

Cover Sheet

Trust Board Meeting in Public: Wednesday 10 May 2023

TB2023.40

Title: Patient Experience and Engagement Delivery Plan. Year One

Project Plan

Status: For Information

History: The Patient Experience and Engagement Delivery Plan was

presented to Trust Board on the 18th January 2023.

Board Lead: Chief Nursing Officer

Author: Caroline Heason, Head of Patient Experience

Confidential: No

Key Purpose: Assurance, Performance.

Executive Summary

- 1. The Patient Experience and Engagement Delivery Plan was presented to Trust Board on 18th January 2023.
- 2. The three-year delivery plan recognises that people's lived experience is a powerful tool to improve existing services and identify new and better ways to meet their needs (King's Fund, 2022) and sets out to strengthen the Trust's capacity and capability in working with patients, their families, and carers in learning from their lived experience and engaging with them to shape services.
- The Patient Experience and Engagement plan focuses on the two strands: 'Learning from your lived experience' and 'involving you and your family in developing our services'.
- 4. The year one project plan focuses on
 - improving listening and learning from people's lived experience
 - ensuring the Trust structures are in place to increase the engagement work in year two.
- 5. Conclusion: The paper has presented the year one project plan to support the implementation of the Patient Experience and Engagement delivery plan, with the three-year delivery plan setting out to strengthen the Trust's capacity and capability in working with patients, their families, and carers in learning from their lived experience and engaging with them to shape services.
- 6. Recommendations: The Trust Board is asked to note the contents of the report and project plan.

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Patient Experience and Engagement Delivery Plan. Year One Project Plan

1. Purpose

1.1. The purpose of the paper is to explain the year one project plan which will support the implementation of the Patient Experience and Engagement Delivery Plan 2023 - 26.

2. Background

- 2.1. The Patient Experience and Engagement Delivery Plan was presented to Trust Board on 18th January 2023¹.
- 2.2. The three-year delivery plan recognises that people's lived experience is a powerful tool to improve existing services and identify new and better ways to meet their needs (King's Fund, 2022) and sets out to strengthen the Trust's capacity and capability in working with patients, their families, and carers in learning from their lived experience and engaging with them to shape services.
- 2.3. The plan supports the Trust to listen to our diverse community to help shape the care and services we deliver, promoting the inclusion of patient and carer feedback who do not often feel their voice is heard, into delivering improvements as part of everyday quality improvement.
- 2.4. In summary the plan aims to
 - To promote the role and benefits of patients and the public in shaping our services and to develop new and innovative ways of working with you.
 - To value and strengthen the involvement of patients and the public in work which supports our strategic priorities.
 - To create systems and resources to support staff to make the best use of involvement and engagement.
 - To improve how we share the improvements made after your feedback and the patient Involvement work, we do.
 - To develop our partnerships and increase the number and diversity of people involved.
- 2.5. The Trust's clinical and nonclinical services work in a large network of organizations that have an interest in improving the experience of our

¹ Your Voice: Patient Experience and Engagement Plan 2023 - 26 (ouh.nhs.uk)

- patients, and the plan recognises how the insight, collaboration, and coproduction by working with patient groups, Health watch, education and social care and community groups enables us to better understand how to improve.
- 2.6. This plan aligns with the Trust's enabling strategies Trust Strategy 2020 2025, Nursing, Midwifery and Allied Health Professional Strategy, OUH Quality Priorities, Equality, Diversity, and Inclusion Strategy and the Clinical Strategy.

3. Working with you - where do we want to be?

- 3.1. The Patient Experience and Engagement plan focuses on the two strands: 'Learning from your lived experience' and 'involving you and your family in developing our services'. These are shown in Figures 1 and 2, below.
- 3.2. The plan gives us the opportunity broaden our approach to listen, involve, and engage with our patients and their families, learn from their expertise to guide the Trust's day-to-day work and the improved services that are introduced.

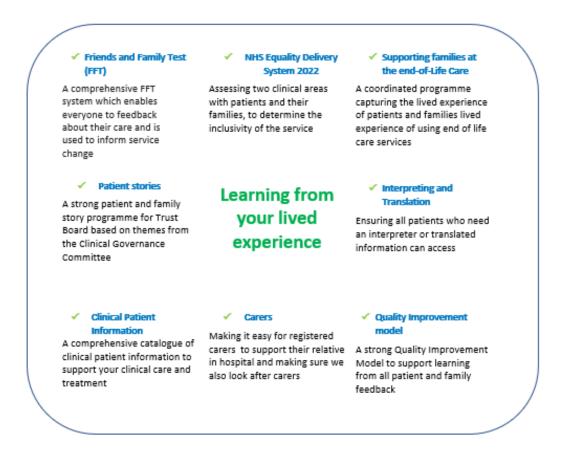


Figure 1. Learning from your Lived Experience



Figure 2. Involving you and your family in developing our services

3.3. Appendix 1 shows the work to be undertaken during the lifetime of the Patient Experience and Engagement plan and what success will look like at the end of 2026.

4. Project plan

- 4.1. The year one project plan is shown in Appendix 2 with the first year focuses on improving listening and learning from people's lived experience.
 - Strengthening the inclusivity of feedback.
 - Story campaign to learn about the experience of end-of-life care, help shape Quality Improvement and Quality Priorities.
 - Road testing the carers policy before rolling out across the Trust.

- Ensuring Interpreting and translation services work for patients and their healthcare professionals during healthcare consultations, emergency department presentations, maternity care and inpatient admissions.
- Implementing Equality Delivery System 2023 with two teams enabling members of the public to assess the inclusivity of services.
- Completing the stock take Clinical information and become PiF Tick accredited².
- Delivering PLACE in September and October 2023.
- Increasing the number of completed communication needs assessments for Accessible Information Standards³ and scoping how to include 'About me'⁴ in EPR.
- 4.2. The emphasis for year one engagement is to ensure the structures are in place to increase the engagement work in year two.
 - Scoping and planning the focus and timeline for Listen up events (interpreting and translation, QI projects, 'You said, and We did' newsletter) with Trust Governors, QI Hub, Media and Comms Team, FT membership team and Divisions.
 - Developing YIPPEE to engage more young people and raise their profile across all the Trust's services for children.
 - Strengthening the network of patient and public engagement groups (PPGs), developing support and training to set up new groups and updating the guidance. Scoping, planning and implementing the overall Trust patient and carer group.

5. Conclusion

- 5.1. The paper has presented the year one project plan to support the implementation of the Patient Experience and Engagement delivery plan, presented to Trust Board on 18th January 2023.
- 5.2. The three-year delivery plan sets out to strengthen the Trust's capacity and capability in working with patients, their families, and carers in learning from their lived experience and engaging with them to shape services.

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² https://pifonline.org.uk/

³ NHS England » Accessible Information Standard

⁴ NHS England » A patient passport that's all about me

5.3. The year one project plan is shown in Appendix 2 with the first year focuses on improving listening and learning from people's lived experience and ensuring the structures are in place to increase the engagement work in year two.

6. Recommendations

6.1. The Trust Board is asked to note the contents of the report and project plan.



Appendix 1: Working with you: Our plan.

Learning from your lived experience. What will we do?	How will we know we have succeeded?	How will we monitor progress?
FFT: Develop publicly accessible dashboard including results of the national CQC surveys, implement Easy Read FFT for people with learning disability and their family, increase the accessibility of FFT to people who do not speak or read English, raise the profile of FFT with both the maternity teams and families.	FFT will be inclusive for everyone. Patients and members of the public will be able to see the feedback we receive and changes we have made.	Monthly Integrated Performance Report (IPR) to Trust Board and Integrated Assurance Committee.
Patient Stories: Deliver a strong patient and family story programme for Trust Board using themes from Clinical Governance Committee (CGC), lead audio and video story telling events and use stories to support Quality Improvement and Quality Priority projects.	We will have run two digital story courses and we will have 10 audio or video stories available to share on the Trust website.	IPR, CGC minutes, QI Forum
Carers: Making it easy for registered carers to support their relative in hospital and making sure we also look after carers.	Carers able to register with Carers Oxfordshire. Registered carers able to access food and drink, parking, staying overnight with their relative. Monthly Dementia Café in the League of Friends at the JR Hospital. 100 Twiddle Muffs distributed to patients.	Number of carers who have registered via contact with the Trust. IPR.
Quality Improvement model: Quality Improvement Model developed with the QI team to support learning from all feedback.	Service improvement learning from feedback included Quarterly Divisional Performance Reviews	OxSCA steering group. QI forum. QT stand up. Divisional Performance Reviews
Interpreting and Translation: Easy to follow booking guidelines. Listening events to learn from patients lived experience of using interpreters. Rectify Technological challenges for video interpreting.	Reduced serious incidents relating to translation. Increased staff and patient satisfaction with interpreting service.	IPR. Patient Safety and Effectiveness Committee (PSEC). Patient Story to Trust Board.

Learning from your lived experience. What will we do?	How will we know we have succeeded?	How will we monitor progress?
Access to training enhanced to be available to staff 24/7.		
Interpreting and translation film with communities.		
Supporting families at the end-of-Life Care: Patient and Family audio and video stories story programme. Capture patients and families lived experience of using RIPEL. Undertake the national audit of care at end of life (NACEL) survey across the year.	Four patient and family stories. Completed local NACEL study.	End of Life Care Steering Group
Clinical Patient Information: Complete MRC trial for clinical led information, complete review of what clinical information is needed, standardise Trust wide information, Trust wide options appraisal for updating and creating new clinical information.	Become 'PIF Tick' accredited with Patient Information Forum	PSEC.
EDS2: Assessing two clinical areas with patients and their families, to determine the inclusivity of the service. We will assess • Patients have required levels of access to the service. • Individual patients health needs are met. • When patients use the service, they are free from harm. •Patients report positive experiences of the service.	Inclusive engagement and submitted EDS2 for Domain one.	Equality Diversity and Inclusion Steering Group

Involving you and your family in developing our services. What will we do?	How will we know we have succeeded?	How will monitor progress?
Experts by Experience: Recruit a bank of patients, families, and carers 'experts to be experience' to contribute to Quality Improvement service improvement.	We will recruit 50 experts by experience volunteers.	Quality Improvement (QI) Forum, Clinical Improvement Committee (CIC), Integrated Quality Improvement (IQI) report to TME
Patient Participation Groups (PPG) refresh: Audit PPGs across the Trust. Scope how to develop across the Trust. Update guidelines based on best practice. Develop and sustain inclusive membership.	Updated guidelines and PPG audit completed. PPG development plan completed. 'Your Voice' patient experience steering group established and meeting three times per year.	Nursing, Midwifery and Allied Health Professional (NMAHP) Board
Learning from lived experience: Hold the Experts by Experience welcome event April 2023. Experts by Experience undertake the Quality, Service Improvement and Redesign (QSIR) fundamentals training	Experts by Experience and QI plan development and welcome event delivered. All Experts by Experience completed the QSIF fundamentals training. One Expert by Experience undertake the QSIR Practitioner training.	QI Forum (CIC)
YIPPEE: Learning the governance surrounding setting up and running a committee, appointing a Chair and Deputy Chair, recruitment drive across Oxfordshire, annual workplan and date diary, develop a learning plan for the Trust young Governor's tenure	Young Governor and YIPPEE audio story	NMAHP, Governors Report to Trust Board.
PLACE and PLACE Lite: Monthly PLACE Lite assessments with experts by experience, annual national PLACE assessment.	Complete PLACE 2022 and 2023 submission. Monthly PLACE Lite schedule developed and commenced in February 2023.	IPR. NMAHP

Involving you and your family in developing our services. What will we do?	How will we know we have succeeded?	How will monitor progress?
About me' and Accessible information Standard (AIS): Implement 'About me' alongside AIS in electronic patient records (EPR).	'About me' listening summit with Experts by Experience to co-produce 'About me' for electronic patient records	QI Forum, PSEC, CIC, NMAHP, CGC, IPR.
Keeping connected and sharing our learning: We will hold three 'listen up' roadshows across Oxfordshire per year partnership with our local stakeholders including local Healthwatch, Governors and voluntary/advocacy/ community groups.	'You said we did' newsletter	NMAHP, IPR
Patient Safety: Ensure that Patients are involved at the heart of the Patient Safety Incident Framework (PSIRF).	Complete recruitment, induction and welcome of Patient Safety Partners.	PSIRF Steering Group

Appendix 2: Patient Experience and Engagement Delivery Plan. Year One Project Plan

<u> </u>	ngagement Delivery Pla														
	Partners	Governance and monitoring progress	Year one: 2022/23												
Friends an	d Family Test:	mily Test:		May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	
		Monthly Integrated													
ccessibility of FFT to people who do not speak or read English, eople with learning disability.	Imperial College NHS FT, FFT provider, QI team, clinical pilot sites - SUWON and NOTSSCaN.	Performance Report (IPR) to Trust Board and Integrated Assurance Committee. Quality reports to CGC, and externally											1.		
Develop interactive FFT dashboard for wards, departments, lirectorates, and divisions.		via the Trust website and social media and with community													
Develop the Trust wide approach of 'You said and we did' ncluding ward to Board reporting, work alongside the mplementation of the Quality Boards led by the QI Hub.		groups.													
Incorporate collection of the 9 protected characteristics in the lemographic data collected.															
Establish feasibility of inlouding the results of the national CQC surveys onto the dashboard	Information Team, QI team														
ncrease feddback from Easy Read FFT for people with earning disability and their family	My Life My Choice, Oxford Family Support Netwrk, OCC Adult Social Care, Oxford Care Providers Association														
Identify patient groups that the Trust does not hear from via FFT. Develop 3 focus days for Q4 to collect FFT data from inderrepresented groups. Collect FFT data from 3 focus days ind report to Trust Board/ Integrated Assurance Committee.	FFT provider														
Raise the profile and promote FFT with the community maternity earns, families and MVP, 5X more and community groups.	Trust Maternity services, MVP, Media and Comms														
Patient Stories			April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	
Patient and family story programme for Trust Board using		Trust Board , Clinical													
and have run and 10 audio or video stories available to share on he Trust website.	QI Hub, Media and comms, PSIRF. Clinical Governance Team	Governance Committee													
Plan Patient Story campaign for stories to support Quality mprovement and Quality Priority projects.															
	NHS E, Oxford Health NHS FT, Accessibility and carers staff network, NHS E Carers network, Oxford Family Support, Parent Carer Froum (Autism)														
Carers			April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	
Pilot project within AGM to road test the ratified policy including od and drink, parking, staying overnight with their relativebefore a coll out across the Trust.		IPR.													
Plan roll out across the Trust,	CNO, Divisonal Directors of Nursing, Matrons, Ward Teams, Clinical Hopsitality Teams														
	CNO, Divisonal Directors of Nursing, Matrons, Ward Teams, Clinical Hopsitality Teams														
	Media and Comms, WI, FT membership														
	Memeory Servide, Carers Oxfordshire, Oxford family Support Netowrk, Oxfordshire parent carer forum, Accessible and Carer Staff network.														
Interpreting and Translation			April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	
traightforward to follow .	IPR. Patient Safety and Effectiveness Committee (PSEC). Patient Story to Trust Board.														
Rectify Technological challenges for video interpreting.															
raining available for staff 24/7															

Patient Experience and Public I														
	Partners	Governance and monitoring progress						Year one: 2	022/23					
Developing interpreting and translation film with communities available on the Trust websites, social media.														
Scope listening events on lived experience of using I&T services - with provider services														
Make contact with community and faith groups to promote nterpreting and translation develop 'listening event' plan for eedback on using I&T services.														
Hold listening events on lived experience of using interpreter servcies.														
Supporting families at the end-of-Life Care			April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March
atient and Family lived experience of using RIPEL audio and ideo stories story programme - four stories .	End of Life Care Steering Group.													
Completed local NACEL study	Clinical Governance Committee													
Clinical Patient Information			April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March
Complete MRC trial for clinical led information	PSEC.													
Complete clinical information catalogue stock take mplement and Embed divisonal structure for coordinating patient inofrmation Confirm patient involvement, governance and reporting to														
PSEC Plan timeline to become 'PIF Tick' accredited with Patient														
Information Forum Equality diversity and Inclusion: EDS2			April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March
Review EDS 2022 (1A – 1D) process and approach with feedback from volunteer graders.			Ohiii	way	vuile	Guly	Aug	Оврі	001	14.00	Dec	oan	. GD	marcii
Plan EDS 2023 conversation and presentation by two teams. To nclude one Trust wide service – Interpreting and Translation service and a clinical service unit (CSU)														
Develop the standards for data collection and reporting requirements for Trust EDI relating to patients* and workforce** to enable an accurate service status and to drive mprovement.														
Review and Refresh approach to equality impact assessments for Trust clinical and nonclinical policies, standard operating procedures (SOPS) and Quality Improvement projects, ensuring that equality impacts are considered within Trust decision- making.														
Learning from Lived Experince, Experts by Experience and Quality Improvement model			April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March
Scope and plan timeline and focus for developing Experts by Experience (families, patients and carers) in QI training, QI projects	Trust Governors, Patient Safety Partners and QI Hub, OXSCA steering group													
Confirm lived experience remuneration policy														
Listen up events: Keeping connected and sharing our learning			April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March
Scope and plan focus and timeline for Listen up events interpreting and translation, Ol projects, You said and we did newsletter) with Trust Governors, Ol Hub, Media and Comms Feam, FT membership team and Divisions.	NMAHP,Patient Experience Membership Board (PEMQ),QI Hub, Patient Safety Partners, Media and Comms Team,	CGC, PEMQ												
Hold 2 listen up events followed by you said we did newsletter														
Patient Participation Groups (PPG) refresh			April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March
Review the PPG guidance in partnership with BRC and NMAHP esearch plan – ensuring inclusive membership.		Nursing, Midwifery and Allied Health Professional (NMAHP) Board and Patient Experience												
Establish PPG network with exisiting groups and Trust Governors adding new groups as developed - contribute to the work of local clinical area and connected with Trust wide work. Establish PPG plan.		Board and Patient Experience Membership Board (PEMQ),												

Patient Experience and Public E	Engagement Delivery Pla	an 2023 - 26												
	Partners	Governance and monitoring progress	g Year one: 2022/23											
Plan setting up and running PPGs training and support with one group per division.														
Scope, plan and timeline for overall Trust Patient and carer group with Trust Governors, Divisions, Healthwatch, Carers Oxfordshire, My Life My Voice, Trsut voluntary services														
YIPPEE			April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March
Develop YIPPEE branding,		NMAHP, Governors Report to												
Develop annual workplan and date diary		Trust Board.												
Learning Environment: setting up and running a committee, learning plan for the Trust young Governor's tenure														
Young Governor and YIPPEE audio story														
PLACE and PLACE Lite			April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March
Complete follow up report closing PLACE 2022														
Monthly PLACE Lite assessments with experts by experience		NMAHP												
Complete annual PLACE assessments 2023.														
About me' and Accessible information Standard (AIS)			April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March
Scope and plan how to implement and what to include in 'About me' in EPR		PSEC, CIC, NMAHP, CGC, Health Inequalitis Group												
Review AIS communication needs assessment in electronic patient records (EPR). Scope how to monitor increase in completed communication needs		,												
Patient Safety			April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March
Complete recruitment, induction and welcome of Patient Safety Partners.	Patient Safety Partners, Governors, PSIRF	PSIRF Steering Group, PSEC, CIC, CGC												