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Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

IMPROVING PATIENT EXPERIENCE REPORT

November-December 2020



1. Introduction

The Health Board welcomes and captures service user feedback in a variety of ways. The following information demonstrates how we are striving to increase the capture of service user feedback and improve the service user experience.

2. Patient Story Feedback

Throughout the challenges of the pandemic, the Patient Experience Team is continuing to capture patient and staff stories to help learn from, understand and appreciate their feelings about using our services. Many of these stories relate to the importance of communication and how important it is for our patients to remain connected with what is happening outside of the hospital environment. 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.

Being a patient in hospital can be very difficult, and this is certainly a testing time for patients and their families/loved ones. Our patients with cognitive impairments can, in particular, find these times very challenging.

Cleddau Ward is part of the South Pembrokeshire Hospital, Health and Social Resource Centre in Pembroke Dock. The Hospital is well established and already has Sunderland Ward, a 40-bedded ward for patients requiring rehabilitation, recovery and palliative and end of life care needs.

Cleddau ward was created during the early stages of the pandemic for patients on Sunderland Ward, who no longer need hospital treatment, but who need a period of rehabilitation, help in recuperating, or are waiting for a care package in the community. Many of the patients were suffering with confusion, or problems affecting their memory or thought process, and would gain benefit from being cared for in this open ward environment, rather than small or individual rooms.



The environment provides additional activities and therapy designed stimulation, allowing a dedicated approach to the management of patients who are confused or cognitively impaired to improve their experience, a reduction in anxiety due to social isolation and boredom and to encourage increased activity and recovery.

Staff, patients and their families have provided very positive feedback regarding the ward environment. Patients responded well to the activity co-ordinators and the falls co-ordinator carried out chair-based exercises, with good engagement from the patients.

This model is currently being reviewed, supported by information from the evaluation process, to consider the possibility of continuing with this resource in the future.

Margaret is a patient receiving rehabilitation care on Cleddau Ward. On her birthday, a video call with Margaret's family was arranged to help her celebrate the occasion. The call included grandchildren that, due to the pandemic, Margaret had not had the opportunity to see. This was a very emotional experience for Margaret and her family. Click on the image below to view the video.



At Christmas time, due to infection control, the ward could not be decorated in the usual way. Local school children sent festive drawings to the hospital, where they were laminated to enable them to be wiped down with antibacterial wipes and they were used to decorate the ward, as shown below.



During the week before Christmas, the healthcare staff made sure that each patient had day wear clothing for Christmas day. Presents were dropped off to the Ward for patients. On the day, Christmas music was played from the televisions throughout the Ward. There were 27 video calls booked throughout the day, some patients having multiple calls so they could speak to as many family members as they wanted to, and others

having group chats, seeing a few family members at the same time. During these calls, the relatives wanted to see their loved ones open presents, and enjoy a short celebration. Below are some photographs of patients enjoying the day and sharing calls with their friends and family.



Cleddau Ward is one of many examples of staff going the extra mile to ensure that the patient experience remains very much at the centre of all that we do.

3. Compliments

Informal & Formal Compliments received during the period

As mentioned in previous reports, a new mechanism has been launched to capture compliments across the Health Board. The information below captures some of the informal compliments received. During November 2020, over 130 compliments were received that would previously have been unrecorded, and information on trends and themes is now being captured. The new mechanism also captures the sentiment and Health Board values that are expressed in the compliment.

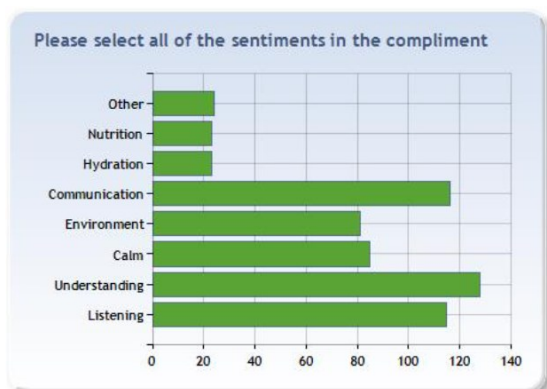
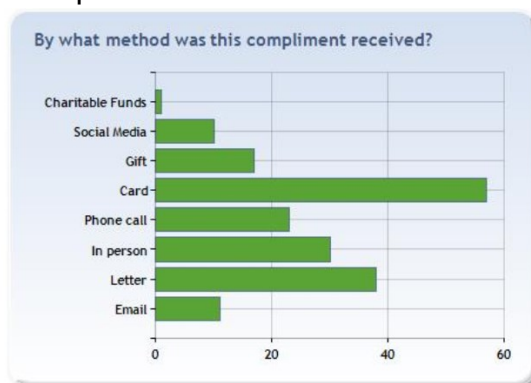
Whilst one of our main themes arising from concerns relates to communication, many of the compliments received highlight where good communication has made a positive

difference. Communication, understanding and listening are the top reported sentiments within the compliments.

The patient experience team has provided a short video below, sharing a small selection of the compliments received and how staff feel about receiving them. There are so many examples of staff providing good 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. Please click on the image below to play the video:



The compliments received are reported as follows:



The Patient Experience Team will continue to promote its usage, and held a Christmas compliments promotion which will be reported in the next Board report.

During November 2020, the Chief Executive and Chair also received 17 formal compliment letters about services provided by the Health Board. Below are a small selection of extracts from these letters:

'I am writing this thank you letter as a brother of the late-patient. Just returned home after traditional Jewish week of mourning with my nephews and nieces. I heard from them all about the extraordinary care which you provided for my sister in the hospital and the help you have them so they could stay at her bedside and accompany her on her last journey in this world. I must express my longest gratitude to the staff who did their utmost for the sake of my dear sister and her family. I Wish the staff much success in professional and personal lives..'

"the best care and attention anyone could have by a professional, compassionate and caring team at Glangwili".

"all staff were exceptional, my father was supported and comforted at the end by wonderful staff". Knowing this has been a great comfort to all of the family during this upsetting time and "if there were awards for all these staff they certainly deserve them" The stay at Bronglais he received excellent care from doctors and nursing staff while waiting for transfer.'

"It is a privilege to be treated by these amazing people who go above and beyond every day
GGH Chemotherapy Day Unit

to all the staff but Dr A Haden was 'absolutely exceptional' Staff in AMAU were compassionate. Dr Haden answered all questions and was very courteous.

PPH AMAU

All of the ward staff were absolutely wonderful, the patient was treated with care and kindness. Consultants were easy to talk to. Food was delicious and the choices were well presented. Disappointed that there was only one shower, which frequently overflowed. All staff are a credit during this difficult time.

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.

From 1st November to 31st December 2020 16,967 patients who have attended an outpatient consultation or have been discharged from an in-patient environment have been contacted, requesting their feedback from the Patient Feedback (FFT) system.

90.8 % of the responses have a positive rating, 5.25% of responders rated their experience as negative (the remainder did not provide a rating). Almost 3,000 patients were not surveyed as a result of our survey fatigue protection algorithm, meaning that they had already been surveyed at least once already in the last 3 months.

Department	01/03/2020	01/04/2020	01/05/2020	01/06/2020	01/07/2020	01/08/2020	01/09/2020	01/10/2020	01/11/2020	01/12/2020
Emergency Department	90.14%	↑ 91.50%	↑ 93.26%	↓ 89.59%	↑ 90.69%	↓ 87.84%	↑ 89.88%	↑ 90.07%	↓ 89.61%	↓ 87.48%
Inpatients	88.00%	↑ 92.31%	↓ 87.29%	↓ 86.60%	↑ 90.72%	↓ 89.15%	↓ 88.37%	↑ 91.45%	↑ 93.38%	↓ 92.97%
Day Case	95.45%	↑ 100.00%	↔ 100.00%	↓ 95.65%	↑ 100.00%	↓ 96.43%	↑ 100.00%	↓ 97.22%	↓ 96.15%	↑ 100.00%
Outpatients	90.33%	↑ 90.55%	↓ 87.01%	↑ 92.38%	↓ 90.49%	↑ 92.51%	↓ 88.61%	↑ 93.08%	↓ 92.78%	↓ 92.08%
Paediatrics	93.55%	↓ 81.82%	↑ 84.62%	↓ 81.82%	↑ 100.00%	↓ 95.24%	↓ 80.77%	↑ 85.71%	↓ 82.35%	↑ 100.00%
Summary	90.00%	↑ 91.00%	↑ 92.00%	↓ 90.00%	↑ 91.00%	↓ 89.00%	↔ 89.00%	↑ 91.00%	↔ 91.00%	↓ 90.00%

As a part of the Once for Wales concerns management system programme, during Quarter 3 2020/21 Hywel Dda University Health Board has been involved in the selection and procurement process of the Once for Wales Service User Feedback System. The Patient Experience Team will start working to replace our existing Patient Feedback System with the new Once for Wales system during Quarter 4, with the aim of having no disruption to the collection of our valuable experience feedback.

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:

Everyone was very nice and very helpful, nothing was too much trouble, felt comfortable all the time I was there. GGH Merlin Ward

Excellent staff and clear explanations. Reassuring.

Everything was clean and well posted. All staff were polite and extremely helpful and thorough. I didn't feel scared to be there. PPH MIU

I was seen quickly and the consultant and staff were all very kind reassuring. WGH OPD

Every member of staff that I came across was polite, friendly and professional. Myself and my son were treated with dignity, care and response. GGH Paediatrics.

Security and assurance of good COVID measures by staff. Lovely staff, really helpful, especially at front entrance.

The reason for my score is that even with COVID the way you had laid out outpatients to ensure everyone's safety was excellent. You had staff there ensuring you got to the right area and the Consultant and staff made you feel comfortable. It was an excellent visit, no probs. I must admit the NHS and Prince Philip Hospital gave it everything they could and didn't leave anything for chance. Well done PPH OPD.

Consultant explained clearly my condition and what to expect when procedure carried out. PPH OPD

Clinical Nurse and Assistant very calming, talked me through the procedure and put me at ease. Follow up information clear. The correspondence I had ahead of the appointment was prompt in terms of responding to my query. Time taken to appointment approximately what it was indicated to be. WGH OPD

Excellent care, good patient facilities, comfortable and warm ward. Above all, the staff, all of whom I dealt with were first class. Efficient, but caring, and friendly. BGH Ceredig Ward

Totally professional experience, especially during COVID challenges. Initial call to reception to ensure social distance capacity, arrival and disinfectant protocol. Appointment timing was accurate to the minute, one way system operated correctly. Fully pleased with the experience. WGH OPD

The staff were wonderful, they made me feel comfortable and safe. Even though they have added difficulties with COVID 19, they were cheerful, and chatty. BGH Rhiannon Ward

The main concern for patients was the experience associated with the operational changes to services due to the pandemic and PPE processes. Examples of feedback received are as follows:

We waited 4 hours to be seen by a doctor, when there was only 4 people in reception. Then waited another 30 minutes for my child's medication.

I arrived at 7.50 pm and wasn't seen by a doctor until 12.25 am.

Some of the staff seemed blunt and unpleasant. I felt like I was wasting their time even though I was referred by my GP. I was there for hours and I still didn't see a doctor. I self-discharged due to being alone, scared, in a lot of pain and zero help.

Arrived in hospital by ambulance at 1.30 not seen until 5.30, understand the pressures on staff but water not working, no food/snack offered

Very long wait, very dirty and unsanitary, staff can barely be bothered to engage. No help with transport

I realise it was busy but obviously short staffed, 5 ½ hours was pretty bad

My dad is 75 years old. He had a suspected heart attack. He was very unwell but was made to sit/ stand in reception for over nearly 7 hours. I wasn't able to sit with him and he was quite distressed by the end. I do understand the pressures on the NHS and am grateful for their services.

Not one bottle of hand sanitizer or dispenser. 3 patients either related or even one employee all had preferential treatment. Masks were not worn by everyone present.

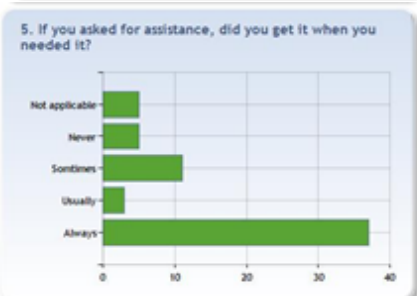
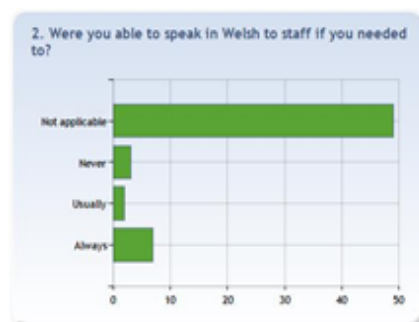
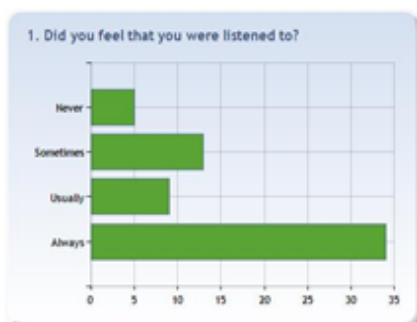
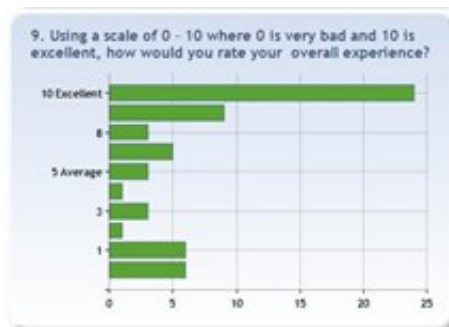
I was left screaming in pain in the main A&E department, then after telling the care provider numerous times that I was 8 weeks post operation from having my gallbladder removed, they suggested my pain was caused from me having gallstones.. they did not listen to me or read my notes.

Clinic was running an hour late but was expected as we were the last appointment at 3.30. Dr advised for my mum's case to be removed and replaced with a splint, but we spent another hour waiting till 5.30 as the trainee nurse didn't tell the plaster technician we were waiting and he went home. My mum is 85 with early dementia and needs medication every 4 hours and had carers waiting for her return! I'm so glad I accompanied her, not the best service I'm sorry to say

5. All Wales Experience questionnaire

During November 2020, almost 70 surveys were collected using the electronic patient experience system (Envoy). Envoy is securely hosted and allows a clearer view of the data received and grouping of data to identify trends and themes.

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. Currently, the way in which the surveys are collected across the organisation is not as consistent across all areas as we would like. This makes it difficult to identify any specific 'hot spot' areas which have continuing themes or trends, due to some areas submitting a lower number of surveys. The survey responses are summarised below:



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

Below are examples of responses to this question.

Withybush Hospital

- Selina in puffin took extra care. Very meticulous. Jake (cleaner) lovely young man, always cheerful nothing too much trouble meticulous with cleaning.
- Very good, I was well looked after. You always spoke to my family on the time that you agreed which relived a lot of their stress. Ward 9.
- Gwasanaeth profesiynol ac arbenigwyr profiadol. System hawdd i ddelio gyda gofynion Covid19 yn yr ysbyty hefyd
- The staffs were brilliant, especially Finn, family liaison officer who went beyond his duty to help us.

Glangwili Hospital

- I was sent to Padarn ward (Preselli) from A&E due to suffering with SOB with Covid. The nursing staff were lovely, so polite and caring. They made me feel welcome and comfortable until the doctor arrived. Big thank you to all the nurses and Elliot the Doc.
- Staff are excellent, always someone to talk to. Care has been exceptional. Merlin Ward.
- Since June last year I've spent six months in Glangwili and Prince Phillip. We are so lucky to have these two fantastic local Hospitals. They are brilliant in every way, thank you so very much.
- The person I was talking to had a lot of compassion understanding and just wanted to help.
- Because of the level of care and commitment all the nurses doctors and staff including porters, cleaners, dinner ladies offer, it hard to see how you could improve.

Prince Philip Hospital

- Had the involvement of three surgeons which must have been logistically difficult, but their obvious team work I am sure, will improve my chances of a good recovery. Ward 7
- Consultant explained clearly my condition and what to expect when procedure carried out.
- Even with COVID the way you had laid out outpatients to ensure everyone's safety was excellent.
- I must admit the NHS and Prince Philip Hospital gave it everything they could they didn't leave anything for chance. Well done

Bronglais Hospital

- It was very prompt courteous friendly and the treatment was appropriate.
- Dr Harper was so friendly and made my daughter feel better really quickly, she was fab!
- The service I received in these horrible times was amazing a heart felt thanks to everyone.
- Delio gyda staff cwrtais yn enwedig Dr Alwyn Jones ac egluro popeth yn glir gyda parch. Diolch i bawb

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

- Very poor communication from the Ward. Not kept informed about my mother's care. When I wanted to visit her to tell her that my father had passed away I was told it was not a valid reason. Dreadful experience all round.
- The A&E team were very rude, abrupt and didn't listen. I have anxiety and struggle to understand things and was made to feel like I wasn't cared about when I made these points. The triage nurse was patronising, I asked for my partner to come in to help, but was refused.
- Delay in surgery (accepting covid impact), but seeing a new consultant 15 months after my accident and still no date given for surgery!!
- Don't lie to me if there isn't a bed. Don't lie and say that there will be a bed if there isn't one. For a two night stay it is unacceptable to be made to sleep overnight on a chair/floor/gurney
- Post-op has been VERY unsatisfactory. Being sent home without full correct info how to manage a catheter, under the illusion it was only for a few days.
- The surgeon told me that he has no influence at the hospital, so there was no point in me asking for his help. I thought this was disgusting.
- Why am I having to travel from Letterston, 120 miles when I was being treated at our local hospital. I understood that Worthybush was not completing injections due to COVID. I accepted the decision to travel, however yesterday at Amman Valley, where they also have COVID I was informed that in fact Worthybush are completing Lucentis injections so why have I not been referred back there? My husband is in his mid 70's and the drive is too much for him.
- Ward can be very noisy at times in the night with patients coming in and other patients disturbing each other. There was an incident with a patient shouting and screaming at staff yesterday evening. Very distressing indeed
- When pressing the call bell it took a little bit too long for someone to come, especially if I needed the bathroom
- More people to do face time calls in the evenings and weekends. A room to myself would have been nice.

All of the feedback received in the Patient Feedback System is visible on a real-time basis to the leadership team in every department and they are encouraged to review the feedback regularly. Managers have been trained on how to access the system and view the feedback for their department and to take action accordingly.

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.

6. You Said/We Did – Patient Experience Feedback

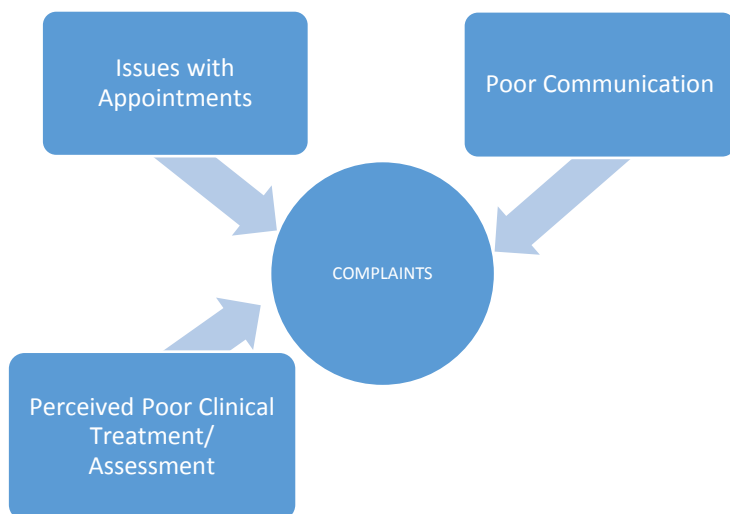
The following describes the actions taken by the service in response to the comments received during the previous reporting period:

You Said (comment received)	We Did (response from service)
Handling by Health Care very rough even I communicated I was in pain. Found her patronising in response to me.	A rapid assessment unit has since been developed, patients are seen by the triage nurse and appropriate investigations are undertaken at this time, such as bloods, ECG and radiology requests. During the working day a doctor is allocated to support rapid assessment. If patients are requested to sit back in the waiting room, the triage nurse role will keep patients updated. All feedback provided is anonymous and the individual patient or staff member involved has therefore not been identified; however the general feedback has been shared with the wider team.
The department was SEVERELY understaffed, two Doctors for majors and A&E turned this into a nightmare visit, I arrived in the department just after 8pm and left at 5.30am the following morning. Several people left the department without being seen not being prepared to wait any longer. This is not the first time I have heard of long waiting times at Withybush due to staffing levels.	Any long delays are expected to be communicated to patients by the nursing staff via updating notices on waiting times and through direct communications. Any issues should be escalated to the Clinical Lead Nurse or Site Manager. We are looking at ways in which we can improve the methods of communication within the A&E departments and routinely monitor the experience in a number of ways, both in real time and following discharge.
The member of staff could learn more about deaf awareness. Speaking louder in a mask doesn't make much difference to me.	Staff are aware of the tools available for patients with hearing impairments and can access these as required. This will be discussed with the staff concerned. Due to the pandemic advice staff will continue to wear masks, however clear masks are available if required.

7. Complaints Received

Core Themes

The core themes remain unchanged from the previous report



For the period **November and December 2020**, **499** (666 Sept/Oct) **enquiries and concerns were received and recorded**. Of these, 248 were managed through the 'Putting Things Right' process, with 138 having been investigated and closed within 30 working days.

Specialty	Sept	Oct	Total
General Practice	28	15	43
Orthopaedics	28	14	42
A&E	22	18	40
Gynaecology	12	15	27
Surgery	12	11	23
Urology	8	13	21
Dental Services (PC)	12	9	21
Dermatology	7	14	21
Medicine	13	7	20
Radiology	6	5	11
Ophthalmology	7	3	10
Anaesthetics	4	6	10
Community Services	5	4	9
Cardiovascular	6	3	9

Specialty	Nov	Dec	Total
General Practice	31	15	46
Orthopaedics	23	9	32
A&E	23	5	28
Urology	15	11	26
Medicine	14	11	25
Gynaecology	12	9	21
Surgery	10	8	18
Cardiovascular	9	4	13
Clinical Decisions	6	6	12
Community Services	7	4	11
Dermatology	5	6	11
Neurophysiology	8	3	11
Endoscopy	8	2	10
Ophthalmology	6	4	10

General Practice, Orthopaedics, Accident & Emergency and Urology have received the highest number of concerns amongst specialties for the period November and December 2020. However, whilst there was a marked increase in the number of complaints received in November, with no identifiable cause for the spike, the number of complaints received in December has fallen across all specialties, apart from Urology, Medicine, Cardiovascular, Clinical Decisions, Community Services, Neurophysiology and Endoscopy – all of which have received an increased number of complaints.

In comparison to September/October 2020, there is a downward trend in the numbers of concerns being received across the Health Board.

Communication issues are the main area of complaint for General Practice, Urology, Medicine, Accident & Emergency and Community Services. These complaints include areas such as referrals into hospital services; availability of services; care and treatment concerns and requests for facilitation of concerns being managed by individual practices.

Appointment issues include 'Wait for an Appointment', 'Appointment Delays' and 'Appointment Cancelled/Changed' with the specialties receiving most complaints/enquiries being Orthopaedics, Urology, General Practice, Ophthalmology and Dermatology. Please refer to the attached link for updates on these areas:

<https://hduhb.nhs.wales/restarting-services/>

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.

Clinical Treatment/Assessment issues include 'Patient Perceived Poor Treatment Received', 'Treatment Delayed/Postponed/Cancelled', with Orthopaedics and Accident & Emergency Department receiving the highest number of complaints for this subject matter. The majority of Accident & Emergency concerns are being investigated and have not been resolved as early resolutions with complaints continuing to be raised in relation to both clinical treatment/assessment and attitude/behaviour. Orthopaedics complaints are, as previously reported, generally in relation to the re-start of services and waiting times.

What Are We Doing in response to concerns?

Work is continuing in relation to providing a single point of contact and proactively communicating with patients who are waiting for appointments or treatments. The way in which the Health Board corresponds with patients is also being reviewed, with a view to using a digital first approach. Both of these areas of work are part of the Bevan Exemplar programme.

Customer care and patient experience training will be provided to all staff, as part of the launch of the Improving Patient Experience Charter in 2021. This will also form part of the training that will be rolled out on the new investigation process and complaints handling training facilitated by the Public Services Ombudsman Complaints Standards Authority (see below).

The way in which the family liaison officer service will operate in future is currently being reviewed.

In respect of concerns regarding clinical treatment, such as delays in diagnosis, the work of the quality improvement collaborative project looking at how test results are reviewed and actioned is ongoing.

The way in which fractures are diagnosed and managed is also being reviewed as part of the quality improvement plan, and some changes to pathways have already commenced in the MIU at Prince Philip Hospital.

Work continues on the way in which appointments and follow up arrangements are managed and provided.

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

Five cases have progressed to investigation during the period. Four final reports have been received, which were upheld/partly upheld. These cases will be presented to the next meeting of 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.

The Ombudsman wrote to all public bodies at the end of November 2020, introducing the new Complaints Standards Authority and the guidance for all public bodies on the management of complaints.

The Statement of Principles, Model Complaint Handling Process, and Guidance will now apply to Hywel Dda University Health Board, and copies can be found on the Ombudsman's website – www.ombudsman.wales/complaints-standards-authority.

All public bodies are now encouraged to reflect on how their own practices and procedures comply with the stated guidance and consider how they will ensure that all complaints are captured appropriately. In accordance with the Act, an updated complaints handling procedure is to be provided to the Ombudsman, by the end of May 2021. This procedure is currently being finalised and will be submitted for consideration to the Quality, Safety and Assurance Experience Sub-Committee in February 2021 for implementation in April 2021.