



Consultation on Leeds Teaching Hospitals NHS Trust Five Year Strategy

Healthwatch Leeds has received comments from a number of volunteers about the content of the 5 year strategy. The observations are condensed below. Healthwatch Leeds has also passed on several comments directly to LTHT in relation to the spelling, layout, jargon etc that we received from volunteers.

Goal 1: Patients

The best for patient safety, quality and experience

Healthwatch Leeds:

Is there a need to engage with local voluntary bodies (such as Healthwatch Leeds) to act upon their findings if and when appropriate?

Organisations such as Carers Leeds should be working in close partnership with the Trust, especially around issues with discharge and respite – could this be recognised in the Strategy?

'Ensuring the basics, like privacy and dignity and patient information are of the highest possible standard' – LTHT 5 Year Strategy

Healthwatch Leeds:

- Further work is needed to make LTHT documents for patients more accessible. Eg in this document the language level is too high with long complex sentences, jargon and management speak. Font size and colour needs to be addressed as well.

Healthwatch Leeds has evidence that access for all, including Deaf/hard of hearing, blind/partially sighted, people for whom English is not their first language, people with learning disabilities etc. is an issue at GP practices and fear that there may be similar issues within LTHT. Does the Trust aim to work with organisations such as Leeds Deaf Forum to develop this? The strategy needs to recognise and address this issue.

- Dignity and safety is paramount. It was felt that most nurses would agree that one of the motivations of training as nurses was caring which means spending a reasonable amount of time with patients. It seems that caring has recently been overtaken by paperwork, which means time away from patients. This may compromise patient safety and dignity. Documentation and record keeping is important, but something needs to be done to ensure it doesn't supersede safety and dignity. Could something be done to address duplication of documents or a consolidation of documents into one or fewer?

Healthwatch Leeds:

Truly open reporting is encouraged (both at individual and hospital level), even if the reports highlight poor practice. Although carelessness and human error does happen, poor work processes and system errors play a large role in mistakes being made. Blaming individuals could promote discouragement to challenge bad practices. Proper auditing and quality management is recommended to reduce errors and promote safety. Those who challenge bad practice at any level should be supported.

Goal 1: Patients

The best for patient safety, quality and experience

Healthwatch Leeds:

Improving the way the Trust handle patients complaints – there is a promise to respond within two weeks. Healthwatch Leeds has found during recent hospital surveys that a large amount of respondents (over 300 people) didn't know how to feedback or complain. People found it to be a complicated process – for example what PALS was, who to complain to, how and who to give general feedback to and where to get this information. We also found there to be differences between wards and departments on what information was provided. People also told us that often they don't want to complain or offer feedback when in hospital as they fear that this might affect the care they receive.

There also appears to be no concept of how complaints influence changes in the service. We feel that the complaints system needs to be simplified and the clear process made available to all patients and their carers/families. Using patient feedback/complaint information to improve service is of high importance and this needs to be addressed in the strategy.

Healthwatch Leeds:

Is pleased to see the commitment to the “hello my name is” and is pleased to report on recent visits to a Children's ward that this seems to be working.

Healthwatch Leeds:

There doesn't appear to be any inclusion of administration, particularly of the appointment system and its operational standards. Healthwatch Leeds has received feedback on a number of difficulties with appointments and systems including difficulties getting through on the phone, no person centred appointment system - people with physical disabilities not being able to access touch screens, Deaf/hard of hearing people unable to respond when names are called out, partially sighted people not being able to see names on screen.

Goal 2: Our People

The best place to work

Healthwatch Leeds:

To feel like and work as a team you should be colleagues – not management and staff which may create a “them and us” culture. Patient Centred Training for all staff could bridge this potential gap.

Healthwatch Leeds:

Patients should be at the centre of all decisions and they should be able to contribute to and influence discussions about Leeds Teaching Hospital Trust through sharing their views and experiences of these services at both policy and service development levels and to influence policies and procedures in a constructive manner.

It would be beneficial for the Trust to recognise the importance of patient and public involvement and co-operate with the increasing number of volunteers who work in a variety of settings and appreciate their need for training.

Goal 2: Our People

The best place to work

Healthwatch Leeds:

Flexible working for those who wish to do so has not been addressed – staff with families may prefer flexible working. This could reduce stress which leads to increased staff absence and sickness levels.

Healthwatch Leeds:

There is no mention of Bank Staff (particularly Bank Care Support Workers) and the training that is provided to them to ensure that they are of the same high standard as permanent staff.

Goal 3: Research, Education and Innovation

A specialist provider and centre of excellence for research, education and innovation

Healthwatch Leeds:

Patient involvement and patient feedback is an integral part in research, education and innovation – the strategy doesn't give details on how patient involvement will be used to achieve this goal.

Healthwatch Leeds:

Research and education are vital. 'BIG data' is important but it must be clear to patients that they can choose to participate or not.

Healthwatch Leeds:

There is a need to encourage patients to feedback longer term. For many conditions there are changes following discharge that the patient does not feedback about but learns strategies to manage. Capturing those strategies could help other patients.

'Our clinical leaders will describe which specialities we pursue in the future in full knowledge of which services are financially viable and our clinical outcomes in each speciality. This will be described in the clinical services strategy and supported in the estates strategy. These plans will be developed in discussion with our partners, stakeholders and wider patients and public, as appropriate' – LTHT 5 Year Strategy

Healthwatch Leeds:

In saying this, the strategy falls short of providing an assurance that what funds are available for investment will be invested in the development of specialisms that will be of greatest benefit to the local/regional population that the Trust is there to serve and that investment in other specialist areas will only be undertaken where they are self-funding or where they present a compelling financial case.

Goal 4: Integrated Care

Seamless integrated care across organisational boundaries

Healthwatch Leeds:

The Strategy states that to be truly patient-centred LTHT must organise their care around patients in an integrated way. There is nothing in the strategy about how the Trust will involve patients in their own care provision and how patients will influence this.

Goal 4: Integrated Care

Seamless integrated care across organisational boundaries

Healthwatch Leeds:

Some aspects are not addressed to ensure that the pathway at discharge is smooth;

- a) Discharge – two main areas that are consistently brought to our attention are medication and care provision at home:
- Patients medication can take too long in the hospital pharmacy forcing them to wait until late evening before they can go home.
 - Integrated Social Care provision is often not in place when a patient is ready to be discharged home, causing longer stays in hospital/bed-blocking.

The Strategy needs to be clear on how these specific issues will be addressed.

- b) Partnership Working - Pleased that this as an integral part of the Trusts strategy as pooling resources together to reduce wastage and duplication of services is beneficial to all. There are challenges though;
- Partnership training should be recommended to promote interpersonal relationships and working practices between different organisations and professionals. Clearly defined roles and responsibilities in each organisation would be beneficial.
- c) Reduce unnecessary hospital admissions;
- Invest more in telecare services for the elderly and those with long term conditions to monitor them at home.
 - Telecare centres to respond to patients through support and reassurance while at home via telecare equipment.

Healthwatch Leeds:

Reduction in Admissions of the Frail and Elderly – Reduction in admissions through outreach care by other organisations will save costs to the Trust but will incur costs elsewhere in the system. There is no indication as to what funding is available for this extra outreach provision, suggesting that it will not be appropriately funded and that the standard of care for the frail and elderly will decline. The proposals for the transfer of this type of care, including the sufficiently of funding, should be subject to external scrutiny (not simply consultation) before the changes are made.

Goal 5: Finance

Financial Sustainability

All other goals depend on this. Efficiency savings could result from making systems such as those for appointments, clinics and management of records more efficient and robust.

Goal 5: Finance

Financial Sustainability

Investment in staffing levels – The strategy implies that this involves developing resource plans that will avoid the need to incur the premium costs of agency staff to fill gaps. This should have a positive cost benefit but will only improve quality if the staffing is increased above the current levels. If the savings on agency fees/premium rates are to be invested in increasing total staff hours on the wards then the strategy should be more explicit in stating this, otherwise it should not claim quality benefits such as “enabling nurses to spend more time with patients” as this might not be the case.

In the face of the statement that “Leeds Teaching Hospitals Trust is not currently financially sustainable..” there are two key areas where the initiatives proposed within the strategy seem to be at odds with the financial imperative to make early savings so as to achieve sustainability, these are:

- We want to create a single personal patient record that contains all your images, scans, data and your genome so that information is ready for any medic you choose to treat you with all the facts at their finger-tips
- We are clear that unless we invest immediately in more nursing staff, improved processes, the best researchers, managers and infrastructure, we will not bring about the steep change we need in the quality of patient care we offer.

These initiatives will require significant investment and involve a significant degree of risk, particularly those involving the development of IT solutions. It is not clear from the strategy how these can be afforded in the current climate. The strategy sets up an expectation that they will be delivered but does not provide any insight as to how they might be funded nor how they might be managed to a successful conclusion when other projects of this nature have notoriously failed to be completed within budget or to deliver the benefits required.

Healthwatch Leeds would welcome input at an earlier stage in the future to be able to give a wider range of the Leeds population an opportunity to contribute and influence the Strategy or other similar documents.