

**UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST
COUNCIL OF GOVERNORS
THURSDAY 20 MAY 2021**

Title:	PATIENT EXPERIENCE STRATEGY
Responsible Director:	Lisa Stalley-Green, Chief Nurse
Contact:	Margaret Garbett, Director of Nursing

Purpose:	To present the Patient Experience Strategy to the COUNCIL OF GOVERNORS
Confidentiality Level & Reason:	NoneBoard
Board Assurance Framework Ref: / Strategy Implementation Plan Ref:	SIP - #3 Provide the highest quality of care to patients through a comprehensive quality improvement programme
Key Issues Summary:	<ul style="list-style-type: none"> • The draft strategy is a culmination of development sessions that commenced prior to COVID and included input from staff, Governors and patients. • It also takes into account regulatory and compliance requirements as well as what patients and relatives tell us matters to them via feedback and complaints. • It is written in an easy to read format to enable both staff and patients to readily understand our patient experience ethos and direction. • A full action plan will be developed to support the strategy implementation, the monitoring of which will be via the Patient Experience Group. • The strategy focuses on four principles: practical patient experience, patient experience culture, supporting families and carers, and community together and includes Trust membership.
Recommendations:	The COUNCIL OF GOVERNORS is asked to receive and approve the Patient Experience Strategy.

Signed: Margaret Garbett	Date: 12 MAY 2021
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Patient Experience Strategy 2021-2024

VISION: Experience defined by you

Ensuring our patients have the best experience alongside excellent clinical care aids recovery and wellbeing. We are committed to a programme of continual improvement by listening, learning and acting on feedback and involving our communities in our work.

Utilising four key principles below, our ambition is to support the Trust vision to Build Healthier Lives through improved experience.



Objectives:

Practical patient experience	Patient Experience Culture
<ul style="list-style-type: none"> • Ensure all systems and processes in place to receive, analyse (investigate) and report on feedback (or complaints) are robust, auditable and insightful and measure both what is important to patients as well as compliance. • Embed different ways to engage and collaborate with our diverse communities. • Increase the use of patient stories, targeted at themes from feedback (including health inequalities) to add context and weight to drive improvement. • Embed a cycle to continuously identify themes and trends for improvement across elements of people, places and processes. • Ensure an infrastructure for reflection and learning from feedback is in place that evidences the impact of the patient voice. • Develop a set of standards to guide staff based on what patients tell us that good looks like from their perspective. • Ensure that the patient experience information is available through a number of means and is clear and understandable, as tested by patients (including accessible user friendly versions). • Sharing more 'you said we did' to demonstrate the value of feedback to patients and families and encourage more. 	<ul style="list-style-type: none"> • Introduce Divisional Patient Experience Groups for detailed oversight and ownership of the patient experience at a local level. • Undertake cultural measurement and implement actions to ensure that the Trust and its staff are responsive to patients and seek to provide the best experience. • Compare staff experience with patient experience to identify areas requiring support. • Develop and deliver patient experience training and set expectations/standards. • Build upon the good practice of including a patient experience element into interviews (already commenced in senior nursing posts). • Ensure that all staff take ownership of and are empowered to deal with issues raised by patients, but able to provide information on how to complain if required. • Reduce any fear of feedback so that it is seen as an opportunity. • Embedding a culture where the patient journey is made easy for the user by involving patients in its design and listening to their feedback.
Supporting carers	Community together
<ul style="list-style-type: none"> • Continue to roll out carer aware training to ensure that all staff are able to recognise, support and signpost carers. • Involving carers in care planning and listening to their expert knowledge; including carers who may not be next of kin. • Develop the Trust's offer for our Partners in Care and audit/ monitor use of the Partner in Care card. • Update and publicise standards for carers. • Work with partners across the health system to provide a consistent and cohesive service for carers. • Extend carers service to community, young carers and parent carers. • Welcome and listen to families/others important to a patient's wellbeing, valuing their experience and history with their loved ones in care delivery. 	<ul style="list-style-type: none"> • Ensure that all sections of our communities can access our services and have the opportunity to be listened to in order to feedback about their experience, including working with external partners. • Develop a Patient and Public Involvement toolkit and training to support staff to involve patients in service improvements/changes. • Increase the membership and representation of our Patient, Carer and Community Councils and agree annual work plans. • Measure and monitor that our feedback is representative and put actions in place to address any shortfall, including protected characteristics. • Map out the requirements for volunteering, identify gaps and ensure roles directly improve patient and staff experience. Add new, meaningful and innovative roles as the opportunity arises. • Place volunteers according to their skills and ensure they are well supported and fully competent to undertake the role. • Continue to work closely with Maternity Voices Partnership. • Maintain our membership levels and replace any churn. • Engage our membership in patient experience and involvement.

What will success look like?

- Working with patient partners is the norm and the patient and carer voice informs our service improvements.
- Our feedback data reflects communities and provides accessible and actionable insights.
- Experience efforts reach more broadly into the issues facing our communities.
- We are meeting and exceeding both our targets and patient expectations.
- Making dynamic and progressive change in the way we measure/analyse and report experience over time to address issues experienced by our local communities, improving experiences for all and supporting the Trust vision of building healthier lives.

How will we oversee this strategy and monitor progress?

This strategy will be monitored by the Patient Experience Group (PEG) which will oversee its implementation at its monthly meetings. The PEG will commission any additional task and finish groups deemed necessary for the delivery of this strategy. PEG reports monthly and Care Quality Group and Board to provide assurance. The strategy is supported by an operational implementation plan.

This strategy was developed with contributions from:

- Reviewing feedback and complaints
- Strategic discussion at the Patient Experience Group (including Governors)
- Strategic discussion at Senior Leadership Team (nursing)
- Governor seminar on patient experience and strategy development
- Big conversation discussion at the Patient, Carer and Community Councils (Birmingham Heartlands Hospital, Good Hope Hospital, Queen Elizabeth Hospital and Solihull hospital) about what matters to patients
- Reviewing national guidelines
- Undertaking the NHS Improvement Framework assessment tool

Margaret Garbett
Director of Nursing

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