Patient Experience Strategy 2014 – 2017

‘Seeing the person in the patient’
**Foreward from the Trust Chairman and Chief Executive:**

Isle of Wight NHS Trust is committed to the delivery of effective, safe and personal care to every patient, every time across all our services – ambulance, community, hospital and mental health. Our vision is to be an excellent and trusted provider of integrated patient focussed services that are locally and globally admired. We aim to improve quality by not only ensuring that the results of treatment and care (outcomes) are as good as the best achieved elsewhere, but by making sure that our patients, feel (and say) that we are treating them with compassion and dignity.

We know that patients have a unique vantage point at the centre of everything we do and as such are expert witnesses to the care delivered. Their judgements are not only made on the care that they receive, but also the care they witness others receiving. There is no doubt that the care experience of the patient and their family and friends, clearly plays a significant part in the patients’ well being, making them the experts who can work with us to further improve the experience of all patients.

This strategy sets out how the Organisation will proactively utilise patient feedback to improve the services we deliver, linking with our patients and other key stakeholders to ensure that we continue to deliver safe, effective and compassionate care.

The Trust Board, senior staff and everyone in the Organisation are committed to improving the experience of the patients we serve. If you have any feedback or comments on this strategy please do not hesitate to get in touch. If you would like to become more involved in the Organisation please sign up as a Member ([www.iow.nhs.uk/membership](http://www.iow.nhs.uk/membership)).

Danny Fisher  
Chairman

Karen Baker  
Chief Executive
1. INTRODUCTION:

In 2013 the National Quality Board defined the Patient Experience dimension of Quality as ‘care which looks to give the individual as positive an experience of receiving and recovering from the care as possible, including being treated according to what that individual wants or needs, and with compassion, dignity and respect.’ (2013:p.17)

The Equality Act 2010 provides a legal framework which should improve the experience of all patients using NHS services, and replaces all previous anti-discrimination legislation - including a public sector equality duty requiring public bodies to have due regard for the need to eliminate discrimination and to advance equality of opportunity; and to foster good relations between people who share certain protected characteristics and those who do not. The protected characteristics are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

The strategy aims to influence the overall direction and quality of services by giving a meaningful voice - at all levels - to Patients/ Service Users and Carers in order that they can support the Trust in making improvements to their own care and treatment. It is recognised that the Trust must continue to learn from Patient / Service User and Carers experience and drive forward improvements for the wide range of services we provide.

The Isle of Wight NHS Trust is committed to ensure that our services are developed and improved as a direct result of patients’/Service Users and carers experience and involvement; and that the patient is always our priority. Excellent Patient Experience is supported by the Trusts 5 Strategic Objectives and is clearly embedded throughout the Trusts Integrated Business Plan.

One of the recommendations from the Mid Staffordshire Inquiry (2013:p.85) state that ‘the patients must be the first priority in all of what the NHS does. Within available resources, they must receive effective services from caring, compassionate and committed staff, working within a common culture, and they must be protected from avoidable harm and any deprivation to their basic rights.’ This is underpinned further by Compassion in Practice published by the Department of Health in December 2014, which clearly identifies the six fundamental values: care, compassion, competence, communication, courage and commitment.

The implementation of this Strategy will ensure that the Trust has a co-ordinated approach enabling us to embark on a cycle of continual listening, learning from and working together with our patients and partners in care. This will in turn ensure that valuable feedback is routinely captured and used effectively to ensure excellence of the patient pathway from start to finish.

As we move towards Foundation Trust Status, this strategy will allow us to build a solid base of partnership with the membership and the Island Community as a whole, and it sets in
motion a way of working which through our Council of Governors and membership which will make sure that our plans always put the patients’ needs first.

2. PURPOSE OF THIS STRATEGY:

The aim of this strategy is to ensure that patients, their families and carers experience care that not only meets but exceeds their expectation of the services at the Isle of Wight NHS Trust.

High quality patient, carer and family experience:

- Is a right under the NHS Constitution for England
- Helps the Trust maintain and increase public confidence.
- Has been linked to better outcomes.
- Forms part of the Trusts Quality Accounts.
- Can be an indicator for poor quality care (reviews e.g Mid Staffordshire NHS Trust have shown that a greater focus on patient experience data could have highlighted problems at an early stage)
- Is a key factor within NHS strategies, including the Quality Governance Framework and the NHS Outcomes Framework 2013/14

Through the strategy, the Trust will define the action required to continually assess and improve patient, family and carer experience and provide a framework to support this, with clear priorities and responsibilities identified.

This strategy will ensure that a culture of seeing the person in the patient is at the heart of everything we do.

Engagement will form the cornerstone of the Trust’s pursuit of Foundation Trust status. We recognise and value the importance of engagement as a means to shape and deliver the best care for patients, families and carers.

3. STRATEGIC CONTEXT

The Trust has already established several mechanisms to capture patient feedback and improve the patient experience including:

- Use of Patient Stories – These will continue to be delivered to the Monthly Trust board, representing patients’ views from all the services we deliver across the Island.
- A Patient Experience Listening day – which will give patients, families and carers the opportunity to come in and speak to senior staff from across the Trust
• Board Assurance Walkabouts – This enables Board Members to seek patient, staff and carer feedback for themselves.
• Implementation of the Friends and Family Test across the whole organisation. (See Appendix A)
• Use of locally developed patient surveys, which incorporate a net promoter score\(^1\), and are reported at board
• Use of Mystery Shopper campaign
• Use of Healing Arts to improve the hospital environment
• Review of the complaints / concerns process to ensure that a more proactive approach is taken to facilitate early resolution of concerns
• Utilisation of Patient Council Members to capture patient feedback, with a current focus on nutrition.
• Trust wide collation and sharing of ‘Good News’ (compliments) data.
• Dedicated engagement with the public members of the island from minority groups including Black, & Minority Ethnic (BME) groups & Lesbian, Gay, Bi-sexual, & Transgender (LGBT)
• Engagement with HealthWatch Isle of Wight.

\(^1\) Net promoter score is a management tool that can be used to gauge the loyalty of a firm’s customer relationships.

Patient Experience data will be shared at various committees across the organisation up to Board. The Board will continue to receive Patient Stories as a regular agenda item, as will its subcommittee, the Quality and Clinical Performance Committee (QCPC). The Quality and Clinical Performance Committee will also receive a quarterly Patient Experience report which pulls together all of the key elements of patient experience data from across the organisation. Patient Experience Data will also be cascaded throughout the organisation, and ensure that all staff have the opportunity to feedback and inform actions taken to improve the patient experience.

Patient Experience data will be used to inform the Organisations Equality Delivery System Self-Assessment.

The first objective of the Isle of Wight NHS Trusts’ Integrated Business Plan (IBP) is to continue to develop the **highest possible quality standards** in the services we provide – delivering safe and effective services and good outcomes, and doing so in a way that achieves an excellent patient experience, with excellent customer care.
4. WHAT ARE THE BENEFITS OF IMPROVING THE PATIENT EXPERIENCE?

Not only does improving the patient experience benefit patients / service users, families and carers, it also benefits the staff and the organisation by providing:

- Enhanced patient / service user recovery and health outcomes (e.g. reduced length of stay)
- Enhanced quality of life and reductions in pain, anxiety and depression
- Improved patient / service user confidence, involvement and coping ability
- Enhanced individualisation of care - more dignity, respect, and understanding
- Enhanced quality of care, including resolving problems
- Improved productivity, efficiency, and reduced costs
- More streamlined care pathways that are less resource intensive
- Lower staff turnover and absenteeism, better job satisfaction
- Enhanced team dynamics
- Consistent, sustained improved culture of care.
- Increased Trust Reputation and performance against peers and targets.
5. STRATEGIC OBJECTIVES – WHAT WE NEED TO DO TO IMPROVE

Objective 1: Develop a more proactive and robust approach to patient / service user feedback and concerns via the Experience Officers (PEO’s) and continue to analyse complaints and concerns data in a timely manner to inform service improvement.

We recognise that it is important to make use of patient / service user feedback from complaints and concerns data in order to support service improvement and to ensure important lessons are learnt when we have not got it right. It is also recognised that the way in which complaints are handled can either improve or worsen the experience of patients.

Our plans:

1. We will implement a more proactive approach to managing the concerns of patients / service users, families and carers. Patient Experience Officers will be available to support Trust staff to effectively manage patient / service user concerns. The Patient Experience Officers will liaise with Trust staff to achieve prompt and if possible immediate resolution. The Services will have experienced staff who will be expert communicators.

2. We will review and produce more accessible information for patients / service users, carers and staff to promote the Patient Experience Service both internally and externally, through a variety of media.

3. We will identify a more central and accessible location for Patient Experience Officers for patients / service users, carers and staff.

4. We will support patients / service users / families and carers to resolve their concerns at an earlier stage so they do not feel they need to register a formal complaint.

5. We will ensure that Patient Experience Officers are readily available to support and educate the Trust staff in dealing with concerns at an early stage, so that escalation to Patient Experience Officer level is reduced or avoided.

6. We will undertake a review of our complaints process including the quality of our responses, to ensure that complainants are fully informed throughout the process and to enable services to be improved. This will included talking to complainants on receipt of their concern, to identify how they would wish their complaint to be managed.

7. We will continue to report and analyse our complaints, concerns and compliments data monthly to be shared as part of the Executive Director of Nursing and Workforce’s Quality Report. This report will continue to be shared at various forums.
such as Clinical Directorate meetings across the Trust, as well as with the Clinical Commissioning Group on request.

8. We will ensure that serious issues are highlighted to an Executive Director immediately upon receipt and action taken on them in line with Trust Policy.

9. We will continue to provide monthly analysis of data from complaints and concerns to the Clinical Directorates.

10. We will continue to develop service level action plans to address issues and themes from complaints and concerns, and report and monitor these appropriately to inform service improvement and redesign.

11. We will ensure that we utilise patient / service user feedback from external sources such as information provided from HealthWatch Isle of Wight.

12. We will ensure that ‘Good News’ (compliment) data continues to be collated and reported across the Trust and ensure that lessons are learnt from positive feedback.

13. We will ensure that we clearly publicise the patient experience feedback mechanisms available to patients.

Objective 2: Build on existing work to further develop robust systems and processes for gaining both quantitative and qualitative feedback.

The Trust currently participates in gathering information about the services we deliver on a regular basis. The Quality Team currently collate information from across the Trust to measure performance and inform commissioners about service quality and provide evidence for regulators.

As well as undertaking the Friends and Family Test, the Trust participates in all mandated National Patient / Service User Surveys and develops local patient / service user experience surveys to further evaluate services. Other means of capturing patient / service user experience activities includes mystery shopping programmes, recording patient / service user story videos and provision of patient diaries.

Our plans:

1. We will develop and implement a real-time feedback system for use in the organisation.

2. We will open an area in the main foyer of the Hospital to support patients/service users, families and carers; and provide patients with the opportunity to leave feedback or speak to someone 24 hours a day.
3. We will continue to improve the process of collecting / service user feedback, by further evaluating and if appropriate purchasing an electronic solution for data capture.

4. We will maximise the use of social media – giving patients, families and carers the opportunity to contact the Trust in a variety of formats, to discuss their concerns, raise a complaint or to provide positive feedback to staff.

5. We will extend the roll out of the Friends and Family Test to the whole Trust ahead of the national timescale.

6. We will work with volunteers and HealthWatch Isle of Wight to further develop the current Patient / service user Story process, to ensure that a more independent process of interviewing patients is in place. Patient / Service User stories add an invaluable in-depth insight into pathways through the Trust and provide a human element to data. Patient / service user Story videos will be shared at Board, as well as being used for staff training. We will ensure that these videos are available via the Trusts Intranet to ensure that they are easily accessible to staff across the Trust.

7. We will implement the Staff Friends and Family Test; there is an increasing body of evidence which indicates an association between positively engaged staff and positive patient / service user experiences.

8. We will ensure that a dedicated member of the Patient Experience Team is working alongside service line staff and Site Coordinators in the out-of-hours period to ensure that feedback is translated into actions which are then completed. This will include the introduction of a process to monitor service improvement as a result of action taken.

9. We will ensure that there is a more robust process for collecting, sharing and using feedback from websites such as NHS Choices and Patient Opinion as well as external sources such as HealthWatch Isle of Wight.

10. We will develop and implement a process to ensure learning from the positive feedback received both from surveys and ‘Good News’ data, which will support sustained improvements, to further enhance the patient / service user experience.

Objective 3: Develop the ‘Living Room to Board Room’ concept to ensure that patients who access community services are providing patient / service user feedback to align to our board to ward approach.

1. We will ensure that the Friends and Family Test is implemented across community services ahead of the national implementation date, and that the results of this are reported to Board.
2. We will work with the Community Services Teams to identify patients who wish to participate in patient / service user story videos from their own home, to relay their experience of community services to the Board.

3. We will work with volunteers and HealthWatch Isle of Wight to identify patients who wish to participate and contribute to the patient experience agenda in relation to community services.

**Objective 4:** Develop systems and processes that appropriately link willing patients, members, governors and other stakeholders with teams trying to make service improvements.

Patients and the public who may want to be involved to varying degrees in providing feedback and helping to shape the Trust’s services will be approached to participate in engagement events. As such the organisation will need to have a variety of options available to support them.

The Trust will work with local representatives, user groups and partners but will also need to ensure that clear mechanisms are in place to enable current users of our services, and the wider public, to provide the Trust with feedback.

For the future it is clear that we will need to build a clear role for the current Patient Council, public members, as well as the governors appointed as part of the membership of our Foundation Trust in shaping the Trust’s strategic objectives around patient / service user experience.

Our plans:

1. We will ensure that we have an organisational register of all local patient / service user groups.

2. We will develop mechanisms to ensure that Trust Members provide their views and shape services.

3. We will develop an annual work programme that details all projects requiring patient/service user/carer/public involvement.

4. We will put a clear process in place to ensure that services are able to identify and communicate with willing users to support service developments and improvements.

5. We will ensure that a policy is in place that clearly defines what support and reimbursement of expenses is available for service user involvement.
Objective 5: Develop a minimum data set that forms a ward / department dashboard that will enable teams and departments to ensure reliability and consistency of patient / service user experience information.

It is essential that there is an emphasis on actual patients’ experience, rather than on their perceptions, attitudes or opinions. This allows successful services to gain insights from which they identify opportunities for improvement. In order to allow service improvement, robust data must be readily available to service areas to support this.

Our plans:

1. We will continue to develop the Quality Dashboard, which also provides Patient / Service User Experience Data to enable services to have a timely snapshot view of their performance and feedback using clear performance indicators as measurement.

2. We will provide data on a regular basis so that progress is tracked and monitored over time.

3. We will routinely publish patient, carer/family and staff experience.

Objective 6: Every service area within the Trust will use Patient / Service User Experience to gain insight and identify opportunities for improvement.

All services in the Trust need to understand how they contribute directly or indirectly to the patient / service user experience. All areas need to be able to reflect on the feedback given to ensure that opportunities for improvement are identified, and appropriate action taken.

Our plans:

1. We will develop the organisations culture to ensure that all staff understand their impact on the patient / service user experience.

2. We will ensure services are supported to gather robust patient / service user experience feedback using a range of methods.

Objective 7: Every service will have identified at least one patient / service user experience improvement project annually.

It is crucial to ensure that wherever possible action is taken promptly and efficiently on any issues raised by patients or families, and that a satisfactory resolution is agreed. The earliest possible resolution of problems or concerns is the best outcome for all parties. It is also essential that once resolution is agreed, learning should take place; and that we utilise this to inform service development and improve the patient / service user experience in the future.
Our plans:

1. We will empower teams and ensure they have the skills and resources to take action to rectify issues immediately wherever possible.

2. We will ensure that services take action based on feedback from patients and families to improve services and enhance the patient / service user experience.

Objective 8: A Trust wide 3 year ‘campaign’ style approach to make improvements in identified themes will be led by the patient / service user safety, experience and effectiveness directorate, with the support of the Organisational Culture Development Group.

Some of the key themes arising from complaints received by the Trust relate to communication between staff and patients, the absence of basic nursing care and the attitudes of staff. The Trust plans to develop a campaign style approach to improve the experiences of patients / service users and their families/ carers in relation to the following areas:

- Kindness and compassion
- Physical comfort
- Clear co-ordination of care
- Clear communication to ensure patients / families and carers feel involved in care and treatment decision making.

Our Plans:

1. We will ensure that the board messages are clear, in continuing to support and improve patient / service user care.

2. We will ensure that staff feel supported and have the necessary skills to undertake their role. Evidence strongly suggests that there is a strong relationship between staff wellbeing and a positive patient / service user experience. Ensuring individual staff well being, will have a positive effect on direct patient / service user care performance.

3. We will focus on the themes of kindness and compassion in year one of the campaign.

4. We will develop a ‘values based’ recruitment process; ensuring staff are employed who can demonstrate the qualities of the Organisational Culture. Using patients / service users as interview panel members where appropriate to support this approach.

5. We will carry out observational studies using patient / service user representatives as well as Trust staff to gather insight of the impact of culture, behaviours and attitudes when delivering care with kindness and compassion.
6. We will enlist 100 Quality Champions from across the Organisation to support the delivery of our quality goals and action plans to improve the patient / service user experience.

7. We will work with HealthWatch Isle of Wight to support us in the campaign to improve the experiences of patients and their families.

**Objective 9:** The Trust will develop new patient / service user experience key performance indicators for corporate monitoring, and a system of service reviews to theme patient / service user experience data.

We need to ensure there is transparency and understanding of patient / service user experience at every level from ward to board, in both clinical and non-clinical settings. We need to learn from our own and others mistakes, (e.g. Francis Report) and take effective action, so that issues and concerns are not repeatedly experienced. In order to achieve this, we need to build a more effective performance monitoring mechanism for patient / service user experience.

Our Plans:

1. We will routinely gather information on patient / service user experience.

2. We will develop a systematic process for conducting and reporting quarterly patient / service user experience service reviews.

3. We will ensure we keep abreast of developments both regionally and nationally to improve our own customer service.

4. We will ensure that areas of good practice / role models are highlighted and lessons learnt across the organisation.

**6. OTHER DOCUMENTS TO BE READ IN CONJUNCTION WITH THIS STRATEGY:**

Involving Service Users and Carers in Mental Health & Learning Disability services. *(date to be included once approved)*

**7. REFERENCES:**

Equality Act 2010

Quality in the New Health System – maintaining and improving quality from April 2013 – National Commissioning Board January 2013

The Department of Health, Building on the Best Choice, Responsiveness and Equity in the NHS; December 2003 The Stationery Office
8. OTHER USEFUL RESOURCES:

Care Quality Commission  Essential Standards of Quality and Safety

Department of Health  Consultation on strengthening the NHS Constitution: Government response Published 26 March 2013


Department of Health The NHS Outcomes Framework 2013/14 13 November 2013

National Institute for Health and Care Excellence (NICE)  Patient experience in adult NHS services: improving the experience of care for people using adult NHS services (CG138) published February 2012


NHS Employers “Personal, Fair and Diverse NHS” campaign http://www.nhsemployers.org/EmploymentPolicyAndPractice/EqualityAndDiversity/Creatin gPFDNHS/Pages/Signuptoday.aspx

The Mid Staffordshire NHS Foundation Trust Public Inquiry Chaired by Robert Francis QC Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry published February 2013

The Patients Association www.patients-association.com
Appendix A

What is the Friends and Family Test?

The Friends and Family Test has been included in the government’s mandate to the NHS Commissioning Board. Making sure that people have a positive experience of care is a key requirement in the Mandate, published on 13 November 2012.

It means every patient will be able to give feedback on the quality of their care:

- acute hospital inpatients and accident and emergency patients from April 2013
- for women who use maternity services from October 2013
- as soon as possible after October, for all those using NHS services.

The test will collect timely feedback which can be used to improve patient care and identify the best performing hospitals. Details of the initial roll out were announced by the Prime Minister in May 2012 in response to recommendations by the Nursing Care Quality Forum.

The test will involve the use of a simple question, which all patients in the target groups will be given the opportunity to answer, every day of the year.

For A&E departments, the question will be: “How likely are you to recommend our A&E department to friends and family if they needed similar care or treatment?”

The question for inpatient services asks: “How likely are you to recommend our ward to friends and family if they needed similar care or treatment?”

The expectation will be that the test will be used to improve the quality of care where patient feedback indicates that experience is poor. It is important that NHS services are patient centered and responsive and the Friends and Family test should be one of the tools used to deliver this aim

Source DoH 5 December 2012:

Appendix B

Quality statements from NICE Clinical Guideline 138 – Patient Experience in adult NHS services: improving the experience and care for people using NHS services.

1. Patients are treated with dignity, kindness, compassion, courtesy, respect, understanding and honesty.

2. Patients experience effective interactions with staff who have demonstrated competency in relevant communication skills.

3. Patients are introduced to all healthcare professionals involved in their care, and are made aware of the roles and responsibilities of the members of the healthcare team.

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

5. Patients are supported by healthcare professionals to understand relevant treatment options, including benefits, risks and potential consequences.

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

7. Patients are made aware that they have the right to choose, accept or decline treatment and these decisions are respected and supported.

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

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

10. Patients have their physical and psychological needs regularly assessed and addressed, including nutrition, hydration, pain relief, personal hygiene and anxiety.

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

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

13. Patients’ preferences for sharing information with their partner, family members and/or carers are established, respected and reviewed throughout their care.

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

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Appendix C

NHS Patient / Experience Framework

In October 2011 the NHS National Quality Board (NQB) agreed on a working definition of patient experience to guide the measurement of patient experience across the NHS. This framework outlines those elements which are critical to the patients’ experience of NHS Services.

Respect for patient-centred values, preferences, and expressed needs, including: cultural issues; the dignity, privacy and independence of patients and service users; an awareness of quality-of-life issues; and shared decision making;

- **Coordination and integration of care** across the health and social care system;
- **Information, communication, and education** on clinical status, progress, prognosis, and processes of care in order to facilitate autonomy, self-care and health promotion;
- **Physical comfort** including pain management, help with activities of daily living, and clean and comfortable surroundings;
- **Emotional support** and alleviation of fear and anxiety about such issues as clinical status, prognosis, and the impact of illness on patients, their families and their finances;
- **Welcoming the involvement of family and friends**, on whom patients and service users rely, in decision-making and demonstrating awareness and accommodation of their needs as care-givers;
- **Transition and continuity** as regards information that will help patients care for themselves away from a clinical setting, and coordination, planning, and support to ease transitions;
- **Access to care** with attention for example, to time spent waiting for admission or time between admission and placement in a room in an in-patient setting, and waiting time for an appointment or visit in the out-patient, primary care or social care setting.

This framework is based on a modified version of the Picker Institute Principles of Patient-Centred Care, an evidence based definition of a good patient experience. When using this framework the NHS is required under the Equality Act 2010 to take account of its Public Sector Equality Duty including eliminating discrimination, harassment and victimisation, promoting equality and fostering good relations between people.

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