



# **Patient Focus, Public Involvement Self Assessment Report 2008/09**

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Date: 12<sup>th</sup> May 2009**

# 1. Summary

## Introduction

- 1.1 2008/09 has seen significant progress towards our Clinical Strategy Consultation through involvement of patients, staff, the public and Community Planning Partners (i.e. Dumfries & Galloway Council, Police, Fire). Whilst the Clinical Strategy does not feature specifically in this report, it affects almost every aspect of NHS care in Dumfries and Galloway and therefore all of our Patient Focus, Public Involvement (PFPI) activity will impact on or be influenced by that work, now and in the future.
- 1.2 This report outlines the progress made against our key actions agreed in the 2008 self assessment process and discusses the process for agreeing which case studies are used to represent progress.
- 1.3 The report also describes the process undertaken with members of the public to agree key actions for 2009/10.

## Governance arrangements

- 1.4 It is important that all elements of NHS Board's work is subject to scrutiny to ensure that it is appropriately carried out and managed. This applies equally to PFPI activity.
- 1.5 The Board of NHS Dumfries and Galloway receives quarterly reports regarding PFPI activity. This allows the opportunity for all Board members to raise questions on the validity of activity and endorse approaches.
- 1.6 This year has also seen a pre-Board meeting workshop on PFPI, to raise awareness amongst Board Members about the agenda and encourage them to challenge staff on their PFPI activity. The workshop demonstrated the breadth and scope of PFPI agenda in Dumfries and Galloway.
- 1.7 Due to the close partnership working with Community Planning Partners there are also Governance arrangements via a joint Public Involvement Working Group, reporting to the Community Planning Board on a 6 monthly basis.

## Public Partnership Forum (PPF)

- 1.8 PPF development in Dumfries and Galloway has been slower than was anticipated but real progress has been made over 2008/09.
- 1.9 There has been a very positive response to adverts for those interested in being involved in the PPF and an information event will be held on 18<sup>th</sup> May 2009.
- 1.10 There is a clear remit for our Community Health Partnership, which links to the public through the PPF.

## **Progress within PFPI**

- 1.11 As the case studies contained within this report will demonstrate, significant progress has been made in the key action areas.
- 1.12 In particular, different aspects of patient and carer experience have been utilised to change and develop care.
- 1.13 Whilst we have utilised volunteers for a number of years the renewed focus on achieving Investing in Volunteers award has turned the spotlight on our good practice. Many volunteers work with and are recognised by NHS Dumfries and Galloway and make a fantastic contribution. Their volunteering enhances not only the lives of patients, carers and staff but equally themselves.
- 1.14 The Quality Improvement Working Group continues to develop and to challenge NHS Dumfries and Galloway to demonstrate where lessons have been learned from patient feedback and errors.

## **What we could improve**

- 1.15 Our own evidence shows us that, to date, we have not been very good at sharing the PFPI work we have been doing.
- 1.16 Evaluation of PFPI activity is a difficult process but a very valuable one. We are currently part of a pilot to use an electronic tool to help in evaluation. We believe this will be a useful tool and it highlights how much progress we still have to make in evaluating our work.

## **Supporting people to be involved**

- 1.17 The level of support for people to be involved with NHS Dumfries and Galloway varies considerably as it is often an individual requirement.
- 1.18 All those involved with the Board are supported with out of pocket expenses for travel or carer's costs.
- 1.19 Those involved particularly in volunteering projects have the standard NHS Dumfries and Galloway induction and any training required for their project (e.g. moving and handling)
- 1.20 Those serving on committees and volunteering projects are supplied with a role description outlining the expectations of them and what they can expect from NHS Dumfries and Galloway. This is supported on an individual basis as required.

## 2. Progress against key actions for 2008/09

### PFPI event

- 2.1 On 8<sup>th</sup> May 2009 NHS Dumfries and Galloway held an event for members of the public, including those who had been involved in our key actions for 2008/09, to agree which case studies would be included in this self assessment report.
- 2.2 Over 100 people were invited through various groups to attend the event and whilst 21 advised they wished to take part, 10 attended on the day. There were 3 apologies received.
- 2.3 Case studies were agreed for inclusion in the report.

### Case studies

#### 2.4 *Dementia Champions*

Dementia Champions is a training programme for NHS staff. The programme came to life because carers told NHS Dumfries and Galloway staff about their concerns about the care their loved ones with dementia received. This is critical to the success of the programme and carer's representatives are an integral part of forming the structure of what is taught. Carers themselves take part in one session, discussing how they feel about their experiences and the experiences of the person with dementia in a health care setting.

As a result of the first session involving carers changes were made to the programme and to the timing of carers input. Support for carers and staff before and during the session was also enhanced. Both carers and the staff report the very positive effect of this involvement and whilst there is still much work to be done, carers tell us that care of people with dementia is improving.

#### 2.5 *Volunteering Pilot*

Recently NHS Dumfries and Galloway has made an effort to increase the range of Volunteers who are involved in services. A series of 3 pilots suggested covering.

- A. **Patient Experience** – Listening to what patients and their visitors say about their hospital stay and discussing with staff so any problems can be quickly resolved.
- B. **Activities with people with dementia** – This was suggested as a direct result of the Dementia Champions programme and recognises that people with dementia need extra care and attention in hospital.
- C. **Supporting patients with acquired brain injury** – Often these patients can become upset or agitated in response to their feelings as they used to. Often all that is needed is time to walk or talk to help them feel calmer.

Whilst there is already significant levels of volunteering in some parts of NHS Dumfries and Galloway, this particular pilot is in it's infancy. The purpose of the pilot is not only to determine whether the activities are successful but also to test our recruitment and support processes.

To date volunteers feel the recruitment process is supportive although appears to take too long. We are reviewing in light of these comments.

## 2.6 ***Patient Experience***

Some of the things we hear about how patients and relatives feel about the care they have been given make the staff feel they have not done a good job.

In some cases it is a remark or look by a staff member which is interpreted differently by a patient – This can have an effect on how they view all their care thereafter.

NHS Dumfries and Galloway has enlisted the help of an acting company to act out some scenarios that patients and relatives have fed back to us through complaints. The aim is to create a DVD training resource as well as a “live” event to support staff to see how their behaviour affects others.

These scenarios are based on patient feedback including complaints. The work is almost complete and we will measure the impact through patient and staff feedback.

## 2.7 ***Quality Improvement Working Group***

This group deliberately has more public than health service members – It’s role is to look at feedback reports from complaints, patient surveys and adverse incidents (where something has gone wrong or could go wrong), they question what we have done in NHS Dumfries and Galloway to put this right and reduce the chance of it happening again.

Members of the Quality Improvement Working Group (QIWG) actively seek feedback directly from frontline managers and review actions taken in response to incidents, complaints and feedback. The chair of the group is a member of the Health Care Governance Committee (HCGC) where their role is to reassure HCGC about actions taken to address issues. QIWG members tell us they feel able and supported to question NHS Dumfries and Galloway and that they see results from actions.

## 2.8 ***VOICE***

VOiCE is a database planning and recording tool designed to assist individuals and organisations to design and deliver effective public involvement. It can be used to support a range of participation and is designed to be relevant both for individual services and for inter-agency community planning. VOiCE enables all users to have a common system for analysing, planning, monitoring, evaluating and recording PFPI activity that provides common protocols, definition of terms and understanding of different types and purposes of engagement.

As part of a Scottish Health Council-commissioned pilot of the VOiCE tool we have so far used it for a variety of projects e.g. recording various aspects of the Clinical Services Strategy, planning and recording public involvement in reviews of the patient journey for the ultrasound, MRI and audiology services and the formation of focus groups such as one formed to look at the Occupational Health service in the West of the region.

## 2.9 ***Public Partnership Forum***

Dumfries and Galloway's Community Health Partnership (CHP) brings together the public, health services, voluntary organisations, and local authority to co-ordinate and plan the delivery of health care services in 4 Local Health Partnerships (LHP) across the region and will concentrate on the following areas:

- Older people
- Learning Disabilities
- Health and Homelessness
- Mental Health
- Substance Misuse
- Physical Disability

To make sure that the public are involved, a Public Partnership Forum (PPF) is being established in Dumfries and Galloway. Representatives from the PPF will sit on the Community Health Partnership, which will influence and inform the Local Health Partnerships.

The aims of the PPF are:

- to ensure that people are informed about the range and location of health related issues
- to involve the local community in discussions about how to improve health services
- to support wider public involvement in planning and decision making

An advert was placed in all of the local newspapers at the end of March requesting notes of interest in joining NHS Dumfries and Galloway PPF. An information pack and application form has been produced and promotional materials have also been produced sent to GP practices, dentists etc and other public outlets to spread the word further.

An information event has been arranged for the afternoon of 18 May.

## Update on key actions from 2008/09 not previously included in case studies

Action	Update
Infection Control Team will explore how to improve public involvement in the service	<ul style="list-style-type: none"> <li>➤ Public Involvement Group for Hospital Acquired Infection established and advertising for further membership.</li> <li>➤ Scottish Health Council agreed to help establish a working agreement with the group.</li> <li>➤ Representation from the Public Involvement Group will sit on Infection Control Committee and Quality Improvement Working Group.</li> </ul>
Explore how the public can be involved in the management of long terms conditions	<ul style="list-style-type: none"> <li>➤ This was a very ambitious action which in hindsight could have been broken down into a number of key areas.</li> <li>➤ Work is ongoing with specific patient groups e.g. Cancer, Arthritis</li> <li>➤ Closely linked to Clinical Strategy as this underpins long term conditions</li> </ul>
Continue to use identified structures to work with Local Authority to ensure patient satisfaction with the discharge process	<ul style="list-style-type: none"> <li>➤ Focusses on long term patients and potential “delayed discharges”</li> <li>➤ Close working with the small numbers involved</li> <li>➤ Options explored for focussed feedback discussion to determine whether any improvements to discharge of longer term patients can be made.</li> <li>➤ No feedback from in-patient survey review or other patient feedback to indicate areas of concern.</li> </ul>

### **3. SHC Verification**

The Scottish Health Council agrees that this self assessment represents a fair and accurate account of the progress made in the last year by NHS Dumfries and Galloway in relation to Patient Focus and Public Involvement.

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26 May 2009