

**Patient
Experience
Report:**

healthwatch
Trafford

**Trafford
General
Hospital**

July - December 2015

March 2016

Contents

| | |
|---|----|
| Acknowledgements | 2 |
| 1. Key Findings and Our Recommendations | 3 |
| 2. Introduction | 5 |
| 3. Methodology | 6 |
| 4. Results..... | 7 |
| (a) Quantitative results | 7 |
| (b) Qualitative Results | 7 |
| (bi) Positive comments..... | 8 |
| (bii) Negative comments..... | 10 |
| Areas of concern | 13 |
| Appendix 1: Patient feedback form | 14 |
| Appendix 2: Responses to recommendations made in Getting it right for Deaf people in Trafford report (March 2016) | 15 |

Acknowledgements

We were made to feel very welcome by hospital staff and management throughout the planning and delivery of our drop-in sessions. Healthwatch Trafford would like to extend special thanks to Jane Grimshaw for supporting this work.

Thanks go to Healthwatch Trafford volunteers for their contribution to the delivery of the drop-ins at Trafford General Hospital: Shahan Waheed, Pat Lees, Jean Rose, Georgina Jameson, Sandra Griesbach, Vikee Shaw and Don McGeachin

1. Key Findings and Our Recommendations

Patient and visitor experiences regarding Trafford General Hospital were gathered by Healthwatch Trafford through a variety of methods:

- Face to face engagement with 206 patients and visitors by Healthwatch Trafford at three hospital drop-ins (September, October and December 2015)
- phone calls and emails to Healthwatch Trafford from local residents
- reviews submitted through the Healthwatch Trafford online Feedback Centre by local residents

The majority of feedback gathered by Healthwatch Trafford regarding Trafford General Hospital between July - December 2015 was positive;

this is reflected in the hospitals average overall service rating of 4 ½ stars, ('very good' - 'excellent') over this time period on the Healthwatch Trafford website feedback centre.

The following areas all received 4 star ('very good') or above ratings:

- Quality of care received
- Staff attitudes
- Treatment explanations
- Cleanliness
- Waiting times
- Quality of food

However, patient and visitor comments over this time period also indicate that improvements can be made in the following areas:

- Accessibility of Phlebotomy Service for working age residents
- Waiting times in Urgent Care and Warfarin Clinic
- Administration regarding appointments for elderly and other patients (Outpatients, Dermatology and Audiology)
- Processes within Anticoagulation Services and telephone access
- Length of booking times for British Sign Language (BSL) Interpreters for (D)deaf patients
- Prioritisation of Deaf patients where appointment delays are out of patients' control
- Hospital BSL Interpreter appointment bookings via text are not always confirmed with patient prior to appointment
- Short notice for appointments at (Dermatology) for patients with physical accessibility needs

Recommendations

- ALL recommendations, (in particular, regarding prioritisation of deaf patients where appointment delays occur), made in the [‘Getting it right for Deaf people in Trafford’ report](#) to be revisited.¹ When an interpreter is required it is very likely that additional time will be needed for the consultation. This should be built into the appointment scheduling to allow sufficient time for the appointment. Where new actions are taken, CMFT staff to update Healthwatch Trafford who will report changes to local residents, enabling them to determine the impact of their feedback on service design and delivery. (CMFT response June 2015: Clinical Effectiveness & Patient Experience Lead (Trafford Division) to discuss reviewing processes for prioritising patients requiring an interpreter with Outpatient operational managers). [For responses to recommendations in the ‘Getting it right’ report see Appendix 2.](#)

- Administrative procedures in Audiology, Dermatology, Orthopaedics and Anticoagulation services to be reviewed to identify why and where issues with patient appointments and results arise and can be addressed appropriately.

- The Phlebotomy Service Action Plan 2015 to be revisited to address accessibility to the service for people of working age (the Ayres Road Clinic is not accessible outside 9.00am - 5.00pm).

- CMFT to respond to outstanding recommendations and patient feedback collated in previous Healthwatch Trafford reports:
 - Patient dissatisfaction with Audiology: appointments being altered, removal of and understaffed Hearing Clinics all leading to delays and longer waiting times (CMFT action in June 2015 was to forward these comments to Greg in Audiology).

 - Waiting times in Orthopaedics (CMFT response: new Trust standard recently set to ensure patients wait no longer than 30 minutes for an appointment).

 - Lack of communication between Trafford General and Manchester Royal Infirmary (three patient experiences recorded January - April 2015)

 - Administrative problems experienced for pre-operation appointments.

¹ 2 patient experiences recorded by Healthwatch Trafford in May 2015 (shared with CMFT staff in August 2015) updated March 2016 regarding BSL interpreters having to leave appointments due to service delays highlight the significance of this recommendation.

2. Introduction

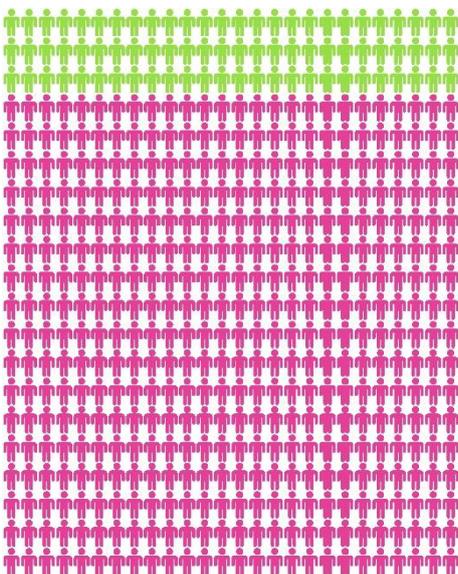
Healthwatch Trafford was established under the Health and Social Care Act, 2012 with the following remit:

- Listening to local people: gathering patient & service user experiences
- Influencing services: using what local people tell us about their experiences to support health & social care services to make positive changes so that residents can get the best out of them
- Providing an information signposting service: providing information to help people make informed choices about the services they access

Healthwatch aims to help residents get the best out of local health and social care services by representing the patient voice and supporting services to design and deliver services shaped by local needs and experience.

Our drop-ins at Trafford General Hospital were carried out with the following aims:

- to obtain and collate qualitative patient experience data regarding Trafford General Hospital;
- to identify areas where Trafford General Hospital is performing well and where service improvements can be made;
- to work with Central Manchester Foundation Trust management and staff to encourage improvement to service design and delivery where areas for development are identified;
- to share and promote examples of good practice locally, regionally and nationally;
- to raise the public profile of Healthwatch Trafford.



A total of 520 residents have been engaged over 7 Healthwatch Trafford drop-ins at Trafford General Hospital, 2014 - 2015.

78 of these residents gave permission for publication of their patient feedback regarding Trafford General Hospital services to be published on the Healthwatch Trafford website. Where consent was not given, the feedback was submitted to the online Feedback Centre but was not published. Other feedback came through residents who telephoned or emailed us with their experiences.

520 Residents - 78 Patient Stories

3. Methodology

Healthwatch Trafford drop-ins at Trafford General Hospital took place over mornings and afternoons (2015). Patients, carers and visitors were asked about their experiences of the hospital by Healthwatch staff and volunteers from a stand in the hospital restaurant.

Using our Patient Feedback form, patients, carers and family members were asked to rate the service overall using the scale below. It was optional for them to rate specific aspects of the service such as cleanliness and staff attitudes (again using the scale below). They were also asked to comment on what had been positive about the care and treatment received and what could be better. The patient feedback form can be found in Appendix 1.



The star rating scale:



The patient feedback form was the only tool used to gather quantitative and qualitative data at the drop-ins. The form was available in accessible formats such as large font for people with visual impairments, additional languages (such as Polish and Urdu) and Easy Read format. Written or verbal consent was sought from individuals to publish their patient experiences on the Healthwatch Trafford website.

4. Results

Data analysis was carried out manually using Microsoft Excel and electronically using the informatics platform of the Healthwatch Trafford website.

(a) Quantitative results

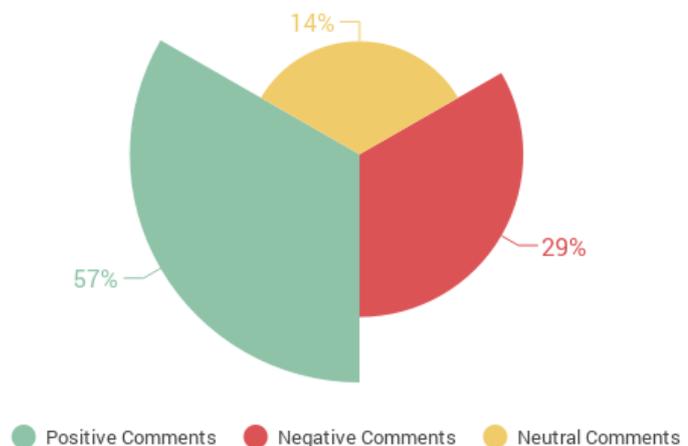


Patients / visitors were required to give an overall service rating, but specific ratings around cleanliness, staff attitudes etc. (listed above), were optional to complete.

The image above is taken directly from the informatics platform of the Healthwatch Trafford website and indicates that the hospital received an **overall** average rating of 4.5 stars from patients, indicating very good / excellent service. Average patient / visitor ratings for specific areas of Trafford General are also between 4 - 4.5 stars as shown above.

(b) Qualitative Results

In addition to the star rating system, people were asked to give general comments on what was good about the service received and what, if anything, could be improved. Overall, 57% of comments were analysed through the website informatics system as positive, 29% as negative and 14% as neutral.



(bi) Positive comments

Staff attitudes

“Physiotherapists were fantastic, helped me and never rushed me.”

“Really good - went for blood test, x2 X-ray and ECT scan. Service was good. The hospital has been really good, they made me feel good and they helped me with my condition and gave me follow-up appointment. Great.”

“Pain Clinic - staff lovely”

“X ray department - friendly”

“Physiotherapists were fantastic, helped me and never rushed me”

“Macmillan Nurse - excellent. I had canular emmpetimy chemotherapy - radiation. Between Christies - Wythenshawe and Trafford General excellent. All the hospitals - Wythenshawe, Christies, Trafford General. Doctors, nurses, excellent and my experiences at the hospitals I visited. I was well looked after, and feel privileged to go to Macmillan nurses who taught me a lot - you must look after yourself.”

“Gynae. Assessment Unit - after having a miscarriage I was seen by nurses at the Gynae. Assessment Unit. I saw a couple of different nurses and the unit manager, Heather Entwistle. For the first time after the miscarriage, I felt that the manager was sensitive to my emotional wellbeing, addressing the emotional impact not just the biological effects of a miscarriage, and talked through everything with me, including when might be a good time to start trying for a baby again. I was given a copy of the contact details for the unit and told to call again if I wanted to if I conceived again and wanted reassurance.

Some months later I became pregnant again and phoned the unit. They were brilliant again, and made appointments for me to have scans at 6 & 8 weeks to reassure me that everything was ok. When I had difficulties getting an appointment with my midwife to book the 12 week scan, I phone the Gynae. unit and Heather Entwistle was brilliant; she arranged for me to have the scan at Trafford General and gave me useful info.

So grateful to the staff in this unit. Waiting times were often up to 45 mins so this could be better but in terms of support I couldn't have asked for more. If only my GP had been so sensitive to my needs!”

“Stoma Care Nurses - good experience when was in need. Was having trouble with my stoma and was in pain and running out of supplies. Rang nurse who asked me to come to Trafford. She stayed late to sort me out and reassure me about the problems I was having. She made sure I had all supplies I needed and promised to come and see me at home on Monday morning, which she did.”

“Outpatients Department - pretty good. Nice atmosphere. Approachable staff”

“Very friendly helpful staff.”

“Toe operation - had operation on my toe and everyone was helpful and caring.”
(young person)

Quality of care

“I have CML, treatment has been consistent and supportive regarding my cancer.”

“Overall a good experience for patients.”

“Excellent, 'five star' - had mastoid ear surgery. A1 service, excellent care. All hospitals should be to this standard.”

“Pain Clinic - good quality service”

“Warfarin Clinic - very good. Excellent treatment. Confidence in clinic.”

“Warfarin Clinic - very good. Couple of months between appointments.”
Contact by letter.

“Choice between Salford and Trafford. Chose Trafford.”

“Warfarin Clinic - very good, been coming many years”

Warfarin Clinic - very good service. Nurses excellent”

“Good, efficient service. Attended for physio & rheumatology appointment. Whilst there had bloods taken and went to pharmacy for long term injections. In all departments was treated well with minimum waiting times. My wife also attended audiology department with no problems.”

Facilities & Surroundings

“...services & signs well displayed. Car park (free) yes...”

Cleanliness

“Friendly staff and clean facilities.”

Food & Hydration

“Cafe/restaurant: plenty of room/choices, healthy one also.”

Waiting times

“X ray Department - very prompt. I was sent for an x ray by my GP expecting a long wait but was seen within 5 minutes.”

Treatment explanations

“Very well looked after - several visits to Outpatients and always looked after well and informed fully what to expect.”

“Excellent - very informative every step of the way for CT scan. Information about drinking the dye, times he would return to check. Everything went according to info received. ”

(bii) Negative comments

Hospital appointment confirmed by text for deaf patient but BSL Interpreter appointment booking via text not confirmed with patient prior to appointment.

Short notice for appointment at Dermatology (6 days) for patient who is deaf and has mobility issues.

Access to services

“Phlebotomy Service - when you get there, at 7.30 in the morning all the retired people are there and you can't get in. It's frustrating if you're working.”

“Another problem over time limit waiting oh dear! To-day the Interpreter was there for me - good, but time limited because time waiting 35 minutes but the interpreter told only booked for 15 minutes only. Interpreter had to leave for next appointments and asked the nurse if can allow me go first instead of other patient. First said no, unfair to other people. I agreed with the nurses. Same last time about 4 weeks ago [August 2015], same things an average waiting time about 45 minutes the interpreter slight panic because were told only 15 minutes available. The nurse say no because other patients first but not actually 45 minutes and to-day 35 minutes on the broad time waiting so the lady patient very kind of her let me go first. Really not fair for the patient who got there first before me? I felt awful so please do somethings to sort it out over time waiting limited.” (Deaf patient - BSL user)

Waiting times

“Warfarin Clinic - good service. Waited for a while.”

“Warfarin Clinic - different days may cause delay due to busyness [sic] of clinic”

“Waiting times in Urgent Care - waiting for over 5 hours before being told that there wasn't the consulting staff and being transferred to MRI.”

Staff

“Stay on the ward - on the ward the cleaner would come in the morning and bang things around, talking to herself, just when you'd got to sleep. Two of the nurses were ok. One said good morning when she was opening the curtains and everything. But one of them, when she was taking my blood, asked if I'd ever had my blood taken. I said no so that she would be gentle with me.”

Quality of care

“My wife was moved here from Christies. She's been here for four weeks. The nurses are ok but they are stretched. There's not a lack of care.”

Quality of food

“The food is unmentionable. I'm not sure how you can get mashed potato wrong. My wife has stopped eating and I don't blame her.”

Cleanliness

“I went for a breast screening appointment, but they wouldn't give me the appointment because the machine broke down. The appointment was non-existent”

Administration procedures and communication

“Good treatment, but lack of communication. I went with an elderly neighbour to an out-patients appointment. The only reason we turned up at the right date and time is due to a text sent to my mobile. Trafford's system appeared to think I was the patient. Two letters had been sent to my neighbour, being elderly and a little confused they had not realised there had been a change in date. While there I discovered my neighbour had missed another appointment in a different department, she had been crossed off the list and counted as a "Did not arrive". I presume this department does not send out text messages to remind people about appointments.

My question is why is there not one communication system which covers the hospital or maybe the Trust.

As we had to wait a long time I overheard the receptionist speaking to another patient re a missed appointment due to two addresses on different sections of the Hospital's system. Why is this happening? (*continued...*)

As for my neighbours treatment - excellent. The Doctor and nurse took endless time to explain and reassure my neighbour. Treatment excellent. They also rearranged my neighbour's missed appointment.

With an ageing population there will be more people like my neighbour, elderly, confused with no one to look out for them. The NHS needs to accommodate this section of society and not simply cross them off a list because they do not arrive for an appointment. Integrated care, I think not."

"Anti-coagulation services - less efficient than used to be. More stressful results' system waiting for phone call if meds need changing. Always full. Explanation would be helpful of why change is necessary. Also cannot get through on direct line to discuss problems."

"Poor communication - I accompanied an elderly neighbour to the Audiology Department for a hearing aid fitting. On arrival we were informed the appointment had been changed to a later date and a letter had been sent informing my neighbour of the change. The receptionist printed out the new letter and I observed it contained the wrong address for my neighbour.

This is the second appointment for the same procedure. My neighbour had been crossed off the list completely after failing to attend the first appointment, which now appears not to be my neighbour's fault as the first letter must have been sent to the wrong address.

A second appointment was kindly rearranged through the understanding of the nurse in the ENT department meaning my neighbour did not have to be referred via the GP which is the usual procedure for missed appointments. A long route and also wasting professional's time and resources.

As my neighbour receives letters from other departments containing the correct address and these departments also send out text reminders re appointments I questioned why the mistake had occurred. Audiology has a separate system an obvious situation leading to clerical errors. The receptionist did apologise.

The waste of time and resources cannot be justified. The stress caused to my elderly, frail and confused neighbour is incalculable."

I did went to Dermatology Outpatients. The Doctor very confused and myself too because about four weeks ago said, discharged and can go back to Orthopaedic Outpatients or Centre to book which I did. Told them at reception to explain what happened. They sent me a letter with new Orthopaedic or pre-op appointment but last week received a letter for Dermatology again communicate [sic] error?

(Email from Deaf patient who uses BSL sign language)

A resident raised a concern regarding the care of his partner who, in September 2015, had a small operation which included a biopsy. Patient was told to expect the biopsy results in 6-8 weeks (29th Oct- 12th Nov). On 29th Oct a letter was received (from Trafford Community Outpatients) which did not give results but stated a follow-up appointment would be supplied shortly. (continued...)

Resident and patient have rung the number on the letter six times and each time been given a different answer: no results, or results have been sent, etc etc. As of 9th December, no appointment had been given and no results have been supplied. They are worried and would like to know the outcome of the test.

(Phone call from Trafford resident)

Areas of concern

Care on ward 3

Patient resided on Ward 3 of TGH for 1 year 2 weeks before being transferred to Moorside Unit's St Georges home. Patient was at St Georges for one week when a phone call from the home was received by a family member stating that the patient was distressed and was being taken to A&E (Oldham Hospital) F7.

Patient had severe, dangerous pressure sore; the tissue nurse at Oldham stated that the pressure is so deep and large that it is a major alert concern and should have been a red flag at Moorside. Oldham are x-raying the patient to find out if the hole at the bottom of his spine has gone through into his bones.

Patient's sibling is desperately worried for the patient and wants to make an official complaint about TGH as the bed sore has occurred while patient resided so long on Ward 3.

(Phone call to Healthwatch Trafford in June 2015)

Patient (over 80 years of age, of South Asian heritage, non English speaker) has been very sick and received treatment over a 3 year period at Trafford General. In September 2015, the patient went to India and was diagnosed with bowel cancer by a Doctor there. Upon returning to England the medical evidence of the cancer diagnosis was given to the patient's GP. The GP made a referral to Trafford General.

Trafford General medical team held a meeting with the family and apologized for not diagnosing the cancer. They promised full support and treatment from that point onwards.

(Phone call to Healthwatch Trafford in December 2015)

Appendix 1: Patient feedback form

Service feedback form

healthwatch Trafford healthwatch Manchester

Summary of your experience (45 characters max)

Service Name & location (eg. Trafford Health Centre, Davenport)

Tell us more about your experience*

Rate this service provider overall

Cleanliness

Staff Attitude

Waiting Time

Treatment explanation

Quality of care

Quality of food

Continue on next page if needed....

Where do you live? (Town & borough eg. Sale, Trafford)

About you

Name

Leave feedback anonymously? Yes

Email* (Your email will be kept private and you will not be sent any marketing material)

I accept the Terms and conditions: Yes

Subscribe to the newsletter? Yes No

Can these views go on the **Healthwatch Trafford** website?

Yes, with my name Yes, without my name No

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

Front of A4 document (above) and back (below).

Service feedback form

healthwatch Trafford healthwatch Manchester

Tell us about your experience continued...

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

Appendix 2: Responses to recommendations made in Getting it right for Deaf people in Trafford report (March 2016)

ALL services to offer SMS text messaging service for Deaf patients to book appointments & collect test results

SERVICE RESPONSES / ACTIONS

CMFT HOSPITALS:

Central Manchester Foundation Trust (CMFT) are working towards compliance with the Accessible Information Standards, (required legislation to be in place by July 31 2016). The Standards define a specific, consistent approach to identifying, recording, flagging up, sharing and meeting the communication and support needs of individual patients. (February 2016)

GP PRACTICES:

Trafford Clinical Commissioning Group (CCG) are exploring 2 way messaging systems to enable patients to cancel GP Service appointments (one way text messaging services currently operate in the majority of practices). (November 2015)

ALL services to provide Deaf Awareness training for medical and administrative staff, provided by a local Deaf charity with expertise and knowledge of the local Deaf community, such as Genie Networks

SERVICE RESPONSES / ACTIONS

CMFT HOSPITALS:

CMFT are in discussion with local organisation, Genie Networks, to develop a wider Deaf Awareness training programme within the Trust. (February 2016)

GP PRACTICES:

Trafford CCG enabled members of the Trafford Deaf Partnership and Healthwatch Trafford to deliver deaf awareness sessions to: all Trafford GP Practice Managers (April 2015) and 18 GPs / health practitioners over September - October 2015. (November 2015)

ALL services to send patients confirmation of BSL Interpreter booking with name of the interpreter booked, health service name, appointment time and date before the appointment

SERVICE RESPONSES / ACTIONS

CMFT HOSPITALS:

Once a BSL interpretation job is booked by the hospital, a letter of confirmation is then sent, with the name of the interpreter, to the requesting hospital department. It is currently up to the individual department to inform the patient of this if requested. The process for this notification will be included as part of the implementation of the Accessible Information Standard.

GP PRACTICES:

Park Medical Practice, (Timperley), contacted Healthwatch Trafford seeking information on BSL Interpreter Agencies and were signposted to Genie Networks and Manchester Deaf Centre. (2015)

Primrose Avenue Surgery, (Urmston), contacted Healthwatch Trafford stating “it would be great if the CCG could provide a best practice guide to work from and tell us the procedure for booking interpreters.” Healthwatch Trafford passed this request on to Trafford CCG Communications and Engagement Team. (April 2015)

Trafford CCG have worked with NHS England and Primary Care leads across Greater Manchester to determine the process for booking BSL interpreters for GP patients in Trafford. A report has been written that is due to be presented at a CCG co-commissioning meeting in March 2016 to discuss how best to move forward to improve current GP Practice arrangements for booking interpreters. (February 2016)

ALL services to discuss communication needs of individual Deaf patients (i.e. BSL, SSE or Deaf Blind Interpreter required), including preferred choice of interpreter and preferred gender

SERVICE RESPONSES / ACTIONS

CMFT HOSPITALS:

Currently when a booking is made, if the person booking is aware of a preferred sex of interpreter, or a named interpreter, this can be included in the booking request. This process will be much improved as part of the implementation of the Accessible Information Standard - Specifically assessing patient communication needs, recording those needs, flagging needs and responding to needs. (February 2016)

GP PRACTICES:

Conway Road Medical Practice (Sale, Trafford) committed to writing a protocol for deaf and hard of hearing patients (Sept 2015).

ALL services to flag up patient's communication needs on patient records to ensure all communication with them by medical, administrative staff and Interpreters is appropriate and effective

SERVICE RESPONSES / ACTIONS

CMFT HOSPITALS:

This will be addressed on a CMFT wide basis under the Accessible Communication Standards where a Communication needs assessment and development of individualised plans to fulfil these needs is included within this work. (February 2016)

GP PRACTICES:

Conway Road Medical Centre, Sale. All known deaf or hard of hearing patients now have markers on their records. Clinicians go into waiting room to collect these patients.

Receptionist will identify patients to clinicians to avoid embarrassment / delay when collecting patients for appointment. (May 2015)

ALL service commissioners to liaise with Trafford Deaf Partnership or Genie Networks before commissioning BSL Interpreter services and take their recommendations into account

SERVICE RESPONSES / ACTIONS

CMFT HOSPITALS:

As a result of collaboration with Healthwatch Trafford, the Head of Patient Services attended a Trafford Deaf Partnership meeting, (Jan 2016), comprised of diverse members of the Deaf community and local organisations. At this meeting, the Head of Patient Services agreed to consult with local Deaf people and local BSL Interpreters to learn more about how BSL interpreter agencies can effectively meet patient needs (February - March 2016). The contract for BSL agencies is due for renewal in November 2016 and CMFT will take the patient experiences and views expressed in this consultation into account when writing the new service specification for BSL Interpreter agencies to adhere to.

GP PRACTICES:

Trafford CCG have worked with NHS England and Primary Care leads across Greater Manchester to determine the process for booking BSL interpreters for GP patients in Trafford. A report has been written that is due to be presented at a CCG co-commissioning meeting in March 2016 to discuss how best to move forward to improve current GP Practice arrangements for booking interpreters. (February 2015)

ALL services to build accessible complaints processes for BSL Interpreter Services into commissioning process

SERVICE RESPONSES / ACTIONS

CMFT HOSPITALS:

Currently BSL interpretation is available for anyone wishing to access PALS or the formal complaint process within CMFT. The complaints process is currently being reviewed within CMFT in line with the 'My Expectations' standards. The views and needs of people who are deaf will be taken into account as part of this review - Head of Patient Services to continue working with Trafford Deaf Partnership to progress this. Access to PALS and Complaints will also be part of the implementation of the accessible information standards. In addition a new easy-read version of the CMFT PALS leaflet has recently been published and circulated to the Trafford Deaf Partnership.

GP PRACTICES:

Trafford CCG Patient experience & Customer Care team promote text relay services on correspondence for patients.

All GP contracts from the CCG require complaints procedure requirements to be accessible (in accordance with national equality legislation) & ask providers to work in accordance with national best practice guidance.

Trafford CCG Patient Experience & Customer Care Team will highlight new accessible information section in new toolkit for commissioners on handling complaints & provider contracts for 2016/17. This will also be highlighted to the CCG Equality and Diversity HR Lead and Quality team.

ALL services to use plain English in letters and information sent out to Deaf patients

SERVICE RESPONSES / ACTIONS

CMFT HOSPITALS:

Trafford General Hospital Outpatient Quality Standards work stream is reviewing all patient letters (November 2015). An Information Group approves all patient leaflets.

ACTIONS:

This will be discussed at a Trust Information Group and the recommendation is being put forward for consideration to the Trust OPD Standards Working Group (November 2015)

All CMFT hospitals will work towards this recommendation as part of the implementation of the Accessible Information Standard

GP PRACTICES:

Trafford CCG are sharing a new national complaints handling toolkit with GP Practices, (however, because the CCG do not commission all GP services this won't necessarily cover all providers that Trafford patients access services through). The accessible information standard is covered in this.

ALL services to offer on-line BSL Interpreter Services in emergency situations or short notice appointments e.g Sign Translate.

SERVICE RESPONSES / ACTIONS

CMFT HOSPITALS:

Wider role out of emergency on-line BSL interpretation to be included as part of the implementation of the Accessible Information Standard.

ALL services to raise staff awareness around the impact of appointment delays on BSL interpreter availability (Interpreter may have to leave before the patient is seen) and put processes into place to ensure Deaf patients are seen on time

SERVICE RESPONSES / ACTIONS

CMFT HOSPITALS:

Trafford General Hospital: the recommendation will be discussed by Clinical Effectiveness & Patient Experience Lead (Trafford Division) with Outpatient operational managers to review their processes for prioritising patients requiring an interpreter. (September 2015)

CMFT wide: awareness to be raised across the trust regarding the need to ensure there are no undue delays to appointments where an interpreter is in attendance. (February 2016)

GP PRACTICES:

Trafford CCG supported Healthwatch Trafford and members of the Trafford Deaf Partnership to deliver 3 deaf awareness sessions to GP Practice Managers, GPs and other health practitioners (April - November 2015).

Hospital Patient Advice and Liaison Services (PALS) processes to be reviewed to ensure accessibility for Deaf people and that information & promotional materials are available in plain English format

SERVICE RESPONSES / ACTIONS

CMFT HOSPITALS:

See recommendation 7 re Accessible Information Standards. Plans in development to move the PALS office to a much more easily accessed location within Manchester Royal Infirmary (scheduled for June 2016).

New PALS leaflets, including an easy-read version have now been published. (February 2016)

GP PRACTICES:

Trafford CCG Patient experience & Customer Care team promote text relay services on correspondence for patients.

All GP contracts from the CCG require complaints procedure requirements to be accessible (in accordance with national equality legislation) & ask providers to work in accordance with national best practice guidance.

Trafford CCG Patient Experience & Customer Care Team will highlight new accessible information section in new toolkit for commissioners on handling complaints & provider contracts for 2016/17. This will also be highlighted to the CCG Equality and Diversity HR Lead and Quality team.

All health services should promote and raise awareness of the emergency SMS text service to Deaf patients

SERVICE RESPONSES / ACTIONS

CMFT HOSPITALS:

This will be included as part of the implementation of the Accessible Information Standards across CMFT hospitals.

GP PRACTICES:

Trafford CCG will share details of the SMS emergency text messaging system with GP Practices (November 2015).



**Your
voice
counts!**

If you require this publication in an alternative format, please contact us

 **0300 999 0303**

 **07480 615 478**

 **info@healthwatchtrafford.co.uk**

 **@healthwatchtraf**

 **Healthwatchtrafford.co.uk**



Floor 5, Sale Point

126-150 Washway Road

Sale, M33 6AG

healthwatch
Trafford

Companies House Reg No. 08466421.
Registered in England and Wales