COUNCIL OF GOVERNORS
8th September 2015

TITLE	**Patient Experience Group Report**
EXECUTIVE SUMMARY	The minutes of the meetings of the Patient Experience Group held on 10th August 2015 are attached. Matters discussed in the meeting on 10th August 2015 included: • The Dementia Group • Radios on Birch Ward • Gazebo on Ash Ward • Breakdown of Complaints Around Communication • Feedback from Patient Panel Meeting • Quality Report – Patient Experience • Feedback from Group Members on Recent Visits and Meetings • Feedback from Members to Governors Relating to Patient Experience • Tour of Ash and Oak Wards
The Council is asked to:	Note the minutes of the meetings of the Patient Experience Group held on 10th August 2015.
Submitted by:	Keith Bradley, Chair of the Patient Experience Group and Public Governor for Woking and Guildford.
Date:	September 2015
Decision:	For Noting

Council of Governors

Minutes of the Patient Experience Group
10th August 2015

Level 2 Seminar Room, St Peter's Hospital
14:00 – 16:00 hours

PRESENT:	Maureen Attewell	Appointed Governor – Spelthorne Borough Council
	Keith Bradley (Chair)	Public Governor – Woking and Guildford
	Brian Catt	Public Governor – Spelthorne
	Maurice Cohen	Public Governor – Woking and Guildford
	Godfrey Freemantle	Public Governor - Hounslow
	Sue Harris	Staff Governor – Nursing/Midwifery
	Chris Howorth	Appt Governor – Royal Holloway University of London
	Margaret Lenton	Public Governor – Windsor and Maidenhead
	Judith Moore	Public Governor – Woking and Guildford
	Danny Sparkes	Public Governor - Runnymede
IN ATTENDANCE:	Louisa Daly	Head of Patient Experience and Involvement
	Mick Imrie	Chief of Patient Safety/Deputy Medical Director
	Anu Sehdev	Membership and Engagement Manager

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PEG-28/15 WELCOME

The Group welcomed Maureen Attewell, Appointed Governor for Spelthorne Borough Council, to the meeting.

PEG-29/15 Minutes of Previous Meeting

The minutes of the meeting held on 1st June 2015 were agreed as a correct record. The updated Action Log was noted.

MATTERS ARISING

PEG-30/15 Dementia Group

Margaret Lenton advised that she had attended two Dementia Group meetings and the next one was due to take place on 12th August 2015. Margaret advised that the Group had a wide membership which included representation from the Alzheimer's Society.

Margaret informed the Group that the Memory Cafés were now up and running but that these took place in a room which was difficult to find and quite small. If the cafés became more popular a new room would need to be found.

It was also advised that work had been completed to develop a dementia friendly bay and how best to highlight this across the Trust was being

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considered. Margaret advised the Group that 167 diagnoses of some form of dementia had taken place in June alone with most patients presenting in outpatients. The Group was enthusiastic and committed.

Margaret expressed the difference David Sills, Dementia and Admiral Nurse Lead, was making already. Training was an area which was being targeted.

The Head of Patient Experience and Involvement advised that the Trust was now seeking feedback from carers of dementia patients. This feedback was similar to the Friends and Family Test with it being real-time, although comments were requested on whether carers "felt supported". This information was requested via a postcard which could be posted in a box on the ward. Margaret added that the Dementia Group had discussed whether the word "supported" was the right form of expression.

It was advised that when items were replaced on wards new items were now sought which were dementia friendly. Volunteer support was needed to help patients pass their time by playing mind stimulating games.

The Group agreed that David Sills should be invited to the Patient Experience Group early next year in order to update the Group on further progress. **AS**

PEG-31/15 Radios on Birch Ward

Sue Harris confirmed that after the refurbishment on Birch Ward the radios had not been replaced. There was, however, a television placed in each bay. It was agreed that the Head of Patient Experience and Involvement would speak to staff on Birch Ward to seek further clarification. **LD**

PEG-32/15 Gazebo on Ash Ward

It was agreed that the Group would request an update on the potential gazebo when visiting Ash and Oak wards later on in the meeting.

PEG-33/15 Breakdown of Complaints Around Communication

The Head of Patient Experience and Involvement advised that she had conducted a review of complaints received from January to June 2015 and found that 262 complaints had been received. 48 of these related to communication and 36 related to attitude of staff. During this piece of work it had become apparent that the logging of complaints needed to be examined and this had resulted in a weekly check to establish complaints were being logged accurately.

It was further advised that most complaints included an issue relating to communication. The majority were either Grade 1 or 2 complaints. A few were Grade 3s and one had been a Grade 4. It was further explained that complaints around treatment and care were normally logged as a Grade 3 whilst more general communication issues were logged as a Grade 1 or 2.

The Head of Patient Experience and Involvement advised that over the six

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months there had been no member of staff had been mentioned more than once. The logging process determined that should a member of staff be mentioned in a complaint then their name would be included when logging the concerns. However, it had also become apparent that some logging of complaints was missing a name when it had been mentioned. Going forward logging would be checked monthly to ensure names were recorded. This would enable accurate reporting to be undertaken at the time of staff appraisals. After an investigation was completed a fuller picture could be obtained on what the circumstances were and what had happened. The Chief of Patient Safety/Deputy Medical Director advised that compliments were recorded in a similar way, tying into staff. Access to the complaints database was limited to those staff that required this access. Chris Howorth reiterated the importance of looking at the investigation and outcome for the full picture.

Brian Catt queried whether complaints that mentioned staff members should be referred to Human Resources. It was advised that including a name was not regarded as a mark against a member of staff; however any serious concern would need to go through the formal Human Resources route. Judith Moore highlighted that the line manager should be following up on any concerns raised with his/her member of staff.

Keith Bradley clarified that the Group had requested a breakdown to ascertain where the problems were and whether areas were back on track. Also whether there were any recurring themes or whether there was a huge variety of issues. The Head of Patient Experience and Involvement advised that issues were very different. Grade 1 and 2s had highlighted there being a lack of information on appointments which was being taken up the Outpatient Working Group. Maurice Cohen queried whether concerns were with letters or telephone calls and in any particular areas. The Head of Patient Experience and Involvement reiterated that how people were logging complaints needed to be examined as each division was logging differently. It would be necessary to ensure that logging was done similarly across the Trust.

Chris Howorth queried whether changes in practice were helping to reduce the number of complaints. The Head of Patient Experience and Involvement advised that the last three months had seen a downward trend, but July had seen a rise in the number of complaints. Chris said that a downward trend, three months in row, should be celebrated. Margaret Lenton felt that expectations were changing and queried whether doctors were now being trained to communicate more effectively. The Chief of Patient Safety/Medical Director advised that new doctors were indeed taught how to communicate more effectively.

REGULAR ITEMS

PEG-34/15 Feedback from Patient Panel Meeting

Maurice Cohen, Chair of the Patient Panel, advised that two meetings had taken place since the last Patient Experience Group meeting.

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Maurice advised that Annette Arnold, Chief Pharmacist, had attended the first meeting to discuss discharge delays and how the Pharmacy Department was tackling these. The Pharmacy Department employed 70 staff and it was clarified that a pharmacist was assigned or available for each ward. The Group discussed the detailed work undertaken by Pharmacy and Sue Harris advised that the department also processed medications for the community hospitals.

Maurice advised that a discussion on providing a Patient Panel report to Trust Board took place and this would be provided to the Board by Sue Ells, Non-Executive Director.

Maurice also advised that the meetings some of the Patient Panel members were invited to attend were not always quorate. It was also mentioned that there were a large number of meetings and whether the number would be reduced in light of the Stuart Rose report. It had been considered whether there should be patient representation when discussing cost improvement plans. Maurice felt it worth mentioning that the Trust had managed to save £14.9million last year through its cost improvement plan. However, the Patient Panel needed to be assured that savings did not affect the patient experience. Alan Witts, one of the Patient Panel members, would be meeting with Erica Heppleston, Head of Clinical Pathway Improvement/Corporate Quality Lead, to discuss further. Sue Harris queried whether the outcome would be shared with the Council and it was considered that it should be.

Finally, Maurice advised that Mr Humphrey Scott, Consultant Surgeon, had attended to discuss Physician Associates posts and how these would work at the Trust. It was suggested that this should be a matter for a future Council meeting as well.

PEG-35/15 Quality Report – Patient Experience

The Head of Patient Experience and Involvement presented highlights from the Quality Report.

It was advised that there had been a significant reduction in complaints and PALS concerns during June. It would appear that concerns were being dealt with on the ward or in the department and that staff were getting better at resolving concerns more quickly. Chris highlighted that follow-up complaints had greatly reduced as well and this would suggest that complaints handling had improved. The Head of Patient Experience and Involvement advised that the review Elly Bittleston had conducted had helped. All Grade 3 and 4 complaints were discussed and learning shared. This process began from the first week a complaint was received with the Chief Nurse checking all responses for Grade 3 and 4 complaints and the Chief Executive signing these off.

The Head of Patient Experience and Involvement advised that A&E had seen an improvement the fourth month in a row in the Friends and Family Test scores.

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The Head of Patient Experience and Involvement highlighted the Patient Experience Dashboard and how it was apparent that complaints had a set of difficult targets to meet. The Chief Nurse had been in discussion with the CCG and it had been decided that a date would be agreed upon with the complainant for when a response would be received but that it may be possible to go over the 30 days agreed when there was an appropriate and valid reason for this.

Friends and Family Test performance in Maternity and Paediatrics had been examined and as a result food had improved in Paediatrics and the Friends and Family test was now given on discharge when previously it had been handed out at the beginning resulting in many forgetting to complete the test upon discharge.

The Head of Patient Experience and Involvement also noted that cases going to the Parliamentary Health Service Ombudsman for further review had reduced.

The Chief of Patient Safety/Deputy Medical Director advised that there had been nine serious incidents in June and only one never event. Discussion on never events took place in relation to the changes made to avoid them and the Trust being an outlier in the reporting of never events.

The Group NOTED the Quality Report.

FEEDBACK

PEG-36/15 Feedback from Group Members on Recent Visits and Meetings

Keith Bradley reminded the Group that Margaret Lenton had attended two Dementia Group meetings. Godfrey Freemantle advised that he attended the Car Parking Steering Group meeting on 6th July. Godfrey advised that there was not a great deal to update the Group since the previous meeting.

PEG-37/15 Feedback from Members to Governors Relating to Patient Experience

Brian Catt briefly advised the Group that he had been tackling a number of issues which ranged from disabled parking, the greater need to involve patients in the decision making process and signage. Brian advised that signage in the Main Outpatients Car Park with regards to Blue Badge holders differed from what was being asked for at Main Reception when patients required a ticket to exit the car park. Brian advised that he felt that patient representation was required in decision making across the Trust and that he would be meeting with Andrew Grimes, Head of Capital Development, to raise his concerns in relation to signage.

It was queried whether meetings of the Signage Working Group still took place and, if so, whether Brian could attend future meetings. **AS**

PEG-38/15 ANY OTHER BUSINESS

None

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Date and Time of Next Meeting

Monday 5th October 2015, 2 – 4 pm, Room 3, Chertsey House

PEG-39/15 Tour of Ash and Oak Wards

The Group was welcomed by Kay Carr, Matron for Paediatrics.

The Group was taken to the Play Area and went out into the courtyard. The Group reiterated that funding from the Charitable Funds could be requested to purchase a Gazebo. Kay informed the Group that she had been advised that nothing could be attached to the external wall but showed the Group the umbrellas which had been purchased recently to provide cover for those using the benches. Kay also advised that a sensory garden would be developed. The Group queried whether the area was well utilised and it was advised that it was, especially by families visiting their loved ones. Kay advised that there was a good mix of boys and girls using the area. Danny Sparkes commented on the weary potted plants and Kay advised that someone was needed to care for them especially when herbs would be planted in the future to form part of the sensory garden.

Kay advised the Group that the clinical curtains at the windows would be replaced with washable blinds. Kay also advised that the play area was not currently open at the weekends due to the lack of play specialist support. The Group commented on the ceiling tiles which had been decorated by children using the area and Kay advised that a coating would be applied to these tiles so that they were not ruined when the area was deep cleaned.

Kay advised that there were currently 16 patients being cared for on Ash Ward. A blood clinic took place on Oak Ward and Oak Ward also housed the medical and surgical day unit. The Group was shown around the area by Lizzie Sturt, Oncology Nurse Specialist. Lizzie advised that it was hoped that the unit would develop an HDU and Observation Bay to receive further accreditation. Oncology was provided on the day unit. Chemotherapy took place on a Wednesday and the unit provided post procedure care and support via drop-in sessions. The Group was shown the respite area and the separate garden area. The Trust had allocated £80,000 to further improve the area.

Currently there were 28 children under the care of the unit that had a wide range of symptoms ranging from tumours to leukaemia. Ages ranged from 5 months to 18 years. The unit had a consultant oncologist assigned to it and specialist nurses. Feedback from patients and their families was very positive with both feeling well supported. The Royal Marsden felt less pressured as support at St Peter's was considered to be very good. It was advised that patients that were 18 – 25 years old were transferred to the Royal Surrey's specialist teenage unit. The unit was currently at level 1 and was moving forward to meeting the standards to secure level 2. The observation bay and HDU were required to secure level 2 and the unit was in the process of completing the required paperwork.

It was further advised that the unit was able to provide infusional therapy

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which meant patients from the immediate area could receive the treatment they needed much closer to home. The unit was deep cleaned every day and although there was no direct Macmillan support, due to this support being for adults, the unit could use Macmillan as a resource. Other organisations such as Momentum, the Make a Wish Foundation were available for support.

The Group was shown single rooms, the toddler bay and parent accommodation for parents of very sick children. Located in the parent accommodation were a kitchen area and a sitting room. The quiet room was found not to be utilised and would be turned into an office area.

The Group thanked Kay for showing it around Ash and Oak wards.

Ashford and St. Peter's Hospitals NHS
NHS Foundation Trust

Action Log

Meeting Date	Minute Ref	Topic	Action	Lead	Due Date	Update	Completed
17/11/14	**PEG-59/14**	**Quality Report – Patient Experience**	Provide a report twice yearly with information on grades, trends and reasons why people were complaining	LD	5/10/15	To be completed for October PEG.	
10/08/15	**PEG-30/15**	**Dementia Group**	Invite David Sills to PEG in early 2016	AS	1/12/15		**ND**
10/08/15	**PEG-31/15**	**Radios on Birch Ward**	Seek further clarification on whether the radios would be replaced	LD	11/09/15		
10/08/15	**PEG-37/15**	**Feedback from Members to Governors Relating to Patient Experience**	Find out whether the Signage Working Group was still meeting and if so ask whether Brian Catt can attend future meetings.	AS	21/08/15	Email sent to Andrew Grimes – no official group in place	✔