Health & Care Standards
Patient Experience
Annual Audit Report
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Executive Summary

The Welsh Government published a Framework for Assuring Service User Experience\(^1\) in April 2013, requiring all NHS services in Wales to publish specific information about the views of service users. The overarching aim of the framework is to ensure the service user voice is heard at all levels in NHS Wales. Wales has agreed a national way of measuring patient satisfaction, a requirement which is now met through the National Survey for Wales, conducted through the Health and Care Standards Monitoring System.

The Framework defines the service user experience, with users defined as someone who uses or has access to Health Services in any setting, including their families and unpaid carers as;

"What it feels like to be a service user of the NHS in Wales"

\((WG\ p3\ 2013)\)

In order to continually improve service user experience, organisations must understand the key determinants of what makes a good experience and have a mechanism for using patient feedback to drive and influence change to service provision and delivery, along with a means of delivering and measuring such improvements.

Welsh Government directs, through the Chief Nursing Officer for Wales, that every Health Board and Trust in Wales conducts an annual audit, which includes a comprehensive patient experience survey. This report outlines the local results of the national survey.

The results are pleasingly very positive, which is a testament to good leadership and the hard work and commitment of Powys Teaching Health Board staff.

Patients surveyed have given an overall satisfaction rate of 98% across in-patient services and district nursing.

Questions for the hospital element have achieved greater than 90%, the lowest of which being 93.5% for sleep. For District Nursing services the scores, with the exception of one domain which was oral care (88.6%), are also above 90%.

The invaluable feedback from patients will enable us to focus on areas for improvement whilst acknowledging the very positive results of the 2015 annual survey.

Rhiannon Jones
Executive Director of Nursing

\(^1\) Framework for Assuring Service User Experience Welsh Government April 2013
Patient Experience

Situation
The All Wales Health and Care Monitoring System (HCMS), formerly the Fundamentals of Care System, complies with the requirements set out in Safe Care, Compassionate Care which is the National Governance Framework to enable high quality care in NHS Wales (2013) and with the NHS Wales National Clinical Audit and Outcome Review Plan (2013/14). The findings from both the Francis Enquiry (2013) and the Trusted to Care report (Andrews, 2014) emphasise the importance for organisations to focus on quality through measuring patient experience and outcomes, as well as improving efficiencies and resource management.

Background
The new Health and Care Standards were published on 1 April 2015. They are the core standards for the NHS in Wales and combine the expectations previously set out in “Doing Well Doing Better Standards for Health Services in Wales”, and the “Fundamentals of Care” in conformity with the Health and Social Care Act (Community Health and Standards) 2003.

The 22 Health and Care standards have been designed to align with the seven quality themes identified in the NHS Outcomes and Delivery Framework and were developed through engagement with the public, patients, clinicians and stakeholders. Each theme includes a number of standards which have been mapped against measures in the NHS Outcomes and Delivery Framework, those relating to the fundamental aspects of care and specific areas that comply with legislation and guidance.
The Health and Care Standards (2015) provide the framework for how services are organised, managed and delivered on a day-to-day basis. They establish a basis for improving the quality and safety of healthcare services and are used to identify strengths and highlight areas for quality improvement.

Each year, the NHS in Wales undertakes a National Audit of care and service delivery, although for 2015 there was only a requirement for Health Boards to complete the patient survey. The audit, as a whole, provides a mechanism which:

*Enables patients/carers to:*
  - Share their views and experiences on what we do well and where we need to improve, which will be used to help improve the services we provide;
  - Have a voice in the quality of the care they receive.

*Empowers staff to:*
  - Make a difference and ensure ownership of their practice;
  - Have a voice in the care that they provide and ensure the focus is on essential elements of care and caring;
  - Identify areas of good practice and highlight issues for concern;
  - Develop action plans to implement changes.

*Enables organisations to:*
  - Have a mechanism to monitor/measure the quality of care;
  - Develop organisational policies and procedures;
  - Identify key themes for improvement;
  - Adopt a culture of openness and transparency with the quality standards.

*The results of the Audit provide an opportunity for staff, organisations and Welsh Government to reflect on:*
  - What are we doing well?
  - What do we need to improve?
  - How can we improve the experience of patients and staff?

**Activity during 2015**

The Fundamentals of Care Steering Group has coordinated a programme of work in preparation for the 2015 Audit, which included:

**Reviewing Audit Questions** - Following the outcomes of the 2014 Audit, the operational, patient survey and staff survey questions were reviewed by each specialty group to ensure they reflected feedback from nurses (regarding the applicability/wording of the questions) and incorporated responses to key reports/documents which had been published.

**Updating Guidance** - The “Best Practice Guide for Staff” was updated to provide details of the purpose of the Health and Care Standards (HCS) Audit and guidance on how to undertake the audit. Where possible the use of volunteers to assist patients with completion of surveys is encouraged.
**NHS Wales Master Classes** - were held across NHS Wales by NWIS and members of the FOC Steering group for local Information & Performance teams to be introduced to the Health & Care Monitoring System.

**Redesign of the Fundamentals of Care (FOC) System to the Health & Care Monitoring System (HCMS)**

During 2015, there has been significant redevelopment of the Fundamentals of Care system including changing the system name to the HCMS aligning with the new Health and Care Standards. Audit questions have also been aligned to the new standards for each speciality group. The NHS Wales (FOC) Steering Group has worked in partnership with Welsh Government and NWIS (NHS Wales Informatics Service) who have provided the specialist changes to the system. The information from the Health & Care Monitoring system will support the monitoring and measurement of compliance with the new Health & Care Standards.

The NHS Wales Health & Care Monitoring System has the following range of quality assurance and improvement tools:

- Health & Care Standards audit tools (operational audits, patient survey and staff survey)
- Patient Acuity & Dependency tools (adult, paediatric, neonatal, mental health)
- National (and local) Care Indicators (currently under review, to expand and include in patient falls)
- Medicines Safety audits (allergy status, medicines reconciliation, omitted medicines, Venous Thrombo Embolism risk assessment compliance)

Specific changes have been made to the Health & Care Monitoring system to improve functionality:

**Reporting Module** – the reporting functionality of the HCMS has been significantly updated by NWIS to enable the reporting of the audit results by HCS Quality Themes and Standards.

**Action Planning Module** – the module is available and staff training has commenced to design local actions plans, enabling ownership of actions for improvement and to share best practice.

**Undertaking the National Health & Care Standards Audit 2015**

The time scales for staff to complete this year’s Audit was 1st October - 30th November 2015. A sample size of 15 patients per Ward/Department was recommended.

The Chief Nursing Officer for Wales, through the Director General, only mandated the completion of the service user experience element of the audit for 2015, so staff surveys and the operational audits have not been completed in Powys on this occasion.
Interpreting the Results

The results from the Health and Care Standards Audit form part of the bigger picture regarding the quality of services being provided in the organisation.

Information from this audit needs to be incorporated with results from other data sources (e.g. mortality reviews, infection control rates, concerns trends, findings from executive walk rounds/inspections and clinical audit findings) to determine if organisationally we are doing the right things well and providing care which is dignified, safe and effective to meet the needs of individuals, as espoused in Powys Teaching Health Boards Integrated Medium Term Plan.

The results from the Health & Care Standards audit were never intended to be used to compare organisations across NHS Wales. The audit results generated are for local measurement to inform quality improvements and to share and celebrate good practice.

For the purposes of reporting and promoting alignment, each question has been linked to the relevant theme from the Powys Nursing and Midwifery Strategy (2015 – 2018), albeit it is stressed that the national audit and patient experience survey is not just related to nursing care.
Service User Experience for Powys

The 2015 annual Patient Experience audit was undertaken in 43 clinical areas across the Health Board between 1st October and 30th November 2015.

The areas that completed the audit include:

- 10 Community inpatient Wards
- 14 District Nursing Teams
- 7 Out Patient Departments
- 5 Day Hospitals
- 4 Minor Injury Units
- 2 Day Surgery Unit
- 1 Endoscopy Unit

590 patients across Powys Teaching Health Board participated in the patient experience survey, this comprises of 400 patients within the hospital setting (which is similar to the number of patients who participated in the 2014 survey) and 190 patients from the District Nursing Service, which is positive as this is the first time all 14 District Nursing teams participated. In 2014, the audit was only piloted in 3 teams.

Patients are encouraged to complete the survey independently or with family/carer assistance although, where this is not possible, a member of staff will assist them. It is recognised that where staff assist the patient to complete the survey this may impact on the opinion expressed by the patient.

The 2015 patient experience survey results show that over 80% of the patient experience surveys within the hospital setting and that 90% of the patient experience surveys within the District Nursing Service were either completed independently by the patient or with support from family/ carers.
How do the patient experience results for hospital-provided services compare over the last 3 years?

Powys has undertaken the patient experience survey for the last 3 years and the graph below (Figure 1) demonstrates that our overall patient experience remains very high, with all 3 years in the region of 98% satisfaction.

**Figure 1**

![Health & Care Standards Patient Experience Survey Total excluding District Nursing](image)

The table below (Figure 2) shows the patient experience satisfaction per question over the last 3 years. Once again this demonstrates that patient experience against fundamental aspects of care remains high, with Powys Teaching Health Board sustaining a 90% or above satisfaction rate for each question.

In addition to the raw data that is collected, patients are offered the opportunity to leave comments, highlighting anything particularly good that they would like to tell us about and/or any improvements that could be made. These comments have been displayed in a picture format (word cloud), based on the words that appear most (Figure 3 and 4).

The collective comments further support the high scores received, giving greater assurance that this is an accurate reflection of the patient experience, but also there are similarities in the top key words that the patients are using to express how their experience has been. This portrays and upholds the values, behaviours and service standard that Powys Teaching Health Board strives to deliver.
## Patient Experience

**Figure 2**

<table>
<thead>
<tr>
<th>Question</th>
<th>2013 %</th>
<th>2014 %</th>
<th>2015 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Throughout your stay/attendance, how often did you feel that you and those that care for you, were given full information about your care in a way that you could understand?</td>
<td>98.43</td>
<td>95.77</td>
<td>97.46</td>
</tr>
<tr>
<td>Throughout your stay, how often did you feel that we kept you informed of any delays in appointment times?</td>
<td>N/A</td>
<td>97.06</td>
<td>98.53</td>
</tr>
<tr>
<td>Throughout your stay/attendance, how often did you feel that you were treated with dignity and respect?</td>
<td>100</td>
<td>99.71</td>
<td>99.75</td>
</tr>
<tr>
<td>Throughout your stay/attendance, how often did you feel that you were given the privacy that you need?</td>
<td>98.96</td>
<td>98.81</td>
<td>99.75</td>
</tr>
<tr>
<td>Throughout your stay/attendance, how often did you feel that when you called us that we responded in a timely manner?</td>
<td>98.81</td>
<td>98.39</td>
<td>99.19</td>
</tr>
<tr>
<td>Throughout your stay/attendance, how often did you feel that the clinical area was kept clean, tidy and not cluttered?</td>
<td>98.96</td>
<td>99.41</td>
<td>100</td>
</tr>
<tr>
<td>Throughout your stay/attendance, how often did you feel that you were made to feel safe?</td>
<td>98.9</td>
<td>99.39</td>
<td>99.49</td>
</tr>
<tr>
<td>Throughout your stay/attendance, how often did you feel that you were given help to be as independent as you can and wish to be?</td>
<td>99.44</td>
<td>98.57</td>
<td>99.17</td>
</tr>
<tr>
<td>Throughout your stay, how often did you feel that you were able to get enough rest and sleep?</td>
<td>100</td>
<td>91.43</td>
<td>93.53</td>
</tr>
<tr>
<td>Throughout your stay, how often did you feel that you were made to feel comfortable?</td>
<td>100</td>
<td>98.73</td>
<td>99.26</td>
</tr>
<tr>
<td>Throughout your stay/attendance, how often did you feel that you were, as far as possible, kept free from pain?</td>
<td>99.13</td>
<td>99.08</td>
<td>97.77</td>
</tr>
<tr>
<td>Throughout your stay, how often did you feel that your personal hygiene needs were met?</td>
<td>100</td>
<td>98.54</td>
<td>100</td>
</tr>
<tr>
<td>Throughout your stay, how often did you feel that you were given help with feeding and drinking if you needed this?</td>
<td>97.96</td>
<td>98.85</td>
<td>97.8</td>
</tr>
<tr>
<td>Throughout your stay/attendance, how often did you feel that you were provided with fresh drinking water and plenty of drinks when you need them?</td>
<td>97.46</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td>Throughout your stay, how often did you feel that you were provided with nutritious food and snacks?</td>
<td>98.92</td>
<td>98.08</td>
<td>97.73</td>
</tr>
<tr>
<td>Throughout your stay, how often did you feel that you were given help, if required, to make sure that your mouth, teeth and gums were kept clean and healthy?</td>
<td>96.92</td>
<td>94.87</td>
<td>99.11</td>
</tr>
<tr>
<td>Throughout your stay/attendance, how often did you feel that if you needed help to use the toilet that we responded quickly and discreetly?</td>
<td>96.36</td>
<td>98.96</td>
<td>99.09</td>
</tr>
<tr>
<td>Throughout your stay/attendance, how often did you feel that you were given help to look after your skin to prevent you from getting pressure sores?</td>
<td>97.96</td>
<td>98.31</td>
<td>99.52</td>
</tr>
<tr>
<td>Using a scale of 1-10, where 1 is very bad and 10 is excellent, how would you rate your overall experience?</td>
<td>95.45</td>
<td>95.98</td>
<td>95.15</td>
</tr>
</tbody>
</table>
Figure 3 - 2015 comments

Figure 4 – 2014 comments
The experience for patients in receipt of District Nursing (2015)

Figure 5 demonstrates the individual percentage scores for each question and the word cloud (figure 6) shows the comments received by the words that occurred the most.

**Figure 5**

<table>
<thead>
<tr>
<th>Question</th>
<th>2015 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Throughout your stay/attendance, how often did you feel that you and those that care for you, were given full information about your care in a way that you could understand?</td>
<td>98.40</td>
</tr>
<tr>
<td>Throughout your stay, how often did you feel that we kept you informed of any delays in appointment times?</td>
<td>94.41</td>
</tr>
<tr>
<td>Throughout your stay/attendance, how often did you feel that you were treated with dignity and respect?</td>
<td>100</td>
</tr>
<tr>
<td>Throughout your stay/attendance, how often did you feel that you were given the privacy that you need?</td>
<td>100</td>
</tr>
<tr>
<td>Throughout your stay/attendance, how often did you feel that when you called us that we responded in a timely manner?</td>
<td>99.43</td>
</tr>
<tr>
<td>Throughout your stay/attendance, how often did you feel that you were given help to be as independent as you can and wish to be?</td>
<td>99.39</td>
</tr>
<tr>
<td>Throughout your stay, how often did you feel that you were made to feel comfortable?</td>
<td>100</td>
</tr>
<tr>
<td>Throughout your stay, how often did you feel that your personal hygiene needs were met?</td>
<td>100</td>
</tr>
<tr>
<td>Throughout your stay, how often did you feel that you were given help, if required, to make sure that your mouth, teeth and gums were kept clean and healthy?</td>
<td>88.64</td>
</tr>
<tr>
<td>Throughout your stay/attendance, how often did you feel that if you needed help to use the toilet that we responded quickly and discreetly?</td>
<td>95.45</td>
</tr>
<tr>
<td>Throughout your stay/attendance, how often did you feel that you were given help to look after your skin to prevent you from getting pressure sores?</td>
<td>96.61</td>
</tr>
<tr>
<td>Using a scale of 1-10, where 1 is very bad and 10 is excellent, how would you rate your overall experience?</td>
<td>97.05</td>
</tr>
</tbody>
</table>
**Patient experience results per question?**

**Question** *(Theme 3: listening to patients and improving the way we work)*

Throughout your stay/attendance, how often did you feel that you and those that care for you, were given full information about your care in a way that you could understand?

Patients said that they were very satisfied with the quality and frequency of information given and the manner in which it was provided. 97% of hospital patients and 98% of patients in receipt of District Nursing felt that they were always or usually given full information about their care in a way they could understand.

The data does show that we have 2 patients that indicated that we did not meet their needs with a never response. The data can be drilled down to identify which specific areas this occurred in and a review by the nursing team undertaken to understand what improvements could potentially be made.

**Comments received by patients:**

- 'Given clear information', 'helpful and caring staff, clearly explained options'. *Hospital Service*
- 'Nurse was happy and told me everything that was happening and what I would have to heal properly'. *Hospital Service*
- 'I was given appropriate information & felt able to make informed choices. Hospital Service*
- 'Patient would like to be informed more about what is going on with his own personal experience'. *Hospital Service*
- 'They explain clearly all procedures that are happening and what outcomes are likely. Please carry on- you’re doing a wonderful job in circumstances that are not always easy. Thank you all'. *DN Service*
- 'Would like a quiet room to speak to the doctor as I find it difficult to hear what is being said because of all the background noise'. *Hospital Service*
- 'The care that is given can be variable - there is/was no clear plan with measurable outcomes. The effect of this is that treatment varies from day to day. There is no clear lead person who steers the direction of treatment. Changes - A clear treatment plan (made visible to family members)'. *DN Service*
Whilst a high number of patients indicate that they were very satisfied, comments have been received indicating that improvements could be made in terms of information and communication.

**To secure improvements for patients:**

- We are utilising ESR to capture the number of Welsh speaking staff. With this information we can identify staff that could be called upon to support translating for patients, should their preferred language be Welsh.

- We have undertaken significant work to redesign the Health Boards patient facing internet site. All clinical services are now represented, with information about the service, useful links, but also where there are patient information leaflets available and self referral forms, these have been uploaded. This means that patients are able to access information more easily. The website is also bilingual. Work has now begun to review and update the Health Boards intranet site for staff, which will include uploading of policies, protocols, information leaflets and relevant links. This will mean that staff will have instant access to information for patients which they can refer to and or print and give to patient at the point of contact.

- We have developed and delivered, in partnership with the University of South Wales, an ‘understand and implement a person centred approach to the care and support of individuals with dementia’ accredited Level 5/6 and QCF Level 2/3 module. The module enables and develops the knowledge and skills of clinical staff in the field of Dementia, which is becoming an increasingly common clinical condition within Powys. This has meant that staff understand more about Dementia which in turn means that they are able to better support the patient. A second cohort is currently being explored for 2016, due to the positive feedback received from staff. This supports our compliance to the Ministerial priorities for dementia care and is a key part of our dementia plan.
Question (Theme 1: caring with compassion & Theme 3 securing a reputation for excellence).

Throughout your stay, how often did you feel that we kept you informed of any delays in appointment times?

Over 98% of Hospital patients and 94% of patients in receipt of District Nursing said that they were always or usually kept informed of any delays in appointment times.

For the District Nursing Service, this question can be slightly mis-interrupted as the District Nursing service specification is based on operating a non appointment based service, with new services developed on the same principle e.g. leg clubs / drop in clinics. That said, we acknowledge comments received from patients indicating that their experience could be improved and this will be taken forward for consideration.

Comments received by patients:

- Managed to get an appointment at short notice'. 'Sometimes have to wait 2/3 weeks for an appointment but not this time. This is not helpful when your hearing aid isn't working. Only option is to wait or go to call in centre at Wrexham which takes all day with travelling time' - Hospital Service

- If I had a problem they would call on me as soon as possible after my telephone call to them. - DN Service

- Wasn’t waiting long for my appointment not really anything needs to change - Hospital Service

- Appointment went like clockwork. No delays - Hospital Service

- Less waiting time in surgery. DN Service

- Change to improve experience when there is a home visit give appointment time (approx) - DN Service

- Anything we can do to improve the experience? Only down to the NHS pressure, waiting time could be less. But I’m not complaining - Hospital Service

- Every single nurse was kind, helpful and supportive. All appointments were arranged and kept. They make a bad experience bearable. Thanks to all of them. - DN Service
Patient Experience

To secure improvements for patients:

- The Health Boards is regularly reviewing and scrutinising patient booking systems and processes. This includes strengthening working relationships and focus around commissioning, with the establishment of a Commissioning Development Board.

- Over the last year the District Nursing Service has changed the way they capture information on the patients that they have visited, by inputting this onto an electronic system. This will mean that for the first time, the organisation will be able to gather more accurate business intelligence on how the service operates, which can then support/influence changes in the future.
Question (Theme 1: caring with humanity, dignity and compassion).

Throughout your stay/attendance, how often did you feel that you were treated with dignity and respect?

Over 99% of patients in Hospital and 100% of patients in receipt of District Nursing said that they were always or usually treated with dignity and respect.

**Comments received by patients:**

- I was treated with respect, dignity and humour. There was always a smile and a laugh. There is nothing I would change to improve the service. *DN Service*
- The care I have had has been very good always been treated with dignity and respect. *Hospital Service*
- 'On both recent attendances to MIU I was made welcome, treated respectfully and professionally with excellent nursing care. *Hospital Service*
- Not treated as a patient but as a person. *Hospital Service*

**To secure improvements for patients:**

- The Health Board has developed and continues to embed the Values and Behaviours Framework.
- Work has been undertaken within the general and community setting to review nursing documentation, the documentation facilitates clinical staff in undertaking a comprehensive nursing assessment in relation to the patients care needs, in addition Core Care Plans have been developed to aid in standardising care delivered all which supports maintaining standards of dignity and respect.
- The Health Boards has introduced a ‘Treat me Fairly’ E-learning module, which is a mandatory training requirement.
**Question** *(Theme 1: caring with humanity, dignity and compassion).*

Throughout your stay/attendance, how often did you feel that you were given the privacy that you need?

Over 99% of patients in Hospital Services and 100% of patients in receipt of District Nursing said that they always or usually were given the privacy they needed.

![Hospital Services](chart1)

<table>
<thead>
<tr>
<th>Always</th>
<th>Usually</th>
<th>Sometimes</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>95.19%</td>
<td>4.56%</td>
<td>0.25%</td>
<td>0.00%</td>
</tr>
</tbody>
</table>

![District Nursing Services](chart2)

<table>
<thead>
<tr>
<th>Always</th>
<th>Usually</th>
<th>Sometimes</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>97.28%</td>
<td>2.72%</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

**Comments received by patients:**

Mum’s care has been fantastic. All the staff have been so caring and respectful and all mum’s needs have been met to the highest standard *Hospital Service*

The ward is very peaceful and you get lots of privacy *Hospital Service*

**To secure improvements for patients:**

- Within inpatient clinical areas new curtains for around beds have been procured, the new curtains provide added privacy as some of the old curtains were of a very thin material.

- All areas use privacy pegs, engaged signs and a culture of ‘knocking first’ being embedded within the Health Board to ensure maximum patient privacy.
Question (Theme 3: listening to patients)

Throughout your stay/attendance, how often did you feel that when you called us that we responded in a timely manner?

Over 99% of patients in Hospital Services and patients in receipt of District Nursing said that they always or usually felt that we responded in a timely manner when they called us.

Comments received by patients

- They could not have been more helpful Hospital Service
- Any problems that arise are dealt with by staff. Able to discuss problems Hospital Service
- Cheerful and friendly attitude. Always prompt to respond DN Service
- Always good care. I always know that there is someone there to help if I need. Hospital Service
- The staff of all levels listen and respond. They always give me confidence and help. Five star!! Hospital Service
- Our team of nurses were at all times cheerful polite pleasant, gave us daily assessment of dads health help to liaise with the surgery regarding doctors appointments and medication and were always there for us giving reassurance and advice The only possible improvement would be a mobile contact instead of answer machine although messages left have ALWAYS been answered promptly DN Service

To secure improvements for patients:

- A new process of ‘intentional rounding’ is being implemented across wards, which is part of the Transforming Care initiative (1000 Lives). This ensures patients are seen every 1 – 2 hours by a nurse, with a focus on fundamentals of care eg: comfort, hydration, pressure relief, pain relief etc and that the call bell is within reach.
**Patient Experience**

**Question** *(Theme 2: safe, effective harm-free care).*

Throughout your stay/attendance, how often did you feel that the clinical area was kept clean, tidy and not cluttered?

100% of the patients said that they always or usually felt that the clinical area was clean, tidy and not cluttered.

![Bar chart showing cleanliness ratings]

**Comments received by patient**

- Cleanliness was good
- Better curtains or blinds

**To secure improvements for patients:**

- The Health Board undertakes Credits for Cleaning auditing, the audits are carried out by a multi-professional team as this ensures all key stakeholders understand the importance of maintaining high standards within the clinical area.

- The Health Board welcomes CHC visits, which include reviewing the cleanliness of our hospital sites and sees these visits as a supportive and independent resource to assist in driving up standards.

- The Lead Nurse for Infection Control is actively involved in developing a cohesive infection control link nurse forum to further embed standards.

- Significant work has been undertaken over the last year to review cleaning schedules within clinical areas. New forms with display boards outside each clinical room are currently being rolled out. The aim is to ensure that all professionals can see when a clinical area was last cleaned and to standardise procedures and cleaning practices.
Question (Theme 2: safe care)
Throughout your stay/attendance, how often did you feel that you were made to feel safe?

99% of the patients said that they were made to feel safe.

Comments received by patients

- I have no complaints about my stay in hospital but it has helped me not to be scared of becoming a patient Just to say thank you for all my treatments
  Hospital Service

- I'm always made to feel safe and comfortable
  Hospital Service

- Felt really "safe" and in professional hands
  Hospital Service

To secure improvements for patients:

- The “Hello My Name is“ initiative is being rolled out within clinical areas, which ensures that all staff introduce themselves to patients.

- The Health Board is currently refreshing the dementia plan (2016-2019), which includes a pledge to improve inpatient environments to make them more old-age and dementia friendly, based on evidence.

- We are exploring the use of assisted technology for patients in the community, all which will support the patient in feeling safe e.g. panic alarms, falls mats.

- Significant work has been undertaken to review the Falls Policy and secure a reduction in the number of injurious falls. This work will continue during 2016, with the aim of reducing risks for patients.
**Question (Theme 2: safe care)**

Throughout your stay/attendance, how often did you feel that you were given help to be as independent as you can and wish to be?

Over 99% of patients both in the Hospital and in receipt of District Nursing said that they were encouraged to be as independent as possible.

The data does show that 1 patient indicated that we did not meet their needs with a never response.

**Comments received by patients**

I met a lot of lovely kind people and now we are all good friends. Thank you so much for looking after me, I am much better now, and really enjoying life again. **Hospital Service**

The good thing is that I’m improving from my illness because of the care I am being given **Hospital Service**

This team of district nurses were extremely courteous and did everything to put me at ease and explain my treatment in terms that I understand. I am most grateful to all of them for the treatment that I received. They were all extremely professional and understanding. CHANGE TO IMPROVE EXPERIENCE Not a thing! They kept me out of hospital and away from infection and I shall always be grateful to the nurses and to the medical staff who looked after me. **DN Service**

To secure improvements for patients:

- The Health Board has rolled out the ‘Virtual Ward’ model across the county, which commenced in Ystradgynlais with the team and concept winning the NHS awards (2015). The model aims to safely maintain people at home with multi-agency supportive intervention to avoid hospital admission.
Question *(Theme 2: safe and effective care)*

Throughout your stay, how often did you feel that you were able to get enough rest and sleep?

93% of the patients said that they were always or usually able to get enough rest and sleep. From reviewing all the data, it has highlighted that this area scored the lowest overall percentage across all of the questions, with comments also received from patients indicating that this is an area where improvements could be made.

![Hospital Services chart]

**Comments received by patients**

- Less noise at night
- *Hospital Service*

- Need to have less noise in late evening and night shift
- *Hospital Service*

**To secure improvements for patients:**

- As part of the review of the nursing documentation, questions on admission in relation to sleeping patterns and normal routine have been strengthened. In addition the introduction of the ‘This is me’ can help gain valuable information e.g. like Horlicks before bed, which can be used to improve the patient experience whilst in hospital.

- We will explore the introduction of night time quiet zones and sleep guidelines.
Patient Experience

**Question (Theme 1: caring with kindness)**

Throughout your stay, how often did you feel that you were made to feel comfortable?

99% of patients in Hospital and 100% of patients in receipt of District Nursing said that they were always or usually made to feel comfortable.

**Comments received by patients**

- ‘everyone treats me with respect and takes time to talk/listen to me. I'm always made to feel safe and comfortable’
  
  Hospital Service

- 'Sister very polite and efficient with good sense of humour - made me feel at ease'.
  Nothing to change experience. Hospital Service

- The atmosphere in the hospital is lovely.
  Hospital Service

- Would be nice to have some more comfortable chairs
  Hospital Service

- I always feel completely confident about the treatment I shall receive. I have noticed that nurses are expert in working effectively when they have limited space for their dressings etc. Sometimes they have to work in awkward (uncomfortable) positions themselves so that the patient receives treatment in comfort. They seem always to be concerned for the patients comfort.
  DN Service

- The district nurses went out of their way to ensure that I was comfortable with what I was having done and if I had a problem they would call on me as soon as possible after my telephone call to them.
  DN Service

- my husband was always made comfortable in a happy and caring atmosphere. Thank you.
  DN Service

**To secure improvements for patients:**

- All staff who have direct contact with patients are being issued with a bright yellow name badge. This is to help the patient know who is with them, which can reduce anxiety levels and promote a feeling of comfort.
Question (Theme 2: effective care).

Throughout your stay/attendance, how often did you feel that you were, as far as possible, kept free from pain?

97% of the patients said that they were made to feel as pain free as possible.

Comments received by patient:

No specific comments received in relation to pain, however comments have been received and quoted in relation to being made to feel comfortable and this could also be broadly/ inclusively linked to this questions.

To secure improvements for patients:

- The new ‘intentional rounding’ process, as described above, includes checking if the patient is in any pain.

- The medicine management and pharmacy team have been undertaking the All Wales Medication audits, which although this is mainly looking at how medication charts are completed and missed medication, the learning/feedback and improvement plans help drive up standards in medication, which in turn could have a direct impact on the patient experience in relation to pain control.

- All staff within the inpatient wards, when undertaking medication rounds, wear a red tabard with ‘Please do not disturb’, allowing full concentration to be given to the patient and the administration of medication, minimising the risk of errors and enhancing focus.
Question (Theme 1: caring with kindness & Theme 2: effective care).
Throughout your stay, how often did you feel that your personal hygiene needs were met?

100% of patients both in Hospital and in receipt of District Nursing said that their personal hygiene needs were met.

Comments received by patients:

- the standard of nursing care was excellent I was given spare dressings when needed The atmosphere in the leg club was very friendly with the district nurses and volunteers all working well together to provide patients with an enjoyable treatment I would not change anything. *DN Service*

- The Nurses are always efficient and friendly and always willing to discuss my various ailments and provide whatever bandages/ointment I need. *DN Service*

To secure improvements for patients:

- Patients are asked to bring in their own toiletries into hospital, where an emergency transfer has occurred or that on admission this has not been possible, all wards hold a stock of supplies, ensuring that a patient is able to maintain their personal hygiene.
Questions (Theme 2: effective care)

Throughout your stay, how often did you feel that you were given help with feeding and drinking if you needed this?

97% of the patients said that they were always or usually given support with feeding or drinking.

Question:

Throughout your stay/attendance, how often did you feel that you were provided with fresh drinking water and plenty of drinks when you need them?

100% of the patients said that they were provided with enough water/ drinks

Question:

Throughout your stay, how often did you feel that you were provided with nutritious food and snacks?

97% of the patients said that they were always or usually given provided with nutritious foods or snacks
Patient Experience

Comments received by patient

- Food generally of a very good standard
  *Hospital Service*

- Need a tea and coffee machine for visitors
  *Hospital Service*

To secure improvements for patients:

- The Health Board has undertaken significant work over the last 1-2 years on improving the standard of nutrition, hydration and catering services. A 360 degree audit approach has been adopted, with recognition from the Welsh Audit Office that this is good practice. The audit looks at all elements of the nutrition, hydration and catering life cycle e.g. documentation, meal time experience, & compliance to protected meal times.

- The Health Board has set up a nutrition, hydration and catering, multi professional steering group, which oversees the implementation of guidelines and best practice in relation to nutrition, hydration and catering standards.

- A culture that meal times is a team activity with domestics and porters supporting the process has enriched the meal service experience but has also released nursing staff to concentrate on ensuring that patients needs are meet e.g. domestic staff deliver food to patients, change waters jugs, where previously this would have been a member of the clinical team.

- This year the clinical areas will continue to standardise and embed the Patient Status at a Glance Board philosophy, which include symbols to identify patients who are nutritionally at risk and or require assistance with eating. This is complemented by the red tray/mat system.

- The Health Board undertook, on behalf of Wales, the pilot ‘water keeps you well’ hydration campaign and will look to implement this across the Health Board during 2016.
Question *(Theme 2: effective care)*

Throughout your stay, how often did you feel that you were given help, if required, to make sure that your mouth, teeth and gums were kept clean and healthy?

99% of Hospital patients and 88% of patients in receipt of District Nursing said that they were always or usually given help as required with regards help their oral hygiene.

For the District Nursing Service, this question can be slightly mis-interrupted as the District Nursing service would not normally be the primary provider of mouth care as this would be part of a social service care package. The responses received stating sometimes or never will as discussed with District Nursing teams to see whether improvements in communication are needed but also to ensure that should the patient need assistance with oral health this is addressed in the appropriate care plan/package of care.

**Comments received by patient**

*No specific comments received in relation to Oral Health, however comments have been received and quoted in relation to being made to feel comfortable and this could also be broadly/ inclusively linked to this questions and any other fundamental aspect of care.*

**To secure improvements for patients:**

- As part of the documentation review, the All Wales Oral Health Care Assessment and Core Care Plans were mandated within the inpatient setting, this included supportive materials and E-learning training being made available to staff. This will be reviewed within District Nursing.
**Question** *(Theme 1: dignified care & Theme 2: effective care)*

Throughout your stay/attendance, how often did you feel that if you needed help to use the toilet that we responded quickly and discreetly?

99% of patients in Hospital and 95% of patients in receipt of District Nursing said that we always or usually responded in a timely and discreet manner with regards to their toilet needs.

Although the survey questions for the District Nursing Service were reviewed by the All Wales group it would appear that the wording of this question needs review.

**Comments received by patient**

No specific comments received in relation to toilet needs, however comments have been received and quoted in relation to us responding in a timely manner and this could be broadly/ inclusively linked to this questions and any other fundamental aspect of care.

**To secure improvements for patients:**

- We are using the all Wales Toileting Bundle. This will be audited by the Continence Team during 2016.

- The new ‘intentional rounding’ process, as described above, includes checking if the patient requires the toilet.
**Question (Theme 1: dignified care & Theme 2: harm free care)**

Throughout your stay/attendance, how often did you feel that you were given help to look after your skin to prevent you from getting pressure sores?

99% of patients in Hospital and 96% of patients in receipt of District Nursing said that they were always or usually given enough help to look after their skin.

**Comments received by patient**

No specific comments received in relation to support with their skin, however comments have been received and quoted in relation to helpful staff and this could also be broadly/inclusively linked to this questions and any other fundamental aspect of care.

**To secure improvements for patients:**

- Significant work over the last year has been undertaken by the informatics department into improving the business intelligence data that the Health Board receives into pressure ulcers, which aids in understanding issues and improving the service / care provided.

- A review into the contract of community equipment is being undertaken, with the aim of improving the service e.g. ensuring that patients in the community receive the right pressure relieving equipment and at the right time.

- As part of the documentation review a single assessment has been agreed with using Waterlow. This work has also led to the development of core care plans and the review/revising of the SKINN bundle documentation.

- The Health Board has recently participated in the All Wales Wound Care Audit, with positive results but will use the outcome of this as valuable data to drive forward improvements.

- The Health Board has recently received the results of an Internal Audit into the prevention and management of pressure ulcers and an action plan has been developed to address issues identified.
Patient Experience

Question:
Using a scale of 1-10, where 1 is very bad and 10 is excellent, how would you rate your overall experience? **Overall cumulative satisfaction score for Hospital Services: 95.15%**

Using a scale of 1-10, where 1 is very bad and 10 is excellent, how would you rate your overall experience? **Overall cumulative satisfaction score for District Nursing Services: 97.05%**

Conclusion

The audit was carried out across 43 different areas, to include inpatients and people in receipt of District Nursing, with 590 patients participating. The results show a very high level of satisfaction amongst the patients surveyed, which is pleasing to note and a testament to the hard work and commitment of staff.

We know that positive patient experience is at the heart of everything we do, outlined in the Powys Teaching Health Board aim: *truly integrated care centred on the needs of the individual*. But we also know that much work is required to strengthen the Health Board approach to measuring patient experience and reporting on findings, together with the need to enhance patient engagement. The launch of the long awaited Patient Experience Strategy in March 2016, aligned to the All Wales Service User Experience Framework (2013) will assist us, together with the publication of the Patient Engagement Strategy (2015) and the Communication Strategy (2015), promoting co-production.

These strategies will reinforce the foundations that are already in place with regards to securing positive patient experience, but will also ensure that this type of audit methodology and questions are being used more frequently, to inform continuous improvement.

The enhancements to the HCMS are welcomed and will support our work, by providing a system to store the data and mechanisms to produce reports and present data in a consistent manner.
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