

## Patient Experience Report Quarter 3 2023/24

### Introduction

This report is written for the board and contains patient experience information for Berkshire Healthcare (The Trust) incorporating feedback from complaints, compliments, PALS, our patient survey programme, and feedback collated from other sources during the quarter.

The below table shows information related to the overall Trust position in terms of patient experience feedback.

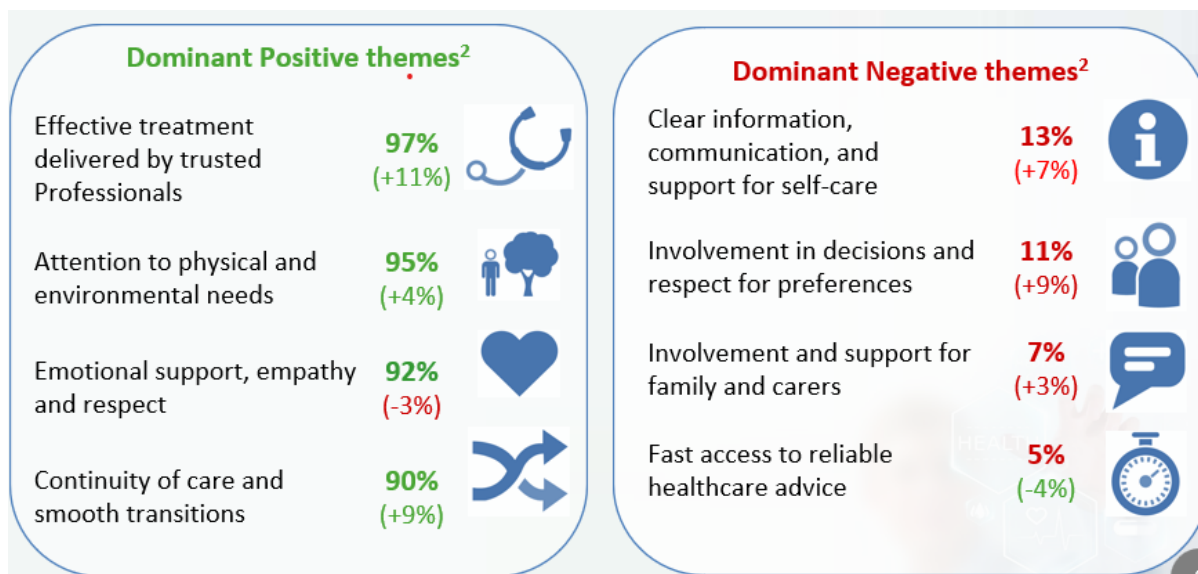
The iWGC tool is used as our primary patient survey programme and is offered to patients following a clinical outpatient contact or, for inpatient wards, on discharge via a variety of platforms. The tool uses a 5-star rating which is comparable across all services within the organisation and is based on questions in relation to experience, facilities, staff, ease, safety, information, involvement and whether the person felt listened to.

**Table 1**

Patient Experience – overall Trust Summary		Qtr 1	Qtr 2	Qtr 3	Qtr 4
Total patient contacts recorded (inc discharges from wards)		216,579	219,999	233,201	
Number of iWGC responses received	Number	6,450	7,156	7,286	
Response rate (calculated on number contacts for out-patient and discharges for the ward-based services)	%	3%	3.3%	3.1%	
iWGC 5-star score	Number	4.71	4.79	4.77	
iWGC Experience score – FFT	%	93.8%	94.5%	93.7%	
Compliments received directly by services	Number	1091	1229	1408	
Formal Complaints Rec	Number	68	64	75	
Number of the total formal complaints above that were secondary (not resolved with first response)		11	10	11	
Formal Complaints Closed	Number	53	64	69	
Formal complaints responded to within agreed timescale	%	100%	100%	100%	
Formal Complaints Upheld/Partially Upheld	%	62%	55%	52%	
Local resolution concerns/ informal complaints Rec	Number	36	50	30	
MP Enquiries Rec	Number	24	11	19	
Total Complaints open to PHSO	Number	3	3	5	

There are no significant changes identified in analysis of data that differs from previous reports, the highest number of complaints continued to relate to specific care and treatment concerns. The number of MP enquiries received has increased from 11 to 19. Physical Health in West Berks received the highest number of MP enquiries. We have received secondary complaints from two complainants.

Overall feedback remains overwhelmingly positive; the below show the most positive and negative themes based on free text responses within the iWGC experience tool that patients have documented to explain their experience.



The brackets ( ) in the picture above shows the comparison to the report for quarter two. This demonstrates that there has been an improvement in three of the positive themes, and two of the negative themes. An area that will be monitored over the next quarter is 'involvement in decisions and respect for preferences', which has shown a 9% decrease in satisfaction compared to last quarter.

Appendices 1 and 2 contain our PALS and Complaints information for Quarter three.

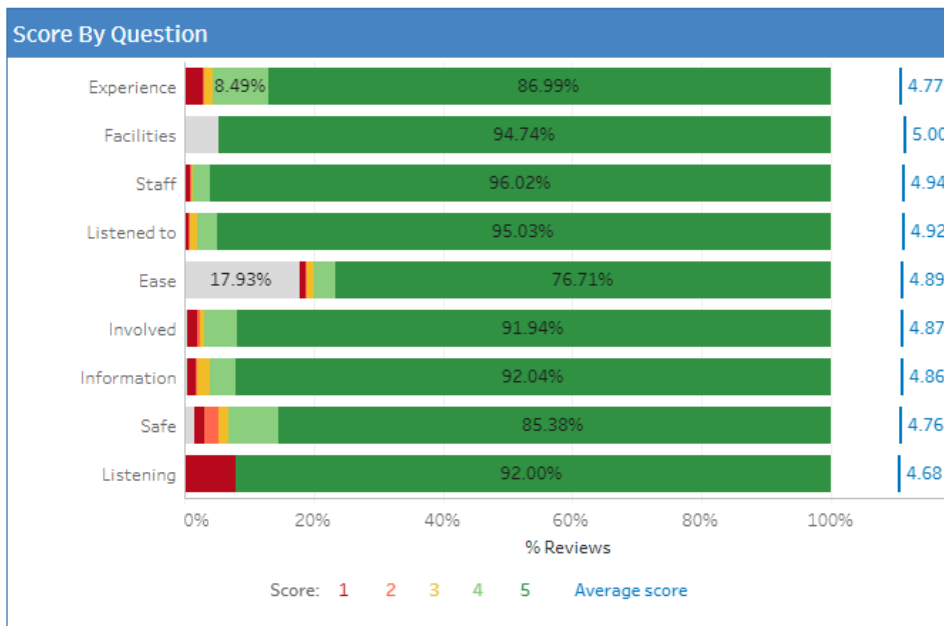
### What the data is telling us

Below is a summary and triangulation of the patient feedback we have received for each of our 6 divisions.

### Children and Young Peoples division including learning disability services.

**Table 2: Summary of patient experience data**

Patient Experience - Division CYPF and LD		Qtr 1	Qtr 2	Qtr 3	Qtr 4
Number of responses received	Number	556	1169	930	
Response rate (calculated on number contacts for out-patient and discharges for the ward-based services)	%	2.1%	3.4%	2.7%	
iWGC 5-star score	Number	4.59	4.7	4.87	
iWGC Experience score – FFT	%	89.3%	96.6%	95.5%	
Compliments received directly by services	Number	72	55	81	
Formal Complaints Rec	Number	14	15	9	
Formal Complaints Closed	Number	14	14	5	
Formal Complaints Upheld/Partially Upheld	%	93%	57%	80%	
Local resolution concerns/ informal complaints Rec	Number	6	14	8	
MP Enquiries Rec	Number	15	7	4	



For children’s services the iWGC feedback has seen a drop in the responses from last quarter, further work with the services is continuing to improve this, young people and parents/carers have been assisting in the ways to promote the new patient experience tool to other service users, including the design and layout of the new posters that will now be used across CYPF services.

Of the 930 responses, 899 responses related to the children’s services within the division; these received 96.1% positivity score, with positive comments about staff being helpful and kind and a few suggestions for further improvement, this included 6 reviews for Phoenix House where comments about staff being supportive and nurturing were very positive and there were some suggestions for further improvement regarding more detail about what to expect from the service and how to cope at home. 12 of the responses related to learning disability services and 19 to eating disorder services.

From the feedback that was received, ease and feeling listened to were most frequent reasons for individual questions being scored below 4.

**Children’s Physical Health Services**

There were 3 formal complaints for children’s physical health services received this quarter. One for School Nursing, one for Children’s Occupational Therapy and for the Immunisation service

846 of the 899 patient survey responses were in relation to children’s physical health services. The 2 services with most responses were the Health Visiting team, Wokingham and Health Visiting, Bracknell; the Health Visiting team in Wokingham received 268 of these responses which scored positively receiving a five-star rating of 4.93 and feedback included “[name removed] was very open attentive, supportive and communicated very important information with warmth. I felt seen, heard and cared for.” “We were warmly welcomed and made to feel very comfortable early in the session. Having a safe space with toys means conversation is easy and as a parent I can relax and pay attention to the conversation. The topics and points to discuss were easily approached and [name removed] made me and my child’s development feel very normal, which is great!”. There are also some responses that are associated with Health Visiting incorrectly which affects the overall rating for CYPF negatively. We are, along with iWGC, looking into this to ensure it is rectified.

**Child and Adolescent Mental Health Services (CAMHS)**

For child and adolescent mental health services there were 7 complaints received, these were primarily in relation to care, and treatment received and waiting times. Themes around

this included clinical care received and long wait for treatment. In addition to this, the service received 3 enquiries via MPs, a reduction from 7 in Q2. Most of these related to waiting times.

There have been 50 responses for CAMHS services received through our patient survey for this quarter. Currently the survey is accessed through paper surveys, online or configured tablets in the departments.

In addition to the current feedback tools, the anxiety and depression pathway have set up a question on the whiteboard in waiting rooms, asking for feedback and suggestions for young people and their families, there will be a differing question each month.

Compliments for Children and Young Peoples division included.

*'I just wanted to thank you for everything you've done for Young Person and for our family. I'm grateful for all the time and effort you have put in to try and understand and help support us at this tricky time for both our children.'*

*'I'm very grateful. I didn't think it would have made such a difference in a short time'*

Further work is being carried out with CAMHS to improve uptake as part of the wider patient experience improvement plan.

### **Learning disability**

There were no complaints received this quarter for Campion Ward regarding care and treatment on the ward.

Overall, there were 12 responses for all Learning Disability services from the patient survey received, responses were for the Community Teams for People with a Learning Disability, the Learning Disability Intensive Support Team and Campion Unit the Learning Disability inpatient unit. These received a 66.7% positive score, this was skewed by 1 response not having a score; other feedback included that staff were kind, *"Very positive and caring experience."*, *"Always kind, understanding and willing to help outside of box."* and *"Welcoming staff was good."*, there were comments for improvements including staff need to listen and patients want more information. 2 of the 4 responses that received with a score below 4 left no comments in the free text boxes, the remaining 2 had comments which included wanting more information, for staff to be polite, respectful, show kindness and treat people with dignity.

### **Eating disorders**

There was one complaint for eating disorders regarding the transition of a young person from children to adult services.

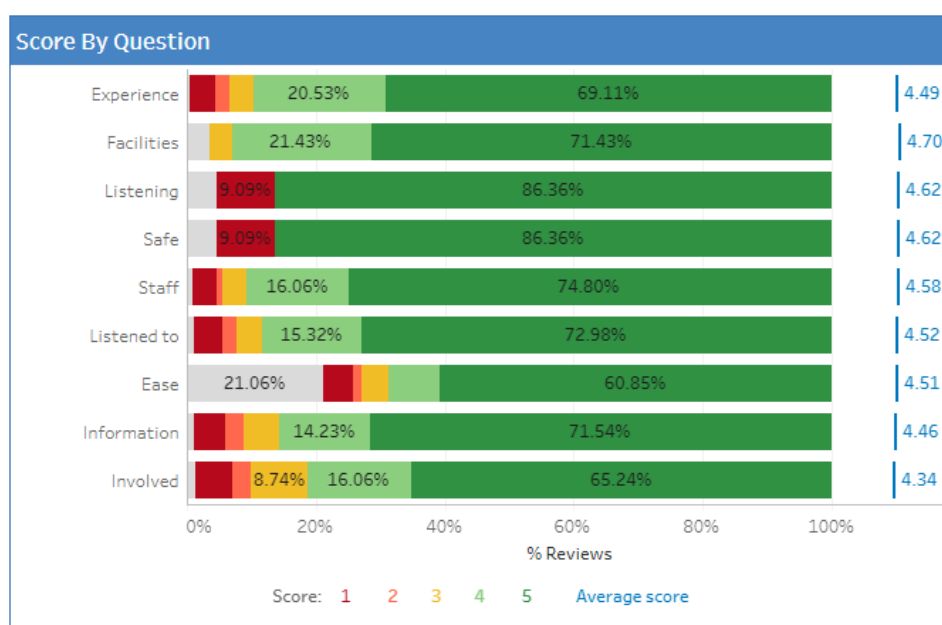
Of the 19 feedback responses received, 13 scored a 5 with comments such as *"The staff showed endless patience and cared deeply for me. They taught me so much and gave me the tools I need to be able to go forward, even though I still struggled with putting measures into practice by the time I left. I don't know if I'll ever fully recover but BEDS at least have me a fighting chance."*, *"The nurse that treated me was excellent. She spent a lot of time answering my complex questions and put me at ease throughout my treatment. Thank you."*, *"Everyone is very lovely and helpful."*. Areas for improvement included better communication and that the waiting time was too long.

## Mental Health Division

### Mental Health East division (Slough, Windsor, Ascot & Maidenhead, Bracknell)

Table 3: Summary of patient experience data

Patient Experience - Division MHE		Qtr 1	Qtr 2	Qtr 3	Qtr 4
Number of responses received	Number	449	448	492	
Response rate (calculated on number contacts)	%	2.7%	2.2%	2.5%	
iWGC 5-star score	Number	4.64	4.58	4.49	
iWGC Experience score – FFT	%	92.7%	89.1%	89.6%	
Compliments received directly by services	Number	37	26	20	
Formal Complaints Rec	Number	16	12	14	
Formal Complaints Closed	Number	16	13	15	
Formal Complaints Upheld/Partially Upheld	%	37%	23%	33%	
Local resolution concerns/ informal complaints Rec	Number	4	2	2	
MP Enquiries Rec	Number	1	2	0	



14 formal complaints were received into the division during this quarter; in addition, there were 2 informal/ locally resolved complaints. 15 complaints were closed during the quarter. 5 of these were either fully or partially upheld and 10 were not upheld. Four of the complaints related to communication or care and treatment, and a further four related to attitude of staff. Two complaints were from the same patient.

The services receiving the majority of iWGC responses were CRHTT East 147 responses, Psychological Medicine Service East, 117 responses, Memory Clinic Bracknell 37 responses and CMHT Bracknell 18 responses.

Across the CRHTT East survey responses the average 5-star score was 4.27 with 83.7% positive feedback, a decrease from last quarter. 123 of the (overall number of responses received) scored a 4 or 5-star rating with many comments about staff understanding, being helpful, listening and kind; "CMHT gave me an appointment at short notice. Dr and the crisis team were very professional and kind, helped me to get my medication quickly too." This quarter, questions relating to feeling involved and ease were least likely to be positive with areas for improvement and dissatisfaction with the service about feeling like they were not listened to, discharged without being seen and lack of communication.

Feedback from compliments for the service included, *'you are amazing, I just can't get over how you have changed my life in 5 weeks'*.

The Psychological Medicine Service - East received 83.8% positive score (4.25-star rating) and received positive feedback about staff being helpful, understanding, caring and supportive. *"My issues or needs were dealt with very, very professionally by all the wonderful staff here at Wexham Park Hospital who were and are extremely understanding to my needs and to what has happened and how I suffered and had been affected and my sufferings in all sense or forms. They took me under their wing and have guided me through most sympathetically and will be continuing to carefully closely with connection and help from my own GP account. I am truly thankful and most grateful. They are wonderful people here at the hospital are very, very supportive and They and will be continuing to be supportive and for that I am also extremely grateful along with my family's happiness and gratitude for what has been given and offered to me, so thank you. It has been an incredible journey just last week here at the amazing Wexham Park Hospital which I call hotel so thank you all of you I feel like the I've got my me back and I'm more than willing to continue whatever is required to help me and what has already been."*

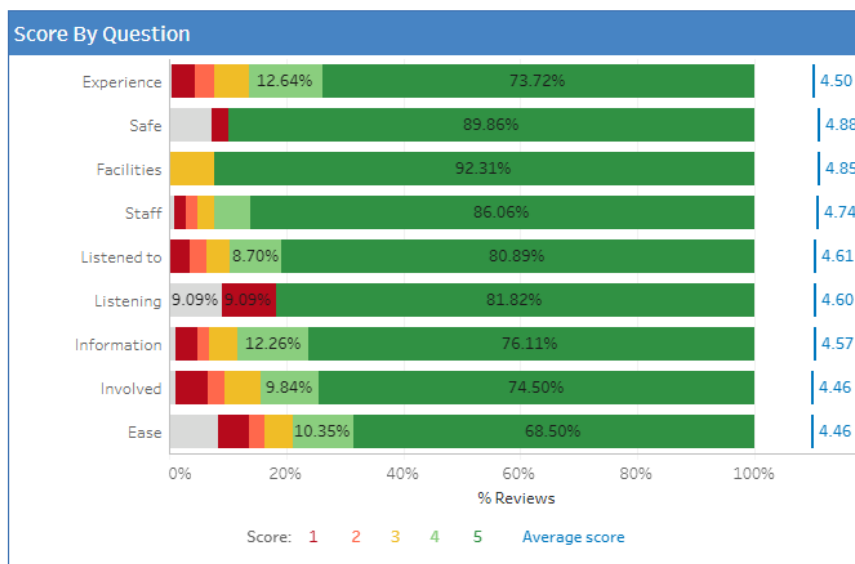
Memory Clinic Bracknell received 100% positive feedback (4.91-star rating), many of the comments were positive about staff being kind, friendly and listened to them. *"[name removed] was friendly and welcoming. She showed strong empathy and was very professional. I enjoyed talking to her. I left feeling more positive and looking forward to being taken out by a support worker."*

CMHT received 41 responses (Bracknell 19, WAM 4 and Slough 18) with 97.6% positive score and 4.61 star with 1 of the total responses scoring less than a rating of 4; comments included *" psychiatrists have listened well and explained their decision and advice thoroughly; 'there is nothing negative to say about the treatment I got', 'this is the first time I'm actually listened to' and 'I'm happy with the whole experience'* There were a number of positive comments about being listened to, staff being caring, helpful and kind. Some of the suggestions for improvement included having better phones lines for Slough Further work is being carried out with Mental Health services to improve uptake as part of the wider patient experience improvement plan.

## Mental Health West Division (Reading, Wokingham, and West Berks)

**Table 4: Summary of patient experience data**

Patient Experience - Division MHW		Qtr 1	Qtr 2	Qtr 3	Qtr 4
Number of responses received	Number	1246	1219	997	
Response rate (calculated on number contacts)	%	2.5%	2.3%	2.1%	
iWGC 5-star score	Number	4.61	4.58	4.56	
iWGC Experience score – FFT	%	89.3%	88.4%	86.4%	
Compliments received directly by services	Number	557	403	312	
Formal Complaints Rec	Number	12	15	12	
Formal Complaints Closed	Number	7	13	15	
Formal Complaints Upheld/Partially Upheld	%	43%	54%	53%	
Local resolution concerns/ informal complaints Rec	Number	7	5	5	
MP Enquiries Rec	Number	4	0	4	



The Mental Health West division has a wide variety of services reporting into it, including Talking Therapy services and Court Liaison as well as secondary mental health services. The 3 services with the most feedback through the patient survey were Talking Therapies 520 responses, CRHTT West 90 responses and PMS West 69 responses.

Within Mental Health West the questions relating to ease and feeling listened to have the least number of positive responses.

This division received 12 formal complaints during the quarter with CMHT receiving 7 and CRHTT receiving 2. There were 15 formal complaints closed with 8 being found to be upheld or partially upheld and 6 not upheld. One was resolved locally.

Mental Health West also received 5 informal complaint/locally resolved complaints and 4 MP enquiries.

For CRHTT there were 90 feedback questionnaires completed with an 83.3% positivity score and 4.42-star rating; with lots of positive comments about staff being supportive, kind and listening, *“The team was really sensitive and caring. They made an effort to fully understand my condition and truly understood that my physical health condition was causing my mental health decline. It was groundbreaking for me; I'd never been treated like that before. Kudos to the team for listening to me clearly, it has resulted in me receiving the support I needed for my condition.”*; a number of the less positive reviews talked about lack of communication and information about the service, not informed about planned discharge and wanting the staff members who they are being seen by to be consistent.

There were 41 responses received for West CMHT teams with 85.4% positivity score and 4.48-star rating, 35 of these were positive with comments received that staff were professional and helpful, there were 6 negative responses with reviews stating that patients felt like staff didn't listen, wanted more information on medication given and the treatment being provided.

Older adult and memory clinic combined have received 90 patient survey responses during the quarter with a 95.6% positivity rating (4.84-star rating) some of the feedback included *“The overall staff had a next-door neighbour feeling about what they say and do & are genuinely friendly & understanding. You can see it's genuine from the top to the bottom from everybody and wish them all well as they deserve to get recognise for their kindness, knowledge, and understanding of what the person and direct family are going through. You are all the unsung heroes, and everybody should be supported. Thank you.”*

The West Psychological medicine service received 69 responses with an 81.2% positive score and 4.38-star rating (9 responses scored less than 4) many of the comments were positive about staff listening, being helpful and understanding.

For Talking Therapies received 502 responses during the quarter, their patient survey responses gave a positivity score of 85.2% (4.55-star rating), 76 of the reviews scored less than 4. The vast majority of comments were still very positive about the staff, including that they listened, were helpful and kind. A number of the comments/areas for improvement were that the wait was too long, felt that they were not given any help or support and discharged too quickly. For example, *“They said they couldn’t help and gave me other services to self-refer to. There is now an 8-month waiting list, so I still haven’t received any help.”*

Examples of positive feedback about Talking Therapies included, *“All the people I spoke to were very skilled. They listened and provided excellent care. Were very knowledgeable and non-judgmental. Excellent service. Feel very happy with the service. Certainly, helped me.”*, *“I received incredibly helpful careers advice which made me feel more optimistic about the opportunities out there and how to find them. I thought the advice was appropriate to my needs and being given to me in a pdf booklet means I can access support subsequently whenever I need. I think careers advice is such a good part of talking therapy because it contributes a lot to my mental health and being able to receive practical support for that is great.”* and *“My therapist, [name removed], was amazing! She listened without judgement, showed me empathy and compassion. She provided me with invaluable support, every session, that I could put into practice in the weeks and months that followed. I will forever be grateful for her knowledge and the tool kit that she provided me with. I often return to this when I experience challenges. It has made me more resilient and given me a more realistic self-perception. Her support, has been truly life changing for me and my family!”* Patients reported that they felt *“My therapist [name removed] was amazing. She listened but also spoke rather than waiting for me to try and figure stuff out. I definitely felt it was a 2-way conversation and she gave me an insight into a different version or way of thinking.”*, *“[name removed] was personable, professional and courteous. She listened when I spoke and advised me clearly and with care. I felt confident in her expertise.”* and *“[name removed] makes me feel listened to & understood. He teaches me strategies to help me understand and manage my depression, and homework to do between sessions.”*

### Op Courage

Op COURAGE is an NHS mental health specialist service designed to help serving personnel due to leave the military, reservists, armed forces veterans and their families. During this quarter, the Trust did not receive any complaints about this service.

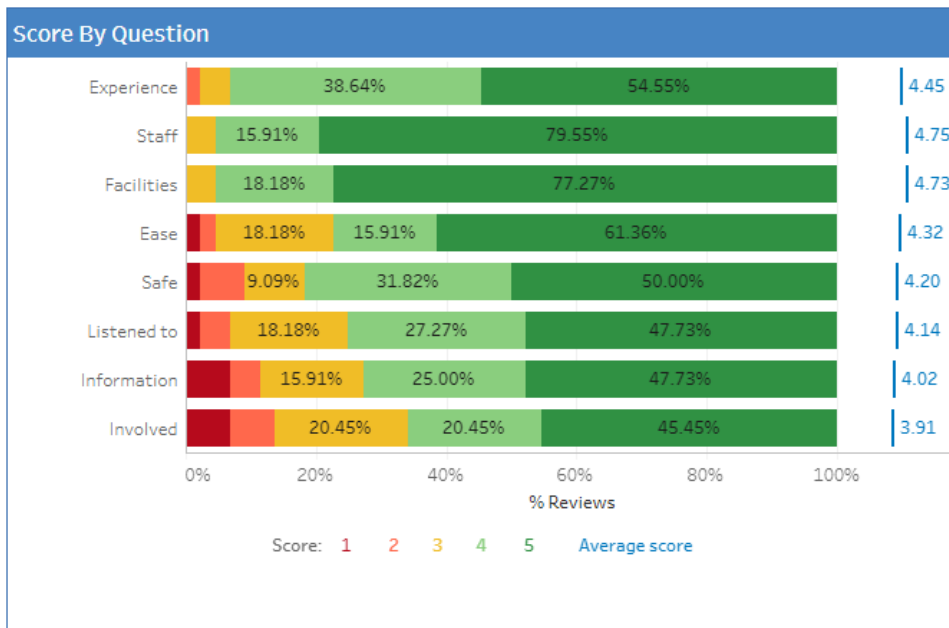
Further work is being carried out with Mental Health West services to improve uptake as part of the wider patient experience improvement plan.

### Mental Health Inpatient Division

**Table 7: Summary of patient experience data**

Patient Experience - Division MH Inpatients		Qtr 1	Qtr 2	Qtr 3	Qtr 4
Number of responses received	Number	43	37	44	
Response rate	%	28.3%	28.5%	23.5%	
iWGC 5-star score	Number	4.30	4.05	4.32	
iWGC Experience score – FFT	%	88.4%	78.4%	93.2%	
Compliments	Number	12	11	13	
Formal Complaints Rec	Number	10	4	8	
Formal Complaints Closed	Number	5	5	7	
Formal Complaints Upheld/Partially upheld	%	80%	60%	57%	
Local resolution concerns/ informal complaints Rec	Number	0	0	0	
MP Enquiries Rec	Number	0	0	2	





The satisfaction rate was 93.24% with 3 of the 44 completed questionnaires giving scores of 1-3. The individual question themes would indicate that the question relating to feeling involved received the least positive scores with overall 5-star rating for this question being 3.91 and 15 of the 44 giving a score of 3 or less to this question.

There were 8 formal complaints received for mental health inpatient wards during the quarter across Place of Safety, Daisy, Bluebell and Sorrel wards; they were mainly regarding care and treatment.

There were 7 complaints closed for this division during the quarter and of these 4 were partially or fully upheld and three were not upheld.

There were many positive comments received in the feedback including comments such as staff were friendly, kind, caring and helpful. There were some comments for improvement about more opportunities to go outside, better communication from staff to patients and more activities on the wards. Examples of the feedback left are *“Because they met all my needs made me feel safe in the environment for me to be ready for the outside world Made me want to be a key worker after what I’ve been doing in the hospital, I have done for myself to be better now I’m ready to be a dad again to my kids have to thank you to all the staff love every step.”* *“Because I think it’s helped me to have a greater understanding of mental health and how much of an invisible illness it can be and how hard the staff work to help get people better.”*, *“The care and dedication of the staff is excellent. I was in a very dark place and the staff were very caring and supportive and have helped me to recover my mental health. Thank you for giving me my life back.”* There were no responses for a Place of Safety.

Focus groups were arranged on each of the four adult acute wards at PPH facilitated by Nurse Consultants with 20 patients attending this quarter. The aim was to look at how the environment on the acute wards could be improved from the patients perspective. The focus groups explored four areas.

1) Views on single gender wards vs mixed wards: *There was an overwhelming preference for mixed wards with an option for single gender wards for those who needed for safety reasons.*

2) Moving between wards for different stages of treatment (diagnosis, treatment and recovery). *There were mixed feelings about this, overall the patients could understand how the concept looks good in theory but are concerned about how it would translate to practice - fear around changing relationships being the number one concern.*

3) Best use of space to improve environment/experience. *The patients would like increased sense of community in layout, more activities (evenings and weekends), more quiet spaces and sensory area.*

4) Experience of having treatment in an Out of area bed. *There were mixed feelings about being in an out of area placement, with a thought from some who had been in out of area placements believing that the ward environment and ability to provide individualised care at PPH was needed to compete with the better placements.*

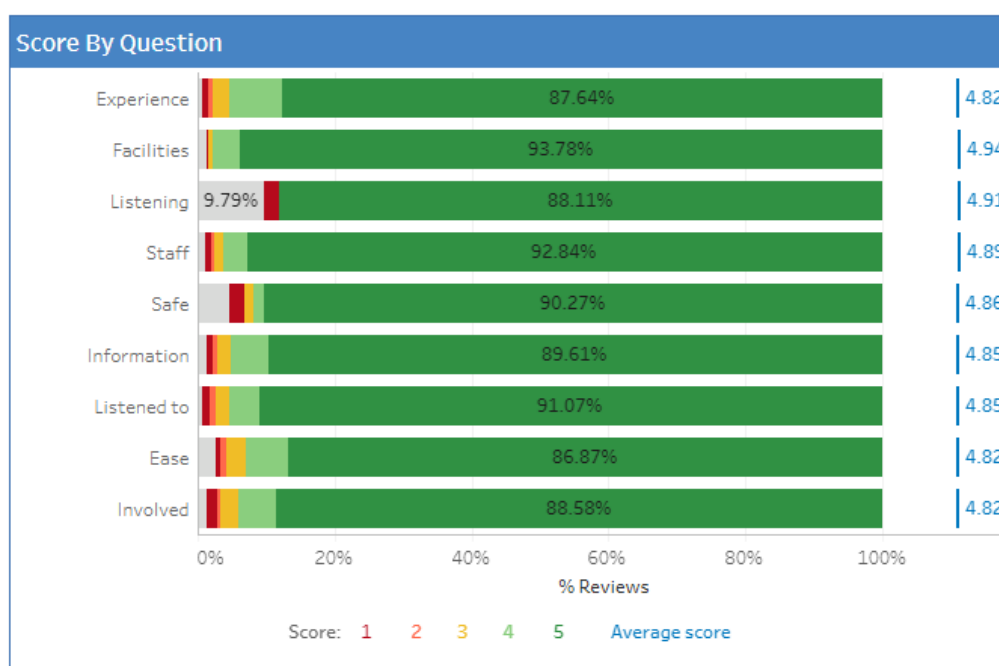
There is ongoing work at Prospect Park to increase feedback including work within the Therapy department.

## Community Health Services Division

### Community Health East Division (Slough, Windsor, Ascot and Maidenhead, Bracknell)

**Table 5: Summary of patient experience data**

Patient Experience - Division CHE		Qtr 1	Qtr 2	Qtr 3	Qtr 4
Number of responses received	Number	2044	2016	2136	
Response rate (calculated on number contacts for out-patient and discharges for the ward-based services)	%	5.5%	7.1%	5.3%	
iWGC 5-star score	Number	4.86	4.88	4.85	
iWGC Experience score – FFT	%	97%	96.7%	95.5%	
Compliments received directly into the service	Number	217	401	636	
Formal Complaints Rec	Number	2	6	10	
Formal Complaints Closed	Number	2	5	8	
Formal Complaints Upheld/Partially Upheld	%	50%	40%	62%	
Local resolution concerns/ informal complaints Rec	Number	1	8	1	
MP Enquiries Rec	Number	1	1	0	



Of the 10 complaints received this quarter, three were for Henry Tudor Ward which included transfer arrangements alongside care and treatment; three for District Nursing (two were for the Slough team and one was about the team in Windsor, Ascot and Maidenhead). Care and Treatment, and Attitude of Staff were the main themes.

There were eight complaints closed, two partially upheld and three upheld and two not upheld. One complaint has been progressed as an incident review.

Hearing and balance received 154 responses to the patient experience survey with a 94.8% positive score and 4.87-star rating.

East Community Nursing/Community Matrons received 274 patient survey responses during the quarter with a 98.9% positive scoring, many comments were about staff being professional and kind, for example *"The Matron and OT lady were extremely kind, helpful and professional. They were so supportive to me at a very difficult time, and it is greatly appreciated. Not everyone has the ability to help older folk, but these two ladies were truly excellent, I cannot stress this highly enough."*, *"[name removed] was very professional, she contacted me to arrange a convenient time to visit. I felt listened to and I was given valuable information. very patient and caring."*, *"The nurses were very kind as they came to check on me even when I was not answering their calls. They were both respectful and listened to my concerns and offered support."* and *"[name removed] is very kind, respectful and supportive. She brought joy with her smile into our home and managed to offer the support to make my life manageable. Very grateful for her support."* There were also some comments around some nurses needing more training for example *"Better training for Nurses. More Band 5 Nurses are needed, because of their broader knowledge. Nurses with less knowledge can't provide the throughout service that the patient needs."*

The wards received 122 feedback responses (69 responses for Jubilee ward 94.2% positive score and 53 Henry Tudor ward 90.6% positive score). Most of the comments for improvement were related to staff communication, patients wanting more physio and the patient experience of the food was very variable ranging from food needing to improve and limited choice to being impressed with the food, food so good. There were many comments about staff being kind, compassionate and helpful.

Within MSK physio in the East, there was a high number of responses to the patient survey and a high positivity score of 92.8 % (4.81-stars), comments were very complimentary about staff being professional and helpful, *"From arrival, to being seen by the physiotherapist, all staff were friendly, polite and professional. I was asked lots of questions to determine my knee problem and my treatment plan was demonstrated and discussed appropriately. I have access to videos to remind me how to do the exercises properly. I have a follow up appointment in a timely manner. Thank you."* The reoccurring improvement suggestion for this quarter was for a sooner appointment.

Outpatient services within the locality received a positivity score of 96.8% with 4.86 stars from the 617 responses received. With some very positive feedback including for the UCR & Virtual Community Ward, *"The service is amazing, and I am very pleased and thankful. Everyone in this team is wonderful and provide great care. did not know this service exist. So happy for the care given to me. five stars for the team."*

The diabetes service received 71 feedback responses with 94.4% positivity and some lovely comments including *"The DSN was very knowledgeable and listened to my concerns about my diabetes control. Together we have come up with a plan to adjust my insulin and have weekly telephone consultations to go through my diabetes changes. Feel well supported and know I can contact the team at any time. Very happy."* Alongside some helpful suggestions for the service to consider around improving the room layout such as *"The layout of the room was not conducive to the projection of the speaker's voice, and to seeing the projection on the screen. A horseshoe shape would have been easier!"*

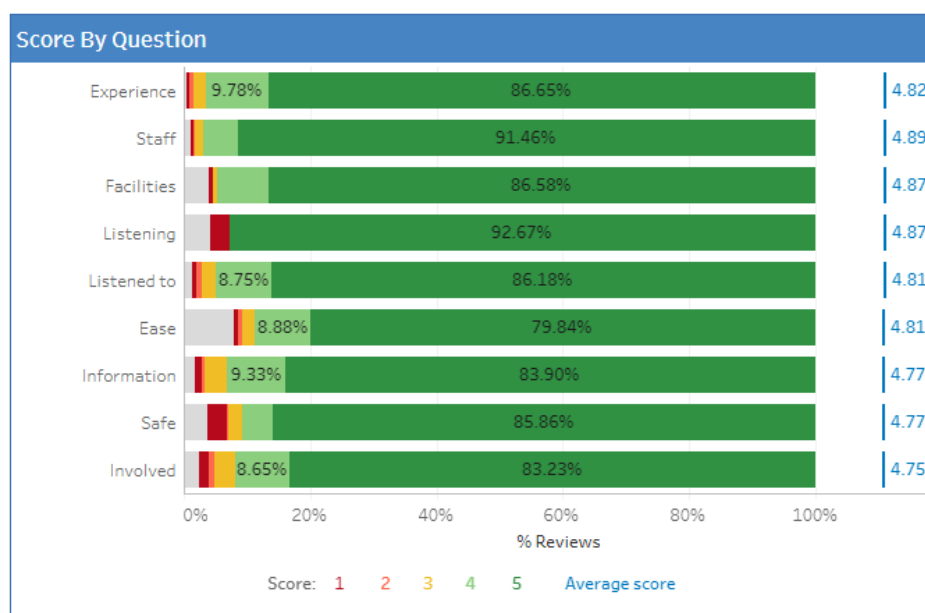
The Assessment and Rehabilitation Centre (ARC) also received positive feedback including *“Everybody from the Lady receptionist right through the physiotherapists, and the doctor were all exceptionally pleasant and exceptionally competent. I am very impressed and realise that for all the problems that the NHS has, it is a very skilled and pleasant organisation. Thank you.”*

Community Health services currently have a project group to improve feedback responses.

## Community Health West Division (Reading, Wokingham, West Berks)

**Table 6: Summary of patient experience data**

Patient Experience - Division CHW		Qtr 1	Qtr 2	Qtr 3	Qtr 4
Number of responses received	Number	2056	2239	2659	
Response rate (calculated on number contacts for out-patient and discharges for the ward-based services)	%	2.5%	2.8%	2.9%	
iWGC 5-star score	Number	4.81	4.82	4.81	
iWGC Experience score - FFT	%	95.1%	96.3%	96.4%	
Compliments (received directly into service)	Number	196	298	345	
Formal Complaints Rec	Number	12	10	16	
Formal Complaints Closed	Number	7	14	14	
Formal Complaints Upheld/Partially Upheld	%	86%	86%	57%	
Local resolution concerns/ informal complaints Rec	Number	18	25	14	
MP Enquiries Rec	Number	3	2	4	



Community Health West saw an increase in responses this quarter. There are a significant number of services within the division and a generally high level of satisfaction received as detailed in the overall divisional scoring of 96.4% positive satisfaction and 4.81-star rating and the question on staff receiving a 96.9% positive scoring from the 2659 responses received.

There were 16 formal complaints received during the quarter, these were split across several different services. Of these the Out of Hours GP service (WestCall) received 7. The Urgent Treatment Centre, District Nursing and Community Dental Services received two complaints each during the quarter.

There were 14 complaints closed for the division during the quarter with 2 being upheld, 6 partially upheld, and 5 not upheld. One of the complaints raised has been progressed as a serious incident investigation.

During this quarter the community hospital wards have received 176 responses through the patient survey receiving an 92.6.% positive score and 4.60-star rating, (13 responses scored 3 and below) questions around feeling involved and listened to receive the most results of 3 and below; comments include staff were friendly and caring, *“From the beginning of my stay in Oakward it has been a real 'lift' to hear the staff being so friendly and professional together while bringing both into the patients rooms.”*, *“All staff were very friendly and helpful.”*, *“Staff was very helpful in getting me back on my feet very caring and polite at all times.”* And *“From day one my progress advanced steadily, supported by professionally caring people.”*, there were some individual comments where patients were less satisfied, with comments including better communication, better food, not ignore patients and some staff need to improve their attitudes.

Of the 7 complaints for the Out of Hours GP service, four related to care and treatment (three of which were raising concerns about the diagnosis and clinical management), one was relating to Access to Services, one for Medical Records and one regarding Discrimination and/or Cultural Issues.

WestCall received 8 responses through the iWGC questionnaire this quarter (87.5% positive score, 4.66-star rating, 1 score received below 4. Positive comments included *“[name removed] [name removed] was so lovely. I rang up as I was positive for covid, and I can have anti-viral treatment. I was a bit worried as I only had it a month ago and fully vaccinated. [name removed] [name removed] was so kind and reassuring. [name removed] [name removed] even looked up my recent sputum results for me and really assessed me holistically. They had a lovely manner and organised everything that I needed for the antivirals.”* *“Very efficient service always keeping you up to date. Very thorough with examinations just in case leaving nothing left unchecked.”* WestCall received 19750 contacts during the quarter.

Podiatry services received 206 patient survey responses. Most responses were very positive receiving 5 stars (overall 99.5% positivity 4.95-star rating) with examples including *“My podiatrist and podiatry assistant were fantastic, everything was fully explained, I was listened to, and the procedure and follow-up appointment were excellent.”* and *“The care, thoroughness, and kindness provided by both people who looked after me at the Tilehurst podiatry clinic was outstanding.”*

There were two complaints for Community Nursing, relating to attitude of staff and discharge arrangements.

To provide some context across our East and West District Nursing teams combined there were 59,817 contacts this quarter. Lots of comments included nurses were kind, helpful and friendly, *“Very grateful to the Chalfont team for care of husband whilst he was on a syringe driver. All of the team were wonderful, everyone that visited was really kind, very thankful for all the support.”*, *“The care that [name removed] gave to both of us today was excellent [name removed] was very helpful understanding very good at her job.”* and *“The District Nurses were amazing, and he very much appreciated the great care and friendly nurses that visited.”* There were several positive comments about nurses being caring and there were very few suggestions for improvement, would like to know when nurse is visiting and to let patient know if visit is cancelled.

MSK Physio has received one complaint in the quarter relating to the clinical care the patient received. The service has received 315 patient survey responses with a 96.2% positive score (4.90-star rating), very few areas for improvement were included in the feedback there were a few suggestions including parking, provide more sessions and have more privacy in the rooms and the overall feedback was extremely positive with lots of comments about staff were friendly, professional, kind and listened.

The services across the division received many compliments including “I’m sure you’re all aware he passed away on Saturday evening, just wanted to thank every single one of you for the help that you gave and making it possible for him to stay at home. He wanted so much to pass away at home and obviously I wanted that as well, so you made that possible. I just like to thank you even though I could be tricky at times, but I hope you understand that he was my whole life any away thank you ladies you have been amazing I will write in at some point as well as I sure you don’t always accept the praise that you should so again thank you so much.”

Community Health services currently have a project group to improve feedback responses.

**Demographic profile of people providing feedback** (Breakdown up to date as at the end of Quarter 3; from our Business Intelligence Team)

**Table 8: Ethnicity**

Ethnicity	% Complaints received	% Patient Survey Responses	% Breakdown of Q3 attendances
Asian/Asian British	12%	3.2	10.30%
Black/Black British	0%	2.3	3.26%
Mixed	2.70%	1.6	3.19%
Not stated	13.30%	6.3	2.95%
Other Ethnic Group	1.30%	3.8	2.60%
White	70.70%	82.9	77.70%

It will be important to ensure as we continue to gain an increase in our patient survey responses that everyone is able to access and use the survey; the survey is provided in easy read and a number of differing languages, but it will be important to ensure that the prompts to complete this are not inhibiting feedback representative of the community and our patient attendance.

**Table 9: Gender**

Gender	% Complaints received	% Patient survey responses	% Breakdown of Q3 attendance
Female	50.67%	53.7	55%
Male	48%	32.1	45.32%
Non-binary/ other	0%	1.6	0.03%
Not stated	1.33%	13.7	0%

This would indicate that whilst the breakdown by attendance is fairly equally split as are complaints it would appear that we are still more likely to hear the voice of the patient through the patient survey if they are female. There continues to be a high number of patients who have not completed their age on the patient survey (this is not a mandatory field).

**Table 10: Age**

Age Group	% Complaints received	% Patient Survey Responses	% Breakdown of Q3 attendance
0 to 4	3%	1%	7.27%
5 to 9	4%		2.20%
10 to 14	9.33%		3.50%
15 to 19	5.33%		4.86%
20 to 24	8.00%	1.9%	3.06%
25 to 29	5.33%		3.07%
30 to 34	2.67%	1.3%	3.08%
35 to 39	6.67%		3.56%
40 to 44	5.33%	10.2%	3.57%
45 to 49	4.00%		3.43%
50 to 54	5.33%	21.6%	3.99%
55 to 59	5.33%		5.31%
60 to 64	6.67%	25.7%	5.27%
65 to 69	6.67%		4.89%
70 to 74	6.67%	28.6%	6.04%
75 to 79	2.67%		8.71%
80 to 84	4.00%	5.4%	9.77%
85 +	4.00%		18.42%
Not known	5.33%	4.4%	0%

### Ongoing improvement

Complaint Handling Training continues to be delivered by the Complaints Office to support ensuring robust investigation and response to any complaints (formal or informal) that are received.

All services have access to a tableau dashboard detailing response to our patient survey including free text comments and this is refreshed daily to enable live data to be used by services alongside improvement work being undertaken.

Many of the teams are starting to use the feedback and improvement suggestions received through the iWGC tool, services like wards and outpatient departments are also starting to display these for services users and their loved ones to see.

Some examples of services changes and improvements are detailed below.

Service	You said	We did
<b>CAMHS Specialist Community Team</b>	Young people/families requested resources.	More relevant resources made available in waiting rooms.
	Young people/families requested access to Wi-Fi.	Posters put in waiting rooms with NHS WiFi details.
<b>CAMHS Phoenix</b>	'We'd like more staff support for service users'	Continuing professional development slots for all staff held weekly to ensure that all staff are able to positively support service users during meal times and in the service.

		<p>Weekly clinical team meeting feedback given to all service users after the meeting has taken place.</p> <p>Weekly team meetings to review care plans.</p>
<b>Immunisation Team</b>	Young people wanted more information about immunisations.	<p>The immunisation team have been delivering assemblies in schools.</p> <p>Fact sheets given directly to young people.</p>
<b>Community Inpatient Wards (Wokingham)</b>	<p>Families said that they did 'not always feel listened to' and that it was sometimes difficult to find and speak with the staff that they wanted to speak with to understand fully their loved ones care and treatment.</p> <p>Patients and families wanted to understand 'what does it mean when you say I'm independent or aiming to be independent'.</p>	<p>bookable face to face 'catch up sessions' for families with any speciality have been introduced with sessions have been well received. Patients often attend the sessions with their family.</p> <p>The therapy team will be trialling a patient held document with information on their goals during admission and goals for discharge. This will engage patients to have a better understanding of where they are in their rehab journey, and hopefully also make clearer what aspects of care they can be independent.</p>
<b>Heart Failure (East)</b>	Patients have reported they can sometimes get lost going to the WAM clinic.	The service is working with Estates to improve signage.
<b>Hearing and Balance</b>	Wheelchair users and those with difficulty standing would like hand mirrors to view their new hearing aids.	Hand mirrors are now provided in clinic rooms
<b>Diabetes Service</b>	We received lots of feedback from patients asking for recyclable insulin pens.	The team worked with BFHT sustainability lead and a manufacturer to source a recyclable pen. Although we only prescribe not dispense, they have worked with local pharmacy providers to set them up with the scheme and provided the drop off boxes so our patients have a more sustainable option.

## 15 Steps

There were no 15 step visits this quarter. The Head of Patient Experience is leading an end-to-end review of the 15 Steps programme, looking at how these are planned, reported, and how any improvements are implemented. Our review is providing information into to national NHSE review of the 15 Steps programme. Insight from our services, Governors and Non-Executive Directors is integral to this piece of work.



## **Summary**

Whilst the majority of feedback about our staff and the experience of those using our services has remained very positive, we recognise that this is not the experience for everyone and value all feedback to help us understand peoples experience and make improvements where this is needed.

Continuing to increase feedback to enable services to understand the experience of those using their services and to use this for improvement remains a key strategic ambition for the Trust and, all of our divisions are reviewing how they ensure that patients understand the value that we place on receiving this feedback to further increase the amount of feedback received.