PH/16/19 Health and Wellbeing Scrutiny Committee 20 June 2016

# Community Services in Northern Devon - update

REPORT TO:	Devon Health and Wellbeing Scrutiny Committee
DATE:	20 June 2016
PRESENTED BY:	Stella Doble Assistant Director Health and Social Care Northern Devon Healthcare NHS Trust

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In January 2016, Northern Devon Healthcare Trust (NDHT) provided an update to the Committee on the status of community services in Northern Devon over the winter period, following the outcome of the public consultation: safe and effective care within our budget. This saw a reduction of community hospital inpatient beds from 75 to 40, in line with commissioning intentions.

It was agreed that NDHT would provide a further update in March in response to the additional questions that were raised at the January meeting. Unfortunately the Trust

was unable to provide a report at that time and the committee asked for an updated report to be presented on 20 June 2016.

The Committee requested that "a report be made to the next meeting on the transition from community hospital care provisions to community services and how well it was operating to include: financial and clinical impacts, analysis of outcomes and satisfaction survey information of patient experiences."

We have prepared a report which therefore contains the following information:

- 1. Further update on winter performance
- 2. Financial impact of the transition from hospital to community
- 3. The impact on patients in terms of number of patients cared for in the community, number of admissions to the acute hospital and other community hospitals
- 4. The impact on staff: detail of the redeployment of staff from the community hospital (Bideford)
- 5. Patient satisfaction with the community model of care

# 2. Winter performance

As the Committee will be aware, the Northern Devon Healthcare Trust has been pursuing an 'out of hospital' strategy for many years as the evidence shows that care delivered in or close to people's homes provides better, more person-centred care to patients which maintains their wellbeing and independence and delivers more system resilience in times of high demand for services.

Compared to 2014/15, last winter, the Trust operated with 25 fewer community beds and 22 fewer acute beds. We are pleased to report that over the challenging winter period the system coped extremely well in Northern Devon, particularly when compared to systems which had increased their beds. Despite the ongoing high demand for our services and pressure in the wider health and social care system, NDHT experienced fewer and shorter periods of escalation, i.e. was never in 'black' and managed to recover from 'red' within a few hours in the majority of times. Our NDDH A&E performance was recently ranked as the top-performing in the country in terms of the 4 hour wait.

Having intensively analysed all of the available performance metrics and quality indicators it is our belief that we were able to provide better and more consistent safe and high quality services despite our winter pressures because we changed the way we delivered care last winter – shifting it out of hospital and closer to people's homes.

The closure of community hospital beds allowed us to focus more of our highly skilled and professional nursing, doctor and therapist resources into the community

to support patients safely avoid unneessary admissions to hospital, as well as ensuring that our ward teams at NDDH have all the support they need to help people back to their homes without delay.

The Trust is able to provide assurance to the committee that we have dealt with periods of escalation very well and de-escalated within hours because we have learnt how to work as a system to cope in periods of high demand. Across GPs, mental health, the ambulance service, social care, our hospitals, community teams and the voluntary sector, we all play a part in making sure the system meets demand and delivers consistent quality services.

# 3. The financial impact

It is a far more clinically-effective and cost-efficient model of care to deliver more care in people's homes as opposed to small community hospitals. This is because resource is invested into our skilled and mobile workforce not building maintenance, utilities and rates. Nurses and therapists can care for more almost four times as many people with the same resource (please see Appendix A) with the added benefit that patients receive this care in their own familiar surroundings.

As the committee will be aware, the consultation was entitled safe and effective care within our budget and the Trust was explicit that this budget had reduced in 2015/16 by  $\pounds$ 11 million,  $\pounds$ 5 million of which was allocated to our community contract. There were many other efficiencies that we made to our services in 2015/16 but regrettably we still ended the financial year with a  $\pounds$ 4.7m deficit.

Bideford Willow Ward was a 16-bedded ward which cost approximately £75k per month to run and cared for 21 inpatients a month (on average).

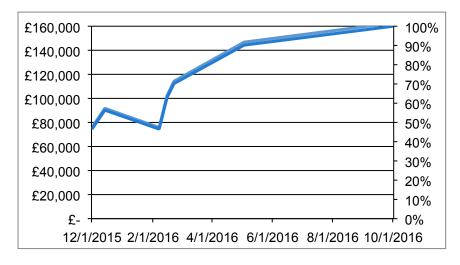
When this ward was closed, the Trust used a tried and tested formula, based on our experiences of other ward closures, to allocate a budget ( $\pounds$ 160,000) which was moved into the Bideford community team to give it the capacity to care for the extra patients (approx. 21) per month who would have been admitted to Willow Ward. This  $\pounds$ 160,000 per year is a recurring uplift to the staffing budget and has enabled the increase in the number of community nurses, physio and occupational therapists and support workers in the community team in that area.

# 4. The impact on staff

The table below shows the investment in the community teams to replace the hospital beds.

It has taken a number of months to recruit all the staff needed and to date we have spent £150,000 of this additional £160,000.

It is anticipated that the full cohort of staff will be operational by October 2016.



This graph shows the utilisation of the additional budget for staffing the community team

Having safely replaced community inpatient beds with out of hospital community services on many occasions, our senior clinical and operational teams keep the quality of care under constant review for the first few months to check that the additional resource that was placed into the community team is a) in the right place and b) in the right configuration (i.e. grade or profession of staff). This continual oversight led to a decision in March 2016 to increase the budget by £75,000.

The Trust is operating within a very challenging clinical employment marketplace and is very focused on supporting our staff during service change. At the beginning of each financial year we meet as many staff as we possibly can to brief them on the next year's challenge, clinical direction of travel and budget and ask for their views on how the Trust can best meet this challenge. We firmly believe that this front-line involvement in the Trust's plans correlates to our excellent staff survey results which, for the last two years, has put NDHT as one of the best NHS Trusts to work for. This is interesting given the degree of service change we have delivered.

In addition to their involvement in the safe and effective care within our budget consultation, we also conducted a full employment consultation process with affected staff, supported by the Trades Unions, which enabled staff to consider new opportunities within the Trust.

This approach ensured there were no redundancies of valued members of staff and all those Bideford clinical and non-registered employees that wanted to stay with the Trust were redeployed across the organisation, primarily within the local community health and social care team.

20 members of staff were affected in total:

Staff group	Number of staff	Transferred to :
Registered Nurses	4	NDDH - acute wards/Pathfinder Team/ASU
Registered Nurses	3	Community nursing team - Bideford
Registered Nurses	1	Other community hospital wards
Health Care Assistants	3	NDDH – acute wards/day surgery
Health Care Assistants	4	Other community hospital wards
Health Care Assistants	1	Community team - Bideford
Health Care Assistants	1	MIU
Health Care Assistants	2	Resigned
Ward Clerk A&C	1	Bideford community team

As we deliver more and more care outside of hospitals, the Northern Devon Healthcare Trust has developed a comprehensive support package to enable staff previously employed in a community hospital inpatient setting to gain the confidence and transferrable skills to work in an acute or community setting.

# 5. The impact on patients

# Impact on patients of existing model of care

As part of the consultation there was a full <u>Quality Impact Assessment</u> (QIA) which included the impact on patients of the existing provision of care within community hospitals:

- The average length of stay (LoS) in a community hospital is approximately 21 days. 70% of patients are have already been in the acute hospital and have had an overall stay ("superspell") over this amount.
- It is nationally recognised that an inpatient stay greater than 11 days places the patient at increased risk of incurring a complication e.g. UTI, pressure damage, fall or medication error.
- It is also known that an increased LoS reduces the ability of the patient to return to the previous level of independence and well-being.
- We know that 40% of patients discharged from community hospitals are discharged to a care home as they have lost their independence and are no longer able to cope at home.

- Devon County Council's Public Health team undertook an acuity audit in May 2015 of each acute and community hospital within the CCG's boundary. In North and East it confirmed that on any given day between 30% and 47% of patients in our community hospitals could, and should, be cared for in a different way out of hospital, even if they had originally required admission to hospital.
- There is widespread evidence that patients have better outcomes and regain independence quicker in their own homes following illness or injury, where that is safe to do so.
- Subsequently the SR case for change confirms that on any given day across Devon over 500 people are in hospital uncessarily, i.e. they are ready to be discharged.

## Impact on patients of change to new model of care

Inpatient beds closed in Ilfracombe in September 2014 and in Bideford on 10 November 2015 and were replaced with enhanced community health and social care teams who deliver care and rehabilitation for people in their own homes.

For Ilfracombe, the closure of beds 'displaced' 9 patients over an 18 month period (e.g. 0.5 of a patient per month went to another hospital)

For Bideford, the closure of beds 'displaced' 9 patients over the first 6 month period (e.g.2 patients per month went to another hospital).

Prior to the beds closing, at any one time, our community teams had a caseload of approx. 600-700 patients in the Bideford area (also covers Northam) and 600-700 patients in the Ilfracombe area (also covers Braunton and Lynton).

Closure of the beds has increased the caseload of the community teams by approx.104 patients in Bideford and 7 patients in Ilfracombe.

The following data compares Ilfracombe and Bideford; however it must be pointed out that it is very early to draw concrete conclusions from the Bideford data and also we are not comparing like for like time periods.

Despite this, we have confidence in this new model of care in Bideford because our experiences in Torrington, Crediton, Axminster and Ilfracombe show that a period of "bedding down" is needed, and we know that, as the full complement of staff is achieved (as per the comment above) the statistics will improve.

In addition, we are closely tracking these patients through the system, so we are confident that their needs are being met.

Population	Bide	eford	llfrad	combe
Period	6 months	Rest of Northern benchmark	18 months	Rest of Northern benchmark

Incorporating community services in Exeter, East and Mid Devon

Com	parator	months from	calendar m previous 2 ears	Previous 18 months			
1.	NDDH admissions	4%	5%	-1%	3%		
2.	NDDH bed-days	16%	1%	17%	11%		
3.	NDDH length of stay	12%	-4%	18%	8%		
4.	Admissions to South Molton CH	+7	n/a	+17	n/a		
5.	Admissions to Holsworthy CH	+2	n/a	-8	n/a		
6.	CH admissions overall	-75%	3%	-84%	1%		
7.	CH bed-days overall	-67%	-7%	-77%	4%		
8.	CH LOS overall	32%	-10%	44%	3%		
9.	Attendances to NDHT MIUs + NDDH A&E	-2%	2%	-3%	2%		
10.	Community visits	5%	2%	4%	2%		
11.	Community clinical face-to-face time	5%	4%	16%	4%		
12.	Community mean visit length	0%	2%	11%	2%		
13.	Community urgent visits	41%	30%	63%	30%		
14.	Community urgent clinical face-to- face time	38%	35%	74%	35%		
15.	Community urgent mean visit length	-2%	4%	7%	4%		

## Narrative on the data in the table

Both Ilfracombe and Bideford have seen increased home visits but the length of visit in Bideford has remained roughly static whilst the length of visit in Ilfracombe has greatly increased (+11%) (line 12). This therefore means that there has been an increase in patient-facing time of 5% for Bideford and 16% for Ilfracombe (lines 10 to 12 in the table).

A&E attendances have been slightly reduced for both areas (-2% in Bideford and -3% in Ilfracombe), whereas in the general population, attendances have risen by 2%.

This patient need for 'urgent' care is now being met by the increase in rapid response from the community team, only made possible by the increase in resource in the community health and social care team (line 15).

As expected, both Bideford and Ilfracombe patients admitted to NDDH are seeing a small increase to their average length of stay, but Ilfracombe has seen reduced admissions to the acute hospital (only -1%) whilst Bideford has experienced an increase (+4%). The same trend happened in Torrington and we expect this to come down to similar levels over the next few months as the community team reaches full capacity.

There has been a large reduction in community hospital admissions from both catchment areas. Both South Molton and Holsworthy hospital accept admissions from patients across North Devon and Torridge. South Molton saw an average of

one extra patient a month from Ilfracombe and one extra patient every two months from Bideford. There was no increase in admissions to Holsworthy from Bideford, whilst admissions from Ilfracombe to Holsworthy have dried up entirely. If there was a significant medical need for Community Hospital beds, we would have seen far more admissions to both Holsworthy and SM community hospitals from Bideford and Ilfracombe patients.

Overall whilst we would like to see more data on Bideford before drawing conclusions with confidence, we are reassured that the clinical adverse impact on patients is low in both areas, which can be balanced against the evidence of improved community team working and reduced hospital admissions.

# 6. Patient satisfaction

The Friends and Family Test (FFT) is used across all services provided by the NHS and asks people if they would recommend the services they have used. The Northern Devon Healthcare Trust also asks patients for their 'free text' comments on the service and if the service could have been improved.

When combined with supplementary follow-up question, the FFT provides a mechanism to highlight both good and poor patient experience. This kind of feedback is vital in transforming NHS services and supporting excellent patient experience .

FFT cards are left with patients in their homes and the patient posts the card back to the Trust (using freepost). Appendix B shows the patient experience data from the community teams in the period from November 2015 to March 2016 (latest data available).

As can be seen, the community teams have received an overwhelmingly positive response through the FFT:

- Community nursing teams: teams achieved a 100% positive "would recommend" score except for a 97% score in Nov 2015 (137 responses)
- Community therapy teams: achieved an average "would recommend" score of 98.72% (256 forms received)

Comments received via 'free text' include: Nursing:

- The nurses are excellent in knowledge, skill, and attitude. They are concerned for my father's needs and for mine as a carer. (Barnstaple Oct-15)
- Nurses were kind, helpful & efficient. It's a help to not have to travel to Barnstaple to clinic. (Ilfracombe Oct-15)
- The nurses and response team are always there for me and are a warm and friendly team. (Lynton Oct-15)

- All the nurses were kind, cheerful & efficient & always concerned for one's welfare. Their visits were always welcome. (Holsworthy / Torrington Jan-16)
- Very pleased with care shown from all DNs [district nurses]. (Bideford Jan-16)
- The staff are reliable and very professional. (Bideford Jan-16)
- I have received exceptional service. (Lynton Feb-16)
- Good, friendly service at [age]. A friendly face & good care and help is just wonderful. Thank you for all the help. (Bideford Mar-16)
- Because they are very professional and caring nurses, always time for a chat and always smiling. (Ilfracombe Mar-16)

## Therapy:

- I couldn't have had better care from start to finish. (Bideford Oct-15)
- Experience of close personal attention by staff when in all the exercise routine excellent. (Bideford Oct-15)
- Courteous, polite. Explained everything clearly. (Bideford Oct-15)
- D. your physiotherapist was so professional, polite, caring. A good experience. His advice is continuing to help me. (Bideford Nov-15)
- Nothing by them was anything but positive and my rehabilitation was on-going and speedy due to their professionalism. (Barnstaple Jan-16)
- Very helpful and lovely people, very caring and gave me confidence. (Ilfracombe Jan-16)
- The care I received following my fall was far better than I expected and I am grateful to everyone involved. Thank you all very much. (Bideford Feb-16)
- Everyone was extremely efficient as well as being compassionate, friendly and helpful and caring. (Bideford Mar-16)
- As they took time to listen to my needs and help and patience they gave to me. (Ilfracombe Mar-16)

# Complaints

An analysis of complaints data shows that in the period from 1 November to 26 May 2016 there was one issue raised with our PALS team relating to our Northern Community health and social care teams (those delivering care in people's homes). This relates to a gentleman who was discharged from RD&E and informed that an Occupational Therapist would visit but they cancelled the appointment on 3 occasions. This complaint was fully investigated at the time, the community nurse team leader called the patient to apologise and an appointment was made for the following week. The patient was satisfied with this resolution.

The table below compares the complaints received from patients regarding their experience of community hospitals over the same period (1 Nov-26 May)

Complaints, concerns and enquiries to Patient Advice and Liaison Service (PALS):

**NHS Trust** 

Incorporating community services in Exeter, East and Mid Devon

Bideford Community Hospital	3	1	14
South Molton Community Hospital	1	7	1
Holsworthy Community Hospital	0	1	3
Northern Community Nursing Team	0	0	1

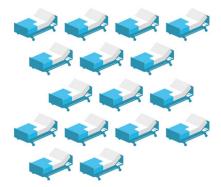
#### 7. **Conclusion**

Our commissioners, regulators and the Northern Devon Healthcare Trust Board regularly review the quality, clinical and financial performance of all our services. In our last CQC inspection, our community services not classed as "good" and the inspectors' comments indicated they were close to "outstanding". The Trust is confident that the level of care for people who are being looked after in their own homes is as good as or better than the care they would have received in hospital. Patient satisfaction levels are high and there has been an overall reduction in harm events.

# 8. Appendix A – comparison of community hospital vs community teams



A 16 bedded community hospital unit costs £75k per month to staff for nursing



In one month, a unit like this cares for around 21 people





For £75k, the same level of care can be offered to clinically-assessed patients in their homes by 12 nurses, 8 therapists, 7 support workers plus some night sits



In one month, this could care for around 82 people



# 9. Appendix B – Patient experience survey results – northern community – Oct-15 to Mar-16

## Summary

During the period Oct-15 to Mar-16 a positive set of patient experience results was returned from the northern community nursing/therapy teams and from the inpatient wards at Holsworthy and South Molton community hospitals.

1. Community nursing teams (north). The results are based on 137 patient experience survey forms returned during the period. The composite FFT score achieved was 100% across the teams for all months with the exception of Nov-15 (97%). The other survey questions consistently achieved the target score with the exception of Q1. Were you offered a morning or afternoon appointment for us to visit you in your home? which dipped below target in Feb-16 and Mar-16 and Q2. Were you contacted in advance if we were unable to keep an appointment? which dipped below target in Jan-16

The nature of the majority of patient comments received was complimentary and some examples of these are listed in the detailed information below.

Of the 137 patient survey forms returned, there was a total of 26 negative mentions / suggestions for improvement of which those receiving more than one or two mentions (accounting for 50%) were the patient perception for the requirement for more community nursing staff (10) and the patient perception that the nurses had too much paperwork to complete (3).

2. Community therapy teams (north). The results are based on 252 patient experience survey forms returned during the period. The composite FFT score achieved was 100% across the teams for all months with the exception of Nov-15 (93%) and Mar-16 (97.7%). The other survey questions consistently achieved the target score with the exception of *Q1. Were you given a choice about when your first appointment would be?* which dipped below target in three of the six months.

The nature of the majority of patient comments received was complimentary and some examples of these are listed in the detailed information below.

Of the 252 patient survey forms returned, there was a total of 24 negative mentions / suggestions for improvement of which those receiving more than one or two mentions (accounting for 58.3% of the total) were the delay in the start of the treatment (6), delay between appointments (4) and the need felt for more follow-up visits (4).

- 3. Holsworthy community hospital. The FFT score achieved was 100% for the period Nov-15 to Feb-16. No data was returned in Oct-15 and Mar-16.
- 4. South Molton community hospital. The FFT score achieved was 88.9% in Oct-15 and 100% for the period Nov-15 to Feb-16. No data was returned in Mar-16.

# Community Nursing Teams (north) - patient experience survey results - Oct-15 to Mar-16

The Friends and Family Test (FFT) is the first question asked in the community nursing team patient experience survey. The FFT is followed by a series of nine further questions. In addition, patients are asked specifically why they responded in the way they did to the FFT and for any suggestions as to how the service they have received could be improved.

#### Friends and family test

The FFT score is being calculated on the percentage basis as outlined in the NHS England guidance issued in Oct-14 and the Trust's target '**Would recommend'** score is 75%.

Team	Target	t October 2015		November 2015		December 2015		January 2016		Febru	ary 2016	March	2016
		Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend
Community Nursing Teams - Northern	75	100	-	97	•	100	1	100	-	100	-	100	-
Barnstaple	75	100	-	100	-		?	100	?		?		?
Bideford	75	100	-		?	100	?	100	-	100		100	
Holsworthy/Torrington	75	100	?		?	100	?		?	100	?	100	-
llfracombe	75	100	-	100	-	100	-	100	-	100	-	100	-
Lynton/Lynmouth	75	100	-		?		?		?	100	?	100	-
Out of Hours Northern	75	100	-	100	-	100	-	100	-	100	-	100	-
South Molton	75	100	-	80	₽	100	1	100	-	100	-	100	-

#### Other survey questions

The responses to the nine questions which follow on from the FFT have been scored as follows: Yes, always / Yes, completely = 100; Yes, to some extent / Yes, sometimes = 50; No = 0. The scores have been calculated after excluding those patients who did not answer that particular question or considered the

question to be not applicable. A monthly score can range from 0-100. The rag rating is based on the following values: Green = 73 or over; Amber = 70-72; Red = 0-69.

The target score is 73.

Question	Target	October 2015		November 2015		December 2015		Janua	ry 2016	Febru	ary 2016	March 2016	
		Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend
Q1. Were you offered a morning or afternoon appointment for us to visit you in your home?	73	76.7	₽	80.8		75	₽	75	-	55.6	♣	68.2	ᠿ
Q2. Were you contacted in advance if we were unable to keep an appointment?	73	88.5	1	88.3	₽	92.9	1	59.4	₽	77.8	1	87.5	1
Q3. Were you involved as much as you wanted to be in decisions about your care and treatment?	73	92.3	1	94.1		94.4		90.5	₽	94.4	1	89.1	₽
Q4. Have your family and carers been involved in decisions about your care as much as you would like them to have been?	73	88.6	₽	89.7		94.4		94.4	-	92.3	₽	93.8	ᠿ
Q5. Before you received any treatments did a member of staff explain any risks/benefits in a way you could understand?	73	90	₽	88.6	₽	100		90	₽	91.2		90.9	₽
Q6. Did you see the nurse clean/wash their hands during visits?	73	94.2	₽	97.4		100	1	97.5	₽	94.4	₽	95.8	1
Q7. Do you feel you had sufficient time with us during the visits?	73	96.2	₽	94.4	₽	85	-₽-	92.9	ſ	94.4		95.8	1
Q8. Do you feel you have been treated with respect and dignity?	73	98.1	₽	98.7		100	ſ	100	-	100		100	-
Q9. Do you know how to contact our service?	73	100	1	97.3	₽	97.1	₽	93.1	₽	100		82.4	₽

#### Qualitative results

Throughout the 137 patient survey forms returned during the period Oct-15 to Mar-16, the nature of the majority of comments received was of a positive / complimentary nature.

Some examples of these are listed below:

- 1. The nurses are excellent in knowledge, skill, and attitude. They are concerned for my father's needs and for mine as a carer. (Barnstaple Oct-15)
- 2. Nurses were kind, helpful & efficient. It's a help to not have to travel to Barnstaple to clinic. (Ilfracombe Oct-15)
- 3. The nurses and response team are always there for me and are a warm and friendly team. (Lynton Oct-15)
- 4. Always enjoy their visits. (South Molton Nov-15)
- 5. Nurses are supportive and caring, making me feel very comfortable and encouraged with my condition. (Ilfracombe Nov-15)
- 6. Happy with service. (Bideford Dec-15)
- 7. They're alright. (Bideford Dec-15)
- 8. All the nurses were kind, cheerful & efficient & always concerned for one's welfare. Their visits were always welcome. (Holsworthy / Torrington Jan-16)
- 9. Very pleased with care shown from all DNs. (Bideford Jan-16)
- 10. The staff are reliable and very professional. (Bideford Jan-16)
- 11. Particularly good with catheters. (Bideford Jan-16)
- 12. Very efficient. (Bideford Jan-16)
- 13. I have received exceptional service. (Lynton Feb-16)
- 14. The community nursing service is friendly and very helpful. (South Molton Feb-16)
- 15. Because I am very pleased with their service. (Bideford Feb-16)
- 16. I have a visit from district nurse twice, MH, & she treated me with tender care on my wounds. (Bideford Mar-16)
- 17. The way in which they put the patient at ease and explaining what they were trying to achieve. (Bideford Mar-16)
- 18. Good, friendly service at [age]. A friendly face & good care and help is just wonderful. Thank you for all the help. (Bideford Mar-16)
- 19. Because they are very professional and caring nurses, always time for a chat and always smiling. (Ilfracombe Mar-16)

Of the 137 patient survey forms returned, there was a total of 26 negative mentions / suggestions for improvement of which those receiving more than one or two mentions (accounting for 50%) were the patient perception for the requirement for more community nursing staff (10) and the patient perception that the nurses had too much paperwork to complete (3).

## Community Therapy Teams (north) - patient experience survey results - Oct-15 to Mar-16

The FFT is the first question asked in the community therapy team patient experience survey. The FFT is followed by a series of ten further questions. In addition, patients are asked specifically why they responded in the way they did to the FFT and for any suggestions as to what could have been done differently to have made their experience of rehabilitation better or any other comments.

#### Friends and family test

The FFT score is being calculated on the percentage basis as outlined in the NHS England guidance issued in Oct-14 and the Trust's target 'Would recommend' score is 75%.

Northern Devon Healthcare

Devon Health and Wellbeing Scrutiny June 2016 Community Services

#### Incorporating community services in Exeter, East and Mid Devon

Team	Target	Octob	er 2015	November 2015		Decen	nber 2015	Janua	ry 2016	Februa	ary 2016	March 2016		
		Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend	
Community Therapy Teams - Northern	75	100	1	93	♣	100	1	100		100	-	97.7	-	
Acute	75		?	100	?	100	-	100			?		?	
Barnstaple	75	100	-	80	₽	100	1	100		100		100		
Bideford	75	100	-	89	₽	100	1	100		100	-	100	-	
llfracombe	75	100	1	100	-	100	-	100		100	-	91.7	₽	
South Molton	75	100		100	-	100	-		?	100	?	100	-	
Torrington/Holsworthy	75	100	-	100	-	100	-	100	-	100	-	100	-	

#### Other survey questions

The responses to the ten questions which follow on from the FFT have been scored as follows: Yes = 100; Yes, to some extent = 50; No = 0. In relation to Q2, Q8 and Q9, the responses have been scored as follows: Sooner than expected = 100; As expected = 100; Longer wait than expected = 0. The scores have been calculated after excluding those patients who did not answer that particular question or considered the question to be not applicable. A monthly score can range from 0-100. The rag rating is based on the following values: Green = 73 or over; Amber = 70-72; Red = 0-69.

The target score is 73.

#### Northern Devon Healthcare NHS

NHS Trust

Devon Health and Wellbeing Scrutiny June 2016 Community Services

#### Incorporating community services in Exeter, East and Mid Devon

Question	Target	rget October 2015		Nover 2015	nber	December 2015		January 2016		February 2016		March 2016	
		Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend
Q1. Were you given a choice about when your first appointment would be?	73	74.5	î	62.5	♣	80.8	1	65.4	₽	79.2	1	71.1	₽
Q2. When you were given your first appointment was it when you expected?	73	77.8	ſ	80	1	88.9	ᠿ	86.4	₽	74.4	₽	79.4	1
Q3. Did the team member who came to see you the first time introduce themselves?	73	94.2	₽	100	1	100	-	100	-	100	-	100	-
Q4. Do the team members give you information in a way you can understand?	73	95.3		97.6	1	96.4	-₽-	100		97.3	₽	94.4	₽
Q5. Do the team members you see treat you with respect and dignity?	73	97.2	₽	97.6	1	100	ᢙ	100	-	99.1	₽	98.9	₽
Q6. Were you involved in decisions about your care as much as you would like to have been?	73	96.3	1	93.8	-	92.9	₽	94.6	1	95.3		87.2	₽
Q7. Have your family and carers been involved in decisions about your care as much as you would like them to have been?	73	91.7		87.1	₽	88.6		98		79.3	₽	88.6	1
Q8. As part of your care plan you may have been allocated equipment to use at home. Was this equipment delivered when you expected?	73	97.5	₽	97	-₽-	100		95.7	₽	91.7	₽	97.2	1
Q9. As part of your care plan you may have been allocated a place at a clinic or class. Was this clinic or class made available when you expected?	73	78.9	₽	85.7	1	100	ᢙ	100	-	94.4	₽	92.9	♣
Q10. By the end of your rehabilitation had you achieved everything you expected?	73	87.1	1	77.3	-₽-	82.5		97.6	1	85.9	₽	80.3	₽

#### **Qualitative results**

Throughout the 252 patient survey forms returned during the period Oct-15 to Mar-16, the nature of the majority of comments received were of a positive / complimentary nature. Some examples of these are listed below:

- 1. Every member of staff were very friendly and introduced everyone present. Extremely patient with everyone and made it a pleasure to go to the clinic / group concerned. (Barnstaple Oct-15)
- 2. I couldn't have had better care from start to finish. (Bideford Oct-15)

- 3. Experience of close personal attention by staff when in all the exercise routine excellent. (Bideford Oct-15)
- 4. Courteous, polite. Explained everything clearly. (Bideford Oct-15)
- 5. Good advice given on all occasions. Always prompt at appointments. (South Molton Nov-15)
- 6. D. your physiotherapist was so professional, polite, caring. A good experience. His advice is continuing to help me. (Bideford Nov-15)
- 7. Unexpectedly valuable therapy delivered by dedicated staff. (Bideford Nov-15)
- 8. B. was extremely supportive and professional in her approach, care and understanding. (Barnstaple Dec-15)
- 9. Punctual detailed explanations considerate. (Bideford Dec-15)
- 10. The service offered was tailored totally to my personal needs including home visits. (Bideford Dec-15)
- 11. Nothing by them was anything but positive and my rehabilitation was on-going and speedy due to their professionalism. (Barnstaple Jan-16)
- 12. Very helpful and lovely people, very caring and gave me confidence. (Ilfracombe Jan-16)
- 13. D., the young man from physio, gave me a set of exercises for my stiff neck & shoulders and I can now lift my arms above my head! They made so much difference to me. (Bideford Jan-16)
- 14. Offered good, practical help. Found everyone knowledgeable and professional. Built confidence. (Torrington / Holsworthy Feb-16)
- 15. Cheerful, helpful & punctual staff. Who were very kind & patient with my husband who has dementia. (South Molton Feb-16)
- 16. The care I received following my fall was far better than I expected and I am grateful to everyone involved. Thank you all very much. (Bideford Feb-16)
- 17. All good work was done at all times, they were very kind to me. (Bideford Feb-16)
- 18. Stress-free and the simple exercises are easy to follow. (Barnstaple Mar-16)
- 19. I was previously endeavouring to strengthen my limbs following a stroke, not aware that I could have been doing more harm than good by incorrect exercises so when I was shown by your physiotherapists the correct methods it made such an improvement. (Bideford Mar-16)
- 20. Everyone was extremely efficient as well as being compassionate, friendly and helpful and caring. (Bideford Mar-16)
- 21. As they took time to listen to my needs and help and patience they gave to me. (Ilfracombe Mar-16)

Of the 252 patient survey forms returned, there was a total of 24 negative mentions / suggestions for improvement of which those receiving more than one or two mentions (accounting for 58.3% of the total) were the delay in the start of the treatment (6), delay between appointments (4) and the need felt for more follow-up visits (4).

Holsworthy Community Hospital

#### Friends and family test - quantitative results

The FFT score is being calculated on the percentage basis as outlined in the NHS England guidance issued in Oct-14 and the Trust's target '**Would recommend'** score is 75%.

Northern Devon Healthcare

Incorporating community services in Exeter, East and Mid Devon

Location	Target	et October 2015		Nover	nber 2015	Decer	nber 2015	Janua	ry 2016	Febru	ary 2016	March 2016		
		Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend	
North Community - Total	75	96.3	1	100	1	100	-	100	-	100	-	100	-	
Bideford-Elizabeth	75	100	-	100	-	100	-	100	-	100	-	100	-	
Holsworthy	75		?	100	?	100	-	100	-	100	-		?	
South Molton	75	88.9		100	1	100	-	100	-	100	-		?	

### Friends and family test - qualitative results

Due to the small number of responses returned during the period Oct-15 to Mar-16, they have been listed in full below.

	Month	Friends and Family Test Response	Please can you tell us the main reason for the response you have given?	Have you any suggestions for ways we can improve the service?	Please tick this box if you DO NOT wish your anonymised comments to be made public.		
1	Nov-15	Extremely likely	Everybody is so warm and friendly. Bells are answered swiftly.		No tick		
2	Nov-15	Extremely likely	A great place to relax after an operation and to recover. Generally quiet but has its moments.	Easy to say but more staff perhaps.	No tick		
3	Nov-15	Extremely likely	Friendly staff which is essential for a stay in hospital. Helpfulness from all members.		No tick		
4	Dec-15	Extremely likely	There is nothing the staff would not do for the patients - how did you find them? I hope they are paid well. The catering staff too are marvellous.	Not possible.	No tick		
5	Dec-15	Likely	I've had a very comfortable stay, my thanks to all the nursing staff.	None at all.	No tick		

Incorporating community services in Exeter, East and Mid Devon

(	6	Jan-16	Extremely likely	Good treatment, good food.	No.	No tick
-	7	Jan-16	Likely	Very pleasant attitude from ALL MEMBERS of staff & considerate in the way they look after you.	More staff are required at all stations.	No tick
8	8	Feb-16	Extremely likely	It has the advantage of local community healthcare - so important for families in rural locations.	Provide later early morning medicine round.	No tick

# South Molton Community Hospital

#### Friends and family test - quantitative results

The FFT score is being calculated on the percentage basis as outlined in the NHS England guidance issued in Oct-14 and the Trust's target '**Would recommend'** score is 75%.

Location	Target	October 2015		November 2015		December 2015		January 2016		February 2016		March 2016	
		Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend	Value	Short Trend
North Community - Total	75	96.3	1	100	1	100	-	100	-	100	-	100	-
Bideford-Elizabeth	75	100	-	100	-	100	-	100	-	100	-	100	-
Holsworthy	75		?	100	?	100	-	100	-	100	-		?
South Molton	75	88. <b>9</b>	1	100	1	100	-	100		100			?

#### Friends and family test - qualitative results

Throughout the 29 FFT cards returned during the period Oct-15 to Mar-16, the nature of the majority of comments received was of a positive / complimentary nature. Some examples of these are listed below:

- 1. Because of the dedication and hard work all staff have put into making my journey to recovery a very pleasant one. (Oct-15)
- 2. Excellent nursing throughout with most effective support (e.g. physiotherapy) services. (Oct-15)

- 3. Everyone is helpful and friendly. A very calm atmosphere, a pleasure to be here. All staff work very hard and it can't be easy at times. A big thank you all. (Oct-15)
- 4. I was more than pleased with the care I received. Everyone was caring and did all they could to make my stay good. I would like to thank doctors, nurses and all the staff for their kindness to me. I would recommend South Molton Hospital to anyone for care. Thank you. (Nov-15)
- 5. Marvellous, couldn't wish for anything better. Everyone lovely. Thanks to EVERYONE. (Nov-15)
- 6. Because I have been so well looked after. (Nov-15)
- 7. Friendly, helpful staff all the time I have been here. I hope this little hospital keeps open for ever!! (Dec-15)
- 8. I've been here about a month and it's been wonderful. The care is out of this world. All the nurses are just wonderful. They have given me my life back. (Jan-16)
- 9. I couldn't have had better care anywhere. (Jan-16)
- 10. Because I have been quite happy here and made friends and everyone has been extremely kind and thoughtful. (Jan-16)
- 11. Lovely helpful staff, nice atmosphere. Good food, nice size helpings for me and followed by tea. Very pleasant setting and surroundings. (Feb-16)
- 12. Cleaners extremely good. Nursing staff and all staff are excellent. Food very enjoyable. No complaints. (Feb-16)

Of the 29 FFT cards returned, there was a total of 10 negative mentions / suggestions for improvement. Due to the small number of negative mentions they have been listed in full below:

- 1. Answering the call bells quicker.
- 2. Only that the bathroom in door in room is difficult to move when using crutches. Maybe a handle midway through door would help in this case?
- 3. When it's a wash that needs improving every area 2 towels.
- 4. Night time renew pad time to long and soreness.
- 5. South Molton Community Hospital staff were very pleasant. Biggest problem was when they were short-staffed. Community hospitals are very important for the area & for rehab.
- 6. More attention but overall quite good.
- 7. A better overhead bed lamp to read by.
- 8. Headphones for radio / not to distract others.
- 9. More staff.
- 10. More of shower.