Norfolk Community Health and Care

# Patient Experience and Involvement Annual Report

2016 - 17



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### Introduction

Norfolk Community Health and Care (NCH&C) recognises that to create a truly patient centred organisation and to deliver the best possible care there has to be genuine and meaningful involvement with our patients, carers and members so that they can genuinely influence and inform decisions. We must ensure we systematically listen to, capture and use the views and experiences of individuals, groups and organisations in the delivery, evaluation, improvement and development of our services.

The benefits of improving patient experience and involvement mean that for NCH&C:

- Patients have more control over their care and the ability to make informed choices about their treatment
- Patients who have a better experience of care generally have better health outcomes
- Patients who have better experiences and better health outcomes may require shorter stays in hospital and less treatments, reducing healthcare costs
- Patients who have better experiences impacts positively on staff experience and the culture of the organisation
- Patients who have better experiences enhance the reputation of the trust

# The Patient Experience and Involvement Strategy objectives for Jan 2014-March 2017:

- Ensuring a systematic approach to capturing feedback – empowering staff with knowledge of how to capture patient experience feedback and the tools and techniques with which to do it and ensuring this informs a trust-wide plan
- Action for improvement using patient experience information alongside other quality data to make demonstrable improvements to care and systematically implementing improvement
- 3. Building meaningful and systematic engagement and involvement - spreading and building on where good engagement and involvement of our patients, carers and Members exists and supporting development across the Trust

Patient experience and involvement data information is reported through the Quality and Risk Assurance Committee to the Board in the monthly Quality Assurance & Risk report which includes:

- An update on responses to the Friends and Family Test
- A review of patient's stories uploaded onto the Patient Opinion website and through NHS Choices
- The Patient Voice at Board a regular feature at the beginning of most Board meetings
- Complaints information including numbers, themes and trends and a summary of learning from these
- Compliments received from patients, relatives and carers
- A summary of PALS enquiries including concerns, information requests and guidance

Anna Morgan, Director of Nursing and Quality and Executive Lead for Patient Experience and PALS reflects on the year:

"Really understanding the experience of our patients is important because it tells us how we are doing and gives us an amazing opportunity to develop ways of doing things better. This should be done in partnership with our patients, so that we truly share and understand their experience and value their expertise in shaping new ways of working. Our values of **community, compassion** and **creativity** drive everything that we do and I am pleased to highlight some of our key patient experience achievements as we look back over the last year.

This report sets out the Key work and achievements for the year 2016 - 2017 in the delivery of the NCH&C Patient Experience and Involvement Strategy."

## Patient and carer involvement (in service redesign)

Patients continue to rate NCH&C services very highly, maintaining a Trust score of 98% recommend for the second year running for the Friends and Family Test (FFT) As well as capturing and acting upon feedback, we also have a duty to involve our patients in the design and development of our services. This year the main focus has been on the 'Empowering patients' work stream, part of the Trusts Health and Care Strategy 2015-20.

### Health and Care Strategy

NCH&C has developed a **Health & Care Strategy for 2015-20**, which aims to change the way we deliver care. The objectives in the strategy include:

- Improving how we inform, engage and work with our partners, staff, patients, their families and carers
- Shaping care around the person it is for
- Making sure people are more involved and engaged in their care
- Working together with carers and volunteers so they feel more valued and informed

This year the Patient Experience Team has supported the 'Empowering patients' work stream, one of the objectives of this strategy, through holding a series of focus groups for patients, public and staff.

### A Focus group was held in each locality to;

- Gather views on empowerment and what it means to them
- Gathering feedback to help inform the Strategy and provide the best, most effective health services to the local population

### Patients, carers and the public said ...

- Empowerment is "Doing something together. I don't want to do it all on my own, I want someone to help and advise me"
- Communication is really important
- Could there be more training in breaking bad news?

- Ringing round trying to find what I need is really frustrating
- Staff records and contact details need to be kept up to date
- Information/literature needs to be clear and in plain English. Not technical jargon
- Services need to be more joined up
- Self Help/Self-care tutorials would be welcome through community and health services we already access (support groups, GP surgery)
- Empowerment is being able to "Control your condition rather than letting it control you"
- Would like more flexibility around the care routines in inpatient units

### From the feedback gathered;

### What's happening already ...?

- The Trust will agree a definition of Empowerment that is simple, clear and meaningful
- Health Coaching Trainers to consider how it will work with patients with dementia or mental health problems and share this with all clinical staff.
- We will trial providing information about our services earlier on in a patient's journey so they know what to expect when they arrive on our units or are about to receive a visit in their homes.
- We are working with other organisations (Carers Council, Norfolk Carers Support, HealthWatch) to co-design services and initiatives that will provide empowering services & information to people, when they need it

### What we want to do in the future...

- Get more clinicians and patients involved with planning – what will work in reality and what should be priority
- Deliver a two day Health Coaching Programme to all clinical staff in NCH&C
- Provide more training & support to services developing literature that is empowering and not just in paper form (DVD, online etc.)
- Enable patients to self-care, wherever possible
- Create a forum for patients, carers and members of the public to share innovative ideas for proactive care

### **Patient Voice at Board**

The Patient/Carer Voice programme has been part of NCH&C Board agenda since April 2012. The main benefit is that it helps to ground discussions in the reality of patient care. Patients are truly put at the heart of discussions as stories are powerful reminders of the context within which Board members are making decisions. Board members are able to see how their decisions impact on patients and carers, and help them to better understand the complexities of day to day life at an operational level.

The Patient Voice at Board is heard at the very start of most meetings before other items on the agenda. Board members have reflected that this is very valuable and reminds them of the core business of putting patients, their carers and families at the centre of delivering high quality care. It helps to highlight what the elements are of a good patient experience, directly from the patient/carer, and how we can replicate this across the Trust, but equally to address areas where there have been poor experiences and how the Trust can support staff with delivering improvements.

Over the last year, we have heard from a variety of patients, carers and organisations. From April 2016 to February 2017 there were four patients and two carers who came to board to tell their story in person and one story from a volunteer about their role in supporting patients access our services.

# What has changed as a result of Patient/Carer Voice at Board?

**Palliative Care** – The palliative care service reviewed 3system wide palliative care complaints, met with the families and pulled together an action plan as to how palliative care could be improved. One family member who at presented her very powerful story to Board is now an active member of our palliative care steering group for NCH&C and she will be a guest at the QEH Palliative care steering group.

**Stroke Service** – Following their story at Board describing on the whole, excellent and very person centered care and treatment, a patient and his wife met with the Stroke team to work through some of the concerns they had. Since then the Health Care Assistants have taught basic skills to act as Rehabilitation Assistants at weekends in order to support therapy activities and feedback has been given to the staff about expectations regarding the 6 month follow up appointment. **Amputee Rehab** – A patient who praised the team at Pine Cottage for their outstanding compassionate,

coordinated care and treatment following an amputation, offered to be further involved with projects in the Trust such as a video of his experience which could be used in training staff.

## Friends and Family Test (FFT)

FFT is a feedback tool that supports the fundamental principle that people who use NHS services should have the opportunity to provide feedback on their experience and that feedback should be used to improve services for patients.

The FFT question asks if people would recommend the services they have used and offers a range of responses. When combined with a supplementary follow up question(s) it provides a mechanism to highlight both positive and poor patient experience. The results are expressed as a % recommends. Services within NCH&C are allocated their own unique code which enables them to have specific results and comments. The results are reported by team, service, locality and trust.

Following a robust tender process, Optimum Health Technology was successful in their bid to provide NCH&C with a new system for the collection and reporting of the FFT across the Trust. The 'Meridian' patient feedback system was rolled out from April 2016.

Between April 2016 and March 2017, NCH&C received 12,068 responses to the FFT, with over 14,000 positive comments given. The overall percentage of patients recommending (Extremely likely or likely) was 98%.

Compared to the same period last year there has been an **increase of over 4,500 responses** and the percentage recommending has been **maintained at 98%**.



A drive to increase the number of FFT responses captured electronically began during 2016. Two IPADs on loan from IT were used to capture patient's feedback and following the successful trial of these an investment bid was submitted and successful in purchasing 25 Ipads. These will be rolled out across NCH&C and utilised for capturing FFT responses electronically, enabling closer to real time feedback and reducing the paper based system and costs to run this.

NCH&C remains in the top five Community Trusts in the country with the highest percentage recommendation via this measure.

# Examples of actions as a result of FFT comments:

A review of signage at Norwich Community Hospital has taken place and changes and improvements have been made by implementing a zone system. Additional signage has also been improved in Phlebotomy and Biomechanics outpatient areas.

We have acted on feedback relating to water coolers and there are several on order for various areas including the day room at Kelling Hospital and Ogden Court, Phlebotomy and Re-Enablement services.

## **Patient Opinion**

Patient Opinion www.patientopinion.org.uk allows patients/carers and families to feedback on their experiences via a web-based tool and enables staff to interact with patients to help improve care.



In 2016/17, there were 11 stories posted on Patient Opinion and NHS Choices for Norfolk Community Health and Care, this is less than last year. Four of the 11 stories were for either the 111 Out of Hours services or for a GP surgery. Of the remainder:

- 5 stories were positive
- 2 stories were negative

Of the positive stories, two were for MSK Physiotherapy, thanking the service for their professionalism, expertise and techniques.

One story related to care and treatment throughout the patient pathway following a stroke, one for Colman Hospital and one for Pine Cottage. Services were thanked and complimented for their excellent care, professionalism and support, stating how important this has been in the patient's recovery and rehabilitation.

Of the two negative stories, one was regarding an incorrect telephone number for Dereham Hospital and one was regarding a relative not being listened to at Pineheath ward, Kelling Hospital. The latter was responded to and encouraged the relative to contact PALS. This was then escalated to a Complaint and resolved through the Complaints procedure.

All stories on Patient Opinion are responded to online by the Patient Experience team and where stories have been more complex we have asked for the author to get in contact with either our PALS or Complaints departments to be able to explore the case in more detail to understand their concerns, learn from the experiences shared and be able to improve services for other patients and families. We ensure an open dialogue approach to our responses and use these stories to inform wider service development and re-design.

### **Local Patient Surveys**

Staff from NCH&C and Norfolk County Council work closely together to provide effective co-ordinated care that supports people in a way that works for them, helps them stay closer to home and maximises their independence.

A cohort of service users who had received care from an integrated team which could have included nurses, social workers and therapists were invited to complete a survey in October 2016. The survey focused on how well staff in both organisations worked together in providing the care needed. For example, did professionals talk to each other or did the patient feel like they had to tell their story again every time different people visited.

A sampling audit tool was applied to provide a sample of 274 patients/service users who would be sent the survey. 82 surveys were returned giving a return rate of 29.9% Of the 82 surveys returned, 18 patients/service users replied with an interest to be contacted further about their experience.

Returned surveys were inputted into the Meridian software system used for collating the FFT.

### Highlights:

- 92% of patients/service users either strongly agreed or agreed that the professionals involved in their care communicated effectively and directly with themselves and their families
- 78% of patients/service users either strongly agreed or agreed that professionals involved in their care communicated effectively with each other
- 76% of patients/ service users strongly agreed or agreed that their care was well co-ordinated
- 90% of patients/service users either strongly agreed or agreed that they were seen by the right professionals who knew and understood their care needs
- 79% of patients/service users either strongly agreed or agreed that professionals involved in their care knew their story and did not need to repeat themselves

Following the survey, patients/service users who said they would be happy to discuss their experiences further were contacted.

The general outcome of the survey and interviews has resulted in positive feedback and assurance that;

- Patients and their carers do feel that the professionals involved in their care worked well together
- Were seen by the right professionals who could deal with the issue that they were referred for or required
- They did not need to repeat their story more times than was necessary.

It was clear that patients and their families were, on the whole, very positive about care received, particularly commending and recommending Norfolk First Response Carers, Community Nurses and Community Therapists.

There are areas where this could be further improved;

- Expectations of appointment times and visits
- Improved involvement of family members/carers
- Communication and co-ordination of care/treatment or equipment.

# New Patient Experience and Involvement Strategy

The current Patient Experience and Involvement Strategy ran Jan 2014 to March 2017 so work on producing a new strategy has been underway. To take us forward, we have revised our approach to ensure the new strategy is much more simple and engaging so it appeals to our audience, our patients, their families and carers, our staff, partners and commissioners.

We have engaged with a range of stakeholders, patients and carers to finalise the content, which has included consulting with our members, Healthwatch Norfolk, Carers Council for Norfolk and recently we held a Patient and Carer feedback café to capture views and experiences.

In essence, the strategy sets out the aspirations for patient experience and involvement over the next three years and takes the three main objectives from previous strategies, but rewritten in plain English to ensure they are more straightforward to understand and therefore deliver.

### The three objectives are:

- 1. Make it easy and straightforward for patients and carers to share their experiences
- 2. Make sure we use the experiences shared to help improve our services and inform others
- Work with patients, carers, and the public, to develop ways that they can shape the design and delivery of our services

The new strategy is now available in electronic and hard copy.



## Patient Experience/Carer and Involvement Steering Group (PESG)

The PESG is accountable to the Quality and Risk Assurance Committee.

The group meets bimonthly and provides a forum for listening and sharing of experiences, development of ideas and monitoring of the Patient experience and Involvement Strategy Implementation Plan.

#### Key objectives delivered by PESG:

- Effective monitoring of the NCH&C Patient/Carer Experience and Involvement Implementation plan ensuring all services are involved and engaged.
- Ratification and monitoring of all Patient/Carer Experience and Involvement activity across Trust agreed processes
- Monitor and review the implementation and effectiveness of patient/carer experience data collection tools and methodologies across all areas of NCH&C
- Ensure that information about patient/carer experience is acted upon in conjunction with learning from PALS, Complaints, Incidents and Clinical Audit and fed back into the organisation to assist with service improvement and development and an improved patient/carer experience
- Provide assurance to our commissioners, service users, stakeholders and the public that their experiences are captured and used to influence the planning, delivery and monitoring of services, to assist the organisation in service improvement and improving the patient experience.
- Promote a culture where patients and the public are actively involved and listened to in the planning, delivery and evaluation of the services provided by NCH&C.
- To encourage and promote the sharing and learning of best practice in the organisation

# Patient Advice and Liaison Service (PALS)

PALS is part of our commitment to provide high standards of care, and to support patients, carers and the public, providing an informal way to resolve concerns of service users. The core functions of PALS are to manage concerns, comments and enquiries effectively, and to reduce the number of issues that may escalate to a complaint where appropriate, ensuring that lessons are learnt and that the patient's voice is at the heart of the service.

There were a total of 680 enquiries received in PALS from April 16 to March 17, which is around a **40% increase** on the number received the previous year.

56 of these enquiries were concerns, of these, the most common theme relates to appointment cancellations and referrals, especially within Children's services. 7 concerns/complaints received initially within PALS were escalated to the Complaints Officer for further investigation through the Complaints Procedure. All other concerns were either resolved with information/advice given or referred to a more appropriate department.

Other enquiries received were 20 appointment changes/cancellations, 19 comments, 32 complaints, 321 guidance/information requests, 162 non NCH&C related queries and 70 non PALS but NCH&C related enquiries.

### **Compliments and thanks**

The trust received 1230 compliments for the period April 16 to March 17 which is an increase on the previous year.

Below is a selection of the compliments and thanks we have received from our patients and stakeholders:

Norwich, Alder Ward – Hi \* and \*, please pass thanks from my family and I on to all staff at Alder Ward who were involved in the care of my Grandmother, \* during her 7+ week stay on the ward. We were all very impressed with the standard of care that Irene received and with the kindness, compassion and patience shown towards her. Staff were always very helpful and informative in addressing any concerns. \* has also asked me to pass on her personal thanks for making her stay as comfortable as possible. (17.08.2016) Children's, Short Breaks Squirrels - It only seems like yesterday, but we can still clearly remember bringing patient for a tea visit and \* and \* asking if patient had RETT syndrome and showing us the clinical features in a medical book. We then asked the consultant who decided that's what patient had. We've had laughter, tears and tantrum's (Mum's not patient !!) we've had ups and downs and some hair raising moments, but ultimately you've supported us as a family and enabled us to relax and recharge our batteries knowing that patient was in safe hands. I hope you all know that we couldn't have made it in one piece to where we are today without your support and we hope you know everything you've done is very much appreciated. A huge, huge, huge thank you to everyone at Squirrels we will miss you all very much. Please keep in touch. With lots of love. (05.05.2016)

North, Priscilla Bacon Lodge – A massive thank you for everything you did for our mum in her final days. You are all a massive credit to the NHS and to every patient that comes your way. Every member of staff went above and beyond for all of us. In her final days she said how wonderful, compassionate and caring all of you were. We can't thank you enough. (23.06.2016)

**Specialist, Beech Ward** – To \* and all your staff including the Doctors. Well where shall I start, each and every one of you were so kind to my Dad, and had time for all his needs, Dad loved you all and he was aware you did the very best for him, we knew he would not get better, but you made him as comfortable as possible. You made my life easier knowing he was in such good hands. I can't praise and thank you enough. (29.07.2016)

Suffolk, Area 4, Ipswich Team 3 – I would like to say "thank you" to two wonderful DNs, \* and \*. Thank you so much for your kindness, compassion and nursing expertise that you so willingly gave to my Mum, \* in her final days. You made those final days so much more bearable for Mum and for me and Dad. Mum wanted to be at home in her own bed and we were able to do this for her. I cannot thank you enough for your understanding and kindness. I could not have managed what I did without you to support and guide me and because of you I feel that I did my very best for Mum which will always be a comfort to me. You were truly wonderful and I will remember your compassion and kindness always. Mum and Dad had been together for 70 years. They were devoted to each other and understandably Dad is completely lost at the moment. His wish was also for Mum to stay at home. Dad will always be grateful to you because you helped to make this wish possible. Knowing that he was able to do that for Mum has been a great comfort to him. Thank you so much. (27.02.2017)

South, Foxley Ward – Thank you just doesn't seem enough for everything you all done for Mum. Dad praised you all so much and always said he was pleased to leave mum knowing she was so well looked after and happy with you all. You were more like fiends than nurses and doctors and of course \*. When I lost dad you were all there for Mum and Me and I thank you all for that. From the bottom of my heart thank you all for mostly looking after mum, but also dad and myself. (01.02.2017)

**West, WN IPCS Mob, Specialist Nurse** – With sincere appreciation for all the help and kindness you gave to our Dad, \* over the last few weeks. We also really appreciated the support given to the whole family during this difficult time. We were privileged that Dad was cared for by such caring and dedicated people. (20.02.2017)

## **Our Priorities for 2017-18**

Implement and deliver the first year of the Patient Experience and Involvement Strategy 2017 – 2020 including;

- Review the PESG and grow the membership of the group to include more representation from patients and carers with greater focus on involvement, not just experience
- Involve patients and carers more in the design and delivery of our services
- Increase the electronic capturing of the FFT feedback
- Continue to provide Patient Voice at Board Programme
- Continue to advise and support staff with tools and techniques with which to capture feedback, involve patients and carers and act on what they learn.