

**BOARD OF DIRECTORS  
28<sup>th</sup> SEPTEMBER 2017**

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

**LOCAL PARTNERSHIPS, GENERAL HEALTHCARE – BASSETLAW AND  
MID-NOTTINGHAMSHIRE**

## 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 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.

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 an annual 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 June to August is **95%**. 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 Healthcare) – Bassetlaw and Mid-Nottinghamshire**, with headline information provided for the Trust as a whole, and for each division. The report also provides an update on Local Partnerships (General Healthcare) – Community Specialist Services (featured in May's report).

The report highlights all prominent and/or recurring feedback in the last year from the full range of feedback mechanisms used by Local Partnerships (General Healthcare) – Bassetlaw and Mid-Nottinghamshire, 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:

- Patients would like to receive their dressings faster – Community Nursing Mansfield
- Communication with service users – Integrated Care Teams in Newark and Sherwood
- Continuity of staff/ time spent with service user - Integrated Care Teams in Newark and Sherwood
- Patients would like more visits – Bassetlaw
- Patients would like to know changes to times and be told when someone is coming – Bassetlaw

It also updates on the issues presented in the Patient Voices report submitted to Board three months previously, featuring **Local Partnerships (General Healthcare) – Community Specialist Services, in June 2017**.

These were:

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

### **3. SERVICE IN FOCUS: LOCAL PARTNERSHIPS (GENERAL HEALTHCARE) – BASSETLAW AND MID-NOTTINGHAMSHIRE**

The Mid Nottinghamshire and Bassetlaw Adult General Health directorate delivers a diverse range of community based services across the north of the county, including:

- Local integrated teams offering multi-disciplinary proactive, planned and targeted intervention for those at high risk of admission
- Community Nursing service, planned and urgent care for the housebound populations
- Intermediate care offering intensive rehabilitation services at home and within bedded facilities to promote self-management and independence
- Pulmonary rehabilitation offering self-management strategies
- Hospice services including outreach specialist nurses
- Call 4 Care service offering a well-established signposting and navigation function to manage patients within the community setting and reduce inappropriate Emergency Department attendances and non-elective admission to hospital.
- GP Out of Hours service within Bassetlaw

The Directorate has three Involvement champions (one in each locality) who support the teams in ensuring they gather feedback and respond to it appropriately. Key messages are shared in a weekly staff bulletin. Heads of Service and team leads are encouraged to review their feedback on the Your Feedback Matters website, together with reviewing feedback from other means, such as from Patient Opinion and opportunistic feedback during clinical visits. The involvement champions and Heads of Service also review the feedback reports to keep an overview from a governance perspective.

### 3.1 MAIN ISSUES IDENTIFIED IN THE PREVIOUS PATIENT VOICES REPORT WITH A FOCUS ON LOCAL PARTNERSHIPS (GENERAL HEALTHCARE) – BASSETLAW AND MID-NOTTINGHAMSHIRE (SEPTEMBER 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 Healthcare – Bassetlaw and Mid-Nottinghamshire, which was presented at the Board of Directors in September 2016:

ISSUE	DETAIL	ACTION TAKEN/PROPOSED – SEPTEMBER 2016	UPDATE – SEPTEMBER 2017
<b>Appointments</b>	Less wait from referral to appointment and clearer pathway to first visit/appointment	<ul style="list-style-type: none"> <li>We have process mapped out the appointment pathways for both leg ulcer clinics and continence clinics to understand the current bottlenecks.</li> <li>Following the process mapping as a sub economy we are working on corporate cover of clinics, the patient will be offered the next available appointment within the sub economy.</li> <li>We are working through the operational detail of implementing the above for leg ulcer clinics and continence clinics (both generic and specialist).</li> </ul>	The leg ulcer clinics are now operating in the new model, this means we no longer utilise a waiting list and patients are booked into appointment and informed of this from a corporate clinic perspective. We are now working to complete the same for the continence clinics.
<b>Communication with service users</b>	Changes to appointments not being communicated	<ul style="list-style-type: none"> <li>Deferred visit audit being completed to look into trends behind this issue</li> <li>Reminder to all staff if they are changing visits to discuss this with the patient before the visit/appointment is moved and ensure documented in clinical records.</li> </ul>	We have introduced new triage standard operating procedures across all localities as part of the Meridian project, this ensures that if visits are being altered that will comfort call the patients to ensure they are engaged within the process.
<b>Access to services</b>	Direct line to clinical team	<ul style="list-style-type: none"> <li>Direct appointment line for continence to be trialled and to determine if this is a feasible model to roll out across other services.</li> </ul>	Ongoing work continues to ensure consistent approach across Mid Nottinghamshire.

<p><b>Continuity of staff/ time spent with Service User</b></p>	<p>No continuity of staff performing visits and also the length of time of visits sometimes appeared rushed</p>	<ul style="list-style-type: none"> <li>• The teams are working with Meridian to look at the workforce model of the directorate to ensure we have the right skills in the right place and in sufficient numbers to deliver high quality patient care.</li> <li>• Mid Nottinghamshire capacity and demand workstream is helping us to understand overall demand at team level and to enable us to plan our staff capacity to this demand - we are hoping this will enable us to achieve safe staffing levels.</li> <li>• Mid Nottinghamshire capacity and demand workstream and Meridian are helping us to understand the length of time individual clinical procedures take to enable us to perform safe allocation and enable enough staffing capacity to be allocated to the demand intervention.</li> </ul>	<p>The Meridian work has helped us develop our capacity and demand tool further and validate the time allocated to each clinic procedure to ensure consistent approach across North Nottinghamshire. This is well embedded across the North division now.</p> <p>We have also changed working practices to ensure all community nursing teams work geographically to promote continuity of care.</p>
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### 3.2 DIRECTORATE HEADLINES

Data collected from the Service User Feedback survey:

	June - August 2017	April - June 2017
Service Quality Score	97%	97%
Friends and Family Test (FFT)	99%	99%
SUCE survey returns	873	592
Patient Opinion postings	12	11
'Service made a positive difference' score	96%	96%

### 3.3 DIRECTORATE MAIN ISSUES AND ‘BEST THING’

Data collected from the Service User Feedback survey:

	Current rolling year (September 2016 – August 2017)	Emerging issues for the current quarter (June 2017 – August 2017)
<b>ISSUES</b> (based on 1050 responses to the ‘What could we do better’ question)		
<b>General</b> (Category: Communication) Comments cover a wide range of services, and refer to a poor communication in all areas with a slight focus on information not being passed freely enough. <ul style="list-style-type: none"> <li>‘Communication when changing dates of coming to do dressings’ (Adult Integrated Service (North East)).</li> </ul>	12%	Access to Services (Category: Availability of services): Current Quarter 17%, current year 11%.
<b>Availability of Services</b> (Category: Access to services) Comments cover a wide range of services, and relate to a general limit to the amount of help service users can access. Most notably the number of visits available. <ul style="list-style-type: none"> <li>‘Wish there was more treatment available’ (Macmillan Specialist Nurses).</li> </ul>	11%	
<b>Appointments</b> (Category: Care/Treatment) Comments cover a wide range of services, and mostly refer to the timing of appointments, and absence of accurate times for visits. <ul style="list-style-type: none"> <li>‘Be able to say to patient if you will be seen in the morning or afternoon’ (Integrated care team (West)).</li> </ul>	10%	
<b>Times staff spend with service users</b> (Category: Staff/Staff Attitude) Comments refer to a wide range of services, but focus most on the Macmillan specialist nurses. Most comments relate to wanting more time at a given appointment, and more appointments. <ul style="list-style-type: none"> <li>‘More visits please’ (Macmillan Specialist Nurses).</li> </ul>	9%	
<b>Equipment</b> (Category: Environment/Facilities) Comments refer predominantly to the Youth Offending Team, and Community Nursing teams. Comments reflect a general dissatisfaction with the quality of equipment, but focus on a shortage of dressings. <ul style="list-style-type: none"> <li>‘Making sure dressing are ordered before they run out’ (Community Nursing (Mansfield)).</li> </ul>	6%	
<b>COMPLIMENTS</b> (based on 1792 responses to ‘What did we do well’ question)		
<b>General</b> (Category: Service Quality/Outcomes)	29%	No emerging compliments.
<b>General</b> (Category: Care/Treatment)	15%	
<b>Helpful/Caring/Friendly</b> (Category: Staff/Staff Attitude)	13%	

### 3.4 CARE OPINION

In the last year, 61 stories have been published on Care Opinion commenting on General Healthcare Services in Bassetlaw and mid-Nottinghamshire:

	Bassetlaw and mid-Nottinghamshire September 2016 – August 2017
Number of postings	61
Number of postings without a response	0
Number of postings responded to within two working days	52
Number of postings rated as moderately critical or above	0
Number of postings which lead to a change in service	0

There were no stories in the last year that were deemed moderately critical or above and no postings that led to a change.

### 3.5 SUMMARY OF FEEDBACK CRITICALITY VIA FEEDBACK SURVEY (September 2016 – August 2017)

In the last year, Bassetlaw and mid-Nottinghamshire Services received 2976 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	307	1	2	2635	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 referred to the impact of a social worker on the patient and their family.

### 3.6 COMPLAINTS

Between August 2016 and July 2017, Services has been the subject of **13** complaints. Of these complaints five cases were upheld, one case was upheld in part, 11 cases were not upheld and four cases were resolved with the complainants. All 13 complaints were from different complainants.

Of these complaints:

Withdrawn	Upheld in part	Not upheld	Ongoing	Not Pursued
1	6	4	1	1

The most prominent themes emerging from the complaint categories were:

- Safe, Adequate, Co-ordinated Care (subject of ten complaints)
- Cleanliness/Physical Environment/Amenities (subject of two complaints)
- Attitude Of Staff (subject of one complaint)

In regard to action points highlighted, out of the 13 complaints 2 had no actions 1 case is ongoing and 1 case was withdrawn. Of the 9 remaining cases communication, documentation, training and equipment were all key actions and reflection on and sharing of the complaint with the relevant teams was also an action.

Between September 16 – August 17, Mid Notts and Bassetlaw were the subject of 54 Informal Concerns. The top themes from these were as follows:

- 1) Safe, Adequate and Co-ordinated Care (28)
- 2) Appointment Arrangements (10)
- 3) Attitude of Staff (5)

### **3.7 LOCAL MECHANISMS FOR FEEDBACK**

In addition to collecting feedback from the Trust Feedback Survey and Care Opinion the Respiratory Services in mid-Nottinghamshire are also involved in a Trust project working with the Kings Fund to collaboratively develop a model for working in partnership (co-production) between patients, carers, staff and communities to improve services.

#### 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><b>Patients would like to receive their dressings faster – Community Nursing Mansfield</b></p> <p>(Source: Feedback Survey)</p>	<p>When community nurses require script for wound care products to enable the dressing care to be delivered we currently order the FP10 from the GP practices or our prescribers leave the script with our service users to obtain. Once the script is delivered to the pharmacy we are finding that they have to order the dressings from the suppliers as they are no longer keeping stock of the wound care products on our formulary, therefore there is a delay in delivery time.</p>	<ul style="list-style-type: none"> <li>• We are working with the Clinical Commissioning Group to monitor the trends within the pharmacies across the locality and work with them to obtain future solutions.</li> <li>• We are also considering direct supply of dressings which will reduce the need for FP10 and the delay in this process.</li> </ul>
<p><b>Communication with service users – Integrated Care Teams in Newark and Sherwood</b></p> <p>(Source: Feedback Survey)</p>	<p>Changes to appointments not being communicated</p>	<ul style="list-style-type: none"> <li>• Deferred visits are monitored to look into trends behind the issue. The use of the Meridian demand and capacity tool is supporting more efficient planning of visits</li> <li>• Reminder to all staff that when it is necessary to change a visit to telephone the patient/carer to discuss this with the patient before the visit/appointment is moved and ensure documented in clinical records</li> <li>• Specific timings of visits are not always possible as the teams also need to respond to urgent on the day calls and prioritise visits accordingly, however staff have been reminded to contact the patient/carer to advise them if the visit is likely to be much later than usual</li> </ul>

<p><b>Continuity of staff/ time spent with service user - Integrated Care Teams in Newark and Sherwood</b></p> <p>(Source: Feedback Survey)</p>	<p>No continuity of staff performing visits and also the length of time of visits sometimes appeared rushed</p>	<ul style="list-style-type: none"> <li>• The teams are using the Meridian tool and the workforce model of the teams is being adjusted to ensure we have the right skills in the right place and in sufficient numbers to deliver high quality patient care.</li> <li>• the Mid Nottinghamshire capacity and demand workstream and the Meridian tool has assisted in identified average length of time for individual clinical procedures take to enable safe allocation and enable enough staffing capacity to be allocated to the demand intervention.</li> <li>• In addition, the Mid Nottinghamshire capacity and demand workstream is helping us to understand overall demand at team level on a weekly basis and to enable us to plan our staff capacity to this demand – this is helping us to identify safe staffing level requirements.</li> <li>• As Newark is such a large team the District Nursing teams have been split into three and are now doing geographical working to improve continuity of patient care</li> </ul>
<p><b>Patients would like more visits – Bassetlaw</b></p> <p>(Source: Feedback Survey)</p>	<p>This relates mainly to Macmillan nurses, Neuro/Stroke Service</p>	<ul style="list-style-type: none"> <li>• The Specialist Palliative Care Nurses agree with the patient and carers the next visit and all Patients have direct numbers to contact the nurses.</li> <li>• The Neurological Nurses agree with the patient when the next visit will be and have contact numbers for support. The commissioners are reviewing the Epilepsy Service.</li> </ul>
<p><b>Patients would like to know changes to times and be told when someone is coming – Bassetlaw</b></p> <p>(Source: Feedback Survey)</p>	<p>This relates mainly to the Adult Integrated Services (North West/North East)</p>	<ul style="list-style-type: none"> <li>• Ward Coordinators have been appointed and will contact patients if there are changes to times of visits</li> </ul>

## 5. MAIN COMPLIMENTS

Below are some of the comments from the feedback survey that illustrate about the **main compliments** shared about Bassetlaw and mid-Nottinghamshire General Healthcare Services:

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

Made me feel better about my condition, gave me confidence and hope. Felt good after exercise, like I was living instead of dying. Many thanks (Cardio Pulmonary Rehab Service)

Everything- on every level the care, attention, service supplied to my relative was faultless. not only to my relative but myself and family, we received the upmost respect, understanding and support at all times. (Hospice in and Day Care)

Everything. Your service is very good, when you phone up they come out straight away and they are very friendly. Thank you for all you have done. (Integrated care team -North)

R and the physios and OT's are all wonderful with Mum, offering sensitive and kind support and encouraging mum to exercise. I personally find their visits and guidance reassuring. (Integrated care team - Newark & Trent)

How the practitioner went into detail and understood me and gave me advice and information and things I could try to help my problem. Listened to me, before advising. (Continence Service)

Everything from food, staff, cleanliness, rooms, patients and relatives being made to feel at ease and that nothing is too much trouble is amazing1 thank you for making an extremely sad time more bearable! (Hospice in and Day Care)

Your staff made me feel comfortable there was no pressure, no being told. ideas were given, a plan was discussed and put into place. (Neuro and Stroke Service including Epilepsy, Parkinson's, and MS)

Very professional All the rapid response team were kind and caring. They put you at ease and I found them to be a lovely team who worked well. They make a positive difference. (Rapid Response Team)

Both nurses who come to see me are brilliant, caring, understanding, very helpful and I feel a lot better knowing they are there for me. (Community Nursing (Ashfield))

## 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 June report, featuring General Healthcare Community Specialist Services:

ISSUE	DETAIL	ACTION TAKEN/PROPOSED	UPDATE – AUGUST 2017
<p><b>Waiting times - Paediatric Speech and Language Therapy</b></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>	<ul style="list-style-type: none"> <li>• Triage telephone referral system in place, thereby ensuring the right referrals are received and the patient sees the right clinician. This will be the only way of referral from January 2018</li> <li>• Reduction in report writing – templates in place to ensure reports are concise and clearly inform the referral agents of the information that is required</li> <li>• Increased usage of RECAP to support the clinicians</li> <li>• Waiting list is monitored on a weekly basis</li> <li>• Action plan is reviewed on a monthly basis with all leads, General Manager and Directorate General Manager</li> </ul>
<p><b>Communication at the Children’s Development Centre</b></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>Telephone system has been to a ‘finder’ system and this seems to have resolved the issue</p> <ul style="list-style-type: none"> <li>- The service has promoted the use of the referral email address – to reduce the pressure on the telephone systems</li> <li>- Administration staff answer phones within the Single</li> </ul>

			<p>Point of Access and then divert to relevant individual to action, i.e. Accept referral, answer query thus freeing up phone lines</p> <ul style="list-style-type: none"> <li>- Answer message can be left and someone is dedicated to returning the call</li> </ul>
<p><b>Waiting time between appointments within the Dental service</b></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>	<p>No update, this will remain the same</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, June - August 2017, and the previous rolling quarter (March – May 2017) in brackets for comparison:

	TRUSTWIDE	FORENSIC SERVICES	LOCAL PARTNERSHIPS - MENTAL HEALTH	LOCAL PARTNERSHIPS -GENERAL HEALTH
SERVICE QUALITY SCORE	95% (95%)	81% (82%)	95% (95%)	96% (96%)
FRIENDS AND FAMILY TEST (FFT)	96% (97%)	76% (76%)	94% (95%)	98% (98%)
SUCE SURVEY RETURNS	5924 (4918)	364 (110)	1831 (1586)	3729 (3222)
PATIENT OPINION STORIES	225 (225)	69 (76)	35(49)	121 (100)
'SERVICE MADE A POSITIVE DIFFERENCE' SCORE	93% (93%)	80% (79%)	90% (90%)	94% (94%)

### 7.2 CARE OPINION HEADLINES

Data collected from Care Opinion website ([www.careopinion.org.uk](http://www.careopinion.org.uk)):

AUGUST 2017	TRUSTWIDE	FORENSIC SERVICES	LOCAL PARTNERSHIPS – MENTAL HEALTH	LOCAL PARTNERSHIPS – GENERAL
Number of postings	67	14	3	50
Number of postings without a response	0	0	0	0
Number of postings rated as moderately critical or above	1	1	0	0
Number of postings with changes made	0	0	0	0

In the last month, one story was rated as moderately critical or above:

- HMP Lindholme** - <https://www.careopinion.org.uk/opinions/388990>  
 This story is critical of the treatment at Lindholme and expresses stress, frustration with the waiting time and the information on the medical file. The Clinical Director, Adarsh Kaul, responded to say he was sorry to hear that our care fell lower than the high standards that we set for our staff and our services and that he will pass the comments onto the healthcare team. Note: From 1 August we are no longer running healthcare services at HMP Lindholme.

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 (September 2016 – August 2017)	Emerging issues (June - August 2017)
<b>TRUSTWIDE</b> (based on 8481 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)	6%	
Appointments (Category: Care/ Treatment)	5%	
<b>FORENSIC SERVICES</b> (based on 796 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)	11%	
<b>LOCAL PARTNERSHIPS – MENTAL HEALTH</b> (based on 1929 responses to the 'What could we do better' question)		
Availability of services (Category: Access to Services)	13%	No emerging issues
Approach to Care (Category: Care/Treatment)	13%	
Waiting time (Category: Access to Services)	6%	
<b>LOCAL PARTNERSHIPS – GENERAL HEALTH</b> (based on 5751 responses to the 'What could we do better' question)		
Availability of services (Category: Access to Services)	18%	Availability of services (Category: Access to Services); 18% in last year, 24% in last quarter.
General (Category: Communication)	9%	
Appointments (Category: Care/Treatment)	8%	

### 7.4 TRUSTWIDE AND DIVISIONAL MAIN COMPLIMENTS

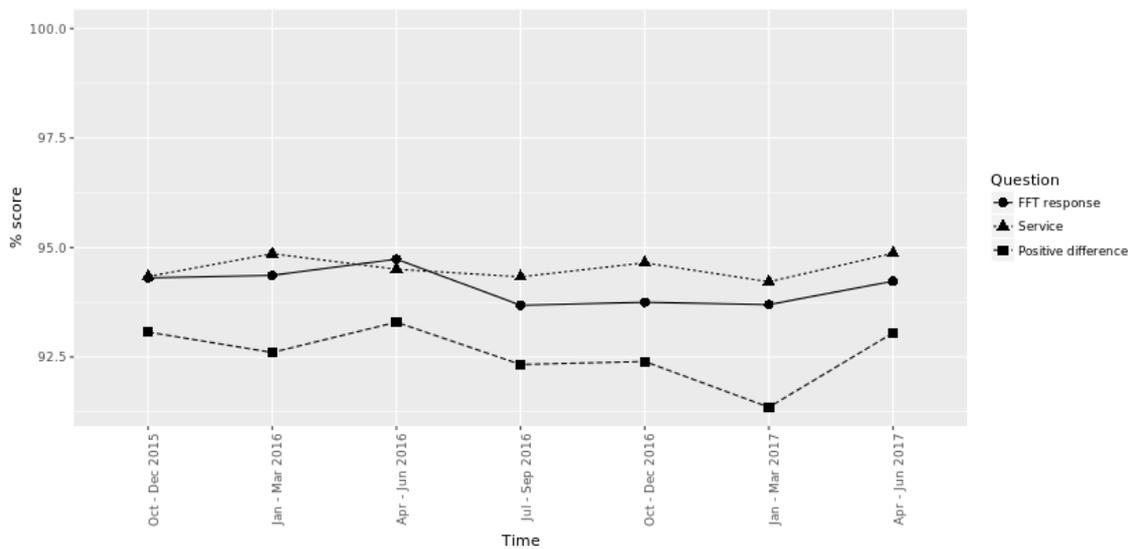
Data collected from the Service User and Carer Experience (SUCE) survey:

	Current rolling year (September 2016 – August 2017)	Emerging issues (June - August 2017)
<b>TRUSTWIDE</b> (based on 13493 responses to 'What did we do well' question)		
General (Category: Service Quality/Outcomes)	16%	No emerging compliments
Helpful/friendly/caring (Category: Staff/Staff attitude)	15%	
General (category: Care/treatment)	9%	
<b>FORENSIC SERVICES</b> (based on 881 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)	15%	
Helpful/friendly/caring (Category: Staff/Staff attitude)	9%	
<b>LOCAL PARTNERSHIPS – MENTAL HEALTH</b> (based on 3175 responses to 'What did we do well' question)		
Quality of Care/Service (Category: Service Quality/Outcomes)	18%	No emerging compliments
Helpful/friendly/caring (Category: Staff/Staff attitude)	13%	
General (Category: Care/Treatment)	7%	
<b>LOCAL PARTNERSHIPS – GENERAL HEALTH</b> (based on 9431 responses to 'What did we do well' question)		
General (Category: Service Quality/Outcomes)	24%	No emerging compliments
Helpful/friendly/caring (Category: Staff/Staff attitude)	16%	
General (category: Care/treatment)	11%	

## 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 link and select the Division you require from the drop down menu: <http://bit.ly/2yk1kEk>

## 8. RECOMMENDATION

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

Paul Sanguinazzi  
Head of Involvement and Experience

September 2017