



Patient & Resident Experience and Engagement Strategy

2022 – 2027

A strategy for the people we care for by the
people we care for

“I need my voice to be heard, and want to speak for others too. Everyone I meet is professional and has a smile. I am really looking forward to the future and working together.”

(Resident at the RHN)

I feel happy to have a say in creating a strategy that will help us all to live happily together. As this is home for us all it's very important we are seen as individuals and not just numbers.

(Resident at the RHN)

“I think that this hospital is fantastic. I've never in my life met so many people who care so much about me.

It doesn't take that much to listen to me but it makes such a difference”

(Patient at the RHN)

“Going into the RHN is like going into a five-star hotel with highly particularised care on a 24-hour basis.”

(Resident at the RHN)



1. Introduction

Our patients and residents who reside at the RHN come from all over the UK. We are one of the largest providers of specialist neuro-rehabilitation services for people with complex neuro disabilities in the UK.

We also provide specialist long term care, including for patients and residents with challenging behaviour, those who require our invasive ventilator service, and those with Huntington's Disease. We also have a Young Adults in patient unit. We provide specialised packages of care that can be spot purchased by Integrated Care Boards (ICBs) and we are also commissioned through NHS England (NHSE). Our contract with NHSE is for the provision of Level 1/2a specialist rehabilitation and Augmentative and Alternative Communication provision (AAC). AAC encompasses the communication methods to supplement speech or writing for those with temporary or permanent impairments in the production or comprehension of spoken or written language.

At the heart of our ethos as an organisation is the involvement of our patients, residents, their families and advocates to give them the best experience of care possible. We know that a positive experience during care leads to positive clinical outcomes. If a patient, resident feels listened to and involved in their care they will be better able to manage their own journey of care. Many of our patients and residents lack the mental capacity to make certain decisions about their care, and so it is important for us to always also listen to and engage effectively with their families and/or advocates when planning and providing care.

The Patient Engagement and Experience Strategy sets out the RHN's priorities to ensure the best possible experience for patients, residents, their families and advocates based on the following key principles:



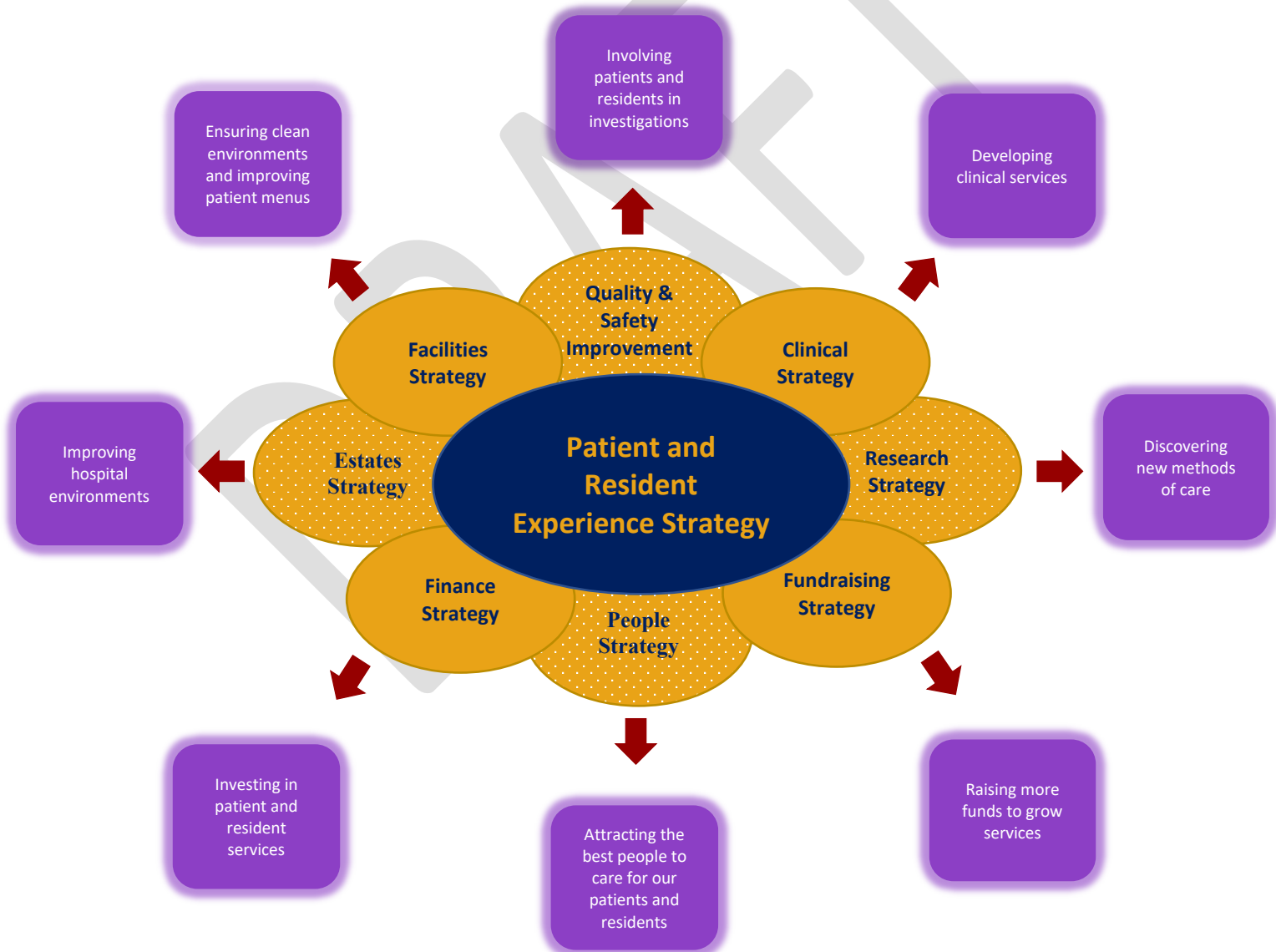


What do we mean by patient and resident experience and engagement?

By patient and resident experience and engagement, we mean taking every opportunity to hear from our patients, residents, their families and advocates, encouraging their active participation in co- designing and shaping the way the RHN provides care and services as well as engaging with them to understand what services they need. This includes involving patients and residents in decisions about their own care, and involving their family members and advocates for those without the mental capacity to make those decisions. It also involves seeking feedback about their experiences, and engaging with patients, residents, their families and advocates in planning future services. In this way we will make sure our services are delivering the care that people want and in the way that works best for them. We envisage a place where patients, residents, their families and advocates are the driving force of everything we do.

Links to other strategies

The Patient & Resident Experience and Engagement Strategy is intrinsically linked to other related strategies identified below.





Our Mission, Vision, Values and Key Priorities

Our mission

Providing outstanding care and empowering individuals with neuro-disability, enabling them to live their lives to their fullest potential

Our vision

We will be the national centre of excellence for neuro-disability

Our values



Seeing the whole person

taking an interest in every aspect of our patients, residents and each other



Willingness to learn

learning through education, experience and being open to new ideas



Delivery on promises

do what we say we will do, in the time and to the standard we promised



Honesty and integrity

to be open, truthful and professional at all times



Our key priorities of this strategy



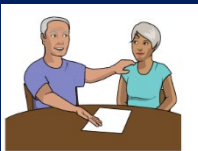
Listening

to what patients, residents, their families and advocates tell us about their experience of our services and what matters to them about the way we do things



Communicating

information and opportunity so that patients, residents, their families and advocates are better able to inform the decisions that may affect their own care (or the care of their loved ones), the services they use and the future direction for the RHN as a whole.



Supporting

patients, residents, their families and advocates in decisions about their care, the design of services they use and hospital strategies and policies.



Acting

on feedback from patients, residents, their families and advocates, as well as enabling them to drive change.

2. Where are we now?

In relation to our key priorities for patient and resident experience and engagement we currently have the following in place:



Listening

*Complaints, informal concerns and compliments
Discharge Friends & Family Test (Brain Injury Service)
Annual Patient / Relative Survey
'Tell us your views'
Experience of Care week
Matrons clinics*



Communicating

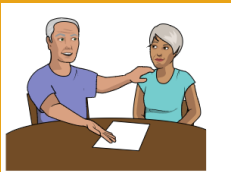
Information displayed on wards and around the hospital on:

- ✓ Notice boards.
- ✓ 'Take away' leaflets, booklets and documents.
- ✓ Signage around the hospital.

Information available on the RHN Internet site and social media.

Weekly CEO updates.

Annual Quality Account.



Supporting

Patient Representatives Committee

Information sharing working party

PLACE Audits

Catering Focus Group

Communicating with patients training

Speak up / whistleblowing



Acting

'You said - We did' on quality boards

Shared Learning and the Putney Board process

Building therapeutic relationships project

Personalising patients' and residents' rooms project

Quality improvement projects to improve care and experience:

- ✓ Diabetes care project
- ✓ HCA improvement and support project
- ✓ 1:1 care improvement project

Actions from serious incidents, formal complaints and informal concerns outcomes tracked and managed via an Actions Tracker



3. What could we do differently and how will we get there?

In relation to our key priorities for patient and resident experience and engagement we have identified the following opportunities:



Customer Service Training and Accreditation

Area of Opportunity: One theme in relation to complaints is poor communication.

Aim: To improve the way we communicate with people.

What we will do: We will ensure our staff have access to customer service training as standard.

How we will get there: The RHN will source customer service / communication training from a recognised body. The RHN will also gain accreditation in this area.

When we will get there: By 31 December 2024.

Improving Opportunity to Give Feedback

Area of Opportunity: We need other innovations in order to seek regular feedback from all patients, residents, their families and advocates.

Aim: To improve the ways we provide people with opportunities to give feedback.

What we will do: We will use more information technology to encourage more feedback from the people we care for. We will also ensure that electronic surveys are also available in traditional forms so that we do not isolate those less confident in using electronic formats.

How we will get there: We will introduce electronic feedback stations placed at specific locations in the hospital to enable service users to provide regular feedback on 'how was your visit today' and themed areas of care or service over time. We will also develop an audit on the Tendable audit application (app) to enable staff to regularly seek feedback from patients, residents, their families and advocates on 3 key regular questions and 3 other changeable questions around themes or issues that have been identified.

When we will get there: By 31 July 2025.



Improving How we get Feedback from Patients and Residents with Complexities in Relation to Communicating with Others

Area of Opportunity: For patients and residents who have complexities in relation to communicating with others we need to involve the SALT (Speech & Language Therapy) team more to gain more regular feedback. This is one of our main challenges.

Aim: To give those with complex communication needs more opportunity to give feedback.

What we will do: We will always consider patients and residents with complex communication needs when introducing new methods of gaining feedback.

How we will get there: When introducing electronic feedback stations or a patient / resident experience audit on the Tendable audit application (app) we will involve the SALT team to ensure that those with complex communication needs have the opportunity to give more regular feedback. This may include the use of the Tendable app, EPR and Power BI Reports to capture 'feedback in the moment'. We will also consider implementing 'observe and act' training provided by an NHS Community Trust as a method of capturing 'feedback in the moment'.

When we will get there: By 31 July 2025.



Information Displayed on Notice Boards

Area of Opportunity: Not all information displayed on notice boards is pertinent to the ward/service. Information displayed on notice boards are not always accessible for patients and residents to easily view.

Aim: To regularly review information we display on ward notice boards and to review their purpose and target audiences.

What we will do: We will review and improve our methods for ensuring that information displayed on ward notice boards is standardised and pertinent to the ward/service and up to date. We will also review who they should be aimed at (potentially more suitable for visitors). We will also review information displayed on TV screens to ensure that our patients and residents are our target audience.

How we will get there: We will complete a quality improvement project around ward notice boards and TV screens; and how they can be most effectively utilised. The project will include a review of Quality Board information, including 'You said - We did'. We will also link with the Communications, Information Technology and Fundraising teams to consider the introduction of a hospital radio system, further develop our use of podcasts and social media in communicating information to our patients and residents in a way that captures their interest.



When we will get there: By 31 December 2023.

Information for New Patients and Residents

Area of Opportunity: Current information booklets and leaflets for new patients and residents to the RHN have not been reviewed for some time and should be updated.

Aim: To periodically review new patient / resident information we provide on admission to the RHN and ensure it meets the needs of target audiences.

What we will do: We will review and improve our new patient / resident information ensuring it is standardised where possible and pertinent to the wards/services they relate to. We will also ensure they are revisited periodically, to ensure they remain pertinent to our services and that there is opportunity for further improvement.

How we will get there: We will complete a quality improvement project around new patient / resident information and how they can be most effective. The project will include a review of Quality Board information, including 'You said - We did'. We will also link with the Communications, Information Technology and Fundraising teams to consider the use of a hospital radio system, podcasts, website and social media in assisting new patients and residents to orientate to the hospital in a way that captures their interest.

When we will get there: By 31 December 2023.

Signage Around the Hospital

Area of Opportunity: Signage around the hospital may not always help the people we care for to get to where they want to be, especially when changes are made.

Aim: To ensure that signage around the hospital is always helpful to the people we care for.

What we will do: We will review and improve the methods we use to ensure that people can always easily find their way.

How we will get there: We will work together to regularly review the signage around the hospital and ensure it is simple and helpful.

When we will get there: By 31 July 2023.



Supporting

Capturing Patients' and Residents' Stories

Area of Opportunity: Understanding more about our patients and residents as individuals can help us understand how best to support them, not just in everyday care but also in shaping services for the future.

Aim: To support patients, residents, their families and advocates in showing us what matters to them.

What we will do: We will support patients, residents, their families and advocates to capture their stories.

How we will get there: Their stories will be included in Board meetings and staff induction. This will be a welcome from patients and residents to inform staff what is important to them.

When we will get there: By 31 July 2024.

Giving Opportunity to Patients' and Residents' to be Involved in Shared Learning.

Area of Opportunity: We share learning across the hospital about serious incidents, formal complaints and informal concerns using the Putney Board shared learning process. A patient was recently supported to write a shared learning document and enjoyed the experience.

Aim: To support patients, residents, their families and advocates in being more involved in the shared learning process and in writing the learning narratives from their own perspectives. Reinforcing their messages through Putney Board discussions that will be led by patients or on their behalf through their families and advocates.

What we will do: We will offer them opportunities to create shared learning documents from their experiences and opportunities to be involved in leading Putney Board huddles where they are discussed.

How we will get there: Actions from serious incidents, formal complaints and informal concerns outcomes are tracked and managed via the Actions Tracker. To include a column in the tracker to indicate if shared learning has been completed and whether patients, residents, their families and advocates have been involved in drafting or leading shared learning documents and opportunities to be involved in Putney Board huddles.

When we will get there: By 31 December 2023.



Giving Opportunities to Patients and Residents to Lead Quality Improvement Projects across the RHN

Area of Opportunity: As a part of learning from feedback, patients and residents could be offered the opportunity to lead on quality improvement projects or their families and advocates provide leadership on their behalf.

Aim: To support patients, residents, their families and advocates to lead quality improvement projects as a part of learning from feedback.

What we will do: We will review our processes of learning from feedback so that it includes how we identify potential new projects and involve patients and residents in them. This will include patients, residents, their families and advocates leading on project development across the RHN with the support of the RHN staff.

How we will get there: We will build a process of identifying new projects and asking patients and residents to lead them into our complaints and feedback process.

When we will get there: By 30 June 2023.



Acting on Feedback

Area of Opportunity: Acting on Friends & Family Test results, annual patients and relatives survey results and other feedback could be completed in a more structured way.

Aim: To review and improve our methods of acting on feedback.

What we will do: We will review and improve our methods for acting on feedback so that it is more structured and better evidenced. Our patients, residents, their families and advocates will inform how we move forward.

How we will get there: We will complete a project to review and improve our methods of acting on feedback involving patients, residents, their families and advocates. The Patient Experience & Safety Officer (PESO) will lead on building a more structured process, working with service leads for them to identify and lead on actions from feedback. We will promote to staff the importance of confidentiality when a patient, resident, family member or advocate raises a concern.

When we will get there: By 31 December 2023.



Area of Opportunity: Reassuring patients, residents, family members and advocates that sharing their concerns and feedback will not impact negatively on care.

Aim: To improve our culture of encouraging and responding to feedback in a positive way.

What we will do: We will review and improve our methods for encouraging and responding to feedback positively, so that patients, residents, family members and advocates can feel reassured that when they raise a concern it will not impact negatively on care.

How we will get there: We will complete a project to promote to staff the importance of encouraging and responding to concerns and feedback positively. The Patient Experience & Safety Officer (PESO) will lead on promoting feedback to staff and producing communications to patients, residents, families and advocates that support our processes and positive responses to encouraging and receiving feedback.

When we will get there: By 31 December 2023.

Building Therapeutic Relationships

Area of Opportunity: This is a project to engage and involve patients, residents and their families in planning their care. It is also a way to gain feedback on their experiences and improve communication. It is currently in the developmental phase.

Aim: To take the project forward so we will review and improve the processes as it continues.

What we will do: We will take the project from the developmental phase to the completion phase.

How we will get there: We will ensure there are clear deadlines that are met.

When we will get there: By 31 December 2026.

Personalising Patients' and Residents' Rooms

Area of Opportunity: This is a project to make patients' and residents' rooms more personal and homely, including for those who may not have families or advocates who know them. It stalled during the pandemic due to restrictions on access to wards and patient rooms. It has now re-started and will progress with vigour.

Aim: To take the project forward so we will have an ongoing process in place to always support patients and residents in making their rooms personal.

What we will do: We will take the project from the developmental phase to the completion phase involving patients, residents, their families and advocates where able and not excluding those patients and residents who do not have families or advocates that really know them. We will include potential for decorating patients' and residents' rooms in preparation for seasonal, personal and religious celebrations.

How we will get there: We will ensure there are clear deadlines that are met.

When we will get there: By 31 December 2026.



Patient Representatives Committee (PRC)

Area of Opportunity: The functions and purpose of the PRC and the functions of the representatives could improve.

Aim: To improve the PRC and functions of the representatives.

What we will do: To review the PRC and representative's functions.

How we will get there: We will assess whether Patient Experience Panels could be introduced alongside the PRC and ensure that patient representatives are marketed as a 'go to'. We will also review the Committee's terms of reference and standing items on the agenda, considering whether an update in relation to implementing this strategy should be included. We will undertake this review in collaboration with the existing committee chair and we will work in collaboration with the new Integrated Care Board (ICB) leads to ensure that we link into wider system opportunities for the patients and residents that we serve.

When we will get there: By 31 December 2026.

DRAFT



“Patient experience was positive when patients and their families felt involved and understood what to expect in relation to their care. Patient experience was improved where staff treated patients with dignity and respect at all times.”

NHSE&I Patient Experience Improvement Framework 2018.

“Our purpose has never been clearer. In our assessments we will ensure that services actively take into account people’s rights and their unique perspectives on what matters to them...”

Ian Trenholm, Chief Executive of the Care Quality Commission, May 2021



Glossary of Terms:

EPR	Electronic Patient Record
HCA	Healthcare Assistant.
Power BI Report	A system where data can be collected electronically and generate a report.
PRC	Patient Representatives Committee.
Putney Board	This is a notice board displayed on each ward to show shared learning documents, ideas for improvement, ward quality improvement projects, successes and celebrations. Staff regularly come together at the board in a 'huddle' (group) to discuss shared learning and generate new ideas. They update progress on quality projects and highlight successes.
Quality Board	A notice board where information is displayed in relation to clinical care, such as pressure ulcers and falls. Low numbers often indicate good quality care.
SALT	Speech & Language Therapy
Tendable	This is a clinical audit tool to enable staff to collect information and submit it to a central system via a phone app.