

**BOARD OF DIRECTORS**  
**29<sup>th</sup> March 2018**

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

**LOCAL PARTNERSHIPS GENERAL HEALTHCARE – CHILDREN’S AND**  
**YOUNG PEOPLE’S 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 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 December is **94%**. Our Friends and Family Test Score is **94%** (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, Children's and Young People's Services**, 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, South Nottinghamshire** (featured in December'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, Children's and Young People's 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:

- Children's Centres – requests for more groups/activities
- Healthy Family Teams – requests for more visits or clinics
- Healthy Family Teams – communication about appointments
- School Aged Immunisation Team – better explanations about immunisations

It also updates on the issues presented in the Patient Voices report submitted to Board three months previously, featuring on **Local Partnerships – General Healthcare, South Nottinghamshire**, in December 2017. These were:

- Waiting time for an appointment (particularly CHD Clinic and Phlebotomy, Carlton, people also mentioned they wanted earlier/later appointments) Waiting time for an appointment
- Staffing Levels (mainly Lings Bar Hospital and the Short Stay Rehabilitation Unit) and Time staff spend with patients (mainly Community Nursing)
- Parking (mainly Phlebotomy, Carlton)
- Set times for nurse visits (mainly community nursing)

### **3. SERVICE IN FOCUS: LOCAL PARTNERSHIPS – GENERAL HEALTHCARE, CHILDREN'S 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, Speech and Language therapy, Looked After Children (LAC), Oral Health Promotion, School Aged Immunisation Service (SAIS).

- Services are delivered across the County and some (SAIS, LAC and Oral Health Promotion) 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 VOICES REPORT WITH A FOCUS ON LOCAL PARTNERSHIPS – GENERAL HEALTHCARE, CHILDREN'S AND YOUNG PEOPLE'S SERVICES (MARCH 2017)**

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, Children's And Young People's Services, which was presented at the Board of Directors in March 2017.

ISSUE	DETAIL	ACTION TAKEN/PROPOSED – MARCH 2017	UPDATE – MARCH 2018
<p><b>Concerns raised about the introduction of opportunities to self-weigh babies</b></p> <p><i>(Source: Care Opinion, Feedback in Clinics, local media and political)</i></p>	<p>New parents concerned that current child health clinic provision lacks time and privacy. Clinics visited by many parents just wanting to know weight of baby. Other parents concerned that access to social support and advice will be compromised due to introduction of self-weigh sessions</p>	<ul style="list-style-type: none"> <li>• 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).</li> <li>• Development of “self-weigh of babies” leaflet to support parents; Ensure scales available. Posters with instructions available.</li> <li>• 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.</li> <li>• Ensure and monitor that there are adequate health visitor sessions for clients to book into.</li> <li>• Promote use of RECAP(digital information prescribing service), Children’s Centres or additional local support.</li> <li>• 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 and 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.</li> </ul>	<p>A range of media, leaflets and posters are still available for parents advising on self-weigh sessions.</p> <p>A demonstration video has been uploaded onto RECAP for parents.</p> <p>Significantly fewer concerns are being raised by parents as the new access routes into the service become established</p> <p>An audit of self-weigh will be carried out in the next quarter to review the use of self-weigh and if any improvements need to be made. This will include a Countywide service user audit</p>
<p><b>Remodelling of 0-19yrs public health CYP service and concerns about reduced service provision</b></p> <p><i>(Source: Media, union, service users, CCG)</i></p>	<p>Reduced funding and new service specification requires remodelling of current service offer.</p>	<ul style="list-style-type: none"> <li>• Close working with commissioners during mobilisation phase. Joint communications plan with NCC (Nottinghamshire County Council) developed.</li> <li>• Utilise outputs of full consultation carried out by NCC prior to retendering that was supported by our services.</li> <li>• Engagement of staff side from the outset.</li> <li>• Engage quality and risk team to scrutinise and challenge.</li> </ul>	<p>Ongoing service transformation and development of the model continues with commissioners as part of Service Development and Improvement Plan (SDIP).</p> <p>Audit with service users and staff on access to services in progress</p> <p>Stakeholder review is being designed</p>

		<ul style="list-style-type: none"> <li>• Information on new model distributed to all key stakeholders and service users.</li> <li>• Staff fully engaged in process.</li> <li>• 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.</li> <li>• 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</li> </ul>	
<p><b>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</b></p> <p><i>(Source: Trustwide SUCE survey and direct requests)</i></p>	<p>Service users identified this as a need that they would like to be addressed</p>	<ul style="list-style-type: none"> <li>• Scheduled three Save a Baby's Life courses for Brinsley, Awsworth and Eastwood through Royal Life Saving Society in January.</li> <li>• Promoted these during sessions, in the What's On and on Facebook.</li> <li>• Proving popular with parents and expect to have lots attending.</li> <li>• Post on Facebook promoting this reached a record number of people on Facebook – 1988 people reached in the first three days.</li> <li>• 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</li> </ul>	<p>Evaluation of all courses is routinely undertaken. See response below regarding response to requests for more groups</p> <p>Children Centres are currently subject to a full service redesign by commissioners and will be a referral only service from June 2018. This means this course will no longer be universally available.</p>
<p><b>To improve communication and format of advice provided</b></p> <p><i>(Source: Direct from service users)</i></p>	<p>Rushcliffe Health Visiting clients would like to receive information in other formats not just leaflets</p>	<ul style="list-style-type: none"> <li>• Working group arranged to progress launching RECAP in Rushcliffe.</li> <li>• RECAP is now live and is being rolled out across services</li> </ul>	<p>RECAP continues to be 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>Service user and staff audit of advice lines and other access routes is underway</p> <p>Work continues with commissioners and colleagues in communication on the content of the Trust website and links to the Local Authority 'Health for Teens' and Health for Kids web pages.</p>

### 3.2 DIRECTORATE HEADLINES

Data collected from the Service User Feedback survey and Care Opinion..

	[Current rolling quarter 1 <sup>st</sup> Dec 2017 – 28 <sup>th</sup> Feb 2018]	[1st Sep 2017 – 30 <sup>th</sup> Nov 2017]
Service Quality Score	94%	96%
Friends and Family Test (FFT)	97%	98%
SUCE survey returns	1311	818
'Service made a positive difference' score	94%	95%
Care Opinion postings	98	100

### 3.3 DIRECTORATE MAIN ISSUES AND 'BEST THING'

Data collected from the Service User Feedback survey:

	Last year (Mar 2017– Feb 2018)	Current Quarter (Dec 2017 – Feb 2018)
<b>ISSUES</b> (based on 1383 responses to the 'What could we do better' question)		
<b>Availability of Services</b> (Category: Access to Services) Comments range across Children's Centres and Healthy Family Teams. The comments are mainly requests for more groups or for more visits/clinics. <ul style="list-style-type: none"> <li>Bring back play and stay! its a great group for all ages (Sure Start Arnbrook, Arnold &amp; Killisick Children's Centres)</li> </ul>	34%	There are no emerging issues.
<b>Activities</b> (Category: Care/ Treatment) Comments are focused on the Children's Centres are mainly about requests for additional activities. <ul style="list-style-type: none"> <li>More things for under 1's messy play sensory baby massage (Sure Start Mansfield Woodhouse &amp; Warsop Children's Centres)</li> </ul>	7%	
<b>General</b> (Category: Communication) Comments are mainly about the School Aged immunisation Services and the Health Family Teams. Comments are varied but include comments about communication about appointments and requests for better explanations about immunisations. <ul style="list-style-type: none"> <li>Explain what the side effects of the vaccination are (School Aged Immunisation Team)</li> </ul>	7%	
<b>COMPLIMENTS</b> (based on 2582 responses to 'What did we do well' question)		
<b>Helpful/Caring/Friendly</b> (Category: Staff/Staff Attitude)	19%	There are no emerging compliments.
<b>General</b> (Category: Service Quality/Outcomes)	17%	
<b>Communication</b> (Category: Availability of information)	9%	

### 3.4 CARE OPINION

In the last year 474 stories have been published on Care Opinion commenting about Local Partnerships – General Healthcare, Children’s And Young People’s Services:

	March 2017 – February 2018	March 2016 – February 2017
Number of postings	474	464
Number of postings without a response	9	0
Number of postings responded to within two working days	301	358
Number of postings rated as moderately critical or above	0	1
Number of postings which lead to a change in service	6	16

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

In the last year, six stories led to changes:

**In the last year, 6 stories led to a change:**

**1 Manton Children's Centre North Workshop Children's Centre, Prospect Kilton Children's Centre**

<https://www.careopinion.org.uk/opinions/364218>

**Change:** Entry procedure to an event was changed and a new system developed

**2 Prospect Kilton Children's Centre**

<https://www.careopinion.org.uk/opinions/363493>

**Change:** New process for entry to an event to reduce waiting time.

**3 Eastwood Children's Centre**

<https://www.careopinion.org.uk/opinions/360758>

**Change:** Lunch at future events will provide more age appropriate food

**4 Eastwood Children's Centre**

<https://www.careopinion.org.uk/opinions/360749>

**Change:** Future events will have an improved timetable for eating.

**5 Eastwood Children's Centre**

<https://www.careopinion.org.uk/opinions/360699>

**Change:** Alternative catering arrangement catering to more tastes offered for future events

**6 Beeston Central Children's Centre**

<https://www.careopinion.org.uk/opinions/353899>

**Change:** New Mum felt upset by the formal appointment with the Health Visitors. They decided to remodel the way staff present to parents during appointments to make the environment feel more friendly. The Breast Feeding Champion agreed to ensure there would be a comfortable area for feeding for babies.

### 3.5 SUMMARY OF FEEDBACK CRITICALITY VIA FEEDBACK SURVEY (March 2017 – February 2018)

In the last year, Local Partnerships – General Healthcare, Children’s And Young People’s Services received 4424 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	1258	327	29	2693	5

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, we analyse the feedback received via the survey which is deemed highly critical. However, as there was only one highly critical comment there were recurring themes or services receiving high volumes of highly critical feedback.

### 3.6 COMPLAINTS

Between March 2017 and February 2018, services within CYP/Sure Start have been the subject of 2 complaints compared with 10 complaints in the previous 12 month period. The number by service is shown below:

Service	Total March 2017- Feb 2018	Total March 2016- Feb 2017
0-19 Healthy Families Team	1	8
CHP School Nursing	1	N/A
Child and Family Notts West	N/A	1
Children In care and Adoption Team	N/A	1

The themes most often arising in complaints are outlined below:

Theme	Total March 2017- Feb 2018	Total March 2016- Feb 2017
InfoTo/CommunWith Carers/Relatives	1	1
Staff Attitude - Nursing	1	1
Appointment Arrangements	N/A	1
Confidentiality	N/A	2
Medical Care Adequacy of treatment	N/A	3
Privacy/Dignity	N/A	1
Quality/Accuracy of Clinical Records	N/A	1

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

#### Case 15518:

JE unhappy with lack of support from first Health Visitor- stated would get JE information but never did and that she would refer to a Paediatrician but then wouldn't do this.

JE unhappy that second Health Visitor did not attend for appointment on 8 March and that a referral to Physio had not been done.

Unhappy with lack of communication overall from the Health Visiting Team no one year review arranged - had to chase. Not advised that second Health Visitor had changed, appointment had been cancelled or that referral to physio had not been made.

Team unaware of the complaints process- sent JE SUCE Form instead of complaints leaflet - JE had to keep chasing.



**Case 15812:**

Parent unhappy that a Safeguarding referral for fabricated illness had been made by the School Nursing Team stating that the referral was 'personal'

**Case 14519:**

- Experienced a number of changes of health visiting teams which has led to frustration and stress at a time when child had ongoing health needs.
- Had to persevere and be persistent with a number of staff in a number of venues in order to try and get the appropriate support from the Health Visiting Team.
- Believe that had there been a continuity of support by the Health Visiting Team, child's falling weight would have been identified earlier and a referral to a Pediatrician would have been made earlier.

**Case 13039:**

Parent unhappy that confidential information had been shared from her Health Visitor to her Consultant which was inaccurate. Wanted to do a Subject Access Request to see their and their child's notes.

**Outcomes:**

The following table shows the outcome of complaints closed during the period March 2017 and February 2018:

Outcome	Total March 2017- Feb 2018
Complaint Upheld In Part	1
Complaint Not Upheld	1
Complaint Upheld	N/A
Complaint Not Pursued	N/A

**Learning/Actions:**

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

Learning from complaint 15518, regarding 0-19 service in Bassetlaw.

**Learning Point 1:** *'Practitioner missed planned appointment and did not cancel – identified as key issue regarding info sharing during organisational change'* **Action:** Introduce allocation meetings for the healthy families teams to prioritise and allocated in a timely fashion

**Learning Point 2:** *'Complaints process not followed accurately'* **Action:** Circulation of policy and procedure to all team members as reminder

**Informal Complaints**

There were 35 informal complaints in total received.

The number by service is shown below:

Service	Total March 2017- Feb 2018	Total March 2016- Feb 2017
0-19 Healthy Families Team	17	8
Family Nurse Partnership	1	3
School Nursing	1	2
Child and Family Nott NandE	N/A	1
Children In care and Adoption Team	N/A	1
Notts west Sure Start	N/A	1



The themes of the informal complaints are outlined below:

Theme	Total March 2017- Feb 2018	Total March 2016- Feb 2017
Appointment Arrangements	3	2
CommunicationWithOther Services/Agencies	2	1
Confidentiality	1	N/A
InfoTo/CommunicationWith Carers/Relatives	2	1
Info to/Communication with Patients	1	N/A
Length of time to be seen/Service Availability	2	3
Medical Care Adequacy of treatment	1	N/A
Nursing Care Non-Inpatient	2	1
Staff Attitude Nursing	3	N/A
Staff Attitude Other	2	N/A
Assault/Phys Aggr/Threat Incident	N/A	1
Staff Attitude Medical	N/A	1
Medical Care - Diagnosis	N/A	1
Other Care	N/A	1
Support to Carers	N/A	4

### 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 afore mentioned 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.

#### 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>Children's Centres – requests for more groups/activities</b></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"> <li>• Full timetables for districts produced and promoted on the SureStart Facebook page</li> <li>• 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</li> <li>• 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</li> <li>• 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</li> <li>• Co-delivery of courses improved links with the Children's Centre and Family Service and strengthens service deliver by incorporating different expertise</li> </ul> <p>Following feedback range of courses include:</p> <ul style="list-style-type: none"> <li>• Confidence and self-esteem course delivered in partnership with 'We Are Here' as a follow on from Freedom Programme.</li> <li>• Mindfulness/Confidence building</li> <li>• Christmas Crafts course</li> <li>• Baby Yoga and XPLORE (Music &amp; Movement session)</li> <li>• Workshop by Freed Beeches around body image, self-esteem and included strategies to developing confidence and resilience</li> <li>• Employability workshop organised and hosted by County Council</li> <li>• Save a Baby's Life' session ran in Newark as part of a 'Ready Steady Wean'</li> <li>• Parents with twins and triplets have been empowered to create a group for themselves</li> </ul> <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><b>Healthy Family Teams – requests for more visits or clinics</b></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"> <li>• Full audit underway looking at appointment availability and all other ways service users might access the service to ensure capacity is appropriately distributed.</li> <li>• Ongoing reviews of Self-Weigh sessions has resulted in increased provision across several areas. Number of Self-Weigh sites increased to meet the needs of the community previously not captured.</li> <li>• 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.</li> </ul>
<p><b>Healthy Family Teams – communication about appointments</b></p> <p>Source: Feedback survey</p>	<p>Several people raised issues about communication about appointments</p>	<ul style="list-style-type: none"> <li>• Updated information leaflets for parents and young people developed to support understanding of the new model and how to contact the service</li> <li>• Attending school meetings to discuss the model, interventions and referral pathways into the teams.</li> <li>• Contact details circulated to the Primary and Secondary School Attendance Leads.</li> <li>• Attending the Behaviour Partnership Meeting to discuss the service offer and Tier 1 Behaviour Interventions to ensure clarity of the core offer.</li> <li>• Exploration of text reminders facility in SystemOne so automated reminders are sent to parents</li> </ul>
<p><b>School Aged Immunisation Team (SAIS) – better explanations about immunisations</b></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"> <li>• 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</li> <li>• Close relationships with local schools now established via link staff which has enabled school support workers present during sessions.</li> <li>• We will continue this approach to offer children continuity and bespoke support including home visits where required</li> <li>• 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.</li> <li>• 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.</li> </ul>

		<ul style="list-style-type: none"><li>• 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.</li></ul> <p>A specific case study of how NHCFT have positively 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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## 5. MAIN COMPLIMENTS

Below are some of the comments from the feedback survey in response to the question 'What did we do well?' about Local Partnerships – General Healthcare, Children's And Young People's Services:

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

#### Healthy Family Teams:

- Helped me with coping strategies and getting my feelings off my chest
- Advice on breastfeeding has been great Health visitor
- I like how the service is for 0 - 19 years enabling a more joined up service.
- Always at the end of the phone when I need any advice.
- Communication - always available when needed for advice - excellent advise

#### Childrens Centres

- Excellent service. Such kind, welcoming and supportive staff. Well done Surestart.
- Provide a safe place to interact with other mums and babies. Lots of advice and leaflets available.
- Range of activities and helpful staff. Positive Interaction & encouragement

### 5.2 A SAMPLE OF COMPLIMENTS FROM CARE OPINION:

#### Childrens Centres

- I love the children's centre, it has supported me no end with both my boys. I have made all my mum friends through the centre and access at least one group a week. Over the last year I have; completed volunteer training, perinatal training, used crèche, volunteered at BABES and Ante natal class, attended groups as a mum. I feel so supported by the staff and feel the centre is allowing my children to thrive.
- After the course I attended...followed by another course...I began the process of starting to become a Volunteer....I realised I liked the admin side and at a meeting with Job Centre they discussed more opportunities for experience in that kind of work. I also did the minutes for the Parents Forum. This resulted in me now holding a "work experience" post in the Mansfield Job Centre. I have come a long way this past year and enrolled myself onto two IT courses to gain more skills for office work.

### 5.3 A SAMPLE OF COMPLIMENTS FROM RECEIVED VIA OTHER FEEDBACK E.G.THANK YOU CARDS:

#### Family Nurse Partnership thankyou card:

- Thank you for everything you have done for them. Would not have got this far without you

#### Oral Health Promotion feedback from a school:

- We have many children who have no idea how to brush their teeth before starting the programme and already have significant tooth decay. These children are now competent at brushing their teeth regularly and we feel more confident to speak to these parents about their child's oral health due to the programme.

#### Speech and Language Therapy Service feedback from a course attendee

- The most useful thing I've learnt is understanding the different aspects of trying/learning to talk- we don't realise how hard it is and how many things you need to learn to be able to do. It really opened my eyes. I was taken aback by how many different things you have taken in as you learn to talk. I really enjoyed the course and being able to utilise the homework with play with my son.

## 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 2017 report, featuring **Local Partnerships – General Healthcare, South Nottinghamshire**

ISSUE	DETAIL	ACTION TAKEN/PROPOSED – MARCH 2017	UPDATE - MARCH 2018
<p><b>Waiting time for an appointment</b> (particularly CHD Clinic and Phlebotomy, Carlton, people also mentioned they wanted earlier/later appointments)</p>	<p>Recent commissioning decisions in relation to phlebotomy services has as a consequence led to a steady increase in waiting times in certain clinics. Waiting times are closely monitored via existing contract monitoring routes</p> <p>Patients are allocated time slots for clinics and community patients are seen between the hours of 08:00 -20:00pm.</p>	<p>Current performance and concerns re waits have been escalated to the CCG (Clinical Commissioning Group) via existing contract monitoring routes.</p>	<p>Waiting times are continually monitored and have recently reduced. However, we continue to liaise with the CCG and monitor this closely.</p>
<p><b>Staffing Levels and Time staff spend with patients</b> (mainly Lings Bar Hospital and the Short Stay Rehabilitation Unit) (mainly Community Nursing)</p>	<p>Nurse recruitment at Lings Bar Hospital (LBH) and Short Stay Rehabilitation Unit (SSRU) continues to be challenging and mirrors both local and national context. Work is currently 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>We commenced the next phase of the division wide implementation of Meridian project across the south of the county on the 1<sup>st</sup> December 2017 whereby engagement and buy in sessions are currently being facilitated with senior managers in order for them to gain a greater understanding of the approach and underpinning methodology that will deliver improvements and our overall understanding of capacity and demand for care.</p>	<p>Nurse staffing levels continue to be formally reported to Board on a monthly basis. Vacancies have reduced recently. Discussions are ongoing with the CCG in relation to the provision of services at LBH of which will determine future staffing levels.</p> <p>Phase 2 of the Meridian project (LBH) commenced in March 2018</p>

<p><b>Parking</b> (mainly Phlebotomy, Carlton)</p>	<p>There is limited parking at Park House. All staff are aware they are only to park at base when collecting equipment/stock. Staff are encouraged to park off site.</p>	<p>This is monitored and closely managed by the Health Centre Management Team.</p>	<p>No recent issues raised.</p>
<p><b>Set times for nurse visits</b> (mainly community nursing)</p>	<p>Wherever possible the community teams will see patients that have requested a specific time to visit due to day hospice, hospital appointments etc. We try to accommodate patients with their requests but this is not always possible.</p>	<p>The community nursing teams try to accommodate specific requests regarding timing of visits wherever possible, however, this is not always possible due to competing priorities and urgent requests. The team ensure that patients are advised accordingly.</p>	<p>No recent issues raised by patients but staff continue to accommodate patients with specific appointments wherever possible.</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 2017 to February 2018, and the previous rolling quarter (September - November 2017) in brackets for comparison:

	TRUSTWIDE	FORENSIC SERVICES	LOCAL PARTNERSHIPS - MENTAL HEALTH	LOCAL PARTNERSHIPS -GENERAL HEALTH
SERVICE QUALITY SCORE	94% (94%)	81% (77%)	95% (94%)	95% (96%)
FRIENDS AND FAMILY TEST (FFT)	94% (94%)	73% (66%)	93% (90%)	97% (98%)
'SERVICE MADE A POSITIVE DIFFERENCE' SCORE	91% (92%)	81% (76%)	88% (88%)	94% (94%)
SUCE SURVEY RETURNS	4287 (4817)	294 (285)	1309 (1746)	2684 (2786)
CARE STORIES OPINION	235 (230)	51(54)	49 (24)	135 (152)

### 7.2 CARE OPINION HEADLINES

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

FEBRUARY 2017	TRUSTWIDE	FORENSIC SERVICES	LOCAL PARTNERSHIPS - MENTAL HEALTH	LOCAL PARTNERSHIPS - GENERAL
Number of postings	66	3	11	52
Number of postings without a response	12	1	0	11
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:

<https://www.careopinion.org.uk/opinions/470823>

#### "Problem with Medication" Rampton hospital

Patient story about issues relating to diabetes medication around meal times and how the patient feels towards staff who have more freedom to eat when they want to and the expectations of the patient and the restrictions the patient feels are imposed on the ward around meal times.

*'As a result of unpleasant side effects I choose not to take metformin, but I then get written up as refusing to comply with medication regime. At the same time the nurses don't care and leave me at risk due to this'.*

The reply from the Deputy Matron has invited the patient to speak to the Ward Manager to discuss a way forward.

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 (March 2017- February 2018)	Emerging issues (December 2017 – February 2018)
<b>TRUSTWIDE</b> (based on 7451 responses to the 'What could we do better' question)		
<b>Availability of Services</b> (Category:)	14%	No emerging issues
<b>Approach to Care</b> (Category: Care/Treatment)	10%	
<b>Waiting</b> (Category: Access to services)	6%	
<b>FORENSIC SERVICES</b> (based on 849 responses to the 'What could we do better' question)		
<b>Approach to Care</b> (Category: Care/Treatment)	11%	Communication (General) has gone from 4% in the last year to 9% of issues this quarter
<b>Staffing Levels</b> (Category: Staff/Staff Attitude)	11%	
<b>Waiting Time</b> (Category: Access to services)	8%	
<b>LOCAL PARTNERSHIPS – MENTAL HEALTH</b> (based on 1937 responses to the 'What could we do better' question)		
<b>Approach to Care</b> (Category: Care/Treatment)	18%	No emerging issues
<b>Availability of Services</b> (Category: Access to services)	15%	
<b>Waiting Time</b> (Category: Access to services)	8%	
<b>LOCAL PARTNERSHIPS – GENERAL HEALTH</b> (based on 4 665 responses to the 'What could we do better' question)		
<b>Availability of Services</b> (Category: Access to services)	19%	No emerging issues
<b>Appointments</b> (Category: Care/ Treatment)	11%	
<b>General</b> (Category: Communication)	8%	

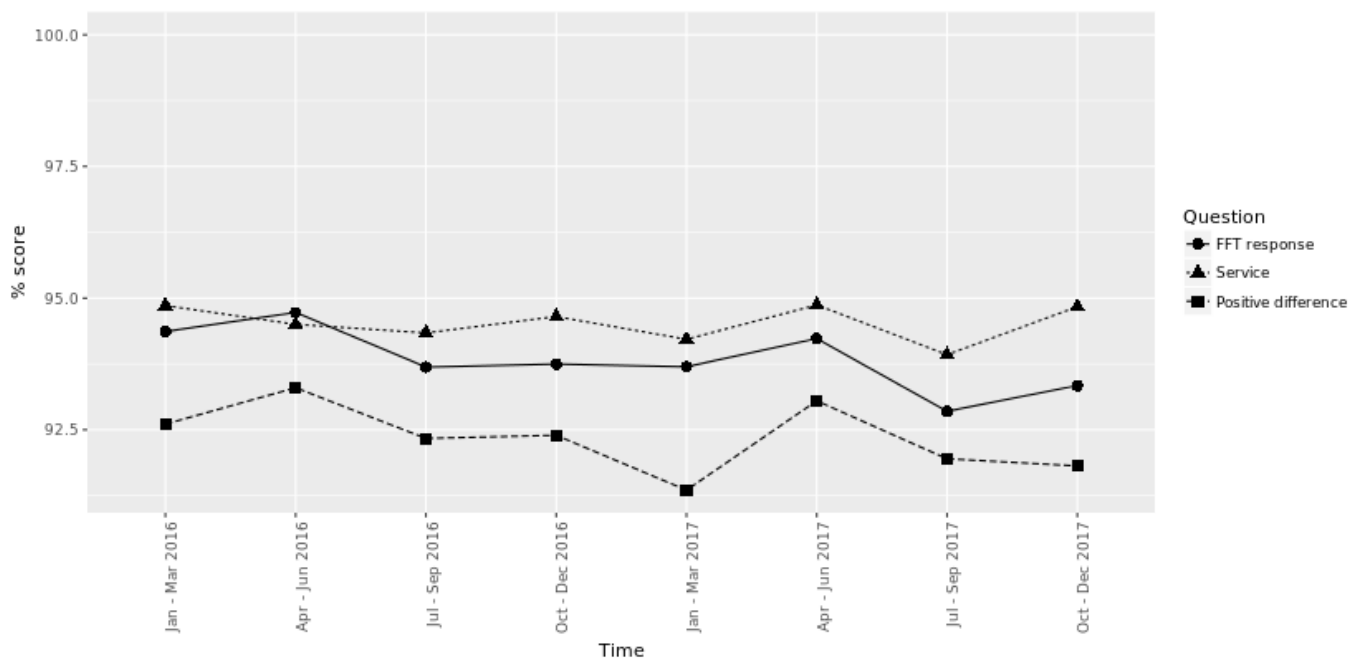
## 7.4 TRUSTWIDE AND DIVISIONAL MAIN COMPLIMENTS

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

	Current rolling year (February 2017-January 2018)	Emerging compliments (December 2017 – February 2018)
<b>TRUSTWIDE</b> (based on 11839 responses to 'What did we do well' question)		
<b>General</b> (Category: Service Quality/Outcomes)	16%	No emerging compliments
<b>Helpful/Caring/Friendly</b> (Category: Staff/Staff Attitude)	13%	
<b>General</b> (Category: Care/ Treatment)	10%	
<b>FORENSIC SERVICES</b> (based on 953 responses to the 'What did we do well' question)		
<b>Being listened to</b> (Communication)	15%	No emerging compliments
<b>Quality of Care/Service</b> (Category: Service Quality/Outcomes)	12%	
<b>General</b> (Category: Care/ Treatment)	8%	
<b>LOCAL PARTNERSHIPS – MENTAL HEALTH</b> (based on 3335 responses to the 'What did we do well' question)		
<b>Quality of Care/Service</b> (Category: Service Quality/Outcomes)	16%	No emerging compliments
<b>Helpful/Caring/Friendly</b> (Category: Staff/Staff Attitude)	12%	
<b>General</b> (Category: Care/ Treatment)	10%	
<b>LOCAL PARTNERSHIPS – GENERAL HEALTH</b> (based on 7551 responses to the 'What did we do well' question)		
<b>General</b> (Category: Service Quality/Outcomes)	25%	No emerging compliments
<b>Helpful/Caring/Friendly</b> (Category: Staff/Staff Attitude)	15%	
<b>General</b> (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 links below:

Local Partnerships - Mental Health: <https://tinyurl.com/yaeuwpxp>

Local Partnerships - General Health: <https://tinyurl.com/y8j95lho>

Forensic Services: <https://tinyurl.com/yd7xy7sf>

## 8. RECOMMENDATION

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

Paul Sanguinazzi  
Head of Involvement and Experience

March 2018