

**BOARD OF DIRECTORS MEETING
30 APRIL 2015**

**Nursing, Quality & Patient Experience Directorate
PATIENT VOICE REPORT
Forensic Services Division:
Rampton Hospital**

1. INTRODUCTION

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

This report:

- Outlines our approach to listening to the Patient Voice through these monthly reports.
- Illustrates some of the key themes raised in Forensic Services Division with a focus on Rampton Hospital and in particular the issues of physical healthcare in the hospital.

2. REPORT SUMMARY

The key highlights of this month's report are:

- The Trust's Service Quality Rating for January to March 2015 is 94%. 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 Forensic Services Division with an in-depth look at Rampton Hospital. 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 January Board Meeting about Arnold Lodge.

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 to 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 Involvement and 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.

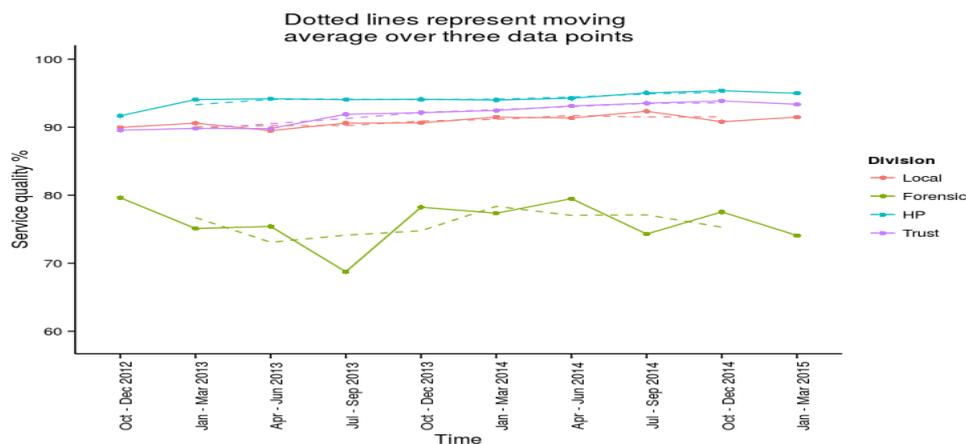
5. TRUST WIDE HEADLINES

5.1 TRUST SURVEY FEEDBACK

This report summarises data from January to March 2015, with a comparison with the previous 3 months, from October to December 2014. We received 7164 responses during the above date range, 1001 of which were from carers. Below are the headlines for the Trust taken from our feedback website:

	Trust	Local	Forensic	Health Partnerships
	January to March 2015 (comparing to previous rolling quarter, October to December 2014)			
Service Quality Rating	94% (94%)	92% (92%)	74% (76%)	94% (96%)
Friends and Family Test Score	96% (97%)	95% (96%)	65% (71%)	98% (99%)
Survey returns	7146 (6978)	1478 (1670)	334 (349)	5334 (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.

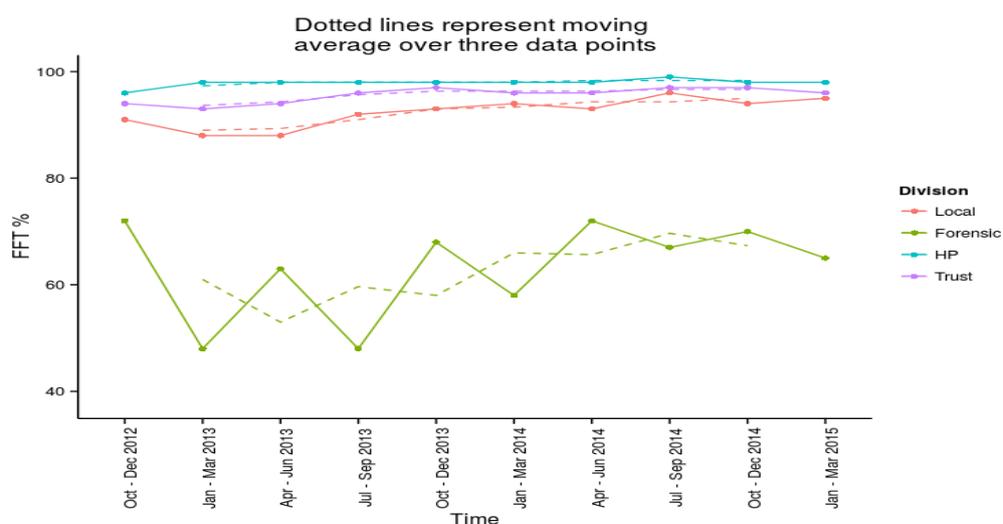
The Local score is accurate to within ± 0.9 points.

The Forensic score is accurate to within ± 2.5 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 (January to March 2015) we surveyed Rampton and Offender Health, and these directorates have, as previously, scored lower than when we surveyed Arnold Lodge and Wathwood in the previous quarter.

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 ± 0.6 points.
 The Local score is accurate to within ± 2.1 points.
 The Forensic score is accurate to within ± 4.9 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 lower 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.

	January to March 2015 Trust-wide (comparing with the previous 3 months - October to December 2014)	January to March 2015 Local (comparing with the previous 3 months- October to December 2014)	January to March 2015 Forensic (comparing with the previous 3 months- October to December 2014)	January to March 2015 Health Partnerships (comparing with the previous 3 months- October to December 2014)
Number of postings published	310 (266)	55 (52)	26 (16)	209 (234)
% that are rated (by Patient Opinion) as moderately critical or above	2% 2 postings (2%)	2% 1 posting (8%)	0 0 postings (0%)	0% 1posting (0%)
% that are rated (by Patient Opinion) as entirely complimentary	87% 296 postings (89%)	71% 39 postings (69%)	77% (69%)	93% (94%)
% that are have been responded to within 2 working days	80% 274 postings (77%)	53% 29 postings (54%)	69% 18 postings (56%)	83% 173 postings (78%)

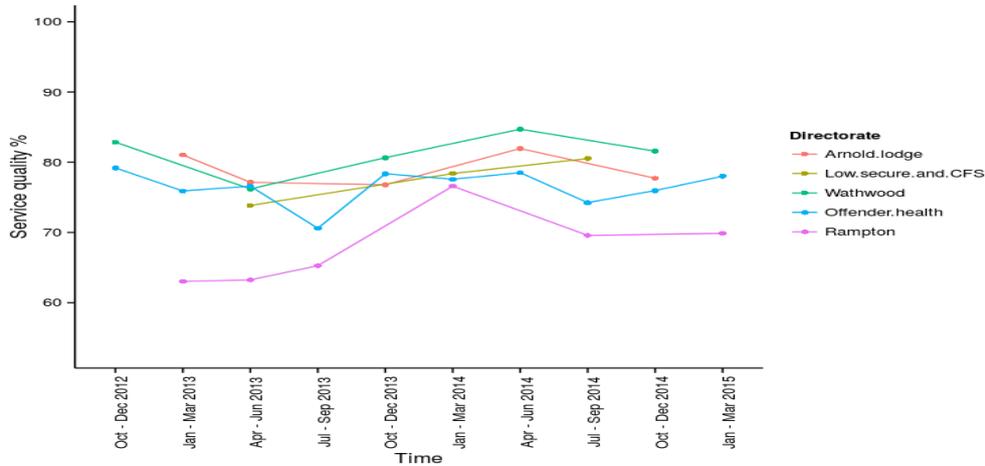
6. FORENSIC SERVICES DIVISION

This month the focus is on the Forensic Services Division. We are taking an in-depth look at the views and experiences of patients and carers about Rampton Hospital.

The graphs below compare the Directorates in the Forensic Services Division. The main issues raised for the Forensic Services Division from December 2014 - February 2015 and the previous year are also presented.

6.1 SERVICE QUALITY RATING

FORENSIC SERVICES DIVISION



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

The most recent Arnold Lodge overall score is accurate to within ± 4.7 points.

The most recent Low Secure and Community Forensic Services overall score is accurate to within ± 6.2 points.

The most recent Wathwood overall score is accurate to within ± 5 points.

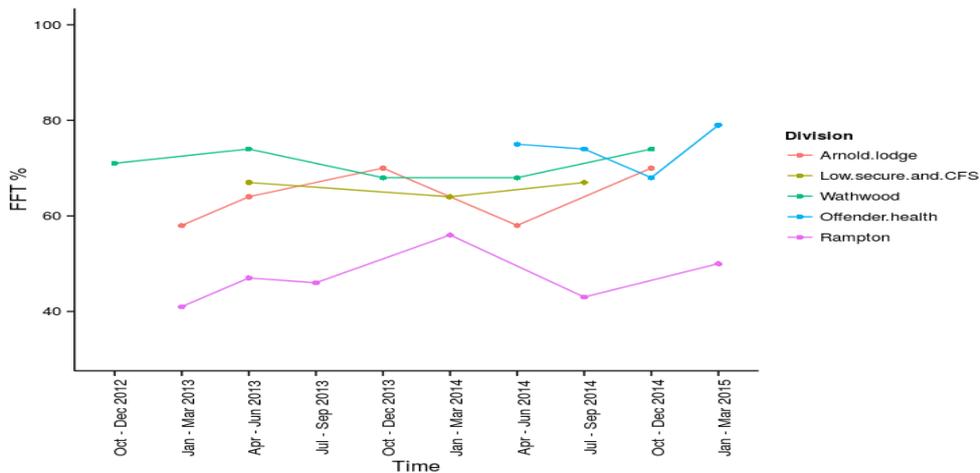
The most recent Rampton overall score is accurate to within ± 3.5 points.

The most recent Offender Health overall score is accurate to within ± 16.0 points.

This means that there is a degree of uncertainty in the scores for all directorates.

6.2 FRIENDS AND FAMILY TEST

FORENSIC DIVISION



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

The most recent Arnold Lodge overall score is accurate to within ± 11 points.
The most recent Low Secure and Community Forensic Services overall score is accurate to within ± 16.1 points.
The most recent Wathwood overall score is accurate to within ± 14.4 points.
The most recent Rampton overall score is accurate to within ± 8.5 points.
The most recent Offender Health overall score is accurate to within ± 6.4 points.

This means that there is a degree of uncertainty in the scores for all directorates.

6.3 UPDATE FROM ARNOLD LODGE

In the Patient Voice Report in January 2015 we focused on Arnold Lodge Medium Secure Unit and the key issues raised from survey feedback. Below are some developments since that meeting:

ISSUE	AGREED ACTION	TIMESCALE
Patients would like to be provided with information before they are admitted stating what items they are allowed to bring to Arnold Lodge as well as general information about the Unit.	A scoping exercise is currently being undertaken to assess what information is already routinely provided to patients both prior to and after admission. Following this, a comprehensive patient information pack will be developed in consultation with patients.	September 2015
Patients reported that they do not understand the assessment process at the hospital	To develop an information leaflet for each carestream explaining the assessment process to patients.	June 2015
Patients have requested a wider variety of age appropriate toys to be made available in the family visiting area. They also requested that the television is connected to an aerial so that children can watch television programmes.	<p>Following consultation with patients across the Service the feedback received was that there are too many toys in the child visiting area but these resources are disorganised.</p> <p>Toys and games have now been reorganised into age specific categories and stored appropriately.</p> <p>Broken toys and games have been removed and replaced and additional ones provided.</p> <p>The Support Services Manager is investigating the provision of a television aerial point for the child visiting suite</p>	May 2015

7. RAMPTON HOSPITAL

Rampton Hospital is one of three high-secure hospitals in England. It is located near Retford in the Nottinghamshire countryside, and employs approximately 1,900 staff.

The care provided at the Hospital is split into five areas:

- Mental Health
- Women's Services
- Learning Disability
- Personality Disorder
- Enhanced Service for Personality Disorder

7.1 HEADLINES

	January to March 2015	Previous feedback period, July to September 2014
Service Quality Rating	70%	70%
Friends and Family Test Score	50%	43%
Number of Responses	166	52

7.2 MAIN ISSUES RAISED

There are a range of feedback mechanisms that are used at Rampton to capture feedback, including:

- The Feedback Survey
- Forensic Division Patient Satisfaction Survey
- Patients' Council
- Ward Community Meetings
- Carers' Events

7.2.1 Feedback Survey

Below we outline the main issues raised from over the last three months and the Trust survey comments and Patient Opinion stories.

The main themes from the "**Improve one thing**" comments from the survey. We received 114 responses to this question in the last 3 months and 129 in the 12 months previous to that (January – December 2014).

Category	% of overall total January - March 2015	Main issues last 3 months January - March 2015	Main issues for the previous 12 months January – December 2014
Care/ Treatment	28%	1. Activities (13%) 5.= Therapies (4%) 5.= Approach to care (4%)	1. Activities (9%) 2.= Other (6%)

Category	% of overall total January - March 2015	Main issues last 3 months January - March 2015	Main issues for the previous 12 months January – December 2014
Staff/Staff Attitude	19%	2, Respect (6%) 4. Staffing levels (5%) 5.= General (4%)	2.= General (6%) 2.= Staffing Levels (6%) 2.= Time staff spend with service users (6%)
Food	10%	3. Quality/quantity (5%)	
Service Quality/Outcomes	6%	5.= Quality of care/service (4%)	2.= Achievement of goals/hope (6%)
Smoking	4%	5.= General (4%)	

7.2.2 Patient Opinion

There have only been three Patient Opinion postings about Rampton Hospital in the last year. All were positive, two about Topaz Ward and one about a patient transfer from Rampton.

7.2.3 Other Feedback (including from Complaints, the Patient Advice and Liaison Service, Patient and Carer Forums and other sources)

From the variety of sources of feedback the main issues that have been identified for improvement are outlined below together with any action taken or planned to respond.

Issue Raised	Response (Action taken or planned)
Improving patient access to new technologies	Increased patient access to MP3 players and other new technologies ; and improve communication via DTV system
Improving access to Physical Healthcare in Women's Services	<ul style="list-style-type: none"> Involved patients in survey and discussions about improvements Opening of the Jasmine Suite Healthcare Suite 'Day Surgery' event coordinating health clinics
Improve information for carers regarding Physical Healthcare	Over 40 carers attended an event focussed on Physical Healthcare
Address patient concerns regarding reduced activities and staffing levels	Open Forums have been held in each service with Senior Managers. Action Plans have been produced and progressed within each service

Below are some of the comments/stories that illustrate what has been said about the main issues raised:

Staffing Levels

More ward rounds, more inclusion. More exercise, short staffing (Blake Ward)

More staff on wards (Firs Ward)

More staff so we don't get our sessions cancelled. (Quantock Ward)

For more staffing as appointments are always getting cancelled. (Cheviot Ward)

Higher staffing levels as we're struggling with unsafe staff levels. (Topaz Ward)

Activities

More recovery programs (Aintree Ward)

More activities during daytime. (Newmarket Ward)

More activities to take part in. More different things to do. (Firs Ward)

Keeping workshops open more (Juniper Ward)

More cooking/sports/woodwork/psychology sessions (Alford)

More access to Chapel facilities in main hospital. More access to astroturf (Hambleton Ward)

More to do at weekends, cause we spend most of time on ward at weekends doing nothing. (Hambleton Ward)

More ward activities, football and updated game consoles. (Malvern Ward)

More activities to do - cooking, astroturf access etc. Not enough use of facilities available e.g. the astroturf hardly gets used. (Malvern Ward)

More educational services, free courses and a lot more options across the week (Jade Ward)

More cooking & activities (Jade Ward)

More gym sessions. (Emerald A Ward)

Physical Healthcare

Following a number of Serious Incidents Reports in National High Secure Service for Women, a survey was carried out in respect of improving access to physical healthcare for women. The majority of the sample (12) who responded thought the physical healthcare offered to them was good or very good. Patients' opinion regarding physical wellbeing was also sought in order to shape and influence the physical healthcare strategy for the Directorate. This identified a need for a physical healthcare environment for women, the Jasmine Suite, to aid relational security and reduces risks potentially associated with inpatient admissions to other hospitals

In December, 2014 the Carers Event focussed on increasing the carer's awareness of physical healthcare developments and consulted with carers about how to encourage patients into Healthy Choices in the Patient Shop. An action plan was drawn up and progress will be fed back to carers at a future event.

7.3 MAIN COMPLIMENTS RECEIVED

The main themes from the 'BEST THING' comments from the survey are shown below. We received 109 responses to this question in the last 3 months and in the 12 months previous to that.

Category	% of overall total January - March 2015	Main 'Best thing' comments last 3 months January - March 2015	Main 'Best thing' comments for the previous 12 months January – December 2014
Care/Treatment:	38%	1. Activities (20%) 2. Therapies (12%)	2. Activities (8%) 3.= Therapies (7%) General 8%
Service Quality/Outcomes	20%	3. Quality of care/service (11%)	
Staff/Staff Attitude:	20%	5.= Helpful/Caring/Friendly (6%) 4. General (7%)	1.Supportive (15%) 3.= Helpful/Caring/Friendly (7%) 5=. General (6%)
Food	9%	5.= General (6%)	

Below are some of the comments/stories that illustrate what has been said about the best things about the service:

Staff Attitude

People are caring (Anston Ward)

Some of the staff are very supportive (Juniper Ward)

Level of concern and commitment. (Malvern Ward)

The staff were very kind to me and I like doing my various activities at DRC eg Tina's supported group at DRC. (Ruby Ward)

Be treated as a 'person' - equality. (Ruby Ward)

Trusting relationships built with a variety of staff from multiple disciplines. (Ruby Ward)

Support and caring staff. (Emerald B Ward)

Ward manager. The ward manager always finds time to see me. (Emerald B Ward)

My named nurse is understanding and makes good decisions. (Topaz Ward)

Activities

Health suite & therapies. Swimming (Cheltenham Ward)

Social events are good. (Newmarket Ward)

All of my groups and therapies. (Newmarket Ward)

I like the gym (Blake Ward)

Psychology, gym, social functions (Blake Ward)

Opportunities to engage in off-ward activities & therapies (Firs Ward)

Therapies that are provided (Juniper Ward)

Enjoy Toyshop and carpentry, Acorn education centre, shopping, off ward activities, would like to see more above. Some staff are good/some not so good. (Grampian)

Activities, Gym (Hambleton Ward)

Recovery work. (Emerald B Ward)

8. INVOLVEMENT & EXPERIENCE ACTIVITIES AT RAMPTON HOSPITAL

Rampton High Secure Hospital is committed to involving patients and carers in their care and treatment; and has an improving position on involving patients and their family and friends in service development.

There is core regular and comprehensive involvement activity across the Hospital via an established Patients Council, User Group in each Service and regular Carer events. This enables patients and their families to raise issues that concern them and work with staff to improve the services offered.

There have been a number of other co-produced recovery based initiatives and events which have contributed to improved outcomes for patients. For example, an ex-patient recently presented at a national CQUIN conference about Recovery and their experiences of our care. Also patients were directly involved in meeting with commissioners during the recent CQUIN assessment with positive feedback given to support our quality developments.

Carer's events are planned through the Carers Planning Meeting which involves a number of carers and staff. The Carers Event in March, focussed on the Recovery College and developing a module for carers. In addition there is a Triangle of Care Task Group which focusses on the implementation of Triangle of Care principles and has recently coproduced a Carers Champions event.

Another focus of involvement activity includes each service holding a Patient Open Forum where they meet with Senior Managers to discuss issues that concern them. An action plan addressing issues is then produced and worked on within that service.

Recruitment at Rampton has over the last year has involved an increasing number of patients from across the hospital trained by IIT workers from the Involvement Centres. Over the last quarter, patients have been involved in the recruitment of all new ward based nursing staff.

Increasingly, involvement activities at Rampton are being sensitively filmed in imaginative and creative ways to demonstrate how patients and carers are involved and the improved outcomes from this experience.

A number of Recovery initiatives enable patients to get involved in creative projects. The Peaks Unit hosted a Recovery Conference to which stakeholders were invited. Patients through telling their powerful stories were able to demonstrate some of the benefits of high secure care to their recovery.

Mental Health and National Learning Disability have focussed on a number of music activities and have planned an event focussing on 'moving on'.

Women's Service organised a Recovery event to launch their Sensory Garden and PD service are planning a Decorators Club to develop their work skills and assist recovery through vocational activity.

9. RECOMMENDATION

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

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