

BOARD OF DIRECTORS
28th March 2019

INVOLVEMENT, EXPERIENCE AND VOLUNTEERING
PATIENT VOICE REPORT

FORENSIC SERVICES – WATHWOOD HOSPITAL

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 December 2018 - February 2019 is **95%**. Our Friends and Family Test Score is **95%**.

This month's Patient Voice Report focuses on **Forensic Services – Wathwood Hospital** 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:

- Activities

- Restriction of food
- Vaping

The report also updates on the issues presented in the Patient Voices report submitted to Board three months previously, featuring on **Forensic Services - Offender Health**. These were:

- Patients perceptions of waiting times
- Approach to care, compounded by staffing levels (Lowdham Grange)
- Medication

3. SERVICE IN FOCUS: FORENSIC SERVICES – WATHWOOD HOSPITAL

Wathwood Hospital provides medium secure inpatient services to male adult patients with mental disorder, offering assessment, treatment and rehabilitation. Wathwood Hospital aims to reduce the distress associated with mental health problems and promote recovery.

The hospital has a strong vocational approach, with a hospital shop, an on-site restaurant, café, farm shop and horticultural area which provide patients with meaningful opportunities to build skills and confidence in preparation for moving on from the hospital.

Additionally, the Recovery College is well established and continues to co-produce and co-deliver a wide range of courses with both current patients and patients who have been discharged from Wathwood.

3.1 MAIN ISSUES IDENTIFIED IN THE PREVIOUS PATIENT VOICE REPORT WITH A FOCUS ON FORENSIC SERVICES – WATHWOOD HOSPITAL (FEBRUARY 2018)

ISSUE	DETAIL	ACTION TAKEN/PROPOSED – FEBRUARY 2018	UPDATE - MARCH 2019
<p>Activities</p> <p>Source: SUCE survey, Care Opinion</p>	<p>Patients have asked for more activities to be provided.</p> <p><i>“... I would like to see more activities here as it is boring sometimes ...”</i></p>	<p>Continued in this year’s reports – update in table 4</p>	
<p>Respect</p> <p>Source: SUCE survey, Care Opinion</p>	<p>Some patients have raised issues around how they are treated by staff.</p> <p><i>“... Sometimes you get the odd sarcastic member of staff...”</i></p>	<p>More patients state that staff attitude is a positive attribute at Wathwood than those who have identified it as an area of improvement. However following the survey feedback an action plan was devised and includes the issue of staff attitude.</p> <p>This has been reviewed within Wathwood’s management team and actions agreed are:</p> <ul style="list-style-type: none"> · New staff to complete induction pack and achieve objectives particularly linked to confidentiality and patient interactions. · All staff to receive monthly supervision for support and guidance, addressing any issues regarding patient relationships. · Ward Managers and Nurse in Charge staff to monitor performance of individual staff on a shift basis and address any concerns regarding interactions with patients. <p>Patients to be allocated a nurse per shift so they are given time to be listened to.</p>	<p>We continue to have patients as part of our recruitment team who ask staff probing questions. We also hold the patients forum fortnightly which is supported by volunteers from Rosewood. This is an ideal opportunity for patients to ask questions and to hold staff to account.</p> <ul style="list-style-type: none"> • The new induction packs are seemingly working well • Supervision is increasing and we now have an electronic database. • We hold group and relational security meetings allowing staff to explore alternative ways to engage patients. • We have managers and Team Leaders engaging the staff teams and we pride ourselves to be visible on the wards. • Patients also allocated a nurse per shift to explore any issues.

3.2 DIRECTORATE HEADLINES AND MAIN ISSUES AND COMPLIMENTS

Data collected from the Service User Feedback survey:

	Most recent surveying period (Oct - Dec 2018)	Previous surveying period (Apr – Jun 2018)
Service Quality Score	79%	78%
Friends and Family Test (FFT)	69%	67%
SUCE survey returns	46	91
'Service made a positive difference' score	83%	82%

	Current rolling year (Mar 2018 – Feb 2019)	Emerging issues for the most recent surveying period (Oct - Dec 2018)
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ISSUES (based on 38 responses to the 'What could we do better' question)

<p>Approach to Care (Category: Care/Treatment) Comments mostly split between Continuing Care, and Rehabilitation Ward. The nature of comments is very wide ranging, with no specific points repeated,</p> <ul style="list-style-type: none"> 'Distinguish between if this is a hospital or a prison. As a patient why does Wathwood follow procedure of Rampton hospital especially when it comes to security. Wathwood is a medium secure and Rampton is a high secure unit' (Continuing Care Ward). 	20%	<p>Approach to Care (Category: Care/Treatment); 20% in last year, 29% in last quarter.</p>
<p>Being Listened to (Category: Communication) The majority of comments relate to the Continuing Care Ward. Most of the comments are simple complaints about not being listened to.</p> <ul style="list-style-type: none"> 'Listen to patients needs more' (Continuing Care Ward). 	15%	
<p>General (Category: Service Quality/Outcomes) Comments equally split between Rehabilitation Ward and Lodges. Comments are very general in nature.</p> <ul style="list-style-type: none"> 'Lots. Have done an excellent job of making my health and wellbeing worse' (Rehabilitation Ward). 	10%	
<p>General (Category: Care/Treatment) Comments focussed around Rehabilitation Ward. Comments very general.</p> <ul style="list-style-type: none"> 'Everything. Did nothing well' (Rehabilitation Ward). 	7%	
<p>General (Category: Staff/Staff Attitude) Comments mostly relate to Rehabilitation Ward. The comments relate to the general behaviour of staff.</p> <ul style="list-style-type: none"> 'Some staff can be arrogant and ignorant' (Rehabilitation Ward). 	7%	

COMPLIMENTS (based on 47 responses to 'What did we do well' question)

General (Category: Service Quality/Outcomes)	22%	No emerging compliments
General (Category: Care/Treatment)	12%	
Being Listened to (Category: Communication)	12%	

3.3 CARE OPINION

In the last year six stories have been published on Care Opinion commenting on Wathwood Hospital:

	Mar 2018 – Feb 2019	Mar 2017 – Feb 2018
Number of postings	6	21
Number of postings without a response	0	0
Number of postings <u>not</u> responded to within two working days	0	0
Number of postings rated as moderately critical or above	0	2
Number of postings which lead to a change in service	2	1

In the last year, **no stories were rated moderately critical or above.**

In the last year, **two stories lead to a service change.**

- **‘We can’t play sports with staff anymore’** – A patient posted to ask why they were not able to self-administer medication, as they had when in prison, and also to say that they were disappointed that staff were no longer able to play sports with patients anymore. The Service Development Manager responded to say that Wathwood were currently trailing patients in the lodges self-administering medication, and that sports activities took place six days per week and staff were able to join in when available.
www.careopinion.org.uk/opinions/532822
- **‘Initial experience of Wathwood Hospital’** – A patient posted to share their compliments about Wathwood Hospital, and the care they were receiving, but asked why access to technology was so limited. The Service Development Manager responded twice to say that Wathwood were exploring options for increased use of mobile phones on the wards, and would hope to update policies accordingly.
www.careopinion.org.uk/opinions/533117

3.4 SUMMARY OF FEEDBACK CRITICALITY VIA FEEDBACK SURVEY (March 2018 – February 2019)

In the last year, Forensic Services – Wathwood Hospital received 91 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	11	20	37	21	0

As Wathwood Hospital received only two highly critical comments in the year, there are no areas of the hospital receiving particularly high volumes of highly critical feedback.

3.8 COMPLAINTS

Between March 2018 and February 2019, services within Wathwood Hospital Medium Secure Services have been the subject of 12 complaints compared with 13 complaints in the previous 12 month period. The number by ward/service area is shown below:

Service	Total March 2018- Feb 2019	Total March 2017- Feb 2018
Continuing Care Ward	7	3
Rehabilitation Ward	2	2
Assessment Ward	1	6
The Lodges	1	0
Management	1	1

Of the 12 complaints received, 6 required a full investigation and 6 were addressed via local resolution.

The themes most often arising in complaints are outlined below:

Theme	Total March 2018- Feb 2019	Total March 2017- Feb 2018
Attitude Of Staff	6	3
Safe, Adequate, Coordinated Care	4	5
Appointment Arrangements	1	0
Assault/ Phys Aggr /Threat Incid	1	2

Some examples of the types complaints received are given below:

- Staff member reluctant to help
- Unhelpful and insulting comments by staff members
- Staff members being abrupt and blunt with patient
- Injured during restraint
- Patient visit cancelled
- Unfairly challenged over use of cutlery/microwave
- Patient feeling bullied by peers
- False allegations of threatening nurse
- Lack of response/treatment to loss of hearing

Outcomes:

Outcome	Total March 2018- Feb 2019
Complaint Not Upheld	7
Complaint Upheld/Upheld in Part	4
Complaint Resolved	0
Complaint Withdrawn	1

Completed actions from complaints:

- Complaint from a relative, who turned up at the hospital and could not see her brother because there was a live, no notice exercise involving the emergency services, highlighted the need to contact any scheduled visitors during such exercises to minimise the inconvenience to them (19773).
- Following a complaint from a patient about being spoken to in a blunt and abrupt manner by a member of staff, the ward manager spoke to the staff member about expected practice when communicating with patients (17974).
- After a patient objected to being challenged by staff about his use of the kitchen, the ward updated its guidance to patients about kitchen access (19774)

In addition to the complaints, 17 further issues were addressed through PALS.

Some examples of the queries/concerns received are given below:

- Request for documents
- Request for information regarding privacy and data protection
- Patient feeling unsafe
- Questions about aspects of care
- Concerns about medication
- Unhappy with previous complaint responses
- Concerns over lack of progress while at hospital
- Request for a review by two doctors to address pain relief
- Request for access to recording equipment

3.9 LOCAL MECHANISMS FOR FEEDBACK

WATHWOOD CARERS FORUM

This is a quarterly meeting to which all carers are invited. In December we held our Christmas event where a party was held for all with over 25 carers, presents were given in the form of locally grown plants. This was a very well supported event and this has been commented on by a link tutor from Nottingham who attended the event and said in all her years as a nurse this was one of the most moving.

PATIENT FORUM

This is a fortnightly meeting open to all patients across the hospital. Service users chair this meeting and nursing, occupational therapy and advocacy staff consistently attend the meetings. Other services' attendance (hotel service, sports, finance, horticulture, education) is planned in regularly through the year. Volunteers from Rosewood and the Yorkshire and Humber Network Involvement Leads also attend and support the forum.

Over the last few months, few issues have been raised within the forum. The main issues have been:

- Access to prepared fruit platters.
- Frustration with not being allowed to smoke/vape.
- The hospital did assign a patients forum budget however due to CIP's this has been lost.
- Restricted access to certain foods.
- Protected meal times due to ward rounds running over sometimes we are looking at changing meal times.
- Phone tariffs on phones and access to phones across the site.
- Wathwood have been unable to secure an afro Caribbean hairdresser.
- Observation tablets utilising staff time.
- Lack of staffing due to Hospital appointments and admissions.
- Frustration with not being allowed to smoke.

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
Activities <i>(Source: Patients' Forum)</i>	Patients have asked for more activities to be provided.	<u>June 2018:</u> Each ward/individual continues to have a full and busy Occupational Therapy/nursing programme informed by patient feedback and requests. We have the events planner for two themed nights per month.

		<p>Wathwood continues to meet the standard relating to the provision of 25 hours of meaningful/therapeutic activity. Excellent sports facilities available in the evenings and on a Sunday complimenting the already extensive activities across the unit. We have increased access to the central activities on a weekend and access to the central activity outdoor area during summer months. We are running external activities areas weekly on top of the current programme and we have arranged a sports day in June and a sponsored walk for those with leave. Sports team and horticulture present an audit of the attendance of patients.</p> <p><u>March 2019:</u> We have an extensive OT plan every day for each ward and individual, we have sports on six days a week for swimming gym, and theme of the month sport, we have horticulture, recovery college and an events planning.</p> <p>More diverse events have been arranged e.g. Shaun Attwood (author) attended Wathwood, talking about his previous experiences of prison life and illicit drugs. Danny Sculthorpe (ex-professional rugby player) also visited to speak on his own mental health and his book.</p> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  04.02.19 LOdges OT programme example.c </div> <div style="text-align: center;">  Events Calendar 2019.docx </div> </div>
<p>Restricted food <i>(Source: Patients' Forum)</i></p>	<p>Patients raising various concerns relating to the restriction of certain foods (particularly bread), or limited portions.</p>	<p>Staff are providing education about eating healthily through the healthy lifestyles group (linked to the hospital's Obesity strategy).</p> <p>To complement our education work, we have introduced the Daily Mile and Coast to Coast bike ride, and continue to offer many sporting/physical activities during the week.</p>
<p>Vaping <i>(Source: Patients' Forum)</i></p>	<p>Patients wish to vape on site and are unhappy that they cannot do so.</p>	<p>Watching brief especially around Wells Road and The Humber centre who are piloting Vapes.</p>

5. MAIN COMPLIMENTS

Below are some of the comments from the feedback survey in response to the question 'What did we do well?' about Wathwood Hospital:

A SAMPLE OF COMPLIMENTS FROM THE SUCE SURVEY:

*Everything, Service was excellent because of the way I have been treated. Listening, excellent.
(Assessment Ward)*

*Always straight and sound on ward rounds etc. Always there and things going quickly. Always telling you about present & future about my illness. Helping me understand and get through my illness.
(Rehabilitation Ward)*

Help me to change my attitude to my illness and how to live a better life. Very clever people helped me see my mistakes. I don't like to talk that much but Wathwood helped me to open up. Good at leading me in the right direction. (Wathwood - Lodges)

*Reassure me and asked me if everything ok. The service was good. Nurses always take time out to listen. Communicating was fair. Everyone seems to be treated equally. If there are any changes always discussed with first. Lots of support & reassurance making me more optimistic about my future.
(Wathwood - Lodges)*

Everything. Listen to my problems. Always honest with me. Respectful most of time. Named nurse involved me with care plan/reports. (Wathwood - Lodges)

Activities, Look after me properly & people are nice to me. Good at communicating with me. Involved in my ward round. Look after my health. (Continuing Care Ward)

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 December 2018 report, featuring **Forensic Services – Offender Health:**

ISSUE	DETAIL	ACTION – NOVEMBER 2018	UPDATE – FEBRUARY 2019
<p>Patients perceptions of waiting times</p>	<p>In some disciplines, waiting times in most prisons are equivalent if not better than those for patients living outside of prison – particularly in the case of most podiatry and physiotherapy services in the Directorate. The majority of waiting times across all services are within the NHS England commissioned targets for the Directorate to achieve. Patients continue to perceive that waiting times are too long and therefore their experience does not feel acceptable to them.</p>	<p>The Directorate Involvement champions have reviewed the issues of perceptions of waiting times. Services do regularly advertise ‘Did not attend’ figures to try and gain engagement of men to cancel their appointments rather than not attend to support services to book patients into unused appointment slots and reduce waiting times.</p> <p>Action across the coming months will include sharing information in relation to up to date waiting times per discipline against commissioned targets by NHS England to try and align patient expectations to service delivery hence enabling a better understanding of actual waiting times issues.</p>	<p>In progress, not fully defined and in operation as yet.</p>
<p>Approach to care, compounded by staffing levels (Lowdham Grange)</p>	<p>Feedback suggests that there is a specific issue with the approach to care at Lowdham Grange, and that this issue is compounded by staffing issues.</p>	<p>HMP Lowdham Grange moved into the High Secure Estate and the patient population and risk profile of the men in the prison has changed.</p> <p>This has seen a number of occasions of concerted indiscipline and as a result staff are unable to access patients on the wings of the prison at the moment due to safety concerns.</p> <p>The healthcare centre is small with very few rooms able to be used to see patients.</p> <p>Undoubtedly this has compound feelings of not having enough time to spend with clinicians, and issues relating to follow up timescales.</p> <p>A recent CQC and HMIP inspection confirmed this and the Directorate, prison and NHS England are working together to resolve the issues raised.</p> <p>Actions therefore being taken include:</p>	<p>The business case process has been redefined by NHSE three times since the initial action plan was submitted. The business case has been resubmitted (11.03.19) to NHSE at their request with some changes made. NHSE will use this to propose additional funding from NHSE Central team.</p> <p>A space for pharmacy has been found and plans are in place for the move of the current pharmacy to new area. This will free up room in the healthcare centre for additional space for clinics etc.</p>

		<p>A business case to NHHS England submitted outlining the staffing profile against the recent health Needs Analysis and the requirement for recurrent funding to enhance the staffing model and ensure the staff team reflect the needs of the changed population.</p> <p>A paper jointly written by the Directorate and prison to increase the building size to ensure enough clinical and non-clinical rooms are available to see patients safely and improve access to services. In the meantime rooms have been re-profiled for use to enable as many rooms as possible for clinical work.</p> <p>Patients are updated through the forums in place at HMP Lowdham Grange.</p>	
<p>Medication</p> <p>(Continuing issue, featured in 2016 and 2017 Offender Health Board reports)</p>	<p>Detail from 2017: Comments highlight dissatisfaction with prescribing practices, where patients want an increase in their medication or wish to be prescribed different types of medication which are unavailable to them.</p>	<p>Previous issues of staffing are no longer a concern – pharmacy technicians and GP recruitment has been successful throughout the year.</p> <p>The Directorate continue to try and manage the concerns in relation to medicines and prescribing practices. The majority of feedback received for medicines are related to pain medication and the requirement for it, when it is not clinically indicated.</p> <p>Actions for 2019 are centred around the move towards specific pain management pathways, with pain management specific GPs leading, longer appointments for discussion and review and includes wrap around services outside of traditional medication delivery services.</p>	<p>No changes as yet.</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 (December 2018 - February 2019) and in brackets, previous rolling quarter (September - November 2018).

	TRUSTWIDE	FORENSIC SERVICES	LOCAL PARTNERSHIPS - MENTAL HEALTH	LOCAL PARTNERSHIPS - GENERAL HEALTH
SERVICE QUALITY SCORE	95% (95%)	81% (75%)	95% (94%)	97% (97%)
FRIENDS AND FAMILY TEST (FFT)	95% (93%)	66% (48%)	92% (90%)	98% (98%)
SUCE SURVEY RETURNS	5017 (5151)	58 (224)	1634 (2119)	3158 (2807)
'SERVICE MADE A POSITIVE DIFFERENCE' SCORE	93% (92%)	81% (76%)	90% (88%)	94% (95%)

7.2 CARE OPINION HEADLINES

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

February 2019	TRUSTWIDE	FORENSIC SERVICES	LOCAL PARTNERSHIPS - MENTAL HEALTH	LOCAL PARTNERSHIPS - GENERAL HEALTH
Number of postings	59	9	7	43
Number of postings without a response	0	0	0	0
Number of postings rated as moderately critical or above	0	0	0	0
Number of postings with changes made	0	0	0	0

In the last month, **no stories were rated as moderately critical** or above.

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 (Mar 2018 – Feb 2019)	Emerging issues for the current quarter (Dec 2018 - Feb 2019)
TRUSTWIDE (based on 6981 responses to the 'What could we do better' question)		
Availability of services (Category: Access to Services)	11%	Availability of services (Category: Access to services); 11% in last year, 17% in last quarter
Approach to Care (Category: Care/Treatment)	8%	
Waiting time (Category: Access to Services)	7%	
FORENSIC SERVICES (based on 727 responses to the 'What could we do better' question)		
Staffing levels (Category: Staff/Staff Attitude)	11%	Approach to Care (Category: Care/Treatment); 9% in last year, 15% in last quarter
Approach to Care (Category: Care/Treatment)	9%	
General (Category: Service Quality/Outcomes)	7%	
LOCAL PARTNERSHIPS – MENTAL HEALTH (based on 1904 responses to the 'What could we do better' question)		
Approach to Care (Category: Care/Treatment)	14%	No emerging issues.
Waiting time (Category: Access to Services)	8%	
General (Category: Service Quality/Outcomes)	7%	
LOCAL PARTNERSHIPS – GENERAL HEALTH (based on 4346 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)	7%	
Waiting time (Category: Access to Services)	5%	

7.4 TRUSTWIDE AND DIVISIONAL MAIN COMPLIMENTS

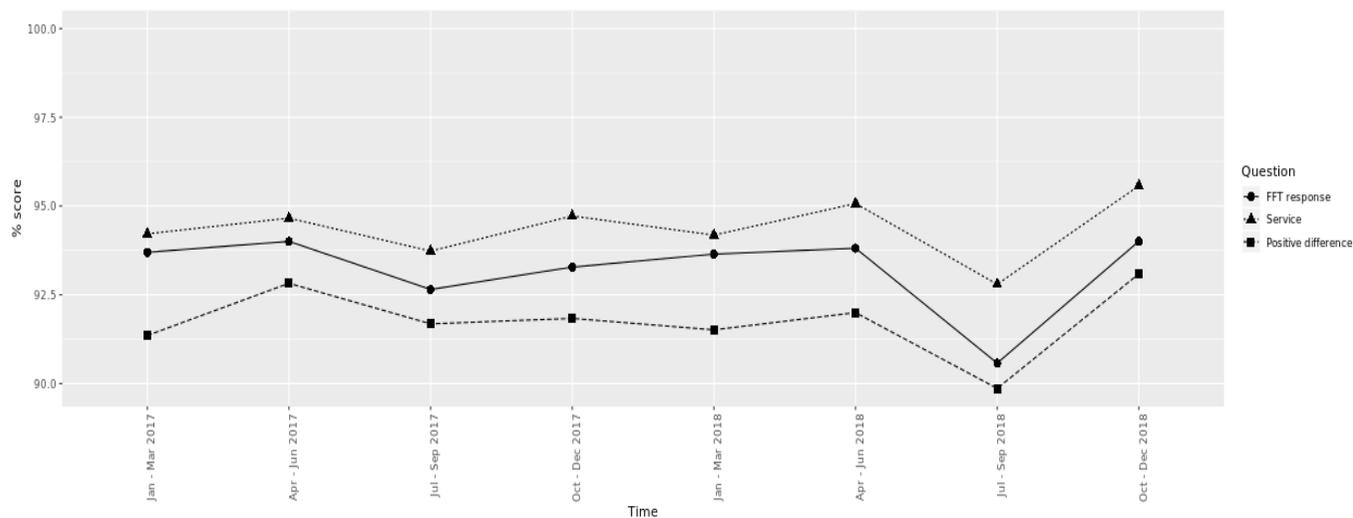
Data collected from the Service User and Carer Experience (SUCE) survey:

	Current rolling year (Mar 2018 – Feb 2019)	Emerging issues for the current quarter (Dec 2018 - Feb 2019)
TRUSTWIDE (based on 11631 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)	16%	
Quality of Care/Service (Category: Service Quality/Outcomes)	10%	
FORENSIC SERVICES (based on 781 responses to the 'What did we do well' question)		

General (Category: Service Quality/Outcomes)	15%	No Emerging compliments
Being Listened to (Category: Communication)	14%	
Helpful/Caring/Friendly (Category: Staff/Staff Attitude)	10%	
LOCAL PARTNERSHIPS – MENTAL HEALTH (based on 2986 responses to the ‘What did we do well’ question)		
General (Category: Service Quality/Outcomes)	19%	No Emerging compliments
Helpful/Caring/Friendly (Category: Staff/Staff Attitude)	11%	
Approach to Care (Category: Care/Treatment)	11%	
LOCAL PARTNERSHIPS – GENERAL HEALTH (based on 7860 responses to the ‘What did we do well’ question)		
Helpful/Caring/Friendly (Category: Staff/Staff Attitude)	23%	No Emerging Compliments
General (Category: Service Quality/Outcomes)	15%	
Quality of Care/Service (Category: Service Quality/Outcomes)	15%	

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/2MiUGWi

8. RECOMMENDATION

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

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Amy Gaskin-Williams
Involvement and Experience Manager

March 2019