

>  **ADMISSION TO HOSPITAL**

AREA FOR IMPROVEMENT	SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
<p>Privacy, Dignity &amp; Respect in ED.</p>	<ul style="list-style-type: none"> <li>When patients are being examined and assessed in our Emergency Department that they will be afforded privacy within a dedicated space in each zone.</li> <li>All patients dignity, privacy and autonomy are respected and promoted while attending the ED.</li> </ul>	<ul style="list-style-type: none"> <li>Appoint dedicated PALS resources for the Emergency Department.</li> <li>PALS Managers and the Emergency Department staff to meet on a monthly basis to discuss patient feedback form engagements, look at complaints from patients some of which are related to dignity and privacy.</li> <li>PALS staff to share the results of the NIES survey with all staff in ED and taking their feedback on improvements through the ED Forum to enhance staff awareness.</li> <li>To establish the elderly assessment unit to enable elderly patients to be moved to a separate assessment area from ED on presentation if medically suitable.</li> <li>To recruit the additional NCHD and Nurses for ED to enable the processing of patients more quickly and reduce overcrowding.</li> <li>COVID-19 pathways, redirecting to MAU/SAU, new patient flow &amp; dedicated discharge teams to specifically focus on reducing the number of ED trolleys to optimise the availability of single cubicles for the vulnerable/elderly patients attending ED.</li> <li>Purchase additional portable screens to facilitate privacy when being examined.</li> <li>To look at the provision of a dedicated assessment space for each zone in ED which can be used to facilitate privacy while being examined and assessed by a Doctor or nurse.</li> <li>Mandatory NHCP communication training for all staff, focus on making the first connection with our patients.</li> <li>Implementation of 'Hello my name is' initiative within ED. All staff to identify themselves by name and role.</li> <li>Named nurse to look after you during your time in ED.</li> <li>Nurse management to ensure that additional hydration rounds take place and that all admitted patients receive a hot meal.</li> <li>PALS resources to share patient stories, compliments and complaints with ED staff.</li> <li>To ensure that ED patients who provide feedback through YSYS receive a prompt response from a member of the PALS ED team.</li> </ul>	<ul style="list-style-type: none"> <li>Established forum with open communication that patient concerns can be raised.</li> <li>Discussion and solutions forum.</li> <li>Staff fully briefed on the NIES survey and aware of patient concerns.</li> <li>To support the privacy and dignity for patients while in the ED.</li> </ul>	<p>Q2 2023</p>



CARE ON THE WARD

AREA FOR IMPROVEMENT	SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
Introduction from Treating Staff.	<ul style="list-style-type: none"> <li>To improve communication between staff and patients.</li> </ul>	<ul style="list-style-type: none"> <li>'Hello my name is' campaign to continue and ensure that all staff are provided with name badges.</li> <li>Support and engagement with the ULHG Patient's Council with their telephone audit of 'Hello my name is' survey.</li> <li>Internal communications of the 'Hello my name is' campaign through Team Talk and E screens.</li> <li>Local patient steering group to brief all staff on the site on the findings from the NIES 2022 (CD forum, grand rounds, CNM forum, AHPs).</li> </ul>	<ul style="list-style-type: none"> <li>Number of staff are wearing their name badges.</li> <li>Staff routinely introduce themselves to patients by name and by role.</li> </ul>	Q2 2023



DISCHARGE OR TRANSFER

AREA FOR IMPROVEMENT	SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
Given info about what to do or not do after discharge, Danger Signals after discharge, Medication Side Effects.	<ul style="list-style-type: none"> <li>To ensure that staff provide written/ printed information to patients on discharge.</li> <li>To ensure that staff provided patients with sufficient information about their medication and any danger signals to look out for on discharge.</li> </ul>	<ul style="list-style-type: none"> <li>Local patient steering group to brief all staff on the site on the findings from the NIES 2022 (CD forum, grand rounds, CNM forum, AHPs').</li> <li>To organise events around the promotion of medication safety in line with the World Patient Safety Day.</li> <li>Local patient steering group to establish what leaflets are available to support patients on discharge.</li> <li>Staff are encouraged to go through any information leaflets given to patients to support the recuperation period at home. Clinicians, nursing or Allied Health care professionals involved in the care/discharge of the patient are responsible. This initiative will be audited by the PALS manager and will involve conducting a telephone survey of a random selection of patients discharged per month. The findings will be presented and actioned at the Patient Experience Committee.</li> <li>'The Now, the Next, the What to expect' initiative gives specific directions on what to inform our patients on discharge home. Clinicians, nursing or Allied Health care professionals involved in the care of the patient and discharge of the patient are responsible. This initiative will be audited by the PALS manager and will involve conducting a telephone survey of a random selection of patients discharged per month. The findings will be presented and actioned at the Patient Experience Committee.</li> </ul> <p><i>(continued on next page)</i></p>	<ul style="list-style-type: none"> <li>Patients will be educated on their condition and potential complications to be mindful of following discharge, specific side effects of their medications.</li> <li>Patients will be provided with written documentation.</li> </ul>	Q2 2023



DISCHARGE OR TRANSFER

AREA FOR IMPROVEMENT	SPECIFIC QIP	QIP ACTIONS (CONTINUED)	WHAT WILL IMPROVE?	TIMELINE
<p>Given info about what to do or not do after discharge, Danger Signals after discharge, Medication Side Effects.</p>	<ul style="list-style-type: none"> <li>To ensure that staff provide written/ printed information to patients on discharge.</li> <li>To ensure that staff provided patients with sufficient information about their medication and any danger signals to look out for on discharge.</li> </ul>	<ul style="list-style-type: none"> <li>Initiatives and quality improvements as a result of the survey responses progressed through a dedicated Patient Experience Committee with meaningful patient participation/representation.</li> <li>Promotion of 'Know, Check, Ask' initiative. on medication safety particularly on discharge. All healthcare professionals involved in discharge around medications would be responsible for utilising the 'Know, Check, Ask' initiative. Promotion would be through internal and external communication processes. This initiative will be audited by the PALS manager and will involve conducting a telephone survey of a random selection of patients discharged per month. The findings will be presented and actioned at the Patient Experience Committee.</li> <li>'My medicines' list it is planned that this will be attached to all OPD clinic and scheduled care appointment letters. Looking to print on the back of the appointment letter.</li> </ul>	<ul style="list-style-type: none"> <li>Patients will be educated on their condition and potential complications to be mindful of following discharge, specific side effects of their medications.</li> <li>Patients will be provided with written documentation.</li> </ul>	<p>Q2 2023</p>