


WHAT PATIENTS SAID TO US

LISTENING RESPONDING & IMPROVING



| ADMISSION TO HOSPITAL | WAITING TIMES: Reduce Emergency Department waiting times. | PRIORITY PROJECT | 2019-2020 |
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|  | | 1. Our patient's highlighted long waiting times in the Emergency Department (ED) as a key area for improvement in 2019. As a result, the hospital's management team in Naas General Hospital along with ED staff are working to improve patient experience times so that our patients receive care in a timely manner. | 2019-2020 |
| | | 2. In response to feedback from the survey, a team of staff from different specialities called 'the frailty intervention team' will prioritise the care of older frail patients who come to our ED. This team links frail patients to services in the community which may support the patient and reduce the need for ED attendances, decrease length of stay in hospital and improve patient care. | 2019-2020 |
| | | 3. Our staff in the ED have a system to make sure that a patient who becomes suddenly unwell is reviewed quickly by a doctor. This is called the National Early Warning Score. | EMBEDDED |
| | | 4. Our staff in the ED also examine their ways of working to identify things that can be improved which will have an impact on patients. This is called the 'Microsystems Quality Improvement Collaborative'. | EMBEDDED |
| | | 5. Our patient's reported the need for improved communication when in the waiting area and the hospital has taken this on board and is planning on addressing this by examining modes of communication and the type of information that will address this. | 2019-2020 |
| | | 6. In order to improve the environment in the waiting area, Naas General Hospital is planning to review facilities such as seating, food and drink and information. | 2019-2020 |
| | | 7. Due to feedback from our patients, the hospital has started a virtual fracture clinic. This is a clinic whereby patients who have attended ED with suspected fractures have their case clinically reviewed by a specialist team. The Orthopaedic Consultant will review the patient's x-rays and will decide on what treatment the patient needs. The Nurse Specialist or Physiotherapist will then contact the patient and advise them of the doctors treatment plan and make arrangements for this care to occur. | EMBEDDED |
| CARE ON THE WARD | PATIENT EXPERIENCE: Improve & sustain the in-patient experience while on the ward. | 1. Our patients highlighted some areas of improvement in 2019 for care received while on the ward in Naas General Hospital. The hospital, noting this feedback, will continue to work to make these improvements through programs such as the productive ward, dementia project, falls collaborative and pressure ulcer to zero. 2. One program that the hospital supports is called the Caring Behaviours Assurance System (CBAS). This involves a team of staff from different specialities that work in a ward or department coming together to brainstorm ways of improving their ways of working and putting these ideas into action. The team brings together nurses, care assistants, doctors, physiotherapists, pharmacists, health and social care professionals. These teams use patient feedback to identify which areas require improvement. Improvement plans can include changing the environment eg updating posters, changing the flooring, introducing noticeboards. | EMBEDDED |
| | NUTRITION: Improve hospital food and nutrition. | 1. While our patients provided very positive feedback about the food and catering they received while on the ward in Naas General Hospital, the hospital continues to build on this. Our clinical dieticians in conjunction with catering, nursing and speech and language therapists have developed a Nutrition Plan. This involves bringing in all the elements of the national policy relating to Food, Nutrition and Hydration. One of the things we do is that we ensure that patients can have their meals in a quiet environment, undisturbed by medical staff or visitors. We call this 'Mealtimes Matter'. We also provide specialist therapeutic diets to patients who need very specific types of nutrition and our dietetics department make sure that these diets are suitable and agreeable to the patient. 2. Every patient is screened within 24-hours of being admitted to a ward to ensure their individual nutritional needs. | Q4 2019-2020 2019-2020 |



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| <p>CARE ON THE WARD</p> | <p>PATIENT EXPERIENCE: Improve & sustain the in-patient experience while on the ward.</p> | <p>4. One of the specific aims of our Dietetics Department is to increase education to patients on parental nutrition. This is a highly specialist form of nutrition, given through the veins. We are acurrently developing a patient information leaflet on this topic.</p> | <p>Q4 2019-2020</p> |
| <p>EXAMINATION DIAGNOSIS & TREATMENT</p> | <p>COMMUNICATION: Improve the availability and time offered to patients to discuss their care & treatment with healthcare staff.</p> | <p>PRIORITY PROJECT</p> | <p>EMBEDDED</p> |
| | | <p>1. Naas General Hospital management notes that our patients highlighted the need to improve how our staff communicate with service users. Therefore, we will continue a communication programme for staff which involves multiple elements all described below. Our aim is to meet the information needs of patients in a way they can easily understand.</p> | <p>EMBEDDED</p> |
| | | <p>2. The '#Hello, my name is...' campaign which is a person-centred approach to interactions between staff and service-users continues to be promoted across the hospital. This campaign encourages all staff to open their conversations with service-users and their families by saying "Hello, my name is..."</p> | <p>EMBEDDED</p> |
| | | <p>3. The Hospital is committed to rolling out the "Open Disclosure" program. This program is about how healthcare professionals communicate to service-users when things go wrong.</p> | <p>2020</p> |
| | | <p>4. The Hospital plans to using the communication tool called ISBAR which is recommended in the National Clinical Handover Guidelines. This ensures that all relevant clinical information is passed over from healthcare staff when a service-users care is being transferred from one ward to another or one clinical team to another.</p> | <p>EMBEDDED</p> |
| | | <p>5. The hospital plans to participate in the National Healthcare Communication Programme. This is a four-part training program, starting with the basics about communication.</p> | <p>2020</p> |
| | | <p>6. Key members of staff will be trained on the 'Making Every Contact Count' Training. The hospital plans to use this in select areas. The aim of this training is that it will encourage health promotion activities.</p> | <p>2020</p> |
| | | <p>7. The hospital has created a specific communication tool called 'Ask Me 3' to encourage patients to ask their doctors questions during their Outpatient's Department appointments. This initiative will be expanded beyond the OPD as a mechanism for patients to initiate a conversation with their healthcare professional in order to obtain the information they require.</p> | <p>2020</p> |
| <p>8. The Physiotherapy Department has introduced an "Electronic Appointment System". This will improve the number of patients that can be seen by Physiotherapy by increasing capacity within the appointment system. It will also improve the management of waiting lists by issuing appointment reminders via text messaging and make it easier for patient's to reschedule appointments.</p> | <p>Q4 2019-2020</p> | | |
| <p>DISCHARGE OR TRANSFER</p> | <p>COMMUNICATION: Provide more information to patients at discharge.</p> | <p>PRIORITY PROJECT</p> | <p>2019-2020</p> |
| <p>1. Naas General Hospital notes the key feedback from patients in 2019 in relation to communication at discharge. While the hospital had introduced a patient information leaflet earlier this year, this will be further promoted to ensure that all patients are offered this during the discharge process. This leaflet provides information addressing patient's needs on discharge.</p> | <p>EMBEDDED</p> | | |
| <p>2. The Hospital will continue to ensure that a pharmacist reviews medication at discharge to make sure that any changes are communicated to the next care provider.</p> | <p>EMBEDDED</p> | | |
| <p>3. The hospital will engage with promoting further the 'Know, Check, Ask' campaign. This is a national campaign which facilitates patients to keep an accurate copy of their medication list. These leaflets will also be given to patient's at discharge.</p> | <p>2019-2020</p> | | |
| <p>4. The Medical Social Work Department in the Hospital has created leaflets for patients outlining support within the community e.g. Contact numbers for addiction services and for people experiencing domestic violence.</p> | <p>EMBEDDED</p> | | |



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| PATIENT EXPERIENCE | DIGNITY & RESPECT AND PRIVACY: Improving and sustaining patient experience. | LISTENING RESPONDING & IMPROVING | TIME-SCALE |
|--------------------|---|---|--------------|
| | | 1. Our patients highlighted a number of areas requiring improvement in the 2019 survey and Naas General Hospital is committed to improving overall experience. | EMBEDDED |
| | | 2. Naas General Hospital will continue to develop the role of our Volunteers, who have been engaged in various elements of hospital activities over the past number of years. Volunteers and their role will continue to be supported throughout the hospital. | |
| | | 3. Health Promotion Officer to work with Hospital Management to promote staff wellbeing. | |
| | | 4. Initiative to reduce waiting lists and waiting times for gastroenterology outpatients and to reduce the number of patients with IBS referred for endoscopic investigations. Development of a multidisciplinary integrated care pathway for IBS patients which is in keeping with best practice guidelines, eliminates the need for unnecessary invasive investigations, and provides a standard of care for patients which has been proven to increase patient wellbeing and satisfaction. | 2019-2020 |
| | | 5. Stroke/support self-management group. Supporting self-management is in keeping with the standards for person centered care and support, and better health and wellbeing laid out in the National Standards for Safer Better Healthcare. | 2019-2020 |
| | | 6. Following a successful pilot project, rollout of Hospital Music Project to promote awareness of the concept of music & health amongst staff and patients. | Q4 2019-2020 |
| | | 7. Education classes with multidisciplinary input e.g. the Bone Health Class includes education regarding diet, exercise, medication management and falls prevention. It is open to all target patients. Health DIY class; instill ways of patients making small sustainable changes to their diet and daily activity levels to primarily help OA joints. | 2019-2020 |
| | | 8. Two staff are currently participating in the training programme in Patient Safety Complaints Advocacy and the new Independent Patient Advocacy Service will be actively promoted amongst patients. | 2019-2020 |
| | | 9. Training in complaints handling is regularly provided for staff. | 2019-2020 |