Southern Health and Social Care Trust

Quality Care - for you, with you

Action Plan to Enhance Personal and Public Involvement

Within the Acute Directorate 2018-2019 with progress at 31/3/19

Personal and Public Involvement (PPI)

Involving you, improving care

This PPI Action Plan outlines the key actions that will be taken to enhance Personal and Public Involvement during **2018/2019** and will feed into the overall Trust Corporate PPI Action Plan.

The key contacts in relation to this action plan are:

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PPI Indicators

1 Information

1. Do you have information explaining who you are, what you do and how you can be contacted?
2. Do you provide information on the standards service users and carers can expect from your service?
3. Do you provide information to help service users or carers to better understand and manage their health and/or social care needs?
4. Do you signpost and/or provide information to service users / carers of other sources of support available locally?
5. Do people who use your service and their carers know how to make a complaint?
6. Do people who use your service and their carers know that they have a right to be involved in the planning, development and evaluation of the service you provide?
7. Do you provide a list of opportunities for involvement?
8. Do you maintain a database of interested people?
9. Do you provide feedback to those who have been involved?
10. Do you provide feedback on impact and learning?

2 Levels of involvement

1. Do you involve service users in the development of their care and/or treatment plan and have mechanisms in place to monitor and evaluate how staff in your area of responsibility uphold the 5 Patient Client Experience standards :
   - i. Respect
   - ii. Attitude
   - iii. Behaviour
   - iv. Communication
   - v. Privacy and Dignity?
2. Do you involve service users and their carers/ family in the evaluation of the service you deliver?
3. Do you involve service users, carers and the public in the development of new services or in planning service improvements for the service you deliver?
4. Do you involve service users, carers and the public in the planning and development of services/projects that influence the way your Directorate carries out its business?
5. Do you involve service users, carers and the public in the planning and development of services/projects that influence the future direction of the Trust?

3 Training

1. What mechanisms do you have in place to assess the training and development needs of your staff to enhance their skills in personal and public involvement?
2. What mechanisms do you have in place to assess the training and development needs of your service users, their carers and the public to enable them to participate in involvement activities?
3. What training and support do you provide for staff, service users and carers?
4. What opportunities can you identify for service users and carers to become involved in the training of your staff?

4 Monitoring and Evaluation

1. How do you measure/assess the impact and outcome of your involvement activities?
2. What has been the impact of your PPI activities on services?
3. Has PPI improved the patient client experience/quality of care? If so, how?
4. What did those involved think about the process of involvement?

1. Information

1. Provision of Information and Feedback — **Completed**

2. Service User and Carer Involvement

Key Objective: *Service Users, Carers and the public are directly involved in the planning, delivery and monitoring of Trust services at each of the 5 levels identified in the Trust's Strategic PPI Action Plan Framework.*

Key Deliverables	Key Actions 2018/19	Timescale & Leads	RAG rating	Progress Update/Impact @ 31/3/19
Daisy Hill Hospital Emergency Department Pathfinder Project	• Continue to support the involvement of the local community in the Daisy Hill Pathfinder project group as it moves to the implementation phase • Host a GP Engagement Event to share ideas and seek GP involvement	Dr AM Telford Charlene Stoops March 2019		• Ongoing – Support continues to be provided to local community representatives involved in the Daisy Hill Pathfinder project group • Completed - GP Engagement Event hosted on 27th June, follow up attendance at SALT event in September • The new Direct Assessment Unit at Daisy Hill is now open, services in the new Unit will begin in a phased way
Newry Health and Care Centre Development	• Continue to support the involvement of the local community in the planning and development of the Newry Health Care Centre Project as it progresses through planning approval to contract award and construction	Charlene Stoops (Project Director), Andrea Turbitt (Project Manager) March 2019		• The Trust currently awaits the outcome of the planning application, pending approval the Trust will re-engage with the various internal and external stakeholders in progressing RDD stage 2 design in advance of commencing construction • The Project team aim to have RDD stage 1 design closed out by end of March 2019 to enable the next stage to progress pending planning approval.
Modernisation of Stroke Services, Dementia and Hospital Services	• Gather feedback from Service Users and Carers throughout the Stroke Care Pathway (Acute, Non-acute, Community and C&V Phases) • SSNAP audit results	E Gishkori A McVey M Crilly March 2019		• Public consultation document published • SSNAP audit results excellent. IMPACT: Rating categorisation improved for both CAH & DHH sites since previous audit

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Key Deliverables	Key Actions 2018/19	Timescale & Leads	RAG rating	Progress Update/Impact @ 31/3/19
Redevelopment of Craigavon Area Hospital	• Continue to involve service users, carers and other stakeholder in the planning and development of new hospital on Craigavon site • Corporate Planning representatives to attend / provide updates to the quarterly PPI Panel meetings on each of the respective work streams • PPI Panel to link into the project management structure • Utilise the 'Health and Wellbeing Information Zone' within the main foyer of CAH to promote any redevelopment of CAH	C Stoops E Gishkori March 2019		• Business case for this project submitted to DoH 2016; awaiting approval • Some baseline evaluation of patient experience through use of surveys was undertaken in CAH by Corporate Planning team.
Dungannon Health and Care Centre Development	• Seeking involvement of the local community in the planning and development of the Dungannon Health and Care Centre Project as the Trust progresses the development of the business case for submission to the Department of Health	Janet McConville (Project Director), Denise McClure (Project Manager)		• Have shared a brief outline of the aim of the project and seeking representatives to come forward be part of the planning. Expression of Interest forms to be submitted by 8th February 2019. • Meeting to be established will those who have expressed an interest in being involved to agree the best approach on how to engage as the project progresses.
Cardiology	• Develop a cardiac research website to be accessed by Patients, their families, SHSCT Medical, Nursing & AHP colleagues and Primary care colleagues. Working with Craigavon Cardiac Care Association ***(*PPI Small Grants funded project)***	Dr. David McEneaney March 2019		• PPI case study outstanding
Orthopaedic & In-Patient Physiotherapy Department	• Joint Arthroplasty Patient Information Booklets. Pre-operative booklets for Total Hip replacement (THR) and Total Knee Replacement (TKR) joint arthroplasty surgery***(*PPI Small Grants funded project)***	Mark McGivern March 2019		• Complete. IMPACT: The central aim of 1 patient information booklet was met. A secondary opportunity to enhance patient communication was identified during the process and was consequently pursued by way of an interactive monitor in orthopaedic out-patients.

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Butterfly Scheme	• Continue to roll out Butterfly Scheme in acute and non-acute hospitals • Continue to identify champions to attend training sessions • Continue to involve carers in the delivery of Butterfly training	HOS's March 2019		• Butterfly scheme continues to be promoted on wards. Scheme included in induction of new staff and promoted at team meetings • SOP shared with staff & wards
Evidencing compliance with the 5 Patient &Client Experience Standards and 10,000 Voices Project	• Chair PCE Steering Group • Develop & monitor implementation of PCE & 10,000 Voices Action Plan • Support service users / carers to sit on Steering Group and Committee	H Trouton March 2019		• On-going • PCE & 10,000 Voices Action Plan 2018/19 (progress updates below) • Valued contribution of service users/carers continue to participate in steering group and committee.
	• Continued attendance at Regional PCES Steering Group and Working Group to drive and shape this initiative and develop mechanisms to address issues raised through audits	H Trouton March 2019		• The Chair of the Steering Group is a member of both the PCE Committee and Regional PCE Steering Group and provides verbal and written report updates on the progress of the Trust's PCE Steering Group work plan.
	• Continue to support the Nursing Quality Indicator (NQI) Steering group	March 2019		• Work is on-going to develop a bespoke database and IT solution that will support the collection, analysis and presentation of data from the four domains of the NQI Framework • Improvement work arising from the research and on-going testing of the audit tools had commenced. (review of 'bed-end' documents (using agreed criteria) is in progress in acute and non-acute in-patient areas) • The patient experience component of the NQI Framework has dovetailed with the Patient/Client Experience work programme

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Evidencing compliance with the 5 Patient &Client Experience Standards and 10,000 Voices Project (cont'd)	• Ensure staff continue to use the Compliments Poster Template to showcase compliments /experience of service users & carers	Ward Managers March 2019		• Compliment posters continue to be developed and displayed within wards where possible
	• Agree Acute PCE priorities for 18/19 • Implement actions to address regional PCE priorities and provide quarterly up-date reports to PCE & 10,000 Voices Coordinator	E Gishkori AD's March 2019		• Spread of Always Events, Mixed Sex Accommodation, Noise at Night, Always Event in Ramone OPD pilots completed and spread plan in place.(Apertures on Check – in screens; yellow name badges; subtitles always on TVs;deaf communication card circulated to local service users; deaf card display stand installed) Care parking and environmental audits completed by estates
Human Hospital: Camerados model	• Human Hospitals is an innovative concept developed by *Camerados* which aims to create social environments that enable human connections by creating spaces for people to be alongside as equals and look out for each other ***(*PPI Small Grants funded project)***	M Casey March 2019		• Structure in place • Landscaping in place • Opening event July 2019
Always Event OPD (Out Patients dept) DHH	• Bring recommendations from Always Event, Ramone OPD in CAH and further develop locally	M Casey March 2019		• Nursing Governance staff met with local Service Users to identify any further barriers; feedback being actioned. Improvements made to date: sliding glass reception window, improved OPD exterior signage.
Mixed Sex Accommodation	• Re-audit 4 wards previously audited by RQIA in 2012 • Develop report	Oct 2018 Nov 2018		• Completed • Trust's mixed gender accommodation policy has now been reviewed in partnership with Equality Unit
Noise at night pilot, Trauma Ward,CAH	• Based on qualitative & quantitative research and Service User feedback, pilot project to measure effects of reducing noise at night to aid patients recovery. Pilot evaluation end of March 2019.	M Casey March 2019		• Baseline noise monitored through sound ear, training sessions for ward staff, comfort resources in place, working group established.

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Integrated Maternity and Women's Health and Cancer and Clinical Services				***Barry Conway***
Cancer Services	• Continue to support the development of the Cancer User/Carer Group • Involve Cancer User / Carer Group in the planning, • development and delivery of cancer services	F Reddick L Smart S Clarke M Haughey March 2019		• Membership has increased to include local councillors from ABC area. • User/carer group participated in a telephone prehabiltion survey to help plan and design, program and content to support patients from initial diagnosis stage.
	• Support the development of the regional Acute Oncology Service. • Undertake local patient and staff surveys to measure the impact of the service.	F Reddick M Haughey March 2019	 	• Regional service established. • Patient and staff feedback to be collated and reviewed. • NI survey completed and results compiled regionally and per trust
	• Support the NI Cancer Patient Experience Survey and its findings.	F Reddick M Haughey March 2019		• <u>Impact:</u> results to inform 2019/20 cancer service improvement action plans.
	• Conduct Breast Cancer Screening Survey with service users at Lurgan hospital and the Dromalane site in Newry.	March 2019 Margaret Holland Christine Robinson		• Completed
	• Support the regional review of Breast assessment services. • Breast Screening gowns updated due to user feedback			• Ongoing Completed

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Key Deliverables	Key Actions 2018/19	Timescale & Leads	RAG rating	Progress Update/Impact @ 31/3/19
Integrated Maternity and Women's Health and Cancer and Clinical Services (cont'd)				***Barry Conway***
Radiology	• Explore other means of involving users in service improvement initiatives	Richard Gould March 2019		• 'Patient experience' radiographers identified to assist further progress and harvesting of ideas, invitational email sent to 1 service user for invitation to attend regional radiography workforce review
	• Patient/client experience guidance paper distributed for comment in Dec 2018			• Completed. Positive feedback received
	• Benefits / risks of ionising radiation patient information distributed for comment in Dec 2018			• Completed. Comments received and additional patient information created.
	• Annual radiology service questionnaire			• Competed. June 2018. Largely positive. Impact: some minor repair works highlighted and actioned in STH X-ray, 3 service users registered and agreeable to telephone surveys/service improvement questions
	• Annual paediatric survey created and performed in CAH			• Completed. Impact: greater consideration needed for young children while waiting for procedures: more colour, books and jigsaws added in the waiting area, Staff informed to always have TV turned on to children's channel when they are in the waiting area. A kindle has been purchased for the room, Room 7 ultrasound to be painted with characters, paediatric survey to be expanded to emergency department and nuclear medicine
	• Invite letters developed and issued to service users by reception staff on a periodic basis to invite them to register their details with radiology			• Good response

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Integrated Maternity and Women's Health and Cancer and Clinical Services ***Barry Conway***

Key Deliverables	Key Actions 2018/19	Timescale & Leads	RAG rating	Progress Update/Impact @ 31/3/19
Maternity Services Liaison Committee (MSLC)	• Continue to work in partnership with the MSLC and involve the committee in the development, improvement or planning of services by providing regular up-dates at each meeting.	Wendy Clarke MSLC March 2019		• Midwifery Led Unit, DHH: Unit Sister appointed in 2018. IMPACT: provided leadership & structure, dedicated team in place. During 04/18-03/19: 222 deliveries in unit. Steady increase shown
	• Continue to support service user attendance at the Labour Ward Forum and ensure that relevant information is disseminated to MSLC membership			• Continue to review all aspects of labour ward at forum
	• Open Bereavement Suite within the Delivery Suite at Daisy Hill Hospital (Practically and emotionally support families following the loss of a baby).			• 'Willow Suite' opened in autumn 2018. MSLC, Bereavement, and Chaplaincy teams worked with charities (SANDS). IMPACT: Parents greater privacy
	• Participate in PHA Initiative: 'Getting Ready for Baby' (Ante-natal educational program).			• Funding expired March 2019: IMPACT: extremely successful project. SHSCT integrating & continuing to support and develop recommendations into service delivery
	• Patient satisfaction survey			• Survey monthly: good feedback received; some areas highlighted for improvement; to be actioned
Breast Feeding	• Continue to support and evaluate the Breast Feeding Peer Support service • Support the regional evaluation	Maternity staff, BF Support volunteers March 2019		• Staff absence affected service. Review planned to identify improvements. • No regional evaluation during 2018/19.

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Integrated Maternity and Women's Health and Cancer and Clinical Services (cont'd) — *Barry Conway*

Key Deliverables	Key Actions 2018/19	Timescale & Leads	RAG rating	Progress Update/Impact @ 31/3/19
Home Birth Policy Review	• Involve MSLC and wider service users in the review of the Trust's Home Birth Policy in line with NICE guidelines	Patricia Gillen H Trouton MSLC Chair March 2019		• Review not yet actioned, still awaiting draft proposals.
Early Pregnancy loss	• Design and distribute questionnaire to eliminate or at least significantly reduce the number of booking appointments issued to women who have experienced early pregnancy loss.	Wendy Clarke Oonagh Campbell-Kelly		• Questionnaire co-designed. 38/52 response rate, free text detail: highlighted potential areas of development. Staff quiz also completed to gauge issues. Progress to date presented to AD & at IMWH Audit meeting.
Functional Support Services and Service Improvement				***Anita Carroll***
Support Services Satisfaction Survey (Domestic, Catering, Portering and Laundry Services)	• Conduct Support Services Satisfaction Survey with inpatients • Conduct Catering Services Satisfaction Survey with staff • Conduct Laundry Services Satisfaction Survey with service users in S Trust & Belfast Trust	K Corley SMcLoughlin March 2019		• Laundry Surveys completed - SHSCT June 2018. Impact: Laundry Services have added new stock to the system and deliveries have been increased/ prioritised to try and ensure sufficient supplies are in circulation. Improved management of stock through the introduction of spot checks to ensure no stock piling of linen and monitoring of pillow returns compared to outputs. Improved quality as a result of refresher training provided to staff.
Vending Services at Craigavon Area Hospital	• Introduce hot beverages vending machine in front foyer CAH.	Support Services HOS Sept 2018		• Complete • Business Case for hot beverages vending machine approved at Investment Committee on 14/1/19. Impact: Hot drinks available for patients / visitors and staff 24/7 which will help to improve catering services and the patient / visitor experience.

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Key Deliverables	Key Actions 2018/19	Timescale & Leads	RAG rating	Progress Update/Impact @ 31/3/19
Support Services – Car Parking	• Engage with Translink to review the public transport networks to the Craigavon and Daisy Hill Hospital sites (bus and train) and identify alternative modes of transport for staff/service users and also to look at options for promoting pubic transport. This is part of ongoing work within the Southern Trust to help reduce the pressure on car parking and traffic management problems on the hospital sites.	Support Services HOS Oct 2018		• Complete. Short Life Working Group set up with Translink. Team Translink visited CAH 22/11/18 and DHH 26/11/18. Message put on SHSCT social media and digital screens at CAH and DHH to encourage people to avail of some of the public transport that Translink provides along with timetables and route planners. DHH stop added to Armagh Newry Bus Route from November 2018. Digital screen installed in CAH main foyer display Translink Real Time Passenger Information <u>Impact</u>: Improved public transport information available for patients and visitors
	• Liaison with Estates to have drop-off space created at Bluestone.	Support Services HOS Oct 2018		• Complete. <u>Impact</u>: The Arts Care team can drop off/ pick up equipment and supplies at the door for work with clients
	• Extend car parking enforcement at CAH to improve traffic management on the site.	Support Services HOS Aug 2018 A Carroll Feb 19		• Complete. Proposal to extend enforcement approved at SMT and implemented 29/10/18. <u>Impact</u>: Improved traffic and pedestrian access
	• Open a new Pay and Display Car Park at the main entrance at Daisy Hill Hospital following the relocation of Outpatients Department.			• Complete. <u>Impact</u>: The new Pay and Display Car Park helps patients accessing the new Outpatients Department at Bernish House

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Nutrition in the Workplace	• Take a lead role in the Trust's Nutrition in the Workplace Group to implement the Minimum Nutritional Standards, so that healthier food choices are in place for staff and visitors in health and social care settings.	Support Services HOS & Locality Support Services Managers Mar 2019		• Catering Services and the Dieticians have completed audit within the Trust dining rooms and coffee bars to measure compliance against the Minimal Nutritional Standards for Catering in Health and Social Care (2017). Where standards were not met work is ongoing to make changes to staff menus, recipes for staff meals, snacks and pastries, and also the range of confectionary and soft drinks etc.
	• Introduce healthier options to the Coffee Bars as a result of customer feedback.	Catering Managers Ongoing		• Complete Increased variety of sugar free syrups for specialist coffees and salad bowls have been introduced at CAH Coffee Bar. Fruit Brunch, Fruit Salad, a choice of cereals and portions of salad have been introduced at Portadown Coffee Bar
	• Assist Dieticians in the design of information leaflets to promote health and well-being amongst the staff and public.	Support Services HOS ongoing		• Complete Leaflets complete and there is a schedule for displaying in all dining rooms. <u>Impact</u>: Improved health and wellbeing of staff and public
ATICS, Surgery and Elective Care Division				***Ronan Carroll***
Inflammatory Bowel Disease Service	• Continue to support the development of the IBD Patient Panel • Support the IBD Patient Panel to mark IBD day • Continue to develop partnership working with Crohns & Colitis UK.	Ruth Hall March 2019		• IBD Patient Panel dormant for last few months; to be relaunched in 2019 • Additional nurse appointed, completing induction process to include PPI.
Pharmacy Division				***Dr Tracey Boyce***
Pharmacy Division	• Improving Communication between Health Professionals and Service Users. The Hospital Communication Book and the Pre-Hospital Communication Guide will be used to compliment the on-going partnership work with MENCAP to improve the hospital experience of adults with a learning disability. (*funded project)	Patricia Kingsnorth March 2019		• Complete. <u>IMPACT</u>: Staff feel more confident and comfortable to involve adults with a learning disability and their carers. The booklets will also be used for the more vulnerable service users that present themselves to acute services

3 Training

Key Objective: *Training is provided to support staff, service users, carers and other stakeholders to develop skills and knowledge to enhance service user involvement at all levels across the Trust.*

Key Deliverables	Key Actions 2018/19	Timescale & Leads	RAG rating	Progress Update/Impact @ 31/3/19
Staff receive training to develop skills and knowledge to enhance service user involvement within their area of work.	• Promote and encourage up-take of PPI Awareness Training • Promote and encourage up-take of PHA e-learning module on Trust e Learning platform • Link with PPI Team for support as required	Heads of Service March 2019		• TNA for Engage and Involve taught modules included in PPI checklist self- audit which commenced Jan 2019 in OPPC and Acute
Service Users, Carers and public have access to training to develop skills & knowledge to participate effectively in the planning, delivery, monitoring & evaluation of services.	• Disseminate information about relevant training courses to voluntary/ community sector • Focus for Emergency & Elderly Medicine and Surgery and Elective Care as per PPI Checklist	All Staff March 2019		• Literature provided to HOS & staff members at team meetings
Service Users and Carers are involved in staff training.	• Identify opportunities to involve Service Users, carers and the public when developing staff training • Focus for Emergency & Elderly Medicine and Surgery and Functional Support as per PPI Checklist	ADs, HOS & Team Leaders March 2019		• On-going. PPI staff encourage and support Directorate teams to identify and incorporate service user, carers and public involvement in training design & delivery

4 Monitoring and Evaluation

Key Objective: *Establish systems and process to monitor and evaluate PPI activity across the Trust*

Key Deliverables	Key Actions 2018/19	Timescale & Leads	RAG rating	Progress Update/Impact @ 31/3/19
Monitor progress against key deliverables in PPI Action Plans	• Continue to ensure staff up-date PPI Action Plans for their area of responsibility • Link with PPI Team to help produce regular reports as required • Provide progress up-dates twice a year • Continue to complete and return PPI Impact Template	HOS PPI Team March 2019		• PPI Team continues to establish links with Directorate teams; meet, discuss and promote PPI involvement and opportunities. • Summary Impact templates produced periodically to showcase pieces of PPI work. • Impact templates distributed to teams for completion
Continue to record new PPI activity	• Continue to encourage the completion of Impact Template to capture new PPI activity and impact to contribute to Annual PPI Report 18/19	PPI Team March 2019 Acute HOS March 2019		• Impact templates distributed to teams for completion, details submitted for annual report consideration.
Evaluate how those involved in PPI Activity think about the process of involvement	• Divisions to develop evaluation strategies to capture how those involved in PPI activity think about the process of involvement and link with PPI Team to support this • PPI Team to promote the use of the Service User Testimonial Template	All staff March 2019		• Evaluation strategies include questionnaires, exit interviews and comment boxes. PPI team assist to interpret feedback into future action points/service improvement opportunities. • Where possible, Service User Testimonial Template is completed.