The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

Meeting:	Board of Directors (in Public)		
Meeting Date:	7 December 2021	**Agenda item:**	2
Report Title:	Patient Story		
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Executive Sponsor:	Mrs Alice Webster, Chief Nurse		

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	Patients' and relatives' experience is a key element of quality, alongside providing clinical excellence and safer care.
Legal and regulatory	N	
Financial	N	

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 relatives and consider this story in the context of the Trust's ongoing work to improve not only patients' experience but also relatives experience at the QEH.
Summary of Key issues:	Learning from complaints as a Trust is pivotal to improving patient experience, as is listening and responding to patient and relatives' observations and feedback. This story for the Board describes how Ceri had to access emergency care from the Queen Elizabeth Hospital. Ceri described her observations of her experience as a health care professional but also as a patient as she journeyed through Emergency and Urgent Care and wanted to share her observations and experience.

Recommendation:	The Board is asked to note the reflections and experience of Ceri.
Acronyms	QSIR - Quality Service Improvement and Redesign (NHS England and Improvement)

Patient story

1. Introduction

Ceri advised she had begun to feel unwell late on the first day and struggled through the night with abdominal pain. The following day it was agreed that she goes to the Emergency Department as her symptoms were worsening.

Ceri arrived at The Queen Elizabeth Hospital and her first observation was that parking was extremely difficult. It was approximately 9 am and the car park was full by this time. Ceri eventually found a space and was then able to make her way to the Emergency Department (ED) to book in.

After the streaming process and waiting to be called Ceri noted that the ED waiting room was small and that there was the potential for overcrowding, she noticed younger patients giving up their seats for older patients and patients standing.

Ceri was seen quickly but as she went through the department she noted that the department as a whole seemed too small for the number of patients attending. In total Ceri was in the department for 7 hours.

Ceri was admitted to an assessment area, and although it was busy it appeared to be well-staffed.

Ceri also noticed the diversity of our workforce, nursing especially. She described a real mix of nationalities – and this saliently brought home the impact of 'where would we be without them?' Ceri saw the Trust poster 'meet the people who work here', which she thought was wonderful information for patients and staff alike.

From a medical perspective Ceri added, 'I felt involved, had timely decisions made by the medical team and they also discussed repatriation and follow up at home' involving me.

Ceri said that when you work in health, and you are a patient, you see things through a different lens and you understand things more. Ceri's experience was positive and has given us valuable insight of the care she received at the QEH.

2. Patient story follow-up (Board of Directors, 5 October 2021)

The Board heard how as a Trust we have begun to transform care for patients with a sensory deficit by working collaboratively with relatives and external agencies to improve patient experience. This work is ongoing and is part of the Patient Experience Work plan.