



# **PATIENT EXPERIENCE NETWORK**

# **NATIONAL AWARDS 2024**

**Book of Best Practice**  
3rd October 2024

# **#PENNA24**

PENNA celebrates the achievement  
of Patient Experience Excellence



# PEN National Awards 2024

RE:THINKING THE EXPERIENCE



## Introduction

Welcome to PENNA 2024! This is our 14th year, and it's a year of change for us! We are delighted to now be a part of the Picker Group. As a result, we anticipate that we will continue to develop and grow our ability to put the spotlight on the truly amazing work being done to improve the patient and colleague experience.

Against an ever changing and challenging backdrop we believe it is even more important to take a moment to recognise, share and celebrate the incredible work being done to improve the experience of care for all involved. It is at the times when it is hardest, that we should reflect and appreciate the positives that have been achieved.

We are always incredibly heartened and delighted to see so many organisations continue to innovate to improve, and be willing to share their work, thank you. We have had a tremendous response this year (our, or your, best ever), and today we show case all the shortlisted organisations. We should though mention, and also recognise the projects that were not shortlisted this year. It has been a spectacular year with so much brilliant practice happening, that inevitably many will have not been shortlisted. We know this must be very disappointing but please reflect on the fact that your work matters and continues to make a difference, shortlisted or not! PEN will continue to support all organisations by doing our best to share and celebrate all superb examples of best practice.

Wishing you every success in your ongoing work to improve the experience,

Ruth

Ruth Evans MBE, Managing Director – Patient Experience Network



Welcome to the Patient Experience Network National Awards (PENNA) 2024 – the leading celebration of best practice in patient and staff experience.

This year's awards are special for us as they are the first since the Patient Experience Network joined the Picker Group in April 2024.

All of us at Picker have long admired and supported PENNA – we've sponsored and attended the event for many years – and so we're delighted to have the opportunity to be more closely involved.



It's easy to explain why we see PENNA is so close to our collective heart at Picker. We have a vision of the highest quality person centred care for all, always – and PENNA is here to shine a light on the very best examples of work to understand, measure, and improve people's experience of care. Not only do the awards recognise work that directly improves people's lives, but they provide a powerful platform to share creative initiatives and to be inspired.

Crucial to making PENNA such a wonderful and important event is the community, and I want to thank all of our entrants, our panel of expert judges, and all of our attendees for their contributions. Frankly, we know that it has been a difficult few years for everyone in health and care – but your commitment and dedication to improving people's experiences is an inspiration. Thank you for being part of PENNA, and for all that you do to make person centred care a reality. We are looking forward to celebrating with you.

Chris Graham, Group CEO – Picker



## NHS England

In providing a service, we need to be open to all forms of learning. Often, we focus on what has gone wrong, which is vital to do. But just as much wisdom is to be had from what has gone well and this needs to be celebrated more. As well as recognising your own team's achievements in quality improvement, there is the opportunity to inspire others with what can be achieved.

This is ever more important in an environment with growing demand, deep-seated inequalities and persistent staff vacancies. Improving experience of care can be hard work and it can take time, dedication and persistence to achieve results. The PEN National Awards are a shining light in our annual calendar, when that hard work pays off and we celebrate excellence, innovation, resilience and evolution, those exciting times staff and people with lived experience come together to focus on shared challenges and drive up the quality of healthcare experience. I am always struck by how many patients, service users and carers take the time to revisit difficult moments in their lives and share their experiences with us, which is not always easy to do. Thank you for all you are doing to listen and respond to what they are saying. Take a moment to appreciate the recognition for your work but please also take home an idea from another service that you think might make a difference to your own. Let's build on success by taking another loop in that ongoing improvement journey!

Dr Neil Churchill, Director for Experience, Participation and Equalities – NHS England



## Liverpool School of Nursing and Advanced Practice

Building on over 25 years' experience, today at LJMU we're as passionate as ever about providing inspiring and exemplary health and social care education - from pre-registration to specialist and advanced practitioners - with the aim of impacting patient experience for the better.

We are delighted to be working with the Patient Experience Network to once again sponsor the Patient Experience Educator of Tomorrow and Patient Experience Advocate of Tomorrow awards at this year's ceremony. With guidance from experienced and invested practitioners and staff, students can make immensely positive contributions to patient care and service-users. This is often whilst on practice placement in one of the many healthcare settings, or through student networks and volunteering within their local communities. Frequently learners see services from fresh or alternative perspectives, based on their own unique life experiences; enabling them to combine care and empathy with a commitment to improving the lives of the people they meet whilst on their journey to becoming health and social care professionals. Once qualified, graduates have the potential to become agents of positive change, turning creative ideas into innovative projects to improve the lives and experiences of their patients and service users.

It is important that as a sector, we recognise and celebrate students who are already generating positive change and inspiring others to champion the enhancement of patient and service-user experiences in the future. They will be the next generation of service providers, managers, leaders and commissioners; having the potential to shape health and social care services for the next forty or fifty years. If you work within a service providing organisation, please take time to think about how you might involve students in your work to improve patient and service user experience. They could be a source of new ideas and enthusiasm and a worthwhile investment for the future. You may have Practice Educators in your organisation you could collaborate with to help you do this, or perhaps you could have a chat with a colleague from an appropriate school or faculty in your local university. If you would like to find out more about the School of Nursing and Advanced Practice at Liverpool John Moores University, visit our website: <https://www.ljmu.ac.uk/about-us/faculties/faculty-of-health/school-of-nursing-and-allied-health> or follow us on Twitter @LJMU\_Health

Laura Kinsey, School of Nursing and Advanced Practice – LJMU



## Macmillan Cancer Support

Is here to do whatever it takes to support people living with cancer. By providing physical, financial and emotional support we'll help everyone with cancer live life as fully as they can.

No matter what a person's needs are, we will listen and support them however they need us to – big or small.

For information, support or just someone to talk to, call 0808 808 00 00 or visit [macmillan.org.uk](https://macmillan.org.uk)

We'll do whatever it takes to support healthcare professionals and their patients. That's why we are proud to be a partner in the Cancer Experience of Care Award, which showcases and celebrates the brilliant work being done every day by teams across the cancer workforce to deliver great care and improve the experience of people with cancer. Many of the teams featured in the awards include Macmillan professionals.

You can find out more about how we support healthcare professionals by visiting: [www.macmillan.org.uk/healthcare-professionals](https://www.macmillan.org.uk/healthcare-professionals).

Sophia Nicola, Head of Clinical Engagement – Macmillan Cancer Support

## PENNA – 13 Glorious Years – Role of Honour

### Overall Winners

- 2010 — **Prince Charles Hospital, Cwm Taf Local Health Board**  
A Patient Information DVD for Colorectal Cancer
- 2011 — **NHS Lothian, Ellens Glen House**  
Making the Ward a Home, Person Centred Environment
- 2012 — **Alder Hey Children’s NHS Foundation Trust**  
Disability Workshops and Soccer Spa
- 2013 — **Liverpool Heart and Chest NHS Foundation Trust**  
The Development of a Nursing Model of Care for Patient and Family Centred Care
- 2014 — **Leicestershire Partnership NHS Trust**  
ChatHealth School Nurse Messaging Service
- 2015 — **Common Room and Great Ormond Street Hospital**  
MeFirst: Children and Young People Centred Communication
- 2016 — **Bradford Teaching Hospitals - Baby View**  
Neonatal Intensive Care Video Conferencing Project
- 2017 — **Walsall Healthcare NHS Trust**  
Informed and Empowered
- 2018 — **Nottingham University Hospitals NHS Trust**  
Carer2Theatre - Improving the Theatre Experience for Confused Adult Patients
- 2019 — **University Hospitals Plymouth NHS Trust**  
#RehabLegend
- 2020 /21 — **Calderdale and Huddersfield NHS Foundation Trust**  
Bereavement Support Service
- 2022 — **Nottingham University Hospitals NHS Trust**  
Improving our Colorectal Cancer Pathway Patient Experience
- 2023 — **Walsall Healthcare NHS Trust**  
Little Voices



## Event Agenda:

9.30	Event starts – Introduction to the day
9.40	Keynote – Cheryl Tackie, PPV Partner, National Cancer Programme
10.10	Announcement of the Winners – Part 1
10.50	Break Networking, exhibition, and refreshments
11.20	Morning Category Winners Presentations and Q & A Category winners present in two streams
12.20	Lunch Networking, exhibition, and refreshments
13.20	Welcome back Birmingham Community Gospel Choir
13.40	Keynote – Angela Coulter, Chair of the Board of Trustees, Picker Institute
13.55	Keynote – PENNA 2023 Overall Winner, Walsall Healthcare NHS Trust
14.10	Announcement of the Winners – Part 2
14.45	Afternoon Category Winners Presentations and Q & A Category winners present in two streams
15.45	Final Voting Opportunity Networking, exhibition, and refreshments
16.15	Announcement of the Winners - Part 3
17.00	Chair closing remarks End of formal proceedings
17.15	Drinks Reception - all welcome
18.00	Event close

## Exhibition:

During the exhibition sessions delegates will have the opportunity to visit each of the finalists' posters to find out more about the individual initiatives and ask questions.

## Voting:

Delegates will be able to cast their individual vote contributing towards the overall winner of the PEN National Awards 2024 during the voting opportunity at 15:45

## Speaker Profiles:



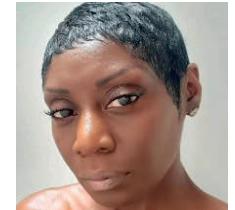
### Ruth Evans MBE - PEN

Ruth is Managing Director of the Patient Experience Network (PEN). Ruth has over 30 years' experience in healthcare and is known for her passion and commitment to Patient and Customer Experience. Ruth is delighted to continue to be involved with the PEN National Awards, and to see it grow from strength to strength. Her over-riding ambition is to ensure that excellent Patient Experience is recognised, spread and embedded making a real difference for those involved with the patients' experience.

### Cheryl Tackie – PPV Partner – National Cancer Programme

Cheryl has over 30 years business experience specialising in Executive Leadership & Change Management and have been fortunate enough to work across all sectors of private, public, community and third sector organisations. Her maternal and paternal heritage is Ghana & Nigeria, so food is often a topic of conversation in her household, and she is a very proud mama of two daughters (14 & 16) and a son (3) but is actually their dog!

Cheryl feels that it has been such a positive experience becoming a PPV Partner that she often forgets that she was diagnosed with cancer. Cheryl believes there is so much good work being done behind the scenes despite the politics and bureaucracy and she feels it is important to make sure the unsung heroes' voice (medical staff and patients) are heard. Cheryl believes there is positivity to be found in every 'negative' situation if you choose to find it.



### Louise Blunt - PEN

Louise is Director of Operations for the Patient Experience Network (PEN). Louise has over 30 years' experience in improving company performance across a wide variety of business sectors and organisation sizes. Having specialised in manufacturing and lean management principles for many years, Louise has now developed a reputation within the healthcare sector as a very knowledgeable and enthusiastic champion of improved patient and staff experience.

### Sara Turle – Patient Partner

Since her first cancer 14 years ago to her present one, patient partnership; working together with Healthcare to improve experience for patients and staff has been an unforgettable part of Sara's life. She credits it as saving her soul when she felt she'd lost her identity. Sara says, 'PENNA is that moment each year when we get together to acknowledge all the great practice; share, learn and absolutely celebrate and yes, shout from the roof tops about the incredible work that goes on day in day out, despite the challenges. Sara says 'PEN and now Picker too, have been good friends to me and patient partnership over the years. What I do know for certain is that the day is going to be uplifting, inspiring and full of joy.'



### Angela Coulter, Chair of the Board of Trustees – Picker Institute

Angela was the first Chief Executive of Picker Institute Europe from 2000-8 and is delighted to have re-joined the organisation as its Chair. Her previous roles included Director of Policy and Development at the King's Fund, Director of the Health Services Research Unit at the University of Oxford, Director of Global Initiatives at the Informed Medical Decisions Foundation and Honorary Professor at the University of Southern Denmark. Improving people's experience of care and involving them in decisions has been a strong theme throughout her career and she is well-known as a writer and speaker on these topics

### Walsall Healthcare NHS Trust – Little Voices Team

We are delighted to have representatives from last year's Overall Winner Walsall Healthcare NHS Trust who will update us on the progress of their project, the last year as a winner, and what's next for the team.



## Award Categories and Partners:

- Cancer Experience of Care
- Commissioning for Patient Experience
- Communicating Effectively with Patients & Families
- Engaging and Championing the Public
- Environment of Care
- Innovative Use of Technology, Social and Digital Media
- Integration and Continuity of Care including Social Care
- Making Complaints Count
- Measuring, Reporting & Acting – Using Insight for Improvement
- Partnership Working to Improve the Experience
- Patient Contribution
- Patient Experience Professional/Manager of the Year
- Personalisation of Care
- Staff Engagement and Improving Staff Experience
- Strengthening the Foundation
- Student Patient Experience Advocate of Tomorrow
- Student Patient Experience Educator of Tomorrow
- Support for Caregivers, Friends & Family
- Team of the Year
- Outstanding Contribution
- Overall Winners



PECS DATA SERVICES





## The Finalists...

### CATEGORY: Cancer Experience of Care Award

Aneurin Bevan University Health Board	Enhanced psychological wellbeing project; initiated by a patient story
Breast Cancer Now in collaboration with Lancashire and South Cumbria Cancer Alliance	A collaboration to improve patient experience for breast cancer patients
Derry Well Women	Cancer Connected Communities West
Enable Leisure and Culture	Macmillan Community Cancer Link Worker
Hywel Dda University Health Board	Virtual Reality in End-of-Life Care
Northern Cancer Alliance	My Wellbeing Space
Peninsula Cancer Alliance	Responding to the Cancer Quality of Life Survey – Interventions to address patients' difficulties with sleep
South Tyneside and Sunderland NHS Foundation Trust	Personalised Cancer Care
West Yorkshire and Harrogate Cancer Alliance	Remove the Doubt

### CATEGORY: Commissioning for Patient Experience

Bristol Health Partners	Common Ambition Bristol – a coproduction partnership project to improve the sexual health of people of African and Caribbean heritage
Cheshire and Wirral Partnership NHS Foundation Trust	Amplifying voices: Expert by Experience led decision making in regional Lead Provider Collaboratives
Lancashire and South Cumbria NHS Foundation Trust	The Retreat@Birchwood
Northern Health and Social Care Trust (NHSCT)	Connect North

### CATEGORY: Communicating Effectively with Patients and Families

Bath Institute for Rheumatic Diseases	BIRD Patient and Public Engagement programme phase 4
Betsi Cadwaladr Health Board	Small Business Research Initiative – Family Communication Project
Mersey and West Lancashire Teaching Hospitals NHS Trust	Improving inclusivity for our Deaf community through a bespoke training package for staff to raise Deaf awareness
Northumbria Healthcare NHS Foundation Trust	Tackling Health Inequalities when Delivering School Aged Immunisation Programmes Through Co-Design
Public Health Agency	Hearing the Voices of Children and Young People with Profound and Complex Disabilities
United Lincolnshire Hospitals NHS Trust	You Care We Care to Call (YCWCC)
University Hospitals of North Midlands	Interpreter on Wheels (Insight)

## The Finalists... (continued)

### CATEGORY: Engaging and Championing the Public

Cheshire and Merseyside Cancer Alliance	Start with People: A Readers Panel.
Derry Well Women	Cancer Connected Communities West
Healthwatch Birmingham	Person-centred maternity care for Black African and Black Caribbean women in West Birmingham
Imperial College Healthcare NHS Trust	End of life user insights project
Northumbria Healthcare NHS Foundation Trust	Using the Patient and Public Voice Strategically to Contribute to the Quality Improvement of Trust Services
The Royal Wolverhampton NHS Trust	The H.O.P.E (Holistic Opportunities Preventing Exclusion) Project: Building a partnership between healthcare, the voluntary sector and grass root organisations
Welsh Ambulance Service	Championing the Needs of people with a learning disability, when accessing Welsh Ambulance Services, through continuous engagement

### CATEGORY: Environment of Care

Betsi Cadwaladr University Health Board	“The Garden” CAMHS Environment Project
Cygnnet Health Care	Social Hubs
Leeds Teaching Hospitals NHS Trust	Acute Care Bags for people with a Learning Disabilities and Autistic Patients
Mersey and West Lancashire Teaching Hospitals NHS Trust	Improving inclusivity for our Deaf community through a bespoke training package for staff to raise Deaf awareness
Northumbria Healthcare NHS Foundation Trust	Improving the Experience of our Patients with Dementia, Delirium and Complex Needs
University Hospitals Coventry and Warwickshire NHS Trust	Patient Experience Team making a REAL difference with Patient Led Assessments of the Care Environment
University Hospitals Plymouth NHS Trust	The Secret Garden – a fresh air space for everyone

### CATEGORY: Innovative Use of Technology, Social and Digital Media

Benenden Hospital	My Patient Hub
Haemochromatosis UK	MyIron+ app : enabling people with genetic haemochromatosis live well
Hanley Consulting	Telephony call flow audit and data driven assessment at Tudor Lodge Health Centre
Leeds Teaching Hospitals NHS Trust	Virtual Reality Headset for Adults with a Learning Disability
Moorfields Eye Hospital NHS Trust	Enhancing Patient care through Virtual Reality
Nutricia	The Beat – Patient Podcasts
Welsh Ambulance Service	Blue Light Hub gaming app

## The Finalists... (continued)

### CATEGORY: Integration and Continuity of Care including Social Care

Team Leeds	Home First – reducing length of stay in an acute hospital and improving outcomes by focussing on Home First
Liverpool John Moores University & Cobalt Housing	Healthy Tenants, Healthy Homes, Healthy Communities- A Collaborative Innovation Advancing Sustainability, Health, and Society
National Clinical Homecare Association	The Best Kept Secret Report: The Value of Clinical Homecare to the NHS, Patients and Society
Pluto Play Productions & Leeds Care Association	‘Unforgettable: Telling the Care Home story’ play
Walsall Council & Walsall Healthcare NHS Trust	Walsall Connected

### CATEGORY: Making Complaints Count

Barts Health NHS Trust	Model Patients Complaints Management Training for Larger Trusts – Digital learning
Derbyshire Community Healthcare	Worry Catcher service
Leeds Teaching Hospitals NHS Trust	Improving communication and engagement for our home haemodialysis patients at Leeds. Designing our services for them!
The Royal Wolverhampton NHS Trust	Care at the end of life: Unlocking the learning in letters of formal complaint

### CATEGORY: Measuring, Reporting and Acting – Using Insight for Improvement

Cheshire and Wirral Partnership NHS Foundation Trust	Giving Neurodivergent people and their family members and carers a voice
Cheshire and Wirral Partnership NHS Foundation Trust	Using data to enhance person-centred care through expert-led collaboratives in the North West
Dementia UK	Admiral Nurse Helpline and Clinics – improving the experience for families contacting the service
North West Ambulance Service NHS Trust	Acting upon feedback shared from patients and the communities we serve to drive service improvement
Northumbria Healthcare NHS Foundation Trust	Giving Voice to Patients and Staff in an out of View Service – a Relational Approach
Nutricia	The Beat – Patient Podcasts
The Royal Wolverhampton NHS Trust	Care at the end of life: Unlocking the learning in letters of formal complaint

## The Finalists... (continued)

### CATEGORY: Partnership Working to Improve the Experience

Breast Cancer Now in collaboration with Lancashire and South Cumbria Cancer Alliance	A collaboration to improve patient experience for breast cancer patients
Bristol Health Partners	Common Ambition Bristol – a coproduction partnership project to improve the sexual health of people of African and Caribbean heritage
Cheshire & Wirral Partnership NHS Foundation Trust	The inclusion of Healthy Lifestyle Coaches within an intensive community mental health rehabilitation service
Liverpool John Moores University and Cobalt Housing	Healthy Tenants, Healthy Homes, Healthy Communities – A Collaborative Innovation Advancing Sustainability, Health, and Society
Northern Health and Social Care Trust	Connect North
Northumbria Healthcare NHS Foundation Trust	Working in Partnership to Transform Healthcare Experiences and Outcomes for D/deaf People
Public Health Agency	Getting everyone round the table: Swallow Awareness in the Hospitality Industry
Walsall Council & Walsall Healthcare NHS Trust	Walsall Connected
Welsh Ambulance Service	A System of Partnership Working

### CATEGORY: Patient Contribution – Individual

Midlands & Lancashire Commissioning Support Unit	Lived Experience Partner Participation in Midlands Long Covid Services Peer Review
NHS England	Lived experience partner Dreaming Collaborative
Patient and Client Council	Neurology Engagement Platform
University Hospitals of Derby & Burton NHS Foundation Trust	Patient Safety Partner

### CATEGORY: Patient Contribution – Group or Organisation

Cheshire and Wirral Partnership NHS Foundation Trust	EmpowerED Experts by Experience Forum
East London NHS Foundation Trust	East London NHS Foundation Trust Estates – Leading the way in patient contribution
Kingston Hospital NHS Trust	Patient Information Reader Group
Lancashire and South Cumbria NHS Foundation Trust	The Alphabet – Service User Led LGBTQ group
NHS England	NHS Cancer Programme: Patient & Public Voice (PPV) Forum
North West Ambulance Service NHS Trust	Engaging with our patients, communities and volunteers to help us improve our services within the ambulance service to better patient care

## The Finalists... (continued)

### CATEGORY: Patient Experience Manager / Professional of the Year

Derbyshire Community Health Services	Patient Experience Manager of the Year
Leeds Teaching Hospitals NHS Trust	Pancreatic Enhanced Recovery Nurse

### CATEGORY: Personalisation of Care

Barking, Havering & Redbridge University Hospitals NHS Trust	STRIVE – Stroke Team Recovery Improvement through Volunteer Engagement
Moorfields Eye Hospital NHS Trust	Moorfields ‘See The Whole Person’ Principles
Portsmouth Hospitals University NHS Trust	Butterfly Resources
Shrewsbury and Telford Hospital NHS Trust	Embedding a culture of “Get Up, Get Dressed, Get Moving” through the reconditioning games initiative
Shrewsbury and Telford Hospital NHS Trust	Specialist Stroke Rehabilitation Groups
South Tyneside and Sunderland NHS Foundation Trust	Enhancing Personalised Care via a multilingual digital patient-centred platform
The Shrewsbury & Telford Hospital NHS Trust	Living Well Sessions: access to health & wellbeing information as part of the NHS Long Term Plan for personalised care within cancer

### CATEGORY: Staff Engagement & Improving Staff

Belfast Health and Social Care Trust	Feedback February
Cheshire and Wirral Partnership NHS Foundation Trust	Our Volunteer to Career (VTC) project
Cheshire and Merseyside Cancer Alliance	Start with People: Building a foundation through policy and recruitment
Northumbria Healthcare NHS Foundation Trust	Giving Voice to Patients and Staff in an out of View Service – a Relational Approach
Nottingham University Hospital	The virtual Patient Bay Project

## The Finalists... (continued)

### CATEGORY: Strengthening the Foundation

Cheshire and Wirral Partnership NHS Foundation Trust	Our Volunteer to Career (VTC) project
Imperial College Healthcare NHS Trust	End of life user insights project
National Clinical Homecare Association	The Best Kept Secret Report: The Value of Clinical Homecare to the NHS, Patients and Society
The National Institute of Health and Care Research	The NIHR Race Equality Public Action Group (REPAG) and the Race Equality Framework
University College London Hospitals NHS Trust	Critical Care Transformation Programme
University Hospital Bristol and Weston	'My Hospitals Know and Understand Me' – the co-designed UHBW Experience of Care Strategy 2024-2029

### CATEGORY: Student Patient Experience Advocate of Tomorrow

Liverpool John Moores University	Amy Sweeney Liverpool John Mores University Mental Health Nurse
Liverpool John Moores University	Embedding Health Psychology to Improve Service User Experience- Health Psychologist in Training- Diane Sharples & Supervisor Dr Lisa Newson
Liverpool John Moores University	Empowering healthcare professionals and young patients with a disability to attain their goals
Liverpool John Moores University	LJMU Midwifery Society

### CATEGORY: Student Patient Experience Educator of Tomorrow

Liverpool John Moores University	Paramedic Society
Liverpool John Moores University	LJMU Nursing Society
Liverpool John Moores University	Reducing Black Maternal Health Disparities Through Education and Raising Awareness

### CATEGORY: Support for Caregivers, Friends and Family

Barnsley Hospital NHS Foundation Trust	Care Partners
Nottingham University Hospitals NHS Trust	NUH Adult Critical Care Bereavement Support
Pluto Play Productions & Leeds Care Association	'Unforgettable: Telling the Care Home story' play
The Royal Wolverhampton NHS Trust	The H.O.P.E (Holistic Opportunities Preventing Exclusion) Project: Building a partnership between healthcare, the voluntary sector and grass root organisations
University Hospitals Plymouth NHS Trust	The Secret Garden – a fresh air space for everyone

## The Finalists... (continued)

### CATEGORY: Team of the Year (including complaints and PALS)

Ashford and St Peter's Hospitals NHS Foundation Trust	Medical Examiners : Bringing Death Certification Reforms to NW Surrey
Birmingham Women's and Children's NHS Foundation Trust	Interpreting & Cultural Insight Department
North West Ambulance Service NHS Trust	Patient Engagement Team
Walsall Healthcare NHS Trust	'Impactful Team Excellence'

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# Category Submissions

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Entries on the following pages have been  
edited to fit a one-page summary





## Aneurin Bevan University Health Board Enhanced psychological wellbeing project, initiated by a patient story

### Category

Cancer Experience of Care Award



### ORGANISATION DESCRIPTION

Aneurin Bevan Health Board provides is a Welsh Health board that plans and delivers NHS health care services across 5 local authorities and South Powys.

It serves a population of around 650 000, in both urban and rural areas. The health board provides integrated acute, primary and community care and employs over 16,000 staff.

It has 4 main hospital sites.

### SUMMARY

Project initiation followed a patient story, in its simple form it is a you said we did project. In reality however, it is about how awareness, leadership and resources were combined to redesign and implement a programme of care. What makes it stand out is it provides a system change, in a health board where emotional support for cancer patients was previously based on individual professionals rather than a programme.

Leadership across disciplines, stakeholder involvement and the partnership of patients and staff have led to success. Using a continuous learning approach, of how it feels to deliver and receive the service, has been instrumental. All of our cancer nurses and allied health professionals have received training and been engaged with the project (75 + staff). We have trained over 40 volunteers and engaged with patients from all tumour sites. The project has exceeded its aims to enhance psychological care by redesigning and integrating a programme into our system.

Patients and staff have evaluated the interventions positively. An unintended benefit is the strategy for patient experience that is being developed from the project learning.

### IMPACT & RESULTS ACHIEVED

The Enhanced Emotional Support Programme has achieved many elements including: Training to over 75 individual professionals, 37 volunteers and the new Patient Advice and Liaison Service (PALS) team. Subjects include sexual consequences of cancer, LGBTQI+ & cancer, parenting and cancer, managing uncertainty.

Patient workshops in living with uncertainty, mindfulness, and fatigue in cancer. Implementation of the SignLive platform for British sign (BSL) users. A counsellor trained in BSL.

From the cancer cafe evaluation we have learnt that patients enjoy meeting others with cancer. They told us: 'I felt so positive after leaving.' 'These cafes really are a great resource for those of us trying to move on. It is really does help such a lot to speak to other people & realise we are all dealing with the same things.'

Staff have told us that the things are better, they feel more supported and have more skills to do their roles. I now feel so much better equipped to do my job'. 'A wonderful session that I found really useful'. We have however had reports from clinical staff delivering the model that they feel a bit overwhelmed by the changes. So while we have evidence from both staff, volunteers and patients that things have improved we need to consider the pace of change.

### WHAT MAKES THIS INITIATIVE STAND OUT?

This project is achieving system and cultural change. Prior to the project patients were offered emotional support by their cancer nurse or psychology team, there were other examples but these were adhoc and limited, and patients reported unmet emotional needs. This project redesigned a system with patients that coordinates and delivers a programme of interventions to support patients emotionally. Our design first recognised that not all patients are the same, their needs are different and therefore needed different approaches.

Key to its success has been the combined force of leadership, patient/staff engagement and a skilled and passionate programme manager.

### Contact Details

Anne May - [anne.may@wales.nhs.uk](mailto:anne.may@wales.nhs.uk)

## Ashford and St Peter's Hospitals NHS Foundation Trust Medical Examiners: Bringing Death Certification Reforms to NW Surrey

### Category

Team of the Year (including complaints and PALs)



### ABOUT NOMINEE

I am proud to nominate the Medical Examiners Team, hosted by Ashford & St Peter's Hospitals NHS Foundation Trust. Clare, Sangeetha, Sam and Gizzi are outstanding collaborators who have built a service from scratch and with creativity, imagination and passion they have developed partnerships with not only hospital departments but GP practices, Community Hubs and Hospices, Registration Services and Funeral Directors, always holding the bereaved families at the heart of everything they do.

In 2020 I was tasked with creating this service at local level to bring our Trust into line with the national objective of hosting an Office in every acute Trust by 2021.

The reason I want to nominate them not only for doing a superlative job in these roles but for the ideas they have conceived and carried through to foster community engagement. This team took the initiative to make in-person visits to each of our 48 GP practices to support set-up with our referral processes. Creating and hosting five Big Engagement Events to bring stakeholders in the room, this team generated a buzz and enthusiasm and backed this up with incredible outreach support which continues. They continue to be amazing ambassadors for the Medical Examiners Service, supporting teams from other regions and sharing our journey

### SUMMARY

The Ashford & St Peter's Medical Examiners Office is deserving of recognition for their outstanding commitment to training and engagement in the lead-up to the statutory roll-out. With an impressive engagement rate of 90%, well above the national average, they have demonstrated excellence in preparing medical practitioners and stakeholders for the forthcoming Death Certification Reforms Legislation. Their proactive approach, characterised by comprehensive training sessions and collaborative partnerships with entities such as the Surrey Registration Service, sets a commendable standard for ME services nationwide.

By fostering clarity, collaboration, and efficiency, the ME Office has undoubtedly enhanced the quality of care and support provided to bereaved families. Additionally, the Team's responsiveness and professionalism have garnered consistently excellent feedback from families, who commend their kindness and support during times of distress. Furthermore, their efficiency and clear communication have earned praise from GP's and Practice Managers, further solidifying their reputation for excellence. For the Registration Service perspective, the Team's speedy and sympathetic response to urgent death registration requirements sets them apart, demonstrating unparalleled dedication to service and compassion in recognition of their exemplary efforts and unwavering dedication to excellence, the Ashford & St Peter's Medical Examiners Office is deserving of this prestigious award.

### AT WORK

Starting a service from scratch, it has been my pleasure to put this team together but I had no idea at interview what an astonishingly talented group these four team members would be together. Sam and Clare were appointed first as lead medical examiner officers, Sam with a Trust-facing remit and Clare tasked with the Community-facing role starting in January 2021. We had yet to see the benefits of the Covid vaccination programme, so they were thrown in at the deep end but quickly adapted as together we constructed and refined a case management platform from existing Datix modules.

A year later we were joined by Gizzi and Sangeetha. Gizzi brought with her extensive experience from bereavement services and Sangeetha became our expert on the electronic Referral Service (eRS)

Medical examiner officers speak with every single bereaved family, confirm the contents of the medical death certificate and help with signposting for compliments and complaints. In pandemic times this could have been an onerous burden but they could see the value of their roles and the importance to families. At the same time they were working to develop their relationships with Trust departments and Community partners.

### Contact Details

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## Barking, Havering & Redbridge University Hospitals NHS Trust STRIVE - Stroke Team Recovery Improvement through Volunteer Engagement

### Category

Personalisation of Care



### ORGANISATION DESCRIPTION

Barking, Havering and Redbridge University Hospitals NHS Trust (BHRUT) is a large acute Trust in the southeast of England. We run two hospitals – King George Hospital in Goodmayes and Queen’s Hospital in Romford. Working closely with our partner organisations, our 8,000 staff and volunteers care for a diverse community of around 750,000 people. Harvest B is an acute 30-bed stroke unit within Queen’s Hospital. This is where the project took place.

### SUMMARY

In April 2023 new stroke guidance was announced, informing us that stroke patients should partake in 6 hours of activity a day. It was also identified that patients following a stroke spend a significant amount of time in the hospital where boredom and low mood during their stay is a key factor. Karen Peters, Improvement Lead for Stroke, partnered with Victoria Miles-Gales, Head of Patient Experience, to create a program enhancing activity and experience for stroke patients on Harvest B. From this the Stroke Team Recovery Improvement through Volunteer Engagement (STRIVE) was born, which involved all the services along with the volunteer sector to support patients during their time on Harvest B.

This programme delivers volunteer led activity sessions tailored to the needs of stroke survivors to aid in their recovery. Focusing on social engagement, communication, fine motors skills and increasing activity this programme has benefited 140 stroke survivors thus far. The STRIVE team aims to expand these sessions covering more days a week, offering better care and experience for stroke patients to relieve boredom and promote psychological wellbeing to enable them to return home after a life changing illness.

### IMPACT & RESULTS ACHIEVED

Since February 2024, STRIVE has held over 40 activity sessions, with 3-5 patients attending at a time, meaning we have been able to have a positive impact on approximately 160 patients. After each activity group volunteers complete a feedback questionnaire with the patients. This questionnaire asks patients to rate their experiences, on a scale from 1 to 5, this enables us to monitor the impact of the groups, ensuring we continue to meet our objectives. An aphasic-friendly version has been designed by our speech therapist to ensure we can get feedback from all the patients who attend the activity groups.

Volunteers help support these patients by completing the feedback questions by using the thumbs up, and thumbs down tool for patients to react to. The STRIVE team have met weekly to discuss the feedback and recognise that the programme is contributing to improving the patients' experience on Harvest B and the activities are helping to alleviate patient boredom on the ward, whilst supporting their recovery. Since the pilot, we have been able to retain the same 4 volunteers for the group sessions. During their reflection, they said it’s because they “can see the difference we are making to patients”. With the training that they have received they now feel empowered and are now able to lead and adapt the sessions to be patient-led, giving our patients a choice of what they would like to do in the group.

### WHAT MAKES THIS INITIATIVE STAND OUT?

STRIVE stands out because the activity groups are run and led by volunteers, these people give up their own time to make a difference and help patients. STRIVE listens to the feedback provided by the patients and the volunteers, using their suggestions to improve the programme. This has helped the programme to succeed using PDSA cycles. The activity groups foster a sense of community. Patients share recovery journeys, drawing encouragement from those who've progressed further, making their own path seem more achievable. STRIVE has empowered our volunteers. The program provides them with valuable training opportunities they wouldn't normally receive. The collective MDT approach to the creation of STRIVE has made this project stand out, with all the different ideas that they have. STRIVE agreed to the slow implementation of the activity groups. This was to ensure that we can continue to achieve an excellent standard as well as the best experience for our patients.

### Contact Details

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## Barnsley Hospital NHS Foundation Trust Care Partners

### Category

Support for Caregivers, Friends, and Family



### ORGANISATION DESCRIPTION

Barnsley Hospital is a 400-bed acute hospital, serving a population of over a quarter of a million people in the Barnsley area, South Yorkshire and an employer of over 4,700 staff. The hospital was built in the 1970s and has gone through many transformations since, as the healthcare needs of the local population change – as an NHS Foundation Trust, local people have a say in shaping our future. Barnsley Hospital provides a full range of district hospital services to the local community and surrounding area. We are the Patient Experience team who support our Clinical Business Units (Medicine, Surgery and Women's and Children's) to drive service improvement across the organisation to enhance the experience of our patients.

### SUMMARY

Barnsley Hospital value the support and expert knowledge that carers can give and are keen to support people who would like to be involved in the care of their relative or friend during their time in hospital, who needs help because of their illness, frailty, disability, a mental health problem, addiction or where they need any physical or emotional support.

Carers have a significant role in the effective and safe delivery of treatment and care of patients in hospital; this role will often cross the boundaries between the patient's home and hospital setting. It is important that we identify, involve and support carers in the clinical setting to get the care of the patient right. With knowledge, understanding and honest communication, staff and carers can work in partnership as Care Partners to improve the hospital experience for patients, carers, and staff. The policy and charter to develop the Care Partners approach was developed through engagement with staff and the Barnsley Carers and Barnardo's Young Carers services. During Carers week, Friday 9 June, the Trust launched the Care Partner Policy which provided further opportunity to engage and raise the profile of the Care Partner work.

### IMPACT & RESULTS ACHIEVED

Clinical Business Units are required to report the number of Care Partners they have supported to the quarterly Patient Experience, Engagement and Insight Group. The Patient Experience team receive a monthly report detailing the number of meal vouchers and car parking utilised by Care Partners. In Quarter 4 of the last financial year over 250 Care Partners were supported across neonatal and inpatient ward areas. We are in the process of establishing robust qualitative and quantitative complaints and concerns analysis to evaluate the impact and effectiveness of patient experience initiatives.

### WHAT MAKES THIS INITIATIVE STAND OUT?

Welcoming and supporting Care Partners within the hospital setting underpins the Trust ambition to provide the best possible care for patients and service users. The successful delivery of this initiative is reflective of the caring and compassionate workforce here at Barnsley Hospital and we are one of the first Trust's in the country to implement this model. The adaptability of the Care Partner role within the organisation benefits staff, service users, caregivers and their families across all areas of the Trust. The initiative has received a lot of interest regionally and we have linked in with a number of organisations to share learning. The Care Partner role strategically links to the work of the Barnsley PLACE and South Yorkshire ICB Carers Strategy in their commitment to identifying and supporting unpaid carers.

During Experience of Care Week, the Care Partner work appeared in the NHS England North East and Yorkshire Newsletter under 'Spotlight on Good Practice'. NHSE staff from the Nursing Directorate came to visit the hospital to look at how we have implemented the Care Partner role, the day was a success and included a visit of ward areas to witness Care Partners in practice. Vicky, the individual behind 'Vicky's plea' (a patient story), has been supporting NHSE by driving the importance of the Care Partner role based on her experience of care during the pandemic and was also in attendance on the day.

Vicky's plea has since been updated to reflect the work undertaken here at the hospital.

### Contact Details

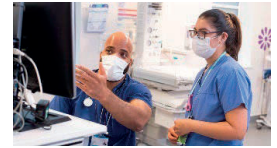
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## Barts Health NHS Trust

### Model Patients Complaints Management Training for Larger Trusts - Digital learning.

#### Category

Making Complaints Count



#### ORGANISATION DESCRIPTION

Our group of hospitals provide a huge range of clinical services to people in east London and beyond. We operate from four major hospital sites (The Royal London, St Bartholomew's, Whipps Cross and Newham) and a number of community locations, including Mile End hospital. Around 2.5 million people living in east London look to our services to provide them with the healthcare they need.

#### SUMMARY

The aim of our new digital learning programme is to ensure all Barts Health employees access complaints training. Our ambition is to ensure regardless of the size of the workforce, all employees can be fully trained, without compromising clinical care time. Originally, our training was a classroom offering. For a Trust with 20,000+ staff this was challenging for the 3wte trainers who alongside other responsibilities, travelled across all hospitals to deliver training. It also meant staff either got the same training regardless of their roles or got no training due to an inadequate number of trainers. We were therefore unable to provide assurance all staff had been trained and had the right training.

This digital learning piece has changed everything for us. Our training is no longer "person dependent" and is accessible 24/7. It eliminated challenges which to name a few included: issues around travelling to multiple hospital sites across a wide area of London; low turnout for sessions due to pressures on clinical time; few trained staff meaning staff were not always able to adequately articulate their understanding of processes; trainer burnout etc. We believe colleagues could benefit from this project especially as we have received positive feedback from stakeholders including the Parliamentary Health Service Ombudsman.

#### IMPACT & RESULTS ACHIEVED

Previously, at the beginning of each calendar year, a trainer would collaborate with the education academy to book training dates and venues for the year. At the most, 25 participants were trained in each class room sessions. This did not provide the assurance that all employees could be trained and had the skills required to manage complaints within their area of service provision. As of July 2024 however, with our new digital learning package, all 20,000+ employees of Barts Health have access to complaints management digital learning package via their learning and development account. Having completed the training needs assessment for every employee group, Level 1 - Early resolution is mandatory for every employee, except staff who complete level 2. Level 2 training which has an early resolution module in the package exempts participants from level 1 training. Level 3 which provides an outline of accountability and leadership in complaints management for executives. The success measure for us is that we now have assurance that complaints training is accessible to all staff and each member of staff has the right level of training assigned to their staff group.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

This project show cases the innovative side of complaints management, the advantages of accessible complaints training for larger workforces and how this can impact on the quality of complainants / patients experience. Complaints management is often conceptualised as "listening to upset people and writing response letters". For us at Barts Health it is so much more. It is about creativity, positive experiences for complainants and always seeking to "get it right". In the spirit of "getting it right" we continually seek to make improvements in our processes, hence the continued drive to improve access to training.

Having a robust digital learning team within the organisation that understood this vision and concept well enough to be able to transform it into the digital structure we now have has been key to the success of this project. In addition, support for the project at the highest level within and outside the organisation, including Trust Executives, the PHSO and various patient experience groups in the Trust have contributed to the success of this project. The encouragement from the PHSO early adopters support team whilst we conceptualised and developed the training has been an extra moral boost and confirmation that that we were on the right track.

#### Contact Details

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## Bath Institute for Rheumatic Diseases BIRD Patient and Public Engagement programme phase 4

### Category

Communicating Effectively with Patients and Families



Bath Institute for  
Rheumatic Diseases

### ORGANISATION DESCRIPTION

Bath Institute for Rheumatic Diseases (BIRD) is a charity supporting arthritis research, education and patient engagement since 1975. BIRD's vision is to enrich patients' understanding and knowledge of their rheumatic diseases, empowering them to make choices that benefit them. In all that we do as an organisation, we strive to put patients at the centre of our work, recognising and encouraging the importance of their voice. Patients are trustees, committee members, volunteers and the Patient Engagement Director is a patient herself.

### SUMMARY

BIRD's Patient and Public Engagement initiative works closely with patients to get them involved in research, deepen their understanding of their rheumatic disease and increase their self confidence to manage their condition. 2023 saw the huge challenge of growing NHS queues. BIRD was asked to respond by consultants and patients, to test short webinars for patients and in person access to information and consultants and researchers. This became a new face to face event, the Research Showcase, held in March 2023 for the first time.

The new Patient Listening Panel shaped the next phase of purposeful, targeted podcasting resulting in nine episodes aimed at patients and their needs — with content including rheumatic disease information, treatment research and updates, patient self-management, support and wellbeing topics. In 2023, BIRD piloted short films for patients, to guide patients outside of their appointments and also to encourage and inform patients to get involved in research projects. These are widely available via BIRD's owned and social media channels and also viewable within the RNHRD waiting room. Patients share their unique, personal perspectives.

### IMPACT & RESULTS ACHIEVED

By March 2024, BIRD podcast episodes had received over 24,000 plays of 50 episodes, covering topics such as psoriatic arthritis, fibromyalgia and osteoporosis. 215 patients attended three webinars in 2023 on Axial Spondyloarthritis, Psoriatic Arthritis and Rheumatoid Arthritis. In 2023, Patients were invited to participate in 15 research requests and surveys.

Patients tell us they are keen to 'give back' and get involved in research, mainly through taking part in surveys and questionnaires circulated but also through focus groups, workshops, and other participation. At least 200 patients involved.

The Patient Research Panel is 26 committed enthusiasts provided feedback on survey design and research opportunities to academic and clinical researchers. The Patient Listening panel is 32 patients.

The webinars were fully booked out as was the Research Showcase (70).

### WHAT MAKES THIS INITIATIVE STAND OUT?

Through the patient-first approach that we have taken to our communications, we have achieved both quantitative reach — via our podcasts and targeted advertising campaigns on social media — and quality impact. The success of our webinars, in particular, have demonstrated deep patient engagement; very high recommendation and empowerment scores have been received back for our webinars, with provide patients with the opportunity to directly ask their questions of consultants and listen to others doing so. We also receive regular, constructive input from our Patient listening panel, Patient research panel and from our patient database of over 1,000 patients, who avidly read our newsletters and respond to our surveys.

The initiative directly stepped into a gap in provision, especially as waiting times lengthen; 1 in 6 people have a rheumatic disease and it is now the main reason that is cited for disability. The Royal National Hospital for Rheumatic Diseases sees thousands of patients per month and yet struggles to provide essential and engaging information via videos and newsletters in reception; as a much smaller charity that operates leanly, we have worked purposefully to produce a range of helpful videos featuring specialists providing insight on a whole range of relevant topics, including what to do if you get an infection.

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## Belfast Health and Social Care Trust Feedback February

### Category

Staff Engagement and Improving Staff Experience



Belfast Health and  
Social Care Trust

caring supporting improving together

### ORGANISATION DESCRIPTION

Belfast Trust is the largest integrated Health and Social Care Trust in the United Kingdom. We deliver integrated health and social care to approximately 340,000 citizens in Belfast and provide the majority of regional specialist services to all of Northern Ireland.

We have an annual budget of £1.3bn and a workforce over 20,000 (full time and part time). Belfast Trust also comprises the major teaching and training hospitals in Northern Ireland. Despite the large and complex nature of the organisation, the Patient and Client Experience Team is a small but powerful team within the Nursing and User Experience Directorate in the Trust and we cover all areas of the Trust across all locations.

### SUMMARY

Feedback February was driven by the desire to increase engagement with feedback across service users and staff to support the delivery of high quality safe care across all areas of the Trust. We used evidence from the INQUIRE study around how staff are supported by patient stories, and identified gaps in how staff engage or perceive patient experiences to develop actions around how we, as the Patient and Client Experience Team can ensure that the Belfast Health and Social Care Trust are making the most of what our patients and service users tell us.

By turning the focus from patient engagement to staff engagement, we aimed to increase staff confidence with feedback and encourage promotion to patients from the staff they meet. We aimed to increase staff experience of receiving feedback to boost morale but also to encourage greater openness amongst staff to asking for and engaging with feedback. We delivered a low budget intervention, using collaborative working approaches with internal and external stakeholders to ensure that all voices could be heard, recognised and actioned.

### IMPACT & RESULTS ACHIEVED

To assess impact, we took measurements in number of staff who were using Care Opinion as responders, the number of stories that were being shared, and the engagement with social media. In February 2024, we saw a 10% increase in the number of staff who signed up as responders on the BHSCT Care Opinion subscription, from 610 to 677, evidencing an increased interest and engagement from staff.

When we looked at how service users and the public were engaging with Care Opinion; the number of stories increased by 300% from February 2023 (42 to 117) and Care Opinion pages on the Trust website seeing an increase of 412% in page views in February 2024 versus January 2024. Our social media pages also showed an uptake; we expected engagement rates on Facebook around 1-3% per post, however #FeedbackFebruary content was seeing engagement throughout the month of 5-20%.

### WHAT MAKES THIS INITIATIVE STAND OUT?

This project was evidence based, not just in the rationale for gathering and using patient experience but also in identifying the drivers for impact on staff. Taking the results from the INQUIRE study, specifically chapter 4, which looked at professionals attitudes and experiences of feedback helped us to look at how we could change the narrative and build more confidence and responsiveness around how our staff engaged with the patient stories. In this project, our aim was to demonstrate the efficacy of using feedback to staff and build engagement with feedback.

Taking in research around how feedback can impact morale for staff, and also research about how an engaged public have more faith in the care that is provided led us to look at the drivers around public engagement, staff engagement. Our project showed that the elements of feedback are all necessary in developing a plan, data is ineffective if not analysed and used, staff are unable to improve services without leadership, but all of that depends on being able to gather the data.

When they work effectively, it becomes a self pollinating system, which has been seen in the continued increases in data collected and changes achieved since Feedback February.

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## Benenden Hospital My Patient Hub



### Category

Innovative Use of Technology, Social and Digital Media

### ORGANISATION DESCRIPTION

Opened in 1907, Benenden Hospital is an independent hospital with charitable status, providing first-class treatment for a wide range of specialities. The only private hospital in Kent to be rated Outstanding by the Care Quality Commission (CQC), it offers a wide range of healthcare consultations, treatments and diagnostic services to self-pay patients, Benenden Health members and those with private health insurance. It also offers some services to NHS patients via the e-referral system. Providing the highest standards of patient care for over 100 years, the hospital offers fast access to over 250 treatments from highly experienced consultants, supported by dedicated clinicians and specialist teams, in calm and comfortable, modern surroundings.

### SUMMARY

In May 2023, Benenden Hospital collaborated with Streets Heaver Healthcare Computing to launch a unique online platform offering its patients a more efficient and convenient way to manage their hospital activity and communication: My Patient Hub. The platform, accessible through any internet-connected home PC, laptop, tablet or smartphone, allows patients to check previous and future appointments, view their entire correspondence history with Benenden Hospital, review their balance and make any outstanding payments (self-paying patients only). It also allows patients to update selected personal details and, if they are a Benenden Health member, track their spend on diagnostics and appointments against pathway budget.

The platform was developed with a patient-first approach to ensure usability was at its best. It also resulted in a significant reduction in paper usage, strengthening the hospital's PaperLite sustainability strategy. At the time of launch, Benenden Hospital was the first private hospital in the South East region to offer a platform of this type.

### IMPACT & RESULTS ACHIEVED

From launch up until 30 June 2024, My Patient Hub has seen 12,000 registrants ranging in ages from 18-95 years. 64,000 visits have been made to the hub since launch, and over £610,000 worth of payments for appointments and procedures have been made through the portal. In January 2023, before the launch of My Patient Hub, 55% of all our correspondence to patients was via email.

We have now boosted it to 91%. This rise has seen a significant reduction in paper usage and therefore strengthens our PaperLite sustainability strategy. Since the implementation of My Patient Hub, Benenden's Hospital's rating on Doctify has improved on an already fantastic score.

Feedback from patients was gathered via a feedback button on the email communication sent to them from Compucare.

Comments have been extremely positive, such as:

- "I was surprised that even at my age of 85, I was able to log in so easily."
- "Fast, efficient and easy to access."
- "Clever facility and very accessible."
- "A great gateway to information and follow-ups."
- "Extremely useful facility."

### WHAT MAKES THIS INITIATIVE STAND OUT?

At the time of launch, Benenden Hospital was the first private hospital in the South East region to offer a platform of this type. A patient-first approach was paramount to ensure usability was at its best. Throughout the planning, implementation and since its launch, we have continuously consulted our patients for feedback to ensure the platform was for the benefit of both our patients and the hospital's digital accessibility strategy. We believe this ongoing dialogue with the end user has been a significant factor in the platform's rapid adoption by patients and its subsequent success.

Incredibly, the demographic of login age groups on My Patient Hub runs from 18-95, evidencing how all patients are benefitting from this innovation and patients young and old are engaged in digital healthcare innovation.

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## Betsi Cadwaladr Health Board Small Business Research Initiative - Family Communication Project

### Category

Communicating Effectively with Patients and Families



### ORGANISATION DESCRIPTION

Betsi Cadwaladr University Health Board (BCUHB) is the largest health organisation in Wales, providing a full range of primary, community, mental health hospital services for a population of around 700,000. The population of West Rhyl are of the most deprived across Wales, this is based on factors such as income, health, education and access to green space.

The Health Board provides a full range of primary, community, mental health and acute hospital services across 3 district hospitals, 22 community hospitals and a network of over 90 health centres, clinics, community health team bases and mental health units. BCUHB also coordinate the work of 113 GP practices and the NHS services provided by dentists, opticians, and pharmacists across the region.

### SUMMARY

The current system of telephoning in, is not effective. Relatives can be on hold for long periods before an answer. Even then, they do not always receive information that is relevant. The Health Board wanted to explore how to better communicate with families when their loved one is an inpatient.

Our vision was to test 2 digital systems, supporting staff to communicate frequently and easily by sending messages and voice notes through a digital portal on a daily basis. Feedback from patients, relatives and staff helped shape development of the systems based on elements of communication they felt were important.

The project aspired to: Enable a patients allocated relatives to receive an update that is relevant, informed, knowledgeable and appropriate; Allow the patient's relative to access the updates at a time convenient to them; Free up time for health care staff to input into patients; A system that would be easy to access by all; Patients feel closer to relatives and recovery is assisted; Reduced staff, carer and patient stress; Reduced complaints relating to negative communication.

### IMPACT & RESULTS ACHIEVED

Throughout the pilot there were opportunities for relatives and staff to share feedback regarding their experience. Initially relatives reported that they felt "very frustrated" and not involved due to the difficulties experienced when ringing the ward for updates with no answer. Feedback from end of project survey highlighted the benefits the digital solution offered: 'It stopped me having to ring in the morning to find out how my mum was. I was happy to receive the message before I visited in the evening. It meant I had to ask less questions to staff as I know from the message mum had a wash, mum had been sitting in a chair.

The benefits realisation of the project is currently being analysed and will be submitted to SBRI Board on 24th July 2024. An independent evaluation is due to talk place this summer to capture staff feedback. Initial findings suggest there has been no direct impact on the reduction of calls received to the wards due to the sample size involved. Initial feedback has shown that relatives have benefited from receiving daily updates.

Relatives have felt reassured and included in decisions around patient care. Positive themes include how the digital systems supported relatives who lived outside of the local area/abroad and those who struggle to visit/contact daily.

### WHAT MAKES THIS INITIATIVE STAND OUT?

The project is special because we learnt more than anticipated around how relatives feel about communication. It highlighted the significant importance of communication and the impact it can have when people do not feel informed. Key moments in the project included the platform being utilised to inform a relative who was not answering their phone to contact the ward when a patients end of life condition deteriorated.

Without the ability to communicate in this way this important event could have been missed. This is the first digital project in Wales to explore how to improve communication with patient and families. representative from other Health Boards shadowed this piece of work. The co-production of this project with all parties ensured the system met everyone's needs and was accessible.

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## Betsi Cadwaladr University Health Board "The garden" CAMHS Environment Project

### Category

Environment of Care



### ORGANISATION DESCRIPTION

BCUHB is based in North Wales and is the largest health board in Wales covering 6 counties (Flintshire, Wrexham, Conwy, Denbighshire, Gwynedd and Anglesey).

Within the health board we offer child and adolescent mental health services (CAMHS) to children and young people aged 0-18 who are struggling with their mental health.

There are many levels of service offers within CAMHS from early intervention, prevention and promotion of mental health and wellbeing, professional consultation, early years support, assessment and therapy and inpatient support.

### SUMMARY

CAMHS environment project is an inspiring and collaborative project that has been developed by young people with the aim of improving children and young people experiences within Wrexham Child Health Centre. All the work has been young person led throughout. The consultation gained initial thoughts about what needed improving to support children and young people's wellbeing, the actions were implemented and although the Health Care Centre are very good at listening and taking onboard feedback, this was the first time a consultation was done to this degree.

The results showed what improvements would help patients to feel more included and comfortable. Young people co-produced plans for the changes to be made, organisations worked collaboratively and for free on the core changes ensuring every step would improve patient experiences but also considering the voices from the consultation, the environment and longevity of the changes to be made.

Young people were also very hands on during the projects, from the planning to creating art work, leading on changes on the website and leaflets, the development of the garden, building of the shelter and outside space and even down to planting bulbs and erecting butterfly and bird boxes. Consequently, empowering the young people while they were developing many transferrable skills during the process. All the organisations involved have seen how young people's voices can support and make change for the better.

### IMPACT & RESULTS ACHIEVED

Working together to improve the environments has supported the clinical teams to gain a better understanding for what matters to children and young people when they attend their appointments in the clinic settings. The young people involved in the project are routinely asked if they feel listened to after each part of the project is completed or worked on.

We now use an Experience of Service Questionnaire that asks questions about the environment so we can ensure we have consistent and continuous feedback about the services and environments.

There has also been an increase in staff's knowledge and promotion of children's rights including choice, empowerment and safe spaces to access support.

### WHAT MAKES THIS INITIATIVE STAND OUT?

The key elements contributing to the success of the project have been:

- Partnership working and joint ownership of actions
- Youth leadership
- Taking time to ensure actions are completed
- Having teams involved
- Having enthusiastic managers and professional leaders
- Taking a children's rights based approach
- Using creating ways to improve environments
- Listening and learning through experience

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## Birmingham Women's and Children's NHS Foundation Trust Interpreting & Cultural Insight Department

### Category

Team of the Year (including complaints and PALs)



**Birmingham Woman's and Children's**  
NHS Foundation Trust

### ABOUT NOMINEE

The team are fantastic in teamwork and really support each other through challenging sessions they experience, whether it may be a patient who may show hostility towards them as some families do not take well to having professional interpreters or whether they have dealt with a highly sensitive booking such as mental health, domestic violence or bereavement.

### SUMMARY

The team have been built over the last two decades and have become a fundamental part of the BWC trust. The team is a rare service that offers a personalised interpreting service to the patients in the trust. While most trusts now rely on and outsource the interpretation services to external providers, the continuity of care we provide to each patient are an invaluable tool to patients. From having ante-natal initial bookings to supporting the patient all the way till delivery and possibly to Birmingham Children's Hospital in many cases. This really has had a huge impact on patient experience as we continue to deliver a high-quality service. Some patients feedback to the interpreters are "I don't know how I would have coped without your help and support", "seeing you at every appointment puts me at ease and gives me the confidence."

Staff including nurses and doctors have commented "Our in-house interpreters are much equipped in handling complex situations as they are familiar with common medical terminology which when we get an external interpreter, we do not feel the conversation flows in the same way as it would with our in-house interpreters". The team are often praised by staff across all departments for the humility they show and the warm and friendly attitude they display. This includes our external partners we work who have said "The interpreters can be spotted from a mile away with their lovely bright uniform that makes them hard to miss and seeing them do their walk around and ward rounds, they always come across positive and have a smile on their faces and always say hello". All these heartwarming messages from patients and staff make the interpreters job increasingly rewarding and satisfying.

Although the interpreters work on pre-booked appointments, their day can be unpredictable and therefore the interpreters need to be able to move around easily to meet demand. Whilst the nature of any role is usually a speciality in which front line staff and clinicians are well trained in, our interpreters vary from one department to another and do not know what their day will bring when they come to work. The interpreters describe their job at times as being on an emotional roller coaster. For example, one of our interpreters assisted an expectant mother during a c-section whilst supporting her, watching a new life enter the world. They experience the joy and happiness with the parents and midwives. In the same breath the interpreter was called to attend PICU department at the children's hospital and see to a critical child who is fighting their last breath, and then having to break the news to the parents and discuss end of life care.

Their resilience, experience and skills equip them to face challenging situations and continue to always maintain a high standard of professionalism. Their continuous patient centred approach makes them stand out as individuals and as a team. I feel the team is very special in the way that they bring their own authenticity and lived experience which help patients connect with them. Some of the interpreters are from first generation migrants and others have their own personal experience of coming to the UK and not being able to speak English. Whilst others have seen or heard from their parents/grandparents of their hardships and struggles of navigating through the NHS systems and not be able to speak the language. Their deeper-rooted values and culture instilled from their upbringing and experiences is what makes them resilient, patient and shine in the way they do.

### AT WORK

They have grown stronger as a team from offering cultural workshops, to taking part in research studies, participating in short video clips in how to stay safe during covid and increasing breast feeding awareness in different languages. They are not afraid of trying new challenges and are receptive to new ideas.

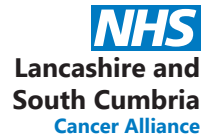
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## Breast Cancer Now in collaboration with Lancashire and South Cumbria Cancer Alliance A collaboration to improve patient experience for breast cancer patients

### Category

Cancer Experience of Care Award & Partnership Working to Improve the Experience



### ORGANISATION DESCRIPTION

This project was run in partnership between Breast Cancer Now and Lancashire and South Cumbria Cancer Alliance. Breast Cancer Now are the charity that's steered by world-class research and powered by life-changing support. We're here for anyone affected by breast cancer, the whole way through, providing support for today and hope for the future.

It's our vision to make sure that by 2050, everyone with breast cancer lives, and lives well. Lancashire and South Cumbria Cancer Alliance is the cancer team within NHS Lancashire and South Cumbria Integrated Care Board. We are one of 21 Cancer Alliances across England, set up to improve services, care and outcomes for people affected by cancer.

It's our mission to reduce variation in treatment and reduce inequalities to ensure that everyone in Lancashire and South Cumbria has access to high-quality cancer services. To do this, we work in collaboration with organisations across our region, as well as people who have themselves been affected by cancer, to transform the diagnosis, treatment and care for cancer patients in our local area.

### SUMMARY

The Service Pledge is an innovative programme dedicated to delivering lasting positive change to everyone's experience of breast cancer. It brings patients and healthcare professionals together to work in partnership to design and deliver improvements in a practical and achievable way. The Service Pledge recognises that patient experience is as important as clinical effectiveness and safety. Actively involving both the people who provide breast cancer services and those who receive them gives a more complete understanding of the challenges and opportunities, meaning the changes made make a real difference for all.

In January 2023 Lancashire and South Cumbria Cancer Alliance and all four hospital Trusts from across the region, who provide treatment and care to breast cancer patients signed up to take part in the Service Pledge. By working in partnership Breast Cancer Now and Lancashire and South Cumbria Cancer Alliance were able to identify key areas of improvement across the region, and support the hospital trusts to share best practice, implement changes, reduce variation in services and ultimately improve patient experience.

### IMPACT & RESULTS ACHIEVED

During the programme 90 improvements were identified across the 4 hospital trusts in Lancashire and South Cumbria Cancer Alliance. These improvements will benefit approximately 1,407 people diagnosed with breast cancer every year in these areas. Improvements have included: Setting up separate clinics to complete holistic needs assessments with primary and secondary breast cancer patients around the time of their diagnosis; Metastatic Clinical Nurse Specialist calling secondary breast cancer patients shortly after their diagnosis to offer support while they wait for their first oncology appointment; Setting up post op telephone clinic for patients who have had surgery for primary breast cancer to address any concerns or questions they may have; Offering holistic needs assessments to primary breast cancer patients at 3 and 5 years post treatment

### WHAT MAKES THIS INITIATIVE STAND OUT?

We believe the Service Pledge is the only independent, non-profit programme dedicated to turning feedback from patients and hospital staff into meaningful service improvements specifically for breast cancer. Through working in close partnership with the Lancashire and South Cumbria Cancer Alliance improvements were embedded consistently across the region. It also facilitated a culture of sharing best practice and learning between breast teams across the region. "Large scale co-production at system level can be difficult to attain. The Service Pledge enabled Lancashire and South Cumbria Cancer Alliance to achieve this for people either living with breast cancer or treated for breast cancer. The collaboration between patients, charities and NHS organisations has been outstanding. These two key points are what makes this initiative special." Faye Bennett, Cancer Quality Improvement Lead Lancashire and South Cumbria Cancer Alliance.

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## Bristol Health Partners

### Common Ambition Bristol - a coproduction partnership to improve the sexual health of people of African and Caribbean heritage

#### Category

Commissioning for Patient Experience & Partnership Working to Improve the Experience



#### ORGANISATION DESCRIPTION

Common Ambition Bristol (CAB) is a programme, initially funded by The Health Foundation, in partnership with: Brigstowe (lead partner), African Voices Forum, Unity (UHBW, NHS, University of Bristol, Bristol City Council Public Health, Bristol Health Partners).

#### SUMMARY

CAB is working in equal partnership with African and Caribbean Heritage Communities (ACHC) and sexual health professionals to co-produce new ways of increasing HIV awareness and testing and tackling stigma. CAB has invested in a holistic 'co-production plus' approach, applying this to a challenging, highly stigmatised area of health amongst an under-served community. Putting lived experience in the driving seat and championing community involvement across the system.

Senior leaders, including commissioners, from partner organisations play an active role alongside community members, enabling system change to ensure decisions can be implemented quickly. In its early phase, community members questioned the sustainability of CAB and senior leaders' commitment. This led to CAB running robust, facilitated events to promote understanding and make plans collectively. CAB is co-producing adoption and spread strategies to share learning. CAB works closely with commissioners to ensure that the knowledge is included in the service specification developed for the local authorities' sexual health service recommissioning process.

CAB takes pride in embedded community involvement. Community members lead delivery of the project: from outreach to setting up two dedicated clinics. The project co-ordinator, outreach workers and community researchers are all from ACHC. CAB is committed to empowering the community and using learning to address inequalities faced by those who use sexual health services and beyond. The community members, outreach workers and researchers are all paid for their time and expertise.

CAB is ensuring that learning from the programme is disseminated locally and nationally. Team members discuss with, presenting and publishing to, diverse stakeholders nationally from academia, health and care, local authorities, community groups.

#### IMPACT & RESULTS ACHIEVED

CAB has developed and tested interventions to address inequalities faced by people from ACHCs. Including setting up the only ACHC HIV and sexual health testing clinics in the south west, outreach to 30+ barbershops and black businesses, targeted health promotion events, a multi-media campaign. The test and learn approach, supported by the University of Bristol evaluation team, is informing project changes.

Interventions are being evaluated using surveys, interviews, observations and website metrics. Community researchers have been recruited and trained to collect data. Data collection and analysis is ongoing: early indicators show targeted health promotion events are effectively increasing attendance at the clinic and outreach is helping to reduce HIV stigma in the community.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

CAB's community members are not just members of their respective communities, but a valued and indispensable part of CAB. Their involvement in the PDG has been vital to the success of CAB, enabling a sustainable, authentic and valued programme of work that is resonating with the community, and changing commissioning.

This will have an impact not just now, but in the future, as the project helps Bristol to move towards the UN and Fast Track Cities goal of no HIV transmissions by 2030. Community member involvement has proved a valuable two-way learning process. Being part of the programme is enhancing their skill set, knowledge, and ability to influence. In turn, researchers, health professionals and commissioners have been exposed to, and embraced working in different and culturally sensitive ways.

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## Cheshire and Merseyside Cancer Alliance Start with People: A Readers Panel

### Category

Engaging and Championing the Public

**Cheshire and  
Merseyside**

**Cancer Alliance**

### ORGANISATION DESCRIPTION

Cheshire and Merseyside Cancer Alliance (CMCA) host the Health Inequalities and Patient Experience (HIPE Team). CMCA are on a mission to seek out improvement and excellence in cancer services. The HIPE team, made up of 5 team members, produce groundbreaking programmes of work, challenging inequality and placing patient voice at the heart of everything we do.

### SUMMARY

Our Start with the People project, led by our HIPE team, works closely with our Readers Panel, people with experience of cancer who want to improve the patient journey. This allows us to include a diverse range of voices from people with lived experience of cancer. This approach brings a new perspective to patient involvement by encouraging people to get involved in a way that suits them with plenty of support. The panel assess a range of products, i.e. pamphlets, posters, from across the system for suitability and make “patient friendly” recommendations.

We use a leadership approach to help us deliver a supportive programme that can influence the way our services are delivered based on the input of our panel members. This has allowed us to create a programme that supports our colleagues in the Alliance and encourage the inclusion of patients as quality improvement advisors in their work. Our outcomes see patients as equal partners in our quest for quality improvement and improved experiences. The approach is built into the governance of the organisation, with the backing of SMT, guaranteeing sustainability. The approach is widely respected, with a how to guide in development to share with other health organisations.

### IMPACT & RESULTS ACHIEVED

Since the creation and development of the Readers Panel, we have reviewed 40 documents, 25% of which have been produced by CMCA and 75% by external agencies. To evidence the importance of patient review, to increase the profile of the Readers Panel and highlight that the document had been approved by patient representatives a logo was created.

The HIPE Team and patient representatives designed the ‘Cheshire & Merseyside Cancer Voices’ logo. This is added to a document once has been reviewed. Patient representatives feel empowered to speak up in their places of work about public experience and inequalities. Public feedback is that Readers Panel reviewed documents are “easier to understand” “make more sense” and are “more accessible.”

### WHAT MAKES THIS INITIATIVE STAND OUT?

As similar approaches to ensure public engagement and diversity are rare, the HIPE team have seen a significant increase in demand for our Readers Panel, within CMCA and other sectors including primary and secondary care. The team ensure that representatives have an open line of communication and that they are on hand to answer any questions.

They build positive relationships with representatives which are based on trust and understanding. The team hold regular meetings virtually and face-to-face which all representatives are invited to. They offer the opportunity for 1-1 discussions if individuals are unable to make the meetings. We have a robust application process ensuring representatives are fully inducted to their role and are aware of what is expected from them and what they can expect from the team. Individuals can be a representative whilst their cancer journey continues however, we ensure patients with ongoing concerns are supported appropriately. The team ensure representatives are aware that their experiences can help bring a patient’s perspective and potential change to future services and ensure their input into activities is representative to people across the region.

The team have created a secure database which stores representatives’ information. The database details the representative’s individual roles, interests, demographics, contact details and contact preferences. It also includes a unique Red, Amber, Green (RAG) system which is continually being reviewed to ensure representatives are being supported within their role while also taking into consideration their personal circumstances and commitments.

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## Cheshire and Merseyside Cancer Alliance

### Start with People: Building a foundation through policy and recruitment

#### Category

Staff Engagement and Improving Staff Experience

**Cheshire and  
Merseyside**

**Cancer Alliance**

#### ORGANISATION DESCRIPTION

Cheshire and Merseyside Cancer Alliance (CMCA) host the Health Inequalities and Patient Experience (HIPE) team. CMCA seek out improvement and excellence in cancer services. The HIPE team, made up of 5 team members, produce groundbreaking programmes of work that challenge inequality and place the patient voice at the heart of everything we do.

#### SUMMARY

Truly involving diverse patients in the work of an entire organisation is a difficult task. A strong leadership approach, with SMT backing, have ensured that this new way of thinking builds patient involvement into the centre of all work. The governance of the organisation mandates that every team member involves patients in their work. Our production of a live policy and representative handbook lead the way, with all staff introduced to the patient involvement approach during induction, staff training and during team meetings. This ensures sustainability as staff are unable to proceed in development work without patient input. The outcomes speak for themselves, less than 2 years ago 0% of CMCA projects had patient involvement and that is now over 50%. The Integrated Care Board (ICB), trusts and health settings are keen to work with us and instil our approach in their own settings. Across the system we present and share our methods and successes, to ensure others feel confident to transfer and disseminate this “all in” approach.

#### IMPACT & RESULTS ACHIEVED

Using a robust system embedded into to the project management approach used by every member of the Alliance, ensures that every single person needs to consider not just if, but how they will work with patients in their role. To ensure and measure adherence to the policy, we monitor the number of projects within the Alliance with patient involvement. We measure the volume of requests for support and the number of EIA performed. More recently we have begun to measure the amount of support we give the system. The nature of a Cancer Alliance is to push for improvement throughout cancer services across our region. From the success of this project, we seen a huge increase in requests from external partners for our support with patient involvement. The reason we measure these outcomes is to quantify the power of embedding the live policy, which has been backed by SMT into the structure of an organisation. Our greatest achievement is the fundamental organisational shift we have seen. Everyone within the CMCA now includes patients in all of their work. Thanks to the foundations we have built through our Patient Involvement policy we are ensuring it is the responsibility of everyone in the Alliance to include patient voices at the heart of each of the Alliance’s programmes/projects.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

The impact across our organisation is becoming apparent as we begin to put the patient voice in front of those who can make changes. For example, a patient who is a wheelchair user, shared her experience about the accessibility difficulties she faced when attending a routine mammogram at a diagnostic delivery board meeting. An action from this was to review what is being done across all networks around making reasonable adjustments. This outcome is one of the reasons this particular patient became a CMCA representative as she wanted to improve accessibility for others. This is one of many examples.

We have embedded authentic and diverse involvement into the system and have shown it is sustainable. There is a shift in focus and awareness within our organisation as the language across the alliance has changed and we are unique in our ‘opt out’ system rather ‘opt in’. The impact is also felt with our patient representatives who report that their personal development and ability to make change is supported. Members advise that the work they undertake has encouraged them to pursue new ventures which complements their personal interests and goals. At the root of this growth is the Patient Involvement Policy and Handbook supporting both staff and patient/carers. This has enabled CMCA to invest significant time and investment to build positive relationships based on understanding and trust.

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## Cheshire and Wirral Partnership NHS Foundation Trust Amplifying voices: Expert by Experience led decision making in regional Lead Provider Collaboratives

### Category

Commissioning for Patient Experience



### ORGANISATION DESCRIPTION

Cheshire and Wirral Partnership NHS Foundation Trust's (CWP) is the Lead Provider for EmpowerED Adult Eating Disorders Provider Collaborative North West and Level Up, Cheshire and Merseyside, Young People and Families Provider Collaborative.

The LPCs put Experts by Experience at the centre of all core decision making processes across the region, ensuring a consistent patient centred approach is adopted by all NHS and Independent Sector Providers in the collaborative reducing variations in care and driving innovation.

### SUMMARY

Starting with the Expert by Experience forum, Experts come together regularly to identify priorities and work together to see where improvements can be made throughout the whole patient journey. Representatives from the forum have a permanent place at clinical delivery groups and partnership boards, holding the LPCs to account and ensuring that the priorities, vision and innovations from the forum are at the centre of all decision making. This transformative approach to mental health services breaks down the barriers between care providers by harnessing the power of diverse stakeholders to deliver, patient-centred care. Its uniqueness lies in the emphasis on clinical leadership and Experts by Experience, as equal partners bringing together senior clinicians and individuals with lived experience to review the entire patient pathway.

Performance is consistently benchmarked, with all key projects delivering measurable outcomes. Additionally, performance is monitored by Experts by Experience ensuring that there is an embedded culture of co-production and user-involvement.

The LPCs regularly attend system and national events, promoting the easily transferable model with organisations across the country.

### IMPACT & RESULTS ACHIEVED

Over the last 12 months EmpowerED and Level Up have had significant success with working with several providers improving the overall patient journey. An example for EmpowerED includes training has been delivered to over 1000 people across the NW including university staff, social prescribers, GP practices, BBC and acute trusts to improve early identification of an eating disorder.

For Level Up an example is to ensure there was understanding across nine places and to reduce unwarranted variation a SBAR report (Situation, Background, Assessment, Recommendations) was developed. Over 800 SBARs were submitted for consideration at Gateway.

### WHAT MAKES THIS INITIATIVE STAND OUT?

Robust Expert by Experience programmes: The establishment of our EbE programmes, set up a platform for Experts by Experience and their families to share their lived experiences and contribute to service development. In addition to the EbE programme the LPCs have set up an Ambassadors and Community Champions Program that actively recruits people from the community to promote adult health, wellbeing, and family/carer support. This further expands our reach and effectiveness, as it allows us to tap into the power of community networks and peer influence.

The value and efficiency of the LPCs: For EmpowerED includes the establishment of a rigorous process for performance review and monitoring. Implementation of the Patient Assessment Tool (PAT) has improved efficiency by providing assurance that all patients are identified and monitored appropriately. And for Level Up Children and adolescent inpatient services are amongst the highest costs in the NHS, by reducing admissions and reducing length of stay where appropriate Ancora CARE provides significant value for money and overall represent an approximate saving of £700k.

### Contact Details

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## Cheshire and Wirral Partnership NHS Foundation Trust Giving Neurodivergent people and their family members and carers a voice

### Category

Measuring, Reporting and Acting - Using Insight for Improvement



**Cheshire and Wirral  
Partnership  
NHS Foundation Trust**

### ORGANISATION DESCRIPTION

Cheshire and Wirral Partnership NHS Foundation Trust (CWP) provides health and care services including mental health, autism, intellectual disability, community physical health and all-age disability care. CWP provides care in community and inpatient settings, working closely with people accessing services, their families and carers to provide person-centred care for all. The areas of focus referenced as 'our Care Group services' are Adult Services for Neurodivergent People, including: Community Learning Disability Teams, Inpatient Assessment and Treatment Services for People with Learning Disabilities, Attention Deficit Hyperactivity Services (ADHD), Autism Diagnostic Services (Autism).

### SUMMARY

This submission outlines how we developed a Feedback Role to create opportunities to hear the experiences of Neurodivergent people accessing our services, their family members and carers. We identified the need from low responses through traditional survey style Friends and Family Test, where we cannot proactively respond to people's feedback and experience. So, in developing the Feedback Role this created opportunities to ensure people's experiences of our services informs our practice and culture, and strengthens our commitment to person centred care. The Feedback Role has demonstrated significant improvements in both the quantity and quality of feedback sought through proactive and timely approaches. It also supports services to ensure that the feedback received informs and improves service delivery, experiences, and outcomes for Neurodivergent people. Also, importantly, the role helps ensure that Neurodivergent people have a voice, and they are confident in the knowledge that from sharing their experience we work with teams to respond, learn and effect positive change for Neurodivergent people. The approach through the Feedback Role provides a dynamic and robust approach to 'Ask, Listen, Do' (Asking people, listening to people and doing something about their experience) at various touchpoints throughout a person's journey through services.

### IMPACT & RESULTS ACHIEVED

The Feedback Role/Feedback Volunteers have improved both the quantity and quality of information sought at various touchpoints of the care journey (initial assessment, ongoing appointments and discharge stages) and ensure services are implementing 'Ask Listen Do'. By contacting people at those touchpoints, there is the opportunity to make a difference while people are still receiving care. One example of coproduction is that people told us that the ADHD appointment text reminders wording was harsh and intimidating. We involved people who gave us feedback in developing new wording. From our quarterly feedback reports we have now been able to pull data and statistics that support the effectiveness of this unique and innovative role. We can measure themes, early resolutions, and actions and outcomes, specific to individual care group services. Each Team is given a data report with all feedback and themes. We then follow these up with an action plan, that teams must respond to, so that we are striving to improve practice and embed a culture change. Over the 12 months, to March 2024, there were 753 initial contacts made to Neurodivergent people, their families and carers.

### WHAT MAKES THIS INITIATIVE STAND OUT?

The Feedback Role has meant that gaps in services have been identified that we would otherwise not have been aware of. The role has also supported a positive culture change where asking for feedback is part of a person's care journey. Neurodivergent people are now able to share their experience directly and we are able to listen and respond. It's also important to share and celebrate what's working well and over the last 12 months over 60% of people told us something positive about their experience of our services. Through the role, people have indicated that their queries and concerns may have been left unresolved, and that this process and personal approach, has made it easier for them to give feedback, raise concerns and/or complain.

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## Cheshire and Wirral Partnership NHS Foundation Trust Using data to enhance person-centred care through expert-led collaboratives in the North West

### Category

Measuring, Reporting and Acting - Using Insight for Improvement



### ORGANISATION DESCRIPTION

Cheshire and Wirral Partnership NHS Foundation Trust's (CWP) is the Lead Provider for EmpowerED Adult Eating Disorders Provider Collaborative North West and Level Up, Cheshire and Merseyside, Young People and Families Provider Collaborative. The LPCs put Experts by Experience at the centre of all core decision making processes across the region, ensuring a consistent patient centred approach is adopted by all NHS and Independent Sector Providers in the collaborative reducing variations in care and driving innovation.

### SUMMARY

EmpowerED Adult Eating Disorders Lead Provider Collaborative North West and Level Up, Cheshire and Merseyside, Young People and Families Lead Provider Collaborative (LPCs), integrates specialised mental health services to enhance care for the communities we serve. The collaborative brings together NHS Providers, Independent Sector Providers and Expert by Experience and focuses on comprehensive, data-informed care pathways, emphasising community treatment and minimising inpatient admissions. The LPCs innovative approach includes shared policies, rigorous performance reviews, and extensive training programs, resulting in improved early diagnosis and consistent care across the region.

This collaboration fosters efficiency, reduces costs, and enhances patient experiences through integrated, patient-centred care. Starting with the Expert by Experience forum, Experts come together regularly to identify priorities and work together to see where improvements can be made throughout the whole patient journey. Representatives from the forum have a permanent place at clinical delivery groups and partnership boards, holding the LPCs to account and ensuring that the priorities, vision and innovations from the forum are at the centre of all decision making. This transformative approach to mental health services breaks down the barriers between care providers by harnessing the power of diverse stakeholders to deliver, patient centred care.

### IMPACT & RESULTS ACHIEVED

Over the last 12 months EmpowerED and Level Up have had significant success with working with several providers improving the overall patient journey. For example, for EmpowerED: Eating Disorder services across the Pathway are more data informed. EmpowerED routinely analyses data to understand issues such as how length of stay varies by comorbidity, how admission rates vary under different community teams, what clinical or demographic factors are associated with recurring admissions.

For example, for Level Up: To ensure there was understanding across nine places and to reduce unwarranted variation a SBAR report (Situation, Background, Assessment, Recommendations) was developed. Over 800 SBARs were submitted for consideration at Gateway meetings.

### WHAT MAKES THIS INITIATIVE STAND OUT?

Robust Expert by Experience programmes: The establishment of our Experts by Experience (EbE) programmes, set up a platform for Experts by Experience and their families to share their lived experiences and contribute to service development. In addition to the EbE programme the LPCs have set up an Ambassadors and Community Champions Program that actively recruits people from the community to promote adult health, wellbeing, and family/carer support.

The value and efficiency of the LPCs for EmpowerED includes: The establishment of a rigorous process for performance review and monitoring. Implementation of the Patient Assessment Tool (PAT) has improved efficiency by providing assurance that all patients are identified and monitored appropriately. And for Level Up: Children and adolescent inpatient services are amongst the highest costs in the NHS, by reducing admissions and reducing length of stay where appropriate Ancora CARE provides significant value for money which represents and an approximate saving of £700k.

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## Cheshire and Wirral Partnership NHS Foundation Trust The inclusion of Healthy Lifestyle Coaches within an intensive community mental health rehabilitation service

### Category

Partnership Working to Improve the Experience



### ORGANISATION DESCRIPTION

Cheshire and Wirral Partnership NHS Foundation Trust provides health care services that include mental health, learning disability, community physical health and all-age disability care. Services are offered across Wirral and Cheshire, as well as Trafford, Warrington, Bolton, Halton and Liverpool. We also provide specialist services for the North West as a whole. The Mental Health Intensive Support Team (MhIST) is an intensive community rehabilitation service based across Cheshire (West and East) and Wirral.

### SUMMARY

Physical ill health is a leading cause of reduced life expectancy in those experiencing complex and severe mental health difficulties. The Mental Health Intensive Support Team (MhIST), in collaboration with Active Cheshire, set out to create a new provision within our community rehabilitation service that proactively aims to engage individuals with physical activity and health promoting interventions. This provision involves embedding permanent Healthy Lifestyle Coach (HLC) roles within each of our three locality multi-disciplinary teams across the service footprint.

The inclusion of the HLC as a core aspect of the service provision has enabled the service to offer more frequent and consistent physical health checks, make more links with community physical health providers and offer more dedicated physical wellbeing intervention that serves to support and improve the overall physical health (and subsequently mental health) of those accessing our care. Overall, patient feedback has reflected the value that this role offers to our service, and though changes might sometimes be small, the impact on the individual has the potential to be profound. Alongside positive change for the patients, we're also noticing changes in the team culture, with the HLCs serving as positive role models across the staffing team.

### IMPACT & RESULTS ACHIEVED

The impact of the Healthy Lifestyle Coach role has been evident across both the patient cohort and staffing team. Individually, we have been able to measure changes in physical health markers, including weight, BMI (58% of those sampled experienced a reduction in their BMI score), blood pressure and even in blood test results. We have also noted positive changes in activity levels (69% of those sampled increased or maintained their activity levels), diet and use of substances such as alcohol and smoking. Additionally, we have noted the HLCs having success in engaging with individuals who are otherwise struggling to remain engaged with the team. The support to access exercise and physical activity as a meaningful intervention has proven to be invaluable and, for some, has been the gateway to increased overall engagement with rehabilitation focused interventions. The project has been able to offer funding to support access and engagement with a variety of health promoting activities that our patients may not otherwise have had the means or resources to access. From a team perspective, the initiative has enabled the teams to access standing desks to encourage more frequent standing and movement. The teams have also been encouraged to engage in activities, such as lunch time walks, as a means of promoting physical activity and ensuring a break is taken.

### WHAT MAKES THIS INITIATIVE STAND OUT?

The project has championed cross sector partnership with the aim of reducing physical health disparity in those with complex mental health needs. The partnership with Active Cheshire has provided resource and knowledge and their extensive community connections have offered a valuable head start to the HLCs. The HLC role is unique within a mental health rehabilitation service, and a role that, based on our network, isn't commonplace within mental health services in general. This is despite the compelling evidence relating to the impact of physical ill-health in those with a complex and severe mental health needs. Another key element of success has been the passion of those driving the project forward to positively impact the physical health and overall quality of life of the people we support.

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## Cheshire and Wirral Partnership NHS Foundation Trust EmpowerED Experts by Experience Forum

### Category

Patient Contribution – Group or organisation



ADULT EATING DISORDERS  
PROVIDER COLLABORATIVE  
NORTH WEST  
[www.empowerednw.nhs.uk](http://www.empowerednw.nhs.uk)

### ABOUT NOMINEE

Cheshire and Wirral Partnership NHS Foundation Trust's (CWP) is the Lead Provider for EmpowerED Adult Eating Disorders Provider Collaborative North West. The LPC put Experts by Experience at the centre of all core decision making processes across the region, ensuring a consistent patient centred approach is adopted by all NHS and Independent Sector Providers in the collaborative reducing variations in care and driving innovation.

EmpowerED is made up of CWP, Greater Manchester Mental Health NHS FT, Lancashire and South Cumbria NHS FT, Mersey Care NHS FT, and Priory Health Care.

### SUMMARY

The EmpowerED Expert by Experience Forum deserves special recognition because they use their platform to drive improvements to services across the North West for people who access services, their families and carers. They have been key to the success and implementation of several projects, and continue to challenge and influence at every opportunity. Below are some testimonials from our Experts by Experience:

EbE 1: "Thank you so much for all the support and for enabling me to take part. I've never in my whole life been someone to put myself forward for public speaking things! but knowing you were there with us just makes SUCH a difference – I keep surprising myself with what I can do... with a little help from you and the team anyway. Huge THANK YOU! Have a great day"

EbE 2: "It really is empowering to be a part of the forum and I love doing the work we do because it feels like we are making progress and making real change. Everything I say, feels like it's listened to and is taken forward and taken seriously."

EbE 3: "For most of my life, I have never really felt truly empowered. From a very young age, I knew that I was "wrong". Whether it be doctors, my family, or my peers – there was always something to be said about my body and my appearance that cemented early on in my mind that I needed to fix it. Thus began a lifelong dive into crash diets, restriction, bingeing, and a never-ending fear of food.

Internally, I took on the negative voices I was hearing all around me until I could no longer distinguish between them and me. I became my biggest critic, my cruellest bully, and a harsh judge – handing down sentences to myself that were impossible to fulfil. I am more than my diagnosis, I am more than my appearance, I am EmpowerED."

### AT WORK

What makes the The EmpowerED Experts by Experience Forum stand out is their ability to influence and challenges partners from across the North West ensuring a consistent adoption of the Lead Provider Collaborative model aimed at positively improving the patient journey, experience, and ensuring better outcomes.

Clinical Delivery Groups for EmpowerED are held every six weeks and are comprised of senior clinicians from inpatients and community teams, and Experts by Experience from the EmpowerED Forum. The groups conduct comprehensive reviews of the entire patient pathway and are central to identifying areas for improvement and generating innovative clinical models and delivery strategies.

The groups also provided an open platform for all involved to share learning, raise concerns, and collaborate on initiatives aimed at improving the pathway for everyone across the region. This collaborative and inclusive approach ensured the initiative was able to effectively address and respond to the diverse needs and experiences of those within the mental health care system.

All of Experts by Experience from the EmpowerED Forum are either people with lived experience of services, their families or carers. Members of the forum do not need any qualifications to join and are given optional free training if required.

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## Cheshire and Wirral Partnership NHS Foundation Trust Our Volunteer to Career (VtC) project

### Category

Staff Engagement and Improving Staff Experience & Strengthening the Foundation



### ORGANISATION DESCRIPTION

Cheshire and Wirral Partnership NHS Foundation Trust (CWP), established in 2002 and a Foundation Trust since 2007, provides mental health, substance misuse, learning disability, community physical health services, and all-age disability care, including three GP surgeries.

Collaborating with various partners offering specialist services in several areas, serving over a million people. CWP has 14,500 Foundation Trust Members and employs 4,000 staff across 62 sites in Cheshire and Merseyside.

### SUMMARY

The "Volunteer to Career"(VtC) project has significantly enhanced patient care by integrating volunteers into our healthcare environment. This initiative supports key strategic areas such as clinical health and care leadership, bolstering our organisational culture. Securing a competitive grant in January 2023 enabled us to pilot the VtC programme at Bowmere Hospital, validating its effectiveness.

Over 12 months, we recruited and trained 12 volunteers who dedicated three hours weekly to face-to-face roles. This commitment included mandatory training provided by our trust, ensuring that volunteers were well-prepared to support our staff and patients.

By working alongside our existing staff, these volunteers not only gained valuable insights into healthcare roles but also contributed to a more supportive and enriching environment for both patients and healthcare providers. This initiative addresses staffing challenges, improves patient experience, and provides career development opportunities in healthcare. The program's success is evident in positive feedback from volunteers and staff, alongside measurable enhancements in care and volunteer satisfaction.

### IMPACT & RESULTS ACHIEVED

Our collaboration with Helpforce involved an 'insight & impact' evaluation using quarterly surveys and reports to assess the impact of volunteering on health outcomes and workforce integration. This evaluation focused on corporate attitudes toward volunteering, volunteer career progression, and frontline staff perceptions, strengthening our volunteer programme's foundation.

A key achievement was transitioning volunteers into employment: 8 out of 12 pilot participants secured paid roles in health and care, with 1 continuing to volunteer and another starting university studies in a relevant field. This provided valuable healthcare experience, addressing workforce challenges and benefiting the sector. VtC also increased volunteer visibility within our organisation, showcasing their contributions to patient care and staff support.

Shifting perceptions of volunteering as a strategic function addressing critical needs and enhancing service delivery, strengthening our volunteer management and integration. Volunteers provided non-clinical support such as interacting with patients, participating in therapeutic activities, and assisting with administrative tasks. Allowing clinical staff to focus on core duties, improving patient outcomes and care experiences. Staff satisfaction and workload also improved, with volunteers alleviating pressures on clinical teams and enhancing support and morale. Over six months, 12 volunteers collectively contributed 494.65 hours, supporting over 570 patients and 250 staff members. The programme generated a value exceeding £260,000 for the Trust, highlighting its financial and qualitative benefits. Volunteers reported feeling valued and supported, enhancing their satisfaction and career progression.

### WHAT MAKES THIS INITIATIVE STAND OUT?

We believe VtC initiative stands out due to several successful key elements which collectively distinguish the VtC initiative, making it a model programme in healthcare volunteer engagement and enhancing patient care including: Identifying need (creating valuable and interesting roles that meet the workforce by liaising with our internal stake holders); Recruitment (to attract a diverse pool of candidates who are passionate about contributing to patient care, eager to learn and aspire to work in a NHS/ health care sector).

### Contact Details

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## Cygnnet Health Care Social Hubs

### Category

Environment of Care



### ORGANISATION DESCRIPTION

Cygnnet offers a wide range of health and social care services for young people and adults with mental health needs, acquired brain injuries, eating disorders, autism and learning disabilities. Our expert and highly dedicated care team of 11,500 employees support 7,500 individuals each year across 150 services to consistently make a positive difference to their lives. We maintain a good relationship with our quality regulators and undergo regular inspections, with 81% of our health care services rated 'Good' or 'Outstanding'.

### SUMMARY

Co-production is an integral part of the culture at Cygnnet and 14 of our services have transformed previously unused spaces or plain meeting rooms into fantastic new interactive spaces, called social hubs. The stunning makeover of each hub is done in just one day as a fully collaborative project involving staff and service users adding (games consoles, arcade machines, adjustable sensory lighting and much more to create a space for service users to relax. On their regular visits to services, our Experts by Experience (those with lived experience of inpatient settings) have worked with service users and management to identify the items for the proposed hubs, which can include everything from a full gaming suite, arcade machines and sensory lighting to an aromatherapy diffuser, bean bags and recording studio equipment.

From the outset, service users are placed at the heart of each project, joining staff on local shopping trips to be directly involved in choosing the items for the social hub at their service, giving them a further sense of ownership of the project. The social hubs have improved engagement between patients, as well as staff and patients, reducing incidents and boosting morale.

### IMPACT & RESULTS ACHIEVED

We strive to make our services "homes away from homes" and the social hubs have been hugely beneficial for the service users, reducing incidents and providing them with a non-clinical, homely environment to enhance off-ward activities. The importance of the built environment in mental health recovery cannot be overstated. We have seen how creating non-clinical, homely spaces can transform the experience of both service users and staff. These hubs promote engagement, support recovery, and foster a sense of community, making a tangible difference in the lives of those who use them.

The feedback from service users has been overwhelmingly positive. They have expressed their delight with the space, noting how it provides a much-needed escape from the ward environment and facilitates social interaction and relaxation. The impact of social hubs extends beyond service users to include staff members who have expressed gratitude for having such spaces to engage with service users. The relaxed atmosphere of the hubs fosters better therapeutic relationships, allowing staff to interact with patients in a more informal and enjoyable setting. Staff have expressed how the hubs are a perfect solution in being able to make wards more manageable on days that can be particularly busy or challenging, by enabling some service users to be able to be supported off the ward whilst others who need more support at any given time being able to be supported on the ward. Services with social hubs have reported reductions in everything from incidents to complaints, all whilst seeing improvements in both service user and staff experiences.

### WHAT MAKES THIS INITIATIVE STAND OUT?

The USP of these social hubs is they have showcased co-production in its purest form. One of the core principles behind social hubs is to improve engagement between service users and staff. For instance, rather than spending time in a corridor watching a patient sleep during close observations, staff can engage with patients in the social hubs, playing games and discussing recovery goals.

This shift not only benefits the service users but also provides staff with a more stimulating and rewarding work environment. This contributes to reductions in burnout and an increase in job satisfaction among staff members.

### Contact Details

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## Dementia UK

### Admiral Nurse Helpline and Clinics - improving the experience for families contacting the service

#### Category

Measuring, Reporting and Acting - Using Insight for Improvement



#### ORGANISATION DESCRIPTION

Dementia UK is the specialist dementia nurse charity. Our nurses, called Admiral Nurses, offer life-changing support for families affected by dementia. As dementia specialists, they help families manage complex needs, considering the person living with dementia and the people around them.

They provide tailored clinical advice and psychological support; advise people about benefits and financial issues; support families in their caring role; and help build links with other health and care professionals. Admiral Nurses work in the community, in hospitals, on the Dementia Helpline, and in virtual clinics. They are continually supported and developed by Dementia UK. For families facing dementia, they can be a lifeline.

#### SUMMARY

Several helplines offer support to those affected by dementia, ours is unique with free access to qualified, specialist nurses. Demand has grown recently, with it a noticeable increase in negative feedback about difficulties experienced in accessing the telephone helpline and a long waiting period for a virtual clinic appointment. The leadership team led on a project to identify the root cause of this and changes in practice that could improve access for all. Discussions were held with the team of nurses, those who expressed dissatisfaction with the service and with external providers of the telephone and booking system being used.

A 5 why's analysis was used to identify key areas for improvement and a comprehensive PDSA cycle of planned monthly changes was implemented. Baseline data was gathered and reviewed, focusing on the number of contacts being made and the percentage of which answered immediately. Changes were implemented each month, and subsequent data reviewed. Improvements in the call answer rate were identified from which a group of nurses supporting the helpline were able to identify KPI's for the team. This enabled the success of the changes made to be measured and shared with the charity.

#### IMPACT & RESULTS ACHIEVED

Each month there has been a steady increase in the call answer rate from the initial 8% to the current level of 72%. This has meant that less return calls are required and so a reduction in the number of outgoing calls being made with significant cost savings to the charity. The change in processes and individual roles for the team of Admiral Nurses has led to improved staff morale. The reduction of return calls needed, and cases being closed without contact being made has led to increased job satisfaction as they feel more able to provide the specialist support families require immediately.

The increased availability of Admiral Nurses has enabled the addition of an extra twelve virtual appointments per day and so reduced the waiting time from 2 weeks to an average of 3 days. For the first time, appointments are often available on the same day. Positive feedback received from beneficiaries has been captured and shared with the team, which again has helped boost morale. The introduction of agreed KPI's has enabled the Admiral Nurses to identify areas for self-improvement and has led to more structure during supervisions sessions which the team report is helpful. Being able to capture this data and the improvements made has enabled the leadership team to share our success within the wider charity and board of governors, highlighting the excellent support Admiral Nurses provide through the helpline and clinic service.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

The initiative stands out due to the degree of collaborative working and the benefit of having a strong leadership team. By responding quickly and effectively to feedback from beneficiaries, the team were able to take prompt action to concerns raised. Involving the team as a whole and seeking suggestions from the Admiral Nurses working on the helpline and clinic service has enable changes to be adapted smoothly. The unforeseen benefits to staff morale and cost effectiveness, along with the success in achieving what we set out to do, has made this a highly successful project.

#### Contact Details

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## Derbyshire Community Health Services Patient Experience Manager of the Year

### Category

Patient Experience Manager/Professional of the Year



**Derbyshire Community  
Health Services**  
NHS Foundation Trust

### ABOUT NOMINEE

My name is Laura Spencer and I work in the Patient Experience Team for Derbyshire Community Health Services (DCHS), as a Patient Experience Co-Ordinator. At the time of writing we are team of 8 which includes myself, x2 Patient Experience Facilitators, x1 Senior Patient Experience Support Officer, x2 Patient Experience Support Officer's and x 1 Patient Involvement and Volunteering Officer, who is Michelle Fisher and Michelle has supported me in compiling this nomination.

Our team is managed by Deborah Hall, Head of Patient Involvement and Experience, for whom this nomination is for. I have worked with Deborah for 6 years, 3 years within another Trust with her as my line manager and 3 years, so far, as my line manager at DCHS.

### SUMMARY

Deborah is dedicated to her team, championing a compassionate leadership approach and she has an open door policy, making herself always accessible. Deborah includes us all in decision making around service delivery/change, where appropriate and Deborah encourages the team to contribute to all aspects of work giving everyone opportunity to be involved.

We have a yearly team away day which Deborah organises and every month we have a team day in the office where Deborah bakes yummy goods for us, from cheesecakes to brownies! These are just some quotes from our team for Deborah that were provided for her Appraisal in 2022/2023:

"I have never felt that I can't approach you with anything work related or personal and I am thankful and grateful for this"

"I absolutely love working with you. We have built a great working relationship based on trust and respect. You are honest and always consider and ask for my opinions."

"It has been my pleasure and privilege to continue working alongside my manager Deborah Hall over the past year...Deborah always considers the well-being of all of our team as a priority. She gives us the opportunity of discussion with her no matter how busy she is whether it be surrounding personal issues or work-related."

Deborah lives and breathes Patient Experience and was made to do this role. The patient/carer/complainant is always at the centre of her actions and she will always advocate for them.

Deborah was invited to speak at the Parliamentary Health Service Ombudsman Board Meeting and the feedback she received was "Exemplary an inspiration and if more people were like you, we wouldn't exist" This statement alone sums up Deborah's commitment to patient Experience and what an incredible person she is and why she is a worthy nominee for Patient Experience Manager of the Year.

### AT WORK

Deborah has worked in Healthcare for 30 years, starting her journey as an Auxiliary Nurse. Deborah has worked in many disciplines and progressed into Involvement and Experience 15 years ago. Deborah has continuously worked to improve patient and carer experiences by promoting a culture that views complaints and feedback as pivotal for improvement.

Deborah treats people with respect and kindness and tries to build a rapport with people by sharing some personal information around common interests. Deborah is a naturally friendly person and she has a wonderful sense of humour and this comes through in all that she does.

It is a pleasure to be in meetings with Deborah, particularly if Deborah is chairing as both her natural personality and her desire to advocate for patients/carers and staff, shines through. Deborah's sheer desire and passion for Patient Experience is what makes her stand out. Deborah's contributions have been recognised by colleagues across the Trust, with positive feedback and executive-level acknowledgment for improvements in complaints management.

Deborah has established good working relationships with many colleagues across the Trust and externally.

### Contact Details

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## Derbyshire Community Healthcare Worry Catcher service

### Category

Making Complaints Count



**Derbyshire Community  
Health Services**  
NHS Foundation Trust

### ORGANISATION DESCRIPTION

Derbyshire Community Health Services NHS Foundation Trust (DCHST) serves a patient population of approximately 1.1 million across a wide range of services. These are delivered from multiple sites including community hospitals and health centres across Derbyshire, with nearly 1.5 million patient contacts each year.

The Trust employs approximately 4,300 staff, making it one of the largest providers of specialist community health services in the country.

### SUMMARY

Our aim is to continuously improve how we handle complaints and enhance the overall experience for patients and carers, both for those who raise concerns and those who are the subject of them. Patient care is central to our mission, and we are dedicated to enhancing patient experiences. We acknowledge that we don't always get everything right. It's crucial to us that people feel comfortable raising their concerns and complaints, and that they know their feedback is valued and taken seriously.

One way we're achieving this is through our Worry Catcher sessions. Throughout the year, our team visits the six community hospital inpatient wards on a rotating basis. Our presence provides a visual cue and an opportunity for patients, their families, or caregivers to express any worries or concerns they may have. The Worry Catcher initiative exemplifies innovative thinking, strong leadership, measurable outcomes, and sustainable impact.

It successfully involves and includes a wide range of stakeholders, making a profound difference in patient experience and setting a new standard for discharge planning practices. Its potential for transferability and dissemination ensures that this initiative can benefit a broader audience, further enhancing its value and impact.

### IMPACT & RESULTS ACHIEVED

The Worry Catcher sessions have made positive impact on our wards. By focusing on patient and family concerns related to discharge planning, we have enhanced satisfaction, reduced anxiety, improved discharge outcomes, and fostered better communication and support among staff.

These outcomes demonstrate the value of providing a dedicated, empathetic, and supportive platform for addressing patient and family worries. A summary of each Worry Catcher Session is reported through our governance structure. These sessions have been positively received by inpatient wards and across the Trust.

The worry catcher sessions allow someone impartial to gauge in a way that allows the patients and their loved ones to give feedback. Even just simple feedback, like 'I feel well cared for' and 'the food is good' help us to understand that the care we give on the ward is right.

To evaluate the effectiveness of Worry Catcher sessions, we will consider tracking the following metrics: Surveys and feedback forms to measure satisfaction levels before and after implementing Worry Catcher sessions; Monitor the number of complaints related to discharge processes and compare them before and after the implementation of Worry Catcher session; Track readmission rates as an indicator of whether patients felt adequately prepared for discharge; Measure how many patients and families are utilising the Worry Catcher sessions.

### WHAT MAKES THIS INITIATIVE STAND OUT?

Having a dedicated team present on the ward allows for immediate attention to patient and family concerns. This proactive approach can prevent issues from escalating into formal complaints. When worries are caught and addressed promptly, it reduces the likelihood of dissatisfaction growing into significant grievances. By regularly engaging with patients and families through "Worry Catcher" sessions, we can identify recurring issues or systemic problems within the ward.

This early identification allows for timely interventions and improvements, potentially enhancing the quality of care across the board. These sessions can also support staff by alleviating the pressure of handling complaints. Knowing that a dedicated team is available to manage and resolve concerns allows clinical staff to focus more on their primary responsibilities, improving job satisfaction and performance.

### Contact Details

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### Derry Well Women Cancer Connected Communities West

#### Category

Cancer Experience of Care Award & Engaging and  
Championing the Public



#### ORGANISATION DESCRIPTION

Derry Well Women (DWW), the lead partner of Cancer Connected Communities West (CCCW), was established in 1988 as a not-for-profit centre which offers health and social care services to women of all ages. DWW offer a range of cancer support services such as counselling, complementary therapies, a support group and wellbeing programmes and workshops to meet the emotional, physical, practical, and spiritual needs of those affected by cancer.

The partnership includes Action Cancer, Advice Northwest, Cancer Focus, Care for Cancer, and Supported WE Live Life (SWELL) and DWW (lead partner). The Western Health and Social Care Trust (WHSCT) is also a partner although non-beneficiary of funding.

#### SUMMARY

This project is the first of its kind in Northern-Ireland. CCCW brought together 6 charities to connect people affected by cancer to each other, to support in their community and to those who deliver cancer services so they could use their voice to influence change. CCCW followed an original model that had never been used in a cancer context before with a dedicated project manager and external evaluator. CCCW supported and engaged with over 2000 people affected by cancer (including patients, families, cancer workforce and marginalised groups such as rural communities, LGBTQ+, travelling community, learning and physical disabilities etc.) who raised areas for improvement such as mental health, rurality, palliative care. Various organisations addressed these themes via workshops and their change commitments which were publicly presented and documented. Progress of implementation will be tracked and fed back to participants. Heather Monteverde, DOH, said "this methodology could and should be used... not only in health and social care but across other sectors". Dr Frawley WHSCT chair said CCCW showcases "best practice" of co-production across sectors with lived experience in the lead. NI Health Minister Nesbitt said CCCW "set a benchmark" for co-production in cancer services.

#### IMPACT & RESULTS ACHIEVED

The project hired an external evaluator who met regularly with stakeholders and attended key events. Programmes delivered by the partnership were evaluated using methods such as Core10. Feedback from service users occurred frequently via evaluation forms - one service user wrote "this programme is as vital as chemotherapy." Evaluation forms were collected at the end of each workshop - over 99% said they enjoyed it and wanted to remain engaged. The final change commitments negotiated by service users along with cancer care providers and service planners, will be drafted into a contract to be tracked and monitored.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

The unique model used, the diversity of the partnership, and the bravery of all the service users who engaged, has been the main contributing success factors to this project and enabled us to support and engage with over 2000 people who have been affected by cancer living across the WHSCT geography over the last three years. Those with lived experience determined the agenda. Service users trusted their local community charity and therefore being a part of something bigger wasn't daunting. Through the funding, partners were able to offer much needed support to their service users which allowed them to nurture and empower those who wouldn't normally want to share their story or use their voice for change - watching their journey from attending a programme to sharing their story at a workshop was inspiring. From the Trusts perspective, they were now engaging in active feedback from over 2000 people as opposed to the 6 people who sat on the Cancer Locality Group and most importantly, feedback from people who wouldn't have shared their experiences and insights had it not been for the process of the model. We developed a positive relationship with our partners at the WHSCT which was vital and influenced other organisations to engage (some without health on their agenda i.e. Department for Infrastructure). They were open throughout to listening with a willingness to changing (and some stories were hard to hear).

#### Contact Details

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## East London NHS Foundation Trust

### East London NHS Foundation Trust Estates - Leading the way in patient contribution

#### Category

Patient Contribution – Group or organisation



#### ABOUT NOMINEE

East London NHS Foundation Trust (ELFT) is a leading mental health, community, and primary care Trust, dedicated to delivering exceptional services to users of care both on and off wards. Our estate plays a pivotal role in fostering patient recovery and well-being, serving as a cornerstone of our holistic approach to mental health care. Our objective was to increase patient contribution & engagement - as Estates services typically lack the patient voice in the design and delivery of its services. We believe that our Estates People Participation Programme is a leader of its kind and have recently been awarded Estates and Facilities Team of the Year at the Design in Mental Health Awards

#### SUMMARY

The Estates and Facilities team at ELFT is deserving of special recognition for their exceptional contributions to patient care. They stand at the forefront of estates led innovation and excellence in mental health, primary care and community care and patient engagement. Their commitment to involving service users in coproduction, fostering engagement and prioritising transparency reflects their dedication to delivering patient-centred care and imbedding patient contribution in all that they do.

Their collaborative culture sets new benchmarks for excellence in the field. By prioritising the well-being of service users and continuously striving for improvement, the team exemplifies the highest standards of care and service - and they are seeking to transfer this knowledge across the NHS Estates & Facilities sector. This team is not only transforming the physical environment of mental health care but also fundamentally changing the way service users engage with their care and contribute to estates service design and delivery. Their dedication, innovation, and compassion make them a deserving candidate for special recognition. The team would be honoured to be recognised by the PEN Awards - the leading awards for patient experience

#### AT WORK

The ELFT Estates and Facilities team stands out from other E&F Teams by their commitment to delivering consistent, high-quality service that exceeds the typical NHS estates expectations. They understand that due to the constraints provided by funding mechanisms and the large NHS maintenance backlog - they could only do better by truly developing a programme of patient contribution to better understand the voice of the patient and prioritise efforts accordingly.

**Consistency and Quality:** The team provides consistent, high-quality service by prioritising patient-centred estates services and ensuring that the environments and services that are created and maintained are conducive to supporting the recovery journey and patient well-being. This is achieved through innovative initiatives developed over the last 12 months - such as creating and recruiting a dedicated People Participation lead - who has been instrumental in ensuring that our patient contribution activities are consistent, robust, transparent and of high quality.

**What Makes ELFT Estates Stand Out:** The standout quality lies in their innovative approach to integrating service users into the core of their operations. This involvement includes:

Active participation in coproduction and codesign of services and policies.

Inclusion of service users in Engineering Safety Groups - with relevant training.

Collaboration with contractors and supply chain partners - service users attending contractor interviews.

These efforts go above and beyond typical estates expectations, setting new benchmarks for excellence in mental health, primary and community care estates management. The dedication, innovation, and compassion of the ELFT Estates team ensures that ELFT remains at the forefront of providing exceptional care environments that truly support patient recovery and well-being.

#### Contact Details

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## Enable Leisure and Culture Macmillan Community Cancer Link Worker

### Category

Cancer Experience of Care Award



### ORGANISATION DESCRIPTION

Enable is a charity, working in partnership with councils, charities and other organisations to deliver health, leisure and community services. Our high-quality service offerings range from designing and leading community based health and wellbeing programmes; managing parks and green spaces; managing leisure facilities; and staging innovative public and private events that bring the community together.

### SUMMARY

The Macmillan Community Cancer Link Worker (MCCLW) service provides free emotional support for people living with and beyond cancer (PLWBC) and their carers, families, and friends. It particularly supports those facing health inequalities, social deprivation, and individuals from Black and Minority Ethnic (BME) communities. Research indicates that people in deprived areas are more likely to be diagnosed with cancer at a later stage and are less likely to access cancer services.

BME groups experience higher cancer incidence and mortality rates. In South West London, there is a notable correlation between PLWBC, deprivation, and high percentages of BME communities.

The MCCLW service addresses these health disparities by offering targeted support to vulnerable populations. Data from the 2022 Cancer Patient Experience Survey (CPES) shows that patients from these groups often report poorer outcomes. The MCCLW service bridges this gap by providing personalised support and resources tailored to the unique needs of cancer patients from these communities.

This service exemplifies effective collaboration between healthcare providers and social prescribing. Specialist cancer link workers deliver personalised care, engage with BME communities, and enhance the social prescribing workforce. This holistic approach ensures patients receive comprehensive support that addresses their social, emotional, and practical needs.

### IMPACT & RESULTS ACHIEVED

The MCCLW service has significantly benefited cancer patients and healthcare providers by improving patient well-being, increasing service awareness, and addressing health inequalities. Outcomes include: significant reductions in concerns and improvements in overall well-being; increased service uptake and high satisfaction rates; more productive use of clinical time, allowing better medical care; support for diverse clients addressing socio-economic and cultural disparities. This approach ensures patients receive personalized, holistic support, addressing their social, emotional, and practical needs.

### WHAT MAKES THIS INITIATIVE STAND OUT?

**Specialist Cancer Link Workers:** Provide personalized cancer care across Wandsworth, Merton, and Croydon, addressing the unique psychosocial and emotional needs of patients.

**Holistic Care:** Deliver comprehensive support addressing physical, mental, and social needs, crucial for overall wellbeing and reducing health inequalities. **Community Engagement:** Actively engage BAME communities, raising awareness and providing tailored support to bridge care gaps.

**Integration with Community Resources:** Collaborate with community organizations and healthcare providers for well-rounded support, including referrals to support groups and practical assistance.

Key Elements for Success:

- **High Referral Rates:** Significant referrals demonstrate high demand and trust.
- **Positive Feedback:** Excellent client and provider feedback highlights effectiveness.
- **Improved Wellbeing:** MYCaW data shows reduced concerns and improved wellbeing.
- **Support for Healthcare Professionals:** Frees clinicians to focus on medical care.
- **Comprehensive Training:** Ensures specialized, knowledgeable support.

These features make the MCCLW Service a successful, impactful initiative for cancer support.

### Contact Details

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## Haemochromatosis UK

### Mylron+ app : enabling people with genetic haemochromatosis live well

#### Category

Innovative Use of Technology, Social and Digital Media

**Haemochromatosis • UK** +Fe  
Helping people live with iron overload

#### ORGANISATION DESCRIPTION

Haemochromatosis UK is a patient-led charity, founded in 1990. We provide support, information and advice to people affected by genetic haemochromatosis, the UK's most common undiagnosed genetic condition. We provide education to healthcare practitioners and stimulate research into this common, but commonly overlooked condition.

We have 7 mostly part-time staff (4.5 FTE) including 2 specialist nurses who operate our patient-facing email/phone helplines. We are supported by 173 volunteers who provide 1-2-1 peer support to newly diagnosed patients and the 12,000 people in our Facebook support group. We are based in rural Lincolnshire.

#### SUMMARY

Just 12 months post-launch, Mylron+ has become the de facto digital support for GH patients, largely due to our inclusive, collaborative design process, led by GH patients and involving a wide range of clinical and community stakeholders to address unmet, community-observed needs.

The app is already in use with 20% of the UK GH community and is being rolled out by dozens of NHS venesection services. The app's Alice chatbot uses advanced AI to provide accurate real-time 24x7 natural language support to patients, helping us scale with the doubling of demand for our support since Christmas 2023.

Alice has been trained using our clinically approved resources to provide trustworthy advice about GH as an alternative to "Dr Google" (which often frightens people unnecessarily). The app has led to better treatment compliance, fewer unnecessary clinical appointments & better patient education/support.

The core dataset is starting to be used for medical research to further improve patient outcomes. We've shared our learnings with the NHS/other charities seeking to successfully deliver similar support for people with other conditions. It was delivered on time/on budget, iteratively & funded by public donors. See <https://www.haemochromatosis.org.uk/app>

#### IMPACT & RESULTS ACHIEVED

Our initial aim was to have 500 app users after 12 months, focused on the UK. The app was launched in June 2023. After the first 12 months, it is now in use in over 20 countries, by almost 5,000 patients. Currently, an additional 40-50 patients install the app every day. Recent, representative patient feedback: "Just opened the app and started adding my details. Looks fabulous.

It will help me understand and help others understand and move forward. Brilliant.", "Essential app for monitoring your iron overload - The app is incredibly useful, for planning treatments, documenting your iron levels and being able to reach out to a qualified professional when needed. Since diagnosis (through the charity that created the app as my GP was useless), I've been able to track my iron levels, keep note of my appointments, and get to a manageable level now. Thank you!"

#### WHAT MAKES THIS INITIATIVE STAND OUT?

We think this initiative is notable for a handful of reasons:

- Genuine co-design and collaboration to address real, unmet patient needs. Unlike many clinical IT projects, we started with the real, unmet patient needs by actively engaging with the GH community and listening to their feedback. We did this before we started, during the design of the app, post-development and pre-launch.
- The Mylron+ app was delivered on-time, on-budget. Most IT projects over run on cost and/or delivery timescales. We avoided this by putting a lot of work in upfront to develop cheap sketch-based prototypes, before a clickable prototype was created to assess usability and functionality.
- The app provides a platform for further patient-advocacy and research. A key aim of the app was not just to provide something useful for patients, but to develop a unique dataset that could be used for further clinical research.

#### Contact Details

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## Hanley Consulting

### Telephony call flow audit and data driven assessment at Tudor Lodge Health Centre

#### Category

Innovative Use of Technology, Social and Digital Media



#### ORGANISATION DESCRIPTION

Leveraging the power of technology, Hanley Consulting specialises in transforming healthcare by streamlining processes, enhancing patient-provider communication and enabling data-driven decisions to deliver more efficient, accessible, and personalised care.

As a key tool in their resource bank, Hanley Consulting has developed the EDATT (Enhanced Digital Access Through Telephony) Digital Assistant, a cutting-edge patient-facing chatbot for Primary Care services.

The EDATT Assistant revolutionises patient care navigation and support within primary care.

Using automated conversation, EDATT automates care navigation, provides educational resources, and allows patients to access their medical records for self-service.

#### SUMMARY

Tudor Lodge Health Centre is a GP surgery in South West London with a patient count of approximately 11,000. Like many surgeries across the country, it was experiencing a number of issues, with demand for appointments outstripping supply and high levels of demand over the telephone, particularly at the key time of the 8am rush. Additionally, 38% of Tudor Lodge patients first spoken language was not English, so any solutions would have to take this into account.

In order to address the issues at the practice, Hanley Consulting undertook a proactive 12-month programme including a full telephony call flow audit and data driven assessment, in addition to a multilingual patient survey to understand patient opinion and sentiment.

Following this in-depth research, Hanley Consulting recommended and implemented a number of patient-centric changes, developed with direct input from Tudor Lodge patients.

This included the use of the EDATT Digital Assistant which resulted in significant improvements for both patients and staff at the practice.

#### IMPACT & RESULTS ACHIEVED

As a result of the changes implemented, the surgery experienced many significant improvements, benefitting both patients and staff.

Some of the outstanding improvements include: total number of inbound calls decreased by 21%, Calls that entered the queue decreased by 23%, the number of missed calls reduced by approximately 65%, calls for appointments dropped by 48%, the number of online prescriptions placed increased by 66% (from 222 to 368 per month), the average call queue time reduced by 50% (from 180 to 90 seconds), Increase in self-referrals.

In addition, patient feedback from a follow-up survey showed: 3 out of 5 patients are still finding it 'very easy' or 'easy' to book an appointment with a GP when needed (patients aged 55 to 64 find it the easiest to book an appointment), almost three-quarters of patients have now used the online appointment booking system, more than half of patients (57%) feel that telephone waiting times have reduced, there has been positive feedback from patients about using the NHS App (which has jumped from 55% to 71% use, and the online appointment booking system from 29% to 57% among patients), 1 in 4 patients have also tried DOT (the practice's online digital assistant, which helps patients with online setup and using the digital tools).

#### WHAT MAKES THIS INITIATIVE STAND OUT?

The approach to Tudor Lodge is distinguished by the unique use of the EDATT Digital Assistant, revolutionising primary care through advanced AI technology.

This initiative stands out for several key reasons, making it a unique and effective solution in the primary care landscape: advanced automation integration, comprehensive care navigation, patient-centric design, 24/7 accessibility, integrated data analytics.

#### Contact Details

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## Healthwatch Birmingham

### Person-centred maternity care for Black African and Black Caribbean women in West Birmingham



#### Category

Engaging and Championing the Public

#### ORGANISATION DESCRIPTION

Healthwatch Birmingham is one of the largest local Healthwatch in the national Healthwatch England network. We have 11 members of staff and over 30 volunteers working to champion the patient voice in a diverse city of over one million people, with high levels of deprivation.

#### SUMMARY

Healthwatch Birmingham believes that listening to patients is essential to successfully improving services, as it often includes new thinking from a different perspective to that of service providers. This is particularly the case for groups such as Black women whose voices are least likely to be heard by the services they use. Healthwatch Birmingham has extensive experience leading projects helping healthcare services in Birmingham to improve involvement and inclusion by engaging with under-represented groups.

Our objectives were to give Black African and Black Caribbean a platform to express their views of maternity and postnatal care in West Birmingham, in order to understand barriers (e.g. discrimination, language, knowledge about services, or faith and cultural needs) that women experienced. These objectives were developed and shared with Sandwell & West Birmingham Hospitals NHS Trust (SWBH), to ensure staff buy-in for making improvements. The project achieved successful outcomes, including hiring additional staff from appropriate ethnic backgrounds and the creation of new roles to gather ongoing feedback from service users, ensuring sustainability. Impact has also extended beyond SWBH, as learning has been disseminated and good practice transferred throughout maternity services in the entire Birmingham and Solihull Integrated Care System (BSOL ICS).

#### IMPACT & RESULTS ACHIEVED

Our investigation showed Black African and Black Caribbean women did not feel their voices were being listened to or respected. SWBH has taken the following actions to tackle the issues we raised in the following areas: capturing and using patient experience, continuity of carer, enhancing the interpreting service, improved access to antenatal classes and enabling women to make choices about birth.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

Although ethnic disparities in maternal health have been acknowledged these have often had little focus on the actual lived experiences of Black women. Putting women's own voices at the centre of the report highlighted disparities in maternal outcomes for women from minority groups. Plans such as the 'Long Term Plan and Better Births – A Five Year Forward View of Maternity Care' had already emphasised the importance of understanding the experiences of seldom heard groups for improving maternal care. MBRRACE reports in 2016, 2018, 2020 demonstrated that despite implementing numerous plans to address inequality in maternity care, change had not taken place. Stillbirths and infant mortality remained higher amongst women from minority ethnic groups: Black women were 40% more likely to experience a miscarriage, five times more likely to die in pregnancy or childbirth, more likely to experience birth without intervention and had higher rates of preterm birth. Black African (18.1%), Pakistani (16.9%) and Black Caribbean (13.2%) women have the highest percentage of still births across Sandwell and West Birmingham.

The highest number of still births were found in the following postcodes: B66 and B67 (16%); B70 and B71 (15%); B20 and B21 (13%) and B19 (12%) [most deprived areas]. Fifty-two percent of still births were for women not born in UK, 25% were non-English speakers and 56% were those who had experienced DFM (decreased foetal movement) and delayed contact. Our report highlighted to healthcare professionals the real human impact behind the statistics. Urgent work is needed to ensure that improvements are made leading to positive maternity experiences for Black women and those from other minority ethnic backgrounds. Our report demonstrated that successful solutions can only come from listening to the women who have experienced serious issues in maternity care, and working with them to drive the changes they need.

#### Contact Details

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### Hywel Dda University Health Board Virtual Reality in End of Life Care

#### Category

Cancer Experience of Care Award



#### ORGANISATION DESCRIPTION

Hywel Dda University Health Board is responsible for planning and providing NHS services in Carmarthenshire, Ceredigion and Pembrokeshire, and has a population of 390,000. The Health Board has an ageing population, currently 11.5% are aged 75+, which is above the average in Wales. In 2021 the Health Board commissioned a company to work with frontline staff, partners, individuals, carers and their family to develop and integrated Palliative and End of Life Care strategy. The strategy was approved by the Hywel Dda University Health Board in 2022.

#### SUMMARY

The vision is for palliative and end of life in Wales to be delivered to all who need it by people working closely together, at home when appropriate, determined by what matters to the person and underpinned by what works. (Quality Statement for Palliative and End of life Care for Wales 2022). The use of virtual reality in palliative and end of life care has the potential to transform patient and carer experience by enabling distraction and reducing anxiety. The principle of virtual reality is to take the person from their current location / situation to a place of safety which is fully encapsulating. Evidence demonstrates that proactive use of VR helps patients in reducing anxiety and pain during chemotherapy and other procedures like wound dressing.

It is used on wards, during drop-in session or day respite care, and has been seen to help patients perform simple physio when they couldn't beforehand. Whilst the utilisation of virtual reality equipment in the clinical setting has proved to be incredibly valuable, less research has been undertaken in the community or home setting. This initiative explores the value for patients and carers, especially for those living in isolated rural areas. An empowering project that shares the voice and experience of patients, carers and staff. "It was a super experience and a marvellous distraction from what was going on in my life. Like I was living in the moment. Some of the scenes reminded me on the beautiful places I visited in New Zealand and Canada. It brought back happy memories".

#### IMPACT & RESULTS ACHIEVED

Feedback and results demonstrate that following VR use, 60% report a reduction in pain and 70% experience a reduction in anxiety level. Patients and carers describe the experience as a valuable respite opportunity to escape, relax, and explore the world. Staff are reporting strong feelings of reward, satisfaction and happiness when witnessing patient / carer using immersive therapy – secondary beneficiaries of this project. It enables a range of professionals to support and empower patients and carers with self-care opportunities.

Carer reports feeling anxious. She chose the underwater experience and reported to finding it very calming. She was observed to relax into an armchair and look around her during the experience. Wife reported "it's brilliant", "it's amazing", "how beautiful" and "it was lovely". Wife reported feeling calmer and self-reported an improved rating on the anxiety scale. She was grateful for being offered the opportunity. The key learning from this session was that family and carers can benefit from the relaxation focus of VR experiences, as much as the patient. This can offer a valuable opportunity to take time out for self-care, from what can be in some cases, a very intensive role.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

"Amazing" is the most used description throughout this project. Virtual reality gave patients and carers a moment for laughter, happiness, sadness and the opportunity to explore, escape and reminisce - one that was shared with members of the palliative care team. Undoubtedly, the success of this project is due to their voices and stories. As a team we are grateful to Macmillan, who made this project possible with their grant funding. It enabled us to explore the use of virtual reality in end-of-life care in a rural setting. We look forward to continuing this initiative. "Thank you so much for making a gentleman extremely happy J. Who looks forward to your visits, it gives him such a huge boost every time. May more people be able to benefit from this fantastic experience. Hands up to you and thank you team"

#### Contact Details

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## Imperial College Healthcare NHS Trust End of life user insights project

### Category

Engaging and Championing the Public  
& Strengthening the Foundation



### ORGANISATION DESCRIPTION

Imperial College Healthcare NHS Trust provides acute/specialist healthcare for over one million people every year. Formed in 2007, we're one of the largest NHS Trusts in the country, with 16,000+ staff and five hospitals in central and west London.

### SUMMARY

More than 1,700 people die annually in our hospitals but we knew, from the limited data available, that the experience of dying wasn't always positive. In 2023, the end-of-life (EOL) care team and a new insights team began an innovative project. We recruited 23 people with experience of someone close to them dying in one of our hospitals and empowered them to tell us honestly about their experience. We turned these insights into solutions and prioritised and codesigned them with staff and patients. This led to a pioneering user-focused organisational culture – putting the views and needs of service users at the heart of innovation, to improve patient experiences. The approach was different and brave. It tackled the fear and stigma preventing conversations about dying, and scepticism about being able to recruit diverse groups to give their feedback.

### IMPACT & RESULTS ACHIEVED

We wanted to recruit people from underrepresented groups who had experienced a loved one die recently at one of our hospitals, and have honest conversations about dying. This was met with doubt. We reviewed population data to ensure we reached the right groups and were overwhelmed by the success of our approach. We invited 12 people for 1:1 interviews, 8 people to provide feedback via a qualitative feedback form, and recruited 3 lived experience representatives who came to weekly meetings throughout the project. The recruitment process was so successful it's already been replicated for a cancer improvement project at our Trust. The findings were taken back to the big room for further discussion and two 'how might we' codesign projects were identified to take forward as a priority.

The outcome has increased confidence in gathering user insights. Ward staff, lay partners, and senior leads have expressed how pivotal the project has been. It's increased their confidence to talk about dying and reduced concern over appropriateness to ask relatives for feedback. We also gathered a huge set of insights that supports EOL care improvement plans for the next 10 years, including training plans, and means we can prioritise according to patient needs, widely sharing findings at meetings and at executive level, which has led to a cultural shift in our organisation to become more user focused (we've been inundated with requests from teams wanting to get user insights in their own projects) with a greater commitment to understanding the needs of our community (developing better relationships and trust between our hospitals and our local public).

### WHAT MAKES THIS INITIATIVE STAND OUT?

When someone is in their last hours and days of life, we only have one opportunity to provide compassionate and individualised care, and to provide support to those who are important to them. To understand how to do this in better ways, we must listen to people with lived experience. Conversations about dying and death can be difficult and so are often avoided in our society. During this project we wanted to break the taboo and empower people to talk about dying - this is what made the project so special. We were absolutely led by the participants and didn't plan any outcomes until we had insights. Participants who took part expressed how they welcomed the conversations: "Taking part in this research is therapeutic. It was a relief for me, I felt some kind of joy giving my experience and opinions. I can say my contribution has made the world a better place." (Participant) The project also successfully prioritised hearing from people from underrepresented groups and empowering patients with the information they need to give the person dying the best experience they can, and to meet their own needs. We've spread the message around the Trust that dying is everyone's business and are creating a culture of talking about death without shame or confusing euphemisms.

### Contact Details

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## Kingston Hospital NHS Trust Patient Information Reader Group

### Category

Patient Contribution – Group or organisation



### ABOUT NOMINEE

I am nominating the whole team of 20 people. The team has grown over the last 5 years, and we recruit at every engagement event we run at the Trust. The reason we are nominating is that there has been a step change in demand for the Patient Information Readers, and they are adding value well beyond quality assurance of leaflets. They are being asked to review all digital messaging for our portal, process pathways for patients, posters, digital health forms and strategy documents ahead of public consultation events to ensure accessibility of content.

They have reviewed 250 digital leaflets this year and work tirelessly, improving everything they are sent. There are 100% committed to improving patient experience.

This year, our Patient Information Readers have:

- Changed pathways and processes
- Changed health forms so each question is unambiguous and in plain English. More patients are now asked to provide pre-clinic information and the data will be more accurate and complete if well-worded and accessible, thereby reducing risk
- Reviewed and improved patient leaflets as we move them from local formats, such as PDF, to the new digital patient leaflet library. Patient Information Readers reviewed and improved over 250 leaflets. The digital leaflets can now be attached to appointment letters in the patient portal, they are accessible by screen readers (used by people with visual impairments or low literacy) and online translation, available in large print, and can be shared with others, such as carers, with one click.
- Reviewed and improved posters and other patient-facing content including messages on the patient portal (for example, about test results and PIFU) and on the NHS App (Kingston was a pilot site for NHSE's wayfinding project). Messaging affects patient confidence and we are sure that patient-designed messaging results in better compliance with digital information requests, such as health forms.

### SUMMARY

Patient involvement and coproduction are commonly used terms and sometimes used in a token way by providers. At Kingston Hospital, we see this happening on a day-to-day basis with almost immediate impact in a live environment via our Patient Information Readers.

The change in demand, partly due to digitisation of leaflets to the online library and the patient portal development, has expanded their work and also their reputation. This group of volunteers cannot be valued more highly nor have a better influence on the way we communicate with our patients, families, carers and public.

We would like them to be recognised and rewarded for the brilliant work they do.

### AT WORK

Our readers are varied in terms of age, experience and background. They all enjoy looking at content and they are 100% committed to making health information work for ordinary people. They want to help us with full engagement of everyone in healthcare including digital health. We all believe this partly relies on the clarity of messaging and ease of use. Our readers have been instrumental in changing the way we approach this new field of service delivery. They are generous with their time extremely insightful.

They understand that their role is to ask the questions any member of the public would ask, what does that mean, why is it in that order, who is doing that, what if it doesn't work etc. They are not experts but challenge us in the role of potential patients, carers and family members.

The improvements they make are too numerous to mention, some are subtle but sometimes we have changed the whole approach to engaging with people, for example, in our pre-assessment triage pilot across SW London, readers told us when to send the form out and how to formulate the questions so they are fully accessible and so more likely to get accurate answers.

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## Lancashire and South Cumbria NHS Foundation Trust The Retreat@Birchwood

### Category

Commissioning for Patient Experience



Lancashire & South Cumbria  
NHS Foundation Trust

### ORGANISATION DESCRIPTION

Lancashire & South Cumbria NHS Foundation Trust (LSCFT) - Provide mental health, learning disability, autism and community based services for a population of c1.8m people employing c8,000 staff. LSCFT is the Lead Provider for the Adult Secure, Children and Young People Mental Health and Perinatal Provider Collaboratives.

### SUMMARY

This first of its kind replicable model was co-created by young people with lived experience and stakeholders, invited to a workshop to develop a new unique offer the NHS have been unable to develop alone. This approach received positive feedback as an efficient, productive and enjoyable way to develop the service. The benefits of this approach enabled discussion of all elements of the model and decision making on the day. Whilst the CIT attended meetings prior to the workshop, to socialise the idea and gain support, the workshop provided an opportunity to articulate the objectives to a wide representation of stakeholders in a way that allowed comments and challenges, alongside an opportunity to find solutions.

Unresolved challenges were accepted, due to the conversation and understanding of the reasons why. Activity is monitored weekly with KPIs discussed at quarterly contract review meetings. Positive feedback has been received from young people and families and referring professionals. A PDSA approach has been implemented with incremental changes made based on learning and review of each change shared with stakeholders throughout this two-year pilot.

### IMPACT & RESULTS ACHIEVED

The Birchwood Charity have supported young people in long term residential settings for over 40 years. The Retreat@Birchwood offers a warm, caring and safe environment to provide short term therapeutic support facilitated by experienced with the benefit of positive peer support from young adults who have accessed other Birchwood services and are now studying at college or in employment. This element is unique and cannot be overstated. These young adults who may previously have been in mental health crisis can now offer informal support by sharing their coping strategies and help guide the young people who are now accessing the new provision.

Young people and families have consistently reported a positive experience at Retreat@Birchwood, mirrored by NHS professionals reporting the Retreat@Birchwood is now a vital cog in a young person's crisis pathway and provides them with a viable option when they are struggling to maintain a young person's safety in the community. A set of KPIs were developed based on the initial NHSE criteria and CIT expectations. The reduction in inpatient bed use has enabled LSCFT to explore alternative inpatient models to support young people with additional needs. This will benefit the LSC population by having access to specialist inpatient provision that is closer to home and supports the on-site involvement of families and carers where possible.

### WHAT MAKES THIS INITIATIVE STAND OUT?

The innovative model we have developed is unique offering 3 beds within a purpose built residential accommodation in West Lancashire. It sits alongside an existing offer for 18–25-year-olds within a service provided by a charity that has been operating for over 30 years. The model is specifically aimed at those young people who won't benefit from in-patient care but at the same time present with very complex and challenging problems, previously a gap in provision within our system. The model has truly been co-produced from inception to go live and offers a service unlike anything else, certainly within Lancashire and South Cumbria. Key elements to success can be attributed to the Retreat@Birchwood staff and their skills, the environment, the offer and the positive peer support from other young adults who live at The Foyer, (outside of this model). The CIT have actively supported Birchwood to foster relationships with NHS services to instil confidence as a provider. The PDSA approach has enabled us to be proactive in making positive improvements to the model enhancing the scope of the model to support more young people and community CAMHS teams. We are incredibly proud of the service!

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## Lancashire and South Cumbria NHS Foundation Trust The Alphabet - Service User Led LGBTQ group

### Category

Patient Contribution – Group or organisation



Lancashire and South Cumbria  
NHS Foundation Trust

### ABOUT NOMINEE

I am an occupational therapist who has worked in secure services for over 25 years. In my role I have always supported service users in increasing their roles and skills - especially in the challenging environment of a secure setting.

I am LGBTQ myself and have recognised there is a gap within secure services - namely for those service users who identify themselves as LGBTQ. It tends to be ignored or be seen as not important. I have been really keen to support those who are LGBTQ to set up a supportive group - and allow the service users to plan and develop what they see as being relevant and important.

The Alphabet has been named by the service users and they have come up with the agenda and purpose of the group. Training, increasing awareness and making links with the wider outside world has been the main drive for this service user led group. It is an organic and ever-changing group depending who is involved and shall continue to gather momentum!

This is a relatively "new" area - namely having a service user LGBTQ group. From a service user perspective, the fact there is a group that is a "safe space" is really important and has set the standard for this. We have managed to hopefully change others' opinions about LGBTQ - and go by the mantra that "presence" is important to change attitudes and educate.

I have the confidence now to "bring my whole self" to work and have no issues in being a role model to others. The group has managed to become a well established group. It is now looking at how we can be best "used" more widely within the trust - as well as making better links in the wider community. More recently we have been asked if we can be used in the training for staff.

### SUMMARY

We are the only LGBTQ service user led group in our trust. Imagine being in a secure setting- having many of your roles stripped back - and being perceived as just a "patient" on a section of the mental health act, a diagnosis and limited opportunities.

Being LGBTQ is seen as a minority; the media and social network sites rarely comment positively on those who are LGBTQ. Add this to a highly restrictive environment - you are doubly impaired.

The group acknowledges the need to have service users' voices heard in a safe place. Being LGBTQ is a role that tends to be ignored- but it is an important part of someone's identity.

We have all learned from one another - and all have different narratives - that we have shared more widely - hoping our presence is accepted and we can move forward in increasing our allies.

It is a great group that deserves to be recognised- and it is service user led!

### AT WORK

The Alphabet has put on several events as part of LGBTQ history months and Pride months. We have produced and designed "business and postcards" - and have our own email address. As stated previously we have more recently designed a booklet "Our Stories Your Stories"- a narrative from both staff and service users about their experiences of being LGBTQ.

We are currently looking at these becoming part of the lived experience living library in the trust.

We have been up and running from April 2022- and continue to experience good feedback from group members as well as staff and other peers attending our events. We are the ONLY LGBTQ service user group within the trust.

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## Leeds Teaching Hospitals NHS Trust Pancreatic Enhanced Recovery Nurse

### Category

Patient Experience Manager/Professional of the Year



The Leeds Teaching Hospitals  
NHS Trust

### ABOUT NOMINEE

My Name is Alison Kinany and I have been a Nurse for 21 years. I have spent a lot of that time as a surgical nurse and recently had made the transition to managerial nursing.

What I realised after this move are the times that I felt inspired and felt I had done a good job were the days when I could help a patient and get the best possible outcome for them by using the experience I had gained over those 21 years.

At the start of 2024 I gained employment in an enhanced recovery Nurse role in the pancreatic services team. This was to develop and set up an enhanced recovery nurse services for patients undergoing pancreatic surgery. Which in most cases is performed due to cancer.

It is a one-person team currently that works closely with the Consultant team the Clinical nurse specialist team and the nursing team on the ward but most importantly the patient involved.

### SUMMARY

I think personally this is all about the patients experience I meet them on a day when they have been given news that they have pancreatic cancer and the majority of people have known someone that has been unfortunate to die from this awful cancer, to then be told they have an opportunity for cure by undertaking what is a huge surgery and will change their life significantly. At this point I have the absolute privilege to meet them and to help them understand the surgery, get their head around the sheer size of it and begin to prepare themselves for what is to come.

I believe my expertise in the field and my positive and open manner allow me to develop a relationship which supports them through the preoperative, recovery and post operative phases. I love my job and the chance to play a supportive and professional part in my patients lives is so rewarding but I can't do it justice to say what my role means to my patients so I would love to share a piece of feedback from one of my patients that was anonymously left in my feedback survey.

This role was amazing in supporting me, the wraparound support and reassurance was vital in helping my recovery. The nurse visited me every day sometimes multiple times allowing me to ask questions and seek reassurance and therefore helping me to recover more rapidly and with reduced stress. The morning rounds do not offer sufficient opportunities to get all the information required so the enhanced recovery nurse provided vital support during the remainder of the day, liaised with ward staff and dieticians etc to support my recovery.

Most important part is difficult to pinpoint because it was all excellent, but maybe the familiar nurse who I could trust knew about my situation and provided personal and rapid feedback to all my concerns was vital. Without her I know my recovery would not have been so good.

### AT WORK

I have worked for 15 years in surgical nursing and have gained experience and expertise in abdominal medicine. I have developed my skill set to be capable to undertake any procedures that the patient may need pre and post operation.

My strongest asset is my ability to develop a rapport with patients and staff, to be able to impart my knowledge to fellow staff and team members.

since starting in this patient centred role as an enhanced recovery nurse the feedback I have received has said that I am caring, able to explain things in a way that is understood, supportive and a positive person that has enhanced their experience before, during and after surgery.

The ability to be available and visible to staff and patients mean they feel they have both support and someone that can answer any questions and support their recovery.

### Contact Details

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## Leeds Teaching Hospitals NHS Trust

### Improving communication and engagement for our home haemodialysis patients at Leeds. Designing our services for them!

#### Category

Making Complaints Count



The Leeds Teaching Hospitals  
NHS Trust

#### ORGANISATION DESCRIPTION

Leeds Teaching Hospital Trust is an acute trust within West Yorkshire and is Europe's largest teaching hospital. Renal within Leeds is a large service and we provide dialysis for approx. 700 patients in chronic kidney failure. Our Home Haemodialysis team provide support for those patients that wish to dialyse at home rather than in a dialysis unit. The team consists of 7 members of staff, 3 registered nurses, 3 clinical support workers and 1 admin personnel. We currently have 25 patients that dialyse at home.

The turnover of patients is quite high as fortunately some of the patients that go home will end up receiving a kidney transplant. The team train patients and their carers to be able to safely perform dialysis at home and so they can be discharged from a unit to their home. The team will work with the renal technician team to ensure the patients home is suitable and safe for home dialysis and will get the essential works carried out.

#### SUMMARY

This initiative deserves recognition because it demonstrates how you can use a complaint from a patient as a learning opportunity to learn more about their lived experience and to make a couple of small but impactful changes and how this momentum can continue and inspire the team to implement further change from patient feedback. There doesn't have to be one big expensive change to positively impact on patient experience. Sending out different surveys, one to our new patients about their training and transition experience and a different survey to our established patients to find out more about communication and support is new thinking. Leadership has been crucial in improving the patient experience for our home haemodialysis patients. Curiosity from me as a new Matron within the renal service and then this then snowballed with the new sister and the established Sr sister in the home haemo team implementing the newsletter and the patient information folder.

This created excitement and momentum from the team to then work with the patient experience team to hear from more of our patients to see what small but impactful changes they can make. The team have heard positive feedback from the patients and this survey is going to be carried out yearly. We have involved all our patients in this patient feedback and changing the service, including both our new and established patients. The main unit senior sister supported us to implement the patient information folder into her unit. Also the lead consultant has been supportive of the changes to feeding back all of the outcomes from the monthly MDT meeting. This learning can be transferred to other services especially community/remote services and even virtual wards. This learning has been disseminated across the renal service at Leeds and also shared at the Yorkshire and Humber kidney network events.

#### IMPACT & RESULTS ACHIEVED

The impact on the initiative is that the home haemo patients are more involved in their care and service updates. They are now regularly updated with service charges, all MDT outcomes are fed back, they now have a yearly format to give feedback, and the main dialysis unit have personalised information so they can give personalised care out of hours. We plan on continuing this service to see how these changes impact our patients as we have changeover of our patient group.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

I feel this initiative is special because I feel it grew organically from a initial patient complaint and the momentum from making changes from this complaint made the team question the lived experience for all their patients. I feel seeing positive change for their patients motivated the team to look at other improvements they could make. The key element for success is the collaboration between the home haemo team and the patient experience team. Also using bespoke surveys for their new and established patients so they can get the information they really need to implement change. There have been new members of staff within the home haemo team and renal service which I do think helped give fresh perspective and energy to this project!

#### Contact Details

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## Leeds Teaching Hospitals NHS Trust Acute Care Bags for people with a Learning Disabilities and Autistic Patients

### Category

Environment of Care



### ORGANISATION DESCRIPTION

Leeds Teaching Hospitals is a large acute Trust covering 7 sites. We have circa 1500 beds. 3 Emergency Departments and a regional trauma centre. We serve a population of 800,000 locally and 5.4 million regionally. We have 21000 members of staff. The Trust has an ambition to Provide the best specialist and integrated care. We currently have around 5000 Learning Disabilities patients with electronic alerts and 4000 Autistic patients with alerts in place. We supported 13500 inpatient bed days and 9800 outpatients appointments/ procedures for our population group last year. The Acute Liaison team for Learning Disabilities is a whole lifespan service which covers from birth to death of all patients with a known diagnosis. They cover all 7 sites.

### SUMMARY

This project is the first of its kind nationally and was awarded an innovation grant for its pilot. It has been led by the QI Clinician from inception to delivery, who has co-produced every element of the project with people with lived experience. The project continues to be supported by people with lived experience. Success has been measured by feedback and raw data – incident reporting and reattendance rates, which we have seen a year-on-year reduction in the health inequality gaps.

The national spread and roll out has been supported by LTHT and has led to stronger buying power, reducing cost per unit and increasing sustainability. Other Trusts have moved funding from charity led to core business on the basis of reduced reattendance rates and improved patient experience.

Learning from the Project has been shared widely both in the Trust, regionally and Nationally via the NHSE promotion work and their Patient Experience HOPE network. The project has been nominated for a national learning disability and Autism award.

### IMPACT & RESULTS ACHIEVED

From inception to delivery the project was led by the QI Clinician nurse Kathleen Smith. We audited our patient experience which highlighted the environment as a barrier to care. Patient stating that they could not cope with noises, smells, bright lights and unpredictable waits - they often left the department before treatment because they had become dysregulated.

We hosted focus groups with stakeholders and partners with lived experience to discuss improvement projects and agreed on a patient held scheme. This aligned to our values of being patient centred and empowering.

We discussed the idea of a bag and looked at what we could supply in it. We looked at frequently used products, products already in circulation and products thought to be most helpful from our user group.

We engaged widely with patients and people with lived experience via our social media and third sector partners. We risk assessed all items removing any that were perishable, should be provided as core business or had a perceived risk either to the patient (self-harm/ ligature) or to the public (sharp, heavy etc).

We applied for an innovation grant from the hospital charity to fund a 350-bag pilot - which was awarded.

The project was presented to our Trust board pre-pilot - mid pilot and post pilot.

2 week launch where the LDA team were in department daily for teaching and supporting the project.

Since launch the LDA and patient partners offer weekly walk throughs to support.

data is collated yearly in line with National Benchmarking, but any incidents/ concerns are reviewed and actioned in real time by the QI Clinician.

### WHAT MAKES THIS INITIATIVE STAND OUT?

It is the profound affect it has had on patients that has made this project stand out. It has quickly yielded real time improvements and has gained national interest due to its innovative approach to a common issue.

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### Leeds Teaching Hospitals NHS Trust Virtual Reality Headset for Adults with a Learning Disability

#### Category

Innovative Use of Technology, Social and Digital Media



#### ORGANISATION DESCRIPTION

Leeds Teaching Hospitals is a large acute Trust covering 7 sites. We have circa 1500 beds. 3 Emergency Departments and a regional trauma centre. We serve a population of 800,000 locally and 5.4 million regionally. We have 21000 members of staff. The Trust has an ambition to Provide the best specialist and integrated care. We currently have around 5000 Learning Disabilities patients with electronic alerts and 4000 Autistic patients with alerts in place. We supported 13500 inpatient bed days and 9800 outpatients appointments procedures for our population group last year. The Acute Liaison team for Learning Disabilities is a whole lifespan service which covers from birth to death of all patients with a known diagnosis. They cover all 7 sites.

#### SUMMARY

This project was launched on the back of larger scale research and work in the Leeds Children's Hospitals where the use of VR was trialled successfully with the support of the play therapy team. The project saw VR being used by the play therapist as a distraction tool with over 80% of patients feeling that it had a positive impact. The use of VR within paediatrics has been well established and now accredited with the Leeds Children Hospital's work. It has previously not been trialled within Adult's.

It was the Learning Disability and Autism Acute Liaison Team that understood the benefit an impact it may have. They worked closely with adults with lived experience to discuss the use and impact. It was trialled with their patient partner champions (adults with lived experience) to ensure suitability and ease of use. They engage with several companies that provide medical grade VR and all attended the training. The headset is available to all adults with a learning disability and/ or Autistic adults to use when accessing healthcare at the Trust. We know that this vulnerable population suffer health inequalities and are at risk of dying over 20 years earlier than the general population. The role of the Acute Liaison team is to develop innovative ways to break down the barriers to accessing healthcare for this population group. The use of the VR has enabled this.

People that have not managed to have routine blood tests for chronic conditions have now managed this without the need for sedation. Patient's that have previously needed a general anaesthetic for simple procedures no longer need this. And more importantly, it has helped improve patient experience and build positive layers of interaction with health care and health care professionals which has a wider impact on the persons health overall.

This model of care is transferable across other Acute care settings and would have a big impact in primary care for routine checks like phlebotomy, dental and during annual health checks. The project has already been presented as best practice at the National Urology Conference

#### IMPACT & RESULTS ACHIEVED

Patient 1 usually attends hospital every 12 weeks for a catheter change - this is usually a community based routine procedure. Due to patient anxiety this has required pre procedure sedation, hospital admission, general anaesthetic and 2-night inpatient stay. Support has always been offered from senior members of the acute liaison team. Since the introduction of the VR headset the procedure is now completed in outpatients with consistent staff from urology, patients usual carers and any member of staff from the Acute Liaison Team.

The estimated reduction in costs for the Trust is circa £7500 per annum. This does not include money saved from reduced acute admissions between routine appointments when the patient would pull or damage the catheter when stressed.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

This project stands out because we are the first nationally to be doing it. With one patient alone it has saved more than it cost. It has a much bigger impact on patient experience and is not just about cost saving. It is reducing intervention time, need for sedation etc which is reducing risks for our patients. It is building a positive layer of experiences for our patients that mean they feel better about accessing further healthcare and begin to see the benefits of this.

#### Contact Details

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## Liverpool John Moores University Amy Sweeney Liverpool John Moores University Mental Health Nurse

### Category

Student Patient Experience Advocate of Tomorrow



### ABOUT NOMINEE

Amy is a 3rd year Mental Health Nursing student at Liverpool John Moores University. This is a demanding, full time degree programme, requiring commitment to work 30 hours per week in practice, as well as undertaking her theoretical modules. Despite these challenges, Amy always goes above and beyond for her patients, striving to enhance the quality-of-care delivery, and acts as an advocate for them at all times.

Amy is not afraid to challenge others demonstrating her courage, a requirement of the NMC 6C's. Since starting her nursing degree, she has faced significant personal challenges. During her first placement, her father was diagnosed with lung cancer, which was an incredibly difficult time for both her and her family. In her second year, he underwent a lobectomy, adding further stress and emotional strain to her already demanding studies. Despite these hardships, Amy remained committed to her education and continued to strive for excellence in her practice. Her journey has been marked by resilience and determination, qualities that she brings to her role as a student nurse in the hope that she inspires others.

Amy has also played a key role in managing the Nursing Society's Instagram page, which now boasts over 600 followers. On this platform, she creates engaging and informative content tailored for student nurses, focusing on wellbeing, patient care, and assessment tools used in practice. Her aim is to provide a valuable resource that supports and enriches the educational experience of her peers to ultimately enhance patient care.

### SUMMARY

I believe Amy should be considered for this award as her hard work, passion and commitment for enhancing patient care is exceptional and truly deserving of recognition. Amy will continue to be an advocate for her patients throughout her nursing career, and she is someone who will fight for injustice, equality and diversity, and the promotion of high standards of care. It is an absolute pleasure to have Amy be a student at Liverpool John Moores University. I wish her every bit of good luck in this nomination.

### AT WORK

Amy has constantly performed well during her nursing programme. Feedback for her practice assessors describe Amy as having an excellent attitude towards her learning. She has confidence in her abilities but also an awareness of her limitations and learning needs. She quickly established herself within the team, going out of her way to speak with all disciplines, and get to know them and their roles. Amy has displayed respectful and appropriate behaviour towards both service users, professionals and her peers. She has been supportive of staff and other students on placement by sharing knowledge and offering appropriate support.

Amy has demonstrated the ability to work on her own initiative, using study time appropriately and completing documentation in regards to an incident that occurred in practice. Amy has made a positive impact on the service users that she has worked with, by offering care, respect, and an empathic approach. Amy has excelled with regard to the support of residents who are presenting as challenging and distressed. She has been observed to use communication skills in a person centred way and has used evidenced based intervention to support and distract. Amy evidences focus and a strong awareness with regard to consent to care and treatment, implementing best practice throughout interventions. Amy is president of the Liverpool John Moores University Nursing Society, a society run by nursing students, with the aim of enhancing other nursing students theoretical skills and knowledge. The Society offers additional learning opportunities and fundraising activities for local charities.

Amy's passion for nursing and her commitment to improving and enhancing the patient experience was recognised this year, as she was awarded the School Directors Award. Truly deserved, Amy is an inspiration to other students and practice staff. Academic staff on the Undergraduate Nursing degree programme are also in awe of the passion and commitment she displays. All of her extra curricular activities she is involved in do not affect her performance theoretically or on practice.

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## Liverpool John Moores University

### Embedding Health Psychology to Improve Service User Experience- Health Psychologist in Training- Dianne Sharples & Supervisor Dr Lisa Newson

#### Category

Student Patient Experience Advocate of Tomorrow



#### ABOUT NOMINEE

I have known Dianne since she began her MSc in Health Psychology (stage 1 professional training) at Liverpool John Moores University (LJMU) in 2022- at the time I was MSc Health Psychology Programme Leader- and have therefore overseen and witnessed Dianne's career development into health psychology. Her exemplary performance and dedication to the field, culminating in a Masters with Distinction in 2023, have been evident throughout our academic and professional interactions. Indeed, her empirical research on the MSC Health Psychology has recently been published in a peer-reviewed journal article, which demonstrates not only her high-class work and commitment but her sustained interest in supporting service users, and she has since used this research to improve services nationally. Dianne's inspiration to engage in patient experience stemmed from her profound commitment to integrating Health Psychology into healthcare services. Recognising the significant impact psychological principles can have on patient outcomes, she was driven to apply her knowledge and skills to enhance the therapeutic interventions for patients, particularly those dealing with substance use issues. Her passion for improving patient experiences and outcomes has been the cornerstone of her professional journey.

#### SUMMARY

Dianne deserves special recognition for her exceptional contributions to embedding Health Psychology within healthcare services. During her MSc at LJMU, Dianne demonstrated remarkable initiative and dedication by seeking advice and support to develop a unique role that would enable her onward training. This led to the creation of her new position as National Programme Manager for Emerging Futures CiC, a nationwide service supporting those affected by homelessness, substance use, and physical and mental health needs. For the first time, this national service is employing and supporting the development of a Health Psychologist in training, and Dianne will become the first ever Health Psychologist to qualify and be employed by this national provider. In this role, Dianne has been a trailblazer, actively promoting and embedding Health Psychology practices and principles across the organisation. She has presented to senior management the benefits of Health Psychology, defined and designed psychological interventions, and developed behaviour change programs tailored to the needs of service users, commissioners, and the wider organisation. Her recent efforts include a five-part training program for service delivery staff aimed at improving engagement with service users and facilitating sustained behavioural changes.

Dianne is working towards national accreditation of this program, showcasing her commitment to improving the quality of care in the substance use field. Dianne's journey is particularly inspiring, given the challenges of promoting a relatively unknown profession (Health Psychology). Her proactive approach, coupled with her ability to listen to and address the needs of service users, has resulted in significant positive changes within Emerging Futures. Her work exemplifies the integration of evidence-based Health Psychology practices into real-world settings, making a tangible difference in the lives of vulnerable populations. As someone who has previously worked in NHS and community-based services, I understand the challenges of promoting a (small) profession like Health Psychology. Dianne's efforts to raise awareness and embed these practices into service delivery are commendable. I am thrilled to support her through this journey and confident that her contributions will have a lasting impact on the communities she serves.

#### AT WORK

I can state that health psychology isn't typically embedded into substance use services (which are more aligned towards traditional mental health approaches), and having recently visited Dianne on placement, it is exciting to witness and support the changes that Dianne has made, and will continue to make in this service. Dianne is making a real change to the service user experience whilst attending substance support services. Dianne is engaged in a program of learning at LJMU.

#### Contact Details

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## Liverpool John Moores University

### Empowering healthcare professionals and young patients with a disability to attain their goals

#### Category

Student Patient Experience Advocate of Tomorrow



#### ABOUT NOMINEE

I have known Freya as her Personal Tutor since September 2021. Since getting to know Freya during this time, she has shown to be incredibly conscientious, compassionate and always professional in every interaction.

Freya commenced the BSc Child Nursing course with a complex Individual Student Learning Plan in place to support with the Academic side of the course, at this time, she did not want additional support for practice. Freya has a genetic condition, which has affected her ability to digest food and absorb nutrients, however, she has not let this stand in her way. However, towards the latter part of first year, her symptoms and condition exacerbated further resulting in hospitalisation and being discharged with a feeding tube in place, which was clearly visible on her face. Freya would have undoubtedly felt self-conscious of this, and how she may have been perceived by her colleagues and patient's families. This fuelled her determination further to want to achieve her Nursing Degree.

Due to the nature of her condition, and the corresponding requirement for barrier nursing across the Trust, Freya was required to attend Occupational Health to be cleared as Fit to Practice, for a Reasonable Adjustment Plan for Practice to be put in place, and for careful management of her placements as to where would be appropriate and safe for her to go. With the plan to reassess as her condition and circumstances changed.

#### SUMMARY

Freya is incredibly humble and does not recognise the influence she has upon others. There is a stigma attached to disability and students worry about asking for help in case they are told they cannot be a nurse and subsequently removed from the course. Freya has a unique outlook to the care she delivers due to the difficulties she overcomes, she is better able to understand her diverse patients and therefore empathise with their individual struggles. Freya's strength and determination demonstrates to her fellow students as well as being a pillar of representation to her young patients that it is OK to ask for support and that having a disability is not a barrier to becoming a medical professional.

She also demonstrates to her colleagues and workforce that having a disability does not infer with her ability to provide excellent care and aims to remove any unconscious bias, as well as open conversation to discuss disability and answer questions. She has recently disclosed the support her current placement have put in place for her, and another department has put in a recommendation to the recruitment team for her to be employed with them, as she would make a fantastic asset. Freya has been absolute joy and pleasure to have gotten to know throughout her student nursing course, and I and those who have been fortunate to have worked alongside her would agree, she will continue to achieve greatness throughout her nursing career.

#### AT WORK

Freya has been truly inspirational in her outlook to her professional career and has not let anything stand in her way, with a drive and a passion to want to succeed and take every opportunity. She made measures and steps in order to still be able to attend placement with creative initiatives. This has resulted in her being shortlisted for Student Nursing Times Awards, Inspirational Nurse of the Year.

Freya has published her story in the RCNi explaining why her genetic condition will not be a barrier to her career and how her lived experience can enhance her practice. Within the article she explains her condition and how she has felt the need to prove her capabilities and feeling vulnerable to being deemed unfit to practice, however, she mentions that by being honest with the University and Placement, appropriate support measure and reasonable adjustments were put in place to enable her to stay on the course in whichever way is safest and best for her as an individual. Adjusting to working with children with a feeding tube on my face was a huge emotional challenge for me. I was worried that parents would think I was not capable of caring for their child, but on one of my first shifts back a child pointed to me and said: 'Mummy, that nurse looks like me.'

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### Liverpool John Moores University Liverpool John Moores University - Paramedic Society

#### Category

Student Patient Experience Educator of Tomorrow



#### ABOUT NOMINEE

The Liverpool John Moores Paramedic Society was established in 2020, created by Paramedic Students for Paramedic Students. It is a society closely linked to the school of Public and Allied Health within Liverpool John Moores University. It was set up with the aim to liaise with other healthcare professionals and departments to provide members with continuous professional development (CPD), and plan social and extra-curricular events to provide our members an opportunity to relax, have some fun and make friends.

In addition, the Paramedic Society advocates for student mental health and well-being, by creating a safe space along with a sense of community. In 2022, the society was taken over by 11 enthusiastic second year student paramedics, led by a president and supported by officers with a specific role. During the takeover period the team set goals of aims to achieve during the academic year. A collective goal was to increase and improve the variety and frequency of CPD. The 2 CPD officers for 2023/2024 were both eager and well connected which ensured the society had the opportunity to have numerous speakers and experts in to deliver expert CPD to our members.

#### SUMMARY

The work that the Paramedic Society undertakes is focused on enhancing the skills and knowledge of the paramedic students, which in turn will enhance service user care. They are committed to education of others, and the service user experience.

To do this whilst on a full-time degree programme, with shift work and practice placements can only be commended. Looking towards the future, the society is continuing to grow, and the officers are continuing on as they enter third year with the help of eager new officers. There are plans for the society to undertake a 12-hour charity CPR marathon in aid of North West Air Ambulance in the coming academic year.

The society has a multifaceted approach and gives members a society in which to unwind and relax but also the opportunities to enhance clinical knowledge and understanding through outstanding CPD on offer. By offering these CPD sessions it increases skills, experience and confidence of members, the future paramedics. This in turn increases patient satisfaction and care.

#### AT WORK

All Paramedic Society officers are full time university students, completing a full-time paramedic science degree. The course itself is split evenly between time in university completing 6 theory modules per year and time spent on an ambulance or in hospital on placement. Whilst on placement students will follow their mentors 12-hour shifts, averaging 37.5 hours a week.

With such a busy university life it has been imperative for the officers to be forward planning and organised with speakers, events, and workshops, to ensure these can run without hindering university studies. We try our utmost to gain feedback from our members and put on the relevant CPD sessions to support areas people feel less confident in, hopefully equipping them with more knowledge to go forward into placements and future careers.

The Paramedic Society goes above and beyond to help support and educate other fellow students to enhance their skills and knowledge, with the ultimate aim being to improve the experiences of paramedic care to service users within the North West region.

In addition, the Society undertakes regular fundraising activities, supporting charities including the Alzheimer's Charity and the North West Air Ambulance Charity.

#### Contact Details

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## Liverpool John Moores University LJMU Midwifery Society

### Category

Student Patient Experience Advocate of Tomorrow



### ABOUT NOMINEE

The LJMU Midwifery Society (MidSoc) is a group of hard-working and dedicated Liverpool John Moores University Student Midwives, from levels 4, 5 and 6. The MidSoc are passionate about learning and development of the entire cohort, as well as supporting a range of charities, both local and national. The MidSoc regularly fundraise to help support these charities who in turn, provide advice, aid and resources to vulnerable groups close to the hearts of our Midwifery students. They also provide a non-judgemental base for discussion of ideas and opinions, helping to inform the care they provide to women, babies and families.

The LJMU Midwifery Society comprises of: Amy Brown, Chelsea Calvert, Mia Campbell, Caitlin Fearon, Anna Johnson, Sophie Harding, Amelia Gower, Sophie Hughes, Lottie Hulse, Sarah McGowan, Imogen Moss, Helen Roche, Michelle Walker (all Level 6), Vicki Wright (Level 5), Aisling Carter, Katie Goulding, Shannon Hope, and Rachel Loughran (Level 4).

I have known the MidSoc students since they began their programme, and I am the MidSoc link. They come to me should they require any support, rooms booking, discussion about events etc. I also know them from my other roles as Personal Tutor, Academic Assessor, year lead for Level 6, module leader and link tutor in three different Trusts. I have therefore worked closely with them on a regular basis and have got to know them well.

### SUMMARY

The LJMU Midwifery Society have shown commitment and determination in their aim to support fellow students and vulnerable groups that are pertinent to midwifery care. They are selfless in their approach, actively helping others and have shown that they are future leaders within the health care system. The MidSoc are focussed on providing the best care and positive change within maternity services, as well as raising awareness of important issues and vulnerabilities.

They have shown that action can be taken to enhance patient care and patient satisfaction and experience in practice, as well as the student experience within university. All of this has happened in their own time, whilst also studying full time on their Pre Registration Midwifery BSc Degree. I am proud of their dedication, passion and motivation, and fully support this nomination.

### AT WORK

The MidSoc are an influential and motivated team, who work amazingly together and also as individuals. They are full of great ideas and are eager to plan and fulfil beneficial tasks and events, often highlighting the importance of patient-focussed care.

Their dedication shines through, especially because the Midwifery BSc programme is extremely full-on, yet even with their own family responsibilities, these students still find the time and energy to make the MidSoc events as successful as they are. The team are invested in providing support not only to fellow students, but to causes that benefit midwifery service users. This has been whilst they are working out in clinical practice, as well as during academic theory and assessments.

All of the students in the MidSoc are excelling in the Midwifery BSc programme, often supporting others within their cohort. They are enthusiastic in all aspects of the course and the world of Midwifery. Having taught all of the students throughout their course, I can say that those in the MidSoc are always engaging, contributing to discussion and encouraging others to join in. They are professional and treat staff and peers with respect.

All of the MidSoc students have gained excellent feedback from their practice areas, including that from service users they have provided care for.

The level 6 students are coming up to qualifying, the Midwifery Team will all miss them but we know they are going to make a massive impact on the care that women will receive on commencing their new posts as a newly-qualified Midwife.

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## Liverpool John Moores University LJMU Nursing Society

### Category

Student Patient Experience Educator of Tomorrow



### ABOUT NOMINEE

January 2023 saw the inauguration of the student led Liverpool John Moores University (LJMU) Nursing Society. Aligned to the School of Nursing and Advanced Practice, the society promotes equality and diversity. It welcomes students across all three fields of practice- Adult, Child and Mental Health and levels – pre and post registration nursing as well as trainee nursing associates.

The aim and focus of the student-centric society is to enhance patient safety and care delivery in the clinical setting by augmenting student theoretical and practical knowledge. This is achieved via two underpinning principles. Through the provision of additional educative materials in person/online events and on social media platforms, the nursing curriculum is enriched whilst student engagement and learning are diversified. This in turn, improves personal and professional development and transposes into the healthcare setting facilitating heightened patient care outcomes.

The ten Nursing Society committee members, including acting president, merge their skillsets to provide accurate, relevant, and comprehensible content to over seven hundred followers across their social media platforms- Instagram and Twitter. Language used by committee members in social posts is aligned to student group needs and requirements by being current and comprehensible. Societal members also use cohort leader meetings and canvas platforms to disseminate resources to students who are not following on social media, to ensure parity and accessibility of information for all nursing students at LJMU. Here the language used is professional and factual as it is located on LJMU resources, but is formatted in a clear and simple manner to ensure students from all backgrounds and study years can comprehend the information being provided.

### SUMMARY

The LJMU Nursing society is run by students for students, it is evident every aspect of the Society is student focused. The events, activities and educational materials are selected by society members in their own time, with extensive prepping and planning to ensure presentation is clear and concise.

This was evident at the recent International Nurses Day, whereby all healthcare professionals in the University were invited to attend and participate in the day's activities. Whilst it was a celebration of student nurses and their achievements, it also endorsed the importance of kinship through unification of healthcare professionals. Embodying the core values of LJMU, the Nursing Society supports the nursing curriculum by augmenting student nurse's expertise and skills with the aim of enhancing patient care and experience.

### AT WORK

Within 18 months of launching the Nursing Society has grown from being solely focused on undergraduate nursing students to encompassing members belonging to an array of undergraduate LJMU nursing programmes and fields. With over 600 followers on Instagram and 170 on Twitter, social media platforms have been instrumental in enabling the society to grow and connect with a wide range of members in real time. In addition, over 154 members have directly joined the society via John Moores Student Union, which has increased societal recognition and given nursing students a voice and representation in the wider university.

Development of skills through engaged learning is a key facet of the Nursing Society and is driven by a collective determination and objective to transform the educative experience for nursing students. The notion this will engender an improved experience for patients and service users is in part why platforms such as Instagram have been the focus, rather than in-class presentations and posters. Instagram enables educational information to be cascaded in an accessible manner which is fun yet instructive. Content is focused on refining patient care, by informing students of current evidence-based practice so students feel empowered to deliver enhanced patient care.

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## Liverpool John Moores University

### Reducing Black Maternal Health Disparities Through Education and Raising Awareness

#### Category

Student Patient Experience Educator of Tomorrow



#### ABOUT NOMINEE

Olga is currently in the final stages of completing her Midwifery BSc honours degree at Liverpool John Moores University. From the day Olga commenced the programme she has demonstrated an unwavering passion to educate and raise awareness amongst her fellow students and colleagues around the disparities in care and outcomes for Black women in the UK Maternity system.

Black women giving birth in the UK are up to 4 times more likely to die than white women, Black babies are 3 times more likely to die than white babies and both mothers and babies experience higher levels of morbidity than white mothers and babies.

Olga is the only Black student in her cohort and has single handedly committed her time and energy to this 'project', although Olga would probably not describe this as a project, but more as a 'necessary cause' that she continues to drive forward to ensure changes are made to improve patient outcomes for mothers and babies.

#### SUMMARY

In summary, Olga has relentlessly strived to keep her Black Maternal Health project at the forefront of her work, with this impacting both student midwives and staff midwives alike. This is an extraordinary achievement for a student midwife, demonstrating how Olga has gone above and beyond the expectations of a student. Olga is a leader of the future in this area and even as a undergraduate students has made a tremendous impact on raising awareness around the disparities in this area.

#### AT WORK

Olga has taken her passion for Black Maternal Health to all of her placements, seeking out EDI representatives in the Trust she is based in, to discuss how care improvements can be made. Olga has been involved in the setting up and supporting of a 'Race Hub' at her Trust and regularly liaises with the Race Midwife to support staff and students to enhance their knowledge around race. The initiative has already impact and is an asset to the Trust.

The area where Olga has had most impact is in terms of education and raising awareness with fellow student midwives around Black maternal health disparities.

Olga won a LJMU 'student Advocacy award' for her work around raising the profile of Black midwifery students. Olga recently applied for a won an LJMU student internship working alongside the LJMU History and Midwifery department in a groundbreaking study which explores the links between Enslaved Black women and current Black maternal health disparities.

During the 'Mistory' (Midwifery/History) project Olga led recruitment and data collection, undertook data analysis and made recommendations from the study to inform the decolonisation of the LJMU Midwifery curriculum. Olga also presented the findings of the study at the LJMU Teaching and Learning Conference.

Olga has now contributed to a £1 million grant application that is being submitted to The Wellcome Trust to further work around this subject which is being led by the LJMU History and |Midwifery departments. Part of the recommendations from the Mistory project include a series of lectures under the umbrella theme of 'Safe Space to Discuss Race'. Olga will be undertaking one of the lectures to LJMU midwifery students.

Olga has recently presented at the Northern Maternity and Midwifery Festival on her experiences of being a Black student midwife in practice, which received widespread/outstanding feedback from those who attended. This has also resulted in the Trust she is going to be employed with when she qualifies offering her an EDI role within maternity services.

Olga has already been accepted onto a Midwifery masters programme upon qualification, where she will expand and progress her current work around Black Maternal Health.

#### Contact Details

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### Liverpool John Moores University & Cobalt Housing Healthy Tenants, Healthy Homes, Healthy Communities - A Collaborative Innovation Advancing Sustainability, Health, and Society

#### Category

Integration and Continuity of Care including Social Care & Partnership Working to Improve the Experience



#### ORGANISATION DESCRIPTION

Liverpool John Moores University (LJMU) has a student capacity of ~23,750 students, with 2,543.9 staff. A core emphasis of our work as a civic university is to enable community change through knowledge transfer. As the lead on this project Dr Lisa Newson, Health Psychologist and Reader in Applied Health Psychology, is an engaged scholar. Which emphasises her commitment to applied scholarly activity, implementing change in practice, and knowledge transfer beyond academia for the benefit of society. Cobalt Housing Association (CHA), based in North Liverpool, was formed in February 2003. As the area's majority landlord with ~6,000 houses, CHA engages in economic, neighbourhood, and community regeneration activities. CHA aims to “provide quality places to live” and develop “thriving communities where people are proud to live.” It seeks to be a sector-leading community-based housing provider, creating value for stakeholders and the community, achieving business sustainability and establishing a nationally recognised brand identity.” (Cobalt Strategy).

#### SUMMARY

LJMU empowered CHA's community through participatory-research and evidence-based decision-making, integrating behavioural science, social value, and business modelling for the first time in housing. This prioritisation of community voice—shifting towards a tenant-centric approach in decision-making for community health services—is a significant advancement. Managed during economic and health challenges (COVID-19/Cost-of-Living), this multifaceted complex project targeted ~6k homes in North Liverpool amid two organisational restructures and heightened political regulations. Dynamic leadership ensured ongoing commitment and success. Outcomes: Community co-creation led to new sustainability and well-being interventions, improving public health outcomes.

The project reported a social value of £5.7 million for CHA health services, prompting financial investment, service expansion, and the creation of a new 2024 ‘Neighbourhub’ for sustainability. Continuous community participation [tenants (1000+), health groups(30+), patients with long-term conditions(80), carers, family(80), and staff(60)] informed co-creation, advisory roles, and dissemination. The project established exemplary practices in housing using behavioural science to increase inclusivity, engaged people seldom heard and created new Sustainability, EDI, Engagement, and Communication Strategies and Policies. Academic articles highlight the project's relevance. Methodologies have been promoted as exemplary across housing, health, third sector, and government events/conferences.

#### IMPACT & RESULTS ACHIEVED

This project has exceeded its original plan. After a period of change and improving services, we evaluated the social impact of CHA community health services, reporting an annual well-being value of £5.7 million. SROI outcomes for individuals show annual improvements in feelings of belonging to the neighbourhood (£2,331 per individual), communication with neighbours (£1,849 per individual), and access to local advice (£888 per individual). Our project has significantly enhanced community engagement, facilitating participation, collaboration, and co-design among customers, communities, and partners. Prioritising wellness programs and creating green spaces has improved physical and mental well-being, increasing the quality of life as measured by WEMWEBS.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

Our initiatives, incorporating housing regulations and tenant engagement requirements, have helped CHA surpass sector standards. The long-term vision for CHA Neighbourhub services emphasises sustainability and community development, building a resilient community for future generations and current customers within CHA's corporate plan.

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## Mersey and West Lancashire Teaching Hospitals NHS Trust Improving inclusivity for our Deaf community through a bespoke training package for staff to raise Deaf awareness

### Category

Communicating Effectively with Patients and Families  
& Environment of Care



Mersey and West Lancashire  
Teaching Hospitals  
NHS Trust

### ORGANISATION DESCRIPTION

Mersey and West Lancashire Teaching Hospital NHS Trust is an acute Hospital within Cheshire and Merseyside. The Trust serves a population of over 600,000 with a combined workforce of around 9,000 dedicated and skilled staff. The Trust delivers care across 5 hospital sites, this includes acute, primary and community. In addition, we provide specialist regional services in the form of a Mersey Regional Burns and Plastic Surgery Unit at Whiston Hospital and the spinal injuries unit at Southport District General Hospital, to more than four million people across the whole of Merseyside and West Lancashire, Cheshire, the Isle of Man and North Wales.

### SUMMARY

Essentially this is a 4-hour bespoke training session delivered in the classroom that will help learners to understand the barriers which exist between hearing and deaf people and how positive action will help reduce those barriers and reverse the discrimination which deaf people may experience. Deaf Awareness Training has been co-designed and delivered in conjunction with experts by experience (profoundly Deaf/Deaf advocate). It has been designed and is suitable for any staff to attend. The initiative is different, innovative and ambitious because training such as this did not exist previously.

It stands out because the course is jointly facilitated by the Quality Matron for Patient Experience and a lived experience facilitator (Usually themselves profoundly deaf with the support of a BSL interpreter) or a Deaf advocate of a partner agency, the Deafness Resource centre. We are working together to listen and address the fundamental needs of our Deaf community when they are in receipt of healthcare. It is a simple idea that often makes us ask "Why hasn't this been done before?" Demand far exceeds supply, requests to attend come from colleagues of previous attendees and is an example of co-delivery that is well executed. The course celebrates 100% positive feedback.

### IMPACT & RESULTS ACHIEVED

As a merged organisation in 2023, increasing from 3 sites to 5, a mirrored training package was also implemented across the legacy hospital sites and utilised the same framework of delivery (experts by experience). Performance is measured in many ways. Feedback is provided in many forms. One measure is the number of applications to attend now exceeds availability. Other adjuncts to the formal training session to get everyone involved have been added and include newsletters, videos of a "sign of the day" such as, hello my name is, welcome, don't worry, how are you? that all staff can quickly learn by watching the Trust Social Media platform.

Now into its second year of delivery >1000 places on the course have been offered to Healthcare personnel. The course celebrates 100% positive feedback. Learning is transformational, in addition to course feedback provided on the day, often staff will get in touch to describe their experiences following the course and importantly the barriers that they have been able to overcome for our Deaf patients as a result of increased knowledge and awareness. This learning is also shared widely for the benefit of other colleague learning. Staff describe their interactions with Deaf patients demonstrating an improved confidence and resilience when facing new challenges, often working through them together with the patient.

### WHAT MAKES THIS INITIATIVE STAND OUT?

The initiative's unique selling point is that it is co-designed and delivered by experts by experience (Usually a profoundly deaf facilitator with the support of a BSL interpreter) or a Deaf advocate of a partner agency, the Deafness Resource centre.

Its inception was brought about by a promise to one Deaf patient that has developed beyond expectation. There is a real thirst for training and a commitment from all Departments that has been unanimous.

### Contact Details

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## Midlands & Lancashire Commissioning Support Unit Lived Experience Partner Participation in Midlands Long Covid Services Peer Review

### Category

Patient Contribution - Individual



### ABOUT NOMINEE

I am nominating Sarah Barley McMullen, a dedicated Lived Experience Partner working on behalf of NHS England. I have had the privilege of working closely with Sarah during the Long Covid Peer Review programme, commissioned by NHS England and managed by NHS Midlands and Lancashire CSU.

Her role and contributions have been integral to the success of this initiative. Sarah was inspired to engage in a patient experience role due to her firsthand experience as a patient in Long Covid Services. As someone who battled Long Covid, Sarah transitioned from a career as a university academic and Diversity, Inclusion, and Belonging lead—a role she held for 16 years—before being compelled to retire due to health issues related to Long Covid.

Her personal journey fuelled her passion for ensuring that patients receive the appropriate support from healthcare services, and she remains a fervent advocate for inclusion and diversity. Sarah's involvement in the Long Covid Peer Review programme exemplifies her commitment to improving patient care.

The Peer Review programme was a collaborative effort designed to allow service users to evaluate the Long Covid Services within the midlands region. This process aimed to identify areas for improvement and share best practices across different trusts and ICBs. Sarah played a crucial role in every panel that reviewed Midlands Long Covid Services, working alongside subject matter experts.

### SUMMARY

Sarah Barley McMullen's journey is a testament to her resilience, dedication, and passion for improving healthcare services for Long Covid patients. Despite facing significant health challenges, she has transformed her personal experiences into powerful advocacy work that has led to tangible improvements in patient care. Her contributions to the Long Covid Peer Review programme, her involvement with professional associations, and her unwavering commitment to inclusion and diversity make her a standout candidate for the Patient Participation Award.

An example of her ability to overcome challenge was at the regional learning event held on 10th July 24 whereby Sarah was due to attend the event as a keynote speaker.

The challenging and varying symptoms associated with Long Covid meant that she was too unwell to attend the event however Sarah arranged to virtually participate via video link. Her presentation and participation throughout the day was outstanding and commended by many of the delegates. The presentation was so powerful that many people in attendance were left speechless. Sarah's work has not only enhanced the quality of care provided to Long Covid patients but has also empowered patients by giving them a voice in their healthcare journey.

Her efforts have created a more patient-centred approach to care, fostering better outcomes and greater patient satisfaction. For these reasons, Sarah Barley McMullen deserves special recognition for her outstanding contributions to the field of Long Covid care.

### AT WORK

Sarah Barley McMullen stands out for her unwavering commitment, passion, extensive experience, and robust professional network, which she brings to every assignment and project she undertakes. With over 16 years of experience as a senior academic and Diversity and Inclusion lead at the University of Derby, Sarah's expertise in addressing inequalities and promoting inclusive practices has been well-honed and widely recognised.

Her journey with Long COVID began on January 18, 2021, when she tested positive for COVID-19. By March 2021, she was diagnosed with Long COVID, leading to a series of debilitating health issues, including chronic fatigue syndrome (CFS), autonomic dysfunction, PoTS, hearing loss, and histamine intolerance. Despite these challenges, Sarah's resilience and dedication to making a difference remained unwavering.

### Contact Details

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## Moorfields Eye Hospital NHS Trust Moorfields 'See The Whole Person' Principles

### Category

Personalisation of Care



### ORGANISATION DESCRIPTION

Moorfields is the leading provider of eye health services in the UK and a world-class centre of excellence for ophthalmic research and education. We have a reputation, developed over two centuries, for providing the highest quality of ophthalmic care, which our staff are committed to sustaining and building on. Excellence, equity and kindness are our values at the heart of everything we do.

### SUMMARY

Principles development borrowed from best practice; participants felt valued and heard by having space/time to share their experience using storytelling. The 'Action Labs' are an innovative way to introduce the principles and empower staff to work together to make changes within their services that have tangible benefit to patient experience. Every phase of the project, from initial development to delivery of action labs, was overseen by the Trust's Excellence Delivery Unit, which provided constructive challenge and support. We fostered a collaborative environment between participants, encouraging open and honest communication, respect, trust, and a strong sense of ownership among staff. Some of the outcomes achieved include: stock-checking system for wheelchairs ensuring patients have access; a bespoke complaints handling system in a service, ensuring complaints are addressed quickly and satisfactorily.

Through participation, staff feel empowered to take responsibility for improving patient experience. After being in an action lab, staff become part of a community who use peer coaching and support to grow an improvement culture across the trust. The principles were co-designed and developed by a team of 20 staff and patients. The action labs have patient representation at each meeting. In recruitment for co-design patient and staff groups, adjustments were made for accessibility needs; group meetings were held over Teams and in-person, at various times and days, ensuring equality of access. Action labs are open, and participation is encouraged, to all teams in the trust. There is a coordinated communications campaign, which includes principle-focus and action lab progress updates via intranet and bulletins.

### IMPACT & RESULTS ACHIEVED

This piece of work has not only made specific and individual improvements to Moorfields services, the impact has been wider-reaching and puts patient experience at the forefront of people's minds on a daily basis. Looking at barriers to providing exemplary care has opened up conversations to overcome barriers and concerns, and gives new enthusiasm to making sure our patients leave the hospital feeling that they have been truly seen as a whole person, as opposed to their eye condition alone. Allowed staff of all roles, specialties and bandings to consider how they impact the patient and carer experience. More widely, the feeling of empowerment to make change has radiated throughout teams, who use the principles to shape staff huddles, or have given members of staff the confidence to suggest other changes that could be made within their working environments. Setting measures for success at the beginning of this project has been important, and allowing the teams to consider what the measures for a successful project will be has been very important in the feeling of owning their projects. The use of a maturity matrix, which asked services to score where they felt they sat on a matrix of responding to patient feedback and initiating change was utilised at the beginning, and then at the end of the project. This served to demonstrate team growth and confidence.

### WHAT MAKES THIS INITIATIVE STAND OUT?

What makes us special is our methodology; embedding of these principles in a practical way. It is unique and progressive for domestic staff, clinical consultants, porters, nurses and administration staff from different teams to work alongside each other to identify the issues they know exist and want to improve to make the carer and patient experience the best it can be. No one person's experience or banding is more important than another. Empowering staff to improve experience is key, happier staff will feel more motivated to go above and beyond, and this elevates the principles beyond an image or poster on a wall.

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## Moorfields Eye Hospital NHS Trust Enhancing Patient care through Virtual Reality

### Category

Innovative Use of Technology, Social and Digital Media



### ORGANISATION DESCRIPTION

Moorfields is the leading provider of eye health services in the UK and a world-class centre of excellence for ophthalmic research and education. We have a reputation, developed over two centuries, for providing the highest quality of ophthalmic care, which our staff are committed to sustaining and building on. Excellence, equity and kindness are our values at the heart of everything we do.

Our main hospital site is based at City Road in Central London. We also provide care from multiple sites across the city in and around London. This means that we can provide more first-class care and treatment in the community, closer to where people live and work.

The populations we serve are diverse and wide-reaching, and every person we see are individuals with different needs. The patient experience team focus on the holistic experience of our patients, their carers and their family members; supporting the wider organisation to consider the patient and carer experience at every step and every interaction.

### SUMMARY

This project allowed us to deliver scenario-based training on the challenges faced by patients with sight impairment using VR. Immersive learning technology or Virtual Reality (VR) is becoming more prevalent in education and training as it totally immerses the learner in a simulated digital replica of reality.

### IMPACT & RESULTS ACHIEVED

- 100 staff were trained using Oculus Virtual Reality headsets for empathy simulation of what it feels like for visually impaired patients accessing care at Moorfields Eye hospital
- The training took place at 3 different sites across Moorfields
- Smart Survey was utilised to gather feedback from all staff attending the training session
- Pre-and post-training questionnaire was sent out to all staff
- Regular email reminders were sent to staff to encourage them give feedback on the training
- The Pilot has shown that there is a need for this training at the Trust
- Most staff surveyed found it useful in understanding what it feels like to be visually impaired
- Staff felt more compassionate after undertaking the training
- Majority of staff found VR useful in training staff and welcome the use for future training
- Staff felt this training impacted their practice and how they will engage with patients going forward
- Most staff would recommend this training to other staff members
- The training received predominately positive feedback
- Majority of staff would prefer to have this training regularly ranging from 1-3 year
- Most staff agreed that the training should be made available to all staff across the Trust
- Staff would like to see different types of visual impairment represented

### WHAT MAKES THIS INITIATIVE STAND OUT?

Immersive learning technology enhances learning by engaging all the human senses of the learner, fostering participation and increased creativity and engagement. Virtual Reality offers an innovative way of delivering education and training, making learning more meaningful and interactive.

Having attended London Simulation Network meeting there isn't any visually impairment simulated VR training available across the National Health service.

The unique selling point of this project is that it can be utilised by non-ophthalmic trusts throughout the country in training their staff how to care for visually impaired patients.

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## National Clinical Homecare Association

### The Best Kept Secret Report: The Value of Clinical Homecare to the NHS, Patients and Society

#### Category

Integration and Continuity of Care including Social Care & Strengthening the Foundation



#### ORGANISATION DESCRIPTION

The National Clinical Homecare Association (NCHA) is the trade body for the Clinical Homecare Industry representing the majority of organisations providing UK Clinical Homecare Services. Over 600,000 patients in the UK receive these services, involving the supply of specialist high-cost medicines and associated nursing care for a wide range of conditions at home or closer to home e.g. cancer, HIV and transplant medicines. This sector is growing relentlessly at over 20% year on year with the NHS Five-Year-Forward View<sup>3</sup> anticipating the further extension of Clinical Homecare services. Clinical Homecare accounts for £4.2bn or 30% of the NHS secondary care medicines budget. This would rise to 60% if extended to all medicines and patients known to be suitable for homecare.

#### SUMMARY

NCHA commissioned an independent report entitled 'Best Kept Secret: The Value of Clinical Homecare to the NHS, Patients and Society Report.' This report quantifies outcome measures which if maximised, could deliver enormous sustainable benefits to patients, the NHS and society across the UK.

Optimising services would deliver against the government's aim of: providing patient care closer to home. This report uniquely quantifies these benefits through detailed economic modelling and an objective patient survey, shining the light on the value of Clinical Homecare services: 62% of people receiving Clinical Homecare reported that it has allowed them to stay in work or education; 75,000 patients avoided a 40 mile round trip with each delivery mitigating geographical inequalities and burden; £264m represents the annual value delivered to UK health economy – through operational savings, enhanced patient experience, and societal benefits; 85% patients report that their medicines were fully explained to them vs 62% in other settings.

We believe this entry deserves national recognition by PENNA to demonstrate the value of providing care closer to home to the wider community and to all those involved in delivering these services

#### IMPACT & RESULTS ACHIEVED

The report highlighted the many findings including: £264 million annually from saved NHS appointments and hospital stays, allowing the NHS to reallocate resources to other critical areas; saving the equivalent of 15 NHS Trusts worth of day case elective capacity, significantly boosting the overall efficiency and capacity of the NHS; patients highlight the convenience and personalised care received, leading to higher satisfaction and better adherence and health outcomes; reduction of travel to hospitals – allowing people to work and retain independence, improved geographical access, helping to tackle inequalities; on average an NHS patient travels 16 miles to their hospital, by consolidating multiple patients' medications into a single, optimised delivery route, the average journey is 6.9 miles travelled per patient delivery with a carbon emission reduction of 22,000 tonnes per year (the additional reduction of cars on the road equates to a benefit to society worth £16 million a year); clinical Homecare Healthcare professionals report higher job satisfaction due to streamlined processes and the ability to provide more focused, personalised care; increased capacity, financial savings and value, reduced wastage and improved medicines adherence, reduced did-not-attend rates, improved medicines stock management and efficient switching of medicines with significant financial benefits.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

Steering group engagement and using independent experts to conduct the evidence-based analysis and recommendations. This is the very first report on Clinical Homecare that quantifies the benefits with regards to the economy and the patient experience.

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## NHS England NHS Cancer Programme: Patient & Public Voice (PPV) Forum

### Category

Patient Contribution – Group or organisation



### ABOUT NOMINEE

I am the People & Communities Engagement Manager for the NHS Cancer Programme based within NHS England and I have been managing the Patient & Public Voices (PPV) Forum for the past two years. People and Community Engagement is a fundamental aspect of NHS England's commitment to integrating the views and experiences of those we serve into our work. The PPV Forum was originally established in 2019 as a way of ensuring the voice of people and communities was embedded within the work of the national programme. The people that make up the Forum, or PPV Partners as they are better known, are all people that have personal experience of having cancer, or have been an unpaid carer to somebody with cancer. It is important to note that many of the PPV Partners are living with cancer, or have ongoing effects following their remission. Despite this, the PPV Partners dedicate hours of their time to working with and supporting the NHS Cancer Programme. PPV Partners are recruited into the Forum predominately through their local Cancer Alliance.

There are 20 Cancer Alliances throughout England. They act as the delivery arm of the National Cancer Programme, ensuring services are designed and tailored to the needs of the local population. For this reason, they are each responsible for their own engagement and have patient representatives supporting their work. The PPV Forum nationally recruits people that are already supporting their local Alliance, this has many benefits including: it ensures excellent geographical spread throughout the country; PPV Partners already have knowledge of how to engage effectively; they have many community connections which they can bring into the national Forum, alongside their own personal experience; they have the support of their Cancer Alliance Engagement Lead and feedback to the group.

### SUMMARY

The National Cancer Programmes, Patient & Public Voice Forum was established in 2019 as a way of ensuring the voice of people and communities are embedded within the work of the national programme. The people that make up the Forum, or PPV Partners as they are better known, are all people that have personal experience of having cancer, or have been an unpaid carer to somebody with cancer. It is important to note that many of the PPV Partners are living with cancer, or have ongoing effects following their remission. Despite this, the PPV Partners dedicate hours of their time to working with and supporting the Programme.

PPV Partners have various reasons for getting involved, the predominant themes are the want to progress earlier diagnosis of cancer, give something back to help future patients, and tackling health inequalities to ensure everyone has the same level of care and treatment, no matter their background. The PPV Partners support a variety of different programmes and work hard to ensure their experiences, and the experiences of others from within the communities they are part of, are brought into critical thinking spaces within the National Cancer Programme. They provide insight, views and critical challenge all from the standpoint of patients and the public.

### AT WORK

The PPV Forum was established in 2019 and has continued to run even during the Covid-19 pandemic. The PPV Partners work hard to ensure their experiences, and the experiences of others from within the communities and networks they are part of, are brought into critical thinking spaces within the National Cancer Programme. They provide insight, views and critical challenge all from the standpoint of patients and the public. Each PPV Partner is given a term of 4 years in role. In 2023, 18 PPV Partners had to step down due to their tenure being finished. This was obviously a difficult time as PPV Partners had gotten to know each other and staff within the National Cancer Programme, however it was also time for reflection on everything that had been achieved during that time. It was also positive to see 18 people stay with us for the entirety of their 4-year tenure, and we hope this is evidence in itself of how valued PPV Partners feel. For those whose tenure came to an end, a Celebration Event was held in London including a video of many Programme Leads giving their thanks and providing examples of impact of engagement.

### Contact Details

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## NHS England

### Lived experience partner Dreaming Collaborative

#### Category

Patient Contribution - Individual



#### ABOUT NOMINEE

I am nominating Forzana. I supported her at the Dreaming Collaborative touch point event for NHS England. I was blown away by her knowledge, skills and kindness. Her energy to help NHS trusts keep up momentum and feel confident to involve people was legendary. She did this after a fall and two injured wrists. She gracefully led her session.

Forzana was part of a task and finish group for experience of care week where she helped programme 60% of the projects showcased. She ensured there was a diverse representation and inclusion of lived experience partners involved in all projects and presentations.

Forzana is a patient partner voice who shares her lived experience to improve projects by applying to teams across NHS England and Integrated care boards. Forzana was inspired as she wanted others to have a better experience than she did so she uses her experience to make change to quality and patient safety.

Forzana got involved in the dreaming collaborative because she experienced de-conditioning and was diagnosed with multiple illnesses that left her needing oral nutritional support. She identified gaps from her own care and the voices of her network to bring to the collaborative to encourage involving people and giving cost effective improvements that can have direct impact and easy implementation for the trust, staff and improve patient experience.

With personal health budgets she has one which she also identified gaps, involved people who also had a budget nationally to get involved in the project of delivering the PHB service support directory. She co-facilitated sessions and supported NCL ICB to recruit more widely, to offer rewards and recognition through certificates, vouchers and an involvement payment.

She was involved in spreading the project globally to encourage others to involve people and show how successful it can be having a directory that works for people. The lived experience partners she coproduced with went on to further training and paid work.

Forzana joins experienced teams with different stakeholder involvement in NHS England.

#### SUMMARY

Forzana deserves recognition because she tirelessly ensures everyone she is involved with has recognition. This uplifting support to others should be recognised and her commitment to quality improvement and safety goes beyond her volunteering role but is a way of life for her.

She has supported NHS staff by using her coaching and mentoring skills to help them fulfil their goals. She has been part of recruitment teams to ensure people can have the best possible experience by having the right staff in the best positions for them to “shine.” She is encouraging to me to apply for roles also and has helped me see the value of involving people.

#### AT WORK

Forzana stands out in the team due to her knowledge and emotional intelligence to share. She never comes across as abrupt and is a pleasure to collaborate with. She is fair, just and honest. If she doesn't know something she is not afraid to ask and always promotes the use of simple language so everyone can understand. She is confident to speak to staff members across all bands and has a warm, authentic leadership style which has led to her mentoring new members to the Peer Leadership development programme.

Forzana is new to the field and has been involved for two years but has made a positive impressionable impact on all teams and people she has worked with. She believes in bringing people with her and being the bridge to and improved quality of life for people. She realised she could not do this alone and she could make an impact with people.

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## North West Ambulance Service NHS Trust

### Acting upon feedback shared from patients and the communities we serve to drive service improvement

#### Category

Measuring, Reporting and Acting - Using Insight for Improvement

**NHS****North West  
Ambulance Service**  
NHS Trust

#### ORGANISATION DESCRIPTION

North West Ambulance Service NHS Trust (NWAS) provides urgent and emergency care (999 service) 24 hours a day, 365 days a year across the North West of England.

We also offer non-emergency patient transport for those who need assistance traveling to and from medical facilities and operate the non-emergency NHS 111 service to guide patients to appropriate care.

#### SUMMARY

NWAS' community listening events capture and act on patient and community feedback, leading to meaningful service improvements. They engage underrepresented groups, improve service awareness, and lead to change based on direct feedback. Involvement and inclusion are central to the initiative, with targeted outreach to diverse communities, ensuring their voices contribute to shaping service delivery.

The approach is highly transferable, with structured feedback mechanisms and best practices that can be adapted by other healthcare providers. Dissemination is achieved through internal communications, community newsletters, social media, and monthly bulletins, promoting widespread awareness and adoption of the improvements. Throughout the 2023/24 events we experienced a few challenges, including resources within the team being stretched due to long-term sickness. Despite this, we had one of the most successful cycle of events we have produced.

#### IMPACT & RESULTS ACHIEVED

The five community events we held in 2023/24 attracted 202 attendees. 33.2% belonged to ethnic minorities and 14.4% identified as having an accessibility need through the booking form. An evaluation questionnaire showed that 92.21% felt the event had improved their knowledge of the ambulance service and 89.61% were satisfied with the event. This demonstrated we achieved our original aim of improving awareness and access to ambulance services, PES, NHS 111, and PTS, particularly among underrepresented groups. Another aim was to identify opportunities for service improvements, so we monitor any changes made as a direct result of the engagement/feedback at the events.

Recent examples include: feedback suggesting low awareness of PTS and NHS 11, particularly among ethnic communities, has informed specific 111 and PTS awareness raising communications campaigns and the development of information materials in several languages; a CFR raised an issue with defibrillator maintenance and the replacement of pads and batteries after use. We shared these concerns with the national defibrillator network, the Circuit, which will now include this information in publicity materials. Additionally, we featured an article about this issue in our April edition of Your Call magazine; the Lancashire Council of Mosques requested cardiopulmonary resuscitation (CPR) training and a visit to Lancashire Mosque schools, and we are currently in contact with them to organise this; a community group in Cheshire requested information on defibrillator access and CPR training, and we are discussing how to facilitate this; in Lancashire, the Deaf Village suggested a British Sign Language (BSL) route for NHS 111 similar to the one for 999. Consequently, a colleague from NHS 111 and a member of the Patient Engagement Team visited the Deaf Village to explain all the different ways deaf patients can access NHS 111.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

The community listening events stand out due to their commitment to inclusivity and actionable insights. Unlike traditional feedback mechanisms, this initiative directly involves underrepresented groups, ensuring their voices shape service delivery. The practical application of feedback, such as the introduction of BSL interpreters and targeted educational materials, highlights NWAS' proactive approach to addressing identified gaps. We give our patients a voice, ensuring that they are heard, and improvements can be made from their feedback. This provides reassurance, and also gives us appropriate information to make appropriate changes where required.

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## North West Ambulance Service NHS Trust

### Engaging with our patients, communities and volunteers to help us improve our services within the ambulance service to better patient care

#### Category

Patient Contribution – Group or organisation

**NHS****North West  
Ambulance Service**  
NHS Trust

#### ABOUT NOMINEE

North West Ambulance Service NHS Trust (NWS) provides urgent and emergency care (999 service) to patients 24 hours, 365 days a year across the North West of England. We also provide non-emergency patient transport services (PTS) for those who require transport to and from hospital and are unable to travel unaided because of their medical condition or clinical need. Alongside 999 and PTS, we provide the non-emergency NHS 111 service by phone and online to help patients across the region receive medical advice and signpost them to the most appropriate care for their condition. As a small team of 7, we work directly with patients, patient groups, and volunteers, delivering a range of patient experience and engagement activity, including the hosting of several large-scale free community engagement events every year.

#### SUMMARY

We consistently prioritise our patients, carefully considering how changes might impact them. Involving our patients and volunteers in our work is crucial; without their input, we might miss better ways or systems that could be more effective. Our community contacts database includes over 1,000 individuals and groups. We offer all our contacts the opportunity for us to meet with their group. On average, we engage with 40 community groups annually to provide updates about our service and participate in our PENNA award-winning board game. Since the Covid-19 pandemic, we have focused on re-engaging with our contacts, developing new relationships with hard-to-reach communities, and recruiting volunteers for our Patient and Public Panel (PPP). We regularly champion our work through internal channels, trust news bulletins, and magazines to keep everyone informed about our activities and the changes from patient feedback. The establishment of our PPP has been highly successful, with strong participation from both the public and staff. This has allowed us to involve volunteers in a wide range of projects. The significant engagement from staff wanting to involve PPP members in their projects has been remarkable. Additionally, we have been asked to support projects led by NHS England, thanks to the positive impact our PPP members have had within the trust.

#### AT WORK

The Patient Engagement Team collaborates with various patient groups and our volunteers on the Patient and Public Panel (PPP). Over the past 4.5 years, our close partnerships with these groups and communities has enabled us to build strong relationships and recruit volunteers from diverse backgrounds, including individuals with accessibility needs. By consulting and listening to patients' experiences, we can improve our services for others with similar health conditions. We work with a wide range of groups, including those focused on deaf, carers, dementia, LGBT, mental health, and learning disability. This allows us to gather feedback and insights from a broad spectrum of personal experiences, which we then use to develop materials containing key messages and produce patient stories.

To accommodate individual needs, we meet with groups both online and in person. Our team has undertaken various training, including plain English and basic BSL, enhancing our communication with groups, particularly those with learning disabilities and the deaf community. Within our department, the PPP comprises over 300 volunteers from across the North West. Our PPP, with its three-tiered involvement structure, is the first of its kind for an ambulance service in the country and potentially the NHS. This structure combines a digitally-led approach with face-to-face opportunities, providing an inclusive framework for volunteer engagement. PPP members and NWS staff from various cities and towns can meet in person or virtually, supporting our goal of diverse representation by ethnicity, gender, disability, and age (with a target of at least 40% of the membership). Our PPP membership is diverse, including over 100 young people and more than 90 members from various communities. This diversity allows us to gather valuable feedback on new and existing projects and incorporate the patient voice to drive improvements.

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## North West Ambulance Service NHS Trust Patient Engagement Team

### Category

Team of the Year (including complaints and PALs)



**NHS**  
North West  
Ambulance Service  
NHS Trust

### ABOUT NOMINEE

North West Ambulance Service NHS Trust (Nwas) provides urgent and emergency care (999 service) to patients 24 hours, 365 days a year across the North West of England. We also provide non-emergency patient transport services (PTS) for those who require transport to and from hospital and are unable to travel unaided because of their medical condition or clinical need. Alongside 999 and PTS, we provide the non-emergency NHS 111 service by phone and online to help patients across the region receive medical advice and sign post them to the most appropriate care for their condition.

### SUMMARY

We are a small team covering one of the largest county areas in England. Since our restructure, we have welcomed four new team members in the past two years. Despite the challenges of integrating new starters, who must adapt to our diverse services and key responsibilities, the team has shown remarkable resilience. We strive to attend as many community events as possible throughout the week and weekends to ensure our messages about our services, career opportunities, volunteer roles, and life-saving skills reach a broad audience, including children and young adults, across the five counties we serve. This year has been particularly challenging as our team manager fell seriously ill, resulting in their long-term absence without a managerial replacement.

Additionally, several team members faced short-term illnesses and multiple bereavements. The team had to quickly adapt to a new working way with reduced capacity whilst meeting the demands from the workforce. Despite these challenges, the team continued their regular duties while successfully completing our 2023/24 series of community engagement events. The team were faced with many challenges and changes during our last series of events such as changing activities so we did not have the same repeating activities and could capture different feedback, introducing guest speakers such as a volunteers speaker and producing accessible presentations whilst missing two vital colleagues who are the leads for the events and delivering our last event only two weeks after our 4th event. Whilst delivering the events with reduced team capacity, we were also completing projects and finalising data which needed to be complete by the end of the financial year. Once we had finished our events, we met as a team to discuss what went well and lessons learnt. We consistently gather feedback from attendees at our events to identify areas for improvement.

Debrief meetings after each event allow us to review this feedback and implement changes promptly, ensuring we act on what people tell us.

Our team is deeply passionate about patient engagement, always seeking ways to connect with hard-to-reach communities and improve patient experiences. We have made significant strides in engaging with the Jewish, Chinese, and LGBT communities, focusing on listening to their needs and supporting them from a cultural perspective. Despite our focus on patient engagement, we prioritise health and wellbeing within our team. Daily wellbeing checks and morning meetings ensure everyone is supported and prepared for the day. These 15-minute meetings allow team members to share important news and set daily priorities. The positive feedback we receive from engaging with patient groups and at community events reflects our dedication. In fact, 90% of attendees at our 2023/24 community engagement events reported being very satisfied or satisfied with the events.

### AT WORK

We are proud of our progress in enhancing patient care and accessibility. To raise awareness of the expertise within our team and how we can support other areas of the trust to make improvements based on patient experience, we promote our activity. We align with awareness days and months through social media, send monthly newsletters, attend internal meetings and external events, and share news on the trust website. We also regularly meet with Patient Experience Leads from other ambulance services and NHS trusts to share and discuss improvements in patient experience.

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### Northern Cancer Alliance My Wellbeing Space

#### Category

Cancer Experience of Care Award



#### ORGANISATION DESCRIPTION

The Northern Cancer Alliance (NCA) covers the North East and North Cumbria geography (3.1 million people) and is aligned to the North East and North Cumbria (NENC) Integrated Care System (ICS). The area includes 14 Local Authorities, 67 Primary Care Networks and 11 NHS Foundation Trusts.

#### SUMMARY

Online searches for health information produce hundreds of results, and patients are not always able to sort the good from the bad. Good-quality health information can improve patient understanding, whilst poor-quality information or misinformation may have a detrimental effect on decisions. Online information can be used alongside clinic appointments, which are often time constrained, to support personalised care planning. My Wellbeing Space ([mywellbeingspacenca.nhs.uk](http://mywellbeingspacenca.nhs.uk)) is an online resource designed by patients and carers for patients and carers developed to help patients during and after treatment - providing good quality information and support whenever it is needed in one place.

The space has been co-produced to empower people living with cancer to take back their self-efficacy and independence - providing easy access to practical Health & Wellbeing advice and support including videos and podcasts and interactive service maps. The layout has been pretested with patients and carers during development is simple to navigate with accessibility tools to support with digital inclusivity. Although developed as a resource to support patients and our system partners within NENC, with open access it has potential to be of benefit to a much bigger footprint. The space will continue to evolve and reflect the needs of our patients and carers based on feedback, analytics and patient experience data.

#### IMPACT & RESULTS ACHIEVED

Verbal feedback has been obtained at each step of development from individuals and from focus groups regarding the content and usability. Feedback has been given from Health care professionals which includes Macmillan Information Staff, who use this space to facilitate conversations on areas of concern which then allows the patient and staff to access equitable, credible and trustworthy information. Patients and staff have provided a wide range of feedback about how relevant, supportive and extraordinary they find the resource and have thanked all teams involved for developing it as a region. We now have an appropriate platform to share all public facing information and can be responsive to a new ask in a timely manner. Patients treatment pathways cross many health care providers and having a single source of information accessible in different forums has ensured patients receive equitable, up to date and consistent information irrespective of where that care is delivered. Using google analytics we will monitor engagement with the web space to help with understanding user behaviour and inform content development; and to create a better user experience and higher utilisation rates. There is also a rolling feedback point and we are planning to do focused feedback in September 2024.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

My Wellbeing Space is designed by patient and carers for patient and carers. It has been co-designed from the point of idea through to local then regional delivery. We have listened to patient feedback and developed the concept into a easy to navigate format. The resources available on topics/issues are relevant to those affected by cancer providing reliable, credible information in one space. It allows patients to be empowered to seek their own health and well being support to meet their individual needs. It includes support for carers to reflect the wider impact of cancer. Throughout we have been well connected with partners to understand and acknowledge the current issues that impact patient and carers. We have the ability to promptly respond to emerging issues and revise and update as required. It is a tool that can be used and shared by a wide audience – partners, nurses, other health care professionals and patients. It is one resource for the region to ensure we have one voice and equitable access to digital information and support; reducing the burden on local organisations to duplicate the offer of digital support and maintain a resource.

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## Northern Health and Social Care Trust (NHSCT) Connect North

### Category

Commissioning for Patient Experience & Partnership  
Working to Improve the Experience



### ORGANISATION DESCRIPTION

The Northern Health and Social Care Trust (NHSCT) is the largest of five Health and Social Care (HSC) Trusts in Northern Ireland employing approximately 66,000 people to provide a range of services to approximately 479,000 people across 1,733 square miles including Rathlin Island. Connect North aims to provide a holistic and comprehensive social prescribing service to clients over the age of 18 who are experiencing a range of social, practical or emotional issues and supporting them to connect with services available within their local community to improve their health and wellbeing. Connect North is unique in that it is delivered in partnership across two sectors: HSC and the community and voluntary (C&V) sector by the NHSCT and Age NI respectively.

### SUMMARY

Connect North is the result of a comprehensive lens co-design process with stakeholders, service users and carers. It is a needs-led, integrated, person-centred and sustainable model for social prescribing in the NHSCT (diagram 1). Uniquely delivered in partnership by 2 organisations across 2 sectors working as one team combining leadership, resources and expertise for maximum impact. Our steering group (project team, stakeholders, service users and carers) meet regularly to monitor objectives and to realise the reality of lived experience maintaining a person centred focus.

Leading on research, analysis and procurement of digital software, the project team use evidence-based data to drive client, service and system level outcomes. The creation of our online directory of services enables more and earlier access to support along the client care journey. Link worker capacity is now protected for clients who specifically require 1:1 support from a link worker. No other service of this kind exists in Northern Ireland. Our approach to creating a needs led co-designed model is fully transferable.

### IMPACT & RESULTS ACHIEVED

Partnership working, integration and digitalisation highlighted historic and now avoidable gaps and inefficiencies in the care journey and system. Our needs led and data directed service design and delivery enabled a shared partnership vision and collaboration of expertise to maximise resource and impact. Our shared directory lists more than 900 services and activities receiving 1,103 users in the last quarter accessing 51,934 pages. 20% of users are returning users. Our directory enabled us to develop a stepped model of care to support more clients earlier, at every opportunity and throughout their care journey (diagram 3).

To date we have supported over 1,500 referrals, conducted over 17,000 client interactions and trained over 240 referral agents from 25 organisations. Our top referral reasons include: dementia, connecting to groups/activities, befriending and loneliness and isolation. 87% of referrals are for clients over 65-years. More than 1,030 social prescriptions and 2,500 signposts have been made. 75% of clients report an improvement in their primary wellbeing concern and 89% of clients report an overall improvement or maintenance of their health and wellbeing. 100% of clients report a positive experience finding the service helpful and informative.

### WHAT MAKES THIS INITIATIVE STAND OUT?

Connect North is uniquely authentic, needs led and co-designed. "Connect North – your pathway to wellbeing" was named by service users, our holistic needs assessment tool was selected by users and we are unaware of any other social prescribing service delivering the same degree of cross-sectoral partnership working or public and personal involvement. Our resources are user led and co-produced. The user and carer voice is now inherent throughout every aspect of our service. Inherited and outdated systems and processes were able to be mapped and scrapped. Service processes and communications are timely, effective and efficient.

Standards have been developed from evidence of practice to ensure fairness and consistency for referral agents, services and clients. Our model focusses on client need rather than.

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## Northumbria Healthcare NHS Foundation Trust

### Giving Voice to Patients and Staff in an out of View Service – a Relational Approach

#### Category

Measuring, Reporting and Acting - Using Insight for Improvement & Staff Engagement and Improving Staff Experience



#### ORGANISATION DESCRIPTION

Northumbria Healthcare Trust (NHCT) employs 12,000 staff and provides care to over 500,000 people in Northumberland and North Tyneside. We are the largest geographical Trust in the UK, covering 2500+ square miles. Our facilities include emergency care hospital, general and community hospitals, outpatient/diagnostic centres, elderly care units, an integrated health and social care facility. North Tyneside Mental Health Services for Older People (MHSOP), part of NHCT, provides psychiatric services for older people in North Tyneside. This includes two Community Mental Health Teams, Nursing Home Team, Liaison Service, Outpatient Memory Clinic, Young Onset Dementia Service, two on-site MHSOP wards.

Ward 20 is an organic psychiatric ward caring for people living with dementia; Ward 21 is a functional older persons' psychiatric ward. Both have 14 beds and a ward manager, psychiatric nursing, healthcare assistants, OT, activity coordinator, medical staff, domestics, and psychology input.

#### SUMMARY

Older adults with mental illness experience significant health inequalities. Their care requires sensitivity, with distinct observational and relational skills. Staff need support in this for individual and team functioning and wellbeing. This project created an ongoing, unique focus, triangulating patient experience/relatives' feedback and culture work with staff to enhance relational understanding and make data meaningful. We recognised invisibility of MHSOP wards, which weren't appropriate for our Real Time patient feedback.

We designed bespoke feedback to capture patients' / relatives' experiences and responded to additional insight into staff working within this service, with feelings of similar invisibility and lack of understanding across the acute organisation about their specialised work. The project witnessed a new collaboration between the MHSOP leadership team, clinical team, and Experience Team.

Staff Experience Survey feedback for this team had not previously reached the reporting level. Success of the project is measured quantitatively and qualitatively across patient feedback, relatives' contribution, staff survey feedback, and the development of bespoke relational team charters. Staff training, including trauma-informed care, psychological safety and development of team charters, is now central to MHSOP inpatient service development, influencing 'Working with Teams' interventions across the organisation.

#### IMPACT & RESULTS ACHIEVED

PATIENT FEEDBACK IMPACT included: independent observations and feedback from relatives, provides a patient 'voice' from a previously unheard population; bespoke Real Time feedback on Ward 21 provides comparable data with our medical wards, incorporating quantitative and qualitative data; infographics give visual summaries for staff and patients STAFF SURVEY AND RELATIONAL TEAM WORKSHOPS IMPACT included: staff survey results improved post-workshop and reached team-level reportable numbers.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

This initiative stands out in the following ways:

- We believe the combination of triangulated staff/patient data, and a relational process, makes data meaningful
  - Cost-effective; in comparison to Dementia Care Mapping which, whilst has its place, is resource/time-intensive
  - Holistic and bespoke; focussed work to improve both the patient and the staff experience in a less visible service
- Key elements to success:

1. Joint initiative with ward, patients, relatives, and Experience Team
2. Engagement at a senior level on the ward and through the entire team

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## Northumbria Healthcare NHS Foundation Trust

### Improving the Experience of our Patients with Dementia, Delirium and Complex Needs

#### Category

Environment of Care



**Northumbria Healthcare**  
NHS Foundation Trust

#### ORGANISATION DESCRIPTION

Northumbria Healthcare Trust (NHCT) employs 12,000 staff and provides care to over 500,000 people in Northumberland and North Tyneside. We are the largest geographical Trust in the UK, covering 2500+ square miles. Our facilities include emergency care hospital, general and community hospitals, outpatient/diagnostic centres, elderly care units, an integrated health and social care facility.

Ward 6 provides acute care for elderly patients at the Northumbria Specialist Emergency Hospital, the average age of patients admitted in 2023 was 83 years and 1 in 5 suffered from dementia. The ward has a ward manager, nursing team, healthcare assistants, medical staff, ward admin, domestic, modern matron, OT and physio input. Older adults often present with a range of complex medical conditions and even minor changes in their condition can lead to deterioration in their health and their ability to live independently. During 2023 we noted a rise in patients admitted with 4 or more risk codes and an increasing need to consider the best way to sensitively manage their care in an acute environment.

#### SUMMARY

Using patient/family feedback from our Real Time Patient Experience reports and staff consultation as part of a Staff Experience workshop, we agreed a series of changes which would provide a therapeutic approach to the functional and emotional wellbeing of our patients whilst being rewarding for our staff. Following consultation with the OSM, Admiral Nurse, Clinical Educators and the NICE guidance on the prevention, management and treatment of delirium in hospital we: changed the environment – created a Reminiscence Room, dedicated Activities room and Therapy Walkway; appointed an Activities Coordinator; delivered a programme of activities aimed at reducing patient anxiety and disorientation; provided safe management of those assessed as at risk of falls via individual or group activities; promoted good fluid and nutrition intake at our 'Lunch Clubs'.

The project was supported by the Trust CEO and the Trust's Bright Charity and was agreed and delivered by the Ward 6 MDT.

Outcomes: Patient and staff experience feedback, patient falls rates and mood were monitored throughout the project. This project benefitted from widespread MDT collaboration, utilised patient, families and staff feedback and would be of use on any area caring for elderly patients.

#### IMPACT & RESULTS ACHIEVED

The environmental changes and having an activity co-ordinator have made a significant change to patient and relative experience, staff moral and staff retention. We audited falls, patient mood and patient/relative experience. We also sought feedback from staff on their views of the changes. We saw a sustained increase in the completion of AFLOAT assessments from April 2023 with an upward trend in patients who required level 3&4 observation.

Reassuringly, we did not see any increase in our incident of falls indicating some success in the use of supervision supported by therapeutic activity as a tool to help manage falls risk. Mood was monitored at the beginning and end of each session using and 'Emotion Indicator'. A positive change in mood was noted in each mood category. 97% of patients said they would recommend this service to friends or family if they needed similar care.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

This initiative stands out in the following ways: the project originated from focused work to understand what contributes to positive patient and staff experience; the ward team led this project work and delivered improvements in both patient and staff experience; the focus on holistic patient care produced safer management of patients at risk of falls; patients showed an improvement in mood assessment. Key elements to success: joint initiative with ward, patients, relatives, and Experience Team; Engagement at a senior level on the ward and through the entire team.

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## Northumbria Healthcare NHS Foundation Trust Tackling Health Inequalities when Delivering School Aged Immunisation Programmes Through Co-Design

### Category

Communicating Effectively with Patients and Families



**Northumbria Healthcare**  
NHS Foundation Trust

### ORGANISATION DESCRIPTION

Serving one of the largest geographical areas of any NHS Trust in England, Northumbria Healthcare provides a wide range of services to more than half a million people living in Northumberland and North Tyneside.

It is one of the few Foundation Trusts in the country to have been twice rated 'outstanding' overall by the Care Quality Commission.

It is consistently one of the best-performing NHS organisations in the country. More than 12,000 dedicated NHS staff are employed to provide services across health and care sites and the wider community.

### SUMMARY

**New Thinking:** Thinking differently as to where and when the school aged immunisation programme is delivered.

**Leadership:** Both initiatives were community and staff led in their development and implementation.

**Outcomes and Sustainability:** Reduction in the number of "was not brought" rates and improvements in the uptake of the HPV vaccine in the Jewish community.

**Involvement and Inclusion:** Adoption of a co-design approach to improving the uptake of the HPV vaccine in the Jewish community, in particular the relationship with the Rabi.

**Transferability and Dissemination:** Both initiatives have been shared within and outside of the Trust as an opportunity to share learning with others.

### IMPACT & RESULTS ACHIEVED

**Jewish Community:**

As a result of this close working relationship, the HPV consent uptake for HPV is currently sitting at 91% for one of the Jewish High Schools.

**School Aged Immunisation Team:**

The WNB rate is now 9%. This is monitored after every vaccination campaign. Verbal feedback from families attending the clinics is that they can shop after the vaccinations, go for food or take their children swimming, or engage in other sporting activities such as trampolining.

### WHAT MAKES THIS INITIATIVE STAND OUT?

The co-design aspect of the work with the Jewish community was key to the success of this initiative. The 4 principles of this approach were as follows:

**Participation:** Working closely with the Rabi and GP, where everyone had a voice and a shared plan.

**Development:** Developing the new leaflets together and actively learning from each other.

**Ownership & Power:** We fostered a collective ownership and ensured an equal partnership of all processes for the leaflet production to ensure we reached a shared outcome.

**Outcomes & Intent:** When we first met with the Rabi we focused on the outcomes and worked backwards, looking at our clear vision and design on what direction we all wanted to go with the HPV information sharing.

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## Northumbria Healthcare NHS Foundation Trust Using the Patient and Public Voice Strategically to Contribute to the Quality Improvement of Trust Services

### Category

Engaging and Championing the Public



**Northumbria Healthcare**  
NHS Foundation Trust

### ORGANISATION DESCRIPTION

Serving one of the largest geographical areas of any NHS Trust in England, Northumbria Healthcare provides a wide range of services to more than half a million people living in Northumberland and North Tyneside. It is one of the few Foundation Trusts in the country to have been twice rated 'outstanding' overall by the Care Quality Commission. It is consistently one of the best-performing NHS organisations in the country. More than 12,000 dedicated NHS staff are employed to provide services across health and care sites and the wider community.

### SUMMARY

Our ambition was to form a patient and people involvement group made up of lay representatives to act as a critical friend, bringing their perspectives through lived experience, and that of the wider population Northumbria serves. The Patient and People Perspective Group (PPPG), comprising of 7 lay representatives, is a new approach to strategic level involvement within our organisation and has been established for 12 months. They continue to play a crucial role in the ongoing establishment and integration of the group and have been welcomed across our organisation. In addition to monthly meetings, the lay representatives are involved in and provide advice on multiple strands of improvement work ranging from Virtual Wards to Cancer Prehabilitation Services to acting as Patient Safety Partners.

The PPPG is Chaired and Vice-Chaired by the lay representatives. They are in early development of plans to co-produce an annual report detailing their work over the first 12 months and planning an annual Trust-wide event to share the report, further promoting and raising the profile of the PPPG and their role. We have been approached by other NHS Trusts and met with them to share learning to date, as well as sharing governance and recruitment documentation and an invitation to attend PPPG meetings.

### IMPACT & RESULTS ACHIEVED

The PPPG will celebrate its first anniversary in July 2024, retaining the original 7 lay representatives recruited to launch the group. The group is Chaired and Vice-Chaired by the lay representatives. The membership has co-designed many group documents and processes, including the Terms of Reference, annual work plan and communications plan. A fair and open process for involving lay representatives in individual projects and initiatives across the Trust has also been established.

As well as being instrumental in the establishment of the group over the last 12 months, the lay representatives have individually or collectively been involved in a range of activities including the following: co-delivered a World Café session with Trust staff to engage with the voluntary and charity sector to inform the development of the Northumbria Patient Charter and Trust strategic priorities for unpaid carers; development of the Northumbria Patient Charter and membership of a working group to support the integration of the charter into business as usual for the Trust and the development of the new Northumbria clinical strategy; and co-delivered workshops at Northumbria events including the Northumbria Clinical Strategy Event in May 2024. We have received positive and encouraging feedback from Trust sub-group members who are working in partnership with the lay representatives on a range of improvement initiatives.

### WHAT MAKES THIS INITIATIVE STAND OUT?

The achievements of the group over the last 12 months make this work feel special. The role of the lay representative as a critical friend and the formation of the Patient & People Perspective Group was a new approach to strategic level involvement in the Trust. The set-up of the group was welcomed and the culture within Northumbria of putting our people at the centre of everything we do, helped us to overcome the early challenges in the set-up phase. Overcoming some of these early challenges was also facilitated by the great Northumbria "people" who are always willing to support new ideas and work out how we get to our ultimate goal!

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## Northumbria Healthcare NHS Foundation Trust Working in Partnership to Transform Healthcare Experiences and Outcomes for D/deaf People

### Category

Partnership Working to Improve the Experience



Northumbria Healthcare  
NHS Foundation Trust

### ORGANISATION DESCRIPTION

This project is a collaboration between 4 organisations: Deaflink, Northumbria Healthcare NHS Foundation Trust (NHCT), Newcastle upon Tyne Hospitals NHS Foundation Trust (NuTH) and Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW).

### SUMMARY

Evidence shows the BSL (British Sign Language) community has higher-than-average health conditions not deriving from deafness. Most are preventable, leading to health inequalities and increased mortality. Despite existing legislation, health services routinely 'fail' the Deaf community as they are not accessible; miscommunication, inaccessible information and lack of understanding lead to treatment delays and poorer outcomes. Working with the Deaf community and regional hospital trusts, Deaflink developed an innovative 'BSL Health Navigator' role to transform healthcare experiences and outcomes for Deaf patients, providing personalised help to 'navigate' healthcare journeys (preparing for appointments, aiding communication, supporting discharge, ensuring treatment options are understood, and engaging with hospital staff and the Deaf community to improve services).

The project is led by people with lived experience, employed as Health Navigators, overseen by a multi-agency, system-wide steering group. Over 80 BSL users have been supported, with over 2,885 health/social-care related contacts. Working in partnership has improved patient experience/outcomes, inclusion, access and waiting times. We believe our innovation is transferable to improve involvement and inclusion for people with other disabilities and long-term health conditions.

### IMPACT & RESULTS ACHIEVED

We established core metrics for a theory of change model, developed as a partnership. This was challenging because many Deaf people struggle with traditional approaches for feedback, and NHS Trusts are poor at recording peoples' BSL status. However, user-evaluation was built in from the start, with structured feedback from clients (supported surveys), case studies/stories and anecdotal information. Deaflink provided monthly progress reports, incorporating data on the numbers of BSL people supported, the types of intervention, and case studies illustrating impact by highlighting the complexity of inclusion and accessibility issues. Reports demonstrated emotional, mental, and physical impact, and patient safety issues that poor access was having. Since April 2022, over 80 clients have accessed the service, often multiple times after discovering its benefit. The Navigators have offered 2,885 healthcare contacts, frequently helping at numerous points to ensure success of a single healthcare appointment.

Over 70 different health conditions have been supported, suggesting prevalence of co-morbidity and successive health episodes in this community. The Navigators have helped to identify specific patient issues and escalate them, improving patient safety, and highlighting just how complex it is for BSL users to access healthcare/how many barriers there are. The partnership is having a significant impact, improving outcomes for BSL users. Deaf people have better access to acute emergency/ambulatory/urgent care, outpatient appointments, mental health treatments, social work, dental care, pharmacy, and primary care.

### WHAT MAKES THIS INITIATIVE STAND OUT?

The steering group is unique in driving change and recognition of issues, with strong commitment from all partners. Working in partnership allows more effective identification of barriers which prevent access to services, raising awareness and generating solutions to complex issues, e.g. reliable BSL interpretation. Working jointly helps us integrate our organisational approaches, and share key information/resources. Data collection has been problematic, meaning identification of need has historically been an issue; working together will help us explore how to improve coding practice to obtain the full picture, develop a dataset, and implement a monitoring process at a strategic level.

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## Nottingham University Hospital The virtual Patient Bay Project

### Category

Staff Engagement and Improving Staff Experience



Nottingham University Hospitals  
NHS Trust

### ORGANISATION DESCRIPTION

With more than 19,000 colleagues, we are the largest employer in Nottinghamshire and one of the biggest and busiest NHS Trusts in the country, with a budget of £1.7bn. As a specialist centre for a range of national and internationally renowned services, including stroke, renal, neurosciences and cancer services, we care for people from across the East Midlands and beyond.

We are home to the East Midlands Major Trauma Centre, the Nottingham Children's Hospital and in partnership with the University of Nottingham we host a Biomedical Research Centre carrying out vital research into hearing, digestive diseases, respiratory, musculoskeletal disease, mental health and imaging.

### SUMMARY

The Virtual Patient Bay (VPB) is a new concept in digital e-learning, bringing the reality of looking after a group of patients into a safe area, self-paced interactive learning experience using a simple systematic approach. The project has been supported by senior leaders and professional colleagues that have helped to drive the project forward to see the successful launch. This involved frequent meetings to discuss the content, planning and implementation. The project was also shared at conference and at Education meetings.

Following the successful pilot digital phase with minimal amendments, we were able to go ahead with the launch date. All learners are asked to complete an evaluation at the end of the programme. There were 27 NQN's that took part in the pilot but only four provided feedback. Learners commented that the VPB met their expectations, had enough guidance throughout the course and that it was an interesting and engaging experience. The project was exclusively aimed for NQN's but through stakeholder discussions, it was decided that the VPB should be open to all registered nurses/Nurse associates. Can be transferred to other divisions and organisations and the project has been shared widely through forums.

### IMPACT & RESULTS ACHIEVED

The paper based project used 2 D radar charts and showed positive results. This involved pre and post-test to measure the impact. Staff found the C.A.L.M approach to be a useful supportive tool. The digital phase is still in its early days but the pilot phase returned positive results. Well-constructed, easy to navigate, had enough guidance to complete the course, interesting and engaging experience and the course material met their expectations. We used the Likert method to gain quantitative feedback but also allowed comments to gain qualitative feedback. Further results will be obtained later on in the year to measure the impact.

### WHAT MAKES THIS INITIATIVE STAND OUT?

In the fast-paced world of healthcare, prioritising patient care efficiently and confidently is paramount. Recognising this critical need, the Virtual Patient Bay e-learning course offers an innovative solution to healthcare professionals seeking to sharpen their decision-making skills. This interactive online course is designed to guide learners through the complexities of patient care prioritisation using a systematic C.A.L.M. approach. This methodology categorises patient care tasks into four levels of urgency: tasks that "Can't wait, must be done now," those "Action as soon as possible," tasks to "Look to do sooner rather than later," and those you "Make time later or handover."

Such a structured approach is pivotal in enhancing patient care delivery. The course unfolds through six meticulously crafted adult based scenarios, each served with the support of a virtual assistant. This assistant is not just a guide but a mentor that steers learners through decision-making processes, ensuring they grasp the essence of prioritising under pressure.

The Virtual Patient Bay really stands out as it is more than just an educational course; it's a confidence-building journey. It focuses on five key areas of decision-making in patient care, allowing learners to develop and refine their prioritisation skills in a controlled, risk-free environment. This eLearning resource is not just a course; it's a stepping stone to excellence in patient care prioritisation.

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## Nottingham University Hospitals NHS Trust NUH Adult Critical Care Bereavement Support

### Category

Support for Caregivers, Friends, and Family



Nottingham University Hospitals  
NHS Trust

### ORGANISATION DESCRIPTION

Nottingham University Hospitals NHS Trust (NUH) is one of England's largest and busiest acute hospitals and major trauma centres. We care for more than one million people a year across three main sites; The Queen's Medical Centre, Nottingham City Hospital and Ropewalk House, as well as in the community. With more than 19,000 colleagues, we are the largest employer in Nottinghamshire, with a budget of £1.7bn. As a specialist centre for a range of national and internationally renowned services, including stroke, renal, neurosciences and cancer services, we care for people from across the East Midlands and beyond.

### SUMMARY

To support our families in Critical Care, we have introduced a family liaison team including a bereavement lead nurse to support them through end of life care. Before the pandemic, we held remembrance services for patients who died in Critical Care. From feedback, we learned how important it was for families to get the chance to remember the lives of those who died, but also how much they valued the opportunity to talk to other families and the staff who cared for their loved one. So, we developed and introduced a special Memorial Day. This is an excellent example of new thinking, responding to family needs. The project has been led by the bereavement lead and Family Liaison service, involving colleagues from all professions involved in end-of-life care. Family and staff feedback is very moving, indicating the day meets an important need. The fact that families want to return indicates the value placed on these events.

It is a simple but very effective idea and easy for others across the Trust to develop and customise. We have also ensured feedback is integrated into service design and future developments and have already utilised this to improve visitor's areas too.

### IMPACT & RESULTS ACHIEVED

The day is a truly multidisciplinary event, with staff taking part in the service and afternoon activities together with families and friends. People tell us how much they value the support and kindness they experience, and staff tell us how rewarding they find being involved in the event. We learn a lot by spending time with the families and hearing what they say. We also collect written feedback and have evaluations forms that the families fill out on the day for us. The event is inclusive as every family is invited and accessibility needs are taken into account to ensure everyone is able to attend. The day helps to support those who don't have their own networks of friends and families to help them. Following the Memorial Day, we have ensured feedback is integrated into the service design and future developments. We have utilised some of this feedback when looking at improving our visitors' areas, as the visitors' areas were often discussed by families at the event. As a result, one of the larger visitor's areas has undergone a full refurbishment including adding comfortable chairs and having tranquil wall colours.

We have been able to share with our teams the experience that our families had in relation to communication and being prepared when coming to visit their loved ones. For example, one family were very complimentary of the reception team explaining what the unit layout looked like before they entered the unit. They felt more prepared for the sights and sounds as an intensive care unit can be a very intimidating environment for those who are unfamiliar.

### WHAT MAKES THIS INITIATIVE STAND OUT?

Our Memorial Day is a simple but powerful idea. We believe that although other remembrance events exist, this is more developed in terms of a fuller programme, external venue, the extent of multidisciplinary involvement, and how we integrate feedback received into how we care for families on Critical Care, helping to shape future memorial days as well as our overall bereavement support. What makes it stand out is the fact that the concept was developed to meet the needs of families. It is about honouring people who have died and being there for the families (and staff) left behind. It is deeply important to be able to offer something that is about people first and foremost, giving them something they need. It makes a difference to them on a very personal level.

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## Nutricia The Beat - Patient Podcasts

### Category

Innovative Use of Technology, Social and Digital Media & Measuring, Reporting and Acting - Using Insight for Improvement



### ORGANISATION DESCRIPTION

Nutricia is the largest specialist medical nutrition feed and service provider in Europe and market leader in the UK. Nutricia Homeward is the service supporting more than 30,000 home tube-fed patients across the UK. Launched in 1997, the service includes a dedicated team of over 160 Homeward Nurses, who support and educate patients and carers, help achieve safe and speedy hospital discharges and prevent tube-fed related hospital admissions by providing care in patients homes.

### SUMMARY

Starting to tube feed can be a life changing event for patients, eating and drinking is a social activity linked with celebrations, families and friends. When starting to tube feed, patients are often dealing with a new medical diagnosis and are given a huge amount of clinical information to take on board and the more practical elements can get overlooked in the early days. Many patients describe feeling 'lost' or 'alone' with few ever meeting anyone else in a similar position.

This project highlights a new, unique way for Nutricia to communicate with tube-fed patients, using an everyday, popular format – podcasts. The benefit of podcasts are they can be accessed at a convenient time, revisited often and easily shared with others.

Patient involvement has been key at every step in this project, from concept, research, through to design and implementation. Feedback has shown these podcasts are popular, are making a difference and proving a valuable tool for healthcare professional (HCPs) to recommend to their patients.

It is hoped that by sharing this project it will encourage other organisations to consider podcasts as a suitable communication tool to educate and support their patient population.

### IMPACT & RESULTS ACHIEVED

In March 2024, we successfully launched four podcast episodes.

The content of all episodes was shaped by patient feedback and features either patients or family members living with tube feeding, or expert HCPs.

The Beat - Patient Podcasts: 1. What is tube feeding? Featuring a specialist Dietitian (233); 2. Introducing your tube feeding support team. Featuring a specialist Dietitian, a Speech and Language Therapist and a Homeward Nurse (112); 3. Starting to tube feed from a parent's perspective.

Featuring Billie-Jo and Lucy, both parents of tube-fed children (236); 4. Starting to tube feed from an adult perspective. Featuring Andy and Olivia who have both lived with tube feeding (107).

There have been 688 downloads (March – June 2024) across the four episodes, with 'What is Tube Feeding?' and 'Starting to Tube Feed from a Parent's Perspective' the most popular. These podcasts are accessible on all podcast platforms and on [nutriciahomeward.co.uk](https://nutriciahomeward.co.uk).

The website page has received 412 clicks, with 19% of visitors, being return visitors. Feedback on the podcasts has been positive from HCPs, patients and Homeward Nurses.

### WHAT MAKES THIS INITIATIVE STAND OUT?

This initiative has transformed a simple idea proposed by a person living with a feeding tube, into a unique way of fulfilling a need for our wider patient population. Patient insights, suggestions and feedback have played a crucial role at every step; ensuring the content is helpful and providing the support patients need. It leverages commonplace technology, ensuring accessibility for all and enhances patient's experience. This approach empowers patients through communication and education.

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### Patient and Client Council Neurology Engagement Platform

#### Category

Patient Contribution - Individual



#### ABOUT NOMINEE

The Patient and Client Council (PCC) Neurology Engagement Platform (NEP) was set up during the Public Inquiry into the events, that led to Northern Ireland's (NI) largest ever patient recall which caused, and continues to cause, significant public concern around patient safety.

The patients and relatives of deceased patient's public safety concerns cross a complex range of services, including the NHS and private healthcare services, the NI healthcare regulator, the General Medical Council (GMC) and the Police. The NEP was created to help patient and relatives engage with these agencies, to get answers and to be part of the co-production process to affect the change that was needed as evidenced by the 76 recommendations from the Public Inquiry. The PCC is uniquely positioned as an independent voice within healthcare in NI to connect our members with the different agencies.

#### SUMMARY

Whilst the concept of an engagement platform is not new to PCC, the vast numbers of people affected and the breadth of statutory agencies, who mostly worked independently of each other, required an innovative approach. The traditional model of having everyone round the table could not work as each individual would not have had the opportunity to have their voice heard.

We recognised the common ground shared by different groups and this is where Danielle and Norma's leadership excelled. In 2018, neither Norma or Danielle foresaw the leadership position they quickly undertook. The unique position of being in similar circumstances to their respective groups delivered meaningful and appropriate communication between all parties. They selflessly kept the group updated in a person centred way that ensured the groups were prepared for significant announcements in this field.

We had the challenge of our members living in all corners of NI. To ensure inclusion we held virtual meetings and Danielle and Norma facilitated communication via closed social media groups, WhatsApp and email. Two-way communication has been at the heart of the NEP. We advocated for meetings with the most senior decision makers. In addition, we encouraged and persuaded the GMC to meet with the NEP for an open and transparent meeting. GMC had not previously directly engaged with a group of patients and families outside of the investigation process. Following this meeting the GMC recognised the benefit of speaking directly with patients and are now open to meeting with patients. This change in practice will be across the UK and benefits not just patients but also the GMC. This is an incredible change to the patient experience with GMC that has come about because of the NEP's work.

Danielle has compared her experience as a former professional within the political system, where her word held weight, to the treatment she experienced as a patient which effectively equated to her loss of voice and agency, and lack of access to decision makers. It was the NEP that connected its members to the agencies and that was when members were effectively heard and were able to affect the change needed for patient safety. The NEP was set up to meet the needs of the respective groups and these needs have understandability changed over the past five years. The transferability of the groups' achievements is far reaching and has delivered significant improvements in patient experience. The Health Service now recognises and implements a person centred principle of sharing information with patient groups, such as NEP, prior to release to the general public.

#### AT WORK

What makes Danielle and Norma stand out from others is their tenacity over the past years. They both had their own personal traumatic experience but this did not stop them from supporting others who contacted them. Danielle described how following her contact with her local politician she was inundated with traumatised patients contacting her for information. Patients were contacting Danielle morning, noon and night. She spoke to each person, providing a listening ear, a friendly voice and most critically a pathway for gaining understandable and relatable information.

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## Peninsula Cancer Alliance

### Responding to the Cancer Quality of Life Survey - Interventions to address patients difficulties with sleep

#### Category

Cancer Experience of Care Award



Peninsula Cancer Alliance

#### ORGANISATION DESCRIPTION

The Peninsula Cancer Alliance (PCA) works across Devon, Cornwall covering a population of 2,023,198. It is one of 21 cancer alliances across England, bringing together clinical, senior leaders and patients. The purpose of the PCA is to plan and lead locally to deliver the ambitions set out in the NHS Long Term Plan, and to reduce variation in outcomes, improve access to high quality care using evidence-based interventions across whole pathways. The Mustard Tree Macmillan Cancer Support Centre based at University Hospitals Plymouth supports those affected by a cancer diagnosis. Approximately 5000 people each year are newly diagnosed, in addition to those supported through recurrence and those living with and beyond cancer.

#### SUMMARY

The Personalised Care Lead and the Experience of Care Lead for the PCA developed the sleep workshop in response to the CQOL Survey. Creating the event included mapping available services - one to one, group, remote and digital services, liaising with Personalised Care Leads and Support Centre Managers, holding a patient focus group and forming a steering group to develop the content of the workshop. Local specialists in four areas were identified – a Sleep Physiologist, Dietitian, Personal Trainer and Complementary Therapist.

The workshop was free of charge to patients, carers, and health care professionals as funded by the PCA. The workshop included interactive sessions and ran in the morning and afternoon giving a choice of a preferred time to attend. The workshop was evaluated at the end of each session and participants contacted after 8 weeks to see if improvements had been achieved. Media students created two films, one focusing on providing tips and advice on getting a better night's sleep and the other on the importance of exercise, diet and other means of relaxation on sleep. These films will be hosted on the PCA website, MySunrise App and Trust websites. The workshop was cost effective and replicable in other locations.

#### IMPACT & RESULTS ACHIEVED

The Sleep workshop was attended by 61 patients and carers from across the region and 17 Health Care Professionals (HCPs). After advertising the workshop, we were contacted by multiple HCPs who expressed an interest in attending. At the Steering Group it was felt to be beneficial to open this workshop to HCPs. Due to the geographical challenges within Devon and Cornwall, the majority of attendees were from the Plymouth area, but some did travel from Torbay, Exeter and Cornwall to the workshop. Total cost per participant £45.57 not including staff time. At the workshop a QR code was shared for the delegates to provide feedback and share their learning and experiences, this was also sent out via email following the event. 28 responses to the survey were received. 26 people said that their sleep had been very affected following their cancer diagnosis, with 13 patients being offered no support with their sleep difficulties. Support offered included the workshop, medication (i.e. sleeping pills/ anti-depressants), and pillow support.

The main reasons given for sleep being affected were broken sleep, intrusive thoughts, anxiety, stress, night sweats, long term discomfort/pain. 8 weeks following the workshop a short survey was sent out to the attendees to measure the impact of the workshop and to measure any improvements made with their sleep. 14 responses were received. 12 responded to say that since the event they have adopted suggestions and tips that they had learnt. This included relaxation, not worrying about not sleeping, preparing for sleep earlier, exercising more and avoiding bad eating habits. Improvements noted included less worry and a better night's sleep.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

This initiative demonstrates a successful PDSA method of developing services in response to patient need and has provided a new way of working for the PCA by collaborating with local providers. Offering as two sessions allowed flexibility for patients and ensured it remained cost effective.

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## Pluto Play Productions & Leeds Care Association 'Unforgettable: Telling the Care Home story' play

### Category

Integration and Continuity of Care including Social Care & Support for Caregivers, Friends, and Family



### ORGANISATION DESCRIPTION

Pluto Play Productions was founded in 1997 by Brian Daniels and was created to take over the management and running of the New End Theatre in Hampstead, North London where Brian was CEO and Artistic Director for 14 years. Since 2011, it has been concerned with the development of theatrical writing that is inspired by real stories with a view to advancing public education through the staging of plays and other expressions of drama. It is a registered charity (number 1062498) based in Leeds with Brian remaining as CEO and Artistic Director.

There are five members of staff working on programming, public relations and administration and four trustees. Leeds Care Association (LCA) is a partner organisation for this entry. It is a not-for-profit company limited by guarantee. Its objective is to represent the needs of care providers effectively and professionally at strategic partnership meetings at local, regional and national levels as well as offering its members a range of support services that will help them deliver good quality services to those people that need them.

### SUMMARY

In the first 23 weeks of the Covid Pandemic, there were 29,542 excess deaths in all care homes in England with 64.7% of these confirmed/suspected due to Covid directly and others indirectly (Morciano et al, 2021 <https://bmcmedicine.biomedcentral.com/articles/10.1186/s12916-021-01945-2>). Writing and performing a play about the challenges faced by care homes is innovative and ambitious and enables very difficult and emotional issues to be explored with an audience in a safe environment. The desire of Leeds Care Association (LCA) to confront the issues through the medium of drama shows a commitment to all their stakeholders.

Brian Daniels, Pluto Plays was commissioned to write the play and was given access via LCA to care home staff, residents and families to interview them about their experiences and wrote the script on the basis of their real stories. The play includes a storyline that highlights the difficulties faced by older LGBTQIa+ people when considering a move into a care home. The play has been performed twice in the House of Commons as well as across the country and will continue to highlight the challenges faced by care homes during epidemics so that it is never forgotten and not allowed to happen again.

### IMPACT & RESULTS ACHIEVED

The purpose of the play performance is to reach people in the audiences at a deep meaningful level, to enable them to discuss what they have seen in after-performance discussions. Audiences have included care home owners, care staff, residents, families plus charities, local authority representatives, Councillors and MPs. Discussions have included expert panels involving other care home providers and care associations plus peers with portfolios in the voluntary and care sectors. The impact of the play is drawn from comments and feedback received from audience members either at the time or later via email/telephone and these, plus questions asked, are assessed later.

### WHAT MAKES THIS INITIATIVE STAND OUT?

Using drama to highlight incredibly sensitive and distressing experiences in care homes during the Covid Pandemic makes this initiative special and stand out. The ability of audience members to identify with the characters in the play and what they went through, based on real stories, is very important in enabling them to consider their own positions and to realise they may still have issues from that time that they need to consider and potentially get help with, such as unresolved PTSD.

It is also an original way to present issues to decision makers at local, regional and national levels who may be councillors, health and social care commissioners and MPs and help to heighten their understanding of what happened in care homes during Covid. The play shows an approach that care homes can adopt involving the need for good leadership.

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## Portsmouth Hospitals University NHS Trust Butterfly Resources

### Category

Personalisation of Care



Portsmouth Hospitals University  
NHS Trust

### ORGANISATION DESCRIPTION

Portsmouth Hospitals University NHS Trust (PHU) serves a population of around 675,000, has approximately 1200 beds, 8,700 staff and is home to the Joint Hospital Group (South), the largest of the UK's four military hospital units. Every year approximately 2500 people die an expected death in our hospital. Each one of them enters our care not only as a patient requiring clinical care and interventions but also as a person connected to the people and things that matter to them.

### SUMMARY

In 2023, as part of our End-of-Life Action Plan, and funded by two grants from Portsmouth Hospitals Charity (PHC), we introduced our Butterfly Resources to the Trust aiming to improve the care in dying experience for patients, their families, and staff. PHC invite staff to pitch a person centred grant application in a 'Dragons Den' style to the Chief Nurse, Financial Director, Governance Director. This involves providing a 5-minute presentation followed by questions and answers. We were successful in 2022 with a £6000 grant (approximately £2.40 per family or at that time a box of 120 tea bags) and in 2023 (£3000 grant). A key tenet to the resources was to individualise and improve the experience of dying, to do this in a swift, kind, and effective way, coordinate current activities and develop new ones. The service is provided by multiple Trust teams.

The Butterfly Resources are the Trusts commitment to support patients and families with respect, dignity, and compassion when the possibility of dying soon is likely. The focus is prioritising an individual's care and comfort, considering and acting upon: "What do I need to know about you as a person, to give you the best care possible?" e.g... consistent Butterfly signs across the Trust, signalling 'care in dying or care after death' ensuring everyone knows to be respectful at this time; offering parking concession tickets, refreshments, and onsite accommodation if necessary; offering Butterfly Resources which are delivered to the bedside, improving the experience of care after death with Butterfly patient property bags; inviting feedback.

### IMPACT & RESULTS ACHIEVED

The feedback has been overwhelmingly positive, with some helpful feedback. e.g., one person has fed back that they did not like the Butterfly signs as felt that they were being singled out – whilst other families have kept signs as a memento. We have taken this feedback on board, especially in terms of how we explain the signage to patients, families, and staff. One example is Jillian (pseudonym) who was diagnosed with an advanced cancer. Her husband had recently died in the opposite ward – she and her family had been able to be with him at that time. Jillian was worried she would not be well enough to attend her husband's funeral. A discussion between her, her family, Chaplaincy, ward doctors and nurses, and hospital palliative care team meant a funeral like service could be arranged in the hospital chapel a few days later. The day before she had received some resin 'Butterfly loving hearts' for her and her relatives, these were gathered around her wedding photograph during the service. Her bed was brought down into the chapel, surrounded by her family as they said goodbye to her husband. She kissed each loving heart and gave one to each member of her family. In return they all kissed and gave her a loving heart for her and her husband.

### WHAT MAKES THIS INITIATIVE STAND OUT?

Collaboration and coordination between multiple Trust teams reduces duplication, increases service, and provides consistency across the Trust on a minimal budget (£9000 over 2 years or £1.80 per patient). Resources personalised to the individual. Connecting and legacy activities which supports the personhood and autonomy of the dying person and their families. Increases opportunities to coach and support patients and families about what happens when someone dies. Enables staff to provide personalised care beyond clinical tasks, improving wellbeing. This includes a community of staff and volunteers making and donating some of the items provided. Keeps the patient and family central to care.

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## Public Health Agency

### Getting everyone round the table: Swallow Awareness in the Hospitality Industry

#### Category

Partnership Working to Improve the Experience



#### ORGANISATION DESCRIPTION

The Public Health Agency (PHA) is responsible for providing health protection and health and social wellbeing improvement to every member of every community in Northern Ireland. We are committed to addressing the causes and associated inequalities of preventable ill-health and lack of wellbeing. We are a multi-disciplinary, multi-professional body with a workforce of 400 staff located in 5 locations across Northern Ireland and work to ensure regional consistency and standardisation. A core function is to promote public health and social welfare, and reduce inequalities in health and social wellbeing.

Following a thematic review of Serious Adverse and Adverse Incidents across Northern Ireland the Department of Health directed PHA to establish an interagency partnership group bringing together health and social care, commissioned Trust teams, regulators, clinical education centre, independent sector, professional bodies and those with lived experience and their carers. The main aim of the Partnership is to improve the safety, outcomes and experience of those living with eating, drinking and swallowing difficulties (dysphagia) and those at higher risk of dysphagia across health and social care settings in Northern Ireland.

#### SUMMARY

Dysphagia can impact quality of life and experience when socialising and eating out, for some this can be stressful, challenging and potentially unsafe. Dysphagia affects people of all ages and increases risks of chest infections (food and/or drink entering the windpipe), choking, malnutrition and dehydration, social isolation. PHA identified a gap in knowledge and awareness of dysphagia within hospitality based on engagement with people living with dysphagia and their families. 86% of focus groups members identified challenges with eating out.

PHA provided leadership to: find innovative solutions to improve experience for people living with dysphagia; identify key partners including Hospitality Ulster, community and voluntary sector focus groups and Health and Social Care Trusts; develop a user-friendly factsheet for the hospitality sector, with 10 top tips to help improve the experience of people living with dysphagia.

A wallet card has also been produced with a QR code linking directly to the hospitality factsheet which has supported customers, improved experience and promoted inclusion. Cards are given at the point of diagnosis/review to ensure rollout. Cards have been made available to voluntary groups and on PHA website. This project model should be transferable to resolve other challenges e.g. wheelchair accessibility, diabetes aware cafes/restaurants.

#### IMPACT & RESULTS ACHIEVED

Going out for a meal, having coffee with friends, celebrating events with family are things most of us take for granted. This project tackles health inequality, ensuring improved awareness of dysphagia within hospitality by providing simple, practical ways to support people living with dysphagia whilst promoting independence and inclusion. The factsheet and swallow aware card are available for anyone living with dysphagia anywhere in Northern Ireland which ensures equity demonstrating the scale of the project.

There have been positive outcomes for all stakeholders. Analytics show that the factsheet/wallet card have been accessed 1965 times by the public and 475 times by healthcare professionals since it launched 6 weeks ago.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

There are 3 main reasons this work stands out: it is built on listening to challenges experienced by people living with dysphagia and their families so it addresses their needs directly; it ensures the needs of people are met outside the traditional boundaries of health by seeing the person holistically and supporting them to live well; it has pushed boundaries to develop true interagency working which benefits the person, their family and the hospitality industry.

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## Public Health Agency Hearing the Voices of Children and Young People with Profound and Complex Disabilities

### Category

Communicating Effectively with Patients and Families



### ORGANISATION DESCRIPTION

The Public Health Agency (PHA) is a complex organisation of around 400 staff, established in 2009 under a major reform of health structures in Northern Ireland. The PHA is responsible for providing health protection and health and social wellbeing improvement to every member of every community in Northern Ireland. We are committed to addressing the causes and associated inequalities of preventable ill-health and lack of wellbeing through strong partnerships with individuals, communities and other key public, private and voluntary organisations.

### SUMMARY

The PHA took a leadership role beyond their usual scope of influence, breaking down organisational boundaries to deliver improved life opportunities for children through a model of partnership working across Special Schools in 7 pilot sites across N.I. These partnerships created the conditions necessary to identify, prioritise and progress innovative developments. This ambitious and innovative pilot gave a platform to the challenge of hearing the 'seldom heard' voices of children living with profound and complex disabilities. To explore how we may overcome the barriers of communication we secured funding for Music, Art and Play Therapists to use creative methods to engage 80 C&YP attending Special Schools, in conversation about what is important to them. Therapists involved the staff, parents and other AHP's to maximise impact and support positive outcomes at school and home. Impact and outcomes were reported through Case Studies and feedback from schools and families. The voices of these children will be heard by the Ministers for Health and Education and senior officials at a Conference in October 24. Evaluation has been completed and bid made for resources to roll this approach out across Special Schools. This work is transferrable to vulnerable individuals across a range of settings.

### IMPACT & RESULTS ACHIEVED

Art, music and play therapies offer significant benefits to children with disabilities, providing them with valuable tools for self-expression, communication, and emotional regulation. These therapeutic approaches help improve fine and gross motor skills, enhance cognitive abilities, and boost self-confidence through creative activities that are engaging and enjoyable. Together these therapies contribute to a holistic approach to development, enabling children with disabilities to achieve their full potential in a supportive and nurturing environment. Therapists and schools evidenced outcomes through evaluation reports and case studies.

Children were empowered to actively participate in their care including: participation in meaningful activities and interactions - engagement increased significantly during therapy and school-avoidant behaviours reduced; children showed improved confidence, self-expression, and emotional wellbeing; responses and decisions communicated via facial expressions, vocalisations and pad-switch systems. This holds immense significance, empowering children to express consent, preferences and needs; partnerships with staff, parents and other AHPs maximised impact, with positive outcomes reported at school and home; children who have been unable to engage in any activity for more than a few minutes have been engaging in therapy for 45-50mins and enjoying it.

Through these conversations we have heard that a positive experience of school is of utmost importance to them and makes a positive difference to them at school and at home. Children have also demonstrated isolation from opportunities outside of school and have communicated their love for family.

### WHAT MAKES THIS INITIATIVE STAND OUT?

This project stands out as it proactively aimed to use a unique, ambitious and innovative approach to therapy provision making use of clinical skills in a slightly different way, where the therapeutic intention was secondary to the engagement and listening to the voice of the Child. As such this became a Dual Outcome model with children benefitting in 2 distinct ways i.e. able to express themselves and be heard and understood and also improving their health and well-being.

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## Shrewsbury and Telford Hospital NHS Trust Embedding a culture of 'Get Up, Get Dressed, Get Moving' through the reconditioning games initiative

### Category

Personalisation of Care



### ORGANISATION DESCRIPTION

The Shrewsbury and Telford Hospital NHS Trust (SaTH) is the main provider of acute hospital services for approximately half a million people across Shropshire, Telford & Wrekin, and mid-Wales.

The Trust has two main acute hospital sites in Shrewsbury (Royal Shrewsbury Hospital) and Telford (Princess Royal Hospital). The Trust employs approximately 7,000 members of staff and has a bed base of just over 700.

### SUMMARY

The Reconditioning Games is a national campaign which was launched in November 2022. The campaign aims to engage health and care teams by raising awareness of deconditioning and encouraging small scale changes within organisations whilst supporting local and national initiatives.

The ultimate goal is to achieve a sustainable reduction and reversal of functional and cognitive decline in the population nationally whilst improving the wellbeing of staff.

During the period January 2022 – December 2022 a significant number of falls were being recorded at the trust together with anecdotal evidence that patients were arriving in hospital with poor mobility. SaTH implemented the campaign in November 2022 beginning with a targeted pilot scheme in one department. Following the formulation of the task and finish group numerous projects, activities and incentives were introduced to ensure a true collaborative approach to the initiative.

SaTH is committed to embedding the ethos of 'Get Up, Get Dressed, Get Moving' to ensure sustainability with support for the campaign engrained throughout the Trust from ward to board level.

### IMPACT & RESULTS ACHIEVED

Reducing falls within the Trust is a key objective of the initiative. In 2022 there were 1475 falls recorded whereas in 2023 this number reduced by nearly 20% to 1186. In terms of monthly data, the average monthly falls reduced from 123 in 2022 to 99 in 2023.

Furthermore, the range of typical monthly falls has narrowed significantly, illustrating a more consistent safety performance.

There is an upward trend from December 2023, this coincides with the Falls Practitioner from the trust leaving their post. The Trust reframed this post by appointing a Reconditioning Lead in July 2024 this will support work preventing falls.

Although the number of patient falls rose in the period December 2023 to May 2024, the falls did not result in increased harm for the patients.

Another key objective of the initiative is to improve patient experience and throughout the initiative patient feedback is collected.

When considering wider learning and sharing good practice going forward, our Quality Matron now chairs the regional falls meeting which facilitates shared learning around the reconditioning games across the West Midlands

### WHAT MAKES THIS INITIATIVE STAND OUT?

The initiative has been embraced across our hospital departments and our Trust came first in the medals table regionally and third nationally.

The breadth of different activities has been incredible, the creative approaches have ensured patient engagement and the quality team have worked closely with clinical staff to embed activities into their practice.

The commitment of the Trust is evidenced by the appointment of a Reconditioning Lead at our Trust, this will ensure the development of the initiative with clear resources to drive it forward.

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## Shrewsbury and Telford Hospital NHS Trust Specialist Stroke Rehabilitation Groups

### Category

Personalisation of Care



The Shrewsbury and Telford Hospital

NHS Trust

### ORGANISATION DESCRIPTION

The Shrewsbury and Telford Hospital NHS Trust (SaTH) is the main provider of acute hospital services for approximately half a million people across Shropshire, Telford & Wrekin, and mid-Wales. The Trust has two main acute hospital sites in Shrewsbury (Royal Shrewsbury Hospital) and Telford (Princess Royal Hospital). The Trust employs approximately 7,000 members of staff. The Stroke Unit is located at the Princess Royal Hospital. It is a 42 bedded unit consisting of Hyper Acute Stroke care, Acute Stroke care, and Acute Stroke Rehabilitation.

### SUMMARY

The Stroke and Rehabilitation Therapy Team initiated Specialist Stroke Rehabilitation Groups to increase socialisation, well-being and therapeutic opportunities for patients on the Stroke Wards. We run Occupational Therapy, Speech & Language Therapy and Physiotherapy groups each week to give equal opportunities to our patients and their varying symptoms. The groups are adapted weekly to meet the needs of the patient population and to maintain engagement and interest. Examples of the activities include Seated Tai-Chi, Music Quizzes, Painting Emotions, Mock-Cocktail Making Class, Parachute Games, Play Your Cards Right, Tuck Shop Style Tasks, Patient Education, Team Obstacle Courses, Total Communication Quizzes “Say it, Write it, Mime it, Make it”. The primary goal of these groups is to focus on rehabilitation, increase direct therapy contact time, promote inclusion, social interaction and enhance the overall patient experience. Our Wards have some of the highest Length of Stay statistics in the Trust, reflecting the extensive treatment and rehabilitation our patients require. Engaging and enjoyable therapy is crucial for their recovery, as it boosts patient motivation, accelerates recovery, and leads to better outcomes.

### IMPACT & RESULTS ACHIEVED

As part of the Improvement Project which initiated the increase of frequency of the Specialist Stroke Rehabilitation Groups, we measured the impact of our therapy groups by assessing three key areas: Patient Satisfaction, Staff Feedback and Direct Therapy Contact Time. We asked our patients 6 statements following each group – answers were given either using a Likert Scale or the Visual Analogue Scale (VAS). We knew that we wanted a standardised measure across all groups and therefore it was important for the measure to meet the needs of our patients who struggle to express themselves due to communication or cognitive challenges. We collected 142 data sets over a two-month period. Our overall satisfaction scores were: 91% for Physiotherapy, 90% for Occupational Therapy and 90% for Speech & Language Therapy. The highest scoring parameter across all three therapies was “I enjoyed time off the ward” with a 93.4% positive response. We asked the team what they felt the benefits to the group sessions were and one quote was: ‘Patients get to see others in similar situations which helps them feel less alone on their road to recovery.’ Data indicated an upward trend after increasing the frequency of therapy groups to three times a week.

### WHAT MAKES THIS INITIATIVE STAND OUT?

Time away from home and loved ones can significantly impact patients’ mood and well-being, especially when also coming to terms with, what can be a debilitating disability. Time off the ward, which can be a distressing and alien environment filled with monitors, call bells and unwell patients is crucial for their mental health. Within therapy, we have the unique advantage of getting to know our patients well, especially their goals and their interests. This allows us to tailor the groups to match the specific patient population we are treating at that moment in time. For example, we had a period where there was a group of younger male patients who were physically impaired but cognitively intact.

During this time, we designed competitive, fast paced groups that incorporated football and food. This energy and camaraderie transferred back to the ward, transforming a previously quiet bay into a close-knit community. Patients began talking daily, keeping each other motivated, entertained and sharing contact details to remain in touch after discharge, creating a support network.

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## South Tyneside and Sunderland NHS Foundation Trust Personalised Cancer Care

### Category

Cancer Experience of Care Award



South Tyneside and Sunderland  
NHS Foundation Trust

### ORGANISATION DESCRIPTION

South Tyneside and Sunderland NHS Foundation Trust (STSFT) is a healthcare provider in the North-east of England. On 1st April 2019, STSFT was created following the merger of City hospital Sunderland and South Tyneside NHS Foundation Trust. We are now one of the largest NHS Trusts in the North-east of England with an annual turnover of over £550m.

### SUMMARY

The personalised cancer care model at STSFT is a unique and transformational project that has harnessed the skills and expertise of stakeholders across the local health care system. Codesign with our patients has given rise to its success, demonstrating excellence in cancer care and support through a collective leadership approach. The following initiatives have been developed utilising workplace technology: a digital personalised assessment and support plan, integrated within the patients Electronic Health Record (EHR) to enable professional visibility throughout the cancer pathway; a unique digital referral function to transfer the support plan to our information and support centre, to ensure wider support needs are met by relevant local services. The centre records referral outcomes in the EHR for continuity of care; the “Cancer Information Hub” – a digital platform providing a range of support through, films, podcasts, avatars, developed with local professionals and patients; the “Personalised Care Data Dashboard” - monitors performance and supports service development based on local need.

A significant change in practice was required, our clinical and support teams have achieved outstanding results. This effective model has been shared across the region, is sustainable and transferable across all long-term conditions, to improve the care and experience of patients.

### IMPACT & RESULTS ACHIEVED

STSFT’s personalised care model has been continually evaluated by patients and professionals, using both a qualitative and quantitative approach. The personalised care data dashboard has shown continuous improvement in the number of HNA’s and PCSP’s completed with patients following a cancer diagnosis (a 40% increase in HNA’s and 64 % increase in PCSP’s from 2021 – 2023). Providing assurance that the holistic needs of patients are being identified and addressed. The integrated system for referral to the information and support centre has resulted in an 88% increase in referrals since 2021, in 2023 an average of 360 referrals were received per month, highlighting the increasing need for information and support in managing the impact of disease on long-term health.

The Cancer Information Hub, which compliments face to face delivery of information at scale, has received fantastic feedback from patients and professionals, the homepage has had over 33,000 views since its launch a year ago. 80% of patients reported via an integrated survey that the information had a positive impact on their health and wellbeing. The Personalised Care Data Dashboard has driven service improvement activity in increasing psychological support for patients through sourcing further therapy provision based on need and providing activities in which patients can better manage their long-term health.

### WHAT MAKES THIS INITIATIVE STAND OUT?

The STSFT approach is all encompassing and truly innovative. The holistic needs of our patients are assessed and recorded in their EMR by specialist professionals, care and support plans are developed using validated digital tools. The plan is digitally transferred to our information and support centre and is received by our support team where services that are required to meet the wider nonclinical needs of patients and families are coordinated/ delivered. The range of services offered are vast, examples are counselling, complimentary therapy and/or referral for social support in the community, this is recorded in the patients EMR for continuity of care and supports data collection. Information provision is also key, and this is offered throughout the cancer pathway in a variety of formats. Leveraging AI and machine learning to analyse patient data and predict health risks enables proactive and preventative care, improving patient outcomes and optimising resource use.

### Contact Details

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## South Tyneside and Sunderland NHS Foundation Trust Enhancing Personalised Care via a multilingual digital patient centered platform

### Category

Personalisation of Care



South Tyneside and Sunderland  
NHS Foundation Trust

### ORGANISATION DESCRIPTION

South Tyneside and Sunderland NHS Foundation Trust (STSFT) is a healthcare provider in the North-east of England. On 1st April 2019, STSFT was created following the merger of City hospital Sunderland and South Tyneside NHS Foundation Trust. We are now one of the largest NHS Trusts in the North-east of England with an annual turnover of over £550m.

### SUMMARY

The personalised cancer care model at STSFT is a unique and transformational project that has harnessed the skills and expertise of stakeholders across the local health care system. Codesign with our patients has given rise to its success, demonstrating excellence in cancer care and support through a collective leadership approach. The following initiatives have been developed utilising workplace technology: a digital personalised assessment and support plan, integrated within the patients Electronic Health Record (EHR) to enable professional visibility throughout the cancer pathway; a unique digital referral function to transfer the support plan to our information and support centre, to ensure wider support needs are met by relevant local services.

The centre records referral outcomes in the EHR for continuity of care; the “Cancer Information Hub” – a digital platform providing a range of support through, films, podcasts, avatars, developed with local professionals and patients; the “Personalised Care Data Dashboard” - monitors performance and supports service development based on local need. A significant change in practice was required, our clinical and support teams have achieved outstanding results. This effective model has been shared across the region, is sustainable and transferable across all long-term conditions, to improve the care and experience of patients.

### IMPACT & RESULTS ACHIEVED

STSFT’s personalised care model has been continually evaluated by patients and professionals, using both a qualitative and quantitative approach. The personalised care data dashboard has shown continuous improvement in the number of HNA’s and PCSP’s completed with patients following a cancer diagnosis (a 40% increase in HNA’s and 64 % increase in PCSP’s from 2021 – 2023). Providing assurance that the holistic needs of patients are being identified and addressed. The integrated system for referral to the information and support centre has resulted in an 88% increase in referrals since 2021, in 2023 an average of 360 referrals were received per month, highlighting the increasing need for information and support in managing the impact of disease on long-term health.

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### Contact Details

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## Team Leeds

### Home First - reducing length of stay in an acute hospital and improving outcomes by focussing on Home First

#### Category

Integration and Continuity of Care including Social Care



#### ORGANISATION DESCRIPTION

Leeds Teaching Hospital NHS Trust (LTHT) is one of the largest acute hospital Trusts. The Hospitals provide healthcare and specialists services for people from the city of Leeds, the Yorkshire and Humber region and beyond. The Trust play an important role in the training and education of medical, nursing and allied health professionals and are a centre for research, innovation and pioneering new treatments. The Trust has a budget of £1.4 billion and employs more than 20,000 staff. Last we treated more than 1.7 million patients which includes in patient admission, outpatients and attendances in our emergency departments.

#### SUMMARY

The Home First transformation has significantly changed how Leeds as a Health and social care system works in a collaborative, innovative and patient centred way within the hospital. It brings together the expertise knowledge and experience of social workers, clinical hospital teams and community specialist working together with the patient and their families on the wards to provide the best and safe discharge outcome. The development of a shared digital dashboard for all professionals to document their discussions/interventions with patients I believe to be one of the first nationally. The leadership of the change has been managed by 3 senior leaders, one from each of the main 3 organisations, this is repeated in an operational and a team managers layer. This governance structure allows ward to board feedback and escalation. Each team meets weekly to manage the change, ensuring compliance with the roadmap and managing highlighted risks.

All decisions are collaboratively agreed by the representation in the groups. Every 2-3 months a summit has been organised with the CEO's to ensure support at the highest level. This workstream (transfers of care) has demonstrated a 4-day reduction in length of stay for people who have a complex discharge. We have improved the outcomes for patients, ensuring independence is maximised by reducing the number of patients going to a permanent care home bed by 7.4% and a temporary bed by 18%. This is 400 people per year now going directly home from hospital compared to baseline. Working with LTHT volunteers we surveyed 158 patients or family members and 46 members of staff to understand the impact of the new way of working. 90% of patients felt their care was joined up, 76% of staff agreed the model benefited patients, 77% of staff believed the model improved collaboration. We are in the final stages of roll out to all in scope wards and will then move into the sustainability period.

#### IMPACT & RESULTS ACHIEVED

The KPI's we choose for this workstream included reduce the length of stay for patients with complex needs and have no reason to reside in acute care, increase the number of people returning home or to a more independent setting, amongst others. The top two KPI's are tracked weekly, both are showing positive results.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

I have worked in health care as a nurse for 44 years, discharge has been part of my portfolio as a senior nurse for several years. It is extremely frustrating to be discussing a cohort of patients week after week and very little progress been made to transfer them to a more appropriate place of care. I speak with patients often and it is clear they want to be involved in decisions about them and do not want to spend time on a hospital ward. I feel very passionate that in the last 100 days of life they should not spend the majority of time in hospital where their independence and choice is often stripped from them. I have worked on many hospital initiative's to try and improve the situation and provide better outcomes for patients but many have not been sustained, no one organisation can achieve this. Home First is the first time I have felt that through collaboration and partnership working we can achieve better outcomes for this cohort of patients. The agreement and working together at all levels have produced an enthusiasm and energy that can make a difference. The buy in to Home first and transformation of community services as well as working together in the hospital as resulted in reducing the length of stay and more people going back to their own home.

#### Contact Details

## The National Institute of Health and Care Research The NIHR Race Equality Public Action Group (REPAG) and the Race Equality Framework

### Category

Strengthening the Foundation



### ORGANISATION DESCRIPTION

The National Institute of Health and Care Research (NIHR) is funded by the Department of Health and Social Care to improve the health and wealth of the nation through research.

Working in partnership with the NHS, universities, local government, other research funders, patients and the public - we fund, enable and deliver world-leading health and social care research that improves people's health and wellbeing and promotes economic growth.

### SUMMARY

For a long time, race equality within research has not been a priority. The NIHR created a group to develop solutions to tackle this issue – the Race Equality Public Action Group (REPAG). Recognising the need to help research organisations with involvement of members of the public from diverse groups, the Race Equality Framework (REF) was born.

The REF was devised to help organisations become more inclusive, develop better links with diverse communities and make their work more equitable. Consultation with members of the public from Black African-, Asian- and Caribbean-heritage communities were held and were essential in developing the Framework. Sixteen organisations who are involved in health and care research were recruited as pilot partners. They worked through the Framework and provided further feedback and input.

The final product is a self-assessment tool which comprises of 50 questions across five domains. These domains are: 1) individual responsibility, 2) leadership, 3) public partnerships, 4) recruitment, and 5) systems and processes. The questions are designed to promote reflection and improve good practice. This is the first tool of its kind, and we recommend its use for health and care research organisations that work closely and develop partnerships with members of the public.

### IMPACT & RESULTS ACHIEVED

Given the variation in the scale and context that the partner organisations chose to apply their self-assessment to, we did not collect data on the amount of staff time and resources required to conduct the self-assessment. Instead, we produced seven case studies demonstrating how different organisations conducted their self-assessment and formulated actions.

All partner organisations are now working towards specific objectives as a result of undertaking the self-assessment. One especially encouraging outcome of the co-development process is the level of trust that it has engendered amongst the public contributors involved, many of whom have not previously been engaged in NIHR funded and supported research, and who continue to partner with NIHR on various pieces of work beyond the Framework.

The Framework informs public and government deliberations on research policy and strategy. For example, a government policy paper on the future of clinical research delivery mentions the Framework among the body of work contributing towards the government's ambition for more people-centred research.

### WHAT MAKES THIS INITIATIVE STAND OUT?

To the best of our knowledge, the Framework represents the first co-designed, organisation-wide self-assessment tool for addressing racial equality in public involvement in the UK and internationally. It adds to the growing body of patient and public involvement and engagement tools and methods.

The process used to develop the Framework served to ensure its strengths with regard to co-production and co-design, authenticity, and rigour. Knowledge Mobilisation, (e.g. using a Community of Practice approach), helped to shape its development. The organisations that participated in the pilot represented different types of organisations delivering health and care research across different sectors.

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## The Royal Wolverhampton NHS Trust

### The H.O.P.E (Holistic Opportunities Preventing Exclusion) Project: Building a partnership between healthcare, the voluntary sector and grass root organisations

#### Category

Engaging and Championing the Public & Support for Caregivers, Friends, and Family



The Royal Wolverhampton  
NHS Trust

#### ORGANISATION DESCRIPTION

The Royal Wolverhampton NHS Trust (RWT) is a combined acute and community National Health Service Trust in the West Midlands, serving a population of 450,000.

The Trust is the largest employer in Wolverhampton, with a diverse workforce of around 9,500 staff, covering more than 350 different roles. The Trust has three hospital sites, more than 20 community sites and nine GP practices.

#### SUMMARY

The H.O.P.E project addresses issues around the support needs of people of Wolverhampton affected by mental health due to social isolation or other factors as a long-term consequence of the Covid-19 pandemic. This includes patients, their carers and their other family and friends.

The initiative facilitated recruitment, training and support of volunteers to work alongside the citywide Social Prescribing Service facilitating activities in their own community and becoming befrienders and digital buddies for those in need.

RWT and Wolverhampton Voluntary and Community Action (WVCA) are making a lasting change for an individual and has a significantly expansive and long-term impact not only for that person, but also for their family and wider community. H.O.P.E Project service users at times find difficulties in moving on to activities, or even conversations, that support quality of life and or social connections and need intensive motivational support and guidance to effectively access services.

The importance of services being delivered by a trusted community organisation, through social prescribing link workers and volunteers with a shared identity to the Service Users, cannot be underestimated. The associated power to reach out, engage, relate and build rapport is key to the success of the project. Volunteers and link workers often have a lived experience which matches their Service User engendering recognition, understanding, and creating a safe space to discuss issues and challenges.

Dealing with social isolation not only has direct benefits to the public personally, but it is hoped will relieve some of the pressures for NHS and Social Care by reducing the level of intervention needed by individuals and preventing inpatient re-admission or multiple GP appointments.

#### IMPACT & RESULTS ACHIEVED

Monitoring data collected by the project shows since the start of the project: 164 volunteers recruited with the delivery of 557 hours volunteered - benefiting the residents of the City of Wolverhampton; 61 service users referred by the social prescribing of which 100% have received support; between 902- 1042 beneficiaries directly from the small grants programmes where individualised programs have been delivered by charitable groups; Commissions Programme £45,000 awarded so far between 9 groups; publicity and promotions. However, the growth of learning, awareness and trust fostered by culturally appropriate support is demonstrated less in data and more in the stories of HOPE project service users.

Anonymised stories are regularly published and presented at steering group and social media. Ongoing service user involvement and feedback of their experience contributes to continuous development.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

H.O.P.E project is a trailblazer that has the infrastructure to reach out to such a broad range of communities and well-known trusted organisations.

It aims to invest in the future of residents of Wolverhampton by providing opportunities for individuals to receive training and experience, with pathways to employment, and enhancing community groups to support/help each other. Providing real ownership and sense of belonging for Wolverhampton residents.

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## The Royal Wolverhampton NHS Trust

### Care at the end of life: Unlocking the learning in letters of formal complaint

#### Category

Making Complaints Count & Measuring, Reporting and Acting - Using Insight for Improvement



The Royal Wolverhampton  
NHS Trust

#### ORGANISATION DESCRIPTION

The Royal Wolverhampton NHS Trust has a comprehensive clinical portfolio of community, secondary and tertiary services and serves an ethnically diverse population of 450,000 people. The Trust is the largest employer in Wolverhampton, with a workforce of around 9,500 staff, covering more than 350 different roles.

As integrated providers of acute, community and primary care, the Trust has opportunity to deliver services in a more seamless and impactful fashion, and to effect change across the entire patient journey.

#### SUMMARY

At the heart of the NHS Complaint Standards is inspiration to promote a just and learning culture in which complaints are a welcomed source of learning. However, effective methods for analysis and reporting are critical to uncovering the possibilities for organisational learning. We undertook a retrospective service evaluation of formal complaints leading to the development of a unique analytic tool and associated toolkit to standardise and support the coding, categorisation and reporting of formal complaint data concerning end-of-life care for adults. The project was effectively led/accomplished by an experienced qualitative analyst and the Associate Director of Patient Relations in collaboration with key stakeholders/members of an End-of-Life Steering Group to foster organisational ownership of complainants' concerns.

Aggregated data uncovered system-wide problematic trends in end-of-life care, and three responsive and targeted initiatives are in progress. At the forefront is representative users contribution to the development of a compassionate communication charter, spearheaded by the Patient Experience team. Internal and regional feedback to lay and professional groups, together with a peer-reviewed journal publication have supported dissemination of the project process and outcomes and showcased our commitment to a complaint management culture where experiential feedback is valued and embraced.

#### IMPACT & RESULTS ACHIEVED

Reducing complaints and learning from them are key measures of success in our Patient Experience Enabling Strategy (2022-2025). Routine formal complaints analysis provides a mechanism through which the standard of end-of-life care can be monitored and system-level interventions developed. Reporting is via the organisation's End-of-Life Steering Group, with frequency dictated by the number of formal complaints. Data has shown a year-on-year reduction in the number of formal complaints about end-of-life concerns. Although the reasons for this may be varied, the project served as a vehicle for communicating positive feedback and encouraging continuous quality improvements. In our 3-year complaint data set (2020-2023), communication problems dominated, and most concerns were linked to experiences of in-patient ward/unit care.

This information has aided the triangulation of data with separately analysed in-house hospital bereaved family feedback and a national audit of care at the end of life (NACEL), thereby strengthening the evidence for quality improvement work. Our results are currently being translated into actionable learning and targeted interventions to address communication concerns. Three relevant problem-based projects have been identified and supported by members of the End-of-Life Steering Group.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

Inspiration, Innovation and Improvement are what makes this initiative special; three important elements for creative learning and problem-solving. Inspiration was born out of a collective desire to better understand complainants' concerns about care at the end of life; the inventiveness of a dedicated end-of-life complaint analysis tool to uncover system-wide problems in care, and informed quality improvements in peoples' experiences of care.

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## The Shrewsbury & Telford Hospital NHS Trust

### Living Well Sessions: access to health & wellbeing information as part of the NHS Long Term Plan for personalised care within cancer

#### Category

Personalisation of Care



#### ORGANISATION DESCRIPTION

The Shrewsbury and Telford Hospitals NHS Trust (SaTH) is the main provider of District General Hospital services for nearly half a million people in Shropshire, Telford & Wrekin (STW) and mid Wales. Shropshire has a population of approximately 320,000 and beyond the town centre the county is very rural with pockets of rural deprivation.

#### SUMMARY

The Living Well Sessions (LWS) are for anybody affected by cancer, at any point in their pathway, ensuring they have access to information that empower them to make realistic, lifestyle changes to help manage the affects of a cancer diagnosis. It offers an opportunity to share experiences as well as listen to others, tailoring the information received to them, learning in a peer support group.

This project has been led by the personalised care team (PCT) and following feedback, has evolved significantly over the past 5 years. Initially, the LWS were co-created with focus groups of people affected by cancer (PABC) and professionals. Changes are continuously made using evaluation feedback from those attending (PABC and professionals).

The LWS have been delivered through strong leadership and effective project management techniques, ensuring that measurable outcomes and sustainability have been considered. This model has been recognised as good practice and a substantial resource for PABC; being shared with several Trusts nationally. Our neighbouring Powys Teaching Health Board are looking how they can mirror this model within Powys, bringing care closer to home.

#### IMPACT & RESULTS ACHIEVED

At the end of the LWS, we collect data from those who have attended to ask how the sessions has supported them in becoming more confident in managing the topics discussed and whether attending has given them the tools to make small lifestyle changes to live and stay as well as possible. We actively encourage these evaluation forms to be completed in order to continually shape the LWS model based on their feedback.

The LWS deliver an integrated whole system approach for PABC; as part of the original pilot for this initiative, three monthly post session feedback was collected which showed a significant amount of referrals into other services supporting those living with or affected by cancer. Referrals to local services continue to grow; enabling people to access support from a wide variety of resources including our social prescribing teams, teams promoted as part of the comprehensive model of care, based in the community.

Since re-launching face to face LWS post COVID in October 2022, we have had a total of 308 people attend over the 21 sessions held, averaging at 15 people attending per month (of the months the sessions held). Out of the people who have attended, we have had a 70% response rate completing the evaluation feedback forms.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

The well-established LWS are special because the evident change in people's thoughts, attitudes, and behaviour after attending the session reflects the importance of enabling the confidence of people through safe self-management. The LWS are the essence of personalised care; through empowering people with information about what is available for them in order to help navigate them through an incredibly emotional and overwhelming time. Nationally, we are not aware of a monthly health and wellbeing model delivered face to face; there are numerous online videos available from Trusts, but evidence shows the positive impact the face-to-face sessions have had for PABC throughout STW. We have also developed Living Well videos to support information being accessible alongside the Cancer Information, Support and Wellbeing App.

The key elements for the success of this model have been the promotion, awareness of the need to adapt the model from feedback over time and the positive response we have had from people who have attended and healthcare professionals at all levels, across all of the care sectors.

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## United Lincolnshire Hospitals NHS Trust You Care We Care to Call (YCWCC)

### Category

Communicating Effectively with Patients and Families



United Lincolnshire Hospitals  
NHS Trust

### ORGANISATION DESCRIPTION

United Lincolnshire Hospitals NHS Trust (ULHT) is one of the biggest acute hospital trusts in England, and in April 2024 formally came together with Lincolnshire Community Health Services NHS Trust (LCHS) in a Group arrangement, with the goal of improving the care provided to patients across the county. This Group is known as the Lincolnshire Community and Hospitals NHS Group (LCHG), under a single Board and Executive Leadership Team, although both Trusts retain their separate statutory names and legal obligations.

### SUMMARY

Addressing Poor Communications. ULHT's project to reduce the number of avoidable complaints about poor communications between staff and patients' next of kin (NoK) involved all of the Trust's 52 wards and delivered changes to processes, staff training and organisational culture. It was initiated by the Director of Nursing (DoN), who set clear direction via a SMART objective and then supported the Project Lead with a robust assurance process that complemented the Agile delivery methodology she used.

The project drew on the Medway Trust's experiences from a similar project and compared ULHT data for two successive financial years, with complaints falling by 61%. This exceeded the target of 50% and complaint statistics will continue to be monitored by senior managers to sustain this achievement.

### IMPACT & RESULTS ACHIEVED

Additional Voluntary Participation in the Initiative: Although 38 of 52 wards were directed to participate in the initiative, seven others were subsequently identified. The remaining seven, including maternity units and ICUs, chose to engage voluntarily in specific elements where they could make their own areas' successful communications even better.

Quantifiable Improvement: During the period 1 April 2022 to 31 March 2023, ULHT received 134 avoidable complaints about communications. During the period 1 April 2023 to 31 March 2024, this figure reduced to 53, a reduction of 61%, which exceeded the specified target of 50%. For the purpose of this project, 'avoidable complaints' were defined as those relating to difficulty in getting through to the ward, the phone not being answered or a relative not being kept informed.

Qualitative Improvements: As wards have different structures, roles and timetables, there was no template solution to help all. However, some of the results achieved are as follows:

- The requirement for calls to NoK is now discussed at board rounds, handovers and huddles.
- Calls from staff or patients making calls independently are documented in patient notes and audited by the Ward Manager or Matron.

Technical Progress: During the early stages of the project, it was discovered that the telephone switchboard at each of the Trust's three sites worked autonomously, with varying workloads. All three now work collaboratively, increasing the number of calls that can be processed. Call queuing with a positional voice message has also been introduced on ward phones, so NoK callers have a better idea of when they might be answered. A variant on this is currently being considered for our A&E departments.

### WHAT MAKES THIS INITIATIVE STAND OUT?

Exceeding Outputs and Flexible Project Delivery: The YCWCTC initiative is notable for a number of factors. Firstly, it has exceeded its original targets, and in the process has generated a range of other initiatives that will continue to improve the ULHT's communications. Importantly, large elements of the project's scope and outcomes were and continue to be supported by data, driving evidence-based decision making. Furthermore, the use of an Agile delivery model rather than a more traditional linear, waterfall process has allowed the Trust's management to capitalise promptly on emerging opportunities such as enhancing switchboard operations, and encouraged flexibility in how project benefits were achieved, by recognising that there was not a 'one size fits all' solution.

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### University College London Hospitals NHS Trust Critical Care Transformation Programme

#### Category

Strengthening the Foundation



University College London Hospitals  
NHS Foundation Trust

#### ORGANISATION DESCRIPTION

Located in London, UCLH is a leading NHS foundation trust comprising several specialised hospitals including University College Hospital, UCH Macmillan Cancer Centre, and the National Hospital for Neurology and Neurosurgery, among others. The Critical Care Unit at UCLH is one of the largest in the UK, treating over 3,000 patients annually with survival rates among the highest nationally according to intensive care audits.

#### SUMMARY

Following the COVID-19 pandemic, we initiated a programme aimed at delivering an excellent experience for patients, families, and staff, reducing inequalities (for both staff and patients), and enabling collaboration with patients and families in care and service design. The programme was designed and delivered by the whole critical care multi-disciplinary team. The work has been guided by three main frameworks and teams: Person-centred care (led by the Patient Experience & Engagement Committee); Trauma-Informed Care (TIC) (led by the Critical Care Psychology team); Equality, Diversity & Inclusion (led by the Staff Experience & Engagement Committee).

The work has influenced and been influenced by the Critical Care rehabilitation service, End of Life Care service, and our quality improvement and quality and safety teams. Over the last 3 years, informed by a shared core culture and values, the programme has delivered: a dedicated Patient & Family Clinical Nurse Specialist, a redesign of visitor experience co-designed with families, improved experience gathering and triangulation, holistic approaches to complaints and incidents, routine reflective practice, a TIC training program, the establishment of a charitable fund, and a research programme.

#### IMPACT & RESULTS ACHIEVED

Our initiative has significantly enhanced the patient and staff experience. The impact and results of these changes are covered in the following areas: Training and Reflections; Patient Engagement – Patient Experience and Engagement Committee (PEEC); Staff Engagement – Staff Experience and Engagement Committee (SEEC); Physical Environment and Support Structures; Measurable Outcomes.

By measuring success through a combination of structured feedback mechanisms and direct observations, we've ensured that our interventions are both effective and aligned with the needs of those we serve. These outcomes not only demonstrate our commitment to improving care but also underscore the critical role of engaged and informed teams in achieving healthcare excellence.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

What sets our initiative apart is its profound commitment to person-centred care, which resonates through every layer of our approach—from planning to implementation. The initiative is deeply rooted in multi-disciplinary collaboration, including patients and their families as part of the team. Recognising the synergies between person-centred care, trauma-informed practice, and EDI, we have integrated these frameworks to enhance their impact. This has helped to ensure that our strategies are robust, inclusive, and highly adaptive to the needs of patients, families, and staff alike. A critical aspect that distinguishes our initiative is its focus on cultural change. By prioritising learning from experience and fostering cultural growth, we have cultivated a sense of organisational maturity that is rare in acute care settings.

Our initiative has not only implemented changes but has also reshaped the way care is perceived and delivered, making a significant shift from process-driven to person-centred care. Many aspects of this work have been pioneering. Furthermore, the active engagement and involvement of patients in the decision-making processes mark a groundbreaking approach in acute care. This level of patient involvement ensures that the care provided is genuinely reflective of their needs and experiences, leading to better outcomes and improved experiences. These elements—person-centred care, multi-disciplinary collaboration, cultural change, and patient involvement—are what make our initiative not just innovative but a model for future healthcare projects.

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## University Hospital Bristol and Weston 'My Hospitals Know and Understand Me' - the co-designed UHBW Experience of Care Strategy 2024-2029

### Category

Strengthening the Foundation



**University Hospitals  
Bristol and Weston**  
NHS Foundation Trust

### ORGANISATION DESCRIPTION

University Hospitals Bristol and Weston NHS Foundation Trust is a large tertiary acute Trust that has workforce of over 13,000 staff. We are a beacon for outstanding education, research, and innovation. UHBW delivers over 100 different clinical services across 10 different sites serving a core population of more than 500,000 people.

### SUMMARY

Being unwell and coming to hospital can be an anxious time and some of the communities we support face unfair barriers in accessing health services. Every person UHBW cares for has a personal story that defines them. Our Experience of Care Strategy "My Hospitals Know and Understand Me" is our commitment to understanding that and delivering person centred care that reflects the unique needs of the people and communities we support so that everyone, no matter who they are or at what stage of life they are at, experiences outstanding care. My "Hospitals Know and Understand Me" re-invigorates our commitment to putting patients first, making clear that everything we do contributes to the experience of the people we support in our hospitals.

We have collaborated with our people and communities to develop this strategy, harnessing the collective energy and skills in the process, and building momentum for change. The strategy will ensure that patients and their loved ones are heard, connected, and have a sense of belonging when they receive care. By asking what matters to people and being open to continuous learning we'll grow and deliver truly person-centred care.

We have collaborated with our people and communities to develop this strategy, harnessing the collective energy and skills in the process, and building momentum for change. The strategy will ensure that patients and their loved ones are heard, connected, and have a sense of belonging when they receive care. By asking what matters to people and being open to continuous learning we'll grow and deliver truly person-centred care.

### IMPACT & RESULTS ACHIEVED

"Thanks for sharing the new strategy with us - I am really impressed, it is a great ambition. I really like the "Experts by Experience" concept, putting them alongside other experts, helps to balance out the power relationships between the experts that society tends to think are "proper" ones and everyone else." Rep from Healthwatch Bristol, North Somerset and South Gloucestershire. Ownership by life course and patient pathway service leads in writing the objectives and milestones. A commitment to deliver from the start. A community of practice for delivery with teams working together to support each other.

The power of shared learning and shared experience around a common venture which includes skills development and shared camaraderie. A strategy that reflects what matters to our community partners - "I can see myself in it." Re-enforced and enhanced community partner relations in the VCSE with a lead into the planned launch of our Participation Community (year one strategy milestone). Influential in how other strategies are developed including the emerging UHBW Clinical Strategy. A cultural shift in that the strategy offers a new easily accessible and inclusive narrative for experience of care that is being used daily. It offers a unified and inclusive space that enables people to articulate what experience of care means to them and understanding their role in furthering that.

### WHAT MAKES THIS INITIATIVE STAND OUT?

Decision to co-design strategy with colleagues and community partners from the out-set. A distinct discovery phase with various entry points (survey: interviews: community partner event over 50 partners). Embedding the evidence-based Picker Principles of Person-Centred Care as the foundation of the strategy. Building rapport in the discovery phase to build ownership and on-going engagement.

Respecting the value of the diverse needs, positions, and interests of the contributors. Stretching our frame of reference by asking what matters to you from multiple perspectives. Working with existing networks to broaden reach (e.g. Bristol Deaf Health Partnership). Positioning the advancement of health equity as integral. Referencing and building on existing good practice (Community Ambition Bristol - coproduction best practice). Hospital charity support in advancing both their strategic intent in respect of experience of care and that of UHBW.

### Contact Details

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## University Hospitals Coventry and Warwickshire NHS Trust Patient Experience Team making a REAL difference with Patient Led Assessments of the Care Environment

### Category

Environment of Care



**University Hospitals  
Coventry and Warwickshire**  
NHS Trust

### ORGANISATION DESCRIPTION

University Hospitals Coventry and Warwickshire NHS Trust (UHCW) is responsible for two hospitals, University Hospital in Coventry and the Hospital of St Cross, Rugby, and we also deliver a range of services across the West Midlands. UHCW is home to one of the largest teaching hospitals in England and we have more than 9,000 individuals that are part of our workforce.

### SUMMARY

All Trusts are invited to undertake on an annual Patient Led Assessment of the Care Environment (PLACE), whereby assessors measure against the scoring matrix set out by NHS Digital in regards to environmental factors. This in itself is standard practice and not extraordinary, but what is different at UHCW is how University Hospitals Coventry and Warwickshire NHS Trust (UHCW NHS Trust) now undertakes this assessment and most importantly how it acts so that the environment for patients is improved.

PLACE assessments are usually led by the Estates Team, but here at UHCW NHS Trust they are led by the Patient Insight and Involvement Team. This unique approach really has improved how these assessments are run and actioned and ensures the patient voice is central in the assessments. Since taking over the lead of this the Patient Insight and Involvement Team involve more members of the public from many walks of life take part in the assessments as assessors. For the first time wheelchair users, representatives from Healthwatch, Cultural Inclusion Network, the Trust's Patient Partner Forum and Virtual Panel now make up 50% of all Assessments Teams, with the other half made up of Matrons, representatives from Infection Control, the Dementia Team, Quality Department and Estates.

Since taking over the running of these Assessments in 2022 a dedicated PLACE Delivery Group has also been set up, made up of many Teams across the Trust including, Patient Experience, Estates, Communications, Volunteers, Finance and Nursing Leads. These Assessments being led by the Patient Insight and Involvement Team also means feedback from these as well as Complaints, PALS, Friends and Family Test and national surveys can be triangulated so that the patient voice can inform future projects and improvement.

### IMPACT & RESULTS ACHIEVED

Driven by the PLACE Delivery Group the following has been implemented following PLACE Assessments over the past two years: Adaptive cutlery is now available for wards to support those with dementia or for patients with other neuro diverse needs; There are now stocked beverage trolleys in all departments with drinks and light snacks for patients who require something during the night; Sensory Box with sensory items to support patients with Learning Disability and/or Autism is now available for departments to use and help their patients have the calmest stay they can whilst in hospital; Patient/family rooms are now dedicated to that use following the change of use during the Covid-19 Pandemic; The Trust has launched a Carers Charter, with a supporting Carers Support Pack after feedback from assessments suggested carers were often forgotten when attending to a loved one for long periods on the ward area; Improved seating in all waiting areas; Wheelchairs are now available to book at each reception areas at University Hospital, Coventry and the Hospital of St Cross, Rugby; Hearing loop systems in all patient facing reception areas are implemented to support hearing and visual impairments; Dementia friendly clocks are now displayed in all patient bays and ward areas including all side rooms; To help our patients with dementia, all toilet seats will be blue by September 2024 and to enhance patients' orientation and co-ordination doors and bed bays are being painted different colours.

### WHAT MAKES THIS INITIATIVE STAND OUT?

We are the only Trust in the country (to our knowledge) whereby the PLACE Assessments are led by the Patient Experience function.

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## University Hospitals of Derby & Burton NHS Foundation Trust Patient Safety Partner

### Category

Patient Contribution - Individual



**University Hospitals of  
Derby and Burton**  
NHS Foundation Trust

### ABOUT NOMINEE

Aaron Horsey is UHDB's first ever Patient Safety Partner. Despite this being a completely new role for both the Trust and Aaron, his approach to this has been open, collaborative and flexible. Aaron sadly lost his wife during the birth of their son in January 2022. His wife's death was the subject of an inquest and a Health Services Safety Investigations Body (HSSIB) review, with learning to take forward. Despite suffering an immensely traumatic experience and being faced with the prospect of bringing up his son on his own, Aaron channelled much of his energy into supporting positive change. For example, he has successfully campaigned for greater paternity leave in cases of bereavement of either the baby or mother and changes to legislation are expected later this year.

Aaron was in regular contact with the Trust's Chief Nurse and Patient Experience team throughout the HSIB review and coroner's inquest and was always keen to work with us to make necessary improvements to our services, and not just maternity. Aaron became a PSP in September 2023 and soon after became heavily involved in the Trust's expansive Maternity & Neonatal Improvement Programme (MNIP). Initially, Aaron joined the Communications & Engagement workstream of the programme, supporting with developing clear and concise public and service user updates on everything we have been trying to improve. Aaron later also joined the Maternity Improvement Group (MIG) which oversees the improvement programme, and the Maternity Oversight Group (MOG) which oversees regulations and receives reports and escalations about the programme. Aaron provides constructive challenge and helpful suggestions in each of these forums, helping to keep the focus on what matters to women, birthing people, and their families.

### SUMMARY

Aaron has been an incredibly supportive, compassionate and professional expert by experience, contributing constructively to everything he is involved in. He regularly recognises how hard staff are working to improve maternity and neonatal services and continues to support the Trust in focusing on high quality care for all. Even if Aaron does not continue to be involved in the programme until its end, I am in no doubt his contributions to date will have a lasting benefit. Everything Aaron has done and the way he conducts himself is all the more impressive when we consider the personal trauma he has been through. It has been an honour to work with Aaron and I look forward to much more. Building on his contribution within the improvement programme, he is exploring other opportunities to provide his support and guidance.

### AT WORK

In every interaction with the Trust in numerous forums, Aaron is always professional, patient and compassionate. Because of the nature of the MNIP and there being considerable improvements needed to deliver safer care for mums and babies, the conversations are often difficult and upsetting. But throughout Aaron continues to display that patience and compassion towards all involved. He repeatedly acknowledges the significant amount of work staff have been doing, and continue to do, to improve maternity and neonatal services, whilst also respectfully challenging the information being exchanged and the actions needed going forward to help keep everyone on the right track. Knowing what Aaron has been through personally makes this all the more impressive. He is an absolute pleasure to work with, and I am personally honoured to have even met him and his lovely son, let alone work alongside him to help drive change. For a long time in the organisation, it felt like involving people like Aaron would never happen, but with the culture shifting to a more open and less defensive approach, welcoming people like Aaron into the fold to help us is becoming a more common approach. There is still a lot more to do but with examples like Aaron, we are likely to see a snowball effect with more and more people seeing the positive outcomes of involving a patient or service user. Aaron is a wonderful ambassador for the benefits of involving patients, service users and their families. The Trust has recruited three further Patient Safety Partners who we are confident will make an equally beneficial contribution to the Trust's improvement agenda.

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## University Hospitals of North Midlands Interpreter on Wheels (Insight)

### Category

Communicating Effectively with Patients and Families



University Hospitals of  
North Midlands  
NHS Trust



### ORGANISATION DESCRIPTION

University Hospitals of North Midlands NHS Trust is one of the largest and most modern in the country. Based across two sites, Royal Stoke in Stoke-on-Trent and County Hospital in Stafford, we are proud to serve around three million people and we're highly regarded for our facilities, teaching and research. We are the specialist centre for major trauma for the North Midlands and North Wales.

### SUMMARY

The "Insight" Interpreter on Wheels (IOW) and App system has enabled wider, faster accessibility to qualified interpreters of over 200 different foreign and non-spoken languages 24 hours a day, 7 days a week, ensuring safe, inclusive access to all services across the whole acute Trust and community satellite clinics. The PALS & Volunteer Services Manager alongside her teams have actively promoted IOW and trained staff members widely across the Trust - there are now 17 machines in use, with a process in place to access and track the machines at any time. There has been a huge increase in interpreter usage for the 12 months IOW has been available- a total of almost 16,000 minutes used, and a reduction in incidents/complaints regarding cancelled procedures/appointments due to lack of interpreter availability. The PALS & Volunteer Services Manager has also been involved with championing the IOW with other Trusts/Organisations to share good practice and the positive progress that has been made since introducing IOW.

### IMPACT & RESULTS ACHIEVED

Since the launch of the "Insight" App and IOW, access to qualified interpreters is on-demand. We have received just 2 incident reports in 12 months around the lack of an on-demand language being available whilst using IOW. Sophie and I have received no emails/feedback of any procedures or outpatient appointments that have been cancelled as a result of a lack available interpreter. In 12 months, we have used over 3958 of video minutes and 11,929 audio minutes using the IOW, using over 45 different languages. This equates to almost 265 hours of interpretation that our patients and visitors may not have had access to in the past. The feedback from staff has been overwhelmingly positive in that the IOW is easy to use, and staff feel they are able to communicate more effectively with patients and visitors, ensuring holistic care is provided. The increase from 1 machine to 17 across the Trust (with more coming) demonstrates their popularity, and all machines are used every day. Patients and visitors feedback is also very positive. They are able to ask questions about their care/their loved one's care and receive answers they can understand. As a Trust, we have greater assurance our patients and visitors with foreign and non-speaking language support needs have safe, equal access to services using trained, qualified interpreters and are receiving information in a way they can understand allowing them to make informed decisions.

### WHAT MAKES THIS INITIATIVE STAND OUT?

In 2021 in Stoke on Trent, 16.6% of the population was ethnically diverse and inequality in access to services is a huge issue, meaning that large cohorts of patients do not always receive the care they need in a way they can access or understand. The Insight IOW on-demand interpreter service supports with removing this inequality for our patients and visitors with foreign and non-spoken language needs.

The PALS & Volunteers team, in particular, Sophie the manager, is probably the most significant contributor to the success of the IOW. She immediately saw the benefit of this system and embraced the project, taking ownership. She worked to review and revise the Trust's Interpretation policy to ensure the usage of the Insight programme is included. She has devised and implemented a process to ensure these machines are available for use 24/7 and has tirelessly promoted their importance in communication support across the Trust. She works alongside our supplier, reviewing data to ensure there are enough machines provided, even ensuring that areas of the highest usage have their own dedicated machines. In addition, for any new patient identified as requiring foreign or non-spoken language support, Sophie will ensure an alert is added to their electronic records to highlight this for future attendances.

### Contact Details

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## University Hospitals Plymouth NHS Trust The Secret Garden - a fresh air space for everyone

### Category

Environment of Care & Support for Caregivers, Friends, and Family



### ORGANISATION DESCRIPTION

University Hospitals Plymouth (UHP) NHS Trust is the largest hospital in the South West Peninsula, providing comprehensive secondary and tertiary healthcare and we are the region's Major Trauma Centre. We offer a full range of general hospital services to around 450,000 people in Plymouth, North and East Cornwall and South and West Devon, including maternity services, paediatrics and a full range of diagnostic, medical and surgical sub-specialties. UHP has one of the busiest Critical Care Units in the country admitting over 3000 adult patients per year across Neuro, Cardiac and General Intensive care.

### SUMMARY

Facilitating fresh air therapy for inpatient settings is exceptionally challenging, particularly for those receiving intensive care. Using a patient led, co-design process UHP created a Secret Garden which provides a fully equipped, all weather, outside space to enable all patients and their loved ones to experience the sensory and psychological benefits of a fresh air space. The garden provides outdoor space for neonatal, paediatric and adult patients. For our neonatal patients this may be their first experience of the external environment, and for their families, the only opportunity to capture memories in a non-hospitalised space.

This unique garden offers a private space to spend time with loved ones, engage with functional rehabilitation, make memories, engage in animal assisted activities and supports end-of-life care. We believe we are the only acute inpatient fresh air space offering this provision in the UK, providing personalised end-of-life care for all inpatients. This space is for everyone – including our amazing staff. We host events, teaching, staff yoga, meetings and a space for rest and recuperation. It is a haven for all. The real impact of the garden lies in its legacy: national guidance, clinical research in practice, memories for patients, loved ones and our teams.

### IMPACT & RESULTS ACHIEVED

Since opening formally in 2022 we have supported over 5000 patients, loved ones and staff to feel the benefits of fresh air therapy. Its' unique design and innovative utilisation make it a hub for holistic therapy and care in a very busy hospital. A space that has supported patients irrespective of age, and a space that proves when teams unite amazing things can happen.

### WHAT MAKES THIS INITIATIVE STAND OUT?

The secret garden is unique and innovative, and its success is attributed to the inclusivity, engagement and collaboration of teams throughout its development. This alongside its inception with a core patient co-design process, has resulted in an outside space which offers care for all patients and loved ones. It has provided for the first time, an outdoor space for neonatal intensive care patients, and their families/carers, to experience the benefits of fresh air. In collaboration with adult ITU and healthcare professionals from across the MDT, the transfer of the infant to the secret garden was judiciously planned and facilitated, enabling the family to experience a private, sensory environment, away from neonatal intensive care. For this infant and family, it was their first and only opportunity to create outdoor memories.

The success of the event impacted positively on both the family and staff, captured within feedback given, and fuelled an aspiration to offer the experience to all our service users. To ensure this became a safe, feasible and realistic option, a Standard Operating Policy (SOP) was created. To date three families of infants receiving neonatal ICU care, have benefitted from spending time in the Secret Garden. Two of these were to create personalised end-of-life experiences and another to reunite a family whose parent required ICU. These loved one's experiences are being translated into an academic piece of work as they are keen to share their experience, in the hope it becomes a possibility for families throughout the UK. In addition, the healthcare professionals involved felt an enormous sense of achievement and satisfaction in being able to support the families wishes. The feedback and suggestions received from family and staff, enables us to evolve, to support future episodes of care both within our organisation and nationally.

### Contact Details

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## Walsall Council Walsall Connected

### Category

Integration and Continuity of Care including Social Care & Partnership Working to Improve the Experience



### ORGANISATION DESCRIPTION

Walsall Council, in collaboration with Bloxwich Community Partnership and Walsall Healthcare Trust, delivers the Walsall Connected initiative across 27 locations. A core management team of five members has successfully trained over 200 staff to deliver Walsall Connected services. This management team supports sites by providing upskilling, training, demand management, and data reporting.

### SUMMARY

Walsall Connected is revolutionising digital inclusion by bridging the pandemic-induced divide through a powerful coalition of the Council, Community Groups, and health services. The initiative's success is evident in the establishment of 29 Walsall Connected centres, where residents gain essential digital skills, ensuring they remain confident and adaptable in a rapidly evolving digital world. This initiative stands out due to the involvement of over 200 dedicated staff and volunteers, reflecting a broad spectrum of community perspectives. Their collaborative efforts have fostered a truly inclusive environment, making digital proficiency accessible to all. Moreover, Walsall Connected's model is designed for adaptability and transferability, serving as a blueprint for other Councils.

Its unique integration of a site within an acute hospital setting exemplifies innovative place-based partnership working, enhancing collaboration across different sectors which helps us further understand demand and needs across Walsall. In summary, Walsall Connected and the Walsall Manor Hospital 'Island' deserves recognition as a pioneering force in digital inclusivity. Its success is built on collaborative leadership, sustainable outcomes, and an inclusive approach. The initiative not only addresses immediate digital needs but also provides a replicable framework for future efforts, making it a compelling example of community-driven digital transformation.

### IMPACT & RESULTS ACHIEVED

Between January and December 2023, Walsall Connected services overall have made a significant impact on the community: 10528 individuals received assistance; 63% of customers supported now feel confident to complete processes independently; 99% of people surveyed would recommend Walsall Connected to family and friends. Between January and June 2024, Walsall Connected services at Manor Hospital Walsall have supported: 443 individuals received assistance with 73 for Blue Badge support; 100% of surveyed residents would recommend Walsall Connected to family and friends; 82% of people surveyed service users gained online knowledge, skills, or understanding.

### WHAT MAKES THIS INITIATIVE STAND OUT?

Distinguishing Features of the Walsall Connected Programme include: Innovative Origins (this initiative has been a trailblazer in the NHS, bringing council services support directly to the community, making it accessible in familiar and approachable locations); Strategic NHS Partnerships (the programme has paved the way for strategic partnerships, enhancing NHS initiatives such as issuing bus passes to reduce 'Did Not Attend' (DNA) rates, and supporting the MyPre-op process.

By training key locations to provide additional assistance, we aim to minimize failed appointments and operations, streamlining customer service and reducing associated costs); Unified Service Network (through collaborative efforts, all Walsall Connected centres are interlinked, sharing knowledge and resources, fostering a community spirit, and enabling cross-location collaboration. This ensures that residents receive consistent quality service and advice, regardless of which centre they visit, truly embodying the heart of the borough's commitment to serving all residents); Digital Upskilling Vision (our long-term objective is to digitally upskill residents, empowering them with the capabilities to access services more efficiently and cost-effectively).

### Contact Details

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## Walsall Healthcare NHS Trust 'Impactful Team Excellence'

### Category

Team of the Year (including complaints and PALs)



### ABOUT NOMINEE

The Patient Relations & Experience Service encompasses several specialised teams, including Patient Experience, Voluntary Services, Welcome Hub, Family and Carers Support, Patient Relations, and Spiritual, Pastoral and Religious Care (SPaRC). Each team plays a vital role in delivering, monitoring, and improving the experiences of patients and their families. The Patient Relations team, for instance, focuses on addressing concerns and complaints through initial triage by Patient Relations Support Officers (PALS), with escalated complaints managed by Senior Patient Relations Officers. Hospital Chaplains also provide essential spiritual care to patients and the community, complementing the holistic care provided by the multidisciplinary team. This structure ensures that patients, families, and carers have avenues to provide feedback, share their experiences, and influence the care they receive, ultimately aiming to enhance overall patient satisfaction and well-being.

### SUMMARY

In a healthcare system where the patient voice shapes the landscape of care, the Patient Relations & Experience Service team stands out as a beacon of excellence. Our commitment to placing patients at the core of our efforts underscores our belief that patient experience is not just a departmental responsibility but everyone's business. This team deserves special recognition for its dedication to implementing meaningful changes that improve patient care and experiences.

Notable Achievements include: Award-Winning Initiatives for example the team has pioneered several groundbreaking programmes, most notably the Little Voices initiative, which amplifies the voices of children that often go unheard and the Patient Experience Strategy in collaboration with the Royal Wolverhampton NHS Trust, we produced and published the Patient Experience Enabling Strategy for 2022-2025, setting a clear roadmap for enhancing patient care and experience). Impactful Programs and Partnerships includes for example enhanced Feedback Mechanisms where we have embedded additional ways of providing feedback, such as the 'Mystery Patient Scheme' and 'Raise and Praise,' capturing a broader spectrum of patient views and ensuring they are translated into actionable improvements. Community and Volunteer Engagement examples include the Volunteer Workforce where our volunteer workforce has grown significantly, particularly through collaborations with local colleges, supporting young people in the early stages of their careers and increasing community involvement. Support for Families and Carers includes Family and Carers Support where we introduced a new role dedicated to ensuring the voice of unpaid carers is heard, working closely with 'Forward Carers' and the Walsall Carers Hub Response to Critical Times includes for example Well-being Support where during times of critical pressure, we have supported staff and patient well-being through partnerships with Manor Farm Community Association and Blessed 2 Bless. Feedback and Reporting Improvements include FFT in Focus where by focusing on the Friends and Family Test (FFT), we have improved response rates and initiated a dashboard shared with divisional leads.

Patient Voice reporting is now in place and actively utilised by teams, ensuring continuous improvement. Leadership and Innovation includes Patient Experience Champions where we actively encourage staff through our patient experience champion programme, recognising individuals and teams who make significant contributions to improving services. Through these initiatives and achievements, the Patient Relations & Experience Service team has demonstrated a profound impact on patient care and experience. Their unwavering dedication to listening, valuing feedback, and transforming it into meaningful actions makes them truly deserving of special recognition. I could not be any prouder of all they do and their overall energy and commitment.

### AT WORK

The Patient Relations & Experience Service team exemplifies dedication and expertise in their roles within our organisation. Each team member brings a wealth of experience and specialised skills to their assignments, tasks, and work projects, contributing to the consistent delivery of high-quality services.

### Contact Details

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## Welsh Ambulance Service A System of Partnership Working

### Category

Partnership Working to Improve the Experience



### ORGANISATION DESCRIPTION

The Welsh Ambulance Service University Trust (WAST) provides emergency unplanned ambulance care to the population of Wales. With a staff of over 4,000, WAST provides Emergency Medical Services via 999, Non-Emergency Patient Transport, and also delivers the NHS 111 Wales telephone and website services.

### SUMMARY

There are a number of initiatives and projects we have delivered or are currently working on where working in collaboratively with people, communities and wider stakeholders has been and continues to be a crucial component to their success.

These have included: Welcome Pack - This innovative pack is seen as a significant step towards ensuring that diverse communities can access critical medical assistance in times of need and is an example of how effective partnership working can overcome barriers people face and improve their experiences; Helping to build resilient communities and stronger - Our work in the community for people with learning disabilities has been to work towards improving health outcomes and reducing avoidable deaths through the earlier identification, diagnosis and effective treatment of health conditions; Post CPR Support - The team actively promote the learning of life saving skills, with particular emphasis during its annual campaigns 'Shoctober', 'Restart a Heart' and 'Defibuary', aligning to the Well-being goal of a Healthier Wales, NHS Wales out of Hospital Cardiac Arrest Plan (June 2017) and Save a Life Cymru. After discussions with Sudden Cardiac Arrest UK and Quality Improvement Skills Tutor, it was agreed to explore and adopt a digital solution using a QI methodology.

A proposal was put forward to Resuscitation Council UK (RCUK), proposing that they develop a link tree on behalf of Wales. This link tree would serve as a guide to appropriate support services for individuals and their families in need of support following CPR and cardiac arrest survivor support. RCUK have agreed to host this as part of their repository of resources with Wales leading, with an opportunity to share good practice and other nations adopting.

### IMPACT & RESULTS ACHIEVED

We know that you cannot solely rely on quantitative measures and survey results which capture insights into specific points or parts of our service, to better appreciate peoples experiences, we need to understand it across the whole system, and the impact our service, people and processes have on patients, their family, and carers. We have developed ways for people to share their stories and work with them to turn their lived experience into insights and intelligence and identify quality learning opportunities.

Patient stories have been aired at our Trust Board and various committees within the Trust as well as outside organisations. Each story is accompanied by a 'patient story tracker' to ensure continued learning and quality improvement takes place.

### WHAT MAKES THIS INITIATIVE STAND OUT?

As an ambulance service we are moving away from traditional ways of working and evolving into a service that is putting people and communities first. Listening to and understanding their needs in a way that enables the Trust to design services around what people tell us is important to them. We think this makes us stand out from the crowd when it comes to harnessing the power of citizen voice.

We have issued 'a call to action', encouraging any one to come and work with us to help overcome issues or barriers they feel they or their community is facing when trying to access any of our services. The Trust is now covered by the Future Generations Act in Wales and refreshed Healthier Wales which place a greater focus on population health and health prevention.

We think our approach to engagement and coproduction with communities has real potential to enable the Trust to better understand population health inequalities, improve our planning and empower people to make better decisions about how they manage their health and wellbeing.

### Contact Details

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## Welsh Ambulance Service Blue Light Hub gaming app

### Category

Innovative Use of Technology, Social and Digital Media



### ORGANISATION DESCRIPTION

The Welsh Ambulance Services NHS University Trust (WAST) serves a population of approximately three million people across 8,000 square miles, covering diverse urban, coastal, and rural areas. With around 3,500 employees, WAST is the national ambulance service for Wales, providing critical services within the unscheduled care system. Commissioned by Health Boards and accountable to the Welsh Government, WAST offers various patient care pathways, including the 999 Emergency Service, Non-Emergency Patient Transport Service (NEPTS), and NHS 111 Wales.

### SUMMARY

Understanding that a child's experience in an NHS emergency setting can be distressing, the Patient Experience & Community Involvement (PECI) team developed the bilingual gaming app, Blue Light Hub, to educate 7-12-year-olds about the appropriate use of 999 and emergency procedures. The Covid-19 pandemic halted face-to-face engagement, prompting innovative outreach solutions. In collaboration with WAST staff, a Health Board Play Co-Ordinator, and a Cardiff University Psychologist, the app was launched in 2021 on Google Play (1) and the Apple app store (2), featuring four games: Quiz, 999, Dress Up, and Dispatch. The app, guided by Trust Mascots, educates players on emergency services while earning points and customising avatars. Recognised as an educational resource on the Welsh Government's Hwb platform and approved by Google experts, the app supports children's rights to education and skill development per UNCRC Articles 28 and 29. Promoted via the Welsh Government's Educational newsletter 'Dysg' and social media, the app is available on staff and volunteer iPads for young patients use when conveying to hospital or undertaking observation as part of a play and distraction technique. Cardiff University evaluated the app in three South Wales schools, resulting in ongoing improvements, including new games and voiceovers for accessibility. Featured on Crimewatch Live, the app's evaluation study was recently published in the BMJ Open.

### IMPACT & RESULTS ACHIEVED

In partnership with Cardiff University, an evaluation was conducted to assess whether the app enhanced children's knowledge, awareness, and confidence in using emergency services. Three primary schools in South Wales participated in a two-week classroom evaluation. Children used the app and completed quizzes. The evaluation focused on 393 children, averaging 8-9 years (47.8% male, 50.9% female) with sociodemographic information was sourced from school inspection reports. The evaluation took place over 2 weeks in June 2022. Teachers received written instructions detailing that children could withdraw from the evaluation at any time and should receive minimal support when completing their quizzes (limited to reading and writing assistance). Children completed the first quiz during class. Afterward, teachers used the Blue Light Hub app with children in their class for one hour per week for the next two weeks. After this period, children completed a second quiz. These quizzes assessed their knowledge of emergency scenarios, awareness of different healthcare services, and confidence in accessing support from emergency services. Post app usage, children's knowledge of appropriate actions in non-emergency scenarios increased significantly from 19.4% to 33.7%. The proportion who could identify a question a 999-call handler would ask rose from 91.6% to 96.9%. Awareness of NHS services for that could help them if they were unwell increased from 59.8% to 74.8%, understanding of NHS roles from 58.3% to 68.7%, and knowledge of how dialling 111 could help from 25.8% to 57.5%.

### WHAT MAKES THIS INITIATIVE STAND OUT?

We believe the Blue Light Hub is the first app specifically designed to educate primary school-aged children about emergency services. Our findings from the evaluation study indicate that using the app for just 2 hours over 2 weeks during school time significantly improved children's knowledge and awareness of emergency services.

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## Welsh Ambulance Service

### Championing the Needs of people with a learning disability, when accessing Welsh Ambulance Services, through continuous engagement

#### Category

Engaging and Championing the Public



#### ORGANISATION DESCRIPTION

The Welsh Ambulance Services University Trust (WAST) provides emergency unplanned ambulance care to the population of Wales. With a staff of over 4000, WAST provides Emergency Medical Services (EMS) via 999, Non-Emergency Patient Transport (NEPTS) and also provides NHS 111 Wales telephone and website services. WAST's Patient Experience and Community Involvement Team (PECI) engages with communities pan Wales, working in particular with communities with protected characteristics, including learning disability (LD). Peci aims to capture, present and improve patient's experiences and it's engagement programme with people with a learning disability (PWLD) is well established.

#### SUMMARY

PECI first engaged with PWLD in 2009, when local groups addressed health professionals about the inequalities and barriers PWLD face when accessing healthcare. Ambulance services had not then been widely considered. WAST has since committed to championing the needs and rights of PWLD when accessing ambulance services, talking with, involving and including PWLD at every stage, to improve patients' experiences and reduce avoidable harm and deaths. Answering themes from 15 years of continuous engagement, Peci has pioneered award winning co-produced resources, peer-led education programmes, and changes to organisational systems. Experience stories, originating from concerns, have led to improvements in systems and clinical data capture to form a robust platform for future learning and delivery.

Relationships were maintained through the pandemic to provide contemporaneous easy read resources on public messaging and a national online Easy Read platform within NHS 111 Wales. Experiences and expectations form the backbone to WAST's in-house LD staff-training module. Experience data shows that through engagement, people have better understanding of services, are more willing to engage, are less nervous of our vehicles, uniforms, equipment and observations. The influence extends to wider NHS settings, is applicable to other communities, therefore reducing barriers and inequalities for wider communities.

#### IMPACT & RESULTS ACHIEVED

Each engagement theme has its own resource outcome for example: LD Community Champion programme was a national peer led quiz on the importance of using health services wisely. Our most prolific champions delivered sessions to over 60 groups. A PES originating from the Putting Things Right process led to an options-appraisal for changes to telephony systems to flag LD, to further improve data capture and information hand-over to crews / hospitals. In an application for funding to Royal College of Nursing Foundation for a co-produced tool to improve PWLD's access to emergency care, Peci visited 150 people to ask which proposal was most important to the community. While unsuccessful, Peci is exploring how WAST might otherwise realise the community's first choice, an immersive awareness and training video-resource, around basic observations.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

PECI and WAST's LD programme is a well-established and has gained renown across Wales and the UK. WAST and Peci have strong relationships within the LD Community and its wider network of supporting partners and organisations. Most recently, Peci received a warm returning welcome to a national conference, receiving a multitude of requests to revisit groups across Wales to update on new developments. These developments start a new era of data-capture around LD for WAST, with a substantial ambulance-sector specific patient-experience evidence-base directly influencing service design and delivery on the front line. Through co-production, WAST's resource development, peer-led programmes and continued championing of needs through a continual engagement model, have evolved to the development of organisational systems, which will influence on-scene responses and the reasonable adjustments staff can make to overcome barriers and inequalities.

#### Contact Details

Matt James - [matt.james@wales.nhs.uk](mailto:matt.james@wales.nhs.uk)

### West Yorkshire and Harrogate Cancer Alliance Remove the Doubt

#### Category

Cancer Experience of Care Award

West Yorkshire and Harrogate  
Cancer Alliance



#### ORGANISATION DESCRIPTION

West Yorkshire and Harrogate Cancer Alliance, based in Wakefield and employing approximately 40 people, brings together clinical and managerial leaders from hospital trusts and other health and social care organisations to transform the diagnosis, treatment and care for cancer patients in the region. These partnerships enable care to be more effectively planned and delivered across local cancer pathways.

#### SUMMARY

West Yorkshire and Harrogate Cancer Alliance, with charity OUTpatients and brand and marketing agency Mobas, developed a campaign to raise awareness of the signs and symptoms of cervical cancer and to increase attendance and uptake in cervical screening by LGBTIQ+ communities across West Yorkshire. The campaign targeted the LGBTIQ+ community aged between 24-64 years old, specifically those eligible for cervical screening and those who may be non-attenders; this is due to significant barriers to attending a cervical screening known within this patient group. The campaign, called 'Remove the Doubt' was delivered in two phases from May to September 2023.

#### IMPACT & RESULTS ACHIEVED

Overall, the campaign displayed exceptional engagement rates and audience targeting, solidifying its success in reaching and resonating with our intended demographic. The campaign saw a total of 40,468 impressions. Of these, there were 1,752 engagements (likes/shares) and 649 reactions (comments). The average CTR (click through rate) for this type of health related social media post was estimated at 5.96%; this campaign achieved an 11.67% CTR on its most impactful post. Outdoor advertising impact was measured within key locations across Calderdale, Leeds and Wakefield using 48 sheets in high traffic areas. The impact of outdoor advertising is measured using analysis of traffic data (foot and vehicle), census information, consumer surveys and experienced researchers. Total impacts (views of the assets) from this campaign were estimated to have reached 4.84 million people and over 750,000 estimated to have acted on the messaging - a calculation using DEC (daily effective circulation) and VAI (variable adjustment index). Phase 1 of the campaign targeted certain areas of Calderdale where the LGBTIQ+ population was highest and it ran between May-July 2023.

Phase 2 of the campaign targeted the wider Calderdale area and ran between July - September 2023. In phase 1 we saw an additional 61 samples taken in a specific practice located within the area of Happy Valley Pride as a result of the promotional event. Across the entirety of the campaign, the average cervical screening coverage for Calderdale increased by 1% (69.7% - 70.7%), we saw increases of up to 2.6% within certain practices local to the campaign delivery in phase 1. During this time the England average for cervical screening coverage dropped by almost 2%; a significant achievement for Calderdale and this campaign achievement compared Nationally. In the months after the campaign the cervical screening average continues to steadily rise, it is up another 0.4% since September, another great achievement as national figures continue to decline.

#### WHAT MAKES THIS INITIATIVE STAND OUT?

This is the first time any Cancer Alliance or Public Health team have targeted a campaign at the LGBTIQ+ community due to the stigma attached.

We were brave enough to create a campaign that, although sparked political debate, potentially saved the lives of those who would not be invited for screening as part of the national programme: first time a trans man had been used in a healthcare campaign to raise awareness of the stigma and challenges these patients face in the primary care system; patients in the campaign are from the local area and are recognised and trusted members of their community, giving the campaign instant authenticity, this hadn't been done before in the LGBTIQ+ arena; training provided to healthcare professionals alongside the campaign ensuring the staff delivering the screening appointments knew the barriers these patients faced and how to treat and speak to them with respect and professionalism, a significant barrier raised in the patient engagement sessions.

#### Contact Details

Sue Ormesher - [sue.ormesher2@nhs.net](mailto:sue.ormesher2@nhs.net)



## Picker

Picker is a leading international research charity in the field of person-centred care. We have a rich history of supporting those working across health and social care systems, measuring patient and staff experience to drive quality improvement. Picker believes that everyone has the right, and should expect, to experience person centred care and that it should be ingrained into the fabric of health and social care services. As a charity, we strive to influence, inspire, and empower care providers, practitioners, and policymakers to implement person

## Information about our Partners

centred approaches and to improve people's experiences of care. To learn more about our work, visit [www.picker.org](http://www.picker.org) or follow us on social:

Twitter @pickereurope

LinkedIn @picker-institute-europe

Facebook @pickereurope

## NHS

NHS England believes that improving experiences of care is everybody's business. Good experiences of care are associated with improved clinical outcomes and contributes to people having control over their own health. We also know that good staff experience is fundamental for ensuring people have good experiences of care. In partnership with a wide range of NHS systems, providers, charity, voluntary and non-profit sector, NHS England seeks to improve the experiences of everyone, particularly the most disadvantaged, and to reduce health inequalities. We have a strong focus on embedding experiences of care throughout clinical programmes, driving participation and co-production with people using services and their unpaid carers, and on using insight from both people with lived and learnt experience to identify what is working well and what needs to be improved. These 3 principles are articulated in the [National Quality Board shared commitment to improving experiences](#) of care that was published in October 2022. It is also reflected in [NHS Impact](#) (Improving Patient Care Together) the new, single, shared NHS improvement approach, where co-production with people with lived experience is identified as one of the key enablers for improvement.

NHS England is committed to sharing examples of practice to inspire consistent good experiences of care across the NHS. You can find out more about our work at: [www.england.nhs.uk](http://www.england.nhs.uk)

What are the experiences that people using services, their families and unpaid carers 'Always' want to happen?

What can we learn from improvement science to assist us? If these are questions you are thinking about too, perhaps [Always Events®](#) can be of help?

Always Events® are defined as "those aspects of the patient and family experience that should always occur when patients interact with healthcare professionals and the health care delivery system". NHS England are working with Picker Institute Europe and the [Institute for Healthcare Improvement \(IHI\)](#) developing, implementing and spreading an approach, using quality improvement methodology to reliably listen to what matters to people using services, their families and unpaid carers and then improve together.

Genuine partnerships between people using services, their families and unpaid carers, and staff are the foundation for co-designing and implementing reliable care processes that transform care experiences, and this is at the heart of the Always Events® approach. With the goal being the creation of an "Always Experience." See the toolkit at:

[www.england.nhs.uk/ourwork/pe/always-events](http://www.england.nhs.uk/ourwork/pe/always-events)

Indicators of how well the NHS services are doing and what should be their focus for improvement work can be found across a range of national surveys - these include three major national surveys that are world-leading in healthcare: the GP Patient Survey, the National Cancer Patient Experience Survey, and the NHS Staff Survey, with some results available in easy read, as we recognise the importance of accessibility of information for all people.

Find out more about this work and access a range of downloadable resources, including bite-size guides, on how the NHS can improve insight on patient experience on our website.

<https://www.england.nhs.uk/ourwork/insight>



## Information about our Partners (continued)

The School of Nursing and Advanced Practice at Liverpool John Moores University are delighted to be sponsoring two award categories: Patient Experience Educator of Tomorrow and Patient Experience Advocate of Tomorrow. The awards recognise that students of Health and Social Care, Nursing, Medical and Allied Health Professional education will be in a unique position to champion and enhance patient, service user and carer experience. Patient and service user experience are central to our work. Real-world understanding from a range of disciplines means that we are able to recognise the needs of individuals, families and their communities, and the organisations providing services for them. Working closely with NHS Trusts and our other partners, we use this insight to shape and deliver impactful projects that integrate education and research, promote innovative service delivery, professional development and

improved patient care. This engagement directly informs all of our research and scholarship activities, providing vital learning for our students and real benefits to our community. If you work within a service providing organisation please take time to think about how you might involve students in your work to improve patient and service user experience. They could be source of new ideas and enthusiasm and a worthwhile investment for the future. You may have Practice Educators in your organisation you could collaborate with to help you do this, or perhaps you could have a chat with a colleague from an appropriate school or faculty in your local university.

Contact: Laura Kinsey – email: [L.Kinsey@ljmu.ac.uk](mailto:L.Kinsey@ljmu.ac.uk)



At BizSmart we've helped hundreds of businesses work out and take the steps they need to take to grow their business in a successful and sustainable way. The focus of our support is on you, the business owner, and we will help you achieve the aspirations you have for your business. If you are ready to take the next step and build

real value in your business, then perhaps it's time to do something different? BizSmart is a group of experienced professionals, working with business owners to help them take their businesses to the next level.....join us now.

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The home of customer centric business in the Middle East. Blending collaboration, education and assistance in delivering accelerated impact for people and organisations within a framework dedicated to the development needs and success of the region. Developing people to be the best they can be.

COLLABORATION - CXSA Platform, Conferences & Awards, Webinars, Media & Research

EDUCATION - Advanced training framework, Learning Pyramid, Wide Education Base, Local Certification.

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[www.cxsamiddleeast.com](http://www.cxsamiddleeast.com)



Greens was founded in 1919 and has traded profitably ever since as a single-source, full-service print and communications business working in specific markets, such as the financial, healthcare and pharmaceutical. We have evolved to become a solutions led business – we specialise in the production, fulfilment and logistics of producing critical documents for niche market sectors with stringent regulatory requirements.

As of last year Greens is now Employee Ownership Trust (EOT) - An exciting new chapter in our 100 year history and enables all our staff to have a meaningful stake in the success of our business.

Our LinkedIn page is:

<https://www.linkedin.com/company/greens-ltd>



### Information about our Partners (continued)

Healthcare Conferences UK recognises The Patient Experience Network as a valuable resource providing support for healthcare organisations and individuals wishing to deliver a great experience for patients. The PEN National Awards are an opportunity to celebrate and promote excellence in patient experience, and as the media partner for the awards Healthcare Conferences UK is pleased to share the important work of PEN and

the many examples of high quality care that the awards uncover. Healthcare Conferences UK holds a number of CPD conferences and master classes providing practical guidance for healthcare professionals to deliver high quality care with dignity and compassion and by involving and engaging with patients, their family and carers.

[www.healthcareconferencesuk.co.uk](http://www.healthcareconferencesuk.co.uk)

## PLATFORM81

Platform81 are an award-winning agency built from the ground up offering an unrivalled technical ability within website development and digital marketing.

Offering targeted campaigns with digital channels such as SEO, PPC and Social Media: [www.platform81.com](http://www.platform81.com)



### PECS DATA SERVICES

Originally founded in 1972, as a data capture company, PECS Data Services has progressed and grown to become one of the world's leading business processing outsourcing (BPO) companies, specialising in data capture, document scanning and management, as well as inbound and outbound contact centre solutions.

PECS Data's success has been built on providing innovative technical services and solutions uniquely tailored to the requirements of our clients, allowing them to stay focused on their core business, while we focus on what we do best delivering our services and solutions through our unique global delivery model, that is built on honest family business values and keeping things simple.

With offices located in the United Kingdom, Mauritius and South Africa, our passionate, knowledgeable and experienced team, guarantee to deliver every project accurately and on time, every time.

Constantly exceeding standards on the NHS England's Data Security and Protection Toolkit, PECS currently provide both inbound helpdesk services, as well as survey, data capture and data cleansing solutions on behalf of Picker for the NHS, as well as many other high-profile companies and organisations around the world.

Without doubt the most important consideration when outsourcing any voice or data related project is data security and we don't disappoint at all. We obviously tick all the boxes when it comes to our systems security (ISO27001, ISO9001, Cyber Essentials Plus) but what makes us a little different is that our head office was a former bank and that means our servers and your data are sitting in our large walk in, bomb proof vault and we think that makes us one of the most secure facilities, if not the most secure facility of any outsourcing company in the UK, which gives our clients total peace of mind that their data is completely safe.

Visit [www.PecsData.com](http://www.PecsData.com) or contact us on +441215266039 or [theteam@pecsdata.co.uk](mailto:theteam@pecsdata.co.uk) to find out more on why PECS should be your partner of choice for data and voice related projects.

<https://www.linkedin.com/company/pecs-data-services/>

<https://www.facebook.com/PECSDataServices/>

[https://x.com/Data\\_Capture](https://x.com/Data_Capture)

[https://www.youtube.com/channel/UCbaT4eQTiW3vc6edOpR\\_4UQ/featured](https://www.youtube.com/channel/UCbaT4eQTiW3vc6edOpR_4UQ/featured)

## Information about our Partners (continued)



Established in 2005 by Sarah Preece, Professional Call Minders (PCM) was created with true passion for delivering exceptional customer service. What started as a small entrepreneurial idea full of promise and potential has developed over a decade into a blossoming business that has seen significant expansion and has evolved from a telephone answering service to a specialised virtual services provider. We provide a variety of services including an expert call answering and diary management service perfect for the health and wellbeing

industry. Using PCM Medical is a brilliant business strategy for those operating in vocational occupations where they literally cannot get to the phone.

Working primarily for those in the medical field, we offer clinics full-time reception cover for a fraction of the cost of an in-house member of the team. You can focus on treating your patients with the freedom of knowing that your customers calls are answered, appointments made and enquiries dealt with.

[www.professionalcallminders.co.uk](http://www.professionalcallminders.co.uk)

**We are extremely grateful to all of our partners for this year's PEN National Awards, without whose contributions in time, expertise and support we would not be able to host this prestigious event.**



## Our Judging Panel

Aisha Minhas	Fran Gonnella	Melanie Dawn Potvin
Alaa Musallum	Gillian Radcliffe	Michael Molete
Allie Cusick	Glyn Hayes	Michael Young
Amanda Tabor	Hassan Mohammad	Michaela Tait
Andrew Ryder	Hayley Parker	Nalishebo Elliott
Angel Bellott	Henry Blunt	Nick Medforth
Angela Coulter	Hilary Baseley	Nikant Ailawadi
Anna Rarity	Iqbal Yasin	Nikki Thomas
Anna Neill	Janet Coninx	Omar Zeyad
Anna Tee	Jean Tucker	Paulette Burgess
Azmina Rose	Jennie Negus	Phil Stylianides
Beverly Cannell	Jenny King	Rebecca Mortimer
Boba Rangelov	Joan Saddler	Reem Hasan
Bonnie Green	John Dale	Richard Ashworth
Carol Duane	Jon Twinn	Rob Saunders
Carol Munt	Karen Bowley	Ruth Evans
Charles Bennett	Kath Evans	Salim Ghandorah
Chris Graham	Kathryn Gilmore	Sally Picken
Clare Maxwell	Keely Clawson	Sam Bray
Clare Enston	Kenny Holmes	Samuel Oliveira
Clive Flashman	Kevin Brent	Sarah Cattermole
Danby Bloch	Kim Rezel	Selina Trueman
Dany Bell	Kimberley Bennett	Sharon Boyd
Darren Hudson	Kuldeep Singh	Sharon Hui
Dawn Lee	Lady-Marie Dawson-Malcom	Sophie Cherrington
Denise Harvey	Laura Kinsey	Sue Honour
Elaine Marshall	Lee Bennett	Suze Mellor
Emdad Rashid	Linda Craig	Tahir Hussain
Emily Ellis	Lisa Young	Theresa Graser
Emma Friddin	Louise Blunt	Tony Kelly
	Maureen Dale	Tracey Ryan

The Patient Experience Network would like to extend its grateful thanks to all of the judges who gave so freely of their time and expertise in judging this year's Awards.



## Your Notes





## Your Notes





## Your Notes







# PEN National Awards 2024

RE:THINKING THE EXPERIENCE

## Your Notes





# PEN National Awards 2024

RE:THINKING THE EXPERIENCE

## Your Notes for Voting

Category	Winner	Your notes	Your rank



Our  
Partners:



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