

**BOARD OF DIRECTORS
29TH JUNE 2017**

**INVOLVEMENT, EXPERIENCE AND VOLUNTEERING
PATIENT VOICE REPORT**

**LOCAL PARTNERSHIPS, GENERAL HEALTH –
COMMUNITY SPECIALIST SERVICES**

1. PURPOSE

This is the monthly Patient Voice report produced for the Board of Directors. The main purposes of this 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 six months 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.

The report is part of our approach to Service User and Carer Experience which is a key part of the Involvement, Experience and Volunteering strategy (2015 – 2018). One of our three involvement aims is to change services by listening and responding to service user and carer views and aspirations.

Our approach is also based on the Trust's values and aligned to Department of Health priorities. As an NHS funded service we are required to carry out the Friends and Family Test. We must also meet the CQC Standard that requires us to seek and act on feedback so we can continually evaluate services and drive improvement.

As part of the Trust's development of its approach and the Francis Report we are continually looking at how we can improve both how we listen and respond to the patient voice. Our [feedback website](#) enables the public to leave and view feedback and also able see the changes we have made in response to feedback. The website also enables staff to view feedback about their team.

As part of our approach the Board of Directors receives a quarterly Involvement, Experience and Volunteering Report which looks at key achievements in the Involvement, Experience and Volunteering strategy and outlines our strategic direction and next steps. This Patient Voice Report is a monthly report and focuses on key patient stories and comments raised by service users, patients and carers.

2. EXECUTIVE SUMMARY

The Trust's Service Quality Rating for March - May 2017 is **94%**. Our Friends and Family Test Score is **95%** (this is the percentage of people who would be extremely likely or likely to recommend our services if their friends or family needed similar care or treatment).

This month's Patient Voice Report focuses on **Local Partnerships General Health – Community Specialist Services**, with headline information provided for the Trust as a whole, and for each division. The report also updates on Children and Young People's Services (featuring in March's report).

The report highlights all prominent and/or recurring feedback in the last year from the full range of feedback mechanisms used by Community Specialist Services, 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:

- Paediatric Speech and Language Therapy waiting times
- Communication at the Children's Development Centre (CDC)
- Dental waiting times

It also updates on the issues presented in the Patient Voices report submitted to Board three months previously, featuring **Children and Young People's Services, in March 2017**.

These were:

- Concerns raised about the introduction of opportunities to self-weigh babies
- Requested first aid courses in Broxtowe Childrens Centres and identification of growing requests from parents/carers for a Paediatric First Aid course at Hawtonville Childrens Centre
- To improve communication and format of advice provided

3. SERVICE IN FOCUS: LOCAL PARTNERSHIPS GENERAL HEALTH – COMMUNITY SPECIALIST SERVICES

Community Specialist Services incorporate the following services:

- Podiatry and Podiatric Surgery
- Adult Speech and Language Therapy
- Nutrition and Dietetic Services
- Dental Services
- Paediatric Speech and Language
- Physiotherapy and Occupational Therapy
- Paediatric Phlebotomy
- Training Team
- Specialist Community Children's Nursing

The services work across Nottinghamshire, including some services within Bassetlaw and Nottingham City, developed to meet the needs of adults and children and young people with disabilities and complex healthcare needs. We work in partnership with other providers of services to ensure continuity of provision and joined-up care.

The teams provide a wide range of services to meet a variety of patient needs, including specialist Dental Care, Diabetes Group Education Sessions, Podiatric Surgery and a specialist multi-disciplinary service for children with complex needs.

3.1 MAIN ISSUES IDENTIFIED IN PREVIOUS PATIENT VOICES REPORT WITH FOCUS ON LOCAL PARTNERSHIPS GENERAL HEALTH – COMMUNITY SPECIALIST SERVICES (JUNE 2016)

Below we update on the main issues identified (and the actions proposed in response) in the previous report which focussed on Local Partnerships General Health – Community Specialist Services, which was presented at the Board of Directors in June 2016:

ISSUE	DETAIL	ACTION TAKEN/PROPOSED
<p>Waiting times for children, for both their first 'package of care' and the wait between packages of care for Children's Speech and Language Therapy</p> <p>(Source: Complaints)</p>	<p>Many additional comments made by parents about the long waiting times for their first 'package of care' and the wait between packages of care.</p>	<p>Reported in June 2016: Waiting times for first appointments is now at an all-time low, with first appointment offered within two weeks (from an average of 11 weeks). Waiting time for follow on appointments has subsequently increased with all waiting longer than clinical due dates.</p> <p>Update (June 2017) Waiting times across the SLT Service for assessment and treatment being discussed as part of the 'QFI' project and the 'SLT Service Review'. The SLT is now working as part of an integrated team across three localities. Strict triage guidelines have been implemented to ensure appropriate referrals are accepted and allocated to the appropriate team member. Locality leads and locality service managers meet regularly to monitor demand, and staff to be relocated to meet this demand. Work has been undertaken to streamline report writing so increasing capacity and work at reducing waiting times. The service have been tasked with producing an action plan by the end of June, to reduce waiting times to below eight weeks and to reduce the number of waiting lists in use.</p>
<p>Podiatric waiting lists</p> <p>(Source: Trustwide survey, waiting list tracking)</p>	<p>Comments relate to waiting time for appointments.</p>	<p>Reported in June 2016: The waiting times vary across the geographical location depending on demand; we offer appointments with the minimum wait if patients are willing to travel. Whilst patients perceive that they wait a long time, services have not breached the 13 week wait and have to work to an eight week wait for AQP (Any Qualified Provider) that hasn't been breached. Employment of three new podiatrists across the service to respond to waiting lists is expected to help. All posts have been recruited to, new staff now in post.</p> <p>Update (June 2017): A new phone system has been installed and there is now one Single Point of Access (SPA). Waiting times in Podiatric Surgery are within the 18 week RTT time frame and currently operates between 8-13 weeks.</p>

<p>Access to Services - specifically regarding Musculoskeletal Physiotherapy</p> <p>(Source: Trustwide survey)</p>	<p>Many comments were received regarding Musculoskeletal Physiotherapy.</p>	<p>Reported in June 2016: The service is now decommissioned.</p> <p>Update (June 2017): N/A</p>
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3.2 DIRECTORATE HEADLINES

Data collected from the Service User Feedback survey:

	March to May 2017	December 2016 – February 2017
Service Quality Score	97%	97%
Friends and Family Test (FFT)	99%	99%
SUCE survey returns	439	706
Patient Opinion postings	31	36
'Service made a positive difference' score	94%	96%

3.3 DIRECTORATE MAIN ISSUES AND 'BEST THING'

Data collected from the Service User Feedback survey:

	Current rolling year (June 2016 – May 2017)	Emerging issues (March – May 2017)
ISSUES (based on 1037 responses to the 'What could we do better' question)		
<p>Appointments (Category: Care/Treatment)</p> <p>The majority of these comments relate to the availability of Podiatry appointments and waiting times for Paediatric SLT. Within the last quarter, this theme represented 29% of all comments.</p> <ul style="list-style-type: none"> 'Quicker appointments, so less time waiting 4 weeks instead of 2 weeks' (Podiatry, Bingham) 	17%	<p>Appointments (Category: Care/Treatment) 17% in rolling year, rising to 29% in current quarter</p>
<p>Waiting time (Category: Access to Services)</p> <p>The majority of the comments relate to waiting times for Paediatric Speech and Language Therapy.</p> <ul style="list-style-type: none"> 'The referral time was very quick but the follow up time of 9 - 10 months is far too long to wait.' (Paediatric Therapies: Speech & Language Therapy) 	14%	
<p>Availability of Services (Category: Access to Services)</p> <p>Comments relating predominantly to follow up care after an initial appointment or a programme of care.</p> <ul style="list-style-type: none"> 'Initial referral time would have been too long if I had not been lucky enough to get a cancellation' 	7%	

(Musculoskeletal Physio (MSK), Mansfield & Ashfield)		
General (Category: Communication) Many of the comments are around ease of making an appointment for Podiatry. Other comments received related to communication around appointments for Paediatric SLT. <ul style="list-style-type: none"> • <i>'Sometimes communication between day care/community nurse has not always been great'</i> (Children's Community Nursing) 	7%	
General (Category: Environment and Facilities) Most of the comments related to Dental care, specifically parking, seating and heating. <ul style="list-style-type: none"> • <i>'Facilities are lacking, for example space to move around with wheelchairs'</i> (Podiatry, Strelley Health Centre) 	6%	

COMPLIMENTS (based on 1866 responses to 'What did we do well' question)

General (Category: Service quality/Outcomes)	22%	Helpful/Caring/Friendly (Category: Staff/Staff Attitude) 16% in rolling year, 9% in current quarter
Helpful/Caring/Friendly (Category: staff attitude)	16%	
General (Category: care/treatment)	15%	

3.4 CARE OPINION

In the last year, 157 stories have been published on Care Opinion commenting on Community Specialist Services.

	Community Specialist Services June 2016 – May 2017
Number of postings	157
Number of postings without a response	0
Number of postings responded to within two working days	144
Number of postings rated as moderately critical or above	0
Number of postings with change planned/completed	3

Below we include a sample of the postings received and links to the postings on the Patient Opinion site:

- *'My teenage son was/is very stressed and hadn't been cleaning his teeth properly. He wouldn't/couldn't let our dentist near him with the needle. Needing lots of work he was referred to the dentist at Park House. To begin with he was on gas and air, very funny!... And the dentist began her work getting my son happy enough to have an injection and treatment without the gas. Having lost a filling in one of his front teeth, fear made him go to the dentist with only a needle no option of gas because he felt he could lose his tooth and he had the treatment... Before coming to Park House he would never have managed this. Thank you so very much for saving my sons teeth and making him clean his teeth better'* www.careopinion.org.uk/opinions/370914
- *'My experience has been great. At first I was not sure but after a few visits I noticed a lot of improvements in my child learning and understanding. I have also learnt a lot of things during the process. The whole experience has helped me and my daughter.'* www.careopinion.org.uk/opinions/329579
- *'I saw my OT today. She was very efficient and highly informative. Thanks Melanie!'* www.careopinion.org.uk/opinions/309364

All changes stated relate to a new appointments line made available to Podiatry patients as the phones became overwhelmed and people were finding access difficult:

- www.careopinion.org.uk/opinions/317874
- www.careopinion.org.uk/opinions/317920
- www.careopinion.org.uk/opinions/318640

3.5 SUMMARY OF FEEDBACK CRITICALITY VIA SERVICE USER AND CARER EXPERIENCE (SUCE) SURVEY (June 2016 – May 2017)

In the last year, Community Specialist Services received 2613 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	Fairly Critical	Mildly critical	Mildly complimentary	Fairly complimentary	Highly complimentary
1	1006	0	1	1895	0

As means of identifying whether there are a) services receiving particularly high volumes of highly critical feedback, or b) recurring themes within the most critical feedback received by the directorate, below is a summary of feedback received via the survey which is deemed highly critical.

The sole highly critical comment referred to a seven month wait for speech and language therapy, which lead to the service user's parents seeking private health care.

3.6 COMPLAINTS

Between June 2016 - May 2017, Community Specialist Services have been the subject of 14 complaints. Of these complaints:

Upheld	Upheld in part	Not upheld	Ongoing
6	1	6	1

The most prominent themes emerging from the complaint categories were:

- Service Availability/Length of time to be seen (subject of six complaints)
- Safe, Adequate, Co-ordinated Care (subject of seven complaints)
- Information to/Communication with carers (subject of one complaint)

In regard to action points highlighted, communication between service users/carers and staff was a key action that was required in two cases. An action in one of cases was to address the waiting times between packages of care for Paediatric Speech and Language Therapy.

Between June 2016 - May 2017, Community Specialist Services were the subject of 70 Informal Concerns.

3.7 LOCAL MECHANISMS FOR FEEDBACK

Community Specialist Services relies on a range of local feedback mechanisms, each created to capture feedback in different ways and on different topics.

These include:

Questionnaire for the Information Service at the Children's Development Centre

This provides feedback regarding the suitability and relevance of the information provided to the child, young person or parent.

The service has received comments such as:

- *"I used the book with my children – very useful I got a lot out of it"*
- *"My daughter is on the spectrum and she has enjoyed one of the books very much but has yet to have a go at the other two. Remarkably she identifies with much of what is in the book"*
- *"Really useful service"*

Podiatry patient questionnaire

This questionnaire provides pre and post-operative comparisons for pain and mobility, as well as service ratings e.g. satisfaction with the service, whether they felt informed and supported etc.

The more recent results of this questionnaire (February 2017) were:

- Improved mobility = 63%
- Reduced Foot pain = 91%
- Patient felt well informed = 88%
- Satisfaction with the service = 98%
- Felt supported = 98%
- Waiting time satisfaction = 81%

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>Waiting times - Paediatric Speech and Language Therapy</p> <p>(Source: Trustwide SUCE survey)</p>	<p>Current waiting times for follow up appointments are ranging from 20 weeks to 1 year depending on the speciality.</p>	<p>The team have been tasked with producing a report and action plan to reduce the number of patients waiting and the number of waiting lists currently being run by the service. This report is due to be presented to the management team at the end of June 2017.</p>
<p>Communication at the Children's Development Centre</p> <p>(Source: Trustwide SUCE survey)</p>	<p>Parents have highlighted that answer phone messages don't seem to be picked up, and return telephone calls requested are not received.</p>	<p>The system of logging call requests is to be reviewed with the team to ensure a more robust system is in place so communication is improved and parents feel listened to.</p>
<p>Waiting time between appointments within the Dental service</p> <p>(Source: Trustwide SUCE survey)</p>	<p>Patients have highlighted that they would prefer less time between appointments. Some services such as sedation have a waiting time of up to 12 weeks currently.</p>	<p>Patients are offered the next available appointment at an alternative clinic if they can see them sooner (though this might require travel) and cancellation lists are in operation to reallocate the appointment space if a patient cancels.</p>

5. MAIN COMPLIMENTS

Below are some of the comments from the feedback survey that illustrate about the **main compliments** shared about Community Specialist Services:

5.1 A SAMPLE OF COMPLIMENTS FROM THE SERVICE USER AND CARER EXPERIENCE (SUCE) SURVEY:

- *Communication was great all the way through - fabulous team (Paediatric Therapies: Speech & Language Therapy)*
- *Information confidence exercises.....Damian. This was a first class experience. Thank you so much for all the treatment and advice (Musculoskeletal Physio (MSK), Mansfield & Ashfield)*
- *Good appointments system once being seen. Excellent communication between parent and S L therapy (Paediatric Therapies: Speech & Language Therapy)*

5.2 A SAMPLE OF COMMENTS FROM THE VARIETY OF FEEDBACK MECHANISMS WITHIN COMMUNITY SPECIALIST SERVICES:

- *'Perfect treatment at Hucknall Dental Clinic" - Special needs dental service*
- *'Very helpful and calming with my daughter. She felt comfortable.'*
www.careopinion.org.uk/opinions/307322
- *'I'd like to say a big 'THANK-YOU' to everyone in the podiatry team at Park House. I recently had a bunion removal operation and must say the care I received was brilliant and can't thank you all enough'*
- *'Sadly we only hear negative comments and complaints about the NHS, Doctors and Nurses Today I had nail surgery at Bulwell health Centre and Sylvie and Lauren for the excellent way they carried out the surgery. I know in the past experience injecting toes can be quite painful, but I have to say on this occasion, I felt no pain or discomfort. Also it was not just their competence at their job but the professionalism and care in their attitude and explanation of the procedure at putting me at ease.'*

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 March report, featuring Children and Young People's Services:

ISSUE		ACTION TAKEN/PROPOSED
<p>Concerns raised about the introduction of opportunities to self-weigh babies</p> <p><i>(Source: Care Opinion, Feedback in Clinics, local media and political)</i></p>	<ul style="list-style-type: none"> • Develop letter to parents to explain service changes and advising of a tailored service for parents to meet their individual needs, offering privacy and protected time with the Health Visitor (HV). • Development of "self-weigh of babies" leaflet to support parents; Ensure scales available. Posters with instructions available. • Ensure all staff are aware and are able to support service users in obtaining support from HVs and additional social contact through local networks as required. • Ensure and monitor that there are adequate health visitor sessions for clients to book into. • Promote use of RECAP, Children's Centres or additional local support. • Parents now reporting feeling 'less rushed' and have more time and less waiting around to be seen. More choice of venues and times in the week for getting babies weighed, greater engagement of fathers. Children's centres reporting more engagement with their groups and support services. Health visitors report being able to use time more effectively with families that require support. 	<p>A range of media, leaflets and posters are now available for parents advising on self-weigh sessions.</p> <p>A video made demonstrating how to weigh the baby/toddler has been uploaded onto RECAP for parents.</p> <p>Support is available for Children's Centre staff.</p> <p>No further concerns are being raised by parents, we are now starting to receive positive feedback and compliments via the SUCE forms from parents on the self-weigh sessions in some areas.</p>
<p>Remodelling of 0-19yrs public health CYP service and concerns about reduced service provision</p> <p><i>(Source: Media, union, service users, CCG)</i></p>	<ul style="list-style-type: none"> • Close working with commissioners during mobilisation phase. Joint communications plan with NCC developed. • Utilise outputs of full consultation carried out by NCC prior to retendering that was supported by our services. • Engagement of staff side from the outset. • Engage quality and risk team to scrutinise and challenge. • Information on new model distributed to all key stakeholders and service users. 	<p>Remodelling work has been completed and teams are up and running. Still ongoing service transformation and development of the model over the course of the contract as agreed with commissioners as part of Service Development and Improvement Plan (SDIP).</p> <p>Work with Trust Communications team continues and a media statement will be produced following a six month review of services.</p>

	<ul style="list-style-type: none"> • Staff fully engaged in process. • Assurances provided to range of external agencies and stakeholders in relation to risks identified- including primary care, education, other local health and social care providers, voluntary sector. • Aware we now need to move from the what we need to do as dictated by the service specification to better consultation with school aged children in particular into the 'how' the services are delivered 	<p>Mobilisation group attended by staff side reps continue, support for staff via organisational development team continues and is being constantly reviewed to ensure it is meeting staff needs.</p>
<p>Requested first aid courses in Broxtowe Childrens Centres and identification of growing requests from parents/carers for a Paediatric First Aid course at Hawtonville Childrens Centre</p> <p><i>(Source: Trustwide SUCE survey and direct requests)</i></p>	<ul style="list-style-type: none"> • Scheduled three Save a Baby's Life courses for Brinsley, Awsworth and Eastwood through Royal Life Saving Society in January. • Promoted these during sessions, in the What's On and on Facebook. • Proving popular with parents and expect to have lots attending. • Post on Facebook promoting this reached a record number of people on Facebook – 1988 people reached in the first three days. • A provider for the course in Hawtonville Children's Centre has been found and a tutor booked to deliver a 6 week course on a Thursday afternoon from 20 April – 25 May 2017 	<p>Courses have been running through January and February in Brinsley and Eastwood. 20 attendees completed the course. Sessions in Hawtonville have only just finished.</p> <p>Evaluation of all courses is underway.</p>
<p>To improve communication and format of advice provided</p> <p><i>(Source: Direct from service users)</i></p>	<ul style="list-style-type: none"> • Working group arranged to progress launching RECAP in Rushcliffe. • RECAP is now live and is being rolled out across services 	<p>RECAP being used by all 0-19 staff as a means of ensuring a range of relevant and up to date information is available to all parents and young people.</p> <p>An information leaflet about the Healthy Family Programme specific to young people is in development to add to the range of information available.</p> <p>District Healthy Family Team advice lines are established across the County for service users to ring in to.</p> <p>Recent visit from NHS providers of 0-19yrs services from Hertfordshire; delegation very interested in the RECAP concept, details to be shared with them</p> <p>Work continues with commissioners and colleagues in communication on the content of the Trust website and links to the Local Authority 'Health 4 Teens' web pages.</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, March - May 2017, and the previous rolling quarter (December 2016 – February 2017) in brackets for comparison.

	TRUSTWIDE	FORENSIC SERVICES	LOCAL PARTNERSHIPS - MENTAL HEALTH	LOCAL PARTNERSHIPS - GENERAL HEALTH
SERVICE QUALITY SCORE	94% (95%)	80% (79%)	94% (92%)	96% (97%)
FRIENDS AND FAMILY TEST (FFT)	95% (96%)	73% (74%)	95% (90%)	98% (98%)
SUCE SURVEY RETURNS	4523 (5424)	384 (274)	1333 (1096)	2,806 (4,052)
PATIENT OPINION STORIES	338 (360)	37 (37)	50 (45)	251 (279)
'SERVICE MADE A POSITIVE DIFFERENCE' SCORE	92% (92%)	79% (77%)	89% (86%)	94% (94%)

7.2 CARE OPINION HEADLINES

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

MAY 2017	TRUSTWIDE	FORENSIC SERVICES	LOCAL PARTNERSHIPS – MENTAL HEALTH	LOCAL PARTNERSHIPS – GENERAL
Number of postings	67	21	17	29
Number of postings without a response	1	1	0	0
Number of postings rated as moderately critical or above	3	0	3	0
Number of postings with changes made	1	1	0	0

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

"Why was my son sent to rehab from detox?" - www.careopinion.org.uk/opinions/367733

A father shared a story about his son, who was referred from The Woodlands to rehab in Wales only for a day and half before being taken to hospital and subsequently dying. The family feel their son should have been transferred straight to hospital from The Woodlands.

Rod Hudspith, Woodlands Manager, expressed his condolences to the family and is in contact with the family via other means and has assured the family that all of their questions will be answered and all of their concerns addressed.

"Nottingham City Crisis Team" - www.careopinion.org.uk/opinions/367279

A service user with Autism and Tourette's Syndrome shared a story saying that they had tried on multiple occasions to call and text the crisis service, eventually receiving a call back from a person who they say didn't introduce themselves or that they were calling from the crisis team (and kept finishing their sentences for them due to not recognising their condition) and once by a person who told them they shouldn't be contacting the crisis service during working hours. The person feels the crisis service need better methods of communication.

Ruth Gadd, Acting Service Manager (City Crisis Team), responded to apologise and to explain some of the difficulties with contacting the crisis team by text, and to ask whether the person has a crisis plan in place. Ruth offered direct contact with the person in whatever way they preferred, and suggested that the team could learn from the experience of a person with ASD specifically. The person responded suggesting Ruth contact NCAS (National Centre for Autism Studies).

"No care and compassion in A and E and lack of communication" -

www.careopinion.org.uk/opinions/369525

A service user shared a story about having gone to A&E at night due to experiencing crisis (hearing voices and unable to speak). They were triaged, and offered blood tests, and then while frightened escaped onto a bridge outside QMC. A security guard brought them back in, and insisted they see someone from the liaison psychiatry, which they did and the psychiatrist called to request a place at Haven House, which was full, so sent subsequently sent them home. They speak highly of Haven House where they were referred the following week.

This story received a response from Nottingham University Hospital, and a thorough response from Ruth Gadd, Acting Service Manager (City Crisis Team) enquiring about various elements of the person's care and offering further contact. The person has confirmed that they intend to make contact with Ruth to discuss their experience.

In the last month, three stories indicated that a single change had been made:

The three stories related to the recent changes made to the format of the Patient Forum at Arnold Lodge, which has been revised in partnership with patients and with involvement volunteers who spent the day with staff and patients in May designing a more effective Patients' Forum.

- www.careopinion.org.uk/opinions/368382
- www.careopinion.org.uk/opinions/368377
- www.careopinion.org.uk/opinions/368354

7.3 TRUSTWIDE AND DIVISIONAL MAIN ISSUES

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

	Current rolling year (June 2016 – May 2017)	Emerging issues (March - May 2017)
TRUSTWIDE (based on 8804 responses to the 'What could we do better' question)		
Availability of services (Category: Access to Services)	13%	Approach to Care (Category: Care/Treatment) 5% in rolling year, 12% in rolling quarter
Waiting time (Category: Access to Services)	6%	
Appointments (Category: Access to Services)	5%	
FORENSIC SERVICES (based on 744 responses to the 'What could we do better' question)		
Staffing levels (Category: Staff/Staff attitude)	11%	No emerging issues
Waiting time (Category: Access to Services)	8%	
Approach to Care (Category: Care/Treatment)	7%	
LOCAL PARTNERSHIPS – MENTAL HEALTH (based on 1940 responses to the 'What could we do better' question)		
Availability of services (Category: Access to Services)	14%	No emerging issues
Approach to Care (Category: Care/Treatment)	10%	
Waiting time (Category: Access to Services)	6%	
LOCAL PARTNERSHIPS – GENERAL HEALTH (based on 6115 responses to the 'What could we do better' question)		
Availability of services (Category: Access to Services)	15%	No emerging issues
General (Category: Communication)	8%	
Appointments (Category: Access to Services) *8% in the rolling year, rising to 21% in the current rolling quarter	8%	

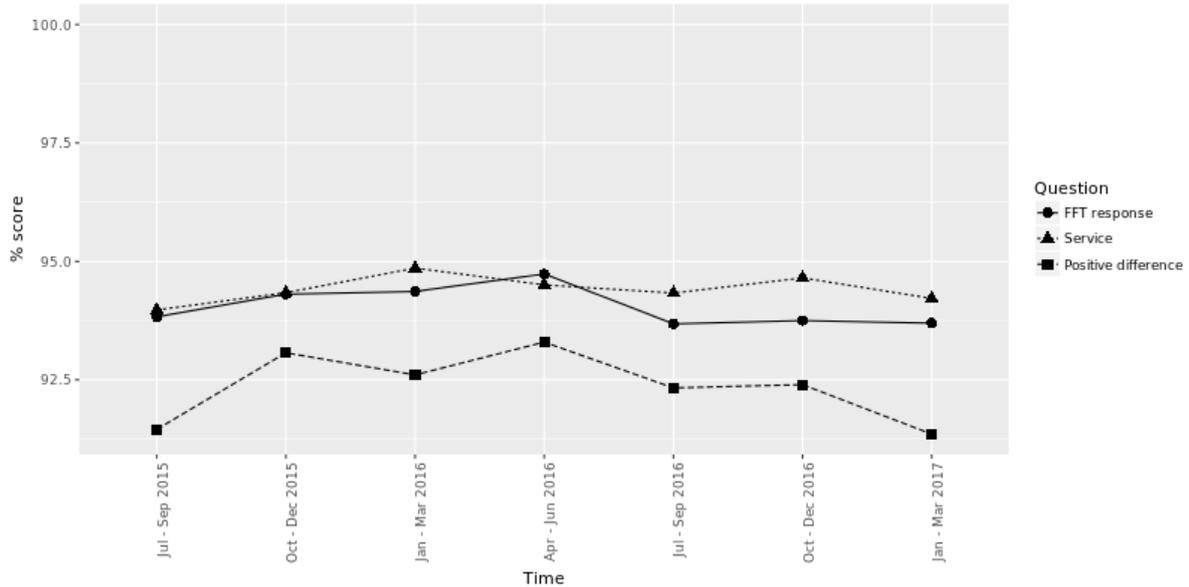
7.4 TRUSTWIDE AND DIVISIONAL MAIN COMPLIMENTS

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

	Current rolling year (June 2016 – May 2017)	Emerging compliments (March - May 2017)
TRUSTWIDE (based on 14062 responses to 'What did we do well' question)		
Helpful/friendly/caring (Category: Staff/Staff attitude)	16%	No emerging compliments
General (Category: Service Quality/Outcomes)	14%	
General (category: Care/Treatment)	9%	
FORENSIC SERVICES (based on 831 responses to 'What did we do well' question)		
Being listened to (Category: Communication)	17%	No emerging compliments
Quality of Care/Service (Category: Service Quality/Outcomes)	16%	
Helpful/friendly/caring (Category: Staff/Staff attitude)	9%	
LOCAL PARTNERSHIPS – MENTAL HEALTH (based on 3075 responses to 'What did we do well' question)		
Quality of Care/Service (Category: Service Quality/Outcomes)	20%	No emerging compliments
Helpful/friendly/caring (Category: Staff/Staff attitude)	13%	
Approach to Care (Category: Care/Treatment)	5%	
LOCAL PARTNERSHIPS – GENERAL HEALTH (based on 10150 responses to 'What did we do well' question)		
General (Category: Service Quality/Outcomes)	20%	No emerging compliments
Helpful/friendly/caring (Category: Staff/Staff attitude)	18%	
General (category: Care/treatment)	12%	

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

The below graph shows the Trustwide 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:

- Forensic Services - bit.ly/2sGAXsp
- Local Partnerships - Mental Health - bit.ly/2rDtOEo
- Local Partnerships - General Health - bit.ly/2sxf0eQ

8. RECOMMENDATION

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

Deborah Hall
Patient Experience Manager

Amy Gaskin-Williams
Involvement and Experience Manager

Paul Sanguinazzi
Head of Involvement and Experience

June 2017