

**BOARD OF DIRECTORS
21st DECEMBER 2017**

**INVOLVEMENT, EXPERIENCE AND VOLUNTEERING
PATIENT VOICE REPORT**

**LOCAL PARTNERSHIPS – GENERAL HEALTHCARE, SOUTH
NOTTINGHAMSHIRE**

1. PURPOSE

This is the monthly Patient Voice report produced for the Board of Directors. The main purposes of this report are to:

Inform the Board of Directors of our headline patient experience indicators for the Trust as a whole, for each division and for a specific service.

- To summarise the full breadth of feedback received from service users, carers and staff over the previous year about the specific service featured and any plans to address the main issues raised.
- To update the Board of Directors on the action taken to address the main issues raised about the service featured in the Patient Voice report three months previously.

The report is part of our approach to Service User and Carer Experience which is a key part of the Involvement, Experience and Volunteering strategy (2015 – 2018). One of our three involvement aims is to change services by listening and responding to service user and carer views and aspirations.

Our approach is also based on the Trust's values and aligned to Department of Health priorities. As an NHS funded service we are required to carry out the Friends and Family Test. We must also meet the CQC Standard that requires us to seek and act on feedback so we can continually evaluate services and drive improvement.

As part of the Trust's development of its approach and the Francis Report we are continually looking at how we can improve both how we listen and respond to the patient voice. Our [feedback website](#) enables the public to leave and view feedback and also able see the changes we have made in response to feedback. The website also enables staff to view feedback about their team.

As part of our approach the Board of Directors receives an annual Involvement, Experience and Volunteering Report which looks at key achievements in the Involvement, Experience and Volunteering strategy and outlines our strategic direction and next steps. This Patient Voice Report is a monthly report and focuses on key patient stories and comments raised by service users, patients and carers.

2. EXECUTIVE SUMMARY

The Trust's Service Quality Rating for August to October is **94%**. Our Friends and Family Test Score is **95%** (this is the percentage of people who would be extremely likely or likely to recommend our services if their friends or family needed similar care or treatment).

This month's Patient Voice Report focuses on **Local Partnerships (General Healthcare) – South Nottinghamshire**, with headline information provided for the Trust as a whole, and for each division. The report also provides an update on **Local Partnerships (General Healthcare) – Bassetlaw and Mid-Nottinghamshire** (featured in September's report).

The report highlights all prominent and/or recurring feedback in the last year from the full range of feedback mechanisms used by **General Healthcare South Nottinghamshire**, including those targeted at carers and families. The report then summarises the main issues identified and action taken or proposed to address these issues.

The main issues identified are:

It also updates on the issues presented in the Patient Voices report submitted to Board three months previously, featuring on **Local Partnerships (General Healthcare) – Bassetlaw and Mid-Nottinghamshire**, in September 2017. These were:

3. SERVICE IN FOCUS: LOCAL PARTNERSHIPS (GENERAL HEALTHCARE) – SOUTH NOTTINGHAMSHIRE

The South Nottinghamshire Adult Services Directorate serves a population of approximately 260,000 people across three sub localities within the recently established Greater Nottingham footprint. We employ in excess of 400 staff across a diverse range of community based services including Community Nursing, Community Matrons, Specialist Nurses, Intermediate Care, End of Life Care, Stroke Rehabilitation as well as Inpatient Rehabilitation Services at Lings Bar Hospital and The Grand.

3.1 MAIN ISSUES IDENTIFIED IN THE PREVIOUS PATIENT VOICES REPORT WITH A FOCUS ON LOCAL PARTNERSHIPS (GENERAL HEALTHCARE) – SOUTH NOTTINGHAMSHIRE (DECEMBER 2016)

Below we update on the main issues identified (and the actions proposed in response) in the previous report which focussed on General Healthcare South Nottinghamshire, which was presented at the Board of Directors in December 2016:

The two of the issues highlighted in the previous Patient Voices report which on General Healthcare South Nottinghamshire in December 2016 have continued to be raised as issues by patients in the intervening time. These issues, waiting times and staffing levels, are represented in table 4.0 with associated actions as reported in December 2016 and with current updates.

ISSUE	DETAIL	ACTION TAKEN/PROPOSED	UPDATE – DECEMBER 2017
Home visit impact on privacy and dignity for patients with life limiting conditions	Patients with life limiting conditions receiving home visits from community nurses reported an adverse impact on their privacy and dignity due to these visits. They reported feeling uncomfortable with their neighbours and friends being able to see nurses regularly visiting their home indicating that they were living with a serious medical condition.	The community nursing team in Nottinghamshire North and East (NNE) Locality One established Supportive Clinics based at the health centre for patients and their carers as an alternative to home visits. Patient satisfaction with the clinic has been evidenced through the Trust Feedback Survey and appointment attendance compliance. Added value has been the support provided to patients and carers within the clinic by our MacMillan nurses and the gains of a clinic setting eliminating travel time for community nurses. The Supportive Clinic is planned for roll out across other localities into 2017.	Supportive Clinics have been established across the locality in response to patient concerns received in relation to privacy and dignity issues. Impact is monitored via existing patient experience routes. Plans are also in place to formally evaluate this initiative in Q1 18/19.
Continence product requesting patient experience	In April 2016 our services took over the contract for managing product prescribing for patients suffering with continence issues. To re-order products patients telephone to place an order. High demand led to long telephone waits and poor experience.	The continence prescribing service reviewed the telephony solution, added additional administrative capacity and most significantly changed the length of prescription time from 28 to 56 days, reducing the frequency patients needed to make re-orders and reducing the call demand.	We continue to monitor the impact of the recently implemented service improvement initiatives within this service and can report that no further concerns have been reported .
Short Stay Rehabilitation Unit visiting times impact on family/carer experience	Our Short Stay Reablement Unit (SSRU) for older person's rehabilitation following hospital stay is delivered within a care home. We contract Age UK to support discharges and provide patient advocacy. Age UK highlighted the impact of the visiting times set by the care home on families and carers wanting to spend time with their loved ones.	Our management team met with the care home to discuss the issue and agreed on extended visiting times for afternoons and evenings 7 days per week. Our clinical staff now support accompanying visitors from the entrance through the residential patient area when reception cover not in place. This has led to added benefits of further developing relationships between our therapists and families and greater involvement of families within patient's rehabilitation programmes.	Recent management changes within the SSRU and support from Age UK have resolved this issue.

Pulmonary Rehabilitation programme waiting times	Our Pulmonary Rehabilitation programmes are accessed by patients with respiratory long term conditions and following assessment provide eight weekly exercise and education sessions. High referral demand had led to increased waiting times to access the programmes with waits in excess of 13 weeks in some localities.	Review of pulmonary rehabilitation programme models in other regions led to a revised service offer, moving from a cohort to rolling programme so patients can be added to a programme as soon as a place becomes available, and making use of digital technologies such as RECAP (the online patient information and self-care app) to develop self-care and online education where appropriate.	We have established a rolling eight week pulmonary rehabilitation programme within Nottingham North and East (NNE) and are achieving wait times of less than eight weeks.
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3.2 DIRECTORATE HEADLINES

Data collected from the Service User Feedback survey and Care Opinion:

	[Current rolling quarter 1 st Sep 2017 – 30 th Nov 2017]	[Previous rolling quarter 1 st June 2017 – 31 st Aug 2017]
Service Quality Score	94%	95%
Friends and Family Test (FFT)	97%	98%
SUCE survey returns	864	972
'Service made a positive difference' score	92%	92%
Care Opinion postings	5	3

3.3 DIRECTORATE MAIN ISSUES AND 'BEST THING'

Data collected from the Service User Feedback survey:

	Current rolling year (December 2016 – November 2017)	Emerging issues for the current quarter (September – November 2017)
ISSUES (based on 1544 responses to the 'What could we do better' question)		
Appointments (Category: Care/ Treatment) Comments focus on Phlebotomy, Carlton, Coronary Heart Disease Clinic and Community Nursing Stapleford. They mostly relate to not providing accurate appointment times, and wider range of appointment availability. <ul style="list-style-type: none"> 'Timed visits would be nice.' (Locality 2 Arnold & Calverton). 	14%	There are no emerging issues.
Staffing Levels (Category: Staff/Staff Attitude) Most issues relate to Forest Ward, Lings Bar Hospital. They all relate to there not being enough staff available. <ul style="list-style-type: none"> 'Employ a few more staff as the present staff seem very stretched at times but coped admirably 	12%	

<i>(Forest Ward, Lings Bar Hospital).</i>		
Parking/Transport (Category: Environment/Facilities) The highest number of issues relate to Phlebotomy, Carlton. All relate to a need for better/more parking. <ul style="list-style-type: none"> • <i>'Provide better parking facilities.'</i> (Phlebotomy, Carlton). 	9%	
General (Category: Communication) The highest number of comments relate to Phlebotomy, Carlton. A wide range of Communication issues are mentioned. <ul style="list-style-type: none"> • <i>'Clearer notification when called for blood test or number shown on screen would be a help to those hard of hearing.'</i> (Phlebotomy, Carlton). 	8%	
Time Staff spend with Service Users (Category: Staff/Staff Attitude) Comments focus around Locality 2 Arnold and Calverton, and Community Nursing, Stapleford. They relate to both frequency of contact and length of contact with service user. <ul style="list-style-type: none"> • <i>'Given more time to do the job.'</i> (Community Nursing, Stapleford). 	7%	
COMPLIMENTS (based on 2223 responses to 'What did we do well' question)		
General (Category: Service Quality/Outcomes)	29%	General (Care/Treatment); 16% in the last year, 20% in the last quarter.
General (Category: Care/Treatment)	16%	
Helpful/Caring/Friendly (Category: Staff/Staff Attitude)	13%	

3.4 CARE OPINION

In the last year there were three stories have been published on Care Opinion commenting on General Healthcare South Nottinghamshire:

	December 2016- November 2017	December 2015-November 2016
Number of postings	14	13
Number of postings without a response	0	0
Number of postings responded to within two working days	10	12
Number of postings rated as moderately critical or above	0	0
Number of postings which lead to a change in service	0	0

There were no stories in the last year that were rated moderately critical or above:

In the last year, no stories led to changes.

3.5 SUMMARY OF FEEDBACK CRITICALITY VIA FEEDBACK SURVEY (December 2016 – November 2017)

In the last year, General Healthcare South Nottinghamshire received 5708 completed surveys, with many providing free text comments. These comments are coded for criticality, ranging from +3 (highly critical) to -3 (highly complimentary).

Highly Critical	Fairly Critical	Mildly critical	Mildly complimentary	Fairly complimentary	Highly complimentary
0	1533	60	19	2269	1

As means of identifying whether there are a) services receiving particularly high volumes of highly critical feedback, or b) recurring themes within the most critical feedback received by the directorate, we analyse the feedback received via the survey which is deemed highly critical. However, there were no highly critical comments received during the last year.

3.6 COMPLAINTS

Between December 2016 and November 2017, services within General Healthcare South Nottinghamshire have been the subject of 8 complaints compared with 8 complaints in the previous 12 month period. The number by service is shown below:

Service	Total Dec 2016- Nov 2017	Total Dec 2015 – Nov 2016
Nottingham North and East	5	1
Nottingham West	2	4
Rushcliffe	1	3

Of these eight complaints six were about Adult Nursing, one about administration and one about adult rehabilitation. The themes of the complaints are outlined below:

Theme	Total Dec 2016- Nov 2017
Nursing care (non-inpatient)	6
Confidentiality	1
Discharge from hospital arrangements	1

An example of the types of complaints received is given below:

Complaint 15348 – Nottingham North and East – Adult Nursing.

Deceased patients daughter complained about the care their parent received at End of Life (EoL) by the Community Nursing Team.

The complainant raised a number of issues around staff attitude, medical care and communication with the complainant as a carer. Learning points were identified around a coordinated approach to EoL care and communication.

Outcomes:

The following table shows the outcome of complaints closed during the period November 2016 – October 2017

Outcome	Total Dec 2016- Nov 2017
Not upheld	5
Upheld in part	1
Ongoing	2

Learning/Actions:

The following are some examples of actions taken during the period December 2016 – November 2017

- Role of Community Matron not always clearly understood by patients and families/carers - Review of patient information leaflet regarding the role of the community matron which clearly outlines the changing nature of the role, sets expectations and ensures patients understand the predicted date of discharge for the patient.
- Correct dressings supplies for patients - Review of internal processes within locality 2 nursing team for the allocation of dressings for home visits and establishment of more robust processes.
- Ensure that Reception Staff are reminded of confidentiality - Ensure that the reception staff are reminded of confidentiality as a key component of their role.
- Poor coordination of communication. Better communication and a coordinated approach to end of life care is needed between the clinicians, patient and family - District Nurse to ensure end of life care is fully coordinated across the service through: Discussion at team handover's, Identification of patients, GP EOL meetings and MDT meetings.
- Carer perception of lack of care and compassion from the Community Nursing Team. Nursing staff to understand how carer perceptions of care are formed from behaviours and attitudes. District Nurse to ensure that staff always behave in a professional and compassionate manner to patients and their carers. This to be evidenced through documentation and patient/carers feedback.

Informal Complaints

There were 33 informal complaints received.

The number by service is shown below:

Service	Total Dec 2016- Nov 2017
Nottingham North and East	14
Nottingham West	8
Rushcliffe	11

The themes of the informal complaints are outlined below:

Theme	Total Dec 2016- Nov 2017
Nursing care (non-inpatient)	4
Access to appointments	4
Staff attitude – nursing	3
Appointment Arrangements	3
Information to/Communication with carer/relatives	3

3.7 LOCAL MECHANISMS FOR FEEDBACK

The Directorate's approach to capturing service user and carer feedback includes SUCE, Patient Opinion and direct complaints and compliments. Clinic services have also recently trialled the use of tablets to gain feedback from patients attending outpatient services. Gaining and learning from patient feedback is prioritised by the Directorate – patient experience is a standing agenda item on the Directorate's management meeting and the Divisional General Manager meets regularly with the Patient Experience Manager to review our approach.

4. MAIN ISSUES FOR THE SERVICE AND ACTION TAKEN OR PLANNED

In the table below, we highlight the most prominent issues (selected from the range of feedback presented) raised by service users and their carers' and families over the last 12 months, and the actions taken or proposed to address these issues:

ISSUE	DETAIL	ACTION TAKEN/PROPOSED
<p>Waiting time for an appointment (particularly CHD Clinic and Phlebotomy, Carlton, people also mentioned they wanted earlier/later appointments)</p>	<p>Recent commissioning decisions in relation to phlebotomy services has as a consequence led to a steady increase in waiting times in certain clinics. Waiting times are closely monitored via existing contract monitoring routes</p> <p>Patients are allocated time slots for clinics and community patients are seen between the hours of 08:00 -20:00pm.</p>	<p>Current performance and concerns re waits have been escalated to the CCG (Clinical Commissioning Group) via existing contract monitoring routes.</p>
<p>Staffing Levels (mainly Lings Bar Hospital and the Short Stay Rehabilitation Unit) and Time staff spend with patients (mainly Community Nursing)</p>	<p>Nurse recruitment at Lings Bar Hospital (LBH) and Short Stay Rehabilitation Unit (SSRU) continues to be challenging and mirrors both local and national context. Work is currently ongoing to bolster nursing resources within the nurse bank and in the development of a recruitment strategy to maximise recruitment opportunities and uptake</p>	<p>We commenced the next phase of the division wide implementation of Meridian project across the south of the county on the 1st December 2017 whereby engagement and buy in sessions are currently being facilitated with senior managers in order for them to gain a greater understanding of the approach and underpinning methodology that will deliver improvements and our overall understanding of capacity and demand for care.</p>
<p>Parking (mainly Phlebotomy, Carlton)</p>	<p>There is limited parking at Park House. All staff are aware they are only to park at base when collecting equipment/stock. Staff are encouraged to park off site.</p>	<p>This is monitored and closely managed by the Health Centre Management Team.</p>
<p>Set times for nurse visits (mainly community nursing)</p>	<p>Wherever possible the community teams will see patients that have requested a specific time to visit due to day hospice, hospital appointments etc. We try to accommodate patients with their requests but this is not always possible.</p>	<p>The community nursing teams try to accommodate specific requests regarding timing of visits wherever possible, however, this is not always possible due to competing priorities and urgent requests. The team ensure that patients are advised accordingly.</p>

5. MAIN COMPLIMENTS

Below are some of the comments from the feedback survey in response to the question 'What did we do well?' about General Healthcare South Nottinghamshire:

5.1 A SAMPLE OF COMPLIMENTS FROM THE SERVICE USER AND CARER EXPERIENCE (SUCE) SURVEY:

Service is excellent. Enabled wife to be able to continue in full time appointment. Thank you!!! Provided a joined up service with all medical services - GP, Heart nurse, supplies of (??) etc. Friendly, professional, wonderful. (Locality 2 Arnold & Calverton)

Everything really well. I look forward to your visits and you make me proud of our NHS. Thank you Kelly all your nurses are wonderful. (Locality 2 Arnold & Calverton)

Nice nurses. Friendly. Show respect. (Locality 1 Hucknall & Eastwood)

I have had the most fantastic care, I have been treated like a king. (Locality 2 Arnold & Calverton)

Always polite, friendly and welcoming. Never feel rushed. Always chat and put you at ease. (Phlebotomy, Carlton)

Everything is perfect. Finding my high blood pressure and low pulse, also finding my enema. Thank you. The nurses are angels. I have never had such good care. (Locality 3 Carlton)
it seem like a miracle we cannot believe how well he's done (Community Nursing, Eastwood)

Helped to prevent me from going into hospital very kind and a great listener and a real god send (Community Nursing, Beeston)

Being really caring, keeping appointments, nothing too much trouble (Community Nursing, Stapleford)

My treatment was explained fully and the physio and i discussed the next treatment and its expected results it was all explained fully and my comments taken into account (Intermediate Care (At Home))

Everything kindness understanding helpfulness i cannot thank them enough (Community Stroke Team)

Everything - Jackie, Helen and Norman, feel like family, it's like being in a five-star hotel! (Community Nursing, North)

Communication and keeping in touch. Escalating problems to DN or GP. Care and compassion to the patient and family. Respecting our wishes. An excellent service from all the team - thank you. (Community Matrons, South)

Everything you have done has got my mother to the best health she has been in 2 years. We cannot thank you enough. You have added time onto her life. Thank you (John Proctor Ward, Lings Bar Hospital)

Thank you so much for all your help, support and swift action over the last 2 weeks during my mother's rapid decline. Had it not been for such a comprehensive team effort, we would not have been able to keep my mother at home. As it was, with your help and the amazing support of the Hospice at Home team, she was comfortable in her own bed and able to see all her grandchildren up until the morning before she passed away. It was also lovely for all of us that you knew my grandparents. Please can you pass on our thanks to all your colleagues. (Community Nursing, South)

All of the team: Claire, Gemma, Karen and Helen were so professional, caring and informative - a true credit to their profession. (COPD Team)

It was a total delight to be in the company of these professionals who provided every patient with devoted care throughout. It was an outstanding demonstration of the NHS at its very best. Thank you (Castle Ward, Lings Bar Hospital)

Take away my fear of words "heart failure", provide information on heart problems, contact me at home, then clinic and reassure me I could ring a nurse any time if needed, treated with care and respect. All team members helpful and supportive. Thank you all so very much. (Heart Failure Team)

5.2 A SAMPLE OF COMPLIMENTS FROM CARE OPINION:

Immediately after my discharge from hospital, the County Community Stroke Team made contact and arrangements for my tailor-made, follow-up care to be carried out in my home. This provision for continuity between the hospital and the home is brilliant and works so well. I not only had the advice and skills of professional staff in my home, I had their wonderful help in sustaining a positive attitude towards my recovery. The therapists went to length to explain what was happening to me and were central in restoring my confidence as well as my limbs and speech. In a word, they were inspiring. This system of aftercare in the community is so sensible, so well planned and carried out. It all works and has all my gratitude and respect. (Community Stroke Team)

5.3 A SAMPLE OF COMPLIMENTS FROM RECEIVED VIA OTHER FEEDBACK E.G.THANK YOU CARDS:

Community Stroke Service – Early Supported Discharge Team:

'I'm absolutely over the moon with the love, care and professional approach of the team getting me on the road to be xxx again'

6. UPDATE ON MAIN ISSUES PRESENTED IN THE PATIENT VOICES REPORT THREE MONTHS PREVIOUSLY

Below we update on any developments in relation to the main issues presented in the September 2017 report, featuring **Local Partnerships (General Healthcare) – Bassetlaw and Mid-Nottinghamshire**

ISSUE	DETAIL	ACTION TAKEN/PROPOSED	UPDATE - DECEMBER 2017
<p>Patients would like to receive their dressings faster – Community Nursing Mansfield</p> <p>(Source: Feedback Survey)</p>	<p>When community nurses require script for wound care products to enable the dressing care to be delivered we currently order the FP10 from the GP practices or our prescribers leave the script with our service users to obtain. Once the script is delivered to the pharmacy we are finding that they have to order the dressings from the suppliers as they are no longer keeping stock of the wound care products on our formulary, therefore there is a delay in delivery time.</p>	<ul style="list-style-type: none"> We are working with the Clinical Commissioning Group to monitor the trends within the pharmacies across the locality and work with them to obtain future solutions. We are also considering direct supply of dressings which will reduce the need for FP10 and the delay in this process. 	<p>Early discussions between the Senior Management Team and an external woundcare company have identified a potential opportunity to improve provision of woundcare products to patients ensuring that the right product is selected at the right time for the right patient. A subsequent internal meeting has been scheduled for the 18th December 2017 with the Trust's IT, Pharmacy and Procurement Leads to discuss further and gauge feasibility of this proposal.</p>
<p>Communication with service users – Integrated Care Teams in Newark and Sherwood</p> <p>(Source: Feedback Survey)</p>	<p>Changes to appointments not being communicated</p>	<ul style="list-style-type: none"> Deferred visits are monitored to look into trends behind the issue. The use of the Meridian demand and capacity tool is supporting more efficient planning of visits Reminder to all staff that when it is necessary to change a visit to telephone the patient/carer to discuss this with the patient before the visit/appointment is moved and ensure documented in clinical records Specific timings of visits are not always possible as the teams also need to respond to urgent on the day calls and prioritise visits accordingly, however staff 	<ul style="list-style-type: none"> The Adult Community Based Teams continue to embed the Meridian methodology within practice and in enabling us to quantify a 'fair days work'. Detailed analysis is ongoing to monitor the number of deferred visits recorded and in understanding emergent themes and trends as to why visits are deferred. Systems and processes have been strengthened to advise patients where we are for legitimate reasons unable to visit at the pre-

		have been reminded to contact the patient/carer to advise them if the visit is likely to be much later than usual	arranged time.
<p>Continuity of staff/ time spent with service user - Integrated Care Teams in Newark and Sherwood</p> <p>(Source: Feedback Survey)</p>	No continuity of staff performing visits and also the length of time of visits sometimes appeared rushed	<ul style="list-style-type: none"> The teams are using the Meridian tool and the workforce model of the teams is being adjusted to ensure we have the right skills in the right place and in sufficient numbers to deliver high quality patient care. the Mid Nottinghamshire capacity and demand workstream and the Meridian tool has assisted in identified average length of time for individual clinical procedures take to enable safe allocation and enable enough staffing capacity to be allocated to the demand intervention. In addition, the Mid Nottinghamshire capacity and demand workstream is helping us to understand overall demand at team level on a weekly basis and to enable us to plan our staff capacity to this demand – this is helping us to identify safe staffing level requirements. As Newark is such a large team the District Nursing teams have been split into three and are now doing geographical working to improve continuity of patient care. 	<ul style="list-style-type: none"> The Adult Community Based Teams continue to embed the Meridian Methodology across respective services and is enabling us to gain a greater understanding of capacity and demand across service lines and in agreeing what constitutes a fair days work.
<p>Patients would like more visits – Bassetlaw</p> <p>(Source: Feedback Survey)</p>	This relates mainly to Macmillan nurses, Neuro/Stroke Service	<ul style="list-style-type: none"> The Specialist Palliative Care Nurses agree with the patient and carers the next visit and all Patients have direct numbers to contact the nurses. The Neurological Nurses agree with the patient when the next visit will be and have contact numbers for support. The commissioners are reviewing the Epilepsy Service. 	<ul style="list-style-type: none"> Specialist Nurses have been advised to agree the frequency of visits to patients on respective caseloads on a case by case basis and in the importance of reinforcing telephone contact details should concerns arise between planned visits.

<p>Patients would like to know changes to times and be told when someone is coming – Bassetlaw</p> <p>(Source: Feedback Survey)</p>	<p>This relates mainly to the Adult Integrated Services (North West/North East)</p>	<ul style="list-style-type: none"> Ward Coordinators have been appointed and will contact patients if there are changes to times of visits 	<ul style="list-style-type: none"> Ward Coordinators have been appointed and will contact patients if there are changes to times of visits
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7. TRUSTWIDE AND DIVISIONAL HEADLINES

7.1 TRUSTWIDE AND DIVISIONAL SERVICE USER AND CARER EXPERIENCE (SUCE) HEADLINES

Statistics provided for the current rolling quarter, September - November 2017, and the previous rolling quarter (June -August - 2017) in brackets for comparison:

	TRUSTWIDE	FORENSIC SERVICES	LOCAL PARTNERSHIPS - MENTAL HEALTH	LOCAL PARTNERSHIPS -GENERAL HEALTH
SERVICE QUALITY SCORE	94% (95%)	77% (81%)	95% (95%)	96% (96%)
FRIENDS AND FAMILY TEST (FFT)	95% (96%)	69% (76%)	93% (94%)	98% (98%)
'SERVICE MADE A POSITIVE DIFFERENCE' SCORE	92% (93%)	76% (80%)	90% (90%)	94% (94%)
SUCE SURVEY RETURNS	4399 (5923)	285 (364)	1449 (1830)	2665 (3729)
CARE STORIES OPINION	232 (230)	54(73)	20(17)	151 (123)

7.2 CARE OPINION HEADLINES

Data collected from Care Opinion website (www.careopinion.org.uk):

NOVEMBER 2017	TRUSTWIDE	FORENSIC SERVICES	LOCAL PARTNERSHIPS – MENTAL HEALTH	LOCAL PARTNERSHIPS – GENERAL
Number of postings	88	21	7	58
Number of postings without a response	0	0	0	0
Number of postings rated as moderately critical or above	1	1	4	0
Number of postings with changes made	1	1	0	0

In the last month, two stories were rated as moderately critical or above:

Concerns about the Stonebridge Centre <https://www.careopinion.org.uk/opinions/427518>

Recently I've had some worrying encounters with the psychiatrists there and was advised to speak to the PALS team, I did this and was told the PALS team would call me back but they have not done so. Continuity in my care is non existent, it seems as if psychiatrists just come and go. Some of them tell me about their own mental health issues. How can I get my treatment back on track?

An offer of contact with the service was provided. No update has been provided online.

"Accessing support via Mansfield CMHT <https://www.careopinion.org.uk/opinions/441149>

The GP saw my sister at home due to her poor mental health condition, GP made an urgent referral to Mansfield CMHT requesting urgent support as she was close to crisis This was discussed at panel and cancelled without notifying my sister! Subsequently she is a month down the line, much worse and now unable to function. No one has contacted her. If something happens to her, there will be a case review

and 'lessons will be learned' but this is unacceptable My sister is being let down greatly. There is very little support available

An offer of contact from the service was made. No update has been provided online.

In the last month, one stories indicated that a change had been made.

I'm Happy with my Care" Emerald Ward - National High Secure Healthcare Service for Women.
Rampton Hospital

The posting was about the service user's general satisfaction with care and a request for more staff:

'I would like there to be more staff so they can do more activity with us and be able to support us better'.

Change Made:

There was a full response provided to patient.

Quote from response:

*I am delighted to inform you that patients are on all the recruitment interview panels within the service. this week. **Annette Magore – Modern Matron***

Full Story

<https://www.careopinion.org.uk/opinions/440365>

7.3 TRUSTWIDE AND DIVISIONAL MAIN ISSUES

Data collected from the Service User and Carer Experience (SUCE) survey:

	Current rolling year (December 2016 – November 2017)	Current rolling quarter (September 2017 – November 2017)
TRUSTWIDE (based on responses to the 'What could we do better' question)		
Availability of Services (Category: Access to services)	14%	10%
Approach to Care (Category: Care/Treatment)	8%	9%
General (Category: Communication)	6%	8%
FORENSIC SERVICES (based on responses to the 'What could we do better' question)		
Staffing Levels (Category: Staff/Staff Attitude)	10%	8%
Approach to Care (Category: Care/Treatment)	9%	9%
Waiting time (Category: Access to Services)	8%	8%
LOCAL PARTNERSHIPS – MENTAL HEALTH (based on responses to the 'What could we do better' question)		
Approach to Care (Category: Care/Treatment)	16%	17%
Availability of Services (Category: Access to services)	13%	13%
Waiting time (Category: Access to services)	6%	7%
LOCAL PARTNERSHIPS – GENERAL HEALTH (based on responses to the 'What could we do better' question)		
Availability of Services (Category: Access to services)	21%	11%
General (Category: Communication)	9%	12%
Appointments (Category: Care/ Treatment)	9%	14%

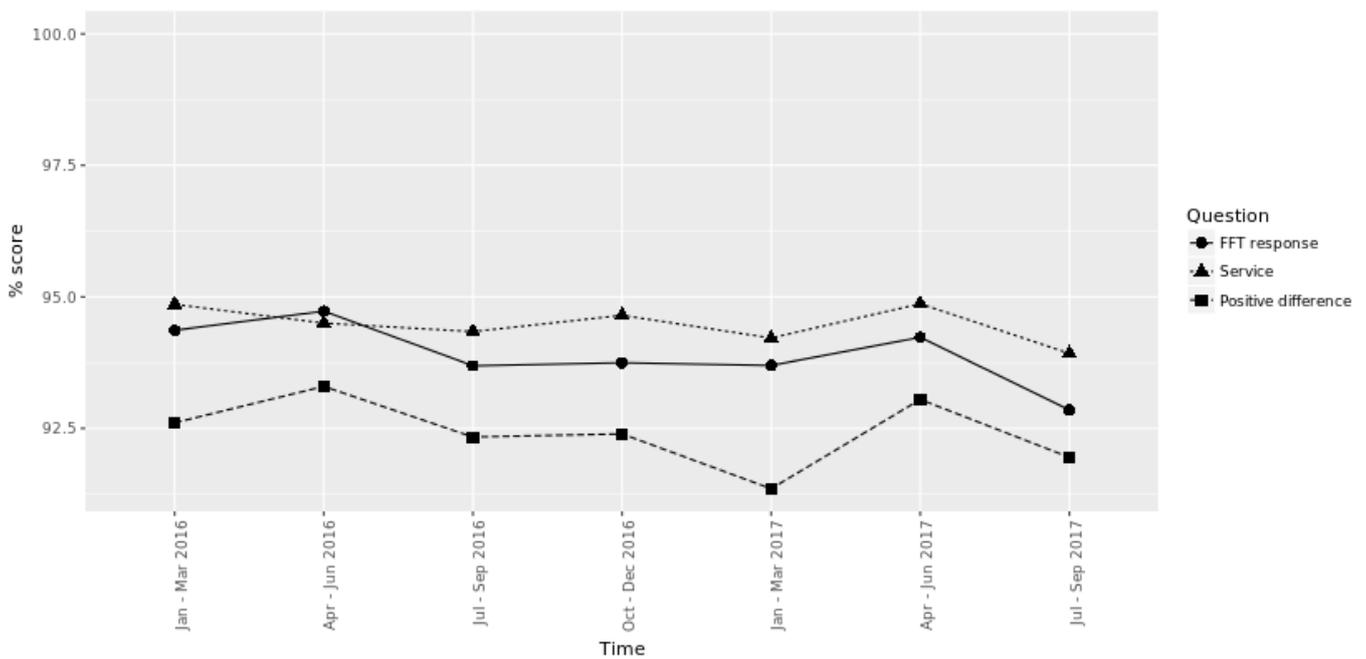
7.4 TRUSTWIDE AND DIVISIONAL MAIN COMPLIMENTS

Data collected from the Service User and Carer Experience (SUCE) survey:

	Current rolling year (November 2016 – October 2017)	Emerging issues (August - October 2017)
TRUSTWIDE (based on 13161 responses to 'What did we do well' question)		
General (Category: Service Quality/Outcomes)	17%	No emerging compliments
Helpful/friendly/caring (Category: Staff/Staff attitude)	14%	
General (category: Care/treatment)	10%	
FORENSIC SERVICES (based on 890 responses to 'What did we do well' question)		
Being listened to (Category: Communication)	15%	No emerging compliments
Quality of Care/Service (Category: Service Quality/Outcomes)	15%	
Helpful/friendly/caring (Category: Staff/Staff attitude)	8%	
LOCAL PARTNERSHIPS – MENTAL HEALTH (based on 3199 responses to 'What did we do well' question)		
Quality of Care/Service (Category: Service Quality/Outcomes)	18%	No emerging compliments
Helpful/friendly/caring (Category: Staff/Staff attitude)	14%	
General (Category: Care/Treatment)	8%	
LOCAL PARTNERSHIPS – GENERAL HEALTH (based on 9066 responses to 'What did we do well' question)		
General (Category: Service Quality/Outcomes)	25%	No emerging compliments
Helpful/friendly/caring (Category: Staff/Staff attitude)	14%	
General (category: Care/treatment)	11%	

7.5 TRUSTWIDE AND DIVISIONAL TREND IN SERVICE QUALITY, FRIENDS AND FAMILY TEST AND KEY QUESTION SCORES

The below graph shows the Trust wide trend in Service Quality Score, Friends and Family Test Score and scores on key questions asked in the Service User and Carer Experience survey.



For divisional trend graphs, please follow the links below:

Local Partnerships - Mental Health: <http://tinyurl.com/y8ajhuqp>

Local Partnerships - General Health: <http://tinyurl.com/ycr682lr>

Forensic Services: <http://tinyurl.com/y9pvghmf>

8. RECOMMENDATION

The Board of Directors are asked to note and comment on the paper.

Paul Sanguinazzi
Head of Involvement and Experience

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