

Live Patient Experience

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■ Live Patient Experience

- Northern Trust Quality Strategy
- Models of Live Patient Feedback at Northumbria
- Local Models of Live Patient Feedback
- Pilot at Northern Trust
- Care Opinion
- Next Steps

What is Live Patient Experience?

Live Capture

- Feedback collected during or immediately after care while experience is vivid
- Higher response rates; broader, more representative voices
- Rapid-cycle improvement- issues identified and acted upon same day or week
- Staff receive positive feedback in real time, boosting morale and engagement
- Specific, actionable insight linked to a ward, team, or interaction
- Embeds a culture of continuous listening and responsiveness

There is an inextricable link between staff well-being and patient satisfaction - they rise and fall together.



Patient experience is not a 'soft' metric - it is as critical as safety and clinical effectiveness



Alignment with Strategic Priorities

- Co-Production in Investigations
- Core Investigation Partners
- Aligning with Ombudsman Complaints
- Early Warning Indicator for Safety Risks
- Prepares the Trust for the Duty of Candour
- Evidences our Trust Open, Just and Learning Culture
- Feedback loop to Patient Safety and Quality Committee

NHSCT Quality Strategy



Northumbria NHS Trust

Northumbria Healthcare NHS Foundation Trust has led the way in real-time patient experience capture across the UK. Their model demonstrates how continuous listening, embedded in daily ward life, transforms both patient outcomes and staff culture.

- Experience Team Capture feedback not ward staff.
- Surveys- **Real time** (in hospital) and '**Right Time**' (2 weeks post discharge)- key time for 'reflections and feedback'.
- Standards are based on what the trust knows matters to patients.
- Wards falling below 90% trigger an alert. Multiple data sources help determine if it's a one-off issue or a sustained problem needing support.
- Teams have access to and understand their own performance data.



Online and Tablet-Based Capture

Bedside tablets deployed across all wards, patients and carers complete short surveys during their stay, not after.



Staff Recognition

Positive feedback is shared with named staff immediately- creating a culture where good care is celebrated publicly.



Daily Data Review

Ward managers receive a daily digest. Themes are triaged and escalated within 24 hours where needed.



Closed-Loop System

Every piece of negative or improvement feedback is tracked to resolution. Patients are informed of changes made.



Consultant Appraisals

Feedback and metrics used in Clinician Appraisals

Survey Design & Reporting Model

Northumbria NHS Trust

Core Survey Questions (Northumbria Model)

1. Were you treated with dignity and respect?
2. Were you kept informed about your care?
3. Did staff respond promptly when you needed them?
4. How would you rate the cleanliness of the ward?
5. How would you rate your overall experience today?
6. Is there anything we could have done better?
7. Would you like to leave a compliment for a member of staff?

Capture & Reporting Approach

Platform

Formic digital platform- live system deployed across adult inpatient wards. Tablet-based at bedside with assisted completion available.

Scale

Feedback captured 7 days a week. Carers and family members invited to complete on behalf of patients where appropriate.

Likert Scale

Questions scored 1–5 (Very Poor to Excellent). Two free-text prompts capture what went well and what could improve.

Visibility

'You Said, We Did' boards on each ward. Positive staff recognition shared directly with named individuals and their managers.

Reporting

Daily

Ward manager digest- immediate alerts for concerns flagged as 'urgent'

Weekly

Directorate report with trend data, top themes, and compliments shared with teams

Monthly

Board-level report linking patient experience scores to safety and HR data

Quarterly

Published public-facing report and 'You Said, We Did' summary on Trust website

Annual

Full programme evaluation; benchmarked against national FFT and peer trusts



Outcomes & Learning Northumbria NHS Trust

92%

patient satisfaction
score consistently
above national average

↑ 31%

increase in staff
reporting they feel
valued

400+

service changes directly
attributed to patient
feedback annually

24hrs

average time to close a
feedback loop on the
ward

Their learning:

- The benefits of real time reporting at team level.
- Executive management team support is crucial.
- Ensure patients & families are part of your improvement team.
- Focusing on things that matter most to both patients and staff has made sense.
- Investing in improvement rather than measurement has helped.
- Qualitative feedback appears particularly important to staff.
- Transparency of reporting matters

Belfast HSC Trust- Live Patient Feedback

25 Questions	
Domain	No. Questions
Consistency and Coordination	2
Respect and Dignity	1
Involvement	4
Doctors	3
Nurses	3
Cleanliness	4
Pain Control	1
Medicines	3
Noise at Night	2
Kindness and compassion	1
Recommendation	1

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Reporting

Weekly ward-level report and monthly directorate summary. Dashboard accessible by ward managers for real-time review.

Visibility

'You Said, We Did' boards on each ward. Positive staff recognition shared directly with named individuals and their managers.

South Eastern HSC Trust- Live Patient Feedback

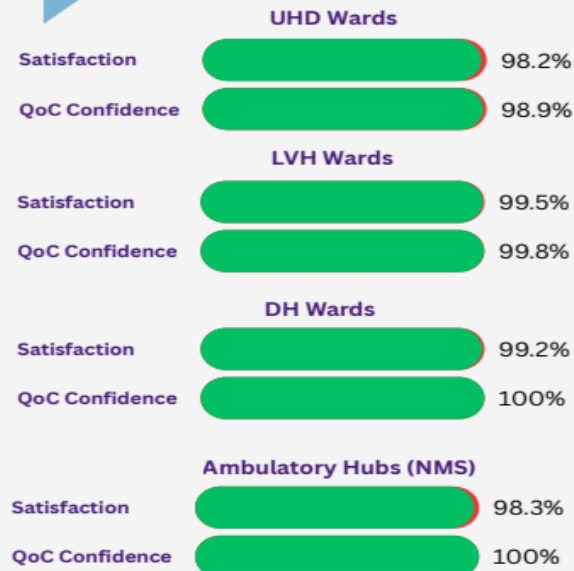
SET Monthly division report

11 Questions	
Domain	No. Questions
Quality of Care	1
Safety	1
Timeliness	1
What Matters Most	1
Shared Decision Making	1
Informed and Involved	1
Compassion and Respect	1
Activity	2
Confidence	1
Recommendation	1

Completed surveys

2132

*Reflective of all surveys completed this quarter within directorate (excludes OPD)



Capture and Reporting Approach

Capture Channel

Paper-based and digital (tablet). QR code option piloted in outpatient departments.

Data Collation

Band 6 admin staff input paper responses weekly. Digital responses auto-collate.

Ward Report

Fortnightly directorate report with quantitative scores and qualitative themes identified.

Public Reporting

Quarterly Trust-wide public summary published on intranet and patient-facing website.

Learning Loops

Monthly multi-disciplinary review of themes. Actions linked to existing quality improvement frameworks.

Northern HSC Trust Pilot Overview

Emergency Surgical Patients

15 Questions

Domain	No. Questions
Informed and Involved	4
Staff	1
Timeliness	2
Safety	1
Compassion and Respect	1
Service Co-Ordination	5
Overall Experience	1

Our Recent Pilots

Scope:	Pilot across selected NHSCT – CAU Ambulatory Unit and Emergency Surgical Patients (CAU/AAH).
Method:	QR code linked to Microsoft Forms- anonymous, on patients' own device. No personal identifiers collected.
Duration:	Two-week pilot launched 1st December-CAU Ambulatory Unit Four Week Pilot- Emergency Surgical Patients- 30 March 26.
Safety: Within Emergency Surgical Pilot	95% of respondents rated feeling safe as 'Very Satisfied or Satisfied'
Staff: Within Emergency Surgical Pilot	96% felt very satisfied or satisfied that staff treated them with compassion and respect, maintaining privacy and dignity



Northern HSC Trust Pilot Overview

Improvement themes:

- Communication at the bedside
- Improvements in discharge mediation delays
- Improving family involvement

Changes

- Nurse Practitioners improving engagement with surgical patients
- Communication on ward improved
- Commitment to promoting and supporting ambulatory care

Staff Feedback

“feedback was positive in very challenging times”

“it was encouraging that patients recognise the care and compassion of staff during a very stressful emergency surgical admission”

“the feedback of ambulatory patients highlights the benefits of the streamlined pathways”

Northern HSC Trust – next steps Pilot – Cancer Services

11 Questions	
Domain	No. Questions
Patient Status	1
Staff Introduction	1
Treatment Explanation	2
Informed	1
Delivery of Care	1
Safety	1
Effectiveness	1
What Matters Most	1
Shared Decision Making	1
Compassion and Respect	1

- Go live within Cancer Services from **1st September – 30th September**
- Feedback will be carried out with the patients attending for treatment within Laurel House.
- Survey will be accessed via QR Code linking to MS Forms.

Care Opinion



Total Stories



1245



13% increase
from 24/25

Reported to Learning for Improvements
Committee

Feedback loop to Quality Improvement

84% Positive
16% Less Positive

Changes

- Review of activity timetable within Tobernaven
- Removal of Perspex screen in Audiology
- Introduction of a profiling theatre table within Day Procedure, Mid Ulster Hospital



“Five-star treatment from an absolute A team... from admission to discharge I was treated so well.”

Feedback received about Day Surgery, Whiteabbey



Learning and next steps

Learning

- Mechanism needed for feedback to admitting/previous ward areas
- QR code to be displayed within ward environment
- Hard copies kept to minimal and instead digital format or completed with patient
- Responsible lead for each ward/service – Experience Champion
- More resourcing required
- Need for ward to access dashboards 'live'
- Ward specific surveys made comparisons more difficult
- Longer pilot timeframe

Proposed 'Changes Made' Tracker

Each ward maintains a live tracker (digital or displayed) with:

- Feedback theme or issue raised
- Action taken / planned
- Responsible person
- Date opened
- Date resolved / closed
- Status (Open / In Progress / Closed)

'You Said, We Did' approach to 'closing the loop' for patient feedback and service improvement.

The Future Outlook– Strategic Roadmap

