

Fast access to reliable health advice



Effective treatment delivered by trusted professionals



Clear information, communication, and support for self-care



Involvement in decisions and respect for preferences



Continuity of care and smooth transitions



Involvement and support for family and carers



Emotional support, empathy and respect



Attention to physical and environmental needs

Please use the tabs along the top to navigate through this report



Experience of Care Quarterly Report

Q4 (January 2023 - March 2023)

Report author:

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SPORT	Experience metrics	Experience themes	Divisional Reporting	Learning and Improving	Development priorities			
Successes			Priorities	Priorities				
Kindness and Understan	ding score above target du	ring quarter 4 and Outpatien	t Patient First - Expe	Patient First - Experience of Care deployment.				
	outpatient and ED care per 4. FFT scores in all of the	formed above national Frust's emergency departmer	survey programme the Hub within Divis	Patient Experience Hub – commence weekly uploads for FFT and monthly survey programme into the Hub for more timely feedback. Embed use of the Hub within Divisions, running specific bespoke sessions with Divisional Matron teams as requested.				
tool on Berrow Ward an centred conversations th	d Medical Assessment Unit	rs to You' communication sup which has generated person ng reassured and provided w	- programme. ith Divisions to focus o					
monthly patient surveys	·	te to new mixed methodolog nd refresh of the monthly sur	y for National Inpatient S veys Divisions to focus o	National Inpatient Survey results).				
·	· · · · · · · · · · · · · · · · · · ·	omplete, 26 training sessions ng and now have access to the	Experience Improve	Experience Improvement Plan.				
Risks & Threats			Opportunities					
change in methodology	for the monthly survey pro	arget in quarter 4. However, gramme is likely to provide a	Q2 2023/24 will allo	nts of the Patient Experience F ow for more automated function	onality, such as alerting			

The cha different view of performance (experience of care) via the routinely reported metrics. This is explained on slide 7. If the trend seen in March 2023 continues, then words included. at a Trust level, the inpatient experience tracker score will likely perform below the existing target and may need to be reset. The target was set based on the previous paper-only methodology which resulted in a skew towards an older population group responding. This is being monitored during Quarter 1 2023/24 to determine what, if any action is needed with respect to the target.

teams to declining performance and comments from patients with trigger

The number of Divisions with 'local' Experience of Care groups is growing which provides an opportunity to strengthen governance across UHBW in this domain of quality and share learning and best-practice across teams, departments and specialties across the Trust.

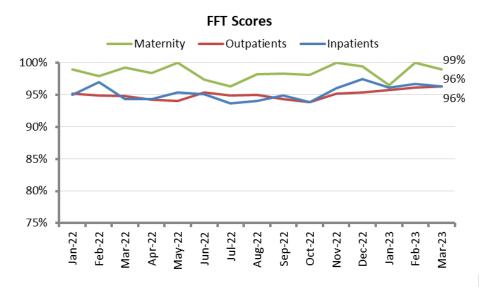
Experience themes

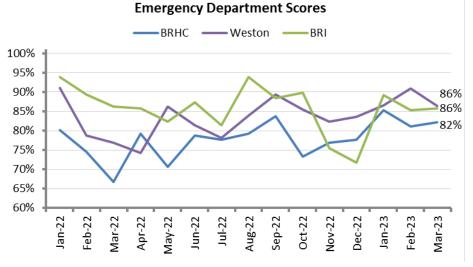
Divisional Reporting

Learning and Improving

Friends and Family Test

SPORT





What does this tell us?

FFT scores for inpatients, day cases, maternity and outpatients remain positive, all greater than or equal to 95% in Q4 2022/23.

FFT scores in the Trust's emergency departments have improved from Q3 to Q4. Scores during Q4 were above the ED national average (as below).

Our FFT scores are better than the national benchmark.

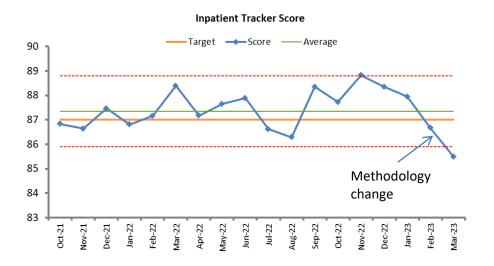
Actions planned or taken:

Weekly reports are provided to ED divisional leads with their FFT data for the previous week. This results in the data being reviewed in a timelier manner which supports with identifying opportunities for improvements.

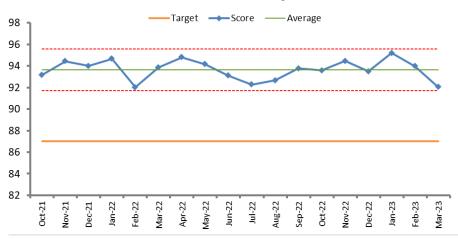
National benchmarking for FFT Scores (NHSE data as at February 2023)



Monthly patient surveys



Kindness and Understanding Score



What does this tell us?

The Inpatient experience tracker score is below target and below normal variation. There were four occasions during 2022/23 where the score dipped just below target, however the decline seen in February and March 2023 is largely driven by a change in methodology for the monthly survey which is now available to patients digitally (via text message) with a paper copy automatically sent to those over 80 years old and for patients who request a paper copy. This change aligns to the CQC National Patient Survey methodology. Age group has an impact of how patients rate their experience of care, for example Q4 data shows patients aged 18-59 are three times more likely to rate their care as poor or very poor compared to those aged 60+.

Outpatient experience tracker and Kindness and Understanding scores are above target and within the normal expected range.

Actions:

Experience of Care Team will undertake further analysis by age group and will closely monitor the tracker score over the next quarter.

Outpatient Tracker Score



National Patient Surveys

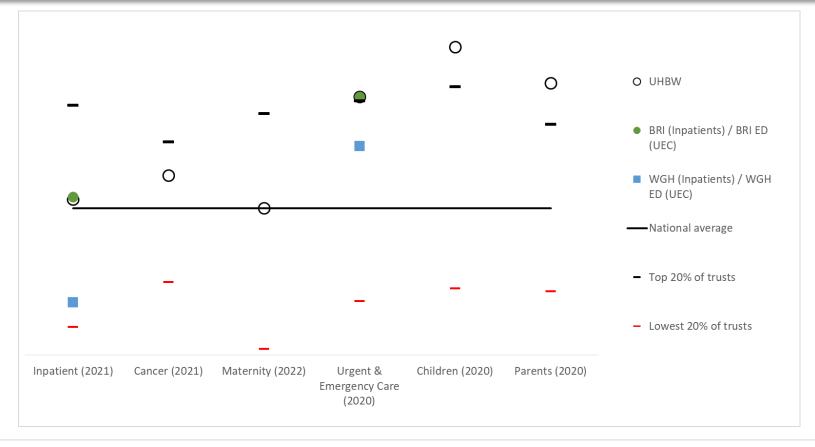
What does this tell us?

UHBW performs in line with the national average in the inpatient and maternity survey and above the national average in the urgent and emergency care and children & young people survey.

There were no national patient surveys publications during Quarter 4 22/23

Actions:

Assurance on the delivery of action plans arising from national patient surveys takes place in the relevant Division (with the exception of the national adult inpatient survey which is Trust-wide) plus a six-month update to Experience of Care Group.



SPORT Experience Experience Divisional Learning and Development metrics themes Reporting Improving priorities

Thematic Analysis

*The Picker principles were developed based on evidence from across Europe and the USA on what patients and carers tell us matters most in delivering person-centred care in a healthcare context.

What does this tell us?

The questions in the monthly surveys for inpatients, outpatients and maternity are mapped to the Picker Principles of Person-Centred Care*. The Picker principles provide us a framework for theming patient feedback and for monitoring trends over time. The data shown here is for the 2022/23 financial year at Trust-level. This includes inpatients, outpatients and maternity services. The maximum score is 100 for each theme. The data can be broken down to Division and Speciality and ward/department level.

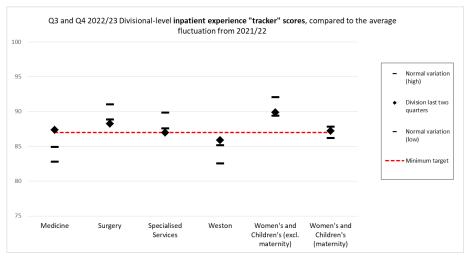
Actions:

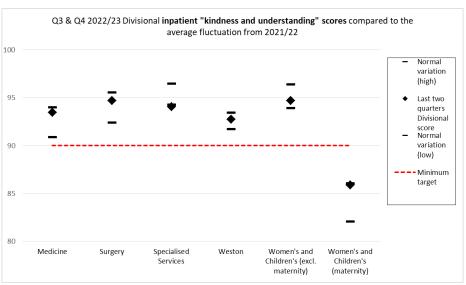
This information will be provided on a quarterly basis and over-time we will better understand any emerging trends.

Surveys	Involvement in decisions and respect for preferences	Clear information, communication and support for self-care →	Involvement and support for family and carers	Continuity of care and smooth transitions	Effective treatment by trusted professionals →	Fast access to reliable healthcare advice	Emotional support, empathy and respect	Attention to physical and environmental needs →
4951	88.24	80.95	76.16	71.52	87.87	89.70	85.09	78.01
		f	P	> \$	5	Ō		† P
"It was a bit confusing as to where the appointment was, i.e. Bristol or Weston as it contained all of the details for the congestion charge so I had to call to find out where my appointment was being held."			"In hospital 3 days (and) never saw the same doctor again who had admitted me! Changed each day. No continuity. First doctor had a plan and possibilities that were never acted on."		ed me! lity. First	"I am a disabled and non-verbal young man. The staff, especially the ward nurses, were kind, patient and very understanding of my needs and were kind and helpful to my parents who are also my carers. They were fabulous!"		

85+

Divisional experience metrics





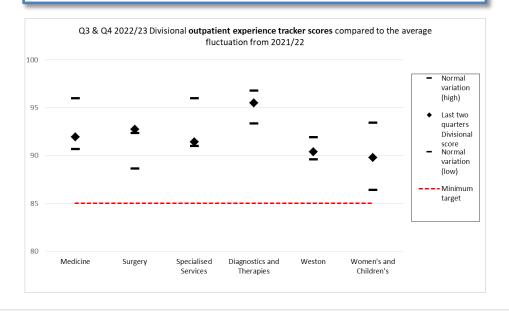
What does this tell us?

The inpatient experience tracker score is below target for Weston in Q3/Q4 but is performing above the average from 2021/22.

Specialised services inpatient experience score in Q3/Q4 is below the average from 2021/22. Ward level analysis has been undertaken by specialised services and targeted conversations taking place with the relevant teams.

The Kindness and Understanding score in Maternity services in Q3/Q4 is below target but is performing above the average from 2021/22. This area is being addressed via the maternity experience improvement plan.

Outpatient experience tracker scores are above target in all Divisions.



"Lighting very harsh. Main noise issues are from drinks trolleys, clattering of cups easily sorted with rubber matting or similar. Disappointed that always needed to ask for bowls, to clean teeth, wash or change bloody bedding. Staff nurse [name removed] exceptionally good, anticipating needs & very caring." Patient, Ward 78, January 2023.

Experience

metrics



- Senior Nurse completed ward briefing to highlight need for robust support for patients around personal hygiene and bed linin change.
- Staff will routinely remind patients that if they wish they can use their own eye masks when trying to rest re: lighting issue.
- 3. Ward senior has informed the facilities team about noise reduction resources on the tea trollies.
- 4. Positive feedback given to Staff Nurse.

"Medical Photographer was very good, however, she mentioned that I could have just visited my local Weston General Hospital instead of traipsing all the way to Hengrove. The girl that booked my appointment told me that they don't offer Weston and was very rude". Patient, Dermatology, March 2023.



- Medical photography team will now be educated on where photography can be undertaken in order to avoid issue again.
- 2. Reminders have been sent to wider admin team re: adhering to Trust values when communicating by phone.

"I didn't have a cubicle. I was in the corridor of the ward. It was hugely distressing. The noise at night was shocking, I didn't get any sleep. Shouting of other patients and talking of staff. When the lights came back on I had a strip light brightly shining in my face. I just had a screen around me. I felt shoved in." *Patient, C705, March 2023*



- 1. Strip light above boarding beds removed.
- 2. Ear plugs/eye masks made available. Posters in bays to advertise this.
- 3. Added to safety brief re: sleep hygiene.
- 4. Boarding beds: ensure patient information leaflet always given.

University Hospitals Bristol and Weston NHS Foundation Trust

Spotlight on improvement initiatives from Divisions

Weston

Successfully trialled the 'What Matters to You' communication tool on Berrow and Medical Assessment Unit (MAU). 'What Matters to You' is about being having person-centred conversations with patients and managing expectations. It helps patients to feel involved in their care and have an overall better experience. This has now being expanded to Cheddar and Steepholm as pilot feedback was very positive. The form (shown here) turned out to be really good conversation starters and the staff were engaged and felt the trial was beneficial to patients and staff.

Themes:

Berrow (26 Bedded respiratory ward) completed 10 conversations

- 9 out of 10 conversations highlighted questions or concerns about discharge which were able to be addressed and the patient reassured
- 6 out of 10 conversations were enhanced by asking the question, i.e the conversation expanded and continued.

MAU (12 bedded Medical Assessment unit) completed 30 conversations

- 23 out of 30 conversations highlighted questions or concerns about discharge which were able to be addressed and the patient reassured
- 5 patients opened up about personal losses and the emotional impact this was having on them so staff were able to provide support and comfort.

What Matters to You? A tool for conversation with Patients.... Staff Name: Ward / Team: What are you expecting to happen today? Is there anything that is worrying or annoving you...? What's important to you What matters to you? today? Your preferred name How as a health care professional can I best support you? What might I be surprised to know about you? (occupation, hobbies, life experience)

Is there anything I can do right now to make you feel happier / make things a little better?

Divisional Development SPORT Experience Experience Learning and Reporting priorities metrics **Improving** themes

Spotlight on improvement initiatives from Divisions

Medicine

New mental health clinic: Started a self-harm outpatient clinic where patients who attend the ED with self-harm are offered 3-4 clinic appointments to try and reduce the risk of them re doing this. Using mental health checklists and care plans on the ward which will help support mental health patients feel heard and supported.

Care of the elderly experience: One of the biggest detriments to this patient group is boredom with longer length of stays in hospital which often leads to disengagement in therapy and treatment resulting in a poorer outcomes. The help from Voluntary services, the Chaplaincy team and the Arts and Culture team has really made a difference and improved the well-being of both patients and staff. During Quarter 4:

- **Dancing** with dementia (Fridays on A518, A524 and A605). For patients of all physical / mental abilities. For those that are less mobile / have more advanced cognitive impairment it is purely sensory and designed to be calming. Those who are more active can join in with the contemporary style of dancing and utilise the props that the team bring with them.
- Befriending volunteers (Wards A518, A528 and A605) The volunteers have been spending time with patients and easing the feeling of loneliness that is sometimes experienced. Volunteers assisting patients in completing the Spring activity packs which have proven very popular. As the weather improves, volunteers will be taking patients to some of our outside spaces for a change of scenery and some much-needed sunshine.
- **Live music** on wards including a pianist and harpist. Wards have given very positive feedback about their visits. On one occasion the pianist gained a vocalist (one of the male patients) for her whole set. It is clear that this makes a big difference to the patients and improves their inpatient experience by offering some entertainment and distraction to what a could be a difficult time.



Trust-wide Experience of Care Development Priorities

Achievements in Quarter 4 2022/23

- Patient First Experience of Care strategic A3 complete and baseline analysis available.
- · Monthly survey modernisation:

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- Transition complete to new mixed methodology for monthly patient surveys (digital / paper)
- Review and refresh of the monthly surveys for inpatients, outpatients and maternity complete.
- Patient Experience Hub Phase 1 (launch) is now complete, 26 training sessions have taken place and 267 staff have received training and now have access to the Patient Experience Hub.
- Formal launch of AccessAble access guides to date 16,000+ hits on website from members of the public.
- 'My Journey' 10 volunteers recruited to bring a patient/public perspective to the clinical accreditation programme and other deep-dive reviews.

Priorities for Quarter 1 2023/24

- Patient First Experience of Care deployment.
- Patient Experience Hub -
 - Tag questions on refreshed monthly surveys to themes (using Picker Principles of Person-Centred Care and CQC i-statements).
 - Begin implementation of phase 2 development plan.
 - Timely feedback commence weekly uploads for FFT and monthly survey programme into the Patient Experience Hub.
- Train and embed 'My Journey' volunteers in clinical accreditation programme.