

NHS Ayrshire & Arran



Meeting:	Ayrshire and Arran NHS Board
Meeting date:	Tuesday 23 May 2023
Title:	Patient Experience Story – Mr & Mrs Gebbie: Right Care, Right Place and Managing Expectations
Responsible Director:	Joanne Edwards, Director for Acute Services
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 NHS Scotland quality ambition(s):

- Safe
- Effective
- Person Centred

2. Report summary

2.1 Situation

This story presents a patient's perspective of his experience whilst under the care of two wards within Acute Services, and his wife's perspective as a loved one of a patient whilst her husband was in our care. It highlights how different that experience can be from the two perspectives and reinforces the importance of good, effective communication with not only our patients, but with their loved ones.

2.2 Background

Mr Gebbie was a fit and healthy gentleman until his stroke. He is a retired head teacher, working until he was 70 years old then relocating from England to Scotland. Just two days prior to his stroke, Mr Gebbie was at home undertaking all his normal daily activities, which included overseeing personal finances, and driving himself and his wife regularly around the UK on holiday.

Mr Gebbie was initially admitted to the Acute Stroke Unit (ASU) situated in Ward 3E, University Hospital Crosshouse (UHC) and once well enough, was transferred to

Ward 5D (Care of the Elderly Ward) at UHC, until a rehabilitation bed became available within the Biggart Hospital.

Mr and Mrs Gebbie's experience of care within the Acute Stroke Unit was positive. Mrs Gebbie felt that the staff there took an interest in her husband and in his wellbeing. Communication with Mrs Gebbie was informative and compassionate. Mrs Gebbie stated that "*the level of care received here was absolutely fantastic, they looked after him and cared for him, like a patient should be cared for*".

Sadly, their experience once Mr Gebbie was transferred to Ward 5D was not as positive. Mr and Mrs Gebbie felt that Mr Gebbie had been transferred to this ward due to his age (78) and not his medical requirements and they felt that this was not the appropriate ward setting to continue Mr Gebbie's care. Following repeated requests from Mrs Gebbie, Mr Gebbie was transferred back to Ward 3E until a rehabilitation bed was available within Biggart Hospital.

The difference in care provision between both wards caused them to feel that the culture within Ward 5D was less person centred and compassionate and a number of issues led them to feel that for whatever reason, the staff seemed less empathetic to Mr Gebbie and his needs.

2.3 Assessment

After hearing the patient's story, the Patient Experience Facilitator linked with Ward 5D to discuss the feedback and to engage with the Senior Charge Nurse to look into what support they could provide to monitor and improve patient experience.

In addition to this, there is also recognition that often, when a patient steps down from an area providing a higher level of care, they are often disappointed with the transition. As ASU has a higher patient to nurse ratio, the care is more person centred and this is necessary due to the acuteness of the patient condition. However, when they stabilise, and are fit to move to a general ward where the ratio is much lower, the expectation of care often remains the same.

It is therefore important that this is explained to patients moving out of high care areas so their expectations can be managed.

In the examples given by Mrs Gebbie, communication around visiting may have been better understood if the differences in wards, and approach to visiting, had been fully explained to visitors.

Staff in both areas found listening to the story a great learning opportunity and in Ward 5D particularly, staff were able to reflect on the impact of a rushed conversation or failure to put the patient first.

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.

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

It is also important to ensure that patients and relatives have realistic expectations and understand the different levels of care provision between high care or acute units and routine medical or elderly care wards.

Mr and Mrs Gebbie's story has highlighted some areas for improvement within Ward 5D with staff communication and patient access and assistance with personal hygiene and this is currently being progressed. A new patient survey has been developed to capture regular patient feedback and both the Quality Improvement Team and Patient Experience Team is working with the Senior Charge Nurse and her team to improve communication.

A ward volunteer has been introduced, who can support the ward and liaise between patients and the ward staff.

The Quality Improvement Team have also included Ward 5D in a Patient Centred initiative, which includes a welcome (to the ward) pack and behind the bed boards that will display important patient centred information on 'what matters to' them.

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.

2.3.7 Communication, involvement, engagement and consultation

This patient story is presented to the Board for awareness and to support learning and improvement across our services, particularly in communicating effectively with patients and relatives when ward moves occur to minimise negative experiences through managing expectations.

2.3.8 Route to the meeting

This is the first time this story will be shared outside of the Senior Charge Nurse and Team in Ward 3E and Ward 5D, University Hospital, Crosshouse. The story will be shared locally initially, then wider to support improvement.

2.4 Recommendation

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