

PATIENT EXPERIENCE AND ENGAGEMENT STRATEGY 2019-2022



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1. Introduction

The heart of our success as an organisation is the involvement of our patients, carers, their relatives and the community to give them the best experience of care possible. It is enshrined in the NHS Constitution and has become a key indicator of NHS performance nationally. We know that a positive experience during care leads to positive clinical outcomes. If a patient feels listened to and involved in their care they will respond better to medical, nursing and therapy interventions and also be better able to manage their own journey of care.

The Patient Experience and Engagement Strategy sets out the Trust's intention to ensure the best possible experience for patients, carers, their relatives and the community.

1.1 What is patient experience and engagement?

By patient experience and engagement, we mean taking every opportunity to hear from our patients, carers and their relatives, encouraging their active participation in shaping the way the trust provides its services. This includes involving patients in decisions about their own care, seeking feedback about their experiences, having patient representatives on boards and committees making decisions about changes to services, and involving the Trust membership and the public in planning future services, fundraising and volunteering. In this way we will make sure our services are delivering the care that people want in the way that works best for them. Where hard choices have to be made, it is right that the people affected are involved in the decisions.

1.2 Consultation with Stakeholders

The Strategy is based on what patients have told us through stories, complaints and concerns, compliments, national and local surveys, and patient forums, People in Partnership meetings, social media and feedback from Healthwatch Hillingdon.

2. Benefits of increasing patient and public engagement

2.1 The importance of patient and public engagement in the NHS has been emphasised by findings from a number of key reviews relating to failures of care in the NHS, including Berwick (2013), Francis (2013) and Keogh (2013). The Berwick review into patient safety recommended that patients and their carers should be 'present, powerful, and involved at all levels of healthcare organisations from wards to boards and be listened to and involved in every organisational process at every step of their care. Berwick argues for a broad level of engagement of patients in the processes of design, regulation and scrutiny of the system, not just in the individual clinician/patient relationship.

2.2 At an individual level, when patients feel involved in their care, listened to and informed, they are more likely to be satisfied with their care and have less anxiety, greater understanding of their own needs, improved trust and better relationships with their healthcare professionals.

2.3 Increasing effective volunteering, fundraising and participation in clinical trials has additional benefits for our organisation and our staff, as well as a positive impact on individual and community health and wellbeing more generally.

2.4 The trust will benefit from a better understanding of what changes and improvements are a priority from a patient's perspective, especially during a period of rapid change. Working with the people who use services helps planners 'get it right first time'.

2.5 The duty to involve patients in the development of services and in their individual care and treatment is central to the NHS Constitution, which describes the rights of patients and public to the provision of NHS services.

3. Links to other Strategies

The Patient Experience and Engagement Strategy is intrinsically linked to other related strategies identified below. It is aligned with the Trust's Quality and Safety Improvement Strategy (2016-21) and sets out a number of initiatives that will be delivered by 2022 to ensure that all patients receive care in a way that respects what is important to them and that patients are informed and involved in decisions affecting their future and that of the Trust.



4. Our Vision

4.1 The Trust's vision is to be an outstanding provider of healthcare through leading health and academic partnerships, transforming services to provide best care where needed.

4.2 The Patient Experience and Engagement Strategy is one of the ways in which we intend to achieve that vision. It sets out our commitment:-

- to work in partnership with our patients and involve them in decisions about their care
- to listen to our patients about what 'best care' means to them and where they wish to receive it
- to involve patients and public in decisions about the way services will change and develop in the future
- to support our patients in managing their own health and maximising their well-being.

5. Our Values

Our CARES (**C**ommunication, **A**ttitude, **R**esponsibility, **E**quity and **S**afety) values apply just as much to our approach to patient experience and engagement as they do to every other aspect of our work.

5.1 Communication - We recognise the importance of listening and communicating clearly. We aim to provide information that is relevant to patients, carers and their relatives, in a way that is easy for them to understand, with time to ask questions. We also aim to improve the way we communicate with each other to avoid misunderstandings and patients having to provide the same information over and over again.

5.2 Attitude - We strive to understand others' needs, responding with care, compassion and professionalism. We put patients first. We try to put ourselves in their shoes, responding to their needs and preferences.

5.3 Responsibility - We take responsibility for consistently delivering excellence and being open in all that we do. We take responsibility for doing our jobs to the best of our ability and speaking up when something doesn't seem right. We are honest if we make or observe a mistake, so that we can all learn and do better in future.

5.4 Equity - We recognise people are different and value everyone equally. We seek to understand what is important to our patients, recognising that this will vary from person to person. We reach out to people whose voices are less often heard. We look out for vulnerable patients and support them, especially those with learning disabilities, mental illness or dementia. We ensure that language is not a barrier to high quality safe care.

5.5 Safety - We view patient, staff and visitor safety as a priority. We strive to embed a culture of safety throughout the organisation, making safety the responsibility of every member of staff and encouraging our patients, carers and the public to help us maintain a safe environment for everyone.

6. Aims and objectives

The aim of the Patient Experience and Engagement strategy is to support our staff and our patients to work together to achieve a quality experience and the best possible outcomes for everyone who uses our services. We plan to achieve this aim in the following three ways:

- **Listening** to what patients tell us about their experience of our services and what matters to them about the way we do things, seeking the views of a diverse range of people from the communities we serve, including those people whose voices are less often heard, especially those of people with disabilities, learning difficulties, mental illness or language difficulties
- **Communicating** information and plans so that patients are better able to understand the decisions that may affect their own care, the services they use and the future direction for the Trust as a whole
- **Involving** patients, carers and their relatives in decisions about a patient's care, the design of services they use and strategies and policies for the Trust as a whole. Supporting and publicising a wide range of ways that people can get involved in supporting the Trust and improving its services.

6.1 Listening

We intend to improve our listening by reaching out to a wider range of people and responding to what they say. We will do this by:

- Asking patients what matters to them
- Using patient stories, targeted surveys or workshops to explore specific topics
- Asking people how we can reduce waste
- Making sure every specialty and department encourages feedback from all their patients
- Ensuring the Patient Advice and Liaison Service (PALS) has a more visible presence, encouraging more people to drop in
- Responding more quickly to issues raised by PALS and complaints and spreading the lessons learned
- Recognising and spreading good practice
- Routinely contacting people during and after they have experienced our services to hear directly from them how it went.



6.2 Communicating

We intend to improve our communications by:

- Providing information to patients about their own conditions making sure that they understand and have the opportunity to ask questions
- Meeting the Accessible Information Standard, making sure patients have access to information they can understand and any communication support they may need
- Ensuring that the Working Together booklet is used on all relevant wards
- Providing MAMA academy wallets to all pregnant women booking with key escalation messages
- Ensuring that the Carers Strategy and the End of Life Care Strategy are understood by staff and implemented throughout the Trust
- Providing better guidance about how to stay as well as possible, especially while living with a long term condition
- Making sure that relevant information about patients is shared among those who need to know, across health and social care, so that people don't have to keep repeating their story
- Providing more information about plans to change services and about the future of our hospital.



6.3 Involving

We intend to involve people more by:

- Encouraging patients to take a more active role in managing their health through a range of self-management initiatives, working with Hillingdon CCG, Hillingdon 4All and the London Borough of Hillingdon on a joined up approach
- Increasing the number, representation and engagement of our Trust members
- Involving patients from the start in the design of new improvement initiatives
- Increasing the scope of the Lay Strategic Forum, including membership of committees, supporting staff induction, safety walkabouts, interview panels
- Increasing the number of volunteers and widening the range of activities they support.



7. Key Initiatives for Improvement

We have identified the following nine opportunities to improve patient experience and engagement and ensure that we gain the benefits of patient involvement from the start:

7.1 Always Events®

The Trust will participate in the Always Events® initiative, making sure we find out what matters to people about their care and trying our best to deliver it. We have already started the process through an interactive session at a People in Partnership meeting and establishing our first Always Event in the Stroke Unit.

We will start small and learn from our experience before rolling out each improvement, involving patients at every step.

7.2 Hillingdon Improvement Practice

The Trust is committed to introducing the Hillingdon Improvement Practice, which addresses inefficiency, delay, duplication and other waste. Patients and their relatives

will play a key role in helping us to recognise waste and become more efficient with resources, including time, of both staff and patients.

We will involve patients from the start in this initiative, drawing on their experience to identify where we are wasting resources and how we can improve the quality and safety of care.

7.3 Children and Young People

The Trust is implementing the 'Ready, Steady, Go' project to help clinicians work with young adults to prepare them to transition to adult care and take responsibility for their own long term condition or health care. We start 'Ready' from age 11 to 13 years, 'Steady' from 13 to 16/18 years and 18 years is 'GO'. Although the Trust is at the beginning of its journey to implement this project it is an initiative that the Trust wishes to grow over the next three years.

We started rolling out this programme in children's out-patients in late 2018. In 2019 we aim to ensure that all children with chronic conditions aged 11-13 years have a discussion with their consultant about their condition and receive the 'Ready' leaflet. In a years' time we want to see those children turning 13 years of age receiving the 'Steady' leaflet and feeling confident about their condition.

A second project involves improving the transition of care for Children and Young People moving from paediatrics to adult care. This links with the 'Ready, Steady, Go' project but it is hoped that the appointment of a transition nurse to support children, young people and parents will help bridge the gap between children and adult services.

In the next 12 months our aim is to recruit a transition nurse as a pilot collaboration between The Hillingdon Hospital and Hillingdon CCG. This nurse's role will be to support children with complex needs in transitioning from children's to adults services. This role will provide support, advice, expert knowledge and guidance for adult nursing and medical colleagues and the young person and family to make this transition as smooth as possible. The Trust is committed to the roll out of the 'Ready Steady Go' project and therefore every effort will be made to support this initiative.

We are also raising awareness of the needs of young adults at transition meetings and the Children's Board Meeting.

Regular attendance at these meetings of senior clinicians, young people and parent representatives will ensure the young person's voice is heard and will raise the profile of the needs of young adults in the Trust and thus improve the patient experience.

We will

- ***strive to achieve an 85% target of getting children, parents and clinicians regularly attending the Children's Board meetings in three years' time.***

7.4 Transforming waiting

Nobody likes to be kept waiting. Patients and carers' time is valuable and should be treated as such. Patients tell us that waiting to be seen in our outpatient and Accident and Emergency (A&E) departments, or for their care to progress as an inpatient, is especially frustrating. Some aspects of waiting that we are determined to improve are:

- The system in outpatients for flagging that a patient has a carer (or is a carer) and should be fast tracked
- The punctuality with which clinics start
- The comfort of outpatient and A&E waiting areas
- The system for the receptionist calling the next patient, so that mistakes or misunderstandings are less likely
- Mitigating boredom in those requiring an extended inpatient stay.

We will do our best to improve the patient experience by:

- ***Better communications in reception areas***
- ***Improved clinic appointment systems***
- ***Focus on reducing waiting times in clinics and A&E***
- ***Access to water and sufficient chairs wherever people are asked to wait***
- ***Provision of reliable fast guest WIFI in waiting areas and on the wards***
- ***Volunteer support for inpatient activities such as befriending, games, breakfast club etc.***
- ***Hearing from our patients what would work best and how we can streamline our processes.***

7.5 Embedding a Safety Culture

We are determined to embed a strong culture of safety in the Trust, where everyone takes responsibility for playing their part, including patients and their visitors. We want patients to feel comfortable in speaking up about safety and we will refresh the Sign Up to Safety initiative encouraging staff and patients to become Safety Champions and providing them with the appropriate training. A safety culture will help us to ensure that patients benefit from their treatment without avoidable complications or setbacks.

We will:

- ***Deliver an active patient engagement model in patient safety improvement work***
- ***Reduce harms compared with 2018***
- ***>95% of hospital inpatients to have completed VTE risk assessment***
- ***90% of patients aged 75 or older who are admitted as an emergency will be screened for potential dementia***
- ***Review complaints and serious incidents in order to learn from them***

- ***Learn from deaths and take steps to reduce avoidable deaths in hospital, especially those involving transmission of infection, falls, medication errors and patients with dementia or learning difficulties.***

7.6 Moving care closer to home

People tell us they would prefer to have their care at home unless their condition absolutely requires them to be treated in hospital:

We will:

- ***Increase the support available to people at home, for example through supported discharge, Care Connection Teams, and specialist support to primary care.***

7.7 Self-management

People tell us they would like to take more control of their own health but sometimes lack the expertise and confidence to do so:

We will work with colleagues in the community to encourage improved self-management through:

- ***Using the PAM (Patient Activation Measure) initiative for patients with long-term conditions as a way of tailoring their care to their understanding, skill and confidence in self-management***
- ***Encouraging the use of apps that support self-management, such as My Health, My COPD and My Diabetes***
- ***Encouraging clinicians to take up training in Coaching for Health***
- ***Embedding social prescribing as an intervention used whenever appropriate.***

7.8 Developing Volunteering

We are very grateful to our existing volunteers. We know many more people would like to help and we would like to increase the opportunities for volunteering.

We will do this by:

- ***Identifying a wider range of volunteer roles***
- ***Providing training for the roles***
- ***Publicising the opportunities***



7.9 Development of Digital Services and promotion of Social Media

Social media is a popular way of communicating and sharing information and advice. It is a very quick way to reach very large numbers and to build trust. The Trust has continued to see a steady rise in visitors to its website with increasing numbers accessing via mobile platforms (smartphones and tablets). There is a growing expectation amongst the general population that information and access to services will be provided digitally where possible. Demand for digital information and access to services is only set to increase in the years ahead.

Patient tell us that they would like to receive their appointment letters by email, that they would like to be able to book, cancel and rebook an appointment on line and that they would like to be able to provide feedback via a comments section on the Trust's website.

We will do this by:

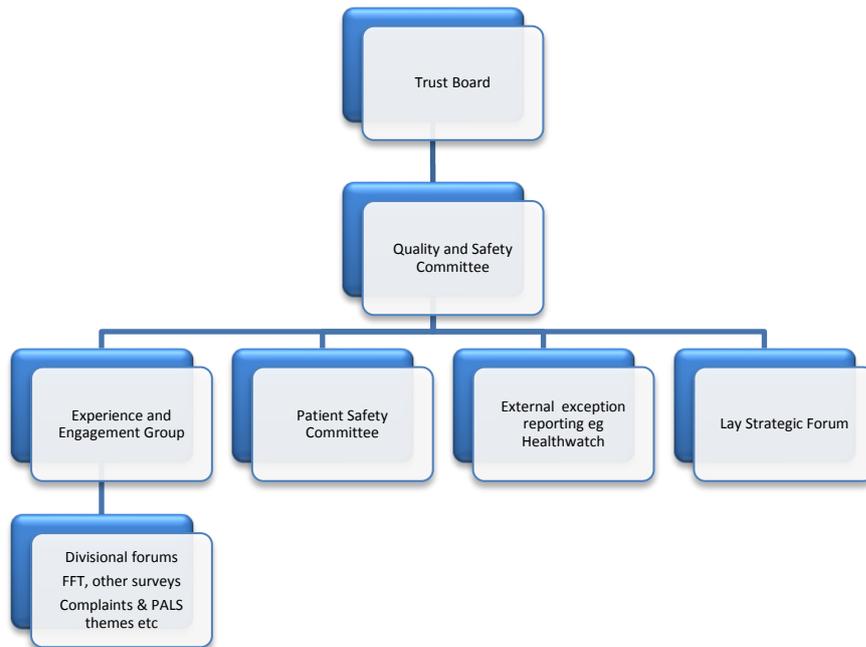
- ***Developing 'Health Help Now' App to be launched in 2020 which will provide patients with the opportunity to schedule appointments***
- ***Including a reference to the Trust's website, Twitter, Instagram and Facebook on written communication***
- ***Developing a section on the website for patients to provide both positive and negative comments***

8. Governance

8.1 Patient Experience and Engagement Governance

- **The Trust Board** is responsible for providing visible leadership and strategic direction to improve the engagement and experience of patients. It receives regular reports from the Quality and Safety Committee. Board meetings start with a patient story.
- **The Quality and Safety Committee** oversees the delivery of the Trust's Quality Improvement Strategy, which includes Patient Experience and Engagement.

- **The Experience and Engagement Group** reviews and responds to all aspects of patient experience making recommendations and monitoring actions to improve the patient experience.
- **The Executive Director of the Patient Experience and Nursing** chairs the Experience and Engagement Group and is responsible for the Patient Experience and Engagement Strategy and its alignment with the Quality and Safety Improvement Strategy.
- **The Head of Patient Experience and Engagement** is responsible for making sure that patient feedback is being sought in a range of ways, including reaching out to those less often heard, and that the results are analysed and regularly presented to the Experience and Engagement Group with escalation as required to the Quality and Safety Committee and to the Board. The Head of Patient Experience and Engagement also supports the Lay Strategic Forum and other patient engagement activities.
- **The non-executive lead for Patient Experience and Engagement** chairs the Lay Strategic Forum and is a member of the Experience and Engagement Group.
- **The Lay Strategic Forum** is a group of patients and carers who use the services of the Trust and are prepared to commit significant time to supporting the Trust as critical friends. Members of the Forum are known as Lay Partners.
- **The CEO of Healthwatch Hillingdon** is an appointed governor and a member of the Experience and Engagement Group, providing feedback on patient concerns reported to Healthwatch Hillingdon and undertaking special reviews on specific topics.
- **PLACE visits** are carried out by patients, governors and staff and are patient-led.
- **Safety Walkabouts** are carried out by Non-Executive Directors, Executives or senior managers, patients and governors.



9. Success Criteria

We will know we are successful when we have evidence that our processes for improving patient experience and engagement are reliable and are making an impact on outcomes for patients:

9.1 Complaints

- 100% of complaints in every division are acknowledged in 3 working days
- 90% of complaints in every division are responded to within 30 working days or within a timescale agreed by the complainant
- Themes in complaints are reported to the Experience and Engagement Group along with the improvement actions taken in response.

9.2 The NHS Friends and Family Test (FFT)

The NHS Friends and Family Test helps service providers and commissioners understand whether our patients are happy with the service provided, or where improvements are needed:

- 96% of patients recommend our Trust to family and friends in all surveys
- 30% response rate achieved for admitted care
- 20% response rate achieved for maternity care
- 20% response rate achieved for A&E (includes paediatric A&E and Minor Injuries)
- 6% response rate achieved for outpatient care
- Posters and comment reports are produced for each ward and department on a monthly basis. The results are uploaded on the Trust's intranet and a hard copy disseminated to senior ward/departmental staff to share with their local teams and to display publicly

- Patient comments are grouped into themes showing the number of positive and negative references and are regularly reviewed by the Experience and Engagement Group.

9.3 National Patient Surveys

The Trust undertakes a number of national surveys as part of the annual mandatory programme for acute services commissioned by the Care Quality Commission (CQC). The Trust is benchmarked against other trusts and awarded a score of either 'about the same', 'better' or worse for each question:

- 85% of patients felt they had a very good experience. A stretch target will be set on achievement of 85%
- To increase year on year the number of questions where the Trust is awarded 'about the same' or 'better'
- Each Division develop detailed actions in response to the areas identified as requiring improvement and these actions plans are presented and updated regularly at the Experience and Engagement Group
- Compare Trust performance with model hospital data with peer trusts.

9.4 Local Patient Surveys

Local patient surveys are undertaken in maternity, outpatients, inpatient wards and rehabilitation wards:

- 90% of our patients felt they were treated with dignity and respect
- 90% of our patients felt involved enough in decisions made about them
- 90% of our patients felt they received timely information about their care and treatment
- 90% of our patients tell us they were treated with compassion by the staff looking after them
- Through equality monitoring of patient feedback the Trust will provide evidence that no discrimination is taking place and that all groups are receiving the same level of service irrespective of background.

9.5 Compliments

- The Trust will keep a record of all written letters addressed to the Chief Executive or other Director complimenting a member of staff or team.
- A copy of the compliment letter will be sent to the respective individual/department

10. Strengthening Patient and Public Engagement

We are committed to encouraging engagement with patients, carers, their relatives, Trust members and the public.

10.1 Some specialties and departments have patient forums that are working well, for example the Stroke Forum, Maternity Voices and the Children's and Young People's Board:

- ***We will encourage all specialties and departments to develop a plan to seek and respond to patient feedback, e.g. through 'You Said, We Did' noticeboards***
- ***We will establish at least one patient forum per division.***

10.2 As a Foundation Trust, we depend on the support of our members. We are committed to working with our governors to maintain and increase our membership and publicising the various ways the public can be involved. These include

- Becoming a member of our Foundation Trust
- Attending a 'People in Partnership' meeting (quarterly, open to all)
- Becoming a patient representative on a working group/committee
- Attending one of our service specific user and support groups
- Joining focus groups and sharing similar experiences with others
- Joining our Readers' Panel to review our corporate information for patients
- Joining our team of volunteers who help and support staff and patients
- Providing feedback direct to our staff or via our Patient Advice & Liaison Service (PALS)
- Attending a public Trust Board meeting or Council of Governors meeting
- Getting involved in developing services for children and young people
- Joining us at our Annual Members' Meeting.





10.3 We will know we are successful in engaging patients and the public when:

- The average annual attendance at People in Partnership meetings has increased by 50%
- There are active Patient Forums in every Division
- The number of lay partners in the Lay Strategic Forum is maintained at around 15 and they feel valued and supported in their role
- At least 20 clinical leaders have been trained in working with patients as partners in design and quality improvement.

11. Dissemination

The strategy will be disseminated to:

- Staff, via the Trust's Intranet
- Patients, public, Governors and members via The Pulse newsletter and the public website.

12. Conclusion

This strategy provides a framework for a consistent approach to experience and engagement. It sets out the Trust's commitment to conduct meaningful engagement with our patients, staff and the public to shape services and improve experience. The strategy is supported by a strong organisational philosophy that promotes a culture of putting the experience of patients and staff at the forefront of everything we do to achieve the Trust's vision to be an outstanding provider of healthcare through leading health and academic partnerships, transforming services to provide best care where needed.

13. Acknowledgements

We would like to thank all those who have helped us shape this Patient Experience and Engagement Strategy. Your feedback and contribution have been key in helping us to develop a strategy that is meaningful to patients, carers, the public and staff.