



## Inpatient Unit

# Relatives Survey Summary

October 2016  
to  
March 2017

## **Introduction**

St Barnabas Lincolnshire Hospice is continually looking to improve its services and requires feedback from relatives to be able to do this effectively. The Care Quality Commission 'The Fundamental Standards' 2015 are the principles on which this questionnaire is based.

The questionnaire, and a letter explaining its aims, is sent to relatives of patients who have died in the Hospice.

The questionnaire is anonymous and the relatives are made aware of this fact in the accompanying letter. The Audit Officer keeps a record of the number of forms that are sent out to relatives so that a percentage total of the completed forms can be calculated and included in the annual Quality Account.

The results of the relative surveys are collated 6 monthly into a report that is available on request. The report is also available on the St Barnabas Lincolnshire Hospice Website.

Relatives who would like a copy of the report will be sent the most recent one that is available at the time of their request.

The completed reports are available to staff and used by the Hospice to contribute to its assessment of whether it is meeting its aims, objectives and statement of purpose.

Kim Gunning  
**Trust Audit Officer**

# Relatives Satisfaction Survey Summary

## October 2016 – March 2017

Response Rate	
Number of forms sent to relatives	54
Number of forms returned	29
Percentage total of forms returned	53.7%

### **SECTION ONE**

#### **1. While in the Hospice, did staff involved in your relative’s care:**

##### **a. Introduce themselves?**

Yes, always	Yes, sometimes	No	Don’t know	Not answered
24	3	1	0	1

##### **b. Wear an identity badge?**

Yes, always	Yes, sometimes	No	Don’t know	Not answered
26	1	0	1	1

##### **c. Explain what they were doing in a way that your relative could understand?**

Yes, always	Yes, sometimes	No	Don’t know	Not Applicable	Not answered
23	2	1	2	0	1

This will be fed-back to staff as a learning point regarding their communication; as a specialist palliative care provider, communication is key.

##### **d. Make an effort to meet your relative’s religious or spiritual needs?**

Yes	No	Don’t know	Not applicable	Not answered
18	0	1	8	2

#### **2. Was your relative given enough privacy and dignity when discussing their condition or treatment?**

Yes	Yes, sometimes	No	Don’t know	Not applicable	Not answered
26	0	0	1	1	1

#### **3. Was your relative asked to give their consent to any treatment or care that they received?**

Yes	No	Don’t know	Not applicable	Not answered
23	0	1	3	2

**4. Was your relative given enough privacy when being examined or treated?**

Yes, always	Yes, sometimes	No	Don't know	Not answered
28	0	0	0	1

**5. If required, was your relative offered a chaperone during their care?**

Yes, always	Yes, sometimes	No	Don't know	Not applicable	Not answered
14	1	1	9	0	4

**6. Did nursing or medical staff talk in front of your relative as if they weren't there?**

Yes, always	Yes, sometimes	No	Don't know	Not answered
0	0	25	2	2

**7. Were you satisfied with how involved your relative was in the planning of their care?**

Yes, always	Yes, sometimes	No	Not applicable	Not answered
25	1	0	1	2

The Inpatient Unit strive to involve patients and their families as far as possible in the planning of their care. We have a strong patient focus and welcome feedback if there are any learning opportunities identified.

**8. Was your relative aware that they could change their mind at any time about treatment or care that had been previously agreed?**

Yes	No	Not applicable	Don't know/Unsure	Not answered
22	0	5	0	2

**9. Did you feel that the care, treatment and support was delivered to your relative in a safe and effective manner by members of the healthcare team?**

Yes	No	Don't know	Not applicable	Not answered
27	0	0	0	2

**10. Did you feel that the staff involved in your relative's care were physically able to meet their individual needs?**

Yes, always	Yes, sometimes	No	Not applicable	Not answered
26	1	0	0	2

**11. Did you feel there were enough staff on duty to meet your relative's health and welfare needs?**

Yes, always	Yes, sometimes	No	Not answered
25	2	0	2

Staffing is monitored shift by shift and levels are reported both to the Board and for the public on the St Barnabas Website

**12. Did you feel that the staff involved in the care of your relative communicated with each other to meet your relative's needs?**

Yes, always	Yes, sometimes	No	Not answered
26	1	0	2

**13. Was your relative's independence respected?**

Yes, always	Yes, sometimes	No	Not applicable	Not answered
26	0	0	1	2

**14. If your relative's medicines were reviewed and changed, was this explained to them?**

Yes	No	Don't know/unsure	Not applicable	Not answered
21	0	0	5	3

**15. Was your relative given clear information about the medicines they were taking whilst they were in the Hospice?**

Yes, always	Yes, sometimes	No	Do not know	Not applicable	Not answered
22	0	0	1	4	2

**16. If your relative ever needed to ask for medication for pain relief, was it given to them at the time they asked?**

Yes, always	Yes, sometimes	No	Do not know	Not applicable	Not answered
19	1	0	1	5	3

**17. While in the Hospice did your relative understand about the care and treatment choice's that were available to them?**

Yes, always	Yes, sometimes	No	Do not know/unsure	Not applicable	Not answered
22	1	0	0	3	3

**18. Did your relative have the opportunity to ask questions when they wanted to?**

Yes, always	Yes, sometimes	No	Not applicable	Not answered
24	0	0	2	3

**19. When your relative had important questions to ask a doctor or a nurse, did they get answers that they could understand?**

Yes, always	Yes, sometimes	No	Not applicable	Not answered
20	2	0	4	3

**20. Whilst in the hospice did your relative have the opportunity to discuss their future care (Advance Care Planning)?**

Yes	No	Do not know	Not applicable	Not answered
18	0	1	7	3

**21. Was your relative asked about what type of food and drink they preferred or if they had any special requirements?**

Yes	No	Not applicable	Not answered
24	0	2	3

**22. Was your relative given a choice of where to eat?**

Yes	No	Not applicable	Not answered
16	2	8	3

Staff are encouraged to offer patients a choice of where they can eat if it is practical to do so. We are somewhat limited with space but we do offer the option of eating in the conservatory if individuals do not want to eat at the bedside. We aim to offer a “dining experience” as far as possible.

**23. Was your relative satisfied with the following?**

**a. Choice of food and drink**

Yes	No	Not applicable	Not answered
20	0	6	3

**b. Quality of food and drink**

Yes	Yes, sometimes	No	Not applicable	Not answered
20	0	0	6	3

**c. Amount of food and drink**

Yes	No	Not applicable	Not answered
19	0	6	4

**d. Access to food between mealtimes, including during the night**

Yes	No	Not applicable	Not answered
18	0	8	3

**24. Was your relative interrupted during mealtimes?**

Yes, always	Yes, sometimes	No	Not applicable	Not answered
0	1	17	6	5

**25. Was your relative given assistance to eat and drink, if required, at the time they needed it?**

Yes, always	Yes, sometimes	No	Do not know	Not applicable	Not answered
10	2	1	0	13	3

**26. During their stay, did your relative ever share a ward with patients of the opposite sex?**

Yes	No	Not answered
0	26	3

**27. Was your relative disturbed by noise in the Hospice?**

Yes	No	Do not know	Not answered
2	23	0	4

**28. Was your relative able to rest during quiet time?**

Yes, always	Yes, sometimes	No	Not answered
22	2	2	3

**29. As far as you know, did the staff wash or clean their hands before providing care to your relative?**

Yes, always	Yes, sometimes	No	Do not know	Not answered
22	1	0	3	3

As part of the infection prevention and control within the unit, staff handwashing is monitored closely. Because of the nature of some nursing interventions, this is carried out in areas not easily viewed by patients and visitors.

**30. Were the facilities in the communal areas of the Hospice clean?**

Yes	No	Not answered
26	0	3

Cleanliness of all areas within the unit is of paramount importance. Various audits and inspections are carried out (generally unannounced) regularly to ensure patient and visitor safety.

**31. Did your relative know how to call for help?**

Yes	No	Not applicable	Not answered
24	0	2	3

**32. If your relative needed to call for help, were they satisfied with the response?**

Yes, always	Yes, sometimes	No	Not applicable	Not answered
22	1	0	3	3

**SECTION TWO**

**33. Were you given enough help and support by the Hospice Staff at the actual time that your relative died?**

Yes, definitely	Yes, to some extent	No	Do not know	Not answered
22	3	1	0	3

Feedback on relatives / carers experience is a valuable part of our quality improvement ethos. Staff welcome detailed comments in a continuous effort to make outcomes as positive as they can be.

**34. After the death of your relative, did you receive enough support and information From the Hospice Staff?**

Yes	No	Do not know	Not answered
22	1	3	3

**35. Since your relative has died, have you been contacted by the Hospice Bereavement Service?**

Yes	No	Not answered
22	4	3

All referrals for bereavement care are followed up by the Family Support Service. Unless indicated by staff on the Unit, relatives are sent a pack of information and an invitation to join one of our bereavement groups which are run weekly across the County. Additional support either through supportive listening or counselling is also available if required.

**36. Did your relative receive the Hospice Patient Information Booklet containing information about the Patient Advice and Liaison Service (PALS)?**

Yes	No	Do not know	Not applicable	Not answered
22	1	2	0	4

**37. Did you see any notices, posters or leaflets explaining how to complain about the care or treatment your relative received whilst in the Hospice?**

Yes	No	Not answered	Can't Remember	Didn't Look
19	3	2	3	2

Information on how to complain is displayed on the patients and visitors notice board. All staff are aware of how to advise a patient / relative if they raise a concern and will ensure they can speak to the appropriate member of the team if they wish to take it further.

**38. Did you feel that information your relative had given to staff was treated in a confidential manner?**

Yes Always	Yes Sometimes	No	Not Applicable	Not answered
22	1	1	2	3

Confidentiality is so very important within healthcare settings. All staff are trained and then updated yearly in relation to information governance and confidentiality. Without further detail or discussion it is difficult to address the highlighted potential concern.

**39. How likely is it that you would recommend the Hospice service to friends and family?**

Extremely likely	Likely	Neither likely or unlikely	Unlikely	Not at all	Do not know	Not answered
25	1	0	0	0	0	3

Kim Gunning  
Trust Audit Officer  
24<sup>th</sup> April 2017



*The feedback received through both the relatives and patient surveys is an invaluable way for us to understand from a service user perspective how we can continue to improve the care we deliver. We have a proactive approach toward Quality Improvement and we aim to facilitate the best possible outcome for each individual patient and their relative/carer.*

Sue Carter  
Ward Manager  
Inpatient Unit  
April 2017