

Listen, Learn, Share

February 2021

Vision Statement

The Patient Experience Team exists to achieve the best possible journey for patients and those who care for and support them. Through continuous improvement we will strive to enhance the Patient Experience, whatever the outcome.

Introduction



Hello and welcome to the 2nd edition of the Patient Experience Listen, Learn, Share publication.

Inside you will find more information about how the Trust is continually working to put the patient at the heart of the Trust's activities.

The Patient Experience Team is a nexus for communication about care-related issues whose aim is to make sure that the Trust's care delivery is not only safe and effective, kind and caring and exceeds expectations, but that it is the best that it can possibly be.

Don't forget that the Patient Experience Team is here to answer your queries and concerns and to hear your voice as a service user. If you have an interesting story to tell about your patient journey which can be utilised as a Trust wide learning tool then please share these valuable nuggets of information with us. We are always willing to listen

and are happy to help you to write, film or record your story for presentation to our Senior Management Team.

Read on to discover what developments are taking place.....



Patient Experience

Complaints and PALS Concerns

Once a formal complaint is received by the Trust it is subject to triage, grading, acknowledgment and allocation to the appropriate specialty and identified Investigating Officer. The NHS procedure for handling complaints is divided into two stages;

- 1. Local resolution** - This provides the quickest and fullest resolution to a complaint. This process must be fair, open, flexible and conciliatory to both complainant and staff. The Trust will send a response, following investigation, to the complainant making the complaint.
- 2. Independent review** by the Parliamentary & Health Service Ombudsman (PHSO).

The Trust timescale for responding to formal complaints is 30 working days. Some complaints within healthcare can be very complex and can require a lengthy investigation process in order to provide a high quality response proportionate to the concerns raised. On completion of the

investigation the draft response is quality assured at divisional level to ensure that the concerns raised have been addressed openly and honestly. For those complaints where the outcome is partly or fully upheld an action plan will be compiled to address any gaps in service provision or patient safety and care.

Between July to September 2020 the Trust received, investigated and responded to 124 formal complaints. Within the same timeframe there were 164 PALS concerns received.

The following examples relate to two formal complaint summaries, and outlines actions identified following the complaint investigation:

Case one

The patient fell awkwardly at home which resulted in them sustaining a complex break to the leg.

The patient was transferred to the Emergency Department via ambulance where despite the extended wait the patient felt positive and safe as they were being closely monitored and they could see how experienced, competent and caring the Matron was, how hard the staff worked and how determined they were to do the best they could for every patient in very difficult circumstances.

Manipulation of the leg and fitting of a cast took place and the patient was subsequently admitted to a surgical ward area with surgery taking place the next day.

Following surgery the patient developed pressure sores to the heel which once identified were appropriately managed.

The patient felt there was a lack of information in relation to the structure of the ward, staff member's roles and responsibilities or where facilities were located.



Actions Taken

- General Surgery Matron and Trauma & Orthopaedics Matron to arrange awareness sessions with Trauma & Orthopaedic specialist nurses with regard to the care of patients with plaster casts.
- Re-introduction of table mats which shows the nursing uniforms and areas of responsibility.
- New fluid balance chart implemented Trust wide. Checklist to be introduced with regard to patient's hydration and drinks trolley rounds.

Case two

A patient was diagnosed with "fundamental neurological disorder (FND)" and subsequently referred and transferred to the West Park Rehabilitation Unit. The patient transferred was able to use their right hand and roll the shoulders, however the constant pain interacted with the signals to the muscles'. The patient then lost sensation and movement and was unable to feed them self or move their limbs.

The patient is gluten and dairy intolerant and felt they had not been provided with adequate nutritional meals over a two day period whilst in isolation pending the result of the admissions COVID-19 swabs.

Actions Taken

- The Trust's admission documents will be amended to include additional questions regarding any future patient referrals with complex dietary needs to ensure no other patient has the same experience.
- Strengthening of communication between the ward and Catering Team will ensure that notification of a particular patient's needs will take place in a timely manner.
- A comprehensive review has been carried out to ensure the privacy of patients on the Neuro Rehab Unit and as a result Estates work is now in progress to resolve this.

The current COVID-19 pandemic is extremely challenging and has made us all have to work and think differently in order to ensure that services remain consistent and continue to meet the needs of our service users.

A review of complaints performance and management throughout this period was undertaken by the Patient Experience Management Team resulting in the implementation of a monthly 'Patient Experience Feedback Review' meeting. The aim of which is to provide a formal and supportive arena where discussions can take place around complaints management within each directorate and share good practice and lessons learned.

Parliamentary Health Service Ombudsman (PHSO)

Where a case has been partially or fully upheld, the Trust will receive recommendations from the PHSO to consider and implement.

The following is an example of a completed case:

Case one

This case related to the end-of-life care received and the discharge process.

The theme of the PHSO's findings related to communication and information.

Following initial assessment the PHSO recommended the following proportionate resolution;

The Trust should apologise to the complainant for the communication and information inconsistency with the patient and those close to them in relation to the prognosis.

The Trust must provide a financial redress of £500 to the complainant in recognition of the significant distress this communication shortfall caused in the context of their bereavement.

Volunteering

In response to COVID-19, following a very successful recruitment of 150 Clinical Volunteers in March 2020 to support Clinical staff on the wards with duties such as bed making, feeding patients, administration and assisting patients with video calling relatives, we found that our number of volunteers started to reduce from August 2020 as volunteers returned to school, college and work. Therefore in October we started to recruit for our second cohort so that we could increase our workforce by a further 50 volunteers to support with winter pressures and a further wave of Covid 19.

As with the first cohort, these new volunteers have undertaken on-site training in the use of PPE, infection prevention bed making and completed their mandatory training on eLFH. Completing a virtual induction as current restrictions prevented these taking place on site.

Both cohorts of volunteers have been deployed into 15 locations to provide long term support under the rota system:

West Park wards 1, 2, and 3

New Cross Hospital - Acute Medical Unit, Ward A6, A8, C17, C18, C19, C21, C22, C24, C25, COVID Swabbing Station, and more recently Fair Oak ward at Cannock Hospital.

In November 2020 some of our volunteers featured on the Helpforce 'Wall of Fame' as part of their annual volunteer awards. This was seen by NHSE who were very impressed by the commitment and achievements shown by our volunteers. Following this, we were asked by NHSE to liaise with their NHS Voluntary Partnerships Team to provide case studies on our volunteer's pathway into employment which have now been published nationally. One of our young volunteers story also went on to be featured in the Power of Youth #iwill campaign.

The Volunteering team was very humbled to be recognised in the Trusts #WellDoneWednesday for the support that has been provided to the COVID-19 swabbing hub.



The last 6 months has seen the volunteers support specific ad-hoc projects in addition to their clinical Volunteer role on the wards such as:

Assembly and distribution of Care Packs

September saw a generous donation of thousands of care packs from Amazon and following a request from Trust Charity a team of our volunteers rallied at Bentley Bridge Distribution Centre to assist with the assembly and distribution of these care packs across the Trust. We received feedback from Charity to say how impressed they were with the system that the volunteers had put in place between them and they were very grateful of the support.

National Survey Distribution

Volunteers assisted with the distribution of this across the Trust site. January 2021 saw many exciting new projects for the Clinical volunteers which have been embraced by all.

Vaccination Hub at Alfred Squire Health Centre

January 2021 brought opportunities for our volunteers to assist with the roll out of the Covid Vaccine for Primary Care, Division 3, by providing support to clinical staff from 8am to

8pm, including assisting with the stewarding of patients and admin roles. One volunteer said "how honoured and humbled she felt to be part of this moment in history". She said patients were so grateful to be invited for their vaccinations and commented how smoothly and well run the process was. For many patients going for the vaccine was the first time they had been out since March 2020 and they were very emotional and grateful to the NHS to finally have a chance of going back to some normality.

Patient Discharge scheme

January 2021 also saw the launch of the pilot of Patient Discharge Scheme. This is being piloted initially with targeted ward(s) and will then be evaluated to see whether this can be extended to the wider Trust. Volunteers contact the patient who has recently been discharged by telephone call, text message, email, or 'face time' call, according to which method the patient would prefer, to check up on their health and wellbeing and follow up with any required actions.

Volunteers have access to staff support themselves to discuss areas of concern, and receive regular check ins around their own wellbeing. This has been very well received.

Phoenix Centre Virtual Covid Ward

January 2021 saw the launch of the virtual Covid Ward located at the Phoenix Centre where volunteers, together with the support of a number of clinical staff call patients to get oxygen level readings and call patients to cancel or reschedule appointments.

Through participating in the Community Clinical volunteer role, many volunteers fed back to the Trust that this has sparked an interest in them to progressing into paid work in the NHS, and in particular the Health Care Assistant role. With support from the Patient Experience Team and bank we are delighted that 3 individuals have gone on to secure Bank HCA roles, completing in their first weeks with bank an abundance of shifts to support in particular West Park hospital where they carried out most of the their volunteering journey, building great relationships with staff and patients. One individual continues to volunteer as well as

his many bank shifts. Another volunteer is quoted as saying "volunteering has changed me as a person for the better and I am so thankful for the opportunities I have been given and how I have been able to shine. It's been hard work but I have enjoyed every minute of my journey!" We are also delighted to learn that a further volunteer has applied for a full time HCA position on the ward she has volunteered on throughout her volunteer journey.



"I saw how hard my mum and sister worked and, as well as wanting to follow in their footsteps, I wanted to give something back to the community. I've developed a keen interest in working with dementia patients and this is something I would like to pursue in the future."

Matt, Healthcare Assistant

"After seeing the truly outstanding contribution Matt has made to the Trust, we decided we simply had to help him realise his dream of working in the NHS as a Healthcare Assistant."

Abby, Patient Experience Team

The Royal Wolverhampton NHS Trust

As volunteering has inspired many individuals to want to pursue a career within the NHS and New Cross and we are delighted to see so many have signed up to the Trusts first ever virtual career event.

The Community Clinical Volunteer Programme has been extremely successful due to the co-production, interest and commitment of this valuable and appreciated group of individuals.

Since the start of the clinical volunteer role in March/April 2020 volunteers have completed 9019.50 hours of shift coverage on hospital wards, COVID swabbing station and other adhoc duties. This equates to £78,650.04 if compared to the hourly rate of National Living Wage.

The second cohort of volunteers has seen our already diverse workforce increase in terms of the age and ethnicity demographics of volunteers. This strengthens the aim that is an objective of the three year RWT Volunteer Plan - which in turn is an objective of the three year Patient Experience and Public Involvement Strategy.

CQC National Surveys

During 2020 a number of national CQC Mandatory Surveys were suspended due to the COVID 19 pandemic. These are now scheduled to commence in the forthcoming months. Please see the CQC website for information regarding schedule at <https://www.cqc.org.uk/publications/surveys/surveys>

If you have received treatment during a specific timeframe, you may be contacted by the CQC. It is important that if you are contacted, that you give your views. Your views are important for us to understand where we may need to make improvements to the care and service we provide to you and your loved ones.

New Initiatives

During recent months, unfortunately visiting has been suspended, to ensure that we try and stop the spread of the Coronavirus and protect our patients, staff and of course yourselves. This has been a difficult decision to make but we have implemented some initiatives to keep families in touch with their loved ones.

Message to a loved one

You are able to send a message to a designated email inbox and the team will deliver this message to your loved one.

Communication Hours

Inpatient areas all have ipads/tablets and are actively encouraged to use to allow patients to have a video call with their loved ones.



During the COVID 19 pandemic we are launching a new service which allows family and friends to send a personal message to their loved ones.

Please send your messages to:
rwh-tr.patientexperienceteam@nhs.net

Additionally, there is a dedicated phone line **01902 695118** which is available between 10am – 12pm each weekday where we can write down your messages.

This service is currently only available for inpatients to receive messages, and there is currently not the capacity for messages to be returned at this time.



Trust Starts Offering 'Virtual' COVID-19 Ward for Patients at Home

The Royal Wolverhampton NHS Trust has started offering an early supported discharge service to patients with COVID-19.

The acute medical and community teams have worked together to launch the Oximetry @ Home Service where patients are taught to take their oxygen readings with a pulse oximeter at home.

The pulse oximeter is a small lightweight device used to monitor the amount of oxygen carried in the body.

This non-invasive tool attaches painlessly to the patient's finger, sending two wavelengths of light through the finger to measure the pulse rate and how much oxygen is in their system.

Once the oximeter finishes its assessment its screen will display the percentage of oxygen in the blood coming from the heart as well as the patient's current pulse rate.

Patients are then discharged to their place of residence and the community nursing team telephones them three times a day to take readings and check on their wellbeing.

Any concerns are escalated to the Ambulator Emergency Care medic and a hospital assessment can be arranged as necessary.

The Oximetry@Home Service is a virtual ward operated by the Trust and will accept referrals for patients:

- Symptomatic with a diagnosis of COVID-19 – either a positive test result or other clinical evidence of COVID e.g. on imaging and are aged 65 and above
- Under 65 and who are clinically extremely vulnerable or have received a letter informing them they are included in the high-risk group (excluding children)
- With a learning disability who are on the GP Learning Disability Register and are well enough to be monitored at home.

Patients excluded from the ward are:

- Those not registered with a Wolverhampton GP
- Those under 18
- Those whose usual resting oxygen saturation is 95 per cent or less on air
- Pregnant women and postnatal women.

New Service to Assist and Support Patients Living with Dementia and Delirium

- The Royal Wolverhampton NHS Trust is launching a new service to assist staff to give extra help to patients with dementia.
- A new team, Complex Older Adult Team Dementia and Delirium, has been created to provide proactive, specialist assessment and care to complex older patients living with dementia and/or delirium.
- The new service is available 24 hours but contact can be made from 8am to 3pm on extension 8495.
- Out of those hours, anyone ringing that extension will have their call transferred to this mobile number – 07436 022603 – and a staff member will triage the calls. Families can also call that number for advice.
- The service will initially be launched in 10 areas, available to staff in the Emergency Department and on wards A5, A6, A7, A8, C15, C16, C22, C24 and C25.
- Amanda Bevan- Webster, Senior Sister, said: "The team are really looking forward to reaching out to more patients across the Trust living with dementia and delirium, delivering person-centred care and facing new challenges together."



Patient Story

If you have a patient experience you are happy to share please contact a member of the Patient Experience Team.

Contact us: rwh-tr.patientexperienceteam@nhs.net