

Report on Drop-ins at Trafford General Hospital

December 2014 - February 2015

February 2015



Contents

Section	Page number
Executive Summary	3
Background Info	5
Aims	
 Desired Outcomes 	
Methodology	
Data Analysis	6
Summary of Feedback	8
Patient Journey Case Study	9
Evaluation	13
Appendix 1 - Feedback Form	16



Executive Summary

This report summarises the drop-ins conducted by Healthwatch Trafford at Trafford General Hospital on 18th December 2014, 13th January and 10th February 2015. The drop-ins were conducted with the aims of:

- Listening to and recording the experiences and views of Trafford residents regarding all local health and social care services, with a particular focus on Trafford General Hospital.
- Encouraging people to report experiences of health & social care to us in the future (via website, telephone or in person at our drop ins).
- Raising the profile and awareness of HWT.
- Signposting people to relevant health /social care services.

Over the three sessions 267 people were spoken to and 37 experiences recorded. 29 of the experiences referred to Trafford General Hospital, which when combined with existing comments on the HWT Feedback Centre, show an average 4 (out of 5) star rating for Trafford General Hospital.

The majority of feedback received was positive and highlighted the following areas for praise; Staff, Fracture Clinic, Hearing Clinic, Outpatients, Cardiology, waiting times.

Negative comments were received around the following areas; Waiting times, staff attitude, food, communication.

The patient journey case study highlights some of the same areas and was recorded at the first drop-in on 18th December.

The following suggestions are recommended:

- Drop-ins continue on a regular basis to facilitate a flow of information that informs both HWT and CMFT about the experiences of the public when accessing services at Trafford General (and elsewhere) and the staff in delivering them. Investigate
- This feedback (both positive and negative) is fed back to CMFT through reporting and regular liaison meetings and incorporated into the patient experience programme.
- If not already happening, that CMFT look at how areas and departments identified as delivering excellent service are doing so and how this might be replicated elsewhere.
- Where appropriate, CMFT investigate the areas of concern and how they might be addressed and inform HWT when this has occurred.
- The patient journey case study be looked at in detail and subject to the patients' approval, put through the PALs complaints system.

For Healthwatch Trafford:

 Develop & produce HWT posters and explore feasibility of these going up around Trafford General



- Develop formal recording procedure for data (number of people engaged) and patient experience topics gathered
- Create badges for HWT volunteers to wear during the drop-in
- Continue to use freebies (stress balls and pens) which attracted attention to us



Background Information

In October 2014 Jane Grimshaw, Head of Nursing at Trafford General Hospital and Linda Adamson, Clinical Effectiveness & Patient Experience Lead (Trafford), met with members of the Healthwatch Trafford (HWT) team and it was agreed that HWT would carry out three drop-ins between December 2014 and February 2015.

Fourteen Healthwatch Trafford volunteers were given training a month prior to the first drop-in in order to ensure they felt comfortable and safe at the hospital, confident in the accuracy of the information they were giving and that the drop-ins were as effective as possible.

Aims

- to listen to and record the experiences and views of Trafford residents re all local NHS health and social care services, with a particular focus on Trafford General Hospital;
- to encourage people to report experiences of health & social care to us in the future (via website, telephone or in person at our drop ins);
- to raise the profile and awareness of HWT;
- to signpost people to relevant health /social care services.

Desired Outcomes:

- to obtain and collate qualitative patient experience data regarding a range of health / social care services, in particular Trafford General Hospital;
- to identify where local services are working well and where improvements can be made;
- to work with service providers, including Trafford General to encourage positive change to service design and delivery where possible;
- to share and promote examples of good practice locally, regionally and nationally.

Methodology

HWT staff and volunteers set up a market place stand and pop-up banner in the Outpatients reception / café area (December 2014) and in the hospital restaurant (January & December 2015). Healthwatch leaflets, free resources (stress balls and pens), electronic devices displaying the HWT website and other resources, including information sheets on PALS were available at the stand.





HWT staff and volunteer in restaurant

Patients, their family members and carers were approached by Healthwatch staff/volunteers, or vice versa, given leaflets and engaged in discourse on the service. In some instances, paper copies of feedback forms were distributed and support offered in completing them (see Appendix 1). The paper copy feedback forms mirror the online Feedback Centre on the HWT website; respondents are asked to rate the service using a five star rating system for overall satisfaction and then given the option to rate specific elements of their treatment and to leave comments.

The star rating system:





Data Analysis

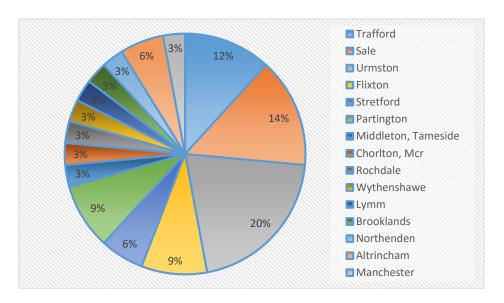
The following data has been collated from all three drop-ins:

267 patients, family members / carers and hospital staff were engaged by HWT.

37 patient experiences were recorded.

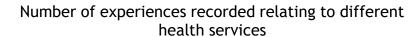
29 of these 37 patient experiences related to Trafford General Hospital

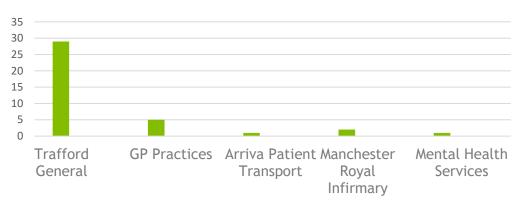
Respondents by Area:





Summary of Feedback





The Healthwatch Trafford online Feedback Centre (where experiences gathered at the drop-ins were recorded) shows a four star average rating given for overall satisfaction with service at Trafford General Hospital:



Image taken from HWT website (16/02/15)



Feedback on Trafford General Hospital services

All comments gathered at the drop-ins regarding Trafford General Hospital services were placed on the Healthwatch Trafford website (Feedback Centre) (www.healthwatchtrafford.co.uk). They make up 31 of a total of 36 patient experiences at Trafford General Hospital on the site.

Positive feedback for hospital services included:

- Had a telephone consultation with a orthopaedic specialist nurse. Never had any complaints.
- After snapping my cruciate ligament I had an MRI a pre op assessment and physio. All
 explained well, politely and great service all round
- Very satisfied!
- Regular attendance at cardiology, urology and rheumatology clinic. Following admission to hospital in 2009 I have attended the cardiology, rheumatology and urology clinic at TGH on a regular basis and the care and service has been excellent.

Fracture Clinic

• I travel from Middleton to attend this clinic. I feel it's well worth the travel from where I live.

Hearing Clinic

 After initial wait for first appointment, a smooth process to diagnosis and fitting of aids.

Outpatients

- Hospital always been marvellous.
- Outpatient nursing is wonderful.

Cardiology

• I've been seeing Dr Stevens here for a while. She's done lots of investigations on my condition and she got me a pacemaker really quickly. The team who fitted the pacemaker in theatre were excellent. It was first class.

Waiting Times

- Prompt service.
- The wait is only a few minutes. (Endoscopy)
- Everything ok seen promptly. (Outpatients)

General

- Don't cut funds / resources!!
 My mum has been in for a week, seriously ill (she's been on the Assessment Ward and wards 15 & 1). All the staff, from consultants and nurses to carers and cleaners have been first class. A credit to the hospital!
- Good staff and facilities.



- The run up to my appointment was fine the explanations given were good. On the day of the appointment I was booked in straight away and then had to drink something and wait an hour after having the drink. I was called again and they explained about the scan. Everything went ok.
- My appointment was at 2.00pm and even with having to wait an hour with the drink I was finished not long after 3.00pm. I'm happy with this! Everybody was nice, polite and happy.
- All the staff are very friendly.
- Staff are friendly.
- Better than expected. Treated with great care and kindness (Orthopedics)
- Attentive staff.
- Since seeing a professor, treatment explanation has been very good / excellent!
- I accessed the appointment time immediately, the consultant was thorough and reassuring, staff were pleasant and helpful (dermatology)
- Successful bowel cancer operation, priceless. Staff polite and respectful. I've had 2
 endoscopies, very thorough and efficient with 6c-t scans. Regular haematology
 appointments, excellent and efficient



Negative Comments

- Could do with brightening the place up a bit. Outside is a bit dull.
- Could do with more frequent transport to the hospital as there is only one bus from Wythenshawe
- The waiting time needs to improve (Orthopaedics)
- Nursing could be improved on the wards.
- Drinks in vending machines are disgusting!
- Only thing is the taking away of the accident and emergency.

Waiting Times

- Waiting times could be better (Urgent Care). Had to wait 9 days to see a consultant. Been in constant pain while waiting.
- Waiting times could be improved but it's free!
- Good overall except for waiting time & food (Overnight stay)
- Not satisfied with length of time I've waited and appointments being altered (Hearing Clinic)
- It is such a shame that this clinic is understaffed. The treatment is second to none but because of cutbacks they are understaffed. The walk in clinic has closed and is now appointments only which can cause disaster to someone unable to hear and having to wait for days to be seen to.(Hearing Clinic)
- Orthopaedics waiting room filled up very quickly and very soon it was completely full with not enough seating for everyone. A notice was put up warning that waiting times would be more than an hour and a half for appointments. While not a major problem for patient since they are healthy and could happily read, there were lots of vulnerable, elderly and disabled patients and several children, for whom waiting is much more of a problem. Patient believes this is down to the block booking system employed by the department, which doesn't seem like a suitable system for the patients. Patient felt that appointment was rushed and they didn't get the time they might have otherwise (photos and records were not looked at in any detail) (Orthopaedic outpatients)

Communication

• I was told by Dr xxx that someone would ring me about my pre op appointment and they never did. I had to phone Dr xxx's secretary four times to get info on the date. Finally I got through and was told it was for that day! I got a bit frustrated, something obviously went wrong there.



Patient Journey Case Study (Recorded at drop-in on 18th December)

Patient was admitted to the assessment ward awaiting scan for gall bladder surgery. When patient was told to contact outpatients on discharge to make an appointment for a scan, they questioned why when they were already in a hospital ward on a hospital stay and that the scan should take place while they were there. The scan went ahead as requested by patient but caused the attitude of nurse on ward to change towards patient being both curt and rude. Patient found this very upsetting.

Patient's consultant is Mr A who 4 months previously had informed patient that gall bladder surgery was to go ahead. At this meeting Mr A stated that patient would need an appointment to see the anesthetist due to previous medical history warranting this procedure.

There were numerous problems obtaining an anesthetist appointment and a pre-op appointment. Patient was having to contact the hospital because no communication received from the hospital about any appointments (around 14 phone calls made to enquire over dates). Patient saw Consultant, Mr A again 3 weeks before operation was due with no pre-op date being given. Six days before operation patient was given a date for the pre-op at MRI and at this appointment the doctor at MRI laughed at patient's request to see an anesthetist. Again there had been communication problems between TGH and CMFT. Having stressed that it was a request made by patient's consultant Mr A, the patient was told by MRI to go to TGH on the following Monday to see the anesthetist there but on attending the TGH staff had no notes about the patient. On eventually seeing the anesthetist at TGH, staff told the patient it was highly unusual to do an assessment with no notes adding that he was seeing them because the anesthetist at MRI was off sick. The patient pointed out that this was not correct, they had been informed by MRI anesthetist to attend TGH for this assessment. The TGH anesthetist told patient that he could only assess on what he saw in front of him and that he felt patient was telling him the truth.

The day of the operation

Patient had received the letter for planned surgery 8 weeks previously, the letter stated that they must attend TGH at 7.30am (they arrived at 7.15). At 8.45am when patient's name had not been called they enquired how long would it be before being seen, a male staff member told patient they weren't supposed to be there until 11am and to go away until then. He suggested they took a walk around the hospital grounds for an hour. They did until 10.10am then returned to the day surgery waiting room and waited. At 11.30am a male nurse/health worker (patient really didn't know what this young gentleman's role was) came and told them he would now get them ready for theatre and then disappeared. It seems he went for dinner and they were still sat there at 12.30pm.

After dinner

Before the young man returned (1.30pm) another staff member came and asked if they had just arrived (it seems theatre were ready for them 2 hours ago) and that they had now lost their place. 2 hours later another gentleman came and spoke to the patient and said that there was nothing on patient's notes and they would have to go through the whole process again, he then disappeared too. The original male staff member arrived back and



walked off again. At this point a female nurse took command and got patient ready for theatre.

Theatre experience

By the time patient was ready for theatre it was 4.30pm and were the last to go down to theatre. By now patient hadn't eaten since 9pm the night before. There was no bed for short trip to theatre so they walked (patient admits to walking due to feeling tired of waiting and had no intention of now having to wait for a bed to take to theatre). Patient had been on their own all this time and was scared and wanted to go home.

Consequences to the patient

Patient cried when retelling this story and outside of family hasn't spoke of the event. The experience has left them traumatized and it was some time before they could even speak about it to their family. Patient had not felt strong enough to complain to PALs and because they have to continue to use the hospital service, is concerned that it will be detrimental for their health and well-being to raise this complaint.

Aftercare

Patient stated that the aftercare they received was very good.



Healthwatch Trafford Evaluation of Drop-ins

We felt that the drop-ins were very positive overall. We were very pleased with both the number and variety of people that we spoke to. It was felt that we captured a balanced mix of comments that highlighted both positive areas and those areas where it was felt there could be improvements made.

One of our key objectives was to raise awareness of Healthwatch and we are confident that this was achieved. The HWT volunteers provided clear feedback that many people did not know about HWT prior to the sessions (this included both hospital staff and members of the public) and following the February drop in a member of the public that we had spoken to phoned the office to give more patient feedback on their experiences at Trafford General.

We feel that continuing the drop-ins would be of real value to both parties and provide a valuable ongoing source of data.

Numbers at each drop-in:

December 2014 100

January 2015 70

February 2015 97

Learning we have taken from the drop-ins

Location makes a difference.

OUTPATIENTS / CAFÉ AREA:

We were based here in December 2014 due to lack of space at the hospital restaurant during the festive period. While based in this area, very few people came to us, possibly because:

- Our HWT stand was not readily visible to people entering and leaving outpatients reception area
- People were coming into reception to register for an appointment or leaving the building following an appointment.
- The majority of people using the café seemed disinterested in HWT (although 2 people did complete a patient feedback form in that area)

We therefore had to be very pro-active and approach people with leaflets, giving a brief explanation of who we are and what we do as patients / carers and family members were leaving/entering the hospital. This meant that conversations were limited in their length and opportunities to listen to patient experiences were scarce.



For this reason, we visited other areas of the hospital where people were sat down waiting for a service and potentially more willing to complete a form. These included orthopaedics and the walk in centre.

HOSPITAL RESTAURANT:

At the second and third drop-ins we were based in the restaurant. We stationed ourselves in the entrance with our banner and table facing people as they came in. Because of this more people approached us than previously, many of these people being interested NHS staff. It was still important for HWT staff and volunteers to be pro-active and approach people, being respectful and mindful of the fact that many were eating meals and would not want to be bothered.

As with the first drop-in, staff and volunteers continued to explore other areas of the hospital to distribute leaflets and engage patients / carers / family members, such as phlebotomy and orthopaedics.

Volunteers

Many of our trained volunteers were proactive in going to different parts of the hospital to distribute leaflets in leaflet holders / any area with other health leaflets and to patients.

Engagement methods

At the three drop-ins the tablets with our website up and running were largely redundant. Members of the public and NHS staff seemed more interested in our hard copy resources and freebies. The tablets were useful for staff/volunteers to record patient experiences directly onto the HWT website Feedback Centre where we were given consent to do so.

Use of the tablets was supported by HWT purchase of miFi equipment to give internet access. However, internet access was intermittent.



Appendix 1

Service feedback form Service Name & location (eg. Trafford Health Centre, Davyhulme) Rate this service provider overall Cleanliness Staff Attitude Waiting Time Treatment explanation Quality of care Quality of food

T-11	
ell us more	about your experience*
	Continue on next page if needed
Where do yo	ou live? (Town & borough eg. Sale, Trafford)
About you	
Name	
Leave feedb	ack anonymously? Yes
Email* (Your marketing mat	email will be kept private and you will not be sent any cerial)
Laccent the	Terms and conditions: Yes
	the newsletter? Yes No
subscribe to	the newstetter: Tes No
Can these vi	ews go on the <u>Healthwatch</u> Trafford website?

healthwotch



Service feedback form



Tell us about your experience continued			

Only your overall rating, comment and name (if disclosed) will be visible online.