

WHAT PATIENTS SAID TO US

LISTENING RESPONDING & IMPROVING



<b>ADMISSION TO HOSPITAL</b> 	<b>PATIENT EXPERIENCE:</b> Improve patient experience of the Emergency Department, in particular clear information and communication.	<b>PRIORITY PROJECT</b> 1. We have started an quality improvement project in Emergency Department (ED) which is designed to improve patient experience by engaging all staff members. A patient experience advisor will work with the ED team to address priorities identified by patients in the National Patient Experience Survey.	Q4 2019
		2. We are focusing on training on communication between staff and patient, and staff and staff. Utilising ISBAR approach.	2019-2020
		3. There is an ongoing focus on reducing the number of patients kept in the Emergency Department waiting for beds.	2020
		4. Comfort packs are available for patients in Emergency Department, we need ensure these are given to all patients with guidance to ask questions if they need more clarity on the condition or plan of care.	EMBEDDED
<b>CARE ON THE WARD</b> 	<b>NUTRITION:</b> Improve hospital food and availability of meals outside of normal meal times. Availability of staff when patients want to talk.	1. Nutrition and hydration committee to put QI project together to address the finding on the wards relating to meals, looking at replacement meals and support with feeding. - Incorporating all elements of the protected meal times on all wards. - The hospital patient experience advisory committee are also progressing with a policy for family presence/visiting policy which will promote positive family involvement, with the expectation of better patient outcomes and support in personal care including nutrition and hydration support.	2020
	<b>COMMUNICATION:</b> Availability of staff when patients want to talk.	1. The hospital management team with quality and patient safety manager is promoting the approach of "it is all of our roles to promote positive communication with patients" incorporating promotional posters and staff awareness. 2. <b>Mandatory</b> training programme has been rolled out through MUH to help staff engage with patient at all contact levels for all grades of staff. 3. Compliance with uniform policy of wearing name badges so patient know who they are speaking to or in the company of.	Q1 2020
<b>EXAMINATION DIAGNOSIS &amp; TREATMENT</b> 	<b>COMMUNICATION:</b> Making the time with the patient effective in relation to explanation of condition treatment and results.	1. MUH has mandatory patient engagement training program rolled out through the hospital which will promote positive patient experience. 2. Targeted training on clinical handover is being run with medical and nursing staff led by the academic officer. This work is incorporating meaningful patient engagement utilising simulation and the use of ISBAR. 3. A patient and family experience advisory committee now feeds into the hospital management team and are tasked with all of the above improvements.	Q3 2019  EMBEDDED
<b>DISCHARGE OR TRANSFER</b> 	<b>COMMUNICATION:</b> Patient need to be better equipped to self-care when discharged. Know there medication know there condition and who to contact if they need help.  Patient need to start getting this information from when they are admitted so they are part of the plan.	<b>PRIORITY PROJECT</b> 1. MUH Patients Information Booklet has been updated in 2019 to incorporate information to help prepare patients for their discharge by better engagement during their patient stay.	Q4 2019
		<b>PRIORITY PROJECT</b> 2. The 'Know Your Medication' information booklets for patients has been designed and implemented this will be audited as part of the patient nursing metric in 2020.	2020
		3. Quality improvement project to be set for Q4 2019 on reduction of avoidable readmissions to help improve the process of discharge for patients. Led by nursing discharge manager.	Q4
		4. Business case prepared for senior occupational therapist for the main medical wards to assist in patient discharge planning focusing patient centered approach to planning for care at home.	ONGOING
		5. Clinical nurse specialist are developing condition based patient information leaflets which will help with empowering patient with self-care this will be promoted in 2019-2020.	ONGOING



WHAT PATIENTS SAID TO US

LISTENING RESPONDING & IMPROVING



<b>PATIENT EXPERIENCE</b>	<b>DIGNITY &amp; RESPECT AND PRIVACY:</b> Improving and sustaining patient experience.	1. Hospital management will continue to support and implement hospital-wide programmes which will enhance meaningful patient engagement, – The support for the role and function of patient experience advisors for committees and policy.	<b>EMBEDDED</b>
		2. Mandatory training on meaningful patient engagement rolling out through MUH.	
		3. Promote the important of wearing name badges with name and role identified.	
		4. Continue to focus our QI on feedback from patients where areas of improvement are identified and areas of good practice can be shared.	
		5. Spread the values identified in the staff recognition awards to all departments and all patients.	