



**Report on drop-ins & patient
feedback gathered for Trafford
General Hospital**

April 2015

June 2015

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Executive Summary

This report summarises patient experience data gathered regarding Trafford General using a range of methods:

- hospital drop-in conducted by Healthwatch Trafford in April 2015;
- Healthwatch Trafford online feedback centre added by residents independently over 2015;
- face to face public engagement at a range of local venues by the Healthwatch Trafford Engagement Worker;
- telephone calls from members of the public over 2015

We have analysed this feedback in context of other patient experiences gathered at previous drop-ins (December 2014, January and February 2015).

Aims of the hospital drop-in and all face to face engagement:

- to obtain and collate qualitative patient experience data regarding a range of health / social care services, in particular Trafford General Hospital;
- to identify where local services are working well and where improvements can be made;
- to work with service providers, including Trafford General to encourage positive change to service design and delivery where possible;
- to share and promote examples of good practice locally, regionally and nationally
- to raise the profile of HWT and increase public awareness of the service;
- to signpost people to relevant health /social care or voluntary sector services.

At the April 2015 drop-in, 30 residents and 17 hospital staff members were engaged.

6 patient experiences were recorded, (relating to Trafford General, GP Surgeries, Salford Royal Hospital and Altrincham General Hospital).

4 people were signposted to services including: Trafford Walk-In Centre, Independent Complaints Advocacy (ICA), Healthwatch Wigan, Healthwatch Salford and Healthwatch Bury.

In total, when combined with previous drop-ins, 314 people have been engaged at Trafford General drop-ins and 43 patient experiences recorded.

The majority of feedback received remains positive and highlighted the following areas for praise; Physiotherapy, Urgent Care Centre, In Patients, Medical Assessment Unit, Rheumatology and Orthopaedics.

Negative comments concerned the following areas: reduction in clinics in Audiology, accessibility issues within the hospital environment and with BSL Interpreters, communication between CMFT Hospitals (Trafford General and Manchester Royal Infirmary), cancellation of operations and concern around costs

within the ENT Service and discharge of an elderly patient from a ward without care plans in place.

The patient journey case study highlights concerns around care and medical treatment for an in-patient with Parkinsons.

Background Information

Healthwatch drop-ins at Trafford General Hospital commenced in December 2014 through liaison with Central Manchester Foundation Trust staff: Jane Grimshaw, (Head of Nursing at Trafford General Hospital) and Linda Adamson, (Clinical Effectiveness & Patient Experience Lead (Trafford)). Staff and trained Healthwatch Trafford volunteers are present at the drop-ins.

Aims

- to obtain and collate qualitative patient experience data regarding a range of health / social care services, in particular Trafford General Hospital;
- to identify where local services are working well and where improvements can be made;
- to work with service providers, including Trafford General to encourage positive change to service design and delivery where possible;
- to share and promote examples of good practice locally, regionally and nationally
- to raise the profile of HWT and increase public awareness of the service;
- to signpost people to relevant health /social care or voluntary sector services.

Methodology

Drop -Ins

HWT staff and volunteers set up a market place stand and pop-up banner in the hospital restaurant. Healthwatch leaflets, free resources (stress balls and pens), and other resources, including information sheets on PALS were available.

Patients, their family members and carers were approached by Healthwatch staff/volunteers, or vice versa, given leaflets and engaged in discourse around Healthwatch and patient experiences. Where appropriate, paper copies of feedback forms were distributed and support offered in completing them (see Appendix 1). The paper copy feedback forms mirror the online Healthwatch Trafford Feedback Centre; respondents are asked to rate the service using a five star rating system for overall satisfaction and then given the option to rate specific elements of their treatment and to leave comments.

The star rating system:



Face to face engagement

This is carried out at a range of local community venues with a wide range of audiences by the Engagement Worker employing the same tools as at the Trafford General drop-ins.

Telephone calls from Trafford residents

These are made by a diverse residents and answered by Healthwatch Trafford staff. Phone calls range from information and signposting requests to residents wishing to report concerns with particular services. Where concerns regarding a health or social care service are heard they are recorded and wherever possible, passed on to service providers to influence positive change.

Online feedback

This can be left by members of the public using the 5 star rating system explained above.

Drop-in Data Analysis

People engaged with at April 2015 drop-in



30 Patients & carers 17 Hospital Staff

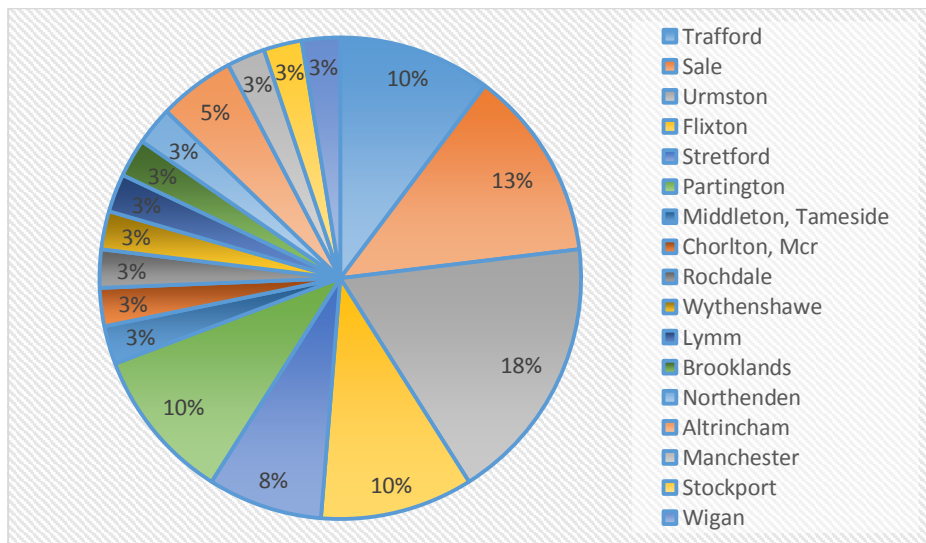
Total engagement over December 2014 - April 2015

311 patients, family members / carers and hospital staff have been engaged by HWT.

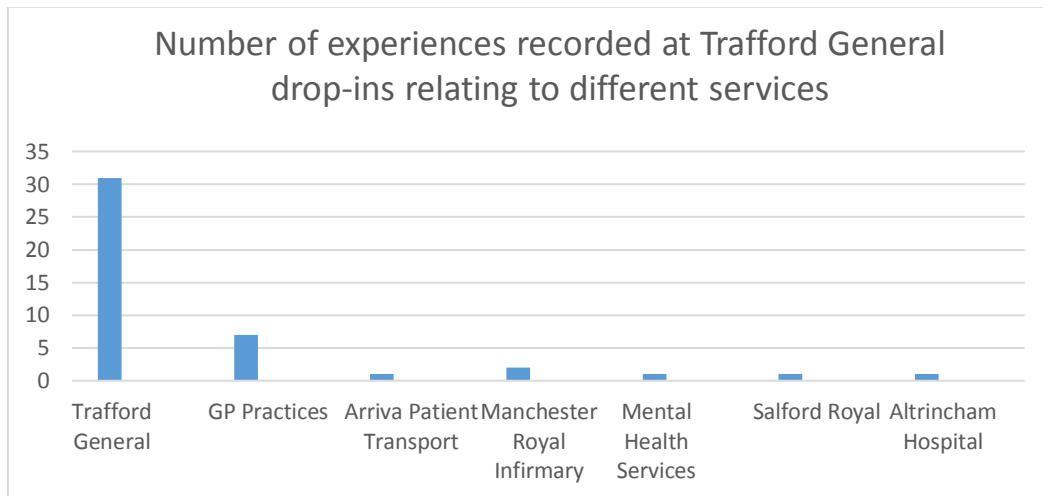
43 patient experiences were recorded.

30 of these 43 patient experiences related to Trafford General Hospital

Respondents by Area:



Summary of Feedback from drop-ins



The Healthwatch Trafford online Feedback Centre (where experiences gathered at the drop-ins were recorded) shows a four star average rating given for overall satisfaction with service at Trafford General Hospital:

Trafford General Hospital

Address | Moorside Road
Davyhulme
Manchester
Greater Manchester
M41 5SL

Telephone | 01612761234

Website | www.cmmc.nhs.uk

NHS Patients accepted

Feedback Rating

★★★★☆
Based on 44 reviews

[Leave feedback](#)

Location

Moorside Rd
[View larger map](#)

Image taken from HWT website (03/05/15)

Detailed feedback on Trafford General Hospital services (January to May 2015)

Where patient consent was given, comments gathered at the drop-ins regarding Trafford General Hospital services were placed on the Healthwatch Trafford online Feedback Centre, (www.healthwatchtrafford.co.uk).

Patient feedback from the following sources is collated below:

- 🌸 taken during face to face engagement in different community venues,
- 🌸 added to the website independently by local residents over 2015
- 🌸 comments made during the April 2015 drop-in
- 🌸 phone calls from local residents to Healthwatch Trafford



Positive feedback for hospital services includes:

Orthopaedics and physiotherapy

- 🌸 “I had a knee operation with excellent physiotherapy. The physiotherapists were all helpful and looked after me”

Fracture Clinic & X ray

- 🌸 Excellent all round

Urgent Care

- 🌸 “I attended Trafford General's Urgent Care Centre soon after opening on Tuesday 12th May with unexplained crippling knee pain. I was triaged, taken straight to the examination area where tests were carried out and seen by the Registrar who explained clearly his diagnosis and proposed treatment. Blood results were received, I was given further information by the doctor on the condition and medication. All staff seen were pleasant and effective and I was home within two hours. An excellent quality service.”
- 🌸 “Brilliant! I went on New Years Eve and was in and out within 40 minutes - this including seeing a nurse twice, a doctor and having an x-ray. Excellent (and speedy) service. Thank you!”

In-patient (removal of thyroid gland)

- 🌸 “Staff very busy but helpful and cheerful”

Medical Assessment Unit

- 🌸 “Staff provide excellent care and deliver with great Dignity and care throughout the day and night. They listen and take on board any of patients and families concern, they allow families to be part of care.

Being South Asian and my mother having specific care needs they allowed me to stay with her throughout the day and that made my mother's stay very confident. The staff should train all the NHS staff and show there good practice."

Rheumatology

5 star ratings given for all aspect of care

Positive comments have been gathered in previous drop-ins for Orthopaedics, Fracture Clinic, Cardiology, Urology, Hearing Clinic, Outpatients and Rheumatology. These can be found in the Healthwatch Report on Drop-ins at Trafford General, Dec 2014 - Feb 2015, available on the 'About Us' section of our website.



Negative feedback for hospital services included:

Audiology

- “I went to get batteries for a hearing aid but was very disappointed to find that you can no longer pick up batteries from reception. Also not happy that there is no longer twice weekly sessions where you can go for new tubes fitted and repairs. Waiting for an appointment when the aid is broken is not acceptable - spending days without being able to hear.

While I was there a lady came in, like me not aware that the clinics had stopped. This lady was severely deaf and wore 2 aids. One of these was not working and she was given an appointment 5 days away. That poor lady was very distressed as she would have great difficulty hearing. It's very distressing and without an aid life can be very difficult."

This echoes previous patient feedback re the Hearing Clinic: "It is such a shame that this clinic is understaffed. The treatment is second to none but because of cutbacks they are understaffed. The walk in clinic has closed and is now appointments only which can cause disaster to someone unable to hear and having to wait for days to be seen to. (Hearing Clinic)

"Not satisfied with length of time I've waited and appointments being altered" (Hearing Clinic)

ENT Clinic

Comments from 2 people

- “We've been told that your first hearing aid is free and if you lose it, you have to pay £80.00 for a replacement. Well, it's very easy to lose it if you've got Alzheimers like my wife. Could an allowance be made for people in this situation?"

Booking of BSL Interpreters

Deaf patient (May 2015):

- “I went to Orthopaedics and arrived 5-10 mins early. The BSL Interpreter arrived and everything was fine. The Interpreter showed me his paperwork from the Interpreter agency. He was booked for 15 minutes, from 12:00-12:15. I didn’t go into the appointment till late. Then they said I needed to go to X ray. The Interpreter did agree to go with me for the X ray but then he had to go. He told reception that it was wrong to book him for only 15 minutes but reception told him it wasn’t their fault, that he was wrong.”

Deaf patient (May 2015):

- “I was seeing an oncologist at Trafford General. The paperwork for the BSL Interpreter said he was booked for 30 minutes. The Interpreter had to leave for another appointment and told the nurse. He had to cancel his 2nd appointment to stay with me.”

(Same patient reported this is also happening at Manchester Royal Infirmary).

Accessibility within the hospital

Patient with rheumatoid arthritis:

- “Lack of disabled toilets and toilet doors too heavy”.

Communication within CMFT hospitals

Resident of South Asian heritage:

- I’m having problems with the transfer of information from Trafford General to Manchester Royal Infirmary. It doesn’t happen.” (May 2015)

Resident of South Asian heritage:

- I went to Manchester Royal with my daughter recently. Then an appointment came from Trafford General. I took her there and they repeated everything that had happened already. I explained she was receiving treatment from Manchester Royal for the same problem. The Doctor was surprised.” (May 2015)

Cancellation of operations

The patient was scheduled to go into Trafford General for a gastro test and had starved themselves for a three day test to take place at Trafford General. On the day of the admission they were rung by the consultant to cancel the test as the nursing staff at Trafford did not have the expertise to monitor the test. No alternative date was offered at MRI just another course of treatment (Nov 2014)

Unsafe discharge (telephone call from resident)

Complaint about residents' elderly mothers discharge following a knee operation. Below are the concerns she outlined:

1. Mother was told she was being discharged at 11am in the morning - no-one in the family was informed
2. Daughter went to the hospital at 3pm from work to find her mother waiting
3. Mother couldn't walk - daughter was told by staff that a porter wouldn't be available until after tea (it was now 4.30pm). Daughter asked for a wheelchair and wheeled her mother to the hospital entrance, brought her car to the front of the hospital and struggled for 10 minutes trying to get her mother into her car, she found it impossible to lift her mother into her car
4. A stranger came to daughters rescue and helped her to get the mother into the car.
5. The mother was returning to a house where she lives alone and no provision had been put into place to enable her to return to her own home.
6. No-one at the hospital spoke to the daughter (or her sister) regarding their mother, her mother stated that no-one approached her to ask how she was going to manage.

The mother has an imminent physiotherapy appointment and the daughter is concerned how is she is going to attend as she cannot take her in her car as she cannot lift her in. No-one informed mother or family of patient transport. (Dec 2014)

HWT signposted the daughter to PALS & patient transport

Patient Journey Case Study

(Recorded during telephone call from Trafford resident)

Sibling contacted us about their brother's treatment and subsequent problems with a stay at Trafford General Hospital.

Patient, who suffers from Parkinson's disease, was admitted to TGH in March 2014 with a water infection and a chest infection. When he was admitted, he went with his medication, including 3 patches to medicate for Parkinsons which is incredibly important to control his condition and heart failure tablets which are also crucially important for his health. These two pieces of medication are so important they are monitored and proscribed jointly by a heart nurse and Parkinson's nurse to ensure that there is a balance and should the dose of one increase then the other must be reviewed.

Upon being admitted, the staff were made aware of his medication needs and the fact that the supplies they brought with them would only last a few days so he will require more. Staff assured patient's sibling that this would be taken care of.

During patients stay, their sibling stresses that the staff were very helpful but noticeably very busy. He was treated on a dementia ward, so the activities of the other patients distressed him. He also suffered with diarrhoea.

He was discharged in April 2014, and was in a much worse condition than when he went in. Patient's sibling observed that although prior to being admitted the patient's movement was limited, he was able to walk and move on his own and only had carers in 3 times per day to bring him meals. When he was discharged he was unable to walk, or even lift his head. Where before being admitted he was lucid and 'with it', after discharge he was not.

On the day he was discharged, they were so confused with the medication they had to call out a GP to go through it. The GP was astonished with the fact that he had been given 3 different types of Laxative, and that his Parkinson's and heart medication had not been included and it seemed had ceased when the original lot ran out in hospital (despite being given assurance that they would be continued).

Due to the laxatives he had been proscribed, patient had suffered diarrhoea and suffered an accident during the night one night. This caused him immense distress as he had to lay in it all night until the morning when sibling and another sibling (who is in her 80's) had to lift him out of bed and clean him up.

His carers realised that the time allocated to him was not enough for his needs and Community Matron Gill Eccles acknowledged the difficulties and arranged for midnight calls from the community nurses to check on him overnight, and he is now temporarily in the Haylands Gentlemens residential care home as it is clear he requires 24 hour care now.

Sibling also noted that patient previously had trouble with clearing phlegm and was taking tablets to assist him to cough it up. These also appear to have stopped in the hospital and has caused him to vomit on more than one occasion due to a build up. She also had informed the hospital that patient suffered from ingrown toenails which caused him discomfort so he had them regularly attended to by a podiatrist. She was told that they would have a podiatrist visit him, in just over two weeks that he was in hospital he was not seen by one.

Patients sibling has made it clear that she has never had a problem with the hospital before, indeed her brothers treatment at Trafford General has been very good in the past, but this time she found it very difficult to find a member of staff that could talk to her about her brother and his treatment. The failures with his medication might have caused serious and possibly irreversible damage. She is very keen that this situation doesn't happen to anyone else in the future, particularly someone so vulnerable.

Appendix 1

Service feedback form

Service Name & location (eg. Trafford Health Centre, Davyhulme)

Rate this service provider overall



Cleanliness



Staff Attitude



Waiting Time



Treatment explanation



Quality of care



Quality of food



Summary of your experience (45 characters max)

Tell us more about your experience*

Continue on next page if needed....

Where do you live? (Town & borough eg. Sale, Trafford)

About you

Name

Leave feedback anonymously? Yes

Email* (Your email will be kept private and you will not be sent any marketing material)

I accept the Terms and conditions: Yes

Subscribe to the newsletter? Yes No

Can these views go on the [Healthwatch Trafford website](#)?

Yes, with my name Yes, without my name No

Only your overall rating, comment and name (if disclosed) will be visible online.

Service feedback form



Tell us about your experience continued...

A large, empty rectangular box with a thin black border, intended for users to provide their service feedback.

Only your overall rating, comment and name (if disclosed) will be visible online.