

Patient Experience & Inclusion Strategy

2022-2025

Commitment 1: Inclusion and engagement

Commitment 2:
Care
and
treatment
accessible to all

Commitment 3: Capture, listen, learn

All of our patient information can be translated into a variety of different languages. Please speak to a member of staff or email patientexperienceteam@sthk.nhs.uk who can arrange for information to be translated for you.

Wszystkie nasze informacje dla pacjentów są tłumaczone na różne języki. Aby otrzymać przetłumaczone informacje, prosimy porozmawiać z członkiem personelu lub wysłać wiadomość e-mail na adres: patientexperienceteam@sthk.nhs.uk

كل المعلومات للمريض لدينا مترجمة إلى مجموعة متنوعة من اللغات المختلفة. يرجى التحدث إلى أحد الموظفين أو إرسال بريد إلكتروني إلى patientexperienceteam@sthk.nhs.uk الذي يمكنه ترجمة المعلومات لك.

Toate informațiile destinate pacienților sunt traduse într-o varietate de limbi diferite. Vă rugăm să luați legătura cu un membru al personalului sau să ne trimiteți un e-mail la patientexperienceteam@sthk.nhs.uk dacă doriți ca aceste informații să fie traduse în limba dvs

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Introduction

At the St Helens and Knowsley Teaching Hospitals NHS Trust, we know that patient experience is more than just meeting our patient's physical needs, but also about treating each patient as an individual with dignity, compassion and respect. Effective engagement enhances services and care, improves health outcomes, strengthens public accountability and supports the Trust's reputation.

We do not want to just meet expectations, we want to exceed them. This means we are committed to working in partnership with our staff, patients, carers and stakeholders to improve the quality of care that we provide and we commit to actively seek, listen and act on feedback received from our patients, staff, and other key stakeholder groups and involve them in the design and delivery of our services.

The purpose of the Patient Experience & Inclusion Strategy 2022-2025 is to set out the Trusts commitment to improving patient experience by meaningfully engaging with our patients, key stakeholders and local communities to remove any barriers to access; by building on our current engagement activities, and ensuring people from all our local communities are included and able to help shape our services and build upon the successes of the Patient Experience Strategy 2019-2022.

The Patient Experience Council (PEC) will monitor progress and performance against this strategy and provide assurance to the Quality Committee (QC).

The Trust acknowledges that patient experience is fundamental to quality healthcare and that a positive experience leads to better outcomes for patients, as well as improved morale for staff. The three commitments and associated objectives laid out in this strategy will support a continuous cycle of engagement throughout every step of the patient journey and embodies the Trust 5 Star patient care and Trust values. The Trust expects that all staff will embrace this strategy and demonstrate the key principles through the care and service that is delivered, whilst demonstrating trust values in all that we do. By creating a culture of continuous improvement that strives to deliver excellent, quality, patient driven services we are able to achieve our ambition.

We developed our strategy in partnership with our patients, key stakeholders, local communities and our staff.





Looking back at what we have achieved 2019-2022 **Improvement** Improvement in **Patient** in positive responses in communication by representation at allocating Patient meetings inpatient survey Experience phones to adult inpatient Regained areas veteran awareness Launch of accreditation the new regional carers passport - created Continued Patient **Participation** in collaboration engagement with Group with LUFT initiated with Healthwatch new TOR Increase in the number of volunteers Developed new Winner of the C&M Redesigned patient experience recruited the patient website pages sharing Best Practice experience award for the Carer Passport poster, following pages the launch of the updated Carers Passport Maintained **PLACE** scores Increase in referrals of patients with learning disabilities admitted to Trust Safeguarding Nurse Patient **Specialist** Improved access experience to interpreters dashboard Launch of by introducing created for PenPALS virtual inpatient areas service interpreting Every experience Family support Attained survey NAVAJO implemented | developed accreditation during first lockdown Patient Experience and Inclusion Strategy – Implementation Plan 2022-2025 Page 4 of 17



Objective 1 - Engage with communities who experience the greatest health inequalities to seek to understand their needs.

Objective 2 - Work in collaboration with other NHS and private sector organisations to ensure consistent equality, diversity and inclusion practice across the region.

Objective 3 - Work with all our local communities to understand their needs.

Objective 4 – Improve and expand upon current Trust engagement ensuring that all our activities are inclusive to all who want to access them.

How we will demonstrate our achievement – Commitment 1 inclusion and engagement

Objective	Evidence
Objective 1 – Engage with communities who experience the greatest health inequalities to seek to understand their needs.	Evidence of engagement with members of protected community groups, feeding back findings to relevant committees and services to help address the inequalities.
	Evidence of completion of the Health Equity Assessment Tool (HEAT) following feedback/issues identified during engagement activities. Evidence that this feedback is used to improve services and reduce inequalities.
	Evidence that feedback given from engagement activities/ HEAT health equity assessment to be shared with relevant services.
Objective 2 – Work in collaboration with other NHS and private sector organisations to ensure consistent equality, diversity and inclusion practice across the region.	Best practice equality, diversity and inclusion guidance developed by the collaborative is included in Trust policies and Standard Operating Procedure (SOPs).
	Relevant gaps/inequalities highlighted by the collaborative are included in the Trusts Equality Objectives following Equality Delivery System (EDS2/3) assessments.
	Continue to work in collaboration with other Trusts on the EDS2. Relevant gaps/inequalities highlighted by the collaborative are included in the Trusts Equality Objectives following EDS2 assessments.
	Work together with other trusts across Cheshire & Merseyside to develop a shared approach to the new EDS3 once implemented.
Objective 3 – Work with all our local communities to understand their needs.	Evidence of implementation of the 'what matters to me' engagement with members of protected groups, including inclusion health groups and those groups whose first language is not English.
	Feedback from engagement with patients and service users who may have a learning disability, autism or acquired brain injury is used to improve services.
	Specific 'getting to know me' information will be incorporated into the new electronic activities of daily living form.
	Feedback from annual programme of engagement with carers groups is used to improve services and access to services for carers including children who are carers.

Objective	Evidence
Objective 4 – Improve and expand upon current Trust engagement ensuring that all our activities are inclusive to all who want to access them.	Evidence of the annual programme of Trust patient engagement groups and events.
	The Trust Patient Participation Group (PPG) membership has grown and is broadly representative of our local communities and evidence of active participation.
	The Trust's Patient Experience and Dignity Champions Group (PEDCG) include members from every area of the Trust.



Objective 1 – Gather feedback from patients from protected groups and inclusion health groups to identify any barriers to accessing services.

Objective 2 – Build on the implementation of the Accessible Information Standard and further develop patient information to ensure it is clear, age appropriate and accessible.

Objective 3 – Every patient requiring interpretation support will be identified and the relevant face to face interpreter booked in advance of their appointment or, virtual appointment booked.

How we will demonstrate our achievement - Commitment 2 Care and treatment accessible to all

Objective	Evidence
Objective 1 – Gather feedback from patients from protected groups and inclusion health groups to identify any barriers to accessing services.	Engage with the relevant groups to identify any barriers they may face when accessing Trust services.
	The complaints service and Patient Advice and Liaison Service (PALS) are accessible to all patients/relatives with monitoring methods in place to ensure that the complaints and concerns relating to a patients protected characteristic can be identified. Identify any issues raised regarding access to services due to a patient having one or more protected characteristics.
Objective 2 – Build on the implementation of the Accessible Information Standard and further develop patient information to ensure it clear, age appropriate and accessible.	Develop more 'accessible' leaflets as standard i.e. more easy read and British Sign Language (BSL) signed leaflets for 'core' Trust and service information.
Objective 3 – Every patient requiring interpretation support will be identified and the relevant face to face interpreter booked in advance of their appointment or, virtual appointment booked.	An increase in the number of patients whose language requirements are recorded on patient records (Careflow).
	GPs provide information to the Trust when a patient's first language is not English and they require the use of an interpreter.
	Reduction in the number of concerns raised by St Helens Deafness Resource Centre (DRC) regarding patients whose communication needs are not met.



Objective 1 – Develop the Trust patient story programme.

Objective 2 – Develop new and improve on existing systems for capturing feedback.

Objective 3 – Utilise systems to triangulate themes and trends.

Objective 4 – Use feedback received to improve and celebrate services.

Objective 5 – Increase awareness of the patient experience and inclusion agenda.

How we will demonstrate our achievement – Commitment 3 Capture, listen, learn

Objective	Evidence
Objective 1 – Develop the Trust patient story programme.	Develop a library of digital stories that are accessible electronically and ensure shared learning throughout the Trust.
	Ensure there is a robust process for areas to share stories with the Patient Experience & Inclusion team.
Objective 2 – Develop new and improve on existing systems for capturing feedback.	Further development of the patient experience dashboard.
	Expand digital feedback mechanisms within the Trust.
	PALS satisfaction survey to inform, develop and demonstrate an effective PALS service.
Objective 3 – Utilise systems to triangulate themes and trends.	To ensure the data and themes from feedback are being actioned by relevant leads.
	Data and themes to be shared at ward governance meetings.
	Revamp of the ward patient experience boards and incorporate auditing boards into Tenable.
	Redesign/improve the Trust 5 a day programme.
	Develop patient experience volunteer role.
	Develop a carers satisfaction survey.
	"Hello my name is" campaign being applied in clinical areas.
	Capture actions and lessons learned from PALS informal concerns.
Objective 4 – Use	Maintain those above target and improved Friends and Family Test (FFT) recommended care rates for any areas below target.
	Review the process of You Said We Did (YSWD) posters across the Trust.
feedback received to	Prompt response to comments posted on NHS website.
improve and celebrate services.	Capture the voice of the child – continue to develop innovative ways to obtain feedback from children following care and treatment in the Trust.
	Work to maintain the Trust Patient- Led Assessment of the Care Environment (PLACE) scores.
	Continue to respond to local Healthwatch concerns in a timely manner and maintain good relationships with local Healthwatch groups.

Objective	Evidence
Objective 5 – Increase awareness	Engagement with Care Group leads regarding patient experience agenda.
of the patient experience and inclusion agenda.	Patient experience and inclusion agenda to be developed and shared Trust wide.

Developing our strategy

This strategy is aimed at STHK staff and volunteers, patients and the public, local service providers, commissioners and the voluntary sector. The development of this strategy was supported by a number of individuals and organisations from within STHK, across St Helens, Knowsley and Halton.



Glossary of terms

Accessible – able to be reached or entered

Accessible Information Standard (AIS) – a law which aims to make sure people with a disability or sensory loss are given information they can understand, and the communication support they need

Agenda – a list of things that someone wants to do

Autism – a lifelong developmental disability which affects how people communicate and interact with the world

Acquired brain injury (ABI) – refers to any type of brain damage that occurs after birth

Barrier – obstacle that prevents movement or access

British Sign Language (BSL) – form of sign language developed in the UK. A visual means of communicating using gestures, facial expression and body language

Careflow – interoperable electronic patient record (EPR) platform

Clinical Commissioning Group(s) (CCG) – commission most of the hospital and community NHS services in the local areas for which they are responsible

Champion – a person who vigorously supports or defends a person or cause

Collaborative – Two or more people or groups working together

Commitment – an agreement or pledge to do something in the future

Communities – a group of people that have a particular characteristic in common

Core – central part of something.

Dashboard – a visual display of all of your data. Its primary intention is to provide information at-a-glance

Data – facts and statistics collected together for reference or analysis

Database – a structured set of data held in a computer, especially one that is accessible in various ways

Datix – the Trust's electronic incident and concerns electronic reporting system

Digital - Electronic technology

Diversity – is about taking account of the differences between people and groups of people, and placing a positive value on those differences

Effectiveness – the degree to which something is successful in producing a desired result; success

Equality – is about ensuring everybody has an equal opportunity, and is not treated differently or discriminated against because of their characteristics

Equality Delivery System (EDS) 2/3 assessments – a tool kit that can help NHS organisations improve the services they provide for their patients. EDS3 is the refreshed version of EDS2

Equality Impact Assessment (EIA) – a tool to help ensure that services, policies, practices and decisions are fair, meet the needs of their staff and patients and that they are not inadvertently discriminating against any protected group

Electronic Patient Record (EPR) – a method of storing medical records and notes electronically

Evidence – the available body of facts or information indicating whether a belief or proposition is true or valid

Feedback – the transmission of evaluative or corrective information about an action, event, or process to the original or controlling source

Friends and Family Test (FFT) – created to help service providers and commissioners understand whether patients are happy with the service provided, or where

improvements are needed. It's a quick and anonymous way to give your views after receiving NHS care or treatment

Healthwatch – an independent body, they have the power to make sure NHS leaders and other decision makers listen to your feedback and improve standards of care

Health Equity Assessment Tool (HEAT) – to help organisations to identify practical action to address health inequalities and consequently improve health outcomes

Health inequalities – are the unjust and avoidable differences in people's health across the population and between specific population groups

Health outcomes – defined as those events occurring as a result of an intervention

Implementation plan – outlines the steps you should take when accomplishing a shared goal or objective

Inequality – is an unfair, not equal, state

Inclusion – the action or state of including or of being included within a group or structure

Integrated Care Board (ICB) – a statutory body with responsibility for NHS functions and budgets. Replacing CCGs

Integrated Care Partnership (ICP) – a statutory committee to services such as education and health bringing together all system partners to produce a health and care strategy

Standard Operating Procedure (SOP) – t

Integrated Care Systems (ICSs) – are geographically based partnerships that bring together providers and commissioners of NHS services with local authorities and other local partners to plan, co-ordinate and commission health and care services

Interpreter – a person who interprets, especially one who translates speech orally or into sign language

Learning Disability – includes the presence of a significantly reduced ability to understand new or complex

information, to learn new skills, with a reduced ability to cope independently (impaired social functioning)

Objective – a thing aimed at or sought; a goal

Patient Advice & Liaison Service (PALS) – a service dedicated to listening and responding to concerns raised by patients, relatives and carers and giving advice about the complaints process.

Patient engagement – the facilitation and strengthening of the role of those using services as co-producers of health, and health care policy and practice

Patient Experience – is what the process of receiving care feels like for the patient, their family and carers. It is a key element of quality, alongside providing clinical excellence and safer care

Partnership – two or more people as partners working together toward shared goals.

Patient- Led Assessment of the Care Environment (PLACE) – a yearly inspection of the non-clinical aspects of healthcare settings, undertaken by teams made up of staff and members of the public (known as patient assessors)

Protected Characteristic - in the Equality Act 2010, nine characteristics were identified as 'protected characteristics'. These are the characteristics where evidence shows there is still significant discrimination in employment, provision of goods and services and access to services such as education and health

Standard Operating Procedure (SOP) – the list of steps in a process to ensure the process is completed in the same way every time it is performed

Stakeholder – a person with an interest or is affected by something, an employees, customer, supplier or investor

Strategy – a plan of action designed to achieve a longterm or overall aim

Survey – is a method of gathering information using relevant questions

Tendable – a method of internal inspection/ audit used at the Trust

Theme – an underlying message, subject or idea

Trend – a general direction in which something is developing or changing

Triangulate - To link with other things to create a more indepth picture of a problem/ subject

Virtual - Not physically in the same space as someone or something but made possible by software/ computers

Voice of the Child – looking at how we should interact with children and young people to ensure that their views and opinions are always taken into account when it comes to responding to, supporting and delivering services that affect them and their families

You Said We Did (YSWD) – a poster that displays feedback and the Trust's action in response to it

5 a Day programme – a face to face conversation with patients using a set of satisfaction questions

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