

Report to Learning from Patient Experience Group
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1. Purpose and Key Issues

The Northern Devon Healthcare Trust and New Devon CCG are conducting a Test of Change in Torrington of home-based care as a high quality alternative to community inpatient beds.

At respective Board meetings in July, the Boards of the Northern Devon Healthcare NHS Trust and Northern Locality, NEW Devon CCG, agreed to allow a 21 day period for the population of Great Torrington to provide feedback about their experiences of receiving home-based care.

There were an additional three actions: to provide additional social care data to support the Test of Change, an independent evaluation of the data would be completed and the NHS committed to hold a meeting in public to discuss the outcome of the four actions.

It was required that the Boards of both NDHT and CCG received this report, in addition to the other three actions, before making a final decision on the model of home-based care in Torrington.

This report presents the outcome of the feedback from the public about home-based care in Torrington.

2. Process

As the provider Trust, it was agreed the Northern Devon Healthcare NHS Trust would use its existing customer relations service to collate the issues raised from members of the public, and where requested, investigate the concerns and provide a response.

Nineteen issues were received and initial contact was undertaken by the Trust's customer relations team. In line with the Trust's current processes, verbal contact was made where possible to enable a discussion and identify how the person wished for their feedback to be managed.

For those individuals where verbal contact could not be made a letter was sent acknowledging receipt of their correspondence and asking them to call the customer relations team.

At the time of this report a number of issues are being looked into with a view to providing individual responses to the patient and members of public concerned.

3. Breakdown of the issues

Of the 19 issues received less than 10 were received for the following issues

- difficulties patients experienced in being discharged to Torrington hospital;
- home based community nursing care;
- the Trust's engagement activities; and
- accessing outpatient services at Torrington hospital for podiatry and physiotherapy.
- discharge planning from hospital
- praise surrounding the care and treatment a patient received at Torrington community hospital.

The following two tables provide a more detailed breakdown on the nature of the issues raised in each correspondence. Please note this number is higher than the 19 letters received as some correspondence related to more than one area of care.

Please also note that the timescales of the feedback given vary from very recent to over many years previous.

Issues raised by Subjects

Discharge arrangements	12
Clinical Care and Treatment	11
Communication	8
Access to Clinincal Services	6
Access to Physical Services	1
Admission arrangements	1
Compliments	1
Totals:	40

Issues by Sub-subject

Transfer between hospitals	10
Poor nursing/ midwifery care	5
Communication to patients, parents or carers	5
Difficulty booking appointment	3
Length of wait for inpatient	2
Lack of involvement in discharge process	2
Delay in clinical care review	2
Corporate communications	2
Other	3
Delay at time of treatment or care	1
Equipment errors/ misuse	1
Failure to refer on to another service	1
Compliments	1
Aftercate information	1
Aids and equipment	1
Totals:	40

Reference	Type of issue	Description of issue	Progress/outcome	NDHT or CCG response
CR -3233	Level of health or social support at home in care package	<p>The patient has raised concerns surrounding the care and treatment they received at home. The person raising the issues on behalf of the patient feels the care package was not sufficient and they had to liaise with the necessary services to ensure the care was in place following discharge from North Devon District Hospital.</p> <p>They also feel the patient should have been admitted to Torrington hospital for rehabilitation and on-going care rather than being discharged home.</p> <p><i>The timeframe for this issue is within the last 12 months.</i></p>	<p>Despite many attempts, the Customer Relations Manager has been unable to make contact with the patient to discuss the concerns raised by the third party. Messages have been left.</p> <p>We are in the process of investigating the concerns.</p>	<p>We cannot tell at this stage whether the care package was health or social care.</p> <p>We do not know whether the patient was referred to the community team or known to them.</p> <p>We are investigating whether there has been a reduction in the quality of care.</p>
CR -3232	Inpatient care	<p>The wife of a patient has written to the Trust to share their positive experiences of care and treatment received at Torrington community hospital in relation to their late husband. They feel their husband's condition and progress was monitored by the nursing staff and the use of communal rooms such as the dining room provided additional social rehabilitation and contributed to optimum conditions for a discharge home.</p> <p>Latterly their husband was not admitted to Torrington, but Holsworthy instead and the individual found it difficult to visit due to them not being able to drive. The patient passed away at Holsworthy hospital and they feel the inpatient beds at Torrington hospital should still be available as this would have proved beneficial in their husband's last days.</p> <p><i>Dates of when this issue occurred were not provided in the correspondence.</i></p>	<p>The Customer Relations team has spoken to the individual and they advised they did not wish for their individual concerns to be looked into. They do however want their feedback and view that the hospital beds at Torrington community hospital should not be closed to be recorded.</p>	<p>Whilst we have not been able to obtain more detail about the time this event happened (i.e. were there beds at Torrington and were they full?) this issue relates to access to care and travel.</p> <p>It indicates a possible loss of carer support because of the challenge of travel, making visiting more difficult.</p>
CR -3231	Level of health or social support at home in care package	<p>The husband of a patient is concerned about the lack of support he is receiving for his wife at home. The individual is concerned about his wife's continuity of care and feels the care package in place is not sufficient. They believe that had the inpatient beds been available at Torrington community hospital their wife would have been admitted and her care, treatment and experience would be better.</p> <p><i>The timeframe for this issue is within the last 12 months.</i></p>	<p>The Customer Relations Manager discussed the issues raised by the individual and they would like their issues investigated.</p> <p>The complaint investigation is ongoing.</p>	<p>We cannot tell at this stage whether the care package was health or social care.</p> <p>We don't know whether the patient was referred to the community team or known to them.</p> <p>We are investigating whether there has been a reduction in the quality of care.</p>
CR -3219	Non-clinical	<p>The individual is concerned about misinformation that is being given by both Northern Devon Healthcare Trust and the Clinical Commissioning Group surrounding the issues regarding Torrington hospital.</p> <p><i>The timeframe for this issue relates to the engagement process.</i></p>	<p>The Customer Relations Manager has written to the individual asking them to make contact to discuss their concerns further and identify whether they wish the issues to be investigated and responded to. No response has been received to date.</p>	<p>Awaiting further information.</p>

CR - 3266	Discharge planning	<p>The individual is concerned about the advice they were given about a patient not being able to be discharged to Torrington community hospital as there was no physiotherapy available at the community hospital. The individual is concerned they were later advised by their GP and a manager from the Trust that physiotherapy was available at the hospital.</p> <p><i>Dates of when this issue occurred were not provided in the correspondence.</i></p>	<p>A letter was sent to the individual asking them to contact the customer relations team to discuss their concerns further. Comments are currently being obtained from the relevant team in relation to the issues raised. No contact from patient has been received to date.</p>	<p>Awaiting further information.</p>
CR- 3224	Discharge planning	<p>The individual is concerned about a neighbour's recent experience surrounding the difficulties they experienced in being discharged to Torrington community hospital. The alternative given was either South Molton hospital or a nursing home and the option of Torrington hospital was fourth on the list. The patient was transferred to Torrington hospital; however the individual is concerned the Trust has been working under an instruction not to discharge any patients to Torrington hospital.</p> <p><i>Dates of when this issue occurred were not provided in the correspondence.</i></p>	<p>The Customer Relations team has spoken to the individual and they advised they did not wish for their individual concerns to be looked into. They do however want their feedback and view that the hospital beds at Torrington community hospital should not be closed to be recorded.</p>	<p>Whilst acknowledging the potential communication issues, this experience does not challenge the quality of care.</p>
CR-3234	Telemedicine / oxygen service	<p>The husband of a patient is concerned about the care and treatment their wife experienced from the community nursing team following discharge from North Devon District Hospital. The individual is concerned about the length of time his wife had to wait for check-ups after they were requested and the removal of pulse oximeter equipment without any adequate explanation, other than it was costing too much to provide the equipment in patient's homes.</p> <p><i>The timeframe for this issue is within the last 12 months.</i></p>	<p>The Customer Relations Manager discussed the issues raised by the individual and they would like the issues they have raised investigated.</p>	<p>This experience may relate to the end of the telemedicine pilot across Torridge.</p> <p>This experience does not appear to relate to the home-based care in Torrington.</p>
CR -3226	Discharge planning	<p>The daughter of a patient is concerned about the care elderly patients receive on discharge from hospital to their own home. The individual explains they felt under pressure to bring their mother home from hospital before the family felt comfortable the care and equipment was correct at the time of discharge. The individual also feels it would have been helpful if their mother was discharged home with information on who was coming to visit, e.g. community nursing team, occupational therapists, doctors etc, and details of who would provide which care and associated contact numbers for these services.</p> <p><i>Dates of when this issue occurred were not provided in the correspondence.</i></p>	<p>The Customer Relations Manager has written to the individual asking them to make contact to discuss their concerns further and identify whether they wish the issues to be investigated and responded to. It would be difficult to investigate without contact being made as the correspondence does not reference any dates.</p>	<p>Awaiting further information.</p> <p>An information leaflet about the professionals involved in care plans is in progress</p>
CR -3235	Discharge planning / end of life	<p>The niece of a patient has raised concerns about the decision to discharge their Aunt who was terminally ill from Torrington community hospital. The individual advises the family were told their relative had to be discharged as the hospital could not keep them any longer and the patient was transferred to a nursing home. They sadly died a week</p>	<p>The Customer Relations team have spoken to the individual and they advised they did not wish for their individual concerns to be looked into. They do however want their feedback and view that the hospital beds at</p>	<p>At the time this experience happened, the Torrington beds were open.</p> <p>Therefore, whilst we would have</p>

		<p>later. The family are concerned the nursing home was not very good and needed a lot done to it but as they needed to find somewhere quick this home was chosen. The family feels their Aunt should have been kept in hospital for their last few days.</p> <p><i>The timeframe for the issues raised is April/May 2013.</i></p>	Torrington community hospital should not be closed to be recorded.	liked to explore the issues in end of life care planning with the family, this issue does not relate to the model of home-based care.
CR -3223	Discharge planning	<p>The wife of a patient has written in with their experience of trying to arrange for their late husband to be discharged to Torrington community hospital for palliative care. They advise they were initially told their husband could not be discharged there but this decision was changed after lengthy discussion. Their husband received the care they needed and passed away at the hospital. The relative praised the care their husband received and explained how frequently they were able to visit, which they feel will be prevented with inpatient beds being closed and patients being sent to neighbouring community hospitals.</p> <p><i>The timeframe for this issue is March 2012.</i></p>	The Customer Relations Manager tried to contact the individual to discuss their concerns further and identify whether they wish the issues to be investigated and responded to And was unsuccessful. A letter was sent asking them to call but no contact has been made as yet.	<p>At the time this experience happened, the Torrington beds were open.</p> <p>Over the last two years, 13 people chose to be in hospital as they reached the end of their life, Over the same period, our community team supported 2-3 people a week who expressed the preference to die in their own home.</p>
CR -3229	Community Nursing	<p>The husband of a patient is concerned about the level of care their wife received from the community nursing teams when their wife was discharged home with a specialist nursing need. The individual believes their wife may have been discharged to Torrington community hospital had there been beds available and they are concerned the community nursing team did not have the necessary skills to manage their wife's condition, and the nurses had to call for a senior member of the team to visit and show them how to deliver the required specialist nursing care.</p> <p><i>The timeframe for the issues raised is November 2013.</i></p>	The Customer Relations Manager has written to the individual asking them to make contact to discuss their concerns further and identify whether they wish the issues to be investigated and responded to. No contact has been made to date.	<p>Awaiting further information.</p> <p>We have requested more information so we can ascertain whether this is a staff training / support issue.</p>
CR - 3220	Non-clinical	<p>The son of a patient is concerned about a DVD their relative appeared in surrounding care in the community and care being provided at home. The relative feels the purpose of the DVD was different to what they understood and as they did not receive a copy of the DVD they were unable to comment before it was used.</p> <p><i>The timeframe for this issue relates to the engagement process.</i></p>	The customer relations team has spoken with the individual and the concerns have been investigated. A response will be provided to the individual in due course.	<p>Complaint in progress.</p> <p>Full consent was gained from all patients when recording patient stories. This consent was independently validated by Healthwatch.</p>
CR -3227	Discharge planning	<p>The grand-daughter of a patient is concerned about their relative's discharge from North Devon District Hospital and the inability for their Gran to be discharged to Torrington community hospital. The individual advises beds were fully occupied at both Bideford and Holsworthy, which resulted in their gran being admitted to NDDH for a further two weeks until a bed in the community hospitals became available. The individual describes the impact and cost to the family for visiting their relative during their inpatient stay at NDDH and a neighbouring community hospital, and they feel their relative had an unnecessarily extended stay at NDDH.</p> <p><i>The timeframe for the issues raised is June 2014.</i></p>	The Customer Relations Manager has written to the individual asking them to make contact to discuss their concerns further and identify whether they wish the issues to be investigated and responded to.	<p>Awaiting further information.</p> <p>This experience does not relate to quality of care but the access to care, i.e, difficulties travelling and visiting patients.</p>
CR -3225	Physiotherapy	The patient is concerned about the length of time they waited for a	The Customer Relations Manager has	Awaiting further information.

		<p>physiotherapy appointment at Torrington hospital only to be informed they could not attend the appointment in the community due to a previous medical condition which required the patient to be seen at North Devon District Hospital. The patient is concerned that despite community appointments being offered at Torrington hospital, local patients still cannot benefit from this service if they are referred to NDDH.</p> <p><i>The timeframe for the issues raised is June 2014.</i></p>	<p>written to the individual asking them to make contact to discuss their concerns. The issues raised are being looked into in the interim.</p>	<p>This does not appear to relate to the model of home-based care.</p>
CR -3222	Non-clinical	<p>The patient is concerned about their recent podiatry appointment at Torrington community hospital. They are concerned about the first appointment being undertaken to assess their eligibility for care from the podiatry clinic and also comments made by the podiatrist surrounding the service possibly being run by another provider in the future. When the patient asked what difference this would make the podiatrist advised that patients may no longer be eligible for podiatry care.</p> <p><i>The timeframe for this issue is within the last 12 months.</i></p>	<p>The Customer Relations Manager has written to the individual asking them to make contact to discuss their concerns further. The issues of concern have been sent out for comment/investigation in the meantime.</p>	<p>This does not appear to relate to the model of home-based care.</p>
CR -3236	Level of health or social support at home in care package	<p>The daughter of a patient is concerned about the lack of support provided to help the family care for their mother at home. The individual feels their mother should have received better care from the community team and there were times when admittance to Torrington community hospital could have been helpful. They have provided a number of examples of delays in the community nursing team attending to assist with care needs.</p> <p><i>The timeframe for the issues raised is May 2014.</i></p>	<p>The Customer Relations team has spoken to the individual and they advised they did not wish for their individual concerns to be looked into. They do however want their feedback and view that the hospital beds at Torrington community hospital should not be closed to be recorded.</p>	<p>We cannot tell at this stage whether the care package was health or social care.</p> <p>We don't know whether the patient was referred to the community team or known to them.</p> <p>The patient does not wish an investigation into the quality of care.</p>
CR -3221	Discharge planning	<p>The daughter of a patient is concerned about their mother's problems in being discharged from North Devon District Hospital to Torrington community hospital. The daughter explained the difficulties that were presented in visiting their mother in another community hospital and have asked for more details on why the hospital has closed the inpatient beds as they feel they resources put in place to support care in the community (a patient's home) is more than the resource requirements required to keep the hospital beds open.</p> <p><i>The timeframe for the issues raised in July 2013.</i></p>	<p>The Customer Relations Manager has written to the individual asking them to make contact to discuss their concerns further and identify whether they wish the issues to be investigated and responded to. No contact has been made to date.</p>	<p>At the time this experience happened, the Torrington beds were open.</p> <p>This issue does not relate to the model of home-based care.</p>
CR -3230	Discharge planning	<p>The husband of a patient is unhappy with the affects both he and his wife experienced when she was discharged from North Devon District to South Molton community hospital as she was unable to be discharged to Torrington community hospital. The individual explained he was only able to visit his wife once a day due to the 30 mile round trip, and in the months of December and January these journeys were very treacherous. The individual did not raise any concerns surrounding the care and treatment received at South Molton.</p> <p><i>The timeframe for this issue is December 2013.</i></p>	<p>The Customer Relations Manager tried to contact the individual and a message was left. The issues raised have been sent out for investigation and will be responded to once contact has been made.</p>	<p>Awaiting further information.</p> <p>This experience does not relate to quality of care but the access to care, i.e, difficulties travelling and visiting patients.</p>

CR -3228	Discharge planning	<p>The individual is concerned about the closure of inpatient beds at Torrington community hospital and has provided details of their experience when their late husband was unable to be discharged to Torrington hospital. The individual advised they were informed there was a waiting list to be transferred to Torrington and they would like to know why the Trust considers the beds are not needed when there was a waiting list to be transferred.</p> <p><i>The timeframe for the issues raised is April 2012.</i></p>	<p>The Customer Relations team has spoken to the individual and they advised they did not wish for their individual concerns to be looked into. They do however want their feedback and view that the hospital beds at Torrington community hospital should not be closed to be recorded.</p>	<p>At the time this experience happened, the Torrington beds were open.</p> <p>This issue does not relate to the model of home-based care.</p>
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