Fareham and Gosport **MHS**

AGENDA ITEM
PCTB 10/01

Primary Care Trust

BOARD SUMMARY PAPER

Title Community Health Council Survey on Communication between Patients and their Relatives and staff at G.W.M.H. April 2003

Background and Summary

Following discussions between CHC and the PCT a decision was made for a survey to be carried out to assess the perceptions of patients and their relatives on the level of communication between them and the staff at G.W.M.H

The aim of the survey was to ascertain patients and relatives satisfaction levels with regard to communication between them and the staff at the hospital and to identify any areas where it seemed that good practice existed or developments could be made.

C.H.C. conducted a survey across Dryad, Daedalus and Sultan wards within GWMH. The methodology was to make available questionnaires for patients, relatives to complete. Members of the C.H.C. were on site to assist patients either at their bedside or in a quiet area to complete the questionnaires.

In respect of Relatives the 'first' and known 'second' relative were posted questionnaires for them to complete and return to the CHC office in postage-paid addressed envelopes.

Conclusions were based on the number of responses received from respondents in this case representing 43.86% of patients on the wards at the time of the survey, 24.56% of 'first' relatives (next of kin) and 8.77% of 'second' relatives (second next of kin) of those patients.

Satisfaction Levels and Issues Identified

Most respondents were generally satisfied with communication at the hospital and gave complimentary remarks.

Many respondents noted how busy and understaffed the wards appear to be

It would appear that it is not clear to patients/relatives whether they are speaking to a GP or Consultant Lack of clarity about where information regarding reasons for admission were provided i.e. transferring/admission ward

Difficulty in identifying different types of staff groups

Lack of knowledge as to whether or not patients have named nurses and if so which members of staff fulfils that role

Relatives seem to have difficulty in accessing hospital doctors for information.

An action group was set up to review the recommendations and develop an action plan (attached).

Representatives of the group included hospital staff, clinical effectiveness and a non-executive.

Recommendations

- > Attention be given to clarifying the role of 'named nurse'
- Review methods by which relatives can access and communicate with doctors
- Consider developing an agreed information process between admitting and transferring hospitals regarding information given to patients re their health/prognosis/treatment
- Review process in which information is given to patients/carers
- > Ensure all staff identify themselves whenever talking with patients/carers.

Date 2nd January 2004

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C.H.C. Survey on Communications between Patients and their Relatives and staff at the Gosport War Memorial Hospital April 2003

Action Plan

Recommendation	Action	Person Responsible	Time Scale	Evaluation
Attention is given to clarifying the role of 'named nurses'	 Review the name 'named nurse'. Update information on team nursing 	Clinical Managers/TS Clinical Managers	July 2003 July 2003	Reviewed decision taken that Team Nursing is commonly used and each team has a team
-	 'Team' sheet to be included in patient's information sheets. 	TS/AH/JJ	July 2003	leader Completed Completed
	Design and cost new 'on duty' board.	TS/RP	July 2003 Dec. 03	Designed 'We Are Here to Help' board arrived wrong colour awaiting correct colour board to arrive.
Review the methods by which relatives can access and communicate with Doctors	 Design an information sheet for patients wishing to speak to medical team. GWMH Information Booklet to contain information on talking with Doctors. 	JS/JJ/KW	July 2003 July 2003	Discussed with doctors information sheet designed and now in patient's information pack Completed

Recommendation	Action	Person Responsible	Time Scale	Evaluation
Consider developing an agreed information process between	 Joint audit on admission/discharge Admission/discharge criteria with PHT. 	n n	July 2003 March 2004	Reschedule Sept. 03
admitting and transferring hospitals regarding information given to patients about their health condition/treatment and ongoing care.	November 2003 audit requires meeting with medical team to discuss and design tool. Meeting to be arranged	JJ	March 2004	
Review ways in which information may be communicated to patients and their relatives.	Open forum for patients and relatives possibly at L.O.F. Summer Fair	JJ/PW/AH/RP/K W	7 July 2003 End Nov. 03	Consumer views collected during LOF fair, action plan being developed AH completing action plan. Completed Action plan attached
	Review Patients Satisfaction Surveys .	TS/KW	August 2003	In development new template designed. Completed
	Explore ways of sharing outcomes of surveys and good practice with patients and relatives.	TS/JP/AH/JJ/PW	August 2003	Good Practice notice board being developed for main hospital corridor Now in main corridor Completed

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Recommendation		Action Person Responsible	Time Scale	Evaluation
	Action			
Ensure all staff identify themselves whenever talking with patients and relatives.	Remind staff that name badges should be worn Incorporate into Essence of Care development as good practice.	Clinical Managers TS, Clinical Managers	Immediate ly	Completed Users invited onto comparison groups Users now on Essence of Care groups for Continence Nutrition and PEAT Completed
	Review Patient Survey for concerns regarding identification problems.	TS	Sept.2003	Completed
	Design information sheet to identify different uniforms	TS.		information sheet in patient information pack Completed