

NHS Constitution Patient and Public
Quarter 4 report January – March 2017

*your hospitals,
your health,
our priority*

Executive Summary

All NHS organisations are legally required to take account of the NHS Constitution in performing their NHS functions. This is also a legal requirement of our licencing by NHS Improvement under Condition G6 Systems for Compliance with Licence Conditions and Related Obligations Section 1 (c) 'requirement to have regard to the NHS Constitution in providing health care services for the purpose of the NHS'.

Compliance with the patient and public rights and pledges of the NHS constitution has been assessed for the Q4 period. This assessment has been carried out by the subject expert leads for each area, to ensure that changes during the quarter have been fully reflected in the overall update and assessment of ongoing compliance. The compliance is rated as green in all areas.

Following advice from Business Intelligence, and further clarification from the House of Commons Library (<http://researchbriefings.files.parliament.uk/documents/CBP-7171/CBP-7171.pdf>) the assessment for "*Right to access services within maximum waiting times, or for the NHS to take all reasonable steps to offer you a range of alternative providers if this is not possible*" has been raised from amber to green, this is because the NHS Constitution sets out a patient's right to 2 Week Waits and 18 Week Waits, however, targets such as 31-day and 62-day waits from referral to treatment and 4 hour waits in A&E are described as ambitious, "*going above and beyond legal rights*", so should not be considered within this assessment. The Trust regularly meets all of these ambitious targets, with the current exception of 4 hour A&E target which is not always met on all occasions.

Detailed evidence provided at Appendix 1 is attached to this report.

Recommendation

The Trust Board is asked to note the content of this report to receive assurance that the Trust is fully compliant with the legal requirement to "take account of the NHS Constitution in provision of health care services for the purpose of the NHS" during January to March 2017 in accordance with our NHS Improvement Licencing.

Dave Nunns
Assistant Trust Board Secretary
19th April 2017

NHS CONSTITUTION PATIENTS AND PUBLIC

| 1. Access to Health Services | | | |
|--|---|------------|--------------------------------|
| <p>Pledges:</p> <ul style="list-style-type: none"> • to provide convenient, easy access to services within the waiting times set out in the Handbook to the NHS Constitution; • to make decisions in a clear and transparent way, so that patients and the public can understand how services are planned and delivered • to make the transition as smooth as possible when you are referred between services, and to include you in relevant discussions. | | | |
| Rights | Update | RAG | Compliant/Non Compliant |
| You have the right to receive NHS services free of charge, apart from certain limited exceptions sanctioned by Parliament. | <ul style="list-style-type: none"> • CCG commissioned services are provided free at the point of delivery by WWL with the exception of those sanctioned by Parliament. In addition some services now require prior approval via Commissioners. | | Compliant |
| You have the right to access NHS services. You will not be refused access on unreasonable grounds. | <ul style="list-style-type: none"> • Access to services is available using a range of options including Choose & Book, Direct Access Clinics, Accident and Emergency (A&E), Walk In Centre | | Compliant |
| You have the right to expect your NHS to assess the health requirements of your community and to commission and put in place the services to meet those needs as considered necessary and in the case of public health services commissioned by local authorities, to take steps to improve the health of the local community | <ul style="list-style-type: none"> • Commissioning plans in place to commission services from WWL • Quality, Innovation, Productivity and Prevention (QIPP) Board established to forward plan future of locally provided services • 18 weeks performance reported to Trust Board • Council of Governors engaged in service planning • Monitor 5 year plan publically available • Engagement of membership and Governors in service redesign including Breast Screening and Rheumatology Outpatients Service. • Ongoing Evidence Based Design surveys • Engagement with the first ever Wigan Pride Event and 'Wellfest' • Council of Governors are members on the Wigan Leaders Engagement Committee. | | Compliant |
| You have the right, in certain circumstances, to go to other European Economic Area countries or Switzerland for treatment which would be available to you through your NHS commissioner. | <ul style="list-style-type: none"> • Commissioner responsibility | N/A | N/A |

1. Access to Health Services (continued)

Pledges:

- to provide convenient, easy access to services within the waiting times set out in the Handbook to the NHS Constitution;
- to make decisions in a clear and transparent way, so that patients and the public can understand how services are planned and delivered
- to make the transition as smooth as possible when you are referred between services, and to put you, your family and carers at the centre of decisions that affect you or them.

| Rights | Update | RAG | Compliant/Non Compliant Compliant |
|---|---|-----|--|
| <p>You have the right not to be unlawfully discriminated against in the provision of NHS services including on grounds of gender, race, disability, age, sexual orientation, religion, belief, gender reassignment, pregnancy and maternity or marital or civil partnership status.</p> | <ul style="list-style-type: none"> • WWLFT Inclusion & Diversity (I&D) Strategy 2016-2020 in place which covers all protected characteristics. • 4 Equality Objectives implemented for 2016-2020 (in line with Public Sector Equality Duty Requirements). • Department of Health Equality Delivery System (EDS2) embedded within Trust – Annual assessment undertaken and EDS Action Plan 2016 – 2017 in place and Progress and performance monitored by Inclusion & Diversity Steering Group. • The Trust continues to undertake equality analysis (equality impact assessments) on all policies and practices to ensure that any new or existing policies and practices do not disadvantage any group or individual). • Engagement Plan 2016-17 in place. • Access to interpreter and translation services – for BSL and foreign languages. Trust Policy and SOP currently under review (periodic) • Annual I&D monitoring report. • 35 I&D Champions – Projects initiated. • Trust is non-compliant against the Accessible Information Standard (as at 31/07/16) – registered on Corporate Risk Register, with progress monitored by I&D Steering Group | | |
| <p>Right to access services within maximum waiting times, or for the NHS to take all reasonable steps to offer you a range of alternative providers if this is not possible. 4</p> | <ul style="list-style-type: none"> • Monitoring of all access/waiting targets as outlined in the NHS Operating Framework and NHS Improvement Risk Assessment Framework reported in the monthly performance report. | | <p>Compliant NHS Constitution provides right to maximum waiting time The Trust met all access targets at the end of Q4 with the exception of the 4 hour target for A&E.</p> |

| 2. Quality of Care and Environment | | | |
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| Pledges: | | | |
| <ul style="list-style-type: none"> to ensure that services are provided in a clean and safe environment that is fit for purpose, based on national best practice (pledge); to identify and share best practice in quality of care and treatments that if you are admitted to hospital, you will not have to share sleeping accommodation with patients of the opposite sex, except where appropriate, in line with details set out in the Handbook to the NHS Constitution | | | |
| Rights | Update | RAG | Compliant/Non-Compliant |
| You have the right to be treated with a professional standard of care, by appropriately qualified and experienced staff, in a properly approved or registered organisation that meets required levels of safety and quality | <ul style="list-style-type: none"> CQC registration maintained without compliance conditions Response to patient safety alerts; Adherence to NICE guidance AQUA programme Advancing Quality Programme Work of Quality Champions Fit and Proper persons test Compliance with mandatory training monitoring Leadership programme | | Compliant |
| You have the right to expect NHS organisations to monitor and make efforts to improve continuously, the quality of healthcare they commission or provide. This includes improvements to the safety, effectiveness and experience of services. | <p>The Trust utilises a number of methods to monitor and continually improve the quality of care provided which include:</p> <ul style="list-style-type: none"> Three year review against Monitors Quality Governance Framework (as per guidance) Three year Quality Strategy priorities; Quality Champions Projects Annual Quality Account priorities; Sign Up to Safety Improvement Plan National Survey Programme; Real Time Patient Surveys; Experience Based Design Projects; Internal Audit and Clinical Audit Programmes; PLACE Assessments; Safety Thermometer; Nursing Care Indicators; Friends and Family Test; Always Events; Goodnight Always Events Internal 'Mock' CQC Inspections; Leadership Walkrounds; Review of incidents and complaints; Safe Effective Caring (SEC) and Trust Board Performance Reports; Organisational Committee Structure Delivering Same Sex Accommodation (DSSA) Policy DSSA Patient Experience Survey DSSA Patient Information Leaflet | | Compliant |

3. Nationally approved treatments, drugs and programmes

Pledges:

- The NHS commits to provide screening programmes as recommended by the UK National Screening Committee

| Rights | Update | RAG | Compliant/Non-Compliant |
|--|---|------------|--------------------------------|
| You have the right to drugs and treatments that have been recommended by NICE for use in the NHS, if your doctor says they are clinically appropriate for you. | <ul style="list-style-type: none"> Medicines Management Policy and associated SOPs; NICE Guidance Policy and Procedure; Medicine Management Audits and Dashboards; Medicine Management Strategy Board and Medicines Safety Committee; GMMMG medicines management formulary is followed and requests for non GMMMG items are regularly rejected. | | Compliant |
| You have the right to expect local decisions on funding of other drugs and treatments to be made rationally following a proper consideration of the evidence. If the local NHS decides not to fund a drug or treatment you and your doctor feel would be right for you, they will explain that decision to you. | <ul style="list-style-type: none"> Medicines Management Policy and associated SOPs; NICE Guidance Policy and Procedure; Medicine Management Audits and Dashboards; Medicine Management Strategy Board and Medicines Safety Committee; GMMMG medicines management formulary is followed and requests for non GMMMG items are regularly rejected. Cancer Drugs Fund - regional approval process for cancer drugs not funded by NHSE Individual Funding Requests are approved or rejected by the CSU on behalf of CCG | | Compliant |
| You have the right to receive the vaccinations that the Joint Committee on Vaccination and Immunisation recommends that you should receive under an NHS-provided national immunisation programme | N/A National Programme | N/A | N/A |

4. Respect, Consent and Confidentiality

Pledges:

- To ensure those involved in your care and treatment have access to your health information so they can care for you safely and effectively
- To anonymise the information collected during the course of your treatment and use it to support research and improve care for others
- Where identifiable information has to be used, to give you the chance to object wherever possible
- To inform you of research studies in which you may be eligible to participate
- To share with you any correspondence sent between clinicians about your care

| Rights | Update | RAG | Compliant/Non-Compliant |
|---|--|-----|-------------------------|
| <p>You have the right to be treated with dignity and respect, in accordance with your human rights.</p> | <ul style="list-style-type: none"> • Code of Confidentiality, Dignity and Respect Policies in place and adhered to. • Clinical care policies, procedures and guidance are in place. These are subject to impact assessments. • Compliance with mixed sex accommodation. • Delivering same-sex accommodation (DSSA) audits undertaken • DSSA Occurrence Policy • Chaperone Policy • Patient Experience Survey • Internal Mock CQC Inspections • Always Events Audits including • Goodnight Always Events | | <p>Compliant</p> |
| <p>You have the right to accept or refuse treatment that is offered to you, and not to be given any physical examination or treatment unless you have given valid consent. If you do not have the capacity to do so, consent must be obtained from a person legally able to act on your behalf, or the treatment must be in your best interests.</p> | <ul style="list-style-type: none"> • A range of clinical care policies, procedures and guidance are in place. These are subject to impact assessments. • Compliant with mixed sex accommodation. • Chaperone Policy adhered to. • Treatments will be explained to patients as far as possible and repeated if necessary. • Consent audits undertaken • Learning from complaints and incidents monitoring • Vulnerable child/adults/safeguarding policies in place • Learning Disability Hospital visit programme includes A&E and Outpatients • Internal Mock CQC Inspections | | <p>Compliant</p> |
| <p>You have the right to be given Information about the test and treatment options available to you, what they involve and their risks and benefits.</p> | <ul style="list-style-type: none"> • Information Leaflets to CQC Fundamental Standards compliant • Pre Op assessment • Specialist Nurse support • Learning from complaints monitoring • Shared decision making projects • Two Cohorts of Staff Trained in Shared Decision Making (SDM) • Feedback from Patient Surveys | | <p>Compliant</p> |

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| | | | |
| <p>You have the right to privacy and confidentiality and to expect the NHS to keep your confidential information safe and secure.</p> | <ul style="list-style-type: none"> • Protecting your data information • Information Governance (IG) Toolkit monitoring via Audit Committee • SIRO position held on Trust Board • Caldicott Guardian on Trust Board • Information Governance Committee monitoring role • Achievement of all Information Governance Level 2 standards for V13 of the Toolkit • IG Toolkit compliance monitoring • Code of confidentiality in situ | | <p>Compliant</p> |
| <p>You have the right to be informed about how your information is used.</p> | <ul style="list-style-type: none"> • Information Governance Toolkit monitoring via Audit Committee • Senior Information Risk Owner (SIRO) position held on Trust Board • Caldicott Guardian on Trust Board • Caldicott Committee monitoring role • Achievement of all Information Governance Level 2 standards for V13 of the toolkit • Patient information leaflet available | | <p>Compliant</p> |
| <p>You have the right to request that your confidential information is not used beyond your own care and treatment and to have your objections considered and where your wishes cannot be followed, to be told the reasons including the legal basis.</p> | <ul style="list-style-type: none"> • Access to Health Records information • Patient Relations and PALS service support • Copying Letters to patients Policy • Interpreter service available. • Patients can apply under the data protection to access their health records. • Patients can apply under the data protection to access their health records. • Information Governance Toolkit – compliance monitored via Audit Committee • Confidentiality Code of Conduct in place • Being Open policy and Duty of Candour Policy | | <p>Compliant</p> |

| 5. Informed Choice | | | |
|--|--|------------|--------------------------------|
| Pledges: <ul style="list-style-type: none"> To inform you of healthcare services available to you, locally and nationally To offer you easily accessible, reliable and relevant information in a form that you can understand, and support to use it. This will enable you to participate fully in your own healthcare decisions and to support you in making choices. This will include information on the quality of clinical services where there is robust and accurate information available | | | |
| Rights | Update | RAG | Compliant/Non-Compliant |
| You have the right to choose your GP practice, and to be accepted by that practice unless there are reasonable grounds to refuse, in which case you will be informed of those reasons | N/A Primary Care | N/A | N/A |
| You have the right to express a preference for using a particular doctor within your GP practice and for the practice to try to comply. | N/A Primary Care | N/A | N/A |
| You have the right to make choices about the services commissioned by NHS bodies and to information to support these choices. The options available to you will develop over time and depend on your individual needs. Details are set out in the Handbook to the NHS Constitution | <ul style="list-style-type: none"> Patient Information Leaflets Leaflets are also available in alternative formats such as large print Braille alternative languages and audio. Easy Read A&E, Inpatients, Outpatients and PALS Leaflet Leaflets are available for download on the internet/intranet Ongoing implementation of the Accessible Information Standard Information on National ratings Choices Website CQC ratings Monitor Risk Assessment Framework Consultant Profiles on WWL internet Patient Opinion Project Dr Foster Publications Patient Reported Outcome Measures (PROMS) and Patient Reported Experience Measures (PREMS) information Friends and Family test information NHS Choices, CQC websites | | Compliant |

6. Involvement in your healthcare and in the NHS

- Pledges:**
- to provide you with the information you need to influence and scrutinise the planning and delivery of NHS services
 - to work in partnership with you, your family, carers and representatives .
 - to involve you in discussions about planning your care and to offer you a written record of what is agreed if you want one
 - to encourage and welcome feedback on your health and care experiences and use this to improve services

| Rights | Update | RAG | Compliant/Non-Compliant |
|--|---|-----|--|
| <p>You have the right to be involved in discussions and decisions about your health and care, including your end of life care and to be given information to enable you to do this. Where appropriate this right includes your family and carers. (includes CCG duty to promote involvement of patients / carers)</p> | <ul style="list-style-type: none"> • Decisions in clinical care monitored by national survey programme • Involvement in decision monitored in Real Time Patient Experience (RTPE) survey • Information on how to become involved in the design and delivery of services is distributed via the Membership and Engagement Department. • Membership panels used to comment on patient information • Membership panels used to comment on Trust plans and performance • Monitoring through national and internal surveys • Focus Groups • Workshops using Evidence Based Design • Hourly Rounding • Friends and family test • Bereavement Service • Specialist Nursing services • Shared Decision Making (SDM) project • Two Cohorts of Staff Trained in SDM • Engagement awareness-raising of SDM Ask 3 Questions with patients. • Always Events Inpatients • Good night Always Events • NHS Choices website • Consent policy • White Board initiative • Ongoing audit of always events including Expected date of discharge awareness discussion • Discharge Charter reviewed • Enhance end of life care pathway involving multi agency working • Discharge Policy • Self-Discharge Policy • 7 Day No Delay Project • Patient Discharge Checklist • Patient Discharge Flow Chart • Patient Discharge Wallet • Integrated Discharge Team • Discharge to Assess | | <p>Compliant</p> <p><i>Performance for Q4 on involvement in decisions about discharge from hospital rose to 68.45% seeing an increase on Q3 of 8.26% on the average score However this remains below the internal Trust target of 90% for positive patient experience and work is ongoing to implement a continuous improvement programme</i></p> |

6. Involvement in your healthcare and in the NHS (continued)

Pledges:

- to provide you with the information you need to influence and scrutinise the planning and delivery of NHS services
- to work in partnership with you, your family, carers and representatives
- to involve you in discussions about planning your care and to offer you a written record of what is agreed if you want one
- to encourage and welcome feedback on your health and care experiences and use this to improve services

You have the right to be involved, directly or through representatives, in the planning of healthcare services commissioned by NHS bodies, the development and consideration of proposals for changes in the way those services are provided, and in decisions to be made affecting the operation of those services (includes CCG duty to consult on service changes)

- Membership events in the Community.
- Membership Engagement Strategy
- PPI Strategy
- COG involvement in service planning
- Membership panels used to provide service planning feedback
- Trust consultations on significant changes will be undertaken in full compliance of Section 242 of The 2006 Act and 2012 Act
- Close liaison with OSC in service change
- Engagement with GP Commissioners in service change
- Governor and patient involved in Service redesign teams
- Consultation policy
- Engagement with Healthwatch
- Experience Based Design approach used to engage patients in service re-design
- Patient and Public Involvement integrated into Business plans regarding implementation of new services and service changes.

Compliant

7. Complaints and Redress –

- Pledges:**
- To ensure you are treated with courtesy and you receive appropriate support throughout the handling of a complaint; and the fact that you have complained will not adversely affect your future treatment
 - when mistakes happen, to acknowledge them, apologise, explain what went wrong and put things right quickly and effectively
 - to ensure that the organisation learns lessons from complaints and claims and uses these to improve NHS services

| Rights | Update | RAG | Compliant/Non-Compliant |
|--|---|-----|-------------------------|
| <p>You have the right to have any complaint you make about NHS services acknowledged within three working days and to have it properly investigated</p> | <ul style="list-style-type: none"> • Patient Relations Team support complaints • Working in concert with the CQC Fundamental Standards Regulation 16 • The Complaints Policy and Procedure TW10-021 and TW10-021 SOP 1 • Complaints policy revised to embed system at Divisional level • Complaints monitoring reported at Trust Board • Complaints reported within the Trust's Annual Report • Complaints reported in Corporate Safe Effective Caring (SEC) Report presented at Quality and Safety Committee and to Commissioners • Internal target for response to complaints set • Medical Director sees all High/Serious rated complaints • Complaints response devolved to Divisions • Patient opinion maintained and posting responded to • Complaints Annual Report presented to Quality and Safety Committee and Trust Board October 2016 • Complainant satisfaction Survey undertaken | | <p>Compliant</p> |
| <p>You have the right to be kept informed of progress and to know the outcome of any investigation into your complaint,</p> | <ul style="list-style-type: none"> • Complaints letter signed off by the CEO. In the absence of the CEO they are signed off by a Trust Board Executive. • Meetings facilitated by Patient Relations Team to discuss individual complaints • Serious or more complex complaints reviewed by Medical Director • All complaints are shared at the Executive Scrutiny Meetings at weekly meeting to discuss complaints, serious incidents, claims and inquests with supplementary Executive scrutiny of high/serious 'red rated' complaints • Complainant satisfaction survey undertaken | | <p>Compliant</p> |

7. Complaints and Redress (continued)

Pledges:

- To ensure you are treated with courtesy and you receive appropriate support throughout the handling of a complaint; and the fact that you have complained will not adversely affect your future treatment
- when mistakes happen, to acknowledge them, apologise, explain what went wrong and put things right quickly and effectively
- to ensure that the organisation learns lessons from complaints and claims and uses these to improve NHS services

| Rights | Update | RAG | Compliant/Non-Compliant |
|--|---|-----|-------------------------|
| <p>You have the right to take your complaint to the independent Parliamentary and Health Service Ombudsman (PHSO) or Local Government Ombudsman, if you are not satisfied with the way your complaint has been dealt with by the NHS.</p> | <ul style="list-style-type: none"> • Complaints policy in place in accordance with legislation requirements • Reporting of PHSO complaints in annual report | | <p>Compliant</p> |
| <p>You have the right to make a claim for judicial review if you think you have been directly affected by an unlawful act or decision of an NHS body or local authority</p> | <ul style="list-style-type: none"> • Complaints policy in place in accordance with legislation requirements | | <p>Compliant</p> |
| <p>You have the right to compensation where you have been harmed by negligent treatment.</p> | <ul style="list-style-type: none"> • Legal Services Department in place for compensation claims • Legal Services annual report received by Audit Committee and Trust Board • Review of compensation claims conducted by Division • Executive scrutiny of clinical negligent claims at weekly meeting to discuss complaints, serious incidents, claims and inquests. | | <p>Compliant</p> |