

Patients, Carers, Family and Friends Experience & Engagement Strategy 2022-2025

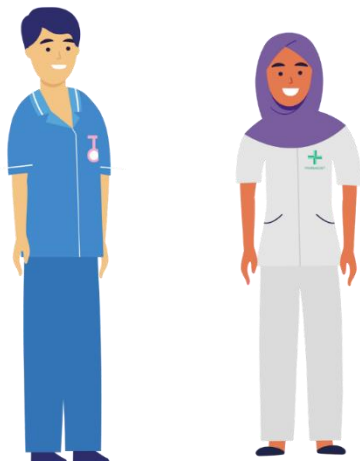


hello
my name is...



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Introduction



At Wrightington, Wigan and Leigh NHS Foundation Trust, we are committed to improving the experience of our patients, carers, families, and friends. Improving the patient experience is one of the Trust's key objectives and forms a central part of our mission to provide great care to every patient, every day.

The views of the people who use our services are important to us. We want to know when things have gone well, but also when we do not get things right, so we can learn and improve. We welcome all feedback and seek to take a proactive approach to helping with any questions or concerns.

In order to assess and better understand the experience of our patients, carers, friends and families, the Trust actively seeks feedback from people using our services. This enables the Trust to make the necessary service improvements that ensure our patients receive safe, consistent, person-centred experience at every contact.

Our key principles to deliver this strategy are:

- To ensure patients, carers, family, and friends feedback supports service improvement and delivery
- To utilise the Friends and Family test and in-house in patient survey feedback to drive improvements in patient care and inclusion
- Learn from complaints, concerns, and compliments
- Listen to our patients, carers, families, friends, and staff
- To uphold the Trust values of Improving, Integrating, Innovating
- Involving our patients, carers, and their families in the planning of our service improvements

The purpose of this Patient Experience & Engagement Strategy 2022-2025 is to support the achievements of the Trust's overarching strategy to be a safe, effective, and caring organisation.

A guiding principle for WWL Teaching Hospital NHS Foundation Trust is to always place our patients, their families, and carers at the heart of all that we do. The organisations way forward strategy and one of the four P's is "every patient received the best possible care" and this gives us a strong foundation to build upon for the coming years.

The organisation is committed to its duty to involve and act upon the views of our patients, their families, and their carers and the public within all the communities that we serve.

The Trust boards of Directors actively engage with patients, staff, the Council of Governors, and other key stakeholders on quality and safety issues. The Executive Board monitors all achievements and its objectives and associated risks through the annual cycle of board reports, which include the board assurance framework and risk register.

This strategy represents the natural development of previous strategies, built upon our experiences over the past 3 years, and our vision for improvements for the next 3 years.

Our ambitions for Patient Experience & Engagement over the next 3 years are:

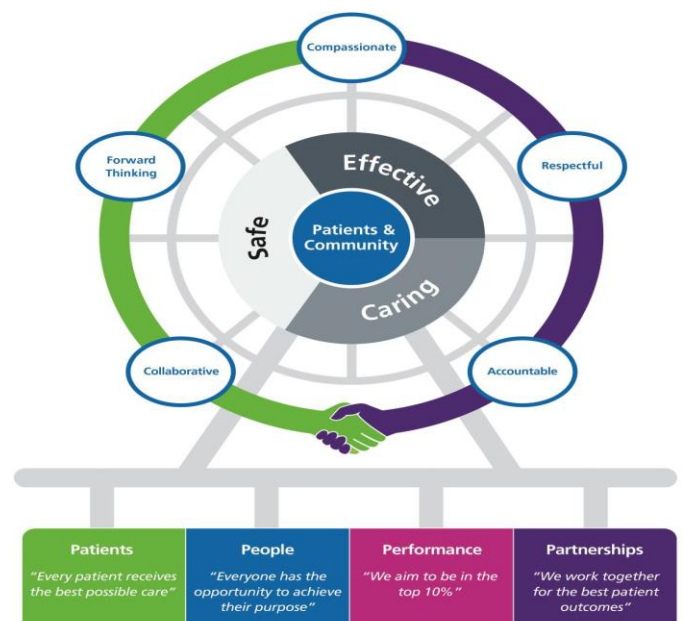
- Sharing and learning from the feedback received from patients, their families and their carer's
- Embedding patient experience & engagement at all levels of all services across the Trust
- Continually seeking quality improvement, to ensure a high standard of positive experience every time

The WWL Wheel is a visual aid to demonstrate our commitment to delivery of services, which are safe, effective, and caring with people at the heart of all we do:

- Patients
- People
- Performance
- Partnerships

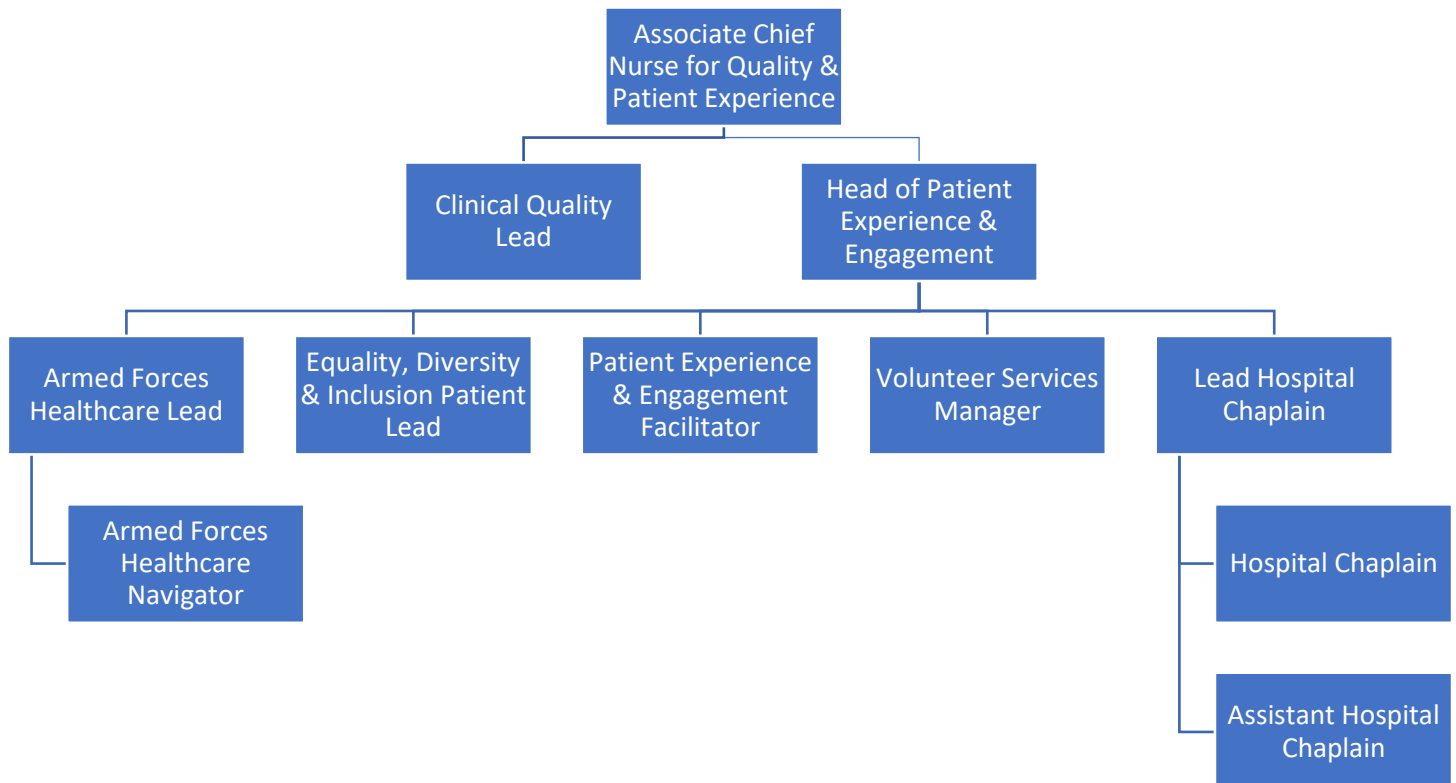
And aligns with the Trust's values and behaviours:

- Compassionate
- Respectful
- Accountable
- Collaborative
- Forward thinking



Patient Experience & Engagement

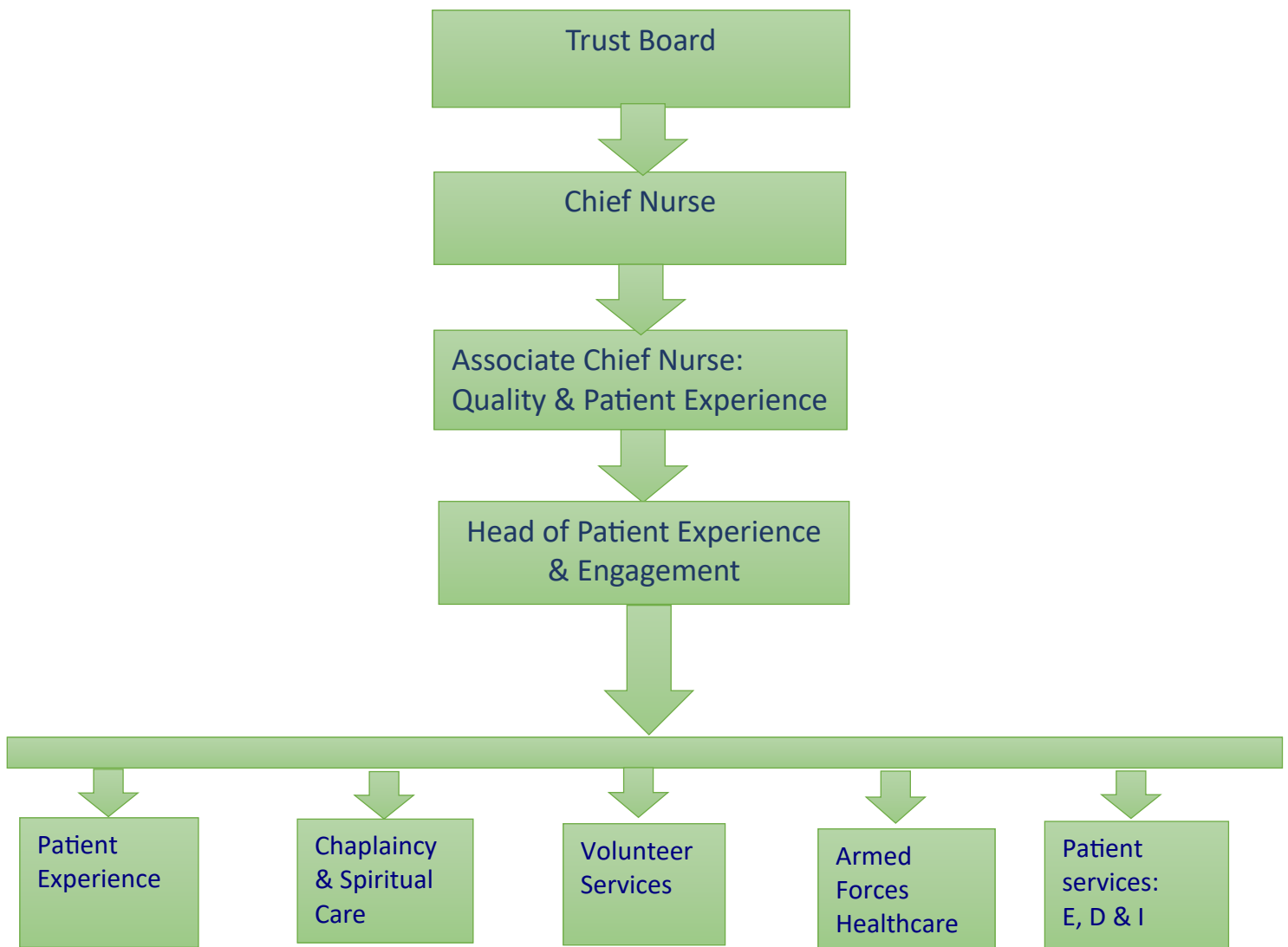
The Patient Experience Team brings together Voluntary Services, Chaplaincy Services, Patient Experience & Engagement, Equality, Diversity & Inclusion, and the Armed Forces Healthcare agenda.



Our Mission Statement

- Our Mission is to treat everyone who uses the services at Wrightington, Wigan & Leigh NHS Teaching Foundation Trust as equal.
- We will put the patient at the heart of everything we do.
- We will actively listen to the views of carers, families, and friends.
- We will ensure our services are accessible for all regardless of age, race, disability, sexual orientation, or gender.
- We will support improve experiences by raising awareness of key events and engagement roadshows
- We will be visible across the organisation.
- We will always uphold the Trust Values.

Reporting structure for the Patient Experience & Engagement Team to Trust Board



Looking back at what we have achieved

Veteran Aware Hospital – Re accreditation status.

The organisation was originally accredited as a Veterans Covenant Healthcare Alliance in November 2018, and successfully re-accredited its status in July 2021. The Trust's veteran programme is led by our Champions Dyad which is made up of a Management Lead and a Clinical Lead. The Trust was granted funding for a 2-year fixed term from the Armed Forces Covenant Fund Trust and NHS England to employ an Operational Lead for the Armed Forces agenda. This role works in collaboration with the Trusts' AF Healthcare Navigator, to offering healthcare support, guidance, and signposting to services for the Armed Forces community, including veteran service users their families & carers and the staff at WWL. The Trust implemented the "Poppy" magnets across all in-patient areas within the organisation, for the easy identification of veterans to enable and support signposting to services, and QR code posters in all departments for self-referral to charitable services and mental health support.

As part of the AF agenda, the Trust is signed up to dedicated AF recruitment schemes, Career Transition Partnership and Forces Family Jobs to advertise our vacancies. We are also in the process of being accredited by Step into Health, a programme that connects skilled candidates from across the Armed Forces community with employers and new opportunities in the NHS. There is a designated AF representative within the Recruitment Team, who actively filters and signposts to the AF recruitment platforms and supports Armed Forces candidates through the application process. The Trust is in the process of implementing a guaranteed interview scheme, and actively engages and encourages the local Reservist and Cadet Units to attend all recruitment events. The Trust received the Employee Recognition Scheme Gold Award in March 2021, for its commitment to the recruitment of ex AF community.



Patient Experience & Engagement Group meetings:

Patient Experience & Engagement group meetings were suspended during the pandemic, as these has previously been held in person. These meetings were introduced in October 2022, with a revised Terms of Reference, which included a wider multi-disciplinary membership. The meetings are held monthly, via Teams and are chaired by the Chief Nurse, with Deputy Chair duties held by the Associate Chief Nurse: Quality & Patient Experience, and the Head of Patient Experience & Engagement.

Each meeting includes the sharing of Patient Experience stories, quality improvement initiatives, and monitor compliance with patient experience issues in all Divisions, including complaint/concern response rate compliance.

The membership is made up of Divisional Directors and Deputy Directors of Nursing, The Admiral Nurse service, Pharmacy colleagues, Governance representatives, Chaplaincy & Spiritual Care services, Head of Midwifery, Lead Cancer Nurse, Head of Estates & Facilities, the Patient Experience Team, incorporating the Volunteer Services, Armed Forces Healthcare, Patient Information, and Equality, Diversity & Inclusion Patient services, the Communications Team, and external colleagues, Healthwatch, Patient and Trust public Governor representation.

This group reports to the Patient Quality and Safety group, which directly reports to the Trust Board for quality, assurance, and monitoring purposes.



Capturing feedback from the people who use our services:

The Trust captured feedback via the Friends and Family Test, Compliment Cards, and NHS Choices – Care Opinion website pre pandemic. At the start of the pandemic all paper-based surveys were suspended across England, due to the national infection, prevention & control NHS advice and guidance. The Friends & Family Test cards were reintroduced in December 2021. The Compliments cards were ceased whilst other mechanisms for capturing patient feedback were explored.

The Trust currently captures patient feedback through several ways including:

- Friends and Family National Test
- Same Sex Accommodation Data
- In- house in-patient survey
- Care Opinion- NHS Choices website
- National Patient Surveys
- Compliments and Complaints

National Friends & Family Test

The Friends & Family test response rates remained low, until May 2022, when QR code posters were introduced across all sites, in all departments. The introduction and display of these posters increased the response rate from 11% to 17% and have been well received by patients and staff alike.



Same Sex Accommodation Data

WWL Teaching NHS Foundation Trust is committed to improving the quality of patient experience and will uphold the principle that all shared sleeping, casual overlooking and shared bathing/toileting facilities across the Trust should be eliminated. The Head of Patient Experience & Engagement is responsible for the monitoring of the compliance monthly, and that an annual audit of all inpatient areas is undertaken.

In- house in-patient survey

From the results of the national In-patient survey results post pandemic, an in-house in-patient survey was developed, consisting of twenty-four questions that target feedback around our identified areas for improvement. This survey is facilitated by the Patient Experience Team and is audited and reported upon monthly into all Divisions. This gives extra support to all Divisions in their action planning improvements for patient experience.

Care Opinion- NHS Choices website

Care Opinion website provides a system for people to share their experience and provide real time feedback. The Trust is signed up to NHS Choices for this, and the system is monitored by the Patient Relations Team (PALS). Updates on this are provided monthly at Patient Experience & Engagement Group meetings

National Patient Survey's

The Trust participates in all the national patient survey's which include:

- The National In-patient Survey
- The Unscheduled Care Survey
- Maternity Survey
- National Cancer Care Survey

Each Division has developed patient experience groups, who lead on the development of their action plans to monitor the recommended areas for improvement, which are shared and reported at the Patient Experience & Engagement Group meeting on a quarterly basis.

Compliments and Complaints

All compliments and complaints are captured by the Patient Relations Team (PALS) and are shared monthly with all Divisions and at the Patient Experience & Engagement Group meetings

“Hello my name is” Campaign

In 2022, WWL relaunched the “Hello my name is” campaign across all sites. The “Hello my name is” campaign, is not just about common courtesy, but about embedded human connections being one human being who is suffering, and feeling vulnerable, to another human being who wishes to help. This campaign included the displaying of banners and posters across all sites with the Core Values shared at every opportunity. A focus week was celebrated to relaunch this and raise awareness and understanding for staff and ensure this civility campaign is embedded across all sites of the organisation.

To keep the momentum and the importance of this alive within the Trust, “Kate Granger Stars” have been developed, and staff are able to nominate colleagues from all areas, who they see displaying the core values with our staff, patients, families, and carers regularly. These “stars” will be instrumental in embedding a positive civility and communication culture across the organisation.



Volunteer Services

Our volunteer service workforce has returned to all sites following the pandemic. Their service continues to support and complement the services provided by the Trust staff, ultimately improving the experience of the patients. The volunteer roles currently include reception desk support, guiding volunteers, supporting wards with providing drinks for patients, community service drivers and volunteer support for our specialist services such as Bereavement services and Cancer care services.

To thank our volunteer workforce, and welcome their return to all sites, a volunteer celebration event was held, and was attended by over one hundred volunteers, the Patient Experience Team, the Deputy Chief Nurse, Chief Executive and Chair of the Trust.



Chaplaincy & Spiritual Care Department

The Chaplaincy & Spiritual Care Team provides Pastoral, Emotional, Spiritual & Religious Care for patients, families, and staff for people of all faiths and belief and none. They provide a safe space, listening ear, the ability to journey with people in a person-centred way whilst they are in hospital or accessing WWL Services. The team have continued to support patients, families and staff throughout the pandemic and have conducted Remembrance and Memorial Services for staff who sadly passed away, supporting member of staff who are struggling with the aftermath of the pandemic or with challenging work or life events. They have also facilitated weddings for patients at the end of their lives and baptism and naming ceremonies for those at the start of life, as well as supporting all stages in between.

The Chaplaincy & Spiritual Care Team visit the wards across all sites and provide a “listening ear” for people who are worried or would like emotional or spiritual support, as well as assessing and providing for religious needs. The Team have produced a Multifaith and Belief Calendar for the last 17 years and provide information about the various festivals and days of celebration, as well as liaising closely with community groups to provide a high-quality service for the full diversity of people whose lives bring them into contact with the Trust.

The Team is a part of multi-disciplinary teams and on various committees throughout the Trust, as well as some regional and national bodies. They work in accordance with the UK Board for Healthcare Chaplains Code of Conduct, Capabilities and Competences, and NHSE Chaplaincy Guidelines. They provide education for staff about wellbeing, DNACPR, communication skills, listening skills, participate in various induction programmes and are available to deliver bespoke training in various wards and departments across the Trust, to name but a few.

Other things that they have been involved in included running the staff choir prior to COVID, they are setting up a ward-based art group, lead relaxation and meditation sessions, facilitate ‘Sad ... Not Mad’ staff bereavement group.

They are available 24/7 in emergencies and operate an open referral system.



Equality Diversity and Inclusion Patient Services

Ensuring that patients understand their options for treatment and their plan for care is of utmost importance to the Trust, and an Interpretation and Translation service is provided for our patients. This includes face to face and telephone other language interpretation, as well as face to face British Sign Language (BSL). This service aims to promote equality and challenged discrimination. Work is ongoing with Wigan Deaf Club, to support service improvements.

The Trust has been instrumental in the development of a Greater Manchester wide Interpretation & Translation service across all ten boroughs, which will provide consistency of service, care, and treatment for out of areas patients using our services, and our patients using our hospital Trust services.

Accessible Information standards continue to be monitored, all concerns addressed and areas for improvements identified. ED&I Patient services continues to support the PLACE National Estate & Facilities programme and have successfully agreed funding to extend the Accessible contract for a further 5 years.

The service has been at the forefront of the LGBTQIA+ agenda, and sponsored Wigan PRIDE 2022. There have been processes introduced to record the gender change details for all patients of all genders.



Patient Information Leaflets

The Trust places great emphasis upon patients being able to access all information that they need, to be enable their decision making around their care. The Trust shares its patient information leaflets on the Trust public website and have developed QR coded posters and patient Therapy Exercise videos to ensure that our service users have a range of methods by which they are able to access any information that they need.



Patients at the heart of all we do

A simple introduction is the first rung on the ladder to providing truly person-centred care. It is important for patients to feel that their care is compassionate, and that staff see them as a person and not just a patient.

These values are about staff working collaboratively to deliver great patient experience, involving families, carers, and friends to ensure that care is person-centred. Staff working for the Trust are our biggest asset and we understand that, to deliver good patient experience, we must also ensure a positive staff experience.

Communication

- I will always start with a basic introduction **#hellomynameis...**
- I will ensure I listen to and communicate with patients in a timely and effective way
- I will use clear and plain language and check people's understanding

The Little Things

- I understand that the little things do matter to our patients because they are not little at all
- I will sit down next to patients rather than looming over them
- I will hold the door open for someone coming through it

Patients at the heart of all decisions

- Shared Decision Making - "No decision about me without me" will be the core of what I do
- I always understand that the most important person is the patient
- Everything will be done with the patient in mind

See me

- I will put the patient first, recognising there is a patient behind everything I do
- I will ensure patients are not referred to as a bed number
- I will ask each Patient to share what matters to them to ensure my care is trauma informed

Our Pledges

Our ambition is to continue our improvement journey and to collaborate with our patients, carers, families, and friends as part of the process. This will be done through engagement activities that will help shape future service delivery. We have, therefore, made some pledges to ensure our work remains patient-focused and is used to ensure patient experiences are positive.

Pledge 1: Patients, carers, families, and friends are treated with dignity, kindness, compassion, courtesy, respect, understanding and honesty.

How will we know we are making progress?

We will be inclusive of all patients, carers, families, and friends and seek feedback from them at every opportunity.

We will provide a closer level of supervision and support to patients who are assessed as an increased risk of harm for example, due to falls. Patients will be closely observed to maintain their safety, dignity, and privacy.

We will review trends and themes from all aspects of patient feedback including informal concerns and complaints

We will review results of the local core survey on privacy and dignity and results from the national surveys relating to staff interactions with patients to ensure there is clear evidence that Trust values and behaviours are upheld

We will monitor and analyse feedback from Friends and Family Test/Care Opinion to highlight good practice and identify any areas for improvement based on comments from 'detractors' e.g., patients that would not recommend the Trust

We will publish results across all Divisions, for distribution to their wards

We will review current care in relation to providing emotional support from hospital staff

Pledge 2: Patients, carers, families, and friends are introduced to all healthcare professionals involved in their care and are made aware of the roles and responsibilities of the members of the healthcare team.

How will we know we are making progress?

All staff members wear name badges and introduce themselves to patients.

We will ensure the effectiveness of the #hello my name is initiative

We will review results from patient feedback contained in all local and national surveys

We will increase awareness through awareness and engagement events

We will ensure every patient, family and friend knows who oversees care and in charge of the ward

Pledge 3: Patients experience effective interactions with staff who have demonstrated competency in relevant communication skills.

How will we know we are making progress?

We will always introduce ourselves to patients, carers, friend, family, and staff

We will provide communication aids to enable meaningful interactions

We will review actions identified from local core survey for communications to identify key themes and best practice.

We will review results of relevant questions in the National Patient Surveys including: Did Staff include you in the conversation around your care?

We will review feedback from formal and informal concerns.

We will analyse the Friends and Family Test/Care Opinion to highlight good practice and identify any areas for improvement.

We will ensure clear answers are given to patients, families, and friends

We will provide the understandable information to our patients, families, and friends

We will listen to patient stories and will include them in our learning

Pledge 4: Patients' preferences for sharing information with their partner, family members and/or carers are established, respected, and reviewed throughout their care.

How will we know we are making progress?

We will always introduce ourselves to patients, carers, friends, family, and staff

We will ask patients for their consent to share information with partners, family, friends and/or carers

We will support patients' decision making using communication aids where required

We will always act in the patients' best interest where consent cannot be obtained, ensuring we follow the principles of the MCA 2005

We will review results of relevant questions in the National Patient Surveys including: Did Staff include you in the conversation around your care?

We will review feedback from formal and informal concerns.

We will ensure clear answers are given to patients, families, and friends

We will provide the understandable information to our patients, families, and friends

Pledge 5: Patients are made aware that they have the right to choose, accept or decline treatment and these decisions are respected and supported.

How will we know we are making progress?

We will ensure collaboration with patients and involved them in all decisions about their care

We will recognise the need for increased patient involvement in shared decision making and abide by 'no decision about me, without me' in our practice

We will respect decisions made by patients and support their choice of treatment option

We will monitor concerns raised by patients where patient choice was not respected or supported for treatment options

We will promote examples of actions / concerns highlighted in "You Said, We Did"

Pledge 6: Patients and carers (where applicable) are made aware of who to contact, how to contact them and when to make contact about their ongoing healthcare needs.

How will we know we are making progress?

We will review national and local patient survey results to demonstrate that information is given to patients of who to contact when they leave hospital.

We will ensure patient information leaflets include details to advise patients who to contact about their ongoing healthcare needs, and how and when to contact them.

We will advise patients when they are discharged who to contact about their ongoing healthcare needs, and how and when to contact them.

Pledge 7: Patients have opportunities to discuss their health beliefs, concerns, and preferences in line with the Equality, Diversity, and Inclusion Strategy.

How will we know we are making progress?

We will review local and national patient survey results for patient satisfaction on whether patients were able to find a member of staff to talk to about their worries and fears and received enough emotional support.

We will, where relevant, continue to use patient passports to ensure holistic care needs are met

We will work to ensure we meet the needs of all patients regardless of age, race, disability, class, gender, sexual orientation, or religious beliefs

We will include family and carers in decision making to ensure that personal preferences are considered when patients are unable to make decisions themselves

Pledge 8: Patients have their physical and psychological needs regularly assessed and addressed, including nutrition, hydration, pain relief, personal hygiene, and anxiety.

How will we know we are making progress?

We will review local and national patient survey results for patient satisfaction on relevant questions including pain relief, food, and nutrition.

We will ensure all patients are offered a choice of food and drinks

We will provide help to eat and drink for patients requiring assistance

We will monitor this through the ASPIRE Ward Accreditation programme.

Our Aims & Objectives

Our ambition is to continue our improvement journey and to collaborate with our patients, carers, families, friends, and partners as part of learning from experience and use that to shape future service delivery. The person is at the heart of everything we do, and this will help focus our overall objectives and aims.

Patients

We will work with our patients to develop accessible, high-quality services based on feedback to provide a positive patient experience.

Carers

We are committed to actively listening to our carers and welcome feedback through the Carer's Survey to improve the quality and provide a positive experience of care.

Families

We welcome feedback from families to ensure services are high performing and communication is clear, accessible, and available.

Friends

We will actively listen to feedback from Friends & Family Tests as well as Care Opinion to ensure improvements are based on what people tell us.

Partners

We will collaborate with our local partners to monitor patient experience, listen to feedback, and engage with local communities to help improve our services.

How we will achieve our pledges

To build upon the work that we have started, and to continuously improve and develop our work to ensure our patients, their families, loved ones, carers and friends have a positive experience and remain at the heart of all we do.

Each of our pledges are incorporated into a plan of objectives with timescales over the next three years.

Friends and Family Tests—patients now have the opportunity to provide feedback at any point of their journey. This will allow us to have more qualitative data which can be fed back to services to use for improvements and incorporate equality, diversion, and inclusion for our patients

Pledges 1, 2,3,4,6 & 8

Inpatient in-house surveys—clinical teams will start to capture their own feedback with support of the Patient Experience & Engagement Facilitators. This will mean any immediate actions can be addressed at the point they are raised and have a positive impact on patient experience.

Pledges 1, 2,3,4,5,6,7 & 8

Delivering Same Sex Accommodation —we will continue to ensure this is a priority across the Trust and work closely with colleagues from the Clinical Commissioning Group to ensure our patients are in a safe and appropriate setting for their care.

Pledges 1, 3, 7 & 8

Patient Property —we will continue to develop and embed the Patient Property initiative Trust wide to ensure that our patients personal belongings remain with their owner, in safe storage and a patient property & valuables log is completed and signed where appropriate.

Pledges 2, 5 & 8

Carers Passport Agreement —we will continue to develop the Carers passport and agreement to ensure that our patients' carers and loved ones are recognised, involved, and consulted with for all aspects of their care, and journey within our services

Pledges 1, 2, 3, 4, 5, 6, 7 & 8

Hello, my name is— Kate Granger” Stars” we will continue to embed the “civility campaign, “Hello my name is” and introduce Kate Granger “Stars” who will champion the campaign, ensuring the “what matters most” to our patients and their families is known

Pledges 1, 2, & 3

Patient Bedside Booklet— We will look at developing In-patient bedside booklets to enable our patients, their carers and families to understand what to expect throughout their journey within our care

Pledge 1, 2, 3, 5, 6 & 7

Patient behind the bed boards— we will support the Divisions to ensure that the patient behind the bed boards information compliance is improved, with a focus on “What matters to me” “what I like to be called and my pronouns” and “What matters to my family” to ensure effective communication and that the person is included and remains at the heart of all decision making

Pledge 1, 3, 5, 7 & 8

ASPIRE— the Patient Experience team will remain actively involved in the ASPIRE accreditation programme to ensure person centred care standards are maintained and patient feedback plays a central role in the ASPIRE reports

Pledge 1, 2, 3, 4, 5, 6, 7 & 8

Noise at Night—We will promote the feedback of this issue, to enable the Divisions to address this topic and embed process to tackle the issue of noise at night, we will support all in-patient areas to manage concerns and issues around noise at night for our hospital patients.

Pledge 1, 2, 7 & 8

Equality, Diversity & Inclusion (EDI)— Our dedicated Patient Services EDI Lead will look at how we capture patient feedback from our services for people with unique needs, to understand and improve the patient experience. We will be implementing the EDS 2022 Framework (improvement tool for patients, staff and leaders of the NHS), assessing three services each year against four outcomes and evaluating in collaboration with service users, patients and community groups. We are committed to tackling health inequalities and understand that some groups of people, including protected characteristic groups, experience different access, experience, and outcomes when they use NHS services. Undertaking Equality Impact Assessments (EIAs) helps us to understand how our policies and services may affect different groups of people. EIAs help us to think about how what we do may impact on all members of the community and provide us with an opportunity to consider how we can further promote inclusion and diversity in everything we do. The culture of EIAs will be pursued to provide assurance that the Trust has carefully considered any potential negative outcomes. This will include the impact on our armed forces community and their families, who have been shown to suffer significant disadvantage in accessing healthcare due to service-related obligations, ensuring that any inequalities are identified and tackled in an open and transparent way

Pledge 1, 7 & 8

Music Therapy— we will work closely with Radio WWL and the Admiral Nurse service to look at how we can promote more music being played on the wards.

Pledge 1 & 8

Volunteer Support - we will work with our volunteer colleagues to improve the experience of patients and to support the needs of patients accessing our services

Pledge 1, 2, 3, 7 & 8

Armed Forces Healthcare - Our dedicated Armed Forces Healthcare Team will work closely with staff and patients to ensure no disadvantage is faced by patients when accessing healthcare services and that the Armed Forces Covenant and the Armed Forces - Forces Friendly policy is upheld throughout our services. This includes paying due regard to our Armed Forces Community, treating them with dignity and respect, giving special consideration and making reasonable adjustment where appropriate. There will be Armed Forces Aware staff across the trust to support the Armed Forces Community in accessing safe and equal healthcare

Pledge 1, 2, 3, 5, 6, 7 & 8

Pet Therapy— we will work closely with Infection, Prevention & Control Team, and national guidance to look at how we can promote pet therapy for our in-patient areas to promote patient and staff health and wellness

Pledge 3 & 8

Dressed is Best Clothes— we will work with our AHP and ward colleagues to embed a culture where patients are dressed in their own clothing to help normalise their surrounding and help aid their recovery.

Pledge 1, 2, 4, 5 & 8

Enhanced Care - we will work with our ward colleagues to ensure appropriate risk assessments are completed with patients, families and carers (where appropriate) and where increased risk of possible harm to patients is identified, an increased level of supervision a patient receives will be put in place.

Pledge 1, 3, 4, 5, 7 & 8

When we will achieve our Patient Experience & Engagement Objectives & Pledges

Each of our pledges have been incorporated into our Patient Experience & Engagement Plan and clear objective set to support achievement. These are the timescales within which we expect to achieve the objective with ongoing attainment and maintenance over the remaining period.

Year 1

- Friends & Family Tests
- Inhouse inpatient Surveys
- Patient Property
- #Hellomynameis....
- Pet Therapy

Year 2

- Carer's Passport Agreement
- Patient handbook
- Aspire
- Armed Forces Healthcare
- Equality, Diversity & Inclusion
- Noise at night

Year 3

- Delivering same sex accommodation
- Dressed is best
- Music therapy
- Patient behind the bed boards
- Volunteer support
- Enhanced Care

How we will know we have achieved our Patient Experience & Engagement Objectives & Pledges

By the end of the 3-year strategy period we will have achieved:

Objective	Measure
Friends & Family Tests	Every area will have access to FFT's and we will see an increase to 25% return rates with consistently over 95% positive feedback. 5% improvement in patients recommending WWL as a place to receive care.
Inhouse inpatient Surveys	A minimum of 10 surveys per months will be returned for each ward with clinical teams providing the PE&E team with at least 1 survey per ward/area, per week. 5% increase in patients reporting they have been fully involved in their care.
Patient Property	A decrease of 50% in patient complaints relating to lost property.
#Hellomynameis....	2 'Kate Granger Stars' are identified on each ward/area who champion the campaign and demonstrate the campaign values.
Pet Therapy	We will have 8 therapy pets across our inpatient areas.
Carer's Passport Agreement	We will have carer's survey's being returned with a 95% very good or excellent overall carer experience.
Patient Bedside Booklet	Inhouse inpatient surveys will show 100% of those surveyed have had access to the Patient Bedside Booklet.
Aspire	We will have a minimum of 14 areas that are at Bronze level, 8 Silver and 1 Gold.
Armed Forces Healthcare	25% of staff are Armed Forces Aware. The trust has 100 Armed Forces Champions in place. 100% of Armed Forces patients requiring support, receive support and signposting.
Equality, Diversity & Inclusion	We will be consistently rated as 'achieving' in domain 1 of the EDS. The trust will have achieved the Silver Rainbow Badge Accreditation.
Noise at night	Surveyed patients reporting not being disturbed by noise at night will increase to 80% - as per the inhouse inpatient surveys.
Delivering same sex accommodation	Evidence of meeting with colleagues to discuss same sex breaches and areas identified for improvements. Continued monthly monitoring of breaches.
Dressed is best	100 % of patients surveyed report being given the opportunity to get dressed.
Music therapy	Patients across the trust will have access to WWL radio.
Patient behind the bed boards	Bed boards completed for all patients - measured as part of ASPIRE programme and quality assurance audits.

Volunteer support	Increase volunteers available across the trust to 400.
Enhanced Care	Zero moderate or severe harm for HAPU and a reduction in reported falls.

Assurance & Governance

The implementation and success of this strategy will be monitored and reviewed by the Patient Experience & Engagement Group. The PEEG reports into the Patient Quality & Safety Group, which reports directly to the Trust Board for quality, assurance & monitoring purposes.

Contact us:

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