

<b>Report to:</b>	<b>Public Board of Directors</b>	<b>Agenda item:</b>	<b>16</b>
<b>Date of Meeting:</b>	<b>4 September 2024</b>		

<b>Title of Report:</b>	<b>Patient Experience Strategy 2024 – 2027</b>
<b>Status:</b>	<b>For approval</b>
<b>Board Sponsors:</b>	<b>Toni Lynch, Chief Nursing Officer</b>
<b>Authors:</b>	<b>Sharon Manhi, Lead for Patient and Carer Experience Laura Davies, Deputy Lead for Patient and Carer Experience Jason Lugg, Deputy Chief Nursing Officer</b>
<b>Appendices</b>	<b>None</b>

### 1. Executive Summary of the Report

Patient experience is a key element of quality alongside patient safety and clinical effectiveness. Each interaction patients have with us is part of their overall experience of receiving care. Healthcare is increasingly understood as an experience as well as an outcome.

Our patient experience strategy sets out our commitments and key objectives to improve patient experience at the Royal United Hospitals Bath NHS Foundation Trust over the next three years and how we are going to do this. The strategy has been developed following a thematic review of various sources of feedback from patients, their families and carers, together with patient focus groups. The focus groups have included a range of vulnerable people groups in our community who access our services.

This has resulted in the creation of three strategic commitments as follows:

- We will involve and engage with you in a purposeful, meaningful and inclusive way.
- We will listen, hear and act on what you tell us to improve your experience.
- We will communicate with you in a clear and understandable way at the right time.

The Patient Experience Team have produced a detailed workplan for 2024-2025 to implement year 1 of each of the three strategic commitments. This has been reviewed and approved by the Patient Experience Committee who will oversee and monitor progress. This will be reported quarterly to the Quality Assurance Committee.

### 2. Recommendations (Note, Approve, Discuss)

The Board of Directors are asked to **approve** the strategy.

### 3. Legal / Regulatory Implications

This paper supports our statutory responsibilities under the NHS Constitution, CQC Regulations and the Parliamentary and Health Services Ombudsman Complaints Standards.

<b>4.</b>	<b>Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc)</b>
	Support BAF risk 1.
<b>5.</b>	<b>Resources Implications (Financial / staffing)</b>
	No resource implications identified.
<b>6.</b>	<b>Equality and Diversity</b>
	No risk relating to equality and diversity for staff, patients or members of the community identified.
<b>7.</b>	<b>References to previous reports/Next steps</b>
	Not applicable.
<b>8.</b>	<b>Freedom of Information</b>
	This paper is public.
<b>9.</b>	<b>Sustainability</b>
	Not applicable.
<b>10.</b>	<b>Digital</b>
	Not applicable.

**The people we care for**

# Improving Patient, Family and Carer Experience and Engagement

Our Strategy

2024-2027



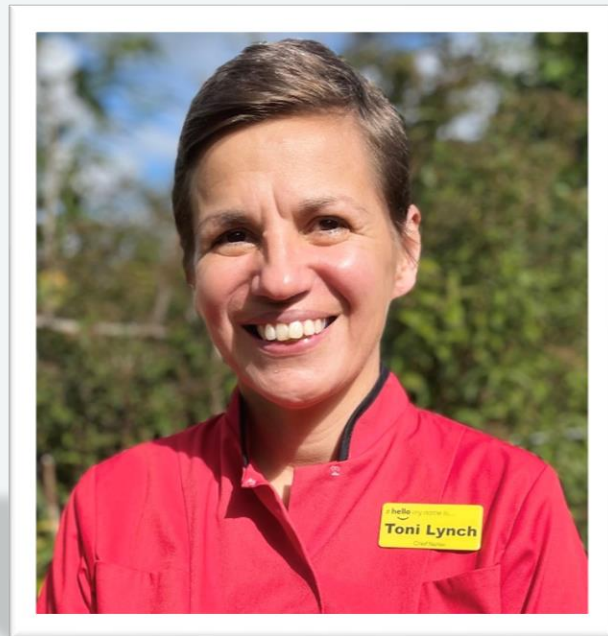
# Foreword

The **people** we care for

*My name is Toni and I am the Chief Nursing Officer at the Royal United Hospitals Bath. I am the Director responsible for patient experience and involvement.*

*In 2022 we launched our vision and shared our new goals which included **Connecting with you – helping you feel safe, understood and always welcome** and **Communicating well, listening and acting on what matters most to you**. This patient experience strategy builds on these goals and reaffirms our ambition that patient, families and visitors will have the very best experience when accessing our services.*

*We met with patients, families and carers and asked the question: **‘What’s important to you when you come to hospital?’** We heard the importance of kindness, understanding and being treated as an individual. We also heard how important it is that we communicate with you and provide information in a way you can understand and at the right time for you. You told us that feeling heard and valued made a positive impact on your experience of the care we provide. This information has been used to develop our three commitments to all the people we care for. This strategy details how we will achieve the commitments to improve our services.*



**Toni Lynch**  
Chief Nursing Officer



# Our Trust Strategy

# The **people** we care for

## The RUH, where **you** matter

People are at the heart of all that we do...



## The people in our **community**

Together, we will create one of the healthiest places to live and work.

## The people we **work** with

Together, we will create the conditions to perform at our best.



## The people we **care** for

Together, we will support you as and when you need us most.



**NHS**  
Royal United Hospitals Bath  
NHS Foundation Trust

Our improvement system:

**Improving Together**

Our values:

**Everyone Matters**

**Working Together**

**Making a Difference**

Connecting with you, helping you feel safe, cared about and always welcome

Consistently delivering the highest quality care and outcomes

## OUR GOALS

Communicating well, listening and acting on what matters most to you

# How patients/families/staff helped shape our strategy

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Our strategy was developed following a review of what you have previously told us and conversations with staff, patients, families, carers, the community and voluntary sector organisations



9,900

NHS Friends & Family test (FFT)



10

Staff, patient and carer meetings



389

Complaints



199

Staff & patient Surveys completed



4,500

Patient Advice & Liaison Service (PALS) contacts

# Our three commitments

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We will involve and engage with you in a purposeful, meaningful and inclusive way



We will listen, hear and act on what you tell use to improve your experience



We will communicate with you in a clear and understandable way at the right time



# We will involve you in a purposeful, meaningful and inclusive way

Improving **patient** experience





**The people we care for**

**Commitment:  
We will involve  
you in a purposeful,  
meaningful and  
inclusive way**

**What we want to achieve**

**How we are going to achieve it**

**How we will know we have achieved it**

Patients and families are involved in service improvements.

We will work with clinical teams to increase patient involvement in service improvement work. Specialties will embed patient experience feedback in their improvement huddles.

Evidence of patient /family involvement that has led to improvements included in quarterly reports to the Patient Experience Committee (PEC).  
Ward/department posters – ‘You said, we listened’ displayed.

What patients tell us is important to them is reflected in the Trust priorities, strategy development and business planning with information on the benefits to patient/family experience.

Staff will use patient and family experience feedback in the development of new and existing services.

Strategies, business plans, clinical and non clinical priorities will evidence patient involvement and the benefits to improving patient experience.

A standardised reimbursement process which will support people to be involved in developing and improving services.

We will work with colleagues to have a clear policy and process for reimbursement of time and expenses (a ‘Reimbursement Policy’).

The policy will be published and shared with staff across the Trust.  
Evidence of broader representation across protected groups/ backgrounds in involvement work.

We will hear and understand what matters most to patients and their families, by listening and acting on what they tell us maximising person-centred care.

We will support staff to involve patients and families in the development and implementation of the ‘What Matters to Me’ campaign.  
The campaign will begin in Oncology and the learning from this will be used to implement the campaign across the Trust.

There is patient representation and involvement in the implementation of the campaign.  
Positive responses from patients as to whether they have been asked the question ‘what matters to you’ and if it made a difference to their healthcare decisions, wellbeing and health outcomes.

Reduce health inequalities by developing services that meet the needs of patients across protected groups

A programme of targeted activities involving different equality groups who use the hospital to better understand and improve their experience.  
Patient groups/patient representatives are involved in the development of future hospital programmes/strategies.

Evidence of focused engagement work with various equality groups.  
Evidence of patient feedback from these groups has informed improvements to patient care.

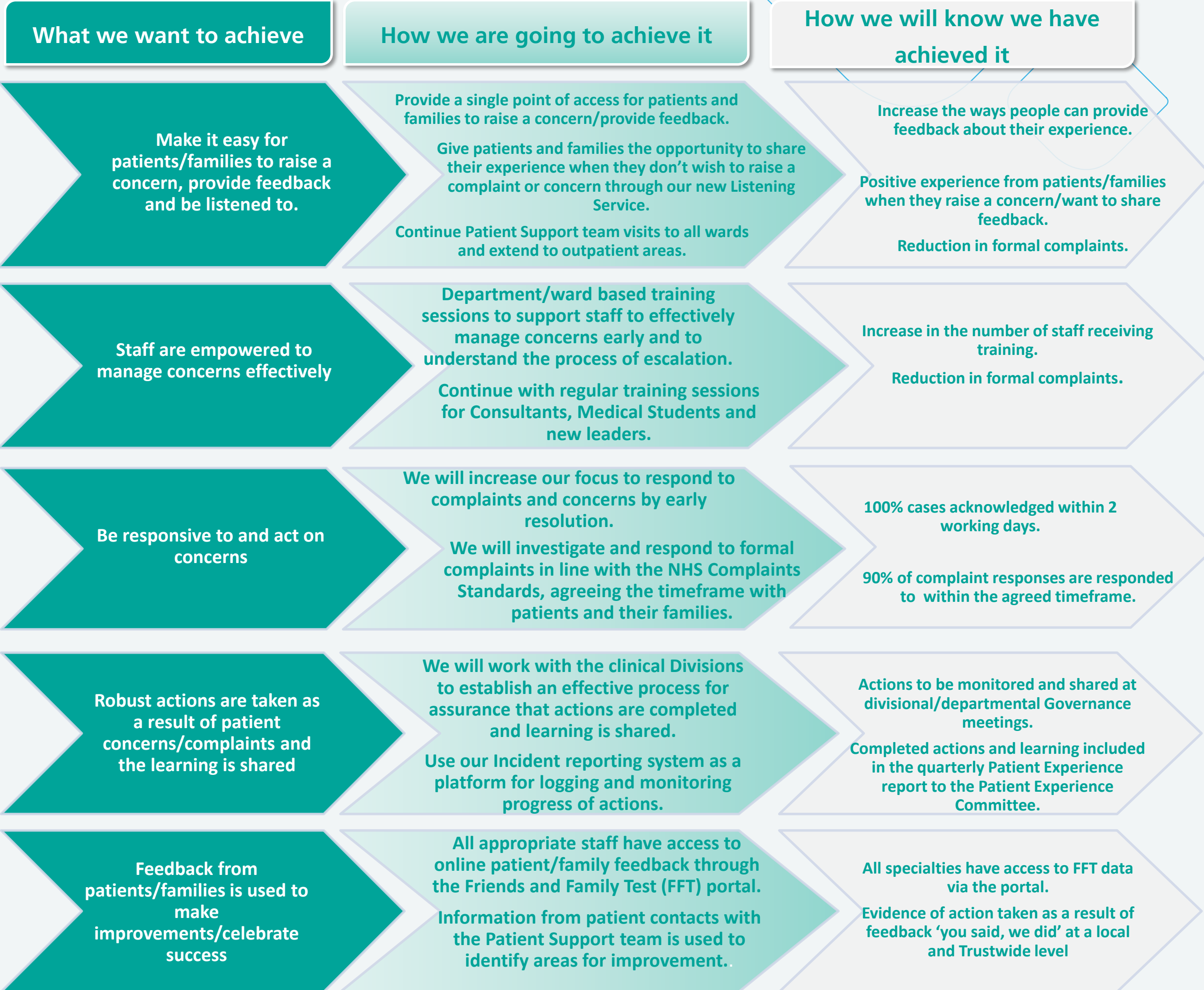
# We will listen, hear and act on what you tell us to improve your experience

Improving **patient** experience



The **people** we care for

**Commitment:**  
**We will listen, hear and act on what you tell us to improve your experience**



# We will communicate with you in a clear and understandable way at the right time for you



Improving **patient** experience





The **people** we care for

**Commitment:**  
We will communicate with you in a clear and understandable way the right time for you

**What we want to achieve**

**How we are going to achieve it**

**How we will know we have achieved it**

Accessible written information for patients and carers that is clear and easy to understand and provided at the right time.

Support staff to provide written information that meets national and Trust standards.  
Ensure all new written patient information is reviewed by the Trusts readers panel.  
Communication via DrDoctor (a patient engagement platform) meets the written information standards and process.

Record of patient readers panel reviews.  
Database of patient information leaflets.  
Central database of information sent out via DrDoctor.  
Reduction in complaints and concerns about written information.

Meet the information and communication support needs of patients, carers and family with a disability, impairment or sensory loss.

Be fully compliant with the Accessible Information Standards (AIS) and identify any gaps.  
Develop a work programme to achieve compliance.  
We will seek accreditation for the Communication Access Standards and implement targeted training for staff and volunteers to improve communication access skills and confidence.

Hearing from patients with additional communication needs that we are consistently meeting their needs.  
Reduction in complaints and concerns about communication and information from people with additional needs.  
Accreditation with the Communication Access Standards.

Patients waiting for care and treatment are kept informed and supported to stay well whilst waiting.

We will work with staff to have clear, useful and easy to understand information on the Trust's external 'waiting well' webpages.  
We will make sure that the booking teams use the above information to support patients.

Review views of pages.  
Patient feedback form on web pages.

Patients and their carers are able to communicate in a language and manner that enables them to understand the information provided and use the information to make informed decisions about their care and treatment.

Review current provision of interpreter services to ensure it meets the needs of patients, families and staff.  
Work with procurement and the Integrated Care Board (ICB) to tender for procurement of other languages and BSL interpreters to support patient and health professional communication.

Interpreting and translation provider for the three acute Trusts in Bath, Swindon & Wiltshire (BSW) is in place.  
Positive experience of colleagues and patients and families/ carers who use interpreters.

The **people** we care for

# Royal United Hospitals, Bath

Our commitment to improving patient and family/carer experience

**The Patient Experience Team**

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