

University Hospitals Leicester NHS Trust

Burns and Plastics Dressing Clinic, Leicester Royal Infirmary.

Patient Survey Report

The Midland Burn Care Network (MBCN) is committed to gaining a greater understanding of burn injured patients and carers experience of healthcare and what they want from their local service.

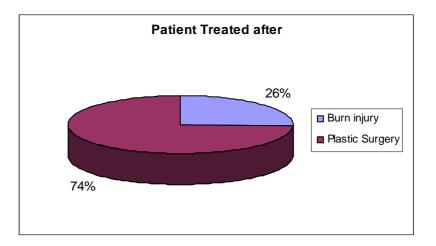
High Quality Care for All, the final report of the NHS Next Stage Review by Lord Darzi [1], makes patient experience a key driver for quality improvement. The MBCN have recognised the importance of feedback and it has worked together with providers to establish an agreed local framework. One of the ways identified to do this was: Individual feedback through Patient Surveys, seeking feedback from patients about the quality of care that they have experienced, and their needs and preferences.

This is the second report after the completion of a patient electronic survey in the Burns and Plastics Dressing Clinic (BPDC), these results should be compared to the previous results of the survey reported in August 2010 so clinicians can review the progression of their service. Patients or carers were asked to answer the survey and were informed that all responses were anonymous. There were 21 questions and also the opportunity for comments at the end of the survey.

45 patients answered the survey over a ten week period, 6 questionnaires were not analysed as survey not completed. Therefore 39 responses used in results data, 38 from patients and 1 from a carer. One person did not answer the last 7 questions therefore they have 38 responses.

Results

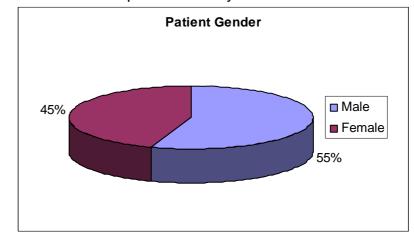
Demographics



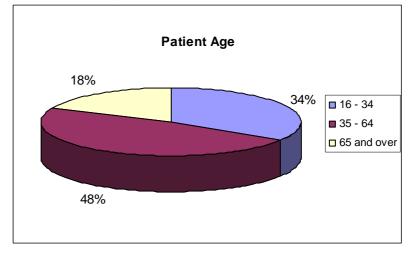
26% (n=10) of patients were treated due to sustaining a burn injury and 74% (n=29) were treated under care of Plastic Surgery team.



21 male patients and 17 female patients surveyed

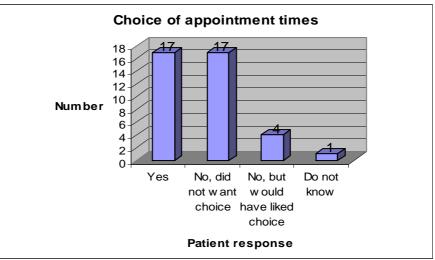


The majority of patients were aged 16 to 64 (82%)



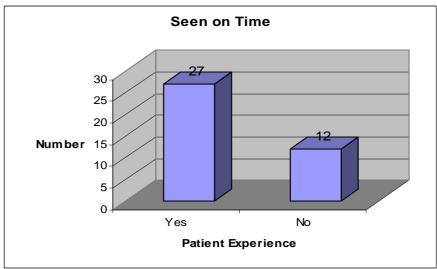
On arrival at Clinic appointment

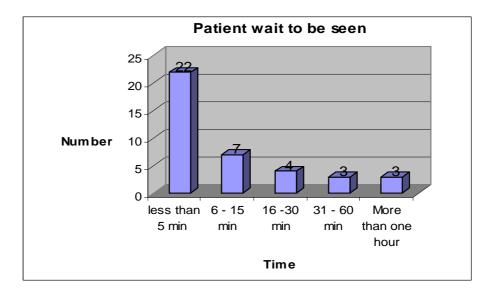
17 patients (43%) were given a choice of appointment times, 21 (54%) had not been, but 17 indicated they did not need or want a choice while 4 patients would have liked a choice.





27 patients (69%) answered they were seen on time, 12 (31%) said they were not; this is an improvement from the previous survey when 73% of patients said they were not seen on time.





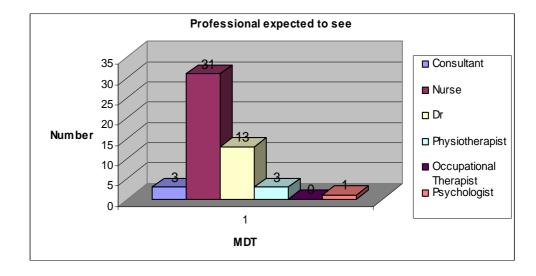
22 patients (56%) waited less than 5 min, 7 patients (18%) waited between 6 -15 minutes, 4 patients (10%) waited up to 30 min and 3 patients (8%) waited up to an hour. 3 patients (8%) waited more than an hour. One patient commented that they had waited because they needed a sick note and it would be difficult to get to their GP and the staff had been very helpful in arranging

17 patients (44%) were given a reason for any delay 22 (56%) responded they had not been.

34 (87%) patients said clinic team were very helpful on arrival, an improvement from last survey, 4 (10%) indicated team were fairly helpful and one patient responded that not very helpful.



The Multi – Disciplinary Team



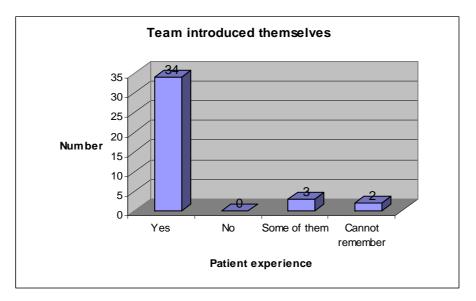
It can be seen that patients expected to see all members of the MDT at their appointment.

36 patients (92%) responded that they had seen the member of the team they were expecting to, 3 (8%) had not.

There was an increase in patients seeing Therapy Team from last survey, with 11 patients later indicating they had seen a Physiotherapist and 7 patients had seen an Occupational Therapist

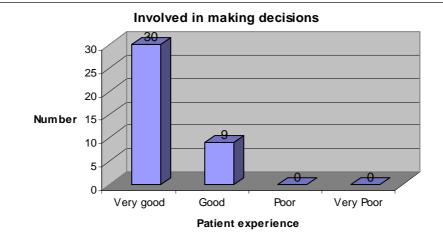
Questions were asked of how Multi- disciplinary team (MDT) behaved with patients.

The team introduced themselves to 34 patients (87%), 3 patients (8%) said that some of the team had and 2 (5%) could not remember.

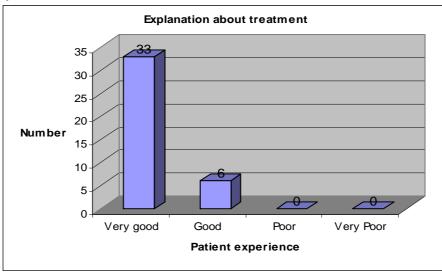


All patients said that the team were very good (77%) or good (23%) at involving them in making treatment decisions and giving them enough time

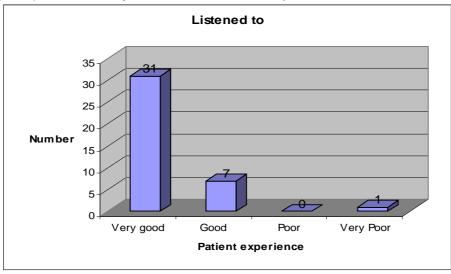




All patients indicated the team were very good (85%) or good (15%) in explaining the treatment they needed.

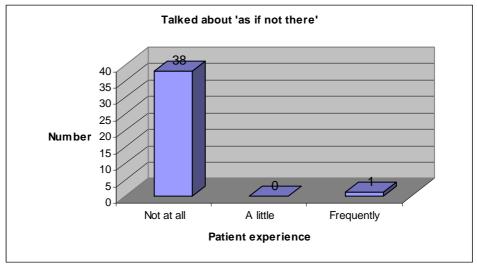


38 patients (97%) felt that they were listened to one patient said staff were very poor



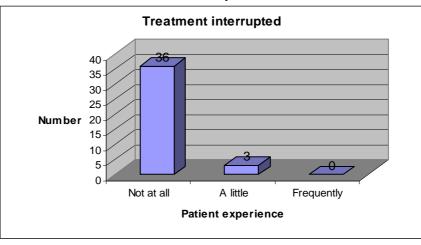


97% of patients said that the team did not talk about them 'as if they were not there' one patient said this had happened frequently

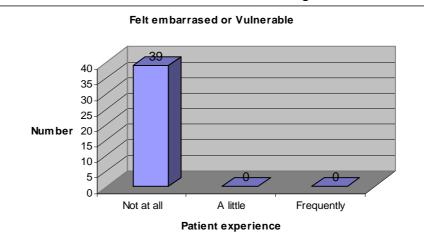


Privacy and Dignity

3 patients (8%) had their treatment interrupted a little; this did not happen to 36 patients (93%). This is a small increase from last survey.



None of the patients felt embarrassed or vulnerable during their treatment



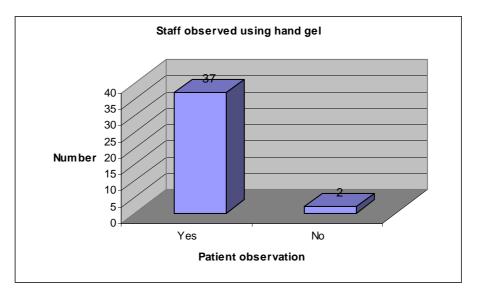


Infection Control

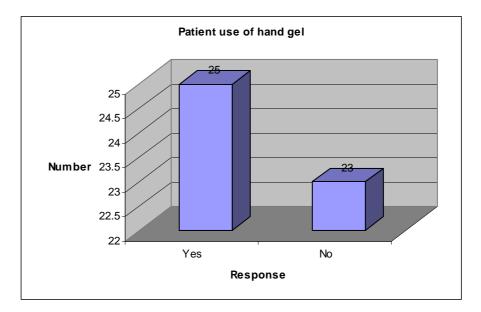
39 patients (100%) said that the clinic was clean and tidy

37 patients (95%) said that hand gels were available to use, 2 patients answered not available.

37 patients (95%) observed the staff in clinic using the hand gel, 2 (5%) did not, an increase from previous survey observation.



Although 95% of patients were aware that hand gels were available, only 25 (64%) used it themselves, but this is a large improvement in patients to using the hand gel from the last survey when only 14 patients had.



This shows a positive improvement in the Infection and prevention control measures in the BPDC and compliance with the Trust Infection control agenda. Patients still need to be encouraged to use hand gels.

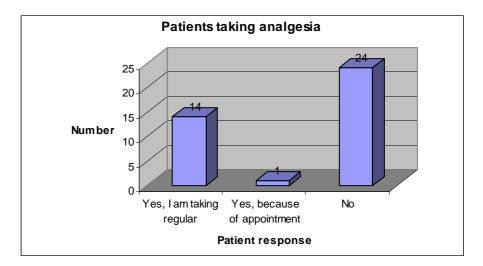


Pain Control

Since the completion of the first patient survey the clinic staff have designed a patient appointment card that has printed pain / analgesia advice and verbally advised patients on the need to take analgesia before coming to their appointment. Patient pain assessment at every visit has also been identified as one of the targets for the CQUIN Scheme in Dressing Clinic this year.

There are not facilities in the clinic for routine administration of oral analgesia; patients do not routinely have drug charts. Nursing staff in clinic are trained to give entonox again this has to be prescribed for patients.

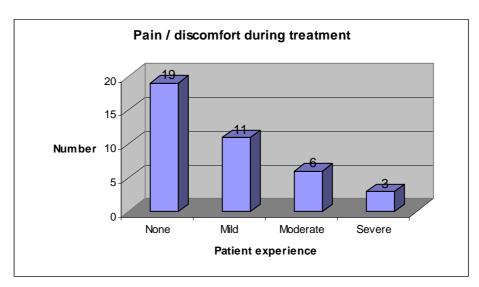
A new question was included in this survey asking patients if they had taken pain killers before coming to their dressing clinic appointment.



15 patients (39%) had taken analgesia prior to their appointment, of these 14 patients were on regular analgesia and 1 patient had taken medication because they were coming to their appointment.

24 patients (61%) had not taken any painkillers of them 10 experienced some pain: mild (6), moderate (2) severe (2).

20 patients (51%) had some pain or discomfort during their treatment, 11 patients said mild, 6 moderate and 3 severe.





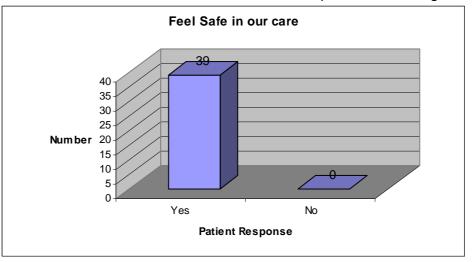
On further analysis of patients' responses regarding pain control:

Of the 11 patients indicating that they had mild pain 7 had not taken any analgesia before their appointment, 4 were on regular medication.

Patients who reported moderate or severe pain 4 had not taken any medication prior to their clinic appointment and 5 were taking analgesia regularly.

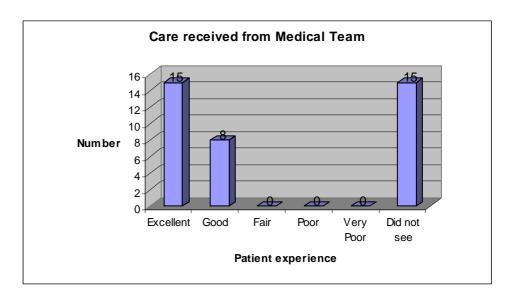
There are not facilities in the clinic for routine administration of oral analgesia; patients do not routinely have drug charts, the clinical team need to continue with the actions they are taking with pain assessment during dressings and analgesia advice to patients.

All patients felt safe in the care of the team in Burns and plastics dressing clinic.



Care received

23 patients were seen by the medical team, of those patients 15 said the care received from the Medical Team was excellent (65%) and 8 said good (35%).



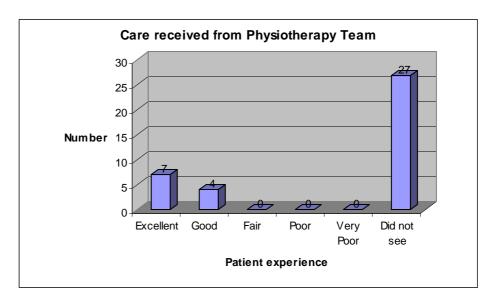


All patients were seen by a member of the clinic Nursing Team and considered that their care was excellent (74%) or good (26%)



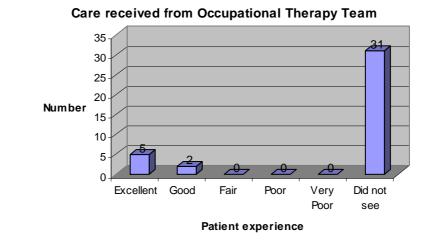
This survey demonstrated that more patients are being seen by Therapy Services.

The Physiotherapy team treated 11 patients (29%) surveyed in dressing clinic and those patients said care received was excellent (67%) and good (36%)



The Occupational Therapy team treated 7 patients (18%) surveyed in dressing clinic and those patients said care received was excellent (71%) and good (29%)





After their dressing clinic visit and treatment, patient over all satisfaction was: 31 patients (82%) were very satisfied, 6 patients (16%) were fairly satisfied and one patient said fairly dissatisfied.

On further analysis the patient who was fairly dissatisfied, had waited more than an hour to be seen by a member of the Team and also responded that their experience of being listened to had been very poor.



At the end of the Survey patients had the opportunity to make any further comments. 7 patients responded and some of the comments made were:

- Lovely staff
- One patient commented that only delay was waiting for a sick note, it would be difficult to get to their GP and nurses were very helpful in arranging to have one, thank you
- Everything was good
- The Nurse explained my treatment very well
- I am always treated well at clinic



These results indicate to the clinical team in the Burns and Plastic dressing clinic a high patient satisfaction with the care that they have received. It has also highlighted patient experience that has improved this includes waiting times at clinic appointments, patient adherence to hospital Infection control measures and more patients being seen by the Therapy Team at BPDC appointments.

Pain control and analgesia advice is still an area of ongoing review and hopefully the pain assessment completed during each patient's treatment (CQUIN target) will help address any patient need.

This report will be shared with the Burns and Plastics Multi – disciplinary team, Heads of Service, the Clinical Audit Standards and effectiveness (CASE) team and Patient and Public Involvement lead at University Hospitals Leicester NHS trust. It will also be shared with the MBCN team at East Midlands Specialised Commissioning Group and will be used to demonstrate ongoing Patient and Public Involvement in reviewing services.

Actions / Next Steps

- Multi disciplinary team to review patient survey answers and identify for themselves, appropriate actions to improve aspects of patient care and time scale to achieve these in.
- Survey to be repeated in November 2011, dressing clinic team to review survey questions with Mary Kennedy Practice Improvement Nurse, to see if changes or additions need to be made to survey questions.