

Commentary from Healthwatch Coventry and Scrutiny Board 5

Healthwatch Coventry represents the interests of patients and public in local NHS and social care services.

We liaised with the Chair of the City Council Health and Social Care Scrutiny Board to produce this commentary on the evidence CWPT has produced about how it addresses quality of service.

We are asked to consider if a Trust's quality account:

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 process of producing Quality Accounts was delayed this year as a result of the Covid-19 pandemic. NHS Trusts were given extra time to produce their quality account documents and some of the requirements were relaxed.

Members of the Healthwatch Coventry Steering Group met with representatives from CWPT at the end of June 2020 to hear an update on quality work related to last year's priorities and the priorities for the current year, which became areas of work from the beginning of April 2020. This was a useful meeting.

Last year's priorities

Last year the Trust aligned Quality Account work with strategic aims.

For the aim of improving patient outcomes and experience the Trust highlights that measures showed a picture which remained largely the same rather than improving.

The Trust highlights findings from the last Care Quality Commission (CQC) inspection showing work is needed to ensure people are more involved in their care and care reviews etc.

The Trust reports progress in training staff in Quality Improvement methodologies; exceeding the target of 12.

The Trust succeeded in reducing staff turnover and staff engagement scores remained the same.

2020-21 priorities

The document does not contain any information about why these quality goals were picked and set. Nor is there information about any part played by

patients/service users in the identification and setting of the priorities. This information should be included.

It is positive that the Trust has returned to defining more specific quality goals this year and that measures over 3 years are given for some. Goals are also defined by service area, which is helpful.

However, the use of a reduction in the number of complaints by 25% as a measure for year one for patient experience is not necessarily the best measure.

More defined measures for objective three for community health and wellbeing would make it easier to track progress.

Similarly, a target for the development of the use of the Friends and Family Test survey in Learning Disabilities and Autism services would be useful.

Quality information/data

The Trust has clearly done lots of good work this year and demonstrates the ability to identify issues and learn from them. The Trust is overall rated as Good by the Care Quality Commission (CQC).

The Trust demonstrates actions and learnings from clinical audits. Actions are also listed as learning from mortality data.

National data shows follow up of patients on the care programme approach within 7 days falls slightly below the national average.

For the Friends and Family Test survey it would be helpful to have information about the response rate to this survey and to have this data split by service area.

There is no comparator data for complaints given with previous years. This comparison is given for PALS contacts and shows a significant reduction over the three years of data. This could be an indicator that people are finding it hard to raise issues, or that there are less issues. A piece of work to evaluate understanding and knowledge of the processes and experiences of the complaints and PALS would help.

The National Patient Survey of Community Mental Health users shows some issues and it would have been helpful for the Trust to provide more comment on this.

An explanation of what actions the Trust has identified to respond to the feedback from staff in the nationally organised staff survey for the question about bullying rates would be helpful. These figures are just reported in the draft without any commentary.