Results for $^2$gether NHS Foundation Trust

1.0 Background

1.1 The Care Quality Commission (CQC) requires that all Mental Health Trusts undertake an annual survey of patient feedback. The survey is designed to help understand the performance of individual trusts from the patient’s perspective and to identify areas for improvement in service experience.

1.2 The results from the 2013 Community Mental Health Survey have been published this month on the Care Quality Commission website\(^1\).

2.0 Method

2.1 $^2$gether NHS Foundation Trust has, for several years, commissioned Quality Health to undertake the CQC National Patient Survey requirement.

2.2 The data collection for 2013 was undertaken between March and June 2013 using a standard postal survey method.

2.3 The National Survey sought to find out about the experiences of people who received care and treatment through NHS community mental health services by asking questions across the following nine domains:

- Health and Social care Workers
- Medications
- Talking Therapies
- Care Coordination
- Care Plan
- Care Review
- Crisis Care
- Day to Day Living
- Overall

2.4 The CQC Questions are grouped under the section in which they appear in the questionnaire.

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\(^1\) [http://www.cqc.org.uk/public/reports-surveys-and-reviews/surveys](http://www.cqc.org.uk/public/reports-surveys-and-reviews/surveys)
2.5 Based on the responses, the CQC gave each NHS trust a score out of 10 for each question (the higher the score the better).

2.6 Each trust also received a rating of ‘Better’, ‘About the same’ or ‘Worse’.

- **Better**: the trust is better for that particular question compared to most other trusts that took part in the survey.

- **About the same**: the trust is performing about the same for that particular question as most other trusts that took part in the survey.

- **Worse**: the trust did not perform as well for that particular question compared to most other trusts that took part in the survey.

2.7 It should be noted that a single overall rating for each NHS Trust is not provided by the CQC. This is because it would be misleading as the survey assesses a number of different aspects of people’s experiences (such as health and social care workers, medication, talking therapies etc) and trust performance varies across these different aspects. The structure of the questionnaire also means that there are a different number of questions in each section. This means that it is not possible to compare trusts overall.

2.8 A fuller report provided to the Trust by the CQC is attached (Appendix 1). This shows how patients scored ²gether NHS Foundation Trust for each question in the survey, compared with the range of results from all other trusts that took part. Interpretation guidelines of this information are also provided in Appendix 1.

2.8 A further point of note is that the published CQC results do not distinguish results separately for Herefordshire and Gloucestershire. They represent Trust overall scores for each domain.

3.0 Results

3.1 This year ²gether NHS Foundation Trust received one of the highest percentage response rates in the country to the questionnaire at 33% returned (n = 274 respondents). The average response rate in the England was 29%.

3.2 Across each of the nine domains in the survey ²gether's scores are reported as About the Same as other Trusts. These results are tabulated in Table 1 together with the scores out of 10 for ²gether Trust calculated by the CQC. The scores are broadly the same as other Trusts.

Table 1: ²gether's scores compared with scores of other Trusts

<table>
<thead>
<tr>
<th>Score (out of 10)</th>
<th>Domain of questions</th>
<th>How the score relates to other trusts</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.7</td>
<td>Health and Social Care workers</td>
<td>Same as others</td>
</tr>
<tr>
<td>7</td>
<td>Medications</td>
<td>Same as others</td>
</tr>
<tr>
<td>7.3</td>
<td>Talking Therapies</td>
<td>Same as others</td>
</tr>
</tbody>
</table>
3.3 This represents an **improvement** from last year’s results in one domain or section, where in 2012 Talking Therapies was scored within the ‘Worst performing trusts’ category.

3.4 In only three of the specific question areas gather results differed from other Trusts with statistical significance. Specifically patients in the sample rated that gather NHS Foundation Trust staff are significantly:
- **Better** at taking patient views into account.
- **Better** with providing enough support for patients they need it with financial advice or benefits
- **Worse** at asking about patients use of non-prescription drugs

3.5 When the results are considered further for areas where improvements could be made, there are important areas to consider within the action planning process. These include:
- the explanations provided to people about the medications that they are prescribed
- systems to help people identify, understand and be involved in developing their care plan
- supporting inclusion within the care review process.

Whilst these questions do not have significant score differences from other Trusts in this survey they are areas that people report through other forms of service experience feedback and are worthy of further practice development activity.

4. **Action Plan**

4.1 Dedicated action is required in the autumn and winter of 2013 to act on the feedback. This will enable the organisation to enhance service experience and to prepare for data collection of the next survey in January 2014.

4.2 Quality Health has recommended building a performance management system which holds managers accountable. ‘Top improving Trusts pick 3-4 main issues at the most and vigorously performance manage them from the top’.

<table>
<thead>
<tr>
<th>7.6</th>
<th>Care Coordination</th>
<th>Same as others</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.7</td>
<td>Care Plan</td>
<td>Same as others</td>
</tr>
<tr>
<td>7.1</td>
<td>Care Review</td>
<td>Same as others</td>
</tr>
<tr>
<td>6.1</td>
<td>Crisis Care</td>
<td>Same as others</td>
</tr>
<tr>
<td>5.2</td>
<td>Day to Day Living</td>
<td>Same as others</td>
</tr>
<tr>
<td>6.8</td>
<td>Overall</td>
<td>Same as others</td>
</tr>
</tbody>
</table>
4.3 Quality Health provided a presentation to representatives of all professional groups in 2gether in August 2013. Areas for particular, targeted action were discussed and agreed including:

(a) Discussions with Medical staffing about further action to ensure that explanations are provided to people about the medications that they are prescribed. This action is being led by the Director of Medical Education and Head of Profession for Medicines Management.

(b) Provide a care plan holder to patients with their care plan so that there is overt reference to their plan. This should include reference to the care review process and the dates set to encourage conversations about the content of the review. A folder has been developed through collaboration between staff at Wotton Lawn Hospital and the Communications Department and is being piloted by Wotton Lawn Hospital. Feedback will be received with a view to rollout the initiative across the Trust by December 2013.

4.4 In order to make best use of additional development activity within Gloucestershire and Herefordshire, work is underway to extrapolate data from the Quality Health scores to give a more detailed indication of participant responses from the separate counties. This will enable a targeted action if there are differences in experiences between the two counties.

Service Directors will be invited to sponsor targeted action to reflect the differences captured and to ensure specific practice development required is undertaken.

4.5 It is recommended that the survey results are communicated widely across 2gether’s clinical teams and through professional structures to ensure that all clinical staff are aware of the perception of service experience and feel empowered to lead the implementation of local developments.

4.6 The demographic results of the survey suggested that very few people from minority groups or communities responded to the survey invitation. The results will be fed back to the Social Inclusion Team in order that to continue to encourage feedback from people who are less seldom heard.