

Title	PATIENT EXPERIENCE during October 2015 The proactive approach to gathering patients' experiences within the Trust			
Meeting	Board of Directors			
Date	1 December 2015			
Executive Summary				
<p>From April 2015, the national CQUIN targets for the Friends and Family Test have been relaxed with a shift of emphasis from response rate targets and financial rewards to broader use of the questions and expectations of service improvements as a result. The Trust's Carer and Patient Involvement (CAPI) Team have revised their process in order to accommodate this whilst building on the good will and success of the previous process. This paper reports on progress and outcomes for information collected during October 2015.</p> <p><i>Following the meeting of Executive Board on 19 November 2015 additional questionnaires have been received and included in the analysis presented in this paper to Board of Directors.</i></p>				
Recommendation				
That the following are noted :				
<ul style="list-style-type: none"> • The continued implementation of the Friends and Family Test according to national guidelines • The Friends and Family Test Plus results for October 2015 as the baseline measure of patient experience in South Tyneside NHS Foundation Trust • The additional use of Real Time Feedback reports as an additional methodology to supplement the patient experience • Actions planned as a result of patient feedback • The implementation of the NHS adult patient survey 2015 • 				
Report Author	Maureen Dale, Service Lead, CAPI			
Executive Director/ Sponsor	Bob Brown, Executive Director of Nursing and Patient Safety			
Purpose of paper	Information	X	Discussion	X
	Decision		Assurance	X
	Specific action			
Implications	Staffing	Yes		
	Finance	None		
	Legal	None		
	Public engagement	Yes		
	Partnership	None		
	Communication	Yes		
	Equality & Diversity	Yes		
	Clinical	Yes		
	Patient Safety	Yes		

Risk assessment and mitigation (include risk register reference if appropriate)	
Financial risk re: implementation and response targets (CAPI 4)	
Link to STFT Business Plan	Patient Safety, Quality and Experience
Link to CQC outcome	Outcomes 1, 2, 3, 4 and 5
Link to Board Assurance Framework	Patient Safety, Quality and Experience Workforce
Link to Strategic Risk Register	Patient Safety

REPORT TO BOARD OF DIRECTORS

PATIENT EXPERIENCE - October 2015

1 Introduction

From April 2015, the national CQUIN targets for the Friends and Family Test have been relaxed with a shift of emphasis from response rate targets and financial rewards to broader use of the question and expectations of service improvements as a result. The Trust's Carer and Patient Involvement (CAPI) Team have revised their process in order to accommodate this whilst building on the good will and success of the previous process.

2 Standard Process

The Trust is required to follow national guidelines concerning the continued implementation of the Friends and Family Test but, within those guidelines, has been able to use the Test as a baseline to gather broader views in a systematic way. This builds on the national programme by providing information to clinical areas that enable them to make changes to improve patient care.

Work has progressed on the publicity campaign to encourage patients and carers to give feedback using the processes on offer. This includes new branding of the questionnaires and posters which have been used from October 2015. Clinical areas will also be provided with re-styled reports the front sheet of which can be used as an attractive display in public areas.

3 Friends and Family Test

The Friends and Family Test will continue within A&E, inpatient, maternity and outpatient areas in South Tyneside District General Hospital until December 2015. This is to enable the conclusion of the contract with *iWantGreatCare* who provide analysis in A&E, inpatient and maternity services without cost.

4 Friends and Family Test Plus and Easy Read

As the Friends and Family Test was implemented across Trust outpatient and community services in accordance with the national timetable in 2014-15, additional questions were added to enable patients to comment on their experiences in specific areas. This Friends and Family Test Plus questionnaire is now used in community services and will be introduced to outpatients over the coming months.

The Easy Read version of the questionnaire is available for all services to use if they have patients or clients who would benefit. However, it is predominately used in services providing care to children and people with learning disabilities, communication difficulties or cognitive problems.

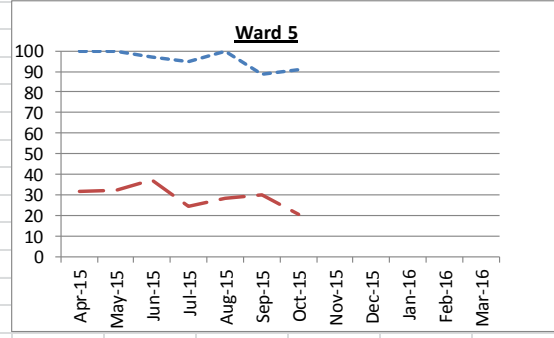
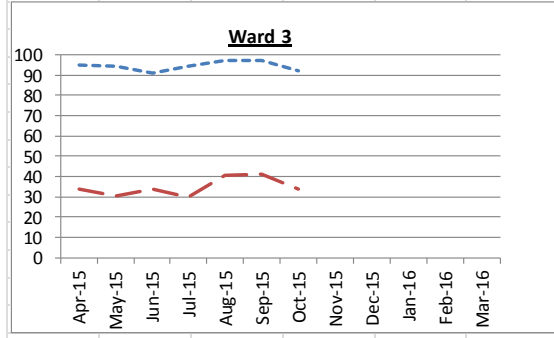
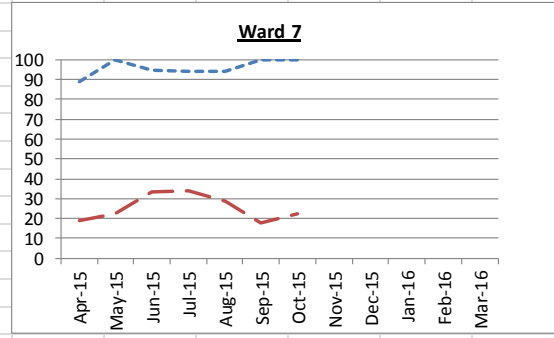
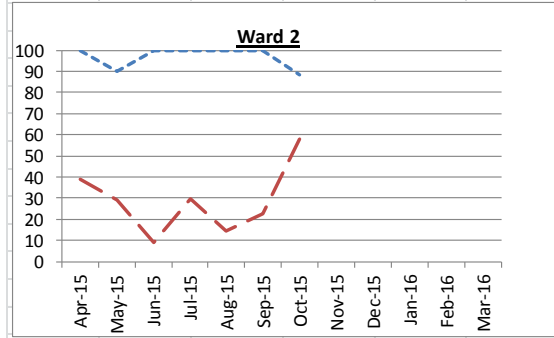
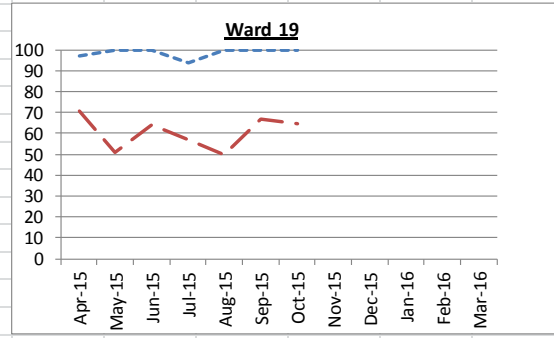
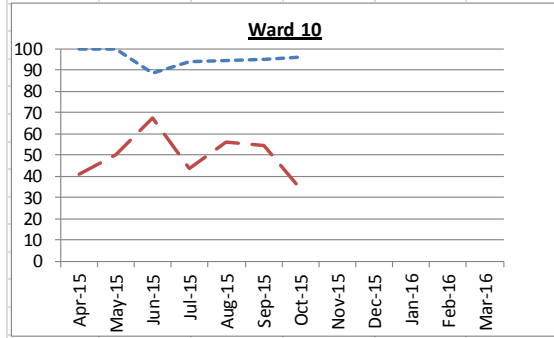
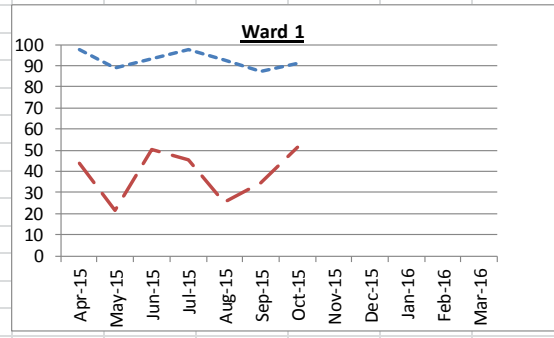
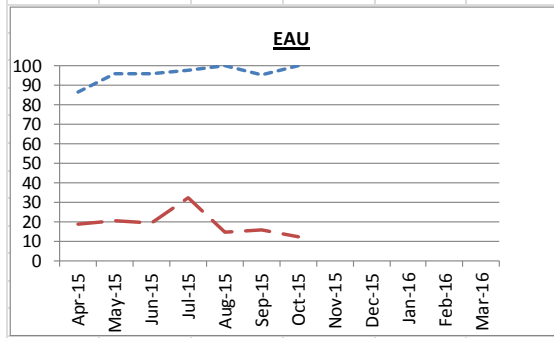
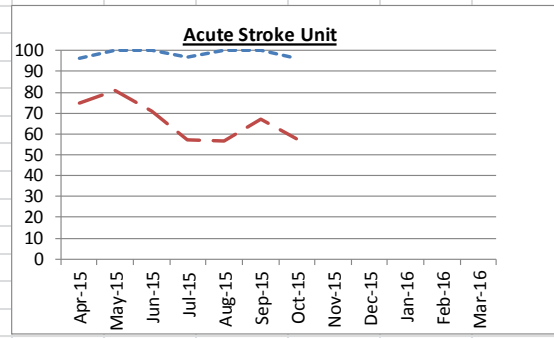
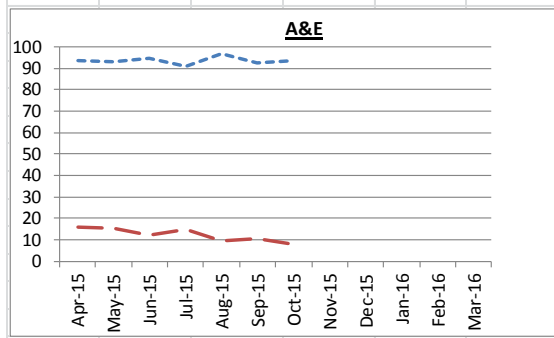
As the focus of each question is the same as the Friends and Family Test Plus, feedback can be combined into one report for the clinical area.

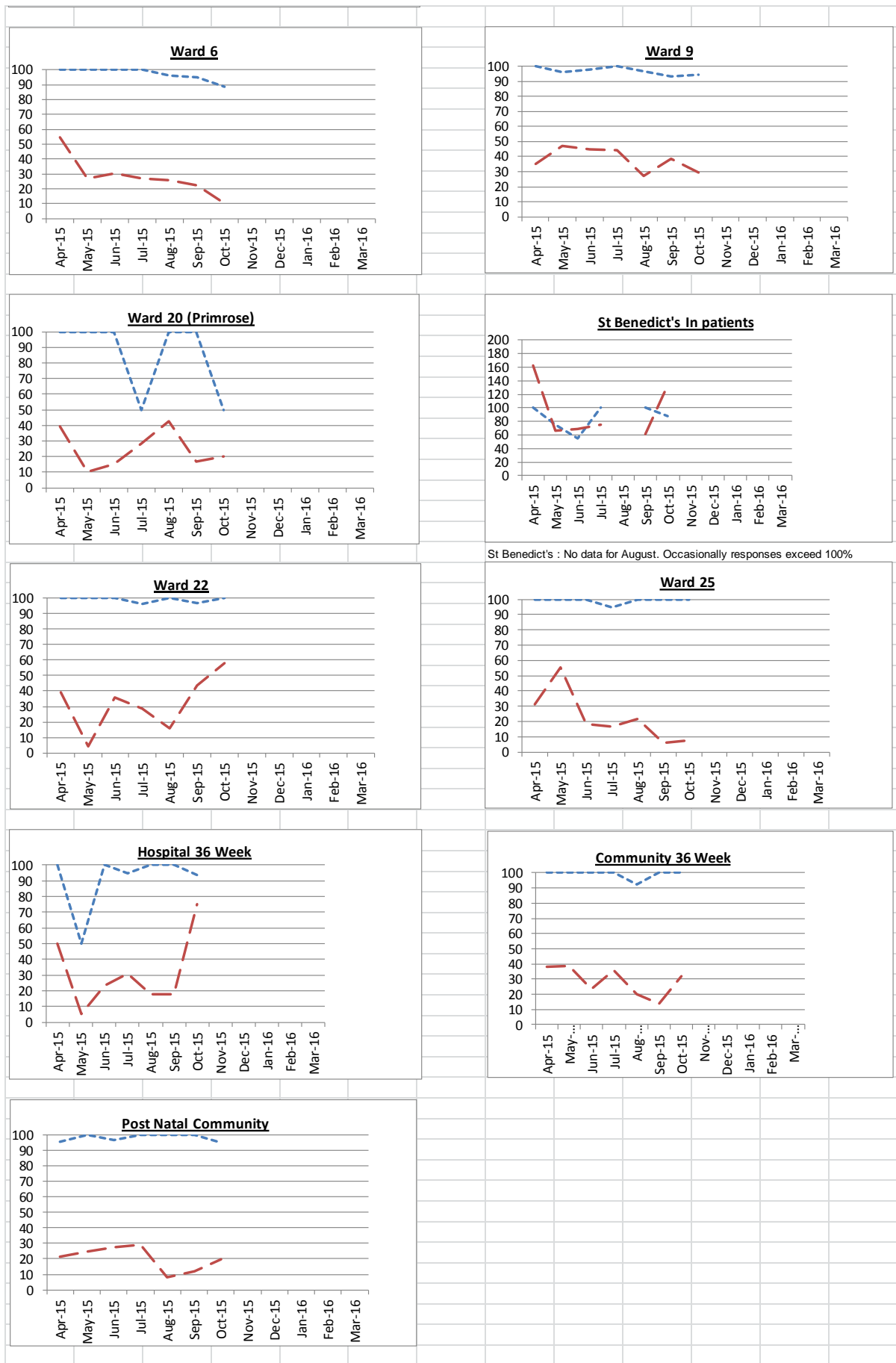
The following table summarises the Friends and Family Test results for October 2015. In order to spread the pressure on community staff, pace the requirements for analysis and avoid survey overload with some patient groups, a rotation programme for community services has been implemented. In October, the community services are based in Gateshead.

Service	no responses	% satisfaction	star
Care Home Initiative	4	100	4
Community Matrons	13	100	4.92
Intermediate Care	17	94.12	4.75
Urgent Care Team	45	91.11	4.93
District Nurses	123	97.56	4.93
Adult SALT	32	96.85	4.74
Podiatry	92	97.83	4.78
Bowel and Bladder	68	94.12	4.92
AHP - OT - specialist palliative care	6	100	5
LD OT	18	100	5
LD SLT	10	100	5
LD Physio	21	100	4.9
Sexual Health	14	100	4.9
Community Dental	163	99.39	4.93
Specialist Palliative Care Nurses	8	100	4.88
OOH PCT	18	100	5
LD Community Nurse	42	95.24	4.98
LD Liason Nurse	4	100	5
Childrens Therapies (OT)	32	100	4.78
Childrens Therapies (SALT)	162	100	4.87
Family Nurse Partnership	17	94.12	4.76
Radiology US	63	96.42	4.81
Radiology MRI	30	93.33	4.76
Radiology fluoroscopy	27	96.3	4.74
Radiology CT	19	94.74	4.68
OP Care of the Elderly	47	100	4.39
OP Gastroenterology	63	92.06	4.49
OP Stroke Clinic	44	95.18	4.83
OP Warfarin (Anticoagulant)	11	100	4.82
OP One Stop Falls Clinic	32	100	4.81
A&E	258	93.4	4.67
St Benedict's OP Consultant	1	100	5
St Benedict's Lymph	11	100	5
Ward 4	19	94.7	4.63
Endoscopy Day Ward	6	83.3	4.33
St Benedict's DC	8	100	5
OHDCU	15	93.33	4.93
EAU	16	100	4.75
Ward 1	33	90.9	4.58
Ward 5	22	90.9	4.68
Ward 6/ CCU	9	88.9	4.78
Ward 10	26	96.2	4.77
Ward 3	62	91.9	4.66

Trends in response and satisfaction rates for inpatient areas since April 2015 are shown here.

Key : short dashed line is satisfaction percentage; long dashed line is response rate





Demonstration of trends will continue and will be extended to include other Trust services in future reports.

5 Real Time Feedback

The CAPI Team are using the Friends and Family Test Plus questionnaire as an interview schedule which is being used to provide 'Real Time Feedback' of patients' experiences to clinical areas.

By visiting inpatient areas and interviewing a small number of patients and relatives, there is the opportunity for the patient to elaborate on their experience, and also for the facilitator to enquire about specific developments or issues implemented by the clinical area.

The report of these interviews is compiled and returned to the manager of the clinical area within eight working hours, but often on the same day. This enables the manager to raise the feedback at the next daily 'huddle' with the potential that care improvements are made within 24 hours of the interviews taking place. The report is designed to be displayed in public areas to share key points with staff and the public.

The scoring using percentage satisfaction and star rating is the same as in Friends and Family Test.

The following table demonstrates the activity and levels of satisfaction reported during October 2015.

Clinical Service	No of responses	% satisfaction	star rating
A&E	4	100.00%	5
EAU	5	100.00%	5
Ward 1	4	75.00%	4.75
Ward 5	3	66.67%	4.3
Ward 6/ CCU	3	66.67%	4
Ward 10	6	100.00%	5
Ward 2	4	50.00%	4
Ward 19	5	100.00%	4.8
Ward 8 - Stroke Unit	5	100.00%	4.8
Ward 4	6	100.00%	5
Ward 9	5	100.00%	4.8
OHDU	3	100.00%	5
Ward 25	3	100.00%	5
St Benedicts IPU	2	100.00%	5
St Benedicta DCU	4	100.00%	5

Whilst Real time feedback has predominately taken place within inpatient areas, the CAPI Facilitators are beginning to roll out to clinical areas in the community, at first in clinics.

Real time feedback was not conducted in five wards during October due to planned and unplanned absences in the CAPI Team. These clinical areas will be treated as priority during November.

6 Reporting to cross cutting services

In feedback from the Friends and Family Test and real time feedback, patients often comment on services that cut across clinical fields e.g. domestic services, catering, car parking. From October 2015, separate reports will be prepared using comments made by patients during generic interviews and supplied to managers of those services. A summary will be included in the next report.

7 Actions planned as a result of patient feedback

As part of the 'You said ... we did' process, the following services developed plans to act upon feedback from patients as follows:

Clinical Team	Patient feedback	Action taken
Bowel and Bladder (from Sept FFT+)	<p>Improve that the right day was on letter as I took the day off work</p> <p>Better directions to clinic</p> <p>Less waiting time (30 mins+), phone to be answered when trying to make contact</p> <p>When trying to cancel a previous appointment I tried on several occasions to ring however there was no answer and I didn't receive a response to my two voice messages</p> <p>That staff call back when requested</p> <p>Waiting time for appointment Waiting Times</p> <p>Frequency of appointments</p>	<p>Highlight this comment in administration Team meeting / discuss at huddle</p> <p>Move was required to accommodate other services</p> <p>Full clinic address is provided. To monitor and see if this is a recurrent problem or associated with any specific venue.</p> <p>This service is aware that there is a problem in responding to phone calls and a new telephone system is being implemented soon.</p> <p>Specialist Nurse numbers low currently due to ill health, maternity leave, vacancy. Following recruitment and planned return to work this would resolve</p>
EAU (from Oct RTF)	<p>Doors closed overnight to dim the noise</p> <p>Change the beds</p> <p>Give patients menus to</p>	<p>Unfortunately we are unable to close our doors overnight as we are an assessment unit so have continuous activity throughout the night. Nursing staff need to be able to see into rooms at all times to ensure patient safety.</p> <p>We use Huntleigh beds which are used Trust wide, so cannot change these at present.</p> <p>Due to the high turnover of patients</p>

	<p>Appointments outside school time</p>	<p>in Health Centres and Clinics. In some venues there is never a receptionist present, this is beyond our control though has been flagged up on numerous occasions. Ensure notices instructing people what to do/where they should wait when they have arrived for an SLT appointment.</p> <p>At first clinic appointment of block SLT/SLTA advises parent/carer on where to wait etc at next attendance. Have specific appointment templates for each clinic with instructions for what to do/where to wait on arrival.</p> <p>In clinics where there are receptionists ensure they know SLT is running a clinic and that they inform SLT when patients arrive.</p> <p>Only a limited number of after school appointments are available and are kept for older children/teenagers to minimise the possibility of them missing time at school</p> <p>Some staff have been able to be more flexible in their working hours so have been able to offer some appointments at 8.30/8.45am</p> <p>Explain to parents why it's counter-productive to see young children later in the day.</p> <p>Continue to share targets with schools and where there is a need to offer a school visit/review.</p>
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Assurance Matrons monitor progress, providing support when necessary, to ensure improvements are made.

8 National Inpatient Survey

The NHS adult inpatient survey is currently underway.

The survey is based on the responses of patients who have been inpatients during July. The sample of 1250 patients has been taken by the Trust's Information Dept. and sent to Picker which is the company that the Trust has commissioned to conduct the survey on its behalf. Picker will post the survey out, analyse returns, provide a report to the Trust and forward required information to the Coordination Centre at the Care Quality Commission in accordance with the national guidance. The final report will be available with national comparisons in February 2016.

The questionnaire is used by all Trusts and consists of 82 questions prefixed by an explanation of the survey and instructions for completion. Reminders will be sent to non-respondents following a check by Picker with the Trust Information Dept. to de-select deceased patients.

Posters were displayed in the inpatient areas of South Tyneside District Hospital during July, notifying patients of the survey and the opportunity to opt out. Patients may decline to take part in the survey at any point. Picker will provide a 'helpline' for patients who need help to complete it or have queries about the survey.

Any calls concerning Trust services will be forwarded by Picker to the Trust Customer Services Team.

9 Recommendation

That the following are noted:

- 9.1** The continued implementation of the Friends and Family Test according to national guidelines
- 9.2** The Friends and Family Test Plus results as the baseline measure of patient experience in South Tyneside NHS Foundation Trust
- 9.3** The additional use of Real Time Feedback reports as an additional methodology to supplement the patient experience
- 9.4** Actions planned as a result of patient feedback
- 9.5** The implementation of the NHS adult patient survey 2015

Maureen Dale, Service Lead, CAPI
25 November 2015