

Joint Health Overview and Scrutiny Committee (Sandwell and Birmingham)

27 September 2023

Subject:	Patient Experience at Sandwell and West
	Birmingham Hospitals NHS Trust
Director:	Chief Nursing Officer
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1 Recommendation

That the Joint Health Overview and Scrutiny Committee (JHOSC) notes and comments on the Sandwell and West Birmingham Hospitals NHS Trust's (SWB) approach to patient experience.

2 Reasons for Recommendations

The detail of this report was produced at the request of the JHOSC in August 2023.

3 How does this deliver objectives of the Corporate Plan?

×*	Best start in life for children and young people
XXX	People live well and age well
ŶŶ	Strong resilient communities



4 Context and Key Issues

- 4.1 The purpose of this report is to update the JHOSC about the Sandwell and West Birmingham Hospitals NHS Trust (SWB) approach to patient experience. The report describes:
 - recent history and context;
 - action taken;
 - the forward plan in line with the 'Fundamentals of Care' (FoC) (International Learning Collaborative, 2013) approach.
- 4.2 FoC is SWB's flagship clinical improvement framework driving our patient focussed strategic objectives. The approach strives to improve basic standards of care, ensuring these are owned by all and applied consistently.
- 4.3 Within the FoC framework, 'Communication' and 'Harm Free Care' are identified as priorities in line with the patient strategy. Work and projects described in this report strive to improve patient experience and personalisation in compliance with these standards, within the FoC framework.
- 4.4 SWB appointed a patient experience lead in January 2022. The purpose of this appointment was to implement a governance framework and systems of learning from patient experience; also to instigate and support various workstreams to improve experiences of care.
- 4.5 At this time, local and national patient experience benchmarking was undertaken against national CQC and NHS England experience measurement tools. Self-assessment according to the NHSI Patient Experience Improvement Framework and National Institute for Clinical Excellence guidance was completed.
- 4.6 A working action plan to develop internal systems and processes for gathering and learning from patient insights was devised. This plan was informed by the analysis and the SWB FoC strategy.
- 4.7 Information below describes progress since and further plans.



4.8 Patient Experience Developments, 2022 – 2023

4.9 Patient Experience Group

A multi-disciplinary Patient Experience Group (PEG) was established, including external partners. PEG reviews progress against FoC from patient, relative and carers perspectives. PEG reports through to Trust Board via Quality and Safety Committee. PEG's cycle of reporting is reviewed regularly to ensure reporting, discussions and action required are timely and relevant.

A communication action plan is overseen by PEG which receives routine updates on key updates and established workstream achievements.

Maternity and neonatal services have since implemented a local PEG based on corporate terms of reference and cycle of reporting.

4.10 CQC national surveys

An analysis framework of SWB CQC national patient survey results is in place; this includes year on year comparison highlighting significant statistical variations and national plus regional benchmarking.

4.11 Patient Reported Experience Measures (PREMs)

This programme was established and continues development across SWB. This allows local areas to measure specific experiential aspects of care (e.g. involvement in care, communication, kindness and respect etc.) and allows areas to rely on the NHS Friends and Family Test as a single indicator of experience.

Over 60 areas Trust-wide (from zero in April 2022) now have capability to gather additional experiential data electronically, aligned with FoC standards.

To support increased participation, a PREMs trial using SMS methodology has recently taken place in Imaging across a 2,000 patient sample. Over 200 patients participated over 4 days. This was a highly significant increase compared with existing participation, providing the Imaging department with rich insight into their patients' experiences of care, both qualitative and quantitative.



4.12 Patient experiences of specific local projects

Supplementary to PREMs described above, detailed analysis of patient reported experiences were conducted to support local work or specific workstreams. For example, experiences of Intelligence Conveyancing¹, food, nutrition and hydration and mental health needs, drawing on a range of data sources.

4.13 Interpreting

A review of SWB services and provision was completed in partnership with the Sandwell Consortium. An action plan was formulated on the basis of considerable the public feedback obtained (qualitative) and the subsequent review recommendations. Delivery involves trialling virtual video interpreting services (underway in Maternity and Audiology), booking system modernisation, introduction of quality standards and development of information about interpreting services for patients and their families.

4.14 Birmingham Midland Eye Centre (BMEC)

An independent review of patient experience was completed. A further academic study of BMEC patient experience (January – July 2022) was also completed. Recommendations from both reports informed the BMEC experience action plan.

4.15 Bereavement

A steering group is established to develop and improve information, and its accessibility, about death and processes involved. Methodology to capture relatives' and carers' experiences of loved-ones' deaths in SWB's care has been devised. A community feedback session took place (September 2023) to understand community needs, widen the discussion and inform work and training plans.

4.16 Patient experience training

Internal training focussing on experience and communication has been developed and deployed, using lived-experiences of care. Additionally, a one-day session drawing on internal expertise and external partners focussing on FoC took place (June 2023). This session is being enhanced and three further days are scheduled for early 2024.

¹ **Intelligence Conveyancing** – the practice of patients being transported via ambulance to a hospital / Emergency Department outside of their immediate local area due to prevailing regional pressure in the system. For example, a patient living in Solihull may taken to Sandwell Hospital Emergency Department due to existing regional pressure.



Lived experiences of mental health are included in training plans. The #HealthNow Birmingham has provided a virtual training package for use in SWB Primary Care areas, with agreement to develop a similar resource for acute and emergency care.

4.17 Patient stories

Patient, carer and relatives' lived-experiences of care are routinely captured across the organisation with supporting guidance developed for staff, for use in meetings across the organisation and in training sessions.

4.18 Population participation

A framework for patient and population participation in SWB meetings, training and assurance has been devised and continues development **(appendix i)**.

4.19 Personalisation of Care

A multi-disciplinary trial of documentation to improve care personalisation is in place across 'Care of the Elderly' inpatient wards. Personalisation training has supported implementation in these areas. Initial pre and post baseline measurement strongly indicates positive impact. A personalisation study day is scheduled (October 2023) supported by external expertise and patient family / carers.

4.20 Recruitment

A Patient Experience Manager was recruited and is making significant impact in development of work described.

4.21 Patient Experience – Onward Developments

4.22 <u>Fundamentals of Care – Experience and Personalisation</u> Key priorities are identified for year one focussed upon triangulating all sources of patient experience data, developing training and SWB peoples' access to this.

Further, personalisation of care is a key area of further focus across. Methods to support personalisation through pre-operative assessment are being explored.

Digital communication with patients and the public and creating the optimum patient friendly environment, in readiness for the opening of



Midland Metropolitan University Hospital and across the retained estate, is being developed through the FoC plan.

4.23 Training

Further communication and customer services training is being sourced. Discussions have taken place about developing additional internal training in advanced communication skills.

A charter is under development communicating what patients, carers and relatives should expect from communication with staff and staff behaviour.

4.24 Data triangulation

A dashboard incorporating patient, carer and relative feedback across a range of sources will be developed to support understanding of patient experience feedback at various organisational levels, from ward to Board. This will allow improved understanding of patient reported progress against SWB FoC standards.

4.25 Carer support - development

A carers network being created to work in conjunction with a community carers group / forum, incorporating lived-experiences of mental health needs. Further on-site support (e.g. access to parking, on-site discounts, carer packs, overnight stay etc.) is being scoped. Information will be produced for carers about what support is available to them.

4.26 Vulnerabilities

Supplementary to the carer support development, a specific workstream to develop and improve how SWB people communicate with a range of vulnerable patients is being implemented. Key priorities are to scope specific supporting documentation, communication tools, aids (e.g. 'communication boxes') and any suitable training. This work will inform plans on developing a patient friendly environment.

4.27 Patient Experience Ambassadors

All SWB people are being invited to join a community of practice across the Trust; profession, designation or seniority is not relevant to who can join this. Key requirements for Ambassadors are their passion and commitment to promoting positive patient experience and initiating changes in their areas. This community will share best-practice and influence improvement in experience and communication locally. They will be empowered to escalate through to PEG should they need.



5 Appendix

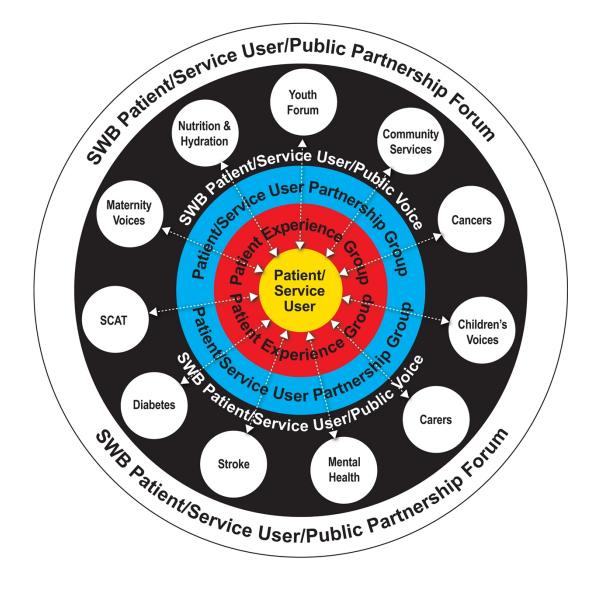
Appendix 1 - SWB Patent and Public Participation Framework

6 Background Papers

International Learning Collaborative. (2013). The Fundamentals of Care Framework. Retrieved from ILC: https://ilccare.org/resource/the-fundamentals-of-care-framework/



Appendix 1



SWB Patent and Public Participation Framework

