

## Trust Board

### Carer Experience and Involvement (PCEI) Quarterly Report (including Complaints) Quarter 1, 2023/24

#### 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 one.
- 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.

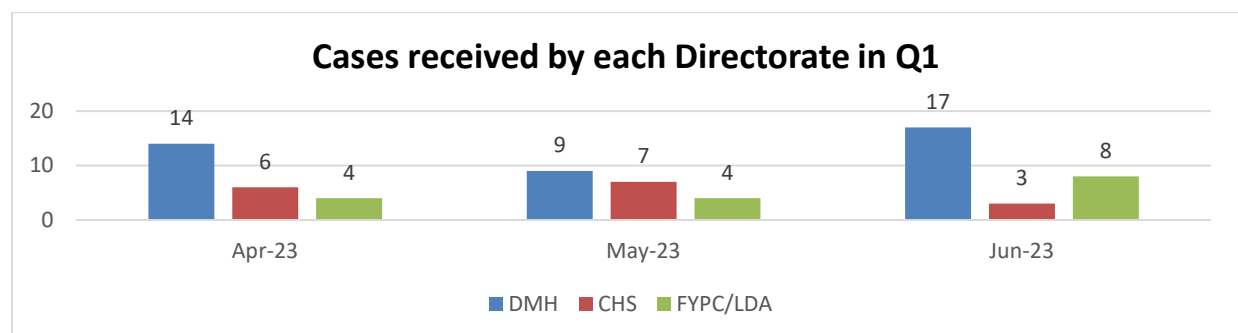
The reports present a wide range of information from various sources. Including the following:

- 🗨️ 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.

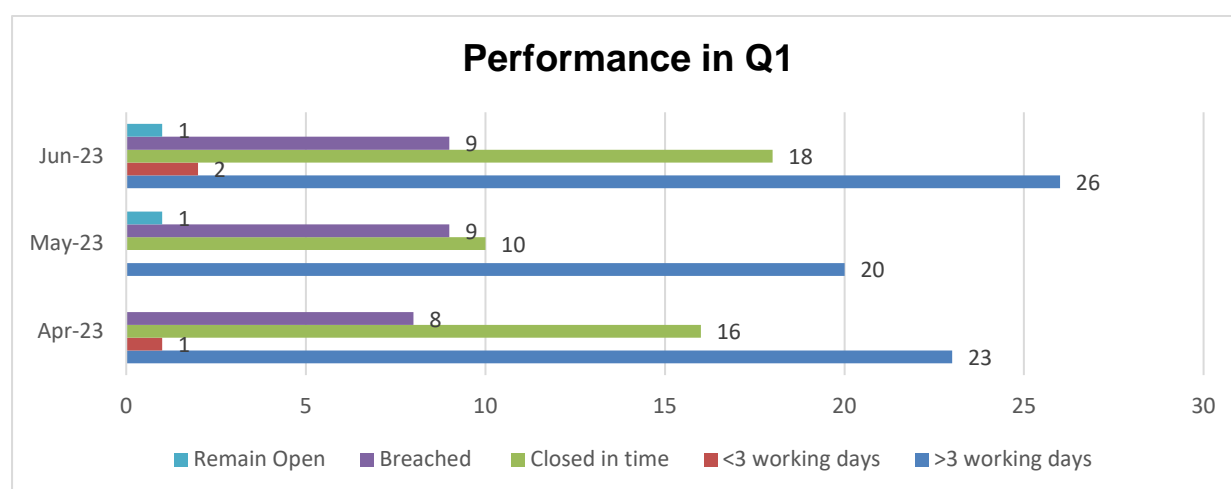
#### Patient Experience including complaints, concerns, and compliments

In Q1, the Trust formally registered 72 new complaints, which is an increase of 26% compared to the same period last year, where 57 new complaints were registered. This is also a significant increase, 50%, in the number of new complaints being registered from the previous quarter (48).



Although the longer timeframe for investigations, has benefitted the Trust previously in respect of meeting their performance targets, unfortunately, due to several factors including issues with staffing, an increase in the complexity of complaints, as well as an overall increase in the number of cases being received, the Trust's overall adherence to their agreed timeframes has decreased from 74% last quarter, to 64% in Q1. Whilst the NHS England requirement of formally acknowledging all complaints within 3 working days of their receipt remains high (96%), the significant decrease in the cases being closed as per their agreed timeframes is a worrying trend.

The Complaints and PALS Team continue to work closely with each of the Directorates to help and support with any barriers to closure, where possible, and it is hoped that with the increased number of staff being trained to complete both PALS concerns and complaints, this will reduce the overall pressures on the areas which receive the highest numbers, thus allowing for cases to close within their agreed timeframes. The Team continues to meet with Directorates and discuss the use of the extension process, as well as pausing those complaints where local resolution meetings have been agreed close to the final closure date.



Families, Young People and Children, Learning Disabilities and Autism (FYPC/LDA) have seen an overall increase in the number of complaints being received, as well as the number of concerns being escalated by parents and families. Concerns are specifically relating to waiting times for appointments in Community Paediatrics, Child, and Adolescent Mental Health Services (CAMHS) and similar issues more recently in Speech and Language Therapy (SALT) and the Adult Autism Assessment Service. Due to the continued increase in contact regarding Community Paediatrics' and as part of the Neurodevelopmental Transformation, a pilot is currently taking place, with a cohort of children on the waiting list, having targeted intervention from a SALT perspective. This alongside support from consultants is seeing a positive impact. The service will look at widening the scope to different cohorts of children on waiting lists. CAMHS completed an engagement service with children, young people, and families to gain their experience in FYPC/LDA's signposting offer. Really positive session with the feedback currently being reviewed, for further development, to strengthen the signposting offer and support provided.

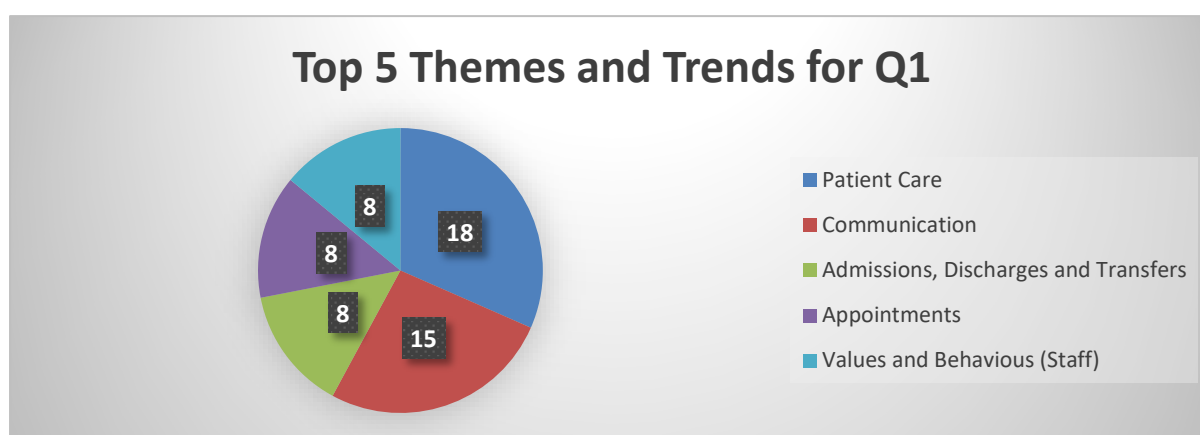
Community Health Services (CHS) continue to receive complaints regarding District Nursing services, however, have seen an increase in the number of complaints relating to the Values and Behaviours of staff, a trend which is being investigated internally by the Directorate.

Directorate of Mental Health continue the trend of receiving the highest number of concerns and complaints, Community Mental Services are seeing the highest areas of dissatisfaction. ADHD service continues to be a key area being highlighted in relation to waiting times and access. There are over 3000 patient's waiting for assessment and over 2000 patient's awaiting treatment following

assessment. The ADHD Service are working hard to recruit within this area to support with the demand. A mail drop was completed last year to all patients on the waiting list, signposting to other services, to support whilst awaiting an appointment. A big focus on educating on the Right to Choose. Clear expectations are being set when patients are referred to the service, regarding expected waiting times of between 2-3 years.

### Themes and Trends

As has been the case throughout the majority of 2022-23, Patient Care, Communication, Appointments and Admissions, Discharges and Transfers remain in the top 5 themes and trends across complaints received in Q1, with Values and Behaviours (Staff) showing a significant increase from 1 in Q4 of last year to 8 in Q1. These trends have been discussed at the Complaints Review Group (CRG) and the Complaints and PALS Team continue to work with the directorates to keep them informed regarding any area or service which has shown an increase in these types of allegations in both formal and informal cases. In relation to the theme of Patient Care the Deputy Directors of Nursing will be undertaking a deep dive into the concerns and complaints raised within this theme with the Heads of Nursing.



Whilst the Trust did not receive any requests to reopen complaints in Q4 of the previous year, in Q1, we received 6 reopened complaint requests. The main reason given for complainants coming back remained the same, not all concerns were addressed. Although it is disappointing that we have seen an increase in these figures this quarter, it is important to note that 4 of the 6 requests were made following the complainants contact with the Parliamentary and Health Service Ombudsman (PHSO), where the Trust were asked to review the outcome and investigation to provide a final response and allow the complainant to take their case to the PHSO for independent investigation.

Although the PHSO have contacted the Trust about 3 complaints brought to their attention in Q1, 2 of these complaints have not been formally investigated and no further action is to be taken. We are currently waiting for the PHSO to provide an update on the final case.

As a Trust we have continued to see issues relating to patient safety coming through the PALS and Complaints functions, with families feeling this is the most appropriate avenue to raise their concerns. Although a clear process for managing these types of complaints has been in place for some time, in Q1, a weekly catch-up call was agreed with the Patient Safety Team, to enable closer working relationships, thus allowing cases to move through the system as quickly as possible, leaving patients, families and carers, with a better overall patient experience, whilst ensuring that we allocate the case for investigation through the most appropriate avenue every time.

### Peer Review

As communication has continued to be identified as one of the main themes and trends across the Trust, it was agreed that the first Peer Review Session of 2023-24 would focus solely on this area.

The session allowed those present to provide feedback and thoughts on how the Trust communicated with our complainants from when they first contacted us, until the date their complaint was closed.

The session was attended by 22 people from clinical and non-clinical backgrounds and, also including one carer and a member of staff from Healthwatch Leicester and Leicestershire. Three redacted complaints were shared with those present, one from each Directorate. Overall, fifty-four individual pieces of feedback were collected from the session with additional feedback recorded following the tabletop discussions.

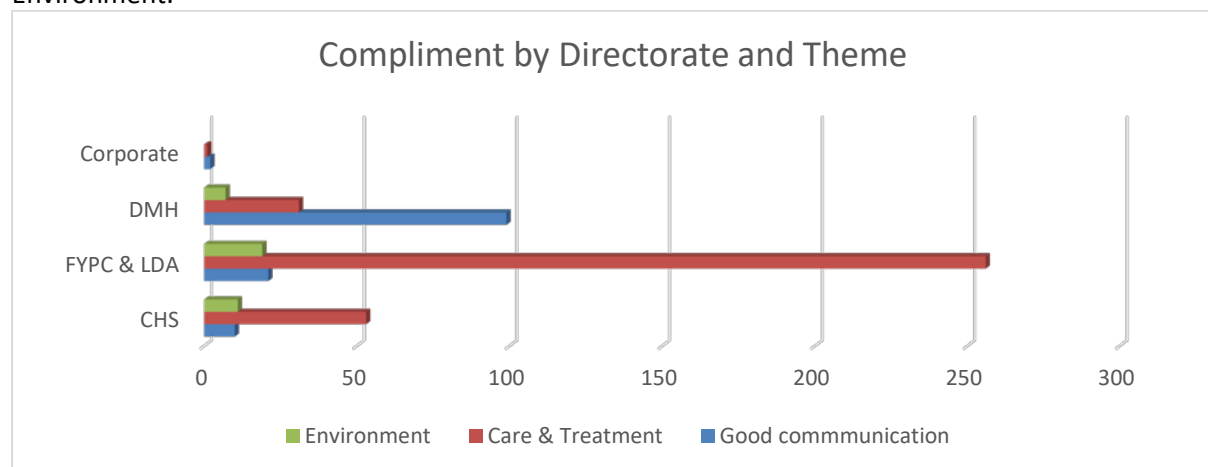
Those who participated felt that there was a lack of SMART actions agreed as part of the resolution to the complaint, with little to no evidence of learning, along with the inappropriate use of clinical language. There were conflicting views regarding the number of “sorry” and how long a response should be, however, those present agreed that we could be learning and doing more following complainants getting in contact with us.

It was suggested that more local resolution meetings could help ensure the details of the investigation were provided to the complainant in a more informal environment, thus reducing the amount of time required to write and sign off responses, whilst focusing on shorter, less wordy responses and more SMART action plans. The feedback given has been provided to the services and presented to the Complaints Review Group for further consideration.

During the quarter the Trust received 17 MP Concerns/Enquiries which is the same as the last quarter. Of these 17, 15 related to services provided by our Families, Young People, Children and Learning Disability and Autism directorate and were in relation to waiting times for appointments for both CAMHS and Community Paediatric Services. 2 were in relation to Community Health Services and related to care provision and care pathway.

### Compliments

686 compliments were received in the quarter, this equated to 64% of all feedback received (excluding FFT feedback). This is a substantial increase in the number of compliments being recorded with an increase of 20%. This increase can be linked to the focus on the collection and review of positive experience as part of the Feedback into Action campaign and the work of the Change Leaders. It is important that staff and services can review and read the feedback provided about the care and positive experience they provide our patients and carers. The key themes for positive experience via compliments were Happy with Care and Treatment, Good Communication and Environment.



### Keys areas of concern

The increase in the number of complaints not being investigated and closed within the 40 working day timescale is an area of concern. This has been raised with directorates via their complaints review meetings as well as a wider discussion at the Complaints Review Group.

It is hoped that a focus on staff training in relation to PALS and Complaints will reduce the overall pressures on the areas which receive the highest numbers, thus allowing for cases to close within their agreed timeframes.

### Assurance

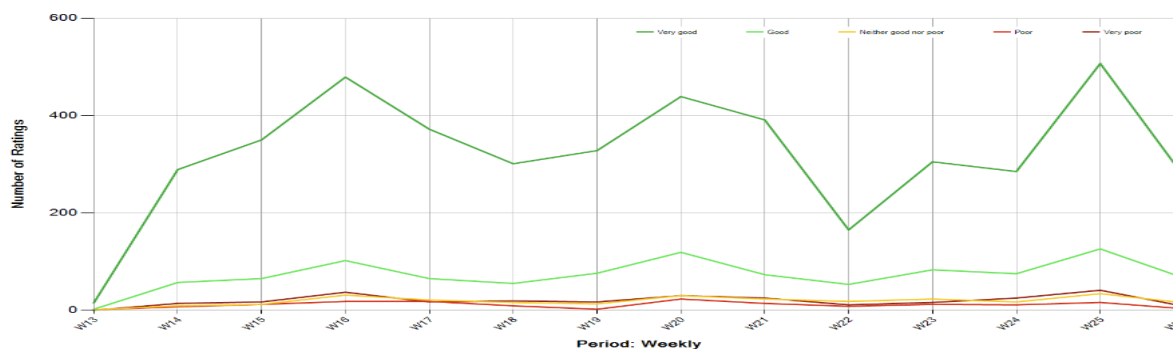
- The Complaints and PALS work reports into the Complaints Review group which then reports into the Quality Forum, Quality Assurance Committee and Trust board for assurance.

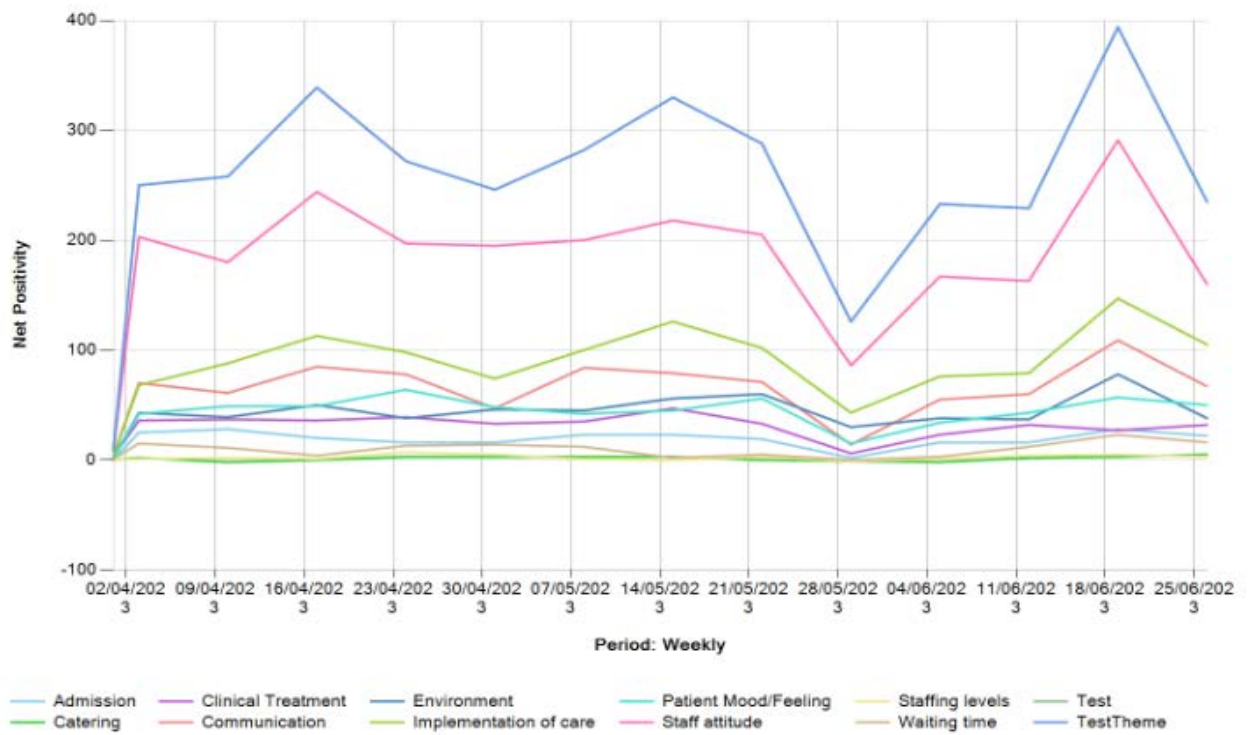
## Friends and Family Test and Patient Surveys

### Overview

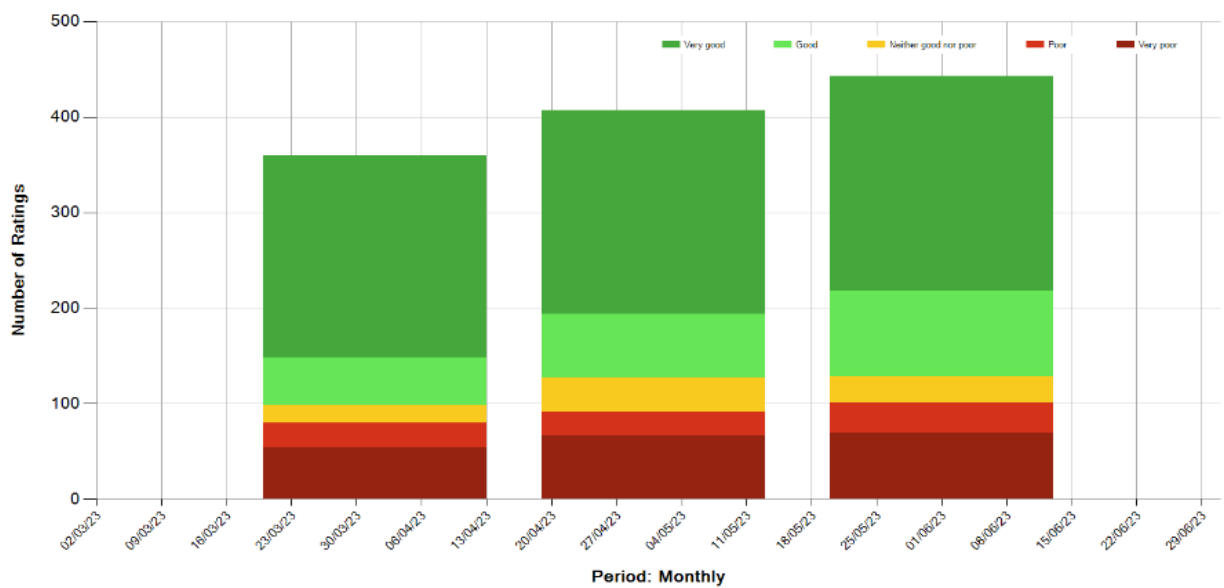
2023/24 continued the trend in terms of the number in responses to the FFT survey with 6291 individual responses received. This equates to a response rate of 10%. Satisfaction with services stayed the same as the previous quarter at 88% with 7% of responses reporting a poor experience. It is important to note that those who score a neutral experience (neither good nor poor) are not counted in the FFT figures for the quarter.

Rating Trend for the Quarter April to June 2023

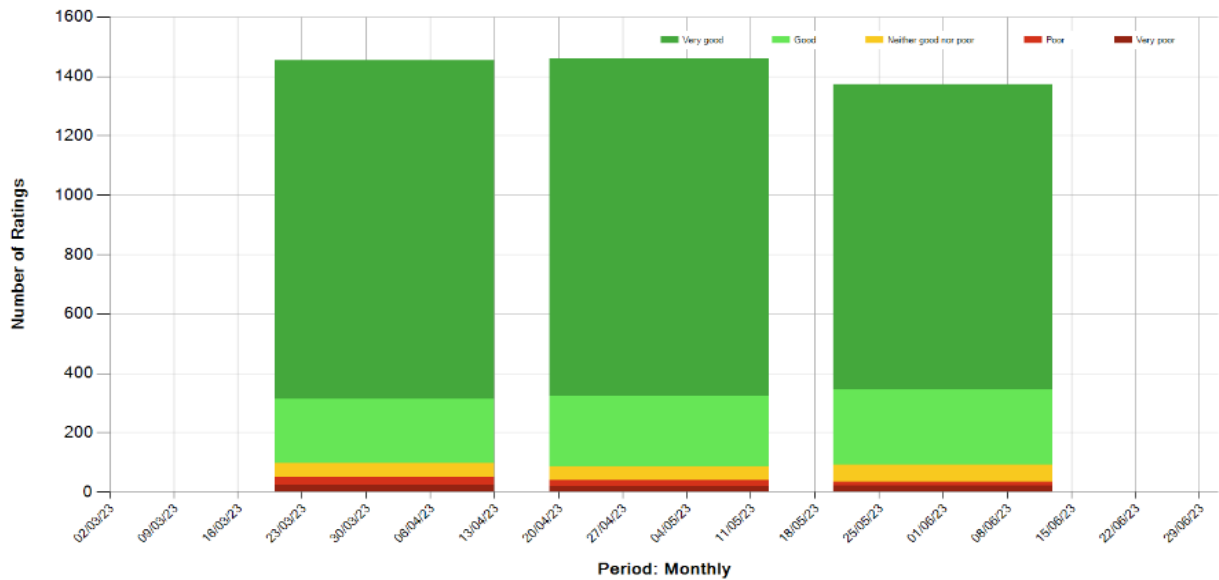




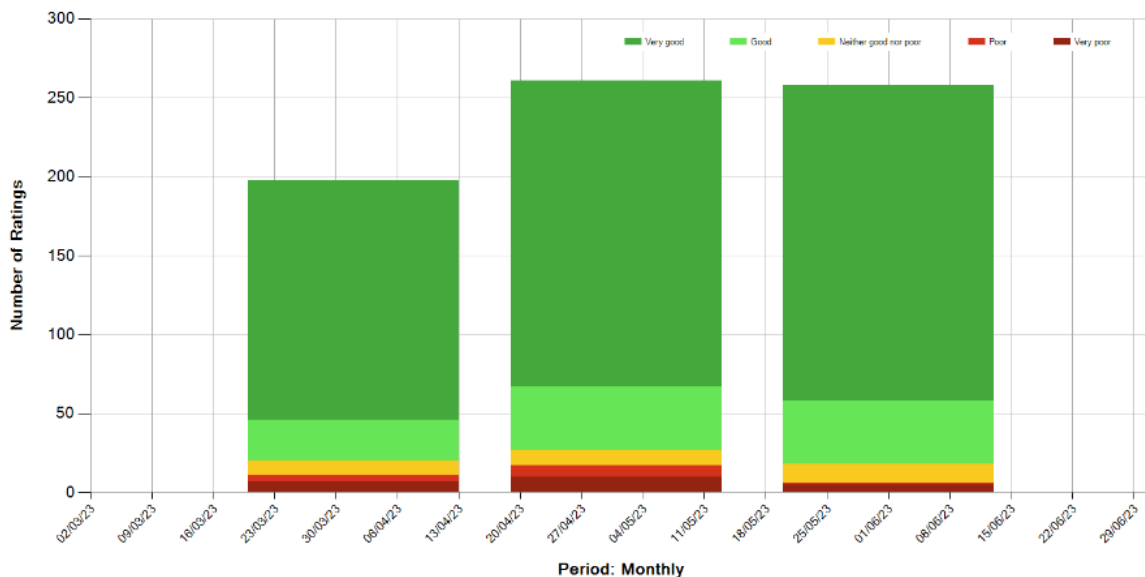
### Sentiment Analysis for Directorate of Mental Health for Quarter 1 23/24



### Sentiment Analysis for Community Health Services for Quarter 1 2023/24



## Sentiment Analysis for Families, Children and Young People and Learning Disabilities for Quarter 1 2023/24



### Key Areas of concern

There are no key areas of concern.

### Good news story – spotlight on feedback

Mental health services are very understanding and professional as their crisis team came out to me when I was struggling and gave me support when I needed it, I know it's still a battle with my mental health but with their support I will get through it so obviously I rate the service as very good Thank you!

Crisis Home Treatment and Liaison Services SPA Acute Assessment and CRHT|AMH Crisis Northwest Team

It is number 1, without this service there wouldn't be much help there for children who may have some form of mental health issues, thank for all you do.

Child and Adolescent Mental Health Services|CAMHS- Outpatient & Community CAMHS - Adolescent Group Work

Pleased with my consultation and examination. Good timekeeping . Nurse very pleasant and knowledgeable . Pleased with the outcome of my appointment.

Community Health Specialist Services  
Continence Nursing Service  
Continence Nursing Service



## 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

In June group of five staff and three service users were trained in the Experience Based Co Design approach. Experience Based Co Design is an approach that enables staff and patients (or other service users) to co-design services and/or care pathways, together in partnership. The approach is different to other service improvement techniques. The aim of the training is you create a core Community of Practice to roll out training across Trust. This will also include alignment to WelImproveQ and our Change Leaders.

Involvement Cafes are now in place for our Involvement Network members. The involvement cafes are for anyone interested in finding out more about our involvement offer and to connect with others from our involvement network. They are being delivered in partnership with John Lewis who provide a community space for the cafes along with vouchers for refreshments for those attending.



## Involvement Centre & Café at the Bradgate Unit has Reopened.

Monday 26th June saw the return of the Involvement Centre & café. to a patient facing service. A small drop in was held to mark the occasion of the centre returning to how it operated pre-covid. We are welcoming back inpatients, community patients, their, family, friends, and carers as well as remaining open to our own LPT staff and volunteers.



The Involvement Centre is currently organising a programme of activities which will all be on a drop-in basis. They will produce a weekly programme shortly which will be displayed inpatient areas.



### Talk and Listen Group

The Talk and Listen group are a group of adults with learning disabilities that meet monthly to conduct various group work looking to improve services. During the quarter, the group met and collaborated with staff on several topics including:

- How we can collaborate better with the Patient experience and involvement team to involve people with
- learning disabilities
- What training do both staff and patients need or could give to others to improve the voice of those with learning disabilities?
- A QI project, who came to ask for help with a survey about people with learning disabilities and voluntary or paid employment. We gave lots of ideas to make the survey better.



Changes are to be made to the survey and then bring it back to the group.

- The group also learned about the project “My Diabetes and Me,” some of the group have diabetes and are keen to get involved in the research project looking at an education programme to help people with learning disabilities to manage their diabetes better.

The Group have been back meeting face to face for a year now, and they undertook a review of what they have enjoyed and the things that they have done well over the year.

### Primary Progressive Aphasia (PPA) group launch

Two speech and language therapists have been working hard to create an informal café space for people with Primary Progressive Aphasia, for service users and for carers.

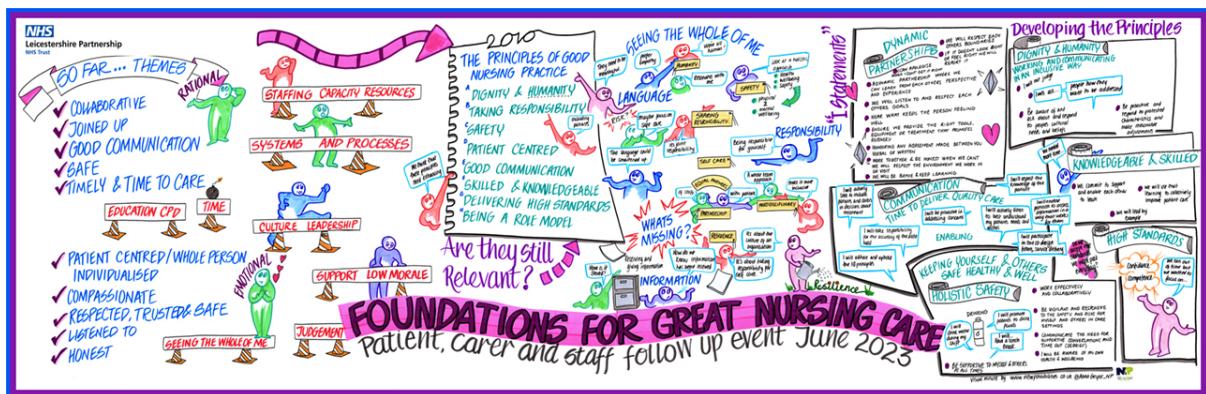


This has been a great initiative which has seen the donation of funding to fund the venue, the collaborative working with RDS charity (Rare Dementia Support) which has enabled them to create leaflets to promote the sessions, and refreshments to offer attendees.

The team have also developed a Newsletter to share with attendees and to encourage further participation in the group, and ideas from service users, family members and carers as to what people would like to see at these groups. The staff are keen for these sessions to be led by attendees and evolve based on their needs, although these sessions are in their infancy the group has already had ‘men and women in sheds’ deliver a creative session.

### Developing Nursing Principles for the Trust

During the quarter to engagement and co-design workshops have taken place with staff, patients and carers who have come together to review and create a new set of nursing principles for the Trust. The aim of the work is to create principles that will underpin all aspects of nursing care, along with a range of I Statements which will be created by patients and carers, and which can be used to them measure the impact of the principles. Outputs from this work are also feeding into the work on Shared Decision Making and the Trust’s Change Leader Programme. The aim is for a set of draft principles to be ready by the end of September 2023.



### Readers Panel

Our Readers Panel continues to be busy, reviewing patient information and leaflets on behalf of the Trust, providing a patient and carer perspective, and ensuring that we are communicating in a way that our patients and carers in a meaningful way. The group have reviewed over 15 pieces of patient information, from leaflets, letters to website contact, here are a few areas of their work:

- **Food draft Satisfaction Survey** – this newly revised survey is aimed at all inpatients receiving catering services from LPT.
- **Mental Health in Schools posters** - The LPT Mental Health support team in schools has asked for parental feedback on a test letter to parents as well as comments on leaflets aimed at the primary and teenage age groups.
- **TNP Leaflet – Tissue Viability Service** – This is an information leaflet regarding Vacuum assisted therapy for wound care from the Tissue Viability Service.
- **Self-Administration of Medication – leaflet**
- This information leaflet supports patients to administer their own medicines while in community hospitals (not mental health units).

To find out more about the work of our patients, service users and carers please take a look at our monthly Involvement Newsletters which can be found [here](#)

### **Carers – Developing our strategic approach in LPT**

The Executive Management Board approved a paper on adopting the Triangle of Care (TOC) for Carers. The Triangle of Care was created to improve engagement between carer and health professional for the benefit of the patient (service user). It aims to ensure appropriate carer inclusion - “Carers Included” – throughout the patient’s care journey.

The framework recognises providers who have committed to change through self-assessment of their existing services, and by implementation of the programme according to the Six Key Principles. The Triangle of Care is seen by the CQC as good evidence of an organisation in terms of well lead and how they value the involvement and engagement with patients, carers, and service users

A training review and redesign is underway in respect of the Ulearn Training module for LPT staff. This module/training is being re-developed with carers and staff in line with Carer and staff priorities following focus groups throughout Jan/Feb 2023, the LLR THINK family resources, videos and other system offers will thread throughout the module making it LLR specific.

LA Young Carers Awareness Training - 3 further sessions have been planned for this year for all NHS LLR staff. These have been promoted across the trust throughout June.

Recruitment to Lived Experience Partners (carer specific roles) has now commenced with three Carer Partners being recruited to support with the work across the Trust.

### **Responding to 360 Assurance Audit Recommendations**

Directorate Patient and Carer Experience Groups (PCEG) have now been established across the Trust. All Groups now have an agreed Terms of Reference. It is proposed that each group will also have Lived Experience Partners join them once they are recruited into the Trust. Initial codesign meeting has taken place within DMH with staff and service users and carers to establish co-production groups. It has been agreed that 9 individual groups will be established, all being co-chaired by a Lived Experience Partner and Service Lead. All groups will report into the directorate-level patient and carer experience group. All directorate level PCEG Groups will report into the quarterly held Corporate Patient and Carer Experience Group.

### **Lived Experience Leadership Framework**

Recruitment to our Lived Experience Partners has taken place over the quarter. There were a range of roles which we were recruiting to including:

- 2 Patient Safety Partners
- 4 People's Council Lived Experience Partners
- 3 Partners for each directorate (we have recruited additional Partners to these roles)
- 4 Partners to work with the Corporate Patient Experience and Involvement Team

38 applications were received for the roles with 16 candidates being successful in being offered Partner roles. Recruitment paperwork and checks will be taking place over the next few weeks, via a specific Bank recruitment process designed by the Jay Patel and the Bank Team. It is hoped that all Partners will be in place by the end of September 2023 and will be undertaking their induction into the Trust.

### The People's Council

The Peoples Council met in July. This was the first meeting of the newly formed Council with those key members who had agreed to continue in their roles. At the meeting the Council agreed that Council priorities needed to align to the Trust's Step up to Great priorities. It was also noted that the role of the Council is not govern the delivery of the priorities but to receive assurance on specific areas, ensuring that the Trust is listening and responding, addressing, and considering health inequalities and taking an evidence-based approach to this. This would be informed via the receipt of the Quarterly Patient Experience and Involvement (including Complaints) Report.

The Council have agreed that their first priority area would be to look at the ongoing issue in terms of poor experience reported through complaints and concerns, which related to communication. The Council will be holding a Communication Summit in October 2023 where they will review patient experience data along with presentations on several programmes of work underway towards addressing these concerns. Following the Summit, the Council will agree on what areas communication they will want to focus on.

The Council will also be attending the Trust Board Development Session in August to meet with the Board and consider with the Board how to achieve collective impact.

### LPT Youth Advisory Board (YAB)



During the Quarter the YAB have continued to meet weekly and engaged with the following projects, guests, and agendas. The new YAB recruitment poster advertising YAB to young people has been created by the group.

- Rutland County Council Andrea Tyler presented to the group the ARNA (Anxiety Related Non-Attendance) Tool that has been developed within Rutland County Council for young people struggling in school. The group provided feedback and were unanimously impressed with the thorough form and information collection of this tool, it was shared that CAMHS services have also reviewed this. The group felt that the type of questions asked could be used in MH services when accessing support on reflection of what they have completed or been asked previously.

- Research MH Naomi Williams attended YAB to present paid research opportunities for young people around academic research underway to improve mental health services for people with autism or learning difficulties. This piece of work is being conducted through Warwick university benefiting young people across the midlands.
- CAMHS Psychology and MHST Patient Information YAB Involvement- YAB have contributed to a session with CAMHS psychologist Dr Melina Throuvala supporting EMDR leaflets for young people and families, the group had ideas to improve the leaflets but recognised how professional and well informed these documents were. The group have also virtually reviewed a MHST young person leaflet throughout June, supporting work of the LPT Reader Panel.

Outcomes of previous YAB involvement - YAB Said We did.....

Claire Recordon from DHU returned to YAB to share the new mental health self-referral website for 12- to 18-year-olds. Claire had worked with YAB 8 months ago to get ideas for setting up and designing the website. (My Self-Referral Website <https://www.myselfreferral-llr.nhs.uk/> )

What has happened since working with the YAB:

- The YAB's ideas and opinions had helped shape the website – colours, name, logo, and content
- The website is now live and has already received 80 referrals in its first two weeks.
- It has opened opportunities for young people who would not have got to their GP to refer themselves to mental health services.

During this session the YAB had further ideas for more improvements which are being taken back to the team at DHU for consideration.

### **LOROS & UJALA (LPT INTERPRETING SERVICES)– Joint Project September 2022 - July 2023**

Dr Linda Birt & Professor Christina Faull from LOROS approached LPT in September 2022 to seek input and guidance around Working with interpreters in end-of life care: Equity in communication outcomes.

A series of workshops including staff from LOROS. patient advocates, relatives and interpreters from Ujala were organised in January and February which resulted in Professor Christina Faull developing a training pack for clinical staff. Professor Faull also recorded a question-and-answer session with Bini Gataure from Leicestershire Partnership NHS Trust addressing specific issues around working with interpreters. LPT guidance on interpreter usage was also shared with LOROS.

As a gesture of reciprocity, Professor Faull arranged and facilitated 2 training sessions for interpreters from LPT offering a range of languages. These training sessions were run by LOROS doctors on LOROS premises and interpreters who attended were awarded a certificate. The sessions addressed the expectations of clinicians from interpreted sessions, technical jargon and support for interpreters following end of life care visits. 50 interpreters from LPT attended the sessions and found them extremely useful.

As a result of links made in this project, it is hoped that the interpreting services at LPT and LOROS will continue to work closely together in the coming year with more involvement from LPT in the training of new LOROS staff and possibly an eLearning module for interpreters so that a greater number of interpreters are able to benefit from the tailored training.

### **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

|   |  |     |
|---|--|-----|
| <b>For Board and Board Committees:</b>  | Trust Board  |     |
| <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>  | 15.09.2023   |     |
| <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><br>If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e., assured/ partially assured / not assured:<br>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 | Patient and Carer Experience Group, 7 <sup>th</sup> September 2023 |     |
|   | Quality Forum, 14 <sup>th</sup> September 2023                     |     |
|   | Assured  |     |
|   |  |     |
| <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   |     |
|   | 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>  |  |     |
| <b>False and misleading information (FOMI) considerations:</b>  |  |     |
| <b>Positive confirmation that the content does not risk the safety of patients or the public</b>  |  |     |
| <b>Equality considerations:</b>   |  |     |

*Version 1.0*