



**PATIENT FEEDBACK**

SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
Opportunity for patients and or family to speak with a Doctor :Review current process that is in place to support patients and or family members to speak with a Doctor whilst taking into consideration the work schedule of clinicians.	<ul style="list-style-type: none"> <li>Ensure that all staff are aware of the process.</li> </ul>	<ul style="list-style-type: none"> <li>Improved experience for patients in relation to engaging with Doctors.</li> </ul>	Q1 2025
	<ul style="list-style-type: none"> <li>Inform patients and or family members as indicated of the process.</li> </ul>	<ul style="list-style-type: none"> <li>Reduction of complaints to the hospital on this element of the patient journey.</li> </ul>	Q1 2025
Access to a member of hospital to discuss worries/ fears: Review the current status in clinical areas which influence the ability of staff to avail of opportunities to have private discussions with patients.	<ul style="list-style-type: none"> <li>Develop a hospital plan to roll out the National Healthcare Communication Programme to support staff engage in effective communication with patients and their families.</li> </ul>	<ul style="list-style-type: none"> <li>Improvement in patient experience in respect of communication with hospital staff.</li> <li>Reduction of complaints received which would come under communication processes.</li> </ul>	Q2 2025
	<ul style="list-style-type: none"> <li>Develop a Patient Advice and Liaison Service at the hospital within the QPS department with the recruitment of a PALS Officer which will ensure that the patient voice is heard directly or through a nominated representative.</li> </ul>	<ul style="list-style-type: none"> <li>Improve patient engagement with the hospital and healthcare staff with an increased level of service user satisfaction.</li> </ul>	Q3 2025



**OTHER (ACCESS TO FOOD OUTSIDE OF SET MEAL TIMES)**

SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
Promote the Mealtimes Matter initiative across the hospital.	<ul style="list-style-type: none"> <li>Ensure all staff implement the Mealtimes Matter principles in so far as is possible to prevent a patient missing a scheduled meal.</li> </ul>	<ul style="list-style-type: none"> <li>Patients experience in accessing food outside of set meal times.</li> </ul>	Q1 2025
	<ul style="list-style-type: none"> <li>In the event that a patient misses the scheduled meal, ward staff can seek an alternative option from the main kitchen.</li> </ul>		Q1 2025
	<ul style="list-style-type: none"> <li>Of note the current cooking process at the hospital is Cook &amp; Chill so there is not the facility to reheat these meals. It is anticipated in the medium to long term the hospital will be implementing Cook Fresh system which will improve patient experience.</li> </ul>		2026



**OTHER (DISCHARGE OR TRANSFER)**

SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
<ul style="list-style-type: none"> <li>Review of existing steps in the discharge planning process to improve communication and information sharing between clinical staff and patients in respect to their individual care plans.</li> <li>Review specific requirements of vulnerable groups who may require more time allocated to communication of the process in an appropriate environment and or alternative methods of communication</li> <li>Review the suite of information leaflets and other documentation available to patients and their families on discharge relevant to their care management.</li> <li>Establish a transition lounge which will enhance the discharge process steps to facilitate the completion of any remaining documentation and provide an opportunity for addressing any concerns for the patient and their family.</li> </ul>	<ul style="list-style-type: none"> <li>Provide education to all staff on a holistic discharge process.</li> </ul>	<ul style="list-style-type: none"> <li>Staff will have access to all information required for patients on discharge.</li> </ul>	Q1 2025
	<ul style="list-style-type: none"> <li>Ensure that all information in relation to discharge planning is stored on the HCI Knowledge portal with ease of access for all staff engaged in the discharge process.</li> </ul>	<ul style="list-style-type: none"> <li>Patients will have a more positive experience during their hospital stay while engaging in the discharge process.</li> </ul>	Q1 2025
	<ul style="list-style-type: none"> <li>Identify an area where a transition lounge can be located which will be dependent on access to appropriate staffing.</li> </ul>	<ul style="list-style-type: none"> <li>Patients and or family members will be informed and empowered on discharge to manage their condition receiving all relevant information pertinent to their ongoing care.</li> </ul>	Q1 2025
	<ul style="list-style-type: none"> <li>Identify alternative methods of communication as indicated for those patients who require it e.g. interpreter/sign language.</li> </ul>	<ul style="list-style-type: none"> <li>Improved communication between healthcare providers and service users.</li> </ul>	Q1 2025
	<ul style="list-style-type: none"> <li>Ensure staff have access to alternative methods of communication and are aware of the processes to source same.</li> </ul>	<ul style="list-style-type: none"> <li>Streamlined and improved discharge process.</li> </ul>	Q1 2025
		<ul style="list-style-type: none"> <li>Increased service user satisfaction.</li> </ul>	Q2 2025
		<ul style="list-style-type: none"> <li>Access to a Transition Lounge will facilitate opportunities for staff to ensure patients have completed all steps in the discharge process in a more controlled environment.</li> </ul>	Q2 2025