

Improving Experience of Care

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#expofcare

What is experience of care?

'Experience' can be understood in the following ways:

1. What the person experiences when they receive care or treatment – for example, whether they knew who to contact if they had a problem, whether the nurse explained the procedure to them, and whether the doctor asked them what name they would like to be called by. The 'what' of people's experiences can be thought of in two ways:

- the interactions between the person receiving care and the person providing that care, for example how a member of staff communicates with the person (this is known as the 'relational' aspects of experience);
- the processes that the person is involved in, or which affect their experience, such as booking an appointment (this is known as the 'functional' aspects of experience).

2. How that made them feel – for example, whether they felt treated with dignity and respect, and whether they felt that the doctor told them about their diagnosis in a sensitive way.

Patient Experience Defined:

The sum of all interactions, shaped by an organization's culture, that influence patient perceptions across the continuum of care.

[Defining Patient Experience - The Beryl Institute - Improving the Patient Experience](#)



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Improving Experience of Care statutory duty...and it's the right thing to do!

NHS England and systems have a parallel statutory duty to:

“act with a view to securing continuous improvement in...the quality of the experience undergone by patients”

(National Health Service Act 2006 sec.13E;
Health and Care Act 2022 sec.14Z34)

Note: sits alongside clinical effectiveness and patient safety as part of overall duty to improve quality

Improving experience of care

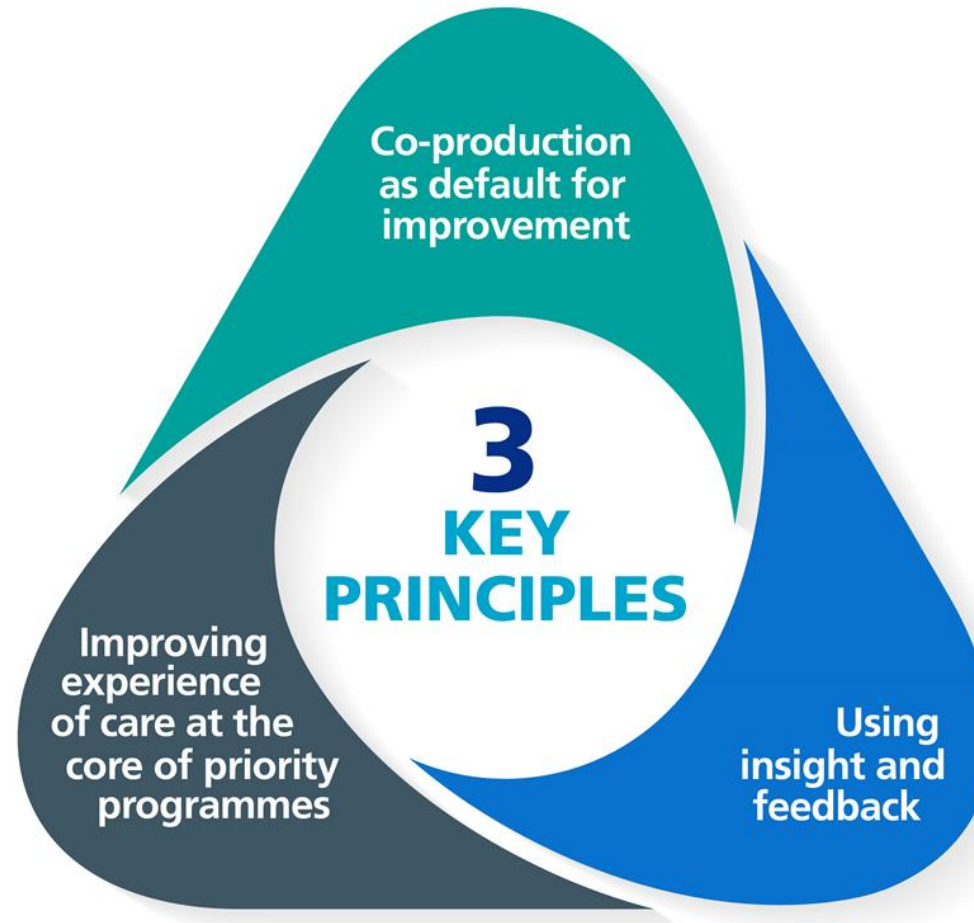
A shared commitment for those working in health and care systems



Developed by the National Quality Board

[NHS England » Improving experience of care: A shared commitment for those working in health and care systems](#)

3 Key Principles



National improving experience of care function

What

- Relevant policy, strategy and planning (expectations)
- Support implementation in national priority programmes
- Support implementation in systems (with Regions)

How

- Develop, scale and spread effective improvement approaches
- Provide subject matter expertise and evidence base
- Collate and share good practice and lessons learnt
- Mobilise expert networks

Lead and support delivery of statutory duty; framed by NQB three principles

Who with

- Lived experience partners
- NHSE Directorates/Teams
- NHSE Regional Teams: Clinical Quality; Nursing
- Integrated Care Systems
- NHS providers
- VCSE partners

What outcomes

- Improving experience of care embedded in clinical and quality work programmes
- Consistent co-production with people with lived experience in experience and quality improvement work
- Improved use and impact of insight and feedback

National Experience of Care Team 2022/23 priorities:

- Delivering Long Term Plan commitments to improve unpaid carer experience
- Embedding improving experience of care in priority clinical improvement programmes
- Supporting widespread coproduction of improvement in experience of care in quality improvement
- Supporting NHS providers to improve experience of care (inc. provider network)
- Work with ICSs on how they deliver the NQB Experience of Care Shared Commitment in the context of their overall approach to delivering their quality functions


Improving Experience of Care in Integrated Systems: Current Work

Unpaid carers

ICS co-production projects

ICS pilots

Role of Heads of Patient Experience



Combine and
share learning
in 2023/24



Co-Production

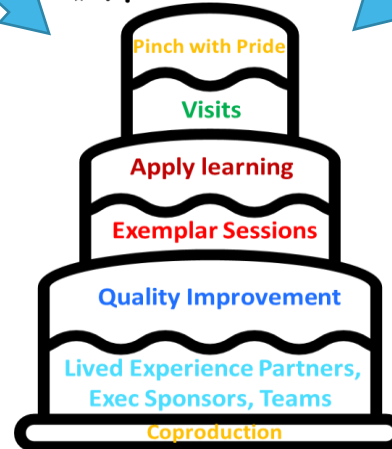
Support for Providers



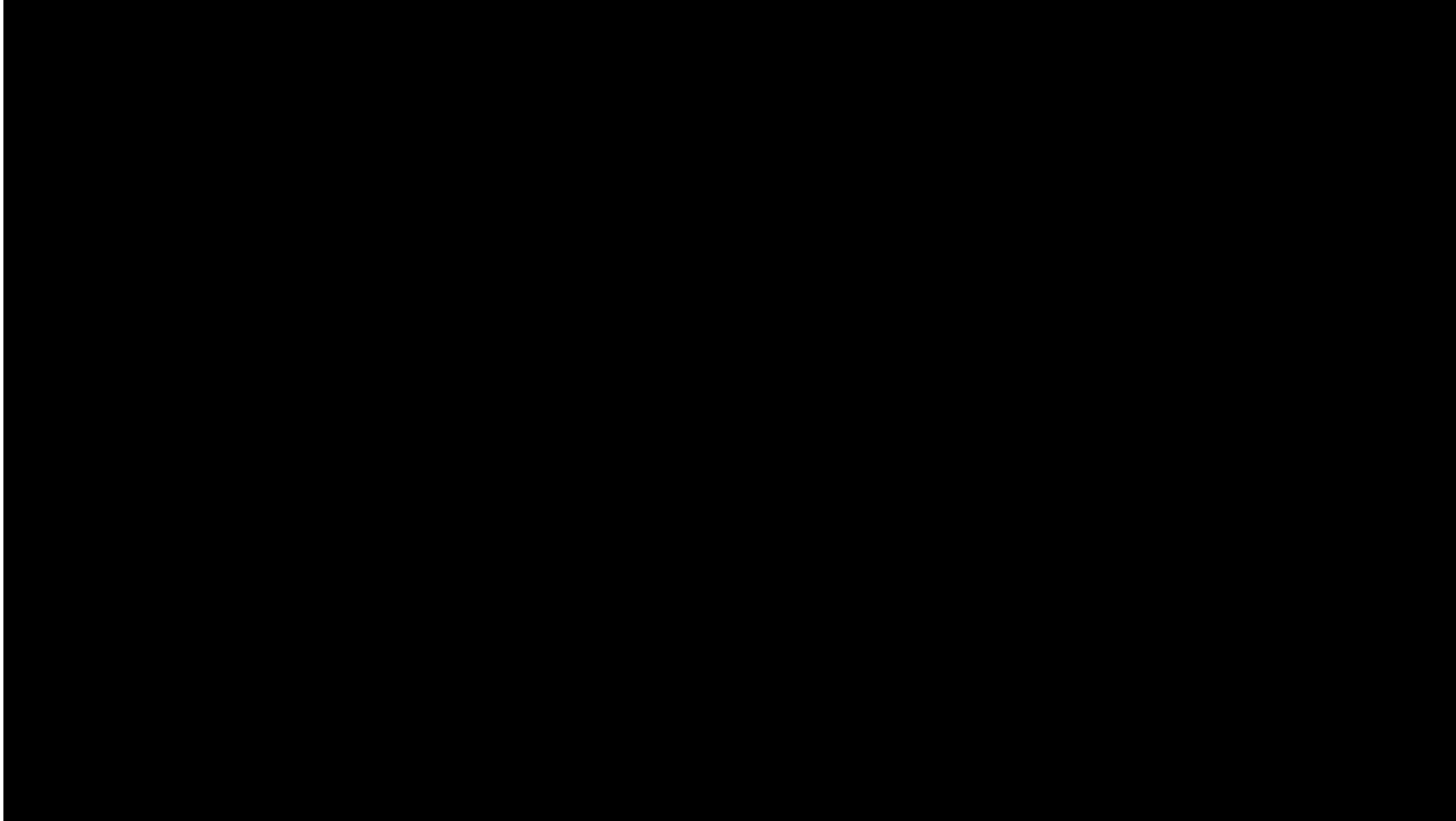
Grow Improvements



Insight and Feedback



Ray's Story





Q&A