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Statement from Healthwatch Birmingham on West Midlands Ambulance Service NHS Foundation Trust Quality Account 2017/18

Healthwatch Birmingham welcomes the opportunity to provide our statement on the Quality Account for West Midlands Ambulance Service NHS Foundation Trust 2017/18. Healthwatch Birmingham is pleased to see that some of our comments have been taken on board. For instance:

- The Friends and Family Test (FFT) Feedback question features on the Trusts home page on the website making it more visible to patients and the public thereby increasing responses;
- The Trust's introduction of patient experience sessions with senior managers is an innovative way of complementing the FFT score with more qualitative data; and
- The Trust has provided some examples of actions that have been taken in response to patient feedback using a 'you said' 'we did' format.

Patient and Public Involvement

In our response to the Trusts 2016/17 Quality Accounts, we asked to see the following in the 2017/18 Quality Accounts in relation to patient and public involvement:

- A demonstration of how patient feedback and experiences have been used to develop priorities for the 2018/19 Quality Account in the 2017/18 Quality Account;
- Changes in practice or improvement to services that have been made as a result of patient feedback and experience in the 2017/18 Quality Account. We welcome the 'you said - we did' articles for staff to show how reporting incidents has improved services. We believe that a similar approach for patients would encourage them to provide feedback as they will know that their views matter and lead to actual changes/ improvement to services.
- An introduction of qualitative questions to the survey that will complement the statistical data the Trust collects and offer greater insight to barriers patients face to receiving good quality of care.
- A demonstration of how the Trust uses patient insight and experience to understand the barriers different groups face and the impact on health outcomes. Consequently, how this data is used to implement change or improvement that addresses the needs of these groups.

We commend the Trust for drawing from various sources of feedback to develop priorities for the 2018/19 period. We welcome the inclusion of real time feedback from non-emergency patient transport users. However, we note that the Trust has not provided any examples of how it uses feedback to improve the quality of services and to understand the needs of particular groups. Apart from the 'You said' 'we did' examples of using patient feedback, it is not clear from the Quality Accounts how the use of patient feedback is embedded in the activities the Trust carries out. For examples, on the learning from deaths (p32 of the draft Quality Accounts), it is not clear how patients and their families are involved in the Serious Incident process, especially when it comes to investigations. Healthwatch Birmingham believes that involving families and carers in case reviews and investigations offers a better understanding of the patient's experience. We would like to read in the 2018/19 Quality Accounts, how families and patients are involved in various

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stages of case reviews and investigations; and how their views are weighted in relation to those of clinical staff.

In our response to the 2016/17 Quality Accounts, we expressed concern about the response rate for the Friends and Family Test (FFT). We note that the Trust has taken action and the FFT question now features on the home page of the Trust website. It is positive to see that this has helped the Trust to increase FFT responses. The Trust should also consider placing this question in the literature produced for patients/public to target those who might not be able to access online services. We also welcome the introduction of patient experience sessions and we hope these provide the Trust with the qualitative information that can complement the FFT scores. These patient experience sessions can be developed further to target patients suffering from particular illnesses or belonging to particular groups. Healthwatch Birmingham believes that key to increasing feedback is how it is used to inform practice. The Quality Accounts presents an opportunity for the Trust to demonstrate how patients and public feedback, insight and experience is used in decision-making. We look forward to reading in the 2018/19 Quality Accounts, how patient experience sessions have informed changes within the Trust.

The Trusts achievement in increasing the response rate to the NHS Staff Survey 2017, should be commended. We note that the 2017 response rate (48%) is an increase on the 2016 response rate (31%) and is the best response rate in five years. Equally, we are pleased the number of BME staff responses also increased from 58 in 2016 to 110 in 2017. However, what is of concern to Healthwatch Birmingham is the bottom five ranking scores of the staff survey. In Particular, “KF32 - Effective use of patient/service user feedback”. Although, we appreciate that the Trusts score for 2017 is 3.11 against a maximum score of 5, this score reflects our concern with the Trusts use of patient feedback to inform practice. As we suggested in our response to the 2016/17 Quality Account, the Trust should 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. A strategy will ensure that there is commitment across the Trust to using patient and public insight, experience and involvement. It will also make clear arrangements for collating feedback and experience.

Regarding the Public Sector Equality Duties, we are pleased to see evidence of what the Trust has achieved through its approach to recruitment and actions taken in relation to the EDS 2 and Workforce Race Equality Standard Plans. It would have also been useful to read about how the Trust is meeting its duty under objective 2 - ‘build Trust and confidence with our communities, patients, carer’s ad their families through effective communication, engagement and partnership working’ (p44 of the draft Quality Account). Ensuring that health and social care organisations are addressing health inequality is a key priority for Healthwatch Birmingham. We believe that patients, carers and families’ insight, feedback and experiences can help the Trust to identify, understand and address the needs of different groups. We note that the reporting on these objectives will be in July 2018, and we would like to read in the 2018/19 Quality Accounts how the Trust has used patient experience, insight and feedback to address health inequality.

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Complaints, PALs contact and Learning

In our review of the Trust's 2016/17 Quality Accounts, Healthwatch Birmingham raised concerns about the increasing numbers of complaints the Trust was receiving. We note that complaints and PALs contact continue to increase especially for emergency and Non-Emergency Patient Transport. We are concerned about the impact some of the issues raised through complaints might have on patients who already have serious/chronic illness. We hope that experience sessions that have been planned will help the Trust identify, understand and address the issues that patients who use non-emergency transport are facing.

Healthwatch Birmingham also notes that of the 322 complaints that were closed, 113 were upheld. The Trust indicates that learning from upheld cases is actioned locally and fed into the Learning Review Group for regional learning. As we indicated in our response to the 2016/17 Quality Accounts, we would like to see examples of learning that has occurred from complaints and changes taken as a result in the 2018/19 Quality Account.

Patient Safety

In our response to the 2016/17 Quality Account, we expressed concern with the state of ambulances and the potential impact this had on patients. We are pleased to see the improvements that have been made to ambulances, ensuring that they are equipped and manned by a paramedic and other skilled staff. We note the five top patient safety risks the Trust has outlined (for 2018/19) and commitment to address these. We also welcome the introduction of the Patient Safety section on the Trusts website and await to read about these risks, how the Trust has engaged with patients and their families, and developed solutions appropriately.

Priorities for 2018/19

Healthwatch Birmingham has taken note of the Trust's priorities for 2018/2019. We believe that a continued focus on patient experience, patient safety, and clinical effectiveness are important. In particular, use of real time feedback from non-emergency patient transport users, and continued implementation of 'Learning from Deaths' through mortality reviews. We note that the learning from deaths through mortality reviews priority was partially achieved in the 2017/18 period. In addition, arrangements for full clinical reviews were cancelled due to limited clinicians to undertake clinical audits. As such the Trust missed an opportunity to identify and make improvement in the quality of care. We are happy that this continues to be a priority for the Trust for 2018/19. We ask that the Trust follows the NHS National Guidance on Learning from Deaths regarding family and friends. The guidance states: "*Providers should have a clear policy for engagement with bereaved families and carers, including giving them the opportunity to raise questions or share concerns in*

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relation to the quality of care received by their loved one. Providers should make it a priority to work more closely with bereaved families and carers and ensure that a consistent level of timely, meaningful and compassionate support and engagement is delivered and assured at every stage, from notification of the death to an investigation report and its lessons learned and actions taken”

To conclude, Healthwatch Birmingham would like to commend the Trust for taking action in response to some of our comments on the 2016/17 Quality Accounts. It is positive to see the introduction of other methods to gather patient feedback and experiences and increase responses to patient surveys. However, the Trust has not clearly demonstrated in the Quality Accounts, how it uses feedback to develop actions and improve services nor to understand and address issues of health inequality. The use of patient experience and feedback is not evident across the Trust. It is our wish that there will be further improvements in this area in the 2018/19 Quality Account.

As per our role, Healthwatch Birmingham is running various projects to support providers in Birmingham to meet their statutory role of consulting/engaging with patients and the public. Consequently, ensuring that Trusts are using public and patient feedback to inform changes to services, improve the quality of services and understand inequality in access to services and health outcomes. We have worked with some Trusts to review their patient and public involvement process (PPI), identify areas of good PPI practice and recommend how PPI practice can be made more effective. We would welcome the opportunity to explore how we can support the Trust to improve in the year ahead.



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