Health Care Governance Committee

Title: Patient Experience Annual Report

Meeting Date: 18th July 2017

Executive Lead: Clare Hawkins, Director Quality & Governance/Chief Nurse

Author(s): Tricia Wren, Deputy Director Quality & Governance/Deputy Chief Nurse

Anthony Power, Head of Patient Experience

For: NOTING

Risk Rating: Green

1.0 Purpose & Recommendations

1.1 To provide assurance that the Trust has robust processes in place to capture, measure and act on patient feedback to improve service delivery.

1.2 To note key areas of achievement in 2016/17 and planned development and improvements for 2017/18.

2.0 Executive Summary

2.1 97% of patients, their families and carers would recommend Trust services to Friends and Family. This score again exceeds both the Trust performance target and national average of 95%.

2.2 The Trust received 222 formal complaints during the year and 12,886 compliments from patients, families and carers.

2.3 In 2016, The Trust improved on the 2015 Patient Led Assessment of the Care Environment (PLACE) assessment scores in all areas.

2.4 Patient and carer stories remain a standing item at Trust board meetings
3.0 Relevant Strategic Objective(s) / Strategies

3.1 Trust Strategic Objectives:

1. We will support the people we serve to manage their own health and wellbeing
2. We will improve clinical outcomes and enhance patient safety
4. We will use resources efficiently to enhance our ability to improve services
6. Impacts on all Strategic Objectives

3.2 Links to: Quarterly quality reports.

4.0 References, Appendices & Attachments

References: None

Appendices & Attachments: None

Author(s) of paper:

Tricia Wren, Deputy Director Quality and Governance / Deputy Chief Nurse

Anthony Power, Head of Patient Experience

June 2017
Sign Off: To be completed as part of papers to Executive Team, Board Committees and Board

Committee Consideration

This Report has previously been considered by the following committees:

<table>
<thead>
<tr>
<th>Committee:</th>
<th>Date (Month / Year):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Safety &amp; Experience Group</td>
<td>June 2017</td>
</tr>
</tbody>
</table>

Issues arising from committee consideration

None

Data Quality Statement

By way of assurance to the Board, and in order to inform discussion / decision, the accountable executive director confirms that to the best of their knowledge, and subject to any exceptions identified, data contained in this report is:

<table>
<thead>
<tr>
<th>Data Quality Domain</th>
<th>Description</th>
<th>Comments / Exceptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete</td>
<td>Information is as comprehensive as possible to inform the board and no significant known facts or statistics which may influence a decision are omitted.</td>
<td>✓</td>
</tr>
<tr>
<td>Accurate</td>
<td>As far as can be reasonable ascertained or validated, information in the report is accurate.</td>
<td>✓</td>
</tr>
<tr>
<td>Relevant</td>
<td>Information contained in the report is relevant to the matters considered in the report.</td>
<td>✓</td>
</tr>
<tr>
<td>Up To Date</td>
<td>Information in the report is as up to date as reasonably possible in the context of the time at which the paper is written</td>
<td>✓</td>
</tr>
<tr>
<td>Valid</td>
<td>Information is presented in a format which complies with internal or national models or standards</td>
<td>✓</td>
</tr>
<tr>
<td>Clearly Defined</td>
<td>The meaning of any data in the report is clearly explained</td>
<td>✓</td>
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Executive Director Sign-Off

This paper has been approved by the accountable executive director who is satisfied that (i) the implications for risks, (ii) quality/service/regulatory impacts and (iii) resource implications, have been considered.

Clare Hawkins
Director Quality & Governance/Chief Nurse

Company Secretary Sign-Off (Board papers only)

This paper has been quality control checked and approved by the Company Secretary

✓ / x
Patient Experience Annual Report

2016/17

Proud to care for you

Care • Respect • Quality • Confidence • Improve
1. Introduction

This is the fourth annual patient experience report for the Trust and provides an overview of the patient experience activity for 2016/17.

The responsibilities of the Patient Experience team (PET) include managing PALS, complaints, coordinating patient feedback through a variety of methods, leading on PLACE, managing interpreting services and leading on Equality and Diversity across the Trust. The remit of the PET facilitates triangulation of complaints, PALS and other sources of feedback to identify links and trends.

This report covers:
- information on how patient feedback is captured
- what our patient feedback tells us
- how the feedback is shared with staff and service users
- actions taken in response to feedback
- an overview of the annual Patient Led Assessment of the Care Environment (PLACE) results for the Trust
- activity of the Patient Experience Forum
- improving the care of people with learning disabilities
- plans for 2017/18

2. Glossary of terms

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>HCT</td>
<td>Hertfordshire Community NHS Trust</td>
</tr>
<tr>
<td>HGC</td>
<td>Healthcare Governance Committee</td>
</tr>
<tr>
<td>HwH</td>
<td>Healthwatch Hertfordshire</td>
</tr>
<tr>
<td>NICE</td>
<td>National Institute of Health and Care Excellence</td>
</tr>
<tr>
<td>PLACE</td>
<td>Patient Led Assessment of the Care Environment</td>
</tr>
<tr>
<td>PSEG</td>
<td>Patient Safety and Experience Group</td>
</tr>
<tr>
<td>PEF</td>
<td>Patient Experience Forum</td>
</tr>
<tr>
<td>FFT</td>
<td>Friends and Family Test</td>
</tr>
<tr>
<td>CQC</td>
<td>Care Quality commission</td>
</tr>
<tr>
<td>HV</td>
<td>Health Visiting</td>
</tr>
</tbody>
</table>

3. Strategic context

Hertfordshire Community NHS Trust’s (HCT) vision is:

‘To maintain and improve the health and wellbeing of the people of Hertfordshire and other areas served by the Trust’.

This vision is underpinned by the Trust’s values, which complement the NHS Constitution, supporting patients’ rights and in particular the need to treat patients with dignity and respect:

- **Care** - We put patients at the heart of everything we do
- **Respect** - We treat people with dignity and respect
- **Quality** - We strive for excellence and effectiveness
- **Confidence** - We do what we say we will do
- **Improve** - We will improve through learning and innovation
Patient experience feedback, either positive or critical, is important to the Trust to help ensure that services continually improve and remain responsive to the needs of patients, their families and carers. It also lets us know when we get it right and where we need to improve. The Trust complies with the CQC requirement to provide evidence on the effective use of patient feedback and how it is used to improve services.

4. Governance

The Director of Quality & Governance/Chief Nurse has Board level responsibility for patient experience and delivery of the PET annual plan. The plan is developed by the Patient Safety & Experience Group and is monitored at the bi-monthly meetings. A representative from Hertfordshire Healthwatch participates in these meetings.

Reports and outcomes from meetings are presented to Healthcare Governance Committee.

Patient experience is reported in detail in the quarterly Quality Reports, the annual Quality Account, and in the monthly Business Unit Performance Reviews and Integrated Business Performance Reports.

Information and reports relating to patient experience are shared with the commissioners at Quality Review Meetings.

Patient, carer and staff stories are shared at the bi-monthly Trust board meetings.

5. How we gathered patient feedback in 2016/17

The Patient Experience team (PET) receives and measures feedback received from patients and the public about the quality of Trust services in a number of different ways as detailed below:

- Patient Advice and Liaison Service (PALS),
- Complaints
- Compliments
- NHS Friends and Family Test
- Patient Led Assessments of the Care Environment (PLACE)
- Patient Surveys
- Patient and Carer Stories at Trust Board

PALS, Complaints and Compliments - In 2016/17, 222 formal complaints were received by the Trust, providing essential information about areas for improvement and enabling lessons to be learned. A separate annual complaints report has been produced which outlines the changes made to improve services for patients, their families and carers. 629 HCT-service related PALS contacts were received in 2016/17, consisting of requests for advice, informal concerns and queries. In 2016/17 HCT received 12,886 compliments from patients, their families and carers. A selection of compliments is included in the weekly Trust Noticeboard to share positive feedback Trust-wide.

NHS Friends and Family Test (FFT) – In line with NHS England guidance all patients are made aware of the opportunity to provide continuous feedback about their experiences of Trust services. FFT feedback can be provided via traditional paper comment cards (different versions are available for different patient groups, including easy-read) and via online submission, using a link provided on the Trust website. In 2016/17 services also piloted telephone surveys to capture FFT feedback, and to improve response rates.
There was a 16% increase in the overall number of FFT responses received in 2016/17; 28,702 responses were received in comparison to the number of FFT responses received in 2015/16, which was 24,465.

**Patient Led Assessments of the Care Environment (PLACE)** - PLACE assessments were carried out at HCT community hospital wards. Further detail on the assessments is provided later in the report.

**Patient Surveys (Adult and Children's services)** – Patients are provided with the opportunity to give more detailed feedback about their experiences of HCT services via surveys. All surveys currently available have been drafted using the National Institute for Health and Care Excellence (NICE) Quality Standard statements to provide a robust evidence base and an opportunity to benchmark across the Trust.

Flexibility is available for services to include service-specific questions in any survey drafted. Easy-read versions of surveys are available for different equality groups to provide feedback about their experiences of HCT services.

**Patient and carer stories** – Patient and carer stories remain a standing item at each Trust Board meeting.

This method of gathering patient and carer feedback about HCT services continues to promote organisational learning alongside more standard methods, such as PALS and complaints feedback and patient surveys.

Presenting at Trust Board also gives services the opportunity to share their good work and innovation more widely and can play an important part in staff development and raising political awareness.

**Quality Priority** – In 2016/17 a patient experience quality priority was developed to improve the overall FFT response rates and raise staff awareness about the importance of patient feedback and actions the Trust implement in response. Further detail on the outcome of this is provided later in the report.

6. **What our feedback tells us**

**Friends and Family Test**

HCT gathers FFT feedback on a continuous basis from patients, their families and carers. Service level performance is reported on a monthly basis in business unit reports, and services also receive monthly summary reports direct from the external patient experience database provider. This level of reporting ensures transparency and service level awareness of performance, so that areas of good practice are noted and any changes necessary are implemented. Monthly performance reports are also submitted nationally to NHS England.
The percentage of patients who would recommend HCT services to their friends and family is consistently above the HCT target and national average across all services as detailed in the table below.

<table>
<thead>
<tr>
<th>Friends and Family Test Scores 2016/17</th>
<th>Apr</th>
<th>May</th>
<th>Jun</th>
<th>Jul</th>
<th>Aug</th>
<th>Sep</th>
<th>Oct</th>
<th>Nov</th>
<th>Dec</th>
<th>Jan</th>
<th>Feb</th>
<th>Mar</th>
</tr>
</thead>
<tbody>
<tr>
<td>HCT FFT score*</td>
<td>98%</td>
<td>98%</td>
<td>98%</td>
<td>98%</td>
<td>98%</td>
<td>97%</td>
<td>97%</td>
<td>97%</td>
<td>97%</td>
<td>96%</td>
<td>97%</td>
<td>97%</td>
</tr>
<tr>
<td>Target</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
</tr>
<tr>
<td>National Average</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
</tr>
</tbody>
</table>

*The percentage of patients surveyed who would be extremely likely or likely to recommend our service to friends and family if they needed similar care or treatment

Overall performance in this area has remained consistent throughout 2016/17; however, the focus in 2017/18 will be to increase the number of overall FFT responses. Ideas to achieve this aim include continuing with a dedicated Trust-wide patient FFT feedback day, which led to an increased number of FFT responses in quarter 4 of 2016/17. The option of offering patients the opportunity to provide FFT feedback via text message will also be explored again as a priority in 2017/18. This additional means of providing FFT feedback should ensure that Trust FFT response rates are more representative of the total numbers of patients seen each year by Trust services.

**Inpatient survey**

Patients are asked to complete a survey prior to discharge to provide feedback about their experiences of the service. The following table shows end of year results in five key areas from our Community Hospital Inpatient surveys, with comparison to previous years.

<table>
<thead>
<tr>
<th>Overall, how would you rate the quality of care received?</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
<th>2016/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excellent or Very Good</td>
<td>93%</td>
<td>95%</td>
<td>94%</td>
<td>91%</td>
</tr>
<tr>
<td>Excellent, Very Good or Good</td>
<td>99%</td>
<td>99%</td>
<td>99%</td>
<td>98%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Do you have confidence and trust in the staff treating you?</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
<th>2016/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>93%</td>
<td>94%</td>
<td>99%</td>
<td>98%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Did you feel you were treated with dignity and respect?</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
<th>2016/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>99%</td>
<td>99%</td>
<td>99%</td>
<td>99%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>As far as you know, did staff wash their hands between patients?</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
<th>2016/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>100%</td>
<td>99%</td>
<td>99%</td>
<td>99%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Good or Good</td>
<td>84%</td>
<td>84%</td>
<td>84%</td>
<td>78%</td>
</tr>
</tbody>
</table>

NB: 938 patients completed the Community Hospital Inpatient survey between April 2016 and March 2017.
Where areas of concern or poor performance are noted in the inpatient survey results, this information is shared with services directly for their action. An example of organisational learning and improvement as a result of patient feedback includes carers champions working with carers to ensure a clear process is in place to engage them in discussions about the patient’s care plan.

The table below demonstrates some free text patient comments received in the inpatient survey.

<table>
<thead>
<tr>
<th>Dignity and Respect:</th>
<th>Not told who to contact if worried about condition following discharge:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Every one of the staff I met was always so nice, kind and caring. Definitely</td>
<td>I know to ring Doctors. I know to get in touch with the Doctors Surgery</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Overall quality of care:</th>
<th>Inconsistent messages from staff:</th>
</tr>
</thead>
<tbody>
<tr>
<td>The members of staff here to a great job especially the Nurses and HCAs. I was cared for really well.</td>
<td>A few times not often Just on the odd occasion</td>
</tr>
</tbody>
</table>

Adult patient experience survey

In 2016/17, 3392 adult patient experience surveys were completed and returned.

Key areas of good performance indicated in overall results include:

- 99% of patients told us that staff communicated in polite and effective manner
- 97% of patients told us that staff introduced themselves and stated their name

One key area of improvement identified in 2015/16 was regarding patients’ preference for sharing information with their partner, family members and/or carers. In 2016/17 this led to the adaptation of the initial assessment form in the Trust record-keeping system (SystmOne) to capture patient preferences for sharing their information was discussed with them.

Children’s services surveys

Over 15,000 comments were received in 2016/17 from children and young people and their parents and carers. Opportunities to provide feedback are available via the use of standard and bespoke paper and electronic surveys, and adapted FFT comment cards (easy-read version).

97% of survey and FFT respondents would recommend HCT’s Children’s services to family and friends.

The table below provides some examples of positive comments received from Children’s services surveys and FFT cards.

<table>
<thead>
<tr>
<th>Service</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children’s Community Nursing West Herts</td>
<td>All the staff worked together brilliantly and with my daughter</td>
</tr>
<tr>
<td>Health Visiting North Herts</td>
<td>The leaflets provided with all the activities that I could undertake with my daughter were really helpful</td>
</tr>
<tr>
<td>Speech and Language Therapy</td>
<td>Very helpful and understanding and also reassuring</td>
</tr>
<tr>
<td>School Nursing (ChatHealth Texting)</td>
<td>I have had appointments with the school nurse at</td>
</tr>
</tbody>
</table>
Quality Priority 2016/17 - To develop a culture where staff value feedback and implement changes as required to improve the experience of service users.

A Trust quality priority was developed in 2016/17 to increase staff understanding of the importance of patient feedback and how this can be utilised to evidence and share good practice and learning.

The quality priority consisted of a number of measures which were reported to Trust Board on a quarterly basis:

- Increase in the number of FFT responses per Trust service
- Number of positive responses received from FFT comment cards
- Quarterly audit of services demonstrating patient feedback shared with staff
- Services demonstrating improvements in response to patient feedback

Whilst the aims of the quality priority were partially achieved during the course of the year, this exercise did evidence an increased awareness amongst Trust staff of the importance of sharing and using patient feedback to inform learning and change.

Notable achievements include:

- 97% of patients told us that they were involved in decisions about their care
- 89% of services provided examples of learning and improvement based on patient feedback received from FFT comment cards
- 84% of services audited demonstrated sharing of patient feedback with staff at monthly team meetings where FFT response rates and individual patient comments were discussed and actions put in place

Patient Led Assessment of the Care Environment (PLACE) – 2016 programme

Patient Led Assessment of the Care Environment (PLACE) is undertaken nationally in all NHS inpatient care provider units. This is the third year of the national PLACE programme.

The assessments focus on the environment in which care is provided, which includes non-clinical services, and assesses cleanliness, condition and maintenance, food, hydration, and the extent to which the provision of care with privacy and dignity is supported.

Following on from Healthwatch Hertfordshire’s 2016 report and recommendations regarding PLACE assessments, PLACE volunteer training was again jointly delivered in partnership with Hertfordshire Partnership Foundation Trust, East & North Herts Trust and West Herts Hospital Trust. Positive responses were received from those Healthwatch volunteers who
attended, and from the Health & Social Care Information Centre (now NHS Digital), who were pleased to learn of this continued joint approach to training. PLACE assessments were carried out between March and May 2016 at HCT community hospital wards. In 2016, HCT improved on the 2015 PLACE assessment scores in all areas. However, areas of improvement were identified, and examples of actions taken following the 2016 PLACE assessment programme include the removal and updating of hospital signage in patient communal areas, and the provision of a portable hearing loop installed at one of our community hospitals. Each community hospital ward action plan has been monitored throughout the year by the Trust’s Patient Safety & Experience Group.

7. How patient feedback is shared

All feedback received by the Patient Experience Team is shared directly with the staff and teams involved in a variety of ways as outlined below.

- The service managers and team leads receive a monthly email which tells them the number of surveys completed, the percentage satisfaction score, the best and worst scoring areas and the patients’ comments. The information is shared with staff at team meetings to identify areas of good practice and any areas of improvement for action.

- Following a complaints investigation an action plan is implemented to ensure any required changes are made. In addition to providing regular reports to the Trust Board and commissioners, the learning from complaints is shared with staff across all services via staff bulletins, including the bi-monthly Clinical Matters, weekly Noticeboard and bi-monthly Children and Adult services bulletins.

- A selection of compliments is shared with staff in the weekly Noticeboard.

- The patient experience webpage for HCT’s public-facing website was further developed in 2016/17. Information on the HCT website now includes examples of patient stories and compliments, ‘you said, we did’, as well as information about the Trust Patient Experience Forum and details of how patients and the public can be involved in this.

8. Patient Experience Forum

The Patient Experience Forum was established in January 2016 and provides a central point of coordination for patient experience activity, with staff, patients and carers shaping and developing the group. The aim of the group is to engage staff and embed a culture of capturing and using patient feedback to make improvements.

Forum achievements in 2016/17 included development of the HCT patient experience webpage in partnership with Healthwatch volunteers and staff, and recruitment of new volunteers for the 2017 PLACE programme. The Forum will be refreshed in 2017/18 and its function will include providing external scrutiny from patients and local voluntary and community groups to review anonymised complaints and Trust responses to these complaints to provide assurance of the quality of the Trust’s complaints process.

HCT’s Equality & Community Engagement Forum is where senior leaders meet and plan service improvements with a wide range of representatives from Hertfordshire community organisations.

Community Forum members include county representatives from the Herts Interfaith Group, the Deaf community, Gypsy and Traveller Empowerment (GATE), HertsAID (a HIV charity), Carers in Herts, Healthwatch Herts, Community Development Action, Community Voluntary Services and MIND.

The forum has a positive and progressive atmosphere where members have made strides in choosing HCT Equality and Diversity priorities for 2017/18. This includes working with people who have Learning Disabilities to improve access to services and work placements as well as improving access to health care for those from disadvantaged groups.

Future areas of joint work in 2017/18 include inviting representatives to be part of the 2018 PLACE Programme as volunteer assessors to help us better understand the needs of different equality groups.

10. **Patient Experience Priorities for 2017/18**

The priority activities for the Patient Experience Team in 2017/18 are listed below:

- Offering patients, their families and carers the opportunity to provide FFT feedback by text message to increase overall number of Trust FFT responses.
- A refresh of the Trust's Patient Experience Forum to identify key actions for the Forum to achieve in the year.
- Set up process to provide external scrutiny of the Trust complaints responses through review of a small number of anonymised complaints.
- Supporting the Trust Equality & Community Engagement Forum including offering representatives the opportunity to be part of the 2018 PLACE programme and producing a video and training package with the Gypsy and Traveller community.
- Continue to improve access to services and health information for individuals with Learning Disabilities.

**Tricia Wren, Deputy Director Quality & Governance / Deputy Chief Nurse**

**Anthony Power, Head of Patient Experience**

**June 2017**