Appendix 6: Patient Experience Toolkit

This Patient Experience Toolkit is a dynamic overarching framework to support collaborative working with our patients. It will ensure that the Trust will improve patient experience and involvement together with the perceptions of carers and the public. Collaborative working will drive this toolkit forward, gaining assurance that patients are at the forefront of service improvements that meet their needs whilst reflecting best practice in the Trust.

This toolkit, along with the overall Communications and Engagement Strategy will be a living document and will be reviewed and developed over time. This will ensure that ongoing improvements are made, monitored and evaluated as the Trust progresses towards its application to become a Foundation Trust.

It will be critical to the success of this toolkit for everyone in the Trust to see this as part of their day-to-day work and they can quantify their success and be proud to be part of that success.

This toolkit has been developed to build on engagement at clinical service level within our Divisions, led by the Head of Nursing for each Division, and building up a bank of knowledge and expertise across the Trust. Examination of patient feedback will be key to the success of this toolkit and will highlight areas which need improvement to provide a better service for patients and supply the evidence for change.

6.1 Roles and Responsibilities
The Heads of Nursing will be central to the development and delivery of this patient experience toolkit and it will be their responsibility to engage their Ward Sisters to develop a culture where everyone takes responsibility for ensuring patients receive a good experience and this becomes a priority.

This will require the support of the Divisions, clinical leaders, corporate leaders and the Trust Board. The aim is to build a culture where all staff are trained, feel confident and empowered to resolve concerns or to escalate them to the appropriate person.

The Trust will develop the overarching aim of the toolkit to develop specific tools and techniques for each of the components of the toolkit.

A specific launch of the toolkit is planned for June 2011 as part of the delivering this Communication and Engagement Strategy.

Patient Experience Toolkit
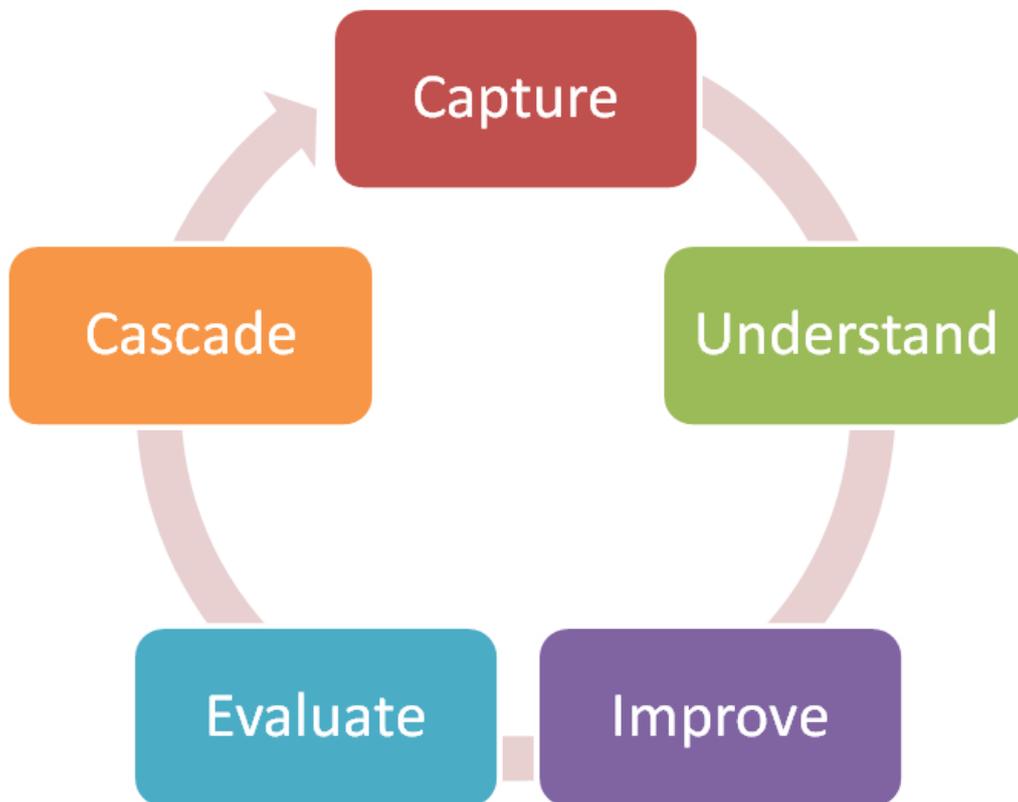
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The views and experience of our patients are the real test of our performance. By asking patients in a robust and systematic way about their experiences of care, treatment and our services can be measured and improvements made.

Patient Experience Surveys:
Our yearly Inpatient and Outpatient Surveys allow us to study patterns and trends to show if a problem is reoccurring over time and helps us to determine which groups of patients this may be affecting. The Care Quality Commission led surveys also help us to benchmark our organisation against others on a number of key performance indicators. An Action Plan is developed after each survey so that we can improve our patient experience.

The Trust had recently embarked on gathering real-time patient experience on our wards which is allowing for specific areas of care to be examined in much greater depth. Action plans are put in place to resolve issues much earlier than waiting for feedback from our national surveys.

Key Performance Indicators (KPI):
Clinical matrons work closely with clinical areas to report on metrics related to patient quality and patient safety. This key patient experience information is examined by a KPI meeting each week.

Focus groups:
Our Patient Panels have a good role to play as they are current or former patients of our services. Bringing the panels together and enhancing their role in the future (*Delivery Plan: Appendix 1*) provides an opportunity to listen to a range of opinions and experiences.

One-to-ones:
Conversations with individual patients can provide a real insight into specific issues and problems.

Patient and carer groups:
There are a number of established groups which work with specific clinical areas (the Breast care Support Group or the local Stroke Association) and has the ability to influence decision making.

Public meetings:
These provide an opportunity to gain feedback from members of the public through hospital open days; the Annual General meeting; a presence at significant events.

Patient complaints/ Patient Advice and Liaison Service:
Complaints requiring through investigation and enquiries to the PALs service can provide invaluable feedback. The Trust is able to learn lessons from any complaints and puts actions in place. The PALs service produces regular bulletins.

Working in partnership:
Cumbria LINk is working in partnership with the Trust and represents a large number of members who have an active voice in determining the shape and delivery of healthcare services. The trust also works with the local Health and Wellbeing Overview and Scrutiny Committee who represent local communities and oversee health issues on their behalf. The opportunity of becoming a Foundation Trust will give the Trust better communication links with its membership and Governors.

Understand
We need to understand what patients and carers are telling us about their experiences. Careful examination of patient feedback will highlight areas where we need to improve and supply evidence for change.

We need to have an understanding how our performance affects people who use our services throughout their patient journey and compare our results over time.

We need to consider themes that emerge from gathering evidence from our patients and determine what can be changed for their benefit on wards or what might need wider involvement and consultation.

Targeting areas where large numbers of patients report a problem will make a difference to a larger number of users of our services. We need to be able to identify appropriate touch-points (see Figure 5) to gain an understanding of any issues that need to be sustained, spread or improved.

Benchmarking

It is important to benchmark our results against other organisations to determine whether our performance in the area of patient experience is stronger or weaker particularly organisations that are of a similar size and have similar issues of rurality.

Benchmarking is a valuable tool internally and allows comparison across the organisation. If some areas of the hospitals i.e. a ward is performing particularly well, it is important to identify why to share this and adopt similar practices in the Trust. There have already been some good examples of this including the Productive Ward. A data base could be developed where teams could register and share their projects.

Improve

We want to provide the best possible experience we can for our patients - this means we need to look at how we can improve our services. We will work in partnership with patients, carers and the public to deliver good communication, engagement and involvement.

Patients and our key stakeholders should be involved in helping us to improve our services. Gathering feedback from our range of methods and the development of action plans should inform us of where the improvements could take place.

Involving patients, carers and the public in improvement is essential and with their participation, we can deliver successful patient-centred care.

We need to set goals and objectives on the feedback that we receive, delivering them in manageable steps and within achievable

targets and time frames. The development of action plans which are owned and agreed by all those involved is key to delivery.

Any improvements and actions need to be evaluated to assess their measure of success.

Evaluate & Cascade

Improvements made as a consequence of feedback from patients and carers should be shared widely with patients, carers, staff and other key stakeholders and the impact of improvements should be assessed.

Once we have received feedback from patients about their experiences and put in place improvements, it will be important to ensure effective communication measures are in place to inform our audiences. Communication can be delivered through:

- Direct feedback to individual patients who have raised issues of concerns (PALs)
- Message boards on wards and in departments "You Said . . . We Did"
- Inclusion in a new hospital newsletter for the public
- Posted onto the website - Have Your Say
- Press reports and stories
- Trust reports to committees and the Trust Board
- Presentations at conferences and events
- National websites (NHS Choices) and use of communication networks
- Local authority newsletters
- Regular stakeholder emails
- GP News

We need to keep our key external assessors informed - the Care Quality Commission; NICE; our clinical networks and ultimately, Monitor.

Within the cycle of improvement, we need to measure the impact any improvements we introduce through ongoing engagement with our patients and seek further feedback on how changes affect their experiences. The Communications Department will be responsible for delivering these actions.

Monitoring and Reporting

This Patient Experience toolkit is a framework for engaging, communicating and involving our patients. A robust process of monitoring and reporting will be needed if we are to demonstrate and evaluate how effective this engagement is over time and how we improve our services as a result.

Monitoring and reporting of feedback obtained from patients and the public will take place divisionally and Trust-wide through the Governance structure. Heads of Nursing already report on patient safety metrics on a monthly basis and Divisions report on complaints and PALs enquiries.

All this information should form the Director of Nursing, Quality and Governance report to the Trust Board and feature as a quarterly report to the Governance Committee.

Quarterly review meetings should commence for the Heads of Nursing to report on progress through their Divisions.

The Trust's Patient Panel (joint meeting) will determine the key areas of engagement and feedback on patient experience receiving regular reports from the Divisions on progress against these priorities.

Objectives for 2011

1. Raise awareness of patient experience and involvement and proactively marketed on the Trust's new website and within the local media

2. Engage the Trust's Patient Panels to support the delivery of this Patient Experience Toolkit and the direction of travel

3. Develop an annual programme of obtaining patient experience feedback for use at directorate, divisional and Trust level which reflects patient experience feedback alongside the Trust's objectives

4. Development of a ward-based patient experience toolkit to support staff to develop their skills with communication and engagement

5. Develop a training strategy to support staff to become more skilled at communication and engagement

6. Development of a database for sharing and disseminating good practice

7. Engagement and increased partnership working with the Trust's key stakeholders

8. Good communication methods and an action plan to ensure that feedback is being used effectively, improvements are made and not forgotten

9. Development of an action plan to track and measure achievements in year one

10. Development of objectives for 2012