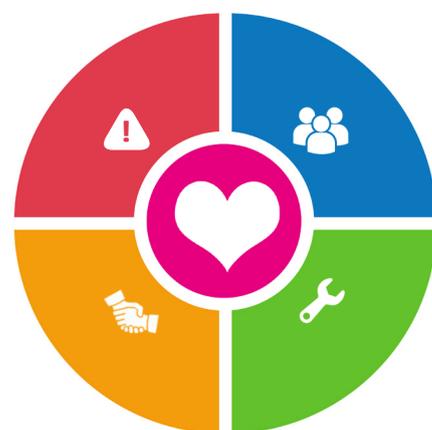




Patient Experience and Engagement Strategy



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“Patients are at the heart of everything we do. As a member of the team I always try to ensure that patients in my care receive the best quality care and have a good experience while at the Trust.”

Member of Team DBTH

Introduction

At Doncaster & Bassetlaw Teaching Hospitals NHS Foundation Trust, we are committed to improving the experience of our patients, families and carers. This means we want to work in partnership with our staff and patients to seek opportunities to improve the quality of care that we provide. We are constantly learning from the feedback that we receive and want to actively listen to our patients to understand what matters to them. We also recognise that sometimes we don't always get it right. In situations like this we pledge to our patients, families and carers that we will work with you to understand where care has not met your expectations and in doing so promise that this will not affect ongoing or future care that you may receive.

Patient Experience & Engagement is the golden thread throughout each enabling strategy with each describing how patient experience will be enhanced.

With the required components of 'quality' widely accepted as being the combination of safe, effective care and a positive experience for patients, the Patient Experience & Engagement strategy sets out the Trust's intention to ensure the best possible experience of person centred care for all patients. The strategy describes how staff will understand their responsibility in ensuring each patient not only receives excellent clinical care, but that it is delivered in a manner that treats them as an individual, recognises their needs and cares for them with empathy and compassion. The strategy outlines how this will be achieved, how progress will be monitored and within the implementation plan describes a structured approach to involving and engaging patients and working with stakeholders in the development and improvement of service delivery.

This embodies our trust values of We Care.

Our key principles to deliver this strategy are:

- To listen to our patients, families and carers
- To put things right if they go wrong
- To use feedback to identify opportunities for quality improvement
- To work in partnership with our patients, families and carers in co-designing services
- To establish standards of best practice identified using the Always Events® toolkit

This strategy is aligned to the following Trust enabling strategies that outline how we will deliver our Strategic Vision:

- ✓ *Clinical Quality & Governance*
- ✓ *Quality Improvement & Innovation*
- ✓ *People & Organisational Development*
- ✓ *Research & Development*
- ✓ *Communications & Engagement*
- ✓ *Information & Digital*

W

We always put the patient first.

e

Everyone counts – we treat each other with courtesy, honesty, respect and dignity.

C

Committed to quality and continuously improving patient experience.

a

Always caring and compassionate.

r

Responsible and accountable for our actions – taking pride in our work.

e

Encouraging and valuing our diverse staff and rewarding ability and innovation.

Executive Summary

“It’s not just about what is the matter?” but **“What matters to you?”**

Doncaster & Bassetlaw Teaching Hospitals NHS Foundation Trust (DBTH) is extremely proud of the excellent improvements in the quality of care we continue to provide to our patients. This strategy complements a number of other enabling strategies to deliver the **Strategic Vision 2017-2022** and provides national and local context in conjunction with evidence based research whilst supporting our commitment to ensuring that our patients, families and carers have a positive experience in our care. Patients tell us that clinical effectiveness and safety is important, but their experience of care matters to them just as much. In order to make informed decisions and choices about their care they want to feel listened to and supported. They want to receive efficient person centred care that meets their personal needs and expectations.



With increasing evidence that positive patient experience leads to positive clinical outcomes and good quality and financial performance, this strategy is instrumental in detailing how the Trust will undertake future patient engagement activity to inform the best possible patient experience.

Experience of care, clinical effectiveness and patient safety together make the three key components of quality in the NHS. Good care is linked to positive outcomes for the patient and is also associated with high levels of staff satisfaction (NHS England 2017). In order for patient experience to improve, we need staff who are motivated and involved with making improvements happen.

Evidence suggests that if staff feel valued, trusted and listened to by their leaders, they will be motivated to provide enhanced quality care for patients, families & carers whilst respecting and valuing each other. We will ensure that we undertake activities throughout the year where we engage with staff via a number of methods including national and local surveys, drop in listening events and open communication forums including the use of social media to reach as many staff as possible. The feedback provided by staff will be used to inform action plans to ensure we provide a positive work culture where staff feel valued, involved and empowered.

We want to listen to our patients, families and carers to understand what is important to them, to value their ideas and to learn when care doesn’t meet expectations. We want to work in partnership with our communities when reviewing services and let the ‘expert by experience’ be instrumental in redesigning and shaping future services. By undertaking engagement activities over the next year and beyond we intend to gather a wealth of knowledge and information to inform the future development of this strategy. This will be achieved through partnership working with our stakeholders, local Healthwatch and voluntary/advocacy services. These activities will feature as informal drop in sessions, social media campaigns, listening events and roadshows in addition to targeted patient group activities and surveys in alignment with our key priorities. In line with our Information & Digital Strategy we will harness the use of information technology in existing and new ways to support how we collect and use feedback and how we communicate with our patients, families and carers.

The Patient Experience & Engagement Committee (PEEC) will monitor progress and performance against this strategy and provide assurance to the Quality & Effectiveness Committee (QEC). Each Care Group will be expected to present patient experience and engagement feedback to PEEC as part of the annual plan. By sharing best practice and lessons learned we can deliver a cohesive approach to improving services and further enhancing patient experience collectively.

The Trust expects that all staff will embrace this strategy and demonstrate the key principles through the care and service that is delivered, whilst demonstrating trust values in all that we do. By creating a culture of continuous improvement that strives to deliver excellent, quality, patient driven services we are able to achieve our ambition.

Where are we now?

Delivering harm free care and improving patient experience continues to be the Trust's focus over the coming years and this is reflected in the Trust Quality Accounts in relation to patient experience as detailed in the following key priorities:

1. Reduce the number of complaints
2. Demonstrate increased Patient Engagement activities in each Care Group
3. Reduce the number of complaints relating to staff attitude and behaviour.

Whilst we seek to reduce the number of formal complaints, we actively welcome feedback relating to concerns and complaints. Over the coming year, by developing strategies to improve patient engagement and listening activities we will strengthen the patients and public voice in how we prioritise quality improvement initiatives for the future. This will also direct our commitment to delivering person centered care in collaboration with developing our workforce. This is described in more detail in the *Where do we want to be?* section.

"A person-centred approach puts people, families and communities at the heart of health, care and wellbeing. It means people feeling able to speak about what is important to them and the workforce listening and developing an understanding of what matters to people. It means working in a system in which people and staff feel in control, valued, motivated and supported" (Health Education England 2017).

At present the Trust undertakes various surveys to obtain patient, family, carer and staff feedback focused on our patient population (children and young people, adults and women and their partners accessing maternity services), these include:

- Picker National Inpatient Survey
- Picker Emergency Department Survey
- Picker Children & Young People's Inpatient & Day Case Survey
- Friends & Family Test (FFT)
- Paediatric survey
- End of Life Care survey
- Quality Assurance Tool - patient feedback & staff survey
- Staff survey
- Care Opinion.

This data will be triangulated to enable thematic analysis to identify key areas for improvement and to celebrate best practice based on the feedback received. As a consequence action plans are developed and implemented by the responsible Care Group and exception reported to the Patient Experience & Engagement Committee.

Governors

We value the support and commitment from our Governors, including those who are active members of the Patient Experience & Engagement Committee. We will seek through attendance at Governor meetings to increase Governor sponsorship of wards and departments and increase Governor engagement in undertaking assessments of our wards using the Ward Quality Assessment Tool (WQAT) and support PLACE assessments. We will also seek feedback from Governors attending public engagements.

The Trust's current membership strategy is to improve the quality and quantity of member engagement with a focus on underrepresented groups rather than increasing the overall membership numbers. We work to engage with our members, and support Governors to seek the views of members, in a number of ways, including:

- Continuing to communicate directly with individual members and keeping them informed regarding governors activities via the member magazine, Foundations for Health.
- Inviting feedback from members through the Foundation Trust Office.
- Holding member events on the topics that our members are interested in, and seeking their feedback on the services discussed.
- Governor attendance at local community events, targeting events at schools and colleges in order to recruit and engage with young people.
- Continuing to regularly inform the membership of the Trust's plans and activities through the member magazine, Foundations for Health.

Patient Stories

As we strive to improve patient experience we are constantly learning from a range of feedback, both positive and negative that we receive. Our ambition is to enhance this further by sharing patient stories on a regular basis to enhance the training and education our new and existing staff members receive in delivering compassionate care. We have recently worked in collaboration with a patient's family to produce a film which details the patients journey and highlights the importance of care with compassion, asking **'What kind of health professional would you like to be?'**

Patient Experience Team (PET)

Our Patient Experience Team (PET) provides an accessible service to patients and their families and carers. They strive to support our patients in first line resolution of concerns and complaints and work in collaboration with our Care Groups and Corporate Directorates if this is unachievable.



The Patient Experience team (PET)

Patient Experience & Engagement Committee (PEEC)

The Patient Experience & Engagement Committee (PEEC) meets on a monthly basis and works to an annual plan which includes presentations by each Care Group of engagement activity as well as analysis of patient experience data and feedback. Membership of the committee in addition to DBTH staff includes Healthwatch representatives from Doncaster and Nottinghamshire along with Clinical Commissioning Group (CCG) staff and two public governors. The committee is chaired by our Director of Nursing, Midwifery & Quality and reports directly to the Quality & Effectiveness Committee for Board assurance.

John's Campaign

We have also demonstrated our commitment to patient experience in delivering new ways of working in relation to supporting carers and enhancing communication with our patients. This has been through the implementation of John's Campaign which supports open access for the carers of our patients with dementia *"Behind its simple statement of purpose lies the belief that carers should not just be allowed but should be welcomed, and that a collaboration between the patients and all connected with them is crucial to their health and their well-being."* John's Campaign (2014).

This is Me

The introduction of our 'This is Me' document has enabled patients and their families and carers to provide clear information that is important to them at the time of receiving care in our hospitals. It provides valuable information to allow our healthcare teams to understand patient needs more effectively, particularly at times when our patients are at their most vulnerable.



Me & My Plan End of Life Care

The Me and My Plan project is using a specially designed folder, filled in by each patient, to tie together community and hospital care. The folder forms a hand held record of the patient's care choices and preferences and can be taken to appointments or brought in with the patient if they are admitted for inpatient care in a hospital or hospice. The Me and My Plan folders have been produced in collaboration with and endorsed by NHS Rotherham Doncaster and South Humber and the initial pilot was funded by Doncaster Clinical Commissioning Group. We strive to deliver the highest quality of end of life care to all of our patients, whatever their care setting and we can only achieve this by working together across boundaries to deliver services that our patients and their families deserve. We need to focus on dying well as well as living well.



Where do we want to be?

Our ambition is to continue on our improvement journey and to collaborate with our patients, families and carers as part of the process through engagement activities that will shape future service delivery. In addition to our existing engagement activities we want to broaden our approach to make it easier for our patient's voice to be heard.

Listening Activities

- Develop a range of drop in, listening events and roadshows in partnership with our local stakeholders including local Healthwatch and voluntary/advocacy services to take place bi-annually. The focus of these will be based on thematic outcomes from patient feedback and will also assist service redesign across the organisation, PLACE based and Accountable Care System. This is reflected in the Communications & Engagement Strategy.

Use of Technology

- In line with the Information & Digital Strategy we will use technology and social media to reach a wider population as part of our engagement activities.
- Develop apps to enable feedback to be provided and responded to in a more timely manner.
- Utilise technology to aid in the analysis of feedback, which can identify themes and trends in greater detail.

Experts by Experience

- Utilising the range of opportunities to engage with patients, build a bank of patients, families and carers as 'experts by experience' to contribute to service improvement and redesign as outlined in the Trust Quality Improvement & Innovation Strategy.

Patient Experience Team

- Change the focus of our Patient Experience Team from a reactive to a proactive service that seeks out evidence of patient experience, identifying and analysing themes to inform our future improvement priorities.
- Work closely with Care Groups to identify lessons learned and share that learning across the organisation through the Patient Experience & Engagement Committee, a monthly corporate bulletin and at least annual Patient Experience learning event to supplement bespoke ward/departmental training.

Butterfly Volunteers



The physical, emotional and spiritual stress of a terminal illness and death places great strain on families and carers. Butterfly volunteers will help by providing practical non-medical services so as to enhance optimal care in the final days of life. Just sitting quietly in a room and being there can be a great comfort. Our Butterfly volunteers will provide temporary respite to relatives and carers who often try to maintain a bedside vigil through fear of their loved one dying alone.

Patient Environment Group

The Patient Environment Group will be instrumental in driving improvement following the annual Patient Led Assessments of the Care Environment (PLACE) assessment to identify areas of work to address poor patient experience regarding the hospital environment. Membership of the group will be represented by Estates & Facilities, clinical staff and a patient assessor who will represent the perspective of the patient, family and carer. The group will meet bi-monthly and work to an agreed action plan to implement improvements and monitor progress reporting into the Patient Experience & Engagement Committee.

ReSPECT



ReSPECT is a process that creates personalised recommendations for a person's clinical care in a future emergency in which they are unable to make or express choices. It provides health and care professionals responding to that emergency with a summary of recommendations to help them to make immediate decisions about that person's care and treatment. "The ReSPECT process is all about thinking ahead with patients about realistic care options in a truly person-centred way. Ultimately the process aims to help people understand the care and treatment options that may be available to them in a medical emergency and enables them to make health professionals aware of their preferences." ReSPECT (2017)

PRASE Patient Reporting and Action for a Safe Environment



PRASE is a system for collecting patient feedback about how safe they feel whilst in hospital. It is designed to help staff identify things that are working well, and areas needing improvement. Feedback is collected using a patient safety questionnaire and a reporting tool (PMOS-30 and PIRT). With the help of PRASE hospital volunteers, patient feedback is collected using electronic mobile devices. Once enough information has been collected, a ward report is produced and guidance is provided to help make action plans and monitor their successes (Improvement Academy 2017). This will form part of our Patient Safety Improvement activities and will initially be piloted in one area with a scale up plan following analysis of the initial feedback.

Always Events® toolkit

NHS England (2016) in collaboration with the Institute for Healthcare Improvement has developed a toolkit for health care teams to implement to improve patient experience through partnership working with patients, their families and carers. In principle, implementation of the toolkit will support DBTH to: Strengthen the voice of those using health service, their carers and families and our staff- enabling a pro-active shift from a sole focus on “what is the matter?” to also include an inquiry into “what matters to you?”.

Through engagement activities we will seek to determine the aspects of patient and family experience that matter the most and as such should always occur when accessing our services.

The implementation of Always Events® in pilot sites has enabled health care teams to develop clear practices or behaviours that:

- Provide a foundation for partnering with patients, their care partners, and service users
- Ensure optimal patient experience and improved outcomes
- Serve as a unifying force for all that demonstrates an ongoing commitment to person and family-centered care
- Add meaning to the work of care team staff.

The implementation of Always Events® through the annual work plan of the Patient Experience & Engagement Committee will facilitate monitoring and compliance of Care Group activity and promote shared learning and best practice across our services.

#hellomynameis

In addition to enhancing our engagement activities we also want to improve our communication with our patients, families and carers and we will be launching the #hello my name is campaign to promote person centred compassionate care.

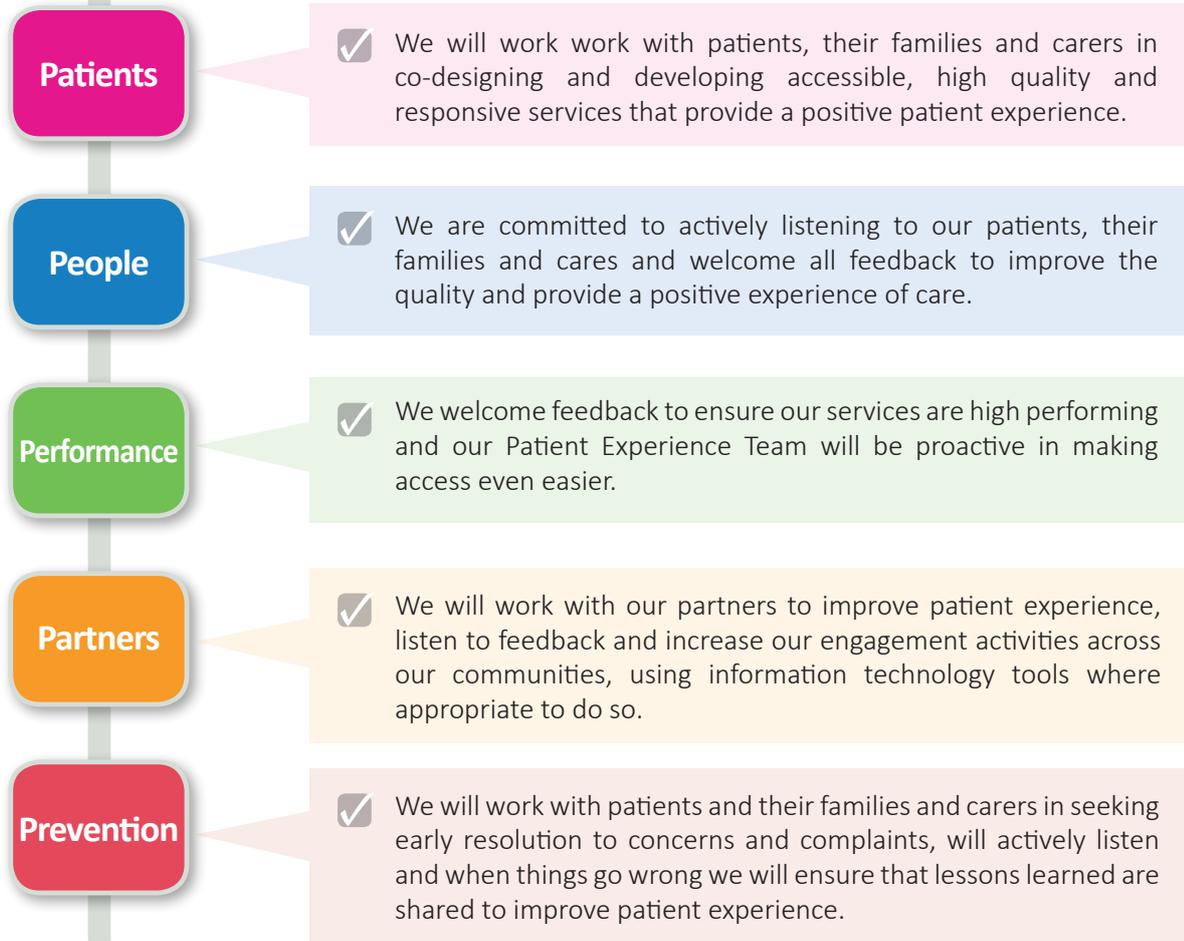
“In my mind **#hellomynameis** is the first rung on the ladder to providing truly **person-centred, compassionate care**”

Kate Granger, founder of



Objectives & Goals

Strategic Objectives



SWOT analysis

Strengths

- ✓ Established Patient Experience & Engagement Committee (PEEC) with Governor and partner organisation involvement.
- ✓ Use of patient stories (Gina's story, Carol's story).
- ✓ Clear leadership and oversight through the newly developed post of Head of Patient Safety & Experience.

Weaknesses

- ✓ Limited shared learning from feedback.
- ✓ Limited Patient Experience Team resource across all sites.

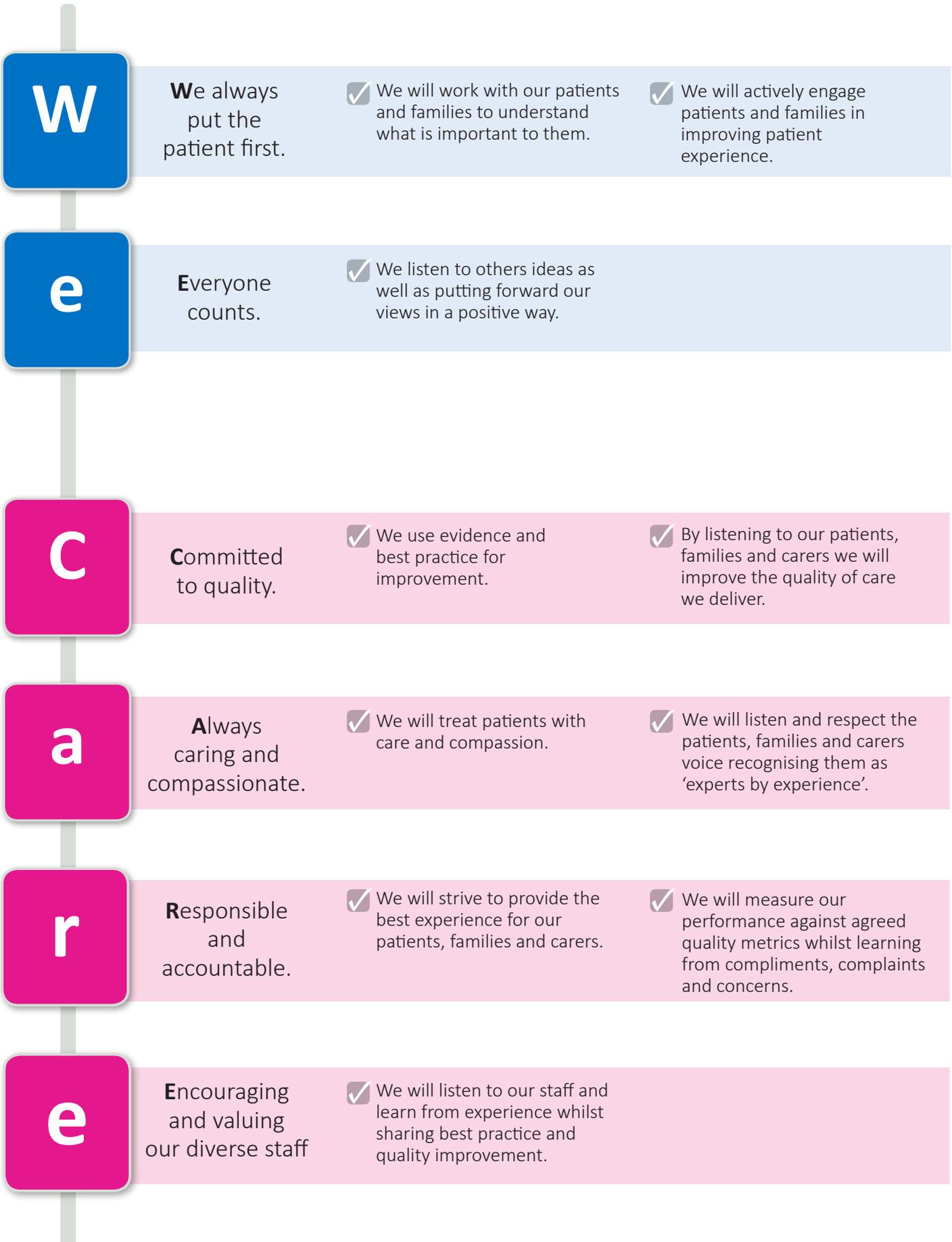
Opportunities

- ✓ Increase Care Group engagement at PEEC to share best practice and lessons learned and link directly to Clinical Governance Strategy and objectives.
- ✓ Develop the Patient Experience Team.
- ✓ Triangulate patient experience and staff feedback collaborating with People & Organisational Development in aligning key priorities outlined in both strategies.
- ✓ Patient Experience Day to link patient and staff experience.
- ✓ Explore IT options for seeking patient feedback from a wider group of patients, families and carers as outlined in the Information & Digital Strategy.

Threats

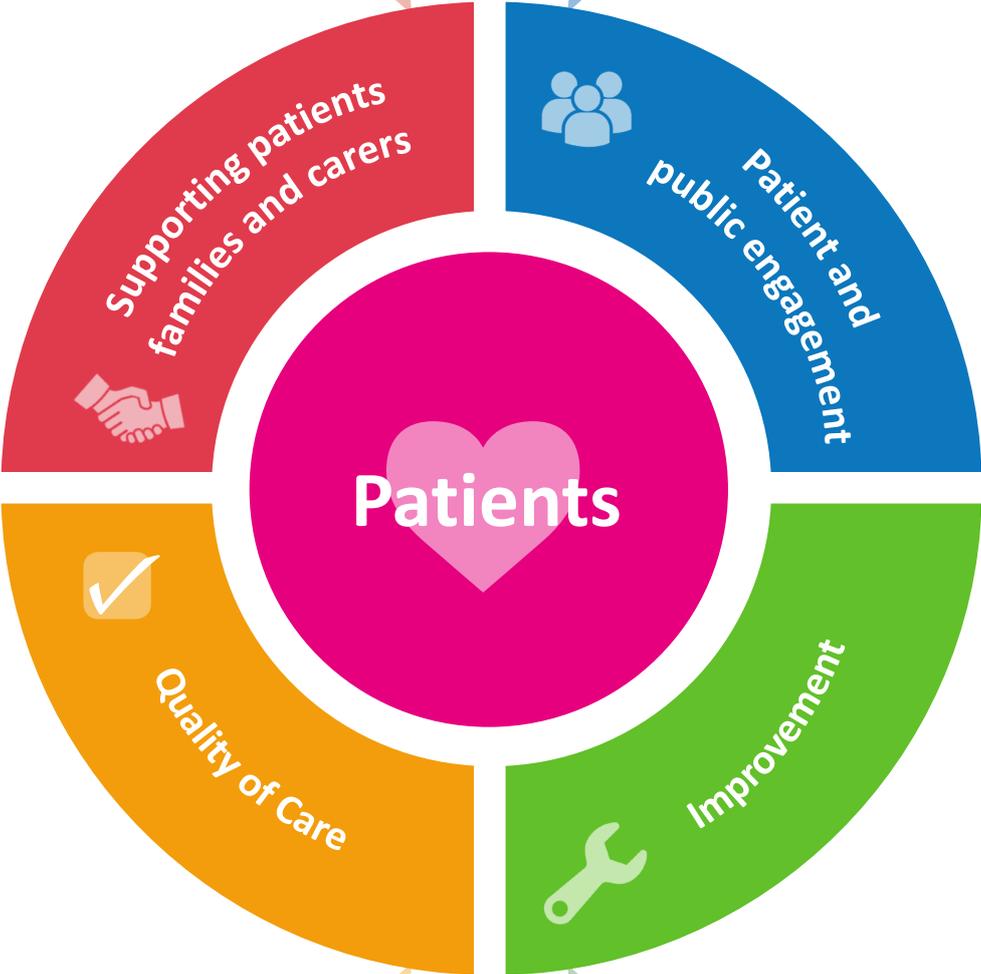
- ✓ Increase in formal complaints.
- ✓ Increase in complaints related to communication and staff attitude and behaviour.
- ✓ Patient harm.
- ✓ Poor staff morale.

How we will demonstrate our values and behaviours to improving patient experience.



- ✓ Improve patient experience and satisfaction with our services
- ✓ Ensure services are person centred and responsive to individual needs
- ✓ Enhance the role of the Patient Experience Team being forward facing in meeting patients needs and supporting engagement activities

- ✓ Develop patient stories for learning and improvement
- ✓ Use soft metric data to identify themes for improvement
- ✓ Collate all data to recognise best practice and develop plans to provide consistency of quality



- ✓ Provide consistency in quality of care using metrics to measure and monitor compliance
- ✓ Increase patient engagement per Care Group
- ✓ Reduce number of complaints, and those relating to staff attitude and behaviour

- ✓ Support staff in Qii initiatives to deliver improvements in care quality and patient experience
- ✓ Use the patient voice to drive the improvement priorities
- ✓ Recruit and train patients to participate in Qii projects

Person centred interventions to **reduce patient harms** and **improve patient experience**

<p>Use 'This is Me' Say 'Hello My Name is...' Ask 'What Matters to You?'</p>	<p>#EndPJparalysis Prevent Deconditioning by Early Mobilisation</p>	<p>#last1000days Value patients time</p>	<p>John's Campaign Encourage family participation</p>
<p>Good Hydration and Nutrition Social dining and china cups</p>	<p>Remove urinary catheters and other devices if appropriate Promote scheduled toileting</p>	<p>Good Wound Care Minimise tissue pressure and friction</p>	<p>Advanced Care Planning Me and My Plan</p>
<p>Enhanced Care Plan Low bed assesment Safety sides assesment</p>	<p>Reduce Polypharmacy Good Pain Control</p>	<p>Eyes, Ears, Teeth Look after vision, dentures and hearing aids</p>	<p>Check and Treat Postural Hypotension</p>
<p>Provide Healthy Sleep Environment Consider sleep diary</p>	<p>Orientation strategies dementia friendly environment Patient engagement activities</p>	<p>#Red2Green Achieving reliable care</p>	<p>Early Multi-disciplinary team involvement Consider MCA and DOLS Consider CGA</p>

Accountability & Timescales

Objectives

- ✓ Thematic analysis of patient, family and carer feedback to inform priorities for improvement.
- ✓ Reduce the number of complaints related to staff attitude and behaviour.
- ✓ Review the effect of implementing:
 - Butterfly Volunteers
 - Patient Environment Group
 - ReSPECT
 - PRASE
 - Always Events® toolkit
 - #hellomynameis campaign

Challenges

- ✓ Objectivity in coding and understanding what matters from the patient family and carer perspective.
- ✓ Engagement with all staff groups.
- ✓ Prioritisation of resources to enable improvement in the required timescale.

Actions

- ✓ PET to collate all data received and code themes for analysis.
- ✓ Individual and corporate educational activities provided through the PET and POD with Care Groups through 2017/18 to endorse Trust values, challenge unacceptable behaviours and embed best practice.
- ✓ Individual Care Group feedback will reflect the effect of the implementation and inform future annual work plan.

Outcomes

- ✓ Improvement/engagement plans agreed by PEEC to undertake over next 12 months. With Care group accountability monitoring through annual work plan.
- ✓ PET to undertake an organisational review of the last 12 months of data to identify key themes to agree a targeted action plan through PEEC.
- ✓ Quarterly report feedback to PEEC.



Evaluation & Monitoring

Monitoring of performance and compliance will be undertaken by the Patient Experience & Engagement Committee (PEEC) through a programme of activities outlined in the strategy action plan. A composite indicator/balanced scorecard including hard and soft metrics (national and local) will be developed to provide monthly surveillance of performance in relation to Patient Experience & Engagement. Care Groups will attend to:

- Discuss performance and quality metrics regarding patient feedback including complaints, concerns and compliments, identifying themes and trends.
- Demonstrate patient engagement activities.
- Share good practice and patient outcomes including patient stories.
- Feedback from patient surveys and present action plans/outcomes.
- Share learning from both positive and negative patient experiences- when things go wrong, how do we put them right?
- Present planned projects for improvement that require PEEC support.
- Describe Qii work that has been undertaken in the Care Group that directly links to patient experience and engagement and the outcomes of this work.
- Provide evidence of how patient experience and engagement outcomes have been shared within the Care Group and across the Trust.
- Demonstrate how Patient Experience & Staff Satisfaction correlate in their Care Group.

All activity will be presented in the form of a report to the Quality & Effectiveness Committee on a quarterly basis and will be reported annually in our Quality accounts.

Process Measures

- The number of unresolved and overdue complaints.
- The number of complaints where communication is a factor.
- The number of complaints where staff attitude and behaviour are a factor.
- Compliance with cohort sampling of patient surveys.
- Positivity of patient surveys.

Learning Measures

- A review of Care Group activities with an appreciative learning approach on what went well and what could have been improved.
- A review of the Patient Experience and Engagement Strategy by a range of stakeholders on learning what we are doing well, what we could do better, what is having the best outcomes.
- Review of qualitative and quantitative feedback about patient experience and engagement across the organisation with a summary of what is going well and lessons learned.

Outcome Measures

- Achievement of agreed patient experience and engagement action plans each year.
- Analysis of patient survey results and actions undertaken to address/improve.

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