

Public Feedback Report on Hospital Services for People in North Somerset

January - August 2015

Introduction

Healthwatch North Somerset collects information from the general public about their experiences of local health and social care services. We call this information 'Intelligence'. Intelligence is gathered through a wide range of methods including letters, website, emails, surveys, telephone calls, meetings, social media, Enter and View visits, talking face to face and from partner organisations.

We also gather information on specific issues through surveys, meetings or by working with a specific group of people. Healthwatch North Somerset takes great care to treat all information objectively.

Once gathered, the intelligence is collated onto our information database, we analyse the data each month to ascertain trends. This information is shared with health and social care service providers, local commissioners and all other relevant bodies. All intelligence is shared with Healthwatch England.

Background

It was felt that an overall evaluation of the intelligence received regarding hospital services for the year to date would provide a useful overview for both service providers and the general public.

The feedback contained within this report was received between January and August 2015.

The North Somerset Clinical Commissioning Group (CCG) commission the hospitals mentioned in this report to provide services for the people of North Somerset. Due to the travelling distance between Bristol service providers and North Somerset residents, the number of isolated, rural villages within the county and inadequate transport links, travel to Bristol hospitals and subsequent parking can prove to be difficult for North Somerset service users. Community Transport services are

inundated and the Healthwatch North Somerset Report: 'Getting to Medical Appointments-Community Transport (March 2014)' reflects some of the issues captured within this report.

Aims and Objectives of the Evaluation

The aim of this evaluation is to highlight the issues that the general public view as important in supporting their healthcare needs in hospital services. The information has previously been presented to service providers to indicate where service users feel hospital services are not meeting their expectations and also to highlight best practice and positive recognition.

Methods

The information and feedback obtained was gathered through the following methods.

- Healthwatch North Somerset visit to Bristol Eye Hospital
- Healthwatch North Somerset visit to Southmead Hospital
- General intelligence received by a variety of means including:
 - Letters
 - Emails
 - Website
 - Telephone calls
 - Public engagement activities

Within this report we have captured 109 comments from North Somerset users of hospital services. Of those responses 37 were positive 72 were negative. Nine comments were of a general nature and did not relate to a specific establishment.

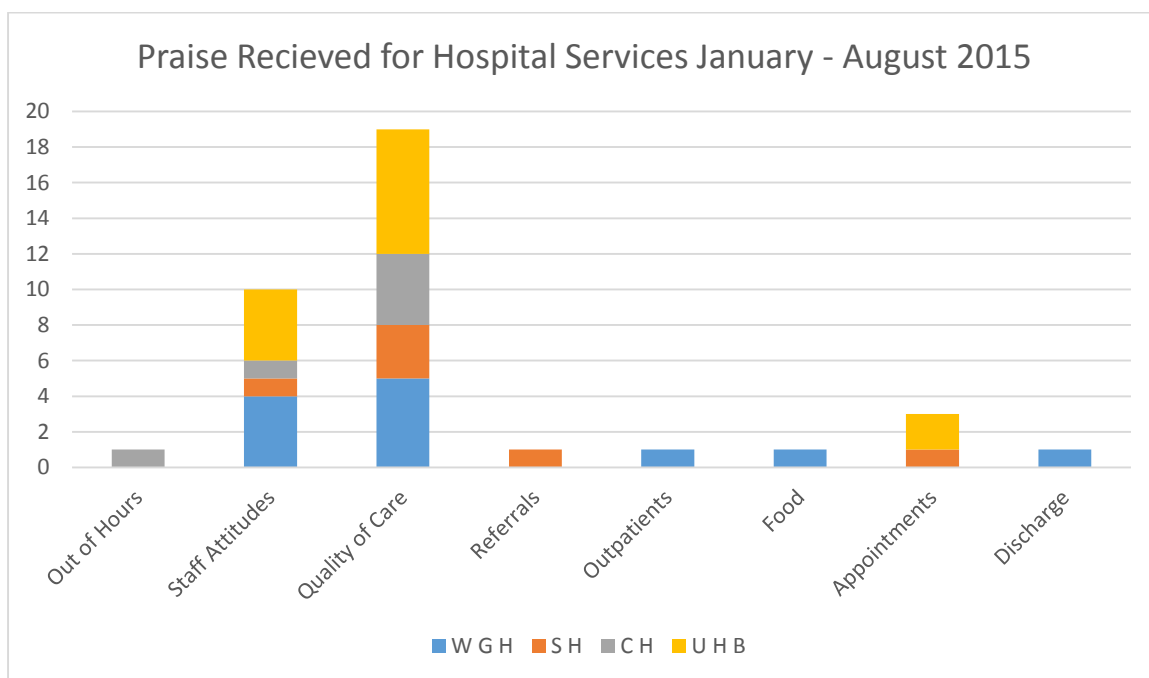
Please note that the chart results for Universtiy Hospitals Bristol include those of Bristol Royal Infirmary, St Michael's Hospital, Bristol Eye Hospital, South Bristol Community Hospital, Bristol Dental Hospital and Emerson's Green Hospital. The breakdown for each location can be found in the appendices at the end of this report.

It is of note that the results and findings of this report will be biased to reflect the data collection locations.

Results and Findings

Positive Feedback

Overall it was found that the quality of care received and the attitudes of staff in the hospitals were considered good, and many of the comments received indicated that these aspects of the patient experience exceeded expectations.



WGH = Weston General SH = Southmead Hospital
 CH = Clevedon Hospital UHB = University Hospitals Bristol

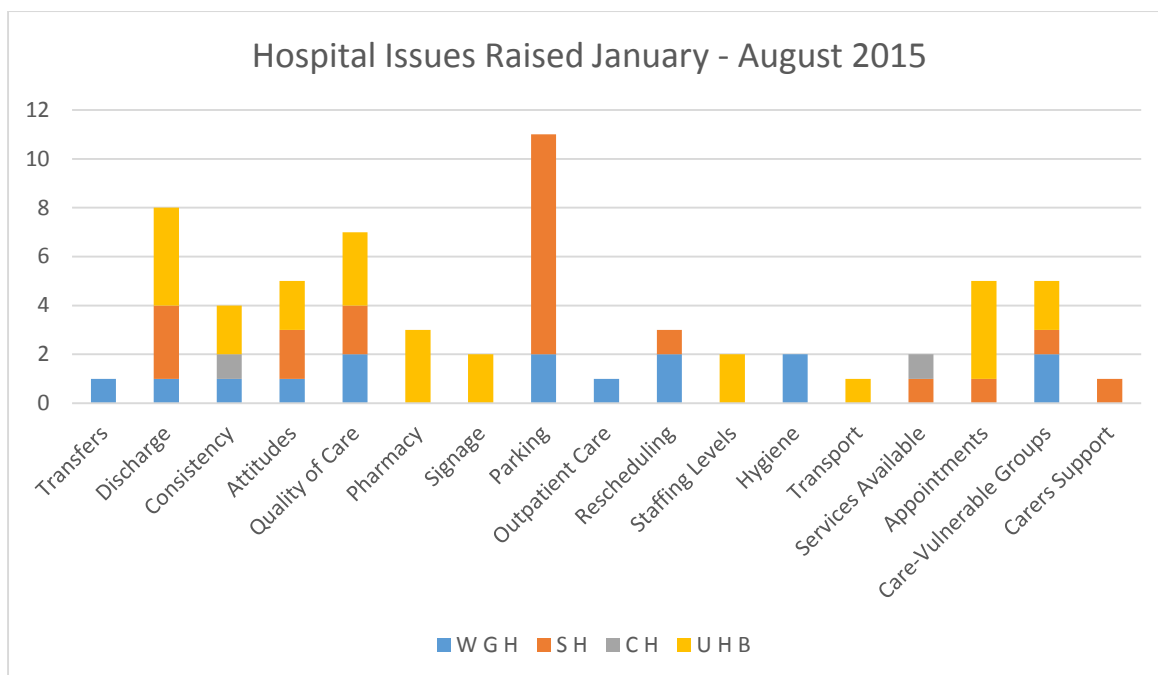
Key Points

- Quality of Care was praised in each of the four hospitals mentioned in this study. Within this category comments referred to both scheduled and unscheduled services. **Comments regarding the quality of care amounted to 50% of all the positive comments received which indicates that for a significant number of people this is a top priority.**
- A significant number of positive respondents felt that staff attitudes were good, and used words including 'Brilliant', 'Wonderful' and 'On the ball' to describe the staff that they had dealt with.
- Appointments, including scheduling and waiting times, were praised in both Southmead Hospital and University Hospitals Bristol.

Negative Feedback

Overall it appears that parking was a real concern for many of those who provided feedback. The two hospitals that received negative feedback about parking issues do have designated parking areas, but it is apparent that the provision is currently inadequate.

It is of note that at the time of this report Southmead Hospital is currently improving parking facilities for its visitors.



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Key Points

- 🌱 The issue of parking was a significant concern, with just short of 20% of all negative comments relating to this issue. The 'Parking' category includes concerns regarding the number of parking spaces available, disabled parking and parking charges. Of all the comments received relating to Southmead Hospital, 42% were with regard to parking.
- 🌱 Discharge and follow up procedures were a concern in Weston General Hospital, Southmead Hospital and University Hospitals Bristol. Of the all the comments received relating to University Hospitals Bristol, 15% were regarding discharge procedures.
- 🌱 Pharmacy was raised as an issue for University Hospitals Bristol by three people. All three comments related to the location of the pharmacy and the difficulties vulnerable groups have physically accessing it.
- 🌱 Pharmacy, signage, staffing levels and transport were all issues that related only to University Hospitals Bristol.
- 🌱 Hygiene, outpatient care and transfers were all issues that related only to Weston General Hospital.
- 🌱 Carers support was only raised as an issue for Southmead Hospital.

Conclusion

The service providers and commissioners of the services in this report are notified of the intelligence received by Healthwatch on a monthly basis and have the opportunity to respond directly to it and work towards make necessary improvements.

Over recent months both University Hospitals Bristol and Weston General Hospital have been in communication with Healthwatch North Somerset and have put systems in place to improve services, particularly care quality levels and discharge service.

Healthwatch North Somerset continues to maintain and further develop open communication with each hospital with a view to continuously improving services for people in the North Somerset community.

Appendices 1 - Positive Feedback Breakdown

Southmead Hospital

First class service given in the emergency department and acute assessment unit.
Broken hip, nothing but praise for treatment and care.
Volunteers are very on the ball, they approached the patient, she didn't have to try and find someone to ask.
Very impressed. Very quickly received treatment without a long wait.

Weston General Hospital

Went for hip operation, it was excellent.
Received excellent care from dietician.
Wonderful staff, first class.
Osteoporosis nurse offers counselling before any procedures are done and followed up with calls when there were any issues - excellent service.
Excellent service at diabetes outpatients.
Hip replacement went very well.
The food is very good.
Best food, best wards, best nurses.
Stroke ward excellent, good discharge planning.
A&E excellent, can't fault it.

Clevedon Hospital

Out of hours very good.
Went for ECG, treated very well.
Excellent, well organised, efficient and friendly.
Clevedon hospital is very good.

University Hospitals Bristol

Bristol Royal Infirmary

Taken by ambulance to Bristol Heart Institute, doctors operated as soon as arrived and fitted a stent. The whole time I was there the care and attention received was excellent.

Emergency chest unit at BRI have a great consultant.

Excellent care at A&E at BRI. Kept in overnight for observations. Very pleased with service.

BRI fantastic care, couldn't fault them. Paramedics provided excellent care, everyone helpful on the ward. Always informed, plenty of info. Great staff.

Uses BRI for osteoarthritis care and they are always very good.

BRI very good, been there many times. All the hospitals are doing a good job under difficult circumstances.

St Michael's Hospital

Brilliant staff during labour and birth on St Michael's Maternity Unit.

St Michael's midwife led unit great service, lots of help with breastfeeding, easy discharge.

All four children born there, last one was a water birth, was excellent.

Bristol Eye Hospital

Eye Hospital is excellent.

Dental Hospital

Bristol Dental Hospital is excellent, in five years never had a late appointment, always seen the same dentist.

South Bristol Community Hospital

South Bristol Community Hospital is very good.

South Bristol Community Hospital is very good. Coordinated eye appointments, everything in one appointment.

Emerson's Green Treatment Centre

Emerson's Green hospital is very good, very good follow up.

Appendices 2 - Negative Feedback Breakdown

Southmead Hospital

Difficult parking and difficult to get to, especially for early appointments. Not enough disabled spaces.
Lack of disabled parking spaces.
Parking is difficult.
Difficult to get there by public transport and parking can be difficult.
Parking difficult. Small car park for A&E full with people who are not using A&E.
Hospital parking very difficult.
Poor experience of parking.
Lack of disabled parking spaces.
Blood test taken and results supposed to be sent to BRI but lost and neither BRI or GP received the results.
Appointments ran over and had to pay for parking three times. Very stressful, long walk back and forth, machines only take coins, had to find cash machine and find someone to give change.
Better support for carers would be welcome.
Self discharge day after Caesarean. Staff wouldn't allow husband onto ward in evening.
Staff on ward rude and brusque, paid more attention to mobile phones than to patients.

Little help with breastfeeding.
Discharged without being provided with community care details or how to deal with surgical dressing.
Electronic screens hard to read if visually impaired, it is difficult to know when your appointment is.
Stroke sufferer discharged without follow up information or referral for support.
Back operation cancelled twice and not rescheduled.
Not enough beds.
Discharged from hospital with no care plan. Aged 85, needed oxygen but sent home without it.
Operation delayed due to lack of sterilisation equipment as sterilising unit not on site.

Weston General Hospital

Inpatient overheard two staff members discussing him.
Operation went well but discharge procedure was slow and disorganised. Medication was not ready even though discharged a day later than planned.
Operation scar started bleeding but found it difficult to get help and support needed as an outpatient. It took three days battling to get the help needed. Outrageously non-existent support.
Operation booked but received phone call cancellation couple of days before. Rescheduled but cancelled again during pre-op. Advised due to a number of emergency trauma patients.
Knee replacement surgery. Got MRSA. Knee infected, had to do operation again.
Broke hip, went into hospital but operation delayed for two days, had to stay in hospital during this time.
Plaster room not open at weekends. Broke foot at weekend, had to wait until Monday for plaster.

As result of visit to GP patient had to make own way to hospital for xray so phoned to make appointment but told not possible so had to sit and wait a long time. This was not unreasonable but having no alternative but to pay for parking by the hour is.

Discharged from RUH after surgery then went to WGH as in pain. Recorded as abdominal pains despite being post-surgery. Long wait to see a doctor who then admitted patient immediately.

Discharged with walking difficulties and homeless.

One hundred year old lady left alone to go to the toilet fell and broke her hip.

Complaint that dementia patients not receiving adequate care.

Concerns about hygiene re lack of automatic flushes.

Car parking costs high. Appointments overrunning mean higher parking costs.

Clevedon Hospital

Physiotherapy give conflicting advice.

Comment that an xray service would be useful.

University Hospitals Bristol

Bristol Royal Infirmary

Difficulty locating dispensary as signage not very clear.

Patient asked to have prescription made out to local pharmacy as would struggle to walk up the hill to BRI. Consultant reluctant to do this.

Discharge system from BRI is uncoordinated.

Transfer to BRI from WGH took three weeks for angioplasty.

Unhappy with support and level of ward staffing.

Went to A&E with vomiting and diarrhoea, advised of six hour wait and should go home or go to out of hours GP. Out of hours GP said not to come in if vomiting.

Signage at BRI poor, especially at lifts.
Travel from Yatton difficult on public transport.
BRI difficult to access for visually impaired.
BRI long delay for cataract operation.
Waiting for follow up appointment for thyroid due April/May. GP has been in touch with BRI but still no results.
Six month delay for musculo-skeletal BRI appointment.

St Michael's Hospital

Three hour wait for discharge.
Different opinions from different staff members. Feels need dedicated breastfeeding worker on ward.
Seven hours between being told she could leave and actually leaving.
Birth weight of baby recorded wrongly.
Mother felt pressure to breastfeed after birth.
Not enough midwives to properly support new mothers. It would be great to have peer supporters in the maternity wards. Bed was only changed every three days. Patient stated did not receive any treatment explanation for a long time.
Previous labour notes detailing bleeding problems not available.
No choice of pharmacy, not enough medication described and pharmacy did not have a record of medication. Nurse lovely, cheery and helpful.

Bristol Eye Hospital

Eye hospital patient not received any written information about condition after diagnosis of Macular Degeneration.
Eye hospital pharmacy closed and patients need to walk up to BRI. Difficulty for elderly patients or reduced mobility. Community transport drivers have considerable amount of extra time to wait and additional journey to BRI.

Eye hospital patients must walk to BRI to get prescriptions. Difficult to get up hill.

Eye hospital appointments for Glaucoma were bi-monthly now every eight months. Takes a long time to get an appointment for e.g. blood tests.

Struggled to get blue badge even though no vision at all in one eye. Eye Hospital would not provide relevant information to help get the badge.

Eye Hospital. Different doctor each visit and same questions asked. Often get conflicting advice.

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