

UserView

Issue 27
Summer 2017

This newsletter brings you news from our user groups together with details of other activities around the Trust which aim to improve the patient and carer experience.

Your contribution to the life of the hospital, helping us to make improvements large and small, is so important and very much appreciated.

Please contact Pam Talman if you have anything you would like to be considered for inclusion in the next edition of UserView.

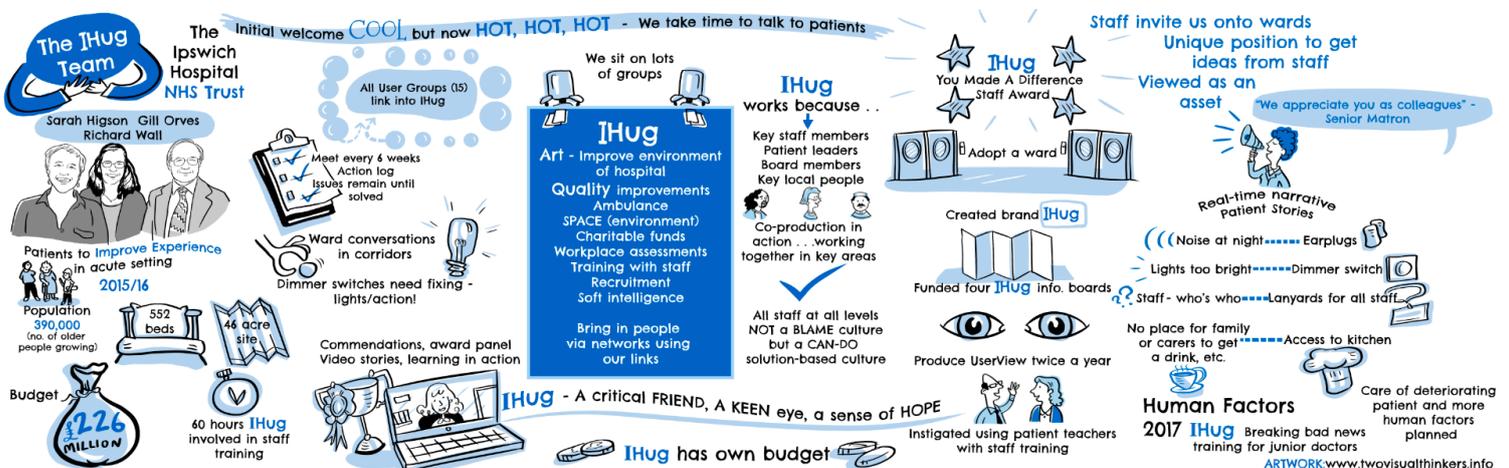
Patient Experience Office

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We currently have 14 user groups and are always seeking/welcoming new members. If you would like more information or are interested in becoming a member of a group, please contact the Patient Experience Office (contact details above).

- Cancer Services User Group
- Cardiology User Group
- Diabetes User Group
- Endoscopy User Group
- Eye Clinic User Group
- Hotel Services Group (cleaning, food etc)
- Inflammatory Bowel Disease (IBD) Action Group
- Musculoskeletal Action Group
- Maternity User Group
- Older People's User Group
- Pain Management Unit User Group
- Parents Group
- Stroke Services User Group
- 'Voice for change' – young people's group



First Patient Experience Seminar

On March 16th we held the first East of England Patient Experience Seminar, with the theme of 'Working Together' co hosted and co produced with the Patient Panel at Princess Alexandra Hospital, Harlow. This free seminar attracted over 90 delegates from all corners of the East of England from around 30 NHS organisations ranging from PPGs to Hospitals. The staff/service user ratio was 2:1 and many organisations were attending to find out more about how to engage with their patients. Neill Moloney opened the day and welcomed everyone to Ipswich. We were very honoured to have Lynne Wigens attend in her capacity as Regional Chief Nurse NHS East of England (Midlands & East).

Our first speaker, Pete Fleishmann from SCIE (Social Care Institute for Excellence) gave what many found to be the most comprehensive and straight forward guide to what co-production really is. We were then led through various workshops by our facilitator Ceinwen Giles who works with many national health organisations.

Along with the patient panel, we showcased some of our work, including 'Adopt a Ward' and our involvement in the simulation suite. Huge thanks go to Matron Sarah Watson and Jo Wesley from the simulation suite for helping to present.

For me one of the best things was later that evening at home when I read a comment on Twitter, where an attendee had tweeted "I attended this event today, it was awesome!" Just what you need when you are exhausted from running such an event! I'd like to take this opportunity to say a heartfelt "thank you" to Sarah Higson, Pam Talman and Steve Bruce from the Ipswich Patient Experience Team for all their assistance in making this day such a success.

Five days later saw Richard Wall, a joint vice chair of IHUG, and myself in Birmingham. We attended the Patient Experience Network National Awards where our 'Adopt a Ward' concept was a finalist. We weren't winners on this occasion but received many compliments about our idea.

The following day, along with Sarah Higson, we had been invited to the NHS Improvement Expo



Left: Neil Moloney, Managing Director. Middle: Matron Sarah Watson with Gill Orves, Chair IHUG. Right: Lynne Wigens, Regional Chief Nurse NHS East of England.

in Birmingham to give a 30 minute presentation on all the things IHUG does. Initially, we were worried how we would fill the time – in the end we had to cut our presentation short as we ran out of time! Afterwards we took lots of questions from the audience and I think it's safe to say that we at Ipswich Hospital became the envy of many trusts from across England due to the way patient leaders and staff work together to help to improve the patient experience. The set up we have of user groups and the chairs or a representative then becoming a member of IHUG is definitely a system to be proud of.

I rounded off a busy Spring by being invited to speak at the NHS Westminster Health forum on April 27th about patient engagement. The setting was stunning and the room I was in had been used to hold parliament during the Second World War. One of the themes of the day was how to make the best use of finances; I was happy to say how much value our user group members add to the hospital as apart from our travelling expenses the time we give is for free, and I don't think you can put a value on passion!

Members of IHUG have been involved in many areas of the hospital; sitting on an End of Life committee, taking part in the various PLACE food/environment audits, providing the patient perspective on ward refurbishments and numerous working parties looking at how to improve the patient experience in the emergency department, supporting the reablement work, hydration, frailty and continuing to assist in the simulation suite to name but a few ...

Gill Orves, Chair of IHUG

User Group News

Endoscopy Patient User Group (EPUG)

EPUG meets twice a year and membership, based on meeting attendance, varies between approximately one and two dozen. This variation is perhaps not surprising as many members will only undergo a procedure once every few years. In light of that it has been decided to keep the meeting frequency at two per year. It is also important to bear in mind that this is a user group, not a support group. However the meetings and associated activities have been well received and generated much lively discussion.

Activities:

- The first meeting of the year was held on September 13th, 2016, and was attended by 21 members of the public who were treated to two presentations. The first; by Dr Gavin, Consultant Gastroenterologist, was on colon polyps. Amanda Sayer, Endoscopy Nurse Practitioner, then gave a talk on Barrett's Oesophagus; its risk factors and management, including surveillance, and why the latter is important.
- The second meeting was held on April 6th of this year and opened with a tour of the decontamination facility, kindly hosted by Rob Bright who illustrated the detailed and comprehensive procedure for cleaning colonoscopes. This was followed by a talk from Abigail Hardy, lead nurse for bowel cancer screening at Colchester, in which she described the Bowel Scope programme recently initiated at Ipswich Hospital and selected GP practices. This

programme identifies individuals reaching age 55 and invites them to attend for a sigmoidoscopy, i.e. an examination of the distal part of the bowel where most polyps occur.

- Endoscopy Unit staff have undertaken the 2017 Patient Questionnaire although the results are not yet available. Nonetheless 133 answer sets had been received by the beginning of March.

EPUG membership changes:

- At the September 2016 meeting Peter Sutton and John Macrae announced that they were standing down as Chair and Vice-Chair respectively after serving for three years. Seamus McMillan and David Vincent were formally confirmed as Chair and Vice-Chair at the April 2017 meeting.
- Also at the April meeting Amanda Sayer announced that she was leaving Ipswich Hospital for a position at Colchester - she will be deeply missed. Her position as EPUG's clinical lead has been assumed by Claire Blakey who has also been instrumental in garnering support for EPUG.

In conclusion, I would like to express my personal gratitude to Amanda and Peter for all their support in helping me step into some very large shoes. I would also like to express thanks on behalf of EPUG to all the Endoscopy Unit staff, especially for their efforts to recruit new members and to publicise the group.

Seamus MacMillan, Chair

Diabetes User Group (DUG)

The group of 14 members has held 5 meetings during this period. The main topic has resulted in producing a newsletter each quarter called 'Sugar Bite News' which is distributed to GP surgeries, information centres, hospital notice boards etc.

The object of 'Sugar Bite News' is to raise awareness and help for Diabetes patients and carers also general information for the public.

The group has been privileged to have had various professional speakers address the meetings. In May it was by a dietitian who I am sure made us think about what we eat.

Gordon Scopes, Chairman

User Group News

Musculoskeletal Action Group (MAG)

The group was previously called the Joint Action Musculoskeletal Services User Group (JAMS) but we decided to change the name to the Musculoskeletal User Group to put more emphasis on 'Musculoskeletal'.

MAG represents patients and users of the Rheumatology, Trauma & Orthopaedic and Physiotherapy departments.

We meet every two months and are well supported by user members and hospital staff, however, new members are always welcome.

Rheumatology Patient Leaflet

In 2016 the group produced a leaflet for newly diagnosed Rheumatology patients and we are pleased that the feedback we have received suggests that they have found it very helpful.

New Musculoskeletal Service Outcomes

Now that the new service is up and running we are looking forward to working with the Ipswich Hospital Transformation team to assist them with a follow up review of the feedback received from patients. This will identify aspects of the service that can be improved and identify any lessons that learnt that can be applied to future developments.

Responding to feedback from members

MAG members continue to report back on any issues they observe around the various clinics in the Musculoskeletal Services area. These issues are always dealt with speedily once we raise them

at MAG and we are very grateful to them for the support they continue to give us.

Improving the Patient Experience in Rheumatology
We are very pleased that Dr Anita Weerakoon, one of the Consultant Rheumatologists has come forward and offered to work with MAG to help improve the experience for Rheumatology patients. This is a fantastic, possibly unique, opportunity and we are very grateful to her for this generous offer. We are confident that Rheumatology patients will see improvements over the coming months thanks this new partnership between medical staff and patients.

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Finally, we would like to thank Jan Wright, Senior Matron for Musculoskeletal and Trust Lead for MAG. Jan has recently retired as Senior Matron and has therefore had to step down as our Trust Lead. She has been a tireless supporter of the group for many years and we cannot thank her enough for what she has done to get us to where we are now. We send all our very best wishes to Jan for the future.

John E Abbott, Chair of MAG

Hotel Services User Group

The Group has recently been involved in both the preparation and execution of the annual PLACE assessment (Patient Led Assessment of the Care Environment). This is a review of the non-clinical facilities provided by the Trust to its patients - including food - and, as the name implies, is patient led. The assessment outcomes therefore predominately reflect the views of patients rather than Trust employees. In addition to the formal annual review we regularly carry out internal assessments of various areas of the

hospital, the results of which are presented to Trust management. We are keen to widen the reviewer base for these internal reviews and if anyone reading this would like to be involved on an occasional basis or who would simply like to receive more information, please contact Pam Talman.

Going forward, the Group will continue to analyse patient views on hospital food as recorded on the Trust's Meridian database and maintain its involvement in the roll-out of the Trust's 2016-18 food and hydration strategy.

Cliff Oakley, Chair of Hotel Services

User Group News

Stroke Services

This year has mainly been overshadowed by the link up with Colchester Hospital and the reduction in the Early Supported Discharge (ESD) service by the CCG.

To the members of our group reducing the ESD service from 7 days to 5 days a week and from 6 weeks to 4 weeks duration by the CCG was a disgrace. The CCG needed to cut their costs, we understood that. They initially attempted to do this openly by reducing the funding for IVF and services to minority groups but apparently did not get the approval of the public. It seems that they then made cuts in other areas without consultation. This included cutting the money made available to help some of the people who most need it and least able to fight back - stroke survivors. Perversely,

the savings made by this cut may well have been outweighed by the resulting need to keep patients in the hospital longer. However, now it seems that a new service is to be introduced called Discharge to Assessment. This will be available for up to 6 weeks after discharge. We will have to wait and see if it achieves what ESD achieved before it was pared back.

The worry still exists that the Stroke Unit, especially the Hyper Acute Stroke Unit (HASU), could be adversely affected by the Colchester link. This also applies to the stroke services available in Colchester. The latest we hear is more positive for the stroke units of both hospitals. Again, we will have to wait and see.

Richard Wall, Chair

Cancer Services User Group

The group has 16 members, and has met 10 times in the past year at Ipswich Hospital.

We have as before had excellent secretarial support from the hospital staff.

Two of our members are involved in national cancer strategy and in particular the developing Cancer Alliances.

We are one of five pilot sites in the country with an ambition to rule out or diagnose Cancer within 28 days of referral from the G.P. A member attends this quarterly meeting.

Members also attend other groups such as locality, hospice, cancer services development group and IHUG.

While we now have a superb Cancer Treatment centre, we are also concerned with the welfare of post-treatment patients, and their quality of life. Again Ipswich is at the forefront of Survivorship initiatives, and our own Cancer Support and Information Centre is the hub for 24 Patient Support Groups, in which our members participate.

In the past we have organised patient's forums, but we are more involved in the patients Health and Wellbeing Days which are being organised several times a year, and are very well supported. Instead of the Open Forum we are planning to organise smaller Focus Groups to gather patient feedback. These may well tie in with the 28 Day initiative.

In the past few years we have produced a quarterly Newsletter, which goes out to the whole hospital and is much appreciated, due to our talented Editor. Some of his jokes have been a little risky!

We do need new members, with a more recent experience of cancer treatment, as some of us are getting a little elderly, though fighting hard!

Tom Tyler, Chair

User Group News

Lavenham Ward

In the past year Lavenham Ward (a surgical ward in the Garrett Anderson Centre) have made a number of improvements that benefit patients and their carers and visitors.

Firstly, they converted a staff kitchen to one for the use of visitors to make themselves a drink and have some biscuits. This has proved a resounding success.

Buoyed by this they then cleared an area and set up a table, chairs and bookcase to make an area for patients to leave their beds and read, eat or just sit.

Since then they have changed the morning nurse’s handover process. This now takes place with therapists and is at the patients bedside. In addition to the handover they now set goals, to be achieved that day, for and with the patient. These goals could be simple things like getting from the bed to the bedside seat or walking to the new dining area for a meal. Because the patient is involved in the goal-setting, they buy into achieving their goal for that day. The presence of the therapists saves both nurses and therapists a considerable amount of much needed time.

They have also strengthened their link with Suffolk Family Carers to ensure that there is very much a multidisciplinary team to help patients, carers and visitors.

Are you interested in joining one of Ipswich Hospital’s user groups?

If you are, please contact **Pam Talman** Patient Experience coordinator on **01473 702101** or email **pam.talman@ipswichhospital.nhs.uk**

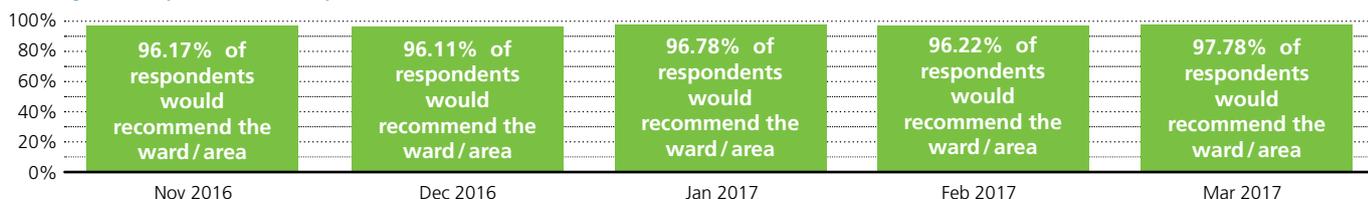
Friends and Family Test (FFT)

The FFT is a feedback tool that Ipswich Hospital uses to support the fundamental principle that people who use our service should have the opportunity to provide feedback on their experience. This feedback is used to improve services for our patients.

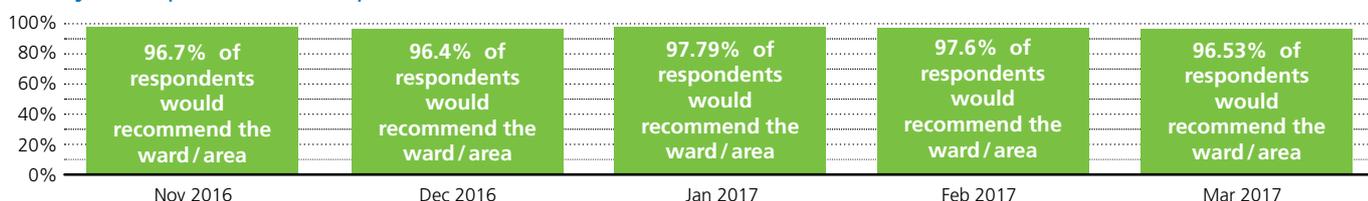
We ask **“How likely are you to recommend the ward, area or department you visited or stayed on to your family and friends if they needed similar care or treatment?”**

22,340: Total surveys completed November 2016 to March 2017 inclusive.

FFT Monthly comparison: Inpatients



FFT Monthly comparison: Outpatients



'You said, we did'

Using feedback to make a difference



You said:

"Would be great to be able to ask senior staff questions in a relaxed environment."

We did:

We have introduced 'Tea with Sister' to enable carers, visitors and relatives to speak with senior members of staff

You said:

"Can we have something to break up the daytime routine?"

We did:

From our charitable funds we have purchased equipment and arranged activities that are scheduled on the ward, breaking up the day and actively encouraging patient participation.

You said:

"Can we have some more information on the medicines that are being used?"

We did:

We have developed medicine information sheets for parents – please ask a member of staff.

You said:

"It would be nice to have an area that can be used for recreational activities and for eating together."

You said:

"It would be nice if my partner could stay with me overnight."

We did:

Working with Healthwatch Suffolk, we undertook a public engagement exercise. The results of the exercise show that more than half of new mums wanted their partner to stay overnight with them but couldn't, and 44% of birthing partners would have liked to stay the night but were not given the opportunity.

Partners are now welcome to stay throughout the birth and this development has been introduced on all three of the hospital's maternity wards – Orwell, Brook and Deben.

You said:

"It would be nice to be able to sit back in the chairs."

We did:

We repurposed some reclining chairs from a redundant area so patients can be more comfortable and relaxed when sitting in the chairs for long periods.

We did:

We have purchased, from charitable funds, a table and chairs that are being used so patients are able to socially interact away from the bedside.

You said:

"It can be difficult to read the log-in screen if you have a visual impairment."

We did:

The screen closest to the Eye Clinic has had the colours changed to aid people with a visual impairment, the other screens can be changed by touching the eye logo.

You said:

"The doors to the clinic can be difficult to open for some patients."

We did:

We now have automatic doors operated by a touchpad for easier access to the department.

You said:

"It would be nice to have access to cold drinks and/or ice during the day and night."

We did:

Working with the Cardiology User Group and the Director of Nursing, we have installed an ice machine so cold drinks and ice are available 24/7.

Husband's thanks for wife's care

A grateful husband has thanked Ipswich Hospital for the "phenomenal" care given to his wife and Suffolk Family Carers for the support he received during her illness by donating a cheque for nearly £500.

Bryan Clarke's wife Barbara passed away in November aged 67 after spending five weeks on the Haughley Ward. He was so grateful for the compassion and courtesy which everyone at the hospital had showed since she was first diagnosed with dementia in 2013 that he asked for donations rather than flowers at her funeral.

"Everybody at the hospital was fabulous, from the doctors and nurses to the cleaners and porters. I've got nothing but praise for them - they were phenomenal," said Mr Clarke, who lives near

Felixstowe. "They would really put themselves out to make Barbara comfortable and were very helpful and courteous when I visited the ward every day for five weeks.

"Suffolk Family Carers were also marvellous and visited regularly during Barbara's admission and at home. I also got lots of help and advice from the Carers' Cabin at the hospital throughout her illness, which I really appreciated as by helping me, they were also helping her.

"Asking for donations at Barbara's funeral seemed like a no brainer and the right thing to do. I hope that the money will be spent wherever it will do the most good for other people. I would like to thank my family and friends for giving so generously."

Support for Family Carers

Carers' Cabin - drop in for:

- rest and respite, free refreshments and relaxation;
- emotional support and a listening ear;
- information - leaflets etc; and
- signposting and referral.

Location: Look for the striped cabin near the Garrett Anderson Centre, bus stops and South Wards (Entrance 2).

Opening times (subject to volunteer availability):

Monday: 10.30am - 4.30pm

Tuesday to Friday: 2pm - 5pm.

Alzheimer's Society Drop-in at the Cabin: First third Wednesdays of the month, 9.30 am - 12 noon.

Suffolk ●●●
Family Carers
Living Fuller Lives

The Suffolk Family Carers support and information workers provide:

- a key point of contact;
- support for you whilst the person you care for is in hospital;
- a link with you for support when the person you care for is discharged from hospital; and
- information and guidance.

Call Debbie and Esther on 01473 703756

IHUGs You Made a Difference Award

Following a very successful pilot of IHUGs You Made a Difference award last Autumn, we are delighted to announce that the award is going to be carried on. The panel are meeting early August to judge the next group of nominations, with the expectation of holding the awards one afternoon in October. IHUG would like to say "thank you" for all the support and lovely comments they've received since launching the award.

