



Patient Experience Annual Report 2019-2020

Putting Patients First | You matter

Executive Summary

At board level, the Chief Nurse has responsibility for patient experience within the Trust which includes; delivery of the patient experience strategy, compliance with the national Friends and Family Test (FFT), national patient surveys and the equality agenda for the delivery of services.

Through listening to the experience of patients and carers the Trust aims to embed a culture of improvement, sharing lessons which are learnt in response to the feedback and ensuring the way in which services are provided make them accessible to the community.

Patient stories are shared at the beginning of each public board. Stories can be shared in person or through a short film to share feedback, demonstrate improvements which have been made as a result and share learning. This provides the board with examples of patients experience when accessing services or treatment within the Trust.

Complaints and Patient Advice Liaison Service (PALS) data is presented to the Trust Board quarterly to provide an overview of present concerns which are raised including actions and learning which has been taken to improve patient experience. PALS data is a valuable source of real time feedback and how the Trust responds to the information being shared can positively improve a patient's experience.

Our commitment is to continue to build upon the achievements which have been made to improve patient experience, recognise opportunities for improvement and to continually strive to provide a good experience for everyone accessing services within the Trust.



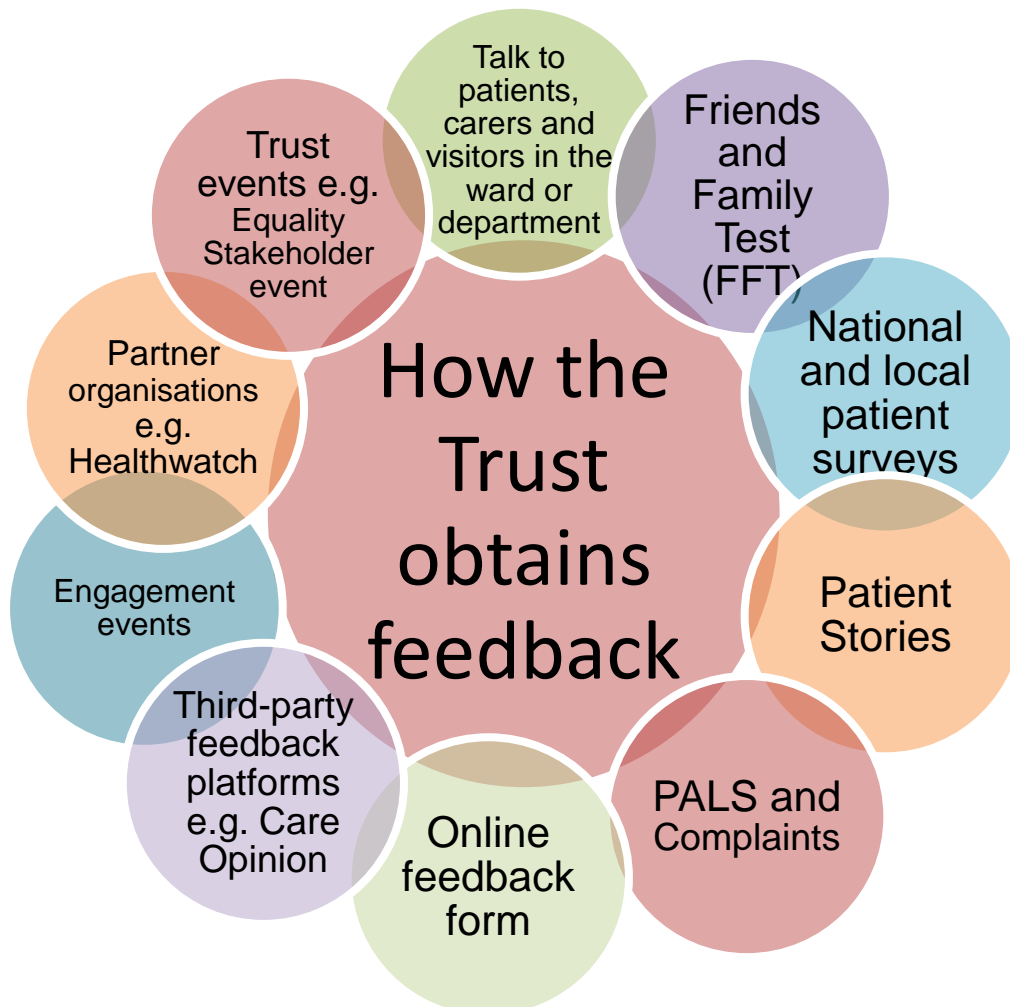
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1. Introduction

The Shrewsbury and Telford Hospital NHS Trust (the Trust) aims to provide the safest and kindest care for all patients. To do this, we must provide care that is responsive to individual patient preferences, needs and values. Gaining insight into patients' current experience and receiving feedback on both what was done well and what could be improved is critical to ensuring a high-quality, person centered service is provided to every patient who accesses services within the Trust.

The Trust welcomes feedback from patients, their family, carers and volunteers. Feedback is obtained through various sources which include:



The Trust also works with patient representative groups (e.g. the Patient and Carer Experience (PaCE) Panel), local partner organisations and protected characteristic groups who provide a voice of their lived experiences and help us to further understand individual needs, with the aim of improving accessibility and service equity.

The Patient Experience Annual Report will provide an overview of the work that has been carried out across the Trust to improve patient and carer experience over the last year (2019/2020).

2. Friends and Family Test

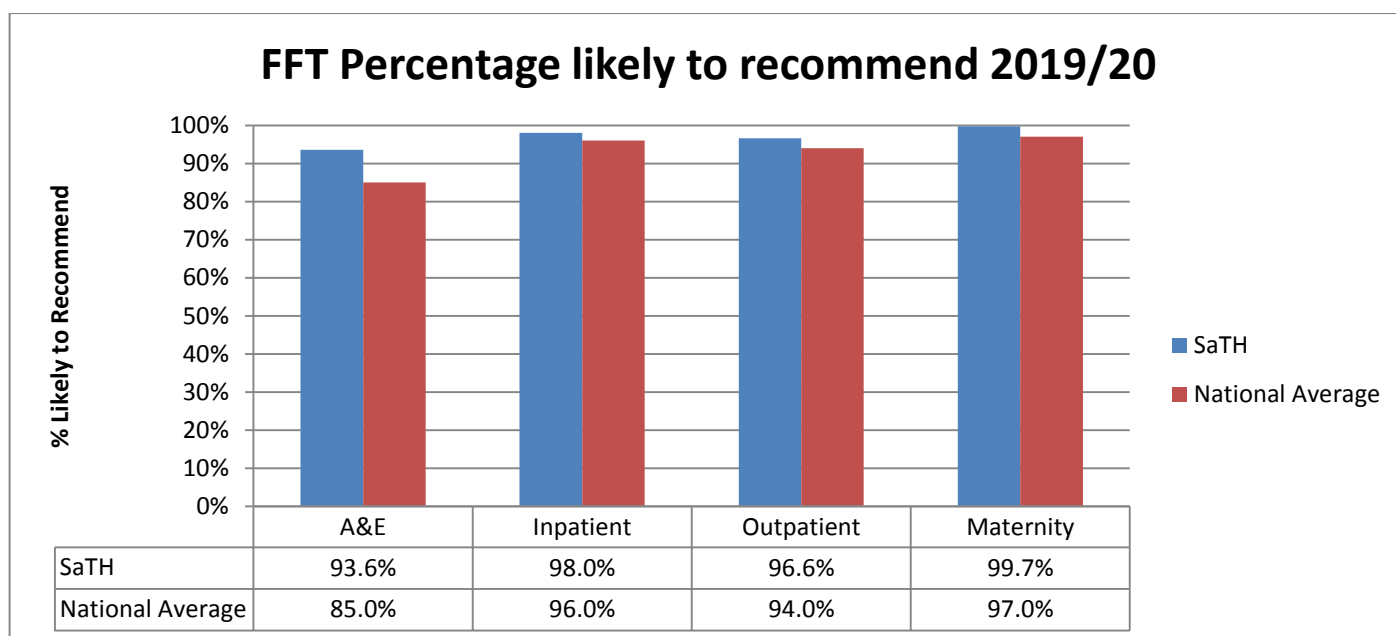
The Friends and Family Test (FFT) is a national survey which was introduced to provide an easy way for people accessing services to provide feedback. The feedback measures how satisfied the person was with their experience of the service. FFT scores are available for each ward and department, by Care Group and for the Trust which allows for comparison to be made both locally and on a national scale.

A national standardised question is asked 'How likely are you to recommend our ward (or department) to friends and family if they need similar care or treatment?'

The FFT cards include a section for free text and this feedback can be used by managers to initiate improvement and share how feedback is used on 'You Said, We Did' posters which are displayed in each ward and department.

A total of 43,094 Friends and Family Test cards were completed and returned during 2019/20. The response rate increased on the previous year by 1.4% for inpatient areas and by 16.8% in Maternity (birth only). Within A&E the response rate decreased in comparison to the previous year by 5.5%. The Trust performed higher than the national average for Maternity (birth only) responses however the inpatient and A&E response rate were both lower than the national average. The Trust presently use paper based forms and volunteers to collect FFT feedback and do not have a text messaging facility to support FFT collection. It has been demonstrated that Trusts which use digital feedback systems have a higher response rate, which should be considered when comparing to national data.

Of the cards completed, 97.1% of respondents said they would be extremely likely or likely to recommend the Trust's services to their family and friends. The Trust performed higher than the national average in all categories; Inpatient, Outpatient, A&E and Maternity (April 2019 – February 2020 available comparison data).



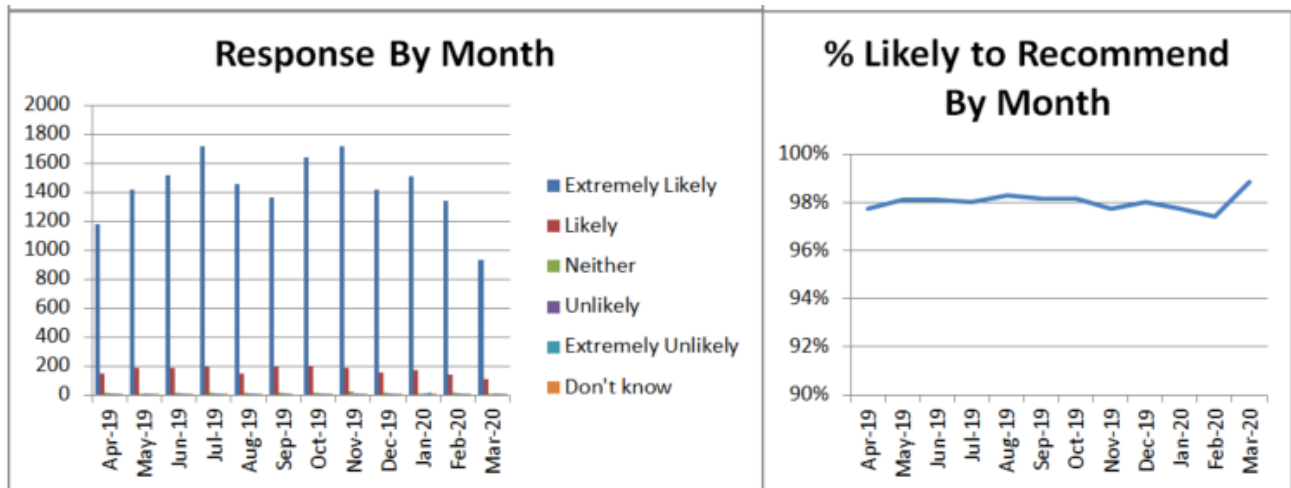
Inpatient FFT

Total Responses
19,605

Response Rate
21.2%

Likely to recommend
98.0%

The inpatient FFT response rate demonstrated an improvement on the previous year, however there was a slight decline of 0.3% inpatients recommending the service.



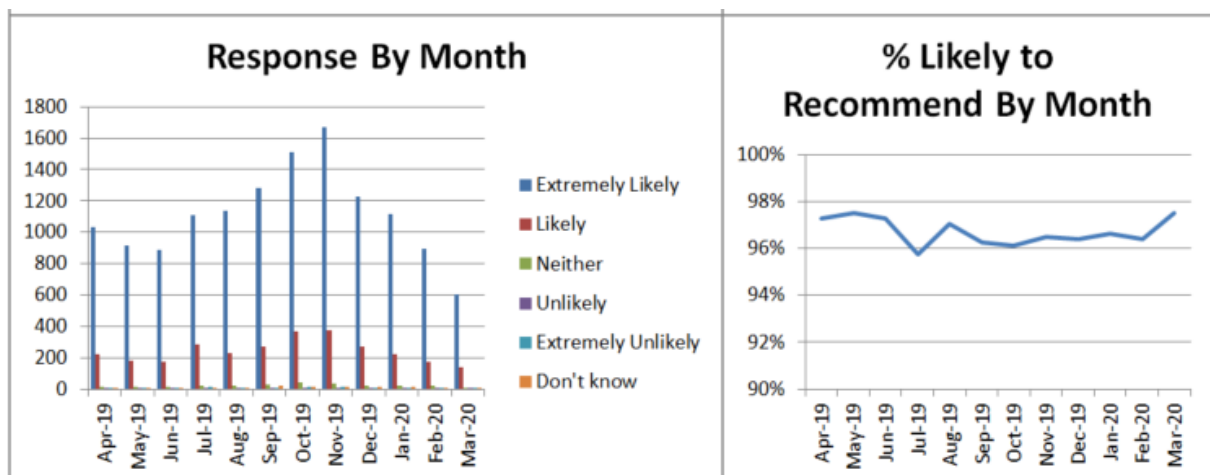
Outpatient FFT

Total Responses
16,851

Likely to recommend
96.6%

The outpatient FFT consistently exceeds a 96% recommendation score with 0.93% of people using the service feeding back that they would be unlikely / extremely unlikely to recommend the service to their family or friends. The proportion of patients recommending the service increased by 0.3% on the previous year.

Response rate is not measured within an outpatient setting however the number of responses received suggests that this feedback is reliable.



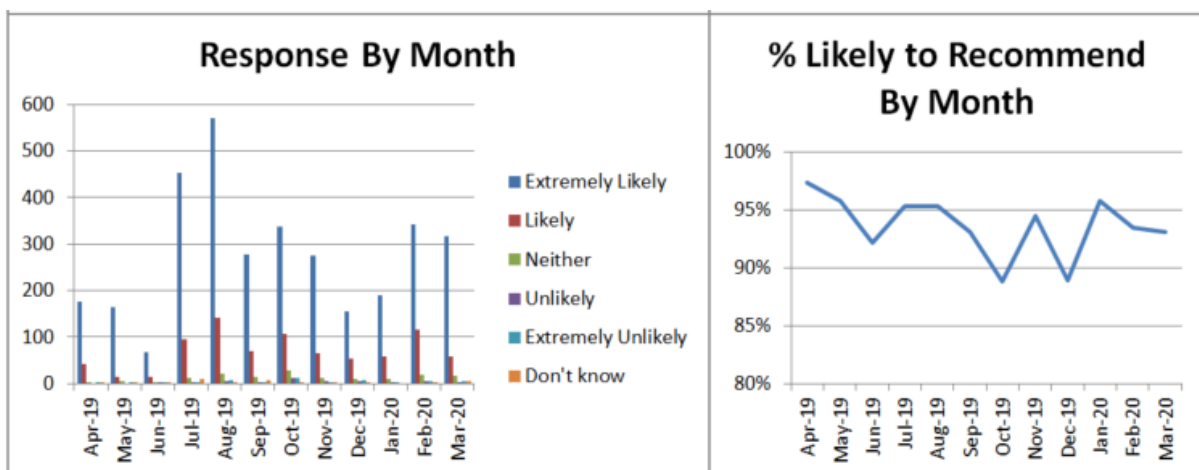
Accident and Emergency (A&E) FFT

Total Responses
4,440

Response Rate
4.9%

Likely to recommend
93.6%

Whilst the percentage of people who would recommend the service to family and friends is above the national average the response rate is lower which questions the reliability of this data. To increase the response rate a system to contact patients by telephone following a visit to A&E has been introduced.



Maternity FFT

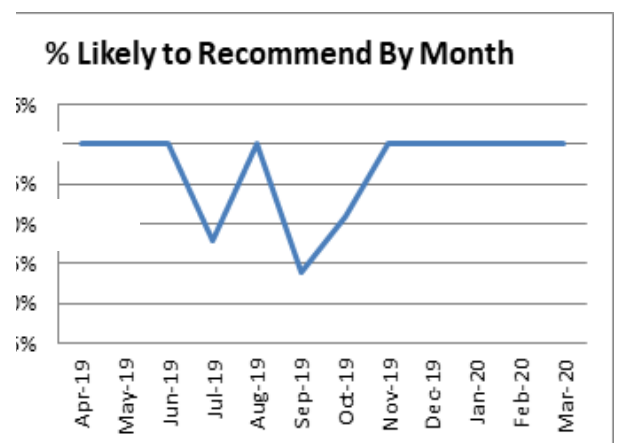
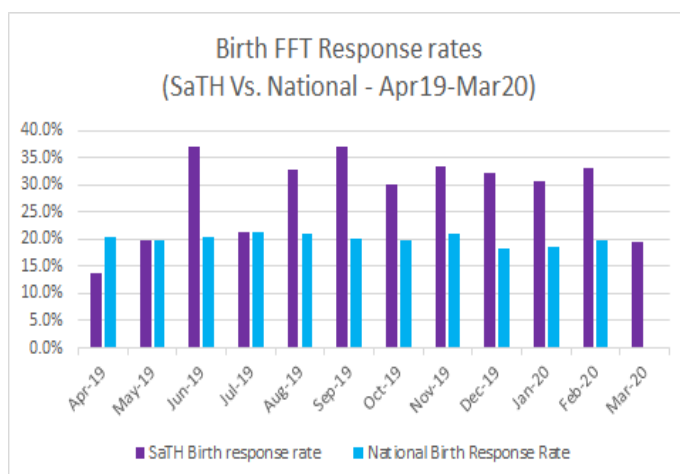
Total Responses
2,198

Response Rate
28.5%*

Likely to recommend
99.5%

* Birth only

With the exception of April 2019 the birth FFT response rate has matched or exceeded the national response rate each month. The percentage of patients who would recommend the service to their friends and family has exceeded the national average each month throughout 2019/20.



3. National Surveys

Adult Inpatient Survey 2018

The Adult Inpatient Survey is published annually and explores the experiences of patients who were discharged from hospital. The findings from the Adult Inpatient Survey for 2018 were published in June 2019.

A total of 660 inpatients from the Trust completed the adult inpatient survey, giving a response rate of 53.9% which is an increase on the previous year (52%) and compares favourably to the national response rate of 45%.

The results highlight that, overall, the Trust is performing about the same as most other Trusts that took part in the survey, in all aspects of care. This indicates that inpatients at the Royal Shrewsbury Hospital and Princess Royal Hospital had a similar patient experience to inpatients receiving care at other trusts within England and Wales.

When broken down by question, the results highlight that, in comparison to other acute hospitals, the Trust performed 'about the same' for 61 questions, and 'worse' than most trusts for two questions. This related to the questions:

- Did doctors talk in front of you as if you weren't there?
- Were you given enough privacy when discussing your condition or treatment?

Comparison with last year's survey showed a significantly lower response for 9 questions, however within the 2018 national inpatient survey there was a national decline of between 1 – 2% across a range of themes which suggests pressure on the system is impacting upon patient's experience of care on a national level.

The nine areas where the Trust declined in performance (namely; privacy, dignity and respect, patient involvement, and awareness of the complaints procedure) were targeted as areas for improvement within the Trust.

Privacy, dignity and respect:

- Support has been sought from local stakeholders, members of the community and patient groups to understand what is important to them when they come into hospital; and, how the Trust can meet these needs.
- The two questions in which the Trust scored less than the national average have been included in quality checks which are undertaken across the Trust by senior nurses.
- Continue to provide and build upon training to ensure staff act with the Trust values in mind and are equipped with the skills required to change attitudes and behavior.
- The Trust has increased the number of SWAN rooms to ensure the privacy of patients who are nearing the end of their life, and their relatives, is maintained.

Patient involvement:

- Increased the number of patient information leaflets available to facilitate shared decision making. Leaflets produced by the Trust are taken to the Readers Group to ensure they are easy-to-understand.
- Patient representatives have supported quality ward walks with the Matrons and Heads of Nursing.



Awareness of complaints procedure:

- Information leaflets explaining how to make a complaint are available in each ward and department.
- An easy read complaints patient information leaflet has been developed.
- The Complaints and Patient Advice Liaison Service (PALS) team have delivered presentations at a Trust stakeholder event and attended some patient group events to increase awareness.

Maternity Survey 2019

The annual Maternity Survey was published in January 2020 and explores the experiences of individuals who gave birth in hospital, a maternity unit or at home during February 2019. A total of 151 respondents completed the Maternity Survey, giving a response rate of 46.75% which compares favourably to the national response rate of 36.5%

The results indicate that the Trust is performing about the same as most other Trusts that took part in the survey.

Aspect of care	Patient response (2019)	2018	Change 18/19	Compared with other trusts
Labour and birth	8.9	8.4	=	About the same
Staff during labour and birth	8.9	8.8	=	About the same
Care in hospital after the birth	7.8	7.6	=	About the same

Note: = indicates that the 2019 score has no statistically significant change to the 2018 score.

When broken down by question, the results highlight that, in comparison to other hospitals, the Trust performed about the same as other trusts for 44 questions and better than most trusts for 4 questions. There were no questions where the Trust performed worse than the national average.

The areas where the Trust scored better than the national average were:

- On the day you left hospital, was your discharge delayed for any reason? (6.8)
- Did you feel that midwives and other health professionals gave you active support and encouragement about feeding your baby? (8.7)
- Were you given a choice about where your postnatal care would take place? (6.1)
- If, during evenings, nights or weekends, you needed support or advice about feeding your baby, were you able to get this? (8.4)



This suggests that women who give birth at the Trust are satisfied with the care and treatment received and have a patient experience which is equivalent to other acute hospitals in England and Wales.

Maternity Services have developed an action plan using the Patient Experience Framework tool, the action plan will be monitored by the Director of Midwifery and be reported to the Women & Children's Care Group Board.

National Cancer Patient Experience Survey 2018

The annual Cancer Patient Experience Survey was published in September 2019 and explores the experiences of individuals who received cancer care throughout 2018. A total of 877 patients from the Trust completed the Cancer Patient Experience Survey, giving a response rate of 71% which compares favorably being above the national response rate of 64%.

The Trust scored significantly higher than the national average in patients being told they could bring a family member or friend with them when they were first told they had cancer (84% compared with a national average of 78%). The Trust also scored highly on patients being told who they could contact if they had any concerns after they had been discharged. The Trust scored 96%, a significant increase on last year's result (93%) and above the national average (94%).

Other areas where the Trust scored highly were patients receiving all the information they needed about tests (94%); patients given the name of a Cancer Nurse Specialist (CNS) who would support them through their treatment (91%); patients having all the information they needed before any operation (95%); doctors having the right notes and other documentation with them (96%) and GPs being given enough information about a patient's condition and treatment (95%).

The survey also found that 85% of patients felt they were informed that they had cancer in a sensitive way (in line with the national average) and 89% of patients were always treated with respect and dignity by staff.

There were three areas where the Trust scored statistically below the national average, these were: patients found it easy to contact their CNS, patients had all the information they needed before radiotherapy treatment, and patients were given understandable information about whether radiotherapy was working. In two of these areas, the Trust scored 80% or more. Some actions which have been taken in response to this feedback are:

- Living With and Beyond Cancer sessions have been introduced in addition to online videos to empower individuals who have, or have had, cancer with the information needed to seek appropriate support and treatments.
- A Living With and Beyond Cancer information passport has been developed to support and signpost patients.
- Cancer Care Navigators have been introduced as a first point of contact for patients who would like to contact the CNS.
- Patients have access to Holistic Needs Assessments at the start and end of radiotherapy treatment.



Urgent Emergency Care Survey 2018

The Urgent Emergency Care Survey was published in October 2019 and explores the experiences of people who accessed urgent emergency care during October 2018 and March 2019. A total of 537 respondents completed the survey, giving a response rate of 43% which is higher than the national response rate of 30%.

The results highlight that, in comparison to other acute hospitals, the Trust performed about the same for all questions apart from one which performed worse than most trusts. The results indicate that the Trust is performing about the same as most other Trusts that took part in the survey with 65% of patients rating their overall experience as 8 out of 10 or higher.

The areas where the Trust scored highest were:

- While you were in A&E, did you feel threatened by other patients or visitors? (9.7)
- Did doctors or nurses talk to each other about you as if you weren't there? (9.2)
- Did a member of staff explain the results of the tests in a way you could understand? (9.0)
- Were you given enough privacy when being examined or treated? (8.9)

The question which scored lower than the national average was:

- If you did not get the results of the tests when you were in A&E, did a member of staff explain how you would receive them?

It is important to note that 80% of patients reported receiving their results before leaving A&E and patients reported being given the information in a way they could understand.

The Service is working on a number of patient experience initiatives within the Emergency Departments at each hospital and are exploring different ways of communicating information and improving patient experience in response to this feedback.

Children and Young People's Survey 2018

The National Children and Young People's Survey was published in November 2019 and explores the experiences of children and young people up to the age of 15 who were admitted to hospital as an inpatient, day case or received emergency care during November and December 2018. A total of 404 respondents completed the Children and Young People's Survey, giving a response rate of 33% which is higher than the national response rate of 25%.

The results highlight that, in comparison to other acute hospitals, the Trust performed about the same for all questions apart from one which performed slightly below the national average, this question was:

- When the hospital staff spoke with you, did you understand what they said?

More than 70% of questions scored 8 out of 10 or higher. There were 15 questions which scored at least 9 out of 10, the areas where the Trust scored highest were:

- Children staying on a specific children's ward for most of their stay (9.8) (0-8yrs)
- Staff explaining to children and young people before their operations / procedures what would be done (9.6) (8-15yrs)
- Before operations or procedures, staff answering questions from parents, children and young people in a way that they could understand (9.6) (0-15yrs)
- Hospital staff answering children and young peoples' questions (9.4) (8-15yrs)



4. Patient Stories

The Trust recognises the power of storytelling through enabling the listener to experience the emotion with the person sharing their story. When someone shares their story and describes their experience the audience can engage and connect with the image which is being described, enabling them to glimpse the emotions and feelings of the story teller at a given moment in time.

During 2019/20 a range of patient and staff stories have been shared to increase awareness and demonstrate learning as a result of patient feedback. A selection of the patient stories include:

- A number of patients involved in clinical trials providing feedback of being involved in research
- Feedback from a patients relative on their experience of communication and the organisational culture
- A patient described their recovery and involvement in the living well with and beyond cancer initiative
- Feedback from a patient being exposed to cigarette smoke whilst receiving postnatal care
- A range of staff described why being an LGBT+ champion is important to them, this was supported with findings from a recent Stonewall survey which identified inequalities and barriers LGBT+ people can face accessing healthcare
- Being responsive to what matters to a patient and the impact this can have upon their physical and emotional wellbeing

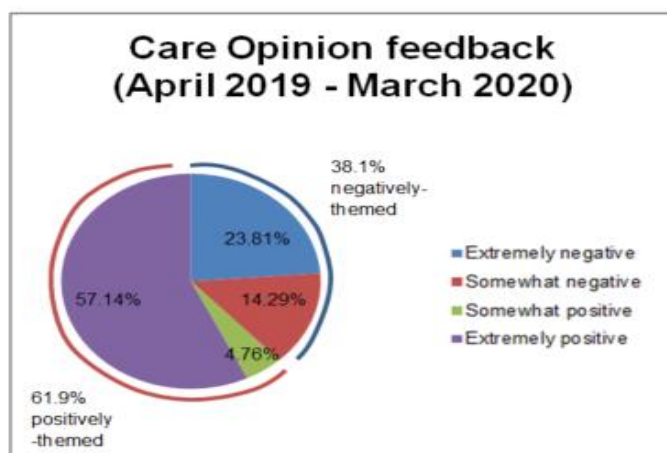
The patient stories have, and are continuing, to lead a number of improvements across the Trust.

5. Third Party Feedback

Feedback Sites

The NHS website and Care Opinion provide patients with an opportunity to provide feedback through an online platform. Feedback is anonymous which helps people to be honest when sharing their experience.

Over the last year 63 stories of experiences accessing services at the Trust have been posted. The feedback shared has fluctuated each month with more feedback published in June 2019 and the least in March 2020.



Analysis of the feedback showed the majority (61.9%) were positive. Of this figure, 57.14% were extremely positive; suggesting the majority of individuals had an extremely positive patient experience.

14.29% of published stories were somewhat negative and 23.81% were extremely negative.

The feedback has been broken down by theme to identify the reasons for such responses. Within the somewhat/extremely positive stories, staff attitude was the most frequently referenced theme. Whereas, within the somewhat/extremely negative stories, delays was the most recurrent theme.

Negative Themes	Times referenced (%)
Delays	35.9%
Staff attitude	15.4%
Communication	15.4%
Poor care	12.8%
Parking	7.7%
Cancellations	7.7%
Environment	2.6%
Staff shortages	2.6%

Positive Themes	Times referenced (%)
Staff attitude	54.7%
Care received	25.0%
Responsiveness (speed to act)	9.4%
Environment	4.7%
Communication	3.1%
Food	3.1%

A patient's perception of staff attitude and communication may be interlinked, for example if patients and carers are left feeling uninformed about treatment and care, they may be unlikely to rate the overall approach of the staff member.

Communication, and approach to patient care, is continually focused upon in staff coaching, training and leadership development. During the last year the Trust has held a range of development sessions including; Values-Based Conversations, Open and Honest Conversations, and Human Factors training, which focused on improving people's leadership and communication skills. It is recognised that all members of staff contribute to a patient's overall experience, therefore, sessions are routinely offered to all staff members within the Trust.

Where specific areas of the hospitals are referenced targeted-improvements can be made. Whilst some feedback may take longer to implement (such as reconfiguration of waiting areas) due to being addressed by the Hospital Transformation Programme, some feedback (such as decoration and cleanliness) can be immediately addressed. To monitor the implementation and maintenance of these improvements, the Patient Experience team are exploring ways to increase the number of feedback channels that are currently available to people accessing the Trust, to ensure as many people as possible can share their comments and ideas in a way that is accessible to them.

Themes, such as responsiveness and delays are to some degree contradictory, suggesting some areas may perform better than others, or performance in all areas varies on a day-to-day basis, due to pressures such as demand and capacity. Whilst it is difficult to control such extraneous factors, the Trust has introduced several initiatives to help prepare for demand, respond to delays and to speed up the overall hospital journey. These include, but are not limited to:

- Updating IT software in the Radiotherapy department to enable staff to remotely access documents, such as scans and treatment plans, meaning fewer delays to starting radiotherapy treatment.
- Introducing a Criteria-Led Discharge Policy to empower Registered Nurses and Allied Health Professionals to facilitate early decision-making in discharging patients. Designated dischargers will help to review and transfer patients who met a certain criterion, to speed up the overall discharge process.
- Introducing a Response Volunteer Scheme to support wards and departments experiencing delayed discharge or delayed transfer or care.
- The Trust is working to reconfigure the two hospital sites to improve efficiency by having a dedicated Planned Care site (PRH) and specialist Emergency Care site (RSH). Separation of planned and emergency care means patients will spend less time waiting to be seen and beds are protected for planned operations, reducing the chance of cancellation.
- The Trust is working to introduce an electronic patient record system to reduce delays in accessing paper medical records and minimise the need for patients to give the same information to different members of staff.

Healthwatch

Healthwatch is an organisation which champions local people's views on health and social care. Eight enter and view visits have been undertaken during 2019/20, four visits were undertaken by Healthwatch Shropshire and four visits by Healthwatch Telford and Wrekin. All of the reports provided some positive feedback, examples of this include: patients felt they had good care, staff having good relationships with patients, patients had confidence in staff and areas being clean and well organised.

In addition to the positive feedback, during the enter and view visits a number of opportunities for improvement were also identified, these included:

- A patient identified that communication had been poor when an elective operation was cancelled. The Trust has introduced a ring-fenced Orthopaedic ward to help reduce the need for cancellation of surgery. An Operational Manager has been appointed who works closely with the capacity team and theatres to manage the patient pathway and keep patients informed of any changes.
- Signage within an area could be misinterpreted, the signage was removed in response to the feedback.
- Support and signposting for temporary staff. In addition to the induction checklist used to support agency staff across the Trust, in response to the feedback the area visited developed a folder with useful information to support staff who do not usually work within the department.
- On two wards patients reported being disturbed by noisy dustbins. Soft close bins were ordered as replacements to reduce noise disturbance.
- Patients at the Royal Shrewsbury Hospital reported a poor choice of food being available, however at the Princess Royal Hospital patients commented on the good food choices. A pilot is planned at the Royal Shrewsbury Hospital to introduce a hostess service and replicate the service which is in place at the Princess Royal Hospital.



The trust has worked in partnership with Healthwatch Shropshire and Healthwatch Telford & Wrekin to promote focused research on Healthwatch hot topics and used feedback to improve the experience of the local community when accessing health care.

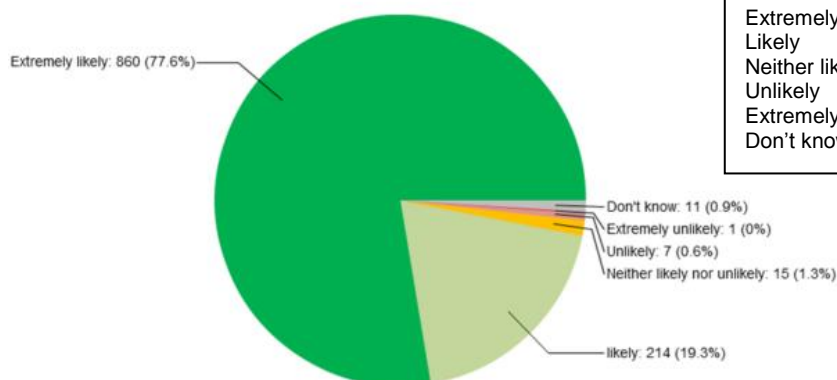
6. Real Time Experience

The Trust utilises an electronic survey and audit tool known as Real Time Experience (RaTE). The tool enables staff and volunteers to use mobile devices to collect data at the point of care. This information is displayed within the ward quality dashboard and triangulated with quality, safety and workforce data.

Information is collected by Ward Managers, Matron's and volunteers. Patient experience volunteers are instrumental in supporting the Trust obtain feedback from patients on their experience. Through listening to patients share their experience, real time feedback can be obtained to evidence and support informed improvement work.

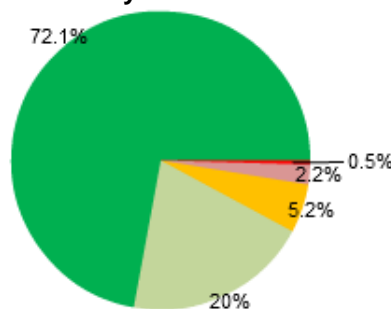
Unscheduled Care

How likely are you to recommend this ward to family and friends if they need similar care or treatment?



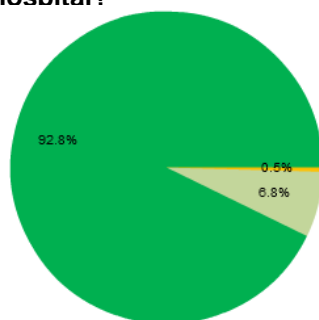
Total Responses
1108

Do you feel you have been involved in the decisions made about your care as much as you would like?



Yes, always	799
Yes, most of the time	222
Some of the time	58
Rarely	24
Never	5

Do you feel you have been treated with kindness, respect and dignity whilst in hospital?

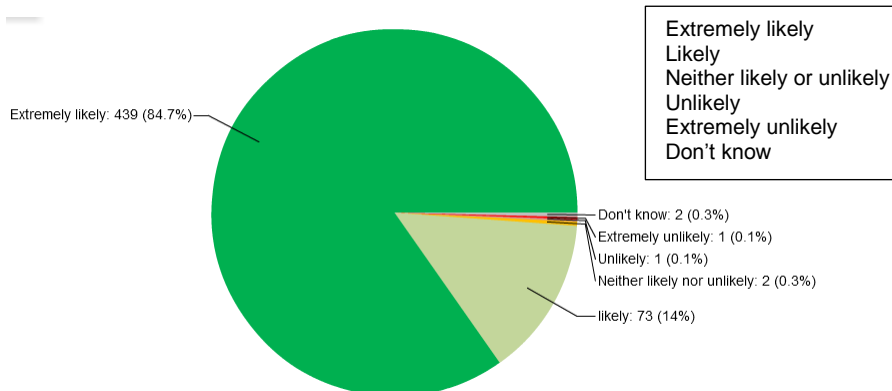


Yes, always	1028
Yes, most of the time	75
Some of the time	5
Rarely	0
Never	0

- ✓ A big thank you to all the staff for their help and kindness whilst on the ward.
- ✗ Ward (Acute Medical Unit RSH) could do with being painted.
- ✓ I feel staff do a fantastic job and I am unable to fault the care I have received on the ward.
- ✗ Try to get the staff to turn off alarms quicker help to get better night sleep. Could not ask for better care.
- ✗ The consultant didn't show much empathy and she was very matter of fact.
- ✓ Staff dedicated, very caring hospital; feel privileged to be cared for in PRH.

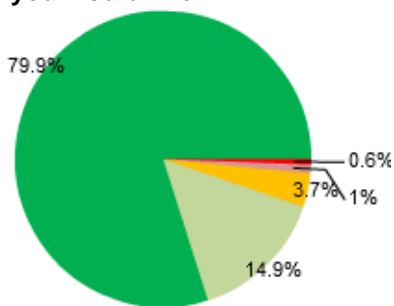
Scheduled Care

How likely are you to recommend this ward to friends and family members if they need similar care or treatment?

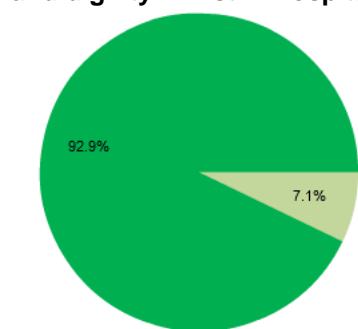


Total Responses
518

Do you feel you have been involved in the decisions made about your care as much as you would like?



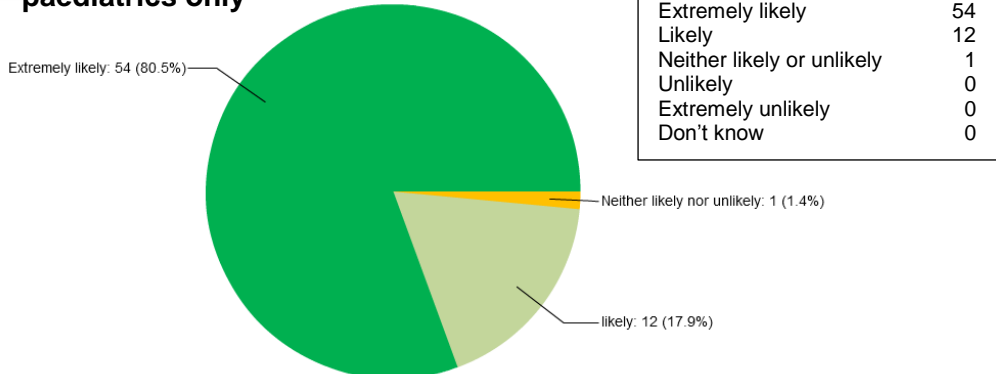
Do you feel you have been treated with kindness, respect and dignity whilst in hospital?



- ✓ Impressed with amount of care given because the ward is so busy.
- ✓ It's been a pleasure to be a patient on ward. Can't fault any member of staff no matter what grade or position.
- ✗ Enjoys meals but feels that there a lot of stews.
- ✗ Staff are fantastic helpful and they know what they are doing always approachable. The only downside is there aren't many doctors at the weekend having to wait until Monday to be discharged is frustrating.
- ✓ After being very scared and apprehensive about coming into hospital with this Covid - 19 I have been reassured by the staff and they are constantly checking to see if I'm ok which is very reassuring to me. I cannot thank staff enough for their time, care and effort towards me.
- ✓ What a lovely clean tidy and friendly ward SAU is. I feel like I have been treated with respect kindness and dignity whilst I've been in hospital and nothing has ever been too much trouble for any member of staff on this ward.

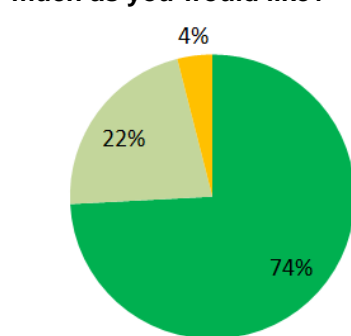
Women's and Children's

How likely are you to recommend this ward to friends and family members if they need similar care or treatment? *Gynaecology and paediatrics only

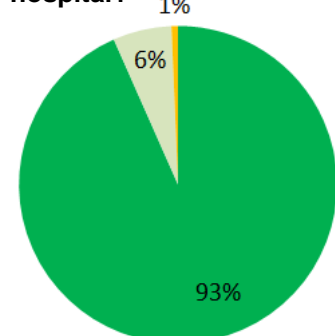


**Total Responses
151**

Do you feel you have been involved in the decisions made about your care as much as you would like?



Do you feel you have been treated with kindness, respect and dignity whilst in hospital?



- ✓ The ward staff have been brilliant at ensuring my needs are met and that I am comfortable and satisfied.
- ✗ I do not feel that the staff always understand my difficulty to mobilise. Feel under pressure to move quicker.
- ✓ I am here with my 13 year old daughter. I find the staff to be welcoming and warm. I have found the doctors to be honest and open regarding her diagnosis and the plan moving forward. I also like the fact that they don't just talk to me, as her parent, but give her the respect to explain everything directly to her in a way that she will understand.
- ✗ When there are babies on the ward give them their treatment in the treatment room, not in the bay when others are still sleeping.
- ✓ Care and attention given has been outstanding. We have been informed of all decisions made in regards to care and medication. All of the questions asked have been answered with both the finest attention and patience.

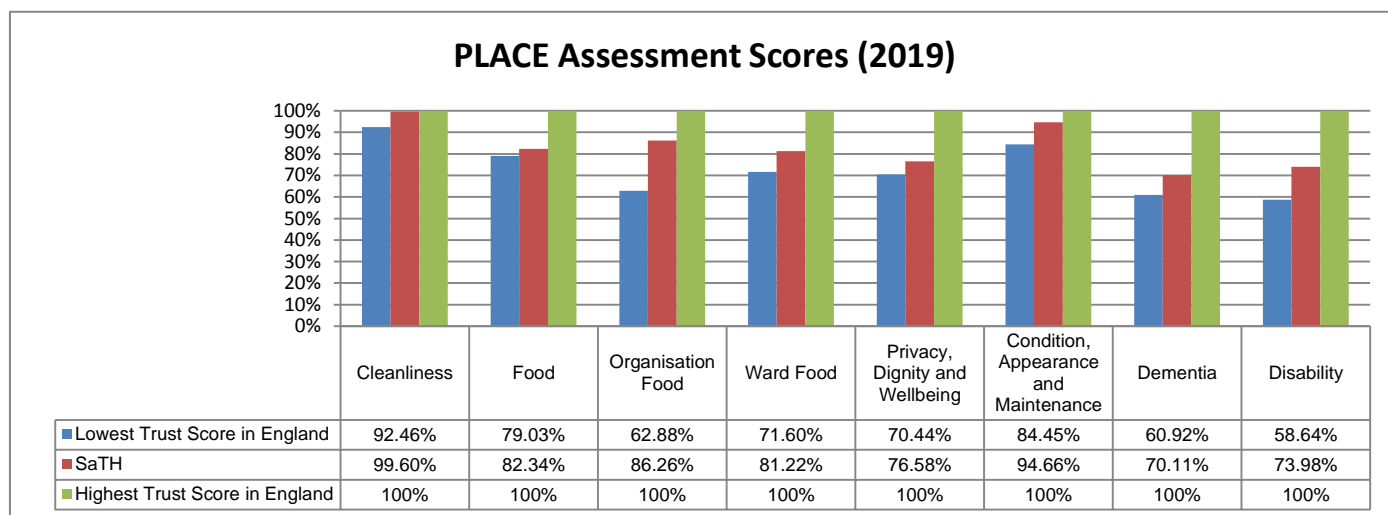
7. Patient Led Assessments of the Care Environment

Patient Lead Assessments of the Care Environment (PLACE) is a national system, introduced in 2013, which involves an assessment team made up of at least 50% patient assessors (members of the local community) and staff visiting areas within the Trust. The assessment team aim to explore how the environment supports the provision of clinical care, by focusing on the following categories; cleanliness, maintenance and condition, food provision, the extent to which the provision of care with privacy and dignity is supported, and whether the premises are equipped to meet the needs of people with dementia or disabilities.

PLACE provides an opportunity to identify areas of good practice and highlights where improvements may need to be made, to improve patient and carer experience. The patient voice is critical to ensuring the Trust delivers effective services in good care environments.

Throughout October 2019, 32 areas were assessed. 24 patient assessors, including an independent assessor, took part. Each assessment was supported by at least two members of staff, with one acting as Team Lead and one acting as a scribe. This allowed the patient assessors to share their thoughts without being constrained to a set template, which ensured each comment was reflected upon with equal importance.

PLACE Assessment scores compared to the lowest and highest Trust score in England



An action plan has been developed to address Trust wide areas for improvement and each action has been prioritised in partnership with patient representatives. Changes to the present food service are being piloted and a new menu has been introduced in response to feedback which was provided. Regular food tasting sessions involving patient representatives are being introduced to continue to build upon these improvements.

Patient assessors were recruited through the Patient and Carer Experience Panel and People's Academy graduates which provided a diverse group of assessors. Training was provided prior to the assessments and patient assessors chose the areas they wanted to visit.

The Trust received positive feedback on how the PLACE visits were conducted, both from local volunteers and the independent PLACE assessor.

"Today's PLACE visit was, in my opinion, a great success. Very productive and constructive."
(PLACE Patient Assessor)

"On the update on the PLACE assessment I find it reflected our visit which I personally enjoyed. The actions going forward I think are timely."
(PLACE Patient Assessor)

“Thank you and the staff for a well organised and presented PLACE assessment. As we discussed the benefit to the Observers is that they can bring experience but more importantly recognise good practice and performance. It was a delight to be involved with the PLACE annual review at Telford Princess Royal on the 21st of October 2019.

We will be pleased if you share our comments which are well earned. We hope that the staff enjoy the feedback and that the Board appreciate the work they do every day often under difficult circumstances particularly when the media are unkind.”

(Independent PLACE Assessor)



8. Complaints and Patient Advice and Liaison Service

Patient Advice and Liaison Service

The Patient Advice and Liaison Service (PALS) is a confidential service which aims to advise and support patients, their families and carers to negotiate solutions to enquiries or concerns which are identified. Over the last year, the PALS team have received 1951 contacts. The number of PALS enquiries fluctuated each month with more received in February 2020 (197 contacts) and the least in December 2019 (131 contacts).

The most frequent themes raised with the PALS team were:

- Appointments (38.03%) including concerns about cancelled appointments, delays in receiving appointments and waiting times to receive an appointment.
- Communication (19.99%) including receiving the results of scans and biopsies and lack of communication about care and care plans.
- Admission/discharge (11.11%) including concerns with discharge and the length of time it took to be admitted to a ward from A&E.

Topic of enquiry	Proportion of total enquiries
Appointment	38.03%
Communication	19.99%
Admission/Discharge	11.11%
Patient care	8.45%
Other	4.28%
Clinical treatment	3.85%
Values & Behaviours (staff)	3.52%
Waiting time	2.65%
Facilities	2.38%
Trust admin/policies/procedures including patient records	2.11%
Access to treatment or drugs	2.00%
Prescribing	0.81%
End of life care	0.38%
Privacy & Dignity	0.33%
Commissioning Decisions	0.11%

Complaints

The Trust endeavours to provide a good patient experience, however when this is not achieved complaints provide valuable feedback and learning which can help drive improvements.

During 2019/20 the Trust received 762 formal complaints which is an increase on the previous year, however this correlates with activity and represents a formal complaint being made by less than 1 (0.78) in every 1000 patients seen at the Trust.

A complaint can reference a number of different topics, each aspect is identified and key themes identified. Over the last year the most frequent themes which were identified in complaints were; communication (21.07%), clinical treatment (16.47%), values and behaviours of staff (11.5%) and patient care (11.37%). The top 4 themes remain consistent from the previous year.

Topic of complaint	Proportion of total complaints
Communication	21.07%
Clinical treatment	16.47%
Values & Behaviours (staff)	11.50%
Patient care	11.37%
Admission/Discharge	8.39%
Appointment	8.14%
Waiting time	7.33%
Trust admin/policies/procedures	3.36%
Facilities	3.17%
Privacy & Dignity	2.92%
Access to Treatment or drugs	1.49%
End of life care	1.18%
Staff numbers	0.87%
Prescribing	0.87%
Consent to treatment	0.75%
Other	0.75%
Commissioning decisions	0.19%
Dementia care	0.12%
Mortuary	0.06%

Staff were referenced within 712 complaints however this can often be linked to communication and experience due to the close association.

When staff are referenced within a complaint the staff group data demonstrates that complaints were made in relation to medical staff (49.86%), nursing staff (20.79%) and support or non-clinical staff (16.71%). This is reflective of the staff groups with more frequent patient contact.

The themes of complaints which reference staff are a direct reflection of the overall complaints themes.

One of the most significant functions of the complaints process is for the Trust to listen to the feedback, learn from the persons experience and make changes to improve the service. During 2019/20 a number of improvements have been made in response to feedback which has been received through the complaints process, some examples of this are:



9. Compliments

Compliments can be received through a variety of formats and as the majority are given directly to clinical areas there is presently no data which can accurately reflect the number of positive comments received by the Trust.

A sample of compliments which have been received are:

I have a severe phobia of needles and hospital but all the members of staff from the ambulance crew, A&E staff, AMU staff to the discharge unit staff, made my stay in hospital more bearable and easier. I had just turned 18 too so I was a 'newborn' adult. But they allowed my mum to stay with me throughout the night to help with my experience. Everyone was so kind and helpful. They went above and beyond to cater for my mum to make sure she was comfortable staying with me.

I was in A & E last night with my father, who has advanced dementia, following a fall. A healthcare assistant called *** assisted me with tending to his personal care. Whilst the department was busy, she found a quiet corner to take us, interacted with him in both verbally and in making him comfortable in a caring, compassionate way. Please pass on my thanks to her.

Nothing was too much trouble and as a first time parent I felt completely safe and had total faith in the expertise and knowledge of the midwives. The birthing room and the ward were excellent. Supportive, understanding, friendly and patient staff.

Our son *** attended Endoscopy this afternoon. We (his parents) accompanied him – he is an adult with Down's syndrome. We were impressed with the friendly and respectful way he was treated by the staff we met, especially the nurse *** who made him feel comfortable about what was understandably quite a stressful procedure for him. He was obviously pleased to listen to his requested Meatloaf music during the procedure! Our thanks to Dr *** and her team for making ***'s attendance a positive experience rather than a frightening one.

My dad was diagnosed with lung cancer last year. He has received excellent support and all those involved in the palming and treatment have been incredible. My dad has received an excellent service which can not be faulted and high praise is truly deserved to the SATH hospitals. From consultations, to diagnostic screening, to outpatient appointments, therapy and so much more. We feel very fortunate to receive such expert and professional clinical care. Having such excellent professionals around my dad has made dealing with the diagnosis a little bit easier to deal with. At a time when people seem to criticise the NHS, we can only say how proud we are to be receiving excellent care and treatment. My dad and family are always treated with the upmost respect and dignity. We truly are very grateful for Dr *** and his team and the Macmillan specialist nurses who we couldn't do without.



10. Patient Information

The Trust recognises the importance of providing clear patient information to support informed decision making. Patient information should be provided in a way the patient can comprehend to support them understanding their diagnosis and treatment options, enabling patients and carers to be informed in their care and improving their experience.

Patient information is reviewed every three years or more frequently if guidance changes. During 2019/20 a total of 131 patient information leaflets were reviewed by the Patient Information Panel.

All patient information leaflets can be translated into alternate languages if required and can also be produced in alternate formats at request.

The Trust Reader's Group consists of patient and carer representatives and members of the community who volunteer their time to read the draft patient information produced by the Trust. Members are sent between two or three patient information leaflets each every month and are asked to provide feedback. This is to ensure that they are clear and easy-to-understand from a patient-perspective, before they are published.

Easy read information is written in short sentences that avoid complex words or medical jargon. Sentences are supplemented with pictures to help explain the meaning of the sentence. Easy read information can be beneficial for people with learning disabilities, or other conditions which affect the way information is processed.

To support services developing patient information in an easy read format a standardised easy read template and guidance has been developed for staff to access via the intranet. This supports the development of easy read patient information leaflets to ensure that information is accessible.



To ensure that easy read literature meets the need of the community an Easy Reader's Group is being recruited to enable the same quality assurance procedures to be followed in the development of patient information.

Local service providers supporting people with learning disabilities have been contacted to advertise the initiative and to ask for volunteers.

11. Engagement

The Community Engagement team have attended 39 meetings and 24 events across Shropshire, Telford & Wrekin and Powys to provide Trust updates and ask for feedback from community members.

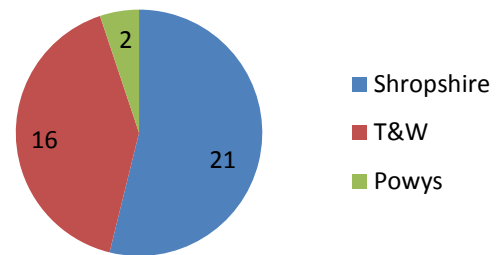
Attendance at events has included general events and meetings which are open to all members of the public, such as the Ironbridge Coracle Regatta and Coed-y-Dinas Garden Centre; in addition to meetings and events run by, or open to, protected characteristic groups, including Shropshire Deaf & Hard of Hearing Forum, Telford Polish Heritage Day and Fresh Equality Forum.

Attendance at a wide range of events enables the Trust to engage with a wide and diverse range of the community. This provides an opportunity to listen to the community and gain an understanding of barriers which may prevent individuals from having a positive patient experience, whilst accessing or receiving care.

The Community Engagement Team also hold quarterly meetings within the hospital, or local community. These provide an opportunity to engage with the public, share information on the hospital services, seek feedback and answer any queries or concerns.

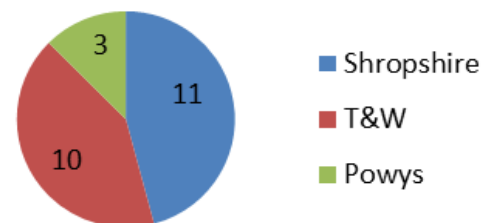
During the Autumn of 2019, the Patient Experience Team attended 10 community engagement meetings and events in collaboration with the Community Engagement Team, to ask what mattered most to individuals throughout their hospital journey. Members of the public were asked what was important to them before, during and after coming into hospital. The feedback taken from the sessions was then shared in focus groups to identify key themes and priorities, this will be used to inform future strategies and action plans.

Meetings attended over last year (2019 - 2020)



Meetings attended by the Community Engagement Team between 1st April 2019 and 31st March 2020

Events attended over last year (2019 - 2020)



Events attendee by the Community Engagement Team between the 1st April 2019 and 31st March 2020.



The People's Academy

The People's Academy and Young People's Academy provide an opportunity for members of the community to learn more about the NHS and how it works in Shropshire, Telford & Wrekin and Powys, through presentations, behind the scenes visits, demonstrations, interactive activities and question and answer sessions with a range of Trust staff.

Four People's Academies and five Young People's Academies have taken place over the last year, with a total of 150 graduates. The achievements of the Community Engagement Team were recognised when they received the national Engagement Champion award from Membership Engagement Services (MES) in May 2019.



The Community Engagement Team accepting their award from

Through working with Academy graduates, the Trust is able to engage meaningfully with members of the community, people accessing services, carers and stakeholders and provide greater transparency in how services are provided. Through the People's Academy the Trust aims to reduce barriers to accessing and receiving care and treatment, promoting a shared understanding and contributing to the overall improvement of quality of care and patient and carer experience.

Learning Disabilities Academy

The Learning Disabilities Academy was established in September 2019, to increase engagement and accessibility for people with a learning disability or autism.

A recognised barrier for people with a learning disability in accessing healthcare services is fear or lack of confidence. The Learning Disabilities Academy aims to ease anxiety by providing the opportunity to handle equipment commonly encountered within a clinical environment and taste-testing hospital food.



The Learning Disability Academy at the Shrewsbury and Telford Hospital NHS Trust

Two Learning Disabilities Academies have taken place within the last year, and both have included staff from the Patient Experience Team and Acute Liaison Team. Measures to improve the experience of people with learning disabilities accessing services within the Trust, such as the hospital passport and accessing support from the Acute Liaison Team have been promoted.

Feedback has been extremely positive and supports the teams in identifying steps which can be taken to continue to remove barriers and create a positive patient experience.

Public Membership

The Trust has over 10,000 public members who receive regular information and engagement. A quarterly newsletter is sent to all members to keep them up to date with what is going within the Trust, as well as keeping them informed of ways to get involved. A series of health lectures are held each year, which are organised by the Community Engagement Team, with speakers from clinical teams across the Trust, who will highlight their services or provide information on specific medical conditions.

12. Patient and Carer Experience Panel



The Patient and Carer Experience (PaCE) Panel, consists of 11 patient representatives, carers and members of the community who volunteer their time to work collaboratively with staff members. The chair of Maternity Voices is included to ensure that a patient voice for Maternity is represented. With a shared interest and understanding of areas such as; frail and complex, dementia, equality, diversity and inclusion, learning disabilities, hearing loss, vision loss, the carer's perspective and emergency care, the panel are able to provide a voice of their lived experiences.

PaCE is co-chaired by the Chief Nurse or Deputy Chief Nurse. The panel includes representation from each of the Care Groups together with Facilities, Estates, Engagement, PALS and Complaints, and the Dementia team, who give voice to experience on behalf of their clinical and non-clinical networks.

By working collaboratively with staff, the PaCE Panel can provide sustainable and patient-centred improvements within the Trust to facilitate a positive patient experience. Their role includes, but is not limited to: reviewing services within the Trust, in conjunction with staff and independently, inform, co-produce actions and monitor progress towards achieving these actions, and ensuring the patient perspective is rooted within all aspects of care and improvement projects.

Members of the PaCE Panel are also involved in a number of quality improvement initiatives and groups within the Trust, such as: the PLACE group and PLACE assessments, Transforming Care work-streams, Observe and Act, the Living with and Beyond Cancer programme board, Readers Group, quality ward walks, the Dementia steering group and hearing loop audits. Additionally, they have participated in values-based interviewing of potential new staff employed at the Trust as well as projects to improve patient and carer experience including the refurbishment of the Hamar Centre (a help and support centre on the Royal Shrewsbury Hospital site, which provides counselling and support services to patients with a cancer diagnosis).

13. Equality and Diversity

Acknowledging and valuing the diversity of each patient, carer and visitor is fundamental to ensuring a positive patient experience. Whilst health and social care providers have a legal duty to protect from discrimination, harassment and victimisation (Equality Act 2010), the Trust seeks to provide a person centered approach in the delivery of its services. Some examples of improvements which have been made to meet the needs of patients, according to the protected characteristic associated with that need are:

Age



- Since its inception, 99% of all patients aged over 75 have been assessed for frailty by the Frailty Intervention Team, to ensure support can be accessed if needed. However, no patients are excluded from accessing the frailty service, as frailty is not exclusively correlated with age.
- Children and young people are given an insight into SaTH and the services it provides, through initiatives such as the Young People's Academy and Harvey's Gang.

Sex



- 1 in 4 women, and 1 in 6 men, will be affected by domestic abuse during their lives. The Trust has began working in partnership with Shropshire Police to support and advise victims of domestic abuse when in our hospitals.
- The Safeguarding Team provide training on gender-based violence, including female genital mutilation (FGM).

Religion or Belief



- The Chaplaincy Team is supported by an on-call team who represent different denominations of faith.
- The Trust provides amenities to support patients, their family, friends and carers of any religion, belief or non-belief. This includes screens to support gender segregation, washing facilities, prayer rugs, signs indicating the Qibla, prayer cards and a pebble pool.
- The Chaplaincy Team work closely with the End of Life Care Team, to support the religious and spiritual needs of patients who are nearing the end of their life, or have already passed.

Sexual Orientation and Gender Reassignment



- In response to feedback the Trust introduced the NHS Rainbow badge initiative in October 2019. The badges were introduced to increase awareness and demonstrate the active cultural development of the Trust as a place that offers open, non-judgemental and inclusive care for all who identify as LGBT+.
- Founder of Telford LGBT+: *"I am so pleased to see this initiative from SaTH. Anything that helps the LGBT+ community in a clinical environment is very important as it can enable them to feel more comfortable in what can often feel like a daunting situation."*

Disability Status



- There has been an increased focus upon the need for reasonable adjustments to support a patient with a Learning Disability and training is provided to all staff on induction.
- Resources have been developed to increase staff awareness and provide access to tools which can be used to support patients who are d/Deaf.
- The Trust Assistance Dogs policy, has been updated in response to feedback.
- Potholes have been repaired after identifying the issues this could cause for wheelchair users through an Observe and Act observation with volunteers.

Race or Ethnicity



- Interpretation services are accessible to staff 24 hours a day to ensure that patients can understand their diagnosis, treatment options and to be involved in making choices about their care.
- To prevent fear of discrimination, and promote a positive patient experience, the Trust has been working to ensure the Trust imagery, materials and information is inclusive and representative of all racial and ethnic groups.

Marriage or Civil Partnership



- Staff in the Trust put values in to practice by going the extra mile to help a patient get married after her partner proposed while she was being cared for on ward in the hospital. In just over 48 hours, staff helped to organise a registrar to carry out the ceremony, decorated a side room and provided cake and prosecco for the couple to celebrate their wedding; while a Healthcare Assistant helped the bride with her make-up.
- The groom said: "The staff were brilliant and we can't thank them enough for making our day so special."

Pregnancy and Maternity



- Maternity Movement Bracelets have been introduced, bracelets are given to all expectant mums at 24 weeks of pregnancy who are under the care of the Trust. The bracelet has 14 beads with a Tiger Eye bead, said to release fear and anxiety.
- Deputy Head of Midwifery at SaTH, said: "By using the bracelet we hope that any changes to a baby's movements will be noticed at the earliest opportunity and encourage expectant mothers to contact their midwife if they have any concerns. The bracelet comes with instructions on how to use it and information on who to contact should any changes or reduced movement be experienced."
- Feedback from expectant mums have been overwhelmingly positive. Case studies can be found at: <https://www.sath.nhs.uk/news/maternity-movement-bracelet-launched-to-raise-awareness-of-baby-movements-during-pregnancy/>

14. Transforming Care Institute



In 2015, the Trust partnered with the Virginia Mason Institute, to acquire the resources and support needed to implement the Virginia Mason Production System. The system combines principles of the Toyota Production System and the Japanese philosophies of kaizen (meaning continuous improvement) to facilitate effective and long-term improvement; enhance quality and safety; and, contribute to the overall advancement of patient experience.

To embed the methodology within the Trust, the Transforming Care Team regularly hold events which empower staff to overcome obstacles which impact the efficiency and quality of care provided. Patient, carer and public representatives are also involved to provide the perspective of a service-user.

Case Study (December 2019)

- Rapid process improvement workshop: Improving the flow and experience of 16-17 year old patients who attend the Accident and Emergency Department (A&E) with Mental Health Conditions.

Issue Identified	Change ideas implemented
<ul style="list-style-type: none"> • Variation in the definition of an “adult” in Acute vs. Mental Health Trusts meant mental health triage forms were unavailable for 16-17 year olds. • Features of mental health conditions are not always obvious and may, therefore, not be included as part of the standard assessment form. • A focus on medical needs was often put before a mental health assessment. 	<p>A mental health triage tool was introduced, to be used alongside the physical health assessment tool.</p> <p>This helps to ensure staff have a clear understanding of the patient’s needs, and can make reasonable adjustments, where necessary.</p> <p>It also helps to decide the next course of action for patients who come to the A&E Department, speeding up the referral process and preventing unnecessary distress.</p>
<ul style="list-style-type: none"> • Variation in where patients wait to be seen. • Variation in the types of mental health conditions presenting and consequent requirements meant there was a lack of clarity around the patient pathway. • 24/7 support from Specialist Trusts is not currently available. 	<p>A step-by-step guide has been created to ensure all staff are fully aware of the correct pathway for 16 -17 year olds presenting in A&E with a mental health condition.</p> <p>This helps to provide consistency in responding to patients who have a mental health condition in A&E and reduces the chance of risk or harm.</p>

<ul style="list-style-type: none"> • There is a lack of knowledge regarding where to signpost patients for support. • Not enough knowledge of services for on-going support. • Sign posting to services can be complex. 	<p>Information has been collated and is available to support staff, information includes; the Mental Health Triage Tool and step-by-step guide, contact details of external organisations who can provide support and practical advice to individuals who have a mental health condition.</p>
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“My job is to challenge the staff and always provide the patient voice. It is the best way of working and I am really pleased to be asked to work with the team this week and going forwards. Over the past few months there has been a much greater focus on mental health and the way patients, and staff, are cared for. We still have work to do but I am confident that mental health is now a key priority for SaTH. In the meantime I will keep delivering the patient voice.”

Lynda Jones, patient representative and independent mental health advocate, who was involved in the improvement work.

Further processes which have been improved over the last year using the methodology include:

- **Pre-operative assessment for patients on the 2 week cancer pathway.** This work provided the opportunity to remove delays for the patient and improve the quality of the pre-operative assessment for patients awaiting cancer treatment.
- **Planning for Radiographer and equipment allocation in theatres.** This work aimed to address the demand on limited radiology resources in Theatres, by looking at the planning of the Theatres list.
- **List lockdown.** This work aimed to observe the period from lockdown of an operating list to the completion of the theatre brief, to minimise the number of cancelled operations, or delays.



“I got involved with Transforming Care about three years ago, working with the Ophthalmology Department and the KPO team as a patient representative. That was very enjoyable. I didn’t expect it to be - I thought it was going to be a lot of hot air but, actually, it turned out to be incredibly practical and you could see improvement happening immediately and I loved the way that that was done.”

Julie Southcombe, patient representative and member of the PaCE Panel at SaTH, has been involved in numerous improvement workstreams.

15. Volunteers

The Shrewsbury and Telford Hospital NHS Trust have over 700 volunteers, in addition to over 300 volunteers who support the League of Friends at the Royal Shrewsbury Hospital and Friends of PRH at the Princess Royal Hospital. The volunteers work alongside staff in wards, clinical areas, outpatients and administrative departments to provide non-clinical support such as; ward helpers, mealtime buddies, meet and greeters, hostesses, dementia support volunteers, end of life care volunteers and laboratory volunteers.

The Community Engagement Team support the recruitment and training of volunteers through several schemes organised by the Trust, including the Young Volunteer Scheme, 18 years and over, Staff Volunteers and Corporate volunteering days.

Support from volunteers has been shown to reduce isolation, anxiety and loneliness amongst patients and improve their experience whilst in hospital. Volunteers provide a crucial role being a friendly face in what can be a distressing time.



Response Volunteers

Leaving hospital can be complex particularly if equipment, carers and medication are needed to support recovery. Whilst the Trust aims to ensure discharge is as quick and efficient as possible, a large proportion of feedback received concerns discharge and the issues surrounding it. Following a successful grant application from NHS England the Community Engagement Team recently introduced a Response Volunteer Scheme.

Response Volunteers support wards and departments experiencing delayed discharge or transfer of care, by completing tasks that can help speed up the discharge process. These may include:

- Collecting medication from Pharmacy
- Transporting patients between wards or departments
- Supporting patients who are anxious or may need additional support
- Accompanying patients to the Discharge Lounge and providing companionship.

While the impact of the Response Volunteer Scheme has not yet been analysed, due to the recency of its introduction, it is clear that the work these volunteers do will benefit both staff and patients.



16. Voluntary Sector

Over the last year, SaTH has worked with a number of organisations from within the Voluntary Sector, to develop and improve services. The organisations have provided an independent and focused perspective to make positive changes within the hospitals for the individuals and communities they work to support.

Safe Ageing No Discrimination



SAND is a not-for-profit organisation which campaigns for the rights of older and old LGBT+ people accessing health and social care.

To promote awareness of the health inequalities LGBT+ people may face when accessing healthcare, two workshops were delivered by SAND in the Royal Shrewsbury and Princess Royal Hospitals, during LGBT+ History Month (February 2020). The workshops aimed to increase staff awareness through:

- Discussing personal experiences reported by the LGBT+ community
- Exploring the use of vocabulary and terminology
- Knowing where to signpost for support
- Understanding what it means to be a workplace champion.



Attendees of the workshops included representatives from each of the care groups, including staff from the Dementia, Safeguarding and Fertility teams, Screening and Cancer Services, Stroke, Paediatric, Frail and Complex, Oncology and Haematology wards, Radiology, Research, Recruitment, Clinical Education departments, and the hospital Chaplaincy Team.

Feedback from attendees was extremely positive and demonstrated that the workshops had directly increased staff knowledge and awareness of LGBT+ health inequalities, as well as highlighted ways to improve the patient and carer experience of individuals who are LGBT+. An example of feedback received from attendees is:

What have you learnt?

- The meaning of specific terminology and how making assumptions can cause issues.
- More understanding through the sharing of personal experiences.
- Other people don't have the same needs as me and need bespoke care.
- The importance of the rainbow badge.
- Every individual has different needs and wishes. WE as an organisation should try our best to cater to their individuals needs/wishes.
- It's ok to say 'I don't understand' and 'can you tell me more'. It is ok to ask you about what the best thing we can do to help is.
- Body language/facial expression - tells a story. Always be kind and non-judgmental.
- We perhaps don't provide enough information or signposting for our patients and their families.

What will you do differently?

- Give patients the opportunity to share what matters to them.
- Review 'Gender Recognition Act' training.
- Consider how discussions can be carried out differently.
- Offer to find help together.
- Ask who is important in your life and their relationships, rather than assume husband/wife.
- I will make time to listen to people.
- As well as asking what matters to you, ask who matters to you.
- Amend our application forms and new starter forms. There are no options to select how you would want to be addressed, even though we operate equal opportunities.
- Create an environment where people feel comfortable to be themselves.

Signal



Signal offers practical help and support to an estimated 100,000 people and their families across Shropshire and Telford & Wrekin, living with hearing loss.

From the start of 2020, Signal and SaTH have worked together to audit the Hearing Loop Systems at both hospital sites. As part of the audit, each clinic, ward and department within the Royal Shrewsbury and Princess Royal hospitals, have, or will be, evaluated in terms of the current equipment, signage and knowledge to support patients, carers and visitors who are deaf or hard of hearing.

By working with Signal and volunteers who are deaf or hard of hearing, the Trust can ensure services remain accessible to hearing-aid users; and, empowers staff by increasing awareness and ensuring they can cater to the needs of service-users.



Sarah Thomas, Project Co-ordinator at Signal, who is also a member of the Trust Patient and Carer Experience Panel.

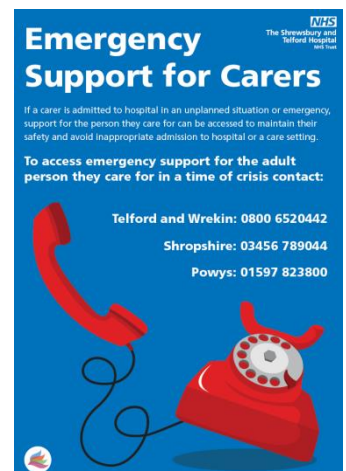
“Out of the places we have tested to date, 85% did not have a working hearing loop. We are working with the Lead for Patient Experience to rectify this and look at key areas where a hearing loop will be best placed such as Bereavement and PALS. We are also looking at where we can target training on how hearing loop systems work. This includes a Deaf Awareness Session sometime in the near future.”



Shropshire's and Telford & Wrekin's Carers Partnership Board work to promote engagement with carers through projects, service-evaluations and reports. They are made up of current, and former, carers and representatives from organisations who seek to support carers to ensure services met the needs of carers and the people they care for.

Over the last year, the Patient Experience team have introduced and updated numerous resources to improve the experience of carers who enter our hospitals. Both the Shropshire and Telford & Wrekin Carers Partnership Boards have been involved in the development and appraisal of these resources.

- A **Family, Friends and Carers leaflet** has been introduced. It details information that carers may find useful when the person they care for is in hospital and signposting to support.
- An **easy read version** of the Family, Friends and Carers leaflet has also been developed to support carers who may require information in this format.
- **Carers webpages** have been published on the Trust website to provide information on the facilities which are available to support carers in the hospital and signposting to local carers
- **Emergency support for carers** posters have been developed and displayed in admission areas where carers may be admitted to hospital. This will help to raise awareness amongst staff in the importance of identifying if the patient is a carer at the point of admission and accessing emergency support for the adult person they care for.
- The **Trust Carer's Policy** has been updated to include further information on carers of people with learning disabilities. In addition to this, new information has been included on:
 - Carers of people within the Armed Forces
 - LGBT+ Carers
 - Identification of carers
 - Consent to share information



17. Next Steps

The Trust recognises that to create a patient centered organisation there needs to be meaningful engagement and involvement with patients, carers, the community and stakeholders. The importance of obtaining feedback using a range of methods is critical and can provide information which can be used to influence changes and improve services.

The Trust seeks to listen and work with our patients and families to make improvements. When changes are made as a result of feedback it is important that this is communicated, the Trust does this in a number of ways:

- Direct feedback to the patient
- All Wards and Departments display 'You Said, We Did' posters
- Trust newsletters
- Care Group Meetings
- Quality Account
- Annual reports
- Trust website
- Press releases
- Social media

The Trust aims to provide patients and their carers with the best possible experience whilst accessing services within the hospital. There are a range of positive improvements which have been introduced over the last year (Appendix 1), however it is recognised that there is still work to do and the Trust is on a journey of improvement.








The Trust will continue to respond to concerns and complaints, ensuring that people feel listened to and that the organisation is responsive to the feedback and opportunities for learning which they provide. Patient demographic data is collected for each complaint which will enable feedback to be analysed to ensure that there are no groups of patients reporting a worse experience of care when accessing services or treatment within the Trust.







Over the next year the Trust will continue to make further improvements which include:

- Exploring new ways in which feedback can be obtained and provide patients and carers with greater opportunities to share their experience of accessing services.
- Increase the number of patient experience volunteers within the Trust to provide greater support to patients.
- Implement the revised Family and Friends Test (FFT) which includes collecting demographic data to provide a valuable resource of the experience patients report when accessing services within the Trust.
- Share actions which are taken in response to feedback more widely to ensure that the community are aware that their voice is listened to and acted upon.
- Provide an increased focus upon identifying and supporting carers within the Trust.
- Work with the Care Groups to increase the profile of patient experience.

The Trust aims to provide patients, their family, friends and carers accessing services with compassionate, dignified and respectful care. The Trust recognises that to achieve this partnership working with patients and the public to build an effective and inclusive service is crucial.

Patient Experience 2019/20

2019	
<p style="text-align: center;">April</p>  	<p style="text-align: center;">Experience of Care Week</p> <p>To celebrate, we:</p> <ul style="list-style-type: none"> Updated the patient experience pages published on the Trust website to become more user-friendly, and promoting the ways community members can get involved. Made a film to highlight the important role each individual member of staff plays and how they each impact upon a patient's experience. <p>Reviewed pledges made in 2018 to improve patient experience and the impact they had made throughout the year.</p>
<p style="text-align: center;">May</p> 	<p style="text-align: center;">Patient Leaders</p> <p>Leadership Workshops, delivered by the West Midlands Leadership Academy, were held within the Trust. The workshop aimed to equip community members with the confidence to share their stories and to work in partnership with the Trust, by enhancing communication and presentation skills.</p>
<p style="text-align: center;">June</p> 	<p style="text-align: center;">Learning Disabilities Week</p> <p>Staff, patients and carers were invited to attend an information-sharing event as part of Learning Disabilities Week. The event was held in partnership with the Joint Training Local Authority, Shropshire Community Trust and supported by members of the Patient and Carer Experience (PaCE) Panel. The event was held to raise awareness through listening to a person's story and highlighting the importance of the 'Hospital Passport' and 'one page profile' - both of which give hospital staff important information about individual patients and reasonable adjustments required to support them.</p>
<p style="text-align: center;">July</p> 	<p style="text-align: center;">#hellomynameis Yellow Badges</p> <p>Yellow name badges, incorporating the #hellomynameis logo, were introduced for staff. Having a coloured background to text increases contrast which can support patients with both cognitive and visual impairments when reading information. The #hellomynameis campaign was founded by Dr Kate Granger to encourage and remind staff about the importance of introductions in healthcare settings.</p>
<p style="text-align: center;">August</p> 	<p style="text-align: center;">'What Matters To Me' Bed Boards</p> <p>Boards which are placed above each bed were introduced, to encourage staff to ask patients what matters to them, when they are in hospital. No detailed patient information is displayed on the boards, but what is provided is important and accessible at a glance to improve the delivery of safe and kind care.</p>
<p style="text-align: center;">September</p> 	<p style="text-align: center;">Focus Groups</p> <p>The Patient Experience Team met with the local community and protected characteristic groups to find out what was important to individuals during their hospital journey. Five overarching themes were found to be significant and will be addressed in the 2020 Patient Experience Strategy.</p>

<p>October</p> 	<p>PLACE Assessments</p> <p>Patient-Led Assessments of the Care Environment (PLACE) took place throughout October 2019. 24 volunteers and an independent assessor took part, providing a range of valuable feedback. An action plan has since been formulated and improvements will be made as a result of volunteer's feedback.</p>
<p>November</p> 	<p>Craftivism!</p> <p>The Patient Experience team partnered with service-users and staff at Derwen College to promote the use of reasonable adjustments in hospitals, through Craftivism. A Learning Disability intranet page was also developed for staff to access, detailing the ways in which reasonable adjustments can be made to support patients and carers.</p>
<p>December</p> 	<p>Observe and Act</p> <p>An Observe and Act assessment of Theatres (Princess Royal Hospital) took place with volunteer. A lot of good practice was observed and the group identified a number of improvements which could be made to make the area more accessible to patients and carers.</p>
2020	
<p>January</p> 	<p>Equality, Diversity & Inclusivity Stakeholder Event</p> <p>Staff from across the Trust presented information about the services provided to over 100 attendees which included a wide range of; patients, carers, members of the community, local voluntary organisations and community groups, as well as Trust staff, local commissioners, Healthwatch, Health and Social Care partners. Each presentation was followed by group discussions on what is being doing well and what improvements could be made to further meet people's needs. Feedback was used to establish objectives which our stakeholders identify as being important to them in accessing healthcare.</p>
<p>February</p> 	<p>LGBT+ Awareness Workshops</p> <p>The Patient Experience team worked in conjunction with SAND (Safe Ageing, No Discrimination) and members of the local community to deliver LGBT+ Awareness Workshops to celebrate LGBT+ History Month. The workshops helped to identify, and explore ways of addressing the health inequalities patients can face as a member of the LGBT+ community.</p>
<p>March</p> 	<p>Hearing Loop Testing</p> <p>The Trust partnered with Signal, and local volunteers, to test the hearing loops throughout the hospitals. As part of the audit each clinic, ward and department within the Royal Shrewsbury and Princess Royal hospitals have, or will be, evaluated to ensure that areas are accessible.</p>

This report can be made available in a range of languages and formats such as large print, audio, BSL film and Braille through contacting the Patient Experience Team:

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