

Criticare UK Ambulance Service



Independent Service Provider

Policy Document

Obtaining Patient Feedback v1.2

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1. Introduction

Criticare UK Ambulance Service aims to provide a patient centred service. The Company's goal is to develop a model of partnership through which patients have a say on how the service is designed, developed and delivered.

Listening to the views of patients is recognised as essential to delivering a patient centred service. The Company wishes to actively involve patients in future service developments. One way this can be achieved is by obtaining and reviewing feedback from patients after care has been given.

Scope of the Policy

This policy should be referred to when undertaking any patient feedback activity on behalf of the Company.

Purpose of the Policy

The purpose of the Policy is to set out clear guidelines to those carrying out such activity so that patients, the Company and staff are protected.

2. Governance

The Board of Directors will oversee the activity, will review the Policy and receive the results of any audits carried out.

3. Principles

All patient feedback activity carried out on behalf of the Company will be conducted in accordance with the following principles:

- Abide by all relevant Laws and Regulations
- All activity should be conducted in an ethical manner
- Minimal disruption should be caused in gathering feedback
- No patient shall be excluded
- All activity will be conducted safely and competently

Principle 1: Abide by all relevant Laws and Regulations

All possible steps should be taken to ensure that any communication with patients is kept confidential. It should not be assumed that others in the

patient's household are aware of the patient's dealings with the Company. To ensure confidentiality is maintained, envelopes marked with the Company logo must not be used.

To help ensure that communication is directly with the patient and nobody else all correspondence must be addressed personally to the patient. Home addresses should be used rather than an incident location. The patient's name should be used even if the patient is known to be a minor.

Patient identifiable data must be kept confidential at all times. Patient identifiable data will be required in order to collect data, but do not use it for reporting purposes without specific patient consent. Only use the patient's identifiable data for the purposes for which collection was intended.

In order to help assess that the Company treats all of its patients with the same standard of care and dignity, data on the patient's age, gender and ethnicity may be collected for analysis.

Principle 2: All activity should be conducted in an ethical manner

All projects should be reviewed by the Board of Directors before work commences.

Contact with patients seeking feedback should not be sought until at least 14 days have lapsed since the incident. It has been considered that this length of time will allow for the most delicate period of grieving if a patient has died.

Data should not normally be gathered more than one year after an incident. Memory loss and confusion is expected to be increased after this period. Gathering data within a 6 month period from the incident date is considered best practice.

Principle 3: Minimal disruption should be caused in gathering feedback

The number of questions and pages of any patient feedback project should be kept to a minimum.

Patients should not be contacted by telephone or visited before 09:00 or after 20:30 hours unless previous arrangements have been made with patients. Patients must never be visited without prior arrangement.

If a patient declines to take part at any stage of a project they should not be pursued any further. Patients not responding to an initial contact should also not normally be pursued.

If a patient requests not to be contacted for future projects this should be adequately recorded.

Principle 4: No patient shall be excluded

The Company believes that every patient has the right to give feedback on the service they receive and as such should actively seek such comments.

All patients eligible for a project being conducted should be included in the sample. The only valid exception is when the patient is known to the Company to have died. All other patients should be included in the sample to ensure they are given the opportunity to share their views.

Sometimes a patient that should be included in a survey sample may be difficult to contact due to inaccurate or incomplete contact details being available, or their home address is somewhere difficult to contact e.g. with prison inmates, patients visiting this country etc. In these cases efforts should be made to obtain the correct contact details to include them in the sample.

It is appropriate to exclude patients from a sample where they do not fall into the category of the project being conducted.

Although contact is made directly with the patient, occasionally a patient's representative may wish to respond in place of the patient, such as when the patient has died, or when the patient is a young child. Such responses should be treated as a valid response and included in the data analysis.

The Company will make every effort to comply with requests from patients for questions to be provided in a different language or format.

The Company will reimburse patients with any reasonable expenses incurred while contributing to a patient feedback activity.

Principle 5: All activity will be conducted safely and competently

Projects conducted externally on behalf of the Company should adhere to all relevant policies and may be audited.

It is highly important that projects should be carried out in a way which will not hinder patient care or service delivery.

Incidences from which the Company is seeking feedback are often a time of crisis for patients. Any employee who is required to speak with patients to

acquire feedback should have received training in dealing with difficult and emotional conversations.

All persons conducting interviews with children or vulnerable adults must be Criminal Records Bureau (CRB) checked. Any convictions, cautions or suspicions will be reviewed and individuals with relevant offences will not be permitted to collect or collate patient feedback, in any form.

When conducting interviews staff should carry Company identification and produce it to the interviewee.

Measures should be in place before staff conduct interviews, which reduce risk to the staff member. A minimum of two staff members should be present at interviews to help safeguard both staff and patients. A mobile phone should normally be carried.

Patients should be informed that they may have a representative present during any interview. If a patient is considered as a child or a vulnerable adult a patient representative must be present.

A cover letter should be included in postal survey packs. The letter should introduce the project to patients. It is important to be very clear that the patient need not participate if they so choose.

Patients included in a survey should be made aware of a Company contact that they may contact to ask questions about the project or for assistance with completion of any survey.

Before a project commences a proposal should be passed to the Board of Directors for approval.

Survey responses should be read as soon as possible and ideally the day they arrive with the Company. Any serious concerns should be acted upon as soon as possible.

Any separate letters of appreciation or complaint received should be dealt with in accordance with Company policies.