

## Public Trust Board Meeting – 29<sup>th</sup> June 2021

### Patient and Carer Experience and Involvement (PCEI) Quarterly Report (including Complaints) Quarter 4, 2020/21

#### Purpose of the report

- To provide an overview and update of the various aspects of the Patient Experience and Involvement teams work.
- To provide an overview and update on the complaints activity for quarter 4.
- To provide assurance to the Quality forum.

#### Analysis of the issue

The Patient Experience and Involvement Report aims to present a rounded picture of patient experience and, as such, provides information on all aspects of experience, good and less positive. Where poor experience is reported, actions are then taken to ensure improvements are made and featured in future reports.

The reports present a wide range of information from different sources. Including the following:

- 🗨️ Frequent Feedback – comments, enquiries and concerns
- 🗨️ NHS Choices Feedback
- 🗨️ Friends and Family Test (FFT)
- 🗨️ Complaints
- 🗨️ Compliments
- 🗨️ Patient Surveys
- 🗨️ Patient Engagement and Involvement

It is understood that each method of feedback has its strengths and weaknesses. Using all methods of information available enables the Trust to better understand the patient's experience of the services offered and delivered, and is beneficial to help prioritise where to focus efforts on action planning.

### **Complaints and Patient Advice and Liaison Service [PALS]**

#### **Overview**

In quarter 4, the Trust formally registered 51 complaints, which is a reduction compared to the previous quarter. 7 complainants got back in touch with the Trust unhappy with their response which is an increase compared to 5 in the previous quarter and 9 in the same period in 2019-20.

## Complaints Activity Data – January 2021 – March 2021

Key Performance Indicator	Q4	Q2
<b>% of complaints acknowledged within three working days</b>	94%	84%
<b>% of complaints responded to within the date agreed with the complainant</b>	58%	50%
<b>Number of complaints upheld or partly upheld in quarter</b>	7	22
<b>Number of reopened complaints</b>	7	5
<b>Number of complaints formally investigated by the PHSO</b>	0	2
<b>Number of complaints upheld or partly upheld by the PHSO</b>	0	1

The Complaints Team continued to offer support to complainants with their concerns about care and treatment and our staff to ensure robust investigations were undertaken and comprehensive and empathetic responses were provided in a timely manner. The Complaints Team continued to have discussions with anyone who wished to raise a concern early on, where the issues permitted, to understand if the matter could be resolved swiftly through informal means.

In recognition to the continued pressures from the pandemic on services, the Trust made another carefully considered decision to temporarily alter the timeframe to respond to complaints. The Trust moved from 25 working days to 45 working days or a date agreed with the complainant. The Trust also implemented a process to support staff and our complainants when looking into the issues has taken longer than anticipated and more time is required to provide a response.

As part of our commitment for continuous development, the Complaints Team have devised an improvement plan which is committed to a number of improvements for 2021/22. These are reducing the amount of time taken to investigate complaints, improving the quality of our complaint investigations and responses and to use feedback to learn and make continuous improvements. The Complaints Team also hope to revise the Complaints Review Group incorporating recommendations from the Cumberledge report.

The PALS and Complaints team continue to work collaboratively to provide an offer to resolve new complaints through the informal route of a concern. This has resulted in a number of complaints being managed and investigated as a concern in the agreement of the complainant and providing a quicker response to the issues raised.

In the quarter 9 complaints were dealt with as informal concerns.

The number of PALS contacts received in Q4 were 166, this is a reduction on the numbers received in Q3 (227), however the number of concerns, comments and enquiries received is in line with the number received in Q3 (153).

The three key themes for concerns and complaints received in the quarter were in relation to Communications (39); Access to services (40) and Patient Care (29).

The highest number of concerns and complaints received was within Adult Mental Health Directorate at 89. The main service area where concerns were received within this directorate related to Community Mental Health Services, focused on, ADHD Service (9) and Community Mental Health Teams (56) this was consistent with the figures see in Q3, there was also an increase in Q4 in the number of concerns raised in relation to inpatient wards (19) and the Central Access Point (13).

Community Health Services Directorate received 32 concerns which is a significant drop compared to Q3 (57). The main service where concerns were raised within this directorate related to Community District Nursing Services (16) which is a reduction from Q3 (27).

For Families, Children, Young People and Learning Disabilities the total number of concerns received was 38, again down from Q3 (43). 12 concerns related to CAMHS Services, both community (10) and inpatient (2), the remaining concerns came from a range of services but with no more than 3 concerns in total for any one service.

7 concerns were received were in relation to Quality and Professional Practice (6) and Strategy and Business Development (1) with the corporate functions of the Trust.

During the quarter 178 compliments were logged by services onto the Customer Service Platform, as with concerns and complaints this is a reduction in the number reported in Quarter 3. Of those reported 130 related to Community Health Services, 33 from Families, Children and Young People's and Learning Disability Services and 7 from Mental Health Services and 5 for corporate services.

#### Activity data – January 2021 to March 2021

	PALS concerns	Complaints	Compliments
<b>Number</b>	166	51	178
<b>Top 3 Themes</b>	<ul style="list-style-type: none"> <li>• Communications</li> <li>• Access to Services</li> <li>• Patient Care</li> </ul>	<ul style="list-style-type: none"> <li>• Patient Care</li> <li>• Communications</li> <li>• Appointments</li> </ul>	<ul style="list-style-type: none"> <li>• Staff Attitude</li> <li>• Communication</li> <li>• Care &amp; Treatment</li> </ul>

#### Good news story

Following the receipt of a concern in relation to a mental health service inpatient stay at our Bradgate Unit site, a digital story was undertaken with the PALS Team and the service user involved. The story shared some of the poor experiences of the patient whilst staying on the Unit as well as what was good. With the consent of the patient the story was shared with the staff involved in the care provided during the stay and in response to this a number of improvements have been identified and actioned by the staff in direct response to the feedback provided. You can view the story [here](#)

#### Keys areas of concern

Risks	Mitigations
Current membership and chairmanship of Complaints Review Group not providing the oversight and assurance required	<ul style="list-style-type: none"> <li>• Review the terms of reference of the group</li> <li>• Consider recommendations from both Cumberledge and Ockenden Review in respect of complaints oversight</li> <li>• Discussions with Heads of Nursing to ensure correct representation</li> </ul>

## Assurance

- The Complaints and PALS work reports into Quality Forum, Quality Assurance Committee and Trust board for assurance.

## Friends and Family Test

### Overview

Full roll out of the Friends and Family Test (FFT) SMS/Texting programme commenced on 19 April 2021 following a data cleanse by our information team. This means that the majority of community services across the Trust will now commence their FFT collection through this approach. The response rate for Q4 was 10% which is an increase of 8% on the average of between 1% and 2.5% compared at this stage in 2019/20. The recommendation rate for the quarter was of 87.61%.

In the meantime collection continues with inpatients and promotional posters have been created for all inpatient and community areas and have been distributed.

In January 2021 a Covid 19 vaccination centre was set up at the Peepul Centre to offer members of the public an opportunity to have their vaccination. In order to understand the experience of those having their vaccine we developed a specific FFT survey which was available to those who wished to provide feedback. This was captured through iPads managed by volunteers and posters with a QR code on so that the survey could be accessed online.

A breakdown the data for quarter 4 is available in the appendix.

An FFT annual programme has been developed with focus on particular areas in each quarter.

### Implementation of the new FFT system across the organisation

Measures:

- 40% of all community-based services implementing the new FFT system by end of Q1
- 100% of all inpatient services implementing the new FFT system by end of Q1
- 60% of all community-based services implementing the new FFT system by end of Q2
- 100% of all community-based services implementing the new FFT system by end of Q3

### Using feed collected through FFT for service and quality improvement

- Q1 all services implementing FFT Capture the experience of patients, carers and staff, using all available and appropriate tools. Measure - number of FFT feedback by service
- Q2 all services implementing FFT Analyse and understand the experience by identifying the 'touch-points' of a service and gaining knowledge on what people feel as they experience our services and when they feel it. Measure – thematic report on the trends of feedback received by service
- Q3 Improve the experience by ensuring the feedback, both positive and negative, is heard and understood by the relevant clinical and managerial teams. Receiving, analysing and presenting feedback and through our Quality Improvement approach involving patients, carers and staff in developing the solutions to improving patient and carer experience. Measure – report detailing a range of improvement projects being implemented on the back of the themes identified in Q2
- Q4 Spread and Adopt best practice across the Trust by sharing and showcasing where feedback has led to improvement and support staff and services to 'steal with pride' the

improvements made. Measure – Case studies of improvement projects and evidence of how the improvement has improved patient experience against agreed benchmark identified in Q3.

### **Good news story**

Feedback from the vaccination centre at the Peepul Centre through the FFT survey has been overwhelmingly positive. 931 responses were received during the Quarter with a positive response rate score of 99%. Along with feedback captured by the Peepul Centre's Twitter account feedback posters were developed for the centre and shared with staff who reported that hearing and seeing the positive feedback provided made them feel valued and appreciated.

### **Key Areas of concern**

With the commencement of the SMS/Text and individual voice mail collection for FFT commenced on 19 April 2021 and the ongoing collection of feedback via our inpatient iPads, there are currently no key areas of concern for FFT.

### **Assurance**

- The FFT Work reports into the Patient and Carer Experience Group, Quality Forum, Quality Assurance Committee and Trust board for assurance.

## **Patient and Carer Involvement**

### **Overview**

Following its launch earlier in the year the engagement planning toolkit is working well and being used to support new projects that come through the QI process. This includes the matching up of patients and carers with projects based on skills, interest and lived experience. All QI projects that come through this route are managed via the Life QI system, to which there are now over 30 projects with service user involvement, ranging from them providing feedback and insight, to working with the project teams more collaboratively.

Three Patient and Carer Leadership Programmes have been secured for 2021-22, two are based on the Introduction to Patient Leadership programme delivered this year, and the third, Leading Together Programme is aimed at leaders working within LPT, who come from two different perspectives and positions; patients and professionals.

Priorities have been set for both the annual Quality Account and Quality Schedule. Both focus on complaints and FFT improvement as in previous years, with the addition of focusing on the improvements made on the back of patient feedback and how patients and carers are involved in designing and delivering improvements across the Trust.

Priorities for the patient involvement work programme for 2021-22 have been set, including:

- Increasing the members of our Patient and Carer Involvement Network through working with community forums and groups to promote opportunities for involvement
- Further growth of our Experts by Experience, through the development of role descriptions and opportunities for providing paid contracts
- Enhancing the training and development offer for our Involvement Network including the Patient and Carer Leadership Programmes and developing roles for Experts by Experience to

deliver this training

- Roll out of involvement cafes based on the Recovery Café model
- Introduction of Walk and Talk involvement session in line with the lessening of Covid 19 restrictions
- Launch of Involvement in a box, forming part of the Quality Improvement offer, supporting staff to think about patient and carer involvement in their improvement projects, this is being co-delivered with one of our Experts by Experience
- Establishing a Community of Practice for staff who are interested in involvement, building on the network of Patient Experience and Involvement Champions
- Implementing Always Events in response to patient experience feedback collected through FFT
- Celebrating and Recognising involvement through events and rewards
- Formal launch of the Patient Involvement Framework

### **Involvement in Research and Development**

Work is also progressing with the Research and Development Team to resurrect their EPIC network of patients and carers who are involved in research projects, and a steering group has been formed including previous research partners (service users and carers).

### **Involvement in Adult Mental Health**

Following the success of the relaunch of the virtual recovery cafes in October the team Stepped Up recovery Café to offer a 9 week programme during the second lock down period. This programme will be focusing on the 5 elements of CHIME, and the 5 ways to wellbeing. A café will take place every other week and will focus on conversations around CHIME followed by introduction to the 5 ways to wellbeing, including various taster activities people to try, including mindfulness, chair based exercise, crafts etc.

A group of service users are working with our mental health colleagues as part of a Personal Safety Planning working group. The group is currently looking at preferences for materials which have been produced nationally to take forward to adapt and co-create LPT personal safety plans along with information leaflets/a letter of hope. The group meet on a monthly basis with some individuals working with the lead for the work on a one to one basis due to the sensitive nature of the topic.

The service user/carer group that expressed a wish to get more involved with the Mental Health Central Access point have now formed a working group and are meeting with staff from the service on a monthly basis. The group are learning more about the service, looking at the pathway to the service and the volume and type of calls being received. The working group intend to develop the way we collect feedback from those accessing the service and how we make improvements from this. In the mean time they have worked with the service to create branding to advertise the service.

Within Mental Health Services for Older People the virtual carers forum at the Bennion Centre is continuing to run during the pandemic. Work to replicate this at the Evington Centre is more challenging, due to the patient cohort mainly, coming into the wards from Care Homes, so there is less family/carer interaction with the ward. There has been a group established for grown-up children who have parents on our wards. This group has been well received by those who attend and addresses a gap in support for those family members who are not direct carers but who have family members in our services.

## **Involvement in Community Health Services**

The Tissue Viability Team are working with the Involvement Team to gather feedback from service users and carers around pressure ulcer prevention and co-developing resources to support awareness and prevention. To date over 30 service users and carers have responded to the survey and of those, 5 expressed a wish to get more involved with the project and are in the process of registering to the involvement network.

Involvement work has been undertaken with some patients who were referred to the virtual ward. This was in response to the pandemic, where patients who have been admitted into hospital with Covid were stepped down to the virtual ward as part of their discharge if appropriate. To date approximately 140 patients have been treated through the virtual ward with only 5 readmissions into hospital. The team were invited to present their work at a national conference and were joined by a patient who has experienced the virtual ward to talk about their experience. The national case study has now been published with lots of interest nationally in relation to the 4 digital pathways. The lead for the work said that listening to the stories of our patients has been incredibly moving and has demonstrated some clear gaps in terms of demographics. This will lead onto a further piece of work looking at language and equalities.

Community Nursing Services have undertaken some work in relation to Duty of Candour letters following serious incidents. This important work has included looking at the timeliness of letters following the incident and the use of the language used in letters, with a focus to making them more patient-friendly and empathetic.

## **Involvement in Families, Children and Young People and Learning Disabilities**

### **Speech and Language Therapy (SALT) Services**

Parent/carer feedback for digital workshop and leaflets has been sought and filming began for online workshops incorporating the views and ideas of parents and carers. The SALT service has also facilitated online team learning and training with patients their parents/carers and other clinicians (GOS hospital) around dysphagia. Feedback from parents and carers around pre assessment ASD questionnaire has supported making changes to the survey tool to ease parents and carers to complete pre appointment/assessment.

### **Child & Adolescent Mental Health Services (CAMHS)**

Leicester's LGBT online youth group took part in a feedback discussion in March, this feedback on CAMHS services has been written up and will be shared once the LGBT group have signed the report off for accuracy.

### **Beacon Unit**

An inpatient focus group session took place on Monday 22<sup>nd</sup> March. The session focused on patient feedback and experience of incident debrief, advocacy and general environment experience.

### **Therapies Occupational Therapies**

Digital story completed and can be viewed via YouTube link below.

<https://youtu.be/Rhp40-BZUfM>

### **Developmental Coordination Disorder (DCD) Pathway**

Telephone call feedback with families has been completed during January for experience and views whilst on the DCD Pathway the Parent/carer feedback has been drawn into an action plan for the service and team to support improvements as part of a QI project.

### **Paediatrics**

Parent Carer survey developed to understand views of new pre assessment language and communication questionnaires shared across corporate team network for families/parent/carer views.

### **LLR Neurodevelopmental Project**

Feedback collected across LLR including variety of internal, external voluntary and involuntary partner organisations. A thematic review using data has been completed and this will be compared with review completed on data system Envivo. Themes will be compared, shared and written into a report for the wider programme to inform the parent/carer and CYP views for the pathway focus group sessions.

### **Special Educational Needs and Disabilities (SEND)- Rutland Disabled Children and Young People's Forum**

Discussions held around children and young people's views of support and care from health professionals and their journey around Neurodevelopmental care. Useful feedback for all service on communication and information provided for this cohort of children and young people.

### **Learning Disabilities (LD)**

The LD service is continuing its QI project as part of the Every Voice Counts initiative across LLR.

Work includes:

- Family and carer surveys have been sent out to help start to build an involvement network.
- Working digitally is being explored with the services around the eating and drinking pathway working with care homes to look at developing user friendly resources,
- A digital story is being planned from an LD patient.
- Band 4 support SALT worker being employed as part of funding to support co-design and involvement work and the Talk and Listen group. The LD Talk and Listen group is still currently running digitally using attend anywhere platform.

### **LPT Youth Advisory Board (YAB)**

YAB welcomed 2021 with setting preference and priorities for 2021. The work of the YAB over the quarter includes:

- Meeting with the Mental Health in Schools Teams (MHST) programme manager and Education Mental Health Practitioners (EMHPs). The YAB will be part of elements of co-production within this programme of work as a long standing involvement project.
- CAMHS waiting room environments discussing ideas around the waiting area in the Valentine Centre.
- Ongoing regular meetings with City Local Authority, Healthwatch and LPT Peoples Council Chair continuing to ensure work together.



- YAB welcomed the Northampton team to view and attend meetings during January and February and further discussions are ongoing on how to support setting up YAB group in Northampton.
- Submitted for an award within the PENNA national patient experience awards, entered within partnerships category for the collaboration of the group with local authority.
- 4 YAB members are joining the wider LPT Peoples Council; the members have met with the Chair of the Council and are being supported to attend the meetings.
- Provided virtual feedback during March on CAMHS Autism booklets for the ED team.
- Mental Health Transition- CAMHS and AMH colleagues joined the YAB to discuss transition within Mental Health for children and young people. Staff from CAMHS, DMH and governance colleagues (DMH) joined the session to source experience and feedback from members. The transition project team will follow up the session with YAB as the feedback is used.
- Membership at a number of interview panels for the Mental Health in School Teams recruitment as well as 5 members involved in the presentation panel for a senior psychologist post within CAMHS Eating Disorders. Members scored candidates via their presentation and asked open questions

An annual report for YAB has been created; this report highlights the work of the YAB board over the last financial year, on a month by month basis.

A meeting has taken place with national NHS Youth Forum member Haris Sultan to discuss linking LPT YAB and joining a national network for Young People and a facilitator network for staff. This will support understanding how all youth NHS forums run and can support each other. This may also open up national opportunities for members locally.

### **Good news story**

The two patient and carer involvement projects which were shortlisted for the celebrating excellence awards, both won! These were:

- Recovery and collaborative care planning cafes – shortlisted for celebration in excellence in partnership award
- April Smith PROM work – shortlisted for our excellence in patient or service user involvement award

Discussions are currently taking place with DeMontfort University in respect of offering year three mental health students placements within the patient experience and involvement team. Various approaches are being discussed in terms of the learning outcomes for students and how they can take their learning into their placements.

### **Key areas of concern**

There are currently no key areas of concern in relation to Patient and Carer Involvement

### **Assurance**

- The Patient and Carer Involvement work reports into the Patient and Carer Experience Group, Quality Forum, Quality Assurance Committee and Trust board for assurance.

# The People's Council

## Overview

The People's Council is developing well and has had a series of meetings with an external facilitator. The Council has agreed its behaviours, values and vision, including developing a relationship agreement that we would like to request that Trust Board sign up to. Also signed off have been the Terms of Reference for the Council.

The Council are now working on their priorities for the year ahead and have developed criteria against which we can decide if something should be a priority for the Council. This includes criteria around if a matter is a priority for LPT. Emerging priorities include Step up To Great for Mental Health and the forthcoming consultation, equality and diversity and the strategy refresh and the personalisation of care and personal health budgets.

The Council has been involved in the design of the Step up To Great Mental Health consultation, including the branding to be used and a discussion on what the consultation process will seek to answer.

A further three development sessions for the People's Council have also been secured and will be offering a range of both individual and group development for Council members.

## Good news story

Four new members from the Youth Advisory Board have now joined the Council and will provide a young person's voice into the work of the Council. Three Council members have been allocated with their new IT equipment to allow them to fully participate in Council meetings along with all Patient and Carer representatives being allocated their own nhs.net email account.

## Key Areas of concern

Risks	Mitigations
<b>Provision of administrative support to the Council to enable it to function and run its business</b>	<ul style="list-style-type: none"><li>Discussions have taken place to secure administrative support for the Council from with the Director of Nursing, AHP's and Quality. Capacity has been identified and recruitment will commence shortly</li></ul>

## Assurance

- The People's Council Work reports into the Patient and Carer Experience Group, Quality Forum, Quality Assurance Committee and Trust board for assurance.

## Proposal

- The Trust Board is asked to be assured of the work of the Patient Experience and Involvement Team.
- All risks and mitigations have been set out within **key concerns**.

## Decision required

- Receive assurance that work is being undertaken to improve how the Trust hears the voices and improves the experience of those who use our services, and their carers.
- Receive assurance that robust systems and processes are in place to ensure that complaints are being managed effectively in accordance with both the Trust and regulatory requirements.

## Governance table

<b>For Board and Board Committees:</b>	Public Trust Board 29 <sup>th</sup> June 2021	
<b>Paper sponsored by:</b>	Anne Scott, Director of Nursing, AHPs and Quality	
<b>Paper authored by:</b>	Alison Kirk, Head of Patient Experience and Involvement	
<b>Date submitted:</b>	09.06.2021	
<b>State which Board Committee or other forum within the Trust's governance structure, if any, have previously considered the report/this issue and the date of the relevant meeting(s):</b>	Patient and Carer Experience Group (PCEG) 28.04.2021 Quality Forum 13.05.2021	
<b>If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/ partially assured / not assured:</b>	Assured	
<b>State whether this is a 'one off' report or, if not, when an update report will be provided for the purposes of corporate Agenda planning</b>	Quarterly report	
<b>STEP up to GREAT strategic alignment*:</b>	High Standards	X
	Transformation	X
	Environments	
	Patient Involvement	X
	Well Governed	X
	Single Patient Record	
	Equality, Leadership, Culture	X
	Access to Services	X
	Trust Wide Quality Improvement	X
<b>Organisational Risk Register considerations:</b>	List risk number and title of risk	N/A
<b>Is the decision required consistent with LPT's risk appetite:</b>	Yes	
<b>False and misleading information (FOMI) considerations:</b>	None	
<b>Positive confirmation that the content does not risk the safety of patients or the public</b>	Yes	
<b>Equality considerations:</b>	Yes	

## Appendix 1 – Quarter 4 Complaints Breakdown and annual figures for 2020/21

Complaints Activity for Q4 – 1 January – 31 March 2021

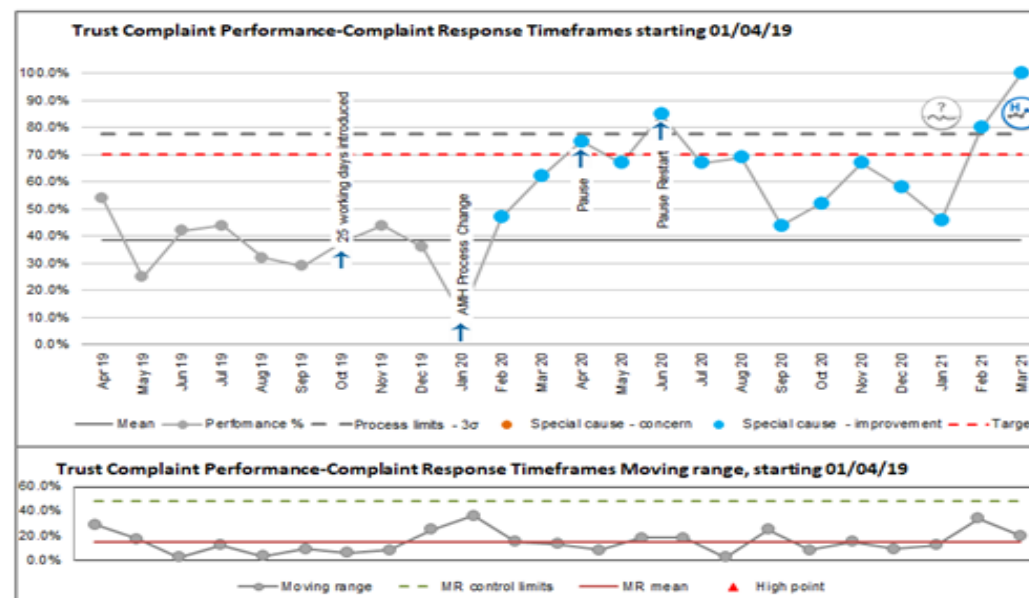
	Q1	Q2	Q3	Jan 2021	Feb 2021	Mar 2021	Total Q4	Total 20/21
Mental Health Service	14	33	26	12	7	9	28	101
Community Health Services	11	8	16	1	1	2	4	39
Families, Young People and Children & LD	8	6	13	5	6	8	19	46
Finance, Business and Enabling	0	2	0	0	0	0	0	2
<b>Total Received</b>	<b>33</b>	<b>49</b>	<b>55</b>	<b>18</b>	<b>14</b>	<b>19</b>	<b>51</b>	<b>188</b>
Complaints vs Patient Activity (Complaints Rate as a %)*	0.03	0.03	0.03	0.02	0.02	0.02	0.02	0.03
% of complaints acknowledged within three working days	92	96	84	91	93	95	94	90
Number of complaints responded to within the timeframe****	25	29	31	6	4	1	11	96
Number of complaints responded to in 25 working days	10	21	19	3	3	1	7	57
Number of complaints responded to in a date agreed with the complainant	15	8	12	3	1	0	4	39
Number under still investigation	0	0	2	5	8	18	31	33
% of complaints responded to within the date agreed with the complainant****	76	59	58	46	80	100	58	62
Number of complaints upheld or partly upheld in quarter	28	28	37	4	3	0	7	100
Number of complaints ongoing after 3 months**	6	4	0	0	0	0	0	
Number of complaints ongoing after 6 months***	1	0	0	0	0	0	0	
Number of reopened complaints	7	8	5	4	2	1	7	27
Number of complaints formally investigated by the PHSO	0	2	2	0	0	0	0	4
Number of complaints upheld or partly upheld by the PHSO	0	0	1	0	0	0	0	1

\* Patients attended and seen

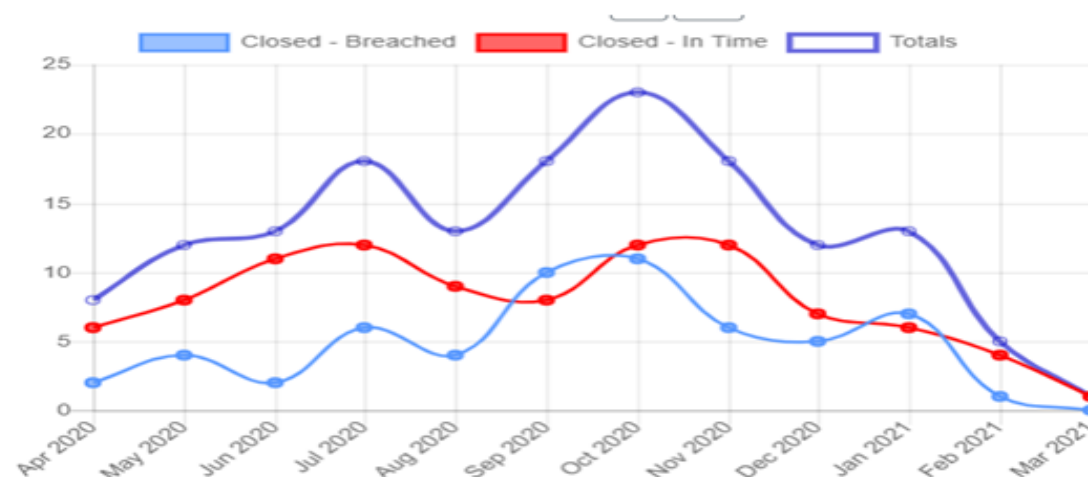
\*\* Complaints ongoing after 3 months at the end of Q4

\*\*\* Complaints ongoing after 6 months at the end of Q4. These do not include those complaints included in the ongoing after 3 months section.

\*\*\*\* Position statement as responses may still be under investigation.



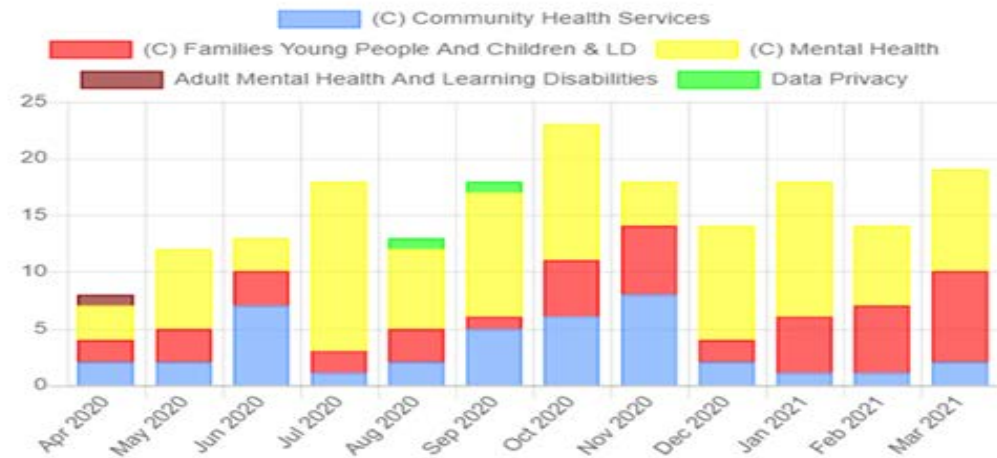
### Complaint performance for the year 2021/21



Complaints and PALS received by Service area:

	Complaints	Concerns	
<b>Directorate of Adult Mental Health</b>	ADHD Service	8	
	CMHT's City	12	
	CMHT's County	26	
	Crisis Services	2	
	Central Access Point	11	
	Mental Health Urgent Care Hub	3	
	Assertive Outreach	1	
	DMH Management Team	1	
	Place of Safety	1	
	Perinatal Mental Health	1	
	Inpatient Wards	14	
	Bedgate Outpatients	1	
	Dynamic Psychology	1	
	Forensic CMHT	3	
	Francis Dixon Lodge	2	
	CBT	1	
	Memory Service West	1	
	MHSOP CMHT County	3	
	<b>Community Health Services</b>	District Nursing – City	10
		District Nursing – County	3
		District Nursing – Wards	3
		Community Therapies - City	2
		Community Therapies – County	2
		Community Integrated Neurology	1
		Continence Services – City	1
		SALT (MVHC)	1
		Podiatry Services – City	1
		Phlebotomy	1
		Integrated Specialist Palliative Care	1
		MSK Physiotherapy (LH)	1
		Inpatient Wards	6
CAMHS – City		1	
CAMHS Beacon		2	
CAMHS – County		9	
CAMHS Crisis		1	
<b>Families, Children and Young People and Learning Disabilities</b>		Children's continence	1
		Children's Therapies	1
	FYPC Area 1	1	
	FYPC Area 2	2	
	FYPC Area 3	3	
	FYPC Area 5	1	
	Continence	1	
	FYPC Blaby	1	
	FYPC <del>Quadbay</del> and Wiggleston	1	
	FYPC Harborough	1	
	FYPC Hinckley and Bosworth	1	
	FYPC North West Leicestershire	1	
	Therapy and Diana Admin	1	
	Health Visiting for additional needs	1	
	LD Community – City	1	
	LD Administration	1	
	LD Referral management team	1	
	LD Community – County	1	
	Looked after children	1	
	Paediatrics Medical Servicing	3	
	SALT – Children's	3	
<b>Corporate and Enabling</b>	Langley Ward	1	
	Covid 19 Appointments	2	
Emotional/Physical abuse by staff	1		
Access to services	1		
Prescribing	1		
Appointments	1		
Signposting	1		

Complaints by Directorate for the year 2020/21



Complaints by Category for the year 2021/21





# FFT Responses – January – March 2021

**10%**  
Response Rate



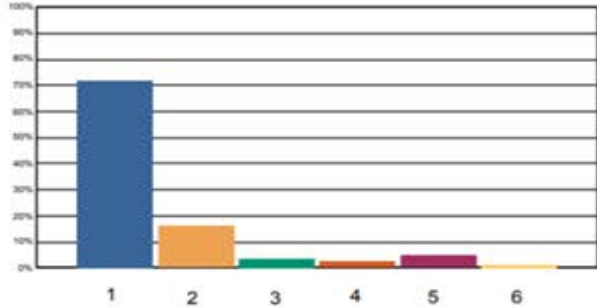
Positive  
**87.61%**

Negative  
**7.23%**

Top 10 Themes

+ Positive		- Negative	
1. Staff attitude	981	1. Staff attitude	116
2. Implementation of care	671	2. Implementation of care	105
3. Environment	277	3. Communication	96
4. Patient Mood/Feeling	225	4. Environment	89
5. Communication	203	5. Patient Mood/Feeling	65
6. Waiting time	160	6. Clinical Treatment	
7. Clinical Treatment		7. Waiting time	56
8. Admission	116	8. Admission	30
9. Catering	64	9. Staffing levels	12
10. Staffing levels	24	10. Catering	8

## Overall Scores



Response Option	Responses	Percentage
1 - Very good	2,108	71.58%
2 - Good	472	16.03%
3 - Neither good nor poor	112	3.80%
4 - Poor	79	2.68%
5 - Very poor	134	4.55%
6 - Don't know	40	1.36%

**Positive**

advice amazing answer answers appointment appointments attention attitude best better brilliant call care caring choice clean clear clinical communication covid daughter answer difficult ease easy efficient enjoyed enough everything excellent experience explained fantastic fast fault feel first food friendly give good great happy health help helped helpful home information informative issues kind lady related long looked lovely need needed needs nice nurse nurses organised patient people pleasant plenty polite problems process professional quick quick reassuring received respect safe service services smooth smoothly staff stay support team thank thanks therapy time think time treated treatment trouble understanding use vaccine visit volunteers waiting ward well wonderful

**Negative**

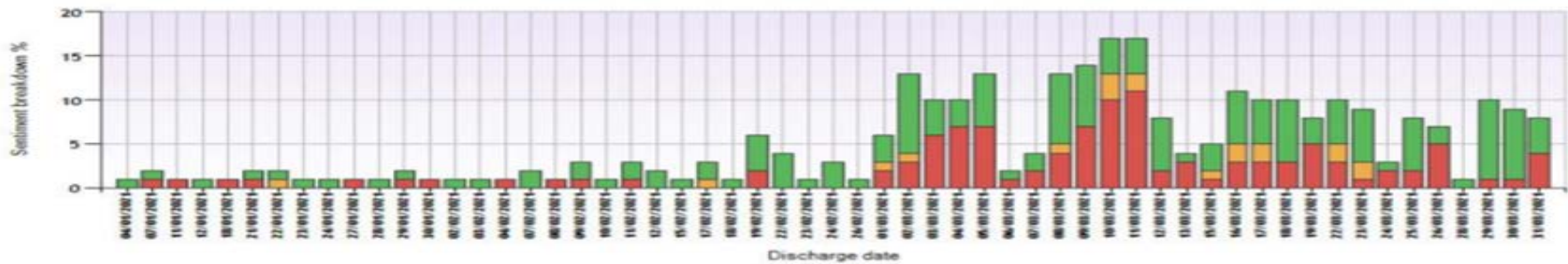
appointment appointments call care communication contact covid doctor face feel good health help long medication mental months pain people phone poor received service services someone staff still support team therapy through time times treatment was waiting weeks work years

# FFT Sentiment Analysis – all Services January – March 2021

## Legend

- Positive
- Neutral
- Negative

### Communications



### Implementation of Care

