

Service User and Carer Experience Strategy 2016

‘Caring for and caring about’



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Foreword

“Patients, users and carers are the reason for the NHS existing... and, as such, must be at the centre of all that the NHS and its staff do.” (National Quality Board, July 2010).

At North Staffordshire Combined Healthcare NHS Trust, we are committed to providing our local communities with safe, high quality effective care, where our service users truly feel cared for and cared about. Our Board’s business is driven by the quality agenda. The Trust Board has defined an emphasis for the organisation based on four quality themes that we refer to as SPAR:

- Our services will be consistently **safe**
- Our care will be **personalised** to the individual needs of our service users
- Our processes and structures will guarantee **access** for service users and their carers
- Our focus will be on the **recovery** needs of those with mental illness

Our Trust values are Proud to CARE: Compassionate, Approachable, Responsible and Excellent. These determine what our patients, service users and their families should expect when they receive our care.

The experiences of our service users, their loved ones, carers, family and friends play a significant part in the overall service user well-being and vice versa. Equally, we recognise that our service users hold unique vantage points as expert witnesses to care. We know that their judgements are informed as much by the care they witness others receiving as the care they receive themselves.

We consider service users to be experts by experience; their experiences both good and poor empower them with a unique contribution to discussions about experience, quality and service improvement.

We know that doing the right thing at the right time and getting it right the first time for all people coming in to contact with the trust is priceless. Solving issues before they happen, takes less time than resolving them afterwards.

With that in mind our, service user standards ‘Caring for and caring about’ feature throughout this strategy as the cornerstone of supporting an excellent experience. They include very specific elements of the service user and carer experience that should always occur when people come into contact with health care professionals and the organisation.

Our standards are underpinned by the 6 Cs' care, compassion, competence, communication, courage and commitment and support our commitment to each of our service users, family and carers, every day, wherever they may be accessing services to do our best to ensure:

- You feel safe, in a clean and comfortable environment, with professional staff working together and with you to ensure you are in 'safe hands'
- You feel cared about, with kind and helpful staff with a courteous and respectful attitude towards you, listening and keeping you informed at every step.
- You have trust and confidence in your care and treatment, provided by competent, skilled and compassionate staff.

We thank you for your support and interest.



David Rogers
Chairman



Caroline Donovan
Chief Executive Officer

1. Introduction

North Staffordshire Combined Healthcare NHS Trust provides mental health and specialist learning disability services to people predominantly living in the city of Stoke-on-Trent and in North Staffordshire. A small number of services are provided to a larger population throughout the county and beyond.

We work from both hospital and community premises, operating from approximately 32 sites. Our main site is Harplands Hospital, which opened in 2001 and provides the setting for most of our in-patient services. We also provide a range of clinical and clinical support services to our acute healthcare partners at the Royal Stoke Hospital, part of University Hospitals of North Midlands NHS Trust.

Our main NHS Commissioners are the two local Clinical Commissioning Groups (North Staffordshire and Stoke-on-Trent CCGs) although we also work with specialist Commissioners for in-patient Children's Mental Health Services. Our Substance Misuse and some Learning Disability services are commissioned through the Local Authorities.

We are proud of our partnerships with a number of agencies that support people with mental health problems, including North Staffs Users Group, Approach, ASSIST, Brighter Futures, Changes, EngAGE, North Staffs Huntington's Disease Association, Mind, North Staffs Carers' Association, Reach and the Beth Johnson Association.

Focusing on quality and safety

We are committed to providing the highest quality Mental Health and specialist Learning Disability services. Our Board's business is driven by the quality agenda and during 2014, our Trust Board defined a new emphasis for the organisation based on four quality themes known as SPAR:

- Our services will be consistently **safe**
- Our care will be **personalised** to the individual needs of our service users
- Our processes and structures will guarantee **access** for service users and their carers
- Our focus will be on the **recovery** needs of those with mental illness.



The Trust's vision is:

To be an outstanding organisation providing safety, personalised, accessible and recovery-focused support/services every time.

Our Trust values are:

Proud to Care – Compassionate, Approachable, Responsible and Excellent



2. Patient experience – national context

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)

One of the recommendations from the Mid Staffordshire Inquiry (2013: p.85) states 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 further underpinned by ‘Compassion in Practice’ published by the Department of Health in December 2014, which clearly identifies six fundamental values: care, compassion, competence, communication, courage and commitment.

Additionally, high quality service user and carer experience:

- Is a right under the NHS Constitution for England
- Is a key factor within NHS strategies, including the Quality Governance Framework and the NHS Outcomes Framework 2015/16.
- Helps the Trust to maintain and increase public trust and confidence
- Has been linked to better patient outcomes including reduced length of stay
- More streamlined care pathways
- Lower staff turnover and absenteeism, improved job satisfaction
- Consistent, sustained improved culture of care
- Forms part of the Trust’s Quality Accounts
- Can be an indicator of poor quality care

Commissioner decisions around contracts are routinely expected to take into account information about patient experience. The Care Quality Commission also requires frequent and regular use of information on the views and experiences of those using services and those of their families and carers as a condition of registration.

3. Purpose/scope

The purpose of this strategy is to:

- Develop and support a culture that places the quality of the service user experience at the very heart of all that we do; 'Caring for and Caring About' in equal measure.
- Provide us with a framework and infrastructure to ensure that we keep listening, responding and improving in partnership with our service users and carers.
- Define the actions required to continually and proactively assess feedback identifying and responding to emerging themes and trends to support an improved experience.
- Support us to be in the top 20% for patient satisfaction in the NHS.

Measurement

A key part of the strategy will be to constantly design and implement inclusive and meaningful methods of feedback collection ensuring that ALL service users have an opportunity to share their experiences and provide feedback.

A service user and carer experience dashboard will be designed and implemented across inpatient and community services to record and monitor progress against improvement initiatives within each Clinical Directorate.

4. Current arrangements

We have established a Service user and Carer (Experts by Experience) Council. Two involvement events were held earlier in 2015 inviting service users, carers and representative groups to be involved in drafting and approving:

The Council held its first meeting in August 2015 meets monthly.

The Experts by Experience Council:

- Receive and monitor progress against the delivery of the Trust's Patient and Carer Experience Strategy.
- Promote service user and carer involvement in Trust activity at all levels.
- Seek assurance that the Trust has effective mechanisms and systems in place to capture the experiences and views of service users and carers, identifying and responding to any emerging themes or trends.
- Represent the views of service users and carers and where appropriate seek the views and feedback from other relevant local and national groups.
- Contribute to each of the Clinical Directorate meetings; offering contributions, ideas and opinions which reflect the voice of service users, carers and their families opposed to individual voices.
- Consider the impact of Trust policies and strategies for service users and carers.
- To contribute to the development of Trust policies and strategies ensuring appropriate consideration is given to the needs of service users and carers.
- Work on projects which have been identified as an area of focus by the membership and agreed by the relevant Board or Group Chair. This may sometimes require

collaborative working with other Board or Group members and at other times working autonomously.

- Receive and scrutinise results of any national or local patient, carer or staff audits and surveys.
- Participate in service user led inspections of care and service reviews including Board to team visits and Patient Led Assessment of the Care Environment (PLACE).
- Participate in the recruitment and selection process for new staff appointments.
- Participate in the selection committee for the annual staff REACH awards (Recognising Excellence and Achievement in Combined Healthcare).
- The Chair of the Council will have a seat on the Trust Board.

The Chair of the Council joined the Trust Board in January 2016 and attends both open and closed Boards. The Council provides feedback to monitor the Trust's performance against our service user and carer standards; 'Caring for and caring about'.

Our service user standards are underpinned by 'The 6 Cs' care, compassion, competence, communication, courage and commitment and support our commitment to every one of our services users, family and carers, wherever they may be, to do our best to ensure:

- **You feel safe**, in a clean comfortable environment, with professional staff working together and with you to ensure you are in 'safe hands'.
- **You feel cared about**, with kind and helpful staff with a courteous and respectful attitude towards you, listening and keeping you involved and informed at every step.
- **You have trust and confidence** in your care and treatment, provided by competent, skilled and compassionate staff.

The standards were introduced in July 2015 based on feedback from service users, family and carers. The standards convey key messages about expectations of staff behaviours and actions along with a number of supporting measurable metrics for each standard. They underpin the very essence of this strategy to support continuous improvement through listening and responding. Of equal importance, the standards set out very specific aspects of the patient, family and carer experience that should always occur when people interact with health care professionals and the organisation.

5. Delivering the strategy – our improvement actions

Each of the 10 improvement objectives listed below are inextricably linked with one or more of our service user standards and SPAR themes; safe, personalised, access and recovery.

Objective 1: We will listen to our service users, family and carers and act on their feedback.

We will develop a more proactive and robust approach to service user and carer feedback via local services and the Patient Experience Team. This will, in turn, help us to understand what is important to service users, family and carers in the delivery of high quality patient care and in the future design of our services.

Whilst the response from service users is positive, response rates are low.

We will also promote the increase in the response rates to the FFT and Patient Experience Discharge questionnaire across our services.

Patient Experience Discharge Questionnaire

A survey is offered to in-patients on discharge and reported quarterly.

To do this we will:

- Promote and support the successful implementation of the Patient (Expert by Experience) Council.
- Gain real time feedback from our patients in methods to suit their needs.
- Promote the Friends & Family Test and Patient Experience Discharge Questionnaire to improve response rates and feedback. Local teams will identify and respond accordingly to required improvements. We will do this by increasing staff awareness of the FFT and Patient Experience Discharge Questionnaire and various ways routes to submit a response. We will ensure that community team leaders are notified monthly of their return rates and that the FFT report is circulated to individual ward areas to provide feedback to encourage more returns.
- Local teams will take ownership of feedback to ensure that feedback is translated into local actions.
- Develop a more robust approach to promoting, collecting, sharing and using feedback from websites such as NHS Choices and Patient Opinion.
- Identify a patient experience champion for every clinical team.
- Use the 'You said...We did' posters to communicate to patients and visitors what actions have been taken as a result of service user feedback.
- Ensure that the 'you said...we did...Boards are updated on a monthly basis.
- Conduct a patient audit on how we collect feedback.
- Commit to sharing patient feedback with all staff to understand where we can make improvements.
- Commit to sharing patient feedback with external bodies.
- Identify a service user and carer champion for each service to gather and share patient feedback using a range of methods, including the use of the Friends and family test (FFT).
- Ensure that we clearly publicise the patient experience feedback mechanisms available.
- Develop methods of communication and representation from wider patient groups.

To measure improvement we will:

- Utilise Friends and Family feedback and the Patient Experience Discharge Questionnaire by sharing with staff, from the front line to the Executive Board on a monthly basis.
- Collect data and encourage feedback from patients at every opportunity.
- Monitor the feedback themes and outcomes from the 'you said...we did' Boards.
- Obtain and evaluate weekly feedback from the service user champions.

Objective 2: Develop robust systems and processes for gaining both quantitative and qualitative feedback.

The Trust collates a range of information about the services we deliver on a regular basis. This helps to measure performance around key indicators and inform the Board and

Commissioners about service quality and progress against improvement initiatives including national, local surveys and CQUINS (Commissioning for Quality and Innovation).

In addition to the Friends and Family Test, the Trust participates in all mandated National Service User Surveys and develops local service user experience surveys to further evaluate services. Other means of capturing service user experience include local feedback questionnaires, service user and carer forums, meetings, mystery shopping programmes, patient and carer storytelling, comment boxes, NHS choices and Patient Opinion.

Our plan:

- We will develop and implement a real-time feedback system for use in the organisation.
- We will ensure that all services provide people with the opportunity to provide feedback.
- We will continue to improve the process of capturing service user feedback, by further evaluating and developing our systems and people.
- We will maximise the use of social media - providing service users, 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.
- We will work with the Service User and Carer Council to further develop the current service user storytelling process, to ensure that an independent process of interviewing service users, family and carers is in place.
Stories will be collated in various formats and shared at the Quality Committee and Trust Board, as well as being used for staff training. We will ensure that stories (with consent) are available via the Trusts Intranet to ensure that they are easily accessible to staff across the Trust.
- We will continue to implement the Staff Friends and Family Test and review and correlate results accordingly with other feedback data; there is an increasing body of evidence which indicates an association between positively engaged staff and positive patient/service user experiences. For this reason staff stories will also be shared at the Quality Committee and Trust Board.
- We will ensure that a dedicated member of the Patient Experience Team supports clinical teams 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.
- 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 Staffordshire and Stoke-on-Trent.
- We will increase opportunities to cascade, celebrate and support learning from positive feedback received, which in turn will support sustained improvements, to further enhance the service user, family and carer experience.

Objective 3: Developing an open and honest learning environment

It is important that wherever possible, issues raised by service users, carers and staff, are responded to speedily and efficiently. Once immediate issues have been resolved it is essential that we learn from the situation and use the information to make improvements that will impact on future service user experience.

To do this we will:

- Continue to embed the Trust's 'Learning Lessons' initiative, sharing and cascading learning from incident reporting, PALS and complaints.
- Encourage and empower staff to proactively raise concerns and take immediate action to rectify a potentially harmful situation.
- Ensure all staff are aware of their responsibilities under the Duty of Candour requirements (openness and honesty).
- Implement the service user standards 'Caring for and caring about'.

To measure improvement we will:

- Utilise the Friends and Family feedback and Patient experience Discharge Questionnaire by sharing with all staff, from the front line to the Board on a monthly basis, evaluating our performance.
- Monitor and respond accordingly, 'Safety Thermometer' data.
- Identify and respond to emerging themes and trends from incident reporting, PALS and complaints monitoring.
- Monitor compliance against the new service user standards via direct feedback from service users, family, carers and staff. Feedback will be included in bi-monthly Patient Experience reports.

Objective 4: Develop systems and processes that link members of the Patient Council, service users, family and carers with teams to work in partnership to develop service improvements.

The Trust will work in partnership with the Service User and Carer Council and other partners to ensure that clear mechanisms are in place to enable people to provide feedback about their experiences.

To do this we will:

- Ensure that we have an up to date organisational register of all local service user /carer groups.
- Develop an annual work programme that details all planned projects requiring service user, family and carer involvement. This will be updated as new projects are identified.
- Put a clear process in place to ensure that services are able to identify and communicate with people who are willing to get involved in supporting service improvements.
- Re-introduce the Experience Based Co Design initiative and Triangle of Care.
- Promote and support the development of the Service User & Care Council (Experts by Experience) Council.

To measure improvement we will:

- Monitor the number of service improvement initiatives planned and executed within each Directorate, providing quarterly progress monitoring reports to the Directorate and Trust Board.
- Ensure we maintain and make accessible an up to date organisational register of local service user and carer groups.
- Support the successful implementation and development of the Service User and Carer Council and receive progress monitoring reports against the Council's work plan and outputs.

Objective 5: Every service will identify at least one improvement project/initiative around improved service user experience.

To do this:

- Each Clinical Directorate will coordinate this to ensure that this is 'live' across each of their relevant services – Service User and Carer Council members will be invited to be involved.
- A register of improvement activities will be maintained by the Patient Experience Team. This will be updated bi-monthly.

To measure improvement we will:

- Monitor the number of service improvement initiatives ongoing and planned within each Directorate, providing quarterly progress monitoring reports to the Directorate and Trust Board.

Objective 6: 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 service user experience, rather than on their perceptions, attitudes or opinions. This allows successful services to gain insights from which they identify opportunities for improvement. To support service improvement, robust data must be readily available to clinical teams to facilitate this.

To do this we will:

- Continue to develop the current Quality Dashboard, which will provide Service User and Carer Experience Data to enable services to have a timely snapshot view, of their performance and feedback using clear performance indicators as measurement.
- Provide data on a regular basis so that progress is tracked and monitored over time.
- We will routinely publish service user, family, carer and staff experience data.
- Where necessary agree improvement targets for each services

To measure improvement we will:

- Progress monitor results against agreed improvement targets.
- Where appropriate benchmark results against other similar organisations.
- We will ensure that areas of good practice are highlighted and shared accordingly.

Objective 7: We will ensure our service users are cared for by skilled and caring staff
Improvement to the service user experience will only come about with the commitment of Trust staff; both those in direct contact with service users and those in our supporting services.

To do this we will:

- Promote and embed the new service user standards 'Caring For and Caring About' underpinned by the 6 Cs' and Trust values, Proud to CARE.
- Review our staff customer care training to include the new service user standards. The standards clearly define the required behaviours that we expect our staff to uphold and equally hold one another to.
- Ensure all staff including volunteers; understand the important role they have in improving the service user and carer experience.
- Support and empower teams to pro-actively respond to feedback from service users, families and carers around improved experience.

To measure improvement we will:

- On a quarterly basis monitor staff training attendance at the customer care training.
- Monitor compliance against the service user standards through direct service user, family and carer feedback. The Service User and Carer Council will support this process.
- Listen to feedback from volunteers.

Objective 8: Supporting Carers - we will ensure that effective systems are in place to support early identification, involvement and support for carers of our service users.

To do this we will:

- Promote the importance of the early identification, involvement and support for carers through variety of communication mediums.
- Reinforce the importance of completing the expected Trust standards (in compliance with the Triangle of Care standards) and Standard Operating Procedure around supporting carers appropriately. This will be led via the clinical directorates and modern matrons or equivalent.
- Ensure that carers have adequate opportunities to feedback about their experiences.
- The Service User and Carer Council will support this process.

To measure improvement, we will:

- Conduct a planned annual audit of completed carers paperwork, including the Standing Operating Procedure (SOP)
- Continue to complete annual carers survey and responding accordingly.
- Complete spot checks to ensure required standards are being met – these will be completed by the relevant matrons or equivalent.
- Continue to support current carer forums, encouraging feedback and responding accordingly.

- Include progress summary within quarterly progress monitoring reports for service user, family and carer involvement.

Objective 9: Organising Your Care and Crisis Care (Community Mental Health Survey results)

Following each survey, we will do this by implementing an agreed action plan, including the following actions:

- Develop the use of Peer Support Workers.
- Incorporate the new service user standards 'Caring For and Caring About' into our values and behaviours framework.
- Introducing a contact/communication card for service users and carers to include details of the Trust website, Trust telephone number, name and contact number of Care Co-ordinator, OK to ask Campaign and space for appointment details.
- Conduct a pilot exercise in partnership with the Citizens Advice Bureau (CAB) for a staff member from the CAB to spend 1 day per week on the acute inpatient wards as a point of reference for service users and carers. We will also explore the feasibility of having a CAB staff co-located within Community Mental Health Teams.
- Incorporate the actions into the Patient Experience & Engagement Work Plan.

To measure improvement, we will:

- Undertake progress monitoring reports against each action to be presented to the Trusts Quality Committee and Trust Board via the Patient Experience and Engagement Group.
- Seek on-going feedback from service users and carers to clarify improvement outcomes.
- Evaluate outcome of the pilot with the CAB.

Objective 10: Feeding Back to Service Users and Carers - The Trust will further develop systems and processes to provide feedback to service user, family, carers and the Service User and Carer Council.

Individual's confidence is reinforced when they feel and see that they have been listened to. The Trust will harness the power of public accountability to build on its reputation as a provider of first class service user experience.

By providing feedback to service users, family, carers, the Service User and Carer Council, partnership organisations including Healthwatch and the local Overview and Scrutiny Committees about how we collate and use feedback to improve services, we are not only closing the loop we are also celebrating our joint successes and encouraging future involvement.

To do this, we will:

- Publish a quarterly service user and carer newsletter.
- Develop mechanisms to deliver messages to the wider community and harder to reach groups.
- Develop mechanisms to make sure all of our information is in accessible and meaningful formats.
- Develop opportunities for increased partnership working.

To measure improvement, we will:

- Ask our service users and carers to contribute to the newsletter and comment on the value/relevance of the newsletter.
- Ask the Service User and Carer Council to get involved in supporting and leading on this initiative so it becomes more service user led.

6 Reporting structure and monitoring

This strategy and supporting action plan will be monitored at quarterly intervals by the Trusts Service User and Carer Council and Patient Experience and Engagement Group. A quarterly progress report will be presented to the Trust's Quality Committee and Trust Board.