

Trust Board Agenda Item 200/06

Date of Meeting: 19th October 2006

Title of Agenda Item and Number: Patient Services Progress Report

Author: Gary Etheridge, Chief Nurse, Director of Patient Services, Quality & Risk

Person Presenting Item To The Board: Gary Etheridge, Chief Nurse, Director of Patient Services, Quality & Risk

Summary:

The Patient Services Directorate was established on 31st July 2006 and comprises of Patient Advocacy & Liaison Service (PALS), Spiritual and Pastoral Care, Volunteers, Patient Affairs and Patient and Public Involvement.

This report provides the first update on the workstreams progressed under the umbrella of Patient Services.

Item Previously Considered By: Clinical Governance Committee

Suggested Time For This Item: 10-15 minutes

Proposed Board Resolution: To Note Contents
(E.g. to agree, to receive, to note)

Report From: Chief Nurse/Director of Patient Services, Quality & Risk
To: Trust Board, 19th October 2006
Subject: Patient Services Progress Report
Action: To Note Contents

SUMMARY

1. The Patient Services Directorate comprising of PALS, Spiritual and Pastoral Care, Volunteers, Patient Affairs and Patient and Public Involvement, was established on the 31st July 2006 and forms part of the Corporate Nursing, Quality & Risk Division. The Executive Lead responsible for this Directorate is the Chief Nurse/Director of Patient Services, Quality & Risk. Operational management lies with the Head of Patient Services who reports to the Assistant Director of Patient Services, Quality and Risk.
2. The first draft of a Patient Services Strategy has been produced and has been circulated for consideration both internally and externally. External sponsorship is currently being sought by the Chief Nurse to officially launch the Strategy in Spring 2007.
3. Under the Chairmanship of the Trust's Chief Nurse, a Patient Survey Group has been established. Terms of Reference are attached in Annex 1. A detailed action plan has been developed in order to progress the findings of the National Survey conducted in Autumn 2005 and is available on request from the Chief Nurse's office.

The Trust is currently undergoing a repeat of the 2005 National Inpatient Survey using the month of August 2006 for its patient sample. Quality Health has again been chosen by the Trust as our approved contractor. This survey will be carried out from September to December 2006 using a core questionnaire developed by the Picker Institute for the Healthcare Commission. The areas covered in this current survey are around admission to hospital, emergency care, waiting list or planned admission, the hospital and ward, Doctors, Nurses, care and treatment, operations and procedures, leaving hospital, together with a section containing general and 'about you' questions.

4. The Head of Patient Services is currently working with Dr Sarah Hill, Consultant Pathologist, (designated individual) and David Budd, Laboratory Manager (person designated), in ensuring that the Trust is compliant with the Human Tissue Act, 1961 and the requirements of the Human Tissue Authority. The primary objective in this respect will be to ensure that the Trust has a deemed licence for all post mortems and retained tissue and to develop further policies and procedures both general and department specific to meet the standards of the Human Tissue Authority.
5. A Bereavement Workshop established in April 2006 ensures that clinical and non-clinical staff are fully informed of all aspects of bereavement and its processes. It is envisaged that these workshops will be carried out two-three times during 2007, spread throughout the year. Additionally, a lunchtime training session on the post mortem processes for Doctors in training has also taken place with the Coroner for Hertfordshire presenting together with the Trust's Pathologists.

6. The Head of Patient Services is currently reviewing the operational management of the Volunteers Managers across the Trust. Job descriptions have been reviewed ensuring consistency in the management of Volunteers Trust wide. Consistency has also been aided by the production of a new Volunteers Policy, which is currently in draft, along with a new Trust wide Volunteers database, and the standardisation of all paperwork and resultant processes.
7. The Volunteers Managers are currently writing a new Recruitment and Retention Policy for Volunteers. This is required as the Trust relies more on Volunteers to help support services. The Policy will address the need for all Volunteers to have CRB checks although this is already happening in practice. With the recruitment of more Volunteers into the Trust it is planned to have the main reception at Watford supported with Volunteers meeting and greeting patients and the public.
8. A quarterly magazine **'Have I Got News for You'** is being developed by the Head of Patient Services in response to a request by Volunteers to ensure that they are fully informed of what is happening within the Trust.
9. The PALS Office at Hemel Hempstead has been secured with a view to reinstating this service at HHGH and SACH. Volunteers will man this service under the management of the Volunteers Manager at HHGH.
10. A Patient Services website and intranet site is currently being developed. The main purpose of the site is to ensure that staff and members of the public can learn more about the work being carried out by these departments. These sites will have links to the National Patient Surveys results and subsequent action plans, all work involving patient and public involvement and an opportunity to complete application forms to apply to be a Patient Representative or a Volunteer.
11. The Head of Patient Services continues to work alongside the Trust's Communications Department ensuring that the Patients' Panel, Patient & Public Involvement Forums and all external key stakeholders are kept fully informed of the current consultations around *'Investing in your Health'* and *'Delivering a Healthy Future'*, as well as maintaining existing communication in relation to service development and improvements around Patient and Public Involvement.
12. The Patients' Panel continues to be involved in various Trust wide committees and meetings such as Clinical Governance, Drugs & Therapeutics, Medicines Management, Clinical Excellence Awards, Internal PEAT, PatientPower, Investing in your Health (IiYH) and the Internal Hospital Groups (IHUGS), together with the Complaints Advisory, Patient Survey and Site Management Group's. The Panel also continues to look at all patient information to ensure that it is 'user friendly'.

Patient Panel members are actively involved in auditing the Essence of Care benchmarks and take part in Observation of Care days.

The Trust Board is asked to note the above.

Gary Etheridge
Chief Nurse, Director of Patient Services, Quality & Risk

October 2006

ANNEX 1

PATIENT SURVEY GROUP

TERMS OF REFERENCE

Status:	Sub-group of the Clinical Governance Committee
Chair:	Chief Nurse/Director of Patient Services, Quality & Risk
Membership:	Head of Patient Services Patient Affairs Manager Hospital Chaplain Corporate Nursing Practice Development Nurse Modern Matron Representative Divisional Manager Representative Facilities Representative Medirest Representative Lead Nurse, Infection Control Patient & Public Involvement Forum Representative Patient Panel Representative Clinical Nurse Specialist, Acute Pain Medical Representative Trust Communications Department Representative Chief Pharmacist

If members cannot attend the meeting an appropriate Deputy must attend on their behalf

Frequency of Meetings: 6 weekly

Quorum: 7

Purpose of the Group:

To ensure that the Trust takes forward recommendations highlighted in National/Local Patient Surveys.

The group will work collaboratively and proactively within the Trust, both with staff members and externally with the Patient & Public Involvement Forum and Patients' Panel members, in an effort to improve services for patients, carers and members of the public.

Remit of the Group:

- ◆ To identify and analyse issues and key areas that are highlighted through Patient Surveys/feedback.
- ◆ To share and promote good practice and enable communication across site/staff groups as well as to external communities, patients, carers and the public through the Patient and Public Involvement Forums and Patients' Panel.

- ◆ To develop Patient Survey action plans to address areas of concern or areas which have shown little or no improvement since the last survey was undertaken.
- ◆ To promote a culture that strives to continuously improve the patient experience.
- ◆ To communicate through Divisional Managers, Communications Department, Patient and Public Involvement Forums and the Patients' Panel what actions are being taken to address issues raised in National/Local Patient Surveys.
- ◆ To report progress on the delivery of the targets/actions outlined in the National/Local Patient Survey Action Plans to the Trust Board / Executive Team
- ◆ Ensure the group link with existing Government/Department of Health, Local and Trust initiatives and directives:
 - NHS Plan
 - Section 11 of the Health and Social Care Act, 2001
 - Patient Choice
 - Standards for Better Health
 - Essence of Care Framework
 - Internal PEAT Reviews

Reporting Arrangements:

The Group will meet on a 6 weekly basis with Minutes provided to the Clinical Governance Committee.

Terms of Reference developed in June 2006

Terms of Reference ratified by the Patient Survey Group on 22nd August 2006

Terms of Reference to be reviewed in August 2007