

Healthwatch Coventry commentary on UHCW quality account

Healthwatch Coventry represents the interests of patients and public in local NHS and social care services. We are asked to consider if a Trust's quality account shows the following:

1. reflects peoples' real experiences as told to Healthwatch
2. shows a clear learning culture in the Trust that allows people's real experiences to help the provider get better
3. priorities for improvement are challenging enough and is it clear how improvement will be measured

The version we received to produce this commentary did not contain most of the data.

Overall

This has been an extraordinary and difficult year for hospital services due to the COVID-19 pandemic and UHCW has been called on to respond to the demands of treating two waves of people experiencing severe illness from COVID-19. As detailed in the account the impacts of the pandemic extend far beyond the provision of this care.

Last year's priorities

The Trust adapted the priorities it set to take into account COVID-19.

Priority 1 - Patient Safety

The achievements described a focus on improving the process and 'flow' of patient discharge. The missing element is how patients, and their families were involved within this improved communication and planning.

Priority 2 - Clinical Effectiveness

Here the work highlighted has been rightly focused on preventing COVID-19 infection.

Priority 3 - Patient experience

'The Trust will work in partnership with patients and carers in planning adult patient discharges from hospital'.

The information provided highlights a nationally determined approach to hospital discharge put in place in response to COVID-19 and implemented by the trust and partner organisations. It is anticipated that this approach will be retained.

We know from feedback that family/unpaid carers can be adversely affected where discharge planning does not identify and put in place the correct support. Therefore enabling a local partnership approach with carers to address this is essential.

The more joined up approaches with other organisations and better communication between organisations is welcome and should benefit patients. However, the information provided focuses on the staff and the organisations rather than the patients and their families. Some of language used is disempowering e.g. 'patients are taken to' and 'Patient Information and letters that need to be provided'.

Healthwatch Coventry has previously carried out a substantial review of the discharge to assess routes for patients in Coventry from their point of view. Prior to the pandemic we were working with the Trust and other agencies to improve communication and empowerment of patients and their families in the process. The importance of this should not be forgotten. Ensuring people understand what is happening to them, can ask questions and get answers and have a clear route for raising issues as part of their journey and plan is very important.

Priorities for 2021-22

Healthwatch Coventry took part in a priority setting online workshop along with people from other groups and organisations and individuals.

Priority 1 - Patient Safety

This is a welcome focus on embedding a Framework for Involving Patients in Patient Safety. The specific route is by recruiting two patient safety representatives. As discussed at the quality priority setting workshop making this meaningful will require thought and support.

Priority 2 - Clinical Effectiveness

This focuses on how the Trust uses and communicates it is using NICE guidance in patient treatment/care.

Priority 3 - Patient experience

The focus on collecting better monitoring data about patients to understanding how the trust is reaching diverse communities is welcome. A focus on underrepresented groups in relation to service design and experience is positive. However, how this will be measured is not clear from the document. The nature of the piece of work around health inequalities is also not set out.

Other quality information

Most of the 2020-21 data was not available in the version of the document we saw.

The trust continues to be rated as 'Good' by the Care Quality Commission.

The trust details actions taken as a result of findings of clinical audits and Describes that Data Security and Protection Toolkit standards are met.

The trust provides information about incident and mortality review processes. It is difficult to benchmark the figures which were included to be able to establish context.

Staffing vacancies and gaps in rotas are flagged as an issue.

Involvement of patients and public

The overall figures for complaints were not available to us in the draft however the area showing the highest number was related to communication. There will of course be a number of aspects to this, and the trust should consider these and how to ensure quality priorities can act as impetus for improvement.

This is similar to the most frequent topic of contact with Healthwatch Coventry across local health and care services, which is 'attitude and communication'. The information we have collected from local people since COVID-19 in relation to UHCW indicates some challenges around communication routes with hospital services linked to how access to services and information has changed.

The trust describes positive measures it has put in place to help facilitate contact between relatives and patients on wards. As the amount of people being treated on wards has increased this may stretch this capacity.

There has been huge change to and pressure on services this year due to the pandemic. Some changed ways of working will become embedded. It is therefore important the trust continues to develop ways to evaluate approaches from the patient point of view.

There is also a need for new ways of working due to emerging Integrated Care System in the NHS (and linked to the local council role in social care). Patient and public experience and involvement work will need to be a more connected across organisations and this approach should bring dividends for local people and communities.

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