# NHS Ayrshire & Arran



Meeting: Ayrshire and Arran NHS Board

Meeting date: Monday 28 March 2022

Title: Patient Experience Story – Lynn and Jenny's Story:

Learning when we don't get it right

Responsible Director: Caroline Cameron, Director of North Health and Social Care

**Partnership** 

Report Author: Laura Harvey, QI Lead for Patient Experience

# 1. Purpose

This is presented to the Board for:

Awareness

This paper relates to:

- Government policy/directive
- Local policy

This aligns to the following NHSScotland quality ambition(s):

- Safe
- Effective
- Person Centred

# 2. Report summary

#### 2.1 Situation

Lynn and Jenny recount their experiences whilst their mum was a patient in Ward 2, Woodland View Hospital (WVH) receiving end of life care.

As a family, they felt strongly that their patient experience should be shared with the staff in Ward 2, Woodland View for reflection and learning.

## 2.2 Background

In June 2020 Lynn and Jenny's mum was unexpectedly admitted to Ward 4B, University Hospital Crosshouse and subsequently transferred to Ward 2, Woodland View in October 2020 for palliative / end of life care.

The family's experience whilst their mum was in ward 4B was positive. The staff took an interest in their mum and her wellbeing and communication with the family was informative, compassionate and proactive.

This made a significantly difficult time for the family so much easier to deal with.

Sadly, their experience once their mum was transferred to Ward 2 in WVH was not as positive and the family wanted to share their experience in the hope that learning and improvement could take place to prevent any future patients and their families encountering the same issues.

#### 2.3 Assessment

Lynn and Jenny's experience made them feel that the culture within Ward 2 was less person centred and compassionate than other wards and hospitals their mother had recently been in.

A number of issues led them to feel that, for whatever reason, the staff seemed less compassionate to their mum's and their own needs.

The lack of a person centred approach to visiting regulations at the end of their mum's life was particularly distressing for the family and they feel they lost valuable time with their mum as a result.

## 2.3.1 Quality/patient care

It is important that all our patients and their families have a positive experience and that staff uphold and promote our organisational values of safe, caring and respectful.

This story illustrates the impact that families' relationships with staff can have on their experience.

When patients or families report a negative experience, it is very important that this is then fully reviewed and any necessary action taken to improve the care experience for future patients.

This family raised their concerns formally via our complaint process and the Clinical Nurse Manager (CNM) responsible for investigating their complaint also developed a Quality Improvement Plan to progress the necessary actions necessary to ensure learning and improvement.

The identified actions included the need for staff training on end of life care and the CNM liaised with the Ayrshire Hospice to ensure this training addressed the areas identified.

Another important action was a review of visiting guidance to provide staff with more instruction on how to apply person centred decisions in relation to end of life care that would support better access for families in the period approaching end of life, so patients and their loved ones can spend special time with each other before the patient's condition deteriorates to the point they cannot converse or enjoy each other's company.

Whilst visiting remains restricted, it's important that all staff understand what is meant by end of life and how it impacts on visiting access. This story has helped to highlight that updated guidance for staff on visits as patients approach the end of life is required and this is currently being progressed.

#### 2.3.2 Workforce

This story helped capture the need for additional staff training

#### 2.3.3 Financial

No financial impact.

#### 2.3.4 Risk assessment/management

No risk identified.

## 2.3.5 Equality and diversity, including health inequalities

An impact assessment is not required as the individuals sharing the story have given consent and any impact on others will be individual.

# 2.3.6 Other impacts

- Compliance with Corporate Objectives
  - Safe, Caring and Respectful Reminder to staff all of the guidelines for visiting with emphasis on palliative/end of life care/access for family.

#### 2.3.7 Communication, involvement, engagement and consultation

This patient story is presented for awareness and to support learning and improvement across our services for all staff providing care for patients receiving palliative or end of life care.

As a family, Lynn and Jenny felt strongly that their patient experience should be shared with staff for reflection and learning.

#### 2.3.8 Route to the meeting

This is the first time this story will be shared outside of the staff directly involved. The story will be shared locally initially, then more widely to support improvement

#### 2.4 Recommendation

For awareness. Members are asked to watch this story for their information.