

Patient Experience Report Quarter 2 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.

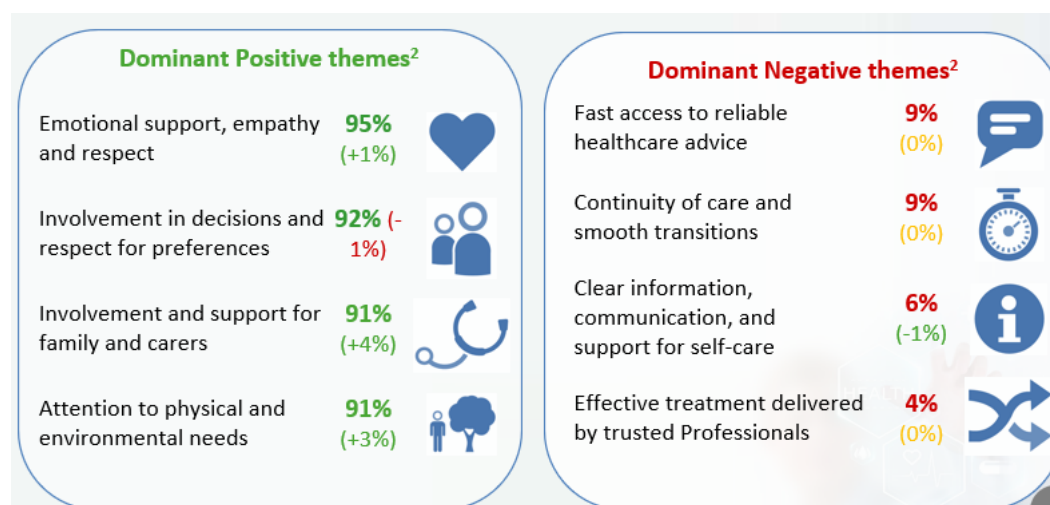
The iWGC tool is used as our primary patient survey programme and is offered to patients following a clinical outpatient contact or, for inpatient wards, on discharge via a variety of platforms. The tool uses a 5-star rating which is comparable across all services within the organisation and is based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

Table 1: Overall Trust Summary

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		
Number of iWGC responses received	Number	6,450	7,156		
Response rate (calculated on number contacts for out-patient and discharges for the ward-based services)	%	3%	3.3%		
iWGC 5-star score	Number	4.71	4.79		
iWGC Experience score – FFT	%	93.8%	94.5%		
Compliments received directly by services	Number	1091	1229		
Formal Complaints Rec	Number	68	64		
Number of the total formal complaints above that were secondary (not resolved with first response)		11	10		
Formal Complaints Closed	Number	53	64		
Formal complaints responded to within agreed timescale	%	100%	100%		
Formal Complaints Upheld/Partially Upheld	%	62%	55%		
Local resolution concerns/ informal complaints Rec	Number	36	50		
MP Enquiries Rec	Number	24	11		
Complaints open to PHSO	Number	3	3		

There are no significant changes identified in analysis of data that differs from previous reports, the highest number of complaints related to specific care and treatment concerns. The number of MP enquiries received has dropped from 24 to 11. CAMHS and children’s services continued to receive the highest number of MP enquiries.

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 number in the brackets in the picture above shows the comparison to the report for quarter one. This demonstrates that there has been no change in 3 of the 4 dominant negative themes, with a slight improvement in 1 and an improvement in 3 of the 4 dominant positive themes, with a slight reduction in 1.

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

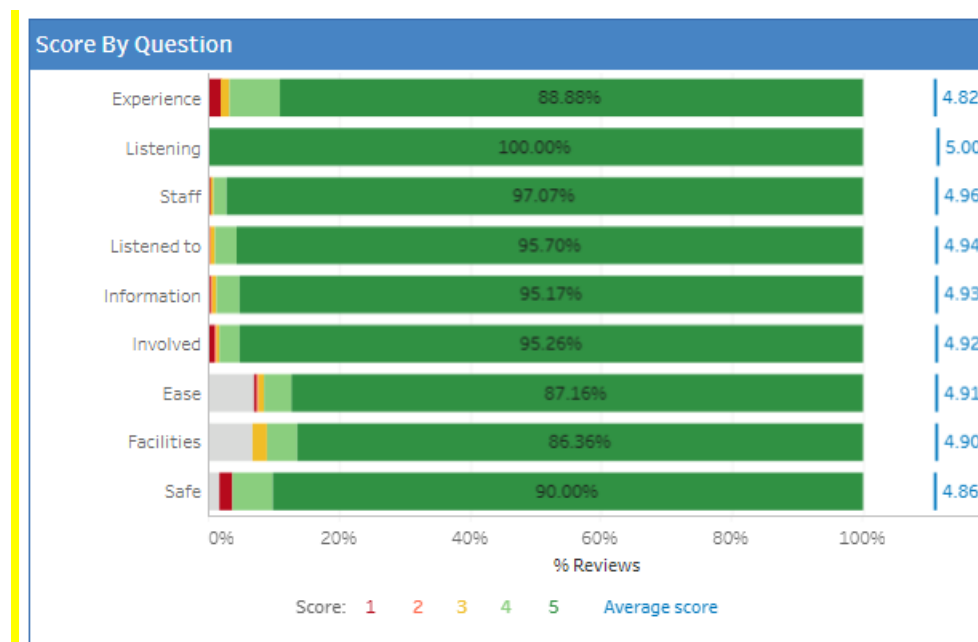
What the data is telling us

Below is a summary and triangulation of the patient feedback we have received for each of our 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		
Response rate (calculated on number contacts for out-patient and discharges for the ward-based services)	%	2.1%	3.4%		
iWGC 5-star score	Number	4.59	4.7		
iWGC Experience score – FFT	%	89.3%	96.6%		
Compliments received directly by services	Number	72	55		
Formal Complaints Rec	Number	14	15		
Formal Complaints Closed	Number	14	14		
Formal Complaints Upheld/Partially Upheld	%	93%	57%		
Local resolution concerns/ informal complaints Rec	Number	6	14		
MP Enquiries Rec	Number	15	7		



For children’s services the iWGC feedback has seen the responses double from last quarter, this has been seen across physical health services and further work needs to continue to ensure that we receive responses from those accessing our children and young people’s MH services; 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 1159 responses, 1128 responses related to the children's services within the division; these received 96.6% positivity score, with positive comments about staff being helpful and friendly and a few suggestions for further improvement, this included 3 reviews for Phoenix House where comments about staff being supportive and understanding was very positive and there were some suggestions for further improvement regarding clarity over the extent of the care that will be provided and improvement in communication. 32 of the responses related to learning disability services as detailed below and 20 to eating disorder services.

From the feedback that was received, ease and facilities 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. There were 2 formal complaints about the Speech and Language service. The third complaint was relating to children's OT service.

1080 of the 1128 patient survey responses were in relation to children's physical health services. The 2 services with most responses were the Health visiting team, Bracknell and Health Visiting, Wokingham; the Health Visiting team in Bracknell received 265 of these responses which scored positively receiving a five-star rating of 4.71 and feedback included *"Information provided was very helpful made me feel comfortable about my breast feeding journey also it helped to make me feel that what I am doing is suitable for me and baby and I no longer feel tempted to give up my journey."* *"Really friendly staff, helpful, reassuring, explained information well & attentive & patient."* and *"Very kind and helpful staff, she answered us to all our concerns and she gave us a lot of nice advice. Thank you for this wonderful meeting."*

Child and Adolescent Mental Health Services (CAMHS)

For child and adolescent mental health services there were 12 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 7 enquiries via MPs, and most of these again related to waiting times.

There have only been 27 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.

The admin team for CAMHS Getting Help collated feedback from young people who received a service. Experience of Being Referred to a Getting Help Service in the East of Berkshire. They have received 46 responses for this quarter with 38 of the responses describing being satisfied or very satisfied with the referral process (4 of the 46 were dissatisfied / very dissatisfied). As a result of the survey a focus group is planned to gain more detailed understanding of people's experience.

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 *'Thank you for today, it is the first time we have felt truly listened to. X was so relaxed in the appointment and enabled him to be so open and share his views. Thank you for all you have done and going the extra mile.'*

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 the Campion Ward regarding care and treatment on the ward.

Overall there were 32 responses for all Learning Disability services from the patient survey received, responses were for the Community Teams for People with a Learning Disability and the Learning Disability Intensive Support Team. These received a 93.8% positive score, this was skewed by 4 responses not having a score; other feedback included that staff listened, *"It was fantastic and I was happy with everything."*, *"Treated with respect and kindness."* and *"Felt listened to. Things were explained well and didn't feel judged."*, there were comments for improvements including would have preferred to be seen face to face and to have visits more often.

Eating disorders

There were no complaints for eating disorders.

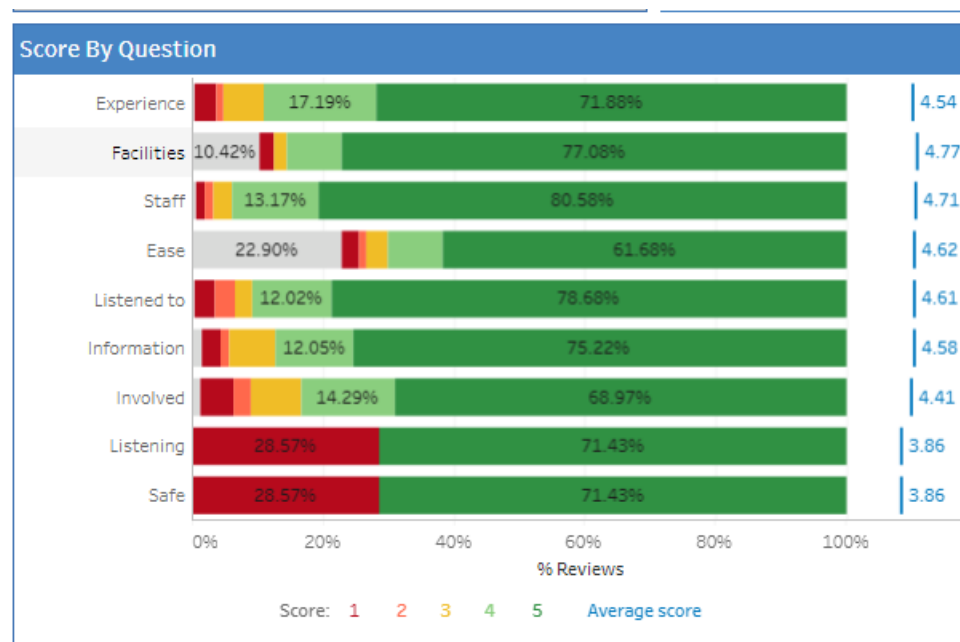
Of the 20 feedback responses received, 14 scored a 5 with comments such as *"Amazing, dedicated staff members and clinicians who have a genuine and deep care for their patients. A pro-recovery environment within the patient group itself (most of the time). Support offered even during times I was not at the programme or the block had ended. Individualised plans that encompassed professional and also patient opinion. A good balance of kindness and directness / professionalism."*, *"The BEDs team have saved [name removed]'s life. And rescued us. They reacted very quickly to a self-referral and were weeks ahead of the GP. We were given help and advice over the phone and an urgent appt to look forward to at a time when everything felt frightening and hopeless. The triage team were gentle kind and sensible, I felt immediately in safe hands. They continue to support and empower us, respond quickly to emails or calls. We are so grateful to have this service at our disposal and so very lucky that it is local and easy to get to. Thank you for everything."*, *"[name removed], [name removed] and [name removed] are the most amazing team! Their gentle but firm approach led my daughter to trust them and gradually learn to work with them on her recovery, something she had never achieved in her teenage encounters with CAMHS. What was even more important is that they listened to her needs and in the later months, as she started to improve, they adapted their approach to suit her and best support her. We could not have been more grateful for their understanding, kindness and professionalism. They are a truly skilled, dedicated and committed team. In our view this team should be seen as a best practice template for all other ED services to replicate. I'm just so grateful that my daughter had the good fortune to be sent to Maidenhead ED services. THANK YOU. X."*

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		
Response rate (calculated on number contacts)	%	2.7%	2.2%		
iWGC 5-star score	Number	4.64	4.58		
iWGC Experience score - FFT	%	92.7%	89.1%		
Compliments received directly by services	Number	37	26		
Formal Complaints Rec	Number	16	12		
Formal Complaints Closed	Number	16	13		
Formal Complaints Upheld/Partially Upheld	%	37%	23%		
Local resolution concerns/ informal complaints Rec	Number	4	2		
MP Enquiries Rec	Number	1	2		



There has been an increase in less positive scoring in relation to feeling listened to. Whilst there continued to be many positive comments about being heard and listened to some of the comments included “Be confidential and actually listen and help”, “The staff did not listen to me.”, “I was not listened to” and “A staff with listening ears would have been great”. The comments about not feeling heard were spread across a number of services rather than relating to one particular service.

13 complaints were closed during the quarter, 3 of these were either fully or partially upheld and 8 were not upheld, with 2 being resolved locally. Four of the complaints related to communication or care and treatment, and three related to an alleged breach in confidentiality (two of these were from the same patient).

The services receiving the majority of iWGC responses were CRHTT East 156 responses, Psychological Medicine Service East, 56 responses, Memory Clinic Bracknell 47 responses and CMHT Bracknell 29 responses.

Across the CRHTT East survey responses the average 5-star score was 4.34 with 85.3% positive feedback, a decrease from last quarter. 133 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; *"They took time to listen & understand my problems & say they will follow up things for me. Gave me a good feeling of being supported."* 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 it was unhelpful, discharged without being informed, were not through and did not help.

Feedback from compliments for the service included, *'Our hearts were aligned in group today, we really had each other's backs. Aligned and connected together. I certainly feel less alone and I'm glad I came.'*

The Psychological Medicine Service - East received 83.9% positive score (4.42-star rating) and received positive feedback about staff being helpful, listening, supportive and friendly. *"[name removed] and [name removed] who assessed me in A&E were so kind caring and understanding. They took the time to listen and had my best interests at heart. I'm so glad there are people like this working within mental health as they made me feel at ease considering I was going through a difficult time."*

Memory Clinic Bracknell received 97.9% positive feedback (4.85-star rating), many of the comments were positive about staff being helpful, supportive and Friendly. *"We were both listened to and any questions we wanted to ask was fully explained. No issue was brushed aside. At the end of our consultation we were asked again. Did we have any other problems. The doctor and apprentice were kind considerate & reassured us where and whom to contact if we needed any further help. Excellent consultation throughout the appointment. Thank you."* One patient gave a score of 1 and said, *"Pharmacist tried her best to arrange weekly prescriptions for my aunt's medication but was refused because of 'practice policy'. My Aunt was a nurse for 43 years and now she needs some help with her medication which the Practice won't provide, very disappointing and sad that the care has been taken out of the service she gave her life to. No alternative way to arrange her medication so she'll struggle on and deteriorate quicker."*

Other areas being worked on for improvement include a chance to discuss concerns with the doctor without the patient to avoid worrying them, change the wording of questions to make patient feel more comfortable, reduce time between appointments and offer help between appointments in case their conditions worsen.

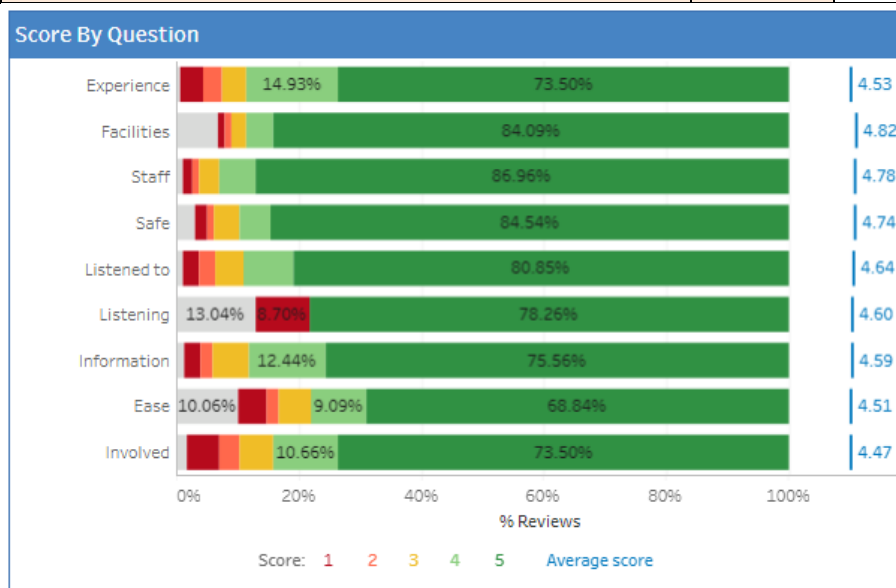
CMHT received 60 responses (Bracknell 29, WAM 15 and Slough 16) with 88.3% positive score and 4.60 star with 7 of the total responses scoring less than a rating of 4; comments included “The MH nurse, who I’ve been seeing, whenever I look up doesn’t look interested in what I am saying and I have to keep repeating myself. She seems to be looking in to space and couldn’t look less interested if she tried. Doesn’t make me want to engage.”, “I don’t feel I’m listened to at all. Had an assessment from another service and they were so much more empathetic, caring and listened.” There were a number of positive comments about being listened to, staff being understanding, helpful and kind including “x has been amazing and helped me alot and has been there when I needed someone she also taught me a lot” and “ All the facilitators were extremely helpful and professional during the 18 week course. I loved that I was part of a group too, so we could share all our experiences together as one”.

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		
Response rate (calculated on number contacts)	%	2.5%	2.3%		
iWGC 5-star score	Number	4.61	4.58		
iWGC Experience score - FFT	%	89.3%	88.4%		
Compliments received directly by services	Number	557	403		
Formal Complaints Rec	Number	12	15		
Formal Complaints Closed	Number	7	13		
Formal Complaints Upheld/Partially Upheld	%	43%	54%		
Local resolution concerns/ informal complaints Rec	Number	7	5		
MP Enquiries Rec	Number	4	0		



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 740 responses, PMS West 83 responses and CRHTT West 81 responses.

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

This division received 15 formal complaints during the quarter with CRHTT receiving 5 and CPE receiving 3. There were 13 formal complaints closed with 7 being found to be upheld or partially upheld and 4 not upheld. Two were resolved locally.

Mental Health West also received 7 informal complaint/locally resolved complaints and 4 MP enquiries.

For CRHTT there were 81 feedback questionnaires completed with an 84% positivity score and 4.30-star rating; with lots of positive comments about staff being helpful, kind and listening, *“Being referred to the crisis team was a scary thing for me, but every member of staff involved in my care has been so incredibly empathetic and caring and has made a difficult time in my life a whole lot easier. I really do want to thank everyone for their help and their kind and caring approach as it really has made a huge difference to me and how I’m feeling.”*; a number of the less positive reviews talked about lack of communication, not informed about planned discharge and wanting the staff members who they are being seen by to be consistent.

There were 231 responses received for West CMHT teams with 82.3% positivity score and 4.34-star rating, 190 of these were positive with comments received that staff were kind and listened, there were 40 negative responses with reviews included that patients felt the service with unhelpful and felt staff didn’t understand or always listen.

Older adult and memory clinic combined have received 94 patient survey responses during the quarter with a 96.8% positivity rating (4.91-star rating) some of the feedback included *“The staff at the Wokingham Memory Clinic are very friendly and welcoming. The treatment suggested, and the longer-term future for someone with mental health issues, can be frightening but everything was well explained and the ongoing support has been excellent. We were given ample opportunity to discuss the options available and all concerns were addressed.”*

The West Psychological medicine service received 83 responses with an 89.2% positive score and 4.57-star rating (9 responses scored less than 4) many of the comments were positive about staff listening, helpful and reassuring.

For Talking Therapies, their patient survey responses gave a positivity score of 87.2% (4.56-star rating), 95 of the reviews scored less than 4. The vast majority of comments were still very positive about the staff, including that they listened, were understanding and kind. A number of the comments/areas for improvement were requesting the support to be listened to, phone calls to not be rushed and questions to not be repetitive. For example, *“I felt that the questions you are asked are repetitive. I was asked from a questionnaire was I at risk of harming myself or others. I replied no to both but was still asked the same questions later.”*

Examples of positive feedback about Talking Therapies included, *“The therapist were really good. She gave me tools and techniques that helped me throughout the process and which I can apply after care. She was very knowledgeable, very patient with me even when I have trouble finding my words, she didn’t rush me but worked with me and helped me through it.”*, *“My therapist seems to know what I am talking about, totally understands my concerns and is able to support me appropriately and in a way I can manage. She is thoughtful and extremely helpful. I can’t thank her enough for all the methods she introduces to me in order for me to function. She has a bank of knowledge and is willing to talk me through things I feel. I cannot manage by myself.”* and *“This was my first-time doing counselling. [name removed] was welcoming and made me feel understood. Each week I gave myself little challenges to complete based off our conversation. [name removed] helped me feel proud of the steps I did and confident for the future.”*

Patients reported that they felt “I felt listened to and responses were given based on what I said rather than from a script.”, “Was listened too and felt at ease when answering the questions.” and “Felt listened to and that therapist was prepared to work with me to achieve something beneficial to me.”

Op Courage

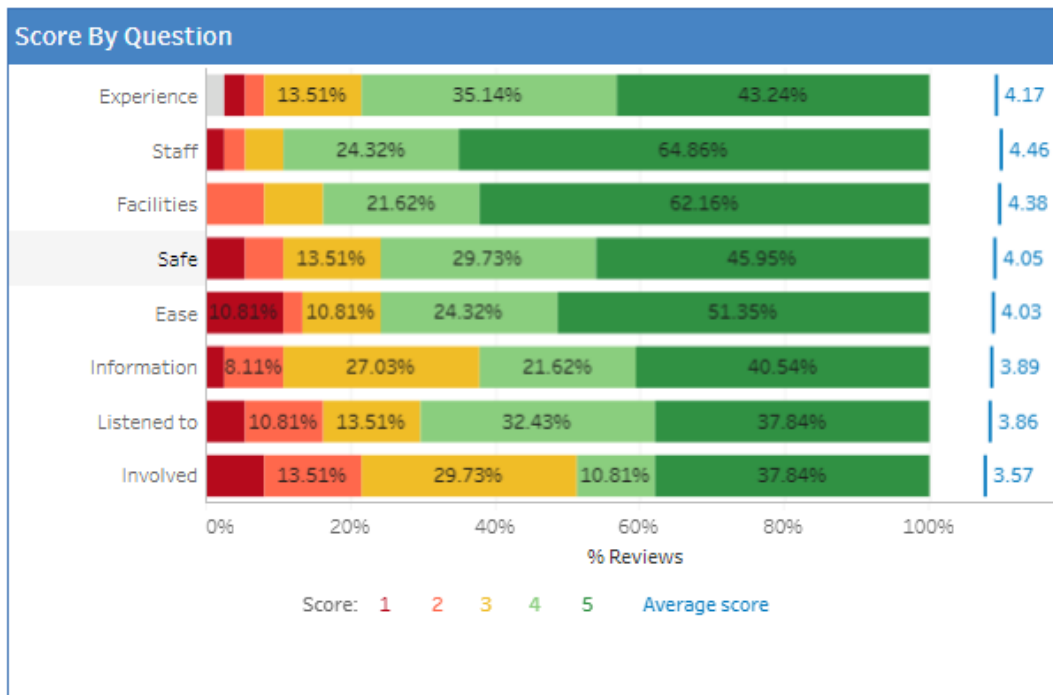
Op COURAGE is an NHS mental health specialist service designed to help serving personnel due to leave the military, reservists, armed forces veterans and their families. During this quarter, the Trust did not receive any complaints about this service.

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		
Response rate	%	28.3%	28.5%		
iWGC 5-star score	Number	4.30	4.05		
iWGC Experience score – FFT	%	88.4%	78.4%		
Compliments	Number	12	11		
Formal Complaints Rec	Number	10	4		
Formal Complaints Closed	Number	5	5		
Formal Complaints Upheld/Partially upheld	%	80%	60%		
Local resolution concerns/ informal complaints Rec	Number	0	0		
MP Enquiries Rec	Number	0	0		



The satisfaction rate at 88.4% is skewed by 8 of the 37 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 being 3.57; with 19 of the 37 giving a score of 3 or less to this question.

There were 4 formal complaints received for mental health inpatient wards during the quarter, Two for Place of Safety, one for Daisy Ward and one for Rose Ward, and were mainly regarding care and treatment. There were no complaints for Sorrel Ward this quarter. There were 5 complaints closed for this division during the quarter and of these three were partially or fully upheld and two were not upheld. There has been a reduction of over 50% in the number of formal complaints received compared to last quarter, and the % of those found to be upheld and partially upheld have also reduced.

There were many positive comments received in the feedback including comments such as staff were respectful, lovely, listened and helpful. 13 of the 37 responses to the survey were from Sorrel Ward. There were some comments for improvement about having other types of therapy and seeing a psychiatrist, staff didn't listen to them and more options for food. Examples of the feedback left are *"Being in a mental health ward and Hospital is very new to me and I can honestly say the staff on Daisy ward have all been great and have treated me with respect."* *"Very happy with the care I have in the Daisy Ward. All the staff are helpful and friendly. The whole ward is clean. All in all super star!"*, *"Staff are lovely, Drs let you be involved in your care and listen to you when needed."* There were no responses for a Place of Safety.

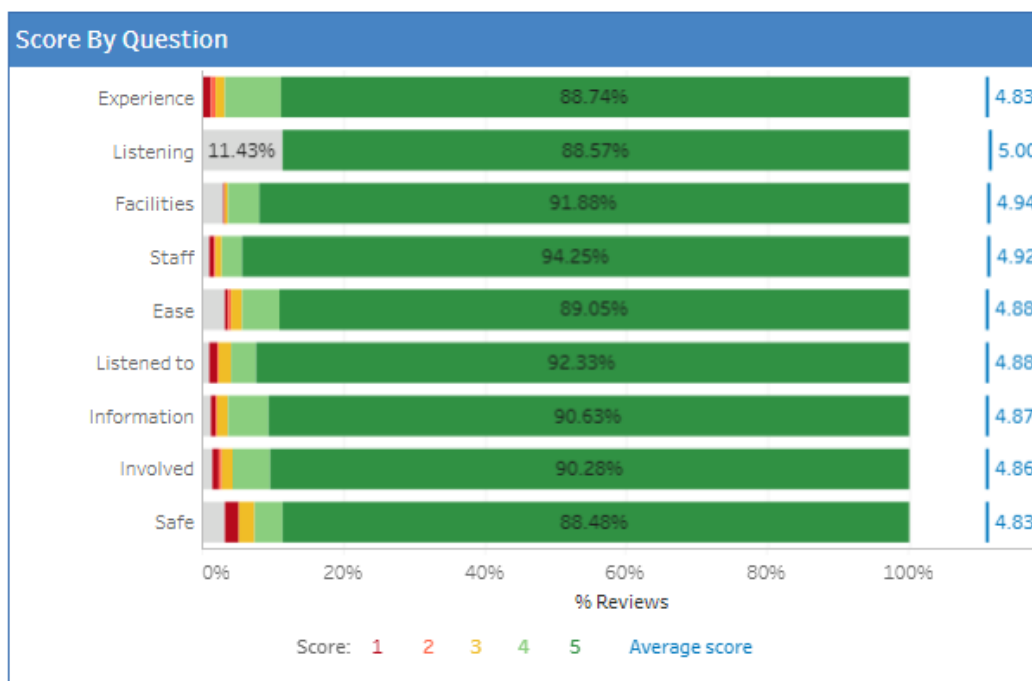
There is ongoing work at Prospect Park to increase feedback including work within the Therapy department.

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		
Response rate (calculated on number contacts for out-patient and discharges for the ward-based services)	%	5.5%	7.1%		
iWGC 5-star score	Number	4.86	4.88		
iWGC Experience score - FFT	%	97%	96.7%		
Compliments received directly into the service	Number	217	401		
Formal Complaints Rec	Number	2	6		
Formal Complaints Closed	Number	2	5		
Formal Complaints Upheld/Partially Upheld	%	50%	40%		
Local resolution concerns/ informal complaints Rec	Number	1	8		
MP Enquiries Rec	Number	1	1		



Of the six complaints received this quarter, two were for Henry Tudor Ward (these were about care and treatment and lost property) and two for Sexual Health. One for Hearing and Balance and one for MSK Physio. Care and Treatment, and Communication were the main themes.

There were five complaints closed, two partially upheld and three not upheld. Hearing and balance received 147 responses to the patient experience survey with a 96.6% positive score and 4.90-star rating.

East Community Nursing/Community Matrons received 275 patient survey responses during the quarter with a 98.6% positive scoring, many comments were about staff being friendly and kind, for example *"I received great care and attention from the District Nurse, explaining all of my nursing needs, and the plan going forward, always friendly and professional."*, *"I see the District Nurses every day they are always very kind and compassionate and listen to any concerns that I have an act on them."*, *"I see the District Nurses every day they are always very kind and compassionate and listen to any concerns, and reassure me."* and *"I have been shown great kindness, I feel listened to and I have been given time to express my concerns. The Matron has provided support and linked me to other services that have helped me to remain at home."* There were also some comments around not being notified of a scheduled visit for example *"Would like to know when nurse is visiting."*

The wards received 118 feedback responses (56 responses for Jubilee ward 91.1% positive score and 62 Henry Tudor ward 93.6% positive score). Most of the comments for improvement were staff communication including communication between staff members and understanding of discharge planning. There were a number of comments about how good the food was.

As with MSK physio in the East, there was a high number of responses to the patient survey and a high positivity score of 96.5 % (4.91-stars), comments were very complimentary about staff being professional and helpful, *"I was assessed by [name removed], who was extremely helpful and explained the problem, very easily. [name removed] was professional but also friendly. We worked out a plan together which will be easy to follow. I understood I have 6 weeks to visit again or I can ring if needed."* The reoccurring improvement suggestion for this quarter was for a sooner appointment.

Outpatient services within the locality received a positivity score of 97.8% with 4.92 stars from the 635 responses received. With some very positive feedback including for the UCR & Virtual Community Ward, *"I am over the moon with the way I have been treated by this lovely team. Everyone that visited me was fantastic. THANK YOU."*

The diabetes service received 56 feedback responses with 96.4% positivity and some lovely comments including *"The Consultant was thorough, she checked through each of my results and explained what they meant for me, what progress I had made and what needed further improvement - none of which felt degrading or made me feel bad, but rather from a place of care and optimism that I could get better. She allowed me time to digest the info and ask questions/take notes. Great experience."* Alongside some helpful suggestions for the service to consider such as *"As one person suggested, maybe partners could attend the meetings, as this could help with the support needed, especially where diet is concerned."*

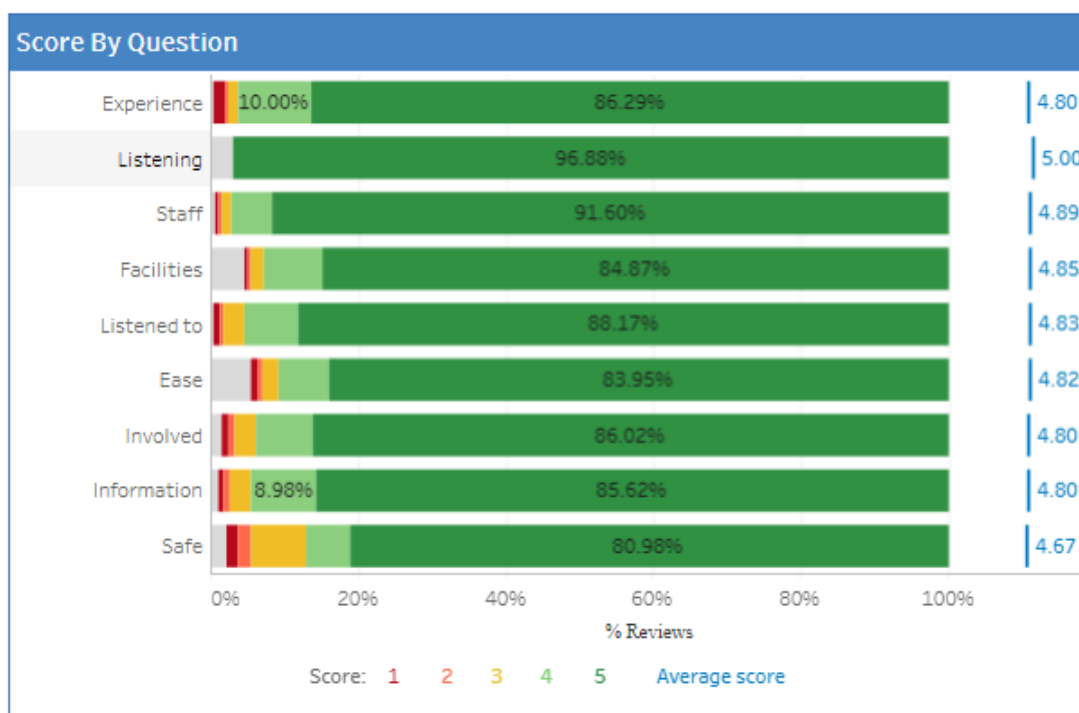
The Assessment and Rehabilitation Centre (ARC) also received positive feedback including *"The care team could not have been better. I was treated with care and attention during the whole of the procedure. The detail examination of my balance problem extremely the rough. Many thanks- well done team."*

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		
Response rate (calculated on number contacts for out-patient and discharges for the ward-based services)	%	2.5%	2.8%		
iWGC 5-star score	Number	4.81	4.82		
iWGC Experience score - FFT	%	95.1%	96.3%		
Compliments (received directly into service)	Number	196	298		
Formal Complaints Rec	Number	12	10		
Formal Complaints Closed	Number	7	14		
Formal Complaints Upheld/Partially Upheld	%	86%	86%		
Local resolution concerns/ informal complaints Rec	Number	18	25		
MP Enquiries Rec	Number	3	2		



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 96.3% positive satisfaction and 4.82-star rating and the question on staff receiving a 97.1% positive scoring from the 2239 responses received.

There were 10 formal complaints received during the quarter, these were split across several different services. Of these District Nursing received six complaints and Out of Hours GP service received 2

There were 14 complaints closed for the division during the quarter with 2 being upheld, 10 partially upheld, and 2 not upheld.

During this quarter the community hospital wards have received 134 responses through the patient survey receiving an 85.8% positive score and 4.47-star rating, (19 responses scored 3 and below) questions around information and feeling listened to receive the most results of 3 and below; comments include staff were friendly and kind, *"The staff were all very friendly and caring, and everyone was very helpful. It was also very nice to be able to go into the new garden, which is lovely, to enjoy fresh air."*, *"Every member of staff has been very kind and helpful could not have wished for better always cheerful I have enjoyed my stay and would recommend it to anyone. Thank you so much."*, *"Because the staff were all very friendly and caring. The food was good and it was lovely to be able to go outside occasionally."* And *"Overall everyone was really friendly, helpful and kind and made my stay as pleasant as possible."*, there were some individual comments where patients were less satisfied, with comments including better communication, better food, more staff at night and to answer the call bell quicker.

WestCall received 18 responses through the iWGC questionnaire this quarter (93.3% positive score, 4.64-star rating, 3 score received below 4. Positive comments included *"Dr [name removed] was very kind and listened my problem carefully, spent time giving advice and information. I feel valued and able to share problem I had and what should I do to get it improved. Dr [name removed] is an excellent doctor."* *"Lovely reception with kind staff. Given instructions, slowly and clearly. Only waited half an hour and the Dr. I saw was wonderful. (Female) afraid I didn't get her name. But she was so kind, understanding, listened to me and was very thorough, gave me a diagnosis and clear instructions, going forward. Just was to say thank you for being so fantastic!"* WestCall received around 17278 contacts during the quarter.

Podiatry services received 223 patient survey responses. Most responses were very positive receiving 5 stars (overall 96% positivity 4.86-star rating) with examples including *"The podiatrist and nurse were really calm, kind, and friendly. They completely put me at ease and explained everything in an easy-to-understand way."* and *"The podiatrist was very experienced. She also explained everything and very reassuring. She was very patient and sympathetic concerning with my disability."*

There were six complaints for Community Nursing, all relating to care and treatment. They have received some of the highest numbers of feedback (606 across the 3 localities in the quarter, with a 99.2% overall satisfaction score and 4.87-star rating).

To provide some context across our East and West District Nursing teams combined there were 56,263 contacts this quarter. Lots of comments included nurses were kind, helpful and friendly, *"District nurse [name removed] very kind and helpful, every concern we had was listened to and addressed, couldn't have asked for a better service."*, *"Staff are kind caring and approachable, I feel comfortable sharing thought or questions about things I am unsure with and am always greeted with a friendly and supportive response."* and *"[name removed], my nurse, was absolutely great!!!! She was so kind patient and caring. My weekly visit has now ceased as I am*

no longer housebound., and I will now receive my treatment at my GPS. Future patients will be extremely lucky to have [name removed] as their Nurse!! THANKYOU [name removed] - I shall miss you.” There were several positive comments about nurses being caring and there were very few suggestions for improvement, more frequent visits, and call patients’ family to be present for visits.

MSK Physio has received one complaint in the quarter relating to the clinical care the patient received. The service has received 306 patient survey responses with a 97.7% positive score (4.92 star rating), very few areas for improvement were included in the feedback there were a few suggestions including sign posting to location, confirm next appointment at current appointment and instructions of what to do when they arrive for appointment and the overall feedback was extremely positive with lots of comments about staff were friendly, professional, listened and helpful.

The services across the division received many compliments including *“I felt listened to and understood. Also I was given lots of information which helped my understanding of Long Covid. A huge Thankyou to the Doctor and Physio who were there at my appointment.”*

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

Demographic profile of people providing feedback (Breakdown up to date as of Quarter 4 data from our Business Intelligence Team)

Table 8: Ethnicity

Ethnicity	% Complaints received	% Patient Survey Responses	% Breakdown of Q4 attendances
Asian/Asian British	3.64	8.7	9.67%
Black/Black British	0	3.2	2.67%
Mixed	3.64	2.1	3.49%
Not stated	7.27	12.9	15.89%
Other Ethnic Group	1.82	6.8	1.62%
White	83.65	66.3	66.66%

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 Q4 attendance
Female	39.1	39.5	53%
Male	61.9	27.5	46.98%
Non-binary/ other	0	4.2	0%
Not stated	0	28.7	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 has been a marked increase in the number of patients who have not completed their age on the survey (this is not a mandatory field).

Table 10: Age

Age Group	% Complaints received	% Patient Survey Responses	% Breakdown of Q4 attendance
0 to 4	0%	3.7	18.41
5 to 9	0%		4.14
10 to 14	9.09%		4.34
15 to 19	5.45%		4.52
20 to 24	5.45%	4.3	2.87
25 to 29	7.27%		3.14
30 to 34	1.82%	6.1	3.56
35 to 39	3.64%		
40 to 44	3.64%	7.3	3.58
45 to 49	10.91%		3.52
50 to 54	9.09%	11.113.18	3.73
55 to 59	3.64%		4.32
60 to 64	9.09%	12.9	4.46
65 to 69	3.64%		4.63
70 to 74	1.82%	15.0	4.53
75 to 79	1.82%		5.56
80 to 84	5.45%	13.6	6.16
85 +	3.64%		6.55
Not known	7.27%	26.0	11.98

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. The Complaints Office encourages all those who may be asked to investigate a complaint, to attend the training to ensure a clear they have a clear understanding of the process.

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
Health Visiting	Service users would like the 'drop in' well baby clinics re-instated.	This has been done across all localities in West Berkshire from June. Service users also wanted the drop ins for the well-baby clinics to be opened up by making a wider number of parents/carers aware and able to access the drop in. The service is currently working on this.
CYPIT East - The SALT	To extend the number of sessions available for support. Less time waiting for assessment. Parents being involved and knowing how the service works.	SALT have new triage process, aiming to reduce time waiting for assessment and/or intervention where appropriate. SALT have introduced universal online workshops, where anyone can sign up to learn strategies and how our SALT service works.
Berkshire Eating Disorder Service (BED) - Adult	Encouraging and promoting cultural sensitivity to make the space safe for all. Communication – more transparency around the treatment pathway and expected waiting time at each stage.	Identified the need to understand what the problem is. Looking into feasibility of conducting an audit of demographics in the general population vs the client group. See where the discrepancies are e.g., at referral, at point of treatment or later? The team have put together a 'first steps' group to ensure the service quality and content is consistent to all.

	Use different gripper needles as the ones they used hurt more than normal.	We have changed the type of vascular access needles (Grippers) used so that the experience is more comfortable.
Heart Function Team	Patients have complained signage for WAM Clinic is too small.	Discussion with Estates for bigger signage – not completed as yet but working on, and map has been reviewed and re-drawn with better instructions.
	Not enough seating for relatives in the clinic.	More chairs have been ordered – awaiting delivery.
	Patients with poor mobility identified the need for a wheelchair in WAM clinic.	This has been ordered and awaiting delivery.
Nutrition and Dietetics	Patient feedback from Cow Milk Protein Allergy Group – Parents of infants diagnosed with cow’s milk protein allergy stated it would have been useful to receive video/information prior to workshops.	We are now sending pre-recorded webinars prior to workshops.
MSK physio	Long waits for appointments and the length of appointments	Use of locums, ongoing recruitment to increase capacity. Review of length of appointments to increase capacity. Saturday clinics. New processes to allow direct referrals into physio from IPASS/CSS and vice versa. Reducing need for person to revisit their GP.
	Length of Journey into physio.	New self – referral process is now live.
	Comments regarding privacy due to curtained cubicles.	Access to clinic rooms for increased privacy for patients.
	Not receiving exercises.	Change in exercise prescription service more user friendly for staff and increased selection of exercises.
	Tired looking facilities.	Review of departments and work needing to be done – in progress. Review of department equipment – in progress.

	Difficult to get through on phone to book and cancel appointments.	New telephone rota for admin staff covering hours of working day. Review of admin staffing and extra recruitment.
Mental Health Inpatients	Feedback from patients who are neurodiverse that there are too many posters on the walls	Posters have been reviewed and removed / relocated unless essential and up to date information for patients
	Could there be more activities on the wards	Together for mental wellbeing charity who run the west crisis café (breathing space) have secured some winter funding money for some in-reach work. Increased sessions with one late afternoon each week in the therapy centre focusing on topics such as mindfulness and art therapy (this is in addition to activity coordinator work on the wards)
	More support preparing for discharge	drop-in sessions are being planned two evenings a week on the acute wards looking at reintegrating people back into the community linking them up with local resources etc

15 Steps

Appendix 3 contains the 15 Steps visits that took place during Quarter 2.

There were 2 visits this quarter; both of these were at Prospect Park Hospital in Reading and took place on Rose Ward and Orchid Ward.

An end-to-end review of the 15 Steps programme has been started, which will feed improvements into how these are planned, reported, and how any improvements implemented. This is feeding to NHSE/I and their national review of the 15 Steps programme. Insight from our services, Governors and Non-Executive Directors is integral to this piece of work.

Summary

All feedback we received is seen as helpful for improvement and understanding of how people using our services experience them and therefore it is very positive to see further small increases in the volume of patient feedback we are receiving through our feedback tool, all managers and divisional leaders have access to the live tableau dashboard to view this. It is also positive to see an increasing number of services proactively using the feedback to make changes and displaying this for patients and their loved ones to see. The Patient Experience Team have developed an action plan to proactively identify and support services with low or no responses to the iWGC feedback programme.



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Responses about staff have remained overwhelmingly positive although we recognise that this is not the experience for everyone and do see some feedback and complaints relating to staff attitude for the vast majority of patient contacts their experience of our staff is a good one; we continue to foster our culture of kindness and civility across the organisation.