


## Board of Directors' Meeting June 2022

<b>Agenda item</b>	095/22			
<b>Report</b>	Patient Story – Chance Encounters			
<b>Executive Lead</b>	Director of Nursing			
	<b>Link to strategic pillar:</b>		<b>Link to CQC domain:</b>	
	Our patients and community	√	Safe	√
	Our people	√	Effective	√
	Our service delivery	√	Caring	√
	Our partners	√	Responsive	√
	Our governance		Well Led	√
	<b>Report recommendations:</b>		<b>Link to BAF / risk:</b>	
	For assurance		BAF 1 and BAF 2	
	For decision / approval		<b>Link to risk register:</b>	
	For review / discussion			
	For noting	√		
	For information			
	For consent			
<b>Presented to:</b>	<p>Chaplaincy Team Meeting NHSE/I Chaplaincy Workgroup NHSE Steering Group reviewing the NHS Chaplaincy Guidelines (2015)</p> <p>To be shared at: Nursing, Midwifery, AHP and Facilities Meeting</p>			
<b>Dependent upon</b> (if applicable):	NA			
<b>Executive summary:</b>	<p>The storyteller describes the admission of her father to the Princess Royal Hospital in September 2021. Sharing two chance encounters that had a significant impact upon the experience of her father and family.</p> <p>The Board is invited to watch the film in which the storyteller uses her own words to describe the events, how the support they received helped her family as the care became palliative, and how this feedback is being used to further improve the service.</p>			
<b>Appendices</b>	Appendix 1: Digital Story: Chance Encounters			
				

## **1.0 Introduction**

1.1 This story captures the daughter of a patient describing the days she spent with her father prior to his death in September 2021. The storyteller shares her experience, identifying aspects that went well and providing insight into further opportunities for improvement.

## **2.0 Background**

- 2.1 The storyteller describes her father's admission to hospital due to end stage heart failure and sepsis. The admission resulted in two chance encounters, the memories of which remain with her, as they had a significant impact upon the quality of his final days.
- 2.2 The first encounter was with Dr Ramadoss, the Consultant on-call when her father was admitted to the Trust. The storyteller describes how, when the time came, Dr Ramadoss assisted in facilitating her father's discharge to a nursing home, helping to enact his wish not to die in hospital.
- 2.3 The second encounter was with Rev. Keith Osmund-Smith, the Chaplain on site when she was having a particularly difficult day and sought support. The contact with Keith visibly lifted her father's spirits, providing him and the family with a source of comfort. As her father's care transitioned from active treatment to palliative care, Rev. Keith supported the family, providing pastoral and spiritual care. The storyteller highlights the benefits of integrating Chaplaincy into the admission process, supporting people in accessing spiritual and pastoral support.

## **3.0 Risks and Actions**

- 3.1 Following the patient story being captured the subsequent actions have been taken:
- The Chaplaincy Team has increased in size, enabling improved access to the service.
  - Chaplaincy cards are being designed to inform people of the Chaplaincy Service. Cards will be included in Swan boxes in addition to being available through the Chaplaincy Team.
  - The role of the Chaplaincy Team is being promoted internally and externally to raise awareness of the services they provide.
  - The storytellers experience will be shared in training sessions to highlight the importance of discussing faith and belief with patients on admission and making patients and the people important to them aware of support the Chaplaincy Team can provide.
  - The Chaplaincy Team are involved in the new Health Care Academy training programme across the Integrated Care System.
  - Chaplaincy workshops are planned to commence in September 2022, reinforcing the importance of pastoral and spiritual support.
  - The Palliative and End of Life Care Team are developing a system to flag patients being treated by the team. When the report goes live the Chaplaincy Team will receive a daily update of patients receiving end of life care, enabling them to reach out to the patient and people important to them.
  - Feedback has been shared with Rev. Keith. And Dr Ramadoss has received feedback.
  - Consent has been given to share the digital story with the NHSE/I Chaplaincy Workgroup, sharing learning with other Trusts across the NHS and with the NHSE Steering Group reviewing the NHS Chaplaincy Guidelines (2015).

## **4.0 Conclusion**

4.1 The Board is asked to note the patient story and take assurance of the work being undertaken to listen to and be responsive to feedback from people accessing services within the Trust to improve patient experience. Learning from feedback and using patient experiences to drive improvements.