

BOARD OF DIRECTORS
25th April 2019

INVOLVEMENT, EXPERIENCE AND VOLUNTEERING
PATIENT VOICE REPORT

LOCAL PARTNERSHIPS GENERAL HEALTH – CHILDREN AND YOUNG
PEOPLE’S SERVICES

1. PURPOSE

The main purposes of this monthly report are:

- To inform the Board of Directors of our headline patient experience indicators for the Trust as a whole, for each division and for a specific service.
- To summarise the full breadth of feedback received from service users, carers and staff over the previous rolling year about the specific service featured and any plans to address the main issues raised.
- To update the Board of Directors on the action taken to address the main issues raised about the service featured in the Patient Voice report three months previously.

This report collates and themes feedback provided by service users, carers and families via a range of mechanisms, and demonstrates that our services act upon this feedback to improve the quality of care they provide.

The Board of Directors also receive an annual summary report which highlights key achievements against the strategy and our strategic direction.

These reports are part of our approach to Service User and Carer Experience, outlined in full in the Involvement, Experience and Volunteering strategy (2019). Our approach meets the key national requirements set by the Department of Health and the CQC in relation to patient and carer experience.

2. EXECUTIVE SUMMARY

The Trust’s Service Quality Rating for January - March 2019 is **95%**. Our Friends and Family Test Score is **94%**.

This month’s Patient Voice Report focuses on **Local Partnerships General Health – Children and Young People’s Services** with headline information provided for the Trust as a whole, and for each division.

The report highlights all prominent and/or recurring feedback in the last year from the full range of feedback mechanisms used by the directorate, including those targeted at carers and families. The report then summarises the main issues identified and action taken or proposed to address these issues.

The main issues identified are:

- More clinics and home visits (Healthy Family Teams)

- More groups and sessions (Children's Centres)

The report also updates on the issues presented in the Patient Voices report submitted to Board three months previously, featuring **Local Partnerships General Health – South Nottinghamshire**. These were:

- Staffing levels
- Set times for community nursing appointments
- Time staff spend with service users/breadth of issues tackled in appointments

3. SERVICE IN FOCUS: LOCAL PARTNERSHIPS GENERAL HEALTH – CHILDREN AND YOUNG PEOPLE'S SERVICES

Services within the Children and Young Peoples 'directorate' portfolio include: Health Visiting, School Nursing, Family Nurse Partnership (now all working together as integrated 'Healthy Family Teams'), Children's Centres including speech and Language therapy, Looked After Children and Youth Offending Team (LAC and YOT), Oral Health Promotion, School Aged Immunisation Service (SAIS).

- Services are delivered across the County and some (SAIS, LAC/YOT) also into Nottingham City.
- Age range: 0-19yrs plus families.
- The universal aspect of our Healthy Family Programme offer means that all resident 0-19yr olds are able to freely access many of our services

3.1 MAIN ISSUES IDENTIFIED IN THE PREVIOUS PATIENT VOICE REPORT WITH A FOCUS ON LOCAL PARTNERSHIPS GENERAL HEALTH – CHILDREN AND YOUNG PEOPLE’S SERVICES (MARCH 2018)

ISSUE	DETAIL	ACTION TAKEN/PROPOSED – MARCH 2018	UPDATE - APRIL 19
<p>Children’s Centres – requests for more groups/activities</p> <p>Source: Feedback survey, Care Opinion</p>	<p>People have requested more groups or activities or to bring back groups or activities that have been stopped or reduced</p>	<ul style="list-style-type: none"> • Full timetables for districts produced and promoted on the SureStart Facebook page • Community displays updated on a regular basis. Copies of the ‘what’s on’ guide have been produced and shared with the Healthy Families Teams, so they can promote services on home visits • Facebook Polls appeared to be one of the most popular means of engagement. These were utilised to capture views and opinions which were implemented in to planning future groups • We ensure that we advertise in the centres for a week before it goes onto Facebook enabling regular service users who do not use Facebook to have a fair chance of booking onto activities • Co-delivery of courses improved links with the Children’s Centre and Family Service and strengthens service deliver by incorporating different expertise <p>Following feedback range of courses include:</p> <ul style="list-style-type: none"> • Confidence and self-esteem course delivered in partnership with ‘We Are Here’ as a follow on from Freedom Programme. • Mindfulness/Confidence building • Christmas Crafts course • Baby Yoga and XPLORE (Music & Movement session) • Workshop by Freed Beeches around body image, self-esteem and included strategies to developing confidence and resilience • Employability workshop organised and hosted by County Council • Save a Baby’s Life’ session ran in Newark as part of a ‘Ready Steady Wean’ 	<p>Following negotiations with commissioners a new more targeted service model has been agreed for the final 2 year extension of the contract which commenced June 18.</p> <p>Group work and courses being delivered by the children centre staff for those with an identified need are now:</p> <ul style="list-style-type: none"> • Forest Schools • Home Talk • Speech and Language Therapy 1:1 • Little Talkers • Let’s Play • ELKLAN • Now I am 2 • Volunteering Courses • Opening Doors with Confidence • Opening Doors to Employment • BABES breastfeeding groups • Infant weaning • Cook and Eat • Baby Massage • Holiday buddies • Perinatal Footsteps programme • Parenting Programmes including. Incredible Years, 1,2,3 Magic, Sleep Tight, Solihull, Empowering Parents, Empowering Communities <p>Universally accessible groups are still available but are now led by volunteers and supported by staff and include stay and play for under 5s, Under 1’s groups, allotment provision, twins group, little senses groups, dads groups etc.</p> <p>Universal groups are advertised via Facebook, the ‘Welcome Booklet’ handed out by Healthy Families Teams to all new parent and the new Trust website</p>

		<ul style="list-style-type: none"> Parents with twins and triplets have been empowered to create a group for themselves <p>However, please also note that due to a full service redesign by commissioners from June 2018 the service will be a referral only service with a limited menu of services for priority families.</p>	<p>created in partnership with parents and staff- see (https://www.nottinghamshirehealthcare.nhs.uk/ccs) which has a page for each district and a search function on the first page. In addition, staff have information boards they take when they visit community groups as to the services on offer.</p>
<p>Healthy Family Teams – requests for more visits or clinics</p> <p>Source: SUCE survey, Care Opinion</p>	<p>People have requested more home visits or clinics so they can have more face to face contact and support</p>	<ul style="list-style-type: none"> Full audit underway looking at appointment availability and all other ways service users might access the service to ensure capacity is appropriately distributed. Ongoing reviews of Self-Weigh sessions have resulted in increased provision across several areas. Number of Self-Weigh sites increased to meet the needs of the community previously not captured. Joint working with local children’s centres baby sessions has allowed for these to take place during term time in Brinsley and during the school holidays in Kimberley areas. 	<p>Audit has shown variation in how appointment sessions are utilised. Full review of allocation and appointment system is underway, supported by the Clinical Sustainability team, along with a review of the local ‘advice line’ systems and processes. As part of the review of the service offer in relation to the proposed contract extension we are looking at different approaches to the local advice lines and how better use of call handling technology might support this</p> <p>Regular review of comments in relation to self-weigh shows sustained reduction in concerns raised as parents adapt to new offer.</p>
<p>Healthy Family Teams – communication about appointments</p> <p>Source: Feedback survey</p>	<p>Several people raised issues about communication about appointments</p>	<ul style="list-style-type: none"> Updated information leaflets for parents and young people developed to support understanding of the new model and how to contact the service Attending school meetings to discuss the model, interventions and referral pathways into the teams. Contact details circulated to the Primary and Secondary School Attendance Leads. Attending the Behaviour Partnership Meeting to discuss the service offer and Tier 1 Behaviour Interventions to ensure clarity of the core offer. Exploration of text reminders facility in SystemOne so automated reminders are sent to parents 	<p>Teams remain continually vigilant in approach to communicating appointments to service users.</p> <p>Text reminder option is now available for clinicians to use to remind service users about bookable appointment sessions.</p> <p>We are developing a menu of interventions and referral criteria for key partners to support them to understand what our core service offer is and the local alternative resources available if we are not best placed to help.</p>

<p>School Aged Immunisation Team (SAIS) – better explanations about immunisations</p> <p>Source: Feedback survey</p>	<p>Several people asked for better explanations about purpose and side effects of immunisation</p>	<ul style="list-style-type: none"> • The SAIS team works closely with parents, carers and school staff to understand individual young people’s needs taking every opportunity to publicise the service and provide information on the health benefits of the immunisations • Close relationships with local schools now established via link staff which has enabled school support workers present during sessions. • We will continue this approach to offer children continuity and bespoke support including home visits where required • To promote and inform service users we will continue to utilise media platforms including NCC Schools Portal, NHCFT website and RECAP (digital information prescribing service) information prescription as well as more traditional means such as notice boards, posters and pull up’s within the health premises. • We proactively work with our partners in education to capture their experience / feedback by providing a brief questionnaire to each school after delivering the vaccination programme to assess satisfaction in how the service has performed and identify any areas for improvement. The feedback so far has been overwhelmingly positive. • Below is a selection of the positive comments: “The students were looked after and treated with respect. “All staff very friendly, approachable, patient and polite “Very supportive of children with SEN too. “The nurses are brilliant. It’s good to have some of the same ones each time as they appreciate that we know the pupils and let us highlight the ones that need TLC and different handling. <p>A specific case study of how NHCFT have positively</p>	<p>SAIS team remain vigilant and committed to ensuring all service users are fully informed and aware of potential side effects of immunisations and maintain excellent working relationships with schools and parents.</p> <p>The team collected feedback from Schools involved in the Flu programme and this informed the planning when arranging sessions for the 18/19. This has resulted in all 338 schools and alternative education providers engaging with the programme and 70% uptake in County and nearly 49% uptake in City. Parent/carers of all children who were absent were followed up and further catch up visits to schools were made. Parents who had not returned a consent form were also contacted to seek verbal consent.</p> <p>Self-consent continues to be offered to young people who have not returned a signed parental consent form. It has been accepted by young people and the vast majority of parents. In the 2017/18 school year self-consent influenced an increase in uptake of between 7% and 10% for the vaccines offered. Specifically in Bassetlaw offering young people the opportunity to self-consent helped us to improve our teenage vaccination uptake overall in 2017/18 academic year. For the HPV vaccine for this academic year we have achieved 95.7% of dose 2 which exceeds the Public Health England target. We have also sent consent packs to the eligible cohort of Home Educated children. We will continue to work with the local authority to ensure that we are reaching Home educated children.</p>
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		<p>affected the experience of one individual is the recent support we offered a child with Down's syndrome in mainstream school regarding an outstanding vaccination. As the injections in school had been refused NHCFT arranged a home visit. The individual was frightened having previously had a bad experience having blood taken at hospital. Working alongside the family our team completed the 1st HPV injection. A few weeks later we facilitated a further home visit for the DTP and Men ACWY, when we arrived at the house the young lady was actually waiting for the injection, with her arm ready. Mum recalled how her daughter was pleased with the first home visit and how well she had felt very positive about herself.</p>	
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3.2 DIRECTORATE HEADLINES AND MAIN ISSUES AND COMPLIMENTS

Data collected from the Service User Feedback survey:

	Current rolling quarter (Jan - Mar 2019)	Previous rolling quarter (Oct - Dec 2018)
Service Quality Score	97%	97%
Friends and Family Test (FFT)	98%	98%
SUCE survey returns	1700	1064
'Service made a positive difference' score	95%	95%

	Current rolling year (April 2018 – Mar 2019)	Emerging issues for the current quarter (Jan - Mar 2019)
<p>ISSUES (based on 537 responses to the 'What could we do better' question)</p> <p>Availability of services (Category: Access to Services) Comments mostly relate to Sure Start Mansfield Woodhouse & Warsop Children's Centres. All relate fairly simply to there not being enough groups, or an absence of specific kinds of groups.</p> <ul style="list-style-type: none"> 'Have more groups on at Warsop sure start' (Sure Start Mansfield Woodhouse & Warsop Children's Centres). <p>Activities (Category: Care/Treatment) Comments cover a range of locations, though HFT – Bassetlaw Rural has the highest number. Most comments relate to the amount or variety of activities being insufficient.</p> <ul style="list-style-type: none"> 'More group based activities/discussions rather than leaving people to it (Sure Start Hucknall Children's Centres' (Butler's Hill, High Leys & Market Place)). 	<p>34%</p> <p>8%</p>	<p>Availability of services (Category: Access to Services) 34% in last year, 50% in last quarter.</p>

Availability of information (Category: Communication) Comments are split between locations, with no one team standing out. The subject of comments is very mixed, covering the availability of all kinds of information. Relating to everything from how to give feedback, how to find out about services, to the quality of written handouts. <ul style="list-style-type: none"> • <i>'More accessible information ie. Facebook updates when groups are cancelled / not running' (Sure Start Stanhope & Carlton Children's Centres).</i> 	5%	
Appointments (Category: Care/Treatment) Comments are split between locations, with no one team standing out. The comments cover the difficulty of getting an appointment, and length or timing of appointments. <ul style="list-style-type: none"> • <i>'Getting on appointment seemed quite difficult. Staff seemed unsure of how to use booking syste' (HFT-Ashfield South).</i> 	4%	
Quality of Care/Service (Category: Service Quality/Outcomes) Comments are split between locations, with no one team standing out. Comments cover a wide range of different aspects of quality <ul style="list-style-type: none"> • <i>'The Midwife service was poor' (HFT- Newark).</i> 	3%	

COMPLIMENTS (based on 1047 responses to 'What did we do well' question)

Helpful/Caring/Friendly (Category: Staff/Staff Attitude)	27%	No emerging compliments
Quality of Care/Service (Category: Service Quality/Outcomes)	14%	
General (Category: Service Quality/Outcomes)	9%	

3.3 CARE OPINION

In the last year 329 stories have been published on Care Opinion commenting on Local Partnerships General Health – Children and Young People’s Services:

	April 2018 – March 2019	April 2017 – March 2018
Number of postings	329	531
Number of postings without a response	3	0
Number of postings <u>not</u> responded to within two working days	117	189
Number of postings rated as moderately critical or above	1	0
Number of postings which lead to a change in service	0	5

In the last year, one story was received relating to children and young people’s services rated as moderately critical:

System has changed in the 11 months since assessment

The parent of a girl accessing the speech and language therapy service posted a story explaining that she had experienced a long wait for the start of the treatment, then the assessment was short and the advice, although helpful, was not personalised. The parent was then told by the service that there would be a longer wait of 6-12 months to see someone from a different team due to funding cuts and lack of staff.

The general manager for specialist services responded to apologise for the parent and child's experience, and to correct some inaccuracies in the information the parent had been given about the service. They also encouraged the parent to contact them so that they could rectify the situation.

3.4 SUMMARY OF FEEDBACK CRITICALITY VIA FEEDBACK SURVEY

In the last year, Local Partnerships General Health – Children and Young People's Services received 4973 completed surveys, with many providing free text comments. These comments are coded for criticality, ranging from +3 (highly critical) to -3 (highly complimentary).

Highly Critical	Moderately Critical	Mildly critical	Mildly complimentary	Fairly complimentary	Highly complimentary
2	49	493	1323	2119	12

As Children and Young People's services received only two highly critical comments in the year, there are no areas of service receiving particularly high volumes of highly critical feedback.

3.5 CARERS, FAMILY AND FRIENDS SURVEY (FEBRUARY 2018 – JANUARY 2019)

Children and Young People's Services received 33 Carers, Families and Friends surveys in the period.

100% of carers would be extremely likely or likely to recommend our services if their friends or family needed similar care or treatment as a carer.

In relation to the key question themes, carers reviewed our services as below:

- Listening: 100%
- Communication: 99%
- Dignity and Respect: 99%

3.6 COMPLAINTS

Between April 2018 – March 2019, services within Local Partnerships Children and Young People's Services have been the subject of four full investigation complaints compared with one full investigation complaint in the previous 12 month period. The number by service is shown below:

Service	Total Apr 2018 - Mar 2019	Total Apr 2017 - Mar 2018
0-19 Healthy Families Team (Harworth)	1	0

0-19 Healthy Families Team (Rainworth)	1	0
0-19 Healthy Families Team (Mansfield)	1	0
0-19 Healthy Families Team (Hucknall)	1	0

The themes most often arising in complaints are outlined below:

Theme	Total Apr 2018 - Mar 2019	Total Apr 2017 - Mar 2018
Quality/Accuracy Of Clinical Records	1	0
Safe, Adequate, Coordinated Care	1	0
Info To/Communication With SU/Carers	1	0
Length Of Time To Be Seen/Service Availability	1	0

Some examples of the types of complaints received are given below:

- Service Availability/Length Of Time To Be Seen
- Info To/Communication With Carers/Relatives
- Communication With Other Services/Agencies

Outcomes:

The following table shows the outcome of four full investigation complaints closed during the period April 2018 – March 2019:

Outcome	Total Apr 2018 - Mar 2019
Complaint Upheld In Part	1
Complaint Not Upheld	3
Complaint Upheld	0
Complaint Not Pursued	0

Learning/Actions:

A range of learning points arose from the complaints that were upheld or partially upheld and some of these are outlined below:

- Ensuring families are reminded of our information sharing requirements with Social Care

Local Resolution Complaints

In addition to the full investigation complaints received, the service has had four local resolution complaints for April 2018 – March 2019 and seven local resolution complaints for the previous year raised by patients about care issues. The number by service are shown below:

Service	Total Apr 2018 - Mar 2019	Total Apr 2017 - Mar 2018
0-19 Children's Services (Oak Tree)	1	1
0-19 Children's Services (Warsop)	1	0
0-19 Children's Services (Beeston)	1	1
0-19 Children's Services (Park House)	1	1

The themes of the local resolution complaints are outlined below:

Theme	Total Apr 2018 - Mar 2019	Total Apr 2017 - Mar 2018
Info To/Commun With SU/Carers	3	2
Safe, Adequate, Coordinated Care	2	2
Appointment Arrangements	1	1

3.7 LOCAL MECHANISMS FOR FEEDBACK

Across all Children's and Young People's services staff employ a range of mechanisms to capture feedback from service users and their families, such as:

- Close working with parent and volunteer forums within Children's Centres.
- Collate and scrutinise comments, incidents and compliments, along with the aforementioned mechanisms (Feedback Survey, Patient Opinion, feedback from parent fora, feedback from key stakeholders and complaints).
- Engagement with range of school groups for staff and students; local integrated teams are developing links with local schools and student groups.
- Working with Nottinghamshire County Council (NCC), supporting a range of developments (contributing to Young People's Health Strategy) and events (e.g. Young People's Health Events). Developing links with NCC Schools Health Hub and working with stakeholders on pathways.
- We are awaiting feedback from a 'mystery shopper' review of our services that was undertaken in collaboration with NCC earlier this year and will respond to any feedback received.

4. MAIN ISSUES FOR THE SERVICE AND ACTION TAKEN OR PLANNED

In the table below, we highlight the most prominent issues (selected from the range of feedback presented) raised by service users and their carers' and families over the last 12 months, and the actions taken or proposed to address these issues:

ISSUE	DETAIL	ACTION TAKEN/PROPOSED
<p>More clinics and home visits (Healthy Family Teams)</p> <p><i>(Source: Trustwide survey)</i></p>	<p>People have requested more home visits or access to clinic sessions so they can have more face to face contact and support</p>	<p>Continuing issue – detail in table 3.1</p> <p>Audit of access to services has been completed and is currently being reviewed by management team. This is showing that there is a variation in the usage, staffing and availability of clinic sessions across the County. We are working with the 'Clinical Sustainability' team to develop more efficient processes and systems to reduce variation and are also developing protocol for staff to follow.</p> <p>We are also reviewing our allocation processes and how our local advice lines operate to ensure that there is efficient, effective and consistent response to referrals and queries from parents and young people</p> <p>Regular review of comments in relation to self-weight shows continued reduction in concerns raised. This has also been reviewed as part of the above audit and will factor into our negotiations with commissioners in relation to the proposed revised modelling for the contract extension</p> <p>We are currently looking at the potential to roll out the 2 year health review on a group basis for universal families where appropriate. This will provide opportunity for a group of parents /children to meet health professionals in a setting for the review, seek advice and support alongside meeting other parents / children</p>

<p>More groups and sessions (Children's Centres)</p> <p><i>(Source: Trustwide survey, Care Opinion)</i></p>	<p>People have requested more groups or activities or to bring back groups or activities that have been stopped or reduced.</p>	<p>Continuing issue – detail in table 3.1</p> <p>We are now commissioned to deliver a more targeted offer to vulnerable families rather than an entirely universal offer. There remains some universal provision in all children's centres that is now volunteer-led. We are ensuring these are well publicised (see above) and centres work closely with local communities to ensure that parents are also signposted to other local universal provision that is available.</p>
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5. MAIN COMPLIMENTS

Below are some of the comments from the feedback survey in response to the question 'What did we do well?' about Children and Young People's Services:

A SAMPLE OF COMPLIMENTS FROM THE SUCE SURVEY:

Your service was excellent it helped when I was really feeling discomfort and low. I work for the NHS so it helped to keep me doing my job. I felt I had excellent service. Steph the physio was excellent in helping me to understand my issues and gave me exercises to help. A big thank you to her Fabulous! (Health Visiting (Bassetlaw))

Came to see me very quickly when I was unwell, checked me over and advised me that I needed to go to hospital. Rang my GP and asked for him to contact me. Reassured me that my GP would only send me to hospital if he felt I needed to go. As a result I got treatment for pneumonia in time. Excellent service. (HFT- Ashfield South)

You saved our babies life and no words of thanks could ever be enough. (HFT- Mansfield South East)

Friendly and professional staff - made us feel so welcome. Very supportive and informative. We were very happy with our consultation and lovely staff. Pleasant waiting area and hardly any waiting time. Thank you (HFT- Newark)

The breastfeeding support I have received since having my baby has been fantastic. The support was always available. It was helpful, reassuring and friendly. I probably would not have continued breastfeeding if it wasn't for this support. (HFT- Newark)

The support I have had during my twins early years is outstanding. I have loved every minute of attending the classes and sessions. I know if ever i have any problems i can count on Sure Start for advice and help. These centres are essential. (Sure Start Eastwood, Brinsley & Awsworth Children's Centres)

A SAMPLE OF COMPLIMENTS FROM CARE OPINION:

'Being a Parent 'Empowering Parents, Empowering Communities' (EPEC course)'

I was lucky enough to become involved in a project last year 2018. This was a ten week course I attended at the Summer House children's centre in Sutton in Ashfield... The work is specifically to deliver evidence based parenting techniques to a broad range of parents...

On my completion of my training, I went on to co-deliver this course to a group of parents. We had excellent attendance and hands on participation...

I thoroughly enjoyed delivering the course and working alongside two fantastic colleagues. We helped one another out, worked well as a team. We all brought our own parenting highs and lows to the table in order to make the parents feel that they are not the only ones that have to deal with toddler outbursts or challenging behaviour. And that there is never such thing as a 'perfect parent'...

In working for this project, I feel on a personal level, I have gained a great deal from the experience of teaching in this style... It was very life affirming to realise that other parents were actually listening to the evidence based techniques I taught them and going home putting into practice these new strategies... Knowing that I could be the one to make changes in the home was truly satisfying... Knowing that I could influence positive changes to local families lives made me feel well equipped and able to transfer the skills in to my dream job of being a midwife.

I can't thank EPEC enough for helping empowering me, and opening the door to this wonderful opportunity of becoming a student midwife. Thank you so much. A special tribute to my EPEC hub coordinator Lindsey (you got me through my difficulties). And Andy for help in the early days and accepting me for the role.

Footsteps Perinatal befriender training

I completed the Footsteps Perinatal Training in March 2019. The training has given me an insight into how much of a difference the perinatal befriender role can make to a family. I'm looking forward to starting my new role soon.

COMPLIMENT RECEIVED BY THE PATIENT EXPERIENCE TEAM FOR THE HEALTHY FAMILY TEAM:

I recently visited KH at Dovecote medical centre. It was my daughters 10 month review - K was lovely to speak to and made me feel good about being a parent. I really enjoyed the experience and would like to thank her. Sometimes being a mum is tough and she made me feel as though I was doing a good job. I would also like to thank LV. L was equally as supportive when I first had my daughter. She helped me with an issue with oldest daughter too. (I just haven't had time to thank her yet!!)

6. UPDATE ON MAIN ISSUES PRESENTED IN THE PATIENT VOICES REPORT THREE MONTHS PREVIOUSLY

Below we update on any developments in relation to the main issues presented in the January 2019 report, featuring **Local Partnerships General Health – South Nottinghamshire**:

ISSUE	DETAIL	ACTION TAKEN/PROPOSED	UPDATE – APRIL 2019
<p>Staffing levels</p> <p><i>(Source: Trustwide SUCE survey)</i></p>	<p>Nurse recruitment continues to be challenging and mirrors both local and national context. Work is ongoing to bolster nursing resources within the nurse bank and in the development of a recruitment strategy to maximise recruitment opportunities and uptake.</p>	<p>Recruitment is underway on a continual basis and improving steadily – local teams are working with HR to support all initiatives to improve recruitment across the board.</p> <p>Nurse staffing levels continue to be formally reported to Board on a monthly basis.</p>	<p>Nurse recruitment continues to a challenge to the division and mirrors both local and national context.</p> <ul style="list-style-type: none"> • Proactive recruitment ongoing across respective services via NHS Jobs, recruitment fayres and Newly Qualified University clearing houses • Cohort 1 Nursing Associate programme have recently graduated and are now working within the clinical teams / introducing a new level of skill mix within the teams
<p>Set times for community nursing appointments</p> <p><i>(Source: Trustwide SUCE survey)</i></p>	<p>As much as possible, nurses attend appointments when expected, however, it is not possible to confirm exact timing of appointments due to the nature of the work. Nurses try to accommodate patients with specific time requests but this is not always possible.</p> <p>This may be more about setting the appropriate expectations, but is also</p>	<p>We will aim to improve on setting the right expectations at the initial visit into service. Nottingham West are in the development stages of producing a patient leaflet which will help to address this.</p> <p>There is ongoing work with teams to ensure the patients are clear that timed appointments cannot be offered all of the time but if indicated by need, the teams can and will do their best to accommodate.</p>	<ul style="list-style-type: none"> • Staff continue to set expectations with patients regarding timings of visits • A patient leaflet has been developed in Nottingham West Locality and is awaiting approval by the Plain English Reading Group. Once approved this will be piloted within the locality and formally evaluated prior to formal roll out

	<p>related to loneliness within the patient group and the importance placed on the nurses visit in the day of someone who spends most of their time at home awaiting their arrival.</p>		
<p>Time staff spend with service users/breadth of issues tackled in appointments</p> <p><i>(Source: Various)</i></p>	<p>Increased complexity and demand within clinical services impacts on the perceived quality of the clinicians visit in terms of time spent with patients. Patient and their families can perceive this as an inability/unwillingness to listen and to support the patient more widely (with their day-to-day domestic difficulties, for example).</p> <p>There is a requirement for additional services to tackle loneliness, personal wellbeing, mobility, social engagement, depression etc. within this patient group.</p>	<p>Staff will ensure that where these additional needs are identified patients are signposted to the relevant services.</p> <p>We will also aim to set the right expectations on the initial visit.</p> <p>Teams are working to achieve the CQUIN 11 - Personalised Care & Support Planning which will address some of these concerns.</p>	<p>Appointment of Care Co-ordinators within each locality will help to facilitate navigation and signposting to voluntary sector services to address loneliness and social isolation</p>

7. TRUSTWIDE AND DIVISIONAL HEADLINES

7.1 TRUSTWIDE AND DIVISIONAL SERVICE USER AND CARER EXPERIENCE (SUCE) HEADLINES

Statistics provided for the current rolling quarter (January - March 2019) and in brackets, previous rolling quarter (October - December 2018).

	TRUSTWIDE	FORENSIC SERVICES	LOCAL PARTNERSHIPS - MENTAL HEALTH	LOCAL PARTNERSHIPS - GENERAL HEALTH
SERVICE QUALITY SCORE	95% (96%)	82% (81%)	94% (95%)	97% (96%)
FRIENDS AND FAMILY TEST (FFT)	94% (96%)	75% (66%)	93% (93%)	98% (98%)
SUCE SURVEY RETURNS	4468 (5284)	491 (107)	1140 (2234)	2836 (2938)
'SERVICE MADE A POSITIVE DIFFERENCE' SCORE	92% (93%)	80% (81%)	89% (89%)	95% (94%)

7.2 CARE OPINION HEADLINES

Data collected from Care Opinion website (www.careopinion.org.uk):

March 2019	TRUSTWIDE	FORENSIC SERVICES	LOCAL PARTNERSHIPS – MENTAL HEALTH	LOCAL PARTNERSHIPS – GENERAL HEALTH
Number of postings	69	8	5	51
Number of postings without a response	5	0	1	4
Number of postings rated as moderately critical or above	3	0	2	1
Number of postings with changes made	0	0	0	0

In the last month, **three stories were rated as moderately critical** or above.

Finding out your status via your partner makes it feel like a prison

<https://www.careopinion.org.uk/opinions/642199>

A service user posts about their experience of being transferred to Ward B2 after attempting suicide. The explain that the way they were transferred was 'inhumane', and that on the ward it was incredibly difficult to sleep due to people being acutely unwell. The person says that they were given

misleading and contradictory information about voluntary status and sectioning, saying that they felt the section was used 'as a threat'. They also suggest that there was very little to do other than a communal TV and that food left a lot to be desired. They conclude that they believe mental health wards 'make people worse, not better'.

The acute service manager gave a detailed response to apologise for the person's experience, and explain the various elements of the person's posting that they would be acting upon, including liaising with the patient transport service that brought the person into B2, speaking to the ward manager about activities, liaising with catering regarding the food options and speaking to the ward leadership team about the inappropriate reference to the mental health act in relation to detaining people.

My Dad

<https://www.careopinion.org.uk/opinions/639432>

A family member posted about their dad who committed suicide posted to say that they felt his death was preventable had there been better communication between mental health services and other professionals, as their dad suffered with Crohn's disease and a serious mental health problem and they believe the combination of medicines made him very unwell.

The acute service manager responded offering condolences and explains that they will look into their dad's case further to understand the treatment plan and communication problems raised. The manager also offers to speak with the poster if they wish.

Unacceptable delays for incontinence products

<https://www.careopinion.org.uk/opinions/638533>

A family member posted about their mum who suffers with dementia and was transferred into a care home in September 2018. She had already had a continence assessment carried out but because the home was within a different district (but only 10mins from her home), the assessment was not accepted. A second assessment wasn't carried out until January 2019, which confirmed that more absorbent pads were required but in the intervening time, the lady had suffered with leaking pads and sodden sheets and her family had had no other option but to buy and deliver more absorbent pads to the home weekly.

The specialist continence clinical service lead responded to encourage the poster to contact her so that she could investigate further.

In the last month, **no stories indicated that a change had been made.**

7.3 TRUSTWIDE AND DIVISIONAL MAIN ISSUES

Data collected from the Service User and Carer Experience (SUCE) survey:

	Current rolling year (Apr 2018 – Mar 2019)	Emerging issues for the current quarter (Jan 2019 - Mar 2019)
TRUSTWIDE (based on 6776 responses to the 'What could we do better' question)		
Availability of services (Category: Access to Services)	10%	Availability of services (Category: Access to Services); 10% in last year, 16% in last quarter
Approach to Care (Category: Care/Treatment)	9%	
Waiting time (Category: Access to Services)	7%	
FORENSIC SERVICES (based on 840 responses to the 'What could we do better' question)		
Approach to Care (Category: Care/Treatment)	11%	No emerging issues
Staffing levels (Category: Staff/Staff Attitude)	10%	
Waiting time (Category: Access to Services)	9%	
LOCAL PARTNERSHIPS – MENTAL HEALTH (based on 1882 responses to the 'What could we do better' question)		
Approach to Care (Category: Care/Treatment)	15%	No emerging issues
Waiting time (Category: Access to Services)	8%	
General (Category: Service Quality/Outcomes)	8%	
LOCAL PARTNERSHIPS – GENERAL HEALTH (based on 4054 responses to the 'What could we do better' question)		
Availability of services (Category: Access to Services)	22%	Availability of services (Category: Access to Services); 22% in last year, 36% in last quarter
Appointments (Category: Care/Treatment)	8%	
Waiting time (Category: Access to Services)	6%	

7.4 TRUSTWIDE AND DIVISIONAL MAIN COMPLIMENTS

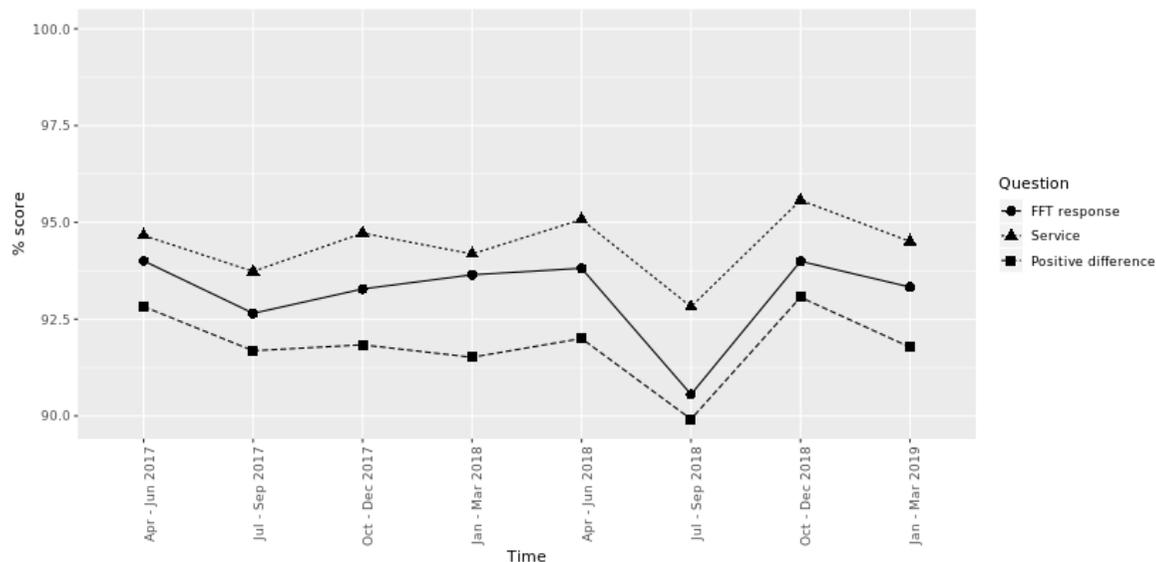
Data collected from the Service User and Carer Experience (SUCE) survey:

	Current rolling year (Apr 2018 – Mar 2019)	Emerging issues for the current quarter (Jan 2018 - Mar 2019)
TRUSTWIDE (based on 11238 responses to the 'What did we do well' question)		
Helpful/Caring/Friendly (Category: Staff/Staff Attitude)	18%	No emerging compliments
General (Category: Service Quality/Outcomes)	17%	
Quality of Care/Service (Category: Service Quality/Outcomes)	10%	

FORENSIC SERVICES (based on 877 responses to the 'What did we do well' question)		
General (Category: Service Quality/Outcomes)	16%	No emerging compliments
Helpful/Caring/Friendly (Category: Staff/Staff Attitude)	11%	
Being listened to (Category: Communication)	11%	
LOCAL PARTNERSHIPS – MENTAL HEALTH (based on 2910 responses to the 'What did we do well' question)		
General (Category: Service Quality/Outcomes)	20%	Approach to Care (Category: Care/Treatment); 11% in last year, 15% in last quarter
Approach to Care (Category: Care/Treatment)	11%	
Helpful/Caring/Friendly (Category: Staff/Staff Attitude)	11%	
LOCAL PARTNERSHIPS – GENERAL HEALTH (based on 7447 responses to the 'What did we do well' question)		
Helpful/Caring/Friendly (Category: Staff/Staff Attitude)	24%	No emerging compliments
Quality of Care/Service (Category: Service Quality/Outcomes)	16%	
General (Category: Service Quality/Outcomes)	16%	

7.5 TRUSTWIDE AND DIVISIONAL TREND IN SERVICE QUALITY, FRIENDS AND FAMILY TEST AND KEY QUESTION SCORES

The below graph shows the Trust wide trend in Service Quality Score, Friends and Family Test Score and scores on key questions asked in the Service User and Carer Experience survey.



For divisional trend graphs, please follow the links below:

- Local Partnerships - Mental Health: bit.ly/2AUtmcn
- Local Partnerships - General Health: bit.ly/2CEJgYH
- Forensic Services: bit.ly/2MiUGWj

8. RECOMMENDATION

The Board of Directors are asked to note and comment on the paper.

Paul Sanguinazzi
Head of Involvement and Experience

Amy Gaskin-Williams
Involvement and Experience Manager

April 2019