Patient and Public Involvement Strategy 2016 - 2018

Approved by the Executive Patient Experience Group 17 March 2016
The Work Plan for the Executive Patient Experience Group will demonstrate feedback is gathered from all steps of the patient and family journey.

Patient and Public Involvement Strategy
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Patient and Public Involvement Strategy

The purpose of this strategy is to provide a context and framework which supports the trust and its staff to work effectively in partnership with patients, the public and community stakeholders to deliver and improve services and patient experience.

The strategy focuses its key areas of improvement on the NICE Quality Standard 15 for Patient Experience. The NICE quality standard for patient experience in adult NHS services sets out how a high-quality service should be organised, so that the best care can be offered to people using NHS services.

The trust is keen to ensure that patients, their families and carers receive an experience that not only meets but exceeds their expectations of services at the Trust. We strive to ensure that all patients feel supported by the full range of trust services, and that staff involve patients, their families and carers in decisions about their care at all stages of the patient journey.

The trust values and encourages feedback on how all services perform. The trust also actively seeks the views and involvement of patients, their carers, our Foundation Trust members and the wider community in the design and delivery of all services. Their views play a central role in monitoring and driving improvements in the quality, safety and efficiency of our services.

The Trust’s Values and Behaviours

The trust has developed a set of values and behaviours which underpin the delivery of care and treatment for patients. The trust’s values and behaviours help to inspire, develop and support every member of staff to live the values for every patient, every colleague, every day. The values and behaviours are linked to staff appraisals and are promoted through training programmes including customer care and the healthcare certificate.

These values are about staff working together to deliver great patient experience more consistently – involving people who use trust services, their families, carers, staff and partners in continuing to improve the experience people have. Staff working for the trust are our biggest asset. The trust understands that, in order to deliver a good patient experience, we also must ensure a positive staff experience.
This Strategy will support the trust’s mission to be a provider that:

- Is committed to patient-centred care;
- Delivers high quality, safe, cost effective and sustainable healthcare services;
- Provides a working environment that is underpinned by our values and behaviours; and,
- Treats patients and staff with dignity and respect.

The Patient and Family Journey in our Care – Progress:

There has been some excellent work achieved so far through the Patient and Public Involvement Strategy 2012-2015. Examples of achievements include:

- An annual patient and public involvement programme developed by each division which includes a variety of methods for patient involvement, such as local patient surveys.

- Local surveys completed in wards and departments and patients are encouraged to provide feedback in a number of ways including by touch screen kiosk, one to one interviews with staff and Governors, and paper based surveys.

- The results are collated from local and national surveys and shared with the relevant teams. Good practice is highlighted and action plans are developed to address any issues which have been identified from the results. These action plans are then monitored by the Action Group for Patient Experience and reported to the Executive Patient Experience Group.

- Individual wards and departments also display examples of lessons learnt, and “You Said, We Did” posters highlighting changes made as a result of feedback from patients. [http://www.mcht.nhs.uk/information-for-patients/patient-surveys/](http://www.mcht.nhs.uk/information-for-patients/patient-surveys/)

The trust’s annual quality account [http://www.mcht.nhs.uk/information-for-patients/why-choose-us/quality/quality-account/](http://www.mcht.nhs.uk/information-for-patients/why-choose-us/quality/quality-account/) summarises results of feedback from patients and carers and examples of service improvements achieved. The trust’s website also provides summaries of results from local and national patient satisfaction surveys.

Our aims: what we want to achieve through our strategy

This strategy aims to meet NICE Quality Standard 15 for Patient Experience 2012. The NICE quality standard for patient experience in adult NHS services sets out how a high-quality service should be organised, so that the best care can be offered to people using NHS services. It provides specific, concise quality statements, measures and descriptors with definitions of high quality care.

Monitoring and reporting of the Patient and Public Involvement Strategy

The Executive Patient Experience Group has responsibility for monitoring this standard and will produce an annual work plan based on the elements of the patient journey: reputation; arrival, patient and family involvement, stay, treatment and leaving hospital to support compliance with the standard.
## Priorities for 2016-2018

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<th><strong>Statement 1</strong></th>
<th>Patients are treated with dignity, kindness, compassion, courtesy, respect, understanding and honesty.</th>
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<tr>
<td><strong>How will we know we are making progress?</strong></td>
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<tr>
<td><strong>We will</strong> review trends and themes from all aspects of patient feedback including informal concerns and complaints.</td>
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<td><strong>We will</strong> review results of the local core survey on privacy and dignity and results from the national surveys relating to staff interactions with patients to ensure there is clear evidence that trust values and behaviours are upheld.</td>
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<td><strong>We will</strong> monitor and analyse feedback from Friends and Family Test to highlight good practice and identify any areas for improvement based on comments from ‘detractors’ eg patients that would not recommend the trust.</td>
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<td><strong>We will</strong> publish results externally and internally on the quality and safety boards from the Open and Honest Care Survey.</td>
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<th><strong>Statement 2</strong></th>
<th>Patients experience effective interactions with staff who have demonstrated competency in relevant communication skills.</th>
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<tr>
<td><strong>How will we know we are making progress?</strong></td>
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<td><strong>We will</strong> review actions identified from local core survey for communications to identify key themes and best practice.</td>
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<td><strong>We will</strong> review results of relevant questions in the national patient surveys including: Did staff talk in front of you as if you weren’t there?</td>
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<td><strong>We will</strong> review feedback from formal and informal concerns.</td>
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<td><strong>We will analyse</strong> the Friends and Family Test to highlight good practice and identify any areas for improvement.</td>
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<td><strong>We will</strong> continue to provide training on customer care skills.</td>
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**Statement 3** Patients are introduced to all healthcare professionals involved in their care, and are made aware of the roles and responsibilities of the members of the healthcare team.

**How will we know we are making progress?**

*All* staff wear name badges and introduce themselves to patients.

*We will* ensure the effectiveness of the *#my name is* initiative.

*We will* review results from patient feedback contained in all local and national surveys.

*We will* review the content of the bedside folders and distribute to all wards. Audits will be conducted to check availability of folders for patients and survey results will be assessed to evaluate effectiveness.

*We will* increase awareness from patients on information contained in the Welcome to the Ward and quality and safety boards.

**Statement 4** Patients have opportunities to discuss their health beliefs, concerns and preferences to inform their individualised care.

**How we will know we are making progress:**

*We will* conduct quarterly surveys on communication that asks patients if they had opportunities to discuss their health beliefs, concerns and preferences, and these informed individualised care.

*We will* review local and national patient survey results for patient satisfaction on whether patients were able to find a member of staff to talk to about their worries and fears and received enough emotional support.

*We will*, where relevant, identify opportunities to extend the use of tools such as patient passports, across specialties that care for patients who have long term conditions, learning disabilities and cognitive impairment.
Statement 5 Patients are supported by healthcare professionals to understand relevant treatment options, including benefits, risks and potential consequences.

How will we know we are making progress?

The Patient Information Panel will ensure compliance with the policy for producing and providing patient information.

We will ensure consistent and maximum utilisation of patient information (including the EIDO system of generic information which explains risks and benefits of treatments and procedures).

We will assess any gaps in patient information from patient feedback.

We will understand and consistently applying the Accessible Information Standard by providing information in formats that disabled people, and people with sensory impairment or learning difficulties and if appropriate, carers and their families can understand.

We will review local and national patient survey results for patient satisfaction if they had confidence in decisions made about their condition and treatment and if patients received the right amount of information.

Statement 6 Patients are actively involved in shared decision making and supported by healthcare professionals to make fully informed choices about investigations, treatment and care that reflect what is important to them.

How will we know we are making progress?

We will review results from a monthly survey conducted by the governors that asks patients if they feel they included in decisions about their care. The results are published externally and internally on the quality and safety boards.

We will receive results of local and national patient surveys on whether patients were involved as much as they wanted to be in decisions about their care and treatment.

We will receive feedback from formal and informal concerns; and the Friends and Family Test to highlight good practice and identify any areas for improvement.
### Statement 7
Patients are made aware that they have the right to choose, accept or decline treatment and these decisions are respected and supported.

**How will we know we are making progress?**

We will receive annual audit reports conducted by members of the Patient Information Panel to ensure compliance with the policy for producing and providing patient information.

We will monitor concerns raised by patients where patient choice was not respected or supported for treatment options.

We will promote examples of actions / concerns highlighted in “You Said, We Did” communication posters.

### Statement 8
Patients are made aware that they can ask for a second opinion.

**How will we know we are making progress?**

We will utilise local outpatient surveys, including real time kiosk feedback, to confirm patients are aware they can ask for a second opinion.

We will ensure that copies of the NHS Constitution 2012 are available in outpatient settings, including an easy read version, and posters make patients aware that they can ask for a second opinion.

### Statement 9
Patients experience care that is tailored to their needs and personal preferences, taking into account their circumstances, their ability to access services and their coexisting conditions.

**How will we know we are making progress?**

We will monitor progress against trends in local and national patient surveys to ensure there is evidence that care is tailored to the patient's needs and preferences.

We will review results from national patient survey results for relevant questions, including Did staff take your family/home situation into account when planning your discharge?

We will monitor feedback from formal and informal concerns; will be analysed to highlight good practice and identify any areas for improvement.

We will continue to develop and implement changes to care planning/patient assessments of need to ensure patients are more actively involved and informed about their journey of care.
### Statement 10
Patients have their physical and psychological needs regularly assessed and addressed, including nutrition, hydration, pain relief, personal hygiene and anxiety.

**How we will know we are making progress:**

- **We will** conduct an annual core local survey on food and nutrition, and infection control.
- **We will** review local and national patient survey results for patient satisfaction on relevant questions including pain relief, food and nutrition.
- **We will** conduct monthly care indicator surveys that check if patients have been assessed appropriately for nutrition and hydration needs, pain and pressure area risk.

### Statement 11
Patients experience continuity of care delivered, whenever possible, by the same healthcare professional or team throughout a single episode of care.

**How will we know we are making progress?**

- **We will** review results from local and national surveys.
- **We will** review feedback from informal concerns and formal concerns.
- **We will** review patient satisfaction levels and scores demonstrate continuity of care delivered.

### Statement 12
Patients experience coordinated care with clear and accurate information exchange between relevant health and social care professionals.

**How will we know we are making progress?**

- **We will** review results of the local core survey for communication.
- **We will** review local and national patient survey results for patient satisfaction on relevant questions including In your opinion, did members of staff caring for you work well together?
- **We will** ensure evidence confirms that staff support coordinated care through clear and accurate information exchange.
**Statement 13**  Patients’ preferences for sharing information with their partner, family members and/or carers are established, respected and reviewed throughout their care.

**How will we know we are making progress ?**

We will ensure that systems are in place to establish, respect and review patient’s’ preferences for sharing information with partners, family members and/or carers.

We will review results from national patient survey results for the questions: Did the doctors or nurses give your family or someone close to you all the information they needed to help care for you? and Did staff take your family/home situation into account when planning your discharge?

We will review local and national patient survey results including carers and confidentiality surveys.

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**Statement 14**  Patients are made aware of who to contact, how to contact them and when to make contact about their ongoing healthcare needs.

**How will we know we are making progress ?**

We will review national and local patient survey results demonstrate that information is given to patients of who to contact when they leave hospital.

We will ensure patient information leaflets include details to advise patients who to contact about their ongoing healthcare needs, and how and when to contact them.

We will advise patients when they are discharged who to contact about their ongoing healthcare needs, and how and when to contact them.
GLOSSARY

Equality
In addition to the NHS Act 2006, there is significant legislation and policy aimed at eliminating inequality and discrimination on the groups of race and ethnic group age, gender, disability, faith and sexual orientation. We are committed to complying with these duties in order to provide individually tailored and person centred care.

Regulation and the CQC Outcome Standards
Patient and public involvement was included in the Healthcare Commission’s Standards for Better Health (2004) requirements and is now integrated into the Care Quality Commission’s CQC outcome standards.

Monitor and Foundation Trust Regulations for Membership and PPI
The trust complies with the NHS Act (2006) and has established a membership and member’s council. The trust has nearly 10,000 members drawn from local people, patients, staff and carers. 21 of these sit on the member’s council which oversees the patient experience, staff experience, members and engagement and strategy working groups.

NHS Constitution 2013
The trust adheres to the ideals of the NHS Constitution, which sets out the principles, rights and values of the NHS in England.

Care Quality Commission (CQC)
The CQC have set out their outcome standards for all health and social care providers and specifically, outcome 1, Regulation 17: Respecting and involving people who use services.

The outcome of our CQC Comprehensive Inspection which took place in October 2014, with results published in January 2015, rated the Trust overall as ‘Good. This places the trust in the top 10% of acute hospitals along with the best in the country.

References :

Section 242 (duty to involve) of the National Health Service Act 2006 (as amended by the Health and Social Care Act 2012). Trusts have a duty to make arrangements to involve users, whether directly or through representatives (via consultation, provision of information or other ways) in:
1. In planning the provision of services
2. In the development and consideration of proposals for change in the way services are provided
3. In any decisions to be made affecting the operation of services

NICE quality standard for patient experience in adult NHS services. The quality standard for patient experience in adult NHS services is made up of 14 statements that describe high-quality care for patients. These statements are about the best care you should receive and are summarised on the website http://www.nice.org.uk/guidance/qs15/resources/patient-experience-in-adult-nhs-services-121173373