

# Our commitment to learning

from loved ones following  
the COVID-19 pandemic

... for a **better** Bolton





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# A message for our patients and their families

This report is dedicated to all those who sadly lost their lives during the COVID-19 pandemic. We will always remember them.

Our sincere condolences remain with the families, friends and loved ones who

during extremely difficult times, have dedicated their time to help us learn as much as we possibly can from their experiences. We cannot thank them enough for helping us walk in their shoes, so we can improve care for the future.





## Dealing with a global pandemic

Throughout the pandemic, Bolton had one of the highest COVID-19 infection rates in the whole country and as a result, our communities needed us more than ever before. Our teams stood up to the challenge to keep our services running and to provide the best care they possibly could, for some of the most unwell patients we had ever seen.

Although some services had to pause at the beginning of the pandemic, we continued to deliver as much surgery as possible by working with our colleagues in the independent sector, so that people who needed operations could have them. We also made sure that we could continue to provide all treatment to our patients with cancer and our maternity services continued to bring new life into this world.

The pandemic was unpredictable at times and meant that some of the things we were dealing with were new to us.



Many of our teams were temporarily transferred into different roles to make sure we could look after the most unwell patients, but they put their own worries aside and focused on doing the best they possibly could.

In Bolton, we are still looking after patients who have COVID-19 but are learning to adapt to life with the virus. As soon as the intense pressure we were facing reduced, we started to undertake a review of what had happened since the pandemic started, to learn as much as possible and make improvements for the future.

## Our duty to be open and honest

All healthcare professionals have a Duty of Candour which is a professional responsibility to be open and honest with the people who use our services. During the pandemic, we know that some patients caught COVID-19 when they were in our care and we have done some work to address this.

We started by reviewing all cases where our patients tested positive for COVID-19, between 1st March 2020 and 31st January 2022. During this time, 537 patients were found to have definitely

or probably contracted COVID-19 in our care, and sadly 215 of these patients died. The other 322 patients were successfully treated and discharged.

We wanted to get in touch with everyone to make sure that anyone who wanted to, had the opportunity to understand how this happened, and ask us any questions they had. To be able to do this, we made sure that we had all of the right people involved so we could explain to patients or relatives what happened.

### We did this work in three stages:

- 1 Firstly, we contacted by letter then telephone, the next of kin of all those who we believe caught COVID-19 whilst in our care, and sadly died as a result.
- 1 After that, we contacted by letter then telephone, the next of kin of patients who we believe caught COVID-19 and later died with it
- 1 Finally, we contacted by letter all patients who we believe caught COVID-19 in our hospital, but were later discharged.

During our follow up telephone calls, all relatives and loved ones were offered bereavement support for their loss, as well as the chance to discuss what happened in further detail.

Out of the 537 people contacted, thirteen of them wanted to meet in person to discuss this further which we did. During these meetings, we

went through questions that they had, and listened to their experiences with a senior Doctor present at all times to answer them.

Some of the families told us that they felt relieved to understand in more details about their loved one's time in hospital and that they were grateful for the chance to understand more about what happened.



# Listening and learning from loved ones

During our conversations and meetings with families, four key themes emerged that gave us a really clear indication of the things we needed to do to make things better for future patients and their relatives.

## 1. How we communicate with families

Not being able to visit loved ones was difficult for families and at times, they didn't feel like they were updated as much as they could have been which caused distress. During the pandemic, we put some things in place to improve communication with families, but for some, they were not implemented quickly enough.

"I was very upset I wasn't able to say goodbye to my husband and due to how busy everything was on the wards it was very difficult to get information."

"There were a lot of issues with communication and having one version of the truth from the multiple people I had to deal with would have improved the whole experience."

### What we've done as a result

- | More wards have iPads to be able to contact relatives virtually.
- | Specific members of staff are in place to provide a link between the clinical staff and relatives so there is always someone available to give updates.
- | Relatives are able to send letters to their loved ones at all times.

## 2. Not being able to visit loved ones

The government restrictions meant that visitors were no longer able to come into our buildings to see their loved ones. We know how difficult this was for families but we had to do what was necessary to keep everyone as safe as possible and control the spread of the virus as much as we possibly could. As well as the high infection rates we were dealing with in Bolton, our buildings and facilities also made social distancing a challenge which meant that our visiting restrictions were in place for longer.

**“We know the reasons why we weren’t able to visit, but that didn’t make not being able to see him any easier.”**

### What we’ve done as a result

- | We made changes to the way we communicated with families so they could have video calls if they wanted, and regular updates about how their relative was doing.
- | We have started to welcome visitors back to our services and will continue to review this to make sure we are keeping everyone safe.
- | We have submitted a bid for some funding to build some new hospital facilities, so that we will have more space and make it easier for us to deal with infections like this in future.



### 3. Lost property

Some items of sentimental and financial value were lost when patients were being looked after in hospital and we are truly sorry for each of these cases. This has been devastating for relatives affected and we have already started to make changes as a result.

“There were a number of his things that went missing that we didn’t get back after he died.”

“Although we were contacted by the ward manager to apologise, it was still very upsetting.”

#### What we’ve done as a result

- | We have a new process in place for recording the items that our patients bring with them when they come into hospital.
- | When items are found, we have improved the process for getting them back to patients or relatives sooner.
- | We have implemented a ‘dignity box’ initiative to ensure that items such as glasses, hearing aids and dentures are kept safe and with each patient during their time in hospital.

#### 4. Multiple moves throughout the wards

Patients were often moved around to different wards based on clinical need, to meet infection prevention and control requirements associated with outbreaks, or to manage capacity in the hospital. Families and loved ones were not always updated about this which caused them upset and worry.

“She was moved all around the hospital, we didn’t know where she was one day to the next.”

#### What we’ve done as a result

- 1 We have improved the way we communicate with the families and loved one of patients we are looking after at the hospital, which includes updating as soon as possible when a patient is moved.
- 1 We continue to review and monitor our infection prevention and control (IPC) requirements to reduce the number of patients we have to move around. When we do have to, we keep the patient updated wherever possible with the plan and the reasons for any ward moves.





## Learning from the things we did well

It has been important for us to understand the things we did well, so we can continue to do them in future. We appreciate the time relatives spent giving us some good feedback to build on. Their comments included:

“We understand that it was a new thing that everyone was trying to deal with and we cannot thank the NHS enough.”

“The staff on the ward were exceptionally kind.”

“We feel that everyone did their best and that all the staff were lovely.”

“We would like to thank everyone for their care and have no complaints about how my husband was cared for in hospital.”

“We were really grateful for the kindness of the nurses.”

## Where we are now

In Bolton and across the whole of Greater Manchester, NHS services continue to recover from the impact of the pandemic.

The learning from loved ones described in this report will not just help us improve how we deal with COVID-19 patients and relatives, but will help change how we do things across all of our services. We promise to continue to listen and learn from feedback, and will continue to make changes in the memory of all those who lost their lives, or lost a loved one, that will make a difference for the future.





## Please keep talking to us

We know that despite the best efforts of our incredible staff in very challenging circumstances, we did not always get it right. If you have experience of our services and want to help improve the quality of our care, please get in touch.

### We're always listening - tell us what you think

Your feedback is important to us and will help us make our services even better. Please share your experiences with us.



**Speak to us**  
Speak to the person in charge of your care.



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