# Purpose of the Report

| delete as appropriate | For Discussion |

## SBAR REPORT

### Situation

The purpose of this paper is to update the PFPI Standing Committee in relation to PFPI activity during October to December 2015.

### Background

NHS Fife is required to involve patients, carers, service users and the wider public in the planning and development of local health services.

This report reflects examples of key work across the Board area.

### Assessment

**ACUTE HOSPITAL DIVISION**

**Endoscopy Unit at QMH**

The endoscopy unit at QMH have undertaken an Audit on Privacy & Dignity in Endoscopy during Nov & Dec 2015 using a validate tool called the Global Rating Scale.

The project aims were:

- To provide evidence for our responses to measures on Privacy & Dignity item of the **Global Rating Scale (GRS)** for Endoscopy.
- To identify any deficiencies with regards to Privacy & Dignity, and to agree local auditable outcomes if necessary.

The project methodology was:

- Successive patients who presented for an endoscopic procedure were interviewed by an endoscopy nurse following their procedure
- The questionnaire used was designed to support our responses on the Privacy and Dignity item
- Data was obtained from 65 patients undergoing an endoscopic procedure at the Regional Endoscopy Unit.
- All were outpatients.

### Results:

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did you feel your privacy was respected?</td>
<td>100%</td>
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<tr>
<td>Were you treated with courtesy and politeness?</td>
<td>100%</td>
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</table>
Were you addressed by your preferred name? 100% Yes
Did you feel safe whilst on the unit? 100% Yes
Were you made to feel at ease? 100% Yes
Did you feel that you could ask if you were unsure of anything during your stay? 98% Yes
Were you asked if you wanted to discuss your clinical care in private? 89% Yes

Patient comments:
- The nursing staff were excellent ward was lovely and clean.
- Very clean hospital.
- Very professional run operation.
- Great teamwork, all staff very pleasant informative and comforting.
- Staff deserve a raise or a reward. Best care I’ve received.
- All the nurses looked after me, they were very good and understanding.
- Could not be better.
- Nurses 100%
- Excellent care and attention very compassionate staff.
- Care was excellent thank you.
- Very pleased with service.
- No improvements staff excellent.
- Very friendly- and bright hospital.
- The staff was first class.
- Everything was superb and staff were excellent highly recommended people.
- Staff were very friendly and made experience much more pleasant, thank you. I was late in arriving staff were very understanding and facilitated the process.
- No Improvements needed- all staff are courteous, friendly and excellent at putting nervous patients at ease. Been coming here for a few times and all staff are welcoming. Quickly put you at ease and very knowledgeable. Thanks to everyone involved in looking after me.

Improvements identified following the audit:
- Patients continue to feel that their Privacy and Dignity is respected on our Endoscopy Unit.
- All patients were satisfied with the care they received.
- 89% of patients were asked if they wanted to discuss their care in private. 84% in 2014.
- 1 person did not feel toileting facilities were clean.

Action Plan:
- All patients to be asked whether they would like to have their clinical care discussed in private. This will now be added to the care pathway.
- Recovery nurse to regularly check toilets to ensure they are clean for patient use.

The team plan to re-audit in December 2016 to measure an improvement against their action plan.

Maternity Services

The introduction of ‘My Little One’ has been a hugely positive project whereby mothers of premature babies who have to be cared for in the neonatal unit can watch and listen to their baby, providing an important communication bond. Feedback from mothers has been hugely positive with one mother who said she can now recognize a hungry cry and can feed on demand.
PQI Audit cycle

The Patient Quality Indicator audit has been updated and reintroduced, with annual visits to all clinical areas. Patient feedback is a core component of this audit and the questions asked during PQI visits are detailed below:

- Were you orientated to the ward when you were admitted to the ward?
- Have you been introduced / orientated to the teams working in the ward?
- Do you know why you are in hospital and the treatment plan is for you?
- Do you feel you can ask questions about your care and treatment?
- When you ask a question do you feel listened to?
- Do staff wash their hands / use hand gel before they provide clinical care?
- Do you know which nurse is looking after you today?
- Have you been asked about what help you will need, if any, to support your discharge?
- Do you see evidence of regular and robust cleaning in the clinical area?
- Do you feel that staff respect you privacy and dignity when in hospital?

The results feed into the ward action plan is concerns are raised and followed up through the directorate governance process.

DUNFERMLINE AND WEST FIFE (DWF) COMMUNITY SERVICES

Public Partnership Forum (PPF) Reference Group Membership
Membership remained at 8 during October - December.

Register of Interest Membership
No new members to the Register of Interest were received during October - December.

Project Register
During October – December 2015, NHS Fife Community Services (DWF) PPF received 13 requests to be involved in activities, including:

- Invite to the Health & Social Care Integration Public Engagement and Participation Event
- Draft Strategic Plan for Fife
- Request for Group Representation of School of Nursing & Health Sciences.

Awareness Raising: Queen Margaret Hospital / Primary Care Resource Centre [Carnegie Unit] Update.
Information booklets have been produced and circulated: Queen Margaret Hospital Information Booklet 2015/16.

These booklets aim to provide the members of the local community with useful information to help during their visit as well as information on some of the many services available on site.

Every Ward and Unit within Queen Margaret Hospital have received these Information Booklets, as well as distribution to Abbeyview Clinic, Carnegie Clinic, 15 West Fife libraries, Carnegie Centre, Duloch Leisure Centre, Carnegie Leisure Centre, Community Learning and Development, Fife Elderly Forum, Scottish Health Council and Patient Partners.

Invoiling people: Visioning Outcomes in Community Engagement (VOiCE)
Total engagement activity across NHS Fife since the launch of this web based system is 61. The total engagement activities from DWF remains at 15.
Involving People: Recording Template
From the period October – December 2015, there has been no new Involving People templates added to the central database for DWF.

Carers Information Strategy
There are no current projects within DWF being funded by the Carers Information Strategy. All the projects that have been funded continue to report quarterly to the Carers Strategy Information Group (CSIG).

Physical activity participation among young people with learning disabilities
People with learning disabilities are known to be at risk of low levels of physical activity and associated health problems such as obesity.

Nine focus groups, of approximately 4-6 participants, were conducted in total; three in each of the three Community Service (CHP) areas in Fife. Participants were recruited via existing day services, supported accommodation and / or advocacy groups. The groups were jointly led by a Research Fellow from St Andrews University and two members of the DWF Health Improvement Team.

The research aims to inform future development of opportunities to be active among this group of young people in Fife. The aims of the research were:

- To explore participation in, and experiences of, physical activity among young people with learning disabilities
- To provide an overview of what physical activity opportunities exist throughout Fife for people with learning disabilities, for example, through Disability Sport Fife, Fife Sport and Leisure Trust, Community Use Schools and Voluntary Sector Provision.
- To determine the facilitators and barriers to participation
- To identify the preferences of people with learning disabilities in relation to physical activity possibilities.

A final report will be produced for Fife Council and NHS Fife, including an easy read version which can be fed back to participants. The report will provide, from the participants’ perspective, a picture of existing provision across Fife, gaps in service provision within each [CHP] area and an overview of the extent to which current provision meets demand.

RIVERS primary care pain programme
All patients are asked to complete an evaluation form following completion of the programme, which is used for service improvement. Patient feedback shows consistently high levels of patient satisfaction.

Pharmacist polypharmacy clinics
Patients are given a questionnaire to feedback on patient satisfaction with the service and make service improvements. Patient feedback shows consistently high levels of patient satisfaction.

GLENROTHES AND NORTH EAST FIFE COMMUNITY SERVICES

The patient feedback via the mail boxes is slowly coming in. These are providing real time feedback resulting in a quicker resolution of any issues highlighted. Staff have been identified to empty the boxes on a weekly basis, or sooner if needed. These staff will then provide feedback to the Senior Charge Nurse on any issues raised and log the correspondence on the Datix system. The process of allowing approved staff access to the DATIX complaints /
The iPads with the National Patient Experience questionnaire have been returned to IT once more as there have been further issues following the recent upgrade to the software programme. Volunteers have been trained and are on stand by to implement this across all inpatient areas once the iPads are available.

The SAFE Activity project within Ward 1 at St Andrews Community Hospital in relation to promoting safe patient activity has evaluated well from the patients/relatives point of view and has had an impact on reducing the number of patient falls. The project has now been introduced in Tarvit Ward within Adamson Hospital although it is too early to identify what impact this has had on patient falls as yet.

Fife Sports & Leisure Trust (FSLT) have also undertaken a programme of exercise activity within Tarvit ward which was enjoyed by all.

The learning from Rapid Event Investigation cluster meetings is being shared locally in the format of a LEARN summary at the Clinical Governance meeting and organisationally at the NHS Fife Adverse Events and Quality Safety and Governance meetings.

KIRKCALDY AND LEVENMOUTH COMMUNITY SERVICES

Patient stories at the Quality, Safety & Clinical Governance Group

LEARN Summary Reports are being presented at each meeting.

Mental Health Service

The Mental Health Service are currently developing a Patient and Carer Feedback Quality Improvement Plan. At present projects include: AHP Care Measure Audit, Patient Safety Climate Tool, Triangle of Care Audit Tool, Unscheduled Care Team: You Care Experience Survey, Patient Debriefs and Focused Recovery Groups.

Community Diabetes Specialist Nurse Service

The specialist nurse teams carried out a patient satisfaction survey, the purpose of which was to ascertain how patients view the support they receive from the team and identify any areas for improvement.

The recommendations:

- Continue to see patients in a timely manner.
- Continue to involve patients in the decisions about their treatment.
- Continue to support patients to set goals to support them to self manage their condition.
- Ensure all staff are up to date in health behaviour change training.
- Continue to provide patients with discharge plan and option to contact the team for future reports.
- Carry out regular service evaluation to measure patient satisfaction.
**SERVICE USER INVOLVEMENT**

**Request for Group Representation**

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<tr>
<th>Date Received</th>
<th>Project Title</th>
<th>Outcome</th>
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<tbody>
<tr>
<td>01/12/2015</td>
<td>School of Nursing &amp; Health Sciences</td>
<td>Seven notes of interest received</td>
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**Consultations**

There were no consultations over this period.

**Recommendation**

The NHS Fife PFPI Standing Committee is asked to **note** the content of this report and **comment on** the approach being taken to broaden the scope of information contained within it.
<table>
<thead>
<tr>
<th>Objectives: (must be completed)</th>
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| **Healthcare Standard(s):**   | NHS Scotland Quality Strategy (2010)  
Health Improvement Scotland, Driving Improvement in Healthcare: Our Strategy 2014-2020  
| **HB Strategic Objectives:**   | Deliver person centred care |
- Foster positive relationships  
- Learn from complaints  
- Listen, learn & lead change |

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<thead>
<tr>
<th>Further Information:</th>
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<tbody>
<tr>
<td><strong>Evidence Base:</strong></td>
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<tr>
<td><strong>Glossary of Terms:</strong></td>
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<td><strong>Parties / Committees consulted prior to Health Board Meeting:</strong></td>
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<th>Impact: (must be completed)</th>
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<tr>
<td><strong>Financial / Value For Money</strong></td>
<td>Public involvement is part of NHS Fife’s core business. Where funding is allocated to specific pieces of work, the resource is used within NHS Fife’s Standing Financial Procedures.</td>
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<td><strong>Risk / Legal:</strong></td>
<td>There are no current risks recorded for D &amp; WF and K &amp; L PPF, however G &amp; NEF PPF have registered a risk with regards to membership and recruitment to the PPF.</td>
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<td><strong>Quality / Patient Care:</strong></td>
<td>This report aims to summarise information in relation to supporting the Quality Strategy; Patient Centred, Effective and Safe.</td>
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<td><strong>Workforce:</strong></td>
<td>Staff provide information through the ‘Visioning Outcomes and Community Engagement’ (VOICE) database, and Involving People Recording template, which is included within this and other service reports.</td>
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<td><strong>Equality:</strong></td>
<td>Equality and Diversity underpins all aspects of engagement within NHS Fife. The Mainstreaming Report and Equality outcomes for service users and employees were agreed at NHS Fife Board in April 2013 and published as required by the Specific Duties to meet the Equality Act 2010. A working group has been established chaired by the Non Executive Lead for Equality and Human Rights to ensure that the 8 Equality Outcomes agreed following public consultation are implemented. The outcomes will be measured using the PDSA quality model.</td>
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