

Trust Board – 25th July 2023

Carer Experience and Involvement (PCEI) Quarterly Report (including Complaints) Quarter 4, 2022/23

Purpose of the report

- To provide an overview and update of the various aspects of the Patient Experience and Involvement team's work.
- To provide an overview and update on the complaint's activity for quarter four.
- To provide assurance to the Trust Board.

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 various sources. Including the following:

- 🔗 Frequent Feedback – comments, enquiries, and concerns
- 🔗 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.

Patient Experience including complaints, concerns, and compliments

In Q4, the Trust formally registered 48 new complaints, which is a decrease compared to the same period last year but a slight increase from the previous quarter. Although the Trust continues to see an overall decrease in the number of new complaints being registered year on year, it has been noted that in Q4, the Complaints and PALS Team have seen a significant increase in contact via telephone, email, and letter, however, despite issues with capacity across the team in Q4, the team have continued to manage most contacts via the informal route where possible.

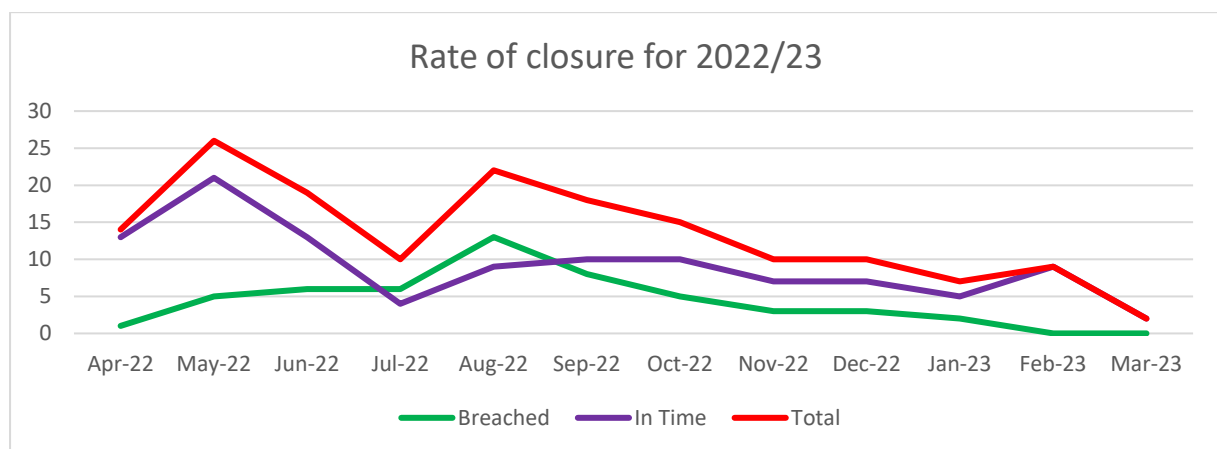
Unfortunately, there has been a decrease in the rate of acknowledgement of complaints within 3 working days, which has dropped from 97% in Q3 to 85.4% in Q4. Whilst this is not ideal, it is noted that the team have been experiencing issues with capacity due to sickness and waiting for new staff to join the team, however, it is hoped this can be rectified into the new financial year.

Q4 also saw 4 cases breach their given timeframe, with 17 managed within their timeframes, 1 paused awaiting a meeting to take place and 1 reopened due to not all issues being addressed.

Complaints Performance in the Quarter

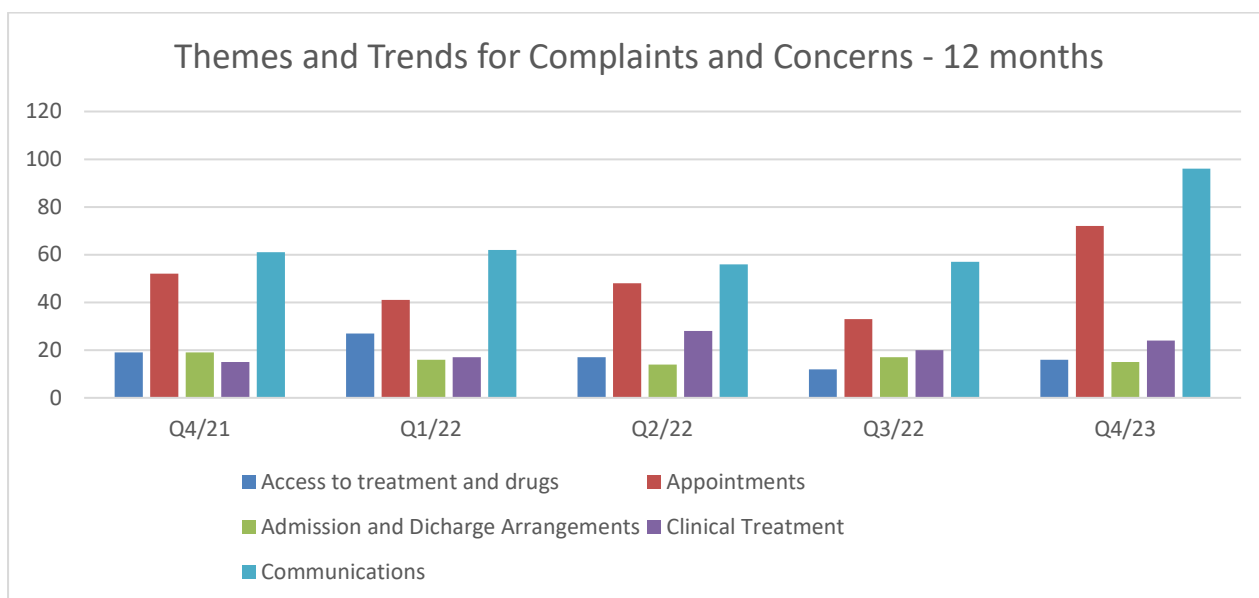
- 85.4% complaints were acknowledged within 3 working days (it is noted that the team have been experiencing issues with capacity due to sickness and waiting for new staff to join the team)
- 4 complaints breached their given timeframes in the quarter.
- 17 complaints were managed within timescales agreed with complainant.
- 1 complaint has been paused awaiting a meeting to take place with complainant
- 1 complaint was reopened (7in Q3), due to not all issues being addressed.

Following the review of performance in Q3, we are pleased to note that the Trust's overall performance on complaint management timescales has improved. The table sets out the improvement in number of cases closed within timescale, currently at 74%. Although the figure at this stage is below the desired 90% or above for performance, we feel we are moving performance in the right direction and are confident this will continue into 2023/24 through strong collaborative working colleagues in the directorates to move cases through the system as effectively and efficiently as possible, whilst ensuring the patient is at the centre of everything we do.



Complaint Themes

The Team continues to work with the directorates to ensure that complaints being received are logged appropriately on Ulysses and where necessary, a change in the logging categories and/or area is being made before a case is closed, ensuring that the data being reported to NHS England via the KO41a yearly return, provides an accurate picture of the complaints being received by the Trust.



Responding to Complaints

Directorate of Mental Health continues to lead the way in the Trust by focussing on Local Resolution Meetings (LRM), where possible, to close complaints. Whilst this work is time consuming and can delay a resolution or require an extension to the original given timeframe, it is acknowledged that LRM's tend to give the best possible outcome to the patient, family, or carer, as they feel they have been listened to when a face-to-face or virtual meeting is organised, rather than to read the outcome of an investigation from a letter.

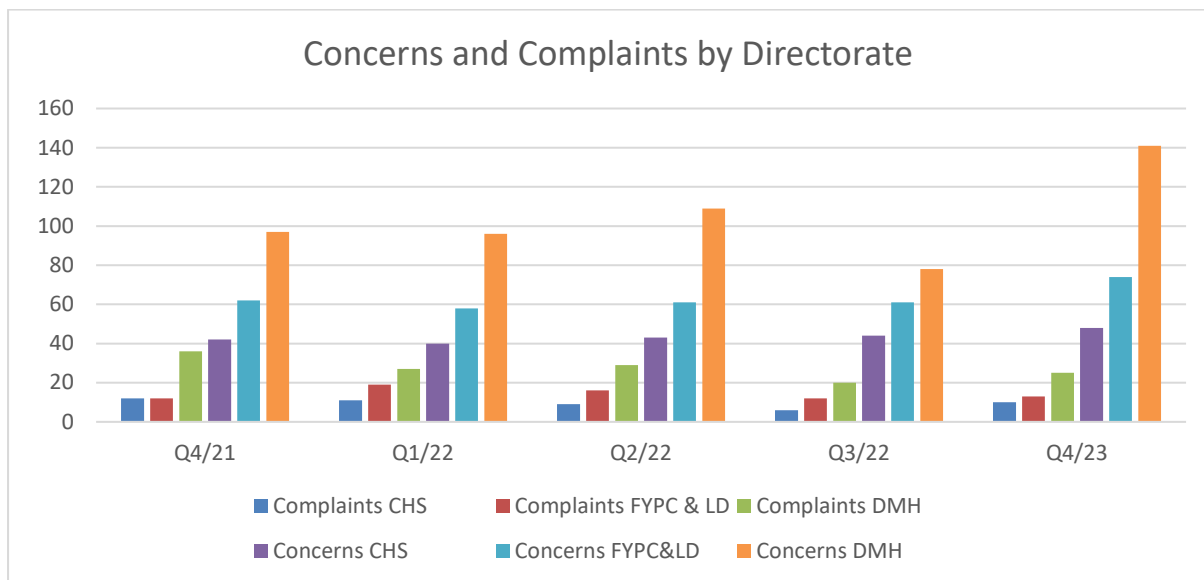
Although we continue to see several CHS complaints being referred to the Corporate Patient Safety Team for review, this figure has reduced from the previous quarter with only 3 cases being taken forward as Serious Incidents or Internal Investigations in comparison to the 7 from Q3. However, the team continue to work closely with our colleagues in Patient Safety to ensure better overall outcomes for patients, their families, and carers.

In Q4, FYPC/LD continued to see most of their complaints coming from Community Paediatrics, CAMHS and SALT, however, two additional members of staff have now been trained to support with informal concerns in these areas, which should provide additional capacity to those investigating complaints to complete their investigations. Furthermore, bespoke training has been requested from managers in CAMHS and SALT and it is hoped that this can be provided in the coming months.

The directorate working on improving how they look at learning and embedding this. A SOP has been created within the directorate for understanding and clarity for complaints and patient safety processes including action plans. Trying to share good practice across the directorate from areas such as CAMHS where regular thematic meetings are ongoing.

Work is underway to link complaint and concern feedback into planned and new business models (e.g., Neuro Developmental programme) and new service developments is underway to inform patient experience. The directorate are looking at what they already know and are aware of.

The People's Council have identified the theme of communication as something they would like to undertake a deeper dive into. The Council will be working up an approach to undertaking this review, along with staff to understand the experiences in more detail. The work of the Change Leader Programme, which is reviewing patient experience data will also feed into this work along with the findings from the engagement underway with patients, carers and staff in the establishment of principles for Foundations for Great Nursing Care.



Peer Review

The Trusts final Peer Review session for 2022/23 took place on 8 February 2023, with 15 participants in attendance, including carers, those with lived experience and members of staff from a wide range of areas across the Trust. The session focussed on complaints from the Directorate of Mental Health and was facilitated by Emily Robertshaw, Deputy Head of Patient Experience and Involvement and Mary Mahon, Complaints and PALS Manager.

The overall structure of session was changed based on feedback from previous sessions run in 2022 with Jasmine Feakes, Senior Clinical Quality Improvement Advisor attending to complete some work on Duty of Candour (DOC) letters.

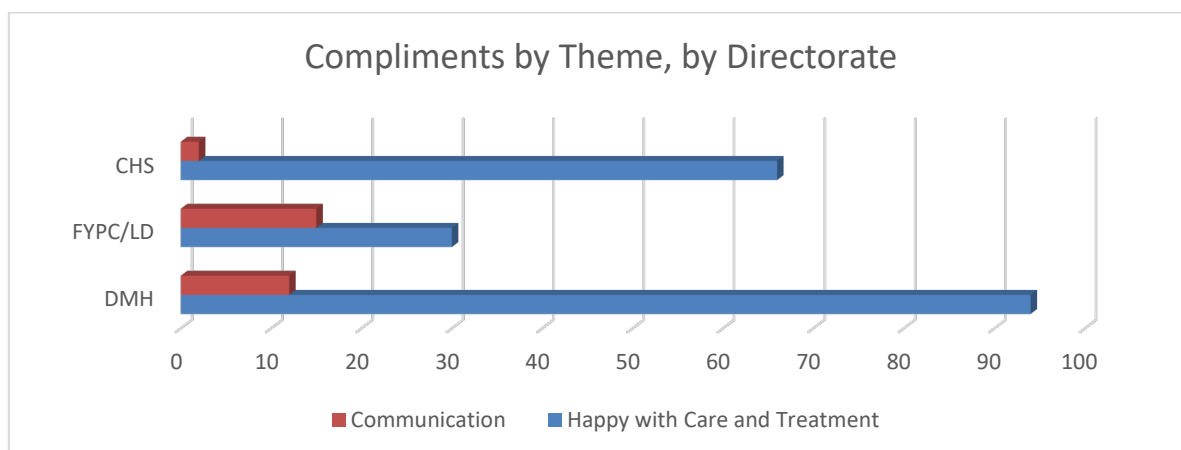
The Peer Review sessions have been invaluable to the team and have led to some immediate changes to letters of acknowledgement, changes in the wording of our responses and a clear focus on involving patients, families, and carers in the process. This session has also left us with many further discussions regarding consent and the sharing of information, which we will be taking forward into 2023/24.

It has been agreed that the Peer Review sessions planned for 2023/24 will focus on service user led 'I statements', action plans and learning, which will allow us to gain further understanding and insight regarding our process. There will be an additional Peer Review session which will focus on the theme of complaints and our People's Council members will be invited to join this session, planned for July 2023.

There was an increase in MP Enquiries and concerns raised by patients and families via these routes during the quarter with a total of 17 MP Concerns/Enquiries.

Compliments

223 compliments were received in the quarter, this equated to 44% of all feedback received (excluding FFT feedback). The key themes for positive experience via compliments were Happy with Care and Treatment and Good Communication.



Good news story

Complaints ULearn Module has progressed further, the final changes have been submitted to the development team for review, in addition to these several bespoke training sessions on complaints and concerns have now taken place with staff, as well as a weekly virtual drop-in session hosted by the PALS and Complaints Team to enable staff to gain advice and support.

Keys areas of concern

No current areas of concern

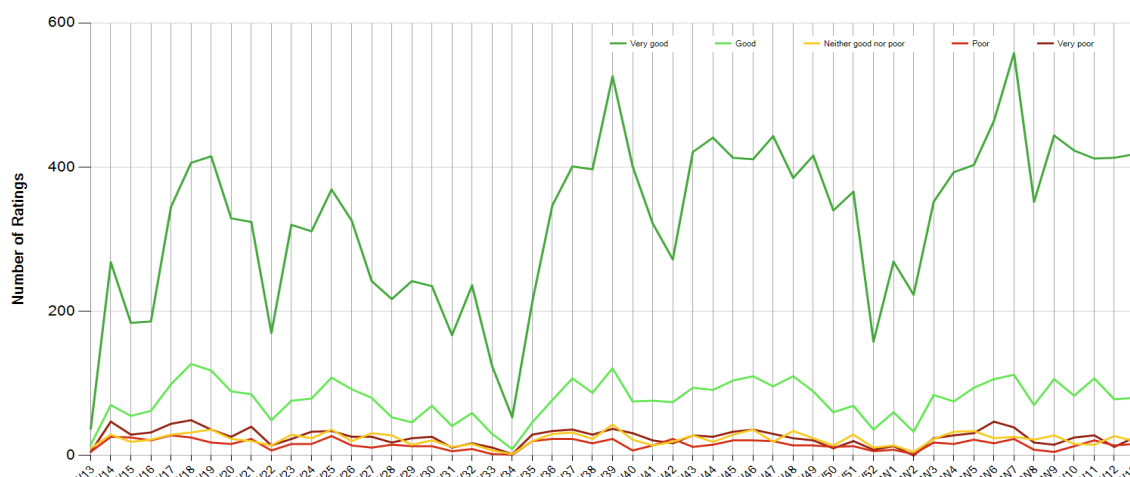
Assurance

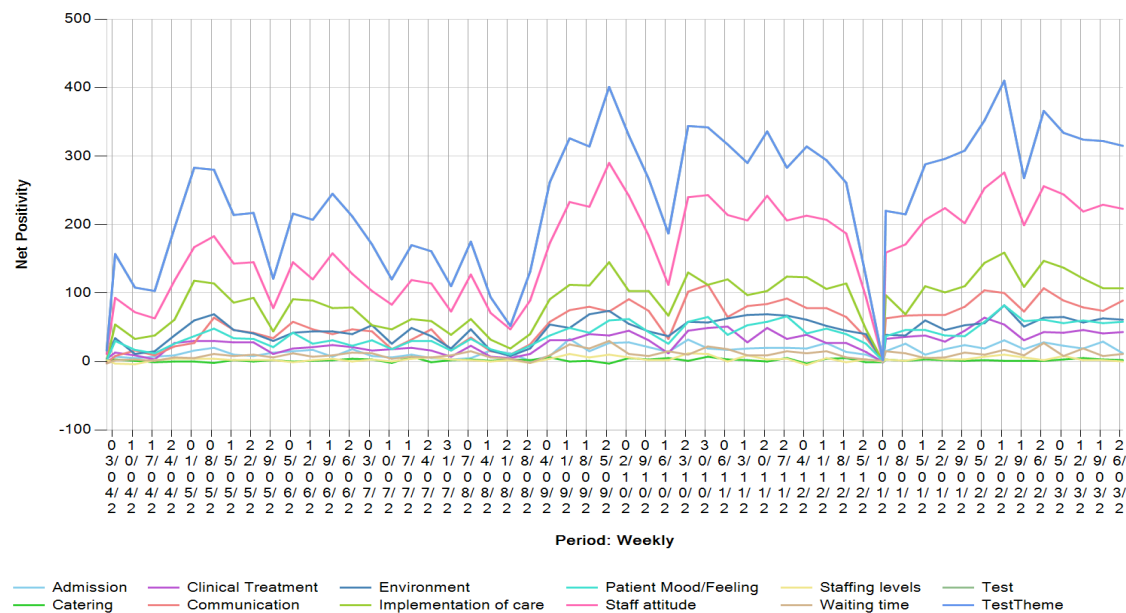
- The Complaints and PALS work reports into the Complaints Review group which then reports into the Quality Forum, Quality Assurance Committee and Trust board for assurance.

Friends and Family Test and Patient Surveys

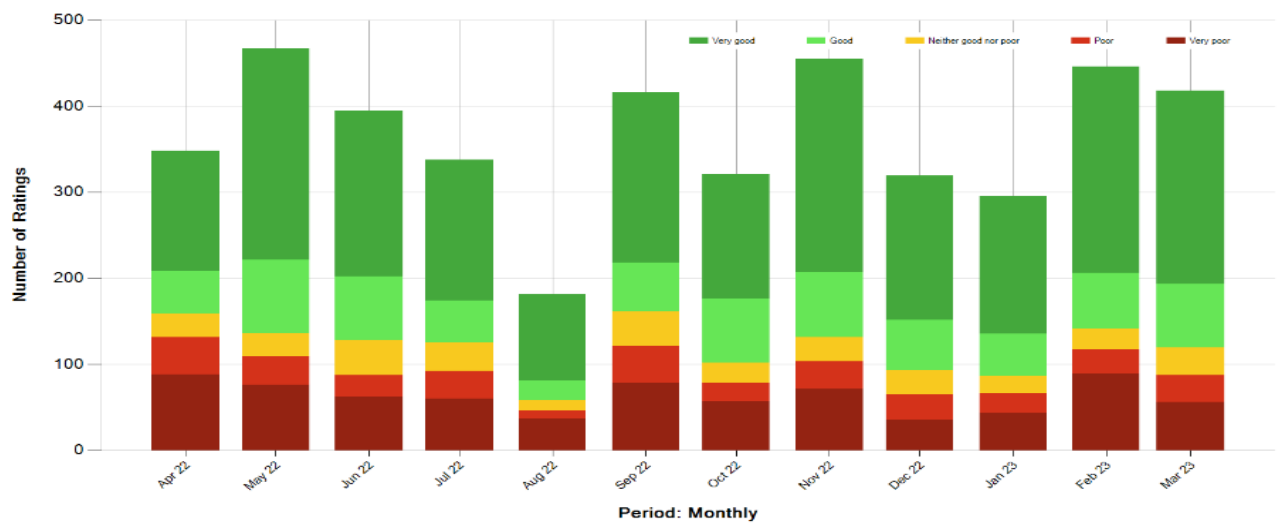
Overview

Since the beginning of the year there has been a steady increase in the number of responses received in relation to the Friends and Family Test (FFT). Results also demonstrate a steady increase in satisfaction in the overall care and treatment provided by the Trust. In Q4 the Trust received 7081 individual responses to the FFT question which equated to a response rate of 10% which is a 1% rise from responses in Quarter 3 and a 4% rise from the April 2022. Of these responses 88% (Q1 83%) reported a positive experience of care and a 7% (recording negative or poor experience of care).

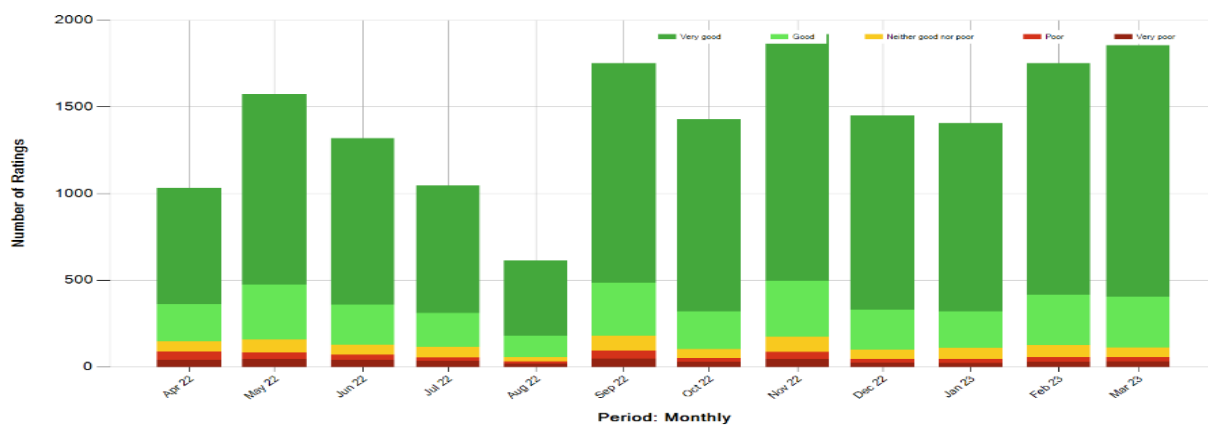




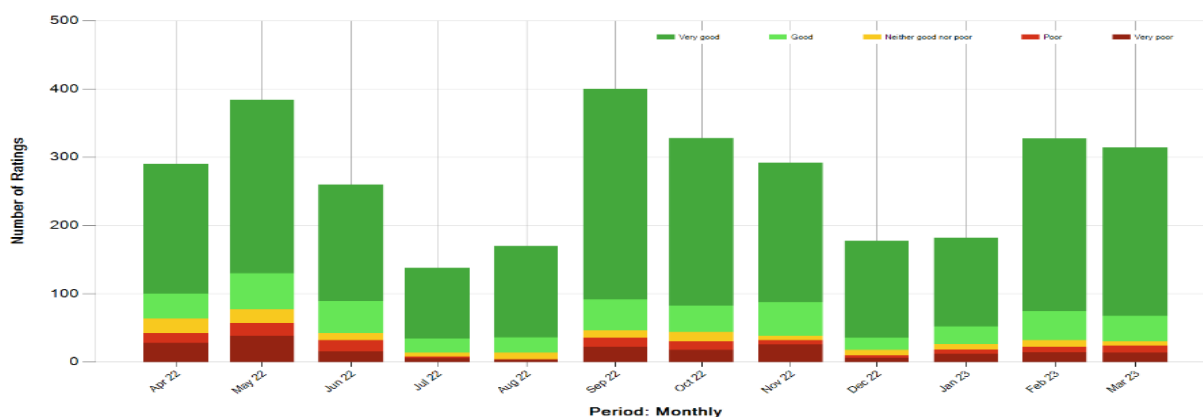
Sentiment Analysis for Directorate of Mental Health for 2022/23



Sentiment Analysis for Community Health Services for 2022/23



Sentiment Analysis for Families, Children and Young People and Learning Disabilities for 2022/23



Key Areas of concern

There are no key areas of concern.

Good news story

Grant, one of our patient leaders presented the CAMHS Eating Disorder ARFID Pathway team with £150 of vouchers to improve patient experience within their service. The team have improved the waiting room at Loughborough hospital Child and Family unit by adding chalk board paint on the walls for young people and carers to add their views, advice, and feedback. There are four different boards, each with different themes and it has been a great success.



Assurance

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

Feedback into Action

Following on from the redesign of the current Customer Service ULearn modules with a design group made up of patients, carers, and staff. The modules are currently being finalised with the O&D team and the interactive element is currently being piloted with 4 sessions across the directorates, this session is being co-delivered with a lived experience partner. All 3 ULearn modules will be launched during Q1 along with the interactive face to face or MS Teams customer service training.

The Patient Experience and Involvement Team have been working closely with the Director of Nursing (DoN) and Allied Health Professionals (AHP) programme, to support the fellows with involving service users and carers in their quality Improvement projects.

So far, we have delivered a session to the fellows on involving people with lived experiences in their projects, listening and learning from feedback, and working collaboratively with service users and carers to co-design and co-produce on projects. The WelImprove Lived Experience volunteer co-delivered the session.

It has been great to see all 8 of the Director of Nursing and AHP fellows wanting to invite a service user and/or carer to work collaboratively with them on their project and become part of the project

team. To date all the projects have been matched to someone with lived experience who will join project team with half of the projects already started meeting, and co-delivered focus group is already being planned.

- **Community Health Services: Occupational Therapist** - improving understanding of posture related issues within care and nursing homes to prevent adverse impact on patients.
- **Adult Learning Disability Services: Agnes Unit** - improvements to training on trauma informed care to enable staff to better support service users who have been victims of abuse.
- **Community Health Services: District nurse** - a project set in limb and wound clinics.
- **Adult Mental Health: Herschel Prins Centre** - improvements to service user engagement and therapeutic activities on the ward.
- **Adult Learning Disability Services: Community Services** - increasing service user access to voluntary or paid work.
- **Community Services: Occupational Therapist** - improving processes and providing staff guidelines to reduce health inequality for bariatric service users.
- **Children's services, Speech, and Language Therapist** - improving access to online and face to face courses, particularly to address cultural and language barriers.
- **Community in-patients: Occupational Therapist** - improvements to professional identity and role for occupational therapists.

Work in relation to Carers continued throughout the quarter and included the ongoing engagement meetings with the staff carers working group who undertook a staff carer awareness survey to understand the needs of staff with caring responsibilities. Two carers focus groups took place with the aim to understand carers experiences of LPT services and ideas to improve awareness, support, and contact. All of which will inform the trust-wide carers delivery plan.

The LLR carers strategy was launched in January 2023 and the new priorities will inform Trust plans. The carers passport which is available across LLR has been promoted with staff, allowing staff to signpost carers to their local support offer. Young carers awareness training for staff has been delivered by Local Authority young carers leads with a further 4 training sessions to be offered for up to 200 staff during 2023/24.

Responding to 360 Assurance Audit Recommendations

Work continued in response to the recommendations during the quarter and included:

Directorate-level groups have been established within CHS and FYPC/LDA. A discussion has taken place with the Mental Health Directorate Management Team and agreement has been made to take forward the established of a group. This work will commence in Quarter 1 2023/24.

Through these groups, terms of reference and agendas Directorates are now reporting actions/learning and responses to themes and trends from concerns, complaints, and feedback. This is then feeding through into the Corporate Patient and Carer Experience Group and the Complaints Review Group and informs the quarterly Patient Experience and Involvement Report. The report is now starting to demonstrate Learning into Action.

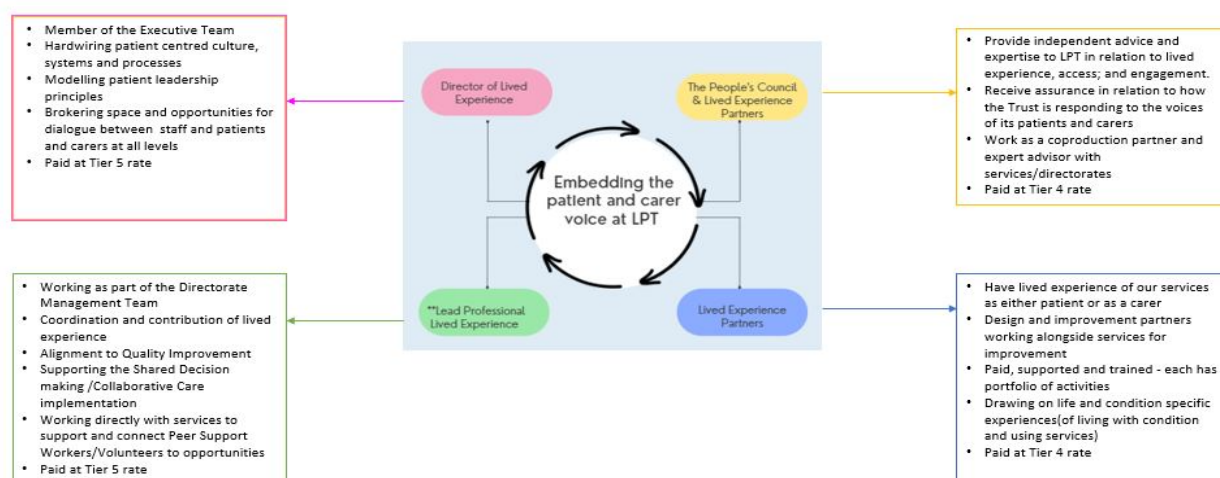
Agreement has also been reached with the People's Council that they will receive quarterly reports and will provide an 'independent' review and confirm and challenge against themes, trends and actions reported. It is envisaged that the Council will be able to call to action a response from either a directorate or from across the Trust in relation to themes and trends in relation to patient experience and feedback. The theme of communication has already been identified as a priority theme for review in 23/24 and as such we have established a

Complaint Peer Review session with a focus on the theme of concerns and complaints in relation to communication. Council members will be invited to join in these sessions. Further planning with Council to take place in terms of further work on the review.

Lived Experience Leadership Framework

Over the last 18 months work has been taking place to co design the Lived Experience Leadership Framework with a group of Experts by Experience. The Framework has now been finalised and the commencement of the recruitment to Lived Experience Partners will commence in Quarter 1 of 2023/24. The Framework sets out how the Trust will work in partnership with patients and carers at all levels of governance, quality improvement and transformation. The Framework will also be a blueprint for the Integrated Care System and is a key priority of the Peoples and Community ICS Strategy.

Lived Experience Leadership Framework



Lived Experience and Involvement Tiers		
	Activities	Reward and Recognition
Tier 1	People choose to attend, respond or comment on open access engagement opportunities e.g. responding to online surveys attendance at public meeting;); Involvement in own care planning; Feedback on services accessed	No payment, reward or recognition
Tier 2	Deliberate Engagement - Invited to attend workshops; events; focus groups on a one off basis	Out of pocket expenses and Reward & Recognition (non-financial)
Tier 3	Member of regular working group meetings (policy and service design, directorate reviews, task and finish programmes, etc). Attendance at stakeholder interview panels.	Out of pocket expenses and Reward & Recognition (non-financial) – vouchers (max of £50 per person per year)
Tier 4	Members of committees /roles that demonstrate strategic and accountable leadership and decision making activity or members of groups that make recommendations to committees that have delegated authority of the Trust Board. Co-delivery of training; co-leadership of quality improvement projects and transformation	Patient or Carer Lived Experience Partner role, out of pocket experiences and offer of involvement payment via. Payroll process
Tier 5	Paid roles, employment with LPT via contract of employment e.g. Peer Support Workers; Lived Experience Lead Profession	Employment/salaried role

The People's Council

The People's Council have undergone a review of its membership, objectives, and priorities as part of its reset and rebuild process. Several members of the Council have decided to step down from their roles, others have come to the end of the initial two-year tenure and as such a recruitment campaign for new voluntary and community sector and lived experience partners is commencing in Quarter 1 2023/24.

Holding is first meeting in 8 months in April 2023 the Council have now agreed their priorities for the year We have reviewed the work of the Council and for it to have more impact, they will focus on:

1. Supporting LPT to learn by being a critical friend.
2. Supporting LPT to involve, engage and co-produce.
3. Supporting LPT to shape strategy and policy.
4. Supporting LPT to deliver on its equality, diversity, and inclusion commitments and to tackle health inequalities.

The Council will achieve this:

- Overseeing the delivery of the Trust's Patient Experience and Involvement Delivery Plan and Lived Experience Leadership Framework.
- Receiving and considering the results of any patient and carer and/or staff surveys.
- Considering themes from patient experience received through various formats such as the Friends and Family Test, Complaints and Concerns.
- Engaging directly with our patients and carers to understand their experiences.
- Providing advice and expertise in the review of the Trust's Equality Impact Assessments and delivery of equalities plan.
- Review the delivery of Quality Improvement Projects.
- Considering presentations and updates from the Trust and others.
- Establishing Task and Finish Groups to help the Council deliver on its four objectives, which will review, examine, and make recommendations.
- Contributing to key meetings and committees, including meeting with the Trust's Board.
- Reviewing the Trust's progress against the developing Patient and Carer Race Equality Framework (PCREF) and its progress in becoming an anti-racist organisation.
- Advising the Trust on new ways to measure the experiences of patients and carers.
- Participating in an annual review of Patient Experience through the Patient Experience Improvement Framework
- Providing assurance on the Trust's delivery of its Corporate Plan, called Step Up to Great and by helping keep the Trust's priorities under review.
- Reviewing Care Quality Commission inspection reports and holding the organisation to account for delivery of plans in response to those reports.

The Council will meet every quarter. A Council updates will be provided in this report on a quarterly basis.

LPT Youth Advisory Board (YAB)

Raising Health Christmas Appeal Summary

The YAB supported this year LPT Raising Health Campaign and successfully contributed through members individual fundraising efforts over £420 to the total. This ensured that some young people accessing outpatient CAMHS services also received a gift this Christmas as part of the wider trust inpatient appeal.

Young People's Access to Primary Care

ICB Children and Young People's engagement lead Jacob Brown facilitated a consultation session with the YAB to understand young people's views around accessing primary care (GPs), preferred options, barriers, and support at appointments. This session will feed into a wider system project along with the views of other young people from across LLR, a summary of findings and next steps will be presented to the group in spring 2023.

Healthy Together Consultation

Healthy Together and Local Authority Leads attended YAB to share and update the board on the current consultation underway within Leicester City, young people shared their views on the accessibility of the current consultation and how further face to face discussions would support young people to be engaged with and get involved. The board have offered further support during

this phase of the project to provide their feedback through an interactive focus group. Feedback was clear to improve accessibility of consultations like this in the future. The Healthy Together team and City LA public health leads will be revisiting YAB at the end of March to focus a session to gain engagement on the current consultation, which has seen very few young people participate with the online survey. This session will form feedback as part of the wider engagement taking place during this stage of the process.

Paediatric Psychology

Psychologist Vicky Elliot attended a YAB session to discuss and share group work plans for anxiety workshops due to be rolled out across the service. YAB members reviewed the documents and provided feedback during the session to support this new programme, this included the language and pre/post group work expectations that young people who be expected to complete. The board concluded that the style and images were very current and were positive in reporting this during the session as good practise for other areas.

Raising Health – NHS 75th Birthday

Carolyn Pascoe, Raising Health Lead attended a meeting to discuss ideas for celebrating and fundraising ahead of this year's NHS 75th Birthday, the group provided feedback, ideas, and suggestions as to how this can involve young people through both fundraising for priority projects and involvement in the celebrations. This will be an ongoing conversation as the preparations progress.

Child and Adolescent Mental Health Services

CAMHS, shared a paper version of a young people's support plan, YAB provided feedback and ideas to improve this aid for young people including adding in detail around preferred names, more about me and images, the group shared they would also value digital versions of this type of resource. An updated version will be shared again with YAB once amends are made. Following feedback from YAB a digital version of this has been developed and is currently under final sign off from YAB following changes that have been made base.

The service presented plans to run a community group with young people, YAB shared their lived experience and views around the communications, ideas and attractions that would appeal to young people, they also supported suggestions and ideas how to evaluate the sessions with those that attend, to ensure future sessions are designed with young people's views.

Assurance

- Both the People's Council and Youth Advisory Board's work reports into the Patient and Carer Experience Group, Quality Forum, Quality Assurance Committee and Trust board for assurance.

Proposal

- The Quality Forum 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

For Board and Board Committees:	Trust Board 25.7.23	
Paper sponsored by:	Anne Scott, Director of Nursing, AHPs and Quality	
Paper authored by:	Alison Kirk, Head of Patient Experience, and Involvement	
Date submitted:	3 July 2023	
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):	Patent and Carer Experience Group (PCEG) virtual sign off 1 June 2023	
If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e., assured/ partially assured / not assured:	Quality Forum 8 th June 2023	
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	People's Council 4 th July 2023	
STEP up to GREAT strategic alignment*:	High Standards	X
	Transformation	X
	Environments	
	Patient Involvement	X
	Well Governed	X
	Reaching Out	
	Equality, Leadership, Culture	X
	Access to Services	
	Trust Wide Quality Improvement	X
Organisational Risk Register considerations:	List risk number and title of risk	N/A
Is the decision required consistent with LPT's risk appetite:		
False and misleading information (FOMI) considerations:		
Positive confirmation that the content does not risk the safety of patients or the public		
Equality considerations:		