

CYFARFOD BWRDD PRIFYSGOL IECHYD UNIVERSITY HEALTH BOARD MEETING

DYDDIAD Y CYFARFOD:	27 May 2021	
DATE OF MEETING:		
TEITL YR ADRODDIAD:	Improving Patient Experience	
TITLE OF REPORT:		
CYFARWYDDWR ARWEINIOL:	Mandy Rayani, Director of Nursing, Quality & Patient	
LEAD DIRECTOR:	Experience	
SWYDDOG ADRODD:	Louise O'Connor, Assistant Director, Legal Services /	
REPORTING OFFICER:	Patient Experience	

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate) Er Sicrwydd/For Assurance

ADRODDIAD SCAA SBAR REPORT Sefyllfa / Situation

The attached report provides a summary of patient experience feedback and activity for the period ending 30th April 2021.

Cefndir / Background

The Board is asked to note the progress made in supporting the improvement of family and service user experience, and the current position in relation to feedback, including complaints.

Asesiad / Assessment

Patient and service user feedback is received into the UHB through a variety of routes: Friend and Family Test; compliments (formal letters received by the Chief Executive, Chair and the Big Thank You initiative); concerns and complaints, Patient Advice and Liaison Service (PALS) feedback; local surveys; the all Wales NHS survey and via social media.

The main areas of activity and progress for the Patient Experience Team are summarised in the report.

The Board is asked to note that, due to the short time period since receiving the patient experience feedback and the production of this report, comments have been sought from the services involved, and responses will be included in the next Board report.

For the period covered by the report, a total of 481 (605 previous period) concerns were received into the patient support contact centre; 246 were complaints managed through the 'Putting Things Right' process. This represents a decrease in the number of concerns and complaints received from the previous report period.

Public Services Ombudsman – One case has progressed to investigation during the period. Two final reports have been received, which were partly upheld. These cases will be presented to the next meeting of the Listening and Learning Sub-Committee. No concerns have been raised in relation to compliance with timescales and agreed actions at this time.

The predominant themes received from complaints and patient experience feedback continue to be around waiting times, restarting services, COVID-19 related concerns, communication,, and clinical treatment/assessment, including delays in diagnosis.

Communication with patients waiting for treatment is a priority for the UHB, and is being addressed as a matter of urgency.

Argymhelliad / Recommendation

The Board is asked to receive the Improving Patient Experience report, which highlights to patients and to the public the main themes arising from patient feedback.

Amcanion: (rhaid cwblhau)					
Objectives: (must be completed)					
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Risk 581 Health Board wide risk of not learning from events in a timely manner (current score 8).				
Safon(au) Gofal ac lechyd: Health and Care Standard(s): <u>Hyperlink to NHS Wales Health &</u> <u>Care Standards</u>	6.3 Listening and Learning from Feedback				
Amcanion Strategol y BIP: UHB Strategic Objectives: <u>Hyperlink to HDdUHB Strategic</u> <u>Objectives</u>	 4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners. 5. Deliver, as a minimum requirement, outcome and delivery framework work targets and specifically eliminate the need for unnecessary travel & waiting times, as well as return the organisation to a sound financial footing over the lifetime of this plan 				
Amcanion Llesiant BIP: UHB Well-being Objectives: <u>Hyperlink to HDdUHB Well-being</u> <u>Objectives Annual Report 2018-2019</u>	8. Transform our communities through collaboration with people, communities and partners				

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	NHS (Concerns, Complaints and Redress Arrangements) (Wales) 2011
Rhestr Termau: Glossary of Terms:	Included within the main body of the report

Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechy Prifysgol: Parties / Committees consulted priot to University Health Board:	d
Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	All concerns have a potential financial implication: whether this is by way of financial redress, following an admission of qualifying liability, or an ex-gratia payment for poor management of a process; or an award made by the Ombudsman following review of a concern.
Ansawdd / Gofal Claf: Quality / Patient Care:	Improving the patient experience and outcomes for patients is a key priority for the UHB. All concerns received from patients, public and staff alike are taken seriously and investigated in accordance with the procedures. Information from concerns raised, highlights a number of clinical and service risks which should be reflected in Directorate Risk Registers. All Directorates are required to have in place arrangements for ensuring lessons are learnt as a result of investigation findings regarding concerns and that appropriate action is taken to improve patient care.
Gweithlu: Workforce:	The 'Putting Things Right' process is designed to support staff involved in concerns and incidents. All managerial staff have a responsibility to ensure staff are appropriately supported and receive appropriate advice throughout the process. The success of the process is dependent upon the commitment and support from staff across the organisation, not only as part of the investigation process and transparency arrangements, but in the encouragement of patients and their families to provide feedback, both positive and negative, to support organisational learning.
Risg: Risk:	Information from concerns raised highlights a number of clinical and service risks which should be reflected in Directorate and Corporate Risk Registers. There are financial and reputational risks associated with complaints that are upheld or not managed in accordance with the Regulations. The UHB also has a duty to consider redress as part of the management of concerns, which

be a qualifying liability.

reports and redress packages.

carries financial risks associated with obtaining expert

The UHB has a duty under the Concerns and Redress Regulations to consider redress where this is deemed to

The Regulations also incorporate formal claims, including

clinical negligence and personal injury claims.

Cyfreithiol:

Legal:

Enw Da: Reputational:	There are ongoing reputational risks for the UHB in relation to media, press and social media regarding any concerns, and outcomes from published Ombudsman Reports and any external investigations/inquiries.
Gyfrinachedd: Privacy:	Only relevant information is reviewed as part of the concerns process and this is carried out with the explicit consent of the patient or authorised representative. Information is recorded and treated sensitively and only shared with individuals relevant to the investigation process.
Cydraddoldeb: Equality:	The process is established to learn from concerns: it is designed to ensure that it is fully accessible to patients and their families. The aim is to involve patients throughout the process and to offer meetings with relevant clinicians, with the required support depending upon individual needs. Advocacy is offered in the form of Community Health Council (CHC) advocates, and specialist advocacy is also arranged where necessary, e.g. in the areas of Mental Health, Learning Disability or Children/Young People's Services. Concerns literature is accessible in a range of languages and formats and translation services are available, as required.



Bwrdd Iechyd Prifysgol Hywel Dda University Health Board

IMPROVING PATIENT EXPERIENCE REPORT March – April 2021



1. Introduction

Service user feedback is important to monitor the experience of those who use our services and through this, the quality of care that they receive. This allows us to identify where services need to improve and to share good practice when experiences are positive. The following information demonstrates how we are continuing to increase the capture of service user feedback by providing various ways in which this can be provided. Most importantly, service users should feel that there has been a valuable purpose to them providing their feedback. It is our priority to act on all feedback received as part of our culture of improvement.

2. Patient/Staff Story Feedback

The Patient Experience Team is continuing to capture patient and staff stories throughout the challenges of the pandemic to help the organisation to learn from, understand and appreciate their feelings about using our services. Stories are the most powerful and beneficial way of understanding how our services are being experienced and this will remain the key focus of the Patient Experience Team in supporting services to capture, share and ensure learning from these valuable accounts and personal experiences.

Lorna's Story

Whilst taking a walk Lorna slipped and injured her back and was taken to Bronglais General Hospital. In this story, Lorna shares her experience of arriving at the Accident and Emergency department and her time spent on the ward.

Please click here <u>https://youtu.be/PRLsd4o_Fxo</u> to listen to the story.



There are a number of important lessons to learn from Lorna's story and this will be shared across all clinical teams to ensure that there is reflection on why we must always listen to what our patients are telling us.

Mrs Clutterbuck's Story

Mrs Clutterbuck was taken to the Accident and Emergency Department at Withybush Hospital after suffering a stroke. She shares her experience of her time in hospital.

Please click here to listen to the story: https://youtu.be/CdpTIKbIS0Y



We will be sharing Mrs Clutterbuck's experience across the clinical areas to promote patient encouragement and the importance of understanding patients' needs and paying attention to the small things that make for a positive patient experience.

3. Compliments

Informal & Formal Compliments received during the period

As mentioned in previous reports, a new way has been launched to capture compliments across the Health Board. The information below captures some of the informal compliments received. During February and March 2021, over 107 compliments were received that would previously have been unrecorded, and information on trends and themes is being captured. The new mechanism also captures the sentiment and Health Board values that are expressed in the compliment.

The patient experience team would like to share a small selection of the compliments which show how staff are providing positive patient experiences by demonstrating the Health Board values. Receiving recognition of this from patients and their relatives or carers, is appreciated by everyone involved, and it is so important to share and learn from what is working well and to give staff a much needed boost during these challenging times.

Thanks for the excellent care and the attention that you gave my Dad, but also the support you game me and my sister. You prepared us wonderfully well for the difficulties we would face over the final few days.

Carmarthenshire - Palliative Care

They were absolutely fantastic, had really good regular communication. They couldn't have asked for more in terms of care. Staff were absolutely to family and the patient. They were grateful for the phone call and how everything was explained.

Withybush – Ward 12



The compliments received are reported as follows:





In addition to the above, during the period of March and April, the Health Board also received over 30 formal compliments addressed to the Chair or Chief Executive.

Here is an email received complimenting the Audiology department:

Dear Mr. Moore.

From the first phone call to the return of my hearing aid today (Wed. to Fri.) the service from Glangwili Audiology department especially a lady signing herself 'Rachel' has been exceptional. Under these trying times the turn around and condition of the device was second to none. Please take a small amount of time out of your busy schedule to pat (figuratively) the two ladies on the back.

We also received a letter complimenting the Endoscopy Department at Withybush Hospital.

Dear Mr. Moore

Earlier this week I was a patient in the Endoscopy Department at Withybush. I would like to express my sincere gratitude to all the staff that cared for me during my visit. In the weeks leading to my procedure, the staff who wrote or phoned - were courteous and most helpful. During these extremely difficult and stressful time for the hospital I am so grateful to everyone for their kindness, reassurance and humour.

The Big Thank You Compliments

During February and March, 31 "Big Thank You" nominations were received and Patient Experience Certificates of Appreciation were presented to individuals and teams who we have received feedback about.

We continue to encourage service users and their carers or family to let us know when someone has made a difference to the experience of the care they have received.

"I have to say, the staff there were outstanding. Always friendly & thorough. The DR was wonderful & although I need further tests which is quite scary for me, I am truly grateful for the care I received yesterday they are working in the most unusual and difficult times, yet they still give everything to the job. They really are heroes. Diolch o galon am bobeth Cofion cynnes Helen.

Dr Jaramillo is amazing in how he explains everything and reassures you when nervous and his team fitting for hearing aid are just as amazing thank you all xx The staff were very friendly, and made my stressful visit less stressful. They made me smile despite being in pain and made me feel safe despite COVID. Thank you.

4. Patient Feedback System – Friends and Family Test (FFT)

The Patient Feedback System Friends and Family Test is available across the Health Board, and automatically contacts patients within 48 hours of attending an appointment or being discharged from Hospital.

88% of the responses have a positive rating which is a reduction from January. As can be seen from the following table there has been a reduction in the number of positives ratings across inpatients, outpatients and the emergency department. The feedback provided in the narrative section is summarised below:

01/09/2020	01/10/2020	01/11/2020	01/12/2020	01/01/2021	01/02/2021	01/03/2021
100.00%	97.22%	96.15%	1 00.00%	\$95.12%	91.38%	1 98.90%
89.88%	1 90.07%	\$9.61%	\$7.63%	1 92.02%	\$8.70%	\$6.60%
88.37%	1 91.45%	9 3.38%	93.08%	\$6.73%	* 89.23%	♦ 87.65%
88.61%	93.08 %	92.78%	92.08%	• 95.31%	93.37%	\$9.63%
80.77%	1 85.71%	\$2.35%	100.00%	♦ 87.50%	* 88.24%	• 95.24%
89.00%	1 91.00%	↔ 91.00%	90.00%	4 93.00%	90.00%	♦ 88.00%
	100.00% 89.88% 88.37% 88.61% 80.77%	100.00% 97.22% 89.88% 90.07% 88.37% 91.45% 88.61% 93.08% 80.77% 85.71% 	100.00% ↓ 97.22% ↓ 96.15% 89.88% ↑ 90.07% ↓ 89.61% 88.37% ↑ 91.45% ↑ 93.38% 88.61% ↑ 93.08% ↓ 92.78% 80.77% ↑ 85.71% ↓ 82.35%	100.00% ↓ 97.22% ↓ 96.15% ↑ 100.00% 89.88% ↑ 90.07% ↓ 89.61% ↓ 87.63% 88.37% ↑ 91.45% ↑ 93.38% ↓ 93.08% 88.61% ↑ 93.08% ↓ 92.78% ↓ 92.08% 80.77% ↑ 85.71% ↓ 82.35% ↑ 100.00%	100.00% ↓ 97.22% ↓ 96.15% ↑ 100.00% ↓ 95.12% 89.88% ↑ 90.07% ↓ 89.61% ↓ 87.63% ↑ 92.02% 88.37% ↑ 91.45% ↑ 93.38% ↓ 93.08% ↓ 86.73% 88.61% ↑ 93.08% ↓ 92.78% ↓ 92.08% ↑ 95.31% 80.77% ↑ 85.71% ↓ 82.35% ↑ 100.00% ↓ 87.50%	100.00% \checkmark 97.22% \checkmark 96.15% \land 100.00% \checkmark 95.12% \checkmark 91.38% 89.88% \land 90.07% \checkmark 89.61% \checkmark 87.63% \land 92.02% \checkmark 88.70% 88.37% \land 91.45% \land 93.38% \checkmark 93.08% \checkmark 86.73% \land 89.23% 88.61% \land 93.08% \checkmark 92.02% \checkmark 89.23% 88.61% \land 93.08% \checkmark 92.78% \checkmark 92.08% \checkmark 95.31% \checkmark 93.37% 80.77% \land 85.71% \checkmark 82.35% \land 100.00% \checkmark 87.50% \checkmark 88.24%

The main themes of positive feedback relate to our staff and the kindness, compassion and professionalism that they demonstrate in the care they deliver. Examples of feedback received are as follows:

All staff I came into contact with were brilliant. Excellent distancing in place. G Morris in the eye department always sees me and he's amazing.

Glangwili – Outpatients Department

Having been in agony with acute sciatica my GP told me to go to emergency services which I did with trepidation with the Pandemic still at large. I was seen quickly, caringly even had an x ray which proved I had arthritis in lower facet joints and hip, so worth a visit. The staff are a credit to Hywel Dda. Thank you, Diolch yn Fawr.

Bronglais – Emergency Department

Staff were courteous helpful and awesome and the hospital was clean and tidy. Procedure was carried out by Dr Rastall with extreme professionalism and all staff were supportive and awesome. The best hospital experience I could hope for!!!!

Prince Philip – Endoscopy Unit

They were great from the minute I walked in. They were prepared with my paperwork, I wasn't kept waiting long and they were very considerate of me. As for COVID- didn't bother me at all- felt very safe and clearly they were following all guidelines. Can't fault them at all!

Bronglais – Emergency Department

It was quick no waiting to be seen ,the nurse was lovely & Dr Nagrani was very good He explained my problems and fixed me with thumb splints which is helping my pain all round everyone was very helpful!

Prince Philip – Outpatients Department

My visit was dealt with friendliness and ease. Both the reception staff and the Consultant I saw, were excellent. Indeed, I found the Consultant very friendly, helpful and accommodating.

Glangwili – Outpatients Department

Everyone in Withybush Haverfordwest was very professional but also empathetic. Knew exactly where I had to go to attend my appointment, which was on time. Consultant care was excellent as well as other members of NHS staff that were present. Exceptionally treated when asking advice on certain queries.

Withybush - Outpatients Department

Absolutely amazing service and the staff were all very friendly and helpful. I felt very comfortable there with my 19 month old son they were more than supportive and I was very happy with how quickly my son was seen. Thank you very much. He is so much happier today x

Prince Philip – Minor Injuries Unit

The service we received from the time we got into A&E to the point where we left after the operation from Cilgerran ward was seamless and outstanding, the surgeons and staff at Cilgerran were amazing.

Glangwili - Cilgerran Ward

Agwedd y staff, proffesiynol a chwrtais. Hefyd roedd yr holl broses yn gyflym.

Glangwili – Outpatients Department

Excellent service provided. Everyone professional and very caring. Made me feel very comfortable and reassured about what was difficult procedure for me. COVID precautions great too.

Withybush - Endoscopy Unit

We had excellent care for my autistic son. The staff in A&E and X-ray were fantastic, going over and above to help keep him calm and happy, making our experience excellent and we know that if we should have to visit again he will not be worried about his visit.

Prince Philip – Minor Injuries Unit

The main concerns for patients were delays in being seen, attitude and poor processes. Examples of the negative feedback received are as follows: This feedback is shared with the teams involved on a real time basis.

The concerns raised regarding attitude, behaviour and communication have been identified from the feedback provided, and whilst individual patient cases cannot be investigated further, as all comments are provided on an anonymous basis, a further detailed review will be undertaken in liaison with the departments involved.

Feedback from the service areas in response to the FFT feedback will be provided in the next report.

The ancillary nurse who dealt with me was very good as was the receptionist. However, the doctor I saw was not what I would have assessed as being a consultant. He was a locum who had a limited understanding of the English language. My communication with the doctor was mainly by pointing and using one or two word sentences. He told me nothing of my complaint. He is arranging a full body MRI scan even though I had less than a week before had a MRI head scan. He couldn't operate the computer and had to call the ancillary nurse to help him. The consultation was a waste of my time and a waste of the trusts

The doctor that treated me gave a half ***** performance and dismissed everything I said for muscular pain. Spent more time finding a room than actually looking into my health problem. Could not pronounce my name properly. Rang me in the waiting room, from the waiting room to my mobile phone and shouted down the phone where are you, when I stated that I was in the waiting room, moaned that he had just come from there. Everything seemed to be a big drama for him to actually do the job properly.

I have been in agony with pain in my shoulder to neck and down to my arm for over 10 days I had been working away haven't been sleeping at all because of the pain. I phoned out of hours on my first day home for the doctor to say to go to hospital. At the hospital I felt very disappointed as I overheard the doctor and nurse speaking about my condition and said to wright on my folder NO FURTHER ACTION REQUIRED and the doctor said he felt deflated. I was shocked of un-professional Manor of this.

Lack of care sending us home when my son had a high temperature, no COVID test at 1.30am in the morning with just a suspected urine infection which is highly unsightly in babies. Wasn't happy with the care at all. Long wait times , uncomfortable seating areas and staff members rude and not welcoming when I arrived at the doors to be screened I was approached by a HCA who didn't even say hello to me it was just what's the problem extremely rude. Horrible experience with the sister She was meant to be my nurse yet had virtually no contact with her and no offer off pain relief which I had been having regular during my 5 day stay on various wards. I cried when my husband picked me up as felt so upset at the way I had been treated by her. My care by the medics was very miss jointed and my condition was not properly monitored as was meant to be. As a staff member of the hospital I felt totally let down with my care.

I had a terrible experience. I arrived as I was self-harming and suicidal. They referred me to the crisis team who never called me at all, despite them assuring me it'd only be 4 hours. I left A&E saying I was going to go kill myself and actively suicidal, which did not bother them. They called me the wrong name a few times and you can clearly tell they have little experience dealing with more complicated mental health issues than depression. I still haven't been called by the crisis team.

I attended A&E at 3.30 am after being advised to attend by NHS after waiting 6 hours to been seen by a doctor I walked out in floods of tears due to being in agony and still not seen another patient spoke to admissions staff who came and spoke to me and said they would chase up the doctor my medical notes were missing the doctor had totally missed me they was patronising and rude I was treated like a stupid child I was told I should have gone to a dentist even though the time I attended I couldn't get an appointment and was in agony they was going to refuse me treatment and make me suffer in pain even long.

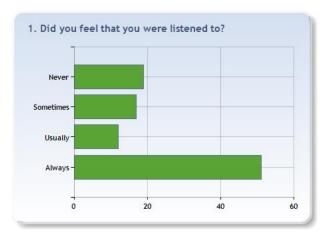
Staff are rude and unprofessional, openly talk about other patients in front of others.... Making an official complaint about a certain person too! The doctor I had was very rude, uncaring, not only to me but other patients! He made me feel so awful I even cried in front of him! Most awful experience I've had in hospital feeling terrible unwell and had waited 6hours to see him! Absolutely appalling I'm struggling to understand why he chose to be a doctor that is meant to care for people.

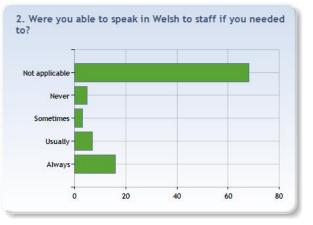
I feel like I should've been put into a private room as I had taken an intentional overdose, I was completely out of it and had really bad side effects but was there at 10:30pm and waited until about 2am to see anyone. And got sent home at 5:30. You'd think is certain circumstances they'd priorities this or keep me in for observation. The doctor was really rude and every time Id speak to him he would sigh or go really? As if questioning me if I was lying etc.

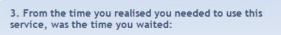
5. All Wales Experience questionnaire

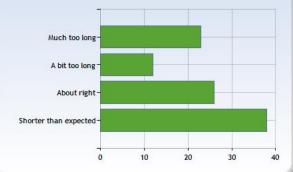
During February and March, 44 surveys were collected using the electronic patient experience system (Envoy).

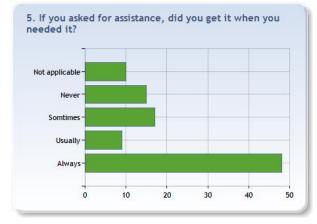
Individual feedback is brought to the attention of the ward or service area at the time of the survey, to enable any immediate action to be addressed.



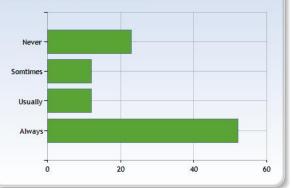


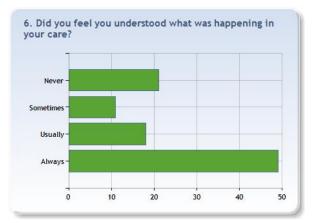


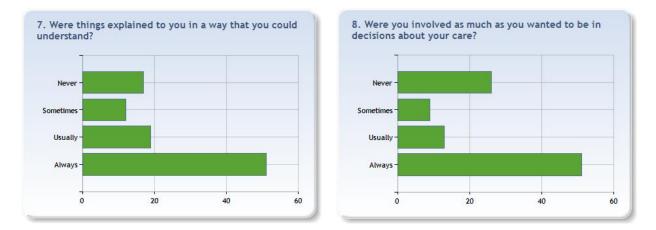




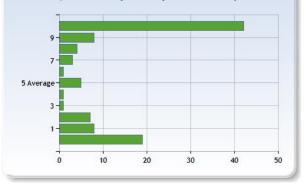
4. Did you feel well cared for?







9. Using a scale of 0 - 10 where 0 is very bad and 10 is excellent, how would you rate your overall experience?



Q 10. Was there anything particularly good about your experience that you would like to tell us about?

- Staff were friendly and caring. I felt well informed from initial consultation stage with Mr Shaafi in Pembrokeshire to my stay in hospital in the Heath in Cardiff under Mr Narahari the consultant. The phlebotomists were cheery and reassuring. The consultant, anaesthetist and all the nurses felt like they had time for you. I always felt at ease and nothing felt like too much trouble. I commend all the staff that made my hospital experience one of the best I have had.
- I would like to thank the staff at the MIU in PPH. Yesterday afternoon 7/2/21 I took my elderly
 mum in as she had a fall cutting her face. She received the most professional, kind and
 courteous care from lovely nurses and a doctor. Being almost blind, very deaf and of limited
 mobility it's not easy taking her into a new environment. The staff there put her at ease,
 explained everything that was happening to her and addressed her directly. Thank you all for
 being there and showing her the utmost respect and kindness, daughter of the patient.
- After being moved to Minor Injuries in under 25 minutes brilliant. I have to say the
 receptionist in Minor Injuries on the evening of (24/2/2021) was lovely, funny, chatty this was
 complemented by the excellent nurses with some good humour. The senior nurse, he was
 very good explained everything really nice chap.
- My experience today at Theatre Ffwrnes, Llanelli, was wonderful, professional and a pleasant surprise.
- Being offered to sit in a room as opposed to the waiting area due to my severe anxiety and mental health. Really thoughtful. I don't cope well with people

- I was very impressed with the care and attention that I received while in Prince Phillip Hospital on my recent admission. I welcome this opportunity to praise and thank all the staff, nurses, and doctors etc. who contributed to my recovery and eventual release back home, including the follow up care that I received virtually.
- I went for a minor injury check-up (ankle injury) and the visit was exceptionally well organised. The receptionist, nurse practitioner and radiographer were all professional and put me at ease. I had a very thorough review, including an X-ray, all within 90 mins. Great staff and a slick, clinical pathway.
- I went to the Emergency Department at West Wales General very scared of symptoms I was experiencing. All staff were very lovely. The Junior Doctor who took care of me was fantastic. I was worried, anxious, and as a patient quite vulnerable but he made me feel so comfortable. He was professional, yet down to earth, understanding and empathetic. A credit to the department & anywhere else lucky enough to have him work with.
- Last week I was admitted to Ward 4 via AMAU I have to say the staff on the AMAU were excellent and provided me with a high standard of care and I have to say that the staff on Ward 4 were the friendliest and most helpful staff I have had look after me. Nothing was too much trouble for any of the staff. And they dealt with some very difficult news with such compassion it has made a big difference. Would you please pass on my thanks to all the staff that looked after me with such care and compassion? My father was cared for very well in Glangwili Hospital (A&E, ICU and Towy Ward). All the staff were friendly, professional and approachable. Dr Raza (not sure of the spelling of her name) in ICU was incredibly understanding, patient and helpful. My father was very ill and unable to talk and she was such a support in helping me deal with the situation. Thank you.
- The family liaison officers were excellent.
- The staff on teifi ward were amazing and supported encouraged and supported me emotionally after a head on RTC.
- We want to thank the staff and volunteers at Cardigan Integrated health centre for smooth and slick system we experienced when we went for our Covid 19 vaccination at 14:00 on the 17th Feb. We'd not take our NHS staff for granted and hope you will pass on our thanks as we are unable to send an email direct to them as the mail delivery said there was an error at the recipient address.
- Yes after days of frustration and phone calls. My extremely stressful experience was
 resolved by an excellent Kath Pritchard (PALS Officer). I told her my issues with my GP
 Surgery receptionist. The receptionist was very blunt and unprofessional to my concerns and
 or about my wellbeing. Mrs Pritchard followed up on my complaint and she completely
 resolved matters for me. The next day I received an urgent message to attend my local
 surgery Thank You to NHS Hywel Dda and Ms/Mrs Pritchard a model professional.

Q 11. Was there anything that we could change to improve your experience?

- Admitted to A and E with a stroke, initial testing, scans etc. were good. CDU was terrible care, communication between groups is broken. Different messaging from different people. Discharged with the effects of the stroke still present and told to report to Swansea hospital on Monday for an urgent operation. When I got there they had absolutely no info on me, my requirements or the Op. It was only due to the professionalism of this team in Swansea that the issue was sorted. Communication and checking of detail was again the issue at Glangwili.
- Explain why when I had registered and waited in A&E was I moved to Out of Hours Doctor where I also had to register and wait again. From seeing the consultant for a review early October and being a category one very urgent for surgery I have heard nothing.
- I felt a bit abandoned after I was discharged from Prince Philip after my operation (hemi colectomy). Someone phoned after a few days but was mostly asking how I thought I was treated rather than how I felt.
- Instead of sending me away with painkillers for 6 months I would like to have an MRI / ultrasound to find out the cause of the pain I am experiencing in order to work on a treatment plan to resolve the issue.
- Last night was the second time that my partner had left Withybush hospital in tears due to the lack of care given by staff here. After calling 111 my partner was advised to visit the emergency department, after 4 hours waiting the doctor proceeded to belittle my partner telling her she didn't need to be there. The tone of voice that was used was degrading and insulting.
- Letters should be available electronically Text reminders should be offered Patient transport should be bookable online.
- Listen to patients, show care and kindness. Not treat patients like a complete inconvenience.
- Not enough time given by some individuals, being asked question & not listening to answers was just poor bedside manner. I was expected to concentrate on what the consultant said while having bloods taken and cannula put in. In my view and experience the discussion could have to take place minutes later when treatment ended.
- Not moving patients between wards, and thus spreading COVID unnecessarily.
- On the night of my second surgery 5/3/21 there was an agency nurse taking over my care. During the night she refused on a number of occasions to administer my PRN pain killer oramorph dispute it being prescribed every 2 hours she allowed me one dose at the beginning but constantly came up with excuses not to get it. She would tell me she was getting it but never return. I spoke to morning staff who reported to senior and on my chart she had put that I was either sleeping or declined neither of which I did that night. I was in extreme pain to the point that I felt I was passing out from the pain.

- The breast care nurse I was originally allocated was awful. She exhibited no compassion, would not answer any questions and made me feel invalidated and helpless. She never gave me information I requested. At no point did any member of staff explain to me what my breast would look like after surgery. I did not know that skin would be taken along with the breast tissue. I did not know my breast would look radically different after the surgery. As a result I did not give fully informed consent to the surgery that was done to me and living with the results of this has been very distressing.
- The locum doctor in A&E needs some serious people skills. He spoke completely out of order to me.

The following describes the actions taken by the Emergency Department in response to the comments received during the previous reporting period:

You Said (comment received)	We Did (response from service)
There were lengthy waiting times at A&E. There were not always access to food and drink The requirement to wait in a car for long periods, feeling unwell, due to COVID- 19 restrictions was not acceptable.	We are addressing the concerns raised by our patients who attend A&E departments. At times of significant demand when high numbers of patients attend the department and there are a high number of ambulance attendances, it is challenging to see all patients in a timely way. This is a challenge for hospitals across the UK. Patients are seen in the order of clinical priority, which means the patients who need urgent assistance due to their clinical condition are treated first. This can mean that patients who attend with less serious clinical concerns wait longer than we would like on occasions. If there are also no hospital beds available for people who require admission to hospital, these patients are cared for in the A&E department which can also cause delays in seeing patients whilst waiting for these beds to become available. We are therefore working hard to review our systems in how patients are reviewed and treated according to their clinical condition. In relation to patient experiences, we are creating the role of patient support/family liaison officer in the emergency care setting to ensure that there is regular communication and support for patients and their families during their time in the department. The experience of two of our newly appointed family liaison staff working at Withybush Hospital A&E department is shared below. We also have invaluable support from the Red Cross. We are looking for better ways to manage the process and improve our communication around waiting times and access to food and drink.

A&E Waiting area no distractions, can hear everything that is going on. No television.

Sister in A&E has confirmed 2 new TVs are on order for the waiting room

When the transition to the new once for Wales Service User Feedback System is achieved, all ward and department managers will also receive alerts to specific feedback key words. We will provide the responses from services to the above feedback in the next Patient Experience Board Report.



The voices of children and young people are a vital part of our improving patient experience work.

During February and March we have seen an increase in our paediatric questionnaires compared to previous months

A total of 29 questionnaires were received with 13 responses in parents/carer/ relatives survey; 7 responses in the 12 to 16 year old survey and 9 responses in 4 to 11 year old survey.

We hope to see a further increases in our patient feedback in the next report.

"Amazing staff, all so friendly and amazing. Fantastic "– Angharad Ward, Bronglais General Hospital "The staff made me laugh and it helped take away my nerves they were amazing many thanks" – Cilgerran Ward, Glangwili Hospital

"They listened to me, were fun and made me better" – Cilgerran Ward, Glangwili General Hospital

"Being offered help and support while alone" – Angharad Ward, Bronglais General Hospital "I am very happy with the entirety of the care offered. Staff asked me all the time whether I needed anything and kept me informed throughout. They responded quickly on the occasions I had to ring the bell when the machine alarmed and were all friendly and professional." – Cilgerran Ward, Glangwili General Hospital.

"Everyone we met was excellent. During a very difficult time we were treated superbly. Everyone on the ward is an absolute credit to the NHS" – Puffin Ward, Withybush General Hospital

Over the past 12 months one of our Patient Experience Apprentices, John Page, has been involved with the Children and Young People Steering Group and Children and Young People's Charter Task and Finish Group.

John was nominated by Delyth Raynsford [Independent Board Member] for employee of the month for his work with the steering group and also, for his dedication and commitment in his role in the Patient Experience Team.

John was one of the lucky winners in February's Employee of the month



6. Thinking of you – Keeping in Contact with loved ones

The 'Thinking of You' initiative continues to offer families, carers and friends a way to stay in contact with loved ones who are inpatients. Messages, letters, emails, poems and photos are printed, laminated and delivered to the patient. If the patient wishes to send a message by return, HB staff liaise with the Sister/ Charge Nurse and messages are shared back to families. Patients and families have been very grateful for this service.

This service can be accessed from any device by using the "Thinking of You" online form:

http://ratenhs.uk/luggmz

Or by using the dedicated email address: ThinkingOfYou.HDD@wales.nhs.uk which enables the inclusion of photos, poems and cards with messages.

During February and March, the Patient Experience Team was able to share 29 Thinking of You messages across the Hywel Dda area.

7. Family Liaison officers

The Family Liaison Officers (FLOs) continue to support patients and their families in our inpatient areas by engaging and facilitating communication between patients and families. Following a recent successful recruitment campaign a new cohort of temporary FLOs, to backfill vacant posts, has been undertaken and they are enjoying their new roles.

Introducing the FLO role to the A&E Department is a recent development. Family Liaison Officers Bridget and Katie, pictured below, share their experience of working in the Accident and Emergency Department of Withybush General Hospital so far:



'Working in A&E has been rather like riding a complex roller coaster with all the associated emotions! No two days are the same and our contact with patients and their families can be anywhere on a scale from heart breaking to highly amusing. Patients generally move through the department quite quickly. Many have hearing and/or sight difficulties that require alternative communication approaches. Our role involves settling patients, establishing if they have family/friends that they would like us to contact, encouraging them to contact people, reassuring patients to stop them worrying about taking up a bed, making arrangements for their dogs/cats. We need to do all of this, whilst not be in the way of the medical staff that need to attend to them, which can be quite a challenge. We 'make friends' quickly and then hope that their future experiences are positive.

Many of the nursing staff have told us how happy they are that we are able to spend time with the patients , chaperone when necessary and advocate for them - all things that free them up to continue with medical interventions. They are also happy that we field most

family queries and keep the patient/ family contact going. Many have said that they 'don't know how they managed before us' and that we are 'invaluable members of the team'.

We have had to learn to constantly assess the current workload situation within the department and have developed strategies to reassure, placate and inform anxious patients and their families to the level that we would want for ourselves if the roles were reversed. Most are really happy with the efforts that we go to and we have found that follow up calls to check that families have received the information they needed, after transfer to medical staff, has been particularly well received.

Job satisfaction is high for us although it can be hard rarely knowing what happened next to the lovely patients and how they got on.

We are confident that every chat, trip to the shop, passing on of messages to nurses, seeking out of a Health Care Assistant for a commode, hot drink made, sandwich sourced and hand held of a dying patient or their next of kin has made a difference to the experience of the patients and their families'.

Compliments received for Family Liaison officers

- Ashley, just want to say a massive <u>thank you</u> for helping and spending time with my Dad. Helping him (well actually doing everything) ready for him to be able to facetime us as a family. It was a great help and pleasure to be able to see him on facetime. He was a special person in our lives. A special thank you also from his brother and his wife for helping them on zoom. So glad they were able to see and speak to him that week before he passed away. You are a special person, great personality, always so cheerful, positive and happy. You deserve all the best for the future. Special Thank You x (GGH).
- The family liaison is in my opinion a vital service, as well as myself I have observed people feeling very alone and vulnerable and isolated through not being able to have visits from friends and family. The Family liaison offer Michele Lomas in my opinion plays a vital role in alleviating anxiety for people. I observed her helping patients to phone their family and have observed the patients crying with relief at being able to do this. I cannot stress the importance of this role in helping patient's wellbeing WGH Ward 8 (Coronary Care Unit).
- Stacy the liaison got me clothes and toiletries, I have no family and she cared for me.
- Food is great and staff wonderful. Family liaison chap very helpful and sorted calls and FaceTime calls too. Great job done by all GGH Clinical Decisions Unit.
- Ashley is a great communicator and listener. He has helped me greatly. Conscientious, indefatigable and a good emotional nurturer, for patients recovering from the effects of long term illness. GGH Merlin ward.
- The staff have been very supportive from doctors to nurses to physiotherapists and family liaison. I was grateful that the doctors spoke openly and explained everything well in a way that I could understand. PPH Ward 9.
- Everything was amazing. 20/10. The staff are fantastic and all work together as one big team. The family liaison officers Sara and Michelle were great, nothing was too much trouble and helped with everything. Everyone was so caring and always made time to sit and listen or do whatever was required. Happy to help with everything and really felt part of a family. The standard of care was fantastic also, couldn't have asked for anything better. The

domestic staff and food are excellent too, lots of choice and tasted good. Always felt informed and never left questioning anything or waiting for answers – WGH Ward 8.



Tina pictured above, is a FLO based in Prince Phillip Hospital, with one of the thank you cards she has received.

8. Complaints Received

Core Themes – Changes from Previous Report



For the period March and April 2021, **481 contacts were received and recorded**. Of these, 246 were managed through the 'Putting Things Right' process. During the same period, 152 cases were investigated and closed within 30 working days. The specialties receiving the highest number of concerns relate to General Practice; Accident and Emergency, Urology Services, Gynaecology and Orthopaedics, Ophthalmology, Community Services and Medicine.

Communication issues continue to be the main area of complaint. In respect of complaints relating to general practice, these include issues such as referrals into hospital services; availability of services; care and treatment concerns and requests for facilitation of concerns being managed by individual practices. These concerns relate to practices across the Health Board area, and there is no trend in relation to any specific practice or area. The number of concerns should be taken in context of the high number of contacts with general practice, over the two month period.

Appointment issues remain the same as in the previous period and include 'Wait for an Appointment', 'Appointment Delays' and 'Appointment Cancelled/Changed' with the specialties receiving most complaints/enquiries being Orthopaedics, Urology, Cardiovascular, Ophthalmology and Gynaecology. Please refer to the attached link for updates on these areas: <u>https://hduhb.nhs.wales/restarting-services/</u>

Complaints about appointments are, in the main, in relation to the availability and commencement of a service for patients which have been delayed due to COVID-19.

For both Communication & Appointments: we are receiving a number of contacts from patients who are concerned that their appointments/surgical procedures are being rescheduled/cancelled/delayed and who are worried about the consequences of this. Many of these contacts are being forwarded to senior members of the Clinical/Nursing Teams and are receiving assurances about their individual case, which is proving beneficial; however, it is likely that the ways in which we are communicating with some of our patients will need to be reviewed.

What Are We Doing in response to concerns?

As previously reported, to address the concerns about appointments and waiting times, work has progressed in relation to providing a single point of contact and communications hub. This is initially being tested within the specialty area of Orthopaedics. The initial response is very positive, with patients appreciating the proactive communication whilst waiting for appointments or treatments and the reference to the web page resources on keeping well and preparing for surgery. How we manage our appointments and follow up arrangements is also being reviewed.

Fixed term appointments have been made to family liaison roles across the Health Board, to maintain proactive communication and virtual visiting arrangements as well as patient experience activities. The feedback, as described above, has been very positive.

Introducing these roles into the Emergency Departments is a positive step, and FLOs are working closely with staff and third sector agencies to ensure the needs of patients and their families are met, particularly during times of increased pressures and high number of attendances at the departments.

In respect of concerns regarding the clinical treatment, such as delays in diagnosis,

the themes of these are regularly reviewed and influence the quality improvement process of the Health Board to ensure continuous improvements. These include areas such as missed or delayed diagnosis and how we review and action test results in a timely way. The outcomes of the concerns closed and lessons learnt are reviewed and monitored by the individual services' quality, safety and experience meetings. All cases with significant learning are reviewed by the Listening and Learning Sub-Committee and the themes and actions arising from this are presented to the Quality, Safety and Experience Assurance Committee.

Public Services Ombudsman

One case has progressed to investigation during the period. Two final reports have been received, which were partly upheld. These cases have been presented to the Listening and Learning Sub-Committee.

There are currently no concerns to bring to the attention of the Board in respect of outstanding actions / recommendations from the Ombudsman.