

Accessible Communication and Information for People with Sensory Loss

NHS Organisation	Hywel Dda UHB
Date of Report	October 2020
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The All Wales Standard for Accessible Communication and Information for People with Sensory Loss sets out the standards of service delivery that people with sensory loss should expect when they access healthcare. These standards apply to all adults, young people and children. The Accessible Information Standard requirements sit alongside the 'Standards' as an enabler to implementing them.

Reporting Schedule: This form is to be submitted on **30 October 2020 covering the period 1 October 2019 to 30 September 2020.**

Completed form to be returned to: hss.performance@gov.wales

Please attach an **updated action plan** that you may have in place to implement the All Wales Standard for Accessible Communication & Information for People with Sensory Loss



Sensory Loss action
plan 2020 - 21 v1.do

Reporting Period: 1 October 2019 to 30 September 2020

Needs Assessments	Key Actions Achieved	Risks to Delivery	Corrective Actions & By When
All public & patient areas should be assessed to identify the needs of people with sensory loss	<p>The needs of those with sensory loss are considered as part of the planning process for new builds and refurbishments.</p> <p>Ceredigion Integrated Occupational Therapy Service.</p> <ul style="list-style-type: none"> - Environmental - Team provides education for patients to overcome sensory changes, e.g. techniques to aid an inattention or visual field loss. - Provision of equipment to increase independence. For example blue toilet seat to aid depth recognition, kettle tippers, fluid level indicators, tactile markers on kitchen equipment, high visible markers around environment, white tape on steps to prevent falls. - Ensure call bell and drink etc. are appropriately placed on ward 	<p>No formal process is in place for auditing all patient areas.</p> <p>Lack of record keeping for the location of hearing loops (fixed and portable) across Health Board sites and Local Authority buildings. Relying on self-reporting creates a risk of not identifying all devices that are available.</p>	<p>Building on the pilot of the Sensory Loss Friendly Award, a checklist will be developed, to enable all patient areas to be assessed.</p>

<p>All public information produced by organisation should be assessed for accessibility prior to publication.</p>	<p>Corporate website: On March 01 2020 the health board launched a new corporate website https://hduhb.nhs.wales/ and in September 2020 archived the former website, which was inaccessible. The new website is vastly improved in terms of accessibility. This includes compatibility with assistive technology, ability to zoom up to 200% without the text spilling off the screen, content written in plain English, alt text descriptions, reduced numbers of pdfs and word documents with the preference for html.</p> <p>The website was audited in December 2019 (prior to publication) and the Health Board has addressed areas for improvement within our scope, and the third party website developer is working on fixes in their areas.the health board has commissioned the external advice, scrutiny and training for staff in creating accessible content during 2019/20 from the Digital Accessibility Centre https://digitalaccessibilitycentre.org/</p> <p>Videos: The communication team has introduced the necessity for all videos produced by the health board to be in a single language and subtitled as such.</p> <p>Social media: All social media images are now required to have alt descriptions, and any text embedded within the image must also be included in the text fields – we have received comments of thanks for this from users with accessibility problems.</p>	<p>Corporate Website: This website is partially compliant with the Web Content Accessibility Guidelines version 2.1 AA standard, due to the non-compliances and exemptions openly communicated in the accessibility statement</p> <p>Whilst some fixes will be within health board responsibility, any technical non compliances of the system (MURA) will be undertaken by NWIS on an All Wales basis</p> <p>Other health board websites:</p> <p>We are currently migrating the IAWN website into the new platform MURA (by end of October), this website contains a 3rd party bookcase tool and the service are currently in the process of updating self-help guides</p> <p>Currently there is no central database or list of other websites departments and services in the health board may have set-up. These may not be accessible.</p>	<p>The Communications Team is building a roadmap to detail corrective actions and aims to have this completed by December 2020. We have also mitigated the risk as much as possible by providing contact details for anyone having trouble accessing information on the website to receive support or alternative versions in the accessibility statement.</p> <p>Project group to gather register of websites that have been created by departments and services within the Health Board.</p>
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	<p>Other documents: Services work with the communications team and the diversity and inclusion team to consider the adaptations that can be made to documents to make them more accessible (e.g. font size, colour contrast, plain English) or the necessity of alternative versions of documents or resources to meet more complex needs.</p> <p>For example leaflets on COVID-19 have been produced in summary and Easy Read versions, as well as alternative languages. Some videos have been produced in BSL format.</p> <p>Ceredigion Integrated Services Team have recently updated sensory loss literature with adult social care.</p>	<p>There is currently no accessible communication and information policy or guidance available to respond to recent legislation on digitally accessible information.</p>	<p>An accessible communication and information policy will be created and will include guidance on the Accessibility Regulations for websites and mobile applications.</p>
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Standards of Service Delivery	Key Actions Achieved	Risks to Delivery	Corrective Actions & By When
Health Prevention (Promotion Screening, SSW, Flu Vaccination, Bump Baby & Beyond). Priority areas include:			
Raising staff awareness	<p>Staff are aware of the availability of accessible formats (including Help Me Quit resources) via staff intranet, social media, team meetings, network development events and promotion of the shared portal where resources are stored.</p> <p>Raising staff awareness of COVID-19 response is ongoing, with information in accessible formats shared via staff bulletins, social media and the Health Board website.</p>		
Ensuring all public information is accessible for people with sensory loss	<p>Accessible resources are produced by other organisations such as Public Health Wales e.g. Beat Flu and Screening Services and used for local campaigns.</p> <p>COVID-19 response information is in a range of formats and is available to staff and the public. It is updated in line with current and emerging guidance.</p>	Updated guidance needed for producing resources in accessible formats in-house.	Plans are in place to develop an accessible communication and information policy.
Accessible appointment systems	My Health Online (MHoL) is being used by some GP practices for patients to make appointments.	MHoL appointments module is not available in all GP practices.	Continue to encourage increased usage of MHoL by all GP practices.

	<p>The Health Board has a contract for BSL interpreters and all staff are made aware of the processes for booking of interpreters.</p> <p>Contact can be made with some services via Minicom and text, to make an appointment.</p> <p>Drop-in sessions are available for patients and staff wishing to take up flu vaccinations.</p>		
Communication models	<p>Social Media and Health Board website used to communicate PHW campaigns and signpost to local delivery. Resources include BSL videos and audio.</p> <p>BSL Interpreters are available for patient appointments.</p>		

Standards of Service Delivery	Key Actions Achieved	Risks to Delivery	Corrective Actions & By When
Primary and Community Care. Priority areas include:			
Raising staff awareness	<p>Deaf Blind awareness training was delivered to staff working in Integrated Services with another training session planned later in the financial year, dependant on Covid restrictions.</p> <p>Sensory loss awareness sessions were held across the Health Board during Sensory Loss Awareness month, which included demonstrations of equipment and personal stories relayed by guide dog users.</p> <p>Dementia Friendly training includes sensory loss awareness.</p> <p>Presentation by the Strategic Partnerships, Diversity and Inclusion team to Primary Care Leads to raise awareness of the standards and address any accessibility issues.</p> <p>A social worker for deaf people, a rehab officer for hearing impaired people & rehab officers for visually impaired people are co-located in Community Resource Teams to raise awareness of their service</p>	<p>Lack of awareness by staff in using Next Generation Text (NGT).</p> <p>Issues with a lack of BSL interpreters available across Wales generally and in rural areas specifically.</p>	<p>An article will be included in the next GMS newsletter to promote the use of Relay UK (previously called NGT).</p> <p>A lack of BSL interpreters has been addressed by the use of online interpretation services.</p>

	<p>and work jointly with the range of professional groups in the team.</p> <p>Awareness raised via GPOne portal, including links to CEHR's resources, BSL videos, posters and videos for GP practice screens.</p>		
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Standards of Service Delivery	Key Actions Achieved	Risks to Delivery	Corrective Actions & By When
<p>Accessible appointment systems</p>	<p>Attendance by the Strategic Partnerships, Diversity and Inclusion team at Primary Care GMS Access and Sustainability Forum to support progress with accessible appointment systems and implementation of the Access to in-hours GMS Service Standards. To meet the requirements of the Access to in-hours GMS Service Standards, by the end of March 2021, 25% of all pre-bookable appointment will be bookable through a digital solution (e.g. MHoL) and 100% of practices will offer access to repeat prescriptions through a digital solution (e.g. MHoL).</p> <p>Approximately 70% of GP Practices will shortly begin to use eConsult. eConsult is an online consultation service that links patients to their GP and allows them to submit consultation requests to their practice. It also allows patients to access self-care, pharmacy, local self-referral service and appropriate signposting, without having to switch to a digital provider or register for additional services. This service will improve access to services for patients with sensory loss.</p> <p>SMS text reminders are used for out-patient appointments.</p> <p>Health visiting and school nursing use letters and SMS text.</p> <p>Patients are able to communicate by email with some services.</p>	<p>MHoL is not available at all GP practices.</p> <p>Areas such as community nursing have highlighted the need to make appointment systems more accessible.</p>	<p>By the end of March 2021, 100% of practices will be contactable via email/digital tool to request routine (non-urgent) appointments or call-backs.</p> <p>A task and finish group has been set up by community nursing teams to improve the accessibility of appointment systems and develop a range of communication models.</p>

Standards of Service Delivery	Key Actions Achieved	Risks to Delivery	Corrective Actions & By When
Communication models	<p>Commissioning of an online interpretation service for all Health Board services was brought forward and implemented. Devices were distributed across key patient areas, to support communication and the use of online interpretation.</p> <p>Leaflets are available within community nursing teams to highlight low vision services.</p> <p>Letters are available in large print and Braille (on request).</p> <p>Health visiting has a member of staff who is a fluent BSL user.</p> <p>Primary Care and Out of Hours services use Attend Anywhere, which is an online consultation system that can be used with interpreters. Primary Care services have been reminded to use Relay UK to communicate with patients and also have access to BSL interpreters.</p> <p>Hearing loops are available at GP surgery reception areas.</p> <p>BSL introductory course undertaken by VI/ OT/ contact team staff within Ceredigion Integrated Team. Literature in standard and large print available, Braille or audio available on request. Rehab officer advises service users of Apps available which will assist on a day to day basis.</p>	<p>The capacity to provide face-to-face interpretation will continue to be affected by Covid-19 regulations.</p> <p>As not regularly used, staff lose BSL skills and information learnt. An unofficial social group was set up to meet regularly to continue using BSL skills learnt, however due to staff issues/time and subsequently Covid-19, meetings ceased.</p>	<p>Encourage the re-establishment of social group support mechanisms, depending on response required to Covid-19.</p>
Implementation of the Accessible Information Standard	<p>The Sensory Loss Partnership Forum has been re-established and includes representatives across Primary and Secondary Care and other partners, to ensure implementation of the Accessible Information Standards.</p> <p>Health visiting have fully implemented the Standard and record communication needs.</p>	<p>It was acknowledged that further action is needed to ensure implementation across the community nursing service.</p> <p>A small percentage of GP surgeries were not</p>	<p>A Task and Finish group will be set up to ensure full implementation of the Accessible Information Standard across community nursing.</p> <p>A follow up survey with GPs will be carried out and additional</p>

	<p>School nursing works closely with the schools, to identify any communication needs of pupils, parents and guardians.</p> <p>Ceredigion Integrated Services Team works closely with the Disability forum and meet on a regular basis. Rehab officer has developed close working relationships with therapist within Bronglais Hospital as well as with specialist nurses i.e. Diabetic and Stroke, to address specific concerns around joint service user/patient, to resolve a concern/situation for a successful outcome.</p>	compliant with the Standard.	<p>support provided where there is still non-compliance. .</p> <p>The Partnership Forum will ensure progress and continued development of an action plan for the Standards for Accessible Communication and Information for People with Sensory Loss and the Accessible Information Standard.</p>
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Standards of Service Delivery	Key Actions Achieved	Risks to Delivery	Corrective Actions & By When
Secondary Care. Priority areas include:			
Raising staff awareness	<p>Staff awareness is delivered through a range of mechanisms including corporate induction training and the Manager Passport Programme (for new and existing managers). These sessions include raising staff awareness that the process for booking interpreters has been simplified.</p> <p>Sensory Loss e-learning is highlighted as an additional module which staff are encouraged to complete. All Audiology staff have completed the sensory loss e-learning module.</p> <p>All Audiologists receive awareness training as part of their initial and ongoing training. Audiology has introduced meetings with colleagues from Social Services who work with the hearing impaired. Audiology Reception staff have been issued with laminated information sheets on effective communication strategies for those with sensory loss.</p> <p>Audiology Reception staff, together with other key, patient facing staff have been offered places on a full</p>	<p>Condensed induction training and suspension of Manager Passport Programme during the Covid-19 pandemic</p> <p>Staff prioritise statutory and mandatory training so the</p>	<p>The Learning and Development Team are currently developing alternative training options, including an updated induction booklet and training delivered via Teams and pre-recorded videos.</p> <p>Face to face training will be reintroduced after the Covid-19 pandemic</p> <p>Continue to promote the sensory loss e-learning package</p>

	<p>Deaf Awareness and module one of BSL Level 1 course, with exam.</p> <p>Sensory Loss e-learning is highlighted as an additional module which staff are encouraged to complete. Audiology staff have been reminded of the importance of completing the sensory loss e-learning at staff meetings.</p> <p>Sensory loss awareness sessions were held across the Health Board during Sensory Loss Awareness month, which included demonstrations of equipment and personal stories relayed by guide dog users.</p> <p>Overview of the standards and actions that are required have been communicated to services across the Health Board via invitation to team meetings.</p> <p>The corporate communications team and key staff who regularly publish information on the health board's website, have received some introductory training in digital accessibility from the Digital Accessibility Centre.</p> <p>Enhanced Patient Management and Support Policy - those with sensory loss may be at greater risk of falls, dehydration and potential malnutrition during long hospital stays. Communication difficulties have the potential to lead to misunderstandings from both patient and clinician point of view. Action was taken including: Levels of care were aligned with the Welsh Levels of Care Document and illustrative examples of where patients may require enhanced support under these circumstances were added to the Policy. The following additional paragraph was also added to the policy to alert staff to the necessity to identify and meet the particular needs of individuals when implementing this policy.</p> <p>“Sensory Loss: - A number of people within the hospital setting will have some form of sensory</p>	<p>completion rates for non-mandatory training are lower.</p> <p>Sensory loss e-learning module currently has no assessment and is not registering as complete on staff training records (ESR)</p> <p>This training is suspended during the Covid-19 pandemic.</p>	<p>during corporate induction and Manager Passport Programme and through the Sensory Loss Partnership Forum. Plans to make the training mandatory in 2021.</p>
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	<p>impairment (such as sight loss, hearing loss or both). The evidence demonstrates that ineffective communication is a patient safety issue and can result in poorer health outcomes. There may be instances where reasonable adjustments are required, including an enhanced level of care, to ensure that all access and communication needs are met.</p> <p>Outcome – reduced risk of adverse incidents for in-patients with sensory loss”</p>		
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Standards of Service Delivery	Key Actions Achieved	Risks to Delivery	Corrective Actions & By When
<p>Accessible appointment systems</p>	<p>Various methods are available including email and SMS text.</p> <p>SMS text reminders are used for outpatient appointments and for patients on waiting lists. Text reminders include the capability for patient to respond with yes/no.</p> <p>Service-users can access Audiology by phone, email, SMS text or in person.</p> <p>Dietetics department takes a person centred approach and if a referral indicates the person has a sensory</p>	<p>The audiology department does not have access to Type-talk due to the limited number of service-users who use this form of technology.</p> <p>During the pandemic Audiology contacted patients by phone to conduct those parts of their appointments that could be completed ‘virtually’. However, the limited number of phone lines / mobile phones impacted on this.</p>	<p>Relay UK can be used as an alternative to having a Minicom.</p> <p>5 mobile phones were requested in May but have not been delivered yet.</p>

	<p>loss, then arrangements are made to meet these needs:</p> <ul style="list-style-type: none"> • phone contact to agree appointment plan as well as/ or letters • use of interpreters if required, • the dietetic team individualise resources to enable the person to access them for example increasing print size, signposting to resources that will support the identified need 		
<p>Communication models</p>	<p>Audiology reception desks within Glangwili, Prince Philip and Withybush Hospitals have portable loop systems to allow service-users to maintain effective communication. The portable loop in Bronglais Hospital has been relocated to the main out-patient reception area as this is a more beneficial location for this provision.</p> <p>Glangwili and Withybush hospitals were provided with 2 tablets (via Covid Charitable funds) to enable effective communication with those patients who were either unable to secure an interpreter to attend with them or who struggled with communication due to facemask usage.</p> <p>All Audiology rooms have laminated 'instruction' cards that explain processes for those patients who struggle to hear the Audiologist due to their hearing loss or the use of facemasks.</p> <p>There are a number of paediatric staff who are trained in BSL and able to support children and their families.</p> <p>Children's Occupational Therapy Service uses a range of communication aids and assistive technology as part of service provision. The service ensures access to whatever is appropriate to the service user. Tablets are available to support communication.</p> <p>Communication resources such as large print, written, virtual, online are provided for patients. The service also has a website with information and materials</p>	<p>The capacity to provide face-to-face interpretation will be affected by interpreters who are Covid-19 symptomatic, self-isolating and social distancing.</p> <p>Clear, single use face masks are being trialled by the Health Board but can't be considered as an approved item for purchase until the end of the trial.</p>	<p>Commissioning of an online interpretation service for all Health Board services was brought forward and implemented. Devices were distributed across key patient areas, to support communication and the use of online interpretation.</p> <p>Audiology is working with the Health Board's Procurement Team to look into the procurement of clear facemasks once these have been approved for use.</p>

	<p>available and access the appropriate interpreters when required.</p> <p>Ceredigion Integrated Occupational Therapy Service use communication aids and assistive technology used including:-</p> <ul style="list-style-type: none"> - Talking clock/watches, orientation aids (calendar), mobile phone prompts, alarm clocks. - There is a loop system in CILC sensory room. There is a Portable loop system within the council. - Communication – Large print signs, written orientation boards, encourage notepad writing, mobile phone reminders. Attend anywhere to communicate with family being trialled which can include subtitles and use of an online BSL interpreter. - Large print documentation, use of Minicom, preferred method of contact used (email etc), liaise with nominated contact. - Refer on to suitable community services e.g. orthoptist, ophthalmologist or optometrist, for visual changes. Organise online interpreters. Refer onto appropriate therapy teams in community. <p>Tablets have been distributed across the Health Board, to support communication and were pre-loaded with an interpretation app.</p>		
<p>Implementation of the Accessible Information Standard</p>	<p>Sensory Loss Partnership Forum that includes representatives across Primary and Secondary Care and other partners, to ensure implementation of the Accessible Information Standard.</p> <p>The Audiology service has reviewed all of its leaflets (and developed new leaflets) following a Community Health Council survey which highlighted issues with keeping patients updated as to their care pathways. These have been approved by the Patient Experience Team.</p>	<p>Patients may struggle to access additional information if it is not in the correct format.</p> <p>Leaflets are not currently available bilingually.</p>	<p>The Sensory Loss Partnership forum continues to monitor implementation of the standards, expand membership of key staff and co-opt external organisations.</p> <p>The leaflets are in the process of being translated into Welsh.</p>

Standards of Service Delivery	Key Actions Achieved	Risks to Delivery	Corrective Actions & By When
Emergency & Unscheduled Care. Priority areas include:			
Raising staff awareness	Promotion of the Emergency SMS service continues, including an article in the GMS newsletter.	Staff turnover within departments.	Further promotion is required across the Health Board in order to maintain awareness.
Communication models	Audio–visual systems in place. Commissioning of an online interpretation service for all Health Board services was brought forward and implemented. Devices were distributed across key patient areas, to support communication and the use of online interpretation.	The capacity to provide face-to-face interpretation will be affected by interpreters who are covid-19 symptomatic, self-isolating and social distancing. Face to face interpreter services are difficult to access for unscheduled care.	Raise awareness of the alternative audio-visual systems that are now available to aid clinical/patient communication.

Concerns & Feedback (CF). Areas include:	Key Actions Achieved	Risks to Delivery	Corrective Actions & By When
Highlighting current models of CF in place which would support individuals with sensory loss to raise a concern or provide feedback	<p>Concerns and compliments can be raised by: Phone; email; letter and SMS text.</p> <p>Resources on Putting Things Right are available on the website in a variety of formats including audio and large print. Resources in Braille are available on request.</p> <p>Patient feedback can be submitted via the health board website.</p> <p>The Patient Advice and Liaison (PALS) Team regularly visit wards and clinic areas to engage with patients, families and Carers whilst using Health Board services. A new digital (electronic) system - Friends and Family Test – has been introduced to allow all staff to capture patient experience feedback (both positive and negative) in real time so that it can be acted upon or escalated as necessary in a timely manner. The system allows the Health Board to review this feedback against other sources of information to identify where we need to make improvements or share good practice that others can learn from. As the</p>		Establishing a more robust system to learn from concerns and feedback is being explored collaboratively between the Strategic Partnership, Diversity and Inclusion Team, the Patient Experience Team and Patient Advice and Liaison Service.

	<p>staff complete the proforma in conversation with patients, this provides opportunity for patients with sensory loss to give their feedback in a way that is suitable for them, with assistance as required.</p> <p>Leaflets and Posters about our PALS team, Friends and Family Test, and Putting Things Right have been distributed to all wards, receptions and public areas in community and primary care and the replenishment of leaflets and posters is continuously ongoing.</p> <p>We continue to ensure that patients can easily access written information on how to leave patient experience feedback including compliments, opportunity to complete surveys or raise concerns or complaints.</p> <p>As part of a Welsh Government initiative to capture patient feedback from Accident and Emergency (A&E) departments, in January 2020, feedback terminals were installed using the smiley face options of recording feedback as well as a free text option.</p> <p>Ceredigion Integrated Services Rehabilitation Officer for the Visually Impaired in regular contact with local support/ VI clubs and is easily accessible by telephone or email for queries and concerns to resolve any issues promptly. This has continues on a more frequent basis during Covid-19.</p>		
Highlight any CFs received in sensory loss and actions taken	No CF's currently		

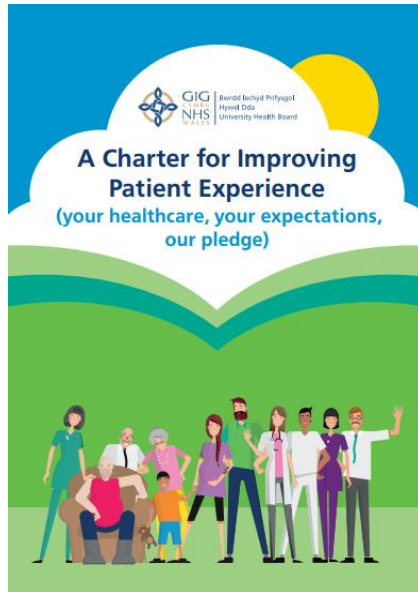
Patient Experience*	Key Actions Achieved	Risks to Delivery	Corrective Actions & By When
Mechanisms are in place to seek and understand the patient's experience of accessible communication and information	<p>The Patient Advice and Liaison Service (PALS) and the Strategic Partnerships, Diversity and Inclusion team are working together, to gather patient experience when using healthcare services.</p> <p>The Patient Advice and Liaison Services (PALS) team has Learning & Disabilities Champions and Investors In Carers (IiC) Champions. All team members continually promote and practice the "Hello my</p>		Deaf Awareness and BSL training will be provided to PALS teams, to support communication with patients.

name is” campaign. The PALS Team and Family Liaison Officers (FLOs) all wear name badges which are produced in yellow and black format. All team members are recognisable as they are in a coloured uniform with the Patient Experience Team identity.

Members of the PALS team have undertaken a “Digital accessibility” course which ensures that all documentation, presentations, posters, leaflets etc. comply with the WCAG 2.1 standard.

Patients Charter

The Patient Experience Team co-produced a patient experience charter setting out clearly what patients, families and carers can expect when receiving services from the Health Board.



The charter was developed following engagement with, and feedback from, patients and our communities on what matters to them when accessing care and treatment to enable a positive experience to be achieved every time

The Patients Charter is available in Welsh and is being procured in braille and in large print and audio formats.

HDUHBs Library of Patient Stories

Patient stories are shared in a number of internal training sessions to clinical and non-clinical staff and also at stakeholder forums, at Executive Board on a monthly basis – patient stories are thought provoking to those listening and aspires improvements (in the form of action plans) and changes to all aspects of health care provision.

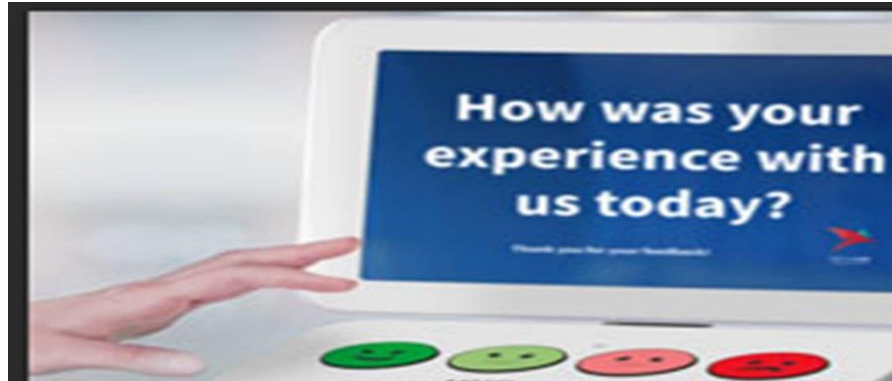
Care Opinion – national website is used for feedback.

Recommendations from the WAO report will be included in the Sensory Loss action plan.

Ongoing development and promotion of awareness of the appropriate formats.

Feedback Terminals – Accident and Emergency

Feedback terminals namely Happy or Not were installed into Accident and Emergency departments. The feedback is reported in real time to both HDUHB and Welsh Government (pre-COVID – currently removed).



Family Liaison Officers (FLO) – COVID19 Initiative

Following the imposed visiting restrictions to health care premises due to Coronavirus, HDUHB identified a need to ensure that all in-patients had the opportunity to communicate with loved ones whilst in hospital. A cohort of staff namely “Family Liaison Officers” were recruited and appointed to wards across all acute hospital sites and South Pembrokeshire Community Hospital. Initiatives were introduced to ensure patients were able to receive communications via written messages from loved ones via the “Thinking of you” email. Each FLO has an iPad which are set up for face time calls, skype, zoom, face book messenger, Insight – there are also various apps to support patients with language needs ie language line etc. The FLOs are able to support patients with sensory loss as they can spend time with the patients to greater understand their needs which can be shared with ward staff to ensure clear communication, and improve the patient’s experience.

Patient Feedback System

Friends and Family Test (FFT) provides real time feedback alerts that requires immediate attention – sent by text, email or both. The system captures each patient demographic with the opportunity to provide feedback, including visual answer symbols and easy to read options. The real-time dashboards are set up in the respective wards

Feedback used to secure ongoing improvements to service provision for those with sensory loss.

	<p>and departments and provides high-level results at a glance with real time response rates and recommendation scores. The system allows you to click on any word with instantly available data for 'live' positive and negative themes: Up to 10 Key words can immediately alert staff to issues eg vision, hearing etc. The system also supports the creation of bespoke survey's which are support by the Patient Experience Team.</p> <p><u>Patient Experience</u></p> <p>The Patient Experience Team are members on the HDUHB Sensory Loss group. Makaton awareness training has been undertaken by the PALS team and a member of the PALS Team is currently participating in a BSL ongoing training programme.</p>		
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	Key Themes	Corrective Actions & By When
The key themes to emerge from patient experience feedback (both positive and negative)	<p>Access to interpreters, in particular for unscheduled care situations.</p> <p>Maintaining staff awareness of communication needs of patients.</p> <p>Need to raise staff awareness of the NGT service and how this works in practice - staff are putting the phone down on the interpreter as they don't realise there is a short delay between answering the phone and the interpreter speaking.</p>	<p>An online interpretation service was implemented sooner than planned, in response to COVID-19.</p> <p>Further awareness sessions are planned on sensory loss, BSL, sighted guiding.</p> <p>Diversity and Inclusion team work closely with the Primary Carer team to continue to raise awareness of Relay UK (previously NGT) and article included in GMS newsletter.</p>

*** Patient experience mechanism and themes to be documented in this return applies specifically to patients with sensory loss who have accessible communication and information needs.** There is a requirement in the NHS Delivery Framework for NHS organisations to provide an update on patient experience for all patients (not just for those with accessible communication or information needs). This is to be reported on a separate proforma entitled 'Evidence of how organisations are responding to patient feedback to improve services' and links to the NHS Framework for Assuring Service User Feedback.