clinic letter causing a delay to treatment. Outcome Increase in administrative staff to reduce waiting time for typing letters and reports. Implementation of new typing system to reduce backlog. Admin team to highlight any potential delays in signing reports and clinic letters to their manager.
F&SS Late patient's son received a clinic letter about his father several months after his death causing upset and distress Outcome processes and standards have been reviewed and reinforced. The administration team have been inform importance of double-checking every patient record for accuracy and ensuring the relevant patient is not deceased sending out any correspondence.	

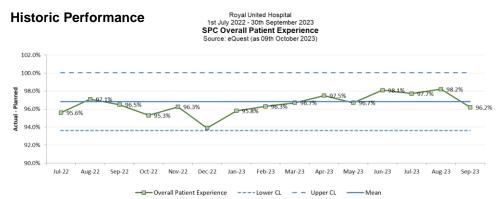
Compliments

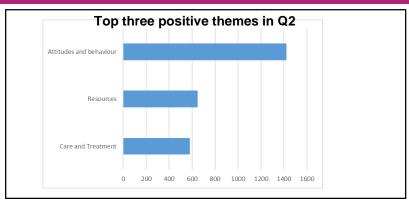


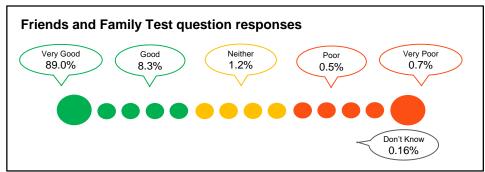
PSCT – Actions Taken/Countermeasures

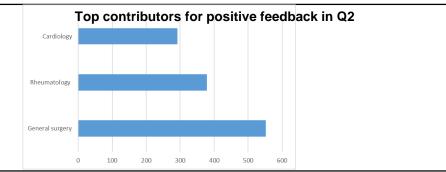
Issues to be addressed	Actions taken
The Gastroenterology department is a top contributor for issues concerning appointments and communication and information.	The Lead for Patient & Carer Experience met the Speciality Manager for Gastroenterology in October to discuss patient concerns. There has been a 54% increase in 2 week wait cancer referrals since 2019. Wait times are lengthy but have reduced from 82 weeks to 67 weeks. There is a long diagnostic pathway. Extra clinics are being put on and suitable patients are being offered to go to an alternative provider. The specialty are focussing on the whole pathway wait. Patients on the 'surveillance' list (1, 3 & 5 years) were not seen during the pandemic. The department have recruited additional clinicians to help address the backlog. There is additional funding in place to expand the recovery department so that more patients can be treated. Better use is being made of clinic slots and calling patients prior to their endoscopy appointment has helped to reduce the 'Did not attend (DNA) rate.
The Cardiology department is a top contributor for issues concerning appointments and communication and information	The Lead for Patient & Carer Experience raised the issues with the Divisional Director in Medicine and the Specialty Manager for Cardiology. The Division were aware of the issues and have been actively working to improve the current backlog of letter typing and test results for patients. They are in the process of implementing an IT system called Nuance to solve the issue, not just for cardiology but Trust wide. This IT system types the clinic letter as the clinician is dictating it. The team are also reviewing processing and signing off results. The typing backlog is reviewed on a daily basis by the Divisional Director and additional 'editors' have been employed to check the letters prior to them being sent out. It is expected that the backlog will be cleared by mid-January.
Emergency department complaints related to inappropriate care and treatment and staff attitude and behaviour.	The Patient Experience team are running customer service/patient experience sessions for staff in the Emergency department starting with support staff in December /January.

Friends and Family Test





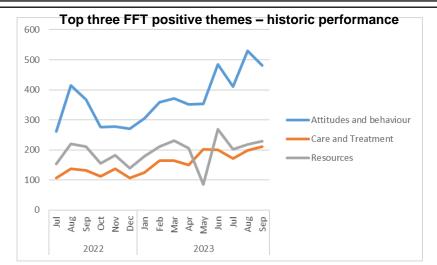




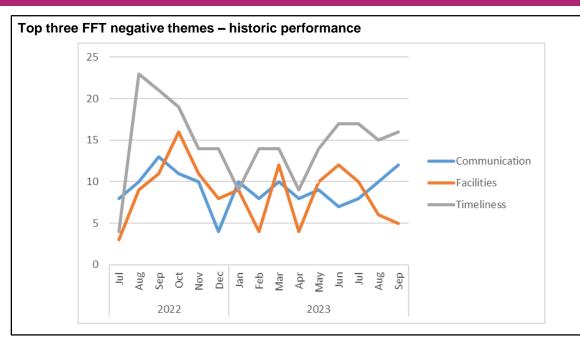
Is standard being delivered?

In Q2 2023-24 the proportion of patients across the Trust that responded positively (**very good or good**) about their overall experience was 97.3%.

FFT responses	Overall Patient Experience numbers		
Q2 2023	Medicine Division	Surgery Division	F&SS
Very good/ good	97.0% (1505)	97.9% (973)	97.4% (442)
Poor/ very poor	1.4% (20)	1.2% (11)	1.3% (6)
Neither good nor poor	1.6% (24)	0.9% (8)	1.3% (6)



Friends and Family Test



Top three negative themes in Q2 and top contributors

Timeliness (48) patients are reporting very long waits in the hospital for care and treatment. e.g. 15 of 48 responses were waiting to be seen in the Emergency department.

Facilities (21) Inpatients are telling us the ward areas are in need of updating, e.g. Cheselden Ward.

Communication (30) patients have stated their concerns regarding a lack of communication regarding their care and treatment plan, across 21 areas.

Timeliness

261 comments about timeliness

6 neutral and 48 negative comments – as detailed in the top three negative themes section above.

It is important to note that **207 of the 261 comments were positive** - for example; We were seen promptly, with friendly and informative staff who also gave good follow-up and after care. prompt and professional, quick and efficient. **ED patient**

Facilities

84 comments about facilities

3 neutral and 21 negative – as detailed in the top three negative themes section above.

60 of the 84 comments were positive – for example; *The room facilities and cleanliness are very good. Thank you very much as it meant a lot to patients when they were sick.* **Surgical Assessment Unit**

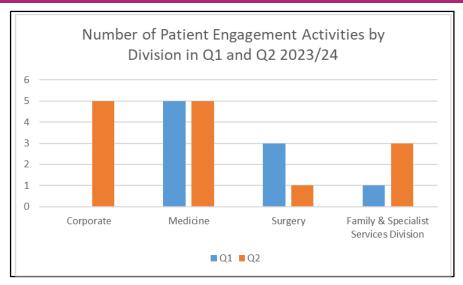
Communication

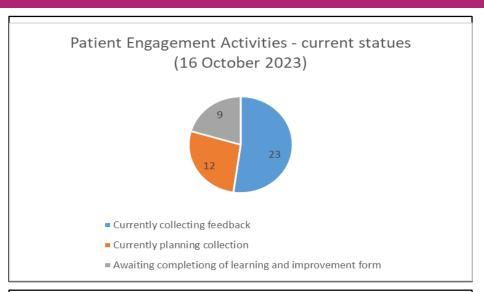
525 comments about communication

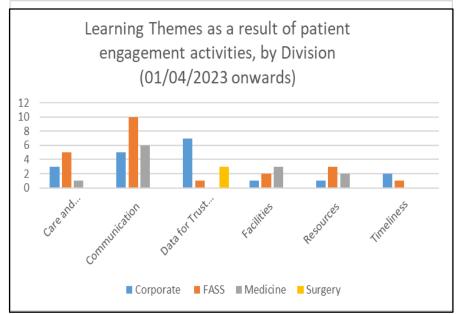
0 neutral and 30 negative comments – as detailed in the top three negative themes section above.

495 of the 525 comments were positive – for example; everything was explained before and during the procedure and I was reassured all the way through. **Radiology patient**

Patient engagement







Learning - communication

- Patients found that virtual appointments were mostly accessible and helpful
- Patients told use that they didn't receive test results in a timely manner
- Patients wanted to be able to contact the hospital by email or text

Learning - care and treatment

- Patients were positive about staff attitude and professionalism
- · Patients want to feel safe
- Need to improve joined up care across the multi-disciplinary team (MDT)

Learning - facilities

- Patients would like an accessible hospital with easy to locate departments
- Facilities for overnight stays needs improvement

Family Liaison Facilitator (FLF) service

264 family calls made in Q2	The majority of calls are made on the older persons wards and the Emergency department July 98 August 73 September 93
237 discharge calls made in Q2	July 126 85% had a discharge summary August 58 (reduced due to annual leave) 95% of patients had a discharge summary September 53 87% had a discharge summary An incident form is completed on Datix where discharge summaries have not been received by the patient.

I was treated exceptionally well. Absolutely no complaints at all. I know people complain about hospital food (and I am a bit fussy myself) but it was actually pretty good! **discharge call**

'The staff at the RUH were brilliant, so kind and caring. The consultants really spent time with me, asking lots of questions. I felt really cared for.' – **discharge call**

M was keen to say that she had worked in care all her life and she pleasantly surprised how excellent the care was that she received. She said 'It was really wonderful. They were so busy but so kind. They really were.' - **discharge call**

'It has meant such a lot being able to phone you and for you to get us in touch with my Aunty. It has been hard being so far away and not being able to visit very often, so thank you for making it easier' **family call**

'Thank you that we can always call you and you answer straight-away. I haven't been able to get hold of the ward.' family call

Making a difference

- Arranged for a graduation ceremony to be live-streamed for a patient who had a recent terminal cancer diagnosis and she was
 desperate to see her son graduate.
- · Had a patient's hearing aids cleaned and new tubes fitted
- Agrophobic patient in the Emergency department who was very anxious "Without you, I'd still be in A&E screaming, 'I can't do it!' Thank you for staying with me and organising everything. What you do is amazing."
- A patient, who was wanting to be involved in the decisions about his discharge from hospital, was unable to attend due to his disabilities. Mims, FLF set up TEAMS meetings from the quiet room on the ward to enable him to attend with his family.
- The daughter replied...Just to let you know Mum passed away last night...Thank you for being my last message from my Mum. I will treasure it yet. Thank you!