Agenda Item No. 6.

The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

REPORT TO THE BOARD OF DIRECTORS (IN PUBLIC)

RESPONSIBLE DIRECTOR:	REPORT FOR:		IMPACT ON BUSINESS:		
Emma Hardwick Interim Director of Nursing	Decision		High	Med	Low
	Discussion	✓	✓		
	Information	✓			
LEAD MANAGER:	**REPORT TYPE:**		**BAF REFERENCES & RAG:**		
Claire Roberts Associate Director of Patient Experience	Strategic				
	Operational	✓			
	Governance	✓	**RELATED WORK: (PREVIOUS PAPERS TO COMMITTEE)**		
PEER ASSIST:	**PEER REVIEW:**				
CQC Domain: (safe, caring, effective, responsive, well-led)	All				

Meeting Date: 30 May 2017

Report Title: Patient Story

PURPOSE:

To provide the Board with the context of today's 'Patient Story' so that the Board appreciates the background to the story and the difficulties that families can encounter in obtaining information and understanding the plan of care for their relative.

SUMMARY:

RISK ASSESSMENT (CROSS-REFERENCE WITH RISK REGISTER WHERE APPROPRIATE):

Strategic / External	Operational/ Organisational	Financial	Clinical	Legal/ Regulatory	Reputational / Patient Experience
	✓		✓		✓

RECOMMENDATION/S:

For information

Patient Story

Board of Directors meeting 30 May 2017

The patient story is kindly being provided by Ms. Sasha Frieze who is the daughter-in-law of a patient DS. DS had a protracted period of care with us beginning in December last year during which we sought a diagnosis for his problems. He finally underwent surgery at the Norfolk & Norwich University Hospital at the end of March and is now home and hopefully on the road to recovery. Ms Frieze has travelled from London to be with us today.

Ms Frieze and her family experienced a range of difficulties during the time that DS was in our care. As the family live at a distance, visiting time was limited and very precious and it was important to them all that they could use these visits to not only see DS but also to access information on the current plan of care so that they could better understand how they could support him and prepare for what might be the outcome of this journey.

Initially the outcome had appeared very bleak but then a different and quite complex picture began to emerge. DS was discharged home and underwent many of the diagnostic procedures as an outpatient but this only added to the difficulties for the family in understanding what was happening and being able to help DS.

Ms. Frieze would like to take this opportunity to share with you what it is like to be the relative trying to support a loved one on such a journey of care and treatment and her observations on how effective our systems and processes appeared to be from the viewpoint of an outsider trying to navigate their way through the system.

Claire Roberts
Associate Director of Patient Experience