



PATIENT FEEDBACK

SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
We have established a system for service user to provide feedback in a questionnaire. This feedback is analysed and presented on a monthly basis to both the hospital management team and at departmental level. The number of responses have decreased over the past year. We aim to improve the availability of feedback forms to patients and the response rate.	<ul style="list-style-type: none"> We will source Perspex boxes to place beside feedback return boxes. These will be placed in high visibility areas beside ward entrance/exit. These will contain a supply of feedback forms and allow all patients/family members to have access to them. We will discuss the survey with the service managers at Quality and Patient Safety committee and ask them to encourage their staff to distribute the forms to all admitted patients. We will raise awareness of the survey with our Patient and Family Experience Group and ask them to encourage staff and patients to engage with the survey. 	<ul style="list-style-type: none"> This will increase accessibility of questionnaire to service users and families. Increase the response rate to the questionnaire. 	Q1 2025
We have developed a bedside Patient Safety poster with QR codes and information on how to make a complaint or provide feedback.	<ul style="list-style-type: none"> We will carry out an audit of all bed spaces to ensure the poster is visible and accessible to all service users and families. 	<ul style="list-style-type: none"> All patients will have information at the bedside on how to submit feedback and/or make a complaint. 	Q1 2025
Increased staff awareness and participation in service user feedback.	<ul style="list-style-type: none"> We will run an information session for both clinical and non-clinical staff to empower them to support patient in providing service user feedback. We will educate clinical and non-clinical staff on PALS and the complaints management process. We will include information on PALS and the complaints process in new staff induction booklet. 	<ul style="list-style-type: none"> Increased staff awareness of complaint management process. Increase staff engagement with service user feedback. 	Q3 2025
Involve patient partners in review of feedback and complaints.	<ul style="list-style-type: none"> Present the results of feedback surveys and profile of complaints to Patient and Family Experience Group on a quarterly basis. Discuss the findings with them, identify areas of possible improvements and collaborate in developing a Quality Improvement Plan. 	<ul style="list-style-type: none"> Increase Patient engagement and partnership in service user feedback. 	Q4 2025



PATIENTS WITH A DISABILITY OR LONG-TERM CONDITION

SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
Improve compliance with Hello My Name Is...	<ul style="list-style-type: none"> Increase staff awareness of the Hello My Name Is... campaign and host a relaunch. Discuss with them the importance of this introduction in enabling and empowering patients with disabilities to communicate with staff. Discuss this initiative at NCHD induction. 	<ul style="list-style-type: none"> It will support patients in identifying staff members who are providing care. This will help patients with disabilities in their communication with staff. 	Q2 2025
Promote use of HSE Health Passport.	<ul style="list-style-type: none"> Relaunch of national HSE Health Passport for patients with intellectual disability. Discuss the Health Passport with service managers at Quality and Patient Safety Committee and request that they encourage their staff to promote use of the Health Passport. Health Passport information will be displayed on information screens in Emergency Department. 	<ul style="list-style-type: none"> It will support patients with intellectual disability to identify their requirements to staff. 	Q2 2025



PATIENTS WITH A DISABILITY OR LONG-TERM CONDITION *(Continued)*

SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
Promote use of John's Campaign.	<ul style="list-style-type: none"> • Patient information booklet is available to all patients in hard copy or online. Information on John's Campaign will be included at next revision of booklet in 2025. 	<ul style="list-style-type: none"> • It will improve patient awareness of John's Campaign. It will empower patients with disability to know that their carer can remain with them outside of visiting hours. 	Q4 2025
Improve patient engagement with those with disabilities.	<ul style="list-style-type: none"> • Recruit a patient partner with disability (or a carer) for the Patient and Family Experience Group. • Collaborate with patient partners who are parents to children with additional needs to develop improvements in patient experience for these children. 	<ul style="list-style-type: none"> • Patients with disabilities/long-term conditions will be represented on our Patient and Family Experience Group. 	Q4 2025



OTHER

SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
Improve compliance with Hello My Name Is.	<ul style="list-style-type: none"> • Increase staff awareness of the Hello My Name Is... campaign and host a relaunch of the initiative. • Discuss this initiative at NCHD induction and include in induction booklet for all new staff. 	<ul style="list-style-type: none"> • It will support patients in identifying staff members who are providing care. This will help all patients in their communication with staff. 	Q1 2025
Promote use of John's Campaign.	<ul style="list-style-type: none"> • Include information on John's Campaign in Patient Information Booklet at next revision in 2025. 	<ul style="list-style-type: none"> • It will improve staff and patient awareness of John's Campaign. It will empower patients and their carers to know they are supported in the hospital environment. 	Q4 2025
Promote the rollout of National Healthcare Communication Programme.	<ul style="list-style-type: none"> • Promote the education sessions on the National Healthcare Communication Programme available locally to increase awareness. • Encourage staff to complete online modules. • Rollout of Breaking Bad News training for all staff. 	<ul style="list-style-type: none"> • This will empower staff to promote good communication with service users and listen to their worries and fears with compassion. 	Q4 2025
Promote awareness of pastoral support services.	<ul style="list-style-type: none"> • Design and display a poster highlighting the pastoral supports available to patients of all religions and none. 	<ul style="list-style-type: none"> • This will inform patients of the various pastoral supports available. 	Q4 2025