

WHAT PATIENTS SAID TO US

LISTENING RESPONDING & IMPROVING



**ADMISSION TO HOSPITAL**



**PATIENT EXPERIENCE:**  
Improve patient experience of dignity & respect and privacy.

**PRIORITY PROJECT**

2019-2020

1. We will continue to work together to improve patient's experience of Emergency Department (ED). This work will focus on staff training and support, initially in the Emergency Department, and then throughout the various departments and wards in the hospital. This work will be implemented by December 2020. What this means for patients is that we will endeavor to treat every patient with dignity and respect, by improving patient privacy and how we communicate with patients during their hospital stay.

2019-2020

2. New ward areas have been developed to reduce patient waiting times. These include the Medical Assessment Unit which is now open 24/7; the Surgical Assessment Unity which increased to 8 beds; a new Surgical Short Stay Unit with 12 beds was opened.

3. End-of-life care area has been developed and is in use for bereaved families in the Emergency Department.

3. The 'Values In Action' programme continues to be implemented and we will continue to promote these values.

4. A quality improvement initiative is underway to improve the care experience of patients with dementia in the Emergency Department, including a member of the Patient Council.

5. Focus groups are planned to explore further patient experience in ED and opportunities to improve this.

**COMMUNICATION:**  
Improve communication between patients and staff.

1. Communication training programmes for staff, including customer service training continues to be implemented and is available to all staff.

2019-2020

2. Communication screens and leaflet areas are now in place throughout the Emergency Department.

3. Staff in the Emergency Department are participating in the National Healthcare Communication Programme Module 1.

**PATIENT SUPPORT:**  
Continue to enhance better patient support in ED.

1. PALS (Patient Advocacy & Liaison Services) Manager and volunteers are working in the Emergency Department, playing an important role to improve patient experience.

2019-2020

2. There is ongoing recruitment of volunteers in ED with a focus on patient support and information.

3. Information leaflets explaining the processes for triage in ED are available for patients.

4. Comfort packs with hygiene products and sleep masks are available for patients who require them; pillows and blankets also all monitored to ensure every patient who wishes has them.

5. Admitted patients in ED are provided with a 'Patient Information Booklet' and explained to them.

**WAITING TIMES:**  
Improve wait times for patients in ED and patient flow when admitted to hospital.

1. Several projects underway to help ensure patients are treated by the right staff in a timely way are underway. Pathways for patients to avoid the need for hospital admission have been developed and are being implemented- these include DVT pathway and rapid access to out-patient clinics.

2019-2020

2. The use of 'Red to Green' communication tools between staff is aiming to improve patient experience of care, tests and discharge planning.

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<p><b>CARE ON THE WARD</b></p>	<p><b>NUTRITION:</b> 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.</p>	<ol style="list-style-type: none"> <li>1. Menus have been improved and are personally distributed by catering staff – offer 2 hot choices regardless of nutritional requirements - lunch and supper.</li> <li>2. Allergens and calories for each recipe are available to support informed meal choices.</li> <li>3. Ten different menus are available for patients in each of the 26 wards.</li> <li>4. A new executive chef has commenced workign in our hospital and we are currently improving our menus for patients based on their feedback.</li> <li>5. Patients who miss a meal are provided with a replacement meal. This is in accordance with the 'Missed Meal' and 'Protected Mealtime' policies.</li> <li>6. Menus have been reviewed and made available to patients to help them choose their meals options.</li> <li>7. Meal times have been reviewed and the evening meal has been moved to later time in response to patient requests.</li> <li>8. Extra food is served for late snack and drinks.</li> </ol>	2019-2020
	<p><b>COMMUNICATION:</b> Improve staff wearing name badges and introducing themselves.</p>	<ol style="list-style-type: none"> <li>1. Name badges have been provided for all staff.</li> <li>2. All staff are encouraged to introduce themselves to patients – '#Hello, my name is...' and their job.</li> <li>3. Patient Council members will support the ongoing audit and implementation of this.</li> </ol>	2019-2020
<p><b>EXAMINATION DIAGNOSIS &amp; TREATMENT</b></p>	<p><b>COMMUNICATION:</b> Promoting improved communication skills and effective ward round communication with healthcare professionals and patients.</p>	<ol style="list-style-type: none"> <li>1. The new staff induction training includes a communication skills workshop.</li> <li>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.</li> <li>3. Whiteboards for improving communication among staff are on each ward.</li> <li>4. Electronic screens in key circulation points are in place with key information for patients.</li> <li>5. 'Red to Green'</li> <li>6. WHO 'Know, Check, Ask' video playing on e-screens. Posters displayed in clinical rooms for staff and public areas for patients across the group.</li> </ol>	2019-2020
<p><b>DISCHARGE OR TRANSFER</b></p>	<p><b>COMMUNICATION:</b> Improving access and delivery of written information about going home from hospital for patients. Improve information: – 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.</p>	<ol style="list-style-type: none"> <li>1. We are working on an improved plan for or discharge prescription, which is a section that lists changes to medication etc. which may be beneficial for patients.</li> <li>2. A 'Patient Information Booklet' for admitted patients with relevant information about their hospital visit and information on how to manage on discharge has been developed and implemented.</li> <li>3. Patients continue to be given clear information about the danger signs to watch out for after discharge and who to contact if something goes wrong.</li> <li>4. Community support programmes for patients to help them manage their health or chronic disease, are promoted. For example, the 'Cancer Survive and Thrive' programme.</li> </ol>	EMBEDDED

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<p><b>DISCHARGE OR TRANSFER</b></p>	<p><b>COMMUNICATION:</b> Demonstrating to patients that we are listening, responding and improving.</p>	<p><b>PRIORITY PROJECT</b></p> <p>1. We will demonstrate our improvement plans to our patients by having 'You Said, We Are Doing' posters throughout all public areas and wards by December 2019. What this means for patients is that the actions taken by staff in response to their feedback will be clearly communicated throughout the hospital.</p>	2019-2020
		<p><b>PRIORITY PROJECT</b></p> <p>2. We will continue and build on briefing sessions for all staff at clinical level to raise awareness of what our patients have said and how we are responding. What this means for patients is that staff will be actively involved in how the feedback results relate directly to their care experience, and so aim to improve this.</p>	2019-2020
<p><b>PATIENT EXPERIENCE</b></p>	<p><b>DIGNITY &amp; RESPECT AND PRIVACY:</b> Continuing to build on patient feedback and improve patient experience.</p>	<p>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'. Mindfulness and stress management programmes for staff, are also underway, part of the 'Healthy Ireland' initiatives.</p>	2019-2020
		<p>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 continue to be implemented.</p>	
		<p>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.</p>	
		<p>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.</p>	
		<p>5. We continue to build on the role of the Patient Council and include the voice of the patient in all our work.</p>	
		<p>6. A Clinical Ethics committee has been launched with its focus on supporting clinicians, families and staff in ethically challenging cases.</p>	
		<p>7. The dignity and respect of patients to ensure they have trust and confidence is central to all our daily work and improvement efforts.</p>	
		<p>8. The CEO of UL Hospitals is fully committed to implementing and supporting this plan.</p>	