

Statement from Healthwatch Birmingham on The Royal Orthopaedic Hospital NHS Foundation Trust Quality Account 2018/19

Healthwatch Birmingham welcomes the opportunity to provide our statement on the Quality Account for The Royal Orthopaedic Hospital NHS Foundation Trust. We are pleased to see that the 2018/19 Quality Account has outlined achievements in many areas across the Trust. In particular, that the Trusts CQC rating is now 'Good' in all five domains (caring, safe, effective, responsive and well-developed). We note the improvements in the core indicators reported in the Quality Account as well as improved quality performance. The Trust has demonstrated in this Quality Account the structures it has in place to not only measure but also monitor and report on progress made in the services it delivers. We acknowledge the work that has gone into making these improvements.

Patient and Public Involvement

In our response to the 2017/18 Quality Accounts, we expressed concern that it was not clear how the Trusts use of patient feedback and experience is embedded in the various activities it carries out. We, therefore, asked the Trust to demonstrate:

- how feedback, insight and experiences have informed changes within the Trust.
- how the Trust shares good practice from positive feedback and the impact of this on services and practice.
- how the Trust communicates with patients about how you are using their feedback to make changes, and

We also asked the Trust to consider developing a strategy that outlines how and why patients, the public and carers' are engaged in plans to improve health outcomes and reduce health inequality.

We welcome the structured approach the Trust has taken to working with patients, service users, carers and volunteers. The development of a patient experience strategy is positive and will help the Trust embed patient, service user and carer experience in service improvement and the redesign of pathways. We are pleased with the activities outlined in the Quality Account that support the implementation of the strategy. In particular, improvement work on the Ulysses system that will allow better triangulation of data. Also important is that the Trust has emphasized the staff behaviours that are important for the use of patient experience such as requiring staff that 'learn from experience and feedback data'. We agree that having a staff team that understands the Trusts strategic approach for patient experience is important for developing a shared vision around the use of patient experience and feedback.

Over the past year, we have worked with the Trust in thinking through some of these issues and we hope to continue to support the Trust as you continue to develop systems to deliver consistently high-quality Patient and Public Involvement. We would like to read in the 2019/20 Quality Account:

- How the patient and public involvement (PPI) policy and procedure document being developed is helping to ensure that the Trusts engagement activities are equitable and representative of the Trusts patients, service users and carers. In particular, examples of the people the Trust is listening to including 'seldom-heard groups'.
- The number of employees that have been trained using the new training module that aims to ensure that employees understand their responsibilities for involving patients in all service decisions, and gives guidance as to how and where this data

11th May, 2019

is to be collected and used. We welcome that this training is already part of induction training for staff.

- How the PPI activity register is helping the Trust to quality assure and better coordinate PPI activities.

Regarding the Friends and Family Test (FFT), it is positive to see that the Trust received 14,200 pieces of feedback. Although this is a reduction on the 2018/19 FFT responses which was 19,150, the Trust has maintained a consistently high positive recommender score. We note that overall 96.4% of patients are happy with the treatment they receive at the hospital. This is consistent with a majority of the feedback Healthwatch Birmingham has heard from patients and the public. We also note that whilst the positive score is above 90% across four of the services the Trust delivers, it is slightly lower and under 90% for 'Children and Young People Outpatient Services'. We ask that the Trust looks into this and feed the findings into service improvement.

Similarly, we note that 401 members of staff responded to the NHS Annual Staff Survey in comparison to 319 in 2017/19. It is positive that:

- 91% (83% last year) of staff said they would be happy with the standards of care if a friend or relative was treated at the Trust
- 95% said they would recommend the Trust to family and friends if they needed care or treatment, and
- 73% (63% last year) would recommend the Trust as a place to work.

It is encouraging that the FFT and staff scores complement each other. We commend the Trust for the actions it has taken to improve these scores, such as perfecting pathways and joint care, contract refresh and the implementation of 'speak up and join in' to improve communication across the Trust. We would like to see these continued to also see an improvement in the numbers of staff responding to the survey. We would like to read on these improvements in the 2019/20 Quality Account.

Complaints, PALs and Patient Safety Incidents

We note that the Trust received 137 formal complaints. This represents a 7% decrease on 2017/18. Equally, the Trusts PALs contact has reduced from 5094 in 2017/18 to 1531. The concerns raised by patients and carers to Healthwatch Birmingham are reflected in the themes identified by the Trust. Although the majority of patients tell us they receive excellent care, some are dissatisfied with waiting times and the behaviour of some frontline staff. We share real-time patient and carer experiences with the Trust and provide them with the right to respond to feedback left on our online feedback centre. We note the process the Trust takes in developing action plans for each complaint and communicating with complainants throughout the process. We are particularly pleased to see that complainants are offered the opportunity to provide feedback on the outcome of the process. We believe that the Trust's offer should include giving complainants the opportunity to give feedback about the process itself, not just the outcome. This was a key finding of Healthwatch Birmingham's report regarding clinical commissioning group's complaints systems (available on the Healthwatch Birmingham website). The report highlighted the importance of collecting and using complainant feedback in order to improve the quality and effectiveness of the complaints system.

The Trust seems to be still facing a challenge regarding patient safety incidents, which increased from 1530 in 2017/18 to 2022 in 2018/19. It is, however, promising that the number of incidents that led to harm/death has decreased from seven in 2017/18 to one in 2018/19. We note the various actions the Trust is carrying out to ensure and embed learning from incidents across the Trust. Including reviewing how actions from incidents are tracked

11th May, 2019

and shared across the Trust, continuing to deliver root cause analysis training or staff and improvement work on the electronic incident reporting system (Ulysses) to enable triangulation of complaints/PALs and incident data. We would like to read examples of incidents, corresponding actions taken and the impact on practice across the Trust in the 2019/20 Quality Account.

Learning from Audits

We note the number of Local Clinical Audits the Trust has taken part in 2018/19. We welcome that the Trust has taken the time to develop actions/recommendations to address the findings of the audits. We particularly welcome plans around improvement to review of patients on day one post-operation before discharge, and ensuring that every patient gets an information leaflet before their operation at an appropriate point in their care. We welcome that this includes engaging with patients about their ideas, concerns and expectations prior to surgery, and auditing patients' suggestions regarding leaflets to make improvements. We would like to read in the 2019/20 Quality Account, how many patients received a leaflet and were engaged about their care.

Learning from Deaths

We note that over the past year, ten of the Trust's patients died. We also note that a case review and investigation into these deaths judged that they were not caused by problems in the care they received. We welcome that the Trust has implemented a number of actions and lessons have been developed as part of the case review and investigation of deaths within the Trust. We would like to read about the impact of these actions in the 2019/20 Quality Account following the assessment of these by the Clinical Audit and Effectiveness Committee.

Core Indicators and Quality Metrics

The quality metrics data (p59-60 of the draft QA) shows that the Trust has managed to make improvements in all but one of the quality metrics. The number of patients getting pressure ulcers (Category 2 Avoidable) has increased from six in 2017/18 to eight in 2018/19. The number of patient falls, whilst decreasing, is still high (125 in 2017/18; 88 in 2018/19). In the 2019/20 Quality Account, we would like to read on the impact of the actions you have outlined here.

Indicators to 'Responsiveness to Patients Personal Needs' have seen a modest increase over the year and remain above the England average. We commend this, and welcome the actions the Trust is taking to improve this score.

Compliance with national targets

We commend the Trust for the total removal of the 52-week wait from April 2019 and now no patients are having to wait 52 weeks from referral to treatment. We note that the Trust is facing a challenge in achieving the 92% target in the percentage of those waiting more than 18 weeks for treatment following referral. We note that as of March 2019, the Trust was at 87% compliance and we would like to see continued improvement in the 2019/20 Quality Account.

11th May, 2019

The Trusts Priorities for 2019/20

We are pleased that a wide range of people have been involved in developing the Quality Priorities for the coming year including the Trust's Patient and Carers Forum. As the forum seems to be the only route for input into the quality priorities, we ask that the Trust ensure that the forum is representative of the Trust's patients and is not static (such that it is made up of a few dedicated people).

We commend the Trust for setting out clear measures for the goals you would like to achieve in 2019/20. Having a measurable criteria for assessing success ensures that the Trust can track how well you are meeting your objectives. We welcome the Trust's plans to redefine the five-year strategy. We would like to see the Trust involve as many stakeholders in this process as possible.

We are particularly pleased with the inclusion of priority 4: *'Staggered admission times for all patients attending ADCU, including those attending for diagnostics'*. We believe that this priority will have an impact on waiting times whilst being admitted. Healthwatch Birmingham's recent report into people's experiences in NHS Hospital waiting rooms (available on our website) highlighted the Trust's patients concern with waiting times in outpatients. Our report, therefore, recommended that the Trust reviews the management of appointments for clinics that have consistently long running times in order to make improvements to ensure that they are being run in the most efficient manner possible. We look forward to reading in the 2019/20 Quality Account the impact of the various initiatives to address concerns with waiting times the Trust has outlined in the current Quality Account.



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