

TRUST BOARD
DATE 30th July 2015

TITLE	Patient Panel Update
EXECUTIVE SUMMARY	To keep the Board connected to the key interactions, feedback and involvement of the ASPH Patient's Panel, inviting opportunity for two way communication around issues, actions and opportunities.
BOARD ASSURANCE (RISK)/ IMPLICATIONS	The Patient Panel update assists in connecting the Board with prevalent issues affecting Patient Experience within the hospital.
ALIGN TO TRUST RISK REGISTER	Refer to Risk Scrutiny Committee submissions
LINK TO STRATEGIC OBJECTIVE	SO2: Excellent experience.
STAKEHOLDER/ PATIENT IMPACT AND VIEWS	The aim of the group is to build a strong partnership between the Trust, patients and the public and ensure that everyone's 'voice' is heard.
EQUALITY AND DIVERSITY ISSUES	We endeavour to represent the views of all our users equally in all their diversity.
LEGAL ISSUES	None identified
The Trust Board is asked to:	Review the paper and discuss its contents
Submitted by:	Louisa Daly, Head of Patient Experience and Involvement
Date:	22 nd July 2015
Decision:	For Receiving

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Patient Panel Update

Key points of interest / activity for Board awareness			
ITEM	QUESTIONS / SUGGESTIONS FOR BOARD	ACTION / OUTCOME / NEXT STEP	
1	<p>Feedback and observation:</p> <ul style="list-style-type: none"> - Panel members report experience of GP's impressions of the hospital not always being correct / substantiated, e.g. perception reported that food is always cold. 	<p>We need to promote the hospital and communicate good results to our Primary Care stakeholders – i.e. results of PLACE, Inpatient survey. What communication do we currently do and how can we tailor it and improve it more?</p>	<p>Improved communication and promotion of services and successes with Primary Care stakeholders. GP's giving the right messages to their patients.</p>
2	<p>Feedback and observation:</p> <ul style="list-style-type: none"> - Panel member reports two recent occasions where mother received outpatient letters months late. One letter to book an endoscopy that had already taken place and another for a blood test that arrived the day after the follow up appointment which consequently was wasted time. Cost to Trust. 	<p>Is there assurance that the outpatient project is addressing this issue and if so how is improvement being measured?</p>	<p>Clarity on what improvement looks like.</p> <p>Plan for patient to sit on outpatient steering group.</p>
3	<p>Good experience:</p> <ul style="list-style-type: none"> - Panel member reports excellent feedback on recent experience in A&E. Timely, efficient friendly and thorough. Ambulance service also very good. 	<p>For information</p>	<p>This will be shared with the A&E team.</p>
4	<p>New initiatives:</p> <ul style="list-style-type: none"> - Panel member reports a new initiative of patients at risk of falling having yellow blankets alerting staff to the risk. This is evolving and patients too are now alerting staff if they notice a patient with a yellow blanket getting up. 	<p>For information / promotion</p>	<p>Further promotion within the Trust</p>

5	<p>Feedback re Guest speaker, Annette Arnold, Chief Pharmacist on behalf of Pharmacy:</p> <ul style="list-style-type: none"> - Updates regarding new initiatives in pharmacy to improve patient service and timeliness; patient facing pharmacy; increased pharmacy staff; pre-screening TTO's. - Actions taken away from meeting; look at expanding helpline hours with FPH, communicate to nursing re ensuring patients and relatives know what meds patient has had that day already to avoid doubling or missing doses; give list of late opening pharmacies with script to outpatients. 	For information	Review Inpatient survey results specific to medications in 2015/16 survey