## MIDLANDS REGIONAL HOSPITAL, TULLAMORE

TIME WHAT PATIENTS LISTENING RESPONDING **SCALE** & IMPROVING SAID TO US **ADMISSION** WAITING TIMES: 1. Continue to work with staff to improve ED waiting times. Ongoing monitoring ON-GOING Reduce Emergency TO HOSPITAL to ensure improvements are being made. Department waiting 2. Processes of communication to be improved with a renewed focus on 2018 >廳 "Customer Care". - regular "customer care" training now in place for the hospital. This will run each quarter, with all staff across disciplines encouraged to attend. First two sessions have been run in 2018. ON-GOING 3. The Clinical Microsystems Programme in the Emergency Department will continue to work to increase self-awareness among staff, and to engage in continuous improvement in the department to provide an improved experience for the patients, families, and the care teams. Staff have initiated a process to ensure that waiting patients receive regular updates on their expected waiting times. 4. The Emergency Department patient waiting area, and treatment areas will be 2018-2019 reviewed and redesigned to improve the patient experience. The redesign of the area has been agreed, and is to be begun before year end. CARE ON **NUTRITION:** 1. The choice of meals offered to patients will be reviewed and improved on -ON-GOING Improve hospital The modified consistency meal choices have been changed in collaboration THE WARD food and nutrition. with a patient focus group. 2. Nutritional content of meals will be analysed and improved upon to ensure ON-GOING the nutritional adequacy of meals and menus - nutritional analysis of meals has begun. ON-GOING 3. The specific dietary requirements of patients based on preference, tolerance and religious practice will be taken into account through the establishment of a communication processes with patients. This process has begun through the modified diet improvements, and the model of engagement with patients will continue. 4. Menus will be developed in a manner which supports healthy eating for ON-GOING patients - Nutritional Analysis and recipe adjustment based on results will support healthy eating. ON-GOING 5. The process by which patients who need additional assistance with their meals are identified will be reviewed and improved. Assistance during meal times will be prioritised.- The process of identification of patient needs has been reviewed, with a proposal for change finalised. **EXAMINATION** COMMUNICATION: 1. A promotional campaign will be rolled out in relation to availability of key staff ON-GOING Increase awareness who can engage with patients who feel isolated or who have nobody to speak **DIAGNOSIS &** for patients of the to about their worries and concerns. TREATMENT supports available if they wish to speak to someone about their worries and fears. COMMUNICATION: ON-GOING 1. A programme will be designed to improve the accessibility of health Provide clear information for patients: Patient information leaflets will be reviewed and made more widely answers and information in available; - review of documentation underway response to Recommended sources for accessing user-friendly evidence-based questions about information will be promoted to patients.- pilot being undertaken as part of operations and a COPD initiative, using recommended sources on the internet for assisting procedures. patients in using the correct inhaler technique. 2. A review of ward-round processes will be undertaken. 2018 3. A "Customer Care" training schedule will be developed and implemented to 2018



improve communication between staff and patients. – regular "customer care" training now in place for the hospital. This will run each quarter, with all staff across disciplines encouraged to attend. First two sessions have been run in

2018.

## MIDLANDS REGIONAL HOSPITAL, TULLAMORE

WHAT PATIENTS LISTENING RESPONDING & IMPROVING SAID TO US DISCHARGE **COMMUNICATION:** 1. The hospital will develop a process by which quality information will be Provide more provided to patients, their families, and other health-care professionals at the OR TRANSFER information time of discharge, including information such as who to contact if something goes wrong and providing information about medication side effects. to patients at discharge. 2. A high quality, standardised discharge letter will be developed to communicate with other health-care professionals about a patient's hospital admission. 3. The hospital will aim to improve access and distribution of written patient information about going home from hospital by building a bank of up-to-date information leaflets for patients. - Qpulse currently being rolled out in the hospital, which will allow for the development of a "bank" of leaflets. 4. Appropriate staff will engage with patients in relation to the medications they are taking, and any changes that have been made at key points in the patients journey (Medication Reconciliation) - Pharmacy Department are actively recruiting staff. **COMMUNICATION:** 1. There will be a drive to increase awareness of the importance of involving patients in decisions about their discharge from hospital. – The hospital Involve patients in decisions about discharge team has been enhanced, allowing for earlier and more meaningful their discharge from involvement of patients in their discharge process

hospital.

PATIENT

**EXPERIENCE** 

DIGNITY &

AND PRIVACY:

Improving and

experience.

sustaining patient

RESPECT



ON-GOING

ON-GOING

2018

2-3 YEARS

ON-GOING

2018-2020



1. Hospital Management will support the roll-out and implementation of hospital-

Values in Action Programme that empowers staff to lead the changes needed to build a better health service; - a number of staff have initiated

'What Matters to Me' initiative with a focus on improving the service provided to patients by gaining a better understanding of the things that

'Schwartz Rounds', proven to improve staff wellbeing, resilience and teamwork, and in-turn have an impact on improved person- centred care. – Facilitator and Clincial lead have been identified and trained, first round to

Caring Behaviours Assurance System which aims to assure the delivery of

Programme on Cultures of Person Centeredness to lead culture change and

wide programmes which will enhance patient experience, such as:

safe care to patients at the point of care;

events based on the Values in Action Programme

develop person-centred practice for patients;

are really important to them;

take place before year end.