

Trust Board paper O

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| To: | Trust Board |
| From: | Rachel Overfield, Chief Nurse |
| Date: | 27 th March 2014 |
| CQC regulation: | Outcome 1, 2, 14 and 16 |

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| Title: | Patient Experience Story – End of Life Care in the Emergency Department |
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Author/Responsible Director:
Mark Williams, Consultant
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Purpose of the Report: To describe for Trust Board the experience of care a family received when their father was admitted to the Emergency Department from a residential home.

The Report is provided to the Board for: time

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| Decision | <input type="checkbox"/> | Discussion | <input checked="" type="checkbox"/> |
| Assurance | <input type="checkbox"/> | Endorsement | <input type="checkbox"/> |

Summary / Key Points:

Introduction

The Emergency Department has embraced obtaining feedback from patients and confidently responds by ensuring service and care developments are in line with patient opinion.

Emergency Department Friends & Family Test

In February 2014, 754 (17.7 %) patients completed the Friends and Family Test in the Emergency Department. Of these:

| Promoters | Passives | Detractors | FFT Score |
|-----------|----------|------------|-----------|
| 492 | 190 | 66 | 57.0 |

Experience of Care in the Emergency Department

A daughter whose father died in the Emergency Department in April 2013 is captured on DVD and provides positive feedback from her experience at this time of loss:

- Staff showed care and compassion
- All family members treated with dignity and respect from all of the Emergency Department team
- Acknowledgement and discussion of pre-planned end of life care pathway
- Sensitivity of staff providing end of life support

The team have shared and discussed this particular family's feedback, which reinforces that current practices meet the needs of families in these particular situations. Staff have therefore been encouraged and supported to ensure this level of care is provided at all times.

The New Emergency Department Build

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| <p>With the forthcoming fundamental changes in the Emergency Department, it is imperative that feedback from patients is incorporated in to service redesign. This feedback and other similar comments from patients have ensured that the new Emergency Department will build on the current successes for 'end of life care'.</p> <p>The plans for the new building include two rooms where patients will be provided with 'end of life care' that each has a separate waiting area where family members can stay, to ensure their privacy and dignity is maintained. This enhanced facility also incorporates an increase in relative rooms.</p> <p>To ensure a continuation of this high quality service for all patients and their families, the Emergency Department's vision is to become the first centre incorporating geriatric design principles for example colour, signage, noise, good lighting, hand rails, these are being incorporated in to the new build. This will ensure the department meets a diverse range of patients' needs.</p> <p>Medical care and nursing care offered in this new facility will continue to clearly communicate in a compassionate and effective manner to patients and family member and ensure all end of life wishes and advance care plans are respected. Staff will continue to foster 'joint decision making' with patients regarding next steps in care, to support and guide patients and families regarding the usefulness of tests and procedures at the end of life and the relief of pain or other symptoms at the end of life.</p> | |
| <p>Recommendations: The Trust Board is asked to:</p> <ul style="list-style-type: none"> • Receive and listen to the patient's story • Support the improvements instigated in response to this feedback. | |
| <p>Previously considered at another corporate UHL Committee? No</p> | |
| <p>Strategic Risk Register: No</p> | <p>Performance KPIs year to date: N/A</p> |
| <p>Resource Implications (e.g. Financial, HR): None</p> | |
| <p>Assurance Implications: This paper provides assurance that the Emergency Department teams are listening and acting upon patient feedback to improve patient's experience of care.</p> | |
| <p>Patient and Public Involvement (PPI) Implications: Patients are encouraged to share their stories of care within the trust.</p> | |
| <p>Stakeholder Engagement Implications: None</p> | |
| <p>Equality Impact: None</p> | |
| <p>Information exempt from Disclosure: N/A</p> | |
| <p>Requirement for further review? No requirement for further review</p> | |