Patient and Carer Experience Strategy 2016-2018

February 2016
Humber NHS Foundation Trust
Patient and Carer Experience Strategy
February 2016- December 2018
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1. Introduction

Humber NHS Foundation Trust provides a range of community and in-patient mental health services, learning disability services, community services (including therapies), children’s and addictions services to people living in Hull, the East Riding of Yorkshire and from April 1st 2016 Whitby, North Yorkshire. The Trust also provides services for children including physiotherapy, speech and language therapy and support for children and young people and their families experiencing emotional or mental health difficulties.

The Trust is committed to delivering high quality services across all areas in which the Trust operates, this is demonstrated through delivery of our key value, putting the needs of others first. We will demonstrate this by engaging with people, listening and responding to their experience so the Trust can:

- Improve patient experience and satisfaction with our services
- Ensure services are more responsive to individual needs
- Help develop services that support patient’s dignity and independence
- Encourage our staff to find new ways to deliver healthcare
- Improve accountability to our patients, their families, carers and the public
- Provide a customer focused service and improve quality

Our staff regardless of their role, care deeply about the quality of care that our patients, their carers and families receive from us. Whilst we appreciate that we don’t always get it right, our vision, with the implementation of this strategy, is to embark on a journey of learning and continuous improvement, with feedback from our patients and carers being essential to this growth. This strategy includes how we will evaluate and measure success.

Here at Humber, we know that patient experience is more than just meeting our patient’s physical needs. It is also about treating each patient and their carer(s) with the dignity, compassion and respect that they deserve as an individual. We don’t want to just meet expectations, we want to exceed them.

We will continue to push the boundaries in how we deliver healthcare to the communities we serve, and introduce new and innovative ways to involve our patients and carers in the design and delivery of services. This strategy forms the basis of that ambition, and will evolve with feedback from our staff, patients, carers and partners in the community. Through our dedicated staff and strong leadership, we are confident that we can successfully embed this strategy.
2. The National Context

There is a national drive to enable services to become better at listening, understanding and responding to the needs and wishes of patients and the public. The importance of this is recognised by NHS England who say:

“\textit{The experience patients have of the treatment and care they receive – how positive an experience people have on their journey through the NHS can be even more important to the individual than how clinically effective care has been.}”

\textit{NHS England}

The White Paper, ‘Equity and Excellence: Liberating the NHS’ (Department of Health 2010) highlights the central aim of putting patients and the public first, to offer greater choice and control. This includes shared decision making, underpinned by the principle ‘nothing about me without me’.

The National Institute for Health and Clinical Excellence (NICE) has published Quality Standards for patient experience in adult services and service user experience in adult mental health. All major policy drivers make it clear that we must carry on embedding good practice in all that we do. The Trust has taken account of national policy that has informed the Trust approach, is listed below along with a brief description of key messages:

- \textbf{High Quality Care for All (Dept. of Health, 2008)} confirms quality as the organising principle behind everything that we do
- \textbf{The NHS Constitution (2009)} makes clear the public’s right to be involved in the decision about the planning and delivery of local services. This will help the NHS to demonstrate that it is responding to the views and experiences of local people.
- \textbf{The Operating Framework for the NHS in England 2012-13 (Dept. of Health 2011)} sets out the case for commissioners and providers to work together to improve the experience of patients, carers and the public.
- \textbf{Local Commissioning for Quality and Innovation (CQUIN) Schemes} include at least one indicator covering patient experience.
- \textbf{Quality Accounts} include progress on measures in CQUIN schemes
- \textbf{The Health and Social Care Act 2008} set up the Care Quality Commission (CQC) and made it a requirement to look at people’s needs and experiences of care.
• **The Equality Act 2010** sets out to eliminate discrimination and inequalities.

• **Francis Report (Robert Francis QC, 2013)** called for a whole service, patient centred focus. The detailed recommendations called for a re-emphasis on what is important.

• **The Accessible Information Standard** directs and defines a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of patients, service users, carers and parents, where those needs relate to a disability, impairment or sensory loss.

3. The Aim of this Strategy

The aim of this strategy is to further develop a culture throughout the Trust that places the quality of patient and carer experience at the heart of everything we do, and always strives to exceed expectations, with the belief that ‘good enough’ never is. It has been designed to support delivery of the following Trust’s strategic aims:

• **Deliver high quality, safe and effective services**

• **Integrate health and social care, mental and physical health and well-being and involve patients and carers in managing their care**

• **Put the needs of others first, listen to and actively engage our patients and service users and their carers and families in the development, delivery and evaluation of the services we provide.**

• **Work with the communities we serve, our partners and our members to design the services that will best serve their needs**

• **Maintain a sustainable business to ensure that we can continue to care in the future**

The strategy aims to deliver these aims by actively working with patients and carers to gain feedback on the services we provide to inform new models of care, based on patient need and to continuously improve the quality and safety of our services.
4. Responsibilities, Accountabilities and Duties

4.1 The Board of Directors
The Board of Directors provides a leadership to create a culture that is involving and inclusive and supports:

- The development of a broad understanding of the business case for and the benefits of patient, carer and public engagement and experience.
- The incorporation of engagement and experience into all aspects of decision making.
- The mainstreaming of patient and public engagement and experience by embedding the principle in personal and organisational objectives.
- The demonstration of principles and aims of the patient and carer experience strategy by actions as well as words.

4.2 Council of Governors
As an NHS Foundation Trust, Humber FT welcomes local people including patient, carers, public and staff to be involved and have their say on how Trust services are developed. One of the primary ways of achieving this is through the Council of Governors which comprises of appointed individuals and elected Foundation Trust members from different constituencies (public, patient, carer and staff). Governors share ideas and make suggestions and support Trust initiatives. The Trust has designated patient and carer champions as part of the Council of Governors.

4.3 Director of Nursing, Quality and Patient Experience
The Director of Nursing, Quality and Patient Experience is the Board’s designated lead for patient and carer experience, and is responsible for ensuring robust systems and processes are in place to maximise safety and quality based on patient and carer feedback.

4.4 Deputy Director of Governance and Patient Experience
The Deputy Director of Governance and Patient Experience is the lead for patient and carer experience. As chair of the Patient and Carer Experience Group they will work closely with the Trust’s Patient and Carer Governor Champions to deliver the strategy.

4.5 Patient Experience Team
The Patient Experience Team captures patient experience feedback through complaints, Patient Advice and Liaison (PALS) and Friends and Family Test feedback. The team is responsible for reporting on this activity and facilitating organisational learning and improvement.

4.6 All our Staff
All of our staff are responsible for ensuring our patients and their carers have a positive experience of care from the Trust.

Internal Governance Arrangements

4.7 Quality and Patient Safety Committee (QPAS)
The Quality & Patient Safety Committee has been established to oversee and coordinate all aspects of quality improvement (patient experience/patient safety & clinical effectiveness), assurance and clinical governance activity and delivery. The Committee will ensure that the voice of Patient and Carers is routinely sought on the quality & safety of our services
4.8 Patient and Carer Experience Group
The Patient and Carer Experience Group's purpose is to ensure that there is a culture of continuous, positive improvement to patient/user and carer experiences and that this remains core to the Trust’s business. The Group exists to:

- Develop & drive a range of methodologies to capture and learn from patient & carer experience
- To make a difference to patient/user experience through working with our staff and external stakeholders such as our commissioners, local service users, HealthWatch and other patient groups.
- To actively work with key stakeholders members – HealthWatch, patient/user representatives – to consider them as a critical friend and to explore ways in which the Trust can respond positively to their views.
- To ensure that we develop a culture of patient/user participation on our improvement projects and groups so that their voices can be heard and that their views make a difference to the work that we do.
- To ensure delivery of the Trust patient and carer experience strategy and strategic objectives.

5. The Trust Approach
In order to ensure that our patients and carers receive the best possible experience from the Trust, we have developed seven pledges. These pledges have been developed through consultation with our patient and carer experience committees and patient and carer champions. Each pledge sets out our commitment to patient and carer experience. Each of these pledges will be supported by annual patient and carer experience plans for each Care Group.

Pledge 1: We will listen to our patients & carers and respond to their feedback

The Trust is committed to improving our patient engagement and listening to feedback from our patients to understand their needs. Feedback comes in many forms, from patient survey results to complaints and compliments. This will, in turn, allow us to understand what is important when delivering high quality patient care and use this knowledge in the design of our services.

To do this we will:

- Gain real time feedback from our patients in methods to suit their needs
- Use the Friends & Family Test feedback to improve the patient experience
- Develop a more robust approach to collecting sharing and using feedback from websites such as NHS Choices and Patient Opinion
- Ensure the Patient Experience Team work alongside frontline staff to translate feedback into local actions

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• Appoint Patient and Carer Champions from our Trust Governors
• Commit to sharing patient and carer feedback with external bodies
• Develop methods of communication and representation from wider patient groups
• Collect data and encourage feedback from patients at every opportunity.

To know we are making a real difference we will:

• Utilise Friends and Family Test feedback by:
  • sharing it with all staff, from the front line to the Executive Board on a monthly basis
  • creating quarterly ‘dashboards’ to feedback to ensure patients receive timely feedback to their comments

• Obtain and evaluate monthly feedback from the patient and carer champions following their ward visits, ensuring concerns and compliments are voiced and handled in a timely and effective way.

• Use the ‘You said…We did’ posters to communicate to patients and visitors what actions have been taken as a result of patient feedback

• Monitor patient survey results on the effectiveness of communication methods

• Train our staff in customer care including listening to and acting on complaints and concerns when they are raised
Pledge 2: We will provide a safe environment for our patients

It is important to the Trust that, wherever possible, issues raised by our team, patients or relatives are dealt with speedily and efficiently. Once we have dealt with the immediate issue it is essential that we learn from the situation and use the information to make improvements that will impact on the patient experience in the future.

To do this we will:

- Strengthen the ‘freedom to speak up’ initiative for staff to escalate concerns and take immediate action to rectify a potentially harmful situation. Empower teams to take action to rectify issues immediately wherever possible
- Introduce the ‘freedom to speak up’ initiative for patients so they can have a real input on care
- Review the admission and discharge processes to support safe care
- Roll-out of the patient voice volunteers to support immediate response to patient concerns
- Monitor safer staffing levels.
- Ensure staff have a robust knowledge of how to report concerns.

To know we are making a real difference we will:

- Frequently monitor and, every quarter, share the lessons learnt from ‘freedom to speak up’ and patient voice volunteers.
- Monitor results from the ‘safety thermometer’ to ensure that the care our patients receive is as safe as possible.
- Use safer staffing evidence based models to ensure that our inpatient locations are sufficiently staffed, therefore creating a safer care environment.
Pledge 3: We will meet the physical and comfort needs of our patients

As a Trust, we know there is evidence which suggests that a good, safe environment and healthy food can have a therapeutic effect on a patient and their recovery. We will ensure that both the physical and comfort needs of our patients are given priority at all times.

To do this we will:

- Maintain the dignity of our patients at all times
- Provide fit for purpose areas to allow patients privacy when having discussions about their care
- Maintain the patient environment to ensure the safety and comfort of the patient
- Ensure patients have nutritious food and access to hydration at all times
- Ensure patients have access to television and other media within inpatient environments

To know we are making a real difference we will:

- Monitor audit results related to food and environment to demonstrate continuous improvement
- Observe the Trust as a non-smoking site
- Deliver on our PLACE commitments to continuously improve our environments
- Implement the Dementia Friendly Hospital Scheme
Pledge 4: We will support the carers of our patients

The Trust understands that family members and carers should be offered the opportunity for their needs for support and information to be addressed separately to those of the patients. Carers can play a valuable and vital role as part of the care team of a patient as they are the expert in the individual and can provide insight, facilitate communication and ensure continuity. It is important that we recognise the role of carers and support them.

To do this we will:

- Provide them with support from educated and skilled staff
- Signpost carers to the support mechanisms available to them within and outside the Trust
- Develop our provisions for carers while they support someone in our care
- Invite carers to give us feedback on improving the patient experience
- Invite carers to be part of our staff recruitment programmes

To know we are making a real difference we will:

- Ensure all identified carers have access to a carers assessment
- Host Quarterly carers' workshops/focus groups chaired by our Governor Champion to establish and learn from their experiences of the Trust and develop improvement action plan based on the feedback
- Build on our partnership links with local stakeholders such as Health Watch and the Alzheimer’s Society
- Work with schools and colleges to find new ways of engaging with young carers to provide education and support on looking after their own physical and mental health
Pledge 5: We will recognise our patients and carers individuality and involve them in decisions about their care

The Trust understands that different patients will make choices about their care based on their values and beliefs, as well as taking into account their current health situation and the experiences of their time in our care. It is important that we take into consideration patient’s individual needs.

To do this we will:

- We will implement the accessible information standard by 1 April 2016
- Provide information for patients in different formats to meet their needs, for example easy read versions, large print or foreign languages
- Provide services which are accessible to patients with disabilities
- Involve patients in decisions about their care and support them to make informed choices
- Provide care which is mindful of patient’s culture and beliefs.

To know we are making a real difference we will:

- Monitor the number of complaints for ‘hard to reach’ communities with specific needs concerning patient care to enable us to learn lessons and improve services according to patient’s needs.
- Monitor the number of team members from all care groups that attend customer service training
- We will monitor and report on our compliance with the accessible information standard.
Pledge 6: We will communicate effectively with our patients throughout their journey

The Trust strives to provide excellence in care and all the services it offers to our patients. In order to meet and exceed this ambition, we are committed to pursuing alternative channels for communicating with our patients and carers. This will assist in providing a timely, professional and effective service to all our patients.

To do this we will:

- Each service will have an up to date performance dashboard with key contact information and a benchmark of performance and feedback
- Our website will be inviting, accessible and easy to use
- Introduce ‘hello my name is…’, a campaign started by a doctor who also has terminal cancer to encourage and remind healthcare staff about the importance of introductions in healthcare.
- Varying the methods we use to communicate with patients from face to face to social media
- Clearly communicate the available feedback channels to patients
- All complaints will be responded to in a timely manner as per Trust policy and reported to the Executive Team for review and learning
- Ask governors and staff to provide feedback on any new patient information materials produced
- Provide information to patients about what they can expect when they come into our care

To know we are making a real difference we will:

- Gather and report on feedback from groups such as the Patient and Carer Experience Group and care groups
- Obtain and evaluate feedback from patients about our communications methods
- Commit to sharing any new patient information materials with the Patient and Carer Experience Group and our governors for feedback on suitability as patient representatives
- Monitor website hits to enable us to know the effectiveness of it as a communication tool
- Audit and report on the usage of performance dashboard at a care group level
- Review and report on the ‘Hello my name ’ campaign through monitored results of the Friends and Family Test feedback
Pledge 7: We will aim to ensure our patients are cared for by skilled and caring staff

Within our trust, improvement to the patients’ experience will only come about with the willing cooperation and commitment of our team; both those in direct contact with patients and those in our supporting services.

To do this we will:

- Develop a customer care training package to be rolled out Trust-wide to support our administrative, domestic and non-registered healthcare staff to deliver the best possible patient experience. This will support staff to foster and promote caring and kindness, compassion and empathy based on the 6Cs
- Define the behaviours that our staff will role model and hold each other to account to display
- Ensure all, regardless of their role, realise the part they have to play in the patient experience
- Work with our voluntary services department to ensure our volunteers feel valued and are trained to support the Trust most effectively
- Facilitate collaborative working between all care groups, volunteers, Patient Experience Lead and Patient Experience Group
- Empower teams to take small but significant action based on the feedback from patients and families to make changes that impact on patient experience
- Introduce the GEM awards campaign, this campaign allows patient carers or a colleague to nominate staff who they believe have gone the extra mile to improve the patient or carer experience

To know we are making a real difference we will:

- Monitor the training compliance of all of our staff on a monthly basis through the staff electronic training record.
- Commit to meeting with the Patient Experience Group on a bi-monthly basis
- Evaluate our customer care package based on feedback from staff and adapt the content based on feedback from patients regarding their experience
- Commit to meeting with our volunteers quarterly to ensure they are supported
6. Links to other strategies

Patient Safety Strategy
Clinical Audit and Effectiveness Strategy

7. Reporting and Monitoring

The Patient and Carer Experience Group will develop and monitor an annual work-plan to deliver this strategy which will be included in the Trust quality improvement plan.

Progress against the plan will be monitored by the Quality & Patient Safety Committee. With quarterly reports on progress submitted to the Trust Board.

8. Equality and Diversity

The Trust serves a richly diverse population and works hard to ensure that all our services are fair and equally accessible to everyone.

We aim to employ a workforce who is as representative as possible of this population, so we are open to the value of differences in age, disability, gender, marital status, pregnancy and maternity, race, sexual orientation, and religion or belief.

Our vision, which applies to staff, patients, and patients’ families, is to be ‘effortlessly inclusive’. To achieve that vision, we aim to:

- treat everyone with respect and dignity at all times
- challenge discriminatory behaviour and practice
- recognise and embrace diversity
- ensure equal and easy access to services
- ensure equal access to employment and development opportunities
- consult and engage with staff, patients and their families to ensure that the services and the facilities of the Trust meet their needs.

The Trust Equality & Diversity Group reports into the Patient & Carer Experience Group.
Appendix 1 Glossary

Friends and Family Test - The NHS Friends and Family Test (FFT) was created to help service providers and commissioners understand whether their patients are happy with the service provided, or where improvements are needed. It is a quick and anonymous way to give your views after receiving care or treatment across the NHS.

'Hello my name is' – A campaign to encourage and remind healthcare staff about the importance of introductions in healthcare. The campaign was started by Dr Kate Granger, who, during a hospital stay, observed that many staff looking after her did not introduce themselves before delivering her care.

National Institute for Health and Care Excellence (NICE) - an independent organisation, set up by the Government in 1999. NICE decides which drugs and treatments are available on the NHS in England and Wales.

Patient Advice and Liaison Service (PALS) - The Patient Advice and Liaison Service (PALS) offers confidential advice, support and information on health-related matters. They provide a point of contact for patients, their families and their carers.

Patient Led Assessments of the Care Environment (PLACE) - A system for assessing the quality of the patient environment. The assessments apply to hospitals, hospices and day treatment centres providing NHS funded care. The assessments are done by local people as part of a hospital team to assess how the environment supports patient's privacy and dignity, food, cleanliness and general building maintenance. It focuses entirely on the care environment. The assessments take place every year, and results reported publicly to help drive improvements in the care environment.

Safety Thermometer - The NHS Safety Thermometer allows teams to measure harm and the proportion of patients that are 'harm free' from pressure ulcers, falls, urine infections (in patients with a catheter) and venous thromboembolism during their working day, for example at shift handover or during ward rounds.

'You said, We did' – A way of feeding back to patient, the outcomes of their comments. Usually displayed on posters/displays in patient environments.