
Patient Experience Report: *what our patients are saying*



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1. Introduction

This report provides an overview of patient experience between April 2014 to May 2014 detailing the methods that are in place to obtain feedback from our patients about the care they receive and the services we provide.

2. 4 C's

The Trust actively encourages patient to provide their views under the '4 C's': comments, concerns, compliments or complaints. This is facilitated by the Patient Experience Manager supported by PALS volunteers with cover provided by the CGST Team in her absence.



Comments:

Some comments received about our services

Parking free? Fantastic!

Concerns:

Some comments received about our services

I'm hard of hearing and I cannot always hear the staff shouting my name in the RT waiting room- can you not have another system in place?

No info on free wi-fi displayed or how to access it

Compliments:

Some compliments received about our services

Attended with cousin- greeted courteously and guided to our destination, all staff fully explained what was going to happen in a way we would understand.

All staff in Cyclotron kept me informed and helped me through a scary time.

Complaints:

The Trust has a formal complaints policy which adheres to national NHS guidance. In addition to the policy the Trust has a system where the Council of Governor's Patient Experience Committee reviews all complaints received (with patient identifiable information removed) and responses sent which provides the COG with assurance that the Trust adheres to its complaints process and that they are appraised of any patient concerns.

2014/15

	Full 13/14year	April/May			
Formal complaints	19	2			
Informal complaints/PALS	266	45			
PHSO Upheld	pending				

Details of complaints received in last quarter

Complaint	Action taken
01/14 patient unhappy as had not received an appointment we recorded DNA. Then unhappy with staff's attitude	Apologies and explanations offered. New appointment given
02/14 Patient unhappy with consultant has requested meeting with Med Director and C.E	Ongoing

3. Patient surveys (See attached survey results)

4. Quality account indicators

The following indicators are reported as part of the Trust's Quality Accounts. These indicators are reported as an annual figure. For this report these are broken down for the last 4 quarters.

Patient Experience Indicators

	Q2	Q3	Q4	April/May
At least 80% of patients rate as 'always' in the local patient survey programme when asked 'I was treated with courtesy and respect'	97%	97%	97%	98%
At least 80% of patients rate as 'always' in the local patient survey programme when asked 'Was the ward / department clean'	96%	96%	94%	96%
At least 70% of patients rate as 'never' in the local patient survey programme when asked 'If they had to wait'	26%	30%	28%	34%
At least 80% of patients rate as 'always' in the local patient survey programme when asked if 'I was included in discussions about my care'	89%	91%	95%	91%
At least 80% of patients rate as 'always' in the local patient survey programme when asked if 'the staff washed their hands'	94%	93%	93%	95%

Patient survey:

- Data source: data collected from in-house survey
- Survey questions based on annual Care Quality Commission In-patient survey
- Target for compliance agreed by the Trust Board as part of our Quality Strategy

5. Friends and Family Test

The goal of The Friends and Family Test is to improve the experience of patients. It aims to provide timely feedback from patients about their experience. All NHS Trusts have a requirement to ask every inpatient the following question:

How likely are you to recommend our ward to friends and family if they needed similar care or treatment?

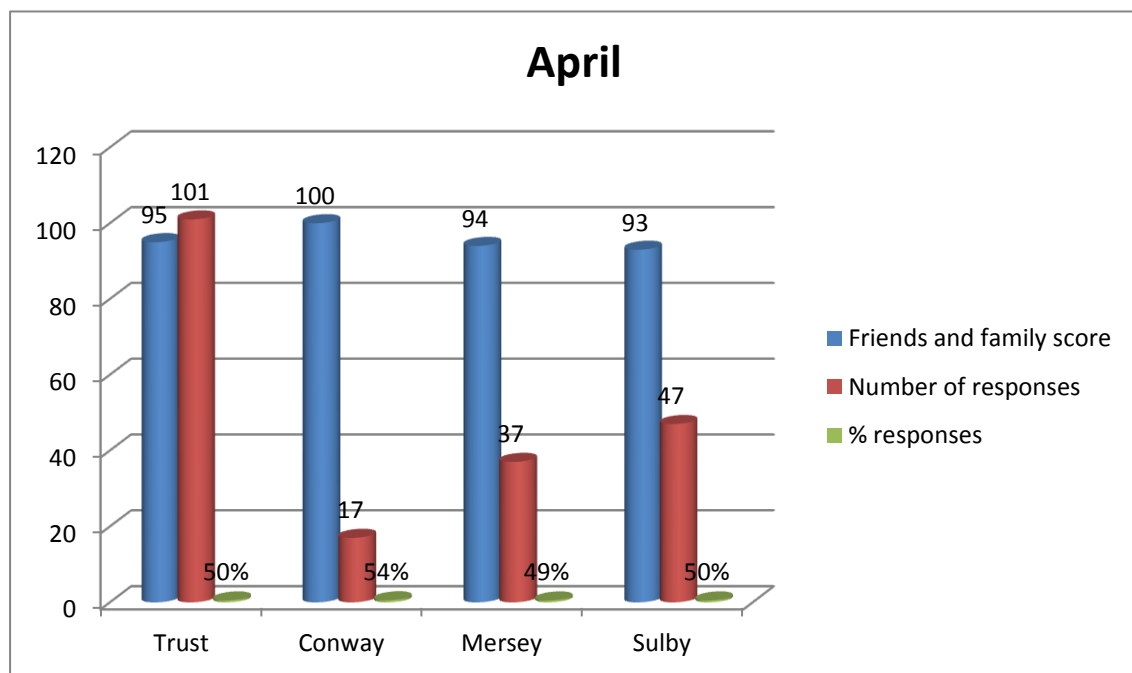
- Extremely likely
- Likely
- Neither likely or unlikely
- Unlikely
- Extremely unlikely
- Don't know

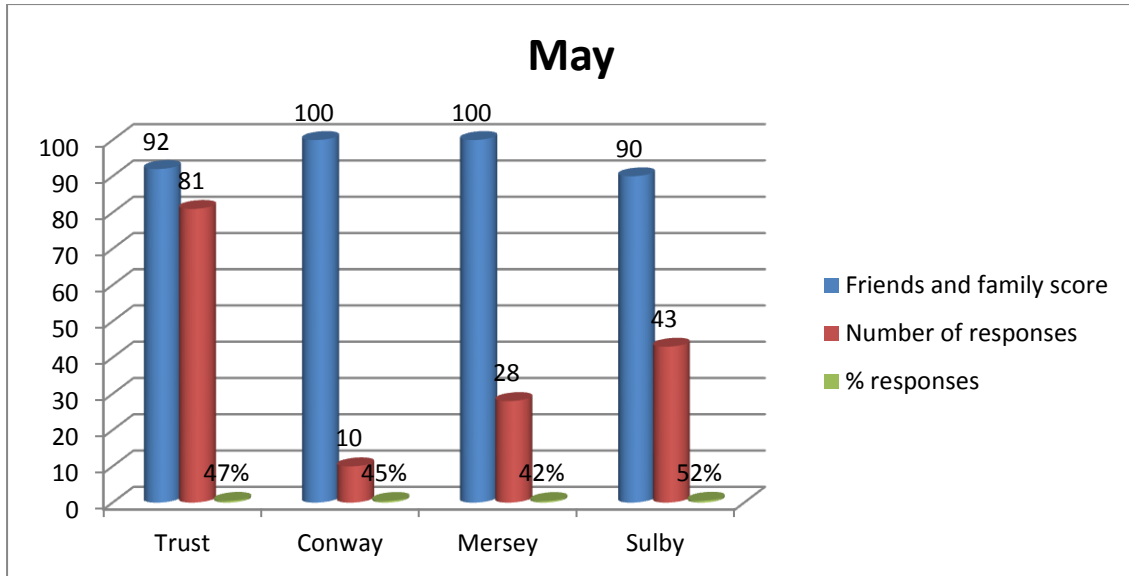
From April 1st 2013 it was made mandatory across the NHS, however at CCC we decided to start from December 1st 2012 to ensure a robust system was in place by April.

We opted to pilot a paper based system in the form of postcards. The guidelines state that the patient must be asked the question at discharge or within 48 hours of discharge. The aim is at least a 15% response rate. We have distributed collection boxes on the wards and at the main desk. The postcards have a freepost address to enable patients to return them once they get home.

The results so far have been very encouraging with regard to patient's recommendations; however work is needed in certain areas to ensure all patients are given the opportunity to complete the questionnaire.

The methodology for scoring The Friends and Family Test is consistent across the NHS to enable comparison across different Trusts and the wards within those Trusts. The score is calculated by the proportion of patients who strongly recommend, minus those who would not recommend, or who are indifferent.





6. Patient environment:

PEAT

The Patient Environment Action Team Assessment (PEAT) was established in 2000. In addition to the annual formal inspection the Trust implemented a monthly internal inspection team who conduct unannounced inspections in all clinical areas of the Trust. The inspection team comprises the Director of Nursing and Quality, Infection control, Head of Nursing, estates, hotel services and patient representation. The patient representative is charged with obtaining patient views during the inspection.

In the April inspection the following patient comments were received:

PEAT Patient Comments
<p>Out Patients All positive about environment, cleanliness and waiting times.</p> <p>Clatterbridge Clinic Exceptionally clean and calm</p> <p>Radiotherapy Brilliant care and more than happy with everything Conservatory is a little oasis of calm Nice and clean Staff are very good Waiting times not excessive and when they do run over slightly they are manageable</p> <p>Mersey Ward Being looked after very well Very happy with all aspects of care and all staff</p> <p>Conway Ward As above</p> <p>Delamere Very happy with standard of care</p>

Aware of pagers if needed
 If there has been a delay before an appointment then understand that some patients need extra time so not a problem to wait
Sulby
 Brilliant care
 Staff are sensitive to individual's feelings
 Very happy with my treatment and the staff always go that extra mile

PLACE

In 2013 the formal PEAT inspection was replaced by PLACE (Patient Led Assessment of the Care Environment).

Our annual PLACE (Patient Led Assessment of the Care Environment) assessment in 2013 has demonstrated good performance with excellent ratings being given for cleanliness (99.07%), food (97.57%, privacy, dignity and wellbeing (93.85% and condition, appearance and maintenance (96.22%). The next assessment took place in June 2014. The overall performance was very good. Formal report is awaited.

7. You said, we did

Issue	Actions / change implemented
<i>On Delamere we needed to tell patients how long a delay may be and what the cause of the delay is.</i>	<i>Raspberry Pi system installed in outside waiting area that is regularly updated.</i>
No info on free wi-fi displayed or how to access it	<i>Information to be included in the revision of the 'A Guide for Patients'.</i>

8. Bereavement interviews

As part of its support to the bereaved the Trust provides a 'day after death' service to the next of kin to patients who die within the Trust. Narrative reports are written by the CBS / ward manager who conducts the service. Bereaved relatives comments are taken from these reports.

Date	Comments
16.4.14	The family raised concerns that the patient was given bad news over the weekend alone by Dr xxx however on review of the notes she had not been seen by Dr xxx and had been reviewed by Dr yyyy ward cover he has documented " 11/4/14 – Patient didn't want to discuss without sister present - Feels this is terminal but not happy to accept this

	<p>yet</p> <p>- Will discuss with sister later today “</p> <p>Family advised to speak to CCC Pals officer regarding concerns</p> <p>They have a few concerns regarding her disjointed care at Aintree discussed concerns and advised to liaise with Pals</p>
3.4.14	Mr xxxxxxxx and his daughters expressed her thanks to all the staff on Conway ward for all the care they had given to her sister and herself. The daughters attended the ward post death duty to thank staff.
6.3.14	The family were very grateful for all the care he received and passed on their sincere thanks to all concerned.
17.2.14	The patient’s wife and two children attended and were clearly very distressed, they are shocked at how quickly he became unwell and deteriorated. He had only been diagnosed 3 weeks prior. The wife has agreed to the bereavement follow up phone call in 6-8 weeks, her daughter wanted to know about counselling prior to this, advised to contact GP if any concerns prior.
14.1.14	No issues or concerns expressed by family. All documentation explained to the family and completed. The patient will be cremated.

9. National surveys

The action plan for the inpatient CQC survey is attached.

10. Patient story programme

Further filming to take place in conjunction with the Governors later this year.

11. NHS Choices

A link to the latest comments below:

<http://www.nhs.uk/Services/hospitals/ReviewsAndRatings/DefaultView.aspx?id=835>

May 2014: Delamere day unit

I have attended this unit with my Dad. The staff and volunteers at Clatterbridge were excellent. We were slotted in for an appointment with the oncologist and we did wait. However, the registrar we saw was patient and gave us all the information we needed. We never felt rushed and he spent about an hour with us. The consultant was excellent and explained

everything. The staff nurse we saw was so professional and straight forward. She made us feel she had time for us and although all the other patients had gone home and it was 6 o' clock she spent the time she thought was needed. I left feeling completely reassured about the treatment and I am truly grateful for the care the staff nurse, in particular, showed. Even when everything was closed down she took us to see where the treatment would take place.
Thanks Catherine!