

Public Session

**PATIENT/PUBLIC ENGAGEMENT
AND EXPERIENCE REPORT**

NHS ROTHERHAM CCG

4th NOVEMBER 2015

CONTENTS

1.	WHAT WE ARE HEARING.....	3
2.	FRIENDS AND FAMILY TEST (FFT)	3
3.	OTHER WORK AND CONTACTS.....	5

NHS ROTHERHAM

1. WHAT WE ARE HEARING...

Generally very positive stories through Patient Opinion and NHS Choices

Healthwatch

Healthwatch tell us that people are generally positive about health services, 61% of comments on treatment and care are positive, and 67% of comments on staff attitude are positive. However, people continue to struggle with conflicting advice on the right way to access services:-

"My mother, who was having problems with her catheter, was badly advised to go to A&E when due to the pain she was experiencing waiting there she returned home without treatment. However, when the nurse called the practice for an appointment, the GP advised her to go to A&E instead when a check up at the surgery might have resolved the problem and thus avoided the long wait"

GP access also continues to be an issue for some patients:

"Told that you cannot book appointments more than 14 days in advance. So what you end up having is everyone on a morning ringing up for emergency day appointments and also ringing up early to get appointments in 14 days time."

In addition, Healthwatch are working with the local transgender community on access to specialist services, and are raising concerns about service thresholds for people with a learning disability.

2. FRIENDS AND FAMILY TEST (FFT)

2.1 National Headlines – data now summarised as one page infographic

<http://www.england.nhs.uk/wp-content/uploads/2015/10/fft-summary-infographic-aug15.pdf>

Following a review undertaken by NHS England, the Lead Official for Statistics has concluded that FFT data should not be classed as Official Statistics. Therefore all FFT data (including current and historic acute and staff data) can now be found here, this will be updated monthly on one single day with the stated aim of providing a single clear and complete picture of monthly FFT data from all FFT care setting. <http://www.england.nhs.uk/ourwork/pe/fft/friends-and-family-test-data/>

2.2 Regional overview for August

- The data for A&E clearly shows the impact of organisations using SMS messaging and other bought in support systems to collect data; these are predominantly large city based hospital groups, and the collection rates are very much higher
- TRFT generally compares well across most areas with similar organisations; and performs particularly well in maternity data, both in response rates and positivity
- Mental health data response rates are similar and low across the region; RDASH demonstrates the lowest levels of positivity
- Staff FFT; TRFT has the lowest regional positivity in both areas (recommending the trust for care and as a place to work).

2.3 TRFT

September data – this is made available in advance of the nationally published statistics

Overall 3,404 positive responses; 75 negative responses

- Inpatients 39.5% response rate (890 comments) 97% positive over all for inpatients, with only A4 less than 20% response rates. All wards had positive ratings of 93% or more.
- Day cases had 359 responses (65% response rate); positivity overall was 99%.
- A&E – 9.5% response rate (429 responses), 85% positive.

- Community services – 525 responses, 97% positive overall; only School Nursing had a positive rating lower than 90%.
- Maternity – 42% response rate (353 responses), positivity is 99%.
- Outpatients – 995 responses; 97% positive; no clinics with rates over 10 responses had a positivity rate below 90%; fracture clinic had a rating of 90%.

A substantial number of comments refer to waiting times, especially in A&E, as of the beginning of October actions are already in place and noted by the bi weekly FFT steering group. While acknowledging the disruption of the new build, actions also include:-

- new triage training in place.
- adverts out for more medical staff.
- mechanisms to keep patients better informed of waiting times.
- staffing levels being revised and new ways of working implemented.

2.4 Rotherham GP Practice data - August

- No data submitted by 7 practices in August (the number is usually around the same, the practices vary).
- 11 practices submitted less than 10 responses.
- Note that other practices that often have low positivity either did not submit any data, or submitted such low numbers that they have been discarded in this respect
- Response rates overall in August have been boosted by increased activity in a small number of practices; most maintain similar rates of response.

Currently, we have no access to free text data comments to identify the issues that patients are raising, and the actions practices are taking to ameliorate these issues.

Jan	Feb	March	April	May	June	July	August
1448	1142	741	864	608	818	752	867

2.5 Mental Health/RDASH

The responses submitted by RDASH from Rotherham Patients remains constant but low; at this level the data received is not sufficiently robust to be particularly useful. The number of responses has been raised at quality meetings.

	September	August	July	(June)	(May)
Totals	330	(394)	(402)	(389)	(319)
Rotherham	80	(82)	(97)	(82)	(54)

Free text comments have been made available for the period May – September 2015, and demonstrate a lot of satisfaction, and particularly where people note that individual staff have made a real difference to their lives. Very high level analysis of these (omitting individual issues) demonstrate the following themes.

There are many comments month on month about access including;

- Waiting a long time in the system.
- Being bounced round the system.
- Waiting for appointments; faster access wanted.
- Enough of a service – lots of comments about longer sessions, more sessions, more visits; more contact; more staff offering 1:1 on inpatient wards.

Information:

- Directions and where to park mentioned repeatedly.
- What to expect also mentioned several times, ie before people get a service; also for family.

Actions taken to resolve these issues will be followed up with the provider.

2.6 Ambulance data

Responses remain low, particularly across Yorkshire; YAS submitted 7 responses for passenger transport from an eligible population of over 44,000 and response for 'see and treat' from an eligible population of almost 14,000.

3. OTHER WORK AND CONTACTS

- Preparation for the **November Engagement Event** – The Changing Face of GP Services - Invitations have been widely circulated, and booking is going well for this event; which will involve 2 externally facilitated sessions.
- **PPG meeting** took place in September, focusing on GP services. The next one will be Tuesday 1st December at Carlton Park Hotel.
- **Reader Group** – has been used twice, to test out a privacy statement and a medicines management patient information leaflet.
- **Support to Mental Health projects**
 - Working with commissioning leads to support voluntary sector projects in the CAMHS funding streams.
 - Support to the consultation process around transforming Adult Mental Health Services with RDASH.
 - Highlighting the new assurance process that replaces the Gateway process, and ensuring steps are being taken to follow this.
 - Helping to support the commissioning process for a complex patient.
- **Community involvement**
 - Ongoing work with Rotherham Parent Forum, to ensure they inform and engage with several workstreams.
 - Health Network – supporting the wind down of the organisation and appropriate transfer of remaining assets.
 - Supporting the reinvigoration of a Carers Forum, and establishing a new constitution.
 - Rotherham Older People's Forum - working with the group to produce a report on older people and crisis (available shortly).
 - Armed Forces Community Covenant – feeding into this refocused group as requested.
 - Contact made with the BME conversation club at REMA, which will be followed during October; reaching very overlooked individuals.
 - Young People's Parliament and Youth Cabinet- attending their manifesto launch.
- **Healthwatch**
 - Ensuring we share information, and working with Healthwatch on the planned event in November.
- **Young People's Information Card** – support to developing this project; together with the lead officer, it will be presented back to young people at their November Voice event.

- **Working Together** – work with Communications and across South Yorkshire to identify issues and actions for the Working Together programme, initially focusing on Children’s surgery and stroke care.
- **Corporate issues**
 - Preparation for and support to the Engagement and Communication sub-committee, on 18th November.
 - Engagement activity mapping has been comprehensively updated and presented to SCE and the Engagement & Communications sub-committee.
- **Working Voices** – a survey aimed at –overlooked- people in work has been drafted, and will be piloted in the near future.
- **GPs and PPGs** – a survey has been completed and a report compiled.

Sue Cassin
Chief Nurse

Helen Wyatt
Patient and Public Engagement Manager

November 2015