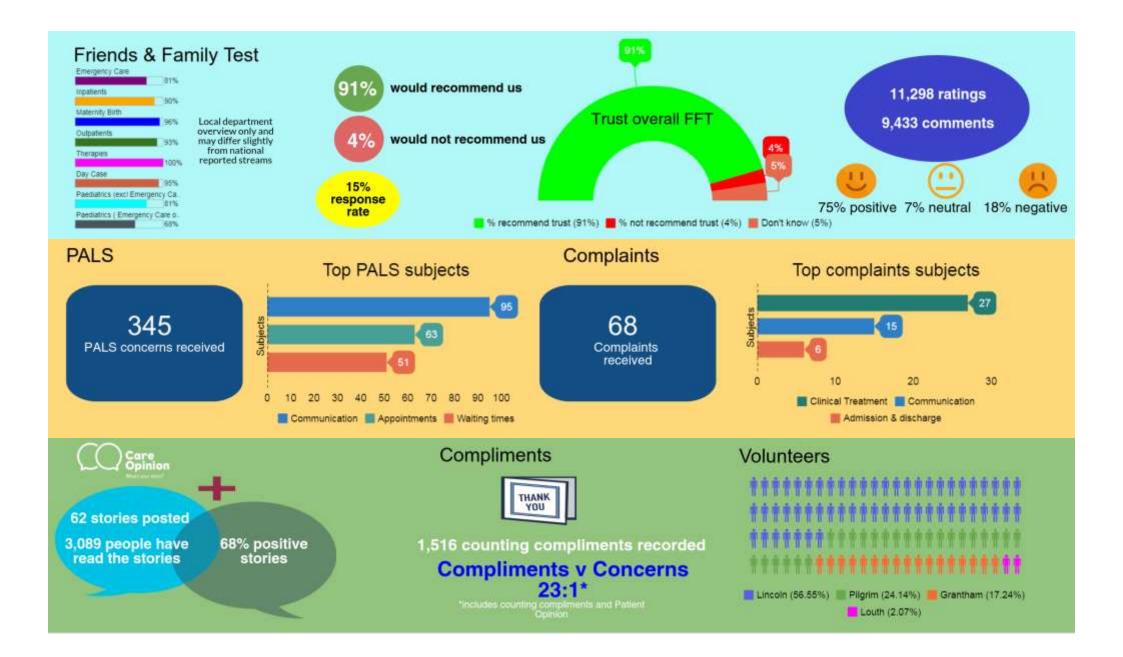
United Lincolnshire Hospitals

PATIENT EXPERIENCE REPORT

September 2017 (August 2017 data)

Trust level report

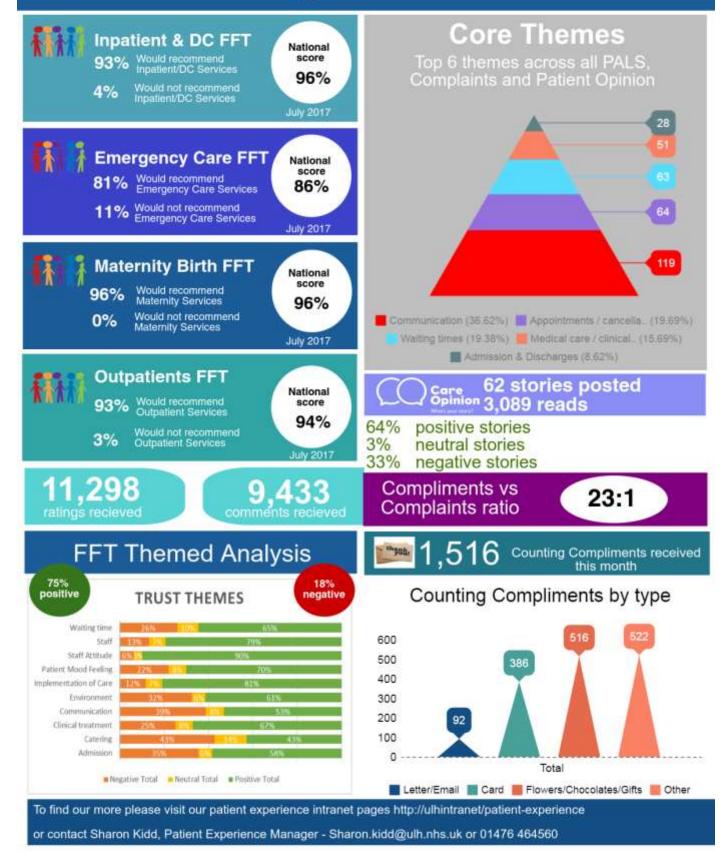
- Complaints
- PALS
- Friends & Family Test
- Patient Opinion
- Voluntary Services
- Patient Experience news and developments





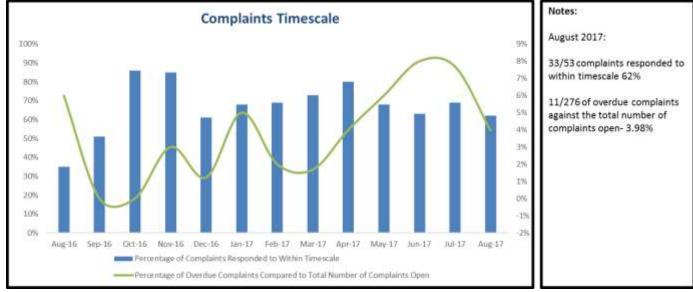
United Lincolnshire Hospitals

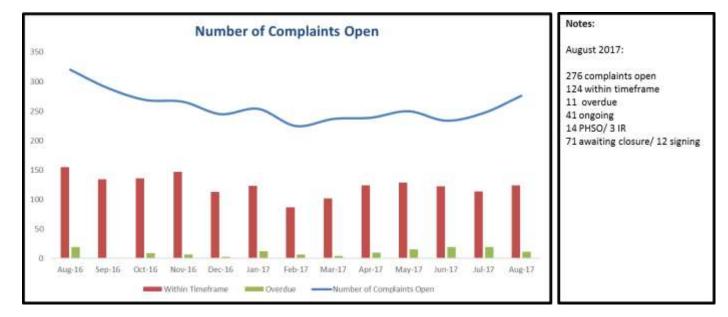
Patient Experience Report August 2017

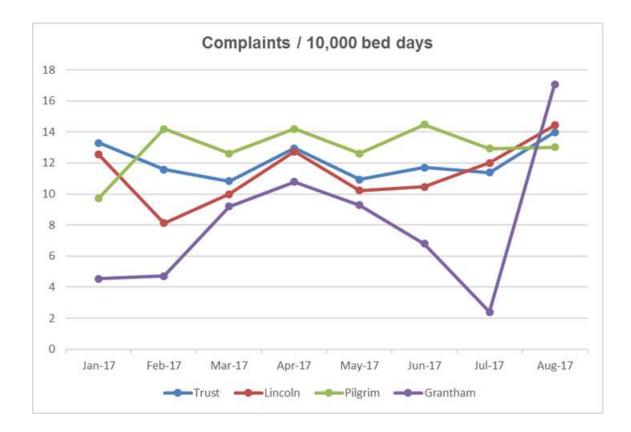


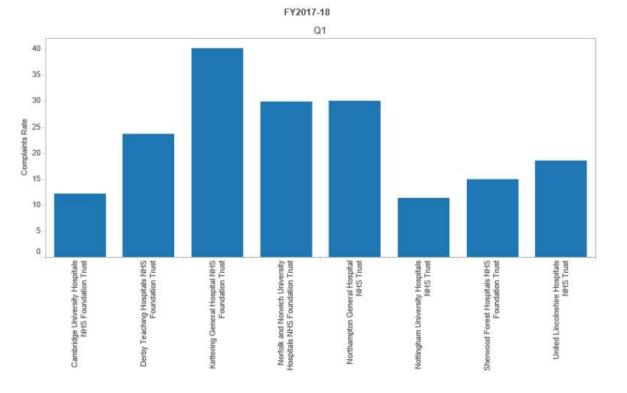
COMPLAINTS Trust level





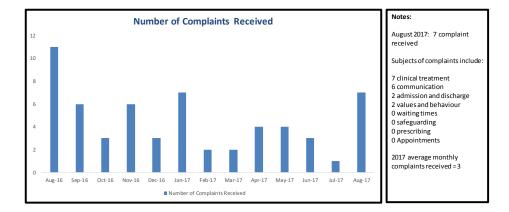


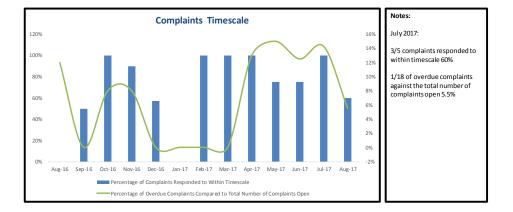


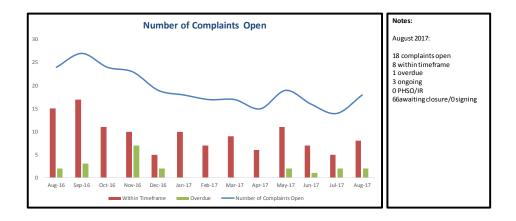


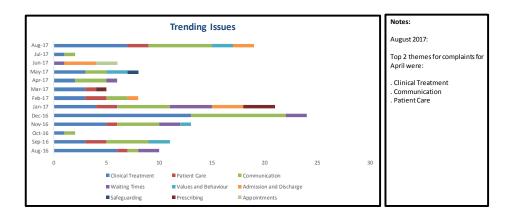
Written Complaints

Comparative extract from NHSI Patient Experience Tool; complaints rate per 1,000 members of staff in post for Q1 2017/18 Grantham



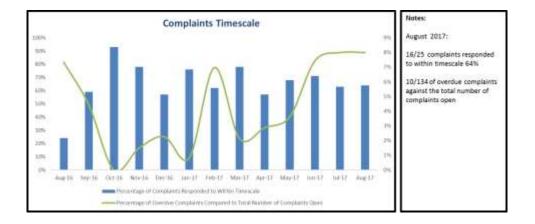


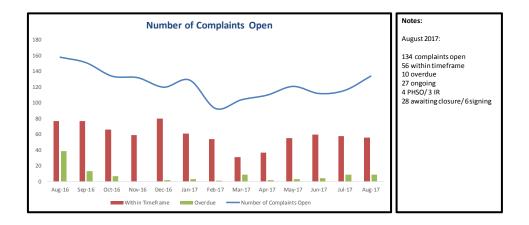


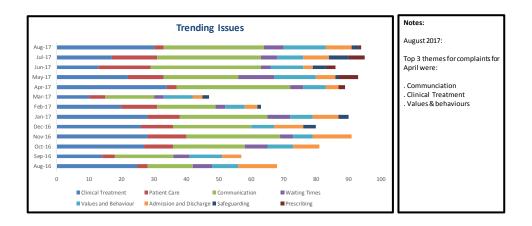


Lincoln

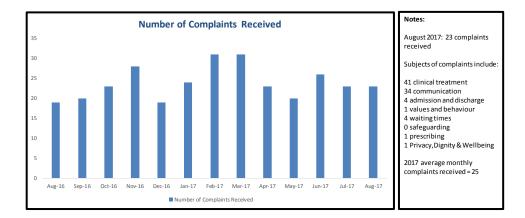


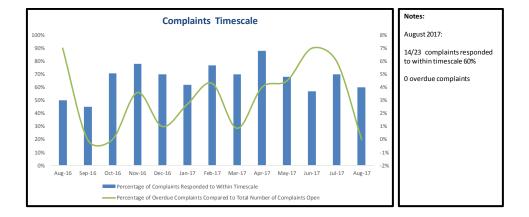


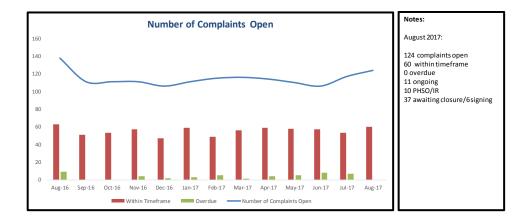


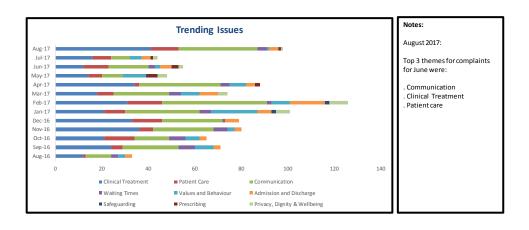


Pilgrim

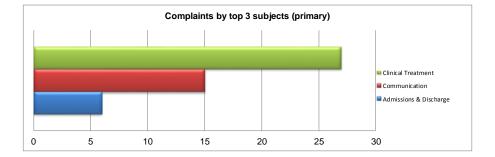




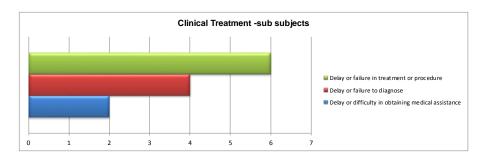


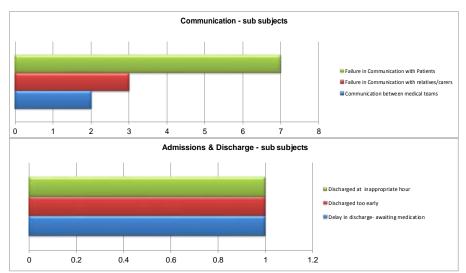


Top 3 Subjects



Sub Subjects





Overdue complaints

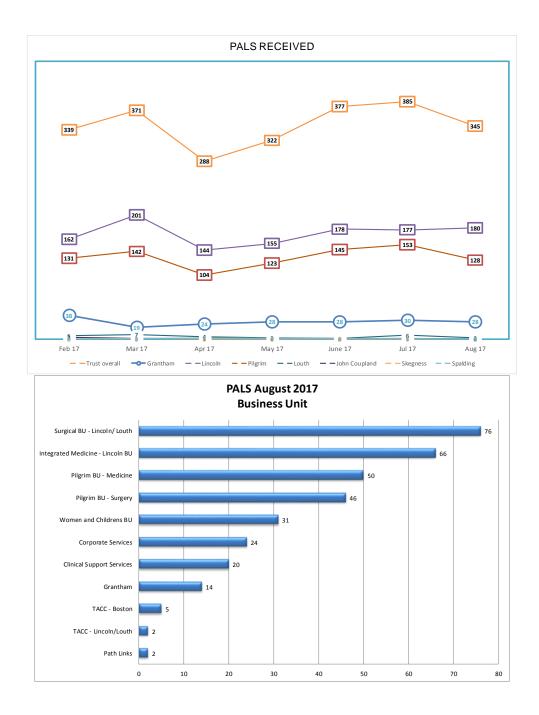
Of the 11 overdue complaints as stated above; the position at time of this report:

4 complaints have been signed and sent.

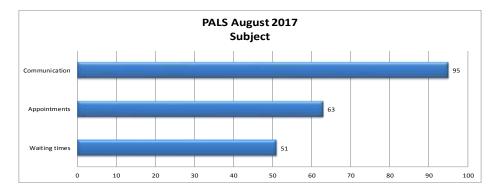
- 0 with executive team for signing
- 2 in final stages of formatting ready for approval and signing
- 5 awaiting responses from case managers who have been chased and support offered.

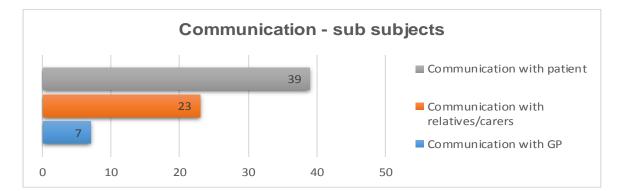
PALS

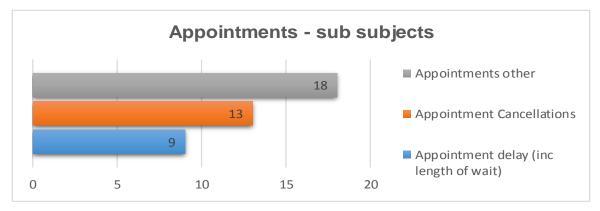
345 PALS concerns were received in August 2017.

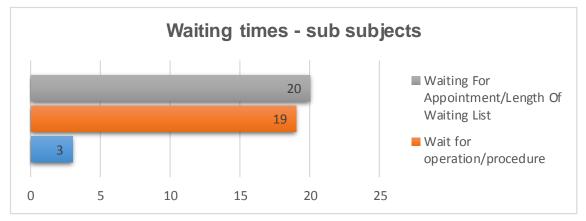


Top 3 subjects & sub-subjects









Outcome of PALS enquiries

Of the 345 enquiries received:

- 291 resolved
- 4 passed to formal complaints
- 2 just required information which was given.
- The remaining 48 at the time of report were still being addressed.

Time spent:

- 136 (46%) were resolved within an hour
- 82 (28%) were resolved within 24 hours
- 60 (20%) within one week
- 19 (6%) within a month



The ratio on compliments vs complaints for August is **23:1**

FRIENDS & FAMILY TEST

The table below shows June performance against ULHT internal target and the variance against July performance.

Stream	Wo	uld recomr	nend	Would not	recommend	R	esponse ra	te
	Monthly performance	Against target	Change from last month	Monthly performance	Change from last month	Monthly performance	Against target	Change from last month
Trust overall	91%	n/a	1%	4%	0%	15%	n/a	-1%
Inpatients	90%	-7%	0%	6%	1%	29%	3%	-1%
Emergency care	82%	-5%	2%	11%	1%	20%	1%	0%
Day Case	95%	-2%	0%	2%	1%	20%	-6%	-1%
Outpatients	93%	-1%	0%	3%	1%	15%	1%	-1%
Paediatrics	76%	n/a	-3%	16%	2%	3%	n/a	0%
Therapies	100%	6%	7%	0%	-2%	33%	19%	1%

Antenatal community	93%	-5%	-5%	2%	2%			
Labour Wards	96%	-1%	-4%	0%	0%	10%	-13%	2%
Postnatal wards	94%	-1%	9%	3%	-2%			
Postnatal community	97%	-1%	0%	0%	0%			

August variance headlines:

- Trust overall 1% up
- IP 0%
- EC 2% up
- Day case 0%
- Therapies 7% up
- Paediatrics 3% down
- Outpatients 0%

Benchmarking

August 2017

	%age	%age non
Area	recommend	recommend
Day Case	95%	2%
Emergency Care	82%	11%
Inpatients	90%	6%
Maternity Birth	96%	0%
Outpatients	93%	3%
Paediatrics	76%	16%
Therapies	100%	0%

Area	Response Rate
Day Case	20%
Emergency Care	20%
Inpatients	29%
Maternity Birth	10%
Outpatients	15%
Paediatrics	3%
Therapies	33%

The charts below show the Trust rankings for all nationally published FFT streams, both for recommendation and response rates (noting the caution in comparisons).

			Recomm	nendati	on rate									
Ranked out of*	Stream	Aug 16	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17	Apr 17	May 17	Jun 17	Jul 17	
141	Emergency Care	130	130	115	114	119	108	119	124	117	116	124	119	$\sim \sim \sim$
173	Inpatients	153	161	152	158	143	147	147	127	142	152	142	150	~~~~
233	Outpatients	167	151	162	163	155	167	189	174	177	173	198	191	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
135	Maternity Antenatal	116	46	1	83	81	1	102	80	1	78	83	45	$\sim\sim\sim$
135	Maternity Birth	118	1	1	1	1	1	121	127	1	81	126	1	$\sim \sim \sim$
135	Maternity Postnatal ward	90	110	78	99	111	96	120	122	122	74	91	116	$\sim \sim \sim$
135	Maternity Postnatal community	1	101	1	1	1	1	75	94	78	105	95	81	$\sqrt{10}$

ULHT ranking against national data

	Response rate													
Ranked out of*	Stream	Aug 16	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17	Apr 17	May 17	Jun 17	Jul 17	
141	Emergency Care	42	26	45	39	30	40	40	38	40	43	41	39	$\sim \sim$
173	Inpatients	109	101	101	109	114	91	111	81	106	123	110	122	$\sim \sim \sim$
233	Outpatients	30	31	41	42	30	28	29	30	24	33	32	29	$\sim \sim$
135	Maternity Birth	126	126	128	131	129	131	130	126	123	90	96	107	

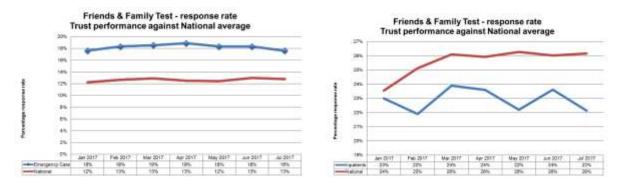
* 'Ranked out of' is an approximate figure, as the number of trusts can vary slightly month on month.

Response rates

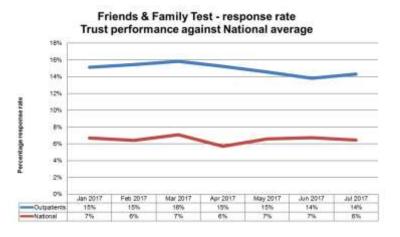
The graphs below demonstrate that the Trust is well above the national average for response rates across emergency care and outpatients and only slightly below for inpatients up to the published July data.

Emergency Care

Inpatients

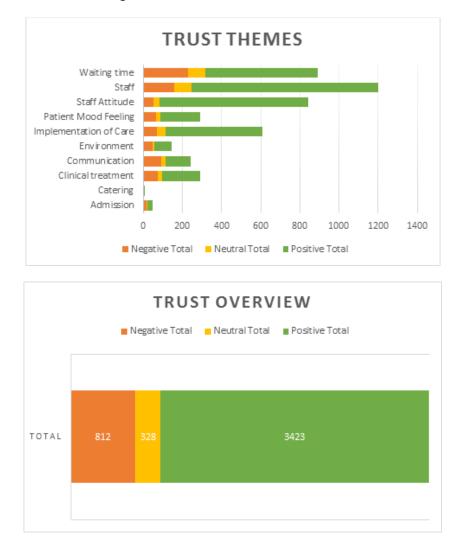


Outpatients



A 95% confidence level with a 5% variance is the industry expected standard and against all streams of FFT July data this was demonstrated showing the Trust can be 95% confident that the % recommend' accurately reflects the rest of the eligible patients within a variance of plus or minus five percent.

The charts below show the overall number of positive, neutral and negative themes based on all FFT comments by theme. There has been a slight decrease within the positives over the last month at 71% and there has been a reduction in the negatives down to 18%.



'hemes¶			_	Skilled-staff-listened-carefully-to-all-I-wanted-hel	offered-me-c pful-and-cor		
ositive themes				to-say-before-assessing-me-and-then-made-			
Staff	3777		40%	an accurate diagnosis and dealt with it			
Staff attitiude	3472		37%	immediately-and-offectively			
Clinical Treatment	1993		21%		ery caring a		
Vaiting time	1178		12%		n all depart		
mplementation of care	1166		^{12%} ¶		nswered no ay of seem		
Vegative themes				The staff introduced themselves, told me	o-have-dedi		
Waiting time	285		29/			l-keep-you-i	informed
¥		<u> </u>	3%	throughout my visit. I was given leaflets to	during e	/ery-step-of	-your-
Communication Staff	168	<u> </u>	2%	read-after-the-appointment-to-backup-		eatment.	
Statt							
	165	<u> </u>	2%	information given for on going health care.	_		
Clinical Treatment	101		1%	information given for on going health care.	z		
Clinical Treatment			2% 1% 1%¶		Z ∍¶		
Clinical Treatment	101		1%	Word	≤¶ re words		
Clinical Treatment Implementation of care	101 75	top-	1%	Total-lack-of-communication-between-staff-and-lack-of-	e words	3449	37%
Clinical Treatment Implementation of care Nurses-and-Doctor-s	101 75		1% 1%¶	Total-lack-of-communication-between-staff-and-lack-of- communication-to-patients-and-relatives	re words	2533	27%
Cinical Treatment mplementation of care Nurses-and-Doctor-s arguing-between-the	101 75 •need-to-s mselves-a	ind-to-	1% 1%¶	Total-lack-of-communication-between-staff-and-lack-of- communication-to-patients-and-relatives	ent	2533 1836	27% 19%
Cinical Treatment mplementation of care Nurses-and-Doctor-s arguing-between-the	101 75 meed-to-s mselves-s t-no-pain-	nd-to- relief-	1% 1%¶	Total-lack-of-communication-between-staff-and-lack-of- communication-to-patients-and-relatives	re words	2533 1836 1665	27% 19% 18%
Cinical Treatment Implementation of care Nurses-and-Doctor-s arguing-between-the listen-to-patients-l-go at-all-so-after-6hours enough-was-enough	101 75 mselves a t-no-pain-t -1-decided	ind-to- relief-	1% 1%¶	Total-lack-of-communication-between-staff-and-lack-of- communication-to-patients-and-relatives¶ we-couldn't-get-a-diagnosis-and-the-doctor-just-kept-	ent	2533 1836	27% 19%
Cinical Treatment Implementation of care Nurses-and-Doctors arguing-between-the listen-to-patients-1-go at-all-so-after-6hours	101 75 mselves a t-no-pain-t -1-decided	ind-to- relief-	1% 1%¶	Total-lack-of-communication-between-staff-and-lack-of- communication-to-patients-and-relatives we-couldn't-get-a-diagnosis-and-the-doctor-just-kept- firing-guestions-at-my-daughter-until-she-cried.	ent	2533 1836 1665	27% 19% 18%
Cinical Treatment mplementation of care Nurses-and-Doctor-s arguing-between-the listen-to-patients-l-go at-all-so-after-6hours enough-was-enough	101 75 mselves a t-no-pain-t -1-decided	ind-to- relief-	1% 1%¶	Total-lack-of-communication-between-staff-and-lack-of-communication-to-patients-and-relatives Word Total-lack-of-communication-to-patients-and-relatives Staff we-couldn't-get-a-diagnosis-and-the-doctor-just-kept-fring-questions-at-my-daughter-until-she-cried Moreover,-she-didn't-check-the-questionnaires-we- Nagath	e words ent treatment ve words	2533 1836 1665	27% 19% 18%
Cinical Treatment mplementation of care Nurses-and-Doctor-s arguing-between-the listen-to-patients-l-go at-all-so-after-6hours enough-was-enough	101 75 mselves a t-no-pain-t -1-decided	ind-to- relief-	1% 1%¶	Total-lack-of-communication-between-staff-and-lack-of-communication-to-patients-and-relatives Word Staff-and-lack-of-communication-to-patients-and-relatives Staff-attude we-couldn't-get-a-diagnosis-and-the-doctor-just-kept-firing-questions-at-my-daughter-until-she-cried. Moreover, she-didn't-check-the-questionnaires-we-had-filled-in-by-the-school-and-ourselvesMy-12-year-old-daughter-found-it-"initimidating"-and-"lysetting".	e words ent treatment ve words	2533 1836 1665 797 207 195	27% 19% 18% 8% 2%
Cinical Treatment mplementation of care Nurses-and-Doctor-s arguing-between-the listen-to-patients-l-go at-all-so-after-6hours enough-was-enough	101 75 mselves-a t-no-pain-i 1-decided 1-have-ve	nd-to- relief- ry-little	1% 1%¶	Total-lack-of-communication-between-staff-and-lack-of-communication-to-patients-and-relatives Word Total-lack-of-communication-between-staff-and-lack-of-communication-to-patients-and-relatives Staff we-couldn't-get-a-diagnosis-and-the-doctor-just-kept-firing-questions-at-my-daughter-until-she-cried. Moreover,-she-didn't-check-the-questionnaires we-had-filled in-by-the-school-and-ourselvesMy-12-year-old-daughter-found-it-"inmidiating"-and-"upsetting". Ne gating the staff the doctor-had-no-skills-or-understanding-of-dealing- Time Staff	ent ent treatment ve words	2533 1836 1665 797 207 195 88	27% 19% 18% 8% 2% 2% 2% 1%
Clinical Treatment Implementation of care Nurses-and-Doctor-s arguing-between-the listen-to-patients-l-go at-all-so-after-6hours enough-was-enough confidence-in-your-st	101 75 mselves-a t-no-pain- 1-decided 1-have-ve- taff]	nd-to- relief- - ry-little	1% 1%¶	Total-lack-of-communication-between-staff-and-lack-of-communication-to-patients-and-relatives Word Total-lack-of-communication-between-staff-and-lack-of-communication-to-patients-and-relatives Staff we-couldn't-get-a-diagnosis-and-the-doctor-just-kept-firing-questions-at-my-daughter-until-she-cried. Moreover,-she-didn't-check-the-questionnaires we-had-filled in-by-the-school-and-ourselvesMy-12-year-old-daughter-found-it-"inmidiating"-and-"upsetting". Ne gating the staff the doctor-had-no-skills-or-understanding-of-dealing- Time Staff	e words ent treatment ve words	2533 1836 1665 797 207 195	27% 19% 18% 8% 2%

You said we did (YSWD)

YSWD is a great tool to give patients and their family's confidence that we are listening and 'doing something' with their feedback. Even if a solution to an issue has not yet be found, it is important for our patients to know it is being addressed. Templates are sent out asking for 5 examples from each clinical directorate. We unfortunately received fewer templates than. We will review the methodology and collection of YSWD across the clinical directorates to ensure it is embedded and reported..

Clinical support services	None received
Lincoln Integrated Medicine	2 template from Ingham Ward and SEAU
Lincoln Surgical services	None received
Pilgrim	1 template covering surgical wards
Grantham	1 template covering all wards & Accident & Emergency
Women's & Children's	None received

The following are a selection from across the returns.

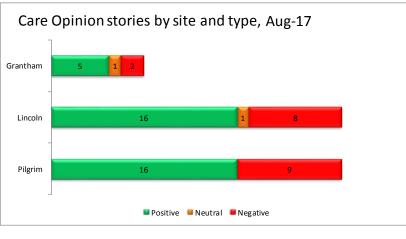
The Friends and Family Test You Said, We Did

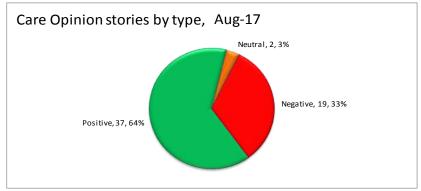


You said..... We did..... The ward was noisy at night – one example The kitchen bin has been changed to soft was a kitchen bin close. We always try to keep noise to a minimum and we are investing in ear plugs for those affected by noise. There were issues with time taken for dosette We now have a coloured label to use on the boxes on discharge prescription chart at the start of admission so pharmacy are alerted at an early stage. Thank you for your comments re breakfast The staff were caring and the ward was clean which we will share with catering team but I would have liked a more nutritious breakfast. Weren't always sure what waiting for. Wait for Poster now displayed in waiting areas so that beds patients and relatives are aware they can speak to the shift coordinator/ nurse looking after them at any time to get an update. As the ward is a respiratory ward, I would have Your comments regarding staff wearing preferred it if the staff didn't wear perfume as I perfume are partially addressed through our am allergic to it and it made my asthma worse, updated uniform policy and the specific ward and took longer to get better you mention has discussed this with their team Nights were noisy We have ordered soft closing bins to reduce noise at night

CARE OPINION

62 stories have been posted during June and have been read 3,089 times. This equates to each story being read 50 times.





Orthopaedics Lincoln

About: Lincoln County Hospital - Trauma & Orthopaedics.

My daughter broke her thumb last month and has been treated by the orthopaedic team at Lincoln county hospital. From start to finish her patient journey has been amazing. Today we went to fracture clinic were greeted by Nicola on reception, had plaster removed by Richard and were seen by Mr Rowsell and Lauren who were very polite and caring and discharged a very happy girl with a now healed thumb fracture. Thanks for all you're help to everyone involved.



Trust response Dear Brokenthumb,

Thank you for your kind feedback - I'm very pleased your daughter's thumb has healed, and hopefully she can now enjoy her summer holiday!

Regards

Mark Rowsell, Orthopaedic Consultant



Tag bubbles – August 2017



VOLUNTARY SERVICES

Volunteers Story

I am a volunteer mainly because I have worked in a hospital environment and recognise the enormity of the workload of all NHS staff and know because of my experience that I have the ability to help. Like us all, I have experienced stays in hospital and the superb help that I have been given over the years has inspired me to offer my services as a Volunteer.

I am a Volunteer for the Chaplaincy department at Pilgrim and recognise the need for people to chat about various aspects of being in hospital and their own lives when for many reasons staff and families are unable to do this. Illness and treatment can cause a lack of identity in patients. I hope by giving them time, listening and in some cases praying with them my efforts will go some way to support them and make their stay in hospital easier.

I know I cannot help everyone but even if I only helped one person when I am visiting, I know that I have changed that person's world and helped their healing process. This obviously makes me feel purposeful and extremely happy that I have been able to comfort this person in their time of need.

I also know that I am helping the staff and visitors by supporting them. Working as a team with other Volunteers is also a very positive experience.

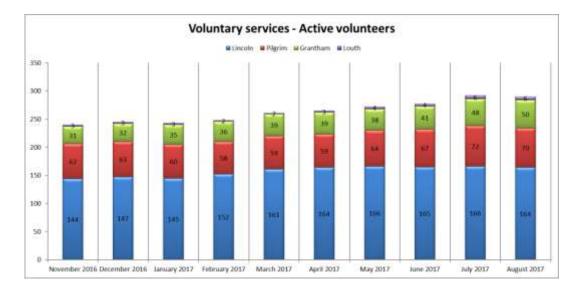
I have been asked to mention that I have just sung the Grand Finale at a well known Safari Park where they have a series of Safari Nights with well-known artists performing their music. Singing Nessun Dorma for the Grand Finale with 7000 people listening would have been impossible without the care that I have been given by the NHS.

Elaine, Volunteer in Chaplaincy at Pilgrim Hospital

Christine Bonneywell, Lead Chaplain, Pilgrim Hospital

Elaine is a fairly new member of the Chaplaincy team here at Pilgrim and she has already become a part of our family here. She visits one specific ward once a week and helps with the Sunday service once a month. Because she visits the ward regularly staff know her and feel able to recommend patients who may value a visit from someone a little outside the usual hospital staff, who has time to sit and listen.

She also supports family members and members of staff who are looking to have a quiet chat. Her singing gifts are greatly appreciated on Sundays and I don't think there are many hospital chapels who can boast of having a proper opera singer helping them with the hymns!



- 22 new applications began to be processed with 4 applications on hold.
- A total of 68 applications are currently being processed. This is up slightly on previous months 67.
- 4 new volunteers started with the Trust during August, down 15 on last month.
- The Training Department ELearning platform for volunteers continues to record excellent core training with 51 modules completed in August.
- Hilary started as the new coordinator during the month. She is a current NHS employee and came from ILPU.
- Our temporary secondment of an additional staff member finished during the month. This loss and training of new staff has had a negative impact on the administration service levels.

Patient Experience news and developments

Academy of FAB Stuff – national tour visit to Lincolnshire



As part of the lead-up to the NHS FAB Change week (Monday 13 November to Friday 17 November), the ULHT and LCHS FAB Ambassadors have organised a visit to Lincoln County Hospital and John Coupland Hospital by Roy Lilley and Dr Terri Porrett who founded the Academy of FAB Staff, and have been tasked with leading the national NHS FAB Change week campaign by Sir Simon Stevens, Chief Executive of NHS England. Both Roy and Terri are undertaking a national FAB Change Week tour across the NHS.

Their visit will be taking place on Wednesday 4 October and consist of an engaging talk by Roy and Terri about the Academy of FAB Stuff and showcasing the FAB Change Week concept to staff to encourage staff to make pledges around changes they are currently undertaking which can be showcased both across the trust and nationally during Change Week.

The tour will then visit key areas of Lincoln including the new bereavement centre, Lincolnshire Heart Centre and children's wards.

Roy and Terri will then continue their Lincolnshire tour by visiting John Coupland Hospital in Gainsborough.

This is an excellent opportunity for the Trust to show some off the amazing projects that we have recently undertaken and also for it to be shared nationally across the NHS.

ULHT Patient Experience Conference

The Patient Experience team has worked in partnership with Bishop Grossteste University and Lincoln City Football Club to host the first patient experience conference in Lincolnshire on 1st November 2017.

The theme is all about methods which can be used to listen to patients and the incredibly important voice they bring; our view is that if our patients have the *right to be heard* then as professionals we then have a corresponding *responsibility to listen*.

The conference will also focus on the national patient experience agenda and also locally with sessions which will highlight how feedback we have received has led to service improvements to improve our patients' experiences.

