

**Public Board of Directors**

<b>Date of meeting:</b> Thursday 02 May 2024	
<b>Title of Document:</b> Patient Experience Story	
<b>To be presented by:</b> Anne Rutland, Deputy Chief Nurse	<b>Author:</b> Tammy Shepherd, Head of Patient Experience
<b>1. Status:</b> For Approval/Assurance/Discussion/Information	
<b>2. Purpose:</b> To hear the patient's experience and recognise improvements made within the service	
Relates to:	
Strategic Objective	SO1: Keep people in control of their health SO3: Develop our centres of excellence
Operational performance	N/A
Quality	Delivering a positive patient and relative experience is a key part of ensuring high quality clinical care. It is key that Board is sighted on direct experience of care, which are both positive and negative; to gain assurance that when a poor experience occurs action is taken to improve.
Legal, Regulatory, Audit	Oversight of patient experience forms part of the Trust's requirements in line with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, specifically Regulation 16: Receiving and acting on complaints, and Regulation 17: Good governance.
Equality and diversity	To comply with the Equality Delivery System 2022 framework, Board responsibilities, Domain 3 - Board/ Committee papers (including minutes), to identify equality and health inequalities related impacts and risks and how they will be mitigated and managed.
Finance	By ensuring a positive patient experience, the risk of ongoing escalation of concerns towards legal claim and financial remedy is reduced.
Governance	As part of a well-led organisation, it is important that the Board is sighted on patient experience stories, in order to connect back information regarding quality and operational performance to patients and families.
NHS policy/public consultation	N/A
Accreditation/ Inspection	Evidence of the Board's interest in patient experience forms part of the CQC Well-Led review and relates to the relevant fundamental standards as evidenced above.
Anchor institutions	N/A
ICS/ICB/Alliance	N/A

Board Assurance Framework (BAF) Risk	BAF Risk 4: If ESNEFT does not have the correct quality assurance mechanisms in place, then it may fail to maintain or improve the quality and safety of patient services, resulting in poor patient care, increased health inequalities, experience and potential harm.
Other	

### **Patient Experience Story to the Board**

Kacey's mum made a complaint in February 2024. Kacey and her mum are not able to attend Board meeting today, as Kacey has just had surgery, which was successful. They would like their story to be told today by Tammy Shepherd, Head of Patient Experience. Tammy will feedback the Board's views following the meeting.

Scott Stavri, General Manager is in attendance to talk through the improvements made following the complaint received.

Kacey is eight years old and has attended the Ear Nose and Throat service for numerous years with repeated ear infections at Ipswich Hospital. Kacey was finally diagnosed, under the care of a consultant with Cholesteatoma. Kacey's mum complained as she had been undiagnosed for years and following a CT scan requested by the consultant, it was confirmed that Kacey had this along with damage to the inner ear.

Kacey has since had the surgery, successfully but it is noted that there may be an issue with the other ear, which the Trust will now monitor.

Kacey's mum felt that she was not listened to over the years despite repeated attendances with her daughter and that staff did not take them seriously. She stated that this was very upsetting as they were made to feel that they were wasting everyone's time for such a trivial matter.

#### **What worked well?**

- Consultant finally listening and taking Kacey's mum seriously
- Surgery was successful  
The consultant has written a training package that will support junior doctors in diagnosing this condition

#### **What didn't work so well?**

- No staff actually listened to Kacey or her mum
- Taking the time to understand concerns raised

#### **Main Message:**

Kacey and her mum felt that the staff at Ipswich Hospital were not listening to them. There was no communication and they were made to feel that they were wasting staff time.

### **4. Recommendations / Actions**

That the Board of Directors note the patient experience story and the improvements made within the division since receiving the feedback from Kacey and her mum.