

**every**  
**one**  
**matters**



**Feedback on  
Dorset's Hospitals**

**healthwatch**  
Dorset



# Introduction



I was fully involved in all aspects of my care and was treated with the utmost kindness and courtesy by all concerned.

There were too few nurses to treat patients safely or even with dignity. Staff... must be demoralised by their working conditions. A very disappointing experience.



Those two comments, made to us about care delivered in hospitals in Dorset, reflect the variety of experience local people have shared with us.

The feedback that local people have shared with us about hospitals in Dorset ranges from the positive to the mixed to the negative. The most common things people have wanted to comment on are the quality of service and the attitudes of staff. In both cases their comments range from very good to very bad.

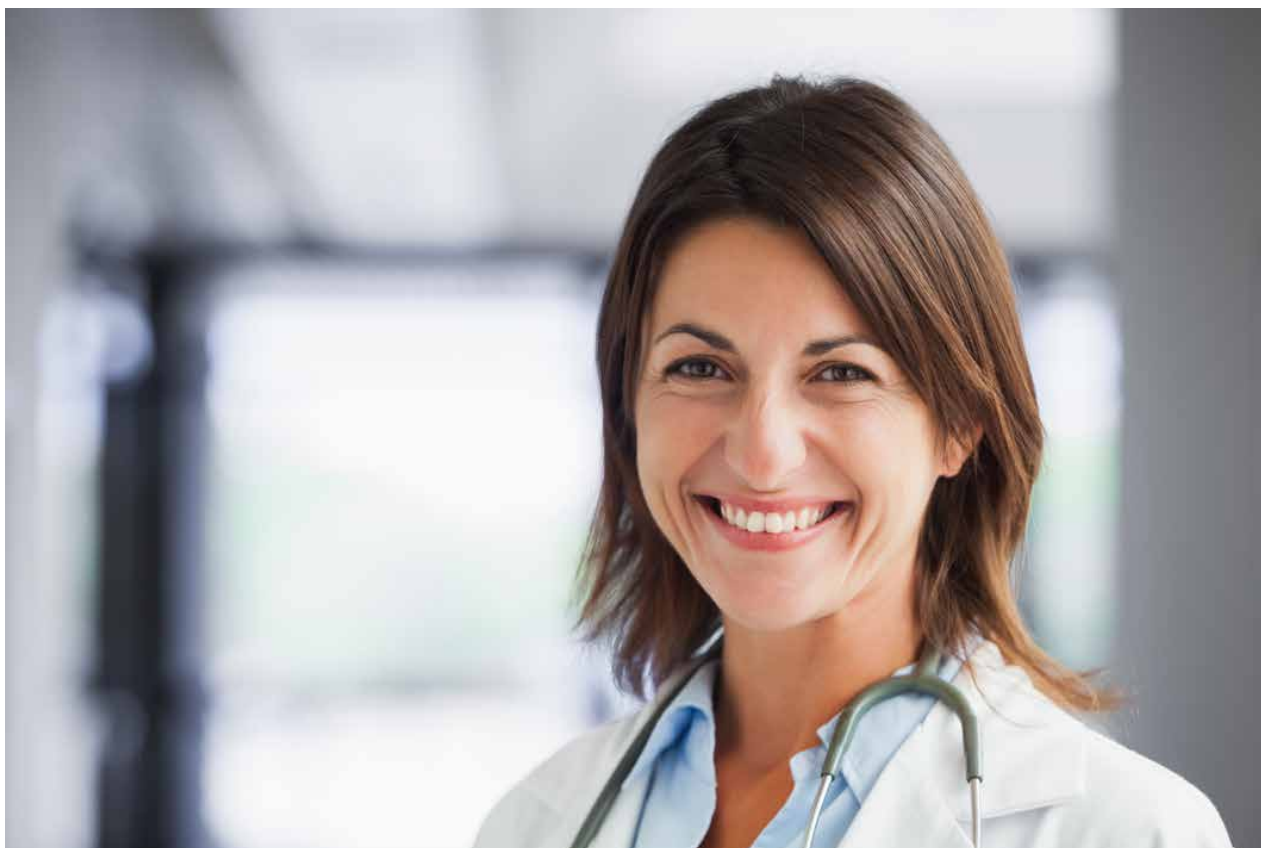
At its best, the quality of hospital care in the NHS is second to none. People are treated with dignity, they feel safe and their needs are met in a timely way by dedicated staff who display kindness, courtesy, compassion and understanding. But at its worst it is chaotic, stretched to breaking point, understaffed, denying people (even the most vulnerable people) the most basic standards of care and dignity. The overarching message we take from what people have told us is that there is a wide variation in the standards of care that people experience. That variation matters, not only because it means that some patients receive poor care, but also because it strikes at the founding principle of the NHS that everyone should receive the best care, free at the point of delivery. In fact, some do not.

This document serves to provide a brief summary of what local people have told us so far about their experiences of hospital services in the county. The experiences people recount in these pages will take you from the highs to the lows. We make no claim that they tell the whole story. Healthwatch is only one of a number of organisations with which people can choose to share their experiences. Our local hospitals themselves hold feedback from patients and their families and carers, as do NHS Dorset Clinical Commissioning Group, local voluntary and community

groups, and web sites such as NHS Choices and Patient Opinion. But the people whose stories we tell in these pages have all been patients, or relatives, or friends, or carers of patients who have received care in these hospitals over the past year. Their experiences are real and undoubtedly are shared by others. Every one matters.

By any standard our NHS is one of the best, if not the best, national health service in the world. That is something for which we should express our appreciation and gratitude. But while celebrating the best of the care that the NHS delivers, our message has to be that there is still work to be done to ensure that every single patient receives the best possible care. So long as even just one person is not receiving the best that the NHS has to offer (and which we all have a right to expect), then it is failing as a universal health service.

One of the best ways of learning how services can, and need to, improve is to listen to feedback from patients, both good and bad. Sometimes, NHS organisations are keen to publicise the positive feedback they receive from people who have experience of their services, but not the negative. We would like to see all the hospitals in Dorset regularly publish both and, in the case of the negative, at the same time say what they have done as a result to respond and to make improvements. Every person matters. Every experience matters. Hospitals should see complaints as “gold dust”, a critical source of intelligence about how to improve services; feedback that they should welcome as a way to improve how our hospitals treat and care for people.



All hospitals now have to invite people receiving A&E, inpatient and maternity services to take part in the Friends and Family Test (FFT). It was introduced in 2013 and asks patients whether they would recommend the hospital to their friends and family if they needed similar care or treatment. When people are discharged, or within the 48 hours that follow, people are asked to answer the following question: “How likely are you to recommend our ward/A&E department/maternity service to friends and family if they needed similar care or treatment?” They are invited to respond to the question by choosing one of six options, ranging from “extremely likely” to “extremely unlikely”. From the responses received, each hospital is given a monthly score out of 100 (the higher the score, the greater the patients’ satisfaction). For information, in this document we set out the latest publicly available scores and response rates for the FFT at the three general hospitals in Dorset, and compare them with the national averages.

But the FFT is a blunt instrument and the value of the information it gives about people’s experiences is limited. Each of the hospitals has many other ways in which it collects people’s feedback. Healthwatch Dorset looks forward to working ever more closely in the coming year with them as their “critical friend”, particularly to advise and support them in the ways in which they collect feedback from their patients and how they then use that feedback to drive forward improvements to services.

## About Us

Healthwatch Dorset is one of 148 local Healthwatch organisations that were established throughout England in 2013, under the provisions of the Health and Social Care Act 2012. The dual role of local Healthwatch is to champion the rights of users of health and social care services and to hold the system to account for how well it engages with the public. The remit of local Healthwatch encompasses all publicly funded health and social care services for both adults and children. Healthwatch Dorset covers the area of the three local authorities of Bournemouth, Dorset and Poole.

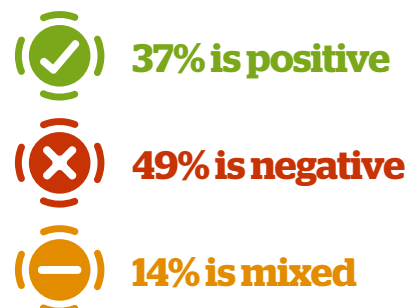
We collect feedback on services through our attendance at community events; our contact with voluntary and community groups; our comment cards and feedback forms which people send to us in the post; online through our web site and social media; from callers to our telephone helpline; and through the Citizens Advice Bureaux in Dorset, Poole and Bournemouth, all of whom offer a face-to-face Healthwatch service.

[www.healthwatchdorset.co.uk](http://www.healthwatchdorset.co.uk)

# The Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust

This Trust is the provider of health care for the residents of Bournemouth, Christchurch, East Dorset and part of the New Forest with a total population of around 550,000, which rises during the summer months. Some specialist services cover a wider catchment area, including Poole, the Purbecks and South Wiltshire. Of the comments we have collected and recorded about this Trust, 37% are positive, 49% are negative and 14% are mixed/neutral.

The themes or topics on which people have offered feedback include quality of treatment and staff attitudes.



## Positive feedback

Positive feedback covers a number of specific services with the majority around the topic of "Quality of Treatment".

Comments received include

"My friend showed symptoms of a stroke and was taken to A&E. It was very busy but he was constantly monitored and staff were cheerful and caring and at all stages explanations were given. I was amazed by the efficiency of the unit".

And "I attended the hospital for major knee surgery. I am a nervous patient and from start to finish I cannot fault the staff! From the student nurse who checked me in, the anaesthetologist and her assistants, the surgeon, recovery staff and nurses as well as physio team I have all of them to thank! Everybody was just so kind and could not do enough for you. They made a scary and painful experience a great one (well you know for major surgery). I am completely confident in saying that it could not have gone any better or smoother!"

Another comment received from a relative states "throughout my brother's short

illness the nursing staff and specialists were so kind, thoughtful and understanding. Their caring and professional manner made an awful experience more bearable. They were never too busy to talk to me on the phone either. My brother sadly passed away and I never got round to sending a note to the staff so maybe my comments now will be useful".

Other, more general positive comments include this from a family "we look after people who are mentally ill in our own home as part of our extended family. If one of them is taken ill it is often difficult for us to visit and this is the only hospital that allows us to put a password on their case notes so that when we ring up to check on them the nurses know that they can talk to us as we have proved who we are."

And this statement shows that it is possible for people with long term conditions such as Parkinson's to have a better experience of hospital treatment "My husband, who has Parkinson's, went in for a knee operation and he was encouraged to self-medicate while he was an inpatient. If only it was always like that in hospital".

And finally, this comment shows just what a difference it makes to a patient when everything goes well "I was in Outpatients Ward 1 last week for a colonoscopy - scary, huh? My wife will tell you that I am Bournemouth's answer to Victor Meldrew - if things aren't 100% then I am the first to speak out. At a time when the NHS is taking a media battering, my personal experience was faultless. From Reception, through Admission, into Treatment then Recovery and Discharge, every member of staff I met was professional, friendly and efficient. Everything was explained thoroughly, I was kept informed throughout and during the treatment itself, the background music, the chatty banter and the constant encouragement of the team all combined to make this nothing like the scary experience I had convinced myself was on the menu for that day. Talking about menu...the pot of tea and sandwich afterwards was a nice surprise and very welcome after the necessary food deprivation beforehand. Thank you to all.

## Negative feedback

Negative comments are spread over various themes but we have received a number about staff attitudes, car parking and co-ordination of services. Comments received include "I recently had a seizure and was

taken into RBH. I need my walking frame but it was too big so I had my walking sticks with me. A nurse came to check on me and I asked her if she could put my sticks next to my bed (they were out of my reach) but

she didn't believe they were mine. I felt like I wasn't being listened to because I have a learning disability. Staff took my sticks away and I never got them back".

## Negative feedback (continued)

Further comments include “At Bournemouth the consultant was reluctant to give any information and said that he had no time to answer questions as he could only give us a 10 minute appointment. We felt frustrated and abandoned”.

This comment from a relative highlights the issues that people face when they have “hidden” conditions “My father was in hospital with a heart condition. He is partially deaf and did not understand what was going on or what the tests were for. When I spoke to the doctors they said they had told him but he obviously didn’t hear them. They should have taken his hearing problem into consideration. He was very anxious about what was happening and this could have been avoided if he had been kept informed”.

This comment shows how important it is to allow family and or carers to be with their loved ones, wherever possible, when attending for treatment “Very poor attitude of a member of staff towards my father, an elderly gentleman attending for an MRI scan. A smile costs nothing nor does courtesy, nor does allowing a daughter to sit with her father who: is anxious about the appointment; walks with a stick; has had a recent epidural for his back and has poor sight! People aged 80 are likely to forget things, especially when they are extremely worried! Staff should be aware of this! I was told I could not wait with my father; then he was told he should have phoned to discuss the questionnaire and would consequently have to have an x-ray and wait to be sent another appointment in the post. My father had phoned the department - and had offered to post the questionnaire to them but had been told to take the form with him to the appointment. My father and I were both very upset about the way he was treated. His reaction was to say to me, ‘Is there another hospital where I can have this scan done?’ I spoke to the clerk at the desk and told her that the way the member of staff had spoken to my father was unacceptable, and that he needed to have the scan done the same day. He had already

waited a long time for it; he lived on his own and had had to make special arrangements to get to the appointment. The clerk on the desk told me that my father would have an x-ray but that it was his fault that he would have to return for the MRI another day because he should have phoned. (Please see above.) After the x-ray we should come back to arrange a return appointment for the MRI scan. She also did not see why I should have been allowed to accompany my father into the smaller waiting room. I told her that we would be leaving appropriate feedback. We then went to the x-ray department. There was a marked contrast in staff attitudes here. The member of staff who did the x-ray was extremely friendly and kind. I told her also about how unhappy we were with the experience in the MRI department and that we would be leaving appropriate feedback. After the x-ray we walked back along the corridor and were met by the same member of staff who had previously behaved in a totally unsatisfactory manner. Her manner had changed dramatically. She smiled at us both, said my father could come straight through for his MRI and took us both through to the waiting room. This shows that there was no reason why I should not have been permitted to sit with him initially. Her attitude was totally different. It is good that she changed her behaviour but it is very poor that I should have had to complain to get an appropriate standard of service for an elderly gentleman. Had we just dropped my father rather than accompanied him I feel certain that he would have had to return another day. The staff who actually did the MRI were friendly and kind. My father has nothing but praise for them.”

Other more general negative comments include “There should be more hand gel on the entrance, in the porch. I am here often and the hand gel stations are often empty (today both hand gel containers by the talking nurse were empty). People come to the hospital from the outside and it is so important that they clean their hands, the gel containers cannot be left empty.”

Comments that are more concerning include

“Bad communication. I was not told my relative had pneumonia, was not told when they were moved suddenly from ward. I was not told of meeting with discharge nurse, who was unaware of care review 2/3 weeks to planning. It is bad visiting patients at 7-8pm and finding my relative and others in unmade beds, unchanged and exposed to all and sundry visiting. Apparently this was due to a disruptive patient. Shows lack of dignity for patients”.

And “Ward X is terrible. My mum has been in and out of hospital, doctors and nurses do not talk to each other. She has been given different tablets by the hospital doctors, then some more by her GP and then some more tablets when she went to stay in a care home. We don’t know what they are all for, it seems like no one is communicating and she is just given more and more drugs. No one at the ward has time to explain things to us to the family and we don’t know what is happening. She has dementia, and she was given no choice over the food; she was given vegetarian food and she likes her meat and two veg meals, she is very traditional like that.”

And “My friend had pancreatic cancer and was taken into RBH. She was put into bed in Ward Y when she was first admitted with her outdoor clothes on and although I asked a nurse to help her change into a gown this didn’t happen for over 9 hours. Also, one night she said she was on a drip and asked a male nurse to help her to toilet. Nurse just took needle out of her arm and wouldn’t help her to toilet. My friend has since died and I am sad her final weeks were clouded by poor care from some nursing staff”.

This comment raises some concerns about staffing levels and safety “Bad staffing levels on ward Z. My relative was suddenly very unwell, I looked for a nurse, rang bell and the only nurse around was helping someone being sick on the other part of the ward. Nurse said ‘I am on my own, the others are on a break’! Is that putting patients first, leaving 3 bays to one nurse and that wasn’t the only time”.

## Mixed feedback

This interesting comment has some useful recommendations - “My experience of the colonoscopy procedure itself and the staff involved was very positive -- they were helpful and considerate. Two minor adjustments to the experience could make things better: 1. The detailed 3-page form

patients are asked to complete when signing in would be much easier to fill in if sent in advance. The detailed information on previous illnesses, medication and allergies would be much easier to access at home. It is not so easy to remember on the day. Sending the forms in advance would also

speed up the booking-in process. 2. The addition of a coat hook on the back of the door of each of the patients’ toilets would be most helpful. As it is there is nowhere to put coats/jackets which have been taken off”.

# Poole Hospital NHS Foundation Trust

This Trust is the provider of acute services mainly for people living in Poole, East Dorset and Purbeck but also provides child health and maternity services for a wider catchment area including Bournemouth & Christchurch and cancer services for people across Dorset. Of the comments we have collected and recorded about this Trust, 25% are positive, 58% are negative and 17% are mixed.

The themes or topics on which people have offered feedback include quality of treatment, staff attitudes and waiting times.

 **25% is positive**

 **58% is negative**

 **17% is mixed**

## Positive feedback

Positive feedback covers a number of specific services with no particular obvious trends, with comments such as “Poole hospital gave me back my quality of life after having a stroke”, “staff were caring and efficient when I had cancer treatment”, “the back pain clinics at Poole are great”, “I had to have some rather unpleasant treatment in Gastroenterology but the consultant, nurse and staff were excellent” and one patient advising that the self check-in for an outpatient clinic “worked really well and I was in and out so quick”.

The importance of how good communication between patients and professionals can make a difference to the patient journey is shown with comments such as “The doctor was extremely courteous and knowledgeable. I was very much involved in the decision-making process regarding my treatment and the surgery was carried out to a very high standard. Follow up was very good with appropriate advice and review. Thank you very much for an excellent service” and “I have received a truly professional approach by all the staff involved. Added to this I was fully involved in all aspects of my care and was treated

with the utmost kindness and courtesy by all concerned. Thank you”.

And this comment really does highlight just what a difference good patient involvement can make “The Adult Cystic Fibrosis team were informative, caring, professional & empowering. I was fully involved in all decisions & given every opportunity to feedback & be involved in my own care. The ward staff generally were excellent although noticeable difference when ‘bank nurses’ were used. This was mainly due to the fact that they did not assimilate the information on me as a patient & this definitely had an impact on the level of care I experienced”.

This piece of feedback is useful from the point of view of someone with a professional background “Poole Hospital has restored my faith in the NHS, good team work, happy staff, [I am a retired RGN so I didn’t miss anything!] Well done everybody because you do have a lot of pressure these days. I was treated with courtesy throughout from outpatients, a team that listened to me, saw me through surgery to a happy discharge”

The next two examples illustrate just how well the system can work “Just wanted to give praise for the excellent service we received at Poole hospital. At 9am we were greeted at the desk by a very friendly member of staff just after 9.30am we were called in to see the triage nurse, by 10am called down for an X-ray. Then at 10.20 we went in to see the doctor/nurse. After we were talked through their findings on the X-ray we were then sent off to the plaster room to have a cast set, again by wonderful friendly staff. My son was then back in school by 11am in plaster”.

And “I have just returned today, after attending a further assessment for breast cancer screening. This included additional mammograms, ultrasound and biopsies at the unit. I cannot rate this service highly enough. The staff are just wonderful, reassuring, funny and kind and make a difficult experience seamless and painless. To attend a service which is in effect a one stop shop for assessment is very impressive. I feel very fortunate that we have such a service in our community. Thanks to all who take part, amazing service.”

## Negative feedback

We have received a number of comments about Accident & Emergency services with comments such as “A&E staff attitudes to mental health patients need to change - we don’t self-harm for fun” and “I had to attend A&E for a knee injury. I felt like I was on a conveyor belt with no real care”.

And “I took my mother to A&E at 2.30pm one Sunday afternoon, she was sent home

at 7pm as the doctor said it was better than waiting for the blood test results. He called me at 9pm to say the results required investigation and that I should bring her back to be admitted; we arrived back and waited in A&E until 2.30am when she was eventually admitted; the ward doctor then arrived at 3am. The time spent in A&E was uncomfortable; my mother was on a trolley, I requested a chair but none came. I

considered sitting on the floor but there were gloops of dried blood and the underside of the trolley was filthy. The unit where she was admitted was however very clean. My mother has dementia and although discharged the following day did not remember why she had been in hospital but said she had a good night’s sleep; the manner of the staff and the attention and monitoring when it was provided cannot be faulted”.

## Negative feedback (continued)

Feedback on acute care/elderly care wards includes issues around basic care with some relatives and carers reporting that patients are found to be dehydrated with no access to water or fluids and some even being found in wet clothes/bedding. One relative states “In my family’s experience of Poole hospital when my mum was in dying of cancer we had to go and feed her in shifts and on one occasion wash her. We were there from 7.30 every day and lunch and dinner times were never asked why we were there. Food was put in front of her and she could not feed herself. Even though she was dying she was entitled to some care in her last days”.

One relative reported “I would like to begin by saying that some staff were excellent, whilst others were very poor. My mother was certainly not a demanding type but could rarely get a nurse to come when she needed the toilet, despite ringing the bell (especially at night), therefore one night, being desperate, she got out of bed and fell and we were never told. She was often left in wet clothing and bedding. It was an absolute waste of time filling in a menu because she never had what was ordered. We were very dissatisfied that one could never get a medical report between Friday afternoon and Monday morning - Is one expected to be ‘ill to order’? As for measuring input and output of fluids, this was terribly haphazard and inaccurate. On various occasions she had no water and no cup. It should not have been necessary to constantly chase staff because mother was dehydrated and needed I.V fluids! Every stay in hospital resulted in a urinary infection. Visiting on three to four consecutive

evenings, the same rubbish remained on the floor of the ward. Staff were witnessed chatting (not about hospital matters) and heard to say ‘do not answer the phone, just ignore it’. How can the care of the elderly unit possibly be awarded such glowing reports, when patient are treated in this heart-breaking manner? We all felt very sad and disappointed afterwards and dread the possibility of hospital admission. One senior nurse stated ‘I have a degree, I don’t do wee!’ “.

Other comments include call bells not being responded to in a timely manner, especially at night.

There is some concern about self-medicating whilst in hospital especially for patients with Parkinson’s disease. Patients need to be assessed on an individual level and where possible allowed to continue self-medicating. One relative commented that her relative’s care was compromised because Parkinson’s medication was not given effectively. Part of the comment states “Great importance is attached to regular administration of Parkinson’s drugs to keep the sufferer’s condition stable. I was present on a number of occasions during visiting hours, and the two-hourly dosage was regularly not on time, in one case over 40 minutes late”.

Even though we have highlighted some positive comments around communication and access to information there are also a number of negative ones, for example “I was shunted from waiting room to waiting room and saw 1 doctor. I saw 4 different nurses in 3 different waiting rooms, all of whom gave me either no information, little information or contradictory information. They didn’t

listen to me at all. I felt bullied into signing things. I tried to call a few days after to ask questions and was told I needed to talk to the surgeon who I would meet on the day. They didn’t give me the surgeon’s name who would be operating. As a result I refused to have the surgery they recommended”. A further comment states “I was in Poole Hospital last month and they were very understaffed. I was worried about swelling and I asked for help but the doctor didn’t arrive from mid-afternoon to the following morning. I was so scared that I’d got an infection or something, if someone had just spent 5 minutes talking to me it would have prevented all that worry”.

Patients, carers and relatives really do need to be kept informed about the “why and what” when in hospital. We hear time and again from patients who have had great clinical care but are frustrated, disappointed and stressed with the lack of communication. “Just tell me why you said my scan would be at 10am and I’m still waiting at 3pm. Any reason is better than no reason at all !” (This comment is typical of many we have received relating to all the hospitals.)

There is still concern over discharge planning. One comment states, “I felt like I had to be there every day to wash and feed my husband because otherwise he didn’t eat or get a wash. After all that time he was discharged on a Saturday with no care plan and nothing in place at home, so I laugh when I hear the hospital talking about planned discharges”.

One relative comments “the eagerness to send people home as soon as possible is chilling and worrying”.



# Dorset County Hospital NHS Foundation Trust

This Trust is the provider of acute services mainly for people living in Weymouth & Portland, West Dorset, North Dorset and Purbeck but also provides renal services for patients across Dorset and South Somerset. Of the comments we have collected and recorded about this Trust, 45% are positive, 44% are negative and 11% are mixed.

The main themes or topics on which people have offered feedback include quality of treatment, staff attitudes and waiting times.

 **45% is positive**

 **44% is negative**

 **11% is mixed**

## Positive feedback

Positive feedback covers a number of specific services with no particular obvious trends, with comments such as “Throughout the procedure which was in part highly intimate I was treated with the utmost respect and dignity by the staff in attendance. I was also assured that during the actual procedure the door to the examination room was locked, preventing anyone wandering in inappropriately. I valued this consideration to my privacy. Throughout the procedure the staff explained to me exactly what was happening and checked regularly my comfort and consent to continue”.

One patient advised “I had to go to A&E, the waiting time was stated as 1-2 hours and I was seen and discharged within that timeframe which, for a bank holiday weekend, was impressive”.

And from a patient using an outpatient clinic “A potentially very frightening day made far less frightening by compassionate staff. And I really appreciate that!”

And “My wife and I were very impressed with the speed and efficiency of the service we received when we called for an x ray yesterday. We were in and out in under half an hour. In times when the health service gets a lot of criticism we were pleasantly surprised”.

This comment illustrates how good communication can make a big difference to how a patient feels about treatment “I was very nervous and apprehensive about having a procedure done - read too much on the internet! I should not have worried as the consultant and the nurse specialist were fantastic in trying to put me at ease

before and during the biopsy. It was not very pleasant but made bearable by the excellent service given by these two professionals at this hospital. Thank you guys for your care and understanding in explaining the procedure and results to my partner and myself”.

This comment from a patient highlights a generally positive stay with an interesting comment about patient’s wishes not being listened to “I couldn’t have wished for better care, kindness and help whilst there. The staff are so nice even under pressure doing everything to make your stay as pleasant as possible, even the food was good! One little thing that bugged all the patients was the fact that we all asked to be called by our first names but on the board above our beds we had our marital status up and it felt very formal which made us feel a little uncomfortable, even though we were all ancient!! All in all the staff were great and there was one young lady, she was such a sweetie, always happy and smiling even though she was rushed off her feet. Hats off to all the staff as I know I couldn’t do their job in a million years as I would murder some of the patients. The staff all had a brilliant sense of humour which must be hard for them with what they have to put up with”.

## Mixed feedback

Some of the mixed feedback received refers to patients having had very good treatment but not being happy about mixed wards or sharing facilities between men and women, or receiving good treatment but after care not being good or communication between wards/departments not being efficient. One patient commented about receiving excellent treatment in A&E but being sat in the waiting area having to listen to staff “moaning about the NHS”. Another patient who used the maternity ward expressed concern about staff on the day shift and lack of care and having to wait a long time for pain relief but also commended the night shift staff stating when the night shift were on it was “like a different hospital”.





## Negative feedback

We have received a number of comments about quality of treatment with a number of patients concerned about staff levels. Patients comment that often they have helped other more vulnerable patients (especially in elderly care) to eat their meals because there are no staff to help. One comments states

“I was in Dorset County Hospital for 8 days and I was moved to 5 different wards during that time, my partner could never find me when he came in to visit! The hospital felt chaotic and there were large numbers of agency staff. One night the whole ward was run by agency staff and they were all saying they’d prefer to work at Yeovil hospital where they felt it is better managed. While I was in hospital an elderly malnourished woman was brought into the ward, the nurse brought her some porridge and a cup of tea but placed it out of her reach. I ended up helping her to eat, because no one came back!”

Relatives have commented that they are concerned about safety due to staff levels with one comment saying “our recent experience was not just disappointing but scary”. A further comments states “The medical ward was understaffed. There were to treat patients safely or even with dignity. Medication wasn’t given on time and some doses even seemed to be missed. Though the majority of staff were helpful and hardworking they must be demoralised by their working conditions. A very disappointing experience”.

Patients, carers and relatives have commented that staff appear to lack management and guidance and morale seems to be very low, which patients pick up on. This comments highlights some of those issues “Transfer from Ward A to Ward B! Due to infection control all patients were being transferred. This procedure seemed to be leaderless and disorganized which resulted in all staff milling about not knowing who should be doing the various tasks required to transfer mum to Ward B. During this period a porter entered the ward and had to be reminded to wear protective gloves. The nurse seemed to be exhausted, and in her own words “wanting to go home”. When mum arrives on Ward B the nurse informs the porter and cleaner (who transferred mum on a chair) that there were no beds left, the only one free was a cubicle which did not have a suitable bed. Again this ward was in chaos and the nurse informed us in her own words she was a “lone ranger”. The cleaner helped mum into bed with the help of the only nurse on duty and made sure she was comfortable. The alarm on my mother’s drip was beeping to indicate that the battery was low and needed to be plugged into the mains. I told

the nurse who came in and noticed that during the transfer the plugs had been left behind in Ward A. At this point the nurse’s bottom lip began to tremble and she said she had so much to do on her own and could make a phone call to the other ward to have them brought over. This situation left me with no confidence in the system and I could clearly see my mother was distressed and did not want me to leave. I offered to get the plugs myself so that at least my mother would have the medication she obviously required after having an operation. During this time lots of staff were coming and going and there appeared to be confusion regarding the infection control guidelines. During this period a nurse used inappropriate language and swore at the situation which we all clearly heard. I asked the nurses, that arrived to help the lone ranger, for some water. They looked at each other and told me there were no jugs so I asked if they would simply get a glass of water, which they did. I got the impression that they too appeared to have no direction! When we finished our visit at 8.45pm mum was still waiting for a bedside table to enable her to have water. The nurses seemed to be aware that the disinfecting task needed to be performed, however they were waiting for orders and appeared dis-interested”.

We have received a number of comments relating to long waiting times in clinics/ outpatients and for appointments with specialists and consultants. There are also a number of comments about cancelled appointments, cancelled surgery and confusions over when treatment will be given. “Was promised urgent referral by GP but have since found out that she will be on a waiting list for 6 weeks. Was due to be discussed at the monthly team meeting but 2 of the last ones were cancelled and patient thinks that this will mean they won’t be able to discuss her case until Jan. Has also had a cancellation from the hospital for her appointment due today and re-scheduled for 5 months later!”.

And “Mrs A had an operation in December 2012 and was discharged without any information about her diet. Mrs A has on going health issues and is waiting to see a dietician. She has had three appointments, all of which have been cancelled. Her appointment with a dietician is now in June 2014. Mrs A continues to eat very little and is unable to take build up drinks as they contain dairy products”.

And “N. had a bowel operation and had to have a stoma bag fitted. She was promised a reversal within 6-8 weeks. The consultant has cancelled her operation 3 times causing her extreme problems with child care arrangements and she has had to live with a

stoma bag for 6 months. She has now been told her consultant is leaving and she will have to wait for the new consultant to start and waiting lists to be transferred”.

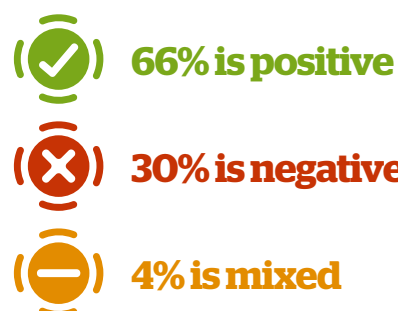
Communication and access to information is also an issue with patients reporting that they are not informed about their condition/medication etc. or left waiting for treatment with no updates/explanations when things don’t happen. This comment shows communication between Trusts and service providers is still an issue, “Having seen a neurology specialist at DCH on the xxxx, I was informed that referrals were being made for an MRI Brain Scan and Evoked Potential Tests. The MRI would be carried out at DCH but the EP tests would be done at Poole hospital. I have had the MRI scan, however there has yet to be an appointment for Poole hospital. Due to my going on holiday I thought I would chase matters up with Poole hospital and DCH’s Neuro department. On doing so, I found that Poole has not received any referral notice and that DCH Neuro department are so short staffed that referrals such as mine are delayed due to there being this shortage of staff. This then leaves the patients in \*limbo\* with perhaps long delays in getting follow up appointments but more so with the worry as to the outcome of results for patients like myself who has been informed by my GP that previous MRI scan indicates possible MS. My follow up appointment with Neurology department is not until xxxx--4 months since initial assessment”.

# Community Hospitals

Dorset HealthCare University NHS Foundation Trust provides services in the 12 Community Hospitals across the county. These services include Minor Injuries Units (MIUs), elderly care inpatient rehabilitation, outpatient appointments, theatre, therapy services and radiology.

Of the comments we have collected and recorded about Community Hospitals 66% are positive, 30% are negative and 4% are mixed or neutral.

Possibly due to the wide range of services provided at Community Hospitals there are no main themes or topics for the negative comments we have received.



## Positive feedback

Positive feedback includes a number of comments from patients expressing appreciation at having MIUs locally - "I would like to say thank you so much for the excellent care and treatment at local MIU. It's nice to know that there is a minor injuries unit right on our doorstep that we can go to if needed."

And "I felt rather false even turning up for a few wasp stings but was very quickly put at ease and advised throughout the consultation what was happening and the reason for any decisions or medication. I honestly cannot praise the staff enough - simply superb member of staff, who even stayed on well after her shift finished to ensure all was well with myself. Thank goodness the Minor Injuries Unit is still in Bridport."

And "I would like to take this opportunity to put on record the excellent care I received from 3 NHS services I needed to access when I was unlucky enough to stand on a needle, half of which became embedded in my foot. I was able to visit my local injury unit where I was seen very promptly on arrival, within minutes I had visited the x-ray dept. and was then informed that I would need to have an operation in Dorchester hospital the next day to remove it..... I know from many years as a head teacher that it is always the criticisms that make the headlines and generally people who are happy with the service that they receive do not always articulate this, therefore on this occasion I would like to express my thanks to all the professional and very caring staff that I came into contact with."

Other positive feedback includes a number of comments about the short waiting times when going into community hospitals for outpatient services and the relaxed and positive attitude of staff.

"A completely remarkable level of service. Unlike any NHS hospital that I've been to in the past. Clean, friendly, personal and professional. No waiting around, appointments on time. Must be how the NHS was in the distant past."

And "My husband and I visited Swanage hospital yesterday for an appointment for a procedure at which I was very nervous of having. I needn't have worried. The staff from the moment we arrived were fantastic. They made me relax and explained everything that was going to happen. I was nervous of having a cannula inserted especially as my vein seemed to have disappeared. I was comforted by 3 - yes 3 - amazing friendly nurses/sisters while this was done. While I was having the procedure the staff looked after my husband offering tea, coffee and biscuits at regular intervals. I cannot say enough good things about this lovely hospital and its amazing staff."

These next 2 comments really do highlight what a difference good "customer care" can make to the experience and then potential ongoing recovery of patients. "I am not a patient or visitor, however, my cousin is a patient and as I live a long distance away cannot visit. When I contacted the hospital, a bright cheery receptionist answered and I was directed to an equally pleasant ward clerk, within a minute or so I was in conversation with my

cousin, what excellent service! As a patient my cousin is delighted at the wonderful care he has and is still receiving, he cannot praise the hospital enough for the devotion given by the staff. The attention to his needs has been outstanding which in turn has left him in high spirits. My dear cousin continues to recover from a nasty accident and describes the hospital as "Wonderful Wareham" where the staff go that extra mile for the wellbeing of the patients".

"I went in to the day surgery unit yesterday and cannot rate these guys highly enough. They were all so friendly and helpful that it made my experience there so much better. I was last on the list and I was kept well informed at all times and the nurses did everything they could to accommodate me during this time. My procedure was carried out under general anaesthetic and the whole team, from the anaesthetist to the surgeons to the nurse and everyone else involved were just brilliant. They alleviated any worries I had, remaining professional at all times, but was so lovely to have light hearted banter with them all, which helped to take my mind off the procedure itself. The nurses were very attentive and made arrangements to make sure I had extra pain relief and was comfortable before going home. I would say to anyone that is attending Weymouth Community Hospital for a surgical procedures in the Day Surgery Unit, they are brilliant, a lovely bunch of hard working people that make a painful visit so much more enjoyable if you can call it that!!"

Healthwatch Dorset has often emphasised the importance of professionals providing patients with information and updates

## Positive feedback (continued)

on their care whilst in hospital. Being informed and having a good understanding of what is happening, and why, when feeling vulnerable or unwell can make a huge difference to how people experience care and to how they then recover. This comment highlights this - "We used the walk-in facility today and just wanted to leave a comment to say how good this

facility is. It is not always possible to see a doctor during the week and this is the first time we have used this facility (we live about 10 miles away). The staff are cheerful and helpful. We did have to wait approximately an hour but this was not a problem as we could see how busy they were. The staff member who treated my son was absolutely excellent, we didn't

feel rushed and she took time to explain everything and exactly what he should do. As my son had to go back to Uni on Monday it was really important for her to explain everything in detail to him and we all felt reassured about what he should do and of course, started his antibiotics immediately. Excellent service and thank you everyone!"

## Negative feedback

Some of the negative comments include:

"Twice over the last 12 months I've tried to book an audiology appointment for my 90-yr old mother at Bridport - on both occasions I've been told there's been no availability as the demand is too high for the number of slots available. This has meant travelling to Dorchester and Weymouth from Lyme Regis - why aren't more slots being provided in the location where there's an obvious demand - why should we have to travel some distance when there's a clinic on our doorstep?"

Although this comment may not relate directly to services provided at the hospital it highlights the importance of good communication between service providers - "My 84 year old friend came out of Bridport Hospital yesterday and was taken home in a sit-in ambulance arriving home

in mid-afternoon. She's very unsteady on her feet and is very likely to fall over if she isn't supported. For some strange reason the ambulance man didn't accompany her to the door and let her walk on her own. While she was walking to the door, she fell over and banged her head. I was up in her flat and saw her down on the ground after she had fallen. The paramedic who came afterwards agreed this shouldn't have happened and was intending to report this. My friend is now back in Dorchester Hospital. If she had not fallen, she would not be there. I don't want anyone to get into trouble here but I think it's important to make sure this doesn't happen again. There must have been a breakdown in communication here as it's clear that the ambulance driver was unaware of how unsteady my friend is on her feet."

Other more general negative comments include concerns at changes regarding the Hughes Unit at Bridport and concerns over communication between service providers when transferring patients between units such as from a general hospital to a community hospital or when referring patients. For example "My husband has xxx - Physio exercise requested at Hamworthy, he was meant to go to Alderney for assessment but we haven't heard anything. I don't know if it's got lost or maybe they're just too busy?"

We have also received comments from patients concerned about changes to Stuart Lodge at the Yeatman Hospital in Sherborne, a patient concerned that an accident on a ward in Westhaven was not logged properly and patients unhappy that Minor Injuries Units, for example at Wimborne, are not open on Saturday mornings.





# The Friends & Family Test

The NHS Friends and Family Test is an “official” way for people to provide feedback on the care and treatment they receive and to improve services.

It was introduced in 2013 and asks patients whether they would recommend hospital wards, A&E departments and maternity services to their friends and family if they needed similar care or treatment. This means every patient in these wards and departments is able to give feedback on the quality of the care they receive, giving hospitals a better understanding of the needs of their patients and enabling improvements. Going forward the test will be open to everyone using any NHS services.

When people are discharged, or within the 48 hours that follow, they will be asked to answer the following question: “How likely are you to recommend our ward/A&E department/maternity

service to friends and family if they needed similar care or treatment?”

They will be invited to respond to the question by choosing one of six options, ranging from “extremely likely” to “extremely unlikely”.

From the responses received, each hospital is given a monthly score out of 100 (the higher the score, the greater the patients’ satisfaction).

The following table lists the most recent (June 2014), publicly available scores for the three general hospitals in Dorset, together with the response rates (that is, the percentage of patients able to take part in the surveys who actually did).

	Bournemouth	Poole	Dorchester	National average
A&E Score	75	61	61	53
A&E Response Rate	10.5%	14.7%	22.4%	20.8%
Inpatients Score	72	83	82	74
Inpatients Response Rate	39.52%	54.84%	42.18%	38%
Antenatal Care Score	76	49	80	67
Antenatal Response Rate	6.8%	43.5%	11.7%	17.3%
Birth Score	100	100	69	77
Birth Response Rate	36.6%	2.2%	20.5%	23.1%
Postnatal Ward Score	89	75	69	67
Postnatal Response Rate	29%	31%	21%	27%
Postnatal Community Provision Score	33	47	68	77
Postnatal Community Provision Response Rate	1.2%	41.6%	16.5%	13.8%



## How to have your say

Healthwatch Dorset welcomes people's comments on local health and social care services, both good and bad. We record all the comments we receive, identify any themes or trends and then make reports and recommendations to local NHS bodies and local councils. We tell them what you think is good. But we also tell them what you think needs improving, and how they could do it. We're independent of the NHS and local councils, and we have the strength of the law and the national influence of Healthwatch England behind us.

You can tell us what you think of local services by doing any of the following:

- Calling our helpdesk on **0300 111 0102**
- Submitting the Speak Out form on our web site [www.healthwatchdorset.co.uk](http://www.healthwatchdorset.co.uk)
- Talking to us on **Twitter** or **Facebook**
- Talking to an advisor face-to-face in any of the Citizens Advice Bureaux in Dorset, Poole and Bournemouth
- Writing to us (no stamp needed) at:  
 Freepost RTJR-RHUJ-XBLH  
 Healthwatch Dorset  
 896 Christchurch Road  
 Bournemouth BH7 6DL

## PALS

Each hospital itself has a PALS (Patient Advice and Liaison Service). They welcome feedback on their services and can listen to and respond to your concerns, suggestions or queries.

Bournemouth Hospital  
 Poole Hospital  
 Dorchester Hospital  
 Dorset Healthcare  
 (Community Hospitals)

Tel. **01202 704886**  
 Tel. **01202 448499**  
 Tel. **0800 7838058**  
 Tel. **0800 5874997**

Email. [pals@rbch.nhs.uk](mailto:pals@rbch.nhs.uk)  
 Email. [pals@poole.nhs.uk](mailto:pals@poole.nhs.uk)  
 Email. [pals@dchft.nhs.uk](mailto:pals@dchft.nhs.uk)  
 Email. [pals@dhuft.nhs.uk](mailto:pals@dhuft.nhs.uk)

## How to make a complaint or raise a concern

Healthwatch Dorset can give you information about how to make a complaint or raise a concern. Talk to one of our advisors on **0300 111 0102**.

Healthwatch England and Citizens Advice have produced a series of online guides to help you make a complaint or raise a concern. You can find them on our web site here:

<http://www.healthwatchdorset.co.uk/guides-making-complaints-about-health-and-social-care-services>.

Another independent organisation, Dorset Advocacy, provides a Help With NHS Complaints service that offers support and representation to people who are making a complaint about an NHS service (or are thinking of doing so). You can contact them on **0300 3437000**, email [enquiries@dorsetadvocacy.co.uk](mailto:enquiries@dorsetadvocacy.co.uk).



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This report is available to the public on the Healthwatch Dorset web site ([www.healthwatchdorset.co.uk](http://www.healthwatchdorset.co.uk)).

It has also been sent to Healthwatch England, The Care Quality Commission, NHS England, NHS Dorset Clinical Commissioning Group, The Overview and Scrutiny Committees (OSC) of Bournemouth, Dorset and Poole councils, Bournemouth Borough Council, Dorset County Council and Borough of Poole



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