Ashford and St. Peter's Hospitals NHS Foundation Trust

TRUST BOARD
27th September 2018

AGENDA ITEM	10.0	
TITLE OF PAPER	Patient Story to Trust Board of Directors	
Confidential	**NO**	
Suitable for public access	**NO**	
PLEASE DETAIL BELOW THE OTHER SUB-COMMITTEE(S), MEETINGS THIS PAPER HAS BEEN SUBMITTED		
None		
STRATEGIC OBJECTIVE(S):		
Quality Of Care		To achieve the highest possible quality of care through learning from the experiences of patient families.
People		Listening to friends and relatives, valuing their contribution to our learning culture.
Modern Healthcare		To use these experiences to allow us to continue to deliver efficient and effective care.
Digital		Understanding how new technology can enhance care pathways.
Collaborate		Understanding how working with families can improve a patient journey.
EXECUTIVE SUMMARY		
	This story was selected as it allows the Trust Board to hear how a lack of communication can affect the understanding and perception of care from the perspective of a relative. In this instance the transfer of Ms Murphy-Rutland's grandfather from AMU to Maple Ward and the subsequent poor communication surrounding the nutritional input and dietetic support he received before his death on the 11th April 2018. The key issues for Ms Murphy-Rutland are those of decisions around feeding and the communication of what treatment was appropriate for her grandfather whilst an inpatient on Maple Ward. The Trust has just appointed a Clinical Lead for Nutrition to support the clinicians and manage the case loading of the Nutritional Nurse Specialist. The Trust has also maintained two nutritional ward rounds each week. During these rounds the Nutritional Team review each patient of a feeding	

	regimen including all PEG and NG fed patients. The story will be told by Ms Rachel Murphy-Rutland, providing her views on potential improvements for communication to relatives.
RECOMMENDATION:	
SPECIFIC ISSUES CHECKLIST:	
Quality and safety	The story supports delivery of quality care.
Patient impact	Hearing the story from a relatives perspective first hand raises awareness of the importance of listening and involving family in patient care.
Employee	This story demonstrates a families' perception of a patient's journey and the effect on them in the way care is delivered and interpreted.
Other stakeholder	None identified
Equality & diversity	This story recognises that patient's relatives can be part of the support a patient requires in managing their care with dignity and respect.
Finance	No implications
Legal	No implications
Link to Board Assurance Framework Principle Risk	
AUTHOR NAME/ROLE	Russell Wernham, Deputy Chief Nurse
PRESENTED BY DIRECTOR NAME/ROLE	Sue Tranka, Chief Nurse
DATE	27th September 2018
BOARD/TEC ACTION	Receive

1. Patient Story Background

Ms Murphy-Rutland's grandfather, Mr Leo Murphy, died on 11th April 2018 aged 93. Prior to this on Tuesday 3rd April he was moved from AMU to Maple Ward and was placed nil by mouth initially than later permitted yogurt.

When asked by Ms Murphy-Rutland, the staff on Maple Ward did not provide any adequate answers; nor was she referred to a Speech and Language Therapist for more information.

Ms Murphy-Rutland was informed by nursing staff of some alternative treatments including enteral, or tube feeding. Mr Murphy's family found the communication around his care unusual as he was eating adequately on Tuesday (with his puree diet) on AMU when they

visited. Mr Murphy's difficulties in swallowing were known to his family, which made them question this lack of communication.

Ms Murphy-Rutland's complaint was in relation to this poor communication. In discussion with her, there were three main elements to this, these were:

1. Language used in communication was filled with euphemisms, such as informing her of her grandfather being in his autumn years. There were also issues with being able tio speak to key people, with family having to fit into the hospital working hours.

2. The standard of nursing was poor, with patients left in wet beds, no one willing to take patients to the toilet and having to stand at the nurses station to catch the attention of a nurse to assist with care. Another aspect of poor communication with catering and nursing was staff putting food in front of Mr Murphy without reading the sign on the door, then taking it away. For Ms Murphy-Rutland, this was particularly poor considering this was his last week in hospital.

3. There was a poor standard of communication between medical and Speech and Language Therapy (SALT) staff, with SALT instructions and recommendations not being followed. This included fluids not being thickened despite instructions being left.

Ms Murphy-Rutland felt that the lack of discussion will never give Mr Murphy's family insight into how impactful the lack of food was on his condition. There was also concern regarding communication about the plan of care and what this course of action tends to imply.

Whilst Ms Murphy-Rutland acknowledges there is no way of knowing how the lack of food came to play a part in her grandfather's death, she is very clear it made him miserable. He may have been reluctant to eat a great deal but he was more than willing to try and eat when his family were with him.

Ms Murphy-Rutland has noted that she wouldn't want another family to feel this way, when a simple phone call could have avoided the distress and subsequent complaint.

2. Follow up actions

This complaint was closed on the 10th September following a local resolution meeting with the Division of Medicine and Emergency Services.

The meeting with Ms Murphy-Rutland was attended by Dr Gautam Das, Consultant in Endocrinology, Ms Ciara Tilley, Therapy Lead for Dietetics and Speech and Language Therapy and Mrs Roz Jebson, Patient Experience Co-ordinator for Medicine & Emergency Services.

During the meeting both Dr Das and Ms Tilley provided apologies and took actions to feedback comments to Maple Ward staff allowing learning from this poor communication. A follow up letter and CD recording of the meeting was then sent to Ms Murphy-Rutland.

Ms Murphy-Rutland would be very keen to see how this story to board is used to provide learning and would also be very keen to be involved in any future patient experienced based co-design.

Ashford and St. Peter's Hospitals
NHS Foundation Trust

Russell Wernham,
Deputy Chief Nurse.