





ADMISSION TO HOSPITAL 	DIGNITY & RESPECT AND PRIVACY: Improving and sustaining patient experience.	1. Examination rooms are available in the Emergency Department to ensure patients' privacy during examinations and procedures.	ON-GOING
	QUALITY IMPROVEMENT:	1. Comfort packs containing wet wipes, toothpaste, toothbrush, non-slip socks, eye mask and ear plugs continue to be provided to patients in the Emergency Department.	ON-GOING
	WAITING TIMES: Reduce Emergency Department waiting times.	1. Care pathways have been developed through the Emergency Department, including a stroke care pathway and a fracture pathway. Other pathways are in development such as a Frailty Care Pathway.	ON-GOING
CARE ON THE WARD 	NUTRITION: Improve hospital food and nutrition.	1. For patients who were unable to eat during scheduled mealtimes, replacement meals are made available. Patients who are due to have a procedure are offered a light diet menu card. 2. Successful implementation of a quality improvement project focusing on identifying and helping patients who require assistance with their meals ("the red tray initiative"). 3. Menu cards have been modified to reflect no added salt or sugar, that food is cooked freshly on site, and to inform patients about protected mealtimes, allergens and food safety.	ON-GOING
EXAMINATION DIAGNOSIS & TREATMENT 	COMMUNICATION: Providing support to patients who do not have someone to speak to about their worries and concerns.	1. An information leaflet called 'Time to Care, Time to Visit' was developed for patients. This includes images of different uniforms to enable patients to identify staff and help them to direct their concerns. 2. A pastoral care drop-in service is available between 2pm-3pm Mon-Fri.	ON-GOING
	COMMUNICATION: Promoting improved communication skills and effective ward round communication with healthcare professionals and patients.	1. A programme of training (ASSIST model) for staff continues to be provided to enable staff to address patients' concerns and complaints more effectively. 2. The Nursing Department continues to implement the Careful Nursing Model which puts the patient at the centre of their care. 3. Intentional rounding (a structured process where nurses carry out regular individualised checks with patients) is currently being trialled and evaluated.	ON-GOING
DISCHARGE OR TRANSFER 	COMMUNICATION:	1. A Discharge Lounge is open from 7am to 7.30pm Mon-Fri to facilitate prompt discharge of patients. 2. The hospital has a dedicated Assistant Director of Nursing in charge of Patient Flow. 3. A patient information leaflet has been developed for all patients on discharge, including information about what to expect on discharge from the hospital and points of contact.	ON-GOING

WHAT PATIENTS
SAID TO US

LISTENING RESPONDING
& IMPROVING



PATIENT EXPERIENCE	DIGNITY & RESPECT AND PRIVACY: Improving and sustaining patient experience.	1. The Senior Management Team are actively involved in leading a programme of Patient Safety 'tracers', designed to follow a patient's experience of a specific pathway of care.	ON- GOING
		2. Themes identified from complaints and feedback are reviewed at the hospital's Quality & Patient Safety Executive meeting each month. This meeting is attended by members of the Senior Management Team	
		3. The hospital delivers Open Disclosure workshops and briefing sessions to staff. This supports our staff in utilising an open, timely and consistent approach to communicating with patients, building trust following an adverse event.	
		4. The hospital operates a 'no wrong door' approach to receiving complaints and feedback.	