



Patient Feedback

Paul Whittle Assoc CIPD PGCert
Revalidation Support / MHPS Case Investigator

York Teaching Hospital



NHS Foundation Trust

York THFT

- Covers North Yorkshire
- Acquired Scarborough 2012
- Approximately 350 Consultants
- Approximately 100 others
- 2 hospices
- 1 private MH provider
- Several locums

IT systems

- Premier IT PReP
- Edgecumbe Doctor 360
- 5 year license
- Due for replacement

360/MSF

- 360 reports only accepted from Edgumbe system, or equivalent previous employer's system (post 2012)
- Very short term doctors offered GMC questionnaire



Patient Feedback

- Paper questionnaires provided by Edgecumbe
- 30 provided, minimum 17 responses needed
- Posted to Edgecumbe, report produced and added to eAppraisal portfolio
- Limited to 1 per 4 years



Issues

- Loss of questionnaires
- Distribution and collection
- Objectivity
- Cherry picking
- Licensing

Pilot

- 1 Windows 7 tablet
- Edgecumbe adapted website
- Tested in OP, Orthopaedics, Ophthalmology, A&E, across 2 sites

Findings

- Pros

- Patients much more keen to complete on tablet
- not seen as paperwork
- Results instantly uploaded

- Cons

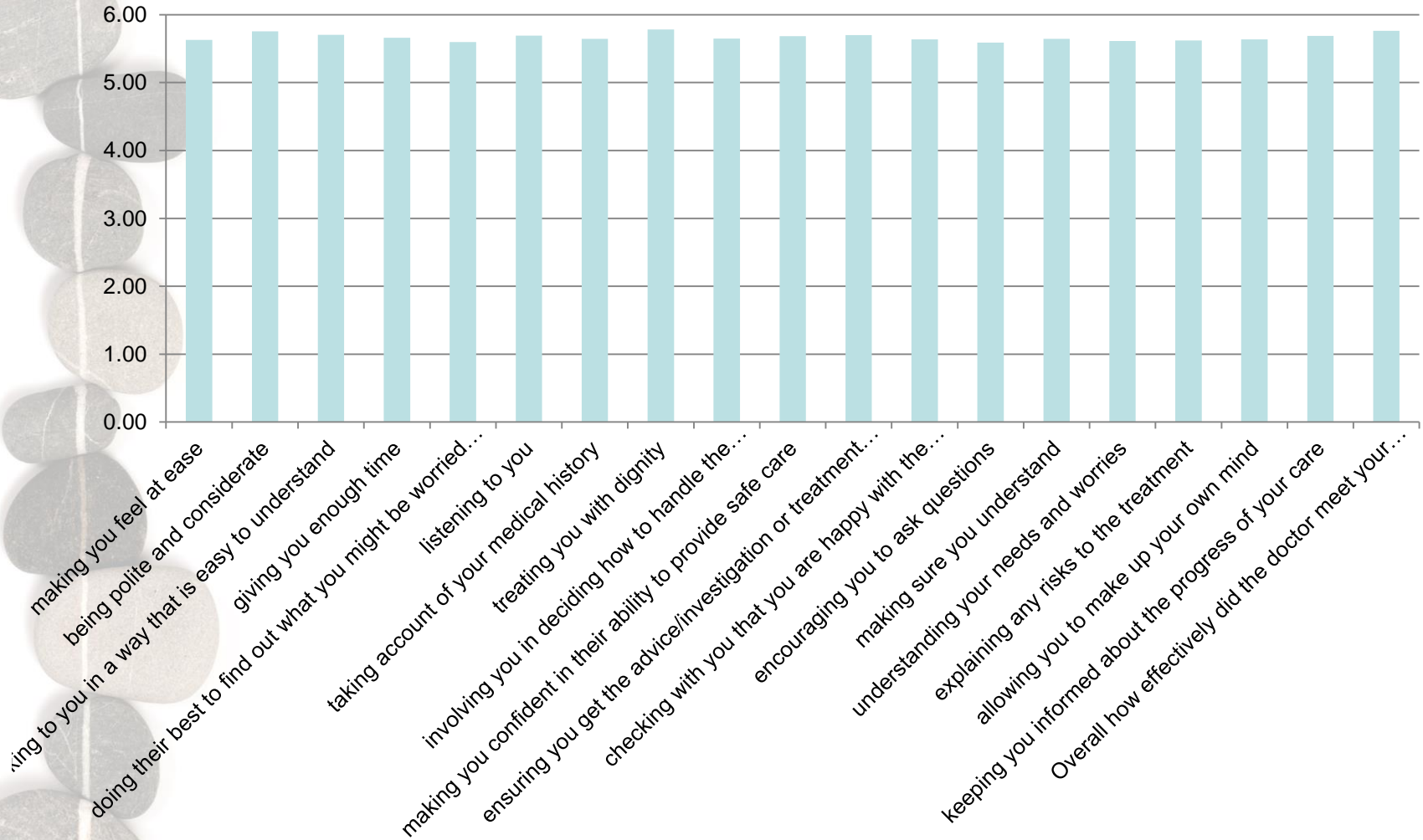
- Takes longer
- Cost
- Requires tech-savvy administrator
- Some patients needed help
- Windows 7 not touch-friendly
- Requires 3/4G or comprehensive wifi



General concerns

- Administrative overhead
- Objectivity
- Identity of correct doctor “lovely nurses”
- Honesty
- Value

2015 analysis





How do we make patient feedback valuable?

- Randomised collection by objective staff?
- Tackling whole department?
- ...?



Colleague Feedback

- Cherry picking
- Not 'proper' 360, users not obliged to request feedback from line manager or subordinates
- Standard questions



Colleague Feedback

Issues

- Requires follow-up / QA
- Requires skilled appraiser
- ‘Part B’ comments very useful
- Need to ensure reflection
- Repeat if issues arise/role changes



Relevant Guidance

- **Reference:**
- **MAPS S7 Patient feedback in non-standard situations**
- **L10 Timing first patient feedback after change in role**

No patient contact

Medical leaders – directors,	Those in the organisation that you have responsibility for or manage e.g. doctors, department leads, teams, other services, those you may be involved in contracting with or procuring from.
Educationalists, facilitators, coaches	Trainees, students, workshop participants, those you coach
Policy makers	Those you may advise, those who are involved in delivering/ managing policy that you have developed – how practical is it/how does it translate into practice?
Pathologists Radiologists	There will be individuals that you write reports for, may discuss particular patients with, give advice to so getting feedback about the service you offer, e.g. timeliness, availability, relevance, quality of report in content and commentary etc. the reflection from this feedback may change your practice i.e. the service to your customer/client which in turn impacts on patient care.