

Healthwatch Coventry commentary

Healthwatch Coventry represents the interests of patients and public in local NHS and social care services. This is our 'commentary' on the evidence WMAS has produced about how it addresses quality of service.

Local Healthwatch are asked to consider if a Trust's quality account shows the following:

- Does it reflect peoples' real experiences as told to Healthwatch
- Is it clear from the draft that there is a learning culture in the Trust that allows people's real experiences to help the provider get better
- Are priorities for improvement in the Quality Account challenging enough and is it clear how improvement will be measured?

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

The Trust reports a busy year and there were additional challenges at the end of the period due to flooding and Covid-19.

The Strategic Objectives for 2020/2021 embody an ambition to make progress in a wide range of activities.

The Trust's work in response to national requirements to review cause of death of those who die in the Trust's care is very welcome. The trust describes a learning route to identify improvements. They also evidence Duty of Candour for staff.

From the document it does appear that the Trust is keen to note and willing to learn from mistakes.

The Trust identifies key areas to focus their learning and staff development.

The Trust has achieved the targets its commissioning organisation set as CQUIN targets and remains rated as outstanding by the Care Quality Commission.

The Trust acknowledges that it remains on a journey to developing how it gathers feedback and involves patients and families and includes priorities around this for the third year running.

When we look at the information provided in the document about patient and public involvement, we begin to be concerned that progress seems to be quite slow. We expected the trust would be able to describe more engagement reach and more pieces of work and mechanisms.

The Trust, for example, analyses topics of complaints received and PALS enquiry topics highlighting the top issues of concern. Here there is some synergy with what

people say to us. However the number of these contacts are reducing and represent a small fraction of those who use services across patient transport, NHS 111 and emergency ambulance services. The Trust also covers a large geographical area meaning that experiences may well be different from locality to locality for some services, perhaps due to rural and urban localities. People who use services may not wish to make a formal complaint but could still have valuable feedback for the Trust.

The Trust had a quality goal for 2019-20 about developing the implementation of the Friends and Family Test feedback survey. However, the quantity of responses to the Friends and Family test feedback questions have reduced rather than increased. For the patient transport service there is less than half last year's number of responses.

The Trust had also set an objective regarding gathering feedback about patient transport services using a specific survey however the response figure reported at the end of quarter 3 is considerably less than that of the previous year.

The Trust mentions developing its arrangements for improving the culture of engagement and changing responsibilities at an executive level. Leadership and culture are very important for encouraging and enabling effective patient and public engagement activity. It is important that there is shared responsibility amongst staff teams with strategic leadership, ambition and oversight.

The responses to the Trust staff survey also shows that more work is needed in using feedback through discussions and actions within directorates.

A relatively small group has fed into the equalities self-assessment rating process and the Trust records information showing progress in equalities areas.

2019-20 priorities

This section was not complete for us to look at. We hope the Trust can address this next year as the timeline for the quality account is defined and it is our experience that other Trusts share more complete information at this stage.

We cannot see from the information provided why the trust has rated its making every contact count quality priority as 'achieved'. More information is required.

There has been good progress in reducing medication errors

2020-21 priorities

WMAS has set out priorities for each of its service areas: emergency ambulance; patient transport and NHS 111.

The Trust plans to improve patient feedback via a survey of 100 patients per quarter and an invite to a patient focused meeting to understand their experience

and if they had the need to re-contact either 999/111. Given that the Trust supports an area of 5.6 million this is a small sample and the response rate to a survey is likely to be less than 10%. Therefore, the Trust should consider revising their target numbers. Using technology for virtual meetings will also help more people to take part, including those who cannot travel to attend face to face.

Within the Patient transport priority no target figure is given for increased responses to patient surveys, friends and family test and reduction in complaints.

Other

There are some areas of the document where information is presented without reflection or analysis of what the information means or shows. For example the Trust reports significant increases in the number of safeguarding referrals it is making for both adults and children. This raises the questions of why is this? What does this show? Is this being taken forward in discussion with other agencies? Information such as this would be helpful.

[ENDS]