The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

Meeting:	Board of Directors (in Public)		
Meeting Date:	1 June 2021	**Agenda item:**	2
Report Title:	Patient Story		
Author:	Linda Purdy, Associate Director of Patient Experience		
Executive Sponsor:	Laura Skaife-Knight, Deputy CEO		

Implications

Link to key strategic objectives
[highlight which KSO(s) this recommendation aims to support]

KSO1	KSO2	KSO3	KSO4	KSO5	KSO6
Safe and compassionate care	*Modernise hospital and estate*	*Staff engagement*	*Partnership working, clinical and financial sustainability*	*Healthy lives staff and patients*	*Investing in our staff*

Board assurance framework	Patient experience supports the delivery of safe and compassionate care as set out on Key Strategic Objective 1.	
Significant risk register		
	Y/N	If Yes state impact/ implications and mitigation
Quality	Y	Patient experience is a key element of quality, alongside providing clinical excellence and safer care.
Legal and regulatory		
Financial		

Assurance route

Previously considered by:	*N/A*

Executive summary

Action required: *[highlight **one** only]*	Approval	**Information**	Discussion	Assurance	Review

Purpose of the report:	To enable the Trust Board to learn from the experiences and concerns of our patients and consider this story in the context of the Trust's ongoing work to create an inclusive culture at QEH.
Summary of Key issues:	This month's story is from Julie who recently contacted and spoke to the Trust's Patient Advice and Liaison Service (PALS), Associate Director of Patient Experience and Deputy CEO regarding her concerns should she be admitted to hospital. Julie is a pre-operative transgender patient, who is proud to have QEH as her local hospital. Julie first contacted QEH to ask questions about how the Trust would be sensitive and respectful of her needs should she be admitted as an emergency patient. Julie wanted to know that she would be treated as a female patient and cared for in a female bay should hospital admission be necessary. Julie is working with the Trust in multiple ways to support QEH's ambition to create an inclusive culture for patients, their families and staff. This includes Julie contributing to the development of the Trust's

	Transgender Policy and sharing her story at the Trust's Lesbian, Gay, Bisexual and Transgender (LGBT+) Staff Network Group to raise awareness and educate colleagues about transgender patient needs.
Recommendation:	The Board is asked to note Julie's story.
Acronyms	Lesbian, Gay, Bisexual and Transgender (LGBT+)

Patient story

1. Introduction

As QEH prepares to mark Pride Month, which runs throughout June 2021, this month's story is from Julie, who recently contacted and spoke to the Trust's Patient Advice and Liaison Service (PALS), Associate Director of Patient Experience and Deputy CEO regarding her concerns should she be admitted to hospital in an emergency.

Julie is a pre-operative transgender patient, who is proud to have QEH as her local hospital.

Julie first contacted QEH to ask questions and to seek reassurance that the Trust would be sensitive and respectful of her needs should she be admitted as an emergency patient. Julie very much wants to be herself, and wanted to know that she would be treated as a female patient, and cared for in a female bay/ward should hospital admission be necessary.

QEH is an organisation which is absolutely committed to creating an inclusive culture – and one where differences are celebrated and embraced. This means a culture which regardless of sexuality, gender, disability, age, or ethnicity – everyone is treated fairly and equally, and as such Julie's story is an important and very relevant one to share. QEH aspires to be a trailblazer when it comes to creating an inclusive culture, and is well on the way to doing so with the culture transformation programmes, staff networks, education programmes and Equality, Diversity and Inclusion Workplan in place and through listening and to and learning from patient and staff experience.

2. Working with the Trust to improve the experience of transgender patients, their families and staff

As soon as Julie contacted the Trust, her concerns were taken seriously and listened to.

Within one hour of Julie making contact via phone, the Trust's PALs team contacted Julie to discuss her concerns almost immediately. This was followed by a conversation with the Trust's Associate Director of Patient Experience, who in response to Julie's concerns about the prospect of being blue-lighted to hospital, quickly reassured Julie that the Trust's patient record systems had been updated to reflect Julie's gender preference, which included her requirement to be cared for on a female bay/ward should she be admitted in an emergency. The Associate Director of Patient Experience and Deputy CEO took time to listen to and act on Julie's concerns and consider how Julie's story could be utilised to educate staff across QEH to further improve transgender patient, visitor and staff experience. Julie's experience has impacted positively on the Trust's understanding of how it feels to be a transgender patient and we have used this positively as follows:

- Julie and the Transgender Community have contributed to the development of QEH's updated Transgender Policy
- Julie has attended QEH's LGBT+ Staff Network (May 2021) to share her story so that colleagues can listen, learn and respond positively to support further improvements to

the experience of transgender patients, visitors and staff as part of our educational programme

- Proactive approach to support transgender patients to contact QEH to (1) discuss their gender preferences (2) pronoun preferences (3) share their experiences and (4) people in relationships with specific preferences where certain needs should be accounted for and recorded so that judgements or assumptions aren't made.

3. Patient story follow-up (Board of Directors, May 2021)

The Board heard the story of Gina and her husband who shared how positive their experience had been during their second pregnancy, and the birth of their daughter. Gina told the Board how their first pregnancy had resulted in the premature birth of their son, which generated many challenges and fears. Gina praised the care she and her husband received from the Women and Children's Division in preparing them for their second pregnancy. She described in detail the midwifery team and especially her named Consultant going over and above to care for Gina and her husband. It was a memorable meeting.

The letter that Gina sent to the Division thanking the Consultant and wider team for the care they had received has been shared with relevant colleagues.