

BOARD MEETING

24 May 2018

Paper Title: Review of Trust Board Patient Stories
Lead Director: Debra Gilderdale, Director of Operations & Nursing
Paper Author: Tracey Corner, Patient Experience Lead
Agenda Item: **9**
Presented For: Approval
Paper Category: Quality

Executive Summary:

The purpose of this paper is to review the Board story process and give an overview of key observations over the last 12 months. Patient Stories were introduced at Trust Board in February 2013, their purpose being to provide Board members with a greater understanding of the services we provide and a more personalised connection with our patients and carers.

Patient stories are a rich source of information for the Trust Board. They provide a personal connection to strategic decision making, however a refreshed approach was adopted to maintain value and enhance transparency regarding action taken.

A combination of patient, carer and partnership stories, together with learning from complaints will add a further dimension to the sharing of stories with the Trust Board.

Board / Committee Consideration

The Board is asked to approve the continued use of the updated approach to Trust Board stories implemented last year and consider:

- The benefits derived from patient stories and how this links into the Organisational values.
- The amended process incorporating learning from complaints stories linked to patient experience.
- The benefits of stories being shared at Quality and Safety Business Unit meetings to maximise learning.
- The impact of sharing stories with the media and on the Trust Website.
- How services can receive feedback after a story has been shared at Trust Board.

Recommendations:

That the Board considers the recommendations and agrees to:

- Continue with patient stories at Trust Board using the refreshed approach.
- Adopt the use of the Patient Story template with key learning and actions taken clearly articulated.
- Continue to use a wide range of communication tools to provide feedback to services and the Public.
- Publish stories on the Trust website as part of the Board papers.

Governance/Audit Trail:

Meetings where this item has previously been discussed (please mark with an X):					
Audit Committee		Quality & Safety Committee		Remuneration Committee	Finance, Business & Investment Committee
Executive Management Team	x	Directors		Chair of Committee Meetings	Mental Health Legislation Committee
Council of Governors					

This report supports the achievement of the following strategic aims of the Trust: (please mark those that apply with an X):	
Quality and Workforce: to provide high quality, evidence-based services delivered by a diverse, motivated and engaged workforce	x
Integration and Partnerships: to be influential in the development and delivery of new models of care locally and more widely across West Yorkshire and Harrogate STP	
Sustainability and Growth: to maintain our financial viability whilst actively seeking appropriate new business opportunities	

This report supports the achievement of the following Regulatory Requirements: (please mark those that apply with an X):	
Safe: People who use our services are protected from abuse and avoidable harm	
Caring: Staff involve people who use our services and treat them with compassion, kindness, dignity and respect	x
Responsive: Services are organised to meet the needs of people who use our services	x
Effective: Care, treatment and support achieves good outcomes, helps to maintain quality of life people who use our services and is based on the best available evidence.	
Well Led: The leadership, management and governance of the organisation make sure it's providing high-quality care that is based around individual needs, encourages learning and innovation, and promotes an open and fair culture.	x
NHSI Single Oversight Framework	

Equality Impact Assessment :
Patient stories meet the equality requirements as they facilitate opportunities for all patients, service users and carers to discuss the care they receive.

Review of Trust Board Patient Stories

1. Background

The purpose of the patient story is to enable Trust Board members to have first-hand insight and knowledge of the experiences patients/carers have and to enable an emotional connection with the Trust Board agenda. It provides an opportunity to triangulate patient experiences with data and assurances presented to the Trust Board. It enables an opportunity to see services through the eyes of a patient/carer. It also sets the tone for decision-making at Trust Board, linking the strategic aims of enhancing patient experience which is at the heart of all we do with senior level decision making. This report builds on the paper presented at Trust Board 12 months ago.

2. Trust Board Stories – Summary over the Last 12 months

Patient stories have been presented at ten Trust Board meetings. These have been developed by Business Units to ensure that a wide range of services are represented. This coordinated approach has provided Business Units with an opportunity to generate topical and appropriate stories from different services within the Trust. In order to achieve this, the process includes:

- A timetable of stories agreed with Business Unit Deputy Directors.
- Decision making for identifying and agreeing stories through Deputy Directors.
- Final sign off and approval of the story by the Director of Operations and Nursing.
- Coordinated approach to stories developed from a range of different perspectives.

As part of the last review it was agreed that patient stories were developed in line with agreed national health messages supported by the Trust. In reality it has not been possible to link stories with targeted campaigns as stories tend to be developed through real time experiences which do not necessarily fall within the timeframes of specific campaigns. The timetable continues to be planned with broad themes in mind and reflects key campaigns such as World Mental Health day or Self Help week.

Board stories continue to be a powerful resource which enriches our understanding of patient experience. Many different formats have been suggested for the story to be delivered. Developing stories is resource intensive for services and the corporate coordination and administration required to ensure stories are presented in a timely manner at Trust Board is significant. Anecdotally it is felt that the most impact is derived from a story told in person or by the service team sharing the story; however other mediums have their place when a personal story is not possible.

Deputy Directors have been asked for their comments on the use of patient stories and the updated process in the last 12 months. Their observations include stories are:

- A powerful tool to inform Board of the impact of services
- A great way of bring experiences to life
- Shared with Business Unit for learning
- Particularly good when involving VCS partners
- Good to be able to showcase complexities of the work of services
- Able to provide real life impact to Board and act as a connector to frontline services
- Timetable is useful to plan ahead and gather stories

Areas of concern included:

- The large amount of work involved in developing stories
- Continued changing of what is required when developing stories creates confusion
- There should there be a backup plan if last minute problems occur
- Patients can be anxious about the high level of exposure

Other suggestions for consideration:

- Other creative ways to capture comments during or after appointments such as a comments pod
- Could patient stories be captured during Quality Walkabouts so that Board members could share these at meetings instead of patients having to attend Board?
- Could Board members attend and reach out for stories from other forums such as patient or carer meetings in clinical areas?
- Would like a framework for presenting stories to enhance the current guidance
- A feedback mechanism for teams after they attend Board Drafting note: I thought this was done by Debra after every story via a letter?

How we use stories at Trust Board

Over the last 12 months a programme of stories has been developed and this has worked extremely well. Deputy Directors are aware of the timetable and this has led to increased cooperation, a better range of stories and ownership of stories from services involved. A flow chart for developing stories has been produced Appendix 1, together with guidance for services. Overall the recommendations from the paper 12 months ago have widely been adopted. The challenges of providing feedback in a timely manner, to service users and the public in terms of actions taken remains difficult.

Where possible, we have showcased the patient story as part of wider media work to promote Board meetings. However, as highlighted in the previous board report, whilst the patient story helps to evidence the Trust's 'You and Your Ccare' approach, it does not impact on media interest and should not be the main consideration. From May 2017 to March 2018, of the six press releases issued, four included a patient story, which did not impact on coverage. Six patient stories were posted on the Trust website with supporting social media but as per the previous year, pull-through to the website remains very low with 66 unique visits to the page over 12 months.

Review of where the patients stories are shown on the website may improve the number of unique hits and should be done as a wider piece of work to review the Patient Experience and Involvement webpages hosted on the Trust Website. This will then be monitored to gauge the impact and whether this is the most effective channel.

More in-depth patient stories will continue to be a central part of wider communications work that are sourced for wider pieces of work and are consistently effective in raising wider awareness, they give more in-depth personal stories that individuals are willing to share, often showcasing how services are supporting/benefiting individuals, to encourage others to seek support e.g. a MyWellbeing College case study for Time to Talk.

Lessons learned

“You Said We Heard” actions have been difficult to monitor. Currently stories are approved by the Director of Operations & Nursing. “You Said We Heard” should be provided with the story to ensure feedback is current and actions taken are transparent to the Board. If there is a delay in the story being approved these actions may be missed. To address this a Board story template has been designed to pull together all elements of the story. This will aid staff in developing stories within a concise framework and identify actions and learning. Appendix 2.

As the Trust becomes increasingly inclusive, and to reflect changing working practices in which partnership working becomes more important, it was agreed that stories from Business Units reflect the increase in collaborative working. This has been a positive move which has enhanced the stories shared. This approach lends itself not only to collaborative working with external partners but also highlighting working together with other corporate services which can have an unseen but vital impact on a patient journey, for example Estates, Business Intelligence and other services with corporate functions.

The new approach of Business Units developing stories has lent itself to services being able to showcase examples of great services, which needs to be balanced with learning from difficult experiences and complaints. In order to continue to maximise the impact and benefit of using patient stories at Trust Board meetings Business Units need to continue to find creative stories which showcase collaboration with others in corporate services. This will benefit the meeting by:

- Maintaining interest.
- Allow staff to showcase good patient experience stories.
- Link assurance to the CQC recommendations and the benefits of patient stories.

To further develop feedback mechanisms and streamline the process a template has been developed for staff to complete. This will provide:

- A standardised approach to the information provided to Board
- Guidance and structure to staff when developing a story, with clear timelines if likely to be of interest to local media
- A timely review of learning achieved and actions taken.
- Clear auditable information for the Communications Team to use in a timely manner.

Approach to Patient Stories

It is proposed that stories for the next two years are planned so that Business Unit dates, where possible, are still aligned to national campaigns supported by the Trust.

Each Business Unit will produce 5 stories in a two year rolling programme as shown in Appendices 3&4, These should include:

- Patient / Carer story linked to services within the Business Unit.

- Partnership story reflecting improved patient experience developing services in partnership with other organisations or services.
- Learning from complaints

Patient/ Carer stories

Should be told from the patient/carer perspective, preferably in person, with support from the service involved. Other mediums may be considered if a patient or carer is more comfortable. These should be supported by the service.

Partnership stories

Told by members of staff or patients/carers who explain how partnership working with other organisations impact on patient experience. These should be in person and can be individual experiences or service impact experience.

Learning from Complaints

Told by members of staff or patients/carers who can demonstrate learning and service improvements. Stories can be developed in collaboration with the Patient Advice & Complaints Team to identify appropriate stories to share. These should be in person and can be individual experiences or service impact experience.

Services should consider different patient groups eg, BME, GBLT, Blind, Deaf or sensory impairment or loss, also consider stories from HR, Corporate services and Estates.

3. Implications

3.1 Legal and Constitutional

None

3.2 Resource

None

3.3 Quality and Compliance

This paper provides assurance in relation to the following CQC Themes: Drafting Note: include Caring and Responsive in table – see front sheet

Well led:	The leadership, management and governance of the organisation make sure it's providing high-quality care that is based around individual needs, encourages learning and innovation, and promotes an open and fair culture.
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4. Risk Issues Identified

Risk	Likelihood High/Medium/Low	Implication	Mitigation
Organisational reputation	low	Increase in complaints and negative media	Use a variety of engagement processes at all levels within the

		coverage	organisation
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5. Monitoring and review

The process will be reviewed every two years by the Director of Operations & Nursing.

6. Timescales/Milestones

- Board stories will continue to be shared at Senior Managers Briefings and Business Unit Quality & Safety meetings.
- Discussion with Deputy Directors to agree the proposed programme will be via the Deputy Directors meeting.
- Information will be cascaded via Deputy Directors to Business Unit teams.
- Continuation of existing arrangements with a twelve-month programme mapped out on a routine basis.

Appendix 1

Patient/ Carer stories

Told from the Patient or Carer perspective, preferably in person with support from the service involved. Other mediums may be considered if a patient or carer is more comfortable.

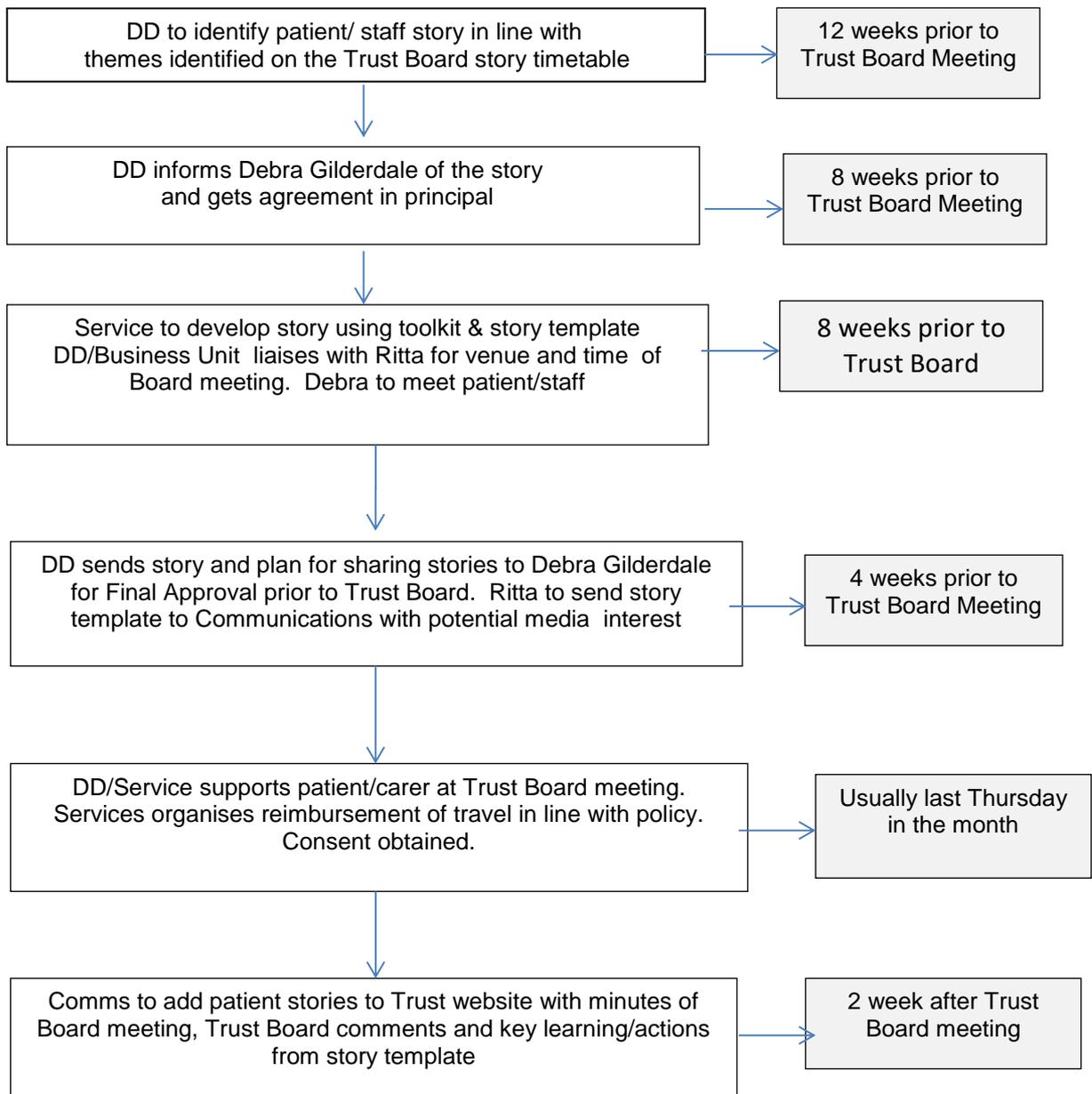
Partnership stories

Told by members of staff or patients/carers who explain how partnership working with other organisations impact on patient experience. These should be in person and can be individual experiences or service impact experience.

Learning from Complaints

Told by members of staff or patients/carers who can demonstrate learning and service improvements. Stories can be developed in collaboration with Patient Advice & complaints to identify appropriate stories to share. Consider different patient groups and working together with other services such as corporate services eg Estates, Research

Process for developing Trust Board stories



Appendix 2

Trust Board

Paper Title:	Patient Story & Service Overview
Section:	Public
Paper Author:	
Agenda Item:	

Patient/Carer story Partnership working Learning from complaints

Synopsis of Patient/Carer story

- Background
- What did the service do
- How did the patient/ carer feel
- What difference did the service make

Key Learning

Actions/outcomes

Patient Consent obtained to share story At Trust Board

On Website

Is the story likely to be of interest to local media Yes No

If Yes does the Patient wish to share their story with local press Yes No

Final Draft 09 05 18

Overview of team

Team name:

Service Profile:

Key Service Objectives:

Appendix 3 Trust Board Story Timetable 2017

Date	Business Unit	Story	Lead Person	Deadline for approval	Awareness campaigns
27 th April 2017	Mental Health Acute & Community Services	Autism story	Lesley Taylor	27 th April 2017	Autism awareness day
25 th May 2017	Specialist In patient Services, Dental & Admin Services	Dental/dementia story Carer story DAU	Bev Knaggs	25 th April 2017	Dementia week National Walking Month Action on Stroke Month World Asthma Day – 2 nd May Mental Health Awareness Week – 8 th -14 th Sun awareness day – 8 th – 14 th may Deaf Awareness Week – 15 th – 21 st National Epilepsy Week – 21 st – 27 th World no tobacco day – 31 st May
29 th June 2017	Nursing, Specialist & Children's Services	Carers story Specialist School nurses Parents of a child with complex needs	Dawn Lee	29 th May 2017	Infant Mental Health Carers Week – 12 th – 18 th Diabetes Week - 11 th – 17 th Men's Health Week 12 TH – 18 th World Blood donor Day – 14 th June
27 th July 2017	Adult Physical Health Community Services	Partnership story Airedale Complex Care team	James Cook	27 th June 2017	Health Information Week 3 rd – 9 th July

August 2017	No Board meeting No Story				
28 th September 2017	Mental Health Acute & Community Services	Carer story Learning Disabilities Health Support Team	Sally Ramsden	28 th August 2017	Suicide Prevention Day Urology Awareness Month National Eye health Week – 18 th – 24 th
26 th October 2017	Mental Health Acute & Community Services	Partnership story CellarTrust/Mind project	Grainne Eloi	26 th September 2017	World Mental Health Day Back Carer Awareness week 2 nd – 6 th OCD Awareness week National Arthritis Week
30 th November 2017	Specialist In patient Services, Dental & Admin Services	Patient story Clinical Admin services	Karen Hughes	30 th October 2017	Universal Children's Day Lung Cancer Awareness Month Alcohol Awareness Week
21 st December 2017	Staff Awards No Story				
25 th January 2018	Adult Physical Health Community Services	Patient Story Primary Care Wellbeing service	Cheryl Kirby	30 th December 2018	Dry January Obesity week – was in 2017
22 nd February 2018	Mental Health Acute & Community Services	Patient Story CAMHS- Tower Hirst Partnership	Helen Ioannou/ Lisa Stead	22 nd January 2018	Time To Talk Eating disorder week – was in 2017

		Safer Spaces			World Cancer day Wear it Beat it – British Heart Foundation
29 th March 2018	Nursing, Specialist & Children’s Services	Partnership Working Health services Visiting	Debra Henson	28 th February 2018	FFT Spotlight Week No Smoking day Prostate Cancer awareness month Nutrition and hydration week

Mental Health Acute & Community Services x4 (Note this was due to a swap March/ April 2017 so should have been 3)

Nursing, Specialist & Children’s Services x2 (Note this was due to a swap March/ April 2017 so should have been 3)

Adult Physical Health Community Services x2

Specialist In patient Services, Dental & Admin Services x2

Appendix 4 Trust Board Story Timetable 2018 updated 10 04 18

Date	Business Unit	Story	Lead Person	Deadline for approval	Awareness campaigns
26 th April 2018	Children's Services	Patient story from services Wakefield FNP services	Julie Brice		Autism awareness day
24 th May 2018	Specialist In patient Services, Dental & Admin Services	Partnership story	Bev Knaggs	10 th May 2018	Dementia week National Walking Month Action on Stroke Month World Asthma Day – 2 nd May Mental Health Awareness Week – 8 th -14 th Sun awareness day – 8 th – 14 th may Deaf Awareness Week – 15 th – 21 st National Epilepsy Week – 21 st – 27 th World no tobacco day – 31 st May
28 th June 2018	Mental Health Acute & Community Services	Patient/ carer story		14 th June 2018	Infant Mental Health Carers Week – 12 th – 18 th Diabetes Week - 11 th – 17 th Men's Health Week 12 TH – 18 th World Blood donor Day – 14 th June

26 th July 2018	Adult Physical Health Community Services	Partnership story Falls Prevention Team	Stephen Pugh 322184	12 th July 2018	Health Information Week 3 rd – 9 th July
August 2018	No Board meeting No Story				
27 th September 2018	Mental Health Acute & Community Services	Learning from complaints Mrs H Complaint 5805	Grainne Eloi/ Louise Hussain	13 th September 2018	Suicide Prevention Day Urology Awareness Month National Eye health Week – 18 th – 24 th
25 th October 2018	Specialist In patient Services, Dental & Admin Services	Learning from complaints		11 th October 2018	World Mental Health Day Back Carer Awareness week 2 nd – 6 th OCD Awareness week National Arthritis Week
29 th November 2018	Children's Services	Partnership story	? Health Visiting from Gerry Armitage Leadership walk round	15 th Nov 2018	Universal Children's Day Lung Cancer Awareness Month Alcohol Awareness Week
December 2018	Staff Awards No Story				
31 st January 2019	Adult Physical Health Community Services	Patient/ carer story Palliative care	Belinda Marks	17 th January 2019	Dry January Obesity week –

28 th February 2019	Specialist In patient Services, Dental & Admin Services	Patient/ carer story		14 th February 2019	Time To Talk Eating disorder week – World Cancer day Wear it Beat it – British Heart Foundation
28 th March 2019	Adult Physical Health Community Services	Learning from complaints		14 th March 2019	FFT Spotlight Week No Smoking day Prostate Cancer awareness month Nutrition and hydration week

Mental Health Acute & Community Services x2

Nursing, Specialist & Children’s Services x2

Adult Physical Health Community Services x3

Specialist In patient Services, Dental & Admin Services x3