EXPERIENCE OF CARE

Turning feedback into action



Patient Opinion is an independent, not-for-profit social enterprise

that makes full use of the internet and social media to carry the voices of patients and carers into the heart of health and care services.

We make it quick, easy and safe for patients and carers to give feedback about their care, and for health service providers to respond to and make use of feedback for service improvement.

When a story is published on our website, Patient Opinion automatically notifies relevant health service staff, who may respond online. If the response shows a change has been made, Patient Opinion highlights this.

The result is public online exchanges that show how patients are experiencing services, and how services are listening and acting on feedback to improve care.

Here are some recent examples of feedback, and actions taken from the Patient Opinion website www.patientopinion.org.uk. *James Munro is chief executive of Patient Opinion*

Why can't district nurses give appointment times?

In the past couple of years, both of my parents and my husband have had to use district nursing services, in two different health authorities. While I have nothing but praise for the service itself in that all of the staff are friendly and efficient, it is extremely frustrating that they are unable to give an approximate time for their visits.

Even if the patient is housebound, it causes unnecessary anxiety when they are expecting someone to visit and would like to plan their day.

My mother was even concerned about going to the toilet in case she missed the knock on the door. My husband was advised to have a rest

during the day, but he did not feel relaxed enough to do this as he was waiting for his treatment. I realise that

emergencies happen, and that travelling around is unpredictable due to traffic conditions. But I find it difficult to believe that it is not possible to give a two-hour window: even Tesco can do this.

I manage a home visiting service and am able to give appointment times; I therefore know that it is possible. I think the district nursing service could be improved, and patient satisfaction increased, if it could find a way of giving approximate visit times.

Response...

As promised, I said I would come back to you when we had made a change as a result of your posting at the beginning of this week.

Bromley Healthcare has six community teams and, as of today,

two of those teams are piloting giving their clients an AM or PM appointment to be seen.

Obviously, on occasion, this may need to be changed due to issues that arise with other clients. If the pilot is successful, we will endeavour to roll this out to other teams in the spring.

Once again, I really value your feedback and am really pleased to have been able to make this change.

Kind regards, Amanda Mayo, head of nursing, quality team, Bromley Healthcare

I really can't fault them

I self-harm because of child sexual abuse and always feel guilty using NHS time and resources. But everyone is caring, and the people stitching me back together stop me crying. They take the time to find out why I do it, talk to me and tell me to stop worrying and feeling guilty. They check that I have therapy appointments for child sexual abuse

and self-harming, and I usually leave with a smile. I really can't fault them. Can't improve the excellence – unless they come to me.

Response...

Thank you for your kind words about the A&E department at East Surrey Hospital. It is good to read that you feel cared for, particularly given the circumstance of your attendances, and I will ensure that your comments are shared with the team.

There is no need to feel guilty about

using NHS resources as we are here to provide services to those who need them. That is one of the great things about the work



NURSING STANDARD

22 february 25 :: vol 29 no 26 :: 2015

that we do, and we are very pleased to be able to do so.

Best wishes, Ian Mackenzie, director of information and facilities, Surrey and Sussex Healthcare NHS Trust

Trouble finding a wheelchair

When I drove my elderly father to New Victoria Hospital in Glasgow for his appointment, I needed a wheelchair to get him to the warfarin clinic. But after 35 minutes of searching by

numerous helpful people, no chair was found.

By this time, my father was beginning to suffer from his confinement in the car and wanted to return

home. So I went back to the clinic to inform the nurse that, as we could not get a chair, my father would have to cancel his appointment.

As luck would have it, the nurse said she had a portable machine with her that day, and would bring this out to my father, which she did. So he had his blood test done in the car by the nurse with the portable equipment.

I would like to say a big thank you to this nurse, and the patient helpers and porters who searched for one of the wheelchairs.

Response...

Dear John,

Thank you for taking the time to get in touch with me to highlight the difficulties you had getting a wheelchair for your father. While I am glad that the staff you encountered were helpful, and that your father was still able to get his bloods taken, you are right that it is frustrating and time-consuming to not have easy access to wheelchairs when required.

I have passed your feedback to the facilities manager at the New Victoria to look into this, and I will be back in touch with more information as soon as possible.

Kind regards, Lorna Grey, NHS Greater Glasgow & Clyde

NURSING STANDARD

My first stay in hospital following a stroke

I was feeling unwell and behaving strangely while on holiday in Derbyshire, so we rushed home to get help. The tunnels in Birmingham were closed so we ended up at Heartlands rather than our local hospital, the Queen Elizabeth.

I was admitted to ward 20 and was seen regularly by Dr Sandler and his team. I had an occupational therapy assessment, and physiotherapy too.

Later I saw the speech and language therapist as well. The nursing and ward staff on ward 20, and then on Beech ward, were thorough and good to me. They also were caring towards other ill patients.

I am now going on the TARDIS research trial and I hope this will help others.

My only complaint is that Beech ward pillows were very flat, and generally the food was not good.

Overall this was a positive experience for my first in-patient stay in hospital, and hopefully my last.

Thank you to everyone, including the X-ray staff and those in MRI and Doppler.

Response...

Delighted to hear that you had such good care from Dr Sandler and the stroke team. I will pass your message on to him.

This week we have the official opening of our new hyperacute stroke unit at Heartlands Hospital, so our facilities are improving even further. I hope you

never need to use it and are now making a good recovery.

Many thanks for taking the time to send this feedback, it is great for staff to hear this,

Matthew Cooke, deputy medical director, Heart of England NHS Foundation Trust

Customer care

Jane Bates asks: is the patient always right?



A young woman who worked in one of our local shops was sacked because a customer made a rather trivial and, I believe, unjust complaint against her. I imagine this person got out of bed on the wrong side that particular day and took out his grumpiness on her.

I always found her courteous and obliging – the sort who would go the extra mile to help you. But her boss obviously goes by the dictum that the customer is always right, and she was out on her ear before you could say 'unfair dismissal'.

We had a difficult patient in clinic this week, who complained and harassed the staff constantly. She wanted to be seen before the other patients, even though her appointment was after theirs, and the patient and her family were repeatedly rude to us.

We kept our cool and remained polite, but I am certain they will make a complaint against us. I can feel it in my bones.

So is it the same in the NHS? Is the customer always right? I remember years ago being hauled over the coals because of a complaint. I took the flak – not because I had done anything wrong, but because someone supposedly had, and I was the only person they knew was involved with that patient.

There was no mercy for me with the manager – as far as she was concerned, I was guilty until proven innocent. It turned out to be a misunderstanding, but the knee-jerk reaction was to grab a member of staff and throw the book at them.

What I found most disturbing was that the manager, who hardly knew me at all, just assumed the complaint was justified. Of course most complaints are valid, and must be dealt with in an appropriate and timely manner. But it can be tough for staff if a patient makes a complaint – and shoot first, ask questions later, is no way to treat an employee.

Jane Bates works in outpatients in Hampshire

february 25 :: vol 29 no 26 :: 2015 23

۲