# healthwatch Devon

### **Quarterly Intelligence Report**

People's experiences of services provided by:

## Royal Devon and Exeter NHS Foundation Trust

July - September 2017



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#### About Healthwatch Devon

Healthwatch Devon is the independent health and social care champion for people. We exist to make sure that people are at the heart of care. We listen to what people like about services and what could be improved. We share their views with those with the power to make change happen. We also help people find the information they need about services in their area.

In summary - Healthwatch is here to:

- Help people find out about local care.
- Listen to what people think of services.
- Help improve the quality of services by letting those running services and the government know what people want from care.
- Encourage people running services to involve people in changes to care.

#### About this report

Since Healthwatch Devon was introduced in 2013, thousands of people have shared their views and experiences with us in relation to their local health and social care services.

During the period 01 July - 30 September 2017, we engaged with more than **1,843** people. This engagement was through our consumer champion work, our events, and activities and through our project work and surveys.

Included in this figure is the **75** people who used our feedback form to have their say and share their experiences, **7** of those were specifically about services provided by **Royal Devon and Exeter NHS Foundation Trust.** The information on the following pages is a summary of these patient stories and is intended to make the views of local people known to the Trust.

This report should be read in conjunction with Quarterly Intelligence Report: People's experiences of health and social care services in Devon July - September 2017.

#### Intended audience - Royal Devon and Exeter NHS Foundation Trust

The Trust provides specialist and emergency hospital services to residents and visitors primarily in Exeter and East and Mid Devon, though patients also come from further afield to access services.

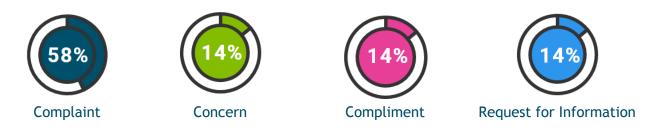
RD&EFT have over 800 beds at the <u>Wonford</u> and <u>Heavitree</u> hospital sites in Exeter. They also provide patient care closer to home including managing the day case surgery activity in Devon community hospital theatres, community midwifery services, stroke care, renal dialysis units, as well as the specialist care eye clinic to glaucoma patients in rural towns.<sup>1</sup>

<sup>&</sup>lt;sup>1</sup> Information taken from the <u>About Us page on the RD&EFT website</u>



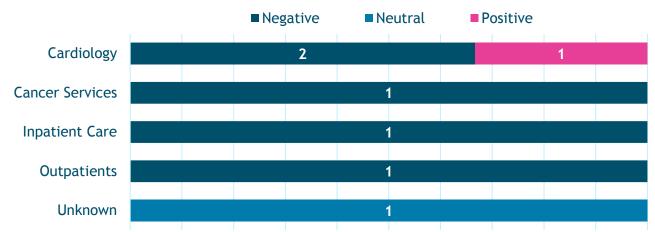
#### Nature of the feedback provided

The following shows the comments recorded broken down by the nature of the experience.



#### What services people are commenting on

The chart below illustrates the hospital, department, ward, or service that the feedback relates to and the nature of the experience.



#### 2.1. Services provided by Royal Devon and Exeter Hospital

The following are the views regarding RD&E services and the ward or department where the experience took place. The table also shows the sentiment expressed by the person explaining how they felt about their experience and the theme(s) relating to the feedback.

Ward or	Comment	Themes relating to the feedback			
department	sentiment*				
Cardiology	Negative	Waiting Times			
Cardiology	Negative	Quality of Treatment, Staff attitudes			
Cardiology	Positive	Access to Hospital Services, Quality of Treatment, Staff attitudes			
<b>Cancer Services</b>	Negative	Diagnosis, Quality of Treatment			
Inpatient Care	Negative	Access to Hospital Services, Referral			
Outpatients	Negative	Access to Hospital Services, Discharge			
Unknown	Neutral	Complaints Process, Diagnosis			

\*NB the comment sentiment column in these tables do not reflect an overall service rating but is rather a categorisation of the nature of the views given on a particular theme.



## Themes in relation to RD&E NHS Foundation Trust services

When Healthwatch Devon records patient feedback, the experience is categorised in to themes. Depending on how much information is provided, feedback can refer to more than one of these themes.

Complaints Process Referral

Staff attitudes

### Discharge Quality of Treatment Diagnosis Access to Hospital Services Waiting Times

Theme	Negative	Positive	Neutral	Total
Quality of Treatment	2	1		3
Access to Hospital Services	2	1		3
Diagnosis	1		1	2
Staff attitudes	1	1		2
Referral	1			1
Waiting Times	1			1
Complaints Process			1	1
Discharge	1			1
Total	9	3	2	14

#### Experiences shared in relation to RD&E NHS Foundation Trust services

The following are the patient stories that have been shared with us during the last quarter. These stories are sometimes shared by the individual receiving the care, a friend or relative or sometimes reported by an advocate who is providing support.

- My husband was discharged unable to get out of bed, chair, or shower without at least one person to help. He has been in hospital 10 times in 4 years: after falls following a major stroke. Community services have refused to put him on a falls program, we have had to set up and fund rehab programs ourselves. Community help is not available. The community hospitals need to be kept. There are too many tick box people and few hands on.
- 2. Clients partner had an operation to remove a cancer of the kidney. The operation went wrong and they were forced to operate again, inserting a Stoma bag. Having been in hospital for 10 weeks patient was discharged, but became very poorly again within two weeks (kept passing out) and was back in hospital for another month, while they tried to work out why they kept blacking out. It was attributed to water levels in their body and instruction was given not to remove water from patient, although this may not have been followed. Patient was discharged again and died shortly after. After 5 post mortems, they identified kidney disease as the cause, a previously undiagnosed condition. Client is very upset and angry.



- 3. Patient has waited more than 18 weeks for hernia surgery. They have been in considerable discomfort and have been unable to work. This has resulted in their house being placed in jeopardy. Although they have a choice of 2 regional hospitals, neither have gotten back to them within the allotted time.
- 4. A lady was misdiagnosed and followed the complaints system getting the ombudsman involved. She has been asked by the ombudsman how much compensation she would like but is confused as to what she might be entitled to.
- 5. Autumn last year I went for a pre-op assessment for a full knee replacement having had my other knee replacement a few years ago. Whilst at the assessment I was diagnosed with a suspected Atrial Fibrillation (AF) condition and my knee replacement was postponed. I was then referred to a cardioversion procedure which was undertaken at the beginning of this year. This procedure restored a proper heart rhythm for a short while, however after a couple of weeks I sensed I had reverted back into AF. My GP and the cardiology clinic confirmed this. I was told that there was a 12-month waiting list for the procedure I needed, an ablation. The hospital advised me that they were looking into extra resources to try and address the situation. Whilst on the waiting list I moved out of area and after some delay following my initial appointment I was fitted with an assessment device which meant I needed to stay overnight and had an appointment the following day to download the data. After a month I had not been given the outcome of this assessment so I chased the hospital and was told that the report had not been received by the Cardiology team and they would chase it up. The report was received a month later. Now 3 months down the line I am still unaware whether I am actually on the waiting list for an ablation let alone getting the procedure undertaken. My second knee replacement also remains in abeyance. My mobility and quality of life is steadily declining. I feel it is preposterous, that clinicians working in the same organisation are



apparently only able to communicate with each other and their patients by a hard copy letter to progress them through the system, especially when it takes up to 7 weeks for the doctor's conclusions /recommendations to be finalised in a typed document. This must seriously compound other delays in the system. As a patient, I feel stranded in the middle of all of this as the timely communication is very poor.



- 6. When I suffered a heart attack, my treatment at the RD&E, where I had a stent inserted and spent 3 nights in the cardiac ward, the service and treatment were superb. Everyone gave over and above expected levels of service. I could not find any fault at all. Before that, I spent several hours on a trolley in A&E at the North Devon District Hospital waiting to be diagnosed. My symptoms were atypical, but the pain was severe. At one point, it became intolerable and it was at that point that I infarcted. Had I been transferred to the cardiac unit in a more timely manner, it is possible that my myocardium could have been saved from permanent damage. It was busy in A&E, but I think a patient with severe cardiac pain should have been given a higher priority.
- 7. Last year I had my third pacemaker. The first two fitted flat and I did not know I had it. This last one is meant to last longer, but I have mentioned that it does not lie flat and is heavy and pulls when I go to sleep. It only seems to have attached on one side only. This leaves it to hang and droop. It is uncomfortable at times. I was not happy when it was fitted and went back a couple of weeks later, when the surgeon had a look at it. He said it would be OK later. I had my 6 months check up and mentioned it to the clinician that it was not really comfortable like the previous two. They said 'but it works and does not think that anything would be done. I would like to say that this time I was not really happy with the replacement. I am glad I am not any younger as this would depress me. Before I felt no one would know I had a pacemaker, this time I feel different. That is the only way I can explain how I feel.



This report has been produced by Healthwatch Devon - the independent champion for health and social care in Devon. We would like to thank everyone who took the time to share their experiences.

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