



PATIENT FEEDBACK

SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
<ul style="list-style-type: none"> To improve information for patients, families, visitors so they know how to give feedback (including verbal feedback) or make a complaint, if they wish to do so. To make sure that all information is reader/dementia friendly & available in multiple languages. Ensure all wards have the necessary resources available to provide the information to all patient's. Utilise TV screens throughout the hospital, twitter and a pull-up banner at main reception to improve audio and visual information for patients, families, and visitors to know how to give feedback (including verbal feedback) or make a complaint, if they wish to do so. 	<ul style="list-style-type: none"> The findings of the patient experience survey will be shared with all Healthcare workers (at Grand Rounds, Safety Pause) in relation to the importance of patients knowing how or where to give feedback or make a complaint and that they feel empowered or comfortable to do so. PALS to carry out training on the educational materials available for patients to know how or where to give feedback (including how and where to log verbal feedback and who to report it to) or make a complaint. Develop a complaint & feedback information flow chart with the patient experience committee - to make it easier for all staff especially new staff to know the complaints/feedback process and how to provide information to their patients. PALS to improve written or printed information that patients receive (revise the comment cards and the PALS posters). Have available in multiple languages and engage with patients, families and visitors on the redesign of the comment cards and the PALS posters. Utilise TV screens in the hospital to show video information for patients on how or where to give feedback (including verbal feedback) or make a complaint. Make use of Twitter to provide information on how and where to give feedback or make a complaint on a regular basis. Posters and 'Your Service Your Say', 'PALS' leaflet – displayed throughout the hospital. Pull-up banner – Guidance for patient's visitors, families on how or where to give feedback or make a complaint. Make sure its reader friendly. It will be located at the main hospital reception. 	<ul style="list-style-type: none"> To improve patient information on how or where to give feedback or make a complaint. Focus on ensuring that patients have been given their education pack with the 'Your Service Your Say', comment card and 'PALS' leaflet. Ensure staff are educating patients on the information provided in the education packs. Ensure that all wards have the necessary resources available to them to provide the information to all patients. 	<p>January 2025</p>



PATIENTS WITH A DISABILITY OR LONG-TERM CONDITION

SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
<ul style="list-style-type: none"> The findings of the patient experience survey will be shared with all staff in relation to: Food/nutrition/person centred including patients with dementia or special dietary requirements. New menu for patients for dietary needs and religious – vegan/vegetarian etc. and new snacks menu. Focus on having food packs available for patients outside of mealtimes or if patients who would like something to eat at 11pm. Make it easier for patients with communication barriers to expressive exactly what they want with our new 'Picture Menu' and our new Patient Passport 'Getting to know me better'. 	<ul style="list-style-type: none"> The findings of the patient experience survey will be shared with all Healthcare workers (at Grand Rounds, Safety Pause). Food pack – for outside of mealtimes or if patients would like something to eat at 11pm. More fruit available on the wards. New 'Picture Menu' – available in multi-languages, dementia friendly. Education for Aramark staff on different dietary needs/requirements of patients. Utilise the new Patient Passport 'Getting to know me better' – patients food preferences or dietary requirements. New menu's for dietary needs and religious – vegan/vegetarian etc., i.e. stating if halal – Focus group with patients with dietary needs to collaborate with for the new menu. Times we ask patients what they want for each meal – to trial on St. Francis ward. New snack menus – reader/dementia friendly available in multiple languages given to all patients. 	<ul style="list-style-type: none"> Ensure that staff utilise the Patient Passport 'Getting to know me better' and also the picture menus to ensure we understand the patients preferences. To make it easier for patients to choose what they want to eat – picture menus and the patient passport. To ensure staff have the knowledge to communicate effectively to patients dietary needs or requirements. To ensure that patients are getting hospital food outside of set meal times. Ensure we evaluate and empower patients with for dietary needs by holding focus groups. 	<p>March 2025</p>





OTHER

SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
<ul style="list-style-type: none"> • The findings of the survey will be shared with all staff in relation to: <ul style="list-style-type: none"> (a) the importance of patient centred-care, specifically engaging & empowering patient (b) quality patient education (c) the impact of effective communication between patients & staff, especially for patients with Mental Health, Psychological or emotional conditions. • Provide staff with the resources to communicate with patients with communication barriers • Consent information. • Patient Education – Education pack for each patient which can be customised for patient’s particular education needs i.e. medical or surgical patient. 	<ul style="list-style-type: none"> • Dementia Information board on the wards – provides easy to read information for patients & families. Information holder for the new Patient Passport ‘Getting to know me better’ – document will aid staff to understand the way a patient communicates best. • Update the inpatient information leaflet on: <ol style="list-style-type: none"> 1. Who families can contact to set-up a meeting with the medical/surgical team. (Monitored by Clinical Nurse Managers). 2. Patients to choose a family spokesperson who can liaise with hospital staff & update the rest of the family. • ‘Your Health, Your Voice’ patient information leaflet to empower patients to elevate their voice & be part of the care plan. • Education Pack for all patients – packs contain set information & further information can be added on their condition, danger signals, managing your condition after their discharge & medication education etc. All documents are placed in a wipe able A4 folder. • New procedure-specific patient information leaflet for consent being trialled at present (which are available in multi-language). • Simulation education with the doctors and nurses — communication skills, patient education and medication safety. Person centred including patients with dementia or communication barriers • Make the National Communication Modules (1. Making conversations easier, 2. Skills for telephone video conversations) & customer service training part of the mandatory training – monitored by HR. • To develop patient & staff information leaflets – to be worked upon with feedback from patients and our patient representatives. 	<ul style="list-style-type: none"> • Ensure that staff utilise the new Patient Passport ‘Getting to know me better’ to ensure we understand the patients preferences. • Encourage patients to use the Your Health, Your voice leaflet to empower them to elevate the voice & be part of the care plan & to say if they have more questions, need more information or if they have any concerns or worries. • New Discharge booklet has 3 pages for patients to write questions for the doctors or nurses. • Make it easier for patients & families to speak with nursing, medical or surgical team. • To ensure staff have the available tools & skills to communicate effectively to patients & their families. 	<p>March 2025</p>