

**BOARD OF DIRECTORS
26 MARCH 2015**

**Nursing, Quality & Patient Experience Directorate
PATIENT VOICE REPORT
Health Partnerships Division:
Short Breaks Unit and
Children's Development Centre (CDC)**

1. INTRODUCTION

This is the monthly Patient Voice report produced for the Board.

This report looks at the following:

- Outlines our approach to listening to the Patient Voice through these monthly reports.
- Illustrates some of the key themes raised in Health Partnerships Division with a focus on the Children's Development Centre and the Short Breaks Service.

2. REPORT SUMMARY

The key highlights of this month's report are:

- The Trust's Service Quality Rating for December 2014 to February 2015 is 92%. Our Friends and Family Test Score is 96% (this is the percentage of people who would be extremely likely or likely to recommend our services if their friends or family need similar care or treatment).

This month's Patient Voice Report is focusing on the Health Partnerships Division with an in-depth look the Children's Development Centre and the Short Breaks Service. It looks at some of the main issues, comments and stories relating to the service as well as work that is being undertaken to improve the service user experience. It also updates on the issues discussed at the December Board Meeting about Salaried Dental Services.

3. BACKGROUND

Our approach to Service User and Carer Experience is based on our involvement approach. 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 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. In addition, the Berwick Report set out four key targets including listening to patients and transparency.

Our feedback website (<http://feedback.nottinghamshirehealthcare.nhs.uk/>) enables the public to leave and view feedback for teams and directorates they are also able see the changes we have made in response to feedback. The website also enables staff to view feedback for their team/s see good practice, resources and training around patient feedback.

As part of our approach the Board receives a quarterly Service User and Carer Experience Report which looks at quality ratings, key themes and actions taken for each Directorate. This Patient Voice Report is a monthly report and focuses on patient stories and comments relating to the key issues raised by service users, patients and carers.

4. APPROACH

The general approach for the monthly report is outlined below.

We will **highlight any big issues that people are raising in each Division and illustrate these with stories and comments that relate to these issues.** We will focus on one Division per month and select a range of issues over the year. We will also look at individual directorates over the course of the year.

We will **highlight any issues that have arisen from any Division in the last month so the Board has early warning of new or concerning issues.**

We will **use a range of methods to present stories and comments.** These may include stories via Patient Opinion, video stories, people telling their stories and comments from surveys / meetings.

The intention is that we use patient stories, comments and other feedback to give the Board **insight and understanding into the issues service users and carers are raising.** We would expect services to resolve specific issues and where possible to let the Board know how they are responding to issues illustrated. Each month **we will review how the Division has responded to the issues raised** when we focused on it three months previously.

5. TRUST WIDE HEADLINES

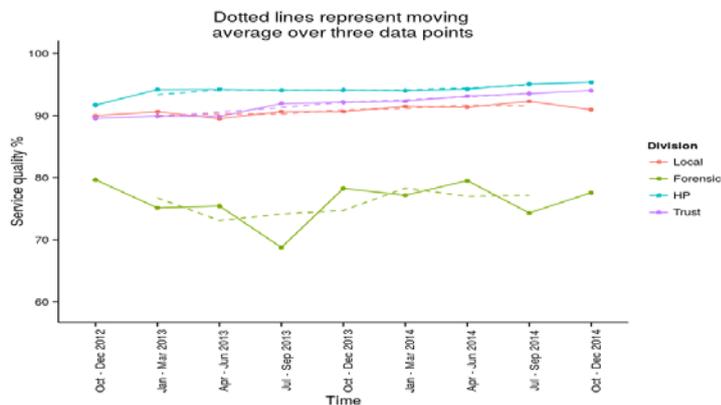
5.1 TRUST SURVEY FEEDBACK

This report summarises data from December 2014 to February 2015, with a comparison with the previous 3 months, from September to November 2014. We received 6680 responses during the above date range, 819 of which were from carers. Below are the headlines for the Trust taken from our feedback website:

	Trust	Local	Forensic	Health Partnerships
	December 2014 to February 2015 (comparing to previous rolling quarter, September to November 2014)			
Service Quality Rating	92% (94%)	90% (92%)	76% (76%)	94% (96%)

Friends and Family Test Score	96% (97%)	94% (96%)	67% (71%)	98% (99%)
Survey returns	6680 (6978)	1382 (1670)	410 (349)	4888 (4959)

5.2 SERVICE QUALITY RATING



At the 95% confidence level, using a normal approximation from a bootstrapped distribution:

The Trust overall score is accurate to within ± 0.3 points.

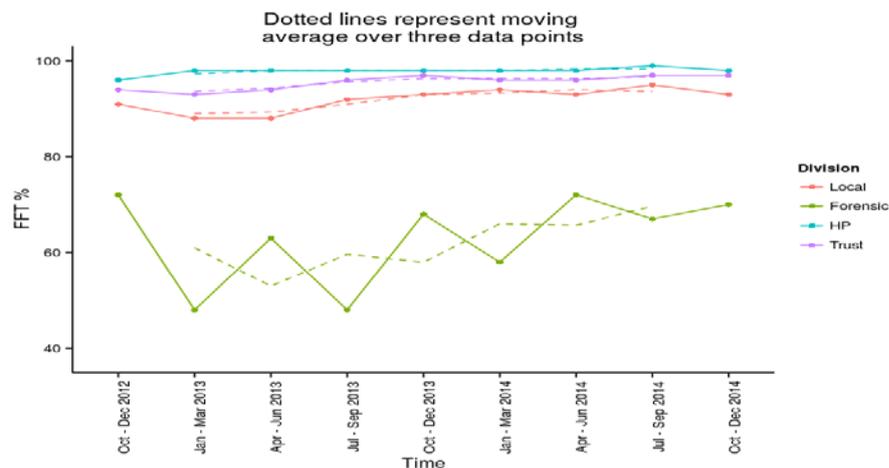
The Local score is accurate to within ± 1.2 points.

The Forensic score is accurate to within ± 2.8 points.

The Health Partnerships score is accurate to within ± 0.3 points.

This means that we can be confident that the ratings for the Trust, Local and Health Partnerships are reasonably accurate. For Forensic Services, there is more uncertainty in the scores. This is because we have had a lower number of responses from this Division and we survey different directorates each quarter. In the quarter (October to December 2014) we surveyed Offender Health, Arnold Lodge and Wathwood and these directorates have, as previously, scored higher than when we surveyed Offender Health, Rampton and Low Secure / Community Forensic Services.

5.3 FRIENDS AND FAMILY TEST SCORE



At the 95% confidence level, using a normal approximation from a bootstrapped distribution:

The Trust overall score is accurate to within ± 1.1 points.
 The Local score is accurate to within ± 2.5 points.
 The Forensic score is accurate to within ± 6.2 points.
 The Health Partnerships score is accurate to within ± 0.6 points.

This means that we can be confident that the ratings for the Trust and Health Partnerships are reasonably accurate. For Local Services and Forensic Services there is uncertainty in the scores.

The Friends and Family Test Score for Forensic Services remain consistently low or negative across the year. This may be due to the question being not as applicable in Forensic Services and people in these services being less likely to put that they are 'extremely likely' to recommend these services. The score also varies each quarter due to the reasons given for the Service Quality Rating above.

5.4 PATIENT OPINION

Below are some of the key headlines from Patient Opinion over the last three months.

	December 2014 to February 2015 Trust-wide (comparing with the previous 3 months)	December 2014 to February 2015 Local (comparing with the previous 3 months)	December 2014 to February 2015 Forensic (comparing with the previous 3 months)	December 2014 to February 2015 Health partnerships (comparing with the previous 3 months)
Number of postings published	315 (266)	50 (52)	17 (16)	234 (210)
% that are rated (by Patient Opinion) as moderately critical or above	1% 4 postings (2%)	6% 3 postings (8%)	0% 0 postings (0%)	0% 1 posting (0%)
% that are rated (by Patient Opinion) as entirely complimentary	88% 277 postings (89%)	70% 35 postings (69%)	71% 12 postings (69%)	94% 220 postings (96%)
% that are have been responded to within 2 working days	76% 239 postings (77%)	60% 30 postings (54%)	71% 12 postings (56%)	78% 182 postings (83%)

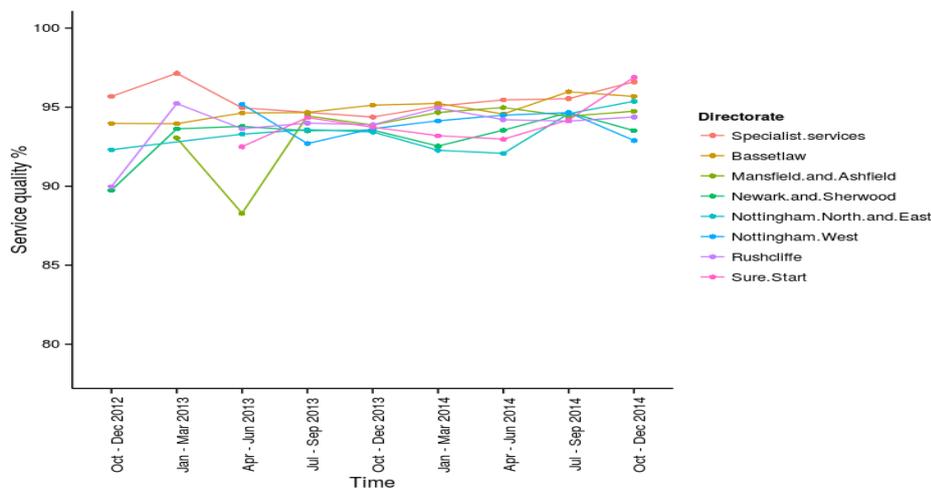
6. HEALTH PARTNERSHIPS DIVISION

This month the focus is on the Health Partnerships Division. We are taking an in-depth look at the views and experiences of patients and carers about the Children's Development Centre and the Short Breaks Service.

The graphs below compare the Health Partnerships Division with the other Divisions and the Trust as a whole. The main issues raised for the Health Partnerships Division from December 2014 - February 2015 and the previous year are also presented

6.1 SERVICE QUALITY RATING

HEALTH PARTNERSHIPS DIVISION



At the 95% confidence level, using a normal approximation from a bootstrapped distribution:

The most recent Bassetlaw overall score is accurate to within ± 0.8

The most recent Mansfield and Ashfield overall score is accurate to within ± 1.2

The most recent Newark and Sherwood overall score is accurate to within plus or minus ± 1.2

The most recent Nottingham North and East overall score is accurate to within ± 1.4

The most recent Nottingham West overall score is accurate to within ± 1.1

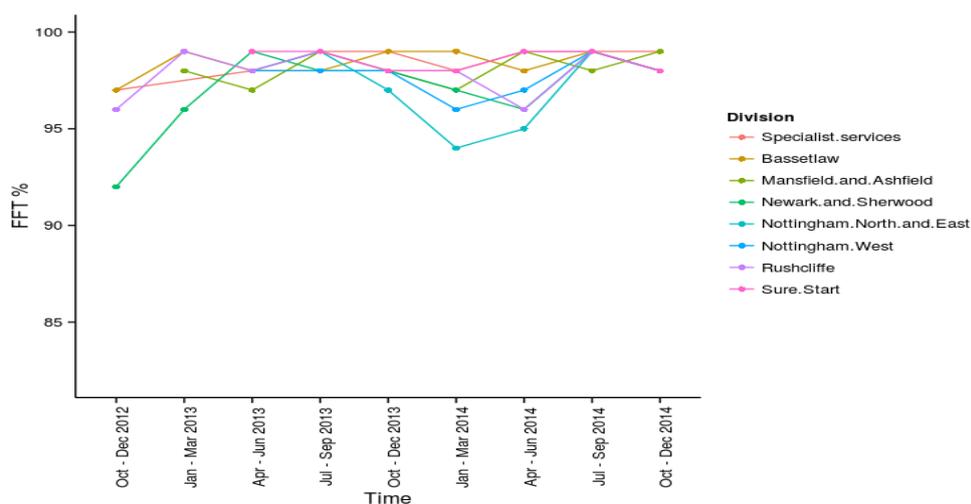
The most recent Rushcliffe overall score is accurate to within ± 1.2

The most recent Specialist services overall score is accurate to within ± 0.5

The most recent Sure Start overall score is accurate to within ± 0.7

This means that we can be confident that the ratings for all the directorates in Health Partnerships are reasonably accurate.

6.2 FRIENDS AND FAMILY TEST DIVISION



At the 95% confidence level, using a normal approximation from a bootstrapped distribution:

- The most recent Bassetlaw overall score is accurate to within ± 1.5
- The most recent Mansfield and Ashfield overall score is accurate to within ± 1.1
- The most recent Newark and Sherwood overall score is accurate to within ± 1.3
- The most recent Nottingham North and East overall score is accurate to within ± 1.6
- The most recent Nottingham West overall score is accurate to within ± 1.7
- The most recent Rushcliffe overall score is accurate to within ± 1.8
- The most recent Specialist services overall score is accurate to within ± 0.6
- The most recent Sure Start overall score is accurate to within ± 1

This means that we can be confident that the ratings for all the directorates in Health Partnerships are reasonably accurate.

6.3 UPDATE FROM THE SALARIED DENTAL SERVICE

In the Patient Voice Report in December 2014 we focused on the Salaried Dental Service and the key issues raised from survey feedback. Below are some developments since that meeting:

Issue raised – December 2014	Response -UPDATE- March 2015
Patient Opinion is not being used by all teams across Salaried Dental Services.	Working with all teams to establish a model set up for Patient Opinion, for all staff to become subscribers and identified staff with admin/responder responsibilities.. Exploring options for feedback to be discussed and collected by someone independent of the clinical staff, e.g. Feedback Champion.
Feedback resources have not been as age appropriate or young people friendly as they could	Trialling use of new children and young people's forms. To develop/pilot

be.	feedback forms using the Somerset Symbols, similar to the easy read appointment letters and post extraction forms already in use.
Feedback resources are not appropriate for people with more complex needs / communication difficulties.	Working with the CDC and special school nursing service to identify feedback mechanisms for people with complex needs.
Waiting rooms have been highlighted as an area for concern: feedback through Patient Opinion indicated the temperatures in the waiting room at the Meadows clinic were extremely hot and uncomfortable to sit in; also the Clifton Clinic was found to be claustrophobic with no windows in the waiting room and no water available.	The Meadows waiting room is having air conditioning fitted by the Health Centre. Clifton waiting room is being monitored by Lift co.
Some people would like to be given appointments more quickly, also same clinic if possible.	Currently the service is under review in terms of staffing so this may bring with it some extra staff to see patients quicker.
A Diaco chair for wheelchair users is available at Park House, but not other clinics. Some service users at other clinics have said that they would like a Diaco chair to be available.	There is a Diaco chair at Mansfield and Park House, suitable for a range of wheelchair users. The Diaco chair is a very specialised piece of equipment which does need a lot of space within a dental surgery and so they cannot be accommodated in all clinics.

7. SHORT BREAKS UNIT and CHILDREN'S DEVELOPMENT CENTRE (CDC)

The Children's Development Centre (CDC), located on the Nottingham City Hospital campus, is a single point of access 'one-stop shop' for children and young people who have health conditions and/or disability. This includes children's community nursing and children's clinics including Occupational Therapy, Physiotherapy, Speech and Language Therapy and Information Service for children and families in the south of the county.

The Short Breaks Unit provides respite for children and young people who have disabilities and complex health needs, and their families.

Some of the services operating from the CDC are provided by partner organisations (e.g. Nottingham University Hospitals). Paediatric Therapy services in the north of the county are provided by the Children's Therapy Unit based at Kings Mill Centre, and will be combined in a future report.

Consequently, this report will focus on the Paediatric Clinics and the Short Breaks Unit based at the CDC.

7.1 HEADLINES

	December 2014 - February 2015	Previous feedback period, September to November 2014
Service Quality Rating	100%	90%
Friends and Family Test Score	100%	97%
Number of Responses	31	73

7.2 MAIN ISSUES RAISED

There are a range of feedback mechanisms that could be used by Short Breaks Unit and CDC to capture feedback, including:

- Survey
- Patient Opinion
- 'You Said, We Did' posters, 'Feedback Tree'
- Service user/carer films
- Children and young people: Communication books, 'likes and dislikes' sheets, observation of behaviour and expression

There can be specific challenges in capturing feedback from this client group, including issues around age/learning-appropriate resources, supporting people with more complex needs / non-verbal communication, consent and relationships with families / other providers.

Below we outline the main issues raised from December 2014-February 2015 from the Trust survey comments and Patient Opinion stories.

The main themes from the "**Improve one thing**" comments from the survey. We received 13 responses to this question in the last 3 months and 95 in the 12 months previous to that (December 2013-November 2014).

Category	% of overall total December 2014 - February 2015	Main issues last 3 months December 2014 - February 2015	Main issues for the previous 12 months December 2013 – November 2014
Environment/Facilities	66%	1. Other 33% 3. Facilities 22% 5. Parking/Transport 11%	5=. Parking/Transport 5% 5=. Other 5%
Care/ Treatment	22%	2. Appointments 22%	2=. Appointments 14%
Access to Services	11%	4. Waiting Times 11%	1. Waiting Times 23% 4. Other 12%
Communication			2=. Other

Below are some of the comments/stories that have been received about the services provided could be improved:

Environment/Facilities

- *A safe environment for tea/coffee/drinks for parents/carers please; Coffee machine*
- *Perhaps a table and chairs that larger/older children could use for art and craft; Have an area for teenagers; More entertainment for children*
- *Better parking!*
- *More control of parking area (cars dumped everywhere)*

Appointments

- *Appointment system needs to improve; Cut waiting time down*
- *If a patient has a pre-booked appointment time, could they take priority in being seen before people who have dropped in.*
- *Shorter lengths between appointments as it can be difficult to get hold of your Paediatrician.*
- *It would be really helpful if a phonecall/text could be made to me if my appointment is going to be running late as previously my husband has had to take time off work to attend our son's appointment that has been arranged for lunch time but previous appointments have run over by 1 and a half hours.*

Waiting Times

- *Whilst we are always successfully on time, the service is usually running late-often up to 30minutes. I assume this is institutional as it is a hospital*
- *Sometimes waiting times are longer than expected. If they can be reduced that would be very useful.*
- *Waiting times in clinic are very long. Sometimes can make waiting for appointments with toddlers very difficult.*

Outlined below are some of the developments that the Directorate is undertaking in response to feedback and issues raised:

Issue Raised	Response
The soft play environment at CDC was old and tired, and the equipment was outdated.	The soft play environment had been created many years ago. It has now been totally refurbished making this a safe and enjoyable environment for children and young people to use, either as part of their therapy, or as a play environment at weekend or when visiting clinic or short breaks.
The therapeutic environment was not completely child/young person friendly.	The building is over 40 years old, and its function has changed over this time. We have now received additional funding to improve the environment for children and young people accessing the CDC. This will enable age appropriate soft furnishings, furniture, wall art, photos and murals to be installed in all of the short break bedrooms, communal and play areas in the centre.
Parents requested information about activities that children and young people had been involved in during their stay in short breaks.	A colourful newsletter with articles and pictures of the activities the children had been involved in during their stay in Short Breaks was produced by the unit, it was well received by parents and carers.

	A similar format will be continued for future newsletters.
New Child/Young Person's survey forms are in use, although not appropriate for people with more complex needs. We need to gain meaningful feedback from Children and young people who have very limited due to their communication abilities.	The Community Assessment Team (CAT) team have done some work using 'Talking Mats' with their clients. The Short Breaks Team is to link with the CAT team, also to link with specialist dental services to explore more appropriate mechanism to suit the needs of the client group. Exploring options for obtaining feedback with selected groups in school. To identify and develop volunteer Feedback Champions to capture feedback at clinics and by telephone as appropriate.
Developing opportunities for parents and carers to become involved in staff recruitment	Parents are to be invited to participate on the interview panels for all nursing and health care interviews

7.3 MAIN COMPLIMENTS RECEIVED

The main themes from the 'BEST THING' comments from the survey are shown below. We received 13 responses to this question in the last 3 months and 133 in the 12 months previous to that.

Category	% of overall total December 2014 - February 2015	Main compliments last 3 months November 2014 - February 2015	Main issues for the previous 12 months December 2013 – November 2014
Staff/Staff Attitude:	53%	1. Helpful/Caring/Friendly 27% 3=. Other 10% 5=. General 7%	1. Helpful/Caring/Friendly 16% 5=. General 6%
Care/Treatment:	29%	2. General 13% 3=. Other 10%	2. Other 11% 3. General 8%
Environment/Facilities	13%	5. Other 7%	
Service Quality/Outcomes			4. Advice/support 7%
Communications			5.= Other 6%

Some comments/stories on the best thing about the service:

On staff /staff attitude:

- All staff are very happy to talk to us and remember our children's names
- Friendly, lovely waiting room child friendly; Friendly atmosphere; Everyone makes you feel welcome; It is very good the most important is that you make us feel like close family; Friendly, relaxed atmosphere;

*"Everyone should spend time in your waiting room - they will realise how lucky they are."
Parent, CDC*

Staff are always kind and helpful; Very polite and welcoming; Very welcoming and supportive; A relaxed friendly environment, lots of things in the waiting room for the kids; Good doctors; We enjoyed playing on the air table

- *The consistency of staff. It is great to see the same faces who know the full history. My son has been coming here for the past 10 years. He is more confident because the faces are familiar.*
- *Paediatrician Dr W is an excellent professional and brilliant in her role, very caring. The reception staff are very friendly, polite and helpful too. Everyone listens to you here. You are heard and well advised.*
- *They always think about the individual, know and use names/put consideration forward on a range of issues and aspects. Always friendly and approachable at the children centre. They even remember my son's favourite videos and save them for him! Thank you you're all great!*

Care/Treatment

- *Seeing my son improve in an environment which he is comfortable in and where he enjoys coming.*
- *My child enjoyed coming and looks forward to OT sessions. He trusts the OT and responds very well to treatment when here. Exercises taught to do at home and explained well. Sessions are made fun - Games.*

Support/advice:

- *All the available support for my child is offered. It is good to know the Children's Centre Services, OT, Physio, etc. are always a phone call away.*
- *Support is fantastic. Very happy with everything. KM has been a fantastic physio and we have been able to bring R on so well with her support and professionalism.*

8. INVOLVEMENT & EXPERIENCE ACTIVITIES IN THE SHORT BREAKS UNIT AND CHILDREN'S DEVELOPMENT CENTRE

- Gaining meaningful feedback from Children and young people who have very limited due to their communication abilities:

Work has commenced on feedback from individual activities recorded for each child/Young Person, including use of communication books, 'likes and dislikes' sheets, observation of behaviour and expression to measure and monitor the experience and preference of children and young people with complex needs. This is then used to inform individualised activity/support plans.

'Pop up' feedback points in clinics for families to share their experience.

- Implementation of Patient Opinion (PO) within special schools:

A schedule has been developed for capturing feedback from children, young people and families in special schools across Nottinghamshire. Rollout commenced at Carlton Digby School, once evaluated will roll out to the other special schools within County and City.

As parents do not always visit the school and may miss the information about PO, we are sending a letter to all parents raising awareness of feedback options and offering independent telephone contact to discuss their experience.

Working with colleagues in education for inclusion/integration of feedback as part of the curriculum in special schools through use of Patient Opinion in I.T. sessions.

- Parents and carers involved in evaluating services:

Parents have been involved in the PLACE (Patient-Led Assessment of the Care Environment) audit at CDC over the past two years, and are routinely invited to participate in PLACE and similar audits.

9. RECOMMENDATION

The Board of Directors is asked to note and comment on the report.

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Head of Involvement

Dean Howells
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