

NORTHUMBERLAND, TYNE AND WEAR NHS FOUNDATION TRUST

BOARD OF DIRECTORS MEETING

Meeting Date: 27 January 2016

Title and Author of Paper:

Service User and Carer Experience Summary Report (Quarter 3)
Lisa Quinn, Executive Director of Performance & Assurance

Paper for Debate, Decision or Information: Information

Key Points to Note:

- This report summarises the Quarter 3 2015/16 Service User and Carer Feedback received.
- Information has been reported on a range of feedback mechanisms used across the organisation. Patient Friends and Family Test response rates have improved significantly in the quarter (c450) and 79% of respondents answering positively (page 2/3). National benchmarking data (for quarter two) however suggests that the national average for mental health providers is 87% and the Trust is in the lowest quartile for positive responses (page 4).
- The Points of View cards remain in use (mainly in inpatient services) and in the quarter nearly 300 responses were received, showing an increase in positive responses compared to the previous quarter (page 6&8). NB The annual community PoY survey is being developed by the Community group.
- Carers feedback – this remains positive where received however the response rates continue to deteriorate (page 9).
- Examples of actions taken within groups in response to feedback are included on pages 7&8.
- The initial results from a survey of inpatients (completed summer 2015) have been received, providing broadly positive results from over 100 respondents. Further information will be provided to the next update (page 11).
- During the period there were eight comments posted on patient opinion websites (page 13).
- This report is a high level summary for assurance purposes. Detailed monthly reports are additionally forwarded to each clinical Group for discussion, analysis and action in the Q&P Caring sub-groups.
- A proposal is being developed by the Trust Service User & Carer Experience Group to review the existing patient experience feedback mechanisms with the aim of increasing responses rates and improving responsiveness to feedback received.

Outcome required: For information only.

SERVICE USER AND CARER EXPERIENCE QUARTER 3

1. PURPOSE

- 1.1 To present to the Board of Directors a summary of the Quarter 3 2015/16 Service User and Carer experience feedback (data as of 05/01/2016).

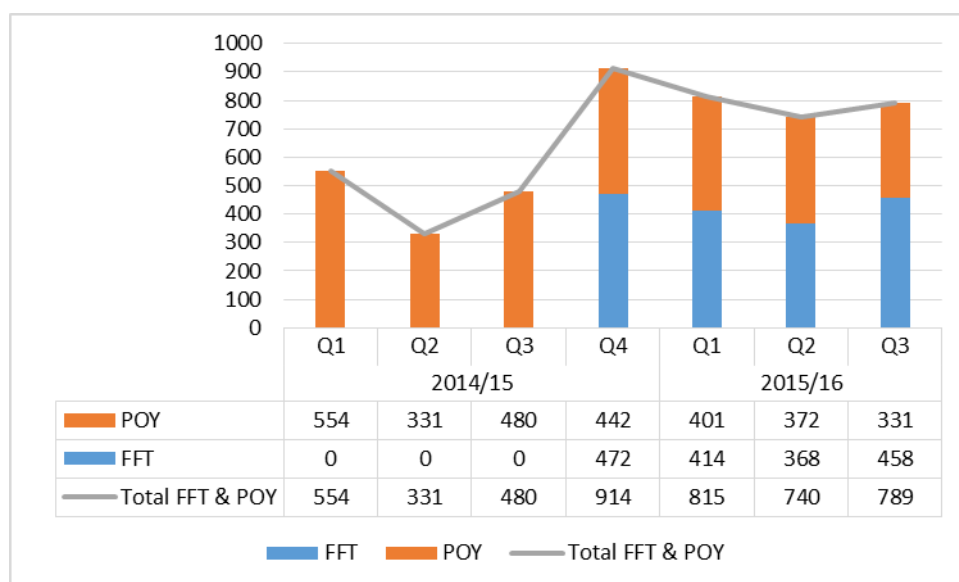
2. BACKGROUND

- 2.1 Getting service user and carer feedback is vital to improve our services. The Trust is committed to improving patient experience using methods forms of feedback to better understand what is working well and to identify areas of improvement. The information in this paper outlines the Quarter 3 position in the following areas:

- Service User Friends and Family Test
- Points of You (Service User & Carer) / How's it going
- Other Patient Reported Experience Measures
- Quality Health Mental Health Acute Inpatient Service Users Survey 2015
- Patient opinion/NHS Choices
- Compliments

3. PATIENT EXPERIENCE FEEDBACK - OVERALL

Figure 1: Total number of patient experience responses per tool (FFT & POY) per Month



- 3.1. The Trust, as of January 2015 received patient experience feedback from 2 main sources: 1) FFT 2) POY (Service User, Carer and How's it going/ now & Gender identity survey). As illustrated in Figure 1, the combination of both feedback tools have increased the occurrence for service user and carer feedback.

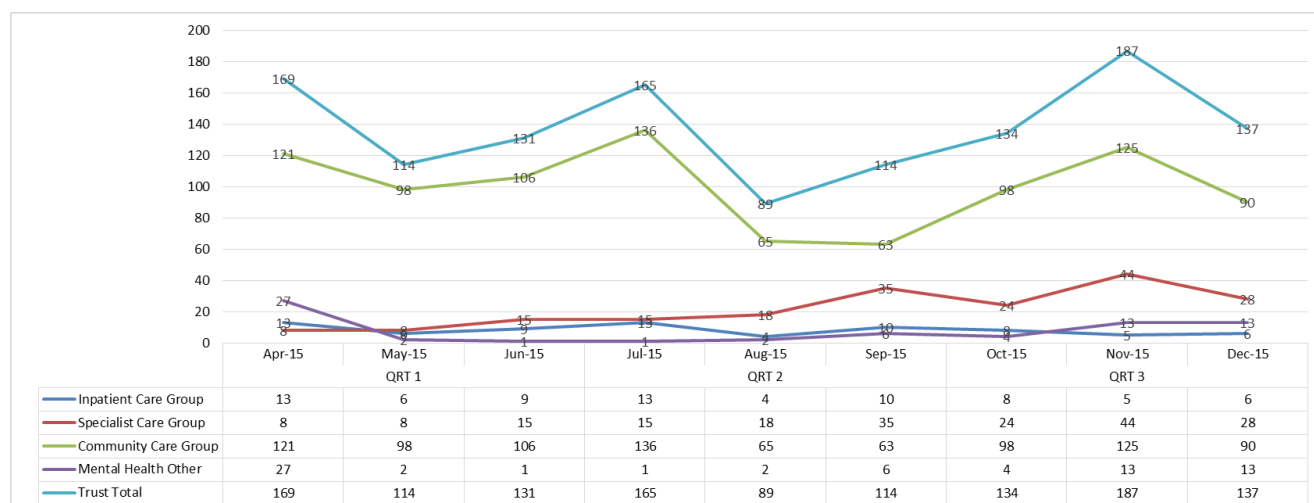
4. NHS FRIENDS & FAMILY TEST RESPONSES Q3 2015/16

4.1. The NHS Service User Friends and Family Test (FFT) (Appendix 1) was operationalised in January 2015 and has become and remains an important part of our patient experience programme.

The FFT enables service users to have the opportunity to give feedback at any point in time. However, there are recommended points in a patients pathway when the FFT should be offered (if appropriate), these include: a) For Inpatient Services – on the day of discharge or within 48 hours after discharge; and b) For Community Services – at key points such as care plan review appointments and on transfer or discharge. For services with frequent users, it may be appropriate to ask at regular intervals, such as monthly or three-monthly.

The FFT is a single question survey that asks patients to rate the likelihood they would recommend the service they have received to family or friends. Scoring ranges from extremely likely to extremely unlikely.

Figure 2: Service User FFT response rate per quarter, per group.



4.2. As illustrated in Figure 2, a total of 458 (Oct n = 134, Nov n = 187, Dec n = 137) responses were received during Quarter 3 2015/16 across all Trust services. Encouragingly this is the highest number of responses received during a quarter period YTD, and is a 25% increase on the total number of responses received during Quarter 2 2015/16 (n = 368).

4.3. For Inpatient Care services there were 19 responses received during Quarter 3, which is 1.5% of all patients discharged/ open to services during the period. For Specialist Care services 96 responses were received, which is 0.4% of all patients discharged/ open to services. For Community Care services 313 responses were received, which is 1.0% of all patients open to services during the period.

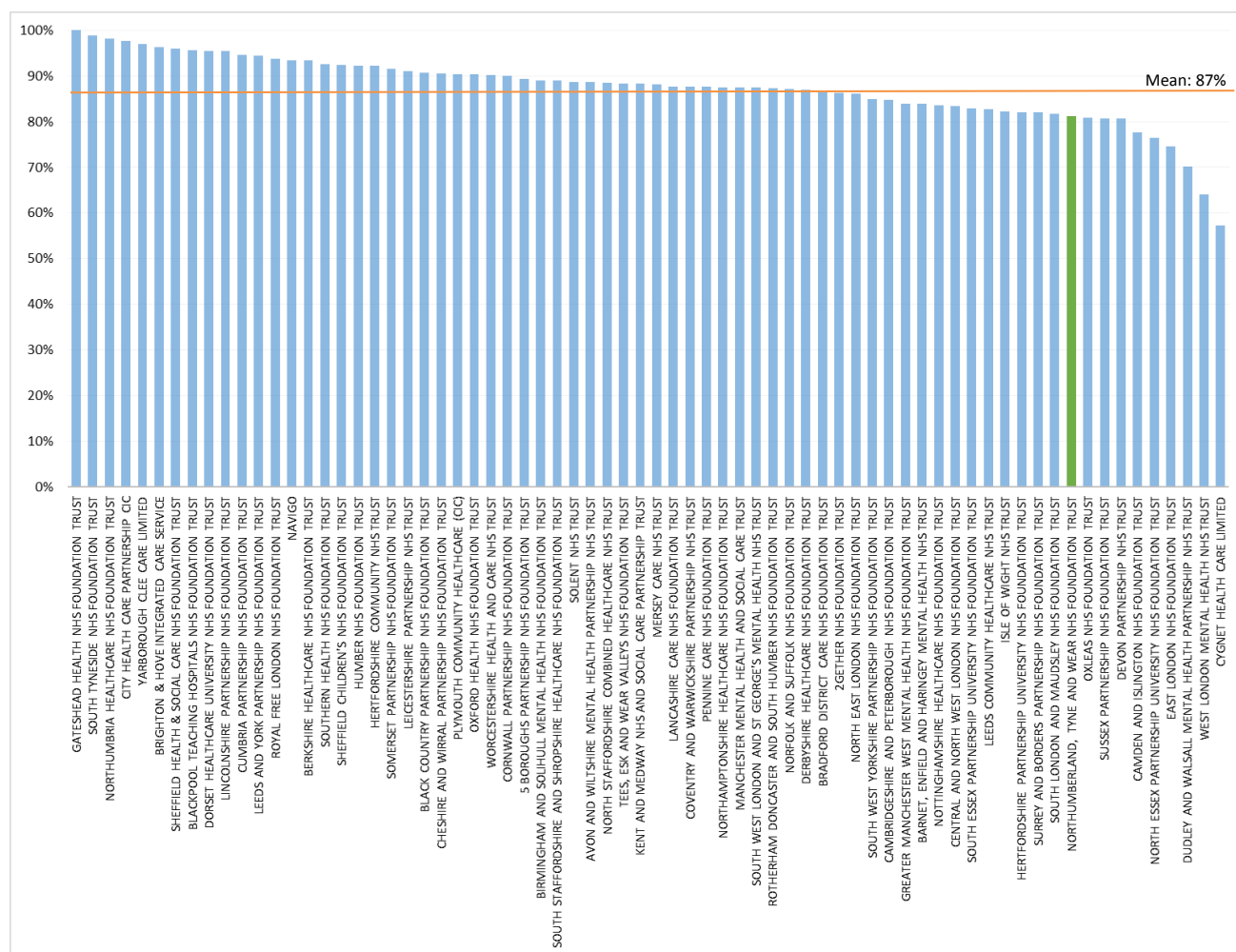
Figure 3: Service User FFT response summary per quarter, per group.

	Quarter 1		Quarter 2		Quarter 3	
	Recommend	Not Recommend	Recommend	Not Recommend	Recommend	Not Recommend
Inpatient Care Group	68%	7%	74%	15%	84%	5%
Specialist Care Group	94%	0%	96%	0%	91%	3%
Community Care Group	76%	5%	77%	4%	75%	5%
Mental Health Other	90%	3%	78%	22%	70%	3%
Trust Total	78%	5%	80%	4%	79%	4%

(NB: where percentage do not total 100%, the remaining proportion of responded answered with 'neither likely nor unlikely' or 'don't know').

- 4.4. Out of the responses received in Quarter 3, 79% of respondents indicated they would recommend the service they received to their friends and family (rating of extremely likely or likely); whereas 4% indicated that they would not (ratings of extremely unlikely or unlikely). These statistics illustrate that although performance seems consistent across all quarters reported.
- 4.5. The subsection summarises the demographic characteristics of the Service User FFT respondents. Of those who answered the demographic section: 60% of respondents were female and 40% male. The respondents were largely ethnically homogenous – 93% White; 3% Asian / Asian British and 3% Black / African / Caribbean/ Black British. The age of respondents ranges from 0-15years to 75-84years, with a median age group of 25-34 years. In terms of the geographical region, nearly a half of respondents resided in Newcastle (41%) (17% resided in Sunderland, 14% in Gateshead, 10% in North Tyneside, 4% in Northumberland, 4% in South Tyneside, and 10% Other).
- 4.6. Organisation-level FFT data is submitted and reported nationally by NHS England. The data for **Quarter 2** has been published. Nationally 75 providers of mental health services submitted a completed FFT data set for the months of July, August and September 2015. The response rate during the quarter ranged from 4,257 to 14, NTW ranked 41st receiving 368 responses (an average of 123 responses per month). On average 81% of NTW respondents indicated they would recommend the service they received to their friends and family - 60 other mental health trust scored 82% or above for this indicator (out of 70 trusts, 5 excluded due to insufficient responses) (Figure 4). The data for October 2015 was published on 10th December 2015, this reflects a similar picture.

Figure 4: % of service users who would recommend the service they received to the friends and family per Trust



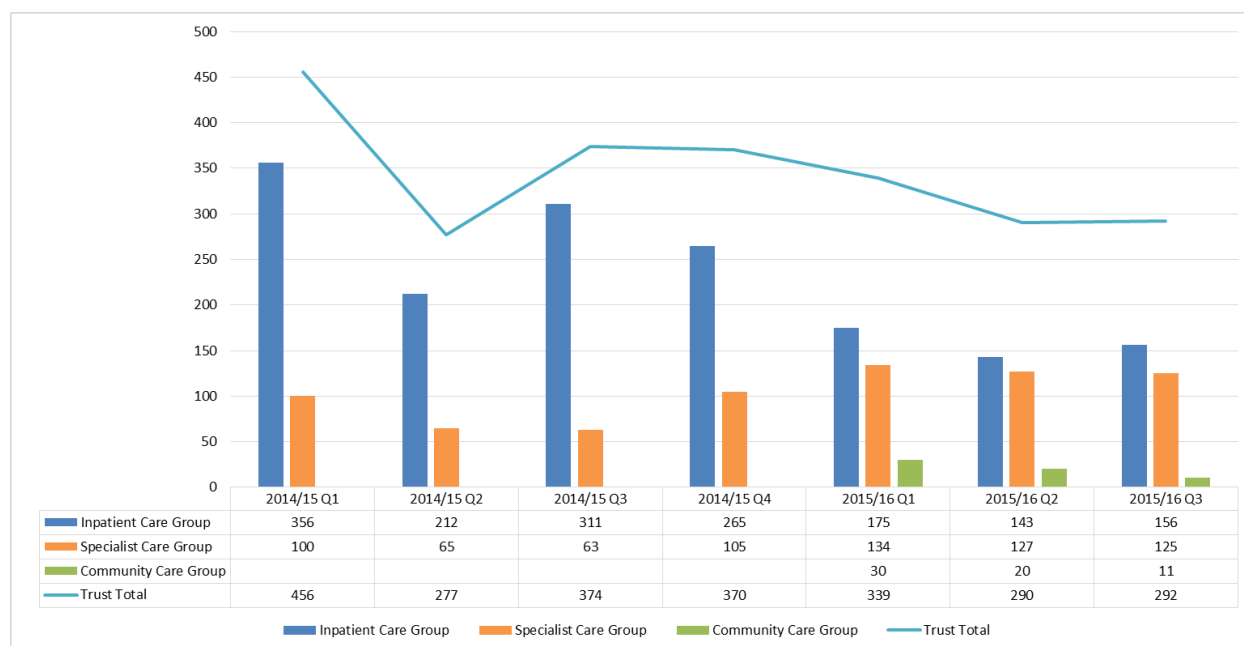
4.7. Our patient experience feedback via the FFT is shared with clinical and operational teams in the Q & P Caring sub-groups.

5. POINTS OF YOU RESPONSES FOR SERVICE USERS Q3 2015/16 – TRUST WIDE

5.1. The Points of You (POY) Service User feedback tool was implemented within Inpatient and Specialist Care Groups in 2011. Community Care Group undertake an annual POY survey – due to commence January – March 2016.

The POY feedback tool is a real time system that enables staff to respond effectively to any feedback received at that point in time. The survey enables service users and carers to report feedback on a number of 'yes' / 'no' questions, along with the opportunity for open comments. The following sections report on the statistical data, the recurring themes elicited and the actions undertaken to address the issues – to provide assurance that the Trust prioritises and acts upon what patients and carers are telling us. The data is reported firstly at trust wide level, then by group.

Figure 5: Service User POY response rates.



5.2. Trust wide there has been a general quarterly decline in the number of POY returns received from service users, however figures suggest a possible plateau over the recent months. In Quarter 3, 292 responses were received; this is proportionate to the number of responses received during Quarter 2 2015/16.

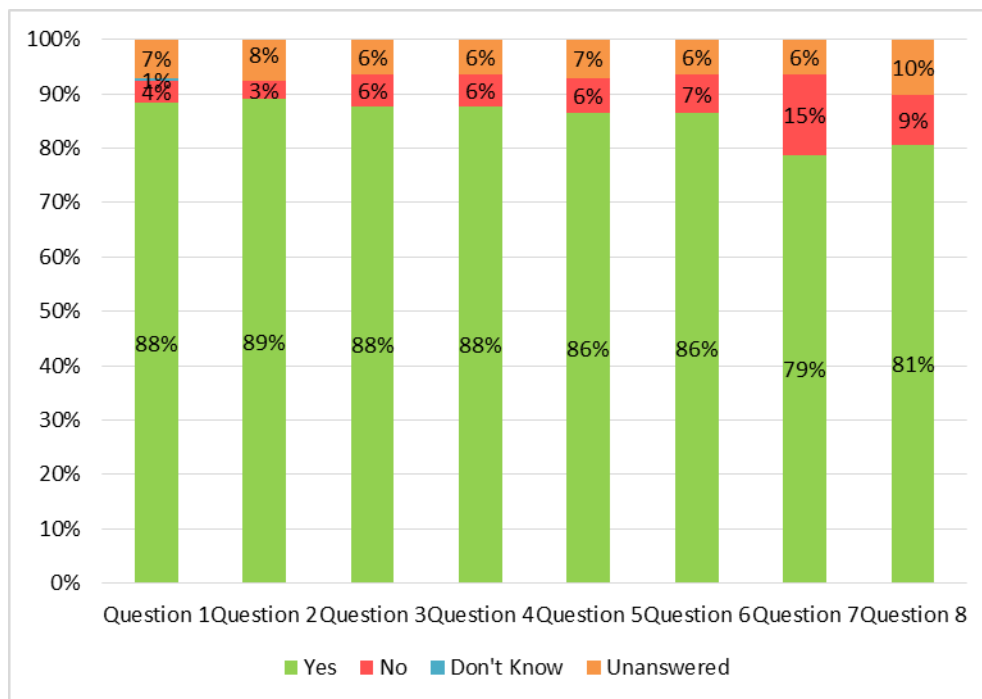
5.3. For Inpatient Care services there were 156 POY responses received during Quarter 3, which is 12.2% of all patients discharged/ open to services during the period. For Specialist Care services 125 responses were received, which is 0.5% of all patients discharged/ open to services. For Community Care services 11 responses were received, which is 0.0% of all patients open to services during the period. It must be noted that the POY methodology was not adopted by Community Care Services, but returns are the result of service restructuring.

5.4. Work is commencing to review the current POY landscape, with a view to take a standardised approach to be used across all services to enable comparisons and trust wide reporting.

6. SERVICE USER POY – INPATIENT CARE GROUP

6.1(i). For Inpatient Care, POY feedback continues to be received from a range of wards (POY Survey Appendix 1). Of the 156 responses received during Quarter 3, 34% were received from Sunderland & South Tyneside Adult Mental Health Inpatient Services, 26% from Newcastle & Gateshead, 40% from Northumberland & North Tyneside, 0% from North of Tyne Older People Services, and 0% from South of Tyne Older People & Learning Disability Services.

Figure 6: Proportion of Yes/ No/ Don't know/ Unanswered Responses to the POY quantitative questions.



Q1) Are staff kind and compassionate? **Q2)** Do you have confidence and trust in the staff? **Q3)** Do you think that the staff have the knowledge and skills to help you? **Q4)** Do you know who to go to with any problems about your care and treatment? **Q5)** Do staff support you to access the information you need? **Q6)** Did staff consider all of your relevant personal issues when planning your care and treatment? **Q7)** Are you as involved as you want to be in decisions made about your care and treatment? **Q8)** Do staff focus on your achievements, your aspirations and your hopes?

6.1(ii). The responses in figure 6 show that 7 out of 8 questions asked received over 80% positive ('yes') response. This is an improvement on Quarter 1 & 2, whereby only 50% of the questions (4 out of 8) received over 80% positive response. These improvements emerged in Q4, Q6 and Q8. Q7 has consistently (since Quarter 4 2014/15) and continues to receive the highest proportion of negative ('no') responses (Qtr. 2, n = 17%; Qtr. 3, n= 15%).

Examples of efforts being undertaken by wards to address the concerns raised include:

For Q7. - A meeting with the service user and carer will be arranged after the 72 hour meeting to ensure that the plan of care is further discussed, agreed with and understood (Shoredrift).

6.2. The POY process allows staff to proactively act upon service users and carer views. The key issues elicited from the Quarter 3 POY additional comments sections are reported below with area examples of actions undertaken:

Prevalent Patient Feedback Themes 'You Said'....	Service Line	Actions under taken by Trust Services 'We Did'....
1. More opportunity and choice of recreational activities i.e., games, sports etc.	Sunderland & South Tyneside	Explore the potential of therapeutic activities based outside of the hospital setting (Aldervale).
2. Adequacy of food provision – limited in quality and choice.	Northumberland & North Tyneside	Monitor monthly feedback via food and nutrition sub group.

7. SERVICE USERS POY – COMMUNITY CARE GROUP

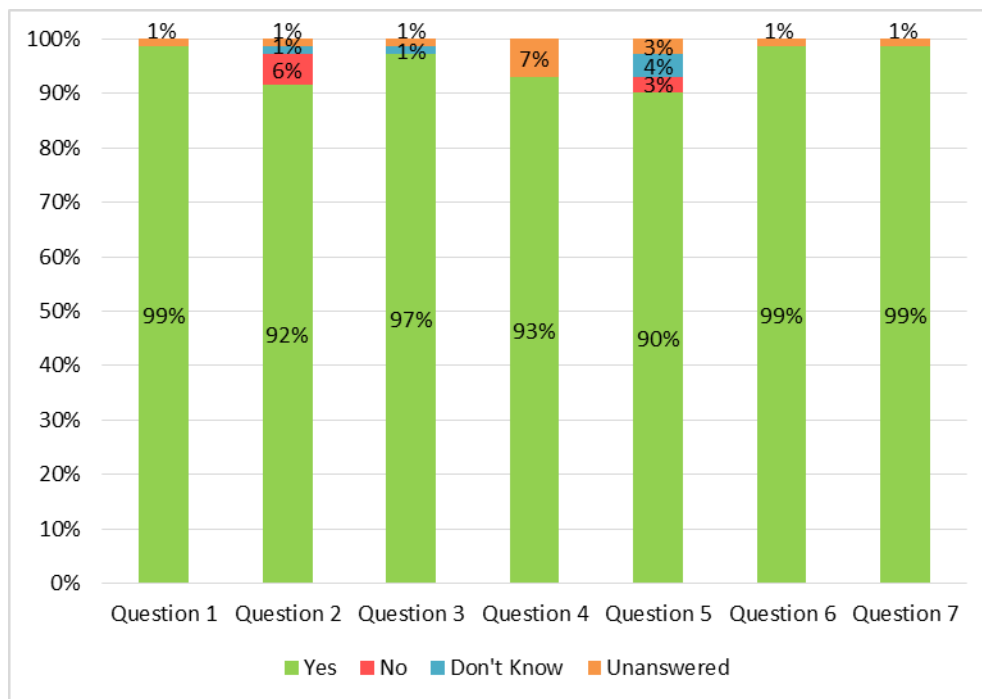
- 7.1. For the **Initial Response Team** there remains no responses for Quarter 3 2015/16.
- 7.2. The **Crisis Resolution Home Treatment Teams** received 11 responses during Quarter 2 2015/16 (Sunderland n = 4; Gateshead n = 7).
- 7.3. **Annual Community Points of You Survey 2015/16** - The development of the annual Community POY Survey is currently being undertaken by delegates of the Community Q & P Care Sub-Group. A new methodological approach to data collection of patient feedback has been agreed in the form of telephone interviewing. The group are in the process of finalising core questions, CRIB sheets, and supporting resources, with the survey scheduled to commence in January 2016 for 3 recurrent months.

8. SERVICE USER POY – SPECIALIST CARE GROUP

For Specialist Care, in Quarter 3 service user feedback was received from 5 areas:

- 8.1. From **Forensic Learning Disability Services** there were 21 responses received from service users.
- 8.2. For **Children and Young Peoples Services** there were 16 responses received.
- 8.3. For **Neuro-Disability Services**, 16 responses were received. Circa 50% of the responses were received from the newly provided CABIS service.
- 8.4(i). **Addictions Services** – There were 72 responses received from across Addictions services for Quarter 3.

Figure 7: Proportion of Yes/ No/ Don't know/ Unanswered Responses to the POY quantitative questions.



Q1) Are staff kind and compassionate **Q2)** When attending appointments are you made to feel safe and welcome **Q3)** Do you feel involved in deciding what care is best for you? **Q4)** Are staff non-judgemental, respectful and considerate? **Q5)** Do staff understand what it's like being you? **Q6)** Do staff give you all the information to support your recovery? **Q7)** Do staff promote hope and the positive things about you?

8.4(ii). The overall feedback was very positive, with all questions receiving over 90% positive ('yes') responses from service users. This is an improvement on Quarter 2 whereby Q5 fell under the 90% boundary. The proportion of negative ('no') response to Q2 has increased from 1% in the previous quarter to 6% at current. All negative responses received for this question were from service users attending Plummer Court. Q2 is specifically concerned with the safety of patients while attending appointments. Plummer Court are currently installing a restricted access system for entry into the day services so that only patients receiving treatment there can enter to address concerns regarding safety and security.

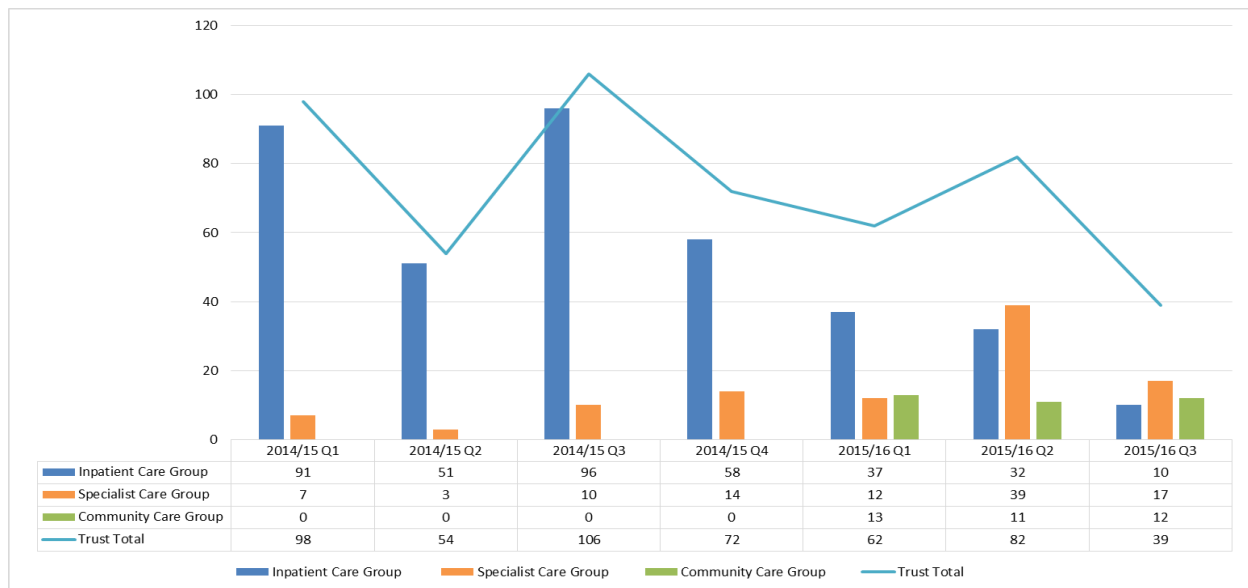
8.5. The key issues elicited from the Quarter 3 POY additional comments sections are reported below with area examples of actions undertaken:

Prevalent Patient Feedback Themes 'You Said'....		Actions under taken by Trust Services 'We Did'....
	Service Line	
1. Lack of security and feeling unsafe in the building	Addictions Services	Installation of a restricted access system for entry into the day services so that only patients receiving treatment there can enter (Plummer Court).
2. Provision of 'child-friendly' food.	CYPS	Meals/Menus are ongoing issues – working with nutrition groups to highlight comments raised by the young people and feedback

		(Fraser).
3. More opportunity for 'snack' breaks.	Neuro-Rehab	Drink rounds undertaken mid-morning and early afternoon (Ward 3).
4. More opportunity and choice of recreational activities i.e., games, sports etc.	Forensic Inpatient LD Services	A new Therapeutic Activities Programme has been implemented and the appointment of new OT's into the service has facilitated a new range of activities. This includes Gym, Football, volleyball, basketball, gardening, woodwork, music, Art, education and cookery. New DIY activity sessions have also been devised and commence in January 16. OT Leads come to the wards each week and ask each patient about their individual timetable and ask the patients what they would like to do – sessions include some individual work and team work and evening sessions (KDU).
	Neuro-Rehab	The Trust is currently looking into providing a computer for access by patients on wards 3 and 4. At current, DVD's, games stations, laptops etc. can be brought in from home as required and will need to be tested by estates staff before use. Additionally the STARR team (Social Therapy and Recreational Rehab) team are available to support patients in accessing social activities (Ward 3).

9. POINTS OF YOU RESPONSES FOR CARERS Q3 2015/16 – TRUST WIDE

Figure 8: Carer POY response rates.



9.1(i). For Carers, there appears to be recurring fluctuations in the number of responses received. In Quarter 3, 39 responses were received. This is a significant decline

from that of previous quarters, however it must be noted that due to the preceding holiday period there may be a number of late submissions to be received.

- 9.1(ii). Overall feedback from carers during Quarter 3 was very positive, with all carers identifying that staff show consideration for their needs as a carer and offered guidance and support. The issue which repeatedly is reported by carer as a concern, is staff spending the time explaining the contents of the carer information pack. For Quarter 2, 34% of carers reported that they felt this was not done, however this has improved during Quarter 3, with only 5% of carers feeling that it was not explained (n = 2).

10. HOWS IT GOING RESPONSES Q3 2015/16

- 10.1. During Quarter 3, a total of 8 returns were received from the 'How's it going' and 'How's it going now' questionnaires (Inpatient Care LD Services and Autism Services) (Ingram n = 3, Middlesbrough n = 1, Woodside n = 4).

11. OTHER PATIENT REPORTED EXPERIENCE MEASURES Q3 2015/16

11.1 GENDER SERVICE RESPONSES

- 11.1. There were 64 returns received from the Gender Identity Clinics in Quarter 3. The number of returns per quarter are continuing to increase, with Quarter 3 seeing a 21% increase on Quarter 2. As previously the responses were overwhelmingly positive, 98% of the questions were responded to with 'strongly agree' or 'agree'.

11.2. CLIENT SATISFACTION QUESTIONNAIRE (CSQ)

- 11.2. Northumberland Older Peoples (OP) Psychology Service and Northumberland Older Peoples Challenging Behaviour Service, routinely undertaken the CSQ to gain valuable service feedback from their service users. During Quarter 3, Northumberland OPs Psychology Service received 4 CSQ returns. The feedback was excellent, with reports of high levels of service satisfaction from service users. Northumberland OPs Challenging Behaviour Service received 13 CSQ returns. Again the feedback was very positive.

11.3. NEURO-REHAB FEEDBACK INTERVIEWS

- 11.3. Neuro-Rehab Inpatient Services at Walkergate Park give patients and carers the opportunity to give their feedback in an interview prior to discharge. During a 6 month period, July to December 2015, 38 feedback interviews were undertaken with service users (Ward 1 n = 8, Ward 2 n = 3, Ward 3 n = 11, Ward 4 n = 16) and 7 with carers (Ward 1 n = 2, Ward 3 n = 2, Ward 4 n = 3). The overall standard of care and treatment was rated as 'excellent' to 'good' by 84% (n = 32) of the service users. 89% (n = 34) of service users felt they had choices on treatments offered 'usually' to

'always'. 32% of services users felt the service exceeded their expectations, 16% felt it was as expected, 12% felt it was worse, and 40% were unsure. The feedback received from the carer interviews echo carer concerns across the trust, particularly around being consulted/ involved in service users' treatment – 71% felt they were not always consulted. 57% of carer reported being 'very' to 'largely' satisfied with the overall experience, 14% were 'fairly' satisfied, and 29% were not satisfied.

12. MENTAL HEALTH ACUTE INPATIENT SERVICE USER SURVEY 2015 – Quality Health

- 12.1. The 2015 survey of Mental Health Acute Inpatient Service Users involved 18 NHS Trusts in England. Service users aged 17-65 years, with a ward stay of at least 48 hours on a Mental Health acute ward or PICU and discharged in the period 1st July 2014 to 31st December 2014 were eligible for the survey. Service users who met the above criteria were sent a survey at their home address in August 2015.
- 12.2. There was an average response rate of 20%. The NTW response rate was 23% which equated to 113 responses.
- 12.3. Key demographic characteristics of the 113 service users who responded for NTW are as follows:
- 53% of respondents were female and 47% were male. The gender response proportions are reflective of that of the overall sample (55% female; 45% male).
 - 21% of respondents were aged under 35, 47% were aged 35 - 54, and 33% were 55 years and over.
 - The respondents were ethnically homogenous – 93% from a White background.
- 12.4. There are 7 sections to the survey (listed below). Overall (G47) 54% of service users rated the care they received during your recent stay in a NTW hospital as 'excellent' to 'very good'. Is was marginally higher than the results of the overall sample (G47: 50%) (all organisations taking part in the 2015 survey). In Sections A-F, NTW's performance was largely positive, equivalent or marginally better comparative to the overall sample. NTW performed significantly 'better' than comparator Trusts in areas on Section B – particularly regarding ward cleanliness (B10 and B11). The only area whereby NTW scored 'significantly' below the overall sample was in relation to food provision – ability to get specific dietary requirements (B9) – (NTW 10% yes always; Overall 38% yes always).

Section
A. Introduction to the ward (Questions: A1-A3)
B. About the ward (Questions: B4-B14)
C. Hospital staff (Questions: C15-C22)
D. Your care and treatment (Questions: D23-D34)
E. Your rights (Questions: E35-E38)

F. Leaving hospital (Questions: F39-F46)
G. Overall (Question: G47)

- 12.5. These are the initial survey results, receipt of a full management report with further analysis will follow at the end of January 2016.

13. NHS CHOICES & PATIENT OPINION COMMENTS Q3 2015/16

13.1. The two main websites for service users to leave feedback are NHS Choices and Patient Opinion. Figure 9 illustrates the star rating allocated by service users/ carer who commented on the care they received.

Figure 9: Star rating for the Trust/ Site/ Service according to NHS Choices

Hospital Site	Star Rating	Number of Reviews
NTW		12
Hopewood Park		3
Monkwearmouth		3
St Nicholas Hospital		1
St Georges Park		15

13.2. During Quarter 3 2015/16 the Trust received 8 comments through these sites – 2 were broadly positive, and 6 negative.

Website	Hospital/ Service	Comment	Trust Response Provided
NHS Choices	St Georges Park	My Father was sent to St Georges after trying to take his own life. It was determined by Psychologist in the RVI in Newcastle that it was the best place for him as we were afraid he may try to do it again and it was clear that he was depressed and not coping with life. We went to visit him and he would say that there was nothing to do in the hospital and that he was told the gym was being refurbished so he couldn't use it. He said that he was scared because the other patients in his ward (Warkworth) were more mentally ill than he was and would be violent, aggressive and stare at him and keep everyone awake at night. My Dad was depressed and needed quiet rest and recuperation as well as psychological care. He	<p>I am deeply saddened by the death of your father and would like to extend my sincerest condolences to you and your family.</p> <p>I am aware that you have many questions about the care your father received while at St Georges, I understand that a member of our team has already been in contact with you and I would like to assure you that we will do our very best to address your concerns.</p>

		<p>would ask if there was a more quiet place for him but the staff were unhelpful and said that they could not offer him anything else. So a lack of activities to do or anything meaningful to do or contribute to, a lack of quiet places to go, condescending staff that had too many patients to watch and a lack of decent food probably all contributed to my Dad going out into the grounds of the hospital to commit suicide again, and succeeding this time. No one checked what my Dad had in his pockets or where he had gone, he was allowed out into the hospital grounds on his own without a chaperone. He'd already tried to commit suicide 10 days earlier and the environment he was placed in just made him further depressed. I will never forgive myself for allowing my father to be placed in this hospital and not getting him out. That is something I will have to live with. The staff who let my father out the day he died should be sacked. They did my father a great disservice and allowed him the ability to take his life again. They have failed my father and us, his family too as we now have to go on living without him because of them. St Georges Hospital should be shut down. Where has the humanity, care, compassion and responsibility towards my father? How was he actually being helped? Maybe when you work in such an environment all those attributes fade away or maybe standards at St Georges have become so lax that no one really cares anymore. Staff that work at St Georges should be trained better, they should know what to look out for in the patients they are supposed to care for, they should know not to let a suicidal man go for a walk on his own. Staff need to be trained in Caring, Compassion, Consideration and Responsibility as all those things were lacking in the treatment of my father. I shall never forget my mistake of allowing my Dad to go to this hospital and trusting other people with his care which I should have been confident of. This hospital shall never forget what they have done to my family through their negligence and lack of duty of care to my father. Lessons need to be learnt and the standards and procedures need to move on so this never happens to another family again. RIP Dad, I'm sorry.</p> <p>Published: 03/10/2015</p>	<p>Gary O'Hare Executive Director of Nursing & Operations</p> <p>Published: 21/10/2015</p>
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<p>NHS Choices</p>	<p>St Georges Park</p>	<p>The time I had in St Georges was terrible, the staff didn't care, the food was lousy and I ended up on hunger strike, was moved soon after, very unhappy.</p> <p>Published: 02/10/2015</p>	<p>Thank you for taking time to tell us about your experiences at St Georges Park Hospital. I disappointed to hear that your stay with has not been positive and from your comments it sounds like it's been a difficult and upsetting time for you. I can only apologise that your experience has not been what you would have wanted or expected and that it was terrible.</p> <p>Looking after, working with and caring for people who are in mental health crisis with compassion and empathy is what we expect all our staff to do every day. We place service users and carers at the centre of everything we do and expect that all people are treated with respect and dignity.</p> <p>Everyone is encouraged to discuss any comments regarding their care and treatment with nursing staff on the wards at any time and we endeavour to put things right at the time.</p> <p>All service users are encouraged and supported to give feedback about the quality, choice and availability of food. We provide a balanced menu, and people with specific dietary and religious requirements are catered for and are accommodated throughout their stay and at short notice.</p> <p>Thank you again for your comments .We always try to work collaboratively with service users carers and families, and understand that by listening to the views of others, this can influence the way we can do things better.</p> <p>Published: 09/12/2015</p>
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NHS Choices	NTW	<p>Suicide attempt on 27th July - still waiting for an appointment with Tyne and Wear psychology team. Absolutely disgraceful!!!</p> <p>Published: 03/11/2015</p>	<p>Thank you for taking the time to raise this concern and sorry to hear of the experience you had. To allow us to ensure the correct service can respond to your concerns would it be possible for you to let us know which Psychology team you were referred to? You can do this by emailing PatientExperience@ntw.nhs.uk</p> <p>Thank you again for taking the time to leave feedback - we do appreciate all feedback we receive.</p> <p>Published: 24/11/2015</p>
Patient Opinion	Monkwearmouth	<p>All of the nursing staff were caring and attentive. Always explained every procedure in great detail which made me feel relaxed and not stressed. My consultant and the doctor who looked after me were incredible and I cannot thank you all enough!!!</p> <p>Published: 09/11/2015</p>	<p>We would like to thank you for your positive feedback regarding your experience in Monkwearmouth Hospital. We value your comments and these will be shared with our staff. We appreciate you taking the time to comment on your experience, all feedback is valuable and is used to help us continually improve the services that we provide.</p> <p>Published: 19/11/2015</p>
NHS Choices	St Georges Park	<p>I was recently a patient at this hospital and cannot recommend it enough, everyone that works there is so lovely, polite and professional. Such a friendly environment, always treated with respect and felt so welcomed by everyone I met. Such a fantastic hospital.</p> <p>Published: 16/12/2015</p>	<p>We would like to thank you for your positive feedback regarding your experience in St Georges Hospital. We value your comments and these will be shared with our staff. We appreciate you taking the time to comment on your experience, all feedback is valuable and is used to help us continually improve the services that we provide.</p> <p>Published: 17/12/2015</p>

NHS Choices	NTW	<p>Was told by my doctor that I would be referred to this service - which took 6 weeks. When I finally got an appointment I was told I would need to wait a further 3 months despite severe levels of distress and thoughts of harming myself. I understand this is a free service but why wasn't I told how long it would take at the beginning? It feels like a complete waste of time and that I might as well have started medication two months ago.</p> <p>Published: 17/11/2015</p>	<p>Thank you for taking the time to raise this concern and sorry to hear of the experience you had. To allow us to ensure the correct service can respond to your concerns would it be possible for you to let us know which service you were referred to? You can do this by emailing PatientExperience@ntw.nhs.uk</p> <p>Thank you again for taking the time to leave feedback - we do appreciate all feedback we receive.</p> <p>Published: 03/11/2015</p>
NHS Choices	RADS – Gibside/ NTW	<p>This review is specifically about the Regional Affective Disorders inpatient unit at the Campus for Ageing and Vitality, Newcastle upon Tyne (now based, I believe, at St Nicholas Hospital.) It is not about the outpatient service or the wider hospital. Our daughter spent four weeks as a patient in this unit in November 2014 and after more than ten years of illness and suffering we all had high hopes that it might provide the care and treatment she so desperately needed. Sadly I can say, without a shadow of a doubt, that her mental state was worse when she was discharged than it had been when she was admitted. Most alarming of all was the fact that she was sent home in a highly distressed and vulnerable state (which had been precipitated by the unit's inadequate care) without appropriate support in the community or hope for the future. The Regional Affective Disorders Unit claims to provide a specialist inpatient setting for the treatment of difficult, long-term mood disorders by experts in the field. What we witnessed was a bleak, emotionally cold place, where kind staff were the exception and relatives were treated in a defensive and hostile manner. Despite the posters on the walls upholding a triangular model of care - that is a partnership between patient, professionals and carers - we never felt this was a reality. In fact although we had cared for our daughter for many years we felt the senior staff treated us in a patronising, arrogant and dismissive way and certainly didn't involve us in our daughter's care: they acted as though they knew everything and we knew nothing. It was a far cry from the empathy and nurturing we had expected from a 21st century mental health unit. As soon as the unit couldn't cope with our daughter's problems any more</p>	<p>Seeking a response – a reply will be published soon.</p>

		<p>they were quick to turn the blame on her and to imply she just wasn't following advice or trying hard enough! We got the impression they just didn't want challenging patients there to disrupt the smooth running of the unit and rather than lose face by admitting 'defeat' it was easier to turn her out like a child being expelled from school. Perhaps in future these mental health 'experts' might find the honesty and courage to acknowledge the patient's problems with compassion (who would choose to have such devastating illness?) admit they don't always have answers and attempt to put kind and appropriate support in place in the meantime. Furthermore, the unit's implementation of 'safeguarding' policies was chaotic and appallingly communicated: it seemed as if their sole aim was to be seen to be protecting the public and thereby protect their own backs. They appeared to overlook the fact that they also had a duty of care to our daughter.</p> <p>A year on, we are all still trying to cope with the sense of abandonment the managers and senior staff at this unit made us all feel. For our daughter it has meant another year of illness, another year of vulnerability and despair.</p> <p>Published: 29/12/2015</p>	
NHS Choices	St Georges Park	<p>I was admitted to Alnmouth ward 10 weeks ago and in fairness never ever want to return I was in pain a lot of the time and was told it was in my head since coming home and having numerous tests I have found out that I have an enlarged uterus a rectal prolapse and a huge fibroid the staff I feel didn't give a damn and were very unconcerned enough said I think.</p> <p>Published: 11/12/2015</p>	Seeking advice – a response will be published soon.

14. COMPLIMENTS AND THANK YOU'S FROM CHATTERBOX – Q3 2015/16

A summary table of the thank you's and compliments received and posted on the Trusts chatterbox is included below (n = 1):

Specialist Care	Fraser	Oct-15	<p>We'd like to say a very big "Thankyou" for taking such great care of our son. Words cannot describe how grateful we feel that you made and contributed to a very successful admission. We could never imagine in January that by October, our son would be such a happy young man and feeling very sad to be leaving you all.</p> <p>We are very aware a lot of his progress is due to your special care and support.</p> <p>Thank You!!</p>
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15. ACTIONS TO IMPROVE SERVICE USER AND CARER EXPERIENCE

The Trust values service user feedback and it is important we also involve them as well as our staff in identifying the improvement in activity. This report will be shared with service user forums, the Council of Governors Quality Scrutiny Group, the Board of Directors and the Groups.

16. ACTIONS TO IMPROVE REPORTING

A proposal has been developed and will be considered at the Trust Service User & Carer Experience Group which looks at ways of improving the whole patient experience feedback mechanism from looking at ways to increase responses to the various surveys available to service users and carers, streamlining the range of surveys offered, to improving communication and feedback loops across the Trust for patient experience data that is received.

Monthly data at service level is now being provided to Groups for their information and analysis.

17. RECOMMENDATIONS

The Board of Directors are asked to note the information included within this report and provide comments on report refinements for future quarters.

Lisa Quinn
Executive Director of Performance & Assurance
January 2016

The NHS Friends and Family Test

We would like you to think about your recent experience of our ward/service/team.

How likely are you to recommend our ward/service/team to friends and family if they needed similar care or treatment?

					
Very likely	Likely	I am undecided	Unlikely	Very unlikely	I don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



What was good about your experience?



What would have made your experience better?

Please tick this box if you do not want your comments to be made public

Was your recent experience of care within a: Community team Ward

Which ward/service/team do you access?.....

What is your sex? Male Female

What age are you?

0-15 16-24 25-34 35-44 45-54 55-64
65-74 75-84 85+

What is your ethnic group?

White Mixed/Multiple ethnic groups Asian/Asian British
Black/African/Caribbean/Black British Other ethnic group

What area do you live in?

Gateshead Newcastle North Tyneside
Northumberland South Tyneside Sunderland
Other Please state.....

You can complete these questions online at www.ntw.nhs.uk/fft

This information can be made available in other formats on request (eg large print, audio or other languages). Please contact the Patient Information Centre
Tel: 0191 223 2545



Appendix 2

Service Area/Ward:		For the Month/Year of:		Number of cards completed:	
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Questions for Service Users

	Yes	No	Don't Know	Not Answered
Are staff kind and compassionate?				
Do you have confidence and trust in the staff?				
Do you think that the staff have the knowledge and skills to help you?				
Do you know who to go to with any problems about your care and treatment?				
Do staff support you to access the information you need?				
Did staff consider all of your relevant personal issues when planning your care and treatment?				
Are you as involved as you want to be in decisions made about your care and treatment?				
Do staff focus on your achievements, your aspirations and your hopes?				

How do staff involve you?

Comments:	Actions:
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What was it about your care and treatment that you found most helpful?

Comments:	Actions:
------------------	-----------------

What hasn't gone as well as you expected?

Comments:	Actions:
------------------	-----------------

What activities would you find helpful?

Comments:	Actions:
------------------	-----------------

Is there anything you feel we need to change?

Comments:	Actions:
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Is there anything else that you'd like to tell us about the service?

Comments:	Actions:
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Please send this Monthly Return electronically to patientexperience@ntw.nhs.uk, thank you