



WHAT PATIENTS SAID TO US

LISTENING RESPONDING & IMPROVING

TIME-SCALE

ADMISSION TO HOSPITAL 	PATIENT EXPERIENCE: Improve patient experience of dignity & respect and privacy.	<ol style="list-style-type: none"> 1. A new Emergency Department opened in May 2017. 2. A designated 'End of Life Care' area is currently being finalised. 3. The Values in Action programme, helping to support cultures of support and openness is continuing to be implemented with champions in the Emergency Department and throughout the hospital. 4. The new Emergency Department is more spacious, with numerous private cubicles and treatment areas. This new facility has made a significant difference for patients, improving their privacy and dignity in the Emergency Department service. 	2018-2019
	COMMUNICATION: Improve communication between patients and staff.	<ol style="list-style-type: none"> 1. Communication training programmes for staff, including customer service training, has been developed and implemented and is available to all staff. 2. Communication screens and leaflet areas are now in place throughout the new Emergency Department. 3. Staff in ED are participating in the National Healthcare Communication Programme pilot. 	2018-2019
	PATIENT SUPPORT: Continue to enhance better patient support in ED.	<ol style="list-style-type: none"> 1. PALS (Patient Advocacy & Liaison Services) Manager and volunteers are working in the new Emergency Department, playing an important role to improve patient experience. 2. There is ongoing recruitment of volunteers in the Emergency Department. 3. Information leaflets explaining the processes for triage in Emergency Department are available for patients. 4. Comfort packs with hygiene products are available for patients who require them. 	2018-2019
	WAITING TIMES: Improve wait times for patients in ED.	<ol style="list-style-type: none"> 1. Several projects underway to help ensure patients are treated by the right staff in a timely way are underway. These are called 'Unscheduled Care', 'Kaizen' and 'Patient Experience Time' projects. These quality improvement initiatives aim to improve patient flow in the Emergency Department. 2. Training for staff in these areas is also being provided. 3. Extra beds are available with a short stay ward recently opened. 4. Plans are well underway for a new 96-bed wing. 	2018-2019
CARE ON THE WARD 	NUTRITION: Continue to improve hospital food and nutrition for patients, especially for who missed meals because they were away from the ward for treatment or were recovering from surgery.	<ol style="list-style-type: none"> 1. Patients who miss a meal are provided with a replacement meal. This is in accordance with the 'Missed Meal' and 'Protected Mealtime' policies. 2. Menus have been reviewed and made available to patients to help them choose their meals options. 3. Meal times have been reviewed and the evening meal has been moved to later time in response to patient requests. 4. A tannoy system is in place to inform visitors and staff of the protected mealtimes policy. 5. Extra food is served for late snack and drinks. 6. Menus have been improved and are personally distributed by catering staff 7. Patient feedback is sought about the food at different times in the year. 	2018-2019
	COMMUNICATION: Improve staff wearing name badges and introducing themselves.	<ol style="list-style-type: none"> 1. Name badges have been provided for all staff. 2. All staff are encouraged to introduce themselves to patients – '#Hello, my name is...' and their job. 	2018-2019

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<p>EXAMINATION DIAGNOSIS & TREATMENT</p>	<p>COMMUNICATION: Continue to support patients to ask questions about their healthcare and speak about any worries or fears they may have.</p>	1. UHL is a pilot site for the National Healthcare Communications Training Programme. Best practice communication in supporting patients when in hospital and effective partnership in their care is promoted.	2018-2019
		2. A promotional campaign is being planned to encourage patients to speak up and seek help for their worries and concerns.	
		3. Members of the Pastoral Care team play a key role in the multi-disciplinary team in supporting patients who have worries or fears. Their role is being promoted on an ongoing basis.	
		4. Information leaflets, addressing key areas of health relating to the patient's journey, are made available in suitable areas for patients.	
		5. A successful pilot of a volunteer 'Befriender' role has been carried out; further recruitment is planned.	
	<p>COMMUNICATION: Improve health information provided to patients throughout their healthcare journey.</p>	1. Work is underway to make health information easier to read and understand with patient representatives involved. The 'UL Hospitals Health Literacy Policy' will be launched in Q4 2018.	2018-2019
		2. Staff are encouraging patients to ask questions about their healthcare treatment options and plans.	
		3. Leaflets are available throughout the hospital relating to all key aspects of general health and patient wellbeing- this work has been piloted in UHL since the survey results in 2017 with significant input from patients and families.	
	<p>COMMUNICATION: Promoting improved communication skills and effective ward round communication with healthcare professionals and patients.</p>	1. The new staff induction training includes a communication skills workshop.	2018-2019
2. Training provided for staff on 'Dealing with Bad News' and 'Final Journeys', looks at communication and end-of-life care and continues to be implemented.			
3. Whiteboards for improving communication among staff are on each ward.			
4. Electronic screens, as a result of patient feedback, in key circulation points are being planned.			
5. The National Healthcare Communication Programme will be rolled out to all staff in 2018 and beyond.			
<p>DISCHARGE OR TRANSFER</p>	<p>COMMUNICATION: Improving access and delivery of written information about going home from hospital for patients. Improve information:</p> <ul style="list-style-type: none"> - about discharge plans, - how patient's can best manage their health when they leave hospital, - knowing about medications; and - who to contact if something goes wrong. 	1. A focus group with patients to find out more about their discharge health information needs has been completed.	ON-GOING
		2. The findings of the survey informed the development of a leaflet with the Drugs and Therapeutics committee, with the aim of improving medication information for patients.	
		3. Patients who commence on a new drug are given a written current information sheet printed from HPRA (Health Products Regulatory Authority) website.	
		4. An information booklet for patients with relevant information before and after discharge has been developed- it has been piloted with patients and is due for launch in Q4 2018.	
		5. Community support programmes for patients to help them manage their health or chronic disease, have been implemented- one such example is the 'Survive and Thrive' Programme for Cancer patients following their treatment.	

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PATIENT EXPERIENCE	DIGNITY & RESPECT AND PRIVACY: Continuing to build on patient feedback and improve patient experience.	1. Support programmes for staff allowing them to discuss and share difficult and stressful situations in healthcare are being implemented. One of these programmes is called 'Schwartz Rounds'. This has commenced in UHL since October 2018 and is held monthly. Mindfulness and stress management programmes for staff, are also underway, part of the <i>Healthy Ireland</i> initiatives.	2018-2019
		2. Programme focusing on the values and culture of the organisation, called 'Values in Action' is well underway with champions throughout all departments and wards. Focused awareness programmes implemented throughout the year.	
		3. We continue to ask and listen to patients about what is important to them, through gathering patient stories and 'What Matters to You' programme. The latter has been advanced further across additional wards and in the Intensive Care Unit.	
		4. Ongoing awareness training around care at end-of-life, including communication and appropriate care, are in place. Projects are well underway to create more dignified spaces for patients and families at end-of-life, such as a dedicated end-of-life care room for patients on one ward and a paediatric remembrance area on the hospital Church.	
		5. We continue to build on the role of the Patient Council and include the voice of the patient in all our work.	
		6. A Clinical Ethics committee has been launched with its focus on supporting clinicians, families and staff in ethically challenging cases.	
		7. The dignity and respect of patients to ensure they have trust and confidence is central to all our daily work and improvement efforts.	
		8. The CEO of UL Hospitals is fully committed to implementing and supporting this plan.	

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